

HIV/AIDS Surveillance Report 2020

Kentucky Cabinet for Health and Family Services
Department for Public Health
HIV/AIDS Section

(Data complete through 2018, preliminary for 2019)







Dear Reader:

Enclosed please find Kentucky's HIV/AIDS Annual Surveillance Report 2020, which contains data on HIV infections among Kentuckians reported to the Department for Public Health. This annual edition is a Centers for Disease Control and Prevention (CDC) grant deliverable and is produced to fulfill the requirements of Funding Opportunity Announcement (FOA): PS18-1802.

Confidential AIDS reporting started in 1982, whereas legislation requiring confidential HIV name-based reporting was not enacted until July 2004. Prior to July 2004, HIV infections were reported with a unique code.

Section I (and throughout the report) profiles the HIV infections diagnosed among Kentuckians, regardless of progression to AIDS. A total of 11,081 cumulative HIV infections were diagnosed and reported as of December 31, 2019. Of these HIV infections, 62% have progressed to AIDS as of the report date.

Section II profiles new HIV infections diagnosed among Kentuckians. In calendar year 2018, there were 368 new HIV infections diagnosed among Kentucky residents, a diagnosis rate of 8.2 per 100,000, which shows a minor increase from the 2017 rate of 8.1 per 100,000 population. Trends among people with newly diagnosed infections are presented in this section, and disparities by race/ethnicity, age at diagnosis, sex, and mode of transmission are highlighted.

Section III profiles Kentuckians with HIV infections who were diagnosed with AIDS within 30 days of initial HIV diagnosis, also referred to as concurrent diagnoses. Analyses focus on the most recent 10 year period: January 1, 2010, through December 31, 2019. Twenty-three percent of the 3,368 individuals with new HIV disease diagnoses within that period were diagnosed with AIDS within 30 days of the initial HIV diagnosis.

Please read the data source and technical notes on pages 3-5 for further information concerning interpretation of the data. The data presented in this report are available at https://chfs.ky.gov/agencies/dph/dehp/hab/Documents/AnnualReport2020.pdf

Sincerely,

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For all media inquiries, please call the Office of Communications at (502) 564-6786 for assistance.

Kentucky Department for Public Health HIV/AIDS useful links:

HIV Reporting and Statistics:

Fillable Adult HIV Confidential Case Report Form:

https://chfs.ky.gov/agencies/dph/dehp/hab/Documents/ACRF Fillable.pdf

Fillable Pediatric HIV Confidential Case Report Form:

https://chfs.ky.gov/agencies/dph/dehp/hab/Documents/PCRF Fillable.pdf

HIV Prevention:

Syringe Exchange Programs:

https://chfs.ky.gov/agencies/dph/dehp/hab/Pages/kyseps.aspx

HIV Test Sites in Kentucky:

https://chfs.ky.gov/agencies/dph/dehp/hab/Documents/KYHIVTestSites.pdf

HIV Services:

HIV Care Coordinator Regions and Contact Information:

https://chfs.ky.gov/agencies/dph/dehp/hab/Documents/KYHIVCCRs.pdf

Ryan White Services Eligibility Application:

https://chfs.ky.gov/agencies/dph/dehp/hab/Documents/RWEligApp.pdf

Kentucky HIV/AIDS Annual Surveillance Report 2020

Data Sources

The HIV/AIDS Annual Report presents data regarding HIV disease cases diagnosed among Kentuckians and reported to the Kentucky Department for Public Health's HIV/AIDS Surveillance Program through December 31, 2019. In this annual edition, HIV disease cases diagnosed among Kentuckians are presented, regardless of disease progression. The data only include those persons who have been confidentially tested and reported to the HIV/AIDS Surveillance Program. No adjustments are made to the data presented to account for undiagnosed, anonymously tested, or unreported cases.

Population data: Kentucky population estimates used in the calculation of rates were obtained from the Kentucky State Data Center, source: Population Division, U.S. Census Bureau, 2010. Available at http://www.ksdc.louisville.edu/Accessed February 14, 2020.

HIV/AIDS Reporting Requirements

According to state regulation 902 KAR 2:020 Reportable Disease Surveillance, Section 16, health professionals licensed under KRS Chapters 311 through 314, health facilities licensed under KRS 216B.015(13), and medical laboratories licensed under KRS Chapter 333, are required to report HIV and AIDS cases to the Kentucky Department for Public Health within five business days of diagnosis.

Cases of confirmed HIV and AIDS are reported to the Kentucky Department for Public Health's HIV/AIDS Surveillance Program at 866-510-0008* on the Confidential Adult HIV Case Report form for patients ≥ 13 years of age at the time of diagnosis. Data from the case report forms are compiled to produce this report.

Additional case reporting information can be found on the Kentucky HIV/AIDS Section Website: https://chfs.ky.gov/agencies/dph/dehp/hab/Pages/reportsstats.aspx

*Note: The previous Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer, and Trimble Counties' reporting route through Louisville Metro has been discontinued. All reporting now will go through routing noted above.

Key Terminology

The terminology used in this report is in a format consistent with CDC's technical guidelines for HIV surveillance grantees in the United States, and also consistent with the National HIV Surveillance Report, available online at: https://www.cdc.gov/hiv/library/reports/hiv-surveillance.html

Current Age: An individual's age or age group as of December 31, 2019.

Age at Diagnosis: An individual's age or age group at the time of initial HIV disease diagnosis.

Adults and Adolescents: An individual aged 13 years and older.

Pediatric: An individual aged less than 13 years.

AIDS (Acquired Immunodeficiency Syndrome): Advanced stage of HIV infection characterized by severe immune deficiency and diagnosed by the presence of at least one of 26 opportunistic illnesses or a CD4 T-lymphocyte count of less than 200 cells/ml of blood. The CD4 T-lymphocyte count takes precedence over the CD4 T-lymphocyte percentage, and a percentage of less than 14% is considered only if the count is missing.

Concurrent Diagnosis: Both HIV and AIDS are diagnosed within a 30-day period.

Date of Diagnosis: The date of an individual's initial HIV disease diagnosis.

HIV (Human Immunodeficiency Virus): A retrovirus that infects the helper T cells of the immune system resulting in immunodeficiency. HIV is diagnosed by a positive confirmatory antibody test or positive/detectable viral detection test.

HIV Disease: Persons with a diagnosis of HIV infection regardless of stage of disease. This includes persons with HIV (non-AIDS), as well as those who have advanced stages of the disease (AIDS).

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Race and Ethnicity: Ethnicity categories include Hispanic and not Hispanic. Data for all not Hispanic persons are displayed in combination with their racial groupings, which include:

- ♦ White
- ♦ Black or African American
- Asian
- Native Hawaiian or other Pacific Islander
- ♦ American Indian or Alaska Native

Kentucky's HIV data are collected for all racial and ethnic groupings. However, due to small numbers, data for the following racial groups are aggregated into the "other" designation: American Indian or Alaska Native, Native Hawaiian or Pacific Islander, and persons of multiple races.

Sex: Sex designations in this report are based on a person's sex assignment at birth. In May 2012, CDC issued guidance to state and local programs on methods for collecting data on transgender persons and working with transgender-specific data. However, characterization of HIV infection among transgender persons in Kentucky would require supplemental data from special studies.

Transmission Category: Classification used to summarize the behavior or event most likely responsible for disease transmission. Each case is only included in a single transmission route.

- ♦ Men Who Have Sex With Men (MSM): Men who report having sexual contact with other men.
- Injection Drug Use (IDU): Individuals who report injecting nonprescription drugs.
- MSM/IDU: Men who report having sex with other men and also inject nonprescription drugs.
- Heterosexual Contact: A person reporting specific heterosexual contact with a person known to have, or to be at high risk for, HIV infection, such as an injection drug user, a bisexual male (females only), or a person with hemophilia/coagulation disorder.
- Female Heterosexual Contact (FHC): A female who does not fit in the heterosexual contact category above, with no reported injection drug use, but reported sexual contact with a male and no additional information about the male's HIV status or behaviors.
- ♦ Hemophilia: Individuals receiving clotting factor for hemophilia/coagulation disorder.
- **Perinatal:** Individuals born to a mother with HIV or a mother with an exposure history listed in the transmission category hierarchy.
- ♦ **Blood Transfusion/Organ Transplant:** Individuals who received blood transfusions or organ transplants. Individuals with a transfusion date listed after March 1985 are considered Cases of Public Health Importance (COPHI) and are followed to verify the mode of transmission.
- Undetermined/No Identified Risk (NIR): Individuals reporting no exposure history to HIV through any of the modes listed in the transmission category hierarchy above.

