



BROWARD COUNTY HIV HEALTH SERVICES PLANNING COUNCIL

MEETING AGENDA

Thursday, March 28, 2013 at 9:00 a.m.

Samantha Kuryla, Chair

Brad Gammell, Vice Chair

Reminder: Meeting Attendance Confirmation Required at least 48 Hours Prior to Meeting Date

1. CALL TO ORDER

2. MOMENT OF SILENCE

3. WELCOME AND PUBLIC RECORD REQUIREMENTS

- a. Review Meeting Ground Rules, Public Comment and Public Record Requirements
- b. Council Member and Guest Introductions
- c. Excused Absences and Appointment of Alternates
- d. Approval of 3/28/13 Meeting Agenda
- e. Approval of 2/28/13 Meeting Minutes

4. PUBLIC COMMENT (Up to 10 minutes)

5. FEDERAL LEGISLATIVE REPORT (Kareem Murphy) (HANDOUT A)

6. CONSENT ITEMS

Consent #1	To Appoint HOPWA Administrator Mario DeSantis to be a member of the Joint Priorities Committee
Proposed by:	Joint Priorities Committee

Consent # 2	To Appoint Robert Ettinger to be a member of the Quality Management Committee
Proposed by:	Quality Management Committee

Consent # 3	To Appoint Bonnie Majcher to be a member of the Quality Management Committee
Proposed by:	Quality Management Committee

7. DISCUSSION ITEMS

None

8. MARCH COMMITTEE REPORTS

a. **MEMBERSHIP/COUNCIL DEVELOPMENT COMMITTEE (MCDC)**

March 7, 2013

Chair: K. Creary, Vice Chair: T. Wilson

The Committee met without quorum for informational purposes. The group reviewed four active applications, discussed seats they could fill and reviewed the impact on Council demographics if they were appointed. Those in attendance reached consensus that new applicants for mandated

seats need to fulfill the three-meeting requirement, but hoped the ad Hoc Committee on By-Laws would review the issue as well. Also, the group approved by consensus the 2013 Work Plans. The group also began comparing each Council member's background and qualifications with the seat each holds. This will continue in subsequent meetings. Members also reached consensus to meet monthly, at least for April and May. *Next Meeting*: April 4, 2013. *Agenda Items for Next Meeting*: Review vacancies, applicants and demographics; review Council members to see if they match the seat they hold.

b. **JOINT CLIENT COMMUNITY RELATIONS COMMITTEE (JCCR)**

March 5, 2013 Part A Co-Chair: H.B. Katz, Part B Co-Chair: L. Washington

The Committee did not hold a business meeting but instead hosted its first community event for the year at Osswald Park on March 5, 2013 at 6:00 p.m. A free dinner was provided for guests while they were educated on the following topics: Centralized Intake and Eligibility Determination for the Ryan White Part A Program, Ryan White Part B, and Medicaid's Project AIDS Care (PAC) Waiver Program. The guest speakers were Natasha Markman, Ann Mercer, and Theresa Yoder-Trau, respectively. Materials and eligibility guidelines were provided and participants were encouraged to ask questions for further clarification. *Agenda Items for the Next Meeting*: Hot Topic Presentation; Second Community Event Preparation. *Next Meeting Date*: April 2, 2013.

c. **JOINT PLANNING COMMITTEE**

March 11, 2013 Part A Co-Chair: Carl Roberson, Part B Co-Chair: Kim Saiswick

The members reviewed and discussed the new time of the Joint Planning Committee meeting, which will be held every second Monday at 2:00 p.m. until further notice. The Committee also reviewed the requested preliminary results of the 2012-2013 Client Survey by the following subpopulations: Women, Age group 13-49, Homeless, Transgender and MSM. Additionally, members agreed that the focus groups for the 2012-2013 Needs Assessment should target heterosexual Black Women, heterosexual Black Men, and young adults ages 18-28 who are HIV positive. A focus group targeting Hispanics has already taken place. *Agenda items for the next meeting*: Client Survey Summary; Grant Application data; PSRA data list; Epidemiologic Profile by demographics and exposure. *Next Meeting Date*: Monday, April 8, 2013.

