



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee Friday, April 28, 2023

9:30 a.m. – 11:30 a.m.

Behavioral Science Research
2121 Ponce de Leon Blvd., Ste. 240
Miami, FL 33134

AGENDA

I.	Call to Order	James Dougherty
II.	Introductions	James Dougherty
III.	Meeting Housekeeping and Rules	James Dougherty
IV.	Floor Open to the Public	James Dougherty
V.	Review/Approve Agenda	All
VI.	Review/Approve Minutes of February 24, 2023	All
VII.	Reports	
	• Ryan White Program	Carla Valle-Schwenk
	• ADAP Program	Dr. Javier Romero
	• Vacancy Report	Marlen Meizoso
VIII.	Standing Business	
	• Allowable Medical Conditions Edits	All
	• Service Descriptions: Mental Health	All
	• December 2022, ADAP Formulary Additions Review Items# 45-75	All
IX.	New Business	
	• None	All
X.	Open Discussion and Announcements	All
XI.	Next Meeting: May 26, 2023 at BSR	James Dougherty
XII.	Adjournment	James Dougherty

Please turn off or mute cellular devices – Thank you

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



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Meeting Housekeeping

Updated April 13, 2023
Behavioral Science Research

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 . . .

General Housekeeping

- ❑ You must sign in to be counted as present.
- ❑ Place cell phones on mute or vibrate - *If you must take a call, please excuse yourself from the meeting.*
- ❑ Eligible committee members should see staff for a voucher at the end of the meeting

Meeting Participation

- ❑ Raise your hand if you need clarification about any terminology or acronyms used throughout the meeting.
- ❑ Raise your hand to be recognized by the Chair or added to 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.

Resources

- ❑ Behavioral Science Research Corp. (BSR) staff are the Resource Persons for this meeting.
- ❑ See staff after the meeting if you are interested in membership or if you have a question that wasn't covered during the meeting.
- ❑ Today's presentation and supporting documents are online at aidsnet.org/meeting-documents/.



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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 line for statements to be read into the record. No statements were received.”



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**Medical Care Subcommittee Meeting
Behavioral Science Research
2121 Ponce de Leon Blvd., Ste. 240
Coral Gables, FL 33134
February 24, 2023**

#	Members	Present	Absent	Guests	
1	Baez, Ivet	X		Sian Clements	
2	Cortes, Wanda	X		Ana M. Nieto	
3	Dougherty, James	X		Paulyn Ortega	
4	Friedman, Lawrence	X		Astrid Orozco	
5	Goubeaux, Robert	X		Carla Valle-Schwenk	
6	Llambes, Stephanie	X			
7	Miller, Juliet	X			
8	Thornton, Darren		X		
9	Romero, Javier		X		
10	Ysea, Cristhian A.	X		Staff	
Quorum: 4				Robert Ladner	Marlen Meizoso

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

I. Call to Order

Dr. Robert Goubeaux

Dr. Robert Goubeaux, the Chair, called the meeting to order at 9:33 a.m. He introduced himself and welcomed everyone.

II. Meeting Housekeeping and Rules

James Dougherty

Mr. Dougherty reviewed the meeting rules and housekeeping presentation (copy on file), which provided the ground rules and reminders for the meeting. He identified Behavioral Science Research (BSR) staff as resource persons for the meeting. If anyone has any questions, BSR would be available to answer them after the meeting.

III. Introductions

Dr. Robert Goubeaux

Dr. Robert Goubeaux requested members and guests to introduce themselves around the room.

IV. Floor Open to the Public

James Dougherty

Mr. Dougherty read the following: "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.”

There were no comments, so the floor was closed.

V. Review/Approve Agenda

All

The Subcommittee reviewed and accepted the agenda.

Motion to accept the agenda as presented.

Moved: Ivet Baez

Second: James Dougherty

Motion: Passed

VI. Review/Approve Minutes of January 27, 2023

All

Members reviewed the minutes of January 27, 2023 and made a motion to approve the minutes as presented.

Motion to accept the minutes of January 27, 2023 as presented.

Moved: James Dougherty

Second: Stephanie Llambes

Motion: Passed

VII. Reports

▪ **Ryan White Program**

Carla Valle-Schwenk

Carla Valle-Schwenk referenced the December 2022 report as of February 16, 2023 (copies on file). A total of 8,312 unduplicated clients have been served. The fiscal year ends on Tuesday. Final expenditures should be available in May but invoices through December indicated 62% of direct service dollars have been spent under Part A and 46% under MAI. Additional invoices are being processed and the 95% formulary expenditure threshold will be met. A significant carryover is expected. Under TT/RA, 3,348 clients have been serviced since the program's inception with 74% being virally suppressed. Reports are current and the RSR report is due shortly. Provisional award letters have been sent out since a partial award was received (\$4.7 million). The EHE RFP is close to being released and will contain a housing component. The County continues to work with FCPN partners and has a meeting scheduled with State Part A and B grantees in Orlando to work on issues such as the data to care project. There is a statewide needs assessment survey posted online which HIV+ clients are being requested to complete with replies due by the end of March. The State also sent out a status neutral survey for completion. Site visits have been completed for the year. Reimbursement rates will be increased for case management since recertifications will be annual.

▪ **ADAP Program**

Marlen Meizoso for Dr. Javier Romero

Dr. Javier Romero was unavailable, so Marlen Meizoso reviewed the January 2023 report as of February 6 (copy on file) including enrollments, expenditures, prescriptions, premium payments, and program updates.

▪ **Vacancy Report**

Marlen Meizoso

Marlen Meizoso referenced the membership vacancy report (copy on file) based on the revised membership. There are several vacancies on the Subcommittee and on the Partnership also. The only remaining vacancies on the Subcommittee are for a mental health professional and five members of the affected. If anyone knows

of individuals interested in membership , they may contact staff, invite them to attend a meeting or any of “Get on Board” trainings.

▪ **Report to Committees (reference only)**

All

Dr. Goubeaux indicated the report to committees is posted online. The report details the items approved at the February 21, 2023, Partnership meeting including recommendations for new members and updates to the Policy and Procedure manual. Any questions can be directed to staff.

VIII. Standing Business

Allowable Medical Conditions Edits

All

Based on the request at the last meeting to eliminate duplications, the current revision is included in the meeting packets (copy on file). There are strike-throughs for items that appear twice. Specialties were grouped and duplicate items were included in the new groupings. The Subcommittee made additional recommended changes:

- In the blue box change “and” to “or” in the first sentence.
- Add “this is not exhaustive and a sample guideline” and bold the statement.
- Strike sentence “This list...by HIV or its treatment.”
- Bold statement under the blue box.
- Add heart disease under cardiology.
- Move “tinea infections” from a standalone condition under dermatology into joint a specialty with OB/GU.
- Strike “vaginal candidiasis” and change to “vaginitis.”

For the next iteration, strikethroughs (removals) and highlights (additions) will be removed presenting a clean (final) version of the document.

