



# LOS ANGELES COUNTY COMMISSION ON HIV

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While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Commission members. Only members of the Commission on HIV Health Services are accorded voting privileges, thus Commissioners who have not signed in cannot vote. Sign-in sheets are available upon request.

**Approved**  
**9/05/06**

## EXECUTIVE COMMITTEE MEETING MINUTES

July 31, 2006

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	HIV EPI AND OAPP STAFF	COMM STAFF/CONSULTANTS
Carla Bailey, <i>Co-Chair</i>	Quentin O'Brien	Cheryl Barrit	<i>None</i>	Jane Nachazel
Anthony Braswell, <i>Co-Chair</i>	Kathy Watt	Miki Jackson		Glenda Pinney
Al Ballesteros	Fariba Younai			Jim Stewart
Robert Butler				Craig Vincent-Jones
Whitney Engeran				Nicole Werner
William Fuentes				
Richard Hamilton				
Bradley Land				
Mario Pérez				

### CONTENTS OF COMMITTEE PACKET:

- 1) **Agenda:** Executive Committee Agenda, 7/31/2006
- 2) **Minutes:** Executive Committee meeting draft, 4/24/2006
- 3) **Minutes:** Executive Committee meeting draft, 5/24/2006
- 4) **Minutes:** Executive Committee meeting draft, 7/03/2006
- 5) **Memorandum:** Los Angeles County Commission on HIV Opposes the Ryan White CARE Modernization Act, 7/21/06
- 6) **Letter:** FOIA Response, Elizabeth Duke to Mario Perez, COAs, 5/01/06
- 7) **Commissioner Application:** Mario J. Pérez, 7/05/06

1. **CALL TO ORDER:** Mr. Braswell and Ms. Bailey called the meeting to order at 10:06 am. Self-introductions were made.
2. **APPROVAL OF AGENDA:**  
**MOTION #1:** Approve the Amended Agenda Order (*Passed by Consensus*).
3. **APPROVAL OF MEETING MINUTES:**  
**MOTION #2:** Approve the April 24, 2006 Executive Committee meeting minutes, as presented (*Passed by Consensus*).  
**MOTION #3:** Approve the May 24, 2006 Executive Committee meeting minutes, as presented (*Passed by Consensus*).  
**MOTION #4:** Approve the July 3, 2006 Executive Committee meeting minutes, as presented (*Passed by Consensus*).
4. **PARLIAMENTARIAN REMARKS:**
  - Mr. Stewart noted that, while Cheryl Barrit was attending on Nettie DeAugustine's behalf, she did not have the right to vote and comments could be limited by the Committee.
  - Mr. Land raised a concern mentioned at the last Commission meeting about Commissioners sharing personal views in public without identifying them as such. He noted that some federal and state bodies provide a "cheat sheet" for members to use in disclosing their status prior to making remarks. He suggested Mr. Stewart might develop something of that type.
  - Mr. Stewart felt a written piece was unnecessary. He suggested reinforcing member training and policy which emphasizes that no one represents the Commission without Co-Chair permission.
  - Mr. Land noted some Commissioners are more experienced than others.
  - ⇒ It was agreed that RD&B would review the subject to ensure training and support mechanisms were adequate.
5. **PUBLIC COMMENT, NON-AGENDIZED:** There were no comments.

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### 6. COMMISSION COMMENT, NON-AGENDIZED:

- Mr. Land noted that HALSA sponsored a forum pertaining to the California Supreme Court ruling on disclosure. He suggested inviting HALSA to provide a presentation to the Commission.
- Mr. Butler noted there has long been a policy that a PWHIV had no right to infect another. If courts now support disclosure of behavior that puts another at risk, he believes it is an understandable progression. He did not think it required a presentation.
- Mr. Engeran said he attended the meeting. He felt it was a relevant subject to be addressed in some form.
- Mr. Vincent-Jones said the Commission has an education role. This is a Supreme Court case and there is confusion about it. Those are good reasons to address it at the Commission.
- Mr. Butler said he was concerned because, while the decision is narrow, discussion on personal responsibility issues tends to balloon at the Commission. Any presentation should be carefully structured, he said.
- ⇒ Since the Public Policy Committee would not meet prior to the September Commission Meeting, it was agreed that Co-Chair Engeran would arrange an informative, but brief, presentation.

