



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

Membership/Council Development Committee Meeting

Thursday, July 9, 2026 - 9:30 AM

LOCATION: Broward Regional Health Planning Council and via Microsoft Teams

[Join the meeting now](#)

https://teams.microsoft.com/l/meetup-join/19%3ameeting_OWY1NGQwYWMtMDAxMC00MTgyLTg2YTEtMjhINDBkZGFjNTVi%40thead.v2/0?context=%7b%22Tid%22%3a%220dd42165-bf27-4e00-9f50-1f4dff8a73f8%22%2c%22Oid%22%3a%22df400b73-e09f-4638-a7b6-0750be4ecb25%22%7d

Meeting ID: 271 972 339 304 16

Passcode: zH3aF6kr

Chair: Dr. Timothy Morange • Vice Chair: Vacant

This meeting is audio and video recorded.

Purpose

1. The Committee shall solicit, and screen applications based on objective criteria for appointment to the Council to ensure that the demographic requirements of the Council are maintained according to the Ryan White Treatment and Modernization Act and present its recommendations to the full Council.
2. The Committee shall institute orientation and training programs for new and incumbent members.
3. The Committee shall continue to educate the Council and committee members about their respective duties, and the Council's functions and roles in the organization and delivery of HIV/AIDS health and support services.

Quorum for this meeting is 4

DRAFT AGENDA

ORDER OF BUSINESS

1. Call to Order/Establishment of Quorum
2. Welcome from the Chair
 - a. Meeting Ground Rules
 - b. Statement of Sunshine
 - c. Introductions & Abstentions
 - d. Moment of Silence
3. Public Comment

4. Approvals

ACTION: Approval of Agenda for July 9, 2026

ACTION: Approval of Minutes from June 6, 2026 **(Handout A)**

5. Standard Committee Items

- a. **Action Item:** MCDC Membership Strategy – Review the HIVPC membership strategy and determine the best action to address vacancies. **(Handout B)**
Work Plan Activity 1.1: Review Council demographics to ensure it reflects the Broward epidemic, including at least 33% of members are unaffiliated PLWHA quarterly.
- b. **Action Item:** Reflectiveness: HIVPC Demographics- Review demographics and identify populations that are over- or underrepresented. **(Handout C)**
Work Plan Activity 1.2: Review seat status and ensure mandated seats are filled quarterly.

6. Discussion Items

- a. **Action Item:** Review results of Member of the Quarter – Quarter 1 FY2026-2027 **(Handout D)**
Work Plan Activity 6.1: Recognize Member of the Quarter quarterly and Member of the Year annually.
- b. **Action Item:** Review MCDC Work Plan for FY 2026-2027 **(Handout E)**
Work Plan Activity 4.2: Conduct a quarterly review of the objectives and activities outlined in the MCDC Work Plan.

7. Old Business:

- a. **Update:** HIVPC Member Term Limits **(Handout F)**

8. New Business:

- a. **Update:** Upcoming CEC Outreach Events
Work Plan Activity 5.3: Collaborate with other Committees of the HIVPC to participate in activities on an ongoing basis.
- b. **Update:** Member Correspondence during Quarter 1 of FY 2026-2027 **(Handout G1-G3)**
- c. **Discussion:** LPAC Policies & Procedures **(Handout H1 and H2)**

Justification: At the June 25, 2026, HIV Planning Council meeting, it was voted that the MCDC review the By-Laws to ensure the newly approved standing committee is in compliance. The LPAC voted to meet quarterly, with a minimum of one meeting held annually. This review is intended to ensure that the committee's meeting schedule is consistent with and within the scope of the By-Laws.

9. Recipient's Report

10. Public Comment

11. Agenda Items for Next Meeting

- a. Next Meeting Date: October 8, 2026, at 9:30 a.m. Location: BRHPC and via Microsoft Teams Videoconference

12. Announcements

13. Adjournment

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

[Broward County Website](#)



July 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
			Oral Health Network Meeting (CQM) 3:00PM - 4:15PM		 BRHPC Office Closed	HAPPY 4TH OF JULY
5	6	7	8	Membership/Council Development Committee Meeting (MCDC) 9:30AM - 11:30AM	10	11
12	13	14	15	Executive Committee Meeting 12:45PM - 2:45PM	17	18
19	20		22	HIV Planning Council Meeting 9:30AM to 11:30AM	24	25
26	27	Integrated Planning Work Group (IP) 1:00PM - 4:00PM	29	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**.

