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HIV and Stage 3 (AIDS) Classifications Data through December 2021 Provided for the Ryan White HIV/AIDS Program, for Fiscal Year 2023

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HIV and Stage 3 (AIDS) Classifications Data through December 2021 Provided for the Ryan White HIV/AIDS Program, for Fiscal Year 2023: Commentary

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The Ryan White HIV/AIDS Program (RWHAP) is administered by the U.S. Department of Health and Human Services (HHS), Health Resources and Services Administration (HRSA), HIV/AIDS Bureau (HAB). The Ryan White Comprehensive AIDS Resources Emergency (CARE) Act was passed by Congress in 1990 to address the crisis of the HIV epidemic in the United States. This legislation has been amended and reauthorized in 1996, 2000, 2006, and most recently in 2009 as the Ryan White HIV/AIDS Treatment Extension Act of 2009. More information about the legislation and its history is available at <https://ryanwhite.hrsa.gov/about/legislation>.

For the implementation of the RWHAP Metropolitan (Part A) and State (Part B) programs, HRSA and the CDC collaborate to ensure the appropriate HIV surveillance data are used in determining eligibility and funding allocation amounts. In FY 2023, HRSA used total counts of persons living with diagnosed HIV infection non-stage 3 (AIDS) and persons living with infection ever classified as stage 3 (AIDS) to calculate funding allocation amounts for eligible jurisdictions. For FY 2023, CDC provided HRSA with data files containing this information through calendar year 2021 for all jurisdictions. The number of persons living with diagnosed HIV infection non-stage 3 (AIDS) and the number of persons living with infection ever classified as stage 3 (AIDS) were added together to arrive at the total number of persons living with diagnosed HIV infection non-stage 3 (AIDS) and infection ever classified as stage 3 (AIDS) for each eligible area: eligible metropolitan area (EMA), transitional grant area (TGA), emerging community (EC), state, and territory. These totals were used in the RWHAP Parts A and B funding calculations for determining formula funding amounts.

RWHAP Part A Funding

Part A Eligibility

To determine eligibility for RWHAP Part A formula funding, HRSA continues to use cumulative stage 3 (AIDS) classifications reported to and confirmed by the Director of CDC for the most recent five calendar years for which such data are available, as instructed by the RWHAP statute. RWHAP Part A awards grants to Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs) that have a minimum population of 50,000 persons.

EMAs are defined as areas that have a cumulative total of more than 2,000 stage 3 (AIDS) classifications reported to and confirmed by the Director of CDC during the most recent five calendar years for which such data are available. An area will continue to be an EMA unless it fails to meet both of the following requirements for three consecutive fiscal years: (a) a cumulative total of more than 2,000 stage 3 (AIDS) classifications reported to and confirmed by the Director of CDC during the most recent period of five calendar years for which such data are available, and (b) a cumulative total of 3,000 or more persons living with HIV infection ever classified as stage 3 (AIDS) reported to and confirmed by the Director of CDC as of December 31 of the most recent calendar year for which such data are available. In FY 2023, there were 24 EMAs.

TGAs are defined as areas that have a cumulative total of at least 1,000 but fewer than 2,000 stage 3 (AIDS) classifications reported to and confirmed by the Director of CDC during the most recent five calendar years for which such data are available. An area will remain a TGA unless it fails to meet both of the following requirements for three consecutive fiscal years: (a) a cumulative total of at least 1,000 but fewer than 2,000 stage 3 (AIDS) classifications reported to and confirmed by the Director of CDC during the most recent period of five calendar years for which such data are available, and (b) a cumulative total of 1,500 or more persons living with HIV infection ever classified as stage 3 (AIDS) reported to and confirmed by the Director of CDC as of December 31 of the most recent calendar year for which such data are available.

Provisions in the RWHAP statute included a modification beginning in FY 2009: in the case where a metropolitan area has a cumulative total of at least 1,400 but fewer than 1,500 persons living with HIV infection ever classified as stage 3 (AIDS) as of December 31 of the most recent calendar year for which such data are available, such area shall be treated as having met criterion (b) as long as the area did not have more than 5% unobligated balance of RWHAP funds as of the most recent fiscal year for which such data are available. Areas that have fallen below either or both required TGA thresholds, but that continue to be eligible per the RWHAP statute because they must fail both criteria for three consecutive years, remain designated as TGAs and are presented in the TGA tables. For FY 2023, there were 28 TGAs.

