Boston EMA Ryan White Planning Council

2023-2024

Planning Council Meeting

Thursday, October 12th, 2023
4:00 pm - 6:00 pm
Non Profit Center
89 South St.
Boston, MA 02111

Zoom Link: https://us02web.zoom.us/j/9178940335?pwd=bk94emJRZmZnSy9ONUJvZmhTMEM0QT09

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Welcome and Moment of Silence
Darren Sack, Planning Council (PC) Chair

4:00 pm

Attendance & Icebreaker
Planning Council Support (PCS)

4:05 pm

Sept. 14th, 2023 Minutes Review & Vote
Darren Sack, PC Chair

4:20 pm

Agency Updates & Committee Reports
MDPH, MassHealth, NH DHHS, BPHC & Committee Chairs

4:25 pm

RWSD CQM Introduction
Sarah Kuruvilla, RWSD Clinical Quality Management

4:40 pm

Service Standards Introduction
Melanie Lopez, RWSD Client Services

5:00 pm

Introduction to Service Categories
PCS

5:20 pm

Announcements, Evaluations, Adjourn!
Darren Sack, PC Chair

5:50 pm

Boston EMA Ryan White Planning Council

October 12th, 2023 | 4 – 6 PM | Nonprofit Center

Darren Sack, Chair
Margaret Lombe, Chair-Elect

Moment of Silence

At this moment, let's take a moment of silence in remembrance of those who came before us, those who are present, and those who will come after us.

Attendance

State "here" or "present" when you hear your name called.

We will call for members and BPHC staff then call for guests!

Ice breaker: Tell us how you feel today in hiking terms

1) **You are ready to hike, no map, just dive right in!**

2) **You are hesitant, but with a map and some friends, you know you can do it.**

3) **You are NOT going up that mountain at all today.**

Agenda

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Darren Sack, PC Chair	

Review & Approve Minutes

September 14, 2023 Minutes

- State your name to make a 1st or 2nd Motion to approve minutes
- Show of hands for approval/opposed/abstain in the room, poll on Zoom for those who are online

Reimbursement Reminder!

If you want to be reimbursed...
- Fill out your reimbursement forms ONLINE
- PCS can do your maps for you unless you tell them otherwise
- PCS may ask you to verify your form before sending it in for processing – PLEASE respond to these emails in a timely manner!
- You have <u>one week</u> after the meeting to get in all forms, receipts, and other documentation otherwise you will not be reimbursed for that meeting.

Forms live here:
https://3.basecamp.com/4260210/buckets/13124190/vaults/6545765585

Agency Updates

Melissa Hector | Mayoral Liaison
Barry Callis | MA Department of Public Health
Yvette Perron | NH Department of Health & Human Services
Alison Kirchgasser | MassHealth
Tegan Evans | Boston Public Health Commission

Committee Reports

MNC

- First meeting happened on Oct. 2
- Mentorship program discussion
- Reflectiveness discussion
- Stephen Batchelder was elected Vice Chair!

SPEC

- First meeting happened on Oct. 5
- Reviewed the service categories
- Vice Chairs nominated and election to happen in November

Consumer

- First meeting today!
- Introduction to Hana Wallen, anti-stigma campaign Intern
- Spoke Art led a workshop

First NRAC meeting is on Oct. 19!

Exec

- Reviewing our current attendance policy
- Reviewed orientation and first Council meeting evaluations

Presentation Objectives

- Anchor the Planning Council in the basics of Ryan White Clinical Quality Management Program (CQM)

- Share FY 2023 CQM Plans with the Planning Council

- Highlight the relevance of CQM to the Planning Council

What is CQM?

Pair Share: Reflect on the phrase, "quality of care", by considering the following questions:

- What comes to mind when you think quality of care?

- Do you think about quality of care when making health and health care decisions?

- How do you think your quality of care could be improved?

What is CQM?

The coordination of activities aimed at improving consumer care, health outcomes, and consumer satisfaction.

We do this through:

> Infrastructure
> Performance Measurement
> Quality Improvement

CQM Team

Sarah Kuruvilla
Sr. Program Manager

TBH
Sr. Program Coordinator
Performance Measurement

TBH
Sr. Program Coordinator
Quality Improvement

Claire Karafanda
Casual Employee
(temporary)

CQM Plans for FY 2023

Catching the Planning Council up on what CQM has been up to this year, and what's ahead.

