

# 2015 County of Marin Fact Sheet: HIV/AIDS in Marin County



HIV/AIDS epidemiology data is from the enhanced HIV/AIDS Reporting System (eHARS) maintained by the Office of AIDS. The data presented here are cumulative through December 31, 2014 and were generated from the 2014 4<sup>th</sup> quarter Marin County dataset. Only people who were residents of Marin County at the time of HIV or AIDS diagnosis are included here, regardless of current residence.

Since the first Marin County AIDS case was reported in 1982, 1,368 people have been diagnosed with HIV or AIDS in the Marin community—583 of whom are still living (Table 1). At San Quentin State Prison (SQSP), 645 cases of HIV or AIDS have been identified. The vast majority of people diagnosed with HIV or AIDS at SQSP are no longer incarcerated there. For this reason, the demographic data presented after Table 1 exclude cases diagnosed at SQSP.

**Table 1. All Reported Cases, 1982-2014**

	Total Reported*	Deaths#	Living Cases†
<b>Community</b>			
AIDS (Stage 3 HIV)	1149	767	382
HIV, Stages 0-2	219	18	201
Combined	1368	785	583
<b>San Quentin</b>			
AIDS (Stage 3 HIV)	555	312	243
HIV, Stages 0-2	90	6	84
Combined	645	318	327

\* Does not include cases that were later found to be duplicates.

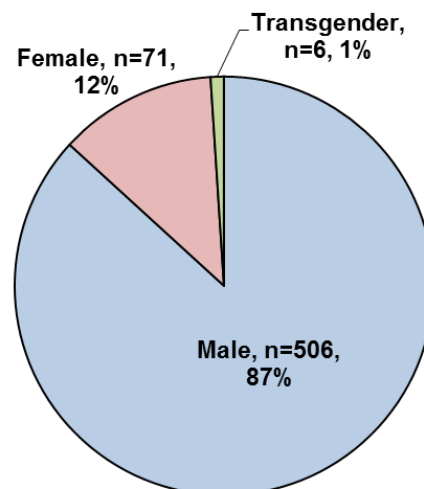
# Deaths from all causes

† Includes cases of unknown vital status.

## Demographics of People Living with HIV Infection, Marin County Community Cases

Of the 583 people living with HIV infection (including AIDS) who were Marin County community residents at the time of diagnosis, 87% are male (Figure 1) and 65% are currently age 50 or older (Figure 2). Table 2 provides a look at race/ethnicity (69% are non-Hispanic white) and a breakdown by transmission category [66% are men who have sex with men (MSM)].

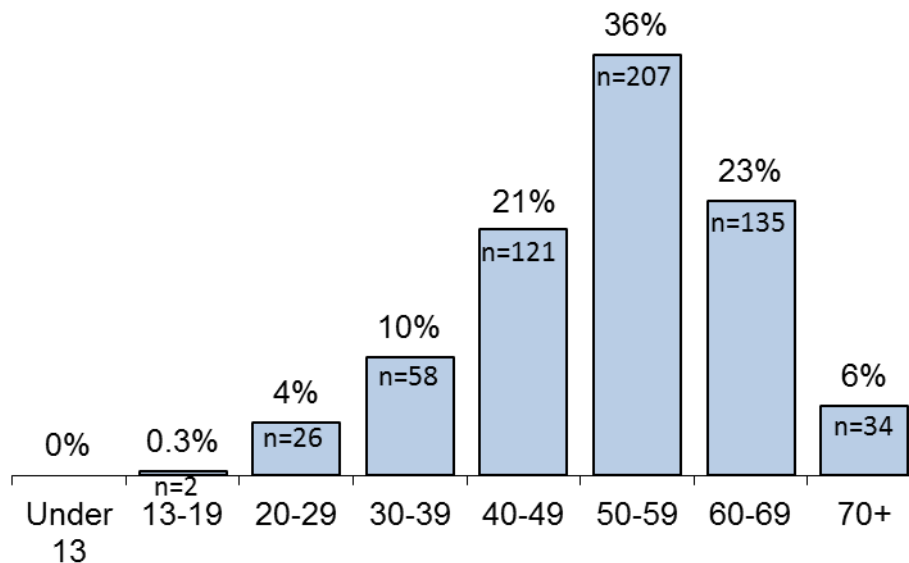
**Figure 1. Gender of People Living with HIV/AIDS**



