



LOS ANGELES COUNTY  
**COMMISSION ON HIV**



Visit us online: <http://hiv.lacounty.gov>

Get in touch: [hivcomm@lachiv.org](mailto:hivcomm@lachiv.org)

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<https://tinyurl.com/y83ynuzt>



## **\*\*CHANGE IN MEETING VENUE\*\*** **Consumer Caucus "Hybrid" Meeting**

**THURSDAY, MAY 8, 2025**

**12:30 PM - 2:00 PM**

**ST. ANNE'S CONFERENCE & EVENT CENTER  
FOUNDATION ROOM  
155 N. OCCIDENTAL BLVD., LOS ANGELES 90026**

### **TO JOIN VIRTUALLY:**

<https://lacountyboardofsupervisors.webex.com/lacountyboardofsupervisors/j.php?MTID=me3d277cd5f62e481a86f73ffbf7de8a9>

Access Code: 2534 423 0134 Password: CAUCUS

**\*\*Lunch provided for in-person attendees on first come first serve basis\*\***

## Get ready for an engaging and impactful discussion at our next Consumer Caucus meeting!

### ◆ Dental Services Listening Session Debrief

Come weigh in on the key takeaways from our recent Dental Services Listening Session before we finalize consumer-driven recommendations.

### ◆ Upcoming Caucus Meetings

Provide input on meeting agendas and schedule for upcoming Caucus meetings.

Meeting materials can be accessed at <https://hiv.lacounty.gov/meetings>

Meaningful Involvement by People Living with HIV/AIDS #MIPA

# together.

WE CAN END HIV IN OUR COMMUNITIES ONCE & FOR ALL

Apply to become a Commission member at:

<https://www.surveymonkey.com/r/COHMembershipApp>

For application assistance, call (213) 738-2816 or email [hivcomm@lachiv.org](mailto:hivcomm@lachiv.org)



# CONSUMER CAUCUS (CC)

## “HYBRID” MEETING AGENDA

THURSDAY, MAY 8, 2025 @ 12:30PM-2:00PM \*updated time

In Person:

**ST. ANNE’S CONFERENCE & EVENT CENTER  
FOUNDATION ROOM**

**155 N. OCCIDENTAL BLVD., LOS ANGELES 90026**

**Parking Instructions:** All attendees should enter the Large Overflow Parking Lot off Glassell St. and walk across to the Conference Center. Attendants will be on-site to assist. If attendees require an accessible parking space, it will be in the Main Parking Lot off Occidental Blvd. [Map/Directions](#)

**WebEx Virtual Log-In:**

<https://lacountyboardofsupervisors.webex.com/lacountyboardofsupervisors/j.php?MTID=me3d277cd5f62e481a86f73ffbf7de8a9>

Access Code: 2534 423 0134 Password: CAUCUS

- |   |                     |
|---|---------------------|
| 1. CO-CHAIR WELCOME, INTRODUCTIONS & HOUSE RULES  | 12:30 PM – 12:35 PM |
| 2. ED/STAFF REPORT  | 12:35 PM – 12:40 PM |
| • County/Commission Updates   |                     |
| 3. CO-CHAIRS REPORT   | 12:40 PM – 12:55 PM |
| • 2025 Workplan & Meeting Schedule Review   |                     |
| ○ June, August & September Meetings   |                     |
| • September 19, 2025 Cross-Collaboration Opportunity w/ Aging Caucus to Commemorate National HIV/AIDS and Aging Awareness Day |                     |
| 4. DISCUSSIONS  | 12:55 PM – 1:50 PM  |
| • Dental Services Listening Session Feedback & Next Steps   |                     |
| 5. ACTION ITEMS, CALLS TO ACTION & NEXT STEPS   | 1:50 PM – 1:55 PM   |
| 6. PUBLIC COMMENTS & ANNOUNCEMENTS  | 1:55 PM – 2:00PM    |
| 7. ADJOURNMENT  | 2:00PM              |

**#MIPA**

**Meaningful Involvement by People Living with HIV/AIDS**



## LOS ANGELES COUNTY COMMISSION ON HIV



Approved by COH  
6/8/23

510 S. Vermont Ave 14<sup>th</sup> Floor • Los Angeles, CA 90020 • TEL (213) 738-2816 • FAX (213) 637-6748

HIVCOMM@LACHIV.ORG • <http://hiv.lacounty.gov>

### CODE OF CONDUCT

The Commission on HIV welcomes commissioners, guests, and the public into a space where people of all opinions and backgrounds are able to contribute. In this space, we challenge ourselves to be self-reflective and committed to an ongoing understanding of each other and the complex intersectionality of the lives we live. We create a safe environment where we celebrate differences while striving for consensus in the fights against our common enemies: HIV and STDs. We build trust in each other by having honest, respectful, and productive conversations. As a result, the Commission has adopted and is consistently committed to implementing the following guidelines for Commission, committee, and associated meetings.

