

# HIV Health Care Access Working Group

June 11, 2012

Marilyn Tavenner

Acting Administrator Chief Operating Officer

Centers for Medicare & Medicaid Services (CMS)

Department of Health and Human Services

7500 Security Blvd.

Baltimore, MD 21244-1850

Re: CMS-2370-P

Dear Acting Administrator:

We are writing on behalf of the HIV Health Care Access Working Group (HHCAGW) in response to the proposed rule regarding payments for services furnished by certain primary care physicians under Medicaid. HHCAGW is a coalition of more than 100 national and community-based HIV service organizations representing HIV medical providers, advocates and people living with HIV and providing critical HIV-related health care and support services. The Working Group is actively engaged in efforts to increase early and affordable access to quality, comprehensive care for people living with HIV.

The Medicaid program currently is the largest federal funder of HIV care covering at least 47% of people with HIV infection who are in care, and in 2014 when Medicaid is expanded the program will play an even greater role providing health care coverage for people with HIV. We are long-time supporters of expanding access to Medicaid coverage but are concerned about people with HIV/AIDS having access to providers with the appropriate level of HIV experience and experience if the existing disparities in Medicaid rates are not addressed at the national level.

The proposed rule is an important first step in ensuring that low income people gain meaningful access to primary care services when Medicaid is expanded in 2014, and **we strongly support the proposal for all subspecialists recognized by the American Board of Medical Specialties to be eligible for increased Medicaid payments for primary care services.** HIV disease is now a chronic condition for individuals with early and regular access to care and treatment. Similar to other chronic conditions, many people with HIV/AIDS identify their HIV medical providers regardless of their subspecialty training as their primary care provider to receive comprehensive care that meets all of their medical needs. In addition, **nurse practitioners and physician assistants play a critical role in the HIV health care workforce. To sustain and grow a qualified and robust HIV health care workforce, it is important for their services to be reimbursed at levels comparable to the primary care provider under whose supervision they are working** as is proposed in the rule.

Thank you for the opportunity to comment on this important proposed rule. Developing a higher national standard for Medicaid provider payments that supports the cost of providing high quality comprehensive care is critical to a successful and effective Medicaid expansion for people with HIV/AIDS and others with complex, chronic conditions.

Respectfully submitted by the following organizations:

ActionAIDS  
AIDS Action Baltimore  
AIDS Action Committee  
AIDS Alliance for Children, Youth & Families  
AIDS Foundation of Chicago  
The AIDS Institute  
AIDS Project Los Angeles  
AIDS Treatment Data Network  
AIDS United  
American Academy of HIV Medicine  
Broward House / South Florida AIDS Network  
Community Access National Network  
Communities Advocating Emergency AIDS Relief (CAEAR) Coalition  
Gay Men's Health Crisis  
Georgia AIDS Coalition  
Harlem United  
Health and Disability Advocates  
HealthHIV  
HIVictorious, Inc.  
HIV Medicine Association  
Housing Works  
Lifelong AIDS Alliance  
Moveable Feast  
National Alliance of State and Territorial AIDS Directors  
National Association of People With AIDS  
National Minority AIDS Council  
National Pediatric AIDS Network  
The National Working Positive Coalition  
HIV Prevention Justice Alliance  
Project Inform  
San Francisco AIDS Foundation  
South Carolina Campaign to End AIDS  
Treatment Access Expansion Project  
Treatment Action Group  
Village Care