

Submitted via email to [RyanWhiteComments@hrsa.gov](mailto:RyanWhiteComments@hrsa.gov), the Division of Policy and Data, HRSA, HIV/AIDS Bureau

DATE: December 10, 2025

TO: Division of Policy and Data, HRSA HIV/AIDS Bureau  
5600 Fishers Lane  
Rockville, MD 20857  
[RyanWhiteComments@hrsa.gov](mailto:RyanWhiteComments@hrsa.gov)

FROM: Omar Martinez Gonzalez  
Senior Manager, Policy & Advocacy  
AIDS Foundation Chicago  
200 W Monroe St, Suite 1150  
Chicago, IL 60606  
[Omartinezgonzalez@aidschicago.org](mailto:Omartinezgonzalez@aidschicago.org)

**RE: Comment on Proposed Rule Making for Improving Ryan White HIV/AIDS Program Part A and B Formula Awards Using Most Recent Address Data**

To Whom it May Concern:

AIDS Foundation Chicago, a nonprofit organization in Chicago, Illinois, mobilizes communities to create equity and justice for people living with and vulnerable to HIV or chronic conditions. We envision a world where people living with HIV or chronic conditions will thrive, and there will be no new cases of HIV. AFC receives Ryan White HIV/AIDS Program (RWHAP) Part A and B funding, and we appreciate the opportunity to comment on this important issue. We are respectfully writing to express our concerns about the proposed changes to the RWHAP funding formulas.

According to the Ryan White HIV/AIDS Program 2023 Annual Report, RWHAP served over half a million low-income people living with HIV, which accounts for over 50% of all people diagnosed with HIV in the United States.<sup>1</sup> In 2024, the Chicago Department of Public Health (CDPH) funded 20 community health partners through the RWHAP to provide more than 130,000 units of service to 19,143 people living with HIV. These services include lifesaving HIV care, treatment, and other support services that low-income individuals

---

<sup>1</sup> Health Resources and Services Administration. Ryan White HIV/AIDS Program Annual Data Report 2023. <https://ryanwhite.hrsa.gov/data/reports>. Published December 2024. (Updated June 2025)

would otherwise not be able to afford. In 2023, nearly 91% of RWHAP clients in the U.S. were virally suppressed, up from 70% in 2010. This not only increases the quality of life of people living with HIV, but it also improves overall public health and brings us closer to ending the HIV epidemic, since people with undetectable viral loads cannot transmit HIV to their sexual partners.<sup>2</sup>

Despite the success of the RWHAP, it has been critically and historically underfunded, particularly in recent appropriations cycles where Congress has failed to pass year-long appropriations legislation. Congress has relied on short- and long-term continuing resolutions to flat fund critical safety net programs, including HIV housing and health care programs like the Housing Opportunities for Persons with HIV/AIDS (HOPWA), RWHAP, CDC HIV Prevention and more. Whereas these programs are already underfunded and don't meet the real need for impacted communities, flat funding does not account for the rising cost of health care and housing due to inflation and thus represents a cut in services.

At the bequest of the Trump administration, Congress is considering the following funding and program cuts for Fiscal Year 2026:

- A cut of \$525.4 million from the Ryan White program, which represents the full elimination of Parts C, D, and F, despite the proven success of this program to help people living with HIV reach undetectable viral load status
- A cut of \$1.014 billion for the Division of HIV Prevention at Centers for Disease Control and Prevention (CDC), which represents a full elimination of HIV prevention services
- Flat funding the Housing Opportunities for Persons with HIV/AIDS (HOPWA) program at \$505 million, despite the skyrocketing cost of living and housing
- A cut of \$40 million from the Minority AIDS Fund, and a cut of \$119.3 million from the SAMHSA Minority AIDS funding, which represents full elimination of that funding meant to serve the people most disproportionately impacted by HIV
- Elimination of President Trump's flagship Ending the HIV Epidemic program across the various agencies that receive this funding, despite its proven success
- A cut of \$34.3 million from STD, TB and Opioid Related Infectious Diseases at CDC, despite skyrocketing STI cases, and the resurgence of mpox in recent months
- A cut of \$7.6 million from the Office of Infectious Disease and HIV/AIDS Policy
- A cut of \$456 million for the National Institutes of Health (NIH), which will adversely impact our ability to find an HIV cure and develop further biomedical interventions

---

<sup>2</sup> <https://www.cdc.gov/global-hiv-tb/php/our-approach/undetectable-untransmittable.html>

These proposed funding cuts, particularly the elimination of Ryan White Parts C, D, and F, and the elimination of HIV prevention at CDC, will lead to a loss of care and services for people living with and vulnerable to HIV, and we will see an increase in new HIV cases, leading to a greater strain on Ryan White Part A and B.

