

## **Additional Information Regarding New Funds for Ryan White Program**

Governor Strickland announced today that Ohio will be using a portion of the extended enhanced *Federal Medical Assistance Percentages* (FMAP) funding for three programs, including eliminating the \$12.8 million shortfall in the Ryan White program.

These FMAP funds will allow life-saving medications to be provided to needy Ohioans with HIV/AIDS by eliminating the current funding shortfall in the Ryan White Part B/OHDAP program.

In July, Ohio received \$372,000 in federal supplemental funding for the program. In August, Ohio received \$1.2 million in additional funding from the federal Health Resources and Services Administration to provide services and medications to those on the waiting list.

Additional background information:

On July 1, 2010, several cost containment measures were announced to begin to address the SFY 2010 funding shortfall caused by funding decreases, increases in drug and other program costs and increased enrollment. These measures included limiting eligibility to those with income at and below 300 percent of the federal poverty level, or \$32,490 for one person; and reducing the drug formulary to include only those medications that are most important to treat HIV and AIDS. These cost containment measures will save about \$5 million.

Also on July 1st, the program started the OHDAP Waiting List. As of August 27, 2010 156 people were on the list. While the \$12.8 million in FMAP funding will prevent additional cuts to current OHDAP clients during SFY 2011, these particular funds will not have an impact on the waiting list.

Ryan White FAQs:

### **Q: Will medical eligibility be implemented?**

A: Not at this time. We are going to take our time to determine what's best to ensure the future stability of the program. Whatever we do, we will continue to have as our highest priority to maintain services for the poorest and sickest in the program. We will make every effort to be informed by our stakeholders and to communicate in an accurate and timely manner. Over the next few months, ODH will explore possible changes to the rules that would allow us to consider medical criteria to prioritize who from the OHDAP Waiting List would be enrolled first into the program, as resources allow.

### **Q: Do you expect to make more cuts?**

A: We are fortunate that FMAP was extended giving us the resources to stabilize the program this year.

### **Q: Will the waiting list be eliminated?**

A: No. We were also fortunate to receive \$1.2 million from the federal government to address those on the waiting list, as of July 8. While it is not enough to eliminate the waiting list, it will help provide services and drugs.

### **Q: What is the per client cost for OHDAP?**

A: The estimated OHDAP cost for clients receiving anti-retroviral therapy is \$15,000 per client each year.

### **Q: How much is needed to totally eliminate the current waiting list?**

A: It would take an estimated additional \$2.3 million per year to enroll the 156 clients on the OHDAP Waiting List as of August 27, 2010.