d. **LOCAL PHARMACY ADVISORY COMMITTEE (LPAC)**

No meetings

Chair: S. Abel

Next Meeting Date: To be determined

e. **QUALITY MANAGEMENT COMMITTEE (QMC)**

March 18, 2013

Chair: C. Grant

The Committee met without quorum. The Committee heard an update on the Oral Health Care outcome and indicator revisions which are pending consultation with the FC/AIDS Education and Training Center (AETC). The Committee reviewed the quarterly QI Network Update detailing the activities of all Networks during December 12-February 13 as well as an annual review of accomplishments and challenges. The Committee heard an annual summary of the National Quality Center's (NQC) In+Care Campaign retention rates. The Broward County EMA showed an improvement in all measures: Gap Measure (30%-20%), Medical Visit Frequency (49%-52%), Patients Newly Enrolled (35%-53%) and Viral Load Suppression (66% to 70%). The EMA will continue to report to NQC through Fiscal Year 13-14 as the campaign has been extended. The Networks' revised and approved Service Delivery Models (SDM) were presented for Committee approval; the Committee tabled approval of the SDM's for the April meeting due to lack of quorum. Approval of the revised annual work plan was also tabled for April. Committee members will review the SDMs and work plan in preparation for the April meeting. *Agenda Items for Next Meeting*: Standing Agenda Items, Review and Approval of October 15, 2012, January 7, 2013 and March 18, 2013 Minutes and January 7, 2013, March 18, 2013 and April 15, 2013 Agendas, Review of Annual QM Committee Work Plan, Review of SDM Revisions, Review Policies and Procedures, and the 3-Year QM Work Plan. *Next Meeting Date*: April 15, 2013.

f. **JOINT PRIORITIES COMMITTEE**

March 20, 2013 *Part A Co-Chair: C. Taylor-Bennett, Part B Co-Chair: Lisa Agate*

The Committee discussed the progress of the PCIP Subcommittee and refocused its mission in light of the Affordable Care Act starting in January and Florida Medicaid expansion. The subcommittee was asked to: a) evaluate data on clients by federal poverty level and to assess the impact of the changes; b) identify gaps in Part A services that will be faced by clients as a result of the changes, to assess what gaps Part A might help fund, and c) establish a baseline number of clients that will be affected by the changes. The subcommittee will report findings in June before service category rankings are done, but may meet longer than that. Also, the committee approved a timeline and a list of data sets that will be needed for the Priority Setting process. Also, the Committee recommended that HOPWA administrator Mario DeSantis be added as a Committee member. *Agenda Items for Next Meeting:* Standing Agenda Items, review preliminary findings of Client Survey, presentation of data from the 2013-14 Grant Application. *Next Meeting Date:* April 17, 2013.

AD HOC PCIP (Pre-Existing Condition Insurance Plan) SUBCOMMITTEE

No meetings

Chair: Y. Reed

Next Meeting Date: TBD.

g. **JOINT EXECUTIVE COMMITTEE**

March 21, 2013

Part A Chair: S. Kuryla, Part B Chair: J. Wynn

The Joint Executive Committee amended and approved new formats for the agendas and meeting summaries used by all Committees. The Grantee and staff drafted the revised versions to focus the meetings more heavily on accomplishing items on the Work Plans. Committees will start using the new formats in April, and Executive will review how they are working after a few months. Also, the committee discussed whether to hold a community meeting to explain the Council's Priority Setting and Resource Allocation process for FY14-15. However, it was concluded that it was best to hold off on this decision in order to consider a more comprehensive approach. The committee also heard from a doctoral candidate about his dissertation, which will delve into how Broward's network of Ryan White providers and public agencies share information about service delivery and policy matters. *Agenda Items for Next Meeting:* Update on ADAP budget, update on Legislature actions pertaining to HIV, update on the Patient Care Planning Group, update on Part B work plan, update on PSRA information. *Next Meeting Date:* May 16, 2013.

