

**NASSAU-SUFFOLK HIV HEALTH SERVICES PLANNING COUNCIL
UNITED WAY OF LONG ISLAND, DEER PARK, NY**

**July 9, 2025
10am – 12pm**

MINUTES

MEMBERS PRESENT

Kerry Thomas, Chair
Nancy Duncan, Vice-Chair
Wendy Abt
Susan Baldridge
Tyrone Banister
Pam Biafora
Eileen Bryant
Traci Bryant
Jody Brinson
Lisa Corso
Lance Marrow
Cathy Martens
Maria Mezzatesta
Angie Partap
Scott Petersen
Gregson Pigott, MD
Joseph Pirone
Leah Richberg
Sofia Porres
Stephen Sebor

MEMBERS ABSENT

Arthur Brown
James Colson
Clara Crawford
Carmen Feliciano
Irina Gelman, DPM
Margret Henry
Anuolo Oyadiran
Colin Pearsall
Jacqueline Ponce-Rivera
Denise Ragsdale
June Tappan
John Van

GUESTS

Karen Bovell
Avis Giddiens
Franchesca Rosario
Lenny Spada
Ernest Burke
Jhennel Bailey

UWLI STAFF

Georgette Beal
Myra Alston
JoAnn Henn
Nancy O’Keefe
Katie Ramirez
Marcela Van Tassel

COUNTY STAFF

Shauna Bednar

I. Welcome, Moment of Silence, & Acknowledgement

Mr. Thomas, Chair, began the meeting at 10:10 am. The meeting was held in person and by Zoom. He requested a moment of silence to set our intentions, and to remember those whom we have lost and those living with health challenges. After introductions, Mr. Thomas welcomed Ms. Traci Bryant as she begins her new Planning Council term.

II. Approval of May 14, 2025 meeting minutes

Ms. Martens made a motion to accept the September meeting minutes as read. Mr. Pirone seconded the motion.
11 Approved 9 Abstained 0 Oppose

III. Committee Reports

Ms. Duncan reported on the **Executive Committee** that met on Monday, July 7, 2025. The Planning Council agenda was approved. HRSA is in the process of issuing Notices of Awards. Providers will be notified as to what their final award will be. Request for Proposals (RFPs) anticipated for

early fall have been postponed for a year, thereby extending multi-year contracts. There will be a reverse site visit August 6-8 during which Ms. Beal, Ms. O’Keefe and Ms. Van Tassel from UWLI and Ms. Bednar from NCDOH will be participating in a panel discussion speaking on the relationship between Nassau County and UWLI. The data dictionary has been updated. Future site visits will be slightly modified with a focus on charts and service delivery.

There are currently 32 Planning Council membership. There will be a ballot of three new Planning Council candidates and seven second term nominations at the July Planning Council meeting

Ms. Baldrige reported on the **Consumer Involvement Committee (CIC)** that met on Friday, June 13, 2025. Representatives from Nassau and Suffolk County Offices for the Aging spoke about the programs and resources that are available to seniors on Long Island. Information about UWLI’s Older Adult Home Modification Program was also shared with the committee.

Mr. Pirone shared dates and times of the **Strategic Assessment & Planning Committee (SAP) PSRA** meetings:

July 16, Data session

July 23. Priority setting

July 29, Finance, Resource allocation

August 4 Finance Back-up, if needed

Ms. Partap reported that the **Clinical Quality Management (COM)** met on Thursday, June 26, 2025. There was a follow-up on the MNT CQI project. The committee decided on Raising awareness of Part A funded services as the 2025-2026 CQI project. A summary of Subrecipient CQM monitoring was also reviewed at this meeting.

The Membership Sub-Committee met immediately following the CQM Meeting. Three new Planning Council applications were reviewed in addition to five second- term nominations. It was decided that all applications, first term and second term. Applicants will be balloted at the July Planning Council meeting

Conflict of Interest forms were distributed, completed, and collected prior to the vote on Planning Council applicants. All required documentation will be sent to respective counties for Council appointment.

IV. 2027-2032 Integrated Plan High Level Overview and Timeline

In a pre-recorded presentation, Karen Hagos, from the NYSDOH, Office of Planning and Community Affairs, gave an update on the planning process for the 2027-2035 Integrated Plan, which is a requirement of HRSA and the CDC, that aligns with the National HIV/AIDS Strategy, (NHAS), Ending the Epidemic(ETE) goals, and NYC Ending the HIV Epidemic (EHE), the Statewide Coordinated Statement of Need (SCSN) and Ryan White required legislation.

Since 2016, there has been collaboration with NYC and Long Island partners to meet these requirements to create one Integrated Plan. The Planning Bodies workgroup includes the NYS AIDS Institute, NYC Department of Health and Mental Hygiene, NYC Prevention and Planning Group, Nassau County Department of Health (NCDOH), HIV Advisory body, and the Planning Councils of Long Island and New York City. The Integrated Plan (IP) is reviewed and developed approximately every five years.

The AIDS Institute’s role is to develop timeline tasks, engage planning bodies, and draft the plan, which includes developing the plan and presenting the completed plan for concurrence.

Reviewing the Guidance

The areas of focus which exist in the current Plan have remained the same:

Diagnose- all people with HIV as soon as possible

Treat- people with HIV rapidly and effectively to reach sustained viral suppression

Prevent- new transmissions using proven interventions including Pre-Exposure Prophylaxis (PEP) and Syringe Service Programs (SSPs)

Respond- quickly to potential HIV outbreaks, to get needed prevention and treatment to people who need them.

