

Presentation to the Healthy Living / Health Services Committee Joint Commission on Health Care

August 12, 2009

"That'll be \$618,900, Please"

The remarks of VORA's Executive Directror, Sue Rowland, will refer to the two Fact Sheets that follow, produced by VORA for the 2009 General Assembly Session, and updated for this presentation.

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HIV is Preventable

19,537 Virginians were living with HIV as of March 31, 2008.¹ 20,593 March 31, 2009

2 in 3 are African American 1 in 4 are women or girls *1 in 3 live in the eastern region 1 in 12 live in the southwest region*

HIV is an expensive	<i>Lifetime Cost to Treat HIV - \$618,900²:</i>		
disease to treat	The costs of treating HIV are HIGHER when treatment begins late.		
The total cost of care for the Virginians living with HIV could be over \$11 Billion.	One recent study shows that when treatment begins late – when the person is unaware that they have HIV until their immune system collapses – the average monthly costs of treatment will be <u>more than double</u> the costs for a person infected who is diagnosed early. ³		
Yet with early diagnosis and	With early diagnosis and treatment, the average monthly cost over the lifetime is \$2,100, 75% of that cost being the medications that will provide an additional 24 years of life, on average.		
treatment, persons with HIV can remain contributing citizens.	Today, the benefits of treatment on improved daily function, and on decreasing the likelihood of passing on the virus, is significant and must be available to everyone with HIV.		
	The Virginian Living with HIV pays		
Who pays?	* Out-of-pocket for fees and co-pays, and for insurance premiums		
	You and I pay, too		
	* Higher private insurance premiums that compensate for the uninsured costs of some Virginians living with HIV		
	* Federal taxes to support treatment programs such as Medicare and Ryan White C.A.R.E. Act funding		
	* In Virginia, to a much lesser extent, state taxes that support Medicaid		
A better response – PREVENTION	Virginia's prevention programs are small, scattered, inconsistently available, and constantly struggling to maintain funding – even though the methods used to teach prevention are proven effective.		
	Please, learn about the HIV Prevention programs in your district. And please, support Virginia funding for HIV-Prevention programs.		

Our mission is to end HIV and AIDS in Virginia. Will you join us?

¹ VDH Office of Epidemiology – Division of Disease Prevention, Quarterly Surveillance Report, 1st Quarter 2008 & 2009 Tables 1, 2 and 3.

² Schackman, B. *Medical Care*, November 2006; vol 44: pp 990-997. News release, Weill Medical College of Cornell University. Bruce R. Schackman, PhD, chief, division of health policy, Weill Cornell Medical College. Posted on WebMD, 2006.

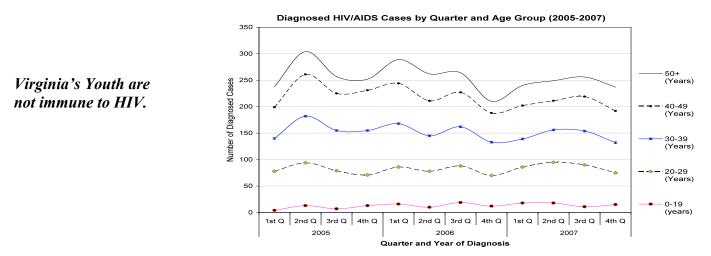


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The pink line at the bottom represents the Virginians 0-19 who were diagnosed with HIV/AIDS in each quarter between 2005 and 2007. That line is not dropping; the number of 0-19 year olds diagnosed with HIV/AIDS almost doubled between 2005 and 2007².

¥¥71 ¥7 .1	Contributing factors may include:		
Why are Youth Becoming Infected?	* Sex initiation at early age	* Substance Abuse	
	* Lack of Awareness	* Poverty	
	* Out-of-School Youth	* Having other STDs ³	
	Virginia's General Fund grants to support community-based HIV prevention		
Yet Virginia spends	\$200,000		
very little to stop the spread of HIV among	 State funds for prevention are not adequate and grant to community-based organizations have not been increased since 1989. To achieve that same level of work \$200,000 bought in 1988, today's appropriation should be \$360, 532.62⁴ 		
anyone, much less our youth.			
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² The number of persons diagnosed with HIV/AIDS will continue to increase, especially for the previous 12-18 months. This is due to reporting delays.

³ HIV/AIDS Among Youth, CC Fact Sheet, <u>http://www.cdc.gov/hiv/resources/Factsheets/youth.htm</u>, August 19, 2008.

⁴ S. Morgan Friedman webpage; http://www.westegg.com/inflation/infl.cgi, August 19, 2008.