HIV HEALTH SERVICES PLANNING COUNCIL
Priority Setting & Resource Allocation Committee Workshop
June 20 & 21, 2024

Meeting title: PSRA Data Presentations - Day One

Meeting date: 6/20/2024 Start time: 11:00 am End time: 4:30 pm

Meeting location: Dorothy Mangurian Comprehensive Women's Center, Holy Cross Hospital ; 1000 NE 56th St. Education Rooms 1 & 2; Ft. Lauderdale, FL 33334

Meeting purpose: Review data relevant to the PSRA process; Data driven decision making

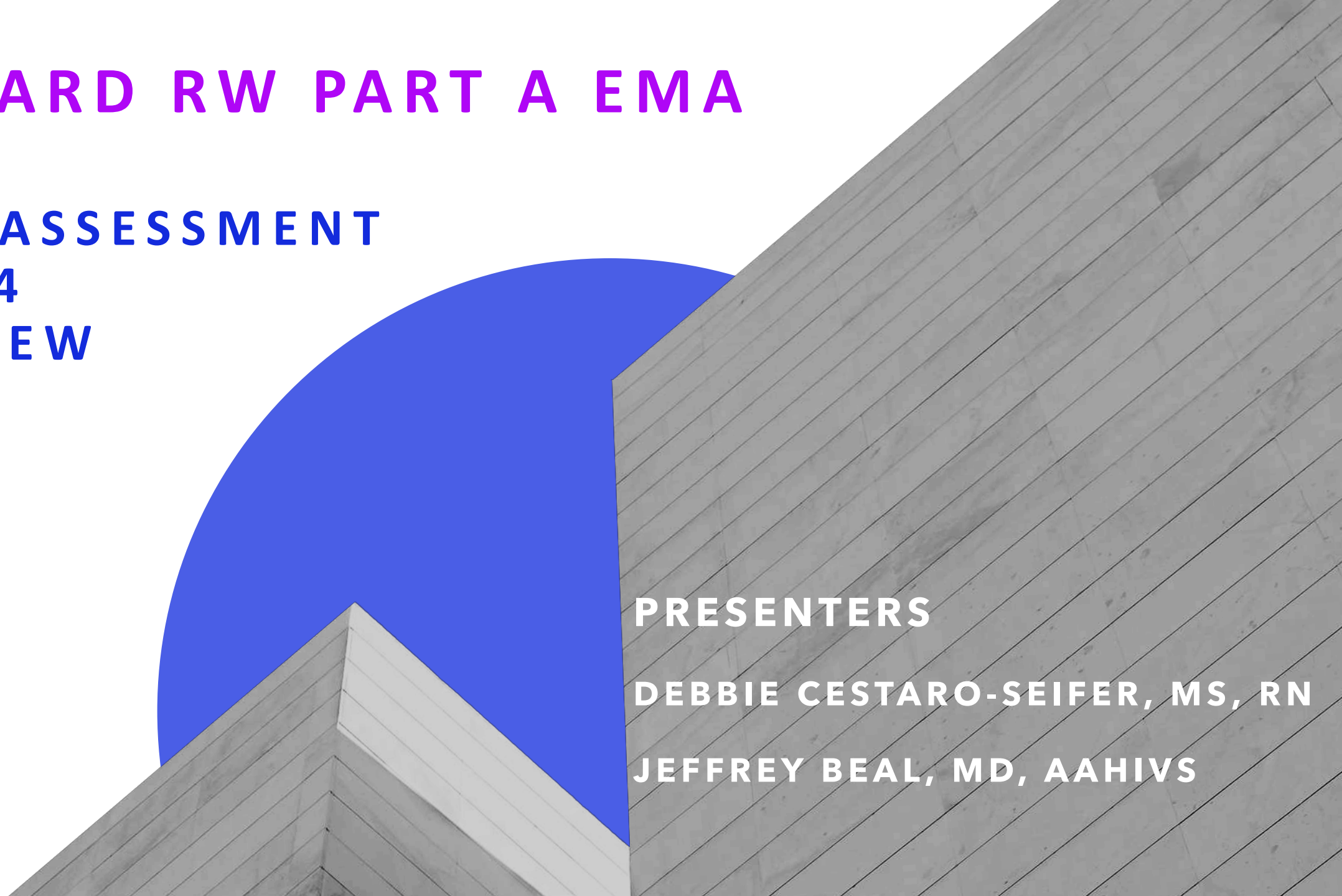
TIME	DESCRIPTION	PRESENTER
11:00-11:15	Welcome	Brad Barnes, Chair PSRA
11:15-12:30	Presentation of Notable Trends FY 2023-2024 Needs Assessment / Community Input	Jeffrey Beal,MD & Debbie Cestaro-Seiffer, RN,MSN BRHPC Consultants
12:30-1:00	Overview: Ryan White Part A Service Categories	Ryan White Part A County Representative
1:00-2:30	Ryan White funders and stakeholders	HOPWA, Ryan White Parts B, C, D, and F Representatives
2:30-3:00	Ryan White - Broward Minority AIDS Initiative and Ending the HIV Epidemic Activities	Ryan White Part A County Representative
3:00-4:00	The Affordable Care Act (ACA), Insurance, and the Impact on the Integrated HIV Prevention & Care Plan	Joey Wynn, Chair, Broward County Integrated Planning Workgroup
4:00-4:15	Broward Part A: Ryan White HIV/AIDS Program Services Report (RSR) Overview	Ryan White Part A County Representative
4:15-4:30	Wrap Up Day One	Brad Barnes, Chair PSRA

Microsoft Teams meeting: Click here to join the meeting Meeting ID: 293 961 648 090; Passcode: dvw2zX; Download Teams | Join on the web Or call in (audio only) +1 561-437-3349,,75119019#

CONTACT PLANNING COUNCIL SUPPORT STAFF
BROWARD REGIONAL HEALTH PLANNING COUNCIL (BRHPC)
954-561-9685 EXT 1244; HIVPC@BRHPC.ORG

BROWARD RW PART A EMA

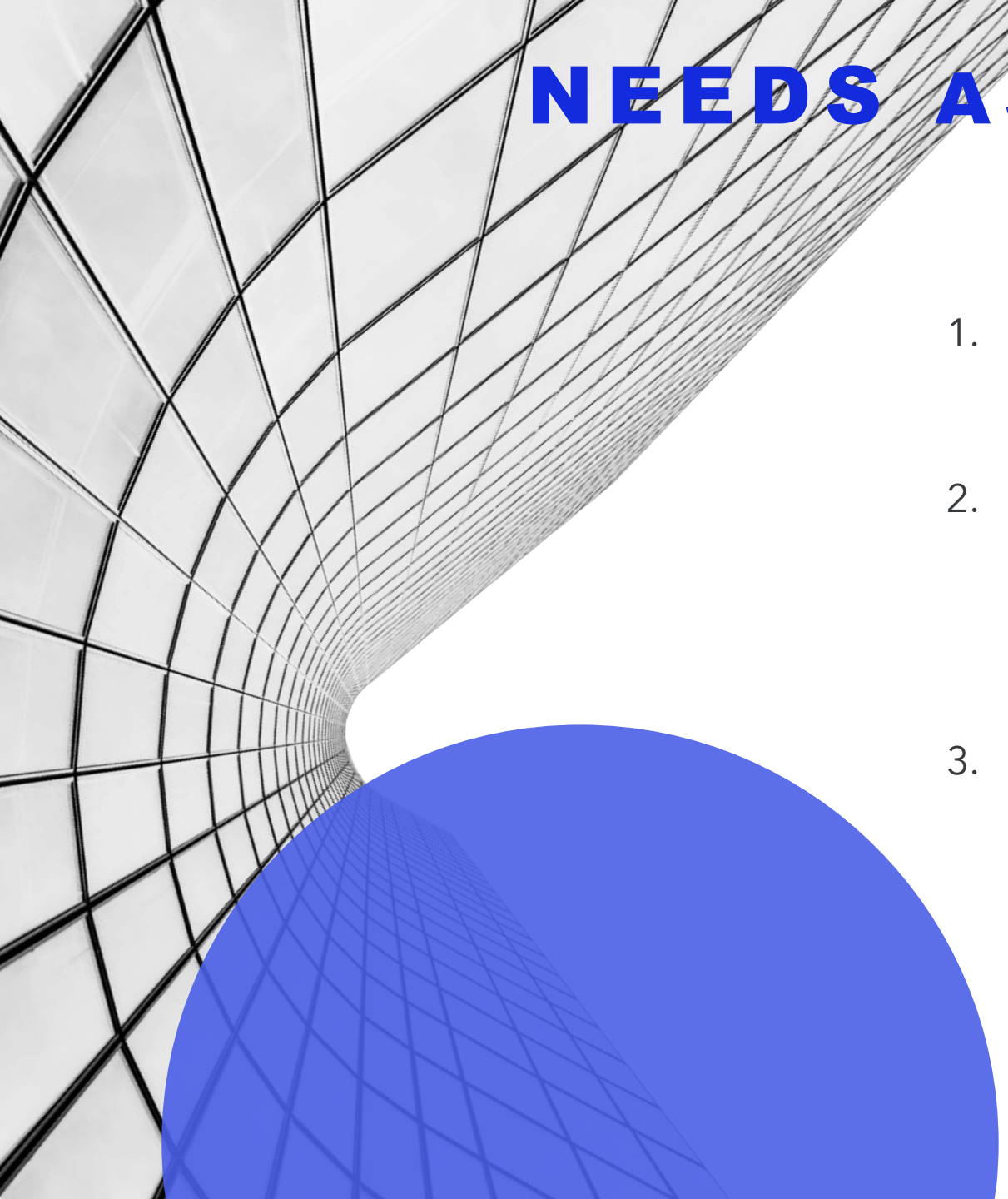
NEEDS ASSESSMENT 2023-24 OVERVIEW



PRESENTERS

DEBBIE CESTARO-SEIFER, MS, RN

JEFFREY BEAL, MD, AAHIVS



NEEDS ASSESSMENT 2023-24 PRIMARY GOALS

1. CONDUCT SHORT INTERVIEWS AND ATTEND LISTENING SESSIONS WITH CLIENTS WHO USE BROWARD RW PART A SERVICES
2. DIALOG WITH/SURVEY MEDICAL CASE MANAGERS, (MSMS), PEER COUNSELORS AND PRESCRIPTIVE PROVIDERS TO BETTER UNDERSTAND THE BARRIERS TO CLIENTS BECOMING UNDETECTABLE/VIRALLY SUPPRESSED
3. DISCUSS 2022-23 DATA THAT PROVIDES INFORMATION ON THE NEEDS OF INDIVIDUALS WHO ARE NOT VIRALLY SUPPRESSED/UNDETECTABLE IN THE BROWARD RW PART A EMA

HIGHLIGHTS FROM FOUR CLIENT INTERVIEWS

- Create "Central Access Line" to define client caller needs and designate best resources for meeting the needs
- CIED and MCM should verify that referrals made are completed
- MCMs have too many patients to see and too much documentation which takes away from consumer experience
- MCMs tend to repeatedly refer to one facility and do not offer Broward Community option for the service
- MCM/practitioners need client-focused hours of operation and locations near priority populations

HIGHLIGHTS FROM FOUR CLIENT INTERVIEWS – CONT.

