



Planning Council
June 11, 2026
Non-Profit Center and Zoom
4:00 – 6:00 PM

Summary of Attendance

Members Present

Curtis Santos
Beth Gavin
Daniel Amato
Gerry James
Maria Petagna
Meg Von Lossnitzer
Milaun Casimir
Barry Callis/Owen Trites
Sarah Dupont
Stephen Batchelder
Stephen Corbett
Zeke Russell
Ericka Olivera
Henry Cabrera
Amanda Hart
Regina Grier
Joey Carlesimo
Liz Koelynych
Robert Giannasca
Shambi Mwandembo
Rick Boyd
Kim Wilson

Members Excused

Katherine O'Donfro
Carla Norris
Wayne Callahan
Serena Rajabiun
Alison Kirchgasser

Members Absent

Alyssa Collaro
Melissa Hector
Fabian Ortiz Hernandez
Jennifer Nganga
Bryan Thomas

Staff

Clare Killian
Julia Kirsch
Taylor Parent
Melanie Taylor
Roxy Dai
Rachel Phillips
Tzuria Falkenberg

Topic A: Welcome and Introductions

Planning Council Chair, Henry Cabrera, welcomes everyone to the meeting. He holds a moment of silence and goes over the group agreements. During the group agreements review, he reminds members that the Executive Committee has been working through the Group Agreements and has made a few edits that were presented at the last Council meeting and included in the meeting evaluation for additional feedback.

Since the last Council meeting, respondents to the meeting evaluation affirmed that they liked the edits that Exec has made and there were no additional suggestions! The Chair reminds everyone that this would need a motion, second, and 2/3rds vote from those in attendance to pass the edits unless there is a motion for further discussion. He notes that he will return to this after they finish up the usual housekeeping items.

PCS then reviews the agenda for the meeting and takes attendance as reflected above, visually or via the Zoom participant list in order to save time. The agenda and objectives are as follows:

May 14, 2025 Minutes Review & Vote Henry Cabrera, PC Chair	Review and approve the meeting minutes from May 14 th .
Agency Updates Agency Representatives	Hear any updates from our agency representatives.
Group Agreements/Governing Docs Updates Henry Cabrera, PC Chair	Hear updates from the Exec Committee about their efforts to complete the writing of our Standard Operating Procedures.
ARC Year End Report, including Allocations Scenarios & Vote on Carry Over Scenarios PCS & ARC	Listen to ARC's year end report and their FY76 Funding Scenario Recommendations. Vote on the FY25 & FY26 Carry Over Scenarios.
SPEC Year End Report PCS & SPEC	Listen to SPEC's year end report.
NAC Year End Report PCS & NAC	Listen to NAC's year end report.
PC 2025-2026 Chair-Elect Nominations Henry Cabrera, PC Chair	Nominate your fellow Council members to be Chair-Elect for 2025-2026!
Announcements, Evaluation & Adjourn Henry Cabrera, Chair	Hear any announcements and adjourn today's meeting.

Topic B: Review Meeting Minutes

Henry asks if anyone has any additional edits to the minutes for May 14, 2026.

Motion to Approve: Regina Grier

Second: Liz Koelnich

Result: 13 approve, 2 abstain, motion passes

Topic C: Agency Updates & Committee Reports

AGENCY UPDATES

Barry Callis, MDPH:

- On May 27-28th, DPH hosted a 2-day HRSA Part D Site Visit, including a full-day visit to Brockton Neighborhood Health Center. This included a luncheon with patients that engaged in dialogue about their HIV care and medical case management services with HRSA staff and consultants.
- On May 18, 2026, the IP Team at JSI (Rich B. and Ana G.), met with Council leadership and members of the Needs Assessment Committee to review highlights of the IP to prepare for concurrence decision making.
- MIPCC will render their concurrence decision about the federally compliant joint MA and Boston EMA IP on Thursday, June 18, 2026, and we expect to submit the week of June 22nd.