The geographic boundaries for all jurisdictions that received RWHAP Part A funding in FY 2023—both EMAs and TGAs—are metropolitan statistical area (MSA) boundaries determined by the Office of Management and Budget (OMB) for use in federal statistical activities that were in effect when they were initially funded under RWHAP Part A [1–3]. For all newly eligible areas, of which there were none in FY 2023, the boundaries are based on current MSA boundary definitions determined by OMB [1–3].

Part A Funding

To determine formula funding amounts as instructed by the RWHAP statute, HRSA continues to use cumulative cases of persons living with diagnosed HIV infection non-stage 3 (AIDS) and infection ever classified as stage 3 (AIDS) in the EMA or TGA through the end of the most recent calendar year as confirmed by the Director of CDC. The RWHAP Part A formula is a weighted relative distribution.

Minority AIDS Initiative (MAI) formula funds for RWHAP Part A are awarded based on the reported number of minority persons living with diagnosed HIV infection non-stage 3 (AIDS) and infection ever classified as stage 3 (AIDS) reported through the end of the most recent calendar year as confirmed by the Director of CDC. Data used to determine MAI formula funding amounts are not included in this report.

RWHAP Part B Funding

RWHAP Part B and AIDS Drug Assistance Program (ADAP) funds are awarded by three separate grant award processes: the RWHAP Part B HIV Care Program award, the RWHAP Part B Supplemental Grant Program award, and the RWHAP Part B ADAP Emergency Relief Fund (ERF) award. The RWHAP Part B HIV Care Program award has a five-year project period and is determined by a legislatively mandated process to fund formula-based awards. The award includes the following five

components: Part B Base award, ADAP Base award, ADAP Supplemental award (for eligible states that choose to apply), Emerging Communities award (for eligible states), and MAI award (for eligible states that do not decline funding). The RWHAP Part B Supplemental grant is a one-year competitive award for states that demonstrate the need for additional RWHAP Part B funds. The ADAP ERF grant is also a one-year competitive award. These funds are used to help states prevent, reduce, or eliminate ADAP waiting lists and/or to implement ADAP-related cost-containment measures.

RWHAP Part B HIV Care Program Grant Funding

To determine formula funding amounts for the RWHAP Part B Base, ADAP Base, ADAP Supplemental, Emerging Communities, and MAI as instructed by the RWHAP statute, HRSA continues to use cumulative cases of persons living with diagnosed HIV infection non-stage 3 (AIDS) and infection ever classified as stage 3 (AIDS) in the state or territory through the end of the most recent calendar year as confirmed by the Director of CDC. The RWHAP Part B Base formula is a weighted relative distribution that takes into account RWHAP Part A funding. The remaining funding streams are based on a relative distribution. ADAP Supplemental grants are awarded by the same formula as ADAP Base to states that meet any of the criteria listed in that section of the Notice of Funding Opportunity for the purpose of providing medications or insurance assistance for persons with HIV.

Emerging Communities Eligibility

As with Part A, RWHAP Part B Emerging Communities eligibility is determined based on the number of persons living with HIV infection ever classified as stage 3 (AIDS) in that jurisdiction. ECs are defined as metropolitan areas for which there have been at least 500 but fewer than 1,000 persons living with HIV infection ever classified stage 3 (AIDS) reported to and confirmed by the Director of CDC during the most recent five calendar years for which such data are available. An area will remain an EC unless it fails to meet both of the following requirements for three consecutive fiscal years: (a) a cumulative total of at least 500 but fewer than 1,000 persons living with HIV infection ever classified as stage 3 (AIDS) reported to and confirmed by the Director of CDC during the most recent period of five calendar years for which such data are available, and (b) a cumulative total of 750 or more persons living with HIV infection ever classified as stage 3 (AIDS) reported to and confirmed by the Director of CDC as of December 31 of the most recent year for which such data are available. As with EMAs and TGAs, the geographic boundaries for ECs are those that were determined by OMB and that were in effect when initially funded.

For recipients applying for MAI formula funds, awards are based on the reported number of racial/ethnic minorities living with diagnosed HIV infection non-stage 3 (AIDS) and infection ever classified as stage 3 (AIDS) reported through the end of the most recent calendar year as confirmed by the Director of CDC. Data used to determine MAI formula funding amounts are not included in this report.

