



March 6, 2017

Richard Hodges, Director  
Dr. Mary DiOrio, Medical Director  
Katherine Shumate, Ryan White Part B Administrator and HIV Care Services Section  
Administrator  
Laurie Rickert, Administrator of Community Based Programs  
Ohio Department of Health  
246 North High Street  
Columbus, OH 43215

Dear Director Hodges:

We, the undersigned, are calling for the full restoration of Ryan White Part B funding for fiscal year 2017-2018 for the AIDS Taskforce of Greater Cleveland (ATGC). For nearly 35 years, the ATGC- has served the Greater Cleveland Metro area with excellence in community and public health service. Throughout more than three decades, despite fluctuating government support for people at-risk for and living with HIV/AIDS, ATGC's tireless advocacy and service dedication has resulted in the health and well being of thousands of our area's most vulnerable residents: the sick, uninsured, marginalized, and often most indigent among us. Despite being an effective grantee of Ryan White Part B funding since the funding's inception and as one of the only accessible "one-stop shop" area AIDS service providers' prioritizing people living with HIV/AIDS (PLWHA), ATGC has just received verbal notice that it will not continue to receive Ryan White Part B funding within 30 days. This is unacceptable.

Without any written justification in response to a strong, competitive application and a fine record yielding viral suppression rates among clients higher than the national average (outcomes that protect not just those positive, but the greater HIV negative community), the Ohio Department of Health (ODH) appears to have little to no substantive reason for this decision. This omission of meaningful evidentiary cause and at least three failed prior attempts by ODH to defund ATGC on limited grounds leaves ATGC to speculate that this overreaching decision is a form of political backlash for the agency's years of aggressive state-level advocacy in partnership with and on behalf of PLWHA against various state health department decisions. Given ATGC's long service record and the impact this decision has on some 350 clients, this baseless decision is unsupportable and a full restoration of ATGC's Ryan White Part B funding is the only fair and just response.

Beyond the loss of nine (9) full-time case management positions bringing an average of 10-15 years experience to their caseload, including five case managers who conduct client home visits across five counties, this decision could also have a deleterious effect on the health and welfare of 350 medical case management clients. ATGC case management clients need the stability and constancy of the uninterrupted case management relationships they've developed over the years with ATGC's team. These relationships are hard-won and

require the skill, commitment, experience, and compassion found with the case managers the clients have worked with in some instances for more than a decade. ATGC directly supports 195 of those 350 clients in accessing life sustaining treatment and navigating medical insurance eligibility and enrollment through the Ohio HIV/AIDS Drug Assistance Program (OHDAP) and/or the Ryan White Part B services. All of these clients' retention and health outcomes strongly benefit from ATGC offering a stable, gapless continuity of service from testing to case management to rapid insurance to medical home to even pharmacy service provision. The fluidity and client convenience that comes from having an integrated system of continued care and support all in one trusted site is how the agency keeps high-risk clients under cross-departmental observation and from falling through the gaps. Clients are even able to find on-site needed housing and nutritional support services. With this ODH decision, clients lose those trusted relationships with little warning, lose integrated oversight of their disease progression, and may even lose their ability to obtain this holistic and seamless continuity of care in one location, threatening their long-term prognosis and, more broadly, the community at-large.

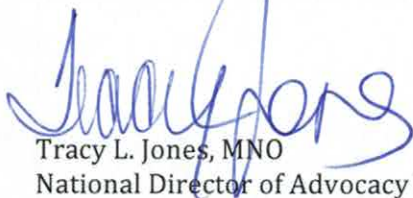
This does not have to be. In any given year, the ATGC has provided a broad range of supports and health services to between 800 to 1,200 annually with consistently high marks in client satisfaction and strong client retention. The agency's staff is one of the most educated and experienced in the HIV/AIDS field. Whenever administrative or grantee issues have arisen in the past with ODH, as they do with all grantees, ATGC have been able to successfully work through them to the documented satisfaction of all parties involved. The FY 2017-18 application is a strong one and scored well enough to be recommended for funding by ODH's financial arm. There is no substantive justification for the ODH program staff to defy that recommendation. The lack of courtesy in failing to provide even a written notification with detailed justification of this funding disallowance is alarming following so many years of continuous service and with the health and well being of so many lives at stake. Given these facts and impacts, nothing less than ODH's full restoration of ATGC's funding under Ryan White Part B is an acceptable response. We ask you to ensure that so many vulnerable lives dependent on these quality services and proven supports continue to receive the ATGC stellar continuum of care services they've rightly become accustomed to.

Thank you.

Sincerely,



LaRaun T. Clayton, MBA, LSW  
Interim Executive Director  
AIDS Taskforce of Greater Cleveland



Tracy L. Jones, MNO  
National Director of Advocacy Campaigns  
AIDS Healthcare Foundation