

Talking Points for Phone Calls **Proposed Cuts to HIV Programs Hurts Vermont**

Proposed cuts

- \$135,000 – HIV/AIDS services - a reduction from \$335,000 to \$200,000
- \$50,000 – Prevention - a reduction from \$100,000 to \$50,000
- \$140,000 – AIDS Medication Assistance Program (AMAP) – a reduction from \$140,000 to \$0

\$135,000 Cut to Services

These cuts will mostly affect the ability of organizations to provide services through case managers and emergency programs. Those served through these programs are the most in need of medical attention and most disconnected from “mainstream” services such as medical care, mental health, family networks, or employment. These cuts may prove a short-term cost savings for Vermont, but will result in long-term cost increases. Cutting short-term emergency programs for a total 150+ families will shift more individuals into poverty and out of employment, housing, and medical care.

County by County

In Bennington County, a case management and prevention office will be closed, leaving 22 people with HIV without access to medical adherence, medical transportation, housing assistance, and other emergency assistance.

Case management in Addison, Caledonia, Essex, Franklin, Grand Isle, Lamoille, Orange, Orleans, Rutland, Washington, Windham, and Windsor Counties will also be reduced or eliminated, meaning another estimated 200 people with HIV will lose access to HIV case management or advocacy due to the reduction of roughly six FTE throughout Vermont.

\$50,000 Cut to Prevention

Prevention programs reduce new HIV infections and reduce rates of other sexually transmitted infections, hepatitis, unplanned pregnancies, and substance abuse. This cut will greatly reduce the availability of syringe exchanges at Vermont’s three Syringe Exchange Programs in Burlington, White River Junction, and St. Johnsbury.

\$140,000 Cut to AIDS Medication Assistance Program (AMAP)

This cut will reduce the assistance to Vermonters with HIV/AIDS to pay for their very costly medications – medications that keep people alive. The state has proposed replacing these state funds with drug rebates; this is irresponsible in that no one can predict what the amount of the rebates will be or even if there will be rebates next year.