

# AIDS Budget and Appropriations Coalition

(An affiliated workgroup of the Federal AIDS Policy Partnership)

November 12, 2015

The Honorable Thad Cochran  
Chairman  
Committee on Appropriations  
United States Senate  
Washington, DC 20510

The Honorable Barbara Mikulski  
Vice Chairwoman  
Committee on Appropriations  
United States Senate  
Washington, DC 20510

The Honorable Harold Rogers  
Chairman  
Committee on Appropriations  
United States House of Representatives  
Washington, DC 20515

The Honorable Nita Lowey  
Ranking Member  
Committee on Appropriations  
United States House of Representatives  
Washington, DC 20515

## **Subject: HIV/AIDS Community Urges Congress to Restore Proposed Cuts in Final FY2016 Appropriation Bill**

Dear Chairman Cochran, Vice Chairwoman Mikulski, Chairman Rogers, and Ranking Member Lowey:

We, the undersigned 114 organizations of the AIDS Budget and Appropriations Coalition (ABAC), a work group of the Federal AIDS Policy Partnership (FAPP), thank the Congress and the President for reaching an agreement that restores some of damaging sequester cuts and increases discretionary spending over the next two years under the Bipartisan Budget Act of 2015. As you work now to finalize the FY2016 appropriation measures, we ask that you ensure the federal government maintains its commitment to funding critical domestic HIV/AIDS programs. In order to achieve the goals of the National HIV/AIDS Strategy and move towards an AIDS-free generation, continued federal government resources will be required.

As detailed below and in the ABAC funding [chart](http://bit.ly/1HxvGEN) at <http://bit.ly/1HxvGEN>, thank you for largely maintaining funding for these programs in your respective FY2016 appropriations bills. However, we are greatly concerned about the number of programs that have been proposed to be eliminated or dramatically cut. Such cuts would directly impact domestic HIV/AIDS prevention, care, and treatment programs and people who are at risk for or living with HIV. **As you craft a final appropriation measure, we urge you to restore these damaging proposed cuts and maintain funding for other HIV/AIDS programs**, including:

The **Ryan White HIV/AIDS Program** provides medications, medical care, and essential coverage completion services to approximately 536,000 low-income, uninsured, and/or

underinsured individuals living with HIV/AIDS. It is the single largest program designed specifically for people living with HIV/AIDS and acts as a payer of last resort for individuals unable to afford essential treatment and services. While the House bill maintained funding for the entire program, the Senate proposes to completely eliminate the **Special Projects of National Significance** (SPNS) program. SPNS develops innovative services models for some of the hardest to reach populations, including women of color, transgender individuals, incarcerated persons, homeless people with multiply diagnosed co-morbidity, Latinos, men who have sex with men (MSM), and individuals co-infected with HIV and hepatitis C. **We strongly urge Congress to reject the Senate proposal to eliminate all \$25 million in SPNS funding, and to support at least the current Ryan White Program funding level of \$2.319 billion, as proposed by the House.**

The **HHS Secretary's Minority AIDS Initiative Fund (SMAIF)** provides resources for programs across many federal agencies to form collaborative efforts that develop programs and best practices that improve health outcomes for individuals most impacted by HIV/AIDS, including racial and minority communities who are often disproportionately affected. The Senate bill completely eliminates all \$52 million for this initiative, which would eliminate HIV funding to AIDS.gov, the Indian Health Service, Regional Health Administrators, the Office of Population Affairs, the Office of Minority Health, and the Office of Women's Health. These programs enhance, rather than replace, other federal resources. **We strongly urge Congress to reject the Senate proposal to eliminate all funding for SMAIF, and to support the House proposal of at least \$52.2 million.**

**SAMHSA Minority AIDS Initiative** funding was cut by \$9 million in the Senate bill. SAMHSA's MAI funding enhances and expands effective, culturally-competent HIV/AIDS-related behavioral services in minority communities for people who need behavioral health services. These funds are not duplicative of other federal programs and target specific populations, requiring these services. **We strongly urge Congress to reject any cut to SAMHSA's Minority AIDS Initiative funding and to at least support the funding level included in the House bill.**

**CDC's Division of HIV Prevention (DHAP)** is critical to our nation's response to the HIV/AIDS epidemic. There are currently 50,000 new HIV infections every year, and infections among MSM, particularly black and Latino MSM, are on the rise, as well as among young people. To effectively implement the updated National HIV/AIDS Strategy, we must continue to prioritize domestic HIV prevention funding, including targeted resource distribution to disproportionately affected populations and areas. **We urge Congress to maintain funding for DHAP at least at the proposed level of \$755.6 million in both the House and Senate bills.**

The **CDC Division of Adolescent and School Health (DASH)** is a unique source of support for youth HIV, and other STI prevention efforts in our nation's schools, strengthening education agencies' ability to assist districts and schools' ability to promote student health. In addition, the Division leads nationwide adolescent and school health surveillance efforts, which serve as a resource for adolescent health information and play a critical role in documenting youth health trends and challenges. **We urge Congress to continue to support DASH funding at least at its current level of \$31.1 million in FY2016.**