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**Figure 2. Current Age of People Living with HIV/AIDS**



**Table 2. Race/Ethnicity and Transmission Category of People Living with HIV/AIDS**

Race/Ethnicity	Non-Hispanic White	405	69%
	Hispanic/Latino	106	18%
	African American/Black	43	7%
	Asian	13	2%
	Native Hawaiian/Pacific Islander	4	1%
	Multiple races	12	2%
Transmission Category	Male-Male Sexual Contact (MSM)	385	66%
	MSM & IDU	49	8%
	Injection Drug Use (IDU)	32	5%
	Heterosexual Contact*	67	11%
	Medical**	2	<1%
	Pediatric	6	1%
	Risk Unknown/Not Reported	42	7%
Total	583	100%	

\* Heterosexual sex with an IDU, MSM, hemophiliac, transfusion or transplant recipient with documented HIV infection, or a person with AIDS or documented HIV infection with unspecified risk.

\*\* Receipt of clotting factor, transfusion of blood or blood products, tissue or organ transplant, or artificial insemination.

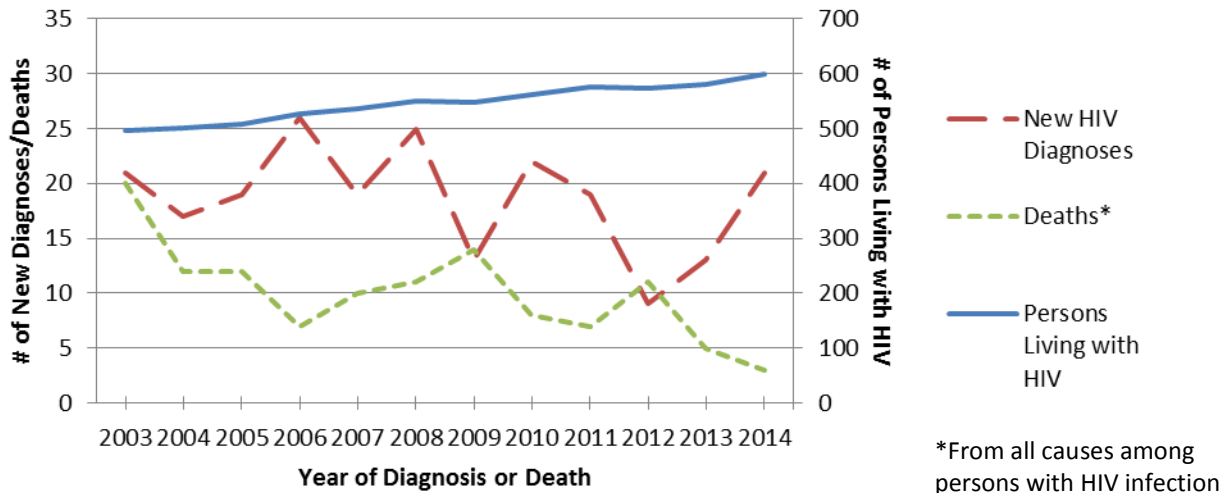
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## New Cases of HIV Infection in Marin County

