



**Care and Treatment
Thursday, September 1, 2022**

10:00 a.m. – 1:00 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	Frederick Downs, Jr.
III.	Introductions	All
IV.	Floor Open to the Public	Dr. Diego Shmuels
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of August 4, 2022	All
VII.	Reports	
	• Part A	Dan Wall
	• Vacancies	Marlen Meizoso
VIII.	Standing Business	
	• None	
IX.	New Business	
	• Ryan White Program FY 2021 Co-occurring Conditions	Dr. Robert Ladner
	• Community Input: Results from Integrated Plan and HIV and Aging Topics	Christina Bontempo/ Marlen Meizoso
	• Unmet Need/ Service Gaps	Dr. Robert Ladner
	• Summary to Date and Next Steps	Marlen Meizoso
	• Special Directives	All
	• Priority Setting	All
	• Resource Allocations (flat and application)	All
X.	Announcements	Marlen Meizoso
XI.	Next Meeting: October 6, 2022 at Main Library- Auditorium	Frederick Downs, Jr.
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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MIAMI-DADE HIV/AIDS PARTNERSHIP

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Meeting Housekeeping

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

Updated June 21, 2022

Miami-Dade County Main Library Version

Disclaimer & Code of Conduct

- 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 . . .

Resource Persons

- 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.*

Meeting Participation

- **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 <http://aidsnet.org/meeting-documents/>.



- 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
August 4, 2022**

#	Committee Members	Present	Absent
1	Alcala, Etelvina	X	
2	Downs, Frederick		X
3	Grant, Gena		X
4	Henriquez, Maria	X	
5	Iadarola, Dennis		X
6	Mills, Vanessa		X
7	Neff, Travis		X
8	Roelans, Ryan		X
9	Siclari, Rick	X	
10	Shmuels, Diego	X	
11	Trepka, Mary Jo		X
12	Wall, Dan	X	
Quorum = 5			

Guests	
Machado, Angela	
Mester, Brad	
Romero, Javier	
Staff	
Robert Ladner	
Marlen Meizoso	

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

I. Call to Order

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

II. Meeting Housekeeping and Rules

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

III. Introductions

Members and guest introduced themselves around the room.

IV. Floor Open to the Public

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. Review/Approve Agenda

The committee reviewed the agenda. Staff indicated there were some rearrangements to the items on the posted agenda, but no additional items were added. There was no General Revenue report, so the Committee made a motion to strike it and approved the recommended change to the agenda.

Motion to accept the revised agenda.

Moved: Rick Siclari

Seconded: Dan Wall

Motion: Passed

VI. Review/Approve Minutes of July 7 2022

The committee reviewed the minutes of July 7, 2022, and accepted them as presented.

Motion to accept the minutes from July 7, 2022, as presented.

Moved: Rick Siclari

Seconded: Dan Wall

Motion: Passed

VII. Reports

• *Part A*

Dan Wall

Dan Wall reported that the current expenditures for FY 2022 have been posted (copy on file). From March 1 to the end of June there have been 6,849 unduplicated clients served. Reallocation letters for sweeps will be sent out by Monday. As of August 2, 2022, 2,907, unduplicated clients have been served under TTRA (70 in the last 2 weeks of July). Renewal contracts for Ending the Epidemic are in process and a new RFP developing a mobile wellness app for HIV clients and a housing component are in the works, pending HRSA approval. The integrated plan is being worked on and is due December 9, 2022. The Patient Care Planning Group (PCPG) meeting is scheduled in person August 14-16, 2022. Monkeypox information has been provided by the Department of Health and forwarded by the County. The National Ryan White Conference will be taking place August 23-26, 2022, and the last day to register for the virtual meeting is August 9.

• *Part B*

Marlen Meizoso for David Goldberg

Mrs. Meizoso reviewed the June 2022, Part B report (copy on file) which listed the expenditures, budgets, and funded categories.

- *ADAP*

Dr. Javier Romero

Dr. Javier Romero reviewed the July 2022, as of August 1, 2022, ADAP report (copy on file). Enrollments, expenditures, and payments were reviewed. Magellan implementation is slated to start October 1. The list of the new pharmacies that will be part of the Magellan network has yet to be shared by the State. The change to the new managed care plan will affect only the 250 direct dispense clients in West Perrine. While the date for Magellan to start draws closer, no information has been shared on additional paperwork, registration requirements, or processes that will be but in place. Cabenuva utilization as of August 1 is at 137, 53% direct dispense and 47% insured. Clients who wish to access monkeypox vaccines or treatment must contact the Epi Division at the Department of Health (305-470-5660). Dr. Jean has developed simplified orders for physicians to complete. Do not send anyone to the DOH pharmacy on Flagler.

- *Vacancies*

Marlen Meizoso

Mrs. Meizoso reviewed the July 2022, vacancy report (copy on file). There are 12 vacancies on the Care and Treatment Committee. If anyone knows of interested individuals, they may invite them to a meeting or have them contact staff. The Executive Committee is reviewing committee size to recommend reducing the size of all committees.

- *Report to Committees*

All

Dr. Shmuels referenced the Report to Committees (copy on file). The report details the items approved at the July 18 Partnership meeting including sweeps, the approval of the letter on gender affirming care, and the dental implant items. Any questions can be directed to staff.

- *Medical Care Subcommittee Report*

Marlen Meizoso

Mrs. Meizoso reviewed the Medical Care Subcommittee (copy on file).

The Medical Care Subcommittee (MCSC):

- Met on July 22, 2022.
- Heard updates from the Ryan White Program and the ADAP Program.
- Concluded discussion on topics related to HIV and aging.
- Cancelled their August 26, 2022 meeting.
- Will start work on updates to the Primary Medical Care Standards in September.

The next subcommittee meeting is scheduled for September 23, 2022.

VIII. Standing Business

▪ FCPN Nominations

All

Mrs. Meizoso announced that FCPN nominations are due for Area 11A (copy on file), and the announcement and Florida Comprehensive Planning Network (FCPN) bylaws had been shared at the last meeting and forwarded to members. She contacted the current representatives, and both are interested in continuing to serve. The Committee made a motion to nominate Travis Neff as the main member, and Dr. Diego Shmuels as the alternate member, for the area 11A Patient Care representative seat to the FCPN.

Motion to nominate Travis Neff (member) and Dr. Diego Shmuels (alternate) as the area 11A Florida Comprehensive Planning Network Patient Care representatives.

Moved: Rick Siclari

Seconded: Dan Wall

Motion: Passed

IX. New Business

• Ryan White Program FY 2021 Service Utilization Data

Dr. Robert Ladner

Dr. Robert Ladner reviewed the Ryan White Program FY 2021 Utilization Data (copy on file). Dates referenced in this presentation and those previously presented as part of this year's need assessment process will be updated to match the standardized HRSA format for describing fiscal years. In FY 2021, the program served 8,420 clients, expended over \$19 million dollars, and the average cost per client was \$2,258. This year two sets of tables were included in the presentation, one sorted alphabetically and the other by highest expenditures/most clients. A table included details of access to each service category by ethnicity/race/gender.

The meeting lost quorum at 11:47 a.m. but the Committee insisted on finishing the presentations.

• Other Funding Streams

Marlen Meizoso

Mrs. Meizoso reviewed the Other Funding presentation (copy on file) which provided background on other funding for services using information from the annual Women, Infants, Children and Youth (WICY) survey which request HIV specific funding for Parts B-D, General Revenue, and the other providers. This information is also included in the lower portion of the Dashboard cards which will be discussed shortly. Medicaid expenditure and demographics were also provided. There has been an increase of 8.02% in clients served and 15.6% in total expenditures from FY 2019 to FY 2020. These increases are likely due to COVID-19 issues since medications, hospital access, and medical billing increased. Medicaid demographic data from the past three years were presented and Black/African Americans continue to be the largest ethnic group served by the program (45.54%). This is in marked contrast to the Ryan White Program, in which Hispanics predominate. The Medicaid program also serves slightly more men (54.46%) than women.

- *Dashboard Cards*

Marlen Meizoso

Mrs. Meizoso reviewed the Tools for Needs Assessment: A Guide to Dashboard Cards 2022 Revision (copy on file) which explained how to read the Dashboard Cards, new items for 2022 and how to use the document. She reviewed the different sections of the dashboard cards and explained the sources of the various data, combining information from five years of utilization and priorities, and provided various averages. She also reviewed each dashboard card (copy on file) which detailed trends, other funders for HIV direct and support services, and important items to consider for each service.