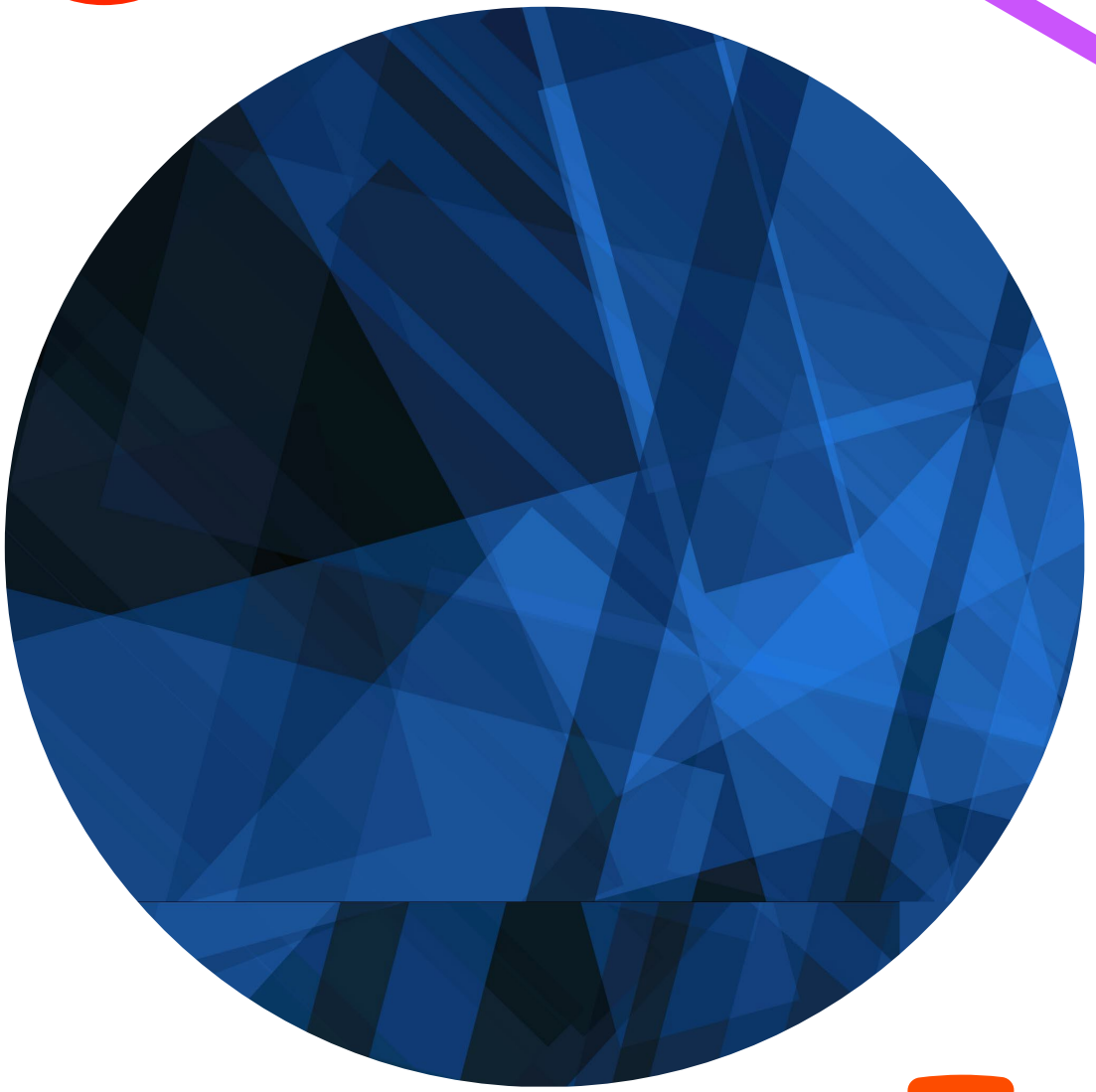
- MCMs do not have standardized new-client patient education protocols
- MCM turnover is too high
- Specialized Mental Health/Substance Abuse (MH/SA) and recovery MCMs are needed
- Inconsistent community standard of care for OB/GYN and trans care
- Test and Treat is not “immediate access to care”
- Front desk staff are not welcoming and can be disrespectful/abusive
- Agencies/clinics treat Blacks with less care, care time, and respect

HIGHLIGHTS FROM CLIENT INTERVIEWS – CONT.

- CIED clients are required to present documentation materials at Point of Care (POC); need one statewide certification of RW eligibility
- Insurance cost/copay issues are not managed by one entity
- Part A Program decisions are made in silos
- More peers needed across the entire Broward Part A EMA
- Formalized research is needed as to learn why clients fall out of care or have extended care gaps
- Clients returning to care need to be expedited with less wait time

HIGHLIGHTS FROM CONSUMER LISTENING SESSION HELD ON APRIL 24, 2024

- Accessing services is “strenuous” and clients face barriers in getting assistance to navigate the barriers
- Clients feel that RW agencies do not seem mindful that the RW Part A funding is “for client services and not for the agencies”
- One client reported feeling “micromanaged” by two Broward RW Part A service agencies
- Several clients felt that they were “not being heard” by their medical providers when they reported symptoms that need further workup/ testing
- One client felt that an agency blamed him when he did not receive his needed services, which was due to a “systems” problem



DON'T LET MY EPITAPH READ, "HE DIED OF RED TAPE."

GOGER GAIL LYON

1948-1984

HIGHLIGHTS FROM CONSUMER LISTENING SESSION HELD ON APRIL 24, 2024-CONT.

- One consumer reported that his RW service bills were not paid in a timely manner which caused “debt” issues for him and now RW agencies refuse to provide him services unless he presents a personal credit card for payment
- Three consumers stated that they all had communication challenges in accessing needed services, including MCM and medical provider services; they reported a lack of empathy and client-blaming for systems and process related issues; they strongly recommend that clients “need to be empowered to advocate for their needs”

HIGHLIGHTS FROM CONSUMER LISTENING SESSION HELD ON APRIL 24, 2024-CONT.

Consumers also reported that practitioners are concerned about viral suppression, but “anything beyond that seems to be insignificant;” these consumers request more focus on the complications of HIV so that people with HIV (PWH) can feel better, do better and have a better quality of life (e.g.: metabolic, neurologic and cardiac health conditions)

HIGHLIGHTS FROM CONSUMER LISTENING SESSION HELD ON APRIL 24, 2024-CONT.

Health Literacy Needs

Consumers request more information about the HIV services provided and specific information on how to access the services to better address the learning and health literacy needs of all clients in the Broward RW Part A.

"In some cases, it takes 10 years for a client to understand" their HIV health related needs and how to obtain RW services. The consumer stated that "this is unacceptable" and asks that something be done about it. The consumer also says that clients sign agency papers and have no idea what they are signing. She alluded to that fact that clients are "unengaged" in the process of receiving HIV and other health promoting services. She advocates for agency service providers to spend more time with clients to increase their health literacy.

HIGHLIGHTS FROM CONSUMER LISTENING SESSION HELD ON APRIL 24, 2024-CONT.

Support Group Needs

- One consumer believes there is a lack of mental health services and support groups in the RW Part A EMA. She reported negative experiences when she tried to talk to her family and friends about having HIV. She attributed the negative experiences to prejudice and ignorance. "People think HIV is a gay disease and don't think that heterosexual women and men can have HIV." She also added that Black men face very difficult challenges in managing their mental health and coping with the stigma of having HIV. This consumer stated that she and her now deceased husband attended a support group, but it stopped during the pandemic and was never restarted.
- In the Zoom Chat attendees stated that more mental health providers who speak Haitian Creole are needed in Broward

HIGHLIGHTS FROM CONSUMER LISTENING SESSION HELD ON APRIL 24, 2024-CONT.

Loneliness and Aging with HIV

One consumer shared that she spent a recent holiday alone and did not reach out to her church for fear of receiving judgement related to her HIV-positive status. She shared with everyone on the listening session that "after the listening session" and other events like these, many consumers "go home alone and without support."

HIGHLIGHTS FROM CONSUMER LISTENING SESSION HELD ON APRIL 24, 2024-CONT.

Homelessness, Unstable Housing and Substance Use

- Positive remarks were made by one consumer regarding the stabilizing services they received from Broward House and Poverello
- One consumer recounted their experiences when an agency did not pay their RW Part A-supported rent and the time he had to leave a home because of mold
- Another consumer recounted when she was evicted from her home even when the supporting agency paid the rent; after she left the home, she had credit issues and sought RW legal help but did not receive a call back in a timely manner; eventually she did receive legal support from Coast to Coast

HIGHLIGHTS FROM CONSUMER LISTENING SESSION HELD ON APRIL 24, 2024-CONT.

