

**Ryan White Planning Council of the Philadelphia Part A EMA
Positive Committee
Meeting Minutes
September 8, 2014
12:00-2:00p.m.**

Office of HIV Planning, 340 N. 12th Street, Philadelphia, PA 19107

Present: PH (22), PA (4), NJ (2)

Staff: Nicole Johns, Jennifer Hayes

Call to Order/Moment of Silence/Introductions: M. Dorsey called the meeting to order at 12:10p.m. He read the mission statement.¹ A moment of silence followed. Those present then introduced themselves and participated in an icebreaker activity.

Approval of Agenda: M. Dorsey presented the agenda for approval. **Motion:** L. Way moved, W. Walters seconded to approve the agenda. **Motion passed:** All in favor.

Approval of Minutes (*August 11, 2014*): M. Dorsey presented the minutes for approval. **Motion:** L. Way moved, M. White seconded to approve the minutes. **Motion passed:** All in favor.

Report of Chair:

- **Participation Acknowledgments**

D. Gana reported that the Positive Committee discussed potential future topics at their last meeting. He asked if anyone was attending a Positive Committee meeting for the first time. He presented first-time attendees with a token of their participation.

Report of Staff:

N. Johns reminded all attendees to RSVP in advance for Positive Committee meetings so she could order the appropriate amount of lunches. She said that the Friday before the meeting was the latest she could accept RSVPs in time to order lunch. She said that everyone who wanted tokens at the end of the meeting needed to make sure and sign in by 12:30.

Discussion Items:

- **Nominations for Co-Chair**

D. Gana noted that M. Dorsey's term as Positive Committee Co-Chair was ending. He stated that the Committee would entertain nominations for a new Co-Chair. A community member nominated Jeanette M. and L. Grimes for the position. D. Gana asked if they accepted the nomination and both responded affirmatively. L. Way nominated M. Coleman for the position. M. Coleman declined the nomination. A community member nominated Eric H., who declined the nomination. A community member nominated Joe M., who declined. L. Grimes nominated Keith C., who accepted the nomination. A community member nominated W. Walters. W. Walters accepted the nomination. M. Dorsey asked if there were any remaining nominations. He said that, seeing none, he was going to close the floor for nominations. N. Johns noted that Co-Chairs must be members in good standing of the Positive Committee. M. Dorsey stated that elections for Co-Chair would be held at the next

¹ Mission statement: The Positive Committee supports and enhances the role of people living with HIV/AIDS to empower their participation in the decision-making process of the Ryan White Part A Planning Council and the HIV Prevention Planning Group.

meeting in October. D. Gana stated that nominees would give speeches at that time. N. Johns stated that anonymous voting would be conducted using clickers.

- **Medicaid in PA Update**

D. Gana noted that governor Corbett had decided to expand Medicaid in the state of Pennsylvania. N. Johns stated that governor Corbett had proposed a plan a year ago that would expand Medicaid to people under a cutoff of about \$14,000 a year. She stated that 100% of the federal poverty line was about \$11,000 a year, and that it went up about \$10,000 for each member of the household. She stated that Governor Corbett proposed that all people under the federal poverty line would immediately be eligible for Medicaid. She stated that all those with incomes between the federal poverty line and 133% of the federal poverty line would be eligible for Medicaid with a requirement to pay a premium. N. Johns explained that the federal government approved most of Governor Corbett's plan. She said that the requirement to pay a premium for those with incomes between 11-14,000 would not begin until 2016. She said premiums would be up to 2% of annual income. She said that there would be no copays for these individuals except for use of the emergency room for a non-emergency. She stated that non-emergency use of the ER would require an \$8 copay.