The **CDC's Division of STD Prevention** is currently the only federal agency providing funding for sexually transmitted diseases (STD) prevention in all 50 states and nine cities/territories. The Senate bill has proposed to cut the division by \$32 million at a time when STDs are on the rise in the U.S. and can increase susceptibility to HIV infection. **We strongly urge Congress to reject the Senate proposal to cut CDC's Division of STD Prevention, and to at least support the funding level of \$157.3 million included in the House bill.**

**CDC's Division of Viral Hepatitis (DVH)** is tasked with handling all viral hepatitis prevention efforts both domestically and globally. With one in four people with HIV co-infected with hepatitis C, and currently more than 5 million Americans diagnosed with hepatitis C and hepatitis B, increased resources to DVH are critically needed. The Senate bill has proposed to increase DVH's budget by \$5 million in FY2016 for a total of \$36.3 million. **Given the urgent need to increase funding to address viral hepatitis in our country, we urge Congress to support the President's request of \$62.8 million for DVH in the final bill.**

House and Senate bills have proposed allowing states and localities to use federal funds for **syringe exchange programs** (except for the purchase of syringes) in areas experiencing, or at risk for, elevated rates of HIV or hepatitis infections. Given the recent outbreaks of HIV and hepatitis C in Indiana and elsewhere, states and localities need more than ever the flexibility to use federal funds they already receive to support the wide range of critical intervention services supported by syringe exchange programs, including HIV and hepatitis C testing and education, overdose prevention, and referrals to medical care, including substance use treatment. **We strongly urge Congress to support the language included in both the House and Senate bills regarding syringe exchange programs.**

**Teen Pregnancy Prevention Program's (TPPP)** provides young people access to evidence-informed, age-appropriate, and medically-accurate information to prevent unintended pregnancy, HIV, and other STDs. TPPP was essentially eliminated in both the House and Senate bills. At the same time, the House and Senate have proposed to increase abstinence-only-until-marriage programs that have been shown to be ineffective and stigmatizing to young people. **We strongly encourage Congress to restore TPPP funding to at least its current level of \$101 million. We also urge the elimination of funding for abstinence-only-until-marriage programs.**

The House and Senate have proposed to increase funding for the **National Institutes of Health**. Continued funding for AIDS research at the NIH is critical to ending AIDS domestically and globally. We are on the brink of promising new game-changing breakthroughs in the area of HIV cure research and new long-acting treatments, and there are critical ongoing trials of vaccines, microbicides and pre-exposure prophylaxis (PrEP) using antiretroviral drugs. **We strongly urge Congress to support at least the Senate's proposed \$2 billion increase to NIH and ensure AIDS research is fully funded.**

The **Title X Family Planning** program is the nation's only dedicated source of family planning funding, and as part of its services offers HIV/AIDS prevention education and testing in addition to screening and treatment for other STDs. These services help refer women and their families to HIV care when needed. The House has proposed to completely eliminate the Title X program,

while the Senate has proposed to cut the program by nearly \$29 million. **We strongly urge the House and Senate to restore full funding for this vital program to at least its FY2015 level of \$286.5 million.**

The House has proposed an increase of \$5 million to the **Housing Opportunities for Persons with AIDS (HOPWA)** program at the Department of Housing and Urban Development, while the Senate maintains current funding. Stable housing plays a critical role in preventing new HIV infections, helps those living with HIV adhere to treatment, and reduces the likelihood of more costly HIV-related complications. While we appreciate the proposed additional investment in HIV/AIDS housing, we urge Congress to respond with funding that will recognize the higher need. We are pleased the Senate recognizes the need to modernize the formula used to distribute HOPWA funds so that they are no longer based on cumulative AIDS cases but rather a combination of HIV cases, rental costs, and poverty levels. **In the final Transportation, Housing and Urban Development, and Related Agencies appropriations bill we strongly urge Congress to include at least the \$5 million increase contained in the House passed bill and a modernization of the formula for grant awards.** We recognize there are differing views on how to modernize the formula in order to limit the impacts caused by the formula changes on affected jurisdictions, and urge that they be resolved between the Administration and the Congress in consultation with the HIV/AIDS community.

**The Affordable Care Act (ACA)** has been successful in extending health care coverage to millions, including people living with HIV, who previously were unable to afford health insurance or were barred from enrolling due to pre-existing conditions. Both the House and Senate bills would eliminate funding to carry out the implementation of parts of the ACA. **We strongly urge the House and Senate to restore funding for this vital program.**

The **Agency for Healthcare Research and Quality (AHRQ)** was eliminated in the House bill and cut by \$127 million in the Senate bill. AHRQ is a trusted source of data and analysis about our nation's health care system and it sponsors the U.S. Preventive Services Task Force and the HIV Research Network. **We strongly urge the Congress to reject these cuts and maintain its current funding of at least \$364 million.**

We also urge you to put forward appropriation bills that do not contain controversial riders that could potentially derail the appropriation process and lead to a damaging government shutdown.

