



Scan for meeting materials.

MIAMI-DADE HIV/AIDS PARTNERSHIP

Care and Treatment Thursday, September 12, 2024

10:00 a.m. – 1:00 p.m.

Care Resource Community Health Center, Midtown Miami
3510 Biscayne Blvd, 1st Floor Community Room
Miami, FL 33137

AGENDA

- | | | |
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| I. | Call to Order | Dr. Mary Jo Trepka |
| II. | Introductions | All |
| III. | Meeting Housekeeping | Marlen Meizoso |
| IV. | Floor Open to the Public | Dr. Mary Jo Trepka |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of August 8, 2024 | All |
| VII. | Reports | |
| | • Recipients (Part A, Part B, ADAP, General Revenue) | All |
| | • Vacancies | Marlen Meizoso |
| VIII. | Standing Business | |
| | • Additional Data from Client Satisfaction | Dr. Robert Ladner |
| | • Projections and Estimates (Section 6) | Dr. Robert Ladner |
| IX. | New Business | |
| | • Special Directives | All |
| | • Priorities Setting (Section 9) | All |
| | • Resource Allocation (Section 9) | All |
| X. | Announcements and Open Discussion | All |
| | • New Member Orientation September 18, 2024 | |
| | • Get on Board October 2, 2024 | |
| XI. | Next Meeting: October 10, 2024 at Care Resource | Dr. Mary Jo Trepka |
| XII. | Adjournment | Dr. Mary Jo Trepka |



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Meeting Housekeeping Care and Treatment Committee

Updated May 31, 2024
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.

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.

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 . . .

Meeting Participation

Everyone has a role to play!

- ❑ All attendees may address the board as time allows and at the discretion of the Chair.
- ❑ Please *share your expertise* on the current Agenda topics and motions. Remember to . . .
 - Raise your hand to be recognized by the Chair or added to the queue during discussions.
 - Avoid repeating points previously addressed.



Meeting Terminology

Meetings can be fast-paced and confusing!

- ❑ Terms and acronyms you might hear at today's meeting are on the back of your Agenda.
- ❑ Please raise your hand at any time if you need more information!



Meeting Guide

Meetings can be fast-paced and confusing!
These terms and acronyms can help you follow along.



Please raise your hand at any time if you need more information!

ADAP	AIDS Drug Assistance Program
BSR	Behavioral Science Research Corp. (aka, Staff)
EHE	Ending the HIV Epidemic: A Plan for America
EMA	Eligible Metropolitan Area (locally, Miami-Dade County)
FDOH FDOH-MDC	Florida Department of Health in Miami-Dade County
FPL	Federal Poverty Level
HOPWA	Housing Opportunities for People with AIDS Program
HRSA	The Health Resources and Services Administration
IP	The Integrated HIV Prevention and Care Plan
MAI	Minority AIDS Initiative
NHAS	National HIV/AIDS Strategy
PE Miami Provide	Provide Enterprise® by Groupware Technologies (RWP client database system)
RWP RWHAP	Ryan White Program or Ryan White HIV/AIDS Program (Usually referring to Part A/MAI)
The Partnership Planning Council PC	The Miami-Dade HIV/AIDS Partnership - The official Ryan White Program Advisory Board
The Recipient The County OMB	The Miami-Dade County Office of Management and Budget.
TTRA	Test and Treat/Rapid Access



Scan the QR Code for additional acronyms and terminology -
Get on Board Training: Understanding the Language of the Partnership

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 www.aidsnet.org/the-partnership/, or by scanning the QR code on your agenda.

Welcome to AIDSNET.org!

WELCOME TO THE ONLINE HOME OF THE MIAMI-DADE HIV/AIDS PARTNERSHIP (MIAMI-DADE COUNTY RYAN WHITE PROGRAM PLANNING COUNCIL), THE CLINICAL QUALITY MANAGEMENT (CQM) PROGRAM, RESOURCES FOR PEOPLE WITH HIV AND SERVICE PROVIDERS, AND THE BULLETIN BOARD FOR HIV NEWS AND INFORMATION IN MIAMI-DADE COUNTY - COMMUNITY NEWSLETTER.

SERVING **9,071** people with HIV

The Miami-Dade HIV/AIDS Partnership

Resources for People with HIV

Clinical Quality Management Program

Ryan White Program Service Provider Resource Hub

Community Newsletter - HIV News and Resources

Calendars



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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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**Care and Treatment Committee Meeting
 Care Resource Health Care Center, Midtown Miami
 3510 Biscayne Blvd, 1st Floor Community Room
 Miami, FL 33137**

August 8, 2024 Minutes

#	Committee Members	Present	Absent
1	Fils Aime, Louvens		X
2	Gonzalez, Tivisay		X
3	Henriquez, Maria	X	
4	Leiva, German	X	
5	Mills, Vanessa	X	
6	Shmuels, Daniel	X	
7	Shmuels, Diego	X	
8	Trepka, Mary Jo	X	
9	Wall, Dan	X	
Quorum: 4			

Guests	
Brookins, Valjean	
Jimenez, Rafael	
Poblete, Karen	
Romero, Javier	
Tello, Cynthia	
Staff	
Ladner, Robert	
Meizoso, Marlen	

All documents referenced in these minutes were accessible to members and the public prior to (and during) the meeting, at <https://aidsnet.org/the-partnership#caretreatment2>.

I. Call to Order

Dr. Mary Jo Trepka

Dr. Mary Jo Trepka, the Chair, called the meeting to order at 10:08 a.m. She reminded attendees that they will be continuing the annual needs assessment process today, which will conclude with priority setting and resource allocation (PSRA) in September. Because there is a very full agenda, the Chair requested that questions be held until the end of each presentation.

II. Introductions

Dr. Mary Jo Trepka

Members, guests, and staff introduced themselves.

III. Meeting Housekeeping

Marlen Meizoso

Marlen Meizoso reviewed the meeting housekeeping presentation, which highlighted meeting decorum and general reminders to facilitate an effective meeting.

IV. Floor Open to the Public

Dr. Mary Jo Trepka

Dr. Trepka read the following:

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

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

There were no comments, so the floor was closed.

V. Review/Approve Agenda

All

The Committee reviewed the agenda that was distributed and posted in advance of the meeting. Staff indicated that a correction was needed on the room location on the agenda. The room should be on the first floor, community room. Additionally, the item “2025 Estimates and Projections” should be stricken. The item will be addressed next month when additional data has been received.

Motion to approve the agenda with the changes noted.

Moved: Dr. Diego Shmuels

Seconded: Vanessa Mills

Motion: Passed

VI. Review/Approve Minutes of July 11, 2024

All

The committee reviewed the minutes of July 11, 2024, and approved them as presented.

Motion to accept the minutes from July 11, 2024, as presented.

Moved: Dan Wall

Seconded: Dr. Daniel Shmuels

Motion: Passed

VII. Reports

▪ Part A

Dan Wall

Dan Wall reviewed the FY 2024 Ryan White Program expenditures and clients served; the complete report is posted online.

□ Expenditures (FY 2024) – start 3/1/2024; data include Reallocations/Sweeps #1.1

- **Part A: \$21,729,679 available for Direct Client Services; \$2,122,455.92 (9.77%) paid to date compared 7.64% paid to date as of 7/9/24.**
- **MAI: \$2,240,515 available for Direct Client Services; \$211,026.50 (9.42%) paid to date compared to 4.72% paid to date as of 7/9/24.**

Note: Carryover awards received and related award and reduction letters to recipients are being prepared. The carryover awards are not yet reflected in the attached “Contract Expenditures report put total \$795,210 (Part A) and \$1,474,770 (MAI), as requested.

□ **Service Utilization (FY 2024) – Start 3/1/2024**

Unduplicated Clients: 7,812 served through June 2024 (Part A and MAI combined) --
(compared with 7,430 clients served through May 2024)

- 7,546 clients received Part A services; and
- 1,081 clients received MAI services

Most utilized services in June 2024, by unduplicated client count:

- **Part A:**
 - 3,901 clients – Medical Case Management (MCM);
 - 917 clients – Outpatient/Ambulatory Health Services (OAHS); and
 - 623 clients – Oral Health Care (OHC).
- **MAI:**
 - 537 clients – MCM; and
 - 108 clients – OAHS.

The following was reported on status of the 18 RWP subrecipient contracts:

- 12 contracts are fully executed;
- 1 nearly ready for Mayor’s designee and County Clerk for final signatures (contract execution), on hold for one due diligence issue;
- 1 contract is under review by the County; and
- 4 contracts are pending review by the County.

Site visits of funded Part A/MAI subrecipients are underway.

Two Federal Reports due to HRSA were submitted by the deadline: 1) The FY 2024 Program Submissions Report (including a Partnership membership roster and reflectiveness worksheet; a signed letter of allocations reports from the Partnership Chair; the HIV Care Continuum Services table; and Service Category Plan table) and 2) The FY 2024 Program Terms Report which is a report of the Partnership’s approved allocations by service category for FY 2024 funding, based on the Final Notice of Award. This report includes a Consolidated List of Contracts, by subrecipient, and their funding by service category.

The Notice of Funding Opportunity (NOFO) for FY 2025 Ryan White Part A/MAI Program services was issued (emailed) to Recipients (the County) on July 3, 2024. Applications are due October 1, 2024.

▪ *Part B*

Marlen Meizoso

Mrs. Meizoso reviewed the April and May Part B expenditures report (as of August 2, 2024). In April, 385 clients were served at a cost of \$49,451.97, and in May, 408 clients were served at a cost of \$87,122.52.

▪ *ADAP*

Dr. Javier Romero

Dr. Romero referenced the July expenditures report (as of August 5, 2024) indicating the enrollment, expenditures, program updates, and pharmacy additions. The list of pharmacies enrolled with Magellan for the entire state was shared and has been posted online. Attendees were reminded pharmacy selection is a client's choice.

▪ *Medical Care Subcommittee*

Dr. Mary Jo Trepka

Dr. Trepka reviewed the Medical Care Subcommittee report. Members:

- Heard updates from the Ryan White Program and AIDS Drug Assistance Program (ADAP).
- Reviewed and started to make edits to the AIDS Pharmaceutical Assistance and Mental Health Service categories.
- Discussed 2025 planning budget projects to forward to the Executive Committee. Suggestions:

- Include hard copies (double-sided) of the Ryan White summary, ADAP report, Vacancy, and Partnership motions reports at each meeting.
- Hold two focus groups addressing HIV and Aging in English, Spanish, and Haitian Creole to clarify issues of access and needs, and allow the voice of the clients to be heard:
 1. Group 1: Age 55 and older to discuss aging body and health needs; and
 2. Group 2: Age 64 ½ to discuss aging and Medicare transitioning.

Suggested budget of \$7,500 for the six groups. Maximum capacity per group of 15. Client incentive of \$50. Refreshments and transportation assistance should be included.

- Reviewed and approved clarifying language under the Ophthalmology section of the Allowable Conditions list as indicated on pages 1 and 5.

Motion to approve the changes to the Allowable Conditions List as discussed.

Moved: Dan Wall

Seconded: Dr. Diego Shmuels

Motion: Passed

Members cancelled the August meeting because of scheduling conflicts. The next MCSC meeting is scheduled for September 27, 2024, at Behavioral Science Research Corp.

▪ *Vacancies*

Marlen Meizoso

Mrs. Meizoso reviewed the vacancy report as of July 30, 2024. There are vacancies for all Committees and the Partnership. Currently there are seven vacancies on the Care and Treatment Committee. If anyone knows of candidates who may be interested in the work of the Committee,

staff encourages these persons to be invited to a Committee meeting or training, or be directed to staff for further information.

VIII. Standing Business

The 2025 Planning was listed under standing business but moved to after the Community Input section during the meeting.

Motion to move 2025 Planning until after Community Input.

Moved: Dan Wall

Seconded: Dr. Daniel Shmuels

Motion: Passed

IX. New Business

- *2023 Client Satisfaction Survey Summary*

Dr. Robert Lander

Dr. Lander reviewed the summary data from the 2023 Client Satisfaction survey. Results will be shared with individual providers. The survey was quota sampled but not sampled by age. Below are the key takeaways:

- Overall “very satisfied” levels for Medical Case Management (MCM) and Outpatient / Ambulatory Health Services (OAHS) services continue to be high (~80% of clients). MCM and OAHS clients report higher satisfaction with the appointment process and greater ease in getting appointments in FY 2023 than in FY 2022.
- Although levels of Oral Health Care (OHC) satisfaction with the care received are trending upward since 2021, only 61% of OHC clients are “very satisfied.” Moreover, client satisfaction with the time it takes to get an OHC appointment is below MCM and OAHS levels. OHC service and access dissatisfaction issues are a serious source of concern.
- MCM tele-health use has increased substantially over 2022 levels (68% use tele-health for half or more of their visits, up from 27%).
- Adherence counseling rates are significantly higher for MCM clients in FY 2023 than they were in FY 2022.
- RWP client satisfaction levels with Peer and MCM services are very high, even if clients do not differentiate between these two roles. Almost 75% of MCM clients reported not having a Peer as part of their care team, despite virtually all of them receiving care from MCM agencies with Peers on board. High levels of contact and “follow up support” contribute to high client satisfaction.
- The “over-50” RWP clients in care are highly satisfied with their RWP care, and although many of them have medical co-occurring conditions related to aging (diabetes, high blood pressure, arthritis), they are more likely to go to their customary PCP for care than see a specialist. Except for a higher incidence of medical co-occurring conditions, the over-50s are indistinguishable from under-50s.
- About 30% of the RWP clients say they could have used mental health services in the past year, but one out of four of these clients were frustrated in getting an appointment and did not get the help they needed. Satisfaction levels could use some improvement.

There was a request for more information on the satisfaction between telehealth vs non-telehealth services. Also, if telehealth can be reviewed by race/ethnicity and race/ethnicity/gender.

▪ *Community Input*

Dr. Robert Ladner

Dr. Ladner reviewed the 2024 Community Input. Listening sessions, town halls, and a community input survey have been used to gather information over the last three years. Findings from all three years were included. In 2024, a short survey was posted online which was self-administered and anonymous in addition to solicitations for calls and emails for input. Demographic information and service needs were presented but because the survey was self-administered, it is not clear that the respondents understood the definitions of the service categories.

▪ *2025 Planning*

All

The Committee was asked to provide input on any special projects to be included in the staff support budget for FY 2025, above and beyond the annual legislatively required activities supported by the budget. These existing activities including comprehensive planning, priority setting and resource allocation, assessing efficiency of administrative mechanism, and needs assessment. A query was sent via email, but no replies had been received in advance of the meeting. The Committee supported the Medical Care Subcommittee's project, but suggested modifying the minimum age of the first set of focus groups from 55 to 50 years of age, in line with HRSA priorities. The Committee discussed how best to hear from people not in care. A project could be developed asking questions at EHE sites, CBO testing sites, and Jackson testing. The project should address stigma, denial of being sick, access to service, mental health and substance abuse. The main question to ask is why clients are not in service, and how to deliver services for those clients who have fallen out of care.

Motion to request BSR to generate a proposal to request an allocation to the Partnership to fund a study to look at why people are not in care, including at a minimum issues related to stigma.

Moved: Dan Wall

Seconded: Dr. Daniel Shmuels

Motion: Passed

▪ *Unmet Need*

Dr. Robert Ladner

Dr. Ladner reviewed the Unmet Need framework table from HRSA. The top section lists Department of Health prevalence data for numerous subpopulations, sorted in descending order based on size, drawn from the FDOH epidemiological profile. The lower section lists these data for the three Ryan White priority populations: Black Males, Black Females, and Hispanic Male to Male Sexual Contact, which are also three disparity populations followed in the Integrated Plan.

▪ *HRSA PCN#16-02 and Local Service Categories*

Dr. Robert Ladner

The planning council must have minimal service standards for all service categories regardless of whether or not these services are funded. As part of the annual approval process, the Miami-Dade Ryan White Program Service Standards Excerpts for FY 2025 was reviewed and approved, which contains Policy Clarification Notification 16-02 with local restrictions.

Motion to accept the Miami-Dade Ryan White Program Service Standards Excerpts for FY 2025.

Moved: Maria Henriquez

Seconded: Dr. Daniel Shmuels

Motion: Passed

▪ *Summaries to Date*

Marlen Meizoso

Mrs. Meizoso reviewed the Summaries to Date presentation which provided enhanced highlights on the epidemic including incidence and prevalence figures, transmission rates for transgenders and persons who inject drugs, sexually transmitted infections and HIV, EIIHA information, Demographic highlights, Care Continuum highlights, Co-Occurring Conditions highlights, and a highlight of the Dashboard Cards and their multiple uses.

▪ *Next Steps and Reminders*

Marlen Meizoso

Mrs. Meizoso reviewed the Next Steps and Reminders presentation which provided an overview of the topics reviewed to date and those remaining. Information on special directives, priority setting, Policy Clarification Notice #16-02, conflict of interest, and resource allocation was shared. The priority setting exercise is due by August 30, 2024. The Committee was reminded that the virtual needs assessment book is posted online for reference.

The Committee requested that the meeting be extended to 1 p.m. to ensure all meeting topics are concluded.

X. Announcements and Open Discussion

All

Mrs. Meizoso announced the next Get on Board training on September 4, 2024, and New Member Orientation on September 18, 2024.

No open discussion items were raised.

XI. Next Meeting

Dr. Mary Jo Trepka

The next meeting is scheduled for Thursday, September 18, 2024, at Care Resource, from 10:00 a.m. to 1:00 p.m.

XII. Adjournment

Dr. Mary Jo Trepka

With business concluded, Dr. Trepka thanked everyone for participating in the meeting and adjourned the meeting at 12:46 p.m.



Scan for meeting materials.



Care and Treatment Thursday, September 12, 2024

10:00 a.m. – 1:00 p.m.