Homelessness, Unstable Housing and Substance Use

- Consumers stated that day programs for the homeless are very helpful, but when the day programs close, people with HIV and behavioral health issues are "back on the streets"
- Many clients can't find full-time work or go back to school and need vocational support to assist them
- Bug infestations challenged one client receiving HOPWA-supported housing during the pandemic; she had to leave all her possessions behind while she was also dealing with a substance use disorder

HIGHLIGHTS FROM MCM(DCM) INTERVIEWS/SURVEY

- Average MCM caseload is 30-50 clients with FTE range of 0.5-1.0
- Frustrated with lack of housing options – often inadequate/unsafe; high need for housing appropriate for women and trans youth
- Falling out of care associated with inability to reach client (no phone or inadequate minutes)
- Frustrated with PE MCM acuity level tool/scale
- Have the capacity to see more clients

HIGHLIGHTS FROM PEER COUNSELORS

- Not using protocols to receive new clients and orient the clients to navigating RW Part A EMA and Community Services
- Not using established best practices to assist clients in navigating the journey to viral suppression and undetectable status (e.g.: Steps to Care)
- Not addressing client perceived and experienced stigma to empower and build client capacity to adhere to HIV medication as prescribed
- Need more time with MCMs and other support staff to work on a coordinated client care plan to support person-centered care
- Have the desire to lead client support groups in collaboration with MCMs

HIGHLIGHTS FROM PRESCRIPTIVE MEDICAL PROVIDERS

Preliminary Data From 11/40 Surveys (Spring 2024)

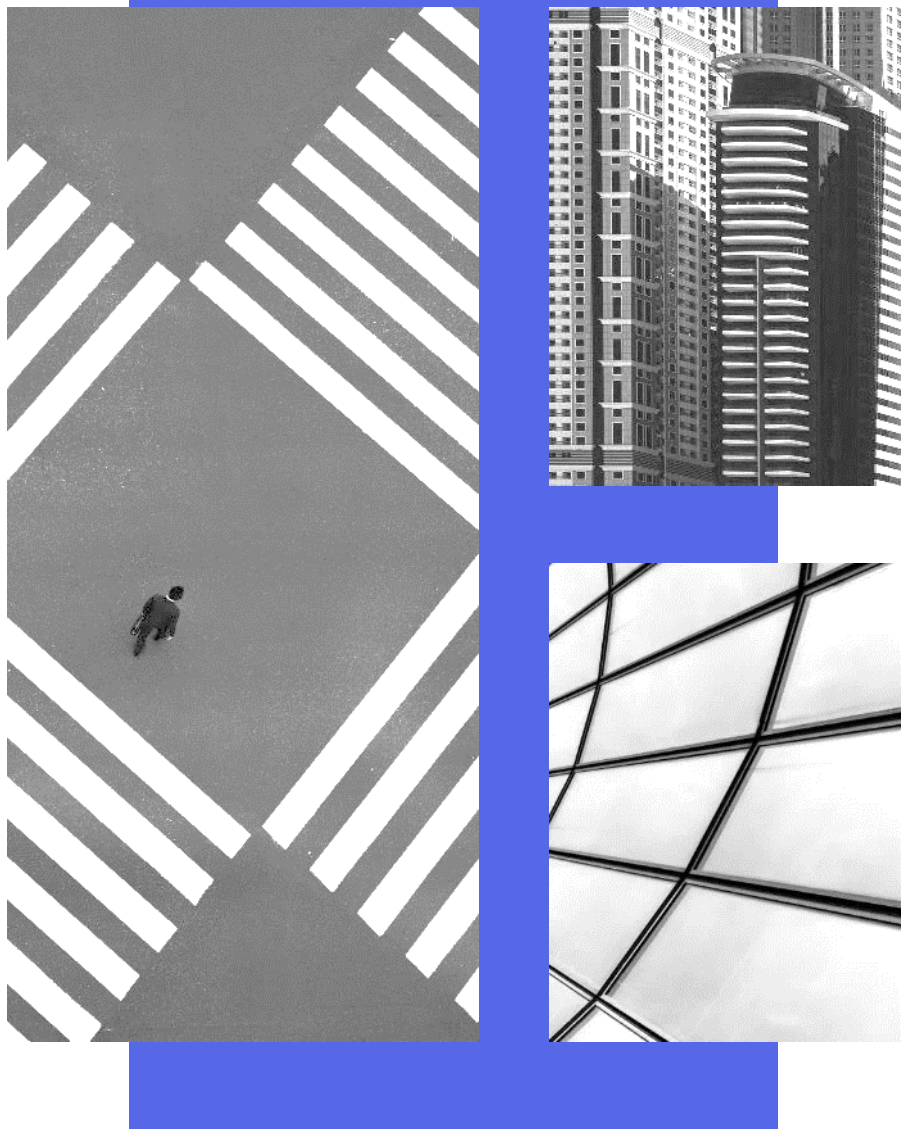
Providers Value:

- #1MCM, #2 Mental Health, #3 CIED as critical support services enhancing patient ability to achieve Undetectable (UD) Viral Load (VL) status
- All practitioners provide telehealth services with 55% stating it helps maintain patients in care and is of value in helping patients achieve UD VL status
- 50% response that peers help improve health outcomes for their patients; 90% welcome/would welcome peers attending medical visits

2024-25 AREAS OF FOCUS

PROVIDE DATA-DRIVEN CARE

- Analyze data in more detail to identify innovative opportunities to increase the number of clients who achieve sustainable viral suppression/undetectable status
- Set a goal for Medical Providers, MCMs and Peers to participate in Network meetings/surveys to partner on strategies to focus on unaddressed patient needs to assist patients to achieve sustainable VL suppressions/UD status
- Establish a culture of quality improvement focused on data that identify disparities needing to be addressed through community partnerships and collaborative goal-oriented action plans




THANK YOU!

BROWARD COUNTY
FLORIDA

Broward County Ryan White Part A Services Overview

Presented by RWA Recipient Office

Ryan White Program Services

Currently Provided Service = •

Ryan White Services	Part A	Part B	Part C	EHE
Core Medical Services				
AIDS Drug Assistance Program Treatments (ADAP)		•		
AIDS Pharmaceutical Assistance (Local)	•			
Early Intervention Services			•	
Health Insurance Premium & Cost-Sharing	•	•		
Home and Community-Based Health		•		
Home Health Care				
Hospice Services				
Medical Case Management	•			•
Medical Nutrition Therapy	•	•		
Mental Health Services	•			
Oral Health Care	•			
Outpatient Ambulatory Health Services	•			
Substance Abuse Services (Outpatient)	•			
Support Services				
Child Care Services				
Emergency Financial Assistance	•	•		
Food Bank	•	•		•
Health Education				
Housing Services				•
Linguistic Services				
Medical Transportation		•		•
Non – Medical Case Management	•	•		•
Other Professional Services	•			
Outreach Services				
Psychosocial Support Services				
Referral for Health Care / Supportive Services				
Rehabilitation Services				
Respite Care				
Substance Abuse Services (Residential)		•		

Core Medical Services

PART 1

Core Medical Services List

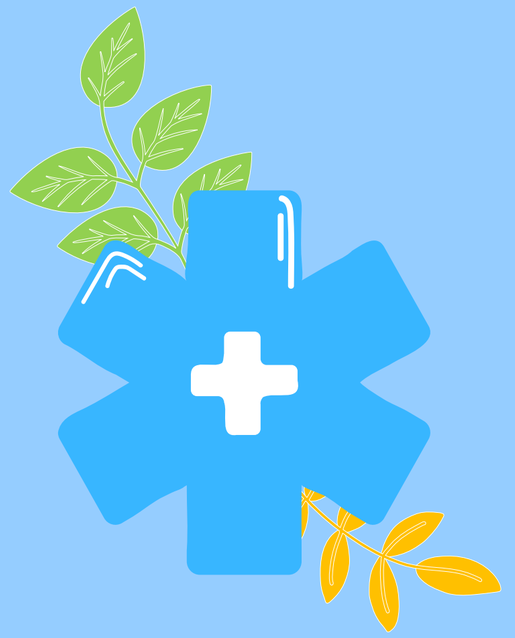
1. AIDS Drug Assistance Program Treatments (ADAP)
2. AIDS Pharmaceutical Assistance (Local)
3. Early Intervention Services (EIS)
4. Health Insurance Premium & Cost-Sharing Assistance (HICP)
5. Home & Community-Based Health Services
6. Home Health Care
7. Hospice Services
8. Medical Case Management
9.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

Support Services

PART 2

Support Services

1. Child Care Services
2. Emergency Financial Assistance (EFA)
3. Food Bank
4. Health Education
5. Housing Services
6. Linguistic Services
7. Medical Transportation
8. Non – Medical Case Management Services
9. Other Professional Services
10. Outreach Services
11. Psychosocial Support Services
12. Referral for Health Care & Support Services
13. Rehabilitation Services
14. Respite Services
15. Substance Abuse Services (Residential)

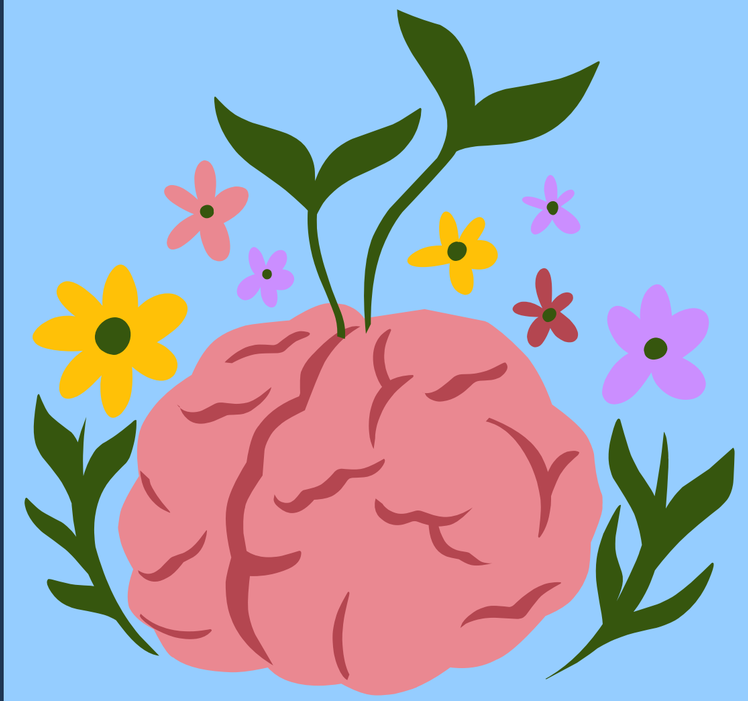


References

1. Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds Policy Clarification Notice (PCN) #16-02 (Revised 10/22/18). Available at: https://hab.hrsa.gov/sites/default/files/hab/program-grants-management/ServiceCategoryPCN_16-02Final.pdf.

