



Colorado Department
of Public Health
and Environment

Family Planning Program Prevention Services Division

Medical Policy Advisory Committee Meeting Minutes		
When:	Wednesday, (9:00 – 10:00 am)	
Where:	Call in meeting	
Meeting Facilitator:	Jody Camp, Colorado Department of Public Health and Environment (CDPHE)	
Team Leaders:	Lauren Mitchell, Tri-County Health Department and Kathy Brown, Broomfield Health and Human Services Department	
Participants:	All Colorado Title X delegate agency staff members are invited to attend.	
Time	Topics	Presenter
9:00 - 9:05	Introductions	All
9:05 -9:25	<p>Overview of 2015 Title X Federal Review results</p> <p>Two findings:</p> <ol style="list-style-type: none"> 1) Grantee (CDPHE) must monitor sub-recipient agencies to ensure Federal compliance with applicable fiscal laws, regulations and grant provisions. Sub-recipients are in appropriately treated as vendors rather than required contractual agreement consistent with Program Guidelines for <i>Project Grants for Family Planning Services</i>, as well as other applicable required as defined by Subpart C of 45 CFR of Part 92.37 and 92.40, OMB A-133- Sections 210 and 400 (c and d). 2) Grantee (CDPHE) does not monitor Title X program income nor insure that program income earned during the project period is used to further objectives of Title X program as required by 45 CFR 92.25. <p>Recommendations (not required):</p> <ol style="list-style-type: none"> 1) Address FPAR “unknowns” – contraceptive methods, race/ethnicity/ and insurance information 2) MMR vaccines of staff 3) Opening and closing clinics – contact CDPHE staff ASAP. 4) Donation policy for family planning services <ol style="list-style-type: none"> a. On organization letterhead. b. Dated. c. Explains where donations go in your fiscal system. <p>*See attachment for formal response to Federal Review findings 2015.</p>	Jody
9:25 -9:35	<p>PrEP, PEP update</p> <ul style="list-style-type: none"> • PrEP is recommended for individuals who are HIV negative and at substantial risk for HIV. • Family planning clients must be provided information about the availability of PrEP and PEP for HIV prevention and the availability of these services in the 	

community.

- Use the HIV flyer on the Hub or other materials that explain PrEP and PEP.
- Karen will provide resources with the meeting minutes.
- Resources:
 - The Colorado AIDS Project may have information regarding providers prescribing PrEP <http://www.ncaids.org/>
 - CDC is updating its PEP and PrEP guidelines for providers. These are the current guidelines <http://www.cdc.gov/hiv/guidelines/preventing.html>
 - HIV/AIDS/ National Strategy Update to 2020. Watch video for short summary of document <https://aids.gov/>
<https://www.youtube.com/watch?v=Ab5YHHONmEk&hpslider=1>
 - CDC PrEP and PEP information. See the PrEP infographics at the bottom of the page. If you switch the page to Spanish language, the infographics also switch to Spanish. Under question, “How do I speak to my doctor or other health care provider about PrEP?”, there are English and Spanish brochures. <http://www.cdc.gov/hiv/basics/prep.html>
 - Family planning clinic staff are encouraged to refer clients requesting PEP or PrEP to providers within your communities. Some of the clinics that operate family planning programs, such as FQHC’s, are providing PrEP services. Leigh Bowe with Summit said that staff with the Denver Public Health STD Clinic have been very helpful in providing technical assistance.
 - Denver Public Health Linkage to Care for PrEP and PEP information and services. **Please see below for more information about Denver Public Health’s PrEP and PEP services.** <http://www.denverhealth.org/public-health-and-wellness/public-health/clinics-and-services/hiv-care-and-prevention/our-services/linking-to-care>
 - Kelly Conroy with Jefferson County emailed that Thomas Deem with CDPHE STI/HIV/Viral Hepatitis Branch has been very helpful in helping clients access PrEP. If clients have insurance or Medicaid, he will help them find a provider in their network that can prescribe PrEP. For the uninsured, if they qualify for Medicaid he will assist them with the application, or navigating the health insurance marketplace if applicable. If they are uninsured and <500% federal poverty level, he can help them with patient assistance through Gilead where the company will fill the prescription through a pharmacy they contract with, have the assistance plan pick it up, and mail the meds directly to the provider for the patient to pick up so they can keep it affordable. **Please the below for information Thomas Deem provided regarding process for accessing CDPHE PrEP and PEP services. Attached documents were provided by Thomas Deem and are related to**

