

641—1.18 (135,139A) Specimens for which the fee charged by the state hygienic laboratory shall be waived.

1.18(1) Purpose. Iowa Code section 263.8 and 681—subrule 5.3(1) provide that the state hygienic laboratory shall perform without charge all bacteriological, serological, and epidemiological examinations and investigations which are required by the department and established in rule, including specimens relating to diseases communicable from human to human and from animals to human and any specimen when there is probable cause that a direct threat to public health exists. The purpose of this rule is to designate those examinations which shall be performed by the state hygienic laboratory without charge pursuant to these legal authorities.

1.18(2) Acute infectious diseases. Regardless of the entity that submits the specimen, the following examinations shall be performed by the state hygienic laboratory without charge:

- a. Anthrax;
- b. Botulism;
- c. Cholera;
- d. Diphtheria;
- e. Haemophilus influenzae type B invasive disease;
- f. Measles;
- g. Meningococcal invasive disease;
- h. Pulsed-field gel electrophoresis (PFGE) (Listeria, Salmonella, E. coli);
- i. Plague;
- j. Poliomyelitis;
- k. Rabies, animal (human exposure only);
- l. Rabies, human;
- m. Smallpox;
- n. Vancomycin intermediate Staphylococcus aureus (VISA) and vancomycin-resistant Staphylococcus aureus (VRSA) confirmation;
- o. Tuberculosis (exception: QuantiFERON-TB Gold testing that is not associated with contact investigation);
- p. Viral hemorrhagic fever;
- q. Yellow fever; and
- r. Under any of the following circumstances:
 - (1) All outbreaks (respiratory and enteric pathogens, and environmental contaminants where justified) shall be reported to the department, and the department will instruct the state hygienic laboratory to waive the fee.
 - (2) Periodic confirmations at the request of the department.
 - (3) All situations where negative stool cultures are being requested for public health purposes.
 - (4) When the state hygienic laboratory is specifically funded to do testing.

1.18(3) Sexually transmitted disease and infections and HIV/AIDS. The following examinations shall be performed by the state hygienic laboratory without charge if the following defined criteria have been met and if the specimen was sent to the state hygienic laboratory from sites approved by and submitted to the laboratory by the department:

- a. Chlamydia and gonorrhea.
 - (1) All individuals 24 years of age or younger.
 - (2) Individuals above the age of 24 with any of the following:
 1. New or multiple sex partners in the last 90 days;
 2. Persons with reported symptoms consistent with chlamydia or gonorrhea;
 3. Persons with observed clinical signs consistent with chlamydia or gonorrhea or pelvic inflammatory disease (PID);
 4. Persons recently diagnosed with another sexually transmitted infection (STI);

5. Persons who have a sex partner in one of the other risk groups (new or multiple partners, STI diagnosis); or

6. Women presenting for an intrauterine device (IUD) insertion.

(3) Persons who have tested positive within the last four months (i.e., retesting).

(4) Persons diagnosed with gonorrhea and treated with alternative regimens as defined by the Centers for Disease Control and Prevention (CDC) (i.e., tests of cure).

b. Hepatitis B. All unvaccinated individuals at increased risk, including:

(1) Men who have sex with men;

(2) HIV-positive persons; or

(3) Persons who have ever injected drugs.

c. Maternal hepatitis B.

(1) Testing related to case management of HBsAG-positive pregnant women;

(2) Household contacts of HBsAG-positive pregnant women tested for infection or immunity (HBsAG, anti-HBs);

(3) Children born to HBsAG-positive women (postvaccination serology testing).

d. Hepatitis C. All individuals at increased risk, including persons who have ever injected drugs.

e. Herpes simplex virus. Individuals who present with clinical signs of genital herpes.

f. Human immunodeficiency virus (HIV). All individuals at increased risk, including:

(1) Men who have sex with men;

(2) Disproportionately impacted populations (as determined by the department based on epidemiological data);

(3) Persons who have ever injected drugs;

(4) Persons who exchange sex for drugs or money; or

(5) Persons with an STI diagnosis within the last 12 months or someone who has a partner in another risk group (IDU, MSM, recent STI, exchange sex for drugs or money).

g. Syphilis.

(1) All individuals at increased risk, including:

1. Persons who have had signs or symptoms consistent with primary or secondary syphilis within the last 12 months;

2. Men who have sex with men;

3. Persons diagnosed with other STIs;

4. Persons who exchange sex for drugs or money; or

5. Persons who have recently been treated for syphilis to monitor serologic response (titers) at intervals recommended by the CDC.

(2) All pregnant women at first prenatal visit. Tests that are initially reactive will be followed up with a secondary test of different methodology to assist with diagnosis and staging of the infection (i.e., specimens reactive using a nontreponemal test will be analyzed using a treponemal test). Testing should be repeated in the third trimester for women at high risk of having been exposed to the infection.