Care Resource Community Health Center, Midtown Miami
3510 Biscayne Blvd, 1st Floor Community Room
Miami, FL 33137

AGENDA

- | | | |
|-------|--|--------------------|
| I. | Call to Order | Dr. Mary Jo Trepka |
| II. | Introductions | All |
| III. | Meeting Housekeeping | Marlen Meizoso |
| IV. | Floor Open to the Public | Dr. Mary Jo Trepka |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of August 8, 2024 | All |
| VII. | Reports | |
| | • Recipients (Part A, Part B, ADAP, General Revenue) | All |
| | • Vacancies | Marlen Meizoso |
| VIII. | Standing Business | |
| | • Additional Data from Client Satisfaction | Dr. Robert Ladner |
| | • Projections and Estimates (Section 6) | Dr. Robert Ladner |
| IX. | New Business | |
| | • Special Directives | All |
| | • Priorities Setting (Section 9) | All |
| | • Resource Allocation (Section 9) | All |
| X. | Announcements and Open Discussion | All |
| | • New Member Orientation September 18, 2024 | |
| | • Get on Board October 2, 2024 | |
| XI. | Next Meeting: October 10, 2024 at Care Resource | Dr. Mary Jo Trepka |
| XII. | Adjournment | Dr. Mary Jo Trepka |



Please turn off or mute cellular devices – Thank you

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

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

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

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

July 2024

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	
	<u>Monthly</u>	<u>Year-to-date</u>	<u>Monthly</u>	<u>Year-to-date</u>
	1	17	1	5
	2	1,163	1	757
	6,657	39,948	3,327	7,374
	32	285	18	68
	857	4,348	640	1,909
	1,983	10,608	1,284	3,301
	2	14	2	5
	15	4,209	15	583
	111	1,423	103	486
	40	184	16	46
	37	176	31	135
	525	2,799	21	47
TOTALS:	10,262	65,174		

Total unduplicated clients (month):

4,222

Total unduplicated clients (YTD):

8,119

See Service
Unit Definitions
on page 4

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

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

July 2024

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	
	<u>Monthly</u>	<u>Year-to-date</u>	<u>Monthly</u>	<u>Year-to-date</u>
	1	17	1	5
	2	1,163	1	757
	5,337	34,227	2,854	6,963
	30	271	16	60
	857	4,348	640	1,909
	1,797	9,378	1,170	3,045
	2	14	2	5
	15	4,209	15	583
	95	1,334	87	461
	40	184	16	46
	36	162	30	122
	525	2,799	21	47
TOTALS:	8,737	58,106		

Total unduplicated clients (month):

3,818

Total unduplicated clients (YTD):

7,917

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

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FUNDING SOURCE(S) INCLUDED:

FOR THE PERIOD OF:

July 2024

Ryan White MAI

SERVICE CATEGORIES

Core Medical Services

- Medical Case Management
- Mental Health Services
- Outpatient Ambulatory Health Services

Support Services

- Medical Transportation
- Outreach Services

	Service Units		Unduplicated Client Count	
	<u>Monthly</u>	<u>Year-to-date</u>	<u>Monthly</u>	<u>Year-to-date</u>
	1,320	5,721	633	919
	2	14	2	8
	186	1,230	121	479
	16	89	16	30
	1	14	1	13
TOTALS:	1,525	7,068		
Total unduplicated clients (month):	<u>699</u>			
Total unduplicated clients (YTD):	<u>1,189</u>			

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 YR34
FORMULA AND SUPPLEMENTAL FUNDING
Per Resolution #s: R-1162-21, R-246-20, R-247-20 & R-817-19

This report includes YTD paid reimbursements for FY 2024 Part A service months up to July 2024, as of 9/5/2024. This report reflects reimbursement requests that were due by 8/20/2024, and have been paid thus far. Pending Part A reimbursement requests that have been received and are in the review process currently total \$4,997,880.30. Four of 18 contracts are pending execution.

Project #: BURW3403	AWARD AMOUNTS	ACTIVITIES	
Grant Award Amount Formula	16,389,150.00	FORMULA	
Grant Award Amount FY22 Formula	2,353.00	PY_FORMULA	
Grant Award Amount Supplemental	6,799,165.00	SUPPLEMENTAL	FY 2024 Award
Grant Award Amount FY22 Supplemental	1,620,086.00	PY_SUPPLEMENTAL	\$24,810,754
Carryover Award of FY'23 Formula Funds	795,210.00	CARRYOVER	
Total Award	\$ 25,605,964.00		

CONTRACT ALLOCATIONS/ FORMULA, SUPPLEMENTAL & CARRYOVER

DIRECT SERVICES:

Core Medical Services	Allocations	Carryover (C/O) Allocations
8 AIDS Pharmaceutical Assistance	15,679.00	
6 Health Insurance Services	378,454.00	
1 Medical Case Management	5,676,584.00	
3 Mental Health Therapy/Counseling	76,690.00	
4 Oral Health Care	3,352,857.00	
2 Outpatient/Ambulatory Health Svcs	8,828,192.00	
9 Substance Abuse - Outpatient	44,128.00	

CORE Services Totals: 18,372,584.00

Support Services

Support Services	Allocations	Carryover Allocations
12 Emergency Financial Assistance	0.00	
5 Food Bank	972,532.00	795,210.00
13 Medical Transportation	195,280.00	
15 Other Professional Services	88,274.00	
14 Outreach Services	232,059.00	
7 Substance Abuse - Residential	1,868,950.00	

SUPPORT Services Totals: 3,357,095.00 / 795,210.00
 FY 2024 Award (not including C/O) 21,729,679.00

DIRECT SERVICES TOTAL: \$ 22,524,889.00

Total Core Allocation 18,372,584.00
 Target at least 80% core service allocation 17,383,743.20
Current Difference (Short) / Over \$ 988,840.80

Recipient Admin. (GC, GTL, BSR Staff) \$ 2,478,819.00

Quality Management \$ 602,256.00 3,081,075.00

(+) Unobligated Funds / (-) Over Obligated:
 Unobligated Funds (Formula & Supp) \$ -
 Unobligated Funds (Carry Over) \$ - \$ - 25,605,964.00

Core medical % against Total Direct Service Allocation (Not including C/O):
 Cannot be under 75% **84.55%** **Within Limit**

Quality Management % of Total Award (Not including C/O):
 Cannot be over 5% **2.43%** **Within Limit**

OMB-GC Administrative % of Total Award (Cannot include C/O):
 Cannot be over 10% **9.99%** **Within Limit**

CURRENT CONTRACT EXPENDITURES

DIRECT SERVICES:

Account	Core Medical Services	Expenditures	Carryover (C/O) Expenditures
5606970000	AIDS Pharmaceutical Assistance	0.00	
5606920000	Health Insurance Services	0.00	
5606870000	Medical Case Management	489,866.25	
5606860000	Mental Health Therapy/Counseling	3,510.00	
5606900000	Oral Health Care	476,067.00	
5606610000	Outpatient/Ambulatory Health Svcs	589,176.70	
5606910000	Substance Abuse - Outpatient	870.00	

CORE Services Totals: 1,559,489.95

Support Services

Account	Support Services	Expenditures	Carryover Expenditures
5606940000	Emergency Financial Assistance	0.00	
5606980000	Food Bank	529,492.20	0.00
5606460000	Medical Transportation	9,203.95	
5606890000	Other Professional Services	16,578.00	
5606950000	Outreach Services	6,506.32	
5606930000	Substance Abuse - Residential	624,500.00	

SUPPORT Services Totals: 1,186,280.47 / 0.00
 FY 2024 Award (not including C/O) 2,745,770.42

TOTAL EXPENDITURES DIRECT SVCS & % : \$ 2,745,770.42 12.19%

Formula Expenditure % 22.89%

5606710000 **Recipient Administration 756,261.09**

5606880000 **Quality Management 250,000.00 1,006,261.09**

Grant Unexpended Balance **FY 2023 Award 21,058,722.49** **Carryover 795,210.00** 21,853,932.49

Total Grant Expenditures & % \$ 3,752,031.51 14.65%

Core medical % against Total Direct Service Expenditures (Not including C/O):
 Cannot be under 75% **56.80%** **Danger!!!!**

Quality Management % of Total Award (Not including C/O):
 Cannot be over 5% **1.01%** **Within Limit**

OMB-GC Administrative % of Total Award (Cannot include C/O):
 Cannot be over 10% **3.05%** **Within Limit**

RYAN WHITE PART A GRANT AWARD (Grant#: BURW3201)
EARMARK ALLOCATION AND EXPENDITURE RECONCILIATION SCHEDULE YR34
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 2024 MAI service months up to July 2024, as of 9/5/2024. This report reflects reimbursement requests that were due by 8/20/2024, and have been paid thus far. Pending MAI reimbursement requests that have been received and are in the review process currently total \$447,407.88

PROJECT #: BURW3403	AWARD AMOUNTS	ACTIVITIES
Grant Award Amount MAI	2,600,572.00	MAI
Carryover Award of FY23 MAI Funds	1,474,770.00	MAI_CARRYOVER
Total Award	\$ 4,075,342.00	

CONTRACT ALLOCATIONS

DIRECT SERVICES:

Core Medical Services	Allocations	Carryover (C/O) Allocations
AIDS Pharmaceutical Assistance		
Health Insurance Services		
1 Medical Case Management	903,920.00	107,500.00
3 Mental Health Therapy/Counseling	18,960.00	
Oral Health Care		
2 Outpatient/Ambulatory Health Svcs	1,262,133.00	300,000.00
6 Substance Abuse - Outpatient	8,058.00	
CORE Services Totals:	2,193,071.00	407,500.00

Support Services	Allocations	Carryover Allocations
5 Emergency Financial Assistance	0.00	
Food Bank		
13 Medical Transportation	7,628.00	8,300.00
Other Professional Services		
7 Outreach Services	39,816.00	
Substance Abuse - Residential		
SUPPORT Services Totals:	47,444.00	
FY 2024 Award (not including C/O)	2,240,515.00	

DIRECT SERVICES TOTAL: \$ **2,656,315.00**

Total Core Allocation	2,193,071.00
Target at least 80% core service allocation	1,799,052.00
Current Difference (Short) / Over	\$ 394,019.00
Recipient Admin. (OMB-GC)	\$ 260,057.00
Quality Management	\$ 100,000.00
(+) Unobligated Funds / (-) Over Obligated:	
Unobligated Funds (MAI)	\$ -
Unobligated Funds (Carry Over)	\$ 1,058,970.00

Core medical % against Total Direct Service Allocation (Not including C/O):
 Cannot be under 75% **97.88%** **Within Limit**