### 7. PUBLIC/COMMISSION COMMENT FOLLOW-UP: There were no comments.

### 8. CO-CHAIRS' REPORT:

#### A. Annual Meeting Planning:

- Locations are still being reviewed. St. Anne's is still available for a one-day meeting on Thursday, November 9<sup>th</sup>. Staff would also be doing a site visit at California Endowment that afternoon.
- Friday, November 10<sup>th</sup> is a holiday for some people in honor of Veteran's Day, November 11<sup>th</sup>. Mr. Vincent-Jones said he was concerned that could depress attendance since some offices might not want employees absent before a holiday. It was noted that not everyone has that day as a holiday.
- Mr. Engeran noted that St. Anne's would be cost-effective and everyone knew where it was.
- Mr. Stewart said, in his experience, having a special meeting in the same space as regular meetings tends to suppress creativity and productivity.
- Mr. Butler asked about the previous practice of floating the meeting from SPA to SPA. He had thought SPA 6 would host this year. Mr. Vincent-Jones said that had been discussed at the last meeting. It was felt that, finances being what they were, economy should take precedence. Mr. Butler said the community has anticipated consideration. Fiscal responsibility is not a new argument, since it has always been emphasized.
- Mr. Vincent-Jones agreed that changing the meeting to one day should not preclude reviewing various site options. He encouraged anyone with suggestions to submit them. SPAs that have not yet hosted a meeting are 6, 7 and 1, but 1 would require extra transportation expenses that are not feasible at this time.
- Ms. Jackson asked if moving the meeting was meant to encourage public attendance. In her experience, it did not.
- Mr. Butler replied that has been part of the reasoning. It was effective in Long Beach and the South Bay and, to a lesser extent, in Pasadena. He had hoped to use the annual meeting to encourage participation, for example, in SPA 6.
- It was noted that Outcomes had been selected as the meeting subject.
- ⇒ It was agreed that Mr. Butler will investigate potential meeting spaces along the 710 freeway. Numerous venues in that area are near the SPA 6-7 border and could draw interested parties from both.
- ⇒ Staff will follow through on the site visit for the California Endowment.

#### B. Title I Application Follow-Up/Planning:

- Mr. Vincent-Jones noted that the summary of the meeting with Emily Gantz McKay was in the last Commission packet and follow-up has begun. Follow-up with legislative representatives to address the application scoring issues will commence.
- In addition, several people have volunteered to help with the upcoming year's Title I application. OAPP is tentatively planning a first meeting with all interested parties on August 9<sup>th</sup>.
- Unmet Needs and MAI were the two areas Ms. Gantz McKay highlighted for additional attention. An ongoing MAI Subcommittee will be accelerating its pace in order to best contribute to the next application. A commitment was also made at the meeting, Mr. Vincent-Jones continued, for Priorities and Planning to develop an Unmet Needs Subcommittee and to survey providers for any additional unmet needs information already available.

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### 9. EXECUTIVE DIRECTOR'S REPORT:

#### A. Memorandum of Understanding (MOU):

- Mr. Vincent-Jones said it was his intent to complete a draft of the MOU shortly.
- Mr. Engeran noted there had been various motions at Commission meetings on MOU development and asked if they had been included. Mr. Vincent-Jones said they had been.
- ⇒ Mr. Vincent-Jones agreed to complete the draft and email to committee members for review.

