

PS12-1201 - Comprehensive HIV Prevention Programs for Health Departments: Monitoring and Evaluation Report, 2012 - 2013

A national overview of selected PS12-1201 required and recommended programmatic components in 61 CDC-funded health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2012 - 2013

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BACKGROUND

In July 2010, the White House released the National HIV/AIDS Strategy (NHAS) [1]. NHAS outlines four interdependent goals for a coordinated national response to domestic HIV in the United States. The goals of NHAS are 1) reduce new HIV infections, 2) increase access to HIV medical care and improve health outcomes for people living with HIV, 3) reduce HIV-related health disparities, and 4) achieve a more coordinated national response to the HIV epidemic. NHAS emphasizes monitoring and evaluation of the federal investment in HIV/AIDS, a theme consistent with the Division of HIV/AIDS (DHAP) Strategic Plan, which ensures program accountability and improved mechanisms to report progress toward achieving national goals [2]. Stemming from NHAS, CDC is focusing on a High-Impact Prevention (HIP) approach, which includes geographic targeting of resources, and identifying the combination of approaches that demonstrate the greatest impact on decreasing HIV incidence.

In January 2012, CDC started a new five-year HIV prevention funding cycle with health departments (HDs): *Funding Opportunity Announcement (FOA) PS12-1201: Comprehensive Human Immunodeficiency Virus (HIV) Prevention Programs for Health Departments*, to address the domestic HIV epidemic and maximize the effectiveness of current HIV prevention methods [3]. The goals of PS12-1201 are

- ⊕ Reduce HIV transmission by building 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 the risks of 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, evidence-based 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 required core HIV prevention components with demonstrated potential to substantially reduce new infections: 1) HIV testing; 2) comprehensive prevention with HIV-positive persons (CPP); 3) condom distribution; and 4) policy initiatives to address structural barriers. In addition to HIV prevention components, health departments must conduct required program support activities which include: 1) jurisdictional HIV prevention planning; 2) capacity building and technical assistance; and 3) program planning, monitoring and evaluation, and quality assurance. Category A funds can be used to support other recommended HIV prevention components, including 1) evidence-based HIV prevention interventions for HIV-negative persons at risk of acquiring HIV; 2) social marketing, media, and mobilization; and 3) support services for pre-exposure prophylaxis (PrEP) and non-occupational post-exposure prophylaxis (nPEP) for high-risk populations.
- ⊕ Category B funds 34 health departments to conduct expanded HIV testing for disproportionately affected populations primarily in healthcare settings. Category B funds can also be used to support integration of HCV, HBV, STD, and TB testing 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 non-research HIP-consistent demonstration projects. Category C is not addressed in this report.

The *PS12-1201 Monitoring and Evaluation Report: 2012 - 2013* is intended to be used by HIV program managers, CDC project officers, and others interested in monitoring progress of HIV prevention program activities towards achieving the FOA objectives. This report uses data from the National HIV Prevention Program Monitoring and Evaluation (NHM&E) reporting system and Annual Progress Reports (APRs) submitted by 61 health departments funded under PS12-1201 from January 1, 2012 through December 31, 2013. This report highlights findings on the

following PS12-1201 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, and risk-reduction interventions for the first two years of the five-year project period. It also describes findings on partner services conducted by other CDC-funded programs, non-CDC funded programs, and community-based organizations.

HIGHLIGHTS

HIV Testing

- ⊕ Under Category A, 61 HDs reported a total of 1,946,079 HIV tests in 2012 and 1,805,615 HIV tests in 2013, representing 97% and 90% of the annual two million test national goal set by the FOA, respectively.
- ⊕ Under Category B, 34 HDs reported a total of 1,110,761 HIV tests, exceeding the annual 1.1 million test national goal set by the FOA for 2012. In 2013, 34 HDs reported a total of 1,220,192 HIV tests representing 94% of the annual 1.3 million test national goal set by the FOA.

HIV Positivity

Category A

- ⊕ In healthcare settings, 54 (89%) HDs in 2012 and 57 (93%) HDs in 2013 achieved the HIV positivity recommendation of $\geq 0.1\%$ [4].
- ⊕ In non-healthcare settings, 18 (30%) HDs in 2012 and 17 (28%) HDs in 2013 achieved the HIV positivity requirement of $\geq 1.0\%$.

Category B

- ⊕ In healthcare settings, 27 (79%) HDs in 2012 and 29 (85%) in 2013 achieved the HIV positivity recommendation of $\geq 0.1\%$ [4].
- ⊕ In non-healthcare settings, two (14%) of 14 HDs in 2012 and two (13%) of 15 HDs in 2013 achieved the HIV positivity requirement of $\geq 2.0\%$.

Linkage to and Re-engagement in HIV Medical Care Newly Identified Persons

- ⊕ In healthcare and non-healthcare settings, under Category A and Category B, HDs are required to link at least 80% of newly identified HIV-positive persons to HIV medical care. Among HDs funded under Category A, 18 (30%) HDs in 2012 and 27 (44%) HDs in 2013 achieved this requirement. Among HDs funded under Category B, 9 (26%) HDs in 2012 and 14 (41%) HDs in 2013 achieved this requirement.

Previously Identified Persons

- ⊕ In 2012 and 2013 combined, 11,704 previously identified, out-of-care HIV-positive persons were linked to or re-engaged in HIV medical care.

Linkage to Treatment Adherence Services

- ⊕ In 2012 and 2013 combined, 17,442 HIV-positive persons were linked to treatment adherence services.

Partner Services

Interview for Partner Services, PS12-1201

- ⊕ In healthcare and non-healthcare settings, Category A HDs are required to interview at least 75% of newly identified confirmed HIV-positive persons for partner services. Twenty-seven (44%) HDs in 2012 and 39 (64%) HDs in 2013 achieved this requirement. Category B HDs are required to interview at least 80% of newly identified confirmed HIV-positive persons. Six (18%) HDs in 2012 and 15 (44%) HDs in 2013 achieved this requirement.

Partner Services, All Funding Sources

- ⊕ For 2013, 55 HDs reported that 86% of index patients identified by partner services programs were interviewed, 81% of partners were notified of potential HIV exposure, and 79% of notified partners were tested for HIV. Of partners who were tested for HIV, 23% were reported as newly identified HIV-positive.

Referral to HIV Prevention Services

- ⊕ In healthcare and non-healthcare settings, Category B HDs are required to refer at least 80% of newly identified confirmed HIV-positive persons to HIV prevention services. Fourteen (41%) HDs in 2012 and 17 (50%) HDs in 2013 achieved this requirement.

Service Integration

- ⊕ Under PS12-1201 Category B, service integration⁶ is an optional programmatic component. In 2012, 7 HDs reported that 149,101 HIV tests had at least one STD, viral hepatitis, or TB test conducted concurrently. In 2013, 6 HDs reported that 168,313 HIV tests had at least one STD, viral hepatitis, or TB test conducted concurrently.

Risk-Reduction Interventions for HIV-positive and high-risk HIV-negative persons

- ⊕ In 2012 and 2013 combined, 34,366 HIV-positive persons and 65,648 high-risk HIV-negative persons were enrolled in one or more CDC-recommended evidence-based risk-reduction interventions.

KEY PS12-1201 REQUIREMENTS: 2012 AND 2013 COMPARISONS

Figure 1a. Total number of HIV tests conducted (Category A: 61 HDs, Category B: 34 HDs)

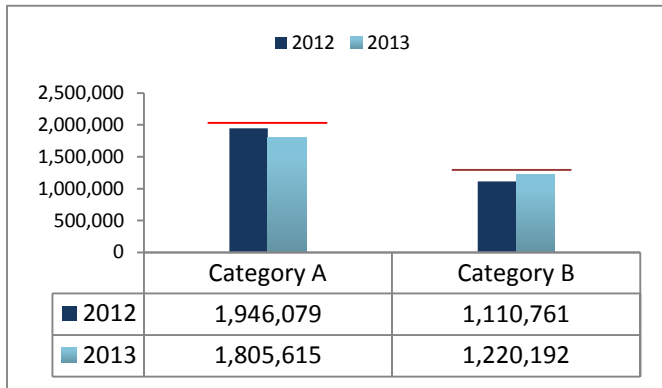


Figure 1b. Newly identified HIV positivity

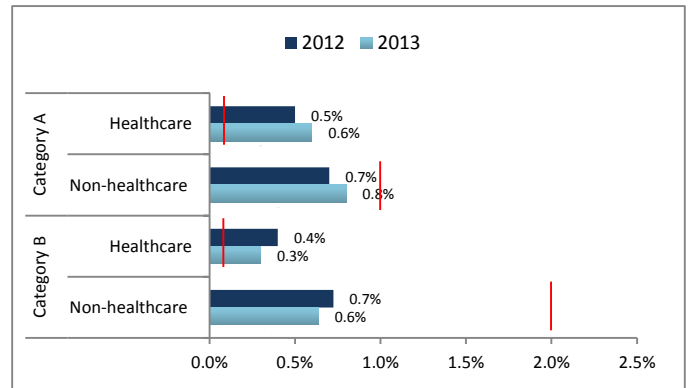


Figure 1c. Number of health departments meeting the FOA objective: Newly identified HIV positivity

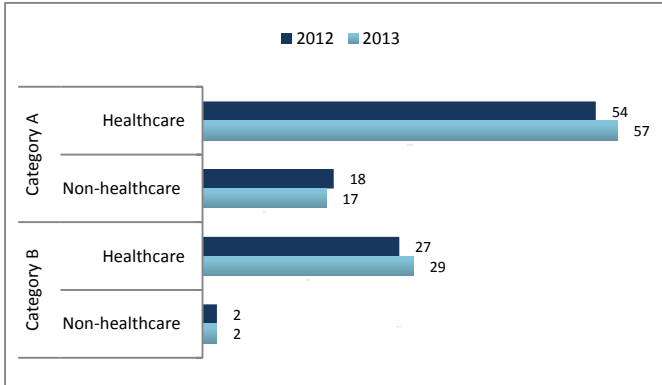


Figure 1d. Percentage linked to HIV medical care, interviewed for partner services, and referred to HIV prevention services

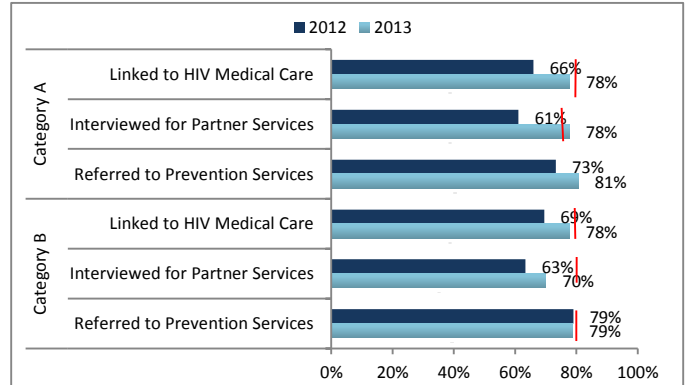


Figure 1e. Number of health departments meeting the FOA objectives for linkage to HIV medical care, interviewed for partner services, and referral to HIV prevention services

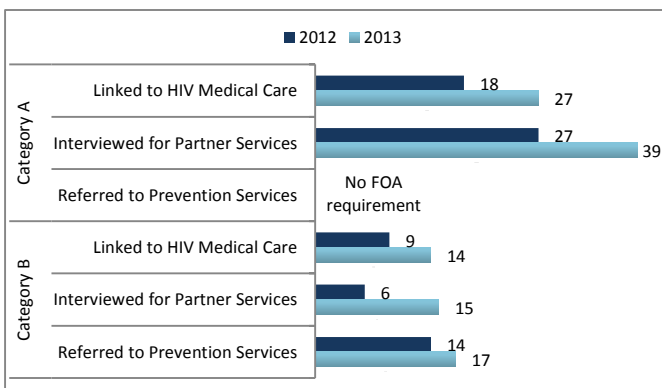
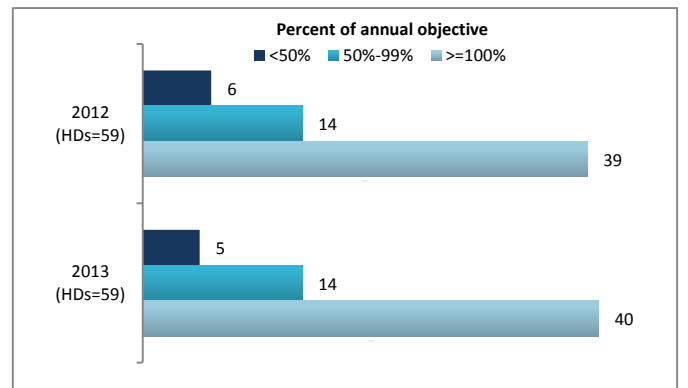


Figure 1f. Condom Distribution: Number of health departments meeting their annual objective



Note: The red lines in Figures 1a, 1b, and 1d indicate FOA requirements.
 Figures 1b - 1e: The number of HDs submitting HIV test-event-level data:

Category A: 59 HDs (2012) and 61 HDs (2013)

Category B: 34 HDs in 2012 and 2013

Figure 1c: Under Category B, 14 HDs (2012) and 15 HDs (2013) conducted HIV testing in non-healthcare settings.

FINDINGS

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, 2014)

Key Evaluation Questions

- ◆ To what extent did grantees do the following related to HIV testing:
 - Conduct HIV screening in healthcare settings?
 - Conduct targeted HIV testing in non-healthcare settings?
- ◆ To what extent did grantees achieve the FOA objectives for HIV positivity in targeted HIV testing?
- ◆ What demographic and target populations did grantees reach with HIV testing?
- ◆ To what extent did grantees identify persons with newly diagnosed HIV infection through HIV testing?

Category A

Sixty-one health departments reported a total of 1,946,079 HIV tests in 2012 and 1,805,615 HIV tests in 2013, representing 97% and 90%, respectively, of the annual two million test national goal set by the FOA (Figure 1a and Appendix C1).^a

In 2012, 59 health departments reported a total of 1,292,434 HIV tests in healthcare settings and 652,373 HIV tests in non-healthcare settings. Of these, 5,890 (0.5%) in healthcare settings and 4,542 (0.7%) in non-healthcare settings were reported as newly identified HIV-positive tests. In 2013, 61 health departments reported a total of 1,156,478 HIV tests in healthcare settings and 598,308 HIV tests in non-healthcare settings. Of these, 6,496 (0.6%) in healthcare settings and 4,702 (0.8%) in non-healthcare settings were reported as newly identified HIV-positive tests (Figure 1b and Appendix C2).^b

- ⊕ In healthcare settings, 54 (89%) health departments in 2012 and 57 (93%) health departments in 2013 achieved the HIV positivity recommendation of $\geq 0.1\%$ (Figure 1c).^b
- ⊕ In non-healthcare settings, 18 (30%) health departments in 2012 and 17 (28%) health departments in 2013 achieved the HIV positivity requirement of $\geq 1.0\%$ (Figure 1c).^b

Category B

In 2012, 34 health departments reported a total of 1,110,761 HIV tests in healthcare and non-healthcare settings, exceeding the annual 1.1 million test national goal set by the FOA.^a Of these, 4,769 (0.4%) were newly identified HIV-positive tests.^b In 2013, 34 health departments reported a total of 1,220,192 HIV tests in healthcare and non-healthcare settings, representing 94% of the annual 1.3 million test national goal set by the FOA (Figure 1a and Appendix C1).^a Of these, 3,959 (0.3%) were newly identified HIV-positive tests.^b The national goal set by the FOA was to identify 5,500 new HIV-positive tests in 2012 and 6,500 in 2013.

