

**PUBLIC NOTICE
REQUEST FOR PROPOSALS FOR
HIV PREVENTION GRANT**

RFP# 2020-02

The Cuyahoga County Board of Health is now soliciting sealed proposals for the HIV Prevention Grant for Region 3 consisting of Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina counties for counseling, testing and referral services. Completed proposals must be submitted to the Cuyahoga County Board of Health, 5550 Venture Drive, Parma, Ohio 44130 no later than 10:30 A.M. local time on February 4, 2020.

A pre-proposal conference is scheduled for January, 21, at 9:00 A.M. at the Cuyahoga County Board of Health at the address set forth above. Attendance is strongly recommended but not mandatory.

This notice and proposal may be viewed at the following Board website: www.ccbh.net by clicking on the “Business” tab on the home page. Questions prior to the pre-proposal conference must be emailed to bidquestions@ccbh.net.

Judy V. Wirsching, CFO

Published in the Cleveland Plain Dealer on Monday, January 13, 2020.

I. PROPOSAL INFORMATION

A. Background Statement

The Cuyahoga County Board of Health (CCBH) has applied for funding from the Ohio Department of Health (ODH) for fiscal year 2020 (2/01/20 – 12/31/20) to implement the HIV prevention program for Region 3 which consists of Ashtabula, Cuyahoga, Geauga, Lake, Lorain, and Medina Counties. The prevention services will be provided to priority populations, which are determined by the HIV epidemiology, along with CDC guidelines. The priority populations include men who have sex with men (MSM), Black Non-Hispanic and Hispanic/Latino MSM, and Youth (ages 13-24). The epidemiology demonstrates the disparities that exist within Region 3.

The goals of the Ohio HIV regional projects are to: (1) increase the number of people who are aware of their HIV status, (2) increase awareness of prevention messaging and techniques, (3) increase access and linkage to care, (4) promote health equity, (5) increase community and provider knowledge of HIV-related treatment, prevention, epidemiology, and effective policies, (6) and reduce new HIV infections.

The applicants in a non-clinical setting are expected to maintaining a one percent (1%) HIV positivity rate, at a minimum, throughout the year.

The funding for this Request for Proposal is contingent upon CCBH being awarded the HIV Prevention grant for Region 3.

B. Proposal Format

The Board discourages overly lengthy and costly proposals. In order for the Board to evaluate proposals fairly and completely, bidders should follow the format set forth herein and provide all of the information requested.

Proposals that do not adhere to these formatting requirements may be considered non-responsive. Proposals should be submitted in a sealed envelope with the name of the bidder and the relevant RFP name and number on the front.

Responses must be submitted with one (1) original and five (5) copies in addition to one (1) electronic document of the proposal with all required information. All proposals submitted will become the property of the Board and will not be returned.

Proposals must remain open and valid for one hundred and eighty (180) days from the opening date, unless the time for awarding the contract is extended by mutual consent of the Board and the bidder.

C. Need Statement

The Cuyahoga County Board of Health is accepting proposals for an **11** month period beginning February 1, 2020 through December 31, 2020 with potential funding for 1 additional year to provide counseling, testing and referral services within Region 3 which consists of Ashtabula, Cuyahoga, Geauga, Lake, Lorain and Medina counties. The funding is contingent upon the Cuyahoga County Board of Health receiving funding from the Ohio Department of Health. The maximum amount available for all proposals for the eleven month period is \$600,000.00.

II. PROJECT SPECIFICATIONS

The following items apply to the overall implementation of the Region 3 HIV prevention program.

A. Procedures for grant administration:

Uniform administration of the Cuyahoga County Board of Health HIV Prevention grant funded by ODH grants is governed by the ODH Grants Administration Policies and Procedures (OGAPP) manual. This manual must be followed to ensure adherence to the rules, regulations and procedures for preparation of all sub-grantee applications. The OGAPP manual is available on the ODH website <http://www.odh.ohio.gov>.

B. Qualified Applicants:

The following criteria must be met for grant applications to be eligible for the 2020 HIV Prevention grant:

1. Applicant doesn't owe funds in excess of \$1,000 to SCPH or ODH.
2. Applicant isn't certified to the Attorney General's (AG's) office.

C. Freedom of Information Act:

The Freedom of Information Act (5 U.S.C.552) and the associated Public Information Regulations require the release of certain information regarding grants requested by any member of the public. The intended use of the information will not be a criterion for release.

Grant applications and grant-related reports are generally available for inspection and copying except that information considered being an unwarranted invasion of personal privacy will not be disclosed. For guidance regarding specific funding sources, refer to: 45 CFR Part 5 for funds from the U.S. Department of Health and Human Service.

D. Special Condition(s):

Responses to all special conditions must be submitted to SCPH HIV Prevention Program within 30 days of receipt of the NOA. The 30 day time period, in which the sub-grantee must respond to special conditions, will begin once the NOA is issued. Failure to submit satisfactory responses to the special conditions or a plan describing how those special conditions will be satisfied will result in the withholding of any payments until satisfied.

E. Unallowable Costs: Grant funds **may not** be used for the following:

1. To advance political or religious points of view or for fund raising or lobbying;
2. To disseminate factually incorrect or deceitful information;
3. Consulting fees for salaried program personnel to perform activities related to grant objectives;
4. Bad debts of any kind;
5. Contributions to a contingency fund;
6. Entertainment;
7. Fines and penalties;
8. Membership fees -- unless related to the program and approved by ODH;
9. Interest or other financial payments (including but not limited to bank fees);
10. Contributions made by program personnel;
11. Costs to rent equipment or space owned by the funded agency;
12. Inpatient services;
13. The purchase or improvement of land; the purchase, construction, or permanent improvement of any building;
14. Satisfying any requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds;
15. Travel and meals over the current state rates (see OBM website: <http://obm.ohio.gov/MiscPages/Memos/default.aspx> for the most recent Mileage Reimbursement memo.)
16. Costs related to out-of-state travel, unless otherwise approved by ODH, and described in the budget narrative;
17. Training longer than one week in duration, unless otherwise approved by ODH;
18. Contracts for compensation with advisory board members;
19. Grant-related equipment costs greater than \$1,000, unless justified in the budget narrative and approved by ODH;
20. Payments to any person for influencing or attempting to influence members of Congress or the Ohio General Assembly in connection with awarding of grants;
21. Promotional Items;
22. Office Furniture (including but not limited to desks, chairs, file cabinets) unless otherwise stated;
23. Syringes for Syringe Service Programs (PS18-1802).

Subrecipients will not receive payment from CCBH with ODH grant funds used for prohibited purposes. CCBH has the right to recover funds paid to Subrecipients for purposes later discovered to be prohibited.

SECTION I – INTRODUCTION (5 points)

A. Cover Page

This must include the RFP title, RFP number, complete bidder name and mailing address as shown in Appendix 6.

B. Cover Letter

Proposal Cover Letters should include a brief overview of the services being proposed and must include the telephone number of the person the Board should contact regarding the proposal.

Proposals must confirm that the bidder will comply with all the provisions of this RFP. Any exceptions to the Board contract general terms and conditions should be discussed here.

The bidder must provide a brief description of the organization including history; number of years your organization has been in business; type of services you provide; legal status of bidder organization, ie. corporation, partnership, sole proprietor; Federal Tax ID and DUNS number. The bidder must submit a copy of its most recent audited or compiled financial statements, with the name, address and telephone number of a contact in the company's principal financing or banking organization. The financial statements must have been completed by a Certified Public Accountant.

An agency representative authorized to make contractual obligations must sign the cover letter.

C. Table of Contents

Provide sufficient detail so reviewers can locate all the important elements of your document readily. Identify each section of your response as outlined in the proposal package.

D. Executive Summary

Provide a high level overview of your services, the distinguishing characteristics of your proposal and the ability of your agency to provide accompanying services related to HIV counseling testing and referral services.

SECTION II - PROJECT NARRATIVE (20 points)

A. Description of Applicant/Experience/Qualifications:

Briefly discuss your agency's eligibility to apply. Summarize the agency's structure as it relates to this program and how it will manage the program.

Describe the adequacy of staff, equipment, research tools and administrative resources; quality and appropriateness of technical or support staff; and past performance of the organization relevant to this type of project.

Does the agency have demonstrated experience in completing similar projects on time? Do the individuals assigned to the project have experience on similar projects? How extensive is the applicable education and experience of the assigned personnel? Describe how staff assigned to the project will stay up to date on current HIV prevention information.

Describe how services will increase knowledge of HIV status and compliment the community's continuum of care. Include strategies.

Describe the capacity of your organization, its personnel or contractors to communicate effectively and convey information in a timely manner that is easily understood by diverse audiences. This includes persons of limited English proficiency, those who are not literate, have low literacy skills, and individuals with disabilities.

Note any personnel or equipment deficiencies that will need to be addressed in order to carry out this grant. Describe plans for hiring and training as necessary. Delineate all personnel who will be directly involved in program activities. Include the relationship between program staff members, staff members of the applicant agency, and other partners and agencies that will be working on this program. Include position descriptions for these staff.

B. Problem/Need

Identify and describe the local health status concern(s) that will be addressed by the program.

Based on the 2018 Epidemiology data, the priority populations for HIV Region 3 include men who have sex with men (MSM), Black Non-Hispanic and Hispanic/Latino MSM, and youth (13-24). Describe the priority populations that the agency has selected to focus on for programming, and the steps taken to identify and address the needs of these populations. Priority populations may differ in Eastern and Western counties of Region 3 **Please refer to epidemiology data from Appendix 9 to support your selection of priority populations.**

SECTION III - METHODOLOGY (35 points)

A. Methodology Description

Describe how your agency will carry out deliverables as identified in following sections, please include additional activities to support success of strategy implementation. Please note programs implemented with a peer led staff reflective of the local epidemiological profile will receive eight points automatically for this section. Provide details outlining how peers are be utilized for programming purposes.

All sections must be addressed. The deliverables and activities listed must be included at a minimum. Deliverables must be written as SMART objectives.

Section 1: Counseling, Testing and Referral (CTR) services in Priority Populations

Each applicant agency is responsible for overseeing CTR services within their agency and testing sites. CTR services must be consistent with the most current ODH HIV Counseling, Testing and

Referral (CTR) protocol.

Agencies are responsible for ensuring that all HIV testers providing CTR are able to demonstrate that they have been trained in client-centered counseling (CCC). ODH provides this training numerous times a year around the state. CTR sites may be provided with ODH purchased HIV rapid test kits and/or receive funding from the applicant to support HIV testing.

Agencies must demonstrate support of CTR in venues that have the potential to reach persons with undiagnosed HIV infections based on epidemiological data.

CTR requirements as per ODH:

Healthcare facilities are expected to yield a positivity rate of 0.1 percent, while non-healthcare settings are expected to have a positivity rate of 1 percent. Where possible, CTR sites are expected to facilitate voluntary testing for other STDs (e.g., syphilis, gonorrhea (GC), Chlamydia (CT) infection), adult viral hepatitis (AVH) and tuberculosis (TB). If testing for other STDs within the CTR site is not possible, the CTR site should have a procedure for active referrals.

Please answer or provide the required documentation to address the following:

Describe how the applicant agency will ensure that HIV CTR are provided in settings most likely to reach persons who are likely to be infected, but unaware of their status. Include strategies to assure positivity rates are in-line with expectations, and strategies used to counsel individuals who do not meet risk factors recommended for HIV testing.

Describe how the applicant agency will ensure that CTR services are delivered in an appropriate, competent and culturally sensitive manner.

Describe the quality assurance procedures conducted on CTR data collection forms before they are submitted to ODH. Confirm that HIV test kit tracking reports will be submitted to CCBH by the fifth day of each month.

Describe how the applicant agency will encourage CTR sites to offer STD, AVH and TB screening services and referrals for treatment.

Complete **Appendix 3**. List the locations where the applicant agency will provide CTR services in 2020. Include the agency ID and site number ID for each location (if known). Indicate the number of estimated tests the agency will conduct at each site in 2020 **for each target population(s)**.

Provide documentation of HIV Client Center Counseling testing numbers assigned to each staff member that will be doing HIV testing at applicant's CTR locations. Include as an **Attachment** Provide documentation of CLIA Waiver for applicant agency. Include as an **Attachment**.

Section 2: Social Marketing and Community Engagement

CDC encourages agencies to partner and coordinate with entities such as CBOs, AIDS service organizations, community health centers, FQHCs, LGBT health centers, STD clinics, hospitals, bars, clubs, etc. for condom distribution and health promotion messaging to reach priority populations. CCBH will have available a range of condoms and other risk reduction tools to be distributed throughout the HIV prevention region as well as social marketing and community engagement resources. Applicant should describe how they will distribute condoms, educational materials (including information on PrEP), and state resources (e.g. ODH provided posters, brochures) within the region.

Please answer the following questions:

Describe how the applicant agency will target condom distribution, and record the condom distribution sites.

Describe how the applicant agency will incorporate STD prevention messaging into HIV prevention messaging whenever appropriate.

Describe in detail how your agency will build partnerships with priority populations within the region in order to carry out condom distribution, social marketing, and community engagement activities.

Section 3: Prevention with Positives

This includes the provision of services to support those newly diagnosed with or living with HIV to reduce their risks and remain in care, adherent to their medication, and achieve viral suppression.

Please answer the following questions:

Describe your current partnerships with Ryan White Part A Early Intervention Service (EIS) providers

Describe your current partnerships with HIV care providers.

Describe how the applicant agency will ensure condoms are distributed to PLWHA.

SECTION IV - PROJECT MANAGEMENT (20 points)

Proposed project management narratives should include:

Describe your project management approach including:

- The method used in managing the project

- The project management organizational structure including reporting levels and lines of authority.

Describe your methodology for ensuring timeliness of program and fiscal reporting. Provide potential risks/problems and solutions to avoid or minimize them.

Describe methodology for appropriate record keeping, reporting, invoicing and well maintained data.

Describe your prior experience providing HIV prevention services including:

- a. A history of successful priority based HIV testing strategies (please include most recent annual positivity rate).
- b. Content knowledge of issues related to health disparities in priority populations and how to effectively engage those populations in HIV education and risk reduction.

SECTION V -BUDGET (15 Points)

The model for reimbursement is cost reimbursement. Agencies should ensure costs are reasonable. The total amount available for all Region 3 CTR sites is **\$600,000.00** for 11 months. Submission of the application signifies authorization by an agency official and constitutes electronic acknowledgment and acceptance of GAPP rules and regulations in lieu of an executed Signature Page document. See Appendix 2 for language.

Prior to completion of the budget section, please review page 5 of the Solicitation for unallowable costs.

Match or Applicant Share is not required by this program. Do not include Match or Applicant Share in the budget and/or the Applicant Share column of the Budget Summary. Only the narrative may be used to identify additional funding information from other resources.

- 1. Budget Narrative and Justification Pages:** Provide a detailed budget justification narrative that describes how the categorical costs are derived. Discuss the necessity, reasonableness, and how the costs are allocated for personnel for the proposed costs. Describe the specific functions of the personnel, consultants and collaborators. Explain and justify equipment, travel, (including any plans for out-of-state travel), supplies and training costs.
- 2. Personnel, Other Direct Costs, Equipment and Contracts:** Submit a budget with these sections and form(s) completed as necessary to support costs for the period February 1, 2020 to December 31, 2020. A sample Budget Narrative is included in Appendix 2. Please ensure the category order is the same as illustrated in the sample while developing your proposal.

Funds may be used to support personnel, their training, travel (see OBM website) <http://obm.ohio.gov/TravelRule/default.aspx> and supplies directly related to planning, organizing and conducting the initiative/program/activity described in this announcement.

In 2020, Sub-grantees will be responsible for budgeting for supplies required to carry out HIV Testing activities per the CTR Dual Rapid HIV Testing protocol, such as sharps containers, sharps disposal, bandaids, gloves, alcohol pads, etc. CCBH will coordinate with potential sub-recipients if this changes before the grant year starts. This will be discussed during budget negotiations. The applicant agency may order ODH purchased test kits for their CTR sites by contacting the HIV Prevention Supervisor at CCBH.

The applicant shall itemize all equipment (**minimum \$1,000, unit cost value**) to be purchased with grant funds in the Equipment Section.

SECTION VI – ADDITIONAL DOCUMENTATION (5 Points)

A. Letters of Support

- a. The agency must submit 3 letters of support, including names and phone numbers, for similar projects your firm has completed.

B. Conflict of Interest

- a. Each vendor shall include a statement indicating whether or not the organization or any of the individuals working on the contract has a possible conflict of interest and, if so, the nature of that conflict.
- b. The Board reserves the right to cancel the award if any interest disclosed from any source could either give the appearance of a conflict or cause speculation as to the objectivity of the program to be developed by the vendor.
- c. The Board's determination regarding any questions of conflict of interest shall be final.

SECTION VII - REQUIRED FORMS

The vendor must complete and submit the following forms:

- Non-Collusion Affidavit (requires notarization).
- Certification of Compliance with Section 3517.13 of the Ohio Revised Code.

Ohio Revised Code Section 3517.131(3) and J(3) requires that no agency or department of this state or any political subdivision shall enter into any contract for the purchase of goods costing more than five hundred dollars or services costing more than five hundred dollars with a corporation, individual, partnership or other unincorporated business, association, including, without limitation, a professional association organized under Chapter 1785 of the Revised Code,

estate, or trust unless the contract includes a certification that the individuals named in Revised Code Sections 3517.13(1)(1) and (J)(1) are in compliance with the aforementioned provisions. Any questions you may have as to whether or not you are in compliance should be directed to your legal counsel.

Blank copies of the above are included in Appendix 4 and 5 of this RFP.

Original signatures required as indicated on the forms. Copies of the proposal documents will be acceptable only if they contain original signatures and required notarization on all documents.

SECTION VIII - ADMINISTRATIVE INFORMATION

A. RFP Contact

All vendor communications concerning the RFP must be directed to the contact person listed below. Any oral communication will be considered unofficial and non-binding on the agency. Vendors should only rely on written statements issued by the Board.

Name Judy Wirsching, CFO

Department Administration

Address 5550 Venture Drive, Parma, OH 44130

Phone 216.201.2001 x 1103

Fax 216.676.1311

Email JWirsching@ccbh.net

B. Location of work

Work to be performed, completed and managed at vendor's place of business and/or service area.

C. Pre-proposal conference

The pre-proposal conference for all participating vendors scheduled as indicated below.

Date: January 21, 2020

Time: 9:00 A.M.

Location: Cuyahoga County Board of Health, 5550 Venture Dr., Parma, OH 44130

The purpose of the conference is to discuss the work to be performed with prospective vendors and allow them the opportunity to ask questions concerning the RFP. It is encouraged that interested vendors attend. Questions prior to the pre-proposal conference must be emailed to bidquestions@ccbh.net. No questions will be accepted or answered after the pre-proposal conference. Questions and answers will be posted and may be viewed on the Board's website: www.ccbh.net by clicking on the "Business" tab on the home page.

Vendors with a disability needing accommodation should Judy V. Wirsching at (216) 201-2001 ext. 1103 prior to the date set for the pre-proposal conference so that reasonable accommodations can be made.

D. RFP Addenda

The Board reserves the right to issue addenda to the RFP at any time. The Board also reserves the right to cancel or reissue the RFP. If an addendum is issued less than seventy-two hours prior to the proposal due date, the closing date will be modified accordingly.

E. Proposal Response Date and Location

The vendor's proposal, in its entirety, must be received at the location, by the date and time specified on the cover page of this RFP. Proposals arriving after the deadline will be returned unopened, to the vendor. The official closing time will be determined by the time clock located in Board Administrative offices. All proposals and accompanying documents will become the property of the Board and will not be returned. Proposals should be submitted in a sealed envelope with the name of the vendor and the relevant RFP name and number on the front.

Vendors assume the risk of the method of dispatch chosen. The Board assumes no responsibility for delays caused by any delivery service. Postmarking by the due date will not substitute for actual proposal receipt. Late proposals will not be accepted nor will additional time be granted to any vendor. Proposals may not be delivered by facsimile transmission or other telecommunication or electronic means.

Hand-delivered proposals may be delivered ONLY between the hours of 8:30 a.m. and 4:30 p.m., Mondays through Fridays, excluding holidays observed by the Board.

F. Proposal Opening

Proposals will be publicly opened at the Administration Office, Cuyahoga County Board of Health, 5550 Venture Dr., Parma, OH 44130. At this time, all proposals will be opened, the bidder name and dollar amount read from the proposal cover page, and logged. The submittal of a proposal will be considered by the Board as constituting an offer to perform the required services at the stated costs.

G. Required Review

Vendors should carefully review this RFP for defects and questionable or objectionable matter. Comments concerning defects and objectionable material should be made in writing and received by the RFP contact at least ten days before proposal opening. This will allow for issuance of any necessary addenda. Protests based on any omission or error, or on the content of the solicitation, will be disallowed if these faults have not been brought to the attention of the RFP contact before the time set for opening.

H. Multiple Proposals

The submission of multiple proposals for the same service will be considered noncompliant and those proposals will be disqualified. We are relying on the vendor as expert, to identify in its proposal the approach which the bidder believes will be the most effective to produce the required services on time and within budget. A potential bidder submitting a proposal for direct services cannot submit a proposal for administrative and quality management support for the grantee.

I. Proposal Rejection

The Board reserves the right to reject any or all proposals at any time without penalty. Bidders may withdraw a proposal that has been submitted at any time up to the proposal closing date and time, by submitting a written request to the RFP contact.

J. Response Property of the Board

All materials submitted in response to this request become the property of the Board. Selection or rejection of a response does not affect this right.

K. No Obligation to Buy

The Board reserves the right to refrain from contracting with any bidder. The release of this RFP does not compel the Board to purchase. The Board is not bound to accept the lowest priced proposal or any of the proposals submitted.

L. Cost of Preparing Proposals

The Board is not liable for any costs incurred by bidders in the preparation and presentation of proposals submitted in response to this RFP.

M. Acceptance of Terms

All the terms and conditions of this RFP are deemed to be accepted by the bidder and incorporated in its proposal except those conditions and provisions that are expressly excluded by the vendor in the proposal.