### 10. OAPP REPORT:

- Mr. Pérez said OAPP, in association with the PPC, is preparing its CDC prevention application which is due September 15th.
- While they had previously been told the guidance would not change significantly from last year, it actually did. A two-week extension was requested and received.
- OAPP will be presenting more abstracts at the All Titles meeting than ever before.
- The Title I guidance has not yet been received. OAPP attempts to plan staffing resources to support both applications.
- Regarding Reauthorization, the duplication rate was influenced by other EMAs. Los Angeles County has a bigger infrastructure to address de-duplication issues. Sacramento may say that 14% is about right, but Los Angeles is estimated to have a much lower rate and San Diego, which began 18 months earlier as part of a pilot program, would be lower still.
- Mr. Pérez said it was important to carefully review the language used in communicating concerns. He advocated for OAPP and the Commission to communicate in a single voice to our allies in Washington.
- He felt there were still some alternate approaches that could make some sense. Lack of any CARE Act could cause significant problems.
- He said use of YR 16 as a base year was troubling. He felt Los Angeles County could receive an increase in YR 17, so that could be a better base year.
- Mr. Engeran asked if OAPP was willing to look at non-names data as part of the formula. Mr. Pérez said they did not want to be in the situation where HIV and AIDS cases counted in Texas and New York, but only AIDS cases in California. Mr. Pérez responded that to the extent that OAPP does not support some sense of legitimacy to the code-based system in California, the Secretary of Health and Human Services could simply throw out all California HIV data effective September 30<sup>th</sup>. Instead, if there's political will to accept code-based data for a year or two, Mr. Pérez would be better to advocate for a lower duplication percentage.
- Mr. Vincent-Jones said the Commission's concern was that use of adjusted code-based data, with 11,000 case reports still unknown, coupled with the loss of the "hold harmless" provisions in the current draft would actually result in a greater penalty than the 14% de-duplication reduction, as well as a greater loss of funds under the current legislation with hold harmless protections, even if the HIV case reports aren't counted.
- Ms. Jackson noted that family planning funds have been disbursed for over 15 years without Reauthorization. Those working with it have chosen to leave Reauthorization unaddressed since it was likely to impose new and onerous rules.
- Mr. Vincent-Jones noted that there are jurisdictions that feel California receives too much funding and has resources to compensate sufficiently for Federal reductions.
- Mr. Engeran encouraged additional discussion. Mr. Pérez agreed, stating he was concerned about the message the Commission had released, especially since recipients do not always distinguish among different voices in the EMA.
- He noted there were multiple potential outcomes. For example, there has been no formal language regarding the code-based proposal, as opposed to the proxy language which was formal language. There is no confirmation that the CDC will accept any code-based data, so the entire issue may be moot.
- There was general agreement that further discussions will be held, starting with the conference call discussed under Public Policy Committee, AB 2280 below.

11. **HIV EPIDEMIOLOGY REPORT:** There was no report.

12. **PREVENTION PLANNING COMMITTEE (PPC) REPORT:** There was no report.

### 13. STANDING COMMITTEE REPORTS:

#### A. Public Policy:

##### 1. CARE Act Reauthorization:

- Mr. Engeran called attention to a release in the packet detailing a position opposing the Modernization legislation—but not Reauthorization in general—due to a shift away from use of the proxy to estimate HIV cases and toward a structure that would inevitably undercount cases in California.

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- The document has been distributed to all principle parties: the Commission, principles at the County's DHS, Health Deputies, Public Policy mailing list, Title I and II contracted providers, Congressional delegation, the AIDS Partnership, other planning councils, *Los Angeles Times* and *In Magazine*.
- The Health Deputies from Supervisors Antonovich, Knabe and Molina have requested more information. Mr. Vincent-Jones said he would be speaking later today with the new Health Deputy from Supervisor Burke's office.
- He went on to note that Orange County had already taken that position. San Francisco is still determining what to do, but he felt the tone statewide was simply a debate on when to throw in the towel on a poor piece of legislation.
- Mr. Land suggested APLA might distribute information through its newsletter. Mr. Vincent-Jones suggested he speak with Ruel Nolledo, APLA, who is a Commissioner, but cautioned that APLA has not necessarily come to the same conclusion.
- Mr. Butler and Mr. Hamilton suggested that consumers would need more specific information pertinent to them. Mr. Vincent-Jones noted the last two pages of the memorandum summarize the loss of services and the loss of an independent planning council voice that are the key consumer threats.
- Mr. Hamilton asked about community action. Mr. Vincent-Jones responded that the Commission has fulfilled its educational role, and if consumers and other stakeholders wanted to pursue it, they would need to convince their representatives that the current form of the legislation is not acceptable—but the Commission was not in a place to advance the position further.
- Mr. Engeran elaborated that it was important to reiterate to everyone that the Commission does not oppose Reauthorization but, rather, the current, proposed version of the draft legislation.

