

Planning Committee 2009-2010 Year-End Report

June 2010

Boston EMA Part A
HIV/AIDS Health Services
Planning Council



Produced by Planning Council Support Services
1010 Massachusetts Avenue
Boston, MA 02118
www.bostonplanningcouncil.org

Table of Contents

I. Introduction

A. Committee Charge	2
B. Committee Membership	2
C. Committee Meetings	2

II. Work of the Committee

A. Service Category Re-evaluation and Recommendations	3
B. 2010 Needs Assessment	4
C. FY2011 Priority Setting Exercise	4

III. Recommendations for the 2010-2011 Planning Council Term

A. Recommendations for the 2010-2011 Planning Committee	5
B. Recommendations for the 2010-2011 Planning Council	6

IV. Appendices

A. FY2011 Service Category Recommendations	7
B. FY2011 Priority-Setting Exercise	8
C. FY2011 Priority-Setting Exercise Guide and Worksheet	9
D. FY2011 Service Category Definitions	11
E. FY2011 Service Category Definition Summary ('Cheatsheet')	13

The 14 recommended categories were as follows, in alphabetical order:

- **AIDS Drug Assistance Program**
(Drug Reimbursement)
- **Case Management, Non-Medical**
(Client Advocacy)
- **Early Intervention Services**
(New Category)
- **Food Bank/Home-Delivered Meals**
(Food Services)
- **Housing Services** (Housing)
- **Medical Case Management**
(Case Management)
- **Medical Nutrition Therapy**
(New Category)
- **Medical Transportation Services**
(Transportation)
- **Mental Health** (Mental Health)
- **Oral Health Care** (Dental)
- **Outpatient/Ambulatory Medical Care**
(Primary Medical Care)
- **Psychosocial Support** (Peer Support)
- **Substance Abuse Services—
Outpatient** (Substance Abuse)
- **Substance Abuse Services—
Residential** (Substance Abuse)

The service category recommendations were presented to the Planning Council on February 11, 2010 and were approved by the Planning Council on March 11, 2010.

B. Develop the 2010 Needs Assessment and Present it to the Planning Council

The Planning Committee, in collaboration with the Evaluation Committee and with the help of Planning Council Support, developed the *2010 Needs Assessment* report. The *2010 Needs Assessment* was intended to identify the potential service needs and services available to people living with HIV in the Boston EMA; to examine the capacity of the current service system and the resources available; to assess whether the expenditure of resources was focused on populations most in need and health conditions of greatest importance; and to determine whether PLWH could effectively obtain and maintain HIV health and health related services. The *2010 Needs Assessment* was finalized in February 2010 and presented to the Planning Council at its meeting of February 11, 2010.

C. Revise and present FY2011 Priority Setting to the Planning Council

Every year, the Planning Council, with the help of the Planning Committee, ranks service categories in priority order. This priority ranking is used to help the Resources and Allocations Committee make its decisions in setting levels of funding for each service category. The Planning Committee reviewed and approved the Priority Setting tool (Appendix B) at its March 1, 2010 meeting. The Committee prepared a worksheet to help Council members rank the service categories (Appendix C), along with a sheet giving the definitions of the service categories (Appendix D). A summary of the service category definitions was developed to help the Committee explain the categories to Planning Council members (Appendix E).

The FY 2011 Priority Setting tool and the worksheet were presented to the Executive Committee at its February 25, 2010 meeting, and presented to the Planning Council at the March 11, 2010 meeting.

The Priority Setting results were voted on and approved at the Planning Council meeting of April 8, 2010.

The FY2011 service categories were ranked as follows:

Priorities for FY 2011	
1. AIDS Drug Assistance Program (ADAP/HDAP)	8. Food Bank/Home-Delivered Meals
2. Outpatient/Ambulatory Medical Care	9. Substance Abuse Services – Outpatient
3. Medical Case Management	10. Psychosocial Support
4. Housing Services	11. Substance Abuse Services – Residential
5. Mental Health	12. Early Intervention Services
6. Case Management, non-medical	13. Medical Transportation Services
7. Oral Health Care	14. Medical Nutrition Therapy

III. Recommendations for the 2010-2011 Planning Council Term

A. Recommendations for the 2010-2011 Planning Committee

- At the start of the term, give a time line of major tasks to be completed during the term, including what tasks need to be accomplished and what presentations need to be made at various points during the term.
- Work to have a balance of new and experienced Planning Council members on the Committee.
- Continue using a worksheet to help members complete the Priority-Setting Exercise.
- Devote time in the first meetings of the term to an intensive orientation on the Planning Council and the Planning Committee’s work.
- Emphasize Planning Council Support’s availability to Planning Council and Planning Committee members with questions.
- Evaluate the need for day care and respite care services in the Boston EMA.

