

# **HIV+HEP**

## POLICY INSTITUTE

### PRESS RELEASE

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## **Congress Lifts Ending HIV Epidemic Initiative Funding by \$100 Million**

### ***Minimal Increase for CDC Hepatitis Activities***

Washington DC... Congressional appropriators have released the final FY2023 appropriations [bill](#) and have increased funding for the [Ending the HIV Epidemic in the U.S. initiative](#) by \$100 million for a total of \$613 million, according to the Appropriations Committee. While far short of the \$330 million increase proposed in President Biden's [budget](#), it does provide increases to ramp up domestic HIV testing, prevention, and treatment programs in order to end HIV.

Specifically, the Congress is providing a \$25 million increase for the CDC's Ending HIV initiative, which includes an emphasis to "increase equitable access to PrEP"; \$40 million more for the Ryan White HIV/AIDS Program for treatment and care; and an increase of \$35 million for the Community Health Centers to focus on PrEP.

These levels are far short of the \$240 million increase proposed by the Senate and the \$225 million proposed by the House earlier this year.

"We thank House and Senate Appropriators for demonstrating their continued commitment to ending HIV in the United States, which was severely interrupted by the COVID epidemic. The increases will help expand HIV programs in the targeted jurisdictions most impacted by HIV," commented **Carl Schmid, executive director** of the **HIV+Hepatitis Policy Institute**. "However, given that Congress again has not fully funded the initiative and has not provided dedicated funding for a national PrEP program, ending HIV by 2030 will be in serious jeopardy."

Creating a national PrEP program has been a priority of President Biden, many members of Congress, and the HIV community. President Biden has proposed a ten-year \$9.8 billion national PrEP program. Such a program is particularly necessary for those communities who have not taken advantage of the highly effective HIV prevention drugs, including Black and Latino gay men and Black women. Even with the availability of low-cost generic and free daily oral PrEP drugs, uptake has been low due to the lack of community and provider outreach, lab and other medical costs, along with stigma.

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**HIV+Hep** recently commissioned RTI International to model the funding needed to increase PrEP uptake and reduce the racial and ethnic disparities. Under this [analysis](#) \$521 million would be needed in the first year.

“If we are to end HIV, we are going to need dedicated resources for PrEP, particularly for the estimated 20 percent potential PrEP users who are uninsured,” added **Schmid**. “In the meantime, we look forward to working with the CDC to ensure its grantees are dedicating increased resources to PrEP programs, the results of the dedicated PrEP funding for community health centers, and ensuring that private insurers, Medicaid, and Medicare are fully supporting PrEP for those with health coverage.”

Just last week, the USPSTF released a [draft recommendation](#) for PrEP to now include long-acting PrEP.

In a major disappointment, funding for the CDC’s hepatitis division would only receive a \$2 million increase for a total of \$43 million. The President and the Congress earlier had proposed a \$13.5 million increase.

“If we are to implement the [national strategic plan](#) to eliminate hepatitis and do it by 2030, we are going to need a significant commitment of resources to make it happen,” continued **Schmid**. “Even though we have a cure for hepatitis C and treatments and vaccines for hepatitis B, we cannot put them to full use with this consistently low level of funding.”

Congress allocated an increase of \$5 million for the CDC’s Eliminating Opioid Related Infectious Diseases program, which can be helpful to prevent new cases of both HIV and hepatitis.

The bill provides some increases to several other domestic HIV programs. Other parts of the Ryan White HIV/AIDS Program, including cities, states and clinics, will receive an increase of \$36 million. AIDS research at the NIH will increase by \$100 million. For HUD’s Housing Opportunities for Persons with AIDS (HOPWA) program, there will be a \$49 million increase. The HHS Minority HIV/AIDS Fund will increase by \$3 million and the CDC’s HIV school health program will be increased by \$2 million.

There will be no increases in funding for the Teen Pregnancy Prevention Program and Title X family planning programs, while \$35 million would continue for abstinence-only programs.

This is the final spending bill passed under the leadership of Speaker Nancy Pelosi, and Senate Appropriators Patrick Leahy and Richard Shelby. **HIV+Hep** thanks them for their service and long-time commitment to ending HIV. Next year, there will be a new Congress with new priorities. Fortunately, ending HIV and hepatitis have always enjoyed bipartisan support and with continued leadership from the Biden administration, **HIV+Hep** looks forward to working with both sides of the Congress next year to address these serious infectious diseases.

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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.