### 2. **AB 2280 – HIV Testing:**

- Mr. Engeran noted that this bill was sponsored by AHF and he now works for them.
- There is now conversation about removing provisions that pertain to developing a new model for Counseling and Testing and retaining the STD portion only.
- Mr. Vincent-Jones noted that the original motion brought to the Commission was to ask the author to withdraw the bill if the HIV portion were handled administratively. Jeff Goodman had asked the Executive Committee to reconsider the motion on behalf of the Commission to entail requesting that the author withdraw the HIV portion of the legislation, but not the entire legislation. In discussion, it was noted that the Public Policy Committee had not discussed retaining the STD portion, so could not support that change to the motion. Mr. Goodman's proposed revision acknowledges that the Commission has not really focused on the STD portion and restricts the recommendation to the HIV portion.
- Mr. Pérez stated that the Public Health Department strongly supports the gonorrhea portion of the bill, but strongly opposes the HIV Counseling and Testing portion because they feel it would compromise care.
- He went on to note that the Public Health position had been presented to the CAO, though there has not as yet been a response. Meanwhile, he has shared with Dr. Fielding that he has had multiple conversations with people statewide on how counseling and testing could be improved. Some of the suggested changes are reflected in the bill, but can be addressed administratively. A more aggressive timeline is also being discussed, moving from July 2007 to October 1<sup>st</sup>. The State would need to approve changes since they provide most funding. They appear supportive.

**MOTION #5:** Modify Commission's stipulation to request that the author of AB 2280 withdraw the HIV provisions in the bill, but not the entire bill (*Passed by Consensus with Mr. Butler Abstaining*).

⇒ It was agreed to hold a conference call with Mr. Pérez, Mr. Vincent-Jones, both Commission Co-Chairs, the Public Policy Committee Co-Chair and one or two additional staff from OAPP to discuss the nature of expressing the Commission's position on the bill.

### 3. **Name-Based HIV Reporting:**

- Mr. Vincent-Jones recalled that the next question was whether to pursue technical amendments. Dr. Frye suggested that the three issues that might be addressed that way were: 1) clarifying reportable personal identifiers; 2) intent language clarifying that HIV reporting should be conducted in the same way as AIDS reporting; 3) retroactive reporting, though Mr. Vincent-Jones felt that would scuttle the request due to issues of informed consent.
- He received a message from the California Health Officers Association that said issues could be dealt with next year. He was uncertain what that meant, so expected to contact them in person.
- Peg Taylor returned July 28<sup>th</sup> and reported being shocked that the State had not yet responded to the Commission's letter. On following up, she found they planned to respond to all the letters at once with intent language.
- The official start date is April 17<sup>th</sup>, but there are still no statewide regulations. It will be necessary for the State DHS and Office of AIDS to agree on the regulations.

**4. Year 16 Title I Award Advocacy Plan:**

- Mr. Vincent-Jones said a response was received to the first FOIA request, sent in February, regarding Conditions of Award (COAs). It was delayed because it had been misaddressed.
- There has not yet been a response to the request for a visit, he added, though it is assumed the response will be no.
- He said he also thought it a possibility that they would not provide a section-by-section point breakdown of the award.
- Mr. Pérez said some points in the response might also merit follow-up since they appear to contradict other materials. Mr. Vincent-Jones agreed, though he felt there was little more to be gained.