Quality Management % of Total Award (Not including C/O):
 Cannot be over 5% **3.85%** **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 (C/O) Expenditures
5606970000	AIDS Pharmaceutical Assistance		
5606920000	Health Insurance Services		
5606870000	Medical Case Management	212,219.15	0.00
5606860000	Mental Health Therapy/Counseling	0.00	212,219.15
5606900000	Oral Health Care		
5606610000	Outpatient/Ambulatory Health Svcs	74,143.21	0.00
5606910000	Substance Abuse - Outpatient	0.00	74,143.21
CORE Services Totals:		286,362.36	0.00

Account	Support Services	Expenditures	Carryover Expenditures
5606940000	Emergency Financial Assistance	0.00	
5606980000	Food Bank		
5606460000	Medical Transportation	5,107.55	0.00
5606890000	Other Professional Services		5,107.55
5606950000	Outreach Services	0.00	
5606930000	Substance Abuse - Residential		
SUPPORT Services Totals:		5,107.55	
FY 2024 Award (not including C/O)		291,469.91	

TOTAL EXPENDITURES DIRECT SVCS & %: \$ **291,469.91** **10.97%**

5606710000	Recipient Administration	1,234.16	
5606880000	Quality Management	41,666.65	42,900.81
Grant Unexpended Balance		FY 2024 Award 2,266,204.28	Carryover 1,474,770.00
			3,740,971.28
Total Grant Expenditures & % (Including C/O):		\$ 334,370.72	8.20%

Core medical % against Total Direct Service Expenditures (Not including C/O):
 Cannot be under 75% **98.25%** **Within Limit**

Quality Management % of Total Award (Not including C/O):
 Cannot be over 5% **1.60%** **Within Limit**

OMB-GC Administrative % of Total Award (Cannot include C/O):
 Cannot be over 10% **0.05%** **Within Limit**

Provider Agency Name & Address
 FDOH in Miami-Dade County
 1350 N.W. 14th St.,
 Miami, 33125

Florida Department of Health
Expenditure/Invoice Report
Program Name: Patient Care-Consortia



**Contract Name: 2024-2025 Miami Dade CHD RW
 Consortia**

Area Name: AREA 11A

Month: July

Year: 2024-2025

Report generated on: 09/04/2024

Contract Services	Expended Month	# of Clients	# of Service Units	Approved Budget	Expended Budget	Expended Y-T-D	Rate of Expend
Administrative Services	July	0	0	\$125,294.00	\$3,818.44	\$43,191.19	34%
Medical Case Management (including treatment adherence)	July	59	7,245	\$111,527.00	\$8,331.75	\$39,433.50	35%
Mental Health Services - Outpatient	July	23	77	\$25,000.00	\$2,502.50	\$10,660.00	43%
Emergency Financial Assistance	July	59	123	\$912,456.00	\$50,180.90	\$164,672.85	18%
Non-Medical Case Management Services	July	11	11	\$184,024.00	\$2,691.68	\$28,417.73	15%
Referral for Health Care/Supportive Services	July	183	183	\$203,006.00	\$0.00	\$48,768.77	24%
Clinical Quality Management	July	0	0	\$82,071.00	\$1,538.10	\$5,835.04	7%
Planning and Evaluation	July	0	0	\$36,471.00	\$1,538.10	\$5,835.04	16%
Totals		335	7639	\$1,679,849.00	\$70,601.47	\$346,814.12	

Contract Services	Expended Month	# of Clients	# of Service Units	Approved Budget	Expended Budget	Expended Y-T-D	Rate of Expend
-------------------	----------------	--------------	--------------------	-----------------	-----------------	----------------	----------------

ADVANCE(S) INFORMATION:

Total Advances	\$0.00
Previous Reductions	\$0.00
Current Reductions	\$0.00
Remaining Advances	\$0.00

Total Contract Amount	\$1,679,849.00
Minus Expended Y-T-D	\$346,814.12
Minus UNPAID Advances	\$0.00
Balance To Draw	\$1,333,034.88

Total Expenditures this period:	\$70,601.47
Less Advance Payback this period:	\$0.00

AMOUNT OF FUNDS REQUESTED THIS REPORT: \$70,601.47

I certify that the above report is a true, accurate and correct reflection of the activities this period; and that the expenditures reported are made only for items which are allowable and directly related to the purpose of this referenced contract.

_____ Signature & Title of Provider Agency Official	_____ Date	_____ Contract Manager Signature	_____ Date
		_____ Contract Manager's Supervisor Signature	_____ Date

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

SEPTEMBER 3, 2024, 2024

ADAP MIAMI-DADE / SUMMARY REPORT[^] – AUGUST 2024

UTILIZATION & EXPENDITURES

MONTH	1 ST ENROLLMENTS	RE-ENROLLMENTS	CLIENTS ^{^^}	CHD PHARMACY \$	RXS	PATIENTS	RX/PT	PAYMENTS	#PREMIUMS	~\$ / PREMIUM
APR-24	93	763	7,182	\$1,299,197.75	1,574	759	2.1	\$4,760,132.82	2,869	\$1,659.16
MAY-24	99	660	7,358	\$1,348,852.85	2,632	781	3.4	\$4,661,276.34	2,804	\$1,662.37
JUN-24	75	305	7,365	\$1,224,156.67	2,319	672	3.5	\$4,735,158.01	2,855	\$1,658.55
JUL-24	86	268	7,414	\$1,281,998.16	2,551	762	3.3	\$4,743,763.59	2,867	\$1,654.61
AUG-24	72	199	7,495	\$1,297,441.51	2,592	744	3.5	\$4,715,538.90	2,854	\$1,652.26
SEP-24										
OCT-24										
NOV-24										
DEC-24										
JAN-25										
FEB-25										
MAR-25										
FY24/25	427	2,195	7,495	\$ 6,451,646.94	11,561	3,718	3.1	\$23,615,869.66	14,249	\$1,657.37

PROGRAM UPDATE

- *09/01/24: BENEFIT LEVEL [^] 7,495 DIRECT DISPENSE 57 % 4273 - PREMIUM PLUS 43 % 3189 [ACA-MP, ESI, COBRA, MEDICARE PART-D, MEDICAID SOC]
- *09/01/24: CABENUVA [@] [^] 233 DIRECT DISPENSE 67 % 155 - PREMIUM PLUS 33 % 78
- *09/01/24: MEDICARE ELIGIBLE [^] 13 UNDER REVIEW THIS MONTH. UNINSURED CLIENTS WITHIN 7-MONTH WINDOW AROUND 65TH BIRTHDAY 72. FOR COPAYMENT ASSISTANCE.

DATE: 09/03/24. - SOURCE: PROVIDE ENTERPRISE & PHARMACY SYSTEMS. - [^] ALL DATA SUBJECT TO REVIEW & EDITING. ^{^^} OPEN + ACTIVE PTS. - NOTE: EXPENDITURES NOT INCLUDED FOR 335 WP UNINSURED CLIENTS.

DIRECT DISPENSE ACCESS

CURRENT ONGOING CHD PHARMACY SERVICES		
1	FDOH CHD PHARMACY @ FLAGLER STREET	ON SITE – 90 DAYS
2	FDOH CHD PHARMACY @ FLAGLER STREET	MAIL SERVICE
3	FDOH ADAP PROGRAM @ WEST PERRINE	CVS SPECIALTY MAIL ORDER

ADDITIONAL PHARMACIES - MAGELLAN RX PBM MIAMI-DADE – AS OF 07/01/24		
AIDS HEALTHCARE FOUNDATION	COMMUNITY HEALTH OF SF - CHI	WALGREENS
BORINQUEN HEALTHCARE CTR	CVS SPECIALTY MAIL ORDER	FRESCO Y MÀS
MIAMI BEACH COMMUNITY HC	NAVARRO SPECIALTY PHARMACY	PHARMCO RX

PHARMACY SELECTION:

TO AVOID LIABILITY, DUPLICATION OF DISPENSING/PICKUPS AT MULTIPLE PHARMACIES, & TO REDUCE CONFUSION, ADAP MIAMI ASSISTS CLIENTS WITH THE PHARMACY SELECTION PROCESS.

FOR ADDITIONAL INFORMATION: WWW.ADAPMIAMI.COM OR ADAP.FLDOHMDC@FLHEALTH.GOV





Scan for meeting materials.



Care and Treatment Thursday, September 12, 2024

10:00 a.m. – 1:00 p.m.

Care Resource Community Health Center, Midtown Miami
3510 Biscayne Blvd, 1st Floor Community Room
Miami, FL 33137

AGENDA

- | | | |
|-------|--|--------------------|
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| II. | Introductions | All |
| III. | Meeting Housekeeping | Marlen Meizoso |
| IV. | Floor Open to the Public | Dr. Mary Jo Trepka |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of August 8, 2024 | All |
| VII. | Reports | |
| | • Recipients (Part A, Part B, ADAP, General Revenue) | All |
| | • Vacancies | Marlen Meizoso |
| VIII. | Standing Business | |
| | • Additional Data from Client Satisfaction | Dr. Robert Ladner |
| | • Projections and Estimates (Section 6) | Dr. Robert Ladner |
| IX. | New Business | |
| | • Special Directives | All |
| | • Priorities Setting (Section 9) | All |
| | • Resource Allocation (Section 9) | All |
| X. | Announcements and Open Discussion | All |
| | • New Member Orientation September 18, 2024 | |
| | • Get on Board October 2, 2024 | |
| XI. | Next Meeting: October 10, 2024 at Care Resource | Dr. Mary Jo Trepka |
| XII. | Adjournment | Dr. Mary Jo Trepka |



Please turn off or mute cellular devices – Thank you

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

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



Membership Report

July 30, 2024

The Miami-Dade HIV/AIDS Partnership

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

Opportunities for Ryan White Program Clients

6 seats are available to Ryan White Program Clients who are not affiliated or employed by a Ryan White Program Part A funded service provider.

