

10:00 a.m. - 12:00 p.m.

Miami-Dade County Main Library 101 West Flagler Street, Auditorium Miami, FL 33130

#### AGENDA

#### I. Call to Order Dr. Diego Shmuels Marlen Meizoso II. Meeting Housekeeping and Rules III. Introductions A11 IV. Floor Open to the Public Dr. Diego Shmuels V. Review/Approve Agenda All VI. Review/Approve Minutes of September 1, 2022 A11 VII. Reports Recipients (Part A, Part B, ADAP, General Revenue) All Vacancies Marlen Meizoso Report to Committees (reference only) A11 Medical Care Subcommittee Report Marlen Meizoso VIII. **Standing Business** All December meeting IX. New Business • YR 2022 Sweeps/Reallocation #3 A11 Maximize Expenditures Prior to Fiscal Year Closure All • Service Descriptions- Medical Transportation, Mental Health, • Other Professional: Legal Services and Substance Abuse A11 2023 Meeting Dates and Work Plan Development Marlen Meizoso Χ. Announcements Marlen Meizoso XI. Next Meeting: December 1, 2022 at Main Library- Auditorium Dr. Diego Shmuels XII. Dr. Diego Shmuels Adjournment

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership's Care and Treatment Committee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com



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# Meeting Housekeeping

## Miami-Dade HIV/AIDS Partnership, Committees, and Subcommittee

Updated June 21, 2022 *Miami-Dade County Main Library Version* 







• Audio of this meeting is being recorded and will become part of the public record.



- Members serve the interest of the Miami-Dade HIV/AIDS community as a whole.
- Members do not serve private or personal interests, and shall endeavor to treat all persons, issues and business in a fair and equitable manner.
- Members shall refrain from side-bar conversations in accordance with Florida Government in the Sunshine laws.







## Language Matters!

In today's world, there are many words that can be stigmatizing. Here are a few suggestions for better communication.



Remember **People First** Language . . . *People* with HIV, *People* with substance use disorders, *People* who are homeless, etc.

Please don't say **RISKS** . . . Instead, say **REASONS**.

Please don't say, **INFECTED with HIV** . . .

Instead, say ACQUIRED HIV, DIAGNOSED with HIV, or CONTRACTED HIV.

Please **do not** use these terms . . .

Dirty ... Clean ... Full-blown AIDS ... Victim ...







- Behavioral Science Research Corp. (BSR) staff are the Resource Persons for this meeting.
  - Will BSR staff please identify themselves?
  - Please see staff after the meeting if you are interested in membership or if you have a question that wasn't covered during the meeting.







## **General Reminders**

- Per County mandate, masks are no longer required to be worn in County buildings but because meeting attendees maybe immunocompromised, attendees are asked to wear a mask at all meetings. While masking cannot be enforced, we hope you will respect the health concerns of members and guests and choose to wear a mask for the duration of each meeting. Mask are available from staff.
- Place cell phones on mute or vibrate.
  - ✤ If you must take a call, please excuse yourself from the meeting.
- Only voting members and applicants should be seated at the meeting table.
  - ✤ You may move your chair if concerned about social distancing.







- **Important!** *Please raise your hand if you need clarification about any terminology or acronyms used throughout the meeting.*
- All speakers must be recognized by the Chair.
  - ✤ Raise your hand to be recognized or added to the queue.
  - ✤ The Chair will call on speakers in order of the queue.
- Discussion should be limited to the current Agenda topic or motion.
- Speakers should not repeat points previously addressed.
- Any attendee may be permitted to address the board as time allows and at the discretion of the Chair.







## Attendance

- All members are expected to arrive on time and remain throughout the entire meeting.
  - If you expect to arrive late or leave early, please notify staff in advance of the meeting as this may impact quorum.
- Please **SIGN IN** to be counted as present at the meeting.





## Parking

 See the front desk attendee to have your parking validated or see staff after the meeting for a parking sticker (available to members of the affected community).







## Resources

Today's presentation and supporting documents are online at <a href="http://aidsnet.org/meeting-documents/">http://aidsnet.org/meeting-documents/</a>.



Welcome to AIDSNET.org!

The online home of the Miami-Dade HIV/AIDS Partnership – The official Ryan White Program Planning Council, The Ryan White Program Clinical Quality Management (CQM) Program, and *Community Newsletter*. Contact us at hiv-aidsinfo@behavioralscience.com to join the Partnership or CQM and to share resources for people with HIV.

• Follow the Partnership on Facebook and Instagram!

Thank you for attending today's meeting!









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#### Floor Open to the Public

"Pursuant to Florida Sunshine Law, I want to provide the public with a reasonable opportunity to be heard on any item on our agenda today. If there is anyone who wishes to be heard, I invite you to speak now. Each person will be given three minutes to speak. Please begin by stating your name and address for the record before you talk about your concerns.

"BSR has a dedicated phone line and email for statements to be read into the record. No statements were received."



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#### Care and Treatment Committee Meeting Miami-Dade Public Library, Auditorium 101 West Flagler, Miami, FL 33130 September 1, 2022

#	<b>Committee Members</b>	Present	Absent	Gues	sts
1	Alcala, Etelvina		Х	Mester, Brad	
2	Downs, Frederick		Х	Pobleto, Karen	
3	Grant, Gena	Х		Romero, Javier	
4	Henriquez, Maria	Х			
5	Iadarola, Dennis		Х		
6	Mills, Vanessa	Х			
7	Neff, Travis		Х		
8	Roelans, Ryan	Х			
9	Siclari, Rick	Х			
10	Shmuels, Diego	Х			
11	Trepka, Mary Jo		Х		
12	Wall, Dan	Х		Stat	f
				Christina Bontempo	Marlen Meizoso
Quo	Quorum = 5			Robert Ladner	

Note that all documents referenced in these minutes were accessible to members and the public prior to (and during) the meeting, at <u>www.aidsnet.org/meeting-documents</u>.

#### I. <u>Call to Order</u>

Dr. Diego Shmuels, Chair, called the meeting to order at 10:29 a.m.

#### II. <u>Meeting Housekeeping and Rules</u>

Marlen Meizoso reviewed a Housekeeping and Rules presentation (copy on file), which reviewed the environmental reminders, parking, and meeting decorum for all participants.

#### III. <u>Introductions</u>

Members and guest introduced themselves around the room.

#### IV. <u>Floor Open to the Public</u>

Dr. Shmuels read the following:

Pursuant to Florida Sunshine Law, I want to provide the public with a reasonable opportunity to be heard on any items on our agenda today. If there is anyone who wishes to be heard, I invite you to speak now. Each person will be given three minutes to speak. Please begin by stating your name and address for the record before you talk about your concerns.

BSR has a dedicated line for statements to be read into the record. No statements were received.

There were no comments, so the floor was closed.

#### V. <u>Review/Approve Agenda</u>

The committee reviewed the agenda. Staff indicated that (a) Frederick Downs, Jr. was not able to attend, so staff will read the meeting housekeeping and rules; and (b) the word "projections" should be added to unmet need. The Committee made a motion approved the recommended change to the agenda.

Motion to accept the revised agenda.Motion: PassedMoved: Dan WallSeconded: Ryan RoelansMotion: Passed

#### VI. <u>Review/Approve Minutes of August 4, 2022</u>

The committee reviewed the minutes of August 4, 2022, and accepted them as presented.

Motion to accept the minutes from	August 4, 2022, as presented.	
Moved: Dan Wall	Seconded: Ryan Roelans	<b>Motion:</b> Passed

#### VII. <u>Reports</u>

• Part A

Dan Wall reported that the current expenditures for FY 2022 have been posted (copy on file). Thus far, the program has served 7,104 unduplicated clients under Part A and 893 unduplicated clients under MAI. Six contracts have been executed, and five are pending signatures. One is on hold on for a non-compliance issue. The final six are under recipient review for budget/scope of work revisions. Between July 2, 2018 and August 9, 2022, 2,591 unduplicated clients have been served under TTRA. Renewal contracts for Ending the Epidemic are in process. Integrated planning continues, and the plan is due December 6, 2022. Monkeypox vaccine guidance has been forwarded on behalf of the Department of Health. The National Ryan White Conference was held August 23-26, 2022; the items from the conference will be posted online soon by HRSA.

• Vacancies

Mrs. Meizoso reviewed the August 2022, vacancy report (copy on file). There are twelve vacancies on the Care and Treatment Committee. There is a pending application which will be processed at the next meeting. If anyone knows of interested individuals, they may invite them to a meeting or

Marlen Meizoso

Dan Wall

Miami-Dade HIV/AIDS Partnership/Care and Treatment Committee September 1, 2022 Minutes

have them contact staff. The Executive Committee decided to reduce committee size to sixteen total members. Revisions to the bylaws are underway and will be approved shortly. This will reduce the number of vacancies on the committee to four.

#### **VIII.** Standing Business

None

### IX. <u>New Business</u>

• Ryan White Program FY 2021 Co-Occurring Conditions

Dr. Robert Ladner reviewed the Ryan White Program FY 2021 Co-occurring Conditions (copy on file). There are seven special need demographic groups and eight co-occurring conditions presented. The annual cost of clients per co-occurring conditions was included. As in prior years, mental illness and housing instability account for the highest annual cost per client. Hispanic Men Who Have Sex With Men (MSM) clients have the highest viral load suppression rates and account for 46% of the Ryan White Program clients. Women of childbearing age had the lowest viral load suppression rates and have the highest rates of living under 136% FPL. Black MSM have the second lowest levels of viral suppression and highest level of substance abuse.

• Community Input Results from Integrated Plan and HIV and Aging Topics Christina Bontempo and Marlen Meizoso

Christina Bontempo and Marlen Meizoso reviewed the Community Input Results from Integrated Plan and HIV and Aging Topics (copy on file). Ms. Bontempo provided background on the Integrated Plan process and results from Community Input, which indicated the lack of affordable housing, lack of transportation, issues related to stigma/discrimination, lack of awareness of support services and difficulty getting or keeping a job, as key issues. Additionally, there were concerns with access to mental health, dental appointments, food insecurities and appointment timing for those who are employed or go to school. Mrs. Meizoso reviewed the issues related to HIV and aging which revolved around three themes: client issues (lack of knowledge, need for interventions, co-pay assistance), services, and medications.

#### Unmet Need/Service Gaps and Projections

#### Dr. Robert Ladner

Dr. Ladner reviewed the Unmet Need and Special Populations sheet (copy on file). The document provided a comparison of priority groups, clients served by the Ryan White and the number of clients served by the Medicaid program. Estimates of people living with HIV, estimated unaware and estimated unmet need were reviewed. Additionally, Dr. Ladner reviewed a calculations sheet to examine service gaps and projections to assist in budget planning (copy on file). Data was gathered using prior expenditures, a limited regression model, estimated inflation indexes, estimated impacts to service categories due to either client growth or programmatic changes to generate totals. Additional funding will be needed under food bank which would need about \$1.6 million dollars for the year. This need could be addressed through the sweeps process. Oral health care may need an additional \$500,000 because of potential

Dr. Robert Ladner

increased utilization from implant repairs and placement. Mental health would need additional funding as an identified need and because of Quality Improvement implementation.

• Summary to Date and Next Steps

Mrs. Meizoso reviewed a summary of the data to date and next steps the Committee must take (copy on file). Presentations were posted online at <u>www.aidsnet.org</u>, and after today's meeting, the final book will also be posted online. The first five steps of the needs assessment process and data presentations were reviewed.

- Epi profile data showed 57% of those living with HIV (prevalence) were 50+ years old and the largest exposure category is male to male sexual contact (56%). Cases of HIV co-infected (incidence) with a sexually transmitted disease has steadily risen (53 % early syphilis, 73% chlamydia, and 104% gonorrhea) since 2016. Hepatitis B and C infections have also increased from 2019 to 2020.
- **Demographic** data showed a rebound from last year, with a 4% increase in total clients and a 27% increase in new clients. Over 70% of clients are over age 35, mostly male (81%), largely Hispanic (63%), under 135% of the federal poverty level (51%) and with no other insurance (51%).
- **HIV Continuum** data showed a variation along the continuum, with Black.African Americans (76%), transgenders (73%), and MSM/IDU (63%) showing the lowest suppression rates.
- Client satisfaction survey information showed more clients working, a preferred language other than English, and low satisfaction levels with oral health care and oral health appointments.
- **Other funding** data showed there are several other sources for services to people with HIV, with the Medicaid program being the largest program.
- **Dashboard cards** contain data on priorities (current and historical), expenditures/allocations (current and historical), other funders by service category, and 5year averages to assist the Committee in its decision-making process.

The Committee reviewed co-occurring conditions, community input and aging, and unmet need/service gaps and projections. The remaining items left in the process were priority ranking, directives, and allocation of funds.

• Special Directives

Mrs. Meizoso reviewed the special directives directions. After full consideration of the data reviewed during the needs assessment process, the committee may direct the Recipient to address unmet (or under-delivered) service priorities, or address other issues defined during the process. These may include access issues, services for special populations or special geographic areas, or supporting other programs efforts to address unmet needs. The Committee determined that at this time no special directives were warranted.

All

All

• Priority Setting

Mrs. Meizoso explained that sample priority surveys were sent to members and guest who attended the last meeting. Pursuant to HRSA mandate, all service categories were prioritized, and results of the survey were projected (copy on file). The Committee then decided to move items as indicated below, then made motions to adopt the priorities for Part A and MAI.

### Motion to move emergency financial assistance from priority 17 to priority 4.Moved: Dan WallSeconded: Vanessa MillsMotion: Passed

# Move to move outreach from priority 24 and other professional from priority 25 to priority13 and priority 14, respectively.Moved: Dan WallSeconded: Rick SiclariMotion: Passed

The priorities were then renumbered as the results projected as indicted below.

	FY 2023 Ryan White Program Part A Priorities
YR 2023	Services
1	AIDS Drug Assistance Program (ADAP) Treatment [C]
2	Medical Case Management, including Treatment Adherence Services [C]
3	AIDS Pharmaceutical Assistance (Local Pharmacy Assistance Program) [C]
4	Emergency Financial Assistance [S]
5	Outpatient/Ambulatory Health Services [C]
6	Oral Health Care [C]
7	Food Bank/Home-Delivered Meals [S]
8	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
9	Mental Health Services [C]
10	Substance Abuse Services (Residential) [S]
11	Housing Services [C]
12	Substance Abuse Outpatient Care [C]
13	Medical Transportation (Vouchers) [S]
14	Outreach Services [S]
15	Other Professional Services (Legal Assistance and Permanency Planning) [S]
16	Early Intervention Services [C]
17	Home Health Care [C]
18	Medical Nutrition Therapy [C]
19	Home and Community Based Health Care [C]
20	Psychosocial Support [S]
21	Hospice Services [C]
22	Non-Medical Case Management [S]
23	Child Care Services [S]
24	Rehabilitation Services [S]

#### FY 2023 Ryan White Program Part A Priorities

25	Health Education/Risk Reduction [S]
26	Referral for Health Care and Support Services [S]
27	Linguistic Services [S]
28	Respite Care [S]

# Motion to accept the Ryan White Part A priority rankings, as presentedMoved: Dan WallSeconded: Maria HenriquezMotion: PassedThe MAI Priorities were projected based on the survey. The Committee moved items around then

made a final motion on the entire ranking.

Motion to move emergency financial assistance from priority 12 to priority 6.			
Moved: Dan Wall	Seconded: Ryan Reynolds	<b>Motion: Passed</b>	
-	oortation from priority 16 to priori	ty 8 and outreach from	
priority 20 to priority 9.			
Moved: Dan Wall	Seconded: Maria Henriquez	Motion: Passed	
Motion to move residential substance abuse to priority 10.			
Moved: Vanessa Mills	Seconded: Ryan Reynolds	<b>Motion: Passed</b>	

Items were renumbered based on the motions as indicated below.

YR	
2023	Services
1	Medical Case Management, including Treatment Adherence Services [C]
2	AIDS Drug Assistance Program (ADAP) Treatment [C]
3	AIDS Pharmaceutical Assistance (Local Pharmacy Assistance Program) [C]
4	Mental Health Services [C]
5	Outpatient/Ambulatory Health Services [C]
6	Emergency Financial Assistance [S]
7	Oral Health Care [C]
8	Substance Abuse Outpatient Care [C]
9	Medical Transportation (Vouchers) [S]
10	Outreach Services [S]
11	Substance Abuse Services (Residential) [S]
12	Food Bank/Home-Delivered Meals [S]
13	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
14	Housing Services [C]
15	Health Education/Risk Reduction [S]
16	Home and Community Based Health Care [C]
17	Medical Nutrition Therapy [C]

#### FY 2023 Ryan White Program Minority AIDS Initiative (MAI) Priorities

18	Non-Medical Case Management [S]
19	Psychosocial Support [S]
20	Home Health Care [C]
21	Early Intervention Services [C]
22	Referral for Health Care and Support Services [S]
23	Child Care Services [S]
24	Rehabilitation Services [S]
25	Hospice Services [C]
26	Other Professional Services (Legal Assistance and Permanency Planning) [S]
27	Linguistic Services [S]
28	Respite Care [S]
	C=core services S=support services

### Motion to accept the Ryan White Minority AIDS Initiative (MAI) priority rankings, as presented.Moved: Dan WallSeconded: Maria HenriquezMotion: Passed

• *Resource Allocations (flat and application)* 

Mrs. Meizoso explained that based on the established principles and needs assessment data, the Committee will allocate funds for Fiscal Year 2023-2024 for Part A and MAI. Two sets of budgets will be developed, a flat budget (using FY 2022 expenditure totals) and a grant ceiling budget. Sample budgets were shared in meeting materials (copies on file). The flat for Part A totaled \$24,5320,094 of which \$21,478,885 was allocatable to direct services. Regarding the conflict of interest; a "conflicted" member is a committee member who works for a service provider which is the sole provider in a service category. Conflicted members are prohibited from voting on allocations to that service category. Conflicts for service categories may exist under Part A (Food Bank) and under MAI (Mental Health Therapy, Substance Abuse-Outpatient, and Outreach) at the meeting. Members who are "conflicted" must declare their conflicted status prior to discussion and vote of the service category allocation. The conflicted member will then leave the meeting and complete Form 8B. Upon conclusion of the vote, a conflicted member will be asked to return to the meeting. The Committee reviewed projection data, prior expenditures, RFP totals, unmet needs, made reductions, and developed the budget as indicated below.

The conflicted member under Food Bank was not present in the room during the flat or ceiling vote.

## Motion to accept the FY 2023 Ryan White Program Part A Flat Funding budget, as presentedMoved: Dan WallSeconded: Ryan ReynoldsMotion: Passed

All

MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP)				
	FY 2023 PART A FLAT FUNDING (FORMULA & SUPPLEMENTAL FUNDIN	G) BUDGET		
FY 2023 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 RECOMMENDED ALLOCATION <sup>1</sup>	FY 2023 %	
1	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not Part A Funded	N/A	
2	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$ 5,869,052	27.32%	
3	AIDS PHARMACEUTICAL ASSISTANCE [C]	\$ 88,255	0.41%	
4	EMERGENCY FINANCIAL ASSISTANCE [S]	\$ 88,253	0.41%	
5	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$ 8,540,960	39.76%	
6	ORAL HEALTH CARE [C]	\$ 3,088,975	14.38%	
7	FOOD BANK*/HOME DELIVERED MEALS [S]	\$ 529,539	2.47%	
8	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	\$ 354,000	1.65%	
9	MENTAL HEALTH SERVICES [C]	\$ 132,385	0.62%	
10	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	\$ 2,169,744	10.10%	
11	HOUSING [S]	Not Part A Funded	N/A	
12	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$ 44,128	0.21%	
13	MEDICAL TRANSPORTATION [S]	\$ 154,449	0.72%	
14 15	OUTREACH SERVICES [S]	\$ 264,696	1.23%	
	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	\$ 154,449	0.72%	
16	EARLY INTERVENTION SERVICES [C]	Not Part A Funded	N/A	
17	HOME HEALTH CARE [C]	Not Part A Funded	N/A	
18	MEDICAL NUTRITION THERAPY [C]	Not Part A Funded	N/A	
19	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not Part A Funded	N/A	
20	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not Part A Funded	N/A	
21	HOSPICE [C]	Not Part A Funded	N/A	
22	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not Part A Funded	N/A	
23	CHILD CARE SERVICES [S]	Not Part A Funded	N/A	
24	REHABILITATION SERVICES [S]	Not Part A Funded	N/A	
25	HEALTH EDUCATION/RISK REDUCTION [S]	Not Part A Funded	N/A	
26	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not Part A Funded	N/A	
27	LINGUISTIC SERVICES [S]	Not Part A Funded	N/A	
28	RESPITE CARE [S]	Not Part A Funded	N/A	
	SUBTOTAL	\$21,478,885	100.0%	

\* Funded component of the service category.

l	С	]=	Core	Service;	S	= Support S	Service

ADMINISTRATION <sup>2</sup>	\$2,453,209
CLINICAL QUALITY MANAGEMENT	\$600,000
TOTAL	\$24,532,094

	Exp. Ratios
Core Services	84.35%
Support Services	15.65%

The ceiling budget for Part A was then reviewed which totaled \$25,758,698, of which \$22,582,829 was allocatable to direct services. Based on the flat funding budget and other needs assessment data the Committee developed the budget as indicated below.

Motion to accept the FY 2023 Ryan White Program Part A Ceiling Funding budget, as<br/>presented.Moved: Dan WallSeconded: Vanessa MillsMotion: Passed

	MIAMI DADE COUNTY					
	RYAN WHITE PROGRAM (RWP)					
	FY 2023 PART A CEILING FUNDING (FORMULA & SUPPLEMENTAL) BUI	FY 2023				
FY 2023	SERVICE CATEGORIES (ALPHABETIC ORDER)	RECOMMENDED	FY 2023 %			
RANKING	SERVICE CATEGORIES (ALTIABETIC ORDER)	ALLOCATION <sup>1</sup>	11 2025 70			
1	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not Part A Funded	N/A			
2	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$ 6,269,052	27.76%			
3	AIDS PHARMACEUTICAL ASSISTANCE [C]	\$ 88,255	0.39%			
4	EMERGENCY FINANCIAL ASSISTANCE [S]	\$ 88,253	0.39%			
5	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$ 8,540,960	37.82%			
6	ORAL HEALTH CARE [C]	\$ 3,588,975	15.89%			
7	FOOD BANK*/HOME DELIVERED MEALS [S]	\$ 529,539	2.34%			
8	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	\$ 354,000	1.57%			
9	MENTAL HEALTH SERVICES [C]	\$ 336,329	1.49%			
10	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	\$ 2,169,744	9.61%			
11	HOUSING [S]	Not Part A Funded	N/A			
12	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$ 44,128	0.20%			
13	MEDICAL TRANSPORTATION [S]	\$ 154,449	0.68%			
14	OUTREACH SERVICES [S]	\$ 264,696	1.17%			
15	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	\$ 154,449	0.68%			
16	EARLY INTERVENTION SERVICES [C]	Not Part A Funded	N/A			
17	HOME HEALTH CARE [C]	Not Part A Funded	N/A			
18	MEDICAL NUTRITION THERAPY [C]	Not Part A Funded	N/A			
19	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not Part A Funded	N/A			
20	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not Part A Funded	N/A			
21	HOSPICE [C]	Not Part A Funded	N/A			
22	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not Part A Funded	N/A			
23	CHILD CARE SERVICES [S]	Not Part A Funded	N/A			
24	REHABILITATION SERVICES [S]	Not Part A Funded	N/A			
25	HEALTH EDUCATION/RISK REDUCTION [S]	Not Part A Funded	N/A			
26	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not Part A Funded	N/A			
27	LINGUISTIC SERVICES [S]	Not Part A Funded	N/A			
28	RESPITE CARE [S]	Not Part A Funded	N/A			
	SUBTOTAL	\$22,582,829	100.0%			

\* Funded component of the service category.

[C]= Core Service; [S] = Support Service

ADMINISTRATION 2	\$2,575,869
CLINICAL QUALITY MANAGEMENT	\$600,000
TOTAL	\$25,758,698

	Exp. Ratios
Core Services	85.12%
Support Services	14.88%

The flat funding budget for MAI was reviewed which totaled \$2,713,251, of which \$2,341,926 was allocatable to direct services. Based on needs assessment data the Committee developed the budget as indicated below. The conflicted member under mental health, outreach, and substance abuse outpatient was not present in the room during the flat or ceiling vote. He stepped outside, completed for 8B, then returned after the conflicted voting.

