## Congress of the United States

Washington, DC 20515

July 21, 2009

The Honorable George Miller Chairman Education and Labor Committee 2181 Rayburn House Office Building Washington, DC 20515 The Honorable John Kline Ranking Member Education and Labor Committee 2101 Rayburn House Office Building Washington, DC 20515

Dear Chairman Miller and Ranking Member Kline:

As Members of Congress who are concerned about the spread of HIV/AIDS, we write to ask that you include in the Tri-Committee health reform bill provisions to require health insurance plans to cover routine HIV tests under the same terms and conditions as other routine health screenings. H.R. 2137, the Routine HIV Screening Coverage Act, was introduced in the House to accomplish this purpose.

There are over one million Americans living with HIV/AIDS in the United States today, and over 20% of them do not know they are infected. Every 9½ minutes, another person is infected with HIV. Last fall, the Centers for Disease Control and Prevention (CDC) released new estimates of HIV infection in the United States, which indicate that the HIV/AIDS epidemic is even worse than was previously thought. The new estimates indicate that approximately 56,300 new infections occurred in the United States in 2006. This figure is approximately 40% higher than CDC's previous estimates of 40,000 new infections per year.

Many of those who are infected with HIV do not fall into high risk categories. Women, for example, now account for 27% of new HIV infections. Teens and young adults under the age of 30 account for 34% of new infections. African Americans account for 45% of new HIV infections, and Hispanic Americans account for 17%. Approximately 65% of new HIV infections are among people of color.

Standard health insurance plans generally cover HIV screening when there are known risk factors present for HIV or when there are clinical indications of infection, such as symptoms of AIDS. Furthermore, current law allows health insurance plans to deny coverage for routine HIV tests on the grounds that the patient has no known risk factors and does not exhibit signs or symptoms of AIDS. However, if patients do not learn their status and begin treatment until they develop symptoms of AIDS, treatment is far less likely to be effective.

Individuals who are HIV positive must learn their status in order to obtain counseling on managing their health, access appropriate medical and social services, begin life-prolonging treatment, and take actions to avoid spreading the virus to others. The CDC recommends routine HIV screening in health care settings for all patients aged 13-64, regardless of perceived risk. Increasing the proportion of people who know their HIV status is an essential component of comprehensive HIV/AIDS treatment and prevention efforts.

We urge you to include H.R. 2137, the Routine HIV Screening Coverage Act, in the Tri-Committee health reform bill. We appreciate your commitment to comprehensive health reform, and we thank you in advance for facilitating routine HIV testing for patients throughout the United States.

Maxine Waters	y,  Market Les Norther  Tleana Ros-Lehtinen
Barney Frank	Donna Christensen
Donna Edwards	im McGovern
Stelle Cohen	Wette D. Clarke
John W. Olver	Bobby Scott
Barbara Lee	John Conyers

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