

## Central Florida HIV Planning Council

### Service Systems Planning & Quality (SSPQ) Committee Minutes

April 9, 2026

**Call to Order:** The SSPQ Committee Chair, Paolo Mancini, called the meeting to order at 1:30 PM at Heart of Florida United Way located at 1940 Cannery Way, Orlando, FL 32804.

**Members Present:** Paolo Mancini, Jules Smith, Charlie Wright, Tim Collins, Nino Franklin, Jessica Seidita, Glorybee Nuñez, Mike Alonso, Angie Buckley, Monika Trejos Kweyete, Gabrielle Leonce, Iradarnell Westbrook (via teleconference), Andre Antenor (via teleconference)

**Members Excused:** Alelia Munroe, Rene Cotto-Lewis, Priscilla Torres-Theobald

**Recipient & Lead Agency Staff Present:** Maria Torres, Pedro Huertas-Diaz, Yasmin Andre, Whitney Marshall, Doris Huff (via teleconference)

**PCS Staff Present:** Whitney Marshall, Laura Perez, Nishika Stafford

<b>Approval of the agenda:</b>	<p>The committee reviewed the meeting agenda and approved it as presented.</p> <p><b>Motion:</b> Charlie Wright made a motion to accept the agenda as presented. Jessica Seidita seconded the motion.</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: center;">In Favor</th> <th style="text-align: center;">Against</th> <th style="text-align: center;">Abstain</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">7</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> </tbody> </table> <p>The motion was adopted unanimously without debate.</p>	In Favor	Against	Abstain	7	0	0
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7	0	0					
<b>Approval of the March 12 Minutes:</b>	<p>The committee reviewed the March 12 minutes and approved them as presented.</p>						
<b>Open the floor for public comment:</b>	<ul style="list-style-type: none"> <li>• PCS did not receive any comment cards.</li> <li>• There were no public comments in the room or online.</li> </ul>						
<b>Unfinished Business</b>	<p><b>AAM Surveys</b></p> <p>The committee reviewed the recommended changes to the AAM Planning Council and Subrecipient Surveys and discussed the following additional recommended changes:</p> <ul style="list-style-type: none"> <li>• Add a disclaimer to the top of the surveys outlining who is intended to complete the survey</li> <li>• Clarification of acronyms</li> <li>• Updating of years</li> </ul> <p>They also discussed additional questions recommended by the consultant, Dr. David Cavalleri, regarding the Request for Proposal (RFP) process.</p>						

**Motion:** Tim Collins made a motion to forward both of the AAM surveys with the recommended changes to the Executive Committee. Mike Alonso seconded the motion.

In Favor	Against	Abstain
10	0	0

The motion was adopted unanimously without debate.

### **Provider Capacity & Capability Survey**

The committee reviewed the previous month's recommended changes to the Provider Capacity and Capability Survey, which included the following:

- Adding a time estimate to the introduction
- Altering the logic to not have medical staff answer questions about funding
- Addition of "major funding changes" to examples of emergency & disaster situations
- Addition of an HIV Care Needs Survey question rating the top five important services

The committee also discussed the following additional changes:

- Addition of "internal" before "resources" in items 24 and 25, and a "does not apply" answer option to the same items

**Motion:** Jessica Seidita made a motion to approve the survey with the recommended changes to forward to the Executive Committee. Angie Buckley seconded the motion.

In Favor	Against	Abstain
9	0	0

The motion was adopted unanimously without debate.

### **Service Standard: Outpatient Ambulatory Health Services**

Pedro Huertas-Diaz provided an overview of the recommended updates to the OAHS Service standard that were made throughout 1.0 Treatment Guideline Standards and Measures to better align with current HHS guidance, including more detailed information on:

- The required components of the initial medical evaluation/assessment (1.1)
- The required elements of baseline laboratory testing (1.4)
- Viral and CD4 load monitoring (1.5)
- Expanded immunizations list (1.7)
- List of items for routine preventive screening (1.8)
- List of recommended activities for health education (1.10)
- Updated schedule for follow-up visits and required components of clinical reassessments (1.12)

Several changes were the result of combining certain sections for clarity and cohesion.

The committee further discussed:

- Clearly defining what constitutes as “delayed” for antiretroviral therapy ko(ART) start and who is responsible for initiating ART (1.2)
- Addition of “as medically indicated” (1.7)
- Addition of methods to attempt to contact to align with the Early Intervention Services and Referral for Healthcare and Support Service Standards (1.13)

**Motion:** Tim Collins made a motion to approve the Outpatient Ambulatory Health Services Service Standard with the recommended changes to forward to providers and the community. Mike Alonso seconded the motion.

In Favor	Against	Abstain
8	0	1

The motion was adopted by majority vote.

**Part A Monthly Expenditure Report  
(Expenditures as of February 28, 2026)**

Pedro Huertas-Diaz reported the following:

- Percentage of Fiscal Year Transpired: 100%
- Target Expenditures: 100%
- Actual Expenditures 97.31%
- Difference: 2.69%

Pedro provided the following information regarding the Part A monthly expenditure:

- 100% of funds will be expended

**Part B Monthly Expenditure Report  
(Expenditures as of February 28, 2026)**

Whitney Marshall reported the following:

- Grant Month Number: 11
- Target Expenditures: 92%
- Actual Expenditures 95%
- Difference: -3%

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

- The Part B grant year is currently being closed out, and the funds were 100% spent.

