

The Devastating Impact of Sequestration on ADAP in the South: Sequestration Would Leave Thousands of People without Access to Life-saving Medications

Action Items:

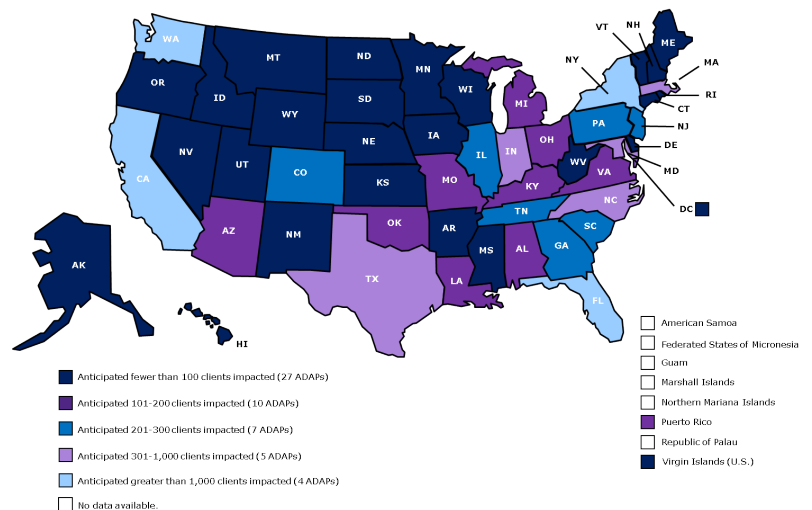
- Review your [state specific fact sheet](#) noting the potential impacts of sequestration on your state. Specifically note the projected impact on HIV testing as calculated by the White House.
- [Contact](#) your Member of Congress to discuss how the sequester will impact your state.

Sequestration, automatic across-the-board spending cuts, originally created in the Budget Control Act of 2011, is currently scheduled to take place on March 1. Sequestration will result in up to 15,000 clients losing access to life-saving medications they receive via the AIDS Drug Assistance Program (ADAP). Almost half of the people that will be disenrolled live in the South, which as of 2010 accounted for [45 percent of all new AIDS diagnoses in the U.S.](#)

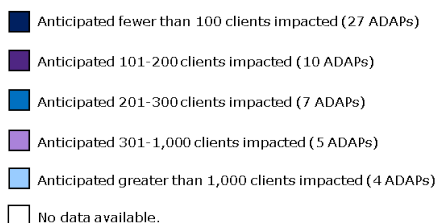
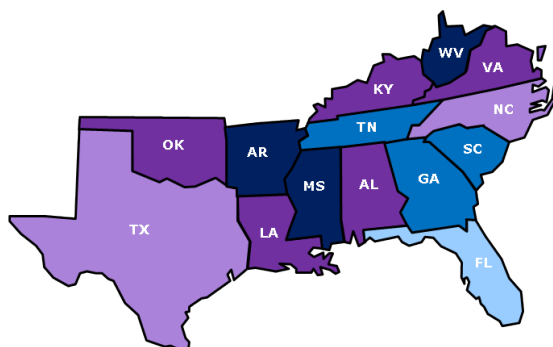
Removing people from treatment could mean an increase in new infections in the United States, particularly in the South and among people of color who are already disproportionately impacted by the HIV epidemic. Sequestration will have real effects on real people, but it will also have a direct impact on public health. HIV treatment is a crucial aspect of prevention, as [new research](#) indicates that people who are on antiretroviral therapy can reduce their risk of transmission to others by 96 percent. ADAP's role of providing drugs is important to optimizing care outcomes and preventing new infections, as illustrated in the HIV [prevention to care continuum](#). Among the services necessary to improve health outcomes are the need for linkage to, and retention in care, and access to medications that suppress viral load, reducing HIV transmission, and leading to fewer new HIV infections.

While sequestration will have an impact on all ADAPs, as illustrated above, it will have a significant impact on individuals living in the South. As of June 2012, southern states accounted for 33 percent of all ADAP clients served; through

State-by-state Impact of Sequestration on ADAP



Impact of Sequestration on ADAP in the South



sequestration, up to half of the clients that will lose ADAP services currently served by ADAP due to a lack of other funding sources to mitigate the effects of federal budget cuts. Moreover, to reduce the burden of this impact on people already on ADAP, states may be unable to accommodate any new clients and, therefore, forced to close enrollment and establish waiting lists for these new clients.

Underfunding the Ryan White system of care, particularly ADAP, will only serve to exacerbate existing structural challenges (e.g., disproportionate impact of HIV on communities of color, greater poverty, lack of employment and educational opportunities, and lack of access to vital prevention, care, and treatment services, etc.). These are also states that, for the most part, have been opposed to the Affordable Care Act's Medicaid expansion. If enacted, the expansion would provide coverage for the many people living with HIV in South who are currently uninsured.

For more details on what sequestration could mean, please refer to NASTAD's issue brief, [The Impact of Budget Sequestration on Federal Funding for State HIV/AIDS and Viral Hepatitis Programs in FY2013](#).