Trends in HIV Acquired Through Injection Drug Use (IDU) in Pennsylvania, 2013-2022

Monisola Malomo, DVM, MPH
Bureau of Epidemiology

Nov 9, 2023

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Quick Note

Data for the years 2020 and 2021 should be interpreted with caution due to the impact of the COVID-19 pandemic on access to HIV testing, care-related services, and case surveillance activities in state/local jurisdictions. Therefore, more time and data are needed to accurately assess COVID-19's impact on HIV disease in Pennsylvania (Pa.).

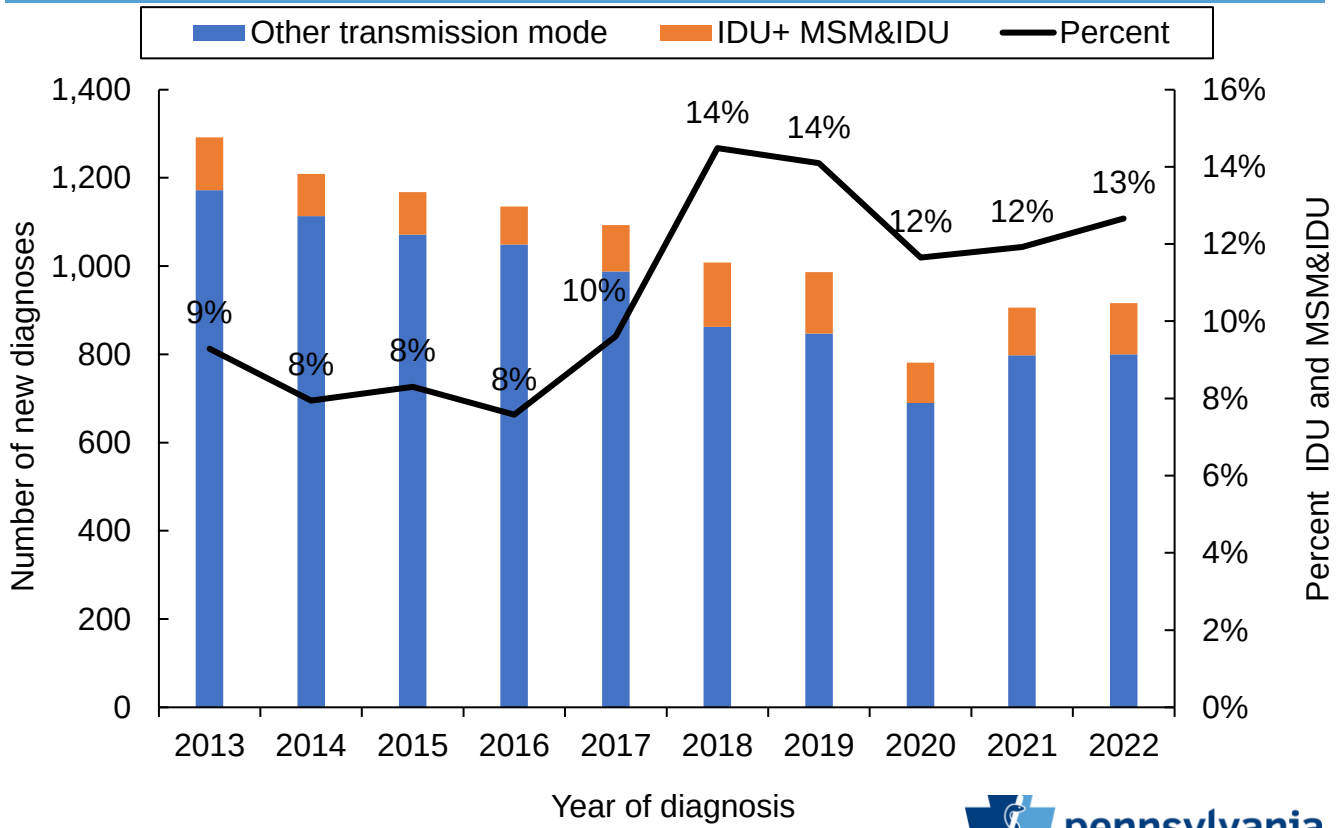
Overview of HIV and IDU, Pa., 2013-2022

- From 2013 to 2022, a total of 10,494 individuals were newly diagnosed with HIV disease

- Injecting Drug Users (IDU) and those who had HIV exposures of men who have sex with men (MSM) who are also IDU (MSM&IDU) accounted for 10.5% (1,104/10,494) of individuals newly diagnosed with HIV in the 10 years of review

- At year-end 2022, individuals who acquired HIV through IDU and MSM&IDU accounted for 20.3% (8,378/41,364) of people living with HIV (PLWH) in Pa.

10-Year Trend in Newly Diagnosed HIV Disease among IDU in Pa., 2013-2022 (N=1,104)



Data source: Pa. HIV surveillance

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Newly Diagnosed IDU Acquired HIV Disease by Sex at Birth, Pa., 2013-2022 (N=1,104)

- Females accounted for 21.6% of the number of newly diagnosed HIV disease and 24.8% (274/1,104) of those who acquired HIV through IDU

- Males accounted for 78.4% of all newly diagnosed HIV disease and 75.2% (830/1,104) of those diagnosed with HIV through IDU

- By sex, among females, 12.1%(274/2,264) acquired HIV through IDU compared to 10.1% males (830/8,230)

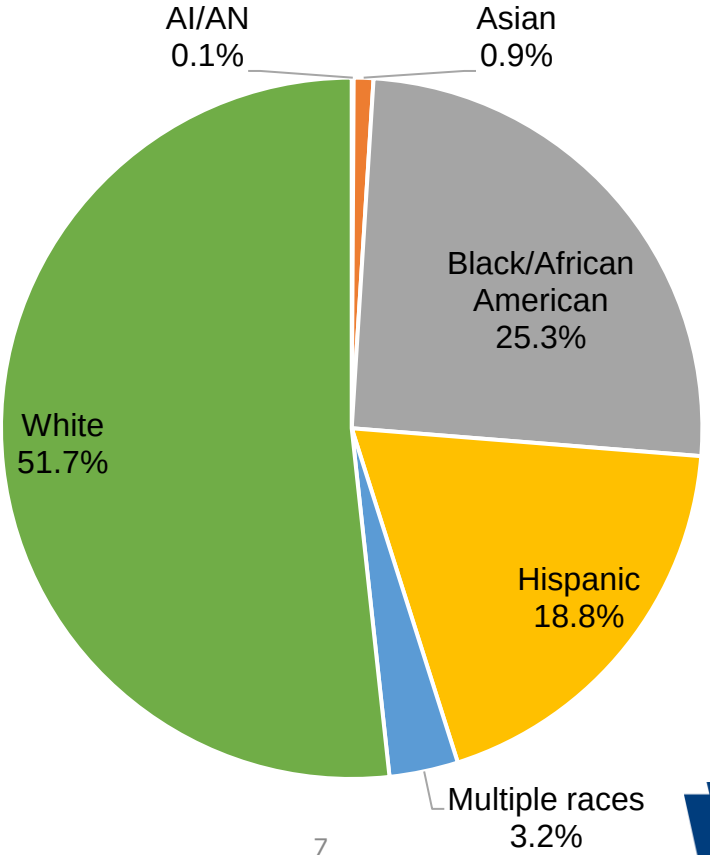
Newly Diagnosed IDU Acquired HIV Disease by Race/Ethnicity, Pa., 2013-2022 (N=1,104), Cont'd

- Blacks/African Americans accounted for 48.7% (5,106/10,494) of the number of newly diagnosed HIV disease but 25.3% (279/1,104) of those who acquired HIV through IDU

- Whites accounted for 28.7%(3,012/10,494) of individuals newly diagnosed with HIV disease but 51.7% (571/1,104) of people who acquired HIV through IDU

- Asians accounted for 1.5% (161/10,494) of individuals newly diagnosed with HIV disease but 0.9% (10/1,104) of people who acquired HIV through IDU

Percent of Individuals Newly Diagnosed with IDU Risk by Race/Ethnicity, Pa., 2013-2022 (N=1,104)



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Data source: Pa. HIV surveillance

Number of Individuals Newly Diagnosed with IDU by Age at Diagnosis, Pa., 2013-2022 (N=1,104)

Age at diagnosis (years)	Total Newly Diagnosed HIV Disease		IDU+MSM&IDU	
	No.	%	No.	%
≤12	23	0.2	0	0
13-14	6	0.1	0	0
15-24	2,273	21.7	101	9.1
25-34	3,465	33.0	413	37.4
35-44	1,970	18.8	290	26.3
45-54	1,638	15.6	183	16.6
55-64	881	8.4	101	9.1
≥65	238	2.3	16	1.4
Total	**10,494**	**100**	**1,104**	**100**

Data source: Pa. HIV surveillance

Newly Diagnosed IDU Acquired HIV Disease at County Level, Pa., 2013-2022 (N=1,104)

- The top 5 counties with the highest numbers of people newly diagnosed with HIV acquired through IDU are Philadelphia, Allegheny, York, Bucks, and Delaware counties

- Philadelphia County accounted for 49.7% (549/1,104) of all newly diagnosed HIV acquired through IDU

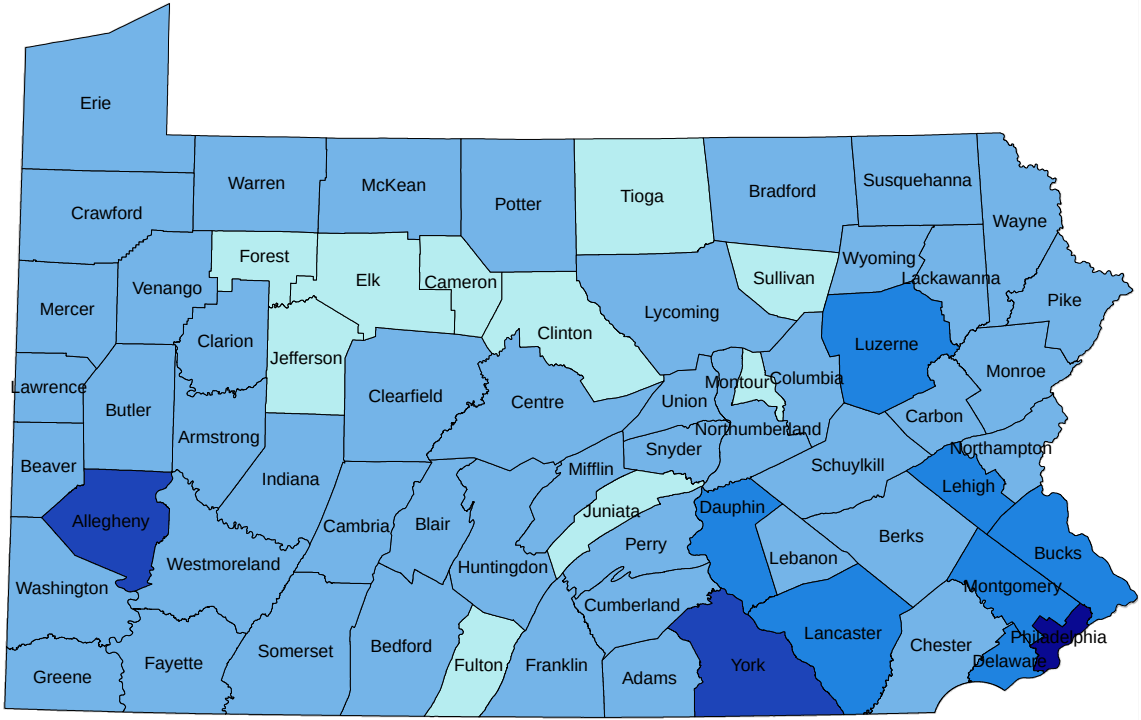
- Allegheny, York, Bucks, and Delaware counties accounted for 5.6%, 4.7%, 3.5% and 3.5%, respectively, of all newly diagnosed HIV acquired through the IDU

Top 10 Counties With the Highest Number of Newly Diagnosed HIV Disease and HIV Acquired Through IDU at County Level, Pa., 2013-2022

	Total			IDU and MSM/IDU	
County/State	**No.**	**%**	**County/State**	**No.**	**%**
Pennsylvania	**10,494**	**100.0**	**Pennsylvania**	**1,104**	**100.0**
Philadelphia	4,686	44.7	Philadelphia	549	49.7
Allegheny	977	9.3	Allegheny	62	5.6
Delaware	632	6.0	York	52	4.7
Montgomery	417	4.0	Bucks	39	3.5
Dauphin	345	3.3	Delaware	39	3.5
Lehigh	311	3.0	Lancaster	33	3.0
Berks	305	2.9	Montgomery	31	2.8
York	295	2.8	Luzerne	28	2.5
Bucks	277	2.6	Dauphin	25	2.3
Lancaster	249	2.4	Lehigh	23	2.1

Data source: Pa. HIV surveillance

Number of Newly Diagnosed HIV Disease Acquired Through IDU by County, Pa., 2013-2022



Data source: Pa. HIV surveillance

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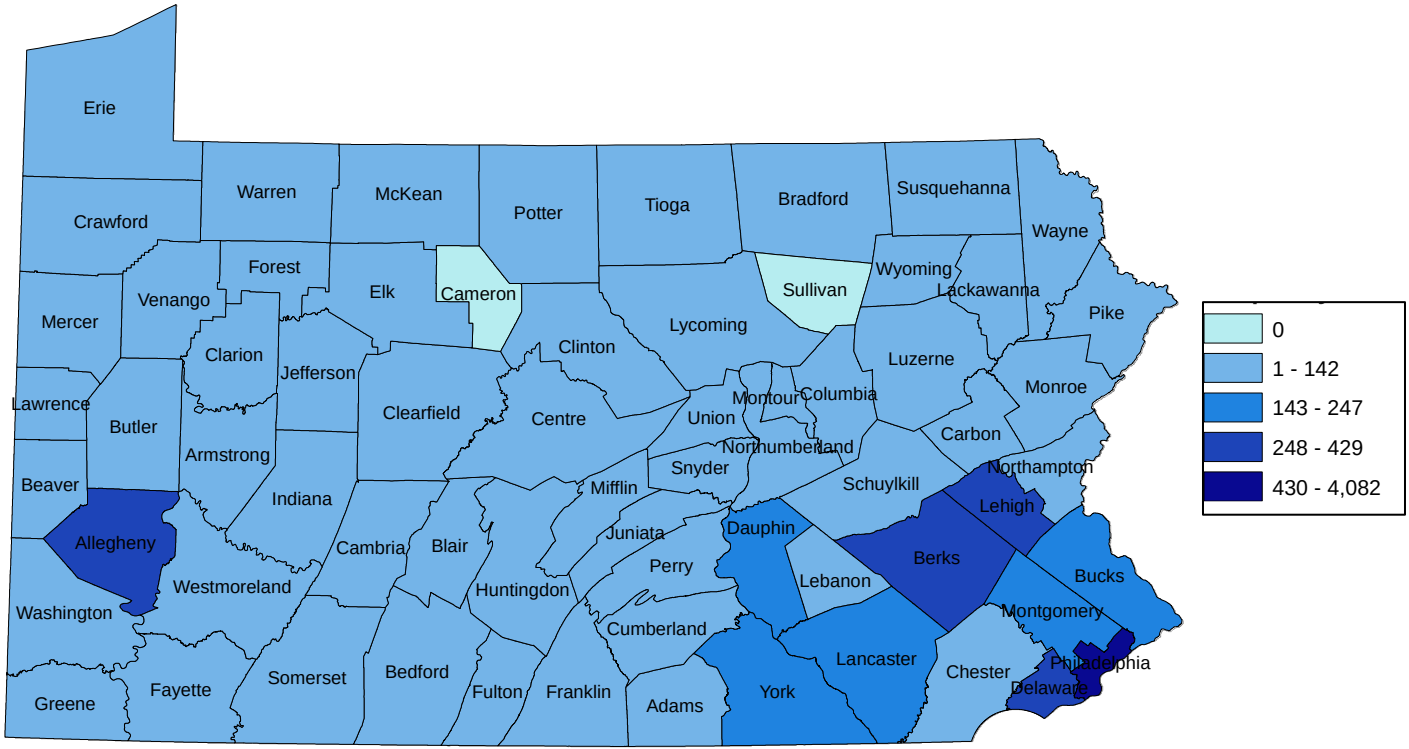
People Living With HIV Acquired through IDU at Year-end 2022, Pa.

