

VIA ELECTRONIC SUBMISSION

Attention: HRSA-2012-0003
Ryan White HIV/AIDS Program

Ryan White Work Group Comments on Next Steps for the Ryan White Program

The Ryan White Work Group (RWWG) of the Federal AIDS Policy Partnership is the largest coalition group advocating on behalf of the Ryan White Program. The Ryan White Work Group appreciates the opportunity to submit written comments on the 2013 reauthorization of the Ryan White HIV/AIDS Program. In 2009, the Ryan White Work Group created the “community consensus document” that helped to serve as a platform for the 2009 reauthorization.

It is the intention of the RWWG to work with our coalition members to follow a similar process to create a “community agreement document” for federal agencies and the U.S. Congress to use as a guide to community thoughts about the reauthorization process. That document will be released in 2013 with time for Congressional committees and administration officials to review the document and we hope that it will prove to be a useful guide. In the meantime the Work Group, and the organizations included on these comments, provides the following principles that will provide guidance on our future approach to the community agreement document.

Principles for the Reauthorization of the Ryan White Program in 2013

- The Ryan White Program should support implementation of the National HIV/AIDS Strategy’s goals to reduce HIV incidence, increase access to HIV care and treatment, and reduce disparities. The Ryan White Program authorization should fund the program at such sums as necessary with appropriators providing levels of funding that would support the achievement of these goals and should not be lowered below current funding levels.
- Even with full implementation of the Affordable Care Act (ACA), the Ryan White Program will be needed to support transition to new forms of coverage, fill gaps in covered HIV care and treatment services and covered populations and to continue to provide vital enabling and support services. Of particular concern are:
 - Support for the transition of uninsured Ryan White clients to new forms of insurance coverage while maintaining continuity of care and minimizing disruption to care;
 - Gaps in HIV care and treatment services under private insurance exchange plans;
 - Gaps in coverage of HIV care and treatment services under Medicaid expansion (in those states that comply with the ACA requirement to expand Medicaid to 133% of the federal poverty level);
 - Gaps in coverage of HIV care and treatment services in states that do not comply with the ACA’s Medicaid expansion provision; and

- Additionally, as many as 30 million people, many of them living with HIV will continue to be without coverage even after full implementation of the ACA. The Ryan White Program must continue to be available for these people.
- The Ryan White Program must have the flexibility to ensure that implementation of the ACA does not result in gaps in coverage and services. The Ryan White Program will also need the flexibility to support continuity of care and minimize disruptions and loss to care during the transition of Ryan White clients to new forms of coverage. Concerns regarding the limitations of the payer of last resort requirement must be addressed to ensure Ryan White clients are not adversely impacted.
- During ACA implementation, HRSA and its federal partners should apply the lessons learned from states that have expanded access to Medicaid early, such as Massachusetts and California.
- The reauthorization of the Ryan White program must ensure stability during a transition period as clients gain access to public and private health insurance coverage under the Affordable Care Act and beyond.
- Technical assistance and funding for Ryan White grantees and sub-grantees must be provided for a multi-year transition period so that grantees can make necessary changes in order to adapt to the new health care financing environment and continue to provide HIV treatment and care.
- HRSA must work with Ryan White providers and other federal agencies to ensure that Ryan White providers and the highly effective medical homes that have developed via the Ryan White Program over the last several decades are integrated into new systems created by the ACA to ensure continued access to expert and comprehensive care for individuals living with HIV/AIDS.
- The Ryan White Program must continue to address not only gaps in the availability of care and treatment, but also the quality and adequacy of the care and treatment provided. The program should continue to support access to expert and comprehensive HIV care and treatment. For example, while some insurance plans purchased on the exchanges will cover a limited annual number of mental health visits in a year, a client may be able to get mental health services funded by the Ryan White Program for the remainder of the year.
- Racial/ethnic, LBGT and other disparities should continue to be specifically addressed within the framework of the Ryan White Program.
- The Ryan White Program must ensure delivery of vital and necessary services that are critical to ensuring that individuals living with HIV/AIDS are linked to and maintained in HIV care and treatment. Such services include transportation, food and other nutrition support, home care, linguistic services, navigation services and benefits counseling, case management (including medical case management when not otherwise covered),

substance abuse and mental health treatment, early intervention, legal and housing services. Oral health care, which is largely absent from the expansion of services under the ACA, must also remain available and sufficiently funded.

Thank you for the opportunity to provide comments on the future of the Ryan White Program. We appreciate your attention and consideration of these comments. Please do not hesitate to contact the co-chairs of the Ryan White Work Group, William McColl at (202) 595-4167, wmccoll@aidsunited.org or Ann Lefert at (202) 434-7138, alefert@NASTAD.org regarding these comments.

Sincerely,

ADAP Advocacy Association (aaa+), Washington, DC
AIDS Action Baltimore, Baltimore, MD
AIDS Alabama, Birmingham, AL
AIDS Alliance for Children Youth & Families, Washington, DC
AIDS Foundation of Chicago, Chicago, Illinois
The AIDS Institute, Washington, DC, Tampa, FL
AIDS Legal Council of Chicago, Chicago, IL
AIDSNET, Bethlehem, PA
AIDS Project Los Angeles, Los Angeles, CA
AIDS Resource Center Ohio, Columbus, OH
AIDS United, Washington, DC
African Services Committee, New York, NY
American Academy of HIV Medicine, Washington, DC
Association of Nurses in AIDS Care, Akron, OH
Bay Area Consortium for Quality Health Care, Inc, Oakland, CA
CAEAR Coalition, Washington, DC
CARES, Kalamazoo, MI
Chattanooga CARES HIV/AIDS Resource Center, Chattanooga, TN
Common Ground, Santa Monica, CA
Community Access National Network (CANN), Washington, DC
Dab the AIDS Bear Project, Fort Lauderdale, FL
Fenway Community Health Center, Boston, MA
Gay Men's Health Crisis (GMHC), New York, NY
Georgia AIDS Coalition, Atlanta, GA
HIV ACCESS, Alameda County, CA
HIV Dental Alliance, Atlanta, GA
HIV Medicine Association, Arlington, VA
Harlem United, New York, NY
Harm Reduction Coalition, New York, NY
HealthHIV, Washington, DC
Human Rights Campaign, Washington, DC
International AIDS Empowerment, Las Cruces, NM, El Paso, TX
L.A. Gay & Lesbian Center, Los Angeles, CA
LIGHT Health & Wellness Comprehensive Services, Inc, Baltimore, MD

The Latino Commission on AIDS, New York, NY
Lifelong AIDS Alliance, Seattle, WA
Mendocino County AIDS/Viral Hepatitis Network, Ukiah, CA
Minnesota HIV Services Planning Council, Minneapolis, MN
Moveable Feast, Baltimore, MD
Nashville CARES, Nashville, TN
National Alliance of State and Territorial AIDS Directors, Washington, DC
National Association of County and City Health Officials, Washington, DC
National Association of People with AIDS, Washington, DC
National Coalition for LGBT Health, Washington, DC
National Minority AIDS Council, Washington, DC
North Central Texas HIV Planning Council, Fort Worth, TX
Ohio AIDS Coalition, Columbus, OH
Okaloosa AIDS Support & Informational Services, Inc. (OASIS), Ft Walton Beach, FL
Paterson Counseling Center, Inc, Paterson, NJ
Project Inform, San Francisco, CA
Racial and Ethnic Health Disparities Coalition
Ryan White Medical Providers Coalition
San Francisco AIDS Foundation, San Francisco, CA
VillageCare, New York, NY