B. Recommendations for the 2010-2011 Planning Council

- Continue the mentorship program and monitor its quality.
- Create a resource sheet with a list of reports and presentations given to the Planning Council and brief synopses of them.
- Emphasize the importance of committee attendance and the time commitment involved.
- Ensure that time is allocated during the first Planning Council meeting for a formal meeting between mentors and mentees.

**Appendix A:
Recommended Service Categories
For FY11**

Appendix A
Recommended Service Categories for FY11:

Core and Support

(In alphabetical order)

CORE (8)	SUPPORT (6)
AIDS Drug Assistance Program (ADAP/HDAP) <i>(Drug Reimbursement)</i>	Case Management, Non-Medical <i>(Client Advocacy)</i>
Early Intervention Services *	Food Bank/Home-Delivered Meals <i>(Food Services)</i>
Medical Case Management <i>(Case Management)</i>	Housing Services <i>(Housing)</i>
Medical Nutrition Therapy *	Medical Transportation Services <i>(Transportation)</i>
Mental Health <i>(Mental Health)</i>	Psychosocial Support <i>(Peer Support)</i>
Oral Health Care <i>(Dental)</i>	Substance Abuse Services –Residential <i>(Substance Abuse)</i>
Outpatient/Ambulatory Medical Care <i>(Primary Care)</i>	
Substance Abuse Services –Outpatient <i>(Substance Abuse)</i>	

* *New service category added from HRSA List.*

**Appendix B:
FY11 Priority Setting Exercise Ballot**

Appendix B

BALLOT

Priority Setting Exercise for FY11

1. Remember this exercise is a forced choice exercise. This means all the categories are **important** but you are being asked to rank the importance of each service category from 1-14, with 1 being **the highest priority**.

For most participants this will be a difficult task. Remember your input is an important part of the Planning Council cycle. Members' answers will vary based on their individual knowledge and experience in the EMA.

2. Rank the categories based on **your understanding of which services are most needed by individuals with HIV/AIDS within the EMA**.
3. In the table below, rank the categories by priority level (1 is the highest priority, 14 is the lowest priority). **Be sure to rank all the listed categories.**

Rank Order 1-14	FY11 Categories <i>(In alphabetical order)</i>
	AIDS Drug Assistance Program (ADAP/HDAP)
	Case Management, Non-Medical
	Early Intervention Services
	Food Bank/Home-Delivered Meals
	Housing Services
	Medical Case Management
	Medical Nutrition Therapy
	Medical Transportation Services
	Mental Health
	Oral Health Care
	Outpatient/Ambulatory Medical Care
	Psychosocial Support
	Substance Abuse Services - Outpatient
	Substance Abuse Services - Residential

**RETURN THIS PAGE TO PLANNING COUNCIL SUPPORT.
THE RESULTS WILL BE GIVEN AT THE END OF THE COUNCIL MEETING.**

Appendix C:
FY11 Priority Setting Exercise Worksheet

Appendix C GUIDE

Priority Setting Exercise, FY11 Boston EMA 2009-2010

- **The Priority Setting Process**

Priority setting is the process of ranking the Part A service categories to reflect the needs of people living with HIV/AIDS in the EMA. Each year, the Council sets service priorities for the upcoming year.

Priority Setting Cycle

The **previous** year is **Fiscal Year (FY)09** which ended on **February 28, 2010**.

The Council's **current** year is **FY10** which began **March 1, 2010**.

The Council will set priorities for **next year, FY11, which starts March 1, 2011**.

- **What Information is used in the Priority Setting Decision Making Process?**

1. Epidemiological trends in the EMA; Suffolk and JSI outcomes surveys, the Assessment of Need and the Comprehensive Plan, other studies, reports or presentations you have seen; and personal experiences as an informed consumer, provider, or advocate.

- **How Does the Priority Setting Process Relate to Other Council Work?**

The Council sets priorities based on the current list of service categories.

The 3 steps of the process are:

1. The Council defines the needs of the EMA by prioritizing service categories.
2. The Resources and Allocations (R&A) Committee then examines the existing resources in the EMA; identifies where the funds will be most utilized as a “payer of last resort”; assesses the overall needs of the EMA service system; and determines how the funds can be most effectively allocated.
3. The R&A Committee presents the recommendations on allocation levels to the full Planning Council for review, discussion, and vote.

- **Why Does Priority Setting Occur Independently of Resource Allocation?**

There are many funding “streams” that support HIV/AIDS services in the Boston EMA; for instance, Housing Options for People With AIDS (HOPWA) and the Bureau of Substance Abuse Services (BSAS) are two examples of other sources of funds outside of the Part A Ryan White HIV/AIDS Treatment Extension Act funding stream. The R&A Committee might recommend that a high priority category should receive a relatively low Part A funding allocation if that category of service is provided through other federal monies or through the state.