Selected Characteristics	Number	Percent
Total	**8,378**	**100**
Sex/Gender		
Female	2,363	28.2
Male	5,946	71.0
Transgender	69	0.8
Race/Ethnicity		
American Indian/Alaskan Native	7	0.1
Asian	20	0.2
Black/African American	3,622	43.2
Hispanic	2,092	25.0
Multiple races	435	5.2
White	2,202	26.3
Age at year-end 2022 (years)		
15-24	19	0.2
25-34	379	4.5
35-44	966	11.5
45-54	1,692	20.2
55-64	3,233	38.6
≥65	2,089	24.9

Data source: Pa. HIV surveillance

People Living With HIV Acquired Through IDU at Year-end by County, Pa., 2022



Data source: Pa. HIV surveillance

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Summary

- 1 in 10 individuals newly diagnosed with HIV during the 10-year period in Pa. acquired HIV through IDU
- Among newly diagnosed individuals, males, white and those aged 25 to 34 years old, accounted for the highest proportion of the population with HIV acquired through IDU
- Among people living with HIV at year-end 2022, males, black/African Americans, and those aged 55 to 64 years old accounted for the highest proportion
- The Southeast and Southcentral region had the highest number of PLWH and newly diagnosed individuals with HIV acquired through IDU

Questions

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Contact Information

HIV/AIDS Surveillance and Epidemiology
Bureau of Epidemiology
Health and Welfare Building, Room 933
625 Forster Street, Harrisburg, PA 17120
Phone: 717-783-0481
Fax: 717-772-6975

For epidemiology data request, please email:

c-hivepi@pa.gov

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Pennsylvania Department of Health

Division of HIV Disease

Addressing Harm Reduction in Pennsylvania

Thursday, November 9, 2023

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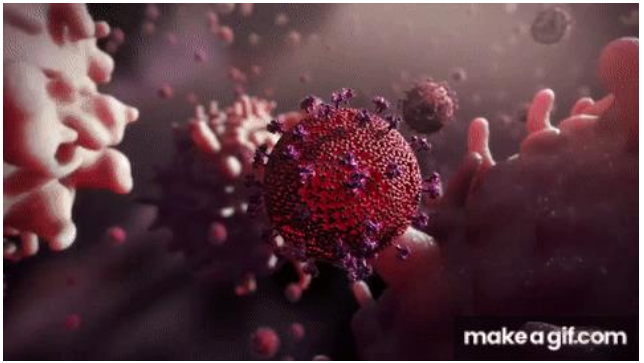
HIV Overview

- HIV (human immunodeficiency virus) is a virus that attacks the body's immune system. If HIV is not treated, it can lead to AIDS (acquired immunodeficiency syndrome).

- There is currently no effective cure. Once people get HIV, they have it for life.

- With proper medical care, HIV can be controlled. People with HIV who get effective HIV treatment can live long, healthy lives and protect their partners.



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How is HIV Transmitted?

Anal or Vaginal Sex

Sharing Needles, Syringes, or other Drug Injection Equipment

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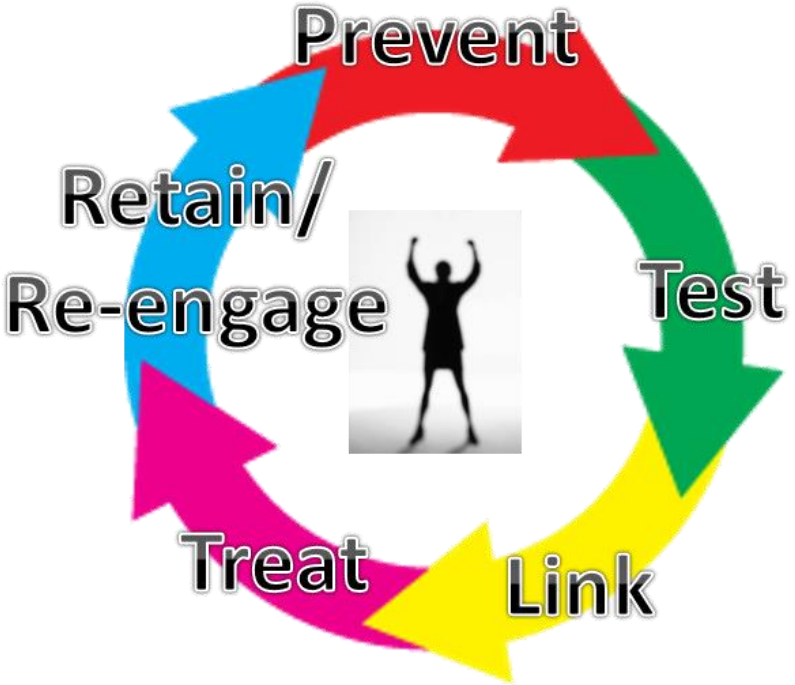
Mission Statement



Division of HIV Disease
Mission Statement
May, 2013

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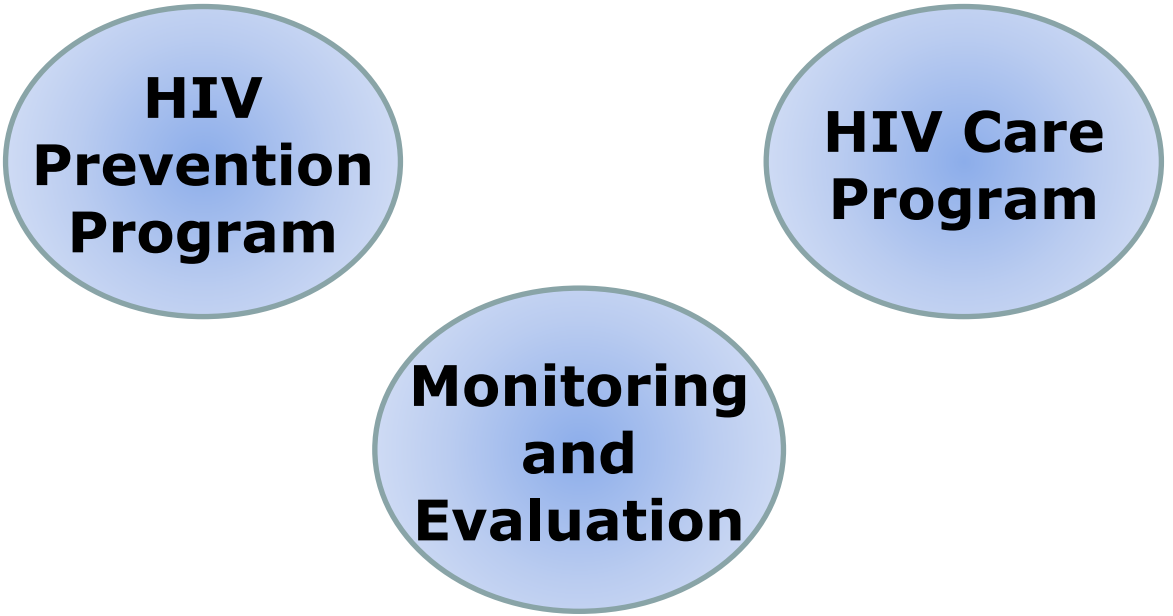
Division of HIV Disease Sections

The Division of HIV Disease (Division) includes three sections:



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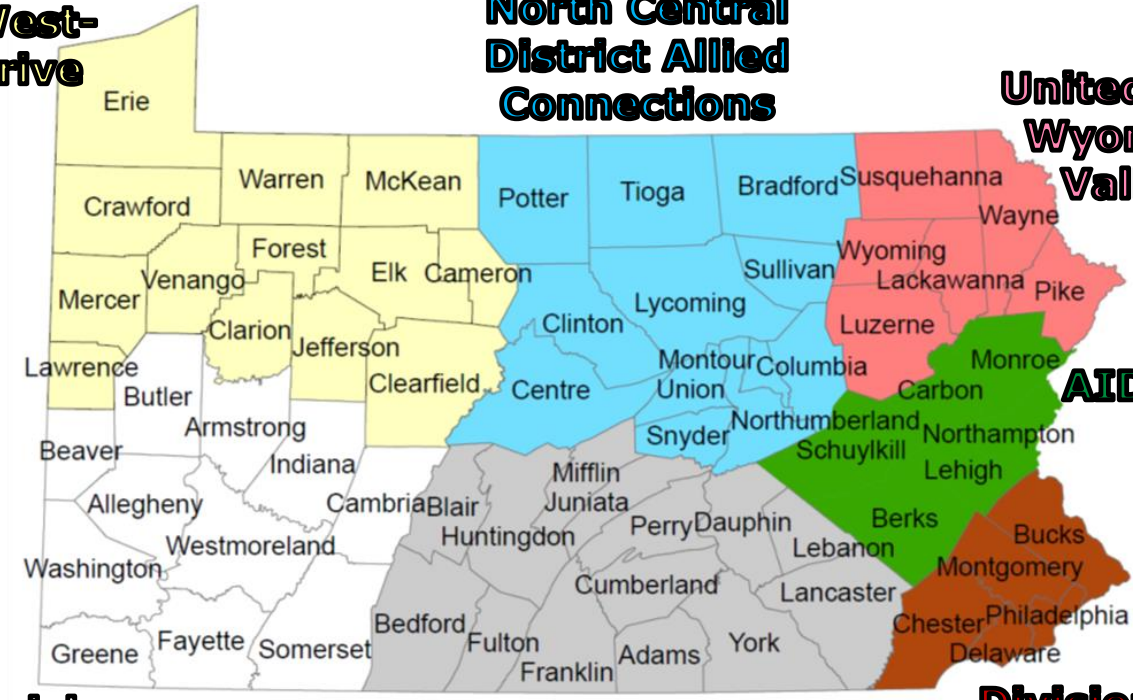
PA Regional HIV Care Grantees



PennWest-PA Thrive

North Central District Allied Connections

United Way Wyoming Valley

AIDSNET

Jewish Health Foundation

Family Health Counsel

Division of HIV Health

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Harm Reduction Initiative

- The Division has long recognized Harm Reduction as a key component in the prevention and ultimate elimination of the spread of HIV.

- Recognizing Harm Reduction activities gives us another key tool to help address the basic needs of people living with HIV.

- The ability to "meet people where they are" is vital to addressing the barriers for individuals to achieve optimal health outcomes.

Harm Reduction Vending Machines

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Project Background

- The Division's innovate project workgroup explored options as a means of addressing access issues for PLWH.

- Discussions were held with the state of Ohio, who has implemented the use of vending machines, and with some vending machine companies to develop a knowledge base.

- Division created a proposal, that received executive approval, opening the door for the Division to launch this initiative.

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Potential Products for Vending Machines

Naloxone	Fentanyl test strips	HIV test kits	Condoms/ Protection	Lubricants
Bleach kits	Sharps containers	First Aid kits	Hand sanitizer	Tissues
Nicotine gum	Lozenges	Smokeless tobacco	Mouthwash	Dental floss
Toothbrushes	Toothpaste	Sugarless gum	Protein drink	Bottled water
Beef jerky	Peanut butter crackers	Canned Soups and Pastas	Canned fruits and vegetables	Granola bars
Blankets	Hats	Gloves and mittens	Ponchos	Socks

Also: Printed materials that would address mental health and substance misuse/substance use disorder.

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Status of Harm Reduction Vending Machines Project

- Working on formal presentation to be shared with Regional Grantees.
- The Division will be working with Regional Grantees to determine best locations for vending machines.
- Initial rollout will serve as a pilot for this initiative.

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Other Harm Reduction Collaborative Efforts

- Quarterly meetings taking place with staff from both Pa. Dept. of Health (DOH) and Pa. Dept. of Drug and Alcohol Programs (DDAP).

- The Division is collaborating with Penn State University as they are also implementing harm reduction vending machines.

- The Division's internal innovative project workgroup is looking for other opportunities to address harm reduction.

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Contact Info: Kyle Fait
Email: c-kyfait@pa.gov
Phone: (717) 260-8929

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Pennsylvania Census Tract-Level Vulnerability Assessment: Predicting Bloodborne Infection Outbreak and Overdose Death Risk Related to Injection Drug Use in Pennsylvania*, 2021

Calli Laskowski, MPH
CSTE Applied Epidemiology Fellow
Bureau of Epidemiology

Emerging Drug Trend Symposium
November 9, 2023

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*Excluding Philadelphia

Original CDC Vulnerability Assessment

- Scott County, Indiana outbreak (2014-2015)[1]
  - 181 incident cases of HIV
  - 92% coinfected with Hepatitis C (HCV)
- CDC National Vulnerability Assessment (2016)[2]
  - 3 PA counties identified as "at high risk"
    - Crawford, Luzerne, Cambria

1. Managing HIV and Hepatitis C Outbreaks Among People Who Inject Drugs—A Guide for State and Local Health Departments. March 2018, Version 1.0 (cdc.gov)
2. County-Level Vulnerability Assessment for Rapid Dissemination of HIV or HCV Infections Among Persons Who Inject Drugs, United States - PubMed (nih.gov)

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Original PADOH Vulnerability Assessment

- PADOH Census-Tract Level Vulnerability Assessment (2019) [3]
  - Census tracts (CTs) at higher risk of bloodborne infections:
    - Geographically scattered, tended to be more rural
  - Census tracts at higher risk of overdose death (OD):
    - Mostly found in and around urban areas
- Updated Vulnerability Assessment (2021-2022)

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3. Vulnerability_Assessment_Report_10_22_19 (pa.gov)

Methods – HCV Outcome Data

- Inclusion criteria:
  - Confirmed acute or chronic hepatitis C cases reported in 2021[4]
  - Age <40 years old

- Exclusion Criteria
  - Philadelphia listed as reporting county
  - Cases associated with correctional institutions and drug and alcohol treatment facilities

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4. Source: PA-NEDSS

Methods – OD Outcome Data

- Inclusion criteria:
  - All unintentional overdose deaths reported in 2021[5]

- Exclusion Criteria
  - Philadelphia listed as county of residence
  - Alcohol-only overdose
  - Overdoses where the manner of death was Suicide or Homicide when someone intended to harm another person by poisoning

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5. Source: Office of Drug Surveillance and Misuse Prevention (ODSMP)

