



February 27, 2015

Stuart Caplan RN, MAS
Lead Analyst
Centers for Medicare and Medicaid Services
Mail Stop C1-09-06
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Re: Centers for Medicare and Medicaid Services (CMS) National Coverage Analysis (NCA) for Screening for the Human Immunodeficiency Virus (HIV) Infection (CAG-00409R)

Dear Mr. Caplan:

On behalf of Trust for America's Health (TFAH), thank you for the opportunity to comment on the proposed expansion of Medicare's National Coverage Determination's (NCD) Manual to include coverage of screenings for HIV infection for all beneficiaries between the ages of 15 to 65. TFAH is a nonprofit and nonpartisan public health advocacy organization dedicated to saving lives by making disease prevention a national priority.

We strongly support Medicare's proposed coverage of HIV screening as recommended by the U.S. Preventive Services Task Force (USPSTF) and the Centers for Disease Control and Prevention (CDC) for all beneficiaries between the ages of 15 and 65 regardless of risk, for adolescents younger than 15 and adults older than 65 who are at increased risk for HIV infection, and for all pregnant beneficiaries—including those who present in labor who are untested and whose HIV status is unknown. As you know, currently Medicare covers HIV screening for all beneficiaries with an increased risk for HIV infection as well as for pregnant Medicare beneficiaries. The expansion of screening for adolescents and adult beneficiaries between the ages of 15 to 65 years, without regards to perceived or actual risk, is a necessary and important step for the diagnosis and treatment of HIV/AIDS. Improved detection and surveillance of this epidemic will also help to better combat further spread of the HIV virus.

We strongly urge you to reconsider whether reimbursement for HIV/AIDS screening need be necessarily limited to those "ordered by a beneficiary's physician...within the context of a healthcare setting." We respectfully refer you to both the U.S. Preventive Services Task Force and corresponding CDC screening guidelines, neither of which limit screenings to the primary care setting and/or primary care providers.

The Proposed Decision Memo notes that in the U.S., nearly "1.2 million people are living with HIV infection, and approximately one in seven of those individuals are unaware of their infection." The Proposed Decision Memo also notes the rapid and recent increase in the percentage of those infected with HIV aged 50 or older.



By expanding routine testing to adults and adolescents between the age of 15 and 65, Medicare can play a decisive role in fighting the spread of HIV by helping identify the 16 percent of HIV-positive individuals in the U.S. who are unaware that they have HIV. Early testing is the first step in connecting HIV positive individuals with necessary care and treatment, and we believe that this will be an important step towards battling the HIV epidemic in the U.S.

Despite our overall support for the Proposed Decision Memorandum, we are concerned that the frequency of testing may be too limited for those with a high risk of infection. The CDC has recommended that individuals at a high risk for HIV infection be screened at least annually—the Proposed Decision Memorandum, however, limits voluntary screening to a maximum of one annual screening for all non-pregnant beneficiaries. Indeed, as the CDC recommends:

Anyone who has unsafe sex or shares injection drug equipment should get tested for HIV at least once a year. Sexually active gay and bisexual men may benefit from more frequent testing (e.g., every 3 to 6 months).¹

We believe that Medicare should not limit reimbursement for HIV screening to a maximum of one screening, at least for beneficiaries who are at a high risk of infection, regardless of age, consistent with this CDC guidance.

Still, the Proposed Decision Recommendation is an important and commendable step towards addressing the spread of HIV in the U.S., and we commend CMS for expanding screening through Medicare. We hope that these comments will assist CMS as you work collectively to finalize this coverage determination. If you have any questions, please do not hesitate to contact our Senior Government Relations Manager, Jack Rayburn, at (202) 223-9870 ext. 28, or via email at jrayburn@tfah.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Jeffrey Levi".

Jeffrey Levi, PhD
Executive Director
Trust for America's Health

¹ Centers for Disease Control and Prevention. STD & HIV Screening Recommendations. December 2014. Available at: <http://www.cdc.gov/std/prevention/screeningReccs.htm>