The PrEP Access and Coverage Act

Approximately 1.1 million people in the United States are currently living with HIV, and in 2017, there were 38,281 new HIV diagnoses. HIV disproportionately impacts gay and bisexual men, transgender women, and, in particular, people of color. Members of communities at the intersections of these groups are most heavily impacted. Fortunately, the recent development of Pre-Exposure Prophylaxis (PrEP) has dramatically transformed the prospect of HIV prevention around the world. When taken daily, PrEP—which in the United States is sold under the brand name Truvada—reduces the risk of HIV infection by up to 92%.

However, individuals at higher risk for HIV have vastly underutilized PrEP, due in part to the high price and social stigma surrounding use of the drug. A generic form of Truvada is expected to enter the market soon, but in 2018 Truvada had a list price of over $20,000 per year, which when combined with high out-of-pocket costs for follow-up visits and lab testing places barriers between PrEP and the patients who could most benefit from it. Of the more than 1 million Americans who could benefit from PrEP, only 7 percent—78,360 individuals—filled prescriptions in 2016. In particular, people of color and women have underutilized PrEP. In 2015, while approximately 500,000 Black individuals and 300,000 Latinx individuals could have potentially benefitted from PrEP, only 7,000 Black individuals and 7,600 Latinx individuals received prescriptions.

U.S. Senator Kamala D. Harris (D-CA) is introducing the PrEP Access and Coverage Act, legislation to guarantee insurance coverage for PrEP and create a grant program to fund uninsured patients’ access to this life-changing medication. Specifically, the bill will:

- Require all public and private health insurance plans to cover the drug—as well as all required tests and follow-up visits—without a copay, just as the Affordable Care Act requires insurance to cover contraception and other preventive services.

- Fund a grant program to assist states, territories, and tribal communities in facilitating access to PrEP for people who lack insurance. The bill authorizes grants to cover the cost of the drug, as well as all associated tests and follow-up visits. The grants will also support outreach to physicians and other providers designed to increase understanding of PrEP and the recommended clinical practices for providing care.

- Prohibit companies selling life insurance, disability insurance, and long-term care insurance from denying coverage or charging higher premiums to people who take PrEP.

- Fund a public education campaign to reduce disparities in access to and use of PrEP by educating the public—particularly high-need communities in which PrEP is underutilized—about the safety and efficacy of the drug and to combat stigma associated with using PrEP.

On June 11, 2019, the U.S. Preventive Services Task Force (USPSTF) gave PrEP an “A” rating as a preventive service. This rating means that private insurance companies will have to cover PrEP without cost-sharing for those individuals by 2021. Harris’ legislation goes further by requiring that all private and public insurance plans—including Medicare and Medicaid—cover without a copay not only the drug itself but also all associated doctors’ visits, tests, and monitoring recommended by the U.S. Public Health Service.