



FORT LAUDERDALE/BROWARD EMA
BROWARD HIV HEALTH SERVICES PLANNING COUNCIL
A BOARD OF THE BROWARD COUNTY BOARD OF COMMISSIONERS
200 OAKWOOD LANE, SUITE 100, HOLLYWOOD, FL 33020
(954) 561-9681 • FAX (954) 561-9685

Community Empowerment Committee Meeting

Tuesday, May 5, 2026 – 3:00 PM to 5:00 PM

LOCATION: Broward Regional Health Planning Council

[Click Here to Join the Community Empowerment Committee Meeting](#)

Meeting ID:212 609 793 274 8

Passcode:VG2u6Tk9

This meeting is audio and video recorded.

Chair: Lorenzo Robertson • Vice Chair: Vacant

Purpose

HIVPC Bylaws: The Committee shall inform and solicit the participation of individuals with HIV/AIDS in the planning, priority setting, and resource allocation processes. This Committee serves as a bridge between the Council and people with HIV in Broward. It encourages the involvement of individuals living with and affected by HIV/AIDS in the Council process.

HRSA Requirements: RWHAP's planning councils/bodies are unique because they are legislatively required and involve significant community input in decision-making about how funds will be used. HRSA encourages RWHAP recipients to *leverage community outreach and education efforts to increase participation in planning processes.* (RWHAP Part A Planning Council Primer)

The quorum for this meeting is 6

AGENDA

ORDER OF BUSINESS

- I. Call to Order/Establishment of Quorum
- II. Welcome from the Chair
 - a. Meeting Ground Rules
 - b. Statement of Sunshine
 - c. Introductions & Abstentions
 - d. Moment of Silence
- III. **ACTION:** Approval of the Agenda for May 5, 2026
- IV. **ACTION:** Approval of Minutes from April 7, 2025 (**Handout A**)
- V. Public Comment
- VI. Standard Committee Items:
 - a. Review of the FY 2026-2027 Committee Workplan (**Handout B1, B2**)
- VII. Old Business:
 - a. **Action Item:** Results of Ryan White Part A Core and Support Services Ranking (**Handout C1-C3**)
Workplan Activity 1.4: Rank RW Part A Core and Support Service Categories
 - b. **Update:** Community Advocacy Training – NMAC (**Handout D**)
Workplan Activity 1.2: Enhance CEC members' understanding of community engagement by supporting their development as committee participants.
Workplan Activity 3.1: Support the capacity of PWH to be meaningfully involved in the planning, delivery, and improvement of RWHAP services.
- VIII. Discussion Items
 - a. None.

IX. New Business:

a. **Discussion:** Ryan White Consumer Listening Tour: Session 1

Workplan Activity 1.1: Host consumer/community forums/listening sessions.

Workplan Activity 2.1: Ensure consistent distribution of council-approved promotional materials to the community via physical handouts and electronic media.

Workplan Activity 2.2: Collaborate with local organizations to partner with community stakeholders to engage in community events.

Workplan Activity 2.3: Evaluate the impact of community activities to refine strategies and improve outreach effectiveness.

X. Recipient Report

XI. Public Comment

XII. Data Request

XIII. Next Meeting Date:

▪ **Tuesday, June 2, 2026 @ 3:00 PM**

▪ **Location: Broward Regional Health Planning Council & Microsoft Teams.**

IX. Agenda Items for Next Meeting:

▪ Ryan White Consumer Listening Tour: Session 1

X. Announcements

XI. Adjournment

For a detailed discussion on any of the above items, please refer to the minutes available at: [HIV Planning Council Website](#)

For a detailed discussion on any of the above items, please refer to the minutes available at: [HIV Planning Council Website](#)

Please complete your [meeting evaluation](#).

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

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

Vision: To ensure the delivery of high-quality, comprehensive HIV/AIDS services to low-income and uninsured Broward County residents living with HIV by providing a targeted, coordinated, cost-effective, sustainable, and client-centered system of care. **Mission:** *We direct and coordinate an effective response to the HIV epidemic in Broward County to ensure high-quality, comprehensive care that positively impacts the health of individuals at all stages of illness.* In so doing, we: (1) Foster the substantive involvement of the HIV-affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care, (2) Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments, (3) Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment.

[Broward County Board of County Commissioners](#)

Mark D. Bogen (**Mayor**) • Robert McKinzie (**Vice-Mayor**) • Nan H. Rich • Michael Udine • Lamar P. Fisher • Steve Geller • Beam Furr • Alexandra P. Davis • Hazelle P. Rogers



May 2026

Broward HIV Health Services Planning Council Calendar



All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change. Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1244/1343. Visit [HIV Health Service Planning Council](#) for updates.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
					1	2 
3	4	5 Community Empowerment Committee (CEC) 3:00PM - 5:00PM	6	7 System of Care Meeting (SOC) 9:30AM - 11:30AM	8	9
10 	11	12	13	14 Local Pharmacy Assistance Committee (LPAC) 2:00PM - 4:00PM	15 Integrated Planning Work Group (IP) 11:30AM - 2:30PM	16
17	18 PSRA Data Presentation Workshop Day 1 10:00AM - 4:00PM 	19 PSRA Data Presentation Workshop Day 2 10:00AM - 4:00PM	20 PSRA Data Presentation Workshop Day 3 10:00AM - 4:00PM Quality Network Meeting (CQM) 10:00AM - 11:15AM In-Person	21 Executive Committee Meeting 12:45PM - 2:45PM	22	23
24	25 	26	27	28 HIV Planning Council Meeting 9:30AM to 11:30AM	29 Medical Case Management Meeting (CQM) 2:30PM - 3:45PM	30 
31						

Broward Regional Health Planning Council (BRHPC):
200 Oakwood Lane, Suite #100, Hollywood, FL 33020
Links are active and lead to meetings or Awareness Day Information. **Information is subject to change.**

Meetings in **RED** are canceled. Meetings in **BLUE** are for the HIV Planning Council Committees. Meetings in **GREEN** are for the Provider Network. Holidays and meetings outside of the HIV Planning Council are in **BLACK**.

