



September 2025
Public Policy & Government Relations Update
Volume 1: Issue 7

Introduction

The September issue of the Public Policy and Government Relations (PPGR) update focuses on the department’s priorities for the fall. These priorities are set in the backdrop of unprecedented uncertainties caused by the passage of HR1, and a turbulent political and legislative environment in the United States Congress. This update also provides insight into some of PPGR’s activities, and a reminder for everyone who can, to vote in the upcoming November 4th General election.

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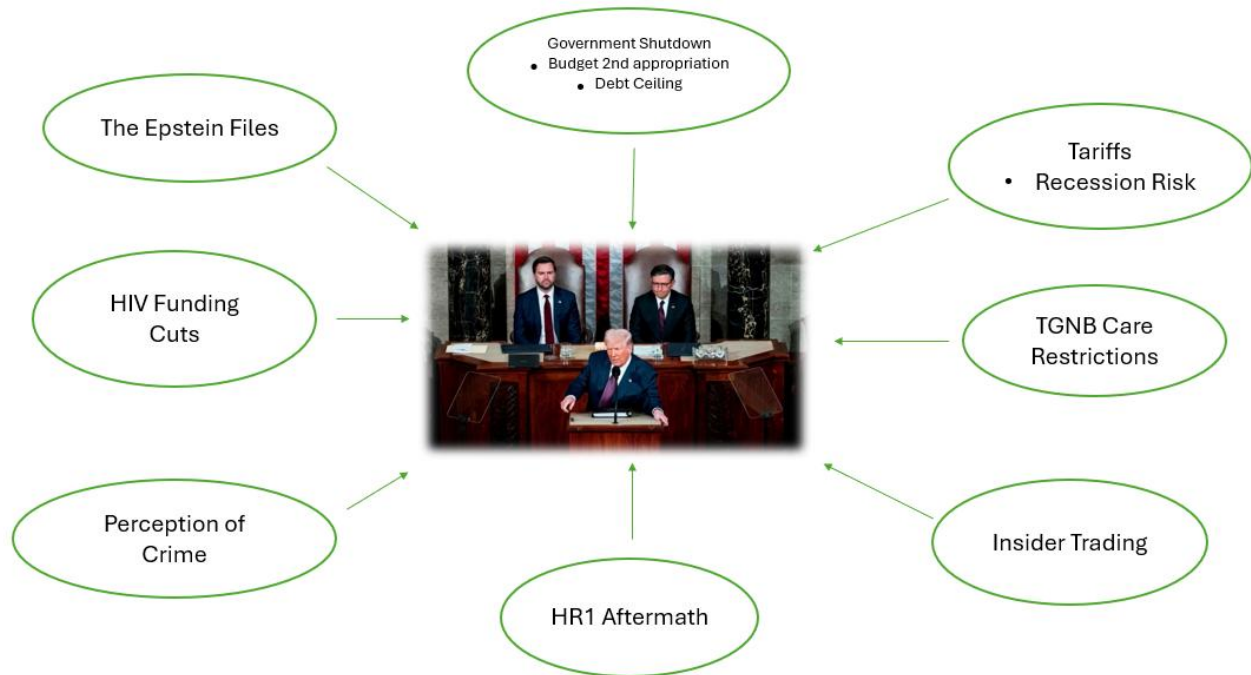
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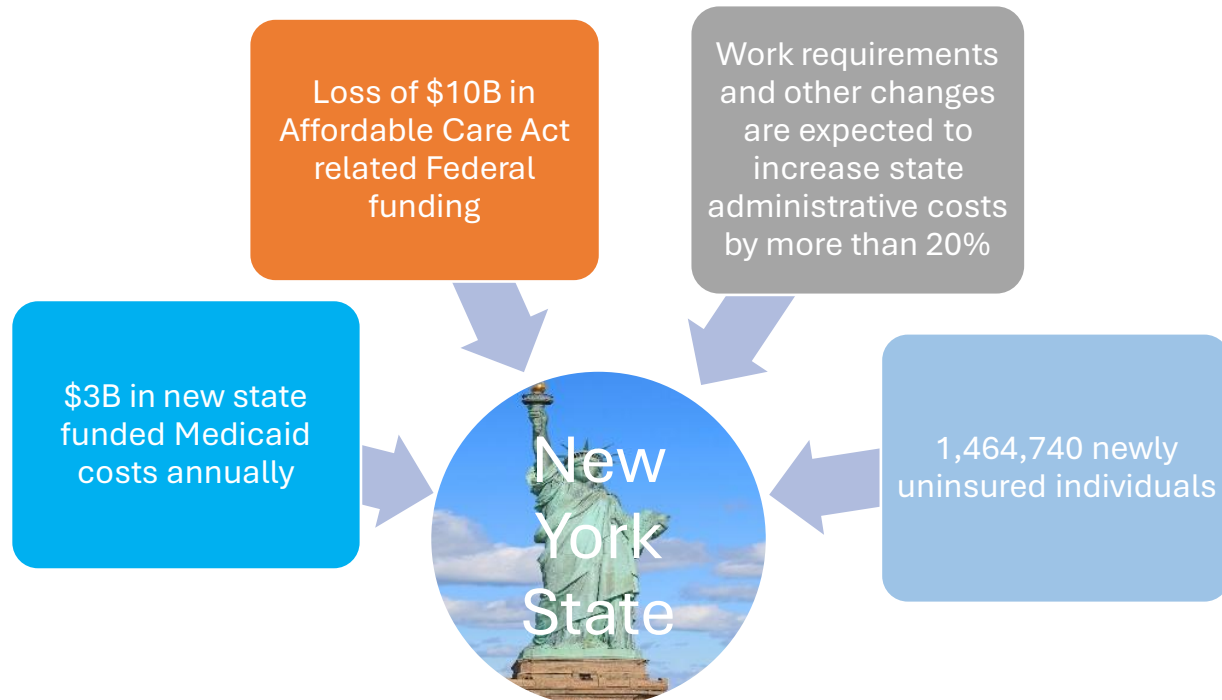
Understanding the Policy Landscape