2. Frequently Asked Questions for Policy Clarification Notice 16-02. Available at: https://hab.hrsa.gov/sites/default/files/hab/Global/faq_service_definitions_pcn_final.pdf

3. Broward County FL Dept of Health, Ryan White Part B Report to the HIV Health Services Planning Council.



Questions?

City of Ft. Lauderdale,
Housing & Community Development (HCD) Division

Housing Opportunities for Persons with AIDS (HOPWA) Presentation

June 20th,2024 PSRA Meeting

PRESENTED BY:
CITY OF FORT LAUDERDALE, HCD
AND
SERVICE PROVIDERS

The HOPWA Program Overview

Federally: The Housing Opportunities for Persons with AIDS (HOPWA) Program is administered by the Office of HIV/AIDS and the Office of Community Planning and Development (CPD) of the United States Department of Housing and Urban Development (HUD). The HOPWA program funds a wide range of housing assistance activities in order to provide a variety of housing options that meet the needs of Persons Living with HIV/AIDS (PLWAS).

Local: In Broward County, the program is administered by the City of Fort Lauderdale (COFL), the largest City in the Eligible Metropolitan Statistical Area (EMSA). The COFL has administered the HOPWA formula grant since the 1990's. The City is the sole recipient of HOPWA funds in Broward County and services must be provided countywide.

Client Eligibility

Be HIV positive	• Lab results- Western Blot/Viral Load
Income must fall within Federal Annual Income Guidelines	• Income of ***ALL*** applicable household members is included in the application
Complete a truthful application	• Provide ***ALL*** supporting documentation
Lawfully Reside in the US	• Head of Household must complete Declaration 214 Document and provide supporting documentation
Be a current Broward County Resident	• Must have lived in Broward county for at least 6 continuous months before receiving housing assistance

Program Budget

- **FY2023 Budget:**
  - Grant Award for 2023-2024 **$8,050,351.00**

- **Current Sub-recipients**
  - Broward House, Inc
  - Broward Regional Health Planning Council, Inc
  - Care Resource Community Health Centers, Inc
  - Mount Olive Development Corporation
  - Sunshine Social Services, Inc
  - Legal Aid Service of Broward County.

- **FY2024 Budget:**
  - Grant Award for 2024-2025 **$8,063,888.00**
  - **The award amount is from online posting. City is awaiting HUD Notification letter.**
- The program is solely fund by the department of Housing and Urban Development (HUD) annually to the City.

Demographics

Number of client's FY 2023: 1833

- **523** received financial subsidy(TBRV, PBR, STRMU, TEHV and PHP
- **1833** received housing case management services and were connected to other resources based on need

Ethnicity		HOPWA Eligible Individuals		All Other Beneficiaries	
		[A] Race	[B] Ethnicity	[C] Race	[D] Ethnicity
1	Asian	2	0	4	0
2	Asian & White	1	0	0	16
3	Black/African American	1201	22	872	4
4	Black/African American & White	4	3	9	0
5	American Indian/Alaskan Native	1	0	5	0
6	American Indian/Alaskan Native & Black/African American	1	0	1	0
7	American Indian/Alaskan Native & White	2	1	0	0
8	Native Hawaiian/Other Pacific Islander	2	0	3	0
9	Other Multi-Racial	14	0	4	1
10	White	605	224	119	74
11	**Totals (Sum of Rows 1-10)**	1833	250	1017	95

HOPWA Eligible Individuals

Age Group		A. Male	B. Female	C. Transgender Female	D. Transgender Male	E. TOTAL (Sum of Columns A-D)
1	Under 18	0	1	0	0	1
2	18 to 30 years	75	48	10	0	133
3	31 to 50 years	409	318	11	0	738
4	51 years and Older	617	339	5	0	961
5	**Subtotal (Sum of Rows 1-4)**	1101	706	26	0	1833

HOPWA Intensive Housing Case Management

SunServe.org

954-764-5150

Housing Case Management (HCM) Program

Housing Case Management is a non-housing subsidy.	Providers are responsible for developing and implementing individualized comprehensive housing stability plans for the clients.	Intensive Case Management for clients who do not receive housing subsidies.
Assist clients in applying for STRMU and PHP housing assistance.	Assist clients in accessing healthcare services.	Link clients to Legal Aid Services of Broward County.
Assist clients who are transitioning to self-sufficiency.	Link clients with mental health providers at low or no cost.	Link clients with substance use providers.

Intensive Housing Case Management

- At SunServe, the Housing Case Management team meets clients at their current stage, striving to improve their circumstances. SunServe personnel consistently demonstrate kindness, acceptance, responsiveness, and reliability.
- Housing Case Managers reassure clients that an HIV diagnosis isn't a life sentence, emphasizing that with appropriate support and advocacy, clients can achieve self-sufficiency and flourish despite the challenges.

Intensive Housing Case Management

Barriers: Continuous rent increases despite stagnant incomes. Clients with previous evictions, criminal records, disabilities, and fixed incomes face challenges in obtaining affordable housing opportunities.

Successes: Housing Case Managers (HCM) assist clients in applying for bus passes, energy assistance, food stamps, unemployment benefits, rental assistance, move-in assistance, and furniture vouchers. HCMs also assist clients in creating resumes and searching for employment resources. Link clients with mental health, medical, and substance use services

Broward Regional Health Planning Council

BRHPC

HEALTH & HUMAN SERVICE INNOVATIONS

www.brhpc.org

Housing Opportunities For Persons with HIV/AIDS (HOPWA)
HIVPC/PSRA MEETING 6-20-2024

Presented By: Sharon Alveranga-Jones, Program Director

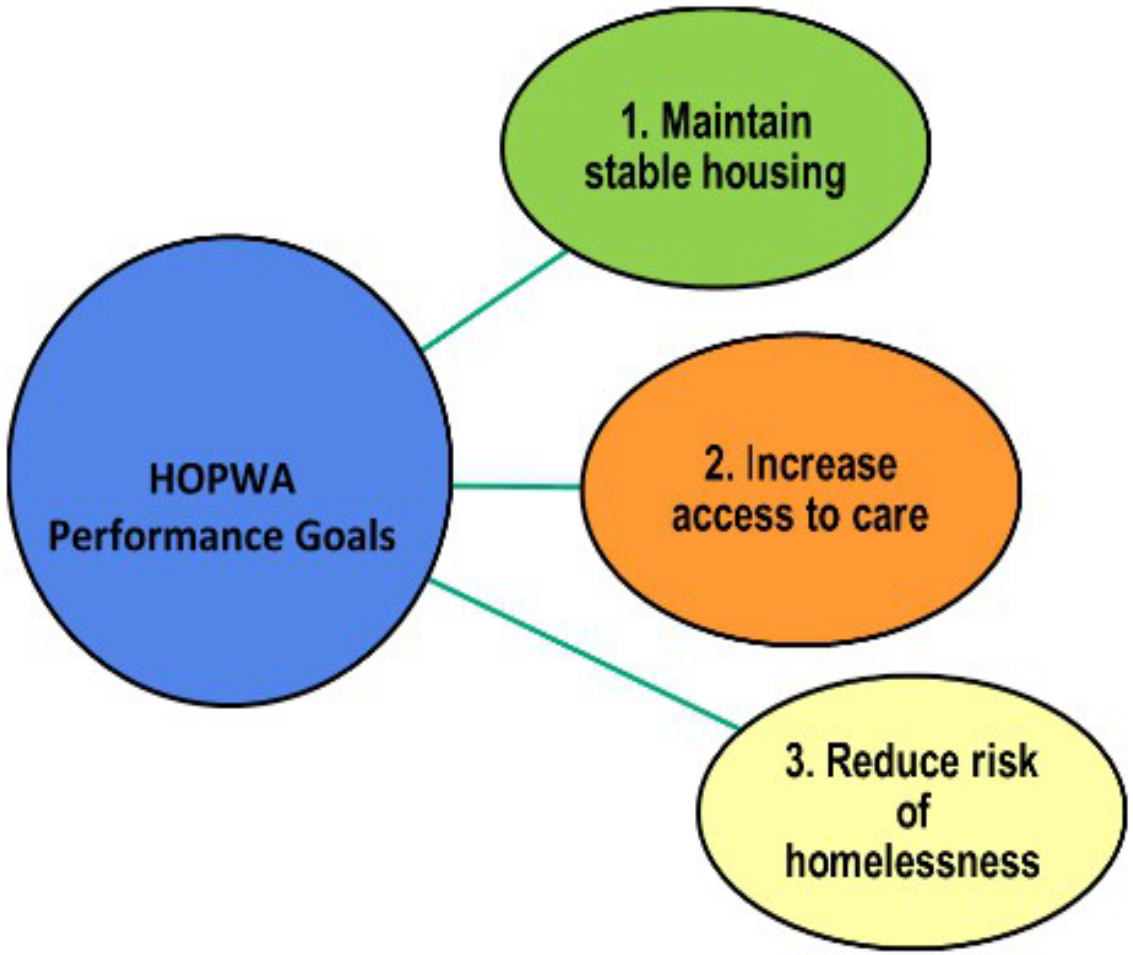
Broward Regional Health Planning Council

BRHPC

HEALTH & HUMAN SERVICE INNOVATIONS

www.brhpc.org

HOPWA Performance Goals



SHORT-TERM RENT, MORTGAGE, & UTILITY ASSISTANCE [STRUM]

- Short Term Rent Mortgage and Utility [STRMU] assistance is time-limited housing assistance designed to prevent homelessness and increase housing stability. Assistance may be provided for a period of up to 12 weeks per contract year
- STRMU assistance: Rent, Mortgage, and Utility

PERMANENT HOUSING ASSISTANCE [PHP]

- Permanent Housing Assistance [PHP] assists eligible persons establish a new residence where on-going occupancy is expected to continue.
- PHP assistance: Move In [first/last] rent and Utility Deposit [light/water/gas]

