March 20, 2023

State Office Building Room 379 100 Rev Dr Martin Luther King Jr Boulevard. St Paul, MN 55155

Re: HF 2568 Appropriating money for HIV/AIDS support services.

Dear Members of House Human Services Finance Committee

We write to urge Minnesota Legislature to include an ongoing general fund investment to support HIV prevention programs that directly address the health inequities of communities experiencing the greatest rates of HIV. The request is that \$10,000,000 in fiscal year 2024 and \$10,000,000 in fiscal year 2025 are appropriated from the general fund to the commissioner of human services for grants to community-based HIV/AIDS support services providers.

While we understand statewide HIV case numbers overall have remained relatively stable over time, Minnesota is experiencing three unprecedented HIV outbreaks. We would expect to see the overall number of new cases decrease because there are medications to treat people with HIV and prevent people who are negative from becoming infected. People who identify as American Indian/Alaskan Native (AI/AN), Black, and Latin o/Latinx are disproportionally impacted by HIV due to a combination of historical, current, and intergenerational trauma; structural and individual racism; and discrimination that all influence the social determinants of health. These trends are reflected in HIV infections, with BIPOC people comprising 17% of the Minnesota's population but accounting for 60% of new HIV diagnoses

MDH currently receives both state and federal funding for HIV programmatic activities and external grants. Since 2002, MDH has also received HIV rebate revenue generated through the federal 340B rebate program via an interagency agreement with DHS. However, MDH learned in October 2022 that the amount of rebate revenue we will receive from DHS would decrease by nearly 60% beginning January 1, 2023, which subsequently results in a decrease of grants being awarded to community-based organizations and clinics to implement HIV prevention interventions.

Even before the loss of rebate funds, the level of state and federal funding has been insufficient to support the staff and interventions required to end the current outbreaks, prevent future outbreaks, address ongoing HIV health inequities, and achieve and maintain the legislatively mandated outcomes. This request replaces the lost rebate revenue.

Given the overwhelming data, we strongly recommend that Minnesota include an ongoing general fund investment to support HIV prevention programs that directly address the health inequities of communities experiencing the greatest rates of HIV. We have the tools to end HIV in Minnesota.

Sincerely,

Matt Toburen, Executive Director, Aliveness Project
Jeremy Hanson Willis, CEO, Rainbow Health
Charlene Leach, Executive Director, African American AIDS Task Force

Val Smith, Executive Director, Youth and AIDS Project
Sharon Day, Executive Director, Indigenous Peoples Task Force
Phoebe Trepp, Executive Director, Clare Housing
Mary McCarthy, Executive Director, Rural AIDS Action Network
Audrey Harrell, Executive Director, Hope House