

Congress of the United States
Washington, DC 20515

March 24, 2008

The Honorable Michael Leavitt
Secretary
United States Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Dear Secretary Leavitt:

We are writing to urge you to suspend implementation of the Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) Policy Notice 99-02. This notice would establish a cumulative 24-month cutoff period for receipt of housing services under the Ryan White program, effective March 28, 2008. Given the critical role of safe and secure housing in ensuring adherence to treatment, it is important that we refrain from placing arbitrary caps on access to care.

Research has shown that homeless populations have higher HIV prevalence rates than the general population. The Centers for Disease Control and Prevention (CDC) notes that some studies indicate that the prevalence of HIV among homeless people is as high as 20%. According to the National AIDS Housing Coalition (NAHC), as many as 60% of people living with HIV have been homeless since being diagnosed. Several studies have also shown that those living with HIV are at increased risk of homelessness, due to factors like stigma or the rising cost of housing, particularly for low-income communities.

There is also clear evidence that housing is an essential contributor to improved health outcomes. NAHC has found that homeless HIV-positive individuals who received housing improved adherence to treatment regimens at rates six times higher than those that remained in unstable housing situations. Given the importance of antiretroviral therapy in improving the health and extending the lives of those living with HIV, as well as the possibility of increased resistance if treatment regimens are not followed, it is vitally important that we fund supportive services like housing that allow for better adherence.

In comments published in the Federal Register, HRSA noted that the rationale for implementing this rule was due to the restrictive funding limits established for supportive services as part of the recent reauthorization of Ryan White. It should be noted that the reauthorization did not call for any lifetime caps to be placed on housing services for individuals, and this was not the intent of Congress. Rather, the reauthorization limited spending on support services to 25% of the total award for states and localities, but also gave HRSA the flexibility to waive this requirement if grantees could demonstrate that the medical needs of people with HIV were being met. Implementing an onerous administrative rule in addition to these provisions is duplicative and unnecessary, creating additional hurdles for communities wishing to target the areas of greatest need among their populations living with HIV.

Implementation of this regulation will result in worsened health outcomes for people with HIV, and reduce the effectiveness of the core medical services that these individuals are receiving. In order to help Americans living with HIV respond fully to antiretroviral therapies, we would strongly urge you to halt implementation of any provision that would limit access to housing or other supportive services.

We look forward to your timely response to our letter.

Sincerely,

Chuck Scheuer

Hillary Rodham Clinton

Eliot L. Engel

No for

[Signature]

Gay K. Ackerman

Diana

Lynise M. Slaughter

Maum Wilf

[Signature]

Frederick Radler

Carolyn B. Maloney

James T. Walsh

Michael R. McCarthy

John P. King

Brian Higgins

John Hall

John Hall

John Hall

Shirley M. Loney

~~Gregory White~~

Joseph E. Seney

Carolyn McPartly

Michael Blum

Steve B...

Yvette D. Clarke

Nyau S. U...

Signatories from New York Delegation on 3/24/08 HRSA Ryan White Letter to Secretary Leavitt.

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