

PEPFAR Agreement – Coburn/Enzi/Burr/White House/Biden/Lugar
(*PENDING acceptable floor process agreement, and acceptable House passage*)

1. Restores Priority for Life-saving Medical Treatment

- Requires that “more than half” of bilateral AIDS funding be spent for life saving medical care for people with HIV/AIDS (ARVs, medical monitoring, OI treatment, ARV-related food, and other essential HIV-specific medical treatment)
- Requires that the target for the number of people receiving ARV under the bill rises above current effort in direct proportion to funding increases for each year and cost-to-treat decreases (baseline for comparison each year is FY08). Under this formula, if all \$50B is appropriated, at least 5 million people would be treated with ARVs.

2. Prevents Funding of Rich Countries (like Russia, China, India)

- Strikes language prioritizing funding for rich countries with small HIV epidemics;
- Adds criteria to ensure that rich countries are not eligible to enter into compacts with PEPFAR (“compacts” are the funding vehicle of choice in the future).

3. Protects AIDS Patients from Substandard Medicines

- Requires that drugs procured by PEPFAR be approved by the FDA or a stringent regulatory authority (such as a European FDA), or, in rare cases, by another quality assurance mechanism determined by the U.S. to approve time-tested generics that have been used successfully for decades on diseases not common in developed countries

4. Strengthens Global Fund Transparency and Accountability

- Requires posting of all IG reports (consistent with recently-adopted GF policy, regardless of if that policy is weakened in future), Board activities/votes, and U.S. Board delegation positions, and other information on a public website;
- Requires the U.S. to “work with” the Global Fund to prohibit tariffs from being charged on Global Fund products.

5. Strengthens Protection of Funding for Abstinence/Fidelity Activities

- Clarifies that 50% of any funding for prevention of the sexual transmission of HIV/AIDS must be used **only on** abstinence and fidelity activities (previous language allowed anything else in that 50%).

6. Strikes Potential Abortion-related Activities

- Removes controversial language requiring “structural prevention” activities throughout the bill.

7. Protects Faith-based Groups and Others from Discrimination in ALL Funding

- Corrects conscience clause to include programs that provide **care** to people with HIV/AIDS, in addition to prevention and treatment services (bill had excluded this category of service)

8. Strikes Provisions Promoting Needle Distribution to Injection Drug Users

- Removes language subverting current policy of not funding the distribution of needles to intravenous drug users.