Introduction
Pre-exposure prophylaxis (PrEP) is a medication to prevent HIV, whereby users take oral antiretroviral drugs daily to lower their chances of getting HIV. PrEP is for people without HIV who are at risk of acquisition from sex or injection drug use. People at risk who should be assessed for PrEP include sexually active gay and bisexual men without HIV; sexually active heterosexual men and women without HIV; sexually active transgender persons without HIV; persons without HIV who inject drugs, and; persons who have been prescribed non-occupational post-exposure prophylaxis (PEP) and report continued risk behavior, or who have used multiple courses of PEP. The guidelines underscore the importance of counseling that covers medication adherence and HIV risk reduction and recommends regular monitoring of HIV infection status, side effects and risk behaviors.

The Centers for Disease Control and Prevention (CDC) recommends PrEP as an HIV prevention strategy. Taking PrEP medication as prescribed reduces the risk of getting HIV via sexual contact by about 99% and reduces the risk of getting HIV by at least 74% among persons who inject drugs.

PrEP is a powerful HIV prevention tool and should be combined with condoms and other prevention methods to provide even greater protection than when used alone. PrEP has the potential to alter the course of the HIV epidemic in the United States if targeted to the right populations and used as directed.

To advance the goals of the National HIV/AIDS Strategy and the Ending the HIV Epidemic (EHE) Initiative, public health agencies need to increase access to and use of PrEP in people at risk of exposure to HIV. As an HIV prevention partner, you play a critical role in expanding access to and increasing uptake of PrEP, and addressing practical implementation issues. Providing effective prevention options for people at high risk for acquiring HIV is a key priority for CDC and a critical component of your HIV prevention efforts as supported through CDC’s flagship HIV Prevention Programs for Health Departments.

Guiding Principles for using DHP funding for PrEP-related activities:

- Educating about and increasing access to PrEP is a core requirement of CDC’s HIV prevention funding opportunities/programs.
- PrEP-related activities to support prevention services must be implemented as part of
a comprehensive HIV prevention program that includes, as appropriate, linkage and referral to prevention and treatment services for sexually transmitted infections (STIs) and viral hepatitis, substance abuse and mental health, and other prevention support services.

- To minimize duplication of effort, DHP health department recipients should coordinate and collaborate with other agencies, organizations, and providers involved in PrEP-related activities, STI, viral hepatitis, substance use treatment and prevention, and HIV prevention activities.
- Funds for PrEP-related activities should ensure that referral and linkage to existing HIV prevention and treatment services are maintained.
- PrEP-related activities are subject to the terms and conditions incorporated or referenced in the recipient’s current cooperative agreement or grants.

Funds may be used for, but are not limited to, the following:

**PrEP Awareness, Education, and Program-Related Services:**
- Planning for how to most effectively incorporate PrEP into prevention education and services, including evaluating what collaborations will be needed.
- Educational materials about how to use PrEP in conjunction with other HIV prevention and care services, as well as STI, viral hepatitis, mental health and substance abuse treatment.
- Development and delivery of the HIV risk-reduction counseling and behavioral interventions that must be provided with PrEP.
- Communication activities related to disseminating information about PrEP.
- Evaluation activities for PrEP-related activities.
- Personnel (e.g., program staff) conducting the above PrEP-related activities.

**Additional Ancillary Support Services:**
- Laboratory costs for screening or monitoring PrEP per CDC guidelines for uninsured or underinsured people receiving PrEP in not-for-profit or governmental clinics.
- Services provided via mobile units and other novel engagement strategies.
  - PrEP candidates may need assistance with transportation, communication with clinicians, and
  - Navigating other support services.
- Limited personnel costs related to the provision of PrEP medication if coupled with other supportive PrEP services, e.g., eligibility assessments, risk reduction education, referral/navigation support to other essential services, etc.
  - These activities must be a well-defined set of duties that are in addition to writing prescriptions and provision of clinical care.
• The funded percentage for these duties may not exceed 75% of the FTE.
• Other sources of funding are needed to support any duties specifically related to clinical care.

Recipients may provide assistance, no more than 15 percent (15%) of the overall award amount, to support PrEP ancillary support services. Recipients are required to notify CDC, if coverage demands exceed the allotted percentage, to secure permission to redirect additional resources to meet the projected demand.

This guidance allows flexibility to utilize CDC’s flagship health department funding for program recipients to pay for CDC-recommended clinical care costs related to PrEP as payor of last resort. Further, this guidance allows flexibility for recipients to provide immediate, transitional support while seeking alternative, long term support for individuals as other eligible resources are secured for clients.

Funds may not be used for:

• PrEP medications. CDC funds will not be used to cover the costs of antiretroviral medication.
• Clinical care except as allowed by law.
• All personnel and clinical staff costs for the provision of PrEP medication and recommended clinical care associated with PrEP. See limitations above.

Applicable cooperative agreements:

Funding to support PrEP ancillary support services should be clearly outlined within the budget narrative. Additional programmatic reporting may be requested at a future date. Please refer to your respective Notice of Funding Opportunity (NOFO) for guidance on submission of programmatic and budget requirements.

For more information on the guidelines and other supporting documents, visit CDC PrEP Website. Should you need additional information, specific to capacity building assistance, or to request training and technical assistance for the health department, please contact your HIV prevention project officer in CDC’s Division of HIV Prevention, Program Development and Implementation Branch.