



Maryland
Hospital Association

SB 251- Public Health - Treatment for the Prevention of HIV - Consent by Minors
Position: Support with Amendments

Bill Summary

SB 251 would provide that a minor has the same capacity as an adult to consent to treatment for the prevention of human immunodeficiency virus (HIV) and prohibit a licensed health care practitioner, in some cases, from disclosing certain information about a minor's diagnosis or treatment.

MHA Position

The Centers for Disease Control and Prevention (CDC) reports that in 2016, 21 percent of all new HIV diagnoses were for youth between 13 to 24 years old. The CDC also reports that this population is the *least likely* to access care in a timely manner¹. Clinical studies show that taking pre-exposure prophylactic medication (PrEP) can reduce the risk of developing HIV from sexual transmission by more than 90 percent when used consistently². Likewise, post-exposure prophylaxis, medication taken after an individual may have had exposure can reduce the risk of HIV infection by 80 percent³. The CDC estimates that the lifetime treatment cost for HIV is about \$370,000 per individual⁴. The physical and emotional cost, however, is unquantifiable, especially because there is medication available with such a high success rate for prevention

The state has proactively worked to increase access to pre-exposure prophylactic medication, and currently 12 local health departments across the state either prescribe the medication or can refer individuals to a provider where they can access it. These programs also offer access to a navigator program that offers education on HIV prevention and help obtaining insurance coverage or access to free or discounted medication.

Maryland's hospitals are committed to deliver high quality health care and improving the health of all Marylanders. That is why the state's hospital field supports eliminating barriers to timely access to this medication, especially for youth. Seventeen other states have passed legislation to protect a minor's right to consent for treatment for HIV prevention⁵.

For these reasons, we urge you to give **SB 251 a favorable report with the sponsor amendment** that retains the medical provider's discretion of treatment and disclosure based on patient needs.

¹ CDC HIV Among Youth (April, 2018). <https://www.cdc.gov/hiv/group/age/youth/index.html>

² CDC Pre-Exposure Prophylaxis (November, 2018). (<https://www.cdc.gov/hiv/risk/prep/index.html>)

³ Post-Exposure Prophylaxis to Prevent HIV Infection, World Health Organization (December 1, 2014).

<https://www.who.int/hiv/topics/prophylaxis/info/en>

⁴ CDC HIV Cost-effectiveness (March 8, 2017).

<https://www.cdc.gov/hiv/programresources/guidance/costeffectiveness/index.html>

⁵ CDC Minors' Consent Laws for HIV and STD Services (November 30, 2018).

<https://www.cdc.gov/hiv/policies/law/states/minors.html>