

**ALASKA MENTAL HEALTH TRUST AUTHORITY
PROGRAM & PLANNING COMMITTEE MEETING**

**July 31, 2019
8:30 a.m.**

**Taken at:
3745 Community Park Loop, Suite 120
Anchorage, Alaska**

Trustees Present:

Chris Cooke, Chair
Mary Jane Michael
Laraine Derr
Paula Easley
Verne' Boerner
John Sturgeon
Ken McCarty

Trust Staff Present:

Mike Abbott
Steve Williams
Miri Smith-Coolidge
Kelda Barstad
Andy Stemp
Luke Lind
Michael Baldwin
Carrie Predeger
Katie Baldwin-Johnson
Jimael Johnson
Valette Keller
Eric Boyer
Autumn Vea

Also participating:

Denise Daniello (via Speakerphone); Corrine O'Neil; Beverly Schoonover (via Speakerphone); Anita Halterman; Lisa Cauble; Anne Applegate; Jill Ramsey; Dan Gummo; Ann Farris; Valerie Word-Thompson; Mary Elizabeth Rider; Bradley Grigg (via Speakerphone); Gennifer Moreau-Johnson (via Speakerphone).

PROCEEDINGS

CALL TO ORDER

CHAIR COOKE called the meeting to order and called the roll. All trustees were present. He asked for any announcements, and recognized Mr. Abbott.

MR. ABBOTT ceded the floor to Paula Easley.

TRUSTEE EASLEY stated that she had resigned from the Trust, and introduced Anita Halterman as her replacement.

MS. HALTERMAN stated that she was honored to be serving among all of the trustees, and looked forward to being on the board.

CHAIR COOKE appreciated Trustee Easley's many years of dedicated service, not only to the Trust, but to all of Alaska. He added that he looked forward to working with her replacement. He asked Mr. Abbott where the board stands as far as the vacancy.

MR. ABBOTT replied that Trustee Easley had submitted her resignation a bit ago, and it will be effective at the end of the day tomorrow. Trustee Easley will continue to serve as a trustee through the committee meetings and the Special Board Meeting, after which her resignation becomes effective. He stated that he was notified by the Governor's office that Anita Halterman has been appointed as a replacement. He explained that because it is a midterm appointment, Ms. Halterman can begin her service immediately. She is still subject to confirmation, but will be allowed to participate as a full-fledged trustee unless she fails to be confirmed by the Legislature prior to the end of the next regular session of the Legislature. He added that this term expires in 2023.

CHAIR COOKE welcomed Ms. Halterman aboard, and asked for any other announcements.

TRUSTEE MICHAEL thanked Trustee Boerner and Katie Baldwin-Johnson for going to Girdwood for Senator Stevens' day.

CHAIR COOKE moved to the agenda, and stated that the only subject of committee consideration is the budget for next year. He asked for any changes or adjustments to the agenda. There being none, the agenda stood as approved.

ETHICS DISCLOSURES

There were no ethics disclosures.

APPROVAL OF MINUTES (April 18, 2019)

MOTION: A motion to approve the minutes of April 18, 2019, was made by TRUSTEE McCARTY; seconded by TRUSTEE MICHAEL.

There being no objection, the MOTION was approved.

CEO UPDATE

MR. ABBOTT gave an update of what is going on in Juneau and how that may influence the Trust. The Legislature took action in some cases with super majorities and other cases with

simple majorities to send two different bills to the Governor's desk that address the four major outstanding issues facing the State. He stated that each of the bills is fully voted on, as opposed to about six weeks ago when the capital budget went to the Governor without the super majority that was necessary for some of the actions. He continued that transmittal to the Governor is expected soon, and then the Governor will have either 15 or 20 days in order to make decisions on vetoes and then send those back to the Legislature for potential consideration of overrides on any vetoes. He added that he had not heard anything from the Governor's office related to timing. He asked for any questions.

TRUSTEE STURGEON asked if any vetoes were overridden.

MR. ABBOT replied that the Legislature took a couple of different veto-override votes which were unsuccessful.

TRUSTEE BOERNER asked for more detail as to the items that the Governor did veto with regards to the Mental Health Budget, and where they stood.

MR. ABBOTT stated that no Trust funds were affected by the recent action. The Trust funds that were in the budget were not vetoed by the Governor and, as a result, have been enacted. He talked about the two areas with the most significant impact as a result of the Governor's vetoes. One of those two areas was housing and homelessness funds that would have been appropriated to AHFC and then distributed to a variety of housing programs around the state; approximately \$10 million of General Funds. He added that the second was behavioral health grants and other Medicaid funding. The Governor reduced the amount of the behavioral health grants that were initially appropriated by the Legislature by about 6 or \$8 million. He stated that there is a significant disagreement between the Administration and the Legislature as to how much money should be appropriated for Medicaid. The Legislature appropriated more than what the Administration requested. He continued that the Governor, through administrative actions, can reduce the reimbursement rate to providers, can eliminate a service such as adult dental. Those changes do not require legislative approval. The Legislature can and did appropriate money necessary to fund adult dental in their budget. He added that the Governor can still eliminate the service level, and then the money will simply not be spent.

CHAIR COOKE thanked Mr. Abbott and moved to the budget recommendations presentation. He recognized Steve Williams.

BUDGET RECOMMENDATIONS PRESENTATION

MR. WILLIAMS stated that staff would work through the FY21 budget presentation with the program officers assigned to their focus areas. He added that this presentation is for the trustees to hear what the budget is, how it was developed, what is in there, how it relates to what staff does in terms of policy and direct service programming to improve the lives of the beneficiaries. He added that there is no official action being requested of the committee today. He began by highlighting the budget planning process and stated that the budget recommendations that are made fall within the State Mental Health Budget Bill, which is separate from the State Operating Budget Bill.

TRUSTEE STURGEON asked about the impact the Trust recommendations have to the Administration and the legislators.

MR. ABBOTT replied that one of the primary statutory responsibilities of the Trust is to recommend how the State should spend its money, in addition to making the decisions about how the Trust spends its own money. He explained this in greater detail.

MS. BARSTAD stated that she is the Trust program officer for the focus areas of housing and long-term services and supports. She began with housing and explained that the goal is so that beneficiaries can access safe and affordable housing with appropriate supports to maintain their tenancy. The result is pretty direct, and we want the beneficiaries to maintain safe and stable housing. She continued that there are a lot of challenges because there is an exceptional demand for affordable housing with not enough units to meet that demand. She added that is across the state, across populations, and not just for the beneficiaries. The beneficiaries are impacted by waitlists and lack of access to that housing. She stated that in rural Alaska, that demand is further impacted by a lack of housing stock. There simply are not enough physical buildings for people to occupy; never mind rental assistance or other programs that are designed to make that housing affordable. She continued that the Trust, AHFC, the Department of Health and Social Services, Department of Corrections, and other agencies work together to leverage the Trust funding to create residential and support services. There are waitlists because of a huge demand for homeless services. She stated that the FY2020 budget process has revealed the fragility of that emergency shelter and transitional housing network. There are many agencies where the funding is patchworked together, which impacts the services greatly. The funds that are provided by the State are critical to keep open emergency shelters, access to food, as well as rapid rehousing and permanent supportive housing. She added that, looking at some of the solutions to the housing issues for beneficiaries, there is a disproportionate number of beneficiaries that are homeless. She explained this focus area in more detail. She stated that there is a false assumption that by not having these programs the costs will decrease. However, by doing nothing, a huge expense in other areas are being imposed. She continued that the basic homeless assistance program provides funding to 36 different agencies statewide, which includes a variety of different programs, primarily emergency shelters, but also some rapid rehousing funds. The special needs housing grant focuses more on permanent supportive housing and some rapid rehousing programs, and that funds 14 agencies that served over 281 households. These two programs alone impacted 13,000 individuals in fiscal year '18.

TRUSTEE DERR commented on Forget-Me-Not and the research that was done. It is managed by the Glory Hole in Juneau. The emergency room staff donated \$10,000 to the program after the study came out. It was financially rewarding for the city, and the impact on the people in the emergency room was so tremendous that the money was donated because it made their lives so much easier.

MS. BARSTAD commented that brought up the point of some of the secondary effects of bringing people out of crisis into a stable environment. She moved to long-term services and supports and stated it is more complex and covers a lot of territory. Beneficiaries are able to access effective and flexible person-directed long-term services and supports. That is the goal for this portion of the focus area. The challenges are because there is a general lack of capacity and funding. Long-term services and supports covers folks from young babies up to hospice care. It is every age, every category of beneficiary; and the aging population will peak in 2020. She added that there is a workforce shortage, and there has not been a lot of long-term planning to address that bubble. There are also budget concerns with the provider reduction rates, and we do not know the extent of how that will affect the availability of providers.

