

SECTOR EVOLUTION: The Impact of the National HIV/AIDS Strategy and The Affordable Care Act

This year's survey asked U.S.-focused funders if their work or approach towards addressing HIV/AIDS in the U.S. is 1) in support of or alignment with the U.S. National HIV/AIDS Strategy (NHAS), and/or 2) shifting given the upcoming changes related to the Affordable Care Act (ACA).³⁰ Seventeen funders answered the question with more than 90% noting their current HIV/AIDS grantmaking strategies are in alignment with the NHAS. Some grantmakers shared that they had adapted grant processes to determine how grantee work supports the strategy. Several corporate funders—**Kaiser Permanente**, **Gilead** and **Merck**—answered that new initiatives had been developed specifically to support the goals of the NHAS. A number of other funders, including the **Elton John AIDS Foundation**, **Ford Foundation**, and **AIDS United**, are supporting advocacy efforts to monitor and influence the Strategy, as well as policy work to ensure optimal funding for the full implementation of the Strategy.

Funders are also supporting research, convenings, and technical assistance (TA) to help grantees prepare for the ACA. **Gilead** supported a nationwide technical assistance and capacity building initiative implemented by the National Alliance of State and Territorial AIDS Directors (NASTAD) to provide HIV-focused personnel at state and local health departments with the knowledge, experience and information needed to prepare for and implement anticipated changes from federal sequestration, Medicaid expansion, and shifting Congressional health policy priorities. **The Robin Hood Foundation** is working with grantees to help them conduct outreach and enrollment for health homes as part of New York State's implementation of the ACA. **The Community Foundation for Greater Atlanta** recently completed a survey of local ASOs and nonprofit medical clinics focused on the potential changes to services and revenues related to the ACA, with the goal to use the results to generate conversations during site visits with grant applicants in the fall of 2013.

The **M•A•C AIDS Fund** provided a grant to the **AIDS Foundation of Chicago**, **Project Inform** and the **Treatment Access Expansion Project** to lead ACA advocacy and implementation. This work aims to monitor and respond to proposed rules and regulations on implementing the ACA; to educate PLWHA and providers about pending changes; to support policy makers and service providers to implement the ACA to meet the needs of HIV-positive people; to provide tools to help states and localities integrate the Ryan White system of care into broader programs like Medicaid; and to defend the ACA and health care programs that will provide coverage under reform from attacks.

Several funders are also helping grantees navigate the collective sea changes of the NHAS, ACA implementation, and shifts in national HIV/AIDS funding. In 2012 **Johnson & Johnson** made a grant to **AIDS United** to help communities transform to meet the demands of this dynamic landscape by strengthening the capacity of communities and organizations to provide HIV services consistent with the domestic HIV/AIDS strategies and policy environment. The new grant will enable **AIDS United** to provide in-depth TA to five communities per year to adapt to the policy landscape and determine optimal and sustainable service delivery models that are linked to the most at-risk populations in their communities.

Washington AIDS Partnership (WAP), the Institute for Public Health Innovation (IPHi), and the D.C. Department of Health have partnered to help HIV/AIDS service providers prepare for changes in the HIV/AIDS sector. In-depth interviews were conducted with local organizations to assess capacity and needs. The interviews were used to develop a series of convenings and trainings in 2013-14 for the Washington, D.C. metropolitan region focused on common areas of capacity building needs such as understanding the ACA and how it will affect the HIV/AIDS field, data systems, fee-for-service considerations, and new business and partnership models. The convenings and trainings provide an important opportunity for HIV/AIDS service providers, public health organizations, and medical providers to build collaborative relationships and prepare for transitions in the field. WAP also released a RFP focusing on "strategic restructuring" to help local nonprofits work through vertical and horizontal integration, expansion, and other restructuring activities.

For more information, eight recommended actions for funders to help advance the goals of the NHAS, as well as correlating funder and stakeholder actions, see the FCAA toolkit, the Funders' Guide to the National HIV/AIDS Strategy: www.fcaaid.org/NHASToolkit

SECTOR EVOLUTION: How Are ASOs Keeping Pace?

Combined with advances in prevention and treatment, and the continuing impact of the economy, the "game-changers" of the NHAS and ACA are forcing AIDS Service Organizations (ASOs) and Community Based Organizations (CBOs) to reconsider their strategic, financial, and service planning in order to remain relevant, effective, and sustainable".³¹ A recent survey from the Asian & Pacific Islander American Health Forum³¹ on the impact of changes in HIV/AIDS prevention, funding shifts, and treatment advances on ASO organizational stability and sustainability found that a large number of organizations are facing significant challenges to their sustainability. Notably a review of 154 IRS Form 990s revealed that 75% of agencies reported a loss for at least one of the years under review (2007-2010). The survey also highlighted that ASO and CBO leaders are "acutely aware that the HIV/AIDS 'service environment' is changing rapidly." While some organizations are opting to move towards providing medical services—such as applying for Federally Qualified Health Center (FQHC) or FQHC-look-alike status—through partnerships and linkages to other agencies, the majority noted they are not sure how and where to start. Read the full survey online at <http://bit.ly/17tokPf> for detailed data, and a series of recommendations to support the transformation of the domestic AIDS sector.

"We have been traditionally an HIV prevention agency. The changes in healthcare financing are new for us, and we're in uncharted territory."

—Survey respondent

³⁰ Another component in this evolution is a growing funder response to the Treatment Cascade—data that reveals that only a third of PLWHA in the United States are engaged in regular care, and less—only 25%—have a suppressed viral load. Learn more on page 34.

³¹ Asian & Pacific Islander American Health Forum, Capacity for Health Project. *HIV/AIDS ASO and CBO Stability & Sustainability Assessment Report*. September 2013. Available at: www.apiahf.org/resources/resources-database/hiv-aids-aso-and-cbo-stability-and-sustainability-assessment-report