

Ending the Epidemic Task Force Recommendation Form

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Q2: Title of your recommendation

Expanded and Targeted HIV Testing in Key Populations

Q3: Please provide a description of your proposed recommendation

This initiative will ensure every New Yorker knows his/her status. With more than 10,000 people living with HIV in New York State who are unaware of their HIV status, there is a need to deepen the reach of HIV testing in New York State, particularly through targeted testing of key populations. HIV testing will be made more available in a wide range of non-medical or clinical settings where key populations gather in their everyday lives.

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,

Other (please specify)

This proposal would be maximized with both a change to existing policy and new funding for a program.

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

Permitted under current law

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?

HIV infection can spread more readily when people don't know they're infected. By expanding HIV testing and continuing to integrate HIV testing into routine health care, HIV-negative individuals can take steps to stay negative. When individuals receive a positive diagnosis, health care providers are required to help link the patient to follow-up medical care, with the consent of the patient. Treatment can be made available for those individuals who are HIV positive to decrease the possibility of further transmitting the virus.

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

New York State's Public Health laws have changed in the past few years in order to allow for more routine HIV testing. In April 2014, the law allowed for streamlined oral patient consent to an HIV test. The only setting to which this does not apply is correctional settings. There is a concern that the law should extend to correctional settings as well and that HIV testing should be offered more broadly, and finally that current laws should be enforced more aggressively.

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

To be determined.

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

Further analysis required.

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

New Yorkers currently unaware of their HIV status and their current and potential partners.

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

Ongoing and stronger training and education on the current HIV testing laws, changes in the last few years, etc.

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Q15: This recommendation was submitted by one of the following

Advocate,

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