

April 10, 2019

The Honorable Roy Blunt Chairman Subcommittee on Labor-HHS-Education Appropriations Committee United States Senate Washington, DC 20510

The Honorable Richard Shelby Chairman Senate Appropriations Committee Washington, DC 20510 The Honorable Patty Murray Ranking Member Subcommittee on Labor-HHS-Education Appropriations Committee United States Senate Washington, DC 20510

The Honorable Patrick Leahy Vice Chairman Senate Appropriations Committee Washington, DC 20510

Dear Chairmen Shelby and Blunt, Vice Chairman Leahy and Ranking Member Murray:

Thank you for your bipartisan work to address the HIV/AIDS epidemic in the United States. As you consider the Fiscal Year (FY) 2020 Labor, Health and Human Services, Education and Related Agencies (Labor HHS) appropriations bill, we urge you to uphold this commitment and provide strong funding for domestic HIV*I*AIDS programs.

HIV remains a non-curable infectious disease. Over one million Americans are living with HIV, with 37,600 new infections each year. Thankfully, advances in prevention and treatment have decreased new infection rates and improved the quality and length of life for those managing the disease. While great strides have been made in HIV research, as well as access to the support services needed to ensure impacted populations adhere to their care and treatment, more must be done to achieve the goal of finally ending this epidemic.

Funding to support HIV prevention, health care, and treatment is especially critical as our country faces the opioid crisis. Increases in injection drug use across the county are resulting in new HIV outbreaks, especially in areas with scarce public health resources. Health care providers, health departments, first responders, and AIDS services organizations routinely provide overdose prevention and substance use disorder services and treatment to individuals at risk for or living with HIV. However, we risk losing the great progress made by local efforts to address these coexisting public health threats if we fail to sustain these investments.

President Trump announced in his recent State of the Union address that his administration would seek to end the HIV epidemic by 2030, and the Administration's FY 2020 Budget included a request for \$291 million in increased funding for domestic HIV/AIDS prevention, care and treatment. We are encouraged by the Administration's increased funding request for the Ryan White HIV/AIDS Program, HIV prevention programs at the Centers for Disease Control and Prevention (CDC), and HRSA's Community Health Centers Program and urge the committee to build upon these proposed funding increases in their FY 2020 budget. Furthermore, we advise the committee to diverge with the Administration's budget request and provide adequate funding for AIDS research at the National Institutes of health (NIH) and

maintain the federal government's commitment to safety net programs that protect public health in FY 2020. Below are specific discretionary programs we ask you to support, along with accompanying justifications.

### **CDC HIV Prevention and Surveillance**

Efforts by CDC's National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention (NCHHSTP) and its grantees have been instrumental in averting hundreds of thousands of new infections and saving billions of dollars in treatment costs. Importantly, this shows that HIV prevention efforts are working. Through expanded HIV testing efforts, largely funded by the CDC, the number of people who are aware of their HIV status has increased from 81 percent in 2006 to 87 percent in 2014.

Yet, many communities are still experiencing increased rates of HIV infection. Enhanced funding for CDC's HIV prevention programs will support HIV testing, targeted prevention interventions, public education campaigns, and surveillance activities. Ending HIV will take a multifaceted approach. This funding supports a combination of effective evidence-based approaches including testing, linkage to care, and syringe service programs, and it also supports access to pre-exposure prophylaxis (PrEP), the FDA approved drug that keeps HIV negative people from becoming infected.

For FY 2020, we urge you to fund the CDC Divisions of HIV prevention and surveillance at \$1.02 billion.

## The Ryan White HIV/AIDS Program

The Ryan White HIV/AIDS Program, acting as the payer of last resort, provides medications, medical care, and essential coverage completion services to almost 550,000 low-income, uninsured, and/or underinsured individuals living with HIV. Those living with HIV who are in care and on treatment have a much higher chance of being virally suppressed, leading to reduced transmission of the virus – over 85 percent of Ryan White clients have achieved viral suppression compared to just 49 percent of all HIV-positive individuals nationwide. This is achieved through clients' access to the high-quality patient centered, comprehensive care that the Ryan White Program provides, which enables its clients to remain in care and adhere to treatment.

