



TECHNICAL ASSISTANCE RESOURCE

Technical Assistance Resource: HIV Testing in Health Centers

Purpose

This Health Center Program Technical Assistance Resource (TAR) provides information regarding HIV testing in health centers. The TAR is intended to assist health centers with implementing the recommendations for HIV testing in clinical settings from the U.S. Preventive Services Task Force (USPSTF) and the Centers for Disease Control and Prevention (CDC).

Background

According to [CDC](#), more than 1.1 million people in the United States (US) are living with HIV in the US.¹ Undiagnosed individuals may not receive the care and treatment they need to stay healthy. They also may unknowingly pass HIV to others. However, those who have been tested, and are aware of their infection, can make informed decisions about their overall health and risk behaviors.

[The Ending the HIV Epidemic: A Plan for America](#) focuses on four key strategies to diagnose, treat, protect, and respond to end the HIV epidemic in the next 10 years. The new initiative seeks to reduce the number of new HIV infections in the United States by 75 percent within five years, and then by at least 90 percent within 10 years, for an estimated 250,000 total HIV infections averted.² A key component of this initiative is early detection and intervention that can lead to faster results in treatment and prevention of HIV. Approximately 165,000 Americans are living with HIV but don't know they have it.

HRSA Health Center Program and HIV Testing

HRSA-funded health centers are a critical partner in meeting the Ending the HIV Epidemic initiative goals. For more than 50 years, health centers have delivered affordable, accessible, quality, and cost-effective primary health care to patients regardless of their ability to pay. Health centers have become essential primary care safety net providers for millions of people across the country.

¹[The Centers for Disease Control and Prevention: HIV/AIDS Statistics Center](#) Accessed on April 15, 2019.

²[U.S. Department of Health and Human Services, Ending the HIV Epidemic: A Plan for America \(2019\)](#) Accessed April 15, 2019.

Today, HRSA funds nearly 1,400 health centers operating approximately 12,000 service delivery sites. More than 27 million people in every U.S. state, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and the Pacific Basin rely on HRSA-funded health centers for care.³

HRSA is committed to enhancing access to HIV testing as a part of the provision of comprehensive, culturally competent, and high quality primary and preventive health services. HIV screening is essential to reducing new HIV infections and improving health outcomes for people living with HIV. HRSA strongly encourages health centers to offer Pre-Exposure Prophylaxis (PrEP) to individuals who are at substantial risk of becoming HIV infected. Health centers are uniquely positioned to use their patient-centered service delivery models, clinical expertise, and structural capacity to provide PrEP for the at-risk populations they serve. Please reference the [Health Center Program Technical Assistance Resource: Health Center Provision of HIV Pre-Exposure Prophylaxis](#).

Summary of CDC's Revised HIV Testing Recommendations

HRSA suggests health centers follow the CDC's HIV testing recommendations, as summarized below. In September 2006, the CDC revised its recommendations for HIV testing of adults, adolescents, and pregnant women in health care settings. The objectives of the updated recommendations were as follows: 1) to increase the number of individuals receiving HIV screening in health care settings, including pregnant women; 2) to facilitate earlier detection of HIV infection; 3) to identify individuals with unrecognized HIV infection, provide them with counseling services and referrals to clinical and prevention HIV services; and 4) to further reduce perinatal transmission of HIV in the United States.⁴

Excerpts of major revisions from previously published guidelines include the following:

For Adults and Adolescents

- Screening after notifying the patient that an HIV test will be performed unless the patient declines (opt-out screening) is recommended in all health-care settings. Specific signed consent for HIV testing should not be required. General informed consent for medical care should be considered sufficient to encompass informed consent for HIV testing.
- Persons at high risk for HIV should be screened for HIV at least annually.
- HIV test results should be provided in the same manner as results of other diagnostic or screening tests.
- HIV testing is recommended and should be routine for persons attending STD clinics and those seeking treatment for STDs in other clinical settings.
- Access to clinical care, prevention counseling, and support services is essential for persons with positive HIV test results.

³ [HRSA Health Center Program Fact Sheet](#) Accessed April 15, 2019.

⁴ CDC [Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings](#) Accessed on April 15, 2019.

