

Community Violence Prevention Task Force

Meeting Minutes
October 25, 2024
10:00-11:30 am

Date of meeting: Friday, October 25, 2024
Start time: 10:00 am
End time: 11:30 am
Location: Virtual Meeting (Zoom)

Member Votes		Vote 1*	Vote 2
1	Robbie Goldstein – Department of Public Health (DPH) (<i>chair</i>)	X	X
2	Kevan Barton – YouthConnect, Boys & Girls Clubs of Boston	X	X
3	Paul Brennan – Lawrence General Hospital	X	X
4	Clementina Chéry – Louis D. Brown Peace Institute	X	X
5	Gregg Croteau – United Teen Equality Center (UTEC)	X	X
6	Thea James – Violence Intervention Advocacy Program, Boston Medical Center	X	X
7	Keesha LaTulippe – Bureau of Community Health and Prevention, DPH	X	X
8	Dwight Robson – Roca	X	X
9	Monalisa Smith – Mother’s for Justice and Equality	X	X
10	Asharia Supreme – 18 Degrees	-	-
11	Laxmi Tierney – MassHealth	X	X
12	Danayjah Yassen – Old Colony YMCA, Safe Corners	X	X

* (X) Voted in favor; (O) Opposed; (A) Abstained from vote; (-) Absent from meeting or during vote

Proceedings

Commissioner Goldstein called the meeting to order at 10:00 am. He welcomed members and explained that the Task Force’s meetings are subject to the Open Meeting Law and that any votes taken during the meeting would be conducted via roll-call vote.

Commissioner Goldstein introduced two members who were unable to join the Task Force’s first meeting, Monalisa Smith, founder of Mother’s for Justice and Equality, and Dr. Thea James, Director of Boston Medical Center’s Violence Intervention Advocacy Program.

Vote 1 to approve the 10/10/2024 meeting minutes: Commissioner Goldstein requested a motion to approve the minutes from the Task Force’s previous meeting on 10/10/2024. Chaplain Chéry introduced the motion, which was seconded by Mr. Barton and approved by roll-call vote (see detailed record of votes above).

Commissioner Goldstein reviewed the legislative charge of the Task Force, noting that the focus of the Task Force centers primarily on a specific funding opportunity being offered by Medicaid to support community violence prevention programming across the state. In his remarks, Commissioner Goldstein briefly touched upon the various benefits and potential challenges or drawbacks to accepting Medicaid funding for community violence prevention, noting that the guest presenter, Dr. Kyle Fischer, Policy Director at the Health Alliance for Violence Intervention (HAVI) would be able to provide a much more detailed overview of the topic.

Dr. Fischer provided Task Force members with both a detailed summary of the Medicaid funding opportunity and the topic of violence as a public health crisis. As a level set, he provided background on the Medicaid reimbursement model and summarized the experiences of the handful of states that have elected to accept Medicaid funding for violence intervention programming. He highlighted some of the strengths of utilizing Medicaid funding for violence intervention programming, as well as some of the challenges to the approach. For additional details, refer to the meeting presentation on the Task Force's [Meeting Materials webpage](#).

In response to members' questions, Dr. Fischer elaborated on a few topics in particular:

- Rate-setting: Dr. Fischer explained that state Medicaid offices are responsible for setting the rates that community violence prevention programs receive for services.
- Equity: Dr. Fischer emphasized that stakeholder engagement, particularly during the program design phase, is critical to ensuring the voices of communities and smaller organizations are well-represented in discussions of topics such as reimbursement rates and training and certification requirements.
- Payment mechanisms: Dr. Fischer explained the benefits and challenges to time-based billing versus lump sum bundled payments, which he noted can be more equitable and ultimately better for programs.
- Documentation: Dr. Fischer noted that he views the creation of documentation or case management systems as one of the biggest initial hurdles for violence prevention organizations. He explained that most organizations are likely already tracking the information that is required to be reported to Medicaid, but it does involve a process change, which can be disorienting.
- Reimbursement timing: In response to a member's question about whether funds are preloaded, Dr. Fischer reemphasized that states have the ability to write their own Medicaid policy, underscoring the need for strong stakeholder engagement.
- State Medicaid interagency coordination: Dr. Fischer noted that states' Medicaid offices can vary in how they design their structure and staff. He explained that interagency coordination is ideal, but some states' internal structure and bureaucracy can impede the success of the overall system.
- Social determinants of health and upstream services: Dr. Fischer reiterated that states have control over their benefit design and some have chosen to utilize Medicaid funds to address social determinants of health and upstream services. He explained states have various options in front of them, such as 1115 waivers and state plan amendments.
- Lack of revenue to date: In response to a question about the lack of revenue that states have seen through the Medicaid approach for funding violence prevention work, Dr. Fischer explained that states' situations vary dramatically and how specific benefits are designed can impact how easily organizations can access available Medicaid funding.

Commissioner Goldstein facilitated a discussion of how this federal funding source might be implemented in Massachusetts in particular and the types of information or questions Task Force members would like answered for the Task Force's next meeting. Two topics members highlighted included hearing about alternative proposals, such as the one proposed by Roca; and the feasibility of adding provisions during the

design phase to ensure that organizations which have been working in violence prevention are supported and receive technical assistance in areas such as Medicaid billing.

In closing, Commissioner Goldstein highlighted the Task Force's Mass.gov webpage, where copies of the meeting materials are posted for members of the public (<https://www.mass.gov/community-violence-prevention-task-force>). He noted that the Task Force's next meeting is scheduled for 11/1/2024.

Vote 2 to adjourn the meeting: Commissioner Goldstein requested a motion to adjourn the meeting. Chaplain Chéry introduced the motion, which was seconded by Dr. James and approved by roll-call vote (see detailed record of votes above).

The meeting was adjourned at 11:30 am.

Meeting Materials

1. Draft 10/10/2024 meeting minutes
2. HAVI presentation
3. HAVI supplemental information