2027-2031

Section I: Introduction of Integrated Plan and SCSN

Section I: Introduction of Integrated Plan and SCSN *Purpose:* To provide a description of the Integrated Plan, including the SCSN and the approach the jurisdiction used to prepare and package requirements for submission • **Write a detailed summary:** Ensure it shows how you have met the Integrated Plan requirements. • **Combining materials**: Explain how new and existing materials relate.	
Requirements	
1. Introduction **a. Describe the Integrated Plan** • Include SCSN • Explain how past plans/SCSNs inform this plan/SCSN. • Or provide an overall description of an existing plan/SCSN that meets all requirements and includes the information below.	
b. Approach **Describe your approach to preparing the Integrated Plan submission.** • Update existing plan: Modify and enhance previously submitted plan. • Integrate Existing Documents: Combine sections from current plans and documents. • Develop a New Plan: Create an entirely new plan from scratch.	
c. Documents submitted to meet requirements. Fill out for each requirement per column provided: • New or existing material • Title/File Name for materials • Page numbers within the section	

1a. Describe the Integrated Plan

- Requirement: Include SCSN

For over a decade, the Miami-Dade County (MDC) Eligible Metropolitan Area (EMA) has been a national HIV/AIDS hot spot. The EMA continues to lead the State of Florida in the total number of people with HIV. 29,453 people with HIV – almost 23% – of the entire state's population of people with HIV lived in the EMA in Calendar Year (CY) 2023, the latest year of complete surveillance data available form the Florida Department of Health (FDOH).

Florida's Statewide Coordinated Statement of Need (SCSN) has identified four key areas of need in the EMA:

- HIV Prevalence: The state of Florida continues to have one of the highest rates of HIV diagnoses in the United States.
- Disproportionate Impacts: The epidemic continues to disproportionately impact Black/African American and Hispanic/Latino communities.
- Barriers to Care: Social determinants of health, including high rates of poverty, lack of transportation, food insecurity, housing instability, mental health issues, and substance use disorders hinder prevention and care efforts.
- Service Gaps: There is still a need for expanded access to pre-exposure prophylaxis (PrEP), mental health services, and supportive/culturally competent service providers.

- Requirement: Explain how past plans/SCSNs inform this plan/SCSN. Or provide an overall description of an existing plan/SCSN that meets all requirements and includes the information below.

For the past three years, the EMA has been guided by the 2022-2026 Integrated HIV Prevention and Care Plan (22-26 Plan) goals. The Miami-Dade HIV/AIDS Partnership (Partnership), the EMA's Ryan White Program Planning Council, has taken the lead on 22-26 Plan evaluation, monitoring, updating, and reporting. The Partnership's Integrated Plan Evaluation Workgroup refined the 22-26 Plan activities in 2023. Since then, the Partnership's Strategic Planning and Prevention Committees have reviewed data and further evaluated and refined the activities. The committees meet independently and as a combined group, the Joint Integrated Plan Review Team (JIPRT).

Both qualitative and quantitative data were used in the 2027-2031 Integrated HIV Prevention and Care Plan (27-31 Plan) to describe the impact of HIV in the EMA; determine service gaps and barriers to care; identify prevention and treatment areas; and refine goals and objectives to ensure access to HIV prevention and care for all people across the service delivery system, as detailed in Section III: Contributing Data Sets and Assessments.

The foundation for the 22-26 Plan were the overarching goals of the National HIV/AIDS Strategy (NHAS) and Ending the HIV Epidemic: A Plan for America (EHE), and the key areas identified by the SCSN. Since NHAS as a guiding document has been removed from the guidance for the 27-31 Plan, the EMA is going forward with goals structured around EHE, namely, Diagnose, Prevent, Treat, and Respond. While we understand the future of EHE funding is uncertain, the tenets are a reasonable basis for 27-31 Plan development and will continue to inform our activities.