In 2012, 34 health departments reported a total of 966,174 HIV tests in healthcare settings, and 14 health departments reported a total of 144,587 HIV tests in non-healthcare settings. Of these, 3,722 (0.4%) in healthcare settings and 1,047

^a Total number of HIV tests include aggregate-level and test-event level data submitted to CDC by 61 health departments funded under PS12-1201.

^b HDs 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.

(0.7%) in non-healthcare settings were reported as newly identified HIV-positive tests. In 2013, 34 health departments reported a total of 1,095,179 HIV tests in healthcare settings and 15 health departments reported a total of 125,013 HIV tests in non-healthcare settings. Of these, 3,163 (0.3%) in healthcare settings and 796 (0.6%) in non-healthcare settings were reported as newly identified HIV-positive tests (Figure 1b and Appendix C2).^b

- ⊕ In healthcare settings, 27 (79%) health departments in 2012 and 29 (85%) health departments in 2013 achieved the HIV positivity recommendation of $\geq 0.1\%$ (Figure 1c).^b
- ⊕ In non-healthcare settings, two (14%) of 14 health departments in 2012 and two (13%) of 15 health departments in 2013 achieved the HIV positivity recommendation of $\geq 2.0\%$ (Figure 1c).^b

The demographic characteristics and target population of newly identified HIV-positive persons in healthcare and non-healthcare settings for both Category A and B are shown in Figure 2.

B. Comprehensive HIV Prevention with HIV-Positive Persons

1. Linkage to HIV medical care, newly identified persons *(Data Source: NHM&E test-event-level HIV testing data submitted through EvaluationWeb[®] as of September 15, 2014)*

Key Evaluation Questions

- ◆ *To what extent did grantees link newly diagnosed HIV-positive persons to HIV medical care?*
- ◆ *To what extent did grantees achieve the FOA objectives for linkage to HIV medical care in healthcare and non-healthcare settings?*
- ◆ *What demographic and target populations did grantees link to HIV medical care?*

Category A

In 2012, for Category A tests conducted in both healthcare and non-healthcare settings, 25% of records lacked information on outcome of linkage to HIV medical care (Appendix C5). Based on records with valid and complete data, 5,184 (66%) newly identified HIV-positive persons were linked to HIV medical care within any timeframe.^c Under Category A, health departments are required to link at least 80% of newly identified HIV-positive persons to HIV medical care within any timeframe. Eighteen (30%) health departments achieved this requirement (Figure 1e).^d

In 2013, for Category A tests conducted in both healthcare and non-healthcare settings, 24% of records lacked information on outcome of linkage to HIV medical care (Appendix C5). Based on records with valid and complete data, 6,713 (78%) newly identified HIV-positive persons were linked to HIV medical care within any timeframe (Figure 1d and Appendix C5).^c Under Category A, health departments are required to link at least 80% of newly identified HIV-positive persons to HIV medical care within any timeframe. Twenty-seven (44%) health departments achieved this requirement (Figure 1e).^d

NHAS has established the goal that by 2015, 85% of newly diagnosed persons with HIV should be linked to HIV medical care *within 90 days* after HIV diagnosis. Approximately 25% of records in 2012 and 41% of records in 2013 lacked information on outcome of linkage to HIV medical care *within 90 days*. Based on records with valid and complete data, 12 (20%) health departments in 2012 and 41 (67%) health departments in 2013 achieved the NHAS goal.^d

^c 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 maximum percentages of newly identified HIV-positive persons linked to HIV medical care, but these likely overestimate the actual linkage percentages.

^d Because the linkage percentages used were the maximum percentages, the number of health departments that met the FOA requirement may be overestimated.

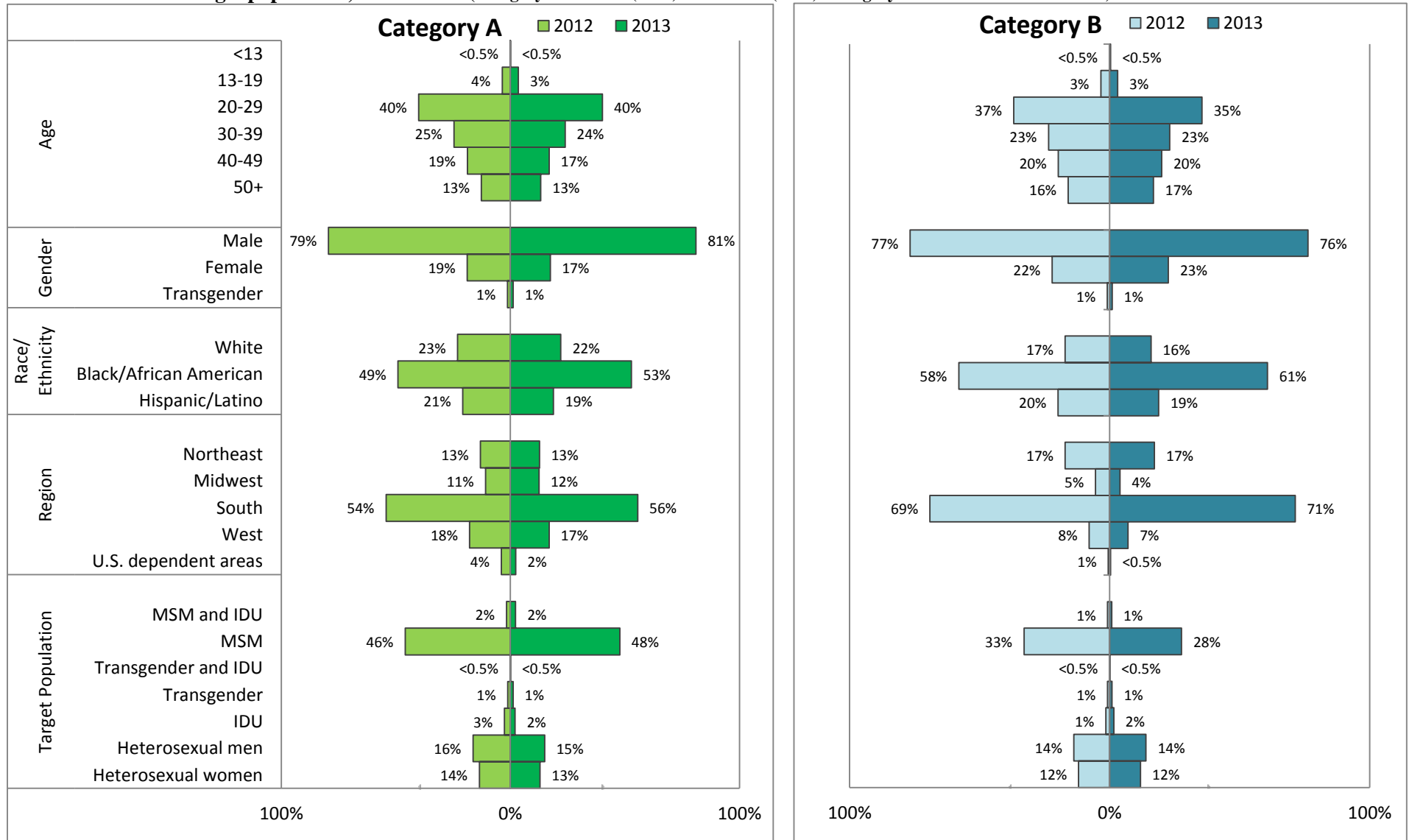
Category B

In 2012, for Category B tests conducted in both healthcare and non-healthcare settings, 22% of records lacked information on outcome of linkage to HIV medical care (Appendix C6). Based on records with valid and complete data, 2,783 (69%) newly identified HIV-positive persons were linked to HIV medical care within any timeframe (Figure 1d and Appendix C6).^c Under Category B, health departments are required to link at least 80% of newly identified HIV-positive persons to HIV medical care within any timeframe. Nine (26%) health departments achieved this requirement (Figure 1e).^d

In 2013, for Category B tests conducted in both healthcare and non-healthcare settings, 27% of records lacked information on outcome of linkage to HIV medical care (Appendix C6). Based on records with valid and complete data, 2,629 (78%) newly identified HIV-positive persons were linked to HIV medical care within any timeframe (Figure 1d and Appendix C6).^c Under Category B, health departments are required to link at least 80% of newly identified HIV-positive persons to HIV medical care within any timeframe. Fourteen (41%) health departments achieved this requirement (Figure 1e).^d

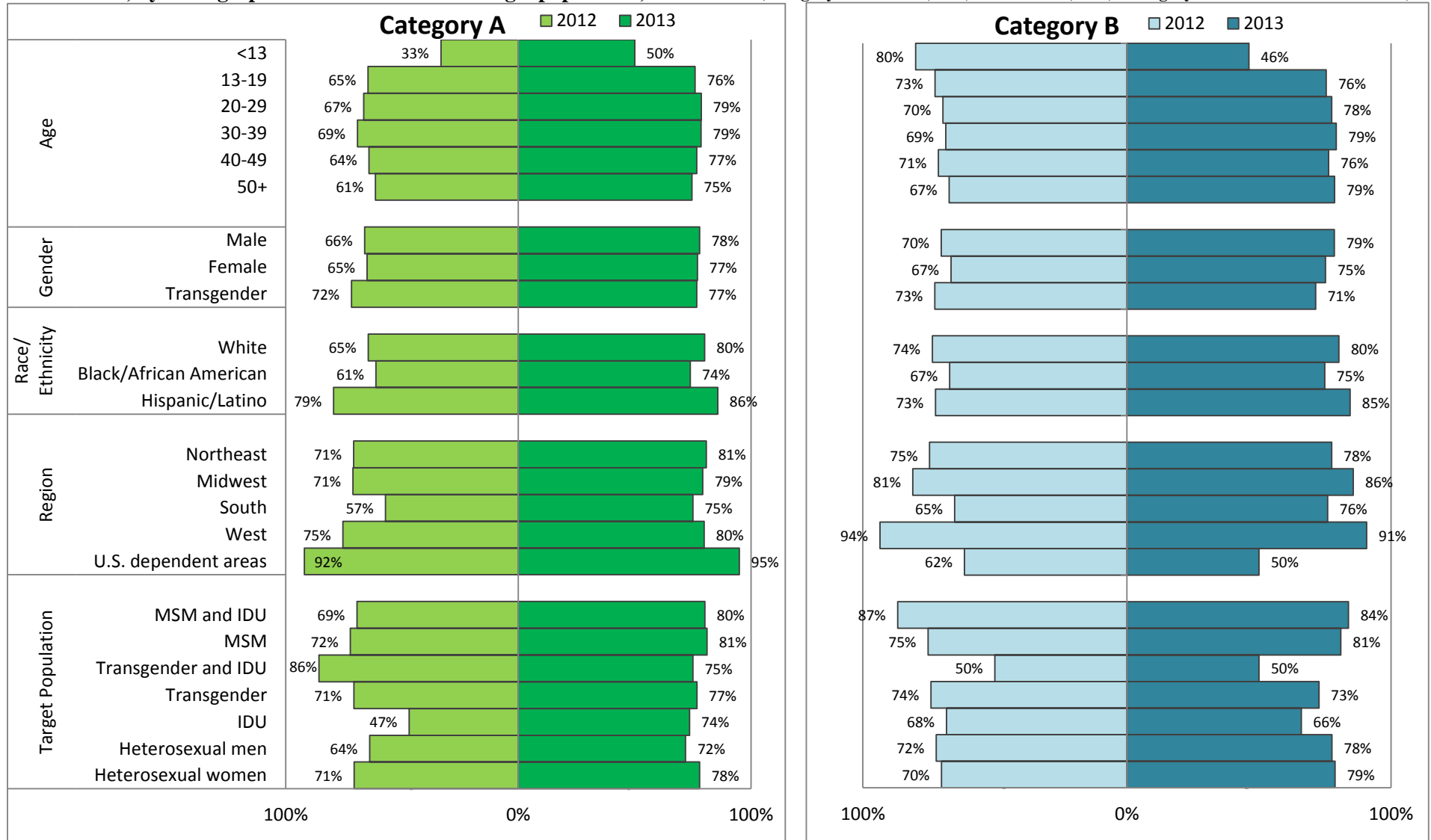
The demographic characteristics and target population of newly identified HIV-positive persons linked to HIV medical care in healthcare and non-healthcare settings for both Category A and B are shown in Figure 3.

Figure 2: PS12-1201 Category A and B - Healthcare and Non-Healthcare settings: Percentage of newly identified HIV-positive persons, by demographic characteristics and target population, 2012 - 2013 (Category A: 59 HDs (2012) and 61 HDs (2013). Category B: 34 HDs in 2012 and 2013).



Data Source: NHM&E HIV test-event-level data submitted through EvaluationWeb® as of September 15, 2014. The percentages do not total to a 100% as missing/invalid, declined/not asked, don't know/not asked, and no risk/invalid/missing are not shown in the figure. For race/ethnicity, Asian, American Indian/Alaska Native, Native Hawaiian/Pacific Islander or multi-race are not shown in the figure (Appendix C3 and C4).

Figure 3: PS12-1201 Category A and B - Healthcare and Non-Healthcare settings: Percentage of newly identified HIV-positive persons linked to HIV medical care, by demographic characteristics and target population, 2012–2013 (Category A: 59 HDs (2012) and 61 HDs (2013). Category B: 34 HDs in 2012 and 2013).



Data Source: NHM&E HIV test-event-level data submitted through EvaluationWeb® as of September 15, 2014. Percentages of missing/invalid, declined/not asked, don't know/not asked, and no risk/missing/invalid are not shown in the figure. For race/ethnicity, Asian, American Indian/Alaska Native, Native Hawaiian/Pacific Islander or multi-race are not shown in the figure. Linkage percentages shown represent the maximum percentages of newly identified HIV-positive persons linked to HIV medical care, but these may be overestimating the actual linkage percentages (Appendix C5 and C6).

