

Attachment 3

September 27, 2023

Mr. Mark Peppler, MAHS Chief, Southern Services Branch Division of Metropolitan HIV/AIDS Programs HIV/AIDS Bureau Health Resources & Services Administration 5600 Fishers Lane Rockville, MD 20857

Re: Letter of Assurance from the Planning Council Chair for Fiscal Year 2024

Dear Mr. Peppler:

On behalf of the Miami-Dade HIV/AIDS Partnership (Partnership), the local Ryan White Program Planning Council, I am pleased to offer this Letter of Assurance for Miami-Dade County's Ryan White Part A Program (RWP), in response to the Fiscal Year (FY) 2024 Non-Competing Continuation Progress Report for the Ryan White HIV/AIDS Program Part A HIV Emergency Relief Grant Program. Below are the requested assurances per the guidance.

- a) i. When the most recent comprehensive needs assessment was conducted. The Partnership's Care and Treatment Committee (CT Committee) completed a five-part Annual Needs Assessment process on September 14, 2023, in coordination with the Miami-Dade County Office of Management and Budget (the Recipient), the Florida Department of Health in Miami-Dade County (FDOH-MDC), and local community stakeholders including people with HIV. Decisions were further deliberated, finalized, and adopted by the Executive Committee on September 27, 2023 in lieu of the Partnership meeting which had been scheduled for September 18, 2023.
- a) ii. Participation in comprehensive planning process (i.e., Integrated HIV Prevention and Care Plan) for the jurisdiction, including the statewide coordinated statement of need (SCSN). In December 2022, the Partnership's Prevention and Strategic Planning Committees meeting jointly as the Joint Integrated Plan Review Team (JIPRT), completed the 2022-2026 Integrated HIV Prevention and Care Plan for Miami-Dade County (Integrated Plan). In January 2023, the committees convened a workgroup the Integrated Plan Evaluation Workgroup (IPEW) to review the Integrated Plan's activities and measurements, identify strengths and challenges within the plan, and establish a reporting structure and timeline to disseminate findings. The initial reporting from the IPEW to the JIPRT is scheduled for October 12, 2023. The JIPRT will then guide additional reporting to other Partnership and committee members and stakeholder groups to continue throughout the calendar year. The IPEW is expected to reconvene in 2024 as a "steering committee" to the JIPRT, so that the reporting loop continues throughout the life of the Integrated Plan. Members of the IPEW and JIPRT comprise the largest planning

c/o Behavioral Science Research Corporation 2121 Ponce de Leon Boulevard, Suite 240, Coral Gables, FL 33134 p (305) 445-1076 | f (305) 448-3325 | www.aidsnet.org team under the Partnership, with more than 30 members including members of the affected community, RWP subrecipients, the Part A Recipient, Part B Recipient (FDOH-MDC), representatives of local hospitals, and other community stakeholders. The Integrated Plan's activities were structured around the State of Florida's Integrated Plan, the SCSN, and all four overarching goals of the National HIV/AIDS Strategy (NHAS), www.hiv.gov/federal-response/national-hiv-aids-strategy/national-hiv-aids-strategy-2022-2025/: (1) Prevent new HIV infections, (2) Improve HIV-Related health outcomes for people with HIV, (3) Reduce HIV-related Disparities and health inequities, and (4) Achieve integrated, coordinated efforts that address the HIV epidemic among all partners and stakeholders, including activities focused on disparities in retention in care and disparities in treatment outcomes (e.g., viral suppression). Comprehensive planning also considers local Ending the HIV Epidemic (EHE) initiative goals, strategies, and activities.

b) i. a. Priority Setting and Resource Allocation (PSRA): Data – Needs of the populations with HIV were addressed (including those with unmet need for HIV-related services, disparities in access and services among affected subpopulations and historically underserved communities, and those unaware of their HIV status). The Partnership's wellestablished, annual, comprehensive Needs Assessment process is a transparent, data-driven, community-input-based process for PSRA to ensure that decisions are made independently and without conflicts of interest. The 2023 Needs Assessment again delivered data in a more userfriendly style, including the use of more graphical vs. chart-style data presentations; consideration of using People First Language; and reminders of the meaning and importance of terminology and acronyms. The broad scope of data was presented over four meetings and included the following: Community Input: Integrated Plan Development & Virtual Town Hall; RWP 2022 Client Satisfaction Survey Findings; Unmet Needs; Co-Occurring Conditions; Other Funding Sources (not Part A); RWP Service Utilization and Demographic Data; Miami-Dade County Medicaid Expenditure and Demographic Data; RWP HIV Care Continuum (FY 2022); Early Identification of Individuals with HIV/AIDS; and the HIV Epidemiology Profile for Miami-Dade County 2020-2021. Members were also provided with policy updates and information critical to decision making, including: HRSA Needs Assessment responsibilities and Needs Assessment process overview; Policy Clarification Notice (PCN) #16-02: Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds; as well as Using MAI Funds Effectively: Tailoring Services for Locally Identified Subpopulations. Members reviewed comprehensive summary "Dashboard Cards" for each funded service category, detailing priority rank and current fiscal year allocation; a five-year historical summary of the priority rankings, allocations, expenditures, service utilization and service cost data; a five-year average cost per client and client count; and information on other funding streams which pay for the same service category, including Medicaid, the AIDS Drug Assistance Program (ADAP), RWP Parts B, C, and D, State of Florida General Revenue funds, and other funding as available. Special attention was paid to local disparity populations defined in the Integrated Plan: Retention in medical care concentrated on Black/African American males and females, as well as Hispanic Men Who Have Sex With Men (MSM); viral load suppression rates concentrated on Black/ African American males and females, as well as Haitian males and females.

