



MIAMI-DADE
HIV/AIDS PARTNERSHIP

Get on Board!

Station 14: Ryan White Program
Needs Assessment and You!

April 17, 2024





Get on Board! A Member Enrichment Training Series

- Training sessions are designed to promote understanding of the Ryan White Program Planning Council (Partnership) and service system.
- Your presenters today are Marlen Meizoso and Christina Bontempo, Partnership Staff who have more than 20 years combined experience with the Partnership and the Ryan White Program.
- Please chat questions or comments to us throughout today's presentation.
- This presentation will be posted online at <https://aidsnet.org/the-partnership#getonboard1>.
- Contact us at 305-445-1076.



Today's Objectives

- Understand what the Needs Assessment is.
- Discuss an overview of Needs Assessment data.
- Understand the importance of participation.

This is an interactive course.
Get ready to READ and CHAT!



Find it on
AIDSNET!

Annual HIV/AIDS Needs Assessment

Decisions made during Needs Assessment drive the provision of services and distribution of funds for the next Ryan White Program fiscal year. All Partnership and committee members, Ryan White Program clients and other people with HIV, Ryan White Program subrecipients, and anyone interested in maximizing resources and improving services for people with HIV in Miami-Dade County are encouraged to participate in this and all Partnership activities.

2023 Needs Assessment



- [Complete Needs Assessment Book](#) (September 14, 2023; 489 pages)
- [Process for Setting Priorities and Allocating Resources](#)
- [Needs Assessment Responsibilities](#)
- [2023 Guide to Dashboard Cards](#)
- [Updated Dashboard Cards](#)
- [Policy Clarification Notice \(PCN\) #16-02: Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds](#)
- [Using MAI Funds Effectively: Tailoring Services for Locally Identified Subpopulations](#)
- [Community Input: Integrated Plan Development & Virtual Town Hall](#)
- [Ryan White Program 2022 Client Satisfaction Survey Summary of Findings](#)
- [Unmet Needs Presentation](#)
- [Co-Occurring Conditions Presentation](#)
- [Other Funding Sources PPT](#)
- [Service Utilization Data PPT \(revised\)](#)
- [Age, Gender, Utilization Report](#)
- [Miami-Dade Medicaid Expenditures](#)
- [Miami-Dade Medicaid Demographics](#)
- [Ryan White Program Demographic Data FY 2022](#)
- [Ryan White Program HIV Care Continuum Fiscal Year 2022](#)
- [Early Identification of Individuals with HIV/AIDS](#)
- [Summary of HIV Epidemiology Profile Data 2020-2021 \(revised\)](#)

www.aidsnet.org/the-partnership#needsassessment1



Needs Assessment

- Process by which information is gathered to find out the needs of HIV positive persons.
- Needs Assessment is data driven.
- The process culminates in the **Priority Setting and Resource Allocations (PSRA)**.
- Let's break down PSRA . . .

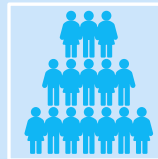
PSRA



The most important legislative responsibility of Planning Councils!



PSRA is informed by data presented throughout the Needs Assessment.



PSRA should involve all Partnership and Committee members.

The logo for PSRA is displayed within a blue speech bubble shape. The letters 'PSRA' are in a bold, sans-serif font, with 'PS' in red and 'RA' in white. The speech bubble has a white outline and a small tail pointing downwards.

PSRA

- **Priority Setting:** Members prioritize – or rank – all RWP Part A/MAI **service categories** based on data and community input.
- Let's look at the **service categories** . . .

Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds

Policy Clarification Notice (PCN) #16-02 (Revised 10/22/18)
Replaces Policy #10-02

Scope of Coverage: Health Resources and Services Administration (HRSA) Ryan White HIV/AIDS Program (RWHAP) Parts A, B, C, and D, and Part F where funding supports direct care and treatment services.

Purpose of PCN

This policy clarification notice (PCN) replaces the HRSA HIV/AIDS Bureau (HAB) PCN 10-02: Eligible Individuals & Allowable Uses of Funds. This PCN defines and provides program guidance for each of the Core Medical and Support Services named in statute and defines individuals who are eligible to receive these HRSA RWHAP services.

Background

The Office of Management and Budget (OMB) has consolidated, in 2 CFR Part 200, the uniform grants administrative requirements, cost principles, and audit requirements for all organization types (state and local governments, non-profit and educational institutions, and hospitals) receiving federal awards. These requirements, known as the "Uniform Guidance," are applicable to recipients and subrecipients of federal funds. The OMB Uniform Guidance has been codified by the Department of Health and Human Services (HHS) in [45 CFR Part 75—Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards](#). HRSA RWHAP grant and cooperative agreement recipients and subrecipients should be thoroughly familiar with 45 CFR Part 75. Recipients are required to monitor the activities of its subrecipient to ensure the subaward is used for authorized purposes in compliance with applicable statute, regulations, policies, program requirements and the terms and conditions of the award (see [45 CFR §§ 75.351-352](#)).

