

Routine Testing for HIV/AIDS in Texas

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Institute for Health Policy
Bridging THE GAP

Preventing HIV. There are currently over 1 million Americans living with HIV/AIDS, with more than 62,700 living in Texas. These figures have grown substantially (30 percent in 5 years in Texas) as medical treatments allow individuals living with HIV/AIDS to stay healthy and survive longer. However, new infection rates have remained relatively stable adding roughly 55,000 new cases per year nationally and between 4,000 and 5,000 new cases per year in Texas, which ranked 4th among the states in the number of new AIDS cases in 2006. And while vast resources have been committed for finding a cure and developing treatments for disease management, lowering the number of new HIV infections is increasingly recognized as a crucial element in the fight against HIV. Routine testing in all health care settings for early diagnosis is a key prevention approach recommended by the Centers for Disease Control and Prevention (CDC) to reduce the incidence of HIV/AIDS.

- **CDC believes that the number of new cases of HIV each year could be decreased by up to 30% with routine screening in all health care settings.**

Testing Too Late. Unfortunately many with HIV are diagnosed late, only finding out their status after being sick with the symptoms of AIDS. The five to ten symptom-free years between HIV infection and progression to AIDS is a crucial time for treatment and for preventing transmittal to uninfected partners. The statistics on late testing are alarming: almost 1 in 4 of all recent diagnoses in Texas received an AIDS diagnosis within one month of their HIV diagnosis (1 in 3 Hispanics) and 33% received an AIDS diagnosis within one year (43% of Hispanics). Texans most likely to test late are male, Hispanic, and older.

- **Early HIV diagnosis has been credited with better treatment outcomes, including slower clinical progression and reduced mortality.**
- **Evidence has shown that people who know their status are less likely to transmit the disease to others (68% lower than among those who are unaware of their status).**

Testing Too Few. Approximately 60,000 individuals live with HIV/AIDS in Texas, or one in every 378 Texans. Over half live in the Dallas and Houston areas; Houston had 19,444 persons living with HIV/AIDS (one in 246) while Dallas had 14,709 persons (one in 281). According to the Texas Department of State Health Services only 14% of Texans received an HIV test last year. In an effort to expand the reach of HIV testing, the CDC recommends routine screening of all patients between the ages of 13 and 65, not just those who are in high risk categories.

- **An estimated one quarter of those infected with HIV are unaware of their infection.**

Routine Testing in Texas. A bill proposed by Texas Senator Rodney Ellis follows the 2006 CDC recommendations to increase access to HIV testing by incorporating it into routine medical care and by removing legal and reimbursement barriers to testing. Features of the proposed bill include:

- *All blood samples taken in the course of routine medical screening will be tested for HIV unless the patient declines after being notified of the intent to test.*
- *The patient must be notified that the sample will be tested and notified of the proper procedure to decline.*
- *All testing is confidential with the option of anonymous testing.*
- *Medicaid must reimburse eligible individuals regardless of primary diagnosis.*
- *Insurance plans must reimburse eligible individuals regardless of primary diagnosis.*

Cost-Effectiveness. Recent studies demonstrate that voluntary HIV screening is cost-effective even in health care settings where the prevalence rate is low. Because of the substantial survival advantage resulting from earlier diagnosis, screening reaches conventional benchmarks for cost-effectiveness, even without including the important benefit of reduced transmission to uninfected partners.

- **Aetna and Blue Cross Blue Shield have approved reimbursement for routine HIV screening.**
- **California requires that all health care plans operating within the state must pay for routine HIV testing.**
- **Seven other states have policies supporting routine HIV screening with an opt-out provision.**