

Nevada STI Landscape and Recent Policy Changes

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Disclosures

Jennifer Howell has no disclosures.

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Points to Consider

- Nevada has consistently had some of the highest rates of HIV and STIs in the US, with annual increases.
- The majority of HIV cases in Nevada are diagnosed in Inpatient/Outpatient Hospitals and Private Physician Offices. Locations for the diagnosis of STDs is similar to HIV.
- Patients want routine sexual histories, access to routine, free/low cost, confidential and convenient testing for HIV/STIs by medical providers
- Many providers offer testing based on subjective, not a routine, approach.
 - Dependent on patients to report presenting symptoms
 - Lack supportive policies for offering routine HIV/STI testing
 - Lack awareness of HIV/STI risk
 - May not offer testing due to stigma or assumptions about patients
 - Only about 1/3 of providers nationally ask about sexual history or risk
 - Often refer patients to the local health district/Community Health Nurse

Points to Consider

- Access to routine, confidential, and convenient HIV testing is one of the pillars in the US, Clark County and Nevada's Ending the HIV Epidemic and supports Nevada's Fast Track Initiative
- Revenue potential with the Center for Medicare and Medicaid Services (CMS) Electronic Health Record Meaningful Use Incentive Program
- Similar legislation focused on HIV testing was passed in the state of New York in 2010. Research evaluating the policy found an increase in the volume of HIV testing
- This legislation supports/compliments AB 192 which seeks to revise testing provisions for pregnant women for STIs, especially as NV ranked 4th for rates of congenital syphilis in 2020
- Affordable Care Act requires insurance to cover preventive services that are Grades A & B Recommendations of the US Preventive Services Task Force
 - Grade A: HIV Screening for people aged 15-65 years, all pregnant persons
 - Grade B: Screening for chlamydia and gonorrhea in sexually active women age 24 years and younger and women who are at increased risk for infection
- CDC recommends that everyone between the ages of 13-64 get tested for HIV at least once as part of routine health care.
 - Annual testing for those at higher risk

