

Implementing Status Neutral HIV Prevention and Care in Your Primary Care Setting

Krystn Wagner, MD, PhD
Kristin Rager, MD, MPH

Disclosures

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Learning Objectives

- *Describe the common elements of “Status Neutral HIV Prevention and Care” for all adolescents and adults.*
- *Identify an open-ended question to ask your patients as part of the GOALS Framework for sexual history taking.*
- *Propose one practice change you intend to make as part of “Status Neutral HIV Prevention and Care”.*

An HIV Physician's Journey

- **1989-92 HIV Prevention in Resource Limited Countries**
 - Prevention options: abstinence and condoms
 - No HIV treatment in most communities

- **1992-2002 Medical Training (Mid-Atlantic)**
 - IM and ID Fellowship to become an HIV specialist
 - Inpatient service for patients with AIDS-associated complications
 - Outpatient care emphasis on antiretroviral therapy: high pill burden; side effects and drug toxicities; drug resistance mutations

An HIV Physician's Journey

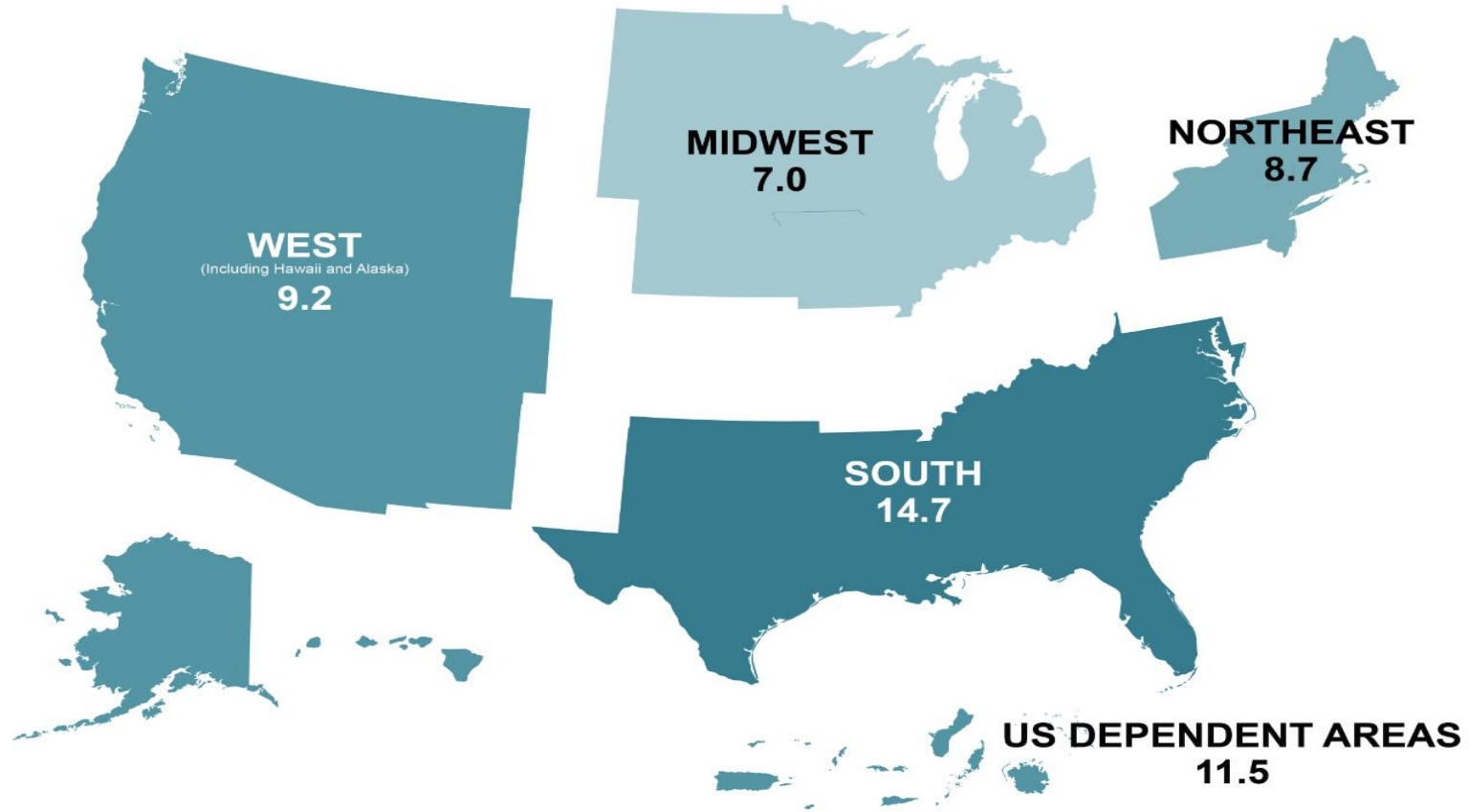
- **2002-2012 Academic HIV Clinic (Northeast)**
 - HIV specialty clinic for patients after diagnosis and linkage to care
 - Multidisciplinary team
 - Treat common co-existing conditions (e.g., substance use, mental health issues, hepatitis C).
 - Address social barriers to care (e.g., lack of transportation, homelessness, food insecurity).
 - HIV specialists and primary care providers were siloed
 - Barrier to implementing CDC recommendation for universal HIV screening (2002)

