States Are Under Financial Strain Following Federal Cuts to HIV Programs

HIV advocates and care networks in Virginia and Missouri share the importance of restored budgets.

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Since President Donald Trump came into office for his second term in January 2025, federally funded HIV public health programs have seen unprecedented budget cuts, such as at the Ryan White HIV/AIDS Program, which distributes funding for state and local HIV services and treatment across the United States, and the U.S. President's Emergency Plan for AIDS Relief, which supports efforts abroad, as well as agencies such as the Centers for Disease Control and Prevention (CDC) and the United States Agency for International Development. As a result, state HIV care networks, like Vivent Healthcare in Missouri and Equality Virginia and Daily Planet Health Services in Virginia, are under financial strain, putting people living with HIV at risk of losing access to care.

In Virginia, HIV care networks lost $20 million in funding for HIV care and support. In February, lawmakers in the Virginia House and Senate included amendments to their budget proposals that would restore Ryan White Part B funding, but providers are still waiting for the final budget agreement. As a result, Virginia HIV advocates and service providers are urging lawmakers to restore Ryan White Part B funding in the state's budget by the end of June.

Ryan White Part B funding provides grants to states and territories to provide HIV and support services, making them easier to access. AIDS Drug Assistance Programs, which fall under Ryan White Part B, and help low-income people living with HIV access the medications they need. Other grants in Ryan White Part B direct funds to educating minority communities on HIV and AIDS and provide additional money to states that need extra help or have a growing number of AIDS diagnoses.

In fact, according to a recent report on 2024 data, nearly half of Americans diagnosed with HIV receive services via Ryan White funds. Specifically, 601,853 people received services from providers funded by Ryan White (about 1.2 million Americans are estimated to be living with HIV).

“Due to funding constraints, we have already been forced to eliminate vital services, and without additional investment, we could be forced to place Ryan White clients on wait lists for care,” said Anita Bennett, executive director of Daily Planet Health Services, in an interview with 13 News Now. “This funding is essential to ensuring providers can maintain the staff and resources necessary to deliver critical medical care and keep people healthy, housed and engaged in treatment.”

Some parts of the state are already feeling the impact of lower budgets.

“The Eastern region of Virginia carries the largest burden of HIV cases in the commonwealth. The loss of $550,000 in funding to our agency alone has significantly impacted our ability to link newly diagnosed individuals to care, retain clients in treatment and provide the supportive services that help people achieve viral suppression,” Gwendolyn Ellis-Wilson, director of operations at Minority AIDS Support Services, told 13 News Now.

Meanwhile, in St. Louis, nearly 6,700 people are living with HIV. Losing healthcare funding is a constant fear for Jordan Braxton, community empowerment manager of Vivent Health, a six-state health network serving 13,000 people in Missouri. Since Trump came into office, Vivent Health has lost an estimated $3 million in funding for its health programs.

Missouri, citing rising costs and declining rebates, also suspended some Ryan White funds, including mental health treatment, substance use treatment, emergency rental and utility assistance and oral health services, according to KSDK.

"If you take away some of the medications and some of the services, you run the risk of people losing their viral load suppression,” said Braxton in an interview with KDSK. “People are going to die. New infections are going to happen.”

Other states have been dealing with similar budget cuts. To read more, click #budget cuts, where you will find stories like:

- “Indiana Ends Statewide HIV, Hepatitis C Program Following Federal Funding Cuts,”
- “Florida Lawmakers Reverse Cuts to State’s AIDS Drug Assistance Program,”
- “Texas Has Learned from Florida: Canceled Meetings Equal Cut HIV Funding,”
- “Constrained Budgets Lead States to Restrict HIV Drug Access Through Ryan White” and
- “Budget Cuts Threaten HIV Prevention and Treatment.”

The Ryan White HIV/AIDS Program launched in 1990 after Congress passed the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act, named after the Indiana teenager with hemophilia who at age 13 contracted HIV through a blood transfusion in 1984. He died in 1990, a month before his high school graduation. Ryan White and his mom, Jeanne White-Ginder, made global headlines as outspoken AIDS advocates after he was kicked out of school and the family was discriminated against because of his HIV status.

The federal Ryan White HIV/AIDS Program provides HIV services for low-income people by funding cities, counties, states and local community-based organizations that provide HIV care, treatment, prevention and essential services.

The program is administered by the HIV/AIDS Bureau within the Health Resources and Services Administration, which is part of the Department of Health and Human Services. Health Secretary Robert F. Kennedy Jr. leads the HHS and its many agencies, including the CDC and the Food and Drug Administration.

The success of longstanding government HIV initiatives notwithstanding, the Trump White House and Republican leaders in Congress aim to gut federal HIV funds. For more, see "If Congress Ends Ryan White HIV Services, How Many Americans Will Contract HIV?" (The answer: Researchers predict a 49% spike in cases—or 75,000 excess HIV diagnoses—by 2030.)

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