

weakens a person's immunity against opportunistic infections, such as tuberculosis and fungal infections, severe bacterial infections, and some cancers; and

Whereas, According to the New York City Department of Health and Mental Hygiene (DOHMH), despite ongoing improvements in the epidemiology of HIV and the fact that New York City remains on track to reach its goals related to ending the HIV epidemic, inequities in HIV do persist; and

Whereas, In New York City, 1,396 new HIV diagnoses were made and reported in 2020; and

Whereas, According to DOHMH, the number of new HIV diagnoses reported in New York City from 2001 to 2020 decreased overall and among people of all gender, ages at diagnosis, and boroughs of residence, and most race/ethnicities and transmission categories; and

Whereas, However, the decrease was significant for all subgroups except people who are transgender, Asian/Pacific Islander, and transgender with sexual contact; and

Whereas, In 2020, the HIV diagnosis rate among Black men was 1.8 times higher than the rate among Latino/Hispanic men, more than four times higher than the rate among white men, and more than five times higher than the rates among Asian/Pacific Islander, Native American, and multiracial men; and

Whereas, In 2020, the HIV diagnosis rate among Black women was two times higher than the rate among Latina/Hispanic and multiracial women, 22 times higher than the rate among white women, and more than 17 times higher than the rates among Asian/Pacific Islander women; and

Whereas, Increased access to HIV prevention services are needed to address these inequities; and

Whereas, Post-Exposure Prophylaxis (PEP) is an emergency medicine for people who are HIV-negative and may have been exposed to HIV; and

Whereas, Pre-exposure prophylaxis (PrEP) is a safe and effective daily pill that can greatly reduce a person's risk of HIV infection; and

Whereas, Increasing access to PEP and PrEP can help reduce the spread of HIV; and

Whereas, According to DOHMH, in New York State, PrEP is covered by Medicaid and most health

insurance plans without any copays for medicines, lab work, or clinic visits; and

Whereas, Despite this level of access, not everyone has insurance that covers PrEP without a copay; and
Whereas, S688, sponsored by Senator Brad Hoylman, and A807, sponsored by Assembly Member Daniel O'Donnell, requires insurance coverage for PrEP and PEP to prevent HIV infection; and

Whereas, S688/A807 was passed by both the Assembly and the Senate, and should be signed by Governor Hochul; and

Whereas, S728, sponsored by Senator Brad Hoylman, and A2198, sponsored by Assembly Member Didi Barrett, authorizes pharmacists to dispense PrEP and PEP; and

Whereas, S728/A2198 would allow pharmacists to dispense the medications before a patient receives a doctor's prescription for a maximum of 60 days, which would allow people to access PrEP even if they don't have a regular doctor, are waiting for an appointment, have just moved to a new place, or have just become sexually active; and

Whereas, S836, sponsored by Senator Brad Hoylman, and A1732, sponsored by Assembly Member Richard Gottfried, prohibits health insurers from requiring prior authorization for PrEP; and

Whereas, According to the legislation's stated justification, complaints to the New York State Department of Financial Services about health insurance plans "use of stringent prior authorization requirements and improper denials of coverage" resulted in the agency sending a December 2017 circular letter to all health insurers reiterating that "issuers offering prescription drug coverage must cover PrEP," that "such coverage should be subject only to reasonable utilization management measures," and that "no insured may be discriminated against in the prescribing or coverage of medically necessary treatments"; and

Whereas, All those eligible for PrEP and PEP should have access to it, especially communities disproportionately impacted by new HIV diagnoses; now, therefore, be it

Resolved, That the Council of the City of New York calls upon the New York State Legislature to pass, and the Governor to sign, S728/A2198 and S836/A1732, and for the Governor to sign S688/A807, which

would increase access to pre-exposure prophylaxis and post-exposure prophylaxis.

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