- *Service Categories*

All

Mrs. Meizoso referenced the HRSA Policy Clarification Notice (PCN) #16-02 (copy on file) that was shared with the committee. At the next meeting, per HRSA, the Committee will need to prioritize all services, both services which are currently provided under RWP contracts, and services which are not. Staff will send out a prioritization sheet for Part and MAI services, with short descriptions, and include a note to see the PCN #16-02 for a complete description.

- *Next Steps*

All

Mrs. Meizoso reviewed the next steps in preparation for the September meeting. All needs assessment items will be posted online at www.aidsnet.org and should be reviewed before the meeting. Three presentations remain (co-occurring, community input results from IP and aging discussion, and unmet need/service gaps) and will be presented at the next meeting. After the data presentations, the only items left are directives, priority setting, and resource allocation. A survey monkey link will be sent to members and guests who attended today's meeting to complete the priority setting exercise. Instructions on how to complete the form and due date will be forwarded with the link. All replies must be submitted by the due date.

- *Announcements*

All

Mrs. Meizoso indicated that it was especially important that members RSVP in advance to the meetings. 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).

- *Next Meeting*

Dr. Diego Shmuels

The next meeting is scheduled for Thursday, September 1, 2021, at the Miami-Dade County Main Library, Auditorium, 101 West Flagler Street, Miami, FL 33130 from 10 a.m. to 1 p.m. Members are encouraged to RSVP.



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

EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE YR32
FORMULA AND SUPPLEMENTAL FUNDING

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

This report includes YTD paid reimbursements for FY 2022 Part A service months up to July 2022, as of 8/30/2022. This report reflects reimbursement requests that were due by 8/20/2022 and have been paid thus far. Pending Part A reimbursement requests that have been received and are in process total \$6,323,387.50. Several contracts are still pending completion/execution.

Project #: BURW3201	AWARD AMOUNTS	ACTIVITIES
Grant Award Amount Formula	16,141,380.00	FORMULA
Grant Award Amount Supplemental	4,121,835.00	SUPPLEMENTAL
Grant Award Amount FY'20 Supplemental	4,268,879.00	PY_SUPPLEMENTAL
Carryover Award FY'17 Formula		CARRYOVER

→ **Total Award** \$ **24,532,094.00**

CONTRACT ALLOCATIONS/ FORMULA & SUPPLEMENTAL AWARDS**DIRECT SERVICES:**

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	Allocations	
11 Emergency Financial Assistance	9,853.00	
8 Food Bank	766,083.00	
10 Medical Transportation	194,149.00	
13 Other Professional Services	154,449.00	
12 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) \$ - 3,094,731.00 24,532,094.00

Core medical % against Total Direct Service Allocation (Not including C/O):
 Cannot be under 75% **84.33%** **Within Limit**

Quality Management % of Total Award (Not including C/O):
 Cannot be over 5% **2.62%** **Within Limit**

OMB-GC Administrative % of Total Award (Cannot include C/O):
 Cannot be over 10% **10.00%** **Within Limit**

CURRENT CONTRACT EXPENDITURES**DIRECT SERVICES:**

Account	Core Medical Services	Expenditures	Carryover Expenditures
5606970000	AIDS Pharmaceutical Assistance	0.00	
5606920000	Health Insurance Services	0.00	
5606870000	Medical Case Management	11,043.65	
5606860000	Mental Health Therapy/Counseling	0.00	
5606900000	Oral Health Care	0.00	
5606610000	Outpatient/Ambulatory Health Svcs	89,323.90	
5606910000	Substance Abuse - Outpatient	0.00	100,367.55

Account	Support Services	Expenditures	Carryover Expenditures
5606940000	Emergency Financial Assistance	0.00	
5606980000	Food Bank	529,470.00	529,470.00
5606460000	Medical Transportation	0.00	
5606890000	Other Professional Services	32,040.00	
5606950000	Outreach Services	0.00	
5606930000	Substance Abuse - Residential	127,260.00	688,770.00

TOTAL EXPENDITURES DIRECT SVCS & % : \$ **789,137.55** **3.68%**

Formula Expenditure % **10.75%**

5606710000 **Recipient Administration** **696,085.45**

5606880000 **Quality Management** **250,000.00** **946,085.45**

Grant Unexpended Balance **22,796,871.00**

Total Grant Expenditures & % \$ **1,634,855.45** **6.66%**

Core medical % against Total Direct Service Expenditures (Not including C/O):
 Cannot be under 75% **0.386523268** **Danger!!!!**

Quality Management % of Total Award (Not including C/O):
 Cannot be over 5% **1.02%** **Within Limit**

OMB-GC Administrative % of Total Award (Cannot include C/O):
 Cannot be over 10% **2.84%** **Within Limit**

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

This report includes YTD paid reimbursements for FY 2022 MAI service months up to July 2022, as of 8/30/2022. This report reflects reimbursement requests that were due by 8/20/2022 and have been paid thus far. Pending MAI reimbursement requests that have been received and are in process total \$360,847.98. Several contracts are still pending completion/execution.

PROJECT #: BURW3201	AWARD AMOUNTS	ACTIVITIES
Grant Award Amount MAI	1,089,480.00	MAI
Grant Award Amount FY'20 MAI	1,623,771.00	PY_MAI
Carryover Award FY'21 MAI		MAI_CARRYOVER
Total Award	\$ 2,713,251.00	

CONTRACT ALLOCATIONS

DIRECT SERVICES:

Core Medical Services	Allocations	
AIDS Pharmaceutical Assistance		
Health Insurance Services		
1 Medical Case Management	903,920.00	
3 Mental Health Therapy/Counseling	18,960.00	
Oral Health Care		
2 Outpatient/Ambulatory Health Svcs	1,356,661.00	
4 Substance Abuse - Outpatient	8,058.00	2,287,599.00

Support Services	Allocations	
7 Emergency Financial Assistance	0.00	
Food Bank		
5 Medical Transportation	7,628.00	
Other Professional Services		
6 Outreach Services	39,816.00	
Substance Abuse - Residential		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 2,713,251.00

Quality Management \$ 106,883.00

(+) Unobligated Funds / (-) Over Obligated:
 Unobligated Funds (MAI) \$ - 378,208.00 2,713,251.00
 Unobligated Funds (Carry Over) \$ -

Core medical % against Total Direct Service Allocation (Not including C/O):
 Cannot be under 75% 97.97% Within Limit

Quality Management % of Total Award (Not including C/O):
 Cannot be over 5% 3.94% Within Limit

OMB-GC Administrative % of Total Award (Cannot include C/O):
 Cannot be over 10% 10.00% Within Limit

CURRENT CONTRACT EXPENDITURES

DIRECT SERVICES:

Account	Core Medical Services	Expenditures	Carryover Expenditures
5606970000	AIDS Pharmaceutical Assistance		
5606920000	Health Insurance Services		
5606870000	Medical Case Management	52,191.50	
5606860000	Mental Health Therapy/Counseling	0.00	
5606900000	Oral Health Care		
5606610000	Outpatient/Ambulatory Health Svcs	0.00	
5606910000	Substance Abuse - Outpatient	0.00	52,191.50

Account	Support Services	Expenditures	Carryover Expenditures
5606940000	Emergency Financial Assistance	0.00	
5606980000	Food Bank		
5606460000	Medical Transportation	0.00	
5606890000	Other Professional Services		
5606950000	Outreach Services	0.00	
5606930000	Substance Abuse - Residential		0.00

TOTAL EXPENDITURES DIRECT SVCS & %: \$ 52,191.50 2.24%

5606710000 **Recipient Administration** 43,280.89

5606880000 **Quality Management** 41,666.65 84,947.54

Grant Unexpended Balance 2,576,111.96

Total Grant Expenditures & % (Including C/O): \$ 137,139.04 5.05%

Core medical % against Total Direct Service Expenditures (Not including C/O):
 Cannot be under 75% \$ 1.00 Within Limit

Quality Management % of Total Award (Not including C/O):
 Cannot be over 5% 1.54% Within Limit

OMB-GC Administrative % of Total Award (Cannot include C/O):
 Cannot be over 10% 1.60% Within Limit

RYAN WHITE PART A PROGRAM
MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF: **July 2022**

FUNDING SOURCE(S) INCLUDED:

Ryan White Part A
Ryan White MAI

SERVICE CATEGORIES

Core Medical Services

	Service Units		Unduplicated Client Count	
	<u>Monthly</u>	<u>Year-to-date</u>	<u>Monthly</u>	<u>Year-to-date</u>
AIDS Pharmaceutical Assistance (LPAP/CPAP)	22	136	22	96
Health Insurance Premium and Cost Sharing Assistance	29	1,434	20	633
Medical Case Management	6,879	35,697	3,304	6,361
Mental Health Services	34	295	18	65
Oral Health Care	638	3,785	486	1,545
Outpatient Ambulatory Health Services	1,775	10,617	1,095	3,186
Substance Abuse Outpatient Care	1	18	1	10
Support Services				
Food Bank/Home Delivered Meals	1,367	6,901	522	692
Medical Transportation	113	1,562	105	418
Other Professional Services	55	356	17	50
Outreach Services	76	363	22	65
Substance Abuse Services (residential)	57	681	6	22
TOTALS:	11,046	61,845		

Total unduplicated clients (month): 4,083

Total unduplicated clients (YTD): 7,104

RYAN WHITE PART A PROGRAM
MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

July 2022

FUNDING SOURCE(S) INCLUDED:

Ryan White Part A

SERVICE CATEGORIES

Core Medical Services

- AIDS Pharmaceutical Assistance (LPAP/CPAP)
- Health Insurance Premium and Cost Sharing Assistance
- Medical Case Management
- Mental Health Services
- Oral Health Care
- Outpatient Ambulatory Health Services
- Substance Abuse Outpatient Care

Support Services

- Food Bank/Home Delivered Meals
- Medical Transportation
- Other Professional Services
- Outreach Services
- Substance Abuse Services (residential)

Service Units Unduplicated Client Count

Monthly Year-to-date Monthly Year-to-date

22	136	22	96
29	1,434	20	633
6,202	31,789	3,041	6,128
34	284	18	58
638	3,785	486	1,545
1,703	10,069	1,058	3,147
1	12	1	6

1,367	6,901	522	692
109	1,539	101	405
55	356	17	50
75	351	21	53
57	681	6	22

TOTALS: 10,292 57,337

Total unduplicated clients (month):

3,913

Total unduplicated clients (YTD):

7,002

RYAN WHITE PART A PROGRAM
MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

SERVICE CATEGORIES

July 2022

FUNDING SOURCE(S) INCLUDED:

Ryan White MAI

	Service Units		Unduplicated Client Count	
	Monthly	Year-to-date	Monthly	Year-to-date
Core Medical Services				
Medical Case Management	677	3,908	363	722
Mental Health Services	0	11	0	7
Outpatient Ambulatory Health Services	72	548	53	231
Substance Abuse Outpatient Care	0	6	0	4
Support Services				
Medical Transportation	4	23	4	14
Outreach Services	1	12	1	12
TOTALS:	754	4,508		
Total unduplicated clients (month):	393			
Total unduplicated clients (YTD):	893			



Care and Treatment
Thursday, September 1, 2022

10:00 a.m. – 1:00 p.m.

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

AGENDA

- | | | |
|-------|--|---------------------------------------|
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| II. | Meeting Housekeeping and Rules | Frederick Downs, Jr. |
| III. | Introductions | All |
| IV. | Floor Open to the Public | Dr. Diego Shmuels |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of August 4, 2022 | All |
| VII. | Reports | |
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| | • Vacancies | Marlen Meizoso |
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| | • None | |
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| | • Unmet Need/ Service Gaps | Dr. Robert Ladner |
| | • Summary to Date and Next Steps | Marlen Meizoso |
| | • Special Directives | All |
| | • Priority Setting | All |
| | • Resource Allocations (flat and application) | All |
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| XI. | Next Meeting: October 6, 2022 at Main Library- Auditorium | Frederick Downs, Jr. |
| XII. | Adjournment | Dr. Diego Shmuels |

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Membership Report

August 16, 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:

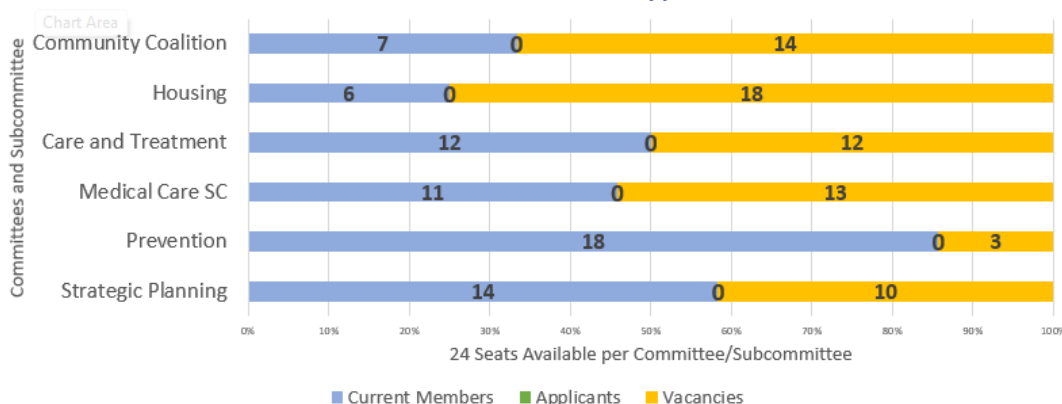
- Representative Co-infected with Hepatitis B or C
- Hospital or Health Care Planning Agency Representative
- Other Federal HIV Program Grantee Representative (SAMHSA)
- Federally Recognized Indian Tribe Representative
- Mental Health Provider Representative
- Miami-Dade County Public Schools Representative

Partnership Committees

Committees are now accepting applications for new members.

People with HIV are encouraged to apply.

Committee and Subcommittee Members, Applicants & Vacancies



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

MEMBERSHIP

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**
- ⌘ 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**
- ⌘ 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**
- ⌘ Oversee updates and changes to medical treatment guidelines for the Ryan White Part/MAI Program with the **Medical Care Subcommittee**
- ⌘ 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**
- ⌘ Develop and monitor the official HIV Prevention and Care Integrated Plan with the **Strategic Planning Committee & Prevention Committee**
- ⌘ Develop your leadership skills and be a committee leader with the **Executive Committee**
- ⌘ Oversee updates and changes to the Ryan White Prescription Drug Formulary with the **Medical Care Subcommittee**
- ⌘ 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**
- ⌘ 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.



**Care and Treatment
Thursday, September 1, 2022**

10:00 a.m. – 1:00 p.m.

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

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Marlen Meizoso |
| | • Unmet Need/ Service Gaps | Dr. Robert Ladner |
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| | • Special Directives | All |
| | • Priority Setting | All |
| | • Resource Allocations (flat and application) | All |
| X. | Announcements | Marlen Meizoso |
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MIAMI-DADE HIV/AIDS PARTNERSHIP

Care and Treatment Thursday, September 1, 2022

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Ryan White Program Co-Occurring Conditions Fiscal Year 2021 (3/1/2021 thru 2/28/2022)

Presented September 1, 2022

**Based on Data from Provide Enterprise
Billed Service Detail Data Table**

Prepared by Behavioral Science Research Corporation

Definition of Terms

<136% FPL	Ryan White Program (RWP) clients with an income of up to 136% of the federal poverty level (FPL).
AIDS Dx	RWP clients with an AIDS diagnosis.
No Health Insurance	RWP clients with no other forms of health insurance including Medicare, Medicaid, VA benefits, private health insurance (including ACA), or employer-paid insurance
Mental Illness	RWP clients who received mental health counseling and/or psychiatric services in the current fiscal year or have ever received mental health counseling.
Subs. Use	RWP clients who have used drugs or alcohol in the past 12 months, or have ever injected drugs, or have received substance abuse counseling in the fiscal year thru the RWP, or currently attend AA/NA meetings.
Hepatitis B or C	RWP clients who have or have had a positive Hepatitis B or Hepatitis C test result.
STI	RWP clients who had a positive lab test result for either Syphilis, Gonorrhea, or Chlamydia.
Homeless/ Unstably Housed	RWP clients who reported having non-permanent housing (homeless, transient, or transition) and/or answered the question “With whom are you living?” with “I am Homeless” during the fiscal year.
WoCA	Women of child-bearing age – RWP female clients between the ages of 15 and 44
VL	Viral load.
COC	Co-Occurring Conditions
ACA	Affordable Care Act
MMSC	Male to Male Sexual Contact

Summary of Findings

- There are seven (7) Special Need Populations that the Miami-Dade County RWP looks at: Substance Users, Black/African-American (BAA) males with heterosexual HIV acquisition, Black/African-American (BAA) males with MMSC HIV acquisition, Black/African-American (BAA) females, Women of Childbearing Age (WoCA), Haitians, and Hispanic males with MMSC HIV acquisition.
- There are eight (8) co-occurring conditions (COC) of interest to the Miami Dade County RWP: poverty (<136% of FPL), no other forms of health insurance/coverage, current AIDS diagnosis, STI (chlamydia, gonorrhea, and/or syphilis) infection, Hepatitis B OR C infection, substance use, mental illness, and being Homeless/unstably housed.

