



Fort Lauderdale/Broward County EMA

Broward County HIV Health Services Planning Council

An advisory board of the Broward County Board of County Commissioners

200 Oakwood Lane, Suite 100 • Hollywood, Florida 33020 954-561-9681 • FAX 954-561-9685

Community Empowerment Committee Meeting

AGENDA

Date: May 4, 2021 at 3:00 p.m.

Facilitator: Planning Council Support Staff

Location: [WebEx Virtual Meeting Platform](#)

hivpc@brhpc.org

Chair: Von Biggs **Vice Chair:** Andrew Ruffner

(954) 561-9681 ext. 1250

1. **Call to Order**
2. **Welcome & Public Record Requirements**
 - a. Welcome
 - b. Review Meeting Ground Rules, Public Comment and Public Record Requirements (Statement of Sunshine)
 - c. Committee Member, Guest, and Phone Introductions
 - d. Moment of Silence
3. **Approvals**
 - a. Meeting Agenda 05/04/2021
 - b. Last Meeting Minutes 04/06/2021
4. **Public Comment (10 minutes)**
5. **Standard Committee Items**

None.
6. **Unfinished Business**

None.
7. **Meeting Activities/New Business**
 - I. **AIDS Pharmaceutical Assistance (Local), Emergency Financial Assistance & AIDS Drug Assistance Program Discussion**

[ACTION ITEM: Discuss the AIDS Pharmaceutical Assistance \(Local\), Emergency Financial Assistance & AIDS Drug Assistance Program services.](#)
 - II. **PSRA Rankings Presentation (Handout A)**

Work Plan Activity 1.2: Priority rank Part A and MAI Service Categories and send recommendations to PSRA

[ACTION ITEM: Receive presentation on the rankings process.](#)

III. FY2022-2023 CEC Rankings (Handout B)

Work Plan Activity 1.2: Priority rank Part A and MAI Service Categories and send recommendations to PSRA

ACTION ITEM: Priority rank Part A & MAI service categories; send recommendations to PSRA.

8. **Recipient's Report**
9. **Public Comment (10 minutes)**
10. **Agenda Items/Tasks for Next Meeting**
 - a. Next Meeting Date: June 1, 2021 at 3:00 p.m. via WebEx Videoconference
 - b. Next Meeting Agenda Items
11. **Announcements**
12. **Adjournment**

**FOR A DETAILED DISCUSSION ON ANY OF THE ABOVE ITEMS,
PLEASE REFER TO THE MEETING MINUTES.**

**Meeting Packets are available at: [The HIV Planning Council Website](http://www.brhpc.org/programs/hiv-planning-council/)
(<http://www.brhpc.org/programs/hiv-planning-council/>)**

Please complete your meeting evaluations [here](#)

Three Guiding Principles of the Broward County HIV Health Services Planning Council

• Linkage to Care • Retention in Care • Viral Load Suppression •



Vision: To ensure the delivery of high quality, comprehensive HIV/AIDS services to low income and uninsured Broward County residents living with HIV, by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care.

Mission: We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high quality, comprehensive care that positively impacts the health of individuals at all stages of illness. In so doing, we: (1) Foster the substantive involvement of the HIV affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.

Broward County Board of County Commissioners

Mark D. Bogen • Beam Furr • Steve Geller • Dale V.C. Holness • Chip LaMarca • Nan H. Rich • Tim Ryan • Barbara Sharief • Michael Udine
Broward.org

Acronym List

ACA: The Patient Protection and Affordable Care Act 2010
ADAP: AIDS Drugs Assistance Program
AETC: AIDS Education and Training Center
AHF: AIDS Health Care Foundation
AIDS: Acquired Immuno-Deficiency Syndrome
ART: Antiretroviral Therapy
ARV: Antiretrovirals
BARC: Broward Addiction Recovery Center
BCFHC: Broward Community and Family Health Centers
BH: Behavioral Health
BISS: Benefit Insurance Support Service
BMSM: Black Men Who Have Sex with Men
BRHPC: Broward Regional Health Planning Council, Inc.
CBO: Community-Based Organization
CDC: Centers for Disease Control and Prevention
CDTC: Children's Diagnostic and Treatment Center
CEC: Community Empowerment Committee
CIED: Client Intake and Eligibility Determination
CLD: Client Level Data
CM: Case Management
CQI: Continuous Quality Improvement
CQM: Clinical Quality Management
CTS: Counseling and Testing Site
DCM: Disease Case Management
DOH-Broward: Florida Department of Health in Broward County
eHARS: Electronic HIV/AIDS Reporting System
EIIHA: Early Intervention of Individuals Living with HIV/AIDS
EMA: Eligible Metropolitan Area
FDOH: Florida Department of Health
FPL: Federal Poverty Level