BOSTON
PUBLIC
HEALTH
COMMISSION

Quality Goal 1:

To promote and sustain a culture of continuous Quality Improvement throughout the Ryan White HIV/AIDS Program in the Boston EMA.

FY 2023 Action Plan

Standard guidance on setting quality goals

QI goal-setting workshop

Strengthen CQM Committee processes, recruitment, and application process

Discussions about QI and Performance Measurement into the monthly contract management calls

Improve data displays

FY 2023 Action Plan

Incorporate CQM into Ryan White Case Manager training

BOSTON PUBLIC HEALTH COMMISSION

Quality Goal 2:

To increase the viral suppression rate among People Living with HIV/AIDS in the Boston EMA.

Improve e2Boston data quality, starting with outcomes submission rate

- Improve relevance and applicability of Performance Measures for most utilized services
- Train EMA in e2Boston use
- Improve e2Boston data entry processes and policies and reports
- Improve providers' understanding of Performance Measures

Improve Linkage to Care rate using a QI approach

Participate in the ESCALATE Learning Collaborative to plan and launch a stigma reduction initiative

BOSTON PUBLIC HEALTH COMMISSION

CQM & Planning Council

- Keep the Ryan White Planning Council informed of efforts to ensure quality and continuous improvement of funded services
  - Planning Council New Member Orientation
  - October CQM Check-In Presentation
  - February CQM Updates Presentation
- Opening space for Planning Council to provide feedback about quality programming
- What else?

Thank you

Questions?

cqm@bphc.org

RYAN WHITE PART A
SERVICE STANDARDS

MELANIE LOPEZ- SENIOR PROGRAM MANAGER

OBJECTIVES

- Provide an general overview of the Boston EMA Part A Service Standards

- Understand the process to make changes to the Service Standards, including the role of the Planning Council and RWSD

- Provide additional context to one of the votes conducted during the planning Council year.

Boston EMA

Ryan White
Planning Council

SERVICE STANDARDS OVERVIEW

One of the main deliverables between Planning Council and RWSD

Main governing documents for the EMA

Requirement for the Part A grant

SERVICE STANDARDS OVERVIEW

- Purpose ensures that all RWHAP service providers in Boston EMA offer the same fundamental components of the given service in a funded jurisdiction

- Establish the minimum level of service/care that an RWHAP funded agency is expected to offer within a funded jurisdiction

- Must be consistent with applicable clinical and/or professional guidelines, state and local regulations, and licensure requirements

- Each funded jurisdiction (EMA/TGA) develops its own Service Standards based on National Monitoring Standards, Policy Clarification Notice (PCN) 16-02, and local conditions/needs/requirements.

NATIONAL MONITORING STANDARDS

- Collection of federal requirements designed to help provide structure to Part A and B Ryan White HIV/AIDS services

- Developed by a national team of fiscal and program experts, Part A and Part B recipients, and other stakeholders

- Recipients and subrecipients must meet these federal requirements for program and fiscal management, monitoring, and reporting

chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/2023-rwhap-nms-part-a.pdf

PCN 16-02

- Federal requirements on eligible individuals and allowable uses of Part A funds.

- This PCN defines and provides program guidance for each of the Core Medical and Support Services named in statute and defines individuals who are eligible to receive these HRSA RWHAP services.

- Recipients and subrecipients must meet these federal requirements and compliance is subject to review during site visits and audits.

https://hab.hrsa.gov/sites/default/files/hab/program-grants-management/ServiceCategoryPCN_16-02Final.pdf

SERVICE STANDARDS FORMAT: UNIVERSAL

SERVICE STANDARDS FORMAT: SERVICE SPECIFIC

HRSA Description

⬇

Goal

⬇

Objective

⬇

Standard

⬇

Measure

12.0 Food Bank/Home Delivered Meals

HRSA Description:

Food Bank/Home Delivered Meals refers to the provision of actual food items, hot meals, or a voucher program to purchase food. This also includes the provision of essential non-food items that are limited to the following:

- Personal hygiene products
- Household cleaning supplies
- Water filtration/purification systems in communities where issues of water safety exist

Program Guidance:

- Unallowable costs include household appliances, pet foods, and other non-essential products.
- See Medical Nutrition Therapy. Nutritional services and nutritional supplements provided by a registered dietitian are considered a core medical service under the HRSA RWHAP.