May 2026

Broward HIV Health Services Planning Council Calendar



All events listed on this calendar are free and open to the public. Meeting dates and times are subject to change. Please contact support staff at hivpc@brhpc.org or (954) 561-9681 ext. 1244/1343. Visit [HIV Health Service Planning Council](#) for updates.

<p>TODOS ESTAN BIENVENIDOS!</p>	<p>ALL ARE WELCOME!</p>	<p>BON VINI!</p>
<p>A menos que se anote de forma diferente en el calendario, todas las reuniones se realizarán en: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020</p> <p>Para confirmar información acerca de la reunión de Consejo de Planeación HIV, o confirmar la reserva de servicios especiales tales como: Traducción Inglés a Español o a Criollo (Haitiano), servicios para discapacitados en visión o audición, por favor llame con 48 horas de antelación para que puedan hacerse los arreglos necesarios.</p>	<p>Unless otherwise noted on the calendar, all meetings are held at: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020</p> <p>To confirm HIV Planning Council meeting information, or reserve special needs services such as Translation from English to Spanish or Creole, or are hearing or visually impaired, please call 48 hours in advance so that arrangements can be made for you.</p>	<p>Sòf si yo ta ekri yon lòt bagay nan almanak-la, tout rankont-yo ap fèt: Broward Regional Health Planning Council (BRHPC): 200 Oakwood Lane, Suite #100, Hollywood, FL 33020</p> <p>Pou konfime enfòmasyon ou resewva sou rankont Konsèy Planifikasyon HIV-a, oswa pou rezève sèvis pou bezwen Espesyal tankou: Tradiksyon angle an panyòl oswa kreyòl; oswa, si ou gen pwoblèm wè oswa tandè, rele 48 tè alavans pou yo ka fè aranjman pou ou.</p>
<p>HIVPC Committee Descriptions</p>		
<p>HIV Health Services Planning Council (HIVPC): Continuously monitors, evaluates, and improves the quality of HIV care for Ryan White Part A and MAI-funded patients.</p>		
<p>Executive Committee (EXEC): Oversees the HIV Integrated Prevention and Care Plan, work of HIVPC committees, recommendations, and grievance resolution. Sets HIVPC agendas, manages conflicts of interest, and review attendance.</p>		
<p>Priority Setting and Resource Allocation Committee (PSRA): Recommends priorities and allocates Ryan White Part A funds based on data review. Develops, monitors, and refines eligibility, service definitions, and strategies to meet community needs.</p>		
<p>Quality Management Committee (QMC): Ensures high-quality HIV care by developing outcomes and indicators. Oversees standards of care, evaluates programs, assesses client satisfaction, and training.</p>		
<p>Membership/Council Development Committee (MCDC): Recruits and screens applicants to ensure the Council meets demographic requirements. Provides recommendations, orientation, training for new members.</p>		
<p>Community Empowerment Committee (CEC): Engages in community outreach to Ryan White Part A consumers to inform them about opportunities to participate in the HIV Planning Council and provide input.</p>		
<p>System of Care Committee (SOC): Evaluates the system of care and the impact of policies on people living with HIV in Broward County. Plans and coordinates care across diverse groups to improve access and reduce disparities.</p>		



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(954) 561-9681 • FAX (954) 561-9685

Community Empowerment Committee

Tuesday, April 6, 2026 – 3:00PM

Location: Broward Regional Health Planning Council and Virtual Meeting via Microsoft Teams

DRAFT MINUTES

CEC Members Present: R. Bhrangger, W. Marcoviche, R. Shore, H. Franks, E. Chery-Davis, K. Hayes, L. Robertson, S. Tinsley

Members Absent: H. Bahi (excused)

Ryan White Part A Recipient Staff Present: J. Roy, G. James

Ryan White Part B Recipient Staff Present: S. Cook

Florida Department of Health: No representatives

Planning Council Support Staff Present: S. Isidore, M. Lacroix, G. Berkeley Martinez, D. Liao

Guests Present: D. De Lima, J. Rivero, M. DiMaria, E. Bastidas, K. Tyree

Call to Order, Welcome from the Chair & Public Record Requirements

The CEC Chair called the meeting to order at **3:02 PM**. The CEC Chair welcomed all meeting attendees who were present. Attendees were notified that the CEC meeting is based on Florida's "Government-in-the-Sunshine" Law and meets reporting requirements, including the recording of minutes. In addition, it was stated that the acknowledgment of HIV status is not required but is subject to public record if it is disclosed. Introductions were made by the CEC Chair, Committee members, Recipient Staff, PCS & CQM Staff, and guests by roll call, and a moment of silence was observed.

Public Comment

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

Meeting Approvals

Motion #1: W. Marcoviche, on behalf of the CEC, moved to approve the Community Empowerment Committee April 7, 2025 agenda. The motion was seconded by S. Tinsley and unanimously adopted.

Motion #2: R. Bhrangger, on behalf of the CEC, made a motion to approve March 3, 2026, Community Empowerment Committee meeting minutes as presented. The motion was seconded by W. Marcoviche and adopted unanimously.