**All participants and stakeholders should adhere to the following:**

- 1) We approach all our interactions with compassion, respect, and transparency.**
- 2) We respect others' time by starting and ending meetings on time, being punctual, and staying present.**
- 3) We listen with intent, avoid interrupting others, and elevate each other's voices.**
- 4) We encourage all to bring forth ideas for discussion, community planning, and consensus.**
- 5) We focus on the issue, not the person raising the issue.**
- 6) Be flexible, open-minded, and solution-focused.**
- 7) We give and accept respectful and constructive feedback.**
- 8) We keep all issues on the table (no "hidden agendas"), avoid monopolizing discussions and minimize side conversations.**
- 9) We have no place in our deliberations for racist, sexist, homophobic, transphobic, and other discriminatory statements, and "-isms" including misogyny, ableism, and ageism.**
- 10) We give ourselves permission to learn from our mistakes.**

In response to violation of the Code of Conduct which results in meeting disruption, Include provisions of SB 1100 which states in part, ". . . authorize the presiding member of the legislative body conducting a meeting or their designee to remove, or cause the removal of, an individual for disrupting the meeting . . . Removal to be preceded by a warning to the individual by the presiding member of the legislative body or their designee that the individual's behavior is disrupting the meeting and that the individual's failure to cease their behavior may result in their removal." Complaints related to internal Commission matters such as alleged violation of the Code of Conduct or other disputes among members are addressed and resolved in adherence to Policy/Procedure #08.3302." (Commission Bylaws, Article VII, Section 4.)

APPROVED BY OPERATIONS COMMITTEE ON 05/25/23; COH 06/08/23

Approved (11/12/1998); Revised (2/10/2005; 9/6/2005); Revised (4/11/19; 3/3/22, 3/23/23; 5/30/23)

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## Consumer Caucus Workplan 2025 (updated 4.30.25)

**PURPOSE OF THIS DOCUMENT:** To identify activities and priorities the Consumer Caucus will lead and advance throughout 2025.

**CRITERIA:** Select activities that 1) represent the core functions of the COH and Caucus, 2) advance the goals of the 2023 Comprehensive HIV Plan (CHP), and 3) align with COH staff and member capacities and time commitment.

**CAUCUS RESPONSIBILITIES:** 1) Facilitate dialogue among caucus members, 2) develop caucus voice at the Commission and in the community, 3) provide the caucus perspective on various Commission issues, and 4) cultivate leadership within the caucus membership and consumer community.

#	GOAL/ACTIVITY	ACTION STEPS/TASKS	TIMELINE/ DUE DATE	DESCRIPTION
1	<b>Consumer Resource Fair</b>	<del>Plan a comprehensive resource fair for consumers of HIV prevention and services in Los Angeles County. This event will be a cross-collaborative effort involving all Caucuses to ensure it meets the diverse needs of our communities.</del>	<del>February 13, 2025</del>	<del>The theme for the event is “Love Begins with Me”, a nod to self care=self love, aligning with Valentine’s Day. Focus Areas: 1. Holistic Wellness: Addressing physical, mental, spiritual, and financial health (e.g., nutrition, lifestyle, financial literacy, tech/computer literacy, estate planning). 2. Empowerment &amp; Advocacy: Providing skill building opportunities to foster effective self advocacy and empowerment. 3. Community Engagement: Encouraging broader involvement beyond HIV status to support overall community connection.</del>
2	<b>Consumer Feedback on Key Topics to Enhance HIV Services and Programs Vital for Quality of Life</b>	Gather feedback through listening sessions, public comments, and focus groups. Priority topics include: <ul style="list-style-type: none"> <li><del>Dental Services</del></li> <li>Commission Stipend Policy</li> <li>Ryan White Program &amp; Medi-Cal/Medicaid Migration</li> </ul>	<del>April 10, 2025</del> June 2025	Align consumer reviews with the Standards & Best Practices (SBP) Committee service standards schedule, the Planning, Priorities & Allocations Committee (PP&A) needs assessments and other Commission activities.
3	<b>Leadership &amp; Capacity Building.</b>	Coordinate consumer-specific trainings: <ul style="list-style-type: none"> <li>Digital Literacy (pending)</li> <li>Ryan White Program 101</li> <li>Self/Community Advocacy</li> </ul>	October 2025 September 2025	Continue to solicit training ideas from consumers. Refer to 2025 Commission training schedule for required HRSA Commissioner trainings.  September 19, 2025 Cross-Collab event w/ Aging Caucus
4	<b>Consumer Recruitment &amp; Participation in COH</b>	Identify caucus-led activities and <b>seek funding support</b> to increase consumer participation: <ul style="list-style-type: none"> <li>“Bring a Friend” Campaign</li> <li>Consumer Participation Focus Groups</li> <li>Community Information Sessions</li> <li>Recognition and Celebration of Members</li> <li>Incentive Programs for Attendance</li> <li>Targeted Outreach Campaigns</li> </ul>	Ongoing	Increase consumer participation, especially from underserved communities (Black/African American, Latinx, youth, Indigenous). Questions to Consider: 1. What incentives encourage unaffiliated consumers to attend meetings? 2. How can providers encourage client participation?