STI Prevalence and Incidence in the US

Overview

1 in 5
People in the US have an STI



totaling nearly
68 MILLION
infections in 2018

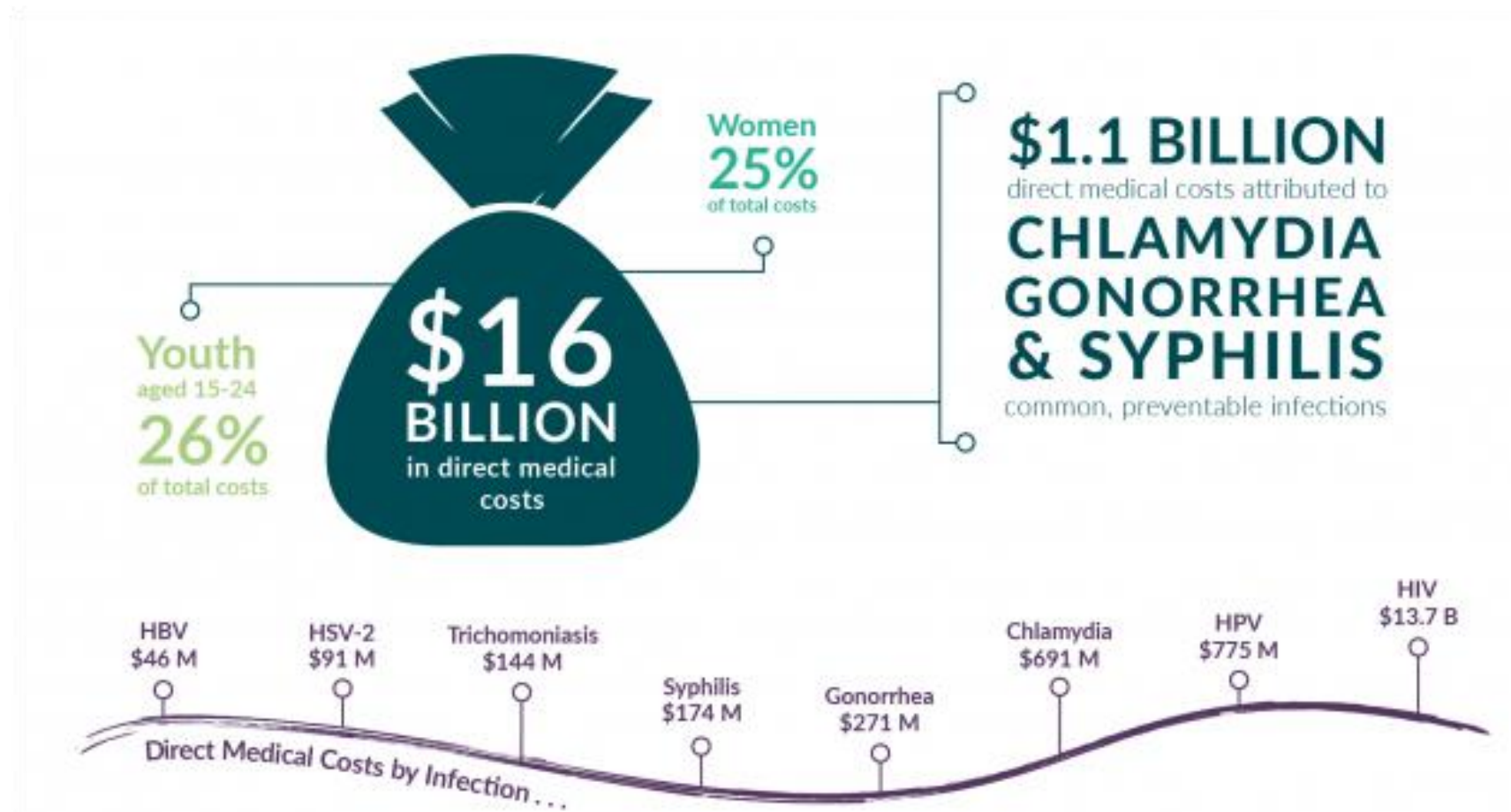
26 MILLION
new STIs in 2018

almost **HALF** of new STIs
were among
youth aged 15-24 in the US

New STIs
total nearly
\$16
BILLION
in direct medical
costs



CDC Direct Medical Cost Estimates STIs



<https://www.cdc.gov/std/statistics/images/FullSTI-Cost-Estimates-8.png>

Nevada STIs - 2020



	Chlamydia			Gonorrhea			P & S Syphilis ¹			EL Syphilis ²		
	2019	2020	% Change	2019	2020	% Change	2019	2020	% Change	2019	2020	% Change
Race/Ethnicity												
White, non-Hispanic	3,207	2,663	-17.0%	1,334	1,365	2.3%	311	255	-18.0%	176	152	-13.6%
Black, non-Hispanic	2,698	2,091	-22.5%	1,847	1,468	-20.5%	219	225	2.7%	118	113	-4.2%
Hispanic	3,162	2,335	-26.2%	1,008	916	-9.1%	224	206	-8.0%	185	178	-3.8%
American Indian/Alaska Native	85	75	-11.8%	32	33	3.1%	2	3	50.0%	4	2	-50.0%
Asian/Hawaiian/Pacific Islander	436	294	-32.6%	108	85	-21.3%	20	20	0.0%	17	16	-5.9%
Unknown/Other	8,240	7,281	-11.6%	2,190	2,497	14.0%	32	58	81.3%	23	35	52.2%
Total	17,828	14,739	-17.3%	6,519	6,364	-2.4%	808	767	-5.1%	523	496	-5.2%
Resident County												
Carson City	265	190	-28.3%	42	44	4.8%	8	7	-12.5%	13	2	-84.6%
Churchill	89	120	34.8%	12	19	58.3%	1	0	-100.0%	0	0	0.0%
Clark	14,045	11,286	-19.6%	5,448	4,951	-9.1%	628	613	-2.4%	389	403	3.6%
Douglas	112	80	-28.6%	22	27	22.7%	1	3	200.0%	4	0	-100.0%
Elko	186	147	-21.0%	52	56	7.7%	1	1	0.0%	0	0	0.0%
Esmeralda	1	0	-100.0%	0	0	0.0%	0	0	0.0%	0	0	0.0%
Eureka	4	2	-50.0%	0	2	N/A	0	0	0.0%	0	0	0.0%
Humboldt	62	46	-25.8%	7	25	257.1%	1	1	0.0%	0	0	0.0%
Lander	30	16	-46.7%	2	8	300.0%	0	0	0.0%	0	0	0.0%
Lincoln	6	7	16.7%	1	0	-100.0%	0	0	0.0%	0	0	0.0%
Lyon	177	175	-1.1%	31	66	112.9%	4	5	25.0%	3	1	-66.7%
Mineral	21	16	-23.8%	3	5	66.7%	1	1	0.0%	0	0	0.0%
Nye	93	76	-18.3%	22	21	-4.5%	1	2	100.0%	1	1	0.0%
Pershing	10	7	-30.0%	2	4	100.0%	0	0	0.0%	0	0	0.0%
Storey	9	5	-44.4%	2	2	0.0%	0	1	N/A	1	0	-100.0%
Washoe	2,697	2,542	-5.7%	872	1,132	29.8%	162	133	-17.9%	112	89	-20.5%
White Pine	21	24	14.3%	1	2	100.0%	0	0	0.0%	0	0	0.0%
Total	17,828	14,739	-17.3%	6,519	6,364	-2.4%	808	767	-5.1%	523	496	-5.2%

