# Monitoring & Evaluation Report

# Comprehensive HIV Prevention Programs for Health Departments (PS12-1201)

An overview of progress on selected PS12-1201 required and recommended program components in 61 CDC-funded health departments in the United States, Puerto Rico, and the U.S. Virgin Islands



## Comprehensive HIV Prevention Programs for Health Departments (PS12-1201): Monitoring and Evaluation Report, 2014

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#### **BACKGROUND**

In response to the White House's National HIV/AIDS Strategy [1], the Centers for Disease Control and Prevention (CDC) is implementing a High-Impact Prevention (HIP) approach, which includes geographic targeting of resources, identifying HIV-infected persons who do not know their HIV status and linking them to medical care and antiretroviral therapy, and identifying the combination of approaches that demonstrate the greatest impact on decreasing HIV incidence.

Through its "Comprehensive HIV Prevention Programs for Health Departments" (Funding Opportunity Announcement [FOA] PS12-1201), the Centers for Disease Control and Prevention (CDC) provides support to state, territorial, and local health departments to build and maintain partnerships in their jurisdictions and use them to provide comprehensive, high-impact HIV prevention services, integrated with HIV care [2]. The goals of PS12-1201 are as follows:

- Reduce HIV transmission by building the capacity of health departments to focus HIV prevention efforts in communities and local areas where HIV is most heavily concentrated to achieve the greatest impact in decreasing risk for acquiring HIV
- Increase HIV testing
- Increase access to HIV medical care and improve health outcomes for people living with HIV by linking them to continuous, coordinated, and quality medical, prevention, and social services
- Increase awareness and educate communities about the threat of HIV and methods for preventing it
- Expand targeted efforts to prevent HIV infection using a combination of effective, evidencebased approaches, including delivery of integrated and coordinated biomedical, behavioral, and structural HIV prevention interventions
- Reduce HIV-related disparities and promote health equity

#### PS12-1201 has three funding categories:

- Category A funds 61 health departments to support the following four <u>required</u> core HIV prevention components:
  - HIV testing
  - Comprehensive prevention with HIV-positive persons (CPP)
  - Condom distribution
  - Policy initiatives to address structural barriers

Category A funds may also be used to support the following <u>recommended</u> HIV prevention components:

- Evidence-based HIV prevention interventions for HIV-negative persons at risk for acquiring HIV
- Social marketing, media, and mobilization
- Support services for pre-exposure prophylaxis (PrEP) and non-occupational post-exposure prophylaxis (nPEP) for high-risk populations.

In addition to HIV prevention components, health departments funded through PS12-1201 must conduct the following <u>required</u> program support activities:

- Jurisdictional HIV prevention planning
- Capacity building and technical assistance
- Program planning, monitoring and evaluation, and quality assurance.
- Category B funds 34 health departments to conduct expanded HIV testing for disproportionately affected populations, primarily in healthcare settings. Category B funds may also be used to support testing for hepatitis B virus (HBV), hepatitis C virus (HCV), sexually transmitted infections (STIs), and tuberculosis (TB), in conjunction with HIV testing. Up to 30% of Category B funds can be used for targeted HIV testing in non-healthcare settings.
- Category C funds 30 health departments to conduct demonstration projects related to high-impact prevention. Category C is not addressed in this report.

This report is intended to be used by HIV program managers, CDC project officers, and others interested in monitoring grantees' progress toward achieving the PS12-1201 FOA targets. It is based on data submitted to CDC through the National HIV Prevention Program Monitoring and Evaluation (NHM&E) system on September 15, 2015, and data submitted in Annual Progress Reports (APRs) on March 15, 2015, by 61 health departments funded under PS12-1201. The report covers the period January 1, 2014 through December 31, 2014, and highlights findings related to the following PS12-1201-funded activities:

- HIV testing
- Linkage to and re-engagement in HIV medical care
- Interview for partner services
- Referral to HIV prevention services
- Service integration
- Condom distribution
- Risk-reduction activities

The report includes trends in key HIV testing indicators from 2012 through 2014.

#### **HIGHLIGHTS**

#### **HIV Test Events Conducted**

- Under Category A, 61 health departments reported a total of 1,625,214 HIV test events.
   This represents 81% of the annual two million test national goal set by the FOA.
- Under Category B, 34 health departments reported a total of 1,212,723 HIV test events.
   This represents 93% of the annual 1.3 million test national goal set by the FOA.

## **Positive Test Events, Newly Diagnosed Infection** Category A

- In healthcare and non-healthcare settings combined, there were 7,371 (0.5%) persons with newly diagnosed HIV infection.
- In healthcare settings, 55 (90%) health departments achieved the FOA recommended newly diagnosed HIV positivity target of ≥ 0.1%
   [3].
- In non-healthcare settings, 11 (18%) health departments achieved the FOA required newly diagnosed HIV positivity target of ≥ 1.0%.

#### Category B

- In healthcare and non-healthcare settings combined, there were 3,463 (0.3%) persons with newly diagnosed HIV infection.
- ◆ In healthcare settings, 33 (97%) health
  departments achieved the recommended new
  HIV positivity (≥ 0.1%) [3].
- ◆ In non-healthcare settings, one (8%) of 13 health departments achieved the required new HIV positivity (≥ 2.0%).

### Linkage to and Re-engagement in Medical Care

Persons with Newly Diagnosed Infection

Category A and Category B both require health departments to link at least 80% of persons with newly diagnosed infection to HIV medical care within any time frame. Under Category A, 37 (61%) health departments achieved this requirement. Under Category B, 18 (53%) health departments achieved this requirement.

#### Persons with Previously Diagnosed Infection

5,680 persons who had previously diagnosed infection but were not in care were linked to or re-engaged in HIV medical care.

#### **Linkage to Treatment Adherence Services**

• 6,113 HIV-positive persons were linked to treatment adherence services.

#### **Interview for Partner Services**

- Under Category A, health departments are required to interview at least 75% of persons with newly diagnosed, confirmed infection for partner services. Forty-seven (77%) health departments achieved this requirement.
- Under Category B, health departments are required to interview at least 80% of persons with newly diagnosed, confirmed infection for partner services. Fourteen (41%) health departments achieved this requirement.

#### **Referral to HIV Prevention Services**

Under Category B, health departments are required to refer at least 80% of persons with newly diagnosed, confirmed HIV infection to HIV prevention services. Nineteen (56%) health departments achieved this requirement.

#### **Service Integration**

Under Category B, service integration [4] is an optional program component. Four health departments reported that 23,983 HIV tests had at least one STI, viral hepatitis, or TB test conducted concurrently.

## Risk-Reduction Interventions for HIV-positive and High-risk HIV-negative Persons

19,777 HIV-positive persons and 42,591
HIV-negative persons were enrolled in one or more CDC-recommended evidence-based risk-reduction intervention.

#### **PROGRAM ACCOMPLISHMENTS**

#### I. PS12-1201 Required Core Components

#### A. HIV testing

(Data Source: NHM&E test-event-level HIV testing data submitted through EvaluationWeb® as of September 15, 2015)

#### Categories A and B, combined:

Overall, the 61 health departments conducted 2,837,937 HIV test events in 2014. This is 86% of the combined Category A and Category B FOA annual test-event target of 3,300,000. In healthcare settings, there were 6,682 (0.3%) persons with newly diagnosed HIV infection; whereas, in non-healthcare settings, there were 4,152 (0.6%) persons with newly diagnosed HIV infection.

#### Category A

Sixty-one health departments reported a total of 1,625,214 HIV test events; this is 81% of the annual two million test national goal set by the FOA (Table 1).<sup>a</sup> Of these, there were 7,585 (0.5%) persons with newly diagnosed HIV infection.

Sixty health departments reported a total of 997,173 HIV test events in healthcare settings and 549,591 in non-healthcare settings. Of these, there were 3,984 (0.4%) persons in healthcare settings and 3,387 (0.6%) persons in non-healthcare settings with newly diagnosed HIV infection (Table 2).<sup>b</sup>

- In healthcare settings, 55 (90%) health departments achieved the FOA recommended newly diagnosed HIV positivity target of ≥ 0.1%.<sup>b</sup>
- In non-healthcare settings, 11 (18%) health departments achieved the FOA required newly diagnosed HIV positivity target of ≥ 1.0%.<sup>b</sup>

#### Category B

Thirty-four health departments reported a total of 1,212,723 HIV test events; this is 93% of the annual 1.3 million test national goal set by the FOA (Table 1).<sup>a</sup> Of these, there were 3,466 (0.3%) persons with newly diagnosed HIV infection (Table 2).<sup>b</sup> The national goal set for Category B by the FOA was to identify 5,500 persons with newly diagnosed infection.

Thirty-four health departments reported a total of 1,069,181 HIV test events in healthcare settings, and 13 health departments reported a total of 140,590 HIV tests in non-healthcare settings. Of these, there were 2,698 (0.3%) persons in healthcare settings and 765 (0.5%) persons in non-healthcare settings with newly diagnosed HIV infection (Table 2).<sup>b</sup>

<sup>&</sup>lt;sup>a</sup> Total number of HIV tests include aggregate-level and test-event level data submitted to CDC by 61 health departments funded under PS12-1201.

<sup>&</sup>lt;sup>b</sup> Health departments submitting only HIV test-event level data and HIV tests that could be categorized into healthcare and non-healthcare settings are included in the analyses.

- $\oplus$  In healthcare settings, 33 (97%) health departments achieved the FOA recommended newly diagnosed HIV positivity target of  $\geq$  0.1%.<sup>b</sup>
- In non-healthcare settings, one (7%) of 13 health departments achieved the FOA required newly diagnosed HIV positivity target of ≥ 2.0%.<sup>b</sup>

The demographic and target population characteristics of persons with newly diagnosed HIV infection under Categories A and B are shown in Figure 1.

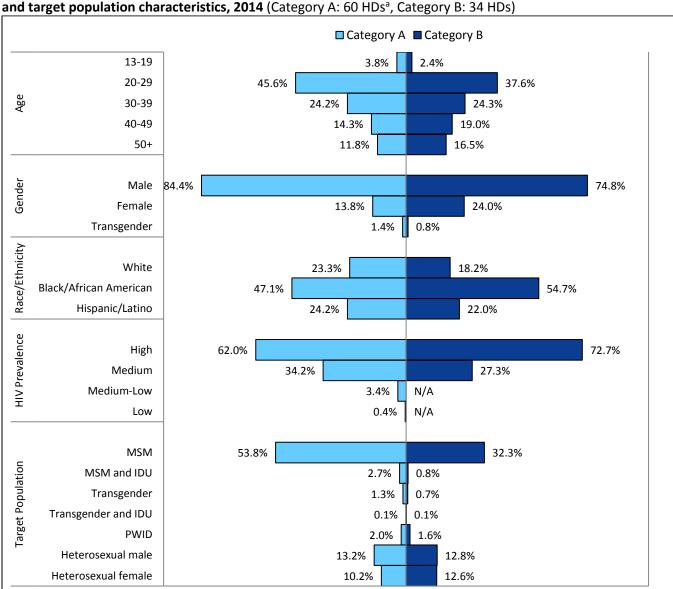


Figure 1: Categories A and B – Distribution of persons with newly diagnosed HIV infection, by demographic and target population characteristics 2014 (Category A: 60 HDs<sup>2</sup> Category B: 34 HDs)

Data Source: 2014 NHM&E HIV test-event-level data submitted through EvaluationWeb® as of September 15, 2015.

0%

100%

100%

<sup>&</sup>lt;sup>a</sup> Under Category A, one health department did not provide HIV test-event-level information and was excluded from the analyses.

<sup>◆</sup> Percentages do not add up to a 100% as age < 13 years; Asian, American Indian/Alaska Native, Native Hawaiian/Pacific Islander or multi-race; and missing/invalid, declined, not asked, or don't know are not shown in the figure (refer to Tables 3 and 4).

<sup>◆</sup> PWID (persons who inject drugs) includes persons who reported injection drug use in the past 12 months.

<sup>♦</sup> N/A indicates that no health departments could be classified as "Medium-Low" and "Low" based on HIV prevalence. Please refer to definition of HIV Prevalence in Appendix A: Technical notes and definitions section on page 25.

#### **B.** Comprehensive HIV Prevention with HIV-Positive Persons

 Linkage to HIV medical care in any time frame, persons with newly diagnosed HIV infection (Data Source: NHM&E test-event-level HIV testing data submitted through EvaluationWeb<sup>®</sup> as of September 15, 2015)

#### Categories A and B, combined:

7,244 (86%) persons with newly diagnosed HIV infection were linked to HIV medical care in any timeframe after HIV diagnosis.

#### Category A

Of tests conducted under Category A, 78% of records had valid and complete information on outcome of linkage to HIV medical care (Table 5). Based on these records, 5,027 of 5,922 (85%) persons with newly diagnosed HIV infection were linked to HIV medical care in any timeframe (Table 5).<sup>c</sup> Under Category A, health departments are required to link at least 80% of persons with newly diagnosed infection to HIV medical care. Thirty-seven (61%) health departments achieved this requirement.<sup>d</sup>

#### Category B

Of tests conducted under Category B, 72% of records had valid and complete information on outcome of linkage to HIV medical care (Table 6). Based on these records, 2,217 of 2,481 (89%) persons with newly diagnosed HIV infection were linked to HIV medical care in any timeframe (Table 6). Under Category B, health departments are required to link at least 80% of persons with newly diagnosed infection to HIV medical care in any timeframe. Eighteen (53%) health departments achieved this requirement.

