Broward County HIV Health Services Planning Council
Joint Priorities Committee

200 Oakwood Lane• Suite 100•Hollywood, FL 33020
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Website: www.brhpc.org

Carla Taylor-Bennett
Part A Co-Chair

Kathleen Cannon
Part B Co-Chair

Agenda
Wednesday, January18, 2012 at 12:30 p.m.

1. Call to Order *Please sign-in*	Co-Chairs
2. Welcome and Introductions a. Review Meeting Ground Rules and Statement of Sunshine b. Review Public Comment (Please Sign-in at Front of Room) c. Committee Member Introductions d. Guest Introductions	Co-Chairs
3. Moment of Silence	Co-Chairs
4. Approve Today's Agenda	Co-Chairs
5. Approve Meeting Minutes (12/14/11)	Co-Chairs
6. Grantee Reports a. Part A b. Part B and ADAP	Leonard Jones or designee Ann Mercer
7. Old Business/New Business a. Sweeps #2 b. Medical Transportation Eligibility c. Policies and Procedures Review (Handout A) d. HIVPC Approved Motions (Handout B)	Committee Members
8. Public Comment	Members of the Public
9. Agenda Items for Next Meeting	Co-Chairs
10. Meeting Evaluation	Co-Chairs
11. Next Meeting Date: Wednesday, 02/15/12 at 12:30 p.m.	Co-Chairs
12. Adjournment	Co-Chairs

Please be aware this meeting and all of the information stated thereof is a matter of public record under Florida's Government in the Sunshine Law. Florida Statute, Chapter 119.01 Acknowledgement by participants of HIV status is not required, and if disclosed becomes a part of the public record.

Joint Priorities Committee
Meeting Minutes
200 Oakwood Lane, Suite 100, Hollywood FL 33020
December 14, 2011 at 12:30 p.m.

#	Members	Present	Absent		Guests
1	Carla Taylor-Bennett, Part A Co-Chair	X			Bonnie Majcher
2	Kathleen Cannon, Part B Co-Chair	X			Kara Schickowski
3	Andrew Bush	X			Mauricio Ferrer
4	Brad Gammell		X		Natasha Markman
5	Claudette Grant	X			Reeve Duboff
6	H. Bradley Katz	X			
7	Jean Starkey		X		**Grantee Staff**
8	Jeri Pryor	X			Ann Mercer
9	Joey Wynn	X			Leonard Jones
10	Marie Hayes	X			William Green
11	Paul A. Moore	X			Valentino Clarke
12	Regine Lefevre	X			
13	Rick Siclari	X			**Support Staff**
14	Seth Leverence		X		Christina Bontempo
					Gladria Desa
					Faikah Hosein
	Quorum = 8	**11**	**3**		Michele Rosiere

1. **Call to Order (Government in the Sunshine)**
The Part A Co-Chair called the meeting to order at 12:39 p.m.

2. **Welcome and Introductions**
The Part A Co-Chair welcomed everyone. Self-introductions and conflicts were announced. Attendees were notified of information regarding the Government in the Sunshine Law and meeting reporting requirements, which includes the recording of minutes. In addition, the attendees were advised that the acknowledgement of HIV status is not required but is subject to public record if it is disclosed.

3. **Moment of Silence**
A moment of silence was observed.

4. **Approve 12/14/11 Meeting Agenda**

Motion #1	To "approve 12/14/11 Meeting Agenda with addendum of item 7a.1 – "Part B Sweeps"
Proposed by	H. Bradley Katz
Seconded by	Joey Wynn
Action	Passed

5. **Approve 10/19/11 Meeting Minutes**

Motion #2	To "approve 10/19/11 Meeting Minutes."
Proposed by	H. Bradley Katz
Seconded by	Paul Moore
Action	Passed

