

ADAP Advocacy Association aaa+ Attn: Brandon M. Macsata, CEO 1501 M Street, NW – 7th Floor Washington, DC 20005

info@adapadvocacyassociation.org www.adapadvocacyassociation.org

ADAP Advocacy Association Praises Obama's FY2011 Budget for including \$20 Million Increase for the AIDS Drug Assistance Programs; Urges Support for FY2010 Emergency Supplemental to Alleviate Growing ADAP Waiting Lists Nationwide

ADAP Waiting Lists Top 500, Increased 1000% in 2009

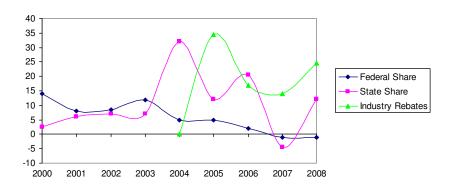
For Immediate Release

WASHINGTON, D.C. (February 2, 2010) – The <u>ADAP Advocacy Association</u>, also known as <u>aaa+</u>, today thanked President Barack Obama for his leadership on HIV/AIDS issues, including his FY2011 Budget calling for an additional \$20 million for the AIDS Drug Assistance Programs (ADAPs). The small proposed increase will help the cash-strapped ADAPs, which have been perpetually under-funded by the federal government – but more needs to be done now to alleviate growing ADAP waiting lists nationwide.

ADAPs provide life-saving medications under the Ryan White CARE Act to people living with HIV/AIDS nationwide who are uninsured or under-insured. This vital federal-state program faced a \$108.9 million shortfall for Fiscal Year 2009, just to keep pace with current demand. That shortfall led to waiting lists nationwide topping 500 – including Arkansas (9 people), Iowa (27 people), Kentucky (128 people), Montana (18 people), Nebraska (30 people), South Dakota (14 people), Tennessee (142 people), Utah (37 people) and Wyoming (13 people).

"Considering the President Obama's proposed spending freeze on domestic discretionary spending, his proposed \$20 million increase demonstrates the importance of the AIDS Drug Assistance Programs and the President's commitment to providing life-saving medications to those who need it," summarized **Brandon M.**Macsata, CEO of the ADAP Advocacy Association. "But as the President has so clearly articulated repeatedly, people are hurting right now – and that's why were calling on his Administration to support an emergency supplemental for the FY2010 to help remove ADAP patients off wait lists in nine states."

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!



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According to Macsata, President Obama's \$20 million increase basically mirrors previous ADAP funding increases proposed under his predecessor.

"While the proposed \$20 million increase included in the President's FY2011 Budget is an important first step, it does not abdicate the responsibility of the U.S. Congress to recognize the current state of the ADAPs and acting immediately to appropriate emergency funding," said **William Arnold**, aca+ board president and Executive Director of the Community Access National Network. "We've witnessed a 1,000% increase in ADAP waiting lists last year and its profound impact on people's lives cannot be under-estimated; regardless of the state budget woes, it is incumbent upon the federal government to live up to its fiduciary responsibility to the low-income Americans who rely on this important program."

The ADAP federal need number for FY2011 is an increase of \$370 million for a total appropriation of \$1.205 billion. Coupled with estimated state funding, this funding will provide continued services to a total of 169,123 clients in FY2010, including the ability to enroll 31,008 new clients. This includes individuals who are fully covered by ADAP and those who receive assistance with Medicare Part D cost sharing requirements, or private insurance continuation.¹

A large gap remains for ADAPs in FY2010. Included in the FY2011 need number is a revised estimate for the ADAP federal need number for FY2010 of \$961 million, an increase of \$126 million over the current funding level. The FY2010 need number was revised based upon new survey data. Coupled with estimated state funding, this funding will provide continued services to a total of 153,875 clients in FY2010, including the ability to enroll 15,760 new clients and eliminate waiting lists. This includes individuals who are fully covered by ADAP and those who receive assistance with Medicare Part D cost sharing requirements or private insurance continuation. The FY2010 need number has been adjusted from the previous level to account for the \$20 million already received through the FY2010 Congressional appropriations process.²

The problem of growing ADAP waiting lists is exacerbated because we are facing an American HIV/AIDS epidemic of devastating proportion. According to some estimates, the number of people living with HIV/AIDS in the United States will be approximately two million by the end of 2010. These numbers are not due to decrease in the near future. In 2006 alone, the Centers for Disease Control & Prevention (CDC) estimated that there have been more than 56,000 new HIV infections per year for the last decade. If this was not severe enough, the disease is far from color blind. Currently, the incidence rate of new HIV infection among African American men and women is seven times that of the Caucasian population. Furthermore, racial disparities are echoed regionally as the epidemic has seen its most recent unfettered growth in Southern states, which often times have smaller state budgets and fewer access points to comprehensive care.

ada+ also noted that an emergency supplemental received bipartisan support in FY2005, when during another recession ADAP waiting lists were exploding with more than 1,600 individuals in 11 states on ADAP waiting lists for HIV-related medication. To learn more about the FY2010 ADAP Emergency Supplemental, 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.

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¹ The ADAP Coalition, ADAP Need FY10 & FY11, January 2010.

² The ADAP Coalition, ADAP Need FY10 & FY11, January 2010.