

**Central Florida HIV Planning Council**  
**Planning Council Business Meeting Minutes**

March 26, 2025

**Call to Order:** The CFHPC Sr. Co-Chair, Andre Antenor called the meeting to order at 6:10 PM at Heart of Florida United Way located at 1940 Cannery Way, Orlando, FL 32804.

**Members Present:** Andre Antenor, Frederick “Vel” Cline, Kara Johnson Williams, Sueanne Vazquez, Siri “JR” Goberdhan Jr., Andrea Dunn, Alelia Munroe, Charlie Wright, Ira Westbrook, Yvelouse Augustin-Leow, Gabrielle Leonce, Monika Trejos-Kweyete, Jessica Seidita, Angus Bradshaw, Rene Cotto-Lewis, Jules Smith, Andres Acosta

**Members Present via Teleconference:** None.

**Members Excused:** Fernell Neal, Anthony McNeil, Maria “Angie” Buckley, Priscilla Torres-Theobald

**Members Absent:** Raymond Macon

**Recipient Staff Present:** Claudia Yabrudy, Yasmin Andre

**PCS Staff Present:** Whitney Marshall, David Bent, Laura Perez

<b>Approval of the agenda:</b>	<p>The Planning Council reviewed the meeting agenda and recommended the following changes:</p> <ul style="list-style-type: none"><li>• Replace Andres Acosta to Andre Antenor</li></ul> <p><b>Motion:</b> Alelia Munroe made a motion to accept the agenda with the recommended changes. Vel Cline seconded the motion.</p> <table><tr><th>In Favor</th><th>Against</th><th>Abstain</th></tr><tr><td>15</td><td>0</td><td>0</td></tr></table> <p>The motion was adopted with a unanimous roll-call vote.</p>	In Favor	Against	Abstain	15	0	0
In Favor	Against	Abstain					
15	0	0					
<b>Approval of the February 26 Minutes:</b>	<p>The Planning Council reviewed the February 26 meeting minutes and recommended the following changes:</p> <ul style="list-style-type: none"><li>• Part A Monthly Expenditure Percentage of Fiscal Year Transpired should be 83.33%</li></ul> <p><b>Motion:</b> Alelia Munroe made a motion to accept the minutes with the recommended changes. Kara Johnson Williams seconded the motion.</p> <table><tr><th>In Favor</th><th>Against</th><th>Abstain</th></tr><tr><td>15</td><td>0</td><td>0</td></tr></table> <p>The motion was adopted with a unanimous roll-call vote.</p>	In Favor	Against	Abstain	15	0	0
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<b>Open the Floor for Public Comment:</b>	<ul style="list-style-type: none"><li>• Ira Westbrook made a public comment regarding Planning Council member attendance.</li></ul>						

	<ul style="list-style-type: none"> <li>• Kara Williams made an announcement regarding the start of routine HIV testing at the Advent Health emergency department.</li> <li>• Jose Aguilar – Aguilar Salud – shared that on April 21<sup>st</sup> The Latino Commission on AIDS will be visiting Central Florida – an email will be sent out with more information.</li> <li>• PCS did not receive any comment cards.</li> </ul>
<b>Reports: Committees</b>	<p><b>Membership &amp; Engagement Committee:</b></p> <ul style="list-style-type: none"> <li>• The committee meeting was cancelled due to a lack of quorum.</li> <li>• The next Membership &amp; Engagement Committee meeting will be held on Tuesday, April 1, 2025, at 2:00 pm.</li> </ul> <p><b>Service Systems Planning and Quality Committee Meeting:</b></p> <ul style="list-style-type: none"> <li>• The committee received an overview of the Part A Monthly Expenditure report, Part A Quality Management update, Part B Monthly Expenditure &amp; GR reports, Part B Quarter 3 Expenditure &amp; Utilization report, and Part B Quality Management update.</li> <li>• The committee reviewed and approved recommendations for the Part A 2025-2026 Level Funding Final Allocation.</li> <li>• The committee received an Integrated Plan update.</li> <li>• The committee discussed and approved changing the dates of the May and June SSPQ Committee meetings.</li> <li>• The committee reviewed and approved the recommended update to the SSPQ workplan.</li> <li>• The committee reviewed the Part A AAM Planning Council and Subrecipient survey questions. The committee also received feedback and survey question recommendations from Dr. David Cavalleri.</li> <li>• The committee reviewed the Part A and Part B Medical Nutrition Therapy Service Standard. The service standard will be distributed to providers for feedback. The Referral for Health Care and Support Service and the Early Intervention Services Standards are out for a 30-day review and members will provide feedback at the April SSPQ meeting.</li> <li>• A member of the SSPQ committee was chosen to represent the PC at future Clinical Quality Management workgroup meetings.</li> <li>• The committee completed leadership evaluations via Mentimeter.</li> <li>• The next SSPQ meeting will be held on Thursday, April 3, 2025, at 9:30 am.</li> </ul> <p><b>Ryan White Community Meeting:</b></p> <ul style="list-style-type: none"> <li>• The participants received an overview of the business conducted at the March Membership &amp; Engagement and Service Systems Planning &amp; Quality committee meetings.</li> <li>• The participants were given the opportunity to provide feedback on the Medical Nutrition Therapy Service Standard.</li> <li>• A mental health provider from CAN Community Health gave a presentation on mental health and representatives from New York Life gave a presentation on financial wellness.</li> </ul>