Summary of Findings

- Special Need Groups (SNG):
 - The Hispanic MMSC SNG (VL suppression 89.9%) was the SNG with the highest VL suppression rate.
 - Accounted for 46.2% of the total population.
 - The Black MMSC and WOCA SNG accounted for the lowest VL suppression rates (roughly 78%).
- Co-Occurring Conditions (COC):
 - Clients with Hepatitis B or C and clients with Sexually Transmitted Infections (STI) had an average VL suppression rate higher than the RWP average.
 - Homeless, by far, had the lowest VL suppression rate, 69.6%.
 - Mental Illness and Homeless clients accounted for the two highest costs per client, \$4,053 and \$4,336 respectively.

Incidence of Co-Occurring Conditions among Special Need Populations

aidsnet.org

SPECIAL NEEDS GROUPS	Total N	<136% FPL	No Health Ins	AIDS Dx	STI	Hep B or C	Subs. Use	Mental Illness	Homeless/ Unstably Housed	VL Supp % of Clients
Total RWP Clients	8,420 100%	4,197 49.8%	4,120 48.9%	2,438 29.0%	2,324 27.6%	2,146 25.5%	1,947 23.1%	1,081 12.8%	607 7.2%	81.0%
Hispanic MMSC	3,897 46.2%	1,643 42.2%	1,819 46.7%	784 20.1%	1,380 35.4%	989 25.4%	967 24.8%	434 11.1%	116 3.0%	89.9%
Black MMSC	534 6.3%	270 50.6%	318 59.6%	122 22.8%	196 36.7%	121 22.7%	178 33.3%	71 13.3%	62 11.6%	78.9%
Black Male Hetero	485 5.8%	325 67.0%	322 66.4%	214 44.1%	110 22.7%	144 29.7%	126 26.0%	89 18.4%	116 23.9%	82.6%
Black Female	555 6.6%	342 61.6%	278 50.1%	240 43.2%	73 13.2%	152 27.4%	85 15.3%	109 19.6%	60 10.8%	83.7%
Haitian	735 8.7%	442 60.1%	407 55.4%	375 51.0%	123 16.7%	217 29.5%	48 6.5%	51 6.9%	36 4.9%	86.2%
WoCA, Age 15-44	431 5.1%	275 63.8%	270 62.6%	122 28.3%	56 13.0%	67 15.5%	80 18.6%	85 19.7%	52 12.1%	77.6%
Substance Use	1,947 23.1%	884 45.4%	1,144 58.8%	400 20.5%	521 26.8%	409 21.0%	1,947 100%	176 9.0%	286 14.7%	83.2%
VL Supp % of Clients	81.0%	79.9%	78.5%	82.0%	85.2%	87.6%	83.2%	82.2%	69.6%	

Number of RWP Clients with Various Co-Occurring Conditions

Co-Occurring Condition	FY 31 RWP Clients w/ Co-Occurring Condition		Total Tx Cost (from PE Billed Service Detail Data)	Avg. Tx Cost per Client
	# of RW clients with COC	% of RW clients		
All RWP Clients	8,420	100%	\$19,018,258.00	\$2,258.70
<136% FPL	4,197	49.8%	\$14,097,206.32	\$2,977.23
No Insurance	4,120	48.9%	\$15,795,326.04	\$3,189.04
AIDS diagnosis	2,438	29.0%	\$8,122,191.63	\$2,883.28
STI	2,324	27.6%	\$6,813,316.17	\$2,894.07
Hepatitis B or C	2,146	25.5%	\$6,552,319.81	\$3,053.27
Substance Use	1,947	23.1%	\$6,031,254.87	\$3,077.17
Mental Illness	1,081	12.8%	\$4,778,224.49	\$4,052.78
Homeless/UH	607	7.2%	\$2,307,014.45	\$4,336.49

Thank you for your attention!

Any questions?



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Community Input Results- Integrated Plan and HIV and Aging Topics

September 1, 2022

Slides prepared by Behavioral Science Research Corp.

Community Input Groups

From February to April 2022, staff held various community listening sessions to gather feedback for Integrated Plan development:

Ryan White Program (RWP) client-specific Focus Groups

- Haitian males and females
- Males and females under age 55
- Community Coalition Roundtable

Non-RWP Focus Groups

- Positive People Network
- Hispanic support group at Pridelines

Emerging populations

- Aging: focus groups with RWP male and female clients over age 55
- Transgender: Key informant interview with TransSocial

Florida Department of Health Workgroups

- Florida Black HIV/AIDS Coalition (2 sessions)
- Iniciativa Hispana (2 sessions in Spanish)
- Miami Collaborative MSM Workgroup
- PrEP Workgroup
- Transgender Tenacity Power
- Youth Health Community Mobilization Workgroup

Key Questions at Community Input Sessions

- What are the most pressing problems facing the HIV community?
- What is the most important factor to address the HIV epidemic?
- What are the barriers to starting care and staying in care?
- What do you know about Ending the HIV Epidemic (EHE), aggressive viral load suppression as a client outcome goal, Undetectable = Untransmittable (U=U) as a communication strategy, and PrEP as a prevention strategy?
- Do you think those efforts are effective?
- What are your suggestions to improve prevention messaging and reduce barriers to HIV care?
- Do you believe the community has a role or any responsibility in HIV care and treatment or prevention? What keeps people from getting more involved?
- Where do you get your information about HIV- and health-related resources?

Key Findings

- Outside of groups specifically dedicated to community advocacy, participants were generally apathetic toward community involvement in HIV prevention, treatment, and community planning.
- Instead, the most important issues were:
 - ❑ Lack of affordable housing;
 - ❑ Lack of transportation;
 - ❑ Failures in communication with providers (at every level);
 - ❑ Issues relating to stigma and discrimination (both in treatment settings and in their personal lives);
 - ❑ Not being made aware of support services such as food bank, transportation vouchers or mental health services; and
 - ❑ Difficulty with getting or keeping a job.

Housing

- There is a severe housing crisis with limited affordability and availability.
- Housing costs have risen, wait lists are long and slow moving, and incomes are limited.
- There are not enough short-term or long-term solutions. HOPWA is not enough.
- Participants expressed panic and frustration about:
 - ❑ Escalating housing costs;
 - ❑ Awful landlords;
 - ❑ Run-down/unsafe housing;
 - ❑ Discrimination based on HIV status; and
 - ❑ Fear of eviction.

Transportation

- Additional access to transportation is needed - MCM must make clients aware of available transportation vouchers.
- Getting to and from appointments is vital.
 - ❑ For some, a medical visit is an all-day event if traveling on public transportation.
 - ❑ Some clients choose to travel far from their home area in efforts to avoid the stigma of getting HIV services in their own neighborhood.
- Transportation to pick up prescriptions is vital.
 - ❑ Having a three-month supply of medications cuts down on some transportation needs.
- ADAP locations are not convenient for many.
 - ❑ Most participants were not aware of ADAP home delivery.
 - ❑ Most participants were not aware of pick-up options at local CVS pharmacies.

Communication

- Overall, participants indicated they were receiving the medical care needed. However, improvements in communication are necessary on every level of service delivery from front office to doctor's office to address:
 - ❑ Language barriers in both verbal and print communication;
 - ❑ Stigmatization based on unrecognized gender, race, ethnic, and economic microaggressions, as well as self-stigmatizing behaviors;
 - ❑ Developing a relationship with clients so they don't just feel like a number;
 - ❑ Opportunities for using modern technology (appointment reminders, telehealth, etc.);
 - ❑ Maintaining confidentiality, particularly for clients who have not disclosed their HIV status; and
 - ❑ Making clients aware of all available services (not just those at a single agency).
- The Integrated Plan will include recommendations for ongoing training in:
 - ❑ Understanding stigma, discrimination, and unrecognized bias;
 - ❑ Gender-affirming care;
 - ❑ Trauma-informed care;
 - ❑ Cultural competency;
 - ❑ Patient-centered / whole person / status neutral care;
 - ❑ Issues specific to special dynamics of women with HIV; and
 - ❑ Understanding the importance of promoting PrEP and PrEP awareness.