The Ryan White Program continues to serve populations that are disproportionately impacted by HIV, including racial and ethnic minorities, who make up three-quarters of Ryan White clients. Almost two-thirds of Ryan White clients are living at or below 100 percent of the Federal Poverty Level. To progress toward an AIDS-free generation, sustained funding for all parts of the Ryan White Program is needed. With a changing and uncertain health care landscape, the Ryan White Program is critically important to ensure that those at risk of or living with HIV have uninterrupted access to health care, medications, and services.

We urge you to fund the Ryan White HIV/AIDS Program at a total of \$2.535 billion in FY 2020:

• Part A: \$686.7 million

• Part B (Care): \$437 million

• Part B (ADAP): \$943.3 million

Part C: \$225.1 millionPart D: \$85 million

Part F/AETC: \$35.5 millionPart F/Dental: \$18 million

• Part F/SPNS: \$34 million

• Ending the HIV Epidemic: \$70 million

We also request that the Committee supports the \$50 million for the Ending the HIV Epidemic Initiative in Community Health Centers as new funding.

### **Minority AIDS Initiative**

Racial and ethnic minorities continue to be severely and disproportionately impacted by HIV/AIDS in the United States. Minorities represent the majority of new HIV diagnoses, people living with HIV/AIDS, and deaths among people with HIV/AIDS. African Americans account for 43 percent of new HIV diagnoses, and Latinos account for 26 percent. Indeed, the rate of new diagnoses among

African Americans is about eight times that of whites, and the rate among Latinos is about three times that of whites. Asian Americans account for an additional two percent of new diagnoses. The Minority AIDS Initiative is an indispensable tool in the effort to combat these unacceptable disparities. This critical initiative targets funds for HIV/AIDS prevention, screening, treatment, education, and outreach to minority communities heavily impacted by HIV/AIDS. The funds are provided to community-based organizations that serve minority communities to help them develop capacity and deliver culturally and linguistically appropriate care and services. Consequently, the initiative fills gaps where the needs are the greatest and strengthens efforts to fight the epidemic nationwide.

We therefore urge you to provide \$610 million for the Minority AIDS Initiative in FY 2020.

### HIV/AIDS Research at the National Institutes of Health

AIDS research supported by the NIH is far-reaching and has supported innovative basic science for better drug therapies, and behavioral and biomedical prevention interventions, saving and improving the lives of millions around the world. Specifically, AIDS research supported by the NIH has proved the efficacy of PrEP and the first partially effective AIDS vaccine. We are appreciative of the committee's work to increase funding for the NIH in recent years, and urge you to direct some of these resources to continued HIV/AIDS research so that more effective HIV treatments and ultimately a cure can be realized.

We request that HIV research at the NIH receive a total of \$3.45 billion in FY 2020.

Thank you for your continued leadership and support of domestic HIV/AIDS programs that serve the more than one million people living with HIV in our communities across the country.

Tammy Baldwin United States Senator

Sincerely,

Gillibrand

United States Senator

Edward J. Markey

United States Senator

Margaret Wood Hassan United States Senator

Sherrod Brown United States Senator

Joe Manchin III United States Senator

Richard Blumenthal United States Senator

United States Senator

nne Feinstein United States Senator

Chris Van Hollen United States Senator

Jeffrey A. Merkley United States Senator United States Senator



ımala D. Harris

Inited States Senator

Elizabeth Warren

United States Senator

Benjamin L. Cardin United States Senator

# Labor and Health and Human Services Group Letter Table LHHS\_Baldwin\_Group\_190415-035611[LetterID 1200]

ID	Request Project Location	Request Project Name
10158	[Title II]/[HHS]/[Centers for Disease Control and Prevention (CDC)]/[HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases and Tuberculosis Prevention]/[Domestic HIV/AIDS Prevention and Research]/[HIV Surveillance]	CDC HIV Prevention and Surveillance
10159	[Title II]/[HHS]/[Health Resources and Services Administration (HRSA)]/[HIV/AIDS (Ryan White)]	HIV/AIDS (Ryan White)
10168	[Title II]/[HHS]/[Office of the Secretary (OS)]/[General Departmental Management]/[Minority HIV/AIDS]	Minority HIV/AIDS
10176	[Title II]/[HHS]/[National Institutes of Health (NIH)]	HIV/AIDS Research at the National Institutes of Health (NIH)