h. **PART A EXECUTIVE COMMITTEE**

March 21, 2013

Chair: S. Kuryla, Vice Chair: B. Gammell

The Committee approved a short survey to be sent to Council members asking for feedback on the HIVPC retreat on Feb. 28. The Committee also discussed ways to "go green" by using iPads in place of printed materials at Council and Committees, but not to replace paper completely. Members will still be able to get printed materials at meetings and by mail. Grantee and staff will refine a method to carry this out, and Members will be asked for their preferences. Also, to help Members plan better, a calendar of 2013 Council and Committee meeting dates was reviewed in order to allow sending Outlook calendar appointments for the rest of the year. The November and December HIVPC meetings were combined and scheduled for Dec. 12. *Agenda Items for Next Meeting:* Review proposed By-Laws changes; Review procedures for appointing Committee members. *Next Meeting Date:* April 18, 2013.

i. **AD HOC BY-LAWS COMMITTEE**

March 21, 2013

Chair: W. Spencer

The committee reached consensus recommendations on unresolved items on its list of proposed By-Laws changes and issues, and voted to send them to the Planning Council for action at the April meeting if possible. The entire list may be sent to Council members at least 10 days in advance, once it is reviewed by the Council leadership. Of 35 changes proposed for consideration, the Committee has resolved 32 of them. Eight items were recommended for minor wording corrections or changes. No action was deemed necessary on 13 items. Three remaining unresolved items will be discussed at the next meeting. *Agenda Items for Next Meeting: Review and Recommend By-Laws changes. Next Meeting Date: April 18, 2013.*

9. GRANTEE REPORTS (up to 10 minutes)

- a) Part A
- b) Part B (HANDOUT)

10. OTHER REPORTS (up to 10 minutes)

- a) Part C
- b) Part D
- c) HOPWA
- d) Prevention (HANDOUT)

11. UNFINISHED BUSINESS

12. NEW BUSINESS

- a) Healthcare Reform Update (if any)

13. ANNOUNCEMENTS

14. PUBLIC COMMENT (Up to 10 minutes)

15. REQUEST FOR DATA

16. AGENDA ITEMS FOR NEXT MEETING: April 25, 2013 at 9:00 a.m. **VENUE:** BRHPC

17. ADJOURNMENT

3. WELCOME AND INTRODUCTIONS

The Vice Chair welcomed everyone and self-introductions were made. Attendees were notified of information regarding the Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. In addition, it was stated that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed. The Vice Chair reviewed excused absences.

Approval of 2/28/13 Agenda

Motion #1:	To approve the 2/28/13 Agenda
Proposed by:	Karen Creary
Seconded by:	Claudette Grant
Action:	Passed Unanimously

Approval of the 1/24/13 Meeting Minutes

Motion #2:	To approve the 1/24/13 Meeting Minutes
Proposed by:	H. Bradley Katz
Seconded by:	Karen Creary
Action:	Passed Unanimously

4. PUBLIC COMMENT

There was no public comment.

5. FEDERAL LEGISLATIVE REPORT – Kareem Murphy

A written handout of the February 2013 Federal Legislative Report was provided.

6. CONSENT ITEMS

There were no consent items.

7. DISCUSSION ITEMS

There were no discussion items.

8. FEBRUARY COMMITTEE REPORTS

a. **JOINT CLIENT COMMUNITY RELATIONS COMMITTEE (JCCR)**

February 5, 2013

Part A Co-Chair: H.B. Katz, Part B Co-Chair: L. Washington

A guest physician presented the Committee's "Hot Topic," which was an in-depth update on the latest in HIV medication issues and the measurement of viral load. He noted that persons with undetectable viral load are very unlikely to spread the virus, which makes finding and treating all HIV-positive people a prevention strategy. Also, the Committee finalized plans for its first Community Educational Event, at Osswald Park on March 5. Topic: Eligibility for Ryan White Part A, Part B and Medicaid PAC Waiver. The Committee also gave consensus approval of its 2013-14 Work Plan. *Agenda Items for the Next Meeting:* Educational Event at Osswald Park. *Next Meeting Date:* March 5, 2013.

