National LAI-PrEP Use and Retention in Care in the United States, 2022-2024

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Shi Hao Ernest Koh[1], Wenting Huang[1], Eric Hall[2], Jeb Jones[1], Courtney R. Yarbrough[1], Xiao Zang[3], Bohdan Nosyk[4], Edwin E. Corbin-Gutierrez[5], Patrick S. Sullivan[1], Aaron J. Siegler[1]

[1]Rollins School of Public Health, Emory University, Atlanta, Georgia, US, [2]OHSU-PSU School of Public Health, Oregon Health and Science University, Portland, Oregon, US, [3]School of Public Health, University of Minnesota, Minneapolis, Minnesota, [4]Faculty of Health Sciences, Simon Frasier University, Burnaby, Canada, [5]National Alliance of State and Territorial AIDS Directors, DC, US

BACKGROUND

Long-acting Injectable PrEP (LAI-PrEP) has high efficacy and prior studies found that over half of persons eligible for LAI-PrEP were interested in using it.

Charactering national LAI-PrEP use will inform future steps for research and public health interventions.

METHODS

- **Data Source:** PrEP pharmacy and medical claims data from a national claims database
- **Study period:** Jan 2022 – Dec 2024
- **Study population:** Persons with ≥1 claim for any PrEP drug during the study period
- **PrEP user classification**
  - Oral PrEP: ≥1 claim for oral PrEP
  - LAI-PrEP: ≥1 claim for injectable cabotegravir
- **Analysis 1:** Oral and LAI-PrEP users stratified by sex, race/ethnicity and insurance type
- **Analysis 2:** LAI-PrEP retention in care over a two-year period
  - Yearly retention: ≥1 claim for cabotegravir in each 4-month period
  - 2023-2024 cohort: ≥1 year of follow-up from initiation to end of data period
  - 2022-2024 cohort: ≥2 years of follow-up from initiation to end of data period

Long-acting injectable PrEP was hailed as a game changer in HIV prevention, but uptake remained **modest** (3.1% of all PrEP users; 2022-2024), and many **did not remain in care** (1-yr retention 56%, 2-yr retention 26%)

RESULTS

Distribution of PrEP users

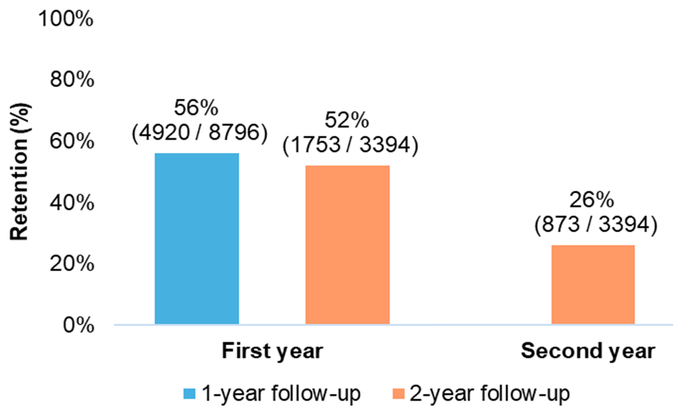
- 4% of all PrEP users were LAI-PrEP users (n=15,121/361,087) in the most recent quarter
- Medicaid coverage was higher among LAI-PrEP users (26%) than oral PrEP users (14%)

Table 1: PrEP users in the US from 2022 to 2024 by sex, race and ethnicity, and insurance type

Variable	All PrEP Users (n = 781,156) n (%)	Oral PrEP (n = 770,846) n (%)	LAI-PrEP (n = 24,306) n (%)
Sex			
Male	695,494 (89%)	687,551 (89%)	20,747 (85%)
Female	85,643 (11%)	83,277 (11%)	3,558 (15%)
Race and Ethnicity[1]			
Asian	25,427 (3%)	25,106 (3%)	690 (3%)
Black/African American	125,616 (16%)	123,857 (16%)	4,576 (19%)
Hispanic	131,776 (17%)	129,665 (17%)	4,543 (19%)
White/Caucasian	484,478 (62%)	478,302 (62%)	14,050 (58%)
Others	13,859 (2%)	13,916 (2%)	447 (2%)
Insurance Type			
Commercial	520,116 (67%)	513,752 (67%)	16,441 (68%)
Government	15 (<1%)	3 (<1%)	20 (<1%)
Medicare	21,594 (3%)	21,224 (3%)	851 (4%)
Medicaid	111,932 (14%)	108,591 (14%)	6,257 (26%)
Assistance Programs	118,658 (15%)	118,534 (15%)	509 (2%)
Cash	3,369 (<1%)	3,278 (<1%)	207 (1%)

[1] Hot-deck imputation was performed for missing data using observed sex, insurance plan and state information

LAI-PrEP Retention in Care



CONCLUSIONS

- LAI-PrEP scale-up in the US remains modest, representing a small fraction of overall PrEP use.
- Higher uptake of LAI-PrEP among Medicaid users, suggests lower access barriers.
- The gap between anticipated and actual LAI-PrEP uptake, likely reflects systemic barriers.
- As new LAI-PrEP modalities are rolled out, barriers should be proactively identified and addressed.
- Biannual injectable modality may have different patterns of uptake and retention, which should be closely tracked.

Additional Information

Reference

Siegler AJ, et al. JMIR Res Protoc. 2026;15:e80911. doi:10.2196/80911

Contact

Ernest Koh, MPH; ernest.koh@emory.edu

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