July 2026

Broward HIV Health Services Planning Council Calendar



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TODOS ESTAN BIENVENIDOS!	ALL ARE WELCOME!	BON VINI!
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 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.	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 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.	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 Pou konfime enfòmasyon ou resevwa sou rankont Konsèy Planifikasyon HIV-a, oswa pou rezève sèvis pou bezwen Espesyal tankou: Tradiksyon angle an panyòl oswa kreyol; oswa, si ou gen pwoblèm wè oswa tandè, rele 48 tè alavans pou yo ka fè aranjman pou ou.
HIVPC Committee Descriptions		
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.		
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 interes, and review attendance.		
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.		
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.		
Membership/Council Development Committee (MCDC): Recruits and screens applicants to ensure the Council meets demographic requirements. Provides recommendations, orientation, training for new members.		
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.		
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.		



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(954) 561-9681 • FAX (954) 561-9685

Membership/Council Development Committee

Thursday, June 11, 2026 - 9:30 AM

LOCATION: Broward Regional Health Planning Council Meeting via Microsoft Teams

Chair: Dr. Timothy Moragne • Vice-Chair: Vacant

Join the meeting via phone: Meeting ID: 293 797 982 727 Passcode: Ra2CV7WH

This meeting is audio and video recorded.

DRAFT MINUTES

MCDC Members Present: L. Robertson, T. Moragne, R. Hadley, O. Davy, S. Tinsley (Alt.)

Members Absent: S. McLeod

Ryan White Part A Recipient Staff Present: R. Pena

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

Guests Present: No guests present.

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

The MCDC Chair called the meeting to order at **9:33 A.M.** The MCDC Chair welcomed all meeting attendees who were present. Attendees were notified that the MCDC meeting is based on Florida's "Government-in-the-Sunshine Law and meeting reporting requirements, including recording 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 MCDC Chair, Committee members, Recipient staff, PCS & CQM staff, and guests by roll call, and a moment of silence was observed.

1. Public Comment

The Public Comment portion of the meeting is intended to allow the public to express opinions about items on the meeting agenda or to discuss other matters about HIV/AIDS services in Broward County.

There were no public comments.

2. Meeting Approvals

Motion #1: S. Tinsley, on behalf of MCDC, made a motion to approve June 11, 2026, Membership/Council Development Committee agenda. The motion was seconded by O. Davy and adopted unanimously.

Motion #2: S. Tinsley, on behalf of MCDC, made a motion to approve April 20, 2026, Membership/Council Development Committee meeting minutes as presented. The motion was seconded by O. Davy and adopted unanimously.

3. Standard Committee Item: None.

4. Discussion Item: None.

5. Old Business: None.

6. New Business:
- a. **Action Item:** Review HIVPC Member Term Limits

M. Lacroix explained that several members are nearing the end of their first term and require reappointment by the Board of County Commissioners, and reviewed supporting documents including a draft notification letter to Intergovernmental Affairs (Handout B1), Alchemer survey results confirming a 100% completion rate (Handout B2), and individual member responses indicating their desire to continue service (Handout B3).

Dr. Moragne noted that all members expressed intent to remain and that the process was being conducted in accordance with by-laws. The committee briefly discussed whether reappointments should be voted on individually or as a single action, with G. Berkeley Martinez clarifying that the process is similar to prior multi-member appointments and may be treated as a reappointment package. M. Lacroix, PCS staff, suggested that the final version of the notification letter would be contingent upon the Planning Council vote.

G. Berkeley Martinez noted that MCDC would certify the results and report to the Executive Committee, which would determine whether to include the item under consent or new business. Dr. Moragne emphasized ensuring procedural transparency and member participation in agenda decisions. Following discussion, the committee proceeded with a motion.

Motion #3: On behalf of the MCDC, L. Robertson moved to approve the Term Limit Survey results as presented and to forward them to the Executive Committee. The motion was seconded by S. Tinsley and passed unanimously.

Dr. Berkeley Martinez noted that HRSA has incorporated ex officio members into term limit guidance, meaning individuals occupying seats by virtue of their employment (e.g., Part B, C, D, F, and Health Department representatives) will no longer be required to complete term limit forms. The By-Laws Committee has reflected these updates; however, since the changes are not yet officially adopted, MCDC will continue the current process of reviewing members for reappointment.

7. Recipient's Report: None.

8. Public Comment

The Public Comment portion of the meeting is intended to allow the public to express opinions about items on the meeting agenda or to raise other matters about HIV/AIDS services in Broward County.

There were no public comments.

