

PRESIDENTIAL

August 6, 1997

ADVISORY

COUNCIL ON

HIV/AIDS

The Honorable Donna Shalala  
Secretary  
U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Washington, DC 20201

As members of the President's Advisory Council on HIV/AIDS, we are writing to express our urgent concern regarding certain HIV/AIDS-related issues and to request a meeting with you prior to September 30, 1997, to discuss those issues. Such a meeting should serve to expedite resolution of critical, time sensitive issues which currently impede fulfillment of the President's stated goals for ending this epidemic. In the President's word, "[t]o achieve these objectives, we must all stand shoulder-to-shoulder in our fight."

In keeping with the responsibilities assigned to us by the President, this Council, in consultation with leading medical and public health officials and with community-based AIDS groups, has investigated the federal response to AIDS. Following extensive deliberations, the Council has issued recommendations that represent our judgment regarding how best to realize the President's clear commitments and directives regarding AIDS.

Many of those recommendations have been referred for your response. Disappointingly, those recommendations have been, in large measure, either ignored or insufficiently acted upon by the Department of Health and Human Services. Silence on these issues has become increasingly frustrating and detrimental to the partnership necessary for achieving the President's goals.

As part of our continuing assessment of the Administration's response to AIDS, the Council will issue in December another status report to the President. A meeting to discuss outstanding issues of concern regarding HHS policies is urgently required to complete that task. Particular focus on development and implementation of a comprehensive strategy to accomplish the President's goal of "reducing the number of new infections each and every year until there are none" including addressing substance abuse and its effect on HIV transmission, along with both the availability of and access to treatment, is essential to that process.

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Most pressing among these issues on which response has been inadequate are:

- Timely elimination of restrictions on the use of federal funds for needle exchange and failure to exercise the waiver authority granted by Congress, despite clear scientific evidence of the efficacy of and growing public support for such programs.
- Implementation of the Administration's initiative announced over three months ago, to undertake a 30-day study of expanding Medicaid coverage for early intervention therapy for low income HIV infected individuals who have not yet become legally disabled.
- Prioritization in the FY 1999 Administration budget request of funding for AIDS prevention and housing, along with reprioritization for AIDS care and research. In particular, HHS plans for implementing the recently issued HIV treatment guidelines and the requisite expansion of primary medical care necessary to provide access to the recommended therapies.
- Removal of existing restrictions on the content of CDC-supported HIV prevention materials, with the goal of establishing accuracy and appropriateness for the target audience as the sole criteria for assessing such materials.
- Immediate review and revision of the scientifically discredited CDC guidelines covering HIV infected health care workers.
- The Specific plans of appropriate HHS agencies for their substantive involvement in what should be an expedited, high-priority, well-financed, coordinated, government-wide effort-with private industry partnerships and international collaborations – to achieve the declared goal of an AIDS vaccine within a decade.
- Provision of sufficient resources, consistent with the President's commitment in reorganizing the Office of National AIDS Policy, for accomplishing the President's goals. Such resources are critical to systematic institutionalization of the President's policy decisions through development of departmental rules, regulations and directives, along with appropriate coordination and monitoring.

While the Council's initial recommendations targeted research, prevention and service related topics, specific recommendations relating to the particular needs of communities of color, women, children and adolescents, young gay men, prisoners and international populations are in continual development.

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The Council sincerely desires to assist the President and his Administration in achieving prompt resolution of these critical issues in a manner which maximizes the federal government's ability to effectively respond to the HIV epidemic.

Your positive response at your earliest convenience to this request for a meeting will be greatly appreciated. We are available for a preliminary conference call or other call or other appropriate perquisites to such a meeting at your convenience. Please contact Council Chairman Scott Hitt to follow up.

Sincerely,

R. Scott Hitt, M.D.

Chair, on behalf of the members of the

Presidential Advisory Council on HIV and AIDS