

December 20, 2024

Dear Ryan White HIV/AIDS Program Colleagues,

As many of you know, earlier this year the Health Resources and Services Administration's (HRSA's) HIV/AIDS Bureau (HAB) introduced [Ryan White Program 2030 \(RWP 2030\)](#), a renewed vision for the Ryan White HIV/AIDS Program (RWHAP). Building on 35 years of success and innovation, RWP 2030 integrates lessons learned from the RWHAP and the Ending the HIV Epidemic in the U.S. (EHE) initiative. This framework is designed to sustain high-quality care and treatment for people currently receiving services through the RWHAP **while expanding efforts to identify and engage individuals with HIV who are undiagnosed or out-of-care¹**.

Achieving this goal will require a comprehensive, collaborative approach that builds upon existing successes and resources while fostering innovation². At its core, RWP 2030 reflects our shared commitment to improving health outcomes for people with HIV. This vision calls on the HIV community to establish and strengthen partnerships, prioritize community engagement, and utilize focused interventions to end the HIV epidemic.

Since 2010, viral suppression among people receiving HIV medical care through the RWHAP has increased significantly, from 69.5% to 90.6% in 2023. Thanks to advancements in treatment, HIV is now a manageable chronic condition for individuals who remain engaged in care, allowing them to live long, healthy lives while preventing transmission to others. Despite this progress, we recognize that approximately 40% of people with HIV in the U.S. are either undiagnosed or not receiving regular care, contributing to most new HIV infections. Addressing these gaps is essential to achieving our goal of ending the epidemic.

Through EHE, we have seen the power of targeted investments and innovative strategies. In 2022, EHE-funded providers served over 22,000 individuals who were new to care and re-engaged more than 19,000 individuals who were out of care. Remarkably, 79.2% of individuals new to care achieved viral suppression, underscoring the effectiveness of our collective efforts. These successes highlight the importance of combining strategic investments with community-driven planning to achieve high-impact outcomes.

Ryan White Program 2030 emphasizes the importance of sustaining care for those already engaged in the RWHAP, while expanding our reach to ensure timely diagnosis and sustained treatment for underserved communities. This will require collaboration across sectors, innovation in care delivery, and a commitment to addressing barriers to care. We must also engage individuals with lived experience and non-traditional partners to inform program planning³ and care models that are responsive to the needs of diverse communities.

¹ Legal authority: §§ 2602(b)(4), 2617(b), 2664(a), and 2671(c) of the Public Health Service (PHS) Act.

² Legal authority: §§ 2603(b)(2)(B), 2620, 2654(c), and 2691 of the PHS Act.

³ Legal authority: § 2681 of the PHS Act.

Ryan White HIV/AIDS Program recipients play a critical role in advancing the goals of RWP 2030 and are responsible for employing sound planning and decision-making processes to determine which HIV related services are prioritized and how much to fund them. As part of these responsibilities, RWHAP recipients must continue to base service priorities and resource allocation decisions on the size, demographics, and needs of people with or affected by HIV. RWP 2030 specifically entails a renewed focus on reaching those who are undiagnosed or out of care. This may necessitate a re-evaluation of existing resource allocations to ensure outreach, engagement, and support efforts are effectively scaled to meet the needs of these especially high-need populations while still addressing the needs of individuals who are currently receiving care through the RWHAP.

We encourage you to begin engaging your partners in discussions about this vision and its implications for your work. Over the next several months, HRSA HAB will work to develop additional guidance and tools to support your efforts in implementing RWP 2030. The [RWHAP Best Practices Compilation](#) contains effective innovative interventions and best practices on outreach, linkage to and engagement in care. [TargetHIV](#) also contains a number of trainings, resources, and reference guides to support recipients and subrecipients in providing care to people with HIV. HAB is also planning a series of listening sessions in 2025 to ensure that RWP 2030 is informed by diverse perspectives and to better understand the challenges and barriers to implementing this vision.

We are confident that, with your continued partnership, we can realize the goals of RWP 2030 and bring us closer to ending the HIV epidemic. If you have questions, please contact your HRSA HAB Project Officer.

Thank you for your unwavering dedication to improving the lives of people with HIV.

Sincerely,

/Laura W. Cheever/

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Framing Our "How to Best Meet the Needs" Process in Alignment with Ryan White Program 2030

As we align with the Ryan White Program 2030 (RWP 2030) vision, we are refining our “how to best meet the needs” process to center access, innovation, and community responsiveness. RWP 2030 calls on all of us to sustain high-quality care for individuals currently engaged in the Ryan White HIV/AIDS Program (RWHAP), while also expanding outreach and service models to reach those who are undiagnosed, out of care, or underserved.

To meet this dual challenge, our process is guided by four core principles:

1. **Maintain** high-quality, consistent services for individuals currently engaged in care.
2. **Expand** our reach to those who remain unserved or underserved—particularly high-need populations.
3. **Innovate** by exploring new partnerships and care models, including with non-traditional sectors such as housing, behavioral health, and justice systems.
4. **Engage** people with lived experience to ensure services are relevant, affirming, and aligned with the real needs of the community.

Our approach is both data-informed and community-driven. Over the next week, we will be reviewing demographic trends, service utilization data, and outcomes—while also creating space for the stories and insights that don’t always show up in the numbers. As we engage in these discussions, I invite you to reflect on what needs to evolve in our service delivery area—and how we might use existing resources more strategically to improve access and outcomes.

Success means more individuals diagnosed, linked, retained in care, and closing the viral suppression gaps we see across our most affected communities. It means funding decisions that reflect today’s realities and emerging needs. And it means building stronger partnerships across sectors to address the social and structural barriers that limit access to care.

In the week ahead, we will begin cultivating a collaborative planning process rooted in the goals of RWP 2030 and guided by the voices and wisdom of our local HIV community.