

Illinois AIDS Drug Assistance Program (ADAP): State Action Needed to Prevent 2011 Public Health Crisis

The AIDS Drug Assistance Program (ADAP) provides HIV medications to low-income people with HIV or AIDS who cannot afford the costly treatments. ADAP addresses the most basic need shared by all people living with HIV: life-extending medications that slow the progression of HIV disease and keep them healthy.

ADAP enrollment is increasing dramatically, creating a fiscal crisis.

Average monthly enrollment increased 15% in 2009 and is on pace to grow 14-17% in 2010. An average 4,100 people per month will receive ADAP in 2010 at a cost of nearly \$4 million.

Additional state funding will be needed in FY 11. Illinois is projected to spend approximately \$19 million on ADAP in FY 10. To keep pace with new enrollment and meet the needs of current clients, the program will need approximately \$10 million or more in new funding in FY 11, for a total state contribution of \$29 million.

Without additional state funding in FY 11, over 500 people with HIV will be cut from the program; more will be put on a waiting list.

ADAP recipients have no other options for accessing medications.

ADAP cuts and waitlists interrupt or delay HIV treatment, causing deadly health risks for people with HIV. People with HIV need uninterrupted access to HIV medications, which must be taken daily to prevent the HIV virus from mutating. Interruptions or treatment delays are associated with an increased risk of disabling illnesses and premature death.

Inadequate government investment in HIV prevention only worsens the ADAP funding crisis. A commensurate investment in HIV prevention activities is the most effective means to slow the growth in ADAP. *Funding for HIV prevention programs must not be cut to maintain ADAP.*

Increasing ADAP enrollment is a symptom of the success of HIV testing efforts. An estimated 1 in 5 people in Illinois with HIV don't know they are infected. Intensive outreach efforts are encouraging testing and engaging newly diagnosed people in health care.

New state revenue is the only sustainable solution for ADAP and other vital programs. Illinois faces a \$13 billion deficit in FY 2011. House Bill 174 would enact fair tax increases that protect low-income earners. Without new state revenue to fill the gap in ADAP, over 500 people per month will be denied lifesaving AIDS medications.

The AIDS Drug Assistance Program keeps low-income people with HIV healthy and productive, so they can work and contribute.

HIV medications provided through ADAP slow the progression of HIV disease, delaying disability and death.

By keeping people with HIV healthy, ADAP keeps them off Medicaid, ultimately lowering state spending.

HIV medications can cost over \$1,000 per month. Even with insurance, many low-income workers can't afford their co-pays.

A strong ADAP program is good HIV prevention. People with HIV who are on treatment are less likely to transmit the virus to others.

ADAP fiscal crisis at a glance

\$28.90 m: Total federal FY 10 award

\$19.0 m: Projected state FY 10 spending

\$47.9 m: Total state + federal spending

Why are more people accessing ADAP?

- High unemployment
- Many low-wage jobs don't offer health insurance.
- People with HIV are living longer, thanks to medications.
- About 1,500 people are diagnosed with HIV in Illinois every year, and many qualify for ADAP.

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