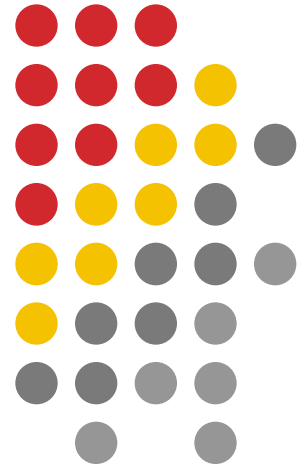


# Keeping the Ryan White Program Funded and Current: Focus on the Deep South

Carolyn McAllaster  
Clinical Professor of Law & Director  
Southern HIV/AIDS Strategy Initiative (SASI)  
HIV/AIDS Policy Clinic  
Duke University School of Law

September 11, 2015





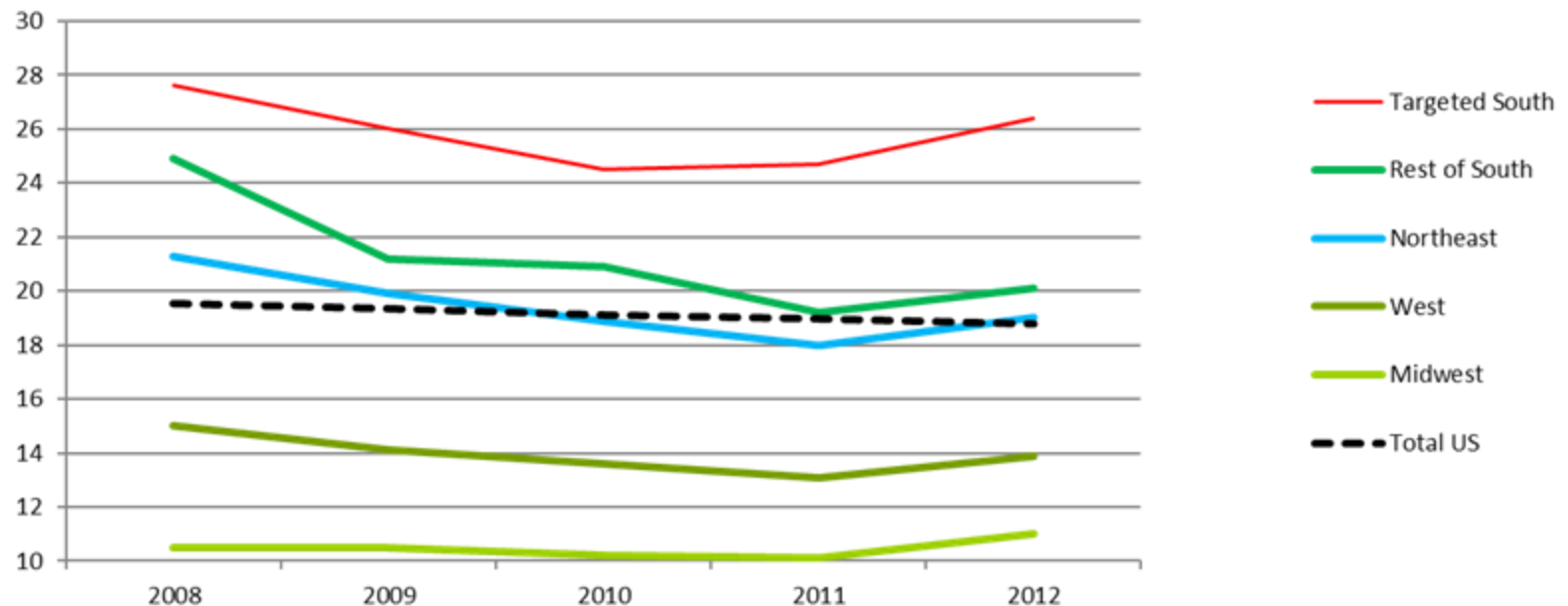
## Southern HIV/AIDS Strategy Initiative (SASI)

- 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 PLWH and advocacy allies from 9 states.
- **Research Team** from the Duke Center for Health Policy & Inequalities Research

# HIV Surveillance Data- 2008-2012

- The targeted states region had the **highest HIV diagnosis rate** of any US region in 2008-2012 (CDC Atlas database)