2. Linkage to or re-engagement in HIV medical care, previously identified HIV-positive persons (Data

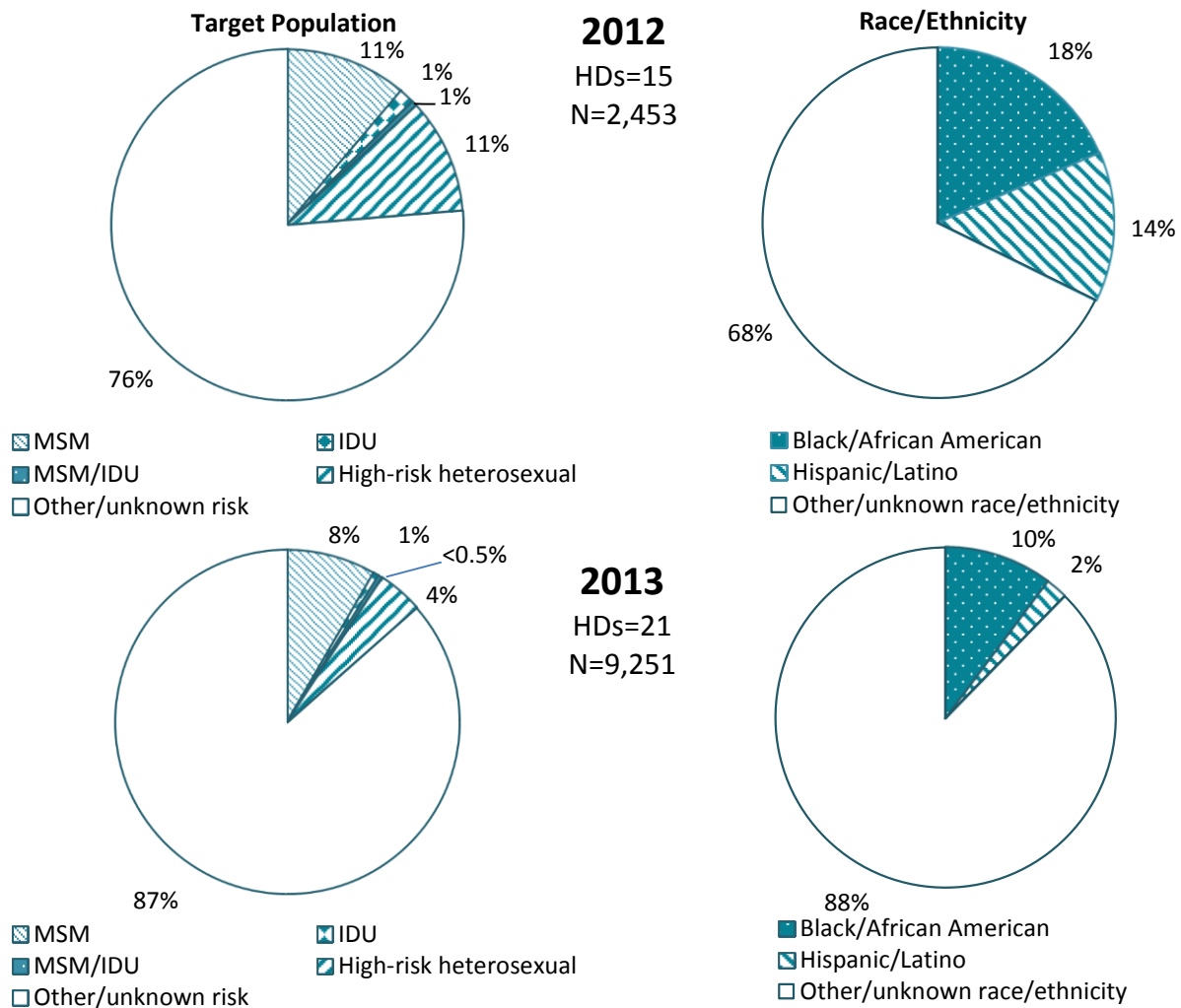
Source: NHM&E aggregate-level RRA data submitted through EvaluationWeb® as of September 15, 2014)

Key Evaluation Questions

- ◆ How many out-of-care previously identified HIV-positive persons were linked to or re-engaged in HIV medical care?
- ◆ What were the demographic characteristics and target population of out-of-care previously identified HIV-positive persons linked to or re-engaged in HIV medical care?

In 2012, 15 Category A funded health departments reported that 2,453 out-of-care previously identified HIV-positive persons were linked to or re-engaged in HIV medical care and treatment services. In 2013, 21 Category A funded health departments reported that 9,251 out-of-care previously identified HIV-positive persons were linked to or re-engaged in HIV medical care and treatment services (Figure 4 and Appendix C7). Linkage to or re-engagement in HIV medical care and treatment services is a new NHM&E data requirement, and some health departments are 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, 2012 - 2013.



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

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

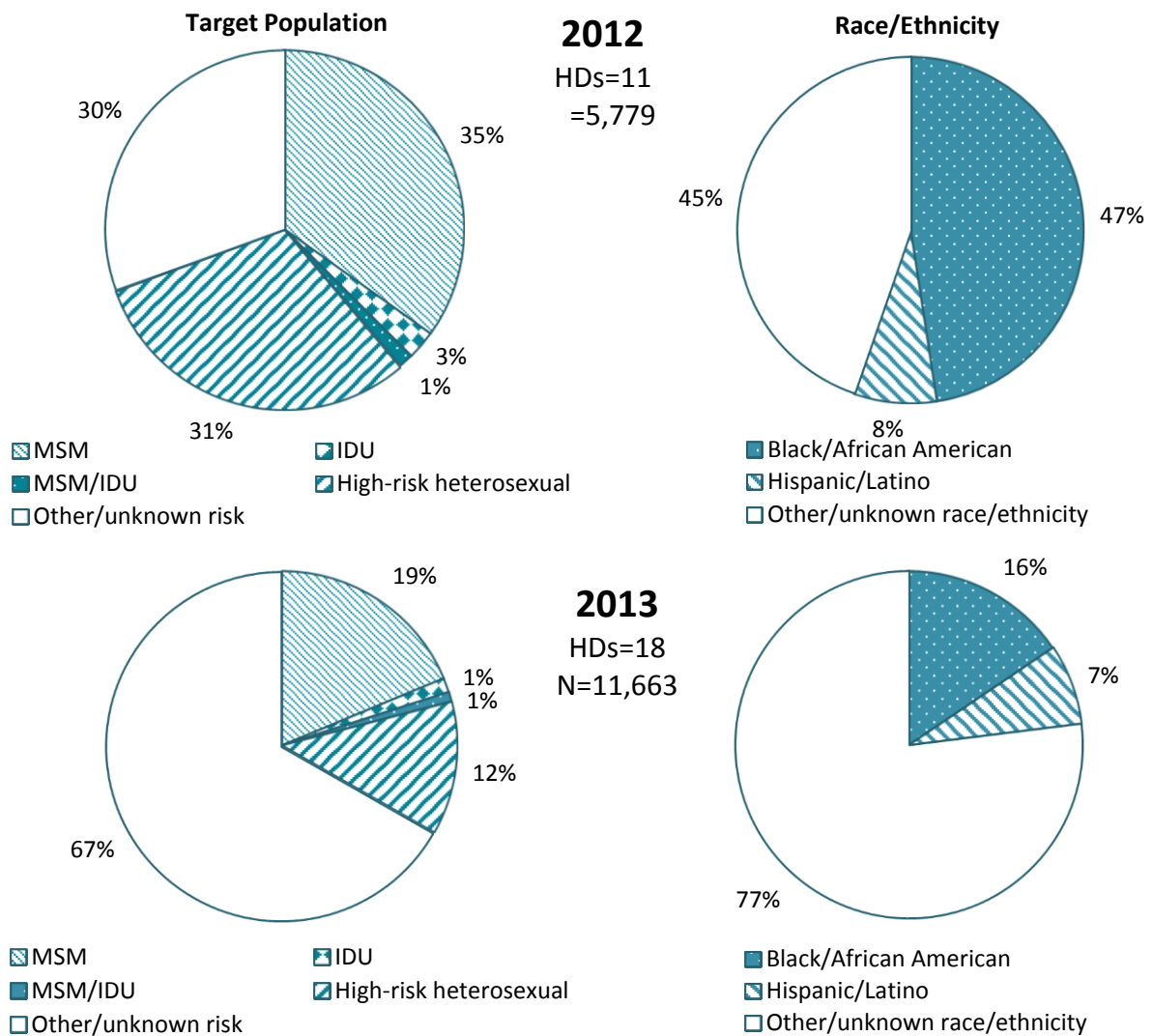
3. Linkage to treatment adherence services (Data Source: NHM&E aggregate-level RRA data submitted through EvaluationWeb® as of September 15, 2014)

Key Evaluation Questions

- ◆ How many HIV-positive persons were linked to treatment adherence services?
- ◆ What were the demographic characteristics and target populations of HIV-positive persons linked to treatment adherence services?

In 2012, 11 Category A funded health departments reported that 5,779 HIV-positive persons were linked to anti-retroviral therapy (ART) adherence services. In 2013, 18 Category A funded health departments reported that 11,663 HIV-positive persons were linked to ART adherence services (Figure 5 and Appendix C8). Linkage to treatment adherence services is a new NHM&E data requirement, and some health departments are 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, 2012 - 2013



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

Partner services

a. Interview for partner services, PS12-1201 (Data Source: NHM&E test-event-level HIV testing data submitted through EvaluationWeb® as of September 15, 2014)

Key Evaluation Questions

- ◆ *To what extent did grantees interview newly identified confirmed HIV-positive persons for partner services?*
- ◆ *To what extent did grantees achieve the FOA objectives for interview for partner services in healthcare and non-healthcare settings?*
- ◆ *What were the demographic characteristics and target populations of newly identified confirmed HIV-positive persons interviewed for partner services?*

Category A

In 2012, for Category A tests conducted in both healthcare and non-healthcare settings, 40% of records lacked information on outcome of interview for partner services (Appendix C9). Based on records with valid and complete data, 3,843 (61%) newly identified confirmed HIV-positive persons were interviewed for partner services (Figure 1d and Appendix C9).^e Under Category A, health departments are required to interview at least 75% of newly identified confirmed HIV-positive persons for partner services. Twenty-seven (44%) health departments achieved this requirement (Figure 1e).^f

In 2013, for Category A tests conducted in both healthcare and non-healthcare settings, 29% of records lacked information on outcome of interview for partner services (Appendix C9). Based on records with valid and complete data, 6,304 (78%) newly identified confirmed HIV-positive persons were interviewed for partner services (Figure 1d and Appendix C9).^e Under Category A, health departments are required to interview at least 75% of newly identified confirmed HIV-positive persons for partner services. Thirty-nine (64%) health departments achieved this requirement (Figure 1e).^f

Category B

In 2012, for Category B tests conducted in both healthcare and non-healthcare settings, 51% of records lacked information on outcome of interview for partner services (Appendix C10). Based on records with valid and complete data, 1,611 (63%) newly identified confirmed HIV-positive persons were interviewed for partner services (Figure 1d and Appendix C10).^e Under Category B, health departments are required to interview at least 80% of newly identified confirmed HIV-positive persons for partner services. Six (18%) health departments achieved this requirement (Figure 1e).^f

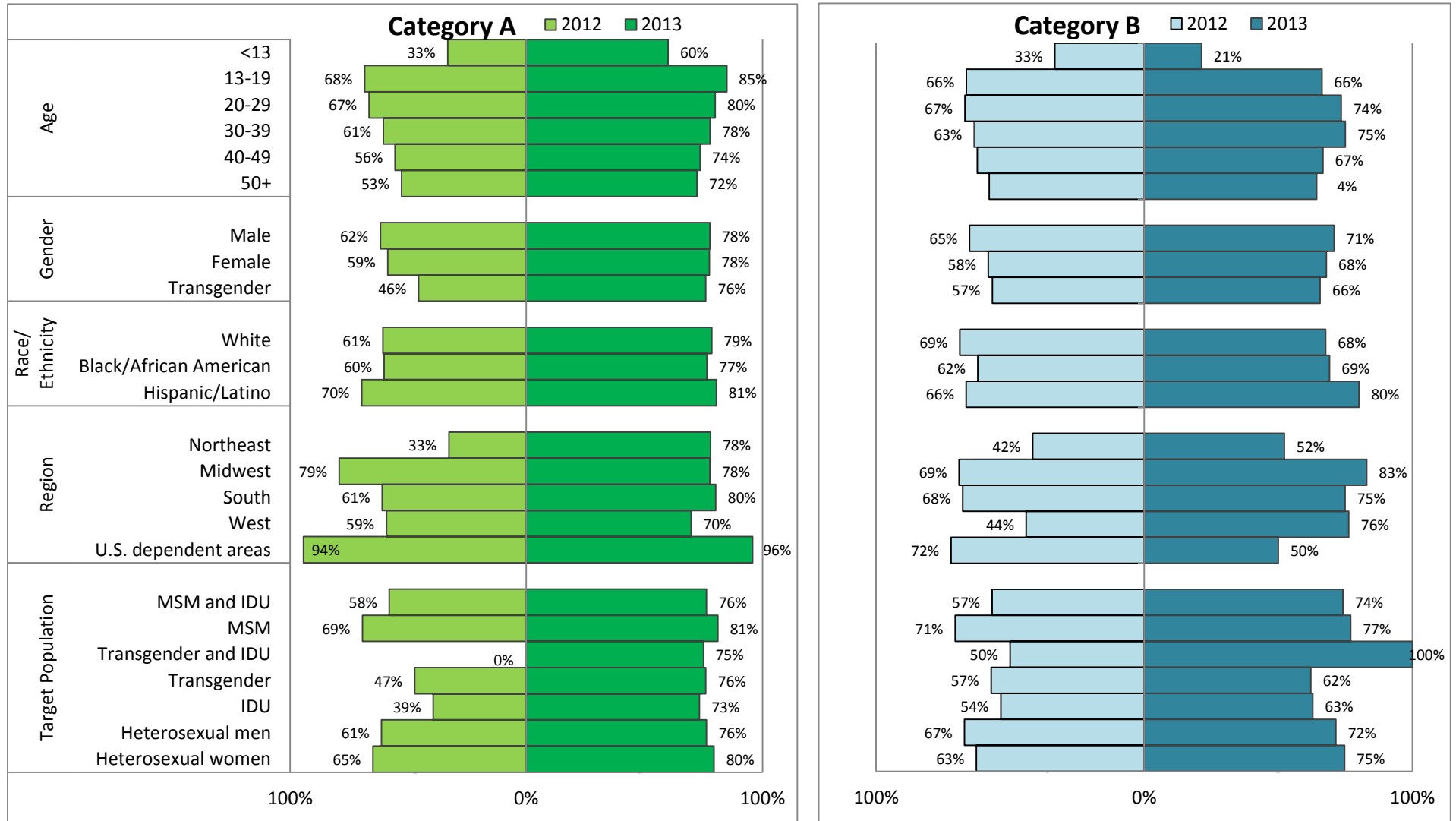
In 2013, for Category B tests conducted in both healthcare and non-healthcare settings, 41% of records lacked information on outcome of interview for partner services (Appendix C10). Based on records with valid and complete data, 1,923 (70%) newly identified confirmed HIV-positive persons were interviewed for partner services (Figure 1d and Appendix C10).^e Under Category B, health departments are required to interview at least 80% of newly identified confirmed HIV-positive persons for partner services. Fifteen (44%) health departments achieved this requirement (Figure 1e).^f

The demographic characteristics and target population of newly identified confirmed HIV-positive persons interviewed for partner services in healthcare and non-healthcare settings for both Category A and B are shown in Figure 6.

