



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

September 12, 2024 Minutes

Approved November 14, 2024

#	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	
Keri Kratofil	
Carla Valle-Schwenk	
Staff	
Bontempo, Christina	Meizoso, Marlen
Ladner, Robert	

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 10:15 a.m. She reminded attendees that today they would conclude the annual needs assessment priority setting and resource allocation (PSRA) process. Because there is a very full schedule, the Chair requested members be mindful of the time.

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 and made a motion to accept it as presented.

Motion to approve the agenda as presented.

Moved: Dr. Daniel Shmuels **Seconded: German Leiva** **Motion: Passed**

VI. Review/Approve Minutes of August 8, 2024 *All*

The committee reviewed the minutes of August 8, 2024, and approved them as presented.

Motion to accept the minutes from August 8, 2024, as presented.

Moved: Dan Wall **Seconded: German Leiva** **Motion: Passed**

VII. Reports

▪ *Part A* *Dan Wall*

Dan Wall referenced the Ryan White Part A/Minority AIDS Initiative (MAI) expenditure and utilizations reports that are posted online and were projected on the meeting screen. The County is working on the Notice of Funding Opportunity (NOFO) for FY 2025 Ryan White Part A/MAI Program services which is due October 1, 2024. The Ending the HIV Epidemic (EHE) application has also been released with a due date of October 22, 2024. At today's meeting, the Committee will need to make percentage recommendations for the next RFP three-year cycle.

▪ *Part B* *Marlen Meizoso*

Mrs. Meizoso reviewed the July Ryan White Part B expenditures report (as of September 4, 2024). In July, 335 clients were served at a cost of \$70,601.47.

▪ *ADAP* *Marlen Meizoso*

Mrs. Meizoso referenced the August AIDS Drug Assistance Program (ADAP) expenditures report (as of September 3, 2024), indicating the enrollment, expenditures, program updates, and pharmacy additions.

- *Vacancies*

Marlen Meizoso

Mrs. Meizoso reviewed the Partnership Membership 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 this committee or any of the other committees, please invite interested parties to a meeting or training, or direct them to staff for further information.

There was a question about when new Partnership members select committees. Members applying to the Partnership select their committee assignments during the application process before they are approved.

VIII. Standing Business

- *Additional Data from Client Satisfaction*

Dr. Robert Lander

Dr. Robert Ladner reviewed additional data on telehealth requests from the Client Satisfaction Survey. Telehealth usage does not affect medical case management satisfaction. Results of the survey indicate that use of telehealth is not favored by Haitian clients.

- *Projections and Estimates*

Dr. Robert Lander

Dr. Ladner reviewed Ryan White Part A/MAI cost projections and estimated clients to be served for 2025. Members reviewed some utilization figures on the Dashboard Cards which were used to generate projections. The estimated client count is expected to continue to increase. It is estimated that the program will serve 9,951 clients at a cost of over \$23.3 million dollars in 2025.

The current projections have been adjusted for food bank costs since cost-saving measures have been put into place and have been effective in keeping that expenditure in check.

Additional funding will need to be placed into medical transportation services since there has been increased utilization in the last two years. Increases are partly due to increased usage of Uber and other ride-share services. Transportation vouchers should not be used as an incentive for clients. The Recipient will review usage to ensure it is appropriate and may suggest updates based on their findings. Clients who are disabled or are on Medicare should take advantage of the Golden Passport Program. It was noted that there are better outcomes by clients using Uber since they attend their appointments and stay for their appointments.

The projections indicate a reduction to oral health care but within the levels of the last four years. Any shifts in need can be addressed in the rapid reallocation process.

IX. New Business

▪ *Special Directives*

All

Dr. Trepka reviewed what special directives were and requested if the committee had any directives. The Committee was reminded that at the last needs assessment they voted on what additional services to fund for the next request for proposal (RFP) and bundled certain services. There is still one year left on current contracts for 2025-26. Emergency Financial Assistance (EFA) is currently limited to prescription drugs for Test and Treat Rapid Access. While expanding services is not possible until the new RFP, the County has confirmed with the County Attorney that EFA could be expanded through a contract amendment. The Committee made a directive for the County to explore expanding EFA, as funding allows, with the addition of food vouchers.