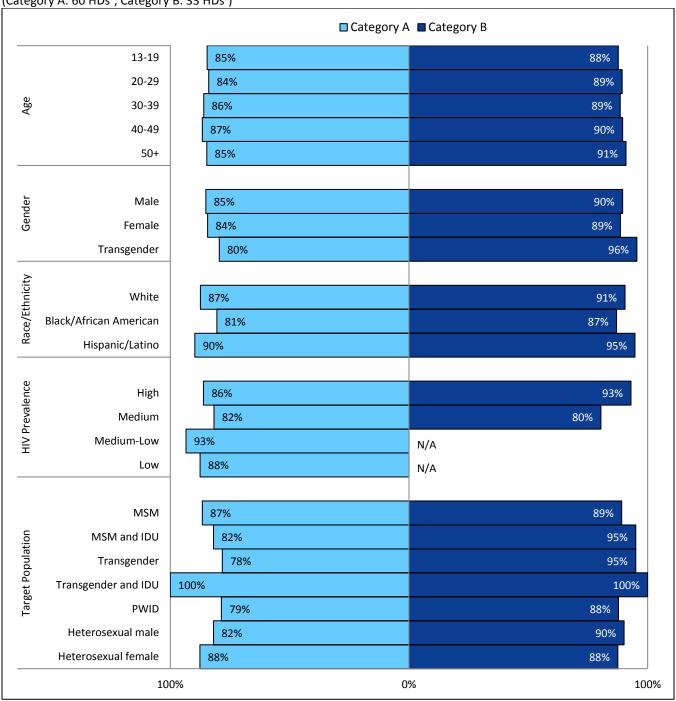
The demographic and target population characteristics of persons with newly diagnosed HIV infection who were linked to HIV medical care under Categories A and B are shown in Figure 2.

<sup>&</sup>lt;sup>c</sup> For this section, records that are missing data on linkage to HIV medical care are excluded from the denominator. Therefore the linkage percentages shown represent the *reported* percentages of newly diagnosed HIV-positive persons linked to HIV medical care. This is based only on test records with valid data on linkage to HIV medical care.

<sup>&</sup>lt;sup>d</sup> Reported percentages were used to determine whether or not the health department met the FOA requirement for linkage to HIV medical care.

Figure 2: Categories A and B – Percentage of persons with newly diagnosed HIV infection who were linked to HIV medical care, by demographic and target population characteristics, 2014

(Category A: 60 HDsa, Category B: 33 HDsa)



Data Source: 2014 NHM&E HIV test-event-level data submitted through EvaluationWeb® as of September 15, 2015.

- ♦ Percentages do not add up to a 100% as age < 13 years; Asian, American Indian/Alaska Native, Native Hawaiian/Pacific Islander or multi-race; and missing/invalid, declined, not asked, or don't know are not shown in the figure (refer to Tables 5 and 6).
- ◆ PWID (persons who inject drugs) includes persons who reported injection drug use in the past 12 months.
- ♦ N/A indicates that no health departments could be classified as "Medium-Low" and "Low" based on HIV prevalence. Please refer to definition of HIV Prevalence in Appendix A: Technical notes and definitions section on page 25.
- ♦ Linkage percentages shown represent the reported percentages of newly diagnosed HIV-positive persons linked to HIV medical care, but these may be overestimating the actual linkage percentages (refer to Tables 5 and 6).

<sup>&</sup>lt;sup>a</sup> One Category A funded health department and one Category B funded health department were excluded from the analyses as there were no newly diagnosed HIV-positive test events to calculate linkage to HIV medical care.

## 2. Linkage to HIV medical care within 90 days of diagnosis, persons with newly diagnosed HIV infection

(Data Source: NHM&E test-event-level HIV testing data submitted through EvaluationWeb® as of September 15, 2015)

#### Categories A and B, combined:

• 6,364 (82%) persons with newly diagnosed HIV infection were linked to HIV medical care within 90 days of diagnosis.

The 2010 NHAS established the goal that by 2015, 85% of persons with newly diagnosed HIV infection should be linked to HIV medical care within 90 days of diagnosis.

#### Category A

Of tests conducted under Category A, approximately 70% of records had valid and complete information on outcome of linkage to HIV medical care within 90 days of diagnosis. Based on these records, 4,444 of 5,493 (81%) persons with newly diagnosed infection were linked to HIV medical care within 90 days of diagnosis (Table 7).<sup>e</sup> Twenty-six (43%) health departments achieved the NHAS goal.<sup>f</sup>

#### Category B

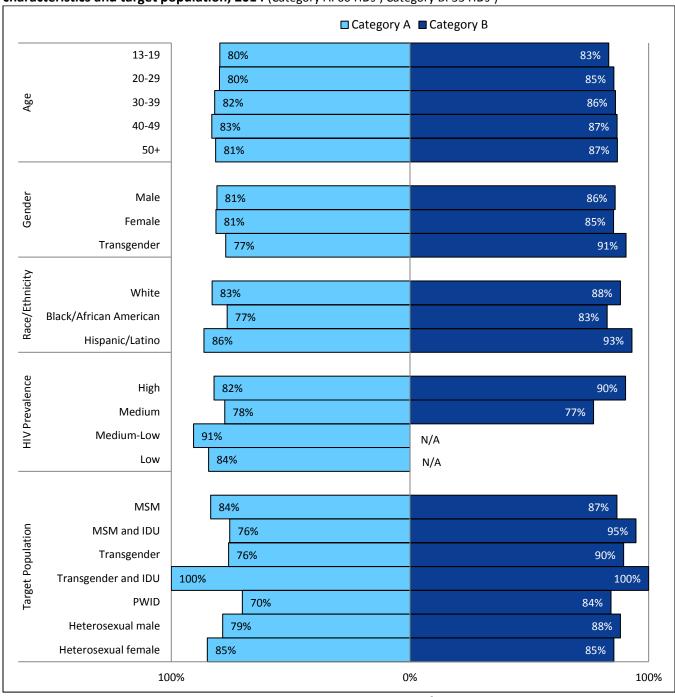
As with Category A, records of approximately 70% of tests conducted under Category B had valid and complete information on outcome of linkage to HIV medical care within 90 days of diagnosis. Based on these records, 1,920 of 2,233 (86%) persons with newly diagnosed infection were linked to HIV medical care within 90 days of diagnosis (Table 8).<sup>e</sup> Fourteen (41%) health departments achieved the NHAS goal.<sup>f</sup>

The demographic and target population characteristics of persons with newly diagnosed HIV infection who were linked to HIV medical care within 90 days of diagnosis under Categories A and B are shown in Figure 3.

<sup>&</sup>lt;sup>e</sup> For this section, records that are missing data on linkage to HIV medical care within 90 days are excluded from the denominator. Therefore the linkage percentages shown represent the *reported* percentages of newly diagnosed HIV-positive persons linked to HIV medical care within 90 days of diagnosis. This is based only on test records with valid data on linkage to HIV medical care within 90 days of diagnosis.

f Linkage to HIV medical care within 90 days of diagnosis is not an FOA requirement. Reported percentages were used to determine whether or not the the health departments achieved the NHAS goal.

Figure 3: PS12-1201 Category A and B – Healthcare and Non-Healthcare settings: Percentage of newly diagnosed HIV-positive persons linked to HIV medical care within 90 days of diagnosis, by demographic characteristics and target population, 2014 (Category A: 60 HDs<sup>a</sup>, Category B: 33 HDs<sup>a</sup>)



Data Source: 2014 NHM&E HIV test-event-level data submitted through EvaluationWeb\* as of September 15, 2015.

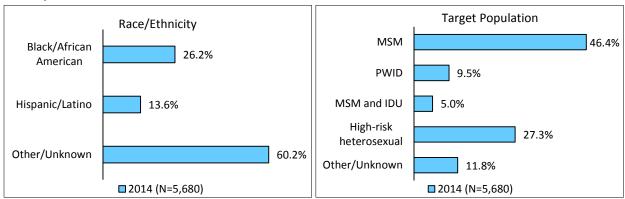
- ◆ Percentages do not add up to a 100% as age < 13 years; Asian, American Indian/Alaska Native, Native Hawaiian/Pacific Islander or multi-race; and missing/invalid, declined, not asked, or don't know are not shown in the figure (refer to Tables 7 and 8).
- ♦ PWID (persons who inject drugs) includes persons who reported injection drug use in the past 12 months.
- ♦ N/A indicates that no health departments could be classified as "Medium-Low" and "Low" based on HIV prevalence. Please refer to definition of HIV Prevalence in Appendix A: Technical notes and definitions section on page 25.
- ♦ Linkage within 90 days percentages shown represent the reported percentages of newly diagnosed HIV-positive persons linked to HIV medical care within 90 days of diagnosis, but these may be overestimating the actual linkage percentages (refer to Tables 7 and 8).

<sup>&</sup>lt;sup>a</sup> One Category A funded health department and one Category B funded health department were excluded from the analyses as there were no newly diagnosed HIV-positive test events to calculate linkage to HIV medical care within 90 days of diagnosis.

# 3. Linkage to or re-engagement in HIV medical care, persons with previously diagnosed HIV infection (Data Source: NHM&E aggregate-level RRA data submitted through EvaluationWeb® as of September 15, 2015)

Forty-nine health departments reported that 5,680 persons with previously diagnosed HIV infection who were not in care were linked to or re-engaged in HIV medical care and treatment services under Category A (Figure 4 and Table 11). A few health departments are still in the process of adapting their data collection methods and systems to report this information.

Figure 4: PS12-1201 Category A- HIV-positive persons linked to or re-engaged in HIV medical care and treatment services, 49 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014



Data Source: 2014 NHM&E RRA aggregate-level data submitted through EvaluationWeb\*as of September 15, 2015.

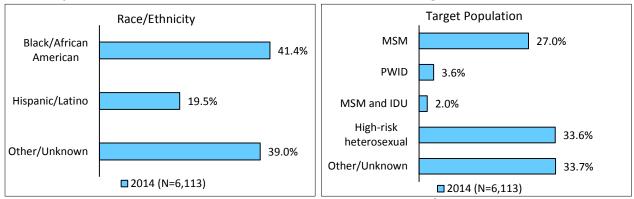
- ◆ PWID (persons who inject drugs) includes persons who reported injection drug use in the past 12 months.
- ♦ Other/unknown race/ethnicity includes white, Asian, American Indian or Alaska Native, Native Hawaiian or Pacific Islander, multi-race or persons whose race/ethnicity status is unknown.
- ♦ Other/unknown race/ethnicity and other/unknown risk cannot be split into sub-groups due to aggregate data being collected from grantees using these response categories.

#### 4. Linkage to treatment adherence services

(Data Source: NHM&E aggregate-level RRA data submitted through EvaluationWeb® as of September 15, 2015)

Forty-eight health departments reported that 6,113 HIV-positive persons were linked to antiretroviral therapy (ART) adherence services under Category A (Figure 5 and Table 12). A few health departments are still in the process of adapting their data collection methods and systems to report this information.

Figure 5: PS12-1201 Category A - HIV-positive persons linked to treatment adherence services, 48 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014



Data Source: 2014 NHM&E RRA aggregate-level data submitted through EvaluationWeb®as of September 15, 2015.

- ♦ PWID (persons who inject drugs) includes persons who reported injection drug use in the past 12 months.
- ♦ Other/unknown race/ethnicity includes white, Asian, American Indian or Alaska Native, Native Hawaiian or Pacific Islander, multi-race or persons whose race/ethnicity status is unknown.
- ♦ Other/unknown race/ethnicity and other/unknown risk cannot be split into sub-groups due to aggregate data being collected from grantees using these response categories.

#### 5. Interview for partner services

(Data Source: NHM&E test-event-level HIV testing data submitted through EvaluationWeb® as of September 15, 2015)

#### PS12-1201 Categories A and B, combined:

• 6,176 (80%) persons with newly diagnosed, confirmed HIV infection were interviewed for partner services.

#### Category A

Of tests conducted under Category A, 87% of records had valid and complete information on outcome of interview for partner services (Table 9). Based on these records, 4,566 of 5,587 (82%) persons with newly diagnosed, confirmed HIV infection were interviewed for partner services (Appendix. C9). Under Category A, health departments are required to interview at least 75% of persons with newly diagnosed, confirmed infection for partner services. Forty-seven (77%) health departments achieved this requirement.

#### Category B

interview for partner services.