Service Descriptions: Mental Health and Substance Abuse

All

Drafts of the Mental Health and Substance Abuse service definitions were shared with the Subcommittee for further input (copies on file). The Subcommittee began by reviewing the mental health service definition which had been deferred until the next meeting. The following suggestions were made:

- Adopting clients throughout the document and changing some of the language.
- Treatment plans should be updated every 6 months.
- Add language to the first sentence “provide treatment for diagnosed behavioral health disorders and improve client health outcomes.”
- Add language from the substance abuse service description regarding ICD and DSM codes.
- Strike last sentence in the first paragraph.
- Reword sentence “psychiatric treatment” striking “that is...” adding “with” and striking “process ...and” and adding “should be” adding “recorded” after bill.
- Strike reference to “individuals served” and leave as “clients.”

Additional modifications will be made to the language and brought back to the next meeting.

Motion to extend the meeting by 15 minutes.

Moved: Stephanie Llambes

Seconded: Ivet Baez

Motion: Passed

The Subcommittee reviewed the Substance Abuse Service description with the changes requested at the prior meeting in redline. The Subcommittee approved the document as presented.

Motion to approve the Substance Abuse service description, as presented.

Moved: James Dougherty

Seconded: Juliet Miller

Motion: Passed

December 2022, ADAP Formulary Additions Review Items #1-44

All

Based on the discussion at the last meeting the larger December 2022 the ADAP program analysis was broken up and the first forty-four items were presented (copy on file). Any OTC items were shaded out, any items over \$1 were highlighted, and the document has a pharmacological and therapeutic sort. The Subcommittee suggested adding all but nine medications which were not cost-effective, had drug interactions or increased pill burden. Two medications (#18 and #22) were restricted to tablets only.

Motion to add all the medications included in the December 2022 ADAP formulary additions to the Ryan White Prescription Drug Formulary Items #1-44 sheet to the Ryan White Formulary with the restriction on #18 levonorgestrel and #22 clonidine to tablets only but excluding the following nine items: #2 diclofenac, #3 nepafenac, #10 rifapentine, #20 bempedoic acid, #24 olmesartan, #28 olmesartan/hydrochlorothiazide, #36 ezetimibe/rosuvastatin, #39 evolocumab, and #40 alirocumab.

Moved: Stephanie Llambes

Seconded: Cristhian Ysea

Motion: Passed

Data on Letters of Medical Necessity

All

Per the request of the Subcommittee, data were pulled for the four letters of medical necessity (copy on file). Only data on the three medications were reviewed: the letter for the lab is not being used since another payor pays for the services. There is very low utilization on all the items.

Revision to Four Letter of Medical Necessity

All

The revisions to all four letters of medical necessity were shared again (copies on file). Based on the data previously reviewed, the Subcommittee decided to discontinue the letters to reduce the paper burden since there is very low if any usage.

Motion to discontinue the Letters of Medical Necessity for 1) Roxicodone and Percocet, 2) Neupogen, 3) Procrit or Epogen, and 4) the (lab test) for the Highly Sensitive Tropism Assay required to prescribe Maraviroc.

Moved: James Dougherty

Seconded: Juliet Miller

Motion: Passed

IX. New Business

Oral Health Code Request: D5284-Removal unilateral partial denture and D3221-Pulpal debridement

All

There was a request to add two codes, D5284-Removal unilateral partial denture and D3221-Pulpal debridement to the Oral Health Care formulary (copy on file). Staff reached out to the former members of

the oral health care workgroup to get their opinion on the two codes. The members agreed that the codes would be beneficial to clients, so the Subcommittee voted to adopt the codes.

Motion to add D5284-Removal unilateral partial denture and D3221-Pulpal debridement to the Ryan White Oral Health Care formulary.

Moved: Dr. Lawrence Friedman

Seconded: James Dougherty

Motion: Passed

X. Announcements

All

Mrs. Meizoso indicated that for those members who were not present at last month's meeting, the source of income forms and annual disclosures are included in their member materials to complete. Both forms are required to be completed annually.

XI. Next Meeting

James Dougherty

The next Subcommittee meeting will be held Friday, March 24, 2022, at 9:30 a.m. at BSR. Several members indicated they may not be able to attend the next meeting. Staff will inquire with members if they can attend prior to sending out the next meeting notice. The April meeting is scheduled for April 28, 2023.

XII. Adjournment

Dr. Robert Goubeaux

Dr. Goubeaux requested a motion to adjourn, and the meeting concluded at 11:37 a.m.

Motion to adjourn.

Moved: Juliet Miller

Seconded: Ivet Baez

Motion: Passed



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RYAN WHITE PART A PROGRAM
MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY
FOR THE PERIOD OF:

February 2023

FUNDING SOURCE(S) INCLUDED:

Ryan White Part A
Ryan White MAI

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
	4	252	4	156
	170	4,854	125	1,454
	9,026	100,052	4,306	8,085
	41	766	17	101
	518	9,236	408	2,509
	1,926	31,315	1,068	4,505
	3	73	2	22
	1,932	21,700	730	1,130
	198	5,143	117	727
	48	751	15	78
	68	847	24	155
	230	4,466	13	65
TOTALS:	14,164	179,455		
Total unduplicated clients (month):	5,015			
Total unduplicated clients (YTD):	8,590			

See page 4 for
Service Unit
Definitions

RYAN WHITE PART A PROGRAM
MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

February 2023

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
	4	252	4	156
	170	4,854	125	1,454
	8,213	89,579	4,034	7,894
	41	746	17	93
	518	9,236	408	2,509
	1,801	29,141	1,007	4,441
	3	59	2	17
	1,932	21,700	730	1,130
	189	5,046	108	713
	48	751	15	78
	67	820	23	129
	230	4,466	13	65
TOTALS:	13,216	166,650		
Total unduplicated clients (month):	4,816			
Total unduplicated clients (YTD):	8,526			

RYAN WHITE PART A PROGRAM
MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

SERVICE CATEGORIES

February 2023

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	813	10,473	406	937
Mental Health Services	0	20	0	8
Outpatient Ambulatory Health Services	125	2,174	87	680
Substance Abuse Outpatient Care	0	14	0	5
Support Services				
Medical Transportation	9	97	9	26
Outreach Services	1	27	1	26
TOTALS:	948	12,805		
Total unduplicated clients (month):	470			
Total unduplicated clients (YTD):	1,351			

Miami-Dade County Ryan White Part A/MAI Program

Service Unit Definitions

Service Categories	Service Unit Definition
Core Medical Services	
AIDS Pharmaceutical Assistance (Local Pharmaceutical Assistance Program; LPAP)	1 filled prescription
Health Insurance Premium & Cost Sharing Assistance	1 health insurance payment (copayment or deductible)
Medical Case Management (MCM; Incl. Treatment Adherence)	1 MCM encounter
Mental Health Services	1 individual or group encounter
Oral Health Care	1 oral health care visit
Outpatient/Ambulatory Health Services	1 medical visit
Substance Abuse Outpatient Care	1 individual or group encounter
Support Services	
Emergency Financial Assistance (limited access)	1 filled prescription
Food Bank	1 bag of groceries
Medical Transportation	1 medical transportation voucher or one-way rideshare trip
Other Professional Services (Legal Assistance & Permanency Planning)	1 hour of legal assistance
Outreach Services	1 individual encounter
Substance Abuse Services-Residential	1 day of residential substance abuse services

NOTE: MAI-funded services are limited to minority clients from priority subpopulations or emerging need subpopulations.