FQHC: Federally Qualified Health Center
HAB: HIV/AIDS Bureau
HHS: U.S. Department of Health and Human Services
HICP: Health Insurance Continuation Program
HIV: Human Immunodeficiency Virus
HIVPC: Broward County HIV Planning Council
HMSM: Hispanic Men who have Sex with Men
HOPWA: Housing Opportunities for People with AIDS
HRSA: Health Resources and Service Administration
HUD: U.S Department of Housing and Urban Development
IW: Integrated Workgroup
IDU: Intravenous Drug User
JLP: Jail Linkage Program
LPAP: Local AIDS Pharmaceutical Assistance Program
MAI: Minority AIDS Initiative
MCDC: Membership/Council Development Committee
MCM: Medical Case Management
MH: Mental Health
MOU: Memorandum of Understanding
MSM: Men Who Have Sex with Men
NBHD: North Broward Hospital District (Broward Health)
NGA: Notice of Grant Award
NHAS: National HIV/AIDS Strategy
NOFO: Notice of Funding Opportunity
nPEP: Non-Occupational Post Exposure Prophylaxis
NSU: Nova Southeastern University
OAHS: Outpatient Ambulatory Health Services
OHC: Oral Health Care
PE: Provide Enterprise
PLWH: People Living with HIV
PLWHA: People Living with HIV/AIDS

PrEP: Pre-Exposure Prophylaxis

PRISM: Patient Reporting Investigating Surveillance System

PROACT: *Participate, Retain, Observe, Adhere, Communicate and Teamwork is DOH-Broward's treatment adherence program.*

PSRA: Priority Setting & Resource Allocations

QI: Quality Improvement

QIP: Quality Improvement Project

QMC: Quality Management Committee

RSR: Ryan White Services Report

RWHAP: Ryan White HIV/AIDS Program

SA: Substance Abuse

SBHD: South Broward Hospital District (Memorial Healthcare System)

SCHIP: State Children's Health Insurance Program

SDM: Service Delivery Model

SOC: System of Care

SPNS: Special Projects of National Significance

STD/STI: Sexually Transmitted Diseases or Infection

TA: Technical Assistance

TB: Tuberculosis

TGA: Transitional Grant Area

VA: United States Department of Veteran Affairs

VL: Viral Load

WMSM: White Men who have Sex with Men

WICY: Women, Infants, Children, and Youth

HIV HEALTH SERVICES PLANNING COUNCIL MEETING GROUND RULES



1. The Council, its members, and the public recognize and respect the committee process adopted by this Council. The Council, its members, and the public recognize that full discussion and analysis of issues occurs at the committee level rather than at Council meetings.
2. Before a member can make a motion or speak in debate, the member must be recognized by the Chair as having the exclusive right to be heard at that time.
3. All speakers are expected to address the Council in a respectful manner to respect time limits, to speak briefly and to the point, and to stay on agenda. All other persons in attendance should not interrupt the speaker who is recognized by the Chair as having the floor.
4. If the member who made the motion claims the floor and has not already spoken on the question, that member is entitled to be recognized in preference to other members.
5. No person is entitled to the floor a second time in debate on the same item as long as any other person who desires the floor has not spoken on the item.
6. Speakers should restrict comments and debate to the pending question or motion. Speakers must address their remarks to the Chair and maintain a courteous tone. The Chair may impose time limits on debate or discussion to ensure efficient conduct of Council business.
7. Members should not name service providers and/or persons during any discussion unless the service provider or person is identified in the subject of the motion or agenda item. Specific concerns regarding service providers should be directed towards the Grantee, outside of the meeting.
8. Members of the public may only address the Council upon recognition by the Chair. They are subject to the same rules of conduct expected of Council members.
9. No alcohol or drug use (unless prescribed by a licensed physician), is permitted at Council meetings, grantee or support staff offices.
10. No abusive language, threats of violence, or possession of weapons are permitted in Council meetings, grantee or staff offices.
11. Repeated violation of these meeting rules may result in no further recognition of the offending member or attendee by the Chair at that meeting. Any serious breach of conduct which disrupts the Council's meeting may subject the offender to removal from the meeting, administrative or legal process.

CONSEJO DE PLANEACIÓN DE SERVICIOS DE SALUD VIH REGLAS BÁSICAS DE LA REUNIÓN



1. Los miembros deberán aceptar y respetar el proceso de comité adoptado por este Consejo. Las discusiones y el análisis en pleno de los temas tendrán lugar a nivel de comité y no en las reuniones plenarias del Consejo.
2. Antes de que un miembro pueda iniciar una moción o de que una persona pueda hablar en un debate, el Presidente de la reunión deberá reconocer que él o ella tienen el derecho exclusivo de hablar en ese momento dado.
3. Se espera que todos los ponentes se dirijan al Consejo de una manera respetuosa, que no se interrumpa al ponente con derecho al habla en el momento, que cuando se hable se haga de forma clara y concisa, y que se mantenga la agenda.
4. Si el miembro que inicia una moción no ha hablado todavía y reclama su derecho a hablar sobre un asunto, él/ella tendrán el derecho a que con preferencia se les reconozca.
5. Nadie tendrá derecho a reclamar el habla por una segunda vez, en un debate sobre el mismo tema, cuando otra persona que no ha hablado todavía, desea hacerlo.
6. Los debates deben ceñirse a los asuntos o mociones que estén pendientes. Al hablar, los ponentes deben referirse al Presidente, y mantener un tono cortés.
7. Los miembros del público solo podrán dirigirse al Consejo cuando hayan sido reconocidos por el Presidente de la reunión. Estarán sujetos a las mismas reglas de conducta que se esperan de los miembros del Consejo. Se establecerán límites de tiempo según sea necesario para garantizar que los asuntos del Consejo cursen de manera eficiente.
8. Miembros del público sólo podrán dirigir el Consejo a partir del reconocimiento por el Presidente. Están sujetos a las mismas reglas de conducta que se espera de los miembros del Consejo.
9. No estará permitido el uso de bebidas alcohólicas o de drogas en las reuniones del Consejo y tampoco en las oficinas del personal de soporte y donatarios.
10. No está permitido el uso de lenguaje abusivo, amenazas de violencia y posesión de armas en las reuniones del Consejo ni en las oficinas del personal de soporte y donatarios.
11. La repetida violación de estas reglas básicas dará como resultado que el Presidente de la reunión deje de reconocer al derecho a participación del ofensor o miembro de la audiencia. Cualquier violación de conducta grave, que perturbe la reunión de Consejo, terminará en la remoción del ofensor, de la reunión.