Technical Notes

- 1. Reporting Delays: Delays exist between the time HIV infection is diagnosed and the time the infection is reported to the HIV/AIDS Surveillance Program. As a result of reporting delays, case statistics for the most recent years of diagnosis may not be complete. Therefore, the data for 2019 and 2020 are considered provisional and will not be presented in the analysis of trends. The data presented in this report have not been adjusted for reporting delays.
- 2. Place of Residence: HIV data are presented based on residence at the time the initial HIV infection was diagnosed. Data presented on living cases reflect those originally diagnosed while living in Kentucky that are still presumed to be living, regardless of their current residence. (Related: see Technical Note 5 below)
- 3. Vital Status: Cases are presumed to be alive unless the HIV/AIDS Surveillance Program has received notification of death. Current vital status information for cases is ascertained through routine site visits with major reporting sites, reports of death from providers, reports of death from other states' surveillance programs, routine matches with Kentucky death certificates (vital statistics registry), and Social Security Death Master Files (SSDMF).
- 4. Transmission Route: Despite the possible existence of multiple methods through which HIV was transmitted, cases are assigned a single most likely transmission route based on a hierarchy developed by the CDC. A limitation of the dataset is the large number of cases reported with an undetermined transmission route. Currently, surveillance data are collected through hard copy case reports, telephone reports, and chart reviews, which occasionally result in missing information. Enhanced surveillance activities have been implemented to resolve case reports with missing risk factor information, including the re-classification of females into the "Female Heterosexual Contact" category.
- 5. Routine Interstate Duplicate Review (RIDR): Case duplication between states can occur and has become more of an issue due to the mobility of our society. To help resolve duplicate reporting, CDC initiated the RIDR project in 2004. RIDR compares patient records throughout the nation in order to identify duplicate cases. The states with duplicate cases contact one another to compare patient profiles to assign the case one state residency based on residence at the earliest date of diagnosis. Due to this process, the cumulative number of cases within Kentucky may change, but the process has increased the accuracy of Kentucky's data by reducing the chance that a case has been counted more than once nationally.
- 6. Small Numbers: Data release limitations are set to ensure that the information cannot be used to inadvertently identify an individual. Data suppression rules are applied based on the population denominators for analyses below the state level. Additional numerator suppression rules are applied for groups or geographic areas that have <50,000 population. Rates are not released when the numerator is fewer than ten cases because of the low reliability of rates based on the small number of cases.
- 7. Difference between HIV Infection/HIV Disease, HIV without AIDS, and concurrent diagnosis of HIV with AIDS: HIV infection includes all individuals diagnosed with HIV regardless of the stage of disease progression. This term is used interchangeably with HIV disease. The data are presented based on the date of the first diagnosis reported to the HIV/AIDS Surveillance Program. HIV without AIDS includes individuals who were diagnosed with HIV and had not progressed to AIDS as of the report date. Concurrent diagnosis with AIDS includes those who were diagnosed with AIDS within 30 days of initial HIV diagnosis.

Section I: Cumulative and Living HIV Infections Diagnosed as of December 31, 2019, Kentucky

Table 1. Cumulative HIV Disease Cases By Age at Diagnosis*, Race/Ethnicity, and Sex as of December 31, 2019,
Kentucky

			White, Not Hispanic		Black, Not Hispanic		Hispanic		Other/ Unknown		TOTAL	
	Age Group	No.	%	No.	%	No.	%	No.	%	No.	%	
	<13	28	<1	31	1	0	0	1	<1	60	1	
	13-19	143	2	173	6	8	2	16	7	340	4	
MALE	20-29	1,646	28	961	35	168	39	87	39	2,862	31	
A	30-39	2,053	35	789	29	156	37	64	29	3,062	33	
$\mathbf{\Sigma}$	40-49	1,308	23	534	20	59	14	38	17	1,939	21	
, ,	50+	618	11	231	8	35	8	17	8	901	10	
	TOTAL	5,796	100	2,719	100	426	100	223	100	9,164	100	
	<13	14	2	20	2	1	1	1	1	36	2	
Ξ	13-19	45	5	53	6	5	6	3	4	106	6	
	20-29	257	29	255	29	36	44	22	30	570	30	
	30-39	292	33	285	32	19	23	22	30	618	32	
FEMAL	40-49	170	19	163	19	16	20	19	26	368	19	
	50+	105	12	103	12	5	6	6	8	219	11	
	TOTAL	883	100	879	100	82	100	73	100	1,917	100	

Percentages may not total 100% due to rounding.

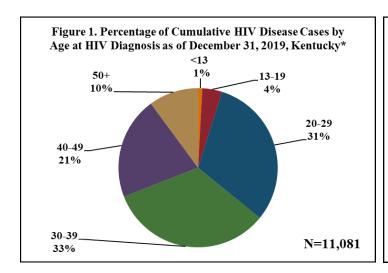
Table 2. Cumulative Adult/Adolescent* HIV Disease Cases By Transmission Route, Race/Ethnicity, and Sex as of December 31, 2019, Kentucky

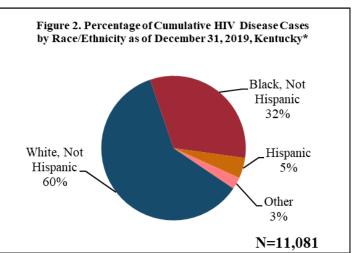
			White, Not Hispanic		k, Not panic	Hispanic		Other/ Unknown		TOTAL	
	Transmission Category	No.	%	No.	%	No.	%	No.	%	No.	%
	MSM	4,197	73	1,520	57	260	61	147	66	6,124	67
	IDU	357	6	334	12	32	8	14	6	737	8
Ξ	MSM/IDU	425	7	158	6	11	3	8	4	602	7
	MSM/IDU Heterosexual Other		4	232	9	42	10	18	8	514	6
M	Other	87	2	16	1	0	0	0	0	103	1
	Undetermined	480	8	428	16	81	19	35	16	1,024	11
	TOTAL	5,768	100	2,688	100	426	100	222	100	9,104	100
	IDU	232	27	165	19	11	14	12	17	420	22
Ħ	Heterosexual	417	48	409	48	45	56	40	56	911	48
AI	Female Heterosexual	149	17	231	27	21	26	16	22	417	22
FEMALE	Other	12	1	5	1	0	0	0	0	17	1
FE	Undetermined	59	7	49	6	4	5	4	6	116	6
	TOTAL	869	100	859	100	81	100	72	100	1,881	100

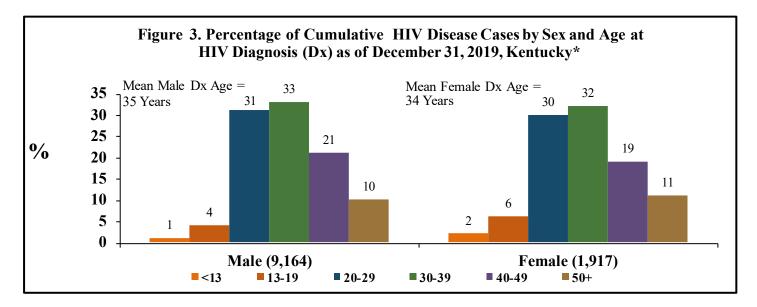
^{*}Cases are classified as adult/adolescent if they were 13 years of age or older at time of HIV diagnosis. Thus, this table excludes 96 cases who were were diagnosed with HIV prior to their 13th birthday.

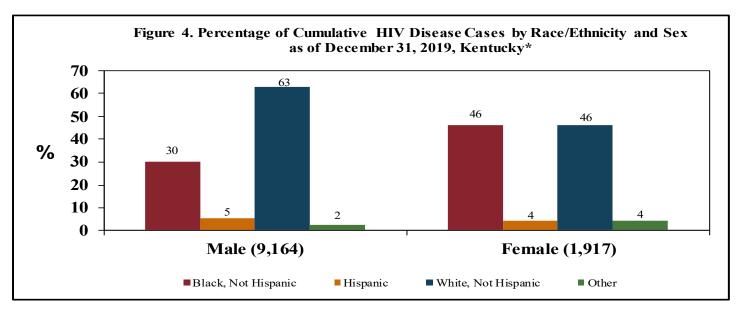
Percentages may not total 100% due to rounding.