[45 CFR Part 75, Subpart E—Cost Principles](#) must be used in determining allowable costs that may be charged to a HRSA RWHAP award. Costs must be necessary and reasonable to carry out approved project activities, allocable to the funded project, and allowable under the Cost Principles, or otherwise authorized by the RWHAP statute. The treatment of costs must be consistent with recipient or subrecipient policies and procedures that apply uniformly to both federally-financed and other non-federally funded activities.

HRSA HAB has developed program policies that incorporate both HHS regulations

Core Services

Defined in PCN #16-02

These **ARE** currently funded by Part A

1. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals
2. Local AIDS Pharmaceutical Assistance Program (LPAP)
3. Medical Case Management, including Treatment Adherence Services
4. Mental Health Services
5. Oral Health Care
6. Outpatient/Ambulatory Health Services
7. Substance Abuse Outpatient Care

These are currently **NOT** funded by Part A

1. AIDS Drug Assistance Program (ADAP) Treatments
2. Early Intervention Services (EIS)
3. Home and Community-Based Health Services
4. Home Health Care
5. Hospice Services
6. Medical Nutrition Therapy

Support Services

Defined in PCN #16-02

These **ARE** currently funded by Part A

1. Emergency Financial Assistance
2. Medical Transportation
3. Other Professional Services, e.g., Legal Services and Permanency Planning
4. Outreach Services
5. Substance Abuse Services (residential)
6. Food Bank (FUNDED) / *Home Delivered Meals (NOT FUNDED)*

These are currently **NOT** funded by Part A

1. Child Care Services
2. Health Education/Risk Reduction
3. Housing
4. Linguistic Services
5. Non-Medical Case Management Services
6. Psychosocial Support Services
7. Referral for Health Care and Support Services
8. Rehabilitation Services
9. Respite Care

PSRA

- **Resource Allocations:** Members decide how much RWP funding to provide in each service category for Part A and MAI.
- Allocations are expressed by dollar amounts and percentage of the total.
- Let's look at a budget/allocations worksheet . . .

| SERVICE CATEGORIES (ALPHABETIC ORDER) | FY 2022 EXPENDITURES | FY 2022 % | FY 2024 RECOMMENDED ALLOCATION ¹ | FY 2024 % |
|---|----------------------|-----------|---|-----------|
| AIDS PHARMACEUTICAL ASSISTANCE [C] | \$3,954.10 | 0.02% | \$ | % |
| EMERGENCY FINANCIAL ASSISTANCE [S] | \$0.00 | 0.00% | \$ | % |
| FOOD BANK*/HOME DELIVERED MEALS [S] | \$2,540,864.00 | 12.07% | \$ | % |
| HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE | \$297,151.61 | 1.41% | \$ | % |
| MEDICAL TRANSPORTATION [S] | \$153,904.90 | 0.73% | \$ | % |
| MENTAL HEALTH SERVICES [C] | \$63,570.00 | 0.30% | \$ | % |
| ORAL HEALTH CARE [C] | \$3,273,644.50 | 15.55% | \$ | % |
| OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND OUTPATIENT/AMBULATORY HEALTH SERVICES [C] | \$67,581.00 | 0.32% | \$ | % |
| OUTREACH SERVICES [S] | \$8,063,884.64 | 38.30% | \$ | % |
| SUBSTANCE ABUSE OUTPATIENT CARE [C] | \$114,924.86 | 0.55% | \$ | % |
| SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S] | \$4,401.00 | 0.02% | \$ | % |
| | \$1,053,590.00 | 5.00% | \$ | % |



Snapshot

PSRA Directives

- Directives to the Recipient
 - **Guidance** to the Recipient on how best to meet priorities.
 - This **guidance** may address populations to be served, geographic areas to be served, and/or service models or strategies to be utilized.

PSRA Sweeps

- **Reallocation of Funds: Also called SWEEPS.** Members are asked throughout the program year to reallocate funds to ensure funds are most efficiently spent on needed services.
- A complete training on this topic is coming soon . . .





HRSA- Required Parts of Needs Assessment

To make **data-based** PSRA decisions, we need **data!**

1. Epidemiologic profile
2. Estimate of Unmet Need
3. Estimate of Persons Living with HIV Who are Unaware of Their Status
4. Assessment of Service Needs and Barriers to Care
5. Resource Inventory
6. Profile of Provider Capacity and Capability