Methods – Indicator Data

1. Percent unemployed	**7. Rural/urban categorical variable**
2. Percent without a high school diploma	**8. Premature death rate (YPLL)[7]**
3. Percent vacant housing	**9. Rate of average daily morphine milligram equivalent (MME) > 90mg (per 10,000)**
4. Percent reporting poor/fair health	**10. Opioid prescription rate (per 10,000)**
5. Teen birth rate (per 1,000 live births)	**11. 2021 early syphilis rate (per 100,000)**
6. Gini index[6]	**12. 2021 HIV incident rate (per 100,000)**

6. Gini Index: Measure of income inequality across a population (Gini Index (census.gov))
7. YPLL: Years of Potential Life Lost

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Methods – Statistical Analysis

- Two generalized linear mixed models
- County treated as a random effect
- 12 indicators treated as fixed effects
- Offset by log of population under 40 years old
- Used to generate predicted HCV and OD rates
- Conducted using SAS 9.4

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Methods – Mapping

- 2021 HCV and OD rates and model-generated predicted rates mapped at census tract level
- Predicted rates grouped into 5 vulnerability categories using Jenk's natural breaks method
- Conducted using ArcPro

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HCV Regression Model Results

Indicator	F-value	P-value
Rural/Urban Category	0.88	0.3489
Gini Index	3.28	0.0702
Percent without a HS Diploma	0.20	0.6567
Percent Vacant Housing	**74.77**	**< 0.0001**
HIV Rate	**13.19**	**0.0003**
Syphilis Rate	2.34	0.1263
Teen Birth Rate	0.00	0.9925
Percent Unemployment	0.33	0.5668
YPLL	**24.86**	**< 0.0001**
Percent Reporting Poor/Fair Health	**4.66**	**0.0311**
Opioid Prescription Rate	**235.20**	**< 0.0001**
MME > 90 Rate	**32.08**	**< 0.0001**

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OD Regression Model Results

Indicator	F-value	P-value
Rural/Urban Category	**4.50**	**0.0341**
Gini Index	2.06	0.1514
Percent without a HS Diploma	1.73	0.1890
Percent Vacant Housing	**110.86**	**< 0.0001**
HIV Rate	**16.51**	**< 0.0001**
Syphilis Rate	**6.79**	**0.0092**
Teen Birth Rate	1.09	0.2968
Percent Unemployment	**5.98**	**0.0145**
YPLL	**21.71**	**< 0.0001**
Percent Reporting Poor/Fair Health	**7.26**	**0.0071**
Opioid Prescription Rate	**537.97**	**< 0.0001**
MME > 90 Rate	**63.89**	**< 0.0001**

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Breakdown of Vulnerabililty Levels

Vulnerability Level	HCV Model - Percent of Census Tracts (n)	OD Model - Percent of Census Tracts (n)
Level 1	15.2% (460)	36.0% (1094)
Level 2	31.3% (1042)	44.7% (1358)
Level 3	33.4% (1013)	18.5% (561)
Level 4	16.5% (500)	0.2% (5)
Level 5	0.1% (4)	0.03% (1)
Missing	0.6% (18)	0.6% (18)
Total	**N=3037**	**N=3037**

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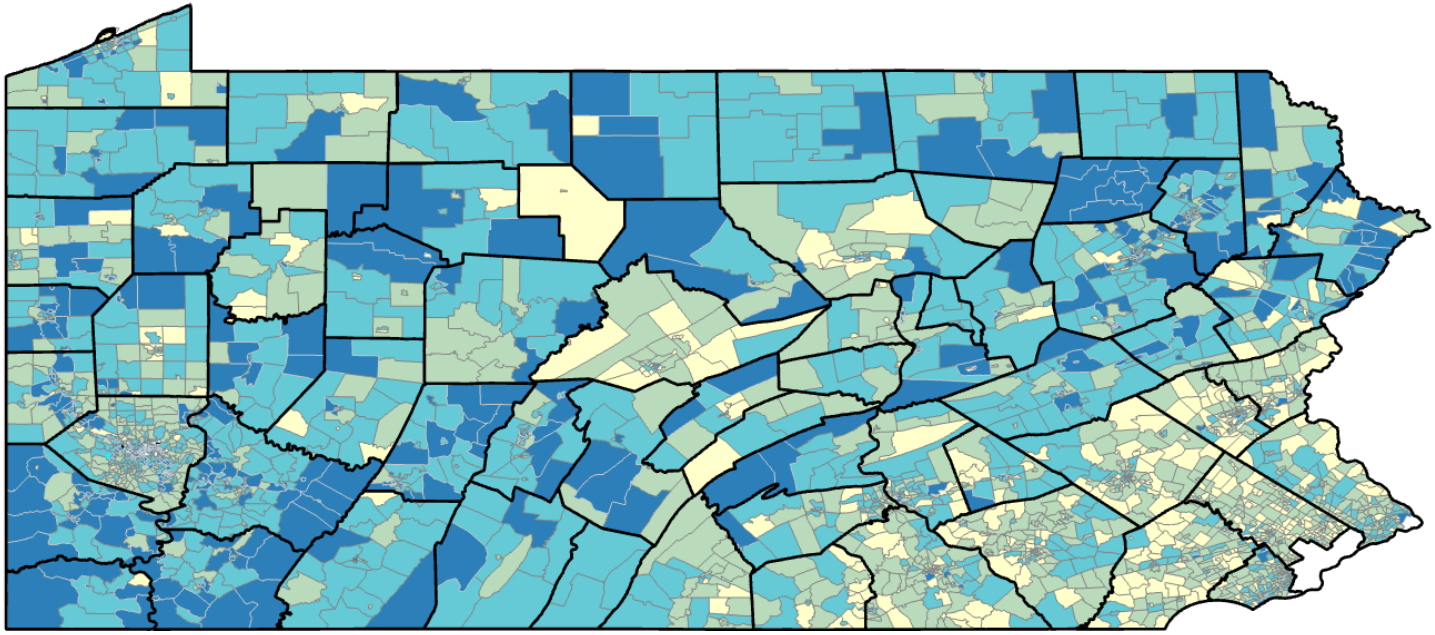
Predicted HCV Rates - Statewide



HCV Predicted Rate (per 100,000 population)

- Vulnerability Level 1 (1.09 - 3.89)
- Vulnerability Level 2 (3.90 - 4.34)
- Vulnerability Level 3 (4.35 - 4.80)
- Vulnerability Level 4 (4.81 - 6.91)
- Vulnerability Level 5 (6.92 - 13.01)

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HCV Model - High-Vulnerability CTs

County	Level 4 Vulnerability (n=500)	Level 5 Vulnerability (n=4)
1. Allegheny	22.2% (110)	100% (4)
2. Westmoreland	8.2% (41)	0
3. Luzerne	6.4% (32)	0
4. Washington	6.0% (30)	0
5. Lackawanna	4.0% (20)	0
6. Erie	3.8% (19)	0
7. Fayette	3.8% (19)	0
8. Cambria	3.4% (17)	0
9. Beaver	2.8% (14)	0
10. Schuylkill	2.6% (13)	0

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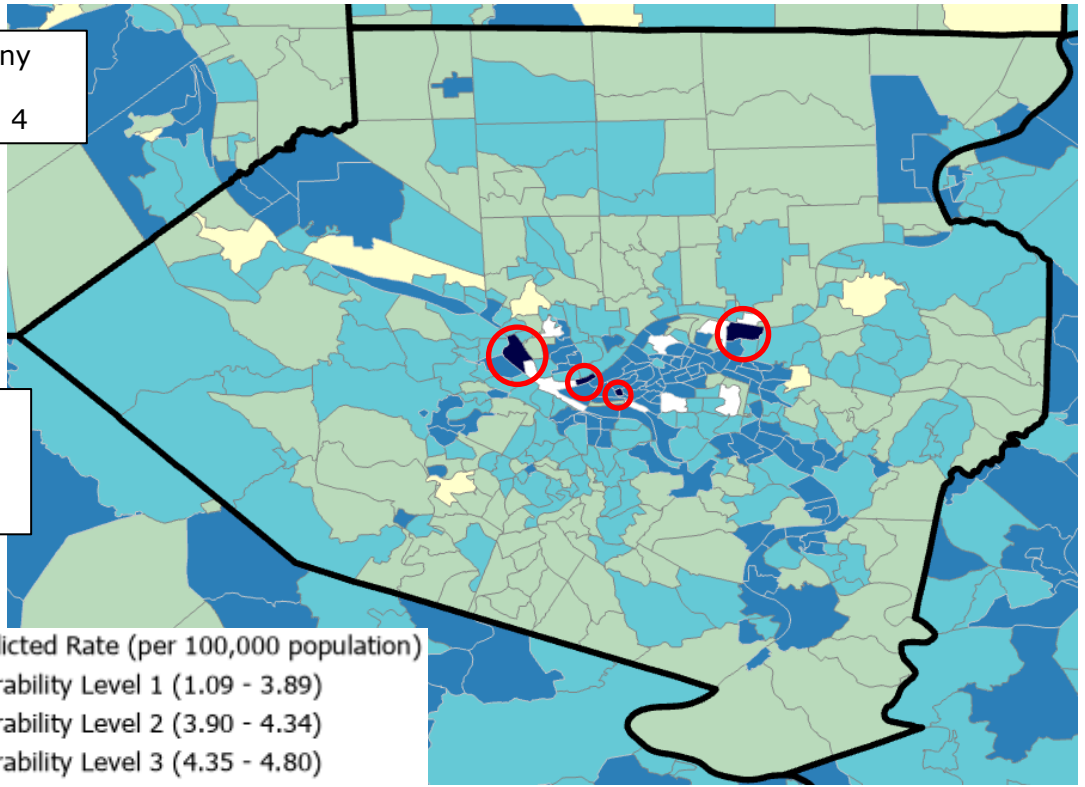
SW PA – Allegheny County

27.9% of Allegheny Co. CTs are Vulnerability Level 4

All 4 Level 5 Vulnerability CTs are in Allegheny Co.



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- Vulnerability Level 5 (6.92 - 13.01)

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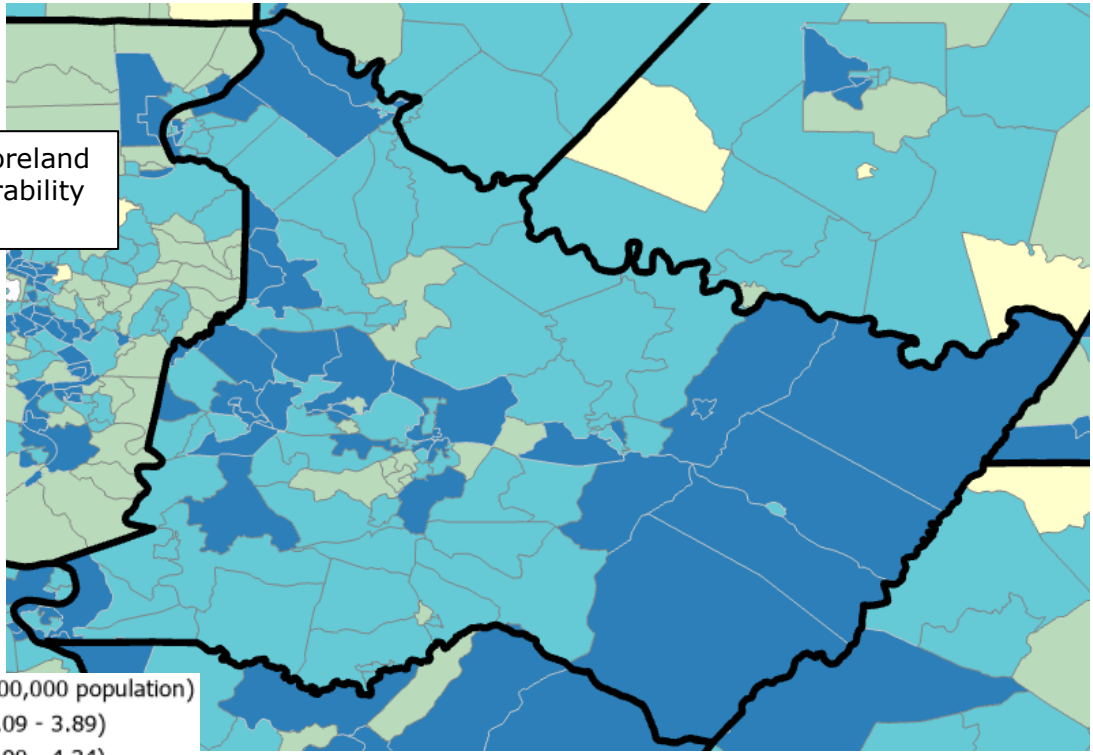
SW PA – Westmoreland County

36.3% of Westmoreland Co. CTs are Vulnerability Level 4



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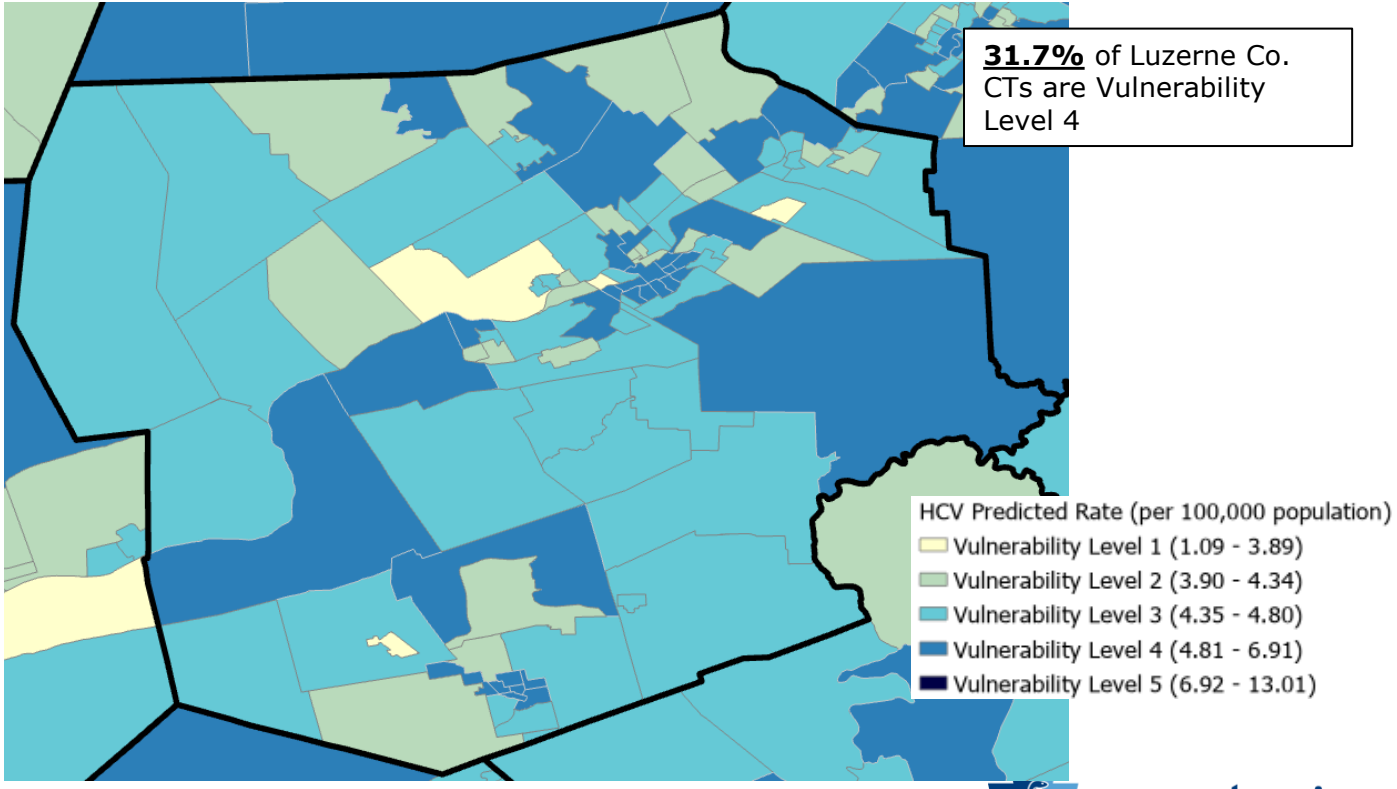
NE PA – Luzerne PA