KONSÈY PLANIFIKASYON SÈVIS SANTE POU HIV RÈGLEMAN RANKONT-YO



1. Manm-yo dwe rekonèt epi respekte pwosesis komite-a ke Konsèy-la adopte. Diskisyon ak analiz total pwoblèm-yo fèt nan nivo komite-a; li pa fèt pandan rankont tout Konsèy-la.
2. Anvan yon manm ka fè yon pwopozisyon oswa nenpòt ki moun gen dwa pale pandan yon deba, fòk Prezidan Komite-a bali dwa esklizif pou fè moun tande-li nan moman sa-a.
3. Yo atann-yo aske tout moun k'ap pale ak Konsèy-la fè-li avèk respè, pou pèsonn pa koupe moun ke Konsèy-la bay dwa pale lapawòl, pou moun k'ap pale-a respekte kantite tan yo ba-li pou pale-a, pou li di sa l'ap di-a rapidman epi avèk presizyon, epi pou li respekte ajanda-a.
4. Si manm ki fè pwopozisyon-an mande pou li pale epi si li poko pale sou keksyon-an deja, li gen priyorite sou lòt manm-yo.
5. Pèsonn moun pa gen dwa pran lapawòl de fwa sou yon menm sijè si gen lòt moun ki poko pale epi ki vle esprime tèt-yo.
6. Deba-a dwe rete sou keksyon oswa pwopozisyon k'ap fèt-la. Moun k'ap pale-a dwe adrese sa l'ap di-a bay Prezidan Komite-a epi pale sou yon ton ki make ak respè.
7. Manm piblik-la dwe pale ak Konsèy-la sèlman si Prezidan Konsèy-la bay-yo lapawòl. Yo dwe respekte menm règleman kondwit avèk manm Konsèy-yo. Lè sa nesèsè pou zafè Konsèy-la byen mache, yo gen dwa bay-yo yon limit tan pou yo pale.
8. Manm nan piblik la sèlman pou adrese a konsèy sou rekonèsans sou chèz la. Yo ka tonbe anba menm lòd de kondwit ki te espere nan manm konsèy yo.
9. Itilizasyon alkòl ak dwòg (sòf si se yon doktè lisansye ki preskri-li), entèdi nan rankont Konsèy-la oswa nan biwo estaf sipò-a oswa Resevè-a.
10. Vye langaj, menas vyolans, oswa posesyon zam entèdi nan rankont Konsèy-la oswa nan biwo estaf-la oswa Resevè-a.
11. Vyolasyon repete règleman rankont-yo ap lakòz yon manm oswa lòt moun k'ap asiste rankont-lan pa kapab patisipe ankò. Nenpòt ki move kondwit serye ki twouble rankont-la ap lakòz yo mete moun-nan deyò.



Meeting of the
Community Empowerment Committee

Thursday, April 6, 2021
3:00-5:00 AM
By WebEx Videoconference

MINUTES

CEC Members Present: A. Ruffner (Committee Vice-Chair), H. Franks, D. Gunion, R. Bhrangger, I. Wilson, L. Robertson, R. Shore, W. Marcoviche

Members Absent: V. Lewis

Members Excused: N/A

Ryan White Part A Recipient Staff Present: N/A

Planning Council Support Staff Present: G. Martinez, F. Ukpai

Guests Present: N/A

Agenda Item #1: Call to Order

The *CEC Vice-Chair* called the meeting to order at 3:15 p.m.

Agenda Item #2: Welcome & Public Record Requirements

The *CEC Vice-Chair* welcomed all meeting attendees that were present. Attendees were notified that the CEC meeting is based on Florida's "Government-in-the-Sunshine Law and meeting reporting requirements, including the recording of minutes. In addition, it was stated that the acknowledgment of HIV status is not required but is subject to public record if it is disclosed. Introductions were made by the *CEC Vice-Chair*, committee members, Recipient staff, PCS staff, and guests by roll call, and a moment of silence was observed.

Agenda Item #3: Meeting Approvals

The approval for the agenda of the April 6, 2021 Community Empowerment Committee meeting was proposed by *H. Franks*, seconded by *D. Gunion*, and passed unanimously. The approval for the minutes of the joint February 11, 2021 meeting was proposed by *R. Shore*, seconded by *W. Marcoviche*, and approved with no further corrections.