TENANT BASED RENTAL VOUCHER [TBRV]

- Provide continued support to lower-income HIV/AIDS persons or families for rental assistance to live in private, independent apartment units
- The household assisted will be required to pay no more than 10% of its gross income or 30% of adjusted income for rent and utilities, whichever is greater.
- The City opens the TBRV waitlist on funding availability. The City will open a waitlist to serve an additional 25 to 30 applicants for the fiscal year 2024/2025

NEEDS/GAPS/ BARRIERS TO HOUSING

AREAS OF CONCERNS

NEEDS

- Financial Literacy Training
- Affordable housing
- Better paying jobs

GAPS

- Shortage of affordable and available rental homes for low-income clients.
- Cost burden to client that is paying more than 30% of income for rent.
- Insufficient Supportive Housing
- Affordable home ownership

AREAS OF CONCERNS

BARRIERS

- No rental history
- Poor rental history (i.e., prior evictions, rent/utility arrears)
- Insufficient savings
- Poor credit history

BARRIERS

- Sporadic employment history
- No high school diploma/GED
- Recent or current abuse and/or battering (client fleeing domestic violence housing situation)
- Criminal background

Contact Information

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Broward Regional Health Planning Council

BRHPC

HEALTH & HUMAN SERVICE INNOVATIONS

www.brhpc.org

Broward House

AHF AFFILIATE

Browardhouse.org
Info@browardhouse.org
954-568-7373 ext 7373

HOPWA Programs

Facility-Based Transitional Housing

Facility-Based Transitional Housing

Facility Based Rental (FBH/FAC)

- FBH is a multi-person, multiunit residence designed as a residential alternative to institutional care, similar to an Assisted Living Facility (ALF), to prevent or delay the need for such care and provide a transitional setting with appropriate supportive services.
- 72 Beds divided between HOPWA, Ryan White EHE, HUD SPNS, & HIP Medical Respite. Serves over 220 annually.
- Most of the beds are allocated to HOPWA: 44+ Average length of stay = 6 months
- ALF is open, and there are currently 27 HOPWA residents, 3 HIP, & a waitlist; assessing and filling beds rapidly
- Most HOPWA residents are dually enrolled in an on-site 6-month treatment program for substance use disorder
- Only HIV-specific SUD treatment in South Florida.
- Leverage Ryan White and other funding sources to provide comprehensive wraparound services
- 100% on all HOPWA Performance Indicators
- Barriers: Discharge planning on fixed income (SSI/SSDI).
- Barriers 2: Trauma response to discharge
- Barrier 3: Safe and inclusive recovery housing (1/2 way).
- Recent Success: HUD SPNS Step-Up house


“It’s just a step away and keeps my mind active!”

Project-based Housing

Project Based Rental (PBR)

- Broward House operates 74 scattered PBR units, and Mount Olive Development Corp (MODCO) operates 21 PBR units for low-income HIV/AIDS clients. Clients will be required to pay either 10% of gross income or 30% of adjusted income for rent and utilities, whichever is greater
- Currently, 65 Clients at Broward House
- Typical length of stay is two years
- Periodic rent increases to prepare clients for paying rent to a private landlord post-discharge
- Barriers: Discharge planning on fixed income (SSI/SSDI).
- Barriers: Four Broward House units are currently vacant due to needed repairs. Moreover, some buildings have reached their 40-year mark and require subsequent inspection, incurring additional costs for the agency
- Success: Leveraged SAMHSA, HUD SPNS, and RW funding to increase social support (counseling, peer support, and life skills training/classes).
- Success: Several clients volunteered to join the physical wellness classes offered through CDBG. Families with kids playing together. Play is essential to family unit cohesion.

Broward House

Tenant-Based Rental ASSISTANCE PROGRAM

What is the Tenant-Based Rental Assistance Program?

IThe purpose of this program is to make safe and sanitary housing affordable in the private rental market for low-income households to improve housing stability and health

Tenant Expectation

- Pay 30% of their adjusted monthly income directly to the landlord, the Broward House will cover the remaining difference
- Follow the rules and regulations of the program and lease
- Be a respectful tenant and work with the case manager to maintain a healthy home

Broward House Services

- Ensure that the voucher payment is made in a timely manner to the Landlord *(ACH Payments available and preferred)*
- Provide services to the tenant to support ability ability to maintain housing and life skills
- Assist with the leasing and inspection process
- Serve as a liaison between the tenant and landlord on an as needed basis

Landlord Expectation

Broward House

- Provide safe and sanitary housing to a tenant at agreed-upon rent.
- Complete the Owner Packet and provide applicable documentation
- Provide Proof of Ownership of Property & Proof of Property Insurance
- Pass a Housing Quality Standard (HQS) Inspection
- Provide a signed lease by Landlord and Tenant

Allowable Monthly Rent Rates

- Rent Rates are determined by Rent Reasonableness calculations based on program guidelines based on location, size, type, age of the unit, included amenities. Broward House does not determine rent amounts
- Current rental rates (February 2023) allow for vouchers up to, but not to exceed

Single Room Occupancy: $845.00
Efficiency: $ 1127.00
One Bedroom: $1240.00
Two Bedroom: $1556.00
Other size unit rates are available

Want to Know More?

Please contact our
Housing Department for more information:

Housing@BrowardHouse.org | Browardhouse.org
954-568-7373 x 3232 | 420 SE 18th St Fort Lauderdale, FL 33316

Tenant-based Rental Assistance

Tenant Based Rental Voucher (TBRV)

- The TBRV program provides continued support to lower-income HIV/AIDS persons or families for rental assistance to live in private, independent apartment units. The household assisted will be required to pay no more than 10% of its gross income or 30% of adjusted income for rent and utilities, whichever is greater.
- Vouchers managed by Broward House and Broward Regional Health Planning Council
- 87 clients served at Broward House
- Provide comprehensive housing navigation and case management
- Work with landlords in the community to explain the program, assuage fears, and place clients
- Leverage Ryan White and other funding to provide comprehensive wraparound support, including mental and behavioral health counseling, life skills, budgeting, and financial management
- Barrier: Clients with evictions, bad credit, or criminal records face significant challenges finding an apartment.
- Success: Added five new landlords to the agency vendor list for voucher clients.
- Success: Long-term Broward House client purchased her first home!

Purchased a Home

- With Broward House since 2012
- Grew up in foster care system
- Started working on credit with their housing case manager in 2020
- First-time homeowner

Legal Aid - HOPWA

JUNE 2024

HOPWA – Legal Aid Service of Broward County

LEGAL AID SERVICE OF BROWARD COUNTY IS PROVIDING SERVICES TO THE PLWHA COMMUNITY UNDER THE HOPWA GRANT, CATEGORY 2: PROGRAM NON HOUSING SUBSIDY LEGAL SERVICES.

FOR THE PAST 12 YEARS LEGAL AID HAS WORKED CLOSELY WITH THE CITY OF FORT LAUDERDALE, CASE MANAGEMENT AGENCIES (CARE RESOURCE, SUNSERVE), AND WITH BROWARD REGIONAL HEALTH PLANNING COUNCIL -BRHPC, WITH THE COMMON GOALS OF HELPING THE PLWHA COMMUNITY TO ACHIEVE HOUSING STABILITY, KEEPING THEM INTO THE PATH OF SELF-SUFFICIENCY, AND AVOIDING HOMELESSNESS.

OUR WORK

OUR WORK WITH THE HOUSING CASE MANAGERS IS DAILY, AND THIS RELATIONSHIP HELPS TO BETTER DEFINE THE SPECIFIC COMPREHENSIVE HOUSING PLAN FOR EACH CLIENT. OUR COLLABORATION HAS CREATED A STRONG BOND. THIS COLLABORATION HAS RESULTED IN AN IMPROVEMENT OF THE SERVICES PROVIDED UNDER THE GRANT FOR PERMANENT HOUSING PLACEMENT-PHP, SHORT TERM RENT, MORTGAGE, AND UTILITIES – STRMU, AND TEMPORARY EMERGENCY HOTEL VOUCHER-TEHV. THIS BECAUSE WORKING TOGETHER WITH THE HCM AGENCIES HELPS TO DETERMINE THE BEST POSSIBLE SCENARIO AS TO USING THE PROGRAM FUNDS IN ORDER TO ASSIST THE MEMBERS OF THE PLWHA COMMUNITY WITH THEIR HOUSING NEEDS.

NON-HOUSING SUPPORT SERVICES –LEGAL AID

LEGAL AID IS A NON-HOUSING HOPWA SERVICE PROVIDER.

LEGAL AID PROVIDES LEGAL ADVICE AND/OR ADVOCATES ON BEHALF OF THE CLIENT FOR:

FORECLOSURE

EVICTION

3-DAY NOTICE

REVIEW CLIENT LEASE PRIOR TO EXECUTION.

LANDLORD TENANT ISSUES ON EXECUTED CONTRACTS.

Legal Services provided – Performance Indicators

- Sixty percent (60%) of clients who are represented will avoid eviction and/or negotiate a lease termination, or obtain additional time to relocate to alternative housing.
- Sixty percent (60%) of homeowners facing foreclosure who are represented will avoid foreclosure, negotiate a settlement or obtain additional time to relocate to alternative housing.
- Sixty percent (60%) of eligible clients will have their Landlord/Tenant disputes or disagreements on executed (signed) leases resolved.
- Sixty percent (60%) of eligible clients will have resolution on unit habitability issues.

Questions?

Discussion

"THIS PROGRAM DOES NOT DISCRIMINATE BASED ON RACE, COLOR, RELIGION, GENDER (INCLUDING IDENTITY OR EXPRESSION), MARITAL STATUS, SEXUAL ORIENTATION, NATIONAL ORIGIN, AGE, DISABILITY OR ANY OTHER PROTECTED CLASSIFICATION AS DEFINED BY APPLICABLE LAW".

Florida Department of Health in Broward County

Ryan White Funders Presentation

Ryan White Part B

June 2024

Ryan White Funders Presentation

Serena R. Cook, BAS-SM, FCCM
Ryan White Part B Program Manager
Florida Department of Health in Broward County

Ryan White Funders Presentation

Ryan White Part B (RWPB):

- Federally funded initiative that provides support services to those living with HIV infection.
- Program helps those who lack the financial means or appropriate health insurance to manage their HIV infection.
- To be eligible for services covered under the program, person must be HIV positive, resident of Broward County, and income is 400% or lower than federal poverty level.

