HIV/AIDS

The Six Protected Classes Policy ensures that all or substantially all medications to treat these serious conditions are covered by Part D plans. Congress created this policy to protect Medicare beneficiaries with some of the most serious health conditions — mental health challenges, cancer, HIV, epilepsy, and those at risk of organ rejection. Congress has repeatedly reaffirmed bipartisan support for the six protected classes.

For people living with HIV and so many others, new drug therapies have saved millions of lives and prolonged millions more. The advent of antiretroviral medications in the late '90s turned HIV from a near certain death to a manageable disease if patients have access to quality care and medications. **Not all medications are the same, and each person may react differently to a particular medication.** Together, doctors and patients make careful treatment decisions about which therapies are most appropriate on a case by case basis. Some individuals may develop side-effects to a particular drug, while another person may need a certain therapy to avoid a harmful interaction with a drug being taken for another health condition. Disruptions or delays in access to HIV treatment can have serious consequences for both patients and the broader community.

For people living with HIV drug resistance can occur, and they must have the ability to switch to another drug without interruption.

For more than a decade, Medicare Part D has been working for millions of seniors and people with disabilities, including over 120,000 people with HIV. As part of the Affordable Care Act (ACA), Congress took the step to codify the six protected classes. The protected classes policy is essential to ending the HIV epidemic in the US and improving health equity. We see no reason why the protected classes should be changed.









