

Analytic Framework: Economics of Partner Services Interventions to Increase HIV Testing

The analytic framework postulates that partner services interventions for patients newly diagnosed with HIV (index patients) will increase the number of sexual or needle sharing partners who are referred for HIV testing and HIV services. Increased referral of partners to HIV testing and services will increase HIV testing and improve HIV prevention and viral suppression, thus reducing HIV morbidity and mortality.

The economic review identified the cost of labor, tests, and travel and overhead to be drivers of intervention cost, which could be used to calculate cost per person tested, cost per person newly diagnosed with HIV, or cost per averted HIV infection. The economic review postulates that the interventions would lead to economic benefits from decreased healthcare costs due to averted HIV infection and increased productivity due to reduced morbidity and mortality. Decrease in healthcare cost from averted HIV infection is considered a driver of economic benefit.

Reduced morbidity and mortality due to HIV partner services will increase both quantity and quality of life years lived and avert disability adjusted life years. The framework conceptualizes summary economic outcomes as cost-effectiveness and cost-benefit. Cost-effectiveness is net cost per additional quality adjusted life year saved or disability-adjusted life year averted. Cost-benefit is the ratio of averted healthcare cost and increased productivity to the intervention cost.