Ryan White Care Act: Where We Are and Where We Are Going

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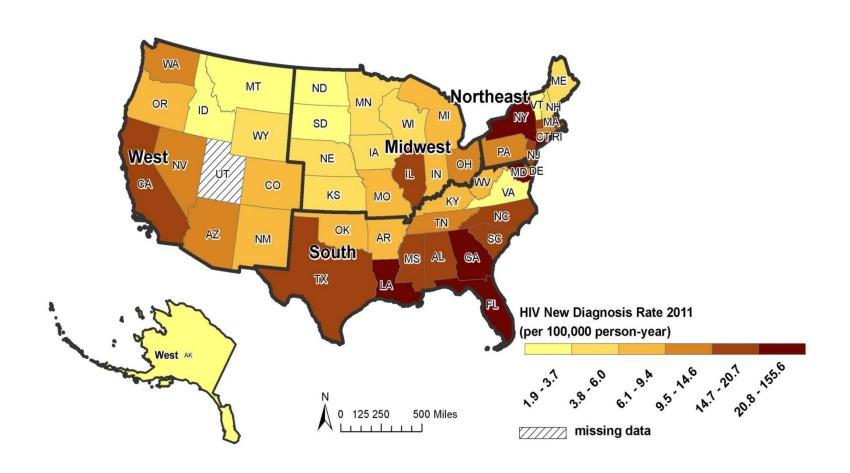
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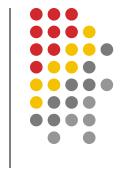


Southern HIV/AIDS Strategy Initiative ("SASI"): Focusing Federal Attention on the HIV Epidemic in the South

- Initiative Funded by Ford and Elton John AIDS Foundation;
- Uses Research-based advocacy to push for increased attention and resources targeting the Southern epidemic;
- Target 9 Deep South states that share common characteristics:
 - Overall poorer health
 - High poverty rates
 - Cultural climate that contributes to spread of HIV
- □ AL, FL, GA, LA, MS, SC, NC TN, TX.
- Steering Committee of PLWHA and advocacy allies from 9 states.
- Research Team from the Duke Center for Health Policy & Inequalities Research

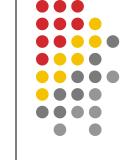
HIV Diagnosis Rates, 2011





Ryan White Overview

- **Part A**: Emergency help to eligible metropolitan areas most severely affected by the HIV/AIDS epidemic;
- **Part B**: Grants to all 50 states, DC, Puerto Rico, Guam, US Virgin Islands and 5 US Pacific Territories; Includes funding for the AIDS Drug Assistance Program (ADAP).
- **Part C**: Supports primary health care in outpatient settings for PLWHA;
- **Part D**: Provides family-centered outpatient or ambulatory care for women, infants, children and youth with HIV/AIDS



Overview (cont'd)

Part F: funds for variety of programs

- AETC (AIDS Education Training Centers): supports network of 11 regional centers and several National centers that conduct education & training for health care providers treating PLWHA
- Dental Programs: funding for oral health care for PLWHA
- Special Programs of National Significance (SPNS) to address emerging needs.

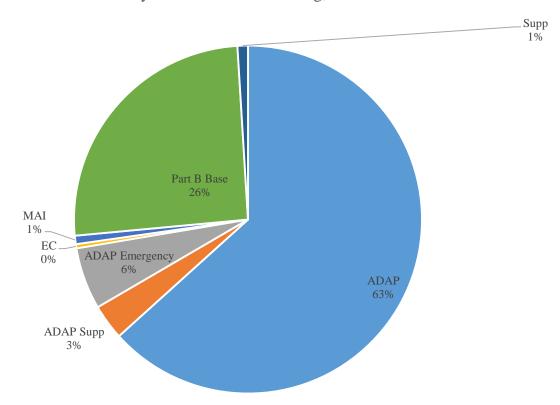
Ryan White Program by Part, **Funding & Grantees** *source: Kaiser Family Foundation

Part	FY 20	012	Number of Grantees
	(in mill	lions)	
	\$	%	
Part A	\$666.1	28%	24 EMAs; 28 TGAs
Part B	\$1,360.8	57%	59 States/Territories; 16 ECs
ADAP	\$933.3		59 States/Territories
Part C	\$215.1	9%	357 Grantees
Part D	\$77.2	3%	114 Grantees
Part F AETC	\$34.5	1%	5 National, 11 Regional Centers
Part F Dental	\$13.5	1%	56 Reimbursement;
			12 Community Partnership
Part F SPNS	\$25.0	1%	87 Grantees
TOTAL	\$2,392.2	100%	



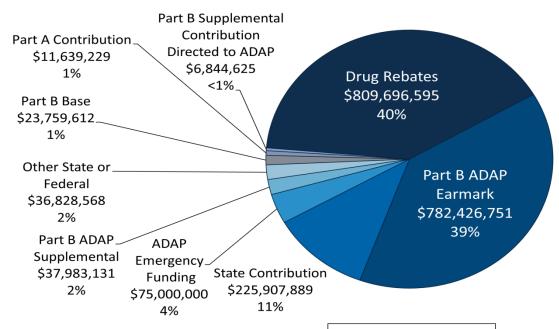
Ryan White Part B Funding

Ryan White Part B Funding, 2012





The National ADAP Budget, by Source, FY 2013



Total = \$2.01 billion

NOTE: The Federal Poverty Level (FPL) was \$11,490 for a household of one in 2013. SOURCE: NASTAD, National ADAP Monitoring Project Annual Report; February 2014.