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

PART A

This report includes YTD paid reimbursements for FY 2022 Part A service months up to February 2023, as of 4/7/2023. This report reflects reimbursement requests that were regularly due by 3/20/2023, as well as final invoices due by 4/7/2023; and have been paid thus far. Additional invoices may be received by 11:59 p.m. on 4/7/2023. Pending Part A reimbursement requests that have been received and are in the review process currently total \$1,068,651.82.

Project #: BURW3201	AWARD AMOUNTS	ACTIVITIES	
Grant Award Amount Formula	16,141,380.00	FORMULA	
Grant Award Amount Supplemental	4,121,835.00	SUPPLEMENTAL	FY 2022 Award
Grant Award Amount FY'20 Supplemental	4,268,879.00	PY_SUPPLEMENTAL	\$24,532,094
Carryover Award FY'21 Formula	4,076,477.00	CARRYOVER	
Total Award	\$ 28,608,571.00		

Note:

The recipient has reached its budgeted direct services Formula minimum expenditures. Until the end of the current period of performance, only budgeted Administrative and Quality Management expenditures and a carryover allowance will be applied to this funding source in order to surpass the 95% minimum expenditure threshold.

Priority Order

CONTRACT ALLOCATIONS/ FORMULA, SUPPLEMENTAL & CARRYOVER

DIRECT SERVICES:

Core Medical Services	Allocations	Carryover Allocations
4 AIDS Pharmaceutical Assistance	84,492.00	
6 Health Insurance Services	335,776.00	259,924.00
1 Medical Case Management	5,826,737.00	400,000.00
3 Mental Health Therapy/Counseling	51,237.00	91,457.00
5 Oral Health Care	2,864,445.00	1,000,000.00
2 Outpatient/Ambulatory Health Svcs	8,695,763.00	600,000.00
9 Substance Abuse - Outpatient	28,099.00	17,369.00

CORE Services Totals: 20,255,299.00

Support Services	Allocations	Carryover Allocations
11 Emergency Financial Assistance	9,853.00	
8 Food Bank	1,660,108.00	1,000,000.00
10 Medical Transportation	209,912.00	
13 Other Professional Services	154,449.00	
12 Outreach Services	178,086.00	
7 Substance Abuse - Residential	1,338,406.00	200,000.00

SUPPORT Services Totals: 4,750,814.00

DIRECT SERVICES TOTAL: \$ 25,006,113.00

Total Core Allocation 17,886,549.00
Target at least 80% core service allocation 17,149,890.40
Current Difference (Short) / Over \$ 736,658.60

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) \$ 507,727.00 3,602,458.00 28,608,571.00

Core medical % against Total Direct Service Allocation (Not including C/O):

Cannot be under 75% 83.44% 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	3,780.72	
5606920000	Health Insurance Services	267,781.17	0.00
5606870000	Medical Case Management	5,166,794.95	0.00
5606860000	Mental Health Therapy/Counseling	51,237.00	11,813.00
5606900000	Oral Health Care	2,864,445.00	141,358.50
5606610000	Outpatient/Ambulatory Health Svcs	7,107,564.42	0.00
5606910000	Substance Abuse - Outpatient	4,251.00	0.00

CORE Services Totals: 15,619,025.76

Account	Support Services	Expenditures	Carryover Expenditures
5606940000	Emergency Financial Assistance	0.00	
5606980000	Food Bank	1,540,864.00	1,000,000.00
5606460000	Medical Transportation	151,066.62	
5606890000	Other Professional Services	63,243.00	
5606950000	Outreach Services	108,220.94	
5606930000	Substance Abuse - Residential	981,300.00	0.00

SUPPORT Services Total: 3,844,694.56

TOTAL EXPENDITURES DIRECT SVCS & % : \$ 19,463,720.32 77.84%

Formula Expenditure % 94.84%

5606710000 Recipient Administration 1,642,024.58

5606880000 Quality Management 620,491.00 2,262,515.58

Grant Unexpended Balance FY 2022 Award 3,959,029.60 Carryover 2,923,305.50 6,882,335.10

Total Grant Expenditures & % \$ 21,726,235.90 75.94%

Core medical % against Total Direct Service Expenditures (Not including C/O):

Cannot be under 75% 97.02% Within Limit

Quality Management % of Total Award (Not including C/O):

Cannot be over 5% 2.53% Within Limit

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

Cannot be over 10% 6.69% Within Limit

Printed on: 4/7/2023

Page 1

MAI

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 February 2023, as of 4/7/2023. This report reflects reimbursement requests that were regularly due by 3/20/2023, as well as final invoices due by 4/7/2023; and have been paid thus far. Additional invoices may be received by 11:59 p.m. on 4/7/2023. Pending MAI reimbursement requests that have been received and are in the review process currently total \$23.00.

PROJECT #: BURW3201	AWARD 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 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

Quality Management \$ 106,883.00

(+) Unobligated Funds / (-) Over Obligated:

Unobligated Funds (MAI)	\$ -	378,208.00	2,713,251.00
Unobligated Funds (Carry Over)	\$ 1,212,670.00		

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	616,290.20	
5606860000	Mental Health Therapy/Counseling	1,007.50	
5606900000	Oral Health Care		
5606610000	Outpatient/Ambulatory Health Svcs	621,709.68	
5606910000	Substance Abuse - Outpatient	570.00	1,239,577.38

Account	Support Services	Expenditures	Carryover Expenditures
5606940000	Emergency Financial Assistance	0.00	
5606980000	Food Bank		
5606460000	Medical Transportation	5,647.59	
5606890000	Other Professional Services		
5606950000	Outreach Services	36,498.00	
5606930000	Substance Abuse - Residential		42,145.59

TOTAL EXPENDITURES DIRECT SVCS & %: \$ 1,281,722.97 54.89%

5606710000	Recipient Administration	138,968.04	
5606880000	Quality Management	106,883.00	245,851.04

Grant Unexpended Balance

FY 2022 Award

Carryover

1,185,676.99 1,212,670.00 2,398,346.99

Total Grant Expenditures & % (Including C/O): \$ 1,527,574.01 38.91%

Core medical % against Total Direct Service Expenditures (Not including C/O):

Cannot be under 75% 96.71% 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% 5.12% Within Limit



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, April 28, 2023

9:30 a.m. – 11:30 a.m.

Behavioral Science Research
2121 Ponce de Leon Blvd., Ste. 240
Miami, FL 33134

AGENDA

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| | • Ryan White Program | Carla Valle-Schwenk |
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| | • Vacancy Report | Marlen Meizoso |
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| | • Allowable Medical Conditions Edits | All |
| | • Service Descriptions: Mental Health | All |
| | • December 2022, ADAP Formulary Additions Review Items# 45-75 | All |
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| | • None | All |
| X. | Open Discussion and Announcements | All |
| XI. | Next Meeting: May 26, 2023 at BSR | James Dougherty |
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For more information, regarding the Miami-Dade HIV/AIDS Partnership's Medical Care Subcommittee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

Mission:

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



Vision: To be the Healthiest State in the Nation

Ron DeSantis

Governor

Joseph A. Ladapo, M.D., Ph.D.

