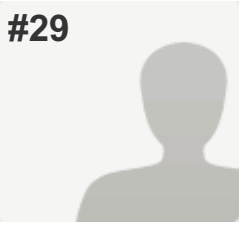


Ending the Epidemic Task Force Recommendation Form

#29



COMPLETE

Collector: Web Link (Web Link)

Started: Thursday, October 30, 2014 2:26:24 PM

Last Modified: Thursday, October 30, 2014 2:36:09 PM

Time Spent: 00:09:45

IP Address: 70.208.85.9

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Q2: Title of your recommendation

Include Routine HIV Testing in Annual Primary Care Visit

Q3: Please provide a description of your proposed recommendation

HIV testing should be included in the standard panel of preventative screenings that are part of the annual comprehensive Primary Care Provider visit. All Medicaid managed care plans have a key role in the testing, treatment, and access to the continuum of care, including, but not limited to case management, substance abuse services, housing services and mental health care. Testing for HIV should be treated as any sexually transmitted disease (STD) and not require special consent.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Identifying persons with HIV who remain undiagnosed and linking them to health care

Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Prevention Committee: Develop recommendations for ensuring the effective implementation of biomedical advances in the prevention of HIV, (such as the use of Truvada as pre-exposure prophylaxis (PrEP)); for ensuring access for those most in need to keep them negative; and for expansion of syringe exchange, expanded partner services, and streamlined HIV testing by further implementing the universal offer of HIV testing in primary care, among others. The Committee will focus on continuing innovative and comprehensive prevention and harm reduction services targeted at key high risk populations, as well as grant-funded services that engage in both secondary and primary prevention.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

Change to existing policy

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Permitted under current law

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Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Within the next year

Q9: What are the perceived benefits of implementing this recommendation?

The benefits of routine testing and standardization among all providers will increase early diagnosis of HIV and improve linkage to care. If all primary care providers offer routine HIV testing it will decrease HIV testing stigma.

Q10: Are there any concerns with implementing this recommendation that should be considered?

Additional training and technician assistance will be needed for primary care providers who are not following the law and need additional culturally-relevant training to integrate routine testing into all primary care visits.

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

Respondent skipped this question

Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

Respondent skipped this question

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

High risk populations most at risk for acquiring and transmitting HIV will most benefit from this recommendation. Routine testing leading to earlier diagnosis of HIV will allow for earlier linkage to treatment services and decrease overall HIV transmission rates in high risk populations such as MSM and young black and Hispanic populations.

Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

Respondent skipped this question

Q15: This recommendation was submitted by one of the following

Other (please specify)
Ad Hoc End of AIDS Community Group: ACRIA, Amida Care, Correctional Association of New York, Jim Eigo (ACT UP/Prevention of HIV Action Group), GMHC, Harlem United, HIV Law Project, Housing Works, Latino Commission on AIDS, Legal Action Center, Peter Staley (activist), Terri L. Wilder (Spencer Cox Center for Health), Treatment Action Group, VOCAL New York