



**American General Life Insurance Company**, 2727-A Allen Parkway, Houston, TX 77019  
**The United States Life Insurance Company in the City of New York**, 175 Water St, New York, NY 10038  
*A member of American International Group, Inc. (AIG)*

**Notice Of AIDS Virus (HIV) Antibody Testing And Consent For Testing**

**AIDS:**

Acquired Immunodeficiency Syndrome (AIDS) is a life-threatening disorder of the immune system caused by a virus, HIV. The virus is transmitted by sexual contact with an infected person, from an infected mother to her newborn infant, or by exposure to infected blood (as in needle-sharing during IV drug use). Persons at high risk of contracting AIDS include males who have had sexual contact with another man, intravenous drug users, hemophiliacs, and sexual contacts of any of these persons. AIDS does not typically develop until a person has been infected with HIV for several years. A person may remain free of symptoms for years after becoming infected. Infected persons have a 25-50% chance of developing AIDS over the next 10 years.

**The HIV antibody test:**

Before consenting to testing, please read the following important information:

1. **Purpose.** This test is being run to determine whether you may have been infected with HIV. If you are infected, you are probably not insurable. This test is not a test for AIDS; AIDS can only be diagnosed by medical evaluation.
2. **Positive Test Results.** If you test positive, you should seek medical follow-up with your personal physician. If your test is positive, you may be infected with HIV.
3. **Accuracy.** An HIV test will be considered positive only after confirmation by a laboratory procedure that the state health officer has determined to be highly accurate. Nonetheless, the HIV antibody test is not 100% accurate. Possible errors include:
  - a. **False positives:** the test gives a positive result, even though you are not infected. This happens only rarely and is more common in persons who have not engaged in high risk behavior. Retesting should be done to help confirm the validity of a positive test.
  - b. **False negatives:** the test gives a negative result, even though you are infected with HIV. This happens most commonly in recently infected persons; it takes at least 4-12 weeks for a positive test result to develop after a person is infected.
4. **Side Effects.** A positive test result may cause you significant anxiety. A positive test may result in uninsurability for life, health or disability insurance policies you may apply for in the future. Although prohibited by law, discrimination in housing, employment or public accommodations may result if your test results were to become known to others. A negative result may create a false sense of security.
5. **Disclosure of Results.** A positive test result will be disclosed to you. You may choose to have information about your HIV test results communicated to you through your physician, through the county health department or directly.
6. **Confidentiality.** Like all medical information, HIV test results are confidential. An insurer, insurance agent, or insurance-support organization is required to maintain the confidentiality of HIV test results. However, certain disclosures of your test results may occur, including those authorized by consent forms that you may have signed as part of your overall application. Your test results may be provided to the Medical Information Bureau, a national insurance data bank. Your insurance agent will provide you with additional written information about this subject at your request.
7. **Prevention.** Persons who have a history of high risk behavior should change these behaviors to prevent getting or giving AIDS, regardless of whether they are tested. Specific important changes in behavior include safe sex practices (including condom use for sexual contact with someone other than a long-term monogamous partner) and not sharing needles.
8. **Information.** Further information about HIV testing and AIDS can be obtained by calling the Oregon AIDS hotline within the Portland area at 223-AIDS and outside the Portland area at 1-800-777-AIDS. Health insurance may be available through the Oregon Medical Insurance Pool for persons who are not otherwise able to obtain coverage. The telephone number for the Oregon Medical Insurance Pool is 1-800-542-3104 or 1-503-373-1692.





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Type of Policy Applied For: \_\_\_\_\_

Examiner: \_\_\_\_\_  
\_\_\_\_\_

**The Tests:**

To evaluate your eligibility for insurance or insurance benefits, it is requested that you provide a sample of your bodily fluids (blood, urine, and/or oral fluid) for testing and analysis. One of the tests to be performed on this sample may be a test to determine the presence of antibodies to the Human Immunodeficiency Virus (HIV), also known as the AIDS virus. The HIV antibody test is actually a series of tests consisting of two ELISA (enzyme-linked immunosorbent assay) tests and one Western Blot test done by a medically accepted procedure which is extremely reliable. The testing will be performed by a licensed laboratory.

**Disclosure of Test Results:**

All test results will be treated confidentially. The results of the test will be reported to the Insurer named above. The results also may be reported to its affiliates, reinsurers, or contractors in connection with insurance you have or have applied for. In addition, if your HIV antibody test is abnormal (positive), a generic code signifying a non-specific abnormality may be made known to MIB, Inc. as described in the informational brochure given you at the time of application. The fact that the test has been done and the results of the test will not be otherwise disclosed except as may be required by law or as authorized by you.

You are also requested to designate the person to whom positive test results are to be reported:

- Your physician       The county health department

Name of physician or county health department for reporting a possible positive test result:

\_\_\_\_\_

Address: \_\_\_\_\_

- Yourself

The result will be sent to you at the address provided, by registered mail with delivery restricted to you only.

**Meaning of Test Results:**

While positive HIV antibody test results do not mean that you have AIDS, they do mean that you are at seriously increased risk of developing AIDS or AIDS-related conditions. Federal authorities say that persons who are HIV antibody positive should be considered infected with the AIDS virus and capable of infecting others. Positive HIV antibody test results will adversely affect your insurance application.

**Consent:**

I have read and I understand this Notice of AIDS Virus (HIV) Antibody Testing and Consent for Testing. For my information, I have been given written material about AIDS. I voluntarily consent to the withdrawal of blood from me by needle and/or collection of other bodily fluids, the testing of my bodily fluids for HIV antibodies, and the disclosure of the test results as described above. I understand that this consent shall be valid for six months following the date shown below.

**Signature of Proposed Insured**

X \_\_\_\_\_

Date signed \_\_\_\_\_

Proposed Insured's name (printed) \_\_\_\_\_  
\_\_\_\_\_

Date of Birth \_\_\_\_\_

State of Residence \_\_\_\_\_

Submit this page with the application.