	accessing CDPHE PrEP and PEP services.	
9:35-9:45	<p>HIPPA update</p> <ul style="list-style-type: none"> • Please make sure your agency HIPAA privacy policies, privacy practices notices for clients and authorizations for release of PHI are up to date with the Omnibus HIPAA Rulemaking, compliance date 9/23/2013. The Network for Public Health Law has resources that may be helpful to you when updating these documents. Please also date updated documents so it is clear that information from the 2013 rule is included. • Omnibus HIPAA Rulemaking, compliance date 9/23/2013 http://www.hhs.gov/ocr/privacy/hipaa/administrative/omnibus/index.html • HIPAA Model Privacy Practices http://www.hhs.gov/ocr/privacy/hipaa/modelnotices.html • The Network for Public Health Law, HIPAA resources https://www.networkforphl.org/search_results/?q=HIPAA 	Karen
9:45-10:00	Announcements and Open Forum	All
	<p>REQUIRED TRAINING – September 30</p> <ul style="list-style-type: none"> • Required webinar: Intimate Partner Violence, September 30, 2015 12 Noon to 1 pm. Speaker: Amy Pohl with CCADV. The webinar will be recorded and archived for later viewing. <p>NFPRHA Conference – Broomfield, CO – October 5-6</p> <ul style="list-style-type: none"> • NFPRHA Fall meeting at the Omni in Broomfield, October 5-6, 2015. Registration is free and travel assistance is available. http://www.nationalfamilyplanning.org/pages/events/event---fall-2015-meeting---agenda • All Colorado Title X contractors are members of NFPRHA and there may be travel and hotel reimbursement available for your attendance. Please contact NFPRHA directly for this information. Deadline to apply for travel and lodging assistance is Friday, September 4, 2015. <p>LARC and other Funding</p> <ul style="list-style-type: none"> • New funds from foundations. \$1.5 M to be given to FP clinics to purchase LARC methods. A survey will be sent to agencies asking how many devices are needed. CDPHE expects money to be received and distributed by the end of the calendar year. At this time, we only have pledges from donors; no checks have been received yet. The funds will be restricted to LARC purchases; however Jody will check to see if funds can be used for vasectomies. The remaining portion of the donated funds will be used to host a LARC conference to engage partners outside the Title X network and provide education about LARC and best practices. • CDPHE pursued crowd-source funding, but this has failed to come to fruition. • CDPHE is considering pursuing legislative option in FY16-17 to increase the general fund line item. This is only in the discussion phase right now. <p>Upcoming RFA</p> <ul style="list-style-type: none"> • CDPHE will be releasing a RFA this year. The prerequisite of this RFA is an agency must be an existing Title X contractor (will only be open to existing 29 contractors). Jody will post RFA and each agency will need to sign and submit 	

	<p>a document committing to Title X for the next 3 years. This document must be signed by your agency director. You will have 30 days from when the RFA is posted to submit a signed form. After this 3 year period, the Title X program will be an open and competitive process and each contractor will have a more significant application.</p>	
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Kristina Green moving to School Based Health Center Program

- September 1, Kristina will be moving to a new role as the SBHC Program Coordinator here at CDPHE. Going forward and question or document sent to Kristina, can be directed to Jody Camp (Jody.Camp@state.co.us or 303-692-2301).

Next Meeting: Wednesday, November 18, 2015



COLORADO

Department of Public
Health & Environment

Dedicated to protecting and improving the health and environment of the people of Colorado

Colleen R. Bray, MS, RD
Regional Program Consultant - Office of Family Planning
DHHS/Office of the Assistant Secretary for Health (OASH)
Region VIII (CO, MT, ND, SD, UT, WY)
Byron G. Rogers Federal Office Building
1961 Stout Street, Room 11-150
Denver, CO 80294

July 21, 2015

Dear Colleen,

Thank you for your Region VIII, Colorado Family Planning Program, Title X Federal Review Report, dated May 27, 2015.

This letter serves as a formal response to the compliance findings and corrective actions, featured in the report. Thank you for your support of the Colorado Department of Public Health and Environment's family planning program.

Sincerely, Jody Camp

A handwritten signature in black ink that reads "Jody Camp".

Colorado, Title X State Director

CC:

Denise Burrows
CDPHE, Controller

Wayne Peel
CDPHE, Prevention Services Division Fiscal Manager

Patricia Theriot
CDPHE, Auditor

Esperanza Ybarra
CDPHE, Health Services & Connection Branch Chief

During the March 23-25, 2015 Federal, Title X Review, the following compliance findings were documented. Please see CDPHE's response to the corrective actions below:

Financial Review

Finding #1: The Grantee does not monitor the sub-recipient agencies to ensure Federal compliance with all applicable fiscal laws and regulations and grant provisions. The sub-recipient agencies are inappropriately treated as vendors rather than the required contractual agreement consistent with the Program Guidelines for Program Grants for Family Planning Services, as well as the other applicable requirements as defined by Subpart C of 45 CFP Part 92.37 and 92.40, OMB A-133-Sections 210 and 400 (c and d).

