United States Senate

AND TRANSPORTATION
ENVIRONMENT AND PUBLIC WORKS
RULES AND ADMINISTRATION

COMMITTEES:
APPROPRIATIONS
COMMERCE, SCIENCE

WASHINGTON, DC 20510-4805 September 21, 2021

The Honorable Xavier Becerra Secretary United States Department of Health and Human Services 200 Independence Ave SW, Washington, DC 20201

## Dear Secretary Becerra:

I write regarding the Department of Health and Human Services' (HHS) Ending the HIV Epidemic in the U.S. (EHE) initiative. As you are likely aware, neither the state of West Virginia nor any of its counties were included as EHE Phase I jurisdictions. While I understand how and why the Phase 1 jurisdictions were chosen, since 2017 at least two West Virginia counties have had HIV outbreaks associated with injection drug use and a large number of additional counties are showing extreme vulnerability to rapid HIV spread for this same reason. I am therefore asking that West Virginia be added either as a Phase 1 jurisdiction or as part of a supplementary phase specifically addressing areas with rapidly increasing number of HIV outbreaks associated with injection drug use as soon as possible.

West Virginia unfortunately continues to lead the nation in drug overdoses. With this level of drug activity frequently comes the rise in blood borne infectious diseases associated with injection drug use. In 2016, the Centers for Disease Control and Prevention (CDC) conducted a national assessment to identify U.S. communities potentially vulnerable to rapid spread of HIV, if introduced, and new or continuing high rates of hepatitis C virus infections among people who infect drugs. 28 of West Virginia's 55 counties were found to be among the top 220 vulnerable counties in 26 states.

Since that time, two of the 28 counties, Cabell County beginning in 2018 and Kanawha County beginning in 2019, have experienced HIV outbreaks among people who inject drugs. In Kanawha County, which contains the state's capitol Charleston, from January 1, 2019 to July 22, 2021 there have been a total of 75 new HIV diagnoses. Prior to 2019, the average number of new HIV cases associated with injection drug use was less than 5 per year. Significant increases in the number of new HIV cases in other West Virginia counties, especially in the most rural portions of the state, are believed to be occurring as well.

The CDC has been an invaluable partner in investigation and response of these outbreaks. They recently conducted an Epi-Aid investigation regarding the HIV outbreak in Kanawha County, provided recommendations for addressing the ongoing outbreak, and have been in constant contact with my office. However, part of the reason EHE was created was to encourage the collaboration among agencies and offices across HHS and to provide additional resources so that jurisdictions are able to appropriately diagnose, treat, prevent, and respond to HIV. Without inclusion into the EHE program, I fear West Virginia will be unable to address the root causes of these outbreaks and we will continue to see similar outbreaks throughout the state and region.

WASHINGTON, DC

172 RUSSELL SENATE OFFICE BUILDING
WASHINGTON, DC 20510
(202) 224-6472

CHARLESTON
500 VIRGINIA STREET, EAST
SUITE 950
CHARLESTON, WV 25301
(304) 347–5372

MARTINSBURG
300 FOXCROFT AVENUE
SUITE 202A
MARTINSBURG, WV 25401
(304) 262–9285

MORGANTOWN
48 DONLEY STREET
SUITE 504
MORGANTOWN, WV 26501
(304) 292–2310

To meet the EHE initiative's goal of ending the HIV epidemic in the United States by 2030 it must be flexible and willing to swiftly address the expanding landscape of the disease. The inclusion of West Virginia in the EHE initiative and the addressing of areas rapidly increasing numbers of HIV outbreaks associated with injection drug use will bring us closer to reaching EHE's goal and ending the HIV epidemic.

Thank you for your swift attention to this matter.

Sincerely,

Shelley Mone Capito United States Senator