

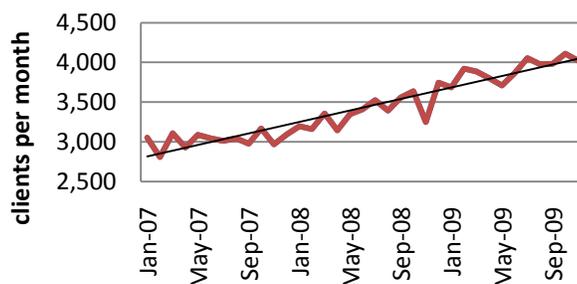
ILLINOIS AIDS DRUG ASSISTANCE PROGRAM (ADAP): BACKGROUND

Growing program enrollment is creating a fiscal crisis for the Illinois AIDS Drug Assistance Program (ADAP). *Preliminary estimates suggest that an additional \$10 million or more will be needed in FY 11 to keep the program operating.*

There are currently an estimated 44,000 individuals living with HIV/AIDS in Illinois, and an estimated 3,000 new infections occur in Illinois each year. Illinois ranks eighth in nation for the number of people living with AIDSⁱ, and the number of people who need ADAP services continues to grow as newly diagnosed people with HIV enter medical care.

Illinois has a comprehensive AIDS Drug Assistance Program. State leaders recognize that, without ADAP, many program recipients might forgo HIV treatments and become so sick as to qualify for Illinois' Medicaid program, resulting in dramatically increased costs to the state.

Illinois ADAP Monthly Use Grew 36%, Jan. 2007-Jan. 2010



Utilizationⁱⁱ, Cost and Funding

- The number of ADAP clients using services grew 15% in FY 2009. The number of ADAP clients is projected to grow 16% in FY 2010.
- Costs are increases at the same time utilization is increasing. The cost per client is estimated to grow 13% in FY 10, reversing several years of declines.
- ADAP spending in FY 10 is projected to be 25-30% higher than FY 09.

How is ADAP funded? The federal government provides ADAP funding through the Ryan White CARE Act, and the state provides general revenue funds from the Department of Public Health.

Why do more people with HIV need ADAP?

- **High unemployment.** Many people with HIV who were working and receiving health insurance from their employers lost their jobs because of the ongoing weak economy.

- **Many jobs don't offer health insurance.** Like two out of five Illinois workers, many working ADAP clients don't have employer-sponsored health insurance. In addition, many can't afford insurance if it is offered, or have inadequate prescription drug coverage.
- **Increasing enrollment is a symptom of the success of HIV testing efforts.** New state and federal initiatives have encouraged Illinoisans to be tested for HIV and enter medical care if they have HIV, leading to more people needing ADAP.
- **Thanks to medications provided through ADAP, people with HIV are living longer and needing the program for longer.** People with HIV can now live an average of 24 years after an HIV diagnosis.ⁱⁱⁱ

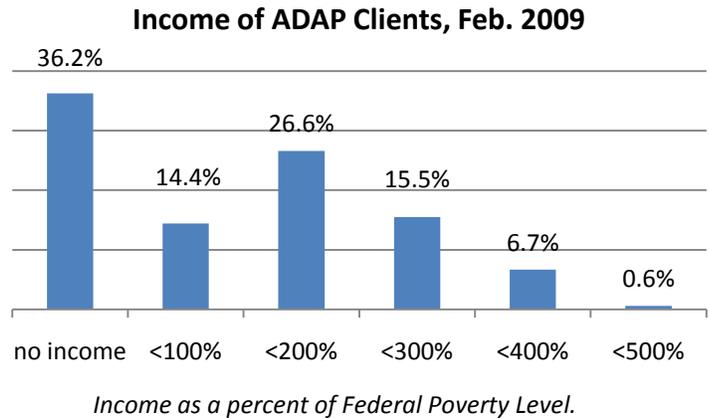
ADAP Spending, FFY09, FY 10-11 projected					
Federal FY	Federal Funding	Total State GRF	GRF increase over previous yr.	Total ADAP spending	% increase
FFY 2009	\$27.29	\$7.90		\$35.19	
FFY 2010*	\$28.90	\$19.00	\$11.10	\$47.90	36%
FFY 2011*	\$30.35	\$29.56	\$10.56	\$59.90	25%

**Projected. Amounts are in millions.*

- As of April 8, over 850 individuals were on waiting lists in ten states.^{iv} Illinois does not have a waiting list. Other states are also experiencing unprecedented growth in ADAP utilization.
- In December 2009, Illinois ADAP provided 4,220 clients with medications (the highest number ever). In July 2008, it was the seventh largest program in the nation.^v
- Illinois ADAP covers 95 medications. In July 2008, 21 states covered more medications than Illinois.

About ADAP Clients

- The majority of clients on ADAP are people of color. In 2008, 38% were African American, 26% Latino, and 30% white. 6% were of other or unknown races.^{vi}
- Most ADAP clients are men. 83% of ADAP clients in 2008 were men, and 17% women.
- The vast majority of ADAP clients are extremely low-income. In July 2008, half of clients had no income or earned less than 100% of poverty (under about \$11,000). An additional 26% made about \$11,000-\$22,000. Under one-quarter of ADAP clients reported annual income of about \$22,000-\$54,000, and just 7% of ADAP clients had incomes between 300-500% of poverty.^{vii}



Eligibility Each state operates its own ADAP and has authority to design its program and eligibility criteria. To qualify for ADAP services in Illinois a person must meet the following criteria:^{viii}

- Be diagnosed with HIV or AIDS.
- Qualify financially (income at or below 500% of FPL, or \$54,150 for a single person).
- Not be eligible for Medicaid or Medicare Part D with Extra Help or Illinois Cares Rx.
- Be a resident of Illinois (must show proof of residency).

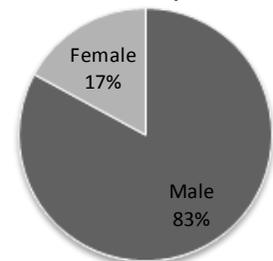
ADAP is the program of last resort for people living with HIV/AIDS. They must not have Medicare, Medicaid, or other means to pay for medication (with the exception of private insurance, as mentioned above).

To apply for ADAP, visit:

<http://www.idph.state.il.us/health/aids/adap.htm>.

For more information, contact John Peller, AIDS Foundation of Chicago, 312-334-0921 or jpeller@aidschicago.org. For sources, visit www.aidschicago.org.

ADAP Clients, Gender



ADAP Clients, Race