Public comment.

None.

Standard Committee Items

a. Review of the Committee Workplan.

S. Isidore conducted an overview of the workplan and made note of the committee's future plans.

J. Roy asked the committee to consider measuring the amount of connections made between the Planning Council and community stakeholders; as well as tracking the amount of individuals and partnerships that the committee interacts with during outreach events. S. Tinsley reported that she turns business cards and correspondence with community partners with PCS staff.

S. Isidore listed the planned activities for the fiscal year. She reminded the committee that they will begin planning the Listening Tour during the May meeting. S. Tinsley asked if there were any partnerships in place for the Listening Tour. S. Isidore answered that there were not. G. Berkeley-Martinez announced that the PCS staff would share recommendations to improve upon the Listening Tour at the next meeting.

Old Business

a. None

Discussion Items

i. **Action Item:** Finalize Plans for Man Up Festival with Ujima Men's Collective, May 2, 2026

S. Isidore shared updates about the committees participating in the event in collaboration with Ujima Men's Collective. The floor was open for members to volunteer to table at the event.

New Business

i. **Discussion:** Review Ryan White Part A Service Categories – PSRA Process

S. Isidore conducted a detailed presentation of the current Ryan White Part A Core and Support Service Categories. She reviewed the 13 core services and 17 support services. Each service category was briefly described, including eligibility, scope, method of service delivery, and intended outcome. All service definitions and descriptions were derived directly from HRSA Policy Clarification Notice (PCN) 16-02.

She noted that the LPAP Subcommittee has been reinstated as a standing committee of the Planning Council. SOC and QMC have reviewed and updated the HICP service delivery model. The Florida ADAP program has temporarily restored the 400% FPL eligibility until June 30th.

A voting link will be distributed to Committee members to complete service rankings prior to the next CEC meeting. The results will be compiled, reviewed with the Committee, and forwarded to the PSRA Committee for consideration.

ii. **Update:** Community Advocacy Training Schedule for May – NMAC

S. Isidore reported that the Community Empowerment Committee has been collaborating with NMAC to provide a community advocacy training for committee members. The purpose of the training is to equip members with the skills and knowledge needed to effectively

respond to community needs and serve as advocates. Planning discussions with NMAC are ongoing, with the goal of scheduling the training for the following month.

G. Berkeley-Martinez emphasized the importance of strengthening members' capacity to advocate both for themselves as consumers and collectively as a community.

iii. **Update:** Earn Your Healthy Aging with HIV Certificate

S. Isidore shared information about an accredited certificate program designed to support providers in their advocacy efforts. The program offers learners an accessible and structured approach that addresses the pressing challenges faced by people living with HIV. Committee members were informed that additional information and a registration link would be shared for those interested in enrolling in or learning more about the course. G. Berkeley-Martinez added that the program is free of charge.

iv. **Update:** Promotion Materials

S. Isidore shared updated promotion materials for the committee to review ahead of the Man Up Festival. Committee members expressed approval of the new design.

Motion #3: S. Tinsley, on behalf of the CEC, moved to updated palm cards as presented. The motion was seconded by K. Hayes and unanimously adopted.

Recipient's Report

None.

Public Comment

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

Data Request

None.

Agenda Items for Next Meeting

- a. Next Meeting Date: May 5, 2026, at 3:00 p.m. LOCATION: Broward Regional Health Planning Council
- b. Agenda Items for Next Meeting
 - Rank RWPA Core and Support Service Categories
 - Community Engagement Training - NMAC

Announcements

- L. Robertson: Man Up Festival: May 3, 2026 at Reverend Samuel Delevoe Memorial Park.
- J. Roy: She will provide information regarding community engagement measurements. She also requested a copy of the CEC work plan to review and offer recommendations.

Adjournment

There being no further business, the meeting was adjourned at **3:49 PM**.

CEC Attendance for CY 2025

Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
	Meeting Date	C	C	3	7									
1	Bhrangger, R.	C	C	X	X									
2	Franks, H.	C	C	X	X									
3	Hayes, Kendra	C	C	A	X									
4	Marcoviche, W.	C	C	X	X									
5	Robertson, L., Chair	C	C	X	X									
6	Shore, R.	C	C	X	X									
7	Chery-Davis, E.,	C	C	A	X									
8	Bahi, H.	C	C	A	E									
9	Tinsley, S.	C	C	X	X									
	Tyler, N.	C	C	A										R
	Quorum = 6	C	C	6	8									

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

*Community Empowerment Committee Meeting Minutes – April 7, 2026
Minutes prepared by PCS Staff*



Community Empowerment Committee (CEC) Workplan FY2026-2027

Meeting Time & Frequency: The first Tuesday of the month from 3:00 pm to 5:00 pm

Committee Purpose: The Committee shall inform and solicit the participation of individuals with HIV/AIDS in the planning, priority setting, and resource allocation processes. This Committee serves as a bridge between the Council and people with HIV in Broward. It encourages the involvement of individuals living with and affected by HIV/AIDS in the Council process and promotes integrated planning initiatives.

