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#### SCHUMER SECURES \$18.2 MILLION INCREASE FOR RYAN WHITE AIDS FUNDING IN NYC

Under pressure from Schumer's lobbying effort, HHS increased Title I funding for NYC today by 18% - from \$104 million in 2003 to \$122 million in 2004 - even as total funding nationwide went down

New funds can be used for prescription drugs, outpatient health care, home health and hospice care, nutrition services, and transportation services.

US Senator Charles E. Schumer today announced that in response to a concerted lobbying effort he helped lead, the US Department of Health and Human Services (HHS) has increased the funds for New York City under Title I of the Ryan White CARE Act even as the total amount of funds available nationwide went down. New York will receive an additional \$18.2 million in 2004 - \$122.1 million compared to \$103.9 million in 2003. This 18% increase - which New York City Mayor Michael R. Bloomberg also pushed hard for - will be used for outpatient health care, home health and hospice care, nutrition services, case management, and transportation services for persons with AIDS.

"As increasing numbers of people with HIV/AIDS live longer, the cost of their care and treatment places greater financial demands on their families and friends, as well as local governments and community-based organizations. The best way we can provide funding for badly needed HIV and AIDS services is through the Ryan White CARE Act, and this \$18 million - while less than what we asked for and far less than what we need - is a giant step forward," Schumer said.

After learning that the 2004 federal funding for Title I of the Ryan White CARE Act was not supposed to be any higher than the 2003 levels nationwide, Schumer helped organize the New York Congressional delegation to push for full funding for New York City. Together, they wrote to US Secretary of Health and Human Services Tommy Thompson in January asking him to provide all of the funds requested to the New York City Health Resources and Services Administration (HRSA). Mayor Bloomberg made a similar request.

In 2003, New York received only 17% of the nationwide Title I funding despite having almost 20% of all individuals living with AIDS in Title I-eligible cities and a much greater share than most jurisdictions of AIDS cases with co-morbidities, which make access to care particularly challenging. With today's funding, New York is receiving 21% of all of the 2004 nationwide Title I funds. And had Title I funding been distributed evenly in 2003, New York would have received \$116.3 million instead of \$103.9 million, a shortfall of almost \$13 million. The 2004 level secured by Schumer is \$5.8 million higher than the 2003 best-case scenario, even though the overall amount of funding available nationwide fell from \$599 million in 2003 to \$595 million in 2004.

New York City remains the epicenter of the HIV/AIDS epidemic nationally, with an estimated 80,000 New Yorkers diagnosed and known to be living with HIV or AIDS and at least an estimated 25,000 additional people living with HIV but not yet diagnosed. In 2001 alone the number of reported new AIDS cases was 5,174, which surpasses the total number of people living with AIDS in most US cities. New York also has a complex epidemic where people living with HIV and AIDS have a high percentage of co-morbidities (such as serious mental health problems, intravenous drug use, and other sexually transmitted diseases) and persons with AIDS who live in extreme poverty.

Title I of the Ryan White CARE Act provides grants to 51 eligible metropolitan areas around the country, including Puerto Rico, that are disproportionately affected by HIV/AIDS. To be eligible for Title I funding, these localities must have a minimum population of 500,000 people with at least 2,000 cumulative AIDS cases reported during the last five years. These funds are then administered by planning councils made up of local residents living with HIV/AIDS, social service providers, mental health and substance

abuse providers, public health agencies, hospitals, health care planning agencies, HIV prevention providers, and housing and homeless service providers. The planning councils serve to identify the needs within that community. The grants are used to provide various services to meet the needs of local residents living with HIV/AIDS, including, but not limited to, prescription drugs, outpatient health care, case management, home health and hospice care, nutrition services, and transportation services.

"When it comes to federal money for New York, we don't want special treatment from Washington, we just want fair treatment. Washington did the right thing by New York today, and that's good news for all of us," Schumer said.

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