

June 3, 2005

Dear Member of Congress:

As Illinois healthcare professionals specializing in the care and treatment of HIV/AIDS, we are writing to ask you to swiftly reauthorize and adequately fund the Ryan White CARE Act. The CARE Act is the nation's flagship response to the domestic HIV/AIDS epidemic. With your help, the CARE Act can continue to provide low-income and uninsured Americans with HIV/AIDS the essential medical and social services they need to extend and improve their lives.

HIV/AIDS remains a life threatening infectious disease and a significant public health emergency. Nearly one million people in the United States are living with HIV, including more than 405,000 who are living with AIDS. Approximately 250,000 individuals living with HIV are unaware of their status, and another 250,000 who know their status do not have access to care and treatment. Every year, more than 40,000 new infections occur in the U.S., 1,600 of those in Illinois. More than 30,000 AIDS cases and over 16,400 deaths due to AIDS have been reported in Illinois since 1981.

The CARE Act plays an integral role in state and local responses to the growing epidemic by creating the infrastructure to identify, develop, and coordinate high-quality, cost-efficient care and services for some of the state's most vulnerable populations. Thanks to medical advances and the services supported by the CARE Act, the number of annual AIDS deaths in Illinois decreased by 55% from 1991 – 2000.

The comprehensive range of medical and support services provided by the CARE Act must continue. These include medical care, laboratory services, and HIV medications, but also must include mental health services, case management, food and nutrition services, transportation, legal assistance, substance abuse treatment and other enabling services that allow people to gain access to and remain in care.

In order to reverse historic under-funding for the program, Congress should appropriate no less than \$2,638.69 million for the CARE Act in Fiscal 2006, with a \$114.9 million increase going to Title I cities; a \$50 million increase for Title II states; a \$303 million increase for the AIDS Drug Assistance Program; a \$41 million increase for Title III clinics; a \$40 million increase for Title IV women, children, and family services; and a \$45 million increase for healthcare provider education through the AIDS Training and Education Centers.

Since its inception in 1990, the CARE Act has enjoyed strong bipartisan support because of its ability to reach those in greatest need in both urban and rural communities. We look to you to continue the CARE Act legacy by swiftly reauthorizing the program and appropriating sufficient funding so that people with HIV/AIDS can receive the rational and cost-effective out-patient services they need to survive.

Sincerely,

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