



# The President's FY 2012 Budget and Implementation of the National HIV/AIDS Strategy

Having emerged from the worst recession in generations, the President has put forward a plan to rebuild our economy and win the future by out-innovating, out-educating, and out-building our global competitors and creating the jobs and industries of tomorrow. But we cannot rebuild our economy and win the future if we pass on a mountain of debt to our children and grandchildren. We must restore fiscal responsibility, and reform our government to make it more effective, efficient, and open to the American people. The President's 2012 Budget is a responsible approach that puts the nation on a path to live within our means so we can invest in our future—by cutting wasteful spending and making tough choices on some things we cannot afford, while keeping the investments we need to grow the economy and create jobs. It targets scarce federal resources to the areas critical to winning the future: education, innovation, clean energy, and infrastructure. And it proposes to reform how Washington does business, putting more federal funding up for competition, cutting waste, and reorganizing government so that it better serves the American people.

Even as we meet these challenges, other pressing issues must be addressed. In July 2010, President Obama fulfilled a pledge to the American people by releasing the nation's first comprehensive plan to fight the domestic HIV/AIDS epidemic. HIV remains a serious public health threat to the United States: More than 56,000 people become infected with HIV in the US each year and there are more than 1.1 million Americans living with HIV. Developed following a robust public input process with the engagement of community members, advocacy groups, scientists and Federal officials, the *National HIV/AIDS Strategy for the United States* is organized to achieve three key goals: reduce the number of new HIV infections, increase access to care for people living with HIV/AIDS, and reduce HIV-related health disparities.

In releasing the Strategy, the Administration also issued a *Federal Implementation Plan* outlining initial critical actions to be taken by Federal agencies in 2010 and 2011. The President also directed lead Federal agencies to develop plans for operationalizing their efforts to implement the strategy, improve coordination across agencies, and report on progress toward achieving key metrics. *Implementing the National HIV/AIDS Strategy: An Overview of Agency Operational Plans*, a report that describes critical steps being taken by the Federal government to achieve the goals of the Strategy, and the individual plans themselves, can be found at [www.AIDS.gov](http://www.AIDS.gov).

To address HIV/AIDS in the United States and implement the National HIV/AIDS Strategy, the Budget:

**Maintains the Strong Federal Commitment to Fighting HIV/AIDS in the United States.** Within a constrained budget environment, the Administration maintains or increases domestic HIV/AIDS funding for HHS, HUD, VA, and DOJ. The Budget includes increases in discretionary, domestic HIV/AIDS funding for HHS (+\$219 million) and VA (+\$173 million) above FY 2010, while maintaining HIV/AIDS funding levels for HUD and DOJ. In addition to programs with dedicated HIV funding, the Budget will support a government-wide response to the HIV epidemic that includes: the enforcement of civil rights laws by

the Department of Justice; the protection of workers from discrimination and the promotion of employment opportunities for people living with HIV by the Department of Labor and the Equal Employment Opportunity Commission (EEOC); the provision of health care to service members and their dependents by the Department of Defense; and the provision of income supports to workers with disabilities, retirees and their dependents through the Social Security Administration.

**Provides Strategic New Investments.** The Budget increases total Federal domestic discretionary HIV/AIDS funding by \$382 million through targeted increases for critical research, innovative HIV prevention activities and grant programs that support increased access to critical HIV health care services. The Budget:

- **Increases Funding for the Ryan White HIV/AIDS Program to Bolster the AIDS Drug Assistance Program (ADAP) and Increase Funding for Early Intervention and Primary Care Services Through the Part C Program.** The President's Budget will increase funding for the Ryan White HIV/AIDS Program by \$88 million over FY 2010, for a total funding level of \$2.4 billion. In response to the growing crisis of waiting lists for access to State ADAP programs, the Budget increases funding for AIDS drug assistance programs by \$80 million over FY 2010 (\$105 million above the FY 2010 enacted level, prior to the transfer of \$25 million in emergency funds), for a total request of \$940 million in FY 2012. Within this total, the Budget includes \$60 million for a supplemental grants program to assist State AIDS drug assistance programs that have waiting lists and/or have implemented restrictive cost-containment measures. Additionally, in recognition of the need to maintain access to critical early intervention and primary care services for people living with HIV/AIDS, the Budget proposes a \$5 million increase in funding for the Part C program over FY 2010.
- **Increases Funding for HIV Prevention Efforts at the Centers for Disease Control and Prevention (CDC).** The Budget will support critical investments in CDC to prevent new HIV infections. A total funding level of \$858 million represents an increase of \$58 million above 2010, of which \$30 million is allocated from the Prevention and Public Health Fund. The Budget also transfers \$40 million from the Chronic Disease Prevention and Health Promotion Program at CDC for school health programming to the National Center for HIV, STD, Viral Hepatitis and TB Prevention to achieve closer coordination of CDC's HIV and STD prevention programs.
- **Increases Funding for Cutting Edge HIV/AIDS Research.** The Budget includes an estimated \$2.7 billion for domestic NIH HIV/AIDS research, an increase of approximately \$70 million over FY 2010, to support research priorities that will establish the scientific foundation to achieve the goals of the President's National HIV/AIDS Strategy. Key prevention research includes vaccines and microbicides, as well as the use of treatment strategies as a method to prevent new infections. A critical new area of prevention research is the study of treatment strategies as a method to prevent new HIV infections. Examples of such strategies that NIH is currently investigating include: Pre-exposure prophylaxis (PrEP), the long-term use of treatment regimens for high-risk uninfected individuals to prevent HIV acquisition; and "Test and Treat," a study to determine whether a community-wide testing program with immediate treatment can decrease the overall rate of new HIV infections in that community.
- **Increases funding for HIV/AIDS Treatment, Care, and Prevention Services for our Nation's Veterans (VA).** The President's Budget includes \$950 million in FY 2012, an increase of +\$173 million above FY 2010 (+\$70 million above FY 2011 enacted) for the Department of Veterans

Affairs HIV/AIDS program. With this increase, VA will intensify HIV screening efforts for all veterans, expand HIV testing and educational efforts, and continue to provide improved access to comprehensive clinical care, including lifesaving HIV medications, and mental health services. These resources will help VA remain a leader among health care organizations in responding to the challenges posed by the HIV/AIDS epidemic and implementing the initiatives put forth in the National HIV/AIDS Strategy.

### **Re-Prioritizes Current Commitments to Achieve the Goals of the National HIV/AIDS Strategy.**

Through the Budget, the Administration is committed to ensuring that all Federal resources are reprioritized to have the maximum impact at lowering the number of new HIV infections in the US, increasing access to care for people living with HIV, and reducing HIV-related health disparities.

- **Authorizes the Secretary of HHS to Transfer 1% of HIV Program Funding to Support Innovative, Cross Agency Collaboration.** The Budget will transfer 1% of all HIV/AIDS program spending at HHS to the Office of the Secretary for new, collaborative efforts to achieve the goals of the National HIV/AIDS Strategy. This will establish a pool of approximately \$60 million, to be administered by the Assistant Secretary of Health, who will work with HHS operating divisions to identify and maximize opportunities for establishing new collaborative activities within communities most impacted by the HIV/AIDS epidemic.
- **Develops a New, More Effective Approach for Critical Minority HIV/AIDS Initiative (MAI) Funds.** Responding to the HIV epidemic in minority communities is a critical imperative for the US. This is done through all programs and agencies operating HIV programs, but is enhanced by dedicated funding provided through the Minority HIV/AIDS Initiative. To ensure that MAI grant funds (~\$54 million) are having the biggest impact at reducing the disproportionate impact of HIV in minority communities and are responsive to the highest risk populations identified in the National HIV/AIDS Strategy, the HHS Assistant Secretary for Health will centralize the administration of these funds and develop a strategic approach for using these funds to compliment other public and private efforts. Priority consideration will go to funding a small number of demonstration programs and previously evaluated and scientifically demonstrated high impact activities.
- **Shifts Prevention Resources from Low to High Impact Activities.** CDC will redirect approximately \$51 million from less effective and efficient programs to programs that are aligned with the goals of the Strategy. This will be achieved by placing greater emphasis on effective interventions for people living with HIV (including linkage and maintenance to medical care), adherence to antiretroviral treatment, and interventions to reduce transmission risk, placing greater emphasis on effective, community-level, structural, and single-session interventions and public health strategies. CDC will de-emphasize intensive individuals and small group interventions for at-risk populations that are difficult to take to scale.
- **Adopts New Funding Formulas to Allocate HIV Prevention and Housing Funds Based on HIV/AIDS Cases.** In FY 2012, HUD's Housing Opportunities for People with AIDS (HOPWA) program and CDC's HIV prevention health departments program plans to implement new funding algorithms based on living HIV/AIDS cases. During FY 2011, HUD will submit a legislative proposal to effect this change. CDC has already initiated this process through previous and ongoing open, transparent sessions that solicit stakeholder feedback about essential decision points. CDC anticipates implementing allocations based on the new funding formula will take