Motion for the Partnership to direct the County to explore options to fully implement the Partnership’s FY 2026 Emergency Financial Assistance service definition in FY 2025, subject to availability of funding, with the addition of food vouchers.

Moved: German Leiva

Seconded: Louvens Fils-Aime

Motion: Passed

The Committee discussed Oral Health Care access, which keeps appearing as an issue in the Client Satisfaction Survey results. There appear not to be enough providers. The Health Resources and Services Administration (HRSA) restricts Ryan White providers to not-for-profit organizations. It was suggested that once the RFP is released it is shared with a professional oral health care association, if one exists in Miami, so their members are aware of the opportunity for funding.

The Committee discussed significant potential systemic changes with Florida Department of Health (FDOH) and Ending the HIV Epidemic (EHE) in FY 2025 and FY 2026 and directed the County exercise the final one-year options on existing contracts. The RFP for services to begin in FY 2026 will be released in 2025.

Motion for the Partnership to direct the County to exercise the final one-year renewal options for existing subrecipient service contracts in FY 2025, in light of significant system changes.

Moved: Maria Henriquez

Seconded: Dr. Daniel Shmuels

Motion: Passed

▪ *Priority Setting*

All

The Committee reviewed the Ryan White Part A priority results in aggregate that Committee members completed. The items were projected, and the Committee deliberated on the items based on the data they had reviewed during the needs assessment. Some service category priorities were shifted to reflect funded services. After the Committee was satisfied with the ranking, they made a motion to accept the priorities as projected. The Committee repeated the exercise with the Minority AIDS Initiative services. Final rankings were read into the record as indicated, below.

Priority Setting - FY 2025 Part A	
Ranking	Services
1	AIDS Drug Assistance Program (ADAP) Treatment [C]
2	Medical Case Management, including Treatment Adherence Services [C]
3	Outpatient/Ambulatory Health Services [C]
4	Oral Health Care [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	Medical Transportation (Vouchers) [S]
11	Substance Abuse Services (Residential) [S]
12	Housing Services [S]
13	Outreach Services [S]
14	Emergency Financial Assistance [S]
15	Other Professional Services (Legal Assistance and Permanency Planning) [S]
16	Early Intervention Services [C]
17	Non-Medical Case Management [S]
18	Medical Nutrition Therapy [C]
19	Home and Community Based Health Care [C]
20	Psychosocial Support [S]
21	Health Education/Risk Reduction [S]
22	Home Health Care [C]
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

Motion to accept the FY 2025 Ryan White Part A priorities as presented.

Moved: Maria Henriquez

Seconded: German Leiva

Motion: Passed

Priority Setting - FY 2025 Ryan White Minority AIDS Initiative (MAI)	
Ranking	Services
1	Medical Case Management, including Treatment Adherence Services [C]
2	AIDS Drug Assistance Program (ADAP) Treatment [C]
3	Outpatient/Ambulatory Health Services [C]
4	Outreach Services [S]
5	Substance Abuse Outpatient Care [C]
6	Mental Health Services [C]
7	Medical Transportation (Vouchers) [S]
8	Emergency Financial Assistance [S]
9	Oral Health Care [C]
10	AIDS Pharmaceutical Assistance (Local Pharmacy Assistance Program) [C]
11	Food Bank/Home-Delivered Meals [S]
12	Health Insurance Premium and Cost-Sharing Assistance for Low-Income Individuals [C]
13	Non-Medical Case Management [S]
14	Early Intervention Services [C]
15	Housing Services [S]
16	Substance Abuse Services (Residential) [S]
17	Medical Nutrition Therapy [C]
18	Psychosocial Support [S]
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

Motion to accept the FY 2025 Ryan White Minority AIDS Initiative (MAI) priorities as presented.

Moved: Dan Wall

Seconded: Dr. Daniel Shmuels

Motion: Passed

▪ *Resource Allocation*

All

The Committee addressed the flat funding budgets for Part A and MAI, reviewing Dashboard Card data and making adjustments until the flat funding totals were reached. Using the flat funding budgets as the base for the ceiling grant budgets, the Committee reviewed data and deliberated on totals until consensus was reached for the grant ceiling budget. Final allocations were read into the record as indicated, below.

MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2025 PART A FLAT FUNDING (FORMULA & SUPPLEMENTAL FUNDING) BUDGET		
SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2025 RECOMMENDED ALLOCATION ¹	FY 2025 %
AIDS PHARMACEUTICAL ASSISTANCE [C]	\$88,255	0.41%
EMERGENCY FINANCIAL ASSISTANCE [S]	\$88,253	0.41%
FOOD BANK*/HOME DELIVERED MEALS [S]	\$529,539	2.44%
HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	\$595,700	2.74%
MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$5,869,052	27.01%
MEDICAL TRANSPORTATION [S]	\$154,449	0.71%
MENTAL HEALTH SERVICES [C]	\$132,385	0.61%
ORAL HEALTH CARE [C]	\$3,088,975	14.22%
OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	\$154,449	0.71%
OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$8,550,054	39.35%
OUTREACH SERVICES [S]	\$264,696	1.22%
SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$44,128	0.20%
SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	\$2,169,744	9.99%
AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not Part A Funded	N/A
CHILD CARE SERVICES [S]	Not Part A Funded	N/A
EARLY INTERVENTION SERVICES [C]	Not Part A Funded	N/A
HEALTH EDUCATION/RISK REDUCTION [S]	Not Part A Funded	N/A
HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not Part A Funded	N/A
HOME HEALTH CARE [C]	Not Part A Funded	N/A
HOSPICE [C]	Not Part A Funded	N/A
HOUSING [S]	Not Part A Funded	N/A
LINGUISTIC SERVICES [S]	Not Part A Funded	N/A
MEDICAL NUTRITION THERAPY [C]	Not Part A Funded	N/A
NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not Part A Funded	N/A
PSYCHOSOCIAL SUPPORT SERVICES [S]	Not Part A Funded	N/A
REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not Part A Funded	N/A
REHABILITATION SERVICES [S]	Not Part A Funded	N/A
RESPIRE CARE [S]	Not Part A Funded	N/A
SUBTOTAL	\$21,729,679	100.0%
* Funded component of the service category.		
[C]= Core Medical Service; [S] = Support Service		
ADMINISTRATION ²	\$2,481,075	
CLINICAL QUALITY MANAGEMENT	\$600,000	
TOTAL	\$24,810,754	
	Exp. Ratios	
Core Medical Services (includes carryover exp.) ⁴	84.53%	
Support Services	15.47%	
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 MAL. 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.		

Motion to accept the FY 2025 Ryan White Part A Flat funding budget as presented.

Moved: Maria Henriquez

Seconded: Dr. Daniel Shmuels

Motion: Passed

MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2025 MINORITY AIDS INITIATIVE (MAI) FLAT FUNDING BUDGET			
FY 2025 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2025 RECOMMENDED ALLOCATION ¹	FY 2025 %
8	EMERGENCY FINANCIAL ASSISTANCE [S]	\$12,087	0.54%
1	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$791,213	35.31%
7	MEDICAL TRANSPORTATION [S]	\$7,628	0.34%
6	MENTAL HEALTH SERVICES [C]	\$18,960	0.85%
3	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$1,362,753	60.82%
4	OUTREACH SERVICES [S]	\$39,816	1.78%
5	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$8,058	0.36%
2	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded	N/A
10	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded	N/A
25	CHILD CARE SERVICES [S]	Not MAI Funded	N/A
14	EARLY INTERVENTION SERVICES [C]	Not MAI Funded	N/A
11	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded	N/A
20	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded	N/A
12	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded	N/A
19	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded	N/A
21	HOME HEALTH CARE [C]	Not MAI Funded	N/A
22	HOSPICE [C]	Not MAI Funded	N/A
15	HOUSING [S]	Not MAI Funded	N/A
27	LINGUISTIC SERVICES [S]	Not MAI Funded	N/A
17	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded	N/A
13	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded	N/A
9	ORAL HEALTH CARE [C]	Not MAI Funded	N/A
26	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded	N/A
18	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded	N/A
23	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not MAI Funded	N/A
24	REHABILITATION SERVICES [S]	Not MAI Funded	N/A
28	RESPIRE CARE [S]	Not MAI Funded	N/A
16	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded	N/A
SUBTOTAL		\$2,240,515	100.00%
[C]= Core Medical Service; [S] = Support Service			
ADMINISTRATION		\$260,057	
CLINICAL QUALITY MANAGEMENT		\$100,000	
TOTAL		\$2,600,572	
		Exp. Ratios	
Core Medical Services (includes carryover exp.)³		97.34%	
Support Services		2.66%	
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.			

