

**President's Advisory Council on HIV/AIDS (PACHA)
Resolution on Implementation of the Affordable Care Act (ACA) in Ways that Meet the
National HIV/AIDS Strategy (NHAS) Goals**

Whereas current inequities in the health care system fuel HIV-related disparities and contribute to a public health crisis for people living with HIV in the U.S. as evidenced by nearly 30% being uninsured (versus 16% of the general population), and nearly 50% of people with HIV relying on Medicaid coverage, which is generally obtainable only after they become disabled;

Whereas recent studies have demonstrated that early access to care, treatment, and supportive services is important to ensuring treatment success, improving individual health outcomes, lowering the overall cost of treatment, and drastically reducing the risk of transmission;

Whereas the ACA provides critical opportunities to develop a health care system that will increase access to care, reduce HIV-related health disparities, and reduce new HIV infections;

Whereas the ACA also includes a number of optional state programs and initiatives which will improve the ability of Medicaid and other programs to meet the needs of low-income, underserved populations, including: the Medicaid Health Home program for beneficiaries with chronic conditions; providing preventive services in Medicaid without cost-sharing; and the Basic Health Program to reduce health coverage "churn;"

Whereas the Supreme Court's holding on the Medicaid expansion, as well as recent federal guidance and regulations, increase state flexibility and discretion across a range of implementation activities (including Medicaid expansion, design of the essential health benefits package, and the design and implementation of exchanges), and create the potential for continued HIV geographic disparities;

Whereas the ACA's potential to help achieve the NHAS goals and ultimately end the epidemic in this country is dependent on full and effective state and federal implementation of the ACA, as well as an ongoing robust commitment to the Ryan White Program to address ongoing care, treatment, services, affordability and covered population gaps; and

Whereas efforts to meet the retention in care and viral suppression goals of the HIV Care Cascade, as well to meet the NHAS goals, depend upon the federal government's support of a Ryan White Program that has the ability to address gaps in core health and support services (such as vision and dental care, transportation, case management, and housing services) as well as gaps in affordability (associated with insurance premium and co-payment obligations); therefore

Be it resolved, the PACHA recommends that the Secretary of Health and Human Services (HHS) exercise her broad discretion in implementing the ACA through federal regulations and guidance in ways that promote the goals of the NHAS, limit geographic disparities with regard to access to insurance and scope of benefits, and ensure access to HIV/AIDS prevention, care, and treatment that meet the HIV standard of care, specifically through the following ways:

- 1) Ensure that essential health benefits requirements for plans sold in individual and small group markets in 2014 as well as for packages available to newly eligible Medicaid beneficiaries guarantee access to the HIV standard of care, including unrestricted access to anti-retroviral medications, comprehensive mental health and substance abuse services, and unfettered access to specialists trained in HIV care and treatment;
- 2) Ensure that the ACA's non-discrimination requirements are defined and enforced in ways that explicitly prohibit plans from using utilization management techniques, service limits, and other discriminatory plan design options, such as high co-payments and cost-sharing, to limit coverage for people living with HIV and other complex conditions;
- 3) Ensure that exchange requirements for both state-run and federally facilitated exchanges include provider network adequacy standards that mandate inclusion of HIV medical providers, as well as robust consumer outreach and enrollment standards and Patient Navigator Program standards that leverage the expertise of community-based organizations experienced in outreach to vulnerable populations;
- 4) Ensure that states are aware of the ACA's optional programs and initiatives, including the Medicaid expansion, by providing guidance to states on implementation strategies as well as technical assistance to help states prepare their infrastructure and programs for the expansion; and
- 5) Ensure that adequate data is available to monitor and evaluate outcomes for people with HIV across third-party payers by encouraging states to require reporting on HIV-related quality measures.

Be it further resolved, the PACHA recommends that the Secretary of HHS appoint a senior level advisor within HHS, who reports directly to both the Secretary and the Administrator for the Centers for Medicare and Medicaid Services (CMS), to help coordinate HIV-related Medicaid expansion implementation efforts with HRSA and the CDC, to ensure that as the Medicaid expansion is implemented people living with HIV have uninterrupted access to care, treatment and qualified medical providers, and to oversee the transition of people living with HIV to Medicaid in 2014 and beyond.

Be it further resolved, the PACHA recommends that the Ryan White Program be maintained throughout the development and implementation of ACA reforms and then, once successful integration of HIV care, treatment and service models is achieved, re-tool the program to ensure it has the capacity to fill ongoing gaps in core health and support services as well as to address gaps in affordability.

Be it further resolved, the PACHA recommends that the Health Resources and Services Administration HIV/AIDS Bureau work collaboratively with CMS to provide technical assistance to Ryan White grantees and providers to help develop plans for transitioning and adapting to the new health care financing environment, to grow workforce capacity, and to ensure that information is available to Ryan White Program grantees to support Ryan White clients as they transition to health care coverage.