Ryan White Funders Presentation

Service	Documents
Part B Eligibility	• Photo identification and Social Security card • Proof of HIV status • Utility bill or other document showing address • Three months of pay stubs, W-2 form, 1040 form or letter of support
ADAP and Medication Co-Payment	• Insurance identification card and benefit summary, if applicable • Current prescriptions • Pharmacy information
Home Health and Meals / Nutritional Supplement	• Referral form signed by case manager and plan of care • Current prescriptions signed by doctor

Ryan White Funders Presentation

Fiscal Year 2023-24
Program Budget: $1,161,929
Fully Expended

Fiscal Year 2024-25
Program Budget: Level Funding

Ryan White Funders Presentation

Service Category	Unduplicated Client Count	Units of Service
Emergency Financial Assistance	1,341	6,424
Food Bank/Home-delivered Meals	2	499
Health Insurance Continuation Program	63	127
Home And Community-based Health Services	10	51
Medical Nutritional Therapy	31	1,748
Medical Transportation Services	761	1,588
Non-medical Case Management	5,964	5,964
Substance Abuse Treatment	16	394

Ryan White Funders Presentation

Ryan White Part B Services

- Emergency financial assistance
- Health Insurance Continuation Program
    - Medication co-payment/insurance premium
- Community-based and home health services
- Home-delivered meals
- Nutritional supplements
- Medical transportation services (bus passes/Uber card/gas cards)
- Substance misuse services-detoxification and residential

Ryan White Funders Presentation

Emergency Financial Assistance

Limited one-time or short-term payments capped at $4,000 annually to assist the Ryan White clients with an emergent need. To receive rent and/or utility assistance, lease and/or bill must be in the client's name.

Must have a current Ryan White Notice of Eligibility for the date of service and request.

Essential Utilities:	**Housing:**	**Transportation**	**Medications**
Electricity/Water	**Rent**		

Emergency financial assistance will occur as a direct payment to the agency.

Ryan White Funders Presentation

Health Insurance Continuation Program

Medication Copayment Program provides monthly copayments for FDA-approved formulary medications to insured clients who are ineligible for the AIDS Drugs Assistance Program (ADAP).

- Client must have a current Ryan White Notice of Eligibility.

Service Components

- Clients choose one of the 47 participating pharmacies.
- Clients pick up medications monthly (RWPB-approved formulary).
- After applying co-pay cards, pharmacy bills RWPB for client's out-of-pocket expenses for formulary medications.
- RWPB receives monthly invoices and submits for payments within five business days of receipt.

Insurance Support Program assists with the **Service Components** of:

- Insurance premiums
- Deductibles
- Medical co-payments
- Co-insurance(s)

Ryan White Funders Presentation

Home and Community-Based Services

- Assists client based on a plan of care strategy by client's case manager and physician
- Referral-based line item
- Client must have a current Ryan White Notice of Eligibility.

Service Components

- Home health aide/personal care/homemaker: assists with daily cleaning and bathing as needed
- Wound care nurse: assists client with chronic ulcer care
- Durable medical equipment:
    - Catheters
    - Surgical lubricant, oxygen tanks/refills
    - Shower chairs
    - Diapers and chucks

Ryan White Funders Presentation

Home-Delivered Meals

- Assists homebound clients based on a plan of care by client's case manager and physician
- Referral-based line item
- Client must have a current Ryan White Notice of Eligibility

Service Components

- Home-delivered meals: alternative breakfast, lunch, and dinner
- Microwaveable meals delivered to clients
- Based on the physician and/or dietician's request
- Prescription required
- Tailored to client's dietary needs

Program is designed to assist clients short-term.

Ryan White Funders Presentation

Medical Nutritional Therapy

- Assists clients based on a plan of care from the client's case manager, nutritionist and/or physician
- Referral-based line item
- Client must have a current Ryan White Notice of Eligibility

Service Components

- Nutritional Supplement Shakes: boost caloric intake
- Ensure/generic cases are delivered to the client by Walgreens Pharmacy
    - Based on the physician and/or dietician's request
    - Prescription required
    - Plan of care and/or chart note
    - Client does not have to be homebound

Program is designed to assist clients short-term

Ryan White Funders Presentation

Home and Community-Based Services

- Ryan White Part B issues bus passes to RWPA case management agencies for monthly distribution
- Referral-based line item
- Client must have a current Ryan White Notice of Eligibility

Service Components

- All-day passes: clients with six or fewer appointments in a 30-day period
- 31-day passes: clients who exceed seven medical appointments in a 30-day period
- Clients can receive Uber and gas cards on a case-by-case basis.
- Clients with Medicaid are not eligible to participate in medical transportation services.

Ryan White Funders Presentation

Substance Abuse Services

- Provides detoxification and residential substance treatment services to clients at the Broward Addiction Recovery Center (BARC)
- Client must have a current Ryan White Notice of Eligibility
- Client must be a Broward County resident and be at least 18 years old

Service Components

- Detoxification: medically supervised inpatient detoxification-seven days per episode
- Residential treatment services (RTS): residential substance misuse treatment-30 days per episode
- Additional 30 days of RTS can be requested via the RWPB program manager

Ryan White Funders Presentation

Notable Trends

Contract Year 2023-24

- Massive rent hikes
- Clients reporting to RWPB office with their eviction notices in hand or after eviction
- Increased utility costs
- High no-show rate: clients frequently changing their number and/or phone service disconnected; barrier to follow-up appointments
- Mail order medication program is continuously growing

Ryan White Funders Presentation

Program Updates

Successes

- Reciprocal eligibility
- Eligibility period 366 days
- Remote eligibility access
- Notice of eligibility source document
- Barriers removed: labs/prescription for ADAP
- Implementation of DocuSign
- More insured than uninsured clients
- Exceed statewide viral load suppression goal

Challenges

- Limited funding for demand
- Clients/case management for emergency financial assistance for services prior to late stage or crisis
- Current client contact information

Ryan White Funders Presentation

Partnerships with Ryan White Part A

Collaborations

- Joint Part A and Part B executive committees
- Integrated planning workgroup
- In-service trainings
- Case conferences

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RYAN WHITE FUNDER'S PRESENTATION FOR PSRA

RYAN WHITE PART C

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 6/20/2024

RYAN WHITE PART C PROGRAM OVERVIEW

The Ryan White Part C program provides funding to local community-based organizations to support outpatient ambulatory health services and support services through Early Intervention Service (EIS) program grants. Part C also funds planning grants, which help organizations more effectively deliver HIV care and services through Capacity Development Grants. (HRSA, 2016)

Part C EIS is a component that funds comprehensive healthcare in outpatient settings through early identification and linkage into primary care services for people living with HIV.

Broward Health is and has been the Recipient of Part C funds since 1998. We have 2 medical providers/ different locations, providing primary care to clients living with HIV/AIDS services in 3 locations.

HIVPC
Broward County HIV Health Services Planning Council

PROGRAM BUDGET

Funding Amount: $840,675 ($491,142 MAI Fundings)

SERVICES PROVIDED

Services Provided

- Outpatient Ambulatory Health Services
- Early Intervention Services
  - Health Education / Risk reduction
  - Outreach
  - High Risk targeted HIV Testing
  - Case Management

- **Client Eligibility**
  - 0 to 400% of FPL
  - Broward County Residents

- **Number of Unduplicated clients**
  - 973

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Broward County HIV Health Services Planning Council

DEMOGRAPHICS

Gender

- Male: (57.1%)
- Female: (42.7%)
- Transgender: (0.2%)

Age

Age:

- 54 & older 54.8%
- 34-53 35.9%
- 14-33 9.2%

Race

- Black 83.2%
- White 17.1%
- American Indian 0 .2%
- Asian 0.5%

Ethnicity:

- Hispanic 6.8%
- Non-Hispanic 93.2%

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Broward County HIV Health Services Planning Council

NEEDS, GAPS, BARRIERS TO CARE

- Rental Assistance & Housing
- Food for Homeless Population
- Specialized services for the HIV positive Homeless
- Substance Abuse Residential
- Access to Cellphones/Telephone services for undocumented

.

NOTABLE TRENDS

- Increase of STD infection of Young Adults (18-38)
- Increase of Young Adults(18-38) meeting the federal definition of Homelessness
- Increase of individuals losing SNAP benefits
- Increase in newly diagnosis from ED and Hospital with High Viral loads
- Increase of new Haitian migrants that present with High Viral loads
- Health Literacy
- Limited Substance Abuse Treatments for uninsured

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Broward County HIV Health Services Planning Council

RECOMMENDATIONS
Partnership with Part A

1. **Successes of your program**
   - Test and Treat
   - Partnership with Mobile Health Unit to reconnect
   - Link Homeless individuals into Care

2. **The challenges faced by your program**
   Increasing number of patients with treatment fatigue that practice episodic care.

3. **Resolution challenges/barriers**
   Develop a new service delivery model for homeless individuals that is coordinated with the Homeless system of care.

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Broward County HIV Health Services Planning Council

QUESTIONS?
DISCUSSION

HIVPC
Broward County HIV Health Services Planning Council

RYAN WHITE FUNDER'S PRESENTATION FOR PSRA

RYAN WHITE PART D

CDTC Comprehensive Family AIDS Program (CFAP)

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 [insert date]

RYAN WHITE PART D PROGRAM OVERVIEW

Children's Diagnostic & Treatment Center's Comprehensive Family AIDS Program (CFAP) provides primary medical care, medical care coordination and psychosocial support for women, infants, children, and youth (WICY) who are living with HIV/AIDS and their affected family members.

CFAP has implemented the patient centered medical home model by offering family-centered, comprehensive, care coordination, and culturally and linguistically sensitive medical care and supportive services. This approach provides a one-stop delivery model for HIV positive women, as well as for children and adolescents who are either exposed or infected.