Required Corrective Action: The Grantee must meet the monitoring requirements for its sub-recipients as stated in the Program Guidelines for Program Grants for Family Planning Services, as well as the other applicable requirements as defined by Subpart C of 45 CFP Part 92.37 and 92.40, OMB A-133-Sections 210 and 400 (c and d).

- **CDPHE Action:** Please see the attached letter (pages 4 and 5) that describes our corrective response to this finding. Starting January 1, 2016, all CDPHE, Title X contractors will be treated as sub-recipients and monitored accordingly. It is CDPHE's understanding that these actions will resolve this finding.

Finding #2: The Grantee does not monitor Title X program income nor insure that program income earned during the project period is used to further the objectives of the Title X program as required by 45 CFR 92.25.

Required Corrective Action: The Grantee must develop a system to monitor program income from all the sub-recipient agencies and the sub-recipient agencies service sites. Additionally, the grantee must insure that all Title X income earned during the project and budget periods are used to further the objectives of the Title X project.

CDPHE Action: CDPHE defines Title X program income as funds generated from receipt of family planning services. This income comes in the form of insurance, Medicaid reimbursement and cash payments for family planning services. CDPHE will monitor Title X, program income through its CDPHE, Fiscal Compliance Unit for all sub-recipients. Annually, beginning January 2016, CDPHE will complete the actions below. It is CDPHE's understanding these actions will resolve this finding.

- Program staff will sample a portion of the family planning sub-recipients and review program income documentation to ensure that funds generated from family planning activities are appropriately returned to the program. All family planning sub-recipients will be sampled, every couple of years.
- Program staff will coordinate the review of sub-recipient program income documentation with Fiscal Compliance Unit staff. The Fiscal Compliance Unit will ensure that income collected in the Title X program is documented correctly and tracked and coded back to the family planning program at the clinic site.
- If a Title X sub-recipient is found out of compliance program income monitoring, a correction plan will be negotiated.
- If a Title X sub-recipient needs technical assistance, the Fiscal Compliance Unit will ensure the sub-recipient staff are trained accordingly.

April 17, 2015

To Whom It May Concern,

TITLE X FEDERAL REVIEW: At the end of March, 2015, federal reviewers performed a formal review of Colorado's Title X Family Planning program. This formal review happens every three years, according to Title X regulation. Overall, the reviewers were very complimentary of Colorado's program as there is a lot to be proud of and it is always exciting to see our accomplishments recognized. There are, however, a couple of financial areas where the reviewers requested changes.

During the review exit conference, we were informed that there are issues with the current designation and treatment of Family Planning Agencies as vendors as well as the current methodology for tracking program income. The two issues in need of resolution are as follows:

1. In July, 2014, CDPHE designated the Title X, Family Planning Program agencies as vendors. This was in error and for that we apologize. Moving forward, we will return all Title X agencies back to a sub-recipient designation.
2. Treatment of Title X, Family Planning Program income requires clarification from the federal government and we are waiting for additional information before communicating any action. Please be aware, however, that new monitoring will be required for program income in the near future.

TIMELINE: Below is a proposed timeline for returning to a sub-recipient designation for Title X, Family Planning Program contractors. CDPHE recognizes that this change may create difficulties for some contractors and, as such, we designed a transition to help alleviate the inevitable burdens as much as possible.

- By April 21, 2015: Email contractor-specific Family Planning 2015-2016 budgets.
- July 1, 2015- December 31, 2015: Family planning contractors will remain as vendors to allow six months for contractors to adjust their accounting practices to meet sub-recipient designation requirements.
- January 1, 2016 – June 30, 2016: Through contract amendments, contractors will be re-designated as sub-recipients and meet requirements accordingly.
- July 1, 2016: Execute new, sub-recipient contracts pursuant to a new, competitive Request for Applications (RFA).

CONTROLLER GUIDANCE: Another major factor in the return to a sub-recipient designation for Family Planning Program contractors is a potential discrepancy in federal reporting. Pursuant to the federal review, the Colorado State Controller's Office requires that CDPHE adjust the object code for Family Planning Program reporting from vendor to sub-recipient retroactive to July 1, 2014. While the re-designation to sub-recipient is inconsistent with the current Family Planning contract, CDPHE will not hold Family Planning Program contractors to a different standard than required by their contract obligations.

This memo serves as notice for auditors in the event that Title X Family Planning contractors must explain potential future discrepancies. Federal reviewers understand that a six-month transition period is needed to adjust from a vendor to a sub-recipient treatment of funds.

It is our desire to help alleviate the difficulties inherent in the transition to a sub-recipient designation, reporting and tracking. We apologize for our vendor designation error and for the inconvenience to our partners. If there are questions or concerns related to the transition plan, please contact either Jody Camp, Family Planning Director, or me. We are happy to assist you, including holding conference calls as needed. We plan to hold a couple of information sessions so please look for the forthcoming details soon. Thank you for your patience as this issue gets resolved.