Reports:

	<p><b>GR Monthly Expenditure Report</b> <i>(Expenditure as of February 28, 2026)</i></p> <p>Whitney Marshall reported the following:</p> <ul style="list-style-type: none"> <li>• Grant Month Number: 8</li> <li>• Target Expenditures: 67%</li> <li>• Actual Expenditures: 68%</li> <li>• Difference: -2%</li> </ul> <p>For the sake of time, the committee agreed to review Utilization reports after New Business.</p>
<p><b>New Business:</b></p>	<p><b>Integrated Plan &amp; HIV Care Needs Survey Updates</b> The committee was informed that are currently 865 responses to the HIV Care Needs Survey, 730 of which are fully completed. The committee received the update that all Integrated Plan community engagement activities have been completed aside from key informant interviews still being conducted in Osceola county. The deadline for submission of the Integrated Plan is June 30<sup>th</sup>, and the next Integrated Plan Ad Hoc Committee Meeting will be on Friday, April 17<sup>th</sup> at 1:00 PM.</p> <p><b>CQM Representative Election</b> The committee was informed that the individual previously in the role as Clinical Quality Management (CQM) Representative recently resigned. The committee received an overview of the responsibilities of the role, which are to attend Part A CQM meetings and report any relevant information back to the Planning Council.</p> <p>Mike Alonso nominated himself for the position. Iradarnell Westbrook also nominated Tim Collins for the position. After holding an election, Mike Alonso was elected as the Planning Council’s new CQM Representative.</p> <p><b>Leadership Evaluations</b> The committee had the opportunity to provide feedback on their committee leadership via SurveyMonkey.</p> <p><b>Service Standard: Medical Case Management</b> The Service Standard for Medical Case Management was distributed to the committee for a 30-day review.</p>
<p><b>Reports (continued):</b></p>	<p><b>Part A Quarterly Utilization Report</b> Pedro Huertas-Diaz provided the following information:</p> <ul style="list-style-type: none"> <li>• The Orlando EMA Ryan White Part A provides services in Orange, Osceola, Seminole, and Lake Counties.</li> <li>• All data presented was compiled from Provide Enterprise.</li> </ul>

- Data includes utilization for Part A and MAI funding.
- Summary of clients by core and support services.

<b>Percent Change in Utilization Core Services Q3-Q4 FY2025-2026</b>	
Medical Case Management	-15%
Outpatient Ambulatory Health Services	+7%
Oral Health Care	-86%
Mental Health Services	-22%
Health Insurance Premium & Cost Sharing Assistance	+41%
Medical Nutrition Therapy	+4%
Substance Abuse Outpatient	-55%

<b>Percent Change in Utilization Support Services Q3-Q4 FY2025-2026</b>	
Referral for Health Care & Support Services	+2%
Medical Transportation	-14%
Food Bank/Home Delivered Meals	-29%

Pedro answered questions from the committee regarding impacts of the ADAP changes to service utilization.

**Part B Quarterly Utilization Report**

Whitney Marshall gave a brief overview of the utilization for Part B. As of Q4 there was an increase in the overall number of clients served, which was likely due to case managers contacting their clients about the impending ADAP changes and preparing them for the impact. The following was provided:

- The data presented in the report was compiled from CAREWare.
- The Area 7 Ryan White Part B & General revenue program provides services in Orange, Osceola, Seminole, and Brevard Counties.
- A brief overview of client utilization data by demographic categories of race and ethnicity, sex, age, and county of residence.

<b>Percent Change in Utilization of Core Services Q3-Q4 FY2025-2026</b>	
AIDS Pharmaceutical Assistance (LPAP)	+25%
Early Intervention Services	+16%
Health Insurance Premium & Cost Sharing	-53%
Home & Community-Based Care	-43%

	<table border="1"> <tr> <td>Medical Case Management</td> <td>+38%</td> </tr> <tr> <td>Mental Health</td> <td>-53%</td> </tr> <tr> <td>Oral Health Care</td> <td>-64%</td> </tr> <tr> <td>Outpatient Ambulatory Health Services</td> <td>-32%</td> </tr> </table>	Medical Case Management	+38%	Mental Health	-53%	Oral Health Care	-64%	Outpatient Ambulatory Health Services	-32%		
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	<table border="1"> <tr> <th colspan="2">Percent Change in Utilization of Support Services Q3-Q4 FY2025-2026</th> </tr> <tr> <td>Non-Medical Case Management</td> <td>+34%</td> </tr> <tr> <td>Referral for Health Care &amp; Support Services</td> <td>-18%</td> </tr> <tr> <td>Medical Transportation</td> <td>112%</td> </tr> <tr> <td>Emergency Financial Assistance</td> <td>-</td> </tr> </table>	Percent Change in Utilization of Support Services Q3-Q4 FY2025-2026		Non-Medical Case Management	+34%	Referral for Health Care & Support Services	-18%	Medical Transportation	112%	Emergency Financial Assistance	-
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Emergency Financial Assistance	-										
<b>Announcements:</b>	No announcements.										

ACTION ITEMS	
Responsible Party	Item
PCS	Forward corrected Part A and Part B Utilization reports
<b>Next Meeting:</b>	May 14, 2026
<b>Adjournment:</b>	4:00 PM

Prepared by: Whitney Marshall Date: 4/23/2026

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