

November 16, 2011

Dear Senator,

We are pleased to share with you the attached new policy paper from the HIV Medicine Association (HIVMA) and the Ryan White Medical Providers Coalition (RWMPC) that outlines the essential components of the effective HIV care model that is the hallmark of the successful Ryan White Program.

The science now spotlights a clear path forward for turning the tide on the HIV epidemic. Effective HIV treatment not only saves the lives of people with HIV infection but also improves public health by dramatically reducing the risk of HIV transmission. Health care reform and the National HIV/AIDS Strategy offer an unprecedented opportunity to put science into practice by promoting earlier HIV diagnosis and expanding access to HIV care and treatment.

But our experience tells us that the complexity of HIV care and the challenges and stigma faced by the low income and minority populations disproportionately affected by HIV disease requires a comprehensive and coordinated approach to care. The HIV care model evolved to meet the medical needs of people with HIV so they could benefit from lifesaving care and treatment – which we now know is also critical to preventing the spread of HIV infection.

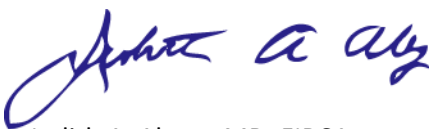
HIV care providers have been at the forefront of the “medical home” movement and key components of the model include access to an expert HIV medical provider who is at the center of the care team and who along with a care coordinator or case manager facilitates access to the range of specialty care and support services that many HIV patients need to meet their daily living needs so they can stay in care. Additional components include a quality improvement program, electronic health records, third-party payments that reflect the cost of care – particularly for Medicaid, and public health funding, such as through the Ryan White Program, to fill coverage and service gaps.

Details on the key components of HIV care can be found in the policy paper that we hope will inform important efforts to build HIV care capacity and sustain and expand the significant gains made against HIV infection. A failure to build on the HIV care model will heighten HIV disparities and increase the burden of HIV disease and the cost of HIV care. The paper also is available online from the journal, *Clinical Infectious Diseases*, at:

<http://cid.oxfordjournals.org/content/early/2011/10/20/cid.cir689.full%3E>

Thank you for your time and consideration of this issue. We welcome the opportunity to discuss the paper with you and can be reached through Andrea Weddle, Executive Director of HIVMA at aweddle@hivma.org or 703-299-0915 or Jenny Collier, Convener of the RWMPC at jennycollierjd@yahoo.com or 202-543-0353.

Sincerely,



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