^e 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 maximum percentages of newly identified confirmed HIV-positive persons interviewed for partner services, but these likely overestimate the actual interview percentages.

^f Because the interview percentages used were the maximum percentages, the number of health departments that met the FOA requirement may be overestimated.

Figure 6: PS12-1201 Category A and B - Healthcare and Non-Healthcare: Percentage of newly identified confirmed HIV-positive persons interviewed for partner services, by demographic characteristics and target population, 2012 - 2013 (Category A: 59 HDs (2012) and 61 HDs (2013). Category B: 34 HDs in 2012 and 2013).



Data Source: NHM&E HIV test-event-level data submitted through EvaluationWeb® as of September 15, 2014. Percentages of missing/invalid, declined/not asked, don't know/not asked, and no risk/missing/invalid are not shown in the figure. For race/ethnicity, Asian, American Indian/Alaska Native, Native Hawaiian/Pacific Islander or multi-race are not shown in the figure. Interview percentages for partner services shown represent the maximum percentages of newly identified confirmed HIV-positive persons interviewed for partner services, but may be overestimating the actual interview percentages (Appendix C9 and C10).

b. Partner services, all funding sources (Data Source: NHM&E Partner Services aggregate-level and client-level data as of September 15, 2014. Data are from all clients tested by CDC-funded programs, non-CDC funded programs, and community-based organizations)

Key Evaluation Question

To what extent did grantees test partners and identify new HIV-positive persons through partner services?

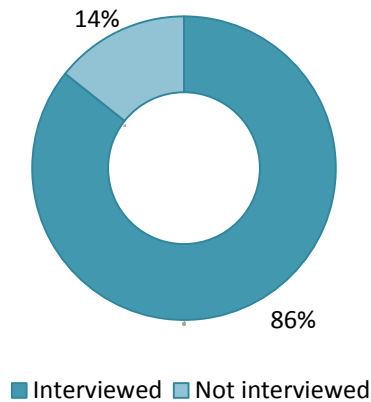
In 2013, client-level partner services data were reported for the first time to CDC through EvaluationWeb®. Some health departments were not able to report client-level partner services data because of challenges in modifying data collection methods and data systems. These health departments reported aggregate partner services data; thus, the data used for this report are a combination of aggregate-level and client-level data. For analysis of client-level data in this report, we are excluding records with missing or invalid partner services data from the denominator.

In 2013, 55 health departments reported 36,363 index patients eligible to be interviewed for partner services, of which 34,018 had valid data on interview for partner services. Of these, 29,154 (86%) were interviewed (Appendix C11A).

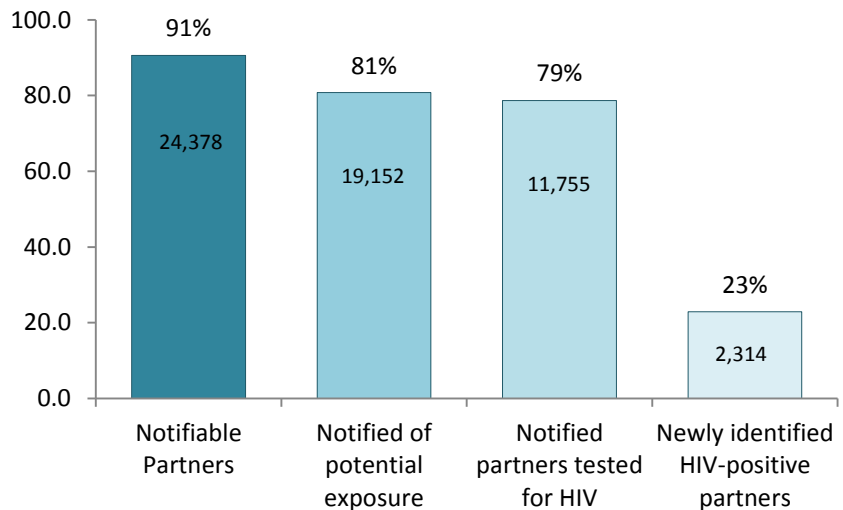
Of 28,617 named partners, 24,378 (91%) were located and were eligible to be notified of potential HIV exposure (i.e., notifiable). Of these notifiable partners, 23,711 had valid data on notification status. Of those with valid data on notification status, 19,152 (81%) were notified of potential HIV exposure. Valid HIV test information was available for 14,932 of the notified partners, of which 11,755 (79%) were tested. Of the tested partners, 10,106 had valid HIV test results; 2,314 (23%) of these were newly identified as HIV-positive (Figure 7 and Appendix C11B).

Figure 7: Partner services for index patients and named partners, 55 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2013.

7a. Index patients interviewed for partner services



7b. Partner notification, HIV testing, and newly identified HIV positivity among the named partners (named partners = 28,617)



Data Source: NHM&E Partner Services aggregate-level and client-level data submitted through EvaluationWeb® as of September 15, 2014.
 Note: The numerator, denominator, and missing/invalid for each of the bars in Figure 7b are shown in Appendix C11B.

4. Referral to HIV prevention services (Data Source: NHM&E test-event-level HIV testing data submitted through EvaluationWeb® as of September 15, 2014)

Key Evaluation Questions

- ◆ *To what extent did grantees refer newly identified confirmed HIV-positive persons to HIV prevention services?*
- ◆ *To what extent did grantees achieve the FOA objectives for referral to HIV prevention services in healthcare and non-healthcare settings?*

Category A

In 2012, for Category A tests conducted in both healthcare and non-healthcare settings, 27% of records lacked information on referral to HIV prevention services (Appendix C12). Based on records with valid and complete data, 4,924 (73%) newly identified confirmed HIV-positive persons were referred to HIV prevention services (Figure 1d and Appendix C12).^g Under Category A, there is no FOA-specified requirement for referral to HIV prevention services.

In 2013, for Category A tests conducted in both healthcare and non-healthcare settings, 24% of records lacked information on referral to HIV prevention services (Appendix C12). Based on records with valid and complete data, 6,103 (81%) newly identified confirmed HIV-positive persons were referred to HIV prevention services (Figure 1d and Appendix C12).^g

Category B

In 2012, for Category B tests conducted in both healthcare and non-healthcare settings, 37% of records lacked information on referral to HIV prevention services (Appendix C12). Based on records with valid and complete data, 2,061 (79%) newly identified confirmed HIV-positive persons were referred to HIV prevention services (Figure 1d and Appendix C12).^g Under Category B, health departments are required to refer at least 80% of newly identified confirmed HIV-positive persons to HIV prevention services. Fourteen (41%) health departments achieved this requirement (Figure 1e).^h

In 2013, for Category B tests conducted in both healthcare and non-healthcare settings, 41% of records lacked information on referral to HIV prevention services (Appendix C12). Based on records with valid and complete data, 1,708 (79%) newly identified confirmed HIV-positive persons were referred to HIV prevention services (Figure 1d and Appendix C12).^g Under Category B, health departments are required to refer at least 80% of newly identified confirmed HIV-positive persons to HIV prevention services. Seventeen (50%) health departments achieved this requirement (Figure 1e).^h

^g 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 maximum percentages of newly identified confirmed HIV-positive persons referred to HIV prevention services, but these likely overestimate the actual referral percentages.

^h Because the referral percentages used were the maximum percentages, the number of health departments that met the FOA requirement may be overestimated.

5. Service integration *(Data Source: 2012 and 2013 APRs submitted to CDC)*

Key Evaluation Question

How many STD, viral hepatitis, and TB tests did grantees conduct in conjunction with HIV testing?

Under PS12-1201 Category B, service integration [5] is an optional programmatic component. Seven health departments in 2012 and 6 health departments in 2013 allocated Category B funds to conduct STD (i.e., syphilis, chlamydia, and gonorrhea), viral hepatitis (i.e., hepatitis B and C), or TB screening concurrently with HIV testing (Figure 8 and Appendix C13).

In 2012, in healthcare and non-healthcare settings, 149,101 HIV tests had at least one STD, viral hepatitis, or TB test conducted concurrently. This included 48,649 (33%) syphilis tests, 38,445 (26%) gonorrhea tests, 26,230 (18%) chlamydia tests, 18,158 (12%) hepatitis B tests, 6,753 (4%) hepatitis C tests, and 10,866 (7%) TB tests.

In 2013, in healthcare and non-healthcare settings, 168,313 HIV tests had at least one STD, viral hepatitis, or TB test conducted concurrently. This included 50,814 (30%) syphilis tests, 46,346 (28%) gonorrhea tests, 38,589 (23%) chlamydia tests, 16,017 (9%) hepatitis B tests, 6,397 (4%) hepatitis C tests, and 10,150 (6%) TB tests.

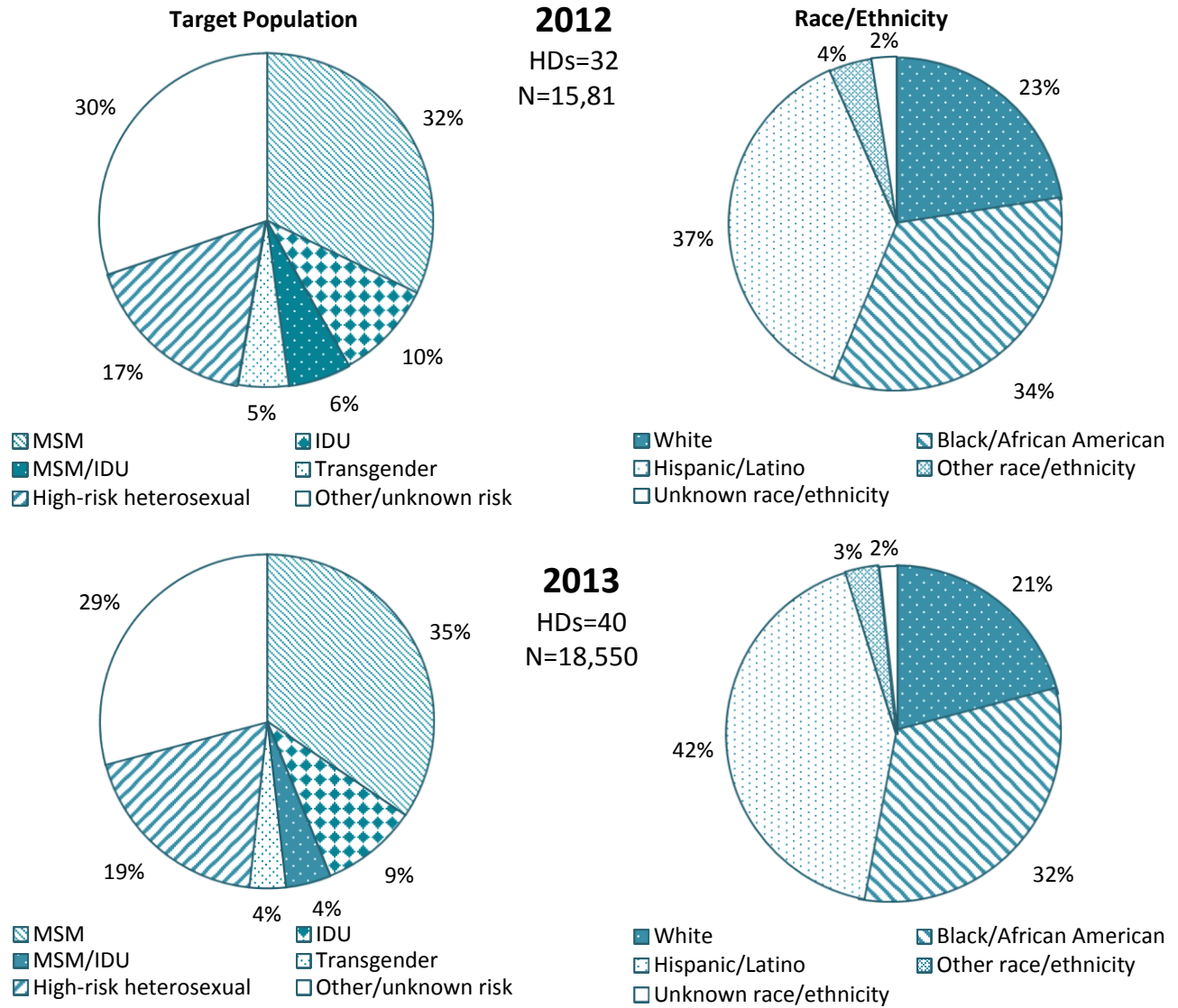
6. Risk-reduction interventions for HIV-positive persons *(Data Source: NHM&E client-level RRA data submitted through EvaluationWeb® as of September 15, 2014)*

Key Evaluation Questions

- ◆ *How many HIV-positive persons were enrolled in one or more risk-reduction interventions?*
- ◆ *What were the demographic characteristics and target populations of HIV-positive persons enrolled in one or more risk-reduction interventions?*

In 2012, 32 Category A funded health departments reported that 15,816 HIV-positive persons were enrolled in one or more CDC-recommended risk-reduction interventions. In 2013, 40 Category A funded health departments reported that 18,550 HIV-positive persons were enrolled in one or more CDC-recommended risk-reduction interventions (Figure 8 and Appendix C14). Client-level reporting of risk-reduction interventions for HIV-positive persons through EvaluationWeb® began in 2013, at which time data for 2012 and 2013 were reported. Risk-reduction interventions for HIV-positive persons are a new NHM&E data requirement, and some health departments implementing this program component are in the process of adapting their data collection methods and systems to report this information.

Figure 8: PS12-1201 Category A – HIV-positive persons enrolled in one or more evidence-based risk-reduction interventions, 2012 - 2013.



Data Source: NHM&E RRA data reported at a client-level in EvaluationWeb® as of September 15, 2014.
 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: 2012 and 2013 APRs submitted to CDC)*

Key Evaluation Question

How many condoms were distributed to HIV-positive persons and persons at highest risk for acquiring HIV?

- ⊕ Under Category A, 59 HDs reported using PS12-1201 funds to distribute condoms to HIV-positive persons and persons at highest risk for acquiring HIV. In 2012, 110,838,110 condoms were distributed; in 2013, 137,553,840 were distributed, a 24% increase from 2012.
- ⊕ Thirty-nine (66%) health departments in 2012 and 40 (68%) health departments in 2013 achieved their annual objective for condom distribution (Figure 1f).