T = On Target B = Behind Target C = Completed

Activity	Description	Action Steps/Deliverable	Responsible Party	Projected Month	Progress	Notes
Objective 1: Increase CEC member knowledge of the Committee's role in the HIVPC and amplify the consumer voice.						
1.1	Host consumer/community forums/listening sessions.	<ol style="list-style-type: none"> Utilize feedback to inform CEC's ranking of Ryan White services and refer results to the PSRA committee. Utilize feedback to inform recruitment strategies and refer results to the Membership Committee (MCDC). 	CEC/PCS Staff	TBD by CEC scheduled events.	T	Planning to begin May 2026
1.2	Enhance CEC members' understanding of community engagement by supporting their development as committee participants.	<ol style="list-style-type: none"> PCS staff will provide or coordinate a presentation on community engagement. PCS staff will provide access to HRSA Ryan White Part A webinars that cover key topics related to the HIV Planning Council, community outreach, and active involvement, as it relates to needs assessments and integrated planning. 	PCS staff	April 2026	T	
1.3	Receive presentation on Part A and MAI Service Categories to assist with ranking of core and support service categories.	<ol style="list-style-type: none"> Receive a presentation on Part A service categories. Receive a presentation on service utilization for the prior fiscal year. 	PCS Staff/RW Recipient/ CQM Staff	April 2026	C	
1.4	Rank RW Part A Core and Support Service Categories	<ol style="list-style-type: none"> Rank/prioritize RW Part A Core and Support Service Categories as part of the PSRA process. 	CEC/PCS Staff	April 2026 – May 2026	T	Scheduled for May 5, 2026



Objective 2: Promote education and increase awareness to strengthen support for People Living with HIV (PWH).

2.1	Ensure consistent distribution of council-approved promotional materials to the community via physical handouts and electronic media.	<ol style="list-style-type: none"> 1. CEC will share promotional materials during community outreach events to raise awareness and engagement. 2. PCS staff will disseminate HIV Planning Council updates and HIV-related resources through the community listserv and social media platforms. 	CEC/PCS Staff	Florida AIDS Walk – March 2026 Man Up Festival – May 2026 Aging Gracefully – September 2026 World AIDS Day – December 2026	T	Florida AIDS Walk – March 21, 2026 Man Up Festival – May 2, 2026
2.2	Collaborate with local organizations to partner with community stakeholders to engage in community events.	<ol style="list-style-type: none"> 1. Collaborate with community stakeholders—including individuals living with or affected by HIV, community-based organizations, faith-based groups, healthcare providers, public health agencies, and local residents—to organize events aligned with HIV awareness days and other community initiatives. 	CEC/PCS Staff	Florida AIDS Walk – March 2026 Man Up Festival – May 2026 Aging Gracefully – September 2026 World AIDS Day – December 2026	T	Florida AIDS Walk – March 21, 2026 Man Up Festival – May 2, 2026
2.3	Evaluate the impact of community activities to refine strategies and improve outreach effectiveness.	<ol style="list-style-type: none"> 1. Collect feedback from participants and track engagement metrics. 2. Provide relevant recommendations to HIVPC Committees such as PSRA, QMC, or SOC. 	CEC/PCS Staff	TBD by CEC scheduled events.	T	



Objective 3: Promote leadership development and public engagement opportunities for People Living with HIV (PWH).

3.1	Support the capacity of PWH to be meaningfully involved in the planning, delivery, and improvement of RWHAP services.	<ol style="list-style-type: none"> 1. Highlight the HIV Planning Council (HIVPC) during outreach efforts to raise awareness and encourage community involvement. 2. Share information about HIV advocacy, leadership, and service programs offered by local and national organizations. 3. Promote Peer engagements initiatives, such as the University of South Florida’s “Peer Specialist – HIV Online Certification Program,” to support leadership development and community empowerment among PWH. 	CEC	Ongoing.	T	<p>Peer Certification Course by the University of South Florida – March 3, 2026</p> <p>Community Engagement Training from NMAC – rescheduled for June 25, 2026</p>
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**HIV Health Services Planning Council
Community Empowerment Committee: Outreach/Community Conversations
March 2026 – February 2027**

Topic	Status	Work Plan Activity	Start Planning/ Coordination	Date/Month of Event	Partnering Organization
Florida AIDS Walk	Completed	2.2 Distribute promotional literature - physically and electronically - to the community on an ongoing basis. 2.4 Partner with HIV stakeholders to engage in community events on an ongoing basis.	March	Saturday, March 21 st from 11:00AM to 2:00PM; Fort Lauderdale Beach Park	AHF
Ryan White Consumers Listening Tour: Session 1	Planning	1.1 - Receive consumer/community feedback at minimum, twice a year. 2.2 - Distribute promotional literature - physically and electronically - to the community on an ongoing basis.	May	August	TBD
Man Up Festival	Completed	2.2 - Distribute promotional literature - physically and electronically - to the community on an ongoing basis. 2.4 Partner with HIV stakeholders to engage in community events on an ongoing basis.	April	Saturday, May 2 nd from 12:00PM to 5:00PM; Reverend Samuel Delevoe Memorial Park	Ujima's Men's Collective
Ryan White Consumers Listening Tour: Session 2	Planning	1.1 - Receive consumer/community feedback at minimum, twice a year. 2.2 - Distribute promotional literature - physically and electronically - to the community on an ongoing basis.	TBD	TBD	TBD
Aging Gracefully	Planning	2.2 - Distribute promotional literature - physically and electronically - to the community on an ongoing basis. 3.1 Develop and implement education and awareness strategies to increase HIV literacy	June	September	TBD
World AIDS Events	Planning	2.2 - Distribute promotional literature - physically and electronically - to the community on an ongoing basis.	October/November	TBD	TBD

COMMUNITY EMPOWERMENT COMMITTEE PRIORITY RANKINGS

Consumer Involvement in Prioritizing Ryan White Services

Broward County HIV Health Services Planning Council
Broward County Health Care Services Ryan White Part A Program
Presented by Planning Council Support Staff: May 2026