place over a three-year period (FY 2012-2014) to minimize disruption to grantee activities and to allow for planning. These adjustments are being made to ensure that Federal funding allocations are made using the most current and complete data available of incident and prevalent HIV/AIDS cases.

- **Expands Investments in a Program to Use the Highest Prevalence Jurisdictions as Models of Innovation.** HHS is focusing significant attention on using the 12 highest prevalence local jurisdictions responsible for 44% of living AIDS cases to test and evaluate new approaches to integrate planning, monitoring, and delivering HIV prevention and care services. This is anchored by the CDC's Enhanced Comprehensive HIV Prevention Planning (ECHPP) program. First funded with \$11.6 million of Prevention and Public Health Funds in FY 2010 and continued in FY 2011 at the same level of core health department funding (\$11.6 million), the Budget will maintain these investments with the core program in FY 2012 and increase program funding by \$10 million with funding from the Prevention and Public Health Fund for a total FY 2012 funding level of \$21.6 million.
- **Funds Evidence-Based Approaches to Integrating HIV Prevention and Care in Mental Health and Substance Abuse Programs.** The Budget includes \$178 million for SAMHSA to continue its support of evidence-based prevention interventions and behavioral health services and treatment for people at risk for or living with HIV/AIDS who have co-occurring mental and/or substance use disorders. SAMHSA will also continue to support the goals of the National HIV/AIDS Strategy through collaborations with other Federal agencies to 1) improve the coordination of behavioral health resources and services for racial and ethnic minorities at risk for or living with HIV/AIDS living in the 12 cities most impacted by HIV/AIDS; 2) develop a behavioral health and HIV/AIDS webpage and related materials that will be located on AIDS.Gov and disseminated through the use of social marketing; 3) assess HIV testing capacity and frequency in SAMHSA funded drug-treatment centers; 4) address the needs of people living with HIV/AIDS who are homeless; 5) address prejudice and discrimination related to HIV/AIDS; and 6) develop self-directed and wellness-centered approaches to behavioral health care for people living with HIV/AIDS.
- **Supports Housing Assistance for People Living with HIV/AIDS.** The Budget provides \$335 million for the Department of Housing and Urban Development's Housing Opportunities for Persons with AIDS program, which will continue to address the housing needs of persons with HIV/AIDS by providing tenant-based rental assistance, operating subsidies for permanent and transitional housing facilities, and homeless prevention activities.

**Total U.S. Government-wide HIV/AIDS Spending: \$28.3 billion**

**Total U.S. Government-wide Domestic HIV/AIDS Spending: \$21.4 billion**

**Total USG Domestic Discretionary HIV/AIDS Spending: \$7.7 billion**

**Total USG Domestic Mandatory HIV/AIDS Spending: \$13.7 billion**

**Total U.S. Government-wide Domestic and Global Discretionary HIV/AIDS Spending: \$14.6 billion**