

Assembly Joint Resolution No. 24

RESOLUTION CHAPTER 120

Assembly Joint Resolution No. 24—Relative to Ryan White CARE Act.

[Filed with Secretary of State September 12, 2005.]

LEGISLATIVE COUNSEL'S DIGEST

AJR 24, Calderon. Ryan White CARE Act reauthorization.

This measure would urge the Congress and the President of the United States to expeditiously reauthorize the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act.

WHEREAS, In California, as of January 1, 2005, more than 136,198 individuals have been infected with the expanding pandemic known as acquired immunodeficiency syndrome (AIDS) and more than 35,945 individuals have been infected with human immunodeficiency virus (HIV); and

WHEREAS, The State of California created an Office of AIDS within the State Department of Health Services to proactively address issues relating to the HIV and AIDS; and

WHEREAS, Pursuant to Section 100119 of the Health and Safety Code the Office of AIDS has lead responsibility for coordinating state programs, services, and activities relating to HIV and AIDS; and

WHEREAS, The mission of the Office of AIDS is to assess, prevent, and interrupt the transmission of HIV and provide for the needs of infected Californians by identifying the scope and extent of HIV infection and the needs which it creates, and disseminating timely and complete information; to assure high-quality preventive, early intervention, and care services that are appropriate, accessible, and cost effective; to promote the effective use of available resources through research, planning, coordination, and evaluation; and to provide leadership through a collaborative process of policy and program development, implementation, and evaluation; and

WHEREAS, This office directly administers the expenditure of federal and state funds to combat the disease; and

WHEREAS, For many, the progression from HIV to an AIDS diagnosis has slowed considerably as a result of these therapies; and

WHEREAS, It is estimated that more than 57,021 California residents are currently living with AIDS, 15 percent of the nationwide total of 405,926; and

WHEREAS, It is estimated by the Centers for Disease Control and Prevention that there are 40,000 new HIV infections annually in the United States; and

WHEREAS, Approximately one-third of Californians with HIV disease are unaware of their diagnosis and tens of thousands of individuals know they are HIV-positive but are not receiving care regularly; and

WHEREAS, The number of annual AIDS deaths in California dropped 51 percent between 1996 and 1997; however, between 1997 and 1998, deaths dropped by only 27 percent. The number of annual deaths among AIDS cases has declined each year since its 1994 peak. The number of deaths in 1997 was about one-half that of 1996, and since 1997 the number has remained in decline, except for 2001, though the rate of decline has decreased; and

WHEREAS, HIV/AIDS in California has a significant impact on communities of color, gay and bisexual men, and women, as well as low-income and other underserved communities; and

WHEREAS, In California, individuals diagnosed before the age of 29 years comprise 26 percent of cumulative HIV cases; and

WHEREAS, Increasingly, some individuals with HIV disease have also been diagnosed with substance abuse or mental illness; and

WHEREAS, Substance abuse is a factor in well over 50 percent of new HIV infections in some cities; and

WHEREAS, California looks to the federal government to assist the state in meeting the expanding health care and social service needs of people living with HIV disease; and

WHEREAS, The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act (42 U.S.C. Sec. 300ff et seq.) was first adopted by the Congress in 1990; and

WHEREAS, The Ryan White CARE Act was reauthorized in 1996, and again in 2000.

WHEREAS, The Ryan White CARE Act expires on September 30, 2005; and

WHEREAS, Since its inception, the Ryan White CARE Act has ensured the delivery of medical care and treatment as well as essential support services to tens of thousands of Californians including medical examinations, laboratory procedures and evaluations, drug therapy, dental care, case management, home health and hospice care, transportation, housing, legal assistance, benefits education and assistance, treatment education and adherence, nutrition therapy, and mental health and substance abuse counseling; and

WHEREAS, Under federal law, the services provided under the Ryan White CARE Act are for the provider of last resort; therefore, the act is recognized as a critical safety net program for low-income, uninsured, or underinsured individuals; and

WHEREAS, The federal budget for the 2005 fiscal year contains increased funding for the Ryan White CARE Act, a significant portion of which is dedicated to California; and

WHEREAS, Title I of the Ryan White CARE Act currently provides emergency assistance to the 51 United States metropolitan areas most

heavily impacted by the AIDS epidemic, of which nine are in California, the most in any state; and

WHEREAS, The Ryan White CARE Act has enabled local communities receiving Title I funding to tailor the delivery of services that best meet the needs of their residents who are affected by HIV/AIDS; and

WHEREAS, California receives funding under Title II of the Ryan White CARE Act for care and treatment and social services, a significant portion of which pays for life-extending and life-saving pharmaceuticals under California's AIDS Drug Assistance Program (ADAP); and

WHEREAS, Title III of the Ryan White CARE Act provides funding to public and private nonprofit entities for outpatient early intervention and primary care services; and

WHEREAS, Title IV of the Ryan White CARE Act has focused on women, children, youth, and families, and has increased access to medical care and support services for persons under 25 years of age living with HIV or AIDS; and

WHEREAS, The Ryan White CARE Act Dental Reimbursement Program (Title VI) reimburses eligible dental schools and postdoctoral dental education programs for the reported, uncompensated costs of oral health care to people living with HIV; and

WHEREAS, The goal of the Ryan White CARE Act Special Projects of National Significance (SPNS) Program (Title VI) is to advance knowledge about the care and treatment of persons living with HIV/AIDS by providing time-limited grants to assess models for delivering health and support services, and SPNS projects have supported the development of innovative service models for HIV care to provide health and social services to communities of color and hard-to-reach populations in California; and

WHEREAS, A network of 14 regional AIDS Education and Training Centers (AETCs), along with local performance sites, were funded under Title VI of the Ryan White CARE Act; and

WHEREAS, These AETCs train clinical health care providers, provide consultation and technical assistance, and disseminate ever-changing information to health care professionals on the effective management of HIV infection; now, therefore, be it

Resolved by the Assembly and the Senate of the State of California, jointly, That the Legislature affirms its support of the Ryan White CARE Act, and urges the Congress and the President of the United States to expeditiously reauthorize the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act in order to ensure that the expanding medical care and support service needs of individuals living with HIV disease are met; and be it further

Resolved, That the Chief Clerk of the Assembly transmit copies of this resolution to the President and Vice President of the United States, the Senate Majority and Minority Leaders, the Speaker of the House of Representatives, the House Minority Leader, the chairpersons and ranking minority members of the Senate Health, Education, Labor and Pensions,

Appropriations, and Budget Committees, to the chairpersons and ranking minority members of the House Commerce, Appropriations, and Budget Committees, and to each Senator and Representative from California in the Congress of the United States.

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