

HIV Surveillance **Report** | Special Report

Number 12

Behavioral and Clinical Characteristics of Persons Receiving Medical Care for HIV Infection Medical Monitoring Project United States, 2012

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
Division of HIV/AIDS Prevention



This HIV Surveillance Special Report is published by the Behavioral and Clinical Surveillance Branch of the Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention (CDC), U.S. Department of Health and Human Services, Atlanta, Georgia.

The HIV Surveillance Special Report is not copyrighted and may be used and copied without permission. Citation of the source is, however, appreciated.

Suggested citation

Centers for Disease Control and Prevention. *Behavioral and Clinical Characteristics of Persons Receiving Medical Care for HIV Infection—Medical Monitoring Project, United States, 2012*. HIV Surveillance Special Report 12. <http://www.cdc.gov/hiv/library/reports/surveillance/#panel2>. Published August 2015. Accessed [date].

On the Web: <http://www.cdc.gov/hiv/library/reports/surveillance/#panel2>

Confidential information, referrals, and educational material on HIV infection

CDC-INFO

1-800-232-4636 (in English, en Español)

1-888-232-6348 (TTY)

<http://www.cdc.gov/cdc-info/requestform.html>

This report was prepared by the following staff and contractors of the Division of HIV/AIDS Prevention, CDC: Heather Bradley, Emma L. Frazier, Ping Huang, Jennifer L. Fagan, Christine L. Mattson, Mark S. Freedman, Linda Beer, Shikha Garg, Christopher H. Johnson, Yunfeng Tie, Qingwei Luo, Michael Friend (desktop publishing), and Luke Shouse.

Acknowledgments

This report is based, in part, on contributions by Medical Monitoring Project (MMP) participants, facilities, community and provider advisory boards, interviewers, and abstractors; the Data Coordinating Center for HIV Supplemental Surveillance at ICF International; and members of the Clinical Outcomes Team, Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, CDC, Atlanta, Georgia.

MMP study group members

<http://www.cdc.gov/hiv/statistics/systems/mmp/resources.html#StudyGroupMembers>

Contents

| | |
|---|----|
| Commentary | 4 |
| Technical Notes | 7 |
| References | 8 |
| Tables | |
| 1 Participants, by project area—Medical Monitoring Project, United States, 2012 | 9 |
| 2 Characteristics of patients—Medical Monitoring Project, United States, 2012 | 10 |
| 3 Stage of disease, CD4 counts, and viral suppression during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 13 |
| 4 CD4 and viral load monitoring and prescription of antiretroviral therapy, Pneumocystis pneumonia (PCP) prophylaxis, and Mycobacterium avium complex (MAC) prophylaxis during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 14 |
| 5 Clinical services during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 15 |
| 6 Sexually transmitted disease testing during the 12 months before the interview, by sexual activity—Medical Monitoring Project, United States, 2012 | 16 |
| 7 Emergency department or urgent care clinic use and hospital admission during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 17 |
| 8 Antiretroviral therapy use, payment source, and adherence—Medical Monitoring Project, United States, 2012 | 18 |
| 9 Beliefs among patients currently taking antiretroviral medications—Medical Monitoring Project, United States, 2012 | 21 |
| 10 Reasons for missed antiretroviral therapy dose, among those missing a dose during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 22 |
| 11 Depression during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 23 |
| 12 Cigarette smoking—Medical Monitoring Project, United States, 2012 | 24 |
| 13 Alcohol use during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 25 |
| 14 Noninjection drug use during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 26 |
| 15 Injection drug use during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 28 |
| 16 Gynecological care and reproductive health among women—Medical Monitoring Project, United States, 2012 | 29 |
| 17 Sexual orientation and sexual activity during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 30 |
| 18 Sexual risk behaviors during the 12 months before the interview among men who have sex with men, by type of partner—Medical Monitoring Project, United States, 2012 | 32 |
| 19 Sexual risk behaviors during the 12 months before the interview among men who have sex with women, by type of partner—Medical Monitoring Project, United States, 2012 | 34 |
| 20 Sexual risk behaviors during the 12 months before the interview among women who have sex with men, by type of partner—Medical Monitoring Project, United States, 2012 | 35 |
| 21 Met and unmet needs for ancillary services during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 36 |
| 22 Prevention services received during the 12 months before the interview—Medical Monitoring Project, United States, 2012 | 38 |
| Appendix: Methods and Definitions | 39 |

As of December 31, 2012, an estimated 933,996 persons in the United States and 6 dependent areas were living with diagnosed HIV infection [1]. In 2012, the estimated number of new HIV diagnoses was 46,154 [1]. Although the National HIV Surveillance System collects information about persons with diagnosed HIV infection [2], other surveillance systems provide detailed information about care seeking, health care use, use of ancillary services, and other behaviors [3]. In 2005, in response to an Institute of Medicine report outlining the need for representative data on persons living with HIV [4], the Centers for Disease Control and Prevention (CDC) implemented the Medical Monitoring Project (MMP).

MMP is a cross-sectional, nationally representative, complex sample survey that assesses the clinical and behavioral characteristics of HIV-infected adults who are receiving outpatient medical care in the United States and Puerto Rico [3, 5, 6]. The 2012 MMP sample was selected in 3 consecutive stages: (1) United States and dependent areas, (2) outpatient facilities providing HIV care, and (3) HIV-infected adults aged ≥ 18 years who made at least 1 medical care visit to a participating facility during January–April, 2012. A total of 23 areas were funded to conduct data collection for the 2012 cycle (Table 1).

This report presents unweighted sample sizes and weighted prevalence estimates with 95% confidence intervals for selected characteristics. The term *patients* refers to HIV-infected adults who are living in the United States or Puerto Rico and who are receiving outpatient medical care. The period referenced is the 12 months before the patient interview unless otherwise noted. Statistical software (SAS, version 9.3) was used for analysis of weighted data [7]. Data are not reported for variables with < 5 responses or a coefficient of variation of $\geq 30\%$. No statistical tests were performed. Additional information on MMP is available at <http://www.cdc.gov/hiv/statistics/systems/mmp/>.

HIGHLIGHTS OF ANALYSES

Facility and Patient Response Rates

Of 548 sampled eligible facilities in 23 project areas, 467 participated in MMP; the facility response rate, adjusted for eligibility, was 85%. In total, 9,394

patients were sampled from the 467 participating facilities. Of these, 4,901 patients completed the standard questionnaire, and their medical records were abstracted (Table 1). Adjusted for eligibility, the patient response rate was 53%.

Sociodemographic Characteristics

The 4,901 respondents represent an estimated 476,366 (95% confidence interval [CI], 411,561–541,171) adults living with HIV who received outpatient medical care in the United States and Puerto Rico during January–April 2012. An estimated 74% of patients were male, 25% were female, and 1% were transgender (Table 2). Nearly half (49%) of patients identified themselves as heterosexual, or straight; 44% as homosexual, gay, or lesbian; and 8% as bisexual. An estimated 42% were black or African American, 35% were white, and 19% were Hispanic or Latino. More than three-quarters (77%) were aged at least 40 years, and 59% had received an HIV diagnosis at least 10 years earlier. More than half (52%) had more than a high school education, and 82% were born in the United States. The estimated prevalence of homelessness was 8%. An estimated 98% had health insurance or coverage for antiretroviral therapy (ART) medications: 42% had coverage through the Ryan White HIV/AIDS Program, 39% had Medicaid, 31% had private health insurance, and 26% had Medicare. An estimated 44% had household incomes at or below the federal poverty threshold.

Clinical Characteristics

According to the CDC stage of disease classification for HIV infection [8], an estimated 69% of patients had stage 3 (AIDS) disease (Table 3). An estimated 10% of patients had a mean CD4 T-lymphocyte (CD4) count of 0–199 cells/ μ L. The estimated geometric mean CD4 count among all patients was 553 cells/ μ L, and the median CD4 count was 521 cells/ μ L (range, 1–2,001) (data not shown in table). An estimated 77% of patients had an undetectable (< 200 copies/ml) viral load at the most recent measurement.

Use of Health Care Services

An estimated 62% of patients had at least 3 CD4 or HIV viral load tests documented in the medical record (Table 4). As recommended by guidelines, most patients had at least 1 viral load test in each 6-month period (72%) and at least 1 CD4 test annually (95%). Overall, an estimated 93% of patients had an ART prescription documented in the medical record. Of patients who met the clinical criteria for *Pneumocystis pneumonia* (PCP) prophylaxis, 80% had a prescription for PCP prophylaxis documented in the medical record. Of patients who met the clinical criteria for *Mycobacterium avium* complex (MAC) prophylaxis, 77% had a prescription for MAC prophylaxis documented in the medical record.

Nearly 100% of patients had a usual place for HIV medical care (e.g., a physician's office or a clinic) (Table 5). Patients' estimated travel time to their usual HIV care provider averaged 34 minutes. In total, 4% of patients participated in an HIV clinical trial. Among sexually active patients, an estimated 36% were tested for gonorrhea, 37% for chlamydia, 61% for syphilis, and 31% for all 3 sexually transmitted diseases (STDs) (Table 6).

An estimated 8% of patients were seen in an emergency department or an urgent care center at least 1 time, and 1% were seen at least 5 times (Table 7). An estimated 5% of patients were admitted to a hospital for an HIV-related illness at least 1 time; fewer than 1% were admitted at least 5 times.

Self-reported Antiretroviral Medication Use and Adherence

An estimated 94% of patients were currently taking ART based on self-report (Table 8). Among the estimated 4% of patients without a history of ART use, 80% had never taken ART because a physician advised a delay in treatment; 9% believed that medications were unnecessary because they felt healthy or believed their HIV laboratory test results (e.g., CD4 count and HIV viral load) were good. Patients' ART medications were most commonly paid for by the AIDS Drug Assistance Program (40%), Medicaid (31%), private health insurance (26%), or Medicare (19%).

Estimated adherence to dose, schedule, and special instructions for taking ART during the past 3 days was 89%, 76%, and 74%, respectively. Among patients currently taking ART, 72% had never been

troubled by ART side effects during the past 30 days; 14% had rarely been troubled.

Among patients currently taking ART, an estimated 95% were "very" or "extremely" sure that they could take all of their medication as directed, and 90% were "very" or "extremely" sure that their medication would have a positive effect on their health (Table 9). Among the estimated 55% of patients who were currently taking ART and ever missed a dose (Table 8), 38% most recently missed a dose because they forgot to take it, and 27% most recently missed a dose because of a change in daily routine (Table 10).

Depression and Substance Use

The estimated prevalence of major or other depression based on the Patient Health Questionnaire (PHQ-8) algorithm [9] was 20%, including 10% with major depression (Table 11). Based on the total PHQ-8 symptom score (see the appendix), an estimated 20% of patients had current moderate or severe depression.

The estimated prevalence of smoking was 40%: 34% of patients smoked daily, 4% weekly, 1% monthly, and 2% less than monthly (Table 12). The estimated prevalence of alcohol use was 64%: 7% of patients drank alcohol daily, 19% weekly, 13% monthly, and 24% less than monthly (Table 13). Nearly 23% of patients drank alcohol before or during sex. An estimated 51% of patients drank alcohol during the past 30 days. Among patients who drank alcohol during the past 30 days, the estimated typical average daily consumption was 2.8 drinks. An estimated 16% of patients engaged in binge drinking during the past 30 days. Among patients who drank alcohol in the past 30 days, the estimated mean number of binge-drinking days was 1.7.

An estimated 25% of patients used noninjection drugs for nonmedical purposes, and 12% used noninjection drugs before or during sex (Table 14). In total, an estimated 21% used marijuana, 4% used poppers (amyl nitrite), 4% used methamphetamine, and 4% used cocaine. An estimated 2% of patients used injection drugs for nonmedical purposes (Table 15). The drugs most frequently injected were methamphetamine by 2% and heroin by fewer than 1%. Of patients who injected drugs, 78% did so before or during sex.