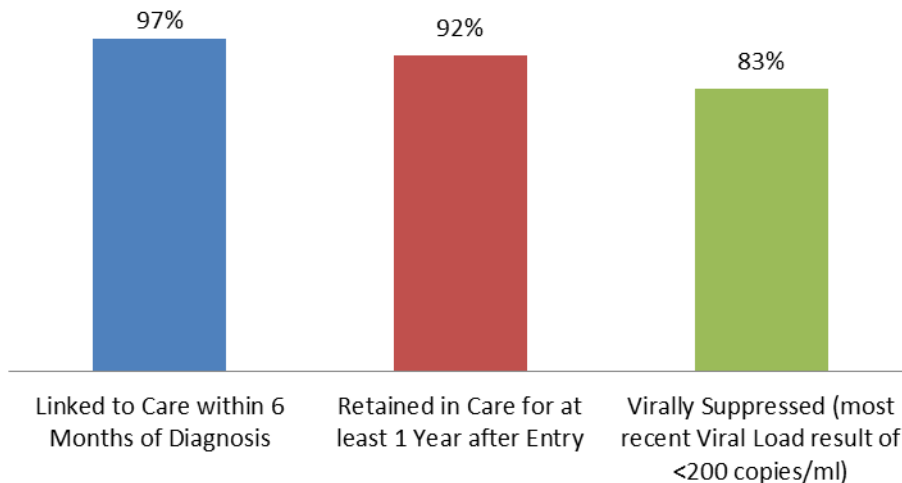
Marin County averaged 19 new community HIV diagnoses per year during 2003-2014. Over this same period, there was an average of 10 deaths per year among people with HIV infection and the number of persons living with HIV increased by about 100, to nearly 600 in 2014. Due to the fluctuation of the relatively small annual numbers, incidence data have been group into four-year increments.

**Figure 3. New HIV Diagnoses, Deaths, and Persons Living with HIV in Marin County (community cases only), 2003-2014**



- HIV diagnoses in the community in Marin County have been decreasing. During 2003-10, there were roughly 20 new diagnoses per year (Table 3). 2011-14 averaged only 16 HIV diagnoses per year; however, there was an increase in cases in 2014 compared to 2012 & 2013 (Figure 3).

**Figure 4. Linkage to Care, Retention in Care, and Viral Suppression among Persons Recently Diagnosed with HIV Infection (2010-2013), Marin County community cases, n=63**



- Linkage to care and retention in care are very high among persons newly diagnosed with HIV infection and over 80% had achieved viral suppression as of their most recent lab test.



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**Table 3. Marin County Residents Newly Diagnosed with HIV Infection in the Community**

Characteristics		Year of HIV Diagnosis		2003-06		2007-10		2011-14		Combined	
Gender	Male	72	87%	66	84%	52	84%	190	85%		
	Female	9	11%	13	16%	10	16%	32	14%		
	Transgender	2	2%	0	0%	0	0%	2	1%		
Age at Diagnosis	13-19	0	0%	0	0%	2	3%	2	1%		
	20-29	13	16%	13	16%	16	26%	42	19%		
	30-39	32	39%	25	32%	19	31%	76	34%		
	40-49	25	30%	19	24%	12	19%	56	25%		
	50-59	10	12%	12	15%	9	15%	31	14%		
	60+	3	4%	10	13%	4	6%	17	8%		
Race/Ethnicity	Non-Hispanic White	49	59%	41	52%	25*	40%	115	51%		
	Hispanic/Latino	22	27%	22	28%	19*	31%	63	28%		
	African American/Black	7	8%	12	15%	11*	18%	30	13%		
	Asian	2	2%	2	3%	2	3%	6	3%		
	Native Hawaiian/Pacific Islander	1	1%	1	1%	1	2%	3	1%		
	Multiple races	2	2%	1	1%	4	6%	7	3%		
Transmission Category	Male-Male Sexual Contact (MSM)	51	61%	41	52%	41	66%	133	59%		
	MSM & IDU	6	7%	8	10%	2	3%	16	7%		
	Injection Drug Use (IDU)	8	10%	4	5%	2	3%	14	6%		
	Heterosexual Contact	12	14%	10	13%	3	5%	25	11%		
	Risk Unknown/Not Reported	6	7%	16	20%	14	23%	36	16%		
Disease Stage at Diagnosis**	Unknown	2	2%	3	4%	1	2%	6	3%		
	Stage 0-2	53	64%	46	58%	44	71%	143	64%		
	Stage 3 (AIDS)	28	34%	30	38%	17	27%	75	33%		
Total		83	100%	79	100%	62	100%	224	100%		

\* During 2011-14, the annual HIV case rate for adolescents and adults in Marin County was 66 per 100,000 population for African Americans and 16 per 100,000 for Latinos, as compared to 4 per 100,000 for non-Hispanic whites.

