Progress Not Repeal:
HIV Organizations In Support of Health Reform

We, the undersigned organizations, strongly support implementation of the Patient Protection and Affordable Care Act of 2010 (ACA). Repeal of the legislation or de-funding of key components threatens the health and well-being of people living with HIV/AIDS and those at risk for infection.

Improving the System that Fails too Many with HIV Disease

No health condition better illustrates the failures of the current health care system than HIV disease. Remarkable treatment advances have transformed HIV disease to a chronic condition—for people with ongoing access to care. And yet our current system leaves nearly 50% of people living with HIV in the United States without reliable access to care and treatment and fewer than 20% with access to private insurance coverage. ACA ends the discriminatory practices that have fueled these disparities and addresses existing systemic barriers to health care coverage for people living with HIV/AIDS and countless others with chronic diseases.

Addressing the Current Crisis in HIV Care

The problems with our current system have never been more evident. The AIDS Drug Assistance Program (ADAP), the primary safety-net for HIV medications for low-income uninsured people with HIV, is experiencing severe funding shortfalls that are leaving thousands of individuals living with HIV on waiting lists to access life-saving medications and hundreds of others unable to access medications due to other ADAP cost-cutting measures. HIV clinics are facing similar constraints and being forced to reduce clinic hours and cut back on key services, such as laboratory monitoring. Without full implementation of ACA this situation will continue to worsen leaving individuals and communities at risk for poor health outcomes, increased health expenditures, greater disparities in HIV health care, and increased HIV infections.

Preventing Disability through Earlier Access to Medicaid Coverage

The expansion of Medicaid in 2014 to all low income individuals and families, along with the removal of the Medicaid asset test, will correct one of the systemic barriers that forces people with HIV to become disabled by AIDS before qualifying for the coverage and access to care and treatment that could prevent disability in the first place. The affordable and comprehensive coverage offered under Medicaid will improve and save the lives of many low income people with HIV disease.

Reducing New HIV Infections by Investing in Prevention and Public Health

ACA includes important prevention and public health provisions that have significant implications for people at risk for HIV infection and other diseases. New coverage requirements include full coverage for certain preventive screenings, including HIV testing for those at increased risk and pregnant women. This is an important step in helping the one-fifth of people with HIV who are unaware that they are affected learn their status and get linked to medical care and treatment. Treatment is not only lifesaving but also suppresses the virus greatly reducing transmission risk to others. The Prevention and Public Health fund invests in evidence-based prevention programs at the community level retooling our approach to preventing chronic diseases, such as HIV, to improve the overall health of the community and avert more costly medical expenses.

Improving the Affordability of Prescription Drugs under Medicare Part D

The closing of the Medicare Part D donut hole, or coverage gap, and the ability of AIDS Drug Assistance Program expenditures to count toward the true of pocket limit are critical improvements that will better ensure lifesaving medications do not remain out of reach for Medicare beneficiaries with HIV due to cost.

Supporting Progress

Support implementation of health reform. Efforts to repeal or not fund key provisions of ACA threatens the lives of people with HIV, as well as millions of Americans, who have gone too long without life-saving insurance coverage.

This petition was organized by the HIV Health Care Access Working Group. Please contact the HIVHCAWG co-chairs, Robert Greenwald, Treatment Access Expansion project (rgreenwa@law.harvard.edu) and Andrea Weddle, HIV Medicine Association (aweddle@hivma.org), with questions.