



Demographic Breakdowns of the HIV Care Continuum in Minnesota

STI/HIV/TB Section at the Minnesota Department of Health

PROTECTING, MAINTAINING AND IMPROVING THE HEALTH OF ALL MINNESOTANS

HIV Care Continuum Definitions

- **People Living with Diagnosed HIV/AIDS (PWH)**

Defined as people age 13 and older with HIV infection (regardless of stage of diagnosis) **and reported** to the Minnesota Department of Health through year-end 2022, who were alive at year-end 2023

- **Linked to Care**

Calculated as the percentage of people age 13 and older linked to care within 30 days after initial HIV diagnosis **during 2022**. Note that linkage to care has a different denominator than all the other bars, because it focuses on one year of new HIV diagnoses.

- **Virally Suppressed within 6 Months (NEW)**

Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

- **Retained in Care**

Calculated as the percentage of people age 13 and older who had ≥ 1 CD4 or viral load tests reported to MDH during 2023 among those diagnosed with HIV through year-end 2022 and alive at year-end 2023.

- **Virally Suppressed**

Calculated as the percentage of people age 13 and older who had a suppressed viral load (≤ 200 copies/mL) at most recent test during 2023, among those diagnosed with HIV through year-end 2022 and alive at year-end 2023.

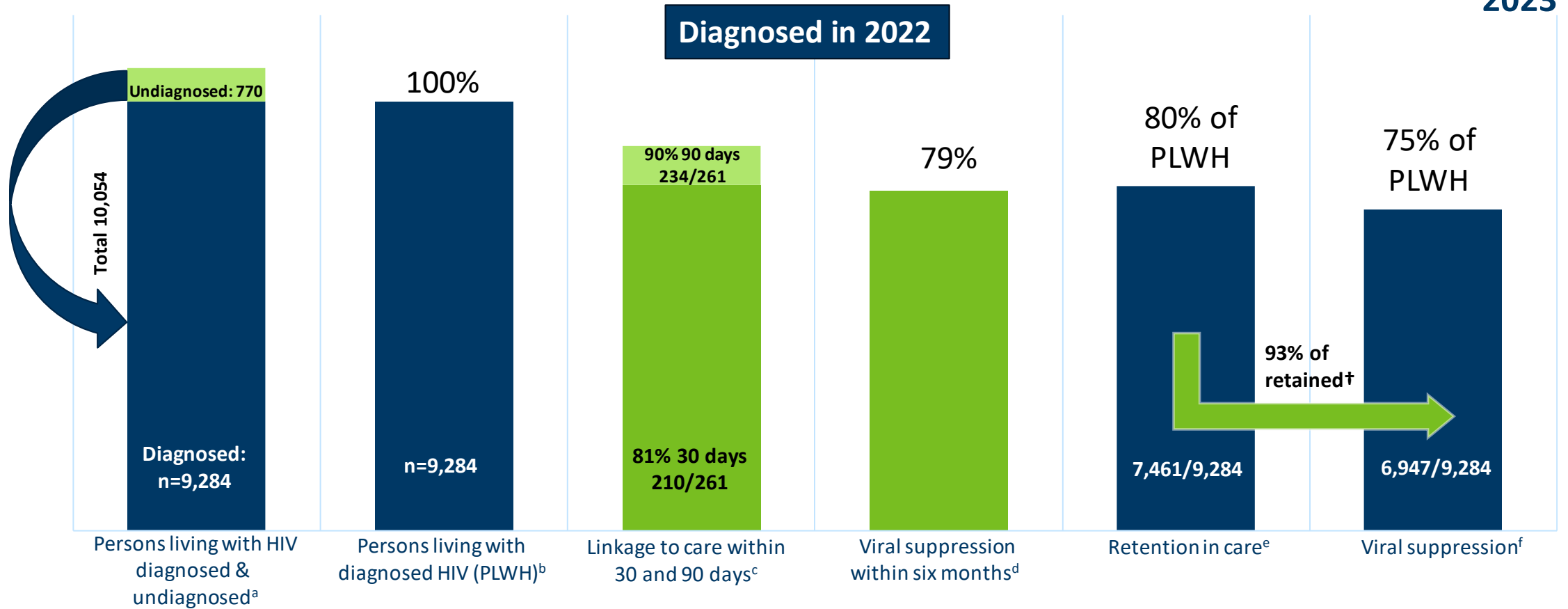
Virally Suppressed within 6 months – a new measurement

We added a new measurement in the 2023 Care Continuum. You will notice an extra bar for viral suppression within 6 months of initial HIV diagnosis.

“Virally Suppressed within 6 Months (NEW): Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.”

*Historical data is available for this measurement. See slide 11

Percentages of persons with HIV engaged in selected stages of the continuum of care – Minnesota, 2023



^a Defined as persons undiagnosed (estimate 770 (150-1,400), 95% CI) and persons diagnosed (n=9,284) aged 13 or more with HIV infection (regardless of stage at diagnosis) through year-end 2022, who were alive at year-end 2023.

^b Defined as persons diagnosed aged 13 or more with HIV infection (regardless of stage at diagnosis) through year-end 2022, who were alive at year-end 2023.

^c Calculated as the percentage of persons linked to care within 30 and 90 days after initial HIV diagnosis during 2022. Linkage to care is based on the number of persons diagnosed during 2022 and is therefore shown in a different color than the other bars with a different denominator.

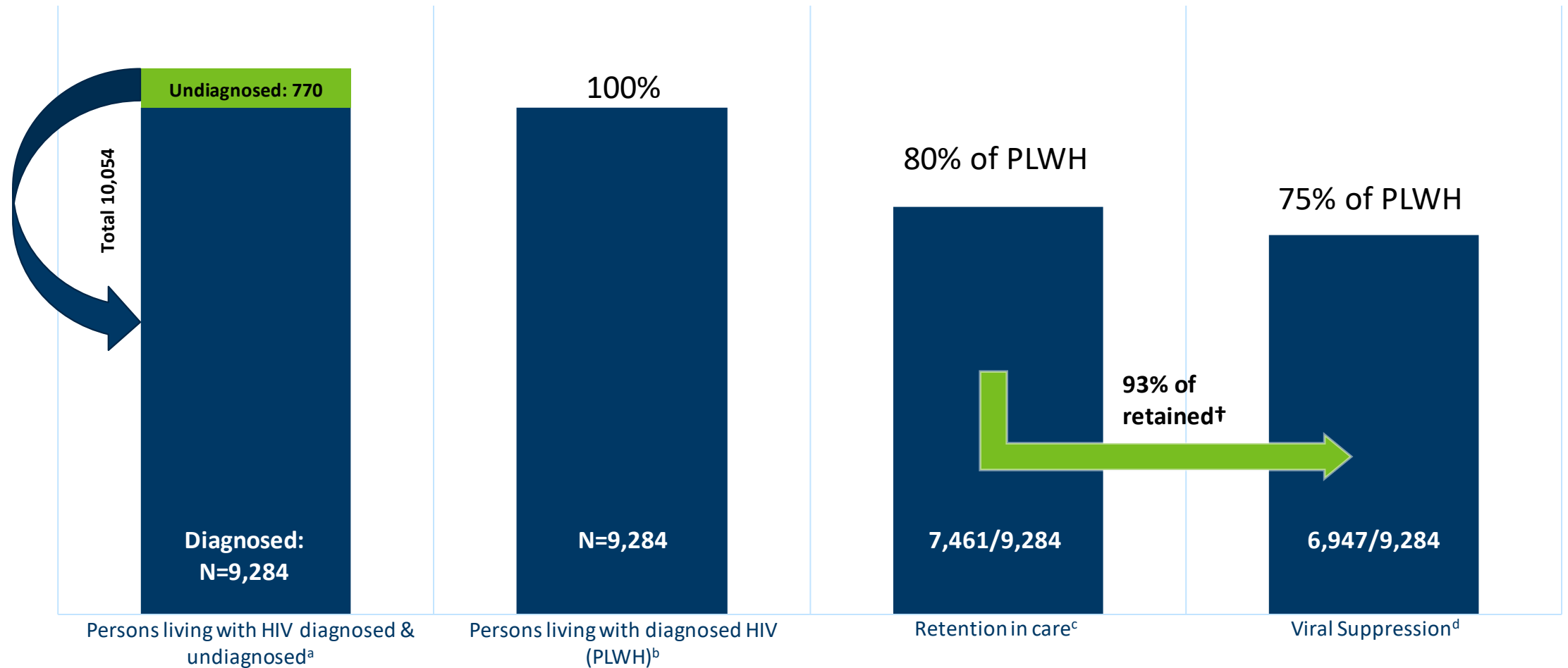
^d Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed. Shown in a different color than the other bars with a different denominator.

^e Calculated as the percentage of persons who had \geq one CD4 or viral load test results during 2023 among those diagnosed with HIV through year-end 2022 and alive at year end 2023.

^f Calculated as the percentage of persons who had suppressed viral load (≤ 200 copies/mL) at most recent test during 2023, among those diagnosed with HIV through year-end 2022 and alive at year-end 2023.

[†] Calculated as number of persons who had suppressed VL (≤ 200 copies/mL) at most recent test during 2023, among those who were retained in care during 2023 (6,947/7,461).

Percentages of persons with HIV engaged in selected stages of the continuum of care – Minnesota, 2023



^a Defined as persons undiagnosed (estimate 770 (150-1,400), 95% CI) and persons diagnosed (n=9,284) aged 13 or more with HIV infection (regardless of stage at diagnosis) through year-end 2022, who were alive at year-end 2023.

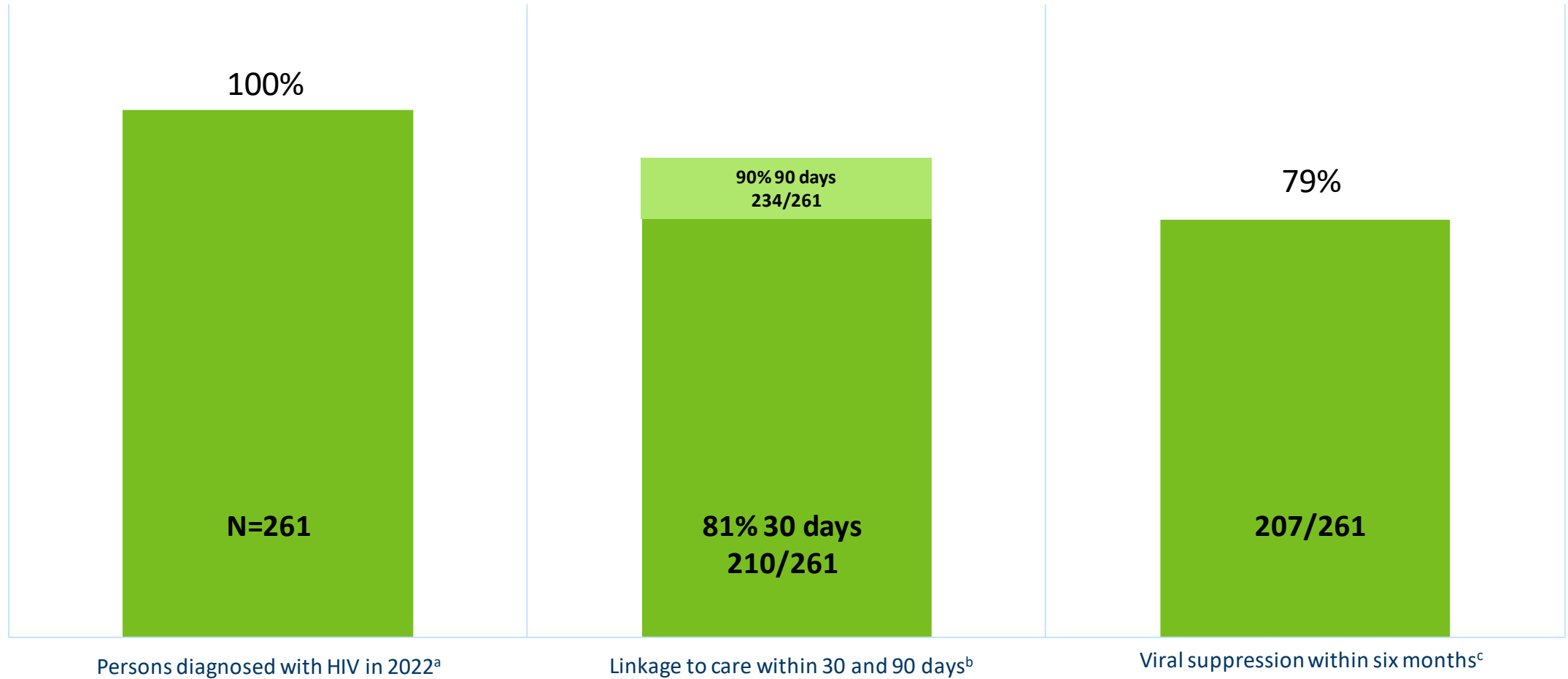
^b Defined as persons diagnosed aged 13 or more with HIV infection (regardless of stage at diagnosis) through year-end 2022, who were alive at year-end 2023.

^c Calculated as the percentage of persons who had \geq one CD4 or viral load test results during 2023 among those diagnosed with HIV through year-end 2022 and alive at year end 2023.

