

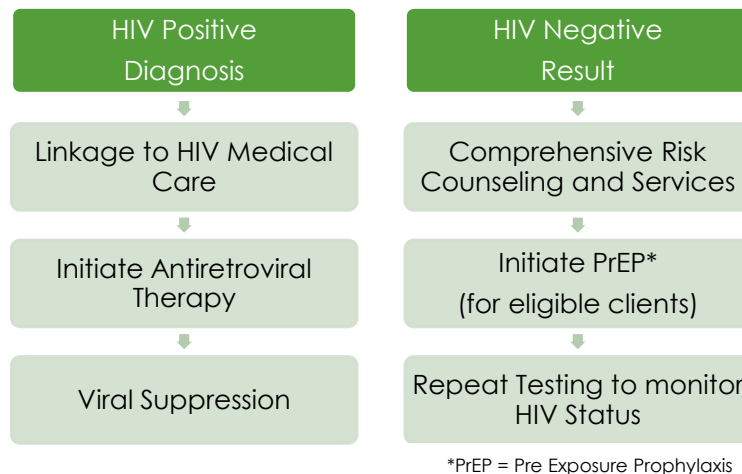
HIV TESTING 2017



HIV testing initiatives are funded as part of comprehensive HIV prevention programs for local health department (LHD) and community based organizations (CBO) through Centers for Disease Control and Prevention (CDC). HIV testing begins a continuum of services which aim to link HIV-positive individuals to care with the goal of viral suppression. For HIV-negative persons, referrals and risk reduction activities aim to keep the individual negative and address other health concerns. Funding opportunity PS 12-1201 lasted from 2012 – 2017 and programs will continue under PS 18-1802.

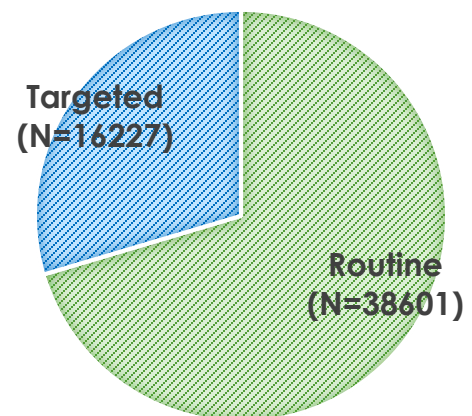
For more information on PS 12-1201 activities, see the CDC website and reports:

<https://www.cdc.gov/hiv/library/reports/index.html>



Targeted vs. Routine Testing

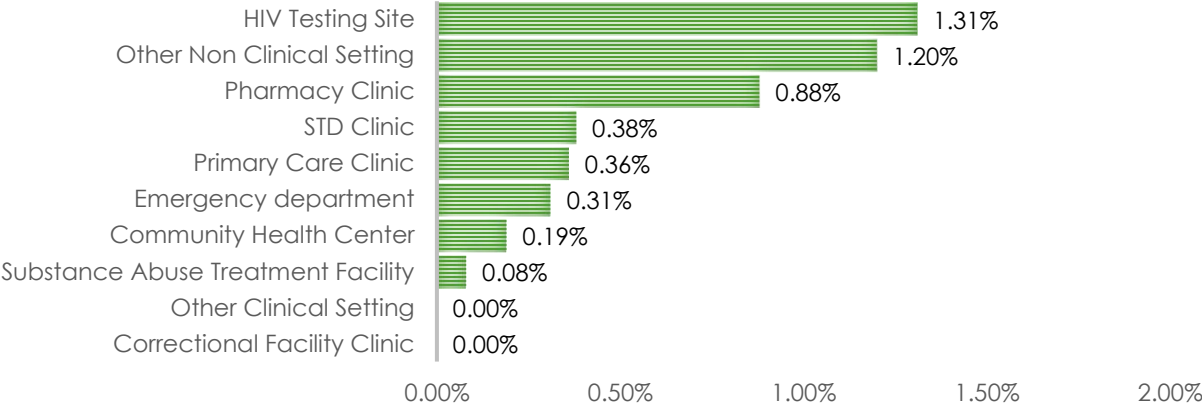
In 2017, **38,601** HIV tests were administered as part of routine testing at local health departments or CBOs. **16,227** HIV tests were administered through targeted testing at emergency rooms or primary care visits in Detroit, a high HIV prevalence area. From all **54,828** tests, **218** new HIV cases were identified, counseled, and referred for HIV care and prevention services. This accounts for approximately one quarter of all 2017 HIV diagnoses in Michigan and calculates to a diagnosis rate of **0.4 percent**.