Maria Petagna, NH DHHS:

- We are in the process of removing oral oncology medications from our formulary. This only applies to treatments for conditions not directly related to HIV. There will be a prior authorization process implemented for any medication that could be used for HIV/AIDS related cancers. For the medications not covered, we have found that other financial aid resources exist.
- The HIV & Aging project is beginning to wind down. We will have a comprehensive resource guide available to the public hopefully by early 2027.
- The IHP will be finalized and submitted by the end of the month.

Question for Maria: Can you explain a bit more about removing oral oncology meds? How will this affect PLWH? Will this be on a case-by-case basis?

- Maria explains that if people are going to the pharmacy to pick up meds, or the hospitals are going to the pharmacy to pick up meds and the cancer is not directly related to HIV, or is not known to be, the meds will not be part of the formulary. If there is more intensive treatment, that would be something that they would look at differently. There is a process to appeal if new information becomes available. It's not something we see a lot of, but when we do see it, it is very expensive. Based on other financial limitations, this is a way that we are curbing some spending. Clients will be assessed on a case-by-case basis, and there may be some bumps in the road as we figure this out. We're always open to feedback if clients run into any issues, especially from case managers. We will always help people find other resources.

Alison Kirchgasser, Mass Health:

- On May 21 the Massachusetts Senate finalized its budget recommendations for State Fiscal Year 2027 (7/1/26 to 6/30/27). A Conference Committee is now reviewing any differences between the House and the Senate budgets to determine the final budget.
- These items were in both the Senate budget, and the House budget so are very likely to be in the final budget:
 - A \$1,750 annual cap on dental benefits for adults on MassHealth and the Health Safety Net, except for those who receive services from the Department of Dental Services.
 - Allows MassHealth to remove coverage of GLP-1s for weight loss

- Reduction in Care Management funding
- The House budget (but not the Senate budget) requires MassHealth to cover any HIV Prevention drug without patient cost sharing, prior authorization, step therapy or any other utilization management so it is unclear if this item will be included in the final budget.
- Under the new federal law known as the One Big Beautiful Bill Act, effective January 1, 2027, adults age 19 to 64 without young children or a disability will need to renew their MassHealth coverage every six months, rather than every twelve months and will need to meet work or education requirements to remain eligible for MassHealth. These requirements impact individuals living with HIV on MassHealth Family Assistance (but not those living with AIDS on MassHealth Standard).
- Individuals considered “medically frail” whose condition prevents them from complying with the work and education requirements will be exempt. MassHealth is reviewing guidance just released from the federal government to understand this exemption and will share information on this website: [Federal changes affecting MassHealth members | Mass.gov](https://www.mass.gov/info-details/federal-changes-affecting-masshealth-members)

Melissa Hector, Mayoral Liaison:

- No Update

Melanie Lopez, Ryan White Part A:

- Received the full Part A award and will provide an update at the last Planning Council meeting.
- Received our official HRSA Site Visit notification - Council and RWS will be working very closely to ensure the presentation, and this will take most of our capacity for the summer months.
- ICP will be submitted by the end of the month!
- Beginning to plan our FY26 site visit season - Slated to be Sept. to Nov.

COMMITTEE REPORTS

Henry shares that they will not be doing all Committee Reports today because the three standing committees are giving their Year End Reports today. He then shares updates from both Consumer Committee and the Executive Committee.

Consumer Committee:

- PCS shares photos from last week’s Pride events: Strides for Action, the Mayor’s Pride Kick Off, and Boston Pride for the People.
- At the final Consumer Committee meeting on June 18th, we will continue discussing social media, recruitment, and outreach efforts, Clare will present an evaluation plan to measure the impact of the Someone You Know & Love Campaign and lead an activity to refine the plan and data collection tools. We will also finalize our year-end report. PCS encourages anyone who is able to attend to come!

Executive Committee:

- First, the Chair reminds everyone that if they are comfortable with the revisions made to the Group Agreements, someone can make a motion to approve the edits made. He encourages everyone to remember Robert’s Rules – that they have the autonomy to make decisions and move things along. He shares that a member may also make a motion to continue discussion on these agreements.

