

Testimony Submitted by Alice Thornton, MD

**Medical Director of the Bluegrass Care Clinic in Lexington, Kentucky, and
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to the U.S. House Appropriations Subcommittee on

Labor, Health and Human Services, Education and Related Agencies

**Regarding Part C of the Ryan White Program at the HIV/AIDS Bureau of the Health
Resources and Services Administration in the Department of Health and Human Services**

March 28, 2014

My name is Dr. Alice Thornton, and I serve as Medical Director of the Bluegrass Care Clinic in Lexington, Kentucky. I am writing to submit testimony on behalf of the Ryan White Medical Providers Coalition (RWMPC), which I Co-Chair. RWMPC is a national coalition of medical providers and administrators who work in clinics supported by the Ryan White HIV/AIDS Program funded by the HIV/AIDS Bureau (HAB) at the Health Services and Resources Administration (HRSA). I thank the Subcommittee for its support of Ryan White Part C Programs in FY 14. And while I am grateful for this support, and understand that times are tough, **I request \$225.1 million, or a \$24 million increase for Ryan White Part C programs in FY 15.** While I know that this is a lot of funding, it is in fact well below the estimated need, and Ryan White providers would spend those dollars identifying, engaging and treating persons living with HIV/AIDS – an infectious disease that can be effectively prevented and treated in a way that saves both lives and money.

My Ryan White-funded clinic, the Bluegrass Care Clinic (BCC), is a university-affiliated clinic that has served as the source for HIV primary care in the 63 counties of central and eastern Kentucky for the past 24 years. Over half of the counties served are federally recognized as economically distressed, and BCC cares for 74% of the people living with HIV in the region.

Over the past 10 years, the number of patients has increased by 142%, and the annual number of

outpatient medical care appointments has increased by more than 450%. *The University incurs an annual deficit of approximately \$1.2 million from operating the clinic.*

In addition to critical funding that Ryan White Part C provides through direct federal grants for comprehensive medical care clinics like BCC, most Part C clinics, including BCC, also receive support from other parts of the Ryan White Program that help provide access to medication; additional medical care, such as dental services; and key support services, such as case management and transportation, which all are essential components of the highly effective Ryan White HIV care model the results in excellent outcomes for our patients.

Ryan White Part C Programs Support Comprehensive, Expert and Effective HIV Care

Part C of the Ryan White Program funds comprehensive, expert and effective HIV care and treatment -- services that are directly responsible for *the dramatic decrease in AIDS-related mortality and morbidity over the last decade.* The Ryan White Program has supported the development of expert HIV care and treatment programs that have become *patient-centered medical homes* for individuals living with this serious, chronic condition. In 2011, a groundbreaking clinical trial -- **named *the scientific breakthrough of the year by Science magazine*** -- found that HIV treatment not only saves the lives of people with HIV, *but also reduces HIV transmission by more than 96% -- proving that HIV treatment is also HIV prevention.*

The comprehensive, expert HIV care model that is supported by the Ryan White Program has been highly successful at achieving positive clinical outcomes with a complex patient population.¹ In a convenience sample of eight Ryan White-funded Part C programs ranging from the rural South to the Bronx, *retention in care rates ranged from 87 to 97 percent.* In estimates from the Centers for Disease Control and Prevention (CDC) – only 37 percent of all people with

¹ See *Improvement in the Health of HIV-Infected Persons in Care: Reducing Disparities* at <http://cid.oxfordjournals.org/content/early/2012/08/24/cid.cis654.full.pdf+html>.

HIV are in regular care nationally.² Once in care, patients served at Ryan White-funded clinics do well— *with 75 to 90 percent having undetectable levels of the virus in their blood*. This is much higher than the estimate from the CDC that just 25 percent of all people living with HIV in the U.S. are virally suppressed.