A short discussion ensued on case managers and how the 1115 waiver will impact it.

MS. MOREAU-JOHNSON, director of the Division of Behavioral Health, gave a detailed update on the 1115 waiver being approved for the substance use disorder portion. She expected the claims to come through for 1115 SUD services within the week.

MS. BARSTAD stated that there have been some great successes and significant impacts for the beneficiaries. The IDD Systems Change, DD Vision, has done amazing systems work in gathering together people who experience intellectual and developmental disabilities, providers, and State System employees to figure out the vision and future of this particular system of care.

CHAIR COOKE thanked Ms. Barstad and moved to the next focus area segment.

MR. WILLIAMS stated that Jimael Johnson would present the beneficiary employment and engagement focus area.

MS. JOHNSON stated that she is a program officer for the beneficiary employment and engagement focus area in one of her areas. She noted that the overall goal of the focus area is to increase the opportunities and outcomes for the beneficiaries to engage in integrated and competitive employment, as well as opportunities for meaningful engagement. The end that is hoped for is increased recovery wellness through those strategies. She added that there are many resources posted on the website for anyone who would like more in-depth information on the background, the data. She stated that there are persistent disparities between the beneficiaries and the general population related to employment outcomes. The beneficiaries are consistently underemployed and under-engaged in the communities. She continued that there are some consistent themes around challenges, and some of the solutions identified by the stakeholders are consistent with the data and research in this area. The persistent perceptions and miscommunications that lead to the stigma and the related effect of stigma continue to be barriers to employment and engagement. She then talked about the concept of peer support services. The challenge here is the lack of understanding of how the peer support goal fits within the current clinical model and delivery of services. She continued her presentation, explaining as she went through the anticipated work happening in FY20 that support some of the recommendations for FY21. She stated that they are in the process of planning an employment conference on October 24th and 25th specifically for Trust beneficiary populations, and encouraged the trustees to attend. It will be two days of great information from some national and local experts, as well as some of the community partners who are having great success doing this work. She continued her presentation with the peer support worker certification project with the Department of Health and Social Services, as well as many other stakeholders. The momentum around professionalizing and credentialing peer supporters has been a national movement with great interest to partners in Alaska. She moved on to some of the key employment strategy that will be in the FY21 budget. She stated that the peer support certification was a recommended ongoing project that will continue to FY21, and will help to ensure a highly qualified and consistently trained workforce for peer support.

CHAIR COOKE stated that the agenda called for a break.

(Break.)

CHAIR COOKE called the meeting back to order and moved to the substance abuse prevention

and treatment area.

MS. BALDWIN-JOHNSON stated the need to think about how to refer to this focus area in terms of how the language is evolving around talking about addiction. The recommendation is to move away from language that is stigmatizing. "Substance abuse" is a term that seems to be moving more in the direction of "substance misuse and addiction." She continued that the role of this focus area is to decrease youth alcohol and substance use, and adult binge-drinking and illicit drug use. There are a lot of partners with a key relationship with the Division of Behavioral Health, who have been very engaged in the work related to behavioral health reform, specifically around the development of the 1115 waiver. She added that the component of the waiver that addressed the SUD portion is a great opportunity to think about how the Trust can help support implementation of those objectives of the waiver, in terms of prioritizing some of the funding as requests are received from organizations working in this area. She continued her presentation talking about some of the challenges that provided a framework for the focus area. She stated that one of the priority strategies is a social norms campaign and education about recovery, to understand the dynamics of addiction, and to hear recovery stories. It is important to reflect on the human aspect of the issue of addiction. She continued that there is a need to ensure that there is access to medication-assisted treatment statewide, which is also a goal and an objective of the 1115 SUD waiver. She added that there are three key strategies. First is the "Partner Initiatives" through Recover Alaska, which is a coalition of partners that includes funders. Another key is advocacy; raising the awareness of the negative impacts of excessive alcohol consumption. Also, advocacy in the legislation of policies that help reduce and target addiction and reduction of alcohol consumption. She moved to access to treatment, which is a broad strategy targeting projects and initiatives that increase, improve, or enhance beneficiary access to appropriate treatment and interventions. She then moved on to crisis system development, which relates to providing and developing the right types of services that need to be in place to help people that are dealing with addiction; those that are more on the acute side of struggling with addiction with substance use being the primary issue. She asked Eric Boyer to continue.

