



**Treatment Action Group**

**Testimony to the Joint Legislative Public Hearing on 2021 Executive Budget Proposal**

**Topic: Health/Medicaid**

Date: February 25, 2021

Subject: TAG Supports Full Funding for Hepatitis C Elimination and Ending the HIV Epidemic & S.2520/A.1671 (Rivera/Gottfried)

To: Senate Finance Committee Chair Krueger  
Senate Finance Committee Members  
Assembly Ways & Means Committee Chair Weinstein  
Assembly Committee Members

This testimony is submitted on behalf of Treatment Action Group (TAG), a New York based, independent, activist and community-based research and policy think tank working for better treatments, prevention, vaccines, and cures for HIV, tuberculosis, and hepatitis C virus (HCV). TAG is committed to ensuring that all people with HIV, TB, or HCV receive lifesaving treatment, care, and information, and to ending stigma, structural racism and all the institutional harms experienced by vulnerable communities.

As we all know, the COVID-19 pandemic has had profound and devastating impacts on the State's infectious disease response beyond the coronavirus itself. In particular, TAG is deeply concerned about the impact of the pandemic on infectious disease risk to people who use drugs, especially those experiencing homelessness or incarceration. Due to NYS DOH staff being detailed to the emergency, the latest publicly available statewide viral hepatitis data is from 2018—the year the Governor committed to eliminating HCV as a public health threat. The 2018 surveillance report<sup>1</sup> indicates that 73% of new HCV cases were related to injection of drugs using unsterile syringes. Furthermore, across the state's seven regions (including NYC), 89% to 93% of new HCV cases among those under 40 years of age were related to unsafe injection, highlighting how failure to provide sterile syringes and other harm reduction services to younger New Yorkers is driving HCV transmission.

Due to legally required distancing measures, frontline workers' lack of PPE, staff exposure to COVID-19 and/or illness, and prioritizing immediate needs (food, shelter, medications for chronic conditions, etc.), we must anticipate that significantly fewer New Yorkers were able to access syringe service programs (SSPs) and other harm reduction services in 2020, compared to the previous year. Given this, we must also anticipate we will confront a surge in new HCV infections in 2021, and must therefore redouble our HCV prevention, diagnosis and linkage to care efforts via renewed and expanded support for peer outreach and navigation at community-based organizations, federally qualified health centers, harm reduction sites, and the state's innovative Drug User Health Hubs, co-located at SSPs.

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<sup>1</sup> New York State Department of Health Hepatitis B and C Annual Report 2018 at <https://www.health.ny.gov/statistics/diseases/communicable/>. Source: Communicable Disease Electronic Surveillance System (CDESS)

We must also note that these programs rapidly adapted service delivery, and emergency regulatory changes allowing the provision of take-home methadone doses and buprenorphine initiation via telemedicine likely significantly *increased* the number of individuals receiving those life-saving medical interventions in 2020. These measures must be made permanent and expanded, with robust programmatic funding. In addition, reimbursement rates and peer worker salaries must reflect the true value of this essential care.

All of this clearly points to the need to maintain or increase funding for health programs, especially for infectious disease prevention, diagnosis and linkage to care programs serving the most vulnerable individuals, and to avoid any reduction of resources.

Therefore, we declare our **strong support** for:

- **\$5 million in the Executive Budget to fund Hep C Elimination** to continue the state's national-leading commitment to eliminate HCV as a public health threat, and fund services needed to respond to the anticipated surge in cases.
- **\$15 million in the Executive Budget to fund Ending the HIV/AIDS Epidemic** as part of the state's ongoing nation-leading efforts to end the HIV epidemic.
- **S.2520/A.1671 (Rivera/Gottfried)**, which would delay for three years the Medicaid pharmacy benefit carve-out for HIV special needs health plans and 340B covered entities, including community health centers, Ryan White HIV clinics, sexual health clinics, and other critical safety-net providers. No changes should be made to the 340B program until sustainable replacement revenue to these providers has been identified and secured (see below).

We also declare our **strong opposition** to:

- **The Executive Budget proposal to cut Article 6 public health matching funds to NYC from 20% to 10%.** This compounds the ongoing crisis in New York City's public health budget, resulting in a \$65M shortfall with initial Article 6 matching fund cut from 36% to 20%, which in turn contributed to 15-30% cuts to City Council funded health programs in the current fiscal year.
- **The Executive Budget proposal to withhold 5% of payments due on State contracts with nonprofits.** Let's be clear on what the proposal entails: *failure to provide full payment for contracted services*. The Governor's office cannot hail New York's frontline community health workers while failing to pay for their work in full. Should federal relief funding be directed to NYC, all funding withheld from nonprofit contracts should be fully restored.
- **The Executive Budget proposal for Medicaid Pharmacy Carve Out and 340B fund,** and support reversal of the pharmacy carve out, or exemption for HIV special needs plans and 340B providers until sustainable replacement funding to these providers has been identified and secured.



The middle of a pandemic and global public health crisis is not the time to cut public health. This was true in 2020 and remains true in 2021. We call on the Governor's office and the legislature to reconsider, reject and reverse the cuts in the Executive's proposed budget; to pass and enact the Invest in Our New York Act; and to recommit to our state's nation-leading efforts to eliminate HCV and HIV as public health threats.

Respectfully,

A handwritten signature in dark ink, appearing to read "A. Gaudino", is positioned below the word "Respectfully,".

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*TAG's office is located on the island of Manhahtaan (Mannahatta) in Lenapehoking, the homeland of the Lenape People*