	<ul style="list-style-type: none"><li>The next Ryan White Community meeting will be held on Tuesday, April 15, 2025, at 6:00 pm.</li></ul> <p><b>Executive Committee:</b></p> <ul style="list-style-type: none"><li>The committee received an overview of the Part A Monthly Expenditure report, Part A Quality Management update, Part B Monthly Expenditure &amp; GR reports, Part B Quarter 3 Expenditure &amp; Utilization report, and Part B Quality Management update.</li><li>The committee reviewed and approved the recommendations for the Part A 2025-2026 Level Funding Final Allocation.</li><li>The committee reviewed and approved the Part A and Part B Medical Nutrition Therapy Service Standard.</li><li>The committee reviewed and approved the recommended update for the PCB Workplan.</li><li>The committee approved the agenda for the March PC Business meeting.</li><li>The next Executive Committee meeting will be held on Thursday, April 17, 2025, at 2:00 pm.</li></ul>																																				
<b>Reports: Recipient &amp; Lead Agency</b>	<p><b>Part A Monthly Expenditure Report</b> <i>(Expenditures as of January 31, 2025)</i></p> <p>Claudia Yabrudy reported the following:</p> <ul style="list-style-type: none"><li>Percentage of Fiscal Year Transpired: 83.33%</li><li>Target Expenditures: 91.67%</li><li>Actual Expenditures: 94.22%</li><li>Difference: -2.55%</li></ul> <p>Claudia Yabrudy provided the following information regarding the Part A monthly expenditure:</p> <ul style="list-style-type: none"><li>The new grant year began March 1<sup>st</sup>, 2025</li><li>Once the grant is finalized, Part A will report what reallocations were made in the final quarter to the Planning Council</li><li>All grant money was spent</li></ul> <p><b>Part A Quality Management Update</b></p> <p>Claudia Yabrudy provided an updated CQM report on outcomes in Annual Retention and Viral Suppression in the EMA.</p> <table><tr><th colspan="3">EMA Annual Retention 2024</th></tr><tr><th>Category</th><th>Target</th><th>Q4 Actual</th></tr><tr><td>OAHS</td><td>79%</td><td>78%</td></tr><tr><td>MCM</td><td>70%</td><td>70%</td></tr><tr><td>RS</td><td>72%</td><td>71%</td></tr><tr><td>Overall</td><td>95%</td><td>70%</td></tr></table> <table><tr><th colspan="3">EMA Viral Suppression 2024</th></tr><tr><th>Category</th><th>Target</th><th>Q4 Actual</th></tr><tr><td>OAHS</td><td>94%</td><td>93%</td></tr><tr><td>MCM</td><td>90%</td><td>86%</td></tr><tr><td>RS</td><td>94%</td><td>92%</td></tr><tr><td>Overall</td><td>95%</td><td>92%</td></tr></table>	EMA Annual Retention 2024			Category	Target	Q4 Actual	OAHS	79%	78%	MCM	70%	70%	RS	72%	71%	Overall	95%	70%	EMA Viral Suppression 2024			Category	Target	Q4 Actual	OAHS	94%	93%	MCM	90%	86%	RS	94%	92%	Overall	95%	92%
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EMA Q4 2024 Viral Suppression by Sex	
Sex	Percentage
Female	92%
Male	92%
Unknown	87%

EMA Q4 2024 Viral Suppression by Race	
Race	Percentage
Black	88%
White	95%
Other	95%