Gynecologic and Reproductive Health

An estimated 21% of female patients received HIV care at an obstetrics and gynecology clinic, and 77% received a Papanicolaou (Pap) test (Table 16). An

estimated 24% of female patients had been pregnant at least once since testing positive for HIV infection; of these, 80% gave birth to 1 or more children after learning their HIV status.

Sexual Behavior

An estimated 49% of patients were gay, bisexual, and other men who have sex with men (collectively referred to as MSM); 24% were men who exclusively have sex with women; 25% were women who have sex with men; and fewer than 1% were women who exclusively have sex with women (Table 17). An estimated 63% of patients were sexually active, including 72% of MSM, 59% of men who have sex with women, 51% of women who have sex with men, 55% of women who have sex with women, and 54% of transgender persons. Among all patients, 24% had engaged in unprotected sex (without a condom), and 11% had engaged in unprotected sex with a partner of negative or unknown HIV status.

Among MSM, 33% had engaged in unprotected anal intercourse (without a condom), and 12% had engaged in unprotected anal intercourse with a partner of negative or unknown HIV status (Table 18). Among men who have sex with women, 13% had engaged in unprotected vaginal intercourse (without a condom), and 8% had engaged in unprotected vaginal intercourse with a partner of negative or unknown HIV status (Table 19). Among women who have sex with men, 17% had engaged in unprotected vaginal intercourse (without a condom), and 10% had engaged in unprotected vaginal intercourse with a partner of negative or unknown HIV status (Table 20).

Met and Unmet Need for Ancillary Services

An estimated 60% of patients received dental care, 57% received HIV case management services, 43% received medicine through the AIDS Drug Assistance Program, and 41% received counseling about how to prevent the transmission of HIV (Table 21). An estimated 22% of patients had unmet needs for dental care; 11% for public benefits, such as Social Security Income or Social Security Disability Insurance; 8% for transportation assistance; 7% for HIV peer group support; 7% for shelter or housing services; 6% for meal or food services; 6% for mental health services; and 4% for case management services.

Prevention Activities

An estimated 43% of patients received counseling from a physician, nurse, or other health care worker about HIV and STD prevention; 28% had a one-on-one conversation with an outreach worker, a counselor, or a prevention program worker about prevention; and 13% participated in a small-group session (excluding discussions with friends) to discuss the prevention of HIV and other STDs (Table 22). An estimated 54% of patients received free condoms from various organizations; of these, 61% received free condoms from a general health clinic, 29% from an HIV/AIDS-focused community-based organization, 15% from a social venue (e.g., bar, club, bathhouse, gym, bookstore), 7% from a special event, 6% from an STD clinic, 1% from an outreach organization focused on injection drug use (excluding needle exchange programs), and 1% from a family planning clinic.

For further technical details, please see the appendix.

POPULATION OF INFERENCE

For each MMP data collection cycle, the population of inference is HIV-infected adults (aged 18 years and older) who received care from known providers of outpatient HIV medical care in the United States during the population definition period (PDP). The PDP is a predefined period during which HIV-infected persons must have received care in a sampled facility in order to be sampled for participation in MMP. The PDP for the 2012 data collection cycle was January 1 through April 30, 2012. Published research suggests that of all HIV-infected persons in medical care, 88% had visited their HIV medical care provider at least once during the first 4 months of the specified calendar year [10].

A total of 23 areas were funded to conduct data collection for the 2012 cycle: California (including the separately funded jurisdictions of Los Angeles County and San Francisco), Delaware, Florida, Georgia, Illinois (including the separately funded jurisdiction of Chicago), Indiana, Michigan, Mississippi, New Jersey, New York (including the separately funded jurisdiction of New York City), North Carolina, Oregon, Pennsylvania (including the separately funded jurisdiction of Philadelphia), Puerto Rico, Texas (including the separately funded jurisdiction of Houston), Virginia, and Washington.

DATA COLLECTION

Patients were enrolled by either MMP staff or health facility staff. The enrollment strategy depended on clinic needs, project area needs, local institutional review board requirements, and the number of patients sampled from a given facility. For enrollment by MMP staff, facilities provided local MMP staff with contact information for patients. For enrollment by HIV medical care providers, selected patients were initially contacted by their health care providers—in person, by telephone, or by mail—and then were contacted by MMP staff. The participant eligibility criteria were the same in all participating project areas: diagnosis of HIV infection, age of ≥ 18 years at the beginning of the 4-month period when patients were

eligible for selection (PDP), no previous participation in MMP during the current data collection cycle, and receipt of medical care at the sampled facility during the PDP.

A trained interviewer conducted either a computer-assisted in-person interview or a telephone interview. Two versions of the questionnaire (both available in English and in Spanish) were used in 2012: a standard questionnaire and a short questionnaire. The short questionnaire was administered when a patient was too ill to complete the longer standard interview or when translation to a language other than Spanish was required. Only standard questionnaire data are included in this report.

Persons who agreed to participate were interviewed in a private location (e.g., at home or in a clinic) or over the telephone. The standard interview (approximately 45 minutes) included questions about demographics, health care utilization, met and unmet needs for ancillary services, sexual behavior, depression, gynecologic and reproductive history (women only), drug and alcohol use, and use of prevention services. Participants were reimbursed approximately \$25 in cash or the equivalent for participation; reimbursement amounts differed by project area according to local considerations.

After the interview, medical records were abstracted by MMP staff, using an electronic application provided by CDC. Abstracted information included diagnoses of AIDS-defining conditions, prescription of ART, laboratory results, and health care utilization in the 12 months before the interview.

References

1. CDC. *HIV Surveillance Report, 2013*; vol. 25. <http://www.cdc.gov/hiv/library/reports/surveillance/>. Published February 2015. Accessed July 27, 2015.
2. Nakashima AK, Fleming PL. HIV/AIDS surveillance in the United States, 1981–2001. *J Acquir Immune Defic Syndr* 2003;32(suppl 1):S68–S85.
3. McNaghten AD, Wolfe MI, Onorato I, et al. Improving the representativeness of behavioral and clinical surveillance for persons with HIV in the United States: the rationale for developing a population-based approach. *PLoS One* 2007;2(6):e550.
4. Institute of Medicine. *Measuring What Matters: Allocation, Planning and Quality Assessment for the Ryan White CARE Act*. Washington, DC: National Academies Press; 2004. http://books.nap.edu/openbook.php?record_id=10855. Published November 7, 2003. Accessed July 27, 2015.
5. Blair JM, McNaghten AD, Frazier EL, et al. Clinical and behavioral characteristics of adults receiving medical care for HIV infection—Medical Monitoring Project, United States, 2007. *MMWR* 2011;60(SS-11):1–20.
6. Frankel MR, McNaghten A, Shapiro MF, et al. A probability sample for monitoring the HIV-infected population in care in the U.S. and in selected states. *Open AIDS J* 2012;6(suppl 1):67–76.
7. SAS Institute Inc. SAS version 9.3. Cary, NC: SAS Institute; 2011.
8. CDC. Revised surveillance case definitions for HIV infection among adults, adolescents, and children aged <18 months and for HIV infection and AIDS among children aged 18 months to <13 years—United States, 2008. *MMWR* 2008;57(RR-10):1–12.
9. Kroenke K, Strine TW, Spitzer RL, et al. The PHQ-8 as a measure of current depression in the general population. *J Affect Disord* 2009;114(1–3):163–173.
10. Sullivan PS, Juhasz M, McNaghten AD, et al. Time to first annual HIV care visit and associated factors for patients in care for HIV infection in 10 US cities. *AIDS Care* 2011;23(10):1314–1320.

Table 1. Participants, by project area—Medical Monitoring Project, United States, 2012

| Project area | No. | % |
|---|--------------|--------------|
| California (excluding Los Angeles County and San Francisco) | 224 | 4.6 |
| Chicago, IL | 220 | 4.5 |
| Delaware | 193 | 3.9 |
| Florida | 416 | 8.5 |
| Georgia | 179 | 3.7 |
| Houston, TX | 222 | 4.5 |
| Illinois (excluding Chicago) | 36 | 0.7 |
| Indiana | 247 | 5.0 |
| Los Angeles County, CA | 247 | 5.0 |
| Michigan | 164 | 3.3 |
| Mississippi | 161 | 3.3 |
| New Jersey | 208 | 4.2 |
| New York (excluding New York City) | 100 | 2.0 |
| New York City, NY | 445 | 9.1 |
| North Carolina | 180 | 3.7 |
| Oregon | 255 | 5.2 |
| Pennsylvania (excluding Philadelphia) | 40 | 0.8 |
| Philadelphia, PA | 195 | 4.0 |
| Puerto Rico | 222 | 4.5 |
| San Francisco, CA | 246 | 5.0 |
| Texas (excluding Houston) | 248 | 5.1 |
| Virginia | 228 | 4.7 |
| Washington | 225 | 4.6 |
| Total | 4,901 | 100.0 |

Note. Percentages might not sum to 100 because of rounding.

Table 2. Characteristics of patients—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Gender | | | |
| Male | 3,571 | 73.5 | 69.9–77.2 |
| Female | 1,268 | 25.4 | 21.8–28.9 |
| Transgender ^d | 60 | 1.1 | 0.8–1.4 |
| Sexual orientation | | | |
| Heterosexual or straight | 2,419 | 48.5 | 42.7–54.3 |
| Homosexual or gay | 2,027 | 43.6 | 37.5–49.8 |
| Bisexual | 391 | 7.9 | 6.7–9.1 |
| Race/ethnicity | | | |
| American Indian/Alaska Native | 21 | 0.4 | 0.2–0.6 |
| Asian | 48 | 1.1 | 0.6–1.6 |
| Black/African American | 2,072 | 41.6 | 31.9–51.3 |
| Hispanic/Latino ^e | 1,060 | 18.7 | 12.7–24.6 |
| Native Hawaiian/Other Pacific Islander | — | — | — |
| White | 1,560 | 35.3 | 27.4–43.2 |
| Multiple races | 124 | 2.7 | 2.1–3.2 |
| Age at time of interview (yr) | | | |
| 18–24 | 144 | 3.1 | 2.3–3.9 |
| 25–29 | 235 | 4.7 | 3.9–5.5 |
| 30–34 | 344 | 7.5 | 6.6–8.5 |
| 35–39 | 392 | 7.9 | 7.1–8.7 |
| 40–44 | 623 | 12.7 | 11.8–13.7 |
| 45–49 | 955 | 19.2 | 18.1–20.3 |
| 50–54 | 914 | 18.2 | 16.8–19.7 |
| 55–59 | 645 | 13.4 | 12.2–14.6 |
| 60–64 | 421 | 8.4 | 7.7–9.2 |
| ≥65 | 228 | 4.7 | 3.8–5.6 |
| Education | | | |
| Less than high school | 1,038 | 19.8 | 16.9–22.6 |
| High school diploma or GED | 1,372 | 27.9 | 25.6–30.2 |
| More than high school | 2,487 | 52.3 | 47.6–57.0 |
| Country or territory of birth | | | |
| United States | 3,915 | 81.7 | 76.2–87.1 |
| Puerto Rico | — | — | — |
| Mexico | 209 | 3.9 | 3.1–4.7 |
| Cuba | — | — | — |
| Other | 434 | 9.1 | 7.3–10.8 |
| Time since HIV diagnosis (yr) | | | |
| <5 | 957 | 21.6 | 20.1–23.0 |
| 5–9 | 965 | 19.4 | 18.1–20.8 |
| ≥10 | 2,979 | 59.0 | 56.9–61.2 |

Table 2. Characteristics of patients—Medical Monitoring Project, United States, 2012 (cont)