State Surgeon General

April 7, 2023

ADAP Miami-Dade / Summary Report* – March 2023

Fiscal Year	1 st 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 >	1,080	11,342		\$26,011,252.99	44,997	14,827	3.0	\$35,906,940.99	28,587	\$1,256.06
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	917	6,352	\$2,454,007.19	4,158	1,367	3.0	\$2,731,186.36	2,287	\$1,194.22
Oct-22	103	945	6,260	\$2,188,894.51	3,798	1,237	3.1	\$2,726,877.33	2,273	\$1,199.68
Nov-22	72	907	6,241	\$1,926,172.25	3,227	1,075	3.0	\$2,707,404.96	2,252	\$1,202.22
Dec-22	94	1008	6,301	\$2,011,314.10	3,370	1,129	3.0	\$2,715,906.41	2,272	\$1,195.38
Jan-23	79	923	6,345	\$1,872,593.42	3,329	1,071	3.1	\$3,555,449.56	2,501	\$1,421.61
Feb-23	67	963	6,416	\$1,598,981.78	2,802	937	3.0	\$3,678,207.52	2588	\$1,421.25
Mar-23	116	1075	6,494	\$1,721,460.32	3,221	1,028	3.1	\$3,680,788.00	2581	\$1,426.11

SOURCE: Provide - DATE: 04/07/23 - Subject to Review & Editing

* NOTE: West Perrine: 449 clients (04/07/23): DD 267; PP 182. Expenditures not included in this report.

PROGRAM UPDATE

- * 4/1/23: Cabenuva @ utilization @ ADAP Miami: 135 patients. Direct Dispense 65 (48%); Premium Plus 70 (52%)
- * 4/1/23: **NEW** Medicaid Unwinding (4/1/23-3/31/24): Eligible for ADAP approved plans. Medicaid letter (<400%); not letter (75-400%).
- * 4/1/23: **NEW** Copay & Deductible Assistance for non-approved ACA-MP plans (6 clients). Client pays premium. Program pays maximum out of pocket (MOOP).
- * 4/1/23: **NEW** CHI added to Uninsured Pharmacy Network – Magellan RX PBM (2 sites). Care Resource no longer participating (2/1/23).

CURRENT Ongoing CHD Pharmacy Services		
1	CHD Pharmacy @ Flagler Street	On Site
2	CHD Pharmacy @ Flagler Street	Mail order
3	ADAP Program @ West Perrine	CVS Specialty Mail Order

ADDITIONAL Pharmacies - Magellan RX PBM Miami-Dade – As of 4/1/23		
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	CVS Specialty Mail Order	Mail Order / Monroeville, PA
6	NEW Community Health of South Florida - CHI	Two (2) sites

NOTE: Client's choice, not from providers, case managers, pharmacies, agencies; changes without client's knowledge or agreement. Confusion and delays. - No dual dispensing allowed.

For additional information: www.ADAPMiami.com or ADAP.FLDOHMDC@flhealth.gov

Dear Colleagues,

We are pleased to announce an update to the AIDS Drug Assistance Program (ADAP) formulary May 1, 2023. These changes will improve the provision of quality treatment and allow ADAP clients to receive the latest medications.

Changes were implemented after review and consideration by the HIV Section Medication Formulary Workgroup, the Bureau of Public Health Pharmacy: Pharmacy and Therapeutics Committee, and the HIV/AIDS Section's administration.

The following medications are being added:

- Betamethasone/clotrimazole
- Ciprofloxacin/dexamethasone
- Dextromethorphan/promethazine
- Fluticasone/salmeterol
- Budesonide

Please direct any medical questions to Jeannette Iriye, RN, BSN, MSN, HIV/AIDS nurse consultant, at Jeannette.Iriye@flhealth.gov or 850-901-6708 or Dr. Andréa Sciberras, Medical Director, Division of Disease Control and Health Protection, at Andrea.Sciberras@flhealth.gov or (850) 756-2283.

If you have any questions or concerns regarding these formulary changes, contact the ADAP Central Office at 844-381-2327.

The complete ADAP formulary is available at FloridaADAP.org.

Kind regards,

Jimmy R. LLaque, Director
Florida HIV Patient Care and Treatment Access Program

Florida Department of Health | Division of Disease Control and Health Protection | Bureau of Communicable Diseases | HIV/AIDS Section
4052 Bald Cypress Way, Bin A-09, Tallahassee, FL 32399 | Office: 850.245.4477 | Mobile: 850.545.6836 | Fax: 850.412.2680

Florida Health, nationally accredited by the Public Health Accreditation Board, works to protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.

NOTE: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your email communication may therefore be subject to public disclosure.



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, April 28, 2023

9:30 a.m. – 11:30 a.m.

Behavioral Science Research
2121 Ponce de Leon Blvd., Ste. 240
Miami, FL 33134

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Membership Report

as of April 17, 2023

Partnership

11 available seats for People with HIV

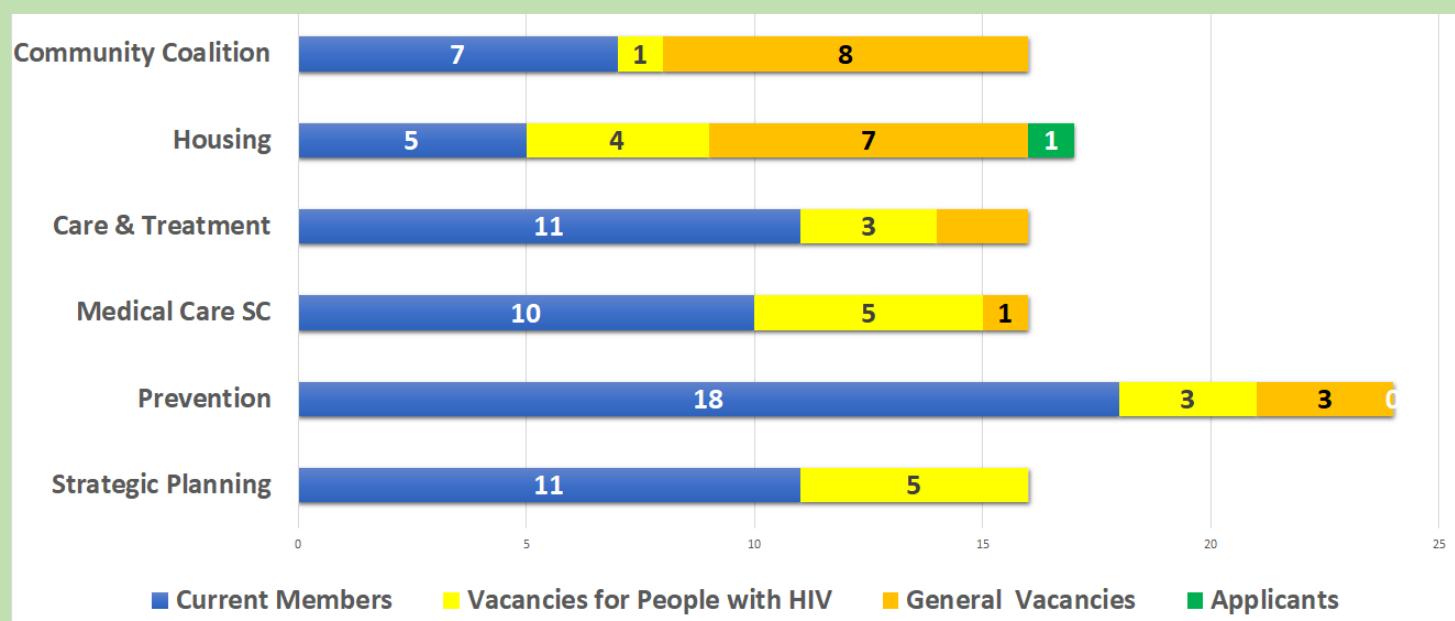
People with HIV who receive one or more Ryan White Program Part A services and who are not affiliated or employed by a Ryan White Program Part A funded service provider

6 available seats under the following categories:

- 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 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 the seats.

