

House Bill 2574

Ensuring access to emergency HIV prevention

The basics

HIV post-exposure prophylaxis, or PEP, is a combination of medications that, if taken within 72 hours of a potential HIV exposure, is highly effective at preventing infection. PEP may be prescribed to people who have been exposed to HIV at work, who have experienced sexual assault, or who seek care after high-risk consensual sex or injection-drug use.



The problem

People who need PEP commonly face barriers to obtaining, filling, and paying for these emergency medications, especially in rural areas. Many providers aren't familiar with PEP, many pharmacies don't stock the medications, and many people can't afford their co-pay for the drugs. With the 72-hour clock on PEP's effectiveness ticking, people who often have just experienced a trauma are being forced to scramble to obtain this vital HIV prevention tool.

The bill

HB 2574 would ensure access to PEP across Oregon by:

- ▶ Requiring all Oregon hospitals to have a policy on prescribing PEP
- ▶ Mandating that providers in emergency rooms prescribe and dispense at least five days' worth of PEP to patients in the ER, if not medically contraindicated and with patient consent
- ▶ Directing Oregon Health Authority to supply rural ERs with a limited number of complete courses of PEP each year
- ▶ Prohibiting insurers from requiring cost-sharing for PEP

For more information, please contact Cascade AIDS Project's Jonathan Frochtz wajg, at jfrochtz wajg@capnw.org.

House Bill 2574 is endorsed by:



OREGON ACADEMY OF FAMILY PHYSICIANS
MAKING HEALTH PRIMARY