Of tests conducted under Category B, 70% of records had valid and complete information on outcome of interview for partner services (Table 10). Based on these records, 1,610 of 2,098 (77%) persons with newly diagnosed, confirmed HIV infection were interviewed for partner services (Table 10). Under Category B, health departments are required to interview at least 80% of persons with newly diagnosed, confirmed infection for partner services. Fourteen (41%) health departments

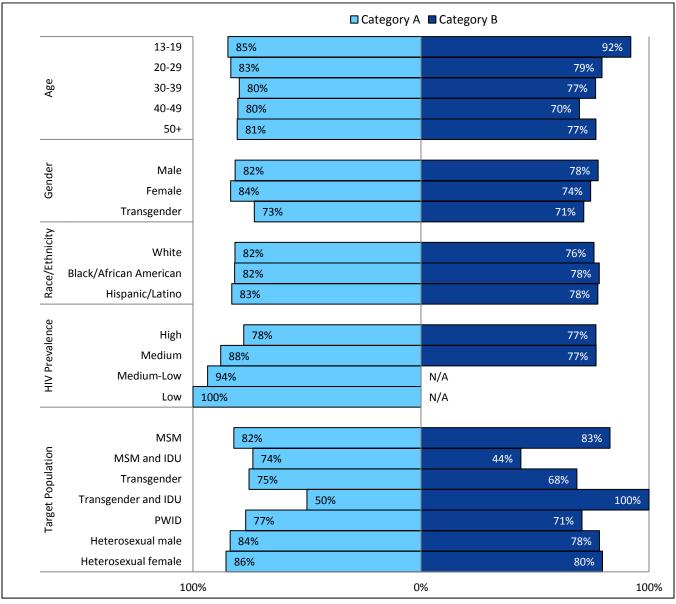
<sup>&</sup>lt;sup>g</sup> For this section, records that are missing data on interview for partner services are excluded from the denominator. Therefore the interview percentages shown represent the reported percentages of newly diagnosed confirmed HIV-positive persons interviewed for partner services. This is based only on test records with valid data on interview for partner services. <sup>h</sup> Reported percentages were used to determine whether or not the health departments met the FOA requirement for

achieved this requirement.h

The demographic and target population characteristics of persons with newly diagnosed, confirmed HIV infection who were interviewed for partner services in healthcare and non-healthcare settings for both Category A and B are shown in Figure 6.

Figure 6: Categories A and B – Percentage of persons with newly diagnosed, confirmed HIV infection who were interviewed for partner services, by demographic and target population characteristics, 2014

(Category A: 58 HDsa; Category B: 32 HDsa)



Data Source: 2014 NHM&E HIV test-event-level data submitted through EvaluationWeb® as of September 15, 2015.

- ◆ Percentages do not add up to a 100% as age < 13 years; Asian, American Indian/Alaska Native, Native Hawaiian/Pacific Islander or multi-race; and missing/invalid, declined, not asked, or don't know are not shown in the figure (refer to Tables 9 and 10).
- ◆ PWID (persons who inject drugs) includes persons who reported injection drug use in the past 12 months.
- ♦ N/A indicates that no health departments could be classified as "Medium-Low" and "Low" based on HIV prevalence. Please refer to definition of HIV Prevalence in Appendix A: Technical notes and definitions section on page 25.
- ♦ Interview percentages for partner services shown represent the reported percentages of newly diagnosed confirmed HIV-positive persons interviewed for partner services, but may be overestimating the actual interview percentages (refer to Tables 9 and 10).

<sup>&</sup>lt;sup>a</sup> Three Category A funded health departments and two Category B funded health departments were excluded from the analyses as there were no newly diagnosed, confirmed HIV-positive test events to calculate interview for partner services.

#### 6. Referral to HIV prevention services

(Data Source: NHM&E test-event-level HIV testing data submitted through EvaluationWeb® as of September 15, 2015)

#### Categories A and B, combined:

 5,964 (80%) persons with newly diagnosed, confirmed HIV infection were referred to HIV prevention services.

#### Category A

Of tests conducted under Category A, 85% of records had valid and complete information on referral to HIV prevention services (Table 13). Based on these records, 4,425 of 5,508 (80%) persons with newly diagnosed, confirmed HIV infection were referred to HIV prevention services (Table 13).

#### Category B

Of tests conducted under Category B, 65% of records had valid and complete information on referral to HIV prevention services (Table 13). Based on records with valid and complete data, 1,539 of 1,942 (79%) persons with newly diagnosed, confirmed HIV infection were referred to HIV prevention services (Table 13). Under Category B, health departments are required to refer at least 80% of persons with newly diagnosed, confirmed infection to HIV prevention services. Nineteen (56%) health departments achieved this requirement.

#### 7. Service integration - Category B

(Data Source: NHM&E aggregate data submitted to CDC through EvaluationWeb®)

Under PS12-1201 Category B, service integration [4] is an optional program component. Four health departments allocated Category B funds to conduct STI (i.e., syphilis, chlamydial infection, and gonorrhea), viral hepatitis (i.e., hepatitis B and C), or TB screening concurrently with HIV testing.

In healthcare and non-healthcare settings, 23,983 HIV tests had at least one STI, viral hepatitis, or TB test conducted concurrently. Of the concurrent tests, 6,591 (28%) were for syphilis, 5,148 (22%) were for gonorrhea, 4,982 (21%) were for chlamydial infection, 4,358 (18%) were for hepatitis B, 2,481 (10%) were for hepatitis C, and 423 (2%) were for TB (Table 14).

<sup>&</sup>lt;sup>1</sup> For this section, records that are missing data on referral to HIV prevention services are excluded from the denominator. Therefore the referral percentages shown represent the reported percentages of newly diagnosed confirmed HIV-positive persons referred to HIV prevention services. This is based only on test records with valid data on referral to HIV prevention services.

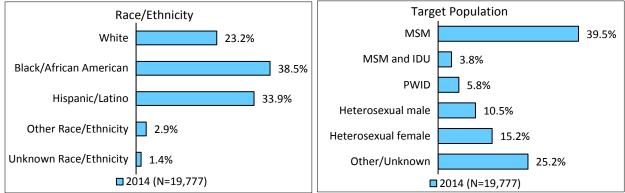
<sup>&</sup>lt;sup>j</sup> Reported percentages were used to determine whether or not the health departments met the FOA requirement for referral to HIV prevention services.

#### 8. Risk-reduction interventions for HIV-positive persons

(Data Source: NHM&E client-level RRA data submitted through EvaluationWeb® as of September 15, 2015)

Under Category A, 41 health departments reported that 19,777 HIV-positive persons were enrolled in one or more CDC-recommended or locally developed, evidence-based behavioral risk-reduction intervention (Figure 7 and Table 15). A few health departments implementing this program component are still in the process of adapting their data collection methods and systems to report this information.

Figure 7. HIV-positive persons enrolled in evidence-based risk-reduction interventions, 41 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014



Data Source: 2014 NHM&E RRA data reported at a client-level in EvaluationWeb® as of September 15, 2015.

- ◆ PWID (persons who inject drugs) includes persons who reported injection drug use in the past 12 months.
- ♦ Other race/ethnicity includes Asian, American Indian or Alaska Native, Native Hawaiian or Pacific Islander or multi-race.
- ♦ Unknown race/ethnicity includes missing/invalid data, don't know, not asked or declined.

#### C. Condom Distribution

(Data Source: 2014 NHM&E data reported through the Annual Progress Reports to CDC)

- Under Category A, 60 health departments reported using PS12-1201 funds to distribute condoms to HIV-positive persons and persons at highest risk for acquiring HIV. In 2014, these health departments reported distributing 119,812,395 condoms.
- Forty-one (67%) health departments achieved their annual objective for condom distribution (Figure 9k).

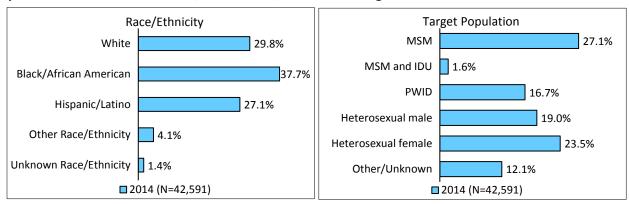
#### II. PS12-1201 RECOMMENDED PROGRAM COMPONENTS

#### A. HIV prevention interventions for high-risk HIV-negative persons

(Data Source: NHM&E client-level RRA data submitted through EvaluationWeb® as of September 15, 2015)

Under Category A, 39 health departments reported that 42,591 high-risk HIV-negative persons were enrolled in one or more CDC-recommended or locally developed, evidence-based behavioral risk-reduction intervention (Figure 8 and Table 16). HIV-prevention interventions for high-risk HIV-negative persons are not implemented by all health departments. Health departments implementing this program component are in the process of adapting their data collection methods and systems to report this information.

Figure 8. HIV-negative persons enrolled in evidence-based risk-reduction interventions, 39 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands 2014



Data Source: 2014 NHM&E RRA data reported at a client-level in EvaluationWeb\* as of September 15, 2015.

- ♦ PWID (persons who inject drugs) includes persons who reported injection drug use in the past 12 months.
- ♦ Other race/ethnicity includes Asian, American Indian or Alaska Native, Native Hawaiian or Pacific Islander or multi-race.
- ♦ Unknown race/ethnicity includes missing/invalid data, don't know, not asked or declined.

#### III. Program Accomplishments: 3-Year Trends, 61 Health Departments, 2012 - 2014

Figures 9a – 9k below present trends in total number of HIV test events conducted, number of newly diagnosed HIV-positive test events, newly diagnosed HIV positivity in non-healthcare settings, percentage of persons with newly diagnosed infection linked to HIV medical care in any timeframe, percentage of persons with newly diagnosed confirmed infection interviewed for partner services, and percentage referred to HIV prevention services, and percentage of annual objective achieved for condom distribution for all health departments, combined, from 2012 through 2014. Figures 9d, 9f, 9h, and 9j shows the number of grantees that met FOA targets from 2012 through 2014.

Figure 9a: Total number of HIV test events

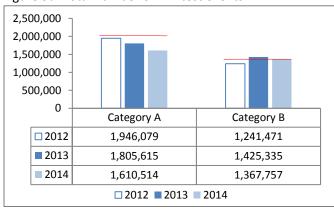


Figure 9c: Newly diagnosed HIV positivity in nonhealthcare settings, overall programs\*

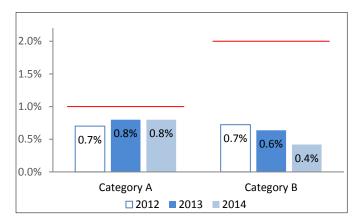


Figure 9e: Percentage linked to HIV medical care

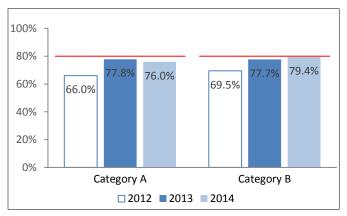


Figure 9b: Newly diagnosed HIV-positive test events

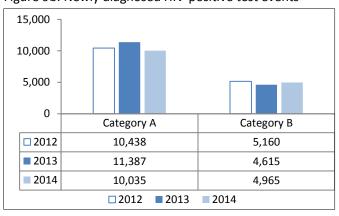


Figure 9d: Number of grantees who met the FOA objective for newly diagnosed HIV positivity in non-healthcare settings\*

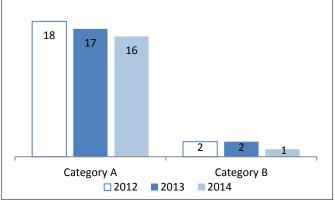


Figure 9f: Number of grantees who met the FOA objective for linkage to HIV medical care

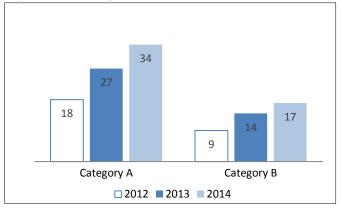


Figure 9g: Percentage interviewed for partner services

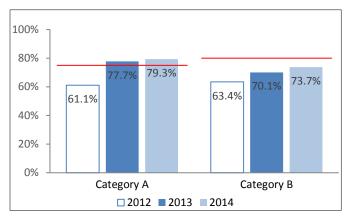


Figure 9i: Percentage referred to HIV prevention services

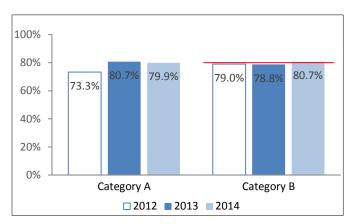
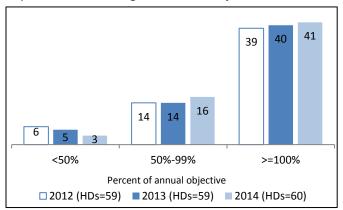


Figure 9k. Condom distribution – Number of health departments achieving their annual objective



#### Notes:

The horizontal red lines in Figures 9a, 9c, 9e, 9g, and 9i indicate FOA requirements.

Figures 9a - 9j: 2012 HIV testing algorithms were used to calculate trends for key HIV testing outcomes from 2012 through 2014. Figures 9c - 9j: The number of HDs submitting HIV test-event-level data:

Category A: 59 HDs (2012), 61 HDs (2013), and 60 HDs (2014)

Category B: 34 HDs in 2012, 2013, and 2014

Figure 9h: Number of grantees who met the FOA objective for interview for partner services

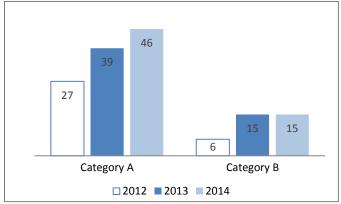
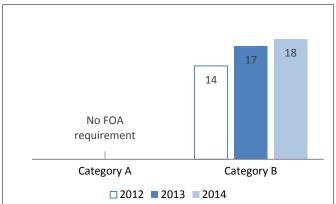


Figure 9j: Number of grantees who met the FOA objective for referral to HIV prevention services



<sup>\*</sup>Figure 9c and 9d: Under Category B, 14 HDs (2012), 15 HDs (2013), and 13 HDs (2014) conducted HIV testing in non-healthcare settings.

#### INTERPRETATION OF THIS REPORT

Several points should be considered when interpreting data and information presented in this report.

