AIDS Treatment Activists Coalition (ATAC) -
SAVE ADAP Committee

FY 2004 ADAP Appropriations
Overview

Ryan White CARE Act

Title II (ADAP)

All figures are represented in millions of dollars

FY '03 FINAL	FY '04 President's Budget Request		FY '04 House Appropriations		FY '04 Senate Appropriations		FY '04 HIV/AIDS Need	
Dollars	Dollars	Difference from Previous FY	Dollars	Difference from Previous FY	Dollars	Difference from Previous FY	Dollars	Difference from Previous FY
$714.0	$739.0	+$25.0	$753.0	+$39.0	$739.0	+$25.0	**$997.0**	**+$283.0**

- ADAP has been under-funded for the past three fiscal years. Each year, AIDS policy experts requested moderate but critical increases to meet existing and anticipated needs, which Congress did not provide. In FY 03, Congress appropriated an increase of $ 75 million dollars, resulting in an $145 million budget shortfall for ADAP. When funding fails to keep pace with increased demands and delivery costs, the impact is the same as a reduction in funding.

- An average of 650 new clients seek out ADAP services each month. The approximate cost for combination therapy per person each year is $13,000. Although expensive, these costs are comparatively less than dollars that would be expended by the public health system to care for people living with HIV who become sick and require emergency room services, hospitalization, or rehabilitation and other social services.

- ADAPs continue to seek out innovative strategies for reducing the cost of delivering HIV medications to eligible clients, including participation in the federal 340B drug discount program, utilizing manufacturer rebate programs, and development of cost-saving alternatives such as insurance purchasing programs.

The Save ADAP Committee is a Working Group of the AIDS Treatment Activist Coalition (ATAC), a national coalition of AIDS treatment activists and policy advocates. Working in conjunction with ADAP clients and service providers on the grassroots level, Save ADAP aims to ensure adequate funding for the AIDS Drug Assistance Program.