Members have no further discussion on the Group Agreements.

Motion to approve the edits made to the Group Agreements: Rick Boyd

Second: Robert Giannasca

Result: Unanimous Approval

- Then, he reminds members that Exec has been working on both the group agreements, and also the Standard Operating Procedures and subsequent Bylaws revisions as a result. Altogether, these are called the Council's governing documents. He walks through the differences between Bylaws and Standard Operating Procedures (SOPs).
- Bylaws:
 - Internal rules that govern the overall management and operation of an entity
 - Provide a framework for how the entity is structured and how it functions
 - Due to the SOP development, there are several Bylaws edits that require 2/3 Council vote to approve.
- Standard Operating Procedures:
 - Specific guidelines and procedures that address various operational and administrative aspects of the entity.
 - Unlike bylaws, SOPs are more detailed and focus on areas of the entity's activities.
 - SOPs require a 2/3 Exec vote to approve
- The Executive Committee is working with PCS to review the SOPs according to the Council's existing practice and general lessons learned throughout the process of evaluating and writing them and will have them completed for the HRSA Site Visit.

Topic D: Allocation of Resources Committee Year-End Report

Robert Giannasca, ARC Chair, and Liz Koelnych, ARC Member, introduce themselves and the Year-End Report for the Allocation of Resources Committee (ARC). They review the members who were part of the committee as well as the committee charge.

From Bylaws, Article 7, Section 1:

The ARC shall make recommendations to the Planning Council regarding potential federal, state, local, and private resources available to meet unmet service needs and recommend action to the Planning Council as appropriate.

The ARC shall recommend allocations of Part A funds to allowable service categories in the EMA. The ARC shall develop funding scenarios that will allow for rapid disbursement of funds in the case of level funding, decrease in funding, and increase in funding. The allocation recommendations will use all available information regarding community service needs, current funding for HIV services from all identifiable sources, and other data

ARC's deliverables are the Funding Streams Report, Funding Principles, and Allocation Scenarios.

ARC uses several criteria for making funding decisions. They review the previous years' unexpended funds, develop a scenario for potential unexpended funds for the current year, and develop various funding scenarios for the following year based on historical spending and utilization, priorities of PLWH on Council, needs assessment data, and the existing funding environment.

This year, they split up the development of scenarios across two meetings:

- In April, they developed the scenarios for Carry Over:
 - FY25 Part A Actual Carryover
 - FY25 MAI Actual Carryover
 - FY26 Part A Potential Carryover

- FY26 MAI Potential Carryover
- In May, they developed scenarios during their All-Day Allocations meeting for FY27:
 - FY27 Level Funding - Part A
 - FY27 \$500K Decrease - Part A
 - FY27 \$1M Decrease - Part A
 - FY27 Level Funding - MAI
 - FY27 100% MAI Cut

They remind members that they will review all the scenarios today, vote on the Carry Over scenarios, and then the remaining FY27 scenarios will be voted on in May.

Next, they remind members about what Carry Over funds are. Carry Over funds are unexpended at the end of the fiscal year and may be eligible to be carried over into the next fiscal year. Carry Over cannot be more than 5% of the grant.

As a committee, ARC reviews last year's recommendation and decide to keep the same or create a new scenario with the FY25 Unexpended or Carry Over amount. They also make tentative recommendations for FY26 Potential Unexpended or Carry Over amount. Robert and Liz will review the Part A scenarios first – take a vote, then the MAI scenarios – and take a vote. Each vote will be for both FY25 and FY26 carry over. They remind members that FY26 scenarios are tentative, and ARC always reviews them before any action is taken.

