1. **Restores Priority for Life-saving Medical Treatment**
   - Requires that “more than half” of bilateral AIDS funding be spent for life saving medical care for people with HIV/AIDS (ARVs, medical monitoring, OI treatment, ARV-related food, and other essential HIV-specific medical treatment)
   - Requires that the target for the number of people receiving ARV under the bill rises above current effort in direct proportion to funding increases for each year and cost-to-treat decreases (baseline for comparison each year is FY08). Under this formula, if all $50B is appropriated, at least 5 million people would be treated with ARVs.

2. **Prevents Funding of Rich Countries (like Russia, China, India)**
   - Strikes language prioritizing funding for rich countries with small HIV epidemics;
   - Adds criteria to ensure that rich countries are not eligible to enter into compacts with PEPFAR (“compacts” are the funding vehicle of choice in the future).

3. **Protects AIDS Patients from Substandard Medicines**
   - Requires that drugs procured by PEPFAR be approved by the FDA or a stringent regulatory authority (such as a European FDA), or, in rare cases, by another quality assurance mechanism determined by the U.S. to approve time-tested generics that have been used successfully for decades on diseases not common in developed countries.

4. **Strengthens Global Fund Transparency and Accountability**
   - Requires posting of all IG reports (consistent with recently-adopted GF policy, regardless of if that policy is weakened in future), Board activities/votes, and U.S. Board delegation positions, and other information on a public website;
   - Requires the U.S. to “work with” the Global Fund to prohibit tariffs from being charged on Global Fund products.

5. **Strengthens Protection of Funding for Abstinence/Fidelity Activities**
   - Clarifies that 50% of any funding for prevention of the sexual transmission of HIV/AIDS must be used *only on* abstinence and fidelity activities (previous language allowed anything else in that 50%).

6. ** Strikes Potential Abortion-related Activities**
   - Removes controversial language requiring “structural prevention” activities throughout the bill.

7. **Protects Faith-based Groups and Others from Discrimination in ALL Funding**
   - Corrects conscience clause to include programs that provide *care* to people with HIV/AIDS, in addition to prevention and treatment services (bill had excluded this category of service).

8. ** Strikes Provisions Promoting Needle Distribution to Injection Drug Users**
   - Removes language subverting current policy of not funding the distribution of needles to intravenous drug users.

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