

SUPPORTING THE RYAN WHITE HIV/AIDS PROGRAM

Issue

The Ryan White HIV/AIDS Program (RWHAP) is a federal program dedicated to providing medical care, treatment, and support services for people living with HIV (PLWH) in the United States. The AIDS Drug Assistance Program (ADAP), a key component of the RWHAP, is vital to ensuring that PLWH have access to antiretroviral therapy (ART) in all 50 states. The RWHAP is administered by the federal Health Resources and Services Administration (HRSA), and many states also allocate funding for their respective ADAPs. More than half of people diagnosed with HIV receive services through the RWHAP.ⁱ Created in 1990 and last reauthorized by Congress in 2009, the RWHAP continues to receive bi-partisan support and funding to ensure its continuation.

ViiV Healthcare Position

ViiV Healthcare (ViiV) believes that the RWHAP should continue to cover all available FDA-approved HIV treatments in accordance with current clinical treatment guidelines and provide access to all new medical innovations that may benefit PLWH. The RWHAP is instrumental in ensuring PLWH have access to necessary medical care, treatment, and support services and has produced exceptional medical results among PLWH. As such, it offers a model to other health plans and providers of the services and methods that are effective for complex medical populations, long-term and chronic conditions, and infectious diseases. Given its continued success, the RWHAP should be fully funded by both states and the federal government. Further, when Congress considers reauthorizing the RWHAP, it should rely on input from the HIV community and the patients and grantees it serves. The HIV patient advocacy community has a long history of working to shape and support the program and should continue to determine the future direction of the program.

Key Points

Over the last 30 years, the RWHAP has set precedent for success in HIV treatment. RWHAP is the largest federal program devoted entirely to HIV care and treatment and currently serves over half of all those diagnosed.ⁱⁱ The program assists mostly low-income PLWH. It functions as a “payer of last resort” and wraps around other sources of coverage, care and treatment. The ADAP can also offer health insurance purchasing to some PLWH in order to provide medications cost-effectively.ⁱⁱⁱ

Medication

ADAP provides prescription drugs to PLWH who have limited or no prescription drug coverage. It represents a critical source of medication access nationally and serves around one half of all PLWH on treatment in the US.^{iv} The ADAP is managed by the state departments of health and details of the program are locally specific. ADAPs are categorically eligible for the 340B Drug Discount Program and receive significant discounts on drug purchasing.^v Pharmaceutical manufacturer rebates funded approximately 40 percent of the program's budget nationally in 2016.^{vi}

Medical Care

The RWHAP directly funds clinics across the US to provide HIV medical care to PLWH. In addition to general outpatient medical care, the program provides medical support services such as medical case management, laboratory monitoring, and medical transportation. The RWHAP also provides oral health and dental care and medical nutrition services. The program also offers cost sharing assistance, premium payment, and health insurance purchasing to some PLWH. The program has strict statutory guardrails that determine what services it may provide, and states also have guidance over their respective programs.

Support Services and Social Determinants of Health

The RWHAP provides services that demonstrate success in supporting the health and well-being of PLWH. Some of these support services include food services, housing, transportation, legal services, linguistic services, case management, childcare, psychosocial and mental health services, rehabilitation

and respite care, and substance abuse services. These services offer best practices for how interventions focused on the social determinants of health can contribute to long-term treatment success.

Success of the Program

As a result of the program's services, 88.1 percent of RWHAP clients receiving HIV medical care are virally suppressed. This far exceeds the national viral suppression average of 64.7 percent.^{vii} Viral suppression is the goal of HIV treatment as sustained viral suppression both leads to better outcomes for PLWH and prevents transmission of the virus.^{viii} The RWHAP is rigorously monitored for effectiveness using population data.

Reauthorization

The RWHAP has been reauthorized by Congress four times since it was first created (1996, 2000, 2006, and 2009). Each reauthorization has adjusted aspects of the program. The HIV community and patient advocates play a significant role in monitoring and shaping the RWHAP at both the state and federal levels. RWHAP state and regional bodies, as well as many community-based organizations (CBOs) and clinics, are organized by community planning councils. HRSA also engages with advocates on a regular basis. The HIV advocacy community led the last reauthorization process and worked directly with Congressional staff. Authorization for the program lapsed in FY2013, but the program has continued to be funded through the annual appropriations process.

Federal & State Funding

The FY2020 budget for the program was approximately \$2.5 billion. The program has been largely flat funded for many years despite need for the program growing annually. However, the RWHAP is a key part of the federal "Ending the HIV Epidemic" initiative and has received new funds specifically for that effort. The majority of RWHAP funding is provided to states and cities/metropolitan areas through a combination of grants and formula funding. The remaining dollars fund organizations, such as clinics and CBOs through a grant process.

The federal government provides funding to states and territories for their ADAPs based on the number of PLWH. In addition to federal funding, some states and localities provide additional funding to their RWHAP programs (including through certain state matching requirements). Much of the funding provided to states and localities is, in turn, channelled to local providers and CBOs.

Ending the HIV Epidemic

The RWHAP plays a significant role in federal and jurisdictional efforts to "End the HIV Epidemic" by focusing on assuring PLWH have access to essential HIV care, treatment, and support services needed to help them reach viral suppression in order to stop new transmissions.

ⁱ HIV.gov "HRSA Announces Record High HIV Viral Suppression Rate in New 2019 Ryan White HIV/AIDS Program Client-Level Data Report," L. Cheever, December 07, 2020 <https://www.hiv.gov/blog/hrsa-announces-record-high-hiv-viral-suppression-rate-new-2019-ryan-white-hiv-aids-program#:~:text=In%202019%2C%20approximately%20567%2C000%20individuals,through%20the%20RWHAP%20last%20year>

ⁱⁱ Id.

ⁱⁱⁱ Kaiser Family Foundation, "AIDS Drug Assistance Programs (ADAPs)" <https://www.kff.org/hiv-aids/fact-sheet/aids-drug-assistance-programs/#footnote-227927-2>.

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^{vii} HIV.gov "HRSA Announces Record High HIV Viral Suppression Rate in New 2019 Ryan White HIV/AIDS Program Client-Level Data Report," L. Cheever, December 07, 2020 <https://www.hiv.gov/blog/hrsa-announces-record-high-hiv-viral-suppression-rate-new-2019-ryan-white-hiv-aids-program#:~:text=In%202019%2C%20approximately%20567%2C000%20individuals,through%20the%20RWHAP%20last%20year>

^{viii} CDC.gov "Effectiveness of Prevention Strategies to Reduce the Risk of Acquiring or Transmitting HIV" <https://www.cdc.gov/hiv/risk/estimates/preventionstrategies.html>.