

Questions and Answers About HIV SCREENING IN HEALTH CARE SETTINGS

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Status of HIV/AIDS In Michigan. The Michigan Department of Community Health (MDCH) estimates that up to 17,000 Michigan residents are infected with HIV, the virus that causes AIDS. About one-quarter of these individuals do not know that they are HIV-infected.

Each year, 800 Michigan residents are diagnosed with HIV or AIDS. The annual number of cases diagnosed has remained level for the past five years. At the same time, the number of individuals living with HIV in Michigan has been steadily increasing due to the availability of effective medical treatments for HIV disease. The MDCH estimates that only 39.5% of all Michigan adults aged 18-64 years have ever been tested for HIV.

To ensure that individuals who are infected with HIV obtain the full benefit of medical treatments for HIV disease, it is essential that they are diagnosed as early as possible and linked with appropriate medical and support services. Early diagnosis is also a critical prevention strategy. Individuals who learn their HIV status can be provided with prevention counseling to reduce the likelihood that they will transmit HIV to others, and sex and needle-sharing partners can be notified of their exposure and provided with opportunities to learn their own HIV status, through testing.

Implementation of HIV Screening Programs. Pursuant to recommendations made by the U.S. Centers for Disease Control and Prevention (CDC), the MDCH supports and encourages implementation of voluntary HIV screening as a routine part of care provided in health care settings. A position statement on HIV screening in health care settings has been developed by the MDCH and is available at 517-241-5900.

Expansion of HIV testing through screening in health care settings is an important strategy by which to increase the number of individuals who know their infection status and, if found to be HIV-infected, are linked to needed care, prevention and support services. HIV screening in health care settings can be an important strategy for addressing health disparities in Michigan's racial and ethnic minority populations.

To assist health care providers in deciding whether and how to implement HIV screening, a series of questions and answers have been prepared to address some of the most important issues. These questions and answers appear below:

QUESTIONS AND ANSWERS ABOUT HIV SCREENING IN HEALTH CARE SETTINGS

How do I determine whether it makes sense to implement HIV screening in my facility?

The CDC recommends that health care providers initiate HIV screening efforts for all patients ages 13-64 unless the prevalence of undiagnosed HIV infection in their patient population has been documented to be below 0.1 percent.

In the absence of existing data for HIV prevalence, health care providers can initiate voluntary HIV screening until they establish that the diagnostic yield is less than 1 per 1,000 patients screened. Below this threshold, routine screening is no longer warranted.

Health care facilities operating in communities with high HIV prevalence rates are more likely than those in communities with low prevalence rates to have prevalence rates at or above 0.1 percent. The following Michigan counties have HIV prevalence rates ≥ 0.1 percent: Berrien, Calhoun, Genesee, Ingham, Jackson, Kalamazoo, Kent, Oakland, Washtenaw, and Wayne (including the City of Detroit). Health care providers in these counties are encouraged to implement HIV screening efforts.

Health care providers may also wish to consider additional factors in making decisions about implementing HIV screening including HIV prevalence in the facility's service area, and the patient population (e.g., percentage of patients being treated for sexually transmitted infections and substance use).

Have the laws about pre- and post-test counseling associated with HIV testing been changed? No. As required by MCL 333.5133, all patients must be provided with information sufficient to obtain informed consent for and to understand the results of that test. At minimum, patients must be provided with:

- (1) An explanation of the test including, but not limited to, the purpose of the test, the potential uses and limitations of the test, and the meaning of the test results.

- (2) An explanation of the rights of a test subject including, but not limited to, the right to withdraw consent prior to administration of the test, the right to confidentiality of test results, and the right to be tested on an anonymous basis.
- (3) Designation of the person(s) to whom test results may be disclosed.

Risk assessment and risk reduction counseling, i.e., "prevention counseling" prior to HIV testing is not required.

Health care providers can provide this information orally and/or through written materials. The booklet *Important Health Information*, developed and distributed by the MDCH can be used for this purpose. This booklet contains all of the information required by statute to be provided to patients before HIV testing. Copies of this booklet are available by contacting the Division of Health, Wellness and Disease Control, Michigan Department of Community Health at (517) 241-5900.

Have informed consent requirements been changed? No. As required by MCL 333.5133, all HIV tests to diagnose HIV infection must be preceded by written, informed consent, executed or signed by the test subject. **A separate consent form is not, however, required.** Consent for HIV testing can be incorporated into existing consent forms. A sample form which combines consent for HIV testing with consent for other diagnostic tests and medical services has been prepared by MDCH is available at 517-241-5900.

MCL 333.5133 also requires that the booklet *Important Health Information*, developed and distributed by the MDCH, be distributed to the patient prior to HIV testing. Copies of this booklet are available by contacting the Division of Health, Wellness and Disease Control, Michigan Department of Community Health at (517) 241-5900.

For additional information and technical assistance contact 517-241-5900.

Is routine screening for HIV cost-effective? Recently published research suggests that, even in areas of relatively low HIV seroprevalence (lower than 1%), routine HIV testing can be cost effective (Bozette, NEJM 2005; Sanders et al., NEJM, 2005; Paltiel et al., NEJM, 2005).

In what areas of Michigan has HIV screening been implemented successfully? MDCH has collaborated successfully with local health care facilities to implement HIV screening, in one hospital emergency department and a public STD clinic, both located in the City of Detroit. As a result of these efforts, nearly 18,000 patients were tested for HIV last year and 108 (0.6 percent) were found to be HIV-infected. Additional information about these efforts can be obtained by contacting 517-241-5900.

Where can I get additional information and assistance? The MDCH can provide health care facilities interested in implementing HIV screening efforts with information and assistance including:

- Technical assistance on integrating HIV screening into your facility's clinic flow
- Sample consent forms
- Important Health Information Booklets
- Provision of local HIV surveillance data
- Technical assistance on interpreting Michigan's HIV testing statutes