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Homeless^f at any time | | | |
| Yes | 399 | 8.3 | 6.9–9.7 |
| No | 4,502 | 91.7 | 90.3–93.1 |
| Incarcerated >24 hours | | | |
| Yes | 224 | 4.7 | 3.8–5.7 |
| No | 4,675 | 95.3 | 94.3–96.2 |
| Health insurance or coverage for antiretroviral medications^g | | | |
| Yes | 4,787 | 97.9 | 97.1–98.6 |
| No | 104 | 2.1 | 1.4–2.9 |
| Type of health insurance or coverage for antiretroviral medications | | | |
| Ryan White | | | |
| Yes | 1,992 | 41.9 | 39.1–44.7 |
| No | 2,891 | 58.1 | 55.3–60.9 |
| Medicaid | | | |
| Yes | 1,909 | 38.8 | 34.1–43.5 |
| No | 2,977 | 61.2 | 56.5–65.9 |
| Private health insurance | | | |
| Yes | 1,422 | 30.6 | 25.8–35.5 |
| No | 3,460 | 69.4 | 64.5–74.2 |
| Medicare | | | |
| Yes | 1,276 | 26.2 | 24.7–27.6 |
| No | 3,607 | 73.8 | 72.4–75.3 |
| Other public insurance | | | |
| Yes | — | — | — |
| No | — | — | — |
| Tricare/CHAMPUS or Veterans Administration | | | |
| Yes | — | — | — |
| No | — | — | — |
| Insurance type unknown^h | | | |
| Yes | 189 | 3.9 | 3.1–4.7 |
| No | 4,697 | 96.1 | 95.3–96.9 |

Table 2. Characteristics of patients—Medical Monitoring Project, United States, 2012 (cont)

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Primary source of most financial support | | | |
| Salary or wages | 1,827 | 38.4 | 34.5–42.2 |
| SSI or SSDI | 1,919 | 38.0 | 35.2–40.7 |
| Family, partner, or friends | 497 | 10.8 | 9.1–12.4 |
| Illegal or possibly illegal activities | — | — | — |
| No income or financial support | 54 | 1.1 | 0.7–1.5 |
| Other | 589 | 11.7 | 9.5–13.8 |
| Combined yearly household incomeⁱ (US\$) | | | |
| 0–19,999 | 3,106 | 64.5 | 59.9–69.1 |
| 20,000–39,999 | 770 | 17.0 | 15.4–18.6 |
| 40,000–74,999 | 455 | 10.5 | 8.1–12.9 |
| ≥75,000 | 347 | 8.0 | 6.0–9.9 |
| Poverty guidelines^j | | | |
| Above poverty threshold | 2,541 | 56.2 | 51.5–60.8 |
| At or below poverty threshold | 2,136 | 43.8 | 39.2–48.5 |
| Total | 4,901 | 100.0 | |

Abbreviations: CI, confidence interval; GED, general educational development; CHAMPUS, Civilian Health and Medical Program of the Uniformed Services; SSI, Supplemental Security Income; SSDI, Social Security Disability Insurance.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation ≥30%, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Patients were classified as transgender if sex at birth and gender reported by the patient were different, or if the patient chose transgender in response to the question about self-identified gender.

^e Hispanics or Latinos might be of any race. Patients are classified in only one race/ethnicity category.

^f Living on the street, in a shelter, in a single-room–occupancy hotel, or in a car.

^g Patients could select more than one response for health insurance or coverage for antiretroviral medications.

^h Unknown insurance type means that the patient had insurance or coverage for antiretroviral medications, but the type of insurance or coverage could not be determined.

ⁱ Income from all sources, before taxes, in the last calendar year.

^j Poverty guidelines as defined by the Department of Health and Human Services (HHS); the 2011 guidelines were used for patients interviewed in 2012 and the 2012 guidelines were used for patients interviewed in 2013. More information regarding the HHS poverty guidelines can be found at <http://aspe.hhs.gov/poverty/faq.cfm>.

Table 3. Stage of disease, CD4 counts, and viral suppression during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Stage of disease | | | |
| Stage 1 ^d | 365 | 8.0 | 7.0–9.0 |
| Stage 2 ^e | 1,135 | 23.4 | 21.8–25.0 |
| Stage 3 (AIDS) ^f | 3,380 | 68.6 | 66.4–70.8 |
| Geometric mean CD4 count (cells/μL) | | | |
| 0–199 | 477 | 10.0 | 8.6–11.4 |
| 200–349 | 694 | 14.4 | 12.8–16.1 |
| 350–499 | 1,013 | 22.3 | 20.7–23.9 |
| ≥500 | 2,460 | 53.3 | 51.2–55.3 |
| Lowest CD4 count (cells/μL) | | | |
| 0–49 | 134 | 2.9 | 2.3–3.4 |
| 50–199 | 505 | 10.4 | 9.0–11.7 |
| 200–349 | 883 | 18.8 | 17.2–20.4 |
| 350–499 | 1,120 | 24.4 | 23.0–25.8 |
| ≥500 | 2,002 | 43.6 | 41.5–45.7 |
| Viral suppression | | | |
| Most recent viral load documented undetectable or <200 copies/mL | 3,829 | 77.3 | 75.4–79.2 |
| Most recent viral load documented detectable, ≥200 copies/mL, or missing/unknown | 1,072 | 22.7 | 20.8–24.6 |
| Durable viral suppression | | | |
| All viral load measurements documented undetectable or <200 copies/mL | 3,283 | 66.2 | 64.1–68.3 |
| Any viral load ≥200 copies/mL or missing/unknown | 1,618 | 33.8 | 31.7–35.9 |
| Total | 4,901 | 100.0 | |

Abbreviations: CI, confidence interval; CD4, CD4 T-lymphocyte count (cells/μL).

Source of stages: CDC. Revised surveillance case definitions for HIV infection among adults, adolescents, and children aged <18 months and for HIV infection and AIDS among children aged 18 months to <13 years—United States, 2008. *MMWR* 2008;57(RR-10):1–12.

Note. CD4 counts are from medical record abstraction.

Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation ≥30%, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d HIV infection, stage 1: No AIDS-defining condition and either CD4 count of ≥500 cells/μL or CD4 percentage of total lymphocytes of ≥29.

^e HIV infection, stage 2: No AIDS-defining condition and either CD4 count of 200–499 cells/μL or CD4 percentage of total lymphocytes of 14–28.

^f HIV infection, stage 3 (AIDS): Documentation of an AIDS-defining condition or either a CD4 count of <200 cells/μL or a CD4 percentage of total lymphocytes of <14. Documentation of an AIDS-defining condition supersedes a CD4 count or percentage that would not, by itself, be the basis for a stage 3 (AIDS) classification.

Table 4. CD4 and viral load monitoring and prescription of antiretroviral therapy, *Pneumocystis pneumonia* (PCP) prophylaxis, and *Mycobacterium avium* complex (MAC) prophylaxis during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Number of outpatient laboratory tests^d | | | |
| CD4 or HIV viral load | | | |
| 0 | 165 | 3.7 | 2.5–4.8 |
| 1 | 519 | 10.8 | 9.5–12.0 |
| 2 | 1,131 | 23.7 | 21.2–26.2 |
| ≥3 | 3,036 | 61.9 | 58.5–65.2 |
| CD4 | | | |
| 0 | 205 | 4.7 | 3.4–5.9 |
| 1 | 607 | 12.7 | 11.3–14.2 |
| 2 | 1,232 | 25.6 | 23.1–28.0 |
| ≥3 | 2,807 | 57.0 | 53.4–60.6 |
| HIV viral load | | | |
| 0 | 259 | 5.6 | 4.3–6.9 |
| 1 | 648 | 13.4 | 12.0–14.7 |
| 2 | 1,255 | 26.4 | 24.1–28.6 |
| ≥3 | 2,689 | 54.6 | 51.4–57.9 |
| HIV viral load measurement at least once every 6 months | | | |
| Yes | 3,489 | 71.6 | 69.1–74.1 |
| No | 1,362 | 28.4 | 25.9–30.9 |
| CD4 measured at least once annually | | | |
| Yes | 4,646 | 95.3 | 94.1–96.6 |
| No | 205 | 4.7 | 3.4–5.9 |
| Prescribed ART | | | |
| Yes | 4,563 | 92.7 | 91.8–93.6 |
| No | 338 | 7.3 | 6.4–8.2 |
| Prescribed PCP prophylaxis^e | | | |
| Yes | 514 | 80.4 | 76.4–84.5 |
| No | 124 | 19.6 | 15.5–23.6 |
| Prescribed MAC prophylaxis^f | | | |
| Yes | 104 | 76.6 | 68.0–85.1 |
| No | 30 | 23.4 | 14.9–32.0 |
| Total | 4,901 | 100.0 | |

Abbreviations: CI, confidence interval; CD4, CD4 T-lymphocyte count (cells/ μ L) or percentage; ART, antiretroviral therapy; PCP, *Pneumocystis pneumonia*; MAC, *Mycobacterium avium* complex.

Note. CD4 counts and viral load measurements are from medical record abstraction.

Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Only includes those tests with a documented result.

^e Among patients with CD4 cell count < 200 cells/ μ L.

^f Among patients with CD4 cell count < 50 cells/ μ L.

Table 5. Clinical services during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|---|------------------|----------------|---------------------|
| Had usual place for primary HIV care | | | |
| Yes | 4,891 | 99.8 | 99.7–100.0 |
| No | 9 | 0.2 | 0.0–0.3 |
| Received influenza vaccination | | | |
| Yes | 3,955 | 81.8 | 79.5–84.1 |
| No | 903 | 18.2 | 15.9–20.5 |
| Participated in HIV clinical trial | | | |
| Yes | 183 | 3.5 | 2.8–4.3 |
| No | 4,702 | 96.5 | 95.7–97.2 |
| Travel time to primary HIV care (estimated in minutes) | | | |
| Mean | 34.1 | | |
| Median | 28.1 | | |
| Range | 1–360 | | |
| Total | 4,901 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

**Table 6. Sexually transmitted disease testing during the 12 months before the interview, by sexual activity—
Medical Monitoring Project, United States, 2012**

| | Total population | | | Sexually active ^a persons only | | |
|---|------------------|----------------|---------------------|---|----------------|---------------------|
| | No. ^b | % ^c | 95% CI ^d | No. ^b | % ^c | 95% CI ^d |
| Gonorrhea^e | | | | | | |
| Yes, received test | 1,650 | 32.6 | 28.2–36.9 | 1,122 | 36.0 | 31.6–40.4 |
| No test documented | 3,201 | 67.4 | 63.1–71.8 | 1,892 | 64.0 | 59.6–68.4 |
| Chlamydia^f | | | | | | |
| Yes, received test | 1,684 | 33.3 | 28.8–37.8 | 1,149 | 37.0 | 32.5–41.5 |
| No test documented | 3,167 | 66.7 | 62.2–71.2 | 1,865 | 63.0 | 58.5–67.5 |
| Syphilis^g | | | | | | |
| Yes, received test | 2,880 | 57.0 | 52.8–61.3 | 1,876 | 60.5 | 55.9–65.0 |
| No test documented | 1,971 | 43.0 | 38.7–47.2 | 1,138 | 39.5 | 35.0–44.1 |
| Gonorrhea, chlamydia, and syphilis | | | | | | |
| Yes, received test | 1,364 | 26.8 | 22.7–30.9 | 950 | 30.5 | 26.3–34.6 |
| No test documented | 3,487 | 73.2 | 69.1–77.3 | 2,064 | 69.5 | 65.4–73.7 |
| Total | 4,901 | 100.0 | | 3,039 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Information on laboratory testing for sexually transmitted diseases was based on documentation in medical records.

Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Sexual activity was reported in the patient interview component of the Medical Monitoring Project and was defined as oral sex or anal or vaginal intercourse.

^b Numbers are unweighted.

^c Percentages are weighted percentages.

^d CIs incorporate weighted percentages.

^e Testing for *Neisseria gonorrhoeae* was defined as documentation of a result from culture, gram stain, the nucleic acid amplification test (NAAT), or the nucleic acid probe.

^f *Chlamydia trachomatis* testing was defined as a result from culture, direct fluorescent antibody (DFA), enzyme immunoassay (EIA) or enzyme-linked immunoassay (ELISA), the nucleic acid amplification test (NAAT), or nucleic acid probe.

^g Syphilis testing was defined as a result from non-treponemal syphilis tests (rapid plasma reagin [RPR], Venereal Disease Research Laboratory [VDRL]), treponemal syphilis tests (*Treponema pallidum* hemagglutination assay [TPHA], *T. pallidum* particle agglutination [TP-PA], microhemagglutination assay for antibody to *T. pallidum* [MHA-TP], fluorescent treponemal antibody absorbed [FTA-ABS] tests), or dark-field microscopy.

Table 7. Emergency department or urgent care clinic use and hospital admission during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|---|------------------|----------------|---------------------|
| Number of visits to emergency department or urgent care clinic | | | |
| 0 | 4,499 | 92.1 | 90.8–93.5 |
| 1 | 207 | 4.2 | 3.3–5.1 |
| 2–4 | 144 | 2.8 | 2.3–3.4 |
| ≥5 | 41 | 0.8 | 0.5–1.1 |
| Number of hospital admissions | | | |
| 0 | 4,657 | 95.2 | 94.5–96.0 |
| 1 | 154 | 3.1 | 2.5–3.8 |
| 2–4 | 68 | 1.3 | 1.0–1.6 |
| ≥5 | 17 | 0.4 | 0.2–0.5 |
| Total | 4,901 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation ≥30%, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

Table 8. Antiretroviral therapy use, payment source, and adherence—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Ever taken antiretroviral medications (ART) | | | |
| Yes | 4,729 | 96.4 | 95.8–97.0 |
| No | 166 | 3.6 | 3.0–4.2 |
| Currently taking ART | | | |
| Yes | 4,605 | 93.9 | 93.2–94.6 |
| No | 288 | 6.1 | 5.4–6.8 |
| Main reason for never taking ART | | | |
| Doctor advised to delay treatment | 127 | 80.4 | 72.1–88.7 |
| Patient believed he or she didn't need medications because felt healthy or believed HIV laboratory results were good | 17 | 8.7 | 3.9–13.4 |
| Due to side effects of medication | — | — | — |
| Felt depressed or overwhelmed | — | — | — |
| Didn't want to think about being HIV positive | — | — | — |
| Worried about ability to adhere | — | — | — |
| Drinking or using drugs | — | — | — |
| Money or insurance issues | — | — | — |
| Homeless | — | — | — |
| Other | 8 | 4.6 | 1.2–8.0 |
| Main reason for not currently taking ART, among those persons with a history of ART use | | | |
| Doctor advised to delay treatment | 36 | 33.4 | 22.7–44.2 |
| Patient believed he or she didn't need medications because felt healthy or believed HIV laboratory results were good | — | — | — |
| Due to side effects of medication | 25 | 20.7 | 13.2–28.2 |
| Felt depressed or overwhelmed | — | — | — |
| Didn't want to think about being HIV positive | — | — | — |
| Worried about ability to adhere | — | — | — |
| Drinking or using drugs | — | — | — |
| Money or insurance issues | 20 | 15.8 | 9.8–21.8 |
| Homeless | — | — | — |
| Other | 15 | 11.0 | 5.3–16.7 |
| ART medications paid for by | | | |
| AIDS Drug Assistance Program (ADAP) | | | |
| Yes | 1,792 | 39.8 | 36.2–43.4 |
| No | 2,763 | 60.2 | 56.6–63.8 |
| Medicaid | | | |
| Yes | 1,441 | 30.9 | 26.4–35.3 |
| No | 3,114 | 69.1 | 64.7–73.6 |
| Private health insurance | | | |
| Yes | 1,101 | 25.7 | 20.7–30.8 |
| No | 3,454 | 74.3 | 69.2–79.3 |

Table 8. Antiretroviral therapy use, payment source, and adherence—Medical Monitoring Project, United States, 2012 (cont)

| | No. ^a | % ^b | 95% CI ^c |
|---|------------------|----------------|---------------------|
| Medicare | | | |
| Yes | 855 | 18.6 | 17.2–19.9 |
| No | 3,700 | 81.4 | 80.1–82.8 |
| Out of pocket | | | |
| Yes | 489 | 10.3 | 6.4–14.2 |
| No | 4,066 | 89.7 | 85.8–93.6 |
| Other public insurance | | | |
| Yes | — | — | — |
| No | — | — | — |
| Other unspecified insurance | | | |
| Yes | 128 | 2.9 | 2.2–3.6 |
| No | 4,472 | 97.1 | 96.4–97.8 |
| AIDS service organizations | | | |
| Yes | — | — | — |
| No | — | — | — |
| Clinical trial or drug study | | | |
| Yes | 25 | 0.6 | 0.4–0.9 |
| No | 4,530 | 99.4 | 99.1–99.6 |
| Public clinic | | | |
| Yes | 22 | 0.4 | 0.2–0.6 |
| No | 4,533 | 99.6 | 99.4–99.8 |
| Veterans Administration | | | |
| Yes | — | — | — |
| No | — | — | — |
| Tricare or CHAMPUS | | | |
| Yes | — | — | — |
| No | — | — | — |
| 100% ART medication adherence (during preceding 72 hours) | | | |
| By dose | | | |
| Yes | 3,915 | 88.7 | 87.1–90.2 |
| No | 548 | 11.3 | 9.8–12.9 |
| By schedule | | | |
| Yes | 3,413 | 75.6 | 73.1–78.1 |
| No | 1,180 | 24.4 | 21.9–26.9 |
| By special instructions (among those with special instructions for taking ART) | | | |
| Yes | 2,148 | 73.8 | 71.0–76.2 |
| No | 797 | 26.2 | 23.4–29.0 |

Table 8. Antiretroviral therapy use, payment source, and adherence—Medical Monitoring Project, United States, 2012 (cont)

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Troubled by ART side effects (during past 30 days) | | | |
| Never | 3,323 | 72.0 | 69.6–74.4 |
| Rarely | 614 | 13.9 | 12.4–15.4 |
| About half the time | 262 | 5.7 | 4.7–6.8 |
| Most of the time | 179 | 4.1 | 3.4–4.8 |
| Always | 192 | 4.0 | 3.2–4.9 |
| Been on medications less than 30 days | — | — | — |
| Troubled by ART side effects half of the time or more (during past 30 days) | | | |
| Yes | 633 | 13.9 | 12.3–15.5 |
| No | 3,937 | 86.1 | 84.5–87.7 |
| Any drug holiday | | | |
| Yes | 358 | 7.0 | 5.7–8.3 |
| No | 4,238 | 93.0 | 91.7–94.3 |
| Ever missed a dose of ART medications | | | |
| Yes | 2,209 | 55.3 | 52.6–58.1 |
| No | 1,820 | 44.7 | 41.9–47.4 |
| Total | 4,901 | 100.0 | |

Abbreviations: CI, confidence interval; ART, antiretroviral therapy; CHAMPUS, Civilian Health and Medical Program of the Uniformed Services.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

Table 9. Beliefs among patients currently taking antiretroviral medications—Medical Monitoring Project, United States, 2012

| Belief | No.^a | %^b | 95% CI^c |
|---|------------------------|----------------------|---------------------------|
| Will be able to take all or most of medication as directed | | | |
| Not at all sure | 55 | 1.1 | 0.8–1.4 |
| Somewhat sure | 196 | 4.3 | 3.5–5.1 |
| Very sure | 1,312 | 27.7 | 25.1–30.4 |
| Extremely sure | 3,035 | 66.9 | 64.0–69.7 |
| Medication will have a positive effect on health | | | |
| Not at all sure | 121 | 2.7 | 2.1–3.3 |
| Somewhat sure | 329 | 7.5 | 6.7–8.3 |
| Very sure | 1,427 | 30.4 | 27.9–32.8 |
| Extremely sure | 2,706 | 59.5 | 57.2–61.7 |
| HIV will become resistant to antiretroviral medications if medication is not taken exactly as instructed | | | |
| Not at all sure | 295 | 6.4 | 5.5–7.3 |
| Somewhat sure | 545 | 11.9 | 10.3–13.4 |
| Very sure | 1,374 | 29.5 | 27.1–32.0 |
| Extremely sure | 2,322 | 52.2 | 49.5–54.8 |
| Total | 4,605 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

Table 10. Reasons for missed antiretroviral therapy dose, among those missing a dose during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Forgot to take them | | | |
| Yes | 834 | 38.1 | 35.0–41.1 |
| No | 1,363 | 61.9 | 58.9–65.0 |
| Change in daily routine, including travel | | | |
| Yes | 581 | 26.9 | 23.6–30.1 |
| No | 1,616 | 73.1 | 69.9–76.4 |
| Problem with prescription or refill | | | |
| Yes | 299 | 14.0 | 11.4–16.6 |
| No | 1,898 | 86.0 | 83.4–88.6 |
| Felt sick or tired | | | |
| Yes | 270 | 12.1 | 10.2–14.0 |
| No | 1,927 | 87.9 | 86.0–89.8 |
| Drinking or using drugs | | | |
| Yes | 85 | 3.8 | 2.9–4.6 |
| No | 2,112 | 96.2 | 95.4–97.1 |
| Money or insurance issues | | | |
| Yes | 63 | 3.3 | 1.9–4.7 |
| No | 2,134 | 96.7 | 95.3–98.1 |
| Felt depressed or overwhelmed | | | |
| Yes | 70 | 2.9 | 2.3–3.5 |
| No | 2,127 | 97.1 | 96.5–97.7 |
| Due to side effects of medication | | | |
| Yes | 49 | 2.0 | 1.5–2.5 |
| No | 2,148 | 98.0 | 97.5–98.5 |
| Had too many pills to take | | | |
| Yes | — | — | — |
| No | — | — | — |
| Homeless^d | | | |
| Yes | — | — | — |
| No | — | — | — |
| Total | 2,209 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Patients could report more than 1 reason.

Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Living on the street, in a shelter, in a single-room–occupancy hotel, or in a car.

Table 11. Depression during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|---|------------------|----------------|---------------------|
| Depression based on DSM-IV criteria^d | | | |
| No depression | 3,882 | 80.4 | 78.9–81.8 |
| Other depression | 490 | 9.7 | 8.8–10.6 |
| Major depression | 484 | 9.9 | 8.8–11.0 |
| Moderate or severe depression (PHQ-8 score >10) | | | |
| Yes | 986 | 20.0 | 17.8–22.1 |
| No | 3,870 | 80.0 | 77.9–82.2 |
| Total | 4,901 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Responses to the 8 items on the Patient Health Questionnaire (PHQ-8) were used to define “major depression” and “other depression,” according to criteria from the *Diagnostic and Statistical Manual of Mental Disorders*, 4th ed. (DSM-IV-TR). “Major depression” was defined as having at least 5 symptoms of depression; “other depression” was defined as having 2–4 symptoms of depression.