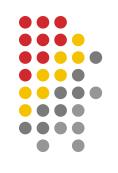






The Future of Ryan White

- Last reauthorized by Ryan White HIV/AIDS Treatment Extension Act of 2009
 - Expired September 30, 2013
 - Does not sunset; program continues to be funded
- Most HIV advocacy groups are advocating for continued funding of Ryan White without reauthorization at this time.
- Position is supported by the Administration and Supporters in Congress.



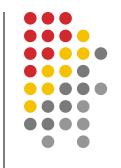


Why no re-authorization now?

- Need to see the <u>full impact</u> of health care reform and evaluate the integration of the Ryan White Program with the Affordable Care Act (ACA);
- Work to educate Congress on importance of Ryan White post-ACA implementation;
- Partisan Congress



Reaching Consensus on Ryan White Re-authorization



- Ryan White Work Group
 - Work group of the Federal AIDS Policy Partnership (FAPP)
 - Coalition of national, local and communitybased service providers and HIV/AIDS organizations;
 - Seeking to reach Consensus on what Ryan White Re-authorization will look like.

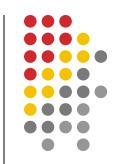
Potential Re-structuring—Part C/Part D



 President's budget proposed merging Part D' funding (care/services for women, infants, children & youth) into Part C (early intervention clinics)

Strong response from PWN, 30 for 30
 Campaign, HIV Medicine Association, Ryan
 White Medical Providers Coalition & others –
 consolidation not happening now

The Ryan White Patient Equity and Choice Act (H.R. 4260)



- Introduced by Renee Ellmers (R-NC) in 3/14;
- Why AIDS United and larger HIV community do not support H.R. 4260
 - H.R. 4260 focuses on core medical and transportation.
 - Does not contain provisions for other supportive services necessary to link and retain people in care.
 - Bill contains costly mandates and imposes barriers to the provision of care
 - See full statement of the AIDS United Public Policy Committee for details.

Important to Advocate for Continued Ryan White Funding



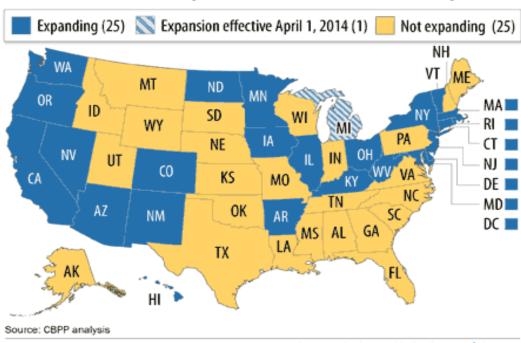
WHY?

- Many states are not expanding Medicaid;
- Insurance coverage gaps will continue to exist even in expansion States;
- Essential services for People with HIV are not covered by new insurance plans



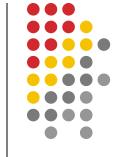
Most Southern States are not Expanding Medicaid

25 States Have Not Adopted Health Reform's Medicaid Expansion



Center on Budget and Policy Priorities | cbpp.org

Ryan White Going Forward



There is a continued need for Ryan White to Address

- 1. Gaps in Coverage in non-expansion states:
 - No Medicaid or subsidies on the insurance marketplace for those with incomes < 100% FPL (\$11,670)</p>
 - Gaps will exist even for those >100% FPL

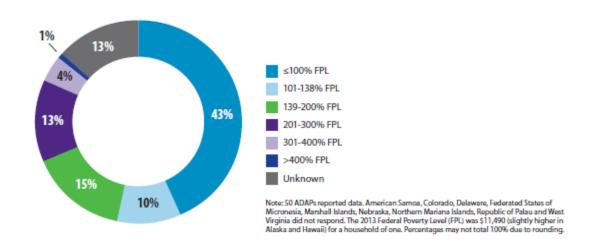
Need for a mechanism to provide care to PLWHA who are **uninsured** or **underinsured**.

