Balancing Patient Privacy and Prevention of HIV Transmission: An Ethical Conundrum of Trusting and Verifying that "*U Equals U*"

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Background

- In 2022, ~31,800 people newly acquired HIV[1]
- HIV can be acquired horizontally through sexual transmission, or vertically through the placenta to the developing fetus
- HIV acquisition during pregnancy is associated with an 8x higher risk for transmission to the fetus compared with chronic HIV infection[2]
- Knowing a partner's HIV status allows a pregnant person to access care to prevent sexual transmission.
- Ambiguous Health Insurance Portability and Accountability (HIPAA) and HIV disclosure policies may limit a provider's ability and/or understanding of their disclosure responsibility while ensuring patient privacy

Methods

- We reviewed of the policies across District V jurisdictions (Indiana, Kentucky, Michigan, Ohio, and Ontario, Canada) of the American College of Obstetrics and Gynecology
- Search terms included "HIV disclosure" and "HIPAA"
- Inclusion criteria: Legal codes were extracted for data if they outlined HIV disclosure policies for healthcare providers
- "Healthcare providers" was defined as any licensed individual who provides healthcare services.

Case Report

A 30-year-old pregnant person, Jane Doe, told her obstetrician that her partner, Richard Roe, is living with HIV and has an undetectable HIV viral load.

Days later, Jane accompanies Richard to his maintenance infectious disease appointment.

Richard's provider recognized that Jane was visibly pregnant and remembered that Richard's last HIV viral load was NOT undetectable.

Should Richard's provider disclose his HIV status to Jane?

How can he protect Richard's privacy and prevent Jane and her developing fetus from acquiring HIV infection?

Results

- Each ACOG District V jurisdiction has its own policies (Figure 1).
- Clinical guidance on Richard and Jane's case is contingent on state policies (Figure 2).

	INDIANA	KENTUCKY	MICHIGAN	OHIO	ONTARIO
Allows disclosure to partner	✓		✓	✓	✓
Allows disclosure to parent or child	✓			✓	
Allows disclosure without patient consent	✓		✓	✓	✓
Requires de-identification of patient information			✓		
Requires notifications of public health official	✓	✓	✓	✓	✓

Figure 1. HIV Disclosure Policies by ACOG District V Jurisdiction

STATE / PROVINCE	Next Steps
INDIANA	Disclose HIV status to Jane **regardless** of consent *Requires reasonable efforts to inform Richard of healthcare provider's intent
KENTUCKY	Only disclose HIV status to Jane **with** Richard's consent
MICHIGAN	Disclose to Jane that they have been exposed, **excluding any of Richard's identifying information**
OHIO	Disclose HIV status to Jane **regardless** of consent
ONTARIO	Disclose HIV status to Jane **regardless** of consent *Disclosure not allowed if Richard explicitly requested no status sharing

Figure 2. Provider Rights and Responsibilities by ACOG District V Jurisdiction

Conclusions

- There is great variation in HIV disclosure policies across ACOG District V jurisdictions.
- Improving provider awareness of legislative policies and their responsibilities ensures they can make the correct ethical and legal choice to protect patients, partners, and developing fetuses while remaining compliant with HIPAA and state HIV disclosure laws.

Next Steps

- Conduct a narrative review of published literature on provider disclosure of HIV status in CDC-designated Ending the HIV Epidemic (EHE) jurisdictions.
- Create and maintain a living database of HIV disclosure policies that providers may easily reference.

References

[1]U.S. Department of Health and Human Services. (2025). *U.S. statistics*. HIV.gov. https://www.hiv.gov/hiv-basics/overview/data-and-trends/statistics

[2]Panel on Treatment of HIV During Pregnancy and Prevention of Perinatal Transmission. (2024, January 31). *Recommendations for the use of antiretroviral drugs during pregnancy and interventions to reduce perinatal HIV transmission in the United States*. U.S. Department of Health and Human Services. https://clinicalinfo.hiv.gov/en/guidelines/perinatal