An HIV Physician's Journey

- **2013-2020 Ryan White Program in FQHC (Northeast)**
 - Small team within primary care clinic
 - Provider, Nurse, MA, 2 Case Managers
 - FDA approves emtricitabine-tenofovir disoproxil fumarate as HIV pre-exposure prophylaxis (2012)
 - Primary care clinicians are best for routine HIV screening and PrEP
 - Organizational Change
 - Train providers: HIV/STI/Hep C screening, PrEP
 - Develop referral system for HIV, PrEP, and gender affirming care
 - Create welcoming, safe space for sexual and gender minority patients



Rates of New HIV Diagnoses in the US and Dependent Areas by Region, 2021*†



* Rates are per 100,000 people.

† Among adults, adolescents, and children under the age of 13.

Source: CDC. Diagnoses of HIV Infection in the United States and dependent areas, 2021. *HIV Surveillance Report* 2023;34.

New HIV Diagnoses

Number of new HIV diagnoses, 2020

15,661

Rate of new HIV diagnoses per 100,000 population, 2020

15

Percent of people newly diagnosed with HIV, by Sex, 2020



Percent of people newly diagnosed with HIV, by Race/Ethnicity, 2020



Percent of people newly diagnosed with HIV, by Age, 2020



2020 New HIV Diagnoses in South aidsvu.org

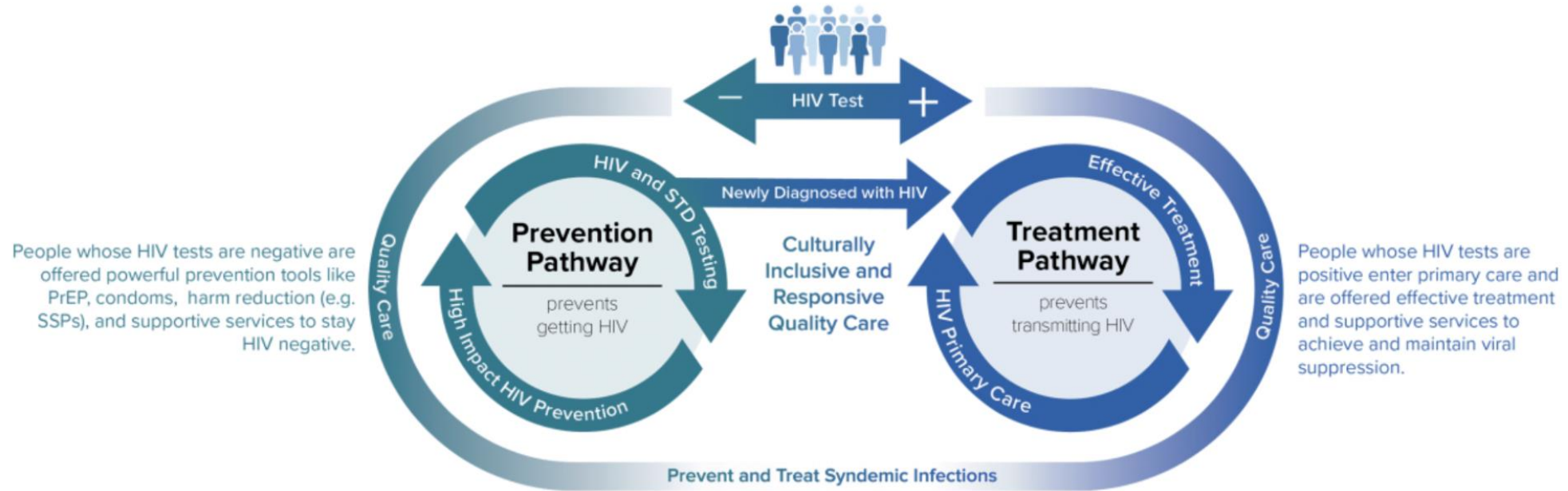
An HIV Physician's Journey

- 2021 Academic HIV Clinic (Southeast)
 - Challenges
 - New and late HIV diagnoses common
 - Young, same-gender-loving Black men
 - Unequal access to sexual health, HIV/STI screenings, prevention options, PrEP prescriptions
 - Intersectional Stigma: HIV, Race, Sexual Orientation, Gender Identity
 - Opportunities
 - Community experts (e.g. Southern AIDS Coalition)
 - Primary Care Providers, Pharmacists, Health Departments
 - **Whole Person Care: “Status Neutral Model of HIV Prevention and Care” (NYC DOH; CDC)**

Status Neutral Model

- Applies to all adolescents and adults
- Opens door to both prevention and care
 - Universal education about PrEP and U=U
- Reduces stigma by including everyone
- Fits within sexual health and primary care

Status Neutral HIV Prevention and Care



Follow CDC guidelines to test people for HIV. Regardless of HIV status, quality care is the foundation of HIV prevention and effective treatment. Both pathways provide people with the tools they need to stay healthy and stop HIV.

GOALS Framework for Sexual Health Taking In Primary Care

Sarite A. Golub, PhD MPH, Hunter College

Give	Offer	Ask	Listen	Suggest
Give a preamble that emphasizes sexual health	Offer opt-out HIV/STI testing and information	Ask an open-ended question	Listen for relevant information and fill in the blanks	Suggest a course of action <ul style="list-style-type: none">• All: HIV/STI screening, PrEP education, U=U• Tailored: 3 site STI testing, PrEP, contraception

Role play . . .