Nevada STIs – 2020



Division of Public and Behavioral Health, STD Prevention & Control Program

	Chlamydia			Gonorrhea			P & S Syphilis ¹			EL Syphilis ²		
	2019	2020	% Change	2019	2020	% Change	2019	2020	% Change	2019	2020	% Change
Age												
<9	4	3	-25.0%	5	3	-40.0%	0	0	0.0%	0	0	0.0%
10-14	63	64	1.6%	20	17	-15.0%	1	0	-100.0%	0	0	0.0%
15-19	3,967	3,041	-23.3%	928	704	-24.1%	16	23	43.8%	9	10	11.1%
20-24	6,064	4,955	-18.3%	1,412	1,464	3.7%	105	83	-21.0%	58	54	-6.9%
25-29	3,550	3,040	-14.4%	1,381	1,401	1.4%	184	173	-6.0%	100	64	-36.0%
30-34	1,904	1,670	-12.3%	1,026	1,062	3.5%	151	144	-4.6%	105	84	-20.0%
35-39	980	891	-9.1%	659	669	1.5%	107	93	-13.1%	85	77	-9.4%
40-44	550	475	-13.6%	431	447	3.7%	80	69	-13.8%	55	76	38.2%
45-54	552	442	-19.9%	469	417	-11.1%	108	122	13.0%	78	85	9.0%
55-64	167	128	-23.4%	161	148	-8.1%	44	52	18.2%	30	38	26.7%
65+	27	28	3.7%	27	32	18.5%	12	8	-33.3%	3	8	166.7%
Unknown	0	2	N/A	0	0	0.0%	0	0	0.0%	0	0	0.0%
Total	17,828	14,739	-17.3%	6,519	6,364	-2.4%	808	767	-5.1%	523	496	-5.2%

Source: Division of Public and Behavioral Health, NEDSS Based System (NBS), data as of December 2021.

