Federal HIV/AIDS Funding

What’s Been Done, Where We Are, and What’s Next?

USCA 2019
Washington, DC
September 7th, 2019
Workshop Outline

• **Presentation**
  • The Current Budget Situation
  • Appropriations Update
  • Next Steps

• **Panel Discussion**
  • HIV Prevention
  • Ryan White HIV/AIDS Program
  • Minority AIDS Initiative
  • Viral Hepatitis Prevention
  • Housing
  • HIV/AIDS Research
  • Sex-Ed Programs
  • STD Prevention
The Current Budget Situation

Carl Schmid
Deputy Executive Director
The AIDS Institute
FY 2018 Federal Budget - $4.1 Trillion

- Mandatory Spending: $2.5 Trillion (61%)
- Discretionary Spending: $1.3 Trillion (31%)
- Net Interest: $325 Billion (8%)

Source: Congressional Budget Office
FY 2018 Discretionary Spending
$1.3 Trillion

Nondefense $639
- Education, Training, Employment, and Social Services: 93
- Transportation: 92
- Veterans’ Benefits and Services: 78
- Income Security: 69
- Health: 61
- Administration of Justice: 56
- International Affairs: 50
- Other: 139

Defense $623
- Operation and Maintenance: 255
- Military Personnel: 139
- Procurement: 113
- Research, Development, Test, and Evaluation: 77
- Other: 39
CBO Projects $12.2 trillion deficit by 2029

Source: Congressional Budget Office
Federal Debt Held By the Public

Source: Congressional Budget Office
Projected Government Spending

Percentage of Gross Domestic Product

Source: Congressional Budget Office

Note: Projections were made prior to the FY2020 and FY2021 budget agreements and do not take into account increased spending caps.
Federal debt accumulated by president

Trillions of dollars

<table>
<thead>
<tr>
<th>President</th>
<th>Debt</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinton</td>
<td>$1.49</td>
<td>US Treasury Department</td>
</tr>
<tr>
<td>W. Bush</td>
<td>$1.65</td>
<td>End of Trump's first term</td>
</tr>
<tr>
<td>Obama</td>
<td>$5.44</td>
<td>Last fiscal year</td>
</tr>
<tr>
<td>Trump</td>
<td>$8.78</td>
<td>Through Feb. 11 of second year</td>
</tr>
</tbody>
</table>

Source: US Treasury Department; end of Trump's first and second term from CBO projections.
Appropriations Update

Nick Armstrong
Policy Associate
The AIDS Institute
Appropriations 101

Key Terms

- **Discretionary Spending** – funding that is subject to the annual appropriations process
- **Mandatory Spending** – funds automatically spent based on law and not subject to Congressional approval (Medicare, Social Security, etc.)
- **Appropriations Bills** – laws passed by crafted and passed by Congress that legally obligate funding levels for discretionary programs
- **Labor-HHS (L-HHS) Bill** – one of 12 appropriations bills passed by Congress which funds the Depts. of Labor, HHS and Education
- **Mark-Up** – Committee meetings where Congress reviews details of a bill, offer and debate changes, and vote to advance a bill to the next legislative step
- **Fiscal Year** – yearly cycle of funding starting Oct. 1st and ending Sept. 30th
Appropriations 101
How the process (theoretically) works

President’s Budget
• Statement of policy
• No effect of law

Congressional Action
• 12 Appropriations Subcommittees
• Full Committee
• Chamber votes

Conference
• Negotiate differences
• Conference bill crafted
• Chamber votes

Final Bill(s) Signed

THE AIDS INSTITUTE
Trump’s Proposed FY19 Budget Cuts

- **Proposed cuts**
  - CDC HIV Prevention: -$40 m
  - CDC STD Prevention: -$5 m
  - NIH AIDS Research: -$89 m
  - HOPWA: -$45 m

- **Proposed Program Eliminations**
  - Ryan White AETCs: -$34 m
  - Ryan White SPNS: -$25 m
  - SAMHSA Minority AIDS Programs: -$116 m
  - Minority HIV/AIDS Fund: -$54 m
  - Teen Pregnancy Prevention Program: -$101 m
Congressional Response