^d Calculated as the percentage of persons who had suppressed viral load (\leq 200 copies/mL) at most recent test during 2023, among those diagnosed with HIV through year-end 2022 and alive at year-end 2023.

[†] Calculated as number of persons who had suppressed VL (\leq 200 copies/mL) at most recent test during 2023, among those who were retained in care during 2023 (6,947/7,461).

Percentages of persons with HIV engaged in selected stages of the continuum of care - Minnesota, Linkage to care & HIV viral suppression within six months of HIV diagnosis, 2022

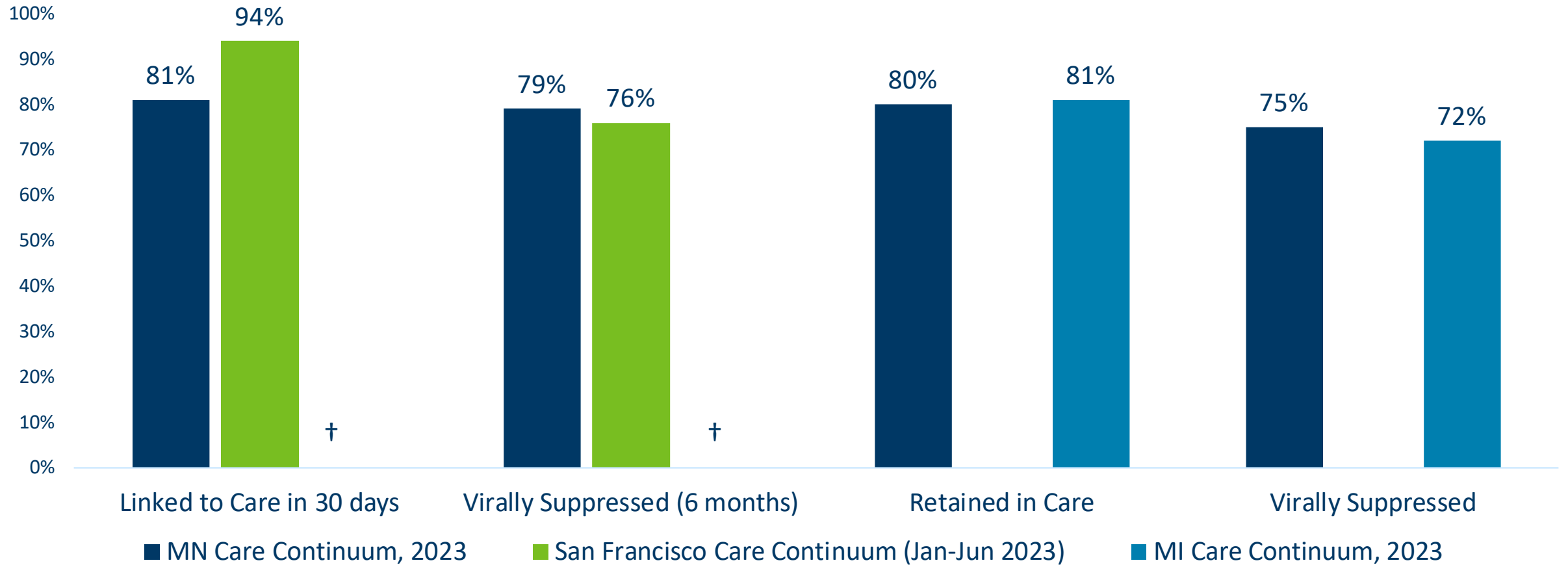


^aDefined as persons diagnosed aged 13 or more with HIV infection (regardless of stage at diagnosis) initial HIV diagnosis during 2022.

^bCalculated as the percentage of persons linked to care within 30 and 90 days after initial HIV diagnosis during 2022. Linkage to care is based on the number of persons diagnosed during 2022 and is therefore shown in a different color than the other bars with a different denominator.

^cCalculated as the percentage of persons who had an initial HIV diagnosis during 2022 who had viral suppressed viral load (≤ 200 copies/mL) within six months of HIV diagnosis.

How does Minnesota's care continuum compare with other states' care continuum?



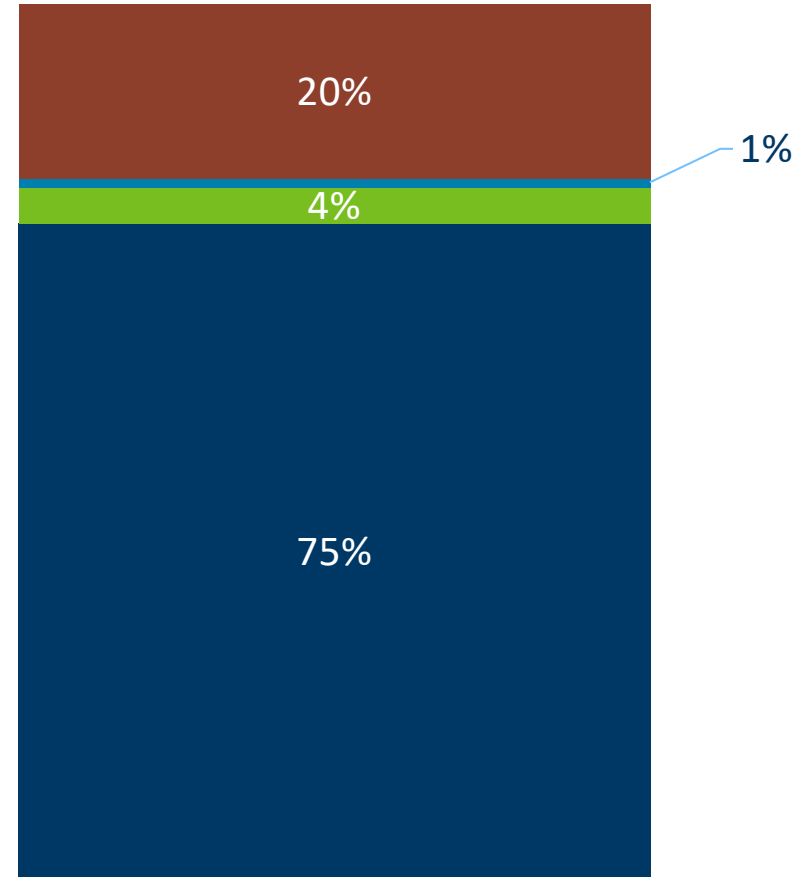
Sources: MI: [HIV Care Continuum Report, 2023 \(https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Keeping-Michigan-Healthy/HIVSTI/Data-and-Statistics/2023/HIV-Care-Continuum-Report-Tables-2023.pdf\)](https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Keeping-Michigan-Healthy/HIVSTI/Data-and-Statistics/2023/HIV-Care-Continuum-Report-Tables-2023.pdf); San Francisco: [HIV Semi-Annual Surveillance Report \(https://www.sf.gov/sites/default/files/2024-07/Semi_Annual_Report_20231231_edit2_0.pdf\)](https://www.sf.gov/sites/default/files/2024-07/Semi_Annual_Report_20231231_edit2_0.pdf)

† no data available

Initial Care Continuum Analyses

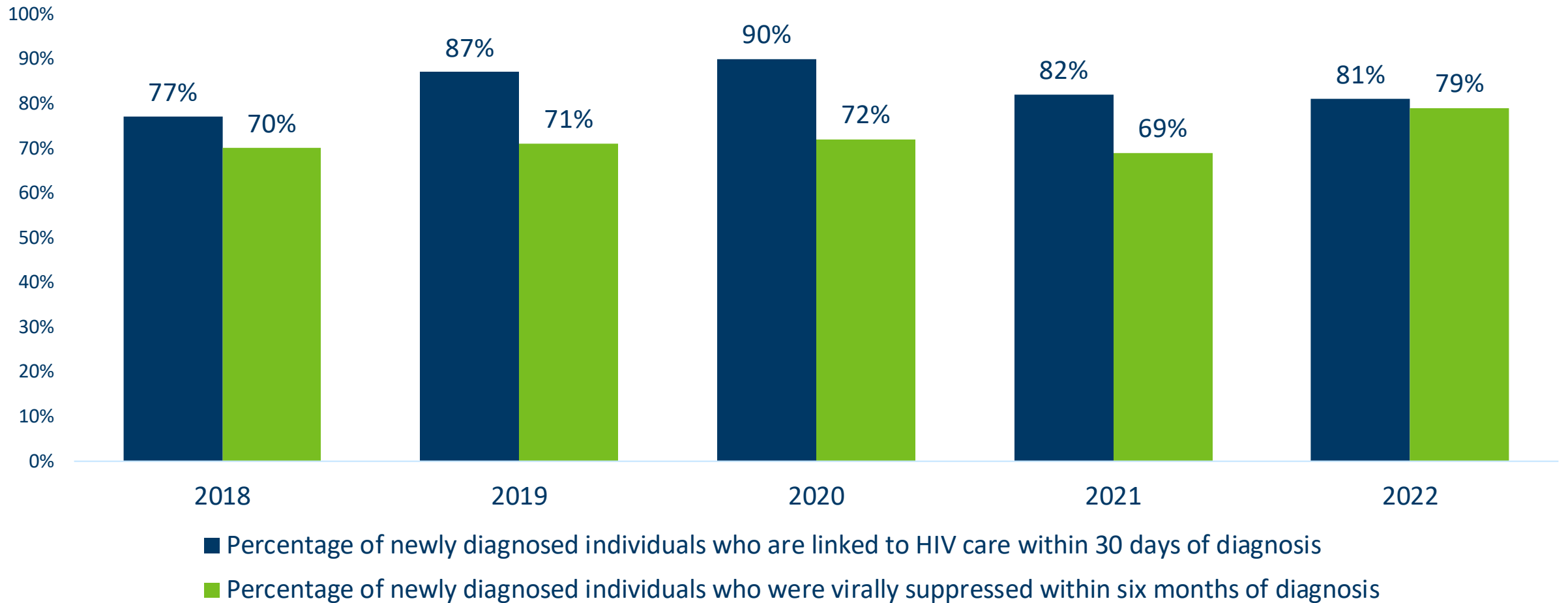
Viral Suppression* in the Continuum of Care (n=9284)

- Out of care
- CD4 only, no viral load reported in 2023
- In care and not virally suppressed at last lab reported in 2023
- In Care and virally suppressed at last reported lab in 2023



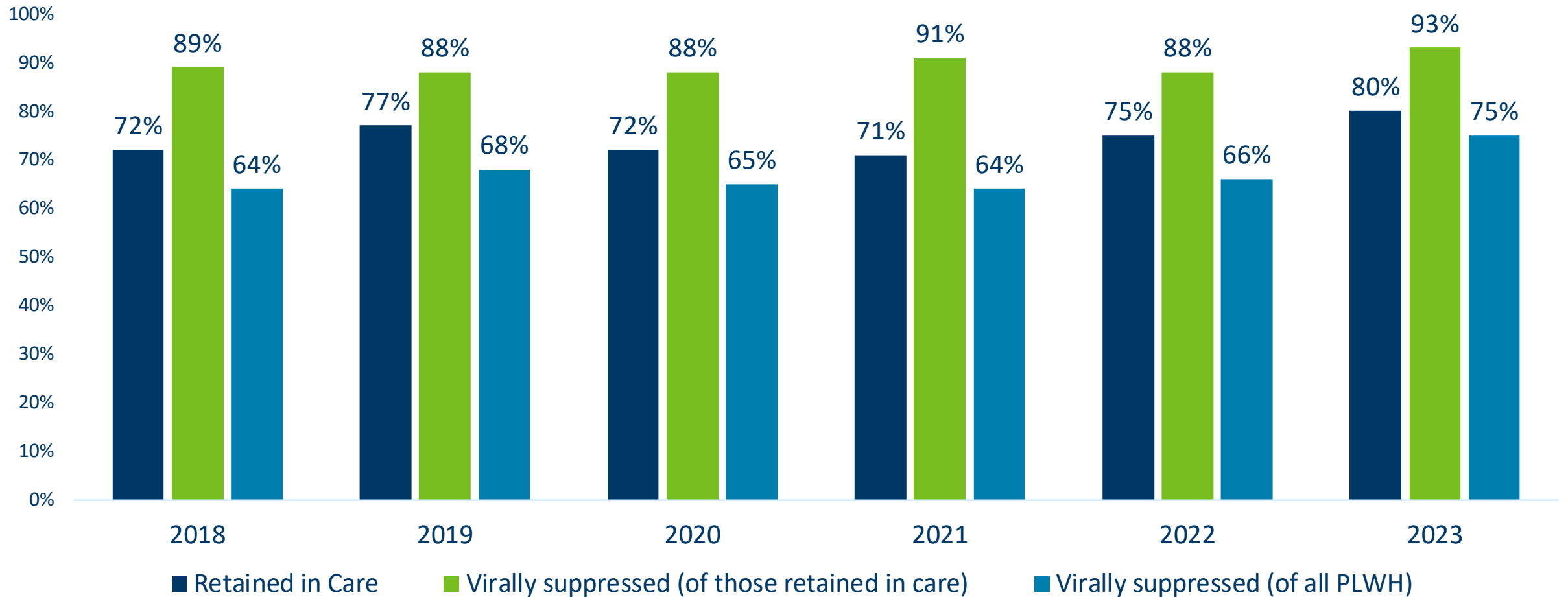
Linkage to Care in Minnesota, 2018-2022

Linkage to Care & Viral Suppression within six months among new HIV diagnoses in Minnesota by diagnosis year, 2018-2022