Opportunities for General Membership

5 seats are open to people with HIV, service providers, and community stakeholders who have reputations of integrity and community service, and possess the relevant knowledge, skills and expertise in these membership categories:

- Hospital or Health Care Planning Agency Representative
- Housing, Homeless or Social Service Provider
- Mental Health Provider Representative
- Other Federal HIV Program Grantee Representative (SAMHSA)
- Other Federal HIV Program Grantee (Part F)

Are you a Member?

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

Do You Qualify for Membership?

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

Are you a resident of Miami-Dade County?

Are you a registered voter in Miami-Dade County?

Note: Some seats for people with HIV are exempt from this requirement.

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



Get Started Today!
Scan the QR Code or contact
mdcpartnership@behavioralscience.com.



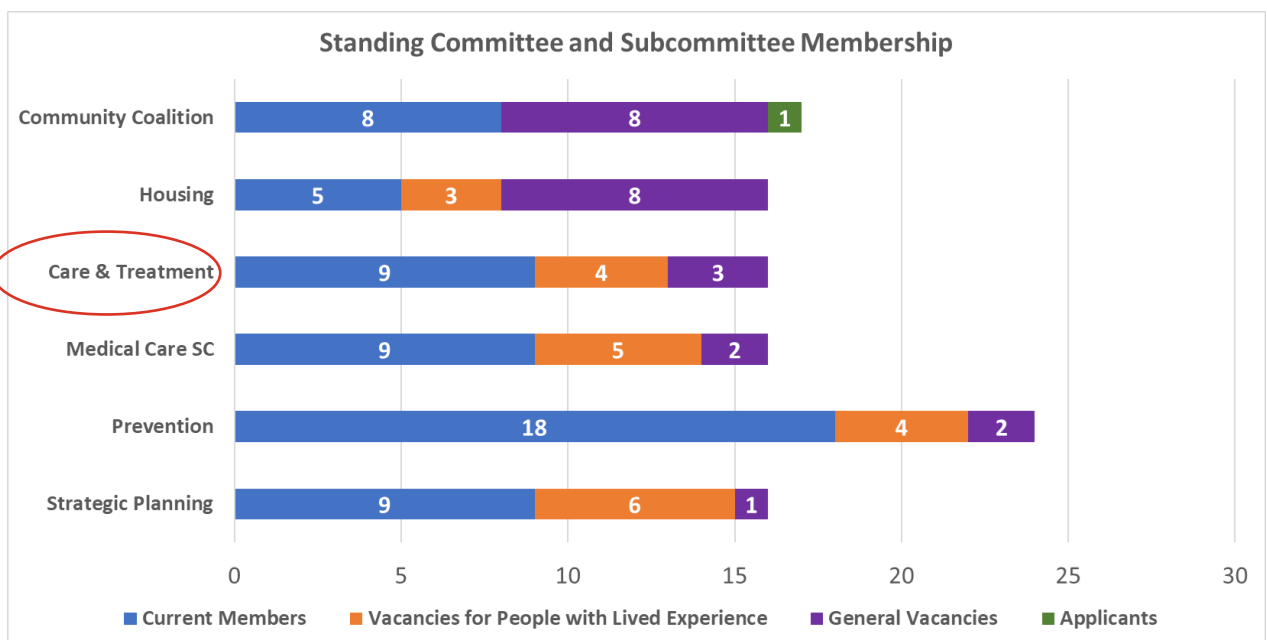


Committees

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

- ⌘ Allocate more than \$27 million in Ryan White Program funds with the **Care and Treatment Committee**
- ⌘ Develop an Annual Report on the State of HIV and the Ryan White Program in Miami-Dade County with the **Strategic Planning Committee**
- ⌘ Recruit and train new Partnership members with the **Community Coalition**
- ⌘ Work with the City of Miami Housing Opportunities for Persons with AIDS Program to address housing challenges for people with HIV/AIDS with the **Housing Committee**
- ⌘ Oversee updates and changes to medical treatment guidelines for the Ryan White Part/MAI Program with the **Medical Care Subcommittee**
- ⌘ Set priorities for Ryan White Program HIV health and support services in Miami-Dade County with the **Care and Treatment Committee**
- ⌘ Share a meal and testimonials at Roundtables with the **Community Coalition**
- ⌘ Develop and monitor the official HIV Prevention and Care Integrated Plan with the **Strategic Planning Committee & Prevention Committee**
- ⌘ Develop your leadership skills and be a committee leader with the **Executive Committee**
- ⌘ Oversee updates and changes to the Ryan White Prescription Drug Formulary with the **Medical Care Subcommittee**
- ⌘ Develop and monitor local Ending the HIV Epidemic activities with the Florida Department of Health in Miami-Dade County with the **Prevention Committee & Strategic Planning Committee**
- ⌘ Be in the know about the latest HIV activities of the Prevention Mobilization Workgroups with the **Prevention Committee**

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





Scan for meeting materials.



Care and Treatment Thursday, September 12, 2024

10:00 a.m. – 1:00 p.m.

Care Resource Community Health Center, Midtown Miami
3510 Biscayne Blvd, 1st Floor Community Room
Miami, FL 33137

AGENDA

- | | | |
|-------|--|--------------------|
| I. | Call to Order | Dr. Mary Jo Trepka |
| II. | Introductions | All |
| III. | Meeting Housekeeping | Marlen Meizoso |
| IV. | Floor Open to the Public | Dr. Mary Jo Trepka |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of August 8, 2024 | All |
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| | • Special Directives | All |
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| | • New Member Orientation September 18, 2024 | |
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| XI. | Next Meeting: October 10, 2024 at Care Resource | Dr. Mary Jo Trepka |
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Supplemental Findings From the 2023 Client Satisfaction Survey

FY 2023 Ethnic Differences in Telehealth and In-Person Visits to Medical Case Managers					
In-Person Visits vs. Telehealth	Client Survey Total (n=527)	Black/African American (n=94)	Haitian (n=49)	Hispanic (n=347)	Non-Hisp. White (n=21)
Most or all in-person	32%	28%	51%	31%	33%
About 50/50	32%	34%	27%	33%	14%
Most or all telehealth	36%	38%	22%	35%	58%

FY 2023 Gender Differences in Telehealth and In-Person Visits to Medical Case Managers			
In-Person Visits vs. Telehealth	Client Survey Total (n=527)	Males (n=411)	Females (n=99)
Most or all in-person	32%	30%	44%
About 50/50	32%	33%	29%
Most or all telehealth	36%	37%	27%

FY 2023 MCM Client Satisfaction Based on Telehealth and In-Person Visits to Medical Case Managers			
In-Person Visits vs. Telehealth	Very Satisfied with MCM	Satisfied with MCM	Can't Say, Dissatisfied
All RWP clients	82%	15%	3%
Most or all in-person	86%	11%	3%
About 50/50	85%	14%	1%
Most or all telehealth	77%	19%	4%



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Special Directives

Special Directives:

- ▶ Provide guidance to the Recipient on desired ways to respond to identified service needs, priorities, and/or shortfalls.
- ▶ Often specify use or non-use of a particular service model, or addresses geographic access to services, language issues, or issues relative to specific populations.
- ▶ May have cost implications.
- ▶ Must be followed by the Recipient in procurement, contracting, or other service planning. (When directives cannot be achieved, the Recipient must report on challenges.)

Priority Setting

Per HRSA guidance, all Part A/MAI service categories will be prioritized.

During the Priority Setting Process:

- ▶ The Committee will determine a ranking from highest to lowest priority of all Part A/MAI service categories available to people living with HIV in Miami-Dade County.
- ▶ **Use your Dashboard Cards!** Priority Setting is a data-driven process, using data, such as utilization, epidemiological, and unmet needs.
- ▶ Remember that Priority Setting is not tied to Resource Allocations or to service providers.



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

Policy Clarification Notice #16-02

Priority Setting Process

Members and guests present today will receive a Survey Monkey link to rank all 28 allowable service categories for Part A and Minority AIDS Initiative (MAI) funding.



ALL surveys must be completed by August 30, 2024.



Staff will bring the aggregate results of priorities to the September 12, 2024 meeting for final deliberations.



The Committee will vote on the final priorities for Part A and MAI, and these recommendations will be forwarded to the Partnership.

**Year 2025-2026
Ranking Sheet Sample**

Ryan White Program Part A Priorities

1) As part of the annual Needs Assessment process and keeping in mind all the presentations in the Needs Assessment, use this survey to rank all 28 service categories from highest priority (1) to lowest priority (28) for people living with HIV in Miami-Dade County. Please see HRSA Policy Clarification 14-02 for details.

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

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

C=core services S= support services

**Year 2025-2026
Ranking Sheet Sample**

Ryan White Program Minority AIDS Initiative (MAI) Priorities

MAI and racial and ethnic minority communities. Keeping in mind all the presentations made during the Needs Assessment, rank all 28 service categories from highest priority (1) to lowest priority (28) for racial and ethnic minorities living with HIV in Miami-Dade County. Please see HRSA Policy Clarification 14-02 for details.

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	Emergency Financial Assistance [S]
	Food Bank/Home-Delivered Meals [S]
	Health Education/Risk Reduction [S]
	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
	Home and Community Based Health Care [C]
	Home Health Care [C]
	Hospice Services [C]
	Housing Services [C]
	Linguistic Services [S]
	Medical Case Management, including Treatment Adherence Services [C]
	Medical Nutrition Therapy [C]
	Medical Transportation (Vouchers) [S]
	Mental Health Services [C]
	Non-Medical Case Management [S]

Sample Priority Sheets

The background features a collage of financial data visualizations. On the left, a pie chart is divided into several segments of varying colors. Above it, a bar chart shows data for the months of October, November, and December. Below the pie chart, a data table is visible with two columns of numbers. The right side of the slide is decorated with abstract blue geometric shapes.

