

**NTCA FY2010 Funding Formula Workgroup
Conference call – March 13, 2008 (3-4pm ET)**

Workgroup members present: Jim Cobb, Marie Dorsinville, Angelito Bravo, Kim Fields, Kathy Moser, Phil Griffin, Charles Wallace, Stuart McMullen, Pat Infield, Carol Pozsik, Tom Shinnick, Greg Andrews, Angela Starks, Beverly Metchock, Dave Wilson, Andy Heetderks, Dan Dohony, Heather Duncan, Denise Ingman, Phil Talboy

Absent: Tom Navin, Wanda Walton, Iram Bakhtawar, Joe Scavotto, Kashef Ijaz

- Phil Griffin called the meeting to order
- As part of follow up action from last meeting, the group provided feedback, validation and affirmation on the identified strengths of the formula. Some of the overall positives to the variables in general included:
 - scientific means of developing/defining useful variables
 - formula/variables recognizable by congressional leadership of how process works and connect the dots
 - eliminating favoritism
 - some members who had been on original committee work group, thought formula helped to level the playing field
 - re-establishes confidence in overall process
 - Correct B1/B2 definition
 - Rolling 5 year average softens impact of changes in funding
- Discussions took place on the **positive** aspects for the U.S. born, Foreign-born, Class A, B1, B2 and HIV variables, and the next meeting will conclude with the final variables of MDR TB, Substance Abuse and Homeless Populations.
Comments were presented on:
 - Cases:** Establish/reflects minimum level of work for each case
‘Suspect’ represents important effort put into workup, but CDC doesn’t collect this data
Question of what does funding look like if ‘hold harmless’ are included in formula
Case variable influences better surveillance
 - USB-M:** important to leave in at least 15%
Recognizes disparities—access to care is less
Most disenfranchised
 - FB:** variable represents challenges of language and cultural barriers.
 - Class 1/B1/B2:** CDC needs to look at the impact of the new definitions, especially for B2
New definition represents a 1/3 increase for some areas
Note—group felt that CDC review is required of the increase in numbers due to new definition; need to look at comparison of numbers based on old and new definition;

LAX and WA offered they had good data for such a review.

HIV-TB: Need more CDC funding invested into HIV sites for screening of patients for TB; DTBE should look at impact of HIV
Suggested that Suzanne Marks could help DTBE look at impact

- Discussion ended on HIV variable, and next meeting will start with review of positive points and issues with MDR-TB, Substance Abuse and Homeless populations; then a review of weaknesses will be undertaken for each variable.
- Phil Griffin will act as the clearing house for everyone's e-mail traffic.