## Motion to accept the FY 2023 Ryan White Program Minority AIDS Initiative (MAI) FlatFunding budget, as presented.Moved: Dan WallSeconded: Vanessa MillsMotion: Passed

MIAMI DADE COUNTY				
	RYAN WHITE PROGRAM (RWP)			
	FY 2023 MINORITY AIDS INITIATIVE (MAI) FLAT FUNDING BUDGE	T		
FY 2023 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 RECOMMENDED	FY 2023 %	
ici (ili (i		ALLOCATION <sup>1</sup>		
1	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$903,920.00	38.60%	
2	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded	N/A	
3	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded	N/A	
4	MENTAL HEALTH SERVICES [C]	\$18,960.00	0.81%	
5	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$1,351,457.00	57.71%	
6	EMERGENCY FINANCIAL ASSISTANCE [S]	\$12,087.00	0.52%	
7	ORAL HEALTH CARE [C]	Not MAI Funded	N/A	
8	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$8,058.00	0.34%	
9	MEDICAL TRANSPORTATION [S]	\$7,628.00	0.33%	
10	OUTREACH SERVICES [S]	\$39,816.00	1.70%	
11	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded	N/A	
12	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded	N/A	
13	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded	N/A	
14	HOUSING [S]	Not MAI Funded	N/A	
15	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded	N/A	
16	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded	N/A	
17	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded	N/A	
18	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded	N/A	
19	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded	N/A	
20	HOME HEALTH CARE [C]	Not MAI Funded	N/A	
21	EARLY INTERVENTION SERVICES [C]	Not MAI Funded	N/A	
22	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not MAI Funded	N/A	
23	CHILD CARE SERVICES [S]	Not MAI Funded	N/A	
24	REHABILITATION SERVICES [S]	Not MAI Funded	N/A	
25	HOSPICE [C]	Not MAI Funded	N/A	
26	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded	N/A	
27	LINGUISTIC SERVICES [S]	Not MAI Funded	N/A	
28	RESPITE CARE [S]	Not MAI Funded	N/A	
	SUBTOTAL	\$2,341,926	100.0%	

[C]= Core Service; [S] = Support Service

ADMINISTRATION	\$271,325
CLINICAL QUALITY MANAGEMENT	\$100,000
TOTAL	\$2,713,251

	Exp. Ratios
Core Services	<u>97.46%</u>
Support Services	<u>2.54%</u>

Motion to accept the FY 2023 Ryan White Program Minority AIDS Initiative (MAI) CeilingFunding budget, as presented.Moved: Dan WallSeconded: Vanessa MilsMotion: Passed

MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP)				
	FY 2023 MINORITY AIDS INITIATIVE (MAI) CEILING FUNDING BU	DGET		
FY 2023 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 RECOMMENDED ALLOCATION <sup>1</sup>	FY 2023 %	
1	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$903,920.00	36.68%	
2	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded	N/A	
3	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded	N/A	
4	MENTAL HEALTH SERVICES [C]	\$18,960.00	0.77%	
5	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$1,473,553.00	59.80%	
6	EMERGENCY FINANCIAL ASSISTANCE [S]	\$12,087.00	0.49%	
7	ORAL HEALTH CARE [C]	Not MAI Funded	N/A	
8	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$8,058.00	0.33%	
9	MEDICAL TRANSPORTATION [S]	\$7,628.00	0.31%	
10	OUTREACH SERVICES [S]	\$39,816.00	1.62%	
11	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded	N/A	
12	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded	N/A	
13	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded	N/A	
14	HOUSING [S]	Not MAI Funded	N/A	
15	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded	N/A	
16	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded	N/A	
17	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded	N/A	
18	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded	N/A	
19	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded	N/A	
20	HOME HEALTH CARE [C]	Not MAI Funded	N/A	
21	EARLY INTERVENTION SERVICES [C]	Not MAI Funded	N/A	
22	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not MAI Funded	N/A	
23	CHILD CARE SERVICES [S]	Not MAI Funded	N/A	
24	REHABILITATION SERVICES [S]	Not MAI Funded	N/A	
25	HOSPICE [C]	Not MAI Funded	N/A	
26	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded	N/A	
27	LINGUISTIC SERVICES [S]	Not MAI Funded	N/A	
28	RESPITE CARE [S]	Not MAI Funded	N/A	
	SUBTOTAL	\$2,464,022	100.0%	

[C]= Core Service; [S] = Support Service

ADMINISTRATION	\$284,891
CLINICAL QUALITY MANAGEMENT	\$100,000
TOTAL <sup>3</sup>	\$2,848,913

	Exp. Ratios
Core Services	<u>97.58%</u>
Support Services	2.42%

#### X. Announcements

Mrs. Meizoso indicated two flyers (copies on file) that should be shared with others. The first flyer announces a monthly symposium (June-September) presented by FIU/BSR on research conducted on the Ryan White Program. The second flyer promotes the Community Coalition Roundtables being held at three provider sites (Jessie Trice, Empower U, and Borinquen).

All

#### XI. Next Meeting

The next meeting is scheduled for Thursday, October 6, 2022, at the Miami-Dade County Main Library, Auditorium, 101 West Flagler Street, Miami, FL 33130 from 10 a.m. to 1 p.m. Members

#### XII. Adjournment

are encouraged to RSVP.

Dr. Diego Shmuels

Dr. Diego Shmuels

The Chair adjourned the meeting at 12:56 p.m.

### FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME—FIRST NAMEMIDDLE NAME Shmuels, MD, Diego			NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE Miami-Dade HIV/AIDS Partnership				
MAILING ADDRESS			THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:				
CITY COUNTY Miami-Dade		NAME OF POLITI	CAL SUBDIVISION:	C OTHER LOCALAGENCY			
DATE ON WHICH VOTE OCCURRED September 1, 2022		MY POSITION IS					

#### WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

#### INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sibling organization of a principal by which he or she is retained); to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 163.356 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

#### **ELECTED OFFICERS:**

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; and

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

#### **APPOINTED OFFICERS:**

Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:

 You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

#### **APPOINTED OFFICERS (continued)**

- A copy of the form must be provided immediately to the other members of the agency.
- · The form must be read publicly at the next meeting after the form is filed.

IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:

- · You must disclose orally the nature of your conflict in the measure before participating.
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

DISCLOSURE OF LOCAL OFFICER'S INTEREST	
I, Diego Shmuels, MD , hereby disclose that on September 1 , 20	22 :
(a) A measure came or will come before my agency which (check one or more)	
inured to my special private gain or loss;	
inured to the special gain or loss of my business associate,	
inured to the special gain or loss of my relative,	;
inured to the special gain or loss of	, by
whom I am retained; or	
inured to the special gain or loss of Borinquen Medical Center	, which
is the parent subsidiary, or sibling organization or subsidiary of a principal which has retained me.	
(b) The measure before my agency and the nature of my conflicting interest in the measure is as follows:	
Ryan White Program Minority AIDS Initiative (MAI) budgets with amounts requested in mental health, outpatient substance abuse, and outreach for which Boringuen is the sole service provider.	
substance abuse, and outreach for which bornquen is the sole service provider.	
If disclosure of specific information would violate confidentiality or privilege pursuant to law or rules governing attorneys, a publ who is also an attorney, may comply with the disclosure requirements of this section by disclosing the nature of the interest in su as to provide the public with notice of the conflict.	
9/1/2022	
Date Filed Signature	

NOTICE: UNDER PROVISIONS OF FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSURE CONSTITUTES GROUNDS FOR AND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMENT, REMOVAL OR SUSPENSION FROM OFFICE OR EMPLOYMENT, DEMOTION, REDUCTION IN SALARY, REPRIMAND, OR A CIVIL PENALTY NOT TO EXCEED \$10,000.

### FORM 8B MEMORANDUM OF VOTING CONFLICT FOR COUNTY, MUNICIPAL, AND OTHER LOCAL PUBLIC OFFICERS

LAST NAME-FIRST NAME-MIDDLE NAME Siclarí, Richard		NAME OF BOARD, COUNCIL, COMMISSION, AUTHORITY, OR COMMITTEE Miami-Dade HIV/AIDS Partnership			
MAILING ADDRESS		THE BOARD, COUNCIL, COMMISSION, AUTHORITY OR COMMITTEE ON WHICH I SERVE IS A UNIT OF:			
	COUNTY		COUNTY	C OTHER LOCAL AGENCY	
CITY	Miami-Dade	NAME OF POLITICAL SUBDIVISION:			
DATE ON WHICH VOTE OCCURRED September 1, 2022		MY POSITION IS			

#### WHO MUST FILE FORM 8B

This form is for use by any person serving at the county, city, or other local level of government on an appointed or elected board, council, commission, authority, or committee. It applies to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Your responsibilities under the law when faced with voting on a measure in which you have a conflict of interest will vary greatly depending on whether you hold an elective or appointive position. For this reason, please pay close attention to the instructions on this form before completing and filing the form.

#### INSTRUCTIONS FOR COMPLIANCE WITH SECTION 112.3143, FLORIDA STATUTES

A person holding elective or appointive county, municipal, or other local public office MUST ABSTAIN from voting on a measure which would inure to his or her special private gain or loss. Each elected or appointed local officer also MUST ABSTAIN from knowingly voting on a measure which would inure to the special gain or loss of a principal (other than a government agency) by whom he or she is retained (including the parent, subsidiary, or sibling organization of a principal by which he or she is retained); to the special private gain or loss of a business associate. Commissioners of community redevelopment agencies (CRAs) under Sec. 163.356 or 163.357, F.S., and officers of independent special tax districts elected on a one-acre, one-vote basis are not prohibited from voting in that capacity.

For purposes of this law, a "relative" includes only the officer's father, mother, son, daughter, husband, wife, brother, sister, father-in-law, mother-in-law, son-in-law, and daughter-in-law. A "business associate" means any person or entity engaged in or carrying on a business enterprise with the officer as a partner, joint venturer, coowner of property, or corporate shareholder (where the shares of the corporation are not listed on any national or regional stock exchange).

#### **ELECTED OFFICERS:**

In addition to abstaining from voting in the situations described above, you must disclose the conflict:

PRIOR TO THE VOTE BEING TAKEN by publicly stating to the assembly the nature of your interest in the measure on which you are abstaining from voting; and

WITHIN 15 DAYS AFTER THE VOTE OCCURS by completing and filing this form with the person responsible for recording the minutes of the meeting, who should incorporate the form in the minutes.

#### **APPOINTED OFFICERS:**

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Although you must abstain from voting in the situations described above, you are not prohibited by Section 112.3143 from otherwise participating in these matters. However, you must disclose the nature of the conflict before making any attempt to influence the decision, whether orally or in writing and whether made by you or at your direction.

IF YOU INTEND TO MAKE ANY ATTEMPT TO INFLUENCE THE DECISION PRIOR TO THE MEETING AT WHICH THE VOTE WILL BE TAKEN:

• You must complete and file this form (before making any attempt to influence the decision) with the person responsible for recording the minutes of the meeting, who will incorporate the form in the minutes. (Continued on page 2)

#### **APPOINTED OFFICERS (continued)**

- · A copy of the form must be provided immediately to the other members of the agency.
- · The form must be read publicly at the next meeting after the form is filed.

IF YOU MAKE NO ATTEMPT TO INFLUENCE THE DECISION EXCEPT BY DISCUSSION AT THE MEETING:

- · You must disclose orally the nature of your conflict in the measure before participating.
- You must complete the form and file it within 15 days after the vote occurs with the person responsible for recording the minutes of the meeting, who must incorporate the form in the minutes. A copy of the form must be provided immediately to the other members of the agency, and the form must be read publicly at the next meeting after the form is filed.

DIS	SCLOSURE OF LOCAL OFFICER'S INTEREST
I, Richard Siclari	, hereby disclose that on September 1 , 20 22
(a) A measure came or will come before	
inured to my special private gain	or loss;
inured to the special gain or loss	of my business associate,
	of my relative,
	of,
whom I am retained; or	i i i i i i i i i i i i i i i i i i i
inured to the special gain or loss	of Food for Life Network, whi
N	g organization or subsidiary of a principal which has retained me.
(b) The measure before my agency and	I the nature of my conflicting interest in the measure is as follows:
Ryan White Program Part budg sole provider.	ets with allocations requested for focd bank for which Food for Life Network is the
	uld violate confidentiality or privilege pursuant to law or rules governing attorneys, a public offic th the disclosure requirements of this section by disclosing the nature of the interest in such a w ne conflict.
9/1/22 Date Filed	Signature
CONSTITUTES GROUNDS FOR A	FLORIDA STATUTES §112.317, A FAILURE TO MAKE ANY REQUIRED DISCLOSUF ND MAY BE PUNISHED BY ONE OR MORE OF THE FOLLOWING: IMPEACHMEN A OFFICE OR EMPLOYMENT DEMOTION REDUCTION IN SALARY REPRIMAND, OR

CIVIL PENALTY NOT TO EXCEED \$10,000.



10:00 a.m. - 12:00 p.m.

Miami-Dade County Main Library 101 West Flagler Street, Auditorium Miami, FL 33130

#### AGENDA

I.	Call to Order	Dr. Diego Shmuels
II.	Meeting Housekeeping and Rules	Marlen Meizoso
III.	Introductions	All
IV.	Floor Open to the Public	Dr. Diego Shmuels
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of September 1, 2022	All
VII.	Reports	
	• Recipients (Part A, Part B, ADAP, General Revenue)	All
	• Vacancies	Marlen Meizoso
	• Report to Committees (reference only)	All
	Medical Care Subcommittee Report	Marlen Meizoso
VIII.	Standing Business	
	• December meeting	All
IX.	New Business	
	• YR 2022 Sweeps/Reallocation #3	All
	Maximize Expenditures Prior to Fiscal Year Closure	All
	• Service Descriptions- Medical Transportation, Mental Health,	
	Other Professional: Legal Services and Substance Abuse	All
	• 2023 Meeting Dates and Work Plan Development	Marlen Meizoso
Х.	Announcements	Marlen Meizoso
XI.	Next Meeting: December 1, 2022 at Main Library- Auditorium	Dr. Diego Shmuels
XII.	Adjournment	Dr. Diego Shmuels

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership's Care and Treatment Committee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

#### RYAN WHITE PART A GRANT AWARD (Grant #: BURW3201)

#### EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE YR32 FORMULA AND SUPPLEMENTAL FUNDING

FY 2022 Award <u>\$24,532,094</u>

28,608,571.00

	Per Resolution #S: R-1162-21, R-246-20, R-247-20 & R-817-19					
->	Project #: BURW3201 Grant Award Amount Formula Grant Award Amount Supplemental Grant Award Amount FY'20 Supplemental Carryover Award FY'21 Formula	,	AWARD AMOUNTS 16,141,380.00 4,121,835.00 4,268,879.00 4,076,477.00	PY_	ACTIVITIES FORMULA JPPLEMENTAL SUPPLEMENTAL CARRYOVER	
$\geq$	Total Award	\$	28,608,571.00			
Priority Order	CONTRACT ALLOCATIONS/ FOR	MULA	& SUPPLEMENTAL	AWAF	RDS	
ority	DIRECT SERVICES:					
Ē	Core Medical Services		Allocations			
4	AIDS Pharmaceutical Assistance		84,492.00			
6	Health Insurance Services		335,776.00			
1	Medical Case Management		5,815,461.00			
3	Mental Health Therapy/Counseling		132,385.00			
5	Oral Health Care		3,088,975.00			
2	Outpatient/Ambulatory Health Svcs		8,577,172.00			
9	Substance Abuse - Outpatient		44,128.00		18,078,389.00	
	Support Services	1	Allocations			
	Emergency Financial Assistance		9,853.00			
	Food Bank		766,083.00			
	Medical Transportation		194,149.00			
	Other Professional Services		154,449.00			
-	Outreach Services		264,696.00			
7	Substance Abuse - Residential		1,969,744.00		3,358,974.00	
	DIRECT SERVICES TOTAL:			\$	21,437,363.00	
	Total Core Allocation		18,078,389.00			
	Target at least 80% core service allocation		17,149,890.40			
	Current Difference (Short) / Over	\$	928,498.60			
	Recipient Admin. (GC, GTL, BSR Staff)	\$	2,453,209.00			
	Quality Management	\$	641,522.00			
	(+) Unobligated Funds / (-) Over Obligated: Unobligated Funds (Formula & Supp) Unobligated Funds (Carry Over)	\$ \$	4,076,477.00		7,171,208.00	

Core medical % against Total Direct S Cannot be under 75%	Service Allocation (Not including C 84.33%	/O): Within Limit
Quality Management % of Total Awar	d (Not including C/O):	
Cannot be over 5%	2.62%	Within Limit
OMB-GC Administrative % of Total Av	ward (Cannot include C/O):	
Cannot be over 10%	10.00%	Within Limit

This report includes YTD paid reimbursements for FY 2022 Part A service months up to August 2022, as of 10/14/2022. This report reflects reimbursement requests that were due by 9/20/2022; and have been paid thus far. Pending Part A reimbursement requests that have been received and are in the review process total \$4,463,857.05.

#### CURRENT CONTRACT EXPENDITURES DIRECT SERVICES: Carryover Account Core Medical Services Expenditures Expenditures 5606970000 AIDS Pharmaceutical Assistance 522.24 5606920000 Health Insurance Services 91,212.82 5606870000 Medical Case Management 439,130.25 5606860000 Mental Health Therapy/Counseling 18,070.00 5606900000 Oral Health Care 620,427.00 5606610000 Outpatient/Ambulatory Health Svcs 639.054.16 5606910000 Substance Abuse - Outpatient 0.00 1,808,416.47 Carryover Expenditures Support Services Expenditures Account 5606940000 0.00 Emergency Financial Assistance 5606980000 Food Bank 529,470.00 529,470.00 5606460000 Medical Transportation 21,163.02 5606890000 Other Professional Services 41.625.00 5606950000 Outreach Services 0.00 5606930000 Substance Abuse - Residential 159 810 00 752,068.02 TOTAL EXPENDITURES DIRECT SVCS & % : 2,560,484.49 11.94% \$ Formula Expenditure % 23.09% 5606710000 Recipient Administration 916,463.70 5606880000 Quality Management 250.000.00 1.166.463.70 24 881 622 81 Grant Unexpended Balance Total Grant Expenditures & % 3,726,948.19 13.03% Core medical % against Total Direct Service Expenditures (Not including C/O): Cannot be under 75% 89.04% Within Limit Quality Management % of Total Award (Not including C/O): 1.02% Cannot be over 5% Within Limit OMB-GC Administrative % of Total Award (Cannot include C/O): Cannot be over 10% 3.74% Within Limit Printed on: 10/17/2022 Page 1

#### Part A

#### RYAN WHITE PART A GRANT AWARD (Grant#: BURW3201) EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE YR32 **MINORITY AIDS INITIATIVE (MAI) FUNDING**

#### Per Resolution #S: R-1162-21, R-246-20, R-247-20 & R-817-19

PROJECT #: BURW3201	AW	ARD AMOUNTS	ACTIVITIES	
Grant Award Amount MAI		1,089,480.00	MAI	FY 2022 Award
Grant Award Amount FY'20 MAI		1,623,771.00	PY_MAI	2,713,251.00
Carryover Award FY'21 MAI		1,212,670.00	MAI_CARRYOVER	
Total Award	\$	3,925,921.00		
CONTRACT	ALLOCAT	IONS		
DIRECT SERVICES:				
Core Medical Services		Allocations		
AIDS Pharmaceutical Assistance Health Insurance Services				
Medical Case Management		903,920.00		
Mental Health Therapy/Counseling		18,960.00		
Oral Health Care		10,000.00		
Outpatient/Ambulatory Health Svcs		1,356,661.00		
Substance Abuse - Outpatient		8,058.00	2,287,599.00	
Support Services		Allocations		
Emergency Financial Assistance		0.00		
Food Bank Medical Transportation		7,628.00		
Other Professional Services		7,020.00		
Outreach Services		39,816.00		
Substance Abuse - Residential		00,010100	47,444.00	
DIRECT SERVICES TOTAL:			\$ 2,335,043.00	
Total Core Allocation		2,287,599.00		
Target at least 80% core service allocation		1,868,034.40		
Current Difference (Short) / Over	\$	419,564.60		
Recipient Admin. (OMB-GC)	\$	271,325.00		
Quality Management	\$	106,883.00		3,925,921.0
(+) Unobligated Funds / (-) Over Obligated:				
Unobligated Funds (MAI)	\$	-	378,208.00	2,713,251.0
Unobligated Funds (Carry Over)	\$	1,212,670.00	,	, .,
Cover medical 9/ enginet Tatal Divert Covering		(Net including O(O)		
Core medical % against Total Direct Service A Cannot be under 75%	Anocation	(Not including C/O) 97.97%	: Within Limit	
Core medical % against Total Direct Service A Cannot be under 75% Quality Management % of Total Award (Not in		97.97%		

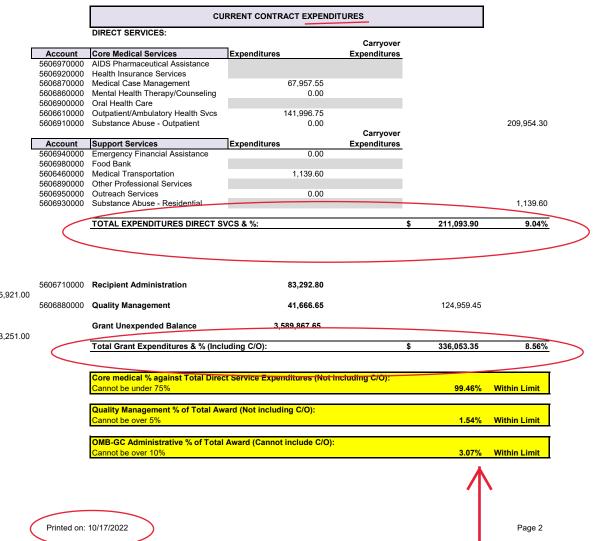
Within Limit

10.00%

annot be over 10%

OMB-GC Administrative % of Total Award (Cannot include C/O):

This report includes YTD paid reimbursements for FY 2022 MAI service months up to August 2022, as of 10/14/2022. This report reflects reimbursement requests that were due by 9/20/2022; and have been paid thus far. Pending MAI reimbursement requests that have been received and are in the review process total \$232,529.63.



MAI

#### **RYAN WHITE PART A PROGRAM** MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FUNDING SOURCE(S) INCLUDED:

FOR THE PERIOD OF:	August 2022		Ryan White Part A Ryan White MAI			
SERVICE CATEGORIES		Service Units		Unduplicated Client Count		
		Monthly	Year-to-date	Monthly	<u>Year-to-date</u>	
Core Medical Services						
AIDS Pharmaceutical Assistance (LPAP/CPAP)		26	167	25	115	
Health Insurance Premium and Cost Sharing Assistance		11	1,906	11	813	
Medical Case Management		7,935	43,859	3,546	6,629	
Mental Health Services		51	369	28	71	
Oral Health Care		811	4,656	596	1,729	
Outpatient Ambulatory Health Services		2,365	13,694	1,306	3,513	
Substance Abuse Outpatient Care		2	20	1	11	
Support Services						
Food Bank/Home Delivered Meals		0	6,901	0	692	
Medical Transportation		458	2,429	219	498	
Other Professional Services		96	463	25	56	
Outreach Services		85	448	41	85	
Substance Abuse Services (residential)		92	782	5	24	
	TOTALS:	11,932	75,694			
Total unduplicated clients (month):		4,259				
Total unduplicated clients (YTD):		7,370				

### RYAN WHITE PART A PROGRAM MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FUNDING SOURCE(S) INCLUDED:

FOR THE PERIOD OF:	August 2022	Ryan White Part A			
SERVICE CATEGORIES		Serv	ice Units	Unduplica	ted Client Count
		Monthly	<u>Year-to-date</u>	<u>Monthly</u>	Year-to-date
Core Medical Services					
AIDS Pharmaceutical Assistance (LPAP/CPAP)		26	167	25	115
Health Insurance Premium and Cost Sharing Assistance		11	1,906	11	813
Medical Case Management		6,978	38,978	3,244	6,408
Mental Health Services		51	352	28	64
Oral Health Care		811	4,656	596	1,729
Outpatient Ambulatory Health Services		2,186	12,896	1,198	3,465
Substance Abuse Outpatient Care		0	12	0	6
Support Services					
Food Bank/Home Delivered Meals		0	6,901	0	692
Medical Transportation		450	2,396	211	484
Other Professional Services		96	463	25	56
Outreach Services		80	431	36	68
Substance Abuse Services (residential)		92	782	5	24
	TOTALS:	10,781	69,940		
Total unduplicated clients (month):		4,002			
Total unduplicated clients (YTD):		7,274			

### RYAN WHITE PART A PROGRAM MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FUNDING SOURCE(S) INCLUDED:

FOR THE PERIOD OF:	August 2022	Ryan White MAI			
SERVICE CATEGORIES		Service Units		Unduplicated Client Count	
		<u>Monthly</u>	Year-to-date	<u>Monthly</u>	Year-to-date
Core Medical Services					
Medical Case Management		957	4,881	449	779
Mental Health Services		0	17	0	7
Outpatient Ambulatory Health Services		179	798	123	348
Substance Abuse Outpatient Care		2	8	1	5
Support Services					
Medical Transportation		8	33	8	19
Outreach Services		5	17	5	17
	TOTALS:	1,151	5,754		
Total unduplicated clients (month):		532			
Total unduplicated clients (YTD):		1,017			



10:00 a.m. - 12:00 p.m.

