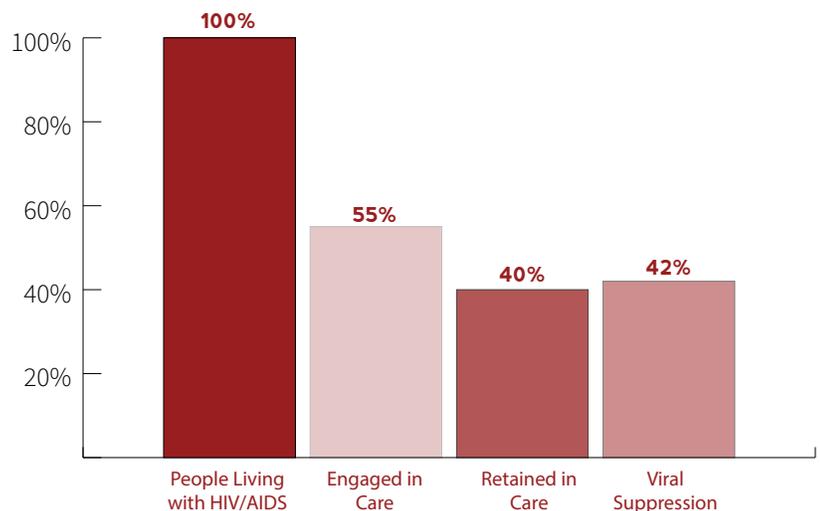


ILLINOIS HIV/AIDS POLICY PRIORITIES, 2015-16

The year 2015 ushers in significant changes in political leadership both in Illinois and at the national level. Illinois has a new Governor, Bruce Rauner. A Republican will be the state’s chief executive officer for the first time in 12 years. At the federal level, Republicans now control the House of Representatives and Senate.

In the midst of these changes, the AIDS Foundation of Chicago (AFC) is committed to continuing, creating and advocating for sound HIV policy. HIV cases are rising among gay men and other men who have sex with men (MSM) of all races, and especially among young gay men of color and transgender women. Women of color, people who use drugs, and people who live in poverty remain hard-hit by HIV. Structural barriers such as poverty, incarceration, homophobia and unemployment continue to impact vulnerable populations and interrupt the work needed to reduce new HIV infections and reach viral suppression for those living with HIV.

The **continuum of engagement in HIV care** is a framework for understanding the status of HIV care and treatment in Illinois and nationally. For policy and legislation to be truly effective, it must view change through this lens, with the ultimate goal of helping people with HIV achieve viral suppression. The evidence is nearly iron-clad that when people with HIV are successfully treated and the level of HIV in their bloodstream is suppressed, their risk of transmitting HIV to their partners declines by as much as 96%. Put another way, providing robust, sustained HIV treatment will prevent new HIV cases in the community.



from "Illinois HIV Care Continuum Update," Illinois Department of Public Health, December 2014

AFC’s policy priorities are a reflection of our mission and the needs of people impacted by or living with HIV. These policy and legislative recommendations identify needed change in areas where there continue to be proven unmet needs, specifically the HIV continuum of care.

AFC puts forth the following recommendations in these areas:

- Prevention and Services:** Protect and preserve vital HIV/AIDS prevention, education and treatment services
- Linkage to care and retention:** Promote and support policies that increase linkage to care and retention that improve the health of people living with HIV and reduce the number of new HIV infections
- Treatment and supportive services:** As linkage and retention to care become more important, we must improve or develop legislation and/or policies related to increasing treatment and supportive services so people in care can take full advantage of these services
- Structural barriers:** Because individual and structural barriers such as poverty, incarceration and unemployment can keep people from fully engaging in care, we must aim to remove them

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How we developed the 2015-16 Policy Priorities

During the summer and fall of 2014, AFC staff held 12 policy priority input sessions with nearly 150 people across Illinois. They included people living with HIV, health care and social service providers, advocates, youth and others. AFC then compiled these priorities, and advocates met in December 2014 to identify the most critical items to take action on. Although limited resources mean that we cannot address every issue, we believe this document represents a comprehensive agenda for improving HIV health outcomes. AFC is grateful for the input from participants. We also note that AFC will work on issues that are not included in this agenda if unforeseen opportunities emerge to impact the HIV epidemic.

Prevention and services

An estimated 43,500 Illinois residents are living with HIV. The number of new HIV cases continues to grow - the fastest among youth, and specifically among young African American and Latino gay men and other men who have sex with men (MSM).

