COUNTY OF LOS ANGELES

Washington, D.C. Legislative Office

440 First Street, N.W., Suite 440 • Washington, D.C. 20001
(202) 393-2404 • Fax (202) 393-2666
http://lacounty.info

DAVID E. JANSSEN
Chief Administrative Officer

REGINALD N. TODD
Chief Legislative Representative

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The Honorable Dianne Feinstein
United States Senate
331 Hart Senate Office Building
Washington, DC DC20510

Dear Senator Feinstein:

On behalf of the Los Angeles County Board of Supervisors, I am writing to communicate the County's positions on reauthorization of the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act. The County, which operates the nation's second largest public health system and is the primary health care provider for more than two million uninsured residents, has an estimated 58,000 residents living with HIV/AIDS. CARE Act funding has been critically important for meeting the needs of persons living with HIV and AIDS in the County.

The County strongly supports an increase in annual funding levels for CARE Act programs commensurate with the ever growing number of persons living with HIV/AIDS and the cost of providing services to them. We also support changes to more equitably allocate funds based on need. In addition to taking into account the number of persons living with HIV and AIDS, the allocation formulas also should include factors such as poverty, the lack of health insurance, and co-morbidities such as substance abuse, sexually transmitted diseases, and mental illness, which affect the relative level of need for CARE Act-funded services among states and metropolitan areas. Jurisdictions also should not receive less CARE Act funding because they contribute significant local resources toward providing services to persons with HIV/AIDS services.

We oppose any proposal that would exclude the counting of persons living with HIV/AIDS in eligible metropolitan areas (EMAs) that receive Title I grants in determining the allocation of Title II funding to states. Nationally, more than 70% of all persons with AIDS live in Title I EMAs and 87% of all living AIDS cases are in states with EMAs. In California, 85% of all living AIDS cases are in EMAs. Moreover, according to the General Accounting Office (GAO), 16 of the 29 states with EMAs already receive less overall CARE Act funding per capita. Not counting persons with HIV/AIDS living in EMAs would inequitably redistribute even more funds from those states that have been the most affected by the AIDS epidemic to those that have been less affected.

The County also urges that the reauthorization bill provide states with sufficient time to convert their HIV reporting systems to an accurate and reliable name-based system before CARE Act funds are allocated using HIV data based on such a system. Both the Institutes for Medicine and

the GAO have estimated that it could take several years for an accurate and reliable name-based surveillance system to be implemented nationwide. The lack of an adequate transition period could mean the potential loss of hundreds of millions of dollars for California, nine other states, and Washington, D.C. that have not yet converted to a name-based reporting system, and that together account for about 23% of all living AIDS cases nationwide.

In addition, the County supports retaining provisions in current law that provide for local control and flexibility over the use of CARE Act funds and that maintain the current balance of the roles and responsibilities between the Federal, state, and local governments in planning processes. We, therefore, oppose language that would reduce local flexibility by requiring that a relatively high percentage of total funding be spent on core medical services. The relative need for medical care among persons with HIV/AIDS as well as the availability of non-CARE Act funding for such care varies between jurisdictions. Decisions on the use of CARE Act funds are best made at the local level and should not be prescribed in Federal statutes.

Finally, it is critical that we maintain systems that provide vital medical services for individuals living with HIV/AIDS, many of whom enter care at advanced stages of disease and, therefore, require costlier treatment. The epidemic has become increasingly devastating to women and communities of color throughout the country.

Los Angeles County looks forward to working with you and your staff to ensure the passage of a reauthorized Ryan White CARE Act that continues to provide access, equity, and a comprehensive set of life-saving and life-sustaining services for people living with HIV and AIDS.

Sincerely,

REGINALD N. TODD
Chief Legislative Representative