**5. Other Measures/Initiatives:** There was no additional information.

**B. Standards of Care (SOC):**

**1. Medical Outpatient Rate Study(ies):**

- Mr. Braswell noted questions had been raised about the July Mercer presentation and asked for feedback on it.
- Mr. Engeran said he was not satisfied with the architecture description. He also said he felt that, while they said there was a synthesis of components, he did not see how the service descriptions linked up.
- Mr. Vincent-Jones said that Dr. Younai felt it was incumbent upon the Commission to review the service description to ensure that the standard of care has been appropriately integrated. She offered to do it, though has not had the opportunity. If she does not have the time, then staff could do it.
- Mr. Land said he did not get enough structure out of the presentation to understand the modalities that were collapsed into the rate. He felt it would significantly impact the Continuum of Care, but there had been no discussions about that.
- He went on to say the rate implications may vary significantly from more dense areas like Los Angeles to more sparse areas like the Antelope Valley. In the latter, there are barriers to care simply in finding providers willing to accept PWH/A. He said OAPP staff informally told him at the meeting that there would be runs at the end of September focusing on separate areas, but he is concerned.
- Mr. Braswell said he and Ms. Bailey had talked with a number of Commissioners. They suggested that Mercer do a presentation for the Executive Committee, which could summarize Commissioner concerns. Mr. Vincent-Jones noted that might not be feasible since they were based in the East and it would be an additional expense.
- Mr. Pérez said the rate architecture overview that was part of the PowerPoint included a brief description on the salary and employee benefit assumptions, based on Bureau of Labor statistics to support the staffing pattern. Employee-related expenses, program-related expenses and administrative expenses are the other three components of the rate architecture.
- He noted that he had not been involved at the beginning of the process, but was reminded by Mercer after the meeting that the Auditor-Controller selected them based on their proposed rate architecture.
- He went on to add that the service descriptions were based on the standards of care adopted by the Commission. Mr. Pérez concurred fully that the two should be consistent and that the Commission had an important planning body role in ensuring that.
- Mr. Vincent-Jones noted that Mercer began its process prior to the standards development process. At that time they used Public Health Services guidelines and the contracts to develop the service descriptions. As the standards were developed, Diana Vasquez and, following her, Jan King have affirmed that the standards were integrated into and aligned with the service descriptions.
- He went on to note that community input was handled poorly in the early period, which the SOC Committee had noted in a formal memo to OAPP. He felt that was one of Dr. Younai's primary concern.
- Mr. Pérez said he had investigated and found there was no written request for Mercer to work directly with the SOC. There had to be some interaction with Mercer, however, because Dr. Younai is quoted in the rate study.
- Mr. Vincent-Jones said that, while there were requests, they were all verbal and in the context of SOC meetings. He looked forward to developing a better process for tracking and following-up on those kinds of requests, since he felt it should not be necessary for everything to be in writing. A key area that impacted community feedback was that dates for forums were rescheduled at the last minute. Neither he nor Dr. Younai could attend for that reason, along with many others. There were phone calls to some people later, but that is different than a forum. They did, however, honor the request for a longer public comment period which evolved from the forum rescheduling concern.
- Mr. Pérez said the last item he wanted to note was that developing a formula for a pay standard consistent with need was something the Commission and OAPP rightly take seriously and OAPP welcomes the Commission's expertise. He said that Mr. Land's concern, however, was actually an implementation issue. It is an administrative agency

function to do the budget analysis and ensure there is no disruption of care in parts of the County where capacity is not as high, including how implementation of a fee-for-service rate architecture impacts contracts.

- Mr. Engeran cautioned that implementation would be challenging under any circumstances. It was important to ensure that any objections are carefully weighed both for the Commission's role and the legitimacy of issues.
  - Mr. Vincent-Jones added that SOC will be drawing up a policy to help guide the process. He continued to note that everyone at the table agrees fee-for-service will be of benefit, so it is important to be diligent in not wasting the effort, funds and previous Commission support by not moving forward through the work remaining with purpose and integrity.
- ⇒ It was agreed to have a conference call with Mercer in conjunction with the Executive Committee Meeting on Tuesday, due to the Labor Day Holiday, September 5<sup>th</sup>. The September 5<sup>th</sup> meeting will be 9:00 am to 12:00 noon in order to accommodate the call. Mr. Vincent-Jones will ensure the list of pertinent standards will be provided.