Regards,
Wayne Peel, Chief Fiscal Officer
Prevention Services Division
Wayne.peel@state.co.us
303.692.2558

Jody Camp, Family Planning Director
Prevention Services Division
Jody.camp@state.co.us
303.692.2301

CDPHE PrEP and PEP services information provided by:

Thomas Deem, RN, BSN

Interim Biomedical Intervention Program Coordinator

STI/HIV/Viral Hepatitis Branch

P [303.691.4034](tel:303.691.4034) | C [303.548.0594](tel:303.548.0594) | F [303.782.5393](tel:303.782.5393)

4300 Cherry Creek Drive South, Denver, CO 80246-1530

Thomas.Deem@state.co.us | <https://www.colorado.gov/cdphe>

Currently the CDPHE provides active linkage services for motivated clients, who are interested in starting on PrEP. We can also provide assistance in the event there is a rapid nPEP situation if a known HIV exposure occurred within a 0-72 hour (max 48hr ideal) time-frame.

nPEP Referrals:

Business Hours (M-F, 9-5): Contact me directly at contact information below on office or cell phone. You may also page the DIS staff at [303-891-6215](tel:303-891-6215).

After Hours (evening, Weekends): Please route the patient directly to the nearest emergency room.

PrEP Referrals:

- 1) A provider or community based organization first screens for eligibility and interest (screening tool attached).
- 2) If the client screens as good candidate, the provider discusses with the clients the pros and cons of PrEP, and answers any preliminary questions/concerns and provides counseling (counseling tool attached).
- 3) If the client is interested, the provider then completes a fax referral form, and sends it to CDPHE (referral form attached).
- 4) CDPHE then directly contacts the client within 48 hours of receipt of fax referral, meets with them in person or over the phone, and provides financial counseling and PrEP provider linkage referrals.
- 5) CDPHE referred will receive follow-up at 4 and 11 month intervals following medication start and will also be offered PrEP support options.

Brochures:

CDPHE currently utilizes the general PrEP brochures from the Project Inform website, located here:

<http://www.projectinform.org/orderprepbooklets/>

They are bilingual and patient population specific. You can order them for free in bulk (takes about 1 month) or download the PDFs directly and print them in-house. I have a stash of them here at CDPHE if you would like to take a look at them in person sometime and likely can supply you with a few while you wait for an order to come in.

You can also find a point of care, quick PrEP and nPEP combo handout here, that is the same as above as far as ordering:

<http://www.projectinform.org/prep-pep-cards/>

CDPHE Specific Palm Card:

There is also a quick little handout you can print out, that has my direct contact information, for client who are not as high risk, but still might be interested in PrEP. You could do a more passive referral process with these folks (palm card attached) and maybe pair it with the other brochures.

We've found that an active process is more beneficial for those at high risk, so that we can get them onto PrEP before HIV acquisition, so please don't hesitate to do direct referrals as well.

Denver Public Health PrEP and PEP services information provided by:

Alex Delgado, BSW
DI Clinical Specialist/LTC Services
Denver Public Health
605 Bannock Street
303-602-3618 – Office
303-263-3308 – Cell

Anyone can access Linkage to Care services here at Denver Public Health, regardless of their residence.

For PrEP, our visits with patients are comprised of an assessment to determine if they have insurance or would qualify for Medicaid and/or patient assistance through Gilead, counseling (to determine risk, needs, etc.), education about PrEP and then a referral to medical care. Services we provide are tailored to each patient.

For PEP, we can coordinate testing in the STD clinic here and assist the patient with getting their tx, even if they do not have insurance. We also provide counseling.

Your family planning clinic providers can call our central Linkage to Care line at 303-602-3652, which is staffed generally between the hours of 8-5, Monday - Friday. If no one answers, a message can be left on our confidential v/m. Name & contact information and best time to return a call should be left on this v/m. Patients call also call this number directly and should also be instructed to leave name, contact number & best time to call if they get v/m. We respond to v/m either the same day or the next business day.

If someone is inquiring about PEP and have had an exposure to HIV within the past 72 hours, they should be directed to come to the STD clinic if it should be during clinic hours, generally 8-3:30, for evaluation. Outside of these business hours, patients should be directed to go to the Adult Urgent Care Clinic or Emergency Dept at Denver Health. It's imperative that patients inform medical staff that they want to get PEP. It's also imperative that a patient begin PEP within 72 hours of an exposure.

To clarify your question: Any client, regardless of residence, can go to Adult Urgent Care or Emergency outside of STD clinic business hours for PEP. If necessary, they will be dispensed PEP for 1-3 days and then be referred to the STD clinic for follow up (which will include the remainder of their dosing). During business hours, any client, regardless of residence, can come to the STD clinic for PEP.