Partnership Committees





MIAMI-DADE HIV/AIDS PARTNERSHIP

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**MIAMI-DADE COUNTY RYAN WHITE PROGRAM
ALLOWABLE MEDICAL CONDITIONS LIST**

These conditions are related to or exacerbated by HIV, comorbidities related to HIV, or complications of HIV treatment.

Conditions listed may be accessible under multiple specialties though not specifically referenced.

This list is intended to address the federal Health Resources and Services Administration's requirement that services provided through outpatient medical care be related to an individual's HIV status. This list is not exhaustive and is a sample guideline created to assist medical providers with specialty care referrals and to emphasize the importance of documenting the link between an individual's HIV status and the specialty care service to which a client is referred.

Routine medical diagnostic testing (e.g., Pap smear, mammogram, bone density test, colonoscopy, colorectal cancer screening, and ophthalmologic screening) is allowable as long as such testing follows established medical guidelines, such as U.S. Public Health Service (PHS), American Medical Association, Health Resources and Services Administration (HRSA), or other local guidelines, as a standard of care. Please see the most current, local Ryan White Program Service Delivery Manual for more information.

When provided in an outpatient setting, labs, diagnostics, and treatments related to HIV, as indicated above, including complications of HIV treatment related to the following conditions may be covered:

BONE AND JOINT DISEASES (E.G., ORTHOPEDICS/RHEUMATOLOGY):

osteoarthritis

**BONE AND JOINT DISEASES (E.G., ORTHOPEDICS/RHEUMATOLOGY) and
CHIROPRACTIC/PHYSICAL MEDICINE:**

avascular necrosis of hip, knee, etc. (Stage 1 or 2 only for CHIROPRACTIC/PHYSICAL MEDICINE)

fibromyalgia

myopathy/myalgia, HIV-related (chronic for CHIROPRACTIC/PHYSICAL MEDICINE)

osteopenia/osteoporosis

rheumatic diseases

CARDIOLOGY:

atherosclerosis

coronary artery disease

heart disease

hyperlipidemia

peripheral artery disease

phlebitis

CHIROPRACTIC/PHYSICAL MEDICINE:

HIV-related chronic arthralgia

peripheral neuropathy

IMPORTANT NOTE: According to CDC, chronic pain is defined as pain having duration of at least three months. Chronic pain is considered a co-morbidity of HIV. This may also contribute to the depression with pain comorbidity

**MIAMI-DADE COUNTY RYAN WHITE PROGRAM
ALLOWABLE MEDICAL CONDITIONS LIST**

complex (DPC). Treatment of acute pain is not covered.

COLORECTAL:

abnormal anal Pap smears
fistulas
hernias

COLORECTAL and ONCOLOGY:

anal cancers

DENTAL (ORAL HEALTH CARE):

giant aphthous ulcers

DENTAL (ORAL HEALTH CARE); and EAR, NOSE and THROAT (ENT)/OTOLARYNGOLGY:

human papillomavirus associated oral lesions

**DENTAL (ORAL HEALTH CARE); EAR, NOSE and THROAT (ENT)/OTOLARYNGOLGY; and
ONCOLOGY:**

dental cancers
oral cancers

DERMATOLOGY:

dermatitis
eczema/seborrheic dermatitis
eosinophilic folliculitis
impetigo
Methicillin-resistant Staphylococcus aureus (MRSA)
molluscum contagiosum
photodermatitis
pruritus (as a symptom of undiagnosed xerosis, psoriasis, scabies, lymphoma, etc.)
psoriasis
skin conditions and symptoms, including skin appendages and oral mucosa
warts

DERMATOLOGY and GENITOURINARY (GU)/ GYNECOLOGY (GYN)/OBSTETRICS (OB):

tinea infections

DERMATOLOGY and INFECTIOUS DISEASES:

herpes simplex virus

DERMATOLOGY and ONCOLOGY:

Kaposi's sarcoma
skin cancers (squamous cell carcinoma, etc.)

DERMATOLOGY and PODIATRY:

onychomycosis

**MIAMI-DADE COUNTY RYAN WHITE PROGRAM
ALLOWABLE MEDICAL CONDITIONS LIST**

EAR, NOSE AND THROAT (ENT)/OTOLARYNGOLOGY:

chronic sinusitis
oral human papillomavirus

ENDOCRINOLOGY:

diabetes
hormone replacement therapy (for individuals of trans experience)
hypogonadism

GASTROINTESTINAL:

colitis (syphilitic colitis--very rare)
diarrhea
esophageal candidiasis
nausea/vomiting

GENITOURINARY (GU)/ GYNECOLOGY (GYN)/OBSTETRICS (OB):

abnormal Pap smear
cervical human papillomavirus
erectile dysfunction*
hematuria (related to neoplasms)
pregnancy
scrotal candidiasis
vaginitis

GENITOURINARY (GU)/ GYNECOLOGY (GYN)/OBSTETRICS (OB) and ONCOLOGY:

gynecological cancers
prostate cancer

**IMPORTANT NOTE: the local Ryan White Part A/MAI Program will only pay for evaluation and diagnostics of erectile dysfunction; but the treatment of erectile dysfunction is not covered by the local Ryan White Part A/MAI Program.*

HEMATOLOGY:

anemia
neutropenia
thrombocytopenia

HEMATOLOGY and ONCOLOGY:

polycythemia vera

INFECTIOUS DISEASE:

histoplasmosis
leishmaniasis
non-tuberculous mycobacterial infections
syphilis
varicella zoster infections
viral hepatitis (hepatitis B and C)

**MIAMI-DADE COUNTY RYAN WHITE PROGRAM
ALLOWABLE MEDICAL CONDITIONS LIST**

INFECTIOUS DISEASE and DERMATOLOGY:

Mpox

INFECTIOUS DISEASE and OPTHAMOLOGY:

toxoplasmosis

INFECTIOUS DISEASE and PULMONOLOGY:

tuberculosis

MENTAL HEALTH SERVICES and PSYCHIATRY:

mental health disorder caused or exacerbated by HIV diagnosis or HIV treatment

mental health disorder/condition that significantly hinders a client's HIV treatment adherence

IMPORTANT NOTES

Under Mental Health Services, a mental health professional (PhD, EdD, PsyD, MA, MS, MSW, or M. Ed) will assess, diagnose, and treat mental illness under the mental health service category.

