# **End the Epidemics FY 2025-26 Budget Proposals**

TITLE	FUNDING AMOUNT	BRIEF DESCRIPTION
LBTQ Health Equity Initiative Fund	\$15 million / 3 years	Funding to continue the existing Lesbian Queer Bisexual and Transgender (LBTQ) Health Equity Initiative Fund within the California Department of Public Health (CDPH).  • \$8 million for Demonstration Projects that seek to provide navigation assistance to LBTQ people with uteruses to healthcare  • \$2.5 million for Community Education and Outreach efforts  • \$2.5 million to expand access to health and wellness services to low-income LBTQ women  • \$2 million for administration of the fund
Oppose the Transfer California Overdose Prevention and Harm Reduction Initiative (COPHRI) funds to the Naloxone Distribution Project	Oppose the more than \$8 million transfer from COPHRI to NDP	<ul> <li>COPHRI funds harm reduction programs and initiatives across the state</li> <li>The Naloxone Distribution Project is fully funded</li> </ul>
AIDS Drug Assistance Program (ADAP) Investments to End the Epidemic	Request to fund initiatives with surpluses generated from the ADAP Rebate Fund	Backfill \$60 million in potential federal CDC cuts to HIV prevention:  High-Impact HIV Prevention & Surveillance Programs for Health Departments  Medical Monitoring Project  National HIV Behavioral Surveillance  Epidemiology and Laboratory Capacity Program  Backfill federal cuts to DIS Syndemic Workforce Supplemental Funding Grant, which funds disease investigation specialists (DIS) to do contact tracing and case investigations to prevent and control the spread of infectious diseases:  Sy million (2025-2026)  \$18 million (2026-2027 and 2027-2028)  Support the purchase of rapid hepatitis C virus (HCV) testing equipment by facilities serving

	highly HCV-impacted populations:  • \$1 million in 2025-26  • \$1 million in 2026-27	
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End the Epidemics is a statewide coalition of more than 150 community-based organizations that advocates for anti-racist policies and funding priorities to eliminate health inequities among Black, Indigenous, and People of Color while working collaboratively to end the syndemic of HIV, STIs, viral hepatitis, and overdose in California.



### FY 2025-2026 LBTQ HEALTH EQUITY INITIATIVE FUNDING PROPOSAL FOR THE STATE OF CALIFORNIA

This Los Angeles LGBT Center proposes a budget request of \$15 million over three years in general funds to continue for the existing Lesbian Queer Bisexual and Transgender (LBTQ) Health Equity Initiative Fund within the California Department of Public Health (CDPH).

Lesbian, bisexual, and queer (LBQ) women, non-binary, and transgender-identified people with uteruses have for far too long been invisible in healthcare settings despite having a disproportionate share of health disparities. This population has historically faced significant barriers to accessing health care, including anti-LGBTQ bias and insufficient access to culturally appropriate care, particularly for preventive services like mammography and other cancer screenings. Further, few funding sources exist that specifically target LBQ women and trans men, and there is currently an alarming lack of medical services and research tailored to the medical needs of LBTQ people with uteruses.

#### **LBTO Health Equity Initiative**

Despite these significant health disparities, LBTQ people with uteruses have largely been invisible within the health field and current state funds from the 2019 LBQ Women's Health Equity Fund to address these health disparities are depleted. To address this gap in care, we urge the legislature to designate \$15 million over three years in general funds for the continuation of the LBTQ Health Equity Initiative Fund to be located within the California Department of Public Health (CDPH). This fund will be used to create a comprehensive grant program that will address LBTQ people with uteruses' health disparities across California.

- \$8 million for Demonstration Projects that seek to provide navigation assistance to LBTQ people
  with uteruses in accessing healthcare providers, healthcare coverage, and to provide referrals to
  culturally appropriate programs and services, including smoking, alcohol and substance use
  cessation, mental health, and domestic violence programs to increase health care utilization rates
  and to increase compliance for preventive health screenings.
- 2. \$2.5 million for Community Education and Outreach efforts, including launching public awareness health campaigns, for LBQ women and allies with an emphasis on targeting LBQ women of color, young adults, and seniors.
- 3. \$2.5 million to expand the number of low-income LBTQ women who currently lack access to culturally competent health and wellness services to trauma-informed, LBTQ-specific comprehensive medical, health, and psychosocial services, including but not limited to, breast and cervical cancer screenings, and reproductive healthcare. Support ongoing patient retention in care through high-quality case management and patient navigation services, which include emergency assistance for high-risk clients. Provide psychosocial evaluations to new LBQ women, trans and non-binary patients recruited through this initiative to identify their level of need, assist in applying



for appropriate safety net services, refer to additional services, and disseminate any necessary emergency assistance funds.

