



COVID-19 Relief Package Needs These 15 Elements, Say HIV & LGBT Groups

“A large swath of the U.S. population living with HIV is at great risk,” reads their open letter sent to every member of Congress.

March 17, 2020 By [AIDS United](#)

Below is the complete text of an open letter sent to all members of Congress by AIDS United and 90 leading HIV and LGBT organizations (the complete list of signees is included). The letter underscores the unique risks the novel coronavirus presents for people living with HIV. For example, only 53% of people with HIV in the United States have an undetectable viral load, and 60% of people with HIV are 50 or older. To read a PDF of the letter, including footnotes, [click here](#).

As the spread of the novel coronavirus SARS-CoV -2, which causes the disease COVID-19, continues across the country and around the world, many people living with HIV are understandably concerned about how this virus may affect them and the communities they call home. The populations most at risk of serious complications from COVID-19—including death—are older adults and individuals with chronic health conditions, including compromised immune systems. The undersigned 90 organizations engaged in the local, state, and national response to HIV call on federal decisionmakers to acknowledge the increased risk of COVID-19 illness and death faced by many people living with HIV and to craft a relief package that takes the unique needs of this population into account.

During a presentation about COVID-19 at the 2020 Conference on Retroviruses and Opportunistic Infections, Dr. John Brooks, Senior Medical Advisor for the Division of HIV/AIDS Prevention at the Centers for Disease Control and Prevention, said that people living with HIV who have a low CD4 count and/or a detectable viral load are at potential higher risk of developing more serious illness from COVID-19 as a result.

Given that only 53% of people living with HIV in the United States have an undetectable viral load and that 60% of the people living with HIV in the United States are age 50 or older, a large swath of the U.S. population living with HIV is at great risk during the rapid spread of COVID-19. Ensuring the health and safety of people living with HIV in the United States goes beyond providing universal access to health care. Housing is one of the strongest predictors of their access to treatment, their health outcomes, and how long they will live. To obtain and benefit from life-saving HIV treatments, people living with HIV must have safe, stable housing. Food insecurity has been associated with increased HIV transmission risk, inability to maintain regular medical

appointments, poor antiretroviral therapy (ART) uptake and adherence, poor immunological and virological responses, lower efficacy of ART, and high mortality.

When crafting a relief package in response to COVID-19, Congress must take into account the unique needs of people living with HIV to ensure their continued safety, health, and well-being.

We support the current relief package proposed in the U.S. House of Representatives, H.R. 6201, the Families First Coronavirus Response Act—free coronavirus testing for everyone who needs a test, including the uninsured; paid emergency leave with both 14 days of paid sick leave and up to three months of paid family and medical leave; enhanced Unemployment Insurance, a first step that will extend protections to furloughed workers; strengthened food security initiatives, including SNAP, student meals, seniors nutrition, and food banks; clear protections for frontline workers, including health care workers and other workers who are in contact with those who have been exposed or are responsible for cleaning at -risk places; and increased federal funds for Medicaid, as states face increased costs—but it doesn't go far enough.

Missing from this package and what must be included in relief considerations going forward are:

- Mandated public, daily reporting on COVID-19 testing, incidence, prevalence, and related death;
- Accessible and scaled testing measures in order to provide sufficient surveillance; explicit, universal protocols for presumptive positives awaiting confirmatory tests; and reporting on the number of presumptive positives;
- Waivers of refill limits on maintenance drugs, inclusive of antiretrovirals, for people with chronic conditions like HIV and hepatitis;
- Explicit authorization for and coverage of telemedicine for COVID-19 care;
- Flexibility with funds and associated deliverables for recipient organizations of federal grants, cooperative agreements, and other awards;
- Rental and mortgage assistance for workers whose income streams are diminished or eliminated by mandatory closures;