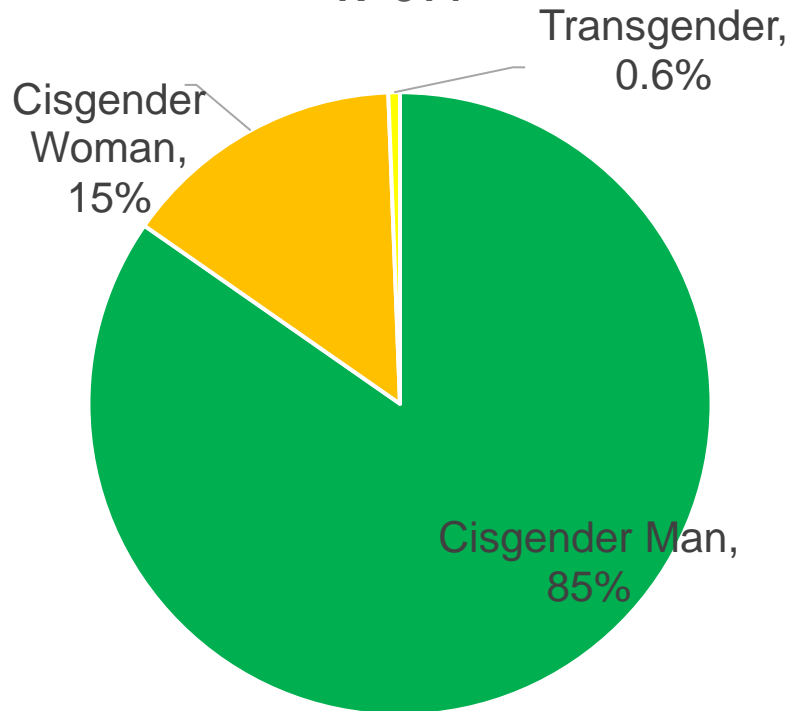


Epidemiologic Profile “Epi Profile”

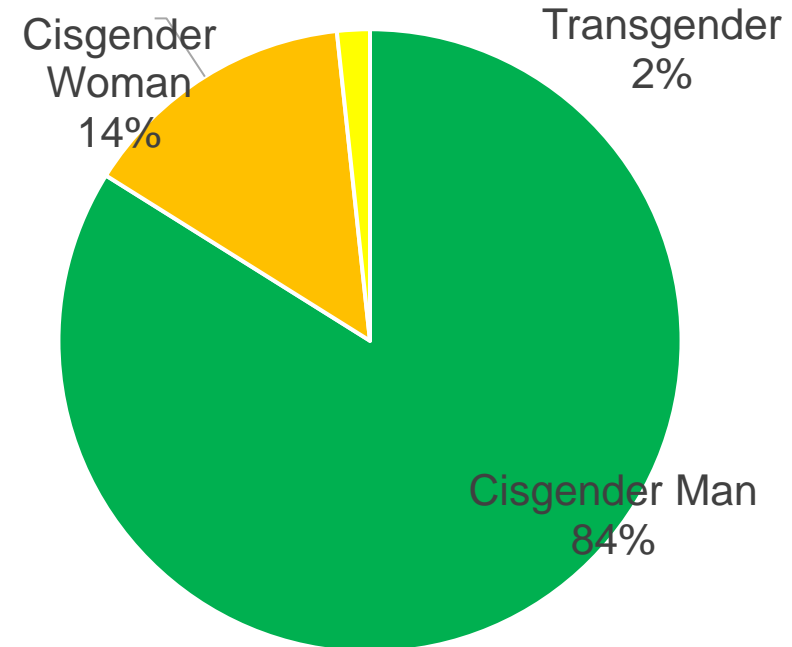
- The Epi Profile is **important** because it is the foundation of planning.
- Epi data indicates trends in HIV, AIDS, co-occurring conditions, STIs, in and out of care status, and overall demographics of the HIV epidemic.
- Epi data is provided by the Florida Department of Health. Note: There is always a lag in data due to the data reporting cycle. In 2024, data for 2022 will be reviewed.
- Let’s look at some examples . . .

HIV Diagnosis by Current Gender Identity 2020 and 2021

HIV Diagnosis by Current Gender Identity, 2020
N=814



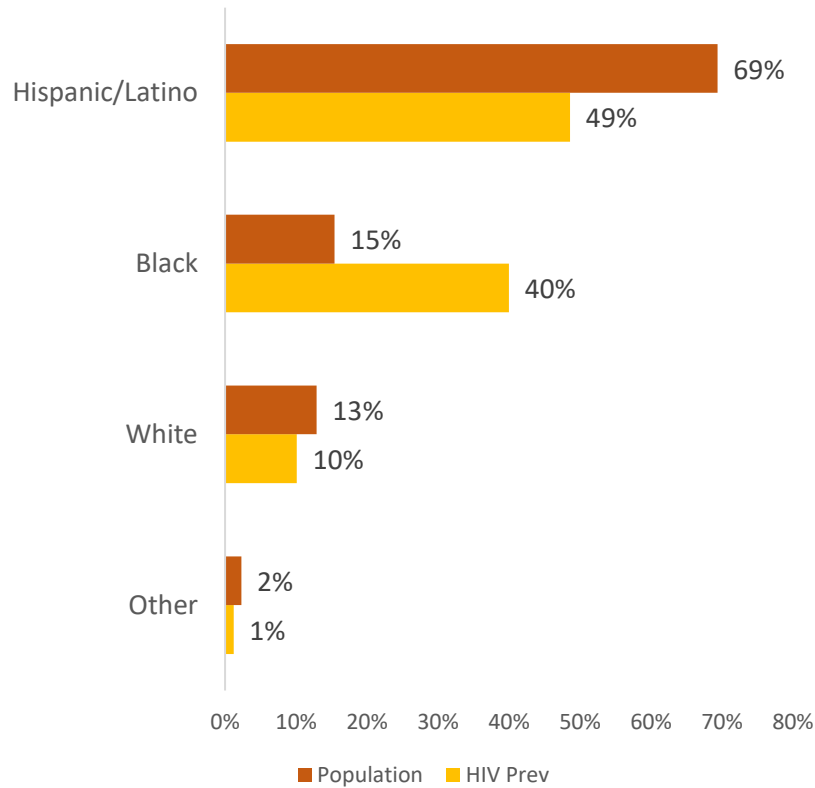
HIV Diagnosis by Current Gender Identity, 2021
N=1,204