Miami-Dade County Main Library 101 West Flagler Street, Auditorium Miami, FL 33130

### AGENDA

I.	Call to Order	Dr. Diego Shmuels
II.	Meeting Housekeeping and Rules	Marlen Meizoso
III.	Introductions	All
IV.	Floor Open to the Public	Dr. Diego Shmuels
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of September 1, 2022	All
VII.	Reports	
	• Recipients (Part A, Part B, ADAP, General Revenue)	All
	• Vacancies	Marlen Meizoso
	• Report to Committees (reference only)	All
	Medical Care Subcommittee Report	Marlen Meizoso
VIII.	Standing Business	
	• December meeting	All
IX.	New Business	
	• YR 2022 Sweeps/Reallocation #3	All
	Maximize Expenditures Prior to Fiscal Year Closure	All
	• Service Descriptions- Medical Transportation, Mental Health,	
	Other Professional: Legal Services and Substance Abuse	All
	• 2023 Meeting Dates and Work Plan Development	Marlen Meizoso
X.	Announcements	Marlen Meizoso
XI.	Next Meeting: December 1, 2022 at Main Library- Auditorium	Dr. Diego Shmuels
XII.	Adjournment	Dr. Diego Shmuels

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership's Care and Treatment Committee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

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To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



#### Joseph A. Ladapo, M.D., Ph.D. State Surgeon General

#### Vision: To be the Healthiest State in the Nation

October 4, 2022

Fiscal Year	1 <sup>st</sup> Enrollments	Re-Enrollments	OPEN	CHD Pharmacy	RXs	Patients	RX/Pt	Payments	Premiums	~ Premium
FY20/21 >	795	10,979	6,150	\$32,843,354.32	52,678	17,944	2.9	\$23,115,161.17	25,395	\$ 910.22
FY21/22 >	903	11,308	6,074	\$28,342,382.90	49,549	16,381	3.0	\$29,915,353.77	27,419	\$1,091.04
FY22/23 >YTD	549	5,521		\$14,691,836.61	25,250	8350	3.0	\$16,842,307.21	14,120	\$1,192.80
Apr-22	113	914	6,143	\$2,334,995.84	4,164	1,377	3.0	\$2,885,135.63	2,429	\$1,187.79
May-22	114	808	6,205	\$2,428,021.98	4,295	1,385	3.1	\$2,844,770.69	2,374	\$1,198.30
Jun-22	85	925	6,205	\$2,561,946.62	4,142	1,439	2.9	\$2,797,011.67	2,344	\$1,193.26
Jul-22	71	875	6,263	\$2,393,320.77	4,049	1,342	3.0	\$2,807,326.41	2,350	\$1,194.61
Aug-22	86	1,082	6,309	\$2,519,544.21	4,442	1,440	3.1	\$2,776,876.45	2,336	\$1,188.73
Sep-22	80	<mark>917</mark>	<mark>6,352</mark>	\$2,454,007.19	<mark>4,158</mark>	<mark>1,367</mark>	<mark>3.0</mark>	\$2,731,186.36	<mark>2,287</mark>	\$1,194.22
Oct-22										
Nov-22										
Dec-22										
Jan-23										
Feb-23										
Mar-23				*						

ADAP Miami-Dade / Summary Report\* - September 2022

SOURCE: Provide - DATE: 09/01/22 - Subject to Review & Editing

\* NOTE: West Perrine: 415 clients (10/04/22): DD 258; PP 157. Expenditures not included in this report.

### **PROGRAM UPDATE**

\* Hurricane Ian: tracking affected clients moving into Miami-Dade. 'Not new to ADAP but may be new to RW-A Program'.

- \* Cabenuva ® utilization @ ADAP Miami (10/04/22): 154 (31%) of 494 clients. Direct Dispense 85 (55%); Premium Plus 69 (45%)
- \* ACA-MP Special Enrollment Period: APTC+=>100% FPL; <150 % FPL. Additional ACA-MP requirements may apply, thru November 30.
- \* ACA-MP Open Enrollment 2023: November 1st January 15th. Approved plans pending @ CMS.

\* New pharmacy choices for ADAP Uninsured clients in Miami-Dade:

<b><u>CURRENT</u></b> Ongoing CHD Pharmacy Services				
1	CHD Pharmacy @ Flagler Street	One Site (1)		
2	CHD Pharmacy @ Flagler Street	Mail order		
3	ADAP Program @ West Perrine	CVS Specialty Mail Order		

	ADDITIONAL Pharmacies - Magellan RX PBM Miami-Dade - 10/01/22				
1	AIDS Healthcare Foundation	Four (4) sites			
2	Borinquen Healthcare Center	One (1) site			
3	Miami Beach Community Health Center	Three (3) sites			
4	WINN DIXIE Stores	Seven (7) sites			
5	YOUR PHARMACY @ Care Resource	One (1) site			
6	CVS SPECIALTY* / PROCARE PHARMACY DIRECT	Mail Order / Monroeville, PA			



# PHARMACIES AVAILABLE TO UNINSURED ADAP CLIENTS in Miami Dade County

October 1, 2022

Florida Department of Health in Miami Dade County - CHD Pharmacy						
Pharmacy Name	Address	City	State	Zip Code		
CHD PHARMACY / Flagler St	2515 W Flagler Street	Miami	FL	33135		
CHD PHARMACY / Mail Order service	2515 W Flagler Street	Miami	FL	33135		
ADAP Miami @ West Perrine / CVS SPECIALTY	18255 Homestead Avenue	West Perrine	FL	33157		

Additional Pharmacies - Magellan RX PBM						
Pharmacy Name	Address	City	State	Zip Code		
	2400 BISCAYNE BLVD	Miami	FL	33137		
	100 NW 170 STREET STE 208	North Miami Beach	FL	33169		
AIDS HEALTHCARE FOUNDATION	4308 ALTON ROAD STE 950	Miami Beach	FL	33140		
	3661 S MIAMI AVE STE 806	Miami	FL	33133		
BORINQUEN HEALTH CARE CENTER	3601 FEDERAL HWY STE 125	Miami	FL	33137		
	STANLEY C MYERS SUITE 710 ALTON RD	Miami	FL	33139		
MIAMI BEACH COMMUNITY HEALTH CENTER	11645 BISCAYNE BLVD STE 102,	Miami	FL	33181		
	1221 71ST ST	Miami Beach	FL	33141		
	18300 SW 137 AVENUE	Miami	FL	33177		
	11241 SW 40TH ST	Miami	FL	33165		
	1155 NW 11TH ST	Miami	FL	33136		
VINN DIXIE STORES	1150 NW 54TH STREET	Miami	FL	33127		
	20417 BISCAYNE BLVD	Aventura	FL	33180		
	5850 N.W. 183RD ST.	Hialeah	FL	33015		
	11030 NW 7TH AVENUE	Miami	FL	33168		
OUR PHARMACY AT CARE RESOURCE	1431 ALTON RD	Miami Beach	FL	33139		
CVS SPECIALTY / PROCARE PHARMACY DIRECT	105 MALL BOULEVARD	Monroeville	PA	15146		

### NOTES:

Must meet regular Patient Care Core Eligibility, ADAP Program and Pharmacy requirements

Must be in OPEN status

Prescription(s) with available Refills required

'Uninsured Prescription Benefit Card' required at non-CHD Pharmacies (Magellan RX PBM)



10:00 a.m. - 12:00 p.m.

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# General Revenue July 2022 - June 2023 HIV/AIDS Demographic Data for PHT/SFAN

	Septer	mber-2022		Year To Date Data			
	Unduplicated Client Count	Units	Dollar Amt.	Total Dollar Amt.	Annual Budget	YTD Units	
Ambulatory - Outpatient Care	255	606	121,095.81	376,734.15	1,792,649.00	1,878	
Drug Pharmaceuticals	76	162	42,020.89	110,498.43	761,622.00	409	
Home & Community Base Services					2,000.00		
Home Health Care				<u> </u>	92,645.00		
Mental Health Services	35	39	4,433.41	17,148.52	115,854.00	147	
Nutrition Counseling	<u> </u>	<u> </u>		<u> </u>	20,000.00		
Medical Case Management	647	1,237	119,826.49	437,561.25	1,309,687.00	5,209	
Non-Medical Case Management Other Support Services / Emergency		310	31,184.54	87,533.75	668,338.00	1,007	
Fin. Assistance	9	9	20,313.72	46,899.08	170,000.00	24	
<u>Transportation</u> Referral for Health Care / Supportive	115	120	6,215.50	20,699.75	77,250.00	387	
Services	31	60	24,087.97	66,871.18	399,856.00	206	
Substance Abuse Residential	<u> </u>				428,955.00		
Residential Care - Adult					204,035.00		
Nursing Home Care	5	141	34,717.35	89,108.21	470,000.00	362	
Hospital Services	1	18	12,779.30	59,599.10	567,538.00	60	
	1,479	2,702	416,674.98	1,312,653.42	7,080,429.00	9,689	



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# **Membership Report**

October 21, 2022

# The Miami-Dade HIV/AIDS Partnership

The official Ryan White Program Planning Council in Miami-Dade County and Advisory Board for HIV/AIDS to the Miami-Dade County Mayor and Board of County Commissioners

# **Opportunities for People with HIV**

People with HIV who receive one or more Ryan White Program Part A services and who are not affiliated or employed by a Ryan White Program Part A funded service provider are invited to join the Partnership as a Representative of the Affected Community. 9 available seats

# **General Membership Opportunities**

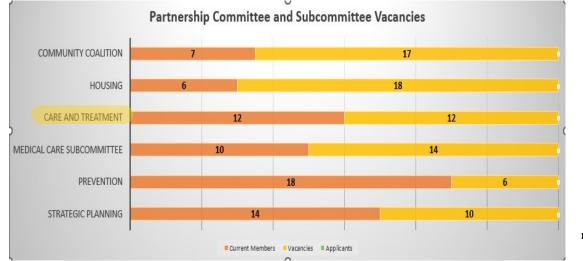
These Partnership positions are open to people with HIV, service providers, and community stakeholders who have reputations of integrity and community service, and possess the knowledge, skills and expertise relevant to these positions:

> Representative Co-infected with Hepatitis B or C Hospital or Health Care Planning Agency Representative Other Federal HIV Program Grantee Representative (SAMHSA) Federally Recognized Indian Tribe Representative Mental Health Provider Representative Miami-Dade County Public Schools Representative

# **Partnership Committees**

Committees are now accepting applications for new members.

People with HIV are encouraged to apply.





Scan the QR code with your phone's camera for membership applications!



### Are you a Member?

*Thank you for your service to people with HIV!* Be sure to bring a Ryan White client to your next meeting!

# **Do You Qualify for Membership?**

If you answer "Yes" to these questions, you could qualify for membership!

Are you a resident of Miami-Dade County?

Are you a registered voter in Miami-Dade County? Note: Some seats for people with HIV are exempt from this requirement.

Can you volunteer three to five hours per month for Partnership activities?

# **Committee Activities**

Work with a dedicated team of volunteers on these and more Partnership activities to better serve people with HIV in Miami-Dade County! *People with HIV are encouraged to join!* 

- Allocate more than \$27 million in Ryan White Program funds with the Care and Treatment Committee
- 8 Develop an Annual Report on the State of HIV and the Ryan White Program in Miami-Dade County with the Strategic Planning Committee
- **%** Recruit and train new Partnership members with the **Community Coalition**
- X Work with the City of Miami Housing Opportunities for Persons with AIDS Program to address housing challenges for people with HIV/AIDS with the Housing Committee
- 8 Oversee updates and changes to medical treatment guidelines for the Ryan White Part/ MAI Program with the Medical Care Subcommittee
- 8 Set priorities for Ryan White Program HIV health and support services in Miami-Dade County with the Care and Treatment Committee

- **%** Share a meal and testimonials at Roundtable Luncheons with the **Community Coalition**
- 8 Develop and monitor the official HIV Prevention and Care Integrated Plan with the Strategic Planning Committee & Prevention Committee
- 8 Develop your leadership skills and be a committee leader with the Executive Committee
- 8 Oversee updates and changes to the Ryan White Prescription Drug Formulary with the Medical Care Subcommittee
- X Develop and monitor local Ending the HIV Epidemic activities with the Florida Department of Health in Miami-Dade County with the Prevention Committee & Strategic Planning Committee
- 8 Be in the know about the latest HIV activities of the Prevention Mobilization Workgroups with the **Prevention Committee**

Visit aidsnet.org/membership for the complete list of applications and details on Partnership and committee membership opportunities. Contact us at hiv-aidsinfo@behavioralscience.com or 305-445-1076 for assistance.





10:00 a.m. - 12:00 p.m.

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### Partnership Report to Committees and Subcommittee October 31, 2022 Meeting

Supporting documents related to motions in this report are available are online at <u>aidsnet.org/</u><u>meeting-documents/</u>, or from staff at Behavioral Science Research Corporation (BSR). For more information, please contact <u>hiv-aidsinfo@behavioralscience.com</u>.

The Partnership heard regular reports, an update on recent activities of the Florida Comprehensive Planning Network, and the timeline for completion of the 2022-2026 Integrated HIV Prevention and Care Plan.

Members approved motions to adopt these priorities and budgets detailed on the following pages:

- Ryan White Program (RWP) Fiscal Year (FY) 2023 Part A Priorities;
- RWP FY 2023 Minority AIDS Initiative (MAI) Priorities;
- RWP FY 2023 Part A Flat Funding Budget;
- RWP FY 2023 MAI Flat Funding Budget;
- RWP FY 2023 Part A Ceiling Budget; and
- RWP FY 2023 MAI Ceiling Budget.

The RWP Fiscal Year 2023 is March 1, 2023 through February 29, 2024.

Member approved motions authorizing the Chair to sign two letters:

- Letter of Assurance from the Planning Council Chair for Fiscal Year 2023-2024 (retroactive authorization; letter sent September 30, 2022); and
- Letter of Partnership concurrence with FY 2022 Rebudgeting Action Prior Approval Request

Meeting calendars are online:

- Partnership Website: <u>http://aidsnet.org/calendar/</u>, and
- County Website: <u>https://www8.miamidade.gov/global/calendar/global.page</u>

### Please RSVP!

- Call (305) 445-1076, or
- Email <u>cbontempo@behavioralscience.com</u> or <u>marlen@behavioralscience.com</u>.

	FY 2025 Ryan white Program Part A Priorities
FY 2023	Services
1	AIDS Drug Assistance Program (ADAP) Treatment [C]
2	Medical Case Management, including Treatment Adherence Services [C]
3	AIDS Pharmaceutical Assistance (Local Pharmacy Assistance Program) [C]
4	Emergency Financial Assistance [S]
5	Outpatient/Ambulatory Health Services [C]
6	Oral Health Care [C]
7	Food Bank/Home-Delivered Meals [S]
8	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
9	Mental Health Services [C]
10	Substance Abuse Services (Residential) [S]
11	Housing Services [C]
12	Substance Abuse Outpatient Care [C]
13	Medical Transportation (Vouchers) [S]
14	Outreach Services [S]
15	Other Professional Services (Legal Assistance and Permanency Planning) [S]
16	Early Intervention Services [C]
17	Home Health Care [C]
18	Medical Nutrition Therapy [C]
19	Home and Community Based Health Care [C]
20	Psychosocial Support [S]
21	Hospice Services [C]
22	Non-Medical Case Management [S]
23	Child Care Services [S]
24	Rehabilitation Services [S]
25	Health Education/Risk Reduction [S]
26	Referral for Health Care and Support Services [S]
27	Linguistic Services [S]
28	Respite Care [S]
Notes:	
	Medical Services
S = Support	rt Services

### FY 2023 Ryan White Program Part A Priorities

EX 2022	FY 2023 Ryan White Program Minority AIDS Initiative (MAI) Priorities
FY 2023	Services
1	Medical Case Management, including Treatment Adherence Services [C]
2	AIDS Drug Assistance Program (ADAP) Treatment [C]
3	AIDS Pharmaceutical Assistance (Local Pharmacy Assistance Program) [C]
4	Mental Health Services [C]
5	Outpatient/Ambulatory Health Services [C]
6	Emergency Financial Assistance [S]
7	Oral Health Care [C]
8	Substance Abuse Outpatient Care [C]
9	Medical Transportation (Vouchers) [S]
10	Outreach Services [S]
11	Substance Abuse Services (Residential) [S]
12	Food Bank/Home-Delivered Meals [S]
13	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
14	Housing Services [C]
15	Health Education/Risk Reduction [S]
16	Home and Community Based Health Care [C]
17	Medical Nutrition Therapy [C]
18	Non-Medical Case Management [S]
19	Psychosocial Support [S]
20	Home Health Care [C]
21	Early Intervention Services [C]
22	Referral for Health Care and Support Services [S]
23	Child Care Services [S]
24	Rehabilitation Services [S]
25	Hospice Services [C]
26	Other Professional Services (Legal Assistance and Permanency Planning) [S]
27	Linguistic Services [S]
28	Respite Care [S]
Notes:	
C = Core N S = Support	Iedical Services