^{*}Age at initial HIV diagnosis.









^{*} Percentages may not total 100% due to rounding.

Cumulative HIV Diagnoses by Residential Area Development District (ADD) and County at Time of Diagnosis, Kentucky

Table 3. Cumulative and Living HIV Disease Cases By Residential Area Development District (ADD) and County at Time of Diagnosis as of December 31, 2019, Kentucky⁽¹⁾

	Total HIV	Total Living with		Total HIV	Total Living with
ADD/County	Disease Cases ⁽²⁾	HIV Disease ⁽³⁾	ADD/County	Disease Cases ⁽²⁾	HIV Disease ⁽³⁾
Barren River	397	252	Buffalo Trace	61	39
Allen	23	13	Bracken	8	5
Barren	48	27	Fleming and Robertson*	8	5
Butler	15	13	Lewis	16	8
Edmonson and Metcalfe*	18	11	Mason	29	21
Hart	13	6			
Logan	29	17			
Monroe	16	10	Cumberland Valley	216	137
Simpson	21	13	Bell	22	15
Warren	214	142	Clay	34	25
			Harlan	23	11
			Jackson	17	11
Big Sandy	90	58	Knox	21	14
Floyd	27	18	Laurel	46	28
Johnson and Magoffin*	15	7	Rockcastle	10	7
Martin	11	10	Whitley	43	26
Pike	37	23	··· miley	13	20
1 Inc	31	23	FIVCO	156	97
			Boyd	92	56
Bluegrass	2,160	1,536	Carter	22	16
Anderson	33	21	Elliott and Lawrence*	18	9
Bourbon	34	25	Greenup	24	16
Boyle	40	29	•		
Clark	58	42			
Estill	12	8	Gateway	114	81
Fayette	1,469	1,036	Bath	14	10
Franklin	108	76	Menifee	11	10
Garrard	12	8	Montgomery	30	25
Harrison	13	9	Morgan	34	17
Jessamine	83	64	Rowan	25	19
Lincoln	16	9			
Madison	126	99	Green River	313	194
Mercer	34	18	Daviess	155	93
Nicholas	7	6	Hancock and Webster*	15	9
Powell	12	7	Henderson	63	33
Scott	64	48	McLean	11	8
Woodford	39	31	Ohio	14	9
(1) One case was missing resid			Union	55	42

⁽²⁾ Total cases with HIV disease regardless of progression to AIDS, both living and deceased.

⁽³⁾ Living cases regardless of current residence.

^{*} Cases combined due to confidentiality guidelines.

⁽Continued on page 9)

Cumulative HIV Diagnoses by Residential Area Development District (ADD) and County at Time of Diagnosis, Kentucky (continued)

Table 3 (continued), Cumulative and Living HIV Disease Cases by Residential Area Development District

ADD/County	Total HIV Disease Cases ⁽²⁾	Total Living with HIV Disease ⁽³⁾	ADD/County	Total HIV Disease Cases ⁽²⁾	Total Living with HIV Disease (3)	
Kentucky River	94	63	Northern Kentucky	954	648	
Breathitt and Owsley*	9	6	Boone	159	113	
Knott	16	13	Campbell	199	135	
Lee, Leslie and Wolfe*	15	8	Carroll	20	15	
Letcher	22	13	Gallatin and Owen*	10	7	
Perry	32	23	Grant	35	24	
			Kenton	521	346	
			Pendleton	10	8	
KIPDA/North Central	5,284	3,389	Pennyrile	353	198	
Bullitt	104	80	Caldwell	25	14	
Henry	32	23	Christian	164	110	
Jefferson	4,846	3,119	Crittenden and Lyon*	28	9	
Oldham	192	88	Hopkins	45	22	
Shelby	87	67	Livingston	15	7	
Spencer and Trimble*	23	12	Muhlenberg	36	18	
•			Todd	24	9	
			Trigg	16	9	
Lake Cumberland	185	130				
Adair and Cumberland*	12	8				
Casey	10	6	Purchase	340	207	
Clinton	13	10	Ballard and Carlisle*	15	8	
Green	8	6	Calloway	40	24	
McCreary	20	19	Fulton	11	8	
Pulaski	69	45	Graves	58	36	
Russell	13	7	Hickman	9	7	
Taylor	25	20	Marshall	28	17	
Wayne	15	9	McCracken	179	107	
	2/2	246	(1) One case was missing res	•	•	
Lincoln Trail	363	246	(2) Total cases with HIV dis	ease regardless of progre	ession to AIDS	
Breckinridge	17	7	both living and deceased.			

both living and deceased.

11

158

5

11

17

33

4

19

220

6

20

25 49

7

Grayson

Hardin

Larue

Marion

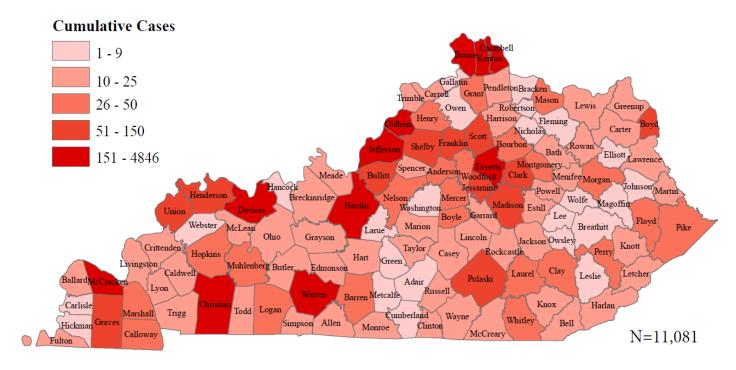
Meade

Nelson Washington

⁽³⁾ Living cases regardless of current residence.

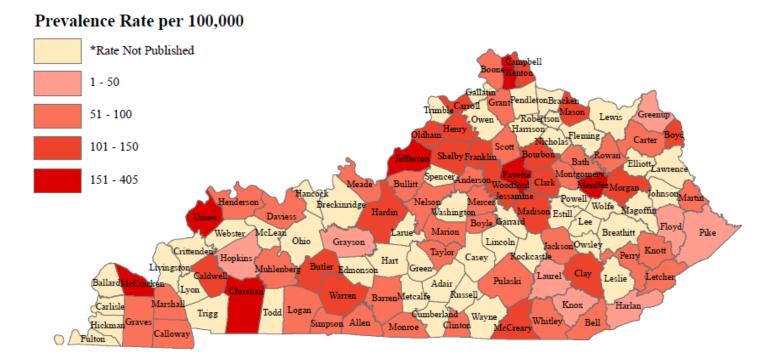
^{*} Cases combined due to confidentiality guidelines.

Figure 5. Cumulative HIV Disease Cases Diagnosed By Residential County at Time of Diagnosis as of December 31, 2019, Kentucky*



^{*}One case was missing residential county at time of diagnosis

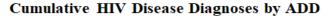
Figure 6. HIV Disease Prevalence Rates By Residential County at Time of Diagnosis as of December 31, 2019, Kentucky



^{*} Rates not published when cell size is less than 10. Prevalence Rates only includes persons living with HIV.