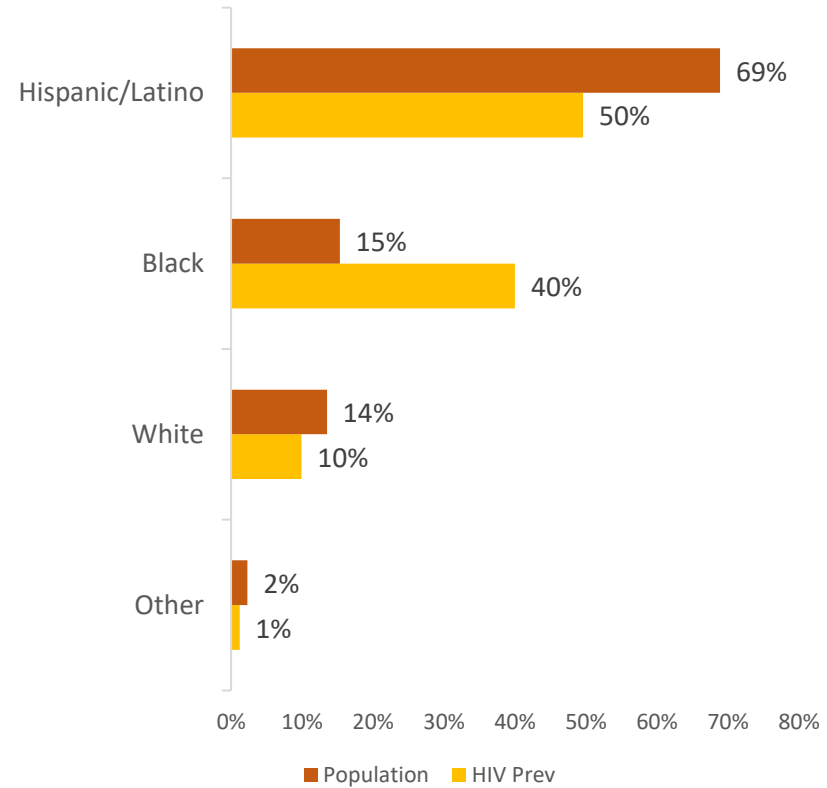
This slide is generated using Epi Data provided by the Florida Department of Health.

Living with HIV and Population by Race/Ethnicity Comparison

Living with HIV and Population by Race/Ethnicity, 2020



Living with HIV and Population by Race/Ethnicity, 2021



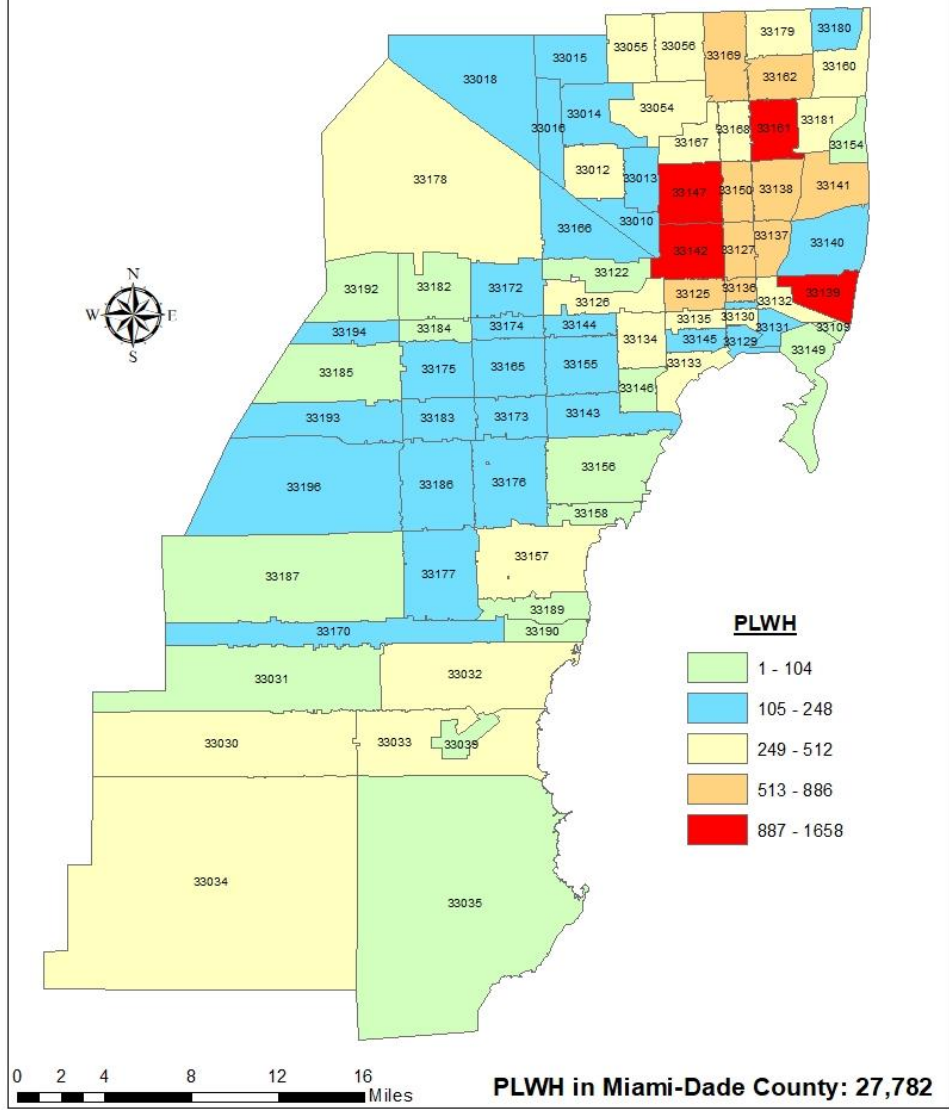
This slide is generated using Epi Data provided by the Florida Department of Health.