Source: https://hab.hrsa.gov/sites/default/files/hab/program-grants-management/ServiceCategoryPCN_16-02Final.pdf

Goal: Prevent hunger and malnutrition among people with HIV.

Objective: Improve access to food sources and to improve nutrition for people with HIV with identified food security needs.

Standard	Measure
12.1 Documenting Service Delivery The agency must document the provision of food items, hot meals, food vouchers and/or allowable non-food items. Documentation must include: • Service provided • Amount of food, vouchers, and/or non-food items distributed • Number of clients served • Date of services	Record of service delivery in the client file.
12.2 Food Safety The agency must meet all requirements of the local and state health department for food handling and storage.	Record of certifications and licenses on file.
12.3 Agency Drivers All drivers delivering meals must hold a valid Massachusetts driver's license and automobile insurance consistent with state minimum requirements.	Personnel files of paid and volunteer drivers contain documents indicating valid driver's licenses.

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SCENARIOS REQUIRED TO UPDATE THE STANDARDS

The EMA adds a new service we need to develop standards for the service

HRSA guidance changes: For example-they recently removed the requirement for the 6 month-eligibility verification for Part A clients, so we need to update the universal standard re eligibility.

HRSA Project Officer requests that we update Standards based on site visit review

Local conditions change: For example, state licensure requirements for certain provider types.

We determine a need to clarify or change a standard based on subrecipient feedback, performance or significant changes needed for service delivery etc.

UPDATING THE SERVICE STANDARDS

November
- SPEC reviews standards and identifies proposed changes

December
- Submit proposed changes to RWSD for review and approval or discussion
- RWSD reviews and collaborates with SPEC to finalize changes
- RWSD submits the final draft for approval by SPEC
- SPEC approves standards for presentation to PC for a vote

January
- PC votes on standards

March
- RWSD updates and distributes updated standards

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PCS X RWSD ROLE

- SPEC Committee
  - Initiate revisions
  - Explains revision rationales with the general council
- SPEC Liaison
  - Provide any program updates in SPEC meetings (from subrecipients)
- RWSD
  - Revise Service Standards as needed and distribute to EMA

Introduction to Service Categories!

Planning Council Support

How are you feeling about service categories?

1 =
Wait, what are we talking about???

2

3

4

5 =
I've got this!

Let's prepare:

What are Service Categories???

Core medical and **support service** categories are important to assist in the diagnosis of HIV infection, linkage to and entry into care for PLWH, retention in care, and the provision of HIV care and treatment. To be an allowable cost under the HRSA RWHAP, all services must:

- Relate to HIV diagnosis, care and support
- Adhere to established HIV clinical practice standards consistent with U.S. Department of Health and Human Services' Clinical Guidelines for the Treatment of HIV and other related or pertinent clinical guidelines
- Comply with state and local regulations, and provided by licensed or authorized providers, as applicable.

Let's prepare:

Core vs. Support

Core services are typically all medical treatment related services.

Support services help to achieve medical outcomes (such as respite care for persons caring for individuals with HIV/AIDS, outreach services, medical transportation, linguistic services, and referrals for health care and support services)

Let's prepare:

Funded vs. Not Funded

Funded services =
These services receive some amount of **Ryan White Part A or Minority AIDS Initiative** funding allocated by the Planning Council

Not Funded Services =
Services that did *not* receive funding from **Ryan White Part A** allocated by the Planning Council, often still receive funding from either other parts of Ryan White or from State, Federal or private funding.

