



Combatting HIV, Hepatitis C, and the Opioid Epidemic in MA Requires \$35 M in FY 18 HIV/AIDS/HCV Line Item (4512-0103)

Project ABLE recommends funding for the HIV/AIDS/HCV Line Item (4512-0103) at \$35M in FY'18 to prevent new infections, improve health outcomes, and save money and lives. A \$2M increase will support:

- **Hepatitis C Prevention** – to reduce the spread of Hepatitis C by dedicating new funding to the expansion of vital syringe access services, where staff provide prevention, testing, and linkage to treatment.
- **HIV Prevention** – to get to zero new infections by funding HIV prevention and testing programs focused on those most vulnerable to infection, including dedicating new funds to pay for the state's new pre-exposure prophylaxis (PrEP) pilot programs.
- **HIV/AIDS Support Services** – to maintain essential support services that have a proven history of improving health outcomes and quality of life while reducing healthcare costs and the spread of the virus for the growing and aging population of people living with HIV.

Massachusetts has had tremendous success preventing new HIV infections and improving health outcomes for people living with HIV/AIDS. Investment in HIV/AIDS prevention and care saves lives and money. For every dollar spent, the state saves an estimated four dollars in near-term health care costs. Massachusetts has saved more than \$1.7 billion since 2000, while new HIV diagnoses have declined by 47%.

Massachusetts has more tools and opportunities than ever before to continue this progress, such as Pre-Exposure Prophylaxis to prevent new HIV infections, a cure for Hepatitis C (HCV) to dramatically improve health outcomes, and syringe access to engage injection drug users in care and reduce transmission of infectious disease.

Investment in the HIV/AIDS/HCV Line Item is working, yet without adequate funding, our public health infrastructure would crumble and much of this progress would be lost. Significant health disparities continue to exist in Massachusetts. Black residents are ten times more likely to have a HIV diagnosis and Latino residents are seven times more likely, compared to White residents. Eighty percent of HIV positive women in the Commonwealth are Black, Latino, or another racial/ethnic minority, and half of these women are non-US born.

The Opioid Epidemic also presents a significant threat to the progress we have made. While HIV infections attributed to injection drug use have dropped by 92% in Massachusetts in the past ten years, injection drug use still accounted for 7% of new HIV infections between 2011 and 2013 and it is likely this number will continue to rise. Rates of Hepatitis C (HCV) infection are also record high; between 2007 and 2014, confirmed HCV diagnoses increased by 117%. As many as 2,000,000 people are living with HCV in Massachusetts, and thousands more are unaware they are infected.

The Governor's FY'18 budget recommended a reduction in funding of \$4.8 million to the HIV/AIDS/HCV Line Item, which would devastate the Commonwealth's current initiatives around prevention and care.

Please support an increase of \$2 M to the line item (4512-0103) for a total of \$35 M. Getting to ZERO infections in Massachusetts is possible with investment in programs that work!

For more information, contact HIVProjectABLE@aol.com or 617-797-848 Website: <http://projectablema.org/>

Data source: Massachusetts Department of Public Health

2-1-17