



THE AIDS INSTITUTE

National Office – Washington, DC: 202-835-8373

Administrative Office – Tampa, FL: 813-258-5929

For Immediate Release: 7.17.07

---

Media Contacts: Carl Schmid, (202) 669-8267 [CSchmid@theaidsinstitute.org](mailto:CSchmid@theaidsinstitute.org)

**THE AIDS INSTITUTE COMMENDS INTRODUCTION OF HOUSE  
MEDICARE PART D IMPROVEMENT BILL  
INCLUDES PROVISIONS THAT WILL ASSIST BENEFICIARIES WITH HIV/AIDS**

**Urges Congress to Include Medicare & Medicaid Improvements in SCHIP Reauthorization**

**Washington, DC** – The AIDS Institute commends Rep. Lloyd Doggett (D-TX), a member of the House Ways and Means Committee for introducing the “Medicare Prescription Drug Savings for Our Seniors (SOS) Act of 2007”, His bill, cosponsored by 42 of his colleagues, that would provide comprehensive improvements to the Medicare prescription drug program. While many elements of the bill would impact beneficiaries with HIV/AIDS, two in particular would directly improve the Medicare drug benefit for people living with HIV/AIDS. The AIDS Institute urges Congress to include both of these measures, along with the Early Treatment for HIV Act (ETHA), in the upcoming SCHIP reauthorization package.

The first Medicare Part D improvement included in the Doggett bill (HR 3025) of direct concern for people with HIV/AIDS is a provision that would allow expenditures by the AIDS Drug Assistance Programs (ADAP) to count towards True Out of Pocket (TrOOP) expenses. “Representative Doggett’s bill would correct an inequity in the implementation of the Medicare drug program that does not allow ADAP expenditures to count towards TrOOP,” commented Dr. Gene Copello, Executive Director of The AIDS Institute. “The current policy just makes no sense,” he continued.

ADAPs can pay deductibles, co-pays, premiums, and other out of pocket expenses that the beneficiary incurs, including expenditures in the so-called “donut hole”, but since they do not count as TrOOP, the “donut hole” is never filled. ADAPs, which are already facing severe funding shortages, have to continue to pay all these expenses and the catastrophic level is never reached at which time Medicare pays 95% of the costs. “Since ADAPs are similar to State Pharmacy Assistance Programs, and their expenses are counted as TrOOP,” added Copello, “ADAP expenditures should count as well.” Currently, states contribute about \$350 million annually to ADAP.

The second provision of direct consequence to people with HIV/AIDS in the Doggett bill is a provision that requires “all or substantially all” antiretrovirals, along with five other classes of drugs, on every Medicare Part D drug plan formulary. Currently, the Centers for Medicare and Medicaid Services (CMS) requires drug plans through annual guidance to cover “all or substantially all” drugs in the six protected classes. Unfortunately, this requirement is not always implemented and enforced, and CMS is under intense pressure each year not to continue the expanded coverage guidance.

–more–

“For people living with HIV/AIDS continued access to medications is a matter of life and death. Without medications, people will become ill and die,” said Carl Schmid, Director of Federal Affairs for The AIDS Institute.

“Representative Doggett’s bill will make sure Medicare Part D beneficiaries living with HIV/AIDS have access to the full array of all antiretrovirals that are necessary for them to remain healthy. We thank him and his colleagues for their leadership and concern for the well being of Medicare beneficiaries, particularly those representing vulnerable populations. We urge the Congress to incorporate this lifesaving, medically necessary reform, along with the ADAP TrOOP provision and other Medicare Part D improvements, in the soon to be considered SCHIP and Medicare improvement package.”

Current law requires drug plans to cover only at least two drugs in each class of medications. This is insufficient for beneficiaries living with HIV/AIDS since treatment usually requires a combination of several antiretrovirals and patients frequently build up drug resistance or develop side effects and need immediate access to other antiretrovirals.

The other classes of drugs that would be protected under the legislation are antidepressants, antipsychotics, immunosuppressants, anticonvulsants, and antineoplastics. The AIDS Institute has been working with a broad coalition that represents beneficiaries who utilize these medications in support of the Doggett bill. Another important element of the legislation is that it prohibits the use of utilization management tools (prior authorization, step therapy) for drugs in the six specified classes. A companion to Rep. Doggett’s bill is expected to be introduced soon in the Senate by Sen. Gordon Smith (R-OR).

“Additionally, we urge the House to include in its SCHIP package an important measure to correct another inequity in the healthcare system by providing an option to the states to cover in their Medicaid program low income people who have HIV, and have not yet developed full blown AIDS, said Copello. “Passage of the Early Treatment for HIV Act (ETHA) would bring the Medicaid system up to current healthcare treatment standards which call for early treatment of people with HIV,” continued Copello. A \$500 million demonstration project for ETHA was included in this year’s congressional budget resolution.

“We congratulate Representative Doggett and his colleagues for addressing these important health care improvements and for their desire to reauthorize the SCHIP program, which will provide healthcare to more low income children around the nation,” said Copello. “We look forward to its passage and the inclusion of these three measures and others that are important to people living with HIV/AIDS and other chronic conditions in the United States,” he concluded.

###

---

*For more information and to become involved in AIDS advocacy work, please contact  
The AIDS Institute at: (202) 835-8373, or by email at: [Info@theaidsinstitute.org](mailto:Info@theaidsinstitute.org) or [www.TheAIDSInstitute.org](http://www.TheAIDSInstitute.org)*

*The AIDS Institute is a national nonprofit and nonpartisan agency that promotes action for social change  
through public policy research, advocacy and education.*