N. Disclosure of Proposal Contents

All documents submitted to the Board as part of the proposal become public information after the contract is awarded, and available for review and inspection by anyone requesting to do so. The Board does not encourage the submission of confidential/proprietary information in response to this proposal. However, written requests for confidentiality can be submitted to the RFP contact. Neither a proposal in its entirety, nor proposal price information will be considered confidential or proprietary. Under Ohio Revised Code Section 149.43, the BOARD will make a determination of application for disclosure on an ad hoc basis.

O. Equal Opportunity

Prospective bidders must comply with the applicable contract compliance procedures for equal employment opportunity as stipulated by the Board. It is the policy of the Board, to assure equal employment opportunity. Discrimination against any person in the recruitment, training, examination, appointment, promotion, retention, discipline or any other aspect of personnel administration because of race, religion, national origin, sex, ancestry, age, disability, sexual orientation, or veteran status is prohibited.

Words of the masculine gender used in proposals shall be deemed and construed to include correlative words of the feminine gender.

P. Evaluation Process

All proposals will be reviewed to determine if they are responsive. They will then be evaluated by an Evaluation team. The team will evaluate and numerically score each proposal in accordance with the following evaluation criteria:

- Introduction (5 points)
- Project Narrative (20 points)
- Methodology (35 points)
- Project Management (20 points)
- Budget (15 points)
- Additional Documents (5 Points)

The evaluation process is designed to award the contract to the bidder with the best combination of attributes based upon the evaluation criteria. Due to the fixed cost for this project, lowest cost is not considered.

Further details on how the proposal will be scored can be found in Appendix 7.

Q. Contract Negotiations

The option of whether or not to initiate contract negotiations rests solely with the Board. If the Board elects to initiate contract negotiations, these negotiations cannot involve changes in the

Board's requirements or the bidder's proposal which would, by their nature, affect the basis of the source selection and the competition previously conducted. The terms of the proposed contract will be negotiated based upon the merit of the application, availability of funding, and conditions of award. Failure of a selected bidder to satisfactorily negotiate a contract within a reasonable time may result in the bidder forfeiting its award.

The bidder is responsible for their travel and per diem expenses during contract negotiations.

R. Failure to Negotiate

If any contract cannot be negotiated within fifteen (15) days of notification to the designated bidder, the Board may terminate negotiations with the bidder and negotiate a contract with the next highest ranked bidder.

S. Recommendation of Award

Once the Board evaluation team has made its selection, a Notice of Recommendation of Award letter will be issued to the recommended bidder(s), advising of the expected award date.

T. Notice of Intent to Award

Prior to approval of the award by the Board, the Administration will issue a written Notice of Intent to Award and send copies to all unsuccessful bidders. The scores and placement of bidders will not be part of the notice. A tabulation of all bidders' names and addresses submitting proposals will be available upon request from the RFP contact person.

U. Debriefing

Bidders who submitted an unsuccessful proposal may request a meeting for debriefing and discussion of their proposals after receiving a Notice of Intent to Award letter. The request must be in writing addressed to the RFP contact. The debriefing is not to be seen as an opportunity to challenge the decision, nor will it include any comparisons of the bidder's unsuccessful proposal with any other bidder's proposals. The Board will attempt to respond to questions and concerns in this debriefing.

V. Protests

A bidder may protest the recommendation of award of a contract by filing in writing to the RFP contact person, as outlined in the Notice of Intent to Award letter. The protest letter shall include the following information:

1. Name, address and telephone number of the protester;
2. The signature of the protester;

3. Identification of the contract at issue;
4. A detailed statement of the legal and factual grounds of the protest;
5. The form of relief requested.

W. Contracting Requirements

The successful bidder shall, upon notification of award, be required to enter into a contract with the Board and must comply with the contract terms and conditions defined herein. If the bidder is unwilling to agree to a proposed clause or term, then your cover letter must reference an appendix which identifies these clauses in dispute and should:

- a. Suggest a specific alternative term, clause or approach;
- b. Provide an explanation of your reasons.

X. Contract Processing

The Board's Administrative Counsel shall prepare the contract required by this RFP specification. This contract shall be fully responsive to the requirements defined in these RFP specifications.

Y. Proposal as Part of the Contract

Part or the entire successful proposal may be incorporated into the contract.

Z. Commencement of Contract Performance

In order to protect the interests of the Board, a contract must be approved by the Board at a regularly scheduled Board meeting after which it must be executed by the Health Commissioner and approved by Administrative Counsel before the goods or services as set forth in this RFP specification can be provided.

SECTION IX - CONTRACT INFORMATION

A. Terms and Conditions

The following terms and conditions shall apply to the contract between the contractor and the Board:

1. The contract shall be subject to interpretation under the laws of the State of Ohio, and subject to the review of the Board's Administrative Counsel as to legal form and correctness.

2. The successful contractor shall agree to indemnify and save the Board harmless from suits or actions of every nature and description brought against it, for or on account of any injuries or damages received or sustained by a party or parties or from any act of the contractor, his servants or agents.

3. The Board shall not assume responsibility for the payment of any personal property taxes for any materials not owned by the Board, nor shall the Board pay any insurance premiums for any coverage of any property not owned by the Board. No conditions shall alter this statement.

4. The Board is a tax-exempt No. 29 political subdivision of the State of Ohio (Federal Tax ID No. 34-6000817). Necessary tax exemption blanks will be furnished to the contractor when the contract is signed.

5. Acceptance of performance is a condition of the contract. It shall be understood and agreed that an agent for the Board shall determine finally the satisfactory quality of the services and/or materials furnished under the contract. Failure to meet performance requirements is a reason for termination of the contract, and the contractor shall be liable to the Board for any excess cost and/or expenses incurred by the Board thereafter.

6. In the event that the contract is terminated by the Board, advance written notice shall be given to the contractor as provided in contract. The contractor shall provide all services and/or materials required by the contract and the specifications to the date of termination. Under no circumstances shall the Board be responsible for any type of penalty payment upon the cancellation of the contract. The contractor, however, shall be paid for all services and/or materials provided to the date of termination.

7. Anti-discrimination: The contractor agrees that in the employment of labor, skilled or unskilled, under this contract, there shall be no discrimination exercised against any person because of race, religion, national origin, sex, ancestry, age, disability, sexual orientation, or veteran status, and that violation thereof shall be deemed a material breach of said contract.

8. Social Security Act: The contractor shall be and remain an independent contractor with respect to all services performed hereunder and agrees to and does hereby accept full and exclusive liability for payment of any and all contributions or taxes for social security, unemployment insurance, or old age retirement benefits, pensions, or annuities now or hereafter imposed under any Local, State or Federal Law which are measured by the wages, salaries, or other remuneration paid to persons employed by the contractor for work performed under the terms of this contract and further agrees to obey all lawful rules and regulations and to meet all lawful requirements which are now or hereafter may be issued or promulgated under said respective laws by and duly authorized State or Federal officials; and said contractor also agrees to indemnify and save harmless the Board from such contributions or taxes or liability.

9. Labor and Material: The contractor shall well, truly and promptly pay or satisfy the just and equitable claims of all persons who have performed labor or furnished materials or equipment for

said contractor in the execution of this contract, and all bills, costs or claims of whatever kind which might in law or equity become a lien upon said work.

10. Assignment: The contractor shall not assign, transfer, convey or otherwise dispose of this contract, or his right to execute it, or his right, title or interest in or to it or any part thereof, or assign, by power of attorney or otherwise, any of the monies due or to become due under this contract without approval of the Board.

11. Ownership of Contract Products: All products produced in response to the contract will be the sole property of the Board.

12. If applicable, the successful Respondent will comply with the provisions of the Ohio Revised Code (4115.03 through 4115.16) requiring the payment of prevailing wage. Information on prevailing wage may be obtained from the Prevailing Wage Coordinator of Cuyahoga County, 2079 East 9th Street, Cleveland, Ohio 44113, (216) 443-5530.

13. Respondent's Warranty against an Unresolved Finding for Recovery: Ohio Revised Code Section 9.24 prohibits the award of a contract to any Respondent against whom the Auditor of State has issued a finding for recovery, if the finding for recovery is "unresolved" at the time of the award. By submitting a bid, the bidder warrants that it is not now, and will not become subject to an "unresolved" finding for recovery under Ohio Revised Code Section 9.24, prior to the award of any contract arising out of this RFP, without notifying the Board of such finding.

14. Suspension and Debarments: The Board will not award contracts for services funded in whole or part with Federal funds, to an entity who has been suspended or debarred from doing business or who appears on the Federal Excluded Parties Listing System at www.sam.gov/ .

15. Criminal Background Checks (If applicable): Prior to entering into a contract with the Board the successful Respondent shall conduct background checks on all applicants for employment in direct service positions in accordance with applicable requirements so as to not knowingly employ staff who have been convicted or plead guilty to any of the crimes specified in ORC 3319.39(B) or other section of the ORC applicable to the Agency. Failure to conduct such background checks may result in termination of this contract.

16. Disbursement of Funds: The Board shall make payments to the contractor on a reimbursement basis based on actual, reasonable and necessary costs in the contractor's Board-approved budget. The contractor shall submit invoices supported by such documentation as requested by the Board. The contractor may be required to provide the Board with copies of time sheets, receipts or contracts as validation of expenditures when submitting requests for payment.

17. Confidential Information: During the term of this contract, confidential information shall be held by the contractor in the strictest confidence and shall not, without the prior written consent of the Board, be disclosed to any person other than in connection with contractor's assigned projects and activities hereunder. All of the documents and information transmitted and

communicated to the contractor shall be considered as sensitive material and shall be held in the strictest confidence by the contractor. Upon termination of contractor's engagement or at any time at the request of Board, or its designees, the contractor shall promptly return or destroy all confidential information in the possession or under the control of contractor and shall not retain any copies or other reproductions or extracts thereof. Nothing contained herein shall be construed as granting or conferring any rights by license or otherwise in any confidential information.

18. Books and Records: Funded agencies will be expected to keep records of their activities related to the RW Act funded projects and services to permit the Board, the federal funding source, or their agents access to those records, including fiscal, medical and client records, where appropriate and with respect for client rights to privacy and confidentiality.

19. Payment: Payment for contracted services will be made on a line-item reimbursement and performance basis based on monthly invoices and compliance with reporting requirements. This is a cost reimbursement grant.

20. Projections and Revisions: Funded agencies will be held accountable for meeting their programmatic projections or, when fitting, for revising projections with the Board. Failure to make progress as projected or to revise projections in conjunction with the Board staff will jeopardize the funded agency's current and/or future RW funding. Corrective action may include contract amendment or termination of contract.

21. Amendments: Contracts may need to be amended from time to time throughout the funding cycle based on program performance, and other contracted requirements.

22. Service Funding: All funding must be used exclusively for the allowable costs associated with a Part A service. In addition, agencies are prohibited from receiving or using any additional funding for any costs directly associated with the same services funded by any Part A contract.

23. Change in Services: If awarded a contract, providers will be reimbursed for defined services delivered to eligible consumers as outlined in the service contract. Any change of staffing, service location, or service protocols is not permitted without the written consent of the Board. Any such change in service delivery is not eligible for reimbursement and may result in termination of the service contract.

24. Reporting: All funded providers and programs will be required to collect and report data reports to the grantee. This report may include program, quality, and fiscal data. The format in which these reports will be submitted will be determined by the grantee. Completion and submission of these reports must be in compliance with the guidance of the reports.

B. Required Contract Documents

In addition to the contract agreement furnished by the Board, the successful contractor shall provide the following documents within fourteen (14) calendar days of the RFP award date. Failure to provide these documents within this time frame may result in a rescission of the award.

1. Signature Authorization
2. Worker's Compensation Certificate (if required)
3. Certificates of Insurance (if required)
4. Letter of Indemnification in Lieu of Worker's Compensation Certificate and/or Certificate of Insurance
5. IRS Form W-9: Request for Taxpayer ID and Certification
6. Certification of Personal Property Tax
7. Suspension and Debarment
8. Warranty against Unresolved Finding for Recovery

These documents are described in the following paragraphs.

C. Signature Authorization

The contractor shall provide one of the following signature authorizations:

- a. For a corporation, including but not limited to non-profit organizations, a notarized certificate of power of attorney authorizing the individual's signature to bind the entity or a notarized certificate of corporate resolution authorizing the signature of the document.
- b. For the sole owner, a notarized statement indicating that the individual is the sole owner and is authorized to sign for and bind the company.
- c. For a partnership, a certificate of partnership agreement showing the names and address of all partners and authorizing the signatures to bind the partnership.

D. Worker's Compensation Certificate

A Worker's Compensation Certificate is required from corporations and partnerships with employees. Sole proprietors and individual contractors are not required to submit this document.

The contractor shall provide a Certificate of Premium Payment for Ohio State Worker's Compensation Insurance, or equivalent Worker's Compensation Insurance or letter of

indemnification in lieu thereof. This document shall be current for the entire period of the contract.

E. Certificate of Insurance

During the full term of the contractual agreement, the contractor shall have in effect and maintain such insurance as defined herein. Where applicable, to be determined by the Board's Administrative Counsel, the applicable insurance shall name the Board and its employees as a co-insured or additional insured.

This insurance shall protect the contractor, the Board and its employees and any subcontractor performing work covered by the contractual agreement against: 1) general auto liability claims; 2) professional liability claims; 3) personal injury claims; 4) accidental death claims; 5) property damage claims; 6) economic loss claims; 7) general liability claims; and such other types of claims including but not limited to D&O, employee dishonesty, workers compensation claims which may arise from operations under the contractual agreement whether such operations be by the contractor or by any subcontractor or by anyone directly or indirectly employed by either of them.

An exact copy of such insurance policy or policies and any declarations pages shall be made available to the contracting authority for review at or before the time of execution of the contract. Such insurance shall include coverages for general liability, professional liability (where deemed necessary), workers compensation, D&O coverage and employee dishonesty (if deemed applicable) in such reasonable and adequate amounts as shall be determined by the Administrative Counsel at the time of negotiation of the contract.

F. Letter of Indemnification in Lieu of Worker's Compensation Certificate and/or Certificate of Insurance (if either document is required above)

If the contractor cannot provide a workers compensation certificate and/or certificate of insurance as requested, the contractor must, at the time of submission of the RFP, substitute a letter of indemnification for a worker's compensation certificate and/or certificate of insurance.

Only in those circumstances where the contractor verifies being self-insured by means of documentation will the Board consider the substitution of a letter of indemnification for a worker's compensation certificate and/or certificate of insurance. Such documentation, together with the letter of indemnification, must be submitted with the RFP proposal. Such a request will not be considered after the contract has been awarded.

G. Performance bond

If applicable, a Performance Bond or certified check, made payable to the Board, in a sum equal to 100% of the total contractual award shall be provided by the contractor should the total amount of the contractual award be in excess of \$25,000.

Such bond or check shall be conditional on the faithful performance of the work in accordance with the specifications, and shall remain in the possession of the Board for the term of the contract and material warranties, whichever is concluded last. Such bond or check shall also indemnify the Board, Ohio, against such damages as may be suffered by failure to perform such contract according to the provisions thereof and in accordance with the specifications. If a bond is submitted, it shall be executed by a surety company authorized to do business in the State of Ohio. The bond shall be notarized with the corporate seal and the bonding company seal. Accompanying the bond shall be:

A. A certified power of attorney for the agent to sign the bond.

B. A certificate of compliance for the bonding company for the State of Ohio, Department of Insurance.

If the contractor fails to satisfactorily perform the contract, the bonding company which provided the performance bond will be required to obtain timely performance of the contract.

H. Liquidated Damages

If applicable, liquidated damages shall be assessed in the amount of \$800.00 per calendar day for each and every day that the Contractor fails to meet the agreed upon deadline requirements for deliverables under the negotiated contract.

I. Letter of Credit in Lieu of Performance Bond/Certified Check

If a performance bond is required, the following will be in effect:

If the contractor cannot provide a performance bond or a certified check in the amount requested, the contractor must, at the time of entering into a contract, substitute a letter of credit for a performance bond or certified check.

Only in those circumstances where the contractor verifies by documentation from insurance and/or bonding companies that a performance bond is not available because of the new, unusual or unique nature of the product or the service being purchased will the County consider the substitution of a letter of credit for the performance bond or certified check requirement. Such documentation, together with the letter of credit in the amount requested for the performance bond, must be submitted during the writing of the contract with the successful contractor.

J. IRS Form W-9: Request for Taxpayer Identification Number and Certification

An Internal Revenue Service Form W-9 (Request for Taxpayer Identification Number and Certification) is required to be completed by the contractor, prior to the execution of the contract with the Board.

K. Certification of Personal Property Tax

A Certificate of Compliance with Section 5719.042 of the Ohio Revised Code, which requires a certification of delinquent personal property tax by the contractor prior to the execution of the contract of a political subdivision, must be completed.

L. Suspension and Debarment

The Board will not award a contract for services funded in whole or part with Federal funds, to an entity who has been suspended or debarred from doing business or who appears on the Federal Excluded Parties Listing System at www.sam.gov/ .

M. Warranty against Unresolved Finding for Recovery

Ohio Revised Code Section 9.24 prohibits the award of a contract to any Respondent against whom the Auditor of State has issued a finding for recovery, if the finding for recovery is “unresolved” at the time of the award. By submitting a bid, the bidder warrants that it is not now, and will not become subject to an “unresolved” finding for recovery under Ohio Revised Code Section 9.24, prior to the award of any contract arising out of this RFP, without notifying the Board of such finding.

APPENDIX 1

SCOPE OF SERVICES

Scope of Work

Designate a Sub-recipient lead that will be responsible for all day to day interactions with CCBH. This team member is responsible for coordinating all communication within the contracted agency.

A. Counseling Testing and Referral Programming

The goals of the Ohio HIV regional projects are to: (1) increase the number of people who are aware of their HIV status, (2) increase awareness of prevention messaging and techniques, (3) increase access and linkage to care, (4) promote health equity, (5) increase community and provider knowledge of HIV-related treatment, prevention, epidemiology, and effective policies, (6) and reduce new HIV infections.

The applicants in a non-clinical setting are expected to maintaining a one percent (1%) HIV positivity rate, at a minimum, throughout the year.

B. Meetings

- 1.** Participate in monthly TA calls or in person meetings with CCBH
- 2.** Attend Regional Prevention Planning meetings
- 3.** Attend required program or fiscal meetings established by CCBH
- 4.** Attend required trainings conducted by CCBH

C. Site Visit Monitoring

All CTR sites will receive at least one site visit per year from CCBH. This may increase during the initial funding phase if required. There will be a formal report sent back to each sub-recipient with identified review points and corrective action steps if required.

D. Quality Assurance

Agency HIV testing coordinators are responsible for the submission of monthly test kit tracking forms and demographic information to CCBH. CTR sites are responsible for sending ODH client level data collection forms monthly directly to ODH in accordance with the established reporting dates. Each agency HIV testing coordinator is responsible for ensuring that these forms have undergone a thorough quality assurance process.

E. Reporting

Sub-Recipients are expected to submit required program and fiscal reports according to pre-

established dates. The reports should be reviewed for quality assurance before submission.

Note: Failure to assure quality of reporting such as submitting incomplete and/or late program or expenditure reports will jeopardize the receipt of future agency payments.

- 1. Program Reports:** Sub-grantee’s Program Reports must be completed and submitted via email as required by CCBH HIV Prevention Program by the dates listed below. **Program Reports that do not include required attachments will not be approved.** All program report attachments must clearly identify the authorized program name.

Submission of Sub-grantee Program Reports via email indicates acceptance of the requirements of CCBH Fiscal Office and ODH GAPP.

Due Date	Report	Submitted Via
60 days after NOA	New, non-ODH, Program brochures and educational materials used in program will be submitted for review to CCBH program supervisor	Email or mail
Seventh day of the following month	All CTR data collection forms (“opscans”) submitted to ODH at hivprevention@odh.ohio.gov or Fax Number: 614-728-0876	Secure fax/email
Established per contract	Monthly expenditure report and supporting documentation submitted to CCBH program supervisor	Email
Fifth day of following month	Monthly testing data and test kit tracking reports submitted to Prevention Supervisor	Email

- 2. Final Expenditure Reports:** A Sub-Recipient Final Expenditure Report reflecting total expenditures for the fiscal year must be completed and submitted **via email** by 4:00 p.m. on or before **January 14th, 2021**. The information contained in this report must reflect the program’s accounting records and supporting documentation.
- 3. Inventory Report:** A listing of all equipment purchased in whole or in part with **current** grant funds (Equipment Section of the approved budget) must be submitted to CCBH as part of the Sub-Recipient Final Expenditure Report. At least once every two years, inventory must be physically inspected by the sub-grantee. Equipment purchased with CCBH grant funds must be tagged as property of ODH for inventory control. Such equipment may be required to be returned to ODH at the end of the grant program period.

APPENDIX 2

HIV PREVENTION REGION 3 BUDGET NARRATIVE– EXAMPLE COMMUNITY CARES CENTER

PERSONNEL

A. Salaries and Fringe

Salary

Total: \$54,750.00

Position/Title/Name	Description	FTE	Amount	<u>Budget Request</u>
Health Educator TBD	Coordination of program requirements/community contact	50%	\$32,000.00	\$16,000.00
Jose Pierce, Outreach Coordinator	Completes all testing	100%	\$32,000.00	\$32,000.00
Tim Brown, Program Coordinator	Oversight program objectives and reporting	15%	\$45,000.00	\$6,750.00
	TOTAL PERSONNEL:			\$226,501.99

B. Fringe Benefits

Total: \$ 14,560.05

Fringe benefits are computed at a approximate rate of 26.5% of total salaries. Fringe Benefits for staff including health insurance, payroll taxes, workers compensation, unemployment and retirement plan.

Health Educator – TBD (Part-Time Employee) 1 FTE 50% on Prevention Grant

This position will provide direct services to prevention services for 2 counties in conjunction to coordination with local jails and prisons and youth Detention Centers. He/She will assist with the completion of all required program components and reports. This team member is on the prevention 50% of the time and the other 50% is on the local HOPWA grant.

Outreach Coordinator – Jose Pierce

This position will be responsible for all counseling testing and referral service requirements in the community.

Program Coordinator – Tim Brown (Part-Time Employee)

This position will be responsible for monitoring grants outcomes, program reporting to CCBH. Responsible for providing program coordination 15% of the time this team member's other time

is divided between 50% Ryan White Care coordination and 35% HOPWA coordination.

