

**MIAMI-DADE
HIV/AIDS PARTNERSHIP**
Medical Care Subcommittee Meeting
Behavioral Science Research
2121 Ponce de Leon Boulevard, Suite 215
Coral Gables, FL 33134

February 27, 2026, Minutes

Approved March 27, 2026

#	Members	Present	Absent	Guests	
1	Baez, Ivet	X		Alzola, Yania	Singh, Hardeep
2	Dougherty, James	X		Casas, Manuel	Valle-Schwenk, Carla
3	Friedman, Lawrence		X	Kolber, Michael	
4	Miller, Juliet	X		Lian, Michael	
5	Rojas, Vanessa	X		Nieto, Ana M.	
6	Romero, Javier		X	Ortiz, Angela	
7	Serrano-Irizarry, Yendi	X		Patel, Prachi	
8	Ysea, Cristhian A.	X		Poulard, Cindy	
Quorum: 4				Staff	
				Ladner, Robert	
				Meizoso, Marlen	

All documents referenced in these minutes were accessible to both members and the general public prior to and during the meeting, at <https://partnershipmiami.org/the-partnership-2/#mcsc1>.

I. Call to Order

James Dougherty

The Chair, James Dougherty, called the meeting to order at 9:46 a.m. He introduced himself, provided an overview of the work for the day's meeting, and welcomed everyone.

II. Introductions

All

Mr. Dougherty requested that members, guests, and staff introduce themselves.

III. Meeting Housekeeping

James Dougherty

Mr. Dougherty reviewed the meeting housekeeping presentation, including people first language, meeting protocols, location of Subcommittee meeting items online, and identification of resource persons.

IV. Floor Open to the Public

Cristhian Ysea

The Vice Chair, Cristhian Ysea, read the following:

“Pursuant to Florida Sunshine Law, I want to provide the public with a reasonable opportunity to be heard on any item on our agenda today. If there is anyone who wishes to be heard, I invite you to speak now. Each person will be given three minutes to speak. Please begin by stating your name and address for the record

before you talk about your concerns. BSR has a dedicated phone line and email for statements to be read into the record. No statements were received."

There were no comments, so the floor was closed.

V. Review/Approve Agenda

All

The Subcommittee reviewed the agenda and accepted it as presented.

Motion to accept the agenda as presented.

Moved: Cristhian Ysea

Seconded: Dr. Vanessa Roja

Motion: Passed

VI. Review/Approve Minutes of February 6, 2026

All

Members reviewed the minutes of February 6, 2026, and noted a correction on page 2 of the need for a space between two words. A motion was made to accept the document with the correction.

Motion to accept the minutes of February 6, 2026, as discussed.

Moved: Juliet Miller

Seconded: Ivet Baez

Motion: Passed

VII. Reports

○ Ryan White Program

Carla Valle-Schwenk

Carla Valle-Schwenk indicated this fiscal year was ending on Saturday, February 28, with the new fiscal year starting on Sunday, March 1. The Board of County Commissioners approved the extension of contracts which will reset to the original total allocations. The Request for Proposal that was intended to be released last year will be developed and released this year. A media campaign has been launched by the Recipient which provides a dedicated page for the Ryan White Program, and will include printed material promoting the program.

AHF has filed a lawsuit challenging the Florida Department of Health (FDOH) emergency rule making. The state legislature is also attempting to address the shortfalls in the ADAP program by offering bridge funding, but this must go through the appropriations process. Some of the funding will require FDOH to work with communities to identify long-term solutions and review the medications rebate process. More information on the status of those efforts will be available at the end of March. For now, the Ryan White Program is keeping everything status quo. Clients should be encouraged to pick up their meds. Client insurance will not auto stop although ADAP stopped payments. Clients will need to contact their insurance plan, and clients should stay on their medication regimens.

The Recipient is in communication with some pharmaceutical companies to streamline the patient assistance programs (PAP). Contingency planning continues and letters have been drafted and sent to medical case managers to share with clients and posted on the new landing page. Working is being done to enroll clients into PAPs.

- **ADAP**

Dr. Javier Romero

Javier Romero was not available for the meeting. Staff shared the ADAP report, and members were reminded that the information does not include the pharmacy benefits manager utilization or the West Perrine pharmacy. Miami-Dade County accounts for 25 percent of the state total ADAP clients.

- **Vacancy Report**

Marlen Meizoso

Marlen Meizoso reviewed the February 2026 vacancies, which indicated several membership opportunities on the Partnership and the Subcommittee. Any individuals interested in membership who are Miami-Dade County registered voters may contact staff, and invite them to attend a meeting or training sessions.

