



**Issue
Fact
Sheet**

AIDS Drug Assistance Program

Strengthen the AIDS Drug Assistance Program (ADAP) Support flexibility to include more low-income patients

The Problem

North Carolina has the worst eligibility level in the nation for ADAP. With life-saving AIDS drugs that cost as much as \$13,000 per year, North Carolina is turning away low-income people with HIV/AIDS if they make more than 125% of the Federal Poverty Level. That means a single person making \$13,000 per year would not be eligible to participate in ADAP. Those numbers just won't add up.

North Carolina's ADAP only serves the poorest of the poor. Ninety-five percent of North Carolina's ADAP clients are below the federal poverty level, while the national average is just 50%.

Other states are doing a lot more. Our neighbors—Virginia, South Carolina, Tennessee and Georgia—all have eligibility levels of 300% of the Federal Poverty Level, almost two-and-a-half times North Carolina's 125% level. The national average is 312% of FPL.

North Carolina is failing its most vulnerable citizens. Low-income North Carolinians living with HIV are forced to choose between food, rent, and the drugs that keep them alive. That doesn't reflect our values as a state.

A Solution

Support a provision in the State Budget to allow the Department of Health and Human Services to adjust the eligibility level based on available funding from state and federal sources. This flexibility and new efficiency will allow the agency to serve more patients. Current bills on this issue are:

House Bill 2389 would allow the Department to raise the eligibility level from 125% of FPL to 300% of FPL and provide an additional \$5 million to fund the program.

Senate Bill 1471, the State Budget bill that is now being considered by the House, includes a provision to allow the department to raise the eligibility level from 125% of FPL to 250% of FPL, but does not provide additional funds.