

Resolution 111-14 TITLE: Loss of State Funding for HIV Prevention and Public Health

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Reference Committee: A

WHEREAS, in Fiscal Year (FY) 2009/10, all California state General Funds for HIV prevention were eliminated as part of cutbacks during the recession financial crisis; and

WHEREAS, prior to that funding elimination, the state invested approximately \$32 million annually to supply approximately 80% of the funding channeled by the state Office of AIDS for HIV prevention at the state and local levels, the remaining being funds from the Centers for Disease Control and Prevention (CDC); and

WHEREAS, each year since that time until 2014, the state budget has continued to omit any general funds for HIV prevention, and federal funding has not been available to make up the deficiency; and

WHEREAS, in the current FY, 2014/15, less than 10% of the prior support (\$3M) was restored, to fund only 3-4 HIV Prevention Demonstration Projects; and

WHEREAS, since 2012 new nationally-recommended “Care Continuum” strategies have offered an opportunity to steadily reduce new HIV infections in California through suppression of viral load, which reduces infectiousness by at least 96%; but the lack of prevention funding has frustrated the implementation of universal testing, linkage to care, and treatment; and

WHEREAS, the state’s financial condition has greatly improved, and according to state controller John Chiang, a surplus of \$1.9 billion remained at the end of the last fiscal year, with an surplus for FY 2014-15 estimated at \$4.2 billion, of which the prior level of HIV funding would amount to only approximately 0.0076; and

WHEREAS, the prevention of new HIV cases would save the state large amounts of money for future care and treatment of Medi-Cal and other state beneficiaries, is consistent with longtime CMA policy, and would greatly benefit public health in California; and

WHEREAS, other important public health programs also lost state funding during the deficit years, which has not been restored, but details have not been publicly released and should be

available to CMA; particularly at a time when we face threats from Ebola and other emerging diseases; therefore be it

RESOLVED: That CMA support the restoration in future state budgets of general funds for HIV prevention to levels prior to Fiscal Year 2009, adjusted for inflation, population size, and changes in HIV incidence; and be it further

RESOLVED: That CMA work with the California Department of Public Health to determine, and report back for further deliberations, what important public health programs have lost all or substantial state funding since 2008 and have not been restored.