

HIV Health Care Access Working Group

INCLUDE THE EARLY TREATMENT FOR HIV ACT (ETHA) IN HEALTH CARE REFORM

February 26, 2010

Dear Speaker Pelosi:

The President's most recent health care reform proposal is another important step forward towards passage of strong and comprehensive health care reform. However, one important provision was not addressed that would greatly improve health care access for people living with HIV. We urge you to support inclusion of the Early Treatment for HIV Act (as in the final House bill) in health care reform, providing states with an important vehicle for addressing the growing crisis in Ryan White-funded clinics and AIDS Drug Assistance Program (ADAP).

Including the Early Treatment for HIV Act (ETHA) in the final health care reform bill will allow states to expand Medicaid to people with HIV prior to the implementation of Medicaid expansion. It will provide low-income people with HIV, who have not yet progressed to a disabling condition, access to the care and treatment they need to prevent disease progression. In addition, when the Medicaid expansion is implemented, this population will be healthier and require less costly care through Medicaid.

Immediate access to early care and treatment through ETHA is critical at this time. Our ADAP program, a current primary resource for early access to HIV medications, is on the brink of the worst funding shortfall in years and many states have been forced to greatly restrict access to life-saving medications. Eleven state ADAPs have closed their doors to new clients and two states have dropped their financial eligibility level to ensure they don't run out of money to serve those currently on the program. Thirteen states have instituted or anticipate instituting cost-containment measures such as reducing their eligibility level, cutting drugs from their formulary, instituting annual expenditure caps per client or capping enrollment. HIV clinics across the country are operating above their capacity and may be forced to turn start turning individuals with HIV away.

It is critical that we support immediate passage of ETHA as part of health care reform. This will provide an additional tool to states in their efforts to provide life-saving and life-sustaining care and medications to many people living with HIV. We also strongly urge you to adopt the House measure that would bring Medicaid payment rates in line with Medicare rates to ensure that our country's neediest residents are not left behind as we work to truly transform our health care system.

For more information, please contact HHCAWG co-chairs Laura Hanen of the National Alliance of State and Territorial AIDS Directors at (202) 434-8091 or Robert Greenwald of the Treatment Access Expansion Project at (617) 390-2584.

Sincerely,
HIV Health Care Access Working Group Steering Committee

**AIDS Action | AIDS Action Baltimore | AIDS Alliance for Children, Youth & Families
AIDS Foundation of Chicago | The AIDS Institute | AIDS Project Los Angeles
AIDS Treatment Data Network | American Academy of HIV Medicine
Community Access National Network | Community HIV/AIDS Mobilization Project
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