9. **Next Meeting Date:** Thursday, July 13, 2026, at 9:30AM; Location: BRHPC and via Microsoft Teams Videoconference

10. Agenda Items for Next Meeting

- a. Standard Items
 - i. **Action Item:** MCDC Membership Strategy – Review the HIVPC membership strategy and determine the best action to address vacancies.
Work Plan Activity 1.1: Review Council demographics to ensure it reflects the Broward epidemic, including at least 33% of members are unaffiliated PLWHA quarterly.
 - ii. **Action Item:** Reflectiveness: HIVPC Demographics - Review demographics and identify populations that are over- or underrepresented.
Work Plan Activity 1.2: Review seat status and ensure mandated seats are filled quarterly.
- b. **Review:** MCDC Workplan FY2026-2027
Activity 4.2: Conduct a quarterly review of the objectives and activities outlined in the MCDC Work Plan.
- c. **Action Item:** Review results of Member of the Quarter 1 FY2026-2027

Workplan Activity 6.1: Conduct Member recognition: Member of the Quarter and Member of the Year.

11. Announcements None.

12. Adjournment

There being no further business, the meeting was adjourned at **9:50AM**.

MCDC Attendance for CY2026

Count	Meeting Month	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Attendance Letters
	Meeting Date	8			20		11							
1	Robertson, L.	X			X		X							
2	Moragne, T., Chair	X			X		X							
3	McLeod, S.	A			X		A							
4	Hadley, R.	X			A		X							
5	Davy, O.	X			A		X							
	Tinsley, S. (Alt.)				X		X							
	K. Creary, Vice-Chair	A												Z
	Quorum = 4	4			4		5							

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

Membership/Council Development Committee Meeting Minutes – June 11, 2026, Minutes prepared by PCS Staff

MCDC Membership Strategy HIVPC Member Budget

Key Terms

Epidemic – refers to the information in the table above. This is how HIV is distributed throughout Broward County.

Consumers – Council and Committee members who access Ryan White Part A services.

Unaffiliated Consumers – Council and Committee members who access Ryan White Part A services and have no relationship to an agency that provides these services. This means the consumer does not work for a provider agency or otherwise benefits financially from the agency's success.

Mandated Seats – HIVPC positions (seats) required by the Health Resources & Services Administration (HRSA).

Member Distribution	As of 04/20/2026	As of 07/12/2026	Goal
Unaffiliated Consumer	8	9	12
Job-based Seat	10	9	14
NECL Seat**	5	5	9
Total Membership	23	23	35
Unaffiliated Consumers (%)	35%	39%	33%
Alternates	0	0	3

*Job-based seats are those seats filled based on employment

**NECL is the Non-Elected Community Leader seat and here only represents those members who are not unaffiliated consumers and do not occupy the Job-Based Seats

Member Roster as of July 12, 2026

MANDATED SEATS FILLED

People Living with HIV and Community

- ✓ Members of Affected Communities
- ✓ Unaffiliated Consumers
- ✓ Non-Elected Community Leader (NECL)
 - o Representatives of/or formerly incarcerated PWH

Federal HIV Programs

- ✓ Part B
- ✓ Part C
- ✓ Part D
- ✓ Part F
- o HOPWA

Public Health & Health Planning

- ✓ Hospital or Health Care Planning Agency
- ✓ Local Public Health Agency

Health & Social Services Providers

- ✓ Health Care Providers/FQHCs
- ✓ CBO/ASO – Community-based organization or AIDS Service Organization
- ✓ Mental Health
- ✓ Substance Abuse Provider

Broward County Ordinance 12.108.b

- ✓ Board of County Commissioners member

OPEN SEATS:

Job-Based

- State agencies (Medicaid agency)

Unaffiliated Consumers

- Affected Communities (3 additional Unaffiliated RWPA Consumers)
- Alternates (3)

MEMBERS APPOINTED BY BOARD OF COMMISSION

Matthew Patterson's application is pending. Otherwise, no newly appointed members for the quarter.

HIVPC Membership Reflectiveness

HIV Planning Council & Committee Demographics Report

Member Reflectiveness

The Membership/Council Development Committee ensures that the HIVPC represents the HIV epidemic in Broward County. MCDC accomplishes this task by reviewing the Council and Committees' demographics and identifying over and underrepresented populations.

HIV in Broward County and HIVPC Reflectiveness

The following table shows 1) HIV in Broward by Race/Ethnicity and by Sex; and 2) the current demographics of the HIVPC in comparison to the HIV epidemic data.

Race	Population*	Percentage*	HIVPC Membership**	HIVPC Percentage
White, not Hispanic	6,602	29.31%	5	22%
Black, not Hispanic	10,154	45.08%	8	35%
Hispanic/Latino	5,225	23.20%	9	39%
Asian	195	0.87%	0	0%
American Indian / Alaska Native	16	0.07%	0	0%
Native Hawaiian / Pacific Islander	9	0.04%	0	0%
Multi-race / Other	323	1.34%	1	4%
Total	22,524	100%	23	100%
Sex	Population	Percentage		
Male	17,087	75.86%	19	83%
Female	5,437	24.14%	4	17%
Total	22,524	100%	23	100%

*Data Provided by the Florida Department of Health's HIV Surveillance Office as of August 15, 2025.