Table 12. Cigarette smoking—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Smoked ≥100 cigarettes (lifetime) | | | |
| Yes | 3,036 | 62.5 | 60.0–64.9 |
| No | 1,848 | 37.5 | 35.1–40.0 |
| Smoking status | | | |
| Never smoked | 1,848 | 37.5 | 35.1–40.0 |
| Former smoker | 1,067 | 22.3 | 20.2–24.3 |
| Current smoker | 1,969 | 40.2 | 37.1–43.3 |
| Frequency of cigarette smoking | | | |
| Never | 2,915 | 59.8 | 56.7–62.9 |
| Daily | 1,660 | 33.9 | 31.0–36.8 |
| Weekly | 168 | 3.5 | 2.8–4.1 |
| Monthly | 43 | 1.0 | 0.7–1.3 |
| Less than monthly | 98 | 1.8 | 1.4–2.2 |
| Total | 4,901 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation ≥30%, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

Table 13. Alcohol use during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|---|------------------|----------------|---------------------|
| Any alcohol use^d | | | |
| Yes | 3,080 | 63.8 | 60.3–67.2 |
| No | 1,808 | 36.2 | 32.8–39.7 |
| Frequency of alcohol use | | | |
| Daily | 324 | 7.4 | 5.6–9.2 |
| Weekly | 922 | 19.1 | 17.3–20.8 |
| Monthly | 636 | 13.2 | 11.7–14.6 |
| Less than monthly | 1,198 | 24.2 | 22.3–26.1 |
| Never | 1,808 | 36.2 | 32.8–39.7 |
| Alcohol use before or during sex | | | |
| Yes | 1,070 | 22.8 | 21.1–24.6 |
| No | 3,770 | 77.2 | 75.4–78.9 |
| Alcohol use (during past 30 days) | | | |
| Yes | 2,440 | 51.2 | 48.5–53.8 |
| No | 2,436 | 48.8 | 46.2–51.5 |
| Binge drinking^e (during past 30 days) | | | |
| Yes | 764 | 15.5 | 14.5–16.6 |
| No | 4,103 | 84.5 | 83.4–85.5 |
| Heavy drinking^f (during past 30 days) | | | |
| Yes | 232 | 5.1 | 4.3–5.9 |
| No | 4,632 | 94.9 | 94.1–95.7 |
| Days \geq1 drink consumed^g (estimated numbers during past 30 days) | | | |
| Mean | 7.9 | | |
| Median | 3.3 | | |
| Range | 1–30 | | |
| Drinks consumed per day^g (estimated numbers during past 30 days) | | | |
| Mean | 2.8 | | |
| Median | 1.7 | | |
| Range | 0–30 | | |
| Binge drinking days^g (estimated numbers during past 30 days) | | | |
| Mean | 1.7 | | |
| Median | 0.0 | | |
| Range | 0–30 | | |
| Total | 4,901 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation \geq 30%, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Patients who drank at least 1 alcoholic beverage during the 12 months preceding the interview. Alcoholic beverage was defined as a 12-ounce beer, 5-ounce glass of wine, or 1.5-ounce shot of liquor.

^e Patients who drank \geq 5 alcoholic beverages at one sitting (\geq 4 for women) during the 30 days preceding the interview.

^f Patients who drank, on average, $>$ 2 alcoholic beverages ($>$ 1 for women) per day during the 30 days preceding the interview.

^g Among patients who drank alcohol in the past 30 days.

Table 14. Noninjection drug use during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|---|------------------|----------------|---------------------|
| Use of any noninjection drugs^d | | | |
| Yes | 1,201 | 24.6 | 22.7–26.5 |
| No | 3,682 | 75.4 | 73.5–77.3 |
| Use of any noninjection drugs^d before or during sex | | | |
| Yes | 568 | 11.7 | 10.1–13.2 |
| No | 4,283 | 88.3 | 86.8–89.9 |
| Noninjection drugs^d used by patients | | | |
| Marijuana | | | |
| Yes | 1,021 | 20.8 | 19.2–22.5 |
| No | 3,864 | 79.2 | 77.5–80.8 |
| Poppers (amyl nitrite) | | | |
| Yes | 213 | 4.3 | 2.6–5.9 |
| No | 4,672 | 95.7 | 94.1–97.4 |
| Methamphetamine (crystal meth, tina, crank, ice) | | | |
| Yes | 192 | 3.9 | 2.5–5.4 |
| No | 4,693 | 96.1 | 94.6–97.5 |
| Cocaine that is smoked or snorted | | | |
| Yes | 181 | 3.6 | 3.1–4.2 |
| No | 4,703 | 96.4 | 95.8–96.9 |
| Crack | | | |
| Yes | 142 | 3.0 | 2.4–3.6 |
| No | 4,743 | 97.0 | 96.4–97.6 |
| Painkiller (e.g., Oxycontin, Vicodin, or Percocet) | | | |
| Yes | 102 | 2.1 | 1.6–2.6 |
| No | 4,782 | 97.9 | 97.4–98.4 |
| X or Ecstasy | | | |
| Yes | 75 | 1.7 | 0.9–2.6 |
| No | 4,809 | 98.3 | 97.4–99.1 |
| GHB | | | |
| Yes | 79 | 1.6 | 0.9–2.3 |
| No | 4,805 | 98.4 | 97.7–99.1 |

Table 14. Noninjection drug use during the 12 months before the interview—Medical Monitoring Project, United States, 2012 (cont)

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Downer (e.g., Valium, Ativan, or Xanax) | | | |
| Yes | 75 | 1.5 | 1.0–1.9 |
| No | 4,809 | 98.5 | 98.1–99.0 |
| Amphetamine (speed) | | | |
| Yes | 49 | 1.0 | 0.6–1.4 |
| No | 4,836 | 99.0 | 98.6–99.4 |
| Hallucinogen (e.g., LSD or mushrooms) | | | |
| Yes | 34 | 0.7 | 0.3–1.1 |
| No | 4,850 | 99.3 | 98.9–99.7 |
| Special K (ketamine) | | | |
| Yes | 26 | 0.6 | 0.3–0.9 |
| No | 4,858 | 99.4 | 99.1–99.7 |
| Heroin or opium that is smoked or snorted | | | |
| Yes | 27 | 0.4 | 0.3–0.6 |
| No | 4,857 | 99.6 | 99.4–99.7 |
| Steroid | | | |
| Yes | — | — | — |
| No | — | — | — |
| Total | 4,901 | 100.0 | |

Disclaimer: The use of trade names is for identification only and does not imply endorsement by the Department of Health and Human Services or the Centers for Disease Control and Prevention.

Abbreviations: CI, confidence interval; GHB, gamma hydroxybutyrate; LSD, lysergic acid diethylamide.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Includes all drugs that were not injected (i.e., administered by any route other than injection), including legal drugs that were not used for medical purposes.

Table 15. Injection drug use during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Use of any injection drugs | | | |
| Yes | 125 | 2.4 | 1.3–3.5 |
| No | 4,764 | 97.6 | 96.5–98.7 |
| Use of any injection drugs before or during sex^d | | | |
| Yes | 83 | 77.8 | 69.5–86.0 |
| No | 26 | 22.2 | 14.0–30.5 |
| Injection drugs used by patients | | | |
| Methamphetamine (crystal meth, tina, crank, ice) | | | |
| Yes | 95 | 1.8 | 0.8–2.8 |
| No | 4,794 | 98.2 | 97.2–99.2 |
| Heroin | | | |
| Yes | 30 | 0.6 | 0.3–0.8 |
| No | 4,859 | 99.4 | 99.2–99.7 |
| Cocaine | | | |
| Yes | — | — | — |
| No | — | — | — |
| Heroin and cocaine (speedball) | | | |
| Yes | — | — | — |
| No | — | — | — |
| Crack | | | |
| Yes | — | — | — |
| No | — | — | — |
| Amphetamine (speed) | | | |
| Yes | — | — | — |
| No | — | — | — |
| Oxycontin | | | |
| Yes | — | — | — |
| No | — | — | — |
| Total | 4,901 | 100.0 | |

Disclaimer: The use of trade names is for identification only and does not imply endorsement by the Department of Health and Human Services or the Centers for Disease Control and Prevention.

Abbreviation: CI, confidence interval.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Among patients who used any injection drugs.

Table 16. Gynecological care and reproductive health among women—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| Received HIV care at a gynecological clinic | | | |
| Yes | 289 | 21.3 | 16.6–26.0 |
| No | 978 | 78.7 | 74.0–83.4 |
| Papanicolaou (Pap) smear | | | |
| Yes | 965 | 76.6 | 73.2–80.0 |
| No | 295 | 23.4 | 20.0–26.8 |
| Pregnant since HIV diagnosis | | | |
| Yes | 295 | 24.0 | 20.3–27.7 |
| No | 968 | 76.0 | 72.3–79.7 |
| Given birth since HIV diagnosis^d | | | |
| Yes | 243 | 79.9 | 75.3–84.4 |
| No | 52 | 20.1 | 15.6–24.7 |
| Pregnant (during past 12 months)^d | | | |
| Yes | 35 | 12.6 | 7.7–17.5 |
| No | 260 | 87.4 | 82.5–92.3 |
| Given birth (during past 12 months)^e | | | |
| Yes | — | — | — |
| No | — | — | — |
| Total | 1,268 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Among women who had been pregnant since HIV diagnosis.

^e Among women who had been pregnant during past 12 months.

Table 17. Sexual orientation and sexual activity during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|---|------------------|----------------|---------------------|
| Classification of sexual behavior and sexual orientation^d | | | |
| Any MSM (MSM only, and men who have sex with men and women) | 2,301 | 49.2 | 43.3–55.1 |
| Men who have sex with women only | 1,234 | 24.2 | 21.6–26.9 |
| Any women who have sex with men (women who have sex with men only, and women who have sex with men and women) | 1,230 | 24.9 | 21.5–28.3 |
| Women who have sex with women only | 33 | 0.6 | 0.4–0.9 |
| Any sexual activity | | | |
| Yes | 3,039 | 62.9 | 60.1–65.8 |
| No | 1,821 | 37.1 | 34.2–39.9 |
| Any sexual activity among | | | |
| MSM | | | |
| Yes | 1,636 | 72.3 | 68.7–75.9 |
| No | 657 | 27.7 | 24.1–31.3 |
| Men who have sex with women only | | | |
| Yes | 722 | 59.1 | 56.0–62.2 |
| No | 500 | 40.9 | 37.8–44.0 |
| Women who have sex with men | | | |
| Yes | 629 | 50.6 | 47.9–53.4 |
| No | 588 | 49.4 | 46.6–52.1 |
| Women who have sex with women only | | | |
| Yes | 18 | 54.8 | 32.9–76.6 |
| No | 15 | 45.2 | 23.4–67.1 |
| Transgender | | | |
| Yes | 32 | 53.8 | 40.9–66.6 |
| No | 28 | 46.2 | 33.4–59.1 |
| Engaged in any unprotected^e sex with | | | |
| Any partner | | | |
| Yes | 1,120 | 23.9 | 20.5–27.3 |
| No | 3,620 | 76.1 | 72.7–79.5 |
| Any partner whose HIV status was negative or unknown | | | |
| Yes | 535 | 10.9 | 9.4–12.5 |
| No | 4,190 | 89.1 | 87.5–90.6 |

Table 17. Sexual orientation and sexual activity during the 12 months before the interview—Medical Monitoring Project, United States, 2012 (cont)

| | No. ^a | % ^b | 95% CI ^c |
|---|------------------|----------------|---------------------|
| Estimated number of sex partners^f among | | | |
| MSM | | | |
| Mean | 5.7 | | |
| Median | 1.3 | | |
| Range | 1–300 | | |
| Men who have sex with women only | | | |
| Mean | 1.5 | | |
| Median | 1.0 | | |
| Range | 1–20 | | |
| Women who have sex with men | | | |
| Mean | 1.3 | | |
| Median | 1.0 | | |
| Range | 1–26 | | |
| Women who have sex with women only | | | |
| Mean | 1.2 | | |
| Median | 1.0 | | |
| Range | 1–3 | | |
| Transgender | | | |
| Mean | 2.3 | | |
| Median | 1.0 | | |
| Range | 1–13 | | |
| Total | 4,901 | 100.0 | |

Abbreviations: CI, confidence interval; MSM, men who have sex with men.