G: "I'd like to talk with you for a few minutes about sexual health. I talk to all of my patients about sexual health because it's an important part of overall health."

O: "First, I test all of my patients for HIV and sexually transmitted infections. May I include this as part of your lab work today?"

Role play . . .

A: "What would you say are your biggest sexual health questions or concerns?"

- *"Since I was treated for gonorrhea, I've worried about getting HIV."*
- *"My partner is undetectable and doesn't use condoms."*
- *"Sex has become painful."*

L: Fill in the blanks (e.g., partners, practices, past STIs, protection, pregnancy prevention, pleasure) to elicit information that might be needed for course of action.

Role play . . .

"My partner is undetectable and doesn't use condoms."

- Identifies as bisexual, cisgender man
- One male partner with HIV
- Anal sex without condoms
- History of rectal gonorrhea
- Last HIV/STI screening over 12 months ago
- Worries about HIV infection during and after sex

Suggest a Course of Action / Shared Decision Making

- HIV and 3-site STI screening (genital, oropharyngeal, anorectal)
- Share information and discuss options
 - U=U
 - Relevant to current partner and future partners
 - If HIV test result is positive
 - HIV/STI Prevention
 - Reasons for PrEP: within his control, peace of mind
 - PrEP options: daily pill, event driven, long acting injectable
 - PrEP doesn't protect against STIs or pregnancy
 - PrEP prescription if rapid HIV test negative (blood test pending)
 - Follow-Up (in person or telemedicine)

Positive Messaging

Safe space for open conversation

Judgement free listening and communication

Importance of sexual health and wellness

Options for HIV, STI and pregnancy prevention

Reasons for prevention needs

- **Avoid bias and alienating terms like "high risk"**

Integrating Sexual Health and Status Neutral Care



Integrating Sexual Health and Status Neutral Care

■ Clinical Care

- Primary care team is ideal for status neutral care
 - Relationships with patients
 - Health screenings and preventative medicine
 - HIV care IS primary care!
- Any health care provider can prescribe PrEP and ART
- Not necessary to do it all but know where to refer
 - [HIV.gov/locator](https://www.hiv.gov/locator) --> zip code or city and state
 - Find a Ryan White HIV/AIDS Program Medical Provider ([hrsa.gov](https://www.hrsa.gov))
 - American Academy of HIV Medicine (AAHIVM) Referral Link
 - State HIV/AIDS Hotline

USPSTF Recommendations

Universal HIV Screening (Grade A)

- Screen for HIV infection in adolescents and adults aged 15 to 65 years.
- Younger adolescents and older adults who are at increased risk of infection should also be screened.
- Screen for HIV infection in all pregnant persons, including those who present in labor or at delivery whose HIV status is unknown.