Retention in Care and Viral Suppression in Minnesota, 2018-2023

Retention in Care and Viral Suppression among prevalent cases living with HIV/AIDS in Minnesota, 2018-2023

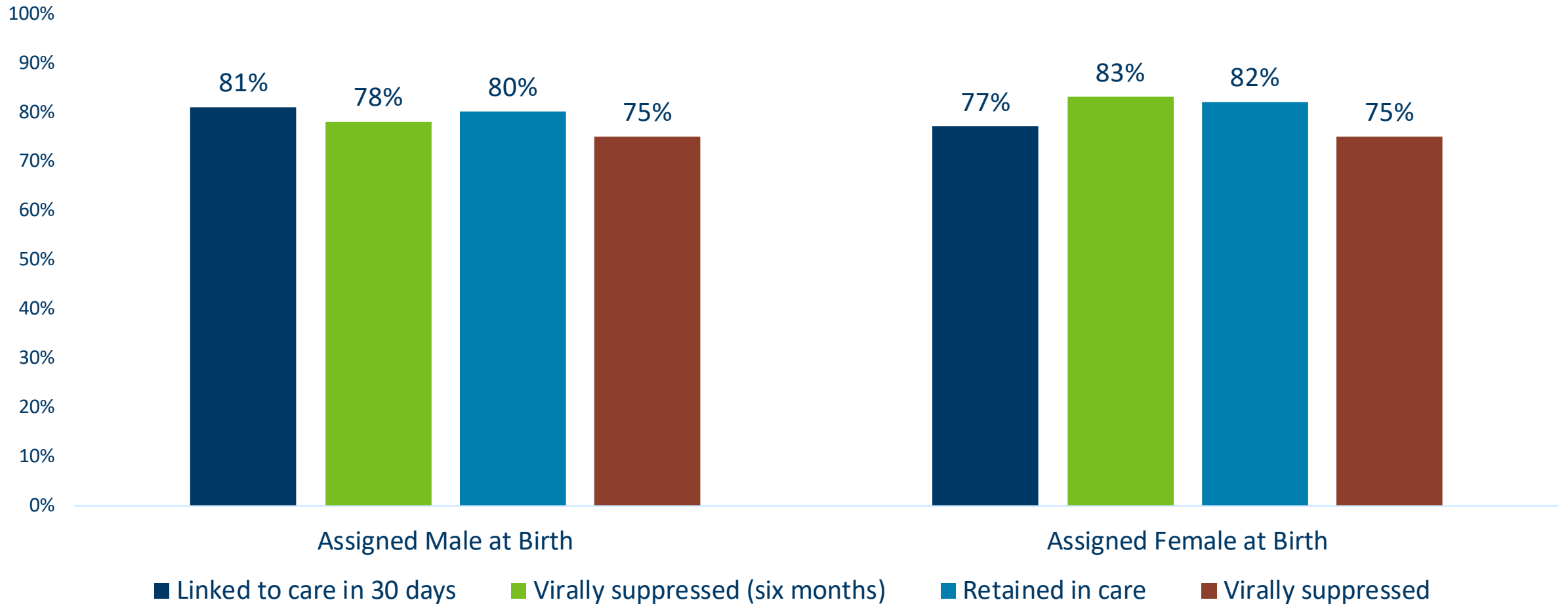


Demographic breakouts of the HIV care continuum in Minnesota, 2023

Care Continuum Demographics Definitions

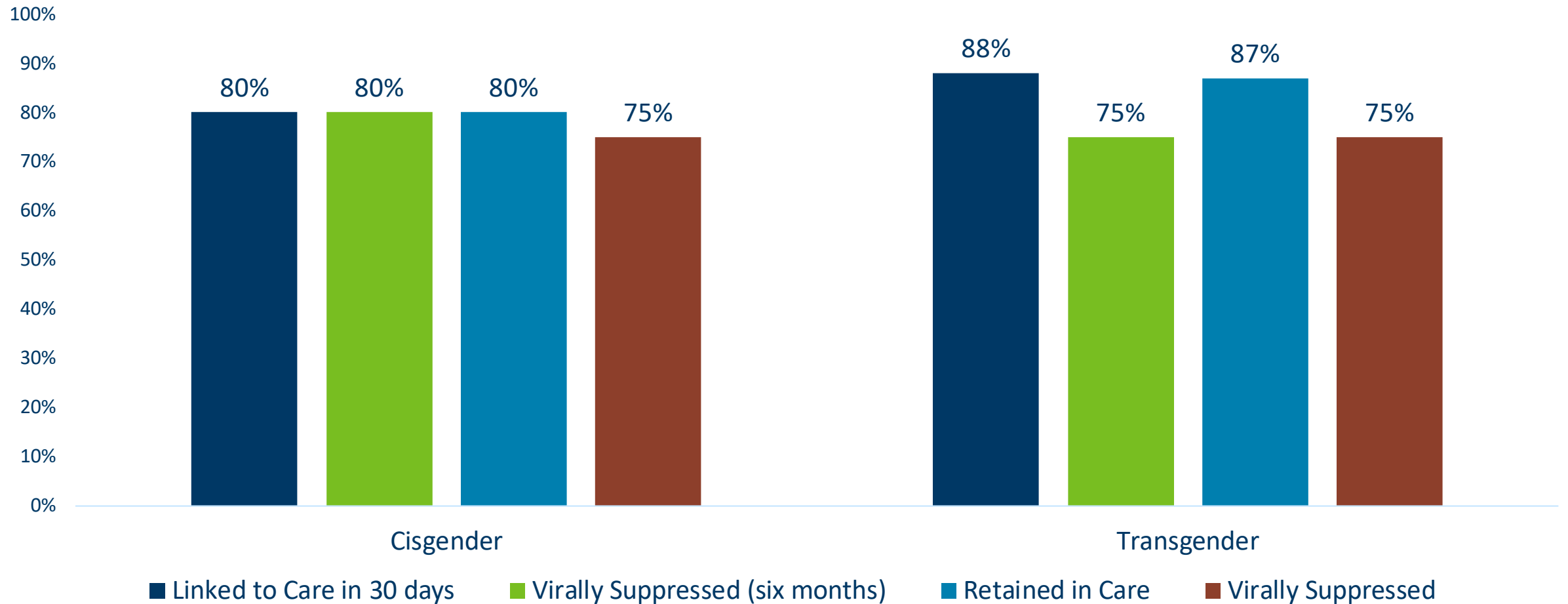
- **Cisgender:** A person who identifies with a gender that is the same as their assigned sex at birth
- **Transgender:** A person who identifies with a gender different than their assigned sex at birth
- **MSM:** Men who have sex with other men, includes any person assigned the sex of male at birth - - AND has no indication of female as current gender -- with a reported male sexual partner at time of HIV diagnosis
- **TWSM:** Transgender women who have sex with men, a person born male whose current gender is female – with a reported male sexual partner at time of HIV diagnosis
- **IDU:** Injection drug use reported transmission risk at time of HIV diagnosis
- **MSM/IDU:** A person with reported MSM and IDU transmission risk at time of HIV diagnosis. For the purposes of any MSM breakout of the HIV care continuum, MSM includes both MSM and MSM/IDU risk.

Percentages of people diagnosed with HIV in stages of the care continuum, by sex assigned at birth in Minnesota, 2023



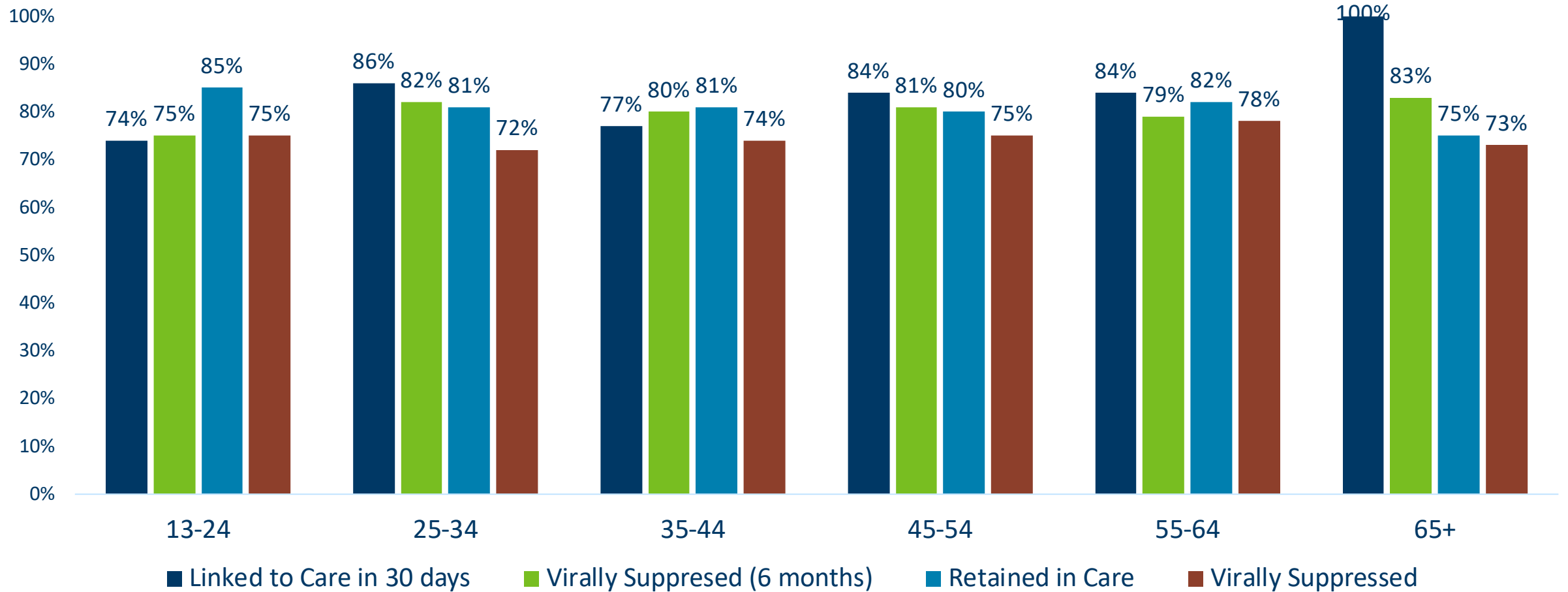
Virally Suppressed (six months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

Percentages of people diagnosed with HIV in stages of the care continuum, by gender identity, 2023



Virally Suppressed (six months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

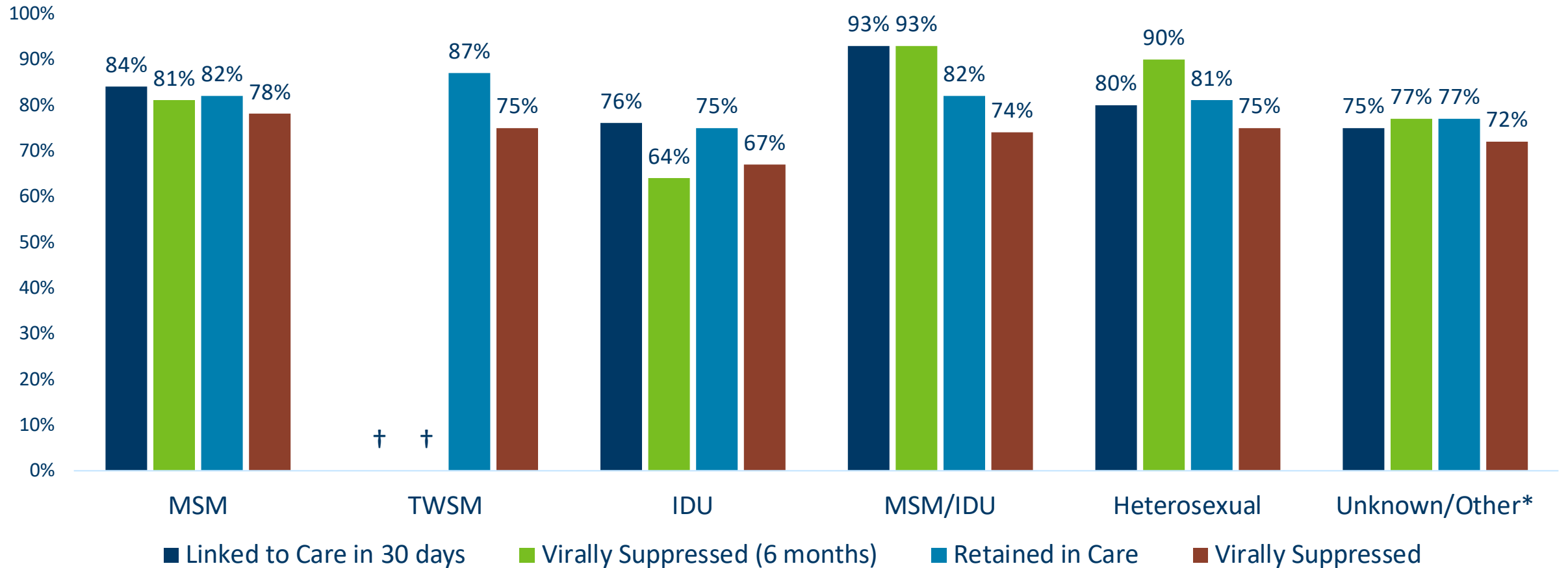
Percentages of people diagnosed with HIV in stages of the care continuum, by age* in Minnesota, 2023



Current age is used to calculate retained in care and virally suppressed. Age at time of HIV diagnosis is used for linkage to care and virally suppressed (6 months) bars.