Furthermore, administrative changes to the Housing and Urban Development Continuum of Care (CoC) program to move away from permanent supportive housing to short-term housing support imperils our ability to keep people living with HIV stably housed. It will be unduly burdensome if not impossible for many local jurisdictions and states to maintain accurate data on current address for people living with HIV given the imminent destabilization of this population due to the change in the housing model. AFC has also been alerted to discrepancies in the way the CDC determines where people living with HIV reside for grant-making purposes and data from our Illinois Department of Public Health, which has led to undue funding loss to the state of Illinois for HIV prevention services. We are concerned that these discrepancies will create undue harm to our state through additional and erroneous loss of funding for RWHAP.

We must also consider the massive cuts to Medicaid enacted in H.R. 1. States will be adversely impacted as they receive less federal health care dollars, which will lead to necessary state spending cuts, including to public health and HIV-specific programs.<sup>3</sup> It will be impossible for states to fill the gaps created by the proposed formula change. Chicago, which receives RWHAP Part A funding, and the state of Illinois, which receives RWHAP Part B funding, will each lose about 7% and 8%, respectively, under the new formulas. This represents an estimated \$5 million loss of RWHAP funding. This is particularly troubling given that the Chicago Department of Public Health (CDPH) recently reported that between 2023 and 2024, Chicago saw an increase of 12.5% in the number of new HIV diagnoses.<sup>4</sup> A loss of RWHAP Part A and B funding would be detrimental to our community at this time. Even a five-year, hold-harmless provision would not be enough to mitigate the impact on Illinoisans if this funding formula change is enacted.

AFC recognizes the need to modernize our approach to funding HIV services to ensure equity, and we urge caution given the deeply unstable and unpredictable federal landscape which stands to harm the 1.2 million people living with HIV in the United States<sup>5</sup>, including an estimated 41,100 Illinoisans<sup>6</sup>, and which will lead to an increase in the number of people who will acquire HIV.

---

<sup>3</sup> <https://hfs.illinois.gov/info/fedresctr.html>

<sup>4</sup>

[view.citynews.chicago.gov/?qs=0352168f90b8820d827d91040d61cacb5b509243a3081d4afadf98170ac2bcfcfcb65a6872c1ed621b6154742710669ecef65cbdefc0fdee9ecd4f37f946ffa43e4e8b31f1034010eeeeaeae2ad927e](https://www.citynews.chicago.gov/?qs=0352168f90b8820d827d91040d61cacb5b509243a3081d4afadf98170ac2bcfcfcb65a6872c1ed621b6154742710669ecef65cbdefc0fdee9ecd4f37f946ffa43e4e8b31f1034010eeeeaeae2ad927e)

<sup>5</sup> <https://www.amfar.org/about-hiv-aids/hiv-aids-in-the-us/>

<sup>6</sup> [https://www.cdc.gov/hivpartners/media/pdfs/2025/06/cdc\\_hiv\\_o3pc\\_factsheet\\_illinois\\_2025-508.pdf](https://www.cdc.gov/hivpartners/media/pdfs/2025/06/cdc_hiv_o3pc_factsheet_illinois_2025-508.pdf)

Thank you for the opportunity to comment on this important issue. We urge careful consideration of the current federal landscape, particularly proposed federal funding cuts to HIV programs, and federal housing policy changes which will lead to an increase in unhoused people living with HIV, when considering changing the Ryan White Part A and B funding formulas to align with most recent address data.

Sincerely,

Omar Martinez Gonzalez  
Senior Manager, Policy & Advocacy  
AIDS Foundation Chicago  
200 W Monroe St, Suite 1150  
Chicago, IL 60606  
[Omartinezgonzalez@aidschicago.org](mailto:Omartinezgonzalez@aidschicago.org)