The United States Congress and New York State leaders face unprecedented challenges caused by instability at the federal level. The following graphics will give our perspective on some of the complexities that factored into our priority setting over the course of the next year.

An uncertain turbulent environment



Recap of HR1 and its impact on New York State



Medicaid and a potential Federal Government Shutdown

If Congress does not pass legislation funding the government for fiscal year (FY) 2026 by midnight on September 30, 2025, the federal government will shut down. If a shutdown happens Medicaid is unlikely to be affected because it is a mandatory program. PPGR is following this issue closely and will provide updates as needed.

Overview of Policy Priorities

The overriding concern of PPGR is to safeguard the interests of Amida Care's members, staff and provider network. PPGR is certain that the SNP Model is more critical at this moment, because we reach folk who are most affected by HIV. Amida Care staff works with our members and provider networks to ensure the best access to care. We believe that New York cannot afford to degrade our work through rate cuts especially when confronting HR1 Medicaid cuts along with proposed federal HIV funding cuts to HIV housing, and health care access through the Ryan White program.

PPGR has outlined three priorities.

1. Prevent/Minimize rate cuts and advance measures that protect our members and provider networks
2. Lead efforts to protect TGNB services and access to care
3. Set up an environment that would, in the future, allow for SNPs to play a greater role in serving more populations that are placed at elevated risk for HIV

To realize these priorities, PPGR is deploying a strategy that educates the public and our elected officials about the value of Amida Care for the state's effort to end the HIV epidemic.

PPGR is working in tandem with the Amida Care Communications Team to tell the story about how our work advances efforts to end the HIV epidemic, through story telling and other means.

PPGR continues to meet with federal, state and local decision makers, as well as work in coalition to mitigate or reverse the negative impacts of HR1 and to protect Medicaid and TGNB access to care. We will also continue to be a leading voice in statewide and national coalitions including Transgender Health Advocates of New York (THANY), New York HIV Medicaid Coalition, Public Health Plan Association of New York (PHP), Association of Community Affiliated Plans (ACAP), AIDS United Public Policy Council (PPC), and others.

We are also facilitating workshops at critical conferences, where we are likely to reach decision makers. These conferences include SOMOS and the New York State Association of Black, Puerto Rican and Asian Legislators.