Mr. Franks, on behalf of CEC, made a motion to approve the April 6, 2021 Community Empowerment Committee agenda as presented. The motion was adopted unanimously.

Mr. Shore, on behalf of CEC, made a motion to approve the joint February 11, 2021, Community Empowerment Committee meeting minutes as presented. The motion was adopted unanimously.

Agenda Item #4: Public Comment

The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters pertaining to HIV/AIDS and services in Broward County. There were no public comments.

Agenda Item #5: Standard Committee Items

There were no standard committee items on the agenda for this meeting. The Committee agreed to remove the Standard Committee Item of 'Testimonials' and 'In-Service' until the group begins to meet regularly again.

Agenda Item #6: Unfinished Business

There was no unfinished business to discuss at this meeting.

Agenda Item #7: Meeting Activities/New Business

The Committee reviewed their progress from the FY2020 CEC Work Plan and discussed what changes should be made to the draft work plan for FY2021. PCS staff read through the objectives and activities to outline progress, and the Committee deeply assessed the proposed work plan. It was recommended that only completed activities be represented by a blue shaded box and an 'X'. Members were encouraged to discuss what they intended to accomplish, then determine where and how they should achieve it. Members discussed revisiting similar strategies used to achieve some of their previous events. It was decided that the Committee move forward with the same goals, objectives, and work plan activities.

The approval of the FY2021-2022 Community Empowerment Committee Work Plan was proposed by *I. Wilson*, seconded by *R. Shore*.

Mr. Wilson, on behalf of CEC, made a motion to approve the FY2021-2022 Community Empowerment Committee Work Plan as presented. The motion was adopted unanimously.

PCS Support Staff provided an overview of the Ryan White Part A funded services in Broward County. Committee members were educated on the many services that the Part A program provides and discussed criteria for those services. The presentation detailed primary medical care and essential support services available to people living with HIV (PLWH) who are uninsured or underinsured. Members inquired about eligibility requirements, qualifications for Centralized Intake and Eligibility Determination (CIED) case management, and entities responsible for deciding which services are funded in Broward's EMA. There was some discussion around additional options for PLWH who need medication services that were not covered on the Ryan White Part A formulary. It was noted that Broward County has both a Local Pharmaceutical Assistance Program (LPAP) and AIDS Drug Assistance Program (ADAP) formulary specific for medications covered. An LPAP is a program to ensure that clients receive medications when other means to procure medications are unavailable or insufficient. State ADAP funds may not be used for LPAP support, however, PLWH are able to apply for the ADAP program. The CEC Vice-Chair requested a presentation on the process of determining both the LPAP and ADAP formulary.

Action Item: PCS Staff will coordinate with the Part A Recipient's Office to receive a presentation on the process of LPAP and ADAP.

Agenda Item #8: Recipient Report

There was no representative to provide an update for this meeting.

Agenda Item #9: Public Comment

The Public Comment portion of the meeting is intended to give the public a chance to express opinions about items on the meeting agenda or to raise other matters pertaining to HIV/AIDS and services in Broward County. There were no public comments.

Agenda Item #10: Agenda Items/Tasks for Next Meeting

The next CEC meeting will be held on May 4, 2021, at 9:30 a.m. via WebEx Videoconference.

Agenda Items for Next Meeting:

- Service Utilization Presentation by CQM Support Staff
- PSRA Process/CEC's Role Overview
- CEC's Ranking

Agenda Item #11: Announcements

- World AIDS Museum and Educational Center: Beginning on May 11th, WAM will be partnering with Southeast AIDS Education & Training Center (AETC) to host a community dialogue series with different Ryan White Programs and Planning Councils across the southeast AETC region. There will be an open discussion with the program participants about consumers getting involved in Planning Council processes and the challenges with engaging consumers.