Resource Allocations

During the Resource Allocations Process:

- ▶ The Committee will decide how much money to allocate to each service category.
- ▶ Remember that Resource Allocations are not tied to Priority Setting. Some lower-ranked service categories may receive disproportionate funding because they are expensive to provide or there are no other funding sources.
- ▶ **Use your Dashboard Cards!** Other funding streams, cost per client data, and anticipated numbers of new clients coming into care should be considered in decision making.

Resource Allocations and Managing Conflicts



Process should be fair, data-based and free of conflicts of interest.



If a member is the sole provider in a service category and funds are being allocated, the conflicted member must recuse him/herself from voting. The member will follow a formal disclosure process, complete form 8B, and will step outside of the room both during discussion of and voting on the conflicted item. He/she may return to the meeting once the discussion and voting are concluded.

Resource Allocations Restrictions

Core Services


- ▶ HRSA requires no less than 75% of funds be allocated to core services (unless the program has a waiver).

Support Services

- ▶ Remaining funds may be allocated to support services.
- ▶ Funded support services need to be linked to positive medical outcomes which are outcomes affecting the HIV-related clinical status of an individual with HIV/AIDS.

Resource Allocations Process

Members and guest present will receive two sets of budget worksheets, one flat funding (current base) and one ceiling funding (grant limit) for Part A and MAI.



Based on the data presented throughout the process the Committee will allocate funding to service categories.



Recommendations on funding will be forwarded to the Partnership.

Review Materials!

Annual HIV/AIDS Needs Assessment

Decisions made during Needs Assessments 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.

2024 Needs Assessment

Complete Needs Assessment Book (as of May 9, 2024)

- Needs Assessment Responsibilities for Planning Councils
- Needs Assessment Priority Setting Process
- HIV Epidemiology in Miami-Dade County, 2022 (FDOH-MDC)



- Policy Clarification Notice (PCN) #16-00: Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds
- Complete Needs Assessment Book
- Process for Setting Priorities and Allocating Resources
- Needs Assessment Responsibilities
- 2024 Guide to Dashboard Cards

Past Needs Assessments



[RETURN TO MENU](#)



Save the Date!

FINAL PSRA MEETING

September 12, 2024

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

At Care Resource

Thank
You





Scan for meeting materials.



Care and Treatment
Thursday, September 12, 2024

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**Year 2025-2026
Ranking Sheet Sample**

Ryan White Program Part A Priorities

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

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

C=core services S=support services

Ryan White Part A Priority Ranking 2025-2026

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

C=core services S=support services

**Year 2025-2026
Ranking Sheet Sample**

Ryan White Program Minority AIDS Initiative (MAI) Priorities

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

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Ryan White Minority AIDS Initiative (MAI) Priority Ranking 2025-2026

Adjustments	Rank	Services
	1	Medical Case Management, including Treatment Adherence Services [C]
	2	AIDS Drug Assistance Program (ADAP) Treatment [C]
	3	Outpatient/Ambulatory Health Services [C]
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	17	Psychosocial Support [S]
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	19	Home and Community Based Health Care [C]
	20	Health Education/Risk Reduction [S]
	21	Home Health Care [C]
	22	Hospice Services [C]
	23	Referral for Health Care and Support Services [S]
	24	Rehabilitation Services [S]
	25	Child Care Services [S]
	26	Other Professional Services (Legal Assistance and Permanency Planning) [S]
	27	Linguistic Services [S]
	28	Respite Care [S]

C=core services S=support services



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MIAMI-DADE HIV/AIDS PARTNERSHIP

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**MIAMI DADE COUNTY
RYAN WHITE PROGRAM (RWP)
FY 2025 PART A FLAT FUNDING (FORMULA & SUPPLEMENTAL FUNDING)
BUDGET WORKSHEET**

FY 2025 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 EXPENDITURES	FY 2023 %	FY 2025 AMOUNTS NEEDED TO FUND CONTINUATION CONTRACT AWARDS (RFP)	FY 2025 %	TOTAL CARRYOVER REQUEST FOR USE IN FY 2024	FY 2025 RECOMMENDED ALLOCATION ¹	FY 2025 %
	AIDS PHARMACEUTICAL ASSISTANCE [C]	\$1,109.57	0.01%	\$88,255	0.40%			0.00%
	EMERGENCY FINANCIAL ASSISTANCE [S]	\$0.00	0.00%	\$88,253	0.40%			0.00%
	FOOD BANK*/HOME DELIVERED MEALS [S]	\$2,702,229.90	12.19%	\$529,539	2.40%	\$795,210		0.00%
	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	\$324,143.01	1.46%	\$595,700	2.70%			0.00%
	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$5,864,806.80	26.46%	\$5,869,052	26.64%			0.00%
	MEDICAL TRANSPORTATION [S]	\$191,280.78	0.86%	\$154,449	0.70%			0.00%
	MENTAL HEALTH SERVICES [C]	\$56,046.25	0.25%	\$132,385	0.60%			0.00%
	ORAL HEALTH CARE [C]	\$3,631,549.00	16.38%	\$3,088,975	14.02%			0.00%
	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	\$71,730.00	0.32%	\$154,449	0.70%			0.00%
	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$7,848,156.83	35.40%	\$8,847,707	40.17%			0.00%
	OUTREACH SERVICES [S]	\$117,183.05	0.53%	\$264,696	1.20%			0.00%
	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$1,410.00	0.01%	\$44,128	0.20%			0.00%
	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	\$1,358,250.00	6.13%	\$2,169,744	9.85%			0.00%
	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	CHILD CARE SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	EARLY INTERVENTION SERVICES [C]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	HEALTH EDUCATION/RISK REDUCTION [S]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	HOME HEALTH CARE [C]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	HOSPICE [C]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	HOUSING [S]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	LINGUISTIC SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	MEDICAL NUTRITION THERAPY [C]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	REHABILITATION SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	RESPIRE CARE [S]	Not Part A Funded ³	N/A	Not Part A Funded			Not Part A Funded	N/A
	SUBTOTAL	\$22,167,895.19	100.00%	\$22,027,332	100.00%	\$795,210	\$21,729,679	100.0%

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

A	B										
<table border="1"> <tr><td>ADMINISTRATION ²</td><td align="right">\$2,008,219.94</td></tr> <tr><td>CLINICAL QUALITY MANAGEMENT</td><td align="right">\$600,000.00</td></tr> <tr><td>TOTAL</td><td align="right">\$24,776,115.13</td></tr> </table>	ADMINISTRATION ²	\$2,008,219.94	CLINICAL QUALITY MANAGEMENT	\$600,000.00	TOTAL	\$24,776,115.13	<table border="1"> <tr><td>Sum of Column B Over/Short</td><td align="right">\$0.00</td></tr> <tr><td>Difference (B-A)</td><td align="right">-\$21,729,679.00</td></tr> </table>	Sum of Column B Over/Short	\$0.00	Difference (B-A)	-\$21,729,679.00
ADMINISTRATION ²	\$2,008,219.94										
CLINICAL QUALITY MANAGEMENT	\$600,000.00										
TOTAL	\$24,776,115.13										
Sum of Column B Over/Short	\$0.00										
Difference (B-A)	-\$21,729,679.00										
<table border="1"> <tr><td>Core Medical Services (includes carryover exp.) ⁴</td><td align="right">79.97%</td></tr> <tr><td>Support Services</td><td align="right">20.03%</td></tr> </table>	Core Medical Services (includes carryover exp.) ⁴	79.97%	Support Services	20.03%	<table border="1"> <tr><td>Exp. Ratios</td><td align="right">84.74%</td></tr> <tr><td>Exp. Ratios</td><td align="right">15.26%</td></tr> </table>	Exp. Ratios	84.74%	Exp. Ratios	15.26%		
Core Medical Services (includes carryover exp.) ⁴	79.97%										
Support Services	20.03%										
Exp. Ratios	84.74%										
Exp. Ratios	15.26%										

NOTES:

¹ Total based on the RWP FY 2024 final award.

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

³ Service categories shaded in grey have been added for "FY 2025 RANKING" (i.e., Priority ranking) purposes ONLY and are not currently funded under the local RWP-Part A and MAI. This process is required by HRSA's Notice of Funding Opportunity (NOFO) instructions and will assist other funding sources (e.g., FDOH/Part B) in directing their available resources to areas of need.

⁴ Actual FY 2023 Core Medical Service's expenditure ratio was 82.66%, net of expenditures funded by the carryover award. Per RWP legislation, Core Medical Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Medical Services Waiver.

