

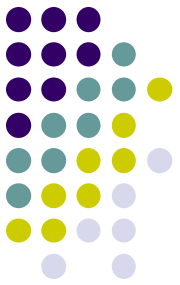
Service Provider Input for CARE Council Prioritization and Resource Allocation

July 26, 2010

**A presentation by the
SF HIV/AIDS Provider Network**



Who We Are



A coalition of 43 community-based, non-profit agencies that serve the needs of people with HIV/AIDS in SF. We:

- **serve a much broader population than just CARE-funded clients**
- **match every \$1.00 of government contract funds with \$1.50 of community-donated dollars**
- **offer volunteers, facilities, and money to help the County deliver services**
- **provide hard-working, highly-skilled, culturally competent, often lower paid employees to provide services the County could not otherwise afford to offer**

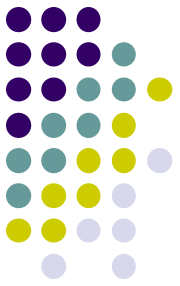
HAPN Executive Committee



A nine-person executive committee is elected annually:

- Brett Andrews, Positive Resource Center
- Bill Hirsh, AIDS Legal Referral Panel
- Jimmy Loyce, Black Coalition on AIDS
- Mark Molnar, Shanti
- Courtney Mulhern-Pearson, SF AIDS Foundation
- Kyriell Noon, Stop AIDS Project
- Maritza Penagos, Mission Neighborhood Health
- Mike Smith, AIDS Emergency Fund
- Don Soto, Lutheran Social Services

Input to the CARE Council

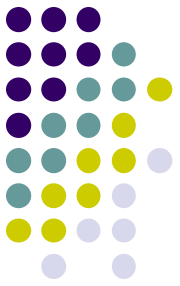


The Council is legislatively mandated to seek input from a variety of sources in your priority-setting and resource-allocating process, specifically including input from providers.

HAPN appreciates the opportunity to address the council, and appreciates the collaborative relationship over the past year.

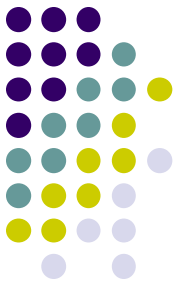
HAPN's comments and recommendations were approved by a consensus process of its member agencies.

Speaking with One Voice



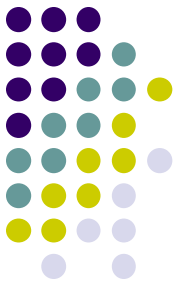
- HAPN members meet monthly to discuss issues of importance to HIV service providers.
- HAPN dedicated its July 2 meeting to gaining input from member agencies and the consensus approval of recommendations in this presentation.

HAPN's Values Inform our Recommendations



- Strengthening and stabilizing the existing infrastructure of services
- Prioritizing severe needs and special populations clients
- Improving coordination among agencies and assuring service choices for our clients
- Seeking fairness and transparency in the contracting and funding processes
- Maintaining the grassroots, volunteer-based, donor-funded, community model of care that is the hallmark of the San Francisco system

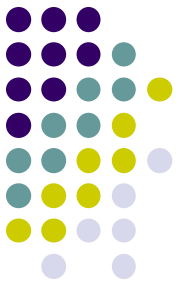
Our Progress Together



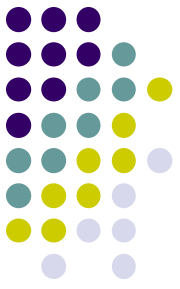
We commend the Planning Council on areas where HAPN and The Council have worked effectively together over the last year:

- Navigating the minefield of huge City and State budget cuts
- Expanding interaction with Prevention Council and strengthening ties between prevention and care
- Keeping communication lines open during internal restructuring at DPH and many changes of personnel