Note. Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Sixty transgender persons not included in any of these categories.

^e A condom was not used.

^f Among sexually active patients.

Table 18. Sexual risk behaviors during the 12 months before the interview among men who have sex with men, by type of partner—Medical Monitoring Project, United States, 2012

| Behavior | Any partner ^a | | | Main partner ^b | | | Casual partner ^c | | |
|---|--------------------------|----------------|---------------------|---------------------------|----------------|---------------------|-----------------------------|----------------|---------------------|
| | No. ^d | % ^e | 95% CI ^f | No. ^d | % ^e | 95% CI ^f | No. ^d | % ^e | 95% CI ^f |
| Any anal sex | | | | | | | | | |
| Yes | 1,321 | 59.5 | 56.0–63.0 | 902 | 40.9 | 38.0–43.8 | 766 | 33.3 | 30.1–36.6 |
| No | 932 | 40.5 | 37.0–44.0 | 1,352 | 59.1 | 56.2–62.0 | 1,492 | 66.7 | 63.4–69.9 |
| Any unprotected^g anal sex | | | | | | | | | |
| Yes | 714 | 32.9 | 29.2–36.7 | 475 | 22.2 | 18.7–25.7 | 414 | 17.8 | 14.8–20.9 |
| No | 1,486 | 67.1 | 63.3–70.8 | 1,761 | 77.8 | 74.3–81.3 | 1,802 | 82.2 | 79.1–85.2 |
| Unprotected^g anal sex with partner whose HIV status was negative or unknown | | | | | | | | | |
| Yes | 284 | 12.4 | 10.4–14.5 | 156 | 6.7 | 5.3–8.1 | 171 | 7.3 | 6.0–8.7 |
| No | 1,905 | 87.6 | 85.5–89.6 | 2,079 | 93.3 | 91.9–94.7 | 2,043 | 92.7 | 91.3–94.0 |
| Insertive anal sex | | | | | | | | | |
| Yes | 1,059 | 47.4 | 44.3–50.6 | 692 | 30.8 | 28.2–33.5 | 621 | 27.1 | 24.6–29.7 |
| No | 1,194 | 52.6 | 49.4–55.7 | 1,562 | 69.2 | 66.5–71.8 | 1,636 | 72.9 | 70.3–75.4 |
| Unprotected^g insertive anal sex | | | | | | | | | |
| Yes | 553 | 24.7 | 21.7–27.7 | 344 | 15.7 | 12.9–18.5 | 324 | 13.7 | 11.7–15.7 |
| No | 1,697 | 75.3 | 72.3–78.3 | 1,910 | 84.3 | 81.5–87.1 | 1,932 | 86.3 | 84.3–88.3 |
| Unprotected^g insertive anal sex with partner whose HIV status was negative or unknown | | | | | | | | | |
| Yes | 166 | 7.2 | 5.9–8.4 | 82 | 3.5 | 2.6–4.3 | 105 | 4.4 | 3.5–5.4 |
| No | 2,083 | 92.8 | 91.6–94.1 | 2,172 | 96.5 | 95.7–97.4 | 2,151 | 95.6 | 94.6–96.5 |

Table 18. Sexual risk behaviors during the 12 months before the interview among men who have sex with men, by type of partner—Medical Monitoring Project, United States, 2012 (cont)

| Behavior | Any partner ^a | | | Main partner ^b | | | Casual partner ^c | | |
|---|--------------------------|----------------|---------------------|---------------------------|----------------|---------------------|-----------------------------|----------------|---------------------|
| | No. ^d | % ^e | 95% CI ^f | No. ^d | % ^e | 95% CI ^f | No. ^d | % ^e | 95% CI ^f |
| Receptive anal sex | | | | | | | | | |
| Yes | 1,030 | 47.7 | 43.4–52.0 | 689 | 32.3 | 28.9–35.8 | 578 | 25.6 | 22.5–28.7 |
| No | 1,198 | 52.3 | 48.0–56.6 | 1,556 | 67.7 | 64.2–71.1 | 1,661 | 74.4 | 71.3–77.5 |
| Unprotected^g receptive anal sex | | | | | | | | | |
| Yes | 552 | 26.0 | 22.0–30.0 | 373 | 18.1 | 14.4–21.8 | 307 | 13.2 | 10.6–15.9 |
| No | 1,644 | 74.0 | 70.0–78.0 | 1,863 | 81.9 | 78.2–85.6 | 1,909 | 86.8 | 84.1–89.4 |
| Unprotected^g receptive anal sex with partner whose HIV status was negative or unknown | | | | | | | | | |
| Yes | 209 | 9.5 | 7.8–11.2 | 118 | 5.2 | 4.0–6.4 | 120 | 5.4 | 4.3–6.5 |
| No | 1,979 | 90.5 | 88.8–92.2 | 2,117 | 94.8 | 93.6–96.0 | 2,094 | 94.6 | 93.5–95.7 |
| Total | 2,301 | 100.0 | | 2,301 | 100.0 | | 2,301 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Men who have sex with men were defined as men who reported sex with men during the 12 months preceding the interview, regardless of whether they also reported sex with women, or if no sexual activity was reported, men who identified as homosexual, gay, or bisexual.

Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Indicates whether the behavior was reported with any sexual partner.

^b A partner with whom the patient had sex and to whom he felt most committed (e.g., boyfriend, spouse, significant other, or life partner).

^c A partner with whom the patient had sex but to whom he did not feel committed or whom he did not know very well.

^d Numbers are unweighted.

^e Percentages are weighted percentages.

^f CIs incorporate weighted percentages.

^g A condom was not used.

Table 19. Sexual risk behaviors during the 12 months before the interview among men who have sex with women, by type of partner—Medical Monitoring Project, United States, 2012

| Behavior | Any partner ^a | | | Main partner ^b | | | Casual partner ^c | | |
|--|--------------------------|----------------|---------------------|---------------------------|----------------|---------------------|-----------------------------|----------------|---------------------|
| | No. ^d | % ^e | 95% CI ^f | No. ^d | % ^e | 95% CI ^f | No. ^d | % ^e | 95% CI ^f |
| Any vaginal sex | | | | | | | | | |
| Yes | 692 | 56.8 | 53.5–60.0 | 545 | 44.4 | 40.6–48.2 | 184 | 15.6 | 13.1–18.1 |
| No | 527 | 43.2 | 40.0–46.5 | 675 | 55.6 | 51.8–59.4 | 1,035 | 84.4 | 81.9–86.9 |
| Any unprotected^g vaginal sex | | | | | | | | | |
| Yes | 169 | 13.2 | 9.6–16.9 | 138 | 10.8 | 7.5–14.1 | 40 | 3.3 | 1.8–4.7 |
| No | 1,050 | 86.8 | 83.1–90.4 | 1,082 | 89.2 | 85.9–92.5 | 1,179 | 96.7 | 95.3–98.2 |
| Unprotected^g vaginal sex with partner whose HIV status was negative or unknown | | | | | | | | | |
| Yes | 102 | 7.8 | 5.3–10.2 | 85 | 6.4 | 4.1–8.7 | — | — | — |
| No | 1,117 | 92.2 | 89.8–94.7 | 1,135 | 93.6 | 91.3–95.9 | — | — | — |
| Any anal sex | | | | | | | | | |
| Yes | 81 | 6.5 | 4.7–8.2 | 53 | 4.2 | 2.9–5.5 | 32 | 2.5 | 1.6–3.4 |
| No | 1,129 | 93.5 | 91.8–95.3 | 1,160 | 95.8 | 94.5–97.1 | 1,186 | 97.5 | 96.6–98.4 |
| Unprotected^g anal sex | | | | | | | | | |
| Yes | — | — | — | — | — | — | — | — | — |
| No | — | — | — | — | — | — | — | — | — |
| Unprotected^g anal sex with partner whose HIV status was negative or unknown | | | | | | | | | |
| Yes | — | — | — | — | — | — | — | — | — |
| No | — | — | — | — | — | — | — | — | — |
| Total | 1,234 | 100.0 | | 1,234 | 100.0 | | 1,234 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Men who exclusively have sex with women were defined as men who reported sex only with women during the 12 months preceding the interview, or if no sexual activity was reported, men who identified as heterosexual or straight.

Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Indicates whether the behavior was reported with any sexual partner.

^b A partner with whom the patient had sex and to whom he felt most committed (e.g., girlfriend, spouse, significant other, or life partner).

^c A partner with whom the patient had sex but to whom he did not feel committed or whom he did not know very well.

^d Numbers are unweighted.

^e Percentages are weighted percentages.

^f CIs incorporate weighted percentages.

^g A condom was not used.

Table 20. Sexual risk behaviors during the 12 months before the interview among women who have sex with men, by type of partner—Medical Monitoring Project, United States, 2012

| Behavior | Any partner ^a | | | Main partner ^b | | | Casual partner ^c | | |
|--|--------------------------|----------------|---------------------|---------------------------|----------------|---------------------|-----------------------------|----------------|---------------------|
| | No. ^d | % ^e | 95% CI ^f | No. ^d | % ^e | 95% CI ^f | No. ^d | % ^e | 95% CI ^f |
| Any vaginal sex | | | | | | | | | |
| Yes | 605 | 49.1 | 46.5–51.7 | 550 | 44.5 | 42.0–47.0 | 85 | 6.8 | 5.6–8.0 |
| No | 605 | 50.9 | 48.3–53.5 | 660 | 55.5 | 53.0–58.0 | 1,126 | 93.2 | 92.0–94.4 |
| Any unprotected^g vaginal sex | | | | | | | | | |
| Yes | 209 | 16.8 | 14.4–19.2 | 196 | 16.0 | 13.6–18.4 | 15 | 0.9 | 0.5–1.4 |
| No | 1,001 | 83.2 | 80.8–85.6 | 1,014 | 84.0 | 81.6–86.4 | 1,196 | 99.1 | 98.6–99.5 |
| Unprotected^g vaginal sex with partner whose HIV status was negative or unknown | | | | | | | | | |
| Yes | 128 | 10.3 | 8.7–12.0 | 120 | 9.9 | 8.4–11.5 | — | — | — |
| No | 1,082 | 89.7 | 88.0–91.3 | 1,090 | 90.1 | 88.5–91.6 | — | — | — |
| Any anal sex | | | | | | | | | |
| Yes | 62 | 5.3 | 4.0–6.6 | 54 | 4.6 | 3.3–5.8 | — | — | — |
| No | 1,144 | 94.7 | 93.4–96.0 | 1,153 | 95.4 | 94.2–96.7 | — | — | — |
| Unprotected^g anal sex | | | | | | | | | |
| Yes | 32 | 2.5 | 1.3–3.8 | 30 | 2.4 | 1.2–3.6 | — | — | — |
| No | 1,174 | 97.5 | 96.2–98.7 | 1,177 | 97.6 | 96.4–98.8 | — | — | — |
| Unprotected^g anal sex with partner whose HIV status was negative or unknown | | | | | | | | | |
| Yes | 19 | 1.6 | 0.7–2.5 | — | — | — | — | — | — |
| No | 1,187 | 98.4 | 97.5–99.3 | — | — | — | — | — | — |
| Total | 1,230 | 100.0 | | 1,230 | 100.0 | | 1,230 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Women who have sex with men were defined as women who reported sex with men during the 12 months preceding the interview, regardless of whether they also reported sex with women, or if no sexual activity was reported, women who identified as heterosexual, straight, or bisexual.

Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Indicates whether the behavior was reported with any sexual partner.

^b A partner with whom the patient had sex and to whom she felt most committed (e.g., boyfriend, spouse, significant other, or life partner).

