

# **Responding to HIV/AIDS in Illinois**

## **Remarks to the Adequate Health Care Task Force**

AIDS Foundation of Chicago

June 27, 2006

# AIDS-Related Deaths Since 1981

United States:

530,000

Illinois:

18,000

Chicago:

12,000

# People Living with HIV

United States:

1 million - 1.1 million

Illinois:

40,000 - 42,000

Chicago:

31,000 - 33,000

# Estimated Annual HIV Infections

United States:

40,000

Illinois:

1,600

Chicago:

1,200

# Health Disparities

- Half of all new HIV infections occur among people under age 24
- HIV/AIDS is the leading cause of death for African-American women ages 25-34
- 1 in 4 gay/bisexual men is HIV+
- 1 in 2 African-American gay/bisexual men is HIV+

CDC estimates, 2000-2003

# People Living with HIV

## United States:

47% Black  
34% White  
17% Hispanic  
2% Other

74% Male  
26% Female

45% MSM  
27% Hetero  
22% IDU  
5% MSM/IDU  
1% Other

## Illinois:

50% Black  
31% White  
14% Hispanic  
5% Other

78% Male  
22% Female

52% MSM  
11% Hetero  
26% IDU  
6% MSM/IDU  
5% Unknown

## Chicago:

54% Black  
28% White  
15% Hispanic  
3% Other

75% Male  
25% Female

46% MSM  
13% Hetero  
17% IDU  
3% MSM/IDU  
5% Other

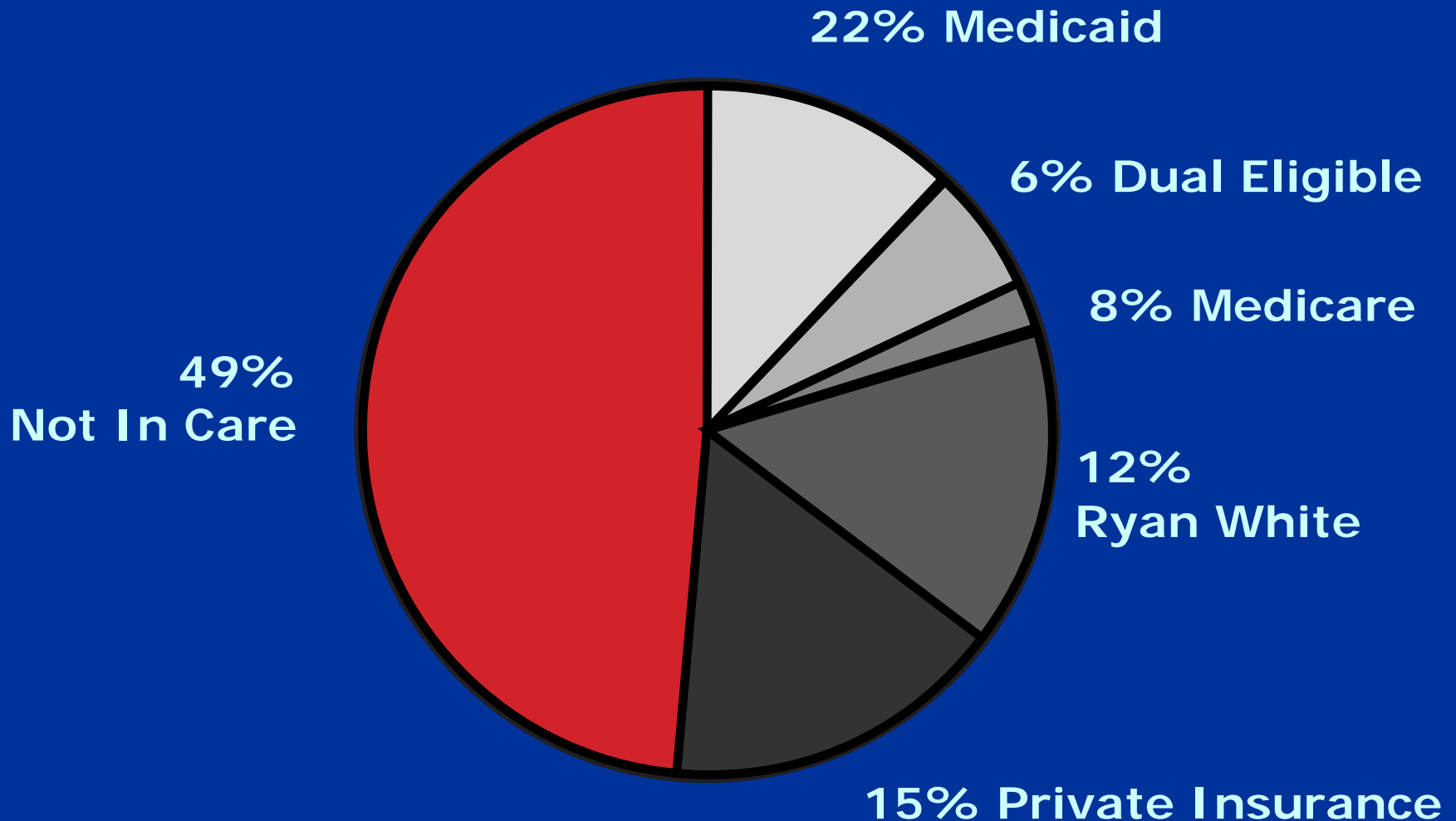
MSM=men who have sex with men; Hetero=heterosexual; IDU=injection drug use