### FY 2023 Ryan White Program Minority AIDS Initiative (MAI) Priorities

S = Support Services

FY 303         SERVICE CATECORIES (ALPHABETIC ORDER)         PY 303 REVICE CATECORIES (ALPHABETIC ORDER)         PY 303 REVICE CATECORIES (ALPHABETIC ORDER)         PY 303 RECOMMENDED           2         MEDICAL CASE MANGENEIN, INC. TREATMENTS [C]         Not EL CASE MANGENEIN, INC. TREATMENT ADJEREANCE STRATCE [S]         S 580.052         27.32%           3         MEDICAL CASE MANGENEIN, INC. TREATMENT ADJEREANCE STRATCE [S]         S 580.052         27.32%           4         ADDS BRUG ASSISTANCE FROORAM (ADAP) TREATMENT S[C]         Not EL CASE MANGENEIN         Not           5         MEDICAL CASE MANGENEIN, INC. TREATMENT S[C]         Not EL CASE MANGENEIN         Not           6         ADDS BRUG ASSISTANCE [S]         S 580.052         27.32%           7         EMERGINCT FINANCIAL ASSISTANCE [S]         S 680.052         27.32%           8         HEALTH INSURANCE PRODI BANUTARIES [C]         S 88.255         0.41%           9         HEALTH INSURANCE PRODI BANUTARIES [C]         S 9.34.00         10.95%           10         DOTEPATIENT CARE [C]         S 9.34.00         10.95%           11         HEALTH INSURANCE REBILEMITAL [S]         S 9.44.05         0.21%           12         UUTRARTAN ERVICES [C]         S 9.44.05         0.21%           13         UUTRARTA REALTH SERVICES [C]         S 9.44.06		MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) EV 2003 DADT A ETAT ETINDING (FODMITLA & SUDDI EMENTAL ETINDING) BLIDGET		
AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]     Not Part A Funded       MEDICAL CASE MANACIENT. NC. TREATMENT ADHERENCE SERVICES [C]     S 88.255       BADS PHARMACEUTICAL ASSISTANCE [S]     Not Part A Funded       AIDS PHARMACEUTICAL ASSISTANCE [S]     S 88.255       BADS REGINCY FINANCIAL ASSISTANCE [S]     S 88.255       GUTPATIENT/AMBULATORY HEALTH SERVICES [C]     S 88.259       BADS RAL HEALTH CARE [C]     S 88.259       BADS RAL HEALTH CARE [C]     S 88.259       BADS RANCE PREMIUM AND COST SHARNG FOR LOW-INCOME INDIVIDUALS [C]     S 8.540.960       BADS MENTAL HEALTH SERVICES [C]     S 9.368.975       BADS MENTAL HEALTH SERVICES [C]     S 9.368.975       BADS MENTAL HEALTH SERVICES [C]     S 9.354.000       BADS MENTAL HEALTH SERVICES [C]     S 9.364.090       COTHER REGINE REVICES [C]     S 9.354.000       BADS MENTAL HEALTH SERVICES [C]     S 9.354.000       BADS MENTAL HEALTH SERVICES [C]     S 9.354.000       BADS MENTAL HEALTH SERVICES [C]     Not Part A Funded       BADS MEDICAL SERVICES [S]     Not Part A Funded       BADS MEDICAL SERVICES [S]     Not Part A Funded       BADR PROFESSIONAL SUPPORT SERVICES [S]     Not Part	FY 2023 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 FY 2023 RECOMMENDED	FY 2023 %
MEDICAL CASE MANAGEMENT, INC. TREATIMENT ADHERENCE SRÂVICES (C)         5         5,869,052           NEDICAL CASE MANAGEMENT, INC. TREATIMENT BENVICES (C)         5         5,869,052           NERRERORY FINANCEUTICAL ASSISTANCE (S)         5         88,255           NERRERORY FINANCIAL ASSISTANCE (S)         5         88,255           OUTPATIENT/AMBULATORY HEALTH SERVICES (C)         5         88,255           OUTPATIENT/AMBULATORY HEALTH SERVICES (C)         5         3,088,975           OUTPATIENT/AMBULATORY HEALTH SERVICES (C)         5         3,088,975           OUTPATIENT CARE (C)         5         3,088,975           NEATAL HEALTH SERVICES (C)         8         8,4,128           NEATAL HEALTH SERVICES (C)         8         3,4,010           NOR PART A FUNCE         8         4,4,128           NOR PART A FUNCES (C)         9         9         1,4,49	-	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not Part A Funded	N/A
AIDS PHARMACEUTICAL ASSISTANCE [C]       S8,255         EMRGENCY FINANCIAL ASSISTANCE [S]       S 8,540,960         OUTPATIENT NAME ALTH SREVICES [C]       S 8,540,960         OUTPATIENT NAME DELIVERED MEALLS [S]       S 8,540,960         FOOD BANK*HOME DELIVERED MEALLS [S]       S 8,540,960         FOOD BANK*HOME DELIVERED MEALLS [S]       S 3,088,975         FOOD BANK*HOME DELIVERED MEALLS [S]       S 3,088,975         HEALTH INSURANCE RABUSE STRANCE FOR LOW-INCOME INDIVIDLALS [C]       S 3,534,000         MEDICAL REAUSE SERVICES (C]       S 3,088,975         NETAL HEALTH ERRVICES [S]       Not Part A Funded         MEDICAL TRANSPORTATION [S]       S 2,149         OTHER PROFESSIONAL SERVICES [C]       S 2,149         OTHER PROFESSIONAL SERVICES [S]       Not Part A Funded         MEDICAL TRANSPORTATION [S]       S 2,1449         OTHER PROFESSIONAL SERVICES [S]       Not Part A Funded         MEDICAL NUTRITION SERVICES [S]       Not Part A Funded         MEDICAL NUTRITION SERVICES [S]       Not Part A Funded         MEDICAL NUTRITION SERVICES [S]       Not Part A Funded         MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MEDICAL NUTRITION SERVICES [S]       Not Part A Funded         MEDICAL LARAND (C]       Not Part A Funded         M	5	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]		27.32%
Image: Control of the control of th	m	AIDS PHARMACEUTICAL ASSISTANCE [C]		0.41%
Image: Construct of the co	4	EMERGENCY FINANCIAL ASSISTANCE [S]		0.41%
ORAL HEALTH CARE [C]       S       3.088.975         IFOOD BANT&HOME DELIVERED MEALS [S]       5       3.088.975         HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       5       3.34.000         HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       5       3.34.000         NENTAL HEALTH SERVICES [C]       Non Part Forded       5       3.4.000         NENTAL HEALTH RERVICES [C]       Non Part Forded       4.4.2.1.3.1.3.3.8.000       5       2.16.9.7.44         NEDRICAL TRANSPORTATION [S]       OUTREACH SERVICES [G]       Non Part A Funded       4.4.2.3.1.3.4.4.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.0.000       5       3.4.4.0.000       5       3.4.4.0.000       5       3.4.4.0.0.000       5       3.4.4.0.0.000       5       3.4.4.0.0.000       5       3.4.4.0.0.000       5       3.4.4.0.0.000       5       3.4.4.0.0.000       5       3.4.4.0.0.000       5       3.4.4.0.0.00	5	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]		39.76%
HEALTH INSURANCE PRENIUM EDELIVERED MEALS [S]       \$ 52,539         HEALTH INSURANCE PRENIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       \$ 5354,000         NENTAL HEALTH SERVICES [C]       \$ 5354,000         SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]       \$ 52,169,744         NOR PARTENT ABUSE OUTPATIENT CARE [C]       \$ 52,169,744         NOR PARTENT ABUSE OUTPATIENT CARE [C]       \$ 132,385         NOR PARTENT CARE [C]       \$ 000 Part A Funded         NOR PERSIONAL SERVICES [S]       \$ 000 Part A Funded         NOTHER PROFESSIONAL SERVICES [S]       \$ 000 Part A Funded         NOTHER PROFESSIONAL SERVICES [S]       \$ 000 Part A Funded         NOTHER PROFESSIONAL SERVICES [S]       \$ 000 Part A Funded         HOME HEALTH CARE [C]       \$ 000 Part A Funded         HOME AND COMMUNITY PASED HEALTH SERVICES [S]       \$ 000 Part A Funded         HOME AND COMMUNITY PASED HEALTH SERVICES [S]       \$ 000 Part A Funded         HOME AND COMMUNITY PASED HEALTH SERVICES [S]       \$ 000 Part A Funded         HOME AND COMMUNITY PASED MARCENCES [S]       \$ 000 Part A Funded         PROPARA FUNCES [S]       \$ 000 Part A Funded         PROPARA FUNCES [S]       \$ 000 Part A Funded         PROPARA FORMEDICAL NUTRITON SERVICES [S]       \$ 000 Part A Funded         PROPARA FOR HEALTH CARE EREVICES [S]       \$ 000 Part A Funded	9	ORAL HEALTH CARE [C]		14.38%
HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       \$ 334,000         MENTAL HEALTH SERVICES [C]       \$ 2,106,744         MENTAL HEALTH SERVICES [C]       \$ 2,132,385         SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]       \$ 2,106,744         HOLDER PROMINE SERVICES (RESIDENTIAL) [S]       \$ 2,132,385         SUBSTANCE ABUSE OUTPATIENT CARE [C]       \$ 2,440         NEDICAL TRANSPORTATION [S]       \$ 13,449         OUTREACH SERVICES (SIG       \$ 154,449         OUTREACH SERVICES (SIG       \$ 8,138         OUTREACH SERVICES [S]       \$ 2,64,696         OUTREACH SERVICES (SIG       \$ 8,134         OUTREACH SERVICES (SIG       \$ 8,134         OUTREACH SERVICES (SIG       \$ 8,144         HOME HEALTH CARE SCICIC       \$ 8,144         NOTHER REVICES (SIG       \$ 8,144         MEDICAL NUTRTITON THERAPY (C]       Not Part A Funded         MEDICAL NUTRTITON THERAPY (C]       Not Part A Funded         MEDICAL NUTRTITON THERAPY (C]       Not Part A Funded         MEDICAL CARE SRANGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CARE SRANGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CARE SRANGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CARE AND SERVICES [S]       Not Part A Funded <th>2</th> <td>FOOD BANK*/HOME DELIVERED MEALS [S]</td> <td></td> <td>2.47%</td>	2	FOOD BANK*/HOME DELIVERED MEALS [S]		2.47%
MENTAL HEALTH SERVICES [C]         SUBSTANCE ABUSE STRVICES [C]         S         132,385           Image: SUBSTANCE ABUSE STRVICES (RESIDENTIAL) [S]         S         2,169,744         S           Image: SUBSTANCE ABUSE STRVICES (RESIDENTIAL) [S]         Not Part A Funded         S         2,169,744           Image: SUBSTANCE ABUSE OUTPATTENT CARE [C]         S         1,41,05         S         2,169,744           Image: SUBSTANCE ABUSE OUTPATTENT CARE [C]         S         1,54,449         S         1,54,449           Image: SUBSTANCE SIONAL SERVICES [S]         OUTREACH SERVICES [S]         S         2,64,696         S           Image: Substance abuse SUBSTAND SERVICES [S]         OUTREACH SERVICES [S]         S         1,54,449           Image: Substance abuse abuse services [C]         Mole Part A Funded         Not Part A Funded           Image: Substance above above services [C]         Not Part A Funded         Not Part A Funded           Image: Substance above above services [S]         Not Part A Funded         Not Part A Funded           Image: Substance above above services [S]         Not Part A Funded         Not Part A Funded           Image: Substance above	~			1.65%
Not build is a construction of a constructin of a construction of a construction of a constructin	6	MENTAL HEALTH SERVICES [C]		0.62%
HOUSING [S]       Not part A Funded         Not Part A Funded       SUBSTANCE ABUSE OUTPATIENT CARE [C]       Not Part A Funded         NEDICAL TRANSPORTATION [S]       SUBSTANCE ABUSE OUTPATIENT CARE [C]       S       44,128         NEDICAL TRANSPORTATION [S]       NOTHER PROFESSIONAL SERVICES [S]       S       164,449         OTHER PROFESSIONAL SERVICES [C]       NOTHER PROFESSIONAL SERVICES [G]       Not Part A Funded         MEDICAL NUTRITION THERAPY [C]       Not Part A Funded       Not Part A Funded         MEDICAL NUTRITION THERAPY [C]       Not Part A Funded       Not Part A Funded         MEDICAL NUTRITION THERAPY [C]       Not Part A Funded       Not Part A Funded         MEDICAL NUTRITION THERAPY [C]       Not Part A Funded       Not Part A Funded         MEDICAL NUTRITION THERAPY [C]       Not Part A Funded       Not Part A Funded         MEDICAL NUTRITION SERVICES [S]       Not Part A Funded       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded       Not Part A Funded         MEDICAL CARE SERVICES [S]       Not Part A Funded       Not Part A Funded       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded       Not Part A Funded<	10	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]		10.10%
NEBSTANCE ABUSE OUTPATIENT CARE [C]       S       44,128         MEDICAL TRANSPORTATION [S]       5       154,449         OTHER PROFESSIONAL SERVICES [S]       5       264,696         OTHER PROFESSIONAL SERVICES [S]       5       264,696         OTHER PROFESSIONAL SERVICES [S]       Not Part A Funded         MEDICAL TRANSPORTATION [S]       8       154,449         OTHER PROFESSIONAL SERVICES [C]       Not Part A Funded         MEDICAL UNTRTION THERAPY [C]       Not Part A Funded         MEDICAL UNTRTION THERAPY [C]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MOM PART FOULD ON SERVICES [S]       Not Part A Funded         MOM PART FOULD ON SERVICES [S]       Not Part A Funded         MOM PART FOULD ON SERVICES [S]       Not Part A Funded         MOM PART FOULD ON SERVICES [S] </td <th>Ξ</th> <td>HOUSING [S]</td> <td>Not Part A Funded</td> <td>N/A</td>	Ξ	HOUSING [S]	Not Part A Funded	N/A
MEDICAL TRANSPORTATION [S]       S       154,449         OUTREACH SERVICES [S]       5       264,666         OTHER PROFESSIONAL SERVICES [LEGAL SERVICES [S]       8       154,449         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES [C]       Not Part A Funded         MEDICAL UUTRITION THERAPY [C]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MOM PART FOR CONNON/NE SERVICES [S]       Not Part A Funded         MOM PART FOR CONNON/NE SERVICES [S]       Not Part A Funded         MOM PART FOR AND SUPPORTIVE SERVICES [S]       Not Part A Funded         MOM PART FOR AND SUPPORTIVE SERVICES [S]       Not Part A Funded         MOM PART FOR AND SUPPORTIVE SERVICES [S]       Not Part A	12	SUBSTANCE ABUSE OUTPATIENT CARE [C]		0.21%
OUTREACH SERVICES [S]       So4,696         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]       S 264,696         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]       Not Part A Funded         HOME HEALTH CARE [C]       Not Part A Funded         Not Part A Funded       Not Part A Funded         POWER AND COMMUNTY-BASED HEALTH SERVICES [C]       Not Part A Funded         Not Part A Funded       Not Part A Funded         POWER AND COMMUNTY-BASED HEALTH SERVICES [S]       Not Part A Funded         NON-MEDICAL CUSTER NORT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE SERVICES [S]       Not Part A Funded         MORD AND CONTRUCATION NERVICES [S]       Not Part A Funded         MORD AND CONNERRATION SERVICES [S]       Not Part A Funded         METHALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         MORD AND CONNERCENCES [S]       Not Part A Funded <t< td=""><th>13</th><td>MEDICAL TRANSPORTATION [S]</td><td></td><td>0.72%</td></t<>	13	MEDICAL TRANSPORTATION [S]		0.72%
OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]       S       154,449         Image: Comparison of the compari	14	OUTREACH SERVICES [S]		1.23%
Image: Construct of the co	15			0.72%
Home HEALTH CARE [C]       Not Part A Funded         MeDICAL NUTRITION THERAPY [C]       Not Part A Funded         PSYCHOSOCIAL SUPPORT SERVICES [S]       Not Part A Funded         NON-MEDICAL SUPPORT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         REHABILITATION SERVICES [S]       Not Part A Funded         MEALTH EDUCATION/RISK REDUCTION [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE [S]       Not Part A Funded         RESPITE CARE [S]       Not Part A Funded         RESPITE CARE [S]       Not	16	EARLY INTERVENTION SERVICES [C]	Not Part A Funded	N/A
MEDICAL NUTRITION THERAPY [C]     Not Part A Funded       HOME AND COMMUNITY-BASED HEALTH SERVICES [C]     Not Part A Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not Part A Funded       Not Part A Funded     Not Part A Funded       HOME AND COMMUNITY-BASED HEALTH SERVICES [S]     Not Part A Funded       Non-MEDICAL SUPPORT SERVICES [S]     Not Part A Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       CHILD CARE SERVICES [S]     Not Part A Funded       HEALTH EDUCATION/SIK REDUCTION [S]     Not Part A Funded       REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERRAL FOR HEALTH CARE (S]     Not Part A Funded       REFERRAL FOR HEALTH CARE (S]     Not Part A Funded       REFERRAL FOR HEALTH CARE (S]     Not Part A Funded       REFERRAL FOR HEALTH CARE (S]     Not Part A Funded       REFERRAL FOR HEALTH CARE (S]     Not Part A Funded       REFERRAL FOR HEALTH CARE (S]     Not Part A Funded       REFERRAL FOR HEALTH CARE (S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       RUBTOTAL     Not Part A Funded	17	HOME HEALTH CARE [C]	Not Part A Funded	N/A
HOME AND COMMUNITY-BASED HEALTH SERVICES [C]     Not Part A Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not Part A Funded       HOME AND COMMUNITY-BASED HEALTH SERVICES [S]     Not Part A Funded       HOSPICE [C]     Not Part A Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       CHILD CARE SERVICES [S]     Not Part A Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       REFERAL FOR HEALTH EDUCATION [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERAL FOR HEALTH EDUCATION [S]     Not Part A Funded       REFERAL FOR HEALTH EDUCATION [S]     Not Part A Funded       REFERAL FOR HEALTH EDUCATION [S]     Not Part A Funded       REFERAL FOR HEALTH EDUCATION [S]     Not Part A Funded       REFERAL FOR HEALTH EDUCATION [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       RUBTOTAL     Not Part A Funded <th>18</th> <td>MEDICAL NUTRITION THERAPY [C]</td> <td>Not Part A Funded</td> <td>N/A</td>	18	MEDICAL NUTRITION THERAPY [C]	Not Part A Funded	N/A
PSYCHOSOCIAL SUPPORT SERVICES [S]     Not Part A Funded       HOSPICE [C]     Not Part A Funded       Not Part A Funded     Not Part A Funded       Not Part A Funded     Not Part A Funded       Non-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       Non-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       CHILD CARE SERVICES [S]     Not Part A Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERAL FOR HEALTH CARE (S]     Not Part A Funded       REFERAL FOR HEALTH CARE (S]     Not Part A Funded       REFERAL FOR HEALTH CARE (S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded	19	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not Part A Funded	N/A
HOSPICE [C]     Not Part A Funded       Not Part A Funded     Not Part A Funded       Not Non-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       CHILD CARE SERVICES [S]     Not Part A Funded       REHABILITATION SERVICES [S]     Not Part A Funded       HEALTH EDUCATION SERVICES [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     S21,478,885	20	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not Part A Funded	N/A
Non-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       Non-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       CHILD CARE SERVICES [S]     Not Part A Funded       REHABILITATION SERVICES [S]     Not Part A Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       REFERAL FOR HEALTH CONSISK REDUCTION [S]     Not Part A Funded       REFERAL FOR HEALTH CONSISK REDUCTION [S]     Not Part A Funded       REFERAL FOR HEALTH CONSTRUCES [S]     Not Part A Funded       REFERAL FOR HEALTH CARE [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     S21,478,885     I	21	HOSPICE [C]	Not Part A Funded	N/A
CHILD CARE SERVICES [S]     Not Part A Funded       REHABILITATION SERVICES [S]     Not Part A Funded       REHABILITATION SERVICES [S]     Not Part A Funded       REALTH EDUCATIONRISK REDUCTION [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       LINGUISTIC SERVICES [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     S21,478,885     I	22	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not Part A Funded	N/A
REHABILITATION SERVICES [S]     Not Part A Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       LINGUISTIC SERVICES [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     SUBTOTAL	23	CHILD CARE SERVICES [S]	Not Part A Funded	N/A
HEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       LINGUISTIC SERVICES [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     S21,478,885	24	REHABILITATION SERVICES [S]	Not Part A Funded	N/A
REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       LINGUISTIC SERVICES [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     \$21,478,885	25	HEALTH EDUCATION/RISK REDUCTION [S]	Not Part A Funded	N/A
LINGUISTIC SERVICES [S]         Not Part A Funded           RESPITE CARE [S]         Not Part A Funded           SUBTOTAL         \$21,478,885	26	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not Part A Funded	N/A
RESPITE CARE [S]         Not Part A Funded           SUBTOTAL         \$21,478,885         1	27	LINGUISTIC SERVICES [S]	Not Part A Funded	N/A
S21,478,885	28	RESPITE CARE [S]	Not Part A Funded	N/A
		SUBTOTAL	\$21,478,885	100.0%

\* Funded component of the service category. [C]= Core Service; [S] = Support Service

\$24,532,094 \$2,453,209 \$600,000 ADMINISTRATION<sup>2</sup> TOTAL **CLINICAL QUALITY MANAGEMENT** 

Exp. Ratios 84.35% **Core Services** 

15.65% Support Services

NOTES:

Total based on the RWP FY 2022 final award.

<sup>2</sup> Administration includes Partnership Staff Support and Data Support (Provide® Enterprise-Miami).

<sup>3</sup> Service categories shaded in grey have been added for "FY 2023 RANKING" (i.e., Priority ranking) purposes ONLY and are not currently funded under the local RWP-Part A and MAI. This process is a new HRSA requirement under the Non-competing Continuation instructions and will assist other funding sources (e.g., FDOH/Part B) in directing their available resources.

