Testing for HIV is the only way to determine if a person is living with the virus. Increasing the number of persons who are aware of their status and receiving appropriate antiretroviral treatment is an essential part of the strategy to reduce new HIV infections.

Routine HIV testing in health care settings is one of the Florida Department of Health’s four key components to reduce HIV infections in the state of Florida. The Centers for Disease Control and Prevention (CDC) recommends that individuals between the ages of 13 to 64 get tested for HIV at least once and those with risk factors get tested more frequently.

Despite seeing a medical provider, the majority of individuals who are at an increased risk for HIV are currently not receiving regular HIV testing. Risk assessment should also be included as part of routine primary care visits for all sexually active patients.

Early diagnosis and immediate treatment for HIV is key to ending the epidemic in the U.S. Routine testing is an important first step in the early detection of HIV and can help facilitate an immediate linkage to HIV care and antiretroviral therapy (ART).

Effective treatment with antiretroviral medications can lower the amount of virus in the body until the patient achieves viral suppression. People living with HIV who adhere to ART as prescribed can achieve an undetectable viral load (≤200 copies/mL) and have effectively no risk of sexually transmitting HIV. Starting ART immediately after diagnosis improves health outcomes by preventing disease progression and reducing viral load, making transmission highly unlikely.

Florida has adjusted the HIV testing statutes to facilitate increased HIV testing in health care settings. Florida law does not require written informed consent for HIV testing in health care settings and encourages the implementation of opt-out HIV testing (section 381.004, Florida Statutes).

Authorized health care facilities must notify patients that an HIV test will be conducted and give the patient the opportunity to opt-out of testing.

Authorized facilities can test any patient who does not explicitly state that they do not want to be tested for HIV. Florida legislation describes facilities that are authorized to implement the “opt-out” strategy as any hospital, urgent care clinic, substance abuse treatment center, primary care clinic, community clinic, blood bank, mobile medical clinic, or correctional health care facility.

HIV testing is also the first step in the consideration of pre-exposure prophylaxis (PrEP) for those who are HIV negative and have an increased risk of acquiring infection.

When routine HIV testing in health care settings results in a negative result, it is important to evaluate appropriateness for and interest in available prevention strategies, through open discussion of sexual practices and other risk behaviors. A risk reduction plan may include planned retesting for HIV and other sexually transmitted infections (STIs) at an appropriate interval, condom use, and PrEP. Based on the patient’s risk and preferences, recommending the use of PrEP to prevent HIV may be appropriate.

Currently, PrEP involves taking one pill daily, and when taken as directed can decrease the risk of HIV infection by 99% for those at risk for HIV due to sexual activity. PrEP has become one of the most powerful tools in the fight against HIV.

The United States Preventive Services Task Force (USPSTF) has given Grade “A” recommendations to the use of PrEP and routine HIV testing, as effective strategies for early diagnosis of HIV infection and prevention for persons who are at increased risk of acquiring HIV.

“It is important to remember that although there is no cure, HIV is a manageable infection. Current medicines are extremely effective and help people live longer, healthier lives.”
Florida HIV Testing Law Basics

Prevention counseling is no longer required before HIV testing in health care settings. Patients must be notified that HIV testing is planned and have the opportunity to opt-out of testing. This notification may occur in a number of ways including verbally or by the distribution of written materials. A facility may include a notification of HIV testing in general consent for medical treatment. If testing is declined, this decision should be documented and providers are encouraged to address the reasons for declining.

Why should you conduct routine HIV Testing?

From a provider’s perspective, the testing laws remove time spent acquiring written consent, conducting prevention counseling, and conducting HIV risk assessments. HIV can be reliably detected with rapid tests, which are inexpensive, and noninvasive. Testing can also be incorporated into routine blood work planned as part of a health care visit. Although not required, HIV counseling and risk assessment are billable actions during an office visit, and thus can be a source of revenue. Under the Affordable Care Act (ACA), Medicare, Medicaid, and private insurance are required to cover or incentivize “A” and “B” grade services. HIV screening has an “A” rating from the USPSTF and should be a covered service by Medicare, Medicaid, and ACA-qualified health plans. Although most HIV testing services will be covered, it is important to refer to each individual health plan to verify reimbursement coverage.

Who should be tested for HIV?

The CDC recommends that everyone between the ages of 13 and 64 is tested for HIV at least once in their lifetime. This recommendation is similar to screening guidelines for other treatable conditions. However, the frequency of testing should increase with level of risk. For those at higher or ongoing risk for HIV, testing should be repeated at least annually. More frequent testing may be indicated for some individuals at highest risk.

Patients who have increased or ongoing risk for HIV include:

- Sexual partners of people living with HIV
- Those starting a new sexual relationship
- Those with recent sexually transmitted infections
- Those with multiple sexual partners
- Those who report inconsistent condom use

It is important to remember that although there is no cure, HIV is a manageable infection. Current medicines are extremely effective and help people live longer healthier lives.

What is PrEP and Where is it Available?

Pre-exposure prophylaxis (PrEP), is when people who do not have HIV and are at substantial risk of acquiring infection take medication to prevent HIV. PrEP can decrease risk of sexually acquired HIV infection by more than 99% when taken as directed. PrEP, in combination with HIV testing, testing for sexually transmitted infections, and provision of condoms, should be discussed with all people who are at increased risk for HIV infection after receipt of a negative HIV test.

Currently, there are two FDA-approved medications for PrEP: they are both single tablet combinations of two antiretroviral medications (tenofovir and emtricitabine) with the brand names Truvada and Descovy.

Descovy is not yet recommended for individuals who have receptive vaginal sex and are at risk of HIV. Provision of PrEP requires baseline testing for HIV, sexually transmitted infections, viral hepatitis, and monitoring of serum creatinine. PrEP can be provided through a number of venues including primary care, sexually transmitted infection clinics, family planning clinics, and other venues.

Who should take PrEP?

CDC guidelines suggest that PrEP be discussed with individuals who are HIV-negative and are at an increased risk of infection from sex or injection drug use. Federal guidelines recommend that PrEP is considered for people who are HIV negative and who are:

- Men who have sex with men
- Sexual partners of people living with HIV
- Exchanging sex for drugs money or other items
- Engaging in sex with multiple sexual partners
- Using condoms inconsistently
- Injection drug users

Resources are listed below for additional information regarding implementation of HIV testing in health care settings, PrEP programs, linkage to HIV care, and billing and reimbursement for HIV testing and prevention.

Our program is designed to increase information and provide resources to Florida providers regarding HIV prevention. For more information regarding our services and for testing & PrEP resources for your practice, please contact us at 305–243–2584 or ETI@med.miami.edu

Resources:
1. Florida Department of Health’s resource for HIV testing and prevention, https://www.testmiami.org/.