Persons with HIV with a Co-occurring Diagnosis of an STI by Type and Year of STI Report, 2017–2021, Miami-Dade County

| Year of STI Report | HIV/ Early Syphilis ¹ | HIV/ Chlamydia | HIV/ Gonorrhea |
|--------------------|-------------------------------------|-------------------|-------------------|
| 2017 | 724 | 611 | 595 |
| 2018 | 928 | 803 | 806 |
| 2019 | 1,000 | 955 | 1,034 |
| 2020 | 1,096 | 837 | 953 |
| 2021 | 1,248 | 1,202 | 1,188 |
| Percentage Change | 72% | 97% | 100% |

¹Primary, secondary and early non-primary, non-secondary syphilis.

**Persons Living With HIV (PLWH)
By Zip of Code of Residence
Miami-Dade County, 2021**





Estimate of Unmet Need

- People living with HIV who know their status but are **not in care**.
- This is **important** to know because it helps to inform needs.
- Example in 2021:

| | |
|--------|------------------------|
| 27,782 | People living with HIV |
| 7,572 | People not in care |
| 11,792 | People in non-RWP care |
| 8,418 | People in RWP care |



Estimate of Unaware

- People living with HIV who are **unaware** of their status.
- This is **important** to know because it helps with planning of services.



Assessment of Service Needs and Barriers

- Information about **service needs** of people with HIV and **barriers** to getting services.
- This assessment is made through community input – town hall meetings, surveys, focus groups, Needs Assessment meetings, etc.
- **Ryan White Clients are urged to participate and share feedback when requested.**
- This is **important** because it provides information about how the system can be improved and may inform **directives** to address needed services.



Resource Inventory

- Information about what and where services are provided.
- This is **important** for planning of services and may inform **directives** to ensure needed services are provided in the most affected geographic areas.



Profile of Provider Capacity

- Evaluation of the ability of providers to serve current and emerging communities of people with HIV.
- This is **important** to address needs for expanding the current service provider network and adding new providers and may inform **directives** to ensure the provider network covers geographic areas of greatest need.



