



May 10, 2022

Chairwoman Anna Eshoo  
Subcommittee on Health  
Energy and Commerce Committee  
US House of Representatives  
Washington DC 20515

Ranking Member Brett Guthrie  
Subcommittee on Health  
Energy and Commerce Committee  
US House of Representatives  
Washington DC 20515

**Re: Support of HIV and Hepatitis Provisions in the “Restoring Hope for Mental Health and Well-Being Act of 2022” (H.R. 7666)**

Dear Chairwoman Eshoo and Ranking Member Guthrie:

The **HIV+Hepatitis Policy Institute**, a national, non-profit organization whose mission is to promote quality and affordable healthcare for people living with or at risk of HIV, hepatitis, and other serious and chronic health conditions, is pleased to offer comments in support of the HIV and viral hepatitis provisions included in the **“Restoring Hope for Mental Health and Well-Being Act of 2022”** ([HR 7666](#)). This bipartisan bill introduced by Chairman Frank Pallone and Ranking Member Cathy McMorris Rodgers reauthorizes key Substance Abuse and Mental Health Services Administration (SAMHSA) and Health Resources and Services Administration (HRSA) programs to address the national mental health and substance use disorder crises. The subcommittee is expected to consider the bill tomorrow.

The **HIV+Hepatitis Policy Institute** strongly supports two provisions related to HIV and hepatitis contained in Section 242 of the bill.

First, the bill changes the way in which funding is distributed for the proposed new name of “Block Grants for Substance Use Prevention, Treatment, and Recovery Services.” A portion of this funding is currently used to help prevent HIV, including HIV testing and referral programs. In the past, funding has been distributed based on a jurisdiction’s number of “AIDS” cases. The bill changes the basis for distribution to the number of “HIV” cases, which is a more accurate indicator now since most people living with HIV do not develop AIDS due to the advancement

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of antiretroviral medications. This change was proposed in President Biden's FY2023 budget, is in line to updates made by Congress to other programs focused on HIV such as the Ryan White HIV/AIDS Program and the Housing Opportunities for Persons with AIDS, and we fully support it.

Secondly, the bill adds viral hepatitis services as a component of the block grant, including hepatitis testing and linkage to care and treatment. We fully support this addition since substance use is responsible for a significant number of new hepatitis infections. Recent data suggest that more than 70 percent of the 57,800 new hepatitis C infections are among people who inject drugs. There are several curative treatments available for hepatitis C, but individuals must have access to screening and linkage to care programs to be able to take advantage of these medications. Including hepatitis requirements in the substance use block grant is one way to broaden the federal government's efforts to help prevent and end hepatitis.

**HIV+Hep** also supports increased reporting requirements for the grantees, as proposed in the bill.

Finally, in a separate legislation that the subcommittee will consider, **HIV+Hep** supports the "Food and Drug Amendments of 2022" (H.R. 7667), which reauthorizes critical user fee agreements, including one for prescription medications.

Thank you for the opportunity to provide these comments. Should you have any questions, please feel free to contact me at [cschmid@hivhep.org](mailto:cschmid@hivhep.org) or (202) 462-3042.

Sincerely,



Carl E Schmid II  
Executive Director

cc: Members, Subcommittee on Health