- The report reflects findings for the third year of the five-year PS12-1201 project period. During this period, health departments were in different phases of implementing required and recommended program components, depending on staffing resources available, data system capabilities, inter/intradepartmental collaborations within the health departments, and other local factors. The findings in this report may reflect this variation for several measures (e.g., linkage to treatment adherence services, evidence-based risk-reduction interventions).
- Program performance may be affected by several contextual factors, such as HIV prevalence, political environment, existing laws and regulations, program infrastructure and funding levels, surveillance system capacity and availability of surveillance data to help guide program activities, program planning, and start-up activities, and effects of large-scale programmatic changes. This report is not able to account for these and other contextual factors.
- This year, CDC calculated newly diagnosed HIV-positive persons using client self-report and HIV surveillance information, when available. If client reports a previous positive test or the client has been previously reported to HIV surveillance, the records is counted as previously diagnosed. In prior reports, determination of new vs. previous HIV diagnosis was based only on client's self report. Therefore, comparison with previous reports is limited due to this change in definition.
- The HIV testing data in this report include only tests funded through PS12-1201 Categories A and B. This report does not include information on HIV testing funded by other CDC program announcements or other funding sources (e.g., state, local funding). Please refer to CDC-Funded HIV Testing: United, States, Puerto Rico and the U.S. Virgin Islands, 2014 [5] for information on HIV testing funded by all CDC-funded programs.
- Only records that have a valid program announcement number that can be categorized as to whether the testing was done in healthcare or non-healthcare settings were included in the analyses of HIV positivity. In 2014, 37,753 (2.4%) Category A HIV test records and 2,952 (0.2%) Category B HIV test records could not be categorized into healthcare and non-healthcare settings.
- Calculated percentages of linkage to HIV medical care in any timeframe and within 90 days, interview for partner services, and referral to HIV prevention services may not accurately reflect the true levels of those services because records are missing valid data. The percentage of records missing data on these outcomes varies considerably among health departments.

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- White House Office of National AIDS Policy. National HIV/AIDS Strategy for the United States. Washington, DC: White House Office of National AIDS Policy; 2010. Available at http://www.aids.gov/federal-resources/policies/national-hiv-aids-strategy/nhas.pdf.
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- 3. Centers for Disease Control and Prevention. Revised recommendations for HIV testing of adults, adolescents, and pregnant women in health-care settings. MMWR 2006; 55 (No. RR-14):1-17.
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- Centers for Disease Control and Prevention. State HIV Prevention Progress Report, 2010 2013.
   www.cdc.gov/hiv/pdf/policies/progressreports/cdc-hiv-stateprogressreport.pdf. Published December 2015.

#### **APPENDICES**

#### **Appendix A: Technical Notes and Definitions**

#### **Data Source Description**

The NHM&E reporting system collects HIV-related data from CDC-funded health departments on a semi-annual basis. NHM&E variables are reported by test, client-, and aggregate- levels and provide information on interventions delivered, populations reached, agency funding, site of service, client demographics and risk factors, and other program specific information. Standardized data cleaning and processing rules are applied to NHM&E data received through EvaluationWeb\*.

The Annual Progress Reports (APRs) are routine progress reports submitted by PS12-1201 funded health departments to CDC. These reports provide aggregate data related to HIV prevention activities and describe HIV prevention program budget, planning, and implementation of PS12-1201 activities in each health department.

#### **Definitions**

#### Age

The age of the client at the testing event and determined by calculating the difference between the year of a client's birth and the year of the HIV testing event.

#### **Data designation**

#### Aggregate data

Total HIV testing events and confirmed HIV-positive testing events reported by health department when complete test-level data are not submitted to CDC.

#### Invalid data

Any test-level data submitted by the health department jurisdiction that do not conform to the value codes stated in the NHM&E data variable set (DVS).

#### Missing data

Any required data associated with a valid HIV testing record for which data are not submitted by the health department. These data were either not collected by the jurisdiction or were collected but not reported to CDC.

#### Test-event-level data

Data reported by health department for each HIV testing event conducted, including demographics, and when appropriate, behavioral risk, linkage to HIV medical care (within 90 days and within any timeframe), referral to and interview for partner services and referral to HIV prevention services data. For this report, HIV test-event-level data are reported for 61 health departments in 2014.

#### Data variable set (DVS)

The data dictionary includes all NHM&E data elements (i.e., mandatory, required, and allowed data elements), including variable number, name, schema name, format type, minimum and maximum length, value codes, instructions and definitions.

#### **HIV** prevalence

The jurisdictions are grouped according to HIV prevalence as follows, based on the number of persons living with diagnosed HIV infection (PLWH) in 2013 [6]:

O High ≥20,000
 O Medium 4,000 – 19,999
 O Medium-low 1,000 – 3,999
 O Low <1,000 PLWH</li>

#### Evidence-based interventions for HIV-positive persons and high-risk HIV-negative persons

This includes HIV prevention interventions delivered individually to clients (e.g., HIV testing or PS) and some interventions delivered in groups or through outreach. These data are captured for each provider/client interaction. Examples include *Together Learning Choices, Healthy Relationships, Many Men, Many Voices, etc.* 

#### Gender

The person's self-reported current gender identity may include one's social status, self-identification, legal status, and biology. Current gender identity is submitted to CDC as male, female, male-to-female transgender (i.e., a person whose physical or birth sex is male, but whose gender expression and/or gender identity is female), or female-to-male transgender (i.e., a person whose physical or birth sex is female, but whose gender expression and/or gender identity is male). Additionally, in order to identify transgender persons, sex at birth and current gender identity are examined. If the self-reported genders do not match, the person is classified as a transgender person.

#### **High-risk HIV-negative persons**

This includes clients who report that his or her HIV status is negative based on a negative test result, who reported sexual contact and at least one risk factor (other than IDU or MSM). Risk factors include:

- Sex without using a condom
- Exchange of sex for drugs/money/something they need
- Sex while intoxicated and/or high on drugs
- Sex with person of unknown HIV status
- Sex with person who exchanges sex for drugs/money
- Sex with an anonymous partner
- Person diagnosed with a sexually transmitted disease (STD)
- Sex with multiple partners, oral sex (optional)
- Unprotected vaginal/anal sex with a person who is an IDU, HIV-positive person
- Unprotected vaginal/anal sex in exchange for drugs/money/or something they need
- Unprotected vaginal/anal sex with person who exchanges sex for drugs/money

#### **Interview for Partner Services**

Indicates whether or not the client was interviewed for the purpose of HIV partner services by health department staff or providers on behalf of the health department. It may include interviews conducted by providers other than health department staff (e.g., CBO staff; physicians; other persons authorized by law, regulation, or policy), but only if these interviews can be verified. "Verified interviews" are interviews whose outcomes are routinely reported to the health department and may come from outside sources. These outside sources include public health providers that are 1) collecting data on behalf of the health department and 2) provide information to the health department for partner services follow-up.

This calculated indicator measures the extent to which newly diagnosed confirmed HIV-positive persons were interviewed for partner services.

#### Linkage to HIV medical care services within 90 days of diagnosis

HIV medical care includes medical services for HIV infection, including evaluation of immune system function and screening, treatment, and prevention of opportunistic infections. Because of the importance of linking HIV-positive persons to HIV medical care in a timely manner, this indicator is examined separately from "linkage to HIV medical care in any timeframe."

This calculated indicator measures the extent to which newly diagnosed HIV-positive persons were linked to HIV medical care within 90 days of initial positive test. In order for a person to be linked to HIV medical care services, the person must have attended their first medical care appointment within 90 days of the initial HIV testing session. For this report, *minimum percentage linked* represents the worst case scenario for percentage of clients linked to HIV medical care within 90 days of diagnosis. Considering the number of records missing data on linkage, the percentage linked could be as low as this. *Reported percentage linked* represents the percentage of clients linked to HIV medical care within 90 days of diagnosis, based only on records with valid data on this outcome. This is the value used to determine whether or not the health department has met the FOA objective. *Maximum percentage linked* represents the best case scenario for percentage of clients linked to HIV medical care within 90 days of diagnosis. Considering the number of records missing data on linkage, the percentage linked could be as high as this.

#### Linkage to HIV medical care services in any timeframe

HIV medical care includes medical services for HIV infection, including evaluation of immune system function and screening, treatment, and prevention of opportunistic infections.

This calculated indicator measures the extent to which newly diagnosed HIV-positive persons were linked to HIV medical care services. In order for a person to be considered linked to HIV medical care in any timeframe, the person must have attended their first medical care appointment, regardless of when the appointment occurred. Linkage to HIV medical care in any timeframe includes persons who were linked within 90 days as well those who were linked after the 90-day period. For this report, *minimum percentage linked* represents the worst case scenario for percentage of clients linked to HIV medical care in any timeframe. Considering the number of records missing data on linkage, the percentage linked could be as low as this. *Reported percentage linked* represents the percentage of clients linked to HIV medical care in any timeframe, based only on records with valid data on this outcome. This is the value used to determine whether or not the health department has met the FOA objective. *Maximum percentage linked* represents the best case scenario for percentage of clients linked to HIV medical care in any timeframe. Considering the number of records missing data on linkage, the percentage linked could be as high as this.

#### Linkage to treatment adherence services

Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

#### Race/Ethnicity

Race is defined as a client's self-reported classification of the biological heritage with which they most closely identify. Ethnicity is defined as a client's self-report of whether they are Hispanic or Latino. Up to five races and one ethnicity (i.e., Hispanic or Latino) for a client are allowed and submitted to CDC as separate variables. For this report, a

"race/ethnicity" variable was created by combining the race and ethnicity variables using the following categories and hierarchy:

- Hispanic or Latino ("Hispanic or Latino" in the ethnicity variable regardless of the race variables)
- Declined
- Don't know
- Invalid
- Missing

Remaining clients who selected "Not Hispanic or Latino" for the ethnicity variable are categorized as:

- White
- Black or African American
- Asian
- American Indian or Alaska Native
- Native Hawaiian or Pacific Islander
- Multi-race (clients who selected more than one race)

#### Linkage to or re-engagement in HIV medical care

Linkage to or re-engagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV-diagnosed person, who is not in HIV medical care, is said to be linked to or re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

#### Referral to HIV prevention services

HIV prevention services are defined as any service or intervention directly aimed at reducing the risk of transmitting or acquiring HIV infection (e.g., prevention counseling, effective behavioral interventions, risk-reduction counseling). HIV posttest counseling and indirect services, such as mental health services or housing, are excluded.

This calculated indicator measures the extent to which newly diagnosed confirmed HIV-positive persons were provided with a referral to HIV prevention services.

#### **Service integration**

CDC currently recommends that, at a minimum, core integrated services include routine HIV testing consistent with the 2006 CDC Revised Recommendations for HIV testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings and integrate two or more CDC-recommended HIV/AIDS, viral hepatitis, STD, and TB prevention, screening, testing, or treatment services into clinical care [4].

#### **Target population**

NHM&E data for target populations are collected from the person for behavior during the 12 months before the HIV test. The collection of these data is required for all tests performed in non-health care settings and for HIV-positive persons in health care settings.

For this report, a mutually exclusive target population is determined for HIV-positive persons by using a combination of behaviors and gender of the person (male, female, or transgender). The behaviors used to calculate the target population includes vaginal or anal sex with males or females and use of injection drugs.

The target populations are ordered hierarchically on the basis of the most likely presumed risk for exposure to HIV as follows:

- Men who have sex with men (MSM) includes males who reported male-to-male sexual contact in the past
   12 months
- Men who have sex with men and report injection drug use (MSM and IDU) includes males who reported both male-to-male sexual contact and injection drug use in the past 12 months
- Transgender persons who report injection drug use (Transgender and IDU) includes transgender persons (i.e., self-reported sex at birth is different from self-reported current gender) who reported injection drug use in the past 12 months
- Transgender person includes persons whose self-reported gender at birth is different from self-reported current gender
- Persons who inject drugs (PWID) includes persons who reported injection drug use in the past 12 months
- Heterosexual male includes males who only reported heterosexual contact with a female in the past 12 months
- Heterosexual female includes females who only reported heterosexual contact with a male in the past 12 months
- Missing/invalid includes persons: 1) who did not report any of these behaviors, 2) who were not asked about these behaviors, 3) who declined to discuss these behaviors, or 4) for whom these data were not reported, even though they were asked about these behaviors.

#### **Testing events**

#### HIV testing event

An HIV testing event is one or more HIV tests performed with a person to determine a person's HIV status. During one testing event, a person may be tested once (e.g., one rapid test or one conventional test) or multiple times (e.g., one rapid test followed by one conventional test to confirm a preliminary HIV-positive test result).

#### Invalid HIV testing event

An HIV testing event is considered invalid if data are missing/invalid for all of the tests that comprise that HIV testing event for both the following variables: test technology (i.e., conventional, rapid, or other) or HIV test result (i.e., negative, positive, indeterminate, invalid, or no result).

#### **Testing record**

#### Invalid testing record

Required data within a valid HIV testing record that do not conform to the data structure specified by CDC (e.g., illogical dates, incomplete dates, future years, unacceptable value codes, or unexpected data based upon skip patterns in the data collection form).

#### Valid HIV testing record

A test-level data record that includes the mandatory data fields of: session date, agency ID, intervention ID, site ID, site type, and client ID. A test-level testing record cannot be submitted without the mandatory data fields.