United States Conference on HIV and AIDS (USCHA 2025)

From September 4 through September 7, PPGR joined CEO Doug Wirth, VP of Communications Carlos Molina and Director of Research & Grants Management Luis Scaccabarozzi for the annual United States Conference on HIV and AIDS 2025 (USCHA).

The conference gathers health professionals, community leaders, advocates, and people living with HIV, along with peers, federal partners, funders, and community-based organizations and has expert-led skill building workshop sessions on health equity, policy, biomedical prevention, and strategies to end the HIV epidemic. Each day has a luncheon where you can hear from keynote speakers on driving innovation, advancing justice, and centering community voices.

This year's focused theme was aging with HIV/AIDS, which the workshops, sessions and presentations were centered around.

It was the first time that PPGR Assistant Casper Christiansen attended this conference. Below is a recap of Casper's perspective of the experience:

Upon arrival on the first day, everything was a bit overwhelming due to the scale of the event, but I had prepared from home, highlighting the workshops I wished to attend. I ended up attending the below workshops:

- *HIV and the Law: How Aging Laws Harm People Living with HIV*
- *Leveraging Digital Health to Close Gaps in HIV Prevention*
- *Amplifying Public Health Infrastructure: Coalition Building for Communities Aging with HIV*
- *Innovation in PrEP: Strategies in Today's Climate for Reaching, Retaining and Reengaging PrEP Clients*
- *From Policy to Infrastructure: Exploring integrating HIV and Aging Systems*
- *Saving Ourselves: Transgender Advocates Navigating HRT, PrEP and TaSP*

"As this was my first time attending a conference in my role at Amida Care I was a bit nervous, but also extremely excited to have the chance to learn and engage with people working in the same sphere."

Attending these workshops were incredible opportunities to learn, as the presenters were engaged and most had group exercises related to the topic incorporated. This threw me into explaining about Amida Care and what we do, which showed me that I know more after my short tenure here than I give myself credit for. It also let me hear from experienced professionals with unique insights into the challenges and what their perspective are on possible solutions, which was incredibly rewarding. Every day at the conference, there was a plenary luncheon, which was really informative for someone who did not know of the challenges and experiences of individuals living with HIV/AIDS, many of whom since the 80's. These presentations were deeply affecting to hear, as they touched on the harsh realities faced by people in a time of unknowns, stigma and sorrow.

I left this conference with energy, much more knowledge and insight, as well as an appreciation for how far we have come in research on HIV/AIDS, as well as a deep respect and appreciation for all the people who work tirelessly in this field. The experience also gave me a deeper respect for the people living with and surviving HIV/AIDS. It was a very humbling, powerful and insightful experience which I am very grateful for.

Voter Registration

November 4, 2025 is the next general election. As we get closer to the date, PPGR reminds you of the importance of voting. Please take time to check your voter registration status, even if you have voted before. If for any reason you are not registered, you have until October 25, 2025 to register.

Below are some important upcoming deadlines and resources which can guide you in upcoming elections, as well as getting you registered to vote, should you happen to not be yet.

Register to vote online via this [link](#) which takes you to the New York State Board of Elections site.

You can find out ways to vote via this [link](#). Please note that by registering to vote on this website, you will be eligible to vote in federal elections as well!

If you are unable to register online, you can download this [form](#) / Spanish [version](#), fill it out and send to your County Board of Elections. You can find your local mailing address [here](#). You may also deliver the form in person to your County Board of Elections. **Please note that forms MUST be signed by hand.**

Deadline for New York State General Election voting is November 4. Early in-person voting period is from Saturday, **October 25, through Sunday, November 2.**

Mail Registration

- Applications must be received by a board of elections no later than **October 25, 2025** to be eligible to vote in the General Election.

In Person Registration

- You may register at your local board of elections or any state agency participating in the National Voter Registration Act, on any business day throughout the year but, to be eligible to vote in the General Election, your application must be received no later than **October 25, 2025.**

Making Changes to Your Registration

- Change of Name and/or Address

The [online registration portal](#) or the [voter registration form](#) can be used to change a name or address. Notices of change of address from registered voters received at least 15 days before a special, primary or general election by a county board of elections must be processed and entered in the records in time for that election.

- Change of Party Enrollment

The [online registration portal](#) or the [voter registration form](#) can be used to change your party enrollment from one party to another or to enroll for the first time in a party. An application to change one's party enrollment for the primary election in any year must be received by the board of elections no later than **February 14th** of that year.

Not sure about your voter registration status? Here's a list of reasons to check your status:

- You've moved
- You've changed your name since you last voted
- You got married

We invite you all to go to the official National Voter Registration Day website vis this [link](#) and explore the many resources and educational materials which are provided, and help you family, friends and neighbors to get registered to vote if they are not already!

Opportunities for Action

AIDS United's Policy Action Center has a few Action Alerts which we invite you to explore and engage with.

- [Tell Congress: No HIV Funding Cuts](#)
- [Protect Affordable Premiums!](#)
- [Take Action to Protect PEPFAR!](#)
- [Speak Up To Protect HIV Prevention!](#)

The screenshot shows the AIDS United Policy Action Center website. At the top, there is a navigation bar with links for 'OUR STORY', 'OUR WORK', 'SECTOR TRANSFORMATION', 'TOOLS & RESOURCES', 'TAKE ACTION', and 'DONATE'. Below this is the 'Policy action center' header, followed by a sub-header: 'We keep you informed on important HIV issues, connect you with Congress, other elected representatives and candidates and give you the tools you need to be a successful HIV advocate.' The main content area features four action alert cards, each with a title, a brief description of the issue, and a 'SEND A MESSAGE' button. The alerts are: 'Tell Congress: No HIV Funding Cuts', 'Protect Affordable Premiums!', 'Take Action to Protect PEPFAR!', and 'Speak Up To Protect HIV Prevention!'.

Please join us in making calls to our elected members in Congress and Senate via [5Calls.org](#) to tell them to Protect HIV Prevention, Care, Housing, and Research. You can find the Action Alert via this [link](#). You can set you location on the webpage on the left. This will give you the phone numbers to your representative.

The screenshot shows the 5Calls.org website. At the top, there is a search bar and a '5 Calls' header. Below this is a list of calls to action, each with a title and a brief description. The calls are: 'Stop the Assault on Our Freedom of Speech', 'Protect funding for Public Education', 'Investigate the Trump Administration's Retribution Killings', 'Oppose a Blank Check Federal Budget', 'Protect Consumers from Trump's Tariffs and Rising Costs', 'Protect Funding and Access to Gender-Affirming Care', 'Stop the Deployment of US Military to Insecure American Territories', 'Ban Unethical Officials from Trading Individual Stocks', 'Impeach Robert F. Kennedy Jr.', and 'Demand the Release of the Epstein Case Files'. To the right of the list is a detailed alert for 'Protect HIV Prevention, Care, Housing, and Research'. This alert includes a sub-header, a brief description of the issue, and a list of key points: 'Cuts \$520 million from HIV, hepatitis, STI and TB prevention funding and would move programs to an untested new agency', 'Chops \$252.8 million in Ryan White Program and Minority AIDS Initiative funds that directly impacts the ability of people living with HIV to access, and care/symptoms to provide, lifesaving evidence-based HIV treatment, dental, education and training programs', 'Slashes over \$21 billion in National Institutes of Health research funds, including up to \$1.4 billion in HIV funds', and 'Eliminates the Housing Opportunities for People with HIV/AIDS (HOPWA) program'. The alert also includes a paragraph about the Senate Appropriations Committee's vote and a call to action for Congress to reject the cuts.

PPGR Round Up

Thank you for taking the time to review this policy update. We in PPGR invite you to join us as we work to advance our priorities and protect the interests of our members, you the staff, and our provider network.

Sincerely,
Joe Pressley, Lyndel Urbano & Casper Christiansen

Additional Reading

Who Is the New Acting C.D.C. Director?

On Thursday August 28, 2025, the Trump administration selected Jim O’Neill, a former biotechnology executive and the deputy to Health Secretary Robert F. Kennedy Jr., to serve as the acting director of the Centers for Disease Control and Prevention. Mr. O’Neill was confirmed as the deputy secretary of health and human services in June. It was a return to the federal government for Mr. O’Neill, who also worked for the department from 2002 to 2008, under President George W. Bush. In the interim, Mr. O’Neill carved out a career in Silicon Valley, working closely with Peter Thiel, the billionaire and Republican megadonor. Mr. O’Neill also served as the chief executive of SENS Research Foundation, a longevity nonprofit that aimed to cure aging-related conditions. Mr. O’Neill has long criticized the Food and Drug Administration as too cautious in approving drugs. He has suggested that the agency approve drugs as soon as they are demonstrated to be safe, even without data on effectiveness. During the Covid pandemic, he indicated support for a number of unproven coronavirus treatments and preventives, including ivermectin, hydroxychloroquine and vitamin D. Read the full article [here](#).

Year Will End With 300,000 Fewer Federal Workers, Trump Official Says

There will be some 300,000 fewer federal workers on the government payroll by the end of December than there were in January, according to the Trump administration’s top human resources official. That amounts to the loss of about one in eight federal civilian workers, and would be the largest single-year reduction since World War II. The director of the Office of Personnel Management, Scott Kapor said the resignation incentives first introduced by the Department of Government Efficiency, or DOGE, accounted for the bulk of the 300,000 departures. He said most would be officially separated by the end of September, and others by the end of the year. Most have already stopped working, even though they remain on the payroll. Read the full article [here](#).


After cuts to food stamps, Trump administration ends government's annual report on hunger in America

The Trump administration is ending the federal government’s annual report on hunger in America, stating that it had become “overly politicized” and “rife with inaccuracies.” The decision comes two and a half months after President Donald Trump signed legislation sharply reducing food aid to the poor. The Congressional Budget Office has estimated that the tax and spending cuts bill Republicans muscled through Congress in July means 3 million people would not qualify for food stamps, also known as SNAP benefits. Read the full article [here](#).

Rural health clinics are closing after Trump’s ‘One Big Beautiful Bill,’ raising the legislation’s political risks

Rural health providers that rely on Medicaid funding were already under strain before the bill cut federal health spending by hundreds of billions of dollars over the next decade. Now, Democrats are linking that crisis to Trump and Republicans in elections this year and next. Under the legislation, Medicaid spending is set to fall by more than \$900 billion over the next 10 years, according to projections from the nonpartisan Congressional Budget Office. About 7.5 million more people would be uninsured in 2034 due to the policy changes, with 5.3 million of them being affected by the addition of work requirements for many low-income adult enrollees, according to the CBO’s most recent analysis. Read the full article [here](#).

ACAP Workplan to mitigate negative efforts of Medicaid Work Requirements

2025-2026 Community Engagement Requirements Workplan 					
Education & Advocacy	Member Plan Support	Partnerships & Coalitions	Research	Communications	Courts & Law
<p>Congress: Impact on stakeholders, including plans & providers & members; Support repeal of HR1; Allow attestation; Need for delay waivers; Use stakeholder input in absence of regulation comment period</p> <p><i>Use as 11/25 Fly-In Asks</i></p>	<p>Policy support: Roundtable call on policy details, timelines</p> <p>Strengthen relationships with NAMD, state associations, other state-based groups</p>	<p>Multiple including political operatives, providers, consumer advocates:</p> <ul style="list-style-type: none"> Leavitt Coalition Enrollment Coalition Partnership for Medicaid Power Group Other 	<p>Completed: Menges Group 2025 work requirements research for ACAP</p>	<p>Internal: List of helpful PVs; plan resources for sharing; other.</p>	<p>Participation in amicus briefs</p>
<p>Administration/CMS: Early & ongoing influence in absence of regulatory comment period; Impact on stakeholders, including plans & providers & members; Allow attestation; Need for delay waivers</p>	<p>Operational support: Operational roundtable call series on requirements, best practices; learning collaboratives</p> <p>Preferred Vendor engagement: List of helpful vendors; PV Showcases; PV Webinars; alliances</p>		<p>Potential: Plan best practices for enrollee education & outreach, other</p> <p>Support: National research on requirements, including impact on enrollment</p>	<p>External: press statements on ACAP activities, research, in response to CMS guidance highlighting ACAP positions, and eventually, loss of coverage; LinkedIn posts and long pieces on policy and plan efforts.</p>	<p>Briefings, including ACAP legal roundtable calls, on HR1-related lawsuits</p>