In addition to the confirmed number of HIV diagnoses, many people live with HIV and are not aware of their status. The U.S. Centers for Disease Control and Prevention (CDC) estimates that 15.8% of the estimated 1.2 million people living with HIV in the U.S. do not know they are HIV-positive.^[1]

AFC calls on Illinois to protect critical funding for HIV prevention and care services. Reduced state revenue and other budget pressure means Governor Rauner has proposed dramatic cuts to the state budget, which will jeopardize HIV services. The state's last fiscal year saw \$26 million appropriated for HIV-related services, but Rauner proposed slashing HIV services in FY 16 to \$20 million, a nearly 25% reduction. State dollars help support Illinois's AIDS Drug Assistance Program (ADAP), which provides access to life-saving medications for individuals living with HIV. State HIV funding also supports community-based HIV care, housing and prevention services.

Additionally, AFC supports the use of state funds to educate, train and assist individuals to access pre-exposure prophylaxis (PrEP). PrEP involves an HIV-negative individual taking antiretroviral (ARV) medication, which reduces the risk of infection before HIV exposure and prevents HIV from reproducing in a person's body. PrEP and other new prevention technologies are an integral part of a comprehensive HIV prevention strategy, which AFC supports and intends to make a priority in Springfield.

Cutting prevention and treatment funding will result in more new HIV infections and increase health care costs for the state. AFC strongly supports funding for the **African American HIV/AIDS Response Fund**, which was unable to make grants in 2014 when the state legislature and gubernatorial administration failed to transfer money into the fund.

In 2015, AFC will oppose any state budget reductions in HIV funding and will continue to advocate for increased funding for vital HIV prevention and treatment services.

Maintain Current State Revenue

AFC has joined the Responsible Budget Coalition (RBC), which brings together diverse organizations that serve and represent millions of Illinois residents. This coalition is committed to building the support needed to solve Illinois' budget crisis, prevent harmful cuts to essential public services, save jobs, eliminate the state's long-term structural deficit and make taxes fairer. With the sunset of the Illinois temporary tax rate in early 2015, the personal tax rate dropped to 3.75% from 5%. This will result in a budget shortfall of approximately \$2 billion. Combined with the backlog of unpaid bills, the state's projected budget deficit for next fiscal year (FY16) is \$6 billion. Working together with the RBC and HIV/AIDS service providers and advocates, AFC is committed to ensuring the state's budget is not balanced on the backs of working families and the most vulnerable, including those living with HIV or AIDS.

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AFC will work to modernize the Illinois AIDS Confidentiality Act to promote expanded HIV testing.

Offering routine, voluntary HIV testing is a proven strategy to increase the number of people who are undiagnosed with HIV. Some hospitals have interpreted Illinois law in a way that creates cumbersome restrictions that limit their ability to provide routine screening and impede the efforts to make HIV testing and counseling an accessible, routine part of medical care. AFC will work with providers, hospitals, advocates and other stakeholders to amend the law to expand access to voluntary HIV testing.

Health care reform works for people with HIV!

AFC is devoted to the promotion and implementation of health care reform policies that improve access to care for people vulnerable to HIV. AFC will continue to provide education for stakeholders, consumers and health care providers on the impact of new health care laws and policies, while advocating for policies that provide people living with HIV comprehensive health care coverage.

Through the HIVHealthReform.org campaign, AFC and lead partners Project Inform and Treatment Access Expansion Project/Harvard Law School Center for Health Law and Policy Innovation (TAEP) will continue to educate the HIV community about the Affordable Care Act (ACA) and help mobilize communities to take action and create change. HIVHealthReform.org is a one-stop hub for all information related to the ACA and how it can improve health care access for people living with HIV.

Linkage to Care and Retention

Improving the health of people with HIV and reducing the number of new HIV infections in Illinois will require increased access to HIV medical care and the elimination of barriers that impact the ability of individuals to remain in care. To advance these goals, AFC supports the following initiatives:

Promote passage of legislation that caps copayments on specialty-tier medication and remove barriers to lifesaving medication in Illinois. AFC, in partnership with a variety of chronic disease advocacy groups, has launched the Cap the Copay campaign, which seeks to remove barriers to critical medications for people with chronic illness in Illinois due to skyrocketing out-of-pocket costs.

Health insurance companies have increased copayments for many medicines by adding a “specialty tier,” a fourth category of medication. Medications on this specialty tier are needed for life-threatening or debilitating diseases but can cost a patient between 20% and 50% of the drug’s total cost each month. This causes people living with chronic illnesses like HIV, cancer, arthritis, blood disease, epilepsy and others to pay hundreds or thousands of dollars a month to get their medications. AFC supports legislation that would limit out-of-pocket costs for specialty medications to a few hundred dollars a month.

AFC will focus attention on HIV care outcomes in Medicaid and private insurance. Research indicates that health outcomes improve for people with HIV when they receive care from providers who have expertise in HIV care. However, it is challenging for health plan members to find qualified providers, who are often primary care providers, who focus on HIV. AFC will pursue legislation requiring health insurance plans to create a provider category that highlights qualified HIV providers. AFC will also work on legislation that will require the Medicaid program to report on the quality of HIV care provided.

