



# IOWA DEPARTMENT OF PUBLIC HEALTH

**TelePrEP Program** 



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**RESULTS** 

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### **Testing Model Description:**

The lowa Department of Public Health (IDPH), in collaboration with the University of Iowa, has implemented a telehealth program for HIV pre-exposure prophylaxis (PrEP). Clients participating in the Iowa TelePrEP program obtained laboratory services for PrEP initiation and monitoring by visiting an outpatient laboratory site or a local health department. IDPH collaborated with the Emory University Center for AIDS Research (CFAR) to offer TelePrEP clients the option of using self-collection kits ("home kits") with testing performed in a central laboratory, in lieu of traveling to an outpatient or public health facility for sample collection and testing. The test panel evaluated for PrEP monitoring included microcapillary tubes to collect blood for HIV, syphilis, and creatinine testing; urine tubes for gonorrhea and chlamydia testing. Testing with sample self-collection was available to TelePrEP clients between May 2019-March 2020.

#### **Recruitment:**

Clients already enrolled in the Iowa TelePrEP program were eligible to receive selfcollection kits. Clients new to PrEP and in need of baseline labs, and female clients (who required pregnancy testing that was not included in the test kit), were not offered the option of testing via self-collection.

## **Program Management:**

During telehealth consultation with PrEP clients, TelePrEP pharmacists offered clients the option of testing using self-collected samples. Sample collection kits were mailed to PrEP clients who requested a kit. Distribution of sample collection kits was managed by the CFAR-contracted Amazon Distribution Center. Clients shipped samples, via pre-paid FedEx, to the CFAR laboratory. Test results were reported to a TelePrEP pharmacist using a secure online portal, who then delivered results to PrEP clients.

#### **Lessons Learned:**

A little under one-half of clients accepted the option for "home testing", using self-collected samples sent to a laboratory for processing. Evaluation of this option suggested that "home testing" may be preferred by clients who are confident in their ability to properly collect and timely submit samples (particularly blood samples); who have concerns about privacy and confidentiality (e.g. those who lived with others); or who had



experienced stigma related to HIV, sexual orientation, or use of PrEP in conjunction with health care encounters (including in laboratory sites). The evaluation also suggested that participants generally found the home testing option as convenient and instructions easy to follow. Self-collection of blood samples (using the microcapillary tube) was challenging for some participants, resulting in fewer clients returning blood samples, in comparison to urine and extra-genital samples. Through this evaluation, IDPH learned of the value of "home testing" to enable some clients to continue to use PrEP. IDPH, through its public health laboratory, is considering developing the capacity to conduct testing on self-collected samples, including validating dried blood spots for HIV, syphilis, hepatitis C, and creatinine; and extra-genital swabs for gonorrhea and chlamydia testing.

In the context of the COVID-19 pandemic, sustaining the capacity for collection of samples in a home setting addressed not only client preferences, but also supported public health mitigation strategies including social distancing and minimizing physical encounters in a healthcare facility for preventative and other non-urgent needs. Interim to the availability of the fully-validated panel by Iowa's public health laboratory, the Iowa TelePrEP program is providing participants the option to receive the OraQuick<sup>®</sup> In-Home HIV Test kits in order to maintain access to minimum laboratory services necessary for PrEP monitoring.

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