FY 2023 RAVICISSERVICE CATECORES (ALPHAETIC ORDER) RECOMINDEDEFY 2023 RECOMINDEDEFY 2023 RECOMINDEDE1MEDICAL CASE MANAGINENT INC. IREATIMENTS CIS803 90.0038.40%2MEDICAL CASE MANAGINETIC PROCRAM (ADA) TREATIMENTS CIS803 90.0038.40%3MEDICAL CASE MANAGINETIC PROCRAM (ADA) TREATIMENTS CIS803 90.0038.40%4MEDICAL CASE MANAGINETIC PROCRAM (ADA) TREATIMENTS CIS803 90.0038.40%5MEDICAL CASE MANAGINETIC PROCRAM (ADA) TREATIMENTS CIS804 MAI TRUNCLA38.40%6MEDICAL CASE TRANCE PROCRAM (ADA) TREATIMENTS CIS804 MAI TRUNCLA38.40%7MEDICAL CASE TRANCE PROCRAM (ADA) TREATIMENTS CIS815 MAI TRUNCLA38.40%8MEDICAL CASE TRANCE PROCRAM (ADA) TREATIMENTS CIS815 MAI TRUNCLA38.40%9OUTPATERTANDARDILATORY PRAATILIS FOR CIS815 MAI TRUNCLAS815 MAI TRUNCLA11BALL TRANSPORTATION [S]S935 RG 000.34%12HEALTH CARE TRANCES [S]S935 RG 000.34%13HEALTH REVICES [C]S935 RG 000.34%14BALTH BDUCATION [S]S935 RG 000.34%15HEALTH AND CONTRINCLIST SERVICES [S]NoRMAI FundedNOA16HORE ADD COMONT FRANCE FOR INDUALS [C]NORMAI FundedNOA17HEALTH AND CONTRINCT REAUCES [S]NORMAI FundedNOA18FOOD BANKFIONE FOR INDUALS [C]NORMAI FundedNOA19S1HORE ADD CONTONT FRANCE SISTER FORES [S]NOA MAI FundedNOA <td< th=""><th></th><th>MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2023 MINORITY AIDS INITIATIVE (MAI) FLAT FUNDING BUDGET</th><th>E</th><th></th></td<>		MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2023 MINORITY AIDS INITIATIVE (MAI) FLAT FUNDING BUDGET	E	
MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES (C)         MLLOCATION <sup>1</sup> MEDICAL CASE MANAGEMENT, INC. TREATMENTS (C)         Not MAI Funded           AIDS DRUG ASSISTANCE FROGRAM (ADAP) TREATMENTS (C)         Not MAI Funded           AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS (C)         Not MAI Funded           AIDS DRUG ASSISTANCE (C)         Not MAI Funded           MEDICAL CASE MANAGEMENT, INCURST (C)         Not MAI Funded           MILIDICAL TREATMENT (ARE)         Not MAI Funded           MILIDICAL TREATMENT (ARE)         S135145700           MILIDICAL TREATMENT (ARE)         Not MAI Funded           SUBSTANCE ABUSE STRUCES (SEDENTIAL) [S]         Not MAI Funded           MELTH INSURANCE ABUSE STRUCES (SEDENTIAL) [S]         Not MAI Funded           MELTH INSURANCE PREMIUM AND COST STRUCES [SEDENTIAL) [S]         Not MAI Funded           MELTH INSURANCE PREMIUM AND COST STRUCES [SEDENTIAL) [S]         Not MAI Funded           HEALTH INSURANCE PREMIUM AND COST STRUCES [SEDENTIAL) [S]         Not MAI Funded           HEALTH INSURANCE PREMIUM AND COST STRUCES [S]         Not MAI Funded           HEALTH INSURANCE PREMIUM AND COST STRUCES [S]         Not MAI Funded           HEALTH INSURANCE PREMIUM AND COST STRUCES [S]         Not MAI Funded           HEALTH INSURANCE PREMIUM AND STRUCES [S]         Not MAI Funded           HEALTH INSURANCE	FY 2023 DANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)		FY 2023 %
MEDICAL CASE MANAGEMENT. INC. TREATMENT ADHERENCE SERVICES [C]         \$803,3010           AIDS PREAKAGEUTCAL ASSIST TREATMENTS [C]         Not MAI Funded           AIDS PREAKAGEUTCAL ASSIST TREATMENTS [C]         Not MAI Funded           AIDS PREAKAGEUTCAL ASSIST TREATMENTS [C]         Not MAI Funded           AIDS PREAKAGEUTCAL ASSIST TREATMENT [C]         Not MAI Funded           MENTAL HEALTH SERVICES [C]         S13,31,477.00           BERREGENT FINANCIAL ASSIST PREATMENT [C]         Not MAI Funded           OUTPATIENT AMBULATORY HEALTH SERVICES [C]         S1,31,477.00           BERREGENT OR ALL HEALTH ASERVICES [C]         Not MAI Funded           ORAL HEALTH ON [S]         S1,331,477.00           BERREGENT OR ADSIST FORCE [S]         Not MAI Funded           ORAL HEALTH ON [S]         S1,331,477.00           BERREGENT OR ADSIST FORCE [S]         S1,331,477.00           BERREGENT OR CERPENTING AND [S]         Not MAI Funded           HALTH INSURANCE PREAMIUNALS [S]         Not MAI Funded           HEALTH INSURANCE PREAMIUNAND COST SHARNOF OR LOW-NCOME INDIVIDUALS [C]         Not MAI Funded           HEALTH ENDRANCE PREAMIUNAND COST SHARNOF OR LOW-NCOME INDIVIDUALS [C]         Not MAI Funded           HEALTH INSURANCE PREAMILIA AND COST SHARNOF OR LOW-NCOME INDIVIDUALS [C]         Not MAI Funded           HEALTH ENDRANCE PREAMILIA AND COST SHAREDUCTION [S]	DUINNEN		ALLOCATION <sup>1</sup>	
AIDS DRUG ASSISTANCE PROGRAM (ADA) TREATMENTS [C]     Not MAI Funded       AIDS PHARMACEUTCAL ASSISTANCE [C]     NOTMAI Funded       METAL HEALTH SERVICES [C]     S135,457.00       METAL HEALTH SERVICES [C]     S135,457.00       OUTPATIENT/AMBULATORY HEALTH SERVICES [C]     S135,457.00       SUBSTANCE ABUSE OUTPATIENT CARE [C]     S33,86.00       OUTRACHT SERVICES [S]     NOT MAI Funded       HEALTH INSURANCE PRENUES REDUCTION [S]     S33,816.00       HEALTH NSURANCE PRENUES [S]     NOT MAI Funded       HEALTH NOUS ON STRAND COMMONITY ABUSE SERVICES [S]     NOT MAI Funded       HEALTH HINSURANCE PRENUES [S]     NOT MAI Funded       HEALTH HON DOM NUTTY BASE PRENUES [S]     NOT MAI Funded       HEALTH HON DOM NUTTY BASE PRENUES [S]     NOT MAI Funded       HEALTH HON DOST SUPPORT SERVICES [S]     NOT MAI Funded       HOME HEALTH CARE RAND COME INVIDUALS [C]     NOT MAI Fu	1	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$903,920.00	38.60%
AIDS PHARMACEUTICAL ASSISTANCE [C]     Not MAI Funded       MENTAL HEALTH SERVICES [C]     \$18,90,00       MENTAL HEALTH SERVICES [C]     \$13,1457,00       MERGENCY FINANCIAL ASSISTANCE [S]     \$13,1457,00       ORATIBET CARE [C]     \$13,1457,00       BUBSTANCE ABUSE OUTPATIENT CARE [C]     \$13,1457,00       SUBSTANCE ABUSE OUTPATIENT CARE [C]     \$13,1457,00       SUBSTANCE ABUSE OUTPATIENT CARE [C]     \$13,087,00       SUBSTANCE ABUSE OUTPATIENT CARE [C]     \$15,630,00       BUBSTANCE ABUSE OUTPATIENT CARE [C]     \$10,087,00       SUBSTANCE ABUSE SERVICES [S]     \$10,087,00       SUBSTANCE ABUSE SERVICES [S]     \$10,087,00       BALTH INSURANCE REMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     Not MAI Funded       HEALTH INSURANCE REMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     Not MAI Funded       HEALTH HONONADE COMMUNITY BASED HEALTH SERVICES [S]     Not MAI Funded       HEALTH BUCAL NUTRTION THERAPY [C]     Not MAI Funded       MOM FUNDE     NOM MAI Funded       MOM FUNDE     NOM MAI Funded	2	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded	N/A
MENTAL HEALTH SERVICES [C]     \$18,960,00       MENTAL HEALTH SERVICES [C]     \$18,960,00       ENERGENCY FINANCIA. SSISTANCE [S]     \$1,33,457,00       ENERGENCY FINANCIA. SSISTANCE ABUSE SUBSTANCE ABUSE SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]     \$1,63,00       ENDERCAL TRANSPORTATION [S]     \$3,9316,00     \$3,9316,00       ENDERCAL ADD BANKHOME DELIYERED MEALS [S]     \$1,63,00     \$3,9316,00       HEALTH INSURANCE PREMIUM AND COST STARNG FOR LOW-INCOME INDIVIDUALS [C]     \$1,63,00     \$3,9316,00       HEALTH INSURANCE PREMIUM AND COST STARING FOR LOW-INCOME INDIVIDUALS [C]     \$1,04,04     \$1,04,04       HEALTH HOUSING [S]     \$1,00,00     \$1,00,00     \$1,00,00	3	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded	N/A
OUTPATIENTAMBULATORY HEALTH SERVICES [C]     \$1,351,457,00       EMERCENCY FINANCIAL SESITANCE [S]     \$1,351,457,00       EMERCENCY FINANCIAL SESITANCE [S]     \$1,351,457,00       ORAL HEALTH CARE [C]     \$1,301,457,00       SUBSTANCE ABUSE OUTPATIENT CARE [C]     \$1,301,457,00       SUBSTANCE ABUSE OUTPATIENT CARE [C]     \$1,301,457,00       MEDICAL TRANSPORITATION [S]     \$1,301,457,00       SUBSTANCE ABUSE OUTPATIENT CARE [C]     \$1,301,457,00       MEDICAL TRANSPORITATION [S]     \$1,301,457,00       SUBSTANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     Not MAI Funded       HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     Not MAI Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not MAI Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not MAI Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not MAI Funded       HOME ELVPERDID     Not MAI Funded       HOME ELVPERDID     Not MAI Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not MAI Funded       NON-MEDICAL CUNRISK REDUCTION [S]     Not MAI Funded       HOME ELVPERDID     Not MAI Funded       PROPORTIL     Not MAI Funded       NON-MEDICAL CUNRISK REDUCTION [S]     Not MAI Funded       PROPORTIL     Not MAI Funded       PROPORTIL     Not MAI Funded       PROPORTIL     Not MAI	4	MENTAL HEALTH SERVICES [C]	\$18,960.00	0.81%
Image: Construct and the constr	5		\$1,351,457.00	57.71%
ORAL HEALTH CARE [C]     Not MAIFunded       ORAL HEALTH CARE [C]     SUBSTANCE ABUSE OUTPATIENT CARE [C]     Not MAIFunded       SUBSTANCE ABUSE OUTPATIENT CARE [C]     \$\$0,500.000     \$\$0,503.00       MEDICAL TRANSPORTATION [S]     SUBSTANCE ABUSE SERVICES [S]     \$\$0,503.00       MEDICAL TRANSPORTATION [S]     \$\$0,503.00     \$\$7,638.00       Not MAIFunded     \$\$0,000 SURSTANCE ABUSE SERVICES [S]     \$\$0,000 MILL       HEALTH INSURANCE RENUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     Not MAIFunded       HEALTH INSURANCE RENUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     Not MAIFunded       HEALTH INSURANCE RENUM AND COMMUNIT' BARED HEALTH SERVICES [C]     Not MAIFunded       HOME AND COMMUNIT' BARED HEALTH SERVICES [C]     Not MAIFunded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not MAIFunded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not MAIFunded       PORTER PROFILE SUPPORT SERVICES [S]     Not MAIFunded       PORTER PROFILE SUPORT SERVICES [S]     Not MAIFunded <tr< td=""><td>9</td><td>EMERGENCY FINANCIAL ASSISTANCE [S]</td><td>\$12,087.00</td><td>0.52%</td></tr<>	9	EMERGENCY FINANCIAL ASSISTANCE [S]	\$12,087.00	0.52%
SUBSTANCE ABUSE OUTPATIENT CARE (C)       \$8,058,00         NEDICAL TRANSPORTATION (S)       \$8,058,00         NEDICAL TRANSPORTATION (S)       \$7,638,00         NEDICAL TRANSPORTATION (S)       \$7,638,00         NOT REACH SERVICES (S)       \$9,816,00         NEALTH INSURANCE REMICES (S)       Not MAI Funded         HEALTH INSURANCE REMIUM AND COST SHARING FOR LOW-INCOME INDIVILIES (C)       Not MAI Funded         HEALTH EDUCATION/RISK REDUCTION (S)       Not MAI Funded         HEALTH EDUCATION/RISK REDUCTION (S)       Not MAI Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES (C)       Not MAI Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES (S)       Not MAI Funded         MOM ADDICAL NUTRTITION THERAPY (C)       Not MAI Funded         MOM ADDICAL NUTRTITION THERAPY (C)       Not MAI Funded         MOM ADDICAL SUPPORT SERVICES (S)       Not MAI Funded         MOM ADDICAL SUPORT SERVICES (S)       Not MAI Fu	7	ORAL HEALTH CARE [C]	Not MAI Funded	N/A
MEDICAL TRANSPORTATION [S]     \$\$7,628.00       MEDICAL TRANSPORTATION [S]     \$\$7,628.00       NUTREACH SERVICES [S]     \$\$7,628.00       SUBSTANCE ABUSE SERVICES (RESIDENTAL)[S]     \$\$33,816.00       SUBSTANCE ABUSE SERVICES (RESIDENTAL)[S]     \$\$00 MAI Funded       FOOD BANKHOME DELIVERED MEALS[S]     \$\$00 MAI Funded       HEALTH NSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     \$\$00 MAI Funded       HEALTH EDUCATIONRISK REDUCTION [S]     \$\$00 MAI Funded       HEALTH EDUCATIONRISK REDUCTION [S]     \$\$00 MAI Funded       NON-MEDICAL NUTRITION THERAPY [C]     \$\$00 MAI Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [C]     \$\$00 MAI Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     \$\$00 MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     \$\$\$00 MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     \$\$\$\$\$00 MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     \$	~	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$8,058.00	0.34%
OUTREACH SERVICES [S]     \$33,816.00       BESTANCE ABUSE SERVICES (RESIDENTIAL) [S]     Not MAI Funded       HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     Not MAI Funded       HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     Not MAI Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not MAI Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not MAI Funded       MEDICAL NUTRTION THERAPY [C]     Not MAI Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       PROMEMENT SERVICES [S]     Not MAI Funded       PROMEMENT SERVICES [S]     Not MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       PROME HEALTH CARE     Not MAI Funded       PROME HEALTH CARE AND SUPPORT     Not MAI Funded       PROME HEALTH CARE SERVICES [S]     Not MAI Funded       PROME HEALTH CARE AND SUPPORT     Not MAI Funded       PROME HEALTH CARE AND SUPPORT     Not MAI Funded       PROME HEALTH CARE AND SUPPORT     Not MAI Funded       PROME HEALTH CARE SERVICES [S]     Not MAI Funded       PROME HEALTH CARE SERVICES [S]     Not MAI Funded       PROME HEALTH CARE SERVICES [S]     Not MAI Funded       PROME PROME HEALTH CARE SERVICES [S] <td>6</td> <td>MEDICAL TRANSPORTATION [S]</td> <td>\$7,628.00</td> <td>0.33%</td>	6	MEDICAL TRANSPORTATION [S]	\$7,628.00	0.33%
Not Mal Funded     Not Mal Funded       FOOD BANK/HOME DELIVERED MEALS [S]     Not Mal Funded       FOOD BANK/HOME DELIVERED MEALS [S]     Not Mal Funded       HEALTH INSURANCE PREMULM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     Not Mal Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not MAI Funded       HOME AND COMMUNITY-BASED HEALTH SERVICES [C]     Not MAI Funded       MEDICAL NUTRITION THERAPY [C]     Not MAI Funded       PRYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       PORTINE     ERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded	10	OUTREACH SERVICES [S]	\$39,816.00	1.70%
FOOD BANK/HOME DELIVERED MEALS [S]       Not MAI Funded         HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       Not MAI Funded         HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       Not MAI Funded         HEALTH EDUCATION/RISK REDUCTION [S]       Not MAI Funded         HOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not MAI Funded         NON-MEDICAL NUTRTITION THERAPY [C]       Not MAI Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not MAI Funded         PSYCHOSOCIAL SUPPORT SERVICES [S]       Not MAI Funded         PROME HEALTH CARE [C]       Not MAI Funded         PROME HEALTH CARE AND SUPPORT SERVICES [S]       Not MAI Funded         PORT ERRAL FOR HEALTH CARE [C]       Not MAI Funded         PORT ERRAL FOR HEALTH CARE [C]       Not MAI Funded         PORT ERRAL FOR HEALTH CARE [C]       Not MAI Funded         PORT ERRAL FOR HEALTH CARE [C]       Not MAI Funded         PORT ERRAL FOR HEALTH CARE [C]       Not MAI Funded         PORT PROFESSIONAL SERVICES [S]       Not MAI Funded         PORT PROFESSIONAL SERVICES [S]       Not MAI Funded         PORT PROFESSIONAL SERVICES [S]       NOTHAR FUNDED         PORT PROFESSIONAL SERVICES [S]       NOTHAR FUNDED         PORT PROFESSIONAL SERVICES [S]       NOTHAR FUNDED	11	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded	N/A
HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       Not MAI Funded         HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       Not MAI Funded         HEALTH EDUCATION/RISK REDUCTION [S]       Not MAI Funded         HOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not MAI Funded         NON-MEDICAL NUTRTION THERAPY [C]       Not MAI Funded         PRECENT       REPERVICES [S]       Not MAI Funded         PRECENT       REFERVICES [S]       Not MAI Funded         PRECENT       REFERVICES [S]       Not MAI Funded         PRECENT       REFERVICES [S]       Not MAI Funded         REFERVAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not MAI Funded         REFERVAL FOR HEALTH CARE SUND SERVICES [S]       Not MAI Funded         REFERVAL FOR HEALTH CARE SUND SERVICES [S]       Not MAI Funded         REFERVAL FOR HEALTH CARE SUND SERVICES [S]       Not MAI Funded         REFERVAL FOR HEALTH CARE SUND SERVICES [S]       Not MAI Funded         REFERVAL FOR HEALTH CARE SERVICES [S]       Not MAI Funded	12	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded	N/A
HOUSING [S]       Not MAI Funded         HEALTH EDUCATION/RISK REDUCTION [S]       Not MAI Funded         HOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not MAI Funded         MEDICAL NUTRTION THERAPY [C]       Not MAI Funded         NON-MEDICAL NUTRTION THERAPY [C]       Not MAI Funded         MEDICAL NUTRTION THERAPY [C]       Not MAI Funded         NON-MEDICAL SUPPORT SERVICES [S]       Not MAI Funded         MEDICAL SUPPORT SERVICES [S]       Not MAI Funded         MOM FLALTH CARE AND SUPORT SERVICES [S]       Not MAI Funded         MOM FLALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOM FLALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOM FLALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOM FLALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOM FLALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOM FLALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOM FLALTH CARE AND SUBAL SERVICES [S]       Not MAI Funded         MOM FLALTH CARE SERVICES [S]	13	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded	N/A
Health EDUCATION/RISK REDUCTION [S]     Not MAI Funded       HOME AND COMMUNITY-BASED HEALTH SERVICES [C]     Not MAI Funded       MEDICAL NUTRITION THERAPY [C]     Not MAI Funded       MEDICAL NUTRITION THERAPY [C]     Not MAI Funded       Not MAI Funded     Not MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       CHILD CARE AND SUPPORTIVE SERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       RESPIRE CARE [S]     Not MAI Funded       RESPIRE CARE [S]     Not MAI Funded       RESPIRE CARE [S]     Not MAI Funded       R	14	HOUSING [S]	Not MAI Funded	N/A
HOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not MAI Funded         MEDICAL NUTRITION THERAPY [C]       Not MAI Funded         MEDICAL NUTRITION THERAPY [C]       Not MAI Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not MAI Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not MAI Funded         FSYCHOSOCIAL SUPPORT SERVICES [S]       Not MAI Funded         MOME HEALTH CARE IC]       Not MAI Funded         MOME HEALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOME REAL FOR HEALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOME REAL FOR HEALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOME REAL FOR HEALTH CARE AND SUPORTIVE SERVICES [S]       Not MAI Funded         MOME REAL FOR HEALTH CARE AND SUBAND SERVICES [S]       Not MAI Funded         MOME REAL FOR HEALTH CARE SERVICES [S]       Not MAI Funded         MOME REAL FOR HEALTH CARE SERVICES [S]       Not MAI Funded         MOME REAL FOR HEALTH CARE SERVICES [S]       Not MAI Funded         MOME REAL SERVICES [S]       Not MAI Funded         MOME REAL SERVICES [S]       Not MAI Funded         MOM REAL SERVICES [S]       Not MAI Funded         MOME REAL SERVICES [S]       Not MAI Funded         MOME REAL SERVICES [S]       Not MAI Funded         MOME REAL	15	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded	N/A
MEDICAL NUTRITION THERAPY [C]       Not MAI Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not MAI Funded         PSYCHOSOCIAL SUPPORT SERVICES [S]       Not MAI Funded         HOME HEALTH CARE [C]       Not MAI Funded         EARLY INTERVENTION SERVICES [S]       Not MAI Funded         CHILD CARE AND SUPPORT SERVICES [S]       Not MAI Funded         CHILD CARE AND SUPPORTIVE SERVICES [S]       Not MAI Funded         MOTHERTER AND SUPPORTIVE SERVICES [S]       Not MAI Funded         MOTHER REAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not MAI Funded         MOTHER REAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not MAI Funded         MOTHER REAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not MAI Funded         MOTHER PROFESSIONAL SERVICES [S]       Not MAI Funded <td< td=""><td>16</td><td>HOME AND COMMUNITY-BASED HEALTH SERVICES [C]</td><td>Not MAI Funded</td><td>N/A</td></td<>	16	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded	N/A
Non-MEDICAL CASE MANAGEMENT SERVICES [S]     Not MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       HOME HEALTH CARE [C]     Not MAI Funded       EARLY INTERVENTION SERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       INFORTICES [LEGAL SERVICES [S]     Not MAI Funded       RESPIRE CARE [C]     Not MAI Funded       RESPIRE SERVICES [S]     Not MAI Funded       RESPIRE CARE [S] <td< td=""><td>17</td><td>MEDICAL NUTRITION THERAPY [C]</td><td>Not MAI Funded</td><td>N/A</td></td<>	17	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded	N/A
PSYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not MAI Funded       HOME HEALTH CARE [C]     Not MAI Funded       EARLY INTERVENTION SERVICES [C]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       Not MAI Funded     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       INGUISTIC SERVICES [S]     Not MAI Funded       RESPITE CARE [S]     Not MAI Funded       S2,341,926     S2,341,926	18	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded	N/A
HOME HEALTH CARE [C]     Not MAI Funded       EARLY INTERVENTION SERVICES [C]     Not MAI Funded       EARLY INTERVENTION SERVICES [C]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       Not MAI Funded     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       ILINGUISTIC SERVICES [S]     Not MAI Funded       RESPIFE CARE [S]     Not MAI Funded       SUBTOTAL     S2341,926	19	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded	N/A
EARLY INTERVENTION SERVICES [C]     Not MAI Funded       EARLY INTERVENTION SERVICES [C]     Not MAI Funded       REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       REHABILITATION SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       INGUISTIC SERVICES [S]     Not MAI Funded       RESPIFE CARE [S]     Not MAI Funded       RESPIFE CARE [S]     Not MAI Funded       S2341,926     S2341,926	20	HOME HEALTH CARE [C]	Not MAI Funded	N/A
REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       CHILD CARE SERVICES [S]     Not MAI Funded       Not MAI Funded     Not MAI Funded       OTHER PROFESSIONAL SERVICES [LEGAL SERVICES [S]     Not MAI Funded       DTHER PROFESSIONAL SERVICES (LEGAL SERVICES [S]     Not MAI Funded       Not MAI Funded     Not MAI Funded       Not MAI SERVICES (LEGAL SERVICES [S]     Not MAI Funded       SUBTOTAL     S2,341,926	21	EARLY INTERVENTION SERVICES [C]	Not MAI Funded	N/A
CHILD CARE SERVICES [S]     Not MAI Funded       REHABILITATION SERVICES [S]     Not MAI Funded       OTHER PROFESSIONAL SERVICES [S]     Not MAI Funded       Instructure     Not MAI Funded       OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]     Not MAI Funded       Instructure     Instructures [S]     Not MAI Funded       RESPITE CARE [S]     Not MAI Funded     Not MAI Funded       SUBTOTAL     SUBTOTAL     S2,341,926	22	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not MAI Funded	N/A
REHABILITATION SERVICES [S]     Not MAI Funded       HOSPICE [C]     Not MAI Funded       OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]     Not MAI Funded       LINGUISTIC SERVICES [S]     Not MAI Funded       RESPITE CARE [S]     Not MAI Funded       SUBTOTAL     SUBTOTAL	23	CHILD CARE SERVICES [S]	Not MAI Funded	N/A
HOSPICE [C]     Not MAI Funded       OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]     Not MAI Funded       LINGUISTIC SERVICES [S]     Not MAI Funded       RESPITE CARE [S]     Not MAI Funded       SUBTOTAL     SUBTOTAL	24	REHABILITATION SERVICES [S]	Not MAI Funded	N/A
OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]     Not MAI Funded       LINGUISTIC SERVICES [S]     Not MAI Funded       RESPITE CARE [S]     Not MAI Funded       SUBTOTAL     SUBTOTAL	25	HOSPICE [C]	Not MAI Funded	N/A
LINGUISTIC SERVICES [S]         Not MAI Funded           RESPITE CARE [S]         Not MAI Funded           SUBTOTAL         \$2,341,926	26	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded	N/A
RESPITE CARE [S]         Not MAI Funded           SUBTOTAL         \$2,341,926	27	LINGUISTIC SERVICES [S]	Not MAI Funded	N/A
\$2,341,926	28	RESPITE CARE [S]	Not MAI Funded	N/A
		SUBTOTAL	\$2,341,926	100.0%

[C]= Core Service; [S] = Support Service

\$271,325	\$100,000	\$2,713,251	e F
ADMINISTRATION	CLINICAL QUALITY MANAGEMENT	TOTAL	

Exp. Ratios 97.46% 2.54% Core Services Support Services

NOTES:

<sup>1</sup> Total based on the RWP FY 2022 final award.

<sup>2</sup> Service categories shaded in grey have been added for "FY 2023 RANKING" (i.e., Priority ranking) purposes ONLY and are not currently funded under the local RWP-Part A and MAI. This process is a new HRSA requirement under the Non-competing Continuation instructions and will assist other funding sources (e.g., FDOH/Part B) in directing their available resources.

