



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, July 24, 2026

9:30 a.m. – 11:30 a.m.

Behavioral Science Research

2121 Ponce de Leon Blvd., Ste. 240

Miami, FL 33134

AGENDA

I. Call to Order	Cristhian Ysea
II. Introductions	All
III. Meeting Housekeeping	Cristhian Ysea
IV. Floor Open to the Public	Dr. Lawrence Friedman
V. Review/Approve Agenda	All
VI. Review/Approve Minutes of May 15, 2026	All
VII. Reports	
• Ryan White Program	Carla Valle-Schwenk
• ADAP	Dr. Javier Romero
• Vacancy Report	Marlen Meizoso
• Partnership Report (information only)	Dr. Lawrence Friedman
VIII. Standing Business	
• Oral Health Care Items:	All
○ Request of Codes D0602, D0603, D9110 and D0171	
○ Implants Utilization and Feasibility	
• Allowable Conditions Response to “Dear Colleague” Letter Continued	All
• Ryan White Prescription Drug Formulary	All
• 2026 Calendar of Activities	All
IX. New Business	
• None	All
X. Announcements and Open Discussion	All
XI. Next Meeting: August 28, 2026 at BSR	Dr. Lawrence Friedman
XII. Adjournment	Cristhian Ysea

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please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

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Housekeeping Highlights



Meeting is being recorded and are part of public record.



Refrain from side-bar conversations to avoid Florida Government in the Sunshine violations.



Only members of the Subcommittee can vote on items



Members shall **not act in their own private or personal interests** and will strive to handle all individuals, matters, and business with fairness and equity.



Raise your hand to be called upon by the chair.



Time limits may be placed on items.



Terms are on the back of the agenda.



Place your cell phone **on mute or vibrate**.
If you must take a call, please excuse yourself from the meeting.



Remember to **use people first language**.



If you did not get meeting materials, you can follow along on the screen or via the QR code on the agenda since materials are posted online.





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Floor Open to the Public

“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 line for statements to be read into the record. No statements were received.”



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**Medical Care Subcommittee Meeting
Behavioral Science Research Corporation
2121 Ponce de Leon Boulevard, Suite 240
Coral Gables, FL 33134**

May 15, 2026, Minutes

#	Members	Present	Absent	Guests	
1	Dougherty, James		X	Valle-Schwenk, Carla	
2	Friedman, Lawrence	X			
3	Gonzalez, Yvette	X			
4	Miller, Juliet		X		
5	Rojas, Vanessa	X			
6	Romero, Javier		X		
7	Serrano-Irizarry, Yendi		X		
8	Ysea, Cristhian A.	X			
Quorum: 3				Staff	
				Gattorno, Frank	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/partnership/#mcsc1>.

I. Call to Order

Cristhian Ysea

Cristhian Ysea, the Chair, called the meeting to order at 9:37 a.m. He introduced himself, provided an overview of the work for the day's meeting, and welcomed everyone.

II. Introductions

All

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

III. Meeting Housekeeping

Cristhian Ysea

Mr. Ysea reviewed the streamlined meeting housekeeping summary.

IV. Floor Open to the Public

Dr. Lawrence Friedman

Dr. Friedman 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 discussed striking two items. First, the ADAP Report, since there was no report and Dr. Romero was not present. Second, the Ryan White Formulary since no pharmacists were in attendance.

Motion to accept the agenda as discussed.

Moved: Yvette Gonzalez

Seconded: Dr. Vanessa Rojas

Motion: Passed

VI. Review/Approve Minutes of April 24, 2026

All

Members reviewed the minutes of April 24, 2026. Yvette Gonzalez's last name is misspelled on pages 4 and 5, and needs to be corrected.

Motion to accept the minutes of April 24, 2026, with the discussed correction.

Moved: Dr. Vanessa Rojas

Seconded: Dr. Lawrence Friedman

Motion: Passed

VII. Reports

▪ **Ryan White Program**

Carla Valle-Schwenk

Carla Valle-Schwenk referenced the Ryan White Program utilization and expenditures as of May 11, 2026, which were posted online. Final utilization and expenditures will be available for next month since the final reports to HRSA are due at the end of this month. Work continues through the team of advocates working to address the ADAP challenges. There have been rumors that the ADAP program may not be able to continue to pay for single tablet drugs and will focus on generics. With the removal of subsidies generated by paying insurance, the ADAP program will continue to have budget issues. Ms. Valle-Schwenk indicated that the University of Florida was conducting a survey on ADAP. For those clients needing Biktarvy®, the patient assistance program (Advancing Access program) will require a benefits review, and clinicians will also need to provide documentation of medical need for the medication.

Dr. Friedman indicated that the Part D project officers are aware of the issues with ADAP and how this crisis may affect viral suppression rates.

▪ **Vacancy Report**

Marlen Meizoso

Marlen Meizoso reviewed the May 2026 vacancies, which indicated several membership opportunities on the Partnership and the Subcommittee. Currently, on the Subcommittee, there are vacancies for a pharmacist, physician, mental health professional, and members living with HIV. Interested individuals may contact staff for additional details or attend a meeting or training sessions.

VIII. Standing Business

▪ **Allowable Conditions Response to "Dear Colleague" Letter Continued**

All

The Subcommittee deferred this item earlier in the year and has been working on this item since the Fall of last year. Over the course of several months, a structured review of the allowable conditions was held using a review tool developed by the Subcommittee accompanied by Open Evidence AI generated literature review provided by Yendi Serrano-Irizarry to assess the conditions. The Subcommittee reviewed the latest version of the review tool and the tool was updated. The next set of allowable conditions to review will be from Ear, Nose, and Throat (ENT) Otolaryngology to Hematology and Oncology.

▪ **Contingency Planning Continued:**

□ **Outpatient Ambulatory Health Services (OAHS) Review – Vaccines**

All

At the last Subcommittee meeting, staff shared the OAHS utilization report for Ryan White Program FY 2024-2025, but the Subcommittee requested additional details exclusively for vaccines. Staff shared the additional vaccination data at this meeting. Over 1,621 clients received vaccines, and of these, 861 were clients with ADAP coverage on the service date at a cost of \$263,426.68. Clients with ADAP should be referred to pharmacies within the Prime Therapeutics network so that the vaccines can be billed to the ADAP program. The Recipient will remind providers that the Ryan White Program is payor of last resort.

▪ **Oral Health Care Items: D6095, Repair of Implant Abutment – Discontinued**

All

Staff queried former members of the Oral Health Care Workgroup about the need to replace code D6095 which was discontinued. Two of the three former members indicated they never used the code and had no replacements. No further action was required. If a dentist should need to add a code in the future, they can submit a request form for evaluation.

▪ **2026 Calendar of Activities**

All

Staff reviewed the latest version of the calendar of activities. Several members indicated they had a conflict in June and would not be able to attend. The Subcommittee decided to cancel the June meeting and continue to address agenda items at their July meeting.

Motion to cancel the June 26, 2026, Medical Care Subcommittee meeting.

Moved: Dr. Lawrence Friedman Seconded: Dr. Vanessa Rojas

Motion: Passed

IX. New Business

▪ **Special Projects Discussion**

All

As part of the annual staff-support budget process approved in 2024, the committees and subcommittee are invited to submit requests for support for special projects beyond their regular annual activities. Examples of eligible special projects include needs assessment, comprehensive planning, PSRA, and administrative efficiency work. Once project proposals are developed, the Executive Committee will review them and forward recommendations to the Partnership. The Subcommittee decided to continue to monitor ADAP changes and not put forth a special project.

X. Announcements

All

The next Get on Board training was announced and will take place on June 3, 2026. The training is held on Microsoft Teams and individuals can register via the QR code or click the link imbedded in the notice that was sent out Wednesday.

XI. Next Meeting

Cristhian Ysea

The next meeting is now scheduled for Friday, July 24, 2026, at 9:30 a.m. at the BSR conference room.

XII. Adjournment

Cristhian Ysea

Mr. Ysea thanked everyone for participating and adjourned the meeting at 11:27 a.m.



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RYAN WHITE PART A PROGRAM
MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

May 2026

FUNDING SOURCE(S) INCLUDED:

Ryan White Part A
Ryan White MAI

SERVICE CATEGORIES

Core Medical Services

AIDS Pharmaceutical Assistance (LPAP/CPAP)

Health Insurance Premium and Cost Sharing Assistance

Medical Case Management

Mental Health Services

Oral Health Care

Outpatient Ambulatory Health Services

Substance Abuse Outpatient Care

Support Services

Food Bank/Home Delivered Meals

Medical Transportation

Other Professional Services

Outreach Services

Substance Abuse Services (residential)

Service Units		Unduplicated Client Count	
<u>Monthly</u>	<u>Year-to-date</u>	<u>Monthly</u>	<u>Year-to-date</u>
5	18	3	5
0	28	0	12
7,617	28,673	4,066	6,680
20	213	13	80
938	2,964	683	1,422
2,695	9,125	1,671	3,571
2	5	1	2
830	2,445	303	405
115	928	111	386
0	0	0	1
98	229	35	72
543	1,468	26	32
TOTALS:	12,863	46,096	

Total unduplicated clients (month):

5,032

Total unduplicated clients (YTD):

7,496

See page 4 for
Service Unit
Definitions

Page 1 of 4

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

May 2026

FUNDING SOURCE(S) INCLUDED:

Ryan White Part A

SERVICE CATEGORIES

Core Medical Services

AIDS Pharmaceutical Assistance (LPAP/CPAP)
Health Insurance Premium and Cost Sharing Assistance

Medical Case Management

Mental Health Services

Oral Health Care

Outpatient Ambulatory Health Services

Substance Abuse Outpatient Care

Support Services

Food Bank/Home Delivered Meals
Medical Transportation
Other Professional Services
Outreach Services
Substance Abuse Services (residential)

Service Units		Unduplicated Client Count	
Monthly	Year-to-date	Monthly	Year-to-date
5	18	3	5
0	28	0	12
6,709	23,311	3,734	5,869
6	174	2	57
938	2,964	683	1,422
2,551	8,583	1,607	3,442
2	5	1	2
830	2,445	303	405
92	831	90	349
0	0	0	1
97	219	34	63
543	1,468	26	32
TOTALS:		11,773	40,046

Total unduplicated clients (month):

4,828

Total unduplicated clients (YTD):

7,103

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

May 2026

FUNDING SOURCE(S) INCLUDED:

Ryan White MAI

SERVICE CATEGORIES

Core Medical Services

Medical Case Management

Mental Health Services

Outpatient Ambulatory Health Services

Support Services

Medical Transportation

Outreach Services

	Service Units		Unduplicated Client Count	
	Monthly	Year-to-date	Monthly	Year-to-date
Medical Case Management	908	5,362	458	1,526
Mental Health Services	14	39	11	23
Outpatient Ambulatory Health Services	144	542	125	332
Medical Transportation	23	97	21	48
Outreach Services	1	10	1	9
TOTALS:	1,090	6,050		
Total unduplicated clients (month):	535			
Total unduplicated clients (YTD):	1,638			

Miami-Dade County Ryan White Part A/MAI Program

Service Unit Definitions

Service Categories	Service Unit Definition
Core Medical Services	
AIDS Pharmaceutical Assistance (Local Pharmaceutical Assistance Program; LPAP)	1 filled prescription
Health Insurance Premium & Cost Sharing Assistance	1 health insurance payment (copayment or deductible)
Medical Case Management (MCM; Incl. Treatment Adherence)	1 MCM encounter
Mental Health Services	1 individual or group encounter
Oral Health Care	1 oral health care visit
Outpatient/Ambulatory Health Services	1 medical visit
Substance Abuse Outpatient Care	1 individual or group encounter
Support Services	
Emergency Financial Assistance (limited access)	1 filled prescription
Food Bank	1 bag of groceries
Medical Transportation	1 medical transportation voucher or one-way rideshare trip
Other Professional Services (Legal Assistance & Permanency Planning)	1 hour of legal assistance
Outreach Services	1 individual encounter
Substance Abuse Services-Residential	1 day of residential substance abuse services

NOTE: MAI-funded services are limited to minority clients from priority subpopulations or emerging need subpopulations.

RYAN WHITE PART A PROGRAM
MIAMI-DADE COUNTY EMA

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

February 2026

FINAL FY 2025 REPORT
(Grant Closeout Complete)

FUNDING SOURCE(S) INCLUDED:

Ryan White Part A
Ryan White MAI

SERVICE CATEGORIES

	Service Units		Unduplicated Client Count	
	Monthly	Year-to-date	Monthly	Year-to-date
Core Medical Services				
AIDS Pharmaceutical Assistance (LPAP/CPAP)	8	78	4	8
Health Insurance Premium and Cost Sharing Assistance	193	8,190	167	2,254
Medical Case Management	6,792	120,153	3,009	8,799
Mental Health Services	15	590	6	124
Oral Health Care	418	11,031	319	2,833
Outpatient Ambulatory Health Services	1,520	30,218	922	4,220
Substance Abuse Outpatient Care	0	13	0	4
Support Services				
Food Bank/Home Delivered Meals	601	11,834	244	822
Medical Transportation	448	7,171	218	1,137
Other Professional Services	0	195	0	51
Outreach Services	26	463	18	236
Substance Abuse Services (residential)	236	6,096	15	87
TOTALS:	10,257	196,032		
Total unduplicated clients (month):	3,886			
Total unduplicated clients (YTD):	9,194			

This final FY 2025 Monthly and Year-to-Date Service Utilization Summary for services through February 2026 is being provided following completion of the FY 2025 grant closeout review process. Reports for the same service period were previously shared during the April 2026 and May 2026 Partnership meetings. The current report, generated on May 28, 2026, reflects finalized utilization data and no changes were identified when compared to the data previously shared on May 11, 2026.

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

February 2026

FUNDING SOURCE(S) INCLUDED:

Ryan White Part A

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AIDS Pharmaceutical Assistance (LPAP/CPAP)
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Other Professional Services
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Substance Abuse Services (residential)

Service Units Unduplicated Client Count

Monthly Year-to-date Monthly Year-to-date

8	78	4	8
193	8,190	167	2,254
4,245	101,023	1,922	8,503
15	590	6	124
418	11,031	319	2,833
1,228	27,608	736	4,065
0	13	0	4

TOTALS: 7,407 173,987

Total unduplicated clients (month):

2,913

Total unduplicated clients (YTD):

9,089

MONTHLY AND YEAR-TO-DATE SERVICE UTILIZATION SUMMARY

FOR THE PERIOD OF:

February 2026

FUNDING SOURCE(S) INCLUDED:

Ryan White MAI

SERVICE CATEGORIES

Core Medical Services

Medical Case Management

Outpatient Ambulatory Health Services

Support Services

Medical Transportation

Outreach Services

	Service Units		Unduplicated Client Count	
	Monthly	Year-to-date	Monthly	Year-to-date
Medical Case Management	2,547	19,130	1,269	2,171
Outpatient Ambulatory Health Services	292	2,610	226	731
Medical Transportation	2	256	2	65
Outreach Services	9	49	6	30
TOTALS:	2,850	22,045		
Total unduplicated clients (month):	1,400			
Total unduplicated clients (YTD):	2,454			

Miami-Dade County Ryan White Part A/MAI Program

Service Unit Definitions

Service Categories	Service Unit Definition
Core Medical Services	
AIDS Pharmaceutical Assistance (Local Pharmaceutical Assistance Program; LPAP)	1 filled prescription
Health Insurance Premium & Cost Sharing Assistance	1 health insurance payment (copayment or deductible)
Medical Case Management (MCM; Incl. Treatment Adherence)	1 MCM encounter
Mental Health Services	1 individual or group encounter
Oral Health Care	1 oral health care visit
Outpatient/Ambulatory Health Services	1 medical visit
Substance Abuse Outpatient Care	1 individual or group encounter
Support Services	
Emergency Financial Assistance (limited access)	1 filled prescription
Food Bank	1 bag of groceries
Medical Transportation	1 medical transportation voucher or one-way rideshare trip
Other Professional Services (Legal Assistance & Permanency Planning)	1 hour of legal assistance
Outreach Services	1 individual encounter
Substance Abuse Services-Residential	1 day of residential substance abuse services

NOTE: MAI-funded services are limited to minority clients from priority subpopulations or emerging need subpopulations.