EMA Q4 2024 Viral Suppression by Ethnicity	
Ethnicity	Percentage
Hispanic	96%
Non-Hispanic	90%

EMA Q4 2024 Viral Suppression by Age Group	
Age Group	Percentage
18-28	86%
29-38	89%
39-48	91%
49-58	93%
59+	96%

### 2025-2026 Part A Final Reallocation

Claudia Yabrudy presented the proposed re-allocation based on level funding for grant year 2025-2026, reviewing the justification behind each proposed reallocation, and including the plan to shift funding sources for Local Pharmacy Assistance Program (LPAP), Early Intervention Services (EIS), Psychosocial Support Services, and Emergency Financial Assistance (EFA) to EHE. Claudia also noted that with the proposed reallocation, the funding of new service categories that were approved by the Planning Council would need to be delayed, and the matter will be revisited once the full grant has been awarded.

Claudia also answered questions regarding dental services. She shared that, while routine dental procedures are being approved, they are being closely monitored, and dental providers are still prioritizing emergency procedures.

A member of the public requested that case managers be encouraged to enroll clients in Medicare Advantage plans so that they can receive dental and vision benefits.

The chair requested that the committee receive quarterly expenditure reports from EHE.

**Motion:** Jessica Seidita made a motion to approve the proposed 2025-2026 Part A level-funding reallocation. Sueanne Vazquez seconded the motion.

In Favor	Against	Abstain
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15

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The motion was adopted with a unanimous roll-call vote.

**Part B Monthly Expenditure Report**  
***(Expenditures as of January 31, 2025)***

Yasmin Andre reported the following:

- Grant Month Number: 10
- Target Expenditures: 83%
- Actual Expenditures: 79%
- Difference: 4%

Yasmin provided the following information regarding the Part B monthly expenditures:

- The following service categories are below target expenditure:
  - AIDS Pharmaceutical Assistance – due to delayed invoicing
  - Health Insurance Premium & Cost Sharing Assistance – due to reduced utilization, as more clients are enrolling in ADAP
  - Home & Community-Based Care – due to reduced utilization
  - Medical Case Management – funds were moved to this category from Referral for Healthcare Support to support all clients having a medical case manager
  - Oral Health Care – due to delayed invoicing
- The following service categories are above target expenditure:
  - Substance Abuse Outpatient – remaining funding was reallocated to other categories due to low utilization
  - Emergency Financial Assistance
  - Referral for Healthcare Support
  - Non-Medical Case Management – GR funds can be used if needed prior to the start of Part B's next grant

**GR Monthly Expenditure Report**  
***(Expenditure as of January 31, 2025)***

Yasmin Andre reported the following:

- Grant Month Number: 7
- Target Expenditures: 58%
- Actual Expenditures: 66%
- Difference: -8%

Yasmin provided the following information regarding the General Revenue monthly expenditures:

- Food Bank/Home Delivered Meals & Medical Transportation Services lines were both opened to existing providers

## Part B & GR Utilization & Expenditures

Yasmin Andre provided the following information regarding Part B quarterly utilization and expenditures:

- The data presented in the report was compiled from CAREWare and the AIDS Information Management System (AIMS)
- The Area 7 Ryan White Part B & General revenue program provides services in Orange, Osceola, Seminole, and Brevard Counties
- An overview of utilization of core and support services.

Percent Change in Utilization Q2-Q3 2024-2025 Core Services	
Local Pharmaceutical Assistance Program	-63%
Early Intervention Services <sup>1</sup>	29%
Health Insurance Premium & Cost Sharing	-5%
Medical Case Management <sup>2</sup>	194%
Mental Health	-62%
Oral Health Care	-11%
Outpatient Ambulatory Health Services <sup>3</sup>	82%
Home & Community-Based Care	125%
Substance Abuse Outpatient <sup>4</sup>	-100%

<sup>1</sup> Vacancy was filled, allowing for more clients to be seen.

<sup>2</sup> Part B shifted its case management model in Brevard County so that all clients are assigned a Medical Case Manager.

<sup>3</sup> One of the providers shifted away from a fee-for-service model, and is now billing for staff time

<sup>4</sup> One client was utilizing the services in Q1 and Q2 but not in Q3

Percent Change in Utilization Q2-Q3 2024-2025 Support Services	
Non-Medical Case Management	80%
Referral for Health Care & Support Services	-41%
Medical Transportation	-24%
Emergency Financial Assistance	-71%

## Part B Quality Management Update

Yasmin Andre provided a report on Part B Viral Suppression and Annual Retention data for 2024. She shared that the target for Viral Suppression was 89%, and the target for Retention in Care was 74%.