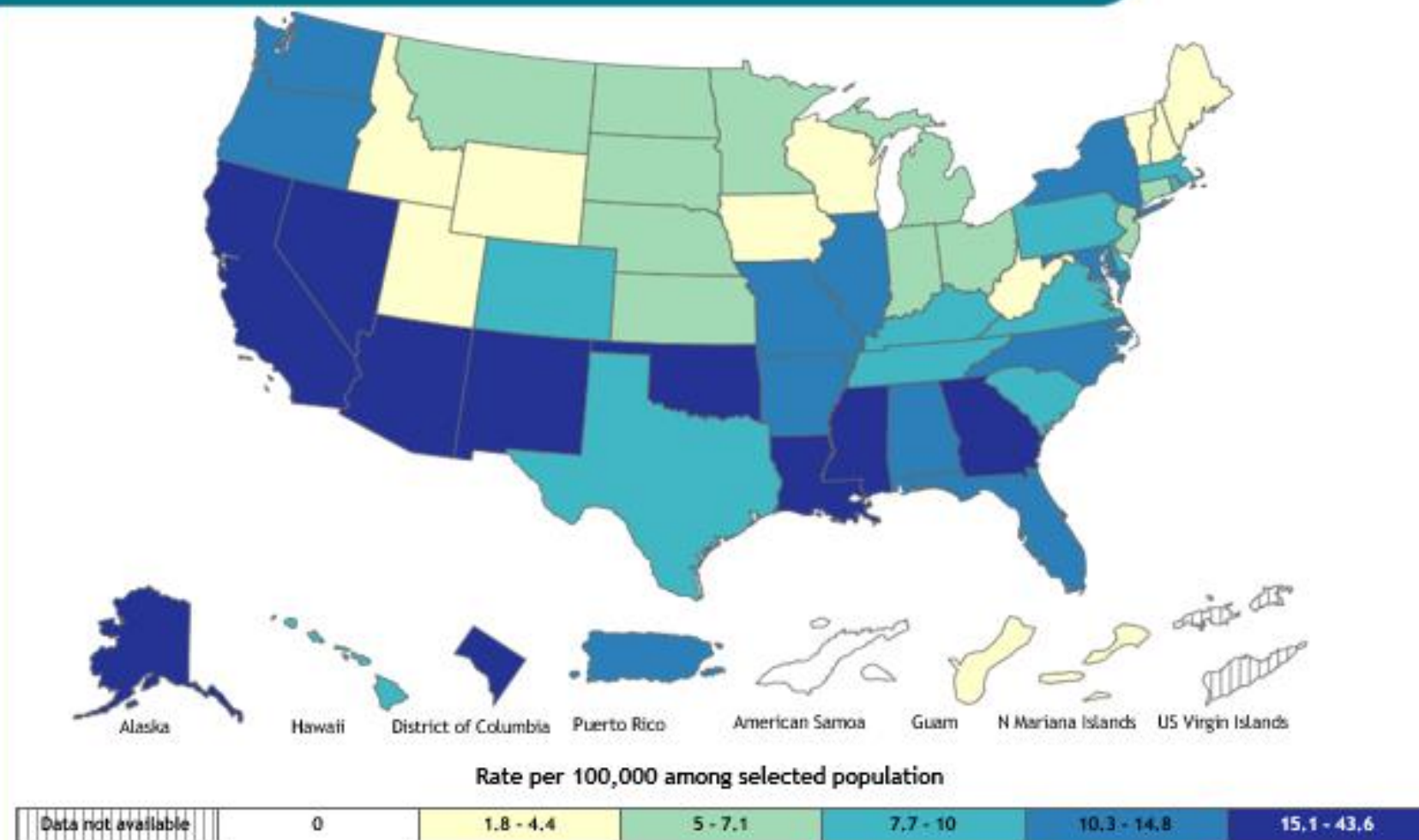
* Percent may not equal 100% due to rounding and unknown counts.

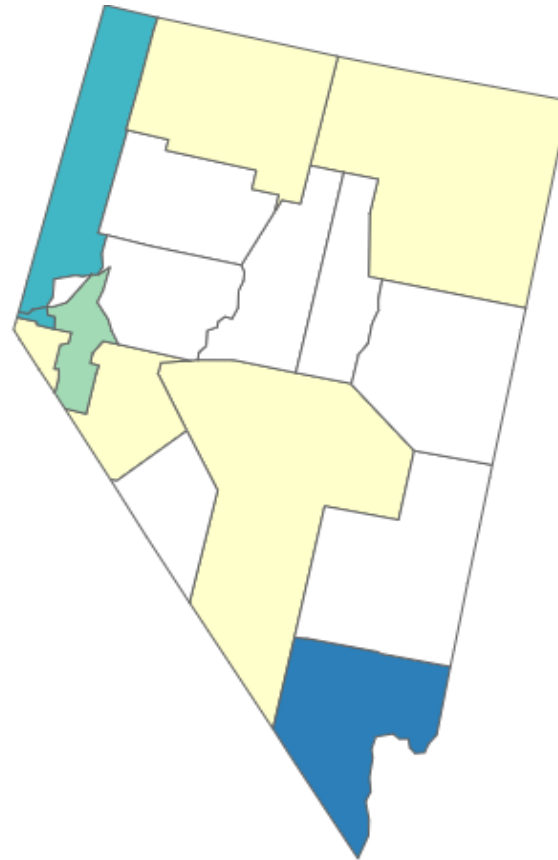
** All other counties include Churchill, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Mineral, Nye, Pershing, Storey, and White Pine.