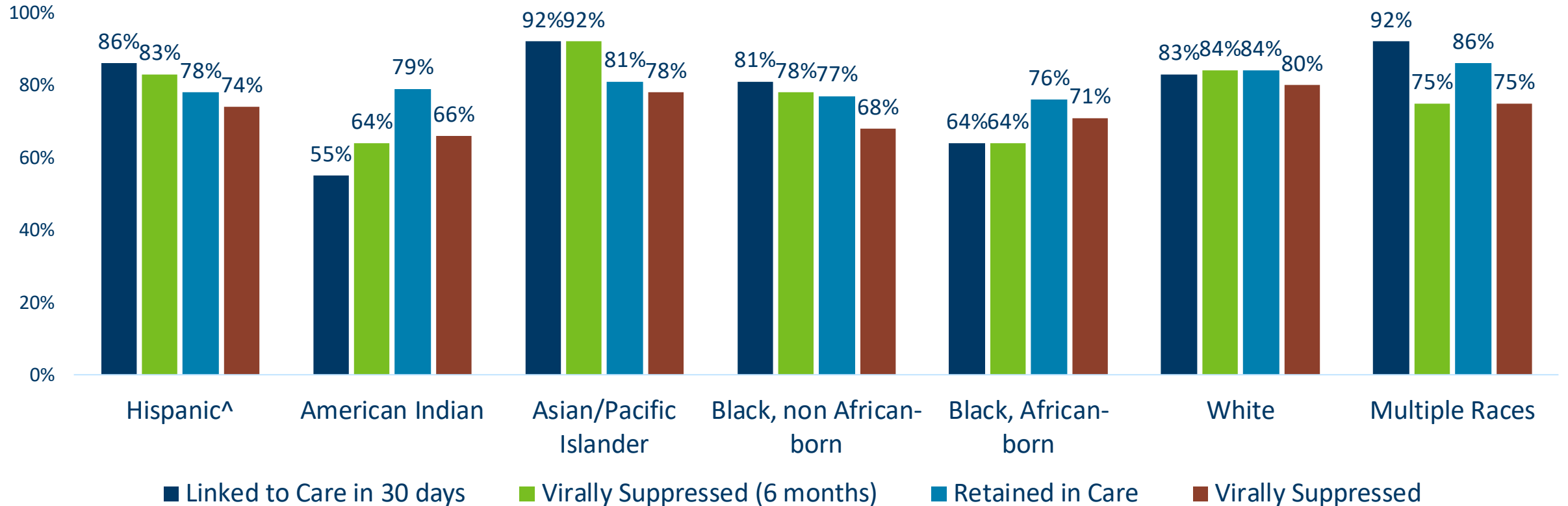
Virally Suppressed (6 months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

Percentages of people diagnosed with HIV in stages of the care continuum, by mode of transmission† in Minnesota, 2023



†Mode of transmission is collected at time of HIV diagnosis and may not be representative of current transmission risk. The MSM and MSM/IDU risk groups include all PWH assigned the sex of male at birth AND current gender male who report a male sexual partner. Therefore, some Trans Women are included in those groups.
 †Fewer than 5 new diagnoses in population
 *Unknown includes no mode of transmission identified. Other includes TWSM, TWSM/IDU, unspecified risk, hemophilia, transplant/transfusion recipients, or a mother with HIV or HIV risk.
 Virally Suppressed (6 months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤200 copies/mL) within six months of HIV diagnosed.

Percentages of people diagnosed with HIV in stages of the care continuum, by race/ethnicity* in Minnesota, 2023

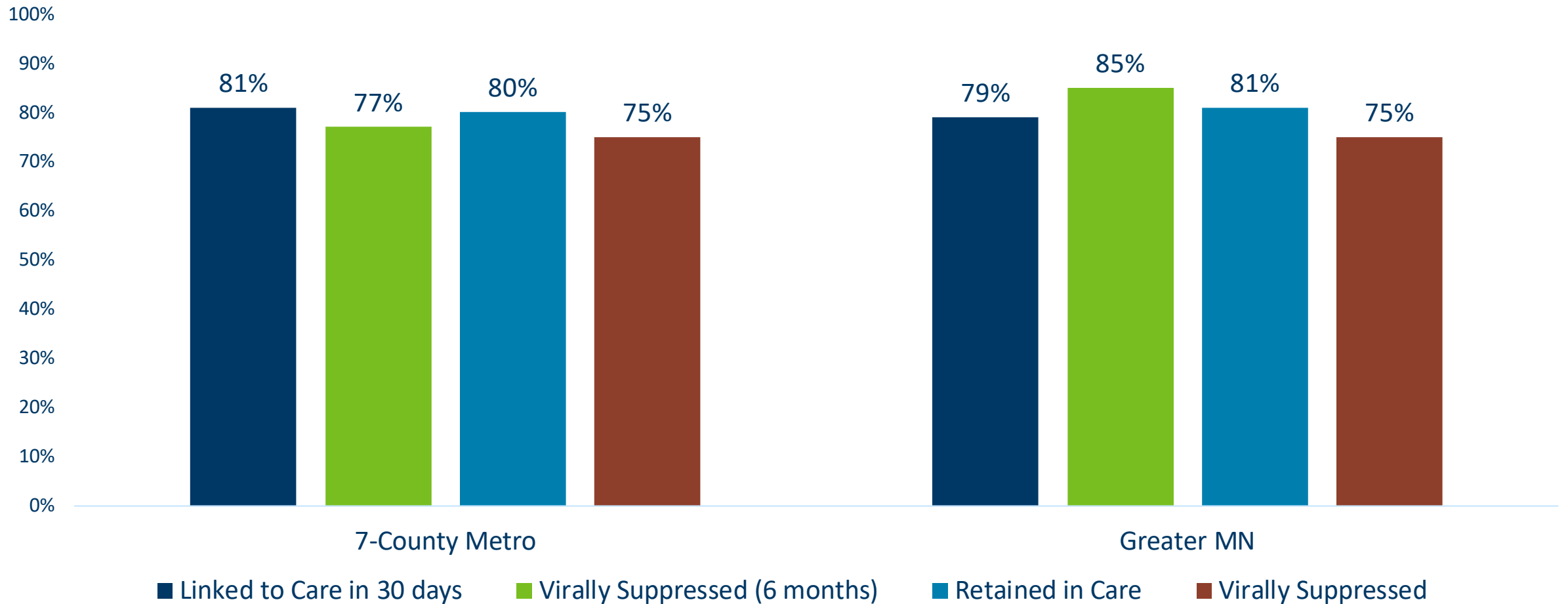


*Race is a social construct. While there are health disparities between racial and ethnic groups, these are driven by underlying factors relating to historical traumas and current systematic impacts of those traumas.

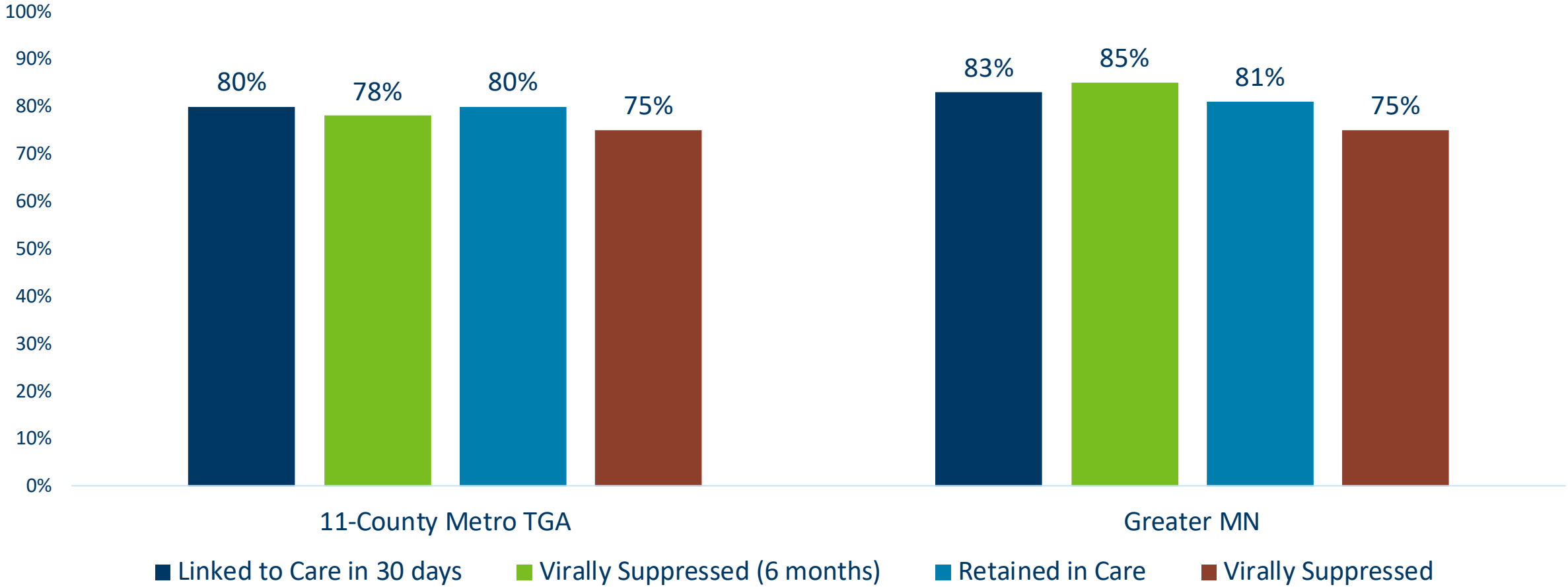
[^]Hispanic includes all races, all other racial groups are non-Hispanic.

Virally Suppressed (6 months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

Percentages of people diagnosed with HIV in stages of the care continuum, by geography* in Minnesota, 2023

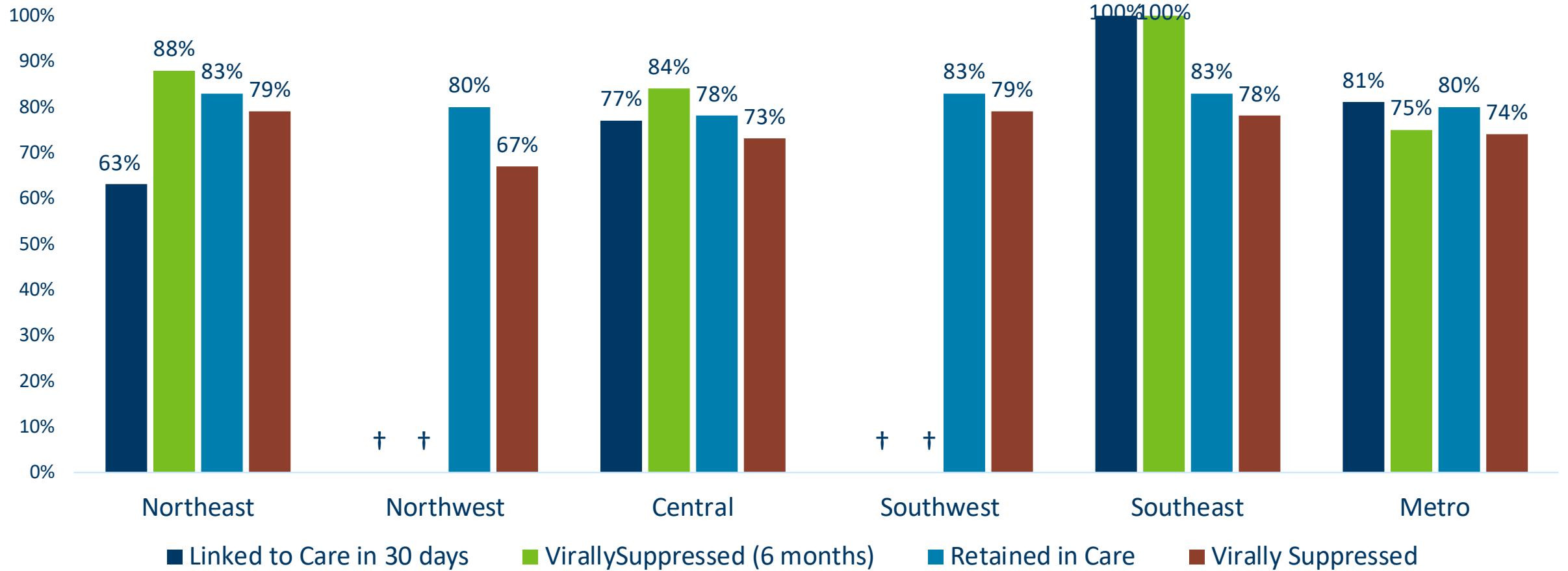


Percentages of people diagnosed with HIV in stages of the care continuum, by geography* in Minnesota, 2023



