

MOTION BY SUPERVISOR SHEILA KUEHL

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For over three decades, Los Angeles County has experienced the second largest HIV epidemic in the United States. At its peak, there were more than 6,000 new HIV infections per year. Today, nearly 60,000 people are living with HIV in the County and approximately 1,850 LAC residents become infected with HIV each year, including large numbers of gay men, African-Americans, Latinos and transgender persons. While we have made great progress in reducing new HIV infections, HIV continues to impact a great many of our families and friends.

As part of our ongoing and evolving local HIV planning efforts, the Department of Public Health’s Division of HIV and STD Programs, in partnership with the Los Angeles County Commission on HIV and the Los Angeles County HIV Prevention Planning Committee, released the *Los Angeles County Five-Year Comprehensive HIV Plan (2013-2017)*. The Plan outlines five main goals to address the local HIV/AIDS epidemic, all of which are aligned with the goals of the White House’s National HIV/AIDS Strategy.

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The first of these goals is to “eliminate new HIV infections” in our County. As we now enter the fourth decade of this disease, it has become clear that implementing multiple interventions simultaneously will give us the greatest chance of preventing new HIV infections in our County. There is no single prevention program or tool, including risk reduction education or condom distribution, which will completely curtail the spread of HIV on its own. The Plan calls for the implementation of new and effective prevention methods and recommends that “new paradigms for prevention, testing, linkage to care, and care services” be developed. Recent research demonstrates that one such new method is the broad and unhindered availability of pre-exposure prophylaxis for HIV.

Pre-exposure prophylaxis, or PrEP, is an evidence-based biomedical HIV prevention method for HIV-negative persons that involves taking a single pill per day. In 2012, the U.S. Food and Drug Administration approved combination anti-retroviral therapy for use as PrEP among sexually active adults at risk for HIV infection. In 2014, the federal Centers for Disease Control and Prevention (CDC) endorsed PrEP as an HIV prevention strategy and issued PrEP clinical guidelines. Multiple international studies have shown significant reduction in HIV acquisition among HIV-negative persons who use PrEP, including evidence that, when taken daily as directed, PrEP can reduce the risk of HIV infection by as much as 96%. Research has shown that PrEP is most effective when it is part of a comprehensive HIV prevention program that includes routine medical care, risk reduction counseling, medication adherence support, and care coordination.

Since the FDA approved PrEP in 2012, Los Angeles County has become home to more PrEP demonstration projects than any other area of the U.S. These projects, including projects at multiple DHS sites, are designed to assess the feasibility, acceptability, and cost-effectiveness of PrEP as an HIV prevention intervention. These demonstration projects show that the delivery of this intervention is, in fact, feasible and that demand is high and growing, particularly among those groups of Los Angeles County residents most at risk for HIV. Outside of these demonstration projects, numerous Los Angeles County residents have been able to access PrEP through their private health insurance plans and Medi-Cal. Despite increasing local access to this intervention, however, many Los Angeles County residents at high risk for contracting HIV, who could benefit from PrEP, are still unable to access this service. Among the factors contributing to limiting access to PrEP are a lack of knowledge and awareness by consumers and providers, cost, and limited PrEP service delivery sites.

The delivery of PrEP as part of a comprehensive public health HIV prevention strategy must include access for high risk uninsured and underinsured individuals in Los Angeles County, especially young African-American and Latino gay men, transgender persons and African-American and Latina women. For these reasons, the Los Angeles County Commission on HIV recommended, in an October 2014 resolution, that this Board authorize and expedite expanded access and comprehensive implementation of PrEP.

The Department of Public Health's Division of HIV and STD Programs has begun developing a comprehensive PrEP strategy that would rely upon a network of publicly and privately operated clinics to deliver PrEP services with significant geographic distribution throughout the County. While PrEP is not a panacea, and should not be considered a replacement for condom usage, research has shown that it can be a very effective tool in our local efforts to eradicate HIV and AIDS. Only by reducing new HIV infections, identifying more HIV-positive individuals through testing and screening, linking HIV-positive persons to care and treatment, and retaining them in care, can we truly end the HIV/AIDS epidemic in our communities.

**I, THEREFORE, MOVE** that the Board of Supervisors:

1. Delegate authority to the Interim Director of the Department of Public Health, in partnership with the Department of Health Services, to develop and implement a plan for a robust, comprehensive program to deliver Pre-Exposure Prophylaxis (PrEP) in Los Angeles County. This plan should consider a broad range of medical providers, including DPH- and DHS-operated clinics as well as community-based organizations and clinics, that can effectively provide PrEP to those at high risk for contracting HIV.
2. Instruct the Interim Director of the Department of Public Health to report back in writing within 30 days on the Pre-Exposure Prophylaxis program implementation plan, including details on:

- a. Program target population;
  - b. Program elements including, but not limited to, a robust public education and awareness campaign, the provision of technical assistance to local providers, and service delivery elements;
  - c. Specific timeline and milestones for program implementation;
  - d. Program monitoring and evaluation plan, and;
  - e. DPH and DHS-financed investment strategy.
3. Instruct the Interim Director of Public Health to develop and release a solicitation within 45 days to fully support private-sector delivery of PrEP services to benefit uninsured and underinsured residents of Los Angeles County at high risk for HIV infection.

S:ES/Implementing prEP in LA County