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Broward County HIV Health Services Planning Council

CDTC CFAP PROGRAM BUDGET

Funded primarily by HRSA, Ryan White Part D since 1991

- FY2024- $1,814,131.00
- FY2025- $1,814,131.00
- FY2026- $1,814,131.00

Other Funding Sources including:

- CMS HIV – FY2024- $185,185.00

- TOPWA –FY2024- $170,000.00

CDTC CFAP: SERVICES PROVIDED

- Primary Medical Care, Medical Care Coordination, Family Planning, Behavioral Health Counseling
- Test and Treat Program-servicing WICY population (youth males up through age 24)
- Translation Services, Adherence Counseling, Prenatal Medication counseling
- Women's support groups, Haitian support groups, special events
- Food Pantry (limited supplies for clients only at CDTC)
- Assess to children clothing through our Bee Boutique
- Dental services for children and adolescents
- Nutritional Screening and Therapy
- Access to Clinical Research Trials
- Onsite Pharmacy
- Transportation

CDTC CFAP Client Eligibility

- HIV Positive- woman, infant, child or youth
- Resident of Broward County

How does Part D differ from Part A

- Part A funds medical and support care services for HIV + individuals
- Part D funds also provide medical and support care services, BUT with a focus on women, infants, children, and youth providing medical case management for the infected family members and **as well as** supportive care services for their affected family members.
- Part D funding does not cover HIV+ males over 24

CDTC CFAP Client Population 2023

Total= 616 HIV + clients

Age 0-2	Age 3-12	Age 13-24	Age 25+
Infant- 1 **Exposed- 90** Female - 42 Male – 48	**Children – 7** Female - 7	**Youth - 52** Female – 31 Male - 21	**Women - 556**
Race/Ethnicity Black-77 White-2 Hispanic-8 Biracial-2	**Race/Ethnicity** Black – 6 White - 1	**Race/Ethnicity** *Black – 46* *White – 3* *Hispanic – 2* Pacific Island-1	**Race/Ethnicity** Black – 495 White – 25 Asian – 1 Pacific Island-1
Risk Factor Perinatal-1	**Risk Factor** Perinatal - 7	**Risk Factor** Perinatal – 27 Hetersexual-19 MSM - 6	**Risk Factor** Perinatal – 44 Heterosexual-511 Transfusion- 1

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County HIV Health Services Planning Council

CDTC, Fort Lauderdale, Florida-Part D Program Logic Model- *June 2024 [Bolded inputs and activities are Part D funded (partially or fully)]*

Inputs (we invest: $, staff, expertise, etc.)	Activity/ Process	Outputs	Effects	Impact
➢ Parent-Broward Health ➢ Co-located adult/ pediatric Primary Care & HIV specialty care clinics/providers ➢ PCMH Status of center ➢ On site Peds/adolescent Dental Provider ➢ On site HIV specialty Pharmacist ➢ On site Rapid HIV testing ➢ On site Test & Treat Services ➢ Electronic records ➢ State Peds HIV funding (CMS) ➢ **Ryan White Part D Funding** ➢ **Medical case managers (11) and Client Support workers (3)** ➢ **Licensed MH providers on-site** ➢ **Registered Dietician** ➢ **Telemedicine** ➢ **QI leadership** ➢ **Data coordinator** ➢ **Care Coordination meetings** ➢ **Support Groups (English/Creole)** ➢ **HIV experienced Nursing Staff** ➢ **On site Phlebotomy** ➢ **24/7 access to peds HIV specialist** ➢ **Transportation assistance** ➢ Fundraising ➢ Board of Directors ➢ Consumer Involvement ➢ TOPWA ➢ Ryan White Enrollment on site ➢ Access to Research on site ➢ Transition Program ➢ Food Pantry on site ➢ Family Living Center Food Access to free washer/dryer/internet Access to case managers/peers	Routine Counseling and Rapid Testing Routine Primary Care & HIV care and treatment Routine Primary Pediatric/adolescent Dental Care On-site PAPs **Medical Case management (MCM)** (annual assessments, 6-m action plan) **Mental health and supportive services** **Referrals/ links to on and off-site services** Test and Treat Services	Early detection of positive status with early treatment. Access to high quality evidenced based Primary care and HIV care and treatment in a supportive and safe environment for all.	Increase percentage of women, infants, children and youth living (WICY) with HIV/AIDS with Viral load suppression. Prevention of Secondary Infections, U = U	Improve family well-being & reduce disparities in healthcare outcomes of vulnerable WICY served by this HRSA program employing the outlined inputs and activities with the ultimate impact of Ending the HIV Epidemic (EHE)
	Weekly care coordination with MCM team **Bi-monthly medical care coordination meetings with providers** **Documentation within Electronic medical records- Care-Ware**	Family Centered, Comprehensive, Coordinated, Multi-disciplinary Care		
	Adherence to care support: appointment reminders-electronic & MCM **Transportation assistance- bus cards, gas cards** **Outreach to prevent loss to follow-up- Coordination w/DOH** **Telemedicine**	Improved retention in care		
	Self-management program— **Support groups for women- "You Matter Mondays"** **Support groups for Creole speaking women** **Fit and Fabulous Exercise group** **Women camp- Camp Key- weekend retreat for self-management**	Improved Self-management		
	Health education with providers, nursing—assessment of IPV **Referrals made to harm reduction and treatment programs** **Multiple access points for condoms & contraception**	Increased knowledge and skills to decrease risk behavior and improve disclosure		
	Active QI team **Monthly QI meeting with QI leadership Staff** **Monitoring of at least 3 HIV quality indicators for this program** **Involvement of all staff in some capacity** **Ongoing dissemination of QI work to staff and clients** **Peer educator involvement on QI team**	Data on quality Indicators Identification of new QI needs	A Culture of Continuous Quality Improvement in the Program	
	Enhanced pregnancy case management Access to additional case management through TOPWA – *Baby shower* Access to provider with expertise in management HIV + pregnant women Access to HIV specialty pharmacist for adherence management Collaboration with local OB/GYNs and hospital delivery units Healthy mother/baby program during pregnancy (education/pack n' play) Access to pediatric ID specialist for exposed babies	Creates a supportive environment with all the services needed to ensure that HIV transmission does not occur	Elimination of Mother to Child Transmission of pregnant women in program	
	Transition readiness assessment begins at 12 w/ yearly TRAQ assessments Referral to youth transition program Meeting with adult provider to support transition Case manager works closely with youth to ensure smooth transition **Youth Support Group**	Youth are educated and prepared for transition to adult medical care (13-24yrs).	Successful Transition of adolescent to Adult Care with viral suppression	

External & contextual factors: *Failure to recertify insurance, Food Insecurity, Health Literacy, Homelessness, IPV, Lack of RW Sub-specialists, No psychiatrist , Poverty, Substance use, Transportation, Undocumented, Unemployed and Untreated MH*

CDTC CFAP:
NEEDS, GAPS, BARRIERS TO CARE

- Lack of Behavioral Health services for Creole/Spanish speaking populations
- Lack of Substance Abuse Counseling for Creole/Spanish speaking populations
- Outreach efforts to reengage HIV positive youth (PROACT)
- Residential Substance Abuse Programs
- Lack of Youth involvement
- Lack of affordable housing
- Prenatal care cost
- Transportation

CDTC CFAP Notable Trends

-Increase client requests for emergency financial assistance (utilities, rent, food, and transportation)

-Increase number of clients moving out of the county due to rental increase leading to case closure.

-Increase in number of clients returning to care

-Client utilizing telehealth frequently

CDTC CFAP: NOTABLE TRENDS

Newly diagnosed populations

- Migrating from other countries
- Young/Naïve about HIV
- High Viral Load
- Pregnant

The elderly

- Insurance issues applying for SSI/SSD
- Medicaid transportation
- Decline in Independence
- Comorbidities

Young Adults (18-28)

- Retention in care *(Many Factors)*
- Insurance issues
- Substance abuse
- Employment/Housing issues
- Unplanned pregnancy
- Follow up with eligibility documents

Recently re-engaged in care

- Lack of knowledge of HIV
- Disclosure to partners
- Advanced HIV
- Adherence issues
- Denial

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Broward County HIV Health Services Planning Council

CDTC CFAP Successes

-Fulltime APRN
-Most exposed babies are determined to be HIV negative
-RIC and VL in line or surpass national averages
-Continued support groups and hosting special events
-Continued to provide comprehensive care coordination after decrease in staff
-Multidisciplinary team approach meet twice a month
-Monthly trainings and clinical updates from providers

CDTC CFAP Challenges

-Decreased number of staff

-Decreased funding

-Oral Health Care for Adults

-Increase need for training in HIV/Aging

-Changes in insurances accepted at CDTC

-Increase in clients with high care coordination needs

-Continued difficulties with engaging perinatally/behavioral young adults

RECOMMENDATIONS:
Partnership with Part A

-Housing funds to assist clients with stable housing
-To continue to coordinate with BRHPC
-Need for Psychiatrist
-Transportation

QUESTIONS?

DISCUSSION

HIVPC

Broward County HIV Health Services Planning Council

RYAN WHITE FUNDER'S PRESENTATION FOR PSRA

RYAN WHITE PART F 2023-2024

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 [insert date]

RYAN WHITE PART PROGRAM OVERVIEW

The Community-Based Dental Partnership Program (CBDPP) fund?

The CBDPP funds HIV oral health care and provider education and clinical training, especially those practicing in community-based settings. The CBDPP also increases access to oral health care services for low-income people with HIV.

Funded to eleven dental education programs in the United States

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Broward County HIV Health Services Planning Council

PROGRAM BUDGET

Current funding through 6-30-2024 $239,000 per year

Funding through 6-30-2028

Care Resource serves as our community partner in Broward County. Funds are used to support dental providers, support staff, and supplies for Care Resource.

SERVICES PROVIDED

Please list all the services provided by your program, including:

- Definition of the Services
- Client Eligibility: HIV+ Broward County (No income qualifications)

- 347 unduplicated clients (148 new)
- 201 males
- 148 female
- 18 Transgender Male to Female
- 131 Hispanic or Latino/a
- 235 Non-Hispanic or Latino/a
- 124 White
- 211 African American

SERVICES PROVIDED

- Largest age group 55-64 followed by 35-44,45-54,25-34
- 346 at or below the federal policy level

Services were provided mostly diagnostic, preventive, periodontic, restorative

- All patients receive oral hygiene instructions, tobacco cessations, and nutritional counseling.