\*\* Based on CD4 count at entry into care after diagnosis

### Trends & Observations

- In recent years, there has been an increase in the number of persons being diagnosed with HIV infection under the age of 30.
- The proportion of new HIV diagnoses made up of Latinos and African Americans continues to increase.
- Fewer persons diagnosed with HIV infection during 2011-14 reported injection drug use as a risk.
- Nearly one in four new HIV diagnoses does not have a risk reported/identified. Individuals may not be disclosing their risk, providers may not be documenting it, or the risk truly may not be known. Often, no risk factor other than heterosexual sex is noted; however, without the *partner's* risk/status, the “heterosexual contact” designation does not apply.
- Over one third of those with new HIV diagnoses during 2003-2010 were diagnosed with Stage 3 HIV infection (AIDS) upon entry into care. In recent years, this has decreased to 27%.



## Community Input

Community input was gained through comments on the annual countywide client satisfaction survey. This survey is sent to all ARIES Share clients who receive mail at home (n=198). This year we also offered the option of completing the survey online. The response rate was 43%. Additionally, the Care Council will sponsor a community forum in October 2015. Input about Ryan White-funded services will be gathered at this event and in a survey completed at the conclusion of the event. The Care Council meetings are open to the public.

The Marin HIV/AIDS Care Council has been a functioning entity since 2004 and meets monthly. H&HS continues to support the Council by working closely with the Council to prioritize and allocate Ryan White resources. The Council has been working to increase membership and 1 new member and 1 returning member have joined in the past year. Meeting minutes and agendas are posted and downloadable from the County website:

<http://www.co.marin.ca.us/depts/HH/main/hs/CARE/CAREcouncil.cfm>

<b>DEMOGRAPHIC MAKE-UP OF MARIN HIV/AIDS CARE COUNCIL THROUGH 8/2015</b>		
<b>Race</b>	<b>Number</b>	<b>%</b>
White not Hispanic	5	50%
African American	3	30%
Latino/Hispanic	1	10%
Asian Pacific Islander	0	0%
Am. Indian/Alaska Native	0	0%
Other/Multiethnic/Unknown	1	10%
<b>Gender</b>	<b>Number</b>	<b>%</b>
Male	7	70%
Female	3	30%
Transgender	0	0%
<b>Age</b>	<b>Number</b>	<b>%</b>
13-24	0	0%
25-49	1	10%
50+	8	80%
Decline	1	10%
<b>HIV Status</b>	<b>Number</b>	<b>%</b>
Positive	4	40%
Negative	3	30%
Undisclosed	3	30%
<b>Total Council Membership</b>	<b>10</b>	<b>100%</b>

## **Marin HIV/AIDS System of Care**

Marin County Department of Health and Human Services, Division of Community Health, Policy and Prevention administers Ryan White funding in Marin.

There are relatively few HIV-specific provider services in Marin County. Currently, there is only one non-profit and two county programs receiving HIV funding. All three of these service providers are located near central San Rafael. These agencies service approximately 267 clients, 4.1% of the total EMA.

### **Marin County's 2016-2017 Prioritization and Allocation Process**

The Marin HIV CARE Council held meetings in July and August to conduct prioritization and allocation for 16/17. The allocation meeting took place on August 12, 2015.

#### **Preparation**

The Council received data from the following sources for review:

- Demographics of HIV/AIDS in Marin County provided by Deborah Gallagher, Surveillance Coordinator for Marin County HIV/AIDS Services Program
- 2014/15 Ryan White services Satisfaction Survey results
- 2014/15 Service Category Summary Sheets prepared by Cicily Emerson and Kevin Lee

#### **Key Decisions**

Six of 10 members were present for the prioritization meeting and 7 of 10 members were present for the allocation meeting.

