**PURPOSE**

Assembly Bill 2640 seeks to reduce the spread of HIV in California by ensuring that HIV-negative individuals receive information about the effectiveness and safety of pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP) during HIV post-test counseling.

**BACKGROUND**

California has the second largest HIV epidemic in the nation; roughly 4,700 individuals are newly diagnosed each year. Black and Latino gay and bisexual men—especially those who are younger—are disproportionately impacted by HIV. The Centers for Disease Control and Prevention recently estimated that if current HIV diagnoses rates persist, about 1 in 2 black gay and bisexual men and 1 in 4 Latino gay and bisexual men in the United States will be diagnosed with HIV during their lifetime. Transgender individuals and women of color are also among the groups at highest risk for HIV infection.

PrEP and PEP are effective HIV prevention interventions that could dramatically reduce new infections in California. PrEP is an HIV prevention strategy in which HIV-negative individuals take a daily medication to reduce their risk of becoming infected. PEP involves taking anti-HIV medications as soon as possible after a potential exposure to reduce the risk of becoming HIV-positive. PrEP and PEP are key components of the National HIV/AIDS Strategy as well as California’s response to the HIV epidemic.

According to the Centers for Disease Control and Prevention, reaching national targets for HIV testing and treatment and scaling up use of PrEP could reduce new HIV infections in the United States by as much as 70 percent by 2020.

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**REFERENCES**


Awareness and use of PrEP and PEP in California remain extremely low. According to a 2015 survey of gay and bisexual men by the California HIV/AIDS Research Program, only 1 in 10 respondents had ever used PrEP. Latino and black respondents were less likely to have used PrEP and less likely to be aware of PrEP than white respondents. It is vital to increase awareness and use of PrEP and PEP among communities at risk for HIV.

AB 2640 builds on AB 446 (Mitchell)—(Chapter 589, Statutes of 2013)—which updated and streamlined HIV testing requirements in the state. The legislation detailed what information must be provided to individuals during HIV post-test counseling, including advising the individual of the need for periodic retesting and explaining the limitations of current testing technology. It is now important to ensure that individuals receiving an HIV test are also provided with accurate information about PrEP and PEP.

**EXISTING LAW**

Health and Safety Code, Section 120990, provides guidance for information that must be given to individuals after receiving an HIV test. If an individual receives a positive test result, providers must “inform the patient that there are numerous treatment options available and identify follow-up testing and care.” If an individual receives a negative test result, providers should “advise the patient of the need for periodic retesting, explain the limitations of current testing technology and the current window period for verification of results, and may offer prevention counseling or a referral to prevention counseling.”

**SUMMARY**

AB 2640 will require that HIV-negative individuals receive information about the effectiveness and safety of all federal Food and Drug Administration-approved methods that reduce the risk of contracting HIV, including PrEP and PEP, during HIV post-test counseling.

**CONTACTS**

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