

Working to end sexual violence in Maryland

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Testimony in Support of Senate Bill 331 Lisae C. Jordan, Executive Director & Counsel Laura Jessick, Sexual Assault Kit Initiative Project Manager February 8, 2022

The Maryland Coalition Against Sexual Assault (MCASA) is a non-profit membership organization that includes the State's seventeen rape crisis centers, law enforcement, mental health and health care providers, attorneys, educators, survivors of sexual violence and other concerned individuals. MCASA includes the Sexual Assault Legal Institute (SALI), a statewide legal services provider for survivors of sexual assault. MCASA represents the unified voice and combined energy of all of its members working to eliminate sexual violence in the State of Maryland. We urge the Judicial Proceedings Committee to report favorably on SB331.

Senate Bill 331 – Preventing HIV for Rape Survivors

This bill repeals the sunset on the Program for Preventing HIV Infection for Rape Victims.

Since 2019, rape survivors have been provided with access to medication to prevent HIV infection after a sexual assault. This bill repeals the program sunset and establishes it permanently. This will ensure that upon request of a rape victim, and with a prescription from his or her medical provider, the state will pay for the full course of HIV prevention treatment known as non-occupational post exposure prophylaxis (nPEP). The permanent program also provides coverage of necessary, and critical, follow-up care for patients taking nPEP.

One of the risks faced by rape survivors is HIV infection.¹ Studies of HIV transmission have been based on consensual sexual activity, and do not account for the violence of rape, so it is unclear what the risk level is, however, 91.9% of rape victims reported some degree of initial fear or concern for contracting HIV and 72.6% reported extreme fear or concern for contracting HIV.² However, the cost of medication along with the short window to start effective treatment can be a major deterrent to receiving care.³ Treatment must begin within 72 hours of the assault and the cost of a full treatment regimen can range from \$1,500 to over \$3,000 depending on health insurance coverage.^{4,5} With a permanent program that provides timely and free access to this medication, rape survivors have one less burden to navigate.

¹ Draughon, J. (2012). Sexual Assault Injuries and Increased Risk of HIV Transmission.

² Resnick, H., Monnier, J., Seals, B., Holmes, M., Walsh, J., Acierno, R., Kilpatrick, D., (2002). Rape-Related HIV Risk Concerns Among Recent Rape Victims.

³ Draughon Moret, J.E., Sheridan, D.J., Wenzel, J.A. (2021) "Reclaiming Control" Patient Acceptance and Adherence to HIV Post-Exposure Prophylaxis Following Sexual Assault. *Global Qualitative Nursing Research*, 8.

⁴ Center for Disease Control and Prevention (2016). *Updated Guidelines for Antiretroviral Postexposure Prophylaxis After Sexual, Injection Drug Use, or Other Nonoccupational Exposure to HIV*. Retrieved from: https://www.cdc.gov/hiv/pdf/programresources/cdc-hiv-npep-guidelines.pdf

⁵ Maryland Sexual Assault Evidence Kit Policy & Funding Committee (2019). *Annual Report: 2019*. Retrieved from: https://www.marylandattorneygeneral.gov/Pages/Groups/2019_SAEK_Committee_Annual_Report.pdf Daiber, D. (2018).

The state of Maryland can afford to prevent HIV for rape survivors. Not every rape survivor that presents for a sexual assault forensic exam (SAFE) will qualify for and choose to take, nPEP using the state program. Some patients choose to utilize their health insurance or a payment assistance program. Since its inception on October 1, 2019 through September 10, 2021, the pilot program identified 1,147 sexual assault survivors that qualified for nPEP medication, of which 328 chose to take the medication. Over this nearly two year period, costs totaled \$707,374.51, including \$379,077.65 for nPEP medication and an additional \$328,296.86 for initial and follow-up care. The lifetime cost of HIV infection is approximately \$379,668 (in 2010 dollars), meaning that if 2 cases of HIV are avoided, the financial cost of nPEP would be more than offset. Financial cost is only one point of analysis, however. Maryland should prevent HIV for rape victims because it is the just and moral thing to do.

Eliminating the fear of HIV contraction for rape survivors through access to nPEP medication is essential to supporting survivors as they heal both physically and emotionally. A permanent program to prevent HIV infection for rape survivors not only offers survivors peace of mind but also demonstrates that the state of Maryland supports and protects the lives of rape survivors and maintains that HIV prevention is a public health priority. MCASA urges the Judicial Proceedings Committee to create a permanent program to give sexual assault survivors meaningful access to nPEP and its life- and health-protecting benefits.

The Maryland Coalition Against Sexual Assault urges the Judicial Proceedings Committee to report favorably on Senate Bill 331

⁶ U.S. Dept. of Justice, Office on Violence Against Women, (2013). A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents Second Edition.

⁷ Maryland Governor's Office of Crime Prevention, Youth, and Victim Services. (December 1, 2021). *Report on the Operation and Results of the Pilot Program (HIV Postexposure Prophylaxis)*.

⁸ Center for Disease Control and Prevention. (2017) *HIV Cost-effectiveness. Available at:* https://www.cdc.gov/hiv/programresources/guidance/costeffectiveness/index.html