FY25 Part A Actual Carry Over

On April 14, 2026, the Allocation of Resources Committee decided to recommend the following allocations for the FY25 Actual Carry Over Scenario:

- 50% ADAP
- 15% Oral Health Care
- 20% Food Bank/Home-Delivered Meals
- 15% Medical Nutrition Therapy

FY26 Part A Potential Carry Over

On April 14, 2026, the Allocation of Resources Committee decided to recommend the following allocations for the FY26 Potential Carry Over Scenario:

- 50% ADAP
- 15% Oral Health Care
- 20% Food Bank/Home-Delivered Meals
- 15% Medical Nutrition Therapy

Question for Regina:

- Why wasn't EFA chosen to receive carryover funds?
 - EFA has been struggling to spend all of their funds in a regular cycle, and with carryover specifically, they must spend the funds rapidly. ARC wanted to prioritize service categories that would be able to rapidly spend funds.
 - EFA can cover emergency food assistance, but MNT and Food Bank can as well. Since agencies have to go through other categories before EFA, it makes more sense to add funds into MNT and Food Bank before EFA.
- When will agencies be notified if they receive Carryover?
 - BPHC has not requested carryover yet. If BPHC requests carryover, BPHC and the agencies would not receive notice until August.

Motion to Approve the FY25 & FY26 Part A Carry Over scenarios as recommended by ARC: Rick Boyd

Second: Joey Carlesimo

Result: 16 approve, 1 abstain.

FY25 MAI Actual Carry Over

On April 14, 2026, the Allocation of Resources Committee decided to recommend the following allocations for the FY25 Actual Carry Over Scenario:

- 50% Psychosocial Support
- 50% Other Professional Services Legal

FY26 MAI Potential Carry Over

On April 14, 2026, the Allocation of Resources Committee decided to recommend the following allocations for the FY26 Potential Carry Over Scenario:

- 50% Psychosocial Support
- 50% Other Professional Services Legal

Motion to Approve the FY25 & FY26 MAI Carry Over scenarios as recommended by ARC:

Stephen Corbett

Second: Stephen Batchelder

Result: 16 approvals, 1 abstain, motion passes

After the votes are completed, Robert and Liz move on to review the FY27 scenarios. They first introduce the steps that ARC takes to develop them:

- The Committee reviews the current fiscal year's base award which is estimated from last year's FY26 Level Funding scenarios and the program's partial award. This includes 85% to direct services, 10% to administration and planning council support, and 5% to quality management.
- Then, ARC members make recommendations to increase or decrease certain categories based on the criteria reviewed earlier in this presentation. During the All-Day Allocations meeting, ARC also reviews:
 - Spending and utilization from the past 5 years, along with other relevant spending and utilization data as needed
 - Which service categories to hold harmless, meaning that if there is a change in funding, those categories remain at FY26 Level funding

They review the decision-making process and rationale for the following FY27 scenarios:

FY27 Level Funding Scenario

Level funding is if the program is awarded the same amount of funding as the current fiscal year. ARC recommends the following changes:

- Increase \$35,000 to Food Bank/Home-Delivered Meals due to the increase in cost of living and cost of food and a clear reduction in number of clients that the current allocation can serve.
- Reduce that \$35,000 from Psychosocial Support due to consistent underspending in the last 5 years of about \$40,000 or less and inability to maintain/sustain a staff line with only this much money.
- Reduce Medical Transportation by \$35,197 which is about their underspent dollars over the last 5 years. This service also has consistent/stable other funding streams.
- Reduce Medical Case Management by \$140,000 due to consistent underspending.
- Increase Non-Medical Case Management by \$70,000 to increase capacity for MassHealth/Medicaid recertifications and other administrative burden to maintain care.

- Increase Oral Health Care by \$105,197 to mitigate potential impacts to the dental care system related to MassHealth/Medicaid caps and other dental care reductions in funding for PLWH.

FY27 \$500K Decrease Scenario

For the \$500k decrease scenario, the total reduction from the entire award is \$500,000, so the direct service reduction is \$425,000, the admin reduction is \$50,000, and the Quality Management reduction is \$25,000. ARC worked with that \$425,000 amount for this scenario.

ARC started off by looking at a proportional decrease. For the proportional decrease, each base fund amount will be decreased by its individual proportion of the total direct service reduction. From there, members discussed whether or not to take away funding from a category to add to a different category and then calculate.