- House and Senate level funded most domestic HIV programs

- **House**
  - Opioid Related Infectious Diseases: +$20 m
  - HOPWA: +$18 m
  - Proposed Program Eliminations
    - Teen Pregnancy Prevention Program: -$101 m
    - Title X Family Planning: -$286 m
    - “Sexual Risk Avoidance” Abstinence-Only: +$5 m

- **Senate**
  - Opioid Related Infectious Diseases: +$5 m
  - “Sexual Risk Avoidance” Abstinence-Only: +$10 m
Fiscal Year 2019

• Trump FY19 Budget – Feb. 2018
• Senate Passes L-HHS Bill – June 2018
• House Passes L-HHS Bill – July 2018
• President signs Minibus Appropriations Bill – Sept. 2018
• Two Continuing Resolutions passed
• Partial government shutdown
  – Dec. 22, 2018 to Jan. 25, 2019
  – *House switches from Republican to Democratic control*
• Final Appropriations passed Jan. 25, 2019
Final FY19 Appropriations

• Increases
  – CDC STD Prevention: +$5 m
  – Opioid Related Infectious Diseases: +$5 m
  – HOPWA: +$18 m
  – NIH Total: +$2 b

• No proposed cuts were included in the final bill

• Most domestic HIV/AIDS programs level funded
  – $10 m increase to “Sexual Risk Avoidance” Abstinence-Only Programs
FY 2019 Takeaways

• There was bipartisan cooperation for L-HHS programs

• L-HHS was passed with Defense, which prevented health programs from being impacted by the shutdown

• Congress did not have to address Budget Caps – allowing for efficiency in the appropriations process

• Proposed cuts to domestic programs were less severe than previous years

• Advocacy against proposed cuts was effective
FY2020 – A Unique Opportunity

With federal help, Alameda County and SF hope to cut rate of HIV infections
we do support the administration’s plan to reduce HIV transmission 90 percent in 10 years. So, we include the administration’s request for $120 million for programs through Health Resources and Services Administration to increase access to the ground-breaking HIV drugs and $140 million for CDC’s work in HIV outreach and disease we go even further. We provide an additional $46 million for the Ryan White program. We provide additional funds for the Minority AIDS initiative. And, we provide an additional $150 million for NIH’s HIV research to secure a vaccine or a cure.

President’s FY2020 Budget

<table>
<thead>
<tr>
<th>AGENCY</th>
<th>ACTIVITY</th>
<th>NEW $$</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDC</td>
<td>Test and link persons to treatment; state and local support; surveillance Augmentation of public health staff in local jurisdictions</td>
<td>$140 M</td>
</tr>
<tr>
<td>HRSA</td>
<td>Ryan White care centers for treatment</td>
<td>$70 M</td>
</tr>
<tr>
<td></td>
<td>Community health centers for prevention, emphasizing PrEP</td>
<td>$50 M</td>
</tr>
<tr>
<td>IHS</td>
<td>Enhanced support for prevention, diagnosis, and links to treatment</td>
<td>$25 M</td>
</tr>
<tr>
<td>NIH-CFARs</td>
<td>Inform HHS and partners on evidence-based practices and effectiveness</td>
<td>$6 M</td>
</tr>
<tr>
<td>OASH</td>
<td>Project coordination, communication, management, and accountability; Leadership of the Minority AIDS Initiative</td>
<td>Maintains current $</td>
</tr>
<tr>
<td>SAMHSA</td>
<td>Minority AIDS Program and Substance Abuse Prevention and Treatment Block Grants for HIV/AIDS prevention for those with Substance Abuse or Mental Illness</td>
<td>Maintains current $</td>
</tr>
</tbody>
</table>
# The Ryan White HIV/AIDS Program