PRIORITY SETTING & RESOURCE ALLOCATION (PSRA) LEGISLATIVE RESPONSIBILITY INCLUDES:

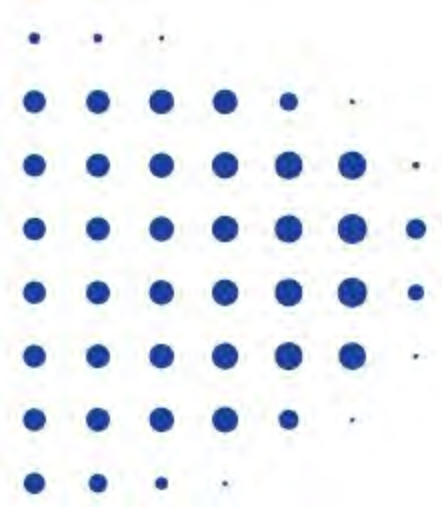
- **HRSA Requirements:** The Planning Council is required by HRSA to “set priorities and allocate resources for service categories and provide guidance (directives) to the Part A Recipient on how best to meet these priorities.”
- The Priority Setting & Resource Allocation (PSRA) Committee shall **recommend priorities** and **resource allocations** to the Broward County HIV Health Services Planning Council (HIVPC) to **disburse Ryan White Part A funds** in Broward County.
- Priority Setting and Resource Allocation to service categories **involves all members of the HIVPC.**



COMMUNITY EMPOWERMENT COMMITTEE (CEC) ROLE IN THE PSRA PROCESS

- Health Resources and Services Administration (HRSA) and the HIV Planning Council (HIVPC) recognize **the importance of consumer and People Living with HIV/AIDS (PLWHA) input** in the service categories' ranking and allocations
- The **CEC is the first committee to rank** the Ryan White Part A service categories each fiscal year
- As the **community voice of the HIVPC**, it is important that the CEC's ranking reflect the needs of the community
- When the PSRA Committee ranks the Part A service categories in May 2026, the **CEC rankings will be considered in the decision-making process.**





CORE MEDICAL SERVICES

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



Note: Services in *blue* are currently funded by RWPA



SUPPORT SERVICES


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

Note: Services in **blue** are currently funded by RWPA





RESOURCE ALLOCATION

- Resource allocation is the process of distributing available Ryan White Part A program funds for the EMA/TGA across the prioritized service categories.
 - Reallocation is the process of moving program funds across service categories after the initial allocations are made.
 - The HIVPC must approve such reallocations.
- 



CEC & COMMUNITY RANKINGS: CORE SERVICES FY26-27

CEC RANK NUMBER	CEC RANKING SERVICE CATEGORIES
1	AIDS Pharmaceutical Assistance (Local) (Part A)
2	Health Insurance Premium and Cost Sharing (HICP)(Part A & B)
3	AIDS Drugs Assistance Program Treatment (ADAP) (Part B)
4	Medical Case Management (Disease)(Part A)
5	Outpatient/Ambulatory Health Services (OAHS) (Part A)
6	Oral Health Care (Dental) [Routine & Specialty Care) (Part A)
7	Mental Health Services (Part A)
8	Substance Abuse-Outpatient (Part A)
9	Early Intervention Services (EIS)(Part C)
10	Home and Community-Based Health Services (Part B)
11	Home Health Care
12	Medical Nutrition Therapy (Part B)
13	Hospice

CEC RANK NUMBER	COMMUNITY RANKING SERVICE CATEGORIES
1	AIDS Pharmaceutical Assistance (Local) (Part A)
2	AIDS Drugs Assistance Program Treatment (ADAP) (Part B)
3	Home and Community-Based Health Services (Part B)
4	Early Intervention Services (EIS)(Part C)
5	Health Insurance Premium and Cost Sharing (HICP)(Part A & B)
6	Medical Case Management (Disease)(Part A)
7	Oral Health Care (Dental) [Routine & Specialty Care) (Part A)
8	Outpatient/Ambulatory Health Services (OAHS) (Part A)
9	Mental Health Services (Part A)
10	Medical Nutrition Therapy (Part B)
11	Home Health Care
12	Substance Abuse-Outpatient (Part A)
13	Hospice

CEC & COMMUNITY RANKINGS: SUPPORT SERVICES FY26-27

CEC RANK NUMBER	CEC RANKING SERVICE CATEGORIES
1	Housing (EHE Part A)
2	Food Bank/Home Delivered Meals (Part A & B)
3	Emergency Financial Assistance (Part B)
4	Medical Transportation Services (Part B)
5	Legal Services (Part A)
6	Non-Medical Case Management (Part A & B)
7	Child Care
8	Referral for Health Care and Support Services
9	Health Education/Risk Reduction
10	Outreach
11	Psychosocial Support
12	Other Professional Services (Part B)
13	Linguistics Services (Interpretation and Translation)
14	Rehabilitation Services
15	Permanency Planning (Part A)
16	Substance Abuse-Residential (Part B)
17	Respite Care

COMMUNITY RANK NUMBER	COMMUNITY RANKING SERVICE CATEGORIES
1	Emergency Financial Assistance (Part B)
2	Food Bank/Home Delivered Meals (Part A & B)
3	Medical Transportation Services (Part B)
4	Health Education/Risk Reduction
5	Non-Medical Case Management (Part A & B)
6	Referral for Health Care and Support Services
7	Housing (EHE Part A)
8	Linguistics Services (Interpretation and Translation)
9	Outreach
10	Psychosocial Support
11	Child Care
12	Legal Services (Part A)
13	Substance Abuse-Residential (Part B)
14	Other Professional Services (Part B)
15	Permanency Planning (Part A)
16	Rehabilitation Services
17	Respite Care