Motion to accept the FY 2025 Ryan White Minority AIDS Initiative Flat funding budget as presented.

Moved: Maria Henriquez

Seconded: German Leiva

Motion: Passed

MIAMI DADE COUNTY RYAN WHITE PROGRAM (RWP) FY 2025 MINORITY AIDS INITIATIVE (MAI) FUNDING CEILING BUDGET			
FY 2025 RANKING	SERVICE CATEGORIES (ALPHABETIC ORDER)	FY 2025 RECOMMENDED ALLOCATION ¹	FY 2025 %
8	EMERGENCY FINANCIAL ASSISTANCE [S]	\$12,087	0.51%
1	MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES [C]	\$903,920	38.34%
7	MEDICAL TRANSPORTATION [S]	\$7,628	0.32%
6	MENTAL HEALTH SERVICES [C]	\$18,960	0.80%
3	OUTPATIENT/AMBULATORY HEALTH SERVICES [C]	\$1,362,753	57.80%
4	OUTREACH SERVICES [S]	\$44,134	1.87%
5	SUBSTANCE ABUSE OUTPATIENT CARE [C]	\$8,058	0.34%
2	AIDS DRUG ASSISTANCE PROGRAM (ADAP) TREATMENTS [C]	Not MAI Funded	N/A
10	AIDS PHARMACEUTICAL ASSISTANCE [C]	Not MAI Funded	N/A
25	CHILD CARE SERVICES [S]	Not MAI Funded	N/A
14	EARLY INTERVENTION SERVICES [C]	Not MAI Funded	N/A
11	FOOD BANK/HOME DELIVERED MEALS [S]	Not MAI Funded	N/A
20	HEALTH EDUCATION/RISK REDUCTION [S]	Not MAI Funded	N/A
12	HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS [C]	Not MAI Funded	N/A
19	HOME AND COMMUNITY-BASED HEALTH SERVICES [C]	Not MAI Funded	N/A
21	HOME HEALTH CARE [C]	Not MAI Funded	N/A
22	HOSPICE [C]	Not MAI Funded	N/A
15	HOUSING [S]	Not MAI Funded	N/A
27	LINGUISTIC SERVICES [S]	Not MAI Funded	N/A
17	MEDICAL NUTRITION THERAPY [C]	Not MAI Funded	N/A
13	NON-MEDICAL CASE MANAGEMENT SERVICES [S]	Not MAI Funded	N/A
9	ORAL HEALTH CARE [C]	Not MAI Funded	N/A
26	OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING) [S]	Not MAI Funded	N/A
18	PSYCHOSOCIAL SUPPORT SERVICES [S]	Not MAI Funded	N/A
23	REFERRAL FOR HEALTH CARE AND SUPPORTIVE SERVICES [S]	Not MAI Funded	N/A
24	REHABILITATION SERVICES [S]	Not MAI Funded	N/A
28	RESPIRE CARE [S]	Not MAI Funded	N/A
16	SUBSTANCE ABUSE SERVICES (RESIDENTIAL) [S]	Not MAI Funded	N/A
SUBTOTAL		\$2,357,540	100.00%
[C]= Core Medical Service; [S] = Support Service			
		ADMINISTRATION	\$273,060
		CLINICAL QUALITY MANAGEMENT	\$100,000
		TOTAL ²	\$2,730,600
		Exp. Ratios	
		Core Medical Services (includes carryover exp.) ³	97.29%
		Support Services	2.71%
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.			

Motion to accept the FY 2025 Ryan White Minority AIDS Initiative Ceiling grant funding budget as presented.

Moved: Dan Wall

Seconded: Maria Henriquez

Motion: Passed

Service Categories – FY 2026 Request for Proposal (RFP) Ryan White Minority AIDS Initiative (MAI)	
SERVICE CATEGORIES (ALPHABETIC ORDER)	CORE/SUPPORT SERVICE
AIDS Pharmaceutical Assistance	Core
Emergency Financial Assistance	Support
Medical Case Management, Inc. Treatment Adherence Services	Core
Medical Transportation	Support
Mental Health Services	Core
Outpatient/Ambulatory Health Services	Core
Outreach Services	Support

Motion to accept the Minority AIDS Initiative service categories listed for the Request for Proposal.