# Listening Session Summary: Ryan White (RWP) Program Dental Services

<b>Date</b>	Thursday, April 10, 2025
<b>Hosted by</b>	Consumer Caucus, Los Angeles County Commission on HIV
<b>Participants</b>	5 RWP Providers and 13 Clients/Consumers
<b>Purpose</b>	To gather consumer and provider feedback on access, quality, and challenges within the RWP-funded dental service delivery system and identify actionable improvements.

## Supporting Documents

[Listening Session Flyer](#)  
[DHSP Oral Health Services for PWH Fact Sheet](#)  
[DHSP Oral Health Service Overview PPT Presentation](#)  
[Oral Health Care Service Standard](#)

## Key Points of Discussion

### 1. Access and Utilization

Demand for general dental services remains significantly higher than for specialty procedures, despite the misconception that most consumers seek cosmetic or complex services. Participants emphasized that general dental services remain the highest area of need, with many clients only recently discovering they were eligible under RWP.

Many clients were unaware of their eligibility for oral health services under RWP and lacked clear information on available providers.

Long wait times and logistical burdens at academic dental clinics were raised, with some consumers reporting full-day visits for basic cleanings, discouraging consistent care.

*"You're there a whole day. A whole day for a cleaning... I go in the morning at 8 o'clock and don't get out until almost 5PM."* – **Consumer**

Outreach and education efforts were credited for recent increases in access, but it was clear awareness remains uneven, particularly among women, trans, and younger clients.





## 2. Insurance Confusion and Coverage Gaps

Participants highlighted confusion around insurance requirements and program eligibility, particularly with Denti-Cal, private insurance, and employer-provided coverage.

*"I have private insurance that covers only part of the procedure. Am I able to go to a Ryan White provider to cover the rest? It's all very confusing."* – **Consumer**

Coverage overlap issues resulted in significant out-of-pocket expenses and denial of care, with consumers unsure whether to accept employer dental plans or opt for RWP services.

*"I now have like, I don't know, a \$700 bill for dental services... I called about Ryan White after the fact, and they told me it couldn't be backdated."* – **Consumer**

Medicaid HMO dental plans (like Denti-Cal HMOs) often assign clients to providers who do not accept Ryan White, creating gaps in care access.

*"Case managers are signing clients up for Denti-Cal HMO plans we can't accept. The patients get assigned elsewhere and can't come to us."* – **Provider**

Discrepancies in the data around how many RWP clients have dental insurance (reported at 70%) raised concerns from providers, who noted this does not reflect their experience.

*"There's absolutely no way 70% of our patients have dental insurance. That number just doesn't sound right."* – **Provider**

*"We need clarity on what counts as insurance in the system. Just having a card doesn't mean you're covered."* – **Provider**

## 3. Quality of Care and Respect

While some consumers reported excellent care experiences—particularly at clinics like UCLA, where providers were described as respectful, thorough, and professional—others expressed concerns about lengthy treatment timelines, insufficient explanation of procedures in a client-friendly manner, and poor coordination between medical and dental providers.

Participants also noted a lack of culturally responsive care, citing examples such as limited bedside manner, empathy, and sensitivity—especially when receiving treatment from dental students or trainees.

At the same time, consumers highlighted the welcoming, nonjudgmental atmosphere of RWP-funded dental clinics and emphasized the importance of maintaining culturally competent, trauma-informed approaches that recognize and affirm the lived experiences of people living with HIV.



*"I go to UCLA... I have not had one problem at all with nobody. They have treated me with so much respect... The services are top-notch." – Consumer*

#### **4. Provider Challenges**

Providers emphasized that resource limitations require careful prioritization of care. There was concern that budget cuts (including a reported 0% contingency allocation for oral health) would force clinics to return to offering only emergency extractions.