6. **Grantee Reports**
   A. **Part A Report**
   The Part A Grantee reported the passing of Doug Morgan, former Director of the Division of Service Systems at HRSA's HIV/AIDS Bureau, who passed away December 6, 2011. The Grantee reported on a National Quality Center (NQC) In+ Care Campaign; the Broward County EMA's measures for retention in care were reported to be at or above the national average. Reallocations for Part A: This year has been difficult due to the late notice of Grant award and many items needed to be pushed back. Sweeps factors in some projections, there is $225,000.00 unspent. There is usually the ability to carry over $500,000.00 which has not been the norm but with late notice of grant award, it may not be possible. In January decisions sweeps may need to be revisited as all contracts need to be vetted by County Attorney's office and returned. The numbers reflected are a bit

understated as all contracts have not yet been signed. Based on a bulk purchase, no funds will be used from the Food Bank service category. The statewide ADAP workgroup changed their bylaws and has added three Part A seats for (i) Miami/Dade (ii) Broward and (iii) Jacksonville. They are mandated seats for the ADAP workgroup. Miami/Dade and Broward were specified due to the volume in those counties and the third seat is a rotating Part A seat which is assigned to Jacksonville.

B. Part B Report

The Part B grantee report: "Cost Avoidance" will now replace the term "Cost Savings".
Through 10/31/11, Part B expenditures total $490,189. Non-Medical Case Management conducted 243 eligibility interviews in October of which 36 were new clients. Medication Co Payment served 321 clients in October in which 10 were new to the program. Cost avoidance in Medication Co Payment Program for October is $32,102.90. Total savings from April-October $80,024. A total of 132 clients activated Pharmaceutical Co Pay cards in October 2011. A total of 360 clients have activated Pharmaceutical Co Pay cards for the period May 1 to October 31, 2011.

- **ADAP Report**

  The ADAP report as of 12/6/11: Total ADAP "Open" Enrollment: 2,026; total ADAP clients served (defined as having at least one "pickup" in the period) in Last 30 Days: 1,228; total ADAP Waitlist Enrollment: 212; total ADAP/Medicare Part D Enrollment (as of 10/17/11): 187 (includes 57 clients being called to verify Medicare eligibility). October ADAP Appointments: Number of appointments: 611; number of missed appointments: 166 (27%). The statewide ADAP removed 386 individuals from the ADAP Wait List as of 12/1/2011. Clients are removed from the Wait List by medical category in the order they were placed on it. Providers should strongly encourage clients to accept the transfer back to ADAP which is now on a more stable financial basis. The contracts with the pharmaceutical companies mandated that FLDOH notify them of clients who refuse the offer. The companies' reaction is unknown but may include dropping the clients from the PAPs.

  There was a statewide ADAP call earlier in the week. The FPL will stay at 400% - motion from Statewide ADAP group.

7. Old Business / New Business

a. Part A Sweeps and Reallocations

The Ryan White Part A Expenditures and Sweep recommendations were as follows:

Service Category	Contracted or Allotted Amount	1/12 Rule Monthly Total	Expended Amount	Average Monthly Expenditures	FY 11-12 Projected Expenditures	Available for Reallocation Mar - Aug 05	Potential Reallocation Dollars		New Service Totals	Providers' Request	Providers' Return	Grantee Recommended Sweep Amount	Recommended Sweep TO	Recommended Sweep FROM
Ambulatory (5)	$5,920,360	$493,363	$3,059,832	$387,464	$4,649,574	$187,619	$562,856		$5,920,360	$195,442	($448,421)	($252,979)	$195,442	($448,421)
MAI Ambulatory (1)	$234,473	$19,539	$99,993	$19,999	$239,983	$19,999	($5,510)	$7	$239,983	$0	$0	$0	$0	$0
Pharmaceuticals (3)	$622,384	$51,865	$238,570	$33,770	$405,244	$108,570	$217,140		$622,384	$0	($211,275)	($211,275)	$0	($211,275)
Dental (2)	$2,155,150	$179,596	$1,730,126	$216,266	$2,595,190	($220,020)	($440,040)	$0	$2,155,150	$468,503	$0	$468,503	$468,503	$0
Case Management (7)	$1,097,105	$91,425	$670,835	$76,379	$916,554	$65,950	$131,900	$0	$1,097,105	$37,000	$0	$37,000	$37,000	$0
MAI Case Management (1)	$29,953	$2,496	$29,943	$4,991	$59,887	($14,967)	($29,934)	$0	$29,953	$0	$0	$0	$0	$0
Mental Health (3)	$229,099	$19,092	$141,237	$18,742	$224,908	$2,095	$4,191		$229,099	$45,000	$0	$45,000	$45,000	$0
MAI Mental Health (1)	$95,000	$7,917	$70,409	$7,823	$93,879	$561	$1,121		$95,000	$0	$0	$0	$0	$0
Substance Abuse (2)	$355,389	$29,616	$210,394	$23,771	$285,252	$35,069	$70,137		$355,389	$0	$0	$0	$0	$0
MAI Substance Abuse (1)	$375,000	$31,250	$327,043	$36,338	$436,057	($30,528)	($61,057)		$375,000	$0	$0	$0	$0	$0
Health Insurance Continuation	$400,000		$311,541	$38,943	$467,312	($33,656)	($67,312)		$400,000	$0	$0	$0	$0	$0
Food Bank (1)	$254,352	$21,196	$0	$0	$0	$127,176	$254,352	$0	$254,352	$0	$0	($86,249)	$0	($86,249)
Food Bank Bulk Purchase	$721,076		$303,457	$37,932	$455,186		$0			$0	$0	$0	$0	$0
Food Voucher	$109,008		$0	$0	$0		$109,008			$0	$0	$0	$0	$0
Transportation Van	$100,000	$8,333	$19,720	$3,287	$39,440	$30,308	$60,615	$0	$100,000	$0	$0	$0	$0	$0
Transportation Bus Pass	$100,000		$49,972	$8,329	$99,944		$56			$0	$0	$0	$0	$0
Centralized Intake and Referral	$300,000	$0	$164,974	$18,330	$219,965	$40,017	$80,035	$0	$300,000	$0	$0	$0	$0	$0
MAI Centralized Intake and	$290,957	$0	$290,957	$32,329	$387,942	($48,493)	($96,985)	$0	$290,957	$0	$0	$0	$0	$0
Outreach (1)	$67,000	$5,583	$2,936	$1,468	$17,618	$24,691	$49,382		$67,000	$0	$0	$0	$0	$0
Legal Assistance (1)	$112,426	$9,369	$103,584	$12,948	$155,376	($21,475)	($42,950)	$0	$112,426	$0	$0	$0	$0	$0
Unallocated Funds	$0		$0	$0	$0		$0				$0	$0	$0	$0
Total Part A Funds	**$11,822,273**	**#REF!**	**$6,653,751**	**$831,369**	**$9,976,433**	**$346,344**	**$880,306**	**$0**	**$11,613,265**	**$745,945**	**($659,696)**	**$0**	**745,945**	**(745,945)**
Total MAI Funds	**$1,025,383**		**$818,344**	**$101,479**	**$1,217,747**		**($192,364)**			**$0**	**$0**	**$0**	**$0**	**$0**
Total Funds	**$12,847,656**		**$7,472,095**	**$932,848**	**$11,194,180**	**$346,344**	**$687,942**			**$745,945**	**($659,696)**	**$0**	**$745,945**	**($745,945)**

The Part A Sweeps and Reallocation motions are shown below:

JOINT PRIORITIES PART A FY 11/12 SWEEPS & REALLOCATIONS						
SERVICE CATEGORY	**FROM**	**TO**	**MOTION**	**SECOND**	**ABSTAIN**	**PASSED**
CORE SERVICES						
Outpatient and Ambulatory	$448,421		Joey Wynn	Jeri Pryor		√
Outpatient and Ambulatory		$195,442	Joey Wynn	Regine Lefevre		√
AIDS Pharmaceuticals	$211,275		Paul Moore	Joey Wynn		√
Oral Health Care		$468,503	Joey Wynn	Rick Siclari	2	√
Medical Case Management		$37,000	H. Bradley Katz	Regine Lefevre		√
Mental Health Services		$45,000	H. Bradley Katz	Paul Moore		√
SUPPORT SERVICES						
Food Bank	$86,249		H. Bradley Katz	Jeri Pryor		√
TOTAL	$745,945	$745,945				

a.1 Part B Sweeps

Part B Sweeps were touched upon and the following motions were made:

Motion #3	To "motion for the current fiscal year in Part B, for the Grantee to move potential remaining balance to bulk purchase of bus passes."
Proposed by	Joey Wynn
Seconded by	Andrew Bush
Action	Passed (1 Abstention)
Justification	Needs Assessment and JCCR input indicate current FY unmet need for transportation (bus passes). This service category used to be a Part B service in the consortia area; temporarily moved to Part A.

Motion #4	To "move the service category, medical transportation (bus passes), from Part A to Part B for FY12/13."
Proposed by	Joey Wynn
Seconded by	Andrew Bush
Action	Passed (1 Abstention)

b. Medical Transportation Eligibility

This was discussed referring to data gathered from different sources. Bus passes are usually only granted for use with core services. The ability to continue to afford the category was mentioned. The current fiscal year's data (quarterly/monthly) is definitely needed before eligibility decision is made. This item was tabled until data is pulled.

8. Public Comment

There was no public comment.

9. Agenda Items for Next Meeting

- Medical Transportation Eligibility
- Revisiting Sweeps
- Policies and Procedures

10. Meeting Evaluation

Members and guests were reminded to complete meeting evaluations.

11. Next Meeting Date

January 18, 2011 at 12:30 p.m. at 200 Oakwood Lane, Suite 100, Hollywood 33020

12. Adjournment

The meeting was adjourned at 2:33 p.m.

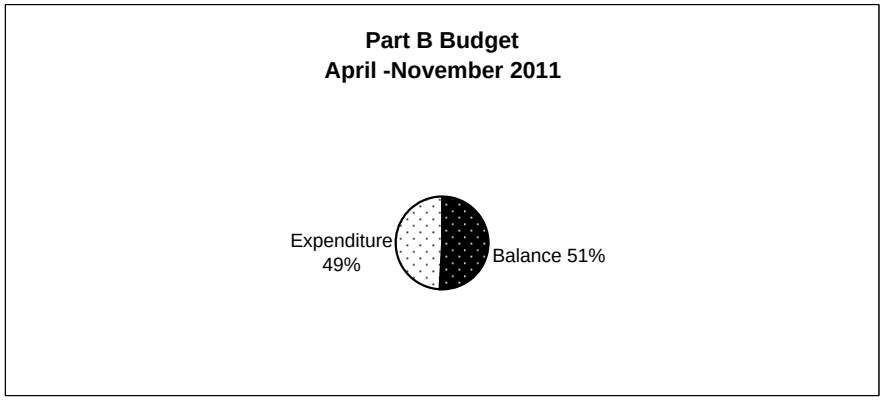
Ryan White Part B
November 2011

Service Category	Part B 2011-2012 Allocated	Part B 2011-2012 (November Spent/ Encumbered)	Part B 2011-2012 Monthly Average Left	Part B 2011-2012 (YTD Spent/ Encumbered)	Part B 2011-2012 (% Left)	Part B 2011-2012 (Balance)
Home Delivered Meals	$ 5,000	$ -	$ 609	$ 735	85%	$ 4,265
Home Health Care Services	$ 16,448	$ 282	$ 1,894	$ 3,189	81%	$ 13,259
Medication Co Pay	$ 812,894	$ 25,895	$ 62,499	$ 375,404	54%	$ 437,490
Case Management (non-medical)	$ 157,395	$ 16,215	$ 10,132	$ 86,471	45%	$ 70,924
Administration	$ 110,192	$ 9,297	$ 4,873	$ 76,078	31%	$ 34,114
TOTALS	**$ 1,101,929**	**$ 51,688**	**$ 140,013**	**$ 541,877**	**51%**	**$ 560,051**
					49%	

Non-Medical Case Management conducted 359 eligibility interviews in November of which 106 were new clients.
Medication Co Payment served 329 clients in November in which 15 were new to the program.
322 Clients served in November Med Co Pay
7 Clients served in November Mail Order

Cost Avoidance for Medication Co Payment Program for November is $31,059.82. Total cost avoidance from April-November is $111,084.16.