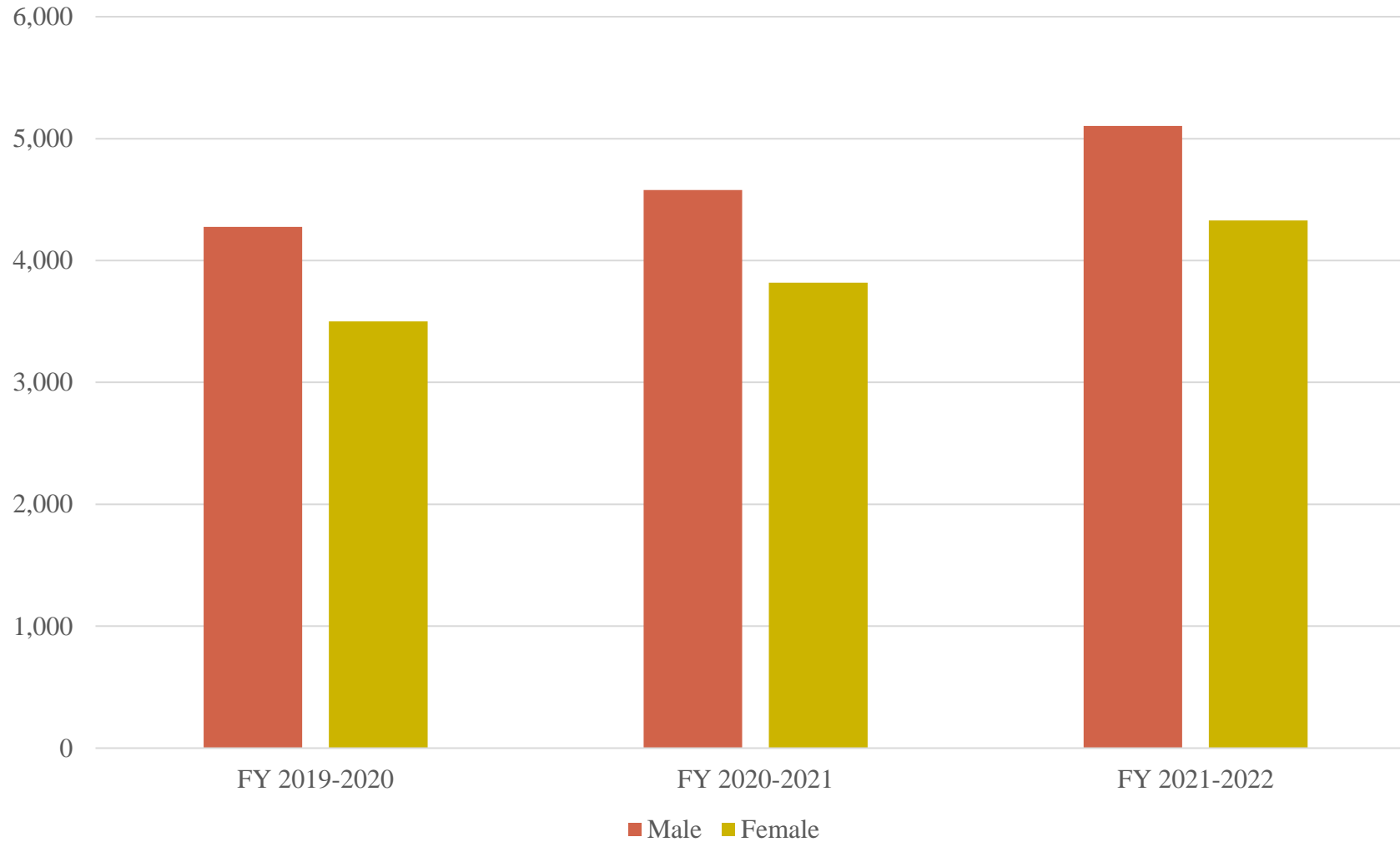
Other Parts of Needs Assessment

In addition to HRSA-Required data, we will also review:

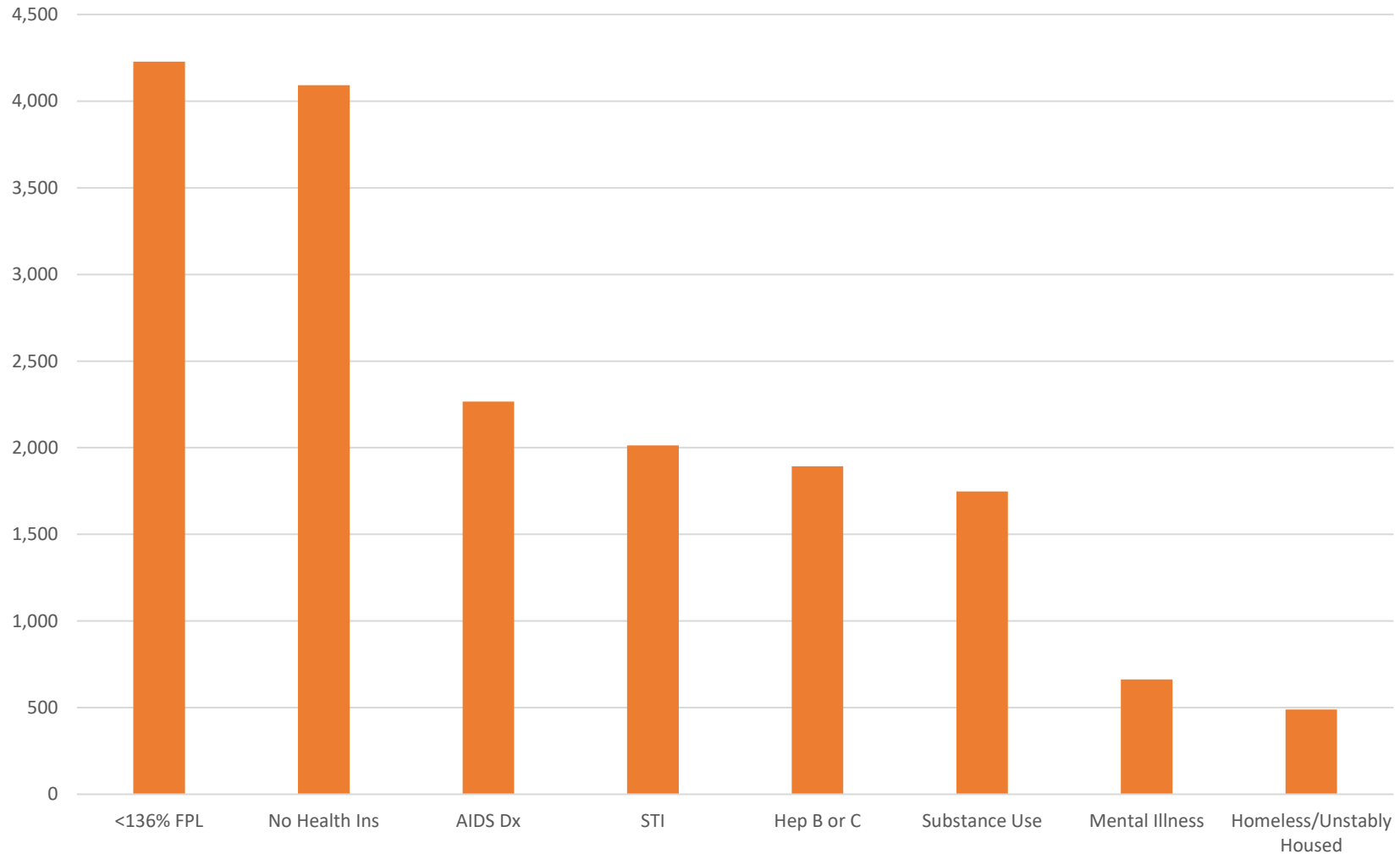
1. Other Local Funding Sources
2. Co-Occurring Conditions
3. Ryan White Program Utilization
4. Dashboard Cards
5. And more!

