



State of California—Health and Human Services Agency  
California Department of Public Health



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GAVIN NEWSOM  
Governor

December 8, 2020

Dear Colleague:

In 2018, there were 329 infants with congenital syphilis (CS) reported in California, representing a 900 percent increase from 2012, and a magnitude of CS burden not observed since 1995. These trends mirror a sharp rise in syphilis among females, which surpassed 500 percent during the same period. As a result, the California Department of Public Health (CDPH) has just released new guidelines for expanded syphilis detection among people who are or could become pregnant in order to ensure detection, timely treatment, and subsequent CS prevention.

**The California Department of Public Health recommends:**

- All pregnant patients should be screened for syphilis at least twice during pregnancy: once at either confirmation of pregnancy or at the first prenatal encounter (ideally during the first trimester) – and again during the third trimester (ideally between 28–32 weeks' gestation), regardless of whether such testing was performed or offered during the first two trimesters.
- Patients should be screened for syphilis at delivery, except those at low risk<sup>i</sup> who have a documented negative screen in the third trimester.
- Emergency department (ED) providers in local health jurisdictions with high-CS morbidity<sup>ii</sup> should consider confirming the syphilis status of all pregnant patients prior to discharge, either via documented test results in pregnancy, or a syphilis test in the ED if documentation is unavailable.
- All people who are or could become pregnant entering an adult correctional facility located in a local health jurisdiction with high-CS morbidity<sup>ii</sup> should be screened for syphilis at intake, or as close to intake as feasible.
- All sexually active people who could become pregnant should receive at least one lifetime screen for syphilis, with additional screening for those at increased risk.
- All sexually active people who could become pregnant should be screened for syphilis at the time of each HIV test.

<sup>i</sup> Syphilis among mothers of infants with CS has been associated with the following: recreational drug use, especially methamphetamine use, homelessness or unstable housing, limited or no prenatal care, incarceration within the prior 12 months and/or having a partner who is incarcerated, reported sex exchange, in addition to other factors listed in Table 2 in the [document](#).

<sup>ii</sup> CDPH defines local health jurisdictions with high-CS morbidity as those with a rate greater than 8.4 CS cases per 100,000 live births for any of the past three consecutive years. This “threshold” reflects the national rate of CS in 2012, prior to recent increases in California and the United States, when California’s CS rate was below that of the national rate.



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A complete guide to these recommendations, [Expanded Syphilis Screening Recommendations for the Prevention of Congenital Syphilis](#), was published by the CDPH Sexually Transmitted Diseases (STD) Control Branch. This guidance includes evidence underlying these recommendations, analysis of related existing state and national policy, as well as considerations for practice implementation.

Medi-Cal reimbursement for these new syphilis screening recommendations allows for a patient to be screened multiple times depending on their risk if the healthcare professional deems it medically necessary. Therefore, providers caring for fee-for-service Medi-Cal patients in the outpatient or emergency department setting can expect to be reimbursed by the California Department of Healthcare Services (DHCS) for providing this medically necessary care in accordance with these Expanded Syphilis Screening Recommendations for the Prevention of Congenital Syphilis. Additionally, Medi-Cal managed care health plans are required to provide for all medically necessary covered services, in an amount no less than what is offered to beneficiaries under the Medi-Cal Fee-For-Service Program. As a reminder, Medi-Cal managed care health plans are required to provide access to STD services without prior authorization both in and out of the health plan network.

For patients diagnosed with syphilis, detailed recommendations for treatment and follow-up can be accessed via the [2015 Centers for Disease Control and Prevention \(CDC\) STD Treatment Guidelines](#) along with [CDC STD Treatment Recommendations in the Age of COVID-19](#), shown in the resources below.

Finally, please collaborate with your local health jurisdiction to ensure adequate treatment for all cases of syphilis.

Thank you for your work to improve the sexual health of California's residents.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kathleen Jacobson', with a long horizontal flourish extending to the right.

**Kathleen Jacobson, MD**

Chief, STD Control Branch  
California Department of Public Health

**Additional Resources** *(Please click on a resource to be directed to the webpage)*

- Expanded Syphilis Screening Recommendations for the Prevention of Congenital Syphilis: 2020  
<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Expanded-Syphilis-Screening-Recommendations.pdf>  
CDPH full recommendations for syphilis screening expansion in California to prevent congenital syphilis, including evidence, analysis, and implementation
- CDPH STD Control Branch Congenital Syphilis Webpage  
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/CongenitalSyphilis.aspx>  
CDPH information and resources on congenital syphilis for providers, patients, and local health jurisdictions
- CDC 2015 STD Treatment Guidelines  
<https://www.cdc.gov/std/tg2015/>  
CDC 2015 STD Treatment Guidelines, including guidelines for the treatment of syphilis for adults and pregnant patients
- CDC Interim STD Treatment Recommendations in the Age of COVID-19  
<https://www.cdc.gov/std/dstdp/DCL-STDTreatment-COVID19-04062020.pdf>  
Dear colleague letter from the CDC on providing effective STD care and prevention when in-person, facility-based services are limited
- California Prevention Training Center  
<https://californiaptc.com/>  
Educational opportunities and training materials for syphilis and congenital syphilis
- STD Clinical Consultation Network  
<https://stdccn.org/>  
Online consultation for questions about the evaluation and management of STDs