March 23, 2006

J. Robert Galvin, M.D., M.P.H.
Commissioner
410 Capitol Avenue,
P.O. Box 340308,
Hartford, Connecticut 06134-0308

Dear Dr. Galvin,

On April 28, 2006, the Senate Subcommittee on Federal Financial Management which I chair will be holding a hearing entitled “Ensuring Early Diagnosis and Access to Treatment for HIV/AIDS: Where and How Are Federal Funds Being Distributed?” The purpose of this hearing is to review federal efforts to assist states identify and provide treatment to those living with HIV/AIDS.

The federal Centers for Disease Control and Prevention (CDC) announced a new initiative, “Advancing HIV Prevention (AHP): New Strategies for a Changing Epidemic” on April 17, 2003. Its aim is to reduce barriers to early diagnosis of HIV infection and increase access to quality medical care, treatment, and ongoing prevention services for HIV-positive persons and their partners. Among the component of AHP initiative include making HIV testing a routine part of medical care and decreasing perinatal HIV transmission.

Connecticut, however, has been a pioneer in protecting women and newborns from HIV/AIDS. For nearly a decade now, the state has had a law in place providing routine HIV testing of pregnant women and universal HIV testing of newborns.

In preparation for our hearing, the Subcommittee could benefit from your experience with this policy.

Could you please provide a brief overview of the Connecticut law? Would you deem it a success? Has it enabled you to better identify and provide treatment to more women with HIV and children at risk for infection? Has there been any evidence that this law has discouraged women from seeking prenatal care? What was the percentage of pregnant women whom received HIV testing prior to the enactment of the law compared to the percentage receiving testing now? What was the number of newborns with HIV/AIDS recorded annually prior to the law and in the most current year for which you have data? What percentage of pregnant women refuse HIV testing? What are their reasons for refusing testing? What percentage of newborns and new mothers are sent home after delivery with an unknown HIV status? How does this compare to the percentage prior to the enactment of the law? What percentage of women and
children that test positive for HIV antibodies are then referred into appropriate care?

I would be interested in hearing any additional thoughts your may have on this law and federal efforts to promote early diagnosis.

Thank you for taking the time to respond to this inquiry and please do not hesitate to contact me or Roland Foster of my staff at (202) 224-5754 if you have any questions.

Sincerely,

Tom A. Coburn, M.D.
U.S. Senator