Project #: BURW3501		AWARD AMOUNTS		ACTIVITIES	
Grant Award Amount Formula		16,176,379.00		FORMULA	
Grant Award Amount FY23 Formula		1,500.00		PY_FORMULA	
Grant Award Amount Supplemental		7,957,734.00		SUPPLEMENTAL	
Grant Award Amount FY23 Supplemental		89,039.00		PY_SUPPLEMENTAL	
				FY 2025 Award	
				\$24,224,652	
Carryover Award of FY'24 Formula Funds		800,000.00		CARRYOVER	
Total Award		\$	25,024,652.00		

CONTRACT ALLOCATIONS/ FORMULA, SUPPLEMENTAL & CARRYOVER			
DIRECT SERVICES:			
Core Medical Services		Allocations	Carryover (C/O) Allocations
5	AIDS Pharmaceutical Assistance	5,744.00	
9	Health Insurance Services	490,526.00	
2	Medical Case Management	6,377,000.00	
7	Mental Health Therapy/Counseling	54,303.00	
4	Oral Health Care	4,631,775.00	
3	Outpatient/Ambulatory Health Svcs	7,007,729.00	
8	Substance Abuse - Outpatient	3,000.00	
CORE Services Totals:		18,570,077.00	
Support Services		Allocations	Carryover Allocations
14	Emergency Financial Assistance	0.00	
6	Food Bank	848,861.00	640,000.00
10	Medical Transportation	62,888.00	160,000.00
15	Other Professional Services	18,700.00	
13	Outreach Services	140,661.00	
11	Substance Abuse - Residential	1,611,000.00	
SUPPORT Services Totals:		2,682,110.00	800,000.00
FY 2025 Award (not including C/O)		21,252,187.00	
DIRECT SERVICES TOTAL:		\$	22,052,187.00
Total Core Allocation		18,570,077.00	
Target at least 80% core service allocation		17,001,749.60	
Current Difference (Short) / Over		\$	1,568,327.40
Recipient Admin. (GC, GTL, BSR Staff)		\$	2,368,904.00
Quality Management		\$	603,561.00
			2,972,465.00
(+) Unobligated Funds / (-) Over Obligated:			
Unobligated Funds (Formula & Supp)		\$	-
Unobligated Funds (Carry Over)		\$	-
			25,024,652.00
Core medical % against Total Direct Service Allocation (Not including C/O):			
Cannot be under 75%		87.38%	Within Limit
Quality Management % of Total Award (Not including C/O):			
Cannot be over 5%		2.49%	Within Limit
OMB-GC Administrative % of Total Award (Cannot include C/O):			
Cannot be over 10%		9.78%	Within Limit

CURRENT CONTRACT EXPENDITURES			
DIRECT SERVICES:			
Account	Core Medical Services	Expenditures	Carryover (C/O) Expenditures
5606970000	AIDS Pharmaceutical Assistance	3,110.33	
5606920000	Health Insurance Services	489,755.12	
5606870000	Medical Case Management	6,313,337.80	
5606860000	Mental Health Therapy/Counseling	52,617.50	
5606900000	Oral Health Care	4,513,801.00	
5606610000	Outpatient/Ambulatory Health Svcs	6,971,950.08	
5606910000	Substance Abuse - Outpatient	780.00	
CORE Services Totals:		18,345,351.83	
Account	Support Services	Expenditures	Carryover Expenditures
5606940000	Emergency Financial Assistance	0.00	
5606980000	Food Bank	848,717.20	640,000.00
5606460000	Medical Transportation	62,229.06	160,000.00
5606890000	Other Professional Services	17,559.00	
5606950000	Outreach Services	122,055.02	
5606930000	Substance Abuse - Residential	1,522,000.00	
SUPPORT Services Totals:		2,572,560.28	800,000.00
FY 2025 Award (not including C/O)		20,917,912.11	
TOTAL EXPENDITURES DIRECT SVCS & % :		\$	21,717,912.11
			98.48%
Formula Expenditure %			
		97.61%	
5606710000	Recipient Administration	2,317,213.43	97.82%
5606880000	Quality Management	602,153.97	
			2,919,367.40
Grant Unexpended Balance		FY 2025 Award	Carryover
		387,372.49	(0.00)
			387,372.49
Total Grant Expenditures & %		\$	24,637,279.51
			98.45%
Core medical % against Total Direct Service Expenditures (Not including C/O):			
Cannot be under 75%		87.70%	Within Limit
Quality Management % of Total Award (Not including C/O):			
Cannot be over 5%		2.49%	Within Limit
OMB-GC Administrative % of Total Award (Cannot include C/O):			
Cannot be over 10%		9.57%	Within Limit
Printed On: 5/28/2026			

PROJECT #: BURW3501	AWARD AMOUNTS	ACTIVITIES
Grant Award Amount MAI	2,563,697.00	MAI
Carryover Award of FY'24 MAI Funds	1,539,152.00	MAI_CARRYOVER
Total Award	\$ 4,102,849.00	

Priority Order	CONTRACT ALLOCATIONS			
	DIRECT SERVICES:			
	Core Medical Services	Allocations	Carryover (C/O) Allocations	
	AIDS Pharmaceutical Assistance			
	Health Insurance Services			
1	Medical Case Management	969,689.00	307,830.00	1,277,519.00
6	Mental Health Therapy/Counseling	18,960.00		
	Oral Health Care			
3	Outpatient/Ambulatory Health Svcs	873,094.63	846,658.37	1,719,753.00
5	Substance Abuse - Outpatient	8,058.00		
CORE Services Totals:		1,869,801.63	1,154,488.37	3,024,290
Support Services				Carryover Allocations
8	Emergency Financial Assistance	0.00		
	Food Bank			
7	Medical Transportation	14,628.00		
	Other Professional Services			
4	Outreach Services	39,816.00		
	Substance Abuse - Residential			
SUPPORT Services Totals:		54,444.00	0.00	
FY 2025 Award (not including C/O)		1,924,245.63		
Carryover Award			1,154,488.37	
DIRECT SERVICES TOTAL:		\$	3,078,734.00	

Total Core Allocation	1,869,801.63
Target at least 80% core service allocation	1,539,396.50
Current Difference (Short) / Over	\$ 330,405.13

Recipient Admin. (OMB-GC)	\$	256,369.00		
Quality Management	\$	100,000.00	356,369.00	\$ 3,435,103.00
(+) Unobligated Funds / (-) Over Obligated:				
Unobligated Funds (MAI)	\$	283,082.37		
Unobligated Funds (Carry Over)	\$	384,663.63	667,746.00	4,102,849.00

Core medical % against Total Direct Service Allocation (Not including C/O):		
Cannot be under 75%	97.17%	Within Limit
Quality Management % of Total Award (Not including C/O):		
Cannot be over 5%	3.90%	Within Limit
OMB-GC Administrative % of Total Award (Cannot include C/O):		
Cannot be over 10%	10.00%	Within Limit

CURRENT CONTRACT EXPENDITURES			
-------------------------------	--	--	--

DIRECT SERVICES:			
Account	Core Medical Services	Expenditures	Carryover (C/O) Expenditures
5606970000	AIDS Pharmaceutical Assistance		
5606920000	Health Insurance Services		
5606870000	Medical Case Management	792,192.45	307,830.00
5606860000	Mental Health Therapy/Counseling	0.00	
5606900000	Oral Health Care		
5606610000	Outpatient/Ambulatory Health Svcs	5,204.46	717,453.98
5606910000	Substance Abuse - Outpatient	0.00	
CORE Services Totals:		797,396.91	1,025,283.98
Account	Support Services	Expenditures	Carryover Expenditures
5606940000	Emergency Financial Assistance	0.00	
5606980000	Food Bank		
5606460000	Medical Transportation	14,281.18	
5606890000	Other Professional Services		
5606950000	Outreach Services	39,816.00	
5606930000	Substance Abuse - Residential		
SUPPORT Services Totals:		54,097.18	0.00
FY 2025 Award (not including C/O)		851,494.09	

TOTAL EXPENDITURES DIRECT SVCS & %:	\$	1,876,778.07	60.96%
-------------------------------------	----	--------------	--------

Grant Unexpended Balance	FY 2025 Award	Carryover	
	1,382,476.21	513,868.02	1,896,344.23

Total Grant Expenditures & % (Including C/O):	\$	2,206,504.77	53.78%
---	----	--------------	--------

Core medical % against Total Direct Service Expenditures (Not including C/O):		
Cannot be under 75%	93.65%	Within Limit
Quality Management % of Total Award (Not including C/O):		
Cannot be over 5%	3.90%	Within Limit
OMB-GC Administrative % of Total Award (Cannot include C/O):		
Cannot be over 10%	8.96%	Within Limit



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, July 24, 2026

9:30 a.m. – 11:30 a.m.

Behavioral Science Research

2121 Ponce de Leon Blvd., Ste. 240

Miami, FL 33134

AGENDA

- | | |
|--|--------------------------|
| I. Call to Order | Cristhian Ysea |
| II. Introductions | All |
| III. Meeting Housekeeping | Cristhian Ysea |
| IV. Floor Open to the Public | Dr. Lawrence Friedman |
| V. Review/Approve Agenda | All |
| VI. Review/Approve Minutes of May 15, 2026 | All |
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| • ADAP | Dr. Javier Romero |
| • Vacancy Report | Marlen Meizoso |
| • Partnership Report (information only) | Dr. Lawrence Friedman |
| VIII. Standing Business | |
| • Oral Health Care Items: | All |
| ○ Request of Codes D0602, D0603, D9110 and D0171 | |
| ○ Implants Utilization and Feasibility | |
| • Allowable Conditions Response to “Dear Colleague” Letter Continued | All |
| • Ryan White Prescription Drug Formulary | All |
| • 2026 Calendar of Activities | All |
| IX. New Business | |
| • None | All |
| X. Announcements and Open Discussion | All |
| XI. Next Meeting: August 28, 2026 at BSR | Dr. Lawrence Friedman |
| XII. Adjournment | Cristhian Ysea |

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ADAP Miami-Dade / Summary Report ^ - June-26

ENROLLMENTS, CHD PHARMACY EXPENDITURES & C&D UTILIZATION

Month	New	Re-E	Clients ^	EE
Apr-26	54	816	7,552	220
May-26	44	544	7,508	174
Jun-26	53	430	7,448	170
Jul-26				262
Aug-26				282
Sep-26				293
Oct-26				413
Nov-26				514
Dec-26				842
Jan-27				770
Feb-27				789
Mar-27				779
FY26/27	151	1,790	7,448	5,508

CHD Pharmacy	RXs	Patients	RX/Pt
\$ 815,360.52	2,373	573	4.1
\$ 955,667.79	2,639	658	4.0
\$ 986,283.56	2,797	678	4.1
\$ 2,757,311.87	7,809	1,909	4.1

C & D	Report
2,092	04/20/26
1,873	05/31/26
1,778	07/01/26
5,743	

Projections

604

7,160

\$11,029,247.48

31,236

7,636

PROGRAM UPDATE

07/07/26	Benefit Level ^	7,448	Direct Dispense [07/07/26]	65%	4,970	C & D	35%	2,478
06/01/26	Cabenuva ®	242	Direct Dispense	76%	183	C & D	24%	59
06/01/26	Medicare eligible ^	43	7-month window around 65th birthday [03/1961 - 09/1961] - Target clients this month: 11					
06/01/26	On Medicare	220	Active clients with copayment assistance					
06/01/26	Self-Insured C & D	0	ESI: 210 – Medicare Part D: 220 – COBRA: 7 – ACA-MP: 1,462					

ADAP CHANGES

5022

1756

EFFECTIVE

DIRECT DISPENSE

C & D * SELF-INSURED

BIKTARVY

DESCOVY

07/01/26

[0 % - 400 %] [cap 21,000 pts]

CVS Caremark card required [OR suspension]

Reinstated

Reinstated. No PA.

•\$75,000,000 [06/30/27] ▪ Direct Dispense; cap 21,000 pts – [05/31>18,000+] ▪ Biktarvy & Descovy reinstated ▪ C&D Self-INS'd ▪ No Premium Assistance ▪

Report Notes:

*SOURCES: Provide/ADAP & QS/1 systems. ^Data Subject to review. ^^Open + Active pts. * Expenditures NOT included: DD pts. from WP & PBM pharmacies [100+]*

For additional information, please visit www.adapmiami.com or contact adap.flhohmdc@flhealth.gov

Florida Department of Health in Miami-Dade County

ADAP Program & FLDOHMDCHD Pharmacy - 2515 W Flagler Street, Suite 102. Miami, Florida 33135 - Phone: 305-643-7400



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, July 24, 2026

9:30 a.m. – 11:30 a.m.

Behavioral Science Research

2121 Ponce de Leon Blvd., Ste. 240

Miami, FL 33134

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| ○ Implants Utilization and Feasibility | |
| • Allowable Conditions Response to “Dear Colleague” Letter Continued | All |
| • Ryan White Prescription Drug Formulary | All |
| • 2026 Calendar of Activities | All |
| IX. New Business | |
| • None | All |
| X. Announcements and Open Discussion | All |
| XI. Next Meeting: August 28, 2026 at BSR | Dr. Lawrence Friedman |
| XII. Adjournment | Cristhian Ysea |

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MAKE A DIFFERENCE IN HIV CARE IN MIAMI-DADE COUNTY!

The Miami-Dade HIV/AIDS Partnership

The official Ryan White Program Planning Council in Miami-Dade County and the Advisory Board for HIV/AIDS to the Miami-Dade County Mayor and Board of County Commissioners.



YOUR VOICE. YOUR COMMUNITY. REAL IMPACT.



Influence how more than
\$27 MILLION
in Ryan White funds
are used



Help improve HIV care
and support services for
9,000+ PEOPLE
living with HIV



Advise Miami-Dade County
leaders on HIV-related
issues and policies



Build leadership, policy
and community
engagement skills

OPEN SEATS ON THE PARTNERSHIP



5 RYAN WHITE CLIENT SEATS

For Ryan White Program Clients
who are not affiliated or employed
by a Ryan White Part A funded
service provider.



5 COMMUNITY & PROFESSIONAL SEATS

For people with HIV, service providers,
and community stakeholders with
experience, skills, and a commitment
to our community.



Your voice is needed. Your community counts.
Join us in making an impact!

BECOME A MEMBER IN 3 EASY STEPS

1

CONFIRM ELIGIBILITY

See requirements
to the right.

2

CONTACT US

Email us to learn more
and request an
application.

3

ENGAGE & SERVE

Meet with the Membership
Committee and start
making a difference!



For more information, contact:

mdcpartnership@behavioralscience.com

DO YOU QUALIFY?

If you answer "YES" to these
questions, you could qualify
for membership!



Are you a resident of
Miami-Dade County?



Are you a registered
voter in Miami-Dade County?

Note: Some seats for people with
HIV are exempt from this
requirement.



Can you volunteer
three to five hours
per month for
Partnership activities?



**THANK YOU
FOR YOUR SERVICE
TO PEOPLE WITH HIV!**

Be sure to bring a Ryan White
client to your next meeting!

COMMITTEE OPPORTUNITIES

Work with a dedicated team of volunteers on these Partnership committees
PEOPLE WITH HIV ARE ENCOURAGED TO JOIN!

**YOUR INTEREST.
YOUR IMPACT.
YOUR COMMUNITY.**

CARE & TREATMENT COMMITTEE



8

OPEN SEATS



4
PEOPLE
WITH HIV



4
GENERAL
MEMBERS

Allocate Ryan White funds, set priorities for
health and support services, and improve
care for people with HIV.

HOUSING COMMITTEE



7

OPEN SEATS



1
PEOPLE
WITH HIV



6
GENERAL
MEMBERS

Work with the City of Miami Housing Opportunities
for Persons with AIDS Program to address
housing challenges for people with HIV.

MEDICAL CARE SUBCOMMITTEE



8

OPEN SEATS



5
PEOPLE
WITH HIV



3
EXPERTISE-
SPECIFIC SEATS*

Oversee updates to medical treatment guidelines
and the Ryan White Prescription Drug Formulary.

*Examples: Physician, Pharmacist, Mental Health Professional

PREVENTION COMMITTEE



4

OPEN SEATS



4

PEOPLE
WITH HIV

Develop and monitor local Ending the HIV Epidemic
activities and mobilize community action on the
latest HIV prevention initiatives.

STRATEGIC PLANNING COMMITTEE



10

OPEN SEATS



5
PEOPLE
WITH HIV



5
GENERAL
MEMBERS

Develop and monitor the official HIV Prevention and
Care Integrated Plan and the State of HIV report.

COMMUNITY COALITION



4

OPEN SEATS



4

PEOPLE
WITH HIV

Recruit and train new members, share meals
and testimonials, and strengthen community
engagement.



For more information, contact:

mdcpartnership@behavioralscience.com



Your voice matters.

Help shape the future of HIV care and prevention
in Miami-Dade County.





MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, July 24, 2026

9:30 a.m. – 11:30 a.m.

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Partnership Report to Committees and Subcommittee July 20, 2026, Meeting

Supporting documents related to motions in this report are available online *at the new URL*: partnershipmiami.org/partnership/#pshipreports1, or from Behavioral Science Research Corp. (BSR) staff at mdcpartnership@behavioralscience.com.

Visit www.partnershipmiami.org/calendars/ for details on future meetings.

Members heard regular reports and voted to approve the motions listed below. Members also heard a presentation by Queen Holden, Perinatal HIV Coordinator, Florida Department of Health in MDC, *Provider Support for Lactation in the HIV Community of Miami-Dade County*.

Prevention Committee

1. Motion to approve Crystal Lopez as the FCPN Prevention Alternate.
-

Care and Treatment Committee

2. Motion to approve Yvette Gonzalez as the FCPN Care and Treatment Division Representative.
 3. Motion to accept the proposed Annual Service Description Review Protocol as presented.
 4. Motion to allocate all funding recommendations as presented on the Ryan White Part A FY 2026-27 (YR 36) Sweeps 1 funding recommendation.
 5. Motion to allocate Ryan White MAI FY 2026-27 (YR 36) Sweeps 1 funding recommendations of \$18,960 to Mental Health Services, \$8,058 to Substance Abuse Outpatient Care, and \$39,816 to Outreach Services, as presented.
 6. Motion to allocate the remaining Ryan White MAI FY 2026-27 (YR 36) Sweeps 1 funding recommendations as presented.
-

Strategic Planning Committee

7. Motion to approve the Partnership Assessment of the Efficiency of the Administrative Mechanism survey, as presented.
 8. Motion to approve the Ryan White Part A/MAI Subrecipient Assessment of the Efficiency of the Administrative Mechanism survey, as presented.
-

New Business

Members agreed by consensus to change their September meeting date to September 21, 2026.



