Opening Statement by Cong. Henry A. Waxman Hearing of the Subcommittee on Health Committee on Energy and Commerce "Reauthorizing the Ryan White CARE Act" April 27, 2006

Reauthorization of the Ryan White CARE Act is one of the most important actions this Subcommittee may be engaged in this year.

The programs funded by this Act have literally been life-savers for people who live with the HIV. It has provided critical support to cities which have been the center of the epidemic, and to States funding critical drug programs to treat the disease.

Yet it distresses me today that this hearing is so limited in the witnesses that are providing views to us today.

We know the Administration has proposed some principles that would result in dramatic changes in the Act, what it funds, and who gets support. Those principles are highly controversial. And yet we are hearing only their point of view.

We know the GAO has done a study looking at funding disparities under the Act, and there is much that is worthwhile to consider in their work. But they have provided only part of the picture. By looking only at some of the funding provided under the Act, but not considering the funds flowing under all the titles of the Act, they have provided a picture which is somewhat skewed and incomplete.

At this hearing today, we should have the benefit of the views of stakeholders in this process—States, localities, care givers, and people who are living with HIV and AIDS.

I hope as we move forward with reauthorization of this legislation, we will hear from these parties—on the record, and they will have an opportunity to examine the legislative proposals this Committee will vote on, and to inform our actions with their views.

I want to state clearly one more thing: in my view, the Ryan White Act has been an extremely effective and important piece of legislation. Throughout its history, it has been dealt with in a bipartisan manner and had broad bipartisan support. Changes that have been made have been made at the margin: adjusting the bill to deal with emerging problems and developments, but without disrupting the program that was working.

We all know this job has been made more difficult because we have not had an option throughout many of those years to add the necessary additional funds to the program. So when new epicenters of the disease have appeared, we have been forced to reallocate the limited pot of funds available, rather than add the critical new dollars that would are needed.

In my view, we have found ourselves in this position because this Administration and the Republican-controlled Congress have had the wrong fiscal priorities: starving our domestic discretionary programs while providing tax cuts to the well-off.

But given these constraints, if we are to reauthorize this program with continued broad support, we must approach the issues with full attention to the need to be sure that we don't wreck what is working. We need to be sure that we don't introduce greater inequities into the financing of the program, and shift dollars away from the epicenters of the disease.

In that regard, I want to speak specifically to the issue of California.

California was one of the earliest centers of the disease. It remains a state with more persons living with AIDS, and with HIV, than all but one other State, New York. It contains the second largest number of minorities with AIDS, reflecting that it has been subject to the same trends in the change of the face of the disease as all other areas of the country. It is one of the 5 States with the most cases *outside* of EMAs.

Yet somehow there is a perception that California gets too much money, that it doesn't have a problem that requires this level of funding anymore.

In fact, when one looks at the funding provided under all the titles of the Ryan White Act, California's payment per person with AIDS is actually under the national average.

I do not put that in the Record because I am only concerned about people in California. I understand and support helping people struggling with AIDS all over this country. But I cannot accept taking necessary funds away from people with AIDS simply because there is a mistaken impression that California's programs are overfunded. Nothing could be further from the truth.

Again, I want to be part of finding a fair solution to the issues raised in reauthorizing this bill. And I want to be sure that the solution we reach makes the program stronger and does not destroy it.