

MEMORANDUM OF UNDERSTANDING

Milwaukee Health Department (MHD) is requesting the assistance of the AIDS RESOURCE CENTER OF WISCONSIN (ARCW) in implementing measures necessary to prevent, suppress or control communicable disease (WI SS 252.03) through fee exempt testing for clients in the jurisdictional area of Milwaukee Health Department which is the City of Milwaukee.

Financial eligibility for fee exempt testing shall include clients without health insurance or other health coverage or clients who are unable to pay for health care services and qualify under the low-income financial guidelines established by ARCW.

Specimens collected from City of Milwaukee residents may be submitted to the Wisconsin State Laboratory of Hygiene for Hepatitis C testing. The account number ___ is to be used for transactions.

Specimen collection shall be directed for communicable disease investigation and control and may include stool, sputum, blood, nasopharyngeal, intraurethral, and endocervical specimens.

ARCW shall comply with the communicable disease reporting schedule identified on the Division of Public Health Form 4151 for all confirmed test results.

Milwaukee Health Department and ARCW shall have established confidentiality and referral policies and procedures during the period of this MOU.

Both parties entering this agreement shall make services available to eligible clients and shall not discriminate because of age, race, color, handicap, sex, creed, national origin, ancestry, sexual orientation, arrest and conviction record, marital status or religion.

Both parties shall observe all pertinent federal and state statutes and rules, as well as professional standards.

The benefit of this MOU is to ultimately improve health and well being of the community by serving clients at risk for communicable diseases who do not have the means to pay for laboratory testing. In entering this agreement, both parties shall respect the clients' rights to privacy and shall deliver services that are family centered, community based and culturally competent.

This MOU shall be reviewed annually. Either party may terminate this agreement at any time by providing a thirty (30) day written notice to the other party. This agreement remains in effect until terminated or amended in accordance with this provision.

Seth Foldy, MD
Health Commissioner
Milwaukee Health Department

Date

Doug Nelson
President and CEO
AIDS Resource Center of Wisconsin

Date