Other Considerations

- Mental Health
 - ❑ Mental health must be addressed to assist clients with treatment adherence.
 - ❑ Particularly since the COVID pandemic, clients have increased anxiety and depression.
 - ❑ Untreated mental health issues and increased substance use was reported.
 - ❑ Providers (MCM) need to make *all clients* aware of access points for mental health services. MCM cannot just refer to inter-agency services. Many participants indicated not being aware of eligibility to mental health services.
 - ❑ Limited appointment times for psychiatric treatment was noted as a barrier to care.
- Dental
 - ❑ Dentists have limited appointments; appointments for specialty services are the most difficult.
- Food Insecurity
 - ❑ Providers (MCM) need to make *all clients* aware of food bank availability. Many participants indicated being in need and not being aware of food bank services.
- Appointments
 - ❑ For those who are in school or are working full- or part- time, there is difficulty fitting appointments into their schedule. More appointments are needed outside of conventional business hours.

Ongoing Planning

- The Integrated Plan is due to HRSA in December 2022.
- Members of all committees and other community stakeholders are encouraged to contribute to the ongoing development and monitoring of the Plan.
- Partnership members should expect to review the Plan in its entirety by October 2022.
- Local community engagement efforts and results will be highlighted at the Ryan White Program Conference on Thursday, August 25, 3:30 - 5:00 PM:
 - ❑ Session ID: 21133: Community Engagement Institute 301: HRSA HIV/AIDS Bureau Community Engagement Framework and Activities (Track: RWHAP Planning and Resource Allocation: Community Engagement and Collaborative Partnerships)
- For more information, visit www.AIDSNET.org or contact staff.

HIV AND AGING

Background on Aging

- From January to July 2022, discussion were held regarding HIV and aging within the Medical Care Subcommittee.
- A total of 12 topics were discussed: diabetes; kidney disease; dementia and other neurocognitive disorders; depression; eyesight/hearing diminishment; cardiovascular disease, liver disease, STIs, osteoporosis, sarcopenia, polypharmacy, and cancers).
- Individuals who are HIV+ are living longer and encountering aging related comorbidities/co-occurring conditions. These are complicating factors.
- Some conditions are more common in some populations, e.g. African-Americans and kidney disease.

Background on Aging, continued

- Three questions were asked to stimulate discussion:
 - 1) What are the issues being faced by aging populations with HIV as it relates to the topic?
 - 2) How should the problem be treated?
 - 3) What is missing in the Ryan White system as it relates to addressing the topic?
- The results of the discussions are included in this presentation and have been sorted by client related, service related or medication related responses.

Clients

- Some clients do not understand how to navigate the healthcare system.
- Clients may have issues paying copays for Medicare because of a loss of income.
- Clients need critical time interventions since natural supports maybe lacking with aging.

Services

- Appropriate OAHS referrals should be done to specialty care.
- Nutrition and exercise are important factors in aging and should be discussed as part of routine medical care.
- Specialty programs (population health specialist) are helpful, since they targets unregulated diabetic clients.
- Home health is useful in keeping populations out of the hospital and reducing specialty care visits.
- Dementia is a concern for patients because of adherence issues.
- Alzheimer is a complicating factor also, since not many providers are in-network.
- Depression is an issue because of medication limits and shortage of mental health staff.

Medications

- Newer medications exist which are better for overall health.
- Combination medications can treat other comorbidities e.g. channel blocker with ACE inhibitors.
- ADAP/General Revenue may need to revise their formularies to include medications for neurocognitive disorders.

Next Steps

Medical Care Subcommittee will address HIV and Aging by reviewing and updating:

- Minimum Primary Care Standards;
- Allowable Conditions list; and
- Ryan White Prescription Drug Formulary, as applicable.

Thank you for your attention!

Any questions?



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		A	B	C	D	E	F	G
	Priority Groups	Prevalence in Miami-Dade County (FDOH) CY 2020	Ryan White Program (RWP) clients served, FY 2021-2022	% of the FDOH CY 2020 prevalence served by the RWP (B/A)	Medicaid clients served FY 2021-2022	% of the FDOH CY 2020 prevalence served by Medicaid (D/A)	Ryan White Program + Medicaid (B+D)	% of the FDOH CY 2020 prevalence served by the RWP+Medicaid (F/A)
Total		27,214	8,127	29.9%	8,407	31%	16,534	60.8%
Males		20,585	6,501	31.6%	4,579	22%	11,080	53.8%
Females		6,629	1,544	23.3%	3,818	58%	5,362	80.9%
SAMPLE PRIORITY POPULATIONS								
Black Females	*	4,520	555	12.3%	2,163	48%	2,718	60.1%
Black Women of Childbearing Age (age 15-44)		1,334		0.0%	NA	NA	NA	NA
Black Male w/ Hetero Contact		2,454	484	19.7%	NA	NA	NA	NA
Black Male to Male Sexual Contact		3,100	534	17.2%	NA	NA	NA	NA
All Black Males	*	6,386	1,480	23.2%	1,666	26%	3,146	49.3%
Haitian Males and Females	* (inc with Blacks)	2,624	796	30.3%	NA	NA	NA	NA
Hispanic Females		1,739		0.0%	769	44%	769	44.2%
Hispanic Women of Childbearing Age (age 15-44)		494		0.0%	NA	NA	NA	NA
Hispanic Male w/ Hetero Contact		1,094		0.0%	NA	NA	NA	NA
Hispanic Male to Male Sexual Contact	*	9,761		0.0%	NA	NA	NA	NA
All Hispanic Males		11,426	4,747	41.5%	1,520	13%	6,267	54.8%
White Females		286	54	18.9%	157	55%	211	73.8%
White Women of Childbearing Age (age 15-44)		82		0.0%	NA	NA	NA	NA
White Male w/ Hetero Contact		104		0.0%	NA	NA	NA	NA
White Male to Male Sexual Contact		2,142		0.0%	NA	NA	NA	NA
All White Males		2,434	549	22.6%	296	12%	845	34.7%

Estimated PLHIV 31,024
Global fast track estimate (2020)

Unaware estimate 3,810
Global fast track estimate (2020) - prevalence (2020)

Unmet need 4,875
(Prevalence-[RWP+Medicaid+estimated other funders])

WORKSHEET FOR THE CALCULATION OF FLAT FUNDING FY 2023 BUDGET, BY SERVICE CATEGORY

Data For RWP Program Reflect Unduplicated Part A and MAI Client Counts

Dollars rounded to whole numbers

Service Category	Total RWP Clients FY 2021	Total Expenditures, FY 2021	Cost per client, FY 2021	Estimated RWP Clients FY 2023	Estimated cost per client, FY 2023	Total estimated expenditures FY 2023	Comment
RWHAP Service Categories	8,420	\$19,018,258	\$2,258	9,019	\$2,641	\$23,820,811	Unduplicated Part A + MAI clients. Projections show client counts rebounding to FY 2019 levels by FY 2023. Significant cost-per-client increases (MCM, OHC, O/AHS) owing to RWP initiatives.
AIDS Pharmaceutical Assistance, Local (C)	183	\$4,379	\$24	200	\$29	\$5,743	8% inflationary increase (4% per year).
AIDS Pharmaceutical Assistance, Local (supplemental increase)				20	\$1,700	\$34,000	Continuous glucose monitoring for additional 20 diabetic RWP clients @ \$1,700 per year per client.
Emergency Financial Assistance (S)	0	0	0	N/A	N/A	\$50,000	TTRA pharmaceutical cost increased in FY 2022.
Food Bank (S)	712	\$1,338,778	\$1,880	725	\$2,256	\$1,635,600	20% inflationary increase in base food costs (11% in FY 2022, 9% in FY 2023).
Heath Ins. Premium & Cost Sharing Asst. (C)	1,255	\$298,950	\$238	1,350	\$262	\$353,740	Co-pay amounts expected to rise by 5% per year
Medical Case Management and Peer Support (C)	7,842	\$5,094,347	\$650	8,348	\$845	\$7,049,969	Base RWP reimbursement rates to be incremented by 10%; per-client MCM and Peer efforts increased by 20%.
Medical Transportation (S)	645	\$98,584	153	710	\$153	\$108,516	10% increase in service utilization