Cumulative HIV Diagnoses by Area Development District (ADD), Kentucky

Figure 7. Cumulative HIV Disease Diagnoses by Area Development District (ADD) of Residence at Time of HIV Diagnosis as of December 31, 2019, Kentucky*



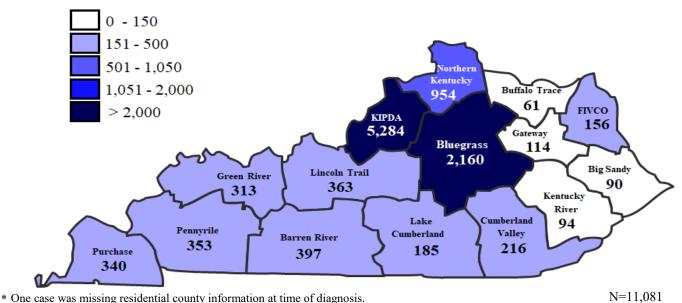
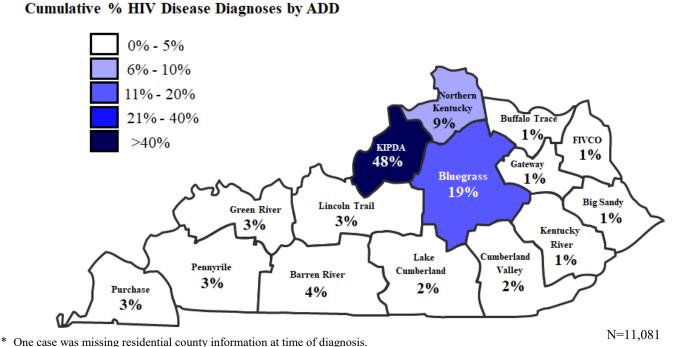


Figure 8. Percentage of Cumulative HIV Disease Diagnoses by Area Development District (ADD) of Residence at Time of HIV Diagnosis as of December 31, 2019, Kentucky*



Persons Living with HIV Disease by Demographics, Kentucky

			2019	, Kentu	eky						
		White	e, Not	Hispanic		Hispanic		Oth	er/		
		Hisp						Unknown		TOTAL	
	Transmission Category	No.	%	No.	%	No.	%	No.	%	No.	%
	MSM	2,659	74	1,095	61	236	63	131	67	4,121	69
	IDU	186	5	138	8	20	5	9	5	353	6
\Box	MSM/IDU	261	7	72	4	8	2	6	3	347	6
MALE	Heterosexual	125	3	144	8	38	10	17	9	324	5
	Perinatal	14	<1	23	1	0	0	1	1	38	1
\geq	Other	14	<1	4	<1	0	0	0	0	18	<1
	Undetermined	342	9	305	17	72	19	31	16	750	13
	Male Subtotal	3,601	100	1,781	100	374	100	195	100	5,951	100
	IDU	147	24	75	13	8	11	10	16	240	18
\Box	Heterosexual	294	49	282	48	41	58	30	49	647	49
FEMALE	Female Heterosexual	114	19	190	32	18	25	16	26	338	26
1	Perinatal	10	2	14	2	1	1	1	2	26	2
	Other	0	0	2	<1	0	0	0	0	2	<1
Ξ	Undetermined	36	6	29	5	3	4	4	7	72	5
	Female Subtotal	601	100	592	100	71	100	61	100	1,325	100
	MSM	2,659	63	1,095	46	236	53	131	51	4,121	57
	IDU	333	8	213	9	28	6	19	7	593	8
Ç	MSM/IDU	261	6	72	3	8	2	6	2	347	5
	Heterosexual	419	10	426	18	79	18	47	18	971	13
ALL LIVING	Female Heterosexual	114	3	190	8	18	4	16	6	338	5
	Perinatal	24	1	37	2	1	<1	2	1	64	1
	Other	14	<1	6	<1	0	0	0	0	20	<1
	Undetermined	378	9	334	14	75	17	35	14	822	11
₹			<u> </u>							<u> </u>	

Note: Percentages may not total 100% due to rounding.

Table 4 shows living HIV cases diagnosed through December 31, 2019, by demographic and behavioral characteristics. There are 7,276 Kentuckians reported to be living with HIV (prevalence rate of 162.8 cases per 100,000).

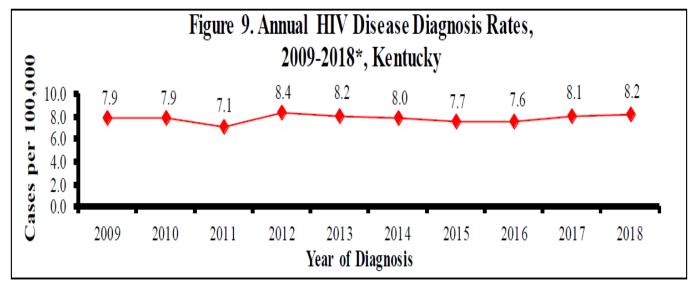
Section II: New HIV Infections Diagnosed among Kentuckians, as of December 31, 2019

As of December 31, 2019, a total of 11,081 cumulative HIV infections among Kentuckians had been reported to the Department for Public Health's HIV/AIDS Surveillance Program since AIDS reporting started in 1982. Of these infections, 62% have progressed to AIDS.

Table 5. Number of HIV Infections per Year of Diagnosis (2009-2019 [†]) and Percentage that Progressed to AIDS in the Course of Illness as of December 31, 2019 Kentucky										
Year of HIV Diagnosis	TOTAL HIV/AIDS*	Percentage that Progressed to AIDS†								
	No.	%								
2009	342	50%								
2010	343	46%								
2011	311	46%								
2012	367	38%								
2013	359	36%								
2014	351	33%								
2015	341	29%								
2016	339	37%								
2017	361	28%								
2018	368	24%								
2019 [†]	228	23%								
TOTAL	3710	36%								

^{*}Total HIV infections regardless of disease progression.

Figure 9 displays annual HIV diagnosis rates among Kentuckians. The annual HIV diagnosis rate has remained fairly steady from 2009 to 2018 with slight fluctuations between 7.1 to 8.4 cases per 100,000 population.



^{*}Data are current as of December 31, 2019. All 2019 data are considered preliminary due to reporting delays and not included in trend analysis.

[†]Data reported as of December 31, 2019.

Estimated Annual HIV Disease Diagnosis Rates per 100,000. A Comparison of Kentucky to Other States and Washington, DC, Using National Data from the Centers for Disease Control and Prevention (CDC), 2018⁽¹⁾

Table 6. Estimated* Annual HIV Disease Diagnosis Rates per 100,000 Population by Residence at Time of Diagnosis, 2018

Rank	Area of Residence	Rate
1	Washington, DC	29.6
2	Georgia	24.3
3	Florida	22.1
4	Louisiana	21.2
5	Nevada	16.8
6	Maryland	16.2
7	Mississippi	16.0
8	Texas	15.6
9	South Carolina	14.1
10	New York	12.6
11	Alabama	11.8
11	New Jersey	11.8
13	North Carolina	11.6
14	Arizona	11.3
14	Tennessee	11.3
16	California	11.1
17	Illinois	10.7
18	Virginia	10.2
19	Delaware	9.5
19	Massachussetts	9.5
21	Arkansas	9.4
22	Ohio	8.5
23	Kentucky**	8.1
24	Pennsylvania	7.8
25	Indiana	7.7
26	Missouri	7.3

Rank	Area of Residence	Rate
27	Colorado	7.2
27	Michigan	7.2
27	Rhode Island	7.2
30	Connecticut	7.0
31	Washington	6.7
32	Oklahoma	5.9
33	New Mexico	5.8
34	Oregon	5.5
35	Kansas	5.3
36	Minnesota	5.0
37	North Dakota	4.7
37	West Virginia	4.7
39	Hawaii	4.6
40	Nebraska	4.1
41	Utah	3.8
42	Iowa	3.7
43	Wisconsin	3.6
44	South Dakota	3.3
45	Vermont	2.9
46	Alaska	2.7
46	New Hampshire	2.7
48	Montana	2.2
49	Idaho	2.1
49	Maine	2.1
49	Wyoming	2.1

¹U.S. estimated rates from Centers for Disease Control and Prevention. HIV Surveillance Report, 2018; vol.30 https://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-2018-preliminary-vol-30.pdf Published November 2019. Accessed February 2020.

Estimated National HIV Diagnosis Rate per 100,000, 2018:

11.4

^{*}Estimated numbers resulted from statistical adjustment that accounted for reporting delays, but not incomplete reporting.

^{**}Kentucky's rate is estimated by CDC using a different methodology and should not be compared directly to reported data elsewhere in this report.