TGA includes counties of Anoka, Carver, Chisago, Dakota, Hennepin, Isanti, Ramsey, Scott, Sherburne, Washington, and Wright. Greater Minnesota includes all remaining 76 counties. The 11-county TGA is used as a geographic breakout for HIV because Ryan White Part A funds services for PWH in this part of the state. However, not all PLWH living in the TGA receive Ryan White Services. Virally Suppressed (6 months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

Percentages of people diagnosed with HIV in stages of the care continuum, by region in Minnesota, 2023

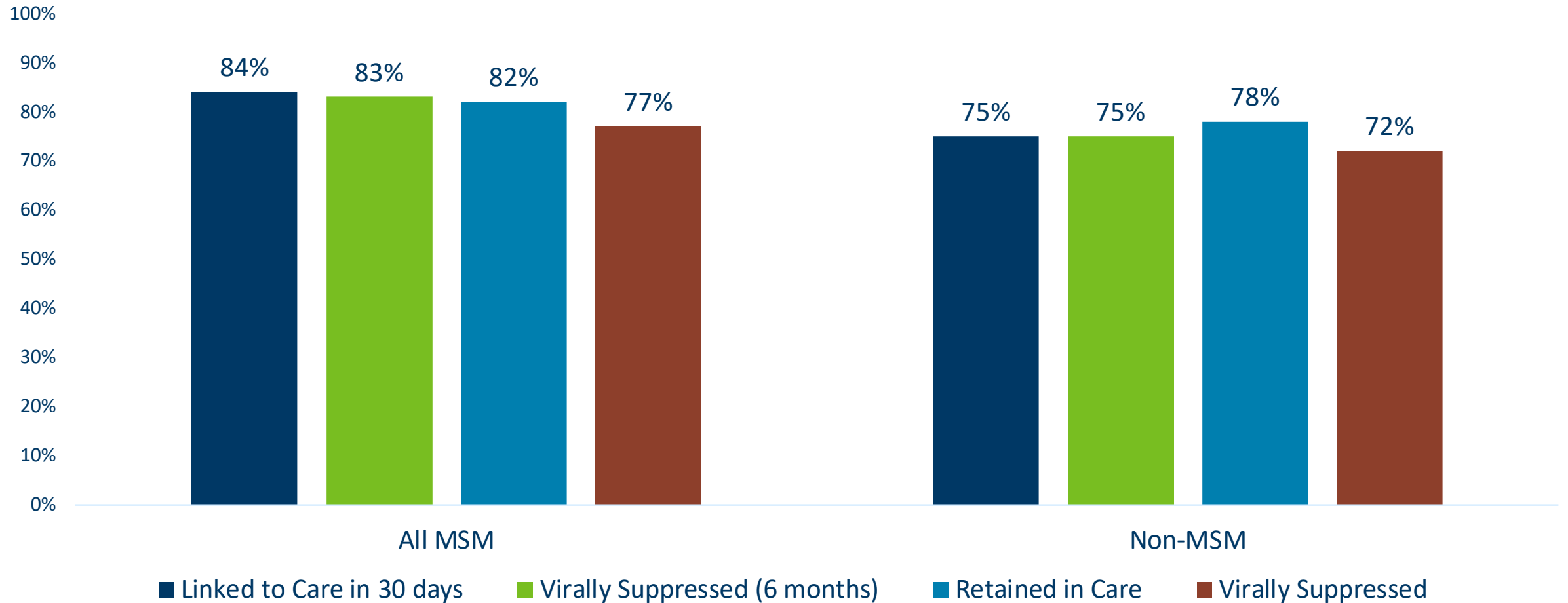


†Fewer than five new diagnoses in population

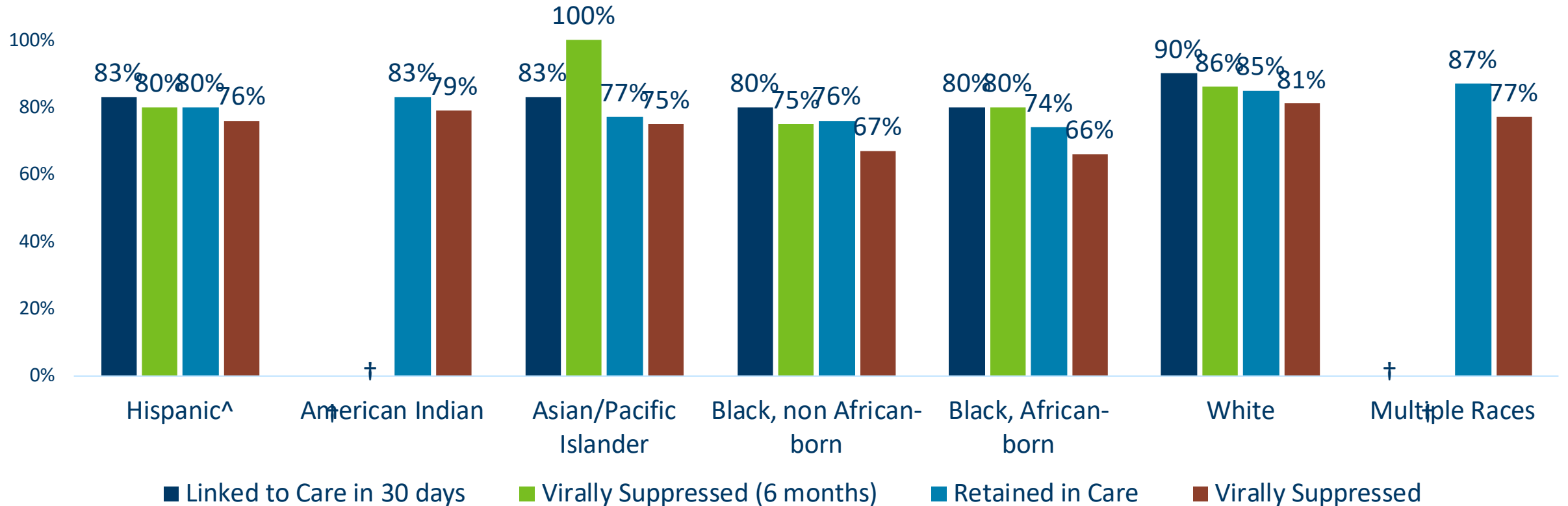
Virally Suppressed (6 months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

MSM* and MSM*/IDU-specific Analyses (n=4901)

Percentages of MSM and non-MSM diagnosed with HIV in stages of the care continuum in Minnesota, 2023



Percentages of MSM diagnosed with HIV in stages of the care continuum, by race/ethnicity* in Minnesota, 2023



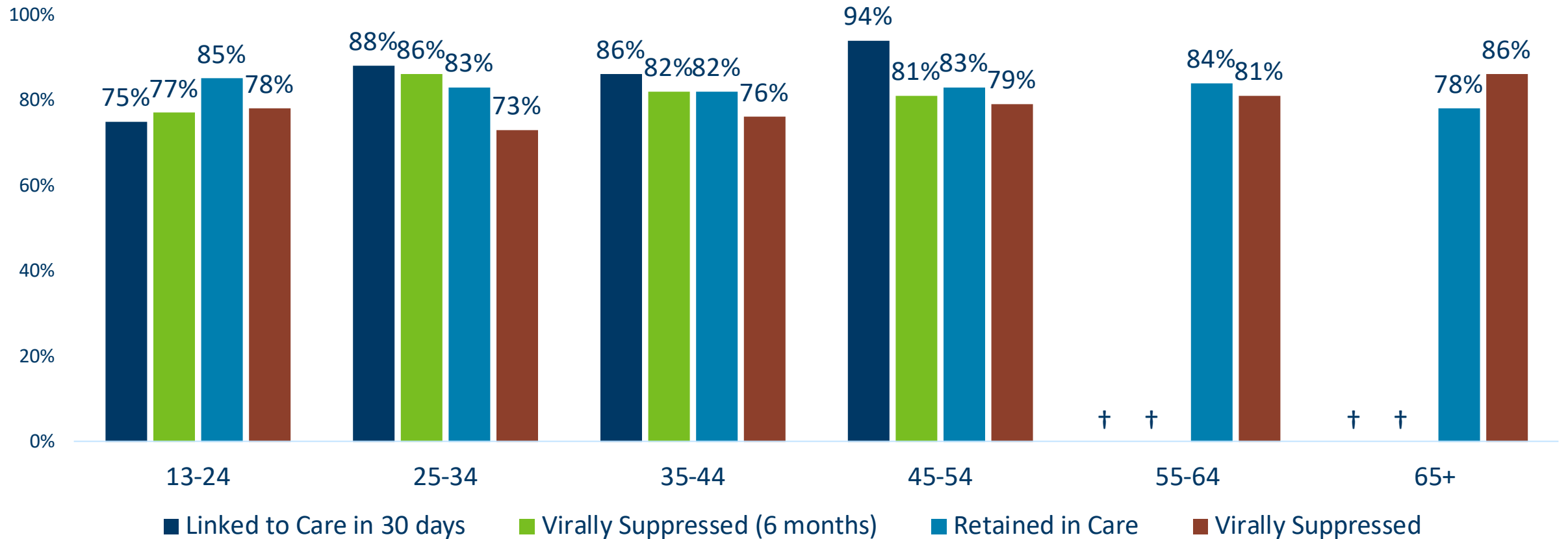
*Race is a social construct. While there are health disparities between racial and ethnic groups, these are driven by underlying factors relating to historical traumas and current systematic impacts of those traumas.

[^]Hispanic includes all races, all other races are non-Hispanic

[†]Fewer than five new diagnoses in population

Virally Suppressed (6 months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

Percentages of MSM diagnosed with HIV in stages of the care continuum, by age* in Minnesota, 2023

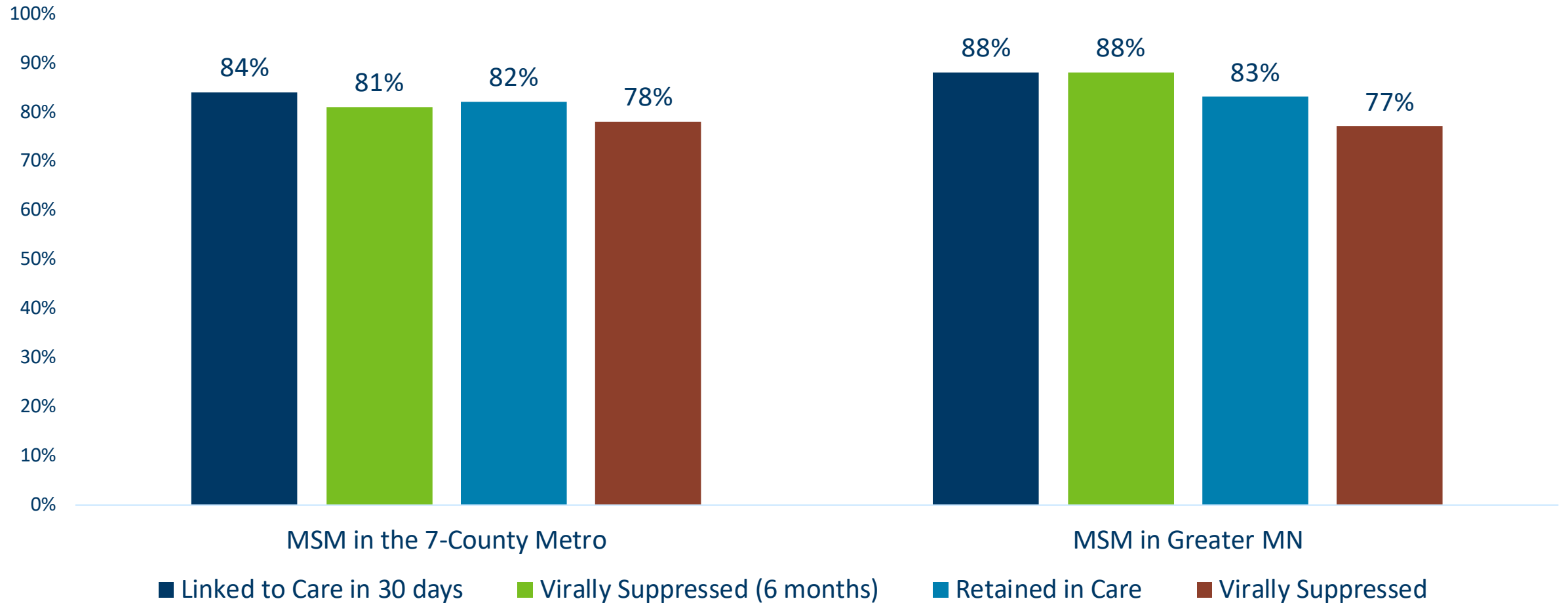


*Current age is used to calculate retained in care and virally suppressed. Age at time of HIV diagnosis is used for linked to care in 30 days.