ARC recommends the following allocations for the FY27 \$500K Decrease scenario:

- First, the Committee chose to carry over the FY27 Level Funding decisions to be used as the base funding here. All adjustments made in the FY27 Level Funding scenario are carried over to this scenario.
- From there, the Committee decided to hold ADAP and Oral Health Care harmless, meaning that these two categories would not be proportionally reduced when the remaining categories are.
- From there, the \$425,000 overall reduction is taken proportionally from the remaining categories.

Why did you hold oral health care harmless?

- Due to upcoming caps on oral health care, we wanted to protect that service category in this scenario.

Members discuss lack of Part F Dental funding. PCS says that if we have any additional news about Dental Care, we will alert the Council.

FY27 \$1 Million Decrease

For the \$1 million decrease scenario, the total reduction from the entire award is \$1 million, so the direct service reduction is \$850,000, the admin reduction is \$100,000, and the Quality Management reduction is \$50,000. ARC worked with that \$850,000 amount for this scenario.

ARC then followed similar procedures as the \$500k Decrease scenario.

ARC recommends the following allocations for the FY27 \$1 Million Decrease scenario:

- First, the committee chose to carry over the FY27 Level Funding decisions to be used as the base funding here. All adjustments made in the FY27 Level Funding scenario are carried over to this scenario.
- From there, the \$825,000 overall reduction is taken proportionally from all categories.

Did you proportionally decrease because holding harmless would hurt the other service categories more?

- Yes, that's exactly right. This is such a large decrease that ARC decided it should be shared equally across all service categories.

FY27 MAI Level Funding

ARC recommends the following allocations for the FY27 MAI Level Funding scenario:

- Increase Other Professional Services by \$50,000 due to their consistent complete spending and demonstrated need over the last fiscal year.

- Reduce Psychosocial Support and Medical Case Management by \$25,000 each due to consistent underspending by about that much per category.

FY27 100% MAI Reduction Scenario

Based on the rapidly changing funding environment, last year's ARC decided to add on this scenario in order to prepare for a potential loss of the MAI program entirely. For this scenario, ARC looked at the Part A and MAI portfolios together so that members could get an idea of what categories would be impacted if they did not have the extra MAI funds. Ideally, if MAI is cut, Ryan White Services would try to retain those agencies within the Part A budget, and so the Council can be prepared with recommendations for how to maximize that opportunity. This year's ARC completed this scenario as well.

ARC recommends the following allocations for the FY27 100% MAI Reduction scenario:

- First, the committee chose to carry over the FY27 Level Funding decisions to be used as the base funding here. All adjustments made in the FY27 Level Funding scenario are carried over to this scenario.
- From there, in order to retain the Other Professional Services - MAI Allocation in Part A, the committee reduced \$137,813 proportionally from all categories except for Medical Case Management, Non-Medical Case Management, and Psychosocial Support. Technically, Other Professional Services - Legal increased by \$137,813.
- Then, the committee increased Non-Medical Case Management by \$143,612 and reduced Housing by an additional \$118,612 and Emergency Financial Assistance by an additional \$25,000.

Is there a possibility that MAI will be cut?

- Based on observed trends from the federal government, we just want to be prepared if the budget is reduced or cut completely. Although we don't have any confirmation that this would happen, we are preparing for a scenario in which this *could* happen.

How would these agencies be notified that they are losing their funding?

- BPHC would give them as much notice as possible, requesting emergency meetings to let them know. We are always required to give agencies 30 day's notice in case of a change of funding.

Robert thanks everyone for listening and reminds members that those five FY27 Funding Scenarios will be called for a vote during the final Planning Council meeting on June 25th. Members will have access to these slides in the meantime to review and may ask the Chairs or PCS questions.

Robert also presents the Additional Guidance to BPHC clause of the scenarios. This guidance is:

"To allow BPHC the flexibility to adjust category funding allocations based on emerging needs and the changing environment by up to 25% above or below the levels for each service category, except for categories funded at less than \$500,000, are given up to 50% leeway as established in the FY27 Funding Scenario recommendations.