^c A partner with whom the patient had sex but to whom she did not feel committed or whom she did not know very well.

^d Numbers are unweighted.

^e Percentages are weighted percentages.

^f CIs incorporate weighted percentages.

^g A condom was not used.

Table 21. Met and unmet needs for ancillary services during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | Persons who received services | | | Persons who needed but did not receive services by time of interview | | | Persons who did not need or receive services | | |
|--|-------------------------------|----------------|---------------------|--|----------------|---------------------|--|----------------|---------------------|
| | No. ^a | % ^b | 95% CI ^c | No. ^a | % ^b | 95% CI ^c | No. ^a | % ^b | 95% CI ^c |
| Dental care | | | | | | | | | |
| Yes | 2,880 | 59.5 | 56.5–62.5 | 1,155 | 22.3 | 19.7–24.8 | 862 | 18.2 | 16.6–19.8 |
| No | 2,019 | 40.5 | 37.5–43.5 | 3,743 | 77.7 | 75.2–80.3 | 4,036 | 81.8 | 80.2–83.4 |
| HIV case management services | | | | | | | | | |
| Yes | 2,859 | 57.1 | 52.5–61.6 | 215 | 4.4 | 3.4–5.4 | 1,812 | 38.5 | 34.0–42.9 |
| No | 2,033 | 42.9 | 38.4–47.5 | 4,679 | 95.6 | 94.6–96.6 | 3,074 | 61.5 | 57.1–66.0 |
| Medicine through ADAP | | | | | | | | | |
| Yes | 2,093 | 43.4 | 40.4–46.4 | 113 | 2.3 | 1.7–2.8 | 2,598 | 54.3 | 51.1–57.4 |
| No | 2,715 | 56.6 | 53.6–59.6 | 4,734 | 97.7 | 97.2–98.3 | 2,208 | 45.7 | 42.6–48.9 |
| Public benefits (e.g., SSI or SSDI) | | | | | | | | | |
| Yes | 2,182 | 42.9 | 40.4–45.3 | 515 | 10.7 | 9.1–12.2 | 2,197 | 46.4 | 43.3–49.5 |
| No | 2,717 | 57.1 | 54.7–59.6 | 4,379 | 89.3 | 87.8–90.9 | 2,698 | 53.6 | 50.5–56.7 |
| Counseling about how to prevent spread of HIV | | | | | | | | | |
| Yes | 2,073 | 41.1 | 36.2–45.9 | 55 | 1.0 | 0.7–1.3 | 2,770 | 58.0 | 53.1–62.8 |
| No | 2,825 | 58.9 | 54.1–63.8 | 4,844 | 99.0 | 98.7–99.3 | 2,128 | 42.0 | 37.2–46.9 |
| Meal or food services | | | | | | | | | |
| Yes | 1,351 | 27.1 | 24.6–29.6 | 309 | 5.9 | 4.9–6.9 | 3,240 | 67.0 | 64.0–70.0 |
| No | 3,549 | 72.9 | 70.4–75.4 | 4,591 | 94.1 | 93.1–95.1 | 1,660 | 33.0 | 30.0–36.0 |
| Mental health services | | | | | | | | | |
| Yes | 1,324 | 26.2 | 23.9–28.5 | 290 | 5.9 | 4.4–7.4 | 3,284 | 67.9 | 65.3–70.6 |
| No | 3,576 | 73.8 | 71.5–76.1 | 4,608 | 94.1 | 92.6–95.6 | 1,614 | 32.1 | 29.4–34.7 |
| Transportation assistance | | | | | | | | | |
| Yes | 1,190 | 23.5 | 20.5–26.4 | 381 | 7.5 | 6.2–8.8 | 3,327 | 69.0 | 65.7–72.4 |
| No | 3,709 | 76.5 | 73.6–79.5 | 4,518 | 92.5 | 91.2–93.8 | 1,571 | 31.0 | 27.6–34.3 |
| Professional help remembering to take HIV medicines on time or correctly (adherence support services) | | | | | | | | | |
| Yes | 956 | 18.5 | 16.2–20.8 | 101 | 1.9 | 1.4–2.4 | 3,841 | 79.6 | 77.3–81.9 |
| No | 3,943 | 81.5 | 79.2–83.8 | 4,798 | 98.1 | 97.6–98.6 | 1,057 | 20.4 | 18.1–22.7 |

Table 21. Met and unmet needs for ancillary services during the 12 months before the interview—Medical Monitoring Project, United States, 2012 (cont)

| | Persons who received services | | | Persons who needed but did not receive services by time of interview | | | Persons who did not need or receive services | | |
|--|-------------------------------|----------------|---------------------|--|----------------|---------------------|--|----------------|---------------------|
| | No. ^a | % ^b | 95% CI ^c | No. ^a | % ^b | 95% CI ^c | No. ^a | % ^b | 95% CI ^c |
| Shelter or housing services | | | | | | | | | |
| Yes | 788 | 15.7 | 14.3–17.2 | 326 | 6.7 | 5.6–7.7 | 3,785 | 77.6 | 75.9–79.3 |
| No | 4,111 | 84.3 | 82.8–85.7 | 4,573 | 93.3 | 92.3–94.4 | 1,114 | 22.4 | 20.7–24.1 |
| HIV peer group support | | | | | | | | | |
| Yes | 759 | 14.4 | 12.4–16.4 | 340 | 7.0 | 5.5–8.5 | 3,788 | 78.6 | 76.4–80.7 |
| No | 4,140 | 85.6 | 83.6–87.6 | 4,548 | 93.0 | 91.5–94.5 | 1,099 | 21.4 | 19.3–23.6 |
| Drug or alcohol counseling or treatment | | | | | | | | | |
| Yes | 449 | 8.4 | 7.0–9.8 | 73 | 1.4 | 1.0–1.8 | 4,376 | 90.2 | 88.8–91.7 |
| No | 4,449 | 91.6 | 90.2–93.0 | 4,826 | 98.6 | 98.2–99.0 | 522 | 9.8 | 8.3–11.2 |
| Home health services | | | | | | | | | |
| Yes | 335 | 6.8 | 5.9–7.8 | 120 | 2.6 | 2.1–3.2 | 4,445 | 90.5 | 89.3–91.7 |
| No | 4,565 | 93.2 | 92.2–94.1 | 4,780 | 97.4 | 96.8–97.9 | 455 | 9.5 | 8.3–10.7 |
| Interpreter services | | | | | | | | | |
| Yes | 181 | 3.4 | 2.5–4.4 | 13 | 0.2 | 0.1–0.4 | 4,706 | 96.3 | 95.4–97.3 |
| No | 4,719 | 96.6 | 95.6–97.5 | 4,887 | 99.8 | 99.6–99.9 | 194 | 3.7 | 2.7–4.6 |
| Domestic violence services | | | | | | | | | |
| Yes | 75 | 1.6 | 1.1–2.1 | 28 | 0.5 | 0.3–0.6 | 4,797 | 97.9 | 97.4–98.4 |
| No | 4,825 | 98.4 | 97.9–98.9 | 4,872 | 99.5 | 99.4–99.7 | 103 | 2.1 | 1.6–2.6 |
| Childcare services | | | | | | | | | |
| Yes | 50 | 1.1 | 0.6–1.6 | 49 | 0.9 | 0.6–1.2 | 4,800 | 97.9 | 97.4–98.5 |
| No | 4,850 | 98.9 | 98.4–99.4 | 4,850 | 99.1 | 98.8–99.4 | 99 | 2.1 | 1.5–2.6 |
| Total | 4,901 | 100.0 | | 4,901 | 100.0 | | 4,901 | 100.0 | |

Abbreviations: CI, confidence interval; SSI, Supplemental Security Income; SSDI, Social Security Disability Insurance; ADAP, AIDS Drug Assistance Program.

Note. Patients could report receiving or needing more than one service.

Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

Table 22. Prevention services received during the 12 months before the interview—Medical Monitoring Project, United States, 2012

| | No. ^a | % ^b | 95% CI ^c |
|--|------------------|----------------|---------------------|
| One-on-one conversation with physician, nurse, or other health care worker | | | |
| Yes | 2,151 | 43.4 | 39.2–47.6 |
| No | 2,725 | 56.6 | 52.4–60.8 |
| One-on-one conversation with outreach worker, counselor, or prevention program worker | | | |
| Yes | 1,418 | 28.0 | 23.8–32.2 |
| No | 3,457 | 72.0 | 67.8–76.2 |
| Organized session involving a small group of people | | | |
| Yes | 727 | 13.3 | 10.5–16.1 |
| No | 4,154 | 86.7 | 83.9–89.5 |
| Free condoms | | | |
| Yes | 2,640 | 54.2 | 50.7–57.6 |
| No | 2,243 | 45.8 | 42.4–49.3 |
| Source of free condoms^d | | | |
| General health clinic | | | |
| Yes | 1,562 | 61.3 | 55.6–67.0 |
| No | 1,074 | 38.7 | 33.0–44.4 |
| Community-based organization | | | |
| Yes | 780 | 29.3 | 23.4–35.2 |
| No | 1,856 | 70.7 | 64.8–76.6 |
| Social venue | | | |
| Yes | 372 | 15.4 | 10.5–20.3 |
| No | 2,264 | 84.6 | 79.7–89.5 |
| Special event | | | |
| Yes | 176 | 7.0 | 4.4–9.5 |
| No | 2,460 | 93.0 | 90.5–95.6 |
| Sexually transmitted disease clinic | | | |
| Yes | 198 | 6.3 | 1.8–10.7 |
| No | 2,438 | 93.7 | 89.3–98.2 |
| Outreach organization for persons who inject drugs | | | |
| Yes | 32 | 1.1 | 0.6–1.6 |
| No | 2,604 | 98.9 | 98.4–99.4 |
| Family planning clinic | | | |
| Yes | 26 | 1.0 | 0.4–1.5 |
| No | 2,610 | 99.0 | 98.5–99.6 |
| Total | 4,901 | 100.0 | |

Abbreviation: CI, confidence interval.

Note. Patients could report receiving more than one prevention service.

Numbers might not add to total because of missing data. Percentages might not sum to 100 because of rounding.

Excluded are choices with fewer than 5 responses, values with a coefficient of variation $\geq 30\%$, “don’t know” responses, and skipped (missing) responses.

^a Numbers are unweighted.

^b Percentages are weighted percentages.

^c CIs incorporate weighted percentages.

^d Among patients who received free condoms.

Appendix: Methods and Definitions

METHODS

Sampling and nonresponse analyses were conducted, and weighting methods were applied, as described previously [1]. There were 5 updates to the nonresponse analysis and weighting procedures used for 2011 and 2012 data, none of which substantially changed prevalence estimates from previous years. First, patient eligibility was categorized in the same way across datasets. For example, a patient who was categorized as ineligible in the interview datasets was also categorized as ineligible in the medical record abstraction (MRA) dataset. Second, patient interview data were used as the primary source for demographic data in 2011 and 2012, while MRA data were used as the primary source for demographic data in 2010. Third, the nonresponse analysis was conducted separately for the overlap dataset (contains all patients who were both interviewed and had their medical records abstracted) and for the MRA dataset. Nonresponse analysis for the overlap datasets was informed by factors associated with nonresponse to the overlap dataset, and nonresponse analysis for the MRA dataset was informed by factors associated with nonresponse to the MRA. Fourth, an additional facility eligibility adjustment was applied to account for underestimation of ineligible facilities due to the linkage of large and small facilities for sampling purposes. Fifth, an adjustment that used patient data to weight facilities up to the frame total was removed from weighting procedures.

