Ryan White Part C Programs Support Access to Effective HIV Care

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

Part C of the Ryan White Program funds comprehensive 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 ground-breaking clinical trial (HPTN 052) -- 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. 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 HIV are in regular care nationally. 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 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.

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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.

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 is not completely supported by Medicaid or most private insurance plans. Most Ryan White Program clients have some form of insurance coverage, but 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 ACA plus the continuation of the Ryan White Program will dramatically improve health care access and outcomes for many more people living with HIV disease.

Ryan White Programs Are Struggling to Meet Demand

As a result of funding cuts and shortfalls, as well as increased patient demand, a 2012 RWMPC survey of over 100 Ryan White Part C providers nationwide demonstrated that approximately half of the programs surveyed have had to make cuts or other program changes.

More specifically:

- **54 percent** reported that their programs had reduced or cut services, including **27 percent** that had reduced or cut support for medications, and **19 percent** that had reduced coverage for laboratory monitoring.
- **40 percent** had longer wait times for new and/or existing patient appointments.
- **31 percent** had laid off staff.
- **30 percent** had frozen hiring.

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3 Based on data from Gilman BH, Green, JC. Understanding the variation in costs among HIV primary care providers. AIDS Care. 2008;20:1050–6.

Fully Funding and Maintaining Ryan White Part C Programs Is Essential to Providing Effective HIV Care and Treatment

Because of both the inadequacy of insurance coverage and the fact that some individuals will remain uncovered, even after Affordable Care Act implementation, fully funding and maintaining the Ryan White Program is essential to providing comprehensive, expert and effective HIV care and treatment nationwide. Specific funding requests for the Ryan White Part C Program include:

- **For FY 13, Congress should maintain FY 12 levels of funding and reverse sequestration cuts.** According to the 2012 RWMPC survey of over 100 Ryan White Part C programs nationwide, if federal funding is cut by 10 percent through sequestration and/or additional deficit reduction measures, that cut would force 66 percent of the clinics surveyed to **further cut or reduce services; 57 percent to cut or reduce staff; and 13 percent to close their doors to new patients.**

- **For FY 14, Congress should increase funding for Ryan White Part C by 10 percent** to help support access to effective HIV care and treatment, and to meet the increasing patient demand for these services.

While RMWPC understands the difficulty of the current economic climate, reducing funding for HIV care and treatment is not cost-effective and will hamper the ability of Ryan White Part C programs to achieve the best possible patient outcomes. It also will jeopardize our nation’s ability to capitalize on recent scientific breakthroughs that could move us toward an AIDS-free generation. Without ready access to comprehensive, expert, and effective HIV care and treatment, patients will use expensive emergency care more, and receive less effective treatment at later stages of HIV disease. Reduced access to effective HIV care and treatment also will reduce rates of retention in care, resulting in increased patient viral loads and increased numbers of HIV infections. And most importantly, there will be those who will lose their lives because they are not able to access these lifesaving services at all.

About the Ryan White Medical Providers Coalition (RWMPC):

The Ryan White Medical Providers Coalition (RWMPC) was formed in 2006 to be a voice for medical providers across the nation who deliver quality care to their patients through Part C of the Ryan White Program. The Coalition advocates for access to a full range of primary care services for individuals living with HIV/AIDS through its broad and diverse membership of highly qualified medical professionals and administrators from Ryan White Part C programs nationwide. For more information, please contact Coalition Convener, Jenny Collier, at 202-295-7188 or at jennycollierjd@yahoo.com.