Diagnoses by Facility Type

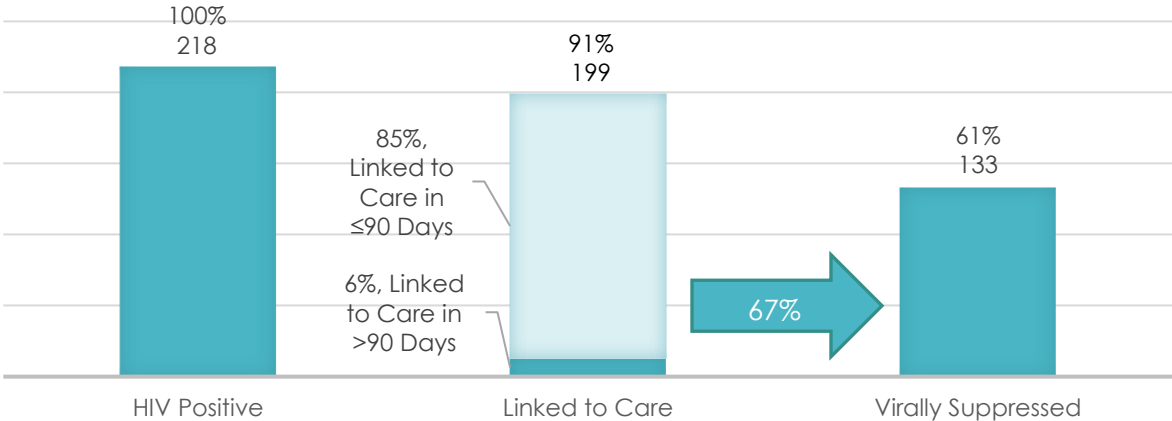
Diagnosis rate is defined as the number of new positives identified divided by the total number of people tested. Michigan LHDs and CBOs aim for a 0.1 percent or higher positivity rate for testing performed in health care settings and a 1 percent or higher positivity rate in non-healthcare settings (HIV testing site or other non-clinical setting).

DIAGNOSIS RATE BY FACILITY TYPE



Linkage to Care

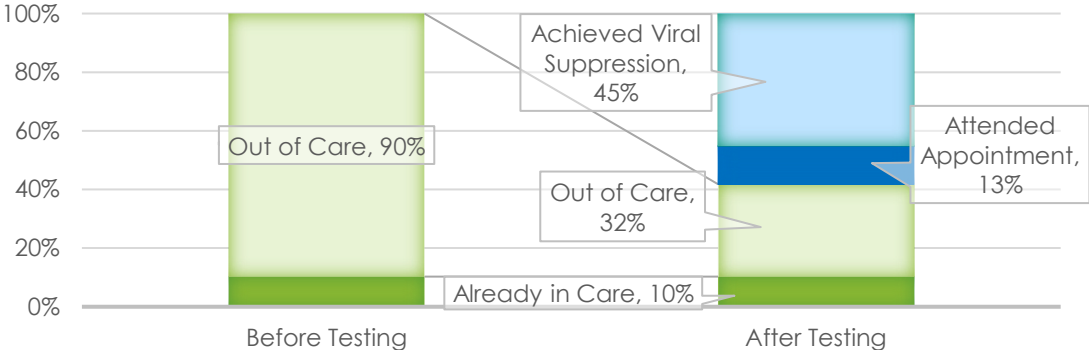
The Care Continuum below shows progress in reaching the goal of viral suppression for People Living with HIV (PLWH) among the **218** PLWH newly diagnosed through both routine and targeted testing initiatives in 2017. Of those diagnosed, **91 percent** were linked to care (defined as having a CD4 or viral load result reported). Of those linked to care, **67 percent** had achieved viral suppression (defined as having a viral load <200 copies/mL) on or before March 1, 2018. Viral suppression was measured for all PLWH on this one date, so this analysis does not take into account the time since diagnosis.