VIII. Standing Business

- **Response to the 2026 ADAP Program Changes-Updates**

Updates were provided earlier in the meeting, so no additional information was shared.

- **Oral Health Care Formulary Review and Prioritization**

At the last meeting, the Subcommittee began review of the Oral Health Care Formulary as part of the contingency planning. Members received input from former Oral Health Workgroup members on how to prioritize services. Additional utilization data for FY 2024 was shared. Last year's expenditure for oral health care (OHC) is not sustainable with the ADAP cuts and the budget for OHC may need to be reduced to \$2.5 million. Dentists are paid by the procedure. Currently the oral health care cap is \$6,500 annually per client. The Subcommittee requested average cost range for clients to determine a modification of the cap. The average cost per client is around \$1,300. Staff also provided the following quick analysis on average ranges:

Range	Clients
\$0-\$1000	1,631 clients
\$1,000-\$2,000	638 clients
\$2,000-\$3000	238 clients
\$3,000-\$4,000	155 clients
\$4,000-\$5,000	78 clients
\$5,000-\$6,000	34 clients
\$6,000-\$6,500	18 clients
\$6,500+	53 clients

Clients with less than a \$2,000 average account for 80% of the clients served. With a cap of \$1,500 and total allocations of \$2.5 million, a little over 1,600 clients could be served. Allowing for denture procedures would require a cap closer to \$2,000. Members discussed the need for overrides of the cap to be available in some instances.

The Subcommittee discussed several possible avenues for cost savings. The most expensive procedure is implants which only has one provider and has served fewer than 10 clients.

The Subcommittee proposed to lower the cap, develop a process for overrides based on the client, keep expenses at no more than \$2.5 million, and keep most of the formulary intact.

Motion as part of the contingency planning to address ADAP changes to remove implants from the Ryan White Oral Health Care formulary.

Moved: Dr. Vanessa Rojas

Seconded: Cristhian Ysea

Motion: Passed

Based on the earlier discussion, a range of cap level was offered. The lower range cap was \$1,500, which is closer to the average cost per client last year, and the \$2,000 level would allow for clients to access dentures, since these are a more costly item. The cap level will be selected depending on what the expenditure level is at the time of implementation, a lower cap if more funding is available and a higher cap if less funding is available.

Motion as part of contingency planning to reduce the oral health care cap between \$1,500-\$2,000 depending on the rate of expenditure at the time of implementation.

Moved: Cristhian Ysea

Seconded: Dr. Vanessa Rojas

Motion: Passed

The Subcommittee offered some parameters in order to develop an override process, subject to funding limits. Providers requesting an override from the Recipient would have to provide information on four items: 1) if the procedures are for an emergency; 2) does the procedure affect function?; 3) what are the potential consequences of a delay to these procedures?; and 4) and to provide the treatment plan.

Motion as part of contingency planning for urgent or emergency circumstances that an override be developed by the Office of Management and Budget that dental providers provide, subject to availability of funds replies if it is an emergency; does it affect function; consequences of delay in treatment; and treatment plan of care.

Moved: Juliet Miller

Seconded: Dr. Vanessa Rojas

Motion: Passed

○ **Outpatient Ambulatory Health Services (OAHS) Review**

Time was running short so review of this item will take place at the next meeting. Members should review the OAHS utilization report so discussion at the next meeting can be productive.

Motion to extend the meeting by five minutes.

Moved: Juliet Miller

Seconded: Yendi Serrano-Irizarry

Motion: Passed

IX. New Business

There were no new business items.

X. Announcements

All

Attendees were reminded to RSVP in advance of the meeting, and the next New Member Orientation was announced as taking place on March 4. The flyer with the QR code and link are accessible online and were projected at the meeting. Members were reminded that the annual Source of Income forms are due before July 1 and were included in the meeting packets. Address, employer information (name and address), the word salary (if employed, since no amounts should be included on the form), signature, and date should be completed on the form.

XI. Next Meeting

Cristhian Ysea

The next meeting is scheduled for Friday, March 27, 2026, at 9:30 a.m. at BSR.

XII. Adjournment

James Dougherty

Mr. Dougherty thanked everyone for participating in the meeting and called for a motion to adjourn.

Motion to adjourn.

Moved: Cristhian Ysea

Seconded: Juliet Miller

Motion: Passed

The meeting adjourned at 11:31a.m.