#### **Test results**

#### Confirmed HIV-positive testing event

A testing event with an HIV-positive test result for a conventional HIV test [positive enzyme immunoassay (EIA) test confirmed by supplemental testing, e.g., Western blot or a nucleic acid amplification test (NAAT)]. For the purposes of the 2014 annual HIV testing report and for monitoring and evaluation purposes only,

two rapid tests were categorized as a confirmed HIV-positive testing event, unless a negative conventional HIV test result or a negative NAAT test result was documented in the same test event.

#### • HIV-positive testing event

An HIV-positive testing event is determined by any of the following test results: (1) a NAAT/RNA positive test result, (2) a conventional positive test result if a negative NAAT/RNA test result was not part of that testing event, (3) a rapid positive test result if a negative NAAT/RNA or negative conventional test result was not part of that testing event, and (4) a documented positive test result, even if test technology data are missing/invalid if a negative NAAT/RNA or negative conventional test result was not part of that testing event.

#### • Newly diagnosed HIV-positive person

A person who tested HIV-positive during the current testing event and were not found to be previously reported in the health department jurisdiction's HIV surveillance system. If a person was found in the HIV surveillance system as a prior HIV positive case, the HIV-positive testing event was not considered a new diagnosis. Self-report data for prior HIV status were used only for grantees who did not or were unable to verify prior test result within their HIV surveillance system due to specific policies or procedures within their state and/or health department. In this case, newly diagnosed HIV-positive persons were those who tested HIV-positive during the current test event but self-reported not having a previous HIV-positive test result.

#### Preliminary HIV-positive testing event

A testing event with an HIV-positive test result from one rapid HIV test or an HIV-positive test result for which test technology is missing/invalid, without another documented HIV-positive test result.

#### **Test setting**

Test setting is defined as the site type where HIV testing is provided, and for this report, classified into the following categories:

- Healthcare and correctional facilities includes inpatient facilities, outpatient facilities, emergency rooms, and correctional facilities
- Non-healthcare facilities includes HIV counseling and testing sites and community settings
- Other facilities includes blood banks/plasma centers and any other not previously listed facilities
- Invalid the site code submitted for the facility is not one of the acceptable site codes
- Missing no site code is submitted for the testing event

## Appendix B: Data Sources – PS12-1201 Categories A and B, 2014

PS12-1201 Programmatic Components	PS12-1201 Number of health departments reporting Program data in 2014 Component		Data Source(s)			
HIV testing	Required	Category A: 60 HDs Category B: 34 HDs	NHM&E HIV testing data submitted through EvaluationWeb® as of September 15, 2015 (reported at a test-event-level)  Note: Under Category A, one health department did not provide HIV test-event-level information and was excluded from the analyses.			
HIV testing annual objectives		Category A: 61 HDs Category B: 34 HDs	Comprehensive Prevention Plans (received by PPB)			
nkage to HIV medical care  Required  Category A: 60 HDs Category B: 33 HDs			NHM&E HIV testing data submitted through EvaluationWeb® as of September 15, 2015 (reported at a test-event-level)  Note: One Category A funded health department and one Category B funded health department were excluded from the analyses as there were no newly diagnosed HIV-positive tests to calculate linkage to care in any time frame and within 90 days of diagnosis.			
Linkage to or re-engagement in HIV medical care and treatment services	Required	49 HDs	NHM&E RRA aggregate-level data submitted through EvaluationWeb® as of September 15, 2015			
Linkage to treatment adherence services	Required	48 HDs	NHM&E RRA aggregate-level data submitted through EvaluationWeb® as of September 15, 2015			
Interview for partner services, PS12-1201	Required	Category A: 58 HDs Category B: 32 HDs	NHM&E HIV testing data submitted through EvaluationWeb® as of September 15, 2015 (reported at a test-event-level) Note: Three Category A funded health departments and two Category B funded health departments were excluded from the analyses as there were no newly diagnosed, confirmed HIV-positive tests to calculate interview for			

PS12-1201 Programmatic Components	PS12-1201 Program Component	Number of health departments reporting data in 2014	Data Source(s)		
			partner services.		
Referral to HIV prevention services	Required	Category A: 58 HDs Category B: 32 HDs	NHM&E HIV testing data submitted through EvaluationWeb® as of September 15, 2015 (reported at a test-event-level) Note: Three Category A funded health departments and two Category B funded health departments were excluded from the analyses as there were no newly diagnosed, confirmed HIV-positive tests to calculate referral to HIV prevention services.		
Service integration (for Category B)	Recommended	7 HDs	2014 Annual Progress Reports (received by PPB)		
CDC-recommended risk-reduction interventions for HIV-positive persons	Required	41 HDs	NHM&E client-level RRA data submitted through EvaluationWeb® as of September 15, 2015		
Perinatal transmission	Required				
Condom distribution	Required	61 HDs	2014 APRs (received by PPB)		
Condom distribution proposed objectives			Comprehensive Prevention Plans (received by PPB)		
Policy initiatives	Required	Not addressed in this report			
CDC-recommended evidence-based HIV prevention interventions for high-risk HIV-negative persons and persons with unknown HIV status	Recommended	39 HDs	NHM&E client-level RRA data submitted through EvaluationWeb® as of September 14, 2015		
Social marketing, media, and mobilization	Recommended	Not addressed in this report			
Pre-exposure prophylaxis (PrEP)	Recommended	Not addressed in this report			
Post-exposure non-occupational prophylaxis (nPEP)	Recommended	Not addressed in this report			

#### **Appendix C: Tables**

Table 1. PS12-1201 Categories A and B - Percentage of annual HIV test objective achieved, 2014

	Category A (HDs = 61)		Category B - Healthcare settings (HDs = 34)			Category B - Non-healthcare settings (HDs = 13)			
Year	Annual objective, HIV testing events <sup>a</sup>	Total test events conducted <sup>b,c</sup>	Percentage of annual objective achieved	Annual objective, HIV testing events <sup>a</sup>	Total test events conducted <sup>b,c</sup>	Percentage of annual objective achieved	Annual objective, HIV testing events <sup>a</sup>	Total test events conducted <sup>b,c</sup>	Percentage of annual objective achieved
2014	2,187,991	1,625,214	74.3	1,206,291	1,069,181	88.6	79,562	140,590	176.7

Data Source: 2014 NHM&E HIV testing data submitted through EvaluationWeb\* as of September 15, 2015 for the project period January 1, 2014 - December 31, 2014.

Table 2. PS12-1201 Categories A and B – Number of HIV test events and newly diagnosed HIV positivity, 2014

		Healthcare settings		Non-Healthcare settings			
Year	Total valid test events conducted <sup>a</sup> (denominator)	Newly diagnosed HIV- positive test events (numerator)	Newly diagnosed HIV positivity	Total valid test events conducted <sup>a</sup> (denominator)	Newly diagnosed HIV- positive test events (numerator)	Newly diagnosed HIV positivity	
	Catego	ry A: Healthcare settings: ≥0	.1%	Category A: Non-healthcare settings: ≥1.0%			
2014 (HDs = 60)b	997,173	3,984	0.4	549,591	3,387	0.6	
Category B: Healthcare settings: ≥0.1% Category B: Non-healthcare settings: ≥2.0%							
2014 (HDs = 34) <sup>c</sup>	1,069,181	2,698	0.3	140,590	765	0.5	

Data Source: 2014 NHM&E HIV test-event-level data submitted through EvaluationWeb\* as of September 15, 2015 for the project period January 1, 2014 - December 31, 2014.

<sup>&</sup>lt;sup>a</sup> Annual testing objectives are set by the health departments in the Comprehensive Program Plan submitted to CDC for 2014.

bTotal number of HIV testing events includes aggregate-tests and client-level data reported to CDC through EvaluationWeb\* as of September 15, 2015 for the project period January 1, 2014 - December 31, 2014.

<sup>&</sup>lt;sup>c</sup>Total test events include test events with discordant or indeterminate results.

<sup>&</sup>lt;sup>a</sup>Total valid test events include only test events with negative or positive results; test events with discordant or indeterminate results are excluded. This table includes only test events with setting known (i.e., healthcare vs. non-healthcare).

<sup>&</sup>lt;sup>b</sup> In 2014, one health department did not submit HIV test-event-level data.

<sup>&</sup>lt;sup>c</sup> In 2014, under Category B, 34 health departments in healthcare settings and 13 health departments in non-healthcare settings were funded to conduct HIV testing.

Table 3. PS12-1201 Category A – Persons with newly diagnosed HIV infection, by demographic characteristics and target population from 60 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014

		HIV test	events	
Characteristics		2014 (HI	Os = 60)	
Characteristics	Total valid test	Newly diag	gnosed HIV-positive	test events
	events <sup>a</sup>	n	(row%)	(column%)
Age at test (years)				
<13	4,025	8	0.2	0.1
13-19	138,024	286	0.2	3.8
20-29	695,686	3,457	0.5	45.6
30-39	369,637	1,835	0.5	24.2
40-49	198,486	1,088	0.5	14.3
50+	171,917	898	0.5	11.8
Missing/Invalid	6,742	13	0.2	0.2
Gender				
Male	834,013	6,398	0.8	84.4
Female	735,491	1,045	0.1	13.8
Transgender	7,471	108	1.4	1.4
Other <sup>b</sup>	6,932	34	0.5	0.4
Missing/Invalid	610	0	0.0	0.0
Race/Ethnicity				
White	484,540	1,771	0.4	23.3
Black or African American	691,320	3,572	0.5	47.1
Hispanic or Latino	302,420	1,832	0.6	24.2
Asian	35,641	145	0.4	1.9
American Indian or Alaska Native	10,724	27	0.3	0.4
Native Hawaiian or Pacific Islander	5,292	18	0.3	0.2

Characteristics	Total valid test			
	events <sup>a</sup>	n	(row%)	)
Multi-race	15,864	88	0.6	
Other <sup>b</sup>	38,601	132	0.3	
Missing/Invalid	115	0	0.0	
HIV Prevalence				
High	821,197	4,705	0.6	
Medium	674,781	2,592	0.4	
Medium-Low	71,529	255	0.4	
Low	17,010	33	0.2	
Target Population				
MSM	179,197	4,080	2.3	
MSM and IDU	8,181	208	2.5	
Transgender persons	6,978	101	1.4	
Transgender persons and IDU	493	7	1.4	
Persons who inject drugs	55,151	152	0.3	
Heterosexual male	349,416	1,001	0.3	
Heterosexual female	465,486	771	0.2	
No risk/Missing/Invalid	519,615	1,265	0.2	
Total	1,584,517	7,585	0.5	

Note: In 2014, one health department did not submit HIV test-event-level data and was excluded from the analyses.

<sup>&</sup>lt;sup>a</sup> Includes persons with test setting unknown.

<sup>&</sup>lt;sup>b</sup> Other includes declined, don't know, or not asked.

Table 4. PS12-1201 Category B – Persons with newly diagnosed HIV infection, by demographic characteristics and target population from 34 health departments in the United States and Puerto Rico, 2014

		HIV testi	ng events				
Characteristics		2014 (H	Ds = 34)				
Characteristics	Total valid test	Newly dia	Newly diagnosed HIV-positive test even				
	events <sup>a</sup>	n	(row%)	(column%)			
Age at test (years)							
<13	2,787	2	0.1	0.1			
13-19	80,535	83	0.1	2.4			
20-29	410,685	1,304	0.3	37.6			
30-39	273,844	843	0.3	24.3			
40-49	189,435	658	0.3	19.0			
50+	249,806	571	0.2	16.5			
Missing/Invalid	5,631	5	0.1	0.1			
Gender							
Male	562,230	2,593	0.5	74.8			
Female	643,682	831	0.1	24.0			
Transgender	2,316	28	1.2	0.8			
Other <sup>b</sup>	2,676	13	0.5	0.4			
Missing/Invalid	1,819	1	0.1	0.0			
Race/Ethnicity							
White	268,917	631	0.2	18.2			
Black or African American	523,146	1,896	0.4	54.7			
Hispanic or Latino	327,096	762	0.2	22.0			
Asian	24,443	37	0.2	1.1			
American Indian or Alaska Native	2,540	10	0.4	0.3			
Native Hawaiian or Pacific Islander	1,862	4	0.2	0.1			
	•						

		HIV testi	ng events			
Characteristics		2014 (H	Ds = 34)			
Gildi deteriories	Total valid test	Newly diagnosed HIV-positive test events				
	eventsa	n	(row%)	(column%)		
Multi-race	3,650	15	0.4	0.4		
Other <sup>b</sup>	61,050	111	0.2	3.2		
Missing/Invalid	19	0	0.0	0.0		
HIV Prevalence						
High	814,115	2,521	0.3	72.7		
Medium	398,608	945	0.2	27.3		
Medium-Low	N/A	N/A	N/A	N/A		
Low	N/A	N/A	N/A	N/A		
Target Population						
MSM	36,653	1,119	3.1	32.3		
MSM and IDU	877	26	3.0	0.8		
Transgender persons	2,282	25	1.1	0.7		
Transgender persons and IDU	34	3	8.8	0.1		
Persons who inject drugs	9,865	56	0.6	1.6		
Heterosexual male	110,816	442	0.4	12.8		
Heterosexual female	149,200	437	0.3	12.6		
No risk/Missing/Invalid	902,996	1,358	0.2	39.2		
Total	1,212,723	3,466	0.3			

N/A indicates that no health departments could be classified as "Medium-Low" and "Low" based on HIV prevalence. Please refer to definition of HIV Prevalence in Appendix A: Technical notes and definitions section on page 25.