†Fewer than five new diagnoses in population

Virally Suppressed (6 months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

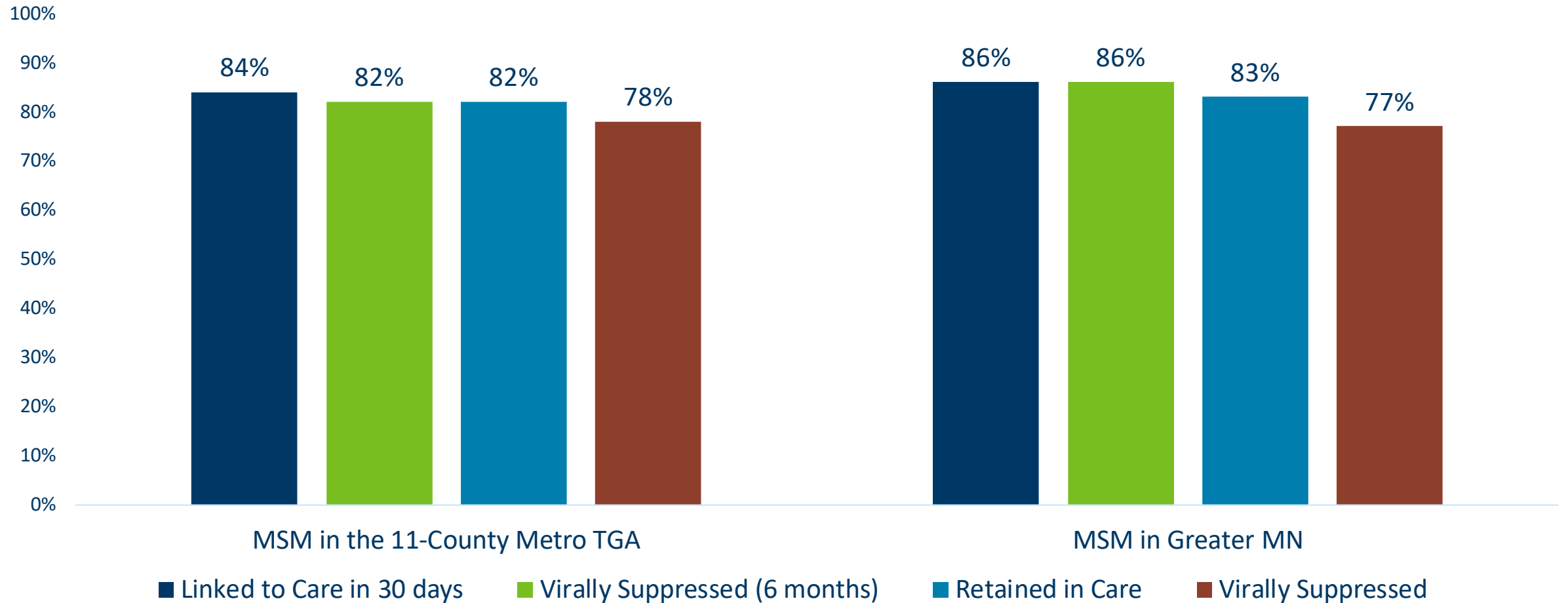
Percentages of MSM diagnosed with HIV in stages of the care continuum, by geography* in Minnesota, 2023



*Metro area includes counties of Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington. Greater Minnesota includes all remaining 80 counties.

Virally Suppressed (6 months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

Percentages of MSM diagnosed with HIV in stages of the care continuum, by geography* in Minnesota, 2023

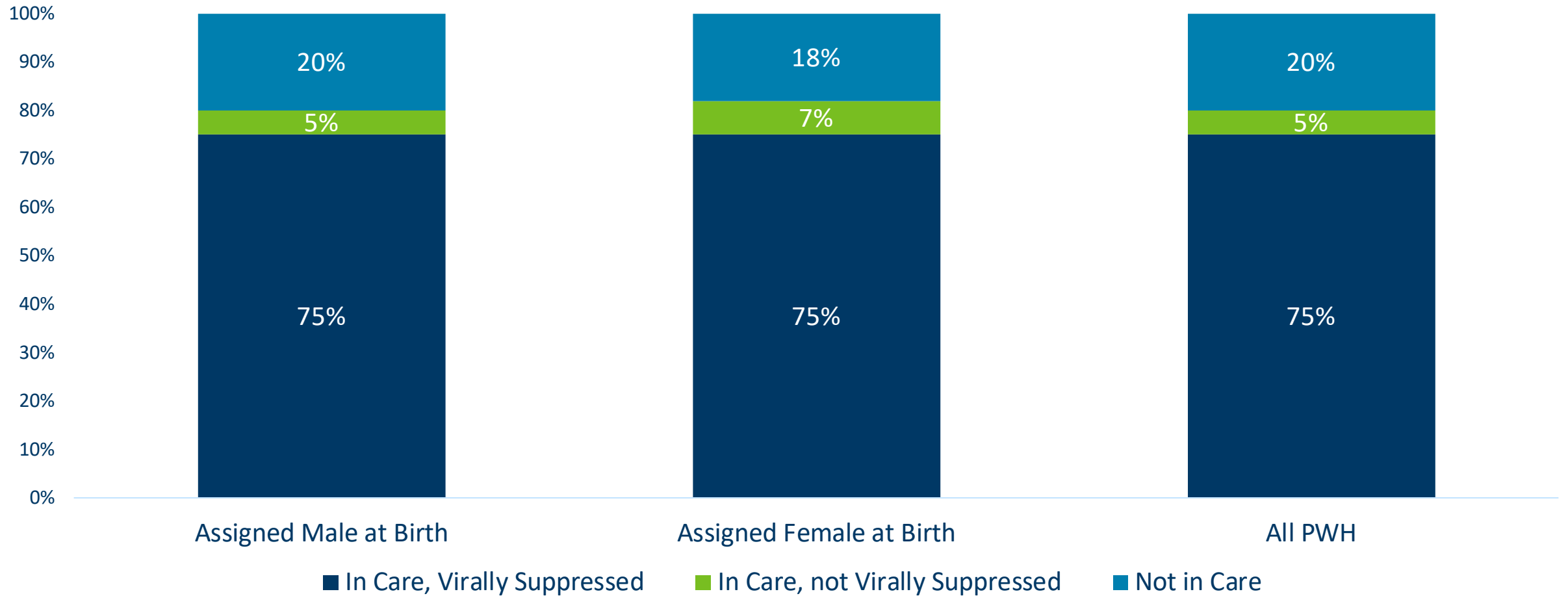


* TGA includes counties of Anoka, Carver, Chisago, Dakota, Hennepin, Isanti, Ramsey, Scott, Sherburne, Washington, and Wright. Greater Minnesota includes all remaining 76 counties. The 11-county TGA is used as a geographic breakout for HIV because Ryan White Part A funds services for PLWH in this part of the state. However, not all PLWH living in the TGA receive Ryan White Services.

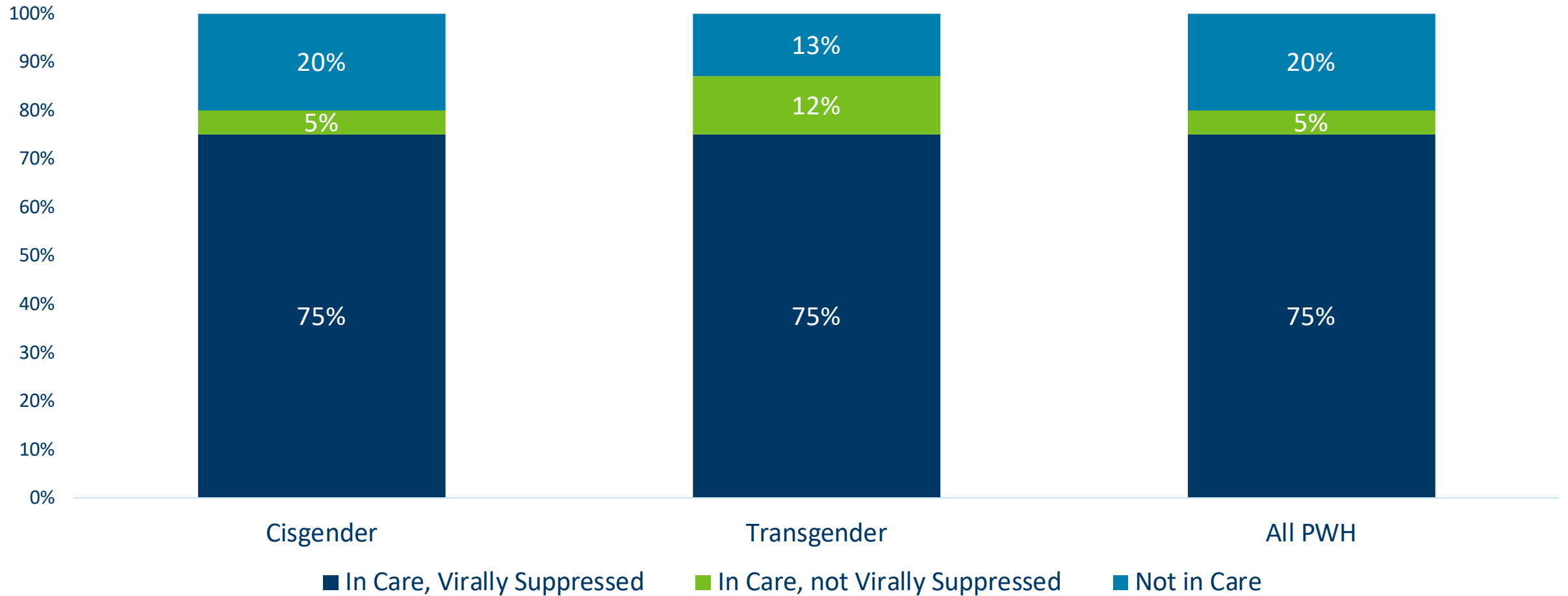
Virally Suppressed (6 months) is a new indicator as of 2023: Calculated as the percentage of person who had an initial HIV diagnosis during 2022 that were virally suppressed VL (≤ 200 copies/mL) within six months of HIV diagnosed.

Analyses of Populations in Care, But Not Virally Suppressed

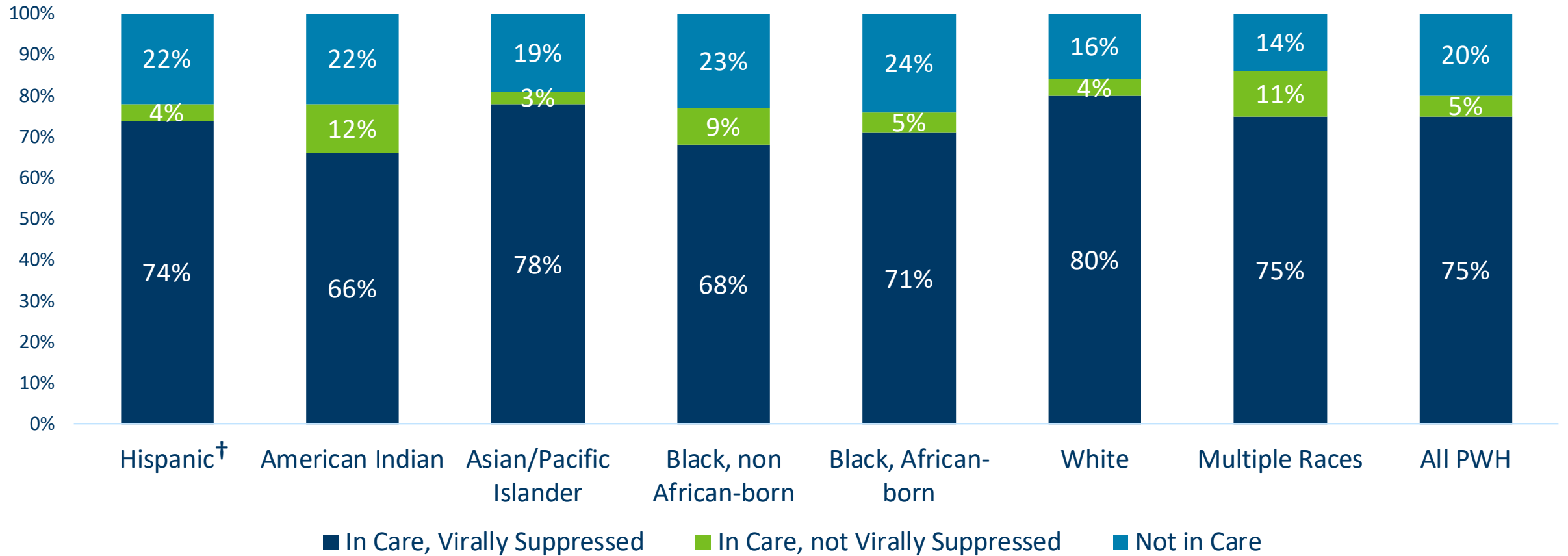
Breakout of in care, virally suppressed*; in care, not virally suppressed; and not in care by sex assigned at birth in Minnesota, 2023



Breakout of in care, virally suppressed*; in care, not virally suppressed; and not in care by gender identity in Minnesota, 2023



Breakout of in care, virally suppressed*; in care, not virally suppressed; and not in care by race/ethnicity^ in Minnesota, 2023