<https://dpbh.nv.gov/uploadedFiles/dpbh.nv.gov/content/Programs/STD/dta/Publications/State%20of%20Nevada%202020%20STD%20Fast%20Facts.pdf>

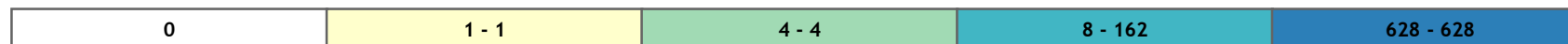
- Nevada ranks # 1 in the US for Primary & Secondary Syphilis with 26.6 cases per 100,000 population (CDC, 2019)
- Nevada ranks #4, in the US for Congenital Syphilis with a rate of 114.7 cases per 100,000 live births (CDC, 2019)

Primary and Secondary Syphilis | 2019 | All age groups | All races/ethnicities | Both sexes | US Map- State Level

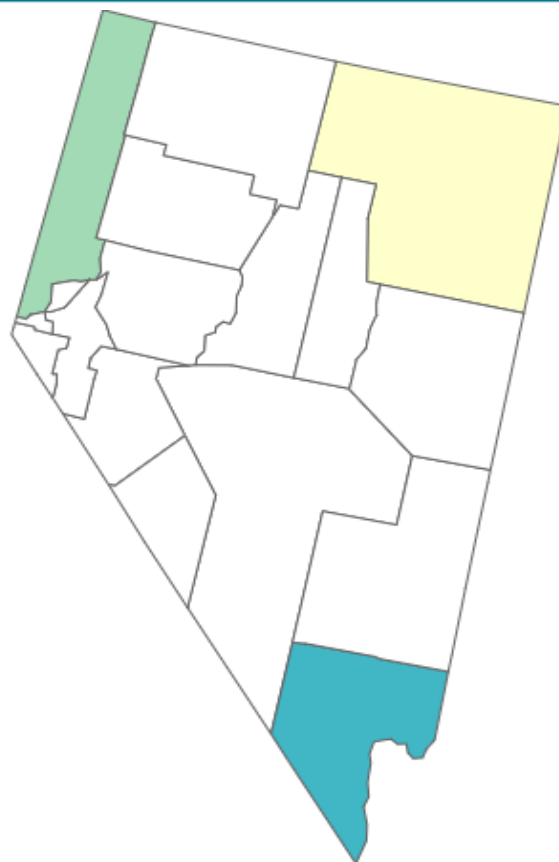




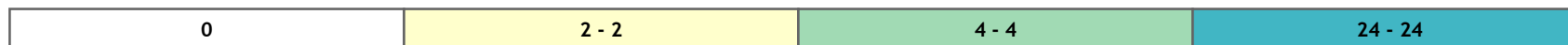
Cases





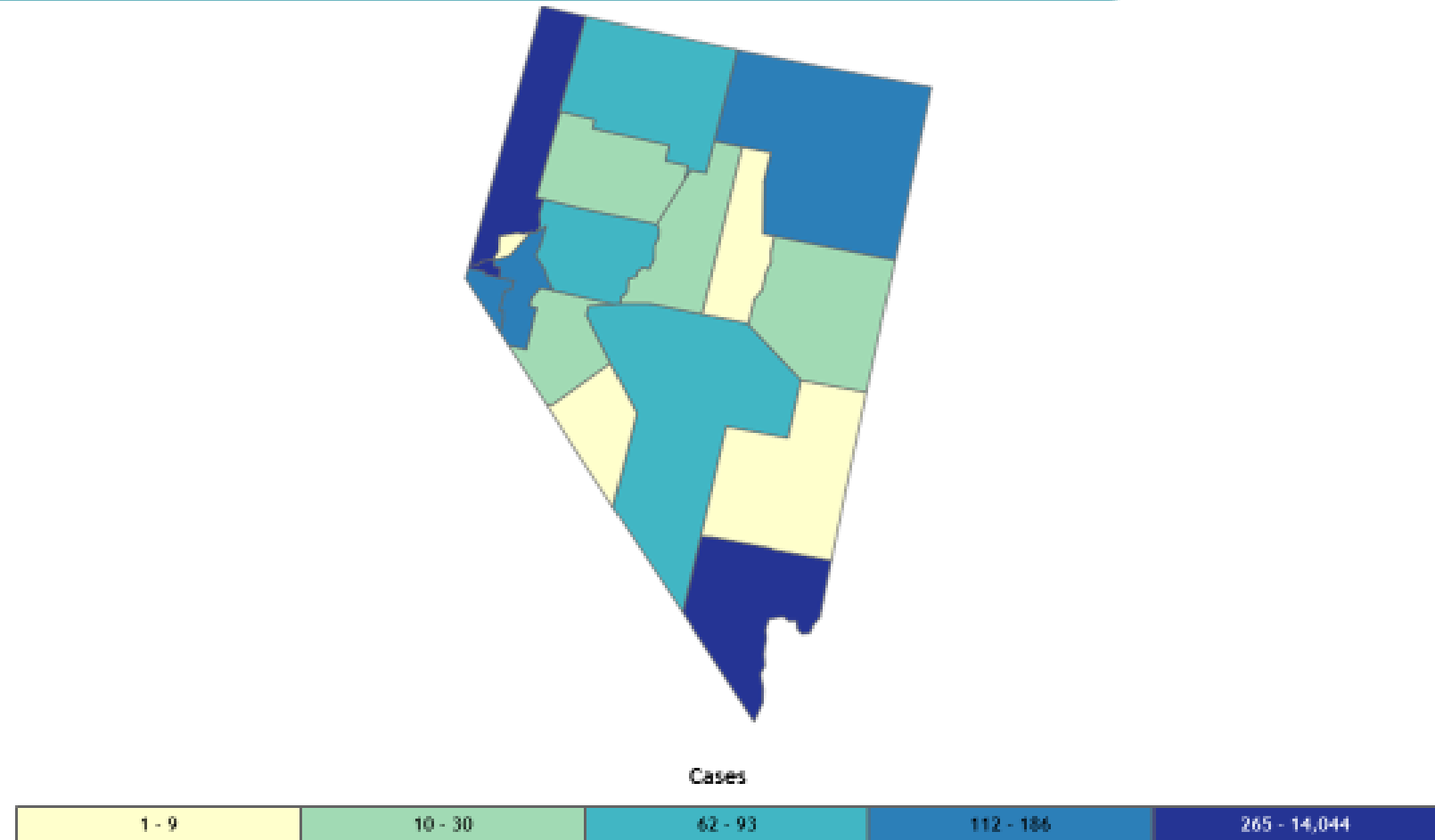


Cases

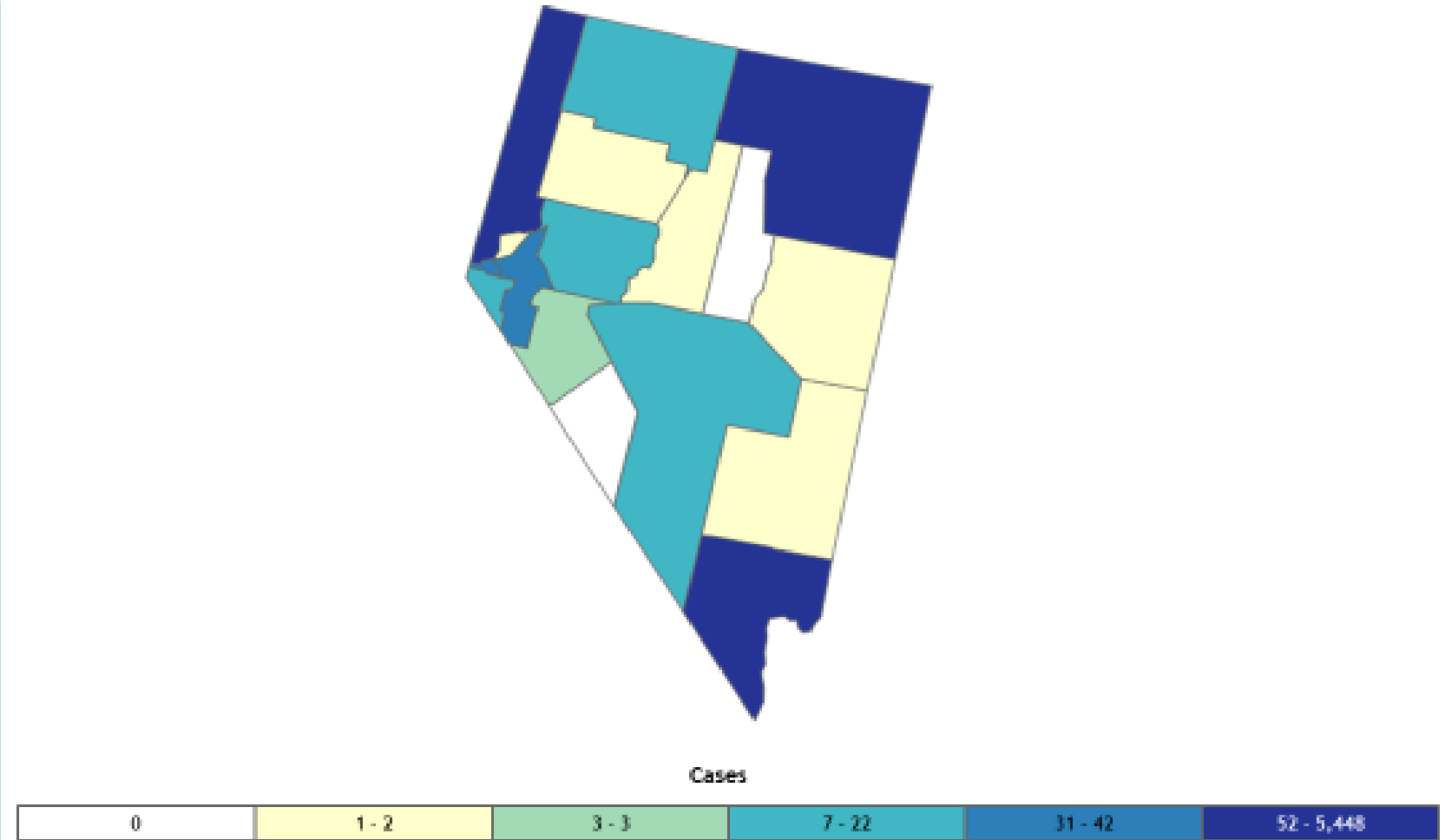


<https://gis.cdc.gov/grasp/nchhstpatlas/maps.html?m=undefined&c=33>

Nevada ranks 17th in the US for Chlamydia cases with a rate of 587.5 cases per 100,000 population (CDC, 2019)