Let's take a quick look at these . . .

Medicaid HIV/AIDS Clients by Gender FY 2019-20 through FY 2021-22

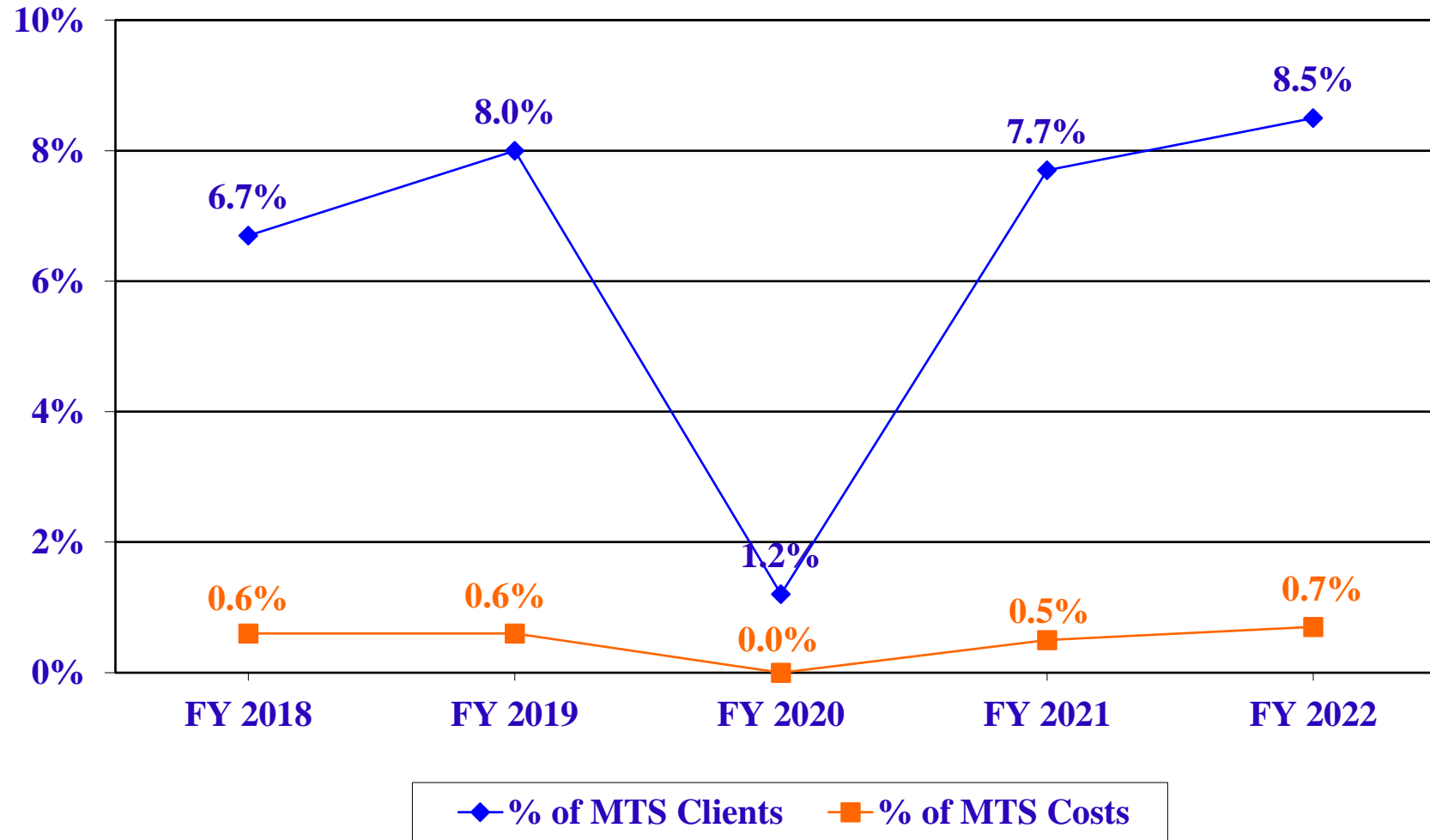


Client Ns by Co-Occurring Condition, FY 2022



aidsnet.org

Percent of Clients Served and Percent Spent on Medical Transportation (MTS)