Request ID: 10158			
Project Location:	[Title II]/[HHS]/[Centers for Disease Control and Prevention (CDC)]/[HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases and Tuberculosis Prevention]/[Domestic HIV/AIDS Prevention and Research]/[HIV Surveillance]	Project Name:	CDC HIV Prevention and Surveillance
Member/s:	Baldwin, Tammy(D-WI); Blumenthal, Richard(D-CT); Booker, Cory(D-NJ); Brown, Sherrod(D-OH); Cardin, Benjamin(D-MD); Coons, Christopher(D-DE); Duckworth, Tammy(D-IL); Feinstein, Dianne(D-CA); Gillibrand, Kirsten(D-NY); Harris, Kamala(D-CA); Hassan, Margaret Wood(D-NH); Jones, Doug(D-AL); Klobuchar, Amy(D-MN); Manchin, Joe(D-WV); Markey, Edward(D-MA); Menendez, Robert(D-NJ); Merkley, Jeff(D-OR); Murphy, Christopher(D-CT); Peters, Gary(D-MI); Sinema, Kyrsten(D-AZ); Stabenow, Debbie(D-MI); Van Hollen, Chris(D-MD); Warren, Elizabeth(D-MA); Wyden, Ron(D-OR)	Subcommittee:	LHHS
Request Type:	Group	Staff Contact:	Kathleen Laird Kathleen_Laird@baldwin.senate.gov 202-228-1815
Justification:	Many communities are still experiencing increased rates of HIV infection. Enhanced funding for CDC's HIV prevention programs will support HIV testing, targeted prevention interventions, public education campaigns, and surveillance activities. Ending HIV will take a multifaceted approach. This funding supports a combination of effective evidence-based approaches including testing, linkage to care, and syringe service programs, and it also supports access to pre-exposure prophylaxis (PrEP), the FDA approved drug that keep HIV negative people from becoming infected.		
Proposed Bill Language:		Proposed Report Language:	
Member's Request:	\$1,020,000	Member's Request (text):	
Enacted Level:	\$0	President's Request:	\$0
Intended Country:			

Request ID:	10159		
Project Location:	[Title II]/[HHS]/[Health Resources and Services Administration (HRSA)]/[HIV/AIDS (Ryan White)]	Project Name:	HIV/AIDS (Ryan White)
Member/s:	Baldwin, Tammy(D-WI); Blumenthal, Richard(D-CT); Booker, Cory(D-NJ); Brown, Sherrod(D-OH); Cardin, Benjamin(D-MD); Coons, Christopher(D-DE); Duckworth, Tammy(D-IL); Feinstein, Dianne(D-CA); Gillibrand, Kirsten(D-NY); Harris, Kamala(D-CA); Hassan, Margaret Wood(D-NH); Jones, Doug(D-AL); Klobuchar, Amy(D-MN); Manchin, Joe(D-WV); Markey, Edward(D-MA); Menendez, Robert(D-NJ); Merkley, Jeff(D-OR); Murphy, Christopher(D-CT); Peters, Gary(D-MI); Sinema, Kyrsten(D-AZ); Stabenow, Debbie(D-MI); Van Hollen, Chris(D-MD); Warren, Elizabeth(D-MA); Wyden, Ron(D-OR)	Subcommittee:	LHHS
Request Type:	Group	Staff Contact:	Kathleen Laird Kathleen_Laird@baldwin.s 202-228-1815
Justification:	The Ryan White Program continues to serve populations that are disproportionately impacted by HIV, including racial and ethnic minorities, who make up three-quarters of Ryan White clients. Almost two-thirds of Ryan White clients are living at or below 100 percent of the Federal Poverty Level. To progress toward an AIDS-free generation, sustained funding for all parts of the Ryan White Program is needed. With a changing and uncertain health care landscape, the Ryan White Program is critically important to ensure that those at risk of or living with HIV have uninterrupted access to health care, medication, and services.		
Proposed Bill Language:		Proposed Report Language:	
Member's Request:	\$2,535,000	Member's Request (text):	
Enacted Level:	\$0	President's Request:	\$0
Intended Country:			