Total Personnel Cost **\$69,310.05**

OTHER DIRECT COSTS

Advertising

- 30 Radio spots @ \$100.00 per spot will be used to raise awareness to parents and community on effects of <purpose or objective to achieve>. **\$300.00**

Maintenance/Lease

- **Liability Insurance**
The agency's annual insurance cost in 2019 was \$10,000 and we anticipate a 5 percent increase in 2020. The estimated annual cost in 2020 is \$10,500. A cost allocation plan is in place and this grant will be charged 5% of the annual cost. **Total charged \$525.00.**
- **Postage**
Agency cost for mailing billings and general patient communications.
Agency cost for shipping and handling of supplies. **\$250.00**
- **Copier** - The lease for the copier/fax is based on the amount of copies each program makes and each program is assigned a four digit code. The annual lease is estimated to be \$2,500 annually and 5% is the share being charged according to the cost allocation plan to this program based on actual copies made in 2019. **\$125.00**

Subscriptions/Publications

Subscriptions to journals related to clinical genetics will provide access to this vital information and give staff the opportunity to be current in their knowledge. Budget is for renewal of <Name of Subscription/Publication>. **\$500.00**

Supplies

Medical supplies budgeted at **\$700.00** for the year are needed to service patients of the program such as band aids, alcohol swabs, needles, rubber gloves, paper gowns, hand soap, paper towels, tissue, cleaning supplies, hand sanitizer and cotton balls. The budgeted amount includes the pharmaceuticals listed below:

Office supplies budgeted at **\$650.00** for the year are needed for general operation of the program such as binder clips, copy paper, highlighters, labels, markers, pens, portfolios, pencils, message pads, rubber bands, adding machine tape, staplers, staples, binders, file folders, tape and desk trays. Training materials will be developed and used by the investigators to train patrol officers how to preserve crime scene evidence.

Travel/Training

Agency's mileage reimbursement rate is \$.52 per mile. ODH will only allow reimbursement \$.40 per mile.

In State

Program Coordinator

This person will travel to 6 meetings, approximately 5 times each per year, to participate meetings and trainings with CCBH.

20 miles per meeting x .40 cents a mile x 5 meetings = \$40.00

Total In-State = \$40.00

Out of state

Outreach Coordinator

<Name of Conference> <Location> : <Purpose and objective of Out of state travel> for example, Out of state travel for Program Coordinator to attend required curriculum training (costs not to exceed current state rates).

Mileage to and from Airport 100 miles x \$0.40/mile = \$40

Airport parking \$30/day x 4 days = \$120

Airfare \$300 x 2 people = \$600

Hotel \$81/night x 4 nights x 2 people = \$324

Per-diem of \$56/day x 4 days x 2 people = \$448

Total Out of State = \$1,532.00

Links:

OBM Travel: <http://obm.ohio.gov/TravelRule/>

GSA: <http://www.gsa.gov/portal/content/104877>

Training

Health Educator will be attending the 2 seminars (name the seminars) to prepare for this year's prevention activities.

- <Name of Seminar 1> = \$ 75.00
- <Name of Seminar 2> = \$ 25.00

Project Kind is a 3 day Train the Trainer program for the training of cultural humility. The cost for the training is \$1,000.00 per participant. The training will be attended by the Program Coordinator.

Training Total - \$1,100.00

Utilities/Phone Services

- Cell Phone
 - Service for 1 agency owned cell phones used by Outreach Coordinator at \$66.70/month times 11 months = **\$733.70**

Total Other Direct Costs

\$6,455.70

EQUIPMENT

Laptop Computer

1 Laptop @ 1,500 each are to support the Outreach Coordinator. The laptops would enhance the ability of the team member to have a virtual location to meet the program needs of working in the field.

Total Equipment Cost **\$1,500.00**

CONTRACTS

1. Your sub-contractors are required to abide by the same rules and regulations as that of an ODH Sub-recipient
2. The “Services” line item should be used to identify contract services for the subrecipient’s contractor. For example, if Community Cares Center enters into a contract for interpreters then the amount of the contract is listed under “Services.”

Speaker

A Contractor is needed to conduct 1 cultural competency training for HIV Prevention staff. The agenda will be provided to CCBH for approval before the training is scheduled. Speaker will be paid \$300 per training/workshop.

- Contractor \$3,000.00

Total Contract Cost **\$3,000.00**

Total Request for 2020 HIV Prevention **\$80,265.75**

Subrecipient’s authorized representative certifies the foregoing:

- Subrecipient understands and agrees that it must follow the federal cost principle that applies to its type of organization (2 CFR, Part 225; 2 CFR, Part 220; or, 2 CFR, Part 230).
- Sub-recipient’s budgeted costs are reasonable, allowable and allocable under OGAPP and federal rules and regulations.
- The OGAPP and the rules and regulations have been read and are understood.
- Subrecipient understands and agrees that costs may be disallowed if deemed unallowable or in violation of OGAPP and federal rules and regulations.
- The appropriate programmatic and administrative personnel involved in this application are aware of agency policy in regard to subawards and are prepared to establish the necessary inter-institutional agreements consistent with those policies.
- Subrecipient agrees and understands that costs incurred in the fulfillment of the Deliverables must be allowable under OGAPP and federal rules and regulations to qualify for reimbursement.

[Signature]

[Print Name & Title]

[Date]

APPENDIX 3

**HIV Prevention Grant – Region 3
2020 CTR Program**

Agency _____ Agency ID # _____

Site Name	Site ID #	Address	Testing Days/Hours	Target Population	# 2020 tests projected

APPENDIX 4

NON-COLLUSION AFFIDAVIT

* THIS AFFIDAVIT MUST BE EXECUTED FOR THIS BID TO BE CONSIDERED

STATE OF OHIO)
) SS.
COUNTY OF CUYAHOGA)

_____ being first duly sworn, deposes and says that he/she is _____ of the party making the foregoing proposal: that such proposal is genuine and not collusive or sham: that said Respondent has not colluded, conspired, connived or agreed, directly or indirectly, with any contractor or person to put in a sham proposal, or that such other person shall refrain from bidding and has not in any manner, directly or indirectly, sought by agreement or collusion, or communication or conference, with any person, to fix the price of affiant or any other contractor, or to fix any overhead, profit or cost element of said price, or of that of any other contractor, or to secure any advantage against the Cuyahoga County Board of Health or any other persons interested in the proposed contract; and that all statements contained in said proposal are true; and further that all statements contained in said proposal are true; and further that such contractor has not, directly or indirectly submitted this proposal, or contents thereof, or divulged information relative thereto to any association or to any member or agent thereof.

AFFIANT

Sworn to and subscribed before me this _____ day of _____ 2020.

NOTARY PUBLIC

APPENDIX 5

CERTIFICATION OF COMPLIANCE WITH SECTION 3517.13 OF THE O.R.C. RFP #2020-02

CONTRACTS AWARDED TO INDIVIDUAL, PARTNERSHIP, OTHER UNINCORPORATED BUSINESS, ASSOCIATION (INCLUDING A PROFESSIONAL ASSOCIATION ORGANIZED UNDER CHAPTER 1785), ESTATE, OR TRUST MUST CONTAIN THE FOLLOWING CERTIFICATION:

Any contract for goods or services costing more than five hundred dollars must contain a certification by the contracting entity (vendor) that all of the following persons are in compliance with 3517.13(1)(1), limiting campaign contributions to the holder of the public office having the ultimate responsibility for the award of the contract:

- THE INDIVIDUAL
- EACH PARTNER OR OWNER OF THE PARTNERSHIP OR UNINCORPORATED BUSINESS
- EACH SHAREHOLDER OF THE ASSOCIATION
- EACH ADMINISTRATOR OF THE ESTATE
- EACH EXECUTOR OF THE ESTATE
- EACH TRUSTEE OF THE TRUST
- EACH SPOUSE OF ANY OF THE PRECEDING PERSONS
- EACH CHILD SEVEN YEARS TO SEVENTEEN YEARS OF AGE OF ANY OF THE PRECEDING PERSONS
- ANY COMBINATION OF THE PERSONS LISTED ABOVE

CONTRACTS AWARDED TO A CORPORATION OR BUSINESS TRUST (EXCEPT A PROFESSIONAL ASSOCIATION ORGANIZED UNDER CHAPTER 1785) MUST CONTAIN THE FOLLOWING CERTIFICATION:

Any contract for goods or services costing more than five hundred dollars must contain a certification by the contracting entity (vendor) that all of the following persons are in compliance with 3517.13(J)(1), limiting campaign contributions to the holder of the public office having the ultimate responsibility for the award of the contract:

- EACH OWNER OF MORE THAN TWENTY PER CENT OF THE CORPORATION OR BUSINESS TRUST
- EACH SPOUSE OF AN OWNER OF MORE THAN TWENTY PER CENT OF THE CORPORATION OR BUSINESS TRUST
- EACH CHILD SEVEN YEARS TO SEVENTEEN YEARS OF AGE OF AN OWNER OF MORE THAN TWENTY PER CENT OF THE CORPORATION OR BUSINESS TRUST
- ANY COMBINATION OF THE PERSONS LISTED ABOVE

It is hereby certified that all of the persons listed above are in compliance with section 3517.13(1)(1) or 3517.13(J)(1) of the Ohio Revised Code.

IF CONTRACTING ENTITY IS A NONPROFIT CORPORATION ESTABLISHED UNDER ORC CHAPTER 1702, THE UNDERSIGNED CERTIFIES THAT SECTIONS 3517.13(1)(1) AND 3517.13(J)(1) ARE NOT APPLICABLE TO THE CONTRACTING ENTITY.

PRINTED NAME

TITLE

SIGNATURE

DATE

APPENDIX 6

SAMPLE PROPOSAL COVER PAGE

(Use this as the format for preparing the proposal Cover Page)

RFP # 2020-02

PROPOSAL FOR HIV PREVENTION GRANT

Agency Name
Agency Street Address
Agency City, State, Zip Code

CEO/Executive Director: _____

Board President: _____

Individual who will sign contract: _____

Agency EIN: _____

Agency accounting basis: _____

Total Amount Requested: _____

Proposal Contact: _____

Phone Number: _____

E-Mail Address: _____

APPENDIX 7

RFP EVALUATION FORM

Agency: _____ Service: _____

Reviewer: _____ Total Score: _____

CRITERIA	POINT VALUE	SCORE	REVIEWER COMMENTS
1. Cover Letter and Introduction-Executive Summary <ul style="list-style-type: none"> ◆ Is there a concise description of the vendor; ◆ Is there a concise description of the proposed service; ◆ Does the agency have experience with this service and/or population; ◆ Does proposal identify target population to be served, number served, and total budget; ◆ Does the proposal provide an overview of the vendors' unique approach to providing services. 	5		
2. Project Narrative <ul style="list-style-type: none"> ◆ Conveys understanding of purpose and scope of this project. ◆ Demonstrates ability to meet each of the scope of services ◆ Provides qualifications for deliverables identified in RFP ◆ Description of how program staff will stay up to date on HIV information 	20		

<ul style="list-style-type: none"> ◆ Is there a clear description of priority population(s) to be addressed by proposed services supported by epidemiological data? ◆ Does agency have experience with target population? 			
<p>3. Methodology</p> <ul style="list-style-type: none"> ◆ Description of how deliverables will be met. ◆ Activities in Section 1: CTR Services in Priority Populations addressed, including: <i>Quality assurance procedures on HIV risk assessment forms, provide referrals, HIV test kit tracking reports, Completed Appendix 3, provide CCC testing numbers of staff administering testing services, provide CLIA Waiver</i> ◆ Activities in Section 2: Social Marketing/Community Engagement addressed, including: <i>Condom Distribution, STD/HIV messaging, how agency plans to build partnerships in priority based populations</i> ◆ Activities in Section 3: Prevention with Positives addressed, including: <i>Description of partnerships with RWPA EIS providers, description of partnerships with HIV care providers, condom distribution to PLWHA.</i> ◆ Peer led program reflective of epidemiologic profile described (<i>if applicable-8pts</i>) 	<p style="text-align: center;">35</p> <p style="text-align: center;">8/NA</p>		
<p>4. Project Management</p> <ul style="list-style-type: none"> ◆ Describes method(s) for managing the project; ◆ Provides organizational structure for managing the project; ◆ Describes method(s) for reporting project status updates; 	<p style="text-align: center;">20</p>		

<ul style="list-style-type: none"> ◆ Provides potential risks/problems and solutions to avoid or minimize them. ◆ Can agency demonstrate appropriate record keeping, reporting, invoicing and well maintained data? 			
<p>5. Budget</p> <ul style="list-style-type: none"> ◆ Is budget data complete and accurate; ◆ Is cost reasonable for services being provided; ◆ Are actual costs (i.e. not estimates) with detailed breakdown provided; ◆ Do staffing patterns match services proposed; ◆ Authorized individual to make contractual obligations must sign the pricing document. 	15		
<p>6. Additional documents</p> <ul style="list-style-type: none"> ◆ 3 letters of support included? ◆ Conflict of Interest statement provided? 	5		
TOTAL	100		

APPENDIX 8
CUYAHOGA COUNTY BOARD OF HEALTH
REQUEST FOR PROPOSALS
RFP # 2020-02
CHECKLIST

Proposal should include the following components submitted in the following order:

A. INTRODUCTORY PAGES

- _____ 1. Cover Page (see Appendix 6 – Sample Cover Page).
- _____ 2. Table of Contents
- _____ 3. Proposal Submission Requirements Checklist (A signed copy of this form)

B. SCORED NARRATIVE SECTION

- _____ 4. Cover Letter
- _____ 5. Introduction - Executive Summary (5 points)
- _____ 6. Project Narrative (20 points)
- _____ 7. Methodology (35 points)
- _____ 8. Project Management (20 points)
- _____ 9. Budget (15 points)
- _____ 10. Attachments (5 points)

C. REQUIRED ATTACHMENTS

- _____ 11. Vendors Reference Sheet - *Appendix 10*
- _____ 12. Non-Collusion Affidavit – *Appendix 4* (must be notarized)
- _____ 13. Certification of Compliance with Section 3517.13 of the O.R.C.- *Appendix 5*
- _____ 14. Cover Page- *Appendix 6*
- _____ 15. List of CTR Testing Sites – *Appendix 3*
- _____ 16. Copy of CLIA Waiver
- _____ 17. List of HIV testers and Client Centered Counseling testing numbers
- _____ 18. Budget Narrative – *Appendix 2*
- _____ 19. Letters of Support (3)
- _____ 20. Additional supporting attachments (*Optional*)

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APPENDIX 9

2018 Epidemiology Profiles

***Data provided by Ohio Department of Health**

This appendix contains epidemiology data categorized by:

Cuyahoga County

Lorain and Medina County

Ashtabula, Lake, and Geauga County

New Diagnoses of HIV Infection Reported in Cuyahoga County

As of June 30, 2019

Reported new diagnoses of HIV infection in 2018 by disease status and selected characteristics, Cuyahoga County

Characteristic	2018 diagnosis of HIV infection			Disease Status					
	Rate ^a	No.	%	HIV (not AIDS)		HIV & later AIDS		AIDS	
				No.	%	No.	%	No.	%
Sex at birth									
Males	22.6	134	89%	94	89%	31	89%	9	90%
Females	2.6	17	11%	12	11%	4	11%	1	10%
Age at diagnosis (yr)									
<13	*	-	-	-	-	-	-	-	-
13-14	*	-	-	-	-	-	-	-	-
15-19	6.7	5	3%	5	5%	-	-	-	-
20-24	36.6	29	19%	24	23%	1	3%	4	40%
25-29	40.7	38	25%	27	25%	8	23%	3	30%
30-34	19.3	16	11%	12	11%	4	11%	-	-
35-39	19.8	15	10%	9	8%	5	14%	1	10%
40-44	23.8	16	11%	13	12%	3	9%	-	-
45-49	9.4	7	5%	3	3%	4	11%	-	-
50-54	7.6	6	4%	1	1%	4	11%	1	10%
55-64	9.6	17	11%	11	10%	5	14%	1	10%
65+	*	2	1%	1	1%	1	3%	-	-
Race/Ethnicity^b									
American Indian/Alaska Native	*	-	-	-	-	-	-	-	-
Asian/Pacific Islander	*	-	-	-	-	-	-	-	-
Black/African-American	26.1	96	64%	63	59%	25	71%	8	80%
Hispanic/Latinx	22.2	17	11%	13	12%	3	9%	1	10%
White	4.8	35	23%	28	26%	6	17%	1	10%
Multi-Race	*	3	2%	2	2%	1	3%	-	-
Race/Ethnicity^b and Sex at birth									
American Indian/Alaska Native Males	*	-	-	-	-	-	-	-	-
American Indian/Alaska Native Females	*	-	-	-	-	-	-	-	-
Asian/Pacific Islander Males	*	-	-	-	-	-	-	-	-
Asian/Pacific Islander Females	*	-	-	-	-	-	-	-	-
Black/African-American Males	50.2	84	56%	56	53%	21	60%	7	70%
Black/African-American Females	6.0	12	8%	7	7%	4	11%	1	10%
Hispanic/Latino Males	41.9	16	11%	12	11%	3	9%	1	10%
Hispanic/Latina Females	*	1	1%	1	1%	-	-	-	-
White Males	8.7	31	21%	24	23%	6	17%	1	10%
White Females	*	4	3%	4	4%	-	-	-	-
Multi-Race Males	*	3	2%	2	2%	1	3%	-	-
Multi-Race Females	*	-	-	-	-	-	-	-	-
Total	12.1	151		106		35		10	

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^aThe rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using 2018 U.S. Census estimates.

^bHispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-Race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported new diagnoses of HIV infection in 2018 by disease status and transmission category, Cuyahoga County

Transmission Category ^a	2018 diagnosis of HIV infection		Disease Status					
			HIV (not AIDS)		HIV & later AIDS		AIDS	
	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent								
Male-to-male sexual contact	91	68%	69	73%	15	48%	7	78%
Injection drug use (IDU)	3	2%	2	2%	1	3%	-	-
Male-to-male sexual contact and IDU	2	1%	2	2%	-	-	-	-
Heterosexual contact	5	4%	2	2%	3	10%	-	-
Other/unknown	33	25%	19	20%	12	39%	2	22%
Subtotal	134	100%	94	100%	31	100%	9	100%
Female adult or adolescent								
Injection drug use	2	12%	2	17%	-	-	-	-
Heterosexual contact	15	88%	10	83%	4	100%	1	100%
Other/unknown	-	-	-	-	-	-	-	-
Subtotal	17	100%	12	100%	4	100%	1	100%
Child (<13 yrs at diagnosis)								
Perinatal	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-
Total	151		106		35		10	

Reported new diagnoses of HIV infection in 2018 by disease status and exposure category, Cuyahoga County

Exposure Category ^b	2018 diagnosis of HIV infection		Disease Status					
			HIV (not AIDS)		HIV & later AIDS		AIDS	
	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	90	60%	68	64%	15	43%	7	70%
Injection drug use (IDU) only	4	3%	3	3%	1	3%	-	-
Heterosexual contact only	20	13%	12	11%	7	20%	1	10%
Male-to-male sexual contact & IDU	2	1%	2	2%	-	-	-	-
IDU & Heterosexual contact	1	1%	1	1%	-	-	-	-
Male-to-male sexual contact & Heterosexual contact	1	1%	1	1%	-	-	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-
Perinatal exposure	-	-	-	-	-	-	-	-
Other/unknown	33	22%	19	18%	12	34%	2	20%
Total	151		106		35		10	

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported new diagnoses of HIV infection in 2018 by race/ethnicity and age at diagnosis, Cuyahoga County

2018 diagnosis of HIV infection

Age at diagnosis (yr)	American Indian/Alaska Native			Asian/Pacific Islander			Black/African-American			Hispanic/ Latinx ^a			White			Multi-Race		
	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%
<13	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
13-14	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
15-19	*	-	-	*	-	-	*	4	4%	*	1	6%	*	-	-	*	-	-
20-24	*	-	-	*	-	-	96.2	25	26%	*	2	12%	*	1	3%	*	1	33%
25-29	*	-	-	*	-	-	72.4	22	23%	104.4	7	41%	15.9	8	23%	*	1	33%
30-34	*	-	-	*	-	-	44.1	10	10%	*	2	12%	*	3	9%	*	1	33%
35-39	*	-	-	*	-	-	51.0	11	11%	*	1	6%	*	3	9%	*	-	-
40-44	*	-	-	*	-	-	42.1	8	8%	*	-	-	20.5	8	23%	*	-	-
45-49	*	-	-	*	-	-	*	4	4%	*	1	6%	*	2	6%	*	-	-
50-54	*	-	-	*	-	-	*	2	2%	*	1	6%	*	3	9%	*	-	-
55-64	*	-	-	*	-	-	18.5	9	9%	*	1	6%	5.9	7	20%	*	-	-
65+	*	-	-	*	-	-	*	1	1%	*	1	6%	*	-	-	*	-	-
Total	*	-	-	*	-	-	26.1	96		22.2	17		4.8	35		*	3	

Reported new diagnoses of HIV infection in 2018 by race/ethnicity and transmission category, Cuyahoga County

2018 diagnosis of HIV infection

Transmission Category ^c	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent												
Male-to-male sexual contact	-	-	-	-	57	68%	12	75%	19	61%	3	100%
Injection drug use (IDU)	-	-	-	-	1	1%	-	-	2	6%	-	-
Male-to-male sexual contact and IDU	-	-	-	-	1	1%	-	-	1	3%	-	-
Heterosexual contact	-	-	-	-	5	6%	-	-	-	-	-	-
Other/unknown	-	-	-	-	20	24%	4	25%	9	29%	-	-
Subtotal	-	-	-	-	84	100%	16	100%	31	100%	3	100%
Female adult or adolescent												
Injection drug use	-	-	-	-	-	-	-	-	2	50%	-	-
Heterosexual contact	-	-	-	-	12	100%	1	100%	2	50%	-	-
Other/unknown	-	-	-	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	12	100%	1	100%	4	100%	-	-
Child (<13 yrs at diagnosis)												
Perinatal	-	-	-	-	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-	-	-	-	-
Total	-	-	-	-	96		17		35		3	

Reported new diagnoses of HIV infection in 2018 by race/ethnicity and exposure category, Cuyahoga County

2018 diagnosis of HIV infection

Exposure Category ^d	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	-	-	-	-	56	58%	12	71%	19	54%	3	100%
Injection drug use (IDU) only	-	-	-	-	1	1%	-	-	3	9%	-	-
Heterosexual contact only	-	-	-	-	17	18%	1	6%	2	6%	-	-
Male-to-male sexual contact & IDU	-	-	-	-	1	1%	-	-	1	3%	-	-
IDU & Heterosexual contact	-	-	-	-	-	-	-	-	1	3%	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	1	1%	-	-	-	-	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	-	-
Perinatal exposure	-	-	-	-	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	20	21%	4	24%	9	26%	-	-
Total	-	-	-	-	96		17		35		3	

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis.

