November 30, 2016

Mr. Donald J. Trump
President-Elect
United States of America
1800 F Street, NW, Room G117
Washington, D.C. 20270

Re: Continued U.S. Commitment to Ending HIV/AIDS

Dear President-Elect Trump:

As we mark World AIDS Day on December 1st, The AIDS Institute, a national non-partisan, non-profit organization dedicated to supporting and protecting health care access for people living with HIV/AIDS, hepatitis, and other chronic and serious health conditions, looks forward to working with you and your Administration to address HIV/AIDS in our country and around the world. Being from New York City, which has been the epicenter of the U.S. HIV epidemic, we are sure you are very familiar with the sadness of losing a friend, neighbor or colleague to HIV/AIDS. On World AIDS Day, a global day of reflection, we especially remember all those who have lost their battle against HIV/AIDS and reaffirm our commitment to one day achieving an end to HIV/AIDS.

While much has changed in the past thirty years since HIV and AIDS were first identified, much has stayed the same. HIV remains a deadly infectious disease with no cure that carries with it much stigma and discrimination. What has changed is that we now know how to prevent and treat HIV. As President, you and your Administration will have the responsibility of determining how well we as a nation address this continued public health threat. The lives of millions of people are at stake, along with their families, friends, and communities.

In our country, an estimated 1.2 million people are living with HIV, and over 700,000 people have died of AIDS and HIV related complications. There are approximately 50,000 new infections every year. Globally, there are an estimated 37 million people living with HIV, and 35 million have died due to their HIV. There are an estimated 2.1 million new infections each year.

One new infection is one too many, and we must do everything possible to prevent HIV and to provide compassion to everyone who is living with HIV and the treatment necessary to keep them healthy and productive members of society.
In terms of preventing HIV, the Centers for Disease Control and Prevention (CDC) leads our nation’s efforts, along with state and local health departments and community-based organizations. They are charged with ensuring federal resources are directed to areas and communities most affected, and utilize those programs that are most impactful. This includes: HIV testing, education and awareness campaigns, behavioral counseling, condom distribution, and syringe service programs.

Recent research has demonstrated if an individual living with HIV is on antiretroviral treatment, their HIV can be suppressed to such a level that the possibility of transmitting the virus is almost non-existent. That is why the federal government leads concerted efforts to provide access to HIV testing to ensure people living with HIV know their status, and are linked to care and treatment. Individuals on consistent treatment can likely live a relatively long and healthy life. While on treatment, the possibility of transmitting the virus is significantly reduced. Therefore, HIV treatment is also means to prevent HIV. In addition, today, people who do not have the virus but are at risk of contracting HIV can take medication to help prevent infection.

We are pleased that over the years, in a bipartisan manner, we have seen great progress in the prevention and treatment of HIV and AIDS. While we have a long way to go, more people are being tested and made aware of their HIV status, more people are linked to care, adhere to treatment, and are virally suppressed, and are living longer due to antiretroviral medications. With continued progress, if we take steps to adequately prevent HIV and provide treatment to those living with HIV, scientists believe we can actually end HIV and AIDS.

Because HIV/AIDS is an infectious disease and public health issue, the federal government has played a significant role in leading our nation’s response to the epidemic. The Ryan White HIV/AIDS Program ensures that low-income, uninsured and under-insured people living with HIV have access to health care, life-saving medications, and essential support services that help people remain in care and on treatment. Today, the program provides some level of service to 533,000 people, 65% of whom are living under 100% of the federal poverty level. Due to the patient-centered care it offers, health outcomes are improved. In fact, over 83% of its beneficiaries are virally suppressed.

The Ryan White Program, a safety net acting as the payer-of-last-resort, works with other programs such as Medicaid, Medicare, and private insurance to provide comprehensive care and treatment. The majority of Ryan White Program clients have some other form of coverage. Medicaid is the largest source of insurance coverage for people with HIV, estimated to cover more than 40% of people with HIV in care. Approximately one quarter of people with HIV in care get their health insurance coverage through Medicare.

With passage of the Affordable Care Act (ACA), the role of private insurance has increased as insurers are now prohibited from excluding people with HIV from their plans, which they historically did. The ACA also provides states the ability to expand their Medicaid programs, which has greatly benefited low-income people living with HIV, particularly adults without children, who did not qualify in the past. The ACA also provides other critical patient protections, coverage of preventive services, such as HIV testing, without cost-sharing, and access to key essential health benefits.

This is why we are very concerned with your announced efforts to repeal the ACA. While we realize that it is not perfect and can be improved, people living with HIV and millions of others currently...
depend on the ACA for their healthcare coverage. People with HIV/AIDS, who need daily, uninterrupted, lifelong treatment, cannot risk losing access to their coverage, even for a short time. The legislation that eventually led to the ACA took years to develop, and implementing regulations and guidelines have taken additional years and continue today. We in the HIV/AIDS community, along with other patient groups, have worked diligently to ensure ACA beneficiaries have access to quality healthcare, including specialty providers and medications, at a price that beneficiaries can afford. While improvements can be made, such as limiting patient cost-sharing for prescription medications, we cannot afford to go backwards by eliminating or destabilizing the healthcare the ACA provides.

We look forward to working with you, your Administration, and the Congress as you consider changes to the ACA, but in the meantime, we urge you not to undermine healthcare for millions of Americans, including those with HIV/AIDS.

Finally, there are many other federal programs that are critical to the nation’s response to HIV/AIDS, including AIDS research at the NIH, Housing Opportunities for Persons with AIDS (HOPWA) at HUD, and other programs at the CDC, the Health Resources and Services Administration, the HHS Office of the Secretary, the HHS Assistant Secretary for Health, the Office of Adolescent Health, SAMHSA, and others. As you consider budget proposals and policies for these programs, along with Medicaid and Medicare, we encourage you to solicit the views of The AIDS Institute and others to ensure they sufficiently address the needs of people living with HIV and those who are at risk of HIV.

We as a nation are on a course that can greatly reduce the number of new infections and get us closer to ending HIV and AIDS. Together, with a continued commitment, necessary resources and effective policies, we believe we can achieve our goals to reduce or eliminate new infections, increase access to care and treatment, and reduce health disparities.

Should you have any questions or comments, please feel free to contact myself at mruppal@theaidsinstitute.org or (813)505-1946 or Carl Schmid at cschmid@theaidsinstitute.org or (202) 462-3042.

Thank you,

Michael Ruppal
Executive Director

Carl Schmid
Deputy Executive Director

cc: Vice President-Elect Mike Pence
    The Honorable Tom Price