Again, thank you for your long standing support and continued leadership in the fight against HIV/AIDS. With the increased discretionary funding included in the Bipartisan Budget Act, we hope the proposed cuts outlined above can be restored while other domestic HIV/AIDS programs will be maintained in the final FY2016 appropriations bill. We look forward to working with you and the entire Congress as you successfully complete the FY2016 appropriations process.

Sincerely,

ACRIA  
ActionAIDS  
ADAP Advocacy Association (aaa+)

ADAP Educational Initiative  
Advocates for Youth

Affirmations Lesbian Gay Community  
 Center  
 African American AIDS Task Force  
 African American Health Alliance  
 AIDS Action Baltimore  
 AIDS Action Coalition  
 AIDS Alabama  
 AIDS Alabama South  
 AIDS Alliance for Women, Infants,  
 Children, Youth & Families  
 AIDS Care  
 AIDS Community Research Initiative of  
 America  
 AIDS Foundation of Chicago  
 The AIDS Institute  
 AIDS Legal Council of Chicago  
 AIDS Project Los Angeles  
 AIDS Project New Haven  
 AIDS Resource Center Ohio  
 AIDS Resource Center of Wisconsin  
 AIDS United  
 AIDS/HIV Services Group (ASG)  
 American Academy of HIV Medicine  
 American Psychological Association  
 American Sexual Health Association  
 APICHA Community Health Center  
 APLA Health & Wellness  
 Asian & Pacific Islander American Health  
 Forum  
 Association of Nurses in AIDS Care  
 AVAC  
 The Balm In Gilead, Inc.  
 Baltimore Student Harm Reduction  
 Coalition  
 BOOM! HEALTH  
 CAEAR Coalition  
 Callen-Lorde Community Health Center  
 CANN - Community Access National  
 Network  
 Canticle Ministries, Inc.  
 Caring Ambassadors Program  
 Cascade AIDS Project  
 Center for HIV Law and Policy  
 Cincinnati Exchange Project  
 Clare Housing  
 Community AIDS Network, Inc.  
 Community Education Group  
 Cure For AIDS Coalition  
 Dab the AIDS Bear Project  
 Family Centers Inc.  
 G III Associates  
 Georgia AIDS Coalition  
 Georgia Equality  
 The Global Justice Institute  
 Harlem United  
 Harm Reduction Coalition  
 HealthHIV  
 Heartland Cares  
 Hepatitis Foundation International  
 HIV Dental Alliance  
 HIV Medicine Association  
 HIV Prevention Justice Alliance  
 HIVRN Associates  
 Housing Works  
 Human Rights Campaign  
 Hyacinth AIDS Foundation  
 International Association of Providers of  
 AIDS Care  
 Latinos Salud  
 LifeLinc of Maryland  
 Lifelong AIDS Alliance  
 Life We Live Youth Advocates Of Colors  
 Los Angeles LGBT Center  
 Mendocino County AIDS/Viral Hepatitis  
 Network  
 Metropolitan Community Churches  
 Metropolitan Latino AIDS Coalition  
 (MLAC)  
 Minnesota AIDS Project  
 Moveable Feast  
 Nashville CARES  
 National AIDS Housing Coalition  
 National Alliance of State and Territorial  
 AIDS Directors (NASTAD)  
 National Association of County and City  
 Health Officials  
 National Association of Social Workers  
 National Black Gay Men's Advocacy  
 Coalition (NBGMAC)  
 National Black Justice Coalition  
 National Black Leadership Commission On  
 AIDS, Inc.

National Coalition of STD Directors  
National Gay and Lesbian Task Force  
Action Fund  
National Latina Institute for Reproductive  
Health  
National Latino AIDS Action Network  
(NLAAN)  
NMAC  
North Carolina AIDS Action Network  
North Central Texas HIV Planning Council  
(Fort Worth)  
One Heartland  
Park House  
Pediatric AIDS Chicago Prevention  
Initiative  
Positive Women's Network - USA  
Prevention On The Move/ Stewart  
Marchman Act Behavioral Healthcare  
Project Inform  
Racial and Ethnic Health Disparities  
Coalition

Rural AIDS Action Network  
Ryan White Medical Providers Coalition  
San Francisco AIDS Foundation  
Seattle TGA HIV Planning Council  
Sexuality Information and Education  
Council of the U.S. (SIECUS)  
Southern AIDS Coalition  
Southern HIV/AIDS Strategy Initiative  
START at Westminster  
TOUCH-Together Our Unity Can Heal, Inc.  
Treatment Action Group (TAG)  
Urban Coalition for HIV/AIDS Prevention  
Services (UCHAPS)  
VillageCare  
Washington Heights CORNER Project  
Women at Work International  
The Women's Collective  
Women With a Vision, Inc.

cc: Members, Senate and House Appropriations Committees