



PrEP Support Services

Fact Sheet

WHAT IS PREP?

Pre-exposure prophylaxis (PrEP) is a way for people who do not have HIV to help prevent HIV infection by taking an FDA-approved medication. When someone is exposed to HIV through sex or injection drug use, PrEP can help stop the virus from establishing a permanent infection. When used consistently, PrEP has been shown to greatly reduce the risk of HIV infection in people who are at substantial risk. PrEP is much less effective when it is not taken consistently. In PrEP studies, the risk of getting HIV infection was lower—up to 92% lower—for participants who took the medicines consistently than for those who did not take the medicines. (See the [CDC PrEP web page](#) at for a brief description of the clinical trials, with links to the published studies.)

PROGRAM OVERVIEW:

PrEP is a biomedical intervention which requires a strong behavioral component in order to be effective. A licensed health care provider must be involved when PrEP is initiated, to prescribe the medication and conduct baseline medical testing. Following initiation, a medical provider must conduct follow up testing every three months.

In addition, a critical component to the success of PrEP in preventing HIV is medication adherence or taking the medication consistently. PrEP Support Services involves an array of non-medical services that are provided to increase medical adherence and medical follow-up as well as encourage behavioral risk-reduction.¹ Clinicians prescribing PrEP and nonclinical PrEP support providers should work in close collaboration to ensure that both the biomedical and the behavioral components of PrEP are provided, through mutual referrals and ongoing communication when feasible.

The CDPHE program model for PrEP Support Services is based on CDC guidance.² Providers of PrEP Support do not need medical credentials or licensure and may include AIDS Service Organizations, community based organizations, mental health centers, substance abuse treatment centers. All providers of PrEP Support must ensure that the services meet CDPHE confidentiality requirements and have quality assurance procedures for the services provided.

¹ Although PrEP is highly effective, individuals are also strongly advised to continue following risk-reduction practices, including use of condoms.

² Preexposure Prophylaxis for the Prevention of HIV Infection in the United States – 2014 Clinical Practice Guidelines and Clinical Providers' Supplement. See specific web links in the Resources section, below.

PREP SUPPORT CONSISTS OF THE FOLLOWING SERVICES:

- Promoting and marketing your agency as a “PrEP access point;”
- Receiving PrEP referrals from CDPHE;
- Screening for PrEP indicators;
- Facilitating ongoing access to a PrEP prescriber (i.e., a medical provider);
- Providing medication adherence support, including screening and referral for issues known to interfere with adherence (such as untreated mental health or substance use disorders);
- Ensuring HIV testing every 3 months;
- Monitoring that other medical requirements are being met (laboratory testing for Hepatitis B, renal function, etc.);
- Providing ongoing risk reduction counseling;
- Providing condoms and other risk reduction materials;
- Helping with partner communication, including the decision when to stop PrEP;
- Emergency referral for nPEP if needed.

An additional activity to the above PrEP Support Services is providing “motivational pre-PrEP education” by hosting events where PrEP can be discussed. Individuals attending these events would be given an opportunity to enroll in one-on-one PrEP Support Services, which would include the services listed above.

PrEP Support Services have no set duration and should reflect the needs of the client. All PrEP Support clients will have an initial 1 to 3 sessions to complete needed assessments and identify immediate and ongoing needs. There must be at least one follow-up session within 90 to 120 days of a client being referred to a PrEP prescriber, to assure that the client has access to the services listed in the CDC PrEP 2014 Clinical Practice Guidelines. Each client should also be encouraged to access additional follow up services and resources, such as ongoing condom availability, easily accessible HIV testing, risk-reduction counseling, adherence reminder systems, finding a new PrEP prescriber, and counseling for individuals or couples that are considering discontinuing PrEP.

RESOURCES:

[Preexposure Prophylaxis for the Prevention of HIV Infection in the United States - 2014 Clinical Practice Guidelines](#)

[Preexposure Prophylaxis for the Prevention of HIV in the United States-2014: Clinical Providers' Supplement](#)

[CDC's PrEP Web page](#)