2019

Screening for Hepatitis C Virus Infection (Grade B)

- Screen for HCV infection in adults aged 18 to 79 years

2020

2019

Prevention of HIV Infection: Preexposure Prophylaxis (Grade A)

- Clinicians should prescribe pre-exposure prophylaxis using effective antiretroviral therapy to persons who are at increased risk of HIV acquisition to decrease the risk of acquiring HIV
- Applies to adults and adolescents weighing at least 35 kg (77 lb) at risk of HIV acquisition

USPSTF Recommendations

2021 CDC Recommendation

All sexually active adult and adolescent patients should receive information about PrEP

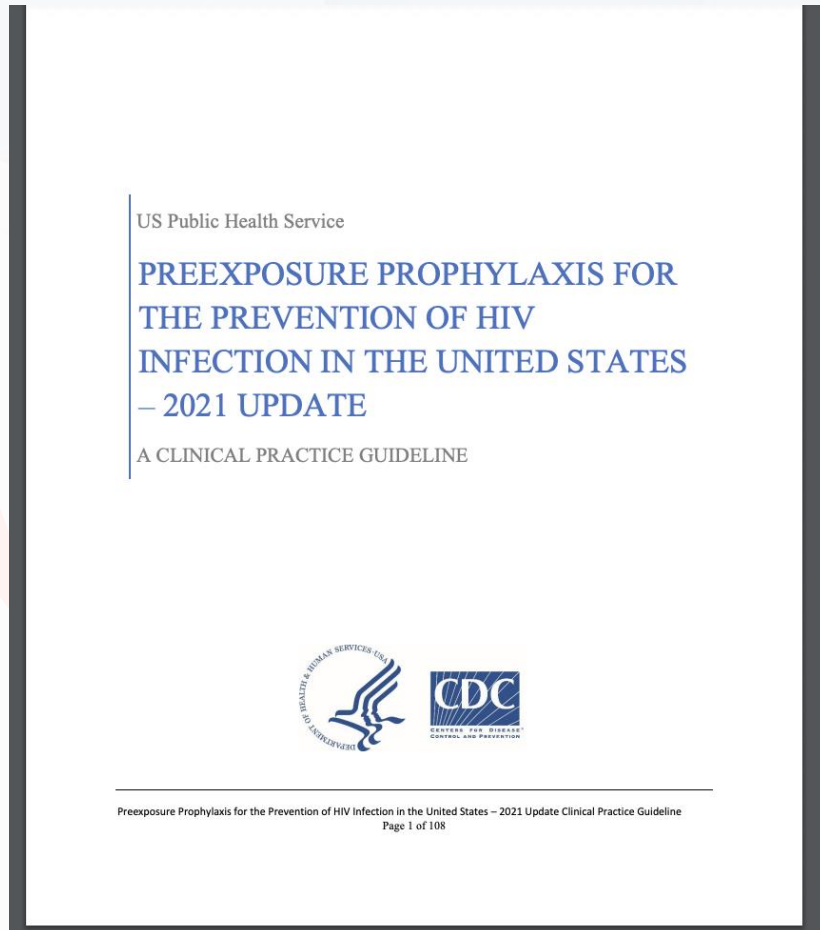
2023 Prevention of Acquisition of HIV: Preexposure Prophylaxis (Grade A)

Clinicians prescribe preexposure prophylaxis using effective antiretroviral therapy to persons who are at increased risk of HIV acquisition to decrease the risk of acquiring HIV.

3 antiretroviral options including cabotegravir, a long-acting injectable

Most private health insurance and Medicaid expansion programs required to cover without patient cost sharing.

CDC Guideline Reports



- Pre-exposure Prophylaxis (PrEP)
- Occupational Postexposure Prophylaxis (PEP)
- Nonoccupational Postexposure Prophylaxis (nPEP)

Clinical Practice Guidelines

Clinicalinfo.hiv.gov/en/guidelines

- Adult and Adolescent ARV (updated 5/26/23)
- Adult and Adolescent Opportunistic Infections
- Perinatal HIV Clinical Guidelines
- Pediatric ARV

Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV



Developed by the HHS Panel on Antiretroviral Guidelines for Adults and Adolescents—A Working Group of the NIH Office of AIDS Research Advisory Council (OARAC)

How to Cite the Adult and Adolescent Antiretroviral Guidelines:

Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV. Department of Health and Human Services. Available at <https://clinicalinfo.hiv.gov/en/guidelines/adult-and-adolescent-arv>. Accessed (insert date) [insert page number, table number, etc., if applicable].