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

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RYAN WHITE PROGRAM ORAL HEALTH CARE FORMULARY
REVIEW REQUEST FORM

Date of Request: May 13, 2026

Request for (check one):

☒ Addition ☐ Deletion

FOR OMB-GC USE ONLY

5/14/2026 Date Request Received *gjs*
____ Date of **Medical Care Subcommittee**
____ Review/Action (Approved? ☐ Yes ☐ No)
____ Date of **Care & Treatment Committee**
____ Review/Action (Approved? ☐ Yes ☐ No)
____ Date of **Miami-Dade HIV/AIDS Partnership**
____ Review/Action (Approved? ☐ Yes ☐ No)

- (1) Current Dental Terminology (CDT) code and description of dental procedure:
D0171 Post Operative Re-evaluation *(Diagnostic: re-evaluation - post-operative office visit)* *gjs*
- (2) Please list other procedures currently found in the local Ryan White Program Oral Health Care Formulary which are considered similar to the proposed addition/deletion.

- (3) Should there be any restrictions on the use/availability of this procedure? ☐ Yes ☐ No ☐ N/A
If yes, please explain. _____
- (4) Please indicate your reason for this request:
☐ New dental procedure available
☐ Dental procedure no longer used
☐ Change in dental code – The replacement code is _____
☒ Other (specify): Not covered under the Ryan White formulary
- (5) Please justify the reason for the addition or deletion of this code. Provide appropriate references where applicable. Attach back-up documentation to support your request, as needed.
A focused follow up visit after a procedure (e.g., extraction) to assess healing or complications. Appropriate for assessing healing, managing complications, or addressing concerns following dental procedures.

I understand that this request will be considered at the next meeting of the Miami-Dade HIV/AIDS Partnership's Medical Care Subcommittee (MCSC). If approved by the MCSC, this request will then be reviewed by the Care and Treatment Committee, and by the full Partnership.

Signature of Dentist Requesting this Change:

Name of Dentist Requesting this Change:

Phone Number:

Email:

Name of Organization/Clinic:

Please submit this request by email to: RyanWhiteProgram@miamidade.gov

DO NOT INCLUDE ANY CLIENT IDENTIFYING INFORMATION

**RYAN WHITE PROGRAM ORAL HEALTH CARE FORMULARY
REVIEW REQUEST FORM**

Date of Request: May 13, 2026

Request for (check one):

☒ Addition ☐ Deletion

FOR OMB-GC USE ONLY

5/14/2026 Date Request Received *ops*
Date of **Medical Care Subcommittee**
Review/Action (Approved? ☐ Yes ☐ No)
Date of **Care & Treatment Committee**
Review/Action (Approved? ☐ Yes ☐ No)
Date of **Miami-Dade HIV/AIDS Partnership**
Review/Action (Approved? ☐ Yes ☐ No)

- (1) Current Dental Terminology (CDT) code and description of dental procedure:
D0602 - Caries Risk Assessment, (Moderate Risk)
[Diagnostic: caries risk assessment and documentation, with a finding of moderate risk] *ops*
- (2) Please list other procedures currently found in the local Ryan White Program Oral Health Care Formulary which are considered similar to the proposed addition/deletion.

- (3) Should there be any restrictions on the use/availability of this procedure? ☐ Yes ☐ No ☐ N/A
If yes, please explain. _____
- (4) Please indicate your reason for this request:
☐ New dental procedure available
☐ Dental procedure no longer used
☐ Change in dental code – The replacement code is _____
☒ Other (specify): Not covered under Ryan White
- (5) Please justify the reason for the addition or deletion of this code. Provide appropriate references where applicable. Attach back-up documentation to support your request, as needed.
Medically appropriate to identify patients with increased risk for future caries and guide preventive care planning. Supports early intervention, individualized recall intervals, and prevention of disease progression

I understand that this request will be considered at the next meeting of the Miami-Dade HIV/AIDS Partnership's Medical Care Subcommittee (MCSC). If approved by the MCSC, this request will then be reviewed by the Care and Treatment Committee, and by the full Partnership.

Signature of Dentist Requesting this Change:

Name of Dentist Requesting this Change:

Phone Number:

Email:

Name of Organization/Clinic:

Please submit this request by email to: RyanWhiteProgram@miamidade.gov

DO NOT INCLUDE ANY CLIENT IDENTIFYING INFORMATION

RYAN WHITE PROGRAM ORAL HEALTH CARE FORMULARY
REVIEW REQUEST FORM

Date of Request: May 13, 2026

Request for (check one):

X Addition Deletion

FOR OMB-GC USE ONLY

5/14/2026 Date Request Received *ops*
 Date of **Medical Care Subcommittee**
 Review/Action (Approved? Yes No)
 Date of **Care & Treatment Committee**
 Review/Action (Approved? Yes No)
 Date of **Miami-Dade HIV/AIDS Partnership**
 Review/Action (Approved? Yes No)

- (1) Current Dental Terminology (CDT) code and description of dental procedure:

D0603 Caries Risk Assessment (High Risk)

[Diagnostic: caries risk assessment and documentation, with a finding of high risk] *ops*

- (2) Please list other procedures currently found in the local Ryan White Program Oral Health Care Formulary which are considered similar to the proposed addition/deletion.
- _____
- _____

- (3) Should there be any restrictions on the use/availability of this procedure? ☐ Yes ☒ No ☐ N/A
If yes, please explain. _____
- _____

- (4) Please indicate your reason for this request:

☐ New dental procedure available

☐ Dental procedure no longer used

☐ Change in dental code – The replacement code is _____

☒ Other (specify): Not covered under the Ryan White formulary

- (5) Please justify the reason for the addition or deletion of this code. Provide appropriate references where applicable. Attach back-up documentation to support your request, as needed.

Clinically necessary for patients with active disease or significant risk factors. Supports intensified preventive strategies and risk based treatment planning.

I understand that this request will be considered at the next meeting of the Miami-Dade HIV/AIDS Partnership's Medical Care Subcommittee (MCSC). If approved by the MCSC, this request will then be reviewed by the Care and Treatment Committee, and by the full Partnership.

Signature of Dentist Requesting this Change:

Name of Dentist Requesting this Change:

Phone Number:

Email:

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Please submit this request by email to:

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RYAN WHITE PROGRAM ORAL HEALTH CARE FORMULARY
REVIEW REQUEST FORM

Date of Request: May 13, 2026

Request for (check one):

X Addition Deletion

FOR OMB-GC USE ONLY

5/14/2026 Date Request Received *CPK*
 Date of **Medical Care Subcommittee**
 Review/Action (Approved? Yes No)
 Date of **Care & Treatment Committee**
 Review/Action (Approved? Yes No)
 Date of **Miami-Dade HIV/AIDS Partnership**
 Review/Action (Approved? Yes No)

- (1) Current Dental Terminology (CDT) code and description of dental procedure:
D9110 Palliative Treatment of Dental Pain -per visit
[Adjunctive General Services, Unclassified Treatment: palliative treatment of dental pain - per visit (treatment that relieves pain but is not curative; services provided do not have distinct procedure codes)] *CPK*
- (2) Please list other procedures currently found in the local Ryan White Program Oral Health Care Formulary which are considered similar to the proposed addition/deletion.

- (3) Should there be any restrictions on the use/availability of this procedure? ☐ Yes ☐ No ☐ N/A
If yes, please explain. _____

- (4) Please indicate your reason for this request:
☐ New dental procedure available
☐ Dental procedure no longer used
☐ Change in dental code – The replacement code is _____
☒ Other (specify): Not covered under the Ryan White formulary
- (5) Please justify the reason for the addition or deletion of this code. Provide appropriate references where applicable. Attach back-up documentation to support your request, as needed.
Medically necessary for acute pain relief and stabilization when definitive
treatment cannot be completed.

I understand that this request will be considered at the next meeting of the Miami-Dade HIV/AIDS Partnership's Medical Care Subcommittee (MCSC). If approved by the MCSC, this request will then be reviewed by the Care and Treatment Committee, and by the full Partnership.

Signature of Dentist Requesting this Change:

Name of Dentist Requesting this Change:

Phone Number:

Email:

Name of Organization/Clinic:

Please submit this request by email to: RyanWhiteProgram@miamidade.gov

DO NOT INCLUDE ANY CLIENT IDENTIFYING INFORMATION



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, July 24, 2026

9:30 a.m. – 11:30 a.m.

Behavioral Science Research

2121 Ponce de Leon Blvd., Ste. 240

Miami, FL 33134

AGENDA

- | | |
|--|-----------------------|
| I. Call to Order | Cristhian Ysea |
| II. Introductions | All |
| III. Meeting Housekeeping | Cristhian Ysea |
| IV. Floor Open to the Public | Dr. Lawrence Friedman |
| V. Review/Approve Agenda | All |
| VI. Review/Approve Minutes of May 15, 2026 | All |
| VII. Reports | |
| • Ryan White Program | Carla Valle-Schwenk |
| • ADAP | Dr. Javier Romero |
| • Vacancy Report | Marlen Meizoso |
| • Partnership Report (information only) | Dr. Lawrence Friedman |
| VIII. Standing Business | |
| • Oral Health Care Items: | All |
| ○ Request of Codes D0602, D0603, D9110 and D0171 | |
| ○ Implants Utilization and Feasibility | |
| • Allowable Conditions Response to “Dear Colleague” Letter Continued | All |
| • Ryan White Prescription Drug Formulary | All |
| • 2026 Calendar of Activities | All |
| IX. New Business | |
| • None | All |
| X. Announcements and Open Discussion | All |
| XI. Next Meeting: August 28, 2026 at BSR | Dr. Lawrence Friedman |
| XII. Adjournment | Cristhian Ysea |

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership’s Medical Care Subcommittee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

Follow Us: www.PartnershipMiami.org | facebook.com/HIVPartnership | instagram.com/hiv_partnership/



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, July 24, 2026

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Follow Us: www.PartnershipMiami.org | facebook.com/HIVPartnership | instagram.com/hiv_partnership/

April 7, 2025

Dear Ryan White HIV/AIDS Program Awardees and Stakeholders,

Since its inception over three decades ago, the Ryan White HIV/AIDS Program (RWHAP) has been a cornerstone of hope and a lifeline for Americans living with HIV and AIDS. The largest federal initiative of its kind, RWHAP has provided critical care and support to low-income, uninsured, and under-insured Americans with HIV and AIDS. During his first term, President Donald J. Trump championed the ambitious Ending the HIV Epidemic initiative, a transformative plan to reduce new HIV infections by 75 percent by 2025 and 90 percent by 2030. Now in President Trump's second term, the Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau (HAB) stands recommitted and ready to achieve this bold agenda. With your support and collaboration, HAB will leverage the RWHAP to fulfill this Administration's pledge to all Americans, particularly those living with HIV/AIDS—to Make America Healthy Again.

Program integrity and responsible fiscal stewardship are critical elements of the indispensable services RWHAP provides. But under the previous administration, certain interpretations of RWHAP's allowable uses, as outlined in prior communications, co-opted the program's patient-centered mission in favor of radical ideological agendas and policies.¹ Congress envisioned RWHAP as a lifeline for those battling HIV and AIDS, not as a vehicle for broader social or medical experimentation. More to the point, this politicized commandeering risks diverting resources away from HIV/AIDS patients, whose lives depend on RWHAP's core medical services.

Accordingly, HAB reaffirms that RWHAP funds shall be marshaled exclusively toward evidence-based interventions proven to combat HIV, sustain viral suppression, and improve the quality of life for those living with the disease. This includes outpatient medical care, antiretroviral therapies, and essential support services such as case management, housing assistance, and substance use disorder treatment—each a vital thread in the fabric of HIV/AIDS care, each demonstrably aligned with the program's statutory intent.²

We clarify and remind RWHAP awardees that funds are not authorized for procedures or interventions beyond the scope of outpatient care, as expressly delineated in Policy Clarification Notice #16-02.³ The prohibition on surgeries and inpatient care, irrespective of setting or anesthesia, remains absolute, ensuring that resources remain laser-focused on the HIV-specific

¹ Health Resources and Services Administration, Gender Affirming Care and the Ryan White HIV/AIDS Program (2021), <https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/hiv-care/gender-affirming-care-rwhap.pdf>.

² See generally 42 U.S.C. §§ 300ff-11-140.

³ Eligible Individuals & Allowable Uses of Funds Clarification Notice. Available at: https://hab.hrsa.gov/sites/default/files/hab/program-grants-management/ServiceCategoryPCN_16-02Final.pdf.

needs of eligible individuals. Where disparities persist, particularly among underserved populations, our response shall be targeted, evidence-driven enhancements to HIV care delivery, not a broadening of scope that risks undermining this progress.

The Trump Administration, in its renewed commitment to Make America Healthy Again, calls upon RWHAP recipients and subrecipients to join us in this realignment. We will provide training and technical assistance through the AIDS Education and Training Centers to ensure culturally competent, patient-centered care that maximizes antiretroviral adherence and viral suppression—goals that unite us in the fight to end the HIV epidemic. Together, we can honor the congressional vision that birthed RWHAP, delivering on its promise to those it was designed to serve, without deviation or distraction.

Sincerely,

A handwritten signature in black ink, reading "Thomas J. Engels". The signature is fluid and cursive, with the first name "Thomas" and last name "Engels" clearly legible.

Thomas J. Engels
Administrator

	Local Justification		HHS Criteria								Comments
			A	B	C	D	D.1	D.2	D.3	D.4	
Check all that apply if yes for each condition and add any comments, as applicable.	Is this condition HIV related?	Is this condition a comorbidity or complication related to HIV?	Are there evidence-based interventions to combat HIV?	Does addressing the condition promote viral suppression?	Does addressing the condition improve quality of life?	For this condition, will a diagnostic procedure be required ?	If a diagnostic/treatment procedure is required, will any of the following be needed:				
Definition of terms sample based on American Society of Anesthesiology							Anesthesia for surgeries in which you lose consciousness e.g. open-heart .	Sedation for minimal invasive procedures e.g. colonoscopy.	Anesthesia for region such as those used during childbirth, or nerve-blocks.	Anesthesia for local procedures such as stitches, mole removal that numbs a small area.	No conditions/treatments are covered by the RWP if: requiring inpatient hospitalization, are performed at an emergency room or at urgent care facilies, and use general anesthesia.
Anesthesia term							general anesthesia?	IV/monitored sedation?	regional anesthesia?	local anesthesia?	
BONE AND JOINT DISEASES (E.G., ORTHOPEDICS/RHEUMATOLOGY):											
osteoarthritis	☐	☒	☐	☐	☒	☐	☐	☐	☐	☐	Diagnostics covered to rule out other complicating conditions.
BONE AND JOINT DISEASES (E.G., ORTHOPEDICS/RHEUMATOLOGY) and CHIROPRACTIC/PHYSICAL MEDICINE:											
avascular necrosis of hip, knee, etc. (Stage 1 or 2 only for CHIROPRACTIC/PHYSICAL MEDICINE)	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	Coverage limited up to joint replacement/surgical interventions; Coverage in RW may include diagnostics, physical therapy, medications, limited to outpatient procedures or no anesthesia. Anything beyond this would require a case review.
fibromyalgia	☐	☒	☐	☐	☒	☐	☐	☐	☐	☐	
myopathy/myalgia, HIV-related (chronic for CHIROPRACTIC/PHYSICAL MEDICINE)	☒	☒	☐	☐	☒	☐	☐	☐	☐	☐	
osteopenia/osteoporosis	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	
rheumatic diseases	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	
CARDIOLOGY:											
atherosclerosis	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	Coverage in RW may include diagnostics, medications, limited to outpatient procedures or no anesthesia.
coronary artery disease	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	
heart disease	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	
hyperlipidemia	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	Coverage in RW limited to medications
peripheral artery disease	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	Coverage in RW may include diagnostics, medications, limited to outpatient procedures or no anesthesia.
peripheral vascular disease	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	
phlebitis	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	