b. **JOINT PLANNING COMMITTEE**

February 11, 2013

Part A Co-Chair: Carl Roberson, Part B Co-Chair: Kim Saiswick

The Committee reviewed and discussed the draft 2013 work plan, which was coordinated along with the other committees to advance the goals of the National HIV/AIDS Strategy. The Committee made several changes and gave consensus approval. Also, staff provided an update on the 2012 HIV Client Needs Assessment Survey and a demographic report comparing survey participants to the epidemic in Broward County as well as clients utilizing Ryan White Part A services. The Committee asked staff to run survey results from the following subpopulations: Women, Age group 13-45, Homeless, Transgender and MSM. Also, a calendar survey will be sent to Committee members asking if they are willing to change the regularly scheduled Committee meeting time to accommodate member schedules. Results will be reported and discussed at the next meeting. *Agenda items for the next meeting:* Meeting Time; discussion of focus groups for 2013-14 Needs Assessment; update on Client Survey; quarterly epidemiology and viral load reports. *Next Meeting Date:* Monday, March 11, 2013.

c. **AD HOC PCIP (Pre-Existing Condition Insurance Plan) SUBCOMMITTEE**

February 20, 2013

Acting Chair: B. Gammell

Meeting canceled.

d. **PART A EXECUTIVE COMMITTEE**

February 21, 2013

Chair: S. Kuryla, Vice Chair: B. Gammell

The Committee reviewed 2013 Work Plans for the Executive Committee and the HIV Planning Council, and approved them by consensus after making revisions. The Chair and Vice Chair noted that the Work Plans of Executive and all Committees are designed to tie together to advance the goals of the National HIV/AIDS Strategy. Also, the Committee reviewed and finalized plans for the HIVPC retreat on Feb. 28 at ArtServe, including presentations. A time slot was created so the Part B Chair and board of South Florida AIDS Network can explain Part B services and plans for 2013.

Agenda Items for Next Meeting: Review retreat evaluations; Request data from grantees and other funders. *Next Meeting:* March 21, 2013.

9. GRANTEE REPORTS

Part A

The Grantee received official notification from HRSA of a partial grant award for FY13-14. The partial grant is 50% formula and 45% MAI. This funding is expected to last until July. It was announced that the Planning Council members directed excess dollars to go to ADAP, but administrative difficulties had arisen. There were bulk purchases for pharmacy and emergency provisions. Dollars also went for the food bank and for food vouchers.

Part B

The written Part B Grantee report was provided detailing expenditures up to December 31, 2012.

Non-Medical Case Management conducted 673 eligibility interviews in December. Medication co-payment served 252 clients of which 7 were new to the program. There were 242 clients served in December for Medication Co-Payment and 10 clients served for Mail Orders. Cost avoidance for Medication Co-Payment program for December is \$22,734.71. Total cost savings April – December 2012 is approximately \$105,042. Home Delivered Meals served zero (0) clients. Medical Transportation for December 2012: A total of 320 clients received passes and 398 passes were distributed. The AIDS Insurance Continuation Program (AICP) was discussed. Part B is considering a contract from 4/13-9/13 with the option to renew in order to maximize funding.

ADAP Update

The ADAP report through January 29, 2013 was provided: The total ADAP “open” enrollment was 3,055 with 1,830 total ADAP clients being served in the last 30 days. The ADAP Waitlist enrolled 32 clients and the total ADAP/Medicare Part D Enrollment was 176. There were 867 appointments of which 374 (43%) were missed. Clients Served is defined as having at least one “pickup” in the period.

The category definitions are as follows:

Category A Clients Served = 3 (CD4 < 200 cells/mm³ and/or CD4% < 14%: A diagnosis of AIDS and/or diagnosis of active opportunistic infection and/or diagnosis of HIV-associated nephropathy.)

Category B Clients Served = 7 (CD4 cell count between 201-350 cells/mm³: Persons currently on ARV therapy, persons previously on ARV therapy but therapy was interrupted and treatment naïve clients)

Category C Clients Served = 22 (Treatment naïve clients with CD4 cell count > 350 cells/mm³)

Category D Clients Served = 0 (Unknown/Other)

Clients are removed from the Wait List by medical category in the order of earliest enrollment. This serves as a reminder that clients MUST recertify every 6 months or they will lose their position on the Wait List.