**HIVPC membership as of July 12, 2026

How This Information is Compared to the Epidemic

The Council is compared to the epidemic to determine where representation can be improved.

Key Points for Reflectiveness through July 12, 2026

- The HIVPC comprises 23 members, including eight unaffiliated consumer members. The percentage of unaffiliated consumers is 39%, above the HRSA-mandated 33%.
- Compared to the HIV epidemic demographic, where 45.40% are Black and not Hispanic, the HIVPC is underrepresented at 35%. There is still progress to be made.
- Compared to the HIV epidemic demographic, where 24.14% are women, the HIVPC is underrepresented at 17%.

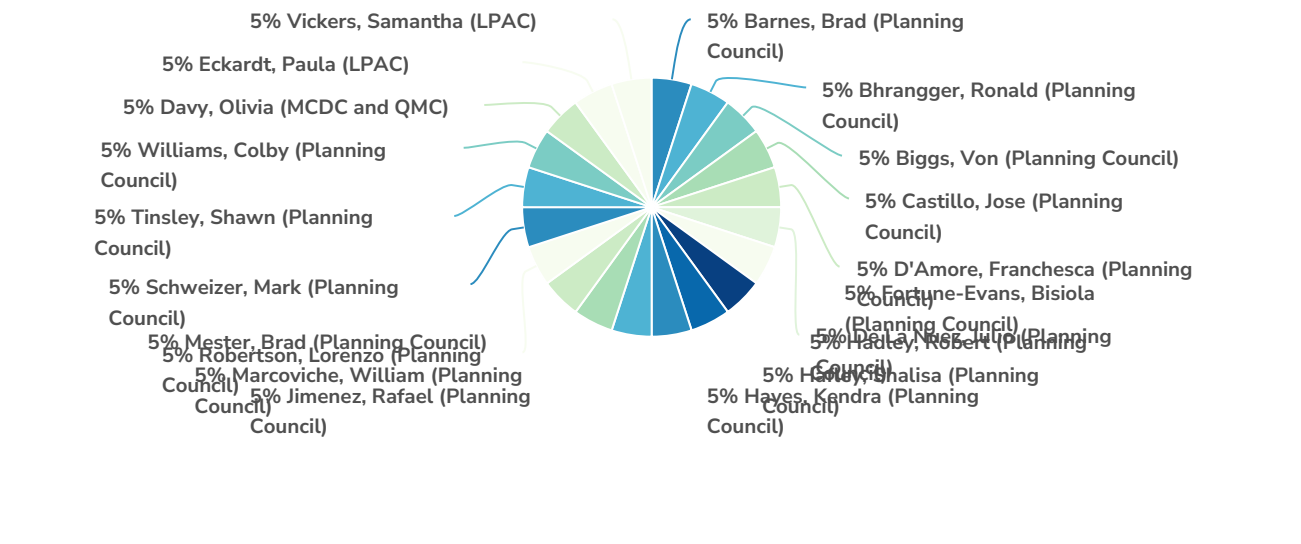
Report for Member of the Quarter Vote - Q1 FY2026-2027

Response Counts

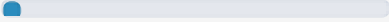
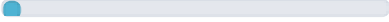
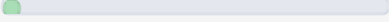
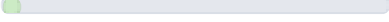
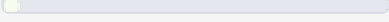
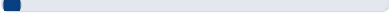
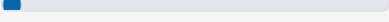
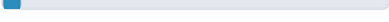
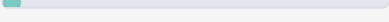
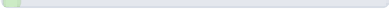
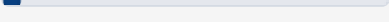


