Reduce HIV Funding Cuts by Adopting Proposed House Funding Level

The AIDS Foundation of Chicago remains opposed to any cut to state HIV program funding. However, if funding cuts are unavoidable, the General Assembly should adopt the proposed House funding level, $29.39 million, which is $2 million more than the amount proposed by the Senate and Governor.

Adopting the higher House funding level could allow the following:

- **Fewer cuts to lifesaving HIV medications:** IDPH plans to reduce eligibility for the AIDS Drug Assistance Program (ADAP) from 500% of poverty to 300%, denying medications to at least 100 people next year. Treatment costs for people denied medications could be $27,000 - $61,000 higher per year than someone treated early (1.5 to 3.7 times higher).

- **Fewer cuts to HIV prevention programs:** Over 1,100 people are diagnosed with HIV every year in Illinois. Every HIV infection prevented saves $300,000 in lifetime medical care costs. An HIV testing or risk reduction session costs the state just $82.

The higher House funding level could avert or reduce cuts to these cost-effective HIV medication, testing and prevention programs. In addition to restoring HIV funding, the General Assembly should:

- **Maintain separate HIV budget accounts to give IDPH direction on how to allocate funding:** The General Assembly should reject proposals to consolidate four HIV funding accounts into one, including Minority AIDS Prevention ($3.15 m), HIV/AIDS Hotline ($355,000), HIV and Corrections ($1.94 m), and HIV Medications, Services and Prevention ($25.4 m).

- **Improve HIV program coordination & focus on outcomes:** No matter how much funding IDPH receives for HIV programs, the agency must improve outcomes, ensure all funds reach populations at greatest risk of contracting HIV or of dropping out of care; and improve coordination of HIV programs within IDPH. The Center for Minority Health should continue to play a role in HIV funding decisions, in coordination with the IDPH HIV Section.

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AVERT THESE OR OTHER CUTS BY ADOPTING
THE PROPOSED HOUSE HIV FUNDING LEVEL OF $29.39 MILLION

Impact of proposed $3.5 million cut to HIV funding

The Illinois Governor’s Office and Senate proposed budget would cut HIV programs by $3.5 million or 11%. The impact of an 11% cut in HIV services would be severe, including:

- **More people infected with HIV**: Community-based agencies and health departments will provide **14,000 fewer HIV tests** and **28,000 fewer HIV prevention sessions** with high-risk clients. More than **150** individuals who might otherwise receive an HIV diagnosis and linkage to care will remain unaware of their status and at high risk of transmitting HIV to others.

- **280 people or more will be unable to access HIV medications for early intervention through the AIDS Drug Assistance Program (ADAP)**. HIV medications cost $12,500 per person per year, on average.

  Without access to early intervention services through ADAP, the annual cost of treatment can be as much as 3.7 times higher (up to $61,000 per year), mainly because of hospitalizations or health complications that could have been averted. The average lifetime cost of medical treatment for a person with HIV is over $300,000.

- **At least 318 people with HIV living in supportive housing units will become homeless** and lose intensive case management. They have complex, costly medical needs along with mental health or substance abuse problems, and if homeless, are likely to visit the hospital one-third more times and become sicker than their peers.

*These examples are based on the estimated cost of providing each service to an individual for a year. The examples assume that each service is reduced by $3.5 million. IDPH is likely to cut funding for multiple categories of service.*