

# Maryland HIV/AIDS Quarterly Update

Third Quarter 2015

Data reported through September 30, 2015



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Infectious Disease Epidemiology and Outbreak Response Bureau  
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## TABLE OF CONTENTS

<b>Section I – Background Information</b> .....	<b>1</b>
HIV/AIDS Reporting Requirements .....	1
For Assistance with HIV/AIDS Reporting.....	2
Stages of a Case of HIV/AIDS.....	3
Changes in Case Terminology .....	3
Laboratory Data.....	4
Sources of Data.....	4
Tabulation of Column Totals.....	4
Data Suppression.....	4
Glossary of Terms .....	4
<b>Section II – Adult/Adolescent Cases by Jurisdiction</b> .....	<b>6</b>
Table 1 – Adult/Adolescent HIV Diagnoses during 10/1/2013-9/30/2014 , First CD4 Test Result, Percent Linked to Care, and Percent Late Diagnosis, by Jurisdiction, Reported through 9/30/2015 .....	6
Table 2 – Adult/Adolescent AIDS Diagnoses during 10/1/2013-9/30/2014 , Mean Years from HIV Diagnosis and Percent Late HIV Diagnosis, by Jurisdiction, Reported through 9/30/2015 .....	7
Table 3 – Adult/Adolescent HIV Cases Alive on 9/30/2014, by Jurisdiction, Reported through 9/30/2015.....	8
Table 4 – CD4 Test Results for Adult/Adolescent HIV Cases Alive on 9/30/2014, Reported through 9/30/2015 .....	9
Table 5 – Viral Load Test Results for Adult/Adolescent HIV Cases Alive on 9/30/2014, by Jurisdiction, Reported through 9/30/2015....	10

## Section I – Background Information

### HIV/AIDS Reporting Requirements

The Maryland HIV/AIDS Reporting Act of 2007 went into effect on April 24, 2007. The law expanded HIV/AIDS reporting and required that HIV cases be reported by name. The following highlights the reporting requirements of Health-General Articles 18-201.1, 18-202.1, and 18-205 of the Annotated Code of Maryland, as specified in COMAR 10.18.02.

- Physicians are required to report patients in their care with diagnoses of HIV or AIDS immediately to the Local Health Department where the physician’s office is located by mailing DHMH Form 1140. Reports are also accepted by phone.
- Physicians are required to report infants born to HIV positive mothers within 48 hours to the State Health Department by mailing DHMH Form 1140. Reports are also accepted by phone.
- Clinical and infection control practitioners in hospitals, nursing homes, hospice facilities, medical clinics in correctional facilities, inpatient psychiatric facilities, and inpatient drug rehabilitation facilities are required to report patients in the care of the institution with diagnoses of HIV or AIDS within 48 hours to the Local Health Department where the institution is located by mailing DHMH Form 1140. Reports are also accepted by phone. Facilities with large volumes are encouraged to contact the State Health Department to establish electronic reporting.

- Laboratory directors are required to report patients with laboratory results indicating HIV infection (e.g., positive confirmatory HIV diagnostic tests, all CD4 immunological tests, all HIV viral load tests, and all HIV genotype and phenotype tests) within 48 hours to the Local Health Department where the laboratory is located, or if out of state to the Maryland State Health Department, by mailing DHMH Form 4492. Laboratories are encouraged to contact the State Health Department to establish electronic reporting.

Reporting forms and instructions are available on our website:

<http://phpa.dhmh.maryland.gov/oideor/chse/sitepages/reporting-material.aspx>

### **For Assistance with HIV/AIDS Reporting**

For assistance with reporting, including establishment of routine, electronic, or other alternate methods of reporting to the Health Department, please contact the Center for HIV Surveillance, Epidemiology and Evaluation in the Maryland Department of Health and Mental Hygiene at 410-767-5061.