Viral Suppression – 2024 Q4		
Overall		82%
Sex	Female	83%

Retention In Care – 2024 Q4		
Overall		68%
Sex	Female	72%

	<table><tr><td rowspan="2"></td><td>Male</td><td>82%</td></tr><tr><td>Unknown</td><td>71%</td></tr><tr><td rowspan="6">Age</td><td>19-24</td><td>100%</td></tr><tr><td>25-34</td><td>77%</td></tr><tr><td>35-44</td><td>77%</td></tr><tr><td>45-54</td><td>82%</td></tr><tr><td>55-64</td><td>85%</td></tr><tr><td>65+</td><td>86%</td></tr><tr><td rowspan="4">Race</td><td>Black Non-Hispanic</td><td>81%</td></tr><tr><td>Hispanic</td><td>88%</td></tr><tr><td>Other</td><td>64%</td></tr><tr><td>White Non-Hispanic</td><td>82%</td></tr><tr><td rowspan="4">EIIHA</td><td>Black MMSC</td><td>79%</td></tr><tr><td>Hispanic MMSC</td><td>88%</td></tr><tr><td>White MMSC</td><td>82%</td></tr><tr><td>Black Heterosexual</td><td>83%</td></tr></table>		Male	82%	Unknown	71%	Age	19-24	100%	25-34	77%	35-44	77%	45-54	82%	55-64	85%	65+	86%	Race	Black Non-Hispanic	81%	Hispanic	88%	Other	64%	White Non-Hispanic	82%	EIIHA	Black MMSC	79%	Hispanic MMSC	88%	White MMSC	82%	Black Heterosexual	83%	<table><tr><td rowspan="2"></td><td>Male</td><td>52%</td></tr><tr><td>Unknown</td><td>70%</td></tr><tr><td rowspan="6">Age</td><td>19-24</td><td>73%</td></tr><tr><td>25-34</td><td>58%</td></tr><tr><td>35-44</td><td>60%</td></tr><tr><td>45-54</td><td>72%</td></tr><tr><td>55-64</td><td>70%</td></tr><tr><td>65+</td><td>76%</td></tr><tr><td rowspan="4">Race</td><td>Black Non-Hispanic</td><td>84%</td></tr><tr><td>Hispanic</td><td>74%</td></tr><tr><td>Other</td><td>72%</td></tr><tr><td>White Non-Hispanic</td><td>92%</td></tr><tr><td rowspan="4">EIIHA</td><td>Black MMSC</td><td>60%</td></tr><tr><td>Hispanic MMSC</td><td>70%</td></tr><tr><td>White MMSC</td><td>67%</td></tr><tr><td>Black Heterosexual</td><td>72%</td></tr></table>		Male	52%	Unknown	70%	Age	19-24	73%	25-34	58%	35-44	60%	45-54	72%	55-64	70%	65+	76%	Race	Black Non-Hispanic	84%	Hispanic	74%	Other	72%	White Non-Hispanic	92%	EIIHA	Black MMSC	60%	Hispanic MMSC	70%	White MMSC	67%	Black Heterosexual	72%
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New Business	<p><b>Ways to Best Meet Needs (WBMN) Updates</b></p> <p>Members received an update from Part A and Part B on the status of the Directives to the Recipient from 2024-2025, which were as follows:</p> <ol style="list-style-type: none"><li>1. To encourage all RWHAP-funded providers, including case managers, to participate in training that focuses on a harm reduction model to mental health and substance use.</li><li>2. To encourage all RWHAP-funded providers to participate in leadership training developed and/or approved by the Recipient's Office, which includes awareness of compassion fatigue and customer service.</li><li>3. To work with subrecipients to implement methodologies for meaningful input from clients, including but not limited to Client Advisory Board (CAB) meetings, focus groups, special studies, town halls, and other client centered engagement activities (where clients provide input on their care).</li><li>4. To encourage subrecipients to participate in HIV stigma reduction training for all staff.</li></ol>																																																																									

Yasmin Andre provided the following updates for each Directive for Part B, and noted that Part B's ability to work towards the directives was impacted by the state's plan to shift to a statewide Part B fiduciary agent:

1. While they were unable to devote time to creating new trainings, Part B was instead able to expand the pool of free training resources available to providers and case managers, including AETC, the National HIV Curriculum, the National HIV Classroom Learning Center, and the CAI Center of Expertise for Online Training.
2. Part B did not meet this directive, but focused instead on preparing providers for the transition to a statewide Part B fiduciary by enhancing or creating new provider toolkits, which included a programmatic deliverables toolkit, a CQM toolkit, and an invoicing guide.
3. The Part B Clinical Quality Manager completed the CQII Training of Quality Leaders Program, which is meant to help engage providers and subrecipients on ways to incorporate client input as part of the system of care and use that data to make informed decisions. He is also currently participating in a collaborative learning lab. Both programs involve a QI project with subrecipients that emphasizes client involvement. Part B also shared resources such as the CQII Patient Involvement Guide and the Provider QM toolkit.
4. Part B conducted an in-person training for their medical case managers on a comprehensive needs assessment tool that included training on implicit bias, avoiding stigmatizing language, using people-first language, motivational interviewing, and providing resources for HIV support. As part of this training, Part B also provided and familiarized case managers with resources for clients on how to talk to providers and partners about sexual health.

Claudia Yabrudy provided the following WBMN updates for Part A:

1. Part A provided a mental health overview at one of their quarterly case management meetings.
2. Due to changes at the federal level leading to AETC being unavailable, there were delays in completing trainings relevant to this directive. However, all Part A subrecipients are required to do annual customer service training, and there was compliance across the board with those trainings.
3. Part A worked to ensure that all subrecipients had Client Advisory Boards (CABs) established. For smaller organizations where a CAB was not the best solution, focus groups were held instead.
4. Part A has an HIV stigma reduction training scheduled for the first week in April, and will take steps to continue to provide the training in the future based off feedback from that training.

#### **PCB Work Plan Approval**

Whitney Marshall reviewed the change made to the Planning Council Business Workplan, which was to remove the development and negotiation of the PCS Annual Budget due to not being a committee or council responsibility. She added that the Recipient office will provide a report of



	<p>the information to the Sr. and Jr. Co-chairs to allow for questions and feedback.</p> <p><b>Motion:</b> Alelia Munroe made a motion to approve the Planning Council workplan for 2024-2025. Jessica Seidita seconded the motion.</p> <table><tr><th>In Favor</th><th>Against</th><th>Abstain</th></tr><tr><td>16</td><td>0</td><td>0</td></tr></table> <p>The motion was adopted with a unanimous roll-call vote.</p> <p><b>Medical Nutrition Therapy Service Standard</b> Whitney Marshall reviewed the updates made to the Service Standard for Medical Nutrition Therapy after review by SSPQ, the community, providers, and the Executive Committee. Aside from formatting changes, the most notable update was the specification that “the care plan shall be signed by either a registered dietitian or medical provider.”</p> <p><b>Motion:</b> Monika Trejos-Kweyete made a motion to approve the updated Medical Nutrition Therapy Service Standard. Vel Cline seconded the motion.</p> <table><tr><th>In Favor</th><th>Against</th><th>Abstain</th></tr><tr><td>13</td><td>0</td><td>3</td></tr></table> <p>The motion was adopted with a majority roll-call vote.</p>	In Favor	Against	Abstain	16	0	0	In Favor	Against	Abstain	13	0	3
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Announcements	<ul style="list-style-type: none"><li>• April 24<sup>th</sup>-25<sup>th</sup> HIV and STD sections from Tallahassee will be hosting a PrEP and Mpox symposium in Orlando. More information will be sent to PCS as it is received.</li><li>• Season 2 of A Walk for Change will be December 13<sup>th</sup>, 2025, and benefitting agencies will be announced over the next few weeks.</li><li>• On April 21<sup>st</sup> The Latino Commission on AIDS will be visiting Central Florida, and any Hispanic leaders or agencies that work and advocate for the Hispanic community are invited– an email will be sent out with more information.</li><li>• Positive Assistance is seeking members of faith-based communities in Orlando to join the Faith-Based AIDS Coalition for Technical Assistance and Services (FACTS) in order to increase awareness and education on HIV/AIDS.</li></ul>												

ACTION ITEMS	
Responsible Party	Item
-	-

<b>Next Meeting</b>	April 30, 2025
<b>Adjournment:</b>	7:50 PM

**Prepared by:** *Laura Perez* **Date:** 4/4/2025

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_