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NEEDS, GAPS, BARRIERS TO CARE

NSU-CDM has been a Part F recipient for 15 years and the excellent collaboration with Care Resource has allowed not only an educational setting for our students, but the ability to integrate medical and oral health care in one location.

Need to additional funding. Amount is never increased over initial funding amount.

NOTABLE TRENDS

Trend for increased patients with substance abuse issues

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RECOMMENDATIONS: Partnership with Part A

1). Provides access to care for those unable to access or need supplement their Part A funds or provide uncovered procedures.
2) Increased funding

Part F also funds the AIDS Education and Training Center

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Broward County HIV Health Services Planning Council

QUESTIONS?

DISCUSSION

HIVPC

Broward County HIV Health Services Planning Council

Ending the HIV Epidemic

2024 PSRA Presentation

Ending the HIV Epidemic

Broward | Ryan White Part A

Presentation Highlights

Part 1: Program Introduction

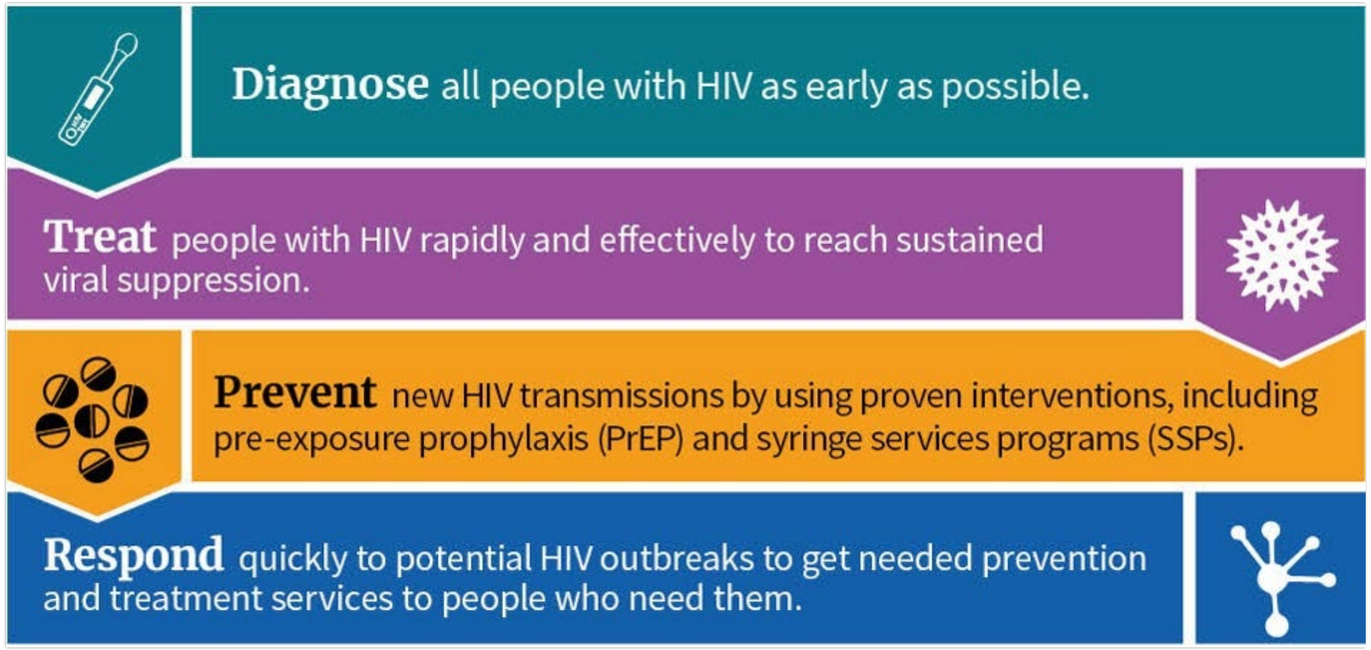
Part 2: New Services

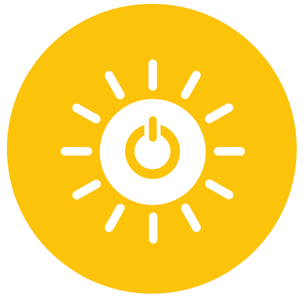
Part 3: Advisory Board

Part 4: Utilization & Spending

Part 5: Future Steps

Introduction





EHE Funded Services

Click on each Service for a detailed description

- Medical Case Management
- Disease Intervention Specialists
- Food Services
- Medical Transportation
- Non-Medical Case Management
- Tele-Adherence & Engagement
- EHE Care Support Services

New Programs

Implemented in FY 2023

PL Cares

Housing

Community Engagement

EHE Advisory Board

Interested in becoming a member?

Email: Wcius@broward.org

1 Mission

Working collaboratively to end the HIV epidemic through data-driven approaches, engaging diverse communities, increasing HIV education and stigma reduction, and supporting innovative holistic systems.

2 Purpose

The Advisory Board provides advice, recommendations, and support to Broward County's EHE program.

3 Background

Established March of 2023
Chair: Michea l Greene
Vice-Chair: Kendra Hayes
Meeting Schedule: Bi- Monthly; Last Tuesday at 2:00 PM
Subcommittees: Faith-Based

Total Clients

EHE Service Utilization
FY2023 & FY2022

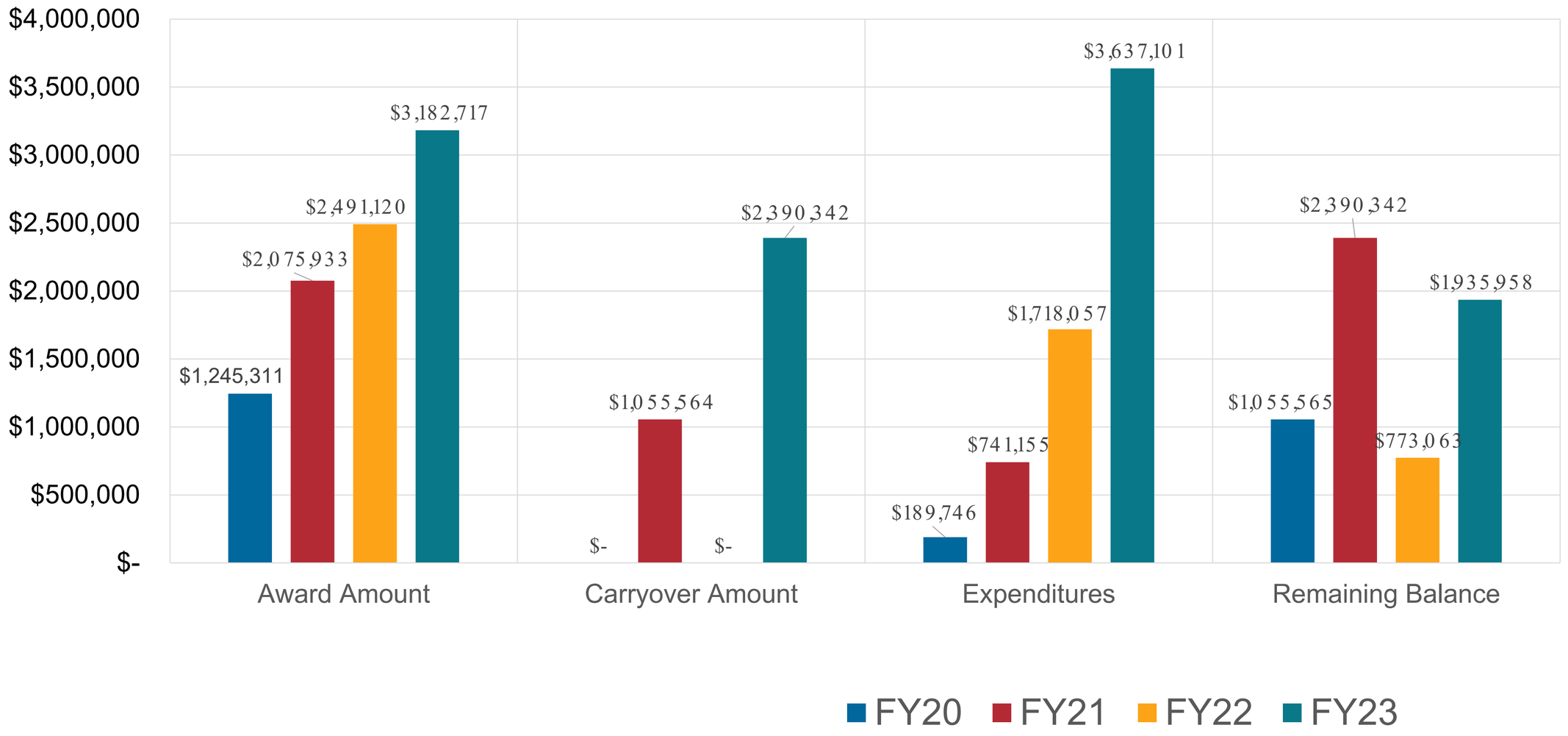
Category	2023	2022
MCM	453	261
Non-MCM	451	213
Food Bank	1,639	1,637
Food Voucher	1,195	0
Medical Transportation	993	772
Housing	0	0

Total Services

EHE Service Utilization
FY2023 & FY2022

Category	2023	2022
MCM	7,217	4,551
Non-MCM	4,505	749
Food Bank	7,236	6,406
Food Voucher	7,068	0
Medical Transportation	12,763	7,050
Housing	0	0

EHE Spending



EHE Cost Per Client FY22-23

Category	Total Cost	Total Clients	Cost Per Client
Medical Case Management	$460,262.96	261	$1,763.46
Medical Transportation	$126,678.37	778	$162.83
Food services	$361,403.06	1,637	$220.77
Non-Medical Case Management	$53,407.00	213	$250.74

Future Steps

Here is a look at some upcoming initiatives within the Broward County EMA coming soon!

01 Update EHE Service Delivery Models

02 Status-neutral HIV marketing material

03 Implement Marketing Campaign

04 Apply for additional EHE funding cycle

Thank You!

Does anyone have questions?

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Ending the HIV Epidemic

Broward | Ryan White Part A

Wrap Up Day One

PSRA Data Presentation
June 20, 2024