MR. BOYER explained that in the crisis system of care the work has been with the stakeholders really looking at addressing one of the most basic elements of mental health: substance misuse care and how to provide support. The four elements include access, screening and assessment, and appropriate referral to services, which were looked at in terms of what has been successful. He continued that the crisis teams are supporting folks, and the majority of the time the folks are supported out in the community getting the support needed without having to go to the next level. Relationships are being formed.

TRUSTEE MICHAEL asked about the stabilization center.

MS. BALDWIN-JOHNSON noted that that component of care is needed within the continuum. There is a need to define what it looks like in order to determine the best place to start. She continued that it is still potentially part of the conversation, but we are not actively looking for a facility.

MR. ABBOTT added that Southcentral and Providence are actively working with staff on this project, and it is likely that one or both would be the operators of such a facility that would not need our space. He stated that their recommendations are not to buy a building right now. He continued that when the FY21 budget was approved, this section was in the nonfocus area. It has moved inside the budget and put in the substance abuse prevention and treatment focus area.

The other change is that there is a recommended award of \$200,000 to Bartlett Memorial Hospital in Juneau because a crisis stabilization facility is being built at their hospital, and the money will contribute to that. He added that this is an area where a difference is expected to be made.

CHAIR COOKE moved to Disability Justice.

MR WELCH stated that he works in the disability justice focus area. Taking this criminal justice system at its most basic is not very effective at meeting the many needs that beneficiaries have when they are engaged in the system, whether as a victim or as an offender. He moved to a sequential intercept model that is used to plan and set up programs that can meet the needs of beneficiaries who find themselves engaged in the criminal justice system at the different intercepts. He highlighted the partnerships in this focus area and pointed out where they are part of the intercept model. He continued that crisis intervention teams are used throughout the country, and they help first responders learn and have the skills to be able to respond to situations where they may be dealing with someone suffering from a mental illness or substance-use disorder. This equips them with the tools to be able to deescalate situations rather than using other means. He continued that it is better for beneficiaries to receive services in an environment where they are not in custody. There are more effective treatments that are also more cost-effective. He highlighted that the Department of Corrections has stated very strongly that they support re-entry services. This is one area that does align with this Administration.

CHAIR COOKE recessed for lunch.

(Lunch break.)

MISSION MOMENT

CHAIR COOKE called the meeting back to order and asked Ms. Barstad to introduce the visitors.

MS. BARSTAD introduced the Alzheimer's Resource of Alaska and stated that the Trust has partnered with this agency for a long time. They provide education and services to the community focusing on individuals who have Alzheimer's disease and related dementias as well as their caregivers and families. She introduced Pam Kelly, executive director, and Ann Farris, education specialist for the organization. She stated that Ms. Farris will do a brief introduction of services and introduce Ms. Thompson who will share her experience.

MS. FARRIS thanks all for the opportunity to give voice to the impact that the Trust has to the Alzheimer's disease and related dementias mini-grant program. She introduces Valerie Word-Thompson, one of the care partners, who will share her story.

MS. WORD-THOMPSON stated that she is a full-time care partner for her husband, Ken Thompson. He was showing signs of cognitive issues and she did not know how to address the issues. She talked about their relationship and how the conversations started changing. After his brother died, he researched medical issues and went to see his primary doctor. That research prepared them for the diagnosis. She continued that she was referred to Alzheimer's of Alaska and attended an anger management group because she was very angry with Ken. She did not understand that the behavior he was presenting was his new normal, and he was not malicious toward her. Alzheimer's of Alaska was very helpful. Both of them attended the ABCs of

Caregiving classes that informed them on many issues dealing with Alzheimer's disease. It was at this time she learned about the mini-grants, which are funds for individuals dealing with Alzheimer's disease. These funds were utilized to assist with Ken's quality of life by having him interact with others outside the home. The first grant was for a membership with the Anchorage Senior Center; another grant was for a tablet which allowed Ken to play games and watch YouTube; another grant was for a PureFlix yearly membership. She added that the official diagnosis was the beginning of 2017, and described her thoughts when something was happening and different. The real communication started after his brother died.