	Local Justification		HHS Criteria								Comments
			A	B	C	D	D.1	D.2	D.3	D.4	
Check all that apply if yes for each condition and add any comments, as applicable.	Is this condition HIV related?	Is this condition a comorbidity or complication related to HIV?	Are there evidence-based interventions to combat HIV?	Does addressing the condition promote viral suppression?	Does addressing the condition improve quality of life?	For this condition, will a diagnostic procedure be required ?	If a diagnostic/treatment procedure is required, will any of the following be needed:				
Definition of terms sample based on American Society of Anesthesiology							Anesthesia for surgeries in which you lose consciousness e.g. open-heart .	Sedation for minimal invasive procedures e.g. colonoscopy.	Anesthesia for region such as those used during childbirth, or nerve-blocks.	Anesthesia for local procedures such as stitches, mole removal that numbs a small area.	No conditions/treatments are covered by the RWP if: requiring inpatient hospitalization, are performed at an emergency room or at urgent care facilies, and use general anesthesia.
Anesthesia term							general anesthesia?	IV/monitored sedation?	regional anesthesia?	local anesthesia?	
CHIROPRACTIC/PHYSICAL MEDICINE:											
HIV-related chronic arthralgia	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	
peripheral neuropathy	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	
COLORECTAL:											
abnormal anal Pap smears	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	
fistulas	☒	☒	☐	☐	☒	☒	☐	☐	☐	☐	
hernias	☐	☐	☐	☐	☒	☒	☐	☐	☐	☐	
COLORECTAL and ONCOLOGY:											
anal cancers	☒	☒	☐	☐	☒	☒	☒	☒	☐	☒	If any diagnosis leads to surgery, the RWP can't cover general anesthesia.
DENTAL (ORAL HEALTH CARE):											
giant aphthous ulcers	☒	☒	☐	☐	☒	☒	☐	☐	☐	☒	
DENTAL (ORAL HEALTH CARE); and EAR, NOSE and THROAT (ENT)/OTOLARYNGOLGY:											
human papillomavirus associated oral lesions	☒	☒	☐	☐	☒	☒	☒	☐	☐	☒	Treatment may require general/local anesthesia.
DENTAL (ORAL HEALTH CARE); EAR, NOSE and THROAT (ENT)/OTOLARYNGOLGY; and ONCOLOGY:											
dental cancers	☒	☒	☐	☐	☒	☒	☒	☐	☐	☒	Treatment may require general/local anesthesia.
DERMATOLOGY:											
dermatitis	☐	☒	☐	☐	☒	☐	☐	☐	☐	☒	local anesthesia maybe need for biopsy
eczema/seborrheic dermatitis	☐	☒	☐	☐	☒	☐	☐	☐	☐	☒	local anesthesia maybe need for biopsy
eosinophilic folliculitis	☐	☒	☐	☐	☒	☐	☐	☐	☐	☒	local anesthesia maybe need for biopsy
impetigo	☐	☒	☐	☐	☒	☐	☐	☐	☐	☒	local anesthesia maybe need for biopsy
Methicillin-resistant Staphylococcus aureus (MRSA)	☐	☒	☐	☐	☒	☐	☐	☐	☐	☒	local anesthesia maybe need for biopsy
molluscum contagiosum	☐	☒	☐	☐	☒	☐	☐	☐	☐	☒	local anesthesia maybe need for biopsy
photodermatitis	☐	☒	☐	☐	☒	☐	☐	☐	☐	☒	local anesthesia maybe need for biopsy

	Local Justification		HHS Criteria								
			A	B	C	D	D.1	D.2	D.3	D.4	
Check all that apply if yes for each condition and add any comments, as applicable.	Is this condition HIV related?	Is this condition a comorbidity or complication related to HIV?	Are there evidence-based interventions to combat HIV?	Does addressing the condition promote viral suppression?	Does addressing the condition improve quality of life?	For this condition, will a diagnostic procedure be required ?	If a diagnostic/treatment procedure is required, will any of the following be needed:				Comments
Definition of terms sample based on American Society of Anesthesiology							Anesthesia for surgeries in which you lose consciousness e.g. open-heart .	Sedation for minimal invasive procedures e.g. colonoscopy.	Anesthesia for region such as those used during childbirth, or nerve-blocks.	Anesthesia for local procedures such as stitches, mole removal that numbs a small area.	No conditions/treatments are covered by the RWP if: requiring inpatient hospitalization, are performed at an emergency room or at urgent care facilies, and use general anesthesia.
Anesthesia term							general anesthesia?	IV/monitored sedation?	regional anesthesia?	local anesthesia?	
pruritus (as a symptom of undiagnosed xerosis, psoriasis, scabies, lymphoma, etc.)	☒	☒	☐	☐	☒	☐	☐	☐	☐	☒	
psoriasis	☒	☒	☐	☐	☒	☐	☐	☐	☐	☒	
skin conditions and symptoms, including skin appendages and oral mucosa	☒	☒	☐	☐	☒	☐	☐	☐	☐	☒	
warts	☒	☒	☐	☐	☒	☐	☐	☐	☐	☒	
DERMATOLOGY and GENITOURINARY (GU)/ GYNECOLOGY (GYN)/OBSTETRICS (OB):											
tinea infections	☒	☒	☐	☐	☒	☐	☐	☐	☐	☒	
DERMATOLOGY and INFECTIOUS DISEASES:											
herpes simplex virus	☒	☒	☐	☐	☒	☐	☐	☐	☐	☒	
DERMATOLOGY and ONCOLOGY:											
Kaposi's sarcoma	☒	☒	☐	☐	☒	☐	☒	☒	☐	☒	
skin cancers (squamous cell carcinoma, etc.)	☒	☒	☐	☐	☒	☐	☒	☐	☐	☒	
DERMATOLOGY and PODIATRY:											
onychomycosis	☒	☒	☐	☐	☒	☐	☐	☐	☐	☒	
EAR, NOSE AND THROAT (ENT)/OTOLARYNGOLOGY:											
chronic sinusitis	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
oral human papillomavirus	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
oral candidiasis	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
ENDOCRINOLOGY:											
diabetes	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
hypogonadism	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	

	Local Justification		HHS Criteria								
			A	B	C	D	D.1	D.2	D.3	D.4	
Check all that apply if yes for each condition and add any comments, as applicable.	Is this condition HIV related?	Is this condition a comorbidity or complication related to HIV?	Are there evidence-based interventions to combat HIV?	Does addressing the condition promote viral suppression?	Does addressing the condition improve quality of life?	For this condition, will a diagnostic procedure be required ?	If a diagnostic/treatment procedure is required, will any of the following be needed:				Comments
Definition of terms sample based on American Society of Anesthesiology							Anesthesia for surgeries in which you lose consciousness e.g. open-heart .	Sedation for minimal invasive procedures e.g. colonoscopy.	Anesthesia for region such as those used during childbirth, or nerve-blocks.	Anesthesia for local procedures such as stitches, mole removal that numbs a small area.	No conditions/treatments are covered by the RWP if: requiring inpatient hospitalization, are performed at an emergency room or at urgent care facilies, and use general anesthesia.
Anesthesia term							general anesthesia?	IV/monitored sedation?	regional anesthesia?	local anesthesia?	
GASTROINTESTINAL:											
colitis (syphilitic colitis--very rare)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
diarrhea	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
esophageal candidiasis	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
nausea/vomiting	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
GENITOURINARY (GU)/ GYNECOLOGY											
abnormal Pap smear	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
cervical human papillomavirus	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
erectile dysfunction*	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
hematuria (related to neoplasms)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
pregnancy	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
scrotal candidiasis	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
vaginitis	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
*IMPORTANT NOTE: the local Ryan White Part A/MAI Program will only pay for evaluation and diagnostics of erectile dysfunction; but the treatment of erectile dysfunction is <u>not</u> covered by the local Ryan White Part A/MAI Program.											
GENITOURINARY (GU)/ GYNECOLOGY											
gynecological cancers	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
prostate cancer	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
HEMATOLOGY:											
anemia	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
leukopenia	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
neutropenia	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
thrombocytopenia	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
HEMATOLOGY and ONCOLOGY:											
polycythemia vera	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
											STOPPED HERE

OpenEvidence AI Review-Selections from Miami-Dade Ryan White Allowable Conditions List

EAR, NOSE AND THROAT (ENT)/OTOLARYNGOLOGY:								
Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Chronic Sinusitis	Yes — more common and severe in HIV, especially with CD4 <200; correlates inversely with CD4 count	Complication (immunosuppression-related); also comorbidity in those with preserved immunity	ART (immune reconstitution), antibiotics, nasal corticosteroids; CT/MRI for refractory cases; ENT referral for surgical cases	Indirectly — ART-mediated immune reconstitution reduces recurrence	Yes — reduces chronic congestion, headache, recurrent infections	CT sinus ± endoscopic sinus surgery for refractory cases	Local anesthesia for nasal endoscopy; general anesthesia for functional endoscopic sinus surgery (FESS)	[1-6]
Oral HPV	Yes — HIV increases HPV persistence and oncogenic risk; oral/pharyngeal cancers elevated in PWH	Comorbidity (STI co-infection) and complication (impaired HPV clearance due to immunosuppression)	HPV vaccination (9-valent); ART; treatment of warts (cryotherapy, laser, surgical excision); oral cancer screening	Yes — viral suppression lowers risk of HPV-related cancers	Yes — reduces cancer risk and lesion burden	Oral exam; biopsy of suspicious lesions	Local anesthesia for biopsy	[1-2, 7-8]
Oral Candidiasis	Yes — AIDS-defining indicator of immunosuppression; typically CD4 <200	Complication (opportunistic infection)	ART; topical antifungals (nystatin, clotrimazole); systemic fluconazole for moderate-severe cases	Yes — ART restores immunity and reduces recurrence	Yes — improves oral comfort, nutrition, and medication adherence	Clinical diagnosis (visual exam); KOH prep or culture if atypical	None typically required	[1-2, 9]

ENDOCRINOLOGY:								
Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Diabetes	Yes — HIV infection and ART (especially PIs, certain NRTIs, INSTIs) increase insulin resistance and diabetes risk	Comorbidity (metabolic complication of HIV/ART)	ART optimization (avoid offending agents if possible); lifestyle modifications; metformin, GLP-1 RAs; screening per ADA guidelines; A1C may underestimate glycemia in PWH — use fasting glucose	Indirectly — metabolic stability supports ART adherence and engagement in care	Yes — reduces cardiovascular risk, neuropathy, and other complications	Lab-based (fasting glucose, OGTT); no invasive procedure typically required	None	[1, 7, 10-13]
Hypogonadism	Yes — prevalence 13–40% in men with HIV; associated with advanced disease, ART (efavirenz), and functional causes	Comorbidity (endocrine complication)	Morning testosterone testing; LH/FSH to determine primary vs. central; testosterone replacement therapy if confirmed; lifestyle modifications (exercise, weight loss)	Indirectly — treating hypogonadism improves energy, mood, and adherence	Yes — improves fatigue, libido, mood, bone density, body composition	Lab-based (serum testosterone, LH, FSH, SHBG); no invasive procedure	None	[1-2, 14-16]

OpenEvidence AI Review-Selections from Miami-Dade Ryan White Allowable Conditions List

GASTROINTESTINAL:								
Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Syphilitic Colitis	Yes — syphilis prevalence is higher in PWH (especially MSM); GI syphilis is rare but more likely in immunocompromised patients	Comorbidity (STI co-infection with GI manifestation)	Penicillin G benzathine (IM) or IV penicillin for neurosyphilis; colonoscopy/sigmoidoscopy with biopsy for diagnosis; must differentiate from IBD	Yes — treating syphilis reduces transient viral load increases and CD4 declines seen with active syphilis	Yes — resolves diarrhea, bleeding, abdominal pain	Colonoscopy or sigmoidoscopy with biopsy; serologic testing	Sedation (moderate/conscious sedation for colonoscopy/sigmoidoscopy)	[9, 17-21]
Diarrhea	Yes — HIV enteropathy damages gut-associated lymphoid tissue; also caused by OIs, ART side effects	Complication (HIV enteropathy, OIs) and comorbidity (ART-related)	ART (immune reconstitution); stool studies for OIs; supportive care (hydration, electrolytes, nutritional support); ART adjustment if drug-related	Yes — ART treats underlying HIV enteropathy	Yes — improves nutrition, hydration, daily functioning	Stool studies; colonoscopy if persistent/unexplained	Sedation for colonoscopy if needed	[1-2, 7]
Esophageal Candidiasis	Yes — AIDS-defining illness; typically CD4 <200	Complication (opportunistic infection)	Systemic fluconazole (14–21 days) is first-line; itraconazole solution as alternative; endoscopy if no response to empiric antifungal therapy within 7 days; ART for immune reconstitution	Yes — ART restores immunity and dramatically reduces incidence	Yes — resolves odynophagia, improves nutrition and medication tolerance	Empiric antifungal trial first; EGD (upper endoscopy) if no response in 7 days	Sedation (moderate/conscious sedation for EGD)	[9, 22-24]
Nausea/Vomiting	Yes — common ART side effect; also caused by OIs, HIV-related GI disease	Comorbidity (ART adverse effect) and complication (OIs, HIV enteropathy)	Antiemetics; ART regimen adjustment if drug-related; evaluate for OIs or other GI pathology	Yes — managing nausea improves ART adherence	Yes — improves comfort, nutrition, medication tolerance	Lab workup; upper endoscopy if persistent/unexplained	Sedation for EGD if needed	[1-2, 7]

OpenEvidence AI Review-Selections from Miami-Dade Ryan White Allowable Conditions List

				and thus viral suppression				
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GENITOURINARY (GU)/ GYNECOLOGY (GYN)/OBSTETRICS (OB):								
Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Abnormal Pap Smear	Yes — PWH have higher rates of cervical dysplasia and HPV persistence; annual Pap recommended for PWH	Complication (HPV-related dysplasia in setting of immunosuppression)	Annual cervical Pap for PWH; colposcopy with directed biopsy for abnormal results (ASC-H, LSIL, HSIL); HPV vaccination; ART	Yes — viral suppression associated with lower risk of HPV-related cancers	Yes — early detection and treatment prevent cervical cancer	Colposcopy with directed biopsy	Local anesthesia (cervical block for colposcopy/biopsy; paracervical block for LEEP/excisional procedures)	[1-2, 14, 25]
Cervical HPV	Yes — HIV impairs HPV clearance; cervical cancer is an AIDS-defining malignancy	Complication (impaired HPV clearance) and comorbidity (STI co-infection)	HPV vaccination (9-valent); annual cervical screening; colposcopy for abnormal cytology; treatment of CIN per guidelines; ART	Yes — viral suppression lowers cancer risk	Yes — prevents cervical cancer progression	Pap smear, HPV co-testing; colposcopy with biopsy for abnormal results	Local anesthesia for colposcopy/biopsy; regional (paracervical) for LEEP	[1, 8, 14, 26]
Erectile Dysfunction	Yes — prevalence 30–50% in men with HIV (vs. general population); HIV is an independent risk factor	Comorbidity (multifactorial: HIV-related, ART-related, psychosocial)	PDE5 inhibitors (caution with PI drug interactions); address psychosocial factors; testosterone replacement if hypogonadal; ART optimization; behavioral therapy	Indirectly — addressing ED improves QoL and engagement in care	Yes — improves sexual health, relationships, psychological well-being	Lab-based (testosterone, glucose, lipids); sexual history questionnaires (IIEF-5)	None typically	[1, 7, 27-32]

OpenEvidence AI Review-Selections from Miami-Dade Ryan White Allowable Conditions List

Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Hematuria (Neoplasm-Related)	Yes — PWH at increased risk for kidney and bladder cancers; hematuria found in 25% of PWH in one series	Comorbidity (non-AIDS-defining cancers) and complication (HIV-associated nephropathy, immune complex disease)	Urinalysis; urine cytology; cystoscopy; CT urogram; renal biopsy if nephropathy suspected; cancer treatment per standard guidelines with ART continuation	Yes — viral suppression associated with lower cancer mortality	Yes — early cancer detection improves survival	Cystoscopy; CT urogram; renal biopsy if indicated	Sedation for cystoscopy (local or moderate sedation); sedation/general anesthesia for renal biopsy	[1-2, 33-38]
Pregnancy	Yes — HIV management is critical during pregnancy to prevent perinatal transmission	Comorbidity (requires specialized ART management)	ART initiation as early as possible (preferably preconception); DTG + TAF/FTC preferred regimen; viral load monitoring; cesarean delivery if VL >1000 near delivery; neonatal ARV prophylaxis	Yes — ART during pregnancy achieves/maintains viral suppression, preventing transmission	Yes — prevents perinatal HIV transmission; improves maternal and neonatal outcomes	Routine prenatal labs; HIV VL monitoring; expedited HIV testing if status unknown at delivery	Regional anesthesia (epidural/spinal for labor/delivery/cesarean); general anesthesia for emergency cesarean	[1-2, 39-40]
Scrotal Candidiasis	Indirectly — cutaneous/genital fungal infections are more prevalent in immunocompromised PWH, though scrotal candidiasis is not a classic HIV-defining condition	Comorbidity (fungal infection in immunocompromised host)	Topical antifungals (clotrimazole, miconazole); systemic fluconazole for refractory cases; ART for immune reconstitution; glucose control if diabetic	Indirectly — ART-mediated immune reconstitution reduces fungal infections	Yes — resolves discomfort and skin breakdown	Clinical diagnosis; KOH prep or fungal culture if atypical	None typically	[1, 7, 9, 41]

OpenEvidence AI Review-Selections from Miami-Dade Ryan White Allowable Conditions List

Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Vaginitis	Yes — bacterial vaginosis, vulvovaginal candidiasis, and trichomoniasis are all more prevalent in women with HIV	Comorbidity (altered vaginal flora due to immunosuppression) and complication (increases HIV genital shedding and transmission risk)	Treatment per CDC STI guidelines (same as HIV-negative women); metronidazole for BV/trichomoniasis; azoles for VVC; ART	Indirectly — treating vaginitis reduces HIV genital shedding	Yes — reduces symptoms, decreases HIV transmission risk	Wet mount, KOH prep, vaginal pH, NAAT for trichomoniasis; pelvic exam	None typically	[1, 42-45]

Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Gynecological Cancers	Yes — cervical cancer is AIDS-defining; vulvar/vaginal cancers also HPV-related and elevated in PWH	Complication (cervical cancer is AIDS-defining) and comorbidity (non-AIDS-defining gynecologic cancers)	HPV vaccination; cervical screening; colposcopy/biopsy; surgery, chemotherapy, radiation per NCCN guidelines; ART continuation during cancer therapy	Yes — viral suppression associated with lower cancer incidence and mortality	Yes — cancer treatment improves survival and function	Colposcopy, biopsy, imaging (CT/MRI/PET); surgical staging	Ranges: local anesthesia (biopsy) to general anesthesia (surgical staging/debulking, radical hysterectomy)	[1-2, 8, 14, 26]
Prostate Cancer	Not directly HIV-related — screening recommendations same as general population per USPSTF	Comorbidity (age-related; not increased by HIV per current evidence)	PSA screening per USPSTF; biopsy if indicated; standard treatment (surgery, radiation, ADT) with ART continuation; co-management with HIV specialist	Indirectly — ART should continue during cancer treatment	Yes — cancer treatment improves survival	PSA, DRE; prostate biopsy (transrectal or transperineal); MRI	Local anesthesia ± sedation for prostate biopsy; general or regional anesthesia for prostatectomy	[1-2, 14, 26]

OpenEvidence AI Review-Selections from Miami-Dade Ryan White Allowable Conditions List

HEMATOLOGY:								
Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Anemia	Yes — prevalence ~6.9% in PWH vs. 3.4% in HIV-negative; multifactorial (HIV, OIs, ART toxicity)	Complication (direct viral effect, ART toxicity, OIs)	ART optimization; iron supplementation if deficient; erythropoietin-stimulating agents; treat underlying cause (OIs, drug toxicity); CBC monitoring	Yes — correcting anemia improves energy and ART adherence	Yes — reduces fatigue, improves functional status	CBC, reticulocyte count, iron studies, B12/folate; bone marrow biopsy if unexplained	Sedation or local anesthesia for bone marrow biopsy if needed	[1-2, 7, 46]
Leukopenia	Yes — common in untreated HIV; also ART-related (e.g., zidovudine)	Complication (direct viral effect, ART toxicity)	ART optimization; discontinue offending agents; CBC monitoring; evaluate for OIs or malignancy	Yes — ART restores hematopoiesis	Yes — reduces infection susceptibility	CBC with differential; bone marrow biopsy if persistent/unexplained	Local anesthesia ± sedation for bone marrow biopsy if needed	[1-2, 7, 46]

Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Neutropenia	Yes — prevalence ~1.3% in PWH vs. 0.2% in HIV-negative; increases risk of bacterial infections	Complication (direct viral effect, ART toxicity, OIs)	G-CSF (granulocyte colony-stimulating factor); ART optimization; infection prevention; discontinue offending drugs	Yes — ART restores neutrophil counts	Yes — reduces infection risk and hospitalizations	CBC with differential; bone marrow biopsy if persistent/unexplained	Local anesthesia ± sedation for bone marrow biopsy if needed	[1, 7, 26, 46]
Thrombocytopenia	Yes — prevalence ~5.5% in PWH vs. 2.7% in HIV-negative; can be immune-mediated (HIV-ITP)	Complication (immune-mediated, direct viral effect, ART toxicity)	ART (often first-line for HIV-ITP); corticosteroids, IVIG, TPO-receptor agonists for refractory cases; platelet monitoring	Yes — ART is primary treatment for HIV-associated ITP	Yes — reduces bleeding risk	CBC, peripheral smear; bone marrow biopsy if atypical	Local anesthesia ± sedation for bone marrow biopsy if needed	[1-2, 7, 46]

HEMATOLOGY and ONCOLOGY:								
Condition	HIV-Related?	Comorbidity or Complication of HIV?	Evidence-Based Interventions?	Promotes Viral Suppression?	Improves QoL?	Diagnostic Procedure Required?	Anesthesia/Sedation Type if Procedure Needed	References
Polycythemia Vera	No — PV is a JAK2-driven myeloproliferative neoplasm; HIV does not predispose to PV; association is coincidental	Not an HIV comorbidity or complication; coincidental occurrence	Phlebotomy, low-dose aspirin, hydroxyurea, ropeginterferon alfa-2b, ruxolitinib per standard MPN guidelines; ART should continue; monitor for CYP3A4 drug interactions	Not directly — but ART should be maintained during PV treatment	Yes — PV treatment reduces thrombosis risk and symptoms	CBC, JAK2 mutation testing, serum EPO, bone marrow biopsy	Local anesthesia ± sedation for bone marrow biopsy	[47-51]

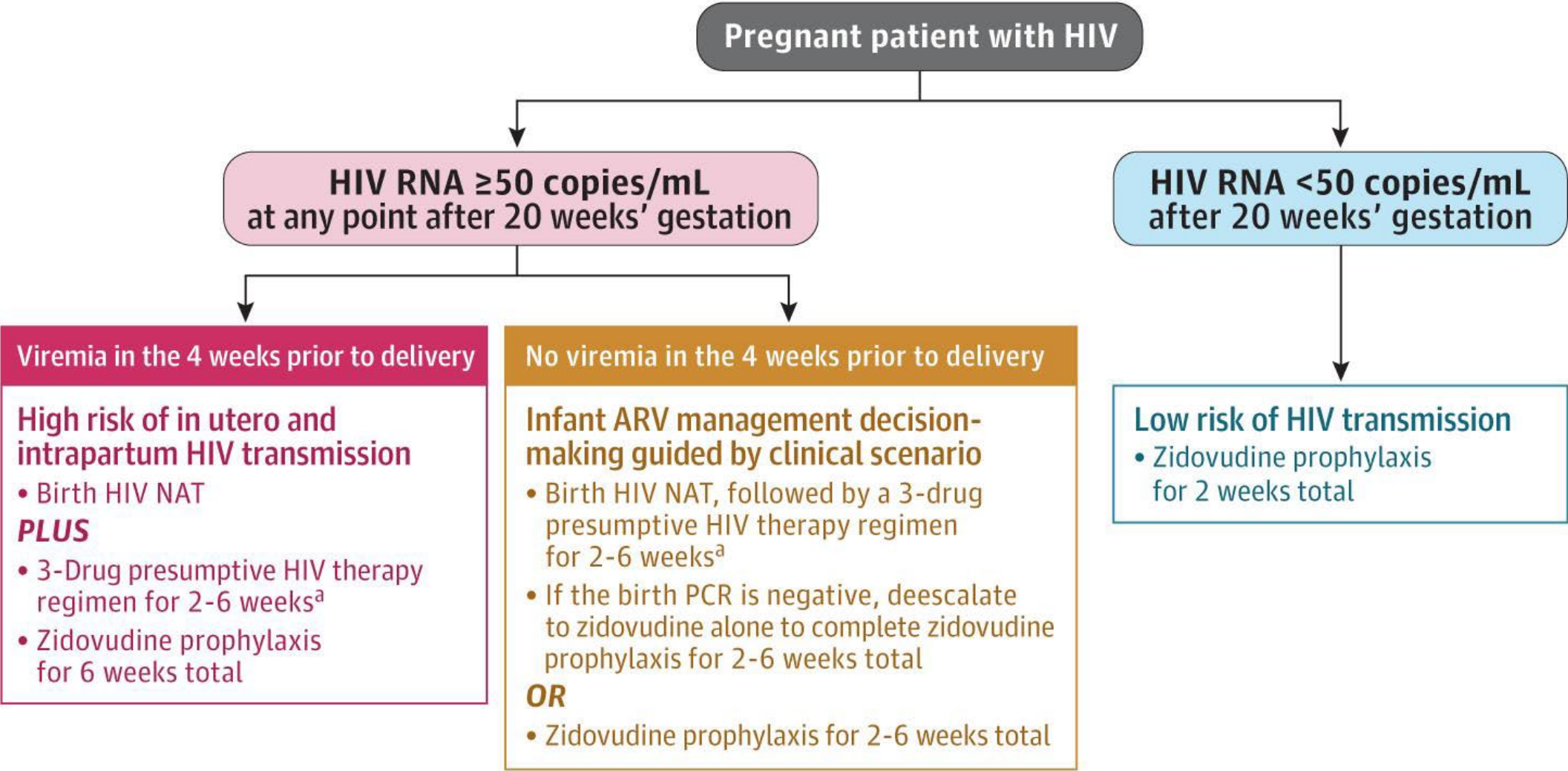
Key overarching principles from the HIVMA/IDSA 2024 Guidance:

- **Viral suppression is urged for all comorbidities** — higher CD4 counts (≥350 cells/μL) and maximal viral suppression are associated with lower 5-year mortality among PWH with any cancer diagnosis and lower incidence of both AIDS-defining and non-AIDS-defining conditions. [1][1]
- **Surgical and procedural decisions** for PWH should be based on shared decision-making and should **not depend on CD4 count or HIV RNA level alone**. [1]
- ART should be **continued during all cancer therapies and surgical procedures**, with modifications only in consultation with an HIV specialist to manage drug-drug interactions. [1][5]
- For conditions requiring anesthesia, PWH should be **appropriately considered for all medical and surgical procedures** without HIV-related stigma or discrimination. [1]

Would you like to explore the specific drug-drug interactions between ART regimens and anesthetic agents or chemotherapy protocols for any of these conditions?

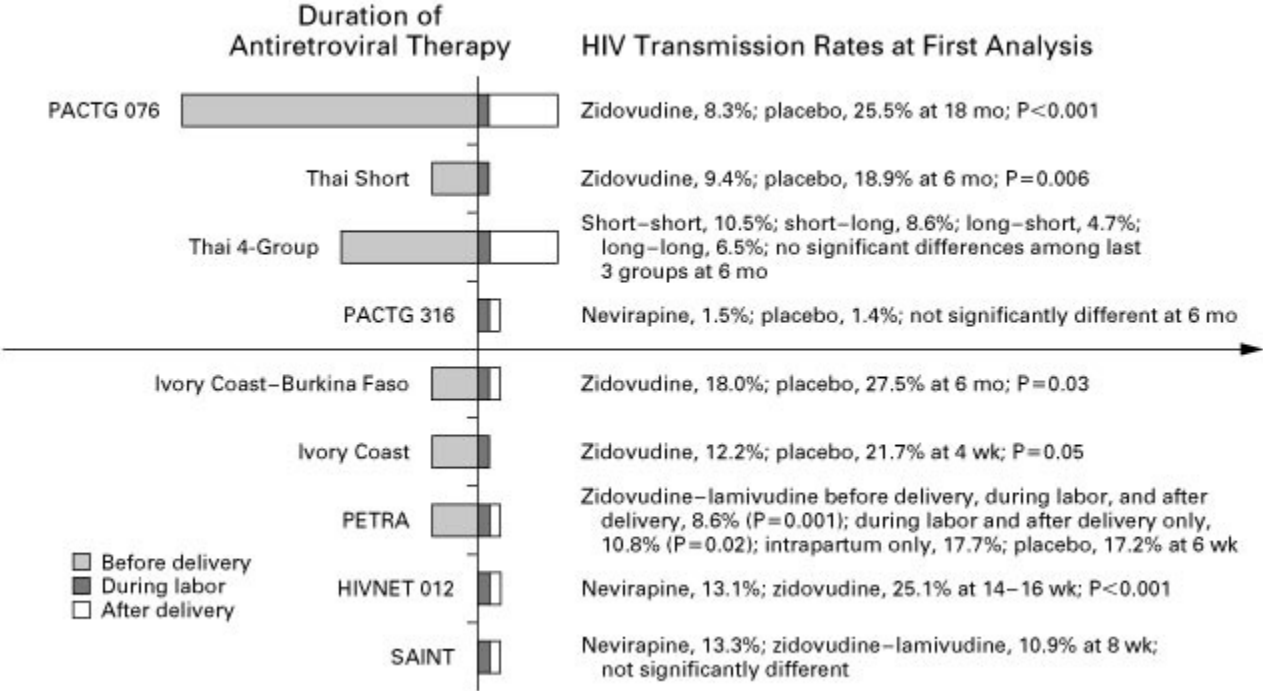
Relevant images

2 items



Algorithm for Antiretroviral (ARV) Treatment of Infants With In Utero or Intrapartum HIV Exposure by Risk of Transmission

JN JAMA February 22, 2026



Duration of Antiretroviral Therapy and Perinatal Transmission of HIV-1.

 NEJM June 12, 2002

I need to research each of these conditions in relation to HIV to build a comprehensive table. Let me start with broad searches.

Now I have sufficient evidence to construct the comprehensive table. Let me compile the information.

Below is a comprehensive reference table addressing each condition in the context of HIV. The table draws primarily from the [HIVMA/IDSA 2024 Primary Care Guidance](#) (Horberg et al.), the [\[1\] IAS-USA 2024 Recommendations](#), the [\[3\] HHS Perinatal Guidelines](#), the [\[4\] OI Guidelines](#), the [\[5\] NCCN Cancer in People with HIV Guidelines](#), the [\[6\] CDC STI Treatment Guidelines](#), and additional condition-specific literature a

Key overarching principles from the HIVMA/IDSA 2024 Guidance:

- **Viral suppression is urged for all comorbidities** — higher CD4 counts (≥ 350 cells/ μL) and maximal viral suppression are associated with lower 5-year mortality among PWH with any cancer diagnosis and lower incidence of both AIDS-defining and non-AIDS-defining conditions.[\[1\]](#)
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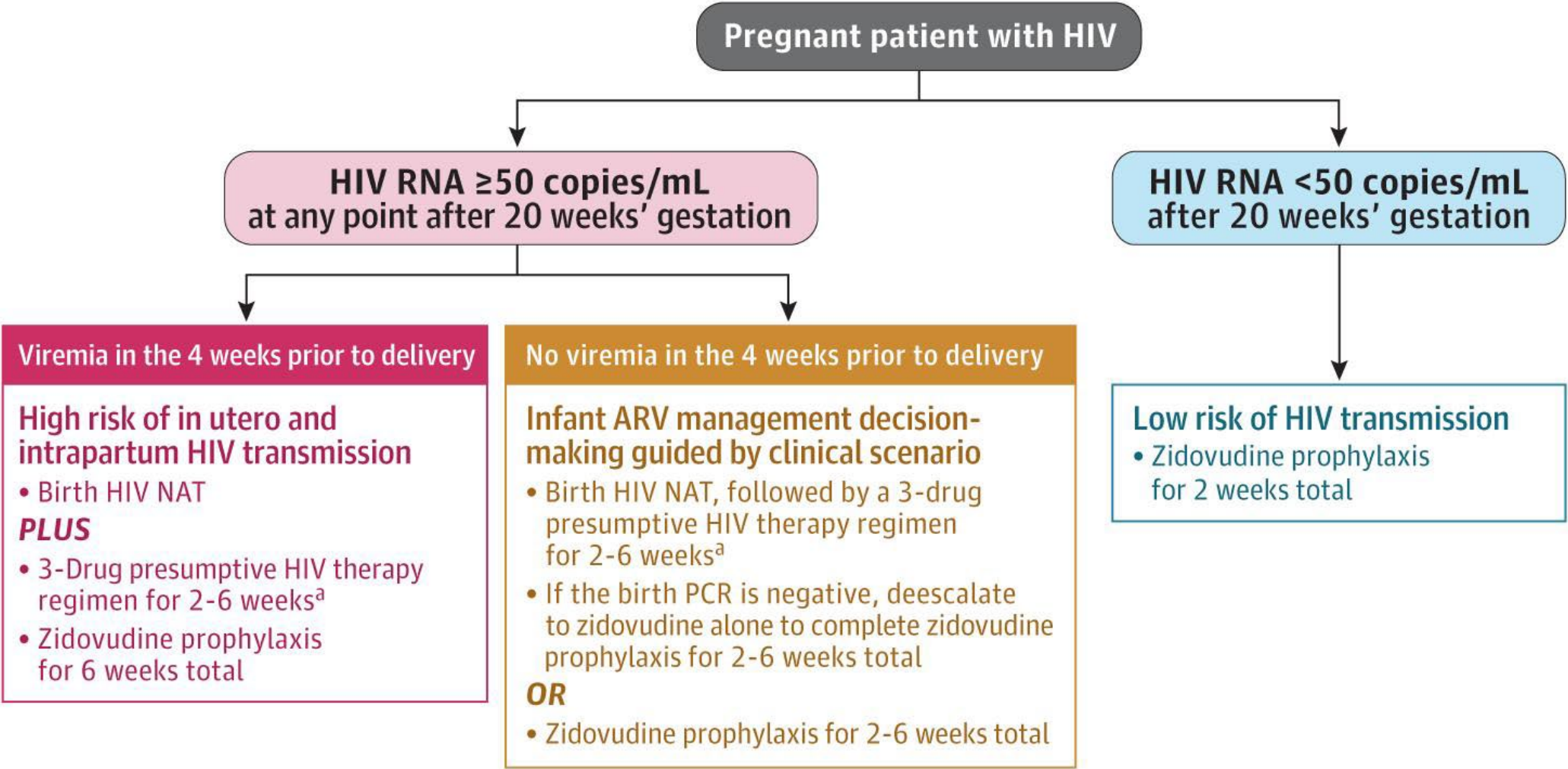


Figure Algorithm for Antiretroviral (ARV) Treatment of Infants With In Utero or Intrapartum HIV Exposure by Risk of Transmission Short WR, Sheth AN, Ciaranello A. [HIV During Pregnancy and Infant Feeding](#). Jama.