2023 Needs Assessment Dashboard Cards
Ryan White Program

SUPPORT SERVICE: FOOD BANK

Ranking, Allocation, and Direct Services Expenditure History

| Fiscal Year | Final Expenditure | Category Expense as % |
|-------------|-------------------|-----------------------|
| FY 2018 | \$21,934,627.17 | 6.6% |
| FY 2019 | \$22,984,844.87 | 8.1% |
| FY 2020 | \$17,660,128.37 | 7.4% |
| FY 2021 | \$19,018,258.46 | 7.0% |
| FY 2022 | \$22,372,383.35 | 11.4% |

| Trend |
|---|
| Expenses and Clients |
|  |

| Fiscal Year | Ranking | Final Allocation | Final Expenditure | % Spent |
|-------------|---------|------------------|-------------------|---------|
| FY 2018 | 9 | \$1,451,588.00 | \$1,451,528.00 | 100.00% |
| FY 2019 | 7 | \$1,851,588.00 | \$1,851,369.00 | 99.99% |
| FY 2020 | 8 | \$1,303,799.00 | \$1,303,702.40 | 99.99% |
| FY 2021 | 5 | \$1,385,995.00 | \$1,338,778.40 | 96.59% |
| FY 2022 | 8 | \$2,660,108.00 | \$2,540,864.00 | 95.52% |

Service Program

Limitations: 400% FPL

| Fiscal Year | RW Clients | Clients Served | Served as % RW | | Expenditure | Avg Per Client |
|-------------|------------|----------------|----------------|---|----------------|----------------|
| | | | Clients | % | | |
| FY 2018 | 9,578 | 701 | 7.3% | | \$1,451,528.00 | \$2,070.65 |
| FY 2019 | 9,031 | 715 | 7.9% | | \$1,851,369.00 | \$2,589.33 |
| FY 2020 | 8,127 | 735 | 9.0% | | \$1,303,702.40 | \$1,773.74 |
| FY 2021 | 8,420 | 712 | 8.5% | | \$1,338,778.40 | \$1,880.31 |
| FY 2022 | 8,590 | 1,130 | 13.2% | | \$2,540,864.00 | \$2,248.55 |

Other Funding Streams: 2022

| | Funder | Expended | Number of Clients | Cost per Client |
|---|--------|----------|-------------------|-----------------|
| 1 | Other | \$46,987 | 387 | \$121 |
| 2 | Part D | \$13,331 | 313 | \$43 |

Other Funding Streams: 2023

| | Funder | Expended | Number of Clients | Cost per Client |
|---|--------|----------|-------------------|-----------------|
| 1 | Other | \$37,786 | 192 | \$197 |
| 2 | Part D | \$6,124 | 260 | \$24 |

Notes:

Expenditures and clients are the highest in the five year period. With the current financial burdens, expenditures are likely to continue to increase.



Keeping Up!

- Materials will be distributed at each Care and Treatment Committee Needs Assessment Meeting.
 - Some materials will only be available online.
- All Needs Assessment materials will be available online and posted throughout the process at:
 - www.aidsnet.org/the-partnership#caretreatment2
and
 - www.aidsnet.org/the-partnership#needsassessment1



Why is Your Participation Important?

- Needs Assessment decisions impact the lives of more than 9,000 people living with HIV in Miami-Dade County who receive Ryan White Program services.
- If you are a **person who receives RWP services**, you will be helping to make decisions that directly impact the services you receive, you will gain a broader understanding of available services, you will work with others toward improving the service system, and you will be able to help other people navigate the complexities of local HIV care.
- If you are a **provider of services**, you will gain a better understanding of and have direct input on available funding, how funding decisions are made, limitations of funding and services, and recommendations for improvements.



Get Involved!

- Attend Needs Assessment meetings!
- Participate in surveys and townhalls!
- Join the Care and Treatment Committee!
- Join the Partnership!
- Spread the word!
- Please RSVP!



Join Us For 2024 Needs Assessment!

 MIAMI-DADE
HIV/AIDS PARTNERSHIP

2024 Needs Assessment

An annual activity of the planning council and a federal requirement.

Join the Care and Treatment Committee for the 2024 Needs Assessment!
Be a decision-maker for Ryan White Program service priorities and funding!
Your participation helps more than 8,000 people with HIV in
Miami-Dade County!

MAY
9



JUNE
13



JULY
11



AUGUST
8

Meetings are held from 10:00 a.m. to 1:00 p.m.
at the Care Resource Community Health Centers,
Midtown Miami, 3510 Biscayne Blvd.,
1st Floor Community Room,
Miami, FL 33137



Must RSVP at 305-445-1076 or
marlen@behavioralscience.com



Q&A

- Please raise your hand or chat your questions.
- 🗨️ Answers to questions we do not get to today will be posted with this presentation at <http://aidsnet.org/getonboard/>
- Contact us for more information and to learn how you can be a decision-maker with the Partnership!
 - Marlen Meizoso, M.A., Project Manager/Research Associate, Marlen@behavioralscience.com
 - Christina Bontempo, Project Manager/Community Liaison, Cbontempo@behavioralscience.com



Thank You