### **Limitations in the HIV/AIDS Data**

This epidemiological profile only contains data for HIV and AIDS cases that have been diagnosed by a health care provider, were reported to the health department by name, and were residents of Maryland at the time of diagnosis. Nationally, it has been estimated that 14% of people living with HIV infection are undiagnosed. In addition, despite a massive effort during which over 17,000 HIV cases were reported after the Maryland HIV reporting law changed on April 24, 2007, not all diagnosed HIV cases previously reported by Maryland's code-based identifier were located and re-reported by name. In addition, many of the re-reported HIV cases were identified by a recent diagnosis and not by their earliest diagnosis, resulting in an under-reporting of HIV diagnoses before 2001 and an over-reporting of HIV diagnoses from 2001 to 2008. Caution should be exercised in using the number of living HIV cases without AIDS and in interpreting trends in the number of reported HIV diagnoses. Furthermore, laboratory data are only available for cases receiving medical care, usually only at facilities in Maryland, and only includes test results that have been reported to the health department. Please note that not all data has been geocoded in the quarterly reports and therefore is preliminary. Geocoding is the process of assigning geographic identifiers to map features and data records. Addresses are standard data elements required by law and submitted as part of reporting requirements; however, the information may be incomplete which then requires a geocoding process to improve the quality of data. This process is fully completed on the end-of-the-year data set.

## **Stages of a Case of HIV/AIDS**

Untreated HIV disease progresses from HIV infection to AIDS to death. These are biological events that occur whether or not a person receives any medical care. For example, a person can be HIV infected but never have an HIV test and so they do not have an HIV diagnosis. A medical provider diagnoses that these biological events have occurred and records them as a medical event. The law requires medical providers to report these medical events to the Health Department, thereby creating a surveillance event.

<b>Time Point</b>	<b>Biological Event</b>	<b>Medical Event</b>	<b>Surveillance Event</b>
<b>1</b>	HIV Infection		
<b>2</b>		HIV Diagnosis	
<b>3</b>			HIV Report
<b>4</b>	AIDS Conditions		
<b>5</b>		AIDS Diagnosis	
<b>6</b>			AIDS Report
<b>7</b>	Death		
<b>8</b>		Death Diagnosis	
<b>9</b>			Death Report

For surveillance purposes, a case of HIV/AIDS can only move through time in one direction, from HIV infection to death report [from time point 1 to time point 9], but may skip over individual stages. Events can occur simultaneously, but usually there is a time lag between them. The time lag between events can be measured in days, months, or years.

For example, the time between HIV infection [time point 1] and the test that diagnoses HIV [time point 2] may be several years, and it may then take several days for the laboratory and physician to report the diagnosis to the health department [time point 3]. In a second example, a person with diagnosed and reported HIV infection [time point 3] may die [time point 7] without developing AIDS, thereby skipping the three AIDS events (conditions, diagnosis, and report [time points 4, 5 and 6]). And in a third example, a person with undiagnosed HIV infection [time point 1] may become sick, enter the hospital, and die [time point 7] of what is later determined to be AIDS. In that situation, HIV diagnosis [time point 2], AIDS diagnosis [time point 5], and death diagnosis [time point 8] would all occur at the same time, and that would have been many years after the initial HIV infection [time point 1].

## **Changes in Case Terminology**

The terminology for HIV and AIDS cases was changed from earlier epidemiological profiles to be more precise, with Reported Diagnoses replacing Incidence and Living Cases replacing Prevalence. Incidence is a measure of the number of new events (such as HIV infections) in a population during a period of time. Prevalence is a measure of the number of people living with a condition (such as HIV) in a population at a certain time. Prevalence includes both new and old cases. For HIV, Incidence and Prevalence cannot be directly measured and must be estimated using statistical methods. The HIV surveillance system is able to provide the actual number of diagnoses and deaths that are reported in the population.

For this epidemiological profile, the reports received through a certain time (the end of the year) are used to generate the number of diagnoses during the prior years. This one year lag allows for delays in reporting and time to complete investigations. For example, the Reported HIV Diagnoses for 10/1/2013-9/30/2014 are the total of the reported HIV cases with or without an AIDS diagnosis, diagnosed with HIV during 10/1/2013-9/30/2014, as reported by name through 9/30/2015.

