

**Washington State Department of Health (DOH)  
Early Intervention Program (EIP)  
Steering Committee Meeting Minutes**

February 2, 2009

Holiday Inn Express -19621 International Boulevard, SeaTac WA

**Steering Committee Members Present:**

Richard Aleshire Co-Chair	Al Brownell
Darren Augenstein	Joe Vela
Shireesha Dhanireddy	Gwen Handcox
Steele Desmarais	Joseph Ready
Ron Padgett	Dennis Klukan
Sam Curd	Bob Harrington
Debbie Stimpson	Micheal Moshier
David Lee	Doug North
Joe Vela	

**Steering Committee Members Absent:**

Dennis Bookhart (E), Jamie Dutro (E)

**Guests Attending:**

Laura Treadway, LLAA, Mary Saffold, TPCHD, Jerry S. and Stephanie D., Bristol-Myers & Squibb Company, Ann G. and Jennifer, Pfizer, Jodi D. PCAF, Steven C., Group Health, Stuart P., Tibotec, Todd M.

**DOH Staff Attending:**

Richard Aleshire, Sheila Ichita, Rhonda Bierma, Teri Eyster, Brad Roter

**DOH Staff Absent:**

None

**Business Meeting**

Motion was made by **Dennis K.**, to approve the November, 2008 meeting minutes; **Sam C.** seconded the motion. Minutes approved.

Agenda adoption proposed by **Dennis K.**, **Gwen H.** seconded the motion.  
Agenda adopted as proposed.

**Data Reports and Program Updates – Rhonda**

Rhonda pointed out some recent changes in the data reports. For ethnicity and race category boxes, the number of people checking the “unknown race” box is going down. The number of people with insurance is going up. Multi-month report: 93% of the total amount is spent for antiretroviral drugs.

**Bills to watch in legislation during this year’s legislative session: - Richard**

One of the bills before the legislature is to eliminate all state boards & commissions – that includes the Early Intervention Program (EIP) Steering Committee. There is also a bill that could eliminate the Washington State Health Insurance Pool (WSHIP).

#1713 – WSHIP

#5588 – eliminates insurance boards (could eliminate WSHIP)

#5589 – could dissolve the EIP Steering Committee

To read about the bills, go to the legislative page below.

<http://apps.leg.wa.gov/billinfo/summary.aspx?bill=5777&year=2009>

## Budget Report – Richard

Richard talked about the reductions EIP has made and what's coming next. See the budget reductions section for the list prioritized by the Steering Committee at the February 2, 2009 meeting.

## EIP – Teri

Teri announced that the link given for the Request for Quotation and Qualification (RFQQ) bid for the Insurance Benefits Manager was incorrect. Click on the link below for the correct location.

<http://www.doh.wa.gov/bids/default.htm>

RFQQ N17502 – HIV Insurance Benefits Manager Service

## Spenddown - Teri

Teri talked about the current changes with Spenddown and the effect it will have on EIP clients. EIP has already sent clients and case managers 2 separate letters and a 3rd will be going out. Not all Spenddown clients will be impacted immediately on 4/1/09, only those clients with a Spenddown base period that ends on 3/31/09. Others will have Spenddown base periods that end in April, or May, or June, with the last group's Spenddown base period ending August 31, 2009.

EIP and the Case Management Statewide Coordinator, Monique Ossa, will be available for training Case Managers this spring on ways to assist clients.

Alternatives to Spenddown that may work for some clients with both Medicare and Medicaid include applying for Medicare Savings Plan (MSP) at the Department of Social and Health Services (DSHS), if eligible; DSHS would pay the client's Medicare Part B premium. Another option to look into is Medicare Advantage plans.

Current Spenddown clients can also look into other Medicaid programs that may work for them. One is the Healthcare for Workers with disabilities program (HWD). To be approved for HWD, a person must be able to provide evidence that they are working, full-time or part-time and getting paid for that work. Clients can also talk to their DSHS CSO/financial worker if they have additional questions.