- In its July meeting, the Council made some changes in its prioritization rankings. A couple service categories moved up or down one ranking. More importantly, medical case management dropped from 5<sup>th</sup> to 7<sup>th</sup> priority, while emergency financial assistance dropped from 6<sup>th</sup> to 9<sup>th</sup> priority. Food vouchers saw the greatest change, increasing significantly from 9<sup>th</sup> to 4<sup>th</sup> priority.
- Outpatient/ambulatory care is no longer funded by Part A. Care for uninsured/insurable clients is funded by Part B. Outpatient Substance Abuse Services are no longer funded as there are no current Ryan White eligible clients receiving methadone maintenance.
- The largest allocation reduction was in home and community-based care, reduced at 25% from the previous year. The largest allocation increase was in medical transportation at 27%. The 16/17 budget was not approved unanimously, but by the required 2/3 vote.

**Marin Ryan White Part A 2016-17 Allocation 08/12/15**

<b>Service Category</b>	<b>Previous Priority</b>	<b>New Priority Rank</b>	<b>16/17 Part A Allocation</b>	<b>% of Total Award</b>	<b>16/17 Part B Award</b>
<b>CORE SERVICES</b>					
Mental Health	1	1	\$85,000	18.2%	
Outpatient/Ambulatory Health Services	3	3			\$26,525
Oral Health Care	4	5			\$18,500
Medical Case Management	5	7	\$145,000	31.0%	
AIDS Pharmaceutical Assistance	7	6	\$15,000	3.2%	
Health Ins. Premium and Cost Sharing Assistance	8	8	\$35,308	7.6%	
Home and Community-Cased Care	11	11	\$20,000	4.3%	
<b>SUPPORT SERVICES</b>					
Non-medical Case Management	2	2	\$107,000	22.9%	
Emergency Financial Assistance	6	9	\$45,000	9.6%	
Food Vouchers	9	4			\$76,128
Medical Transportation	10	10	\$15,000	3.2%	
<b>Core Services</b>			<b>\$300,308</b>	<b>64.3%</b>	
<b>Support Services</b>			<b>\$167,000</b>	<b>35.7%</b>	
<b>TOTALS*</b>			<b>\$467,308</b>	<b>100%</b>	<b>\$121,153**</b>

\*Table excludes a small portion of the total award for Council support

\*\*Does not include a portion for administrative expenses

## Marin County-Shifting Resources

Marin's allocation of Ryan White resources has changed to reflect the implementation of the Affordable Care Act and the return of Denti-Cal for adults as payer sources. As indicated in the table below, allocations for outpatient/ambulatory health care, mental health, substance abuse treatment, and oral health have decreased and funds have been shifted in part to the new category of Health Insurance Premium and Cost-sharing Assistance. We will continue to ensure that other payer sources are used when appropriate and clients are assisted in maintaining and utilizing their new health insurance coverage.

<b>SERVICE CATEGORY</b>			
<b>CORE SERVICES</b>	<b>2013-2014</b>	<b>2014-2015</b>	<b>2015-2016</b>
<b>Outpatient/Ambulatory Health Services</b>	\$129,704	\$10,912	\$30,000
<b>Mental Health</b>	\$80,325	\$60,000	\$80,000
<b>Medical Case Management</b>	\$132,668	\$156,467	\$144,111
<b>Home and Community-based Care</b>	\$38,237	\$38,000	\$25,000
<b>Outpatient Substance Abuse Treatment</b>	\$7,975	\$0	\$0
<b>Oral Health Care</b>	\$5,689	\$874	\$18,000
<b>AIDS Pharmaceutical Assistance</b>	\$12,000	\$12,000	\$12,000
<b>Health Ins Premium and Cost Sharing Assistance</b>	\$0	\$42,153	\$34,020
<b>SUPPORT</b>			
<b>Non-medical case management</b>	\$97,778	\$100,000	\$110,000
<b>Emergency Financial Assistance</b>	\$29,263	\$35,000	\$47,356
<b>Food Vouchers</b>	\$0	\$0	\$78,874
<b>Medical Transportation</b>	\$8,476	\$8,000	\$11,000
<b>Residential Substance Abuse Treatment</b>	\$0	\$0	\$0
<b>Total*</b>	<b>\$546,427</b>	<b>\$467,906</b>	<b>\$467,908</b>

\*Table excludes a small portion of the total award for Council support