10. OTHER REPORTS

Part C

BROWARD HEALTH PART C REPORT

Dec-12

RW Part C Demographic Data Report		
	2011	2012
# or New Patients	394	172
# of Patients with AIDS	597	518
# of Patients HIV/non AIDS	1329	1153
Total # of Patients	1926	1671
Total Patients by Race		
Black/African American	1351	1172
American Indian/Alaska Native	2	0
Caucasian	341	283
MTOR	3	15
Asian	10	8
Not reported	25	25
	1732	1503
Ethnicity		
Hispanic/Latino	194	168
Total Clients by Age		
Total Infants/Child (0-12)	1	1
Total Youth (13-24)	71	68
Total adults (25-44)	636	511
Total adults (45-64)	1167	1055
Total adults (65 year or older)	51	36
	1926	1671
Total Clients by Gender		
Males	1178	979
Females	746	690
Transgender	2	2
	1926	1671
Total Clients by Exposure		
MSM	405	334
IDU	51	35
MSM and IDU	3	2
hemophilia/Coagulation Disorder	2	2
Heterosexual Contact	1375	1227
Receipt of transfusion	3	4
Other with/at risk HIV (prenatal)	25	33
Other	4	4
Unknown/Unreported	58	30
	1926	1671

Service Category (BH)	2011	2012
HIV test performed by Part C	4646	4129
New positives test by Part C	22	32
Treatment adherence clients	1049	1121
Total # Case Management	808	693
Total of Medical Clients	225	183
Services Category (DOH)	2011	2012
HIV test performed by Part C	874	1205
New positives test by Part C	19	9
# of LTBI referrals	130	46
# of DOT for TB Disease	47	50

Broward Health	
Community Health Services	
Ryan White Part C	
July 1, 2012 - December 31, 2012	
	Total Expense
<u>Salaries and Benefits</u>	
Case Managers	101,170.40
Adherence	72,606.41
Medical	86,247.73
Total Salaries and Benefits	260,024.55
<u>Other Expenses</u>	
Contract Services	68,227.00
Supplies/Copying	157.00
Travel/Travel in Area	3,382.00
Total Other Expenses	71,766.00
Total Ryan White Part C Expenses	331,790.55

The Grantee also mentioned that they submitted their annual RSR and everything is on track, including the hiring of staff. On March 18, 2013, the clinic at Broward House will open full time.

Part D

Ryan White Part D Report
Children's Diagnostic & Treatment Center (CDTC)
Comprehensive Family AIDS Program (CFAP)

For HIVPC Retreat 2/28/13

- Total Number of HIV Individuals enrolled in Program **1214**
- Total Number of HIV positives individuals enrolled in medical care at CDTC – **887**
- HIV positives individual who attended medical care as of 1/01/ 2013 thru 1/28/2013 – **307**
- New Referrals as of 1/01/ 2013 thru 1/28/2013 = total EXP **8** Aids HIV **3** **TOTAL 11**
 - Infants (HIV exposed) –**8**
 - Children (2 – 11) – **0**
 - Adolescent (12 -24) – **1**
 - Adult Women (25 +) **2**
 - Newly Identified HIV + and Pregnant – **2**
 - Total Pregnancies (previously known and new) – **37**

HOPWA

No update

11. UNFINISHED BUSINESS

None

12. NEW BUSINESS

None

13. RECESS for Retreat

14. ANNOUNCEMENTS

None

15. REQUEST FOR DATA

A member requested that the grantee’s office provide client data broken down by income up to 139 percent of the federal poverty level, in order to match the cutoff for people who will become eligible for Medicaid expansion under the Affordable Care Act.

16. AGENDA ITEMS FOR NEXT MEETING: March 28, 2013 at 9 a.m. **VENUE:** BRHPC

- Standing Agenda Items

17. ADJOURNMENT

Without objection, the meeting was adjourned at 4:00 p.m.