Boston EMA Part A Service Categories to be Ranked by the Council

AIDS Drug Assistance Program (ADAP/HDAP)	Medical Transportation Services
Case Management, Non-Medical	Mental Health
Early Intervention Services	Oral Health Care
Food Bank/ Home-Delivered Meals	Outpatient/Ambulatory Medical Care
Housing Services	Psychosocial Support
Medical Case Management	Substance Abuse Services – <i>Outpatient</i>
Medical Nutrition Therapy	Substance Abuse Services – <i>Residential</i>

WORKSHEET

Priority Setting Exercise, FY11

1. Please use this **optional worksheet** to help you carry out the Priority-Setting Exercise, if it would be helpful.
2. To use the worksheet, take the Part A service categories from Table 1 and copy them into Table 2 in priority order (1 = highest priority).
3. Once you've completed the worksheet, copy the results over onto the Priority-Setting Exercise and turn that in to Planning Council Support. **Please do not turn in the worksheet.**

Table 1. Boston EMA Part A Service Categories for FY11

(In alphabetical order)

AIDS Drug Assistance Program (ADAP/HDAP)	Medical Transportation Services
Case Management, Non-Medical	Mental Health
Early Intervention Services	Oral Health Care
Food Bank/ Home-Delivered Meals	Outpatient/Ambulatory Medical Care
Housing Services	Psychosocial Support
Medical Case Management	Substance Abuse Services – <i>Outpatient</i>
Medical Nutrition Therapy	Substance Abuse Services – <i>Residential</i>

Table 2. Priority Order of Service Categories

Rank	FY11 Categories
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	

**Appendix D:
Service Category Definitions
For FY11**

Appendix D

SERVICE CATEGORY DEFINITIONS FOR FY11

Recommendations to the Boston EMA Ryan White Part A HIV Health Services Planning Council, March 2010.

SERVICE CATEGORY <i>(In alphabetical order)</i>	DEFINITION
AIDS Drug Assistance Program (ADAP/HDAP) <i>(Drug Reimbursement)</i>	A State-administered program authorized under Part B of the Ryan White Program that provides FDA-approved medications to low-income individuals with HIV disease who have limited or no coverage from private insurance, Medicaid, or Medicare.
Case Management, Non-Medical <i>(Client Advocacy)</i>	Include advice and assistance in obtaining medical, social, community, legal, financial, and other needed services. Non-medical case management does not involve coordination and follow-up of medical treatments. Boston EMA Addendum: <i>Services offered under this category may include client advocacy, legal services, specialized assistance with benefits, and interpretation or other linguistic services.</i>
Early Intervention Services *	Include counseling individuals with respect to HIV/AIDS; testing (including tests to confirm the presence of the disease, to diagnose the extent of immune deficiency, and to provide information on appropriate therapeutic measures); referrals; other clinical and diagnostic services regarding HIV/AIDS; periodic medical evaluations for individuals with HIV/AIDS; and provision of therapeutic measures.
Food Bank/ Home-Delivered Meals <i>(Food Services)</i>	The provision of actual food or meals. It does not include finances to purchase food or meals, but may include vouchers to purchase food. The provision of essential household supplies, such as hygiene items and household cleaning supplies, also should be included in this item. The provision of food and/or nutritional supplements by a non-registered dietician should be included in this item as well.
Housing Services <i>(Housing)</i>	Short-term assistance to support emergency, temporary, or transitional housing to enable an individual or family to gain or maintain medical care. Housing-related referral services include assessment, search, placement, advocacy, and the fees associated with them. Eligible housing can include both housing that does not provide direct medical or supportive services and housing that provides some type of medical or supportive services, such as residential mental health services, foster care, or assisted living residential services.
Medical Case Management <i>(Case Management)</i>	A range of client-centered services that link clients with health care, psychosocial, and other services. The coordination and follow-up of medical treatments are a component of medical case management. These services ensure timely and coordinated access to medically appropriate levels of health and support services and continuity of care through ongoing assessment of the client and other key family members' needs and personal support systems. Medical case management includes the provision of treatment adherence counseling to ensure readiness for, and adherence to, complex HIV/AIDS treatments. Key activities include: (1) initial assessment of service needs; (2) development of a comprehensive, individualized service plan; (3) coordination of services required to implement the plan; (4) client monitoring to assess the efficacy of the plan; and (5) periodic reevaluation and adaptation of the plan as necessary over the life of the client. It includes client-specific advocacy and review of utilization of services. This includes all types of case management, including face-to-face, telephone, and any other forms of communication. Boston EMA Addendum: <i>Services are to be offered in a variety of locations which may include one or more of the following venues: the agency or office setting, home visits, or other community-based settings.</i>