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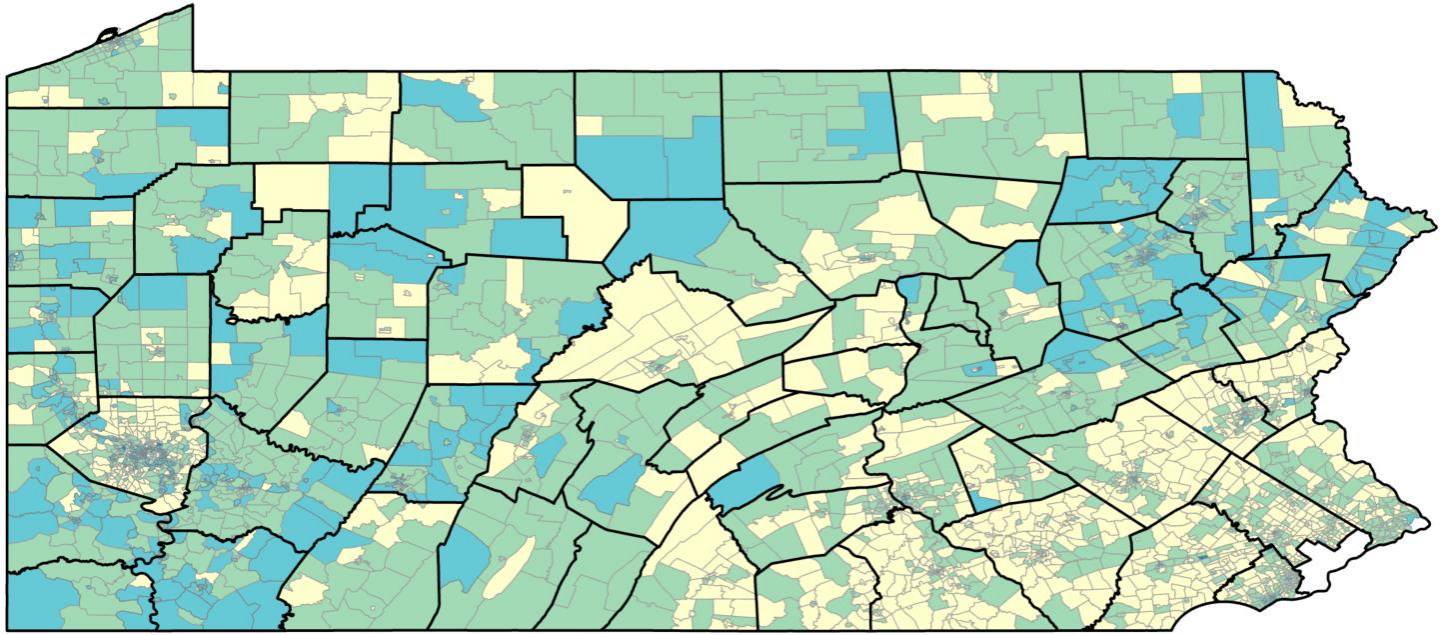
Predicted OD Rates - Statewide



Overdose Death Predicted Rate (per 100,000 population)

- Vulnerability Level 1 (1.23 - 4.32)
- Vulnerability Level 2 (4.33 - 4.95)
- Vulnerability Level 3 (4.96 - 7.91)
- Vulnerability Level 4 (7.92 - 14.40)
- Vulnerability Level 5 (14.41 - 27.84)

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OD Model - High-Vulnerability CTs

County	Level 3 Vulnerability (n=561)	Level 4 Vulnerability (n=5)	Level 5 Vulnerability (n=1)
1. Allegheny	25.9% (145)	80.0% (4)	100.0% (1)
2. Luzerne	8.7% (49)	0	0
3. Westmoreland	7.8% (44)	0	0
4. Washington	5.5% (31)	0	0
5. Fayette	3.9% (22)	0	0
6. Cambria	3.6% (20)	0	0
7. Delaware	3.0% (17)	0	0
8. Erie	2.9% (16)	0	0
9. Lackawanna	2.9% (16)	0	0
10. Beaver	2.9% (16)	0	0
42. Chester	0.2% (1)	20.0% (1)	0

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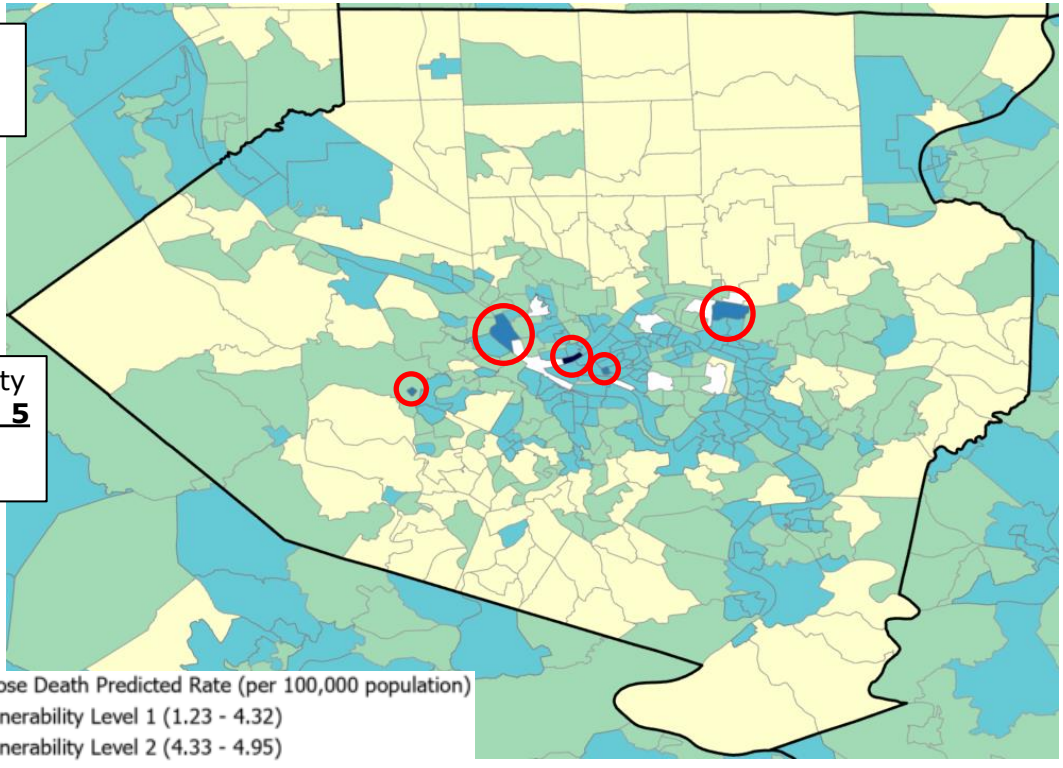
SW PA – Allegheny County

36.8% of Allegheny Co. CTs are Vulnerability Level 3

4/5 Level 4 Vulnerability CTs and the **Only Level 5** Vulnerability CT are in Allegheny Co.



Overdose Death Predicted Rate (per 100,000 population)
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- Vulnerability Level 5 (14.41 - 27.84)

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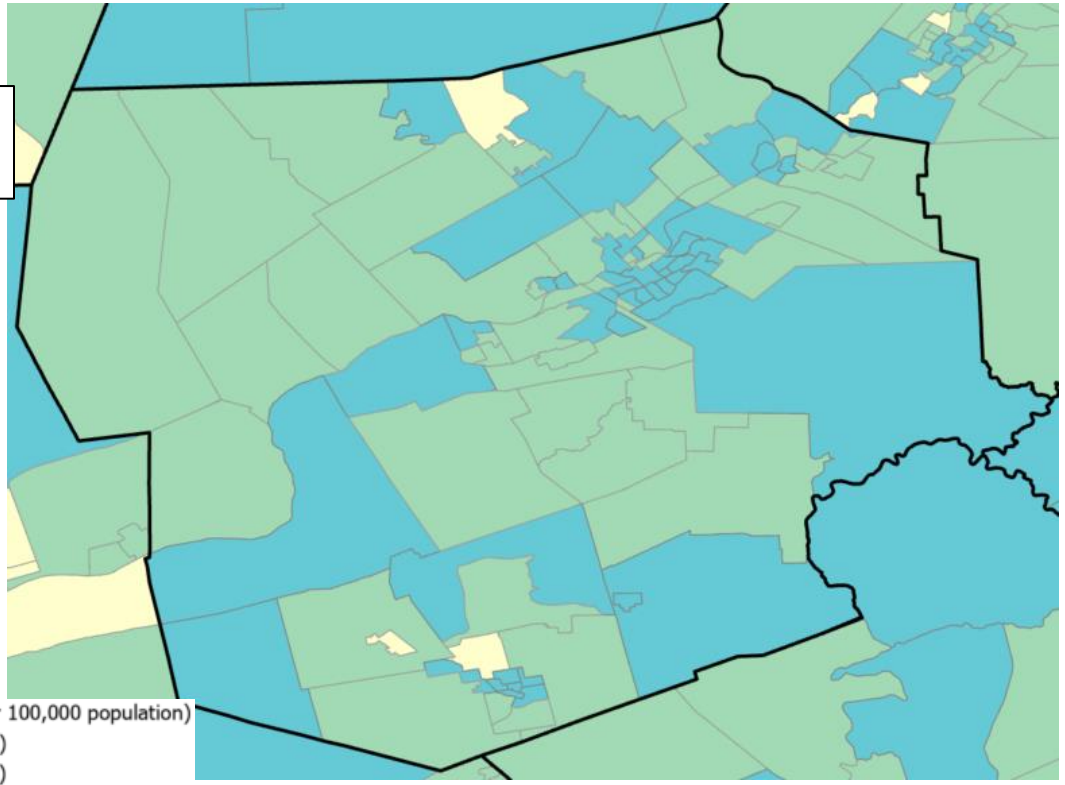
NE PA – Luzerne PA

48.5% of Luzerne Co. CTs are Vulnerability Level 3



Overdose Death Predicted Rate (per 100,000 population)
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- Vulnerability Level 2 (4.33 - 4.95)
- Vulnerability Level 3 (4.96 - 7.91)
- Vulnerability Level 4 (7.92 - 14.40)
- Vulnerability Level 5 (14.41 - 27.84)

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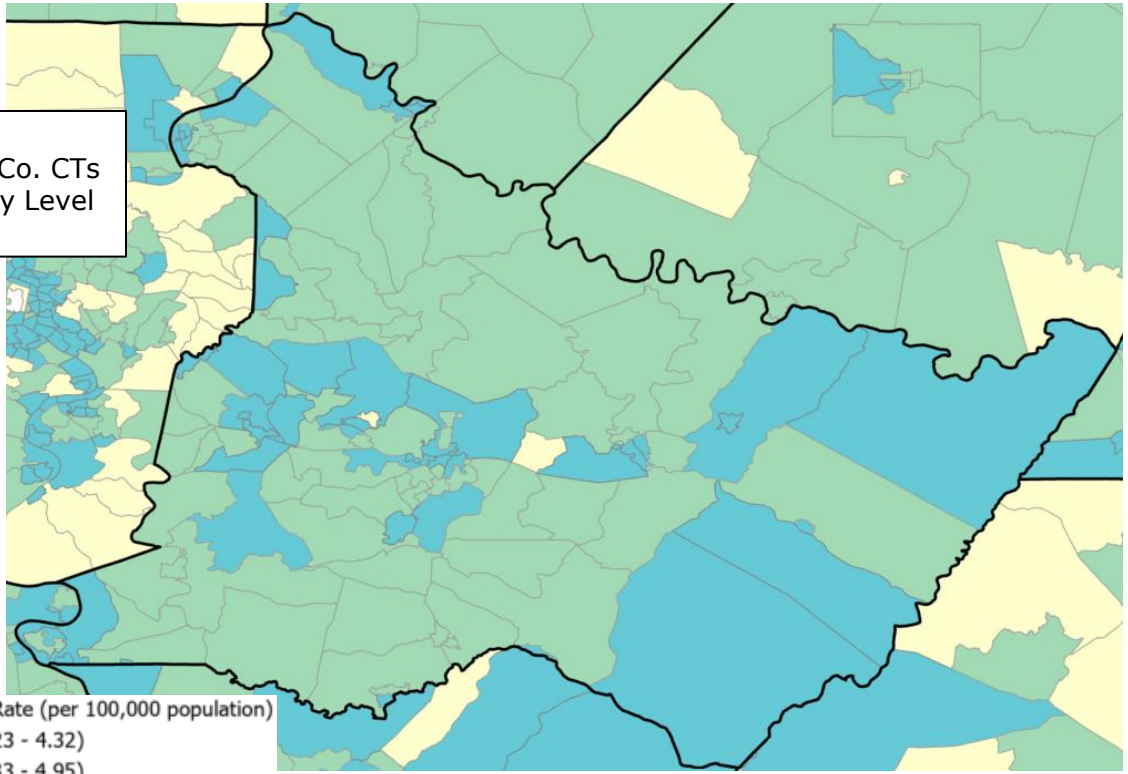
SW PA – Westmoreland County

38.9% of Westmoreland Co. CTs are Vulnerability Level 3



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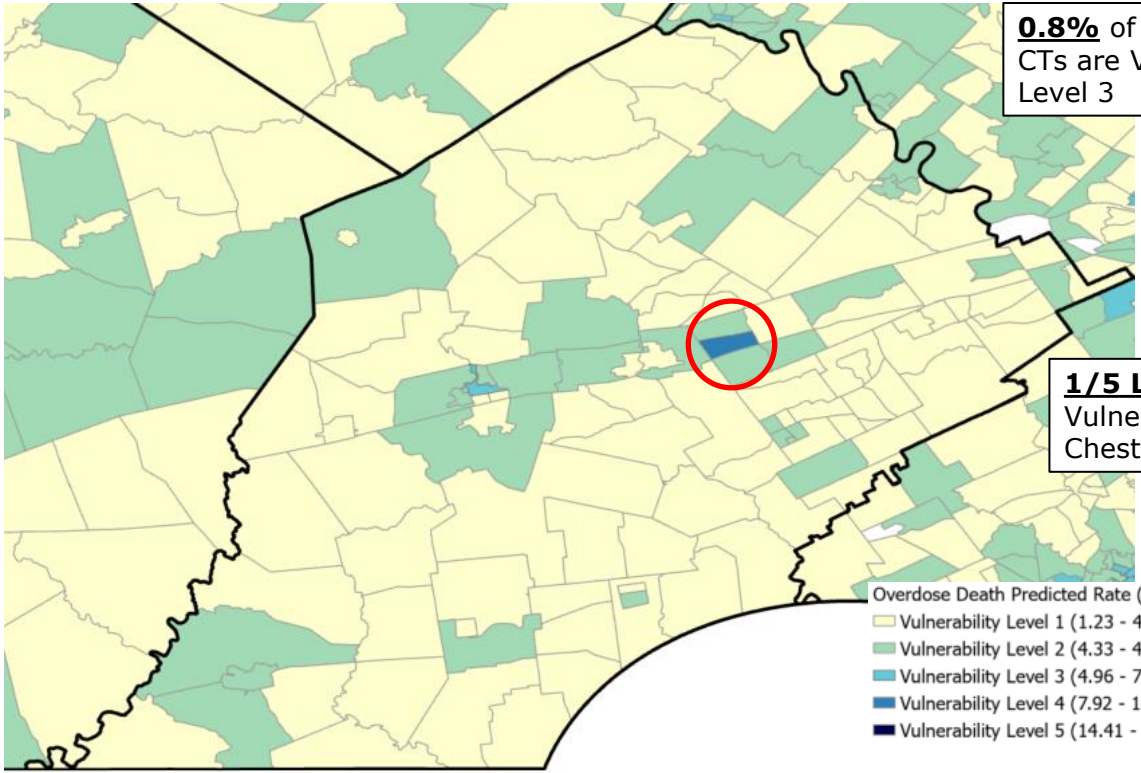
SE PA – Chester County



0.8% of Chester Co. CTs are Vulnerability Level 3

1/5 Level 4 Vulnerability CTs are in Chester Co.