HIV PLANNING COUNCIL ATTENDANCE CY 2013

Meeting Dates →	24	28										
Member NAME	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Creary, Karen	√	√										
Dyer, Leroy	√	√										
Gammell, Bradford	√	√										
Grant Claudette	√	√										
Hanson Evans, Barbara	A	A										
Hayes, Marie	√	√										
Bhrangger, Ronald	√	E										
Holness, Dale V.C. (Comm)	A	A										
Katz, Bradley	√	√										
Kuryla, Samantha	√	A										
Marcoviche, William	√	E										
Moragne, Timothy	A	√										
Roberson, Carl	√	√										
Siclari, Rick	√	√										
Spencer, Will	√	√										
Taylor-Bennett, Carla	√	√										
Tomlinson, Karlene	√	√										
Wilson, Tara	√	√										
Wynn, Joey	√	√										
Proulx, D.	N	√										
Baner, S.	N	√										
Coscarelli, Monica (Alt 1)	E	E										
Parker-Maysonet, Patricia (Alt 2)	A	√										

Looking Back and Moving Forward

HIV Health Services Planning Council Retreat

February 28, 2013

A Summary of the Retreat

Welcome: Brad Gammell The Planning Council Vice Chair thanked all for coming and showed a powerful video trailer for a film tracing the history of HIV/AIDS activism. It reminds us, he said, of why the Council exists – to obtain the best services for those living with the virus.

Annual Planning Council Training

■ **Introduction: Karen Creary**

The Chair of Membership/Council Development Committee explained the federal requirement for an annual Council training session.

■ **HIV/AIDS Epidemic in Broward County: Patrick Jenkins**

The director of epidemiology and HIV surveillance at the Broward County Health Department gave a 30-minute presentation detailing local trends in the HIV/AIDS epidemic. His 2012 figures showed that infections are rising among males in all demographic groups and also in Hispanic females. But he cautioned that the figures need to be kept in context to avoid misinterpretation.

He also gave a presentation on the challenges and possibilities of calculating a “Community Viral Load” for Broward County. Estimates can be made for smaller populations with strong Viral Load reporting and data, such as Ryan White Part A clients. However, adequate data does not exist to come up with an estimate covering the entire HIV/AIDS population. He said the health department receives viral load reports about only a fraction of HIV/AIDS patients as a result of inconsistent reporting by providers, among other factors.

■ **Robert’s Rules of Order: Jeri Pryor**

The former Planning Council member, now a department director for the City of Fort Lauderdale, presented highlights of Robert’s Rules, which spell out how to conduct a meeting. She urged Council and Committee members to follow the printed guidelines available at every meeting. Anyone wanting more details can contact HIVPC support staff.

■ **How We Address HRSA Requirements With Our By-Laws: Will Spencer**

The By-Laws Committee Chair and former HIVPC Chair explained how the By-Laws keep Broward County in compliance with federal requirements for Planning Councils. The By-Laws are a living document that can be changed as needs change; the By-Laws Committee is considering a series of proposed changes now, with recommendations expected soon.

■ **Using HRSA Guidelines to Ensure A Comprehensive HIV Continuum of Care: Carl Roberson**

The Co-Chair of the Joint Planning Committee explained the major responsibilities of the Council (assess needs, make a comprehensive plan, prioritize services and allocate funds). He described how Committees are working together more closely and sharing information.

■ **A Year of Planning Council Accomplishments: Carl Roberson**

The Joint Planning Co-Chair also displayed a list of Broward’s 2012 accomplishments, such as a national data quality award and the development of coordinated work plans.

■ **A Visual Tour of Our New Work Plan: Brad Gammell**

The Council Vice Chair presented a look at the Planning Council work plans, redesigned to focus more on achieving the goals of the National HIV/AIDS Strategy. Each Committee's work plan was coordinated to mesh with the actions of other committees and the Council.

Afternoon Planning Council Training

■ **Coordination with Other EMAs**

The Council Vice Chair and the Chair of the Palm Beach County Care Council told the group that the two counties have started working together and sharing information, more so than in the past. It's one example of increased collaboration between Broward and other HIV organizations in Florida.

■ **How do we measure quality of Ryan White services? (Claudette Grant)**

The Chair of the Quality Management Committee led the group on a detailed look at many quality assurance measures the Committee uses to assess Part A services in Broward County. Many at the retreat were not familiar with all the data gathered to measure quality.