Totals: 20

1. What is your name?

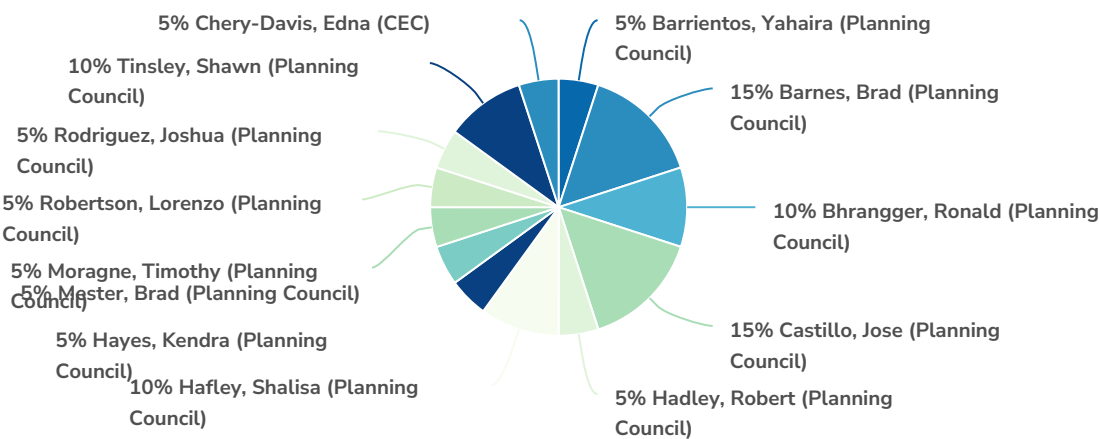


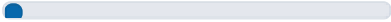
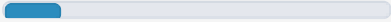
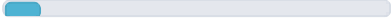
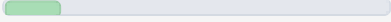
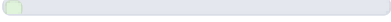
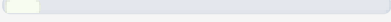
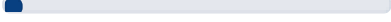
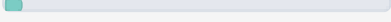
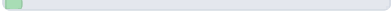
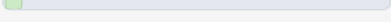
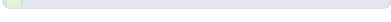
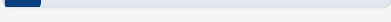
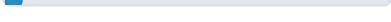
Value	Percent	Responses
Barnes, Brad (Planning Council)	5.0%	1
Bhrangger, Ronald (Planning Council)	5.0%	1
Biggs, Von (Planning Council)	5.0%	1
Castillo, Jose (Planning Council)	5.0%	1
D'Amore, Franchesca (Planning Council)	5.0%	1
De La Nuez, Julio (Planning Council)	5.0%	1
Fortune-Evans, Bisiola (Planning Council)	5.0%	1
Hadley, Robert (Planning Council)	5.0%	1
Hafley, Shalisa (Planning Council)	5.0%	1

Value	Percent	Responses
Hayes, Kendra (Planning Council)	5.0% 	1
Jimenez, Rafael (Planning Council)	5.0% 	1
Marcoviche, William (Planning Council)	5.0% 	1
Mester, Brad (Planning Council)	5.0% 	1
Robertson, Lorenzo (Planning Council)	5.0% 	1
Schweizer, Mark (Planning Council)	5.0% 	1
Tinsley, Shawn (Planning Council)	5.0% 	1
Williams, Colby (Planning Council)	5.0% 	1
Davy, Olivia (MCDC and QMC)	5.0% 	1
Eckardt, Paula (LPAC)	5.0% 	1
Vickers, Samantha (LPAC)	5.0% 	1

Totals: 20

2. Who is your choice of Member of the Quarter for Q1?



Value	Percent	Responses
Barrientos, Yahaira (Planning Council)	5.0% 	1
Barnes, Brad (Planning Council)	15.0% 	3
Bhrangger, Ronald (Planning Council)	10.0% 	2
Castillo, Jose (Planning Council)	15.0% 	3
Hadley, Robert (Planning Council)	5.0% 	1
Hafley, Shalisa (Planning Council)	10.0% 	2
Hayes, Kendra (Planning Council)	5.0% 	1
Mester, Brad (Planning Council)	5.0% 	1
Moragne, Timothy (Planning Council)	5.0% 	1
Robertson, Lorenzo (Planning Council)	5.0% 	1
Rodriguez, Joshua (Planning Council)	5.0% 	1
Tinsley, Shawn (Planning Council)	10.0% 	2
Chery-Davis, Edna (CEC)	5.0% 	1

Totals: 20



Handout E

Membership/Council Development Committee (MCDC) Workplan FY2026-2027

Meeting Time & Frequency: Every second Thursday quarterly (April, July, October, January), from 9:30am to 11:30am

Committee Purpose: The Committee shall solicit, and screen applications based on objective criteria for appointment to the Council to ensure that the demographic requirements of the Council are maintained according to the Ryan White Treatment and Modernization Act and present its recommendations to the full Council. The Committee shall institute orientation and training programs for new and incumbent members. The Committee shall continue to educate the Council and committee members about their respective duties, and the Council's functions and roles in the organization and delivery of HIV/AIDS health and support services.

T =On Target B = Behind Target C = Completed

Activity	Description	Action Steps/Deliverable	Responsible Party	Projected Month	Progress	Notes
Objective 1: Ensure HIVPC is representative and reflective.						
1.1	Review Council demographics to ensure it reflects the Broward epidemic, including at least 33% of members who are unaffiliated PWH quarterly.	1. Review Council demographics at each MCDC meeting, with a focus on ensuring that at least 33% of members are unaffiliated consumers living with HIV (PWH). 2. Regularly assess Council composition to confirm it reflects the demographics of Broward County's population of people with HIV.	MCDC/PCS Staff	Quarterly • April • July • October • January	C – April 2026	Next Scheduled July 2026
1.2	Review seat status and ensure mandated seats are filled quarterly.	Monitor current member affiliations. Actively recruit to fill vacant mandated seats.	MCDC/PCS Staff	Quarterly • April • July • October • January	C – April 2026	Next Scheduled July 2026
1.3	Announce vacant positions at each Executive/HIVPC meeting as necessary.	Promote and explore avenues for recruiting new members.	MCDC/PCS Staff	Quarterly • April • July	C – April 2026	Next Scheduled July 2026