To calculate the number of Living Cases we count up all of the Reported Diagnoses from the beginning of the epidemic (all the Reported HIV Diagnoses each year) and subtract all of the Reported Deaths. For example, the Total Living HIV Cases on 9/30/2014 are the total of the reported HIV Cases with or without an AIDS diagnosis and not reported to have died as of 9/30/2014 as reported by name through 9/30/2015.

## Laboratory Data

CD4+ T-lymphocyte tests are measures of a person's immune system function. An HIV infected adult is considered to have AIDS if they have less than 200 CD4 cells per microliter of blood. Viral load (VL) tests are measures of the amount of HIV in a person's body. The goal of HIV treatment is to have a very low number of copies of virus per milliliter of blood, below what the test can measure, which is called an undetectable level. Treatment recommendations are that a person in HIV medical care should have their CD4 and VL levels measured at least 2-3 times per year. We use the presence of these lab tests as an indicator that someone has been "linked to care" initially after diagnosis or in following years that they remain "in care".

## Sources of Data

Information on HIV and AIDS diagnoses, including residence at diagnosis, age, race/ethnicity, sex at birth, country of birth, vital status, HIV exposure category, and CD4 and HIV viral load test results are from the Maryland Department of Health and Mental Hygiene's Enhanced HIV/AIDS Reporting System (eHARS), September 30, 2015.

Population data by sex, age, and race are from the July 1, 2014 U.S. Census Estimates. Due to estimation limitations, some population totals may not equal the sum of its components.

## Tabulation of Column Totals

Figures in tables and generally in the text have been rounded. Discrepancies in tables between totals and sums of components are due to rounding.

## Data Suppression

In order to protect the confidentiality of reported HIV cases, data are suppressed in the following instances:

- Data describing a demographic group or geographic area (e.g. ZIP code) with a population less than 1,000 people.
- All clinical/laboratory information if it is describing less than 5 cases.
- All exposure/risk information if it is describing less than 5 cases, except in the case of "other" exposure.
- If any cell is suppressed, additional cells are also suppressed as necessary to prevent back calculation of the suppressed cell(s).

## Glossary of Terms

**Adult/Adolescent Living HIV Cases with AIDS:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an AIDS diagnosis, and not reported to have died as of 9/30/2014.

**Adult/Adolescent Living HIV Cases without AIDS:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, without an AIDS diagnosis, and not reported to have died as of 9/30/2014.

**Adult/Adolescent Reported AIDS Diagnoses:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an initial AIDS diagnosis during the specified year.

**Adult/Adolescent Reported HIV Diagnoses:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an initial HIV diagnosis during the specified year.

**Adult/Adolescent Total Living HIV Cases:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with or without an AIDS diagnosis, and not reported to have died as of 9/30/2014.

**CD4 Result Distribution (<200, 200-349, 350-499, 500+):** Percent of cases with a CD4 test distributed by their CD4 count results (cells per microliter).

**First CD4 Test Result:** First reported CD4 test result obtained within 12 months following initial HIV diagnosis.

**Jurisdiction of Residence at AIDS Diagnosis:** Jurisdiction of residence at time of initial AIDS diagnosis.

**Jurisdiction of Residence at Diagnosis:** Jurisdiction of residence at the later of time of initial HIV diagnosis or time of initial AIDS diagnosis.

**Jurisdiction of Residence at HIV Diagnosis:** Jurisdiction of residence at time of initial HIV diagnosis.

**Mean Years from HIV Diagnosis (to AIDS Diagnosis):** Mean number of years from initial HIV diagnosis to initial AIDS diagnosis for cases with a reported AIDS diagnosis.

**Median:** The measure of central location which divides a set of data into two equal parts.

**Median Count (First CD4):** Median CD4 count (cells per microliter) of the first CD4 test result reported within 12 months following initial HIV diagnosis.

**Median Count (Recent CD4):** Median CD4 count (cells per microliter) of the most recent CD4 test result reported in the 12 months prior to 9/30/2014.

**Median Unsuppressed (Viral Load):** Median unsuppressed viral load (copies per milliliter) among adult/adolescent living HIV cases with a most recent viral load test result reported in the 12 months prior to 9/30/2014 of 200 copies per milliliter or greater.