Ticket to Work and Healthcare for Workers with Disabilities are two separate programs included in the same legislation.

**DSHS Toll Free: 1-800-337-1835**

[http://fortress.wa.gov/dshs/maa/Eligibility/HWD\\_FAQs.htm](http://fortress.wa.gov/dshs/maa/Eligibility/HWD_FAQs.htm)

## Evergreen Health Insurance Program (EHIP) – Laura T.

- In the December/January 2008 time frame, EHIP rates increased for the majority of the 1450 EHIP clients.
- Starting in October 2008, EHIP worked with the Washington State Health Insurance Pool (WSHIP) to contact clients who had not returned required eligibility information. In October there were 273 clients in this category and by year-end the number had been reduced to 26. At the end of January 2009, only 15 clients remained on the list of "no response." These clients have lost their WSHIP eligibility and EHIP has not been able to contact them. The Early Intervention Program (EIP) sent certified letters to all 15 and only 9 letters were signed for. These clients could be reinstated to WSHIP via an appeals process.
- Several bills are being tracked in the Washington Legislature that could affect WSHIP.
- The application volume has been noticeably higher in the past 6-8 weeks.

## **Membership – Richard**

Bob Harrington and Sam Curd, whose terms ended in 2008, agreed to another term and were thanked by Richard.

If Mary Saffold from the Tacoma Pierce County Health Department is added as a member representing the AIDSNETs to the Steering Committee, it will be fully staffed.

Members expiring this month: Richard!

The Steering Committee unanimously re-elected Richard for another 3-year term as the Co-chairperson to the Early Intervention Program (EIP) Steering Committee (see membership section).

## **EIP Staff Changes - Richard**

For the last few months HIV Client Services has had 3 vacant positions. Carri Comer was out on Family Medical Leave (FMLA) and has since returned to work part time. Ngozi Mbanugo left the Department of Health in November to move back to Nigeria. And Barbara Stuart, fiscal coordinator, passed away November 6<sup>th</sup> after a short illness. Our 2 current vacancies will remain unfilled through June 2009.

## **Minority AIDS Initiative (MAI) Grant - Steele D. gave an update**

The purpose of this grant from HRSA is to increase the number of people of color into the Early Intervention Program (EIP). Funds will be used by the Tacoma Pierce County Health Department to locate people who have been diagnosed as HIV positive in the last 5 years, are currently not in care, and make efforts to get them into care.

Currently MAI has contacted 33 people and 4 have been accepted into the Early Intervention Program (EIP).

## **Subcommittee Reports**

**Client Caucus – Joe R. & Gwen H.** gave the meeting report from the February 1, 2009 meeting.

Absent: Jamie D. & Dennis B.

- Richard discussed the topics of the Monday Steering Committee meeting
- Cost-sharing increases
- Budget reductions

## **Formulary Report – Brad**

Some clients have been getting billed for phenotypes (by the labs) that were not ordered. This will hopefully be corrected soon.

## **Budget Reductions, Phase 2 of 3 – Richard**

The Committee was tasked with prioritizing the list of brainstormed items from the November meeting. The subgroup divided the items into tiers.

Subgroup Members: Dennis B, Dennis K., Joe V., Gwen H., Darren A., Richard

The Committee accepted the recommendation of the subgroup regarding which items should be in which tier. The full Committee then prioritized the items in Tier 2. Tier 1 was not prioritized since all items are needed to be implemented to acquire the amount of cuts needed. The rank of the Committee is as follows:

- **Tier1:**  
Those items which could/should be implemented first – (~\$1 million reduction)
  1. Mandatory/highly recommend WSHIP/insurance
  2. Look at admin and staff cost reduction by DOH HIV Client Services
  3. Decrease region dollars 5% via parity
  4. Eliminate events such as CAREvent
- **Tier 2:**  
Those items which would be more harmful to “have to” implement, but could be done as a last resort. Prioritized by the Steering Committee:

1. Decrease amount paid for medical/lab
2. Decrease amount paid to pharmacies
3. Reduce formulary
4. Eliminate dental for non-King County
5. Contract with single lab provider
6. Contract with a single pharmacy provider (mail-order)
7. Only pay CD4 and VLs twice per year
8. Only pay premiums rather than co-pays and deductibles also
9. Have an eligibility requirement to EIP of a CD4 count of 300 or lower (there is no current program standard requirement)
10. Reduce medical/lab to most critical services – live-saving
11. 10% cut across each line item, which would create a wait list
12. Un-grandparent (129 people) whose income is 301 to 370% of the poverty federal level

- **Tier 3:**

Those items which should NOT be implemented under any but drastic circumstances as they would cause public health concerns or go against the mission of DOH and/or EIP

1. Residency – change to 6-months in Washington State
2. Residency – US citizens only
3. Eligibility based on AIDS diagnosis only

- **Tier 4:** Those items which may not have a cost impact but should be implemented as good policy/practice or cannot be done

1. Case Managers assist clients to move to insurance
2. Re-address with insurance providers to accept clients
3. Re-define family to include domestic partnerships
4. Look at clients covered with Veterans Administration (VA) and encourage them to use VA
5. Look at Medicare Part D plans as to which have more favorable co-pays
6. Calculate effect of no payment for Medicaid Spenddown
7. Investigate higher rebates

### **Cost-share schedule – Richard/Teri**

Changes for April 1, 2009 Cost Share: Federal Poverty Level (FPL) amounts greater than 100% will have an additional \$10 per month cost share for uninsured clients in each income bracket.

### **Steering Committee Meeting Expenses – Richard**

Client Caucus recommendations for cost saving - Al B.

Maintain the current 4 meetings per year, but have both meetings (Client Caucus & Steering Committee) on the same day to reduce the overnight lodging cost. Client Caucus would meet in the morning and the EIP Steering Committee would meet in the afternoon.

This recommendation will be on the agenda at the next Steering Committee meeting.

### **Membership - Richard**

Mary Saffold talked about herself and her background working in the HIV/AIDS community.

**Dennis K.** recommended a motion to elect Mary, **Micheal M.** seconded the motion.

Motion approved.

Richard's 3-year term on the Steering Committee is up for renewal so **Dennis K.** made the motion to renew Richard's term as co-chairperson position for another 3-year term.

Motion was unanimously approved.

### **Public Comments – Richard**

None

## Announcements – Richard

Richard read the obituary for Kelly Scott who was an active member of the HIV/AIDS community in Washington State for many years. He had served on the Seattle-King County Planning Council and the Early Intervention Program (EIP) Steering Committee.

Richard read the obituary for Martin Delaney. The link to the HIV Client Services Quarterly Update contains an article about Martin Delaney and all he has done for the HIV/AIDS community. [http://www.doh.wa.gov/cfh/hiv\\_aids/client\\_svcs/documents/qujan09.pdf](http://www.doh.wa.gov/cfh/hiv_aids/client_svcs/documents/qujan09.pdf).

Doug North from DSHS talked about the current legislative bills that could affect services provided by DSHS. The Health and Rehabilitation services budget may possibly be cut by 10%. Regional Support Networks (RSN's) may not continue. Economic services have been cut by 25%.

David Lee from AIDS Education and Training Center (AETC) informed the Steering Committee of the upcoming HIV & Corrections conference in Pasco WA on March 7<sup>th</sup> sponsored by AETC. Click on the link below for conference information.  
<http://depts.washington.edu/nwaetc/calendar/09march.html#hivpasco>.

### HIV In Corrections Conference

March 7, 2009

Pasco, WA

Contact person: [Rachel Clad](#) (206) 221-4964

Target audience: medical doctors and registered nurses

Dennis K. of the AIDSNET Council informed the Steering Committee that Bob Wood will continue serving on the AIDSNET Council.