<table>
<thead>
<tr>
<th></th>
<th>FY2019 Final</th>
<th>FY2020 President’s Request</th>
<th>FY2020 House</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Part A</strong></td>
<td>$655.9 m (+$0.0 m)</td>
<td>$655.9 m (+$0.0 m)</td>
<td>$677.5 m (+$21.6 m)</td>
</tr>
<tr>
<td><strong>Part B: Care</strong></td>
<td>$414.7 m (+$0.0 m)</td>
<td>$414.7 m (+$0.0 m)</td>
<td>$419.6 m (+$4.9 m)</td>
</tr>
<tr>
<td><strong>Part B: ADAP</strong></td>
<td>$900.3 m (+$0.0 m)</td>
<td>$900.3 m (+$0.0 m)</td>
<td>$912.0 m (+$11.7 m)</td>
</tr>
<tr>
<td><strong>Part C</strong></td>
<td>$201.1 m (+$0.0 m)</td>
<td>$201.1 m (+$0.0 m)</td>
<td>$207.6 m (+$6.5 m)</td>
</tr>
<tr>
<td><strong>Part D</strong></td>
<td>$75.1 m (+$0.0 m)</td>
<td>$75.1 m (+$0.0 m)</td>
<td>$76.0 m (+$0.9 m)</td>
</tr>
</tbody>
</table>
# The Ryan White HIV/AIDS Program

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<tr>
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</thead>
<tbody>
<tr>
<td><strong>Part F: AETCs</strong></td>
<td>$33.6 m (+$0.0 m)</td>
<td>$33.6 m (+$0.0 m)</td>
<td>$34.0 m (+$0.4 m)</td>
</tr>
<tr>
<td><strong>Part F: Dental</strong></td>
<td>$13.1 m (+$0.0 m)</td>
<td>$13.1 m (+$0.0 m)</td>
<td>$13.3 m (+$0.2 m)</td>
</tr>
<tr>
<td><strong>Part F: SPNS</strong></td>
<td>$25.0 m (+$0.0 m)</td>
<td>$25.0 m (+$0.0 m)</td>
<td>$25.0 m (+$0.0 m)</td>
</tr>
<tr>
<td><strong>Ending the Epidemic Plan</strong></td>
<td>N/A</td>
<td>+$70.0 m</td>
<td>+$70.0 m</td>
</tr>
</tbody>
</table>
# Centers for Disease Control

<table>
<thead>
<tr>
<th>Division of HIV/AIDS Prevention</th>
<th>FY2019 Final</th>
<th>FY2020 President’s Request</th>
<th>FY2020 House</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>$788.7 m (+$0.0 m)</td>
<td>$928.7 m (+$140.0 m)</td>
<td>$945.6 m (+$156.9 m)</td>
</tr>
<tr>
<td><strong>HIV Prevention</strong></td>
<td>$755.6 m (+$0.0 m)</td>
<td>$755.6 m (+$0.0 m)</td>
<td>$755.6 m (+$0.0 m)</td>
</tr>
<tr>
<td><strong>Ending the Epidemic Plan</strong></td>
<td><strong>N/A</strong></td>
<td>+$140 m</td>
<td>+$140 m</td>
</tr>
<tr>
<td><strong>School Health</strong></td>
<td>$33.1 m (+$0.0 m)</td>
<td>$33.1 m (+$0.0 m)</td>
<td>$50.0 m (+$16.9 m)</td>
</tr>
<tr>
<td><strong>Viral Hepatitis</strong></td>
<td>$39.0 m (+$0.0 m)</td>
<td>$39.0 m (+$0.0 m)</td>
<td>$50.0 m (+$11.0 m)</td>
</tr>
<tr>
<td><strong>STD Prevention</strong></td>
<td>$157.3 m (+$0.0 m)</td>
<td>$157.3 m (+$0.0 m)</td>
<td>$167.3 m (+$10.0 m)</td>
</tr>
<tr>
<td><strong>TB Elimination</strong></td>
<td>$142.2 m (+$0.0 m)</td>
<td>$135.2 m (-$7.0 m)</td>
<td>$152.3 m (+$10.1 m)</td>
</tr>
<tr>
<td><strong>Opioid Related Infectious Diseases</strong></td>
<td>$5.0 m</td>
<td>$58.0 m (+$53.0 m)</td>
<td>$35.0 m (+$30.0 m)</td>
</tr>
</tbody>
</table>
National Institutes of Health

<table>
<thead>
<tr>
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<th>FY2020 House</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>$39.1 b (+$2.0 b)</td>
<td>$33.0 b (-$6.1 b)</td>
<td>$41.1 b (+$2.0 b)</td>
</tr>
<tr>
<td><strong>AIDS Research</strong></td>
<td>$3.045 b (+$45.0 m)</td>
<td>$2.621 b (-$423.9 m)</td>
<td>$3.200 b (+$155.0 m)</td>
</tr>
</tbody>
</table>
## Minority AIDS Initiative Programs

