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October 30, 2009

The Honorable Edolphus Towns
Chairman
Committee on Oversight and Government Reform
2232 Rayburn HOB
Washington, DC 20515-3210

The Honorable Stephen F. Lynch
Chairman, Federal Workforce, Postal Service,
and the District of Columbia Subcommittee
Committee on Oversight and Government Reform
221 Cannon HOB
Washington, DC 20515-2109

Dear Chairman Towns and Chairman Lynch:

The District of Columbia has the highest rate of AIDS cases in the nation. With more than 15,000 cases of HIV or AIDS in the District, it is estimated that 3% of D.C. residents over the age of 12 are living with HIV or AIDS. The District of Columbia receives over \$100 million per year to cope with the disease, the lion's share of those dollars coming from the federal government. However, it has recently been brought to light that millions of dollars appropriated to the District to prevent and treat the disease have been lost, wasted, and stolen by unscrupulous charities and fraudulent nonprofits.

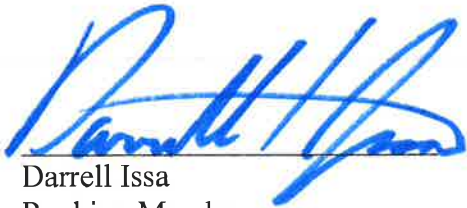
According to the Washington Post, more than \$25 million from the District of Columbia Department of Health's (DOH) HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA) have gone to nonprofits "marked by questionable spending, a lack of clients, or lapses in record-keeping and care."¹ Because of a lack of oversight, instead of the sickest and poorest getting the care they need, funds have flowed into the pockets of criminals. In one egregious case, half a million dollars went to a housing program run by a purported AIDS nonprofit group whose director had been convicted on theft, drug, and forgery charges. Although the group's grant was terminated after investigation by the D.C. Inspector General's Office, repayment was never sought. This is just one example of many involving waste and fraud in federal AIDS funding.

¹ Debbie Cenziper, *Staggering Need, Striking Neglect*, Wash. Post, Oct. 18, 2009.

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We are concerned that the lack of oversight over HAHSTA's funding is adversely affecting the District's most vulnerable residents, and therefore request the Committee begin a bipartisan investigation to examine the District's funding of AIDS programs and services, including how federal AIDS dollars are spent and the oversight framework of DOH and HAHSTA. As the District's AIDS epidemic is a public health crisis, affecting not only those living with the disease, but the entire community, we hope that this Committee will confront the funding and management issues to ensure that D.C. residents are able to receive the services they need and that tax dollars are not squandered.

Sincerely,



Darrell Issa
Ranking Member



Jason Chaffetz
Ranking Member
Federal Workforce, Postal Service,
and the District of Columbia
Subcommittee