



Planning Council

MEETING SUMMARY

Wednesday, November 20, 2019 1:30 – 3:00PM
 Willing Heart Community Center
 555 Martin Luther King Blvd. Newark, NJ 07102

Present	Excused Absences	Unexcused Absences
1. Janice Adams-Jarrells 2. Ketlen Alsbrook 3. Ann Bagchi, PhD 4. Kendall Clark 5. Cezar Dumago (Secretary) 6. Wanda Figueroa, MD 7. Juanita Howell 8. Dr. Robert L. Johnson (Chair) 9. Elizabeth Kocot 10. Joann McEniry (Vice-Chair) 11. Patricia Moore (Treasurer) 12. Debbie Morgan 13. Walter Okoroanyanwu, MD 14. Aliya Onque (Non-Voting) 15. Dominga Padilla, MD 16. Warren Poole 17. Mario Portilla 18. Sharon Postel (Non-Voting) 19. Providencia Rodriguez 20. War Talley 21. Calvin Toler	22. James Carrington 23. Ricardo Salcido	24. Wali Bradley 25. Natalie Brown-Muhammad 26. Vieshia Morales 27. Rev. Don Ransom

Guests: Martha Downey, Charla Cousar, Lara Dykstra and Chelsea Betlow (New Jersey Department of Health), Samarie Rivera

Support Staff: Tania Guaman, Vicky Saguy

1. Welcome & Moment of Silence

Dr. Robert L. Johnson, Planning Council Chair, called the meeting to order at 1:31 PM. Dr. Johnson welcomed all attendees and called for a moment of silence for those affected, for those who have passed, and those living with HIV/AIDS.

2. Roll Call

Cezar Dumago, Planning Council Secretary, conducted the roll call for this meeting. Quorum was established during.

3. Public Testimony

There was no public testimony at this meeting.

4. Approval of the Meeting Summary from October 16, 2019

The October 16th meeting summary was reviewed. Dr. Johnson (PC Chair) called for a motion to approve the meeting summary. Warren Poole motioned to approve. Mario Portilla seconded the motion. The meeting summary was approved unanimously. There were no abstentions.

5. Report from the Recipient

Ketlen Alsbrook, Recipient, provided the following report:

- By November 8, the Recipient received forty-one 2020 Ryan White Part A funding applications, which included two returning applicants and one new applicant. One applicant did not meet the 4PM deadline and their application was not considered. All accepted applications were sent to the Peer-Reviewed Panel for external evaluation. There are 25 individuals in the Peer-Review Panel with experience in Public Health, HIV/AIDS Services, and other Social Services. The Peer Review session will be held on December 16 and 17.
- The 2020 Projected Award Letter was received. The letter includes the projected formula award funding of \$7,233,542 with a difference of \$28,325 from the previous year and a 0.5% decrease. The MAI projection is \$1,215,985 with a difference of \$146,390 and a 11% decrease. Overall, there is a difference of \$175,000 of projected award, which is a 2% overall decrease. This projected letter of Funding does not include the supplemental component of the award, which counts as 30% of the final award received each year.
- Steve Young (Director for Metropolitan HIV/AIDS program) has retired as of November 9th. The new Acting Director for the Metropolitan HIV/AIDS program is Chrissy Abrahams-Woodland.
- Two successful End the HIV Epidemic meetings between Essex County, Hudson County, and the State Division of HIV, STD and TB Services were held. The NJ Assistant Commissioner, Chris Menschner, has coordinated these efforts. As a next step, the team will draft a plan which will reflect the situational analysis of Hudson, Essex County and the state, the Needs Assessment for Essex and Hudson County, the commonalities, and differences between both regions and what the shared objective will be with respect to Ending the HIV Epidemic. Based on the meeting with Hudson County, a similar approach was noted with an emphasis on Housing, increasing linkage rates for those newly diagnosed, and incorporating community health workers & patient navigators to make sure people have seamless entrance into care and are adequately retained in care.
- As part of the anticipated EHE funding, the Recipient's office is in the process of recruiting an EHE Coordinator that will take the lead in implementing the grant once received. Alsbrook explained that the person in this role must have experience in the Ryan White Program and intimate knowledge of the services provided within the program for at least a year or two, as well experience with administrative and program management. A master's degree is desired but not required. Residency requirements have not been decided yet, but if the position becomes permanent within the Department, Newark residency will be required. The State has offered to provide transitional support to bring the person aboard until the official letter of award is received from HRSA.