New HIV Diagnosis: Kentucky vs. The United States, 2018

Semale (adult/adolescent) 68 18 Child (<13 yrs)							
2018, K	entucky						
Characte ristics	New	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Male (adult/adolescent)	300	82					
Female (adult/adolescent)	68	18					
Child (<13 yrs)	0	0					
TOTAL	368	100					
AGE AT DIAGNOSIS‡							
<13	0	0					
13-24	77	21					
25-44	217	59					
45-64	67	18					
65+	7	2					
TOTAL	368	100					
RACE/ETHNICITY							
White, Not Hispanic	217	59					
Black, Not Hispanic	111	30					
Hispanic	23	6					
Other/Unknown	17	5					
TOTAL	368	100					
TRANSMISSION ROUTE							
MSM	198	54					
IDU	54	15					
MSM/IDU	17	5					
Heterosexual	25	7					
Perinatal	0	0					
Other/Undetermined	74	20					
TOTAL Note: Percentages may not total 100%	368	100					

Table 8. Estimated New	U.S. HIV I	nfections by
Demograp	hics, 2018	
	Number	
	of New	% of New
Characteristics	Cases (6)	HIV cases (1)
SEX		
Male (adult/adolescent)	30,147	81
Female (adult/adolescent)	7,139	19
Child (<13 yrs)	91	<1
TOTAL	37,377	100
AGE AT DIAGNOSIS		
<13	91	<1
13-24	7,734	21
25-44	20,480	55
45-64	8,192	22
65+	880	2
TOTAL	37,377	100
RACE/ETHNICITY		
White, Not Hispanic	9,620	26
Black, Not Hispanic	16,067	43
Hispanic	9,673	26
Other	2,017	5
TOTAL	37,377	100
TRANSMISSION ROUTE		
MSM	24,650	66
IDU	2,478	7
MSM/IDU	1,305	3
Heterosexual	8,778	23
Perinatal	66	<1
Other/Undetermined	101	<1
TOTAL	37,378	100

Note: Percentages may not total 100% due to rounding.

Kentucky's distribution of HIV cases by sex and age at diagnosis (Table 7) closely parallels that of the U.S. (Table 8). However, the percentage of new HIV cases in Kentuckians that are white, not Hispanic, is much greater than in the U.S. population (59% vs. 26%, respectively).

https://www.census.gov/quickfacts/fact/table/KY,US/PST045218

Adult/Adolescent HIV Diagnoses Regardless of Progression to AIDS, Kentucky

Table 9. Adult/Adolescent HIV Diagnoses by Year of Diagnosis, Sex, Age at Diagnosis, Race/Ethnicity, and Transmission Route, Kentucky

											•					
Characteristics	1982	-13	201	14	201	15	201	16	201	17	201	18	2019	9	Tot	tal
<u>S EX</u>	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male	7,463	83	286	83	285	84	285	85	294	82	300	82	191	84	9,104	83
Female	1,546	17	58	17	55	16	52	15	66	18	68	18	36	16	1,881	17
TOTAL	9,009	100	344	100	340	100	337	100	360	100	368	100	227	100	10,985	100
AGE AT DIAGNOSIS																
13-19	345	4	14	4	14	4	13	4	13	4	28	8	19	8	446	4
20-29	2,711	30	109	32	140	41	124	37	132	37	130	35	86	38	3,432	31
30-39	3,161	35	87	25	76	22	98	29	97	27	107	29	54	24	3,680	34
40-49	1,956	22	86	25	59	17	56	17	58	16	52	14	40	18	2,307	21
50+	836	9	48	14	51	15	46	14	60	17	51	14	28	12	1,120	10
TOTAL	9,009	100	344	100	340	100	337	100	360	100	368	100	227	100	10,985	100
RACE/ETHNICITY																
White, Not Hispanic	5,488	61	199	58	187	55	176	52	219	61	217	59	151	67	6,637	60
Black, Not Hispanic	2,931	33	101	29	126	37	116	34	106	29	111	30	56	25	3,547	32
Hispanic	367	4	31	9	13	4	34	10	25	7	23	6	14	6	507	5
Other/Unknown	223	2	13	4	14	4	11	3	10	3	17	5	6	3	294	3
TOTAL	9,009	100	344	100	340	100	337	100	360	100	368	100	227	100	10,985	100
TRANSMISSION																
<u>ROUTE</u>																
MSM	5,016	56	206	60	211	62	197	58	187	52	198	54	109	48	6,124	56
IDU	981	11	10	3	15	4	19	6	47	13	54	15	31	14	1,157	11
MSM/IDU	485	5	12	3	17	5	17	5	35	10	17	5	19	8	602	5
Heterosexual	1,294	14	28	8	28	8	24	7	17	5	25	7	9	4	1,425	13
Female Heterosexual	269	3	33	10	25	7	27	8	27	8	21	6	15	7	417	4
Other	119	1	0	0	1	<1	0	0	0	0	0	0	0	0	120	1
Undetermined	845	9	55	16	43	13	53	16	47	13	53	14	44	19	1,140	10
TOTAL	9,009	100	344	100	340	100	337	100	360	100	368	100	227	100	10,985	100

Note: Percentages may not total 100% due to rounding.

Table 9 shows a breakdown of new adult/adolescent HIV diagnoses by year of diagnosis and demographic characteristics. Cumulative data are presented through December 31, 2019. New diagnoses over the most recent years for which data are complete, 2014-2018, have been predominantly among males, whites, and males reporting sexual contact with other males.

Adult/Adolescent HIV Diagnoses that have Progressed to AIDS, Kentucky

Table 10. Adult/Adolescent HIV Disease Cases with AIDS by Year of Initial HIV Diagnosis, Sex, Age at Diagnosis, Race/Ethnicity, and Transmission Route. Kentucky

			Race	/Ethni	city, ar	id Tra	ns mis s	ion R	oute, I	Sentu	cky					
Characteristics	1982	2-13	201	14	201	15	201	16	201	17	201	18	201	9	Tot	al
<u>SEX</u>	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male	5,184	84	97	84	85	86	104	84	85	85	74	84	41	80	5,670	84
Female	1,013	16	19	16	14	14	20	16	15	15	14	16	10	20	1,105	16
TOTAL	6,197	100	116	100	99	100	124	100	100	100	88	100	51	100	6,775	100
AGE AT DIAGNOSIS																
13-19	182	3	1	1	1	1	4	3	1	1	5	6	1	2	195	3
20-29	1,709	28	20	17	21	21	25	20	19	19	23	26	10	20	1,827	27
30-39	2,346	38	28	24	25	25	41	33	29	29	22	25	15	29	2,506	37
40-49	1,365	22	44	38	22	22	26	21	27	27	18	20	13	25	1,515	22
50+	595	10	23	20	30	30	28	23	24	24	20	23	12	24	732	11
TOTAL	6,197	100	116	100	99	100	124	100	100	100	88	100	51	100	6,775	100
RACE/ETHNICITY																
White, Not Hispanic	3,841	62	62	53	54	55	68	55	65	65	53	60	36	71	4,179	62
Black, Not Hispanic	1,957	32	36	31	33	33	44	35	22	22	23	26	10	20	2,125	31
Hispanic	262	4	13	11	6	6	10	8	9	9	5	6	2	4	307	5
Other/Unknown	137	2	5	4	6	6	2	2	4	4	7	8	3	6	164	2
TOTAL	6,197	100	116	100	99	100	124	100	100	100	88	100	51	100	6,775	100
TRANSMISSION																
<u>ROUTE</u>																
MSM	3,429	55	62	53	60	61	61	49	44	44	42	48	20	39	3,718	55
IDU	791	13	2	2	4	4	8	6	8	8	11	13	5	10	829	12
MSM/IDU	371	6	5	4	2	2	3	2	10	10	2	2	2	4	395	6
Heterosexual	953	15	15	13	7	7	9	7	5	5	4	5	4	8	997	15
Female Heterosexual	127	2	11	9	8	8	10	8	9	9	6	7	4	8	175	3
Other	113	2	0	0	1	1	0	0	0	0	0	0	0	0	114	2
Undetermined	413	7	21	18	17	17	33	27	24	24	23	26	16	31	547	8
TOTAL	6,197	100	116	100	99	100	124	100	100	100	88	100	51	100	6,775	100

Note: Percentages may not total 100% due to rounding.

Table 10 shows a breakdown of adult/adolescent HIV diagnoses that have progressed to AIDS by year of initial HIV diagnosis and demographic characteristics. Newly diagnosed cases that had progressed to AIDS as of December 31, 2019, were predominantly male, white, and males reporting sexual contact with other males.