The system is designed to provide comprehensive services to all persons with HIV in the EMA – within legislative or programmatic limitations for low-income and local residency, where

applicable – regardless of gender, gender identity, mode of transmission (primary risk factor), or race/ethnicity. Monitoring is done of those groups with low viral load suppression to identify where interventions may be needed. With the addition of EHE Initiative services, the system is able to provide access to medical visits, medications, and care coordination for people with HIV whose income and residency may not meet local Ryan White Part A, Part B, General Revenue, or Medicaid eligibility requirements.

b) i. b. Resources were allocated in accordance with the local demographic incidence of HIV, including appropriate allocations for services for women, infants, children, and youth (WICY). The PSRA processes were informed by analyzing and discussing data from multiple sources to increase access to core medical services, ensure access to services for women, infants, children, and youth, and to reduce disparities in access to HIV care in the EMA. Data from the local Ryan White Part D Program and the Medicaid program – which provide ongoing services to the majority of the WICY population – were reviewed and taken into account in the decisionmaking process. The State Government/Medicaid Agency Representative is a CT Committee and Partnership member and actively participated in the Needs Assessment process. An important factor in determining allocations is the extent to which services are funded by other sources, to ensure the RWP is used as payer of last resort, which was taken into account by presentation of Other Funding Sources data and through the use of Dashboard Cards as noted above. Other services not currently funded by the RWP Part A, such as pediatric assessment, early intervention services, and grocery vouchers, which are accessed by the WICY population, were reviewed. Needs Assessment participants considered epidemiology data, data on unemployment and insurance status, retention in care data, rising demand for services overall, and the growth in the number of RWP clients who received increased health insurance assistance. Further, the Epidemiological Profile of HIV in Miami-Dade County, as well as RWP demographics, RWP co-occurring conditions, and RWP service utilization data were considered in the decision-making process. Because of the level of other resources available to the WICY population in the EMA, Part A and Minority AIDS Initiative (MAI) resources are not specifically allocated to services for women, infants, children, and youth.

b) ii. People with HIV were involved in the planning and allocation processes and their recommendations were included as applicable. The 2023 Needs Assessment meetings of the CT Committee took place on May 4, June 8, July 13, August 17, and culminated in PSRA on September 14, with final recommendations adopted by the Executive Committee on September 27, 2023 in lieu of the Partnership meeting which had been scheduled for September 18, 2023. . All deliberations included non-voting guests and voting members who are representatives of the affected community, including Ryan White Program clients, caregivers, and other people with lived experience. Throughout the process, all persons were encouraged to question data and provide feedback, with an emphasis on data-driven decision-making. Comments could also be left on a dedicated phone line to be read into the record at the meeting for those who could not attend in person, then discussed by meeting attendees. In addition, feedback from the Integrated Plan development was considered and a special virtual Town Hall for Ryan White Program clients was conducted. Following the August 17 Needs Assessment meeting, members and guests were provided an online survey (via Survey Monkey) asking them to rank all available service categories listed in HRSA Policy Clarification Notice (PCN) #16-02 according to how important they are to and needed by people with HIV in Miami-Dade County. Respondents were reminded to base these rankings on data presented during the recent Needs Assessment meetings. Persons with HIV were also able to request a printed copy of the ranking sheet if they did not have access to the online survey. Once rankings were tallied and presented to the CT Committee at the September 2023 committee, further discussion from all meeting attendees was encouraged prior to final consensus on the ranking. All service categories listed in PCN #16-02 were prioritized (ranked): note that core services that are currently funded through the local Part A and MAI Programs comprised most of the highly ranked services. For both Part A and MAI, the rankings were: (1) Medical Case Management, including Treatment Adherence Services; (2) Outpatient/Ambulatory Health Services; and (3) Mental Health Services. Further Part A top-five rankings included (4) Oral Health Care and (5) Food Bank/Home-Delivered Meals. Further MAI top-five rankings include (4) ADAP Treatment, funded locally by the Part B program (also ranked eighth by Part A) and (5) Emergency Financial Assistance.

