

April 14, 2021

Rep. Lisa Blunt Rochester (DE-AL)
1724 Longworth House Office Building
Washington, DC 20515

Re: Support for H.R. 2295, the HIV Epidemic Loan-Repayment Program (HELP) Act of 2021

Dear Congresswoman Blunt Rochester:

We, the undersigned organizations, write to express our strong appreciation for your leadership in addressing HIV workforce shortages by introducing H.R. 2295, the HIV Epidemic Loan-Repayment Program (HELP) Act. Our organizations represent HIV clinicians, dentists, clinical pharmacists, social service providers, public health professionals, advocates and people with HIV.

Remarkable advances in HIV treatment enable people to live near-normal lifespans when diagnosed early and provided with regular HIV care and treatment.^{i,ii} With access to HIV treatment and other services, people with HIV can maintain suppression of HIV to undetectable levels, keeping them healthy and stopping transmission to sexual partners.ⁱⁱⁱ Despite these advances, more than 38,000 people are newly diagnosed with HIV each year, and of the 1.1 million people living with HIV in the U.S.,^{iv,v} only 62% of adults with HIV had sustained viral suppression.^{vi} Disparities in HIV care and treatment are greatest among Black and Latinx Americans, who together represent 69% of new HIV diagnoses,^{vii} and in the Southern U.S., which accounts for 51% of new HIV diagnoses.^{viii}

People living with HIV managed by expert HIV clinicians have better outcomes, and yet, as more people need lifelong HIV care, the number of HIV clinicians entering the field falls well short of demand.^{ix,x} The HELP Act would incentivize and support qualified clinicians, clinical pharmacists and dentists to enter the HIV clinical and dental workforce by authorizing a new program that would offer up to \$250,000 in educational loan repayment to physicians, nurse practitioners, physician assistants, clinical pharmacists and dentists in exchange for up to five years of service at Ryan White-funded clinical sites and in health profession shortage areas. At this pivotal time, we have the tools to end HIV as an epidemic in the U.S. and a federal initiative and a plan to do so. The HELP Act is critical to reverse workforce shortages that are particularly acute in the Southern U.S and further exacerbated as a result of the COVID-19 pandemic.^{xi,xii}

Thank you for your steadfast commitment to improving the lives of people with HIV. We offer our strong support for the HELP Act to help ensure the availability of the HIV workforce necessary to eliminate barriers to HIV treatment and oral health care and to end HIV as an epidemic in the U.S.

Respectfully submitted on behalf of the undersigned organizations,¹

Advocates for Youth
African American Health Alliance
AIDS Action Baltimore

AIDS Alliance for Women, Infants, Children,
Youth & Families
AIDS Foundation Chicago
AIDS United

¹ Contact HIVMA Senior Policy & Advocacy Manager José Rodriguez at JRodriguez@hivma.org with questions regarding this organizational endorsement letter.

Alliance for Positive Change
 American Academy of HIV Medicine
 American Association of Public Health Dentistry
 American College of Clinical Pharmacy
 American Dental Association
 American Institute of Dental Public Health
 American Pharmacists Association
 American Public Health Association
 Aniz, Inc.
 APLA Health
 Association of Nurses in AIDS Care
 AVAC
 Bay Area Lawyers for Individual Freedom (BALIF)
 Bayard Rustin Liberation Initiative
 Bell Primary Care, LLC
 Beth Israel Deaconess Medical Center
 BiNet USA
 Black AIDS Institute
 Brigham and Women's Hospital
 CAEAR Coalition
 CARES of Southwest Michigan
 Cascade AIDS Project
 Catholics for Choice
 Center for Disability Rights
 Center for LGBTQ Economic Advancement & Research (CLEAR)
 CenterLink: The Community of LGBT Centers
 Collaboratory of AIDS Researchers for Eradication (CARE)
 CrescentCare
 Delaware HIV Consortium
 Elizabeth Glaser Pediatric AIDS Foundation
 Equality California
 Fast-Track Cities Institute
 Food & Friends
 Georgia AIDS Coalition
 Georgia Equality
 Georgians for a Healthy Future
 GLMA: Health Professionals Advancing LGBTQ Equality
 Grady Health System
 HealthHIV
 Hispanic Dental Association
 Hispanic Health Network
 HIV Dental Alliance
 HIV Medicine Association
 HIV+Hepatitis Policy Institute
 Hope House of St. Croix Valley
 Howard Brown Health
 Human Rights Campaign
 Infectious Diseases Society of America
 International Association of Providers of AIDS Care
 John Snow, Inc. (JSI)
 Latino Commission on AIDS
 Los Angeles LGBT Center
 Mazzoni Center
 MPact: Global Action for Gay Health & Rights
 Music City PrEP Clinic
 NASTAD
 National Black Gay Men's Advocacy Coalition
 National Center for Transgender Equality
 National Coalition of STD Directors
 National Dental Association
 National Equality Action Team (NEAT)
 National Working Positive Coalition
 NMAC
 North Carolina AIDS Action Network
 PFLAG National
 Physician Assistant Education Association
 Positive Impact Health Centers
 Positive Iowans Taking Charge
 Positive Women's Network-USA
 Rural AIDS Action Network
 Ryan White Medical Providers Coalition
 San Francisco AIDS Foundation
 Sero Project
 SisterLove, Inc.
 Society of Infectious Diseases Pharmacists
 The AIDS Institute
 The Well Project
 Treatment Action Group
 United States People Living with HIV Caucus
 Valley AIDS Council/Westbrook Clinic
 Vivent Health
 Whitman-Walker Institute

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- ^{vii} Kaiser Family Foundation. Black Americans and HIV. Feb. 7, 2020. Available at: <https://www.kff.org/hiv/aids/fact-sheet/black-americans-and-hiv-aids-the-basics/>.
- ^{viii} Centers for Disease Control and Prevention. HIV in the Southern United States. September 2019. Available at: <https://www.cdc.gov/hiv/pdf/policies/cdc-hiv-in-the-south-issue-brief.pdf>
- ^{ix} Rackal, JM, et al. Provider training and experience for people living with HIV/AIDS. *Cochrane Database Syst Rev*. 2011;15(6):CD003938.
- ^x Weiser J, Beer I, West B, et al. Qualifications, Demographics, Satisfaction, and Future Capacity of the HIV Care Provider Workforce in the United States, 2013–2014. *Clin Infect Dis*. 2016 Oct 1; 63(7): 966–975. doi: 10.1093/cid/ciw442.
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- ^{xii} U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. 2016. State-Level Projections of Supply and Demand for Primary Care Practitioners: 2013-2025. Rockville, Maryland. Available at: <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/primary-care-state-projections2013-2025.pdf>