Project Location:	[Title II]/[HHS]/[Office of the Secretary (OS)]/[General Departmental Management]/[Minority HIV/AIDS]	Project Name:	Minority HIV/AIDS
	Baldwin, Tammy(D-WI); Blumenthal, Richard(D-CT); Booker, Cory(D-NJ); Brown, Sherrod(D-OH); Cardin, Benjamin(D-MD); Coons, Christopher(D-DE); Duckworth, Tammy(D-IL); Feinstein, Dianne(D-CA); Gillibrand, Kirsten(D-NY); Harris, Kamala(D-CA); Hassan, Margaret Wood(D-NH); Jones, Doug(D-AL); Klobuchar, Amy(D-MN); Manchin, Joe(D-WV); Markey, Edward(D-MA); Menendez, Robert(D-NJ); Merkley, Jeff(D-OR); Murphy, Christopher(D-CT); Peters, Gary(D-MI); Sinema, Kyrsten(D-AZ); Stabenow, Debbie(D-MI); Van Hollen, Chris(D-MD); Warren, Elizabeth(D-MA); Wyden, Ron(D-OR)	Subcommittee:	LHHS
Request Type:	Group	Staff Contact:	Kathleen Laird Kathleen_Laird@baldwi 202-228-1815
	Racial and ethnic minorities continue to be severely and disproportionately impacted by HIV/AIDS in the United States. Minorities represent the majority of new HIV diagnoses, people living with HIV/AIDS, and deaths among people with HIV/AIDS. African Americans account for 43 percent of new HIV diagnoses, and Latinos account for 26 percent.		
Proposed Bill Language:		Proposed Report Language:	
Member's Request:	\$610,000	Member's Request (text):	
Enacted Level:	\$0	President's Request:	\$0
Intended Country:			

Request ID: 10176				
Project Location:	[Title II]/[HHS]/[National Institutes of Health (NIH)]	Project Name:	HIV/AIDS Research at the National Institutes of Health (NIH)	
Member/s:	Baldwin, Tammy(D-WI); Blumenthal, Richard(D-CT); Booker, Cory(D-NJ); Brown, Sherrod(D-OH); Cardin, Benjamin(D-MD); Coons, Christopher(D-DE); Duckworth, Tammy(D-IL); Feinstein, Dianne(D-CA); Gillibrand, Kirsten(D-NY); Harris, Kamala(D-CA); Hassan, Margaret Wood(D-NH); Jones, Doug(D-AL); Klobuchar, Amy(D-MN); Manchin, Joe(D-WV); Markey, Edward(D-MA); Menendez, Robert(D-NJ); Merkley, Jeff(D-OR); Murphy, Christopher(D-CT); Peters, Gary(D-MI); Sinema, Kyrsten(D-AZ); Stabenow, Debbie(D-MI); Van Hollen, Chris(D-MD); Warren, Elizabeth(D-MA); Wyden, Ron(D-OR)	Subcommittee:	LHHS	
Request Type:	Group	Staff Contact:	Kathleen Laird Kathleen_Laird@baldwin.senate.gov 202-228-1815	
Justification:	AIDS research supported by the NIH is far-reaching and has supported innovative basic science for better drug therapies, and behavioral and biomedical prevention interventions, saving and improving the lives of millions around the world.			
Proposed Bill Language:		Proposed Report Language:		
Member's Request:	\$3,450,000	Member's Request (text):		
Enacted Level:	\$0	President's Request:	\$0	
Intended Country:			-	