N. Johns stated that enrollees between \$11,000-\$14,000 income may be disenrolled if they did not pay their premiums. She said that those who saw an increase in income may also be disenrolled. However, she noted that re-enrollment was easy and in some cases automatic. N. Johns noted that Healthy Living incentives allowed for decreased premiums for lifestyle changes like losing weight, quitting smoking, and so forth. N. Johns stated that PA Medicaid involved managed care plans, and that this would not change under Healthy PA. She stated that there was some uncertainty about coverage and rules. M. White asked if there would be assistance available for copays. N. Johns explained that there would be no copays for individuals under the federal poverty line. M. Coleman asked about the effective date for Medicaid expansion. N. Johns stated that she believed the effective date was January 1, 2015. A community member asked if Social Security counted as income, and N. Johns stated that it did. N. Johns stated that assets did not count as income. A community member asked how Medicaid expansion would affect SPBP coverage. He asked if SPBP would be covering Medicaid premiums. N. Johns stated that this was something SPBP was hoping to do. A community member asked if those with no income qualified, and N. Johns explained that anyone living under the federal poverty line qualified for Medicaid under expansion. W. Walters asked if those with an unstable income would qualify for Medicaid. N. Johns stated that Medicaid eligibility was determined by current income, so those who had recently lost income would qualify.

A community member asked for clarification about the ACA and Medicaid. N. Johns stated that individuals currently only qualified for Medicaid under certain circumstances. She said these included parents with very low income and pregnant women. She said that adult men without income currently were not eligible for Medicaid. She stated that under Medicaid expansion, eligibility was determined by income requirements, whereas in the past only certain categories of people qualified. N. Johns explained that the ACA ended discrimination based on gender and preexisting conditions, and added requirements for what insurance plans must cover. She explained that the ACA also set up a marketplace with insurance plans and subsidies based on incomes. She continued that a third part of the ACA impacted Medicaid. She stated that, previously, each state had its own Medicaid laws. She said that, after the ACA, the government gave states incentives to cover all individuals within certain income requirements. She said that the ACA sought to expand the amount of people who would receive Medicaid. She stated that the ACA also specified requirements for insurance plans so that there would be more uniformity in care.

M. White asked if past incarceration status impacted Medicaid eligibility. N. Johns stated that she was unsure how incarceration status may impact eligibility. She noted that, previously, states could make their own requirements about this. A community member stated that people he had worked with were denied benefits because of past incarceration status. He stated they were able to get food stamps but not healthcare. A community member stated that he was uninsured for 2 years following his release from incarceration. He stated that he eventually became eligible for healthcare under Medicare. He stated there might be a time lapse before individuals were eligible for benefits. N. Johns stated that, regardless of ability to pay, anyone could visit the City Health Centers or Ryan White Health Centers. She said that there were places to get care, but it was a question of people being informed of this.

W. Walters stated that those receiving SSI may not be eligible for Medicaid, but those receiving SSDI would be eligible if they were receiving the minimum payment. N. Johns noted that the income requirement still applied for those receiving social security payments. A community member asked if the amount being taken out of his check for Medicare would change under the new law. N. Johns stated that this would not change, and that not many changes had been made to the statewide Medicare program. A community member suggested that the AIDS Law Project might have some insight into how Medicaid expansion would affect PLWHA. A community member stated that he had been receiving the minimum payment under SSI for many years. He stated that, as he had gotten older, he'd been switched to a different program called SSA. N. Johns stated that the change in the program's name reflected a change in its funding source. A community member stated that he had been receiving an SSDI check and was told to apply for welfare to pay for his medical expenses and reimbursement. N. Johns stated that there were people who were trained to help individuals sign up for their benefits. She said the ACA had provided enrollment specialists and that she'd be glad to connect anyone to resources. She added that many care organizations in the area employed healthcare navigators. She stated that the health information line may also be a good resource for those needing help to navigate their benefits. A community member pointed out that there were many resources available on the internet. N. Johns stated that the AIDS library was another good resource.