				- October - January		
Objective 2: Term Limits - Review and Certify Council Members' term limits schedule						
2.1	The MCDC will recommend prospective members to the Council six months before the conclusion of each three-year term	1. Certify members whose terms are set to expire and submit their names to the Executive Committee for review, then submission to the Council. 2. Once approved by the Council, PCS staff will notify the affected members and inform the Intergovernmental Office of each member's decision to either remain on the Council or step down.	MCDC/PCS Staff	April 2026 June 2026	C – June 2026	Prospective members forwarded to Executive & HIVPC June 2026.
Objective 3: Member selection process and application procedure development.						
3.1	Review and revise HIVPC and Committee applications as needed.	Review HIVPC and Committee applications to ensure that MCDC receives necessary information for its review of applications.	MCDC/PCS Staff	January 2027	T	
Objective 4: Ensure Compliance with the HIVPC Recruitment and Retention Plan						
4.1	Review and update Recruitment & Retention Plan annually.	Review the previous year's Recruitment & Retention Plan and revise based on outcomes and new initiatives/strategies.	MCDC	January 2027	T	
4.2	Conduct a quarterly review of the objectives and activities outlined in the MCDC Work Plan.	Complete the tasks outlined in the Recruitment & Retention MCDC Work Plan on a quarterly basis.	MCDC	Quarterly - April - July - October - January	C – April 2026	Next Scheduled July 2026
4.3	Utilize feedback from CEC and collaborative events to update recruitment and	Revise recruitment and engagement strategies to ensure MCDC uses its most effective strategies and activities.	MCDC	Ongoing.	T	To be discussed July 2026



	engagement strategies on an ongoing basis.					
Objective 5: Recruitment & Engagement Efforts.						
5.1	Hold Membership Drive annually.	1. Conduct outreach with provider agencies or other HIV stakeholders via tabling and other engagement activities. 2. Educate HIV stakeholders to create recruitment opportunities for the HIVPC	MCDC/PCS Staff	Annually.	T	
5.2	Develop recruitment and website materials as needed.	Review and update existing marketing materials for distribution.	MCDC/PCS Staff	As needed	T	
5.3	Collaborate with other Committees of the HIVPC to participate in activities on an ongoing basis.	Partner with HIVPC committees to participate in outreach activities.	MCDC/PCS Staff	As needed.	T	
Objective 6: Planning Council Development and Member Retention						
6.1	Conduct Member recognition: Member of the Quarter and Member of the Year.	Develop a system by which to recognize a member for their contributions to the work of the HIVPC.	MCDC/PCS Staff	Quarterly/Annually	T	Scheduled Q1 review July 2026.
6.2	Conduct orientation to educate newly appointed members on the HIVPC member roles and responsibilities as needed, with the option to include current members.	Train new members on topics including attendance policies, sunshine laws, grievance policies, service descriptions, mentor program, reimbursement policies, etc.	PCS Staff	As needed.	T	
6.3	Offer mentorship program as necessary on an ongoing basis.	Implement a mentorship program to assist new members in the onboarding process of joining HIVPC and/or Committees. This program should be in accordance with Sunshine Law.	MCDC	Ongoing.	T	

Fort Lauderdale/Broward County EMA
Broward County HIV Health Services Planning Council
200 Oakwood Lane, Suite 100, Hollywood, FL, 33020
Tel: 954-561-9681 / Fax: 954-561-9685
An Advisory Board of the Broward County Board of County Commissioners



Handout F

June 26, 2026

Kilishi St Preux

Intergovernmental Affairs / Boards Section- Office of the County Administrator
100 S Andrews Avenue, Main Library, 8th Floor
Fort Lauderdale, Florida 33301

Subject: Term Limit Re-Appointments

Dear Ms. St. Preux,

At its June 25, 2026, meeting, the HIV Health Services Planning Council (HIVPC) unanimously voted to recommend the following individuals for reappointment by the Broward County Board of County Commissioners. These members are completing their first term (January 2024–December 31, 2026), with the proposed reappointment covering the term of January 2027 through December 2029:

- | | |
|-------------------------|-----------------------|
| • Brad Barnes | • William Marcoviche |
| • Ronald Bhrangger | • Brad Mester |
| • Von Biggs | • Dr. Timothy Moragne |
| • Jose Castillo | • Lorenzo Robertson |
| • Franchesca D'Amore | • Joshua Rodriguez |
| • Bisiola Fortune-Evans | • Dr. Mark Schweizer |
| • Kendra Hayes | • Shawn Tinsley |
| • Rafael Jimenez | |

In accordance with the HIVPC By-Laws, Article IV, Section 7, "The Membership/Council Development Committee (MCDC) will recommend prospective members six months prior to the end of each three-year term to the Council." Upon receipt of these recommendations, "The Council will recommend prospective members for appointment four months prior to the end of each three-year term to the County Commission" (Article IV, Section 7, Subsection 3).