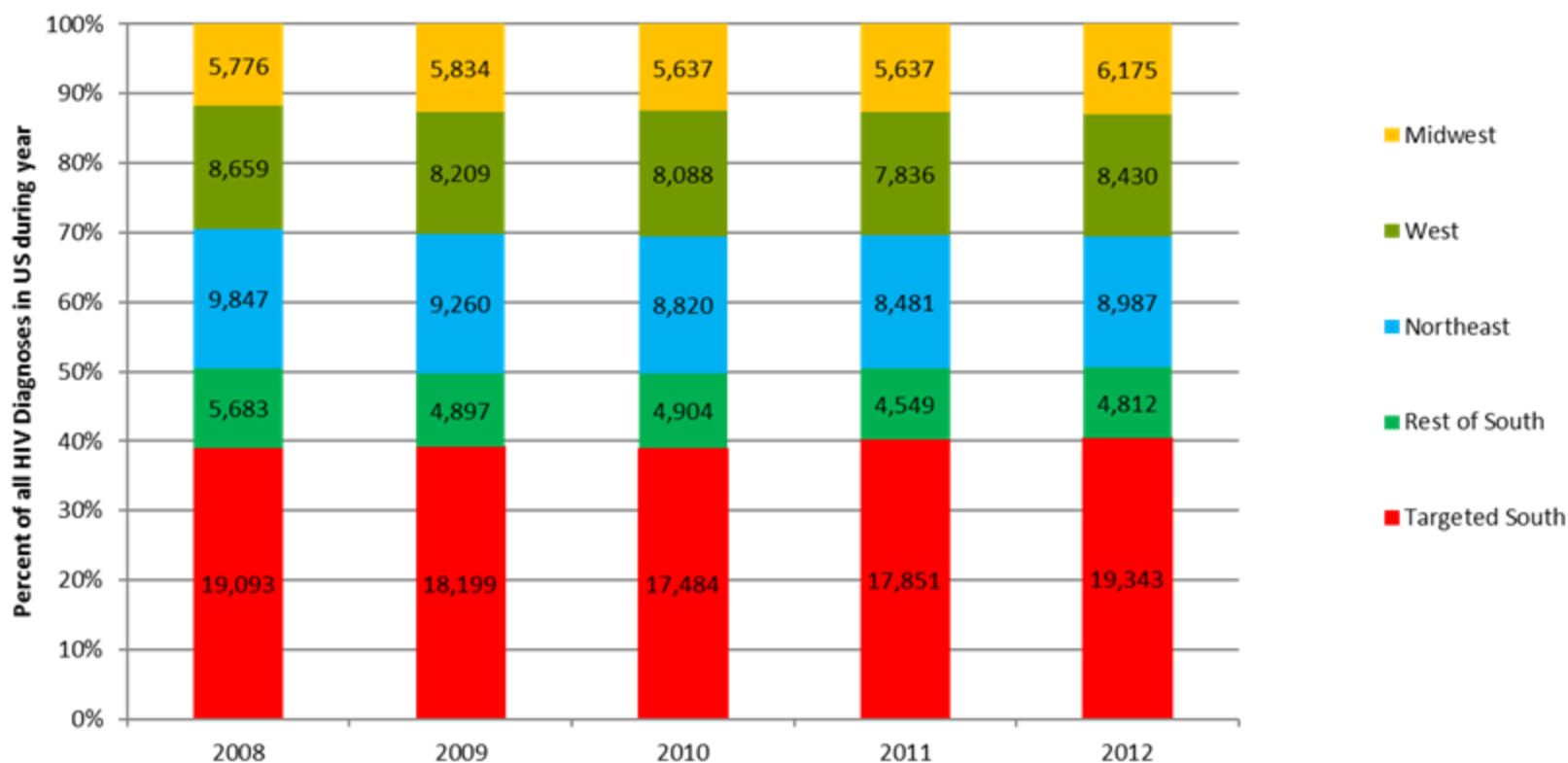
Regional HIV Diagnosis Rates





# Number of HIV diagnoses – 2008-2012

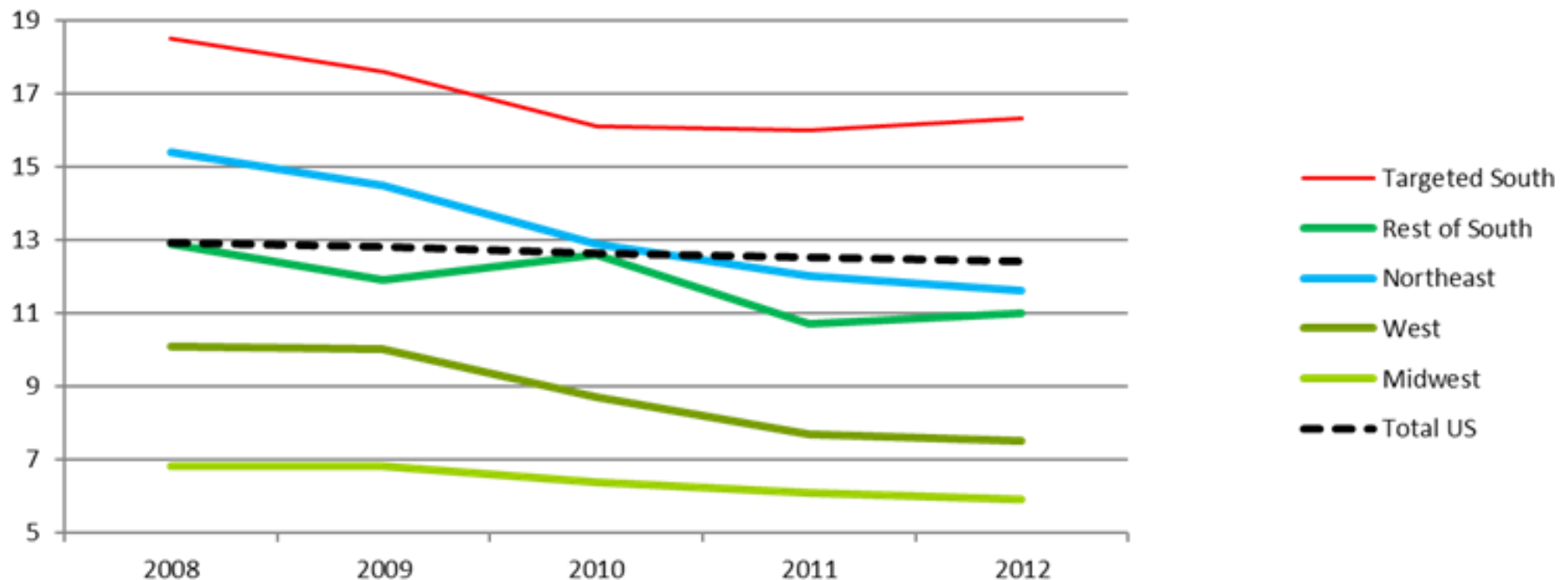
Number of HIV Diagnoses by Region and Year