Under Psychiatry, a Psychiatrist will assess, diagnose, and treat mental illness in an outpatient/ambulatory health care setting.

NEPHROLOGY:

human immunodeficiency virus-associated nephropathy

renal failure (may be related to coronary artery disease induced by HIV or diabetes mellitus induced by HIV, etc.)

NEUROLOGY:

delirium

HIV-associated neurocognitive disorder (HAND) ^{1, 2}

HIV- related encephalopathy

neuropathy

neurosyphilis

¹ National Institute of Mental Health info: <https://www.nimh.nih.gov/about/organization/dar/developmental-and-clinical-neuroscience-of-hiv-prevention-and-treatment-branch/clinical-neuroscience-of-hiv-infection-program>

[NOTE: old NIMH web link not accessible. Additional link added below by OMB-GC/Ryan White Program]

² UCSF Weill Institute for Neurosciences:

https://memory.ucsf.edu/sites/memory.ucsf.edu/files/wysiwyg/UCSF_HIV%20Dementia_Providers_11-6-17.pdf

NUTRITION:

lipodystrophy

wasting

weight gain

weight loss

**MIAMI-DADE COUNTY RYAN WHITE PROGRAM
ALLOWABLE MEDICAL CONDITIONS LIST**

ONCOLOGY:

Cancers may include but not limited to: breast, eye (e.g., squamous cell carcinoma of the eye, etc.), lymphoma, polycythemia vera, prostate

IMPORTANT NOTE: the local Ryan White Part A/MAI Program is restricted to evaluation, diagnostics, and treatment in an outpatient setting.

OPHTHALMOLOGY/OPTOMETRY:

Clients must also meet at least one of these criteria to access ophthalmology/optometry services:

- Client has a low CD4 count (at or less than 200 cells/mm³) *currently*
- Client has a comorbidity (e.g., diabetes, hypertension, STI, etc.)
- Client has a prior diagnosis of cytomegalovirus retinitis (CMV)
- Client has Immune Reconstitution Syndrome

Referrals to an optometrist or ophthalmologist must indicate a condition attempting to rule out complications of HIV. Any one of these conditions listed below would apply as examples.

Manifestations due to opportunistic infections:

- acute retinal necrosis
- bacterial retinitis
- candida endophthalmitis
- cryptococcus chorioretinitis
- cytomegalovirus retinitis
- pneumocystis choroiditis

Visual disturbances to rule out complication of HIV due to:

- cataracts
- dry eyes (sicca)
- glaucoma
- intra-retinal hemorrhages
- reactive arthritis
- trichomegaly or eyelash hypertrichosis (exaggerated growth of the eye lashes found in the later stages of the disease)
- uveitis

History of STI and complications of STI:

- herpes simplex virus
- herpes zoster-varicella visual changes
- syphilis

IMPORTANT NOTE: the local Ryan White Part A/MAI Program will only pay for evaluation and diagnostics for HIV-related eye problems/complications; but, not the filling of prescriptions for corrective lenses.

**MIAMI-DADE COUNTY RYAN WHITE PROGRAM
ALLOWABLE MEDICAL CONDITIONS LIST**

PODIATRY:

diabetic foot care
foot and ankle pain*

**IMPORTANT NOTE: the local Ryan White Part A/MAI Program will only pay for diagnostic evaluation of foot and ankle pain. Conditions such as hammer toes, bunions, heel spurs may be covered if related to neuropathies. Sprains or fractures are not covered unless a direct connection to neuropathies is present.*

PULMONARY:

mycobacterium
pneumocystis pneumonia
recurrent pneumonia



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, April 28, 2023

9:30 a.m. – 11:30 a.m.

Behavioral Science Research
2121 Ponce de Leon Blvd., Ste. 240
Miami, FL 33134

AGENDA

- | | | |
|-------|---|---------------------|
| I. | Call to Order | James Dougherty |
| II. | Introductions | James Dougherty |
| III. | Meeting Housekeeping and Rules | James Dougherty |
| IV. | Floor Open to the Public | James Dougherty |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of February 24, 2023 | All |
| VII. | Reports | |
| | • Ryan White Program | Carla Valle-Schwenk |
| | • ADAP Program | Dr. Javier Romero |
| | • Vacancy Report | Marlen Meizoso |
| VIII. | Standing Business | |
| | • Allowable Medical Conditions Edits | All |
| | • Service Descriptions: Mental Health | All |
| | • December 2022, ADAP Formulary Additions Review Items# 45-75 | All |
| IX. | New Business | |
| | • None | All |
| X. | Open Discussion and Announcements | All |
| XI. | Next Meeting: May 26, 2023 at BSR | James Dougherty |
| XII. | Adjournment | James Dougherty |

Please turn off or mute cellular devices – Thank you

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

MENTAL HEALTH SERVICES
(Year 33 Service Priorities: #9 for Part A and #4 for MAI)

Mental Health Services are a set of core medical services that consist of counseling and treatment for diagnosed behavioral health disorders. These services are designed to reduce harmful behaviors and episodes of instability and improve mental status and client health outcomes. These Mental Health Services include the provision of outpatient psychological and behavioral health screening, assessment, diagnosis, treatment, and counseling services offered to people with HIV. Services are based on an individualized treatment plan and are conducted in group and individual sessions. All services are provided by mental health professionals licensed or otherwise authorized within the State of Florida to render such services. All clients receiving this service must have at least one mental or behavioral health diagnosis specified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) or International Classification of Disease, Tenth Revision, Clinical Modification (ICD-10-CM; Codes F01-F99, excluding “Mental and behavioral disorders due to psychoactive substance use” – codes F10-F19).

Mental Health Services require an individualized treatment plan, as noted above. Treatment plans incorporate the findings of assessment and diagnostic tools and specify the goals and objectives to be achieved during the treatment episode. The treatment plan also specifies the recommended clinical interventions and frequency with which these interventions shall be delivered. 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 receives a mental health treatment plan review at least every six months.

Psychiatric treatment with medication management and evaluation should be billed and recorded under Outpatient/Ambulatory Health Services.

Mental Health Services are allowable only for program-eligible 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 (e.g., 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 issues that impact a person’s ability to remain engaged in HIV care, strengthen coping skills and self-care, and promote engagement in ongoing medical care and treatment. It is important for the Level I or Level II mental health professional to regularly gauge and document 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 must provide services under the supervision of a LCSW, LMHC, LMFT or Licensed Psychologist licensed in the State of Florida.

Mental Health Service Components:

Level I counseling services provided to Ryan White Program clients include psychosocial assessment and evaluation, testing, diagnosis, treatment planning with written goals, crisis counseling, periodic re-assessments, re-evaluations of plans and goals documenting progress, and referrals to psychiatric and/or other services as appropriate. Issues of relevance to clients living with HIV 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 ½ hours) per session; 1 encounter = 1 day of service].

Level II counseling services provided to Ryan White Program clients 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 clients living with HIV 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 ½ 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 problem-solving, 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 may affect a client's 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 2023 Service Delivery Manual for details, as may be amended.)