Asterisk (*) indicates rate not calculated because census data unavailable or for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-Race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

^bThe rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using 2018 U.S. Census estimates.

^c Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^d Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported new diagnoses of HIV infection by year of diagnosis (2014-2018) and cumulative diagnoses by selected characteristics, Cuyahoga County

Characteristic	Diagnosis of HIV Infection by Year															Cumulative Diagnoses	
	2014			2015			2016			2017			2018				
	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	No.	%
Sex at birth																	
Males	31.2	187	88%	30.6	183	88%	25.5	152	79%	21.2	126	85%	22.6	134	89%	6,347	81%
Females	3.8	25	12%	3.8	25	12%	6.1	40	21%	3.4	22	15%	2.6	17	11%	1,464	19%
Age at diagnosis (yr)																	
<13	*	1	<1%	*	-	-	*	-	-	*	1	1%	*	-	-	84	1%
13-14	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	10	<1%
15-19	19.9	16	8%	21.6	17	8%	19.2	15	8%	15.7	12	8%	6.7	5	3%	288	4%
20-24	69.6	59	28%	70.2	59	28%	71.3	59	31%	35.8	29	20%	36.6	29	19%	1,001	13%
25-29	41.4	35	17%	52.2	45	22%	45.1	40	21%	48.2	44	30%	40.7	38	25%	1,364	17%
30-34	33.4	27	13%	29.6	24	12%	23.4	19	10%	22.1	18	12%	19.3	16	11%	1,410	18%
35-39	32.2	23	11%	30.3	22	11%	17.6	13	7%	14.7	11	7%	19.8	15	10%	1,277	16%
40-44	22.6	17	8%	13.8	10	5%	13.1	9	5%	11.9	8	5%	23.8	16	11%	921	12%
45-49	17.3	14	7%	15.1	12	6%	19.2	15	8%	10.4	8	5%	9.4	7	5%	648	8%
50-54	8.5	8	4%	12.1	11	5%	8.1	7	4%	10.9	9	6%	7.6	6	4%	391	5%
55-64	5.6	10	5%	3.3	6	3%	6.7	12	6%	3.3	6	4%	9.6	17	11%	334	4%
65+	*	2	1%	*	2	1%	*	3	2%	*	2	1%	*	2	1%	83	1%
Race/Ethnicity^b																	
American Indian/Alaska Native	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	7	<1%
Asian/Pacific Islander	*	2	1%	*	1	<1%	*	-	-	12.5	5	3%	*	-	-	22	<1%
Black/African-American	39.8	148	70%	37.2	138	66%	38.0	141	73%	26.5	98	66%	26.1	96	64%	4,395	56%
Hispanic/Latinx	28.1	19	9%	24.4	17	8%	14.0	10	5%	13.5	10	7%	22.2	17	11%	667	9%
White	4.2	32	15%	6.0	45	22%	4.8	36	19%	4.2	31	21%	4.8	35	23%	2,488	32%
Multi-Race	49.0	11	5%	30.6	7	3%	21.4	5	3%	*	4	3%	*	3	2%	200	3%
Unknown	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	32	<1%
Race/Ethnicity^b and Sex at birth																	
American Indian/Alaska Native Males	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	4	<1%
American Indian/Alaska Native Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	3	<1%
Asian/Pacific Islander Males	*	2	1%	*	-	-	*	-	-	*	4	3%	*	-	-	18	<1%
Asian/Pacific Islander Females	*	-	-	*	1	<1%	*	-	-	*	1	1%	*	-	-	4	<1%
Black/African-American Males	77.1	130	61%	73.7	124	60%	65.9	111	58%	49.9	84	57%	50.2	84	56%	3,401	44%
Black/African-American Females	8.9	18	8%	6.9	14	7%	14.8	30	16%	6.9	14	9%	6.0	12	8%	994	13%
Hispanic/Latino Males	53.7	18	8%	46.4	16	8%	19.7	7	4%	24.5	9	6%	41.9	16	11%	490	6%
Hispanic/Latina Females	*	1	<1%	*	1	<1%	*	3	2%	*	1	1%	*	1	1%	177	2%
White Males	7.1	26	12%	10.4	38	18%	8.3	30	16%	7.0	25	17%	8.7	31	21%	2,248	29%
White Females	1.5	6	3%	1.8	7	3%	1.6	6	3%	1.6	6	4%	*	4	3%	240	3%
Multi-Race Males	100.6	11	5%	45.0	5	2%	*	4	2%	*	4	3%	*	3	2%	162	2%
Multi-Race Females	*	-	-	*	2	1%	*	1	1%	*	-	-	*	-	-	38	<1%
Unknown	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	32	<1%
Total	16.8	212		16.6	208		15.4	192		11.9	148		12.1	151		7,811	

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis. Diagnoses of HIV infection by year (2014-2018) represent all reported cases diagnosed in each year; cumulative diagnoses represent all reported HIV and/or AIDS cases diagnosed since the beginning of the epidemic through 2018.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a The rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-Race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported new diagnoses of HIV infection by year of diagnosis (2014-2018) and cumulative diagnoses by transmission category, Cuyahoga County

Transmission Category ^a	Diagnosis of HIV Infection by Year											
	2014		2015		2016		2017		2018		Cumulative Diagnoses	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent												
Male-to-male sexual contact	135	73%	126	69%	105	69%	93	74%	91	68%	4,266	68%
Injection drug use (IDU)	1	1%	6	3%	2	1%	-	-	3	2%	456	7%
Male-to-male sexual contact and IDU	2	1%	2	1%	8	5%	6	5%	2	1%	394	6%
Heterosexual contact	13	7%	7	4%	5	3%	4	3%	5	4%	343	5%
Other/unknown	35	19%	42	23%	32	21%	23	18%	33	25%	849	13%
Subtotal	186	100%	183	100%	152	100%	126	100%	134	100%	6,308	100%
Female adult or adolescent												
Injection drug use	3	12%	6	24%	2	5%	2	10%	2	12%	262	18%
Heterosexual contact	20	80%	17	68%	36	90%	19	90%	15	88%	1,045	74%
Other/unknown	2	8%	2	8%	2	5%	-	-	-	-	113	8%
Subtotal	25	100%	25	100%	40	100%	21	100%	17	100%	1,420	100%
Child (<13 yrs at diagnosis)												
Perinatal	1	100%	-	-	-	-	1	100%	-	-	73	88%
Other/unknown	-	-	-	-	-	-	-	-	-	-	10	12%
Subtotal	1	100%	-	-	-	-	1	100%	-	-	83	100%
Total	212		208		192		148		151		7,811	

Trends in reported diagnoses of HIV infection by year of diagnosis (2014-2018) and cumulative diagnoses by exposure category, Cuyahoga County

Exposure Category ^b	Diagnosis of HIV Infection by Year											
	2014		2015		2016		2017		2018		Cumulative Diagnoses	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	133	63%	126	61%	104	54%	92	62%	90	60%	4,057	52%
Injection drug use (IDU) only	2	1%	6	3%	4	2%	2	1%	4	3%	422	5%
Heterosexual contact only	33	16%	24	12%	41	21%	23	16%	20	13%	1,390	18%
Male-to-male sexual contact & IDU	2	1%	2	1%	6	3%	5	3%	2	1%	327	4%
IDU & Heterosexual contact	2	1%	6	3%	-	-	-	-	1	1%	296	4%
Male-to-male sexual contact & Heterosexual contact	2	1%	-	-	1	1%	1	1%	1	1%	209	3%
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	2	1%	1	1%	-	-	67	1%
Perinatal exposure	1	<1%	1	<1%	-	-	1	1%	-	-	77	1%
Other/unknown	37	17%	43	21%	34	18%	23	16%	33	22%	966	12%
Total	212		208		192		148		151		7,811	

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis. Diagnoses of HIV infection by year (2014-2018) represent all reported cases diagnosed in each year; cumulative diagnoses represent all reported HIV and/or AIDS cases diagnosed since the beginning of the epidemic through 2018.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Persons Living with Diagnosed HIV Infection Reported in Cuyahoga County

As of June 30, 2019

Reported persons living with diagnosed HIV infection in 2018 by current disease status and selected characteristics, Cuyahoga County

Characteristic	Living with diagnosed HIV infection in 2018			Current Disease Status			
	Rate ^a	No.	%	HIV (not AIDS)		AIDS	
				No.	%	No.	%
Sex at birth							
Males	676.2	4,013	79%	2,073	80%	1,940	79%
Females	160.5	1,044	21%	523	20%	521	21%
Age at end of year							
<13	3.8	7	<1%	6	<1%	1	<1%
13-14	*	1	<1%	1	<1%	-	-
15-19	26.9	20	<1%	16	1%	4	<1%
20-24	229.9	182	4%	146	6%	36	1%
25-29	487.1	455	9%	335	13%	120	5%
30-34	507.9	420	8%	280	11%	140	6%
35-39	587.9	446	9%	258	10%	188	8%
40-44	614.3	413	8%	238	9%	175	7%
45-49	783.8	586	12%	279	11%	307	12%
50-54	969.1	770	15%	332	13%	438	18%
55-64	740.3	1,317	26%	535	21%	782	32%
65+	194.7	440	9%	170	7%	270	11%
Race/Ethnicity^b							
American Indian/Alaska Native	*	3	<1%	2	<1%	1	<1%
Asian/Pacific Islander	53.2	22	<1%	18	1%	4	<1%
Black/African-American	776.9	2,861	57%	1,467	57%	1,394	57%
Hispanic/Latinx	762.4	585	12%	289	11%	296	12%
White	184.2	1,347	27%	677	26%	670	27%
Multi-Race	872.2	213	4%	117	5%	96	4%
Unknown	*	26	1%	26	1%	-	-
Race/Ethnicity^b and Sex at birth							
American Indian/Alaska Native Males	*	2	<1%	2	<1%	-	-
American Indian/Alaska Native Females	*	1	<1%	-	-	1	<1%
Asian/Pacific Islander Males	84.9	17	<1%	15	1%	2	<1%
Asian/Pacific Islander Females	23.4	5	<1%	3	<1%	2	<1%
Black/African-American Males	1,303.4	2,183	43%	1,125	43%	1,058	43%
Black/African-American Females	337.7	678	13%	342	13%	336	14%
Hispanic/Latino Males	1,097.3	419	8%	222	9%	197	8%
Hispanic/Latina Females	430.6	166	3%	67	3%	99	4%
White Males	339.0	1,203	24%	597	23%	606	25%
White Females	38.3	144	3%	80	3%	64	3%
Multi-Race Males	1,434.0	171	3%	94	4%	77	3%
Multi-Race Females	336.1	42	1%	23	1%	19	1%
Unknown	*	26	1%	26	1%	-	-
Total	406.6	5,057		2,596		2,461	

Notes:

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-Race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported persons living with diagnosed HIV infection in 2018 by current disease status and transmission category, Cuyahoga County

Transmission Category ^a	Living with diagnosed HIV infection in 2018		Current Disease Status			
	No.	%	HIV (not AIDS)		AIDS	
			No.	%	No.	%
Male adult or adolescent						
Male-to-male sexual contact	2,763	69%	1,423	69%	1,340	69%
Injection drug use (IDU)	170	4%	64	3%	106	5%
Male-to-male sexual contact and IDU	207	5%	76	4%	131	7%
Heterosexual contact	261	7%	125	6%	136	7%
Other/unknown	590	15%	371	18%	219	11%
Subtotal	3,991	100%	2,059	100%	1,932	100%
Female adult or adolescent						
Injection drug use	140	14%	43	8%	97	19%
Heterosexual contact	792	78%	399	78%	393	78%
Other/unknown	80	8%	67	13%	13	3%
Subtotal	1,012	100%	509	100%	503	100%
Child (<13 yrs at diagnosis)						
Perinatal	48	89%	23	82%	25	96%
Other/unknown	6	11%	5	18%	1	4%
Subtotal	54	100%	28	100%	26	100%
Total	5,057		2,596		2,461	

Reported persons living with diagnosed HIV infection in 2018 by current disease status and exposure category, Cuyahoga County

Exposure Category ^b	Living with diagnosed HIV infection in 2018		Current Disease Status			
	No.	%	HIV (not AIDS)		AIDS	
			No.	%	No.	%
Male-to-male sexual contact only	2,619	52%	1,372	53%	1,247	51%
Injection drug use (IDU) only	135	3%	57	2%	78	3%
Heterosexual contact only	1,055	21%	525	20%	530	22%
Male-to-male sexual contact & IDU	157	3%	64	2%	93	4%
IDU & Heterosexual contact	175	3%	50	2%	125	5%
Male-to-male sexual contact & Heterosexual contact	144	3%	51	2%	93	4%
Male-to-male sexual contact & IDU & Heterosexual contact	50	1%	12	<1%	38	2%
Perinatal exposure	51	1%	26	1%	25	1%
Other/unknown	671	13%	439	17%	232	9%
Total	5,057		2,596		2,461	

Notes:

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported persons living with diagnosed HIV infection in 2018 by race/ethnicity and age, Cuyahoga County

Living with diagnosed HIV infection in 2018

Age at end of year	American Indian/Alaska Native			Asian/Pacific Islander			Black/African-American			Hispanic/ Latinx ^a			White			Multi-Race			Unknown	
	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	No.	%
<13	*	-	-	*	-	-	*	5	<1%	*	1	<1%	*	1	<1%	*	-	-	-	-
13-14	*	-	-	*	-	-	*	1	<1%	*	-	-	*	-	-	*	-	-	-	-
15-19	*	-	-	*	1	5%	67.1	17	1%	*	1	<1%	*	1	<1%	*	-	-	-	-
20-24	*	-	-	*	4	18%	527.3	137	5%	331.0	21	4%	26.7	11	1%	373.9	9	4%	-	-
25-29	*	-	-	*	-	-	1,108.7	337	12%	760.5	51	9%	93.6	47	3%	956.0	20	9%	-	-
30-34	*	-	-	*	1	5%	1,253.6	284	10%	639.2	41	7%	146.9	70	5%	1,610.7	24	11%	-	-
35-39	*	1	33%	*	4	18%	1,284.5	277	10%	771.3	45	8%	229.3	100	7%	1,732.0	19	9%	-	-
40-44	*	1	33%	*	4	18%	1,037.2	197	7%	1,143.1	58	10%	328.6	128	10%	2,637.1	25	12%	-	-
45-49	*	-	-	*	2	9%	1,395.0	306	11%	1,861.6	81	14%	369.2	165	12%	2,818.4	27	13%	5	19%
50-54	*	-	-	*	2	9%	1,867.2	407	14%	2,241.0	85	15%	481.5	244	18%	3,463.2	24	11%	8	31%
55-64	*	1	33%	*	3	14%	1,359.2	662	23%	2,559.9	157	27%	368.0	433	32%	4,372.5	54	25%	7	27%
65+	*	-	-	*	1	5%	425.3	231	8%	845.3	44	8%	91.7	147	11%	1,038.7	11	5%	6	23%
Total	*	3		53.2	22		776.9	2,861		762.4	585		184.2	1,347		872.2	213		26	

Reported persons living with diagnosed HIV infection in 2018 by race/ethnicity and transmission category, Cuyahoga County

Living with diagnosed HIV infection in 2018

Transmission Category ^c	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race		Unknown	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent														
Male-to-male sexual contact	2	100%	11	65%	1,431	66%	248	60%	945	79%	126	74%	-	-
Injection drug use (IDU)	-	-	-	-	76	4%	56	14%	35	3%	3	2%	-	-
Male-to-male sexual contact and IDU	-	-	-	-	94	4%	29	7%	73	6%	11	6%	-	-
Heterosexual contact	-	-	-	-	190	9%	27	7%	32	3%	11	6%	1	6%
Other/unknown	-	-	6	35%	378	17%	53	13%	116	10%	20	12%	17	94%
Subtotal	2	100%	17	100%	2,169	100%	413	100%	1,201	100%	171	100%	18	100%
Female adult or adolescent														
Injection drug use	-	-	-	-	69	11%	33	21%	30	21%	8	19%	-	-
Heterosexual contact	1	100%	5	100%	535	82%	120	75%	100	70%	31	74%	-	-
Other/unknown	-	-	-	-	50	8%	7	4%	12	8%	3	7%	8	100%
Subtotal	1	100%	5	100%	654	100%	160	100%	142	100%	42	100%	8	100%
Child (<13 yrs at diagnosis)														
Perinatal	-	-	-	-	34	89%	12	100%	2	50%	-	-	-	-
Other/unknown	-	-	-	-	4	11%	-	-	2	50%	-	-	-	-
Subtotal	-	-	-	-	38	100%	12	100%	4	100%	-	-	-	-
Total	3		22		2,861		585		1,347		213		26	

Reported persons living with diagnosed HIV infection in 2018 by race/ethnicity and exposure category, Cuyahoga County

Living with diagnosed HIV infection in 2018

Exposure Category ^d	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race		Unknown	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	2	67%	10	45%	1,332	47%	233	40%	926	69%	116	54%	-	-
Injection drug use (IDU) only	-	-	-	-	60	2%	36	6%	35	3%	4	2%	-	-
Heterosexual contact only	1	33%	5	23%	726	25%	147	25%	133	10%	42	20%	1	4%
Male-to-male sexual contact & IDU	-	-	-	-	66	2%	17	3%	65	5%	9	4%	-	-
IDU & Heterosexual contact	-	-	-	-	85	3%	53	9%	30	2%	7	3%	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	1	5%	99	3%	15	3%	19	1%	10	5%	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	28	1%	12	2%	8	1%	2	1%	-	-
Perinatal exposure	-	-	-	-	37	1%	12	2%	2	0%	-	-	-	-
Other/unknown	-	-	6	27%	428	15%	60	10%	129	10%	23	11%	25	96%
Total	3		22		2,861		585		1,347		213		26	

Notes:

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Asterisk (*) indicates rate not calculated because census data unavailable or for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-Race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

^b The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^c Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^d Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported persons living with diagnosed HIV infection by year of diagnosis and selected characteristics, Cuyahoga County, 2014-2018

Characteristic	Living with Diagnosed HIV Infection														
	2014			2015			2016			2017			2018		
	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%
Sex at birth															
Males	587.6	3,525	78%	603.8	3,609	79%	637.0	3,793	79%	654.2	3,897	79%	676.2	4,013	79%
Females	147.9	976	22%	148.6	978	21%	154.3	1,009	21%	158.1	1,032	21%	160.5	1,044	21%
Age at end of year															
<13	6.3	12	<1%	3.7	7	<1%	*	4	<1%	2.7	5	<1%	3.8	7	<1%
13-14	*	1	<1%	16.4	5	<1%	27.1	8	<1%	*	3	<1%	*	1	<1%
15-19	47.3	38	1%	45.7	36	1%	46.1	36	1%	44.6	34	1%	26.9	20	<1%
20-24	259.4	220	5%	272.3	229	5%	281.6	233	5%	245.7	199	4%	229.9	182	4%
25-29	375.0	317	7%	428.3	369	8%	451.1	400	8%	486.3	444	9%	487.1	455	9%
30-34	455.8	369	8%	445.3	361	8%	458.4	372	8%	485.3	396	8%	507.9	420	8%
35-39	492.6	352	8%	517.8	376	8%	572.2	422	9%	605.2	452	9%	587.9	446	9%
40-44	667.1	502	11%	582.8	422	9%	577.4	397	8%	579.8	390	8%	614.3	413	8%
45-49	898.3	729	16%	877.1	696	15%	882.9	691	14%	825.0	635	13%	783.8	586	12%
50-54	880.5	827	18%	914.3	829	18%	951.3	820	17%	929.8	770	16%	969.1	770	15%
55-64	517.0	921	20%	555.9	1,001	22%	616.4	1,111	23%	676.7	1,218	25%	740.3	1,317	26%
65+	102.8	213	5%	121.4	256	6%	143.6	308	6%	172.5	383	8%	194.7	440	9%
Race/Ethnicity^b															
American Indian/Alaska Native	*	2	<1%	*	2	<1%	*	2	<1%	*	2	<1%	*	3	<1%
Asian/Pacific Islander	31.8	12	<1%	36.2	14	<1%	33.4	13	<1%	52.3	21	<1%	53.2	22	<1%
Black/African-American	677.6	2,519	56%	701.1	2,602	57%	736.8	2,733	57%	757.2	2,800	57%	776.9	2,861	57%
Hispanic/Latinx	712.4	482	11%	706.4	493	11%	731.9	523	11%	747.4	553	11%	762.4	585	12%
White	167.5	1,270	28%	167.0	1,255	27%	174.9	1,299	27%	179.2	1,324	27%	184.2	1,347	27%
Multi-Race	846.9	190	4%	853.4	195	4%	881.3	206	4%	855.1	203	4%	872.2	213	4%
Unknown	*	26	1%	*	26	1%	*	26	1%	*	26	1%	*	26	1%
Race/Ethnicity^b and Sex at birth															
American Indian/Alaska Native Males	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	2	<1%
American Indian/Alaska Native Females	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%
Asian/Pacific Islander Males	54.1	10	<1%	58.8	11	<1%	52.9	10	<1%	87.7	17	<1%	84.9	17	<1%
Asian/Pacific Islander Females	*	2	<1%	*	3	<1%	*	3	<1%	*	4	<1%	23.4	5	<1%
Black/African-American Males	1,108.6	1,870	42%	1,162.7	1,957	43%	1,225.9	2,066	43%	1,263.3	2,125	43%	1,303.4	2,183	43%
Black/African-American Females	319.6	649	14%	318.1	645	14%	329.6	667	14%	334.9	675	14%	337.7	678	13%
Hispanic/Latino Males	1,005.5	337	7%	1,005.7	347	8%	1,049.2	372	8%	1,072.1	394	8%	1,097.3	419	8%
Hispanic/Latina Females	424.7	145	3%	413.7	146	3%	419.4	151	3%	427.0	159	3%	430.6	166	3%
White Males	309.3	1,136	25%	307.0	1,118	24%	322.5	1,162	24%	328.5	1,179	24%	339.0	1,203	24%
White Females	34.3	134	3%	35.4	137	3%	35.8	137	3%	38.2	145	3%	38.3	144	3%
Multi-Race Males	1,398.8	153	3%	1,411.5	157	3%	1,445.7	164	3%	1,413.7	163	3%	1,434.0	171	3%
Multi-Race Females	321.9	37	1%	324.1	38	1%	349.1	42	1%	327.6	40	1%	336.1	42	1%
Unknown	*	26	1%	*	26	1%	*	26	1%	*	26	1%	*	26	1%
Total	357.3	4,501		365.2	4,587		384.4	4,802		394.8	4,929		406.6	5,057	

