Funding for Prevention Rollout, Not Close-Out:
US Government's Opportunity to Reach At Least Three Million with LEN by 2027

October 2026

Injectable lenacapavir for PrEP (LEN) is a new, FDA approved, antiretroviral drug given once every six months that is highly effective at preventing HIV. It's a potent prevention that —with increased speed, scale and access—can propel a transformational moment in the HIV/AIDS response built upon American innovation.

Recognizing the transformational power of LEN, the Global Fund and PEPFAR recently increased their commitment—aiming to reach three million people over three years. There is unprecedented demand for LEN and, therefore, the ability to scale faster. Increasing ambition now will save money and accelerate the timeline to end the HIV epidemic. Next year represents a critical action window to fully realize the potential impact of LEN. **AVAC urges the United States to commit to a bolder but achievable goal of reaching at least three million people with LEN by the end of 2027, 6.5 million in three years, and a total of 20 million by 2030. No less and no slower, with an ambition of reaching even more people faster.**

This new, more ambitious target will catalyze our ability to end HIV/AIDS globally by

1. **Driving affordability,**
2. **Building a sustainable PrEP market for forthcoming innovations, and**
3. **Accelerating impact.**

With initial generics expected to launch by the end of 2026, prices will be lower, and there will be at least three suppliers of LEN to help ensure commodity security. By committing to this increased target, the market growth will accelerate even further from 2028, providing incentives to the other generic manufacturers to get to the market and increase competition to drive the price even lower. *If stakeholders miss this moment, demand could outpace supply by large margins, which will harm public trust in prevention efforts.*

What can Congress do to accelerate access and protect more than 3 million people from HIV?

- Increase LEN purchasing and implementation scale up via the Global Fund partnership by **committing at least $330 million in appropriated GHP global AIDS funding currently being held by OMB for USAID close out costs.** As Senator Collins said in her letter to the Administration, she wanted to "ensure these funds were used for lifesaving efforts".
- Urge Global Fund and PEPFAR/GHSD to increase the impact of their joint commitment by **raising the floor to at least three million people by 2027 and place orders now for enough doses for at least 2.4 million people in 2027.**
- Spur additional investment from other donor governments into procuring and implementing this high impact prevention strategy.
- **Fully fund PEPFAR and other global health programs, including US full contribution to the Global Fund,** to sustain these efforts into 2030—and ensure funds are obligated promptly and consistent with congressional intent.
- **Accelerate market development of LEN now** to help build the programmatic infrastructure to expand choice and prepare for the possible introduction in 2028 of monthly oral alimatravir, if it is also shown to be safe and effective later next year.
- Explore opportunities with GHSD to **leverage the new Innovation Fund** to advance American innovations in HIV prevention, such as LEN and alimatravir for PrEP.

AVAC's new publication, *Now What with Injectable LEN for PrEP: How to Translate Ambition into Accelerated Delivery and Impact*, outlines pathways to reach at least three million people by the end of 2027, including a scenario for accelerated LEN market development. It highlights necessary actions partners—such as the Global Fund, ministries of health, donors, communities, and suppliers—must take to make this aspiration a reality. The U.S. government's critical diplomatic and global leadership is needed to move these partners to take on this ambitious target.

Scenario 2 would build the market faster, secure lower Per Person Per Year (PPPY) prices and achieve greater impact by 2030 for less than $800 million in procurement over five years. The faster the market grows, the more transmission can be averted. Also, if alimatravir reaches the market in 2028 at prices below $40 PPPY from the originator as expected, there is even greater ability to further and more quickly expand the PrEP market and potential impact.

Accelerated Market Development and Time to Impact				
Year	**LEN users**	**Manufacturer**	**Avg Price Per Person Per Year (PPPY)**	**Total Procurement**
2026	600,000	Gilead	$100	$60,000,000
2027	2,400,000	Gilead & 2 generics	$60	$144,000,000
2028*	3,600,000	3 Generics	$45	$162,000,000
2029*	5,400,000	4 Generics	$40	$216,000,000
2030*	8,100,000	5 Generics	$25	$202,500,000
Over 5 years	20,100,000			$784,500,000

** Beginning in 2028, there could be additional PrEP options reaching the market that would provide further diversification of the overall PrEP market*

Selected Resources

- Full version of *Now What with LEN for PrEP*, October 2026
- *Tracking Lenacapavir Rollout*: online tracking tool of all the moving parts
- *An Advocates' Checklist for Lenacapavir for PrEP Introduction*
- *Getting PrEP Rollout Right This Time*
- *Gears of Lenacapavir for PrEP Rollout*
- *Plan for Accelerating Access to Injectable Lenacapavir for PrEP*
- The Future of PrEP: Lenacapavir & the Fight for Access [podcast]
- Let's Talk About PrEP: The Future of HIV Prevention [podcast]

- **More on LEN:** *avac.org/lenacapavir/* & *prepwatch.org/products/lenacapavir-for-prep/*.
- **More on AMI at** *avac.org/alimatravir/*.