6. Standing Committee Updates

- COC: Mario Portilla

Mario Portilla (COC Chair) provided the report. The COC did not meet in November and will continue to review the Standards of Care at the next meeting. Mario Portilla added that the COC is waiting for guidance from the Recipient to reformat the Standards of Care. Portilla explained that

the standards that are reviewed by the committee will be introduced to the Planning Council in January.

Ketlen Alsbrook, Recipient, explained that the Recipient is reformatting the Standards and developing Universal Standards with requirements that apply to all service categories. The Universal Standards will cover the Client Eligibility determination process, the certification process, the six-month recertification, and access among others. Meanwhile, she explains the Service specific Standards will cover what is required and allowed on those specific service categories.

The next COC meeting will be held on Thursday, December 12, 2019 at the Willing Heart Community Center located at 555 Martin Luther King Jr. Blvd. Newark, NJ 07102.

- **CPC: Joann McEniry**

Joann McEniry (CPC Chair) provided the committee report. The last CPC Meeting was held on Friday, November 8th. The following occurred at that meeting:

- The CPC reviewed the HIV Integrated Prevention and Care Plan progress report with outcomes data from 2016 to 2018, which indicated the following:

GOAL: Link 90% of newly diagnosed PLWHA to care within 30 days (Linkage is defined as a medical visit, blood work and ARV start)

- Outcome: Based on CHAMP data, the EMA linkage total is low, declining from 69.1% in 2016 to 60.2% as of 12/31/18. Youth (13-24) had the highest rate of meeting the goal with almost 70%, followed by MSM with 63.4%. Overall, those target populations are performing better.
- Recommendation: Keep the linkage to care goal at 90% for all target populations. Perform case studies on those not linked to care within 30 days following HIV diagnoses, reasons, and identify and implement performance improvement activities.

GOAL: Decrease the Gap in Medical Visits to 10% EMA-wide

- Outcome: Based on CHAMP data, the EMA total is high, increasing from 13.2% in 2016 to 15.1% as of 12/31/18. The only population meeting the goal is youth at 5.6%.
The gap in Medical visit represents a reserve indicator of the percentage of clients who had a medical visit during the first half of the year but may or may not had a second visit during the other half. Medical visits are supposed to be twice a year. In other words, the gap is the percentage of individuals who did not have a second visit.
- Recommendation: Keep the gap measure at 10% for all target populations except Youth (13-24). Implement PDSAs and performance improvement activities for those exceeding 10%. Revise youth measure since they are meeting the goal.

GOAL: Increase Viral Load Suppression (VLS) to at least 80% EMA-wide

- Outcome: The EMA has met this goal with a 85.5% VLS as of 12/31/18. However, when we drill down by target population youth are at 75.4% and EIS are at 62%
- Recommendation: Increase the percentage for those meeting the goal and keep the VLS measure at 80% for Youth and EIS Clients.

GOAL: Increase Prescription of Antiretroviral Medications to 96% EMA-wide

- Outcome: The EMA total has exceeded this goal at 98.2% prescribed ARVs as of 12/31/18. However, transgender persons are below at 93.5% and youth (13-24) are below at 91.3%
 - Recommendation: Increase the percent for those meeting the goal and keep the measure at 96% for transgender and youth populations.
- Based on the outcomes report data, the CPC started an in-depth of the HIV Integrated Prevention and Care Plan goals and objectives. At the next meeting, the meeting will focus on finalizing the update to the HIV Integrated Prevention and Care Plan to include specific activities, responsible parties, time frames and data indicators for the above discussed goal. All are encouraged to attend.

The next CPC meeting will be held on Friday, December 13, 2019 at the Willing Heart Community Center located at 555 Martin Luther King Jr. Blvd. Newark, NJ 07102.

The committee noted that the Viral Load Suppression benchmark is a National HIV Strategy set by HRSA and the other benchmarks discussed above were created by the Newark EMA Planning Council when the Integrated HIV/AIDS Prevention and Care Plan was created.