- **Prevention Focus Group Update**

N. Johns reminded the Positive Committee that she had previously mentioned the OHP was planning to conduct focus groups. She said a focus group had been conducted with YMSM in June. She said there had been 3 groups with a total of around 30 participants. She said that there were some unexpected results. She noted that the participants ranged in age from 18 to about 30. N. Johns said that participants revealed they preferred to go to healthcare professionals rather than peers with their health-related questions. She said this was surprising because there was often a focus on peer-based support for young people. She said getting good information and confidentiality were priorities for YMSM with serious health concerns. She stated that about 1/5 of participants disclosed their HIV status. She said that most of the young men who were HIV positive had good things to say about local care providers. She said there were some complaints about the city health centers, specifically Health Center 1. She noted that a few of the young men said there had been improvements in the care and the environment at Health Center 1 in recent years. She said that many of the men expressed concerns with the way they were being treated by staff at health centers, and that several related negative experiences. She stated that common issues included cost and not knowing where to go for care. She said that participants were found through local organizations, so many were also connected to services. She said several of the young men utilized PrEP.

N. Johns stated that the OHP was now recruiting for adult high-risk heterosexuals. She stated that the office needed participants for the focus groups, particularly women, and asked the Positive Committee to inform anyone they knew who might be interested. She said that the office was targeting individuals with HIV-negative or unknown status. She said that groups would be held at the end of September and beginning of October, and that any interested parties should be directed to call the office. N. Johns clarified that participants in the focus groups must live in Philadelphia, be between the age of 25 and 50, and identify as heterosexual. N. Johns stated that Dr. Kwakwa from the PHMC Care Clinic along with Philadelphia FIGHT had helped with recruitment. She explained that the OHP was looking for a diverse mix of participants. N. Johns stated that participants would receive a \$20 CVS gift card, tokens, and a meal. She stated that there were cards and flyers available to anyone who wanted them. She stated she could be reached by phone or email². N. Johns stated that the OHP would be holding focus groups in the future with sexually active people over 60, young sexually active people from 18 to 25, active drug users, and Hispanic and African-American adult MSMs. D. Gana noted that OutFest was held in October and would be a good place for recruitment.

- **October Meeting Date**

N. Johns stated that the regularly scheduled meeting date for October fell on Columbus Day, and that the office would be closed. N. Johns stated that traditionally the office had bumped the meeting to the third week of the month when it conflicted with a holiday. N. Johns noted that the RWPC meeting was written incorrectly in the calendar, and should be listed on October 9th. D. Gana asked all members who wished to move the meeting to October 6th to raise their hands (12 votes). He asked all those who wished to move the meeting to the 20th to raise their hands (4 votes). N. Johns stated that it was important for Co-Chair candidates to be able to attend the October Positive Committee meeting. N. Johns stated that the meeting would be moved to October 6th.

Old Business:

D. Gana stated that the committee needed to decide between potential topics for upcoming meetings. He pointed to a list of these topics on the board (HIV & Aging, Life Insurance, Criminalization of HIV, Discrimination in the Workplace, Ministries in HIV/SILOAM, Returning back to work, Minority AIDS Project) and asked the Committee to prioritize the topics.

N. Johns asked the Committee to clarify what was meant by “Ministry in HIV”. M. Dorsey stated that one potential avenue could be encouraging faith-based organizations to start an HIV ministry. D. Gana stated that SILOAM could come to the Committee to talk about spiritual approaches to life. A community member brought up Reverend King and stated that she would likely be willing to speak with the Committee. A community member stated that the AIDS Law Project might be able to help with many of the topics, for instance workplace discrimination.

D. Gana stated that he knew of an organization that could help PLWHA secure employment. M. Dorsey said that many people were afraid to return to work because they did not want to lose their SSI. D. Gana stated that a variety of different organizations would be asked to help with topics in which they had expertise. He stated that the Sero Project might be a good resource for HIV criminalization. N. Johns noted that RWPC Co-Chair Tre Alexander was very passionate about the topic and also might be willing to speak. A community member asked what the Committee’s position was on HIV criminalization. D. Gana stated that discussion of criminalization would focus on PLWHA’s rights and responsibilities around transmission and disclosure. He stated that it was important that everyone be aware of the laws. A community member reported that there were many

² Nicole Johns can be contacted by phone at 215-574-6760, extension 108 or by email at nicole@hivphilly.org.

cases now in Philadelphia concerning non-disclosure. N. Johns stated that many cases were he-said she-said and did not have to do with whether or not HIV was transmitted. A community member noted the importance of practicing safe sex even for those individuals with an undetectable viral load. M. Coleman said he had heard a report on the radio about domestic violence and that it was a pressing current issue. A community member noted that there were many different types of abuse. A community member asked if the Committee could add a topic about HIV and domestic violence.

