

111TH CONGRESS
2D SESSION

S. 3627

To ensure that United States global HIV/AIDS assistance prioritizes saving lives by focusing on access to treatment.

IN THE SENATE OF THE UNITED STATES

JULY 21, 2010

Mr. COBURN introduced the following bill; which was read twice and referred to the Committee on Foreign Relations

A BILL

To ensure that United States global HIV/AIDS assistance prioritizes saving lives by focusing on access to treatment.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “HIV/AIDS Save Lives
5 First Act of 2010”.

6 **SEC. 2. SAVING LIVES BY EXPANDING ACCESS TO HIV/AIDS**
7 **TREATMENT.**

8 (a) **ALLOCATION OF FUNDS.**—Subsection (c) of sec-
9 tion 403 of the United States Leadership Against HIV/

1 AIDS, Tuberculosis, and Malaria Act of 2003 (22 U.S.C.
2 7673(c)) is amended—

3 (1) by redesignating paragraphs (1) through
4 (5) as subparagraphs (A) through (E), respectively,
5 and moving such subparagraphs, as so redesignated,
6 2 ems to the right;

7 (2) by striking “For each of the fiscal years
8 2009 through 2013, more than half” and inserting
9 “For each fiscal year—

10 “(1) not less than 75 percent”;

11 (3) in subparagraph (E), as redesignated by
12 paragraph (1), by striking “HIV/AIDS.” and insert-
13 ing “HIV/AIDS; and”; and

14 (4) by adding at the end the following new
15 paragraphs:

16 “(2) not less than 5 percent of the amounts so
17 appropriated shall be expended to expand the use of
18 rapid HIV/AIDS testing, in furtherance of the re-
19 quirement under subsection (d)(2); and

20 “(3) not less than 25 percent of the amount al-
21 located under paragraph (2) shall be expended for
22 assistance to countries that have adopted a national
23 policy of universal, routine, rapid HIV/AIDS diag-
24 nosis of all patients of publicly funded facilities, in-
25 cluding pregnant women and newborns.”.

1 (b) REQUIRED MEDICAL PROGRESS.—Subsection (d)
2 of such section is amended to read as follows:

3 “(d) REQUIRED MEDICAL PROGRESS.—The Presi-
4 dent shall ensure that, by the end of fiscal year 2013—

5 “(1) antiretroviral treatment for HIV/AIDS
6 and associated opportunistic infections or medical
7 monitoring of HIV-seropositive people not in clinical
8 need of retroviral treatment has been provided to no
9 fewer than 5,000,000 people living in countries re-
10 ceiving funding under this Act;

11 “(2) no fewer than 1,000,000,000 rapid tests
12 for HIV/AIDS have been conducted on people living
13 in countries receiving funding under this Act; and

14 “(3) every available intervention is provided to
15 ensure that 100 percent of infants born to HIV-in-
16 fected women in countries where funds are expended
17 pursuant to this Act are born uninfected and remain
18 uninfected for at least the first year after birth, as
19 measured by 100 percent diagnosis of pregnant
20 women for HIV infection and of newborns for HIV
21 antibodies and 100 percent treatment for each such
22 mother or child diagnosed.”.

23 (c) LIMITATIONS.—Such section is further amended
24 by adding at the end the following new subsections:

1 “(e) LIMITATIONS ON RECIPIENT FUNDING.—Recipi-
2 ents of funds appropriated pursuant to section 401—

3 “(1) may not spend more than 10 percent of
4 such funds on administrative expenses; and

5 “(2) may not receive a treatment allocation ex-
6 ceeding an average of \$500 annually per patient
7 treated.

8 “(f) LIMITATION ON ADMINISTRATIVE EXPENSES.—
9 Not more than 10 percent of the amounts appropriated
10 pursuant to the authorization of appropriations under sec-
11 tion 401 in a fiscal year may be made available for admin-
12 istrative expenses.”.

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