Notes:

Living with diagnosed HIV infection by year (2014-2018) represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31 of the corresponding year. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31 of the corresponding year, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-Race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported persons living with diagnosed HIV infection by year of diagnosis and transmission category, Cuyahoga County, 2014-2018

Transmission Category ^a	Living with Diagnosed HIV Infection									
	2014		2015		2016		2017		2018	
	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent										
Male-to-male sexual contact	2,418	69%	2,465	69%	2,619	69%	2,677	69%	2,763	69%
Injection drug use (IDU)	169	5%	168	5%	164	4%	171	4%	170	4%
Male-to-male sexual contact and IDU	191	5%	188	5%	200	5%	211	5%	207	5%
Heterosexual contact	241	7%	249	7%	257	7%	257	7%	261	7%
Other/unknown	482	14%	515	14%	530	14%	560	14%	590	15%
Subtotal	3,501	100%	3,585	100%	3,770	100%	3,876	100%	3,991	100%
Female adult or adolescent										
Injection drug use	139	15%	140	15%	138	14%	141	14%	140	14%
Heterosexual contact	730	77%	731	77%	762	78%	779	78%	792	78%
Other/unknown	80	8%	79	8%	81	8%	82	8%	80	8%
Subtotal	949	100%	950	100%	981	100%	1,002	100%	1,012	100%
Child (<13 yrs at diagnosis)										
Perinatal	45	88%	46	88%	46	90%	45	88%	48	89%
Other/unknown	6	12%	6	12%	5	10%	6	12%	6	11%
Subtotal	51	100%	52	100%	51	100%	51	100%	54	100%
Total	4,501		4,587		4,802		4,929		5,057	

Trends in reported persons living with diagnosed HIV infection by year of diagnosis and exposure category, Cuyahoga County, 2014-2018

Exposure Category ^p	Living with Diagnosed HIV Infection									
	2014		2015		2016		2017		2018	
	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	2,267	50%	2,322	51%	2,478	52%	2,536	51%	2,619	52%
Injection drug use (IDU) only	132	3%	138	3%	139	3%	139	3%	135	3%
Heterosexual contact only	973	22%	982	21%	1,021	21%	1,038	21%	1,055	21%
Male-to-male sexual contact & IDU	143	3%	140	3%	150	3%	161	3%	157	3%
IDU & Heterosexual contact	176	4%	170	4%	163	3%	173	4%	175	3%
Male-to-male sexual contact & Heterosexual contact	151	3%	143	3%	141	3%	141	3%	144	3%
Male-to-male sexual contact & IDU & Heterosexual contact	48	1%	48	1%	50	1%	50	1%	50	1%
Perinatal exposure	47	1%	50	1%	50	1%	48	1%	51	1%
Other/unknown	564	13%	594	13%	610	13%	643	13%	671	13%
Total	4,501		4,587		4,802		4,929		5,057	

Notes:

Living with diagnosed HIV infection by year (2014-2018) represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31 of the corresponding year. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31 of the corresponding year, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

New Diagnoses of HIV Infection Reported in Lorain and Medina Counties

As of June 30, 2019

Reported new diagnoses of HIV infection in 2018 by disease status and selected characteristics, Lorain and Medina Counties

Characteristic	2018 diagnosis of HIV infection			Disease Status					
	Rate ^a	No.	%	HIV (not AIDS)		HIV & later AIDS		AIDS	
				No.	%	No.	%	No.	%
Sex at birth									
Males	5.8	14	74%	9	75%	2	50%	3	100%
Females	2.0	5	26%	3	25%	2	50%	-	-
Age at diagnosis (yr)									
<13	*	-	-	-	-	-	-	-	-
13-14	*	-	-	-	-	-	-	-	-
15-19	*	2	11%	2	17%	-	-	-	-
20-24	17.8	5	26%	5	42%	-	-	-	-
25-29	*	2	11%	2	17%	-	-	-	-
30-34	*	3	16%	1	8%	1	25%	1	33%
35-39	*	1	5%	-	-	-	-	1	33%
40-44	*	1	5%	-	-	1	25%	-	-
45-49	*	2	11%	1	8%	1	25%	-	-
50-54	*	1	5%	-	-	1	25%	-	-
55-64	*	2	11%	1	8%	-	-	1	33%
65+	*	-	-	-	-	-	-	-	-
Race/Ethnicity^b									
American Indian/Alaska Native	*	-	-	-	-	-	-	-	-
Asian/Pacific Islander	*	-	-	-	-	-	-	-	-
Black/African-American	22.4	6	32%	4	33%	2	50%	-	-
Hispanic/Latinx	*	2	11%	1	8%	-	-	1	33%
White	2.7	11	58%	7	58%	2	50%	2	67%
Multi-Race	*	-	-	-	-	-	-	-	-
Race/Ethnicity^b and Sex at birth									
American Indian/Alaska Native Males	*	-	-	-	-	-	-	-	-
American Indian/Alaska Native Females	*	-	-	-	-	-	-	-	-
Asian/Pacific Islander Males	*	-	-	-	-	-	-	-	-
Asian/Pacific Islander Females	*	-	-	-	-	-	-	-	-
Black/African-American Males	*	4	21%	3	25%	1	25%	-	-
Black/African-American Females	*	2	11%	1	8%	1	25%	-	-
Hispanic/Latino Males	*	2	11%	1	8%	-	-	1	33%
Hispanic/Latina Females	*	-	-	-	-	-	-	-	-
White Males	4.0	8	42%	5	42%	1	25%	2	67%
White Females	*	3	16%	2	17%	1	25%	-	-
Multi-Race Males	*	-	-	-	-	-	-	-	-
Multi-Race Females	*	-	-	-	-	-	-	-	-
Total	3.9	19		12		4		3	

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^aThe rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using 2018 U.S. Census estimates.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported new diagnoses of HIV infection in 2018 by disease status and transmission category, Lorain and Medina Counties

Transmission Category ^a	2018 diagnosis of HIV infection		Disease Status					
			HIV (not AIDS)		HIV & later AIDS		AIDS	
	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent								
Male-to-male sexual contact	6	43%	5	56%	1	50%	-	-
Injection drug use (IDU)	-	-	-	-	-	-	-	-
Male-to-male sexual contact and IDU	1	7%	1	11%	-	-	-	-
Heterosexual contact	2	14%	1	11%	1	50%	-	-
Other/unknown	5	36%	2	22%	-	-	3	100%
Subtotal	14	100%	9	100%	2	100%	3	100%
Female adult or adolescent								
Injection drug use	-	-	-	-	-	-	-	-
Heterosexual contact	3	60%	3	100%	-	-	-	-
Other/unknown	2	40%	-	-	2	100%	-	-
Subtotal	5	100%	3	100%	2	100%	-	-
Child (<13 yrs at diagnosis)								
Perinatal	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-
Total	19		12		4		3	

Reported new diagnoses of HIV infection in 2018 by disease status and exposure category, Lorain and Medina Counties

Exposure Category ^b	2018 diagnosis of HIV infection		Disease Status					
			HIV (not AIDS)		HIV & later AIDS		AIDS	
	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	6	32%	5	42%	1	25%	-	-
Injection drug use (IDU) only	-	-	-	-	-	-	-	-
Heterosexual contact only	5	26%	4	33%	1	25%	-	-
Male-to-male sexual contact & IDU	-	-	-	-	-	-	-	-
IDU & Heterosexual contact	-	-	-	-	-	-	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	1	5%	1	8%	-	-	-	-
Perinatal exposure	-	-	-	-	-	-	-	-
Other/unknown	7	37%	2	17%	2	50%	3	100%
Total	19		12		4		3	

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported new diagnoses of HIV infection in 2018 by race/ethnicity and age at diagnosis, Lorain and Medina Counties

2018 diagnosis of HIV infection

Age at diagnosis (yr)	American Indian/Alaska Native			Asian/Pacific Islander			Black/African-American			Hispanic/ Latinx ^a			White			Multi-Race		
	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%
<13	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
13-14	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
15-19	*	-	-	*	-	-	*	1	17%	*	-	-	*	1	9%	*	-	-
20-24	*	-	-	*	-	-	*	1	17%	*	1	50%	*	3	27%	*	-	-
25-29	*	-	-	*	-	-	*	1	17%	*	-	-	*	1	9%	*	-	-
30-34	*	-	-	*	-	-	*	-	-	*	-	-	*	3	27%	*	-	-
35-39	*	-	-	*	-	-	*	-	-	*	1	50%	*	-	-	*	-	-
40-44	*	-	-	*	-	-	*	1	17%	*	-	-	*	-	-	*	-	-
45-49	*	-	-	*	-	-	*	1	17%	*	-	-	*	1	9%	*	-	-
50-54	*	-	-	*	-	-	*	-	-	*	-	-	*	1	9%	*	-	-
55-64	*	-	-	*	-	-	*	1	17%	*	-	-	*	1	9%	*	-	-
65+	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
Total	*	-	-	*	-	-	22.4	6		*	2		2.7	11		*	-	-

Reported new diagnoses of HIV infection in 2018 by race/ethnicity and transmission category, Lorain and Medina Counties

2018 diagnosis of HIV infection

Transmission Category ^c	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent												
Male-to-male sexual contact	-	-	-	-	2	50%	1	50%	3	38%	-	-
Injection drug use (IDU)	-	-	-	-	-	-	-	-	-	-	-	-
Male-to-male sexual contact and IDU	-	-	-	-	-	-	-	-	1	13%	-	-
Heterosexual contact	-	-	-	-	-	-	-	-	2	25%	-	-
Other/unknown	-	-	-	-	2	50%	1	50%	2	25%	-	-
Subtotal	-	-	-	-	4	100%	2	100%	8	100%	-	-
Female adult or adolescent												
Injection drug use	-	-	-	-	-	-	-	-	-	-	-	-
Heterosexual contact	-	-	-	-	1	50%	-	-	2	67%	-	-
Other/unknown	-	-	-	-	1	50%	-	-	1	33%	-	-
Subtotal	-	-	-	-	2	100%	-	-	3	100%	-	-
Child (<13 yrs at diagnosis)												
Perinatal	-	-	-	-	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-	-	-	-	-
Total	-	-	-	-	6		2		11		-	-

Reported new diagnoses of HIV infection in 2018 by race/ethnicity and exposure category, Lorain and Medina Counties

2018 diagnosis of HIV infection

Exposure Category ^d	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	-	-	-	-	2	33%	1	50%	3	27%	-	-
Injection drug use (IDU) only	-	-	-	-	-	-	-	-	-	-	-	-
Heterosexual contact only	-	-	-	-	1	17%	-	-	4	36%	-	-
Male-to-male sexual contact & IDU	-	-	-	-	-	-	-	-	-	-	-	-
IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-	1	9%	-	-
Perinatal exposure	-	-	-	-	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	3	50%	1	50%	3	27%	-	-
Total	-	-	-	-	6		2		11		-	-

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis.

Asterisk (*) indicates rate not calculated because census data unavailable or for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

^b The rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using 2018 U.S. Census estimates.

^c Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^d Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported new diagnoses of HIV infection by year of diagnosis (2014-2018) and cumulative diagnoses by selected characteristics, Lorain and Medina Counties

Characteristic	Diagnosis of HIV Infection by Year															Cumulative Diagnoses	
	2014			2015			2016			2017			2018			No.	%
	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%		
Sex at birth																	
Males	3.4	8	73%	4.6	11	79%	4.2	10	83%	10.8	26	93%	5.8	14	74%	493	79%
Females	*	3	27%	*	3	21%	*	2	17%	*	2	7%	2.0	5	26%	134	21%
Age at diagnosis (yr)																	
<13	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	8	1%
13-14	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	1	<1%
15-19	*	1	9%	*	-	-	*	-	-	*	-	-	*	2	11%	16	3%
20-24	*	2	18%	*	1	7%	*	4	33%	21.2	6	21%	17.8	5	26%	92	15%
25-29	*	2	18%	*	1	7%	*	3	25%	41.5	11	39%	*	2	11%	107	17%
30-34	*	1	9%	*	3	21%	*	-	-	*	4	14%	*	3	16%	98	16%
35-39	*	3	27%	*	1	7%	*	2	17%	*	1	4%	*	1	5%	108	17%
40-44	*	2	18%	*	1	7%	*	1	8%	*	-	-	*	1	5%	72	11%
45-49	*	-	-	*	2	14%	*	-	-	*	-	-	*	2	11%	54	9%
50-54	*	-	-	*	3	21%	*	2	17%	*	3	11%	*	1	5%	39	6%
55-64	*	-	-	*	1	7%	*	-	-	*	3	11%	*	2	11%	27	4%
65+	*	-	-	*	1	7%	*	-	-	*	-	-	*	-	-	5	1%
Race/Ethnicity^b																	
American Indian/Alaska Native	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	-	-
Asian/Pacific Islander	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	3	<1%
Black/African-American	*	2	18%	18.8	5	36%	*	3	25%	18.8	5	18%	22.4	6	32%	125	20%
Hispanic/Latinx	19.1	6	55%	*	2	14%	*	-	-	*	4	14%	*	2	11%	128	20%
White	*	3	27%	1.7	7	50%	2.2	9	75%	4.2	17	61%	2.7	11	58%	361	58%
Multi-Race	*	-	-	*	-	-	*	-	-	*	2	7%	*	-	-	8	1%
Unknown	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	2	<1%
Race/Ethnicity^b and Sex at birth																	
American Indian/Alaska Native Males	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	-	-
American Indian/Alaska Native Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	-	-
Asian/Pacific Islander Males	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	2	<1%
Asian/Pacific Islander Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	1	<1%
Black/African-American Males	*	1	9%	*	4	29%	*	2	17%	35.6	5	18%	*	4	21%	93	15%
Black/African-American Females	*	1	9%	*	1	7%	*	1	8%	*	-	-	*	2	11%	32	5%
Hispanic/Latino Males	*	4	36%	*	1	7%	*	-	-	*	4	14%	*	2	11%	82	13%
Hispanic/Latina Females	*	2	18%	*	1	7%	*	-	-	*	-	-	*	-	-	46	7%
White Males	*	3	27%	3.0	6	43%	4.0	8	67%	7.5	15	54%	4.0	8	42%	308	49%
White Females	*	-	-	*	1	7%	*	1	8%	*	2	7%	*	3	16%	53	8%
Multi-Race Males	*	-	-	*	-	-	*	-	-	*	2	7%	*	-	-	6	1%
Multi-Race Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	2	<1%
Unknown	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	2	<1%
Total	2.3	11		2.9	14		2.5	12		5.8	28		3.9	19		627	

Notes:
 Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis. Diagnoses of HIV infection by year (2014-2018) represent all reported cases diagnosed in each year; cumulative diagnoses represent all reported HIV and/or AIDS cases diagnosed since the beginning of the epidemic through 2018.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a The rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported new diagnoses of HIV infection by year of diagnosis (2014-2018) and cumulative diagnoses by transmission category, Lorain and Medina Counties

Transmission Category ^a	Diagnosis of HIV Infection by Year											
	2014		2015		2016		2017		2018		Cumulative Diagnoses	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent												
Male-to-male sexual contact	4	50%	5	45%	5	50%	17	65%	6	43%	294	60%
Injection drug use (IDU)	-	-	-	-	2	20%	1	4%	-	-	44	9%
Male-to-male sexual contact and IDU	-	-	-	-	1	10%	-	-	1	7%	27	6%
Heterosexual contact	1	13%	1	9%	-	-	-	-	2	14%	29	6%
Other/unknown	3	38%	5	45%	2	20%	8	31%	5	36%	95	19%
Subtotal	8	100%	11	100%	10	100%	26	100%	14	100%	489	100%
Female adult or adolescent												
Injection drug use	-	-	-	-	-	-	-	-	-	-	15	12%
Heterosexual contact	3	100%	3	100%	2	100%	2	100%	3	60%	100	77%
Other/unknown	-	-	-	-	-	-	-	-	2	40%	15	12%
Subtotal	3	100%	3	100%	2	100%	2	100%	5	100%	130	100%
Child (<13 yrs at diagnosis)												
Perinatal	-	-	-	-	-	-	-	-	-	-	5	63%
Other/unknown	-	-	-	-	-	-	-	-	-	-	3	38%
Subtotal	-	-	-	-	-	-	-	-	-	-	8	100%
Total	11		14		12		28		19		627	

Trends in reported diagnoses of HIV infection by year of diagnosis (2014-2018) and cumulative diagnoses by exposure category, Lorain and Medina Counties

Exposure Category ^b	Diagnosis of HIV Infection by Year											
	2014		2015		2016		2017		2018		Cumulative Diagnoses	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	4	36%	5	36%	5	42%	17	61%	6	32%	285	45%
Injection drug use (IDU) only	-	-	-	-	2	17%	1	4%	-	-	38	6%
Heterosexual contact only	4	36%	4	29%	2	17%	2	7%	5	26%	130	21%
Male-to-male sexual contact & IDU	-	-	-	-	1	8%	-	-	-	-	23	4%
IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	21	3%
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	9	1%
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-	1	5%	4	1%
Perinatal exposure	-	-	-	-	-	-	-	-	-	-	5	1%
Other/unknown	3	27%	5	36%	2	17%	8	29%	7	37%	112	18%
Total	11		14		12		28		19		627	

Notes:
 Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis. Diagnoses of HIV infection by year (2014-2018) represent all reported cases diagnosed in each year; cumulative diagnoses represent all reported HIV and/or AIDS cases diagnosed since the beginning of the epidemic through 2018.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported diagnoses of AIDS in 2018 by time to AIDS diagnosis and selected characteristics, Lorain and Medina Counties

Characteristic	AIDS Diagnoses					
	2018 AIDS diagnosis		≥12 Months after HIV Diagnosis		<12 Months after HIV Diagnosis ^a	
	No.	%	No.	%	No.	%
Sex at birth						
Males	7	70%	1	50%	6	75%
Females	3	30%	1	50%	2	25%
Age at AIDS diagnosis (yr)						
<13	-	-	-	-	-	-
13-14	-	-	-	-	-	-
15-19	-	-	-	-	-	-
20-24	-	-	-	-	-	-
25-29	1	10%	-	-	1	13%
30-34	2	20%	-	-	2	25%
35-39	1	10%	-	-	1	13%
40-44	2	20%	1	50%	1	13%
45-49	1	10%	-	-	1	13%
50-54	1	10%	-	-	1	13%
55-64	2	20%	1	50%	1	13%
65+	-	-	-	-	-	-
Race/Ethnicity^b						
American Indian/Alaska Native	-	-	-	-	-	-
Asian/Pacific Islander	-	-	-	-	-	-
Black/African-American	2	20%	-	-	2	25%
Hispanic/Latinx	2	20%	1	50%	1	13%
White	6	60%	1	50%	5	63%
Multi-Race	-	-	-	-	-	-
Race/Ethnicity^b and Sex at birth						
American Indian/Alaska Native Males	-	-	-	-	-	-
American Indian/Alaska Native Females	-	-	-	-	-	-
Asian/Pacific Islander Males	-	-	-	-	-	-
Asian/Pacific Islander Females	-	-	-	-	-	-
Black/African-American Males	1	10%	-	-	1	13%
Black/African-American Females	1	10%	-	-	1	13%
Hispanic/Latino Males	2	20%	1	50%	1	13%
Hispanic/Latina Females	-	-	-	-	-	-
White Males	4	40%	-	-	4	50%
White Females	2	20%	1	50%	1	13%
Multi-Race Males	-	-	-	-	-	-
Multi-Race Females	-	-	-	-	-	-
Total	10		2		8	

Notes:

Data reflects all persons with an AIDS diagnosis in 2018 regardless of year of HIV infection diagnosis, and who were living in Ohio at the time of initial diagnosis.

^a Includes persons whose diagnoses of HIV infection and AIDS were made at the same time.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Dash (-) indicates no cases were reported for the given category.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported diagnoses of AIDS in 2018 by time to AIDS diagnosis and transmission category, Lorain and Medina Counties

Transmission Category ^b	AIDS Diagnoses					
	2018 AIDS diagnosis		≥12 Months after HIV Diagnosis		<12 Months after HIV Diagnosis ^a	
	No.	%	No.	%	No.	%
Male adult or adolescent						
Male-to-male sexual contact	2	29%	-	-	2	33%
Injection drug use (IDU)	-	-	-	-	-	-
Male-to-male sexual contact and IDU	1	14%	1	100%	-	-
Heterosexual contact	1	14%	-	-	1	17%
Other/unknown	3	43%	-	-	3	50%
Subtotal	7	100%	1	100%	6	100%
Female adult or adolescent						
Injection drug use	-	-	-	-	-	-
Heterosexual contact	1	33%	1	100%	-	-
Other/unknown	2	67%	-	-	2	100%
Subtotal	3	100%	1	100%	2	100%
Child (<13 yrs at diagnosis)						
Perinatal	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-
Total	10		2		8	

Reported diagnoses of AIDS in 2018 by time to AIDS diagnosis and exposure category, Lorain and Medina Counties

Exposure Category ^c	AIDS Diagnoses					
	2018 AIDS diagnosis		≥12 Months after HIV Diagnosis		<12 Months after HIV Diagnosis ^a	
	No.	%	No.	%	No.	%
Male-to-male sexual contact only	2	20%	-	-	2	25%
Injection drug use (IDU) only	-	-	-	-	-	-
Heterosexual contact only	2	20%	1	50%	1	13%
Male-to-male sexual contact & IDU	1	10%	1	50%	-	-
IDU & Heterosexual contact	-	-	-	-	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-
Perinatal exposure	-	-	-	-	-	-
Other/unknown	5	50%	-	-	5	63%
Total	10		2		8	

Notes:

Data reflects all persons with an AIDS diagnosis in 2018 regardless of year of HIV infection diagnosis, and who were living in Ohio at the time of initial diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Includes persons whose diagnoses of HIV infection and AIDS were made at the same time.