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Conclusion

- Statistically significant indicators related to poverty, other bloodborne infections, and opioid use
- High-vulnerability census tracts are concentrated in the SW, NW, and NE for both models
- Significant overlap in high-vulnerability CTs in both models

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Next Steps

- Sharing results with community partners
- Data-informed allocation of DOH resources and prevention interventions

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- This study/report was supported in part by an appointment to the Applied Epidemiology Fellowship Program administered by the Council of State and Territorial Epidemiologists (CSTE) and funded by the Centers for Disease Control and Prevention (CDC) Cooperative Agreement Number 1NU38OT000297-03-00.

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Questions?

Calli Laskowski
c-claskows@pa.gov

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State Opioid Response Grant
HIV/Viral Hepatitis Integration Project

Lauren Orkis, DrPH
Epidemiologist Supervisor
Bureau of Epidemiology

November 9, 2023

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Presentation Objectives

- Review Pennsylvania Department of Health's work on the State Opioid Response grant HIV/viral hepatitis project
- Review products created and in development
- Discuss next steps

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HIV/Viral Hepatitis Project

The SAMHSA State Opioid Response Grant (SOR), HIV/Viral Hepatitis Service Integration Project is a collaborative initiative by the Pennsylvania Department of Drug and Alcohol Programs and the Department of Health.

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Project Goals

The goals of the project are to increase awareness of and expand access to human immunodeficiency virus (HIV) and viral hepatitis services in facilities treating persons with substance use disorders through facilitation of:

- Prevention services
- Testing services
- Client education
- Clinical education
- Technical assistance
- Treatment services

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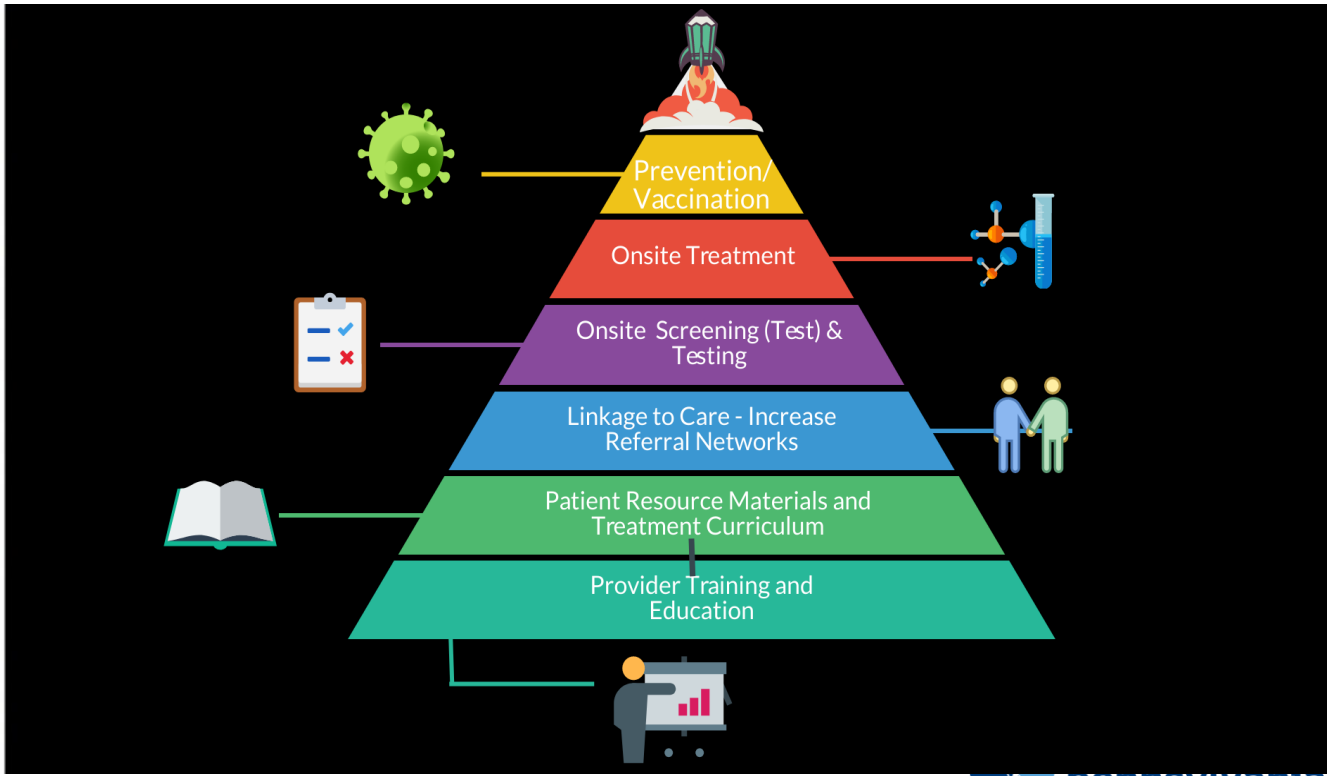
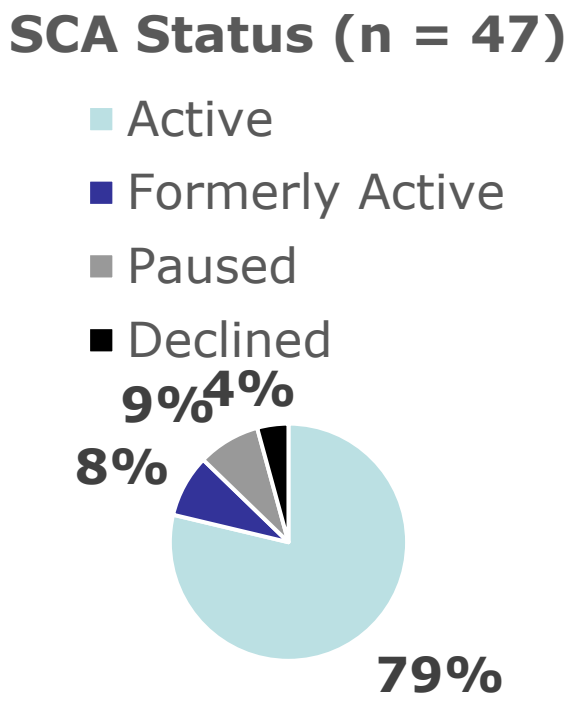
Technical Assistance Opportunities



Single County Authority (SCA) Engagement Type (N=47)

Local treatment programs are administered through county drug and alcohol offices called Single County Authorities. These programs can help with treatment funding, assess the need for treatment or other services, and make referrals to match treatment and/or service needs.

[Find your county office (pa.gov)]



Data current through 8/23/2023

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Project Toolkit

- Capacity assessment
- Updated recommendations in DDAP's Case Management and Clinical Services Manual related to HIV/viral hepatitis service delivery
- Policy template
- HIV/viral hepatitis service integration protocols
- Educational materials including referral guides
- Referral directory
- Trainings
  - Clinical foundations training
  - Medical training

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Capacity Assessment

A tool developed to assist in assessing a program's capacity to offer HIV/viral hepatitis services, their current service options for HIV/viral hepatitis, and how to measure growth of services within the substance use disorder treatment system.

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Manual Update

Assisted with updates to the DDAP Case Management and Clinical Services Manual - HIV and viral hepatitis services section

2020-25 Case_Mgt_and_Clinical_Srvcs_FINAL.pdf (pa.gov)

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Policy Template

For use by SCA and individual providers to ensure alignment with CMCS and to ensure the following are offered:

a. Hepatitis A & B vaccination
b. HIV prevention
c. HIV testing
d. Hepatitis C testing
e. Referrals

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Protocols

TABLE OF CONTENTS

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Educational Materials

- HIV, PrEP, viral hepatitis A, B, C materials:
  - Posters
  - Postcards
  - Infographics
  - Digital media
  - Client referral guides

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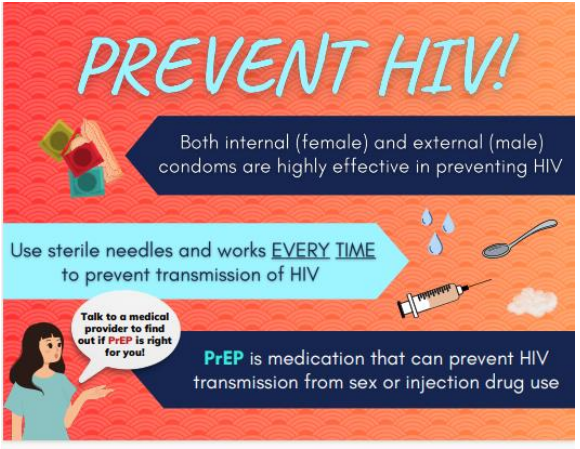
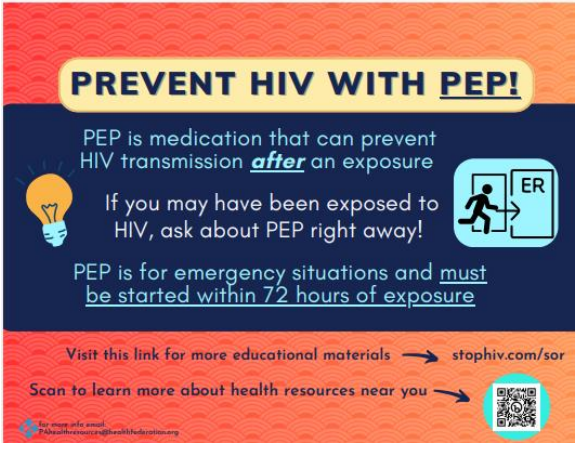
HIV Educational Materials





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HIV TESTING

KNOW YOUR STATUS, PROTECT YOUR HEALTH

HOW DOES IT WORK?

HIV tests can use blood from a fingerstick, a blood draw, or an oral fluid specimen to determine if someone has HIV.

Different tests look for different things, including:

- **antibodies** that are made when the body comes into contact with HIV
- HIV **virus** itself

HOW SOON WILL I GET RESULTS?

WINDOW PERIOD

THE TIME PERIOD BETWEEN EXPOSURE TO HIV AND A TEST'S ABILITY TO DETECT HIV INFECTION.

EXPOSURE TO HIV

SHARING INJECTION EQUIPMENT OR HAVING CONDOMLESS SEX WITH SOMEONE LIVING WITH HIV OR WITH UNKNOWN STATUS.

Rapid Tests use blood from a fingerstick or oral fluid from a swab and provide a result within 20 minutes.

Lab-Based Tests require a blood draw that is sent to a lab.

IF A RAPID TEST IS POSITIVE, A BLOOD DRAW AND LAB TEST WILL NEED TO BE DONE TO CONFIRM THE TEST RESULTS

HIV SELF-TESTS

Rapid self-tests use oral fluid and results are available in 20 minutes.

TO ORDER A RAPID SELF-TEST IN PA, GO TO: GETMYHIVTEST.COM/

Mail-In self-tests include supplies to collect dried blood from a fingerstick at home. The sample is sent to a lab for testing and results are delivered by a health care provider.