A total of 390 clients have activated Pharmaceutical Co Pay cards for the 7 month period May 1, to November 31, 2011.



This report reflects all invoices received and paid as of 11/31/11.

Ryan White Part B 1st FY 11/12 Re-Allocations January 6, 2012

Core Services	FY 11/12 Initial Approved Allocation	Sweep Out	Sweep In	Revised Allocation	% of Award
Medication Co Payment	$ 812,894.00	$ (115,676.00)	$ -	$ 697,218.00	70.30%
Home Health Care Services	$ 16,448.00	$ (3,430.00)	$ -	$ 13,018.00	1.31%
Core Total	$ 829,342.00	$ (119,106.00)	$ -	$ 710,236.00	71.62%
Support Services					
Home Delivered Meals	$ 5,000.00	$ (2,521.00)	$ -	$ 2,479.00	0.25%
Medical Transportation	$ -	$ -	$ 100,021.00	$ 100,021.00	10.09%
Non Medical Case Management	$ 157,395.00	$ -	$ 21,606.00	$ 179,001.00	18.05%
Support Total	$ 162,395.00	$ (2,521.00)	$ 121,627.00	$ 281,501.00	28.38%
Administration	$ 110,192.00	$ -	$ -	$ 110,192.00	
Total Funding	**$ 1,101,929.00**	**$ (121,627.00)**	**$ 121,627.00**	**$ 1,101,929.00**	**100.00%**

Broward County Health Department ADAP Report as of 1/6/12

Total ADAP "Open" Enrollment		2,001
Total ADAP Clients Served in Last 30 Days*		1,235
Total ADAP Waitlist Enrollment**		293
	Category A	6
	Category B	118
	Category C	159
	Category D	10
Total ADAP/Medicare Part D Enrollment		187
Number of Appointments in November		547
Number of Missed Appointment in November		127
Percentage of November Appointments Missed		23%

*"Clients Served" defined as having at least one "pickup" in the period.

****CATEGORY DEFINITIONS:**

CATEGORY A
Diagnosis of AIDS and/or CD4 < 200 cells/mm3 and/or CD4% < 14%
Diagnosis of active opportunistic infection
Diagnosis of HIV-associated nephropathy (HIVAN)

CATEGORY B
Persons who are currently on ARV therapy
Persons who were previously on ARV therapy but therapy was interrupted
Treatment naïve clients with CD4 cell count between 201-350 cells/ mm3

CATEGORY C
Treatment naïve clients with CD4 cell count > 350 cells/mm3

CATEGORY D
Unknown/Other

Clients are removed from the Wait List **by medical category** in the order they were placed on it.
This serves as a reminder to people that if they are on the wait list they MUST recertify at 6 months or they will lose their position on the Wait List.

ADAP ENROLLMENT GUIDANCE REMINDER

For the Recent Waiting List Enrollment

The ADAP Program Office conducted a centralized enrollment from the waiting list on November 29, 2011. The following provides important guidance on information and activities that should be verified and/or conducted.

Staff must:

- □ Contact each person identified to let them know that they have been enrolled into the program and can access their medications from ADAP.
- □ Update the information in the ADAP database and verify that the client has the following:
  - □ A valid Current HIV/AIDS Patient Care Notice of Eligibility,
  - □ A valid prescription for at least one ARV medication on the ADAP formulary, and
  - □ Valid CD4 and HIV Viral Load labs no more than six months old.

Waiting List Enrollment Criterion:

- □ The criterion for waiting list enrollment is based on the Medical Categorization, as stated in the Cost Containment Guidance.

Timeframe:

- □ Clients will have 60 days from the date of enrollment (Nov. 29) to come into the county health department to update information.

Prescriptions:

- □ Clients will need to obtain new prescriptions.

