The ADAP Coalition

July 8, 2009

The Honorable David R. Obey
Chairman
Subcommittee on Labor-HHS-Education
House Appropriations Committee
2358 Rayburn House Office Building
Washington, DC 20515

The Honorable Todd Tiahrt
Ranking Member
Subcommittee on Labor-HHS-Education
House Appropriations Committee
2441 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Obey and Ranking Member Tiahrt:

On behalf of the undersigned organizations we are writing to urge your support for increased funding for the AIDS Drug Assistance Program (ADAP) in the FY2010 Labor-HHS-Education Appropriations bill. ADAPs provide HIV-related medications to underinsured and uninsured individuals living with HIV/AIDS in the United States. We applaud the Committee’s past support for ADAP, which provides life-saving medications to nearly one-quarter of the people with HIV/AIDS estimated to be receiving care in the U.S.

President Obama’s budget proposal includes $20 million for ADAPs; however we believe that these programs warrant additional funding because so many individuals with HIV/AIDS depend on this support and because the economy has devastated state budgets. While ADAPs have administered their funds efficiently, ADAPs must treat a growing number of infected individuals who need life-saving medication. ADAPs have also experienced increased costs due to health care inflation. ADAPs have always been a successful state – federal partnership, with 34 states contributing $329 million to ADAP programs in FY2008. However, in the past year 13 states had to decrease their support of ADAP programs and 8 eliminated all general revenue funding for ADAPs. In a survey conducted by the National Alliance of State and Territorial AIDS Directors, 64 percent of HIV/AIDS care and treatment programs have experienced or will experience funding decreases in state FY2009, and cuts thus far in AIDS program funding total $83 million.

The fiscal condition of many ADAPs remains fragile and the program requires additional funds to meet the needs of existing and new clients. The identified need is an increase of $269 million, for a total FY2010 funding amount of $1.084 billion for ADAPs. This funding level will allow ADAPs to serve over 134,000 clients throughout the year. As of last month, there were 99 individuals on ADAP waiting lists in four states. Eleven ADAPs, one with a current waiting list, anticipate implementing new cost-containment measures by the end of March 2010, which is the end of the FY2009 ADAP grant period. Six of those states anticipate implementing a waiting list. In
addition to access barriers, there remains a significant variation in ADAPs across the nation in both formularies and eligibility criteria. Twenty-eight ADAPs require that an applicants’ income not exceed 300 percent of the Federal Poverty Level (FPL). Nine of those ADAPs allow a maximum of 200 percent of FPL to qualify.

According to the CDC, approximately 500,000 individuals living with HIV/AIDS are not receiving consistent care and an additional 250,000 individuals do not know they are HIV-positive. CDC estimates that their Expanded HIV Testing Initiative will find 20,000 new infections over the next few years; many more will be found through the implementation of routine testing in all healthcare settings. Statistics show that approximately 20 to 28 percent of people living with HIV/AIDS and in care in the U.S. are uninsured. While we await the passage and implementation of health reform legislation, we anticipate many of these individuals will ultimately rely on ADAPs. Therefore, it is critical that ADAPs receive additional funding in FY2010 to ensure that life-saving drug treatments are available to the patients who need them. Additional funding will decrease waiting lists and other state-erected barriers.

In summary, as you continue to draft the FY2010 Labor-HHS Appropriations bill, we ask that you consider a generous increase for ADAPs. The United States must continue to demonstrate its commitment to fighting the HIV/AIDS epidemic on the home front as well as throughout the world. As part of that commitment, it is necessary to ensure treatment to all persons living with HIV/AIDS in need. We welcome the opportunity to work with you and your staff to provide you with information detailing ADAPs’ need for additional funding in Congress.

Sincerely,

Abbott
ADAP Advocacy Association (aaa+)
AIDS Action
The AIDS Institute
American Academy of HIV Medicine
CANN - Community Access National Network
GlaxoSmithKline
HIV Dental Alliance
Log Cabin
Merck & Co., Inc.
National Alliance of State and Territorial AIDS Directors
National Association of People with AIDS (NAPWA)
Patient Services Incorporated
Project Inform
Tibotec Therapeutics
Village Care of New York
cc: House Labor-HHS-Education Subcommittee Members