



January 12, 2024

The Honorable Patty Murray
Chair, Appropriations Committee
United State Senate

The Honorable Susan Collins
Vice Chair, Appropriations Committee
United States Senate

The Honorable Kay Granger
Chair, Appropriations Committee
United States House of Representatives

The Honorable Rosa DeLauro
Ranking Member, Appropriations Committee
United States House of Representatives

Dear Chairwoman Murray, Vice Chair Collins, Chairwoman Granger, and Ranking Member DeLauro,

The Partnership to End the HIV, STD, and Hepatitis Epidemics (“The Partnership”) is a coalition of five of the nation’s leading organizations focused on ending the HIV, STD, and hepatitis epidemics in the United States by sharing resources to advocate for HIV, STD, and hepatitis programs and appropriations. We are writing to express our grave concerns with the severe reduction in FY24 funding for critical public health programs which help prevent, treat, care and support those affected by these epidemics. Since our founding in 2016, we have worked to promote necessary appropriation and funding levels; retain crucial aspects of existing health care coverage and build upon the progress Federal programs have made on these programs over the last several decades.

We are particularly concerned about the potential consequences reduced funding will have on our collective efforts to combat the HIV, viral hepatitis, and sexually transmitted infection (STI) epidemics. These epidemics are inextricably linked and ending them is within our grasp, but will require a syndemic approach – a coordinated effort across federal, state, and local governments. Congress must make sustained investments in both the existing public health system and new initiatives to address this syndemic, close the coverage gap, and increase access to HIV Prevention (PrEP) and harm reduction.

We would like to highlight the importance of robust funding for the following programs, with specific emphasis on the Partnership’s requested funding levels for FY24:

HRSA: Ryan White Programs Total

- FY2024 House Proposed: \$2.333 billion
- FY2024 Senate Proposed: \$2.571 billion
- FY2024 The Partnership Request: \$3.058 billion (+\$487.3 million over FY2023)

CDC: HIV/AIDS, Viral Hepatitis, STD, TB Total

- FY2024 House Proposed: \$1.171 billion
- FY2024 Senate Proposed: \$1.395 billion
- FY2024 The Partnership Request: \$2.318 billion (+\$928.2 million over FY2023)

CDC Domestic HIV/AIDS Prevention and Research Total

- FY2024 House Proposed: \$793.7 million
- FY2024 Senate Proposed: \$1.017 billion
- FY2024 The Partnership Request: \$1.417 billion (+\$404 million over FY2023)

CDC STD Prevention Total

- FY2024 House Proposed: \$174.3 million
- FY2024 Senate Proposed: \$174.3 million
- FY2024 The Partnership Request: \$312.5 million (138.2 million over FY2023, and includes funding to avert the layoffs of more than 800 FTEs this year)

HIV Prevention: EHE Initiative (included in above total ask)

- FY2024 House Proposed: \$0.0 million
- FY2024 Senate Proposed: \$223 million
- FY2024 The Partnership Request: \$495 million (+\$275 million over FY2023)

Minority HIV/AIDS Fund

- FY2024 House Proposed: \$28 million
- FY2024 Senate Proposed: \$60 million
- FY2024 The Partnership Request: \$105 million (+\$48.1 million over FY2023)

HUD: HOPWA

- FY2024 House Proposed: \$505 million
- FY2024 Senate Proposed: \$505 million
- FY2024 The Partnership Request: \$600 million (+\$101.0 million over FY2023)

Community Health Centers: EHE Initiative

- FY2024 House Proposed: \$0.0 million
- FY2024 Senate Proposed: \$157.3 million
- FY2024 The Partnership Request: \$207.3 million (+\$50.0 million over FY2023)

Indian Health Services: EHE Initiative

- FY2024 House Proposed: \$5 million
- FY2024 Senate Proposed: \$5 million
- FY2024 The Partnership Request: \$52 million (+\$47.0 million over FY2023)

The Partnership is especially concerned by the significant loss of critical Disease Intervention Specialist workforce funding – more than 800 FTEs are expected to be laid off by January 2025 due to a \$400M rescission earlier this year in the Fiscal Responsibility Act. Without additional funding, these jurisdictions will lose PrEP navigators, as well as surveillance staff, disease intervention specialists, public health nurses, and public health educators working in HIV prevention. The rescission will impact STI prevention, viral hepatitis, tuberculosis, and drug user health programs, state laboratories, and outbreak response. A minimum of \$25 million in FY2024 is needed to avert layoffs, and the Partnership has included this request in the figures above.

These disparities between the House and Senate proposed levels highlight the need for careful consideration and collaboration to ensure the well-being of individuals affected by HIV, STIs, and Hepatitis. We appreciate your ongoing commitment to addressing the health needs of our nation. We would be grateful for the opportunity to discuss these concerns further and collaborate on solutions that prioritize adequate funding for these vital programs.

Thank you for your attention to this critical matter, and we look forward to working together to secure the necessary resources for our ongoing efforts.

Sincerely,



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