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AFC will champion legislation to secure state funding to continue Illinois' health insurance enrollment program. In 2014, Illinois failed to pass legislation establishing a state-run health insurance marketplace. As a result, federal funding for the state's In-Person Counselor (IPC) health insurance enrollment program may be significantly reduced or even eliminated.

Approximately 1,500 people across Illinois have completed rigorous federal and state certification to enroll consumers in ACA marketplace and Medicaid coverage. These assistors have served tens of thousands of Illinoisans, including people living with HIV, helping them understand and enroll in their health care coverage options. Given the rapidly shifting landscape of health care, AFC recognizes the importance and supports the continuation of the assistor program.

AFC will fight to protect confidential health services for Medicaid and private insurance consumers.

Confidential care is a significant component for encouraging individuals to seek health care services and remain linked into care, particularly for those living with stigmatized illnesses like HIV. Thus, we will promote legislation prohibiting Medicaid managed care organizations and private insurers from issuing explanations of benefits for confidential services such as HIV or STI treatment. This issue is particularly important for youth, who can now stay on their parent's insurance until age 26.

Come to Advocacy Days 2015 in Springfield! In 2014, over 170 HIV advocates from across the state took part in HIV/AIDS advocacy days. They contacted over 100 legislators and helped increase HIV/AIDS funding in the state by \$1 million. And we'll be doing it again this year on Wednesday, April 15 and Wednesday, May 13.

Visit aidschicago.org/advocacydays to register.

Treatment and supportive services

In 2015, AFC will focus on prevention, engagement and care for key affected populations in the epidemic, such as men of color who are gay or MSM, women of color, transgender women, people living with mental illness and substance use issues, and justice-involved individuals.

AFC will oppose any further cuts to the Medicaid program. Illinois is in a unique transformative phase in its health care delivery system for Medicaid. The state is in the first year of full-scale implementation of statewide Medicaid managed care for more than 50% of the Medicaid population. In 2012, the state passed legislation reducing Illinois' Medicaid program budget by \$2.7 billion, or 20%. Many of these cuts were reversed in 2014 by the legislature and governor because they had unintended, negative consequences. As an organization that cares deeply about health care access for vulnerable populations, particularly those living with HIV, AFC believes that Illinois can find ways to ensure the efficient and effective operation of the Medicaid program without further funding cuts in the program.

AFC urges Illinois to adopt "Health Homes" in its Medicaid program. In late 2014, the Illinois Department of Healthcare and Family Services (HFS) released a concept paper detailing how Medicaid Health Homes could be implemented in Illinois. Health Homes are authorized under the ACA to provide care coordination to people

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with two or more chronic diseases, or one chronic disease and increased vulnerability for another one. If adopted, Illinois would receive additional federal funding for two years after implementing Health Homes for interventions such as intensive care coordination. We strongly urge Illinois to adopt Medicaid Health Homes and explicitly name HIV as a covered condition.

AFC calls for increased transparency in the Illinois Medicaid managed care system. In 2011, Illinois passed a law mandating that at least 50% of Medicaid clients be moved into managed care by January 2015. AFC recognizes the crucial role that entities providing coordinated care have on improving the health outcomes and adherence to HIV treatment of people living with HIV. However, given such a massive transformation in this critical health care delivery system, we believe it is important to embed layers of accountability into the program. AFC and its coalition partners call for passage of legislation requiring the state to publish enrollment numbers for Medicaid recipients into care coordination programs and other data associated with health care reform implementation.

AFC calls on Illinois to modernize the current Medicaid eligibility and renewal/redetermination process. In 2012, Illinois implemented legislation that aimed to remove ineligible people from the Medicaid rolls. In the process, the state incorrectly cut off tens of thousands of people who in fact belonged in the program. The new Medicaid eligibility redetermination process is inefficient, burdensome and costly. The problematic process has resulted in unnecessary and erroneous denials of coverage, forcing community-based organizations such as AFC to research, advocate for and rectify these mistakes in Medicaid client's eligibility status. AFC opposes efforts to implement further Medicaid redetermination restrictions.

AFC will oppose state funding cuts to mental health and substance programs and services. The convergence of HIV, substance use and mental illness represents a distinct challenge if our goal is to support persons living with HIV to fully take advantage of the services offered in the HIV continuum of care. Research demonstrates that persons living with HIV have dramatically elevated rates of mental illness and substance abuse. Thus AFC will advocate for adequate funding for mental health and substance use services.

AFC supports efforts to increase access to housing for people with HIV and chronic diseases. The first step to improved health is a roof over your head. Stable housing allows people living with HIV, chronic diseases and behavioral health needs to access comprehensive health care and address their medical needs. AFC will oppose any reductions in housing funding in the state and federal budgets and fight for continued funding of supportive housing, rental subsidies and other housing programs. AFC will work with supportive housing and behavioral health advocates to secure Medicaid funding for housing services, including case management provided to housing program participants, and promote flexibility for Medicaid managed care plans to invest in housing for their members.

AFC continues to support HIV services for people in prison and jail and those re-entering society. Good prison health is essential to good community health. Although incarceration is devastating for individuals and communities, people behind bars have a unique opportunity to receive voluntary HIV testing, learn their status and be linked to care if needed. Programs such as the Community Reentry Project (of which AFC and many organizations across Illinois are a part) support HIV-positive people returning to the community from prison or jail. The program provides housing, intensive case management, linkage to care and treatment and other supportive services. Over half of the general Illinois state corrections population returns to prison within one year. However, the Reentry Project has a stunningly low recidivism rate of merely 23%. AFC will work to maintain funding for this proven program in 2015.

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We also support implementing STI/HIV education and prevention programs in correctional settings, including the distribution of condoms. Adopting such a program will help stop the spread of HIV, Hepatitis C, and other STIs to other inmates.

Removing structural barriers to care

Due to social disparities and individual and structural barriers such as poverty, incarceration and unemployment, vulnerable people experience barriers to fully engaging in care. We must aim to reduce health disparities and remove barriers to care for the most vulnerable individuals and populations in our communities.

Nearly thirty years into the HIV/AIDS epidemic, HIV infections continue to increase among gay men and MSM in Illinois, especially among young men of color. As the epidemic continues to besiege communities of color and other affected populations, we must examine how racial, economic and social disparities impact access to treatment and supportive services so people in care can take full advantage of these services.

AFC advocates for access to employment and criminal justice reforms that will remove barriers in the HIV care continuum. Specifically, AFC supports legislation that would allow health care workers convicted of certain minor criminal offenses to work in health care facilities. In addition, AFC supports legislation that would reduce penalties for possessing small amounts of marijuana to a small fine.

AFC supports raising the Illinois minimum wage. In November 2014, nearly 66% of Illinois voters statewide supported a ballot referendum urging the Illinois General Assembly to raise the minimum wage from \$8.25 to \$10 an hour. Lifting the minimum wage will immediately help over 400,000 minimum wage workers in Illinois. AFC urges passage of this legislation, which would help lift many people living with HIV out of poverty and help many who are vulnerable to HIV.

AFC urges the Illinois General Assembly to pass legislation banning gay conversion therapy. With our lead partner, Equality Illinois, AFC will seek passage of a bill banning the ineffective and dangerous use of conversion therapy on gay and/or questioning youth. In 2015, at the national level, AFC will partner with the HIV Prevention Justice Alliance to address structural factors that lead to HIV infection, like criminal justice reforms, economic equality and stigma.

Federal issues

AFC continues to be deeply engaged in national HIV policy issues. In 2015, we pledge to:

- **Strengthen health care reform and fight efforts to scale it back.** The Affordable Care Act has demonstrated that it can improve health care access for people living with HIV or vulnerable to HIV. AFC opposes efforts by Congress to scale back the ACA. We urge the federal government to take strong steps to improve access to HIV treatment and medication to prevent HIV (such as PrEP) in the ACA, including requiring marketplace plans to cover all HIV medications that are widely accepted in treatment guidelines; taking prompt action against discriminatory practices that discourage people with HIV from enrolling in a plan; prohibiting high out-of-pocket costs for HIV medications that have no generic equivalent and are included in treatment guidelines; ban changes to medication coverage and cost after someone has enrolled in a plan; and make cost and coverage information for HIV medications easily accessible online.

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- **Advocate for increased federal funding for vital HIV prevention, care and housing services.** AFC will work to ensure that the annual federal budget and appropriations process results in funding levels that allow the U.S. to take advantage of scientific advances to end the HIV epidemic and that are responsive to the goals of the National HIV/AIDS Strategy, health care reform, and to the needs of vulnerable populations.
- **Support efforts to modernize the federal funding formula for AIDS housing.** The funding formula for the Housing Opportunities for People with AIDS (HOPWA) program has not been updated in over two decades. AFC supports proposals advanced by the Obama administration to update the distribution of funding to better reflect the modern epidemic. However, any revised formula should avoid sudden, destabilizing shifts in funding that could cause vulnerable people living with HIV to go without housing.
- **Educate policymakers on the impact of health care reform on the Ryan White HIV/AIDS Program.** AFC supports a timely reauthorization of the Ryan White HIV/AIDS Program, which provides a vital safety net for low-income people living with HIV who are uninsured or under-insured. AFC will work with local and national advocates to achieve a strong vision of the role of the Ryan White Program in completing coverage for people with HIV as health care reform continues to be fully implemented.

Join our community of activists. Go to aidschicago.org/advocate to sign up for our Online Action Bulletins and newsletters on health care reform, female condoms, and HIV justice!

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