RWHAP Part B Supplemental and ADAP ERF Funding

RWHAP Part B Supplemental and ADAP ERF grants are awarded to states demonstrating the severity of the burden of HIV and the need for additional federal assistance. The funds are intended to supplement the services otherwise provided by the state. All submitted applications for RWHAP Part B Supplemental and ADAP ERF competitive grants are reviewed and ranked by an external objective review committee. States and territories applying for RWHAP Part B Supplemental funds must demonstrate that supplemental funding is necessary to provide comprehensive HIV care and treatment services for persons with HIV in the state or territory, and provide quantifiable data on HIV epidemiology, comorbidities, cost of care, the service needs of emerging populations, unmet need for core medical services, and unique service delivery challenges. States and territories applying for RWHAP ADAP ERF funds must demonstrate the need for funding to prevent, reduce, or eliminate a waiting list, including through "cost-cutting" and/or "cost-saving" measures, or the need for additional funding for a current or projected increase in treatment needs aligned with ending the HIV epidemic or other unanticipated increases in the number of clients in the program who have newly diagnosed HIV infection or have reengaged in care.

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In October 2009, Congress enacted amendments to the Ryan White HIV/AIDS Program (RWHAP) statute. The RWHAP statute specifies the use of surveillance data on persons living with diagnosed HIV infection non-stage 3 (AIDS) and infection ever classified as stage 3 (AIDS) to determine formula funding for RWHAP Parts A and B HIV care and services programs. RWHAP authorizes the Centers for Disease Control and Prevention (CDC) to provide HIV infection non-stage 3 (AIDS) and stage 3 (AIDS) classification surveillance data to the Health Resources and Services Administration (HRSA) for use in their funding formula for all jurisdictions.

As of December 2020, CDC was not accepting HIV case data from the Marshall Islands and the Federated States of Micronesia, as their surveillance systems had not yet been certified. However, in the event that another jurisdiction reported cases that were diagnosed in either the Marshall Islands or the Federated States of Micronesia, the cases would be reflected in the data that CDC sends annually to HRSA. These data limitations do not impact the HRSA funding formula for these two jurisdictions due to the HRSA minimum allotment funding standards.

Data re-release agreements between CDC and state/local HIV surveillance programs require certain levels of cell suppression at the state and county level to ensure confidentiality of personally identifiable information.

Data Requirements and Definitions

Case counts in all tables are presented by residence at earliest HIV diagnosis for persons with diagnosed HIV infection non-stage 3 (AIDS) and residence at earliest stage 3 (AIDS) classification for persons with infection ever classified as stage 3 (AIDS). Data are presented by date of report rather than date of diagnosis (e.g., reported stage 3 [AIDS] classifications in the last five

years). Boundaries for eligible metropolitan areas (EMAs) and transitional grant areas (TGAs) that became eligible prior to FY 2007 are based on the Office of Management and Budget (OMB) metropolitan statistical area (MSA) delineations that were in effect for such areas for FY 1994 (additional information on historical delineations is available at <http://www.census.gov/geographies/reference-files/time-series/demo/metro-micro/historical-delineation-files.html> ). Boundaries for EMAs, TGAs, and emerging communities (ECs) that became eligible after 2006 are determined by using applicable OMB definitions based on the year of first eligibility.

Reported persons living with diagnosed HIV infection non-stage 3 (AIDS) or infection ever classified as stage 3 (AIDS) are defined as persons reported as “alive” at last update. HIV infection non-stage 3 (AIDS) classification and stage 3 (AIDS) classification data reported from CDC met the CDC surveillance case definitions published in the 2008 and 2014 revised surveillance case definitions for HIV infection among adults, adolescents, and children aged < 18 months and for HIV infection and infection ever classified as stage 3 (AIDS) among children aged 18 months to < 13 years [4, 5].