<sup>&</sup>lt;sup>a</sup> Includes persons with test setting unknown.

<sup>&</sup>lt;sup>b</sup> Other includes declined, don't know, or not asked.

Table 5. PS12-1201 Category A – Persons with newly diagnosed HIV infection who were linked to HIV medical care, by demographic characteristics and target population from 59 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014

		Persons wit	h Newly Diagnos	ed HIV Infection	Linked to HIV M	edical Care in An	y Timeframe		
Characteristics	Persons with newly diagnosed HIV infection <sup>a</sup>	With valid data, Linkage in Any Timeframe <sup>b</sup>		Without	Without valid data <sup>c</sup>		Percentage of Newly Diagnosed HIV-Positive Persons Linked to HIV Medical Care in Any Timeframe		
	Total	Linked	Not linked	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>	
Age at test (years)									
<13	8	4	2	2	25.0	50.0	66.7	75.0	
13-19	286	187	34	65	22.7	65.4	84.6	88.1	
20-29	3,457	2,259	432	766	22.2	65.3	83.9	87.5	
30-39	1,835	1,242	203	390	21.3	67.7	86.0	88.9	
40-49	1,088	746	115	227	20.9	68.6	86.6	89.4	
50+	898	586	106	206	22.9	65.3	84.7	88.2	
Missing/Invalid	13	3	3	7	53.8	23.1	50.0	76.9	
Gender									
Male	6,398	4,259	748	1,391	21.7	66.6	85.1	88.3	
Female	1,045	680	126	239	22.9	65.1	84.4	87.9	
Transgender	108	66	17	25	23.1	61.1	79.5	84.3	
Other <sup>g</sup>	34	22	4	8	23.5	64.7	84.6	88.2	
Race/Ethnicity									
White	1,771	1,238	179	354	20.0	69.9	87.4	89.9	
Black or African American	3,572	2,152	522	898	25.1	60.2	80.5	85.4	
Hispanic or Latino	1,832	1,362	156	314	17.1	74.3	89.7	91.5	
Asian	145	102	12	31	21.4	70.3	89.5	91.7	
American Indian or Alaska Native	27	16	5	6	22.2	59.3	76.2	81.5	
Native Hawaiian or Pacific Islander	18	12	1	5	27.8	66.7	92.3	94.4	
Multi-race	88	64	8	16	18.2	72.7	88.9	90.9	
Other <sup>g</sup>	132	81	12	39	29.5	61.4	87.1	90.9	

		Persons wit	h Newly Diagnos	ed HIV Infection	Linked to HIV M	edical Care in An	y Timeframe	
Characteristics	Persons with newly diagnosed HIV infection <sup>a</sup>	With valid data, Linkage in Any Timeframe <sup>b</sup>		Without valid data <sup>c</sup>		Percentage of Newly Diagnosed HIV-Positive Persons Linked to HIV Medical Care in Any Timeframe		
	Total	Linked	Not linked	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>
HIV Prevalence								
High	4,705	3,159	511	1,035	22.0	67.1	86.1	89.1
Medium	2,592	1,626	365	601	23.2	62.7	81.7	85.9
Medium-Low	255	214	15	26	10.2	83.9	93.4	94.1
Low	33	28	4	1	3.0	84.8	87.5	87.9
Target Population								
MSM	4,080	2,893	446	741	18.2	70.9	86.6	89.1
MSM and IDU	208	140	31	37	17.8	67.3	81.9	85.1
Transgender persons	101	61	17	23	22.8	60.4	78.2	83.2
Transgender persons and IDU	7	5	0	2	28.6	71.4	100.0	100.0
Persons who inject drugs	152	88	24	40	26.3	57.9	78.6	84.2
Heterosexual male	1,001	648	143	210	21.0	64.7	81.9	85.7
Heterosexual female	771	535	76	160	20.8	69.4	87.6	90.1
No risk/Missing/Invalid	1,265	657	158	450	35.6	51.9	80.6	87.5
Total	7,585	5,027	895	1,663	21.9	66.3	84.9	88.2

Note: In 2014, three Category A funded health departments did not have newly diagnosed HIV-positive test events.

<sup>&</sup>lt;sup>a</sup> A person with newly diagnosed HIV infection is a person who tests positive on the current test and has no history of a previous positive test (includes persons with unconfirmed preliminary positive rapid tests and persons with confirmed positive tests).

b Number of persons with newly diagnosed HIV infection whose test records have valid information on attending first appointment for HIV medical care in any time frame. This includes persons with test setting unknown.

c Number of persons with newly diagnosed HIV infection whose test records do not have valid information on attending first appointment for HIV medical care in any time frame.

<sup>&</sup>lt;sup>d</sup> Minimum percentage linked represents the worst case scenario for percentage of clients linked to HIV medical care in any time frame. Considering the number of records missing data on linkage, the percentage linked could be as low as this.

e Reported percentage linked represents the percentage of clients linked to HIV medical care in any time frame, based only on records with valid data on this outcome. This is the value used to determine whether or not the health department has met the FOA target.

f Maximum percentage linked represents the best case scenario for percentage of clients linked to HIV medical care in any time frame. Considering the number of records missing data on linkage, the percentage linked could be as high as this.

g Other includes declined, don't know, or not asked.

Table 6. PS 12-1201 Category B – Persons with newly diagnosed HIV infection who were linked to HIV medical care, by demographic characteristics and target population from 33 health departments in the United States and Puerto Rico, 2014

		Persons wit	h Newly Diagnos	ed HIV Infection	Linked to HIV M	edical Care in An	y Timeframe	
Characteristics	Persons with newly diagnosed HIV infection <sup>a</sup>	With valid data, Linkage in Any Timeframe <sup>b</sup>		Without	valid data <sup>c</sup>	Percentage of Newly Diagnosed HIV-Positive Persons Linked to HIV Medical Care in Any Timeframe		
	Total	Linked	Not linked	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>
Age at test (years)								
<13	2	1	0	1	50.0	50.0	100.0	100.0
13-19	83	50	7	26	31.3	60.2	87.7	91.6
20-29	1,304	838	100	366	28.1	64.3	89.3	92.3
30-39	843	544	71	228	27.0	64.5	88.5	91.6
40-49	658	441	52	165	25.1	67.0	89.5	92.1
50+	571	341	34	196	34.3	59.7	90.9	94.0
Missing/Invalid	5	2	0	3	60.0	40.0	100.0	100.0
Gender								
Male	2,593	1,681	198	714	27.5	64.8	89.5	92.4
Female	831	504	65	262	31.5	60.6	88.6	92.2
Transgender	28	21	1	6	21.4	75.0	95.5	96.4
Other <sup>g</sup>	13	10	0	3	23.1	76.9	100.0	100.0
Missing/Invalid	1	1	0	0	0.0	100.0	100.0	100.0
Race/Ethnicity								
White	631	421	44	166	26.3	66.7	90.5	93.0
Black or African American	1,896	1,181	177	538	28.4	62.3	87.0	90.7
Hispanic or Latino	762	487	27	248	32.5	63.9	94.7	96.5
Asian	37	26	4	7	18.9	70.3	86.7	89.2
American Indian or Alaska Native	10	4	2	4	40.0	40.0	66.7	80.0
Native Hawaiian or Pacific Islander	4	2	1	1	25.0	50.0	66.7	75.0
Multi-race	15	9	2	4	26.7	60.0	81.8	86.7

		Persons wit	h Newly Diagnos	ed HIV Infection	Linked to HIV M	edical Care in An	y Timeframe	
Characteristics	Persons with newly diagnosed HIV infection <sup>a</sup>	With valid data, Linkage in Any Timeframe <sup>b</sup>		Without valid data <sup>c</sup>		Percentage of Newly Diagnosed HIV-Positive Persons Linked to HIV Medical Care in Any Timeframe		
	Total	Linked	Not linked	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>
Other <sup>g</sup>	111	87	7	17	15.3	78.4	92.6	93.7
HIV Prevalence								
High	2,521	1,643	124	754	29.9	65.2	93.0	95.1
Medium	945	574	140	231	24.4	60.7	80.4	85.2
Medium-Low	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Low	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Target Population								
MSM	1,119	804	98	217	19.4	71.8	89.1	91.2
MSM and IDU	26	19	1	6	23.1	73.1	95.0	96.2
Transgender persons	25	19	1	5	20.0	76.0	95.0	96.0
Transgender persons and IDU	3	2	0	1	33.3	66.7	100.0	100.0
Persons who inject drugs	56	36	5	15	26.8	64.3	87.8	91.1
Heterosexual male	442	309	34	99	22.4	69.9	90.1	92.3
Heterosexual female	437	300	43	94	21.5	68.6	87.5	90.2
No risk/Missing/Invalid	1,358	728	82	548	40.4	53.6	89.9	94.0
Total	3,466	2,217	264	985	28.4	64.0	89.4	92.4

Note: In 2014, one Category B funded health department did not have newly diagnosed HIV-positive test events.

N/A indicates that no health departments could be classified as "Medium-Low" and "Low" based on HIV prevalence. Please refer to Appendix A: Technical notes and definitions section on page 25.

<sup>&</sup>lt;sup>a</sup> A person with newly diagnosed HIV infection is a person who tests positive on the current test and has no history of a previous positive test (includes persons with unconfirmed preliminary positive rapid tests and persons with confirmed positive tests).

b Number of persons with newly diagnosed HIV infection whose test records have valid information on attending first appointment for HIV medical care in any time frame. This includes persons with test setting unknown.

<sup>&</sup>lt;sup>c</sup> Number of persons with newly diagnosed HIV infection whose test records do not have valid information on attending first appointment for HIV medical care in any time frame.

<sup>&</sup>lt;sup>d</sup> Minimum percentage linked represents the worst case scenario for percentage of clients linked to HIV medical care in any time frame. Considering the number of records missing data on linkage, the percentage linked could be as low as this.

e Reported percentage linked represents the percentage of clients linked to HIV medical care in any time frame, based only on records with valid data on this outcome. This is the value used to determine whether or not the health department has met the FOA target.

f Maximum percentage linked represents the best case scenario for percentage of clients linked to HIV medical care in any time frame. Considering the number of records missing data on linkage, the percentage linked could be as high as this.

g Other includes declined, don't know, or not asked.

Table 7. PS12-1201 Category A – Persons with newly diagnosed HIV infection who were linked to HIV medical care within 90 days of diagnosis, by demographic characteristics and target population from 59 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014

	Р	ersons with Ne	wly Diagnosed H	V Infection Links	ed to HIV Medica	al Care within 90	Days of Diagnosi	s		
Characteristics	Persons with newly diagnosed HIV infection <sup>a</sup>	With valid data, Linkage within 90 days <sup>b</sup>		Without	Without valid data <sup>c</sup>		Percentage of Newly Diagnosed HIV-Positive Persons Linked to HIV Medical Care within 90 days			
	Total	Linked	Not linked	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>		
Age at test (years)										
<13	8	4	2	2	25.0	50.0	66.7	75.0		
13-19	286	161	41	84	29.4	56.3	79.7	85.7		
20-29	3,457	1,970	499	988	28.6	57.0	79.8	85.6		
30-39	1,835	1,103	245	487	26.5	60.1	81.8	86.6		
40-49	1,088	663	136	289	26.6	60.9	83.0	87.5		
50+	898	540	123	235	26.2	60.1	81.4	86.3		
Missing/Invalid	13	3	3	7	53.8	23.1	50.0	76.9		
Gender										
Male	6,398	3,725	881	1,792	28.0	58.2	80.9	86.2		
Female	1,045	636	146	263	25.2	60.9	81.3	86.0		
Transgender	108	61	18	29	26.9	56.5	77.2	83.3		
Other <sup>g</sup>	34	22	4	8	23.5	64.7	84.6	88.2		
Race/Ethnicity										
White	1,771	1,088	224	459	25.9	61.4	82.9	87.4		
Black or African American	3,572	1,951	597	1,024	28.7	54.6	76.6	83.3		
Hispanic or Latino	1,832	1,167	186	479	26.1	63.7	86.3	89.8		
Asian	145	87	12	46	31.7	60.0	87.9	91.7		
American Indian or Alaska Native	27	12	6	9	33.3	44.4	66.7	77.8		
Native Hawaiian or Pacific Islander	18	11	1	6	33.3	61.1	91.7	94.4		
Multi-race	88	56	11	21	23.9	63.6	83.6	87.5		
Other <sup>g</sup>	132	72	12	48	36.4	54.5	85.7	90.9		

	F	ersons with Ne	wly Diagnosed HI	V Infection Linke	ed to HIV Medica	I Care within 90	Days of Diagnosi	s
Characteristics	Persons with newly diagnosed HIV infection <sup>a</sup>	With valid data, Linkage within 90 days <sup>b</sup>		Without valid data <sup>c</sup>		Percentage of Newly Diagnosed HIV-Positive Persons Linked to HIV Medical Care within 90 days		
	Total	Linked	Not linked	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>
HIV Prevalence								
High	4,705	2,712	591	1,402	29.8	57.6	82.1	87.4
Medium	2,592	1,499	432	661	25.5	57.8	77.6	83.3
Medium-Low	255	206	21	28	11.0	80.8	90.7	91.8
Low	33	27	5	1	3.0	81.8	84.4	84.8
Target Population								
MSM	4,080	2,710	535	835	20.5	66.4	83.5	86.9
MSM and IDU	208	117	38	53	25.5	56.3	75.5	81.7
Transgender persons	101	57	18	26	25.7	56.4	76.0	82.2
Transgender persons and IDU	7	4	0	3	42.9	57.1	100.0	100.0
Persons who inject drugs	152	73	31	48	31.6	48.0	70.2	79.6
Heterosexual male	1,001	615	168	218	21.8	61.4	78.5	83.2
Heterosexual female	771	518	92	161	20.9	67.2	84.9	88.1
No risk/Missing/Invalid	1,265	350	167	748	59.1	27.7	67.7	86.8
Total	7,585	4,444	1,049	2,092	27.6	58.6	80.9	86.2

Data Source: 2014 NHM&E HIV test-event-level data submitted through EvaluationWeb\* as of September 15, 2015 for the project period January 1, 2014 - December 31, 2014. Note: In 2014, three Category A funded health departments did not have newly diagnosed HIV-positive test events.

<sup>&</sup>lt;sup>a</sup> A person with newly diagnosed HIV infection is a person who tests positive on the current test and has no history of a previous positive test (includes persons with unconfirmed preliminary positive rapid tests and persons with confirmed positive tests).

b Number of persons with newly diagnosed HIV infection whose test records have valid information on attending first appointment for HIV medical care within 90 days of diagnosis. This includes persons with test setting

<sup>&</sup>lt;sup>c</sup> Number of persons with newly diagnosed HIV infection whose test records do not have valid information on attending first appointment for HIV medical care within 90 days of diagnosis.

<sup>&</sup>lt;sup>d</sup> Minimum percentage linked represents the worst case scenario for percentage of clients linked to HIV medical care within 90 days of diagnosis. Considering the number of records missing data on linkage, the percentage linked could be as low as this.

<sup>&</sup>lt;sup>e</sup> Reported percentage linked represents the percentage of clients linked to HIV medical care within 90 days of diagnosis, based only on records with valid data on this outcome. This is the value used to determine whether or not the health department has met the FOA target.

f Maximum percentage linked represents the best case scenario for percentage of clients linked to HIV medical care within 90 days of diagnosis. Considering the number of records missing data on linkage, the percentage linked could be as high as this.

<sup>&</sup>lt;sup>g</sup> Other includes declined, don't know, or not asked.

Table 8. PS12-1201 Category B – Persons with newly diagnosed HIV infection who were linked to HIV medical care within 90 days of diagnosis, by demographic characteristics and target population from 33 health departments in the United States and Puerto Rico, 2014

		Persons with Ne	wly Diagnosed HI	V Infection Links	ed to HIV Medica	al Care within 90	Days of Diagnosi	s
Characteristics	Persons with newly diagnosed HIV infection <sup>a</sup>	With valid data, Linkage within 90 days <sup>b</sup>		Without valid data <sup>c</sup>		Percentage of Newly Diagnosed HIV-Positive Persons Linked to HIV Medical Care within 90 days		
	Total	Linked within 90 days	Not linked within 90 days	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>
Age at test (years)								
<13	2	1	1	0	0.0	50.0	50.0	50.0
13-19	83	45	9	29	34.9	54.2	83.3	89.2
20-29	1,304	736	126	442	33.9	56.4	85.4	90.3
30-39	843	477	77	289	34.3	56.6	86.1	90.9
40-49	658	375	57	226	34.3	57.0	86.8	91.3
50+	571	285	43	243	42.6	49.9	86.9	92.5
Missing/Invalid	5	1	0	4	80.0	20.0	100.0	100.0
Gender								
Male	2,593	1,449	235	909	35.1	55.9	86.0	90.9
Female	831	441	76	314	37.8	53.1	85.3	90.9
Transgender	28	19	2	7	25.0	67.9	90.5	92.9
Other <sup>g</sup>	13	10	0	3	23.1	76.9	100.0	100.0
Missing/Invalid	1	1	0	0	0.0	100.0	100.0	100.0
Race/Ethnicity								
White	631	366	49	216	34.2	58.0	88.2	92.2
Black or African American	1,896	1,023	216	657	34.7	54.0	82.6	88.6
Hispanic or Latino	762	410	31	321	42.1	53.8	93.0	95.9
Asian	37	25	4	8	21.6	67.6	86.2	89.2
American Indian or Alaska Native	10	4	2	4	40.0	40.0	66.7	80.0
Native Hawaiian or Pacific Islander	4	1	1	2	50.0	25.0	50.0	75.0
Multi-race	15	9	2	4	26.7	60.0	81.8	86.7

		Persons with Ne	wly Diagnosed HI	V Infection Linke	ed to HIV Medica	l Care within 90 I	Days of Diagnosi	s	
Characteristics	Persons with newly diagnosed HIV infection <sup>a</sup>	With valid data, Linkage within 90 days <sup>b</sup>		Without v	Without valid data <sup>c</sup>		Percentage of Newly Diagnosed HIV-Positive Persons Linked to HIV Medical Care within 90 days		
	Total	Linked within 90 days	Not linked within 90 days	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>	
Other <sup>g</sup>	111	82	8	21	18.9	73.9	91.1	92.8	
HIV Prevalence									
High	2,521	1,372	148	1,001	39.7	54.4	90.3	94.1	
Medium	945	548	165	232	24.6	58.0	76.9	82.5	
Medium-Low	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Low	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Target Population									
MSM	1,119	771	118	230	20.6	68.9	86.7	89.5	
MSM and IDU	26	18	1	7	26.9	69.2	94.7	96.2	
Transgender persons	25	17	2	6	24.0	68.0	89.5	92.0	
Transgender persons and IDU	3	2	0	1	33.3	66.7	100.0	100.0	
Persons who inject drugs	56	32	6	18	32.1	57.1	84.2	89.3	
Heterosexual male	442	299	40	103	23.3	67.6	88.2	91.0	
Heterosexual female	437	286	49	102	23.3	65.4	85.4	88.8	
No risk/Missing/Invalid	1,358	495	97	766	56.4	36.5	83.6	92.9	
Total	3,466	1,920	313	1,233	35.6	55.4	86.0	91.0	

Data Source: 2014 NHM&E HIV test-event-level data submitted through EvaluationWeb\* as of September 15, 2015 for the project period January 1, 2014 - December 31, 2014. Note: In 2014, one Category B funded health department did not have newly diagnosed HIV-positive test events.

N/A indicates that no health departments could be classified as "Medium-Low" and "Low" based on HIV prevalence. Please refer to Appendix A: Technical notes and definitions section on page 25.

<sup>&</sup>lt;sup>a</sup> A person with newly diagnosed HIV infection is a person who tests positive on the current test and has no history of a previous positive test (includes persons with unconfirmed preliminary positive rapid tests and persons with confirmed positive tests).

b Number of persons with newly diagnosed HIV infection whose test records have valid information on attending first appointment for HIV medical care within 90 days of diagnosis.

<sup>&</sup>lt;sup>c</sup> Number of persons with newly diagnosed HIV infection whose test records do not have valid information on attending first appointment for HIV medical care within 90 days of diagnosis.

<sup>&</sup>lt;sup>d</sup> Minimum percentage linked represents the worst case scenario for percentage of clients linked to HIV medical care within 90 days of diagnosis. Considering the number of records missing data on linkage, the percentage linked could be as low as this.

e Reported percentage linked represents the percentage of clients linked to HIV medical care within 90 days of diagnosis, based only on records with valid data on this outcome. This is the value used to determine whether or not the health department has met the FOA target.

<sup>&</sup>lt;sup>f</sup> Maximum percentage linked represents the **best case scenario** for percentage of clients linked to HIV medical care within 90 days of diagnosis. Considering the number of records missing data on linkage, the percentage linked **could** be as high as this.

g Other includes declined, don't know, or not asked.

Table 9. PS12-1201 Category A – Persons with newly diagnosed, confirmed HIV infection who were interviewed for partner services, by Table 9. PS12-1201 Category A – Persons with newly diagnosed, confirmed HIV infection who were interviewed for partner services, by demographic characteristics and target population from 58 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014

		Persons wi	th Newly Diagnosed	, Confirmed H	IIV Infection Inte	erviewed for Part	ner Services	
Characteristics	Persons with newly diagnosed, confirmed HIV infection <sup>a</sup>	Interviewed for Partner Services <sup>b</sup>		Without valid data <sup>c</sup>		Percentage of Newly Diagnosed, Confirmed HIV-Positive Persons Interviewed for Partner Services		
	Total	Interviewed	Not Interviewed	n	%	Minimum % <sup>d</sup>	Reported % <sup>e</sup>	Maximum % <sup>f</sup>
Age at test (years)								
<13	7	1	4	2	28.6	14.3	20.0	42.9
13-19	238	171	31	36	15.1	71.8	84.7	87.0
20-29	2,967	2,120	422	425	14.3	71.5	83.4	85.8
30-39	1,578	1,100	280	198	12.5	69.7	79.7	82.3
40-49	924	650	159	115	12.4	70.3	80.3	82.8
50+	736	519	125	92	12.5	70.5	80.6	83.0
Missing/Invalid	5	5	0	0	0.0	100.0	100.0	100.0
Gender								
Male	5,490	3,865	877	748	13.6	70.4	81.5	84.0
Female	851	628	124	99	11.6	73.8	83.5	85.4
Transgender	85	49	18	18	21.2	57.6	73.1	78.8
Other <sup>g</sup>	29	24	2	3	10.3	82.8	92.3	93.1
Race/Ethnicity								
White	1,508	1,076	243	189	12.5	71.4	81.6	83.9
Black or African American	2,913	2,084	467	362	12.4	71.5	81.7	84.0
Hispanic or Latino	1,676	1,166	238	272	16.2	69.6	83.0	85.8
Asian	128	78	35	15	11.7	60.9	69.0	72.7
American Indian or Alaska Native	25	17	6	2	8.0	68.0	73.9	76.0
Native Hawaiian or Pacific Islander	14	12	2	0	0.0	85.7	85.7	85.7
Multi-race	77	57	15	5	6.5	74.0	79.2	80.5
Other <sup>g</sup>	114	76	15	23	20.2	66.7	83.5	86.0

		Persons wi	th Newly Diagnosed	, Confirmed H	IIV Infection Inte	rviewed for Part	ner Services	
Characteristics	Persons with newly diagnosed, confirmed HIV infection <sup>a</sup>	With valid data, Interviewed for Partner Services <sup>b</sup>		Without valid data <sup>c</sup>		Percentage of Newly Diagnosed, Confirmed HIV-Positive Persons Interviewed for Partner Services		
	Total	Interviewed	Not Interviewed	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>
HIV Prevalence								
High	4,149	2,736	785	628	15.1	65.9	77.7	81.1
Medium	2,035	1,584	221	230	11.3	77.8	87.8	89.1
Medium-Low	244	221	15	8	3.3	90.6	93.6	93.9
Low	27	25	0	2	7.4	92.6	100.0	100.0
Target Population								
MSM	3,672	2,808	612	252	6.9	76.5	82.1	83.3
MSM and IDU	185	112	40	33	17.8	60.5	73.7	78.4
Transgender persons	79	46	15	18	22.8	58.2	75.4	81.0
Transgender persons and IDU	6	3	3	0	0.0	50.0	50.0	50.0
Persons who inject drugs	119	70	21	28	23.5	58.8	76.9	82.4
Heterosexual male	864	677	132	55	6.4	78.4	83.7	84.7
Heterosexual female	654	520	88	46	7.0	79.5	85.5	86.5
No risk/Missing/Invalid	876	330	110	436	49.8	37.7	75.0	87.4
Total	6,455	4,566	1,021	868	13.4	70.7	81.7	84.2

Note: In 2014, three Category A funded health departments did not have newly diagnosed, confirmed HIV-positive test events.

<sup>&</sup>lt;sup>a</sup> A newly diagnosed confirmed HIV-positive person is defined as a person who tests positive on the current test and has no history of a previous positive test (includes persons with confirmed positive tests only).

<sup>&</sup>lt;sup>b</sup> Number of newly diagnosed HIV positive persons whose test records have valid information on interview for partner services. This includes persons with test setting unknown.

<sup>&</sup>lt;sup>c</sup> Number of newly diagnosed HIV positive persons whose test records do not have valid information on interview for partner services.

<sup>&</sup>lt;sup>d</sup> Minimum percentage interviewed represents the worst case scenario for percentage of clients interviewed for partner services. Considering the number of records missing data on interview for partner services, the percentage interviewed could be as low as this.

e Reported percentage interviewed represents the percentage of clients interviewed for partner services, based only on records with valid data on this outcome. This is the value used to determine whether or not the health department has met the FOA objective.

f Maximum percentage interviewed represents the best case scenario for percentage of clients interviewed for partner services. Considering the number of records missing data on interview for partner services, the percentage interviewed could be as high as this.

g Other includes declined, don't know, or not asked.