*"We're doing what we do because of the funding. Denti-Cal would just pull all your teeth and give you dentures – and that's it." – Provider*

Providers called for respect for clinical recommendations and emphasized the need for clients to adhere to treatment plans to make the most of limited resources.

*"You can't expect to come in with \$50,000 worth of dental needs and get it all done. If we do that for one person, ten others go without any care." – Provider*

*"We only have the best interest of our patients in mind... Please try to respect the treatment plans we develop. Often, patients reject those plans from the start, which makes it difficult to help them." – Provider*

#### **5. Education & Empowerment**

A reoccurring theme from the session was the need for clearer education, improved health literacy, and empowerment of both consumers and providers navigating the complex landscape of dental care access, insurance, and treatment planning.

Participants expressed a desire for providers to take more time in educating clients about procedures, treatment options, and what to expect—especially when the care is being delivered by students or new trainees.

*"Sometimes it feels like there's not enough explanation before procedures. I want to know what's going on and why." – Consumer*

A participant shared that stigma can often stem from internalized feelings of shame, noting that some clients feel embarrassed or judged when having to discuss their oral health history and care habits.

*"We are treated this way because of how we feel about ourselves." – Consumer*

*"There's still stigma out there. Patients come to us because they were not treated respectfully elsewhere after disclosing their HIV status." – Provider*



## Recommendations

### For DHSP and Commission:

- ✓ Increase outreach and education on RWP dental benefits through client-friendly tools
- ✓ Reevaluate how insurance status is captured and reported to ensure clarity and accuracy. Specifically, DHSP to follow up with the Commission and providers on how CaseWatch captures insurance data, including what qualifies as “insured” and how this information is collected and reported.
- ✓ Consider funding support for case management and care coordination within dental clinics to help consumers navigate complex systems.
- ✓ Create a client-friendly FAQ document on insurance navigation and dental service options for broad community distribution.
- ✓ Create a Client Satisfactory Survey to be shared with client after every service.

### For Providers:

- ✓ Streamline appointment workflows to reduce client wait times and optimize session lengths, especially in training institutions.
- ✓ Continue emphasizing cultural sensitivity and trauma-informed care practices.
- ✓ Encourage early communication when treatment plans must change due to funding or clinical constraints.
- ✓ Disseminate a Client Satisfactory Survey to client after every service.

### For Consumers:

- ✓ Communicate clearly about insurance status, treatment expectations, and preferences.
- ✓ Follow through with appointments and cancel in advance if unable to attend, to ensure efficient use of limited provider time.

*"When someone doesn't show up, they're taking the time of someone who really wants to be there... Please cancel in advance so we can fill that spot." – Provider*

## Next Steps

1. **Disseminate** this summary to participants, providers, the Commission, and DHSP leadership.
2. **Implement** recommendations as appropriate.
3. **Incorporate** findings into the Oral Health Service Standards review and upcoming priority-setting processes.





4. **Collect** additional consumer and provider input on service satisfaction, insurance navigation, and access gaps—particularly from individuals who were unable to attend the session.

DRAFT



# We're Listening

*share your concerns with us.*

**HIV + STD Services  
Customer Support Line**

**(800) 260-8787**

## Why should I call?

The Customer Support Line can assist you with accessing HIV or STD services and addressing concerns about the quality of services you have received.

## Will I be denied services for reporting a problem?

No. You will not be denied services. Your name and personal information can be kept confidential.

## Can I call anonymously?

Yes.

## Can I contact you through other ways?

Yes.

By Email:

[dhspsupport@ph.lacounty.gov](mailto:dhspsupport@ph.lacounty.gov)

On the web:

<http://publichealth.lacounty.gov/dhsp/QuestionServices.htm>





# Estamos Escuchando



*Comparta sus inquietudes con nosotros.*

**Servicios de VIH + ETS  
Línea de Atención al Cliente**

**(800) 260-8787**

## ¿Por qué debería llamar?

La Línea de Atención al Cliente puede ayudarlo a acceder a los servicios de VIH o ETS y abordar las inquietudes sobre la calidad de los servicios que ha recibido.

## ¿Se me negarán los servicios por informar de un problema?

No. No se le negarán los servicios. Su nombre e información personal pueden mantenerse confidenciales.

## ¿Puedo llamar de forma anónima?

Si.

## ¿Puedo ponerme en contacto con usted a través de otras formas?

Si.

Por correo electrónico:  
[dhspsupport@ph.lacounty.gov](mailto:dhspsupport@ph.lacounty.gov)

En el sitio web:  
<http://publichealth.lacounty.gov/dhsp/QuestionServices.htm>