**Percent Late HIV Diagnosis (for AIDS diagnoses):** Percent of adult/adolescent reported AIDS diagnoses with an initial HIV diagnosis less than or equal to 12 months prior to their initial AIDS diagnosis.

**Percent Late HIV Diagnosis (for HIV diagnoses):** Percent of adult/adolescent reported HIV diagnoses with an initial AIDS diagnosis less than or equal to 12 months after their initial HIV diagnosis.

**Percent Linked to Care:** Percent of adult/adolescent reported HIV diagnoses with a CD4 or viral load test performed less than or equal to 3 months after their initial HIV diagnosis.

**Percent Suppressed (Viral Load):** Percent of adult/adolescent total living HIV cases with a most recent viral load reported in the 12 months prior to 9/30/2014 of less than 200 copies per milliliter.

**Population Age 13+:** Population age 13 years or older, estimate for 7/1/2014.

**Rate:** A proportion used to represent risk for disease within a given population. It is calculated by dividing the number of diagnoses by the number of persons at risk (population estimate).

**Ratio (1 in X):** Number of people for every 1 living HIV case in the population, or 1 living HIV case in every X number of people.

**Recent CD4 Test Result:** The most recent CD4 test result reported in the 12 months prior to 9/30/2014.

**Recent Viral Load Test Result:** The most recent viral load test result reported in the 12 months prior to 9/30/2014.

**Suggested Citation:** Maryland HIV/AIDS Epidemiology Profile, Third Quarter 2015. Baltimore, MD: Center for HIV Surveillance, Epidemiology and Evaluation, Infectious Disease Epidemiology and Outbreak Response Bureau, Prevention and Health Promotion Administration, Maryland Department of Health and Mental Hygiene. October 2015.

## Section II – Adult/Adolescent Cases by Jurisdiction

**Table 1 – Adult/Adolescent HIV Diagnoses during 10/1/2013-9/30/2014 , First CD4 Test Result, Percent Linked to Care, and Percent Late Diagnosis, by Jurisdiction, Reported through 9/30/2015**

JURISDICTION OF RESIDENCE AT HIV DIAGNOSIS	Population Age 13+	Adult/Adolescent Reported HIV Diagnoses							
		No.	% of Total	Rate	First CD4 Test Result			% Linked to Care	% Late HIV Diagnosis
					No. with Test	% with Test	Median Count		
Allegany	62,395	2	0.2%	3.2	***	***	***	***	***
Anne Arundel	454,247	55	4.3%	12.1	47	85.5%	346	87.3%	29.1%
Baltimore City	509,885	304	23.8%	59.6	236	77.6%	393	76.0%	26.6%
Baltimore	678,382	175	13.7%	25.8	144	82.3%	399	83.4%	25.1%
Calvert	73,079	1	0.1%	1.4	***	***	***	***	***
Caroline	26,092	3	0.2%	11.5	***	***	***	***	***
Carroll	137,758	5	0.4%	3.6	***	***	***	***	***
Cecil	82,645	3	0.2%	3.6	***	***	***	***	***
Charles	123,634	40	3.1%	32.4	31	77.5%	373	82.5%	30.0%
Dorchester	26,722	3	0.2%	11.2	***	***	***	***	***
Frederick	195,955	18	1.4%	9.2	16	88.9%	433	83.3%	27.8%
Garrett	25,016	0	0.0%	0.0	0	0.0%	0	0.0%	0.0%
Harford	203,528	31	2.4%	15.2	25	80.6%	324	83.9%	35.5%
Howard	247,305	30	2.3%	12.1	24	80.0%	385	73.3%	20.0%
Kent	17,048	2	0.2%	11.7	***	***	***	***	***
Montgomery	828,259	200	15.7%	24.1	172	86.0%	291	84.5%	35.5%
Prince George's	732,039	343	26.9%	46.9	272	79.3%	402	81.9%	27.1%
Queen Anne's	39,957	1	0.1%	2.5	***	***	***	***	***
Saint Mary's	87,571	9	0.7%	10.3	7	77.8%	138	100.0%	55.6%
Somerset	22,193	3	0.2%	13.5	***	***	***	***	***
Talbot	31,826	2	0.2%	6.3	***	***	***	***	***
Washington	122,189	10	0.8%	8.2	9	90.0%	319	90.0%	30.0%
Wicomico	83,010	10	0.8%	12.0	9	90.0%	199	90.0%	50.0%
Worcester	44,154	0	0.0%	0.0	0	0.0%	0	0.0%	0.0%
Corrections	--	27	2.1%	--	22	81.5%	458	85.2%	22.2%
TOTAL	5,005,603	1277	100.0%	25.5	1037	81.2%	368	81.8%	28.8%

