

H.B. 6540: AN ACT CONCERNING THE PREVENTION OF HIV

H.B. 6540 IS VITAL TO PREVENTING NEW HIV INFECTIONS IN CONNECTICUT

Purpose: To increase access to preventative and prophylactic interventions for minors at risk for HIV by amending Conn. Gen. Stat. §19a-592 to include prophylaxis. This **DOES NOT** change anything in the current statutory framework regarding parental consent.

H.B. 6540 IS CONSISTENT WITH EXISTING CONNECTICUT LAW & WITH FDA POLICY

The right for minors to consent to HIV prevention is consistent with existing laws about minors' access to healthcare. In Connecticut, minors already have the right, without parental consent, to access HIV/AIDS testing and treatment, STI testing and treatment, reproductive health care, substance abuse treatment, and mental health treatment. H.B. 6540 is a **natural addition** that addresses a gap in current laws.

Under the current state statute, Conn. Gen. Stat. §19a-592, a minor, without parental consent, can consent for the **treatment** of HIV. This means that a minor can be tested and treated for HIV if the HIV test result is positive. If the test result is negative, however, the provider **cannot** provide **pre-exposure prophylaxis (PrEP)**, an oral pill that prevents HIV infection. This is NOT a vaccine.

The proposed bill is also consistent with **16 states** in which minors can access PrEP independently, including: Alabama, Alaska, Arkansas, California, Colorado, Delaware, Idaho, Iowa, Kansas, Louisiana, Mississippi, Montana, North Carolina, Oklahoma, Pennsylvania, and South Carolina.

The FDA expanded approval of PrEP to adolescents in May 2018. However, minors in Connecticut – even those at substantial risk of HIV infection – **cannot currently consent** to PrEP. 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.

BACKGROUND ON PRE-EXPOSURE PROPHYLAXIS (PREP) FOR MINORS

HIV Is a Significant Health Risk For Minors

- As of 2016, **10,400 people** were living with HIV in Connecticut
- In 2015, youth ages 13 to 24 accounted for more than **1 in 5** new HIV diagnoses in U.S.
- Young gay and bisexual men of color are at highest risk of HIV infection.

PrEP Is Safe, Effective, and Reduces Costly Lifetime Care

- PrEP reduces the risk of sexual HIV transmission by more than **90 percent**
- Patients on PrEP must engage in routine HIV testing and medical care
- HIV prevention reduces need for **costly lifelong treatment** (averaging \$379,668 in 2010 dollars)

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