

May 16, 2008

Senator Harry Reid Senate Majority Leader 528 Hart Senate Office Building Washington, DC 20510-2803

Dear Senator Reid:

The HIV Health and Human Services Planning Council of New York is comprised of service providers, physicians, advocates, and people living with HIV/AIDS. Members of this group are well-versed in the complex and lifelong need for treatment and care services for individuals infected with and affected by the virus. On behalf of the Planning Council, I write to offer my strong support for placing a one-year moratorium on seven Administration-imposed Medicaid regulations that would make significant cuts to the Medicaid program over the next five years. This moratorium, introduced in the US House of Representatives as HR 5613 and passed on April 23, 2008, potentially has a substantial impact on the lives of people living with HIV/AIDS.

Planning Council members are deeply concerned about the impact that the regulations issued by the U.S. Department of Health and Human Services (HHS) would have on all Medicaid beneficiaries – including those with HIV/AIDS. Medicaid is the largest federal payer of HIV care and is estimated to provide access to care for more than 44% of people living with HIV/AIDS in the U.S. In New York State, an estimated 65% of all persons living with HIV rely on Medicaid for access to primary medical care.

The \$20 to \$49 billion in federal savings estimated to occur over five years as a result of implementing these regulations is alarming. Reductions of this size in federal support for the Medicaid program, particularly in light of state-level cuts that are occurring due to the economic downturn, would jeopardize access to lifesaving care for people living with HIV/AIDS across the country. In New York State alone, these proposed changes would result in a reduction of at least \$1.4 billion in federal Medicaid dollars in the first year and become worse in future years. New York remains the epicenter of the epidemic, and any reduction in funding will have a grave impact on the health and well-being of individuals and families living with HIV.

A number of the proposed policy changes would directly affect access to care for Medicaid beneficiaries with HIV/AIDS. Specifically, the restrictions on case management limit access to a critical benefit for people living with HIV/AIDS. Successful management of HIV disease requires coordination of a number of medical and non-medical interventions and studies document that case management improves health outcomes and saves money by facilitating access to these services. Additionally, outpatient clinics in academic medical centers across the country provide medical homes to many people living with HIV/AIDS who would otherwise be unable to benefit from expert HIV care in their communities. The proposals to restrict services

covered by hospital outpatient clinics and to eliminate graduate medical education payments will erode the resource base needed by these clinics to care for these patients and will disproportionately affect minority populations that rely more heavily on outpatient clinics for access to care.

The proposed moratorium is critical to allowing adequate time to fully evaluate each regulation's impact on Medicaid beneficiaries. We feel strongly that this process must take place before changes of this magnitude are made to our country's health care safety-net.

My fellow members of the Planning Council and I greatly appreciate your continued leadership in working to protect and strengthen the Medicaid program. We strongly urge you to place this one-year moratorium.

Sincerely,

Soraya Elcock

Community Co-Chair

oraya Eliock

cc:

Mitch McConnell Hillary Rodham Clinton

Charles E. Schumer