WORKSHEET FOR THE CALCULATION OF FLAT FUNDING FY 2023 BUDGET, BY SERVICE CATEGORY

Data For RWP Program Reflect Unduplicated Part A and MAI Client Counts

Dollars rounded to whole numbers

Service Category	Total RWP Clients, FY 2021	Total Expenditures, FY 2021	Cost per client, FY 2021	Estimated RWP Clients FY 2023	Estimated RWP Client Cost, FY 2023	Total estimated expenditures FY 2023	Comment
Mental Health Services (C)	121	\$56,566	\$467	250	\$561	\$140,245	20% increase in per-client service utilization as QI mental health linkage is implemented.
Oral Health Care (C)	2237	\$2,533,062	\$1,132	3000	\$1,245	\$3,735,000	Increase in service utilization as QI efforts to boost OHC are implemented. OHC reimbursement rates subject to 10% inflation over 2 years
Oral Health Care, supplemental				20 (repair) 20 (implants)	\$3,000 \$23,000	\$60,000 \$460,000	Estimating 20 clients with two implant repairs per client, plus 20 new OHC clients with either upper or lower implants.
Other Professional Services (Legal) (S)	44	\$97,371	\$2,213	60	\$2,213	\$132,780	Anticipating additional clients with name changes.
Outpatient/Ambulatory Health Care (C)	4422	\$7,268,816	\$1,644	4,864	\$1,644	\$8,478,108	No increase in medical care reimbursement rate, 10% increase in utilization by 2023.
Outreach Services (S)	116	\$104,263	\$899	200	\$899	\$179,764	Increased service utilization.
Substance Abuse Services, Outpatient (C)	17	\$1,146	\$436	55	\$436	\$23,970	Billing issues complicated this service category. Projections based on per-client cost and clients in care, FY 2019 and FY 2020
Substance Abuse Services, Residential (S)	66	\$968,310	\$14,671	70	\$14,671	\$1,026,995	Increased projected service utilization



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2022 Needs Assessment

Overview and Next Steps

- ✓ The final version of the book with today's presentations and date corrections has been posted online at www.aidsnet.org.
- ✓ The Committee has completed the first five steps of the needs assessment process.

SUMMARY OF PRESENTATIONS

1

- ✓ **Epi** profile data showed over 50% (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%).

2

- ✓ **HIV Continuum** data showed a variation along the continuum with Black, Non-Hispanic (76%), transgenders (73%), and MSM/IDU (63%) have the lowest suppression rates.
- ✓ **Client satisfaction** survey information showed more clients working, a preferred language other than English, and satisfaction levels with oral health and appointments is an issue.

3

- ✓ **Other funding** data showed there are several other sources for services 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 5-year averages to assist the Committee in its decision-making process.

4

- ✓ Today you received information on **co-occurring conditions, community input and aging, and unmet need/service gaps.**
- ✓ Remaining steps in the process are **priority ranking, directives, and allocation of funds.**
- ✓ **Priorities**-Sample priority surveys were sent to members and guest who attended the last meeting. The results of the survey have been

shared. The Committee may choose to move the rankings around, and based on discussion, adjust if necessary. The final step would be the committee will come to a consensus on the final rank order of priorities and will adopt them by formal motion. Pursuant to HRSA mandate, all service categories are being prioritized.

- ✓ **Directives-** 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 and to address other issues defined during the process. These may, among other things, address access issues to services for special populations or special geographic areas or supporting other programs efforts to address unmet needs.
- ✓ **Allocation of Funds-**Based on established principles and needs assessment data the Committee will allocate funds for Fiscal Year 2023-2024 for Part A and MAI. Two budgets will be developed, a flat budget (using FY 2022 expenditure totals) and a grant ceiling budget. Sample budgets are in your meeting materials.
- ✓ **Reminder 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. At this meeting, conflicts for service categories may exist under Part A

(Food Bank) and under MAI (**Mental Health Therapy, Substance Abuse-Outpatient, and Outreach**). 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.



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YEAR 2023
Ranking Sheet

Ryan White Program Part A Priorities

1) As Part of the annual Needs Assessment process and keeping in mind all the presentations made during the Needs Assessment, use this survey to rank all 28 service categories from highest priority (1) to lowest priority (28) for people living with HIV in Miami-Dade County. Please see HRSA Policy Clarification Notice 16-02.

1= first most important,2= second most important, and so on down to 28=least important

Rank	Services
	AIDS Drug Assistance Program (ADAP) Treatment [C]
	AIDS Pharmaceutical Assistance (Local Pharmacy Assistance Program) [C]
	Child Care Services [S]
	Early Intervention Services [C]
	Emergency Financial Assistance [S]
	Food Bank [S]
	Health Education/Risk Reduction [S]
	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
	Home and Community Based Health Care [C]
	Home Health Care [C]
	Hospice Services [C]
	Housing Services [C]
	Linguistic Services [S]
	Medical Case Management, including Treatment Adherence Services [C]
	Medical Nutrition Therapy [C]
	Medical Transportation (Vouchers) [S]
	Mental Health Services [C]
	Non-Medical Case Management [S]
	Oral Health Care [C]
	Other Professional Services (Legal Assistance and Permanency Planning) [S]
	Outpatient/Ambulatory Health Services [C]
	Outreach Services [S]
	Psychosocial Support [S]
	Referral for Health Care and Support Services [S]
	Rehabilitation Services [S]
	Respite Care [S]
	Substance Abuse Outpatient Care [C]
	Substance Abuse Services (Residential) [S]

C=core services S=support services

YEAR 2023
Ranking Sheet

Ryan White Program Minority AIDS Initiative (MAI) Priorities

2) Minority AIDS Initiative (MAI) Funds support innovative models to improve health outcomes for people with HIV and racial and ethnic minority communities. Keeping in mind all the presentations made during the Needs Assessment, rank all 28 service categories from highest priority (1) to lowest priority (28) for racial and ethnic minorities living with HIV in Miami-Dade County. Please see HRSA Policy Clarification Notice 16-02.

1= first most important, 2= second most important, and so on down to 7=least important

Rank	Services
	AIDS Drug Assistance Program (ADAP) Treatment [C]
	AIDS Pharmaceutical Assistance (Local Pharmacy Assistance Program) [C]
	Child Care Services [S]
	Early Intervention Services [C]
	Emergency Financial Assistance [S]
	Food Bank [S]
	Health Education/Risk Reduction [S]
	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
	Home and Community Based Health Care [C]
	Home Health Care [C]
	Hospice Services [C]
	Housing Services [C]
	Linguistic Services [S]
	Medical Case Management, including Treatment Adherence Services [C]
	Medical Nutrition Therapy [C]
	Medical Transportation (Vouchers) [S]
	Mental Health Services [C]
	Non-Medical Case Management [S]
	Oral Health Care [C]
	Other Professional Services (Legal Assistance and Permanency Planning) [S]
	Outpatient/Ambulatory Health Services [C]
	Outreach Services [S]
	Psychosocial Support [S]
	Referral for Health Care and Support Services [S]
	Rehabilitation Services [S]
	Respite Care [S]
	Substance Abuse Outpatient Care [C]
	Substance Abuse Services (Residential) [S]

C=core services S=support services

YEAR 2023
Ranking Sheet
Member Results

Ryan White Program Part A Priorities

1= first most important, 2= second most important, and so on down to 28=least important

YR 2023	Rank	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	Outpatient/Ambulatory Health Services [C]
	5	Oral Health Care [C]
	6	Food Bank/Home-Delivered Meals [S]
	7	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
	8	Mental Health Services [C]
	9	Substance Abuse Services (Residential) [S]
	10	Housing Services [C]
	11	Substance Abuse Outpatient Care [C]
	12	Medical Transportation (Vouchers) [S]
	13	Early Intervention Services [C]
	14	Home Health Care [C]
	15	Medical Nutrition Therapy [C]
	16	Home and Community Based Health Care [C]
	17	Emergency Financial Assistance [S]
	18	Psychosocial Support [S]
	19	Hospice Services [C]
	20	Non-Medical Case Management [S]
	21 or 22	Child Care Services [S]
	21 or 22	Rehabilitation Services [S]
	23 or 24	Health Education/Risk Reduction [S]
	23 or 24	Outreach Services [S]
	25	Other Professional Services (Legal Assistance and Permanency Planning) [S]
	26	Referral for Health Care and Support Services [S]
	27	Linguistic Services [S]
	28	Respite Care [S]

Ryan White Program MAI Priorities

1= first most important, 2= second most important, and so on down to 28=least important

YR 2023	Rank	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	Oral Health Care [C]
	7	Substance Abuse Outpatient Care [C]
	8	Food Bank/Home-Delivered Meals [S]
	9	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
	10	Substance Abuse Services (Residential) [S]
	11	Housing Services [C]
	12	Emergency Financial Assistance [S]
	13	Health Education/Risk Reduction [S]
	14	Home and Community Based Health Care [C]
	15	Medical Nutrition Therapy [C]
	16	Medical Transportation (Vouchers) [S]
	17 or 18	Non-Medical Case Management [S]
	17 or 18	Psychosocial Support [S]
	19	Home Health Care [C]
	20	Outreach Services [S]
	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