\*\*\* Data withheld due to low population counts and/or case counts

**Adult/Adolescent Reported HIV Diagnoses:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an initial HIV diagnosis during the specified year.

**Jurisdiction of Residence at HIV Diagnosis:** Jurisdiction of residence at time of initial HIV diagnosis.

**Population Age 13+:** Population age 13 years or older, estimate for 7/1/2014.

**Rate:** A proportion used to represent risk for disease within a given population. It is calculated by dividing the number of diagnoses by the number of persons at risk (population estimate).

**First CD4 Test Result:** First reported CD4 test result obtained within 12 months following initial HIV diagnosis.

**Median Count (First CD4):** Median CD4 count (cells per microliter) of the first CD4 test result reported within 12 months following initial HIV diagnosis.

**Percent Linked to Care:** Percent of adult/adolescent reported HIV diagnoses with a CD4 or viral load test performed less than or equal to 3 months after their initial HIV diagnosis.

**Percent Late HIV Diagnosis (for HIV diagnoses):** Percent of adult/adolescent reported HIV diagnoses with an initial AIDS diagnosis less than or equal to 12 months after their initial HIV diagnosis.

**Table 2 – Adult/Adolescent AIDS Diagnoses during 10/1/2013-9/30/2014 , Mean Years from HIV Diagnosis and Percent Late HIV Diagnosis, by Jurisdiction, Reported through 9/30/2015**

JURISDICTION OF RESIDENCE AT AIDS DIAGNOSIS	Population Age 13+	Adult/Adolescent Reported AIDS Diagnoses				
		No.	% of Total	Rate	Mean Years from HIV Diagnosis	% Late HIV Diagnosis
Allegany	62,395	2	0.3%	3.2	***	***
Anne Arundel	454,247	31	4.1%	6.8	4.8	61.3%
Baltimore City	509,885	204	26.7%	40.0	5.1	36.8%
Baltimore	678,382	82	10.7%	12.1	4.0	50.0%
Calvert	73,079	0	0.0%	0.0	--	0.0%
Caroline	26,092	4	0.5%	15.3	***	***
Carroll	137,758	4	0.5%	2.9	***	***
Cecil	82,645	2	0.3%	2.4	***	***
Charles	123,634	24	3.1%	19.4	3.3	58.3%
Dorchester	26,722	2	0.3%	7.5	***	***
Frederick	195,955	12	1.6%	6.1	4.3	58.3%
Garrett	25,016	0	0.0%	0.0	--	0.0%
Harford	203,528	17	2.2%	8.4	2.2	64.7%
Howard	247,305	13	1.7%	5.3	3.1	53.8%
Kent	17,048	1	0.1%	5.9	***	***
Montgomery	828,259	144	18.8%	17.4	3.1	56.3%
Prince George's	732,039	183	24.0%	25.0	3.7	52.5%
Queen Anne's	39,957	1	0.1%	2.5	***	***
Saint Mary's	87,571	8	1.0%	9.1	2.0	75.0%
Somerset	22,193	1	0.1%	4.5	***	***
Talbot	31,826	1	0.1%	3.1	***	***
Washington	122,189	4	0.5%	3.3	***	***
Wicomico	83,010	8	1.0%	9.6	5.3	62.5%
Worcester	44,154	0	0.0%	0.0	--	0.0%
Corrections	--	16	2.1%	--	4.4	25.0%
<b>TOTAL</b>	<b>5,005,603</b>	<b>764</b>	<b>100.0%</b>	<b>15.3</b>	<b>4.0</b>	<b>49.7%</b>

\*\*\* Data withheld due to low population counts and/or case counts

**Adult/Adolescent Reported AIDS Diagnoses:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an initial AIDS diagnosis during the specified year.