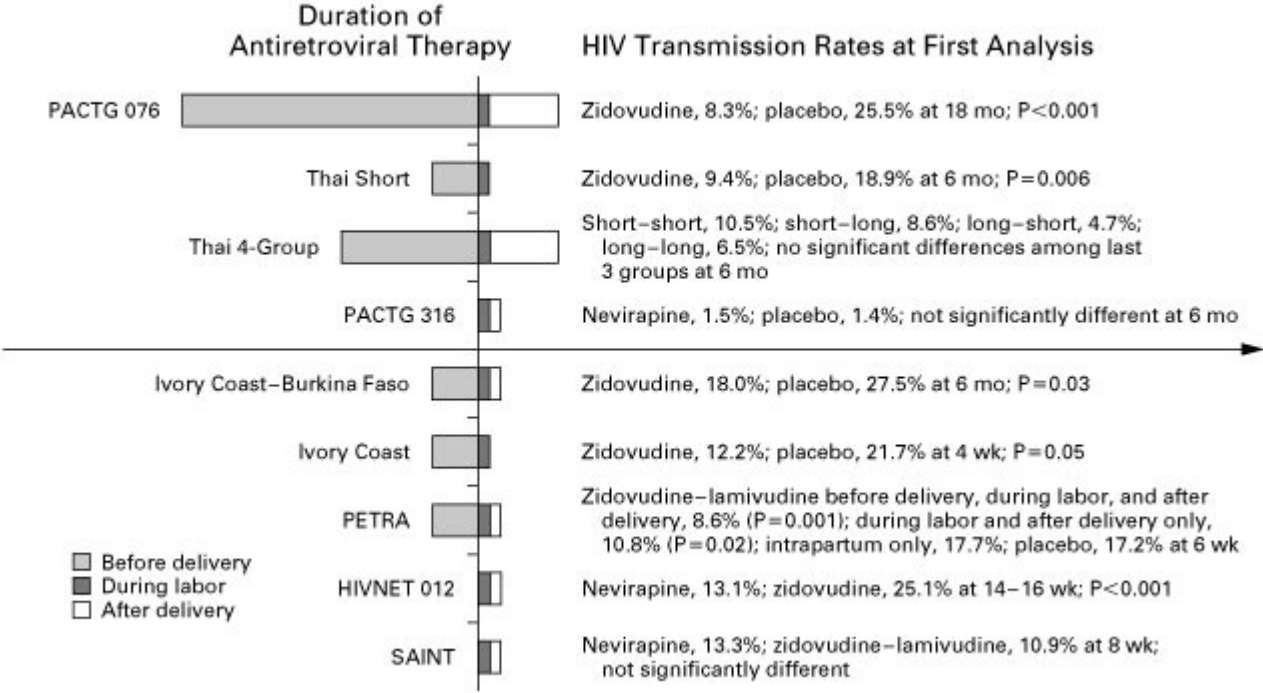


Figure 1 Duration of Antiretroviral Therapy

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MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, July 24, 2026

9:30 a.m. – 11:30 a.m.

Behavioral Science Research

2121 Ponce de Leon Blvd., Ste. 240

Miami, FL 33134

AGENDA

- | | |
|--|-----------------------|
| I. Call to Order | Cristhian Ysea |
| II. Introductions | All |
| III. Meeting Housekeeping | Cristhian Ysea |
| IV. Floor Open to the Public | Dr. Lawrence Friedman |
| V. Review/Approve Agenda | All |
| VI. Review/Approve Minutes of May 15, 2026 | All |
| VII. Reports | |
| • Ryan White Program | Carla Valle-Schwenk |
| • ADAP | Dr. Javier Romero |
| • Vacancy Report | Marlen Meizoso |
| • Partnership Report (information only) | Dr. Lawrence Friedman |
| VIII. Standing Business | |
| • Oral Health Care Items: | All |
| ○ Request of Codes D0602, D0603, D9110 and D0171 | |
| ○ Implants Utilization and Feasibility | |
| • Allowable Conditions Response to “Dear Colleague” Letter Continued | All |
| • Ryan White Prescription Drug Formulary | All |
| • 2026 Calendar of Activities | All |
| IX. New Business | |
| • None | All |
| X. Announcements and Open Discussion | All |
| XI. Next Meeting: August 28, 2026 at BSR | Dr. Lawrence Friedman |
| XII. Adjournment | Cristhian Ysea |

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership’s Medical Care Subcommittee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

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This is a comprehensive list of medications that may be required by individuals who have HIV or AIDS. To access these medications funded by the Ryan White Part A/MAI Program, eligible clients must also reside permanently in Miami-Dade County and have a gross household income below 400% of the most current Federal Poverty Level (FPL) guidelines used by the local Part A/MAI Program.

There may be special situations where medications are needed that are not on this list (i.e., HIV-related heart disease or HIV-related kidney failure) and there is a mechanism set up to deal with such extenuating circumstances. However, additions to the Formulary are currently restricted to life-saving or cost-saving medications.

IMPORTANT NOTES:

¹ Effective March 1, 2016, use local drug coding system (i.e., "RW Miami Pharma Code") as developed by Miami-Dade County Office of Management and Budget.

² Medications assigned a letter notation "A" are available through the Florida AIDS Drug Assistance Program (ADAP). These medications will only be covered by the County's Ryan White Part A or Minority AIDS Initiative Programs if the ADAP has a waitlist or the medications are not available through ADAP. In addition, if another letter notation is indicated, the specified criteria under the designated letter must be met. Refer to the accompanying Comments/Notations attachment for more details on each letter notation. **Yellow** shading in the list below reflects the addition of **any** new medication, ADAP or other. **Green** shading is a new or revised notation to an existing medication.

³ Prescription Drug referrals will be good for the life of the prescription and may be written for one (1) initial (original) and no more than five (5) monthly refills for medications listed on this Formulary as deemed necessary by the client's physician and as allowable by State of Florida law; unless the client becomes ineligible for Ryan White Part A or MAI Program-funded services.

⁴ Vaccines (Hep A, Hep B, Pneumovax, etc.) have been removed from the Ryan White Program Prescription Drug Formulary. Where applicable, vaccines may be provided and billed for under the Ryan White Program outpatient medical care services using the appropriate Current Procedural Terminology (CPT) or Healthcare Common Procedure Coding System (HCPCS) code, only if these vaccines are not available from any other funding source (e.g., Medicaid, ADAP, private insurance, etc.).

⁵ All medications dispensed should be generic unless a generic is not available. However, Ryan White Part A/MAI Program-funded prescription drug service providers must use the most cost-effective product, either brand or generic, whichever is less expensive at the time of dispensing.

⁶ There is no limitation on dosage or formulation unless otherwise noted specifically on this Formulary.

⁷ The Ryan White Program must always be used as the payer of last resort.

⁸ If the Notation cell on the Part A Formulary indicates an "A" and is highlighted yellow (or shaded) this means the medication was recently added to the ADAP Formulary through its Phase 2 expansion; and these medications are part of a transition grace period through June 30, 2018. During this grace period, clients may continue to use Part A to access these highlighted medications; but, they are expected to enroll in or maintain active enrollment in ADAP before June 30, 2018. An original prescription or electronic prescription (eScript) is required for ADAP enrollment. **This Notation is no longer applicable.**

⁹ Effective August 19, 2019, all antiretrovirals will be automatically added to the Ryan White Program Part A Prescription Drug Formulary once they are added to the Florida ADAP Formulary, unless the Part A Recipient (i.e., Miami-Dade County) deems discussion with the Partnership necessary.

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation ^{2,8}
Anti-HIV Agent Combination	Antiretroviral Agent - Integrase Strand Transfer Inhibitors / Nucleoside Reverse Transcriptase Inhibitors	Biktarvy®	bictegravir / emtricitabine / tenofovir alafenamide (BIC / TAF / FTC)	RX0425	A, GGG
Anti-HIV Agent Combination	Reverse Transcriptase Inhibitor (NNRTI) and Nucleoside Reverse Transcriptase Inhibitors (NRTIs)	Descovy®	emtricitabine / tenofovir alafenamide (FTC / TAF)	RX0423	A,CCC
Anti-HIV Agent Combination	reverse transcriptase inhibitor (NNRTI) and nucleoside reverse transcriptase inhibitors (NRTIs)	Odefsey®	emtricitabine / rilpivirine / tenofovir alafenamide (RPV / FTC / TAF)	RX0422	A,BBB
Anti-HIV Agent Combination	Antiretroviral Agent, Nucleos(t)ide Reverse Transcriptase Inhibitor	Truvada®	emtricitabine / tenofovir disoproxil fumarate (FTC / TDF)	RX0410	A
Anti-HIV Agent Combination	Integrase strand transfer inhibitor, pharmacokinetic enhancer, nucleos(t)ide analog HIV-1 reverse	Stribild	cobicistat / elvitegravir / emtricitabine / tenofovir disoproxil fumarate (EVG / COBI / FTC / TDF)	RX0411	A,OO
Anti-HIV Agent	Antiretroviral Agent-CCR5 Antagonist	Selzentry®	maraviroc (MVC)	RX0300	A,W,LL
Anti-HIV Agent	Antiretroviral Agent-Fusion Protein Inhibitor	Fuzeon®	enfuvirtide (ENF, T-20)	RX0301	A,U
Anti-HIV Agent	Antiretroviral Agent-Integrase Strand Transfer Inhibitor	Isentress®, Isentress HD®	raltegravir (RAL), raltegravir HD (RAL HD)	RX0302	A
Anti-HIV Agent	Antiretroviral Agent-Integrase Strand Transfer Inhibitor	Tivicay®	dolutegravir (DTG)	RX0322	SS,A
Anti-HIV Agent	Antiretroviral Agent-Non-Nucleoside Reverse Transcriptase Inhibitor	Intelence®	etravirine	RX0303	A,X
Anti-HIV Agent	Antiretroviral Agent-Non-Nucleoside Reverse Transcriptase Inhibitor	Sustiva®	efavirenz (EFV)	RX0305	A
Anti-HIV Agent	Antiretroviral Agent-Non-Nucleoside Reverse Transcriptase Inhibitor	Viramune®, Viramune XR®	nevirapine (NVP), nevirapine XR (NVP)	RX0306	A
Anti-HIV Agent Combination	reverse transcriptase inhibitor (NNRTI) and nucleos (t)ide reverse transcriptase inhibitors (NRTIs)	Complera®	emtricitabine / rilpivirine / tenofovir disoproxil fumarate (FTC / RPV / TDF)	RX0412	A,KK
Anti-HIV Agent	Antiretroviral Agent-Non-Nucleoside Reverse Transcriptase Inhibitors	Edurant®	rilpivirine (RPV)	RX0323	A,II
Anti-HIV Agent Combination	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Trizivir®	abacavir / lamivudine / zidovudine (ABC / 3TC / AZT)	RX0413	A,UU
Anti-HIV Agent Combination	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Combivir®	lamivudine / zidovudine (3TC / AZT)	RX0414	A
Anti-HIV Agent	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Emtriva®	emtricitabine (FTC)	RX0307	A

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation ^{2,8}
Anti-HIV Agent	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Epivir®	lamivudine (3TC)	RX0308	A
Anti-HIV Agent Combination	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Epzicom®	abacavir / lamivudine (ABC / 3TC)	RX0415	A,UU
Anti-HIV Agent	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Retrovir®	zidovudine (AZT)	RX0309	A
Anti-HIV Agent	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitor	Ziagen®	abacavir (ABC)	RX0312	A,UU
Anti-HIV Agent Combination	Antiretroviral Agent-Nucleoside Reverse Transcriptase Inhibitors Plus Integrase Strand Transfer Inhibitor	Triumeq®	abacavir / dolutegravir / lamivudine (DTG / ABC / 3TC)	RX0416	A,UU,VV
Anti-HIV Agent Combination	Reverse Transcriptase Inhibitors, Non-Nucleoside Reverse Transcriptase Inhibitors Combination	Atripla®	efavirenz / emtricitabine / tenofovir (EFV / FTC / TDF)	RX0417	A
Anti-HIV Agent	Antiretroviral Agent-Nucleotide Reverse Transcriptase Inhibitor	Viread®	tenofovir disoproxil fumarate (TDF)	RX0313	A
Anti-HIV Agent Combination	Antiretroviral Agent-Protease Inhibitor	Kaletra®	lopinavir / ritonavir (LPV / RTV)	RX0418	A
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Norvir®	ritonavir (RTV)	RX0318	A
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Prezista®	darunavir (DRV)	RX0319	A
Anti-HIV Agent	Antiretroviral Agent-Protease Inhibitor	Reyataz®	atazanavir (ATV)	RX0320	A
Anti-HIV Agent Combination	Antiretroviral Agent-Protease Inhibitor and Pharmacokinetic Enhancer Combination	Evotaz®	atazanavir / cobicistat (ATV / COBI)	RX0419	A,WW
Anti-HIV Agent Combination	Antiretroviral Agent-Protease Inhibitor and Pharmacokinetic Enhancer Combination	Prezcobix®	darunavir / cobicistat (DRV / COBI)	RX0420	A,XX
Antiretroviral	CD4 post-attachment HIV-1 inhibitor	Trogarzo®	ibalizumab-viik injection	RX0432	A
Antiretroviral	Gp-120 directed attachment inhibitor	Rukobia®	fostemsavir	RX0325	A
Anti-HIV Agent	HIV-1 Capsid Inhibitor	Sunlenca®	lenacapavir	pending	
Anti-HIV Agent Combination	Integrase Inhibitor, CYP3A Inhibitor, Nucleoside Analog Reverse Transcriptase Inhibitors (NRTIs)	Genvoya®	elvitegravir / cobicistat / emtricitabine / tenofovir alafenamide (EVG / COBI / FTC / TAF)	RX0421	A, ZZ

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation ^{2,8}
Antiretroviral	Integrase Strand Transfer Inhibitor (INSTI)	Vocabria®	cabotegravir (CAB) (oral)	RX0327	A
Antiretroviral	Integrase Strand Transfer Inhibitor / Non-Nucleoside Reverse Transcriptase Inhibitor (INSTI / NNRTI Combo)	Cabenuva®	cabotegravir / rilpivirine (CAB / RPV) (long-acting injectable)	RX0428	A
Anti-HIV Agent Combination	Integrase Strand Transfer Inhibitor / Nucleoside Reverse Transcriptase Inhibitor (INSTI / NRTI Combo)	Dovato®	dolutegravir / lamivudine	RX0427	A
Anti-HIV Agent Combination	Integrase Strand Transfer Inhibitors / Nucleoside Reverse Transcriptase Inhibitors (INSTI / NRTI combo)	Juluca®	dolutegravir 50 mg / rilpivirine 25 mg	RX0424	A
Antiretroviral	Non-Nucleoside Reverse Transcriptase Inhibitor (NNRTI)	Pifeltro®	doravirine (DOR)	RX0326	A
Antiretroviral	Inhibitor / Nucleoside/Nucleotide Reverse Transcriptase Inhibitor (NNRTI / NRTI combo)	Delstrigo®	doravirine / lamivudine / tenofovir disoproxil fumarate	RX0431	A
Antiretroviral	Inhibitor / Nucleoside/Nucleotide Reverse Transcriptase Inhibitor (NNRTI / NRTI Combo)	Symfi®, SymfiLo®	efavirenz / lamivudine / tenofovir disoproxil fumarate (EFV / 3TC / TDF)	RX0433	A
Antiretroviral, Anti-HIV Agent	Nucleoside [analog] Reverse Transcriptase Inhibitors (NRTI)	Vemlidy®	tenofovir alafenamide (TAF)	RX0328	A
Antiretroviral	Nucleoside Reverse Transcriptase Inhibitor (NRTI combo)	Cimduo®, Temixys®	tenofovir disoproxil fumarate / lamivudine (TDF/3TC)	RX0429	A
Anti-HIV Agent Combination	Protease Inhibitor / Nucleoside Reverse Transcriptase Inhibitor (PI / NRTI Combo)	Symtuza®	darunavir / cobicistat / emtricitabine / and tenofovir alafenamide	RX0426	A
Pharmacokinetic Enhancer (For use in combination with other antiretrovirals)	CYP3A4 Inhibitor	Tybost®	cobicistat (COBI)	RX1700	A,YY
Analgesic	Miscellaneous	Tylenol®	acetaminophen	RX0100	A,QQ
Analgesic	Opiate Agonist	Percocet® 5/325mg	oxycodone & acetaminophen 5/325mg	RX0102	Y
Analgesic	Opiate Agonist	Roxicodone®	oxycodone	RX0103	Y
Analgesic Combination	Opiate Agonist	Tylenol #3®, Tylenol #4®	acetaminophen and codeine	RX0105	
Analgesic; Anti-inflammatory	Nonsteroidal Anti-inflammatory Drug (NSAID)	Advil®, Motrin®	ibuprofen	RX0106	A (Motrin only), RR
Analgesic; Anti-inflammatory	Nonsteroidal Anti-inflammatory Drug (NSAID)	Naprosyn®	naproxen	RX0107	A,RR