Table 11. Number and Percentage of Cu Route and Race/Ethni						•	Transn	nission
		e, Not panic	, , ,		Other ⁽²⁾ Unknown		TOTAL	
Transmission Route	No.	%	No.	%	No.	%	No.	%
Pediatric Hemophilia/Coagulation Disorder	10	24	1	2	0	0	11	11
Perinatal Exposure, Mother with HIV	28	67	43	84	3	100	74	77
Pediatric Transfusion/Transplant	2	5	0	0	0	0	2	2
Pediatric risk not identified or reported	2	5	7	14	0	0	9	9
TOTAL ⁽³⁾	42	100	51	100	3	100	96	100

- (1) Cases are classified as Pediatric if they are less than 13 years of age at time of diagnosis.
- (2) Other includes Hispanics and persons of other races.
- (3) Percentages may not total 100% due to rounding.

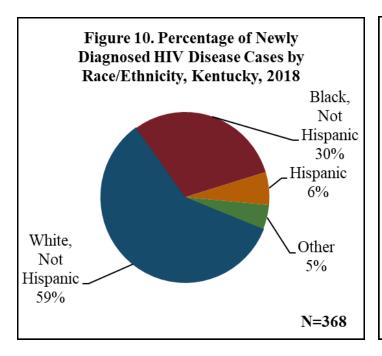
Table 12. Nun	iber a	nd Pe	centa	ge of (Cumul			ric ⁽¹⁾ H Kentu		sease	Cases	by Di	sease S	Status	and Ye	ar of
	1982	-2013	20	14	20	15		16		17	20	18	201	9 ⁽²⁾	То	tal
Disease Status	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
HIV infections without AIDS	35	42	7	100	1	100	2	100	1	100	0	0	0	0	46	48
HIV infections with AIDS	49	58	0	0	0	0	0	0	0	0	0	0	1	0	50	52
Total ⁽³⁾	84	100	7	100	1	100	2	100	1	100	0	0	1	0	96	100

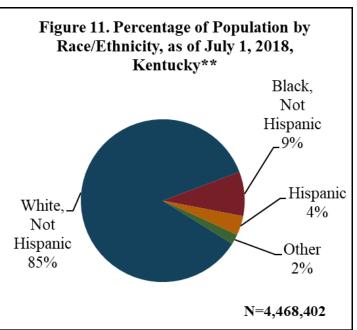
- (1) Cases are classified as Pediatric if they are less than 13 years of age at time of diagnosis.
- (2) Data reported as of December 31, 2019.
- (3) Percentages may not total 100% due to rounding.

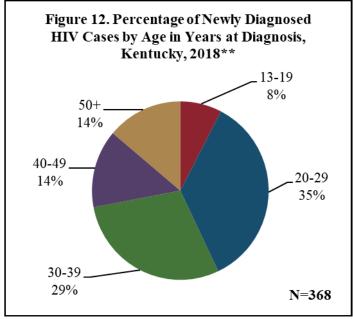
There have been 96 pediatric HIV cases reported to the Kentucky HIV/AIDS surveillance program (Table 11 and Table 12) since reporting began in 1982. The majority of reported pediatric cases (77%) were due to perinatal transmission through an HIV-infected mother, 11 cases were reported with a primary exposure route of pediatric hemophilia or coagulation disorders, and two cases were due to pediatric transfusion or transplant (Table 11). Since 1991, there have been no pediatric HIV cases with hemophilia or coagulation disorders reported as the route of exposure. The two pediatric cases reported with pediatric transfusion or transplant as the risk factor were diagnosed in 1987 or earlier. Eighty-four percent of the 51 pediatric HIV cases among blacks were due to perinatal exposure as compared to 67% of the 42 pediatric HIV cases among whites. Only one pediatric HIV case has been reported among Hispanics. The majority (58%) of the 74 cumulative perinatal exposures from a mother with HIV were in blacks.

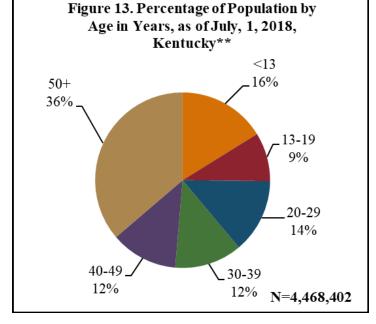
Table 12 shows disease progression to AIDS as of December 31, 2019. Eighty-four (87%) of the cumulative 96 pediatric cases in Kentucky were diagnosed prior to 2014. Seven or fewer new pediatric HIV cases have been reported during each of the most recent five years.

New HIV Disease Cases by Race/Ethnicity, Kentucky









^{**}Percentages may not total 100% due to rounding.

Table 13. HIV Disease Cases and Diagnosis Rates by Year of HIV Diagnosis and Area Development

District (ADD) of Residence at Time of HIV Diagnosis, 1982-2019⁽²⁾, Kentucky

AREA DEVELOPMENT DISTRICT	CASES & RATES ⁽¹⁾	1982- 2013*	-	2015	2016			_	TOTAL CASES ⁽³⁾	% of Total
1. Barren River	Cases Rate per 100,000	315	5.5	13 4.4	5.0	4.3	4.6	11	397	4%
2. Big Sandy	Cases Rate per 100,000	64	2	4.4	5	5	6	4	90	1%
3. Bluegrass	Cases Rate per 100,000	1,763	73 9.1	70 8.7	65 8.0	65 7.9	79 9.5	45	2,160	19%
4. Buffalo Trace	Cases Rate per 100,000	51	2	0	3	0	4	1	61	1%
5. Cumberland Valley	Cases Rate per 100,000	165	9	11 4.7	9	11 4.7	6	5	216	2%
6. FIVCO	Cases Rate per 100,000	131	0	3	5	8	4	5	156	1%
7. Gateway	Cases Rate per 100,000	87	8	4	3	4	5	3	114	1%
8. Green River	Cases Rate per 100,000	267	5.6	10	3	8	7	6	313	3%
9. Kentucky River	Cases Rate per 100,000	68	9	7	1	5	1	3	94	1%
10. KIPDA/ North Central	Cases Rate per 100,000	4,430	151 15.2	147 14.7	164 16.4	156 15.5	159 15.7	77	5,284	48%
11. Lake Cumberland	Cases Rate per 100,000	152	4	9	3	5.3	3	3	185	2%
12. Lincoln Trail	Cases Rate per 100,000	269	22 8.0	9	16 5.9	11 4.0	23 8.3	13	363	3%
13. Northern KY	Cases Rate per 100,000	747	23 5.1	35 7.7	25 5.5	46 10.0	47 10.2	31	954	9%
14. Pennyrile	Cases Rate per 100,000	291	8	10 4.6	17 7.9	12 5.6	4	11	353	3%
15. Purchase	Cases Rate per 100,000	292	6.1	9	5	6	6	10	340	3%
TOTAL (9,092	351	341	339	361	368	228	11,080	100%

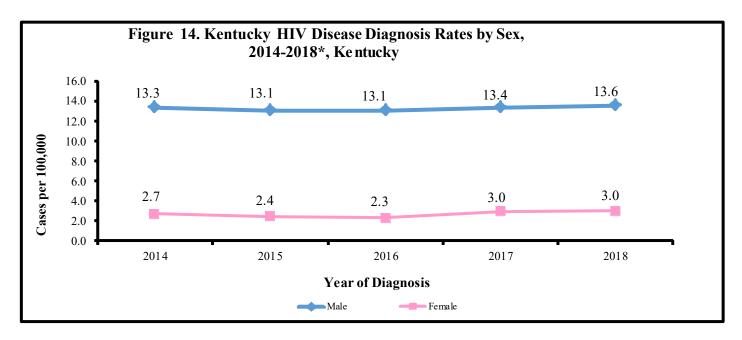
⁽¹⁾ Rates are only listed for years of diagnosis 2014-2018. Data for 2019 are provisional due to reporting delays and are subject to change. Due to the small numbers of HIV cases reported in some ADDs, please interpret the corresponding rates with caution. Rates are not published when cell size is less than 10.

⁽²⁾ Data reported as of December 31, 2019. Rates are not published for 2019 because data are not complete.