Community engagement is essential to development of the Integrated Plan. The Planning process should include key collaborators and broad-based communities including but not limited to:

- People with HIV and vulnerable to HIV
- Funded service providers
- Collaborators, especially new collaborators from disproportionately affected communities

Contributing Data Sets and Assessments-this section analyses qualitative and quantitative data used by the jurisdiction to describe how HIV impacts that jurisdiction. Data from this section also informs the situational analysis as well as the goals and objectives section and includes:

- Epidemiological snapshot (The AIDS Institute is working with Long and Island and NYC)
- HIV Prevention, Care, and Treatment Resource Inventory (More clarity and details from federal partners is forthcoming)
- Assessment of strengths and gaps along the prevention and care continuum (information gathered will assist with this assessment).

Situational Analysis Guidance- is a summary that synthesizes information from the community engagement process and assessment details to inform goals included in the IP. This analysis includes strengths, challenges, and identified needs. It is important that the most current data be used in this guidance.

2027-2031 Goals and Objectives-The goals and objectives need to reflect strategies that ensure a comprehensive and coordinated approach for all HOIV prevention and care funding. The Plan should include goals that address HIV prevention and care needs as well as health disparities. Existing plans can be utilized provided their goals are for the entire HIV prevention and care continuum across New York State.

Implementation, Monitoring and Jurisdictional Follow-up- describes the infrastructure, procedures, systems/tools that will support monitoring, evaluation, improvement, reporting and dissemination. Some new material may need to be created or expanding of existing material. This section is more comprehensive than before.

Concurrence- At the end of this process, each planning body (using the co-chairs) is required to sign a letter of concurrence. The concurrence states that the signers agree with the plan, had ample opportunity to participate in the development of the plan, and have been updated during the process.

High-Level Timeline- was shared with the Council regarding the different sections. Submission of the completed Plan is due by June 30, 2026.

Next Steps- include community engagement sessions, discussion of goals and objectives, data sets and assessments and more details and clarity regarding resource inventory development.

At the end of presentation, Ms. Hagos shared contact information and resources.

After the recorded presentation, Ms. Bovell stressed the importance of community engagement.

Community engagement is a key strategy in efforts to receive feedback. Listening sessions during which pointed questions are asked with the intention of gaining a better sense of any issues or challenges of HIV prevention and treatment and learning of any trends or sharing best practices have been scheduled throughout New York State.

The guidance is a 30-page document, which was summarized in this presentation.

V. Overview of the PSRA Process for FY26-27

The priority setting and resource allocation (PSRA) is the process of deciding which HIV/AIDS services are the most important in providing a comprehensive system of care for all people living with HIV/AIDS in the EMA (eligible metropolitan region), which are Nassau and Suffolk County.

There is legislative language regarding the PSRA: The Planning Council shall *establish priorities for the allocation of funds within the eligible area, including how best to meet each such priority and additional factors that a Recipient should consider in allocating funds under a grant*. The most important role of the Planning Council is that of decision-maker about the use of RWHAP Part A program funds for direct services which is approximately 85% of the total grant award.

The decisions made during the PSRA process greatly influence the system of care including:

- What services are available to PLWH in the N-S- EMA
- Accessibility of those services-where those services are provided
- Capacity of funded providers to meet the needs of specific PLWH subpopulations -and address HIV-related health disparities
- Service models that are used
- Service retention
- Clinical outcomes such as viral suppression

The PSRA roles and responsibilities of the recipient and the Planning Council were explained in a flowchart. The Planning Council sets priorities, allocates resources, reallocates funds as needed, and gives directives to the recipient on how best to meet these priorities. The Recipient procures/contracts for services, uses Planning Council allocations for procurement, and uses directives in procurement and monitoring. Directives are the Planning Council's guidance on how best to meet each such priority and additional factors to consider in procurement to ensure availability of services in the EMA.

The Nassau-Suffolk EMA's PSRA is a data-driven process that is conducted by the Planning Council with participation of the Recipient, sub-recipients, consumers, and community members. This data includes, but is not limited to, the most recent epidemiological data, RW Part A unduplicated client by service category for a three-year period, unit cost per client by service category, units of service delivered for each service category unmet need framework, and other funding sources.

A two-part committee process is used. The Strategic Assessment & Planning Committee selects and ranks the service priorities; the finance sub-committee makes recommendations for allocating resources.

Decisions reached by SAP and Finance are presented to the Planning Council for approval.

Service categories are divided into Core Medical and Support Services; the allocation of program funds is 75%/25% respectively. A core waiver can be requested to allow some flexibility within those percentages.

The PSRA process is a system made up of many checks and balances, to ensure that funding decisions are correctly made to benefit the entire Long Island region. Regional service needs are prioritized and funded based on evidence-based data, the process involves lengthy discussions and feedback from committee members and the public to allocate funds for FY 26-27.

Consumers, individuals who are not funded by Part A, and the public are encouraged to participate in the process. The presentation ended with the dates and times of the PSRA meetings.

VI. Other Business/ Announcements

Thursday's Child has a new program, funded under Emergency Financial Assistance (EFA) to help with the cost of frames and lenses. Those interested are encouraged to contact the agency to learn if they are eligible for the program. Information is also included in the weekly grant mailing.

World AIDS Day is December 1, 2025. The event is Friday evening, December 5, 2025 at Captain Bill's. more details to follow.

Sun River Health is hosting a Positive Space workshop, *Insurance Options* at its Patchogue location on Friday, July 18, 2025, at 12pm-2pm,

VII. Adjournment

Ms. Bryant made a motion, which was seconded by Mr. Marrow, to adjourn July 9, 2025, Planning Council meeting. All in favor-Motion carried.