CHAIR COOKE thanked her for her testimony.

TRUSTEE MICHAEL stated appreciation for her story which was so articulate and heartfelt.

MR. ABBOTT also thanked her and asked if she had any suggestions for how the program can be improved.

MS. WORD-THOMPSON replied that in speaking with her therapist, which is something that care partners need, she was asked if care partners get any grants. And in hearing no, she stated that maybe she should ask the powers that be. She added that some type of relief is needed.

CHAIR COOKE asked if the folks from the association had any comments or questions.

MS. KELLER, the executive director of Alzheimer's Resource of Alaska, stated that she is gracious to the Trust for the support received that has been longstanding and in a variety of forms. She continued that workforce development has been part of the efforts in the attempts to help educate individuals that provide the direct supports to understand that simply speaking louder or more slowly or addressing an individual as though they were a toddler is not the way to enhance well-being and improve quality of life; but there were some evidence-based approaches to take that might impact and achieve that outcome. She added that some of the Trust support has allowed building capacity to do that. It has also been beneficial in building out the care coordination program that is allowing Medicaid waivers to flourish in this state. One of the underlying themes is that it is really important for the individuals served to continue fostering and feeling a sense of the community in all the areas of the state where the virtual presence of the Alzheimer's Resource of Alaska has been established.

TRUSTEE EASLEY asked if they are seeing an increase in the number of people coming in for services.

MS. KELLER replied that there was a 12-percent increase in the number of people serviced for this last fiscal year. She stated that is a profound indicator that the growing need has not been oversold.

MR. ABBOTT stated that next on the agenda is departure for the Pioneer Home. The meeting will reconvene at 3:00 o'clock.

(Lunch and Trustees' on-site visit to the Pioneer Home.)

CHAIR COOKE stated that some of the advisory board folks are on-line and asked to be moved to the first part of the afternoon session. He asked who was present from the advisory boards.

MS. DANIELLO stated that she is Denise Daniello from the Alaska Commission on Aging.

MS. SCHOONOVER stated that she is Beverly Schoonover, acting director of the Alaska Mental Health Board of Alcohol and the Advisory Board on Alcohol and Drug Abuse.

MS. APPLGATE stated that she is Anne Applegate with the Governor's Council on Disabilities and Special Education. She began and explained the community transportation funding. She noted the importance of transportation for accessing all of the other programs and opportunities that exist for community engagement, for employment, for having a meaningful social life. The State provides services in the home and community, but there is no access to those services without accessible transportation being readily available. She added that there are small communities that do not have accessible vans, which is one of the things provided in this grant. She stated that there is a lot of information on the Department of Transportation's great website.

TRUSTEE MICHAEL asked about the status for this year in terms of vetoes.

MS. APPLGATE replied, in terms of vetoes, that money from the GF is gone completely, but we are assuming there is status quo until we know otherwise.

CHAIR COOKE recognized Denise Daniello.

MS. DANIELLO began with deferred maintenance and essential program equipment. She explained that both are capital programs that are administered by the Department of Health and Social Services, Financial Management Services Facility Section. The deferred maintenance is an important program for organizations with facilities serving at least one of the Trust beneficiary populations. The funds are important because facilities have a tendency to develop repair needs over time, and this program helps to address those needs. She stated that the maximum grant for deferred maintenance is \$50,000, with a 10 percent match that can be made in cash or in kind. She continued that last year there was a total of \$607,947 awarded, and 35 agencies applied for the funds. It was only enough to fund 13 requests. She stated that the joint recommendation from the Board, the Council and the Commission is \$250,000 MHTAAR and \$250,000 GF/MH for deferred maintenance, and to be offered every year per the trustees' recommendation from last year. The deferred maintenance program has been a longstanding program for many years and continues to be very important.

CHAIR COOKE recognized Beverly Schoonover.

MS. SCHOONOVER noted the assistive technology request. She gave a brief summary, and stated that it was a \$500,000 request for both fiscal years '20, '21. The funding would be used to expand access to medical appliances and assistive technology. The goal of this money is to improve the daily life, functioning, safety, and independence of Trust beneficiaries in their homes.

CHAIR COOKE asked for any questions for the advisory board folks, and then moved back to the discussion of FY Trust budget recommendations.