■ **JCCR: New Initiatives to Build Consumer Leadership (H. Bradley Katz)**

The Co-Chair of the Joint Client/Community Relations Committee explained how his group has charted a new approach to increase outreach in the HIV community and also develop leadership among the HIV clients who are committee members. JCCR holds monthly 'Hot Topics' to educate the members, and is planning three or four events in the community to educate people about maintaining good health and a safe lifestyle while living with the virus.

■ **Ethics Presentation (Broward County Attorney's Office)**

Two members of the Broward County Attorney's Office gave the members a refresher on the County Ethics Law as it pertains to advisory boards such as the Planning Council.

■ **Achieving the Goals of the National HIV/AIDS Strategy Together**

1. **Introduction (Brad Gammell)**

2. **South Florida AIDS Network (Joey Wynn)** The new Chair of SFAN described the services delivered by Ryan White Part B, which SFAN oversees. He described SFAN's night meetings in the community. He looks forward to strong collaboration with the Council, which will be more important as the Affordable Care Act takes effect.

3. **New HIV Prevention Plan and Planning Council Comp Plan (S. Baner/M. Rosiere)** The health department prevention specialist and the director of the Council support staff gave a detailed presentation on new cooperative efforts to prevent HIV/AIDS in Broward. Previously, the two entities worked separately. Now, the department-led Jurisdictional Prevention Plan has been meshed with the Council's three-year Comprehensive Plan in hopes of creating a stronger impact.

■ **Retreat Wrap Up (Carla Taylor-Bennett)**

The Co-Chair of the Joint Priorities Committee delivered an inspiring summary of the day's lessons. Why do we do all this? First, she said, Ryan White Part A serves 7,000 people living with the virus. Second, HIV/AIDS is more manageable but is still life and death. The new collaboration described today is encouraging in the potential for progress to help clients.

**Ryan White Part B
Expenditure Report**

Service Category	Part B 2012-2013 Allocated	Part B 2012-2013 JANUARY/ Encumbered	Part B 2012-2013 Monthly Average Left	Part B 2012-2013 YTD Spent/ Encumbered	Part B 2012-2013 % Encumbered	Part B 2012-2013 (% Left)	Part B 2012-2013 (Balance)
Home Delivered Meals	\$2,479		\$977	\$525	21.2%	78.8%	\$ 1,954
Medication Co-Pay	\$540,200	\$18,549	\$163,646	\$212,908	39.4%	60.6%	\$ 327,292
AICP Insurance Prem	\$69,800	\$18,799	\$25,501	\$18,799	0.0%	100.0%	\$ 51,001
Case Management (non-medical)	\$228,287	\$21,396	\$38,111	\$152,066	66.6%	33.4%	\$ 76,221
Medical Transportation	\$150,971	\$49,909	\$622	\$149,727	99.2%	0.8%	\$ 1,244
Administration	\$110,192	\$8,437	\$15,193	\$79,806	72.4%	27.6%	\$ 30,385
TOTALS	\$1,101,929	\$117,090	\$122,024	\$613,831	55.7%	44.3%	\$ 488,097

44.3%

Home Delivered Meals Served 0 client

Medication Co Payment served 250 clients in which 15 were new to the program.
242 Clients served in Decemberr Medication Co Payment.