Core Medical Funded Services

AIDS Drug Assistance (ADAP/HDAP)	• State-administered authorized by Part B • Provides FDA-approved medications to clients who have limited or no health care coverage • May also be used to purchase health insurance for eligible clients and for services that enhance access to, adherence to, and monitoring of antiretroviral therapy
Medical Case Management, including Treatment Adherence Services including MCM/NMCM provider training	A range of client-centered activities focused on improving health outcomes in support of the HIV care continuum
Oral Health Care	• Activities include outpatient diagnosis, prevention, and therapy provided by dental health care professionals, including general dental practitioners, dental specialists, dental hygienists, and licensed dental assistants ***Boston EMA Addendum:*** *Services funded by this category include education for, outreach to, and recruitment of dental providers.*
Medical Nutrition Therapy	• Includes nutritional supplements provided by a licensed registered dietitian outside of an outpatient/ambulatory medical care visit • Food may be provided pursuant to a physician's recommendation and a nutritional plan developed by a licensed, registered dietician

Support Funded Services

Housing	• Provide transitional, short-term, or emergency housing assistance to enable a client or family to gain or maintain outpatient/ambulatory health services and treatment.
Non-Medical Case Management Services	• Guidance and assistance in accessing medical, social, community, legal, financial, and other needed services including other public and private programs for which they may be eligible *Boston EMA Addendum: Services offered under this category may include client advocacy, legal services, specialized assistance with benefits, and interpretation or other linguistic services*
Emergency Financial Assistance	• Limited one-time or short-term payments to assist with essential utilities, housing, food (including groceries, and food vouchers), transportation, and medication. • Emergency financial assistance (EFA) = direct payment to an agency or through a voucher program, direct cash payments to clients are not permitted
Food Bank/Home Delivered Meals	• Food delivery services • Voucher programs • Essential non-food items as needed • Water filtration/purification as needed
Psychosocial Support Services	• Group or individual support and counseling to assist eligible clients to address behavioral and physical health concerns **Boston EMA Addendum:** Services funded under this category include peer support, where the person providing the psychosocial support is a person infected with HIV and of the client's self-identified community.

Support Funded Services

Medical Transportation Services	• Nonemergency transportation services that enable an eligible client to access or be retained in core medical and support services
Health Education/Risk Reduction	• Education to clients living with HIV about HIV transmission and how to reduce the risk of HIV transmission. • includes sharing information about medical and psychosocial support services and counseling with clients to improve their health status • Includes education on risk reduction, PrEP, health care coverage options, health literacy and treatment adherence education
Other Professional Services (Legal/Permanency Planning)	• Legal services – services provided to and/or on behalf of the client involving legal matters related to or arising from their HIV statis, including assistance with public benefits, interventions necessary to ensure access to eligible benefits, including discrimination or breach of confidentiality litigation as it relates to services eligible for funding under the RWHAP • Permanency Planning - Services to help clients/families make decisions about the placement and care of minor children after their parent/caregivers are deceased or are no longer able to care for them
Linguistic Services	• Interpretation and translation services, both oral and written, to eligible clients

Services NOT funded by Part A

CORE	SUPPORT
Health Insurance Premium/Cost Sharing	Substance Use Services (Residential)
AIDS Pharmaceutical Assistance	Childcare Services (Not funded at all)
Mental Health Services	Referral for Health Care Support Services
Substance Use Services (Outpatient)	Outreach Services
Early Intervention Services	Rehabilitation Services
Home Health Care	Respite Care
Outpatient/Ambulatory Health Services	
Home and Community Based Health Services	
Hospice	

Refer to your Service Category Cheat Sheet!
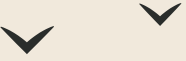
KAHOOT TIME!

Announcements

- October 21 4PM – 7PM - AccessHealth MA Fall Party at Big Night Live
- October 24 + 25 at 6PM - BPHC Sexual Health & Wellness Listening Sessions
- November 1st at 6PM – NEAETC Virtual Open Forum
- Fill out the meeting evaluation!!! →→→→→

Planning Council Meeting
Thursday, October 12, 2023
Non-Profit Center and Zoom
4:00 PM - 6 PM

Summary of Attendance

Members Present
Justin Alves
Daniel Amato
Mitchell Barys
Stephen Batchelder
Lamar Brown-Noguera
Henry Cabrera
Barry Callis
Joey Carlesimo
Moses Choi
Stephen Corbett
Larry Day
Damon Gaines
Beth Gavin
Robert Giannasca
Reginia Grier
Amanda Hart
Darian Hendricks
Gerald James
Lorraine Jones
Allison Kirchgasser
Liz Koelnych
Margaret Lombe
Shara Lowe
Carlton Martin
Ericka Olivera
Ethan Ouimet
Manuel Pires
Serena Rajabiun
Luis Rosa

Darren Sack
Romini Smith
Michael Swaney
Bryan Thomas
Catherine Weerts

Members Excused
Sandra Custudio
Melissa Hector
Jordan Lefebvre
Yvette Perron
Nate Ross
Mairead Skehan Gillis
Kim Wilson

Members Absent
Ulises Arias
Karen White

Staff
Claudia Cavanaugh
Clare Killian
Vivian Dang
Melanie Lopez
Roxy Dai
Glenda Morrabal
Tegan Evans

Guests
Brianne OlivieriMui

Topic A: Welcome and Introductions

The Chair of the Planning Council called the meeting to order and led a moment of silence. PCS team took roll call.

