Funding Outlook for the Ryan White HIV/AIDS Program

Nick Taylor
The AIDS Institute
Key Advocacy Messages for Congress

• The Ryan White Program still acts as the payer of last resort serving over 512,000 uninsured and underinsured people living with HIV/AIDS in the U.S.

• Program continues to offer critical services to managing HIV: case management, mental health and substance use services, adult dental services, transportation, legal, and nutritional support services
Key Advocacy Messages for Congress

• People retained in care and treatment have higher chance of being virally suppressed
  • Over 81 percent of people in Ryan White Program are virally suppressed
  • Only 30 percent of people living with HIV nationally have achieved viral suppression

• Even with ACA, the program is still needed across the country
  • Some states have not expanded Medicaid leaving Ryan White has the sole source of support for some people living with HIV
Total Spending in FY2015 - $3.8 Trillion

Source: OMB, National Priorities Project
Competing Interests in Discretionary Funding

Discretionary Spending 2015: $1.11 Trillion

- Military: $598.5 billion - 54%
- Government: $72.9 billion - 6%
- Education: $70 billion - 6%
- Medicare & Health: $66 billion - 6%
- Veterans' Benefits: $65.3 billion - 6%
- Housing & Community: $63.2 billion - 6%
- International Affairs: $40.9 billion - 4%
- Energy & Environment: $39.1 billion - 3%
- Social Security, Unemployment & Labor: $29.1 billion - 3%
- Transportation: $26.3 billion - 2%
- Science: $29.7 billion - 3%

Source: OMB, National Priorities Project
The Budget Control Act of 2011 (BCA) was enacted to cut the deficit by $2.4 trillion over 10 years

- Discretionary spending caps of $917 billion in savings over 10 years
- Created the Joint Select Committee on Deficit Reduction (the Supercommittee) to find additional $1.2 trillion in cuts for same period

Failed to agree on way forward, so automatic across-the-board cuts (sequestration) took effect in 2013 for discretionary and some mandatory programs

BCA also sets discretionary budget caps through 2021
Deficits and Surpluses (as percentage of GDP)

Source: Congressional Budget Office.
Bipartisan Budget Act of 2015

- Bipartisan Budget Act of 2013, which provided sequester relief for fiscal years 2014 & 2015 was set to expire.
- Congress was pressured to lift caps for at least FY2016.
- Without a budget deal, sequestration would have taken full effect, cutting non-defense discretionary (NDD) funding by $37 billion.
- Eliminated about 90 percent of the sequestration budget cuts for NDD programs in fiscal year 2016, and about 60 percent of them in 2017.

Source: HRSA HAB
President Obama’s FY2017 Budget Request

- The Administration makes positive investments in the Ryan White Program:
  - Increases total Ryan White Program funding by $9 million, for a total of nearly $2.3 billion
  - Flat funds most parts of the Program, including:
    - $655 million for Part A
    - $414 million for Part B care programs
    - $900 million for the AIDS Drug Assistance Program (ADAP)
    - Over $46 million for Part F AETCs and Dental program
President’s FY2017 Budget Continued...

Ryan White Part D:

- Budget request proposes to eliminate dedicated funding for Part D and would consolidate Parts C and D.
- President has requested consolidation for the past several fiscal years.
  - Congress has rejected the proposal every year.
- Part D funded programs are uniquely tailored to address the needs of women and youth.
Ryan White SPNS:

- Budget request increases SPNS funding by $9 million for a demonstration project to increase hepatitis C testing and care and treatment for people co-infected with HIV and HCV.
- New HCV infections have increased by 150% between 2010 and 2013 and 1 in 4 people living with HIV is also co-infected with HCV.
FY2017 Appropriations

• Both the House and Senate passed all 12 spending bills in committee.