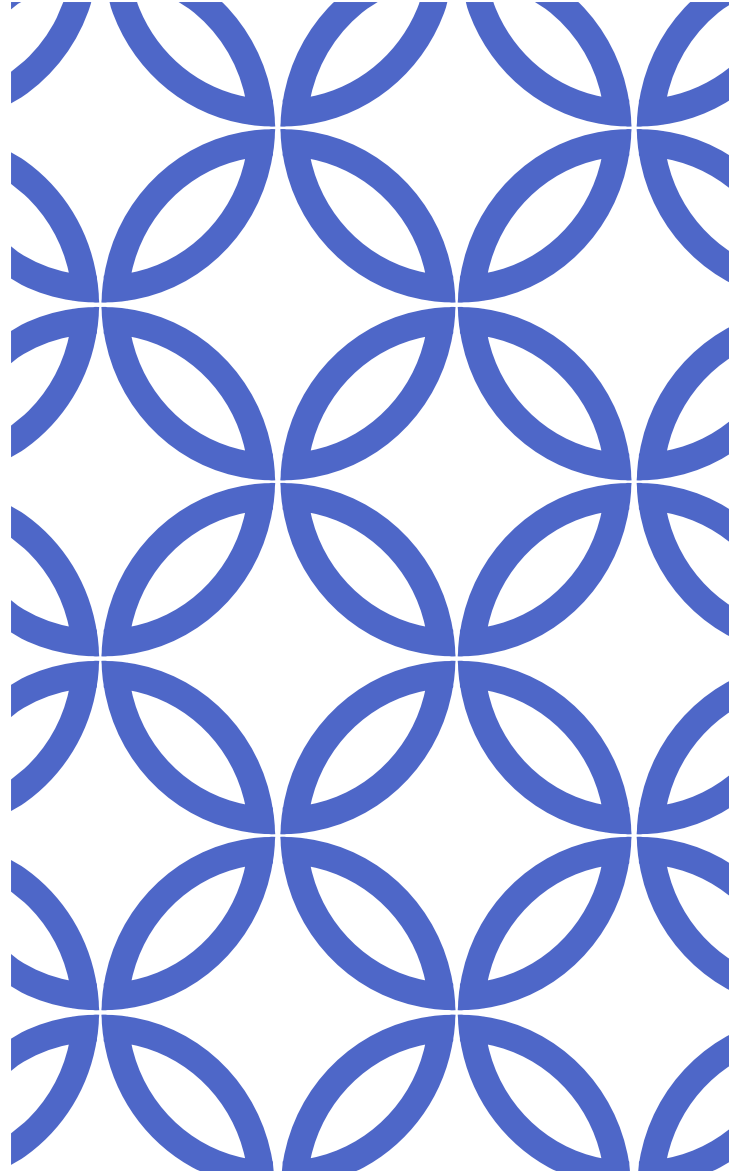
Agenda Item #12: Adjournment

There being no further business, the meeting was adjourned at 4:11 p.m.

CEC Attendance for CY 2021

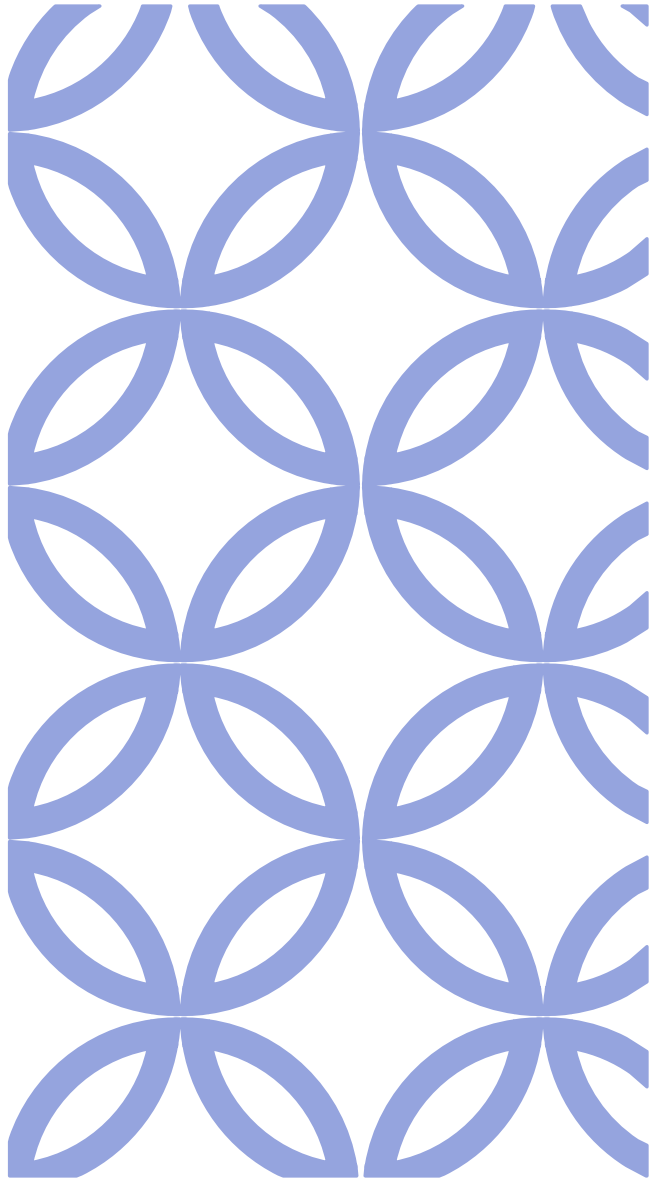
Consumer	PLWHA	Absences	Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
				Meeting Date	C	11	C	6										
1	1	0	1	Bhrangger, R.		X		X										
0	0	1	2	Franks, H.		A		X										
0	0	0	3	Gunion, D.		X		X										
1	1	2	4	Lewis, V.		A		A										
1	1	0	5	Marcoviche, W.		X		X										
0	1	0	6	Robertson, L.		X		X										
0	0	0	7	Ruffner, A., <i>V. Chair</i>		X		X										
0	0	0	8	Shore, R.		X		X										
0	0	0	9	Wilson, I.		X		X										
Quorum = 6					0	7	0	8	0	0	0	0	0	0	0	0	0	

Legend:	
X - present	N - newly appointed
A - absent	Z - resigned
E - excused	C - canceled
NQA - no quorum absent	W - warning letter
NQX - no quorum present	Z - resigned
CX - canceled due to quorum	R - removal letter



BROWARD COUNTY RYAN WHITE HIV/AIDS PROGRAM

Medication Coverage



I. Ryan White HIV Medication Coverage Overview

- AIDS Drug Assistance Program
- Local Pharmaceutical Assistance Program
- Emergency Financial Assistance