FY 2035 RANKING         ERAVICE CATEGORIES (ALTHABETIC ORDER)         FW 2033 ALLOCATION 1         FW 20333 ALLOCATION 1         FW 20333 ALLOCATION 1         FW 20333 ALLOCATION 1         FW 20333 ALLOCATION 1		MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2023 PART A CEILING FUNDING (FORMULA & SUPPLEMENTAL) BUDGET	OGET	
ALLOCATION <sup>1</sup> ALLOCATION <sup>1</sup> MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]     S     MALLOCATION <sup>1</sup> MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]     S     S.8255       ADDS PLARMACEUTICAL ASSISTANCE [C]     S     S.8255       ADDS PLARMACEUTICAL ASSISTANCE [C]     S     S.8255       ADDS PLARMACEUTICAL ASSISTANCE [C]     S     S.8255       ADD EMERGENCY FINANCIAL ASSISTANCE [C]     S     S.8253       OUTPATIENTAMBULATORY HEAT TH SERVICES [C]     S     S.8253       OUTPATIENTAMBULATORY HEAT TH SERVICES [C]     S     S.358.975       OUTPATIENTAMBULATORY REAT THERVICES [C]     S     S.358.975       OUTPATIENTAMBULATORY REATH SERVICES [C]     S     S.358.975       MENTAL HEALTH NSURANCE PREMUM AND COST STRUCES [C]     S     S.358.975       MEDICAL MENTARY READER MELLS [S]     NOP MATA FUNDER     S       MEDICAL READER ABUSE OUTPATIENT CARE [C]     S     S.358.975       MEDICAL TRANSPORTATION [S]     S     A41.28       MEDICAL TR	FY 2023 BANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 RECOMMENDED	FY 2023 %
MULL     MADE DRUG ASSISTANCE (C)     Not Part A Funded       MEDICAL CASE MANGEMENT, INC, TREATMENT ADHERENCE SERVICES (C)     \$<			ALLOCATION <sup>1</sup>	
MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]     5     6,269,052       AIDS PHARMACEUTICAL ASSISTANCE [S]     EMERGENCY FINANCIUTAL SISTANCE [S]     5     6,269,052       EMERGENCY FINANCIENT CAL ASSISTANCE [S]     EMERGENCY FINANCIENT CARE [C]     5     8,82,53       OUTPATIENTAMBULATORY HEALTH SERVICES [C]     5     8,82,53     88,253       FOOD BARK*HONE DELIVERED MALLASSISTANCE [S]     5     8,82,53       FOOD BARK*HONE DELIVERED MALLASSISTANCE [S]     5     5,93,600       MENTAL HEALTH ARE [C]     5     3,54,000       BARTANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     5     3,54,000       MENTAL HEALTH SERVICES [C]     5     3,54,000       MENDAL     HEALTH REALTH SERVICES [C]     5     3,54,000       MEDICAL TRANSFORT     8     5,00,074     1,128       MEDICAL TRANSFORT     8     5     2,169,744       MEDICAL TRANSFORT     8     8,610     8       OTHER PROFINITOR     8     8,41,128       MEDICAL NUTRIPON FIRENCY [S]     9     2,44,128       MEDICAL NUTRIPON FIRENCY [S]     8     1,4,439       MEDICAL NUTRIPON SERVICES [S]     9     2,44,128       MEDICAL NUTRIPON SERVICES [S]     9     9     1,4,439       MEDICAL NUTRIPON SERVICES [S]     8     1,4,418	1	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not Part A Funded	N/A
Image: Construct of the	2	<u> </u>	6,2	27.76%
Image: Constraint of the constr	3	AIDS PHARMACEUTICAL ASSISTANCE [C]		0.39%
OUTPATIENTYAMBULATORY HEALTH SERVICES [C]     \$\$8,530,60       OUTPATIENTYAMBULATORY HEALTH SERVICES [C]     \$\$8,530,960       BALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     \$\$353,959       HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]     \$\$353,959       BUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]     \$\$0,500,744       NENTAL HEALTH SERVICES (C]     \$\$354,000       SUBSTANCE ABUSE OUTPATIENT CARE [C]     \$\$354,000       SUBSTANCE ABUSE OUTPATIENT CARE [C]     \$\$216,974       BOUTRE REVICES (ISE) DENTIAL) [S]     \$\$16,105       OTHER PROFESSIONAL SERVICES AND PERMANENCY PLANING) [S]     \$\$154,449       OUTER ROFESSIONAL SERVICES SAND PERMANENCY PLANING) [S]     \$\$154,449       OUTER ROFESSIONAL SERVICES SAND PERMANENCY PLANING) [S]     \$\$154,449       OTHER PROFESSIONAL SERVICES SAND PERMANENCY PLANING) [S]     \$\$154,449       OUTER ROFESSIONAL SERVICES SAND PERMANENCY PLANING) [S]     \$\$154,449       OTHER PROFESSIONAL SERVICES SAND PERMANENCY PLANING) [S]     \$\$154,449	4	EMERGENCY FINANCIAL ASSISTANCE [S]		0.39%
ORAL HEALTH CARE [C]       \$\$358.975         FOOD BANK*HOME DELIVERED MEALS [S]       \$\$358.975         FOOD BANK*HOME DELIVERED MEALS [S]       \$\$35.339         HEALTH INSURANCE PREMIUM AND COST ELELIVERED MEALS [S]       \$\$35.339         BARTAL HEALTH STRRICE OR DOW-INCOME INDIVIDUALS [C]       \$\$35.339         BUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]       \$\$535.339         SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]       \$\$535.339         BARTANCE ABUSE SERVICES (RESIDENTIAL) [S]       \$\$535.339         SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]       \$\$535.329         SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]       \$\$535.329         OTHER PROFESSIONAL SERVICES (C]       Not Part A Funded         OTHER PROFESSIONAL SERVICES ([S]       \$\$556.466         OTHER PROFESSIONAL SERVICES ([S]       \$\$557.439         OTHER PROFESSIONAL SERVICES [S]       \$\$557.495         OTHER PROFESSIONAL SERVICES [S]       \$\$557.496         OTHER PROFESSIONAL SERVICES [S]       \$\$557.495         OR PA	5	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]		37.82%
FOOD BANK*HOME DELIVERED MEALS [S]       529,339         HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       5       529,334         MENTAL HEALTH SERVICES (CES) [S]       SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]       5       336,300         MENTAL HEALTH SERVICES (ICES) [G]       More Part AFunded       8       336,324         MENTAL HEALTH SERVICES (ICES) [G]       SUBSTANCE ABUSE OUTPATIENT CARE [C]       5       2,169,744         MEDICAL TRANSPORTATION [S]       SUBSTANCE ABUSE OUTPATIENT CARE [C]       5       2,449         OUTREACH SERVICES (ISC)       OUTREACH SERVICES (ISC)       S       2,449         OUTREACH SERVICES (ISC)       S       1,54,449       5         OUTREACH SERVICES (ISC)       NOTPERT FORDER       S       2,64,666         OTHER PROFESSIONAL SERVICES (ISC)       NOTPERT FORDER       S       2,64,666         OTHER PROFESSIONAL SERVICES (ISC)       NOTPERT FORDER       S       2,64,666         OTHER PROFESSIONAL SERVICES (ISC)       NOTPERT FORDER       S       2,64,666         MORE HEALTH CARE [C]       NOTPERT FORDER       S       2,64,666         MORE HEALTH CARE SERVICES (ISC)       NOTPERT FORDER       NOTPERT FORDER         MORE HEALTH CARE SERVICES (ISC)       NOTPERT FORDER       NOTPERT FORDER	9	ORAL HEALTH CARE [C]		15.89%
HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]       \$ 334,000         MENTAL HEALTH SIRVICES (IESIDENTIAL) [S]       \$ 336,329         SUBSTANCE ABUSE SERVICES (ICS)       \$ 5 336,329         SUBSTANCE ABUSE SERVICES (ICS)       Not Part Funded         NOTHER PROFESSIONAL SERVICES (ISSIDENTIAL) [S]       Not Part Funded         SUBSTANCE ABUSE OUTPATIENT CARE [C]       \$ 316,329         MEDICAL TRANSPORTATION [S]       \$ 136,449         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PREMANENCY PLANNING) [S]       \$ 246,06         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PREMANENCY PLANNING) [S]       \$ 3154,449         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES [C]       Not Part A Funded         HOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not Part A Funded         MEDICAL NUTRITION SERVICES [S]       Not Part A Funded         MOMEDICAL SUPPORT SERVICES [S]       Not Part A Funded         MON-MEDICAL SUPPORT SERVICES [S]       Not Part A Funded         MOND-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL SUPPORT SERVICES [S]       Not Part A Funded         MON-MEDICAL SUPPORT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL SUPPORT SERVICES [S]       Not Part A Funded <t< th=""><th>7</th><td>FOOD BANK*/HOME DELIVERED MEALS [S]</td><td></td><td>2.34%</td></t<>	7	FOOD BANK*/HOME DELIVERED MEALS [S]		2.34%
MENTAL HEALTH SERVICES [C]       \$ 336,329         MENTAL HEALTH SERVICES (ESIDENTIAL) [S]       \$ 336,329         SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]       \$ 2,169,744         Not Part A Funded       \$ 154,449         Not Part A Funded       \$ 154,449         OTHER PROFESSIONAL SERVICES (S]       \$ 154,449         OTHER PROFESSIONAL SERVICES (S]       \$ 2,64,696         OTHER PROFESSIONAL SERVICES [S]       \$ 2,64,696         OTHER PROFESSIONAL SERVICES [S]       \$ 2,64,696         OTHER PROFESSIONAL SERVICES [S]       \$ 2,64,696         MEDICAL UNTRITION THERAPY (C]       \$ 000 Part A Funded         MEDICAL NUTRITION THERAPY (C]       \$ 001 Part A Funded         MON-MEDICAL SUPORT SERVICES [S]       \$ 001 Part A Funded         NON-MEDICAL SUPORT SERVICES [S]       \$ 001 Part A Funded         NON-MEDICAL SUPORT SERVICES [S]       \$ 001 Part A Funded         NON-MEDICAL CARE AND SERVICES [S]       \$ 001 Part A Funded         NON-MEDICAL CARE AND SERVICES [S]       \$ 001 Part A Funded         REAMALINT ALLAND SERVICES [S]       \$ 001 Part A Funded         REAMABILITATION SERVICES [S] <th>8</th> <td>ANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [</td> <td></td> <td>1.57%</td>	8	ANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [		1.57%
SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]       S       2,169,744         Housing [S]       Housing [S]       Not Part A Funded         HOUSING [S]       SUBSTANCE ABUSE OUTPATIENT CARE [C]       Not Part A Funded         Not Part A Funded       SUBSTANCE ABUSE SERVICES SID PERMANENCY PLANNING) [S]       S       4,449         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]       S       2,64,696         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]       S       2,64,696         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES SID PERMANENCY PLANNING) [S]       S       2,64,696         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES [C]       Not Part A Funded       Not Part A Funded         MEDICAL UNTRTION THERAPY (C]       Not Part A Funded       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded       Not Part A Funded         MOMMAND AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded       Not Part A Funded         MOMMAND AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded       Not Part A Funded       Not Part A Funded         MOMMEND AND COMM	6	MENTAL HEALTH SERVICES [C]		1.49%
HOUSING [S]       HOUSING [S]         SUBSTANCE ABUSE OUTPATIENT CARE [C]       Not Part A Funded         SUBSTANCE ABUSE OUTPATIENT CARE [C]       SUBSTANCE ABUSE OUTPATIENT CARE [C]       S         MEDICAL TRANSPORTATION [S]       S       14,128         OUTREACH SERVICES [S]       OUTREACH SERVICES [S]       S       154,449         OUTHER PROFESSIONAL SERVICES [LEGAL SERVICES [C]       Not Part A Funded       Not Part A Funded         HOME HEALTH CARE [C]       Not Part A Funded       Not Part A Funded         MEDICAL NUTRTION THERAPY [C]       Not Part A Funded       Not Part A Funded         MEDICAL SUPPORT SERVICES [S]       Not Part A Funded       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded	10	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]		9.61%
MEDICAL TRANCE ABUSE OUTPATIENT CARE [C]       \$       44,128         MEDICAL TRANSPORTATION [S]       \$       5       154,449         OTHER PROFESSIONAL SERVICES [LEGAL SERVICES [S]       \$       5       254,696         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES [C]       \$       \$       264,696         OTHER PROFESSIONAL SERVICES (LEGAL SERVICES [C]       Not Part A Funded       \$       154,449         MOME HEALTH CARE [C]       Not Part A Funded       \$       \$       154,449         MEDICAL NUTRITION THERAPY [C]       Not Part A Funded       \$       \$       \$       154,449         MOME HEALTH CARE [C]       MOME HEALTH CARE [C]       Not Part A Funded       \$       \$       \$       \$       154,449         MOME HEALTH CARE [C]       MOME HEALTH CARE [C]       Not Part A Funded       \$       \$       \$       \$       \$       \$       154,449       \$       \$       \$       \$       \$       154,449       \$ <th>11</th> <td>HOUSING [S]</td> <td>Not Part A Funded</td> <td>N/A</td>	11	HOUSING [S]	Not Part A Funded	N/A
MEDICAL TRANSPORTATION [S]       S       154,449         OUTREACH SERVICES [S]       S       264,696         OUTREACH SERVICES [S]       S       154,449         OTHER PROFESSIONAL SERVICES (CI       Not Part A Funded         HOME HEALTH CARE [C]       Not Part A Funded         MEDICAL NUTRITION THERAPY [C]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         MON-MEDICAL SUPPORT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MOME HEALTH CARE AND SUPORTIVE SERVICES [S]       Not Part A Funded         MOME HEALTH CARE AND SUPORTIVE SERVICES [S]       Not Part A Funded         MOME MERAPLIT CARE AND SUPORTIVE SERVICES [S]       Not Part A Funded         MOME MEALTH CARE CARE [S]       Not Part A Funded         MOME MEALTH CARE SI	12	SUBSTANCE ABUSE OUTPATIENT CARE [C]		0.20%
OUTREACH SERVICES [S]       S. 264,696         OTHER PROFESSIONAL SERVICES AND PERMANENCY PLANNIG) [S]       S. 154,449         EARLY INTERVENTION SERVICES AND PERMANENCY PLANNIG) [S]       S. 154,449         FORDER PROFESSIONAL SERVICES (C]       Not Part A Funded         MOME HEALTH CARE [C]       Not Part A Funded         MOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not Part A Funded         POME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         POME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         POME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         POME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         POME AND COMMONITY-BASED HEALTH SERVICES [S]       Not Part A Funded         POME AND CONN-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         POME AND COMPARISK REDUCTION [S]       Not Part A Funded         POME AND SERVICES [S]       Not Part A Funded         POME AND SUPORTIVE SERVICES [S]       Not Part A Funded	13	MEDICAL TRANSPORTATION [S]		0.68%
OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]       S       154,449         EARLY INTERVENTION SERVICES (C]       Not Part A Funded         HOME HEALTH CARE (C]       Not Part A Funded         Not Part A Funded       Not Part A Funded         HOME AND COMMUNITY-BASED HEALTH SERVICES (C]       Not Part A Funded         Not Part A Funded       Not Part A Funded         PSYCHOSOCIAL SUPPORT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         MOL       MOL PART FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         MOL       MOL PART FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         MOL       MOL PART FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         MOL       MOL PART FOR HEALTH CARE AND SUPORTIVE SERVICES [S]       Not Part A Funded	14	OUTREACH SERVICES [S]		1.17%
Image: Constraint of the constr	15			0.68%
Home HEALTH CARE [C]       Not Part A Funded         MEDICAL NUTRITION THERAPY [C]       Not Part A Funded         MEDICAL NUTRITION THERAPY [C]       Not Part A Funded         HOME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         PSYCHOSOCIAL SUPPORT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE SERVICES [S]       Not Part A Funded         REHABILITATION SERVICES [S]       Not Part A Funded         MEALTH EDUCATION/RISK REDUCTION [S]       Not Part A Funded         MEALTH EDUCATION/RISK REDUCTION [S]       Not Part A Funded         MEALTH EDUCATION/RISK REDUCTION [S]       Not Part A Funded         MEFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]       Not Part A Funded         RESPIRE CARE [S]       Not Part A Funded       Not Part A Funded         RESPIRE CARE [S]       Not Part A Funded       Not Part A Funded	16	EARLY INTERVENTION SERVICES [C]	Not Part A Funded	N/A
MEDICAL NUTRITION THERAPY [C]     Not Part A Funded       HOME AND COMMUNITY-BASED HEALTH SERVICES [C]     Not Part A Funded       PSYCHOSOCIAL SUPPORT SERVICES [S]     Not Part A Funded       MON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       MON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       MON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       MON-MEDICAL CASE SERVICES [S]     Not Part A Funded       MON-MEDICAL CASE SERVICES [S]     Not Part A Funded       MEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       MEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       MEFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       MEFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       MESPITE CARE [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded <tre< th=""><th>17</th><td>HOME HEALTH CARE [C]</td><td>Not Part A Funded</td><td>N/A</td></tre<>	17	HOME HEALTH CARE [C]	Not Part A Funded	N/A
HOME AND COMMUNITY-BASED HEALTH SERVICES [C]       Not Part A Funded         POME AND COMMUNITY-BASED HEALTH SERVICES [S]       Not Part A Funded         POME PRYCHOSOCIAL SUPPORT SERVICES [S]       Not Part A Funded         MON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE MANAGEMENT SERVICES [S]       Not Part A Funded         NON-MEDICAL CASE SERVICES [S]       Not Part A Funded         NON-MEDICAL CARE SERVICES [S]       Not Part A Funded         MORPART FUNCES [S]       Not Part A Funded         MEALTH EDUCATION NERK REDUCTION [S]       Not Part A Funded         Not Part A Funded         META FUNCES [S]       Not Part A Funded         CARE SERVICES [S]       Not Part A Funded         Not Part A Funded         Not Part A Funded         Not Part A Funded         SEUTION         Not Part A Funded         Not Part A Funded         SUBTOTAL	18	MEDICAL NUTRITION THERAPY [C]	Not Part A Funded	N/A
PSYCHOSOCIAL SUPPORT SERVICES [S]     Not Part A Funded       HOSPICE [C]     Not Part A Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       NON-MEDICAL CASE SERVICES [S]     Not Part A Funded       HEALTH EDUCATION SERVICES [S]     Not Part A Funded       REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERRAL FOR HEALTH CARE [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     SUBTOTAL	19	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not Part A Funded	N/A
HOSPICE [C]     Not Part A Funded       NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       CHILD CARE SERVICES [S]     Not Part A Funded       REHABILITATION SERVICES [S]     Not Part A Funded       More and the ALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       REFERAL FOR HEALTH CARE (S)     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     S22,582,829	20	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not Part A Funded	N/A
NON-MEDICAL CASE MANAGEMENT SERVICES [S]     Not Part A Funded       NON-MEDICAL CASE SERVICES [S]     Not Part A Funded       ECHILD CARE SERVICES [S]     Not Part A Funded       REHABILITATION SERVICES [S]     Not Part A Funded       REATH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       LINGUISTIC SERVICES [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       RESPIRE CARE [S]     Not Part A Funded       SUBTOTAL     S22,82,829	21	HOSPICE [C]	Not Part A Funded	N/A
CHILD CARE SERVICES [S]     Not Part A Funded       REHABILITATION SERVICES [S]     Not Part A Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       Mot Part A Funded     Not Part A Funded       Not Part A Funded     Not Part A Funded       Method     Not Part A Funded       Not Part A Funded     Not Part A Funded       Not Part A Funded     Not Part A Funded       Not Part A Funded     Not Part A Funded       SupPORTIC SERVICES [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     \$22,\$82,\$29	22	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not Part A Funded	N/A
REHABILITATION SERVICES [S]     Not Part A Funded       HEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       REFERAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       LINGUISTIC SERVICES [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     SUBTOTAL	23	CHILD CARE SERVICES [S]	Not Part A Funded	N/A
HEALTH EDUCATION/RISK REDUCTION [S]     Not Part A Funded       REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       LINGUISTIC SERVICES [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     SUBTOTAL	24	REHABILITATION SERVICES [S]	Not Part A Funded	N/A
REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]     Not Part A Funded       LINGUISTIC SERVICES [S]     Not Part A Funded       RESPITE CARE [S]     Not Part A Funded       SUBTOTAL     \$22,\$82,\$29	25	HEALTH EDUCATION/RISK REDUCTION [S]	Not Part A Funded	N/A
LINGUISTIC SERVICES [S]         Not Part A Funded           RESPITE CARE [S]         Not Part A Funded           SUBTOTAL         \$22,\$82,\$29	26		Not Part A Funded	N/A
RESPITE CARE [S]         Not Part A Funded           SUBTOTAL         \$22,582,829         1	27	LINGUISTIC SERVICES [S]	Not Part A Funded	N/A
\$22,582,829	28	RESPITE CARE [S]	Not Part A Funded	N/A
		SUBTOTAL	\$22,582,829	100.0%

[C] = Core Service; [S] = Support Service

× SO 85.12%

_	\$25,758,699 Exp. Ratio	TOTAL
CLINICAL QUALITY MANAGEMENT \$600,000	\$25,758,69	TOTAL
	\$600,000	NICAL QUALITY MANAGEMENT

\$2,575,869

ADMINISTRATION<sup>2</sup>

14.88% Support Services **Core Services** 

NOTES:

Award Ceiling Totals \$28,607,611 [\$25,758,698 (Part A) and \$2,848,913 (MAI)] per HRSA's FY 2023 Non-competing Continuation Instructions.

<sup>2</sup> Administration includes Partnership Staff Support and Data Support (Provide® Enterprise-Miami).

<sup>3</sup> Service categories shaded in grey have been added for "FY 2023 RANKING" (i.e., Priority ranking) purposes ONLY and are not currently funded under the local RWP-Part A and MAI. This process is a new HRSA requirement under the Non-competing Continuation instructions and will assist other funding sources (e.g., FDOH/Part B) in directing their

	MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2023 MINORITY AIDS INFITATIVE (MADI CEILING FUNDING BUDGET	DGET	
FY 2023 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 RECOMMENDED ALLOCATION <sup>1</sup>	FY 2023 %
-	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$903,920.00	36.68%
2	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded	N/A
3	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded	N/A
4	MENTAL HEALTH SERVICES [C]	\$18,960.00	0.77%
5	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$1,473,553.00	59.80%
9	EMERGENCY FINANCIAL ASSISTANCE [S]	\$12,087.00	0.49%
2	ORAL HEALTH CARE [C]	Not MAI Funded	N/A
~	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$8,058.00	0.33%
6	MEDICAL TRANSPORTATION [S]	\$7,628.00	0.31%
10	OUTREACH SERVICES [S]	\$39,816.00	1.62%
=	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded	N/A
12	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded	N/A
13	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded	N/A
14	HOUSING [S]	Not MAI Funded	N/A
15	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded	N/A
16	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded	N/A
17	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded	N/A
18	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded	N/A
19	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded	N/A
20	HOME HEALTH CARE [C]	Not MAI Funded	N/A
21	EARLY INTERVENTION SERVICES [C]	Not MAI Funded	N/A
22	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SER VICES [S]	Not MAI Funded	N/A
23	CHILD CARE SERVICES [S]	Not MAI Funded	N/A
24	REHABILITATION SERVICES [S]	Not MAI Funded	N/A
25	HOSPICE [C]	Not MAI Funded	N/A
26	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded	N/A
27	LINGUISTIC SERVICES [S]	Not MAI Funded	N/A
28	RESPITE CARE [S]	Not MAI Funded	N/A
	SUBTOTAL	\$2,464,022	100.0%
	ion [6] - Cummont Commission		

 $[\mathbf{C}]$  = Core Service;  $[\mathbf{S}]$  = Support Service

\$284,891	\$100,000	\$2,848,913	Exp. Ratios	<u>97.58%</u>	2.42%
ADMINISTRATION	<b>CLINICAL QUALITY MANAGEMENT</b>	TOTAL		Core Services	Support Services

NOTES:

<sup>1</sup> Award Ceiling Totals \$28,607,611 [\$25,758,698 (Part A) and \$2,848,913 (MAI)] per HRSA's FY 2023 Non-competing Continuation Instructions.

<sup>2</sup> Service categories shaded in grey have been added for "FY 2023 RANKING" (i.e., Priority ranking) purposes ONLY and are not currently funded under the local RWP-Part A and MAI. This process is a new HRSA requirement under the Non-competing Continuation instructions and will assist other funding sources (e.g., FDOH/Part B) in directing their



10:00 a.m. - 12:00 p.m.

Miami-Dade County Main Library 101 West Flagler Street, Auditorium Miami, FL 33130

### AGENDA

I.	Call to Order	Dr. Diego Shmuels
II.	Meeting Housekeeping and Rules	Marlen Meizoso
III.	Introductions	All
IV.	Floor Open to the Public	Dr. Diego Shmuels
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of September 1, 2022	All
VII.	Reports	
	• Recipients (Part A, Part B, ADAP, General Revenue)	All
	• Vacancies	Marlen Meizoso
	• Report to Committees (reference only)	All
	Medical Care Subcommittee Report	Marlen Meizoso
VIII.	Standing Business	
	• December meeting	All
IX.	New Business	
	• YR 2022 Sweeps/Reallocation #3	All
	Maximize Expenditures Prior to Fiscal Year Closure	All
	• Service Descriptions- Medical Transportation, Mental Health,	
	Other Professional: Legal Services and Substance Abuse	All
	• 2023 Meeting Dates and Work Plan Development	Marlen Meizoso
X.	Announcements	Marlen Meizoso
XI.	Next Meeting: December 1, 2022 at Main Library- Auditorium	Dr. Diego Shmuels
XII.	Adjournment	Dr. Diego Shmuels

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership's Care and Treatment Committee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

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### Medical Care Subcommittee Report to the Care and Treatment Committee Presented November 3, 2022

The Medical Care Subcommittee (MCSC):

- Met on September 23 and October 28, 2022.
- Heard updates from the Ryan White Program and the ADAP Program.
- Updating the Primary Medical Care Standards.
- Made some additions and reformatted the Allowable Conditions List.
- Addressed an oral health care issue related to codes but deferred further discussion until the November meeting
- Revised service descriptions for oral health care, AIDS pharmaceutical assistance, and outpatient ambulatory health services to be reviewed in November.
- Revised language in oral health care service standards to be reviewed in November.
- Discussed the impact of a reduced committee size and voted to reorganize the membership composition as shown below. The reorganization removes the nutritionist specialty, but if a consult is needed they will be invited to a meeting. A general seat was kept to accommodate for any additional members in a category.

Seat Assignments by Specialty	Revisions based on 16 members
ADAP representative	1
General Revenue representative	1
Nurse/Medical Case Manager	1
Pharmacists	1
Physicians, APRN, Physician Assistant	4
Psychiatrist/Mental Health Provider	1
Representatives of Affected (RA)	5
Substance Abuse Treatment Provider	1
General Seats (non-assigned)	1
Nutritionist	specialty deleted
Total Assigned Seats:	16

# Motion to amend the Medical Care Subcommittee seat assignments as discussed (*indicated above*)

The next subcommittee meeting is scheduled for November 18, 2022.

All motions are subject to Partnership approval.



10:00 a.m. - 12:00 p.m.

Miami-Dade County Main Library 101 West Flagler Street, Auditorium Miami, FL 33130

### AGENDA

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# December 2022

# Ryan White Part A/MAI Program and Miami-Dade HIV/AIDS Partnership Calendar

S	Monday	Tuesday	Wednesday	Thursday	Friday	S
To request material in accessible format, a sign language interpreter, CART (Communication Access Real-time Translation) services, and/or any other accommodation to participate in this or any other Miami-Dade HIV/AID Partnership meeting, please contact Marlen Meizoso or Christina Bontempo at (305) 445-1076 or send an e-mail to <u>hiv-aidsinfo@behavioralscience.com</u> at least five (5) calendar days in advance to initiate your request. TTY users may also call 711 (Florida Relay Services).		All events listed on this calendar are open to the public. Miami- Dade HIV/AIDS Partnership meetings are held in person. Clinical Quality Management (CQM) Committee and Minority AIDS Initiative/CQM meetings are held via Zoom. PLEASE RSVP Scan the QR Code with your phone's camera or contact us at cbontempo@behavioralscience.com, marlen@behavioralscience.com or (305) 445-1076.Zoom log-in.		1 X Worlds AIDS Day Miami-Dade HIV/AIDS Partnership Care & Treatment Committee 10:00 AM – 12:00 PM Miami-Dade County Main Library 101 West Flagler Street Auditorium, Miami, FL 33130	2	3
4	5 Print It 📄 Post It 🎙 Pass It Around 🗣	<b>6</b> <b>Remembering Ryan White</b> Born December 6, 1971 Died April 8, 1990	7 Miami-Dade HIV/AIDS Partnership's New Member Orientation & Training 2:00 PM – 5:00 PM Via Zoom Meeting ID: 870 3121 8580 Passcode: 132820	8	<b>9</b> Miami-Dade HIV/AIDS Partnership <b>Strategic Planning Committee</b> <b>10:00 AM – 12:00 PM</b> Miami-Dade County Main Library 101 West Flagler Street Auditorium, Miami, FL 33130	10
11	12	13	14	15 Miami-Dade HIV/AIDS Partnership Housing Committee 2:00 PM – 4:00 PM Behavioral Science Research Corp., 2121 Ponce de Leon Boulevard, Suite 240, Coral Gables, FL 33134	16 Clinical Quality Management Committee 9:30 AM – 11:30 AM Zoom Meeting	17
18	19 Miami-Dade HIV/AIDS Partnership 10:00 AM – 12:00 PM Miami-Dade County Main Library 101 West Flagler Street Auditorium, Miami, FL 33130	20 Minority AIDS Initiative Clinical Quality Management Team 9:30 AM – 11:30 AM Zoom Meeting	21 Miami-Dade HIV/AIDS Partnership Executive Committee 10:00 AM – 12:00 PM Behavioral Science Research Corp., 2121 Ponce de Leon Boulevard, Suite 240, Coral Gables, FL 33134	22 Miami-Dade HIV/AIDS Partnership Prevention Committee 10:00 AM – 12:00 PM Miami-Dade County Main Library 101 West Flagler Street Auditorium, Miami, FL 33130	23	24
25 Christmas Day	26 (BSR Offices Closed)	27 Miami-Dade HIV/AIDS Partnership Community Coalition Roundtable **Cancelled** Members will participate in health fairs and World AIDS Day events in December.	28	29	30	31

MIAMI-DADE HIV/AIDS PARTNERSHIP ()@HIVPartnership )@HIVPartnership @@hiv\_partnership

Information on this calendar is subject to cha Version 09/28/22



10:00 a.m. - 12:00 p.m.

Miami-Dade County Main Library 101 West Flagler Street, Auditorium Miami, FL 33130

### AGENDA

I.	Call to Order	Dr. Diego Shmuels		
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VIII.	Standing Business			
	• December meeting	All		
IX.	New Business			
	• YR 2022 Sweeps/Reallocation #3	All		
	Maximize Expenditures Prior to Fiscal Year Closure	All		
	• Service Descriptions- Medical Transportation, Mental Health,			
	Other Professional: Legal Services and Substance Abuse	All		
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X.	Announcements	Marlen Meizoso		
XI.	Next Meeting: December 1, 2022 at Main Library- Auditorium	Dr. Diego Shmuels		
XII.	Adjournment	Dr. Diego Shmuels		

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### MIAMI-DADE COUNTY - RYAN WHITE PART A

### FY 2022-23 (YR 32) FORMULA & SUPPLEMENTAL GRANT FUNDING ALLOCATIONS

### SWEEPS 3 (SW3) - FUNDING REALLOCATIONS

		-	Column A (allocations)		Column B (reductions)		Column C (requests)		Column D (A-B+C)	
YR 32 RANKING ORDER <sup>1</sup>	SERVICE CATEGORIES	CORE/SUPPORT		LOCATIONS FTER SW2		SW3 PROPOSED REDUCTIONS	sn	/3 REQUESTS	Α	PROPOSED LLOCATIONS AFTER SW3 <sup>2</sup>
1	MEDICAL CASE MANAGEMENT	CORE	\$	6,215,461	\$	(336,000)	\$	339,229	\$	6,218,690
2	OUTPATIENT/AMBULATORY HEALTH	CORE	\$	9,177,172	\$	(661,000)	\$	674,540	\$	9,190,712
3	MENTAL HEALTH SERVICE	CORE	\$	432,385	\$	(81,148)			\$	351,237
4	AIDS PHARMACEUTICAL ASSISTANCE	CORE	\$	84,492					\$	84,492
5	ORAL HEALTH CARE	CORE	\$	4,088,975	\$	(224,530)			\$	3,864,445
6	HEALTH INSURANCE SERVICES	CORE	\$	595,700					\$	595,700
7	SUBSTANCE ABUSE RESIDENTIAL	SUPPORT	\$	2,169,744	\$	(597,000)			\$	1,572,744
8	FOOD BANK	SUPPORT	\$	1,766,083			\$	894,025	\$	2,660,108
9	SUBSTANCE ABUSE OUTPATIENT CARE	CORE	\$	360,681	\$	(16,879)			\$	343,802
10	MEDICAL TRANSPORTATION	SUPPORT	\$	194,149			\$	8,763	\$	202,912
11	EMERGENCY FINANCIAL ASSISTANCE	SUPPORT	\$	9,853					\$	9,853
12	OUTREACH SERVICES	SUPPORT	\$	264,696					\$	264,696
13	OTHER PROFESSIONAL SERVICES (LEGAL)	SUPPORT	\$	154,449					\$	154,449
	SUBTOTAL		\$	25,513,840	\$	(1,916,557)	\$	1,916,557	\$	25,513,840
	CLINICAL QUALITY MANAGEMENT		\$	641,522					\$	641,522
	ADMINISTRATION (10%) 3		\$	2,453,209					\$	2,453,209
	GRAND TOTAL		\$	28,608,571	\$	(1,916,557)	\$	1,916,557	\$	28,608,571

#### YR 32 Current Award (Breakdown by Funding Source)

		ara (Broundomn	
Formula Funding	\$ 16,141,380	-	
Supplemental Funding	\$ 4,121,835		
FY'20 Supplemental	\$ 4,268,879	•	
Carryover Award	\$ 4,076,477	<u>\$28,608,571</u>	
MAI Funding	\$ 1,089,480		
FY'20 MAI	\$ 1,623,771		
MAI Carryover Award	\$ 1,212,670	_	
YR 32 Total Award	\$ 32,534,492	-	

#### NOTES:

<sup>1</sup> YR 32 ranking order is based on the Needs Assessment's allocation as provided in the FY 2022 Notice of Funding Opportunity (NOFO).