• Both House and Senate Labor-HHS appropriations bills had lower overall allocations compared to FY2016:
  • House bill was $569 million less
  • Senate bill was $270 million less

• Increased pressure in both bills to increase funding for NIH, Zika, and the opioid crisis
  • Democrats wanted emergency funding for Zika and the opioid crisis
FY2017 Appropriations

Senate Labor-HHS bill:

• For the first time in several years, the Committee passed a bipartisan bill
• Flat funded HIV prevention at CDC, increased NIH funding by $2 billion
• Cut CDC STD and TB funding, cut the HHS Secretary’s Minority AIDS Initiative Fund
FY2017 Appropriations

Senate Labor-HHS bill:

• Most of Ryan White Program flat funded
• However, the bill cut two aspects of the program:
  • Eliminated SPNS program (-$25 million)
  • Cut Part C by $4 million
• Last year the Senate proposed to eliminate SPNS as well – we successfully restored funding in final FY2016
FY2017 Appropriations

Ryan White SPNS program:

• The program develops innovative service models for HIV care to respond to the needs of Ryan White Program clients

• Current SPNS projects include:
  • Evidence-informed interventions to improve HIV Care Continuum
  • Use of social media to improve health outcomes along the HIV Care Continuum
  • Workforce capacity building for integrating HIV primary care Culturally appropriate interventions of to reach Latino(a) populations
  • Building a medical home for multiply diagnosed HIV-positive homeless populations
  • Enhancing engagement and retention in care for the Transgender Women of Color Initiative

• The Community is working to restore this funding
FY2017 Appropriations

Ryan White Part C:

• In honor of World AIDS Day in 2011, the Administration provided $15 million in additional funding for Ryan White Part C programs

• After first two years of this additional funding:
  • 271 Part C clinical sites receiving additional funding
  • Enrollment of over 43,000 patients into care

• HRSA has continued to provide this funding to Part C since 2011, and the $4 million increase by Congress to Part C in FY2016 filled the shortfall HRSA faced in maintaining the “World AIDS Day” funding.

• Community is also working to restore this cut
FY2017 Appropriations

House Labor-HHS bill:

• Partisan bill mostly voted on party lines
• Flat funds all CDC HIV, STD, and Hepatitis prevention programs
• Flat funds all parts of the Ryan White Program
• Increases NIH funding by $1.25 billion
FY2017 Appropriations

House Labor-HHS bill:

• Completely eliminates:
  • Title X family planning programs (-$286 million)
  • Teen Pregnancy Prevention Program (-$101 million)
• Cuts funding to many aspects of the ACA
• Flat funding in the both the House and Senate for most of the Ryan White Program should be seen as a win.
Where Are We Now?

• Unclear how the Senate and House will reconcile their differences in the Labor-HHS bills
  • Nearly a $300 million difference in how much the House and Senate allocated towards their respective bills

• Fiscal year ends September 30, 2016

• Due to party conventions, extra long recess, and presidential elections there is very little time Congress is in session
Where Are We Now?

- Mostly likely scenario – short-term continuing resolution
  - Timing unclear – could fund government until end of 2016, could be longer
- Timing could shift depending on who wins the White House or what party is in the majority in the Senate
FY2018?

• The Bipartisan Budget Act expires at the end of this fiscal year

• Sequestration and budget caps will be back next year unless Congress comes up with a new plan
  • If no plan is developed it will mean potentially less money for Labor-HHS bill and HIV/AIDS programs

• In the New Year we’ll have a new Congress
  • We will need to educate new members of Congress and their staff to ensure that HIV/AIDS remains a priority

• New president will be sworn in next year
  • Clinton has been supportive of the Ryan White Program in past
  • Unclear Trump’s stance on the program

• Unclear how budget process will play out in early next year
What’s the Community Doing?

• The AIDS Budget and Appropriations Coalition (ABAC) advocates for adequate resources for domestic HIV/AIDS programs across the federal government

• Activities have included:
  • Multiple Hill visits with members of the Budget and Appropriations Committees, HIV/AIDS champions, and leadership on the Hill
  • Sent community letters to the Administration and Congress
  • Support “Dear Colleague” letters on the Hill
  • Social media campaigns - #NoHIVcuts and #FundHIV
  • Will continue to meet with congressional offices until a final spending measure is developed
Conclusions

• We continue to operate in tough budgetary times; many Republicans want to see cuts to non-defense discretionary programs
• With ACA, some on the Hill can continue to question the need for the Ryan White Program
• Despite these obstacles, the Program continues to be funded every year – a sign that most of the Hill continue to see value in the Program
• Health outcomes from the Program continue to surpass national rates
• Future of the Program (i.e., reauthorization) may depend on makeup of the next Administration and Congress
Thank you!

Nick Taylor
Policy Associate
The AIDS Institute
ntaylor@theaidsinstitute.org