THE AIDS INSTITUTE COMMENDS BIPARTISAN SUPPORT OF MEDICAID FOR PEOPLE WITH HIV

Early Treatment of HIV Act Will Save Lives and Should Be Included in Healthcare Reform

Washington, DC – The AIDS Institute commends Reps. Eliot Engel (D-NY) and Ileana Ros-Lehtinen (R-FL) for introducing the Early Treatment for HIV Act (ETHA) today along with 42 other members of congress equally divided from both sides of the aisle. ETHA would provide states the option of amending their Medicaid eligibility to extend coverage to uninsured, low-income persons with HIV, before they progress to full blown AIDS.

“It’s just unimaginable today that Medicaid doesn’t automatically cover poor people with HIV in our country,” commented Carl Schmid, Director of Federal Affairs for The AIDS Institute. “When current Medicaid rules were written, people with HIV quickly progressed to AIDS, but with the advent of antiretroviral drug treatment, people with HIV can remain healthy for years. It makes no sense to wait until people have full blown AIDS before they can access medical care and drug treatment through Medicaid. With earlier treatment they can remain healthy and productive members of society. Passage of ETHA would bring the Medicaid system up to current healthcare and treatment standards,” continued Schmid.

ETHA, which is modeled after the highly successful Breast and Cervical Cancer Prevention and Treatment Act, has been introduced in previous Congresses and has enjoyed similar bipartisan support. President Barack Obama repeatedly stated during the campaign that he supports “covering low-income HIV patients with Medicaid.”

Joining as an original co-sponsor of the bill is Speaker Nancy Pelosi (D-CA), who has been a long time champion of ETHA. Other co-sponsors include Energy and Commerce Chair Henry Waxman (D-CA), Health Subcommittee Chair Frank Pallone (D-NJ), Ways and Means Chair Charlie Rangel (D-NY), Health Subcommittee Chair Pete Stark (D-CA), Reps. Mary Bono Mack (R-CA) and Mark Kirk (R-IL). A total of 22 Democrats and 22 Republicans are original sponsors.

A companion bill in the Senate is expected to be introduced shortly under the leadership of Sens. Charles Schumer (D-NY), Olympia Snowe (R-ME), and Jeff Bingaman (D-NM). The Senate has previously passed an ETHA demonstration project.

“In this Congress, with the strong bipartisan support already demonstrated for this bill and expected support from President Obama, we hope ETHA will finally become a reality,” said Michael Ruppal, Interim Executive Director of The AIDS Institute. “As the Congress considers meaningful healthcare reform,” added Ruppal, “we hope ETHA will be included as part of any effort to expand access to healthcare.”

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According to the 2004 Institute of Medicine report, “Public Financing and Delivery of HIV/AIDS Care: Securing the Legacy of the Ryan White CARE Act”, 233,000 of the 463,070 people living with HIV in the U.S. who needed antiretroviral treatment did not have ongoing access to treatment. This does not include an additional 82,000 people who are infected but unaware of their HIV status and are in need of antiretroviral medications.

A study prepared by PricewaterhouseCoopers found that if ETHA was enacted, over 10 years:

- The death rate for persons living with HIV on Medicaid would be reduced by 50 percent;
- There would be 35,000 more individuals with CD4 levels above 500 under ETHA versus the existing Medicaid system; and
- Result in savings of $31.7 million.

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