If BPHC needs additional flexibility, they will notify the Executive Committee as soon as possible."

ARC gives BPHC this flexibility in order to rapidly allocate funds without having to go back to the Council, however, if above this leeway, Ryan White Services would notify the Executive Committee as soon as possible and they would determine best course of action.

To complete the Year-End Report presentation, they review the committee's recommendations for next year's ARC:

- ARC should hold one hybrid meeting in addition to the all-day meeting, ideally early in the year to build team cohesion.
- Incorporate health policy news impacting HIV funding as needed in ARC meetings, given how much the external funding environment shapes committee discussions.
- Members should suggest health policy news to PCS via email at least 1 week before the next ARC meeting.
- Continue splitting the funding streams report into three separate presentations across meetings—it is more digestible for members and a more manageable lift for PCS.
- Consider separating the meeting agenda from a dedicated objectives slide, listing what members should be able to accomplish or understand by the end of the meeting, so the group revisits key goals.

They also present ARC's recommendations for next year's Planning Council at large:

- Reintroduce double-sided name cards for in-person meetings so members and staff can identify one another easily.
- Include more professional development presentations, with opportunities for members and guests to present material, as in prior years.
- At hybrid meetings, make a practice of repeating questions and comments aloud.
- Add a level-setting activity at orientation to help members identify their strengths, areas for growth, and personal goals, and use that to guide their engagement throughout the council year.
- Post meeting recordings to Basecamp more consistently and include the recording link in post-meeting emails so members who missed a meeting or cannot read the minutes can easily access what was discussed.
- Embed more survey questions about Council experience into PC meeting evaluations. Information can inform future trainings.

Robert thanks the committee for a great year.

Topic E: Services, Priorities, and Evaluations Year-End Report

PCS transitions over to Ericka Olivera, SPEC Vice-Chair, to present the Year-End Report. Ericka Olivera introduces herself and the Year-End Report for the Services, Priorities, and Evaluations Committee (SPEC). She reviews the members who were part of the committee as well as the committee charge.

From Bylaws, Article 7, Section 1:

The SPEC shall summarize and make recommendations to the Planning Council on HRSA-approved Part A service categories and provide guidance on prioritizing Part A service categories.

The SPEC shall assess the efficiency of the administrative mechanism in rapidly allocating funds within the EMA. The committee will conduct additional evaluation activities, including evaluating the effectiveness of HIV care strategies in the EMA and of planning activities.

SPEC's deliverables include the Service Standards Review & Revisions, Guidance of the Priority Setting Process, and the Assessment of Administrative Mechanism.

PCS reviews the monthly service category review task in SPEC. They remind members that HRSA outlines the types of services for which funding is allowable. SPEC is responsible for reviewing these service categories and relevant EMA data and recommending which categories are needed for PLWH in the Boston EMA.

This is a look at the items reviewed in the monthly SPEC meetings:

- **October** - Provide an overview of the Boston EMA Part A Service Standards and how they are used for compliance, and assignment of Universal Service Standards for review
- **November** –Review Process for making changes to Service Standards, review of RWS recommendations, including legislation changes from HRSA, and introduction to Universal Service Standards review
- **December** – Review of Core Part A Funded Service Categories and accompanying Service Standards, with emphasis on RWS recommendations
- **January** – Review of Support Part A Funded Service Categories and accompanying Service Standards, with emphasis on RWS recommendations
- **February** – Review of Core Non-Part A Funded Service Categories and Introduction to the Priority Setting Process and available resources
- **March** – Review of Support Non-Part A Funded Service Categories, Priority Setting Resource Overview & Excel Tool Training, and Priority Setting Activity
- **April – May** – Priority Setting Debrief and Recommendation on Tied Categories, Discussion on the Benefits of SPEC Completing the Priority Setting Process First

The next project SPEC works on is Service Standards Review. As described above, SPEC reviewed service categories and their accompanying Service Standards on a monthly basis.