AETC Program National Centers and HIV Curriculum

- **National Coordinating Resource Center** – serves as the central web-based repository for AETC Program training and capacity building resources; its website includes a free virtual library with training and technical assistance materials, a program directory, and a calendar of trainings and other events. Learn more: <https://aidsetc.org/>
- **National Clinical Consultation Center** – provides free, peer-to-peer, expert advice for health professionals on HIV prevention, care, and treatment and related topics. Learn more: <https://nccc/ucsf.edu>
- **National HIV Curriculum** – provides ongoing, up-to-date HIV training and information for health professionals through a free, web –based curriculum; also provides free CME credits, CNE contact hours, CE contact hours, and maintenance of certification credits. Learn more: www.hiv.uw.edu
- **3rd Edition launches September 1, 2023**



Technical Assistance Request

Your Details

Let us know how to get back to you.

First Name *

Last Name *

Email Address *

How can we help?

Feel free to ask a question or simply leave a comment.

Comments / Questions *

Our regional AETCs provide education, training, consultation, and clinical decision support to health care providers, allied health professionals, and health care support staff who care for PWH or at high risk of HIV. Training, education, and technical assistance focus on developing the knowledge, skills, and behaviors of health care professionals within three competency areas:

- Clinical Care;
- Teamwork
- Organization and Systems Management.

Southeast AETC (SEAETC): www.seaetc.com

Additional Resources

- **International Antiviral Society – USA (IAS-USA)**
 - Guidelines
 - Webinars (live and on-demand)
 - Courses and Conferences (CME credit)
 - In-person courses held in several U.S. cities each year
 - Virtual courses held via Zoom
 - Presentations recorded and archived online
 - Co-sponsor National Ryan White Conference on HIV Care and Treatment

Additional Resources

- **American Academy of HIV Medicine (AAHIM)**
 - Provider Resources
 - ***Fundamentals of HIV Medicine*** textbook (September 2023; order online)
 - Core Curriculum in HIV (online)
 - Credentialing as HIV Specialist
 - Direct care to at least 25 persons living with HIV within 36 months
 - 45 credits/activity hours of HIV and/or HCV-related continuing education
 - Examination (online)

ViiV Healthcare Community Engagement Risk to Reasons Guide



Risk to Reasons Guide

Risk to Reasons: A Guide for Communicating and Connecting with Black Women about HIV provides insights and recommendations for advocates, service providers, public health experts, researchers and communicators about how to make HIV prevention and care more relevant and salient for Black women.

[Read more](#)

Integrating Sexual Health and Status Neutral Care



Integrating Sexual Health and Status Neutral Care

■ Teamwork

- Team-based model of care that relies on complementary skills, shares time commitment and builds trust with patients

- Medical Assistant, Nurse, Case Manager, **Peer Navigator**

■ Team Trainings

- Communication: talking about sex, PrEP, transgender health
 - Cultural Competency: using correct pronouns, chosen names

- Clinical skills: HIV/STI testing (Rapid HIV testing), medication adherence counseling, long acting injectable

- Grow Your Team! (e.g., behavioral health)

Integrating Sexual Health and Status Neutral Care



Integrating Sexual Health and Status Neutral Care

- Organization and Systems Management
 - Identify allies within departments
 - Ally within leadership
 - Offer All Staff and New Employee trainings
 - Provide visual cues that LGBTQ+ welcoming clinic
 - Connect with community (listen)
 - Share protocols
 - Develop EMR reminders, lab order sets, note templates
 - Conduct "root cause analysis" if error --> improve systems

Integrating Sexual Health and Status Neutral Care



Integrating Sexual Health and Status Neutral Care

■ Community Connections

- Get to know people within your chosen community
 - Look both within and outside your organization
 - SEAETC team and conference attendees
 - Respect lived experiences of community members
- Explore different spaces (e.g., another clinic, local health department, PRIDE festival or march, community forums)
- Create or support opportunities that you can't do alone



Case Study

Kirstin Rager, MD, MPH
Medical Director
Nashville CARES

Questions?

