

IMPACT OF STATE HIV AND HEPATITIS C (HCV) SCREENING POLICIES ON HIV/HCV TESTING PROVISION AT SUBSTANCE USE DISORDER (SUD) TREATMENT PROGRAMS IN THE UNITED STATES

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Background:

HIV and HCV testing at substance use disorder (SUD) treatment programs is cost-effective, but few SUD treatment programs in the United States provide any testing. Little is known about state policy requirements or recommendations for HIV/HCV testing and whether programs are compliant.

Methods:

We examined state SUD treatment policies for information on HIV/HCV testing. We categorized state-level HIV and HCV testing policies as required, recommended, or no information. We linked this data to the 2017 National Drug Abuse Treatment System Survey, a nationally representative sample of U.S. SUD treatment programs and their operating characteristics (N=1352). We describe state policies for HIV/HCV testing at SUD treatment programs then conducted univariable (chi-square tests and t-tests) and multivariable (logistic regression) analyses to assess associations between these policies (required/recommended vs. no information) and organizational characteristics with testing practice (on-site/referral testing vs. none; onsite vs. not onsite).

Results:

In the US, 73% of states required or recommended HIV testing and 48% required or recommended HCV testing at SUD treatment programs. While 75% of states require/recommend HIV testing, SUD treatment programs in these States are less likely to offer any HIV testing (onsite or referral) than programs located in states without an HIV testing policy (41.1 and 49.6; p-value <0.05); this remained true in multivariate logistic regression. In states with any HCV testing policies, programs offer more testing (48.9% vs. 40.3%; p-value <0.05) than their counterparts. There were no significant differences in the offering of on-site HIV or HCV testing between programs with compared to those without any testing policies.

Conclusion:

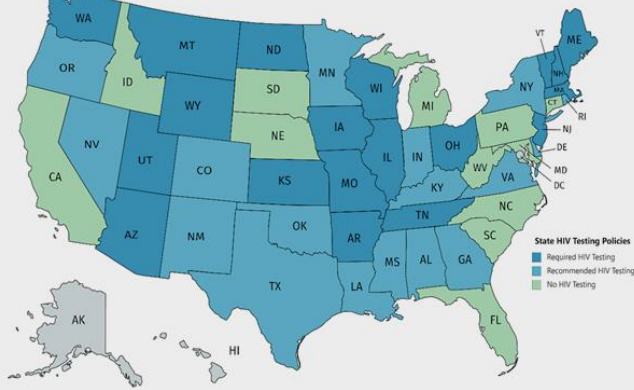
Despite most states requiring or recommending HIV testing by SUD treatment programs, programs are largely not complying with state policy. Early implementation of HIV policies may have resulted in reduced compliance over time, which needs to be explored in future research.

Disclosure of Interest Statement:

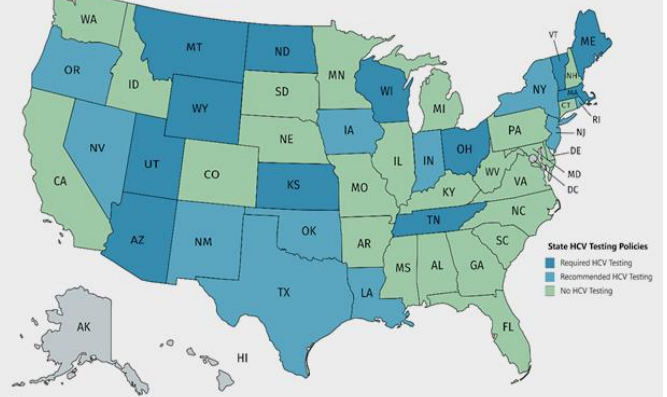
We have no conflicts of interest to disclose.

HIV and HCV Testing Policies for Substance Use Disorder Treatment Programs in the United States

A. HIV Testing



B. HCV Testing



Note: Policies were not identified for states in gray