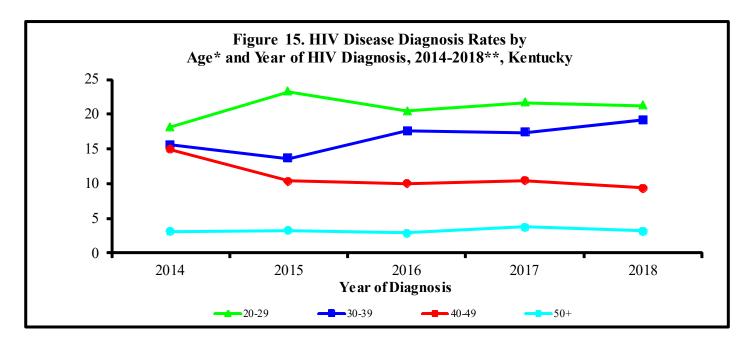
⁽³⁾ Total HIV disease cases both living and deceased, regardless of progression to AIDS; Total HIV cases reported are 11,081—1 HIV case had unknown residential information.

^{*}Rates are not published due to multi-year aggregation of data.

Trends in HIV Disease Diagnosis Rates by Sex, 2014-2018, Kentucky



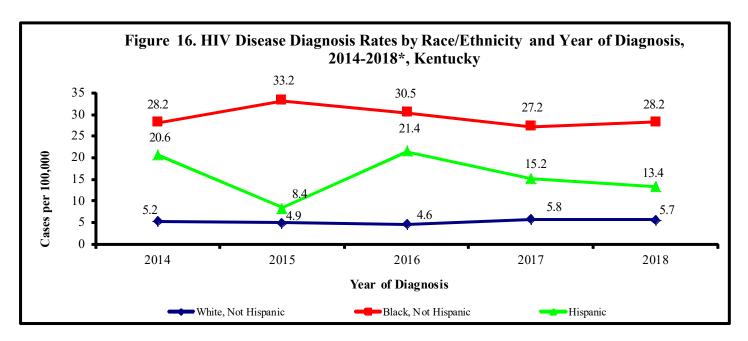
^{*}Data for 2019 are not included in trend analyses since they are considered provisional due to reporting delays.



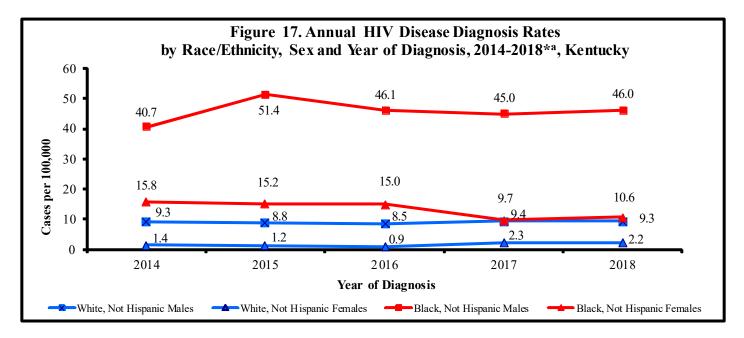
^{*}Due to the small numbers of HIV cases reported, rates are not presented for age groups 0-12 and 13-19 years old.

^{**}Data for 2019 are not included in trend analyses since they are considered provisional due to reporting delays.

Trends in HIV Disease Diagnosis Rates by Race/Ethnicity, 2014-2018, Kentucky



^{*}Data for 2019 are not included in trend analyses since they are considered provisional due to reporting delays.

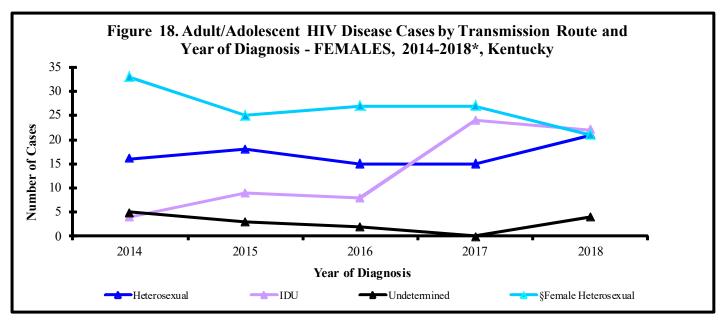


^{*}Data for 2019 are not included in trend analyses since they are considered provisional due to reporting delays.

The HIV diagnosis rates among black males fluctuated between 4.4 to 5.8 times higher than that of white males. The rates among black females were 4.2 to 16.6 times higher than those of white females over the five year period.

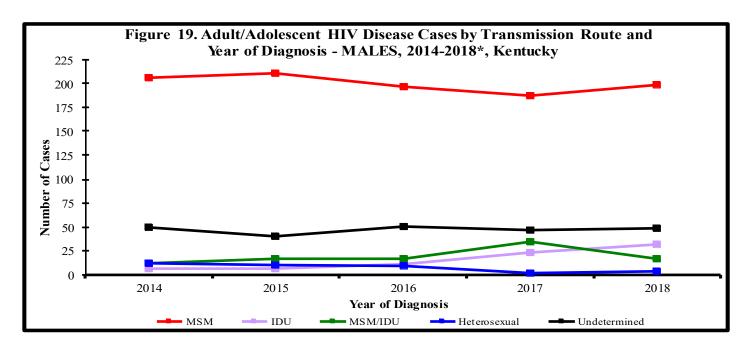
^aRates for Hispanic cases by sex are not presented due to the small number of cases reported.

Trends in HIV Disease Diagnosis Rates by Route of Transmission and Sex, 2014-2018, Kentucky



^{*}Data for 2019 are not included in trend analyses since they are considered provisional due to reporting delays. §Female Heterosexual Contact = A female not reporting drug use, but reporting sex with male with unknown HIV status or risk.

The number of new female cases reporting IDU as the primary route of transmission varied from 6.9% in 2014 to 34.3% in 2017. 32.3% of females reported IDU as risk factor for 2018.



^{*}Data for 2019 are not included in trend analyses since they are considered provisional due to reporting delays.

The number of males reporting IDU as a risk factor increased between 2016 and 2018. MSM /IDU cases increased between 2016 to 2017, but decreased between 2017 to 2018...

Section III: HIV Infections Diagnosed Concurrently with AIDS among Kentuckians as of December 31, 2019

During the most recent 10 year period for which data are available (January 1, 2010, to December 31, 2019), a total of 3,368 HIV disease cases were diagnosed among Kentuckians. Of these, 1,150 (34%) had progressed to AIDS as of December 31, 2019.

ble 14. AIDS Cases Diagnosed within the 2019 by Time (in days) from HIV I		
Time to AIDS Diagnosis (Days)	No.	%
≤30 Days †	767	66.6
31-60 Days	81	7.0
61-90 Days	43	3.9
91-365 Days	103	8.9
>365 Days	156	13.6
Total	1,150	100

†Cases diagnosed with AIDS within 30 days of initial HIV diagnosis are considered concurrent diagnoses. Note: 2,218 HIV-only cases diagnosed in the same timeframe are not included in the table as they had not progressed to AIDS as of December 31, 2019.

Of the 3,368 HIV disease cases diagnosed in the most recent 10 years, 767 (22.8%) were diagnosed with AIDS within 30 days of the initial HIV diagnosis, also known as a "concurrent diagnosis".

The distribution of progression to AIDS (in days) for the 1,150 AIDS cases is shown in Table 14. About sixty-seven percent of the 1,150 AIDS cases diagnosed in the most recent 10 years were diagnosed with AIDS within 30 days of the initial HIV diagnosis.

According to the Centers for Disease Control and Prevention (CDC)* late testers are those who have an AIDS diagnosis within one year of initial HIV diagnosis. During the presented time period, 994 (29.5%) of the 3,368 Kentuckians diagnosed with HIV disease were late testers.

*CDC. Late versus early testing of HIV—16 sites, United States, 2000-2003. MMWR 2003; 52(25): 581-586.