4. \$2 million for administration of the fund.

## **Los Angeles LGBT Center**

Since 1969, the Los Angeles LGBT Center has cared for, championed, and celebrated LGBT individuals and families in Los Angeles and beyond. Today the Center's over 800 employees provide services for more LGBT people than any other organization in the world. The Center is one of the few Federally Qualified Health Centers (FQHC) in the nation with providers who specialize in primary care, HIV/AIDS specialty care, women's care through the Audre Lorde Health Program, and trans specific care through the Trans Wellness Center. In addition, the Center covers a broad range of other services including, but not limited to, mental health, substance abuse, and housing navigation. Across all our programs, we see over 50,000 clients per month; or, over half a million visits each year. In this moment, the need for our services has never been greater.

#### **Point of Contact**

For any questions or further information please reach out to the Los Angeles LGBT Center's Policy team by contacting Brenda Villanueva at <a href="mailto:bvillanueva@lalgbtcenter.org">bvillanueva@lalgbtcenter.org</a> or by calling (323) 993-2934.



Californians Mobilizing to End HIV, STIs. Viral Hepatitis & Overdose

April 2, 2025

Dr. Erica Pan Director, California Department of Public Health 1616 Capitol Ave. Sacramento, CA 95814

Dear Dr. Pan:

We are writing to request that the California Department of Public Health (CDPH) incorporate into the AIDS Drug Assistance Program (ADAP) 2025-26 May Revision Estimate three investments community-based advocates have prioritized. These investments are:

- (1) Authorize up to \$60 million for sustaining vital HIV-prevention efforts. While CDC currently funds these efforts, we expect the Trump administration to terminate that funding very soon. The funding streams we anticipate will be impacted include the "High-Impact HIV Prevention and Surveillance Programs for Health Departments" cooperative agreements, as well as funding for the Medical Monitoring Project, National HIV Behavioral Surveillance, and the Epidemiology and Laboratory Capacity Program. The \$60 million backfill we are proposing would include approximately \$30 million that currently goes directly to Los Angeles and San Francisco counties.
- (2) \$9 million in 2025-26, and \$18 million in 2026-27 and 2027-28, for disease-investigation specialists (DIS). We intend for these funds to replace rescinded funding from the federal DIS Syndemic Workforce Supplemental Funding Grant for the last four months of 2025-26, then the full year in 2026-27 and 2027-28.
- (3) \$1 million in 2025-26 and \$1 million in 2026-27 to support the purchase of rapid hepatitis C virus (HCV) testing equipment by facilities serving highly HCV-impacted populations (e.g., substance use disorder treatment facilities). The recent development of a rapid HCV test offers a high-potential opportunity to test people for HCV and link those who test positive to treatment on the same day. However, the equipment needed to analyze the new rapid test is currently prohibitively expensive for many service providers. This funding would enable service providers to obtain the equipment and link more people living with HCV to care.

Although the Trump administration is destroying the federal public-health infrastructure the country needs to maintain progress against the syndemic of HIV, viral hepatitis, sexually transmitted infections, and drug overdose, we refuse to allow this administration to hamper our progress here in California—and we don't have to. The state has more than \$1 billion in ADAP rebate funds, and it may use these funds for a wide variety of purposes related to HIV, including HIV prevention and HIV-HCV coinfection. Last year, recognizing that these funds had not been fully leveraged to address the HIV epidemic, the California State Legislature directed the Department to submit to lawmakers "a plan for modernization and expansion of ADAP and related programs with a focus on addressing the epidemic of HIV/AIDS in California." The Legislature specified that the plan "shall be developed in consultation with stakeholders."

In the ADAP 2025-26 November Estimate, CDPH presented a plan that is "inclusive of, but not limited to" relatively minor improvements to ADAP and the PrEP Assistance Program. The Department also committed to "continue to develop enhancements to ADAP and related programs in consultation with stakeholders," including through its Monthly Office of AIDS & Sexually Transmitted Diseases/Hepatitis Stakeholder Engagement Calls. During the last such call on March 20, Department staff requested input on enhancements to ADAP and related programs, and several participants expressed support for the investments that are prioritized in this request.

Given stakeholder support for these investments, CDPH's commitment to consulting with stakeholders in developing proposed investments, and the urgency of the investments in the face of impending, devastating federal cuts, we hope that the Department will incorporate our proposals into the ADAP 2025-26 May Revision Estimate. Together, we can protect the incredible work California has done to bring our state's syndemic to an end.

Sincerely,

Jonathan Frochtzwajg, on behalf of the End the Epidemics Coalition Director, Health Justice Policy San Francisco AIDS Foundation

Cc: Secretary Kim Johnson, Assistant Secretary Julie Souliere, Chief Marisa Ramos