Rules for Reimbursement: Reimbursement for individual and group Mental Health Services will be based on a half-hour counseling session "unit" 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 per client), whereas, reimbursement for group counseling units are calculated for the counselor that provided the group counseling (i.e., number of group counseling units per counselor).

Tele-mental health services are reimbursed as follows:

Billing Code	Description	Flat rate 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

- C. 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.
- D. 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 specific mental or behavioral health diagnosis and detailed treatment plan for each eligible client that includes all required components and the mental health professional's signature and/or the signature of person supervising the professional.
- E. 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/hiv-psychiatry> and

<https://www.psychiatry.org/psychiatrists/search-directories-databases>

Accessed 6/20/2022.

- 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 <https://psychiatryonline.org/guidelines>
Accessed 6/20/2022.

- Best Practices Compilation Search provides interventions that improved client treatment outcomes (viral load suppression, ARV adherence and retention in care):
<https://targethiv.org/bestpractices/search?keywords=mental%20health>
Accessed 1/5/2023

MENTAL HEALTH SERVICES

(Year 33 Service Priorities: #9 for Part A and #4 for MAI)

Mental Health Services are a set of core medical services that consist of counseling and treatment for diagnosed behavioral health disorders. These services are designed to reduce harmful behaviors and episodes of instability and improve mental status and client health outcomes. These Mental Health Services include the provision of outpatient psychological and behavioral health screening, assessment, diagnosis, treatment, and counseling services offered to people with HIV. Services are based on an individualized treatment plan and are conducted in group and individual sessions. All services are provided by mental health professionals licensed or otherwise authorized within the State of Florida to render such services. All clients receiving this service must have at least one mental or behavioral health diagnosis specified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) or International Classification of Disease, Tenth Revision, Clinical Modification (ICD-10-CM; Codes F01-F99, excluding "Mental and behavioral disorders due to psychoactive substance use" – codes F10-F19).

Mental Health Services require an individualized treatment plan, as noted above. Treatment plans incorporate the findings of assessment and diagnostic tools and specify the goals and objectives to be achieved during the treatment episode. The treatment plan also specifies the recommended clinical interventions and frequency with which these interventions shall be delivered. 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 receives a mental health treatment plan review at least every six months.

Psychiatric treatment with medication management and evaluation should be billed and recorded under Outpatient/Ambulatory Health Services.

Mental Health Services are allowable only for program-eligible 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 (e.g., 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 issues that impact a person's ability to remain engaged in HIV care, strengthen coping skills and self-care, and promote engagement in ongoing medical care and treatment. It is important for the Level I or Level II mental health professional to regularly gauge and document 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-

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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.

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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 problem-solving, and allows the therapist an opportunity to observe how an individual interacts with others.

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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 2023 Service Delivery Manual for details, as may be amended.)

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counseling units per client), whereas, reimbursement for group counseling units are calculated for the counselor that provided the group counseling (i.e., number of group counseling units per counselor).

Tele-mental health services are reimbursed as follows:

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

C. **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.

D. **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 specific mental or behavioral health diagnosis and detailed treatment plan for each eligible client that includes all required components and the mental health professional's signature and/or the signature of person supervising the professional.

E. **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/hiv-psychiatry> and

<https://www.psychiatry.org/psychiatrists/search-directories-databases>

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- 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 <https://psychiatryonline.org/guidelines>
Accessed 6/20/2022.

- Best Practices Compilation Search provides interventions that improved client treatment outcomes (viral load suppression, ARV adherence and retention in care):
<https://targethiv.org/bestpractices/search?keywords=mental%20health>
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MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, April 28, 2023

9:30 a.m. – 11:30 a.m.

Behavioral Science Research
2121 Ponce de Leon Blvd., Ste. 240
Miami, FL 33134

AGENDA

- | | | |
|-------|---|---------------------|
| I. | Call to Order | James Dougherty |
| II. | Introductions | James Dougherty |
| III. | Meeting Housekeeping and Rules | James Dougherty |
| IV. | Floor Open to the Public | James Dougherty |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of February 24, 2023 | All |
| VII. | Reports | |
| | • Ryan White Program | Carla Valle-Schwenk |
| | • ADAP Program | Dr. Javier Romero |
| | • Vacancy Report | Marlen Meizoso |
| VIII. | Standing Business | |
| | • Allowable Medical Conditions Edits | All |
| | • Service Descriptions: Mental Health | All |
| | • December 2022, ADAP Formulary Additions Review Items# 45-75 | All |
| IX. | New Business | |
| | • None | All |
| X. | Open Discussion and Announcements | All |
| XI. | Next Meeting: May 26, 2023 at BSR | James Dougherty |
| XII. | Adjournment | James Dougherty |

Please turn off or mute cellular devices – Thank you

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

December 2022 ADAP Formulary Additions
Ryan White Prescription Drug Formulary Review
Items 45-75 (Therapeutic/Pharmacological Sort)

	Generic Name	Brand Names	Therapeutic Classification	Pharmacologic Classification	Estimated 340B Cost (per unit or monthly cost)	On General Revenue	Ryan White Options	Notes/Comments
45	modafinil	Provigil	Central Nervous System	Stimulant	\$0.0090 (100mg); \$0.0090 (200mg)	no	no	sleep disorders
46	canagliflozin/metformin	Invokamet	Diabetes	Anti-diabetic	\$0.01 per tablet	no	no	Anti-diabetic. Indication: T2DM
47	dapagliflozin/metformin	Xigduo XR	Diabetes	Anti-diabetic	\$0.01 per tablet	no	no	Anti-diabetic. Indication: T2DM
48	glipizide/metformin	Metaglip	Diabetes	Anti-diabetic	\$0.01 per tablet	yes, as separate ingredients	yes, as separate ingredients	Anti-diabetic. Indication: T2DM
49	metformin/sitagliptin	Janumet	Diabetes	Anti-diabetic	\$0.01 per tablet	yes	no	Anti-diabetic. Indication: T2DM
50	pioglitazone	Actos	Diabetes	Anti-diabetic. Thiazolidinediones.	\$0.03-0.06 per tablet	yes	None on this class. glyburide, metformin	Anti-diabetic. Indication: T2DM
51	sildenafil	Viagra	Erectile Dysfunction	Phosphodiesterase-5 enzyme inhibitors	\$0.01 per tablet	no	no	Erectile Dysfunction. Avoid Nitrates
52	tadalafil	Cialis	Erectile Dysfunction	Phosphodiesterase-5 enzyme inhibitors	\$0.01 per tablet	no	no	Erectile Dysfunction
53	varденаfil	Levitra	Erectile Dysfunction	Phosphodiesterase-5 enzyme inhibitors	\$0.8 per tablet	no	no	Erectile Dysfunction
54	pancrelipase (amylase, lipase, protease)	Pancreaze	Gastrointestinal agent	Enzyme	\$0.6782 (2600U); \$1.0963 (4200U); \$2.7411 (10500U); \$4.4015 (16800U); \$5.4823 (21000U); \$12.4962 (37000U)	no	no	
55	lansoprazole	Prevacid	Gastrointestinal agent	Poton Pump Inhibitor	\$0.0193 (15 mg) ; \$0.0400 (30 mg)	no	omeprazole	
56	tizanidine	Zanaflex	Muscle Relaxant	Antispastic	\$0.01 per tablet	no	no	Indication: Muscle spasms and/ or musculoskeletal pain(off-label)/ spasticity(label use). Class: alpha-2 adrenergic agonist
57	amphetamine/dextroamphetamine	Adderall	Neurobehavioral/Neurologic Disorders	CNS Stimulant	\$0.01 per tablet for extended release formulation. Immediate release expensive and not available in generic.	no	atomoxetine	ADHD/narcolepsy
58	dorzolamide/ timolol	Cosopt	Ophthalmic agent, antiglaucoma	Non-selective betablocker, carbonic anhydrase inhibitor	\$0.451 (10 ml)	yes	no	Agents for glaucoma available in RW but no combination product available
59	travoprost	Travatan	Ophthalmic agent, antiglaucoma	Prostaglandin	\$3.600 (5 ml)	no	latanoprost	
60	loteprednol etabonate	Lotemax/Lotemex	Ophthalmic agent, corticosteroid	Corticosteroid	\$0.0500 (5 ml)	no	prednisolone	