D. Gana noted that the priority order had been set for the topics: Life Insurance (1), HIV & Aging (2), Criminalization of HIV & Discrimination in the Workplace (3), Ministries in HIV (4), Minority AIDS Project (5), Returning Back to Work (6), and Domestic Violence (7). He thanked the Committee for their participation in the discussion.

New Business:

None.

Announcements:

L. Grimes stated that SAMHSA had a conference coming up from October 22-26 in Orlando, Florida. She stated that she had printed applications for scholarships to the conference. She noted that the deadline for applications was September 19. She stated that anyone interested should answer the survey questions on the form and send it in to SAMSHA according to the instructions. She also stated she had flyers for the Philadelphia Community Support Program. She said they would be holding a meeting tomorrow for the Mural Arts Program and that participants would receive tokens. She stated the meeting would be held at 123 S. Broad St. M. Coleman said that September 18th from 9pm-2am the SOULS (Society of Unique Love and Support) of BEBASHI would be hosting a Karaoke Night at Tabu Lounge and that money collected would be donated to the AIDS Walk in October. He stated that all MSM who got tested at BEBASHI prior to the event would be entered in a raffle to win a dinner for two and gift baskets.

Adjournment: The meeting was adjourned by general consensus at 1:40p.m.

Respectfully submitted by,

Jennifer Hayes, Staff

Handouts distributed at the meeting:

- Meeting Agenda
- August 11, 2014 Meeting Minutes
- OHP Calendar

Monday, September 8, 2014

12:00-2:00pm

Office of HIV Planning 340 N. 12th Street Suite 203
Philadelphia, PA

Mission Statement- The Positive Committee supports and enhances the role of people living with HIV/AIDS to empower their participation in the decision-making process of the Ryan White Part A Planning Council and the HIV Prevention Planning Group.

- **Call to Order/Moment of Silence**
Introductions
- **Approval of Agenda**
- **Approval of Minutes**
- **Report of Chair**
 - **Participation**
 - Acknowledgements**
- **Report of Staff**
- **Discussion Items:**
 - Nominations for Co-Chair**
 - Medicaid in PA Update**
 - Prevention Focus Group Update**
 - October Meeting Date**

- **Old Business**
- **New Business**
- **Announcements**
- **Adjournment**

PLEASE TURN ALL CELL PHONES AND PAGERS TO SILENT OR VIBRATE.

The next meeting of the Positive Committee is

TBD from 12:00-2:00PM at 340 N. 12th Street, Suite 203, Philadelphia, PA 19107. Please refer to the Office of HIV Planning calendar of events for committee meetings & updates (www.hivphilly.org). If you require any special assistance, please contact the office at least 5 days in advance.

AGENDA

POSITIVE COMMITTEE

**Ryan White Planning Council of the Philadelphia Part A EMA
Positive Committee
Meeting Minutes
August 11, 2014
12:00-2:00p.m.**
Office of HIV Planning, 340 N. 12th Street, Philadelphia, PA 19107

Present: PH: (13), PA: (5), NJ: (2)

Guests: Hannah Thompson (Health Federation)

Staff: Nicole Johns, Jennifer Hayes

Call to Order/Moment of Silence/Introductions: M. Dorsey called the meeting to order at 2:05p.m. He read the mission statement.¹ A moment of silence followed. Those present then introduced themselves and participated in an icebreaker activity.