II. Broward County Ryan White HIV Medication Coverage In Action

III. Resources

CONTENTS

ADAP

AIDS Drug
Assistance
Program

LPAP

Local
Pharmaceutical
Assistance
Program

EFA

Emergency
Financial
Assistance

RYAN WHITE MEDICATION COVERAGE OVERVIEW

AIDS DRUG ASSISTANCE PROGRAM (ADAP)

Operated by Ryan White Part B

Ryan White HIV/AIDS Program ADAP Requirements:

- Each ADAP must cover at least one drug from each class of HIV antiretroviral medications on their ADAP formulary
- Each ADAP decides which medications to include on its formulary and how those medications will be distributed
- ADAP eligibility criteria must be consistently applied across the state or territory
- All formulary medications and ADAP-funded services must be equally and consistently available to all eligible enrolled people throughout the state or territory

The medications covered by ADAP are on Tier II of the Ryan White Part A Formulary

LOCAL PHARMACEUTICAL ASSISTANCE PROGRAM (LPAP)

Also Known As: AIDS Pharmaceutical Assistance

Operated by Ryan White Part A

Includes local pharmacy assistance programs implemented by Part A to provide HIV/AIDS medications to clients

Does not impose charges on clients with incomes below 400% FPL

EMERGENCY FINANCIAL ASSISTANCE (EFA)

Operated by Ryan White Part A

Provides wrap around pharmaceutical assistance to individual clients with limited frequency and for limited periods of time

Provides limited one-time or short-term payments to assist clients with emergent needs for paying for medication not covered by ADAP or LPAP

Mostly used to provide HIV medications for clients entering care through Test & Treat

1

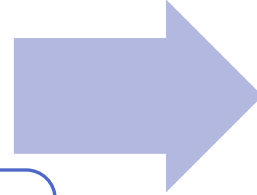
ADAP

The primary payor of HIV medications for eligible Ryan White clients.

2

Part A Formulary
Tier I

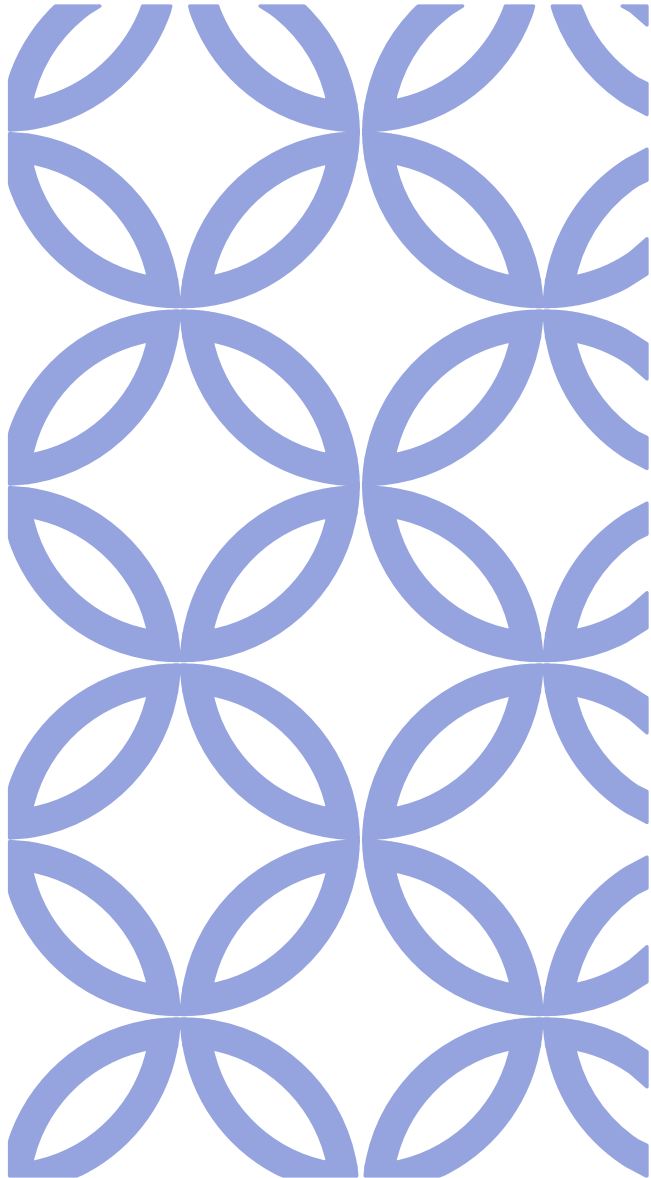
LPAP: non-HIV medications can be accessed through this service. These medications are not on the ADAP formulary.



Part A Formulary
Tier II

EFA: For clients ineligible for ADAP, EFA will cover HIV medications at this tier. This almost always applies to clients entering care through Test & Treat.

