

Statement of Rep. Henry A. Waxman
H.R. 6143, "Ryan White HIV/AIDS Treatment Modernization Act of 2006"
September 28, 2006

I rise today to express my reluctant opposition to the Ryan White HIV/AIDS Treatment Modernization Act of 2006.

I was an author of the original legislation and have been a long-time supporter of it.

And I think it is a tragedy that we find ourselves in this situation here today.

The basis of the problem is that the population of those needing services has grown. But the funds for the Ryan White program have not grown with it.

This is a program that has been chronically underfunded over the years. And this track record has put us in a position of taking money from one deserving person needing care and giving it to another.

This should not be a choice this body of Congress should have to make here today.

I recognize that a failure to pass this legislation could put many states, like my own, that have been collecting HIV data by code, at a severe risk of a loss of funding.

Obviously this is a situation in which we do not want to find ourselves.

If we adopt this bill today, we are agreeing to a long term system that does not treat fairly states which must now begin to implement a new system for finding and reporting persons with HIV.

The bill favors states and cities that collected HIV data by name over those that collected it by code. And as a result, many areas of the country will see drastic losses of funding.

This is unfair. Until a strong recommendation by CDC in December 2005, areas were free to collect data using either codes or names. California, and many other states, opted for code so they could protect the individual's confidentiality. And they were on solid ground under the law in doing so.

But when CDC gave the word in 2005, almost all states began the process of converting their system to names. This process will take time. And this bill does not give areas enough of it. Under the bill these areas have only three years.

Large and diverse code-based states, like California, have to start from scratch converting their approximately 40,000 code-based cases of HIV to names. Under California law, these cases cannot simply be re-tallied under the new names-based system. The State has to contact each of these 40,000 individuals, and ask them to come in to a testing site to be re-tested. Some of these individuals are homeless. Some are drug-abusers. Many don't speak English. Given

that personnel and resources are already strained, California will simply not be able to get all of these individuals entered into the names-based system in three years.

So I cannot support legislation that would take critical dollars away from California simply because its data system is incomplete. We still have the same number of persons with HIV needing services. They should not lose needed services because of an unrealistic data requirement.

I would like to support this bill. I would support it if this problem could be addressed.

The Ryan White program has had a long history of broad bipartisan support. It did not pit interests of one area of country against another. It did not ask cities and states to give up critical funds to treat people in their areas. Ultimately we must find the will to direct the necessary dollars to this problem. The people who continue to suffer from this epidemic deserve no less.