2. **Medicare Part D Follow-Up:**

- A panel to discuss Medicare Part D will be convened in the afternoon of August 16<sup>th</sup>. All consumers on the Commission will be invited. Letters are being sent to all the Service Provider Networks (SPNs) requesting both provider and consumer representatives. Julie Cross, from the State Office of AIDS, will attend.

3. **Standards of Care Schedule:**

- The expert panel for the last standard, Case Management, will be the morning of August 16<sup>th</sup>.
- There will be a four-hour SOC meeting on September 20<sup>th</sup> to evaluate the standards development process.
- There will be a special panel, as earlier agreed, on consumer client advocacy on the afternoon of September 20<sup>th</sup>.
- Either September 19<sup>th</sup> or 21<sup>st</sup>, depending on the consultants, will be the start of special population guideline development for women, transgenders and youth. In that process, six or so experts will initiate discussion. They will then seek community input on questions raised. Finally, they will return the following month with input.

4. **Quality and Standards Master Plan:** There will be a presentation at the September Commission Meeting.

C. **Recruitment, Diversity and Bylaws (RD&B):**

1. **Member Duty Statements:** There were no duty statements available for review.

2. **Member Nominations:**

- Mr. Butler noted that Mr. Pérez's nomination had not been scored since the Committee lacked a quorum at that meeting. However, since the Ordinance calls for the Director of OAPP to be in that seat, the nomination can move forward with the application scored later.
- Because the Ordinance specifies that the Director of OAPP must fill this seat, Mr. Pérez is the only qualified person for the seat. That being the case, the Executive Committee used its authority to vote on behalf of the Commission.

**MOTION #6:** Forward nomination of Mario Pérez to the Board of Supervisors for appointment to the Commission on HIV in the non-voting seat representing the Office of AIDS Programs and Policy (*Passed by Consensus*).

3. **Leave of Absence Policy:**

- Mr. Vincent-Jones noted that the way both the law and the Ordinance work prohibits temporary replacements, and Long Beach does not have recourse to replace Nettie De Augustine on the Commission during her six-month leave of absence.
- The only option in Federal law is alternates, but, alternates are reserved for members with HIV, in recognition of their health conditions.
- Mr. Vincent-Jones added that the City of Long Beach could choose to appoint a new member, but, by the time a new member was appointed, it would take minimum of three months, and probably longer, and Ms. De Augustine would be returning.
- The Committee is suggesting that the person taking leave appoint a designee. The person could then sit at the table as a non-voting member. If that is acceptable, a policy to that effect will be written and brought forward.
- Mr. Braswell recommended limiting leaves to six months or less.
- Mr. Engeran felt that cities, like Long Beach, should be able to maintain a voting seat. Mr. Vincent-Jones replied that County Counsel had informed the Commission during the last Ordinance years ago that seats may be vacated only by resignation or if the Board replaces the member (assumed it would be at the request of the recommending entity/Commission).
- The following motion was proposed for the Executive Committee to vote as an operating principle and be brought forward to the Commission in September for ratification.

**MOTION #7: (Braswell/Land):** If anyone vacates a seat for a period of six months or less, the person can appoint alternate representation to sit at the table and represent that entity with all rights except the vote (*Passed by Consensus*).

- ⇒ It was agreed to return to the RD&B Committee the issue of how to address co-chair or at-large responsibilities associated with the seat. As written, the above motion would permit all functions to be filled. Mr. Engeran felt such

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functions were not best viewed as associated with representation of the seat's entity, but a choice for the individual who had been filling it and would therefore not be filled by the appointee.

D. **Finance:** There was no report.

E. **Priorities and Planning (P&P):** There was no report.

14. **WORK PLAN:**

A. **Upcoming Commission Meeting Agenda:** The draft agenda was in the packet.

B. **Prioritization:** There was no discussion.

C. **Assignments:** There was no additional discussion.

D. **Annual Calendar:** There was no additional discussion.

15. **ANNOUNCEMENTS:** There were no announcements.

16. **ADJOURNMENT:** The meeting was adjourned at 12:20 pm.