**AS SERVICE USERS, CONSUMERS
ARE UNIQUELY POSITIONED TO
ASSESS THE QUALITY,
SUITABILITY, AND EFFECTIVENESS
OF FUNDED SERVICES.**



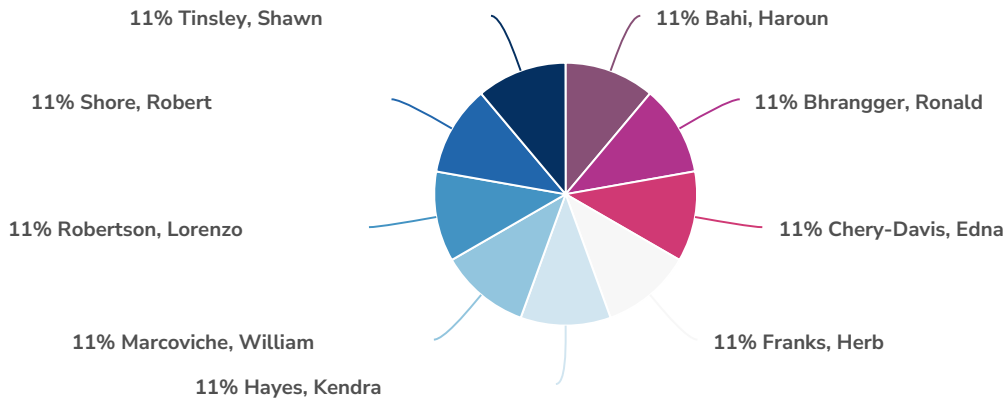
QUESTIONS?

Discussion



1. What is your name?

Handout C2

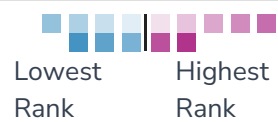


Value	Percent	Responses
Bahi, Haroun	11.1%	1
Bhrangger, Ronald	11.1%	1
Chery-Davis, Edna	11.1%	1
Franks, Herb	11.1%	1
Hayes, Kendra	11.1%	1
Marcoviche, William	11.1%	1
Robertson, Lorenzo	11.1%	1
Shore, Robert	11.1%	1
Tinsley, Shawn	11.1%	1

Totals: 9

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

Item	Overall Rank	Rank Distribution	Score	No. of Rankings
AIDS Pharmaceutical Assistance (Local) (Part A)	1		103	9
Health Insurance Premium and Cost Sharing (HICP)(Part A & B)	2		103	9
AIDS Drugs Assistance Program Treatments (ADAP)(Part B)	3		86	9
Medical Case Management (Disease)(Part A)	4		83	9
Outpatient/Ambulatory Health Services (OAHS)(Part A)	5		80	9
Oral Health Care (Dental) [Routine & Specialty Care](Part A)	6		75	9
Mental Health Services (Part A)	7		73	9
Substance Abuse- Outpatient (Part A)	8		48	9
Early Intervention Services (EIS)(Part C)	9		47	9
Home and Community-Based Health Services (Part B)	10		35	9
Home Health Care	11		31	9
Medical Nutrition Therapy (Part B)	12		27	9
Hospice	13		17	8

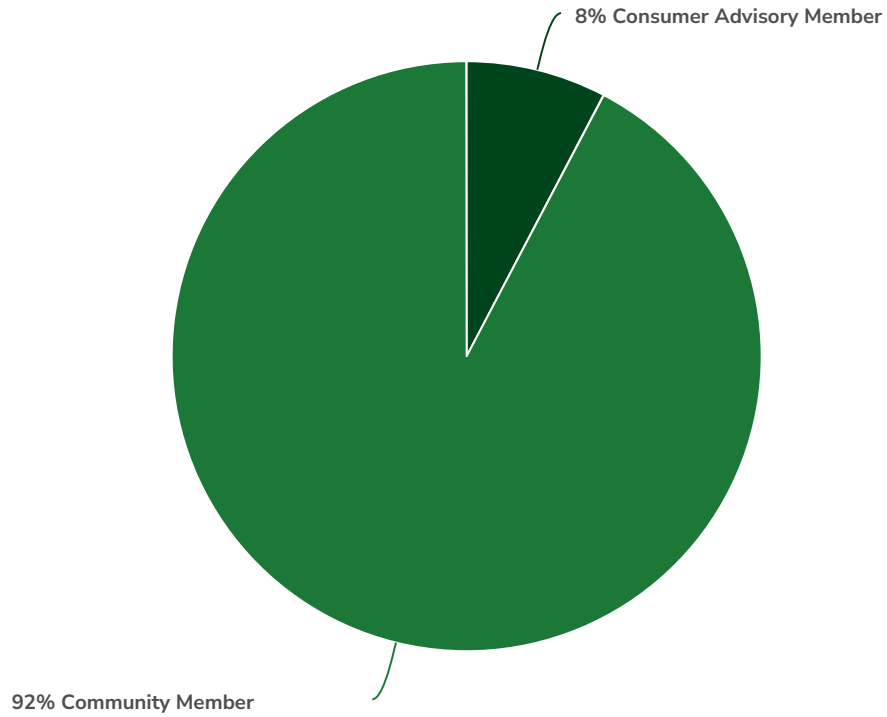


3. SUPPORT SERVICES. Listed below are support services that meet the federal government's requirements for Part A funding. Please rank the services in their order of importance to Broward residents living with HIV. The score of 1 is given to the most important service, and the score of 17 is the lowest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