Clients with Medications from a Patient Assistance Program (PAP) or Welvista:

- □ Clients must first exhaust any medications they currently have before accessing meds from ADAP.
- □ If a client has more than 60 days of medications, staff must request of the ADAP Program Office to place the record on 'Admin-Suspend' to prevent an auto-closure.

PAP Notification:

- □ For applicants who were served by Welvista, the ADAP Program Office will notify Welvista of their enrollment.
- □ If the client was receiving medications from a PAP, ADAP staff must send the 'Notification to PAPs of Applicant's Enrollment in the Florida ADAP' form, available on the ADAP intranet site: http://dohiws.doh.state.fl.us/Divisions/Disease_Control/aids/ADAP_Intranet/Waiting_ListLimitedEnrollmentNotificationtoPAPs.pdf.

Non-adherent Clients:

- □ If there is a concern regarding adherence, please follow the ADAP manual addressing clients who have been without medications for two weeks or more.

Medicare Part D:

- □ Beginning January 1, 2012, applicants with Medicare Part D who were removed from the waiting list on November 29 will be transitioned to CVS Caremark for services. Staff must:
  - o Remind clients to continue accessing their medications from the PAP or Welvista until Dec. 31.
  - o Request the ADAP Program Office an 'Admin-Suspend' for the clients with more than 60 days of PAP medications to prevent an auto-closure from the program.
  - o Remind them that they will begin accessing their ADAP medications through CVS Caremark on January 1, 2012.

Please note:

Medicare Part D waiting list applicants who were not removed on November 29, as well as any new applicant placed thereafter, will remain on the waiting list until further notice. The Program Office will continue to monitor funding availability and assess whether these applicants can enter the program in the future.

12/12/2011

JOINT PRIORITIES COMMITTEE
Policies and Procedures

Policies

The Joint Priorities Committee shall recommend priorities and resource allocations to the Broward County HIV Health Services Planning Council (Council) and/or South Florida AIDS Network (Consortia) for the disbursement of Ryan White Part A and Ryan White Part B funds in Broward County. Priority Setting and resource allocation to service categories involves all members of the Council and the Consortia. The process is designed to protect against perceived conflict of interest by adhering to Conflict of Interest policies as identified in the By-Laws of the Council and the Consortia.

The Joint Priorities Committee may offer input regarding the Housing Opportunities for Persons With HIV/AIDS (HOPWA) Program based upon the results of the collaborative needs assessment for the HOPWA Grantee to take into consideration. However, the Joint Priorities Committee will not provide priority setting and resource allocation for the HOPWA Program.

The Committee shall include members of both the Council and Consortia to ensure collaboration and coordination across funding streams. The Committee shall have co-chairs appointed by the Council and the Consortia, respectively.

The Committee shall recommend language to the Council and Consortia on how best to meet each priority and additional factors that the Grantee should consider in disbursing funds under a grant based on: the documented needs of the local HIV infected population; cost and outcome effectiveness of proposed strategies and interventions, to the extent that such data are reasonably available (either demonstrated or probable); priorities of the local HIV-infected communities for whom the services are intended; percentage constituted by the ratio of infants, children and women in the HIV positive population; availability of other local resources and other local priorities as stated.

The Committee shall utilize a "nominal group process method" to set priorities as outlined in the procedures below.

The Committee shall review, at least quarterly, any deviations in planned expenditures exceeding 10% in any given funding category for possible reallocation and/or reprioritization. Unexpended amounts less than 10% in any given funding category may be reallocated by the Administrative entity of the Grantee.
The Grant Administrator shall submit the Part A funding priority award recommendations of the Council to the Board of County Commissioners' designated Division Director, who in turn forwards them to the Broward County Board of County Commissioners for its approval.

The priority process shall allow for funds to enable Council members who are individuals with HIV and their alternates to be reimbursed for their reasonable expenses which shall include but not be limited to the following: transportation, parking, mileage, child care, regular lost wages and appropriate refreshments.

Procedures

The Committee shall meet on an as-needed basis as determined by the Council, the Consortia and Committee Chairs. Persons Living with HIV and community involvement shall be solicited and encouraged at all meetings. The decision making process is publicly stated and implemented as stated.

