

COMPLETE

Collector: Web Link (Web Link)

Started: Friday, October 31, 2014 2:01:01 PM Last Modified: Friday, October 31, 2014 2:36:32 PM

Time Spent: 00:35:30 **IP Address:** 64.61.84.122

PAGE 1

Q2: Title of your recommendation

Automatic Electronic Medical Record (EMR) Prompt System for HIV Testing

Q3: Please provide a description of your proposed recommendation

Recommend as best practice that all health care systems required to offer HIV testing establish a prompt in their electronic medical records (EMR) so that providers are notified when a patient is due for an HIV test.

Establishing EMR prompt systems for HIV testing is effective at increasing HIV testing, diagnosis and linkage to care. After the implementation of an EMR HIV testing prompt system, Urban Health Plan in New York City increased HIV testing increased from 8% of patients in 2010 to 56% during January 2011 to September 2013. Out of the 148 patients diagnosed with HIV under the new program none had received HIV-related care and 120 of them were referred to care. [1]

1. Lin X, et al, MMWR Morb Mortal Wkly Rep, 2014; 63 (25); 537-541. Cited in August 2014 JAMA article titled, "Electronic Health Records Assist in Routine HIV Screening."

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 grantfunded 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 program

Ending the Epidemic Task Force Recommendation Form

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?

Identifying persons with HIV who remain undiagnosed. Significantly increase routine HIV testing in health care facilities using electronic medical records (EMRs).

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

Respondent skipped this question

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

Changes to the electronic medical record system can be made as part of a routine electronic systems update.

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

Respondent skipped this question

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

The key stakeholders who would benefit from this recommendation are health care facilities that use electronic medical records and their providers and consumers.

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

A measure of the universal adoption of the HIV testing prompt system

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