**Jurisdiction of Residence at AIDS Diagnosis:** Jurisdiction of residence at time of initial AIDS diagnosis.

**Population Age 13+:** Population age 13 years or older, estimate for 7/1/2014.

**Rate:** A proportion used to represent risk for disease within a given population. It is calculated by dividing the number of diagnoses by the number of persons at risk (population estimate).

**Mean Years from HIV Diagnosis (to AIDS Diagnosis):** Mean number of years from initial HIV diagnosis to initial AIDS diagnosis for cases with a reported AIDS diagnosis.

**Percent Late HIV Diagnosis (for AIDS diagnoses):** Percent of adult/adolescent reported AIDS diagnoses with an initial HIV diagnosis less than or equal to 12 months prior to their initial AIDS diagnosis.

**Table 3 – Adult/Adolescent HIV Cases Alive on 9/30/2014, by Jurisdiction, Reported through 9/30/2015**

JURISDICTION OF RESIDENCE AT DIAGNOSIS	Population Age 13+	Adult/Adolescent Living HIV Cases without AIDS			Adult/Adolescent Living HIV Cases with AIDS			Adult/Adolescent Total Living HIV Cases			
		No.	% of Total	Rate	No.	% of Total	Rate	No.	% of Total	Rate	Ratio (1 in X)
Allegany	62,395	38	0.3%	60.9	33	0.2%	52.9	71	0.2%	113.8	878
Anne Arundel	454,247	513	3.6%	112.9	670	4.0%	147.5	1,183	3.8%	260.4	383
Baltimore City	509,885	5,310	37.8%	1,041.4	6,667	39.4%	1,307.5	11,977	38.6%	2,349.0	42
Baltimore	678,382	1,457	10.4%	214.8	1,691	10.0%	249.3	3,148	10.2%	464.0	215
Calvert	73,079	49	0.3%	67.1	51	0.3%	69.8	100	0.3%	136.8	730
Caroline	26,092	27	0.2%	103.5	34	0.2%	130.3	61	0.2%	233.8	427
Carroll	137,758	57	0.4%	41.4	67	0.4%	48.6	124	0.4%	90.0	1,110
Cecil	82,645	48	0.3%	58.1	59	0.3%	71.4	107	0.3%	129.5	772
Charles	123,634	221	1.6%	178.8	194	1.1%	156.9	415	1.3%	335.7	297
Dorchester	26,722	38	0.3%	142.2	75	0.4%	280.7	113	0.4%	422.9	236
Frederick	195,955	154	1.1%	78.6	159	0.9%	81.1	313	1.0%	159.7	626
Garrett	25,016	3	0.0%	12.0	3	0.0%	12.0	6	0.0%	24.0	4,169
Harford	203,528	187	1.3%	91.9	228	1.3%	112.0	415	1.3%	203.9	490
Howard	247,305	231	1.6%	93.4	248	1.5%	100.3	479	1.5%	193.7	516
Kent	17,048	15	0.1%	88.0	20	0.1%	117.3	35	0.1%	205.3	487
Montgomery	828,259	1,710	12.2%	206.5	2,021	11.9%	244.0	3,731	12.0%	450.5	221
Prince George's	732,039	3,076	21.9%	420.2	3,380	20.0%	461.7	6,456	20.8%	881.9	113
Queen Anne's	39,957	15	0.1%	37.5	32	0.2%	80.1	47	0.2%	117.6	850
Saint Mary's	87,571	56	0.4%	63.9	66	0.4%	75.4	122	0.4%	139.3	717
Somerset	22,193	22	0.2%	99.1	31	0.2%	139.7	53	0.2%	238.8	418
Talbot	31,826	23	0.2%	72.3	33	0.2%	103.7	56	0.2%	176.0	568
Washington	122,189	165	1.2%	135.0	140	0.8%	114.6	305	1.0%	249.6	400
Wicomico	83,010	93	0.7%	112.0	107	0.6%	128.9	200	0.6%	240.9	415
Worcester	44,154	32	0.2%	72.5	45	0.3%	101.9	77	0.2%	174.4	573
Corrections	--	518	3.7%	--	880	5.2%	--	1,398	4.5%	--	--
<b>TOTAL</b>	<b>5,005,603</b>	<b>14,058</b>	<b>100.0%</b>	<b>280.8</b>	<b>16,934</b>	<b>100.0%</b>	<b>338.3</b>	<b>30,992</b>	<b>100.0%</b>	<b>619.1</b>	<b>161</b>