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1. Office of Management and Budget. Standards for defining metropolitan and micropolitan statistical areas. *Federal Register* 2000;65(249):82228–82238. <http://www.gpo.gov/fdsys/pkg/FR-2000-12-27/pdf/00-32997.pdf>   . Published December 27, 2000. Accessed June 15, 2023.
2. Office of Management and Budget. Revised definitions of metropolitan statistical areas, new definitions of micropolitan statistical areas and combined statistical areas, and guidance on uses of the statistical definitions of these areas. OMB Bulletin 03-04. http://www.whitehouse.gov/wp-content/uploads/2017/11/bulletins_b03-04.pdf   . Published June 6, 2003. Accessed June 15, 2023.
3. Office of Management and Budget. Update of statistical area definitions and guidance on their uses. OMB Bulletin 10-02. <https://www.bls.gov/bls/omb-bulletin-10-02-update-of-statistical-area-definitions-and-guidance-on-their-uses.pdf>   . Published December 1, 2009. Accessed June 15, 2023.
4. CDC [Schneider E, Whitmore S, Glynn MK, Dominguez K, Mitsch A, McKenna MT]. Revised surveillance case definitions for HIV infection among adults, adolescents, and children aged <18 months and for HIV infection and AIDS among children aged 18 months to <13 years—United States, 2008. *MMWR* 2008;57(RR-10):1–12.
5. CDC [Selik RM, Mokotoff ED, Branson B, Owen SM, Whitmore S, Hall HI]. Revised surveillance case definition for HIV infection—United States, 2014. *MMWR* 2014;63(RR-03):1–10.

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Table 1. Reported stage 3 (AIDS) classifications and persons reported living with diagnosed HIV infection ever classified as stage 3 (AIDS), by area of residence, 2017–2021, and as of December 2021—eligible metropolitan areas and transitional grant areas for the Ryan White HIV/AIDS Program

Area of residence	Reported stage 3 (AIDS) classifications 2017–2021	Persons reported living with diagnosed HIV infection ever classified as stage 3 (AIDS) (as of December 2021)
	No.	No.
Eligible metropolitan areas (EMAs)		
Atlanta-Sandy Springs-Marietta, Georgia	3,928	18,100
Baltimore, Maryland	1,232	9,510
Boston-Brockton-Nashua, Massachusetts-New Hampshire	1,181	9,913
Chicago, Illinois	2,564	15,839

	Reported stage 3 (AIDS) classifications 2017–2021	Persons reported living with diagnosed HIV infection ever classified as stage 3 (AIDS) (as of December 2021)
Area of residence	No.	No.
Dallas, Texas	2,296	11,742
Detroit, Michigan	1,018	5,719
Fort Lauderdale, Florida	1,461	9,397
Houston, Texas	2,910	15,554
Los Angeles-Long Beach, California	3,655	28,150
Miami, Florida	2,139	14,633
Nassau-Suffolk, New York	511	3,527
New Haven-Bridgeport-Danbury- Waterbury, Connecticut	348	3,797
New Orleans, Louisiana	712	4,608
New York, New York	5,306	59,206
Newark, New Jersey	910	6,810
Orlando, Florida	1,283	6,275
Philadelphia, Pennsylvania-New Jersey	1,554	13,516
Phoenix-Mesa, Arizona	1,111	5,408
San Diego, California	779	7,398
San Francisco, California	682	10,215
San Juan-Bayamon, Puerto Rico	717	6,066
Tampa-St. Petersburg-Clearwater, Florida	1,322	6,610
Washington, DC-Maryland-Virginia- West Virginia	2,568	19,333
West Palm Beach-Boca Raton, Florida	610	4,810
Transitional grant areas (TGAs)		
Austin-San Marcos, Texas	504	3,304
Baton Rouge, Louisiana	474	2,707
Bergen-Passaic, New Jersey	279	2,373
Charlotte-Gastonia-Concord, North Carolina-South Carolina	537	3,104
Cleveland-Lorain-Elyria, Ohio	571	2,678
Columbus, Ohio	573	2,602
Denver, Colorado	636	4,055
Fort Worth-Arlington, Texas	661	2,989
Hartford, Connecticut	206	2,154
Indianapolis, Indiana	531	2,777
Jacksonville, Florida	755	3,897
Jersey City, New Jersey	356	2,850
Kansas City, Missouri-Kansas	427	2,889

	Reported stage 3 (AIDS) classifications 2017–2021	Persons reported living with diagnosed HIV infection ever classified as stage 3 (AIDS) (as of December 2021)
Area of residence	No.	No.
Las Vegas, Nevada-Arizona	926	3,873
Memphis, Tennessee-Mississippi- Arkansas	792	3,723
Middlesex-Somerset-Hunterdon, New Jersey	213	1,654
Minneapolis-St. Paul, Minnesota- Wisconsin	515	3,302
Nashville-Davidson-Murfreesboro, Tennessee	422	2,599
Norfolk-Virginia Beach-Newport News, Virginia	673	2,895
Oakland, California	545	5,037
Orange County, California	584	4,105
Portland-Vancouver, Oregon- Washington	320	2,745
Riverside-San Bernardino, California	1,088	5,467
Sacramento, California	434	2,213
St. Louis, Missouri-Illinois	623	3,695
San Antonio, Texas	689	3,493
San Jose, California	243	2,344
Seattle-Bellevue-Everett, Washington	566	4,575

Note. See [Commentary](#) for definition of eligible metropolitan areas (EMAs) and transitional grant areas (TGAs).

