

# PROTECTIVE LIFE INSURANCE COMPANY

P.O. Box 830619

Birmingham, AL 35283-0619

## CONSENT FORM FOR HIV ANTIBODY TEST

I hereby authorize Protective Life Insurance Company to draw and test my blood and urine or oral specimen as may be necessary to underwrite my application for insurance coverage. These tests to be performed, may include, but are not limited to, tests for cholesterol and related blood lipids, diabetes, liver or kidney disorders, immune disorders, the presence of drugs, nicotine, or their metabolites, and the presence of antibodies to the Human Immunodeficiency Virus (HIV), (if permitted by law). This is the virus that has been associated with Acquired Immune Deficiency Syndrome (AIDS). The results of the tests will be used to determine insurability.

There may be 3 tests to determine the presence of antibodies to HIV. A positive ELISA test will be followed by a second ELISA test. A Western Blot test will follow two positive ELISA tests.

Should the HIV antibody test prove to be positive, the results will be disclosed to you. You may elect to have the results sent to a physician of your choice, your county health department, or directly to you by registered mail. Indicate your choice below:

- A positive HIV antibody test should be mailed to my physician:

Name: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

- A positive HIV antibody test should be mailed to the Health Department of \_\_\_\_\_ County.
- A positive HIV antibody test should be mailed to me by registered mail.

The results will be made only to the insurance company and/or its reinsurers, if involved in the underwriting process, and the MIB, LLC in the manner described in the Pre-Notice which was given to me as part of the application process.

We will hold the test results in the strictest confidence and only designated employees of Protective Life Insurance Company such as our underwriters, Medical Director and legal staff will be allowed access to these results.

This authorization shall be valid for 6 months from the date shown below. I will be given a copy of this if I ask for it. A copy of this shall be as valid as the original.

I authorize Protective Life Insurance Company or its reinsurers to make a brief report of any personal health information to the MIB.

\_\_\_\_\_  
Signature of Proposed Insured

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Proposed Insured (Print)

OREGON ADMINISTRATIVE RULES  
CHAPTER 836 – DEPARTMENT OF INSURANCE AND FINANCE

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**HIV Antibody Test  
Information Form For Insurance Applicant  
OAR 836-50-250**

**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 intravenous drug use). Persons at high risk of contracting AIDS include males who have had sexual contact with another male, intravenous drug users, hemophiliacs, and contacts of any of these persons. AIDS does not typically develop until a male person has been infected with HIV for several years. A person may remain free of symptoms for years after becoming infected. An infected person has a significant chance of developing AIDS over the next 10 years.

**The HIV Antibody Test:**

Before you consent 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 because 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. **Possible Adverse Effects of Test.** A positive test result may cause you significant anxiety. A positive test may result in uninsurability for life, health, or disability insurance policies for which you may apply 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 or the physician or county health department that you designate.
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 affiliates, reinsurers, employees and contractors of the insurer in relation to the underwriting of the insurance application.
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.