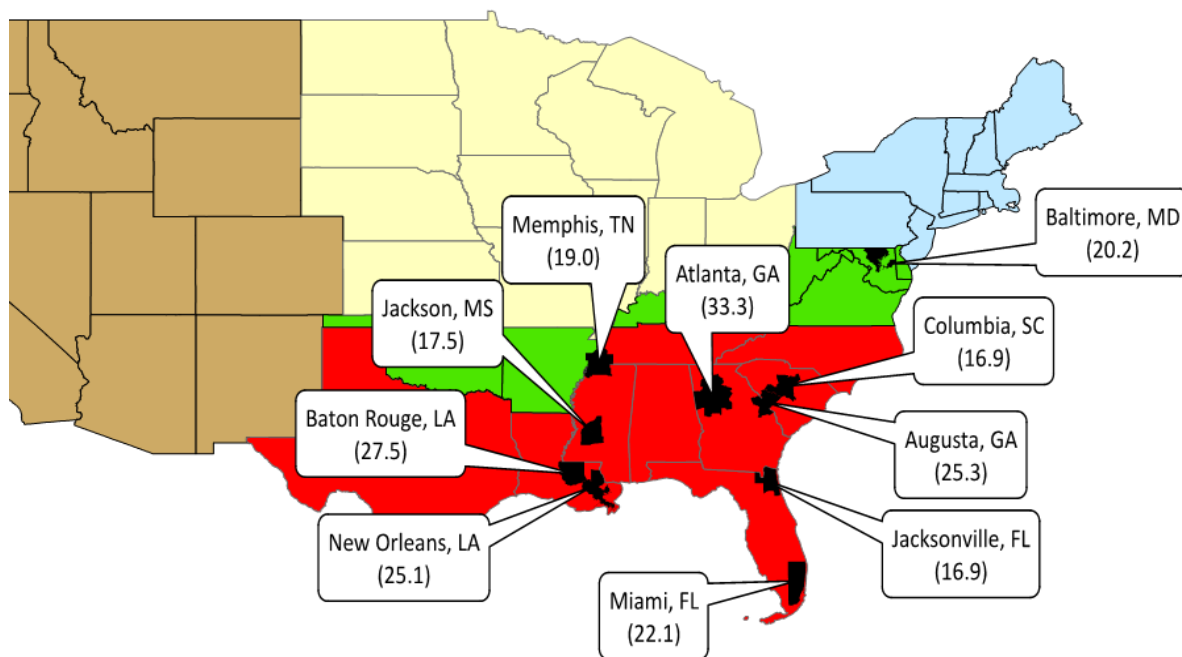
# AIDS Diagnosis Rates – 2008-2012

- The AIDS diagnosis rates and number of individuals diagnosed were higher in the targeted states than any other US region.

