Dr. Virginia Moyer, M.D, M.P.H
Chair
U.S. Preventive Services Task Force (USPSTF)
540 Gaither Road
Rockville, MD 20850

Dear Dr. Moyer:

As Members of Congress who are concerned about the impact of HIV/AIDS, we write to express our strong support for the draft recommendation of the U.S. Preventive Services Task Force (USPSTF) on screening for HIV. We commend the draft recommendation, which gives HIV screening an “A” grade and recommends that all adolescents and adults ages 15 to 65, as well as younger adolescents and older adults who are at increased risk and all pregnant women, should be screened for HIV infection. The proposed changes in recommendation and grade promise to dramatically expand screening for HIV.

There are over 1.1 million people living with HIV/AIDS in the United States today, and about one in five of them do not know they are infected. According to the Centers for Disease Control and Prevention (CDC), there are approximately 50,000 new HIV infections every year, and more than 17,000 people with AIDS died in 2009.

HIV screening allows HIV-positive individuals to learn of their status and begin medical treatment to prolong their lives and maintain their health and productivity. Recent scientific research also proves that HIV-positive individuals are less likely to transmit the virus to other persons if they have a suppressed viral load as a result of treatment. Thus, HIV screening helps reduce new HIV infections, increase access to treatment for those who are infected, and improve public health overall.

The draft recommendation is a long overdue improvement over the previous “C” grade and recommendation that HIV screening be provided only to individuals in high risk groups. Many of those who are infected with HIV do not fall into high risk categories or may not realize that they are at risk for HIV. About 27% of new infections involve heterosexual transmission, and women account for 23% of new infections. People of color have been impacted severely, with African Americans accounting for 44% of new infections and Hispanics/Latinos accounting for 20%. Approximately 68% of new infections are among people of color.

The draft recommendation brings the USPSTF into closer alignment with the CDC, which recommends routine voluntary HIV screening in healthcare settings for patients ages 13 to 64, regardless of risk. The draft recommendation is also consistent with the National HIV/AIDS Strategy, which was released by the White House in July of 2010 and which seeks to increase the percentage of people living with HIV who know their status.
The “A” grade is especially critical as most private health insurers are required to cover all grade A and B services without cost-sharing under the Affordable Care Act. Health insurance coverage of HIV screening without cost-sharing could significantly increase the number of people who actually obtain HIV tests. Consequently, it could significantly increase the percentage of people living with HIV who know their status and are receiving appropriate care and treatment.

We strongly urge the USPSTF to confirm its support for HIV screening by finalizing the “A” grade draft recommendation as soon as possible. These changes in the USPSTF’s recommendation and grade can move us closer to creating an AIDS free generation.

Sincerely,

Maxine Waters

Barbara Lee

Jim McDermott

Lucille Roybal-Allard

Donna Christensen

Madeleine Z. Bordallo

Raúl M. Grijalva

André Carson

Yvette D. Clarke

Hansen Clarke

Wm. Lacy Clay

Emanuel Cleaver II

John Conyers

Elijah E. Cummings