Approval of Agenda: M. Dorsey presented the agenda for approval. **Motion:** L. Way moved, M. Coleman seconded to approve the agenda. **Motion passed:** All in favor.

Approval of Minutes (July 14, 2014): M. Dorsey presented the minutes for approval. **Motion:** L. Way moved, M. Coleman seconded to approve the minutes. **Motion passed:** All in favor.

Report of Chair:

- **Participation Acknowledgments**

M. Dorsey reported that his co-chair position would be opening up in September, and that family issues would prevent him from renewing his term. He told the committee that voting would take place in September or early October. D. Gana asked attendees to nominate anyone they may know who would be good for the position. M. Dorsey also reminded the committee that applications were being accepted for the Planning Council. D. Gana stated that he manned the Mr. Friendly booth for AIDS Education Month in June. He said he was able to reach the some 200 people who attended the event at the Convention Center. He said the booth was very well-received. M. Dorsey then acknowledged participants who were attending their first Positive Committee meeting.

Report of Staff:

N. Johns introduced new OHP staff member Jennifer Hayes to the Positive Committee. N. Johns thanked all members who RSVPed at the last month's meeting. She explained RSVPs allow her to order the right amount of lunches. She presented attendees with red puzzle piece pins to recognize their contribution to the Positive Committee. She also stated gold pins were available for Positive Committee members who joined the Planning Council.

Discussion Items:

- **Pilot Testing Consumer Education Brochure**

N. Johns introduced Hannah Thompson, an intern with the Health Federation of Philadelphia. N. Johns explained that Hannah had come to solicit consumer feedback on a two-sheet informational

¹ Mission statement: The Positive Committee supports and enhances the role of people living with HIV/AIDS to empower their participation in the decision-making process of the Ryan White Part A Planning Council and the HIV Prevention Planning Group.

brochure prepared by her office (*see-attached sheet*). H. Thompson said the purpose of this brochure was to educate consumers about what medications are covered by the healthcare plans available through the ACA marketplace. She told the committee that if they liked the brochure, it would be distributed at healthcare clinics. H. Thompson said one sheet had the insurance plan and level on it with all the medications listed. She said that the other sheet simply explained the levels. H. Thompson stated that she'd brought along the "bronze" level sheets for the committee to review. She explained that healthcare plans in the ACA marketplace are divided into levels or tiers – bronze, silver, gold, and platinum – and that the tiers differ by their cost and the services they include. She noted that bronze plans are the cheapest. M. Dorsey asked Hannah if she had brought any information sheets on the other levels (for instance, silver). H. Thompson replied that she had information sheets on each of the levels, but that she had brought only the bronze information sheet as an example. She asked that the Positive Committee members fill out a feedback survey about the brochure and welcomed any questions they might have.

D. Gana asked how he could determine deductibles at each level. He said that information on deductibles could help give people more perspective on their healthcare decisions. H. Thompson said that she could add that information to the brochure if the committee felt it would be helpful. A community member asked if ACA insurance plans are targeted toward those who are not eligible for Medicare and Medicaid. N. Johns explained that ACA plans are for those who are not able to get insurance privately or through public programs. N. Johns said the brochures are meant for those who are looking to buy plans on their own through the ACA marketplace.

M. Coleman asked for clarification on the plans available and their tiered structure. N. Johns explained that the tiers are meant to demonstrate how the different plans work, from the most basic plans to the platinum plans. N. Johns explained that the platinum plans have higher premiums but lower out-of-pocket costs, whereas the bronze plans will have lower premiums but higher deductibles and co-pays. She explained that these information sheets are meant to help consumers figure out what they can afford based on what services they need. N. Johns continued that a platinum plan, for someone who could afford it, would offer a very low copay on medications, but would carry higher monthly premiums. She stated that someone without many out of pocket costs (e.g. medications, visits to specialists) may be interested in a bronze plan. M. White asked how the ACA would affect those with Medicaid and Medicare and N. Johns answered that it will not, as the two are separate programs.