**Regional AIDS Diagnosis Rates**



# 10 MSAs with the highest AIDS Diagnosis Rates -- 2012





# CDC/SASI Collaboration

- **CDC/SASI Collaboration: “*HIV Diagnoses, Prevalence and Outcomes in Nine Southern States*,”** Journal of Community Health, 2014
- Targeted states had **higher** proportions of HIV diagnoses that were **female, black or African American, young** (age 13-24) and living in a **rural area** than US average.
- Targeted states had **higher HIV diagnosis rates** among individuals in **both** rural and urban areas.



# HIV Survival

- ✓ 5-year HIV survival for persons diagnosed 2003-2004 was **lower in the targeted states** (85%), indicating that 15% of those diagnosed with HIV in 2003-2004 had **died within 5 years.**
- ✓ In the target states, HIV survival was lower among **women, black/African Americans** and persons living in **rural areas.**
- ✓ **Louisiana** had the **lowest** 5-year survival percentage (81%) followed by **Mississippi** (83%) and **South Carolina** (84%)



# AIDS Survival

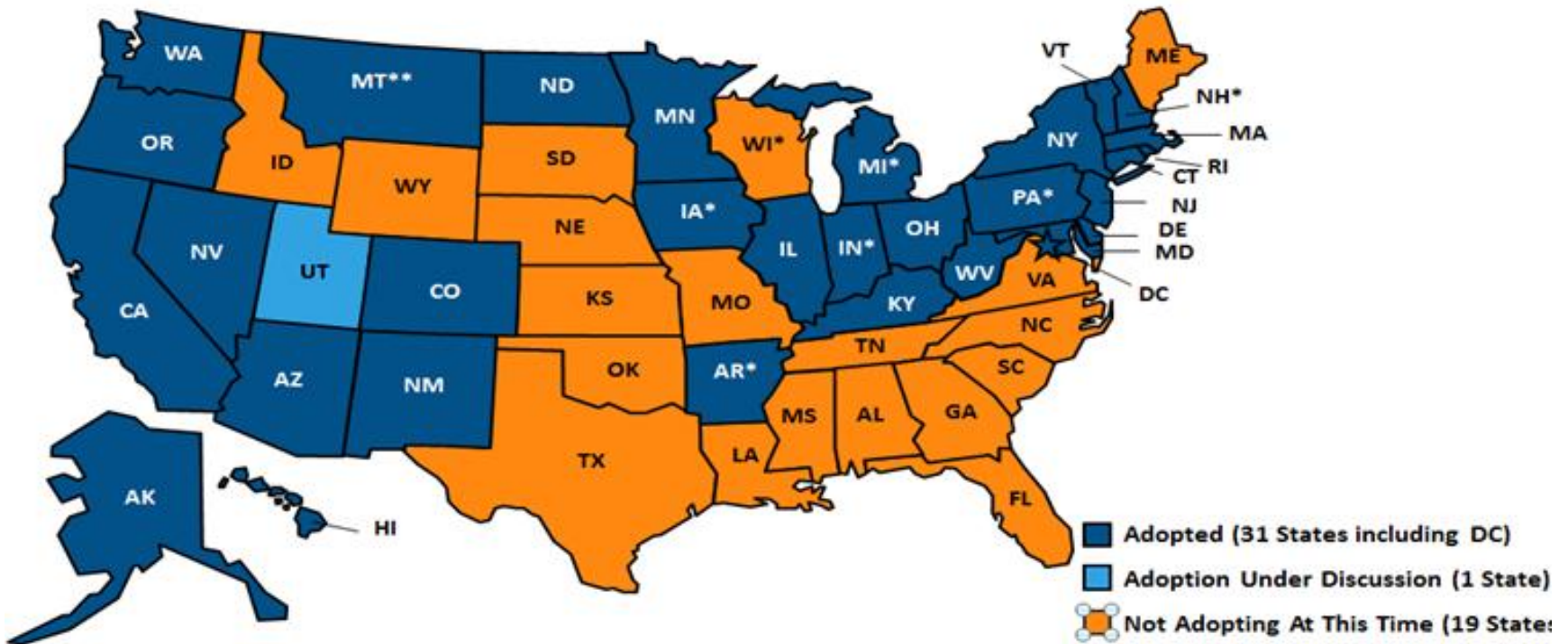
- ✓ For **5-year survival after an AIDS diagnosis**, the targeted states had the **lowest** survival percentage of any region (73%), indicating that **27% of those diagnosed with AIDS in 2003-2004** had died within 5 years.
- ✓ In the targeted states, AIDS survival was **lowest** among **women, black/African Americans**, and **those living in rural areas**.
- ✓ **29% of females** and **26% of males** diagnosed with AIDS in this region had **died within 5 years of diagnosis**.