<sup>2</sup> If the SW3 recommendations are adopted, the CORE Services Total = \$20,649,078 (81%); SUPPORT Services Total = \$4,864,762 (19%); CLINICAL QUALITY MANAGEMENT (2.2%).

<sup>3</sup> Administration includes Partnership (Planning Council) and Program Support Costs.

# **Service Category Sort by FY 31 Total Expenditures**

SERVICES CATEGORIES	FY 27	FY 28	FY 29	FY 30	FY 31
CORE SERVICES					
Outpatient/Ambulatory Health Services	\$6,847,772	\$9,112,521	\$9,391,615	\$7,397,592	\$7,729,584
Medical Case Management, inc. Treatment Adherence (includes Peer Support)	\$4,165,958	\$5,308,840	\$5,776,806	\$5,283,942	\$5,744,512
Oral Health Care	\$2,443,947	\$2,841,838	\$3,547,495	\$1,645,879	\$2,533,062
Health Insurance Premium & Cost Sharing Assistance	\$5,348,849	\$502,536	\$372,895	\$289,193	\$298,950
Mental Health Services	\$112,346	\$133,790	\$135,505	\$90,019	\$60,239
AIDS Pharmaceutical Assistance (Local)	\$441,202	\$86,210	\$57,843	\$5,993	\$4,379
Substance Abuse Services Outpatient	\$110,357	\$55,390	\$23,970	\$23,556	\$1,356
SUPPORT SERVICES					
Food Bank	\$1,032,226	\$1,451,528	\$1,851,369	\$1,303,702	\$1,338,778
Substance Abuse Services (Residential)	\$2,276,435	\$1,854,140	\$1,237,830	\$1,320,120	\$968,310
Outreach Services	\$337,463	\$307,380	\$332,602	\$148,155	\$140,761
Medical Transportation	\$161,815	\$139,855	\$140,937	\$5,642	\$100,956
Other Professional Services - Legal Services Emergency Financial Assistance	\$146,988 N/A	\$140,599 N/A	\$115,976 N/A	\$146,336 N/A	\$97,371 N/A









10:00 a.m. - 12:00 p.m.

Miami-Dade County Main Library 101 West Flagler Street, Auditorium Miami, FL 33130

### AGENDA

I.	Call to Order	Dr. Diego Shmuels		
II.	Meeting Housekeeping and Rules	Marlen Meizoso		
III.	Introductions	All		
IV.	Floor Open to the Public	Dr. Diego Shmuels		
V.	Review/Approve Agenda	All		
VI.	Review/Approve Minutes of September 1, 2022	All		
VII.	Reports			
	• Recipients (Part A, Part B, ADAP, General Revenue)	All		
	• Vacancies	Marlen Meizoso		
	• Report to Committees (reference only)	All		
	Medical Care Subcommittee Report	Marlen Meizoso		
VIII.	Standing Business			
	December meeting	All		
IX.	New Business			
	• YR 2022 Sweeps/Reallocation #3	All		
	Maximize Expenditures Prior to Fiscal Year Closure	All		
	• Service Descriptions- Medical Transportation, Mental Health,			
	Other Professional: Legal Services and Substance Abuse	All		
	• 2023 Meeting Dates and Work Plan Development	Marlen Meizoso		
X.	Announcements	Marlen Meizoso		
XI.	Next Meeting: December 1, 2022 at Main Library- Auditorium	Dr. Diego Shmuels		
XII.	Adjournment	Dr. Diego Shmuels		

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For more information, regarding the Miami-Dade HIV/AIDS Partnership's Care and Treatment Committee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

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### MEDICAL TRANSPORTATION

### (Year <u>32-33</u> Service Priorities: #1<u>03</u> for Part A and #<u>5-9</u> for MAI)

**Medical Transportation** is a support service. Medical Transportation is the provision of non-emergency transportation services that enables an eligible client to access or be retained in core medical and support services. Locally, this service is limited to specially-designated, discounted EASY Tickets (transportation vouchers) from the Miami-Dade County Department of Transportation and Public Works (DTPW; formerly Miami-Dade Transit Agency-MDTA) to program-eligible people with HIV attending medical and/or social service appointments. Daily, weekly and monthly discounted EASY Tickets are available when using the discounted EASY Tickets option. Alternative methods (such as ride-sharing services like Uber, UberHealth, Lyft, etc.) may be available, where requested by a Part A/MAI-funded subrecipient and approved by the Miami-Dade County Office of Management and Budget-Grants Coordination.

Providers of discounted EASY Tickets must demonstrate coordination with Miami-Dade County transportation agencies and services, Medicaid Special Transportation, Miami-Dade County Special Transportation Services (STS), and other existing transportation programs to avoid duplication of services. In addition, providers of transportation tickets are encouraged to apply annually to the Miami-Dade Transit Agency's Transportation Disadvantaged Program (<u>http://www.miamidade.gov/transit/transportationdisadvantaged-program-guidelines.asp</u>) in order to obtain assistance for clients who are eligible under that program, where applicable. As a reminder, in all cases, the Ryan White Program must be used as the payer of last resort.

A. **Program Operation Requirements:** Discounted EASY Tickets are available to program-eligible clients who meet the requirements of this service category, for unlimited trips during the calendar month. These specially-designated EASY Tickets will not be usable in other months and are not "re-loadable."

These monthly transportation tickets should be distributed in a timely manner in order to maximize ticket usage. Unused discounted EASY Tickets (transportation vouchers) **cannot** be returned to the DTPW for credit. Unused or undistributed discounted EASY tickets **cannot** be charged to the Ryan White Program.

Providers must inform clients that this type of assistance is <u>not</u> an entitlement. Therefore, the level of assistance provided to individual clients is based on relative need and voucher availability. Clients must also be informed that the availability of transportation tickets is contingent upon funding availability and, therefore, the continuance of this type of assistance is not guaranteed. Multiple instances of reduced fare transportation assistance per client per month are **NOT** allowed regardless of circumstance, payer source, and/or government assistance program that is using/providing the subsidized fare. As payer of last resort, the Ryan White Program can only reimburse subrecipients (service providers) for EASY Ticket fares (vouchers) distributed to eligible clients that are **NOT ELIGIBLE** to receive subsidized transportation assistance or fares under **ANY OTHER** program. This restriction will be closely monitored by the County's DTPW and the Office of Management and Budget (OMB) as a condition of the Ryan White Program having program access to the discounted EASY Tickets. Lost or stolen EASY tickets **cannot** be replaced by the local Ryan White Part A Program and replacements will not be considered by DTPW.

Regular reconciliation through a secure data system match of clients receiving discounted EASY Tickets through the Ryan White Part A Program will be conducted on a quarterly basis between the County's authorized OMB and DTPW staff, to ensure clients are not receiving more than one (1) instance of reduced fare transportation assistance per month. Clients found to be receiving duplicative discounted transportation services may be banned from receiving any additional assistance from one or both sources (the County's Ryan White Program or DTPW). Medical Case Managers and Medical Transportation subrecipients must inform clients of this restriction and the reconciliation process.

Prior to distributing these transportation vouchers, **subrecipients of Medical Transportation services must ensure that clients**: 1) review and sign the "Miami-Dade County Ryan White Part A Program Acknowledgement to Receive Monthly Transportation Assistance" attesting to their understanding of this restriction, including consent for the reconciliation data system match; 2) indicate that they have not received other discounted transportation assistance for the same month; and 3) indicate that they do not qualify to receive free or subsidized transportation assistance (fare) from any other program. This client acknowledgement/consent form is required prior to the client receiving a discounted EASY Ticket **each month**. A copy of the acknowledgement for each month of service must be maintained in the client's record/chart at the Medical Transportation subrecipient's site.

Providers must document criteria, policies, and procedures utilized to determine transportation EASY Tickets allotments for clients that must take into account not only minimum requirements, but also consideration for those clients who demonstrate the greatest need for these services. This documentation must be provided to the Miami-Dade County Office of Management and Budget-Grants Coordination upon request.

Documentation of at least one (1) monthly medical and/or social service appointments must be submitted by the client to the Medical Case Manager before the client can receive transportation assistance, unless otherwise directed by the County. The number of required appointments is subject to change at the County's discretion with no less than thirty (30) days' written notice to all Part A/MAI-funded subrecipient agencies. Attendance at Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) meetings also count towards the monthly appointment total. Any combination of medical, social service, AA, and/or NA appointments will count towards the required monthly total.

If allowable appointments are appropriately documented in the Client Profile in the Provide® Enterprise Miami data management system for each month of service, the Ryan White Program will not restrict the total number of months in which the client can receive transportation services during the grant Fiscal Year. Service providers will monitor the consistency of client attendance at these monthly medical and/or social service appointments to ensure compliance with the requirement for use of transportation vouchers under this program. If clients are non-adherent to appointments this must be documented and service providers will have the discretion, on a case-by-case basis, to not issue a voucher to continually non-compliant clients. "Non-compliant" is defined herein as two missed appointments in two consecutive months (e.g., two months in which two or more appointments have been missed each month without acceptable excuse or cancellation for cause by client would be considered non-compliant). Miami-Dade County Office of Management and Budget-Grants Coordination staff will also monitor compliance with this restriction.

**IMPORTANT NOTE**: Alternative methods of Medical Transportation service delivery are only available at select subrecipient agencies as a result of the corresponding Request for Proposals Process and subsequent contract negotiations.

Β. Rules for Reimbursement: Discounted EASY Tickets cost \$56.25 per monthly ticket (1-Month Pass), \$14.60 per weekly ticket (7-Day Pass), and \$2.80 per daily ticket (1-Day Pass); and these rates may be subject to change. The number of discounted EASY Tickets available for distribution should be consistent throughout the duration of the contract period, unless the cost of these EASY Tickets changes, and must take into consideration the total budget request, agency capacity, client eligibility, and demand for this service. Ride-share services will be reimbursed based on the cost of each one-way trip. Providers will be reimbursed based on properly documented service utilization reports from the Provide® Enterprise Miami data management system, indicating the date of discounted EASY Ticket distribution or ride-share trip, client CIS number, and dollar amount including dispensing charge. Dispensing charges, not to exceed 15% (or as may be adjusted by the County due to formula calculations on the budget form), will be reimbursed after services have been provided, client utilization and disbursement information is submitted to the County, and vendor payment has been documented. This service is subject to audit by the Office of Management and Budget-Grants Coordination. Discounted EASY Ticket orders, invoices, and payments, as well as monthly distribution logs and acknowledgement of program limitations signed by the client

Section I, Page 68 of 120 Effective March 1, 202<del>23</del> (unless otherwise noted herein) and scanned into the Provide® Enterprise Miami data management system, or rideshare logs where applicable, will be reviewed.

The following billing codes shall be used:

### • TRANSPORTATION VOUCHERS FOR PUBLIC TRANSIT (DISCOUNTED EASY TICKETS)

- Service Name = "EASY Ticket Monthly Pass" with Service Code = "EASYM"
  - A maximum of one (1) may be distributed per client per service month; no exception. Lost, stolen or damaged tickets are not replaceable.
- Service Name = "EASY Ticket Weekly Pass" with Service Code = "EASYW"
  - A maximum of three (3) weekly tickets may be distributed per client per service month. If another week is/was needed, a monthly pass should be used.
- Service Name = "EASY Ticket Daily Pass" with Service Code = "EASYD"
  - A maximum of four (4) daily tickets may be distributed per client per service month. If more days are/were needed, a weekly or monthly pass should be used.

### • **RIDE-SHARE:**

- Service Name "Uber/Lyft Ride" with Service Code = "RIDE"
  - Uber/Lyft Ride Home to Provider
  - Uber/Lyft Ride Provider to Home
  - Uber/Lyft Ride Provider to Provider

### **IMPORTANT NOTES**:

• In the Provide® Enterprise Miami data management system, a pop-up warning will appear if two of the same ride types are entered for the same day for a given client. The warning will suggest the user document the reason for the potential "duplicate" service in the Comments field to prevent the County from rejecting the service in the monthly payment request.

- Medical case management (MCM) staff cannot use MCM encounter billing codes for time spent scheduling ride-share (e.g., Uber, UberHealth, Lyft, etc.) trips for a client with the ride-share transportation company. This activity is part of the dispensing fee allowable under the Medical Transportation service category if line items other than purchasing ride-share trips are included in the Medical Transportation budget.
- C. Additional Rules for Reporting: Providers must report monthly activity according to the type and dollar amount of the tickets issued, the number of tickets distributed, date of distribution per client, and the unduplicated number of clients served; or number of one-way ride share trips per client, where applicable. As stated above in Medical Transportation section A above, a reconciliation data system match will be conducted of all clients receiving discounted EASY Tickets through the Ryan White Part A Program. This reconciliation review will be conducted by the County's authorized Ryan White Program Recipient (OMB) and DTPW staff.
- D. Special Client Eligibility Criteria: A Ryan White Program In Network Service Referral or an Out of Network Referral/Non-Certified Referral (accompanied by all appropriate supporting documentation) is required for this service and must be updated every 366 dayssix (6) months. Clients receiving Ryan White Part A Program-funded Medical Transportation assistance must be documented as having gross household incomes below 400% of the 2022 Federal Poverty Level (FPL). Clients receiving discounted EASY Tickets (transportation vouchers) must be documented as having been properly screened for other public sector funding as appropriate every six (6) months. While clients qualify for and can access other public funding [including, but not limited to, Medicaid, Medicaid Managed Medical Assistance (MMA), or Medicaid Long-term Care (LTC) transportation services; or the County's Golden Passport program, Mobility EASY card program or Community-Reduced Fare program etc.) for transportation services], they will not be eligible for Ryan White Part A Program-funded Medical Transportation (discounted EASY Tickets or limited ride-share) assistance. (NOTE: The recertification period for ADAP and Part A is expected to be updated within this grant fiscal year, with no less than 30 calendar days' notice.)

Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 202<u>23</u> (Year 32) Service Delivery Manual Section I, Page 70 of 120 Effective March 1, 202<u>23</u> (unless otherwise noted herein)



10:00 a.m. - 12:00 p.m.

Miami-Dade County Main Library 101 West Flagler Street, Auditorium Miami, FL 33130

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### MENTAL HEALTH SERVICES

### (Year <u>32-33</u> Service Priorities: <u>#3-9</u> for Part A and <u>#3-4</u> for MAI)

**Mental Health Services** are core medical services. These Mental Health Services include the provision of outpatient psychological and psychiatric screening, assessment, diagnosis, treatment, and counseling services offered to people with HIV. Services are based on a treatment plan, conducted in an outpatient group or individual session, and provided by a mental health professional licensed or authorized within the State of Florida to render such services. Such professionals typically include psychiatrists, psychologists, and licensed clinical social workers (see below for additional allowable professions under the local Ryan White Part A Program). *Note: Following Florida Department of Children and Families (DCF) terminology, clients are now referred to as individuals served.* 

Mental Health Services require a treatment plan, as noted above. Treatment plans require an assessment and diagnosis which shall be used to inform the treatment goals and objectives and clinical interventions. Mental health providers may use this service category to conduct the assessment and diagnostic steps for the development of a treatment plan. If ongoing mental health services are being provided to a client, it is expected that the client has a mental health treatment plan in place.

Psychiatric treatment that is part of a medical visit or a medication management and evaluation process must be recorded and billed under Outpatient/Ambulatory Health Services.

Mental Health Services are allowable only for program-eligible individuals served (clients). This service is not available to non-HIV family members. Ryan White Program funds may **not** be used for bereavement support for uninfected family members or friends.

Mental Health Services reimbursed under Part A or MAI of the Ryan White Program are limited to conditions impacting the treatment of the client's underlying HIV disease (i.e., assessing, diagnosing, and treating a mental health condition that hinders HIV treatment adherence) and treated within the context of the client's HIV or AIDS diagnosis. This service is intended to address HIV-related issues and strengthen coping skills to increase adherence and access to ongoing medical care and treatment. It is important for the Level I or Level II mental health professional to regularly gauge the client's progress and determine if the client is still in need of the service.

Mental Health Services (Level I): This level includes *intensive* mental health therapy and counseling (individual, family, and group) provided solely by *state-licensed mental health professionals*. Direct service providers would possess *a Doctorate degree* in psychology or counseling or related field (PhD, EdD, PsyD), and must be *licensed by the State of Florida* as a Licensed Clinical Psychologist, LCSW, LMHC, or LMFT to provide such services.

Mental Health Services (Level II): This level includes *intensive* mental health therapy and counseling (individual, family, and group) provided solely by *state-licensed mental health professionals*. Direct service providers would possess *a Master's degree* in psychology, psychotherapy or counseling or related field (MS, MA, MSW, or M.Ed.), and must be *licensed by the State of Florida* as a LCSW, LMHC or LMFT to provide such services. Direct service providers may also be: 1) Florida registered interns as defined by Florida Statute (F.S.) 491.0045 (Clinical Social Work Intern, Mental Health Counselor Intern, or Marriage and Family Therapy Intern), or 2) a Psychology Intern, Postdoctoral Resident, or Fellow satisfying Rule 64B19-11.005 of the Florida Administrative Code (F.A.C.). Such interns will provide services under the supervision of a licensed State of Florida LCSW, LMHC, LMFT or Licensed Psychologist to provide such services.

### Mental Health Service Components:

**Level I counseling services** include psychosocial assessment and evaluation, testing, diagnosis, treatment planning with written goals, crisis counseling, periodic reassessments, re-evaluations of plans and goals documenting progress, and referrals to psychiatric and/or other services as appropriate. Issues of relevance to HIV/AIDS clients such as risk behavior, substance abuse, adherence to medical treatments, depression, panic, anxiety, maladaptive coping, safer sex, and suicidal ideation will be addressed. Mental health professionals are encouraged to practice and introduce motivational interviewing and harm reduction strategies to their clients, if deemed clinically appropriate. Services at this level are provided for clients experiencing acute, sporadic mental health problems and are generally not long term [individual counseling shall not exceed 32 encounters per Fiscal Year and five (5) units (maximum of 2  $\frac{1}{2}$  hours) per session; 1 encounter = 1 day of service].

Level II counseling services include crisis counseling, re-evaluations of plans and goals documenting progress, and referrals to psychiatric and/or other services as appropriate. Issues of relevance to HIV/AIDS clients such as risk behavior, substance abuse, adherence to medical treatments, depression, panic, anxiety, maladaptive coping, safer sex, and suicidal ideation will be addressed. Mental health professionals are encouraged to practice and introduce motivational interviewing and harm reduction strategies to their clients, if deemed clinically appropriate. Services at this level are provided for clients experiencing acute, sporadic mental health problems and are generally not long term [individual counseling shall not exceed 32 encounters per Fiscal Year and five (5) units (maximum of  $2\frac{1}{2}$  hours) per session; 1 encounter = 1 day of service].

**Group Counseling (Levels I and II)** refers to a group of individuals [minimum of three (3) Ryan White Program clients, maximum of fifteen (15) total clients] with similar problems meeting under the expert guidance of a trained mental health professional. Members of the group will be selected by the mental health professional in order to maximize the interaction, learning, and benefits derived from a group dynamic. Group counseling provides therapy in a social context, reduces the feeling of isolation many

clients experience, provides an opportunity for clients to share methods of problemsolving, and allows the therapist an opportunity to observe how an individual interacts with others.

A. **Program Operation Requirements:** Staff must demonstrate knowledge of HIV disease, its psychosocial dynamics and implications, including cognitive impairment, and generally accepted treatment modalities and practices. Services may be delivered to non-HIV+ family members (as defined by the client) only if the program-eligible client is also being served. Providers will comply with super-confidentiality laws as per State of Florida's guidelines. The ratio of group counseling participants to counselors may not be lower than 3:1 and may not be higher than 15:1, as described above. One visit is equal to one half-hour counseling session.

Clients who are newly diagnosed with HIV or have returned to care should be offered the opportunity to speak with a mental health provider as a routine component of the services available through the local Ryan White Part A Program. An initial mental health visit could be used to identify, assesses, or verify mental health conditions that affect client's may а treatment adherence. Subsequent or on-going Mental Health Services under the Ryan White Part A Program require a mental health diagnosis documented in the client's chart. To facilitate this process for newly diagnosed or returned to care clients who are TTRA mental health services are limited to one encounter (all mental health services provided on one day) within 30 days of starting the TTRA protocol, while program eligibility is being determined. For clients following the Newly Identified Client (NIC) protocol, Mental Health Services may be provided with these same limitations.

**Tele-mental health services** are also available. Please see Section XVI, Additional Policies and Procedures, of this Service Delivery Manual for more details.

- **B.** Additional Service Delivery Standards: Level I and Level II providers must adhere to generally accepted clinical guidelines for psychological treatment of persons with HIV/AIDS-related illnesses. (Please refer to Section III of this FY 20223 Service Delivery Manual for details, as may be amended.)
- C. Rules for Reimbursement: Reimbursement for individual and group Mental Health Services will be based on a half-hour counseling session not to exceed \$32.50 per unit for Level I individual counseling; \$35.00 per unit for Level I group counseling; \$32.50 per unit for Level II individual counseling; and \$35.00 per unit for Level II group counseling. Reimbursement for individual counseling units are calculated for each client receiving the therapy (i.e., number of individual counseling units are calculated for the counselor that provided the group counseling (i.e., number of group counseling units per counseling).

Tele-mental health services are reimbursed as follows:

Billing	Description	Flat rate
Code		Reimbursement
THMHT1	Tele-Mental Health provided by a Level I provider (individual client only)	\$32.50 per 30-minute session
THMHT2	Tele-Mental Health provided by a Level II provider (individual client only)	\$32.50 per 30-minute session

- **D.** Additional Rules for Reporting: The unit of service for reporting monthly activity of individual and group Mental Health Services is a one-half-hour counseling session and the unduplicated number of clients served. Providers will report individual and group activity separately for Level I and Level II Mental Health Services.
- E. Additional Rules for Documentation: Providers must also maintain certifications and licensure documents of the mental health professionals providing services to Ryan White Program clients and must make these documents available to OMB staff or authorized persons upon request. Client charts **must** include a detailed treatment plan for each eligible client that includes required components and the mental health professional's signature.
- **F.** Additional Treatment Guidelines and Standards: Providers of Mental Health Services (Levels I and II) will adhere to generally accepted clinical guidelines for mental health therapy/counseling of people with HIV. The following are examples of such guidelines:
  - American Psychiatric Association (APA). HIV Psychiatry Training and Education, as well as HIV Psychiatry Resources and Publications [e.g., Fact Sheets: HIV and Clinical Depression; HIV and Anxiety; HIV and Cognitive Disorders; HIV and Delirium; HIV and Substance Use; HIV and People with Severe Mental Illness (SMI); Sleep Disorders and HIV; and Pain in HIV/AIDS; Publications (including links to other related books and journals, such as the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition - DSM-5); and additional web materials.

Available at:

https://www.psychiatry.org/psychiatrists/practice/professional-interests/hivpsychiatry and https://www.psychiatry.org/psychiatrists/search-directories-databases Accessed 6/20/2022.

Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 202<u>23</u> (Year 3<u>23</u>) Service Delivery Manual Section I, Page 74 of 120 Effective March 1, 202<del>23</del> (unless otherwise noted herein) • American Psychiatric Association. Latest Published and Legacy APA Clinical Practice Guidelines; including, but not limited to, The American Psychiatric Association Practice Guidelines for the Psychiatric Evaluation of Adults, Third Edition, 2015.

Available at:

https://www.psychiatry.org/psychiatrists/practice/clinical-practice-guidelines and <u>https://psychiatryonline.org/guidelines</u> Accessed 6/20/2022.

Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 202<del>23</del> (Year 3<del>23</del>) Service Delivery Manual Section I, Page 75 of 120 Effective March 1, 202<del>23</del> (unless otherwise noted herein)



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### OTHER PROFESSIONAL SERVICES: LEGAL SERVICES AND PERMANENCY PLANNING

(Year 32-33 Service Priority: #13for-15 for Part A-

**Other Professional Services (Legal Services and Permanency Planning)** are support services. Other Professional Services allow for the provision of professional and consultant services rendered by members of particular professions licensed and/or qualified to offer such services by local governing authorities. Locally, this service category is limited to the provision of Legal Services and Permanency Planning to people with HIV or AIDS who would not otherwise have access to these services, with the goal of maintaining clients in health care. Legal Services are available to eligible individuals with respect to powers of attorney, do-not-resuscitate orders, and interventions necessary to ensure access to eligible benefits, including discrimination or breach of confidentiality litigation as it relates to services eligible for funding under the Ryan White Program, especially but not limited to assistance with access to benefits and health care-related services.

