A meeting of the Philadelphia Board of Health was held on Thursday, November 10, in the Municipal Services Building, 1401 J.F.K. Boulevard, 14th Floor, Room 1450.

**Board Members Present:** Tyra Bryant-Stephens, MD; Ana Diez-Roux, MD, PhD, MPH; Thomas Farley, MD, MPH; Marla J. Gold, MD; Amid I. Ismail, BDS, MPH, DrPH, MBA; A. Scott McNeal, DO; John Rich, MD, MPH

**Attendees:** Jane Baker; Kathleen Brady, MD; Jeffrey Hom, MD; Jeff Moran; Jean A. Ottis; Josh Roper; Coleman Terrell

**WELCOME AND INTRODUCTIONS:**

Health Commissioner and Board President Thomas A. Farley, MD, MPH, called the meeting to order at 5:35 PM, welcoming the Board and guests. Dr. Farley asked for comments or question about the minutes of the meeting of the Board of Health held on September 8, 2016. Hearing none, he entertained a motion to approve the minutes as submitted. It was moved and seconded. **Motion passed.**

**MODIFICATIONS TO HIV REPORTING REQUIREMENTS**

Dr. Farley introduced AIDS Activities Coordinating Office Epidemiologist Kathleen Brady, MD, to present the Board with proposed regulatory change in HIV/AIDS reporting entitled **“AMENDMENTS TO REGULATIONS GOVERNING THE CONTROL OF COMMUNICABLE AND NONCOMMUNICABLE DISEASES AND CONDITIONS.”** (Attachment A)

Dr. Brady presented an overview of the proposed “HIV Reporting Regulation Change” (Attachment B), and responded to questions from the Board.
Dr. Gold inquired about the form used in reporting HIV genotypes. Dr. Brady said that the department receives FASTA and FASTQ files. She said that the department gets sequence data and, through the CDC, is able to evaluate linked infections.

Dr. Gold asked what else, in addition to HIV, is currently reportable in pregnant women. Dr. Farley said that any infectious disease that occurs during pregnancy is reported to the department if it is on our reportable disease list. The difference in the case of HIV is that it is a chronic disease. Women who become pregnant may have been initially reported as HIV positive years earlier. Dr. Brady said that the number of perinatal exposures has declined over time largely because fewer women of child bearing years are living with HIV. The department sees 75-90 perinatal HIV exposures per year and there were to two infected babies in 2015. The number was as high as seven or eight in 2005.

In response to a question from Dr. Bryant-Stephens, Dr. Brady said that you can consider an infant is uninfected if they have has two negative RNA or DNA PCR tests between birth and four months of age, although there is usually follow up to determine that the baby has seroreverted 18 months.

Dr. McNeal and other Board members asked for clarification in the regulation concerning the mechanism for reporting of a pregnancy in a woman who had previously been reported HIV positive. He also asked for what is done to follow up on these reports. Dr. Brady said that reports come from multiple sources and that the department offers perinatal case management, support services, and referral to care.

Dr. Farley observed that the current health code already allows the department access to the medical records of any case of reportable disease. Dr. Brady and others said that duplicating this within the regulation will make it clear to providers that this access applies to HIV and is not superseded by the confidentiality provision of Act 59.

Dr. Gold asked if a range of services is also available to women with HIV who are not pregnant. Coleman Terrell, Director of the AIDS Activities Coordinating Office said that anyone with HIV is eligible for HIV medical case management and a full range of services that includes emergency financial assistance, and food and transportation assistance.

Dr. Brady briefly summarized the aim of each section of the proposed regulation.

Dr. Farley asked the Board to review the specific language of the new regulation and propose changes.

The Board discussed and agreed upon extensive changes to the document that are reflected in "REVISED -AMENDMENTS TO REGULATIONS GOVERNING THE CONTROL OF COMMUNICABLE AND NONCOMMUNICABLE DISEASES AND CONDITIONS." (Attachment C)

It was moved that the amendment to the regulations be approved as revised by the Board. Motion seconded. Motion passed.
The amendment to the regulations will be submitted to the Law Department for review, and then posted by the Department of Records for 30-day period of public comment. If requested during the public comment period, the Board will hold a public hearing on the amendment to the regulations.

ANNOUNCEMENTS:

None.

Dr. Farley adjourned the meeting at 7 PM.