
Presidential Advisory Council on **HIV/AIDS**



March 12, 2013

The Honorable Kathleen Sebelius
Secretary
Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Madame Secretary:

As chair of the Presidential Advisory Council on HIV and AIDS (PACHA), I am writing to request an expedited process for the timely release of guidance related to preparing people living with HIV and their care and service providers for implementation of the Affordable Care Act (ACA). This guidance, as well as accompanying technical assistance, is urgently needed for the HIV community to effectively integrate with ACA implementation.

As you know, the ACA holds enormous potential to increase access to care, treatment, and support services for individuals living with HIV and AIDS. Currently, nearly half of all individuals living with HIV and AIDS access services through the Ryan White Program, administered by the Health Resources and Services Administration's (HRSA) HIV/AIDS Bureau (HAB). Over more than two decades, the federal government has wisely invested billions of dollars in developing this program, and it has grown into a system of care that has become the model for many of the coordinated care initiatives now being offered through health care reform. Ryan White care and services have helped transform HIV/AIDS from a deadly disease to a chronic illness. Without adequate guidance from the Administration, however, we are in danger of not realizing the ACA's potential, losing the progress we've made, and failing to successfully integrate the Ryan White Program with health reforms, as the nation transitions to a new health care financing and delivery environment.

Since the ACA became law nearly three years ago, Ryan White grantees have received little guidance on transitioning to and integrating with the new health care financing environment. Many feel ill prepared for the 2014 health coverage expansion and are concerned their patients and clients could be left worse off and fall out of care next year. To ensure that patients and clients will remain in care, grantees need information on negotiating contracts with health plans (such as HAB provided in the 2000's for contracting with Medicaid managed care plans), setting up systems for billing in a fee-for-service or managed care environment, strengthening partnerships and networks of care between medical and non-medical providers, and on effective models for working with Federally Qualified Health Centers.

As you are aware, lack of guidance can have serious consequences. In California, for example, lack of guidance and planning has led to a chaotic transition, disrupted care, and left many people living with HIV disconnected from their providers and HIV treatment. Therefore, we urge you to expedite the development and release of HAB guidance for Ryan White grantees, and all other guidance developed for

the HIV community, to maximize the potential for successful integration of people living with HIV, their providers, and models of care into health reform.

All my best,

A handwritten signature in black ink, appearing to read "Nancy Mahon". The signature is fluid and cursive, with the first name being more prominent.

Nancy Mahon, JD
Chair

CC: Caya Lewis, Howard Koh, and Ron Valdiserri