Moved: Maria Henriquez

Seconded: Dr. Daniel Shmuels

Motion: Passed

Time was going to run out of the meeting and all the business items had not been completed so the Committee made a motion to extend the meeting by 15 minutes to finish Committee business.

Motion to extend the meeting by 15 minutes.

Moved: Maria Henriquez

Seconded: Dan Wall

Motion: Passed

Based on prior expenditures and estimated needs, the Committee determined the *percentage allocations* for the FY 2026 Request for Proposal for both Part A and MAI. While whole percents were preferred, in some cases, half a percent was acceptable. The percentages were read into the record as indicated, below.

**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 2026 RFP FUNDING PERCENTAGE ²
AIDS PHARMACEUTICAL ASSISTANCE	CORE	0.50%
EMERGENCY FINANCIAL ASSISTANCE	SUPPORT	1%
FOOD BANK*/HOME DELIVERED MEALS	SUPPORT	7%
HEALTH INSURANCE PREMIUM AND COST SHARING FOR LOW-INCOME INDIVIDUALS	CORE	1%
MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES	CORE	26%
MEDICAL TRANSPORTATION	SUPPORT	1%
MENTAL HEALTH SERVICES	CORE	1%
ORAL HEALTH CARE	CORE	16%
OTHER PROFESSIONAL SERVICES (LEGAL SERVICES AND PERMANENCY PLANNING)	SUPPORT	1%
OUTPATIENT/AMBULATORY HEALTH SERVICES	CORE	35%
OUTREACH SERVICES	SUPPORT	1%
SUBSTANCE ABUSE OUTPATIENT CARE	CORE	1%
SUBSTANCE ABUSE SERVICES (RESIDENTIAL)	SUPPORT	6%
HOUSING	SUPPORT	1%
NON-MEDICAL CASE MANAGEMENT SERVICES	SUPPORT	1%
PSYCHOSOCIAL SUPPORT SERVICES	SUPPORT	0.50%
SUBTOTAL		100%

* Funded component of the service category.

ADMINISTRATION		
CLINICAL QUALITY MANAGEMENT		
TOTAL		
		Core/Support Services Allocation Ratios ⁴
Core Medical Services (including carryover exp.) ³		80.50%
Support Services		19.50%

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,

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

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.

Motion to accept the Ryan White Part A services categories *percentage allocations* for the FY 2026 Request for Proposal (RFP).

Moved: Dan Wall

Seconded: German Leiva

Motion: Passed

**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 2026 RFP FUNDING PERCENTAGE ²
EMERGENCY FINANCIAL ASSISTANCE	SUPPORT	0.5%
AIDS PHARMACUETICALS	CORE	0.5%
MEDICAL CASE MANAGEMENT, INC. TREATMENT ADHERENCE SERVICES	CORE	38%
MEDICAL TRANSPORTATION	SUPPORT	1%
MENTAL HEALTH SERVICES	CORE	1%
OUTPATIENT/AMBULATORY HEALTH SERVICES	CORE	57%
OUTREACH SERVICES	SUPPORT	2%
SUBTOTAL		100%
* Funded component of the service category.		
ADMINISTRATION		
CLINICAL QUALITY MANAGEMENT		
TOTAL		
		<u>Core/Support Services</u>
		<u>Allocation Ratios</u> ⁴
Core Medical Services (includes carryover exp.) ³		96.00%
Support Services		3.50%
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 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 service 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 <u>80% or higher</u> to Core Medical Services combined.		

Motion to accept the Minority AIDS Initiative service categories *percentage allocations* for the FY 2026 Request for Proposal (RFP).

Moved: Dan Wall

Seconded: Louvens Fil-Aime

Motion: Passed

X. Announcements and Open Discussion

All

Mrs. Meizoso announced the New Member Orientation on September 18, 2024, and the next Get on Board training on October 2, 2024.

No open discussion items were raised.

XI. Next Meeting

Dr. Mary Jo Trepka

The next meeting is scheduled for Thursday, October 10, 2024, at Care Resource from 10:00 a.m. to 12:00 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 1:14 p.m.