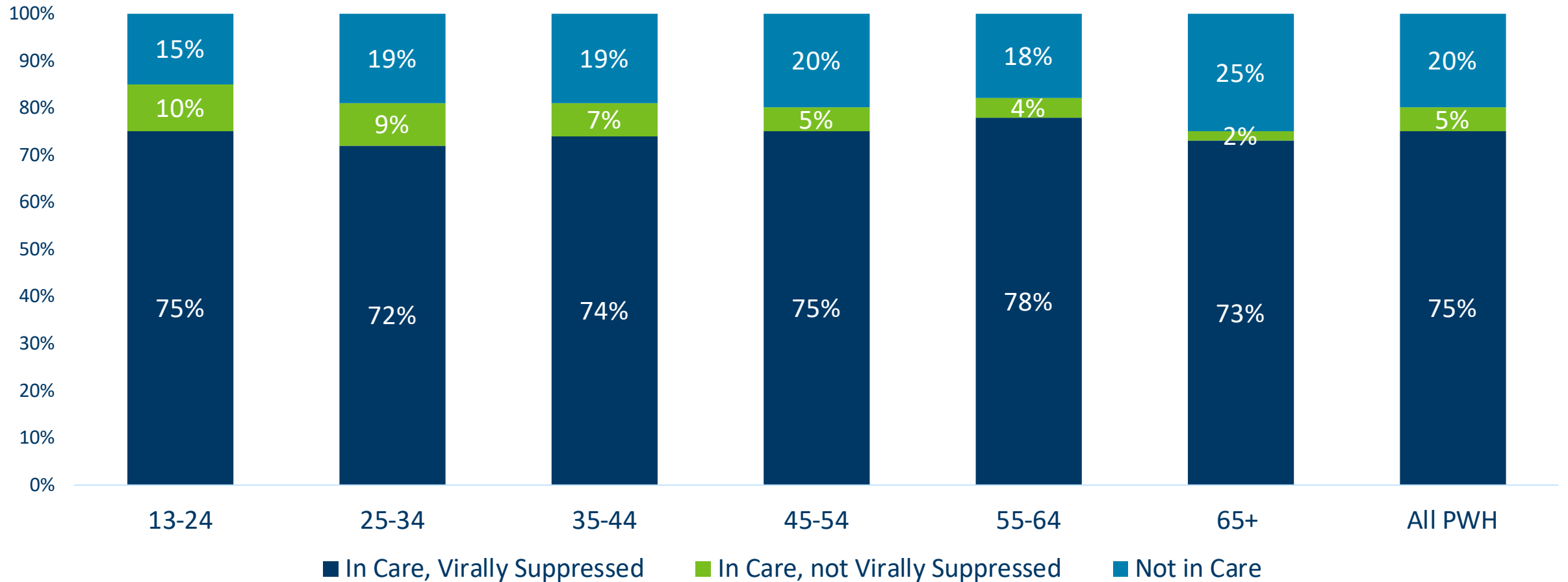


*Viral suppression, as defined by both HRSA and CDC, is ≤ 200 copies/mL

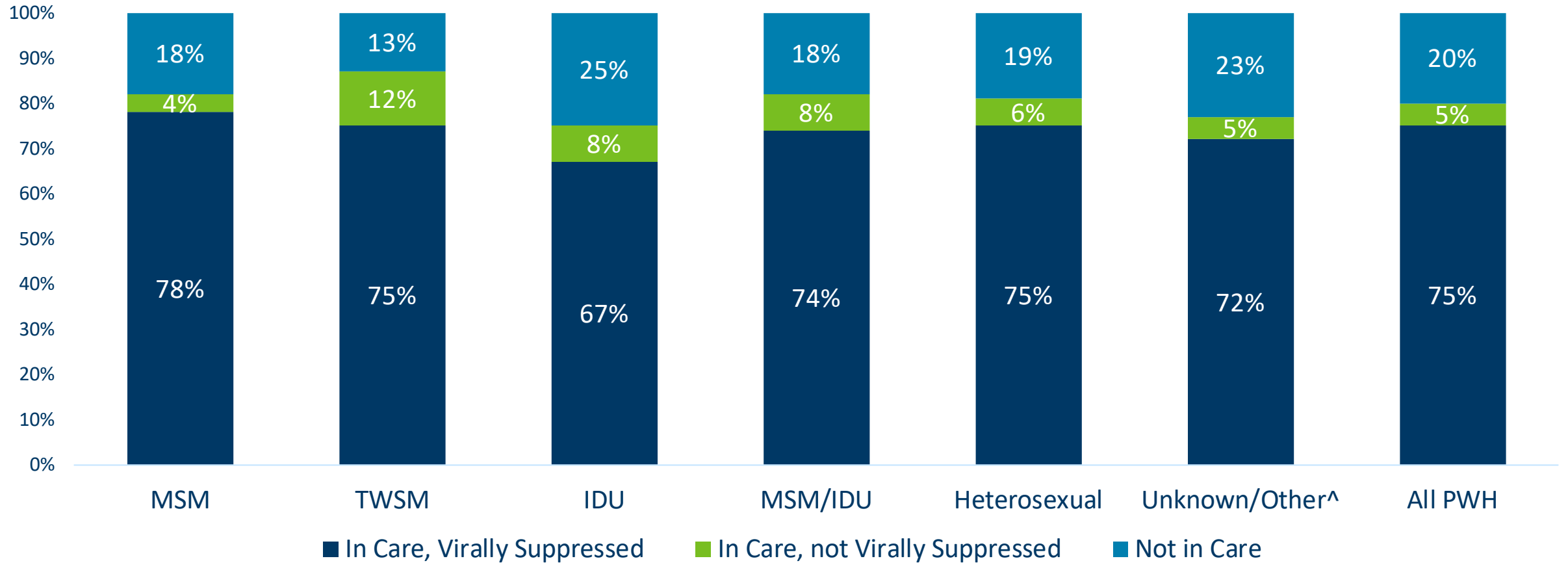
^Race is a social construct. While there are health disparities between racial and ethnic groups, these are driven by underlying factors relating to historical traumas and current systematic impacts of those traumas.

†Hispanic includes all races, all other races are non-Hispanic

Breakout of in care, virally suppressed*; in care, not virally suppressed; and not in care by age^ in Minnesota, 2023



Breakout of in care, virally suppressed*; in care, not virally suppressed; and not in care by mode of transmission† in Minnesota, 2023

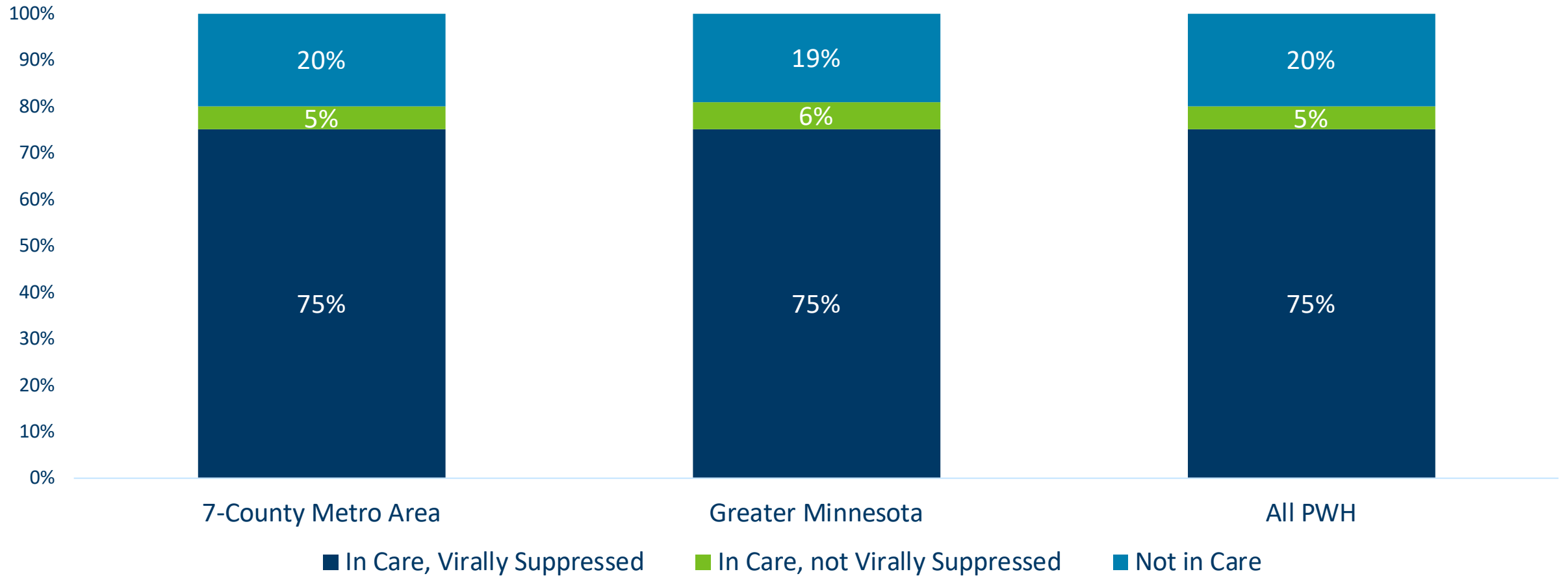


*Viral suppression, as defined by both HRSA and CDC, is ≤ 200 copies/mL

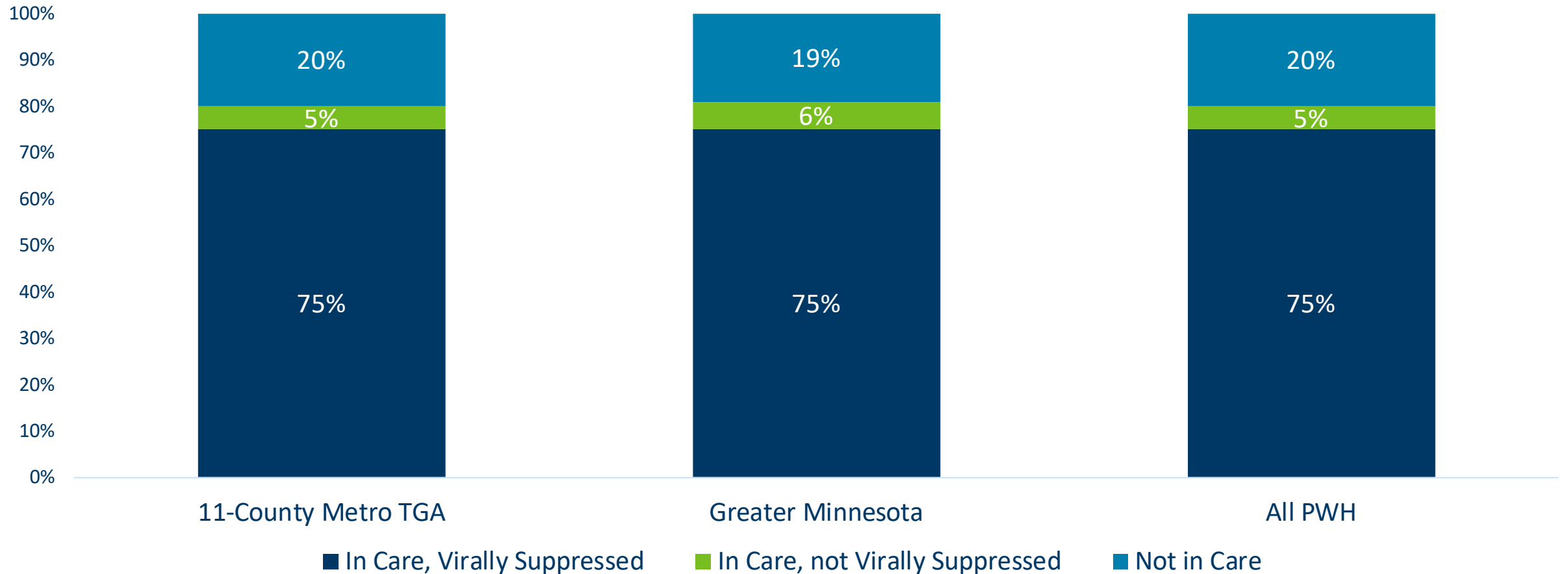
†Mode of transmission is collected at time of HIV diagnosis and may not be representative of current transmission risk. The MSM and MSM/IDU risk groups include all PWH assigned the sex of male at birth AND current gender male who report a male sexual partner. Therefore, some Trans Women are included in those groups.