II. PS12-1201 RECOMMENDED PROGRAMMATIC COMPONENTS

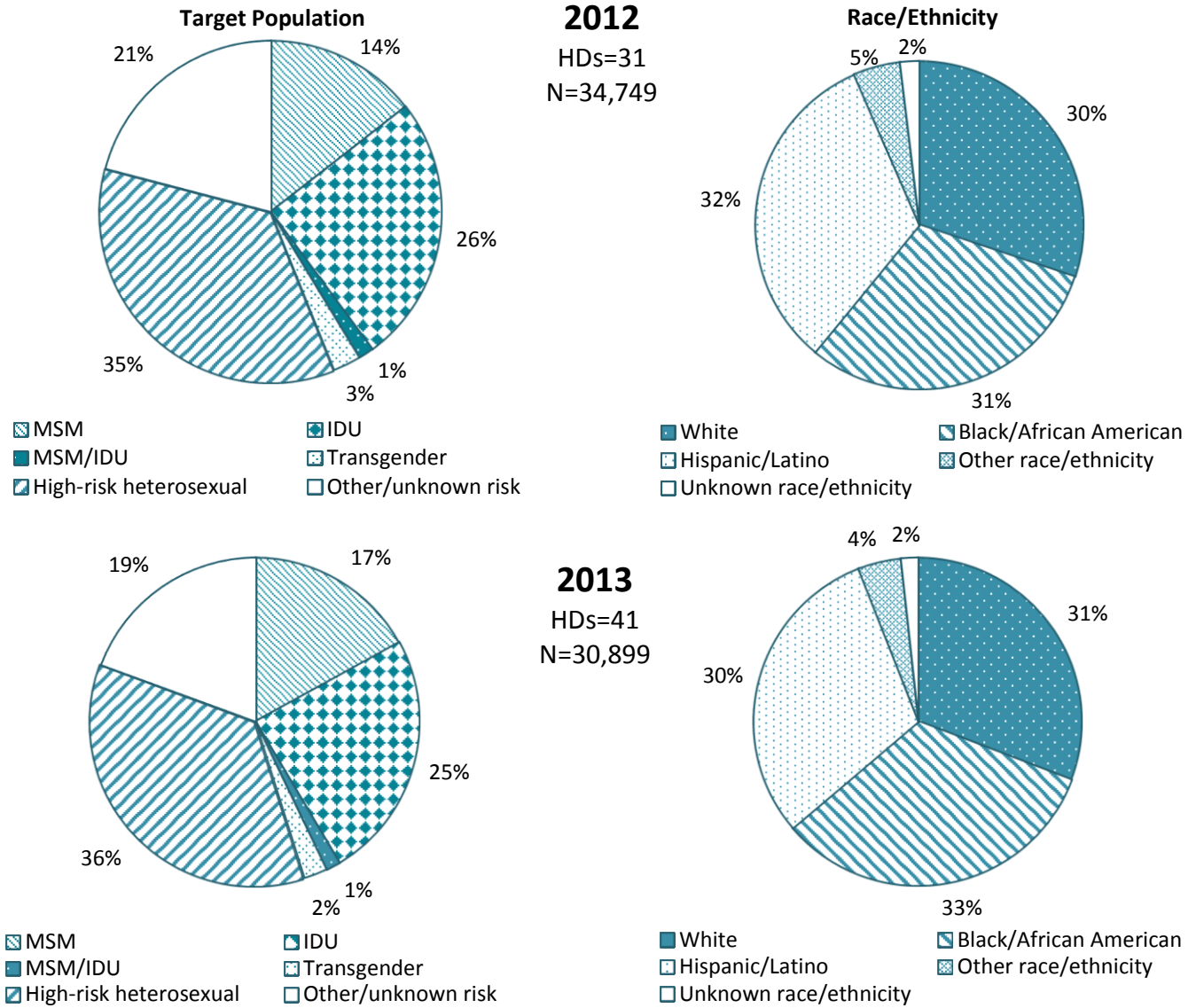
A. HIV prevention interventions for high-risk HIV-negative persons *(Data Source: NHM&E client-level RRA data submitted through EvaluationWeb® as of September 15, 2014)*

Key Evaluation Questions

- ◆ *How many high-risk HIV-negative persons were enrolled in one or more evidence-based HIV prevention interventions?*
- ◆ *What were the demographic characteristics and target populations of high-risk HIV-negative persons enrolled in one or more evidence-based HIV prevention interventions?*

In 2012, 31 Category A funded health departments reported that 34,749 high-risk HIV-negative persons were enrolled in one or more CDC-recommended evidence-based HIV prevention interventions. In 2013, 41 Category A funded health departments reported that 30,899 high-risk HIV-negative persons were enrolled in one or more CDC-recommended risk-reduction interventions (Figure 9 and Appendix C15). HIV prevention interventions for high-risk HIV-negative persons are a new NHM&E data requirement, and some health departments implementing this program component are in the process of adapting their data collection methods and systems to report this information.

Figure 9: PS12-1201 Category A – High-risk HIV-negative persons enrolled in one or more evidence-based HIV prevention interventions, 2012 - 2013.



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

INTERPRETATION OF THIS REPORT

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

- ⊕ The report reflects findings for the first two years 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/intra-departmental 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 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.
- ⊕ The HIV testing data in this report include only tests funded by PS12-1201 Categories A and B; they do not reflect all testing, linkage to HIV medical care, partner services activities done in health departments, which may include activities supported by state, local, and other federal funding. This report does not include HIV testing information funded by other program announcements. Please refer to CDC-Funded HIV Testing: United, States, Puerto Rico and the U.S. Virgin Islands, 2012⁷ 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 2012, 1,272 (0.1%) Category A HIV test records and 2,640 (0.2%) Category B HIV test records could not be categorized into healthcare and non-healthcare settings. In 2013, 50,829 (2.8%) Category A HIV test records and 15,814 (1.1%) Category B HIV test records could not be categorized into healthcare and non-healthcare settings.
- ⊕ Calculated percentages of linkage to HIV medical care within any timeframe and within 90 days, interview for partner services, and referral to HIV prevention services may be inaccurate because a substantial percentage of records are missing valid data on these outcomes. The percentage of records missing data on these outcomes varies considerably among health departments.

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APPENDICES

APPENDIX A: TECHNICAL NOTES, DEFINITIONS, AND DATA CALCULATION METHODS

Data Source Description

The NHM&E reporting system collects HIV/AIDS-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 jurisdiction.
- **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 59 health departments in 2012 and 61 health departments in 2013.

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.

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.

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

Index patient

A person with newly-reported HIV infection who is eligible for HIV partner services (i.e., not deceased or out of jurisdiction at the time of report).

Interview for HIV-positive partners

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.

Linkage to HIV medical care within 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.

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.

Newly identified HIV-positive partner

A partner who a) has not previously been reported to the health department as being infected with HIV, b) has not been identified via record review as being previously positive, c) does not self-report having previously tested positive for HIV infection, and d) tested positive for HIV by the health departments or providers.

Notifiable partners

Notifiable partners are named partners that can be located and are determined to be eligible for notification of potential exposure. Partners out of jurisdiction, deceased, or for which there is a risk of domestic violence are not considered notifiable.

Partners named

Denotes whether or not a sexual or drug using partner is both identifiable and locatable. Partners named are sexual and injection drug using partners the index patient has had during the interview period, for which the index patient can provide identifying information (e.g., an actual name, an alias, or enough descriptive information that he/she can reasonably be considered identifiable) and sufficient information that he/she can reasonably be considered locatable. This is equivalent to the term “partners initiated” used in the STD Program Operations Guide. This does not include any associates that the partner may name. The amount of information that deems a partner locatable is defined by the jurisdiction (this may include a specific e-mail address or chat room communication).

Partners notified

Denotes sexual or drug using partners notified by health department staff through health department referral, referral after notification attempt by an index patient fails (i.e., contract referral), or referral by the index patient and health department staff together (i.e., dual referral).

Partner services

Partner services refer to a broad array of voluntary services, usually conducted by health department specialists, which should be offered to persons with HIV infection and their partners. The main functions of partner services are a) partner elicitation, the process through which infected persons (referred to as index patients) are interviewed to obtain information about their partners, b) partner notification, when partners are confidentially informed of their possible exposure to infection, c) prevention counseling and testing for HIV and other types of STDs, and d) treatment or linkage to medical care and other prevention services. The *2008 Recommendations for Partner Services Programs for HIV Infection, Syphilis, Gonorrhea, and Chlamydial Infection* state that health departments should work to ensure that all newly identified HIV-positive persons are offered Partner Services whether they are tested in public or private settings [6].

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.

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.

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.

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 EIA test confirmed by supplemental testing, e.g., Western Blot) or a nucleic acid amplification test (NAAT). For the purposes of this

report, two rapid tests were categorized as a confirmed HIV-positive testing event, unless there was a negative conventional HIV test result or a negative NAAT test result.

- **HIV-positive testing event**

An HIV-positive testing event is determined by the following: 1) NAAT/RNA positive test result, 2) conventional positive test result, only if there is not a negative NAAT/RNA test result as part of that testing event, 3) rapid positive test result, only if there is not a negative NAAT/RNA or negative conventional test result as part of that testing event, and 4) a positive test result, even if test technology is missing/invalid, only if there is not a negative NAAT/RNA or negative conventional test result as part of that testing event.

- **Newly identified confirmed HIV-positive result**

A confirmed HIV-positive test result associated with a client who reports either no data on a previously conducted HIV test, no previously conducted HIV test, or a previous HIV test without a positive result.

- **Newly identified HIV-positive person**

An HIV-positive test result associated with a person who reports: 1) no previous HIV test, 2) a previous HIV test with a negative or an indeterminate result, or 3) “don’t know” for a previous HIV 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

U.S. geographic region

The four U.S. geographic regions as designated by the U.S. Census Bureau.

- Northeast - Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island and Vermont;
- Midwest - Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota and Wisconsin;
- South - Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia and West Virginia
- West - Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington and Wyoming.
- U.S. dependent areas: Puerto Rico and the U.S. Virgin Islands

Data Calculation Methods

Gender

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.

Interview for partner services

This calculated indicator measures the extent to which newly identified confirmed HIV-positive persons were interviewed for partner services. For this report, the minimum percentage includes missing/invalid data in the denominator and includes all newly identified confirmed HIV-positive persons. The maximum percentage excludes missing/invalid data from the denominator.

Linkage to HIV medical care within any timeframe

This calculated indicator measures the extent to which newly identified HIV-positive persons are linked to HIV medical care. In order for a person to be considered linked to HIV medical care within any timeframe, the person must have attended the first medical care appointment, regardless of when the appointment occurred. Linkage to HIV medical care within any timeframe includes persons who are linked within 90 days of HIV diagnosis as well those who are linked after the 90-day period. For this report, the minimum percentage includes missing/invalid data in the denominator and includes all newly identified HIV-positive persons. The maximum percentage excludes missing/invalid data from the denominator.

Linkage to HIV medical care within 90 days

This calculated indicator measures the extent to which newly identified HIV-positive persons are linked to HIV medical care within 90 days of diagnosis. In order for a person to be considered linked to HIV medical care within 90 days, the person must have attended the first medical care appointment within 90 days, regardless of when the appointment occurred. Linkage to HIV medical care within 90 days includes persons who are linked within 90 days of HIV diagnosis and *does not include* those who are linked after the 90-day period. For this report, the minimum percentage includes missing/invalid data in the denominator and includes all newly identified HIV-positive persons. The maximum percentage excludes missing/invalid data from the denominator.

Referral to HIV prevention services

This calculated indicator measures the extent to which newly identified confirmed HIV-positive persons were provided with a referral to HIV prevention services. For this report, the minimum percentage includes missing/invalid data in the denominator and includes all newly identified confirmed HIV-positive persons. The maximum percentage excludes missing/invalid data from the denominator.

Target population

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). Data to identify target populations are required to be collected for all testing events conducted in non-healthcare settings, but are only required for HIV-positive persons from healthcare settings. 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 and report injection drug use: includes males who reported both male-to-male sexual contact and injection drug use in the past 12 months

- Men who have sex with men: includes males who reported male-to-male sexual contact in the past 12 months
- Transgender persons who report injection drug use: 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
- Injection drug use: 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.

APPENDIX B: DATA SOURCES – CATEGORIES A AND B

PS12-1201 Programmatic Components	PS12-1201 Required or Recommended Component	Number of HDs reporting data		Data Source(s)
		2012	2013	
HIV testing	Required	Category A: 59 HDs Category B: 34 HDs	Category A: 61 HDs Category B: 34 HDs	NHM&E HIV testing data submitted through EvaluationWeb® as of September 15, 2014 (reported at a test-event-level) Comprehensive Prevention Plans (received by PPB)
HIV testing annual objectives		Category A: 61 HDs Category B: 34 HDs	Category A: 61 HDs Category B: 34 HDs	
Linkage to HIV medical care	Required	Category A: 59 HDs Category B: 34 HDs	Category A: 61 HDs Category B: 34 HDs	NHM&E HIV testing data submitted through EvaluationWeb® as of September 15, 2014 (reported at a test-event-level)
Linkage to or re-engagement in HIV medical care and treatment services	Required	15	21	NHM&E RRA aggregate-level data submitted through EvaluationWeb® as of September 15, 2014
Linkage to treatment adherence services	Required	11	18	NHM&E RRA aggregate-level data submitted through EvaluationWeb® as of September 15, 2014
Interview for partner services, PS12-1201	Required	Category A: 59 HDs Category B: 34 HDs	Category A: 61 HDs Category B: 34 HDs	NHM&E HIV testing data submitted through EvaluationWeb® as of September 15, 2014 (reported at a test-event-level)
Partner services, all funding sources	All CDC and non-CDC funded tests	Data unavailable for analysis	55 HDs	Partner services aggregate-level and client-level data submitted through EvaluationWeb® as of September 15, 2014
Referral to HIV prevention services	Required	Category A: 59 HDs Category B: 34 HDs	Category A: 61 HDs Category B: 34 HDs	NHM&E HIV testing data submitted through EvaluationWeb® as of September 15, 2014 (reported at a test-event-level)
Service integration (for Category B)	Optional	7	6	2012 and 2013 APRs (received by PPB)
CDC-recommended risk-reduction interventions for HIV-positive persons	Required	32	40	NHM&E client-level RRA data submitted through EvaluationWeb® as of September 15, 2014

PS12-1201 Programmatic Components	PS12-1201 Required or Recommended Component	Number of HDs reporting data		Data Source(s)
		2012	2013	
Perinatal transmission	Required	Not addressed in this report		
Condom distribution	Required	59	59	2012 and 2013 APRs (received by PPB)
Condom distribution proposed objectives		59	59	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	31	41	NHM&E client-level RRA data submitted through EvaluationWeb® as of September 15, 2014
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: FINDINGS

Appendix C1. PS12-1201 Category A and B - Percentage of annual HIV test objective achieved, 2012 - 2013

Year	Category A (HDs = 61)			Category B - Healthcare settings (HDs = 34)			Category B - Non-healthcare settings (2012: HDs = 14; 2013: HDs = 15)		
	Annual objective, HIV testing events ^a	Total number of HIV testing events ^b	Percent of annual HIV testing objective achieved	Annual objective, HIV testing events ^a	Total number of HIV testing events ^b	Percent of annual HIV testing objective achieved	Annual objective, HIV testing events ^a	Total number of HIV testing events ^b	Percent of annual HIV testing objective achieved
2012	2,165,965	1,946,079	89.8	1,490,236	966,174	64.8	83,348	144,587	173.5
2013	2,201,864	1,805,615	82.0	1,444,122	1,095,179	75.8	90,071	125,013	138.8

Data Source: NHM&E HIV testing data submitted through EvaluationWeb[®] as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

^aAnnual testing objectives are set by the health departments in the Comprehensive Program Plan submitted to CDC for 2012 and 2013.