- Prevention counseling should not be required as a part of HIV screening programs in health-care settings. Prevention counseling is strongly encouraged for persons at high risk for HIV in settings in which risk behaviors are assessed routinely (e.g., STD clinics) but should not have to be linked to HIV testing.
- HIV diagnostic testing or screening to detect HIV infection earlier should be considered distinct from HIV counseling and testing conducted primarily as a prevention intervention for uninfected persons at high risk

For Pregnant Women

- Universal HIV testing with notification should be performed for all pregnant women as early as possible during pregnancy.
- HIV screening should be repeated in the third trimester of pregnancy for women known to be at high risk for HIV.
- HIV screening should be included in the routine panel of prenatal screening tests for all pregnant women. Patients should be informed that HIV screening is recommended for all pregnant women and that it will be performed unless they decline (opt-out screening).
- Pregnant women should receive appropriate health education, including information regarding HIV and its transmission, as a routine part of prenatal care.
- Access to clinical care, prevention counseling, and support services is essential for women with positive HIV test results.
- Repeat HIV testing in the third trimester is recommended for all women in jurisdictions with elevated HIV or AIDS incidence and for women receiving health care in facilities with at least one diagnosed HIV case per 1,000 pregnant women per year.
- Rapid HIV testing should be performed for all women in labor who do not have documentation of results from an HIV test during pregnancy. Patients should be informed that HIV testing is recommended for all pregnant women and will be performed unless they decline (opt-out screening). Immediate initiation of appropriate antiretroviral prophylaxis should be recommended on the basis of a reactive rapid HIV test result, without awaiting the result of confirmatory testing.

The full text of the [Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings](#) were published in the Morbidity and Mortality Weekly Report (MMWR), September 22, 2006, Volume 55, Number RR-14.

USPSTF Recommendations

In April 2013, the USPSTF updated recommendations for [HIV screening](#) as follows:

- The USPSTF recommends that clinicians screen adolescents and adults aged 15 to 65 years for HIV infection. Younger adolescents and older adults who are at increased risk should also be screened. (Grade A recommendation)
- The USPSTF recommends that clinicians screen all pregnant women for HIV, including those who present in labor who are untested and whose HIV status is unknown. (Grade A recommendation)

Additional Resources

The following resources are available to assist HRSA health centers to implement the revised recommendations for HIV testing. HRSA will continue to provide additional resources as they become available.

1) Federal HIV/AIDS Resources

- [HHS Office of HIV/AIDS and Infectious Disease Policy](#)
- [HIV.gov](#)
- U.S. Preventive Services Task Force
 - [Final Recommendation Statement: HIV Infection Screening](#)
- [HRSA Ending the Epidemic website](#)
- [HRSA Health Centers and HIV webpage](#)
- [HRSA HIV/AIDS Bureau \(HAB\)](#)
- [The CDC National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention \(NCHHSTP\)](#)
- [The National Institute of Allergy and Infectious Diseases \(NIAID\)](#)
- [The National Institute of Health \(NIH\) Office of AIDS Research \(OAR\)](#)
- [AIDSinfo](#)

2) [CDC's Recommendations for HIV Screening of Gay, Bisexual and Other Men who have Sex with Men-United States 2017](#)

3) PrEP and nPEP Clinical Practice Guidelines

- [U.S. Public Health Service Pre-exposure Prophylaxis\(PrEP\) for the Prevention of HIV Infection in the United States-2017 Update Clinical Practice Guidelines](#)
 - [Clinical Providers Supplement-Updated 2017](#)
- [CDC Updated Guidelines for Antiretroviral Postexposure Prophylaxis \(nPEP\) After Sexual, Injection Drug Use, or Other Nonoccupational Exposure to HIV-United States, 2016](#)

4) HRSA-Supported Resources

- [Partnerships for Care \(P4C\) Toolkit](#)
 - [Southeast Practice Transformation Expansion Project \(SEPTTEP\)](#)
 - [SEPTTEP Webinars](#)
- [AIDS Education and Training Centers \(AETCs\) Program](#)
- [National Association of Community Health Centers \(NACHC\) Clearinghouse](#)
- [The National LGBT Health Education Center](#)
 - [PrEP Action Toolkit](#)
- The Clinicians' Consultation Center
 - [HIV/AIDS Management](#)
 - [HRSA PrEPline](#)