Partnership and Recipient representatives serve on the Florida Comprehensive Planning Network (FCPN); and Partnership staff serve on the Statewide Integrated HIV Prevention and Care Plan (IPC) Workgroup and the Integrated HIV/AIDS Planning Technical Assistance Center (IHAP TAC) Advisory Board. Regular reporting and feedback on statewide updates relevant to local planning and program administration were included in the 26-31 Plan development.

Additionally, the 2023 Community Health Needs Assessment (CHNA), conducted collaboratively by major health institutions in Miami-Dade County, identified access to healthcare; mental health; income inequality/financial stability; housing; access to affordable health insurance; and chronic diseases as the topmost significant health priorities. Those findings and related recommendations were also considered in development of the 27-31 Plan.

This Plan is truly a living document which will continue to be monitored for updates to meet changing legislative requirements and in response to local policy changes. Responsibility for monitoring and reporting on Plan progress will continue to be a collaboration between the Miami-Dade County Office of Management and Budget Grants Coordination/Ryan White Program (the Recipient), FDOH-Miami-Dade County (FDOH-MDC), and the Partnership.

1b. Approach: Describe your approach to preparing the Integrated Plan submission.

- Requirement: Update existing plan: Modify and enhance previously submitted plan.

In preparation for this submission, the 22-26 Plan served as the foundation. The 22-26 Plan received a high rating from CDC/HRSA, indicating minor changes which have been addressed. Namely, the review noted a lack of defined activities and a need for more robust community input. How the 27-31 Plan will address those concerns is detailed in later sections. The greatest changes between the 22-26 Plan and the 27-31Plan are in response to changing legislative requirements and funding.

Contributors to the 27-31 Plan development, monitoring and updating include people with HIV (both Ryan White Program clients and others); Ryan White HIV/AIDS Program (RWHAP) Parts A, B, C, and D; the AIDS Drug Assistance Program (ADAP); the prevention and planning workgroups within the FDOH-MDC; the Florida Agency for Health Care Administration (Medicaid); the Recipient; FDOH-MDC; Partnership members; and others collaborators, as detailed in Section II: Community Engagement and Planning Process. Throughout the process, the 27-31 Plan was presented to the JIPRT and other committees at public, well-advertised meetings. All meeting documents, including meeting minutes, Plan drafts, supporting referenced documents, and relevant presentations, were posted on the Partnership's website, www.PartnershipMiami.org. Final approval by the Partnership took place in May 2026.

- Requirement: Integrate Existing Documents: Combine sections from current plans and documents.

Source documents are indicated below.

- Requirement: Develop a New Plan: Create an entirely new plan from scratch.

N/A.

1c. Documents submitted to meet requirements.

- Requirement: Fill out for each requirement per column provided:
  - New or existing material (to be included in the final draft)
  - Title/File Name for materials (to be included in the final draft)
  - Page numbers within the section (to be included in the final draft)

Data were drawn from the following source documents:

- 2022-2026 Integrated HIV Prevention and Care Plan for Miami-Dade County;
- 2022-2026 State of Florida Integrated HIV Prevention and Care Plan;
- CDC/HRSA 2027-2031 Integrated Plan Guidance (February 2025);
- FDOH Epidemiological data, CY 2023;
- HIV and STD testing data provided by the FDOH-MDC;
- RWHAP utilization data provided by the RWHAP, 2022-2024;
- RWHAP Client Satisfaction Survey data provided by the RWHAP for 2022-2024;
- Data on service gaps, provided by the FDOH-MDC and the Ryan White Program;
- The Health Council of South Florida (HCSF) District 11 Health Profile (January 30, 2025);
- The EHE Jurisdictional Plan, prepared by the Florida Department of Health in Miami-Dade County (FDOH-MDC);
- 2025 Annual Partnership Needs Assessment;
- 2023 Community Health Needs Assessment, provided by the Miami-Dade Community Health Needs Collaborative.
- 2025 State of Florida HIV Care Needs Survey for Area 11a; provided by The AIDS Institute;
- Results from the listening sessions, interviews, community input sessions, and online surveys conducted by BSR (pending); and
- Letter of Concurrence.

(This list is subject to additional resources.)