DEFINITIONS

Sociodemographic Characteristics

- **Gender:** Categories were male, female, and transgender. Participants were classified as transgender if reported sex at birth and current gender as reported by the participant were not the same or if the participant answered “transgender” to the interview question regarding self-identified gender.
- **Health insurance or other coverage for antiretroviral therapy (ART) medications:** Participants were asked whether they had health insurance and whether they had other coverage for ART medications during the 12 months before interview.

Responses to these questions were combined and categorized as private health insurance, Medicaid, Medicare, Ryan White HIV/AIDS Program, Tricare/CHAMPUS and Veterans Administration coverage, insurance classified as other public health insurance, and unknown insurance. Participants could select >1 response for health insurance or other coverage for ART medications.

- **Federal poverty guidelines:** Participants were asked about their combined monthly or yearly household income (in US\$) from all sources during the 12 months before interview. The number of persons meeting the current federal poverty threshold was determined by using the U.S. Department of Health and Human Services poverty guidelines that corresponded to the calendar year for which income was asked. These guidelines are issued yearly for the 48 contiguous U.S. states and Washington, D.C., and are one indicator used for determining eligibility for many federal and state programs. The 2011 guidelines [2] were used for participants interviewed in 2012, and the 2012 guidelines [3] were used for persons interviewed in 2013. Because the poverty guidelines are not defined for the territory of Puerto Rico, the guidelines for the contiguous states and Washington, D.C., were used for this jurisdiction. Participants were asked to specify the range of their income. If the participant’s income range and household size resulted in an ambiguous determination of poverty level, the participant’s household income was assumed to be the midpoint of the income range.

Clinical Characteristics

- **CDC stage of disease classification for HIV infection:** Defined according to CDC’s 2008 revised surveillance case definition for HIV infection [4]. To determine the stage of HIV infection, medical record data from the time since HIV diagnosis and the 12 months before interview were abstracted.

Use of Health Care Services

- **HIV medical care:** Participants were asked whether, during the 12 months before the interview, they had a usual source of primary HIV medical care. HIV medical care was defined as CD4 count or viral load testing and prescribing ART in the context of treating and managing a patient's HIV disease on an outpatient basis.
- **ART prescription:** Defined as a prescription in the medical record, during the 12 months before the interview, of any of the following medications: abacavir, amprenavir, atazanavir, cobicistat, darunavir, delavirdine, didanosine, dolutegravir, efavirenz, elvitegravir, emtricitabine, enfuvirtide, etravirine, fosamprenavir, indinavir, lamivudine, lopinavir/ritonavir, maraviroc, nelfinavir, nevirapine, raltegravir, rilpivavirine, ritonavir, saquinavir, stavudine, tenofovir, tipranavir, zalcitabine, or zidovudine.
- ***Pneumocystis pneumonia* (PCP) prophylaxis:** Defined as documentation in the medical record, during the 12 months before the interview, that prophylaxis for PCP was prescribed or that regimens typically given as PCP prophylaxis were prescribed (trimethoprim-sulfamethoxazole, dapsone with or without pyrimethamine and leucovorin, aerosolized pentamidine, and atovaquone) among persons with a CD4 count of <200 cells/ μ L during the 12 months before the interview [5].
- ***Mycobacterium avium* complex (MAC) prophylaxis:** Defined as documentation in the medical record, during the 12 months before the interview, that prophylaxis for MAC disease was prescribed or that regimens typically given as MAC prophylaxis were prescribed: (azithromycin with or without ethambutol and/or rifabutin, clarithromycin with or without ethambutol and/or rifabutin, and rifabutin with or without azithromycin or azithromycin along with ethambutol) among persons with a CD4 count of <50 cells/ μ L in the 12 months before the interview [5].
- ***Neisseria gonorrhoeae* testing:** Defined as documentation in the medical record, during the 12 months before the interview, of a result from culture, gram stain, nucleic acid amplification test (NAAT), or nucleic acid probe.
- ***Chlamydia trachomatis* testing:** Defined as documentation in the medical record, during the 12

months before the interview, of a result from culture, direct fluorescent antibody (DFA), enzyme immunoassay (EIA) or enzyme-linked immunoassay (ELISA), NAAT, or nucleic acid probe.

- **Syphilis testing:** Defined as documentation in the medical record, during the 12 months before the interview, of a result from non-treponemal syphilis tests (rapid plasma reagin [RPR], Venereal Disease Research Laboratory [VDRL]), treponemal syphilis tests (*Treponema pallidum* hemagglutination assay [TPHA], *T. pallidum* particle agglutination [TP-PA], microhemagglutination for antibody to *T. pallidum* [MHA-TP], fluorescent treponemal antibody absorption [FTA-ABS] tests), or dark-field microscopy.
- **Influenza vaccination:** Participants were asked whether they had received seasonal influenza vaccine during the 12 months before the interview.

Self-reported Antiretroviral Medication Use and Adherence

- **ART adherence:** Participants were asked about adherence, over the past 3 days, to ART doses, schedules, and special instructions for taking ART. *Dose adherence* referred to taking a dose or set of pills/spoonfuls/injections of ART medications. *Schedule adherence* referred to following a specific schedule for ART medication timing, such as “2 times a day” or “every 8 hours.” *Special instruction adherence* referred to following special instructions for ART medication, such as “take with food” or “on an empty stomach.”

Depression and Substance Use

- **Depression:** Participants were asked questions from the Patient Health Questionnaire (PHQ-8), an 8-item scale used to measure frequency of depressed mood in the preceding 2 weeks [6]. The PHQ-8 has the following question: “Over the last 2 weeks, how often have you been bothered by any of the following problems?” The respondent is then asked about the following problems: (1) little interest or pleasure in doing things (anhedonia); (2) feeling down, depressed, or hopeless; (3) trouble falling/staying asleep, or sleeping too much; (4) feeling tired or having little energy; (5) poor appetite or overeating; (6) feeling bad about yourself or that you are a failure or have let yourself or your family down; (7) trouble concen-

trating on things, such as reading the newspaper or watching television; (8) moving or speaking so slowly that other people could have noticed, or being fidgety or restless or moving around a lot more than usual. Response categories were “not at all,” “several days,” “more than half the days,” and “nearly every day.” The PHQ-8 responses were scored by using 2 methods. Method 1: an algorithm involving criteria from the *Diagnostic and Statistical Manual of Mental Disorders*, 4th ed (DSM-IV-TR) [7], for diagnosing major depression was used to classify adults receiving medical care for HIV infection as having major depression, other depression, or no depression. To meet the criteria for any type of depression, a participant must have experienced a number of symptoms, at least 1 of which was anhedonia or feelings of hopelessness (at least 5 symptoms for major depression, 2 to 4 symptoms for other types of depression) for half the days or nearly every day. Method 2: a score-based method, calculated as the sum of scores from the responses in the scale, was used to determine the presence of current depression of moderate or severe intensity, which was defined as a sum score of ≥ 10 .

- **Alcohol use:** Participants were asked about alcohol use during the 12 months and 30 days before the interview. A drink was defined as 12 ounces of beer, a 5-ounce glass of wine, or a 1.5-ounce shot of liquor.
- **Heavy drinking:** Defined as an average of >2 drinks per day, or >14 drinks per week, for men and an average of >1 drink per day, or >7 drinks per week, for women.
- **Binge drinking:** Defined as ≥ 5 drinks in one sitting for men and ≥ 4 drinks in one sitting for women.

Sexual Behavior

- **Sexual behavior:** Defined as anal intercourse, vaginal intercourse, or oral sex for men who have sex with men, men who have sex with women, and women who have sex with men. Defined as anal intercourse or vaginal intercourse for transgender persons. Defined as any sexual activity for women who have sex with women.
- **Gender of sex partners and sexual orientation:** Men who have sex with men (MSM) were defined

as men who reported sex with one or more men in the 12 months before interview, regardless of whether they also reported sex with women, or if no sexual activity was reported, men who self-identified as homosexual, gay, or bisexual. Men who exclusively have sex with women were defined as men who reported sex only with women in the 12 months before interview, or if no sexual activity reported, men who self-identified as heterosexual/straight. Women who have sex with men were defined as women who reported sex with one or more men in the 12 months before interview, regardless of whether they also reported sex with women, or if no sexual activity was reported, women who self-identified as heterosexual/straight or bisexual. Women who exclusively have sex with women were defined as women who reported sex with women only in the 12 months before interview, or if no sexual activity was reported, women who self-identified as homosexual, gay, or lesbian. Participants who did not fit into any of the categories above (i.e., were unclassified because they had not engaged in sexual activity during the past year and did not report their sexual orientation) were categorized as other/unclassified.

- **Main and casual sex partners:** Participants reporting sexual activity in the 12 months before the interview were asked about the number of sex partners and whether they considered the partners to be main or casual. A main partner was defined as a person to whom the respondent felt most committed. A casual partner was defined as a person to whom the respondent did not feel committed or whom he or she did not know very well.
- **Unprotected sex:** Defined as vaginal or anal intercourse without a condom or condom use for part of the time during a sexual act during the 12 months before the interview.
- **Unprotected sex with partners of negative or unknown status:** The number of HIV-positive partners reported by a participant during the 12 months before the interview was subtracted from the total number of partners with whom the participant reported unprotected sex. If the numbers were not equal (i.e., not all partners were HIV-positive), the participant was considered to have had unprotected sex with a partner of negative or unknown HIV status.

Met and Unmet Needs for Ancillary Services

- **Met need:** Defined as an ancillary service (e.g., HIV case management services, dental care, mental health services) received during the 12 months before the interview.
- **Unmet need:** Defined as an ancillary service that the participant reported as needed but not received during the 12 months before the interview.

ETHICS STATEMENT

In accordance with the federal human subjects protection regulations at 45 Code of Federal Regulations 46.101c and 46.102d [8] and with the Guidelines for Defining Public Health Research and Public Health Non-Research [9], MMP was determined by CDC to be a nonresearch, public health surveillance activity used for disease control program or policy purposes. As such, MMP is not subject to human subjects regulations, including federal investigational review board review. Participating states or territories and facilities obtained local institutional review board approval to conduct MMP if required locally. Informed consent was obtained from all interviewed participants.

REFERENCES

1. CDC. *Behavioral and Clinical Characteristics of Persons Receiving Medical Care for HIV Infection—Medical Monitoring Project, United States, 2010*. HIV Surveillance Special Report 9. http://www.cdc.gov/hiv/pdf/MMP_2010_surveillancesummary.pdf. Published October 2014. Accessed July 27, 2015.
2. U.S. Department of Health and Human Services. The 2011 HHS poverty guidelines. <http://aspe.hhs.gov/poverty/11poverty.shtml>. Published 2011. Accessed July 27, 2015.
3. U.S. Department of Health and Human Services. 2012 HHS poverty guidelines. <http://aspe.hhs.gov/poverty/12poverty.shtml>. Published 2012. Accessed July 27, 2015.
4. CDC. Revised surveillance case definitions for HIV infection among adults, adolescents, and children aged <18 months and for HIV infection and AIDS among children aged 18 months to <13 years—United States, 2008. *MMWR* 2008;57(RR-10):1–12.
5. Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the use of antiretroviral agents in HIV-1–infected adults and adolescents. <http://go.usa.gov/vdGA>. Updated April 8, 2015. Accessed July 27, 2015.
6. Kroenke K, Strine TW, Spitzer RL, et al. The PHQ-8 as a measure of current depression in the general population. *J Affect Disord* 2009;114(1–3):163–173.
7. American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders: DSM-IV-TR*. 4th ed. Washington, DC: American Psychiatric Association; 2000.
8. U.S. Department of Health and Human Services. Protection of Human Subjects, US Federal Code Title 45 Part 46. <http://go.usa.gov/vdwG>. Published 2009. Accessed July 27, 2015.
9. CDC. Distinguishing public health research and public health nonresearch. <http://go.usa.gov/vdwz>. Published 2010. Accessed July 27, 2015.