



Oral testimony delivered on March 30, 2021:

Good afternoon, Chair Prusak, Vice-Chairs Salinas & Hayden, and committee members. My name is Jonathan Frochtzweig; I'm the Public Policy & Grants Manager for Cascade AIDS Project, or CAP. CAP is the oldest and largest provider of HIV prevention and support services in Oregon, and the lead advocate for House Bill 2958.

This legislation will create an alternative pathway for patients to access HIV pre-exposure prophylaxis, or PrEP, and HIV post-exposure prophylaxis, or PEP, from licensed, specially trained pharmacists following a protocol approved by the Oregon Board of Pharmacy.

In 2018, more than 37,000 people were newly diagnosed with HIV in the United States. Two-thirds were gay, bisexual, or other men who have sex with men, almost half were Black, and one quarter were Latinx. PrEP is 99% effective at preventing HIV transmission through sex when taken consistently, and this powerful prevention tool has been available since 2012. Yet, fewer than 1% of patients prescribed PrEP are Black or Latinx. If current HIV diagnoses rates continue, one in two Black men who have sex with men will be diagnosed with HIV in their lifetime. Clearly, bold, innovative policies are urgently needed to make PrEP more accessible. Pharmacist prescription and management of this medication is exactly such a policy.

We at CAP believe most people would benefit from engagement in comprehensive primary care, rather than accessing care at the pharmacy. However, the reality is that primary care is not currently accessible or inclusive for many communities, including rural communities and communities with disproportionately high rates of HIV infection and low rates of PrEP use. Requiring members of marginalized communities to engage in primary care in order to get or stay on PrEP won't result in increased engagement in primary care in these communities; it will simply result in continued underuse of PrEP. When we have an opportunity to safely expand access to a healthcare service by offering it outside traditional healthcare structures, as we do here, we should take it.

In conclusion, I want to remind us of the medical and political establishment's history of ignoring and resisting policies to address the HIV epidemic proposed by people living with and affected by HIV. Here, today, pharmacist prescription and management of PrEP is supported not only by Cascade AIDS Project, but by nearly every HIV-services provider in Oregon, as well as leading HIV health experts—some of whom you'll hear from today. This is the solution being put forward by those with the most knowledge and experience of the problem. Please refer this bill to the House Floor with a "do pass" recommendation. Thank you.