In accordance with Florida's Government in the Sunshine Law, all government advisory board meetings – including the Partnership and all its committees – must be held in person and achieve quorum for business to be conducted. All Needs Assessment meetings were heavily promoted at other committee meetings, through the Partnership's listsery of more than 2,100 people, through the Partnership's bi-weekly Community Newsletter, and in coordination with FDOH-MDC communications to their community partners. All data were posted to the Partnership's website (www.aisdsnet.org) in advance of meetings and members were advised to review the posted data and/or request printed or emailed copies from the Partnership Staff Support team. The Partnership has been promoting access to documents via its website since the onset of the COVID-19 pandemic. This way, data and presentations, as well as reports of recommended actions (motions) regarding PSRA, were available to the largest audience for review and feedback before the meetings took place. Members and meeting attendees are also provided with a QR code at each meeting to access the documents online during each meeting. The complete Needs Assessment manual was updated following each meeting and posted to the Partnership's dedicated Needs Assessment webpage: https://aidsnet.org/partners/annual-needs-assessment/; which includes more than ten years of historical Needs Assessment resources.

b) iii. FY 2023 budget period formula, supplemental, and MAI funds awarded to the EMA are being expended according to the priorities established by the PC. The EMA's formula, supplemental, and MAI funds are being expended according to the Partnership's established priorities. After receipt of the Final Notice of Award for Part A and MAI services on March 29, 2023, funding allocations for Part A/MAI were reviewed by the CT Committee on July 13, 2023, and approved by the full Partnership on July 17, 2023. Throughout the grant year, expenditure patterns are regularly reviewed, and subsequent reallocations are proposed, deliberated, and approved as needed. The Recipient provides monthly detailed expenditure and utilization reports which are reviewed by several committees and the Partnership, and are posted on the Partnership's website (see above) for public access and review. The reports may also include information on contracting delays, current service utilization data (unduplicated client counts), Test and Treat / Rapid Access (local rapid start) data, EHE updates, collaborations with the State of Florida Department of Health and FDOH-MDC, program enhancements and efficiencies, and other relevant County updates. In addition to the Recipient Part A/MAI report, expenditure reports from Part B, General Revenue (GR), and ADAP, and program updates from the Housing Opportunities for Persons with AIDS (HOPWA) Program, are posted for public access. This

allows members to consider the range of other funding and available services during PSRA and Reallocations/Sweeps decision-making throughout the year. Persons may also ask questions about the reports or request paper copies. Training on all reports is offered as part of the Partnership's "Get on Board!" virtual training series, detailed below. This combination of training, direct access to the Recipient for feedback, and access to monthly expenditure data, ensures that planning council members and the public are aware of how funds are allocated and expended, and that the Recipient is following the directives of the Partnership.

b) iv. Confirmation that all Ryan White HIV/AIDS Program (RWHAP) HIV core medical and support services were prioritized during the PSRA process per sections 2602(b)(4)(C) and 2602(d)(1) of the PHS Act.

As noted above, as part of the 2023 Needs Assessment, members received a copy of PCN #16-02 to assist with prioritizing all available Ryan White Program core medical and support services for FY 2024. Subsequently, at the CT Committee's PSRA meeting on September 14, 2023, all service categories listed in PCN #16-02 were prioritized, regardless of local Part A/MAI resource allocation. This prioritization will also aid in the Recipient's development of the next Request for Proposals' funding solicitation process.