M. Dorsey shared with the committee that he pays for his own healthcare and that he chose an insurance plan on the marketplace. He said the level chosen by consumers determines what they will pay, and what services they are eligible for. M. Dorsey reiterated that those interested in lower premiums may pick the bronze level, but for a more comprehensive plan they would "move up the ladder". M. White asked if ADAP has raised the bar for eligibility. N. Johns responded that the income requirement for ADAP eligibility has remained the same for the last several years, at 500% of the federal poverty line. M. Dorsey said that consumers can still apply for the SPBP or ADAP card based on income even if they have insurance. A community member asked what if he would be able to opt out of Medicare Part D and pay for an ACA plan. D. Gana responded that people enrolled in Medicare or Medicaid cannot purchase a plan through the marketplace.

H. Thompson reviewed the last question on the survey². H. Thompson asked the committee if they knew the answer to this question, and several members answered “he’d have to pay the full price”. H. Thompson said this was correct and explained that consumers would have to pay the full price for medications until their deductible was met. H. Thompson noted that plans on the bronze level have higher deductibles. D. Gana said it’s a case of “you pay for it now or you pay for it later”. H. Thompson and M. Dorsey thanked the Positive Committee for participating in the survey.

- **Future Meeting Topics:**

M. Dorsey said that the committee wanted feedback from members about topics they’d like to see covered in future meetings. M. White said he’d like to see more information about Aging and HIV. He listed living wills and power of attorney as topics he’d be interested in. D. Gana offered that the HIV Elder Initiative has a good network of speakers who talk about the unique issues associated with aging for PLWHA. L. Way said he’d like to know more about the research being done to cure HIV. D. Gana asked if L. Way would be interested in hearing from Temple University researchers who are active in looking for a cure. N. Johns suggested the committee might bring in representatives from the AIDS Policy Project. A community member said she would like information on affordable life insurance policies for herself and her loved ones. Another community member brought up the topic of HIV Criminalization. N. Johns said that this was a contentious issue, and explained that some PLWHA may choose not to disclose their HIV status because of stigma. She stated that this and other impacts of stigma are topics the committee could discuss. M. Coleman brought up workplace discrimination based on sexual orientation, race, and HIV status. M. Dorsey said he’s interested in discussing housing and returning to work for PLWHA. D. Gana raised the possibility of bringing representatives from SILOAM to talk about spirituality, and noted that this may be particularly helpful for people who feel they would be discriminated against if they discussed their status at church. M. Dorsey stated he’d like to get Dr. Wallace, a pastor with a large HIV ministry, to come in and speak with the group. M. Dorsey said Dr. Wallace is trying to get more churches involved in HIV ministry because many members of congregations are afraid to disclose their status. The co-Chairs recorded the suggestions they received and thanked the committee for participating in the discussion.

Old Business:

None.

New Business:

None.

Announcements:

N. Johns stated that the full Planning Council would be meeting on Thursday at 2pm. She said the RWPC would be approving the budgets for the next year and suggested Positive Committee members attend. N. Johns added that the people who run SPBP would be attending the Planning Council meeting to give a presentation and answer questions. She recommended that committee members who had questions about SPBP or ADAP bring them up at the meeting. N. Johns informed the committee that they could see Debbie to pick up applications for membership in the RWPC and stated that the Nominations committee would be looking at applications in the coming weeks.

² “4) Please answer the following question based on the information found on the IBC Keystone HMO Bronze plan sheet. Kenneth wants to know how much his prescription for Fuzeon will cost, if his prescription is \$200 for a 30 day supply? He is has[sic] not yet met his deductible and his provider is in the network.”

Adjournment: The meeting was adjourned by general consensus at 12:55p.m.

Respectfully submitted by,

Jennifer Hayes, Staff

Handouts distributed at the meeting:

- Meeting Agenda
- July 14, 2014 Meeting Minutes
- Consumer Education Brochure (Health Federation)
- HIV Medications in the Marketplace Tool Evaluation Survey (Health Federation)
- OHP Calendar