A. **Program Operation Requirements:** Funds may be used to support and complement pro bono activities.

Funds may also be used to support program-allowable services (e.g., legal assistance, filing fees, and fingerprinting fees, etc. to support legal name and identity changes) for gender affirming care. This support for gender affirming care aims to facilitate access to benefit programs and services for which a client may be eligible. This gender affirming care support may be included in one or more of the service areas listed below.

All legal assistance under Ryan White Part A Program funding will be provided under the supervision of an attorney licensed by the Florida Bar Association. Only civil cases are covered under this Agreement. Therefore, the service provider will assist eligible Ryan White Program clients with civil legal HIV-related issues which will benefit the overall health of the client and/or the Ryan White Program care delivery system in the following service areas:

- Collections/Finance issues related to unfair or illegal actions by collection agencies related to health care debt (e.g., bankruptcy due to health care debt).
- Employment Discrimination Services issues related to discrimination while at work, unfair terminations, unfair promotion policies, or hostile work environment as related to HIV diagnosis or status.

- Health Care Related Services issues related to ensuring that the client is treated in a fair manner, and issues relating to breach of confidentiality by divulging HIV status or other confidential medical/income information without client consent.
- Health Insurance Services issues related to seeking, maintaining, and purchasing of private health insurance.
- Government Benefit Services issues related to obtaining or retaining public benefits which the client has been denied and is eligible to receive, including but not limited to Social Security Disability and Supplemental Income Services (SSDI and SSI) benefits, Unemployment Compensation, as well as welfare appeals, and similar public/government services.
- Rights of the Recently Incarcerated Services issues related to a client's right to access and receive medical treatment upon release from a correctional institution.
- Adoption/Guardianship Services issues relating to preparation for custody options for legal dependents including standby guardianship, joint custody, or adoption.
- Permanency Planning this component helps clients/families make decisions about the placement and care of minor children after their parents/caregivers are deceased or are no longer able to care for them, including: the provision of social service counseling or legal counsel regarding the drafting of wills or delegating powers of attorney. This sub-component includes preparation of advance directives, healthcare power of attorney, durable powers of attorney, and living wills.

## **IMPORTANT NOTES:**

- Adoption/Guardianship is related to Permanency Planning under HRSA Policy Clarification Notice #16-02; however, for local tracking purposes, it has been identified as a separate billable component.
- Adoption/Guardianship and Permanency Planning activities do not include any legal services that arrange for guardianship or adoption of children after the death of their normal caregiver. Proper planning must occur prior to the death of the client (i.e., parent/guardian).
- HRSA's Program Letter titled "Gender-Affirming Care in the Ryan White HIV/AIS Program," dated December 16, 2021 (<u>https://ryanwhite.hrsa.gov/grants/program-letters</u>), addresses the importance of and allowable uses of funds to support gender-affirming care.

Providers should demonstrate experience in providing similar services and the ability to meet the multi-lingual needs of the HIV/AIDS community.

- **B. Rules for Reimbursement:** The unit of reimbursement for this service is *one hour* (*or fraction thereof*) of legal consultation and/or advocacy provided by an attorney or paralegal at a rate not to exceed \$90.00 per hour. Gender affirming care support does not have a separate billing code, as it is a component in one or more of the service areas listed in Section A, directly above.
- C. Additional Rules for Reporting: Monthly activity reporting for this service will be on the basis of *one hour of legal consultation and/or advocacy* provided by an attorney or paralegal. Legal Services and Permanency Planning providers must submit an annual written assurance that: 1) Ryan White Program funds are being used only for Legal Services and Permanency Planning directly necessitated by an individual's HIV status; 2) Ryan White Program funds are not used for any criminal defense or for class action suits unrelated to access to services eligible for Ryan White Program funding; and 3) the Ryan White Program was used as the payer of last resort.
- D. Special Client Eligibility Criteria: A Ryan White Program In Network Service Referral or an Out of Network Referral/Non-Certified Referral (accompanied by all appropriate supporting documentation) is required for this service and must be updated annually. Providers must also document that program-eligible people with HIV (clients) receiving Ryan White Part A Program-funded Other Professional Services (Legal Services and Permanency Planning) are permanent residents of Miami-Dade County and have gross household incomes that do not exceed 400% of the 2022<u>3</u> Federal Poverty Level (FPL).
- E. Additional Rules for Documentation: Client charts must include a description of how the Legal Service or Permanency Planning services are necessitated by the individual's HIV status, the provision of services, client eligibility (Ryan White Program In Network Referral or Out of Network Referral with supporting documentation), and the hours spent in the provision of such services.



10:00 a.m. - 12:00 p.m.

Miami-Dade County Main Library 101 West Flagler Street, Auditorium Miami, FL 33130

#### AGENDA

I.	Call to Order	Dr. Diego Shmuels
II.	Meeting Housekeeping and Rules	Marlen Meizoso
III.	Introductions	All
IV.	Floor Open to the Public	Dr. Diego Shmuels
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of September 1, 2022	All
VII.	Reports	
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	Medical Care Subcommittee Report	Marlen Meizoso
VIII.	Standing Business	
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XII.	Adjournment	Dr. Diego Shmuels

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership's Care and Treatment Committee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

#### SUBSTANCE ABUSE OUTPATIENT CARE AND SUBSTANCE ABUSE SERVICES (RESIDENTIAL)

(Year 323 Service Priorities: #9-12 for outpatient Part A and #4-8 for MAI; and #7-10 for Part A residential only)

Note: Following Florida Department of Children and Families (DCF) terminology, clients are now referred to as individuals served.

<u>Two</u> types of substance abuse counseling and treatment services are included in this section: Outpatient and Residential. **Substance Abuse Outpatient Care** is a core medical service. **Substance Abuse Services (Residential)** is a support service. Both of these substance abuse service components shall comply with the following requirements:

**A. Program Operation Requirements:** Providers are encouraged to provide services that are highly accessible to target populations.

Providers are also encouraged to demonstrate linkages with other service providers relevant to the needs of people with HIV in substance abuse treatment programs. Providers should especially demonstrate linkages with other services relevant to the needs of people in substance abuse treatment programs including housing and shelter programs.

Service must be provided in settings that foster the client's sense of self-determination, dignity, responsibility for own actions, relief of anxiety, and peer support.

Providers are encouraged to offer program services to families to support the family unit. However, substance abuse services may be provided to members of a client's family <u>in an outpatient setting only (i.e., non-HIV family members may not stay in</u> <u>the residential facility)</u>, and only <u>if</u> the program-eligible individual served (client) is also being served. A family member's participation in the substance abuse counseling sessions is included in the per day cost charged to the Ryan White Program (See Section II.A. of this service definition on the following page for details). **IMPORTANT NOTE**: For the purpose of this service, family members are defined as those individuals living in the same household as the client.

Individual treatment plans must be documented in the client's chart and linked to the provision of primary medical care.

Providers must ensure that clients adhere to their treatment plan, including prescription drug regimens.

Providers of substance abuse services must offer flexible schedules that accommodate the client's nutritional needs in order to facilitate client compliance with medication regimens.

Providers are encouraged to practice and incorporate motivational interviewing and harm reduction strategies to their clients, if deemed clinically appropriate.

A residential substance abuse episode is not a pre-requisite to access Substance Abuse Outpatient Care. However, clients stepping down from or completing Substance Abuse Services (Residential) are encouraged to transition to Substance Abuse Outpatient Care. Furthermore, providers shall attempt a warm hand off to Substance Abuse Outpatient Care, where appropriate.,

#### I. <u>Substance Abuse Outpatient Care</u>

**Substance Abuse Outpatient Care** is the provision of outpatient services for the treatment of drug or alcohol use disorders. This service includes medical or other treatment and/or counseling to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in an outpatient setting by a Physician or under the supervision of a Physician, or by other qualified personnel as indicated below. This program provides regular, ongoing substance abuse monitoring and counseling on an individual and/or group basis in a state-licensed outpatient setting.

Services include screening, assessment, diagnosis and/or treatment of substance use disorder. Allowable substance use disorder treatments include: pre-treatment/ recovery readiness programs; harm reduction; behavioral health counseling associated with substance use disorders; outpatient drug-free treatment and counseling; medication assisted therapy; psychopharmaceutical interventions; substance abuse education; and relapse prevention. Services may also include mental health counseling to reduce depression, anxiety and other disorders associated with substance abuse; conflict resolution; anger management; and relapse prevention. All clients receiving this service must have a Diagnostic and Statistical Manual of Mental Disorders (DSM-5) diagnosis of substance use disorder.

Acupuncture therapy may be allowable under this service category only when, as part of a substance use disorder treatment program funded under the Ryan White HIV/AIDS Program, it is included in a documented plan. Acupuncture therapy must be provided by an acupuncturist who is licensed in the State of Florida to provide such service.

Providers of this service must specify the maximum number of clients expected to be enrolled in a group counseling session. The minimum amount of group participants is three (3) Ryan White Program clients per group and should be no higher than fifteen (15) total persons per group. The ratio of group counseling participants to Counselors should be no lower than 3:1 and no higher than 15:1. One unit is equal to one half-hour counseling session.

Substance Abuse Outpatient Care levels are specific to the education level of the provider of the service, as indicated below, and are not interchangeable:

- Substance Abuse Outpatient Care (Level I) Professional Substance Abuse Counseling. Level I services include general and intensive substance abuse therapy and counseling (individual, family, and group) provided by trained mental health or certified addiction professionals. Activities include forming or strengthening support groups, development of understanding of treatment options, holistic or alternative therapies (meditation, visualization, stress reduction, etc.), and other areas appropriate for individual and group socio-emotional support. Direct service providers for Level I must possess at least a *doctorate or postgraduate degree* (PhD or Master's degree) in the appropriate counseling-related field, and preferably be licensed as a *certified addiction professional* (CAP), Licensed Clinical Psychologist, LCSW, LMHC, or LMFT to provide such services.
- Substance Abuse Outpatient Care (Level II) Counseling and Support Services. Level II services include supportive and crisis substance abuse counseling by trained and supervised Counselors (who may possess Bachelor's degrees or have related experience, and may not be licensed), peers, and facilitators. Activities include forming or strengthening support groups, development of understanding of treatment options, holistic or alternative therapies (meditation, visualization, stress reduction, etc.), and other areas appropriate for individual and group socio-emotional support. Non-certified personnel providing this Level II service will be supervised by professionals with appropriate Level I substance abuse counseling credentials.
- **Tele-substance abuse outpatient care services** are also available. Please see Section XVI, Additional Policies and Procedures, of this Service Delivery Manual for more details.
- **B.** Additional Service Delivery Standards: Providers of these services will also be required to adhere to generally accepted clinical guidelines for substance abuse treatment of persons with HIV/AIDS. (Please refer to Section III of this FY 2022 2023 Service Delivery Manual for details, as may be amended.)
- C. Rules for Reimbursement: Reimbursement for individual and group Substance Abuse Outpatient Care will be based on half-hour counseling sessions (i.e., 1 unit) not to exceed \$30.00 per unit for Level I individual counseling; \$34.00 per unit for Level I group counseling; \$27.00 per unit for Level II individual counseling; and

\$30.00 per unit for Level II group counseling. Reimbursement for individual sessions is calculated for each client and/or family member(s) receiving the counseling, whereas, reimbursement for group sessions is calculated for the Counselor that provided the group counseling. Documentation activities are included in the Substance Abuse Outpatient Care unit of service and are not to be billed as a separate encounter. Substance Abuse Outpatient Care may be provided to members of a client's family in an outpatient setting if the program-eligible person with HIV (client) is also being served. The client must be currently receiving such services; and preferably, but not necessarily, the family member may be served on the same day as the client.

Tele-substance abuse outpatient care services are reimbursed as follows:

New	Description	Flat rate
Code		Reimbursement
THSAC1	Tele-Substance Abuse Outpatient Care provided by a Level I provider (individual client only)	\$30.00 per 30-minute session
THSAC2	Tele-Substance Abuse Outpatient Care provided by a Level II provider (individual client only)	\$27.00 per 30-minute session

- **D.** Additional Rules for Reporting: The unit of service for reporting monthly activity of individual and group counseling is a *one half-hour counseling session* provided to the client and the number of unduplicated clients served. Providers must also report, on a monthly basis, the number of group counseling units provided by each Counselor.
- E. Linkage/Referrals: Providers of Substance Abuse Outpatient Care must document the client's progress through the treatment program, maintain linkages with one or more residential facilities, appropriate community services, including 12-step programs, and be able to refer or place clients in a residential program, in collaboration with the client, Medical Case Manager, and Primary Care Physician when that is found to be appropriate. Providers are required to determine if the client is currently receiving Medical Case Management services; if not, the provider must seek enrollment of the client in a Medical Case Management program of the client's choice while the client is still receiving substance abuse treatment/counseling. A linkage agreement with the Medical Case Management provider must be established in order to ensure coordination of services while the client remains in treatment.

**IMPORTANT NOTE**: referrals from residential substance abuse services to outpatient counseling facilities should only occur when there is a need for HIV specific counseling not offered by the residential facility, or once the client has completed or left their residential treatment program.

Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 202<del>23</del> (Year 3<u>3</u>2) Service Delivery Manual Section I, Page 115 of 120 Effective March 1, 202<u>23</u> (unless otherwise noted herein) F. Additional Rules for Documentation: Providers must submit an assurance to OMB that Substance Abuse Outpatient Care services are only provided in an outpatient setting. Providers must maintain professional certifications and licensure documents as required by the State of Florida for staff providing residential substance abuse treatment services to Ryan White Program clients and must make these documents available to OMB staff or authorized persons upon request. Providers must also submit to OMB a copy of the staffing structure showing supervision by a Physician or other qualified personnel. Providers must also maintain client charts that include treatment plans with all required elements, including but not limited to measurable goals and timelines for completion. Documentation in the client chart must also clearly indicate that services were provided as allowable under the local Ryan White Program service definition, and include the quantity, frequency and modality of treatment services, the date treatment begins and ends, regular monitoring and assessment of client progress, and a signature of the individual providing the service or the supervisor as applicable. If acupuncture services were provided, a copy of the written referral from the primary health care provider must be in the client chart.

#### II. <u>Substance Abuse Services (Residential)</u>

This program offers substance abuse, including alcohol addiction and/or addiction to legal and illegal drugs, treatment and counseling, including HIV specific counseling, to program-eligible people with HIV (clients) on a short-term basis. Medication-Assisted Treatment (MAT) is also covered as part of the residential treatment services. **Substance Abuse Services (Residential)** provides room and board, in a secure, drug-free, state-licensed residential (non-hospital) substance abuse treatment facility, and, when necessary, detoxification. Detoxification services are allowable, if offered in a separate licensed residential setting (including a separately-licensed detoxification facility within the walls of an inpatient medical or psychiatric hospital). HRSA RWHAP funds may <u>not</u> be used for inpatient detoxification in a hospital setting unless the detoxification facility has a separate license. Proof of the separate license is required for detoxification services.

In accordance with HRSA Policy Clarification Notice #16-02, Substance Abuse Services (Residential), as part of a substance use disorder treatment program funded under the Ryan White HIV/AIDS Program, are permitted **only** when the client has received a written referral from a clinical provider. In Miami-Dade County's Ryan White Part A/MAI Program, this requirement shall be met if the client is accessing the service based on a Ryan White Program In Network <u>Service</u> Referral or Out of Network Referral/<u>Non-Certified Referral</u> as a result of a comprehensive health assessment conducted by a Medical Case Manager or other case manager or in response to a court-ordered directive to a residential treatment program. Upon arrival at the residential treatment center and PRIOR TO final enrollment in the treatment program, an assessment MUST be conducted by the residential clinical staff (e.g., Medical Director, Psychologist, Licensed Therapist, etc.) as appropriate using the Diagnostic and Statistical Manual

Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 202<del>23</del> (Year 3<u>3</u>2) Service Delivery Manual

Section I, Page 116 of 120 Effective March 1, 202<u>23</u> (unless otherwise noted herein) of Mental Disorders (DSM-5) assessment tool (e.g., ASAM Criteria®, a Level of Care determination tool) for diagnosis of a substance use disorder. Services will then be provided by or under the supervision of a Physician or by other qualified personnel with appropriate and valid licensure and certification as required by the State of Florida.

If the client is participating in a residential treatment program, the client's family member may visit the facility and participate in the counseling sessions, but the family member may not physically live in the residential facility with the client during the treatment process. As a reminder, a family member's participation in the substance abuse counseling sessions is included in the per day cost charged to the Ryan White Program (See Section II.B. of this service definition on the following page for details).

#### **Residential treatment programs shall comply with the following requirements:**

B. Rules for Reimbursement: The unit of service for reimbursement of Substance Abuse Services (Residential) is a *client-day* of care up to a maximum amount of \$25+0.00 per day. The final, maximum rate is negotiated between the County's Office of Management and Budget-Grants Coordination division and each funded subrecipient. Under normal circumstances clients may not be enrolled in any Ryan White Program-funded Substance Abuse Services (Residential) program for longer than  $\frac{120-180}{120-180}$  calendar days within a twelve-month period. Twelve months begins on the very first day of a client's residential treatment and restarts every 12 months based on that original start date for Ryan White Program-funded residential substance abuse treatment services. No exceptions, unless approved by the Miami-Dade County Office of Management and Budget for extreme circumstances (e.g., public health emergencies such as COVID-19 or extreme weather events such as hurricanes). Effective September 1, 2022, the temporary policy allowing more than 120 bed days of residential substance abuse treatment services due to a COVID-19 related issue will come to an end. Override requests may be considered on a case-by-case basis and would be approved or denied at the discretion of Miami-Dade County Office of Management and Budget-Grants Coordination/Ryan White Program (OMB-GC/RWP) management. Please contact the OMB-GC/RWP office for pre-approval prior to extending residential care past the 1280-day cap. The length of stay for existing clients will be closely monitored by the County's OMB/Ryan White Program.

Residential substance abuse treatment providers are strongly encouraged to check the Provide® Enterprise Miami data management system order to determine how many days of residential treatment service have already been billed for the client, and how many days are remaining in the client's <u>120180</u>-day/12-month period. In addition, providers should call or email the client's previous Substance Abuse Services (Residential) provider, if applicable, to inquire if any services are pending

to be entered or compiled in the Provide® Enterprise Miami data management system. This will affect the actual number of available days versus those that appear in the Provide® Enterprise Miami data management system.

- C. Additional Rules for Reporting: Monthly activity reporting (i.e., reimbursement requests) for Substance Abuse Services (Residential) is per *client-day* of care and number of unduplicated clients served. Providers will indicate in the Provide® Enterprise Miami data management system the client's disposition after Substance Abuse Services (Residential) has ended (e.g., treatment completed, client referred to outpatient substance abuse counseling, client withdrew from treatment, etc.). This process is facilitated by the review and managing of the "RSA Disenrollment Report" available in the Provide® Enterprise Miami data management system. Service providers are required to print this report on a monthly basis and disenroll clients who are no longer in active care. Once all residential treatment disenrollments for the month are completed, a final "RSA Disenrollment Report" must be printed and uploaded along with the monthly reimbursement request that is uploaded in the Provide® Enterprise Miami data management system.
- D. Linkage/Referrals: Providers of Substance Abuse Services (Residential) must document the client's progress through the treatment program, maintain linkages with one or more outpatient facilities and appropriate community services, including 12-step programs, and be able to refer or place clients in an outpatient program, in collaboration with the client, Medical Case Manager, and the Primary Care Physician when that is found to be appropriate. Providers are required to determine if the client is currently receiving Medical Case Management services; if not, the provider must seek enrollment of the client in a Medical Case Management program of the client's choice while the client is still receiving substance abuse treatment/counseling. A linkage agreement with the Medical Case Management provider must be established in order to ensure coordination of services while the client remains in treatment. A client's Ryan White Programfunded Medical Case Manager will receive an automated "pop-up" notification through the Provide® Enterprise Miami data management system upon the client's discontinuance or release from, completion of, and/or relapse in residential substance abuse treatment.

**IMPORTANT NOTE**: referrals from residential substance abuse services to outpatient counseling facilities should only occur when there is a need for HIV specific counseling not offered by the residential facility, or once the client has completed or left their residential treatment program.

E. Special Client Eligibility Criteria: A Ryan White Program In Network <u>Service</u> Referral or an Out of Network Referral/<u>Non-Certified Referral</u> (accompanied by all appropriate supporting documentation) is required for this service. Clients receiving Ryan White Program Part A or MAI-funded Substance Abuse Services (Residential) must be

Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 202<u>23</u> (Year 3<u>3</u>2) Service Delivery Manual Section I, Page 119 of 120 Effective March 1, 202<u>23</u> (unless otherwise noted herein) documented as having gross household incomes below 400% of the 2022-2023 Federal Poverty Level (FPL).

F. Additional Rules for Documentation: Providers must also maintain professional certifications and licensure documents as required by the State of Florida for staff providing residential substance abuse treatment services to Ryan White Program clients and must make these documents available to OMB staff or authorized persons upon request. Providers must submit to OMB a copy of the staffing structure showing supervision by a Physician or other qualified personnel, and an assurance that all services are provided in a short-term residential setting. Providers must also maintain client charts that include individual treatment plans with all required elements and document that services were provided as allowable under the Ryan White Program service definition, the quantity, frequency and modality of treatment services, the date treatment begins and ends, regular monitoring and assessment of client progress, and a signature of the individual providing the service or the supervisor as applicable. If acupuncture services were provided, a copy of the written referral from the primary health care provider must be in the client chart.

### III. Additional Standards and Guidelines

**Guidelines:** Outpatient and residential substance abuse treatment and counseling providers will adhere to generally accepted clinical guidelines for substance abuse treatment of people with HIV. The following are examples of such guidelines:

- American Society of Addiction Medicine. *The ASAM Principles of Addiction Medicine*, Sixth Edition; November 2, 2018. Available at: <u>https://www.asam.org/publications-resources/textbooks</u> Accessed 6/20/2022.
- American Society of Addiction Medicine (ASAM). The ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions. Third Edition. Available at: <u>https://www.asam.org/publications-resources/textbooks</u> Accessed 6/20/2022. (Note: the Fourth Edition is currently in development.)
- American Society of Addiction Medicine. Current and archived public policy statements related to the treatment of substance use disorder. Available at: <u>https://www.asam.org/advocacy/public-policy-statements</u> Accessed 6/20/2022.
- Rules governing the treatment of physically drug dependent newborns, substance exposed children, and/or children adversely affected by alcohol and the families of these children that are consistent with the administrative regulations promulgated in Chapter 65 of the Florida Administrative Code by the State of Florida Department of Children and Family Services, as may be amended.

- Rules governing the provision of substance abuse treatment services consistent with the regulations promulgated by the State of Florida's Alcohol Prevention and Treatment (APT) and Drug Abuse Treatment and Prevention (DATAP) programs, as may be amended.
- Rules governing the provision of residential and outpatient substance abuse treatment services with regards to licensure and regulatory standards that are consistent with the administrative regulations promulgated in Chapter 65D-30, Substance Abuse Services Office, of the Florida Administrative Code under the State of Florida Department of Children and Families, as may be amended.

Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program FY 202<del>23</del> (Year 3<u>3</u>2) Service Delivery Manual Section I, Page 122 of 120 Effective March 1, 202<u>23</u> (unless otherwise noted herein)



10:00 a.m. - 12:00 p.m.

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VI.	Review/Approve Minutes of September 1, 2022	All
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XII.	Adjournment	Dr. Diego Shmuels

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership's Care and Treatment Committee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

## 2023 Meeting Dates

All Dates/Locations are subject to change

# **Care and Treatment Committee**

10:00 a.m. to 12:00 p.m.

Miami-Dade County Main Library

101 West Flagler Street, Auditorium

Miami, FL 33130

January	12*	2023
February	2	2023
March	2	2023
April	6	2023
May	4	2023
June	1	2023
July	13*	2023
July August	13* 3	2023 2023
•	-	
August	3	2023
August September	3 7	2023 2023

Needs Assessment: May 2022-August 2023 (3 hour meetings) \*dates shifted because of holiday

#### Care and Treatment Committee Calendar of Activities 2023

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Month						Notes
January						
February						
March						
April						
May						
June						
July						
August						
September						
October						
November						
December						

#### **Comments:**

N= no meeting



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	• YR 2022 Sweeps/Reallocation #3	All
	Maximize Expenditures Prior to Fiscal Year Closure	All
	• Service Descriptions- Medical Transportation, Mental Health,	
	Other Professional: Legal Services and Substance Abuse	All
	• 2023 Meeting Dates and Work Plan Development	Marlen Meizoso
X.	Announcements	Marlen Meizoso
XI.	Next Meeting: December 1, 2022 at Main Library- Auditorium	Dr. Diego Shmuels
XII.	Adjournment	Dr. Diego Shmuels

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership's Care and Treatment Committee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com