- **REC: Ann Bagchi, Ph.D.**

Ann Bagchi, PhD. (REC Chair) provided the committee report. The last REC Meeting was held on Monday November 18th. The following occurred at that meeting:

- Ann Bagchi, Ph.D. (REC Chair) presented to the committee on Consumer-Based Participatory Research, as an informative resource for the committee in the needs assessment process. This process requires that research participants and researchers are equal partners in the research. The Newark EMA does a good job involving the community but one area for improvement would be to offer a giveback to the community. This does not necessarily mean to pay participants with gift cards to participate in the studies but to include creative ways to give back to the community; as well as other methods to disseminate the information to the community and not only to the NEMA partner agencies. A recommendation was made that this presentation be shared with the full Planning Council body.
- Sharon Postel (Consultant) provided an update for the last component of the full 2019 Needs Assessment - the Behavioral Health Cascade, which will be added in the final NA report.
- The committee initiated a conversation about topics that might be relevant to the committee. Telehealth was recommended. Rutgers is conducting a Telehealth Needs Assessment within Newark and Atlantic County. Once the study has preliminary findings, a presentation could be provided to the REC regarding the needs of people in the community related to telehealth.
- An RFP for the upcoming 2020 Needs Assessment was released.

The next REC meeting will be held on Monday, December 16, 2019 at the Willing Heart Community Center located at 555 Martin Luther King Jr. Blvd. Newark, NJ 07102.

- **CIA/CC: Warren Poole (18:27)**

Warren Poole (CIA Chair) provided the committee report. The next CIA Meeting will be held today at 5:00PM.

- The upcoming CIA meetings will focus on getting more consumers involved in the Planning Council and its committees, not just the CIA.

- Poole made the following announcements:
 - The CIA meeting is today at 5PM
 - The Peter Ho Clinic's World AIDS Day will be held on Dec. 4th from 11AM to 4PM at the Annex Building across from the Main Building. Registration is open for other agencies. Forms must be submitted to Warren or Erecka.
 - Support Staff will send an email with all World AIDS Day Event
 - Peter Ho CAB's Holiday Party in collaboration with CIA will be held on Dec. 20th. Donations are still being accepted. Suggested donations of \$10 gift cards to raffle at the Party. Everyone who collaborated was thanked.

Tania Guaman, Support Staff, added to the CIA Report. HIV and Aging was the topic at the last Meeting on October 23rd. The following is an overview of the questions and feedback:

- ***What are some challenges People Living with HIV face?***
 - Internal and External Stigma
 - Taking medication on time reminds them of the trauma of living with HIV.
 - Having a trusted provider with experience in the field.
 - Housing: 'If I do not have a place to sleep, the medication are the least of my worries.'
 - Mental Health: the inability to disclose their status, having limited Support Systems and issues trusting others.
 - Information, Awareness and Education for People Living with HIV and those who are not infected.
- ***In the past 12 months, what problems someone you know experienced when requesting housing services, if any?***
 - It was mentioned that the City of Newark requires a Drug-Free Blood Test to receive housing benefits. This have not been confirmed and it is still under investigation by the Recipient.
 - Consumer follow ups- People do not follow through on the steps needed to receive the medical benefits or support services.
 - Substance Abuse as a barrier because people cannot take care of themselves.
 - The Need of Support and Counseling to make the right choices.
- ***How does the housing situation of a person living impact their ability to attend medical visits?***
 - If individuals are not able to sleep and feel rested, they could not go to their appointments.
 - Not feeling clean or prepared to see the doctor
 - Homelessness
 - Worry about HIV Criminalization and Law
 - Substance abuse
- ***How does the housing impact their ability to take medication as prescribed by their physician?***
 - 'I forget to take my medication'
 - Taking medication reminds me that I am living with HIV
- ***How does the housing impact their ability to stay virally suppressed?***
 - Housing provides stability so more attention can be given to my wellbeing

Dr. Johnson asked if consumers questions and concerns were answered and how the questions were addressed. The importance to provide an answer to consumers' questions was emphasized.

A suggestion was made to add a Questions and Answers section on the NEMA website since people might have similar questions.