Scan to learn more about health resources near you

Visit this link for more educational materials

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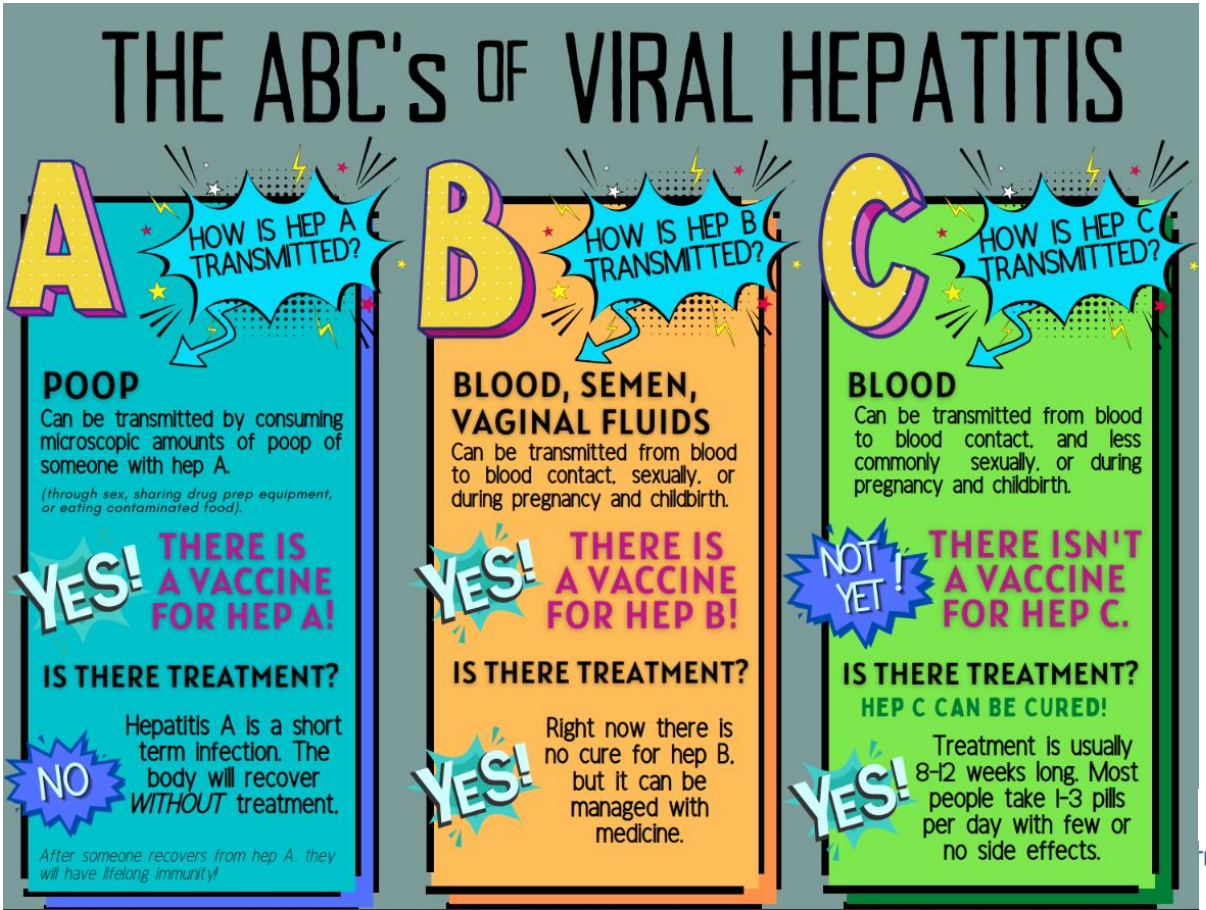
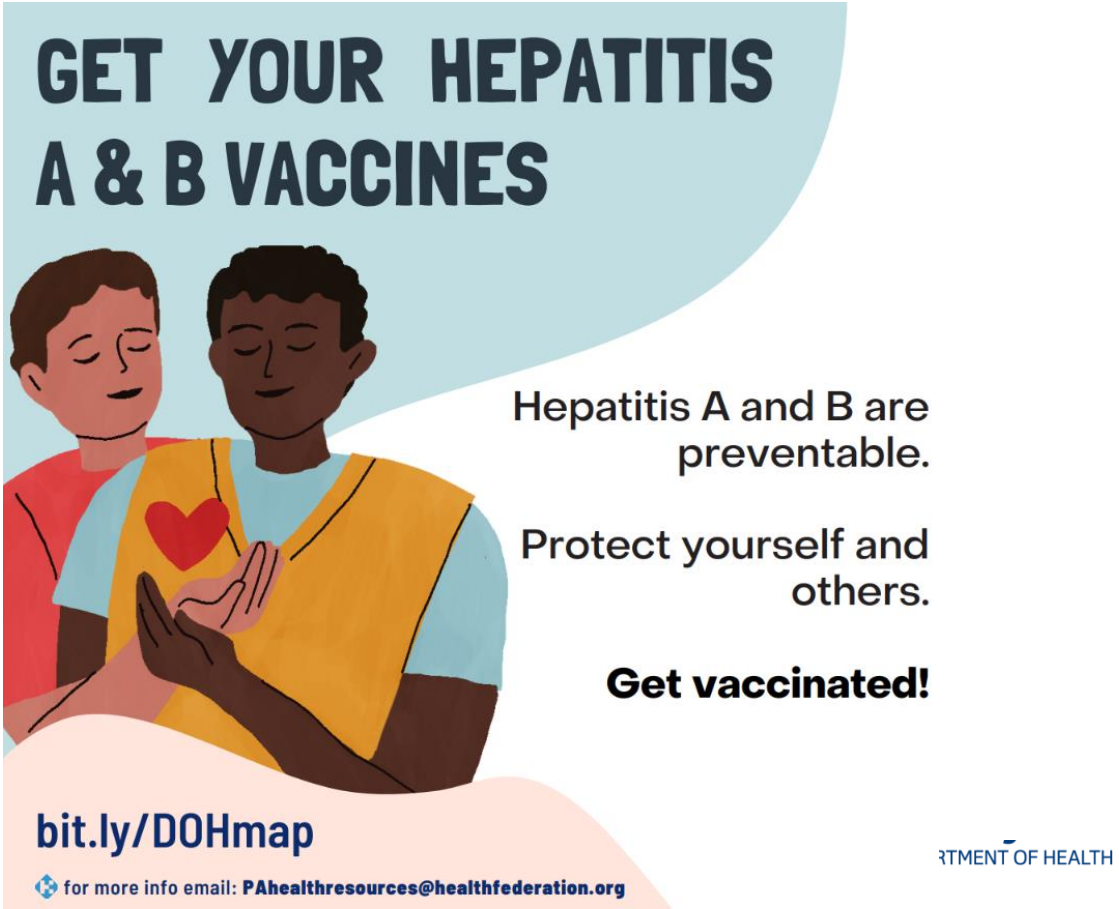
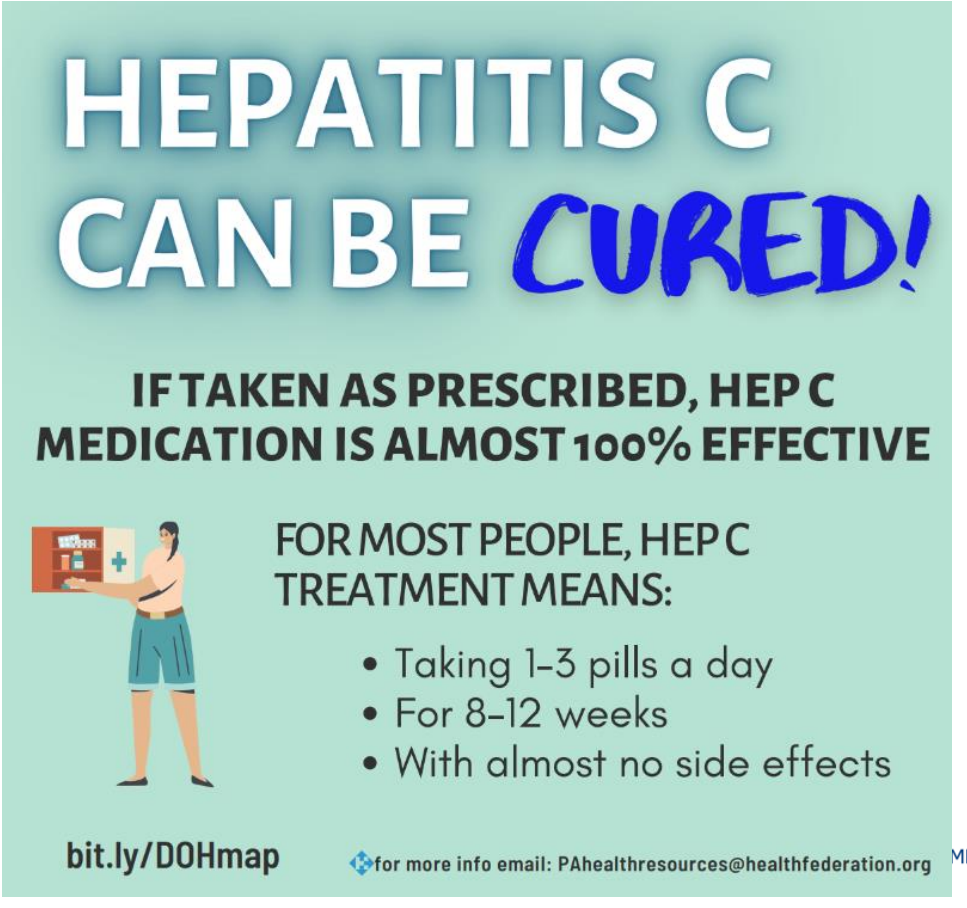
Viral Hepatitis Educational Materials



Hep A/B Educational Materials



Hep C Educational Materials



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Client Guide

TABLE OF CONTENTS

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Curriculum for Providers

Development of a brief psycho-educational curriculum about HIV and viral hepatitis

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Referral Directory

Disclaimer: For informational purposes. Inclusion in this directory does not imply Pennsylvania Department of Health or Department of Drug & Alcohol Programs endorsement.

Key: Yes= ✓ No= X Unsure= ?

			Services																Groups Served					Payments				Language
County	Health Care Provider	Phone	Accepting New Patients	Waiting List	Referral Required	Primary Care	HIV Care	HCV Care	HBV Care	Hepatitis A Vaccine	Hepatitis B Vaccine	Community Testing: HCV	Community Testing: HIV	Case management	Linkage to care	Prevention	PrEP	PEP	Men	Women	Pregnant People	LGBTQ	Immigrants/Undocumented	Medicaid/Medicare	Sliding Fee Scale	Uninsured/Self Pay	Private Insurances	Interpretation services available
Adams	Family First Health: Gettysburg	(717)-337-9400	?	?	?	?	✓	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	Unsure if interpretation services are offered
Cumberland	Family Health Council of Central PA, Inc.	(717)-761-7380	✓	X	X	✓	✓	X	X	X	X	X	X	✓	✓	✓	X	X	✓	✓	X	✓	✓	X	X	X	X	Unsure if interpretation services are offered
Dauphin	Alder Health Services	(717)-233-7190	✓	✓	X	✓	✓	✓	✓	✓	✓	X	✓	✓	✓	✓	✓	?	✓	✓	✓	✓	✓	✓	✓	✓	✓	Interpretation services including bilingual staff for Spanish
Dauphin	Hamilton Health Center	(717)-232-9971	✓	?	?	✓	✓	✓	✓	✓	✓	?	?	✓	✓	✓	?	?	✓	✓	✓	✓	✓	✓	✓	✓	✓	Interpretation services
Dauphin	Harrisburg Gastroenterology	(717)-545-9811	✓	✓	✓	X	X	✓	✓	X	X	X	X	X	X	X	X	X	✓	✓	✓	✓	X	✓	X	✓	✓	Interpretation services
Dauphin	Jackson and Siegelbaum Gastroenterology	(717)-238-3111	✓	✓	✓	X	X	✓	✓	X	X	X	X	X	X	X	X	X	✓	✓	✓	✓	✓	✓	X	✓	✓	Interpretation services including bilingual staff for Spanish
Dauphin	Penn State College of Medicine Division of Gastroente	(717)-531-6261	✓	?	✓	X	X	✓	✓	✓	✓	X	X	X	✓	X	X	X	✓	✓	✓	✓	✓	✓	?	✓	✓	Interpretation services
Dauphin	Penn State Health Medical Group Harrisburg	(717)-232-5443	X	X	✓	✓	✓	✓	✓	✓	✓	X	X	X	✓	X	?	?	✓	✓	✓	✓	✓	✓	X	✓	✓	Interpretation services
Dauphin	Penn State Hershey Medical Center for Infectious Dise	(717)-531-8881	✓	✓	✓	X	✓	✓	✓	X	X	X	X	X	✓	X	?	?	✓	✓	✓	✓	✓	✓	?	✓	✓	Interpretation services
Dauphin	PinnacleHealth Infectious Disease Associates: Harrisbu	(717)-614-4420	✓	X	✓	X	✓	✓	✓	?	?	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	?	✓	?	✓	✓	Interpretation services
Dauphin	Planned Parenthood Harrisburg Medical Center	(717)-234-2468	✓	X	X	X	✓	✓	?	?	?	X	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Interpretation services
Dauphin	UPMC Pinnacle REACCH Program	(717)-782-2750	✓	X	X	✓	✓	X	X	✓	✓	X	✓	✓	✓	✓	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	Interpretation services including bilingual staff for Spanish
Dauphin	CVS MinuteClinic	(866)-389-2727	✓	X	X	X	X	X	X	✓	✓	X	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	✓	✓	Interpretation services
Delaware	AIDS Care Group: Chester	(610)-872-9101	✓	X	X	X	✓	✓	✓	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Interpretation services including ASL
Delaware	AIDS Care Group: Sharon Hill	(610)-583-1177	✓	X	X	X	✓	✓	✓	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Interpretation services including ASL
Delaware	ChesPenn Health Services: Chester	(610)-872-6131	?	?	?	?	✓	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	Unsure if interpretation services are offered
Delaware	ChesPenn Health Services: Upper Darby	(610)-352-6585	?	?	?	?	✓	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	?	Unsure if interpretation services are offered
Delaware	Crozer Health Gastroenterology Associates: Brinton La	(610)-619-7475	✓	?	X	X	X	✓	?	✓	✓	X	X	X	✓	X	X	X	✓	✓	✓	✓	✓	✓	?	✓	✓	Interpretation services
Delaware	Crozer Health Gastroenterology Associates: Drexel Hill	(610)-619-7475	✓	?	X	X	X	✓	?	✓	✓	X	X	X	✓	X	X	X	✓	✓	✓	✓	✓	✓	?	✓	✓	Interpretation services
Delaware	Crozer Health Gastroenterology Associates: Havertow	(610)-619-7475	✓	?	X	X	X	✓	?	✓	✓	X	X	X	✓	X	X	X	✓	✓	✓	✓	✓	✓	?	✓	✓	Interpretation services
Delaware	Crozer Health Gastroenterology Associates: Media	(610)-619-7475	✓	?	X	X	X	✓	?	✓	✓	X	X	X	✓	X	X	X	✓	✓	✓	✓	✓	✓	?	✓	✓	Interpretation services
Delaware	Crozer Health Gastroenterology Associates: Ridley Par	(610)-619-7475	✓	?	X	X	X	✓	?	✓	✓	X	X	X	✓	X	X	X	✓	✓	✓	✓	✓	✓	?	✓	✓	Interpretation services
Delaware	Crozer Health Gastroenterology Associates: Upland	(610)-619-7475	✓	?	X	X	X	✓	?	✓	✓	X	X	X	✓	X	X	X	✓	✓	✓	✓	✓	✓	?	✓	✓	Interpretation services
Delaware	CVS MinuteClinic	(866)-389-2727	✓	X	X	X	X	X	X	✓	✓	X	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	✓	✓	Interpretation services
Delaware	CVS MinuteClinic	(866)-389-2727	✓	X	X	X	X	X	X	✓	✓	X	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	✓	✓	Interpretation services
Delaware	CVS MinuteClinic	(866)-389-2727	✓	X	X	X	X	X	X	✓	✓	X	X	X	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	X	✓	✓	Interpretation services