Topic B: Review 9.14.23 Meeting Minutes

Motion to Approve: Gerald James
Second: Bryan Thomas
Result: The 9.14.23 meeting minutes were approved by 73% on Zoom with 27% abstained, and 14 votes in person.

Topic C: Agency Updates and Committee Reports

Agency representatives give updates from their agencies

Mayoral Liason
- No updates

MA Department of Public Health
- Director position for the office of HIV/AIDS is posted, information will be shared to pass along to Council members.
- In response to LGBTQ aging commission- there was some commitment to improve inclusion of people living with HIV that are older. One of the commitments was to have a new factsheet for people with HIV that are 60+. Fact sheet has been drafted, will be going through internal review. Will be shared to Planning Council when it is ready.
- HRSA And CDC sent a joint summary statement, which was their collective feedback on integrated prevention in care plan.
- Information about the 1115 waiver amendment https://www.mass.gov/info-details/1115-masshealth-demonstration-waiver

NH Department of Public Health
- No updates

MassHealth
- During the Covid 19 public health emergency, MassHealth kept people enrolled, but that policy had ended April 1, 2023. Over the 12 months of April 1, 2023 through end of March 2024, MassHealth is in the process of renewing everyone's coverage.
- Be on the lookout for blue envelope when it is time to renew. Trying to automatically renew people based on Federal and state databases. People are allowed to call to check on their status in case of any questions or concerns regarding their status, auto-renewal, etc.
- MassHealth has an 1115 waiver that allows them to cover people and provide services beyond what you can cover under traditional Medicaid. The HIV coverage that goes up to higher income levels goes under this 1115 waiver. On August 2nd, MassHealth had posted for public comments some amendments MassHealth would like to make for the waiver, such as covering people in jails and prisons 90 days before their release. Going to request this through federal government.
- Health Connector- state agency that people go to buy health insurance who don't have Medicaid, Medicare, etc. Legislator just made a change that in addition to federal tax credits that help people get coverage through Health Connector, there are also state subsidies that keep cost sharing and premiums and copays low. Coverage for state subsidies are available for people with income up to 300% of federal poverty level. Additional eligibility for this starts January 1, 2024.

Boston Public Health Commission
- Reminder for Reimbursement: Because an invoice is a legal document, if you don't give them permission to edit it for you, they cannot do it.

- There's been recruitment for new staff, hoping to have found someone for Senior Coordinator position for Client Services. Actively recruiting for a Client Services Coordinator.
- In order for BPHC to meet site requirements for HRSA, BCPH has to have site visits to each subrecipients (32 of them) annually. In order to meet that mandate, BPHC has a contract with JSI to support that process. Starting to communicate to agencies about those site visits.
- Officially launched an option on their monthly newsletter and can find a link to that in all of their manager signatures when emailing with client services, etc. Can find it on their email a place to drop in and give feedback about what BPHC has to improve on or are doing well on.

MNC
- First meeting happened on Oct. 2
- Mentorship program discussion
- Reflectiveness discussion
- Stephen Batchelder was elected as Vice Chair!