MR. BOYER talked about workforce and provided some information and a couple of examples

of its impact; how it helps the beneficiaries; and how it related to the budget. He added that he has a lot of data on the impact with the workforce initiatives, and would be glad to share it at some point.

MR. WILLIAMS moved into the last large category of Trust funding and the nonfocus area allocations. He asked Jimael Johnson to continue.

MS. JOHNSON stated that the topic of prevention and early childhood intervention has been brought forward to the trustees several times over the past few years. This is an area of emerging work for the Trust, and there was a recognition that the early years and prevention of disability is a priority for the Trust. There has been a realization that early childhood experiences, particularly traumatic events, have a true long-term effect on individual health, as well as population health and mental health. She continued that there is a correlation between disability, all of the beneficiary categories and early childhood trauma. The goal of this emerging area for the Trust would be to support programs that are serving young children, and also promote resiliency, prevent and address trauma, and also to provide access to the early intervention services that are most effective. She talked about the challenges around early childhood systems and the threat of funding cuts to many of the early childhood services that are established that impact beneficiary groups, including Head Start. She stated that data analysis is critically important to understanding the system and the impacts that different interventions will have on families and supports. On the solutions side, the stakeholders state that this is an area that the Trust should be involved with; the work is very important, and there is a need to continue to increase that investment. She continued that the information of pediatric primary care in behavioral health is identified as cost-effective and a destigmatizing way to serve children in a more natural environment, potentially a pediatric practice. Identifying this strategy allows being responsive to communities and demands from the population, as well as interest from the stakeholders and practice partners in developing an integrated practice.

MR. ABBOTT explained that the request in this item is to essentially create an allocation for this purpose that meets the description in the budget, and then we would work to propose actual spending from that. This has been an underserved part of the portfolio in the past, and the recommendation is proposing to grow it.

MS. JOHNSON summarized the final category of the budget and talked about policy support around the 1115 waiver as an essential piece of infrastructure to help support families and young children.

MR. WILLIAMS talked about the FY19 partnership grant program to show how, if approved, the FY21 budget would be used. He moved to the dental grants and stated that staff will be paying attention to what happens with the Medicaid dental program and how that impacts the beneficiaries.

TRUSTEE BOERNER stated, for the record, that if the adult dental Medicaid program goes away, there is no way that the Trust can supplant that because it requires the State match, as well as being part of the State program in order to receive those lost Federal funds, which are upwards of \$18 million.

MR. ABBOTT moved to the mini-grant program which target critical health and safety needs. Individual beneficiaries can receive up to \$2500 once a year through the mini-grant

program. He then outlined the next steps between now and the board meeting in August. He moved to the agenda item, which is the request for an approval. He stated there would be hesitancy in recommending big changes to the FY21 program based on the significant changes in FY20.

MR. WILLIAMS added that this is being done in consultation with the advisory boards and with the key stakeholders.

CHAIR COOKE asked for a motion.

MOTION: A motion to approve a \$200,000 FY20 Authority Grant to Bartlett Regional Hospital for the Crisis Stabilization Center project. These funds will come from the FY20 Emergency Psychiatric Services Assistance budget line -- was made by TRUSTEE DERR; seconded by TRUSTEE BOERNER.

MR. BOYER gave a synopsis of the proposal and introduced Bradley Grigg, the chief behavioral health officer at Bartlett Regional Hospital.

MR. GRIGG thanked the trustees for the opportunity to have a dialogue about this project. He stated that, as of August 14th, the proposals for the design of the facility are due, and anticipated is a minimum of four proposals coming from a combination of local architects. By the third week of August, the architectural firm awarded the project will design the facility and manage the project for the firm. He continued that, from that point, there will be a big transition process as this project will be on campus, and the current outpatient clinic will be torn down. He described how this project is moving forward and the benefits it will bring to the community.

CHAIR COOKE thanked Mr. Grigg for his presentation. He stated that this project sounded like something that the Trust ought to be involved with to build the capacity to support local efforts, combined with other funders to make an important project like this happen. He moved to the motion on the table and asked for any objection.

There being no objection, the MOTION was approved.

CHAIR COOKE moved to trustee comments and waived his time. There being no further business, he adjourned the Program & Planning Committee meeting.

(Program & Planning Committee meeting adjourned at 4:50 p.m.)