- Suspensions on utility disconnections and eviction and foreclosure proceedings;
- Suspension of student loan debt payments;
- Prevention of overcrowding in public institutions, including the release of all individuals currently in jails, prisons, pretrial holding facilities, and immigration detention who have not been convicted of a crime involving physical or sexual violence;
- Moratorium on implementation of the public charge rule so immigrant communities aren't discouraged from accessing COVID-19 testing and care;
- Incentives for banks, debt collectors, and other financial institutions to cease collections activity and interest accrual until epidemic control is achieved;
- Use of the National Disaster Medical System to cover uninsured people with Medicare for any recommended care;
- Temporary increase of the Federal Medicaid Assistance Percentage;
- Additional and accelerated funding for treatment and vaccine research; and
- Commitment to free access to treatment and vaccination, once identified.

A pandemic with the scope of COVID-19 requires a decisive, robust response, and the recommendations above will move the United States closer to epidemic control and containment at an accelerated pace, avoid potentially millions of cases of COVID-19, and prevent hundreds of thousands of deaths. The continued safety, health, and well-being of everyone in the United States, especially those living with HIV, rests in the hands of a comprehensive response, and the time to act is now.

Please reach out to Alex Vance, Senior Policy Manager, at avance@aidsunited.org

with any questions.

Signed,

Carl Baloney, Jr.

Vice President for Policy and Advocacy

AIDS United

ADAP Advocacy Association

Afiya Center; TX Black Women's Health Initiative;

African American Health Alliance

AIDS Action Baltimore

AIDS Alabama

AIDS Alliance for Women, Infants, Children, Youth & Families

AIDS Foundation of Chicago

AIDS Project Rhode Island

AIDS United

American Academy of HIV Medicine

APLA Health

Black AIDS Institute

Black Women's Health Imperative

Callen-Lorde Community Health Center

CARES of Southwest Michigan

Cascade AIDS Project

Center for Health Law and Policy Innovation

Cero VIH Puerto Rico

Christie's Place

Clare Housing

Collaborative Solutions

Community Access National Network (CANN)

Community Education Group

Counter Narrative Project

CrescentCare

Delaware HIV Consortium

Desert AIDS Project

END HIV Houston

Equality California

Equality Federation

Equality North Carolina

Equitas Health

Equity Forward

A Family Affair

GLAAD

GLMA: Health Professionals Advancing LGBTQ Equality

Global Justice Institute

GMHC

God's Love We Deliver, Inc.

Harm Reduction Coalition

Health Services Center, Inc.

HealthHIV

Hispanic Health Network

HIV + Aging Research Project—Palm Springs

HIV AIDS Alliance of Michigan

HIV Medicine Association

HIV Modernization Movement-Indiana

HIVenas Abiertas

Housing Works

Howard Brown Health

Human Rights Campaign

Hyacinth AIDS Foundation

iHealth

Latino Commission on AIDS

Legacy Community Health

Los Angeles LGBT Center

Movimiento en Respuesta al VIH

My Brother's Keeper

NAHEWD

Nashville CARES

NASTAD

National Center for Transgender Equality

National Coalition for LGBT Health

National Coalition of STD Directors

National Working Positive Coalition

NMAC

North Carolina AIDS Action Network

Paciente de SIDA pro Politica Sana

PFLAG National

Positive Women's Network-USA (National)

Positive Women's Network-USA: Ohio Chapter

Prevention Access Campaign

Pride Media, publisher of Out, The Advocate, Plus, Pride, and OutTraveler

Puerto Rico CoNCRA

San Francisco AIDS Foundation

Silver State Equality-Nevada

SisterLove

Southern AIDS Coalition

Tennessee AIDS Advocacy Network

The AIDS Institute

The Professional Association of Social Workers in HIV/AIDS

The Well Project

TPAN, publisher of Positively Aware

TRANScending Barriers

Treatment Action Group

U.S. People Living with HIV Caucus

UNIFIED-

HIV Health and Beyond

Vivent Health

Waves Ahead Corp

Whitman-Walker Health

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<http://beta.docker.poz.com/blog/covid19-relief-package-needs-15-elements-say-hiv-lgbt-groups>