Nevada ranks 15th in the US for Gonorrhea cases with a rate of 214.8 cases per 100,000 population (CDC, 2019)



Nevada 2021 Legislative Changes

SB 211 - HIV/STI Testing

- Requires primary care, (family med, internal med, pediatrics OB/Gyn, midwifery), and emergency departments to *offer* HIV, STI for patients aged 15-64
- Mirrors USPSTF and CDC recommendations
 - Insurance has to pay due to USPSTF recommendations of A or B
- Some exceptions

AB192 – Prenatal Care Testing

- Test people of childbearing capacity for STIs to include:
 - Chlamydia, gonorrhea, HBV, HCV
- Specifies timeframe of syphilis testing and treatment
- HIV Testing already required by NRS 442.640 through NRS 442.660

Nevada 2021 Legislative Changes

- SB 325 – Pharmacists Allowed to Dispense PrEP
 - Allows pharmacists to order and perform lab tests required by PrEP
 - Prescribe, dispense and administer PrEP meds
 - Requires Medicaid and insurance to reimburse for these services at rate equal to physician, PA, or APRN

SB 211: What this legislation will do...

- Open testing access to people with a primary care medical home
- Offer testing as a standard of care where many people are already receiving care (Emergency Departments)
- Reduce stigma by creating a standard of testing for HIV and STDs
- Collaborate with public health to identify cases for public health intervention to decrease case numbers over time
- Increase the number of people who know their disease status, so proper referrals and care plans can be made.
- Provide opportunities for provider reimbursement of costs and CMS Electronic Health Record “Meaningful Use” Incentive Program
- Find infections sooner to reduce sequela and further transmission
- Promote Ending the HIV Epidemic Initiatives nationally and in Nevada