c) i. Training: Ongoing and annual membership training occurred, including the date(s) The Partnership's Staff Support team provides two levels of training: New Member Orientation (NMO) and "Get on Board!" (GOB) training. All training classes are held via Zoom, publicly noticed, promoted through regular channels, and open to the public. Materials are posted to the Partnership's website and available by request. New members of the Partnership and its committees are required to complete the NMO within three (3) months of their start date. NMO is an intensive and interactive three-hour training covering the history of the Ryan White Program, legislative roles and responsibilities of RWHAP planning councils generally, and roles and expectation of Partnership members, specifically, including samples of meeting agendas, minutes, and regular reports, are presented with explanations of the use and importance of each document. NMO guides members through the Partnership Bylaws (including grievance procedures, conflicts of interest, and codes of conduct), Robert's Rules of Order, parliamentary procedure, Florida's Government in the Sunshine Law, and requirements for members of County Advisory Boards. A section is also dedicated to understanding data, monthly reports, and the PSRA process. Training emphasizes the importance of planning council participation by people with HIV. Trainees are quizzed throughout the training session to ensure they are keeping up with the high volume of information presented. Staff encourage questions and keep the Zoom chat box open throughout each session. During the reporting period, NMO was (or will be) held: February 8, 2023, May 10, 2023, September 13, 2023, and November 1, 2023. To date, all members are in compliance with training requirements. To supplement the required NMO, staff developed an optional training series: GOB training is designed to facilitate better understanding of specific facets of our local planning council operations. GOB trainings during this reporting period include: 2023 Kickoff!, January 11, 2023; Your Role at Meetings: From Meeting Notice to Adjournment, March 8, 2023; Partnership Lingo: Understanding Acronyms and Terminology of Meetings, April 12, 202; Understanding Grantee Reports: AIDS Drug Assistance Program (ADAP), Ryan White Program Part B, and General Revenue, June 7, 2023; Understanding RWP Part A/MAI Expenditure Reports, July 12; Update on Integrated Planning, October 18 (topic subject to change). Additionally, throughout the Needs Assessment meetings (dates noted

above), members and meeting guests received special training on planning council roles and responsibilities and HRSA's expectations for planning councils as they relate to Needs Assessment; how to use data and interpret findings; understanding the PSRA process; and how to read the service summary Dashboard Cards. Finally, the County requires Ethics Training for all planning council and committee members and Sexual Harassment Awareness training for all planning council members. Currently, all planning council and committee members are in compliance for those trainings.

d) i. Assessment of Administrative Mechanism: Assessment of grant recipient activities (including the date) ensured timely allocation/contracting of funds and payments to contractors. The fiscal year 2023 Assessment of the Recipient Administrative Mechanism (AAM) was conducted via individual surveys to subrecipients and to Partnership members. The Partnership's Strategic Planning Committee reviewed and revised the survey documents at their January 13, 2023 meeting and the surveys were approved by the Partnership at their January 17, 2023 meeting. The AAM evaluates the Recipient's activities of the most recently completed grant fiscal year (i.e., FY 2022).

The Partnership survey was distributed at the May 15, 2023 general meeting, and was available online via URL or QR code. Instructions were emailed to each subrecipient. All respondents were given more than two weeks to complete the survey. The Partnership member survey evaluated how well the Recipient responds to the funding priorities and directives set by the Partnership; whether the Recipient disburses Part A and MAI funds to Ryan White Program subrecipients in a timely manner consistent with Partnership recommendations; the overall performance of the Recipient and the administrative subrecipient; and also allowed for openended comments and suggestions. Subrecipient surveys were emailed directly to one or more representatives (the main contact related to the contract, at a minimum) at each subrecipient organization throughout May 2023. Their version allowed for more than one respondent from the subrecipient organization to answer, if appropriate, and record their name(s) as corespondents. The subrecipient survey evaluated whether the Recipient disburses Part A and Minority AIDS Initiative (MAI) funds to Ryan White Program service providers (subrecipients) in a timely manner, consistent with Partnership recommendations; how the Recipient manages contracts with Ryan White Program Part A/MAI subrecipients; the overall performance of the Recipient, the contracted planning council staff support and clinical quality management subrecipient, and Groupware Technologies, LLC (GTL) and its Provide® Enterprise Miami (PE Miami) data management system; and also allowed for open-ended comments and suggestions. Where a subrecipient was also a Partnership member, they were asked to complete both surveys, from different perspectives (planning council vs. service provider). Staff compiled all results and presented a five-year comparison of ratings on each statement (Strongly Agree to Strongly Disagree), comments specific to each statement, and general comments. The Strategic Planning Committee reviewed the report and all comments with the Recipient at their September 8, 2023 meeting. The Recipient representative at the meeting provided feedback and general corrections and updates were incorporated into the final AAM Report, and adopted by the Executive Committee on September 27, 2023 in lieu of the Partnership meeting which had been scheduled for September 18, 2023. Overwhelmingly, the report demonstrates the continual high level of satisfaction with the activities of the Recipient in interacting with the Partnership and subrecipients, conveying information, and providing timely allocation/contracting of funds and

payments, with an understanding of the reasons for some delays when they occur. Where needed, the Recipient will continue to work with the Strategic Planning Committee and Partnership staff to make improvements.

This Letter of Assurance is submitted with approval of the Miami-Dade HIV/AIDS Partnership. As an active participant in these processes, I validate the above-described activities for Miami-Dade County's Ryan White Part A/MAI reply to the Non-Competing Continuation Progress Report for the Ryan White HIV/AIDS Program Part A HIV Emergency Relief Grant Program, and the data and narratives presented therein.

Sincerely,

Alecia Tramel-McIntyre Chair, Miami-Dade HIV/AIDS Partnership