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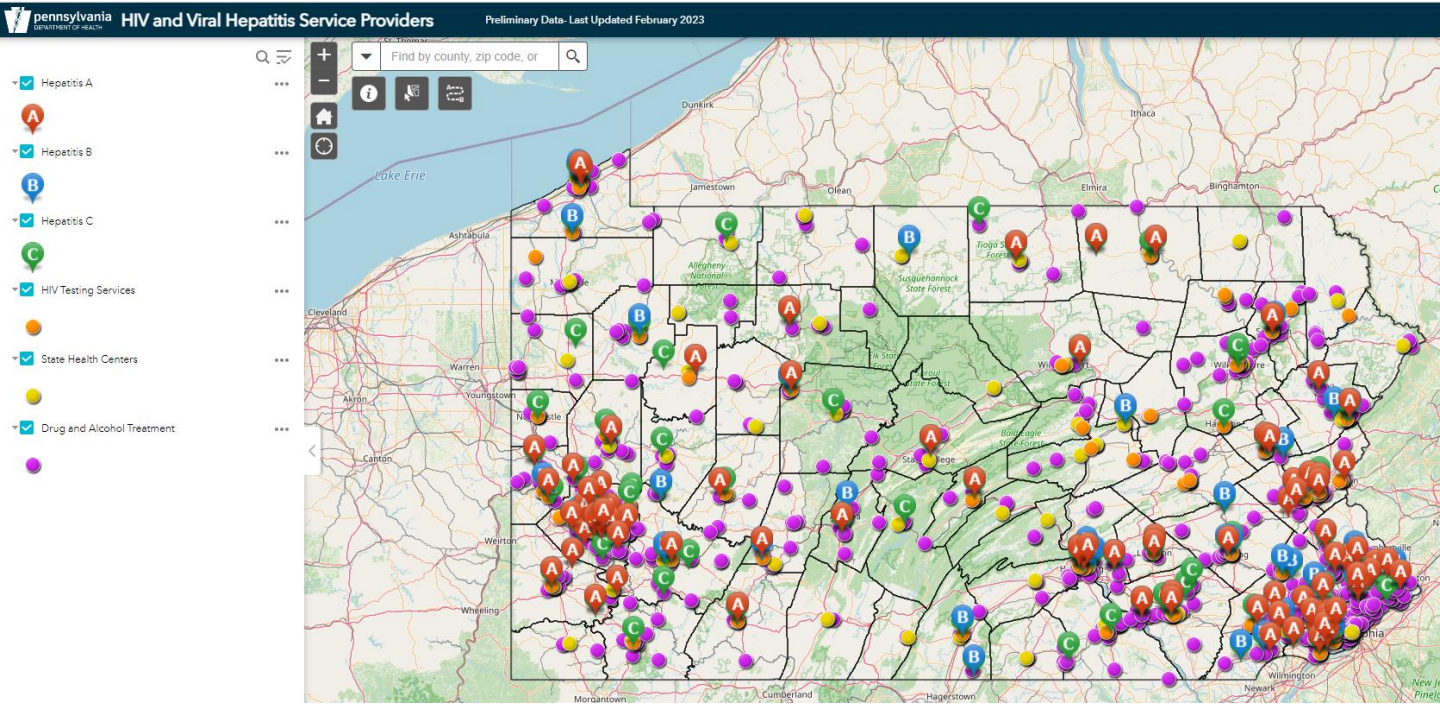
Referral Directory - Map



[HIV and Viral Hepatitis Service Providers (arcgis.com)]

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Training Development

- Clinical Foundations Training for HIV and Viral Hepatitis Service Integration
  - Licensed clinicians
- Medical training for medical professionals
  - HCV treatment onsite

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SCA Recommendations

- Involve criminal justice programs in integration
- Address payor concerns
- Increase awareness about the need for HIV/viral hepatitis services
- Address access/availability issues statewide

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Next Steps

- Continuation of rapid HIV/HCV test kit distribution
- Hep A and Hep B vaccine distribution
- Contractors to work with individual BH-MCOs to address payment issues
- Technical assistance

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Questions?

Lauren Orkis
Epidemiologist Supervisor
laorkis@pa.gov
412-258-3398

Cameron Schatz
Public Health Program Administrator
cschatz@pa.gov
717-787-2020

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Additional Slides

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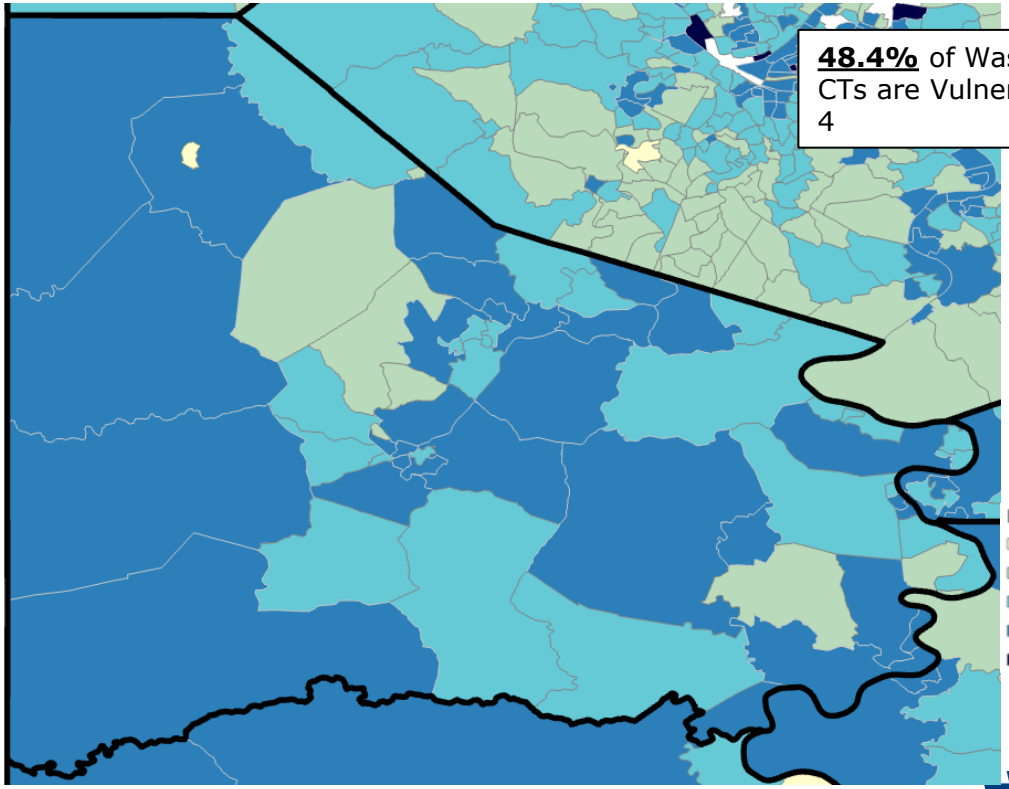
HCV Model - Washington County



48.4% of Washington Co. CTs are Vulnerability Level 4

HCV Predicted Rate (per 100,000 population)
- Vulnerability Level 1 (1.09 - 3.89)
- Vulnerability Level 2 (3.90 - 4.34)
- Vulnerability Level 3 (4.35 - 4.80)
- Vulnerability Level 4 (4.81 - 6.91)
- Vulnerability Level 5 (6.92 - 13.01)

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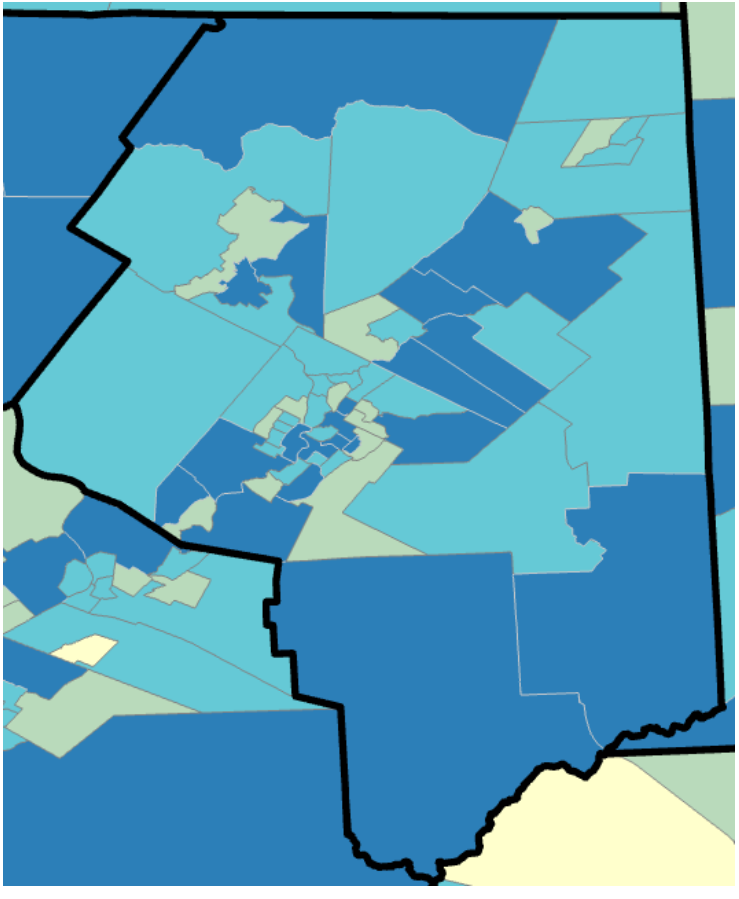
HCV Model – Lackawanna County



33.3% of Lackawanna Co. CTs are Vulnerability Level 4

HCV Predicted Rate (per 100,000 population)
- Vulnerability Level 1 (1.09 - 3.89)
- Vulnerability Level 2 (3.90 - 4.34)
- Vulnerability Level 3 (4.35 - 4.80)
- Vulnerability Level 4 (4.81 - 6.91)
- Vulnerability Level 5 (6.92 - 13.01)

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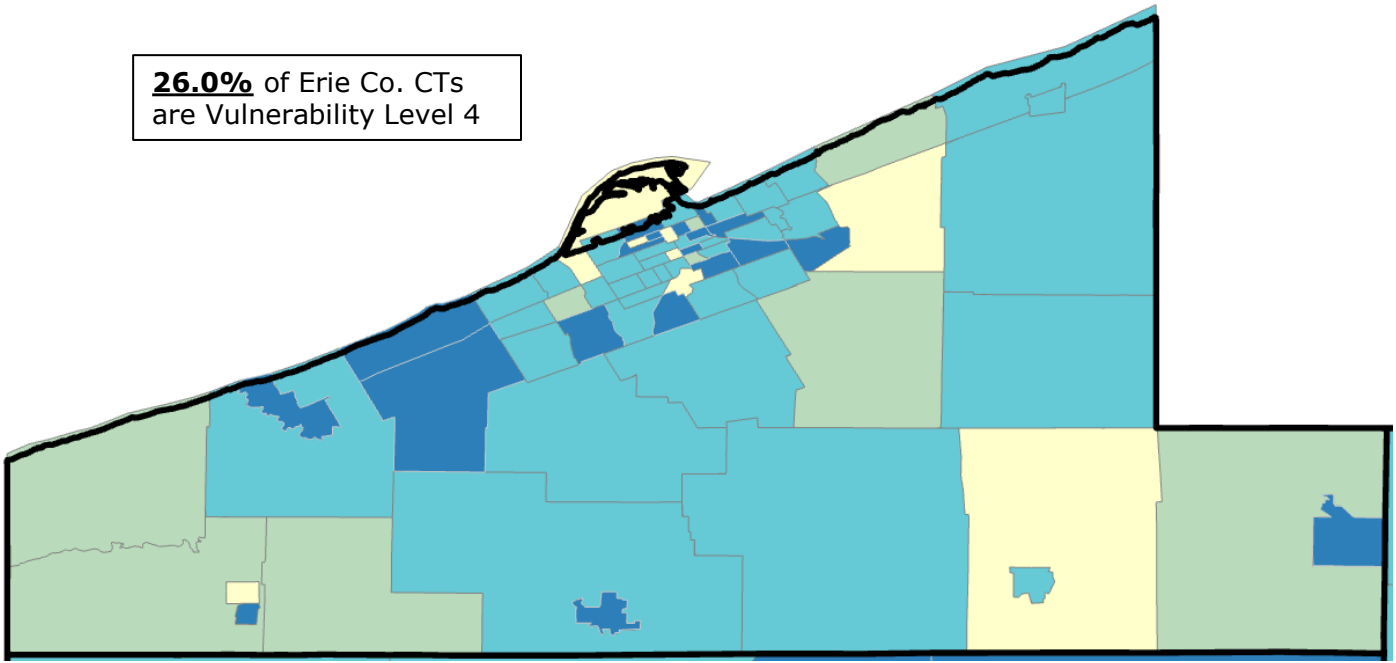
HCV Model – Erie County

26.0% of Erie Co. CTs are Vulnerability Level 4



HCV Predicted Rate (per 100,000 population)

- Vulnerability Level 1 (1.09 - 3.89)
- Vulnerability Level 2 (3.90 - 4.34)
- Vulnerability Level 3 (4.35 - 4.80)
- Vulnerability Level 4 (4.81 - 6.91)
- Vulnerability Level 5 (6.92 - 13.01)

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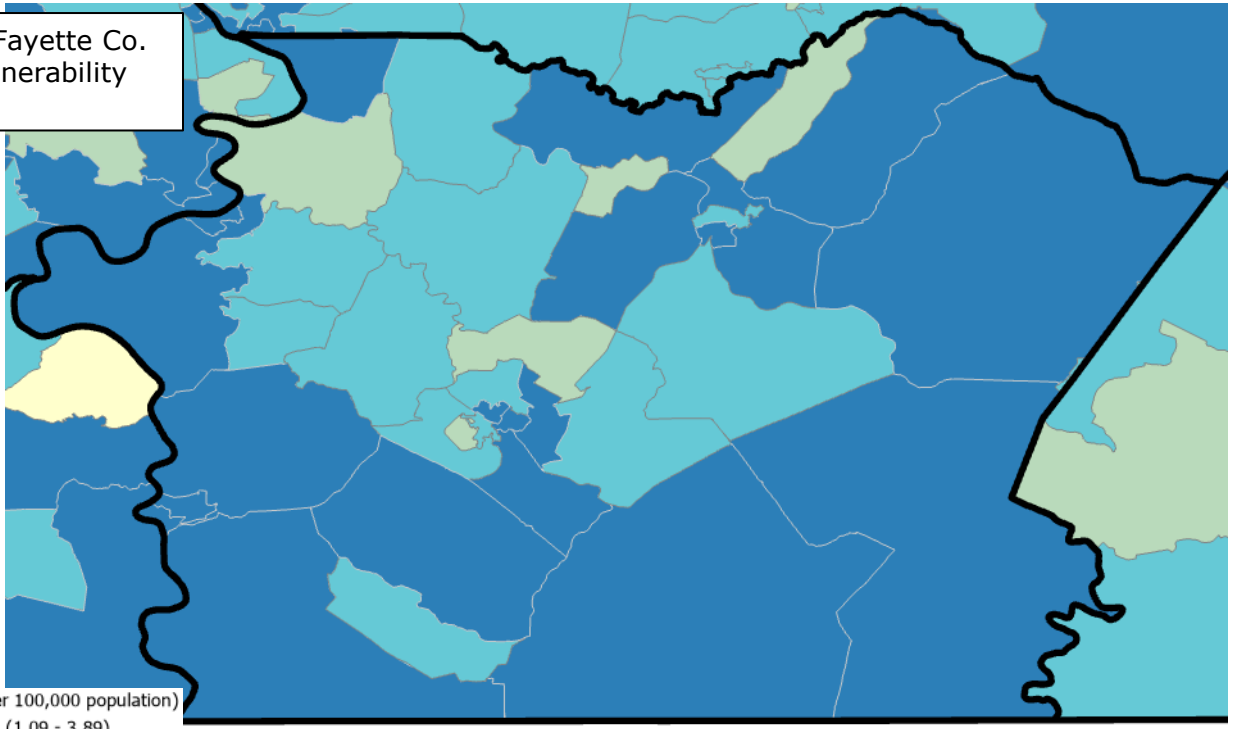
HCV Model – Fayette County

52.8% of Fayette Co. CTs are Vulnerability Level 4



HCV Predicted Rate (per 100,000 population)
- Vulnerability Level 1 (1.09 - 3.89)
- Vulnerability Level 2 (3.90 - 4.34)
- Vulnerability Level 3 (4.35 - 4.80)
- Vulnerability Level 4 (4.81 - 6.91)
- Vulnerability Level 5 (6.92 - 13.01)