^b Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^c Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported diagnoses of AIDS by year of diagnosis (2014-2018) and cumulative AIDS diagnoses by selected characteristics, Lorain and Medina Counties

Characteristic	Year of AIDS Diagnosis										Cumulative AIDS	
	2014		2015		2016		2017		2018		No.	%
	No.	%	No.	%	No.	%	No.	%	No.	%		
Sex at birth												
Males	5	83%	6	60%	4	80%	11	100%	7	70%	313	79%
Females	1	17%	4	40%	1	20%	-	-	3	30%	82	21%
Age at AIDS diagnosis (yr)												
<13	-	-	-	-	-	-	-	-	-	-	5	1%
13-14	-	-	-	-	-	-	-	-	-	-	-	-
15-19	-	-	-	-	-	-	-	-	-	-	5	1%
20-24	-	-	-	-	1	20%	2	18%	-	-	29	7%
25-29	1	17%	1	10%	1	20%	3	27%	1	10%	44	11%
30-34	1	17%	1	10%	-	-	2	18%	2	20%	68	17%
35-39	-	-	-	-	-	-	-	-	1	10%	72	18%
40-44	1	17%	3	30%	-	-	-	-	2	20%	60	15%
45-49	2	33%	-	-	-	-	1	9%	1	10%	49	12%
50-54	-	-	3	30%	2	40%	1	9%	1	10%	31	8%
55-64	1	17%	2	20%	-	-	2	18%	2	20%	29	7%
65+	-	-	-	-	1	20%	-	-	-	-	3	1%
Race/Ethnicity^a												
American Indian/Alaska Native	-	-	-	-	-	-	-	-	-	-	-	-
Asian/Pacific Islander	-	-	-	-	-	-	-	-	-	-	3	1%
Black/African-American	3	50%	2	20%	1	20%	1	9%	2	20%	77	19%
Hispanic/Latinx	2	33%	3	30%	1	20%	5	45%	2	20%	80	20%
White	1	17%	5	50%	3	60%	4	36%	6	60%	229	58%
Multi-Race	-	-	-	-	-	-	1	9%	-	-	6	2%
Race/Ethnicity^a and Sex at birth												
American Indian/Alaska Native Males	-	-	-	-	-	-	-	-	-	-	-	-
American Indian/Alaska Native Females	-	-	-	-	-	-	-	-	-	-	-	-
Asian/Pacific Islander Males	-	-	-	-	-	-	-	-	-	-	2	1%
Asian/Pacific Islander Females	-	-	-	-	-	-	-	-	-	-	1	<1%
Black/African-American Males	2	33%	1	10%	1	20%	1	9%	1	10%	59	15%
Black/African-American Females	1	17%	1	10%	-	-	-	-	1	10%	18	5%
Hispanic/Latino Males	2	33%	1	10%	1	20%	5	45%	2	20%	50	13%
Hispanic/Latina Females	-	-	2	20%	-	-	-	-	-	-	30	8%
White Males	1	17%	4	40%	2	40%	4	36%	4	40%	199	50%
White Females	-	-	1	10%	1	20%	-	-	2	20%	30	8%
Multi-Race Males	-	-	-	-	-	-	1	9%	-	-	3	1%
Multi-Race Females	-	-	-	-	-	-	-	-	-	-	3	1%
Total	6		10		5		11		10		395	

Notes:

AIDS diagnoses by year (2014-2018) represent all reported AIDS cases diagnosed in each year regardless of year of HIV infection diagnosis, and who were living in Ohio at the time of initial diagnosis; cumulative AIDS cases represent all reported AIDS cases diagnosed since the beginning of the epidemic through 2018.

Dash (-) indicates no cases were reported for the given category.

^a Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported diagnoses of AIDS by year of diagnosis (2014-2018) and cumulative AIDS diagnoses by transmission category, Lorain and Medina Counties

Transmission Category ^a	Year of AIDS Diagnosis											
	2014		2015		2016		2017		2018		Cumulative AIDS	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent												
Male-to-male sexual contact	2	40%	3	50%	3	75%	6	55%	2	29%	190	61%
Injection drug use (IDU)	1	20%	-	-	-	-	1	9%	-	-	28	9%
Male-to-male sexual contact and IDU	-	-	1	17%	-	-	-	-	1	14%	17	5%
Heterosexual contact	1	20%	1	17%	-	-	-	-	1	14%	24	8%
Other/unknown	1	20%	1	17%	1	25%	4	36%	3	43%	51	16%
Subtotal	5	100%	6	100%	4	100%	11	100%	7	100%	310	100%
Female adult or adolescent												
Injection drug use	-	-	-	-	-	-	-	-	-	-	11	14%
Heterosexual contact	-	-	4	100%	1	100%	-	-	1	33%	59	74%
Other/unknown	1	100%	-	-	-	-	-	-	2	67%	10	13%
Subtotal	1	100%	4	100%	1	100%	-	-	3	100%	80	100%
Child (<13 yrs at diagnosis)												
Perinatal	-	-	-	-	-	-	-	-	-	-	3	60%
Other/unknown	-	-	-	-	-	-	-	-	-	-	2	40%
Subtotal	-	-	-	-	-	-	-	-	-	-	5	100%
Total	6		10		5		11		10		395	

Trends in reported diagnoses of AIDS by year of diagnosis (2014-2018) and cumulative AIDS diagnoses by exposure category, Lorain and Medina Counties

Exposure Category ^b	Year of AIDS Diagnosis											
	2014		2015		2016		2017		2018		Cumulative AIDS	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	2	33%	3	30%	3	60%	6	55%	2	20%	184	47%
Injection drug use (IDU) only	1	17%	-	-	-	-	1	9%	-	-	27	7%
Heterosexual contact only	1	17%	5	50%	1	20%	-	-	2	20%	83	21%
Male-to-male sexual contact & IDU	-	-	1	10%	-	-	-	-	1	10%	13	3%
IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	12	3%
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	6	2%
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	4	1%
Perinatal exposure	-	-	-	-	-	-	-	-	-	-	3	1%
Other/unknown	2	33%	1	10%	1	20%	4	36%	5	50%	63	16%
Total	6		10		5		11		10		395	

Notes:

AIDS diagnoses by year (2014-2018) represent all reported AIDS cases diagnosed in each year regardless of year of HIV infection diagnosis, and who were living in Ohio at the time of initial diagnosis; cumulative AIDS cases represent all reported AIDS cases diagnosed since the beginning of the epidemic through 2018.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Persons Living with Diagnosed HIV Infection Reported in Lorain and Medina Counties

As of June 30, 2019

Reported persons living with diagnosed HIV infection in 2018 by current disease status and selected characteristics, Lorain and Medina Counties

Characteristic	Living with diagnosed HIV infection in			Current Disease Status			
	2018			HIV (not AIDS)		AIDS	
	Rate ^a	No.	%	No.	%	No.	%
Sex at birth							
Males	144.0	347	76%	179	76%	168	75%
Females	44.8	111	24%	55	24%	56	25%
Age at end of year							
<13	*	1	<1%	1	<1%	-	-
13-14	*	-	-	-	-	-	-
15-19	*	4	1%	2	1%	2	1%
20-24	53.3	15	3%	11	5%	4	2%
25-29	146.8	40	9%	34	15%	6	3%
30-34	135.9	37	8%	22	9%	15	7%
35-39	130.4	39	9%	23	10%	16	7%
40-44	125.9	37	8%	23	10%	14	6%
45-49	190.7	63	14%	23	10%	40	18%
50-54	229.6	79	17%	37	16%	42	19%
55-64	156.0	110	24%	44	19%	66	29%
65+	37.2	33	7%	14	6%	19	8%
Race/Ethnicity^b							
American Indian/Alaska Native	*	-	-	-	-	-	-
Asian/Pacific Islander	*	2	<1%	1	<1%	1	<1%
Black/African-American	357.8	96	21%	44	19%	52	23%
Hispanic/Latinx	284.8	101	22%	45	19%	56	25%
White	61.1	250	55%	140	60%	110	49%
Multi-Race	80.8	8	2%	3	1%	5	2%
Unknown	*	1	<1%	1	<1%	-	-
Race/Ethnicity^b and Sex at birth							
American Indian/Alaska Native Males	*	-	-	-	-	-	-
American Indian/Alaska Native Females	*	-	-	-	-	-	-
Asian/Pacific Islander Males	*	2	<1%	1	<1%	1	<1%
Asian/Pacific Islander Females	*	-	-	-	-	-	-
Black/African-American Males	488.9	69	15%	32	14%	37	17%
Black/African-American Females	212.3	27	6%	12	5%	15	7%
Hispanic/Latino Males	382.3	68	15%	31	13%	37	17%
Hispanic/Latina Females	186.7	33	7%	14	6%	19	8%
White Males	100.1	201	44%	111	47%	90	40%
White Females	23.5	49	11%	29	12%	20	9%
Multi-Race Males	121.9	6	1%	3	1%	3	1%
Multi-Race Females	*	2	<1%	-	-	2	1%
Unknown	*	1	<1%	1	<1%	-	-
Total	93.7	458		234		224	

Notes:

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported persons living with diagnosed HIV infection in 2018 by current disease status and transmission category, Lorain and Medina Counties

Transmission Category ^a	Living with diagnosed HIV infection in		Current Disease Status			
	2018		HIV (not AIDS)		AIDS	
	No.	%	No.	%	No.	%
Male adult or adolescent						
Male-to-male sexual contact	217	63%	116	65%	101	60%
Injection drug use (IDU)	23	7%	11	6%	12	7%
Male-to-male sexual contact and IDU	13	4%	4	2%	9	5%
Heterosexual contact	26	8%	8	4%	18	11%
Other/unknown	66	19%	39	22%	27	16%
Subtotal	345	100%	178	100%	167	100%
Female adult or adolescent						
Injection drug use	11	10%	5	9%	6	11%
Heterosexual contact	90	83%	45	83%	45	83%
Other/unknown	7	6%	4	7%	3	6%
Subtotal	108	100%	54	100%	54	100%
Child (<13 yrs at diagnosis)						
Perinatal	5	100%	2	100%	3	100%
Other/unknown	-	-	-	-	-	-
Subtotal	5	100%	2	100%	3	100%
Total	458		234		224	

Reported persons living with diagnosed HIV infection in 2018 by current disease status and exposure category, Lorain and Medina Counties

Exposure Category ^b	Living with diagnosed HIV infection in		Current Disease Status			
	2018		HIV (not AIDS)		AIDS	
	No.	%	No.	%	No.	%
Male-to-male sexual contact only	212	46%	114	49%	98	44%
Injection drug use (IDU) only	20	4%	11	5%	9	4%
Heterosexual contact only	116	25%	53	23%	63	28%
Male-to-male sexual contact & IDU	8	2%	3	1%	5	2%
IDU & Heterosexual contact	14	3%	5	2%	9	4%
Male-to-male sexual contact & Heterosexual contact	5	1%	2	1%	3	1%
Male-to-male sexual contact & IDU & Heterosexual contact	5	1%	1	<1%	4	2%
Perinatal exposure	5	1%	2	1%	3	1%
Other/unknown	73	16%	43	18%	30	13%
Total	458		234		224	

Notes:

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported persons living with diagnosed HIV infection in 2018 by race/ethnicity and age, Lorain and Medina Counties

Living with diagnosed HIV infection in 2018

Age at end of year	American Indian/Alaska Native			Asian/Pacific Islander			Black/African-American			Hispanic/ Latinx ^a			White			Multi-Race			Unknown	
	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	No.	%
<13	*	-	-	*	-	-	*	1	1%	*	-	-	*	-	-	*	-	-	-	-
13-14	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	-	-
15-19	*	-	-	*	-	-	*	3	3%	*	-	-	*	1	<1%	*	-	-	-	-
20-24	*	-	-	*	-	-	*	3	3%	*	3	3%	37.7	8	3%	*	1	13%	-	-
25-29	*	-	-	*	1	50%	538.4	12	13%	270.1	7	7%	84.7	18	7%	*	2	25%	-	-
30-34	*	-	-	*	-	-	832.4	15	16%	240.7	6	6%	73.1	16	6%	*	-	-	-	-
35-39	*	-	-	*	-	-	456.1	8	8%	354.3	9	9%	89.4	22	9%	*	-	-	-	-
40-44	*	-	-	*	-	-	320.9	5	5%	470.1	10	10%	84.5	21	8%	*	1	13%	-	-
45-49	*	-	-	*	-	-	638.8	11	11%	625.0	12	12%	140.2	40	16%	*	-	-	-	-
50-54	*	-	-	*	1	50%	624.6	10	10%	1,094.2	18	18%	164.0	50	20%	*	-	-	-	-
55-64	*	-	-	*	-	-	718.8	23	24%	1,076.8	31	31%	80.8	51	20%	*	4	50%	1	100%
65+	*	-	-	*	-	-	157.1	5	5%	169.6	5	5%	28.3	23	9%	*	-	-	-	-
Total	*	-	-	*	2		357.8	96		284.8	101		61.1	250		80.8	8		1	

Reported persons living with diagnosed HIV infection in 2018 by race/ethnicity and transmission category, Lorain and Medina Counties

Living with diagnosed HIV infection in 2018

Transmission Category ^c	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race		Unknown	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent														
Male-to-male sexual contact	-	-	1	50%	39	58%	32	47%	141	70%	4	67%	-	-
Injection drug use (IDU)	-	-	-	-	5	7%	12	18%	6	3%	-	-	-	-
Male-to-male sexual contact and IDU	-	-	-	-	-	-	5	7%	8	4%	-	-	-	-
Heterosexual contact	-	-	-	-	11	16%	5	7%	10	5%	-	-	-	-
Other/unknown	-	-	1	50%	12	18%	14	21%	36	18%	2	33%	1	100%
Subtotal	-	-	2	100%	67	100%	68	100%	201	100%	6	100%	1	100%
Female adult or adolescent														
Injection drug use	-	-	-	-	-	-	5	15%	6	13%	-	-	-	-
Heterosexual contact	-	-	-	-	24	92%	26	79%	39	81%	1	100%	-	-
Other/unknown	-	-	-	-	2	8%	2	6%	3	6%	-	-	-	-
Subtotal	-	-	-	-	26	100%	33	100%	48	100%	1	100%	-	-
Child (<13 yrs at diagnosis)														
Perinatal	-	-	-	-	3	100%	-	-	1	100%	1	100%	-	-
Other/unknown	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	3	100%	-	-	1	100%	1	100%	-	-
Total	-	-	2		96		101		250		8		1	

Reported persons living with diagnosed HIV infection in 2018 by race/ethnicity and exposure category, Lorain and Medina Counties

Living with diagnosed HIV infection in 2018

Exposure Category ^d	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race		Unknown	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	-	-	1	50%	39	41%	31	31%	137	55%	4	50%	-	-
Injection drug use (IDU) only	-	-	-	-	4	4%	9	9%	7	3%	-	-	-	-
Heterosexual contact only	-	-	-	-	35	36%	31	31%	49	20%	1	13%	-	-
Male-to-male sexual contact & IDU	-	-	-	-	-	-	4	4%	4	2%	-	-	-	-
IDU & Heterosexual contact	-	-	-	-	1	1%	8	8%	5	2%	-	-	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	1	1%	4	2%	-	-	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	1	1%	4	2%	-	-	-	-
Perinatal exposure	-	-	-	-	3	3%	-	-	1	0%	1	13%	-	-
Other/unknown	-	-	1	50%	14	15%	16	16%	39	16%	2	25%	1	100%
Total	-	-	2		96		101		250		8		1	

Notes:
 Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.
 Asterisk (*) indicates rate not calculated because census data unavailable or for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.
^a Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.
^b The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.
^c Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.
^d Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.
 Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported persons living with diagnosed HIV infection by year of diagnosis and selected characteristics, Lorain and Medina Counties, 2014-2018

Living with Diagnosed HIV Infection

Characteristic	2014			2015			2016			2017			2018		
	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%
Sex at birth															
Males	126.2	299	74%	129.5	308	74%	134.0	320	75%	135.9	326	75%	144.0	347	76%
Females	43.1	105	26%	43.5	106	26%	43.7	107	25%	43.0	106	25%	44.8	111	24%
Age at end of year															
<13	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%
13-14	*	1	<1%	*	1	<1%	*	-	-	*	-	-	*	-	-
15-19	*	3	1%	*	4	1%	*	3	1%	*	2	<1%	*	4	1%
20-24	38.8	11	3%	27.9	8	2%	38.3	11	3%	31.7	9	2%	53.3	15	3%
25-29	105.3	26	6%	103.4	26	6%	89.6	23	5%	132.2	35	8%	146.8	40	9%
30-34	66.4	18	4%	92.4	25	6%	125.6	34	8%	114.5	31	7%	135.9	37	8%
35-39	163.9	47	12%	138.0	40	10%	119.5	35	8%	114.4	34	8%	130.4	39	9%
40-44	203.9	66	16%	198.1	62	15%	162.9	49	11%	135.6	40	9%	125.9	37	8%
45-49	186.1	64	16%	188.6	64	15%	207.0	70	16%	202.1	68	16%	190.7	63	14%
50-54	206.1	77	19%	231.3	85	21%	202.8	73	17%	227.2	80	19%	229.6	79	17%
55-64	103.6	70	17%	111.1	76	18%	148.5	103	24%	151.7	106	25%	156.0	110	24%
65+	26.0	20	5%	27.6	22	5%	30.3	25	6%	30.3	26	6%	37.2	33	7%
Race/Ethnicity^b															
American Indian/Alaska Native	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
Asian/Pacific Islander	*	2	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	2	<1%
Black/African-American	307.2	81	20%	304.5	81	20%	330.4	87	20%	319.9	85	20%	357.8	96	21%
Hispanic/Latinx	317.7	100	25%	301.7	98	24%	298.1	100	23%	292.9	101	23%	284.8	101	22%
White	52.3	213	53%	55.4	225	54%	56.9	232	54%	57.8	236	55%	61.1	250	55%
Multi-Race	77.2	7	2%	85.9	8	2%	63.4	6	1%	82.4	8	2%	80.8	8	2%
Unknown	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%
Race/Ethnicity^b and Sex at birth															
American Indian/Alaska Native Males	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
American Indian/Alaska Native Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
Asian/Pacific Islander Males	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	2	<1%
Asian/Pacific Islander Females	*	1	<1%	*	-	-	*	-	-	*	-	-	*	-	-
Black/African-American Males	406.5	57	14%	402.6	57	14%	442.4	62	15%	426.9	60	14%	488.9	69	15%
Black/African-American Females	194.3	24	6%	192.9	24	6%	203.0	25	6%	199.8	25	6%	212.3	27	6%
Hispanic/Latino Males	417.0	66	16%	404.2	66	16%	395.7	67	16%	393.1	68	16%	382.3	68	15%
Hispanic/Latina Females	217.3	34	8%	198.1	32	8%	198.6	33	8%	192.0	33	8%	186.7	33	7%
White Males	85.1	170	42%	89.6	179	43%	92.5	185	43%	94.8	190	44%	100.1	201	44%
White Females	20.8	43	11%	22.3	46	11%	22.7	47	11%	22.1	46	11%	23.5	49	11%
Multi-Race Males	*	4	1%	*	4	1%	*	4	1%	124.4	6	1%	121.9	6	1%
Multi-Race Females	*	3	1%	*	4	1%	*	2	<1%	*	2	<1%	*	2	<1%
Unknown	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%
Total	84.1	404		86.0	414		88.3	427		88.8	432		93.7	458	

Notes:

Living with diagnosed HIV infection by year (2014-2018) represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31 of the corresponding year. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31 of the corresponding year, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported persons living with diagnosed HIV infection by year of diagnosis and transmission category, Lorain and Medina Counties, 2014-2018

Transmission Category ^a	Living with Diagnosed HIV Infection									
	2014		2015		2016		2017		2018	
	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent										
Male-to-male sexual contact	180	61%	185	60%	189	59%	205	63%	217	63%
Injection drug use (IDU)	21	7%	22	7%	26	8%	24	7%	23	7%
Male-to-male sexual contact and IDU	18	6%	15	5%	16	5%	14	4%	13	4%
Heterosexual contact	24	8%	25	8%	24	8%	21	6%	26	8%
Other/unknown	54	18%	59	19%	63	20%	60	19%	66	19%
Subtotal	297	100%	306	100%	318	100%	324	100%	345	100%
Female adult or adolescent										
Injection drug use	10	10%	10	10%	10	10%	10	10%	11	10%
Heterosexual contact	85	83%	86	83%	87	84%	87	84%	90	83%
Other/unknown	7	7%	7	7%	7	7%	6	6%	7	6%
Subtotal	102	100%	103	100%	104	100%	103	100%	108	100%
Child (<13 yrs at diagnosis)										
Perinatal	5	100%	5	100%	5	100%	5	100%	5	100%
Other/unknown	-	-	-	-	-	-	-	-	-	-
Subtotal	5	100%	5	100%	5	100%	5	100%	5	100%
Total	404		414		427		432		458	

Trends in reported persons living with diagnosed HIV infection by year of diagnosis and exposure category, Lorain and Medina Counties, 2014-2018