**MIAMI DADE COUNTY
RYAN WHITE PROGRAM (RWP)
FY 2025 PART A FUNDING CEILING (FORMULA & SUPPLEMENTAL)
BUDGET WORKSHEET**

FY 2025 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 EXPENDITURES	FY 2023 %	FY 2025 RECOMMENDED ALLOCATION ¹	FY 2025 %
	AIDS PHARMACEUTICAL ASSISTANCE [C]	\$1,109.57	0.01%		0.00%
	EMERGENCY FINANCIAL ASSISTANCE [S]	\$0.00	0.00%		0.00%
	FOOD BANK*/HOME DELIVERED MEALS [S]	\$2,702,229.90	12.19%		0.00%
	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	\$324,143.01	1.46%		0.00%
	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$5,864,806.80	26.46%		0.00%
	MEDICAL TRANSPORTATION [S]	\$191,280.78	0.86%		0.00%
	MENTAL HEALTH SERVICES [C]	\$56,046.25	0.25%		0.00%
	ORAL HEALTH CARE [C]	\$3,631,549.00	16.38%		0.00%
	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	\$71,730.00	0.32%		0.00%
	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$7,848,156.83	35.40%		0.00%
	OUTREACH SERVICES [S]	\$117,183.05	0.53%		0.00%
	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$1,410.00	0.01%		0.00%
	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	\$1,358,250.00	6.13%		0.00%
	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	CHILD CARE SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	EARLY INTERVENTION SERVICES [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HEALTH EDUCATION/RISK REDUCTION [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOME HEALTH CARE [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOSPICE [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	HOUSING [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	LINGUISTIC SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	MEDICAL NUTRITION THERAPY [C]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	REHABILITATION SERVICES [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	RESPIRE CARE [S]	Not Part A Funded ³	N/A	Not Part A Funded	N/A
	SUBTOTAL	\$22,167,895.19	100.00%	\$22,846,162	100.0%

* Funded component of the service category.

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

A	B	
\$678,266.81	\$0.00	Sum of Column B Over/Short
Difference (B-A)	-\$22,846,162.00	

ADMINISTRATION ²	\$2,008,219.94	\$2,605,129
CLINICAL QUALITY MANAGEMENT	\$600,000.00	\$600,000
TOTAL ³	\$24,776,115.13	\$26,051,291

	Exp. Ratios	Exp. Ratios
Core Medical Services (includes carryover exp.) ⁴	79.97%	0.00%
Support Services	20.03%	0.00%

NOTES:

¹ Award Ceiling Totals \$28,781,891 [\$26,051,291 (Part A) and \$2,730,600 (MAI)] per HRSA's FY 2025 Notice of Funding Opportunity (NOFO) Number HRSA-25-054.

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

³ Service categories shaded in grey have been added for "FY 2025 RANKING" (i.e., Priority ranking) purposes ONLY and are not currently funded under the local RWP-Part A and MAI. This process is required by HRSA's NOFO instructions and will assist other funding sources (e.g., FDOH/Part B) in directing their available resources to areas of need.

⁴ Actual FY 2023 Core Medical Service's expenditure ratio was 82.66%, net of expenditures funded by the carryover award. Per RWP legislation, Core Medical Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Medical Services Waiver.

**MIAMI DADE COUNTY
RYAN WHITE PROGRAM (RWP)
FY 2025 MINORITY AIDS INITIATIVE (MAI) FLAT FUNDING
BUDGET WORKSHEET**

FY 2025 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 EXPENDITURES	FY 2023 %	FY 2025 AMOUNTS NEEDED TO FUND CONTINUATION CONTRACT AWARDS (RFP)	FY 2025 %	TOTAL CARRYOVER REQUEST FOR USE IN FY 2024	FY 2025 RECOMMENDED ALLOCATION ¹	FY 2025 %
	EMERGENCY FINANCIAL ASSISTANCE [S]	\$0.00	0.00%	\$12,087	0.51%			0.00%
	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES	\$645,270.20	39.50%	\$903,920	38.41%	\$712,385		0.00%
	MEDICAL TRANSPORTATION [S]	\$7,616.40	0.47%	\$7,628	0.32%	\$50,000		0.00%
	MENTAL HEALTH SERVICES [C]	\$3,380.00	0.21%	\$18,960	0.81%			0.00%
	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$940,651.58	57.59%	\$1,362,753	57.91%	\$712,385		0.00%
	OUTREACH SERVICES [S]	\$36,498.00	2.23%	\$39,816	1.69%			0.00%
	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$30.00	0.00%	\$8,058	0.34%			0.00%
	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	CHILD CARE SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	EARLY INTERVENTION SERVICES [C]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	HOME HEALTH CARE [C]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	HOSPICE [C]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	HOUSING [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	LINGUISTIC SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	ORAL HEALTH CARE [C]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	REHABILITATION SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	RESPIRE CARE [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded ²	N/A	Not MAI Funded			Not MAI Funded	N/A
	SUBTOTAL	\$1,633,446.18	100.00%	\$2,353,222	100.00%	\$1,474,770	\$2,240,515	0.00%

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

A

\$607,068.82
Difference (B-A)

B

Sum of Column B
Over/Short

\$0.00
-\$2,240,515.00

ADMINISTRATION	\$226,678.65
CLINICAL QUALITY MANAGEMENT	\$100,000.00
TOTAL	\$1,960,124.83

\$272,580
\$100,000
\$2,725,802

\$260,057
\$100,000
\$2,600,572

Core Medical Services (includes carryover exp.)³
Support Services

Exp. Ratios
97.30%
2.70%

Exp. Ratios
97.47%
2.53%

Exp. Ratios
0.00%
0.00%

NOTES:

¹ Total based on the RWP FY 2024 final award.

² Service categories shaded in grey have been added for "FY 2025 RANKING" (i.e., Priority ranking) purposes ONLY and are not currently funded under the local RWP-Part A and MAI. This process is required by HRSA's Notice of Funding Opportunity (NOFO) instructions and will assist other funding sources (e.g., FDOH/Part B) in directing their available resources to areas of need.

³ Actual FY 2023 Core Medical Service's expenditure ratio was 94.62%, net of expenditures funded by the carryover award. Per RWP legislation, Core Medical Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Medical Services Waiver.

**MIAMI DADE COUNTY
RYAN WHITE PROGRAM (RWP)
FY 2025 MINORITY AIDS INITIATIVE (MAI) FUNDING CEILING
BUDGET WORKSHEET**

FY 2025 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2023 EXPENDITURES	FY 2023 %	FY 2025 RECOMMENDED ALLOCATION ¹	FY 2025 %
	EMERGENCY FINANCIAL ASSISTANCE [S]	\$0.00	0.00%		0.00%
	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$645,270.20	39.50%		0.00%
	MEDICAL TRANSPORTATION [S]	\$7,616.40	0.47%		0.00%
	MENTAL HEALTH SERVICES [C]	\$3,380.00	0.21%		0.00%
	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$940,651.58	57.59%		0.00%
	OUTREACH SERVICES [S]	\$36,498.00	2.23%		0.00%
	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$30.00	0.00%		0.00%
	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	CHILD CARE SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	EARLY INTERVENTION SERVICES [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOME HEALTH CARE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOSPICE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	HOUSING [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	LINGUISTIC SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	ORAL HEALTH CARE [C]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	REHABILITATION SERVICES [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	RESPIRE CARE [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded ²	N/A	Not MAI Funded	N/A
	SUBTOTAL	\$1,633,446.18	100.00%	\$2,357,540	0.00%

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

A	B	
	\$724,093.82	\$0.00
	Difference (B-A)	-\$2,357,540.00
		Sum of Column B Over/Short

ADMINISTRATION	\$226,678.65	\$273,060
CLINICAL QUALITY MANAGEMENT	\$100,000.00	\$100,000
TOTAL ²	\$1,960,124.83	\$2,730,600
	Exp. Ratios	Exp. Ratios
Core Medical Services (includes carryover exp.) ³	97.30%	0.00%
Support Services	2.25%	0.00%

NOTES:

¹ Award Ceiling Totals \$28,781,891 [\$26,051,291 (Part A) and \$2,730,600 (MAI)] per HRSA's FY 2025 Notice of Funding Opportunity (NOFO) Number HRSA-25-054.

² Service categories shaded in grey have been added for "FY 2025 RANKING" (i.e., Priority ranking) purposes ONLY and are not currently funded under the local RWP-Part A and MAI. This process is required by HRSA's Notice of Funding Opportunity (NOFO) instructions and will assist other funding sources (e.g., FDOH/Part B) in directing their available resources to areas of need.

³ Actual FY 2023 Core Medical Service's expenditure ratio was 94.62%, net of expenditures funded by the carryover award. Per RWP legislation, Core Medical Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Medical Services Waiver.

**MIAMI DADE COUNTY
RYAN WHITE PROGRAM (RWP)
FY 2026 PART A (FORMULA & SUPPLEMENTAL) - RFP FUNDING PERCENTAGE (%) DIRECTIVE
BUDGET WORKSHEET**

SERVICE CATEGORIES (ALPHABETIC ORDER) ¹	CORE/SUPPORT SERVICE	FY 2023 EXPENDITURES	FY 2023 %	FY 2026 RFP FUNDING PERCENTAGE ² (Enter Whole % Only)
AIDS PHARMACEUTICAL ASSISTANCE	CORE	\$1,109.57	0.01%	
EMERGENCY FINANCIAL ASSISTANCE	SUPPORT	\$0.00	0.00%	
FOOD BANK*/HOME DELIVERED MEALS	SUPPORT	\$2,702,229.90	12.19%	
HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS	CORE	\$324,143.01	1.46%	
MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES	CORE	\$5,864,806.80	26.46%	
MEDICAL TRANSPORTATION	SUPPORT	\$191,280.78	0.86%	
MENTAL HEALTH SERVICES	CORE	\$56,046.25	0.25%	
ORAL HEALTH CARE	CORE	\$3,631,549.00	16.38%	
OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING)	SUPPORT	\$71,730.00	0.32%	
OUTPATIENT/AMBULATORY HEALTH SERVICES	CORE	\$7,848,156.83	35.40%	
OUTREACH SERVICES	SUPPORT	\$117,183.05	0.53%	
SUBSTANCE ABUSE OUTPATIENT CARE	CORE	\$1,410.00	0.01%	
SUBSTANCE ABUSE SERVICES (RESIDENTIAL)	SUPPORT	\$1,358,250.00	6.13%	
HOUSING	SUPPORT	Not Currently Funded	N/A	
NON-MEDICAL CASE MANAGEMENT SERVICES	SUPPORT	Not Currently Funded	N/A	
PSYCHOSOCIAL SUPPORT SERVICES	SUPPORT	Not Currently Funded	N/A	
SUBTOTAL		\$22,167,895.19	100.00%	0%

* Funded component of the service category.