Investing in Ryan White Part C Programs Saves Both Lives and Money

Early and reliable access to HIV care and treatment both helps patients with HIV live relatively *healthy and productive lives* and is more *cost effective*. One study from the Part C Clinic at the University of Alabama at Birmingham found that patients treated at the later stages of HIV disease required *2.6 times more health care dollars* than those receiving earlier treatment meeting federal HIV treatment guidelines. *On average it costs \$3,501 per person per year to provide the comprehensive outpatient care and treatment available at Part C funded programs.*

The comprehensive services provided often include lab work, STD/TB/Hepatitis screening, ob/gyn care, dental care, mental health and substance abuse treatment, and case management.

Current Challenges – Future Promise

This effective and comprehensive HIV care model, however, is not completely supported by Medicaid or most private insurance. *While most Ryan White Program clients have some form of insurance coverage, without the Ryan White Program, they would risk falling out of care.*

Barriers include poor reimbursement rates; benefits designed for healthier populations that fail to cover critical services, such as care coordination; and inadequate coverage for other important services, such as extended medical visits, mental health and substance use treatment. Full implementation of the Affordable Care Act plus continuation of the Ryan White Program will dramatically improve health access and outcomes for many more people living with HIV disease.

² See CDC's *HIV in the United States: The Stages of Care*
<http://www.cdc.gov/nchhstp/newsroom/docs/2012/Stages-of-CareFactSheet-508.pdf>.

Fully Funding and Maintaining Ryan White Part C Programs Is Essential

Because of both the inadequacy of insurance coverage for people with complex conditions like HIV and the fact that some individuals will remain uncovered, even with Affordable Care Act implementation, ***fully funding and maintaining the Ryan White Program is essential to providing comprehensive, expert and effective HIV care nationwide.***

And while RMWPC welcomes the \$4 million increase for Part C programs proposed in the President's FY 15 budget, it is concerned about the proposal to consolidate Ryan White Part D funding into Part C. RWMPC's specific concerns include:

- ***Part D funding supports effective HIV care and treatment services for vulnerable populations, including women and adolescents.*** With adolescents accounting for 39% of new HIV infections in the U.S., it is critical to target resources to support comprehensive services that effectively engage and retain young people in HIV care and treatment.
- ***In some communities, Part D-funded programs are the main providers of HIV care and treatment.*** It is critical to ensure that implementation of any budget proposal does not leave any community without adequate access to effective and comprehensive HIV care and treatment. Also, for Ryan White medical clinics that currently receive only Part D funding, it could prove difficult to successfully compete for Part C funding if there already is a Part C program serving that community; and loss of that Part D program would reduce the community's access to HIV care and treatment.
- ***It is unclear how the proposed consolidation would be implemented.*** At this time it is unclear what the consolidation process would entail and how it would practically impact grantees and access to HIV care and treatment in communities. Since most Ryan White medical clinics receive funding from multiple parts of the Ryan White Program, reduction of

funding to one part can have damaging and unintended consequences to the overall services provided by Ryan White medical clinics, especially now, at a time when providers are working to expand access to HIV care and treatment.

At this critical time in the HIV/AIDS epidemic, when research has confirmed that early access to HIV care and treatment not only saves lives but prevents new infections by reducing the risk of transmission to near zero for patients who are virally suppressed, *it is essential to maintain overall funding levels for the Ryan White Program.* While the ACA provides important new health care coverage options for many patients, most health insurers fail to support the comprehensive care and treatment necessary for many patients to manage HIV infection. Exorbitant cost sharing, benefit gaps and limited state uptake of the Medicaid expansion necessitate a vital and ongoing role for the Ryan White Program. Increasing access to and successful engagement in effective, comprehensive HIV care and treatment is the only way to lead the nation to an AIDS-free generation and reduce the devastating costs of – including lives lost to -- HIV infection.

Conclusion

Thank you so much for your consideration of RWMPC's FY 15 request of **\$225.1 million for Ryan White Part C programs, a \$24 million increase over FY 14.** If you have any questions, please do not hesitate to contact the Ryan White Medical Providers Coalition Convener, Jenny Collier, at jennycollierjd@yahoo.com or 202-295-7188.