**Jurisdiction of Residence at Diagnosis:** Jurisdiction of residence at later of time of initial HIV diagnosis or time of initial AIDS diagnosis.

**Population Age 13+:** Population greater than or equal to 13 years old, estimate for 7/1/2014.

**Adult/Adolescent Living HIV Cases without AIDS:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, without an AIDS diagnosis, and not reported to have died as of 9/30/2014.

**Adult/Adolescent Living HIV Cases with AIDS:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an AIDS diagnosis, and not reported to have died as of 9/30/2014.

**Adult/Adolescent Total Living HIV Cases:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with or without an AIDS diagnosis, and not reported to have died as of 9/30/2014.

**Rate:** A proportion used to represent risk for disease within a given population. It is calculated by dividing the number of diagnoses by the number of persons at risk (population estimate).

**Ratio (1 in X):** Number of people for every 1 living HIV case in the population, or 1 living HIV case in every X number of people.

**Table 4 – CD4 Test Results for Adult/Adolescent HIV Cases Alive on 9/30/2014, Reported through 9/30/2015**

JURISDICTION OF RESIDENCE AT DIAGNOSIS	Adult/Adolescent Total Living HIV Cases								
	No.	Recent CD4 Test Result						350-499	500+
		No. with Test	% with Test	Median Count	<200	200-349			
Allegany	71	46	64.8%	689	6.5%	4.3%	13.0%	76.1%	
Anne Arundel	1,183	697	58.9%	527	13.5%	15.6%	17.4%	53.5%	
Baltimore City	11,977	7,293	60.9%	524	13.6%	14.7%	18.8%	52.8%	
Baltimore	3,148	1,944	61.8%	520	14.0%	15.1%	18.3%	52.6%	
Calvert	100	62	62.0%	629	8.1%	11.3%	17.7%	62.9%	
Caroline	61	40	65.6%	550	5.0%	20.0%	15.0%	60.0%	
Carroll	124	59	47.6%	498	18.6%	6.8%	28.8%	45.8%	
Cecil	107	54	50.5%	509	3.7%	24.1%	20.4%	51.9%	
Charles	415	252	60.7%	587	11.5%	11.9%	13.9%	62.7%	
Dorchester	113	77	68.1%	547	9.1%	13.0%	22.1%	55.8%	
Frederick	313	164	52.4%	556	11.6%	10.4%	15.2%	62.8%	
Garrett	6	***	***	***	***	***	***	***	
Harford	415	256	61.7%	557	17.6%	10.9%	18.0%	53.5%	
Howard	479	285	59.5%	568	14.0%	9.5%	16.8%	59.6%	
Kent	35	***	***	***	***	***	***	***	
Montgomery	3,731	1,911	51.2%	536	11.5%	14.7%	18.7%	55.2%	
Prince George's	6,456	3,429	53.1%	515	13.7%	14.5%	19.5%	52.3%	
Queen Anne's	47	29	61.7%	531	3.4%	20.7%	17.2%	58.6%	
Saint Mary's	122	81	66.4%	507	9.9%	18.5%	21.0%	50.6%	
Somerset	53	42	79.2%	556	2.4%	26.2%	14.3%	57.1%	
Talbot	56	40	71.4%	412	15.0%	20.0%	17.5%	47.5%	
Washington	305	157	51.5%	607	8.9%	7.6%	21.7%	61.8%	
Wicomico	200	123	61.5%	491	17.1%	17.9%	15.4%	49.6%	
Worcester	77	52	67.5%	544	13.5%	15.4%	9.6%	61.5%	
Corrections	1,398	827	59.2%	480	16.4%	16.3%	20.2%	47.0%	
TOTAL	30,992	17,943	57.9%	525	13.4%	14.6%	18.7%	53.3%	