BROWARD COUNTY RYAN WHITE HIV/AIDS PROGRAM MEDICATION COVERAGE IN ACTION



- [Part B: AIDS Drug Assistance Program](#)
 - [Broward County Ryan White Part A: AIDS Pharmaceutical Local \(LPAP\) Service Delivery Model](#)
 - [Broward County Ryan White Part A: Emergency Financial Assistance Service Delivery Model](#)
 - [Broward County Ryan White Part A Formulary](#)
-

RESOURCES

CEC PRIORITY RANKINGS

Consumer Involvement in Prioritizing Ryan White Services



Broward County HIV Health Services Planning Council
Broward County Health Care Services Ryan White Part A Program
Broward County Board of County Commissioners
Presented as of May 4, 2021

PSRA LEGISLATIVE RESPONSIBILITY INCLUDES:

- Priority setting – of up to 30 allowable service categories
- Directives to Recipient on how best to meet priorities
- Allocation of funds to priority service categories
- Reallocation – during the year to ensure all funds are spent



THE CEC'S ROLE IN THE PSRA PROCESS

- HRSA and the HIV Planning Council recognize the importance of consumer and PLWHA input in the service categories' ranking and allocations
- The CEC is the first committee to rank the Ryan White Part A service categories each fiscal year
- As the community voice of the HIVPC, it is important that the CEC's ranking reflect the needs of the community
- When the PSRA Committee ranks the Part A service categories in coming months, the CEC rankings will be considered as a part of their decision-making process.



CORE MEDICAL SERVICES

1. Outpatient/Ambulatory Health Services
2. AIDS Pharmaceutical Assistance (Local)
3. Health Insurance Premium & Cost-Sharing Assistance (HICP)
4. Medical Case Management (Disease)
5. Mental Health Services
6. Oral Health Care (Dental)
7. Substance Abuse Services - Outpatient
8. AIDS Drugs Assistance Program Treatments (ADAP)
9. Medical Nutrition Therapy
10. Early Intervention Services
11. Home and Community-Based Health Services
12. Home Health Care
13. Hospice Services



SUPPORT SERVICES

1. **Food Bank/Home-Delivered Meals**
2. **Emergency Financial Assistance**
3. **Legal Services**
4. **Non-Medical Case Management (CIED)**
5. Housing Services
6. Medical Transportation Services
7. Substance Abuse Services - Residential
8. Psychosocial Support Services
9. Outreach Services
10. Health Education/Risk Reduction
11. Referral for Health Care/Supportive Services
12. Linguistics Services (Integration and Translation)
13. Other Professional Services
14. Child Care Services
15. Rehabilitation Services
16. Permanency Planning
17. Respite Care



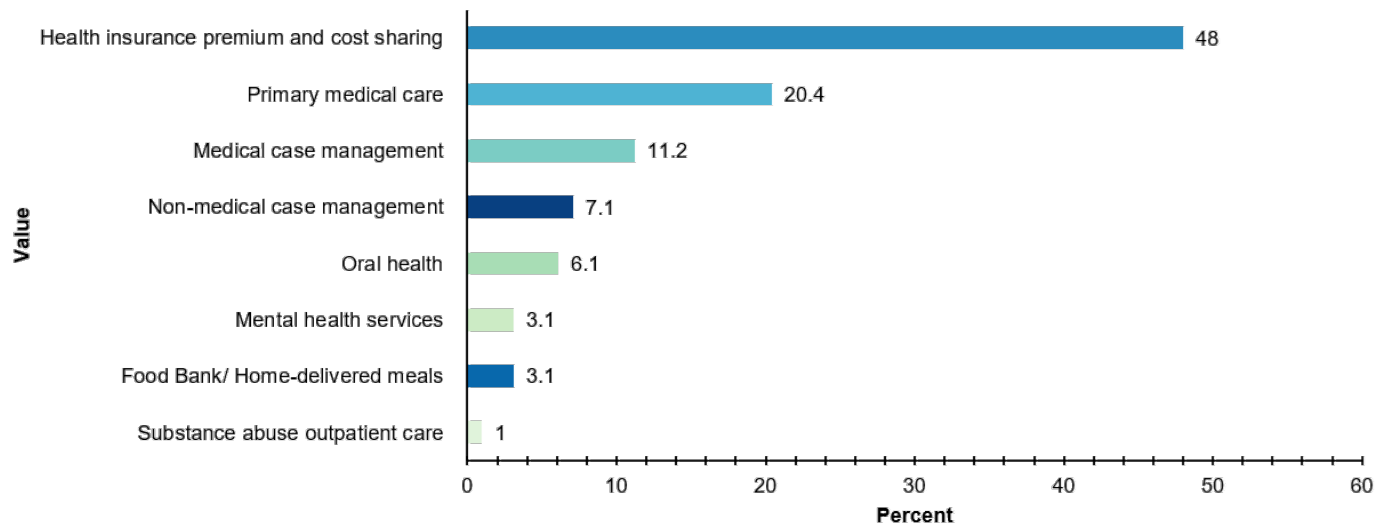
RESOURCE ALLOCATION

- Process of deciding how much money to allow for each priority service category



CONSUMER RANKING OF SERVICES

At this time, the **most important** Ryan White Service for me is:

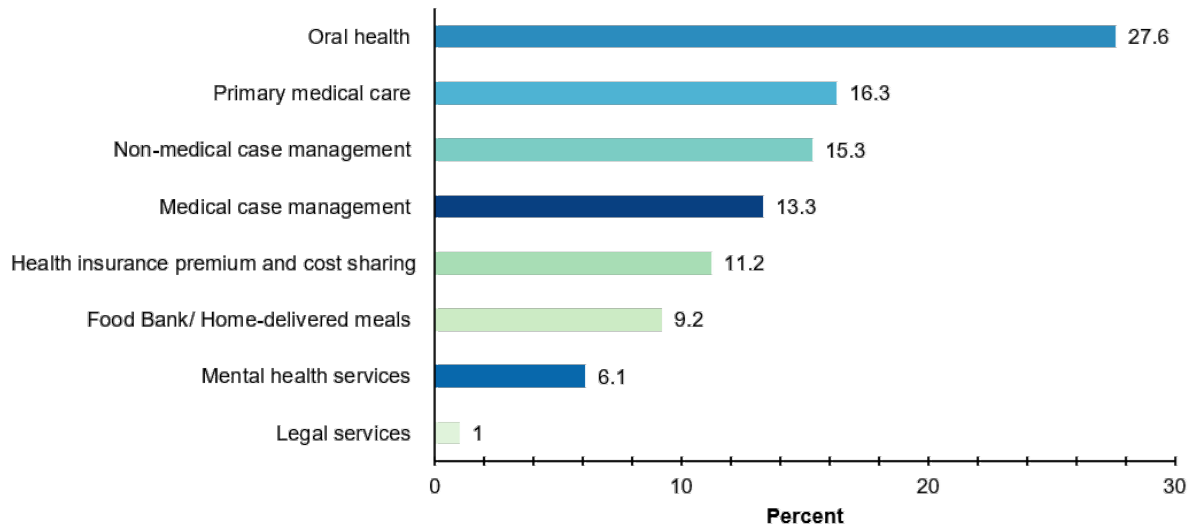


Broward Regional Health Planning Council conducted a Ryan White Program COVID-19 Assessment for the state of Florida. This slide represents survey results from 109 Broward County respondents – individuals receiving Ryan White Part A services.
Reporting Period: March 1, 2020 – December 31, 2020



CONSUMER RANKING OF SERVICES

At this time, the **second** most important Ryan White Service for me is:



Broward Regional Health Planning Council conducted a Ryan White Program COVID-19 Assessment for the state of Florida. This slide represents survey results from 109 Broward County respondents – individuals receiving Ryan White Part A services.
Reporting Period: March 1, 2020 – December 31, 2020



Core Services	CEC	PSRA
AIDS Drug Assistance Program Treatments (ADAP)	2	6
AIDS Pharmaceutical Assistance (Local)	4	2
Early Intervention Services (EIS)	8	9
Health Insurance Premium and Cost Sharing (HICP)	6	4
Home and Community-Based Health Services	12	11
Home Health Care	11	12
Hospice	13	13
Medical Case Management (Disease)	3	3
Medical Nutrition Therapy	9	10
Mental Health Services	7	5
Oral Health Care (Dental)	5	7
Outpatient/Ambulatory Health Services (OAHS)	1	1
Substance Abuse - Outpatient	10	8
Support Services	CEC	PSRA
Child Care	17	17
Emergency Financial Assistance	3	4
Food Bank/Home-Delivered Meals	2	2
Health Education/Risk Reduction	11	10
Housing	1	1
Legal Services	6	7
Linguistics Services (Interpretation and Translation)	16	13
Medical Transportation Services	5	5
Non-Medical Case Management	4	3
Other Professional Services	15	16
Outreach	12	9
Permanency Planning	13	12
Psychosocial Support	7	6
Referral for Health Care and Support Services	8	8

PREVIOUS RANKINGS FOR FY 2021-2022

AS SERVICE USERS, CONSUMERS
ARE WELL POSITIONED TO
EVALUATE THE QUALITY,
APPROPRIATENESS, AND
EFFECTIVENESS OF FUNDED
SERVICES.

QUESTIONS?

DISCUSSION



Listed below are the core medical services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score **1** is given to the **most important** service, while the score of **13** is given to the service with the **lowest importance**. Please do not give two services the same rank.

Core Medical Services:

- Outpatient/Ambulatory Health Services
- AIDS Pharmaceutical Assistance (Local)
- Health Insurance Premium & Cost-Sharing Assistance (HICP)
- Medical Case Management (Disease)
- Mental Health Services
- Oral Health Care (Dental)
- Substance Abuse Services - Outpatient
- AIDS Drugs Assistance Program Treatments (ADAP)
- Medical Nutrition Therapy
- Early Intervention Services
- Home and Community-Based Health Services
- Home Health Care
- Hospice Services

Listed below are the support services that meet the federal government's requirements for Part A funds. Please rank the services in their order of importance to Broward residents living with HIV. The score **1** is given to the **most important** service, while the score of **17** is given to the service with the **lowest importance**. Please do not give two services the same rank.

Support Services:

- Food Bank/Home-Delivered Meals
- Emergency Financial Assistance
- Legal Services
- Non-Medical Case Management (CIED)
- Housing Services
- Medical Transportation Services
- Substance Abuse Services - Residential
- Psychosocial Support Services
- Outreach Services
- Health Education/Risk Reduction
- Referral for Health Care/Supportive Services
- Linguistics Services (Integration and Translation)
- Other Professional Services
- Child Care Services
- Rehabilitation Services
- Permanency Planning
- Respite Care