- Traditional ADAP
- Part C Clinics
- ADAP wrap-around



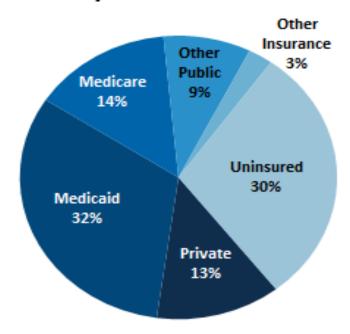
Importance of ADAP

ADAP Clients Served by Income Level, June 2013

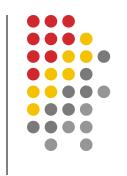




Most Ryan White Clients Are Insured, And Rely on the Program Because They Face Limits in Their Coverage



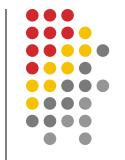




- Most state ADAPS either purchase or wraparound private health insurance for ADAP Clients.*
- More cost-effective than direct provision of meds.
- Gives ADAP clients full insurance coverage.

^{*}ADAPs are allowed by law to purchase insurance, including paying for premiums, copays and deductibles with existing coverage as long as Ryan White funds are used as the payer of last resort.

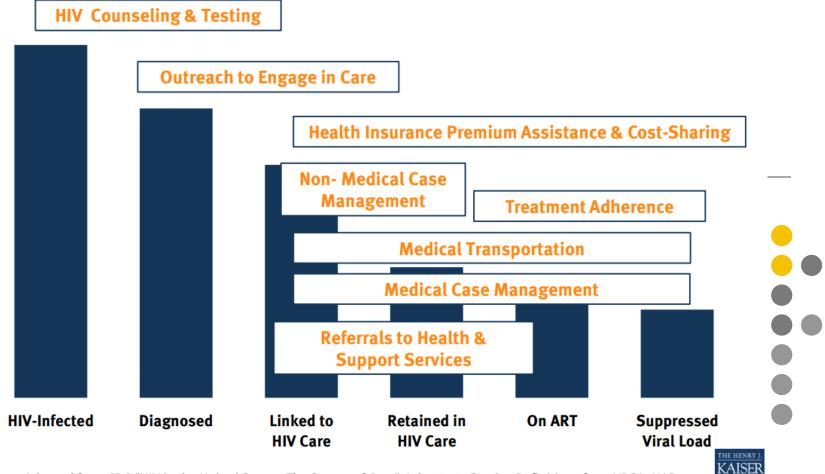
Ryan White Going Forward



There is a continued need for Ryan White to also address:

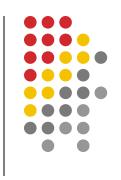
- Gaps in Essential Services
 - Supportive services essential to linkage to and retention in care
 - Transportation
 - Case Management
 - Part C Clinics
 - HIV Counseling & Testing
 - Dental for low-income PLWHA
 - Legal Services

Select Examples of Ryan White Services That Support Clients Along the HIV Treatment Cascade



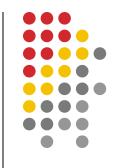
Sources: Adapted from CDC "HIV in the United States-The Stages of Care" July 2012; Service Definitions from HRSA, HAB, 2012 Annual Ryan White HIV/AIDS Program Services Report (Rsr) Instruction Manual.

Ryan White in 2014



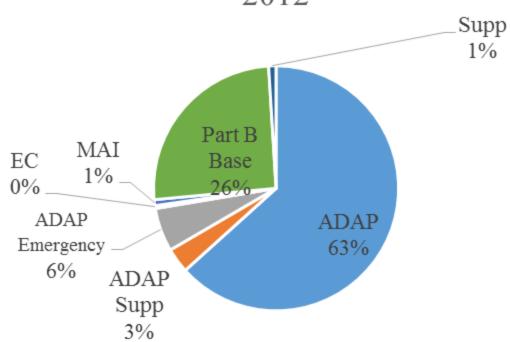
Hold harmless funding has ended;

 More money in Ryan White Part B Supplemental;

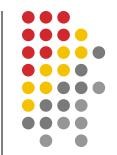


Ryan White Part B Funding (2012)





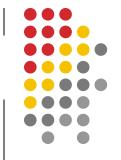
Focus on Ryan White Part B Supplemental



- SASI and other groups are advocating for <u>increased Ryan White</u>
 Part B Supplemental funds to <u>non-Medicaid Expansion States</u>.
- Part B is particularly important for states with fewer metropolitan areas that receive Part A.
- \$42,500,00 available in Part B Supplemental Funding in 2014.
- HRSA has wide discretion in allocation of Part B Supplemental fund.
- Grants based on "demonstrated need" among eligible states
- "Demonstrated need" = 10 factor test and includes:
 - Unmet need for HIV-related services
 - Factors that limit access to health care, including geographic variation, adequacy of health insurance coverage..."

Advocacy Opportunities





- Ryan White Stories Project
 - Contact <u>sasi@law.duke.edu</u> or <u>arosenbe@law.harvard.edu</u>
- Volunteer with State Advocacy Organizations.
- 3. Ryan White Work Group
 - Contact co-chair, William McColl wmccoll@aidsunited.org
- 4. Stay Informed
 - Sign up for SASI list serve
 - SASI website: <u>www.southernaidsstrategy.org</u>
 - SAC website: www.southernaidscoaltion.org
- Know who your members of Congress are (see http://votesmart.org/) & let them know why Ryan White matters to you