\*\*\* Data withheld due to low population counts and/or case counts

**Adult/Adolescent Total Living HIV Cases:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with or without an AIDS diagnosis, and not reported to have died as of 9/30/2014.

**Recent CD4 Test Result:** The most recent CD4 test result reported in the 12 months prior to 9/30/2014.

**Jurisdiction of Residence at Diagnosis:** Jurisdiction of residence at later of time of initial HIV diagnosis or time of initial AIDS diagnosis.

**Median Count (Recent CD4):** Median CD4 count (cells per microliter) of the most recent CD4 test result reported in the 12 months prior to 9/30/2014.

**CD4 Result Distribution (<200, 200-349, 350-499, 500+):** Percent of cases with a CD4 test distributed by their CD4 count results (cells per microliter).

**Table 5 – Viral Load Test Results for Adult/Adolescent HIV Cases Alive on 9/30/2014, by Jurisdiction, Reported through 9/30/2015**

JURISDICTION OF RESIDENCE AT DIAGNOSIS	Adult/Adolescent Total Living HIV Cases				
	No.	Recent Viral Load Test Result			
		No. with Test	% with Test	% Suppressed	Median Unsuppressed
Allegany	71	43	60.6%	86.0%	2,373
Anne Arundel	1,183	612	51.7%	72.4%	17,863
Baltimore City	11,977	6,234	52.0%	70.8%	7,884
Baltimore	3,148	1,690	53.7%	71.7%	11,400
Calvert	100	61	61.0%	86.9%	24,137
Caroline	61	37	60.7%	89.2%	42,690
Carroll	124	54	43.5%	70.4%	31,315
Cecil	107	51	47.7%	80.4%	8,520
Charles	415	245	59.0%	76.7%	23,838
Dorchester	113	72	63.7%	86.1%	2,156
Frederick	313	170	54.3%	82.9%	3,270
Garrett	6	***	***	***	***
Harford	415	230	55.4%	78.7%	4,239
Howard	479	269	56.2%	81.4%	5,145
Kent	35	***	***	***	***
Montgomery	3,731	1,914	51.3%	82.5%	5,930
Prince George's	6,456	3,398	52.6%	77.3%	11,305
Queen Anne's	47	29	61.7%	79.3%	1,145
Saint Mary's	122	81	66.4%	77.8%	11,910
Somerset	53	40	75.5%	70.0%	16,295
Talbot	56	36	64.3%	86.1%	61,180
Washington	305	151	49.5%	88.1%	37,397
Wicomico	200	117	58.5%	76.9%	10,070
Worcester	77	53	68.8%	83.0%	6,400
Corrections	1,398	671	48.0%	63.8%	12,758
TOTAL	30,992	16,278	52.5%	74.5%	9,570

\*\*\* Data withheld due to low population counts and/or case counts

**Adult/Adolescent Total Living HIV Cases:** Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with or without an AIDS diagnosis, and not reported to have died as of 9/30/2014.

**Jurisdiction of Residence at Diagnosis:** Jurisdiction of residence at later of time of initial HIV diagnosis or time of initial AIDS diagnosis.

**Recent Viral Load Test Result:** The most recent viral load test result reported in the 12 months prior to 9/30/2014.

**Percent Suppressed (Viral Load):** Percent of adult/adolescent total living HIV cases with a most recent viral load reported in the 12 months prior to 9/30/2014 of less than 200 copies per milliliter.

**Median Unsuppressed (Viral Load):** Median unsuppressed viral load (copies per milliliter) among adult/adolescent living HIV cases with a most recent viral load test result reported in the 12 months prior to 9/30/2014 of 200 copies per milliliter or greater.