Copies of the reappointment applications are provided for reference.

Sincerely,

Shawn Tinsley
Chair, Broward County HIV Health Services Planning Council

cc: Franchesca D'Amore, Vice-Chair, Broward County HIV Health Services Planning Council

Dr. Timonthy Morgane, Membership/Council Development Committee Chair

Enclosures: Term Limit Survey Responses (15)



OFFICE OF INTERGOVERNMENTAL AFFAIRS

100 S. Andrews Avenue, 8th Floor • Fort Lauderdale, Florida 33301 • 954-357-7575

April 15, 2026

Natalie Tyler



Dear Ms. Tyler:

It is with much regret that I must inform you that your membership on the HIV Health Services Planning Council has expired because you have not met the attendance requirements.

Section 1-233 of Chapter 1, Article XII of the Broward County Code of Ordinances is very specific about attendance requirements. An appointee to an advisory board, or other board whose enabling enactment or bylaws includes the attendance requirements of this ordinance, shall be automatically removed as a member if he or she has three (3) consecutive unexcused absences or misses four (4) properly noticed meetings in one (1) calendar year because of unexcused absences when the board meets more frequently than quarterly, or has two (2) consecutive unexcused absences or misses two (2) meetings in one calendar year if the board meets on a quarterly or less frequent basis.

However, the Code provides that the appointing commissioner or the other appointing authority may reappoint the appointee when extenuating circumstances, as determined by the appointing authority, are found to exist for the appointee's absences.

On behalf of the Broward County Board of County Commissioners, please accept my sincere appreciation for the time and effort you have given to improve the quality of life in Broward County by serving on this commission.

Sincerely,

A blue ink signature of Naomie Labaty, written in a cursive style.

Naomie Labaty
Boards Administrator

C:

C. Marty Cassini, Director, Office of Intergovernmental Affairs
Michele Rosiere, Board Coordinator, HIV Health Services Planning Council

Broward County Board of County Commissioners

Mark D. Bogen • Lamar P. Fisher • Beam Furr • Steve Geller • Robert McKinzie • Nan H. Rich • Hazelle P. Rogers • Alexandra P. Davis • Michael Udine
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OFFICE OF INTERGOVERNMENTAL AFFAIRS

100 S. Andrews Avenue, 8th Floor • Fort Lauderdale, Florida 33301 • 954-357-7575

April 21, 2026

Karen Creary

Dear Ms. Creary:

We have been notified of your resignation from the HIV Health Services Planning Council. On behalf of the Broward County Board of County Commissioners, please accept my sincere appreciation for the time and effort you have given to improve the quality of life in Broward County by serving on this board.

The entire Board of County Commissioners thanks you for your service and looks forward to your continued participation in our community. A Certificate of Appreciation will be sent to you, under separate cover.

Sincerely,

A handwritten signature in blue ink, appearing to read "Naomie Labaty", is written over a blue circular stamp.

Naomie Labaty
Boards Administrator

C: C. Marty Cassini, Director, Office of Intergovernmental Affairs
Rosiere Michele, Board Coordinator, HIV Health Services Planning Council



Fort Lauderdale / Broward County EMA
Ryan White Part A HIV Health Services Planning Council
An Advisory Board of the Broward County Board of County Commissioners
200 Oakwood Lane, Suite 100, Hollywood, FL, 33020 - Tel: 954-561-9681 / Fax: 954-561-9685



April 27, 2026

Naomi Labaty
Intergovernmental Affairs / Boards Section-Office of the County Administrator
100 S Andrews Avenue, Main Library, 8th Floor
Fort Lauderdale, Florida 33301

Dear Ms. Labaty:

At its **April 23, 2026, meeting**, the HIV Health Services Planning Council (HIVPC) unanimously voted for the following individual for appointment by the Broward County Board of County Commissioners.

Matthew Patterson – appointment to the Representative of/or formerly incarcerated PWH representative seat.

A copy of the original application is enclosed.

If you have any questions or need further clarification, please do not hesitate to contact Planning Council Support at hivpc@brhpc.org or (954-561-9681 Ext. 1244/1343).