Table 2. Reported stage 3 (AIDS) classifications and persons reported living with diagnosed HIV infection ever classified as stage 3 (AIDS), by area of residence, 2017–2021, and as of December 2021—emerging communities for the Ryan White HIV/AIDS Program

	Reported stage 3 (AIDS) classifications 2017–2021	Persons reported living with diagnosed HIV infection ever classified as stage 3 (AIDS) (as of December 2021)
Emerging communities (ECs)	No.	No.
Albany-Schenectady-Troy, New York	155	1,090
Augusta-Richmond County, Georgia- South Carolina	331	1,227
Bakersfield, California	304	1,271
Birmingham-Hoover, Alabama	366	1,686
Buffalo-Niagara Falls, New York	187	1,205
Charleston-North Charleston, South Carolina	241	1,384

	Reported stage 3 (AIDS) classifications 2017–2021	Persons reported living with diagnosed HIV infection ever classified as stage 3 (AIDS) (as of December 2021)
Emerging communities (ECs)	No.	No.
Cincinnati-Middletown, Ohio-Kentucky-Indiana	582	2,259
Columbia, South Carolina	404	2,520
Jackson, Mississippi	329	1,688
Lakeland, Florida	252	1,217
Louisville, Kentucky-Indiana	392	1,766
Milwaukee-Waukesha-West Allis, Wisconsin	257	1,625
North Port-Bradenton-Sarasota, Florida*	191	1,062
Oklahoma City, Oklahoma	386	1,465
Philadelphia, Pennsylvania-New Jersey-Delaware-Maryland—Wilmington Division	209	1,428
Pittsburgh, Pennsylvania	282	1,895
Port St. Lucie-Fort Pierce, Florida	146	1,339
Providence-New Bedford-Fall River, Rhode Island-Massachusetts	145	1,367
Raleigh-Cary, North Carolina	349	1,898
Richmond, Virginia	514	2,205
Rochester, New York	177	1,494

Note. See [Commentary](#) for definition of emerging communities (ECs).

*This MSA was formerly named Bradenton-Sarasota-Venice, Florida, but the counties delineating the metropolitan statistical area have not changed.

Table 3. Reported number of persons living with diagnosed HIV infection non-stage 3 (AIDS), infection ever classified as stage 3 (AIDS), and total, by area of residence, as of December 2021—United States and dependent areas for the Ryan White HIV/AIDS Program

	HIV infection non-stage 3 (AIDS)	HIV infection ever classified as stage 3 (AIDS)	Total
Area of residence	No.	No.	No.
Alabama	8,467	5,933	14,400
Alaska	368	399	767
Arizona	9,568	7,222	16,790
Arkansas	3,503	2,743	6,246
California	66,413	73,972	140,385
Colorado	7,449	5,437	12,886
Connecticut	4,155	6,510	10,665
Delaware	1,342	1,952	3,294