8 Clients served in December Mail Order

Cost Avoidance for Medication Co-Payment Program for January \$45,122.86

ki

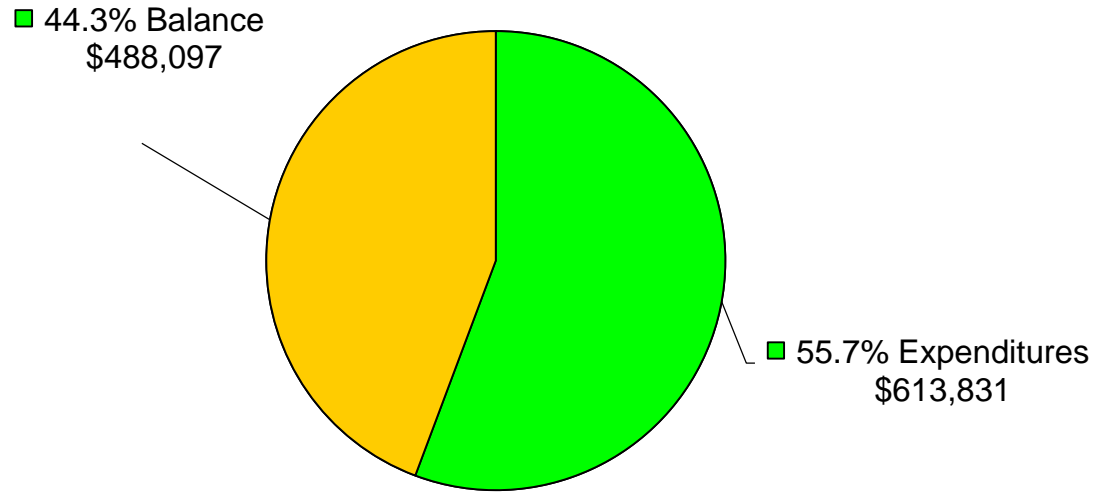
Non-Medical Case Management conducted 835 eligibility interviews in January

Medical Transportation 128 (10 ride) and 175 (31 day) passes distributed in January.
(Approximately 400 Part A passes left)

This report reflects all invoices received and paid as of 1/31/2013

**Ryan White Part B
Expenditure Report**

**Ryan White Part B Expenditures
April 2012 -January 2013**



Report for Fiscal Year April 2012 thru March 2013

PREVENTION AND TESTING REPORT - Broward December 2012

Sex	N	P	Total	P%
Female	2056	6	2062	0.29
Male	2496	23	2520	0.91
Transgender	2	0	2	0.00
Missing Data	46	0	46	0.00
Grand Total	4600	29	4630	0.63

Race	N	P	Total	P%
Asian	29	0	29	0.00
Black	2484	17	2501	0.68
Hispanic	803	5	808	0.62
Amer Indian/Alaskan	8	0	8	0.00
Native Hawaiian/ Pac Isle	26	0	26	0.00
White	1131	7	1139	0.61
Mixed	44	0	44	0.00
Refused	3	0	3	0.00
Missing Data	72	0	72	0.00
Grand Total	4600	29	4630	0.63

Site Type	N	P	Total	P%
01-Anonymous	0	0	0	0.00
02-STD	390	6	396	1.52
03-Drug Treatment	45	0	45	0.00
04-Family Planning	153	0	153	0.00
05-Prenatal/OB	0	0	0	0.00
06-TB	7	1	8	12.50
07-Adult Health	41	0	41	0.00
08-Prison/Jails	521	1	522	0.19
09-College	0	0	0	0.00
10-Private/MD	1108	3	1111	0.27
11-Special Projects	18	1	19	5.26
12-CBO	2299	17	2317	0.73
13-CHD FieldVisit	18	0	18	0.00
Other-Missing	0	0	0	0.00
Grand Total	4600	29	4630	0.63

Risk	N	P	Total	P%
MSM/IDU	33	1	34	2.94
MSM	678	12	690	1.74
IDU	235	1	237	0.42
Sex with HIV	56	2	58	3.45
Sex with MSM	30	0	30	0.00
Sex with IDU	57	0	57	0.00
Sex with Other	114	1	115	0.87
Perinatal	1	0	1	0.00
STD Diagnosis	554	4	558	0.72
Sex for Drugs/Money	26	0	26	0.00
Sexual Assault	57	0	57	0.00
Heterosexual	2514	7	2521	0.28
Other Risk	84	0	84	0.00
No Identifiable Risk	33	0	33	0.00
Refused	6	0	6	0.00
Missing Data	122	1	123	0.81
Grand Total	4600	29	4630	0.63

Age Group	N	P	Total	P%
<2	14	0	14	0.00
2-4	0	0	0	0.00
5-12	0	0	0	0.00
13-19	450	1	451	0.22
20-29	1898	7	1905	0.37
30-39	975	12	987	1.22
40-49	673	4	678	0.59
50+	572	5	577	0.87
Missing Data	18	0	18	0.00
Grand Total	4600	29	4630	0.63

**Indeterminate results are not shown, but are included in total tested