The Service Standards revision process as a six-step flow. It started with SPEC reviewing standards and beginning to outline changes, with RWS suggestions as the starting point. Then PCS and SPEC worked together to develop the changes and the rationale behind them. From there, the Committee went into a review and revision process with to finalize everything. SPEC then voted on the final revisions, and on February 12th, SPEC presented them to the full Planning Council for a vote. To close the loop, RWS finalized the changes and distributed the updated standards out to the EMA before FY26.

SPEC's next responsibility is to lead the Priority Setting Process. Each year, the Planning Council ranks all 28 service categories according to needs in the EMA. This prioritization helps the Allocation of Resources Committee and BPHC make resource allocation decisions. SPEC is responsible for designing and guiding the priority setting exercise.

SPEC's final responsibility is the annual Assessment of Administrative Mechanism (AAM). The AAM is a federally mandated assessment of how efficiently and rapidly BPHC allocates funds within the EMA. SPEC designs this assessment and distributes the data collection tools to funded agencies that evaluate BPHC's activities, including requests for proposals, contract monitoring, and distribution of funds. The committee also reviews fiscal data from BPHC.

The Committee is then responsible for reviewing all data and writing a report that includes recommendations on how to improve BPHC's administrative process. This year, SPEC presented this data on May 14th, along with their recommendations for BPHC, which the Planning Council voted to approve that same day. BPHC will present their response on June 25th at the final Planning Council meeting.

Ericka closes the presentation by sharing SPEC's recommendations for next year's Committee and the Planning Council.

Recommendations for SPEC:

- Beware of the number of service standards edits; the 26 edits this year were overwhelming for members and agencies to keep up with
- Allow members to choose which service standards they review rather than having assigned standards
- Continue reviewing service standards as a full group during meetings
- Explore using breakout rooms during Zoom meetings to tackle more standards at once, then reconvene to share out and discuss changes
- Revisit the decision about having SPEC complete priority setting before the full Council

Recommendations for Council:

- Encourage in-person attendance at meetings
- Consider using assigned seating at meetings

Ericka thanks everyone on the Committee and the Council for their support.

Topic F: Needs Assessment Committee Year-End Report

PCS transitions over to Joey Carlesimo, NAC Vice-Chair, to present the Year-End Report. Joey Carlesimo introduces himself and the Year-End Report for the Needs Assessment Committee (NAC). He reviews the members who were part of the committee as well as the committee charge.

From Bylaws, Article 7, Section 1:

The Needs Assessment Committee shall execute the development and implementation of a needs assessment to identify needs of people living with HIV both receiving care and those out of care to determine:

What medical and support services PLWH need to enter or return to care, stay in care, and reach and maintain HIV viral suppression

To what extent are those needs being met by the current system of care

What kinds of services are most needed and work best for different groups of PLWH – and what disparities in access and services remain for affected subpopulations and historically underserved communities

This process must be objective, ethnically, culturally, and linguistically sensitive. This process may be conducted in collaboration with the recipient. The needs assessment must be representative of the entire EMA.

The deliverables for this Committee are the Needs Assessment Report.

Joey then shares the accomplishments from the Year 2 of the Needs Assessment:

- Conducted 5 focus group discussions (FGDs) with PLWH
- Discussed and planned materials for in-depth interviews (IDIs) with PLWH
- Collected provider survey and sent targeted follow-up reminders
- Introduced co-creation methodology to guide the data collection approach
- Received NH DHHS needs assessment updates

- Coordinated with community partners for In-Depth Interviews
- Collaborated with MDPH/DPH on the integrated plan and aligned NAC's scope
- Conducted qualitative data analysis training
- Reviewed Part A epidemiology and performance measure data
- Connected NAC findings to ARC allocations process and ICP draft objectives

Joey closes the presentation by sharing NAC's recommendations for next year's Committee and the Planning Council.

Recommendations for NAC:

- Recognize that everyone brings a different perspective, stay attentive to how members interpret questions or might frame them differently, as each person may catch something another would miss.
- Approach the work with an open mind, acknowledge personal biases, and remain mindful that someone else's experience may look very different from your own, especially when heavy topics and personal experiences arise.
- Pay attention to who is missing from the data and what the representation looks like across the dataset, this awareness can also inform recommendations for the following Needs Assessment and strengthen efforts to reach communities not yet included in these discussions.