Sincerely,

Gritell C. Berkeley Martinez, Ph.D., CPM®
Director, Planning & Quality Management
Broward Regional Health Planning Council

Cc: Shawn Tinsley; Chair, HIV Health Services Planning Council

Enclosures
Matthew Patterson HIVPC Application

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: Foster the substantive involvement of the HIV-affected communities in assuring consumer satisfaction, identifying priority needs, and planning a responsive system of care; Support local control of planning and service delivery, and build partnerships among service providers, community organizations, and federal, state, and municipal governments Monitor and report progress within the HIV continuum of care to ensure fiscal responsibility and increase community support and commitment



Local Pharmacy Advisory Committee (LPAC) Workplan FY2026-2027

Meeting Time & Frequency: Meets quarterly on Fridays at 3:00 PM, with at least one meeting held annually.

Committee Purpose: Provide recommendations to improve the quality, cost-effectiveness, coordination, and allocation of pharmacy services within the Part A system of care; develop standardized pharmacy processes (including policies, procedures, drug access, and formulary changes); evaluate pharmacy utilization and eligibility data; and review current pharmacologic treatment regimens and federal guidelines.

T = On Target B = Behind Target C = Completed

Activity	Description	Action Steps/Deliverable	Responsible Party	Projected Month	Progress	Notes
Objective 1: Develop and provide recommendations for the AIDS Pharmaceutical Assistance (LPAP) Formulary.						
1.1	Present newly approved medications to the HIV Planning Council (HIVPC) for review and potential inclusion in the LPAP Formulary and provide recommendations for the removal of medications from the Ryan White Part A Formulary.	Identify newly approved HIV-related medications and develop supporting justifications for presentation to the HIV Planning Council (HIVPC) for consideration for inclusion in the LPAP Formulary and identify recommended medications for removal from the LPAP Formulary with supporting justifications for presentation to the HIVPC.	LPAC, Recipient, PSRA Committee, PCS Support	As needed	T	
Objective 2: Standardized Process for Formulary Change Requests						
2.1	Maintain a standardized process for submitting and reviewing formulary change requests.	Review and recommend updates, as needed, to the <i>RWPA Formulary Change Request Form</i> for submission to the HIVPC for approval.	LPAC, Recipient, & PCS Support	At least annually	T	
Objective 3: Pharmacy Data Analysis and Evaluation						
3.1	Assess pharmacy utilization data and develop a report of findings to support the priority setting and resource allocation process.	Provide recommendations to the PSRA Committee based on an analysis of HIV-related medication utilization, its impact on the Ryan White Part A system of care, and to support informed program decision-making.	Recipient, LPAC, PCS Support	As needed	T	

**Objective 4: Coordinate interdisciplinary review and alignment of pharmacologic regimens.**

4.1	Ensure coordinated, evidence-based pharmacy service delivery by adhering to current federal guidelines and standards of care for pharmacologic practices.	Facilitate structured dialogue among pharmacists and licensed healthcare providers to review pharmacologic regimens and federal guidelines, ensuring alignment with best practices.	LPAC, Recipient, PCS Support	As needed	T	
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- D. **Removal of Committee membership.** The removal of Committee members shall be that of Council members as provided for in Article 4, Section 12, where applicable.
- E. **Committee Policies and Procedures.**
 - 1. The Council will approve written policies and procedures for all Committees which will be published in the “Local Procedures Manual.”
 - 2. The policies and procedures of each committee must be periodically reviewed by that committee and subsequently approved by the council.

SECTION 2: Standing Committees

A standing committee of the Council is a committee which has a purpose that requires a standing membership and a regular meeting schedule. The standing committees of the Council are:

- A. Executive
- B. Community Empowerment
- C. Membership/Council Development
- D. Priority Setting and Resource Allocation
- E. Quality Management
- F. System of Care

SECTION 3: There shall be an Executive Committee.

- A. **Membership.** The Executive Committee shall consist of the Council Chair, the Council Vice Chair, and the Chair or Vice-Chair of each of the standing committees. The immediate past Council Chair (if the past Chair is currently a member of the Council) will serve as an ex officio member of the Committee. In the absence of the Standing Committee Chair, the Standing Committee Vice Chair may serve and count towards quorum.
- B. A Vice-Chair of a committee does not need to be a member of the Council.
- C. The Executive Committee meets to conduct the business of the Council (excluding priority setting and allocation decisions). The Executive Committee shall:
 - 1. Set the agenda for Council meetings.
 - 2. Address Conflict of Interest issues.
 - 3. Review Membership/Council Development Committee Attendance report to identify Council members, not in compliance with attendance requirements.
 - 4. Oversee the planning activities established in the integrated HIV prevention and care plan.



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 eskizif pou fè moun tandè-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 nesesè 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 posèsyon 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

EIIHA: 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.