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2, 8}
Analgesic; Antiplatelet Agent	Salicylate	Bayer®, Ecotrin®	aspirin	RX0108	A,QQ
Antidiabetic	Glucagon-like peptide-1 receptor agonist (GLP-1 RA)	Ozempic®, Rybelsus®, Wegovy®	semaglutide	RX0211	A
Antidiabetic	Glucagon-like peptide-1 receptor agonist (GLP-1 RA)	Trulicity®	dulaglutide	RX0212	A
Antidiabetic	Glucagon-like peptide-1 receptor agonist (GLP-1 RA)	Victoza®	liraglutide	RX0213	A
Antidiabetic	Sodium-glucose co-transporter 2 (SGLT2) inhibitor	Farxiga®	dapagliflozin	RX0215	A
Antidiabetic	Sodium-glucose co-transporter 2 (SGLT2) inhibitor	Invokana®	canagliflozin	RX0214	A
Antidiabetic	Sodium-glucose co-transporter 2 (SGLT2) inhibitor	Jardiance®	empagliflozin	RX0216	A
Antidiabetic Agent	Biguanide	Glucophage®, Glucophage XR®	metformin, metformin ER	RX0200	A
Antidiabetic Agent	Sulfonylurea	Diabeta®	glyburide	RX0202	A
Antidiabetic Agent	Sulfonylurea	Glucotrol®, Glucotrol XL®	glipizide, glipizide ER	RX0201	A
Antidiabetic Agent, Insulin	Insulin 70/30	Humulin® 70/30 and Novolin® 70/30	insulin NPH and insulin regular	RX0203	A
Antidiabetic Agent, Insulin	Insulin, Intermediate-Acting	Humulin N® and Novolin N®	isophane insulin	RX0204	A
Antidiabetic Agent, Insulin	Insulin, Intermediate-to-Long-Acting	Levemir®	insulin detemir injection	RX0205	A,Z
Antidiabetic Agent, Insulin	Insulin, Long-Acting	Lantus®	insulin glargine injection	RX0206	A,Z
Antidiabetic Agent, Insulin	Insulin, Rapid-Acting	Humalog®	insulin lispro injection	RX0207	A,Z
Antidiabetic Agent, Insulin	Insulin, Rapid-Acting	NovoLog®	insulin aspart injection	RX0208	A,Z
Antidiabetic Agent, Insulin	Insulin, Short-Acting	Humulin R® and Novolin R®	insulin regular	RX0209	A

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2, 8}
Antigout	Xanthine oxidase inhibitor	Aloprim®, Zyloprim®	allopurinol	RX2300	A
Anti-infective	Antibiotic-Antimalarial	Daraprim®	pyrimethamine	RX0500	A
Anti-infective	Antibiotic-Cephalosporin (1st Gen)	Keflex®	cephalexin	RX0501	
Anti-infective	Antibiotic-Lincosamide	Cleocin®	clindamycin capsules	RX0502	A
Anti-infective	Antibiotic-Macrolide	Biaxin®	clarithromycin	RX0503	A,DD
Anti-infective	Antibiotic-Macrolide	Zithromax®	azithromycin	RX0504	A
Anti-infective	Antibiotic-Penicillin	Amoxil®	amoxicillin	RX0505	
Anti-infective	Antibiotic-Penicillin	Augmentin®	amoxicillin / clavulanate	RX0506	
Anti-infective	Antibiotic-Penicillin	Penicillin VK®, Bicillin L-A®, Penicillin G®, Benzathine Penicillin G®, Penicillin G Potassium®	penicillin (VK, benzathine, aqueous)	RX0507	
Anti-infective	Antibiotic-Quinolone	Cipro®	ciprofloxacin	RX0508	
Anti-infective	Antibiotic-Quinolone	Levaquin®	levofloxacin	RX0509	A
Anti-infective	Antibiotic-Sulfonamide	Septra®, Septra DS®, Bactrim®, Bactrim DS®	sulfamethoxazole / trimethoprim (SMX / TMP), sulfamethoxazole / trimethoprim DS (SMX / TMP DS)	RX0510	A
Anti-infective	Antibiotic-Sulfonamide Derivative	Dapsone®	dapsone	RX0511	A
Anti-infective	Antibiotic-Sulfonamide Derivative	Sulfadiazine	sulfadiazine	RX0512	A
Anti-infective	Antibiotic-Tetracycline	Tetracycline	tetracycline	RX0513	
Anti-infective	Antibiotic-Tetracycline	Vibra-Tabs®, Vibramycin®	doxycycline (oral)	RX0514	
Anti-infective	Antiviral	Tamiflu®	oseltamivir	RX0516	A

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2,8}
Anti-infective, Amebicide	Amebicide	Paromycin®, Humatin®	paromomycin	RX0517	A
Anti-infective, Amebicide	Amebicide, Trichomonaside	Flagyl®	metronidazole	RX0518	A
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Diflucan®	fluconazole	RX0519	A
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Mycelex® Troche	clotrimazole troches	RX0521	A
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Nizoral®	ketoconazole	RX0522	A
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Nizoral® (topical)	ketoconazole topical (cream or shampoo)	RX0526	A
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Sporanox® (solution)	itraconazole (oral solution)	RX0523	A,B
Anti-infective, Antifungal	Antibiotic-Azole Antifungal	Terazol®	terconazole topical	RX0524	A
Anti-infective, Antifungal	Antibiotic-Polyene Antifungals	Bio-Statin® (suspension), Mycostatin® (suspension), nystatin suspension	nystatin suspension	RX0527	A
Anti-infective, Antifungal Combination	Antibiotic-Azole Antifungal	Lotrisone®	clotrimazole / betamethasone (cream, lotion & gel)	RX0528	A
Anti-infective, Antimalarial	Antimalarial	Primaquine®	primaquine	RX0529	A
Anti-infective, Antiprotozoal	Antiprotozoal	Mepron®	atovaquone	RX0530	A
Anti-infective, Antitubercular	Antitubercular	Isoniazid®, Nydrazid®	isoniazid (INH)	RX0531	A
Anti-infective, Antitubercular	Antitubercular	Myambutol®	ethambutol	RX0532	A
Anti-infective, Antitubercular	Antitubercular	Mycobutin®	rifabutin	RX0533	A
Anti-infective, Antitubercular	Antitubercular	Pyrazinamide®	pyrazinamide	RX0534	A
Anti-infective, Antitubercular	Antitubercular	Rifadin®, Rimactane®	rifampin	RX0535	A

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2,8}
Anti-infective, Antiviral	Antiviral	Valcyte®	valganciclovir hydrochloride	RX0536	A
Anti-infective, Antiviral	Antiviral	Valtrex®	valacyclovir hydrochloride	RX0537	A
Anti-infective, Antiviral	Antiviral	Zovirax®	acyclovir	RX0538	A
Anti-obesity	Anorectic agents	Contrave®	naltrexone ER / bupropion ER	RX2400	A
Anti-obesity	Gastrointestinal lipase inhibitor	Alli®, Xenical®	orlistat	RX2401	A
Blood formation and coagulation	Anticoagulant	Eliquis®	apixaban	RX0704	A
Blood formation and coagulation	Anticoagulant	Pradaxa®	dabigatran	RX0705	A
Blood formation and coagulation	Anticoagulant	Xarelto®	rivaroxaban	RX0706	A
Blood Formation and Coagulation	Erythropoiesis-Stimulating Agent	Epogen®, Procrit®	erythropoietin (epoetin alpha)	RX0700	A,R
Blood Formation and Coagulation	Granulocyte-Stimulating Agent	Neupogen®	filgrastim	RX0701	A,Q
Blood Formation and Coagulation	Vitamin K Antagonist	Coumadin®	warfarin	RX0702	A
Blood Formation and Coagulation, Anemia	Iron Salt	ferrous sulfate, Feosol®, FeroSul®, FerrouSul®	ferrous sulfate (iron)	RX0703	A,RR
Cardiovascular	Antiangina	Apresoline®	hydralazine	RX0821	A
Cardiovascular	Beta-blocker	Coreg®	carvedilol	RX0822	A
Cardiovascular	Beta-blocker	Hemangeol®, Inderal®, Inderal LA®, Inderal XL®, InnoPran XL®	propranolol	RX0824	A
Cardiovascular	Beta-blocker	Normodyne®, Trandate®	labetalol	RX0823	A
Cardiovascular	Platelet inhibitor	Effient®	prasugrel	RX0826	A

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2,8}
Cardiovascular	Platelet inhibitor	Plavix®	clopidogrel	RX0825	A
Cardiovascular	Thiazide-like diuretic	Thalitone®	chlorthalidone	RX0827	A
Cardiovascular Agent	Angiotension Converting Enzyme Inhibitor	Lotensin®	benazepril	RX0801	A
Cardiovascular Agent	Angiotension Converting Enzyme Inhibitor	Vasotec®	enalapril	RX0802	A
Cardiovascular Agent	Angiotension II Receptor Blocker	Teveten®	eprosartan	RX0803	L
Cardiovascular Agent	Beta-Blocker	Lopressor® (tartrate), Toprol XL® (succinate)	metoprolol (tartrate and succinate)	RX0804	A
Cardiovascular Agent	Beta-Blocker	Tenormin®	atenolol	RX0805	A
Cardiovascular Agent	Calcium Channel Blocker	Adalat CC®, Procardia XL®	nifedipine	RX0806	A
Cardiovascular Agent	Calcium Channel Blocker	Calan®, Calan SR®	verapamil	RX0807	A
Cardiovascular Agent	Calcium Channel Blocker	Cardizem CD®	diltiazem	RX0808	A
Cardiovascular Agent	Cardiac Glycoside	Lanoxin®	digoxin	RX0809	A
Cardiovascular Agent	Electrolyte Replacement	Klor-Con®, potassium chloride	potassium chloride	RX0810	A
Cardiovascular Agent	Loop Diuretic	Lasix®	furosemide	RX0811	A
Cardiovascular Agent	Thiazide Diuretic	Microzide®	hydrochlorothiazide (HCTZ)	RX0812	A
Cardiovascular Agent	Vasodilating Agent	Nitroglycerin® (capsules)	nitroglycerin capsules	RX0813	
Cardiovascular Agent	Vasodilating Agent	Nitro-stat® (sublingual)	nitroglycerin sublingual	RX0814	A
Cardiovascular Agent; Antilipemic	Fibric Acid	Lipid®	gemfibrozil	RX0815	A

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2,8}
Cardiovascular Agent; Antilipemic	HMG-CoA Reductase Inhibitor	Crestor®	rosuvastatin [5 mg, 10 mg & 20 mg (maximum of 30 tablets)]	RX0816	A
Cardiovascular Agent; Antilipemic	HMG-CoA Reductase Inhibitor	Lipitor®	atorvastatin	RX0817	A
Cardiovascular Agent; Antilipemic	HMG-CoA Reductase Inhibitor	Pravachol®	pravastatin	RX0818	A
Cardiovascular Agent; Antilipemic	Water Soluble Vitamin	Niaspan®	niacin	RX0819	A
Cardiovascular, Antihyperlipidemic	Cholesterol absorption inhibitor	Zetia®	ezetimibe	RX0820	A
Central nervous system	Anticholinergic	Cogentin®	benztropine	RX0927	A
Central nervous system	Anticonvulsant	Topamax®	topiramate	RX0928	A
Central nervous system	Antimigraine	Amerge®	naratriptan	RX0930	A
Central nervous system	Antimigraine	Frova®	frovatriptan	RX0929	A
Central nervous system	Antimigraine	Imitrex®	sumatriptan	RX0932	A
Central nervous system	Antimigraine	Maxalt®, Maxalt-MLT®	rizatriptan	RX0931	A
Central nervous system	Anxiolytic	Buspar®	buspirone	RX0933	A
Central nervous system	Muscle relaxant	Amrix®, Fexmid®, Flexeril®	cyclobenzaprine	RX0935	A
Central nervous system	Muscle relaxant	Baclofen®, FIRST Baclofen®, Gablofen®, Lioresal®, Lioresal Intrathecal®, Ozobax®	baclofen	RX0934	A
Central Nervous System, ADHD	Norepinephrine Reuptake Inhibitor	Strattera®	atomoxetine	RX0900	AA
Central Nervous System, Anticonvulsant	Dibenzazepine Carboxamide	Tegretol®	carbamazepine	RX0902	
Central Nervous System, Anticonvulsant	GABA Analog	Neurontin®	gabapentin	RX0903	A

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Central Nervous System, Anticonvulsant	Histone Deacetylase Inhibitor	Depakene®	valproic acid	RX0904	A
Central Nervous System, Anticonvulsant	Histone Deacetylase Inhibitor	Depakote®	divalproex sodium	RX0905	A
Central Nervous System, Anticonvulsant	Hydantoin	Dilantin®	phenytoin	RX0906	
Central Nervous System, Anticonvulsant	Phenyltriazine	Lamictal®	lamotrigine	RX0907	A
Central Nervous System, Antidepressants	Alpha-2 Antagonist	Remeron®	mirtazapine	RX0908	A
Central Nervous System, Antidepressants	Dopamine Reuptake Inhibitor	Wellbutrin®, Wellbutrin SR®	bupropion, bupropion SR	RX0909	A
Central Nervous System, Antidepressants	Selective Serotonin Reuptake Inhibitor	Celexa®	citalopram	RX0910	A
Central Nervous System, Antidepressants	Selective Serotonin Reuptake Inhibitor	Paxil®	paroxetine	RX0911	A
Central Nervous System, Antidepressants	Selective Serotonin Reuptake Inhibitor	Zoloft®	sertraline	RX0912	A
Central Nervous System, Antidepressants	Serotonin Reuptake Inhibitor	Desyrel®	trazodone	RX0913	A
Central Nervous System, Antidepressants	Serotonin/Norepinephrine Reuptake Inhibitor	Effexor®, Effexor XR®	venlafaxine	RX0914	A
Central Nervous System, Antidepressants	Tricyclic Antidepressant (Tertiary Amine)	Elavil®	amitriptyline	RX0915	A
Central Nervous System, Antidepressants	Tricyclic Antidepressant (Tertiary Amine)	Pamelor®	nortriptyline	RX0917	A
Central Nervous System, Antidepressants	Tricyclic Antidepressant (Tertiary Amine)	Silenor®	doxepin	RX0916	A
Central Nervous System, Antimanic	Benzisoxazole	Risperdal®	risperidone	RX0919	A
Central Nervous System, Antimanic	Mood stabilizer	Lithobid®	lithium (lithium carbonate)	RX0920	A
Central Nervous System, Antimanic	Serotonin/Dopamin/Histamine/ Alpha-1 Antagonist	Zyprexa®	olanzapine	RX0921	A

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Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2,8}
Central Nervous System, Antipsychotic	Dibenzothiazepine	Seroquel®	quetiapine	RX0922	A,T
Central Nervous System, Antipsychotic, Antiemetic	Phenothiazine	Compazine®, Compro®	prochlorperazine	RX0923	FROM ADAP FORMULARY EFF. 2/15/2019
Central Nervous System, Anxiolytic, Sedatives and Hypnotics	Benzodiazepine	Ativan®	lorazepam	RX0924	
Central Nervous System, Anxiolytic, Sedatives and Hypnotics	Benzodiazepine	Klonopin®	clonazepam	RX0925	
Central Nervous System, Anxiolytic, Sedatives and Hypnotics	Benzodiazepine	Restoril®	temazepam	RX0926	
Dental, Anti-infective	Antibiotic	Peridex®	chlorhexidine gluconate (0.12%)	RX1000	
Device	Other	ACE Aerosol Cloud Enhancer®	inhaler spacer (one time only)	A4627	A
Gastrointestinal	Antispasmodic	Bentyl®	dicyclomine	RX1109	A
Gastrointestinal	Gastric acid buffer	Carafate®	sucralfate	RX1110	A
Gastrointestinal	Laxative, bulk-forming	Citrucel®	methylcellulose	RX1112	A
Gastrointestinal	Laxative, bulk-forming	Equalactin®, Konsyl Fiber®	calcium polycarbophil	RX1111	A
Gastrointestinal	Laxative, bulk-forming	Fiberall®, Metamucil®, Perdiem Fiber®	psyllium	RX1113	A
Gastrointestinal	Laxative, stimulant	Dulcolax®, Correctol®, Bisac-Evac®, Bisacodolax®, Codulax®, Alophen®, Feen A Mint®, Fleet Stimulant®	bisacodyl	RX1114	A
Gastrointestinal	Laxative, stool softener	Col-Rite®, Colace®, Correctol®, Silace®, Surfak®	docusate sodium	RX1115	A
Gastrointestinal Agent	H2 Histamine Receptor Antagonist	Zantac®	ranitidine (75mg, 150 mg, & 300mg)	RX1100	A,EE,RR
Gastrointestinal Agent	Proton Pump Inhibitor	Prilosec®	omeprazole	RX1101	A,EE,RR
Gastrointestinal Agent, Antidiarrheal	Other	Imodium®	loperamide	RX1103	A,QQ