ADMINISTRATION	\$2,008,219.94
CLINICAL QUALITY MANAGEMENT	\$600,000.00
TOTAL	\$24,776,115.13

	Expenditure Ratios
Core Medical Services (including carryover exp.) ³	79.97%
Support Services	20.03%

**Core/Support Services
Allocation Ratios ⁴**

#DIV/0!
#DIV/0!

¹ At the direction of the Planning Council during their June 17, 2024 meeting, the following service categories will be included in the upcoming Request for Proposal (RFP) procurement action for the FY 2026 budget period contracts: Housing, Non-Medical Case Management, and Psychosocial Support Services.

² The percentage of funding will be applied to the overall amount of funding to be made available during the upcoming RFP procurement process for services that will begin March 1, 2026.

³ Actual FY 2023 Core Medical Service's expenditure ratio was 82.66%, net of expenditures funded by the carryover award. Per RWP legislation, Core Medical Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Medical Services Waiver.

⁴ For budgeting purposes and to ensure that the Recipient meets the 75/25 Core Medical/Support Services ratio of actual expenditures, the Recipient recommends allocating 80% or higher to Core Medical services combined.

**MIAMI DADE COUNTY
RYAN WHITE PROGRAM (RWP)
FY 2026 MINORITY AIDS INITIATIVE (MAI) - RFP FUNDING PERCENTAGE (%) DIRECTIVE
BUDGET WORKSHEET**

SERVICE CATEGORIES (ALPHABETIC ORDER) ¹	CORE/SUPPORT SERVICE	FY 2023 EXPENDITURES	FY 2023 %	FY 2026 RFP FUNDING PERCENTAGE ² (Enter Whole % Only)
EMERGENCY FINANCIAL ASSISTANCE	SUPPORT	\$0.00	0.00%	
MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES	CORE	\$645,270.20	39.50%	
MEDICAL TRANSPORTATION	SUPPORT	\$7,616.40	0.47%	
MENTAL HEALTH SERVICES	CORE	\$3,380.00	0.21%	
OUTPATIENT/AMBULATORY HEALTH SERVICES	CORE	\$940,651.58	57.59%	
OUTREACH SERVICES	SUPPORT	\$36,498.00	2.23%	
SUBSTANCE ABUSE OUTPATIENT CARE	CORE	\$30.00	0.00%	
HOUSING	SUPPORT	Not Currently Funded	N/A	
NON-MEDICAL CASE MANAGEMENT SERVICES	SUPPORT	Not Currently Funded	N/A	
PSYCHOSOCIAL SUPPORT SERVICES	SUPPORT	Not Currently Funded	N/A	
SUBTOTAL		\$1,633,446.18	100.00%	0%

* Funded component of the service category.

ADMINISTRATION	\$226,678.65
CLINICAL QUALITY MANAGEMENT	\$100,000.00
TOTAL	\$1,960,124.83

	Expenditure Ratios
Core Medical Services (includes carryover exp.) ³	97.30%
Support Services	2.25%

Core/Support Services Allocation Ratios ⁴
#DIV/0!
#DIV/0!

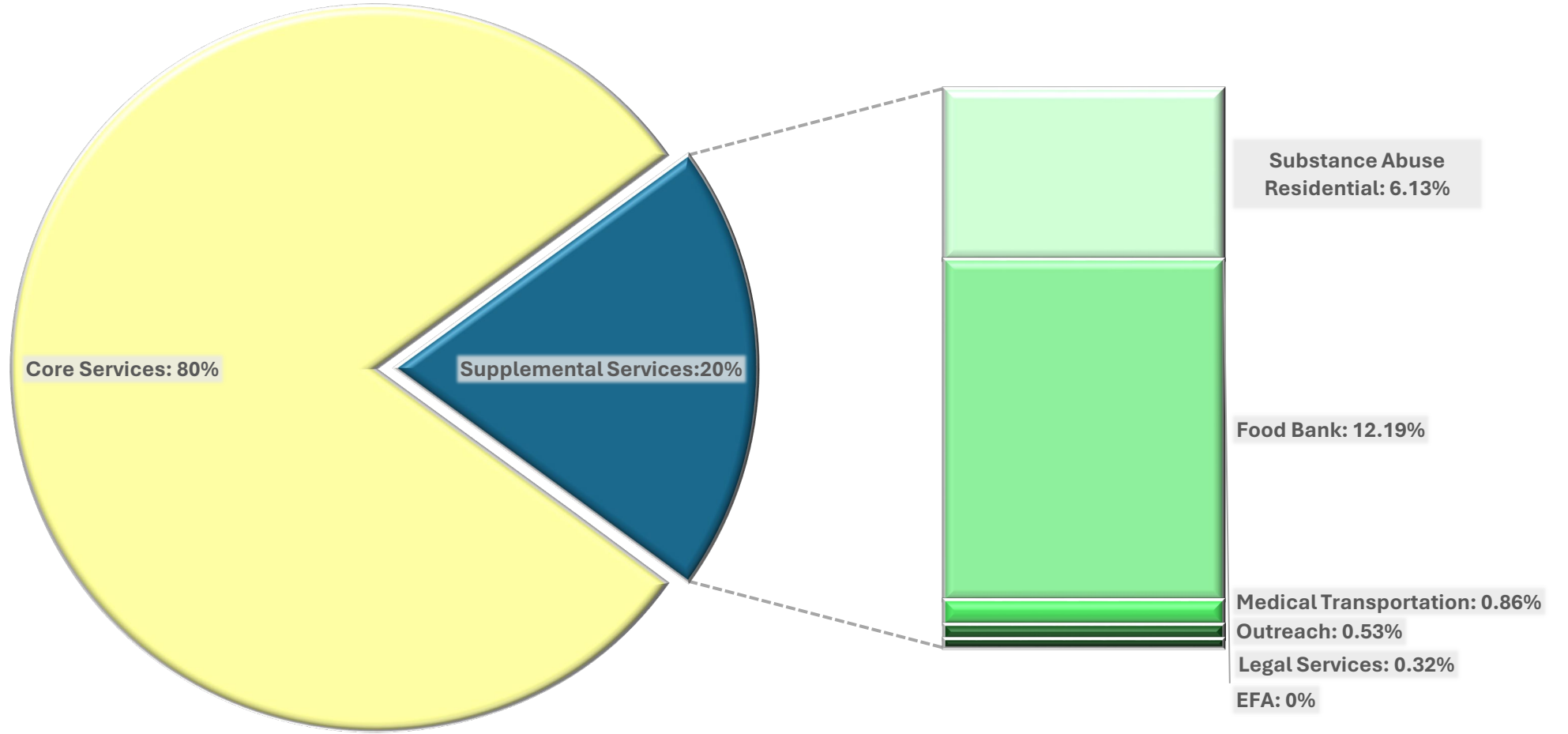
¹ At the direction of the Planning Council during their June 17, 2024 meeting, the following service categories will be included in the upcoming Request for Proposal (RFP) procurement action for the FY 2026 budget period contracts: Housing, Non-Medical Case Management, and Psychosocial Support Services.

² The percentage of funding will be applied to the overall amount of funding to be made available during the upcoming RFP procurement process for services that will begin March 1, 2026.

³ Actual FY 2023 Core Medical Service's expenditure ratio was 96.81% of expenditures, net of expenditures funded by the carryover award. Per RWP legislation, Core Medical Service expenditures must be at least 75% of the overall direct service expenditures, not including carryover expenditures, unless the EMA meets the eligibility requirements for a Core Medical Services Waiver.

⁴ For budgeting purposes and to ensure that the Recipient meets the 75/25 Core Medical/Support Services ratio of actual expenditures, the Recipient recommends allocating 80% or higher to Core Medical Services combined.

Current Funding Allocation % by Service Category



Core Services Substance Abuse Residential EFA Food Bank Medical Transportation Outreach Legal Services



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Care and Treatment Thursday, September 12, 2024

10:00 a.m. – 1:00 p.m.

Care Resource Community Health Center, Midtown Miami
3510 Biscayne Blvd, 1st Floor Community Room
Miami, FL 33137

AGENDA

- | | | |
|-------|--|--------------------|
| I. | Call to Order | Dr. Mary Jo Trepka |
| II. | Introductions | All |
| III. | Meeting Housekeeping | Marlen Meizoso |
| IV. | Floor Open to the Public | Dr. Mary Jo Trepka |
| V. | Review/Approve Agenda | All |
| VI. | Review/Approve Minutes of August 8, 2024 | All |
| VII. | Reports | |
| | • Recipients (Part A, Part B, ADAP, General Revenue) | All |
| | • Vacancies | Marlen Meizoso |
| VIII. | Standing Business | |
| | • Additional Data from Client Satisfaction | Dr. Robert Ladner |
| | • Projections and Estimates (Section 6) | Dr. Robert Ladner |
| IX. | New Business | |
| | • Special Directives | All |
| | • Priorities Setting (Section 9) | All |
| | • Resource Allocation (Section 9) | All |
| X. | Announcements and Open Discussion | All |
| | • New Member Orientation September 18, 2024 | |
| | • Get on Board October 2, 2024 | |
| XI. | Next Meeting: October 10, 2024 at Care Resource | Dr. Mary Jo Trepka |
| XII. | Adjournment | Dr. Mary Jo Trepka |



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

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