

New Rule: Insurers Must Cover Daily and Long-Acting PrEP to Prevent HIV

Updated guidance from the Biden-Harris White House requires insurers to cover the three FDA-approved forms of PrEP to prevent HIV, without cost-sharing.

October 22, 2024 By [Trent Straube](#)

The federal government now requires health insurers to cover the three forms of [pre-exposure prophylaxis \(PrEP\)](#) to prevent [HIV](#)—including two daily tablet regimens and a long-acting injectable. What's more, the health plans must cover related PrEP services without cost-sharing and cannot force patients to choose one form of PrEP over another.

[The updated guidance was issued October 21](#) via an FAQs about the Affordable Care Act released jointly by the Departments of Labor, Health and Human Services and Treasury.

Earlier this year, over 60 HIV advocacy groups had requested federal health leadership to offer clarity on PrEP coverage. Many HIV advocates issued statements praising this week's guidance.

Biden-Harris Administration Requires Insurers to Cover
Long-Acting PrEP to Prevent HIV: <https://bit.ly/4eNJUni>
Posted by [HIV and Hepatitis Policy Institute](#) on [Monday,](#)
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“With low uptake of PrEP among the communities most impacted by HIV, this insurance coverage requirement with zero cost-sharing will help jump-start the use of more effective forms of PrEP and lead to fewer HIV transmissions,” [said Carl Schmid, executive director of HIV+Hepatitis Policy Institute](#). “We are grateful to the Biden-Harris administration for responding to our [request](#) to issue this guidance. Without it, we feel some insurers would continue to only cover daily oral PrEP and not provide PrEP users with the choice they need. With up to a third of privately insured PrEP users still being charged cost-sharing, we must ensure that both federal and state regulators vigorously enforce PrEP coverage requirements.”

“Cost is an all-too-common barrier to health care access in the U.S.,” [said Greg Millett, vice president and director of public policy at amfAR, The Foundation for AIDS Research](#). “PrEP’s potential to reduce HIV transmissions has not yet been fully realized due to low uptake; expanding free access to multiple forms of PrEP is a necessary step as we look to end HIV as a public health threat.”

“Too many people who could benefit from PrEP are not using it. This is especially true for people in racial and ethnic minority communities and women. If insurers properly implement this new policy, it will ensure that cost is not a barrier for accessing PrEP, which will reduce disparities and bring us closer to ending the HIV epidemic,” added [Nick Armstrong, government affairs and advocacy manager at The AIDS Institute](#).

To date, the Food and Drug Administration (FDA) has approved three forms of PrEP: Truvada and Descovy are daily pills, and Apretude is a shot given every two months. Generic (and much cheaper) versions of Truvada are available. To learn more about PrEP, see the [POZ Basics on HIV Prevention: Pre-Exposure Prophylaxis \(PrEP\)](#).

A twice-yearly injectable, lenacapavir as PrEP may be added to prevention options in the near future, as [clinical trial results have shown it to be highly effective](#) in women, gay men and gender-diverse populations.

It remains unclear whether insurers must cover forms of PrEP that receive approval in the future.

Under the rules of the Affordable Care Act (ACA, or Obamacare), preventive health services that receive an A or B grade from the U.S. Preventive Services Task Force (USPSTF) must be covered by health insurance. In August 2023, [USPSTF gave all three PrEP forms of HIV prevention an A grade](#). However, conservatives have in recent years filed lawsuits challenging the ACA’s mandate to cover preventive health services, ranging from PrEP to cancer screenings. Courts have mostly upheld the coverage, but a case could eventually land at the Supreme Court and endanger robust prevention coverage in the future.

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