

## New HIV testing guidelines helpful, but access to screenings still an issue

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(Medical Xpress)—Beth Meyerson, health policy expert at the Indiana University School of Public Health-Bloomington, said the new screening guidelines by the U.S. Preventive Services Task Force represent an important shift in HIV testing and will result in more HIV screenings because they will now be reimbursable. But the availability of the tests remains a big unknown.

"We do not know enough about clinician behavior, whether and how they offer the HIV test," Meyerson said. "There have been a few studies, and the results have been discouraging. Today's final guidelines, paired with CDC's 2006 recommendations to offer routine HIV testing in [clinical settings](#), is an important step toward encouraging clinician engagement with patients to offer the test."

However, clinical access to HIV testing is not enough, she said.

"If we are going to meet the National HIV/AIDS Strategy goals of reducing annual HIV infections by 25 percent and increasing the number of people who know their status to 90 percent by 2015, we are going to need to expand nonclinical options for HIV testing nationwide," she said.

Meyerson noted that every southern state except Florida has opted out of expanding Medicaid. "Therefore, their populations will not have access to clinical venues for routine testing," Meyerson said. "These areas are also starved of public resources for safety net and public health providers. So they are left without resources and, as we would expect,

test for HIV much later than others—meaning they are sicker when they learn of their [HIV status](#) and they have unknowingly infected the people they love."

Meyerson and colleagues are conducting research to get a better understanding of whether and how Indiana Community Health Centers and their clinicians offer HIV, STD and hepatitis services (including testing) to their patients. She also is leading a multistate team that is examining the possibility of pharmacies serving a key role in offering HIV testing.

"The pharmacy system is evolving into an effective public health environment," she said. "Pharmacists are showing some interest in HIV testing. Can this be a system innovation? Maybe. Pharmacies are ubiquitous, pharmacists are trusted, and the settings are de-stigmatizing in many ways. Plus, they are accessible—24/7 in some cases."

The draft recommendation calls for one-time screenings of adolescents and adults with follow-up screenings determined by risk factors for contracting HIV. Some people might warrant screenings at least annually, while others might not require any more screenings. The recommendation calls for all pregnant women to be screened. People younger than 15 and older than 65 also should be screened if they are at an increased risk for infection.

The Affordable Care Act already mandates that HIV testing, along with many other preventive health services, be available without cost or co-pay, Meyerson said, but the U.S. Preventive Services Task Force recommendation seals the deal. "We just need to be sure clinicians offer the [test](#)."

Provided by Indiana University

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