<table>
<thead>
<tr>
<th></th>
<th>FY2019 Final</th>
<th>FY2020 President’s Request</th>
<th>FY2020 House</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minority HIV/AIDS Fund</td>
<td>$53.9 m (+$0.0 m)</td>
<td>$53.9 m (+$0.0 m)</td>
<td>$65.0 m (+$11.1 m)</td>
</tr>
<tr>
<td>SAMHSA</td>
<td>$116.0 m (+$0.0 m)</td>
<td>$116.0 m (+$0.0 m)</td>
<td>$121.0 m (+$5.0 m)</td>
</tr>
</tbody>
</table>
## Housing Opportunities for Persons with AIDS

<table>
<thead>
<tr>
<th></th>
<th>FY2019 Final</th>
<th>FY2020 President’s Request</th>
<th>FY2020 House</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOPWA</td>
<td>$393.0 m (+$18.0 m)</td>
<td>$330.0 m (-$63.0 m)</td>
<td>$410.0 m (+$17.0 m)</td>
</tr>
</tbody>
</table>

The table above shows the funding levels and changes for HOPWA (Housing Opportunities for Persons with AIDS) for FY2019, FY2020 President’s Request, and FY2020 House.
## Sex-Ed & Family Planning Programs

<table>
<thead>
<tr>
<th></th>
<th>FY2019 Final</th>
<th>FY2020 President’s Request</th>
<th>FY2020 House</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Title X</strong></td>
<td>$286.5 m (+$0.0 m)</td>
<td>$286.5 m (+$0.0 m)</td>
<td>$400.0 m (+$113.5 m)</td>
</tr>
<tr>
<td><strong>Teen Pregnancy Prevention Program</strong></td>
<td>$101.0 m (+$0.0 m)</td>
<td>$0.00 (-$101.0 m)</td>
<td>$110.0 m (+$9.0 m)</td>
</tr>
<tr>
<td><strong>“Sexual Risk Avoidance” Abstinence-Only Program</strong></td>
<td>$35.0 m (+$10.0 m)</td>
<td>$0.0 m (-$35.0 m)</td>
<td>$0.0 m (-$35.0 m)</td>
</tr>
</tbody>
</table>
## Total Domestic HIV Programs

<table>
<thead>
<tr>
<th></th>
<th>FY2019 Final</th>
<th>FY2020 President’s Request</th>
<th>FY2020 House</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$7.059 b</td>
<td>$6.903 b</td>
<td>$7.641 b</td>
</tr>
<tr>
<td></td>
<td></td>
<td>($156 m)</td>
<td>($582 m)</td>
</tr>
</tbody>
</table>
“The HIV epidemic still plagues our Nation, with more than 38,000 Americans infected every year. In response, my Budget provides $291 million to the Department of Health and Human Services to defeat the HIV/AIDS epidemic.”

-President Trump’s FY2020 Budget

“We do support the administration’s plan to reduce HIV transmission 90 percent in 10 years. So, we include the administration’s request for $120 million for programs through Health Resources and Services Administration to increase access to the ground-breaking HIV drugs and $140 million for CDC’s work in HIV outreach and disease monitoring. But, we go even further.”

-Rep. Rosa DeLauro, Chairwoman
House L-HHS Appropriations Subcommittee
House Report Language

• Completely removes prohibition against using funding for syringe service programs (SSPs)
  – Funding can be used to purchase syringes

• HIV Research at NIH must be increased proportional to overall NIH funding increases
House Report Language Cont.

• EtE Initiative Language
  – Directs HHS Secretary to submit multi-year plan to Congress
  – Report to Congress on Initiative progress, out year cost estimates
Bipartisan Budget Agreement

• Budget Control Act set caps on FY20 spending levels
  – Appropriations beyond the caps would result in across the board cuts, or sequestration
• Democrats did not want cuts to non-defense programs, Republicans did not want cuts to defense programs
• In order to fund both party’s priorities, agreement to raise caps was needed
• Initially, White House was not in favor of a budget agreement
• Negotiations led to new budget caps and raising of debt limit for 2 years

• Budget Agreement signed into law August 2nd
# Bipartisan Budget Agreement

<table>
<thead>
<tr>
<th></th>
<th>FY2019</th>
<th>FY2020</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Enacted</td>
<td>Budget Control Act</td>
</tr>
<tr>
<td>Defense Caps</td>
<td>716</td>
<td>576 (-140)</td>
</tr>
<tr>
<td>Non-Defense Caps</td>
<td>605</td>
<td>543 (-62)</td>
</tr>
</tbody>
</table>

*(In billions of dollars)*
Where are we now?

- **House of Representatives**
  - Appropriations Committee finished work on all appropriations bills
  - House passed most bills, including L-HHS and T-HUD

- **Senate**
  - Has yet to mark-up any appropriations bills
The Appropriations Process

What’s next?

• FY 2019 funding ends on Sept. 30th
  – Congress must pass funding bills or Continuing Resolution in order to avert government shutdown

• Senate still needs to release 302(b) allocations

• Senate options
  – Couple L-HHS with Defense to promote quick passage
  – Go directly to conference on L-HHS bill and not consider it in the Senate
  – Consider L-HHS as a standalone bill, but pass CR in order to allow time for conferencing
The Appropriations Process

*What’s next?*

- **Continuing Resolution**
  - November or December

- **Anomalies**
  - A CR level funds all programs for a set amount of time to allow for Congress to pass new appropriations bills
  - Anomalies allow for adjustments for certain programs that may need changes in funding within the CR window
  - *Administration sent the “Anomalies List” to Congress which included all funding for the Ending the HIV Epidemic Initiative*
Political Considerations

- House and Senate are controlled by two different parties with separate priorities
- House bill funds non-defense programs above new FY20 caps, requiring revisions to the bills
- President Trump continues to prioritize wall funding
  - Could jeopardize ability to have bills signed into law
- Senate will not pass bills with policy riders
- Government shutdown was extremely unpopular
- Short timeline and other policy priorities
What We are Doing as Advocates

• The AIDS Budget and Appropriations Coalition (ABAC)
  – Over 110 member organizations
  – Advocates for adequate resources for domestic HIV/AIDS programs across the federal government

• Partnership to End HIV, STDs and Hepatitis
  – The AIDS Institute, AIDS United, NMAC, NASTAD, NCSD
  – Brownstein Hyatt Farber Schreck

• Other Coalitions
What We are Doing as Advocates

• Sign-on letters to the Administration and Congress
• Worked with House and Senate offices to organize “Dear Colleague” Letters
• Organized meetings with House and Senate offices and HIV/AIDS community leaders
• Submitted testimony to Appropriations Committees
• Submitted questions to Appropriators to ask Administration Officials
• Worked with offices to propose successful amendments
• Social media campaigns
Panel and Discussion

Mike Weir  
*NASTAD*

Jenny Collier  
Ryan White Medical Providers Coalition

Ernest Hopkins  
SF AIDS Foundation

Sam Cyrulnik-Dercher  
SEICUS

Lauren Killelea  
National AIDS Housing Coalition

Frank Hood  
The AIDS Institute

Elizabeth Lovinger  
Treatment Action Group

Taryn Couture  
NCSD
What Can You Do?

• Engage with your Representatives
  – Tell them your story and the importance of these programs
  – Invite them to visit your organization
  – Thank Members who have been our champions
  – Emphasize the unique opportunity to end the epidemic

• Join the AIDS Budget and Appropriations Coalition
  – Up to date resources and news
  – Monthly calls
  – Information on Hill meetings
Resources

- AIDS Budget and Appropriations Coalition
  - http://federalaidspolicy.org/category/abac/
- Partnership to End HIV, STDs and Hepatitis
  - http://endhivstdhep.org/
- Opioid and Health Indicators Database
  - http://opioid.amfar.org/
- Find Your Representative
  - https://www.house.gov/representatives/find/
- CBPP: Introduction to the Federal Budget Process
Like, Love, Share!

@AIDSadvocacy

Facebook.com/TheAIDSInstitute
Thank you!

Nick Armstrong
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The AIDS Institute
narmstrong@theaidsinstitute.org

Presentation is available online at:
http://www.theaidsinstitute.org/USCA2019