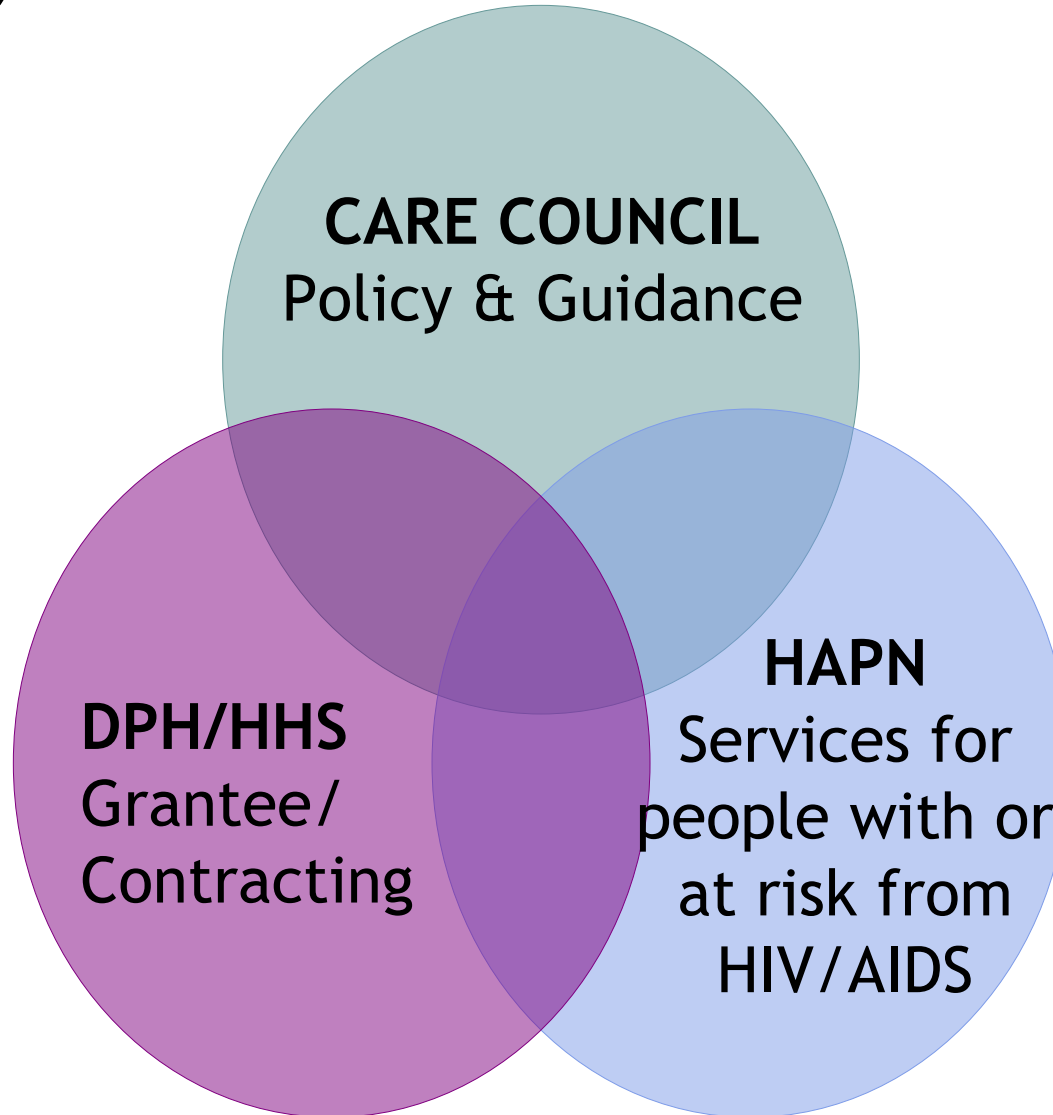
Three Types of HAPN Recommendations:



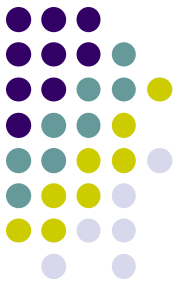
- Improving the Process: collaboration and communication among the Council, HIV Health Services and HAPN
- Outcomes: Your Prioritization of Service Categories and Allocation of CARE Dollars
- Long-Term Systemic Changes: Advocating to protect and expand funding and services for people with HIV/AIDS in San Francisco



1) Improve Collaborations Within the System of Care



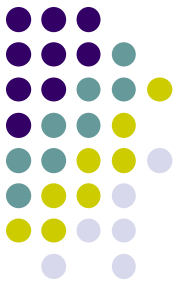
1) Improve Collaborations Within the System of Care



Rec #1: Continue to expand collaboration and integration with the Prevention Planning Council.

The lines between prevention and care services continue to blur. Future decreases in new infections depend on an exchange of ideas and knowledge between prevention and care professionals and policy makers.

1) Improve Collaborations Within the System of Care

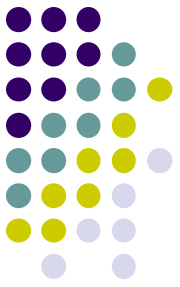


Rec #2: Continue to require timely regular reports and transparency regarding the ongoing implementation of CoEs.

Council recently provided excellent input on CoEs. Please continue to insure that:

- 1) the CoE category is adequately funded,
- 2) funding among CoEs is equitable and fair,
- 3) the array of services within CoEs is maintained,
and
- 4) clients of CoEs have positive and measurable health outcomes.

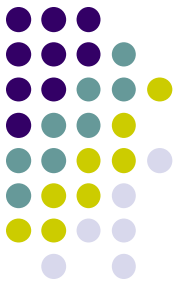
1) Improve Collaborations Within the System of Care



Rec #3: Monitor the implementation of ARIES and the accuracy of its data.

HAPN members are concerned that the transition to ARIES has not gone smoothly and that many client records are missing or duplicated. The Council relies on accurate utilization information, unduplicated client counts and other ARIES client data in its priority setting and resource allocation work. ARIES does not allow for accurate reporting that agencies use for billing, demographics reports and other reporting obligations.

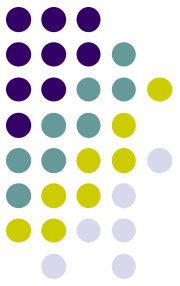
1) Improve Collaborations Within the System of Care



Rec #4: If the Council or HIV Health Services encourages mergers or consolidations, DPH should provide technical assistance and capacity building funds in the short-term to facilitate them.

Increased focus on testing and early treatment will increase client loads. But funding for our system of care continues to shrink. All providers want the most efficient and effective service delivery. But short-term costs and other organizational barriers inhibit bold actions that promote long-term savings.

2) Prioritizing Service Categories and Allocating Resources



Rec #5: The Council's prioritized list of service categories should not be changed from the order that has been in use for the last several years.

Changes to the order should be based on quantifiable evidence of changes in community need, or changed in the perceived value of services by consumers.

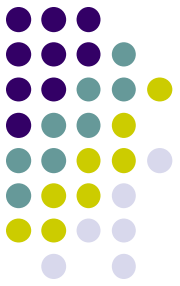
2) Prioritizing Service Categories and Allocating Resources



Rec #6: The Council's resource allocation amounts should not be changed from the formula that was approved in 2009.

HAPN's member agencies are reeling from two years of huge general fund cuts, piece-meal contracts, partial awards and switched funding streams. Now that most contracts are back on Ryan White and funding has leveled off, contractors need a year of administrative stability and program continuity.

2) Prioritizing Service Categories and Allocating Resources



Rec #7: Better resource allocation can be done if the Council has better information about a) health outcomes of services and b) other funding streams or lack thereof for specific services.

Currently HIV Health Services provides you with data regarding utilization of services but not about their effectiveness. You can improve the quality of your decision making if you have data and recommendations from HIV Health Services as to which categories should receive more or less funding based on effectiveness of contractors in that category or other non-Ryan White funding.