In response to the CIA report, the Recipient stated that the Service Category Food Bank/Home Delivered Meals allows people to buy personal hygiene products and the issue of not feeling clean to go to their medical appointments could have been answered. Providing this information to clients and providers is a way of responding immediately to this issue so that no longer becomes a barrier to care. The development of a mechanism to answer consumers' concerns or issues, after they provided their feedback, needs to be applied. Warren Poole, CIA Chair, stated that NJCRI's drop-in service was mentioned during the meeting. Kendall Clark mentioned he is aware that NJCRI and the Newark Community Health Center's Drop-in services are not being used. It was emphasized the need to let clients know that some agencies offer this service.

The Planning Council used to have different committees addressing various issues such as the substance abuse committee but not a lot of feedback was obtained from these committees. The CIA was created as another way to contact the community and obtain feedback from the community about various issues. Currently, the CIA is obtaining a lot of feedback but once this information is obtained, responses must be provided. The website is a good way to provide the answers as well as brochures with information regarding the issues mentioned. Housing is a big issue and information need to be provided to the community. Peter Ho CAB had a meeting with the HOPWA Program regarding Housing. The information provided by the HOPWA Department is useful for case managers and the community in general. This presentation could be done at a CIA meeting or perhaps in another Peter Ho CAB meeting. Addressing the need for personal hygiene products with housing could help consumers obtain and maintain viral load suppression. Ann Bagchi, Ph.D. mentioned that this is related to the topic of how information is disseminated, what is the giveback offered to the community and how community is being defined. A lot of people do not want to be identified as part of the HIV Community because of Stigma. This could be an approach for the End the Epidemic Initiative.

Chelsea Betlow from the Department of Health Division of HIV, STD and TB Services introduced herself and Lara Dykstra to the Council. Betlow offered to connect the Planning Council with the Housing Representative, Rene Cirillo, to address some of the Housing concerns. It was mentioned that hygiene kits could be obtained from Department of Health CHW or the Department of Health could increase the funds to agencies to donate the kits. Betlow mentioned that she might be joining the Planning Council Meetings to get the responses needed.

Dr. Johnson asked for a motioned to approve all Committee Reports. Mario Portilla motioned to approve all committee reports. War Talley seconded the motioned. All agreed. No abstentions.

7. State & National Updates

- **Report from the NJ HIV Planning Group (10.17.19)**

The last meeting was held on October 19th. Tania Guaman provided the following updates:

- The End The Epidemic NJ Plan is still being reviewed at the Governor's Office
- Agencies can contact a State Representative to attend their World AIDS through their usual State point of contact.
- The annual National Sexually Transmitted Disease Surveillance [Report](#) was released by the CDC in October 2019. The report suggests that STDs increased for the fifth consecutive year –

- with nearly 2.5 million combined cases of chlamydia, gonorrhea, and syphilis. Greta Anschuetz, Director, STD Services provided an overview of the report. See presentation [here](#).
- The Open Enrollment Period runs from Nov 1 to Dec 15 including renewals and new applicants
 - The Public Charge Rule determines the likelihood of an immigrant to become a public charge for the government that negatively impact a path to US citizenship. This rule is still under court review but there will be a presentation today thanks to Debbie Morgan.
 - This week is transgender Awareness Week. The following was mentioned at the last NJHPG Meeting:
 - A Transgender Day of Learning will be held on March 31 at the Rutgers Cook Campus Center – Those interested in becoming part of the committee can contact the NJHPG or Support Staff to make the connection. The Transgender Needs Assessment’s results will be used for the transgender day of learning.
 - The Long-Term Care Survivors Day will be held on June 5 at the Rutgers Cook campus – those interested in getting involved in the committee can contact NJHPG. This event will be held thanks to the advocacy of a Ryan White consumer in the Tri-County area.
 - Gilead’s status neutral approach for transgender was mentioned. This approach recognizes that patients and communities often face challenges that scientific discovery alone cannot solve. The Gilead TRANScend Community Impact Fund builds on this commitment and will support Trans-led organizations working to improve the safety, health and wellness of the Transgender community. To learn more, click [here](#).
 - A presentation was held about the NJDOH Partner Notification Program, which offers an array of services to people infected with HIV to help identify clusters of HIV and syphilis. The Partner services help to notify partners, address partners rights to know, provides information to help reduce transmission at the community level. Once the STD (syphilis) has been reported to the NJDOH, then they contact the infected person to follow up and ask if they notified the partner. See full Partner Notification Program presentation [here](#).