^bTotal number of HIV testing events includes aggregate-tests and client-level data reported to CDC through EvaluationWeb[®] as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

Appendix C2. PS12-1201 Category A and B - Number of HIV testing events and newly identified HIV positivity, 2012 - 2013

Year	Healthcare settings			Non-Healthcare settings		
	Total number of HIV testing events (denominator)	Newly identified HIV-positive testing events (numerator)	Percent of newly identified HIV-positive testing events	Total number of HIV testing events (denominator)	Newly identified HIV-positive testing events (numerator)	Percent of newly identified HIV-positive testing events
Category A: Healthcare settings: $\geq 0.1\%$			Category A: Non-healthcare settings: $\geq 1.0\%$			
2012 (health departments = 59) ^a	1,292,434	5,890	0.5	652,373	4,542	0.7
2013 (health departments = 61)	1,156,478	6,496	0.6	598,308	4,702	0.8
Category B: Healthcare settings: $\geq 0.1\%$			Category B: Non-healthcare settings: $\geq 2.0\%$			
2012 ^b	966,174	3,722	0.4	144,587	1,047	0.7
2013 ^c	1,095,179	3,163	0.3	125,013	796	0.6

Data Source: NHM&E HIV test-event-level data submitted through EvaluationWeb[®] as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

The numbers shown in this table include only the HIV testing records that could be categorized into healthcare setting or non-healthcare setting.

^aIn 2012, two health departments did not submit HIV test-event-level data. Therefore, only 59 health departments are included in the analysis.

^bIn 2012, under Category B, 34 health departments in healthcare settings and 14 health departments in non-healthcare settings were funded to conduct HIV testing.

^cIn 2013, under Category B, 34 health departments in healthcare settings and 15 health departments in non-healthcare settings were funded to conduct HIV testing.

Appendix C3. PS12-1201 Category A - Healthcare and Non-Healthcare Settings: Newly identified HIV-positive persons, by demographic characteristics and target population, 2012 - 2013

Characteristics	HIV testing events				HIV testing events			
	2012 (HDs = 59) ^a				2013 (HDs = 61)			
	All testing events	Newly identified HIV-positive events			All testing events	Newly identified HIV-positive events		
		n	(row%)	(col%)		n	(row%)	(col%)
Age at test (years)								
<13	2,590	11	0.4	0.1	2,855	6	0.2	0.1
13-19	204,371	373	0.2	3.6	170,465	395	0.2	3.5
20-29	863,762	4,185	0.5	40.1	792,870	4,570	0.6	40.1
30-39	430,202	2,568	0.6	24.6	412,345	2,719	0.7	23.9
40-49	246,608	1,956	0.8	18.7	230,955	1,926	0.8	16.9
50+	188,999	1,320	0.7	12.6	190,447	1,507	0.8	13.2
Missing/invalid	9,547	25	0.3	0.2	5,678	264	4.6	2.3
Gender								
Male	899,215	8,288	0.9	79.4	906,958	9,224	1.0	81.0
Female	1,030,791	1,968	0.2	18.9	881,846	1,981	0.2	17.4
Transgender	7,340	133	1.8	1.3	7,832	138	1.8	1.2
Other	13	0	0.0	0.0	0	0	0.0	0.0
Declined/not asked	1,918	3	0.2	0.05	5,105	20	0.4	0.2
Missing/invalid	6,802	46	0.7	0.4	3,874	24	0.6	0.2
Race/Ethnicity								
White	616,444	2,407	0.4	23.1	553,035	2,503	0.5	22.0
Black or African American	826,355	5,122	0.6	49.1	794,405	6,020	0.8	52.9
Hispanic or Latino	360,268	2,172	0.6	20.8	340,076	2,143	0.6	18.8
Asian	35,985	154	0.4	1.5	37,210	167	0.4	1.5
American Indian or Alaska Native	12,033	58	0.5	0.6	10,664	45	0.4	0.4
Native Hawaiian or Pacific Islander	5,410	31	0.6	0.3	5,758	28	0.5	0.2
Multi-race	17,378	109	0.6	1.0	17,804	185	1.0	1.6

Characteristics	HIV testing events				HIV testing events			
	2012 (HDs = 59) ^a				2013 (HDs = 61)			
	All testing events	Newly identified HIV-positive events			All testing events	Newly identified HIV-positive events		
		n	(row%)	(col%)		n	(row%)	(col%)
Declined	37,456	180	0.5	1.7	7,908	40	0.5	0.4
Don't know/not asked	27,837	180	0.6	1.7	36,185	189	0.5	1.7
Missing/invalid	6,913	25	0.4	0.2	2,570	67	2.6	0.6
Region								
Northeast	310,258	1,367	0.4	13.1	307,753	1,443	0.5	12.7
Midwest	228,677	1,132	0.5	10.8	286,230	1,421	0.5	12.5
South	1,162,415	5,665	0.5	54.3	945,363	6,328	0.7	55.6
West	220,593	1,858	0.8	17.8	241,240	1,929	0.8	16.9
U.S. dependent areas	24,136	416	1.7	4.0	25,029	266	1.1	2.3
Target Population								
Men who have Sex with Men/Injection Drug Users (MSM/IDU)	5,111	177	3.5	1.7	5,819	258	4.4	2.3
MSM	171,258	4,793	2.8	45.9	177,574	5,442	3.1	47.8
Transgender persons/IDU	429	12	2.8	0.1	435	4	0.9	< 0.05
Transgender persons	6,911	121	1.8	1.2	7,397	134	1.8	1.2
IDU	61,522	273	0.4	2.6	64,229	235	0.4	2.1
Heterosexual men	450,474	1,705	0.4	16.3	396,751	1,700	0.4	14.9
Heterosexual women	702,371	1,414	0.2	13.5	558,530	1,470	0.3	12.9
No risk/missing/invalid	548,003	1,943	0.4	18.6	594,880	2,144	0.4	18.8
Total	1,946,079	10,438	0.5		1,805,615	11,387	0.6	

Data Source: NHM&E HIV test-event-level data submitted through EvaluationWeb®, as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

^aIn 2012, two health departments did not submit HIV test-event-level data and are not included in the analysis.

Appendix C4. PS12-1201 Category B - Healthcare and Non-Healthcare Settings: Newly identified HIV-positive persons, by demographic characteristics and target population, 2012 - 2013

Characteristics	HIV testing events				HIV testing events			
	2012 (HDs = 34)				2013 (HDs = 34)			
	All testing events	Newly identified HIV-positive persons			All testing events	Newly identified HIV-positive persons		
		n	(row%)	(col%)		n	(row%)	(col%)
Age at test (years)								
<13	2,428	7	0.3	0.1	2,579	17	0.7	0.4
13-19	90,336	174	0.2	3.4	101,647	141	0.1	3.1
20-29	443,388	1,903	0.4	36.9	518,743	1,638	0.3	35.5
30-39	273,462	1,212	0.4	23.5	318,612	1,066	0.3	23.1
40-49	201,190	1,018	0.5	19.7	213,647	923	0.4	20.0
50+	221,118	822	0.4	15.9	250,726	777	0.3	16.8
Missing/invalid	9,549	24	0.3	0.5	19,381	53	0.3	1.1
Gender								
Male	618,118	3,958	0.6	76.7	650,659	3,519	0.5	76.3
Female	616,394	1,140	0.2	22.1	769,174	1,040	0.1	22.5
Transgender	3,474	45	1.3	0.9	1,969	47	2.4	1.0
Other	2	0	0.0	0.0	0	0	0.0	0.0
Declined/not asked	466	5	1.1	0.1	1,209	3	0.2	0.1
Missing/invalid	3,017	12	0.4	0.2	2,324	6	0.3	0.1
Race/Ethnicity								
White	258,421	883	0.3	17.1	322,886	735	0.2	15.9
Black or African American	568,530	2,993	0.5	58.0	661,852	2,802	0.4	60.7
Hispanic or Latino	305,432	1,026	0.3	19.9	345,142	871	0.3	18.9
Asian	24,276	59	0.2	1.1	26,268	50	0.2	1.1
American Indian or Alaska Native	3,871	20	0.5	0.4	4,955	8	0.2	0.2
Native Hawaiian or Pacific Islander	2,380	8	0.3	0.2	2,257	6	0.3	0.1

Characteristics	HIV testing events				HIV testing events			
	2012 (HDs = 34)				2013 (HDs = 34)			
	All testing events	Newly identified HIV-positive persons			All testing events	Newly identified HIV-positive persons		
		n	(row%)	(col%)		n	(row%)	(col%)
Multi-race	3,865	25	0.6	0.5	3,522	28	0.8	0.6
Declined	14,479	6	<0.05	0.1	8,591	14	0.2	0.3
Don't know/not asked	58,102	127	0.2	2.5	39,223	86	0.2	1.9
Missing/invalid	2,115	13	0.6	0.3	10,639	15	0.1	0.3
Region								
Northeast	301,508	882	0.3	17.1	255,244	794	0.3	17.2
Midwest	77,430	280	0.4	5.4	84,188	183	0.2	4.0
South	727,817	3,566	0.5	69.1	908,670	3,293	0.4	71.4
West	127,561	405	0.3	7.8	167,349	327	0.2	7.1
U.S. dependent areas	7,155	27	0.4	0.5	9,884	18	0.2	0.4
Target Population								
Men who have Sex with Men/Injection Drug Use (MSM/IDU)	765	42	5.5	0.8	759	36	4.7	0.8
MSM	40,849	1,699	4.2	32.9	39,151	1,276	3.3	27.6
Transgender persons/IDU	38	2	5.3	< 0.05	37	4	10.8	0.1
Transgender persons	3,436	43	1.3	0.8	1,932	43	2.2	0.9
IDU	10,957	74	0.7	1.4	13,331	73	0.5	1.6
Heterosexual men	138,931	709	0.5	13.7	148,476	644	0.4	14.0
Heterosexual women	149,571	617	0.4	12.0	241,696	547	0.2	11.9
No risk/missing/invalid	896,924	1,974	0.2	38.3	979,953	1,992	0.2	43.2
Total	1,241,471	5,160	0.4		1,425,335	4,615	0.3	

Data Source: NHM&E HIV test-event-level data submitted through EvaluationWeb® as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

Appendix C5. PS12-1201 Category A - Healthcare and Non-Healthcare Settings: Newly identified HIV-positive persons linked to HIV medical care, by demographic characteristics and target population, 2012 - 2013

Characteristics	Linkage to HIV medical care - 2012 (HDs = 59) ^a						Linkage to HIV medical care - 2013 (HDs = 61)					
	Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^b		Percent of newly identified HIV positive persons linked to HIV medical care		Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^b		Percent of newly identified HIV positive persons linked to HIV medical care	
	Linked to HIV medical care ^c	Not linked to HIV medical care	n	%	Min ^d	Max ^e	Linked to HIV medical care ^c	Not linked to HIV medical care	n	%	Min ^d	Max ^e
Age at test (years)												
<13	2	4	5	45.5	18.2	33.3	2	2	2	33.3	33.3	50.0
13-19	164	90	119	31.9	44.0	64.6	206	65	124	31.4	52.2	76.0
20-29	2,059	1,038	1,088	26.0	49.2	66.5	2,726	740	1,104	24.2	59.6	78.6
30-39	1,358	604	606	23.6	52.9	69.2	1,637	449	633	23.3	60.2	78.5
40-49	954	532	470	24.0	48.8	64.2	1,120	340	466	24.2	58.2	76.7
50+	636	399	285	21.6	48.2	61.4	855	291	361	24.0	56.7	74.6
Missing/invalid	11	9	5	20.0	44.0	55.0	167	29	68	25.8	63.3	85.2
Gender												
Male	4,202	2,156	1,930	23.3	50.7	66.1	5,554	1,572	2,098	22.7	60.2	77.9
Female	902	486	580	29.5	45.8	65.0	1,066	318	597	30.1	53.8	77.0
Transgender	71	28	34	25.6	53.4	71.7	79	24	35	25.4	57.2	76.7
Declined/not asked	1	2	0	0.0	33.3	33.3	13	2	5	25.0	65.0	86.7
Missing/invalid	8	4	34	73.9	17.4	66.7	1	0	23	95.8	4.2	100.0
Race/Ethnicity												
White	1,214	667	526	21.9	50.4	64.5	1,574	390	539	21.5	62.9	80.1
Black or African American	2,156	1,366	1,600	31.2	42.1	61.2	3,164	1,120	1,736	28.8	52.6	73.9
Hispanic or Latino	1,477	383	312	14.4	68.0	79.4	1,548	258	337	15.7	72.2	85.7
Asian	84	36	34	22.1	54.5	70.0	104	31	32	19.2	62.3	77.0

Characteristics	Linkage to HIV medical care - 2012 (HDs = 59) ^a						Linkage to HIV medical care - 2013 (HDs = 61)					
	Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^b		Percent of newly identified HIV positive persons linked to HIV medical care		Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^b		Percent of newly identified HIV positive persons linked to HIV medical care	
	Linked to HIV medical care ^c	Not linked to HIV medical care	n	%	Min ^d	Max ^e	Linked to HIV medical care ^c	Not linked to HIV medical care	n	%	Min ^d	Max ^e
American Indian or Alaska Native	21	25	12	20.7	36.2	45.7	23	9	13	28.9	51.1	71.9
Native Hawaiian or Pacific Islander	20	7	4	12.9	64.5	74.1	17	6	5	17.9	60.7	73.9
Multi-race	62	31	16	14.7	56.9	66.7	128	29	28	15.1	69.2	81.5
Declined	109	57	14	7.8	60.6	65.7	26	5	9	22.5	65.0	83.9
Don't know/not asked	41	104	35	19.4	22.8	28.3	84	55	50	26.5	44.4	60.4
Missing/invalid	0	0	25	100.0	0.0	0.0	45	13	9	13.4	67.2	77.6
Region												
Northeast	797	329	241	17.6	58.3	70.8	988	235	220	15.2	68.5	80.8
Midwest	572	233	327	28.9	50.5	71.1	678	177	566	39.8	47.7	79.3
South	2,245	1,689	1,731	30.6	39.6	57.1	3,454	1,152	1,722	27.2	54.6	75.0
West	1,204	393	261	14.0	64.8	75.4	1,346	339	244	12.6	69.8	79.9
U.S. dependent areas	366	32	18	4.3	88.0	92.0	247	13	6	2.3	92.9	95.0
Target Population												
Men who have Sex with Men/Injection Drug Users (MSM/IDU)	100	44	33	18.6	56.5	69.4	174	43	41	15.9	67.4	80.2
MSM	2,763	1,066	964	20.1	57.6	72.2	3,692	862	888	16.3	67.8	81.1
Transgender persons/IDU	6	1	5	41.7	50.0	85.7	3	1	0	0.0	75.0	75.0
Transgender persons	65	27	29	24.0	53.7	70.7	76	23	35	26.1	56.7	76.8
IDU	91	103	79	28.9	33.3	46.9	134	48	53	22.6	57.0	73.6
Heterosexual men	778	440	487	28.6	45.6	63.9	895	350	455	26.8	52.6	71.9

Characteristics	Linkage to HIV medical care - 2012 (HDs = 59) ^a						Linkage to HIV medical care - 2013 (HDs = 61)					
	Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^b		Percent of newly identified HIV positive persons linked to HIV medical care		Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^b		Percent of newly identified HIV positive persons linked to HIV medical care	
	Linked to HIV medical care ^c	Not linked to HIV medical care	n	%	Min ^d	Max ^e	Linked to HIV medical care ^c	Not linked to HIV medical care	n	%	Min ^d	Max ^e
Heterosexual women	721	300	393	27.8	51.0	70.6	833	237	400	27.2	56.7	77.9
No risk/missing/invalid	660	695	588	30.3	34.0	48.7	906	352	886	41.3	42.3	72.0
Total	5,184	2,676	2,578	24.7	49.7	66.0	6,713	1,916	2,758	24.2	59.0	77.8

Data Source: NHM&E HIV test-event-level data submitted through EvaluationWeb[®] as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

Note: The linkage to HIV medical care includes persons who are linked within 90 days as well those who are linked after the 90-day period.