Sources: CDC, June 2005; IDPH, 2005 HIV/AIDS Cases; AFC, January 2006, CDPH, 2005-6

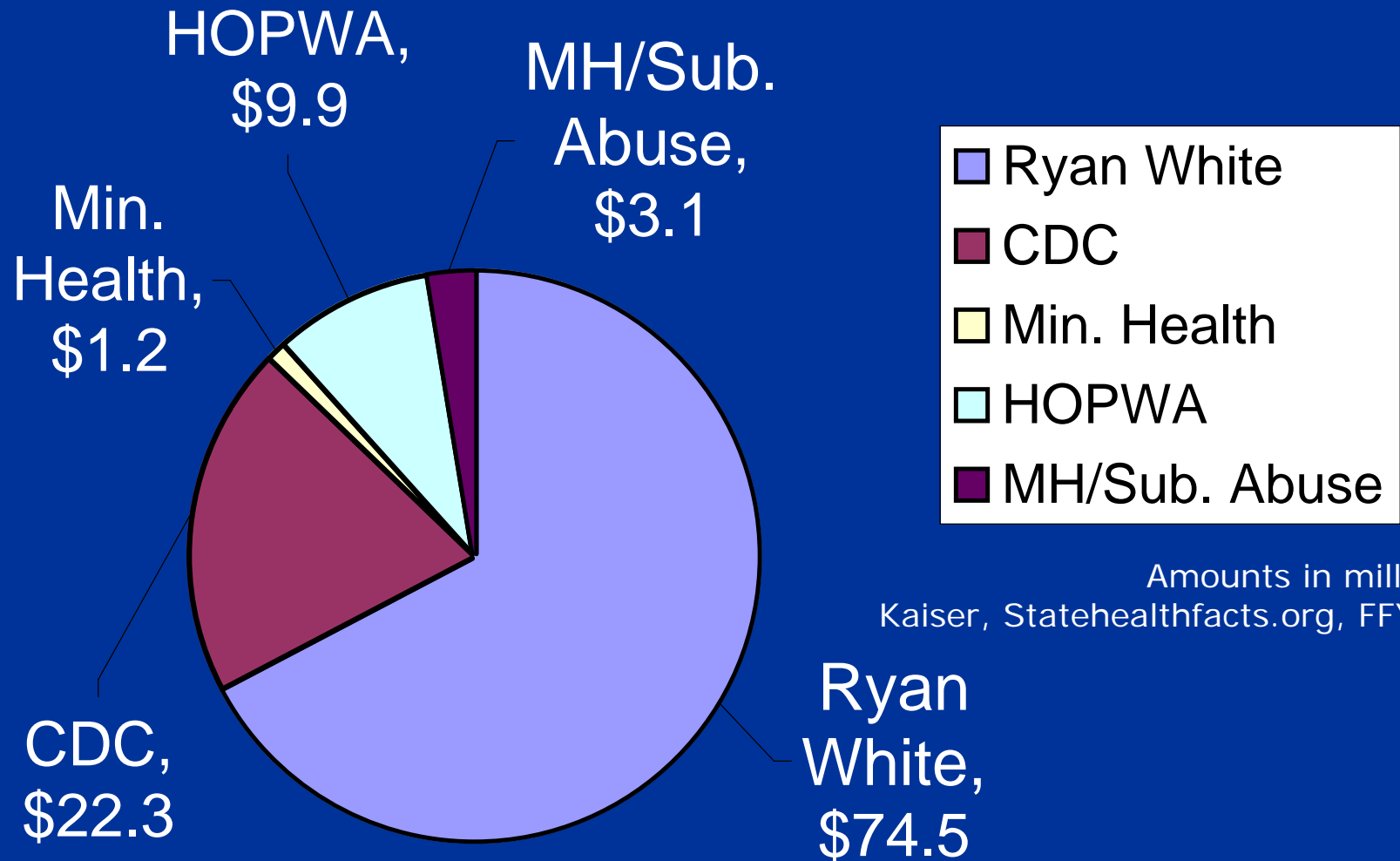
# Co-factors Fueling HIV/AIDS

- Poverty
- Homelessness
- Substance abuse
- Mental Illness
- Incarceration
- AIDS stigma, homophobia, racism
- Sexually Transmitted Infections