- **Report from the Governor’s Advisory Council (10.24.19)**

Dr. Johnson mentioned that Ann Bagchi was also at the meeting and reported that the following occurred at Governor’s Council meeting:

- The Council held a discussion about the Hepatitis A Epidemic in South Jersey and the development of the Hepatitis A Epidemic in Essex County.
- The End the Epidemic Plan state has not yet been approved by the Governor. A budget impact on some of the recommendation in the Plan was mentioned as the reason for the pending approval. There is also a concern of taking funds from other programs to cover others.

A member of the Council asked if the Health Insurance Continuation Program offered through the ADAP office will be considered a Public Charge. Another member explained that ADAP could be used to help pay for premiums. To be part of this program, individuals must purchase a silver level plan for the premium to be covered. Chelsea Betlow offered to the person who is helping with these applications to help anyone with questions about their immigration status.

8. Planning Council Administrative Issues

- **Report from Executive Committee**

Dr. Johnson mentioned that the meetings will continue to be held at the Willing Heart Community Care Center because of its convenient location and parking space. There was no other issue mentioned at the Executive Committee meeting that has not been covered during this meeting.

- **Report from Treasurer**

Pat Moore provided the Treasurer's Report.

Eight (8) months (66%) into the fiscal year, we have spent approximately 60% of the contractual amount. All budget lines are within projected amounts except for consumer travel as has been noted previously. Projecting expenses, for the next four (4) months, we will probably be able to stay within the budgeted amounts.

- **Report from PC Support Staff**

Tania Guaman, Support Staff, reported the following:

- Support Staff sends calendar invited to be able to monitor attendance and figure out if a meeting will have quorum.
- Support Staff requested that an optional photo release form is included in participant packets so that the Council, as many others do could share pictures of members on the website. Since the NEMA website will be launch in January, Support Staff will follow up on requesting pictures, for those who agree to share their picture.
- Support Staff asked anyone who might know about World AIDS Event in the Newark EMA to share those via email so that it could be shared with the Planning Council networks.

9. Old/New Business

Public Charge Rule Presentation: Debbie Morgan provided this presentation.

- The Public Charge Rule was announced in August, and was supposed to take effect in October 15
- Several Jurisdictions have filed a lawsuit. The rule is still under Court Review and it could go all the way up to the Supreme Court. As of now, the Public Charge Rule is not in effect.
- Under the new definition, a person who "receives one or more public benefit... for more than 12 months in the aggregate within any 36-month period (such that, for instance, receipt of two benefits in one month counts as two months.)" is now considered a public charge. Benefits such as SNAP, Housing, Medicare with some exceptions, are now being considered as a public charge. TANF and SSI continue to be considered as public charge.
- A public charge assessment is made when a person
 - Applies to enter the U.S. on a student, employment or family-based visa.
 - Applies to adjust status to become a legal permanent resident though a family member of employment
 - A Legal Permanent Resident who leaves the county and comes back after more than 6 months
- There are many people who did not qualify as a Public Charge in the past and continue to be an exception, such as:
 - Survivors of domestic violence, human or sex trafficking
 - Refugees and asylees
 - Cuban Adjustment Act
 - Violence Against Women Act (VAWA) Self-petitioners
 - Lawful Permanent Residents applying for citizenship
- There are several factors that determine if an individual is seen as a public charge and will not be allow in the US. These factors have also been expanded and contains the following:
 - AGE: Under 18 or over 61 might be considered as public charge
 - HEATH: If a person has a medical condition likely to require extensive treatment will be considered as a public charge and not allowed in the US. If the individual does not have private

insurance could also be considered as a public charge. If the person has private insurance, it is considered a positive factor.