Exposure Category ^b	Living with Diagnosed HIV Infection									
	2014		2015		2016		2017		2018	
	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	172	43%	178	43%	182	43%	199	46%	212	46%
Injection drug use (IDU) only	16	4%	16	4%	20	5%	19	4%	20	4%
Heterosexual contact only	109	27%	111	27%	111	26%	108	25%	116	25%
Male-to-male sexual contact & IDU	13	3%	11	3%	11	3%	9	2%	8	2%
IDU & Heterosexual contact	15	4%	16	4%	16	4%	15	3%	14	3%
Male-to-male sexual contact & Heterosexual contact	8	2%	7	2%	7	2%	6	1%	5	1%
Male-to-male sexual contact & IDU & Heterosexual contact	5	1%	4	1%	5	1%	5	1%	5	1%
Perinatal exposure	5	1%	5	1%	5	1%	5	1%	5	1%
Other/unknown	61	15%	66	16%	70	16%	66	15%	73	16%
Total	404		414		427		432		458	

Notes:

Living with diagnosed HIV infection by year (2014-2018) represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31 of the corresponding year. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31 of the corresponding year, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

New Diagnoses of HIV Infection Reported in Ashtabula, Geauga, and Lake Counties

Reported new diagnoses of HIV infection in 2018 by disease status and selected characteristics, Ashtabula, Geauga, and Lake Counties

Characteristic	2018 diagnosis of HIV infection			Disease Status					
	Rate ^a	No.	%	HIV (not AIDS)		HIV & later AIDS		AIDS	
				No.	%	No.	%	No.	%
Sex at birth									
Males	2.9	6	100%	3	100%	3	100%	-	-
Females	*	-	-	-	-	-	-	-	-
Age at diagnosis (yr)									
<13	*	-	-	-	-	-	-	-	-
13-14	*	-	-	-	-	-	-	-	-
15-19	*	-	-	-	-	-	-	-	-
20-24	*	1	17%	-	-	1	33%	-	-
25-29	*	-	-	-	-	-	-	-	-
30-34	*	1	17%	1	33%	-	-	-	-
35-39	*	2	33%	2	67%	-	-	-	-
40-44	*	-	-	-	-	-	-	-	-
45-49	*	-	-	-	-	-	-	-	-
50-54	*	1	17%	-	-	1	33%	-	-
55-64	*	1	17%	-	-	1	33%	-	-
65+	*	-	-	-	-	-	-	-	-
Race/Ethnicity^b									
American Indian/Alaska Native	*	-	-	-	-	-	-	-	-
Asian/Pacific Islander	*	-	-	-	-	-	-	-	-
Black/African-American	*	1	17%	-	-	1	33%	-	-
Hispanic/Latinx	*	-	-	-	-	-	-	-	-
White	1.3	5	83%	3	100%	2	67%	-	-
Multi-Race	*	-	-	-	-	-	-	-	-
Race/Ethnicity^b and Sex at birth									
American Indian/Alaska Native Males	*	-	-	-	-	-	-	-	-
American Indian/Alaska Native Females	*	-	-	-	-	-	-	-	-
Asian/Pacific Islander Males	*	-	-	-	-	-	-	-	-
Asian/Pacific Islander Females	*	-	-	-	-	-	-	-	-
Black/African-American Males	*	1	17%	-	-	1	33%	-	-
Black/African-American Females	*	-	-	-	-	-	-	-	-
Hispanic/Latino Males	*	-	-	-	-	-	-	-	-
Hispanic/Latina Females	*	-	-	-	-	-	-	-	-
White Males	2.7	5	83%	3	100%	2	67%	-	-
White Females	*	-	-	-	-	-	-	-	-
Multi-Race Males	*	-	-	-	-	-	-	-	-
Multi-Race Females	*	-	-	-	-	-	-	-	-
Total	1.4	6		3		3		-	

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^aThe rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using 2018 U.S. Census estimates.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported new diagnoses of HIV infection in 2018 by disease status and transmission category, Ashtabula, Geauga, and Lake Counties

Transmission Category ^a	2018 diagnosis of HIV infection		Disease Status					
			HIV (not AIDS)		HIV & later AIDS		AIDS	
	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent								
Male-to-male sexual contact	5	83%	3	100%	2	67%	-	-
Injection drug use (IDU)	1	17%	-	-	1	33%	-	-
Male-to-male sexual contact and IDU	-	-	-	-	-	-	-	-
Heterosexual contact	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-
Subtotal	6	100%	3	100%	3	100%	-	-
Female adult or adolescent								
Injection drug use	-	-	-	-	-	-	-	-
Heterosexual contact	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-
Child (<13 yrs at diagnosis)								
Perinatal	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-
Total	6		3		3		-	

Reported new diagnoses of HIV infection in 2018 by disease status and exposure category, Ashtabula, Geauga, and Lake Counties

Exposure Category ^b	2018 diagnosis of HIV infection		Disease Status					
			HIV (not AIDS)		HIV & later AIDS		AIDS	
	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	5	83%	3	100%	2	67%	-	-
Injection drug use (IDU) only	1	17%	-	-	1	33%	-	-
Heterosexual contact only	-	-	-	-	-	-	-	-
Male-to-male sexual contact & IDU	-	-	-	-	-	-	-	-
IDU & Heterosexual contact	-	-	-	-	-	-	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-
Perinatal exposure	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-
Total	6		3		3		-	

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported new diagnoses of HIV infection in 2018 by race/ethnicity and age at diagnosis, Ashtabula, Geauga, and Lake Counties

2018 diagnosis of HIV infection

Age at diagnosis (yr)	American Indian/Alaska Native			Asian/Pacific Islander			Black/African-American			Hispanic/ Latinx ^a			White			Multi-Race		
	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%
<13	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
13-14	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
15-19	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
20-24	*	-	-	*	-	-	*	1	100%	*	-	-	*	-	-	*	-	-
25-29	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
30-34	*	-	-	*	-	-	*	-	-	*	-	-	*	1	20%	*	-	-
35-39	*	-	-	*	-	-	*	-	-	*	-	-	*	2	40%	*	-	-
40-44	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
45-49	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
50-54	*	-	-	*	-	-	*	-	-	*	-	-	*	1	20%	*	-	-
55-64	*	-	-	*	-	-	*	-	-	*	-	-	*	1	20%	*	-	-
65+	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
Total	*	-	-	*	-	-	*	1		*	-	-	1.3	5		*	-	-

Reported new diagnoses of HIV infection in 2018 by race/ethnicity and transmission category, Ashtabula, Geauga, and Lake Counties

2018 diagnosis of HIV infection

Transmission Category ^c	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent												
Male-to-male sexual contact	-	-	-	-	1	100%	-	-	4	80%	-	-
Injection drug use (IDU)	-	-	-	-	-	-	-	-	1	20%	-	-
Male-to-male sexual contact and IDU	-	-	-	-	-	-	-	-	-	-	-	-
Heterosexual contact	-	-	-	-	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	1	100%	-	-	5	100%	-	-
Female adult or adolescent												
Injection drug use	-	-	-	-	-	-	-	-	-	-	-	-
Heterosexual contact	-	-	-	-	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-	-	-	-	-
Child (<13 yrs at diagnosis)												
Perinatal	-	-	-	-	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-	-	-	-	-
Total	-	-	-	-	1		-	-	5		-	-

Reported new diagnoses of HIV infection in 2018 by race/ethnicity and exposure category, Ashtabula, Geauga, and Lake Counties

2018 diagnosis of HIV infection

Exposure Category ^d	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	-	-	-	-	1	100%	-	-	4	80%	-	-
Injection drug use (IDU) only	-	-	-	-	-	-	-	-	1	20%	-	-
Heterosexual contact only	-	-	-	-	-	-	-	-	-	-	-	-
Male-to-male sexual contact & IDU	-	-	-	-	-	-	-	-	-	-	-	-
IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	-	-
Perinatal exposure	-	-	-	-	-	-	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-	-	-	-	-
Total	-	-	-	-	1		-	-	5		-	-

Notes:

Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis.

Asterisk (*) indicates rate not calculated because census data unavailable or for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

^b The rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using 2018 U.S. Census estimates.

^c Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^d Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported new diagnoses of HIV infection by year of diagnosis (2014-2018) and cumulative diagnoses by selected characteristics, Ashtabula, Geauga, and Lake Counties

Characteristic	Diagnosis of HIV Infection by Year															Cumulative Diagnoses	
	2014			2015			2016			2017			2018			No.	%
	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%		
Sex at birth																	
Males	4.8	10	91%	6.7	14	93%	10.1	21	95%	7.2	15	83%	2.9	6	100%	384	85%
Females	*	1	9%	*	1	7%	*	1	5%	*	3	17%	*	-	-	70	15%
Age at diagnosis (yr)																	
<13	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	6	1%
13-14	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	-	-
15-19	*	-	-	*	-	-	*	2	9%	*	-	-	*	-	-	10	2%
20-24	*	-	-	*	4	27%	24.8	6	27%	*	3	17%	*	1	17%	44	10%
25-29	*	-	-	*	2	13%	*	3	14%	21.0	5	28%	*	-	-	78	17%
30-34	*	2	18%	*	2	13%	*	4	18%	*	3	17%	*	1	17%	73	16%
35-39	*	2	18%	*	2	13%	*	2	9%	*	1	6%	*	2	33%	68	15%
40-44	*	1	9%	*	2	13%	*	1	5%	*	1	6%	*	-	-	56	12%
45-49	*	4	36%	*	-	-	*	1	5%	*	1	6%	*	-	-	53	12%
50-54	*	1	9%	*	1	7%	*	1	5%	*	2	11%	*	1	17%	28	6%
55-64	*	1	9%	*	1	7%	*	2	9%	*	2	11%	*	1	17%	31	7%
65+	*	-	-	*	1	7%	*	-	-	*	-	-	*	-	-	7	2%
Race/Ethnicity^b																	
American Indian/Alaska Native	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	1	<1%
Asian/Pacific Islander	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	1	<1%
Black/African-American	*	1	9%	*	1	7%	44.7	6	27%	*	1	6%	*	1	17%	69	15%
Hispanic/Latinx	*	-	-	*	1	7%	*	1	5%	*	1	6%	*	-	-	26	6%
White	2.6	10	91%	3.4	13	87%	3.1	12	55%	3.7	14	78%	1.3	5	83%	342	75%
Multi-Race	*	-	-	*	-	-	*	3	14%	*	2	11%	*	-	-	14	3%
Unknown	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	1	<1%
Race/Ethnicity^b and Sex at birth																	
American Indian/Alaska Native Males	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	-	-
American Indian/Alaska Native Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	1	<1%
Asian/Pacific Islander Males	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	1	<1%
Asian/Pacific Islander Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	-	-
Black/African-American Males	*	1	9%	*	1	7%	69.9	5	23%	*	1	6%	*	1	17%	50	11%
Black/African-American Females	*	-	-	*	-	-	*	1	5%	*	-	-	*	-	-	19	4%
Hispanic/Latino Males	*	-	-	*	1	7%	*	1	5%	*	1	6%	*	-	-	20	4%
Hispanic/Latina Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	6	1%
White Males	4.8	9	82%	6.4	12	80%	6.4	12	55%	6.4	12	67%	2.7	5	83%	301	66%
White Females	*	1	9%	*	1	7%	*	-	-	*	2	11%	*	-	-	41	9%
Multi-Race Males	*	-	-	*	-	-	*	3	14%	*	1	6%	*	-	-	11	2%
Multi-Race Females	*	-	-	*	-	-	*	-	-	*	1	6%	*	-	-	3	1%
Unknown	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	1	<1%
Total	2.6	11		3.6	15		5.2	22		4.3	18		1.4	6		454	

Notes:
 Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis. Diagnoses of HIV infection by year (2014-2018) represent all reported cases diagnosed in each year; cumulative diagnoses represent all reported HIV and/or AIDS cases diagnosed since the beginning of the epidemic through 2018.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a The rate is the number of persons with a reported diagnosis of HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported new diagnoses of HIV infection by year of diagnosis (2014-2018) and cumulative diagnoses by transmission category, Ashtabula, Geauga, and Lake Counties

Transmission Category ^a	Diagnosis of HIV Infection by Year											
	2014		2015		2016		2017		2018		Cumulative Diagnoses	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent												
Male-to-male sexual contact	9	90%	8	57%	18	86%	12	80%	5	83%	267	70%
Injection drug use (IDU)	-	-	1	7%	-	-	1	7%	1	17%	22	6%
Male-to-male sexual contact and IDU	-	-	-	-	-	-	1	7%	-	-	17	4%
Heterosexual contact	1	10%	1	7%	-	-	-	-	-	-	22	6%
Other/unknown	-	-	4	29%	3	14%	1	7%	-	-	55	14%
Subtotal	10	100%	14	100%	21	100%	15	100%	6	100%	383	100%
Female adult or adolescent												
Injection drug use	-	-	-	-	-	-	-	-	-	-	4	6%
Heterosexual contact	1	100%	1	100%	1	100%	3	100%	-	-	51	78%
Other/unknown	-	-	-	-	-	-	-	-	-	-	10	15%
Subtotal	1	100%	1	100%	1	100%	3	100%	-	-	65	100%
Child (<13 yrs at diagnosis)												
Perinatal	-	-	-	-	-	-	-	-	-	-	5	83%
Other/unknown	-	-	-	-	-	-	-	-	-	-	1	17%
Subtotal	-	-	-	-	-	-	-	-	-	-	6	100%
Total	11		15		22		18		6		454	

Trends in reported diagnoses of HIV infection by year of diagnosis (2014-2018) and cumulative diagnoses by exposure category, Ashtabula, Geauga, and Lake Counties

Exposure Category ^b	Diagnosis of HIV Infection by Year											
	2014		2015		2016		2017		2018		Cumulative Diagnoses	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	9	82%	8	53%	18	82%	12	67%	5	83%	259	57%
Injection drug use (IDU) only	-	-	-	-	-	-	-	-	1	17%	17	4%
Heterosexual contact only	2	18%	2	13%	1	5%	3	17%	-	-	73	16%
Male-to-male sexual contact & IDU	-	-	-	-	-	-	1	6%	-	-	16	4%
IDU & Heterosexual contact	-	-	1	7%	-	-	1	6%	-	-	9	2%
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	8	2%
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	1	<1%
Perinatal exposure	-	-	-	-	-	-	-	-	-	-	5	1%
Other/unknown	-	-	4	27%	3	14%	1	6%	-	-	66	15%
Total	11		15		22		18		6		454	

Notes:
 Reported new diagnoses of HIV infection include persons with a diagnosis of HIV (not AIDS), a diagnosis of HIV and an AIDS diagnosis within 12 months (HIV & later AIDS), and concurrent diagnoses of HIV and AIDS (AIDS) who were residents of Ohio at time of initial diagnosis. Diagnoses of HIV infection by year (2014-2018) represent all reported cases diagnosed in each year; cumulative diagnoses represent all reported HIV and/or AIDS cases diagnosed since the beginning of the epidemic through 2018.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported diagnoses of AIDS in 2018 by time to AIDS diagnosis and selected characteristics, Ashtabula, Geauga, and Lake Counties

Characteristic	AIDS Diagnoses					
	2018 AIDS diagnosis		≥12 Months after HIV Diagnosis		<12 Months after HIV Diagnosis ^a	
	No.	%	No.	%	No.	%
Sex at birth						
Males	5	100%	1	100%	4	100%
Females	-	-	-	-	-	-
Age at AIDS diagnosis (yr)						
<13	-	-	-	-	-	-
13-14	-	-	-	-	-	-
15-19	-	-	-	-	-	-
20-24	1	20%	-	-	1	25%
25-29	1	20%	1	100%	-	-
30-34	-	-	-	-	-	-
35-39	1	20%	-	-	1	25%
40-44	-	-	-	-	-	-
45-49	-	-	-	-	-	-
50-54	1	20%	-	-	1	25%
55-64	1	20%	-	-	1	25%
65+	-	-	-	-	-	-
Race/Ethnicity^b						
American Indian/Alaska Native	-	-	-	-	-	-
Asian/Pacific Islander	-	-	-	-	-	-
Black/African-American	2	40%	1	100%	1	25%
Hispanic/Latinx	-	-	-	-	-	-
White	3	60%	-	-	3	75%
Multi-Race	-	-	-	-	-	-
Race/Ethnicity^b and Sex at birth						
American Indian/Alaska Native Males	-	-	-	-	-	-
American Indian/Alaska Native Females	-	-	-	-	-	-
Asian/Pacific Islander Males	-	-	-	-	-	-
Asian/Pacific Islander Females	-	-	-	-	-	-
Black/African-American Males	2	40%	1	100%	1	25%
Black/African-American Females	-	-	-	-	-	-
Hispanic/Latino Males	-	-	-	-	-	-
Hispanic/Latina Females	-	-	-	-	-	-
White Males	3	60%	-	-	3	75%
White Females	-	-	-	-	-	-
Multi-Race Males	-	-	-	-	-	-
Multi-Race Females	-	-	-	-	-	-
Total	5		1		4	

Notes:

Data reflects all persons with an AIDS diagnosis in 2018 regardless of year of HIV infection diagnosis, and who were living in Ohio at the time of initial diagnosis.

^a Includes persons whose diagnoses of HIV infection and AIDS were made at the same time.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Dash (-) indicates no cases were reported for the given category.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported diagnoses of AIDS in 2018 by time to AIDS diagnosis and transmission category, Ashtabula, Geauga, and Lake Counties

Transmission Category ^b	AIDS Diagnoses					
	2018 AIDS diagnosis		≥12 Months after HIV Diagnosis		<12 Months after HIV Diagnosis ^a	
	No.	%	No.	%	No.	%
Male adult or adolescent						
Male-to-male sexual contact	4	80%	1	100%	3	75%
Injection drug use (IDU)	1	20%	-	-	1	25%
Male-to-male sexual contact and IDU	-	-	-	-	-	-
Heterosexual contact	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-
Subtotal	5	100%	1	100%	4	100%
Female adult or adolescent						
Injection drug use	-	-	-	-	-	-
Heterosexual contact	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-
Child (<13 yrs at diagnosis)						
Perinatal	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-
Total	5		1		4	

Reported diagnoses of AIDS in 2018 by time to AIDS diagnosis and exposure category, Ashtabula, Geauga, and Lake Counties

Exposure Category ^c	AIDS Diagnoses					
	2018 AIDS diagnosis		≥12 Months after HIV Diagnosis		<12 Months after HIV Diagnosis ^a	
	No.	%	No.	%	No.	%
Male-to-male sexual contact only	4	80%	1	100%	3	75%
Injection drug use (IDU) only	1	20%	-	-	1	25%
Heterosexual contact only	-	-	-	-	-	-
Male-to-male sexual contact & IDU	-	-	-	-	-	-
IDU & Heterosexual contact	-	-	-	-	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-
Perinatal exposure	-	-	-	-	-	-
Other/unknown	-	-	-	-	-	-
Total	5		1		4	

Notes:

Data reflects all persons with an AIDS diagnosis in 2018 regardless of year of HIV infection diagnosis, and who were living in Ohio at the time of initial diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Includes persons whose diagnoses of HIV infection and AIDS were made at the same time.

^b Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^c Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported diagnoses of AIDS by year of diagnosis (2014-2018) and cumulative AIDS diagnoses by selected characteristics, Ashtabula, Geauga, and Lake Counties

Characteristic	Year of AIDS Diagnosis										Cumulative AIDS	
	2014		2015		2016		2017		2018		No.	%
	No.	%	No.	%	No.	%	No.	%	No.	%		
Sex at birth												
Males	-	-	7	100%	4	80%	8	100%	5	100%	261	87%
Females	1	100%	-	-	1	20%	-	-	-	-	38	13%
Age at AIDS diagnosis (yr)												
<13	-	-	-	-	-	-	-	-	-	-	2	1%
13-14	-	-	-	-	-	-	-	-	-	-	-	-
15-19	-	-	-	-	-	-	-	-	-	-	2	1%
20-24	-	-	1	14%	-	-	1	13%	1	20%	8	3%
25-29	-	-	-	-	2	40%	2	25%	1	20%	39	13%
30-34	-	-	1	14%	-	-	1	13%	-	-	51	17%
35-39	-	-	-	-	-	-	-	-	1	20%	54	18%
40-44	-	-	2	29%	-	-	-	-	-	-	50	17%
45-49	-	-	2	29%	-	-	1	13%	-	-	45	15%
50-54	-	-	-	-	-	-	1	13%	1	20%	17	6%
55-64	1	100%	1	14%	3	60%	1	13%	1	20%	25	8%
65+	-	-	-	-	-	-	1	13%	-	-	6	2%
Race/Ethnicity^a												
American Indian/Alaska Native	-	-	-	-	-	-	-	-	-	-	1	<1%
Asian/Pacific Islander	-	-	-	-	-	-	-	-	-	-	-	-
Black/African-American	-	-	3	43%	2	40%	2	25%	2	40%	51	17%
Hispanic/Latinx	-	-	-	-	-	-	-	-	-	-	15	5%
White	1	100%	4	57%	2	40%	6	75%	3	60%	229	77%
Multi-Race	-	-	-	-	1	20%	-	-	-	-	3	1%
Race/Ethnicity^a and Sex at birth												
American Indian/Alaska Native Males	-	-	-	-	-	-	-	-	-	-	-	-
American Indian/Alaska Native Females	-	-	-	-	-	-	-	-	-	-	1	<1%
Asian/Pacific Islander Males	-	-	-	-	-	-	-	-	-	-	-	-
Asian/Pacific Islander Females	-	-	-	-	-	-	-	-	-	-	-	-
Black/African-American Males	-	-	3	43%	2	40%	2	25%	2	40%	40	13%
Black/African-American Females	-	-	-	-	-	-	-	-	-	-	11	4%
Hispanic/Latino Males	-	-	-	-	-	-	-	-	-	-	11	4%
Hispanic/Latina Females	-	-	-	-	-	-	-	-	-	-	4	1%
White Males	-	-	4	57%	1	20%	6	75%	3	60%	208	70%
White Females	1	100%	-	-	1	20%	-	-	-	-	21	7%
Multi-Race Males	-	-	-	-	1	20%	-	-	-	-	2	1%
Multi-Race Females	-	-	-	-	-	-	-	-	-	-	1	<1%
Total	1		7		5		8		5		299	

Notes:

AIDS diagnoses by year (2014-2018) represent all reported AIDS cases diagnosed in each year regardless of year of HIV infection diagnosis, and who were living in Ohio at the time of initial diagnosis; cumulative AIDS cases represent all reported AIDS cases diagnosed since the beginning of the epidemic through 2018.

Dash (-) indicates no cases were reported for the given category.