Re-engagement in Care

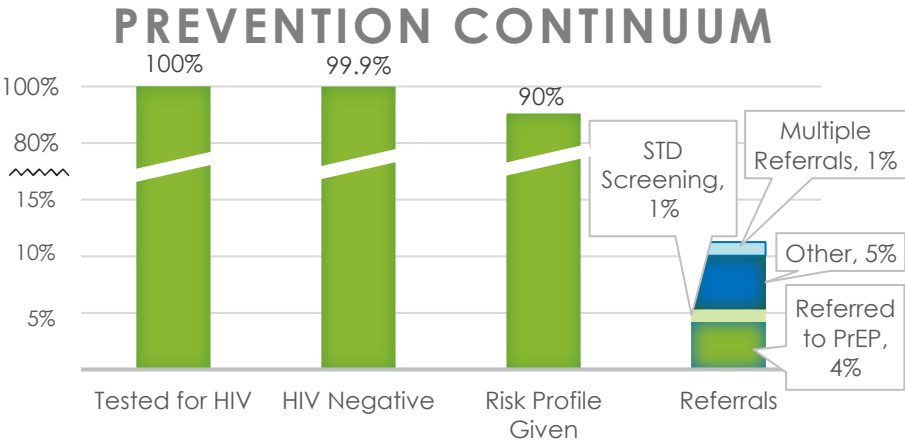
In addition to new HIV diagnoses, HIV prevention efforts under PS 12-1201 funding tested **145** people living with HIV who were previously diagnosed. Of those, **131** were out of care in Michigan based on no HIV care labs in the year prior to testing event.

Following testing, counseling, and referral sessions with funded testing agencies, **85** previously out of care individuals attended an HIV medical care appointment, and **66** of those people had achieved viral suppression on or before March 1, 2018.



Referrals for HIV negative clients

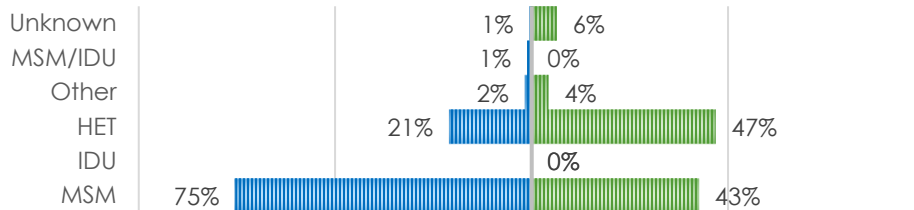
The majority (99.9 percent) of clients for HIV testing receive a negative or non-reactive test result. Standard procedure is to collect a risk profile during the testing session, and 90 percent of HIV negative test events had an associated risk profile. During the testing session, other activities related to risk reduction are done and referrals given when indicated. Overall, 11 percent of HIV negative clients received a referral of some kind during their appointment or test event.



Selected characteristics of **new** HIV diagnoses identified through PS 12-1201 testing in 2017

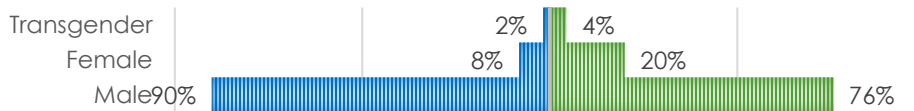
■ Routine (N=171) ■ Targeted (N=47)

TARGET POPULATION

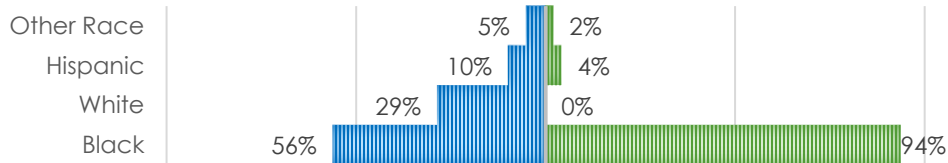


MSM = men who have sex with men
IDU = Injection drug users
HET = heterosexual men and women

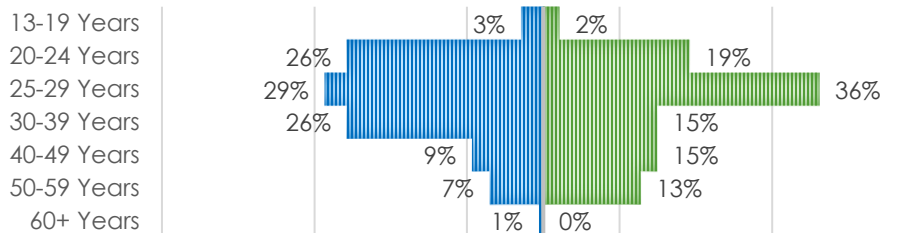
GENDER



RACE



CURRENT AGE



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Revised 5/17/2018