- INCOME and FINANCIAL STATUS: Under the 125% of Federal Poverty Line (FPL) is considered as a public charge and will not be allowed in the US but over the 250% of the FPL is not. For a family of four, the 250% FPL is \$64,375 with the median income of 60,336 in 2019. Previously, a family of four under the 125% with \$32,000 was allowed in. The FPL for someone living in this country is less than what it is required for an immigrant to be allowed in the country.
 - EDUCATION and SKILLS: If the person has a good education and employment history is considered a positive factor
 - FAMILY STATUS: If you have family living in the US that could help support you is in your favor if not it is looked negatively.
 - ASSETS: If the person can prove they have assets outside the US or in the US, it is in their favor
 - English Proficiency is in the individual's favor.
- The Stigma attached to this rule and people not knowing if they will be considered a public charge is one of the major problems because people might not ask for the help they need..
 - According to NASDA, the rule expands the list of public programs whose use or future use will be negatively weighed in a public charge determination to include non-emergency Medicaid (excluding Medicaid for pregnant women and children under 21), Medicare Part D subsidies, SNAP, and certain forms of housing assistance (HOPWA is NOT included in this list). The rule also does not include CHIP or subsidies for Affordable Care Act Marketplace coverage in the new definition of public charge. As has been longstanding policy, the final rule does not include any reference to the Ryan White Program, ADAP, or other similar public health programs in the definition of public charge.

10. Announcements

Support Staff made the following announcements:

- The Rutgers Division of Adolescent and Young Adults is having a World AIDS Event on Dec 3rd from 1-4 PM at 185 South Orange Ave, Newark, NJ.
- Peter Ho Clinic's World AIDS event will be held on Dec 4th at St. Michael's Medical Center Annex Building 4th Fl. from 11AM to 4PM. To register or to table, contact Warren Poole.
- Hope House - Catholic Charities' World AIDS Event - Red Ribbon Together - will be held on Dec. 1st from 12-4 PM at 101-103 Basset Highway, Dover, NJ
- Hyacinth's World AIDS Event will be held on Dec. 5th from 3PM at the TREC in Newark, NJ
- There was a webinar about the Prep Donation by Gilead to NJ Department of Health and Human Services. The distribution will be launched in December 2019. Gilead will cover for the medication cost and the Department of Health and Human Service will cover all the other costs.

There are three requirements to qualify.

1. Not Having Insurance Coverage for Outpatient Prescription Drugs
2. Having a PrEP Prescription, which requires to have a medical evaluation
3. Having appropriate testing showing that the patient is HIV negative

The Department of Health and Human Services will be a portal and a phone number for providers to contact to connect the patients to PrEP There will be materials and education on how to access the program primarily in Hudson and Essex County since they are being funded by ETE.

Dr. Johnson mentioned that there a couple of PrEP Programs in Essex County including the one at the Health Department and St. Michael. This information must be shared with all agencies. The biggest problem with PrEP is that insurance does not cover the medication. However, PrEP counselors might be able to get them to this program. It was mentioned that the State of New York provides FREE PrEP to patients as well as housing but not the State of New Jersey. Nevertheless, New Jersey has better outcomes with HIV.

Chelsea Betlow mentioned that Lara Dykstra is the State Coordinator for PrEP and she can provide information about PrEP counselors.

Joann McEniry announced the following

- Edge Pride and NJAS World AIDS Event is on Dec. 2nd from 5-8 PM at the Trinity Lutheran Church in Dover (Morris County)
- NJAS is hiring for a Nurse, Social Service Coordinator, Housing Case Manager. If anyone knows of a possible candidate, send their resume.

Dr. Figueroa announced that the Infection Disease Clinic moved to a new location at 110 William St., Newark, NJ. The hours of operation are the same. Monday- Friday 8:30AM-4:30PM, Thursday until 7:30PM and Saturday 9:00AM-1:00PM. The Clinic provides PrEP and Infectious Disease services.

11. Next Meeting

The next Planning Council meeting will be held on December 18, 2019 at 1:30PM at the Willing Heart Community Center located at 555 Martin Luther King Jr. Blvd. Newark, NJ 07102.

12. Adjournment

Joann McEniry (Planning Council Chair) requested a motion to adjourn the meeting. Janice Adams-Jarrells motioned to adjourn the meeting. Mario Portilla seconded the motion. All members agreed. The meeting was adjourned at 2:16 PM.