SPEC
- First meeting happened on Oct. 5
- Reviewed the service categories
- Vice Chairs nominated and election will happen in November

Consumer
- First meeting today!
- Introduction to Hana Wallen, anti-stigma campaign Intern
- Spoke Art led a workshop
- New Chair is Darian Hendricks and Vice-Chair is Regina Grier

NRAC
- First NRAC Meeting will be on October 19th (next week)

Exec
- Reviewing our current attendance policy
- Reviewed orientation and first Council meeting evaluations

Topic D: RWSD QM Introduction

Sarah Kuruvilla, Senior Program Manager for CQM presents slides for Clinical Quality Management (CQM) Program Check-In

What comes to mind when you think quality of care?
Some members said:
- When I think about quality of care, I think of client/patient-centered care, working within scope, and referring to other professionals when necessary.
- Getting care that is backed up by sound research as being effective
- Quality of care means equitable offerings and services to all clients from their medical providers, case managers, and agencies clients go to for assistance and care.
- What comes to mind to me is bedside manner and rapport between provider and client, continuous care (retention), and positive health outcomes
- Non-judgmental care
- Having access in a timely manner

What is QCM?
- The coordination of activities aimed at improving consumer care, health outcomes, and consumer satisfaction.
    o Does this through:
        ▪ Infrastructure
        ▪ Performance Measurement
        ▪ Quality Improvement

CQM Plans for GY 2023
To promote and sustain a culture of continuous Quality Improvement throughout the Ryan White HIV/AIDS Program in the Boston EMA
- Standard guidance on setting quality goal
- QI goal-setting workshop
- Strengthen CQM Committee processes, recruitment, and application process
- Discussions about QI and Performance Measurement into the monthly contract management calls
- Improve data displays
- Incorporate CQM into Ryan White Case Manager training

To increase the viral suppression rate among People Living with HIV/AIDS in the Boston EMA
Improve e2Boston data quality, starting with outcomes submission rate

- Improve relevance and applicability of Performance Measures for most utilized services
- Train EMA in e2Boston use
- Improve e2Boston data entry processes and policies and reports
- Improve providers' understanding of Performance Measures

Improve Linkage to Care rate using a QI approach

Participate in the ESCALATE Learning Collaborative to plan and launch a stigma reduction initiative

CQM and Planning Council
Keep the Ryan White Planning Council informed of efforts to ensure quality and continuous improvement of funded services
- Planning Council New Member Orientation
- October CQM Check-In Presentation
- February CQM Updates Presentation
Opening space for Planning Council to provide feedback about quality programming

Topic E: Service Standards Introduction

Melanie Lopez, Senior Program Manager for Ryan White Services Division, presents slides on Ryan White Part A Service Standards

Service Standards Overview:
- Purpose ensures that all RWHAP service providers in Boston EMA offer the same fundamental components of the given service in a funded jurisdiction
- Establish the minimum level of service/care that an RWHAP funded agency is expected to offer within a funded jurisdiction

- Must be consistent with applicable clinical and/or professional guidelines, state and local regulations, and licensure requirements

- Each funded jurisdiction (EMA/TGA) develops its own Service Standards based on National Monitoring Standards, Policy Clarification Notice (PCN) 16-02, and local conditions/needs/requirements.

Topic F: Introduction to Service Categories

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- Relate to HIV diagnosis, care and support
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Core services are typically all medical treatment related services

Support services help to achieve medical outcomes (such as respite care for persons caring for individuals with HIV/AIDS, outreach services, medical transportation, linguistic services, and referrals for health care and support services)

Funded vs. Not Funded
Funded- These services receive some amount of **Ryan White Part A** or **Minority AIDS Initiative** funding allocated by the Planning Council

Not Funded- Services that did *not* receive funding from **Ryan White Part A** allocated by the Planning Council, often still receive funding from either other parts of Ryan White or from State, Federal or private funding.

PCS Goes over the different core and support services, giving them definitions and going over them with Council Members. Council Members play a game of Kahoot to go over the different service cateogories.

Topic G: Announcements, Evaluations, Wrap Up

Announcements:
- October 21st 4PM – 7PM - AccessHealth MA Fall Party at Big Night Live
- October 24 + 25 at 6PM - BPHC Sexual Health & Wellness Listening Sessions
  - Still in process of Needs Assessment, but want to do a hearing about what BPHC has seen so far and how they've been able to share this information out
- November 1st at 6PM – NEAETC Virtual Open Forum
  - Hoping to get more feedback from people with HIV, primary focus on MA

Guest is trying to learn from HIV community what their experience has been, so if Council members know anyone with HIV that has been in a nursing home, she has a grant to interview people, interviewees will get a $40 giftcard to share more information. Providers included.

Meeting to Adjourn
Motion: Stephen Batchelder
Second: Henry Cabrera
Result: The meeting was adjourned at 5:59pm.