## Future Agenda Topics – Richard

Budget reductions

### Remaining Meeting Dates for 2009

5/4/09, 8/3/09, 11/2/09

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### Clients with Spenddown and Medicare

Agency /Programs	Things to Know
Department of Social and Health Services (DSHS). Contact: DSHS Customer Service Center 877-980-9180	
Spenddown	<ul style="list-style-type: none"><li>• You must keep track of your expenses to meet your spenddown.</li><li>• Before you meet spenddown, EIP pays for your HIV related drugs and limited medical, lab and dental services.</li><li>• After you meet spenddown you get:<ul style="list-style-type: none"><li>○ Medicaid coverage.</li><li>○ Payment of your Medicare Part D co pays.</li><li>○ Extra Help.</li></ul></li></ul>
Medicare Savings Plan (MSP)	<ul style="list-style-type: none"><li>• Pays your Medicare Part B premium.</li><li>• Gets you Extra Help.</li></ul>
Healthcare for Workers with Disabilities (HWD)	<ul style="list-style-type: none"><li>• You must be working to qualify.</li><li>• Gives you Medicaid coverage without a spenddown.</li><li>• Pays your Medicare Part D co pays.</li></ul>

	<ul style="list-style-type: none"> <li>• Gets you Extra Help.</li> <li>• EHIP can pay the premium.</li> </ul>
Medicare. You must have either a Part D or Medicare Advantage Part D plan or insurance that is as good as. Contact: 800-Medicare	
Part D Plan	<ul style="list-style-type: none"> <li>• Pays for all drugs on their formulary (not just HIV drugs).</li> <li>• EHIP can pay the premium.</li> </ul>
Medicare Advantage Part D (MA-PD)	<ul style="list-style-type: none"> <li>• Pays for all drugs on their formulary (not just HIV drugs).</li> <li>• May pay for all or part of your Medicare medical/lab copays.</li> <li>• EHIP can pay the premium.</li> <li>• Not all providers are in an MA-PD.</li> </ul>
Social Security Administration (SSA). Contact: 800-772-1213	
Extra Help (EH)	<ul style="list-style-type: none"> <li>• Lowers or gets rid of Medicare Part D copays and deductibles.</li> <li>• If you aren't in a DSHS program, you must apply once a year.</li> </ul>
Life Long AIDS Alliance. Contact: 800-945-4256	
Evergreen Health Insurance Program (EHIP)	<ul style="list-style-type: none"> <li>• You must be enrolled in EIP.</li> <li>• Pays HWD and Medicare Part D and MA-PD premiums.</li> </ul>

Clients with Spenddown\*

Agency /Programs	Things to Know
Department of Social and Health Services (DSHS). Contact: 877-980-9180	
Spenddown	<ul style="list-style-type: none"> <li>• You must keep track of your expenses to meet your spenddown.</li> <li>• Before you meet spenddown, EIP pays for your HIV-related drugs and limited medical, lab and dental services.</li> <li>• After you meet spenddown you get Medicaid coverage.</li> </ul>
Healthcare for Workers with Disabilities (HWD)	<ul style="list-style-type: none"> <li>• You must be working to qualify.</li> <li>• Gives you Medicaid coverage without a spenddown.</li> <li>• EHIP can pay the premium.</li> </ul>
Life Long AIDS Alliance. Contact: 800-945-4256	
Evergreen Health Insurance Program (EHIP)	<ul style="list-style-type: none"> <li>• You must be enrolled in EIP.</li> <li>• Helps you get insurance.</li> <li>• Pays the insurance premium.</li> <li>• You may have co pays for some drugs or medical services.</li> </ul>

\*PLEASE NOTE: EIP requires non-Medicare clients with incomes <100% of the federal poverty level (FPL) to apply for Medicaid services.