

FY2017 & FY2018 Appropriations for Federal HIV/AIDS Programs

March 13, 2017

(Increases/decreases from previous fiscal year are shown in parentheses.)

HHS PROGRAM		FY2016 Final ¹	FY2017 Senate Committee	FY2017 House Committee	Coalition Request ²
C D C	Total – HIV, Hep, STD, TB line	\$1.122 b (+\$4.0 m)	\$1.112 b ³ (-\$10.0 m)	\$1.122 b (+\$0.0 m)	4
	HIV Division of Prevention	\$755.6 m (+\$0.0 m)	\$755.6 m (+\$0.0 m)	\$755.6 m (+\$0.0 m)	\$822.7 m (+\$67.1 m)
	DASH – HIV School Health	\$33.1 m (+\$2.0 m)	\$33.1 m (+\$0.0 m)	\$33.1 m (+\$0.0 m)	\$50.0 m (+\$16.9 m)
	Viral Hepatitis	\$34.0 m (+\$2.7 m)	\$34.0 m (+\$0.0 m)	\$34.0 m (+\$0.0 m)	\$70 m (+\$36 m)
	STD Prevention	\$157.3 m (+\$0.0 m)	\$152.3 m (-\$5.0 m)	\$157.3 m (+\$0.0 m)	\$192.3 m (+\$35 m)
	Ryan White Program Total	\$2.323 b (+\$4.0 m)	\$2.294 b (-\$29.0 m)	\$2.323 b (+\$0.0 m)	\$2.465 b (+\$141.8 m)
	Part A	\$655.9 m (+\$0.0 m)	\$655.9 m (+\$0.0 m)	\$655.9 m (+\$0.0 m)	\$686.7 m (+\$30.8 m)
	Part B: Care	\$414.7 m (+\$0.0 m)	\$414.7 m (+\$0.0 m)	\$414.7 m (+\$0.0 m)	\$437.0 m (+\$22.3 m)
н	Part B: ADAP	\$900.3 m (+\$0.0 m)	\$900.3 m (+\$0.0 m)	\$900.3 m (+\$0.0 m)	\$943.3 m (+\$43.0 m)
R S	Part C	\$205.1 m (+\$4.0 m)	\$201.1 m (-\$4.0 m)	\$205.1 m (+\$0.0 m)	\$225.1 m (+\$20.0 m)
A	Part D	\$75.1 m (+\$0.0 m)	\$75.1 m (+\$0.0 m)	\$75.1 m (+\$0.0 m)	\$85.0 m (+\$9.9 m)
	Part F: AETCs	\$33.6 m (+\$0.0 m)	\$33.6 m (+\$0.0 m)	\$33.6 m (+\$0.0 m)	\$35.5 m (+\$1.9 m)
	Part F: Dental	\$13.1 m (+\$0.0 m)	\$13.1 m (+\$0.0 m)	\$13.1 m (+\$0.0 m)	\$18.0 m (+\$4.9 m)
	Part F: SPNS	\$25.0 m (+\$0.0 m)	\$0.0 m (-\$25.0 m)	\$25.0 m (+\$0.0 m)	\$34.0 m (+\$9.0 m)

¹ CR in effect through April 28, 2017 at current levels, reduced by 0.19 percent.

² Coalition requests are for both FY17 & FY18 and do not reflect the true need for each program and the people they serve.

³ The Senate has proposed to reduce TB funding at the Center by \$5 million.

⁴ ABAC is not providing a coalition request for the Center because TB is not included in this chart.



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HRSA	Community Health Centers ⁵	\$5.1 b (+\$100.0 m)	\$5.1 b (+\$0.0 m)	\$5.1 b (+\$0.0 m)	\$5.1 b (+\$0.0 m)
Office of Population Affairs	Title X	\$286.5 m (+\$0.0 m)	\$286.5 m (+\$0.0 m)	\$0.0 m (-\$286.5 m)	\$327.0 m (+\$40.5 m)
NIH	AIDS Research	\$3.00 b (+\$0.00 b)	TBD ⁶	TBD ⁶	\$3.225 b ⁷ (+\$0.225 b)
ACF	Competitive Abstinence Education	\$10.0 m (+\$5.0 m)	\$15.0 m (+\$5.0 m)	\$20.0 m (+\$10.0 m)	\$0.0 m (-\$10.0 m)
Office of Adolescent Health	Teen Pregnancy Prevention Program	\$101.0 m ⁸ (+\$0.0 m)	\$101.0 m ⁸ (+\$0.0 m)	\$0.0 m ⁸ (-\$101.0 m)	\$130.0 m ⁸ (+\$29.0 m)
SAMHSA	Total	\$3.73 b (+\$140.0 m)	\$3.73 b (+\$0.0 m)	\$4.21 b (+\$480.0 m)	\$4.32 b (+590.0 m)
M	HHS Secretary MAI Fund	\$53.9 m (+\$1.7 m)	\$48.0 m (-\$5.9 m)	\$53.9 m (+\$0.0 m)	\$105.0 m (+\$51.1 m)
A I	[Minority AIDS Initiative multiple programs]	\$427.1 m	TBD	TBD	\$610.0 m (+\$182.9 m)
HUD Program		FY2016 Final ¹	FY2017 Senate	FY2017 House Committee	Coalition Request ²
	HOPWA	\$335.0 m (+\$5.0 m)	\$335.0 m (+\$0.0 m)	\$335.0 m (+\$0.0 m)	\$385.0 m (+\$50.0 m)

The AIDS Budget and Appropriations Coalition (ABAC) is a working group of the Federal AIDS Policy Partnership, a coalition of 180 national and community-based HIV/AIDS and public health organizations that represent people living with HIV/AIDS, HIV medical providers and researchers, and advocates, as well as community organizations that provide critical HIV related health care and support services. ABAC advocates for the necessary resources for domestic HIV/AIDS programs across the federal government.

For more information, please contact ABAC Co-chairs Carl Schmid, The AIDS Institute, <u>cschmid@theaidsinstitute.org</u>, Carl Baloney Jr., AIDS United, <u>cbaloney@aidsunited.org</u>, or Emily McCloskey, NASTAD, <u>emccloskey@nastad.org</u>.

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⁵ Includes both mandatory and discretionary funding.

⁶Total NIH funding proposed by the Senate is \$34.1 b (\$2.0 b increase over FY16); House has proposed \$33.3 b (\$1.25 b increase over FY16). The FY2016 CR increased overall NIH funding by \$352 million.

⁷ Based on FY2017 Trans-NIH AIDS Bypass Budget.

⁸ This reflects the budget authority amounts and does not include the coalition's request for \$6.8 million in PHSA evaluation transfer authority for innovative program evaluation that was included in the Senate LHHS bill but not in the House HHS bill.