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Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2,8}
Gastrointestinal Agent, Anti-inflammatory Agent	5-Aminosalicylic Acid Derivative	Canasa® (suppository)	mesalamine (suppository)	RX1107	
Gastrointestinal Agent, Antidiarrheal, Combination	Other	Lomotil®	atropine / diphenoxylate	RX1104	A
Gastrointestinal Agent, Antidiarrheal, Probiotic	Probiotic	Lactinex®	lactobacillus acidophilus (granules)	RX1105	QQ
Gastrointestinal Agent, Antiemetic	Dopamine Antagonist	Reglan®	metoclopramide	RX1106	A
Gastrointestinal Agent, Cathartic	Osmotic Laxative	GoLYTELY®, Colyte®, MoviPret®, NuLYTELY®, TriLyte®	PEG-3350 (polyethylene glycol) and electrolytes oral solution	RX1108	PP
Genitourinary	Bladder antispasmodic	Ditropan XL®, Gelnique®	oxybutynin	RX2500	A
Hormone	Anabolic Agent	Marinol®	dronabinol	RX1200	A
Hormone	Androgen	Androderm®	testosterone patch	RX1206	A,LLL
Hormone	Androgen	Androgel®	testosterone gel	RX1207	A,LLL
Hormone	Androgen	Depo®-Testosterone	testosterone cypionate injection (NOTE: testosterone gel / patch available through ADAP)	RX1201	A,H,MMM
Hormone	Estrogen Derivative	Delestrogen®	estradiol valerate (injection)	RX1209	A, LLL
Hormone	Estrogen Derivative	Estrace®, Femtrace®, Cenestin®, Enjuvia®, Gynodiol®	estradiol (oral)	RX1208	A, LLL
Hormone	Progesterone	Provera®, DepoProvera®, Depo-SubQ®, Provera 104®, MPA®	medroxyprogesterone acetate	RX1212	A
Hormone	Progestin	Megace®	megestrol acetate	RX1202	A
Hormone	Androgen	Delatestryl®	testosterone enanthate injection (NOTE: testosterone gel / patch available through ADAP)	RX1204	H
Hormone Therapy (Genitourinary; Benign Prostatic Hypertrophy Agent)	5-Alpha Reductase Inhibitor	Proscar®, Propecia® (oral)	finasteride (oral)	RX1211	A, LLL
Edema; Antihypertensive; Diagnosis of Primary Hyperaldosteronism; Treatment of Diuretic-induced	Potassium-sparing Diuretic	Aldactone®	spironolactone	RX1210	A, LLL

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2, 8}
Hormone, Corticosteroid	Corticosteroids	Prednisone®	prednisone	RX1205	
Ophthalmic Agent, Antiglaucoma	Beta-Blocker, Non-selective	Timoptic®	timolol ophthalmic	RX1400	
Ophthalmic Agent, Antiglaucoma	Prostaglandin	Xalatan®	latanoprost ophthalmic	RX1401	A
Ophthalmic Agent; Anti-infective	Antibiotic-Aminoglycoside	Tobrex®	tobramycin ophthalmic (solution and ointment)	RX1406	
Ophthalmic Agent; Anti-infective	Antibiotic-Quinolone	Ocuflox® (ophthalmic)	ofloxacin (ophthalmic)	RX1407	P
Ophthalmic Agent; Anti-infective	Antibiotic-Sulfonamide Derivative	Sulfacetamide Sodium® (ophthalmic eye drops)	sulfacetamide sodium (ophthalmic eye drops)	RX1408	
Ophthalmic Agent; Anti-infective; Combination	Antibiotic-Corticosteroid	Maxitrol®	dexamethasone / neomycin / polymyxin B ophthalmic	RX1410	
Ophthalmic Agent; Antiglaucoma	Alpha 2 Agonist	Alphagan P®	brimonidine ophthalmic	RX1402	
Ophthalmic Agent; Antiglaucoma	Carbonic Anhydrase Inhibitor	Trusopt®	dorzolamide ophthalmic	RX1404	
Ophthalmic Agent; Corticosteroid	Corticosteroid	Pred Forte® (ophthalmic)	prednisolone acetate (ophthalmic)	RX1411	
Opioid Dependency	Opioid Agonist / Antagonist	Suboxone®	buprenorphine and naloxone	RX2100	III
Opioid Dependency	Opioid Agonist / Antagonist	Subutex®, Buprenex®, Butrans®, Probuphine®	buprenorphine	RX2101	JJJ
Osteoporosis	Bisphosphonate	Fosamax®	alendronate sodium	RX1500	A,NN
Otic Preparation, Anti-infective	Antibiotic-Quinolone	Floxin otic®, Ocuflox®	ofloxacin otic	RX1600	
Otic Preparation, Anti-infective Combination	Antibiotic-Corticosteroid	Cortisporin otic®	hydrocortisone / neomycin / polymyxin B otic	RX1601	
Partial Nicotine Agonist	Smoking Cessation	Chantix®	varenicline	RX2200	A
Pulmonary, Allergy	H1 Receptor Antagonist (1st Gen)	Benadryl®	diphenhydramine	RX1800	A

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2,8}
Pulmonary, Allergy, Appetite Stimulant	Antihistamine	Periactin®	cycloheptadine	RX1801	A
Pulmonary, Bronchodilator	Beta2-Adrenergic Agonist	Proventil HFA®, Ventolin®, ProAir®, Combivent Respimat®	albuterol HFA, albuterol / ipratropium	RX1803	A
Pulmonary, Corticosteroids	Nasal Corticosteroid	Nasarel®	flunisolide nasal	RX1804	A
Pulmonary, Corticosteroids	Oral Corticosteroid	QVAR® (oral inhaler), Qnasi® (nasal spray)	beclomethasone (oral inhaler, nasal spray)	RX1805	A
Pulmonary, respiratory or CNS, allergy	Antihistamine or anxiolytic	Atarax®, Vistaril®,	hydroxyzine	RX1810	A
Pulmonary, respiratory, allergy	Antihistamine	Allegra®	fexofenadine	RX1808	A
Pulmonary, respiratory, asthma, allergy	Leukotriene receptor antagonist	Singulair®	montelukast	RX1809	A
Skin and Mucous Membrane Preparation, Acne	Antibiotic, Keratolytic	Benzoyl Peroxide topical	benzoyl peroxide topical	RX1900	A,RR
Skin and Mucous Membrane Preparation, Analgesic	Analgesia	Zostrix®	capsaicin topical	RX1901	A,QQ
Skin and Mucous Membrane Preparation, Anesthetic	Anesthetic	Xylocaine®	lidocaine viscous	RX1902	
Skin and Mucous Membrane Preparation, Anti-infective	Antibiotic-Lincosamide	Cleocin T®	clindamycin topical (cream, lotion, gel)	RX1905	A
Skin and Mucous Membrane Preparation, Anti-infective	Antibiotic-Sulfonamide Derivative	Silvadene®	silver sulfadiazine topical	RX1907	
Skin and Mucous Membrane Preparation, Anti-infective	Antiparasitic, Scabacidal	Elimite®	permethrin topical	RX1908	
Skin and Mucous Membrane Preparation, Anti-infective	Immune Modular	Aldara Cream®	imiquimod 5%	RX1909	A
Skin and Mucous Membrane Preparation, Anti-infective, Keratolytic Agent	Antiviral	Podofilox topical®	podofilox topical	RX1910	
Skin and Mucous Membrane Preparation, Antineoplastic	Pyrimidine Analog	Efudex®	fluorouracil topical	RX1911	
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Betamethasone topical or Diprolene®	betamethasone (valerate or dipropionate)	RX1912	A

RYAN WHITE PART A PROGRAM PRESCRIPTION DRUG FORMULARY (Sorted by Brand Name)

Therapeutic Classification	Pharmacologic Classification	Brand Name(s)	Generic Name(s)	RW Miami Pharma-Code	Notation^{2,8}
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Fluocinonide topical®	fluocinonide topical	RX1914	
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Hydrocortisone topical®	hydrocortisone topical (cream and ointment)	RX1915	FFF
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Kenalog®	triamcinolone topical (cream and ointment)	RX1916	A
Skin and Mucous Membrane Preparation, Corticosteroid	Corticosteroid	Temovate®, clobetasol propionate	clobetasol topical (ointment)	RX1917	
Substance use disorder (substance abuse)	Alcohol deterrent	Antabuse®	disulfiram	RX2103	A
Substance use disorder (substance abuse)	Nicotine replacement	Nicorette®, Nicoderm CQ®, Nicotrol Inhaler®, Nicotrol NS®, Habitrol®	nicotine	RX2201	A
Substance use disorder (substance abuse)	Opiate antagonist	Revia®	naltrexone (oral)	RX2102	A
Topical	Humectant	Amlactin®, Lac-Hydrin®, Amlactin XL®, Geri-Hydrolac®	ammonium lactate	RX1920	A
Vitamin	Vitamin	Cyanocobalamin®, vitamin B12 (injection only)	cyanocobalamin, vitamin B12 (injection only)	RX2004	A,HH,TT
Vitamin	Vitamin	Folic acid	folic acid	RX2000	A
Vitamin	Vitamin	Mag-Ox®, Mag-Oxide®, Mag-Ox 400®, Mag-200®, Uro-mag®	magnesium oxide	RX2007	A
Vitamin	Vitamin	Multivitamin (OTC)	multivitamin	RX2001	A,HH,QQ
Vitamin	Vitamin	Multivitamin B Complex	multivitamin B complex	RX2002	A,QQ
Vitamin	Vitamin	Multivitamin prenatal	multivitamin prenatal	RX2003	A,FF,HH,RR
Vitamin	Vitamin	Pyridoxine®, vitamin B6	pyridoxine, vitamin B6	RX2005	A,GG,HH
Vitamin-Antidote	Vitamin	Leucovorin®	folinic acid, calcium folinate, leucovorin	RX2006	A,F



MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, July 24, 2026

9:30 a.m. – 11:30 a.m.

Behavioral Science Research

2121 Ponce de Leon Blvd., Ste. 240

Miami, FL 33134

AGENDA

- | | |
|--|-----------------------|
| I. Call to Order | Cristhian Ysea |
| II. Introductions | All |
| III. Meeting Housekeeping | Cristhian Ysea |
| IV. Floor Open to the Public | Dr. Lawrence Friedman |
| V. Review/Approve Agenda | All |
| VI. Review/Approve Minutes of May 15, 2026 | All |
| VII. Reports | |
| • Ryan White Program | Carla Valle-Schwenk |
| • ADAP | Dr. Javier Romero |
| • Vacancy Report | Marlen Meizoso |
| • Partnership Report (information only) | Dr. Lawrence Friedman |
| VIII. Standing Business | |
| • Oral Health Care Items: | All |
| ○ Request of Codes D0602, D0603, D9110 and D0171 | |
| ○ Implants Utilization and Feasibility | |
| • Allowable Conditions Response to “Dear Colleague” Letter Continued | All |
| • Ryan White Prescription Drug Formulary | All |
| • 2026 Calendar of Activities | All |
| IX. New Business | |
| • None | All |
| X. Announcements and Open Discussion | All |
| XI. Next Meeting: August 28, 2026 at BSR | Dr. Lawrence Friedman |
| XII. Adjournment | Cristhian Ysea |

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For more information, regarding the Miami-Dade HIV/AIDS Partnership’s Medical Care Subcommittee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

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**Medical Care Subcommittee
Calendar of Activities 2026**

	Officer Elections Conflict of Interest Forms/Financial Disclosure Forms Outpatient/Ambulatory Medical Care Standards Allowable Medical Conditions (reviewed as needed) Ryan White Prescription Drug Formulary (reviewed as needed) Oral Health Care Items (reviewed quarterly) Special projects discussion Committee Items (added as needed)								
Month	Activities								Notes
January 23, 2026								x	All standing business items deferred because of contingency planning.
February 6, 2026								x	Emergency meeting-contingency planning
February 27, 2026								x	Contingency planning
March 27, 2026		x						x	Contingency planning; disclosure forms requested.
April 24, 2026	x	x				x	x	x	Source of income forms completed for missing members; continue special project discussions; OHC items, as applicable; address deferred items; contingency planning continued.
May 15, 2026		x				x	x	x	Conclude special projects discussion ;continue review of allowable conditions review; contingency planning-vaccines; OHC code discussion; formulary discussion-deferred.
June 26, 2026	N	N	N	N	N	N	N	N	Meeting cancelled
July 24, 2026						x		x	OHC items; Continue review of allowable conditions; formulary review.
August 28, 2026								x	Continue review of allowable conditions;
September 25, 2026			x					x	Continued review of allowable conditions, as applicable; Primary Medical Care Standards review begins; AIDS Pharma and Outpatient/Ambulatory Service Descriptions review begins.
October 23, 2026			x			x		x	Primary Medical Care Standards review continued; Service Descriptions review continued Mental Health and Substance Abuse; OHC items as applicable.
November 20, 2026			x					x	Primary Medical Care Standards review continued; Service Descriptions Continued; OHC service description and standards review; nomination of officers; planning for 2027.

Comments:

The Subcommittee does NOT meet in December and all items are subject to change.

N=no meeting



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July 16, 2026

Dear Ryan White HIV/AIDS Program Colleagues,

For people with HIV, addressing nutritional needs is an important component of improving health outcomes and supporting long-term well-being. Nutrition services help support immune function, manage chronic conditions, promote healthy aging, and keep individuals engaged in HIV care and treatment. Access to nutritious food and nutrition-focused interventions can help prevent and manage chronic disease, support treatment adherence, and improve overall health and well-being, making nutrition services an important component of comprehensive HIV care.

For more than 35 years, the Health Resources and Services Administration's (HRSA) Ryan White HIV/AIDS Program (RWHAP) has supported the nutritional needs of people with HIV. RWHAP recipients can provide nutrition services primarily through two service categories, Medical Nutrition Therapy and Food Bank/Home-Delivered Meals. Both service categories are essential to supporting the overall health and well-being of people with HIV. These nutrition services align with [*Executive Order 14212, Establishing the President's Make America Healthy Again Commission*](#), which emphasizes prevention, wellness, nutrition, and addressing the root causes of poor health.

Medical Nutrition Therapy is a core medical service in which nutrition care is provided by a licensed nutrition professional and includes nutrition assessment and screening, dietary and nutritional evaluation, and nutrition education to help clients make dietary changes that support the management of their medical conditions. Through individualized counseling and evidence-based nutrition interventions, Medical Nutrition Therapy can help clients address complex health needs while supporting HIV treatment goals.

Food Bank/Home-Delivered Meals is a support service used to provide nutritious food, hot meals, or vouchers to purchase food. In addition, the Emergency Financial Assistance support service category may be used to provide limited funds to assist clients with urgent food-related needs, such as groceries or food vouchers. Many RWHAP recipients fund one or more of these three service categories to help improve health and address the unique needs of people with HIV. In 2024, approximately 33,000 RWHAP clients received Medical Nutrition Therapy, and over 90,000 received Food Bank/Home-Delivered Meals. For more information about Medical Nutrition Therapy, Food Bank/Home-Delivered Meals, or the Emergency Financial Assistance service categories, please review [*Policy Clarification Notice 16-02 Ryan White HIV/AIDS Program Services: Eligible Individuals & Allowable Uses of Funds*](#).

As part of the federal government's broader focus on nutrition and health, HRSA is also supporting efforts to expand nutrition-related programming and innovation. We encourage

recipients to explore funding opportunities available through HRSA that support nutrition-focused approaches, including [the Bureau of Primary Health Care's Fiscal Year 2027 Expanding Nutrition Services](#).

We also encourage recipients attending the upcoming [2026 National Ryan White Conference on HIV Care & Treatment](#) to participate in the various sessions focused on nutrition, food-related interventions, and innovative approaches to support the nutritional needs of people with HIV. These sessions provide opportunities to learn from peers, share best practices, and identify strategies that can be adapted and implemented within RWHAP systems of care.

Thank you for your continued commitment to improving the health and well-being of people with HIV through comprehensive, whole person-centered care. Through our collective efforts, we can continue helping people with HIV access the care, treatment, and nutrition services they need to achieve optimal health outcomes.

Sincerely,

/s/

Thomas J. Engels
Administrator



MIAMI-DADE HIV/AIDS PARTNERSHIP

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| VII. Reports | |
| • Ryan White Program | Carla Valle-Schwenk |
| • ADAP | Dr. Javier Romero |
| • Vacancy Report | Marlen Meizoso |
| • Partnership Report (information only) | Dr. Lawrence Friedman |
| VIII. Standing Business | |
| • Oral Health Care Items: | All |
| ○ Request of Codes D0602, D0603, D9110 and D0171 | |
| ○ Implants Utilization and Feasibility | |
| • Allowable Conditions Response to “Dear Colleague” Letter Continued | All |
| • Ryan White Prescription Drug Formulary | All |
| • 2026 Calendar of Activities | All |
| IX. New Business | |
| • None | All |
| X. Announcements and Open Discussion | All |
| XI. Next Meeting: August 28, 2026 at BSR | Dr. Lawrence Friedman |
| XII. Adjournment | Cristhian Ysea |

Please turn off or mute cellular devices – Thank you

For more information, regarding the Miami-Dade HIV/AIDS Partnership’s Medical Care Subcommittee please contact Marlen Meizoso at 305-445-1076 or marlen@behavioralscience.com

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MIAMI-DADE HIV/AIDS PARTNERSHIP

Medical Care Subcommittee

Friday, July 24, 2026

9:30 a.m. – 11:30 a.m.

Behavioral Science Research

2121 Ponce de Leon Blvd., Ste. 240

Miami, FL 33134

AGENDA

- | | |
|--|-----------------------|
| I. Call to Order | Cristhian Ysea |
| II. Introductions | All |
| III. Meeting Housekeeping | Cristhian Ysea |
| IV. Floor Open to the Public | Dr. Lawrence Friedman |
| V. Review/Approve Agenda | All |
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