Why Is Routine HIV Testing Recommended?

- An estimated 1.2 million people are living with HIV/AIDS in the United States today. Of these, 25 percent do not know they are infected and can spread it unknowingly to others.¹
- People who are infected but not aware of their condition cannot access and benefit from treatment and may not take steps to protect their sexual or drug-using partners.¹
- HIV infection is a serious condition that can be diagnosed prior to the development of symptoms through reliable, inexpensive and noninvasive screening tests.¹
- Infected people can live long lives if treatment is started early.¹
- One study estimated that in high-risk populations, a one-time screening can save lives and costs by preventing additional transmissions of the virus. For every 100,000 people in this group who are screened, an estimated 300 fewer people will become infected with HIV.²
- Screening has been shown to be effective in detecting HIV infection among mothers and in preventing transmission between mother and child before or during birth or through breast-feeding after birth.³

How Costly Are HIV/AIDS Infections?

- Current average lifetime cost of care for a patient with HIV infection is $200,000.⁴
- The total lifetime cost for Americans newly diagnosed with HIV/AIDS during 2002 was approximately $36.4 billion, which includes almost $7 billion in direct medical costs and almost $30 billion in productivity losses.³
- The federal government is estimated to have spent $21 billion on HIV/AIDS during the 2006 fiscal year, which includes treatment, research, housing assistance, prevention and international efforts.⁵

What Does the Centers for Disease Control and Prevention Recommend?

It is important people learn of their HIV infection early since research has shown that once people are aware of infection, they tend to take steps to reduce spreading it to others. In September 2006, CDC revised its recommendations for HIV testing in health care settings in an effort to reduce the stigma surrounding HIV testing and make it a more routine part of medical care. The recommendations are:

- All patients ages 13 to 64 in health care settings should be tested for HIV.
- Patients should be able to opt out of testing, which means they should be informed that HIV testing will be conducted unless they decline.
- Testing procedures should be simplified by eliminating pre-test counseling and a separate, written consent. Consent can be included in the general consent for medical care. Prevention counseling is strongly encouraged for people at high risk for HIV in settings in which risk behaviors are assessed routinely (i.e. STD clinics), but should not be required as a part of testing.
Screen all pregnant women as part of normal first trimester blood tests. Also, women who are at high risk of HIV or who receive health care in areas with high HIV/AIDS incidence should be retested in the third trimester. The rapid HIV test should be used during labor for all women whose status is unknown. Some states may need to pass new legislation to change current laws on informed consent or counseling that prevent the implementation of CDC’s new recommendations.

What Can State Legislators Do?

- Talk with the AIDS director in your state health department to see if any legal barriers stand in the way of implementing the new HIV testing recommendations from CDC.
- Consider legislation to overcome existing obstacles to implementing CDC’s new testing recommendations.
- Consider including HIV testing in Medicaid, private and state employee health benefit coverage if your state hasn’t already done so to make it affordable.
- Facilitate or help promote coalitions of social service groups, community organizations and faith-based organizations that can help promote awareness of the importance of HIV testing.
- Make HIV/AIDS awareness a high priority in your state by talking to other legislators and including it in newsletters, your Web site and speeches.
- Consider working with your state health department to make sure testing sites are available in ethnically, racially and economically diverse areas.
- Be aware that there may be objections to changing state laws or regulations regarding HIV/AIDS testing. Some of the issues raised may include:
  - Informed consent: If separate, written consent is eliminated, people may be tested without their knowledge, especially in urgent-care settings. There also are concerns that those who choose to opt out of testing may face negative repercussions from health care providers.
  - Eliminating pretest counseling: If mandatory pretest counseling is eliminated, doctors may miss a critical opportunity to talk to patients about how to reduce their risk of acquiring HIV.
- Be prepared to discuss these and other concerns in an open setting and to encourage stakeholders to help seek solutions.
Sources:


