



HIV and Viral Hepatitis Policy Watch

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The *Policy Watch* provides timely updates and resources on Hill and Administration activities impacting HIV and viral hepatitis programs. Please go to NASTAD's website at www.NASTAD.org for more information.

Congress

Deficit Reduction Committee

On November 21, the co-chairs of the Deficit Reduction Committee (also known as the "Supercommittee") announced that the Committee could not reach a bipartisan agreement finding \$1.5 trillion in deficit-reduction savings over ten years by the deadline outlined in the Budget Control Act signed into law in August. The Supercommittee needed to complete their process in order to avoid a sequestration or trigger of across the board cuts to federal programs. As written in the Budget Control Act, the sequestration process will result in automatic across-the-board cuts of up to \$1.2 trillion starting in January 2013 or about \$100 billion each year. The savings will come from both security and non-security programs, but low income programs, such as Medicaid, are exempt from the cuts. Medicare services are also exempt; however, provider payments can be cut, but these cuts are capped at two percent. According to the [Center for Budget and Policy Priorities](#), non-exempt non-defense discretionary programs will be cut by about nine percent in 2013. HIV/AIDS, other related programs and many interconnected health care services that impact the people we serve are non-defense discretionary programs. Such a large cut to discretionary funding will shrink the overall pool of money available to all programs. The trickle down impact could mean fewer resources for programs such as Ryan White, ADAP, and CDC prevention. This [Congressional Research Service report](#) details how the sequestration process will affect implementation of the Affordable Care Act.

Though the Budget Control Act includes automatic across-the-board cuts for both security and non-security programs, some Members of Congress are attempting to repeal sequestration for the Department of Defense and security spending. The current proposals would not repeal the cuts for non-defense programs. The President has said that he will veto any bills that repeal the sequestration triggers. Additionally, The Budget Control Act also requires that both the House and Senate vote on a balanced budget amendment to the Constitution before December 31. NASTAD, along with 280 other national organizations, sent a [letter](#) to all Members of Congress opposing the Balanced Budget Amendment. On November 18, the House voted on the amendment, which fell short of the two-thirds majority required to pass a constitutional amendment. The Senate has not scheduled a vote on the amendment.

FY2012 Appropriations

On November 17, Congress passed [H.R. 2112](#) (a "minibus" or a collection of a few appropriations bills which would normally be considered separately) which included three consolidated appropriations bills and also included Continuing Resolution language that funds the federal

government through December 16, 2011. There was an attempt to use the minibus model for the other remaining appropriations bills; however, this effort was stalled and the second minibus was defeated in the House. This increases the likelihood that FY2012 will be funded through an omnibus of the remaining appropriations bills or one or more Continuing Resolutions. In both funding scenarios, there is the potential for implementing cuts below FY2011 funding levels and difficult policy riders that could include the ban of federal funding for syringe exchange programs, prohibit funding for the implementation of the Affordable Care Act, and further restrict the work of Planned Parenthood and its affiliates. NASTAD and AIDS and viral hepatitis community partners will continue to advocate for the best possible FY2012 funding levels without harmful policy riders.

Administration

World AIDS Day

President Obama spoke on World AIDS Day and announced the reallocation of \$50 million in new resources for Ryan White Programs - \$35 million for ADAP and \$15 million for Part C. The \$35 million in increased funding for ADAP will go to state AIDS Drug Assistance Programs (ADAPs). The Administration is working to increase access to treatments, both globally and domestically, based on the [treatment cascade](#) CDC released this week. The White House has released a [fact sheet](#) outlining current information on this funding. A complete transcript of the President's remarks can also be found [online](#).

In her speech Thursday evening, [Secretary Sebelius cited NASTAD](#) as a great partner and collaborator when announcing the enhanced agreement between the ADAP Crisis Task Force and Gilead Sciences that extends additional voluntary discounts and rebates for most Gilead products purchased by ADAPs. Secretary Sebelius also announced a new, \$500,000 grant from the MAC AIDS Fund to Welvita to provide patient outreach and education on ADAP.

The Presidential Advisory Council on HIV/AIDS released a [World AIDS Day statement](#) commending the President's work on HIV/AIDS and imploring him to strengthen his commitment to HIV/AIDS. NASTAD joined the HIV/AIDS community and sent a [letter to the President](#) thanking him for speaking on World AIDS Day and encouraging him to commit to the goal of getting to zero new infection, AIDS related deaths, and discrimination.

Affordable Care Act

NASTAD recently submitted [comments](#) on the proposed rule CMS-2349-P, regarding Medicaid program eligibility changes under the Affordable Care Act of 2010. NASTAD also joined community partners in sending a [letter to Secretary Sebelius](#) on the importance of a robust Essential Health Benefits (EHB) package to people living with HIV/AIDS, as it will set the coverage standard for health plans operating in the state-based exchanges and the benefits available to the Medicaid expansion population beginning in 2014.

HHS Viral Hepatitis Action Plan

Dr. Ron Valdiserri, Deputy Assistant Secretary for Health, Infectious Diseases and Director of the HHS Office of HIV/AIDS Policy wrote an [AIDS.gov blog post](#) spotlighting hepatitis B as part of an update on the Viral Hepatitis Action Plan. The Status Report on the Implementation of the Viral Hepatitis Action Plan is now available [online](#).

National HIV/AIDS Strategy (NHAS)

HRSA HAB [announced](#) that they will re-compete the entire Ryan White Part D Program in FY2012 to address the changes in the epidemic and support the NHAS. The new Funding Opportunity Announcement will focus on providing comprehensive health services to women, children, and youth in the areas most impacted by HIV/AIDS and will target linkage to and retention in care.

New CDC HIV and Viral Hepatitis Coinfection Fact Sheet

On November 17, 2011, the Centers for Disease Control and Prevention (CDC) released [a new fact sheet](#) providing information about viral hepatitis among people living with HIV. According to CDC, persons living with HIV are disproportionately affected by viral hepatitis; about one-third of HIV-positive individuals are coinfecting with hepatitis B or hepatitis C, which can cause long-term (chronic) illness and death. Viral hepatitis progresses faster among persons with HIV infection, and persons who are infected with both viruses experience greater liver-related health problems than those who are HIV negative. Additionally, nearly 80 percent of injection drug users (IDUs) with HIV infection also have HCV.

Orasure OraQuick® HCV Rapid Antibody Test

The Food and Drug Administration (FDA) granted the [Orasure OraQuick® HCV Rapid Antibody Test](#) a CLIA waiver, meaning that over 180,000 sites can now test for hepatitis C with the OraQuick test, which is the first and only HCV rapid test.

Presidential Advisory Council on HIV/AIDS

[Secretary Sebelius appointed Nancy Mahon](#) as the new chair of the Presidential Advisory Council on HIV/AIDS. Nancy Mahon currently serves as the executive director of the MAC AIDS Fund.

Resources

Legislation

NASTAD has updated its [legislation of interest grid](#) for the 112th Congress to include the most recent HIV, STD and viral hepatitis legislation.

Viral Hepatitis Trainings

The National Training Center for Integrating Hepatitis into HIV/STD Prevention Services has two new trainings available at [KnowHepatitis](#) on [HCV Prevalence](#) and [Prevention Intervention](#) among young adult Intravenous Drug Users (IDU).



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