

AIDS Foundation OF CHICAGO

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Dear Member of the Illinois Congressional Delegation:

The Ryan White CARE Act, which provides vital medical and support services to low-income people with HIV/AIDS, expired in September 2005 and awaits reauthorization. One issue is clear in the reauthorization debate: future funding will be distributed using name-based HIV data beginning in FY 2007. Illinois and other states that currently collect HIV cases by code will lose funding unless they switch to name-based HIV reporting. Therefore, Dr. Eric Whitaker, director of the Illinois Department of Public Health has announced that Illinois will adopt name-based HIV reporting beginning in January 2006.

It will take time for our new name-based system to mature, and funding for Illinois CARE Act programs must not be cut while our state implements the new reporting system. To date, the Illinois code-based system has collected over 13,000 HIV-positive case reports. Converting these code-based reports to name-based will require that all 13,000 reported HIV-positive individuals visit a medical provider as part of their routine care before a new case report that includes their name can be generated. This process will be lengthy and calls for provider training and extensive client education.

We, the undersigned, urge Congress to protect Ryan White CARE Act funding in Illinois and in other states that are switching to a name-based system. Congress should:

- include provisions to allow code-to-name states to phase in their name-based reporting programs without funding penalties or,
- retain current hold-harmless provisions until HIV surveillance is sufficiently mature and complete across the country to use for funding distributions.

Thank you for your commitment to ensuring that essential healthcare funding is maintained so that people with HIV/AIDS can continue to receive the best possible care and be productive members of society.

Sincerely,