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| **Aspect of care to be addressed** | **Intervention type** | **Intervention** | **Maximum Impact** | **Realistic Impact** | **Cost**  **(2013 USD)** |
| Individuals are unaware of their HIV status. At baseline, the mean time for an individual to test through VCT is 7.2 years. Additionally individuals may test through PICT, but the time to test varies depending on health care experience and symptoms. Asymptomatic and no previous care experience = 15.6 years. Asymptomatic and diagnosed = 11 years. Asymptomatic and aware of CD4 count = 5 years. Symptomatic = 1.5 years. | *Testing* | ***HBCT*** | Every four years, 90% coverage of population. 100% linked to care. | Every four years, 90% coverage. 5.4% linked if had not previously been diagnosed, else 25%. | $18 per HBCT person tested. |
| ***Enhanced VCT*** | The rate of HIV testing is twice that of baseline. | The rate of HIV testing is 125% that of baseline. | $50 per person tested. |
| *Testing & Linkage* | ***HBCT (with POC)*** | Ever four years, 90% coverage of population. POC CD4 reduces risk of not linked to 0%. | Every four years, 90% coverage of population. POC CD4 reduces risk of not linked by 50%. | $60 per HBCT person tested. |
| Individuals are not connecting to care in timely manner. At baseline, 60% of patients tested through VCT or PICT successfully link to care. | *Linkage* | ***Facilitated Linkage*** | The risk of failure-to-link is reduced to 0% | The risk of failure-to-link is reduced by 50%. | No additional costs applied. |
| ***VCT POC*** | At VCT testing, a POC CD4 test is given to patients reducing the risk of not linking to 0%. | | $80 per POC CD4 test. |
| Individuals engage with care but are subsequently lost prior to starting treatment. On average at baseline, for every CD4 test 56% of patients are lost from care before receiving their results. On the day of a CD4 test result appointment, 20% of patients fail to attend and are also lost from care. After receiving the results of a CD4 test, on average 35% of patients fail to return for a subsequent CD4 test in a years time. | *Pre-ART Retention* | ***Pre-ART Outreach*** | In the middle of each year, 100% of tested individuals lost from care are returned. | In the middle of each year, 20% of tested individuals lost from care are returned. | $19.55 per patient sought. |
| ***Improved Care*** | The risk of a patient missing an appointment is reduced to 0%. | The risk of a patient missing an appointment is reduced by 50%. | No additional costs applied. |
| ***POC*** | A POC CD4 test reduces loss from care between CD4 test and result by 100%, as results are available instantaneously. (The risk of loss to follow-up between appointments is unchanged). | | $70 per POC CD4 test. |
| Individuals initiate ART but subsequently drop out of care. At baseline, 8% dropout in the first year of ART and 5% thereafter. | *On-ART Retention* | ***On-ART Outreach*** | In the middle of each year, 100% of patients who have initiated ART and been lost from care are returned. | In the middle of each year, 40% of patients who have initiated ART and been lost from care are returned. | $19.55 per patient sought. |
| Individuals initiate ART but only 75% adhere to treatment. | ***Adherence*** | At ART initiation, all individuals adhere to ART and become virally suppressed. | At ART initiation, 87.5% of individuals adhere to ART and become virally suppressed. | $33.54 per person per year. |
| Pre-ART care as a whole. | *Sweeping Changes* | ***Immediate ART*** | No pre-ART care, all individuals who enter care are treated immediately. | | Only additional costs due to increased usage of ART. |
| ***Universal Test & Treat*** | Immediate ART & HBCT | Immediate ART & HBCT, but 20% fail to start ART and 20% fail to link to ART | $18 per HBCT person tested. |