

V. Review/Approve Minutes of April 28 2017

Members reviewed the minutes. There was a correction to Ms. Geronymo's name. The minutes were accepted with the correction of the name.

Motion to accept the minutes of April 28, 2017 with the correction noted.

Moved: Carla Valle-Schwenk

Seconded: Janelle Job

Motion: Passed

VI. Membership

Mrs. Meizoso reviewed the vacancy report (copy on file). She indicated there are several subcommittee vacancies at this time, for several PLWHAs, a pharmacist, physician and a substance abuse provider. Subcommittee members were directed to contact staff with suggestions for qualified members.

Dr. Ladner reviewed the county/partnership attendance requirement memo (copy on file). Five absences-excused or unexcused-during the County fiscal year (October 1 to September 30) shall be grounds for automatic removal. In addition members must be in attendance for 75% of the duration of any scheduled meeting to be marked as present.

VII. Reports

▪ Ryan White Program Update

Carla Valle-Schwenk

Carla Valle-Schwenk referenced the final expenditures for FY 26 (copy on file). Direct spending totaled 98.54% and grant spending totaled 98.69%. Carryover will be requested but will be substantially less than in past years. In YR 26, more than 10,000 clients were served (10,156). Annual reports are being completed. Viral load suppression rates are over 70%. This may be due to the implementation of the viral load reporting protocols, which require updated information every six months. Because of accelerated deadlines with reports, contract executions are a little behind but should be out shortly. The County is still waiting on the full notice of award which should be received before the end of June. The project officer indicated that the program did well on the grant application.

▪ Partnership Report

Christina Bannister

Ms. Bannister reviewed the Partnership report (copy on file).

▪ Expenditure Reports

▪ ADAP Update

Dr. Javier Romero

Dr. Romero reviewed the report from May 26 (copy on file). Some additional funding data has been added to the table. Part B funds 10 full time positions in ADAP. The April utilization totaled over \$2 million dollars for 3,637 prescriptions. The ADAP indicators haven't been updated for this report. As of 5/25/17, there are 4,377 clients. There were 938 new clients in ADAP last year. The Hepatitis C pilot program has ended but the Hepatitis C medications are now on the ADAP formulary. The ADAP formulary is being expanded, implement in two phases. Phase 1 expands the formulary with the medications which were removed in 2010, to be implemented by June 30. Phase 2 is pending discussion, but would be an expansion of medications to include several Department of Health formularies which would encompass most of the medications currently on the Part A (Miami) formulary (formulary copies on file). Two vaccines are now on the formulary but administrating them via the ADAP office is pending approval. In addition, because of current construction at the pharmacy, stock is restricted. Clients for whom medication is not available will have their medications shipped overnight. The ADAP program will have some transportation vouchers after July. Excess funds have been identified in the ADAP

program for the possibility of a onetime proposal to fund a Special Project of National Significance (SPNS) project. General reminders were reviewed including the maximum capacity of 50 clients served a day. Additional staff is in the process of being hired (6 additions-3 replacements and 3 new). On May 30, 2017, the pharmacy will be closing at noon.

VIII. Standing Business

None.

IX. New Business

- Clarification of Assessments on Primary Medical Care Standards *All*

Mrs. Meizoso indicated that a provider had submitted a question regarding birth control assessments on the Primary Medical Care Standards. The provider wanted additional clarity as to what documentation was needed in the chart or if the assessment fell under the umbrella of sex education and/or condom usage or if it needed to be addressed independently or for one or both sexes. The subcommittee agreed that birth control assessment could mean several things, including the type of birth control used. There was a suggestion to reword letter (1) to pregnancy planning and differentiating 1 1) preconception counseling for men and women and 1 2) contraception counseling for men and women including assessment and type of birth control method.

- Chiropractic Services *All*

Dr. Joseph Hudson made a presentation on the benefits of chiropractic services for pain reduction. Dr. Hudson provided excerpts from various articles and a book, Chronic Pain and HIV (copies on file). Dr. Hudson indicated that a subset of physical medicine/chiropractic services could be added to the allowable medications list. While providing diagnostic codes for some HIV related diagnoses, some of the items listed are too general and are not well connected to HIV. Dr. Hudson agreed to provide more detailed descriptor diagnoses to assist consideration of inclusion. Pain lasting six months or more should be included as an indicator for referral for treatment by a chiropractor.

X. Announcements

Mrs. Meizoso reviewed the remaining items in the packets, including a support group for ex-offenders starting in July, the February new clients in care, 2017 needs assessment flyer, and changes to the June and July calendars (copies on file). The Part A program response to the expansion of the ADAP formulary was included in the packets (copy on file).

XI. Next Meeting

The next meeting is June 23, 2017 at the United Way.

XII. Adjournment

Ms. Bannister adjourned the meeting at 10:52 a.m.