

AMERICAN MEDICAL ASSOCIATION INTEGRATED PHYSICIAN PRACTICE SECTION

Resolution: 1
(I-22)

Introduced by: Stephen Parodi, MD

Subject: PrEP is an Essential Health Benefit

1 WHEREAS, The annual incidence of Human Immunodeficiency Virus (HIV) globally is still more
2 than 1.5 million cases in 2022 and the United States continues to experience more than 34,000
3 new infections annually which disproportionately affect communities of color; and

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5 WHEREAS, Pre-Exposure Prophylaxis (PrEP) is an evidence-based intervention that is 99
6 percent effective in preventing HIV transmission in sexual encounters and 74 percent effective
7 in preventing HIV transmission in injection drug use according to the Centers for Disease
8 Control and Prevention¹; and

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10 WHEREAS, PrEP is critical to ending the HIV epidemic in the United States but only 25 percent
11 of the approximately one million Americans who are most at risk for HIV infection are using this
12 prevention; and

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14 WHEREAS, Reducing barriers to care is essential to the effort to reduce HIV infection; and

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16 WHEREAS, A recent ruling² by the United States District Court for the Northern District of Texas
17 held that the Patient Protection and Affordable Care Act's inclusion coverage for PrEP cannot
18 be mandated because it runs afoul of the Religious Freedom Restoration Act, thereby reducing
19 access to this critical intervention and placing other mandated essential health benefits at risk;
20 and

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22 WHEREAS, The limiting of access to tested and proven preventive care removes a valuable
23 tool from integrated, physician-led care teams and thus introduces an unnecessary weakness in
24 the overall integrated care model of healthcare delivery; therefore, be it

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26 RESOLVED, That our American Medical Association supports the continued inclusion of Pre-
27 Exposure Prophylaxis (PrEP) for Human Immunodeficiency Virus (HIV) as an Essential Health
28 Benefit under the Patient Protection and Affordable Care Act (Directive to Take Action); and be
29 it further

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31 RESOLVED, That our AMA support and join legal efforts to overturn the judgment rendered in
32 *Braidwood v. Becerra* in the U.S. District Court for the Northern District of Texas (Directive to
33 Take Action).

¹ Centers for Disease Control and Prevention. PrEP Effectiveness.

<https://www.cdc.gov/hiv/basics/prep/prep-effectiveness.html> Accessed 9/26/2022

² *Braidwood Management Inc. et al. v. Xavier Becerra et al.* 4:20-cv-00283-0. (N.D. TX. 2022).

<https://caselaw.findlaw.com/us-dis-crt-n-d-tex-for-wor-div/1911374.html> Accessed 9/26/2022.

Fiscal Note: Minimal: Less than \$1,000 to implement.

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RELEVANT AMA POLICY:

Pre-Exposure Prophylaxis (PrEP) for HIV (H-20.895)

1. Our AMA will educate physicians and the public about the effective use of pre-exposure prophylaxis for HIV and the US PrEP Clinical Practice Guidelines.
2. Our AMA supports the coverage of PrEP in all clinically appropriate circumstances.
3. Our AMA supports the removal of insurance barriers for PrEP such as prior authorization, mandatory consultation with an infectious disease specialist and other barriers that are not clinically relevant.
4. Our AMA advocates that individuals not be denied any insurance on the basis of PrEP use.

Citation: Res. 106, A-16; Modified: Res. 916, I-16; Appended: Res. 101, A-17

Support of a National HIV/AIDS Strategy (H-20.896)

1. Our AMA supports the creation of a National HIV/AIDS strategy, and will work with relevant stakeholders to update and implement the National HIV/AIDS strategy.
2. Our AMA supports and will strongly advocate for the funding of plans to end the HIV epidemic that focus on: (a) diagnosing individuals with HIV infection as early as possible; (b) treating HIV infection to achieve sustained viral suppression; (c) preventing at-risk individuals from acquiring HIV infection, including through the use of pre-exposure prophylaxis; and (d) rapidly detecting and responding to emerging clusters of HIV infection to prevent transmission.

Citation: Sub. Res. 425, A-09; Modified: CSAPH Rep. 01, A-19; Appended: Res. 413, A-19