Medical Nutrition Therapy *	Is provided by a licensed registered dietitian outside of a primary care visit. The provision of food may be provided pursuant to a physician's recommendation and a nutritional plan developed by a licensed, registered dietitian. Nutritional services and nutritional supplements not provided by a licensed, registered dietitian shall be considered a support service. Food not provided pursuant to a physician's recommendation and a nutritional plan developed by a licensed, registered dietitian also shall be considered a support service.
Medical Transportation Services <i>(Transportation)</i>	Conveyance services provided, directly or through a voucher, to a client to enable him or her to access health care services.
Mental Health <i>(Mental Health)</i>	Psychological and psychiatric treatment and counseling services for individuals with a diagnosed mental illness. They are conducted in a group or individual setting, and provided by a mental health professional licensed or authorized within the State to render such services. Such professionals typically include psychiatrists, psychologists, and licensed clinical social workers.
Oral Health Care <i>(Dental)</i>	Diagnostic, preventive, and therapeutic services provided by a dental health care professional licensed to provide health care in the State or jurisdiction, including general dental practitioners, dental specialists, and dental hygienists, as well as licensed and trained and dental assistants. Boston EMA Addendum: <i>Services funded by this category include education for, outreach to, and recruitment of dental providers.</i>
Outpatient/Ambulatory Medical Care <i>(Primary Care)</i>	The provision of professional diagnostic and therapeutic services rendered by a physician, physician's assistant, clinical nurse specialist, nurse practitioner, or other health care professional who is certified in his or her jurisdiction to prescribe antiretroviral (ARV) therapy in an outpatient setting. These settings include clinics, medical offices, and mobile vans where clients generally do not stay overnight. Emergency room services are not considered outpatient settings. Services include diagnostic testing, early intervention and risk assessment, preventive care and screening, practitioner examination, medical history taking, diagnosis and treatment of common physical and mental conditions, prescribing and managing medication therapy, education and counseling on health issues, well-baby care, continuing care and management of chronic conditions, and referral to and provision of specialty care (includes all medical subspecialties). Primary medical care for the treatment of HIV infection includes the provision of care that is consistent with the PHS's guidelines. Such care must include access to ARV and other drug therapies, including prophylaxis and treatment of opportunistic infections and combination ARV therapies.
Psychosocial Support <i>(Peer Support)</i>	Support and counseling activities, child abuse and neglect counseling, HIV support groups, pastoral care, caregiver support, and bereavement counseling. They include nutrition counseling provided by a non-registered dietitian, but exclude the provision of nutritional supplements. Boston EMA Addendum: <i>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.</i>
Substance Abuse Services --Outpatient <i>(Substance Abuse -Outpatient)</i>	Medical or other treatment and/or counseling to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in an outpatient setting by a physician or under the supervision of a physician, or by other qualified personnel.
Substance Abuse Services --Residential <i>(Substance Abuse-Residential)</i>	Treatment to address substance abuse problems (including alcohol and/or legal and illegal drugs) in a residential health service setting (short-term).

* New service category added from HRSA List.

**Appendix E:
Service Category Definition
Summaries**

Appendix E

SERVICE CATEGORY DEFINITION SUMMARIES

Priority Setting, 3/11/2010

These summaries were used to help Planning Council members understand the different service categories as they moved through the Priority-Setting process.

Service Category Name	Service Category Definition Summary
AIDS Drug Assistance Program (ADAP)	Individuals with limited or no insurance receive FDA-approved medications.
Non-Medical Case Management	Advice and assistance obtaining needed services such as client advocacy, legal services, specialized assistance with benefits, and interpretation or other linguistic services.
Early Intervention Services	Counseling, testing, information, referrals, and follow-up
Food Bank/Home-Delivered Meals	Food or meals, essential household supplies, and vouchers.
Housing Services	Short-term assistance for emergency, temporary, or transitional housing and referral.
Medical Case Management	A range of services linking clients with health care, psychosocial, and other services offered in a variety of settings.
Medical Nutrition Therapy	Food, nutritional services, and nutritional supplements provided by a licensed registered dietician.
Medical Transportation Services	Transportation services provided directly or through a voucher to enable access to health care services.
Mental Health	Psychological and psychiatric treatment and counseling with a diagnosed mental illness.
Oral Health Care	Diagnostic, preventative, and therapeutic dental services, as well as recruitment of providers.
Outpatient/Ambulatory Medical Care	Primary medical care.
Psychosocial Support	Supportive counseling activities, including peer support provided by people living with HIV.
Substance Abuse Services <i>Outpatient</i>	Treatment and counseling for substance abuse problems in an outpatient setting.
Substance Abuse Services <i>Residential</i>	Treatment and counseling for substance abuse problems in a residential setting.