Item	Overall Rank	Rank Distribution	Score	No. of Rankings
Housing (EHE Part A)	1		144	9
Food Bank/Home-Delivered Meals (Part A & B)	2		133	9
Emergency Financial Assistance (Part B)	3		125	9
Medical Transportation Services (Part B)	4		111	9
Legal Services (Part A)	5		92	9
Non-Medical Case Management (Part A & B)	6		92	8
Child Care	7		87	9
Referral for Health Care and Support Services	8		80	9
Health Education/Risk Reduction	9		75	9
Outreach	10		62	9
Psychosocial Support	11		62	9
Other Professional Services (Part A)	12		58	8
Linguistics Services (Interpretation and Translation)	13		57	9
Rehabilitation Services	14		53	9
Permanency Planning (Part A)	15		48	9
Substance Abuse- Residential (Part B)	16		41	9
Respite Care	17		33	9
















1. What is your name?



Value	Percent	Responses
Consumer Advisory Member	7.7%	1
Community Member	92.3%	12










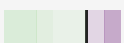







Totals: 13

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

Item	Overall Rank	Rank Distribution	Score	No. of Rankings
AIDS Pharmaceutical Assistance (Local) (Part A)	1		138	13
AIDS Drugs Assistance Program Treatments (ADAP)(Part B)	2		112	13
Home and Community-Based Health Services (Part B)	3		108	12
Early Intervention Services (EIS)(Part C)	4		107	13
Health Insurance Premium and Cost Sharing (HICP)(Part A & B)	5		98	13
Medical Case Management (Disease)(Part A)	6		98	12
Oral Health Care (Dental) [Routine & Specialty Care](Part A)	7		92	13
Outpatient/Ambulatory Health Services (OAHS)(Part A)	8		88	12
Mental Health Services (Part A)	9		80	11
Medical Nutrition Therapy (Part B)	10		73	11
Home Health Care	11		53	7
Substance Abuse- Outpatient (Part A)	12		44	7
Hospice	13		21	7



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

Item	Overall Rank	Rank Distribution	Score	No. of Rankings
Emergency Financial Assistance (Part B)	1		154	10
Food Bank/Home-Delivered Meals (Part A & B)	2		139	10
Medical Transportation Services (Part B)	3		102	8
Health Education/Risk Reduction	4		92	9
Non-Medical Case Management (Part A & B)	5		84	8
Referral for Health Care and Support Services	6		84	8
Housing (EHE Part A)	7		73	7
Linguistics Services (Interpretation and Translation)	8		66	8
Outreach	9		65	6
Psychosocial Support	10		62	7
Child Care	11		50	6
Legal Services (Part A)	12		50	5
Substance Abuse- Residential (Part B)	13		41	4
Other Professional Services (Part A)	14		35	4
Permanency Planning (Part A)	15		35	4
Rehabilitation Services	16		34	4
Respite Care	17		27	4



Training Proposal

Organization: Community Empowerment Committee (CEC) of the Broward HIV Health Services Planning Council (HIVPC)

Date: Tuesday, May 5, 2026

Format: Virtual – 1 Hour

Florida HIV Updates & Community Action

Goal

Provide a brief overview of recent Florida state-level changes impacting HIV treatment, access, and prevention, along with advocacy training to equip Planning Council members and people living with HIV (PLHIV) with practical community mobilization strategies.

Objectives

By the end of the webinar, participants will be able to:

1. Summarize recent changes to Florida ADAP eligibility and funding.
2. Understand legal challenges and stop-gap measures affecting treatment access.
3. Identify strategies to effectively advocate for oneself when interacting with healthcare professionals.
4. Identify at least two non-political strategies for community mobilization and advocacy.

Webinar Agenda

Topic	Format
Welcome & Objectives	Quick intro
Florida ADAP & State-Level Changes	Brief Overview
Legal & Policy Updates	Brief Overview
Personal Advocacy	Presentation
Community Mobilization Strategies	Interactive discussion
Action Planning & Wrap-Up	Key takeaways + resources / Q&A

Key Content Points

1. Florida ADAP & Funding Updates

- Eligibility changes and current shortfalls
- Stop-gap bill overview
- Implications for clients and service delivery

2. Advocacy

- Define advocacy (individual vs. systems-level)
- Information sharing to the community (legislative and policy changes)
- Types of advocacy:
 - Personal Storytelling
 - Legislative Advocacy
 - Community Mobilization
- Personal advocacy strategies for PLHIV (Pre and Post – Stop Gap)
- [Possibly Include Florida Activist \(Michael Rajner\)](#)

3. Community Mobilization (Non-Political)

- Coalition building and stakeholder engagement
- Awareness campaigns, workshops, and educational efforts
- Tips for using data and stories to inspire action

Materials / Tools

- PowerPoint slides with clear visuals
- Polls or interactive Q&A platform features
- Visual examples of advocacy
- Shared resource links and follow-up

Next Steps

1. Finalize slides and handouts by April 28.
2. Test webinar platform and interactive tools.
3. Send participants pre-reading or summary of ADAP changes.



NMAC Activity

NMAC has actively been engaging with local advocates and organizations (like the Aids Healthcare Foundation) since the announcement in January.