	HIV infection non-stage 3 (AIDS)	HIV infection ever classified as stage 3 (AIDS)	Total
Area of residence	No.	No.	No.
District of Columbia	6,614	8,242	14,856
Florida	58,287	59,057	117,344
Georgia	27,417	26,688	54,105
Hawaii	1,191	1,359	2,550
Idaho	521	486	1,007
Illinois	19,791	18,646	38,437
Indiana	6,283	5,665	11,948
Iowa	1,305	1,343	2,648
Kansas	1,817	1,772	3,589
Kentucky	4,171	3,552	7,723
Louisiana	11,793	11,190	22,983
Maine	638	675	1,313
Maryland	15,701	17,236	32,937
Massachusetts	9,471	11,035	20,506
Michigan	9,365	8,586	17,951
Minnesota	4,924	3,832	8,756
Mississippi	5,579	4,854	10,433
Missouri	7,022	6,635	13,657
Montana	259	254	513
Nebraska	1,147	1,086	2,233
Nevada	5,474	4,351	9,825
New Hampshire	643	620	1,263
New Jersey	18,917	18,702	37,619
New Mexico	1,778	1,727	3,505
New York	53,725	71,733	125,458
North Carolina	18,906	13,061	31,967
North Dakota	271	188	459
Ohio	12,913	10,652	23,565
Oklahoma	3,756	2,927	6,683
Oregon	3,004	3,525	6,529
Pennsylvania	16,638	18,968	35,606
Rhode Island	1,152	1,390	2,542
South Carolina	8,737	9,409	18,146
South Dakota	376	285	661
Tennessee	10,338	8,676	19,014
Texas	50,689	47,692	98,381
Utah	1,703	1,543	3,246

	HIV infection non-stage 3 (AIDS)	HIV infection ever classified as stage 3 (AIDS)	Total
Area of residence	No.	No.	No.
Vermont	234	277	511
Virginia	13,452	11,200	24,652
Washington	6,779	6,872	13,651
West Virginia	1,101	976	2,077
Wisconsin	3,475	2,938	6,413
Wyoming	176	167	343
American Samoa	0	0	0
Federated States of Micronesia*	0	0	0
Guam	71	42	113
Marshall Islands*	0	1	1
Northern Mariana Islands	5	10	15
Palau	5	4	9
Puerto Rico	8,536	9,688	18,224
U.S. Virgin Islands	269	346	615

Note. The number of cases shown in the Total column was used by the Health Resources and Services Administration in FY2023 funding calculations.

*See Technical Notes regarding data reported for these jurisdictions.

Table 4. Reported number of persons living with diagnosed HIV infection non-stage 3 (AIDS), infection ever classified as stage 3 (AIDS), and total, by area of residence, as of December 2021—eligible metropolitan areas and transitional grant areas for the Ryan White HIV/AIDS Program

	HIV non-stage 3 (AIDS)	HIV infection ever classified as stage 3 (AIDS)	Total
Area of residence	No.	No.	No.
Eligible metropolitan areas (EMAs)			
Atlanta-Sandy Springs-Marietta, Georgia	18,112	18,100	36,212
Baltimore, Maryland	8,445	9,510	17,955
Boston-Brockton-Nashua, Massachusetts-New Hampshire	8,523	9,913	18,436
Chicago, Illinois	16,950	15,839	32,789
Dallas, Texas	12,382	11,742	24,124
Detroit, Michigan	6,041	5,719	11,760
Fort Lauderdale, Florida	9,743	9,397	19,140
Houston, Texas	15,733	15,554	31,287
Los Angeles-Long Beach, California	26,318	28,150	54,468
Miami, Florida	16,860	14,633	31,493

	HIV non-stage 3 (AIDS)	HIV infection ever classified as stage 3 (AIDS)	Total
Area of residence	No.	No.	No.
Nassau-Suffolk, New York	2,789	3,527	6,316
New Haven-Bridgeport-Danbury-Waterbury, Connecticut	2,363	3,797	6,160
New Orleans, Louisiana	4,537	4,608	9,145
New York, New York	43,530	59,206	102,736
Newark, New Jersey	7,055	6,810	13,865
Orlando, Florida	7,085	6,275	13,360
Philadelphia, Pennsylvania-New Jersey	12,310	13,516	25,826
Phoenix-Mesa, Arizona	7,441	5,408	12,849
San Diego, California	6,944	7,398	14,342
San Francisco, California	7,338	10,215	17,553
San Juan-Bayamon, Puerto Rico	5,728	6,066	11,794
Tampa-St. Petersburg-Clearwater, Florida	6,236	6,610	12,846
Washington, DC-Maryland-Virginia-West Virginia	17,384	19,333	36,717
West Palm Beach-Boca Raton, Florida	3,598	4,810	8,408
Transitional grant areas (TGAs)			
Austin-San Marcos, Texas	3,436	3,304	6,740
Baton Rouge, Louisiana	2,798	2,707	5,505
Bergen-Passaic, New Jersey	2,245	2,373	4,618
Charlotte-Gastonia-Concord, North Carolina-South Carolina	5,032	3,104	8,136
Cleveland-Lorain-Elyria, Ohio	3,226	2,678	5,904
Columbus, Ohio	3,530	2,602	6,132
Denver, Colorado	5,660	4,055	9,715
Fort Worth-Arlington, Texas	3,519	2,989	6,508
Hartford, Connecticut	1,393	2,154	3,547
Indianapolis, Indiana	3,126	2,777	5,903
Jacksonville, Florida	3,581	3,897	7,478
Jersey City, New Jersey	2,808	2,850	5,658
Kansas City, Missouri-Kansas	2,669	2,889	5,558
Las Vegas, Nevada-Arizona	4,913	3,873	8,786
Memphis, Tennessee-Mississippi-Arkansas	4,608	3,723	8,331