Recommendations for Council:

- Prioritize self-care and seek out support from each other as needed to sustain the work we do
- Continue creating opportunities for in-person connection, as these efforts have been valued and impactful

Joey thanks everyone on the Committee and the Council for their support.

Topic G: 2026-2027 Chair-Elect Nominations

PCS and the Chair introduce the final portion of the agenda, the Chair-Elect Nominations.

The Chair describes some of the primary responsibilities of the Chair-Elect:

Preparation for and Participating in Executive Committee Meetings

- Assist the Chair with agendas and review action items from committees
- In the absence of the Chair, chair the meeting
- Provide leadership and advice as needed

Preparation for and Participating in Planning Council Meetings

- Assist the Chair with agenda and review action items from Executive Committee
- Assist the Chair on any issues and possible concerns and preparations to address them
- In the absence of the Chair, chair and manage the meeting
- Provide leadership and advice as needed
- In presiding in the absence of the Chair, vote only when there is a tie

Meeting Follow Up

- Assist the Chair in meeting with people on behalf of the Planning Council as needed

New Member Orientation

- Attend and participate in new member orientation

Other

- In the absence of the Chair, serve as spokesperson for the Planning Council

The Chair-Elect serves for the year that they are elected, and then they become the Chair for the following year. For example, Henry is currently the Chair and Kim is currently the Chair-Elect. Kim will become the Chair for the 2026-2027 year and whoever is elected on June 25th will be Kim's Chair-Elect. That person will become Chair for the 2027-2028 year.

Members can nominate themselves or another member during this meeting, or they may email PCS after the meeting. All nominees will be contacted and must submit a written statement of candidacy (a little more about them and their experience, why they want to be Chair-Elect, etc.) by Thursday, June 18th at 5 PM (one week!). PCS reminds members that there will be no late submissions accepted as this is not fair to those who do it on time. All candidate statements will be sent out to the full Planning Council for review ahead of the June 25th meeting. The vote will take place at the end of the final meeting.

NOMINATIONS:

- Kim Wilson nominates Rick Boyd and he accepts the nomination

Topic H: Announcements, Evaluation & Adjourn

Prior to the list of announcements, PCS introduces the End of Year Survey. This year, PCS has added some fun member superlatives into the survey. This is a new activity from PCS to recognize fellow Council members for their outstanding contributions this year - and have a little fun. Members are invited to read the superlatives in the survey and choose the Council member that they think best fits that description. There is a list of everyone's names and there is a space to add their own superlative at the end. PCS will also be creating a few surprise ones.

Some examples are:

- Most likely to second the motion
- Most likely to find common ground

PCS encourages everyone to submit each other for these awards which will be presented at the End of Year Celebration after the final Council meeting.

The Chair reads out the announcements:

- **RECRUITMENT:** We have 43 total applicants and/or referred applicants - applications are DUE JUNE 12th! If you referred anyone, please connect with them to make sure they are all set on filling it out.
- Nominate a Chair-Elect ASAP! Statements due June 18th!
- End of Year Celebration – June 25th after the last Planning Council meeting at Cathedral Station (1222 Washington St, Boston, MA 02118)
 - There will be no food at the final Council meeting to account for some snacks at Cathedral Station for the End of Year Celebration. Please plan accordingly, and you are more than welcome to bring something to eat during the meeting.
- Fill out the End of Year Survey by June 23rd so PCS can begin analysis and award the superlatives.
- Shambi shares that she was a winner for racial justice student awards this year. Members congratulate her on her hard work.

- Stephen shares that there's a Senior Pride Luncheon at Venezia Restaurant in Dorchester happening on June 16th.

PCS and the Chair encourage members to attend the final Council meeting in person if they are able.

Meeting to Adjourn

Motion: Stephen Batchelder

Second: Kim Wilson

Result: The meeting was adjourned at 5:44 PM