

NASTAD

NATIONAL ALLIANCE OF STATE AND TERRITORIAL AIDS DIRECTORS

Ryan White CARE Act Issue Profile #2

A “Competitive” ADAP Set-Aside: Helping States to Address Persistent ADAP Limitations

In FY 1999, 20 state AIDS Drug Assistance Programs (ADAPs) reported at least one current and/or projected program limitation or budget shortfall due to resource limitations, according to the National ADAP Monitoring Project March 2000 report. Nine of these 20 ADAPs projected potential budget shortfalls totaling approximately \$9 million. Eleven ADAPs stopped enrolling new clients in FY 1999 to avoid running out of funds, resulting in client waiting lists.

The ADAPs with the most persistent resource limitations are largely in states that have less expansive Medicaid programs and/or in jurisdictions that rely solely on federal funding to provide HIV care services to the poor and uninsured. Many of these states are in the southeast (e.g., **Alabama, South Carolina**), a region that is experiencing the highest increases in new HIV infections in the U.S. Therefore, these ADAPs have a larger gap in HIV treatment access to fill with a less diverse pool of resources than is available in other states. It is critical that the availability of resources to these struggling ADAPs be increased so that poor and uninsured people living with HIV in these jurisdictions can obtain early access to new and effective, life-sustaining treatments.

Establishing a competitive component to distribute ADAP earmarked funds to programs in severe financial need is one way to address this persistent problem. This competitive component—or set-aside—should be targeted to those ADAPs most in need, including those that are forced to limit client enrollment, severely cap monthly per capita expenditures and/or those that cannot provide the basic recommended treatments for HIV/AIDS and its complications to potentially eligible clients. NASTAD estimates that a two percent set-aside of federal ADAP-dedicated funds will address the ADAP needs in states with the most persistent limitations without unduly burdening all jurisdictions that receive ADAP funding.

This NASTAD *Ryan White CARE Act Issue Profile* was produced through the support of a grant from The George Gund Foundation.