Concurrent Diagnoses by Selected Characteristics, 2010-2019*, Kentucky

Table 15. HIV Infections Diagnosed in the Most Recent 10 Year Period (January 1, 2010-December 31, 2019) that were Diagnosed Concurrently with AIDS (within 30 Days of HIV Diagnosis) and those without a Concurrent

Diagnosis** by Sex, Age at Diagnosis, Race/Ethnicity, and Transmission Category, Kentucky **HIV** with Concurrent AIDS **HIV Without Concurrent AIDS Total HIV** Diagnosis* Diagnosis** Disease Diagnoses*** % ⁽¹⁾ % ⁽¹⁾ **%** (1) Characteristics No. No. No. **SEX** Male 2,151 2,781 Female AGE AT DIAGNOSIS <13 <1 13-19 20-29 1,051 1,197 30-39 40-49 50+ **RACE/ETHNICITY- Female** White, Not Hispanic Black, Not Hispanic Hispanic Other/Unknown **RACE/ETHNICITY- Male** White, Not Hispanic 1,202 1,600 Black, Not Hispanic Hispanic Other/Unknown TRANSMISSON **CATEGORY** MSM 1,509 1,881 IDU MSM/IDU Heterosexual Female Heterosexual Perinatal <1 Other <1 <1 <1 Undetermined **TOTAL** 2,601 3,368

^{*}Concurrent is defined as being diagnosed with both HIV and AIDS within a 30 day period.

^{**}Without AIDS diagnosis 30 days after initial HIV diagnosis. Includes both HIV (non AIDS) cases and those with an AIDS diagnosis more than 30 days after initial HIV diagnosis.

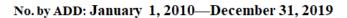
^{***}Total diagnoses January 1, 2010 through December 31, 2019 with HIV, regardless of AIDS diagnosis status.

⁽¹⁾ Percentages may not total to 100% due to rounding. Percentages for each characteristic add up to 100% by column.

HIV Diagnoses by Area Development District (ADD), January 1, 2010-December 31, 2019

Figure 20. Number of HIV Disease Diagnoses within each Area Development District of Residence at Time of Diagnosis, for the Most Recent 10 years,

January 1, 2010—December 31, 2019, Kentucky



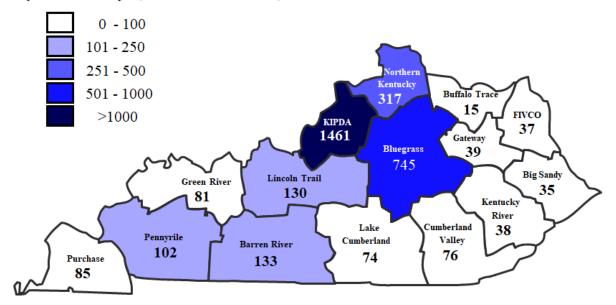
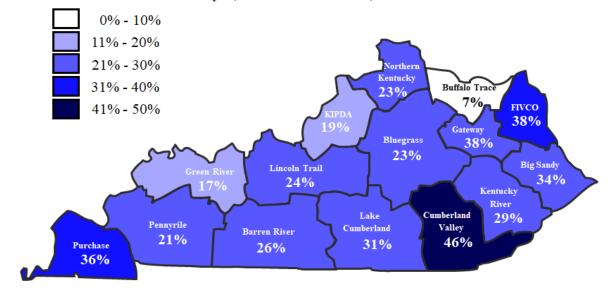


Figure 21. Percentage of All HIV Disease Diagnoses within each Area Development District of Residence at Time of Diagnosis, who have a Concurrent Diagnosis of AIDS, for the Most Recent 10 Years, January 1, 2010 – December 31, 2019, Kentucky

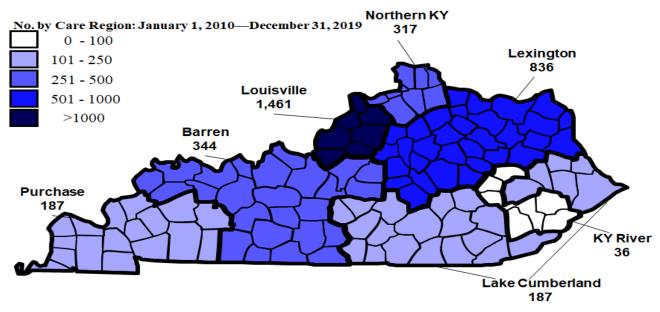
% Concurrent within ADD: January 1, 2010—December 31, 2019



Note: The percentages presented in Figure 21 represent the proportion of concurrent diagnoses out of the total for each individual ADD. Totals for each ADD are presented in Figure 20.

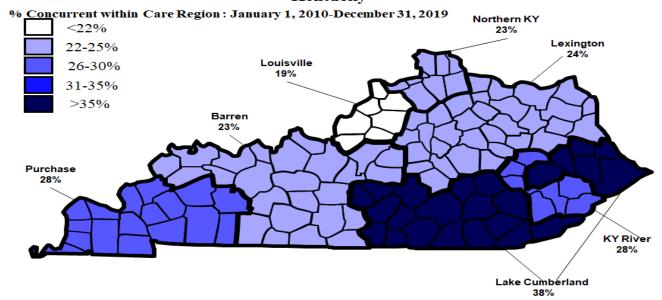
HIV Diagnoses by Care Coordinator Region, January 1, 2010-December 31, 2019, Kentucky

Figure 22. Number of New HIV Disease Diagnoses within each Care Coordinator Region of Residence at Time of Diagnosis, for the Most Recent 10 Years, January 1, 2010--December 31, 2019, Kentucky



^{*}Owsley County is currently being served by both the Lake Cumberland and KY River District HDs.

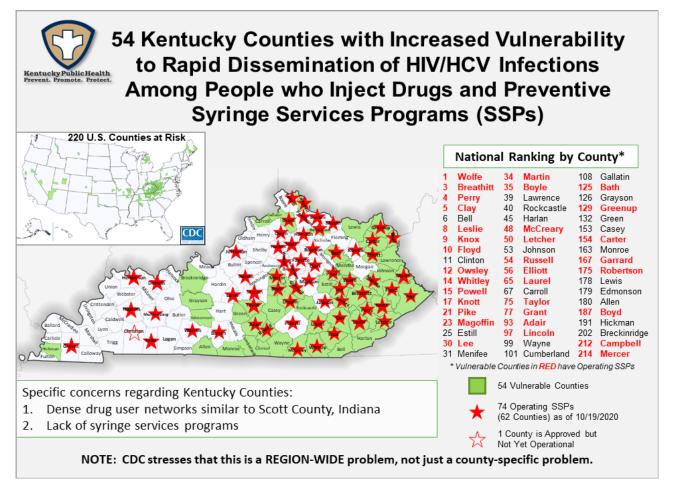
Figure 23. Percentage of All HIV Disease Diagnoses within each Care Coordinator Region of Residence at Time of Diagnosis, who have a Concurrent Diagnosis of AIDS, for the Most Recent 10 Years, January 1, 2010—December 31, 2019, Kentucky



^{*}Owsley County is currently being served by both the Lake Cumberland and KY River District HDs.

Note: The percentages presented in Figure 23 represent the proportion of concurrent diagnoses out of the total for each individual region. Totals for each region are presented in Figure 22. Owsley County is currently being served by both the Lake Cumberland and KY River District Health Departments (HD). In Figures 22 & 23 Owsley County is included only in the KY River District HD, and Graves and Todd Counties are included in Purchase District HD.

Harm Reduction Programs and HIV Outbreak Vulnerability



HIV Counseling and Testing Sites, Kentucky

The HIV Prevention Program at the Department for Public Health sponsors several HIV counseling and testing sites in each of the 120 counties across the state. Sponsored non-clinical agencies offer rapid-rapid HIV-1/2 antibody testing and can provide results within 1 to 20 minutes. Those with reactive results from an initial rapid test can be tested immediately with a different brand of rapid test that is less sensitive than the initial rapid test. Clients receiving reactive results from both rapid tests are almost certainly infected with HIV and can be promptly linked to an HIV care provider without waiting days or weeks for a confirmatory test. Sponsored clinical agencies offer a rapid finger stick HIV-1/2 antibody test.

All state sponsored testing sites offer anonymous or confidential HIV testing at free or minimal cost by appointment and/or on a walk in basis. Pre-test and post-test counseling are offered at all agencies.

For a comprehensive list of HIV testing sites, please visit: https://chfs.ky.gov/agencies/dph/dehp/hab/Pages/prevention.aspx http://www.aidsvu.org