^aIn 2012, two health departments did not submit HIV test-event-level data and are not included in the analysis.

^bRecords of clients with missing/invalid information on referral to HIV medical care or records of clients who were referred to HIV medical care, but attendance at their first appointment is don't know' or missing/invalid.

^cNumber of newly identified HIV positive testing events with valid information on attending first appointment.

^dMinimum percent of new positives linked to HIV medical care includes missing/invalid HIV test records in the denominator.

^eMaximum percent of new positives linked to HIV medical care excludes missing/invalid HIV test records from the denominator.

Appendix C6. PS 2-1201 Category B - Healthcare and Non-Healthcare Settings: Newly identified HIV-positive persons linked to HIV medical care, by demographic characteristics and target population, 2012 - 2013

Characteristics	Linkage to HIV medical care - 2012 (HDs = 34)						Linkage to HIV medical care - 2013 (HD = 34)					
	Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^a		Percent of newly identified HIV positive persons linked to HIV medical care		Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^a		Percent of newly identified HIV positive persons linked to HIV medical care	
	Linked to HIV medical care ^b	Not linked to HIV medical care	n	%	Min ^c	Max ^d	Linked to HIV medical care ^b	Not linked to HIV medical care	n	%	Min ^c	Max ^d
Age at test (years)												
<13	4	1	2	28.6	57.1	80.0	6	7	4	23.5	35.3	46.2
13-19	93	35	46	26.4	53.4	72.7	77	25	39	27.7	54.6	75.5
20-29	1,017	442	444	23.3	53.4	69.7	909	264	465	28.4	55.5	77.5
30-39	664	304	244	20.1	54.8	68.6	626	163	277	26.0	58.7	79.3
40-49	556	223	239	23.5	54.6	71.4	520	161	242	26.2	56.3	76.4
50+	436	212	174	21.2	53.0	67.3	458	125	194	25.0	58.9	78.6
Missing/invalid	13	5	6	25.0	54.2	72.2	33	11	9	17.0	62.3	75.0
Gender												
Male	2,166	915	877	22.2	54.7	70.3	2,042	560	917	26.1	58.0	78.5
Female	582	292	266	23.3	51.1	66.6	560	185	295	28.4	53.8	75.2
Transgender	24	9	12	26.7	53.3	72.7	25	10	12	25.5	53.2	71.4
Declined/not asked	4	1	0	0.0	80.0	80.0	1	1	1	33.3	33.3	50.0
Missing/invalid	7	5	0	0.0	58.3	58.3	1	0	5	83.3	16.7	100.0
Race/Ethnicity												
White	501	179	203	23.0	56.7	73.7	436	107	192	26.1	59.3	80.3
Black or African American	1,588	777	628	21.0	53.1	67.1	1,497	501	804	28.7	53.4	74.9
Hispanic or Latino	578	219	229	22.3	56.3	72.5	595	109	167	19.2	68.3	84.5
Asian	35	17	7	11.9	59.3	67.3	32	6	12	24.0	64.0	84.2

Characteristics	Linkage to HIV medical care - 2012 (HDs = 34)						Linkage to HIV medical care - 2013 (HD = 34)					
	Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^a		Percent of newly identified HIV positive persons linked to HIV medical care		Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^a		Percent of newly identified HIV positive persons linked to HIV medical care	
	Linked to HIV medical care ^b	Not linked to HIV medical care	n	%	Min ^c	Max ^d	Linked to HIV medical care ^b	Not linked to HIV medical care	n	%	Min ^c	Max ^d
American Indian or Alaska Native	7	4	9	45.0	35.0	63.6	0	1	7	87.5	0.0	0.0
Native Hawaiian or Pacific Islander	3	1	4	50.0	37.5	75.0	2	1	3	50.0	33.3	66.7
Multi-race	17	3	5	20.0	68.0	85.0	16	4	8	28.6	57.1	80.0
Declined	3	2	1	16.7	50.0	60.0	6	8	0	0.0	42.9	42.9
Don't know/not asked	51	20	56	44.1	40.2	71.8	45	19	22	25.6	52.3	70.3
Missing/invalid	0	0	13	100.0	0.0	0.0	0	0	15	100.0	0.0	0.0
Region												
Northeast	534	181	167	18.9	60.5	74.7	488	142	164	20.7	61.5	77.5
Midwest	129	30	121	43.2	46.1	81.1	66	11	106	57.9	36.1	85.7
South	1,845	983	738	20.7	51.7	65.2	1,802	568	923	28.0	54.7	76.0
West	259	18	128	31.6	64.0	93.5	265	27	35	10.7	81.0	90.8
U.S. dependent areas	16	10	1	3.7	59.3	61.5	8	8	2	11.1	44.4	50.0
Target Population												
Men who have Sex with Men/Injection Drug Users (MSM/IDU)	33	5	4	9.5	78.6	86.8	26	5	5	13.9	72.2	83.9
MSM	1,027	336	336	19.8	60.4	75.3	779	183	314	24.6	61.1	81.0
Transgender persons/IDU	1	1	0	0.0	50.0	50.0	1	1	2	50.0	25.0	50.0
Transgender persons	23	8	12	27.9	53.5	74.2	24	9	10	23.3	55.8	72.7
IDU	43	20	11	14.9	58.1	68.3	35	18	20	27.4	47.9	66.0

Characteristics	Linkage to HIV medical care - 2012 (HDs = 34)						Linkage to HIV medical care - 2013 (HD = 34)					
	Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^a		Percent of newly identified HIV positive persons linked to HIV medical care		Newly identified HIV positive persons		Records missing valid information on linkage to HIV medical care ^a		Percent of newly identified HIV positive persons linked to HIV medical care	
	Linked to HIV medical care ^b	Not linked to HIV medical care	n	%	Min ^c	Max ^d	Linked to HIV medical care ^b	Not linked to HIV medical care	n	%	Min ^c	Max ^d
Heterosexual men	419	161	129	18.2	59.1	72.2	363	105	176	27.3	56.4	77.6
Heterosexual women	360	153	104	16.9	58.3	70.2	323	87	137	25.0	59.0	78.8
No risk/missing/invalid	877	538	559	28.3	44.4	62.0	1,078	348	566	28.4	54.1	75.6
Total	2,783	1,222	1,155	22.4	53.9	69.5	2,629	756	1,230	26.7	57.0	77.7

Data Source: : NHM&E HIV test-event-level data submitted through EvaluationWeb[®] as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

Note: The linkage to HIV medical care includes persons who are linked within 90 days as well those who are linked after the 90-day period.

^aRecords of clients with missing/invalid information on referral to HIV medical care or records of clients who are referred to HIV medical care, but attendance at their first appointment is don't know' or missing/invalid.

^bNumber of newly identified HIV positive testing events with valid information on attending first appointment.

^cMinimum percent of new positives linked to HIV medical care includes missing/invalid HIV test records in the denominator.

^dMaximum percent of new positives linked to HIV medical care excludes missing/invalid HIV test records from the denominator.

Appendix C7. PS12-1201 Category A - Previously identified HIV-positive persons linked to or re-engaged in HIV medical care and treatment services, 2012 - 2013

Year	Total	Target Population					Race/Ethnicity		
		MSM	IDU	MSM/IDU	High-risk heterosexual	Other/unknown risk	Black/African American	Hispanic/Latino	Other/unknown ^a
2012 (HDs = 15)	2,453	275 (11.2%)	35 (1.4%)	12 (0.5%)	259 (10.6%)	1,872 (76.3%)	454 (18.5%)	337 (13.7%)	1,662 (67.8%)
2013 (HDs = 21)	9,251	772 (8.3%)	51 (0.6%)	33 (0.4%)	393 (4.2%)	8,002 (86.5%)	947 (10.2%)	193 (2.1%)	8,111 (87.7%)

Data Source: NHM&E RRA aggregate-level data submitted through EvaluationWeb[®] as of September 15, 2014 for project period January 1, 2012 - December 31, 2013.

^aOther/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.

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.

Appendix C8. PS12-1201 Category A - Linkage to treatment adherence services, 2012 - 2013

Year	Total	Target Population					Race/Ethnicity		
		MSM	IDU	MSM/IDU	High-risk heterosexual	Other/unknown risk	Black/African American	Hispanic/Latino	Other/unknown ^a
2012 (HDs = 11)	5,779	2,018 (34.9%)	151 (2.6%)	74 (1.3%)	1,771 (30.6%)	1,765 (30.5%)	2,750 (47.6%)	443 (7.7%)	2,586 (44.7%)
2013 (HDs = 18)	11,663	2,185 (18.7%)	157 (1.3%)	103 (0.9%)	1,435 (12.3%)	7,783 (66.7%)	1,817 (15.6%)	869 (7.5%)	8,977 (77.0%)

Data Source: NHM&E RRA aggregate-level data submitted through EvaluationWeb[®] as of September 15, 2014 for project period January 1, 2012 - December 31, 2013.

^aOther/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.

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.

Appendix C9. PS12-1201 Category A - Healthcare and Non-Healthcare Settings: Newly identified confirmed HIV-positive persons interviewed for partner services, by demographic characteristics and target population, 2012 - 2013

Characteristics	Interviewed for partner services - 2012 (HDs = 59) ^a						Interviewed for Partner Services - 2013 (HDs = 61)					
	Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^b		Percent of newly identified confirmed HIV positive persons interviewed for partner services		Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^b		Percent of newly identified confirmed HIV positive persons interviewed for partner services	
	Interviewed for partner services ^c	Not interviewed for partner services	n	%	Min ^d	Max ^e	Interviewed for partner services ^c	Not interviewed for partner services	n	%	Min ^d	Max ^e
Age at test (years)												
<13	2	4	5	45.5	18.2	33.3	3	2	1	16.7	50.0	60.0
13-19	145	67	161	43.2	38.9	68.4	208	37	150	38.0	52.7	84.9
20-29	1,618	813	1,754	41.9	38.7	66.6	2,513	629	1,428	31.2	55.0	80.0
30-39	919	601	1,048	40.8	35.8	60.5	1,496	427	796	29.3	55.0	77.8
40-49	674	539	743	38.0	34.5	55.6	1,056	378	492	25.5	54.8	73.6
50+	471	421	428	32.4	35.7	52.8	818	314	375	24.9	54.3	72.3
Missing/invalid	14	4	7	28.0	56.0	77.8	210	22	32	12.1	79.5	90.5
Gender												
Male	3,100	1,919	3,269	39.4	37.4	61.8	5,175	1,481	2,568	27.8	56.1	77.7
Female	706	496	766	38.9	35.9	58.7	1,037	301	643	32.5	52.3	77.5
Transgender	26	31	76	57.1	19.5	45.6	76	24	38	27.5	55.1	76.0
Declined/not asked	0	2	1	33.3	0.0	0.0	15	3	2	10.0	75.0	83.3
Missing/invalid	11	1	34	73.9	23.9	91.7	1	0	23	95.8	4.2	100.0
Race/Ethnicity												
White	918	594	895	37.2	38.1	60.7	1,437	394	672	26.8	57.4	78.5
Black or African American	1,760	1,166	2,196	42.9	34.4	60.2	3,010	925	2,085	34.6	50.0	76.5
Hispanic or Latino	1,002	436	734	33.8	46.1	69.7	1,443	349	351	16.4	67.3	80.5

Characteristics	Interviewed for partner services - 2012 (HDs = 59) ^a						Interviewed for Partner Services - 2013 (HDs = 61)					
	Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^b		Percent of newly identified confirmed HIV positive persons interviewed for partner services		Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^b		Percent of newly identified confirmed HIV positive persons interviewed for partner services	
	Interviewed for partner services ^c	Not interviewed for partner services	n	%	Min ^d	Max ^e	Interviewed for partner services ^c	Not interviewed for partner services	n	%	Min ^d	Max ^e
Asian	39	45	70	45.5	25.3	46.4	97	39	31	18.6	58.1	71.3
American Indian or Alaska Native	20	18	20	34.5	34.5	52.6	25	4	16	35.6	55.6	86.2
Native Hawaiian or Pacific Islander	12	3	16	51.6	38.7	80.0	17	8	3	10.7	60.7	68.0
Multi-race	52	24	33	30.3	47.7	68.4	122	25	38	20.5	65.9	83.0
Declined	12	59	109	60.6	6.7	16.9	32	6	2	5.0	80.0	84.2
Don't know/not asked	28	104	48	26.7	15.6	21.2	69	56	64	33.9	36.5	55.2
Missing/invalid	0	0	25	100.0	0.0	0.0	52	3	12	17.9	77.6	94.5
Region												
Northeast	289	593	485	35.5	21.1	32.8	870	246	327	22.7	60.3	78.0
Midwest	582	153	397	35.1	51.4	79.2	670	192	559	39.3	47.1	77.7
South	1,995	1,274	2,396	42.3	35.2	61.0	3,206	793	2,329	36.8	50.7	80.2
West	589	406	863	46.4	31.7	59.2	1,309	567	53	2.7	67.9	69.8
U.S. dependent areas	388	23	5	1.2	93.3	94.4	249	11	6	2.3	93.6	95.8
Target Population												
Men who have Sex with Men/Injection Drug Users (MSM/IDU)	65	47	65	36.7	36.7	58.0	161	50	47	18.2	62.4	76.3
MSM	2,138	941	1,714	35.8	44.6	69.4	3,596	840	1,006	18.5	66.1	81.1
Transgender persons/IDU	0	2	10	83.3	0.0	0.0	3	1	0	0.0	75.0	75.0
Transgender persons	26	29	66	54.5	21.5	47.3	73	23	38	28.4	54.5	76.0

Characteristics	Interviewed for partner services - 2012 (HDs = 59) ^a						Interviewed for Partner Services - 2013 (HDs = 61)					
	Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^b		Percent of newly identified confirmed HIV positive persons interviewed for partner services		Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^b		Percent of newly identified confirmed HIV positive persons interviewed for partner services	
	Interviewed for partner services ^c	Not interviewed for partner services	n	%	Min ^d	Max ^e	Interviewed for partner services ^c	Not interviewed for partner services	n	%	Min ^d	Max ^e
IDU	69	106	98	35.9	25.3	39.4	132	48	55	23.4	56.2	73.3
Heterosexual men	615	388	702	41.2	36.1	61.3	918	285	497	29.2	54.0	76.3
Heterosexual women	570	308	536	37.9	40.3	64.9	835	215	420	28.6	56.8	79.5
No risk/missing/invalid	360	628	955	49.2	18.5	36.4	586	347	1,211	56.5	27.3	62.8
Total	3,843	2,449	4,146	39.7	36.8	61.1	6,304	1,809	3,274	28.8	55.4	77.7

Data Source: NHM&E HIV test-event-level data submitted through EvaluationWeb[®] as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

^aIn 2012, two health departments did not submit HIV test-event-level data and are not included in the analysis.

^bRecords of clients with missing/invalid information on referral to partner services or records of clients who are referred to partner services, but information on interview for partner services was indicated as 'don't know' or missing/invalid.

^cNumber of newly identified confirmed HIV positive testing events with valid information on interviewed for partner services.

^dMinimum percent of new confirmed positives interviewed for partner services includes missing/invalid HIV test records in the denominator.

^eMaximum percent of new confirmed positives interviewed for partner services excludes missing/invalid HIV test records from the denominator.

Appendix C10. PS12-1201 Category B - Healthcare and Non-Healthcare Settings: Newly identified confirmed HIV-positive persons interviewed for partner services, by demographic characteristics and target population, 2012 - 2013

Characteristics	Interviewed for partner services - 2012 (HDs = 34)						Interviewed for partner services - 2013 (HDs = 34)					
	Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^a		Percent of newly identified confirmed HIV positive persons interviewed for partner services		Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^a		Percent of newly identified confirmed HIV positive persons interviewed for partner services	
	Interviewed for partner services ^b	Not interviewed for partner services	n	%	Min ^c	Max ^d	Interviewed for partner services ^b	Not interviewed for partner services	n	%	Min ^c	Max ^d
Age at test (years)												
<13	2	4	1	14.3	28.6	33.3	3	11	3	17.6	17.6	21.4
13-19	59	30	85	48.9	33.9	66.3	55	28	58	41.1	39.0	66.3
20-29	593	293	1,017	53.4	31.2	66.9	719	259	660	40.3	43.9	73.5
30-39	376	217	619	51.1	31.0	63.4	474	158	434	40.7	44.5	75.0
40-49	319	194	505	49.6	31.3	62.2	369	184	370	40.1	40.0	66.7
50+	253	185	384	46.7	30.8	57.8	299	166	312	40.2	38.5	64.3
Missing/invalid	9	9	6	25.0	37.5	50.0	4	14	35	66.0	7.5	22.2
Gender												
Male	1,229	658	2,071	52.3	31.1	65.1	1,465	603	1,451	41.2	41.6	70.8
Female	355	255	530	46.5	31.1	58.2	434	205	401	38.6	41.7	67.9
Transgender	17	13	15	33.3	37.8	56.7	21	11	15	31.9	44.7	65.6
Declined/not asked	0	4	1	20.0	0.0	0.0	2	1	0	0.0	66.7	66.7
Missing/invalid	10	2	0	0.0	83.3	83.3	1	0	5	83.3	16.7	100.0
Race/Ethnicity												
White	260	118	505	57.2	29.4	68.8	295	141	299	40.7	40.1	67.7
Black or African American	1,006	615	1,372	45.8	33.6	62.1	1,128	504	1,170	41.8	40.3	69.1
Hispanic or Latino	301	152	573	55.8	29.3	66.4	430	107	334	38.3	49.4	80.1

Characteristics	Interviewed for partner services - 2012 (HDs = 34)						Interviewed for partner services - 2013 (HDs = 34)					
	Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^a		Percent of newly identified confirmed HIV positive persons interviewed for partner services		Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^a		Percent of newly identified confirmed HIV positive persons interviewed for partner services	
	Interviewed for partner services ^b	Not interviewed for partner services	n	%	Min ^c	Max ^d	Interviewed for partner services ^b	Not interviewed for partner services	n	%	Min ^c	Max ^d
Asian	7	13	39	66.1	11.9	35.0	24	10	16	32.0	48.0	70.6
American Indian or Alaska Native	6	4	10	50.0	30.0	60.0	0	1	7	87.5	0.0	0.0
Native Hawaiian or Pacific Islander	2	1	5	62.5	25.0	66.7	2	3	1	16.7	33.3	40.0
Multi-race	10	3	12	48.0	40.0	76.9	14	4	10	35.7	50.0	77.8
Declined	2	2	2	33.3	33.3	50.0	2	11	1	7.1	14.3	15.4
Don't know/not asked	17	24	86	67.7	13.4	41.5	28	39	19	22.1	32.6	41.8
Missing/invalid	0	0	13	100.0	0.0	0.0	0	0	15	100.0	0.0	0.0
Region												
Northeast	144	202	536	60.8	16.3	41.6	323	295	176	22.2	40.7	52.3
Midwest	60	27	193	68.9	21.4	69.0	83	17	83	45.4	45.4	83.0
South	1,349	645	1,572	44.1	37.8	67.7	1,284	430	1,579	48.0	39.0	74.9
West	40	51	314	77.5	9.9	44.0	225	70	32	9.8	68.8	76.3
U.S. dependent areas	18	7	2	7.4	66.7	72.0	8	8	2	11.1	44.4	50.0
Target Population												
Men who have Sex with Men/Injection Drug Users (MSM/IDU)	17	13	12	28.6	40.5	56.7	20	7	9	25.0	55.6	74.1
MSM	732	306	661	38.9	43.1	70.5	750	224	302	23.7	58.8	77.0
Transgender persons/IDU	1	1	0	0.0	50.0	50.0	3	0	1	25.0	75.0	100.0
Transgender persons	16	12	15	34.9	37.2	57.1	18	11	14	32.6	41.9	62.1

Characteristics	Interviewed for partner services - 2012 (HDs = 34)						Interviewed for partner services - 2013 (HDs = 34)					
	Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^a		Percent of newly identified confirmed HIV positive persons interviewed for partner services		Newly identified confirmed HIV positive persons		Records missing valid information on interviewed for partner services ^a		Percent of newly identified confirmed HIV positive persons interviewed for partner services	
	Interviewed for partner services ^b	Not interviewed for partner services	n	%	Min ^c	Max ^d	Interviewed for partner services ^b	Not interviewed for partner services	n	%	Min ^c	Max ^d
IDU	23	20	31	41.9	31.1	53.5	22	13	38	52.1	30.1	62.9
Heterosexual men	310	153	246	34.7	43.7	67.0	338	135	171	26.6	52.5	71.5
Heterosexual women	263	157	197	31.9	42.6	62.6	321	109	117	21.4	58.7	74.7
No risk/missing/invalid	249	270	1,455	73.7	12.6	48.0	451	321	1,220	61.2	22.6	58.4
Total	1,611	932	2,617	50.7	31.2	63.4	1,923	820	1,872	40.6	41.7	70.1

Data Source: NHM&E HIV test-event-level data submitted through EvaluationWeb[®] as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

^aRecords of clients with missing/invalid information on referral to partner services or records of clients who are referred to partner services, but information on interview for partner services was indicated as 'don't know' or missing/invalid.

^bNumber of newly identified confirmed HIV positive testing events with valid information on interviewed for partner services.

^cMinimum percent of new confirmed positives interviewed for partner services includes missing/invalid HIV test records in the denominator.

^dMaximum percent of new confirmed positives interviewed for partner services excludes missing/invalid HIV test records from the denominator.

Appendix C11. Partner services for index patients and named partners, 55 health departments in the United States, Puerto Rico, and the U.S. Virgin Islands, 2013

11A. Partner services for index patients

Index patients		
Index patients eligible for partner services and with valid enrollment information	Index patients interviewed for partner services	
	n	%
34,018	29,154	85.7

11B. Partner services for named partners

Partners												
Number of named partners	Number of named partners with valid notification info (denominator)	Number of named partners eligible for notification (numerator)	Percent of named partners notified of potential HIV exposure	Number of notifiable partners with valid notification info (denominator)	Number of partners notified of potential HIV exposure (numerator)	Percent of named partners notified of potential HIV exposure	Number of notified partners with valid HIV test info (denominator)	Number of notified partners tested for HIV (numerator)	Percent of notified partners tested for HIV	Number of partners tested for HIV with valid HIV test results and previous HIV status info (denominator)	Newly identified HIV-positive persons	
											n	%
28,617	26,918	24,379	90.6	23,711	19,152	80.8	14,932	11,755	78.7	10,106	2,314	22.9

Data Source: NHM&E Partner Services includes both aggregate-level submitted by the health departments during the data quality assurance calls and client-level data submitted through EvaluationWeb® as of September 15, 2014 for the project period January 1, 2013 - December 31, 2013.

All CDC-funded tests and non-CDC funded tests conducted at public and private settings are included in the analysis (are not restricted to PS12-1201 funded HIV tests).

Appendix C12. PS12-1201 Category A and B - Healthcare and Non-Healthcare: Newly identified confirmed HIV-positive persons referred to HIV prevention services, 2012 - 2013

Year	Number of new confirmed positives referred to prevention services ^a	Number of new confirmed positives not referred to prevention services	Number of records missing valid information on referral to prevention services ^b	Percent of records missing valid information on referral to prevention services	Minimum percent of new confirmed positives referred to prevention services ^c	Maximum percent of new confirmed positives referred to prevention services ^d
Category A: No FOA requirement						
2012 (HDs = 59)^e	4,924	1,797	2,436	26.6	53.8	73.3
2013 (HDs = 61)	6,103	1,463	2,347	23.7	61.6	80.7
Category B: ≥ 80%						
2012 (HDs = 34)	2,061	547	1,527	36.9	49.8	79.0
2013 (HDs = 34)	1,708	460	1,491	40.7	46.7	78.8

Data Source: NHM&E HIV test-event-level submitted through EvaluationWeb[®] as of September 15, 2014 for the project period January 1, 2012 - December 31, 2013.

^aNumber of newly identified confirmed HIV positive testing events with valid information on referral to prevention services.

^bRecords of clients with missing/invalid information on referral to partner services or records of clients who are referred to prevention services, but information on referred to prevention services was indicated as 'don't know' or missing/invalid.

^cMinimum percent of new confirmed positives referred to prevention services includes missing/invalid HIV test records in the denominator.

^dMaximum percent of new confirmed positives referred to prevention services excludes missing/invalid HIV test records from the denominator.

^eIn 2012, two health departments did not submit HIV test-event-level data and are not included in the analysis.

Appendix C13. PS12-1201 Category B - Service Integration: STD, Viral hepatitis, and TB tests conducted concurrently with HIV tests in healthcare and non-healthcare settings, 2012 - 2013

Year	Total	Hepatitis B virus	Hepatitis C virus	Tuberculosis	Syphilis	Gonorrhea	Chlamydia
2012 (HDs = 7)	149,101	18,158 (12.2%)	6,753 (4.5%)	10,866 (7.3%)	48,649 (32.6%)	38,445 (25.8%)	26,230 (17.6%)
2013 (HDs = 6)	168,313	16,017 (9.5%)	6,397 (3.8%)	10,150 (6.0%)	50,814 (30.2%)	46,346 (27.5%)	38,589 (22.9%)

Data Source: 2012 and 2013 APRs for the project period January 1, 2012 - December 31, 2013.

STD include syphilis, gonorrhea, and chlamydial infections.

Appendix C14. PS12-1201 Category A - HIV-positive persons enrolled in one or more evidence-based risk-reduction interventions, by race/ethnicity and target population, 2012 - 2013

Characteristics	2012 (HDs = 32)		2013 (HDs = 40)	
	n	%	n	%
Race/Ethnicity				
White	3,566	22.5	3,881	20.9
Black or African American	5,326	33.7	5,947	32.1
Hispanic or Latino	5,884	37.2	7,835	42.2
Asian	249	1.6	221	1.2
American Indian or Alaska Native	118	0.7	105	0.6
Native Hawaiian or Pacific Islander	50	0.3	53	0.3
Multi-race	261	1.7	205	1.1
Unknown race/ethnicity	362	2.3	303	1.6
Target Population				
Men who have Sex with Men/Injection Drug Use (MSM/IDU)	959	6.1	822	4.4
MSM	5,089	32.2	6,400	34.5
IDU	1,524	9.6	1,730	9.3
Transgender persons	766	4.8	641	3.5
Heterosexual	2,702	17.1	3,560	19.2
No risk/missing/invalid	4,776	30.2	5,397	29.1
Total	15,816		18,550	

Data Source: NHM&E client-level RRA data submitted through EvaluationWeb® as of September 15, 2014 for project period January 1, 2012 - December 31, 2013.

Appendix C15. PS12-1201 Category A - High-risk HIV-negative persons enrolled in one or more evidence-based HIV prevention interventions, by race/ethnicity and target population, 2012 - 2013

Characteristics	2012 (HDs = 31)		2013 (HDs = 41)	
	n	%	n	%
Race/Ethnicity				
White	10,450	30.1	9,509	30.8
Black or African American	10,729	30.9	10,192	33.0
Hispanic or Latino	11,323	32.6	9,383	30.4
Asian	758	2.2	555	1.8
American Indian or Alaska Native	287	0.8	245	0.8
Native Hawaiian or Pacific Islander	78	0.2	57	0.2
Multi-race	487	1.4	459	1.5
Unknown race/ethnicity	637	1.8	499	1.6
Target Population				
Men who have Sex with Men/Injection Drug Use (MSM/IDU)	502	1.4	443	1.4
MSM	5,023	14.5	5,252	17.0
IDU	8,848	25.5	7,559	24.5
Transgender persons	905	2.6	706	2.3
Heterosexual	12,199	35.1	10,958	35.5
No risk/missing/invalid	7,272	20.9	5,981	19.4
Total	34,749		30,899	

Data Source: NHM&E RRA client-level data submitted through EvaluationWeb® as of September 15, 2014 for project period January 1, 2012 - December 31, 2013.