Table 10. PS12-1201 Category B – Persons with newly diagnosed confirmed HIV infection who were interviewed for partner services, by demographic characteristics and target population from 32 health departments in the United States and Puerto Rico, 2014

		Persons wit	th Newly Diagnos	ed, Confirmed H	IIV Infection Inte	rviewed for Part	ner Services		
Characteristics	Persons with newly diagnosed, confirmed HIV infection <sup>a</sup>	Interviewed for Partner Services <sup>b</sup>		Without	Without valid data <sup>c</sup>		Percentage of Newly Diagnosed, Confirmed HIV-Positive Persons Interviewed for Partner Services		
	Total	Interviewed	Not Interviewed	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>	
Age at test (years)									
<13	2	1	0	1	50.0	50.0	100.0	100.0	
13-19	72	46	4	22	30.6	63.9	92.0	94.4	
20-29	1,143	660	171	312	27.3	57.7	79.4	85.0	
30-39	732	403	123	206	28.1	55.1	76.6	83.2	
40-49	565	269	118	178	31.5	47.6	69.5	79.1	
50+	468	230	70	168	35.9	49.1	76.7	85.0	
Missing/Invalid	4	1	2	1	25.0	25.0	33.3	50.0	
Gender									
Male	2,258	1,231	353	674	29.8	54.5	77.7	84.4	
Female	693	360	124	209	30.2	51.9	74.4	82.1	
Transgender	26	15	6	5	19.2	57.7	71.4	76.9	
Other <sup>g</sup>	9	4	5	0	0.0	44.4	44.4	44.4	
Missing/Invalid									
Race/Ethnicity									
White	555	305	97	153	27.6	55.0	75.9	82.5	
Black or African American	1,625	914	255	456	28.1	56.2	78.2	84.3	
Hispanic or Latino	650	315	91	244	37.5	48.5	77.6	86.0	
Asian	32	14	6	12	37.5	43.8	70.0	81.3	
American Indian or Alaska Native	7	3	2	2	28.6	42.9	60.0	71.4	
Native Hawaiian or Pacific Islander	2	1	0	1	50.0	50.0	100.0	100.0	
Multi-race	14	8	2	4	28.6	57.1	80.0	85.7	
Other <sup>g</sup>	101	50	35	16	15.8	49.5	58.8	65.3	

		Persons wit	th Newly Diagnos	ed, Confirmed H	IIV Infection Inte	erviewed for Part	ner Services	
Characteristics	Persons with newly diagnosed, confirmed HIV infection <sup>a</sup>	With valid data, Interviewed for Partner Services <sup>b</sup>		Without valid data <sup>c</sup>		Percentage of Newly Diagnosed, Confirmed HIV-Positive Persons Interviewed for Partner Services		
	Total	Interviewed	Not Interviewed	n	%	Minimum % <sup>d</sup>	Reported %e	Maximum % <sup>f</sup>
HIV Prevalence								
High	2,208	1,107	336	765	34.6	50.1	76.7	84.8
Medium	778	503	152	123	15.8	64.7	76.8	80.5
Medium-Low	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Low	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Target Population								
MSM	1,021	709	146	166	16.3	69.4	82.9	85.7
MSM and IDU	22	7	9	6	27.3	31.8	43.8	59.1
Transgender persons	24	13	6	5	20.8	54.2	68.4	75.0
Transgender persons and IDU	2	2	0	0	0.0	100.0	100.0	100.0
Persons who inject drugs	49	24	10	15	30.6	49.0	70.6	79.6
Heterosexual male	374	252	70	52	13.9	67.4	78.3	81.3
Heterosexual female	370	261	67	42	11.4	70.5	79.6	81.9
No risk/Missing/Invalid	1,124	342	180	602	53.6	30.4	65.5	84.0
Total	2,986	1,610	488	888	29.7	53.9	76.7	83.7

Note: In 2014, two Category B funded health departments did not have newly diagnosed, confirmed HIV-positive test events.

N/A indicates that no health departments could be classified as "Medium-Low" and "Low" based on HIV prevalence. Please refer to Appendix A: Technical notes and definitions section on page 25.

<sup>&</sup>lt;sup>a</sup> A newly diagnosed confirmed HIV-positive person is defined as a person who tests positive on the current test and has no history of a previous positive test (includes persons with confirmed positive tests only).

b Number of newly diagnosed HIV positive persons whose test records have valid information on interview for partner services. This includes persons with test setting unknown.

<sup>&</sup>lt;sup>c</sup> Number of newly diagnosed HIV positive persons whose test records do not have valid information on interview for partner services.

<sup>&</sup>lt;sup>d</sup> Minimum percentage interviewed represents the worst case scenario for percentage of clients interviewed for partner services. Considering the number of records missing data on interview for partner services, the percentage interviewed could be as low as this.

<sup>&</sup>lt;sup>e</sup> Reported percentage interviewed represents the percentage of clients interviewed for partner services, based only on records with valid data on this outcome. This is the value used to determine whether or not the health department has met the FOA objective.

f Maximum percentage interviewed represents the best case scenario for percentage of clients interviewed for partner services. Considering the number of records missing data on interview for partner services, the percentage interviewed could be as high as this.

<sup>&</sup>lt;sup>g</sup> Other includes declined, don't know, or not asked.

## Table 11. PS12-1201 Category A – Persons with previously diagnosed HIV infection who were linked to or re-engaged in HIV medical care and treatment services from 49 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014

		Race/Ethnicity			Target Population				
Year	Total	Black/African American	Hispanic/Latino	Other/ Unknown <sup>a</sup>	MSM	IDU	MSM and IDU	High-risk heterosexual	Other/Unknown
2014 (HDs = 49)	5,680	1,486 (26.2%)	775 (13.6%)	3,419 (60.2%)	2,638 (46.4%)	537 (9.5%)	286 (5.0%)	1,549 (27.3%)	670 (11.8%)

Data Source: 2014 NHM&E RRA aggregate-level data submitted through EvaluationWeb® as of September 15, 2015 for project period January 1, 2014 - December 31, 2014.

Note: Other/unknown race/ethnicity and other/unknown risk cannot be split into sub-groups due to aggregate data being collected from grantees using these response categories.

## Table 12. PS12-1201 Category A – Persons with HIV infection who were linked to treatment adherence services from 48 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014

		Race/Ethnicity			Target Population					
Year	Total	Black/African American	Hispanic/Latino	Other/ Unknown <sup>a</sup>	MSM	IDU	MSM and IDU	High-risk heterosexual	Other/Unknown	
2014 (HDs = 48)	6,113	2,533 (41.4%)	1,193 (19.5%)	2,387 (39.0%)	1,652 (27.0%)	220 (3.6%)	124 (2.0%)	2,055 (33.6%)	2,062 (33.7%)	
2014 (HDS = 48)	6,113	2,533 (41.4%)	1,193 (19.5%)	2,387 (39.0%)	1,652 (27.0%)	220 (3.6%)	124 (2.0%)	2,055 (33.6%)	2,062 (33.7%)	

Data Source: 2014 NHM&E RRA aggregate-level data submitted through EvaluationWeb\* as of September 15, 2015 for project period January 1, 2014 - December 31, 2014.

Note: Other/unknown race/ethnicity and other/unknown risk cannot be split into sub-groups due to aggregate data being collected from grantees using these response categories.

Other/unknown race/ethnicity includes white, Asian, American Indian or Alaska Native, Native Hawaiian or Pacific Islander, multi-race or persons whose race/ethnicity status is unknown.

<sup>&</sup>lt;sup>a</sup> Other/unknown race/ethnicity includes white, Asian, American Indian or Alaska Native, Native Hawaiian or Pacific Islander, multi-race or persons whose race/ethnicity status is unknown.

Table 13. PS12-1201 Categories A and B – Persons with newly diagnosed, confirmed HIV infection referred to HIV prevention services, 2014

Year	Persons with Newly Diagnosed, Confirmed HIV Infection <sup>a</sup>	With Valid Data Referred to HIV Prevention Services <sup>b</sup>	Without Valid Data <sup>c</sup>	Percent of records without valid data on referral to HIV prevention services	Minimum % Referred to HIV Prevention Services <sup>d</sup>	Reported % Referred to HIV Prevention Servicese	Maximum % Referred to HIV Prevention Servicesf	
				Category A: No FOA requirement				
2014 (HDs = 58) <sup>g</sup>	5,508	4,425	947	14.7	68.6	80.3	83.2	
·				Category B: ≥ 80%				
2014 (HDs = 32) <sup>g</sup>	1,942	1,539	1,044	35.0	51.5	79.2	86.5	

Note: In 2014, three Category A funded health departments and two Category B funded health departments did not have newly diagnosed, confirmed HIV-positive test events.

Table 14. PS12-1201 Category B – Service integration: STD, viral hepatitis, and TB tests conducted concurrently with HIV tests in healthcare and non-healthcare settings from 4 health departments in the United States and Puerto Rico, 2014

Year	Total	Syphilis	Gonorrhea	Chlamydia	Hepatitis B virus	Hepatitis C virus	Tuberculosis
2014 (HDs = 4)	23,983	6,591 (27.5%)	5,148 (21.5%)	4,982 (20.8%)	4,358 (18.2%)	2,481 (10.3%)	423 (1.8%)

Data Source: 2014 APRs for the project period January 1, 2014 - December 31, 2014, through EvaluationWeb®.

STD include syphilis, gonorrhea, and chlamydial infections.

<sup>&</sup>lt;sup>a</sup> A person with newly diagnosed, confirmed HIV infection is a person who tests positive on the current test and has no history of a previous positive test (includes only persons with confirmed positive tests).

<sup>&</sup>lt;sup>b</sup> Number of persons with newly diagnosed, confirmed HIV infection whose test records have valid information on referral to HIV prevention services.

<sup>&</sup>lt;sup>c</sup> Number of persons with newly diagnosed, confirmed HIV infection whose test records do not have valid information on referral to HIV prevention services.

<sup>&</sup>lt;sup>d</sup> Minimum percentage referred represents the worst case scenario for percentage of clients referred to HIV prevention services. Considering the number of records missing data on referral to HIV prevention services, the percentage referred could be as low as this.

e Reported percentage referred represents the percentage of clients referred to HIV prevention services, based only on records with valid data. This is the value used to determine whether or not the health department has met the FOA objective.

f Maximum percentage referred represents the **best case scenario** for percentage of clients referred to HIV prevention services. Considering the number of records missing data on referral to HIV prevention services, the percentage referred **could** be as high as this.

g In 2014, three Category A funded health departments and two Category B funded health departments did not have newly diagnosed, confirmed HIV-positive test events.

Table 15. PS12-1201 Category A – HIV-positive persons enrolled in one or more evidence-based risk-reduction interventions, by demographic characteristics and target population from 41 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014

	2014 (HDs = 41)					
Characteristics	n	%				
Age at test (years)						
<13	20	0.1				
13-19	258	1.3				
20-29	3,597	18.2				
30-39	4,028	20.4				
40-49	5,159	26.1				
50+	6,715	34.0				
Gender						
Male	14,335	72.5				
Female	4,648	23.5				
Transgender	774	3.9				
Other <sup>a</sup>	20	0.1				
Race/Ethnicity						
White	4,585	23.2				
Black or African American	7,619	38.5				
Hispanic or Latino	6,712	33.9				
Asian	188	1.0				
American Indian or Alaska Native	141	0.7				
Native Hawaiian or Pacific Islander	58	0.3				
Multi-race	191	1.0				
Other <sup>a</sup>	271	1.3				

	2014	2014 (HDs = 41)				
Characteristics	n	%				
Missing/Invalid	12	0.1				
HIV Prevalence						
High	16,004	80.9				
Medium	3,425	17.3				
Medium-Low	287	1.5				
Low	61	0.3				
Target Population						
MSM	7,805	39.5				
MSM and IDU	745	3.8				
Persons who inject drugs	1,153	5.8				
Heterosexual male	2,077	10.5				
Heterosexual female	3,004	15.2				
Other <sup>b</sup>	904	4.6				
No risk/Missing/Invalid	4,089	20.7				
Total	19,777					

<sup>&</sup>lt;sup>a</sup> Other includes declined , don't know or not asked.

<sup>&</sup>lt;sup>b</sup> Other includes transgender persons; transgender persons and IDU; sex with transgender persons; and women who have sex with women.

Table 16. PS12-1201 Category A – HIV-negative persons enrolled in one or more evidence-based HIV prevention interventions, by demographic characteristics and target population from 39 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2014

	2014 (HDs = 39)					
Characteristics	n	%				
Age at test (years)						
<13	37	0.1				
13-19	2,487	5.8				
20-29	15,479	36.3				
30-39	10,626	24.9				
40-49	7,211	16.9				
50+	6,751	15.9				
Gender						
Male	26,468	62.1				
Female	14,598	34.3				
Transgender	1,486	3.5				
Other <sup>a</sup>	39	0.1				
Race/Ethnicity						
White	12,671	29.8				
Black or African American	16,042	37.7				
Hispanic or Latino	11,537	27.1				
Asian	766	1.8				
American Indian or Alaska Native	298	0.7				
Native Hawaiian or Pacific Islander	91	0.2				
Multi-race	577	1.4				
Other <sup>a</sup>	608	1.4				

	201	2014 (HDs = 39)					
Characteristics	n	%					
Missing/Invalid	1	<0.05					
HIV Prevalence							
High	37,007	86.9					
Medium	5,234	12.3					
Medium-Low	176	0.4					
Low	174	0.4					
Target Population							
MSM	11,548	27.1					
MSM and IDU	697	1.6					
Persons who inject drugs	7,094	16.7					
Heterosexual male	8,074	19.0					
Heterosexual female	10,024	23.5					
Other <sup>b</sup>	2,115	5.0					
No risk/Missing/Invalid	3,039	7.1					
Total	42,591						

<sup>&</sup>lt;sup>a</sup> Other includes declined, don't know or not asked.

<sup>&</sup>lt;sup>b</sup> Other includes transgender persons; transgender persons and IDU; sex with transgender persons; and women who have sex with women.