HIV Health Care Access Working Group

June 11, 2012

Marilyn Tavenner
Acting Administrator Chief Operating Officer
Centers for Medicare & Medicaid Services (CMS)
Department of Health and Human Services
7500 Security Blvd.
Baltimore, MD  21244-1850

Re: CMS-2370-P

Dear Acting Administrator:

We are writing on behalf of the HIV Health Care Access Working Group (HHCAWG) in response to the proposed rule regarding payments for services furnished by certain primary care physicians under Medicaid. HHCAWG is a coalition of more than 100 national and community-based HIV service organizations representing HIV medical providers, advocates and people living with HIV and providing critical HIV-related health care and support services. The Working Group is actively engaged in efforts to increase early and affordable access to quality, comprehensive care for people living with HIV.

The Medicaid program currently is the largest federal funder of HIV care covering at least 47% of people with HIV infection who are in care, and in 2014 when Medicaid is expanded the program will play an even greater role providing health care coverage for people with HIV. We are long-time supporters of expanding access to Medicaid coverage but are concerned about people with HIV/AIDS having access to providers with the appropriate level of HIV experience and experience if the existing disparities in Medicaid rates are not addressed at the national level.

The proposed rule is an important first step in ensuring that low income people gain meaningful access to primary care services when Medicaid is expanded in 2014, and we strongly support the proposal for all subspecialists recognized by the American Board of Medical Specialties to be eligible for increased Medicaid payments for primary care services. HIV disease is now a chronic condition for individuals with early and regular access to care and treatment. Similar to other chronic conditions, many people with HIV/AIDS identify their HIV medical providers regardless of their subspecialty training as their primary care provider to receive comprehensive care that meets all of their medical needs. In addition, nurse practitioners and physician assistants play a critical role in the HIV health care workforce. To sustain and grow a qualified and robust HIV health care workforce, it is important for their services to be reimbursed at levels comparable to the primary care provider under whose supervision they are working as is proposed in the rule.
Thank you for the opportunity to comment on this important proposed rule. Developing a higher national standard for Medicaid provider payments that supports the cost of providing high quality comprehensive care is critical to a successful and effective Medicaid expansion for people with HIV/AIDS and others with complex, chronic conditions.

Respectfully submitted by the following organizations:

ActionAIDS
AIDS Action Baltimore
AIDS Action Committee
AIDS Alliance for Children, Youth & Families
AIDS Foundation of Chicago
The AIDS Institute
AIDS Project Los Angeles
AIDS Treatment Data Network
AIDS United
American Academy of HIV Medicine
Broward House / South Florida AIDS Network
Community Access National Network
Communities Advocating Emergency AIDS Relief (CAEAR) Coalition
Gay Men’s Health Crisis
Georgia AIDS Coalition
Harlem United
Health and Disability Advocates
HealthHIV
HIVictorious, Inc.
HIV Medicine Association
Housing Works
Lifelong AIDS Alliance
Moveable Feast
National Alliance of State and Territorial AIDS Directors
National Association of People With AIDS
National Minority AIDS Council
National Pediatric AIDS Network
The National Working Positive Coalition
HIV Prevention Justice Alliance
Project Inform
San Francisco AIDS Foundation
South Carolina Campaign to End AIDS
Treatment Access Expansion Project
Treatment Action Group
Village Care