The Committee shall review client needs and other data presented in the Needs Assessment, Comprehensive Planning documents, the Statewide Coordinated Statement of Need, client utilization data and spending patterns as provided by the Grantee, and other data as applicable and available. This

should ensure that service priorities as set by this Committee are being addressed and conforming to a comprehensive continuum of HIV care.

The Committee shall determine priority funding categories with justifications that can be linked back to the Needs Assessment and Comprehensive Plan for Ryan White Part A and Ryan White Part B consortia's.

The funding formula to be utilized when estimating resources needed shall be:
# of clients (based on surveillance data) x cost (units per client per year x dollars per unit) - other local resources and/or funding sources + other documented community needs = resources needed to fund anticipated need. The Committee shall then assign language on how best to meet the needs to each prioritized funding category.

For periodic reallocation of resources the following process shall be utilized:
The Grantee should present the Committee with estimates of funding deviations with an explanation as to possible causes of the deviation. The Implementation Plan should then be reviewed. The funding should be maintained within the service category if possible. If it is not possible to maintain the funding within the service category, the funding should be moved in ranked order to the next highest ranked category which will experience a shortfall. The Committee reserves the right to deviate from this process to address emergent needs of under-served populations in lower or non-ranked categories. Any deviations from the Implementation Plan will be documented with justification for why the deviation will occur.

In the event of funding shortages (i.e., level funding or less than level funding), core curriculum service categories will be funded at the prior years final funded allocation level minus un-obligated administrative and carryover funds. If not feasible or if doing so would result in a reduction equal to or greater than 15% of the final expenditure amount of the previous year allocated to support services, the Grantee's office will convene the committee to revise funding allocations. Deviations in expenditures in excess of 10% in any given funding category shall be reviewed by the Committee for possible reallocation utilizing the same processes as outlined above.

In order to fully expend funds at the end of the fiscal year, the Committee authorizes the grantee to move funds between categories within a service provider's contract. This authority is given with the understanding that the reallocation process has occurred prior to this shifting of funds, that the amount of dollars involved would be less that 10% of the funding award and that there are less than 120 days left in the fiscal year.

The priorities and allocation recommendations shall then be forwarded to the Council and/or the Consortia and if approved to the applicable funding source for disbursement of Ryan White Part A and/or Part B dollars.

Priority Setting Principle
In the event of a funding award greater than the previous year, service categories will be funded first at the most recent fiscal year's final expenditures. The grantee will exercise discretion in applying up to $500,000 to core services based on a pro rata share of the amount of the increase in proportion to the original grant application percentage (based on estimated need) for core services.

Core Curriculum
The Health Resources and Services Administration (HRSA) has identified the following as core medical services, which are in line with the Florida Statewide Coordinated Statement of Need (SCSN):

1. Outpatient/Ambulatory Health Services
2. AIDS Pharmaceutical Assistance (local)
3. Oral Health Care
4. Mental Health Services
5. Medical Case Management (including Treatment Adherence)
6. Substance Abuse Services (outpatient)
7. Medical Nutrition Therapy

Broward County HIV Health Services Planning Council
Approved Motions – December 22, 2011

Joint Priorities Committee

To support the Joint Priorities Committee recommendation: To move for the current fiscal year in Part B, for the Grantee to move potential remaining balance to bulk purchase of bus passes.
To support the Joint Priorities Committee recommendation: To move the service category, medical transportation (bus passes), from Part A to Part B for FY12/13.

Ryan White Part A Sweeps #1

Service Category	FY 11/12 Sweeps FROM	FY 11/12 Sweeps TO
CORE SERVICES		
Outpatient/Ambulatory (4)	-$448,421	
Outpatient/Ambulatory (4)		$195,442
AIDS Pharm. (Local) (3)	-$211,275	
Medical Case Management (6)		$37,000
Oral Health (2)		$468,503
Mental Health (2)		$45,000
SUPPORT SERVICES		
Food Bank	-$86,249	
Total Funds	**-$745,945**	**$745,945**