

2022 ANNUAL HIV SURVEILLANCE SUMMARY REPORT

**Bureau of
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The data provided in the tables, figures, and maps are based on HIV reports received through March 31, 2023. Expanded analysis of data presented in the Annual HIV Surveillance Summary and other HIV data may be requested by sending email to c-hivepi@state.pa.us or by telephone/fax to our office at 717-787-3350 (tel) or 717-772-6975 (fax).

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A Special Note for the Readers of Pennsylvania HIV Surveillance Report Explanation for Changes in the Annual HIV Surveillance Summary Report

This note is intended to inform readers of changes that have been introduced in the Pennsylvania Annual Human Immunodeficiency Virus (HIV) Surveillance Summary Report since the 2021 report. These changes are intended to present HIV surveillance data in a format that reflects an evolving understanding of the HIV epidemic and efforts towards ending the HIV epidemic by 2030. Format changes have been made to reflect the way HIV is viewed and to make this report more understandable to a wider audience. This report provides additional information about the estimated number of people living with HIV disease and the characteristics of both people newly diagnosed with HIV and those living with HIV. We present the age at diagnosis and current ages in categories that are consistent with reports from the Centers for Disease Control and Prevention (CDC) and the US Health Resources & Services Administration (HRSA). We also use racial/ethnicity designations that are consistent with CDC and HRSA reports and we have added some information about concurrent diagnosis of HIV and AIDS.

In 2002, Pennsylvania promulgated public health regulations revising the reportability of adult and pediatric AIDS, adding HIV, CD4 count (<200 cells/uL or <14%), detectable viral load, and perinatal exposure to HIV. In addition, in October 2020, Pennsylvania's disease reporting regulations were changed to mandate the reporting of all CD4 and HIV viral load laboratory results. Prior to this time, only CD4 test results less than 200 cells (14%) and detectable viral load results were required to be reported to the Pennsylvania Department of Health (PADOH).

The current CDC HIV disease recognizes HIV infection as a disease with varying degrees of severity. The case definition for adults and adolescents (i.e. persons aged ≥ 13 years) is slightly different for children under the age of 13. These case definitions are intended for public health surveillance only and not as a guide for clinical diagnosis. The most recent revision to the HIV disease case definition was published by CDC in 2014.¹

Consequently, any comparison of this report to previous years should take into account these differences.

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Executive Summary

HIV disease is caused by infection with the human immunodeficiency virus (HIV) and is typically spread by exposure to body fluids or tissue from an infected individual. Sex and injection drug use (IDU) are the most common ways of becoming infected. The first cases of Acquired Immune Deficiency Syndrome (AIDS) were described in 1981, and confirmed cases in Pennsylvania dating back to 1980 were identified through retrospective review.

Infection with HIV takes over cells in the immune system, the part of the body which usually works to fight off infection and disease. If left untreated, HIV infection usually progresses to AIDS, disability and death. Although no cure or vaccine are currently available, HIV is a treatable condition, and individuals living with HIV can live normal lives. Highly active antiretroviral treatments (HAART) first became available in the mid-1990s. These treatments are effective in preventing or slowing the progression of the disease and have the added benefit of reducing the likelihood of transmitting the virus to others.

In 2012 the U.S. Food and Drug Administration approved the use of selected antiretroviral medications for the prevention of HIV infections among people at higher risk for infection such as men who have sex with men, commercial sex workers and people who share injection equipment. The Pennsylvania Department of Health (PADOH) and community partners work to ensure that people who are newly diagnosed with HIV are offered number of services to ensure better disease outcomes and those in their risk network are also offered preventive services. PADOH works with community partners to identify recent and rapidly growing clusters of HIV disease and intervenes to stop or slow the spread of HIV. PADOH uses HIV surveillance data to identify geographic areas and demographic groups that may be at elevated risk for HIV disease.

Since 1981, more than 64,600 residents of Pennsylvania have been diagnosed with HIV disease and nearly 28,600 of these persons have died. It is estimated that 41,364 people are currently living with the disease in Pennsylvania. The proportion of people with HIV disease who have died has declined steadily since the mid-1990s. The most common methods of transmission are sex between men, heterosexual sex and injection drug use (IDU). HIV disease has had a disproportionate impact on persons of color and is more common in larger population centers.

The number of newly diagnosed individuals peaked in the early to mid-1990s when almost 3,000 new diagnoses were reported annually but the numbers of new diagnoses has steadily decreased with the advent of effective treatments and preventive interventions. In 2020, Pennsylvania witnessed a approximately 21% decrease in the number of new diagnoses of HIV disease (N=781 new diagnoses in 2020 and N=986 new diagnoses in 2019) which might be attributed to the shut down of social, school, employment and other venues, decreases in HIV testing activity and care seeking behaviors as well as decreased HIV surveillance activity as some surveillance resources were diverted to deal with the worldwide COVID-19 pandemic. See the note on the impact of the COVID-19 pandemic on HIV surveillance in the next section.

In 2022, 916 new cases were reported, which represents an approximate 17% rebound (N=781 new diagnoses in 2020, N=916 new diagnoses in 2022) in the number of new diagnoses from 2020. Approximately, three times as many males have been diagnosed with HIV disease compared to females. Those who reported to be Blacks/African Americans and Hispanics make up 12.2% and 8.6% of the population of Pennsylvania, respectively², but accounted for 42.5% and 21.2% of all new diagnoses among Pennsylvania residents in 2022.

Although a person can be infected at any age, the majority of new diagnoses occurred in persons who are between the ages of 15 and 44. The majority of persons living with HIV disease are aged 55 and older.

The epidemic has evolved since the first cases were reported in 1980s. While men who have sex with men (MSM) has continued to be the predominant mode of transmission, heterosexual contact became an increasing risk factor since the 1990s. Perinatally acquired infections have declined sharply with very few reported cases, but medical providers need to remain vigilant by continuing to do HIV testing throughout all pregnancies and especially in the third trimester of the pregnancy. Epidemiologists, medical providers and other service managers need to remain continually alert to ensure all children born to pregnant individuals who are HIV positive and indeed all people of childbearing age are tested for HIV. PADOH maintains vigorous effort to continue to prevent new infections and provide adequate medical and support services for those living with the disease in Pennsylvania.

This report is based on data collected by the DOH for cases diagnosed in calendar year 2022 but reported through March 31, 2023. The report provides information on confirmed cases that are counted using specific criteria described in the methods section.

Note About Impact of COVID 19 Pandemic on Surveillance of HIV Disease

The COVID-19 pandemic in the United States led to disruptions in HIV testing services and access to clinical services throughout 2020 and 2021. This disruption resulted in a steep, single-year decline in HIV diagnoses in Pennsylvania in 2020 of approximately 21% fewer diagnoses in 2020 compared to 2019. In 2021, Pennsylvania witnessed approximately 8% fewer diagnoses of HIV disease compared to 2019. This decline in the number of confirmed cases of HIV disease is thought to be attributed to declines in testing caused by less frequent visits to health centers, reduced outreach services, and shifting of public health staff to COVID-19 response activities. Given these disruptions, data for 2020 and 2021 should be interpreted with caution. For these reasons, trends that include 2020 and 2021 are not discussed in the commentary sections of this report although data are presented for HIV diagnoses. COVID-19 disruptions in HIV testing and care during 2020 have also made estimation of incidence, prevalence, and knowledge of HIV diagnostic status challenging.

With the end of COVID-19 Public Health Emergency by the federal government in May 2023, it is critical that we continue our work to expand and improve HIV prevention, care, and treatment for groups who could most benefit, including transgender persons; Black/African American women; and gay, bisexual, and other men who have sex with men. We continue our work to improve access to prevention services for persons who inject drugs, a population for whom progress continues to be threatened by the nation's opioid and stimulant epidemics. Getting back on track with prevention, surveillance and care services will require scale-up of strategies to optimize health and close gaps in HIV prevention, care, and treatment.

Methods

Pennsylvania HIV regulations require that health care providers such as physicians, hospitals and clinical laboratories must report new diagnoses of HIV disease within five days to the DOH as well as infants who are exposed to HIV infection during pregnancy and the perinatal period.³ HIV infection without an AIDS diagnosis became reportable in Pennsylvania in 2002. HIV disease encompasses both AIDS and HIV infection without an AIDS diagnosis and cases are counted using standard criteria established by the CDC.¹ Typically, cases are first reported electronically by clinical laboratories, hospitals and medical providers whenever there is a preliminary or confirmatory event, such as a positive HIV laboratory test or the occurrence of an AIDS-defining clinical condition. The cases are reported through the Pennsylvania National Electronic Disease Surveillance Systems (PA-NEDSS).³ In addition, data are routinely transferred from PA-NEDSS to the Enhanced HIV/AIDS Reporting System (eHARS) for purposes of data management, analysis and reporting to the CDC.⁴

All reports are followed up by epidemiologists and disease intervention specialists to collect additional information about the case, such as risk factors, residence at diagnosis, race, etc. These data are continuously processed through electronic data systems that use standardized algorithms to calculate the date of confirmed diagnosis, age at diagnosis, the most likely way the person was infected (e.g. sex, IDU, etc.), clinical status and a variety of other characteristics. The surveillance of HIV is guided by standard procedures, policies and practices as established by the CDC.^{5,6}

These data are used to (1) monitor trends in the epidemic, (2) identify communities, demographic groups or geographic areas for prevention and outreach efforts, (3) monitor potential outbreaks or clusters of cases, and (4) develop strategies and tools for preventing new infections and ensuring persons who are living with HIV disease are able to receive medical care and support services. The HIV surveillance section within the PADOH works closely with the Department's HIV prevention section as well as other sections of the Department that provide follow-up services, contact follow-up, and the Special Pharmaceutical Benefits Program to ensure that people living with HIV receive necessary medical care and other support services.

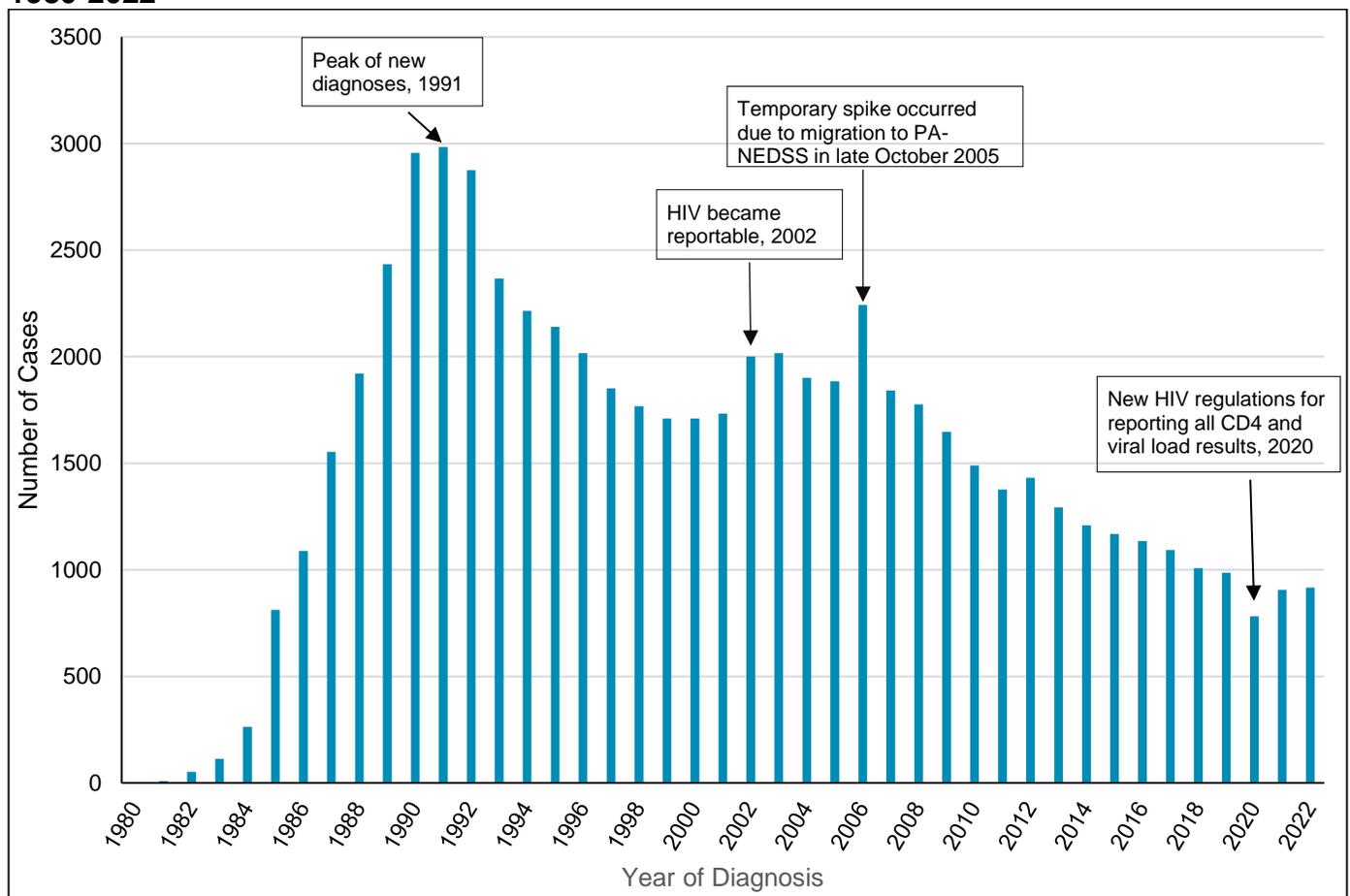
Data in this report are based on confirmed HIV cases among persons who were residents of Pennsylvania at the time of diagnosis for cases diagnosed in calendar year 2022 and reported to the DOH by March 31, 2023. Nationally a case must meet certain minimum requirements to be considered a "countable" case. These requirements are the same as those used by the CDC for publishing national estimates.¹ At a minimum, a case must have a confirmed diagnosis (either through a standard laboratory testing algorithm or confirmed by a physician) and the following characteristics must be known: the person's date of birth, sex at birth, county of residence at diagnosis, vital status (i.e. alive or deceased), race/ethnicity and last name. These data are regularly matched with other databases such as state vital records data to ascertain vital status of cases. In addition, Pennsylvania and all other states regularly exchange information to determine if a case is truly a new diagnosis or if the report of a case that has been previously diagnosed in another state.

Findings

The first case of AIDS in Pennsylvania was reported after the start of the epidemic in 1981, although subsequent epidemiological investigation identified cases that were diagnosed in 1980. The 1980s and first half of the 1990s saw a rapid increase in the number of new cases with a peak occurring in 1991. In the mid-1990s, the number of new cases in Pennsylvania began to steadily decline. The observed increase in reported cases in 2006 was attributable to mainly the migration of HIV data reporting from the HIV/AIDS Reporting System to the PA-NEDSS in late October 2005. In 2022, 916 new diagnoses of HIV disease among residents of Pennsylvania were reported. This number may be incomplete due to lags in reporting. PADOH continuously exchanges data with other states and jurisdictions to deduplicate data and ensure that all newly diagnosed cases truly are new diagnoses.

Figure 1 below depicts the number of new diagnoses of HIV disease among Pennsylvania residents by year of diagnosis. For each year, the bars represent new cases of HIV disease. The numbers show persistent decline in new diagnoses of HIV disease since the peak in 1991.

Figure 1: Annual Diagnoses of HIV Disease by Year of Diagnosis in Pennsylvania, 1980-2022



Note: HIV Infection without AIDS became reportable in Pennsylvania in October 2002.

Figure 2 below displays the vital status of people with HIV disease by diagnosis status and year of diagnosis. Mortality among individuals living with HIV disease has decreased over time in Pennsylvania, and this has been observed in every population group. HAART first became available in the mid-1990s, having a dramatic impact on the number of deaths among people living with HIV disease. The number of deaths among individuals with HIV disease has decreased each year, while the number of people living with this condition has continued to increase every year.

Figure 2: Cases of AIDS and HIV Infection without AIDS by Vital Status and Year of Diagnosis in Pennsylvania, 1998-2022

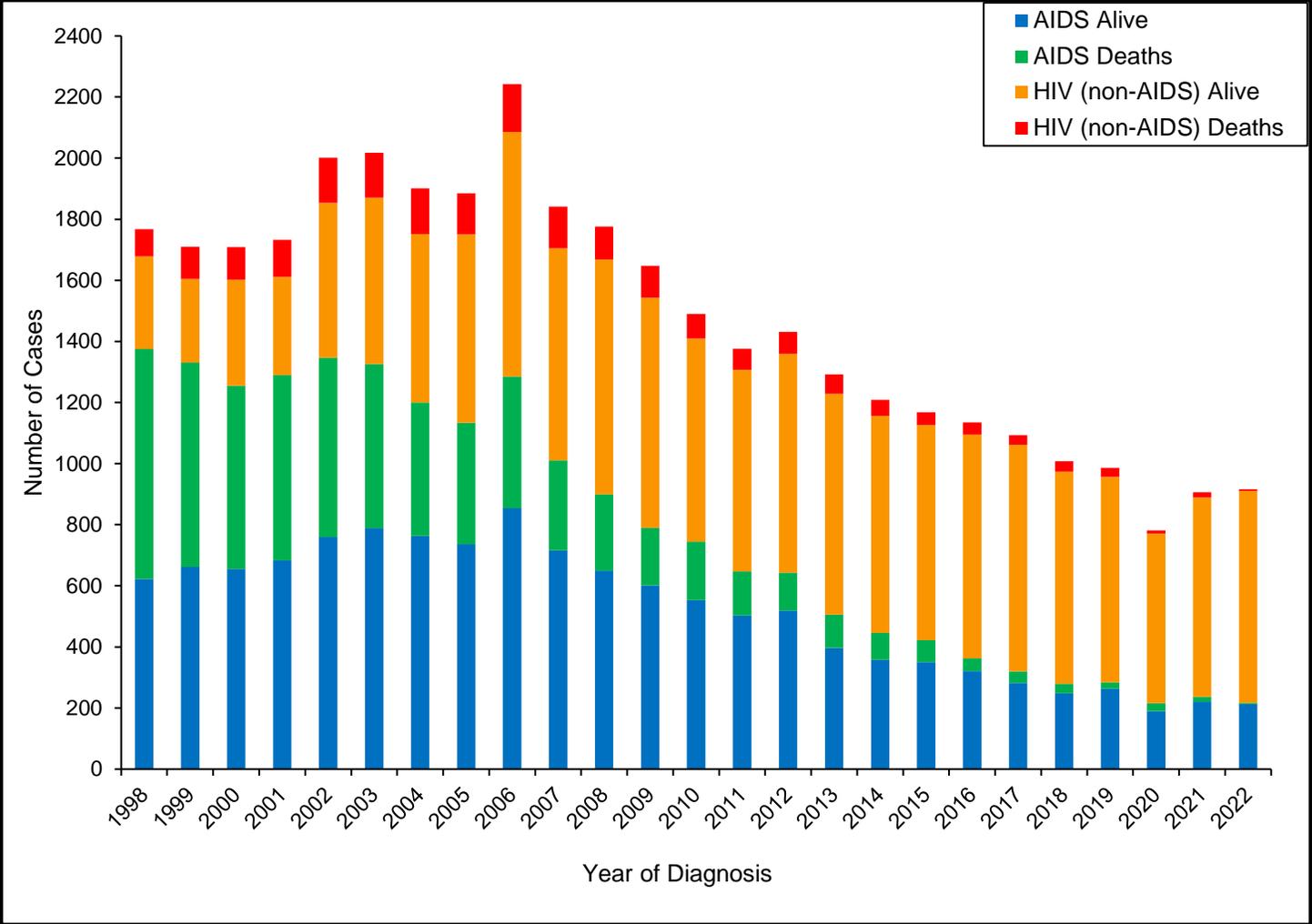


Table 1 provides the number of new HIV disease diagnoses among residents of Pennsylvania from 1980 through 2022. Pediatric diagnoses are those that were diagnosed with HIV infection before age 13. The number of children perinatally exposed to HIV disease, has declined sharply due mainly to prevention efforts among pregnant persons.

Table 1: Annual Diagnoses of HIV Disease Among Residents of Pennsylvania, 1980-2022

Year of Diagnosis	Adult/Adolescent	Pediatric	Total
1980	3	0	3
1981	8	1	9
1982	49	3	52
1983	108	5	113
1984	259	4	263
1985	786	26	812
1986	1,072	16	1,088
1987	1,535	18	1,553
1988	1,898	23	1,921
1989	2,411	23	2,434
1990	2,916	40	2,956
1991	2,945	38	2,983
1992	2,808	67	2,875
1993	2,297	69	2,366
1994	2,175	39	2,214
1995	2,096	43	2,139
1996	1,986	31	2,017
1997	1,828	24	1,852
1998	1,732	35	1,767
1999	1,680	30	1,710
2000	1,690	19	1,709
2001	1,710	22	1,732
2002	1,983	18	2,001
2003	1,993	24	2,017
2004	1,892	9	1,901
2005	1,872	13	1,885
2006	2,229	13	2,242
2007	1,830	11	1,841
2008	1,763	13	1,776
2009	1,641	6	1,647
2010	1,478	12	1,490
2011	1,370	6	1,376
2012	1,422	9	1,431
2013	1,288	4	1,292
2014	1,206	3	1,209
2015	1,162	6	1,168
2016	1,132	3	1,135
2017	1,092	1	1,093
2018	1,007	1	1,008
2019	986	0	986
2020	779	2	781
2021	904	2	906
2022	915	1	916
Total	63,936	733	64,669

Table 2 below depicts HIV disease by sex, race/ethnicity, and year of diagnosis from 2017-2022 and cumulative data from 1980 to 2022. HIV disease has had a differential impact on various racial/ethnic groups with a disproportionate impact on Black persons/African Americans for both males and females. In 2022, Black/African American males account for 41% of all male individuals while Black/African American females were 46% of all new HIV diagnoses among females. Overall, non-White individuals accounted for 65.5% of all persons diagnosed with HIV disease in 2022.

Table 2: Number of Cases of HIV Disease by Sex, Race/Ethnicity and Year of Diagnosis, Pennsylvania, 2016-2022

	2017		2018		2019		2020		2021*		2022*		TOTAL (1980-2022)	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total Male	855	100	785	100	758	100	616	100	716	100	722	100	48,886	100
White	261	31	243	31	236	31	190	31	231	32	228	32	17,852	37
Black/African American	418	49	341	43	331	44	285	46	311	43	299	41	22,426	46
Hispanic/Latinx	140	16	155	20	146	19	109	18	141	20	155	22	6,662	14
Asian & Native Hawaiian/Other Pacific Islander	12	1	16	2	14	2	7	1	8	1	11	2	340	1
American Indian/Alaska Native	2	0	1	0	1	0	4	1	2	0	3	0	51	0
Multiple races**	22	3	29	4	30	4	21	3	23	3	26	4	1,555	3
Total Female	238	100	223	100	228	100	165	100	190	100	194	100	15,783	100
White	48	20	51	23	50	22	38	23	41	22	52	27	3,323	21
Black/African American	132	55	115	23	129	57	95	58	110	58	90	46	9,116	58
Hispanic/Latinx	51	21	46	23	42	18	24	15	27	14	39	20	2,550	16
Asian & Native Hawaiian/Other Pacific Islander	2	1	1	23	0	0	0	0	3	2	4	2	89	1
American Indian/Alaska Native	0	0	0	23	0	0	0	0	0	0	0	0	15	0
Multiple races**	5	2	10	23	7	3	8	5	9	5	9	5	690	4
Total	1,093	100	1,008	100	986	100	781	100	906	100	916	100	64,669	100

* Count may be incomplete due to lag in reporting.

** Multiple races is a selection which encompasses individuals indicating one or more racial categories.

Note: Percentages may not add to 100% due to 'rounding.'

Table 3 below provides a tabulation of all HIV disease diagnoses among Pennsylvania residents from 2017-2022 and cumulative data from 1980 to 2022. A person may be diagnosed with HIV disease at any age, but many of the persons are diagnosed between ages 15 and 44. In the past five years, persons in this age range have accounted for the highest proportions of the new diagnoses each year.

Table 3: Number of Cases of HIV Disease by Age at Diagnosis and Year of Diagnosis in Pennsylvania, 2017-2022

Age group (years)	2017		2018		2019		2020		2021*		2022*		TOTAL (1980-2022)	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
0 - 12	1	0	1	0	0	0	2	0	2	0	1	0	733	1
13 - 14	0	0	0	0	1	0	0	0	0	0	1	0	90	0
15 - 24	259	24	231	23	214	22	164	21	183	20	149	16	8,871	14
25 - 34	351	32	346	34	365	37	285	36	348	38	357	39	21,022	33
35 - 44	215	20	171	17	169	17	135	17	183	20	212	23	19,263	30
45 - 54	154	14	146	14	128	13	111	14	110	12	108	12	10,198	16
55 - 64	80	7	92	9	86	9	69	9	68	8	66	7	3,533	5
65+	33	3	21	2	23	2	15	2	12	1	22	2	959	1
TOTAL	1,093	100	1,008	100	986	100	781	100	906	100	916	100	64,669	100

* Count may be incomplete due to lag in reporting.

Note: Percentages may not add to 100% due to 'rounding.'

Table 4 below provides a summary of all reported cases of HIV disease among Pennsylvania residents from 2017-2022 and cumulative data from 1980 to 2022 by mode of transmission. The most common means of transmission are male-to-male sexual (MSM) contact, heterosexual sex, and Injection drug use (IDU). Most pediatric HIV disease cases occur through perinatal exposure. The predominant mode of transmission in the past 5 years was MSM, and it accounts for 52% of new diagnoses while 15% of transmission occurred through heterosexual sex in 2022. IDU (including those with combined MSM and IDU risk factors) accounted for 13% of new diagnoses in 2022.

Table 4: Number of Cases of HIV Disease by Mode of Transmission and Year of Diagnosis in Pennsylvania, 2017-2022

ALL MODES	2017		2018		2019		2020		2021*		2022*		TOTAL (1980-2022)	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Heterosexual contact	263	24	227	23	206	21	135	17	218	24	138	15	15,805	24
Injection drug use (IDU)	81	7	104	10	103	10	48	6	66	7	82	9	15,489	24
Male-to-male sexual (MSM) contact	563	52	482	48	529	54	407	52	476	53	472	52	25,356	39
MSM/IDU	24	2	42	4	36	4	43	6	42	5	34	4	3,193	5
Other risks**	0	0	0	0	0	0	0	0	0	0	0	0	478	1
Pediatric mode***	2	0	3	0	0	0	2	0	1	0	2	0	697	1
Unknown risks	160	15	150	15	112	11	146	19	103	11	188	20	3,651	6
All Modes	1,093	100	1,008	100	986	100	781	100	906	100	916	100	64,669	100

* Count may be incomplete due to lag in reporting.

** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

*** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

Note: Percentage may not add to 100% due to "rounding."

Table 5.1 below provides a summary of all reported new diagnoses of HIV disease during the first two decades of the epidemic among Pennsylvania residents from 1980-1990 and from 1991 to 2000 by mode of transmission and race/ethnicity. This table shows that MSM was the most common mode of transmission and accounted for 52% of all reported cases and IDU accounted 27% during the first decade (1980-1990). The order of dominance was reversed in the second decade, where IDU became more common accounting for 36% while MSM accounted for 32% of all reported cases.

Table 5.1: Number of HIV Disease by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in Pennsylvania, 1980-1990, 1991-2000

	White		Black/African American		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total (1980-1990)	5,460	100	4,248	100	1,312	100	23	100	4	100	157	100	11,204	100
Heterosexual Contact	233	4	323	8	144	11	2	9	0	0	9	6	711	6
IDU	693	13	1540	36	786	60	1	4	1	25	55	35	3,076	27
MSM	3739	68	1752	41	224	17	17	74	2	50	63	40	5,797	52
MSM/IDU	331	6	435	10	100	8	1	4	0	0	27	17	894	8
Other risks**	308	6	28	1	9	1	1	4	0	0	0	0	346	3
Pediatric mode***	53	1	65	2	30	2	0	0	1	25	1	1	150	1
Unknown risks	103	2	105	2	19	1	1	4	0	0	2	1	230	2
Total (1991-2000)	6,624	100	11,477	100	2,845	100	65	100	11	100	610	100	21,632	100
Heterosexual Contact	870	13	2,704	24	718	25	19	29	3	27	127	21	4,441	21
IDU	1,477	22	4,777	42	1,380	49	4	6	2	18	231	38	7,872	36
MSM	3,590	54	2,754	24	392	14	28	43	5	45	166	27	6,935	32
MSM/IDU	334	5	696	6	147	5	1	2	0	0	53	9	1,230	6
Other risks**	81	1	23	0	5	0	5	8	0	0	2	0	116	1
Pediatric mode***	50	1	241	2	71	2	1	2	0	0	11	2	374	2
Unknown risks	222	3	282	2	132	5	7	11	1	9	20	3	664	3

* Multirace is a selection which encompasses individuals indicating one or more racial categories.

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Note: Percentage may not add to 100% due to "rounding."

Table 5.2 below provides a summary of all reported new diagnoses of HIV disease during 2001-2010 and 2011-2022 among Pennsylvania residents by mode of transmission and race/ethnicity. This table shows that heterosexual transmission was the most common mode of transmission in 2001-2010 with 37% while MSM accounted for 32% of all reported cases in 2011-2022. IDU and MSM/IDU transmission accounted for 23% during 2001-2010 and only accounted for 11% in the 2011-2022 period. During the period 2011-2022, MSM became the most common mode of transmission and followed by heterosexual contact.

Table 5.2: Number of HIV Disease by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in Pennsylvania, 2001-2010, 2011-2022

	White		Black/African American		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total (2001-2010)	5,303	100	9,232	100	2,817	100	143	100	22	100	1,015	100	18,532	100
Heterosexual Contact	1,175	22	4,291	46	1,009	36	62	43	11	50	367	36	6,915	37
IDU	788	15	1,754	19	785	28	9	6	2	9	203	20	3,541	19
MSM	2,606	49	2,304	25	629	22	53	37	9	41	304	30	5,905	32
MSM/IDU	259	5	246	3	95	3	2	1	0	0	56	6	658	4
Other risks**	8	0	5	0	3	0	0	0	0	0	0	0	16	0
Pediatric mode***	18	0	82	1	31	1	2	1	0	0	4	0	137	1
Unknown risks	449	8	550	6	265	9	15	10	0	0	81	8	1,360	7
Total (2011-2022)	3,788	100	6,585	100	2,238	100	198	100	29	100	463	100	13,301	100
Heterosexual Contact	705	19	2,187	33	629	28	60	30	10	34	147	32	3,738	28
IDU	454	12	295	4	219	10	5	3	1	3	27	6	1,001	8
MSM	2,160	57	3,119	47	1,090	49	104	53	16	55	230	50	6,719	51
MSM/IDU	212	6	101	2	73	3	5	3	1	3	18	4	410	3
Pediatric mode***	3	0	21	0	7	0	1	1	0	0	4	1	36	0
Unknown risks	254	7	862	13	220	10	23	12	1	3	37	8	1,397	10

* Multirace is a selection which encompasses individuals indicating one or more racial categories.

** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

*** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Note: Percentage may not add to 100% due to "rounding."

Table 5A.1 provides the number of new diagnoses of HIV disease among **males** during the first two decades of the epidemic among Pennsylvania residents from 1980-1990 and from 1991-2000 by mode of transmission and race/ethnicity. While MSM had the highest proportion of cases of HIV disease for all decades, IDU saw an increase in the second decade with a 48% increase in cases between the first and second decade.

Table 5A.1: Number of HIV Disease Among Males by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in Pennsylvania, 1980-1990, 1991-2000

	White		Black/African American		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total Male (1980-1990)	4,979	100	3,537	100	1,010	100	20	100	2	100	129	100	9,677	100
Heterosexual Contact	83	2	113	3	33	3	1	5	0	0	1	1	231	2
IDU	448	9	1,102	31	610	60	0	0	0	0	35	27	2,195	23
MSM	3,739	75	1,752	50	224	22	17	85	2	100	63	49	5,797	60
MSM/IDU	331	7	435	12	100	10	1	5	0	0	27	21	894	9
Other risks**	254	5	16	0	9	1	0	0	0	0	0	0	279	3
Pediatric mode***	44	1	41	1	21	2	0	0	0	0	1	1	107	1
Unknown risks	80	2	78	2	13	1	1	5	0	0	2	2	174	2
Total Male (1991-2000)	5,447	100	8,022	100	1,910	100	48	100	8	100	416	100	15,851	100
Heterosexual Contact	351	6	995	12	214	11	9	19	1	13	46	11	1,616	10
IDU	927	17	3,278	41	1,038	54	2	4	1	13	140	34	5,387	34
MSM	3,590	66	2,754	34	392	21	28	58	5	63	166	40	6,935	44
MSM/IDU	334	6	696	9	147	8	1	2	0	0	53	13	1,230	8
Other risks**	62	1	11	0	4	0	3	6	0	0	1	0	81	1
Pediatric mode***	32	1	115	1	46	2	1	2	0	0	1	0	195	1
Unknown risks	151	3	173	2	69	4	4	8	1	13	9	2	407	3

* Multirace is a selection which encompasses individuals indicating one or more racial categories.

** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

*** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Note: Percentage may not add to 100% due to "rounding."

Table 5A.2 below provides summary of all reported new diagnoses of HIV disease among **males** during the 2001-2010 and 2011-2022 among Pennsylvania residents by mode of transmission and race/ethnicity. This table shows that heterosexual transmission was increasingly common among males in 2001-2010 while MSM accounted for 65% of all reported cases in 2011-2022. IDU and MSM/IDU transmission accounted for 23% during 2001-2010 and only 10% in the 2011-2022 period.

Table 5A.2: Number of HIV Disease Among Males by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in Pennsylvania, 2001-2010, 2011-2022

	White		Black/African American		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total Male (2001-2010)	4,244	100	6,003	100	1,966	100	114	100	13	100	655	100	12,995	100
Heterosexual Contact	604	14	1,960	33	454	23	41	36	4	31	141	22	3,204	25
IDU	483	11	1,142	19	606	31	8	7	0	0	120	18	2,359	18
MSM	2,606	61	2,304	38	629	32	53	46	9	69	304	46	5,905	45
MSM/IDU	259	6	246	4	95	5	2	2	0	0	56	9	658	5
Other risks**	6	0	0	0	3	0	0	0	0	0	0	0	9	0
Pediatric mode***	8	0	40	1	17	1	0	0	0	0	2	0	67	1
Unknown risks	278	7	311	5	162	8	10	9	0	0	32	5	793	6
Total Male (2011-2022)	3,182	100	4,864	100	1,776	100	158	100	28	100	355	100	10,363	100
Heterosexual Contact	392	12	1,068	22	331	19	31	20	9	32	77	22	1,908	18
IDU	258	8	188	4	161	9	5	3	1	4	15	4	628	6
MSM	2,160	68	3,119	64	1,090	61	104	66	16	57	230	65	6,719	65
MSM/IDU	212	7	101	2	73	4	5	3	1	4	18	5	410	4
Pediatric mode***	1	0	10	0	4	0	0	0	0	0	2	1	17	0
Unknown risks	159	5	378	8	117	7	13	8	1	4	13	4	681	7

* Multirace is a selection which encompasses individuals indicating one or more racial categories.

** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

*** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Note: Percentage may not add to 100% due to "rounding."

Table 5B.1 provides the number of new diagnoses of HIV disease among **females** during the first two decades of the epidemic among Pennsylvania residents from 1980-1990 and from 1991-2000 by mode of transmission and race/ethnicity. While IDU had the highest proportion of cases of HIV disease for the first decade, heterosexual contact became the most common during the second with 49% of all reported HIV cases.

Table 5B.1: Number of HIV Disease Among Females by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in Pennsylvania, 1980-1990, 1991-2000

	White		Black/African American		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total Female (1980-1990)	481	100	711	100	302	100	3	100	2	100	28	100	1,527	100
Heterosexual Contact	150	31	210	30	111	37	1	33	0	0	8	29	480	31
IDU	245	51	438	62	176	58	1	33	1	50	20	71	881	58
Other risks**	54	11	12	2	0	0	1	33	0	0	0	0	67	4
Pediatric mode***	9	2	24	3	9	3	0	0	1	50	0	0	43	3
Unknown risks	23	5	27	4	6	2	0	0	0	0	0	0	56	4
Total Female (1991-2000)	1,177	100	3,455	100	935	100	17	100	3	100	194	100	5,781	100
Heterosexual Contact	519	44	1,709	49	504	54	10	59	2	67	81	42	2,825	49
IDU	550	47	1,499	43	342	37	2	12	1	33	91	47	2,485	43
Other risks**	19	2	12	0	1	0	2	12	0	0	1	1	35	1
Pediatric mode***	18	2	126	4	25	3	0	0	0	0	10	5	179	3
Unknown risks	71	6	109	3	63	7	3	18	0	0	11	6	257	4

* Multirace is a selection which encompasses individuals indicating one or more racial categories.

** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

*** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Note: Percentage may not add to 100% due to "rounding."

Table 5B.2 below provides a summary of all reported new diagnoses of HIV disease among **females** during 2001-2010 and 2011-2022 among Pennsylvania residents by mode of transmission and race/ethnicity. The predominant mode of transmission for females during these two decades was Heterosexual contact. Another notable observation during these two decades was that persons reported with IDU as mode of HIV transmission declined from 21% to 13%.

Table 5B.2: Number of HIV Disease Among Females by Mode of Transmission, Race/Ethnicity, and Decades of Diagnosis in Pennsylvania, 2001-2010, 2011-2022

	White		Black/African American		Hispanic/Latinx		Asian & Native Hawaiian/Other Pacific Islander		American Indian/Alaska Native		Multirace*		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total Female (2001-2010)	1,059	100	3,230	100	850	100	29	100	9	100	360	100	5,537	100
Heterosexual Contact	571	54	2,332	72	554	65	21	72	7	78	226	63	3,711	67
IDU	305	29	612	19	179	21	1	3	2	22	83	23	1,182	21
Other risks**	2	0	5	0	0	0	0	0	0	0	0	0	7	0
Pediatric mode***	10	1	42	1	14	2	2	7	0	0	2	1	70	1
Unknown risks	171	16	239	7	103	12	5	17	0	0	49	14	567	10
Total Female (2011-2022)	606	100	1,721	100	462	100	40	100	1	100	108	100	2,938	100
Heterosexual Contact	313	52	1,119	65	298	65	29	73	1	100	70	65	1,830	62
IDU	196	32	107	6	58	13	0	0	0	0	12	11	373	13
Pediatric mode***	2	0	11	1	3	1	1	3	0	0	2	2	19	1
Unknown risks	95	16	484	28	103	22	10	25	0	0	24	22	716	24

* Multirace is a selection which encompasses individuals indicating one or more racial categories.

** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

*** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Note: Percentage may not add to 100% due to 'rounding.'

Table 6 below provides a summary of all reported new diagnoses of HIV disease by vital status and county of residence at diagnosis. The majority of persons diagnosed with HIV disease in Pennsylvania were residents of large population centers, such as Philadelphia and Allegheny counties.

Table 6: Cumulative Cases of HIV Disease by Vital Status and County of Residence at Diagnosis, Pennsylvania, 1980-2022

County	Presumed alive	Reported dead	Cumulative cases
Philadelphia	18,056	15,772	33,828
Allegheny	3,052	2,169	5,221
Delaware	1,837	1,414	3,251
Montgomery	1,238	844	2,082
Dauphin	1,124	798	1,922
Lehigh	1,071	594	1,665
Berks	1,056	725	1,781
Lancaster	879	629	1,508
York	863	543	1,406
Bucks	860	651	1,511
Chester	583	502	1,085
Luzerne	441	291	732
Northampton	419	301	720
Cumberland	378	262	640
Erie	370	234	604
Lackawanna	321	203	524
Monroe	292	198	490
Lycoming	206	205	411
Westmoreland	188	197	385
Centre	183	82	265
Lebanon	166	111	277
Franklin	150	98	248
Schuylkill	143	109	252
Beaver	135	125	260
Cambria	129	118	247
Washington	113	119	232
Union	110	63	173
Fayette	104	60	164
Adams	96	57	153
Butler	96	52	148
Pike	95	45	140
Somerset	92	52	144
Mercer	88	62	150
Carbon	82	51	133
Blair	81	87	168

County	Presumed alive	Reported dead	Cumulative cases
Lawrence	76	45	121
Northumberland	75	74	149
Clearfield	74	47	121
Crawford	74	48	122
Huntingdon	64	55	119
Columbia	63	36	99
Wayne	57	68	125
Bradford	43	34	77
Indiana	41	34	75
Armstrong	36	34	70
Bedford	34	20	54
McKean	27	27	54
Perry	27	27	54
Snyder	23	9	32
Venango	22	28	50
Greene	21	29	50
Montour	21	12	33
Susquehanna	21	19	40
Warren	21	11	32
Clarion	20	10	30
Mifflin	20	20	40
Clinton	18	9	27
Tioga	18	20	38
Wyoming	18	14	32
Jefferson	14	10	24
Forest	13	1	14
Juniata	12	12	24
Fulton	10	3	13
Elk	7	5	12
Sullivan	6	3	9
Potter	3	6	9
Cameron	0	0	0
STATE TOTAL	36,076	28,593	64,669

Table 7 below provides a tabulation of all reported cases and rates of HIV disease by county of residence and year of diagnosis (2018 through 2022). In 2021, the rate of new HIV diagnoses for Pennsylvania was 7.0 per 100,000 population. Philadelphia County had the highest rate at 23.2 per 100,000 population in 2021. Note: The HIV rate data for 2021 uses Pennsylvania estimated population data for 2020.

Table 7: Annual Diagnoses and Rate of HIV Disease by County of Residence in Pennsylvania, 2018-2022

County	2019	2020	2021*	2022*	2021 rate per 100,000**
Adams	5	1	3	4	2.9
Allegheny	76	79	89	72	7.2
Armstrong	0	0	0	1	0.0
Beaver	9	9	2	6	1.2
Bedford	0	1	0	4	0.0
Berks	27	9	29	47	6.8
Blair	3	1	2	1	1.6
Bradford	3	2	1	0	1.7
Bucks	27	24	20	30	3.1
Butler	7	3	2	0	1.0
Cambria	5	3	6	7	4.5
Cameron	0	0	0	0	0.0
Carbon	1	4	2	5	3.1
Center	5	3	1	5	0.6
Chester	18	13	18	14	3.3
Clarion	0	0	1	0	2.7
Clearfield	4	1	1	1	1.2
Clinton	1	0	0	2	0.0
Columbia	0	1	1	2	1.5
Crawford	2	2	1	3	1.2
Cumberland	9	13	17	9	6.5
Dauphin	25	26	38	28	13.2
Delaware	67	49	55	47	9.6
Elk	1	0	0	0	0.0
Erie	13	5	18	12	6.7
Fayette	4	5	5	3	3.9
Forest	0	0	0	0	0.0
Franklin	2	3	9	8	5.8
Fulton	0	1	0	1	0.0
Greene	1	0	1	0	2.8
Huntingdon	0	0	2	3	4.6
Indiana	2	0	0	2	0.0
Jefferson	0	0	0	0	0.0
Juniata	0	0	0	0	0.0
Lackawanna	10	8	14	20	6.5

County	2019	2020	2021*	2022*	2021 rate per 100,000**
Lancaster	24	18	14	17	2.5
Lawrence	4	3	3	6	3.5
Lebanon	7	3	8	7	5.6
Lehigh	28	20	23	31	6.1
Luzerne	16	21	27	19	8.3
Lycoming	4	2	6	4	5.3
McKean	1	2	0	0	0.0
Mercer	4	2	1	9	0.9
Mifflin	1	2	0	1	0.0
Monroe	13	6	11	16	6.5
Montgomery	43	34	24	34	2.8
Montour	1	0	4	1	22.1
Northampton	24	14	19	5	6.1
Northumberland	0	2	2	3	2.2
Perry	0	0	0	0	0.0
Philadelphia	444	336	366	379	23.2
Pike	1	1	1	3	1.7
Potter	0	0	1	0	6.2
Schuylkill	2	5	5	9	3.5
Snyder	0	1	2	2	5.0
Somerset	2	2	4	1	5.4
Sullivan	0	0	0	0	0.0
Susquehanna	0	0	0	0	0.0
Tioga	0	0	0	0	0.0
Union	0	3	1	4	2.3
Venango	2	0	1	0	2.0
Warren	0	1	0	0	0.0
Washington	4	3	6	2	2.9
Wayne	0	3	1	0	1.9
Westmoreland	7	6	6	1	1.7
Wyoming	1	3	0	0	0.0
York	26	22	32	25	7.0
State total	986	781	906	916	7.0

* Count may be incomplete due to lag in reporting.
 **Rates based on 2021 estimated population.

Figure 4 below depicts the rate of new diagnoses of HIV disease in 2021 by county of residence at diagnosis. The overall HIV rate in Pennsylvania in 2021 was 7 per 100,000 population. While only 1 out of 48 rural counties saw a rate higher than the state rate, four out of 19 urban counties experienced rates higher than the state. The highest rate was observed in Philadelphia County at 23.2 per 100,000 population.

Figure 4: Rate* (Per 100,000 County Residents) of New HIV Disease Diagnoses by County, Pennsylvania, 2021

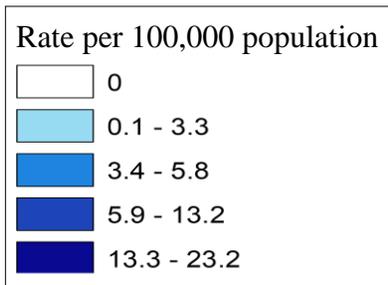
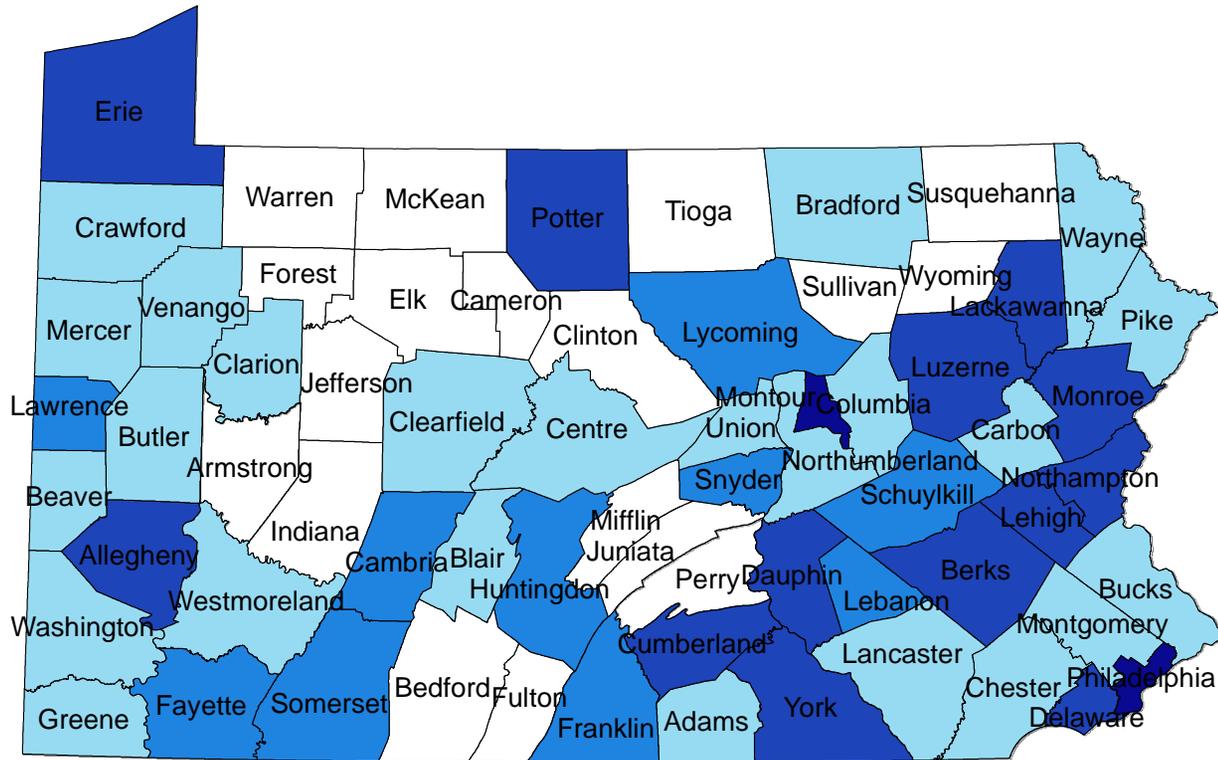


Table 8 provides a summary of the number of new diagnoses of HIV disease by sex, race/ethnicity, age at diagnosis, mode of transmission and HIV Ryan White Part B Subrecipients Region.

Table 8: Characteristics of HIV Disease by Time Interval of Diagnosis and HIV Ryan White Part B Subrecipients Region, Pennsylvania, 2017-2022

		Prior to 2017		2017		2018		2019		2020		2021*		2022*		TOTAL (1980-2022)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	TOTAL	58,979	100	1,093	100	1,008	100	986	100	781	100	906	100	916	100	64,669	100
SEX	Male	44,434	75	855	78	785	78	758	77	616	79	716	79	722	79	48,886	76
	Female	14,545	25	238	22	223	22	228	23	165	21	190	21	194	21	15,783	24
RACE/ETHNICITY	Hispanic/Latinx	8,137	14	191	17	201	20	188	19	133	17	168	19	194	21	9,212	14
	American Indian/Alaska Native	53	0	2	0	1	0	1	0	4	1	2	0	3	0	66	0
	Asian & Native Hawaiian/Other Pacific Islander	351	1	14	1	17	2	14	1	7	1	11	1	15	2	429	1
	Black/African American	28,886	49	550	50	456	45	460	47	380	49	421	46	389	42	31,542	49
	White	19,506	33	309	28	294	29	286	29	228	29	272	30	280	31	21,175	33
	Multirace	2,046	3	27	2	39	4	37	4	29	4	32	4	35	4	2,245	3
AGE (YEARS)	<13	726	1	1	0	1	0	0	0	2	0	2	0	1	0	733	1
	13 - 14	88	0	0	0	0	0	1	0	0	0	0	0	1	0	90	0
	15 - 24	7,671	13	259	24	231	23	214	22	164	21	183	20	149	16	8,871	14
	25 - 34	18,970	32	351	32	346	34	365	37	285	36	348	38	357	39	21,022	33
	35 - 44	18,178	31	215	20	171	17	169	17	135	17	183	20	212	23	19,263	30
	45 - 54	9,441	16	154	14	146	14	128	13	111	14	110	12	108	12	10,198	16
	55 - 64	3,072	5	80	7	92	9	86	9	69	9	68	8	66	7	3,533	5
	65+	833	1	33	3	21	2	23	2	15	2	12	1	22	2	959	1
MODE OF TRANSMISSION	Male-to-male sexual (MSM) contact	22,427	38	563	52	482	48	529	54	407	52	476	53	472	52	25,356	39
	Injection drug use (IDU)	15,005	25	81	7	104	10	103	10	48	6	66	7	82	9	15,489	24
	MSM and IDU	2,972	5	24	2	42	4	36	4	43	6	42	5	34	4	3,193	5
	Heterosexual contact	14,618	25	263	24	227	23	206	21	135	17	218	24	138	15	15,805	24
	Other**	478	1	0	0	0	0	0	0	0	0	0	0	0	0	478	1
	Pediatric mode***	687	1	2	0	3	0	0	0	2	0	1	0	2	0	697	1
	Unknown risk	2,792	5	160	15	150	15	112	11	146	19	103	11	188	20	3,651	6
REGIONAL SUBRECIPIENT	Division of HIV Health	38,456	65	655	60	604	60	599	61	456	58	483	53	504	55	41,757	65
	AIDSNET	4,492	8	96	9	98	10	95	10	58	7	89	10	113	12	5,041	8
	Northeast United Way of the Wyoming Valley	1,365	2	38	3	41	4	28	3	36	5	43	5	42	5	1,593	2
	North Central District Allied Connections	1,216	2	25	2	11	1	14	1	14	2	19	2	23	3	1,322	2
	Southcentral- Family Health Council of Central PA	5,973	10	123	11	104	10	102	10	91	12	125	14	108	12	6,626	10
	Southwest- Jewish Healthcare Foundation	6,308	11	128	12	117	12	117	12	110	14	121	13	95	10	6,996	11
	Northwest -PA Thrive Partnership	1,169	2	28	3	33	3	31	3	16	2	26	3	31	3	1,334	2

* Count may be incomplete due to lag in reporting as well as effects of COVID 19 pandemic which began in 2019 and continued throughout 2021.

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Note: Percentage may not add to 100% due to 'rounding.'

Table 9 below provides a summary of the number of new diagnoses of HIV disease by sex, race/ethnicity, age at diagnosis, mode of transmission and county of residence for the Division of HIV Health region.

Table 9: Characteristics of HIV Disease by Time Interval of Diagnosis for Division of HIV Health Region, Pennsylvania, 2017-2022

Bucks, Delaware, Chester, Montgomery, and Philadelphia counties

		Prior to 2017		2017		2018		2019		2020		2021*		2022*		TOTAL (1980-2022)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	TOTAL	38,456	100	655	100	604	100	599	100	456	100	483	100	504	100	41,757	100
SEX	Male	28,733	75	517	79	462	76	455	76	345	76	380	79	383	76	31,275	75
	Female	9,723	25	138	21	142	24	144	24	111	24	103	21	121	24	10,482	25
RACE/ETHNICITY	Hispanic/Latinx	4,491	12	97	15	115	19	94	16	81	18	65	13	95	19	5,037	12
	American Indian/Alaska Native	44	0	2	0	1	0	1	0	2	0	1	0	3	1	54	0
	Asian & Native Hawaiian/Other Pacific Islander	253	1	8	1	13	2	9	2	4	1	8	2	11	2	306	1
	Black/African American	23,340	61	414	63	326	54	359	60	277	61	280	58	270	54	25,266	61
	White	9,320	24	122	19	137	23	118	20	83	18	116	24	107	21	10,004	24
	Multirace	1,008	3	12	2	12	2	18	3	9	2	13	3	18	4	1,090	3
AGE (YEARS)	<13	476	1	0	0	0	0	0	0	1	0	2	0	1	0	480	1
	13 - 14	46	0	0	0	0	0	1	0	0	0	0	0	1	0	48	0
	15 - 24	5,113	13	158	24	146	24	141	24	93	20	99	20	79	16	5,829	14
	25 - 34	12,219	32	236	36	203	34	213	36	174	38	189	39	200	40	13,434	32
	35 - 44	11,724	30	127	19	109	18	107	18	80	18	97	20	121	24	12,365	30
	A45 - 54	6,231	16	76	12	79	13	74	12	62	14	50	10	53	11	6,625	16
	55 - 64	2,073	5	34	5	57	9	49	8	39	9	41	8	33	7	2,326	6
	65+	574	1	24	4	10	2	14	2	7	2	5	1	16	3	650	2
MODE OF TRANSMISSION	Male-to-male sexual (MSM) contact	13,887	36	341	52	278	46	315	53	236	52	252	52	259	51	15,568	37
	Injection drug use (IDU)	10,381	27	51	8	73	12	81	14	32	7	54	11	61	12	10,733	26
	MSM and IDU	1,927	5	8	1	26	4	19	3	17	4	21	4	10	2	2,028	5
	Heterosexual contact	10,594	28	106	16	89	15	77	13	54	12	70	14	65	13	11,055	26
	Other**	164	0	0	0	0	0	0	0	0	0	0	0	0	0	164	0
	Pediatric mode***	450	1	1	0	2	0	0	0	1	0	1	0	2	0	457	1
	Unknown risk	1,053	3	148	23	136	23	107	18	116	25	85	18	107	21	1,752	4
COUNTY OF DIAGNOSIS	Bucks	1,349	4	25	4	36	6	27	5	24	5	20	4	30	6	1,511	4
	Chester	992	3	16	2	14	2	18	3	13	3	18	4	14	3	1,085	3
	Delaware	2,910	8	58	9	65	11	67	11	49	11	55	11	47	9	3,251	8
	Montgomery	1,849	5	48	7	50	8	43	7	34	7	24	5	34	7	2,082	5
	Philadelphia	31,356	82	508	78	439	73	444	74	336	74	366	76	379	75	33,828	81

* Count may be incomplete due to lag in reporting.

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure).

Note: Percentage may not add to 100% due to "rounding."

Table 10 below provides a summary of the number of new diagnoses of HIV disease by sex, race/ethnicity, age at diagnosis, mode of transmission and county of residence for the AIDSNET region.

Table 10: Characteristics of HIV Disease by Time Interval of Diagnosis for AIDSNET Region, Pennsylvania, 2017-2022
Berks, Carbon, Lehigh, Monroe, Northampton, and Schuylkill counties

		Prior to 2017		2017		2018		2019		2020		2021*		2022*		Total (1980-2022)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	TOTAL	4,492	100	96	100	98	100	95	100	58	100	89	100	113	100	5,041	100
SEX	Male	3,090	69	69	72	76	78	75	79	41	71	65	73	94	83	3,510	70
	Female	1,402	31	27	28	22	22	20	21	17	29	24	27	19	17	1,531	30
RACE/ETHNICITY	Hispanic/Latinx	1,791	40	42	44	41	42	47	49	20	34	34	38	50	44	2,025	40
	American Indian/Alaska Native	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
	Asian & Native Hawaiian/Other Pacific Islander	12	0	1	1	0	0	1	1	1	2	1	1	1	1	17	0
	Black/African American	794	18	27	28	26	27	17	18	12	21	25	28	19	17	920	18
	White	1,681	37	25	26	27	28	29	31	21	36	26	29	40	35	1,849	37
	Multirace	213	5	1	1	4	4	1	1	4	7	3	3	3	3	229	5
AGE (YEARS)	<13	63	1	0	0	1	1	0	0	0	0	0	0	0	0	64	1
	13 - 14	9	0	0	0	0	0	0	0	0	0	0	0	0	0	9	0
	15 - 24	514	11	15	16	13	13	20	21	17	29	18	20	17	15	614	12
	25 - 34	1441	32	27	28	39	40	30	32	12	21	38	43	43	38	1630	32
	35 - 44	1459	32	21	22	13	13	14	15	13	22	12	13	25	22	1557	31
	45 - 54	705	16	18	19	23	23	19	20	12	21	14	16	16	14	807	16
	55 - 64	231	5	11	11	6	6	9	9	3	5	6	7	10	9	276	5
	65+	70	2	4	4	3	3	3	3	1	2	1	1	2	2	84	2
MODE OF TRANSMISSION	Male-to-male sexual (MSM) contact	1,224	27	44	46	40	41	50	53	27	47	45	51	60	53	1,490	30
	Injection drug use (IDU)	1,341	30	1	1	5	5	3	3	2	3	0	0	4	4	1,356	27
	MSM/IDU	182	4	2	2	1	1	2	2	1	2	2	2	5	4	195	4
	Heterosexual contact	1,127	25	45	47	43	44	37	39	20	34	35	39	13	12	1,320	26
	Other**	54	1	0	0	0	0	0	0	0	0	0	0	0	0	54	1
	Pediatric mode***	61	1	0	0	1	1	0	0	0	0	0	0	0	0	62	1
	Unknown risk	503	11	4	4	8	8	3	3	8	14	7	8	31	27	564	11
COUNTY OF DIAGNOSIS	Berks	1,604	36	36	38	29	30	27	28	9	16	29	33	47	42	1,781	35
	Carbon	118	3	2	2	1	1	1	1	4	7	2	2	5	4	133	3
	Lehigh	1,497	33	30	31	36	37	28	29	20	34	23	26	31	27	1,665	33
	Monroe	426	9	7	7	11	11	13	14	6	10	11	12	16	14	490	10
	Northampton	624	14	18	19	16	16	24	25	14	24	19	21	5	4	720	14
	Schuylkill	223	5	3	3	5	5	2	2	5	9	5	6	9	8	252	5

* Count may be incomplete due to lag in reporting.

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Table 11 provides a summary of the number of new diagnoses of HIV disease by sex, race/ethnicity, age at diagnosis, mode of transmission and county of residence for the Northeast United Way of the Wyoming Valley HIV region.

Table 11: Characteristics of HIV Disease by Time Interval of Diagnosis for Northeast United Way of the Wyoming Valley Region, Pennsylvania, 2017-2022

Lackawanna, Luzerne, Pike, Susquehanna, Wayne, and Wyoming counties

		Prior to 2017		2017		2018		2019		2020		2021*		2022*		Total (1980-2022)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	TOTAL	1,365	100	38	100	41	100	28	100	36	100	43	100	42	100	1,593	100
SEX	Male	1,054	77	29	76	29	71	19	68	30	83	34	79	33	79	1,228	77
	Female	311	23	9	24	12	29	9	32	6	17	9	21	9	21	365	23
RACE/ETHNICITY	Hispanic/Latinx	205	15	9	24	12	29	8	29	2	6	17	40	7	17	260	16
	American Indian/Alaska Native	3	0	0	0	0	0	0	0	1	3	0	0	0	0	4	0
	Asian & Native Hawaiian/Other Pacific Islander	3	0	0	0	0	0	0	0	1	3	0	0	0	0	4	0
	Black/African American	266	19	10	26	7	17	8	29	9	25	10	23	16	38	326	20
	White	822	60	18	47	19	46	11	39	20	56	16	37	17	40	923	58
	Multirace	66	5	1	3	3	7	1	4	3	8	0	0	2	5	76	5
AGE (YEARS)	<13	22	2	0	0	0	0	0	0	0	0	0	0	0	0	22	1
	13 - 14	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0
	15 - 24	141	10	11	29	11	27	8	29	5	14	9	21	7	17	192	12
	25 - 34	401	29	9	24	15	37	16	57	21	58	18	42	18	43	498	31
	35 - 44	459	34	7	18	6	15	0	0	5	14	6	14	6	14	489	31
	45 - 54	242	18	8	21	4	10	4	14	3	8	5	12	6	14	272	17
	55 - 64	72	5	3	8	3	7	0	0	1	3	5	12	5	12	89	6
	65+	24	2	0	0	2	5	0	0	1	3	0	0	0	0	27	2
MODE OF TRANSMISSION	Male-to-male sexual (MSM) contact	487	36	18	47	15	37	11	39	17	47	22	51	21	50	591	37
	Injection drug use (IDU)	354	26	2	5	2	5	1	4	3	8	1	2	6	14	369	23
	MSM/IDU	72	5	2	5	5	12	1	4	3	8	2	5	3	7	88	6
	Heterosexual contact	285	21	14	37	19	46	15	54	10	28	17	40	5	12	365	23
	Other**	17	1	0	0	0	0	0	0	0	0	0	0	0	0	17	1
	Pediatric mode***	23	2	0	0	0	0	0	0	0	0	0	0	0	0	23	1
	Unknown risk	127	9	2	5	0	0	0	0	3	8	1	2	7	17	140	9
COUNTY OF DIAGNOSIS	Lackawanna	453	33	7	18	12	29	10	36	8	22	14	33	20	48	524	33
	Luzerne	605	44	18	47	26	63	16	57	21	58	27	63	19	45	732	46
	Pike	127	9	6	16	1	2	1	4	1	3	1	2	3	7	140	9
	Susquehanna	36	3	2	5	2	5	0	0	0	0	0	0	0	0	40	3
	Wayne	120	9	1	3	0	0	0	0	3	8	1	2	0	0	125	8
	Wyoming	24	2	4	11	0	0	1	4	3	8	0	0	0	0	32	2

* Count may be incomplete due to lag in reporting.

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Note: Percentage may not add to 100% due to "rounding."

Table 12 below provides a summary of the number of new diagnoses of HIV disease by sex, race/ethnicity, age at diagnosis, mode of transmission and county of residence for the North Central District Allied Connections Region.

Table 12: Characteristics of HIV Disease by Time Interval of Diagnosis for North Central District Allied Connections Region, Pennsylvania, 2017–2022

Bradford, Centre, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, and Union counties

		Prior to 2017		2017		2018		2019		2020		2021*		2022*		TOTAL (1980-2022)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	TOTAL	1,053	100	23	100	11	100	14	100	11	100	18	100	19	100	1,149	100
SEX	Male	786	75	18	78	7	64	13	93	11	100	14	78	15	79	864	75
	Female	267	25	5	22	4	36	1	7	0	0	4	22	4	21	285	25
RACE/ETHNICITY	Hispanic/Latinx	112	11	3	13	2	18	1	7	3	27	3	17	3	16	127	11
	American Indian/Alaska Native	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Asian & Native Hawaiian/Other Pacific Islander	9	1	1	4	0	0	0	0	0	0	1	6	0	0	11	1
	Black/African American	323	31	3	13	1	9	2	14	1	9	3	17	4	21	337	29
	White	569	54	16	70	7	64	11	79	7	64	11	61	11	58	632	55
	Multirace	40	4	0	0	1	9	0	0	0	0	0	0	1	5	42	4
AGE (YEARS)	<13	13	1	0	0	0	0	0	0	0	0	0	0	0	0	13	1
	13 - 14	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
	15 - 24	133	13	7	30	4	36	3	21	2	18	1	6	2	11	152	13
	25 - 34	354	34	3	13	4	36	8	57	5	45	7	39	7	37	388	34
	35 - 44	333	32	6	26	1	9	3	21	1	9	2	11	4	21	350	30
	45 - 54	150	14	2	9	0	0	0	0	2	18	4	22	4	21	162	14
	55 - 64	55	5	4	17	1	9	0	0	1	9	3	17	2	11	66	6
	65+	13	1	1	4	1	9	0	0	0	0	1	6	0	0	16	1
MODE OF TRANSMISSION	Male-to-male sexual (MSM) contact	388	37	12	52	5	45	10	71	9	82	8	44	10	53	442	38
	Injection drug use (IDU)	307	29	1	4	3	27	0	0	0	0	1	6	0	0	312	27
	MSM/IDU	76	7	1	4	0	0	0	0	1	9	2	11	0	0	80	7
	Heterosexual contact	173	16	9	39	3	27	4	29	1	9	7	39	8	42	205	18
	Other**	19	2	0	0	0	0	0	0	0	0	0	0	0	0	19	2
	Pediatric mode***	10	1	0	0	0	0	0	0	0	0	0	0	0	0	10	1
	Unknown risk	80	8	0	0	0	0	0	0	0	0	0	0	1	5	81	7
COUNTY OF DIAGNOSIS	Bradford	67	6	4	17	0	0	3	21	2	18	1	6	0	0	77	7
	Centre	244	23	5	22	2	18	5	36	3	27	1	6	5	26	265	23
	Clinton	23	2	0	0	1	9	1	7	0	0	0	0	2	11	27	2
	Columbia	92	9	2	9	1	9	0	0	1	9	1	6	2	11	99	9
	Lycoming	386	37	5	22	4	36	4	29	2	18	6	33	4	21	411	36
	Montour	25	2	1	4	1	9	1	7	0	0	4	22	1	5	33	3
	Northumberland	136	13	5	22	1	9	0	0	2	18	2	11	3	16	149	13
	Potter	8	1	0	0	0	0	0	0	0	0	1	6	0	0	9	1
	Snyder	25	2	1	4	1	9	0	0	1	9	2	11	2	11	32	3
	Sullivan	9	1	0	0	0	0	0	0	0	0	0	0	0	0	9	1
	Tioga	38	4	0	0	0	0	0	0	0	0	0	0	0	0	38	3

* Count may be incomplete due to lag in reporting as well as effects of COVID 19 pandemic which began in 2019 and continued throughout 2021.

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Table 13 below provides a summary of the number of new diagnoses of HIV disease in Pennsylvania by sex, race/ethnicity, age at diagnosis, mode of transmission and county of residence for the Southcentral Family Health Council of Central Pennsylvania (SC-FHCCP) region.

Table 13: Characteristics of HIV Disease by Time Interval of Diagnosis SC-FHCCP Region, Pennsylvania, 2017–2022

Adams, Bedford, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, and York counties

		Prior to 2017		2017		2018		2019		2020		2021*		2022*		TOTAL (1980-2022)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	TOTAL	5,973	100	123	100	104	100	102	100	91	100	125	100	108	100	6,626	100
SEX	Male	4,410	74	91	74	84	81	79	77	77	85	103	82	93	86	4,937	75
	Female	1,563	26	32	26	20	19	23	23	14	15	22	18	15	14	1,689	25
RACE/ETHNICITY	Hispanic/Latinx	1,151	19	29	24	25	24	29	28	24	26	42	34	27	25	1,327	20
	American Indian/Alaska Native	3	0	0	0	0	0	0	0	1	1	0	0	0	0	4	0
	Asian & Native Hawaiian/Other Pacific Islander	26	0	4	3	0	0	4	4	0	0	1	1	2	2	37	1
	Black/African American	1,518	25	34	28	35	34	9	9	23	25	33	26	25	23	1,677	25
	White	2,927	49	52	42	38	37	50	49	38	42	40	32	50	46	3,195	48
	Multirace	348	6	4	3	6	6	10	10	5	5	9	7	4	4	386	6
AGE (YEARS)	<13	97	2	1	1	0	0	0	0	0	0	0	0	0	0	98	1
	13 - 14	16	0	0	0	0	0	0	0	0	0	0	0	0	0	16	0
	15 - 24	728	12	25	20	27	26	13	13	16	18	31	25	18	17	858	13
	25 - 34	1,956	33	36	29	34	33	37	36	30	33	39	31	39	36	2,171	33
	35 - 44	1,873	31	28	23	19	18	18	18	17	19	31	25	24	22	2,010	30
	45 - 54	966	16	20	16	16	15	18	18	19	21	16	13	15	14	1,070	16
	55 - 64	271	5	12	10	6	6	14	14	9	10	6	5	9	8	327	5
	65+	66	1	1	1	2	2	2	2	0	0	2	2	3	3	76	1
MODE OF TRANSMISSION	Male-to-male sexual (MSM) contact	2,225	37	59	48	58	56	57	56	45	49	68	54	60	56	2,572	39
	Injection drug use (IDU)	1,512	25	8	7	7	7	8	8	8	9	5	4	5	5	1,553	23
	MSM/IDU	297	5	2	2	2	2	2	2	7	8	7	6	10	9	327	5
	Heterosexual contact	1,278	21	49	40	35	34	34	33	21	23	43	34	21	19	1,481	22
	Other**	86	1	0	0	0	0	0	0	0	0	0	0	0	0	86	1
	Pediatric mode***	92	2	1	1	0	0	0	0	0	0	0	0	0	0	93	1
	Unknown risk	483	8	4	3	2	2	1	1	10	11	2	2	12	11	514	8
COUNTY OF DIAGNOSIS	Adams	134	2	4	3	2	2	5	5	1	1	3	2	4	4	153	2
	Bedford	45	1	0	0	4	4	0	0	1	1	0	0	4	4	54	1
	Blair	158	3	2	2	1	1	3	3	1	1	2	2	1	1	168	3
	Cumberland	581	10	8	7	3	3	9	9	13	14	17	14	9	8	640	10
	Dauphin	1,728	29	42	34	35	34	25	25	26	29	38	30	28	26	1,922	29
	Franklin	218	4	7	6	1	1	2	2	3	3	9	7	8	7	248	4
	Fulton	10	0	0	0	1	1	0	0	1	1	0	0	1	1	13	0
	Huntingdon	113	2	1	1	0	0	0	0	0	0	2	2	3	3	119	2
	Juniata	24	0	0	0	0	0	0	0	0	0	0	0	0	0	24	0
	Lancaster	1,397	23	23	19	15	14	24	24	18	20	14	11	17	16	1,508	23
	Lebanon	241	4	5	4	6	6	7	7	3	3	8	6	7	6	277	4
	Mifflin	36	1	0	0	0	0	1	1	2	2	0	0	1	1	40	1
	Perry	51	1	1	1	2	2	0	0	0	0	0	0	0	0	54	1
York	1,237	21	30	24	34	33	26	25	22	24	32	26	25	23	1,406	21	

* Count may be incomplete due to lag in reporting.

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Table 14 below provides a summary of the number of new diagnoses of HIV disease in Pennsylvania by sex, race/ethnicity, age at diagnosis, mode of transmission and county of residence for the Southwest- Jewish Healthcare Foundation region (SW-JHF).

Table 14: Characteristics of HIV Disease by Time Interval of Diagnosis for SW-JHF Region, Pennsylvania., 2017–2022

Allegheny, Armstrong, Beaver, Butler, Cambria, Fayette, Greene, Indiana, Somerset, Washington, and Westmoreland counties

		Prior to 2017		2017		2018		2019		2020		2021*		2022*		Total (1980-2022)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	TOTAL	6,308	100	128	100	117	100	117	100	110	100	121	100	95	100	6,996	100
SEX	Male	5,280	84	104	81	103	88	96	82	95	86	102	84	77	81	5,857	84
	Female	1,028	16	24	19	14	12	21	18	15	14	19	16	18	19	1,139	16
RACE/ETHNICITY	Hispanic/Latinx	226	4	7	5	3	3	5	4	2	2	5	4	8	9	256	4
	American Indian/Alaska Native	1	0	0	0	0	0	0	0	0	0	1	1	0	0	2	0
	Asian & Native Hawaiian/Other Pacific Islander	42	1	0	0	3	3	0	0	1	1	0	0	0	0	46	1
	Black/African American	2,303	37	50	39	51	44	51	44	53	48	60	50	42	44	2,610	37
	White	3,426	54	63	49	50	43	54	46	47	43	49	40	39	41	3,728	53
	Multirace	310	5	8	6	10	9	7	6	7	6	6	5	6	6	354	5
AGE (YEARS)	<13	37	1	0	0	0	0	0	0	1	1	0	0	0	0	38	1
	13 - 14	8	0	0	0	0	0	0	0	0	0	0	0	0	0	8	0
	15 - 24	856	14	34	27	24	21	24	21	27	25	19	16	21	21	1,005	14
	25 - 34	2,170	34	30	23	45	38	46	39	35	32	50	41	39	41	2,415	35
	35 - 44	1,908	30	20	16	16	14	25	21	17	15	29	24	22	23	2,037	29
	45 - 54	948	15	26	20	18	15	12	10	9	15	12	7	7	1,036	15	
	55 - 64	312	5	15	12	13	11	8	7	14	13	6	5	5	5	373	5
	65+	69	1	3	2	1	1	2	2	6	5	2	2	1	1	84	1
MODE OF TRANSMISSION	Male-to-male sexual (MSM) contact	3,679	58	80	63	74	63	72	62	62	56	72	60	51	54	4,090	58
	Injection drug use (IDU)	813	13	12	9	8	7	7	6	2	2	3	2	5	5	850	12
	MSM/IDU	324	5	4	3	6	5	9	8	13	12	6	5	2	2	364	5
	Heterosexual contact	912	14	31	24	25	21	29	25	26	24	35	29	21	22	1,079	15
	Other**	111	2	0	0	0	0	0	0	0	0	0	0	0	0	111	2
	Pediatric mode***	33	1	0	0	0	0	0	0	1	1	0	0	0	0	34	0
Unknown risk	436	7	1	1	4	3	0	0	6	5	5	4	16	16	468	7	
COUNTY OF DIAGNOSIS	Allegheny	4,744	75	86	67	75	64	76	65	79	72	89	74	72	76	5,221	75
	Armstrong	67	1	2	2	0	0	0	0	0	0	0	0	1	1	70	1
	Beaver	216	3	10	8	8	7	9	8	9	8	2	2	6	6	260	4
	Butler	128	2	6	5	2	2	7	6	3	3	2	2	0	0	148	2
	Cambria	217	3	2	2	7	6	5	4	3	3	6	5	7	7	247	4
	Fayette	141	2	4	3	2	2	4	3	5	5	5	4	3	3	164	2
	Greene	47	1	0	0	1	1	1	1	0	0	1	1	0	0	50	1
	Indiana	65	1	4	3	2	2	2	2	0	0	0	0	2	2	75	1
	Somerset	133	2	1	1	1	1	2	2	2	2	4	3	1	1	144	2
	Washington	204	3	7	5	6	5	4	3	3	3	6	5	2	2	232	3
Westmoreland	346	5	6	5	13	11	7	6	6	5	6	5	1	1	385	6	

* Count may be incomplete due to lag in reporting

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Table 15 below provides a summary of the number of new diagnoses of HIV disease in Pennsylvania by sex, race/ethnicity, age at diagnosis, mode of transmission and county of residence for the Northwest PA Thrive Partnership region.

Table 15: Characteristics of HIV Disease by Time Interval of Diagnosis for Northwest- PA Thrive Partnership, Pennsylvania, 2017–2022

Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, and Warren counties

		Prior to 2017		2017		2018		2019		2020		2021*		2022*		Total (1980-2022)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	TOTAL	1,169	100	28	100	33	100	31	100	16	100	26	100	31	100	1,334	100
SEX	Male	931	80	25	89	24	73	21	68	14	88	17	65	23	74	1,055	79
	Female	238	20	3	11	9	27	10	32	2	13	9	35	8	26	279	21
RACE/ETHNICITY	Hispanic/Latinx	116	10	4	14	3	9	3	10	1	6	1	4	3	10	131	10
	American Indian/Alaska Native	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
	Asian & Native Hawaiian/Other Pacific Islander	6	1	0	0	1	3	0	0	0	0	0	0	1	3	8	1
	Black/African American	282	24	11	39	10	30	14	45	4	25	10	38	11	35	342	26
	White	713	61	13	46	16	48	14	45	10	63	14	54	15	48	795	60
	Multirace	51	4	0	0	3	9	0	0	1	6	1	4	1	3	57	4
AGE (YEARS)	<13	17	1	0	0	0	0	0	0	0	0	0	0	0	0	17	1
	13 - 14	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
	15 - 24	170	15	9	32	6	18	5	16	3	19	6	23	3	10	202	15
	25 - 34	380	33	10	36	6	18	15	48	7	44	7	27	11	35	436	33
	35 - 44	360	31	4	14	7	21	2	6	1	6	6	23	8	26	388	29
	45 - 54	171	15	4	14	6	18	1	3	3	19	5	19	7	23	197	15
	55 - 64	54	5	1	4	6	18	6	19	2	13	1	4	2	6	72	5
	65+	15	1	0	0	2	6	2	6	0	0	1	4	0	0	20	1
MODE OF TRANSMISSION	Male-to-male sexual (MSM) contact	501	43	9	32	12	36	14	45	10	63	9	35	10	32	565	42
	Injection drug use (IDU)	230	20	6	21	6	18	3	10	0	0	2	8	1	3	248	19
	MSM/IDU	75	6	4	14	2	6	3	10	0	0	2	8	3	10	89	7
	Heterosexual contact	233	20	8	29	13	39	10	32	3	19	10	38	4	13	281	21
	Other**	24	2	0	0	0	0	0	0	0	0	0	0	0	0	24	2
	Pediatric mode***	16	1	0	0	0	0	0	0	0	0	0	0	0	0	16	1
	Unknown risk	90	8	1	4	0	0	1	3	3	19	3	12	13	42	111	8
COUNTY OF DIAGNOSIS	Cameron	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Clarion	28	2	0	0	1	3	0	0	0	0	1	4	0	0	30	2
	Clearfield	106	9	7	25	1	3	4	13	1	6	1	4	1	3	121	9
	Crawford	110	9	2	7	2	6	2	6	2	13	1	4	3	10	122	9
	Elk	10	1	1	4	0	0	1	3	0	0	0	0	0	0	12	1
	Erie	533	46	7	25	16	48	13	42	5	31	18	69	12	39	604	45
	Forest	12	1	1	4	1	3	0	0	0	0	0	0	0	0	14	1
	Jefferson	23	2	1	4	0	0	0	0	0	0	0	0	0	0	24	2
	Lawrence	96	8	4	14	5	15	4	13	3	19	3	12	6	19	121	9
	McKean	50	4	0	0	1	3	1	3	2	13	0	0	0	0	54	4
	Mercer	126	11	3	11	5	15	4	13	2	13	1	4	9	29	150	11
	Venango	45	4	2	7	0	0	2	6	0	0	1	4	0	0	50	4
	Warren	30	3	0	0	1	3	0	0	1	6	0	0	0	0	32	2

* Count may be incomplete due to lag in reporting

** Other risk includes transfusion/transplant and coagulation disorder that occurred during the earliest part of the HIV pandemic

*** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Figure 5 below depicts the trend in confirmed cases of perinatal HIV disease and the number of children who were perinatally exposed to HIV from 2012 through 2022. Pediatric exposure includes children born to birth mothers who were confirmed to be HIV positive at the time the child was born. Pediatric HIV disease includes all children who are diagnosed with a HIV (non-AIDS) and AIDS.

Figure 5: Confirmed Cases of Pediatric HIV Disease and Perinatal HIV Exposure by Year of Diagnosis in Pennsylvania, 2012-2022

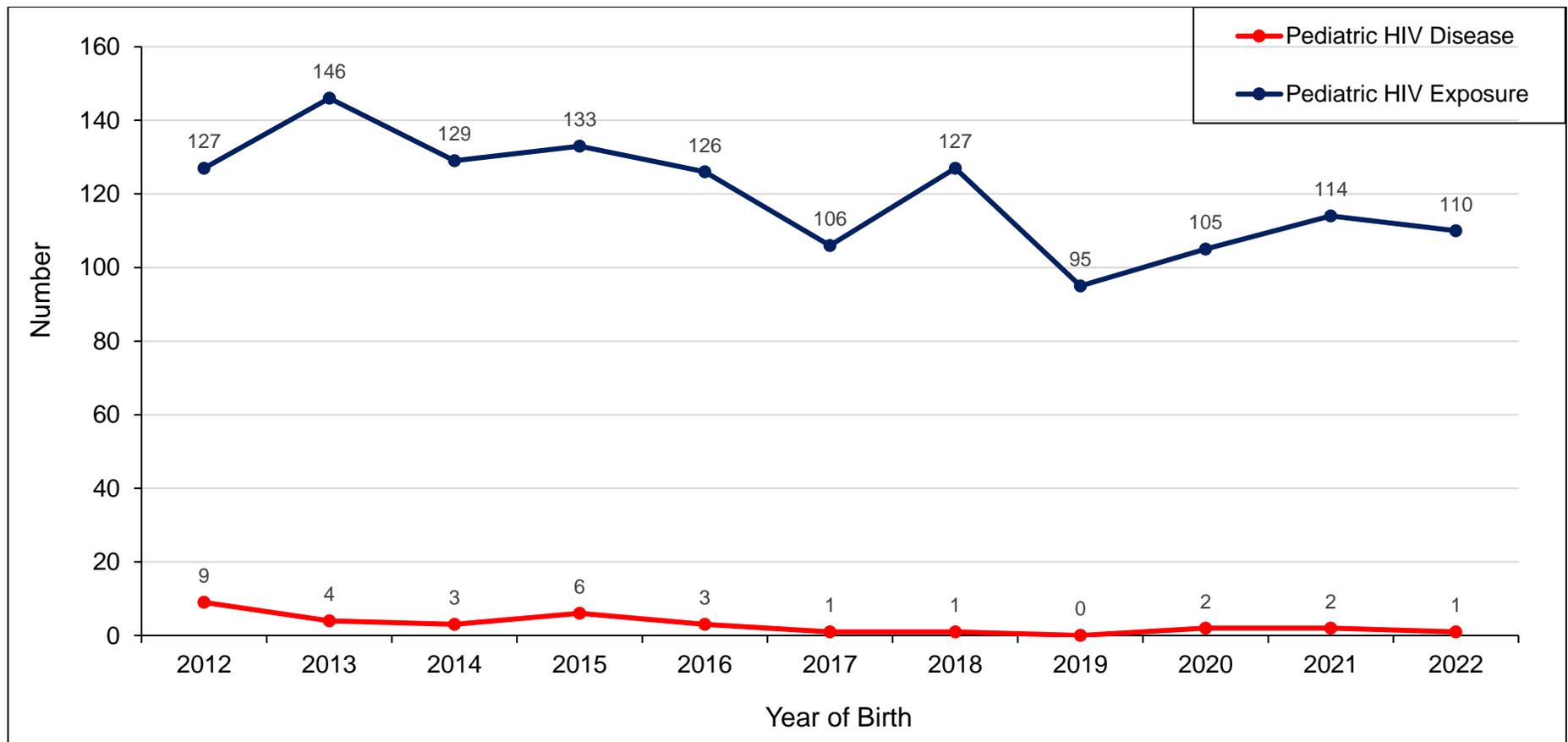


Figure 6 displays the number of people newly diagnosed with HIV disease in Pennsylvania in 2013 through 2022 and the number and percent of late diagnoses of HIV disease. A “late” diagnosis is defined as a person who is newly diagnosed with HIV and receives an AIDS diagnosis within 90 days of their first diagnosis with HIV infection. In most cases, people whose HIV infection is not under control will progress to an AIDS diagnosis in about eight to twelve years as the person’s immune system is damaged. It is important to monitor the proportion of new diagnoses that are late diagnoses to identify the effectiveness and accessibility of HIV testing and prevention services.

Figure 6 indicates that overall number of new HIV disease diagnoses has steadily declined. The proportion of late diagnoses has also been declining but in 2019 and 2020 an increase was observed with subsequent decreases in 2021 and 2022.

Figure 6: Trend in Late Diagnoses of HIV Disease in Pennsylvania, 2013-2022

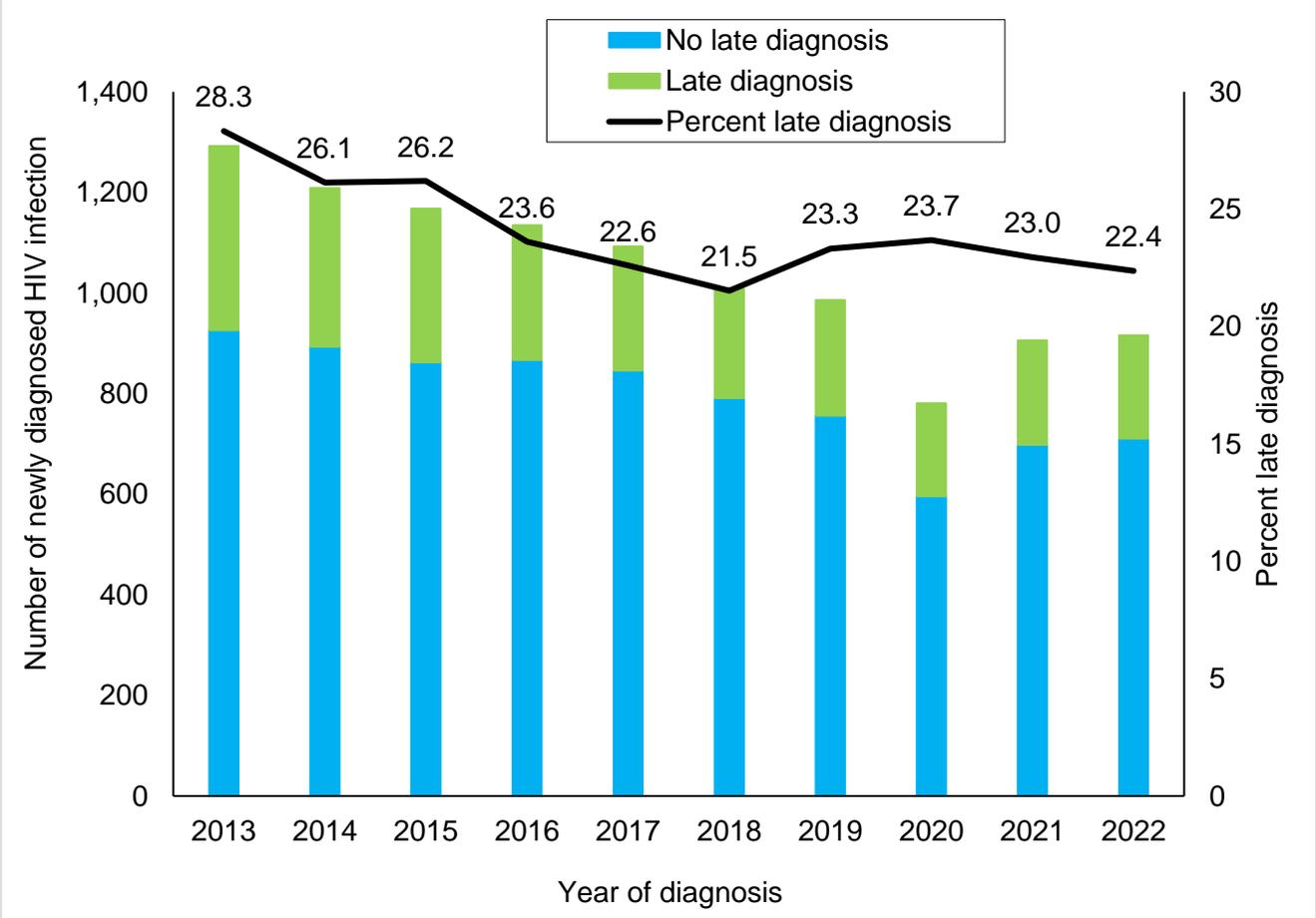


Table 16 below shows the number of people newly diagnosed with HIV disease in Pennsylvania in 2020 to 2022 by county. Each has the number and percent of late diagnoses of HIV disease. Late diagnosis is defined as any person newly diagnosed with HIV disease that receives an AIDS diagnosis within 90 days of their first diagnosis with HIV infection.

Table 16: The Number of New Diagnoses of HIV Disease and Percent of Late Diagnoses of HIV Disease by County, Pennsylvania, 2020 - 2022

County of diagnosis	Year 2020			Year 2021			Year 2022		
	New diagnosis	Late diagnosis		New diagnosis	Late diagnosis		New diagnosis	Late diagnosis	
	No.	No.	Percent	No.	No.	Percent	No.	No.	Percent
Adams	1	0	0	3	1	33.3	4	1	25
Allegheny	79	19	24.1	89	24	27	72	10	13.9
Armstrong	0	0	0	0	0	0	1	1	100
Beaver	9	5	55.6	2	2	100	6	3	50
Bedford	1	1	100	0	0	0	4	1	25
Berks	9	1	11.1	29	4	13.8	47	7	14.9
Blair	1	1	100	2	2	100	1	0	0
Bradford	2	1	50	1	1	100	0	0	0
Bucks	24	10	41.7	20	6	30	30	9	30
Butler	3	1	33.3	2	0	0	0	0	0
Cambria	3	2	66.7	6	1	16.7	7	2	28.6
Cameron	0	0	0	0	0	0	0	0	0
Carbon	4	0	0	2	0	0	5	1	20
Centre	3	1	33.3	1	0	0	5	1	20
Chester	13	5	38.5	18	5	27.8	14	3	21.4
Clarion	0	0	0	1	0	0	0	0	0
Clearfield	1	0	0	1	1	100	1	1	100
Clinton	0	0	0	0	0	0	2	2	100
Columbia	1	0	0	1	0	0	2	1	50
Crawford	2	1	50	1	0	0	3	0	0
Cumberland	13	5	38.5	17	5	29.4	9	1	11.1
Dauphin	26	4	15.4	38	4	10.5	28	5	17.9
Delaware	49	10	20.4	55	15	27.3	47	15	31.9
Elk	0	0	0	0	0	0	0	0	0
Erie	5	2	40	18	10	55.6	12	4	33
Fayette	5	2	40	5	1	20	3	0	0
Forest	0	0	0	0	0	0	0	0	0
Franklin	3	1	33.3	9	5	55.6	8	1	12.5
Fulton	1	1	100	0	0	0	1	1	100
Greene	0	0	0	1	0	0	0	0	0
Huntingdon	0	0	0	2	0	0	3	0	0
Indiana	0	0	0	0	0	0	2	0	0
Jefferson	0	0	0	0	0	0	0	0	0
Juniata	0	0	0	0	0	0	0	0	0
Lackawanna	8	2	25	14	5	35.7	20	7	35
Lancaster	18	5	27.8	14	1	7.1	17	6	35.3
Lawrence	3	1	33.3	3	1	33.3	6	4	66.7
Lebanon	3	1	33.3	8	2	25	7	2	28.6

County of diagnosis	Year 2020			Year 2021			Year 2022		
	New diagnosis	Late diagnosis		New diagnosis	Late diagnosis		New diagnosis	Late diagnosis	
	No.	No.	Percent	No.	No.	Percent	No.	No.	Percent
Lehigh	20	4	20	23	7	30.4	31	5	16.1
Luzerne	21	5	23.8	27	4	14.8	19	7	36.8
Lycoming	2	0	0	6	1	16.7	4	1	25
McKean	2	0	0	0	0	0	0	0	0
Mercer	2	0	0	1	0	0	9	2	22.2
Mifflin	2	1	50	0	0	0	1	0	0
Monroe	6	2	33.3	11	3	27.3	16	4	25
Montgomery	34	10	29.4	24	3	12.5	34	10	29.4
Montour	0	0	0	4	1	25.0	1	0	0
Northampton	14	5	35.7	19	6	31.6	5	1	20
Northumberland	2	0	0	2	1	50	3	2	66.7
Perry	0	0	0	0	0	0	0	0	0
Philadelphia	336	61	18.2	366	72	19.7	379	71	18.7
Pike	1	0	0	1	0	0	3	2	66.7
Potter	0	0	0	1	0	0	0	0	0
Schuylkill	5	2	40	5	2	40	9	2	22.2
Snyder	1	1	100	2	1	50	2	0	0
Somerset	2	0	0	4	2	50	1	0	0
Sullivan	0	0	0	0	0	0	0	0	0
Susquehanna	0	0	0	0	0	0	0	0	0
Tioga	0	0	0	0	0	0	0	0	0
Union	3	0	0	1	1	100	4	0	0
Venango	0	0	0	1	0	0	0	0	0
Warren	1	1	100	0	0	0	0	0	0
Washington	3	0	0	6	0	0	2	1	50
Wayne	3	1	33.3	1	1	100	0	0	0
Westmoreland	6	3	50	6	1	16.7	1	0	0
Wyoming	3	1	33.3	0	0	0	0	0	0
York	22	6	27.3	32	6	18.8	25	8	32
Total	781	185	23.7	906	208	23	916	205	22.4

Tables 17 through 19 provide summaries of the number of persons living with HIV disease in Pennsylvania as determined by their last known current residence as of 12/31/2022 regardless of where the person may have been diagnosed, including persons diagnosed in Pennsylvania, persons diagnosed in other states or territories or in foreign countries. Current residence is identified by most recent laboratory reporting or residence at diagnosis or other information and is determined by a complex algorithm defined by the enhanced HIV AIDS Reporting System (eHARS). Some persons may have emigrated out of Pennsylvania and other persons may have immigrated into Pennsylvania from other places without the knowledge of the the Pennsylvania HIV surveillance system. As such all summaries presented in these tables should be considered as estimates of the number of persons living with HIV disease and should not be treated as a precise count of the number of people living with HIV disease in Pennsylvania at the end of the year 2022.

Table 17 provides an estimate of the number of people currently living in Pennsylvania at the end of the year 2022 by birth sex (male and female). At the end of 2022, approximately 73.1% of persons living with HIV disease at the end of 2022 were males and 26.9% were females. Approximately 1.1% of persons living with HIV disease at the end of 2022 self-identified as transgender.

Table 17: The Number of Persons Living with HIV Disease by County and Sex at Birth in Pennsylvania, 2022

County of current residence	Total	Sex at Birth	
		Females	Males
Adams	235	74	161
Allegheny	3,734	689	3,045
Armstrong	51	9	42
Beaver	174	31	143
Bedford	54	11	43
Berks	1,420	453	967
Blair	129	26	103
Bradford	53	12	41
Bucks	1,308	284	1,024
Butler	110	12	98
Cambria	180	35	145
Cameron	2	0	2
Carbon	194	73	121
Centre	280	27	253
Chester	717	181	536
Clarion	44	5	39
Clearfield	77	5	72
Clinton	42	13	29
Columbia	126	50	76
Crawford	114	37	77
Cumberland	434	96	338
Dauphin	1,273	376	897
Delaware	2,206	776	1,430
Elk	16	2	14
Erie	418	112	306
Fayette	149	31	118
Forest	13	4	9
Franklin	216	68	148
Fulton	15	0	15
Greene	32	1	31
Huntingdon	77	1	76
Indiana	62	15	47
Jefferson	4	3	1
Juniata	21	8	13
Lackawanna	603	165	438
Lancaster	966	329	637
Lawrence	98	25	73
Lebanon	281	75	206
Lehigh	1,527	567	960

County of current residence	Total	Sex at Birth	
		Females	Males
Luzerne	605	179	426
Lycoming	284	70	214
McKean	29	5	24
Mercer	97	24	73
Mifflin	34	12	22
Monroe	461	170	291
Montgomery	1,305	296	1,009
Montour	22	7	15
Northampton	224	61	163
Northumberland	127	29	98
Perry	20	4	16
Philadelphia	18,366	5,061	13,305
Pike	168	51	117
Potter	11	2	9
Schuylkill	267	42	225
Snyder	32	4	28
Somerset	86	4	82
Sullivan	1	0	1
Susquehanna	34	4	30
Tioga	27	3	24
Union	175	9	166
Venango	38	10	28
Warren	20	5	15
Washington	146	28	118
Wayne	47	8	39
Westmoreland	177	28	149
Wyoming	11	3	8
York	1,095	343	752
Total	41,364	11,143	30,221

Data source: Pa. HIV Surveillance

Table 18 provides an estimate of the number of people currently in Pennsylvania at the end of the year 2022 by race/ethnicity. All persons who identify as Hispanic are included in a single race/ethnicity category. At the end of 2022, approximately 65.6% of persons living with HIV disease were persons of color (e.g., all persons who identify as any race/ethnicity other than White).

Table 18: The Number of Persons Living with HIV Disease by County and Race/Ethnicity in Pennsylvania, 2022

County of current residence	Race/Ethnicity						Total
	American Indian/Alaska Native	Asian & Native Hawaiian/Other Pacific Islander	Black/African American	Hispanic/Latinx	Multiple race	White	
Adams	0	3	38	25	10	159	235
Allegheny	1	41	1,589	218	296	1,589	3,734
Armstrong	0	0	6	1	2	42	51
Beaver	0	0	45	12	5	112	174
Bedford	0	0	3	1	2	48	54
Berks	0	2	253	684	64	417	1,420
Blair	0	1	22	7	6	93	129
Bradford	0	1	8	4	3	37	53
Bucks	3	12	290	205	95	703	1,308
Butler	0	1	12	10	6	81	110
Cambria	0	1	55	21	7	96	180
Cameron	0	0	0	0	0	2	2
Carbon	0	1	22	86	5	80	194
Centre	0	7	75	76	16	106	280
Chester	0	10	230	128	55	294	717
Clarion	1	0	18	6	2	17	44
Clearfield	0	1	22	6	6	42	77
Clinton	0	1	2	8	2	29	42
Columbia	0	1	18	17	9	81	126
Crawford	0	1	11	9	4	89	114
Cumberland	0	4	95	86	20	229	434
Dauphin	2	14	499	230	91	437	1,273
Delaware	0	19	1,405	196	119	467	2,206
Elk	0	0	0	3	0	13	16
Erie	0	1	156	65	25	171	418
Fayette	0	0	35	12	9	93	149
Forest	0	0	1	1	1	10	13
Franklin	0	2	53	41	7	113	216
Fulton	0	0	2	0	1	12	15
Greene	0	0	9	6	1	16	32
Huntingdon	0	0	29	21	4	23	77
Indiana	0	0	16	5	1	40	62

County of current residence	Race/Ethnicity						
	American Indian/Alaska Native	Asian & Native Hawaiian/Other Pacific Islander	Black/African American	Hispanic/Latinx	Multiple race	White	Total
Jefferson	0	0	0	0	1	3	4
Juniata	0	0	1	8	0	12	21
Lackawanna	0	2	145	140	39	277	603
Lancaster	0	7	124	334	135	366	966
Lawrence	0	0	23	4	12	59	98
Lebanon	0	1	44	120	17	99	281
Lehigh	0	9	308	800	74	336	1,527
Luzerne	0	3	154	139	47	262	605
Lycoming	2	0	125	27	20	110	284
McKean	0	0	5	4	0	20	29
Mercer	0	0	37	6	6	48	97
Mifflin	0	0	4	6	2	22	34
Monroe	0	4	151	127	45	134	461
Montgomery	0	25	480	182	105	513	1,305
Montour	0	0	3	5	0	14	22
Northampton	0	3	41	62	9	109	224
Northumberland	0	0	25	37	8	57	127
Perry	0	0	1	4	0	15	20
Philadelphia	42	214	11,610	3,050	446	3,004	18,366
Pike	0	1	46	29	10	82	168
Potter	0	0	1	1	1	8	11
Schuylkill	1	0	82	71	13	100	267
Snyder	0	0	3	8	0	21	32
Somerset	0	0	25	15	6	40	86
Sullivan	0	0	0	0	0	1	1
Susquehanna	1	0	2	5	0	26	34
Tioga	0	0	1	0	0	26	27
Union	0	1	82	46	3	43	175
Venango	0	0	3	1	2	32	38
Warren	0	0	0	0	1	19	20
Washington	0	3	33	13	11	86	146
Wayne	0	1	13	10	2	21	47
Westmoreland	0	4	25	14	9	125	177
Wyoming	1	0	0	0	1	9	11
York	0	5	304	325	75	386	1,095
Total	54	407	18,920	7,783	1,974	12,226	41,364

Data source: Pa. HIV Surveillance

Table 19 provides an estimate of the number of people currently living in Pennsylvania at the end of the year 2022 by current age. At the end of 2022, approximately 45.3% of persons living with HIV disease were adults age 55 and older.

Table 19: The Number of Persons Living with HIV by County and Age at Year-End in Pennsylvania, 2022

County of current residence	Age at year end 2022							
	0-12	13-14	15-24	25-34	35-44	45-54	55-64	≥65
Adams	0	0	1	19	37	60	81	37
Allegheny	7	0	78	618	715	742	1013	561
Armstrong	0	0	1	3	3	16	18	10
Beaver	0	0	4	35	25	34	53	23
Bedford	0	0	1	4	11	12	23	3
Berks	1	1	40	164	191	333	430	260
Blair	0	0	1	8	24	36	31	29
Bradford	0	0	0	16	5	10	16	6
Bucks	2	4	20	130	205	256	431	260
Butler	0	0	3	15	15	21	37	19
Cambria	0	0	1	17	37	45	54	26
Cameron	0	0	0	0	1	0	1	0
Carbon	0	0	4	23	39	45	58	25
Centre	0	0	5	31	57	78	76	33
Chester	2	1	16	76	89	125	243	165
Clarion	0	0	1	4	9	8	17	5
Clearfield	0	0	3	6	12	15	25	16
Clinton	0	0	0	9	6	11	10	6
Columbia	0	1	3	18	29	23	35	17
Crawford	1	0	5	13	13	32	32	18
Cumberland	0	0	8	55	88	102	120	61
Dauphin	2	1	33	188	203	271	370	205
Delaware	1	1	49	278	404	461	628	384
Elk	0	0	0	2	2	5	2	5
Erie	1	0	9	52	76	93	127	60
Fayette	0	0	3	24	28	29	50	15
Forest	0	0	2	0	1	3	4	3
Franklin	0	0	3	30	45	57	53	28
Fulton	0	0	0	1	2	7	3	2
Greene	0	0	0	5	5	12	5	5
Huntingdon	0	0	0	12	18	19	21	7
Indiana	0	0	2	8	15	10	20	7
Jefferson	0	0	0	2	0	0	2	0
Juniata	0	0	0	1	6	5	6	3
Lackawanna	0	0	9	88	106	140	169	91
Lancaster	3	1	29	100	145	257	265	166

County of current residence	Age at year end 2022							
	0-12	13-14	15-24	25-34	35-44	45-54	55-64	≥65
Lawrence	0	0	4	10	18	18	32	16
Lebanon	0	0	7	30	37	46	103	58
Lehigh	3	0	30	172	220	341	493	268
Luzerne	1	0	15	112	126	123	150	78
Lycoming	0	0	3	26	49	74	91	41
McKean	0	0	0	3	3	9	11	3
Mercer	0	0	3	18	16	21	27	12
Mifflin	0	0	0	2	7	8	8	9
Monroe	0	0	11	51	66	81	148	104
Montgomery	1	0	27	167	236	259	391	224
Montour	0	0	0	4	1	4	9	4
Northampton	0	0	4	15	34	59	74	38
Northumberland	0	0	5	14	23	25	43	17
Perry	0	0	0	2	3	5	7	3
Philadelphia	13	6	387	2,642	3,423	3,798	5,180	2,917
Pike	0	0	3	11	21	38	55	40
Potter	0	0	1	1	1	4	3	1
Schuylkill	0	0	4	31	43	74	78	37
Snyder	0	0	2	2	3	10	9	6
Somerset	0	0	1	11	10	22	30	12
Sullivan	0	0	0	0	0	0	0	1
Susquehanna	0	0	0	5	4	7	11	7
Tioga	0	0	2	2	4	1	15	3
Union	0	0	6	5	28	49	55	32
Venango	0	0	1	4	7	9	13	4
Warren	0	0	1	2	2	5	8	2
Washington	0	0	1	21	22	33	47	22
Wayne	1	0	1	2	11	4	14	14
Westmoreland	0	0	1	24	31	38	56	27
Wyoming	0	0	0	1	3	1	4	2
York	2	0	23	128	190	271	329	152
Total	41	16	877	5,573	7,309	8,810	12,023	6,715

Data source: Pa. HIV Surveillance

Citations

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