

PRESS RELEASE

July 7, 2020

Contact: Carl Schmid <u>cschmid@hivhep.org</u> (202) 365-7725

House Appropriators Provide Minimal Increases for Ending HIV in the U.S. Funding for Hepatitis Programs Falls Short of Need

*Washington DC...*House appropriators are proposing minimal increases for addressing the HIV epidemic in the United States by providing \$90 million in increased funding in their FY2021 Labor, HHS-and Related Agencies Appropriations <u>bill</u>. The bill falls far short of what is needed to ramp up year two of the <u>Ending the HIV Epidemic</u> initiative being championed by the Trump administration and robustly supported by Congress in year one. The bill also fails to address the increasing burden of hepatitis in our country, especially considering there are cures and vaccines available that can lead to hepatitis eradication.

After providing increases of \$300 million to lay the foundation for the *Ending the HIV Epidemic* initiative, for year two, the committee is proposing only a \$10 million increase for CDC's HIV prevention efforts; \$25 million more for the Ryan White HIV/AIDS Program; and \$15 million more for the Community Health Centers to focus on PrEP, a once-daily pill that prevents HIV transmission. The president's budget had called for an increase of \$412 million to these three programs to scale up HIV prevention and treatment efforts to meet the goals of ending HIV by 2030. The committee also proposes to increase AIDS research at the NIH by \$37 million (the president proposed a \$263 million cut) and a \$3 million increase for the Minority AIDS Initiative at HHS.

"We thank the committee for supporting substantial increases necessary to battle the ongoing COVID-19 pandemic and better prepare our country and the public health infrastructure for the future," commented **Carl Schmid, executive director** of the **HIV+Hepatitis Policy Institute.** "However, as our nation is responding to the current COVID-19 pandemic, we have the tools to end two other infectious diseases, HIV and hepatitis C, and we must invest the necessary dedicated resources today to save people's lives today and in the future. The proposed funding increases for HIV fall far short of giving communities the resources they need to ramp up treatment and prevention programs. Without additional investment the U.S. will not meet the goals of ending HIV by 2030."

Based on the materials released by the committee, it is not known if the CDC's Hepatitis Division received any increase at all; if it did it was very minimal. The **HIV+Hepatitis Policy Institute** <u>supported</u> total funding of \$134 million—an increase of \$95 million for the CDC Hepatitis Division, and \$58 million—an increase of \$48 million—as proposed by the president for the CDC's Eliminating Opioid Related Infectious Diseases program. The funding increases are needed to increase hepatitis surveillance, screening, education, linkage to care, and outbreak response programs throughout the country, particularly as a result of the ongoing opioid crisis.

The committee is recommending the removal of the federal funding ban on the purchase of sterile syringes, which are used to prevent HIV and hepatitis.

HIV+Hep looks forward to working with the committee as it further considers its version of the Labor HHS FY2021 spending bill and awaits Senate action on its bill so that these programs will be sufficiently funded in the future and progress can be made to end these infectious diseases.

###

The **HIV**+**Hepatitis Policy Institute** is a national, non-profit organization whose mission is to promote quality and affordable healthcare for people living with or at risk of HIV, hepatitis, and other serious and chronic health conditions.