



# Tracking 2022-26 Plan Indicators

## Progress on HIV Surveillance Data-driven Measures

Connecticut HIV Planning Consortium  
Quality and Performance Measures Subcommittee  
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# HIV Surveillance Data, Connecticut, 2021

We recommend that 2021 HIV surveillance data be interpreted with caution.

While new HIV diagnoses appears to have rebounded, HIV laboratory volume was still lower than normal during 2021 and cases may be under-reported.

People with HIV identified as "not-in-care" may be misclassified if they have utilized tele-health for care.

# COVID-19 Impact

The HIV Surveillance Program maintained laboratory and case reporting during 2021.

Laboratory reporting volume improved in 2021 but was still lower than expected.

In addition, the HIV Surveillance Program had 50% staff for the entire year, which impacted several services including data dissemination and responding to custom data requests.

# Notes

The source of HIV surveillance data included in today's presentation is the National HIV Surveillance System (eHARS) for data reported through December 2022.

Data selection is based on the most recent address received at the time the 2021 eHARS dataset was frozen for analysis (December 2022).

# Indicators (1)

2022 - 2026 PLAN INDICATOR	2019 BASELINE	2026 GOAL	2021 DATA
<b>PrEP-to-Need Ratio:</b> The number of people taking PrEP divided by the number of people newly diagnosed with HIV	12.0	36.0	8.5
<b>New Diagnoses:</b> Number of people newly diagnosed with HIV	220	174	
<b>Knowledge of HIV Status:</b> Percent of PLWH aware of their status	91%	93%	
<b>Late Testers:</b> Percent of people presenting with or diagnosed with AIDS within 3 months of their initial HIV diagnosis	29%	20%	
<b>Linkage to Care:</b> Percent of newly diagnosed who attended a routine HIV care visit within 1 month of diagnosis	87%	90%	
<b>Partner Services:</b> The number of newly diagnosed clients interviewed by DIS / Partner Services	143	8% increase*	
<b>Viral Load Suppression:</b> Percent of people with diagnosed HIV who are virally suppressed Percent of PLWH in care who are virally suppressed	74% 90%	87% 95%**	

\* Tentative Goal: QPM will revisit goal after Partner Services is able to present to the team on additional data.

\*\* Goal based on QPM decision for primary measure.

# Indicators (2)

2022 - 2026 PLAN INDICATOR	2019 BASELINE	2026 GOAL	2021 DATA
<b>Disparities in New Diagnoses:</b> Annual number of new HIV diagnoses among: MSM, Black men and women, and Latino men and women	15% decrease	25% decrease	
<b>Disparities in Viral Load Suppression:</b> Viral load suppression rates among: youth and young adults, injection drug users, MSM, Black men and women, and Latino men and women	65% to 78% depending on population	>85% for all populations	
<b>Syringe Services Program (SSP):</b> Number of SSP clients served Number of syringes distributed	4,428 1.2 million	9,000 2.4 million**	6,398 2.0 million
<b>Sexually Transmitted Infections (STIs):</b> Number of syphilis cases	210	204	322
<b>Hepatitis C:</b> Number of newly diagnosed chronic Hep C infections	1,309	1,178	715
<b>Substance Use:</b> Number of overdose deaths Total number of overdoses	1,528 (2021) 12,000 (approx.)	1,750 13,950**	1,528 12,000 (approx.)

\*\* Goal based on QPM decision for primary measure.

# 1. New HIV Diagnoses

Number of people newly diagnosed with HIV

2019 Baseline: 220

2026 Goal: 174

2021 Data: 232



## 2. Knowledge of HIV Status

Percent of people with HIV aware of their HIV status

2019 Baseline: 91%

2026 Goal: 93%

2021 Data: 91%





### 3. Late Testers

Percent of people diagnosed with AIDS within 3 months of initial HIV diagnosis

2019 Baseline: 29%

2026 Goal: 20%

2021 Data: 20%



## 4. Linkage to Care

Percent of people newly diagnosed with HIV who attended an HIV care visit within 30 days of diagnosis

2019 Baseline: 87%

2026 Goal: 90%

2021 Data: 88%



# 5. Partner Services

The number of newly diagnosed clients interviewed by DIS for partner services

2019 Baseline: 88 (73% of eligible)\*

2026 Goal: "8% increase"

2021 Data: 111 (100% of eligible)\*\* Percent Change: +37%

2022 Data: 107 (63% of eligible)\*\*\* Percent Change: -37%

\* Source: CT DPH PS18-1802 Year 2 (2019) End of Year (EOY) Report, Appendix A

\*\* Source: CT DPH PS18-1802 Year 4 (2021) End of Year (EOY) Report, Appendix A

\*\*\* Source: CT DPH PS18-1802 Year 5 (2022) End of Year (EOY) Report, Appendix A

## 6. Viral Load Suppression (1)

Percent of people with HIV who are virally suppressed

2019 Baseline: 74%

2026 Goal: 87%

2021 Data: 72%



## 6. Viral Load Suppression (2)

Percent of people with HIV with  $\geq 1$  care visit who are virally suppressed

2019 Baseline: 90%

2026 Goal: 95%

2021 Data: 90%



## 7. Disparities in New HIV Diagnoses (1)

Number of new HIV diagnoses among MSM

2019 Baseline: 119 (54%)

2026 Goal: "25% decrease"

2021 Data: 135 (58%)\*

\* Percent change: +7%



## 7. Disparities in New HIV Diagnoses (2)

Number of new HIV diagnoses among Black men

2019 Baseline: 76 (35%)

2026 Goal: "25% decrease"

2021 Data: 55 (24%)\*

\* Percent change: -31%



## 7. Disparities in New HIV Diagnoses (3)

Number of new HIV diagnoses among Black women

2019 Baseline: 23 (12%)

2026 Goal: "25% decrease"

2021 Data: 20 (9%)

\* Percent change: -25%





## 7. Disparities in New HIV Diagnoses (4)

Number of new HIV diagnoses among Latino men

2019 Baseline: 43 (20%)

2026 Goal: "25% decrease"

2021 Data: 55 (24%)\*

\* Percent change: +20%



## 7. Disparities in New HIV Diagnoses (5)

Number of new HIV diagnoses among Latina women

2019 Baseline: 8 (4%)

2026 Goal: "25% decrease"

2021 Data: 9 (4%)

\* Percent change: 0%



# 8. Disparities in Viral Load Suppression

SUBPOPULATION	2019 BASELINE	2026 GOAL	2021 DATA
People 13 - 24 years of age	65%	85%	68%
People who inject drugs	71%	85%	67%
MSM	78%	85%	77%
Black men	72%	85%	74%
Black women	75%	85%	72%
Latino men	77%	85%	73%
Latina women	73%	85%	71%

# What's going on here?

- 2021 data and outcomes were likely impacted by COVID-19.
- Lab reporting volume was still lower than usual in 2021, which would affect many of these indicators.
- Reduced lab reporting volume was likely due to remote tele-health visits or PWH postponing HIV care visits when active COVID waves were reported.
- Other thoughts?

# Questions, Contact

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