^Unknown includes no mode of transmission identified. Other includes unspecified risk, hemophilia, transplant/transfusion recipients, or mother with HIV or HIV risk

Breakout of in care, virally suppressed*; in care, not virally suppressed; and not in care by geography^ in Minnesota, 2023



Breakout of in care, virally suppressed*; in care, not virally suppressed; and not in care by geography^ in Minnesota, 2023

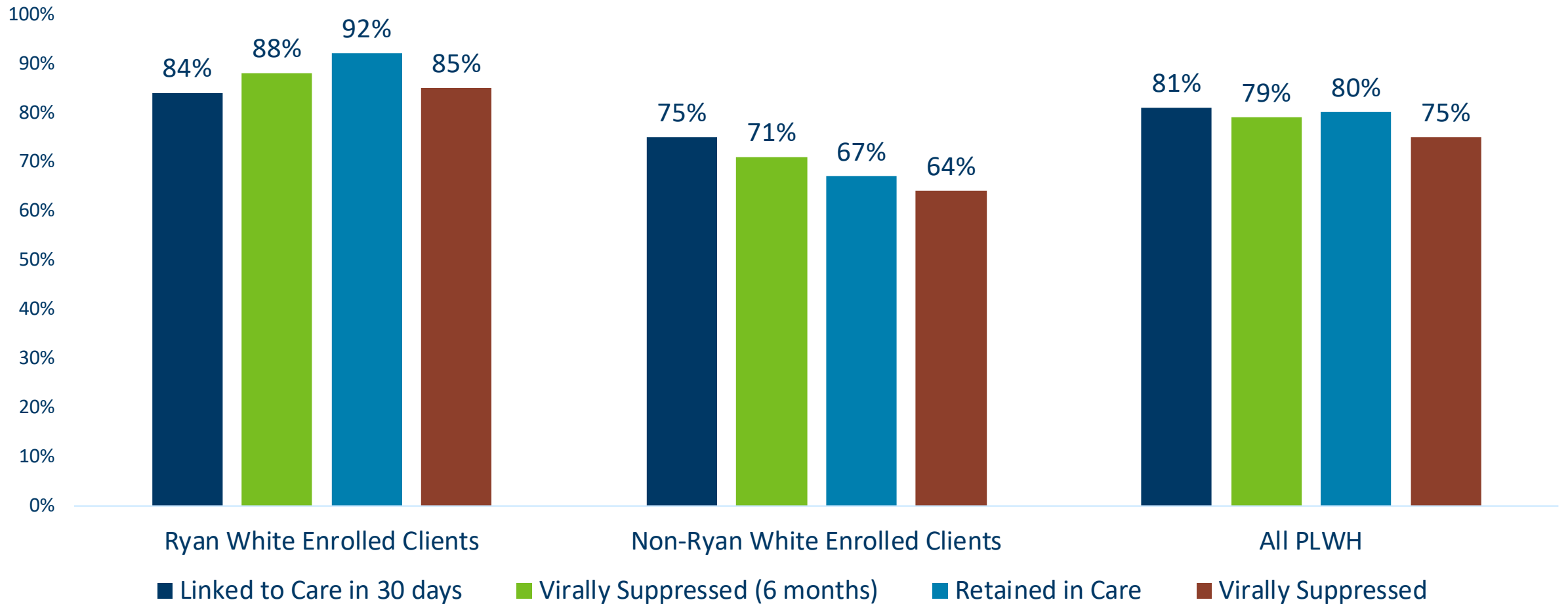


*Viral suppression, as defined by both HRSA and CDC, is ≤ 200 copies/mL

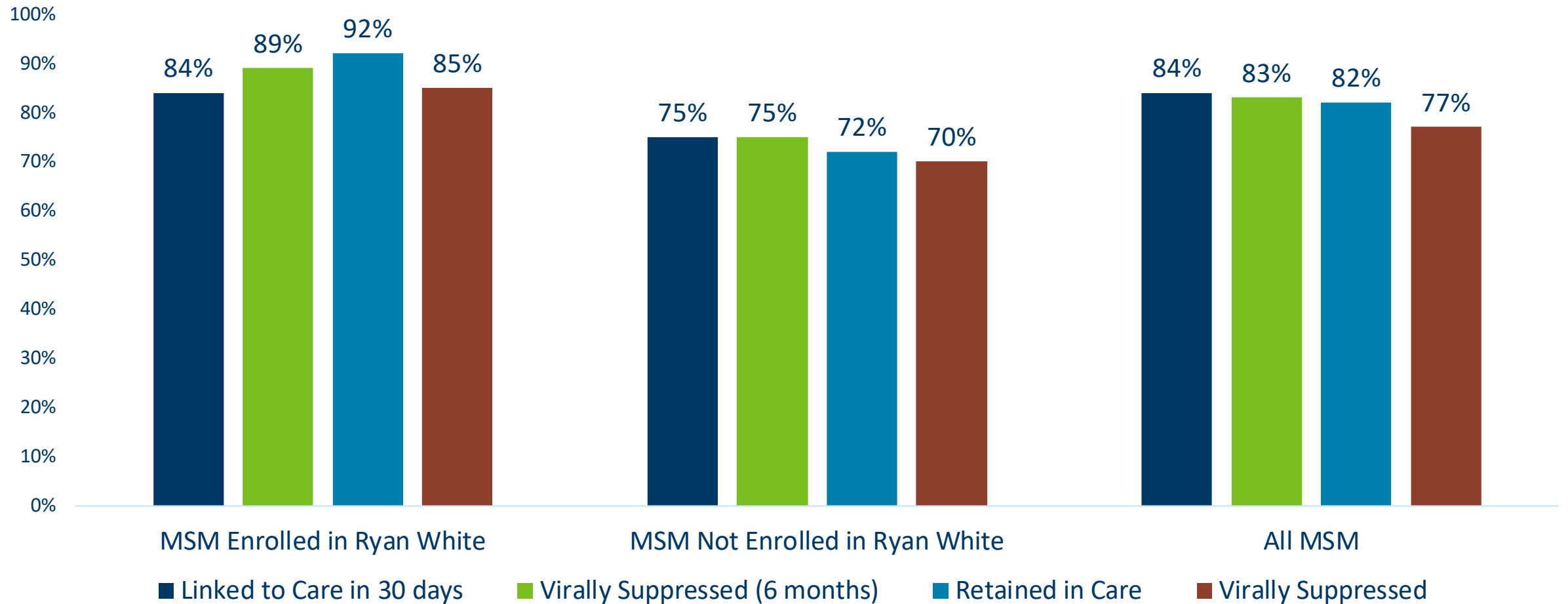
^ TGA includes counties of Anoka, Carver, Chisago, Dakota, Hennepin, Isanti, Ramsey, Scott, Sherburne, Washington, and Wright. Greater Minnesota includes all remaining 76 counties. The 11-county TGA is used as a geographic breakout for HIV because Ryan White Part A funds services for PLWH in this part of the state. However, not all PWH living in the TGA receive Ryan White Services.

Analyses of PWH Receiving Ryan White Services

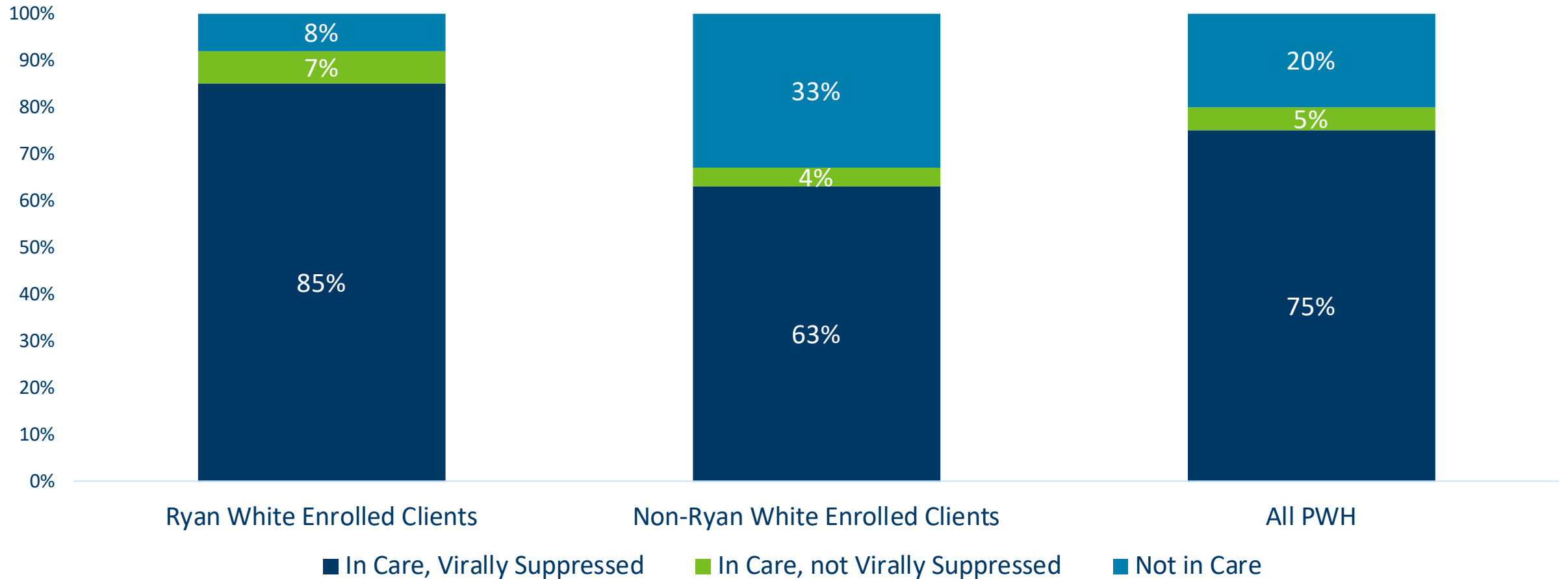
Percentages of people diagnosed with HIV in stages of the care continuum by Ryan White enrollment* in Minnesota, 2023



Percentages of MSM diagnosed with HIV in stages of the care continuum by Ryan White enrollment* in Minnesota, 2023

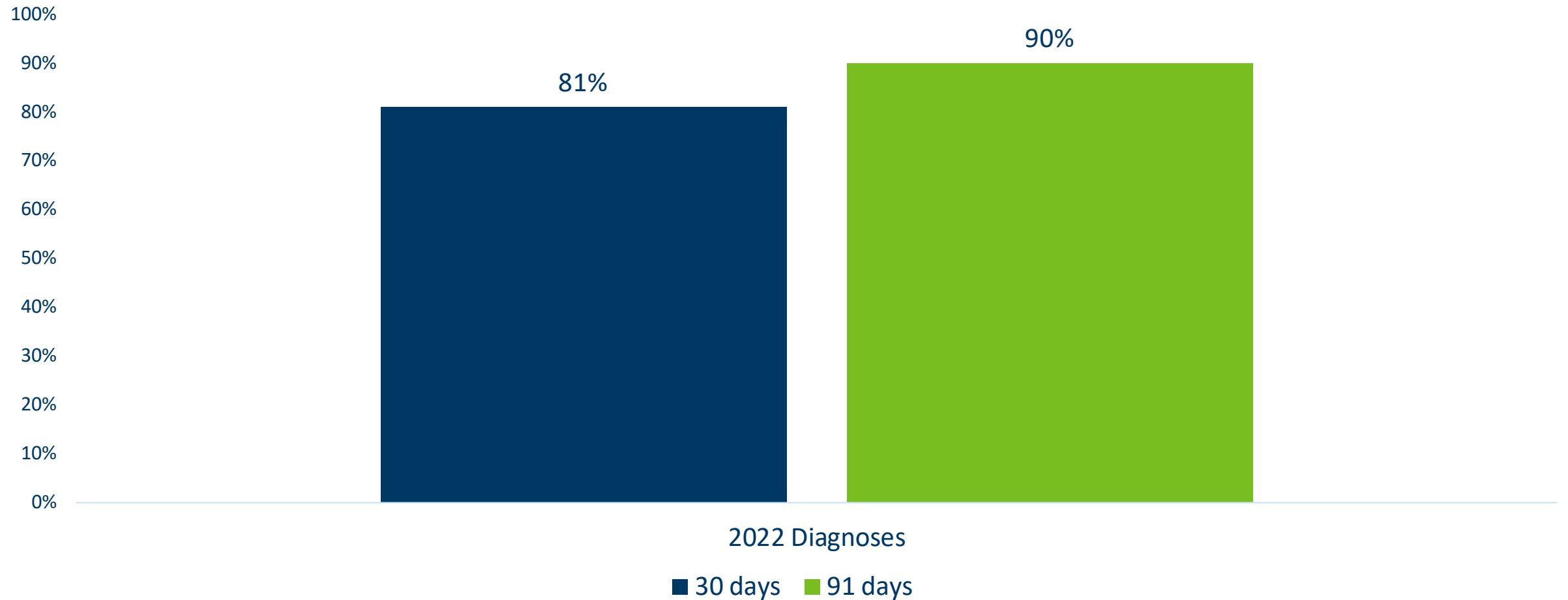


Breakout of in care, virally suppressed*; in care, not virally suppressed; and not in care by Ryan White enrollment^ in Minnesota, 2023



Linkage Greater than 30 Days Analysis

Linkage to Care, 2022 Diagnoses



Barriers to Linkage to Care

- Issues of health insurance
- Delay in enrolling into RW and other available programs
- Appointment availability (≥ 30 days)
- Access to transportation
- Stigma

Purpose of DIS (Disease Investigative Services)

- Offer partner notification
- Assist with linkage to care
- Help clients resolve barriers to care as quickly as possible

What can providers (medical and community) do to help link cases quickly

- Submit complete Case Report Forms to MDH immediately (within one day of diagnosis)
- Gather complete locating information on a client
- Inform clients of the MDH partner services program; letting them know that DIS may discreetly follow-up to offer services

Thank you.