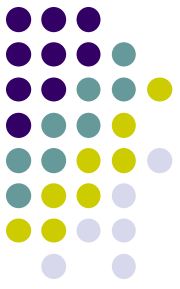
3) Long-term Systemic Change



The political environment in SF is changing:

- HIV Health Services no longer reports directly to Dr. Katz. HHS Program Managers have been consolidated and integrated into other contract management services of Community Programs.
- CARE Funding has stabilized and HIV-related General Funds have been slashed dramatically.
- The political capital and clout of the HIV Community is waning. Some of our biggest allies are moving on. The next generation of allies did not witness the early days of AIDS.

3) Long-term Systemic Change

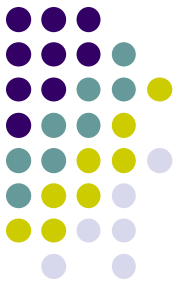


The State and Nation are also changing:

- The State budget will adversely impact the San Francisco system of care.
- The State's funding and management of ADAP will create additional hardships.
- National Health Care reform will affect future Ryan White funding. Clients will be pushed into private insurance or Medi-Cal managed care, reducing the political will for ADAP and primary care in Ryan White.

All of these changes impact the Council, our clients and consumers, and our agencies.

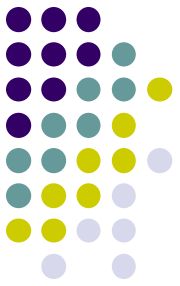
3) Long-term Systemic Change



Rec #8: Join HAPN in advocating for community input regarding changes at DPH. The HIV Services Planning Council and the Prevention Council are the only organized voices of consumers in the DPH decision-making process.

Without a free-standing HIV division, it is much harder to maintain a city-wide focus on AIDS as a funding priority. Subtle changes within a bureaucracy can have unintended and magnified consequences. Services unique to people with HIV are more easily identified and targeted for cuts. It will be up to the Council and HAPN to advocate together for a full spectrum of services for people with HIV/AIDS.

3) Long-term Systemic Change



Rec #9: Changes in prevention strategies and early treatment will add additional burdens to the system. Plan now for it.

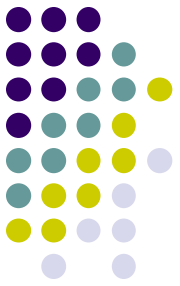
Increased testing will identify more people in need of services.

Decreased prevention with negatives will create later stage diagnoses and increased medical costs.

Early treatment will also increase the number of people seeking care.

HAPN and the Council need to work closely together to find the additional capacity to provide services.

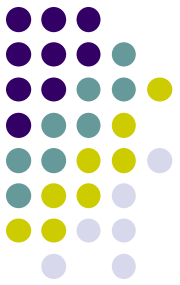
3) Long-term Systemic Change



Rec #10: Start preparing now for major changes in service delivery and funding in 2013-14.

Under national Health Care Reform, clients will be pushed into private insurance or Medi-Cal managed care, reducing the political will for ADAP and primary care funding in Ryan White. Supportive services will have to make the case that they either a) improve health outcomes, or b) reduce medical costs or c) reduce new infections.

Conclusion

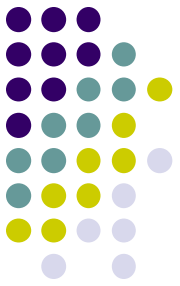


HAPN, HIV Health Services, and the Council have weathered a very difficult period by cooperating closely when dealing with important decision makers like the Board of Supervisors and the Health Commission.

The world of AIDS funding in San Francisco is changing permanently. We cannot count on General Fund dollars. The Federal Ryan White Act will face huge political tests in coming years.

We are eager to collaborate with the Council to represent the best interests of the community in this new era.

You're Invited!



- HAPN meetings are usually the First Friday at 9:00 am at 730 Polk Street, 4th Floor Conference Room
- Next meeting Friday, August 6
- Free coffee and bagels!!!

Thank you for listening!