	HIV non-stage 3 (AIDS)	HIV infection ever classified as stage 3 (AIDS)	Total
Area of residence	No.	No.	No.
Middlesex-Somerset-Hunterdon, New Jersey	1,676	1,654	3,330
Minneapolis-St. Paul, Minnesota-Wisconsin	4,288	3,302	7,590
Nashville-Davidson-Murfreesboro, Tennessee	3,146	2,599	5,745
Norfolk-Virginia Beach-Newport News, Virginia	4,376	2,895	7,271
Oakland, California	3,890	5,037	8,927
Orange County, California	4,104	4,105	8,209
Portland-Vancouver, Oregon-Washington	2,525	2,745	5,270
Riverside-San Bernardino, California	5,468	5,467	10,935
Sacramento, California	2,338	2,213	4,551
St. Louis, Missouri-Illinois	4,206	3,695	7,901
San Antonio, Texas	3,905	3,493	7,398
San Jose, California	1,764	2,344	4,108
Seattle-Bellevue-Everett, Washington	4,560	4,575	9,135

Note. The number of cases shown in the Total column was used by the Health Resources and Services Administration in FY2023 funding calculations.

*See Technical Notes regarding data reported for these jurisdictions.

Table 5. Reported number of persons living with diagnosed HIV infection non-stage 3 (AIDS), infection ever classified as stage 3 (AIDS), and total, by area of residence, as of December 2021—emerging communities for the Ryan White HIV/AIDS Program

	HIV infection non-stage 3 (AIDS)	HIV infection ever classified as stage 3 (AIDS)	Total
Emerging communities (ECs)	No.	No.	No.
Albany-Schenectady-Troy, New York	912	1,090	2,002
Augusta-Richmond County, Georgia-South Carolina	1,207	1,227	2,434
Bakersfield, California	1,317	1,271	2,588
Birmingham-Hoover, Alabama	2,633	1,686	4,319
Buffalo-Niagara Falls, New York	1,310	1,205	2,515
Charleston-North Charleston, South Carolina	1,429	1,384	2,813

	HIV infection non-stage 3 (AIDS)	HIV infection ever classified as stage 3 (AIDS)	Total
Emerging communities (ECs)	No.	No.	No.
Cincinnati-Middletown, Ohio-Kentucky-Indiana	2,580	2,259	4,839
Columbia, South Carolina	2,165	2,520	4,685
Jackson, Mississippi	1,915	1,688	3,603
Lakeland, Florida	1,047	1,217	2,264
Louisville, Kentucky-Indiana	2,294	1,766	4,060
Milwaukee-Waukesha-West Allis, Wisconsin	1,911	1,625	3,536
North Port-Bradenton-Sarasota, Florida*	904	1,062	1,966
Oklahoma City, Oklahoma	1,882	1,465	3,347
Philadelphia, Pennsylvania-New Jersey-Delaware-Maryland—Wilmington Division	981	1,428	2,409
Pittsburgh, Pennsylvania	1,782	1,895	3,677
Port St. Lucie-Fort Pierce, Florida	724	1,339	2,063
Providence-New Bedford-Fall River, Rhode Island-Massachusetts	1,111	1,367	2,478
Raleigh-Cary, North Carolina	2,288	1,898	4,186
Richmond, Virginia	2,823	2,205	5,028
Rochester, New York	1,268	1,494	2,762

Note. See [Commentary](#) for definition of emerging communities (ECs).

The number of cases shown in the Total column was used by the Health Resources and Services Administration in FY2023 funding calculations.

*This MSA was formerly named Bradenton-Sarasota-Venice, Florida, but the counties delineating the metropolitan statistical area have not changed.

Last Reviewed: October 17, 2023