MIAMI-DADE HIV/AIDS PARTNERSHIP

Care and Treatment Thursday, September 1, 2022

10:00 a.m. – 1:00 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 | Frederick Downs, Jr. |
| III. | Introductions | All |
| IV. | Floor Open to the Public | Dr. Diego Shmuels |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of August 4, 2022 | All |
| VII. | Reports | |
| | • Part A | Dan Wall |
| | • Vacancies | Marlen Meizoso |
| VIII. | Standing Business | |
| | • None | |
| IX. | New Business | |
| | • Ryan White Program FY 2021 Co-occurring Conditions | Dr. Robert Ladner |
| | • Community Input: Results from Integrated Plan and HIV and Aging Topics | Christina Bontempo/
Marlen Meizoso |
| | • Unmet Need/ Service Gaps | Dr. Robert Ladner |
| | • Summary to Date and Next Steps | Marlen Meizoso |
| | • Special Directives | All |
| | • Priority Setting | All |
| | • Resource Allocations (flat and application) | All |
| X. | Announcements | Marlen Meizoso |
| XI. | Next Meeting: October 6, 2022 at Main Library- Auditorium | Frederick Downs, Jr. |
| 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

Follow Us: www.aidsnet.org | facebook.com/HIVPartnership | twitter.com/HIVPartnership | instagram.com/hiv_partnership/

MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2023 PART A FLAT FUNDING (FORMULA & SUPPLEMENTAL FUNDING) BUDGET WORKSHEET					
FY 2023 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2021 EXPENDITURES	FY 2021 %	FY 2023 RECOMMENDED ALLOCATION ¹	FY 2023 %
	AIDS PHARMACEUTICAL ASSISTANCE [C]	\$4,379.02	0.02%		0.00%
	EMERGENCY FINANCIAL ASSISTANCE [S]	\$0.00	0.00%		0.00%
	FOOD BANK*/HOME DELIVERED MEALS [S]	\$1,338,778.40	7.49%		0.00%
	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	\$298,950.41	1.67%		0.00%
	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$5,094,347.45	28.52%		0.00%
	MEDICAL TRANSPORTATION [S]	\$98,584.06	0.55%		0.00%
	MENTAL HEALTH SERVICES [C]	\$56,566.25	0.32%		0.00%
	ORAL HEALTH CARE [C]	\$2,533,061.80	14.18%		0.00%
	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	\$97,371.00	0.55%		0.00%
	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$7,268,815.93	40.69%		0.00%
	OUTREACH SERVICES [S]	\$104,263.02	0.58%		0.00%
	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$1,146.00	0.01%		0.00%
	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	\$968,310.00	5.42%		0.00%
	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	CHILD CARE SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	EARLY INTERVENTION SERVICES [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HEALTH EDUCATION/RISK REDUCTION [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOME HEALTH CARE [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOSPICE [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOUSING [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	LINGUISTIC SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	MEDICAL NUTRITION THERAPY [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	REHABILITATION SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	RESPIRE CARE [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	SUBTOTAL	\$17,864,573.34	100.00%	\$21,478,885	100.0%

* Funded component of the service category.

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

ADMINISTRATION ²	\$1,994,014.38	\$2,453,209
CLINICAL QUALITY MANAGEMENT	\$603,600.00	\$600,000
TOTAL	\$20,462,187.72	\$24,532,094
	Exp. Ratios	Exp. Ratios
Core Services ⁴	85.41%	0.00%
Support Services	14.59%	0.00%

NOTES:

¹ Total based on the RWP FY 2022 final award.

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

³ 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.

⁴ Actual FY 2022 Core Service's expenditure ratio was 88.94%, net of expenditures funded by the carryover award. Per RWP legislation, Core Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Services waiver.

**MIAMI DADE COUNTY
RYAN WHITE PROGRAM (RWP)
FY 2023 MINORITY AIDS INITIATIVE (MAI) FLAT FUNDING
BUDGET WORKSHEET**

FY 2023 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2021 EXPENDITURES	FY 2021 %	FY 2023 RECOMMENDED ALLOCATION ¹	FY 2023 %
	EMERGENCY FINANCIAL ASSISTANCE [S]	\$0.00	0.00%		0.00%
	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$650,165.00	56.36%		0.00%
	MEDICAL TRANSPORTATION [S]	\$2,371.56	0.21%		0.00%
	MENTAL HEALTH SERVICES [C]	\$3,672.50	0.32%		0.00%
	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$460,768.06	39.94%		0.00%
	OUTREACH SERVICES [S]	\$36,498.00	3.16%		0.00%
	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$210.00	0.02%		0.00%
	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	CHILD CARE SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	EARLY INTERVENTION SERVICES [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOME HEALTH CARE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOSPICE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOUSING [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	LINGUISTIC SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	ORAL HEALTH CARE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	REHABILITATION SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	RESPIRE CARE [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	SUBTOTAL	\$1,153,685.12	100.00%	\$2,341,926	0.00%

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

ADMINISTRATION	\$231,793.34	\$271,325
CLINICAL QUALITY MANAGEMENT	\$99,999.96	\$100,000
TOTAL	\$1,485,478.42	\$2,713,251
	Exp. Ratios	Exp. Ratios
Core Services ³	96.63%	0.00%
Support Services	3.37%	0.00%

NOTES:

¹ Total based on the RWP FY 2022 final award.

² 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.

³ Actual FY 2022 Core Service's expenditure ratio was 96.33%, net of expenditures funded by the carryover award. Per RWP legislation, Core Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Services waiver.

MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2023 PART A FUNDING CEILING (FORMULA & SUPPLEMENTAL) BUDGET WORKSHEET					
FY 2023 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2021 EXPENDITURES	FY 2021 %	FY 2023 RECOMMENDED ALLOCATION ¹	FY 2023 %
	AIDS PHARMACEUTICAL ASSISTANCE [C]	\$4,379.02	0.02%		0.00%
	EMERGENCY FINANCIAL ASSISTANCE [S]	\$0.00	0.00%		0.00%
	FOOD BANK*/HOME DELIVERED MEALS [S]	\$1,338,778.40	7.49%		0.00%
	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	\$298,950.41	1.67%		0.00%
	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$5,094,347.45	28.52%		0.00%
	MEDICAL TRANSPORTATION [S]	\$98,584.66	0.55%		0.00%
	MENTAL HEALTH SERVICES [C]	\$56,566.25	0.32%		0.00%
	ORAL HEALTH CARE [C]	\$2,533,061.80	14.18%		0.00%
	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	\$97,371.00	0.55%		0.00%
	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$7,268,815.93	40.69%		0.00%
	OUTREACH SERVICES [S]	\$104,263.02	0.58%		0.00%
	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$1,146.00	0.01%		0.00%
	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	\$968,310.00	5.42%		0.00%
	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	CHILD CARE SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	EARLY INTERVENTION SERVICES [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HEALTH EDUCATION/RISK REDUCTION [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOME HEALTH CARE [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOSPICE [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOUSING [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	LINGUISTIC SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	MEDICAL NUTRITION THERAPY [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	REHABILITATION SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	RESPIRE CARE [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	SUBTOTAL	\$17,864,573.94	100.00%	\$22,582,829	100.0%

* Funded component of the service category.

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

ADMINISTRATION ²	\$1,994,014.38
CLINICAL QUALITY MANAGEMENT	\$603,600.00
TOTAL ³	\$20,462,187.72

\$2,575,869
\$600,000
\$25,758,698

	Exp. Ratios
Core Services ⁴	85.41%
Support Services	14.59%

Exp. Ratios
0.00%
0.00%
\$0

Sum Check

NOTES:

¹ 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.

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

³ 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.

⁴ Actual FY 2022 Core Service's expenditure ratio was 96.33%, net of expenditures funded by the carryover award. Per RWP legislation, Core Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Services waiver.

MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2023 MINORITY AIDS INITIATIVE (MAI) FUNDING CEILING BUDGET WORKSHEET					
FY 2023 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2021 EXPENDITURES	FY 2021 %	FY 2023 RECOMMENDED ALLOCATION ¹	FY 2023 %
	EMERGENCY FINANCIAL ASSISTANCE [S]	\$0.00	0.00%		0.00%
	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$650,165.00	56.36%		0.00%
	MEDICAL TRANSPORTATION [S]	\$2,371.56	0.21%		0.00%
	MENTAL HEALTH SERVICES [C]	\$3,672.50	0.32%		0.00%
	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$460,768.06	39.94%		0.00%
	OUTREACH SERVICES [S]	\$36,498.00	3.16%		0.00%
	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$210.00	0.02%		0.00%
	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	CHILD CARE SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	EARLY INTERVENTION SERVICES [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOME HEALTH CARE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOSPICE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOUSING [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	LINGUISTIC SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	ORAL HEALTH CARE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	REHABILITATION SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	RESPITE CARE [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	SUBTOTAL	\$1,153,685.12		\$2,464,022	0.00%

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

ADMINISTRATION	\$231,793.34	\$284,891
CLINICAL QUALITY MANAGEMENT	\$99,999.96	\$100,000
TOTAL ²	\$1,485,478.42	\$2,848,913
Core Services ³	Exp. Ratios 96.63%	Exp. Ratios 0.00%
Support Services	3.37%	0.00%
		\$0
		Sum Check

NOTES:

¹ 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.

² 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.

³ Actual FY 2022 Core Service's expenditure ratio was 96.33%, net of expenditures funded by the carryover award. Per RWP legislation, Core Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Services waiver.



**Care and Treatment
Thursday, September 1, 2022**

10:00 a.m. – 1:00 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 | Frederick Downs, Jr. |
| III. | Introductions | All |
| IV. | Floor Open to the Public | Dr. Diego Shmuels |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of August 4, 2022 | All |
| VII. | Reports | |
| | • Part A | Dan Wall |
| | • Vacancies | Marlen Meizoso |
| VIII. | Standing Business | |
| | • None | |
| IX. | New Business | |
| | • Ryan White Program FY 2021 Co-occurring Conditions | Dr. Robert Ladner |
| | • Community Input: Results from Integrated Plan and HIV and Aging Topics | Christina Bontempo/
Marlen Meizoso |
| | • Unmet Need/ Service Gaps | Dr. Robert Ladner |
| | • Summary to Date and Next Steps | Marlen Meizoso |
| | • Special Directives | All |
| | • Priority Setting | All |
| | • Resource Allocations (flat and application) | All |
| X. | Announcements | Marlen Meizoso |
| XI. | Next Meeting: October 6, 2022 at Main Library- Auditorium | Frederick Downs, Jr. |
| 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**

Follow Us: www.aidsnet.org | facebook.com/HIVPartnership | twitter.com/HIVPartnership | instagram.com/hiv_partnership/

Miami-Dade County Ryan White Program Monthly Research Symposium

Provided by Florida International University and Behavioral Science Research

*Join us each month via Zoom to explore findings from FIU/BSR research studies
drawn from Ryan White Program client interviews and client data analyses.*

Each 1 hour session will include 30 minutes of Q/A.

Lessons Learned About Access to HIV Care at the Height of the COVID-19 Pandemic

Wednesday, June 22, 12:00 p.m. – 1:00 p.m.

Zoom Meeting ID: 876 9818 0742 ~ Passcode: 322602



Challenges Experienced by Ryan White Program Clients During COVID

Wednesday, July 20, 12:00 p.m. – 1:00 p.m.

Zoom Meeting ID: 894 8279 2216 ~ Passcode: 243323



Effective Women Centered Care Practices from Ryan White Program Client and Provider Perspectives

Wednesday, August 31, 12:00 p.m. – 1:00 p.m.

Zoom Meeting ID: 817 7037 3251 ~ Passcode: 615937



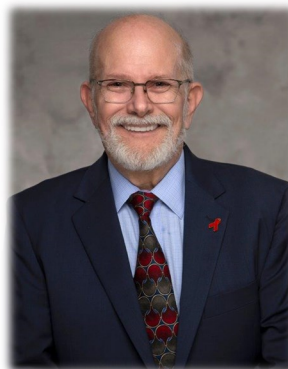
Barriers to Adherence and Retention in HIV Care Among Women

Wednesday, September 21, 12:00 p.m. – 1:00 p.m.

Zoom Meeting ID: 890 7532 6180 ~ Passcode: 358766

Presenters

Dr. Mary Jo Trepka
FIU Professor and Chair,
Dept. of Epidemiology,
Robert Stempel College of
Public Health & Social Work



Dr. Robert Ladner
President, Behavioral
Science Research Corp.



THE COMMUNITY COALITION ROUNDTABLE

We are the HIV Community who speaks for the HIV Community!

July-September 2022 Dinner Presentation Series

Please join us for Roundtables hosted by local service providers and featuring special presentations and dinners generously provided by Gilead Sciences, Inc.



Special Presentation: Healthysexual
Monday, July 25, 2022, 5: 30 PM – 7: 30 PM
Hosted at Jessie Trice Community Health System
5361 NW 22nd Avenue, 2nd Floor, Miami 33142



Special Presentation: Cultural Humility - Session 1
Monday, August 29, 2022, 5: 30 PM – 7: 30 PM
Hosted at Pridelines
6360 NE 4th Court, Miami 33138



Special Presentation: Cultural Humility - Session 2
Monday, September 26, 2022, 5: 30 PM – 7: 30 PM
Hosted at Borinquen Medical Centers
3601 Federal Highway, Miami 33137

Your *RSVP* ensures we can provide enough food & resource materials.

To RSVP, please scan the QR code, [click here](#),
call (305) 445-1076, or email hiv-aidsinfo@behavioralscience.com.

Visit www.aidsnet.org for more information.



Because many Partnership members and guests are immunocompromised, attendees are asked to wear a mask to these events.
We hope you will respect the health concerns of members and guests and choose to wear a mask.



The Miami-Dade HIV/AIDS Partnership is the Official County Advisory Board for HIV in Miami-Dade County. The Community Coalition selects Partnership members and ensures Partnership decisions represent the needs of people with HIV in Miami-Dade County.

2022 NEEDS ASSESSMENT

EVALUATION: SEPTEMBER 1, 2022

Your responses and comments are important for developing future Needs Assessment programs. Please complete the evaluation form by checking the appropriate box after each statement.

INFORMATION						
Name <i>Optional</i>						
Membership <i>Check all that apply</i> <input type="checkbox"/> Care & Treatment Committee <input type="checkbox"/> Partnership <input type="checkbox"/> Other Committee(s) <input type="checkbox"/> Non-Member/Visitor						
Did you attend the June 2, 2022, meeting? Yes <input type="checkbox"/> No <input type="checkbox"/>						
Did you attend the July 7, 2022, meeting? Yes <input type="checkbox"/> No <input type="checkbox"/>						
Did you attend the August 4, 2022, meeting? Yes <input type="checkbox"/> No <input type="checkbox"/>						
PRESENTATIONS						
<i>For each item below please check off if the presentation was useful:</i>	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	I learned something new
Ryan White Program FY 2021	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Co-occurring Conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Input: Results from Integrated Plan and HIV and Aging Topics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unmet Need/Service Gaps and Projections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ITEMS						
<i>For each item below please check off if this information was fair:</i>	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	I learned something new
Special Directives						
Priority Setting						
Resource Allocations						
PROGRAM						
<i>For each item below please check off if:</i>	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	
The meeting was well organized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Three hours was enough time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All my questions were answered completely.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
COMMENTS (use reverse side, if needed)						

Thank you for your input.



**Care and Treatment
Thursday, September 1, 2022**

10:00 a.m. – 1:00 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 | Frederick Downs, Jr. |
| III. | Introductions | All |
| IV. | Floor Open to the Public | Dr. Diego Shmuels |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of August 4, 2022 | All |
| VII. | Reports | |
| | • Part A | Dan Wall |
| | • Vacancies | Marlen Meizoso |
| VIII. | Standing Business | |
| | • None | |
| IX. | New Business | |
| | • Ryan White Program FY 2021 Co-occurring Conditions | Dr. Robert Ladner |
| | • Community Input: Results from Integrated Plan and HIV and Aging Topics | Christina Bontempo/
Marlen Meizoso |
| | • Unmet Need/ Service Gaps | Dr. Robert Ladner |
| | • Summary to Date and Next Steps | Marlen Meizoso |
| | • Special Directives | All |
| | • Priority Setting | All |
| | • Resource Allocations (flat and application) | All |
| X. | Announcements | Marlen Meizoso |
| XI. | Next Meeting: October 6, 2022 at Main Library- Auditorium | Frederick Downs, Jr. |
| 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**

Follow Us: www.aidsnet.org | facebook.com/HIVPartnership | twitter.com/HIVPartnership | instagram.com/hiv_partnership/



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