# Ryan White Funding Provides a Crucial Safety Net for PLWH



- Many states are **not** expanding Medicaid;
- ADAP as a resource to fill many **insurance coverage gaps** that will continue to exist even in expansion States;
- Ryan White as a resource to provide **essential services** for HIV+ People that are not covered by new insurance plans

# Most Southern States are not Expanding Medicaid



NOTES: Current status for each state is based on KCMU tracking and analysis of state executive activity. \*\*MT has passed legislation adopting the expansion; it requires federal waiver approval. \*AR, IA, IN, MI, PA and NH have approved Section 1115 waivers. Coverage under the PA waiver went into effect 1/1/15, but it is transitioning coverage to a state plan amendment. WI covers adults up to 100% FPL in Medicaid, but did not adopt the ACA expansion.

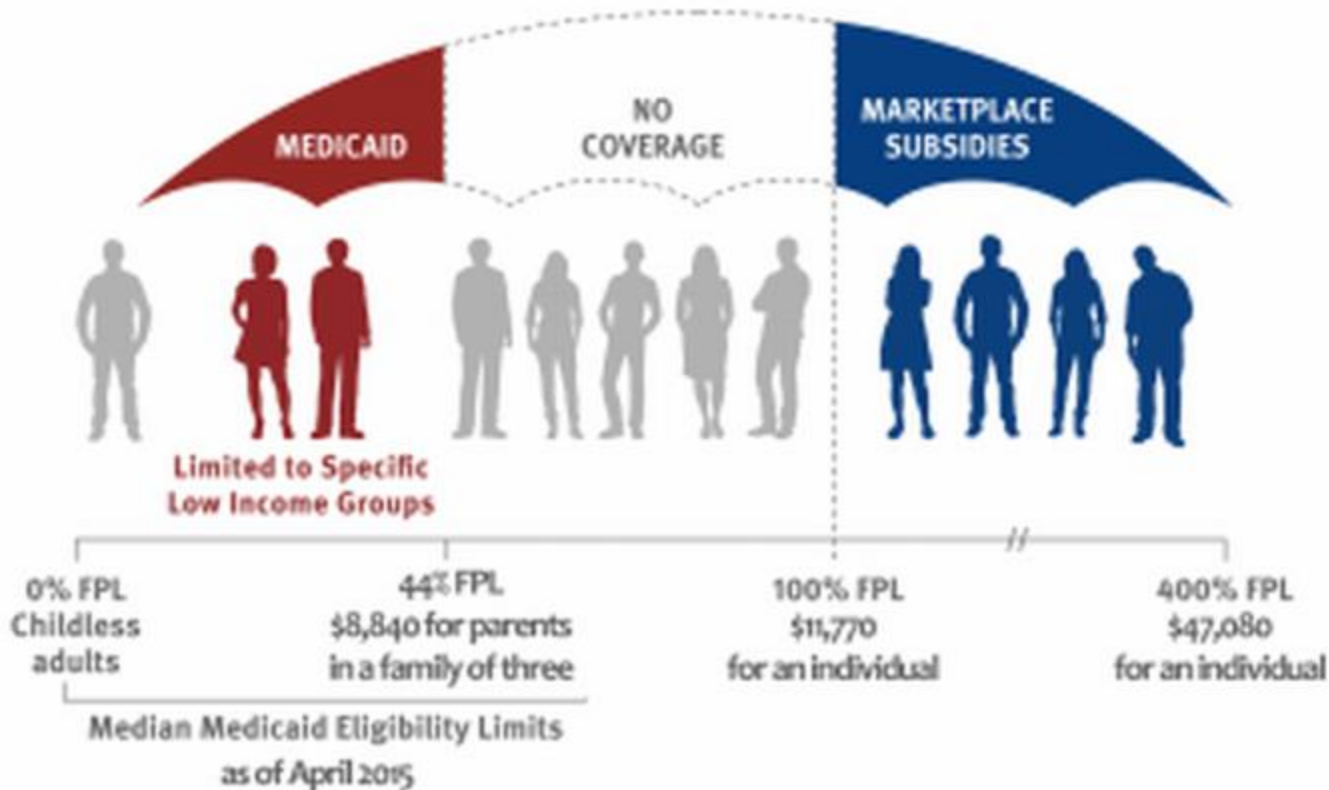
SOURCE: "Status of State Action on the Medicaid Expansion Decision," KFF State Health Facts, updated September 1, 2015.

<http://kff.org/health-reform/state-indicator/state-activity-around-expanding-medicaid-under-the-affordable-care-act/>



Figure 1

**In states that do not expand Medicaid under the ACA, there will be large gaps in coverage available for adults.**

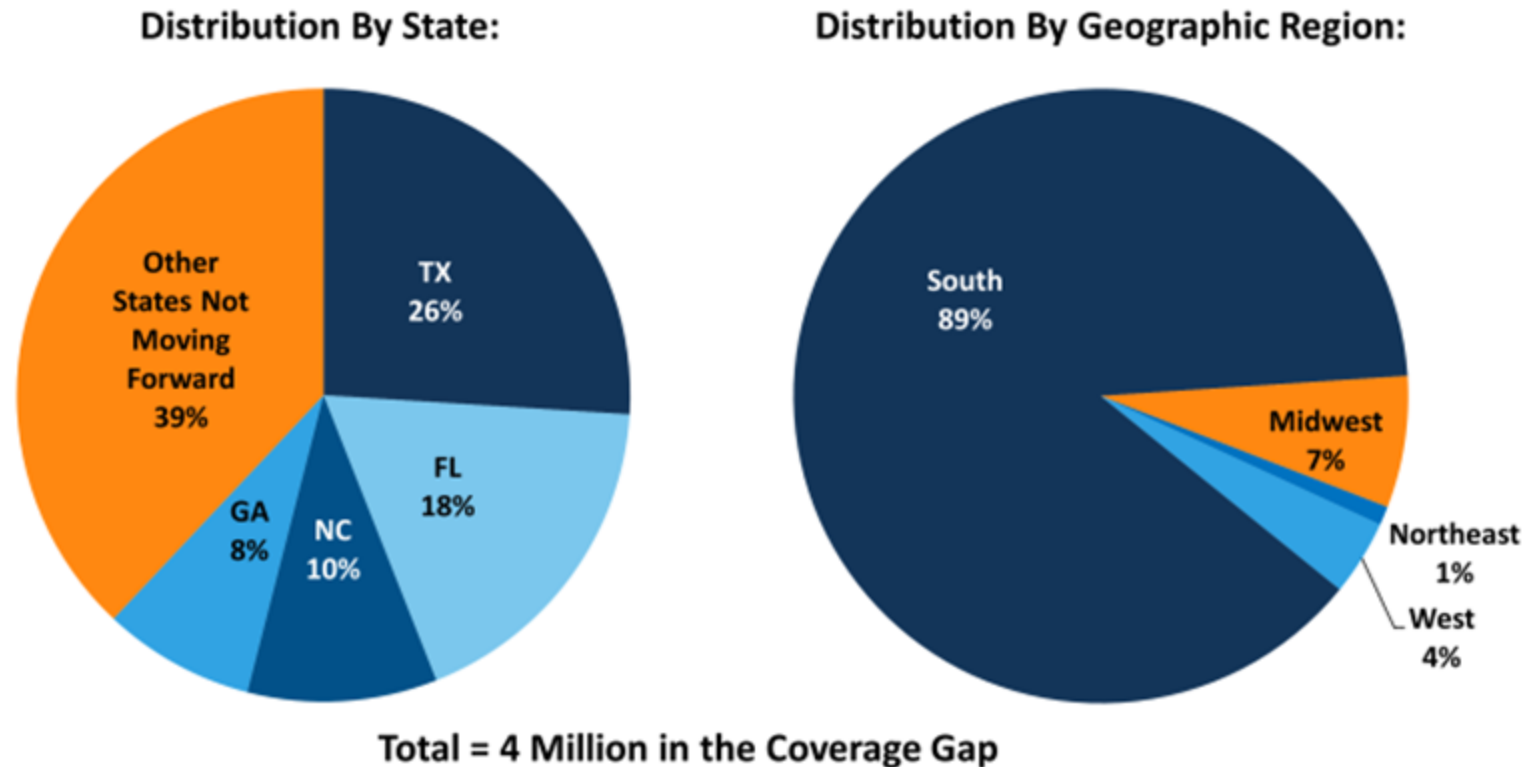


Source: Kaiser Family Foundation analysis based on 2014 Medicaid eligibility levels, updated to reflect state Medicaid expansion decisions as of March 2015, and 2014 Current Population Survey data.



Figure 2

## Distribution of Adults in the Coverage Gap, by State and Region

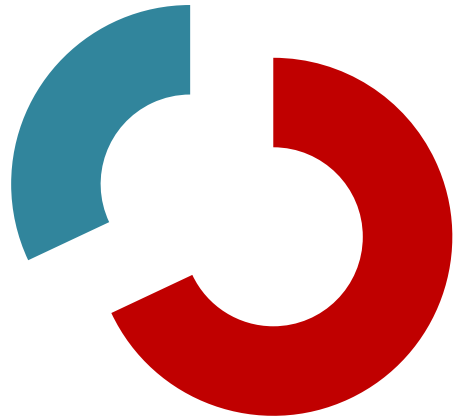


Notes: Excludes legal immigrants who have been in the country for five years or less and immigrants who are undocumented. The poverty level for a family of three in 2015 is \$20,090. Totals may not sum to 100% due to rounding.  
Source: Source: Kaiser Family Foundation analysis based on 2014 Medicaid eligibility levels, updated to reflect state Medicaid expansion decisions as of March 2015, and 2014 Current Population Survey data.

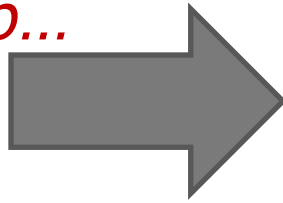
# Addressing the “Medicaid Gap” in Non-Expansion States



**69% of ADAP clients in non-Medicaid expansion states have an income below 138% FPL**



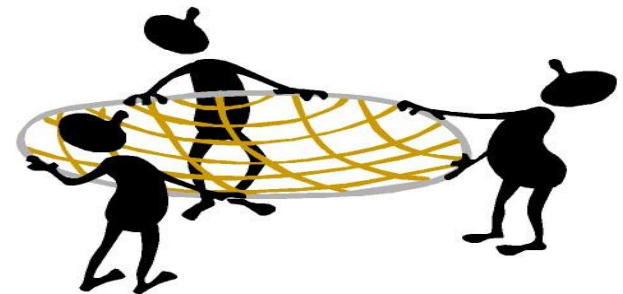
● *To help fill the gap...*



**Ryan White Programs are:**

Purchasing insurance for those in the “Medicaid Gap”

Providing safety net for those who cannot afford insurance or who are not otherwise eligible



# ADAP Funds are Used for Critical Insurance Completion

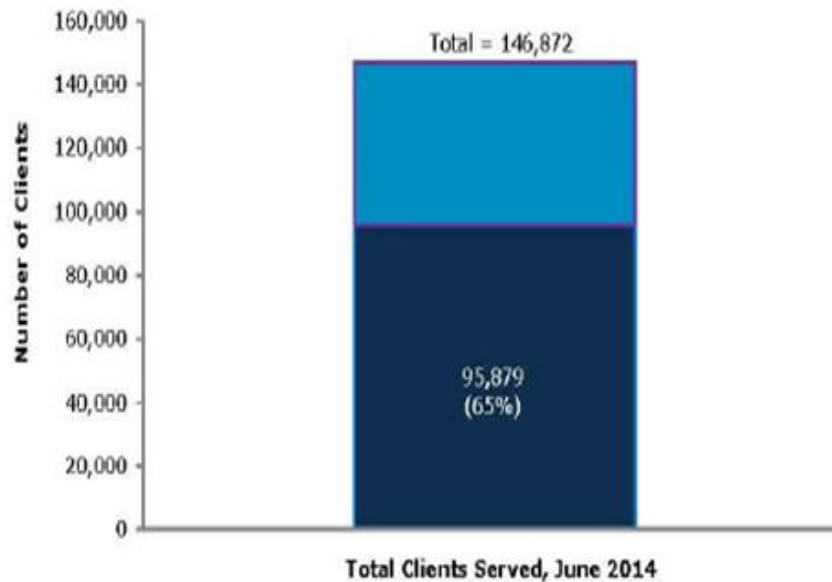


- ✓ ADAPs are increasingly used to pay **health insurance premiums, copayments** and/or **deductibles** for persons eligible for ADAP
  - ✓ 45 total ADAPs used funds for insurance purchasing/continuation in 2014
  - ✓ 28 (58%) ADAPs pay **premiums** for clients;
  - ✓ 28 (58%) pay **deductibles**
  - ✓ 32 (67%) pay **co-payments/co-insurance costs** for **prescriptions**
  - ✓ 9 (19%) pay **co-payments/co-insurance costs (medical only)**



# Total ADAP Clients Served & Top Ten States

Chart 12: ADAP Clients Served and Top Ten States, by Clients Served, June 2014

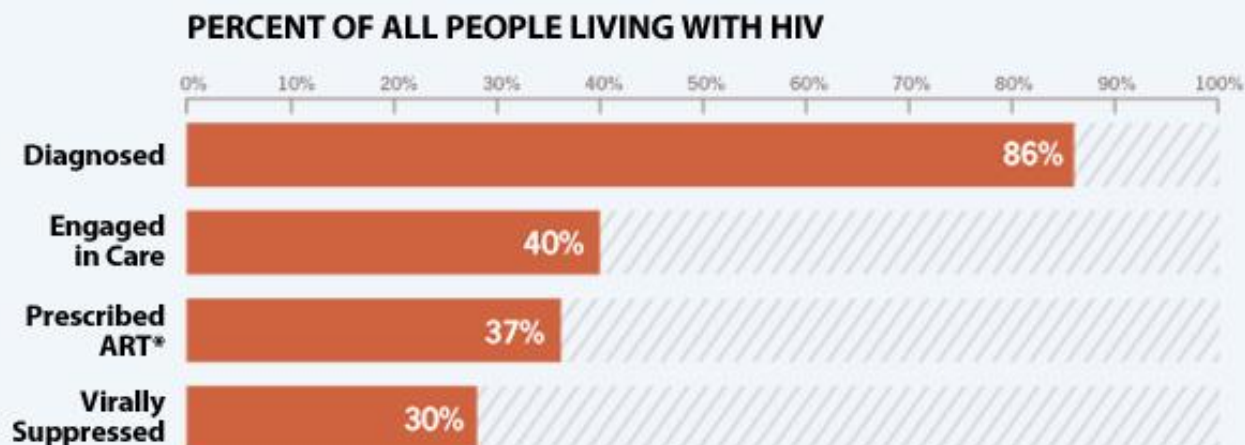


State	Clients Served, June 2014
California	20,392
New York	17,114
Florida	13,187
Texas	12,213
Puerto Rico	6,947
Georgia	5,902
Pennsylvania	5,085
North Carolina	5,033
Illinois	5,003
Tennessee	5,003
Total	95,879

Note: 48 ADAPs reported data. American Samoa, Federated States of Micronesia, Kentucky, Marshall Islands, Mississippi, Northern Mariana Islands, Republic of Palau, Rhode Island, Vermont and Virgin Islands (U.S.) did not respond.

# HIV Care Continuum

There is an urgent need to reach more people with testing and make sure people living with HIV receive prompt, ongoing care and treatment.



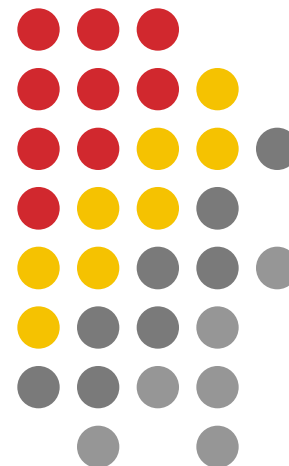
\*Antiretroviral therapy

SOURCE: CDC National HIV Surveillance System and Medical Monitoring Project, 2011.



**Vital**<sup>CDC</sup>signs<sup>TM</sup>

[www.cdc.gov/vitalsigns/HIV-AIDS-medical-care](http://www.cdc.gov/vitalsigns/HIV-AIDS-medical-care)



# Ryan White Covers Gaps in Essential Services



**linguistics**  
**psychosocial**  
**transportation**

**outreach** **case management**  
**legal** **food** **dental**  
**nutrition** **financial**  
**adherence** **counseling**  
**referrals**

# Advocacy Opportunities



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