December 2022 ADAP Formulary Additions
Ryan White Prescription Drug Formulary Review
Items 45-75 (Therapeutic/Pharmacological Sort)

	Generic Name	Brand Names	Therapeutic Classification	Pharmacologic Classification	Estimated 340B Cost (per unit or monthly cost)	On General Revenue	Ryan White Options	Notes/Comments
61	donepezil	Aricpet	Psychiatric Conditions	Acetylcholinesterase inhibitor	\$0.02- \$0.2 per tablet	no	no	Dementia/Alzheimer's Disease
62	lurasidone	Latuda	Psychiatric Conditions	Atypical antipsychotic	\$5.24-\$7.83 per tablet.	no	risperidone, quetiapine	Indication: Bipolar major depression, Schizophrenia. Class:2nd generation antipsychotics
63	fluoxetine/olanzapine	Symbyax	Psychiatric Conditions	SSRI/Atypical antipsychotic	\$1.53 per tablet (generic)	yes, as separate ingredients	sertraline, fluoxetine, venlafaxine, citalopram, olanzapine, paroxetine	Indication: Acute depressive episodes associated with bipolar I disorder/ Depression resistance
64	tiotropium	Spiriva	Pulmonary, anticholinergic	Long acting anticholinergic	\$0.0090 (18mcg)	yes	no	
65	fluticasone (nasal spray)	Flonase	Pulmonary, corticosteroids	Corticosteroids	\$0.11562 (16gm)	yes	nasarel, qnasl	
66	fluticasone (oral inhaled)	Flovent HFA	Pulmonary, corticosteroids	Corticosteroids	\$0.1000 (44mcg); \$0.1100 (110mcg); \$0.1100 (220mcg);	o	beclomethasone (oral)	asthma
67	lidocaine	Xylocaine	Skin and Mucous Membrane Preparation, Anesthetic	Anesthetic	\$0.0090(Lidoderm 5%brand) ; \$0.5950 (Lidocaine 5% generic)	yes (patch, viscous)	viscous only	
68	naloxone	Narcan	Substance Abuse	Opiate Antagonist	\$26.12 for Brand Narcan, 340B \$42.46 for generic naloxone, 340B,	yes	buprenorphine/naloxone (Suboxone);buprenorphine (Subutex)	
69	tretinoin	Retin-A	Topical skin	Retinoic acid derivative	\$0.009 (0.025%-20 gm cr.) ; \$0.009 (0.05%-20 gm cr.) ; \$0.035 (0.1%-20 gm cr.)	yes	benzoyl peroxide and clindamycin for acne	
70	hydrocortisone	Dermacort	Topical, corticosteroid	Corticosteroids	\$0.0735 (1%)	yes	In RW formulary, also triamcinolone, clobetasol	
71	mometasone (topical, nasal, oral inhalation)	Elocon	Topical, Pulmonary, corticosteroid	Corticosteroid	\$0.09 per unit gram (15gm cr) ; \$0.0100(110mcg oral inh) ; \$0.0100 (220mcg oral inh) ; \$0.7658 (17 gm nasal)	no	beclomethasone, flunisolide	
72	carbamide peroxide	OTC	Analgesic, anti-inflammatory	Cerumenolytic	\$0.3053 (15 ml)	no	no	
73	carboxymethylcellulose	OTC	Ophthalmic agent, miscellaneous	Miscellaneous	\$0.182 (15ml)	no	no	lubricating eye drops
74	lanolin alcohol-mo-w.pet-ceres (Eucerin)	Eucerin	Topical	Keratolytic	\$0.0566 (78 gm)	no	no	OTC
75	vitamin C	OTC	Vitamin	Vitamin	\$0.0124 (250mg); \$0.0121 (500mg)	no	no	Multiple vitamins in formulary



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, April 28, 2023

9:30 a.m. – 11:30 a.m.

Behavioral Science Research
2121 Ponce de Leon Blvd., Ste. 240
Miami, FL 33134

AGENDA

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| I. | Call to Order | James Dougherty |
| II. | Introductions | James Dougherty |
| III. | Meeting Housekeeping and Rules | James Dougherty |
| IV. | Floor Open to the Public | James Dougherty |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of February 24, 2023 | All |
| VII. | Reports | |
| | • Ryan White Program | Carla Valle-Schwenk |
| | • ADAP Program | Dr. Javier Romero |
| | • Vacancy Report | Marlen Meizoso |
| VIII. | Standing Business | |
| | • Allowable Medical Conditions Edits | All |
| | • Service Descriptions: Mental Health | All |
| | • December 2022, ADAP Formulary Additions Review Items# 45-75 | All |
| IX. | New Business | |
| | • None | All |
| X. | Open Discussion and Announcements | All |
| XI. | Next Meeting: May 26, 2023 at BSR | James Dougherty |
| XII. | Adjournment | James Dougherty |

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**Medical Care Subcommittee
Calendar of Activities 2023**

All items subject to change

	<div> <div>Officer Elections</div> <div>Conflict of Interest Forms/Financial Disclosure Forms</div> <div>Outpatient/Ambulatory Medical Care Standards</div> <div>Allowable Medical Conditions (reviewed as needed)</div> <div>Ryan White Prescription Drug Formulary (reviewed as needed)</div> <div>Oral Health Care Items (reviewed quarterly)</div> <div>Committee Items (added as needed)</div> </div>							
Month	Activities							Notes
January 27, 2023								minimum primary care standards, allowable medical conditions edits, MH and SA service descriptions, LOMN revision. ADAP formulary additions
February 24, 2023								allowable medical conditions edits, MH and SA service descriptions, LOMN utilization and revision, ADAP formulary additions, OHC items
March 24, 2023	N	N	N	N	N	N	N	
April 28, 2023								allowable medical conditions edits. SA service description, ADAP formulary additions
May 26, 2023								
June 23, 2023								
July 28, 2023								
August 25, 2023								
September 22, 2023								
October 27, 2023								
November 17, 2023								
December 2023	N	N	N	N	N	N	N	

Comments:
N=no meeting



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