



ADAP Advocacy Association

aaa+

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ADAP Advocacy Association Praises Obama's FY2011 Budget Amendment Calling for Additional \$30 Million for the AIDS Drug Assistance Program; Urges Immediate Remedy for FY2010 ADAP Crisis to Eliminate Expanding ADAP Waiting Lists Nationwide

ADAP Waiting Lists Putting Thousands of American Lives in Danger

For Immediate Release

WASHINGTON, D.C. (August 23, 2010) – The [ADAP Advocacy Association](http://www.adapadvocacyassociation.org), also known as **aaa+**, today praised President Barack Obama and the Office for National AIDS Policy (“ONAP”) for submitting to Congress a Fiscal Year 2011 (“FY2011”) Budget Amendment calling for an additional \$30 million for the AIDS Drug Assistance Programs (“ADAPs”). The proposed \$30 million increase follows the \$20 million increase already included in the Obama Administration’s proposed budget blueprint for next year to help the cash-strapped ADAPs. **Unfortunately, it does nothing to help the 2,937 Americans currently on ADAP waiting lists today!**

Congress is continuing its legislative work on approving the various spending bills to fund the federal government in FY2011 – which includes a proposal to increase ADAP funding by \$50 million. The President’s FY2011 Budget Amendment would bring his request into line with what the Congress is already considering.

“The President is inching closer to what the Congress has already done with respect to next year’s ADAP budget, and it is greatly appreciated,” summarized **Brandon M. Macsata**, CEO of the ADAP Advocacy Association. “But next year’s ADAP ‘need number’ will be considerably higher than the proposed \$50 million, thus risking the likelihood that the crisis facing the nation’s AIDS Drug Assistance Programs will only worsen.”

The ADAP federal need number for FY2011 is an increase of \$370 million for a total appropriation of \$1.205 billion. According to Macsata, with next year’s ADAP need number exceeding \$350 million it will take more than the proposed \$50 million increase. Additionally, the latest action by the Obama Administration does not address the escalating crisis in thirteen states facing nearly 3,000 Americans.

“The President and Congress are failing to grasp what is happening right now across the nation,” said Macsata of the ballooning number of Americans living with HIV/AIDS on ADAP waiting lists. “Our elected officials have convinced themselves that ‘everything is fine’ and ADAP patients are all accessing care through drug manufacturers’ compassionate assistance programs, despite there being little or no evidence to support such a claim. There are some very scary statistics behind this crisis, too.”

Currently, over eighty (80%) of the ADAP waiting list patients reside in the South, which is disproportionately impacting communities of color. According to the National ADAP Monitoring Project, fifty-nine (59%) of ADAP recipients are either African-American (31%), Hispanic (26%) or Multi-Racial (2%).

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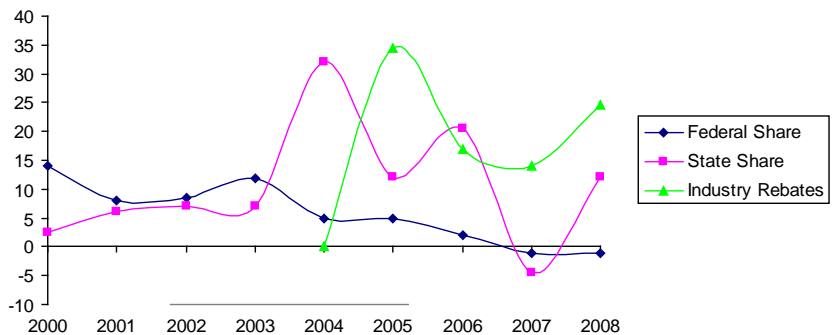
“As an African-American positive woman living in the South, I take this crisis very personal,” summarized **Michelle Anderson**, who is an **aaa+** board member and former ADAP recipient working with the Dallas Campaign to End AIDS. “Women of color represent one of the hardest hit and disproportionately impacted communities by this disease; furthermore, the South is being devastated by the ongoing ADAP crisis – with nearly eighty-five percent of the ADAP patients on wait lists residing here.”

With ADAP waiting lists now spanning across thirteen states, an increasing number of Americans living with HIV/AIDS are being forced to take a patchwork approach to accessing their healthcare. There are numerous factors fueling the ongoing crisis – including rising unemployment, greater testing initiatives leading to increased enrollment and state budget cuts – but none as detrimental as the perpetual under-funding by the federal government.

“What is the purpose of having a ‘safety-net’ program designed to help people when it cannot prevent them from falling through the cracks when they need it most,” argued **Anthony Jackson**, **aaa+** board member of New York City. “People living with HIV-infection on ADAP like me should not have to rely on drug manufacturers’ patient assistance programs to ensure continuity of care. The ongoing ADAP crisis and the failure of the President and Congress to resolve it represent nothing less than political and policy failure.”

The failure to adequately fund the ADAP program is not a partisan issue, since HIV/AIDS does not discriminate based on party affiliation. The crisis has now spanned across two consecutive administrations.

Between 2000 and 2008, states increased their share of the ADAP budget by 155% while the federal government increased its share by only 46% overall. **The chart shows** the increase by each party each year over the previous fiscal year in percentage points. States have basically increased – as well as pharmaceutical rebates – while the federal commitment has gone down!



Said **Dab Garner**, Founder of Dab the Bear AIDS Project in Florida: “That with all the aid we give to foreign countries for HIV/AIDS – not to mention natural disasters – it is unthinkable to me as a long-term survivor we have waiting lists for American men and women to have access to life saving HIV medications. It dishonors the memory and sacrifice of all Americans who died from complications due to AIDS before life-saving medications were available. We urge President Obama and our elected officials to fund the Emergency ADAP Funding Bill for the full \$126 million to give hope back to financially challenged Americans with HIV and AIDS.”

To learn more about the ADAP waiting lists or the ADAP Advocacy Association, please contact Brandon M. Macsata by phone at (305) 519-4256 or email at info@adapadvocacyassociation.org.