^a Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported diagnoses of AIDS by year of diagnosis (2014-2018) and cumulative AIDS diagnoses by transmission category, Ashtabula, Geauga, and Lake Counties

Transmission Category ^a	Year of AIDS Diagnosis										Cumulative AIDS	
	2014		2015		2016		2017		2018		No.	%
	No.	%	No.	%	No.	%	No.	%	No.	%		
Male adult or adolescent												
Male-to-male sexual contact	-	-	5	71%	3	75%	7	88%	4	80%	181	70%
Injection drug use (IDU)	-	-	-	-	-	-	-	-	1	20%	21	8%
Male-to-male sexual contact and IDU	-	-	-	-	-	-	1	13%	-	-	17	7%
Heterosexual contact	-	-	-	-	-	-	-	-	-	-	12	5%
Other/unknown	-	-	2	29%	1	25%	-	-	-	-	29	11%
Subtotal	-	-	7	100%	4	100%	8	100%	5	100%	260	100%
Female adult or adolescent												
Injection drug use	-	-	-	-	-	-	-	-	-	-	3	8%
Heterosexual contact	1	100%	-	-	1	100%	-	-	-	-	32	89%
Other/unknown	-	-	-	-	-	-	-	-	-	-	1	3%
Subtotal	1	100%	-	-	1	100%	-	-	-	-	36	100%
Child (<13 yrs at diagnosis)												
Perinatal	-	-	-	-	-	-	-	-	-	-	2	67%
Other/unknown	-	-	-	-	-	-	-	-	-	-	1	33%
Subtotal	-	-	-	-	-	-	-	-	-	-	3	100%
Total	1		7		5		8		5		299	

Trends in reported diagnoses of AIDS by year of diagnosis (2014-2018) and cumulative AIDS diagnoses by exposure category, Ashtabula, Geauga, and Lake Counties

Exposure Category ^b	Year of AIDS Diagnosis										Cumulative AIDS	
	2014		2015		2016		2017		2018		No.	%
	No.	%	No.	%	No.	%	No.	%	No.	%		
Male-to-male sexual contact only	-	-	5	71%	3	60%	7	88%	4	80%	175	59%
Injection drug use (IDU) only	-	-	-	-	-	-	-	-	1	20%	16	5%
Heterosexual contact only	1	100%	-	-	1	20%	-	-	-	-	44	15%
Male-to-male sexual contact & IDU	-	-	-	-	-	-	1	13%	-	-	13	4%
IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	8	3%
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	6	2%
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-	-	-	4	1%
Perinatal exposure	-	-	-	-	-	-	-	-	-	-	2	1%
Other/unknown	-	-	2	29%	1	20%	-	-	-	-	31	10%
Total	1		7		5		8		5		299	

Notes:

AIDS diagnoses by year (2014-2018) represent all reported AIDS cases diagnosed in each year regardless of year of HIV infection diagnosis, and who were living in Ohio at the time of initial diagnosis; cumulative AIDS cases represent all reported AIDS cases diagnosed since the beginning of the epidemic through 2018.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Persons Living with Diagnosed HIV Infection Reported in Ashtabula, Geauga, and Lake Counties

As of June 30, 2019

Reported persons living with diagnosed HIV infection in 2018 by current disease status and selected characteristics, Ashtabula, Geauga, and Lake Counties

Characteristic	Living with diagnosed HIV infection in			Current Disease Status			
	2018			HIV (not AIDS)		AIDS	
	Rate ^a	No.	%	No.	%	No.	%
Sex at birth							
Males	131.5	274	80%	121	77%	153	83%
Females	31.8	68	20%	37	23%	31	17%
Age at end of year							
<13	*	1	<1%	1	1%	-	-
13-14	*	-	-	-	-	-	-
15-19	*	-	-	-	-	-	-
20-24	63.2	15	4%	11	7%	4	2%
25-29	89.3	22	6%	18	11%	4	2%
30-34	92.3	21	6%	16	10%	5	3%
35-39	113.1	27	8%	23	15%	4	2%
40-44	121.6	28	8%	16	10%	12	7%
45-49	165.3	45	13%	17	11%	28	15%
50-54	189.0	56	16%	21	13%	35	19%
55-64	138.7	90	26%	26	16%	64	35%
65+	44.1	37	11%	9	6%	28	15%
Race/Ethnicity^b							
American Indian/Alaska Native	*	-	-	-	-	-	-
Asian/Pacific Islander	*	2	1%	1	1%	1	1%
Black/African-American	449.7	66	19%	32	20%	34	18%
Hispanic/Latinx	267.3	44	13%	20	13%	24	13%
White	56.5	214	63%	95	60%	119	65%
Multi-Race	228.1	15	4%	9	6%	6	3%
Unknown	*	1	<1%	1	1%	-	-
Race/Ethnicity^b and Sex at birth							
American Indian/Alaska Native Males	*	-	-	-	-	-	-
American Indian/Alaska Native Females	*	-	-	-	-	-	-
Asian/Pacific Islander Males	*	2	1%	1	1%	1	1%
Asian/Pacific Islander Females	*	-	-	-	-	-	-
Black/African-American Males	572.8	44	13%	21	13%	23	13%
Black/African-American Females	314.4	22	6%	11	7%	11	6%
Hispanic/Latino Males	386.3	34	10%	15	9%	19	10%
Hispanic/Latina Females	130.6	10	3%	5	3%	5	3%
White Males	97.8	182	53%	77	49%	105	57%
White Females	16.6	32	9%	18	11%	14	8%
Multi-Race Males	329.7	11	3%	6	4%	5	3%
Multi-Race Females	*	4	1%	3	2%	1	1%
Unknown	*	1	<1%	1	1%	-	-
Total	81.0	342		158		184	

Notes:

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported persons living with diagnosed HIV infection in 2018 by current disease status and transmission category, Ashtabula, Geauga, and Lake Counties

Transmission Category ^a	Living with diagnosed HIV infection in		Current Disease Status			
	2018		HIV (not AIDS)		AIDS	
	No.	%	No.	%	No.	%
Male adult or adolescent						
Male-to-male sexual contact	189	69%	91	75%	98	65%
Injection drug use (IDU)	24	9%	4	3%	20	13%
Male-to-male sexual contact and IDU	15	6%	4	3%	11	7%
Heterosexual contact	17	6%	7	6%	10	7%
Other/unknown	27	10%	15	12%	12	8%
Subtotal	272	100%	121	100%	151	100%
Female adult or adolescent						
Injection drug use	2	3%	1	3%	1	3%
Heterosexual contact	57	88%	27	79%	30	97%
Other/unknown	6	9%	6	18%	-	-
Subtotal	65	100%	34	100%	31	100%
Child (<13 yrs at diagnosis)						
Perinatal	4	80%	3	100%	1	50%
Other/unknown	1	20%	-	-	1	50%
Subtotal	5	100%	3	100%	2	100%
Total	342		158		184	

Reported persons living with diagnosed HIV infection in 2018 by current disease status and exposure category, Ashtabula, Geauga, and Lake Counties

Exposure Category ^b	Living with diagnosed HIV infection in		Current Disease Status			
	2018		HIV (not AIDS)		AIDS	
	No.	%	No.	%	No.	%
Male-to-male sexual contact only	178	52%	88	56%	90	49%
Injection drug use (IDU) only	14	4%	1	1%	13	7%
Heterosexual contact only	74	22%	34	22%	40	22%
Male-to-male sexual contact & IDU	14	4%	4	3%	10	5%
IDU & Heterosexual contact	12	4%	4	3%	8	4%
Male-to-male sexual contact & Heterosexual contact	11	3%	3	2%	8	4%
Male-to-male sexual contact & IDU & Heterosexual contact	1	<1%	-	-	1	1%
Perinatal exposure	4	1%	3	2%	1	1%
Other/unknown	34	10%	21	13%	13	7%
Total	342		158		184	

Notes:

Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Reported persons living with diagnosed HIV infection in 2018 by race/ethnicity and age, Ashtabula, Geauga, and Lake Counties

Living with diagnosed HIV infection in 2018

Age at end of year	American Indian/Alaska Native			Asian/Pacific Islander			Black/African-American			Hispanic/ Latinx ^a			White			Multi-Race			Unknown	
	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	Rate ^b	No.	%	No.	%
<13	*	-	-	*	-	-	*	1	2%	*	-	-	*	-	-	*	-	-	-	-
13-14	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	-	-
15-19	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-	-	-
20-24	*	-	-	*	-	-	634.6	7	11%	*	2	5%	*	4	2%	*	2	13%	-	-
25-29	*	-	-	*	-	-	433.5	6	9%	*	-	-	66.6	14	7%	*	2	13%	-	-
30-34	*	-	-	*	-	-	*	4	6%	*	2	5%	72.2	14	7%	*	1	7%	-	-
35-39	*	-	-	*	-	-	548.9	6	9%	*	2	5%	81.3	17	8%	*	2	13%	-	-
40-44	*	-	-	*	-	-	*	4	6%	665.4	7	16%	73.0	15	7%	*	2	13%	-	-
45-49	*	-	-	*	1	50%	641.7	6	9%	1,083.7	11	25%	105.1	26	12%	*	1	7%	-	-
50-54	*	-	-	*	-	-	842.4	7	11%	1,106.5	8	18%	141.4	39	18%	*	2	13%	-	-
55-64	*	-	-	*	1	50%	959.8	16	24%	970.9	9	20%	97.7	60	28%	*	3	20%	1	100%
65+	*	-	-	*	-	-	547.8	9	14%	*	3	7%	31.1	25	12%	*	-	-	-	-
Total	*	-	-	*	2		449.7	66		267.3	44		56.5	214		228.1	15		1	

Reported persons living with diagnosed HIV infection in 2018 by race/ethnicity and transmission category, Ashtabula, Geauga, and Lake Counties

Living with diagnosed HIV infection in 2018

Transmission Category ^c	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race		Unknown	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent														
Male-to-male sexual contact	-	-	1	50%	32	74%	12	35%	139	77%	5	45%	-	-
Injection drug use (IDU)	-	-	-	-	5	12%	7	21%	9	5%	3	27%	-	-
Male-to-male sexual contact and IDU	-	-	-	-	1	2%	3	9%	11	6%	-	-	-	-
Heterosexual contact	-	-	-	-	1	2%	7	21%	7	4%	2	18%	-	-
Other/unknown	-	-	1	50%	4	9%	5	15%	15	8%	1	9%	1	100%
Subtotal	-	-	2	100%	43	100%	34	100%	181	100%	11	100%	1	100%
Female adult or adolescent														
Injection drug use	-	-	-	-	1	5%	1	11%	-	-	-	-	-	-
Heterosexual contact	-	-	-	-	17	81%	7	78%	29	94%	4	100%	-	-
Other/unknown	-	-	-	-	3	14%	1	11%	2	6%	-	-	-	-
Subtotal	-	-	-	-	21	100%	9	100%	31	100%	4	100%	-	-
Child (<13 yrs at diagnosis)														
Perinatal	-	-	-	-	2	100%	1	100%	1	50%	-	-	-	-
Other/unknown	-	-	-	-	-	-	-	-	1	50%	-	-	-	-
Subtotal	-	-	-	-	2	100%	1	100%	2	100%	-	-	-	-
Total	-	-	2		66		44		214		15		1	

Reported persons living with diagnosed HIV infection in 2018 by race/ethnicity and exposure category, Ashtabula, Geauga, and Lake Counties

Living with diagnosed HIV infection in 2018

Exposure Category ^d	American Indian/Alaska Native		Asian/Pacific Islander		Black/African-American		Hispanic/ Latinx ^a		White		Multi-Race		Unknown	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	-	-	1	50%	32	48%	10	23%	131	61%	4	27%	-	-
Injection drug use (IDU) only	-	-	-	-	4	6%	3	7%	6	3%	1	7%	-	-
Heterosexual contact only	-	-	-	-	18	27%	14	32%	36	17%	6	40%	-	-
Male-to-male sexual contact & IDU	-	-	-	-	1	2%	3	7%	10	5%	-	-	-	-
IDU & Heterosexual contact	-	-	-	-	2	3%	5	11%	3	1%	2	13%	-	-
Male-to-male sexual contact & Heterosexual contact	-	-	-	-	-	-	2	5%	8	4%	1	7%	-	-
Male-to-male sexual contact & IDU & Heterosexual contact	-	-	-	-	-	-	-	-	1	0%	-	-	-	-
Perinatal exposure	-	-	-	-	2	3%	1	2%	1	0%	-	-	-	-
Other/unknown	-	-	1	50%	7	11%	6	14%	18	8%	1	7%	1	100%
Total	-	-	2		66		44		214		15		1	

Notes:
 Living with diagnosed HIV infection represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31, 2018. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31, 2018, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.
 Asterisk (*) indicates rate not calculated because census data unavailable or for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.
^a Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.
^b The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.
^c Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.
^d Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.
 Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported persons living with diagnosed HIV infection by year of diagnosis and selected characteristics, Ashtabula, Geauga, and Lake Counties, 2014-2018

Living with Diagnosed HIV Infection

Characteristic	2014			2015			2016			2017			2018		
	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%	Rate ^a	No.	%
Sex at birth															
Males	103.2	215	77%	108.1	225	77%	121.2	252	80%	133.5	278	80%	131.5	274	80%
Females	30.8	66	23%	31.8	68	23%	30.0	64	20%	32.8	70	20%	31.8	68	20%
Age at end of year															
<13	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%
13-14	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
15-19	*	3	1%	*	1	<1%	*	2	1%	*	-	-	*	-	-
20-24	*	3	1%	25.0	6	2%	41.3	10	3%	66.4	16	5%	63.2	15	4%
25-29	59.1	13	5%	67.2	15	5%	87.2	20	6%	92.2	22	6%	89.3	22	6%
30-34	39.2	9	3%	70.6	16	5%	66.3	15	5%	93.2	21	6%	92.3	21	6%
35-39	123.6	28	10%	104.2	24	8%	86.0	20	6%	97.3	23	7%	113.1	27	8%
40-44	114.8	30	11%	139.7	35	12%	176.2	42	13%	172.6	40	11%	121.6	28	8%
45-49	174.6	52	19%	151.1	44	15%	145.8	42	13%	163.7	46	13%	165.3	45	13%
50-54	197.9	66	23%	194.4	63	22%	191.2	60	19%	202.9	62	18%	189.0	56	16%
55-64	94.1	60	21%	102.3	66	23%	118.4	77	24%	132.1	86	25%	138.7	90	26%
65+	21.2	16	6%	28.5	22	8%	34.2	27	9%	38.1	31	9%	44.1	37	11%
Race/Ethnicity^b															
American Indian/Alaska Native	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
Asian/Pacific Islander	*	2	1%	*	2	1%	*	2	1%	*	2	1%	*	2	1%
Black/African-American	364.1	48	17%	373.1	50	17%	417.2	56	18%	450.3	64	18%	449.7	66	19%
Hispanic/Latinx	253.4	36	13%	251.1	37	13%	274.6	41	13%	303.9	47	14%	267.3	44	13%
White	48.6	187	67%	50.9	195	67%	53.5	204	65%	58.1	221	64%	56.5	214	63%
Multi-Race	118.2	7	2%	131.8	8	3%	194.1	12	4%	202.1	13	4%	228.1	15	4%
Unknown	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%
Race/Ethnicity^b and Sex at birth															
American Indian/Alaska Native Males	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
American Indian/Alaska Native Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
Asian/Pacific Islander Males	*	2	1%	*	2	1%	*	2	1%	*	2	1%	*	2	1%
Asian/Pacific Islander Females	*	-	-	*	-	-	*	-	-	*	-	-	*	-	-
Black/African-American Males	396.5	28	10%	418.1	30	10%	489.6	35	11%	576.7	43	12%	572.8	44	13%
Black/African-American Females	326.7	20	7%	321.2	20	7%	334.7	21	7%	310.7	21	6%	314.4	22	6%
Hispanic/Latino Males	352.4	27	10%	351.0	28	10%	384.6	31	10%	430.3	36	10%	386.3	34	10%
Hispanic/Latina Females	137.5	9	3%	133.1	9	3%	145.5	10	3%	155.0	11	3%	130.6	10	3%
White Males	80.7	152	54%	84.7	159	54%	92.9	174	55%	100.1	187	54%	97.8	182	53%
White Females	17.8	35	12%	18.4	36	12%	15.4	30	9%	17.5	34	10%	16.6	32	9%
Multi-Race Males	165.6	5	2%	161.0	5	2%	286.3	9	3%	275.2	9	3%	329.7	11	3%
Multi-Race Females	*	2	1%	*	3	1%	*	3	1%	*	4	1%	*	4	1%
Unknown	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%	*	1	<1%
Total	66.5	281		69.4	293		75.1	316		82.5	348		81.0	342	

Notes:

Living with diagnosed HIV infection by year (2014-2018) represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31 of the corresponding year. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31 of the corresponding year, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Asterisk (*) indicates rate not calculated for case count <5 due to unstable rates. Dash (-) indicates no cases were reported for the given category.

^a The rate is the number of persons living with diagnosed HIV infection per 100,000 population calculated using U.S. Census estimates for that year.

^b Hispanics/Latinx may be of any race. Persons with a race of American Indian/Alaska Native, Asian/Pacific Islander, Black/African-American, White, or Multi-race are not-Hispanic. Asian/Pacific Islander includes Native Hawaiians.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

Trends in reported persons living with diagnosed HIV infection by year of diagnosis and transmission category, Ashtabula, Geauga, and Lake Counties, 2014-2018

Transmission Category ^a	Living with Diagnosed HIV Infection									
	2014		2015		2016		2017		2018	
	No.	%	No.	%	No.	%	No.	%	No.	%
Male adult or adolescent										
Male-to-male sexual contact	137	64%	145	65%	166	66%	185	67%	189	69%
Injection drug use (IDU)	15	7%	14	6%	18	7%	20	7%	24	9%
Male-to-male sexual contact and IDU	17	8%	16	7%	14	6%	17	6%	15	6%
Heterosexual contact	21	10%	23	10%	20	8%	20	7%	17	6%
Other/unknown	24	11%	26	12%	32	13%	33	12%	27	10%
Subtotal	214	100%	224	100%	250	100%	275	100%	272	100%
Female adult or adolescent										
Injection drug use	3	5%	3	5%	3	5%	2	3%	2	3%
Heterosexual contact	51	82%	53	83%	52	85%	58	88%	57	88%
Other/unknown	8	13%	8	13%	6	10%	6	9%	6	9%
Subtotal	62	100%	64	100%	61	100%	66	100%	65	100%
Child (<13 yrs at diagnosis)										
Perinatal	5	100%	5	100%	4	80%	6	86%	4	80%
Other/unknown	-	-	-	-	1	20%	1	14%	1	20%
Subtotal	5	100%	5	100%	5	100%	7	100%	5	100%
Total	281		293		316		348		342	

Trends in reported persons living with diagnosed HIV infection by year of diagnosis and exposure category, Ashtabula, Geauga, and Lake Counties, 2014-2018

Exposure Category ^b	Living with Diagnosed HIV Infection									
	2014		2015		2016		2017		2018	
	No.	%	No.	%	No.	%	No.	%	No.	%
Male-to-male sexual contact only	131	47%	140	48%	161	51%	178	51%	178	52%
Injection drug use (IDU) only	10	4%	9	3%	11	3%	11	3%	14	4%
Heterosexual contact only	73	26%	77	26%	73	23%	79	23%	74	22%
Male-to-male sexual contact & IDU	14	5%	13	4%	12	4%	15	4%	14	4%
IDU & Heterosexual contact	8	3%	8	3%	10	3%	11	3%	12	4%
Male-to-male sexual contact & Heterosexual contact	6	2%	5	2%	5	2%	7	2%	11	3%
Male-to-male sexual contact & IDU & Heterosexual contact	3	1%	3	1%	2	1%	2	1%	1	<1%
Perinatal exposure	5	2%	5	2%	4	1%	6	2%	4	1%
Other/unknown	31	11%	33	11%	38	12%	39	11%	34	10%
Total	281		293		316		348		342	

Notes:

Living with diagnosed HIV infection by year (2014-2018) represents all persons ever diagnosed and reported with HIV and/or AIDS who have not been reported as having died as of December 31 of the corresponding year. Persons living with diagnosed HIV infection represent persons living in Ohio as of December 31 of the corresponding year, regardless of whether the person was a resident of Ohio at time of initial HIV and/or AIDS diagnosis.

Dash (-) indicates no cases were reported for the given category.

^a Transmission categories are mutually exclusive, hierarchical risk categories determined by the CDC and system-calculated using sex at birth and risk factor history to determine mode of transmission. A person with multiple risks is only represented in the highest category based on the CDC hierarchical algorithm. Thus, transgender women are included in the male-to-male sexual contact transmission category if assigned male at birth and risk factor history indicates sex with males. Please note this is for the categorization of HIV transmission categories only and not to describe sexual orientation.

^b Exposure categories are mutually exclusive risk categories. All possible combinations of risks are represented among exposure categories. A person with multiple risks is represented in the exposure category identifying all the reported ways in which that person may have been exposed to HIV.

Source: Ohio Department of Health, HIV/AIDS Surveillance Program. Data reported through June 30, 2019.

APPENDIX 10

REFERENCE SHEET

INSTRUCTIONS:

List a minimum of three (3) organizations to whom you have provided like services to that being requested in the specification. Provide all data requested below for each reference listed. Use additional sheets if desired.

ORGANIZATION'S NAME:

CONTACT PERSON'S NAME:

ORGANIZATION'S FULL ADDRESS:

CONTACT PERSON'S TELEPHONE NUMBER:

DATE SERVICE(S) PROVIDED:

SPECIFY THE SERVICES PROVIDED:

ORGANIZATION'S NAME:

CONTACT PERSON'S NAME:

ORGANIZATION'S FULL ADDRESS:

CONTACT PERSON'S TELEPHONE NUMBER:

DATE SERVICE(S) PROVIDED:

SPECIFY THE SERVICES PROVIDED:

ORGANIZATION'S NAME:

CONTACT PERSON'S NAME:

ORGANIZATION'S FULL ADDRESS:

CONTACT PERSON'S TELEPHONE NUMBER:

DATE SERVICE(S) PROVIDED:

SPECIFY THE SERVICES PROVIDED: