

New to HIV advocacy or need a refresher on key terms?

Here's a glossary of commonly-used terms at AIDSWatch. This explainer provides a very brief explanation, so we recommend going to relevant workshops if you would like to learn more about a specific issue!

Medicaid: Medicaid is a government health insurance program that can provide coverage for people with limited income or resources. It is especially important to those living with HIV as it [covers 40%](#) of all people living with HIV in the U.S. Medicaid is run by states and funded by both the state and federal governments. Rules and eligibility may be different between states and U.S. territories. Immigrants may also be subject to waiting periods or be excluded from these programs.

Children's Health Insurance Program (CHIP): CHIP is a government health insurance program for uninsured children in families with eligible incomes. The program is intended to bridge the gap between being eligible for Medicaid and being able to afford private insurance. CHIP is run by states and funded by both the state and federal governments. Rules and eligibility may be different between states and territories, including whether the birthing parent is eligible for coverage as well.

Medicare: Medicare is a government health insurance program for people 65 years or older and some people under 65 who are disabled. The program is divided into four main parts that correspond to the types of health care services it will pay for (e.g., in-patient care, outpatient care, prescription drug) and the availability of privately-run health care plans (e.g., Medicare Advantage). Medicare is especially important to people living with HIV as it represents the [second largest source of federal financing](#) for HIV care and treatment in the U.S.

Affordable Care Act (ACA): The ACA is the short name of a law passed in 2010 titled the Patient Protection and Affordable Care Act. Colloquially known as "Obamacare", this law brought major reforms to the United State health care system. Key changes include prohibiting health insurers from denying coverage due to pre-existing conditions (like HIV) and prohibiting discrimination on the basis of race, color, national origin, sex, age, and disability.

Health Care Marketplace: The Affordable Care Act (ACA) established Health Care Marketplaces where individuals and small businesses can purchase private health insurance. Each state has its own Marketplace, though Marketplaces can be operated by the state or federal government. Health insurance plans sold on Marketplaces must meet certain quality standards. Depending on income, people may be able to get financial help in buying and using Marketplace health insurance plans. To see more, visit HealthCare.gov.

Premium Tax Credits: Premium Tax Credits are one type of financial help that people can get when buying a Marketplace health insurance plan. Premium Tax Credits are used to help lower the monthly cost of a plan. The availability and amount of tax credit available depends on a person's or family's income.

Ryan White HIV/AIDS Program: The Ryan White HIV/AIDS Program is a multi-part federal program that helps people living with HIV on low incomes get health care, medications, and other support services. The Program includes the **AIDS Drug Assistance Program (ADAP)**, which helps uninsured or

underinsured people living with HIV get access to prescription drugs. The program also provides federal funding for **AIDS Education and Training Centers (AETC)**, which provide education to health care providers about HIV and other conditions (such as hepatitis, sexually transmitted infections, etc.), and **Special Projects of National Significance (SPNS)**, which supports innovative interventions and models of HIV care (such as models of incorporating telehealth, housing, community health workers into HIV care).

Housing Opportunities for Persons with AIDS (HOPWA): HOPWA is a federal program dedicated to addressing housing needs for people living with HIV within specific income guidelines. It funds grants to state/local governments and nonprofit organizations to provide housing placement assistance, case management, rental assistance, and other services.

Preventive Care: Certain health care services, like screening tests, vaccines, and wellness exams, can help prevent illness. The Affordable Care Act (ACA) requires most private health insurance plans and some Medicaid programs to cover key preventive care at no additional costs. An ongoing lawsuit (*Braidwood Management v. Kennedy*) may impact this coverage in the near future.

Pre-exposure Prophylaxis (PrEP): PrEP is medicine that can help prevent people from getting HIV through sex or injection drug use. PrEP can be taken through a daily pill or through a long-acting injectable. You will need to see a health care provider to talk about what ancillary services (e.g., HIV testing, STI screening) you may need before you can start PrEP. PrEP is currently one of the key preventive care covered by most private health insurance plans at no additional cost.

Post-exposure Prophylaxis (PEP): PEP is an emergency medication regimen for folks who in the previous 72 hours may have been exposed to HIV. There are a few recommended regimens, so you will need to see a health care provider to determine which one works best for you.

Undetectable = Untransmittable (U=U): U=U is shorthand for the [lifesaving message](#): “[A] person living with HIV who is on treatment and has an undetectable viral load cannot sexually transmit HIV.”

HIV Criminalization: Across the United States, many states and territories have laws or policies that criminalize people living with HIV for HIV exposure and/or transmission. Some states also have sentence enhancements that elevate charges only for people living with HIV. These laws may call out “HIV” explicitly or use broader terms like “communicable diseases”.

Harm Reduction: Harm reduction is a [set of strategies and practices](#) intended to reduce negative consequences associated with drug use, while respecting the rights and dignity of people who use drugs. Examples of evidence-based harm reduction tools include syringe exchange programs, overdose prevention centers, and fentanyl test strips.

Meeting your Member of Congress

Remember, you do not need to know all of these terms! When you meet with your members of Congress, focus on telling YOUR story and connecting it to one or two policy asks. If someone asks you something technical that you do not know, feel free to say “I don’t have an answer for you now, but I can ask someone from AIDSWatch to follow up with your office.” Then make sure to include it in your follow-up survey or e-mail aidswatch@aidsunited.org.