

## H.B. 6540: An Act Concerning the Prevention of HIV

The proposed bill seeks to increase access to preventative and prophylactic interventions for minors who are at risk of exposure to HIV by adding the following language (*in italics*) to Conn. Gen. Stat. §19a-592. This additional language provides minors with direct access to HIV prophylaxis in healthcare settings.

*“(a) Any licensed physician or advanced practice registered nurse may provide testing and prophylaxis for the prevention of human immunodeficiency virus infection to minors. The consent of the parents or guardian of the minor shall not be a prerequisite to the testing and prophylaxis for HIV infection.”*

### Impetus

Infectious Disease Clinicians and Adolescent Clinicians have recognized the need for minors to have access to healthcare. Currently, youth who are at substantial risk of HIV infection cannot consent to HIV pre-exposure prophylaxis (PrEP), a prescription-based daily medication for the prevention of HIV. When taken daily, the pill (brand name Truvada) reduces the risk of HIV infection by up to 92%. Instead, youth can only consent to treatment *after* an HIV diagnosis in the current statutory scheme. This bill would ensure that youth at risk for HIV have direct access to prophylaxis *before* they are burdened with life-long illness and treatment.

### PrEP Approved for Minors by FDA

**In May 2018, the FDA expanded the approval of Truvada for pre-exposure prophylaxis (PrEP) to adolescents.** In 2012, Truvada was approved as an HIV prevention method but only for individuals age 18 and older. The decision to extend to adolescents was informed by study results that found PrEP can be effective in reducing the chances for new HIV infections and without evidence of harmful effects on adolescents.

### HIV Affects Millions

- An individual living in the U.S. has a **1 in 99** chance of HIV infection during their lifetime.
- Youth ages 13–24 accounted for more than **1 in 5** new HIV diagnoses in 2015.
- As of 2016, **10,400 people** were living with HIV in Connecticut.
- The number of newly diagnosed HIV cases in Connecticut increased 4 percent in 2017, after a steady decline for over a decade.

### HIV Risk for MSM

- HIV incidence is decreasing among all transmission categories except men who have sex with men (MSM).
- MSM ages 13-24 are the hardest hit by the HIV epidemic.
- 52% of young MSM have **undiagnosed HIV**.

## PrEP Treatment Reduces HIV Risk

- Daily PrEP reduces the risk of getting HIV from sex by more than **90%**.
- Among people who inject drugs, it reduces the risk by more than **70%**.

## What Does PrEP Treatment Involve?

- Patients are connected to an intensive sexual health program.
- Every 3 months, patients receive medical care, HIV/STI testing, prevention and treatment.
- Patients receive only enough medication needed until their next visit.

## What Does PrEP Cost?

- Cost of treatment is around \$1,600 per month.
- A patient is most likely to take PrEP during high-risk periods of adolescence and young adulthood.

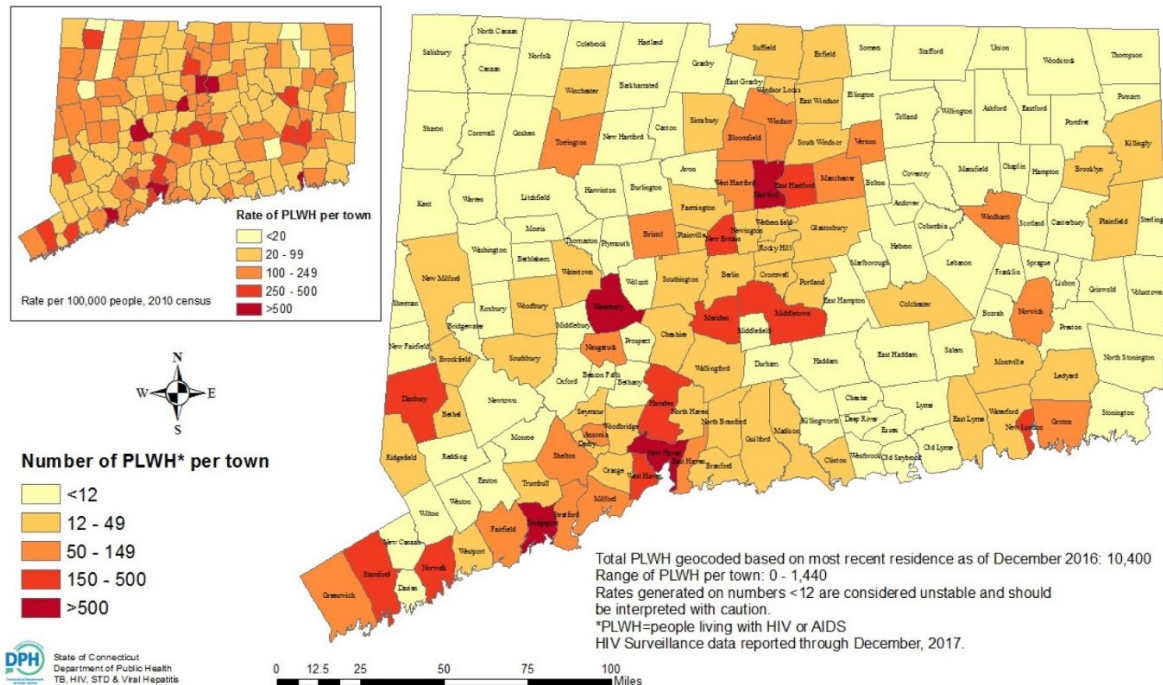
## Minors' Consent Laws for HIV

According to the CDC, minors of a particular age can access PrEP independently in 16 states: Alabama, Alaska, Arkansas, California, Colorado, Delaware, Idaho, Iowa, Kansas, Louisiana, Mississippi, Montana, North Carolina, Oklahoma, Pennsylvania, and South Carolina.

## Connecticut Minors' Consent Laws

The right for minors to consent to HIV prevention is consistent with existing Connecticut laws concerning minors' access to healthcare. Currently in Connecticut, minors have the right to consent to HIV/AIDS testing and treatment, STI testing and treatment, reproductive health care, substance abuse treatment, and mental health treatment. This bill is a natural addition to these laws.

## People Living with HIV by Current Residence, Connecticut, 2016



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