This is what we have done so far:

- Convened with local Florida advocates in Tallahassee and spoken with Senate staff to discuss the impact of these changes, especially on communities already disproportionately affected by HIV and longstanding health inequities
- Sent a letter directly to Florida Senate President, Ben Albritton, and Florida House Speaker, Daniel Perez, urging state leadership to direct the FL Department of Health to coordinate with HRSA to prevent treatment interruptions
- Created a unified FL ADAP public comment template to streamline and strengthen comments from Florida-based organizations
- Issued public comment on FL ADAP
- Sent a sign-on letter, bringing together over a dozen FL-based community organizations, to the Florida Congressional Delegation of the U.S. Congress, urging Members of Congress to encourage HRSA intervention in the crisis
- Signed onto two Florida ADAP crisis letters led by the Ryan White Working Group (one letter urging the Florida Legislature to require transparency, budget justification, and a halt to its implementation; the second letter calling on HRSA to conduct an emergency diagnostic site visit and strengthen oversight of cost-containment measures)



HIV HEALTH SERVICES PLANNING COUNCIL MEETING GROUND RULES

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



CONSEJO DE PLANEACIÓN DE SERVICIOS DE SALUD VIH

REGLAS BÁSICAS DE LA REUNIÓN

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



KONSÈY PLANIFIKASYON SÈVIS SANTE POU HIV RÈGLEMAN RANKONT-YO

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



Acronym List

ACA: The Patient Protection and Affordable Care Act

ADAP: AIDS Drugs Assistance Program

Administration HUD: U.S Department of Housing and Urban Development

IW: Integrated Workgroup

AETC: AIDS Education and Training Center

AHF: AIDS Health Care Foundation

AIDS: Acquired Immuno-Deficiency Syndrome

ART: Antiretroviral Therapy

ARV: Antiretrovirals

BARC: Broward Addiction Recovery Center

BCFHC: Broward Community and Family Health Centers

BH: Behavioral Health

BRHPC: Broward Regional Health Planning Council, Inc.

CBO: Community-Based Organization

CDC: Centers for Disease Control and Prevention

CDTC: Children's Diagnostic and Treatment Center

CEC: Community Empowerment Committee

CIED: Client Intake and Eligibility Determination

CLD: Client Level Data

CQI: Continuous Quality Improvement

CQM: Clinical Quality Management

CTS: Counseling and Testing Site

eHARS: Electronic HIV/AIDS Reporting System

EIHA: Early Intervention of Individuals Living with HIV/AIDS

EFA: Emergency Financial Assistance

EMA: Eligible Metropolitan Area

FDOH: Florida Department of Health

FPL: Federal Poverty Level

FQHC: Federally Qualified Health Center

HAB: HIV/AIDS Bureau

HHS: U.S. Department of Health and Human Services

HICP: Health Insurance Continuation Program

HIV: Human Immunodeficiency Virus

HIV HSSS: HIV Human Services Software System

HIVPC: Broward County HIV Health Services Planning Council

HOPWA: Housing Opportunities for People with AIDS

HRSA: Health Resources Services Administration

IDU: Intravenous Drug User

JLP: Jail Linkage Program

LPAP: Local AIDS Pharmaceutical Assistance Program

MAI: Minority AIDS Initiative

MCDC: Membership/Council Development Committee

MCM: Medical Case Management

MH: Mental Health

MNT: Medical Nutrition Therapy



MOU: Memorandum of Understanding

NBHD: North Broward Hospital District (Broward Health)

NGA: Notice of Grant Award

NHAS: National HIV/AIDS Strategy

NMCM: Non-Medical Case Management

NOFO: Notice of Funding Opportunity

nPEP: Non-Occupational Post Exposure Prophylaxis

NSU: Nova Southeastern University

nPEP: Non-occupational Post-Exposure Prophylaxis

OAHS: Outpatient Ambulatory Health Services

OHC: Oral Health Care

PCN: Policy Clarification Notice

PE: Provide Enterprise

PLWH: People Living with HIV

PLWHA: People Living with HIV/AIDS

PrEP: Pre-Exposure Prophylaxis

PRISM: Patient Reporting Investigating Surveillance System

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

PSRA: Priority Setting & Resource Allocations

QI: Quality Improvement

QIP: Quality Improvement Project

QM: Quality Management

QMC: Quality Management Committee

RSR: Ryan White Services Report

RWHAP: Ryan White HIV/AIDS Program

RWPA: Ryan White Part A

SBHD: South Broward Hospital District (Memorial Healthcare System)

SCHIP: State Children's Health Insurance Program

SDM: Service Delivery Model

SOC: System of Care

SPNS: Special Projects of National Significance

STD/STI: Sexually Transmitted Diseases or Infection

TA: Technical Assistance

TB: Tuberculosis

TGA: Transitional Grant Area

VA: United States Department of Veteran Affairs

VL: Viral Load

VLS: Viral Load Suppression

WICY: Women, Infants, Children, and Youth



Frequently Used Terms

Recipient: Government department designated to administer Ryan White Part A funds and monitor contracts.

Planning Council Support (PCS) Staff/‘Staff’: Provides professional staff support, meeting coordination, and information to the HIVPC, its standing and ad-Hoc Committees, Chair, and Recipient.

Clinical Quality Management (CQM) Support Staff: Provides professional support, meeting coordination, and technical assistance to assist the Recipient through analysis of performance measures and other data with the implementation of activities designed to improve patient care, health outcomes, and patient satisfaction throughout the system of care.

Provider/Sub-Recipient: Agencies contracted to provide HIV Core and Support services to consumers.

Consumer/Client/Patient: A person who is an eligible recipient of services under the Ryan White Act.