# Healthcare Access for the 1 Million Americans Living with HIV



# Federal AIDS Funding in Illinois



Amounts in millions  
Kaiser, Statehealthfacts.org, FFY 04

# Federal HIV/AIDS Funding for Illinois

## Health Resources & Services Admin (HRSA):

- \$74.5 million** total granted to Chicago and IL Depts of Public Health, community clinics, and universities for healthcare and supportive services
- CARE Act must be “payor of last resort”

## CDC:

- \$23.2 million** total Chicago and IL Depts of Public Health
- Funds HIV prevention services and surveillance

## HUD:

- \$9.9 million** total to Chicago and IL Depts of Public Health through the Housing Opportunities for People with AIDS (HOPWA) program
- Provides housing and support services

## Other:

- Mental Health & Substance Abuse: **\$3.1 million**
- Minority Health: **\$1.2 million**

*Note: Does not include Medicaid, Medicare, which account for 75% of federal HIV/AIDS spending*

# Illinois AIDS Drug Assistance Program

- **State GRF:** \$12.6 m  
(\$2.5 m new this year!)
- **Federal:** \$27.8 m
- **Total:** \$40.4 million

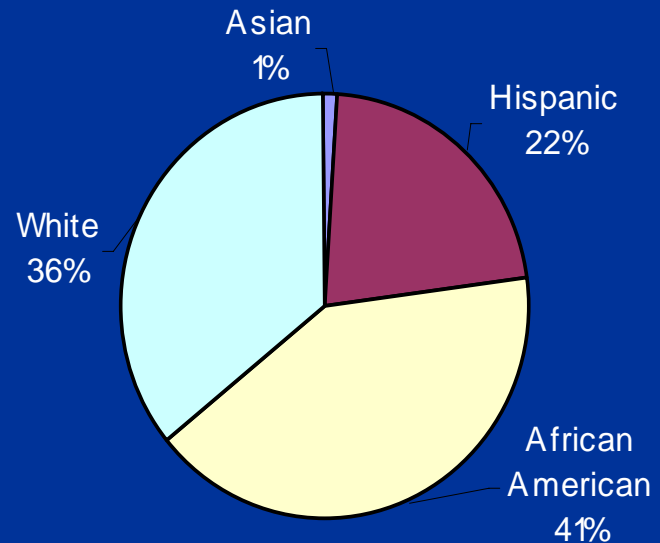
## **Services:**

- HIV/AIDS drugs and insurance premiums

## **Eligibility:**

- Income below \$39,200 (400% of poverty) and no or inadequate prescription drug coverage

**Race/Ethnicity of ADAP Clients**



*Recommendation:*

## **Expand Medicaid to Low-Income, Non-Disabled People with HIV**

- Illinois should pursue a federal 1115 waiver to expand coverage to HIV+ people *before* they become disabled
- More than 10,000 HIV+ Illinoisans are uninsured

*Recommendation:*

## **Protect the Essential Cook County Healthcare Safety Net**

- Cook County is the largest provider of HIV medical care in Illinois
- 80% of all Illinois HIV/AIDS cases have been reported in Cook County
- County gov provides approximately half of all publicly financed HIV/AIDS care in Cook
- Federal Medicaid cuts jeopardize the system of care in Cook County

*Recommendation:*

## **Invest in the AIDS Drug Assistance Program (ADAP)**

- ADAP helps keep HIV+ Illinoisans healthy and productive
- ADAP assists HIV+ Illinoisans without coverage or private resources to obtain life-saving HIV medications
- Jointly funded by the federal and state governments, ADAP is an essential part of the healthcare safety net
- Federal and state testing efforts will result in more people knowing their HIV+ status and needing ADAP

*Recommendation:*

## **Expand the Medicaid Buy-In Program**

- Illinois should help more disabled residents return to work by raising the income eligibility threshold for “Health Benefits for Works with Disabilities” from 200% FPL to 400% FPL

See [www.hbwdillinois.com](http://www.hbwdillinois.com)

*Recommendation:*

## **Expand Access to the State's High-Risk Pool Insurance Program**

- Illinois should institute reforms to make the Illinois Comprehensive Health Insurance Program more affordable and accessible:
  - Open enrollment
  - Decrease premiums, cost-sharing
  - Increase prescription drug coverage

*Recommendation:*

## **Help Small Businesses Afford Healthcare**

- Just one employee with a chronic condition like HIV can make healthcare unaffordable for a small business
- Without protections for small groups, employers are more likely to discriminate against people with HIV

*Recommendation:*

# **Adopt Science-Based HIV Prevention Strategies**

Illinois should expand:

- Comprehensive, Age-Appropriate Sexuality Education (SB 2267)
- Proven-effective needle exchange programs
- Condom distribution programs
- Family planning services
- Behavioral interventions for high-risk groups
- Social marketing to promote safer sex, HIV testing, and HIV care services
- HIV prevention and care services for prisoners and ex-prisoners
- Substance abuse treatment services
- Housing assistance for people with special needs

# More Information

[aidschicago.org](http://aidschicago.org)

[aidschicago.org/community](http://aidschicago.org/community)

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