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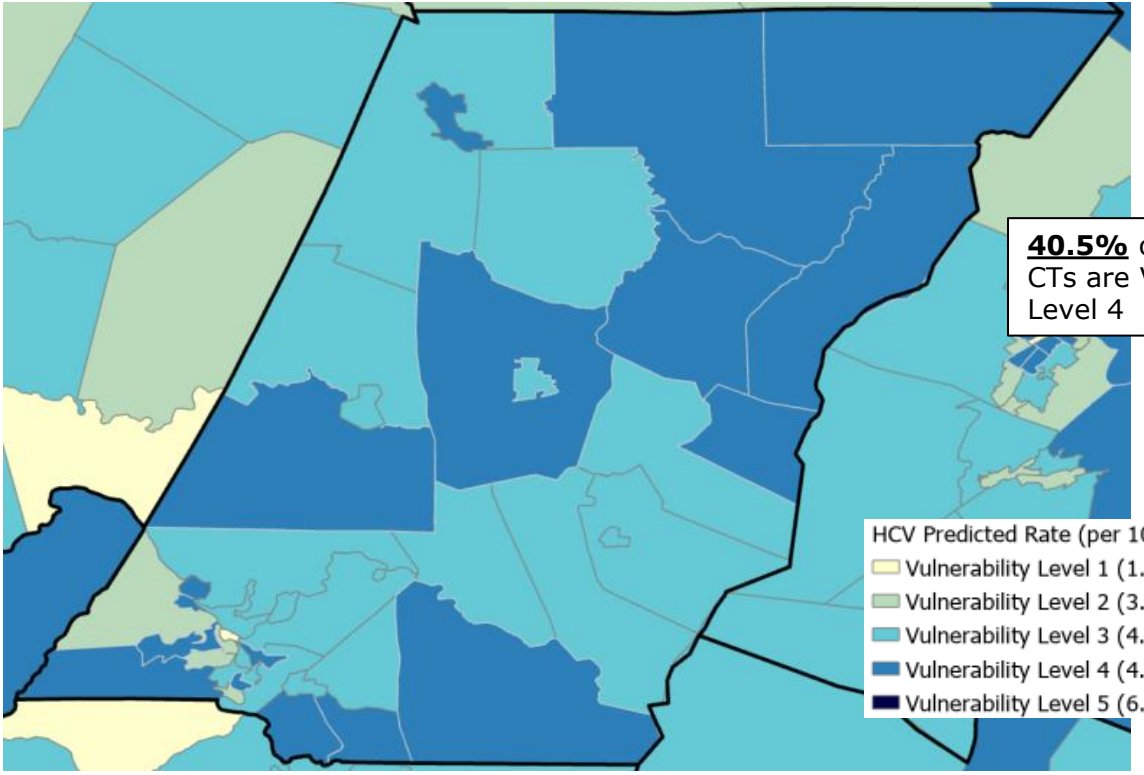
HCV Model – Cambria County



40.5% of Cambria Co. CTs are Vulnerability Level 4

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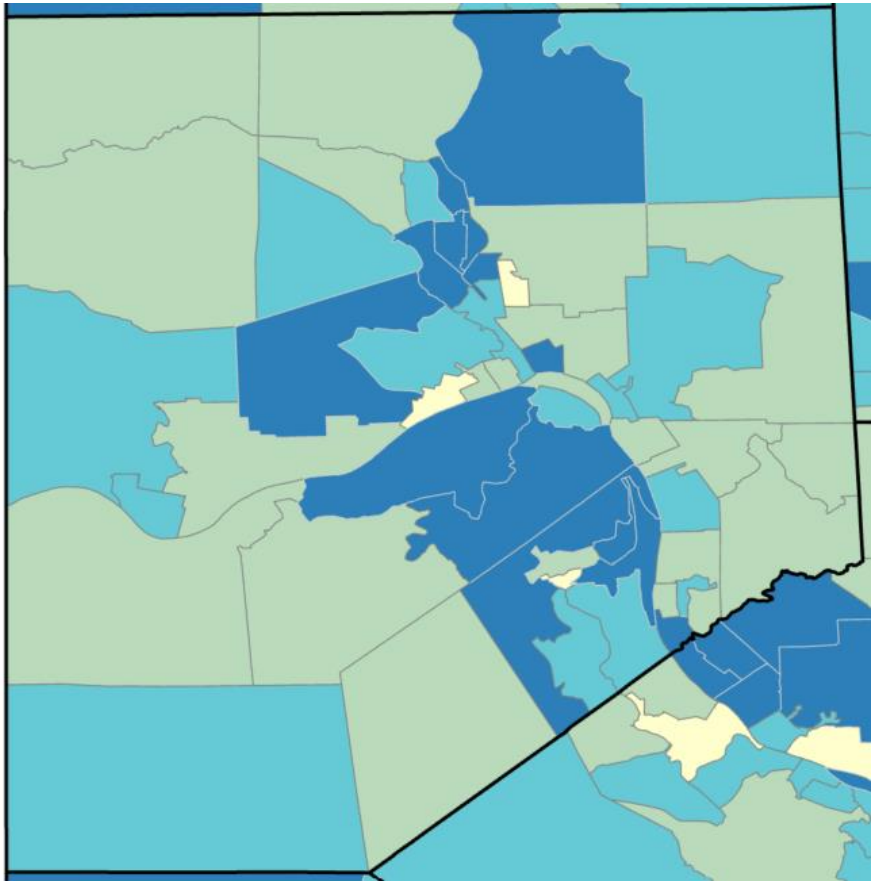
HCV Model – Beaver County



26.4% of Beaver Co. CTs are Vulnerability Level 4

HCV Predicted Rate (per 100,000 population)
- Vulnerability Level 1 (1.09 - 3.89)
- Vulnerability Level 2 (3.90 - 4.34)
- Vulnerability Level 3 (4.35 - 4.80)
- Vulnerability Level 4 (4.81 - 6.91)
- Vulnerability Level 5 (6.92 - 13.01)

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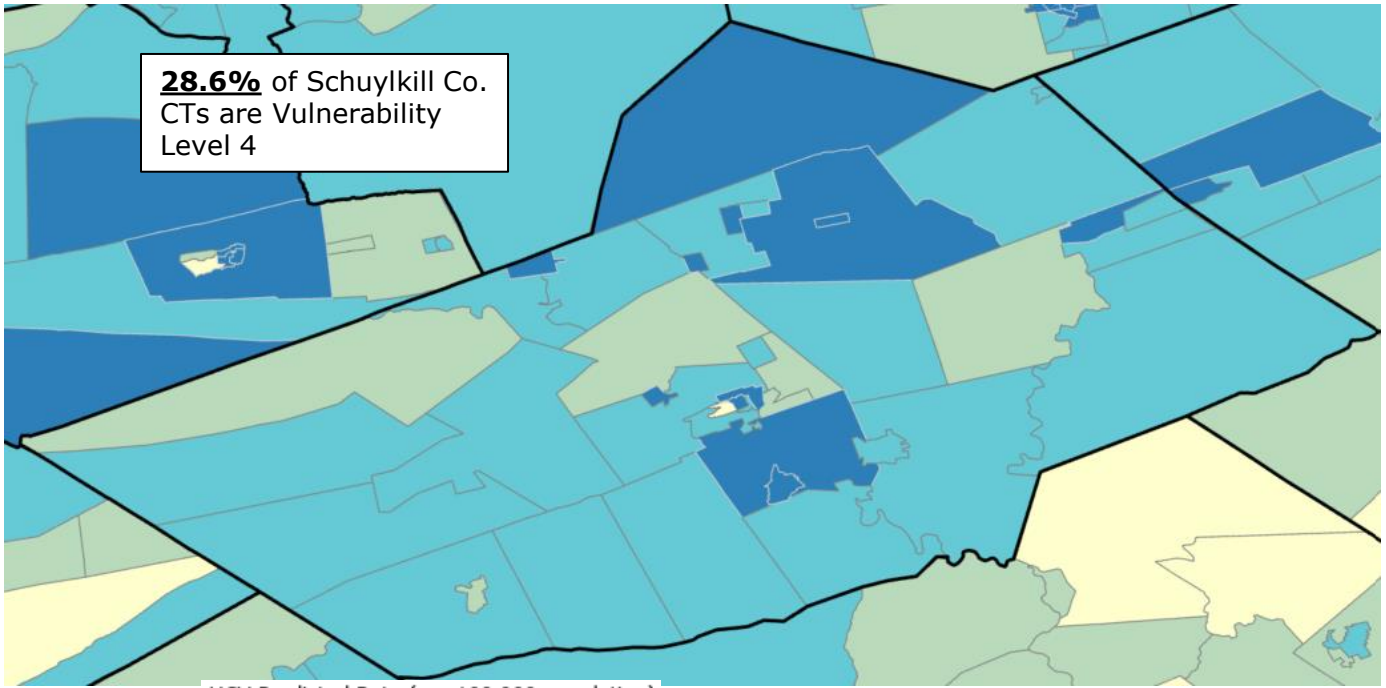
HCV Model – Schuylkill County



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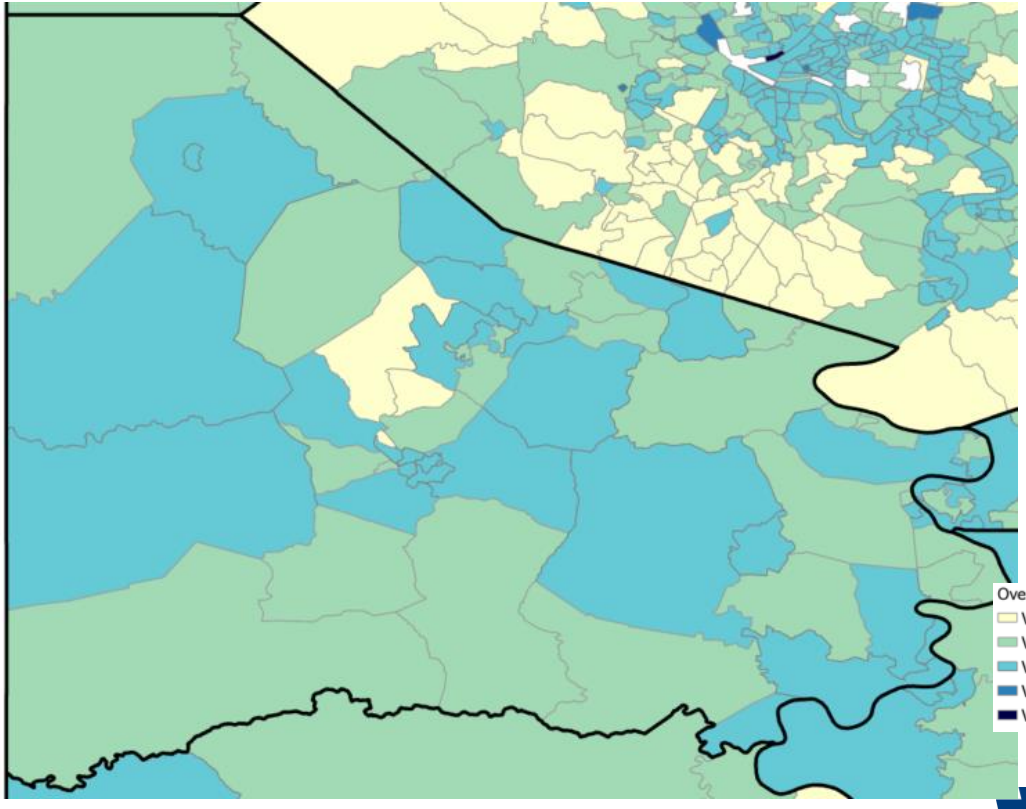
OD Model – Washington County



50.0% of Washington Co. CTs are Vulnerability Level 3

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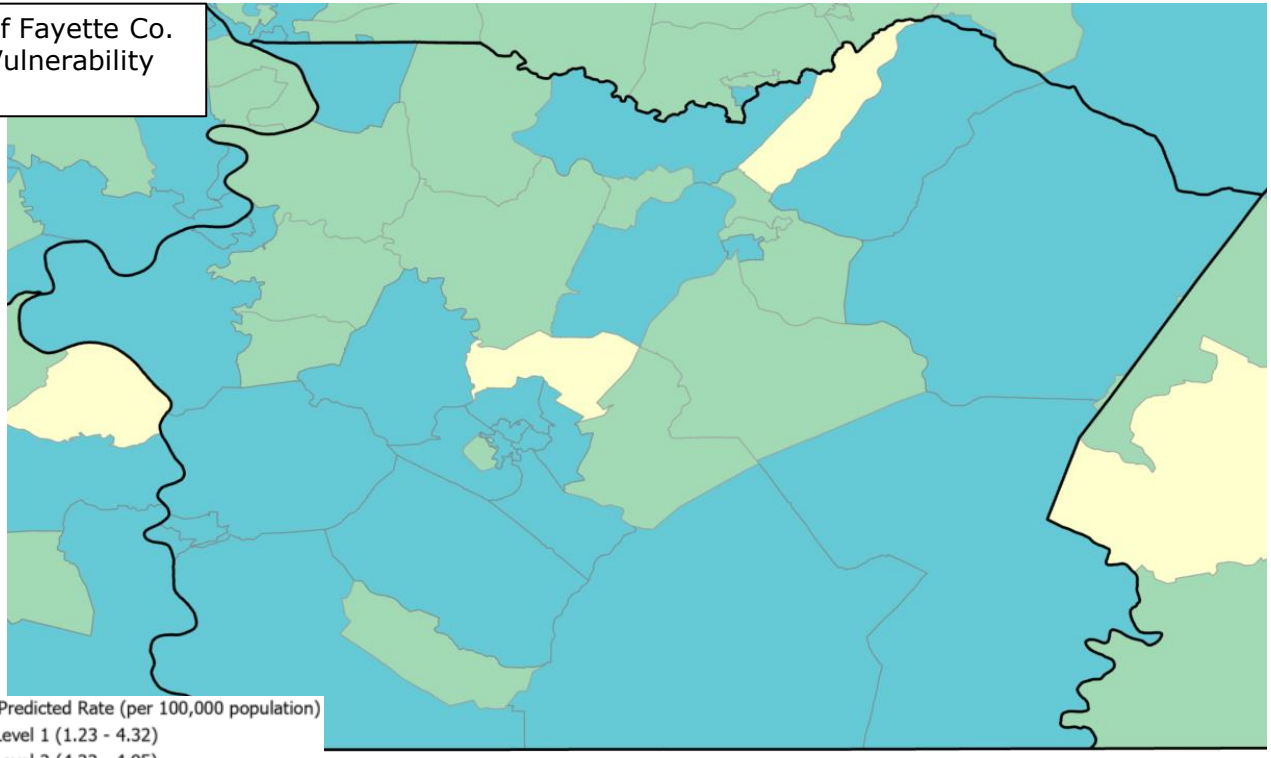
OD Model – Fayette County

61.1% of Fayette Co. CTs are Vulnerability Level 3



Overdose Death Predicted Rate (per 100,000 population)
- Vulnerability Level 1 (1.23 - 4.32)
- Vulnerability Level 2 (4.33 - 4.95)
- Vulnerability Level 3 (4.96 - 7.91)
- Vulnerability Level 4 (7.92 - 14.40)
- Vulnerability Level 5 (14.41 - 27.84)

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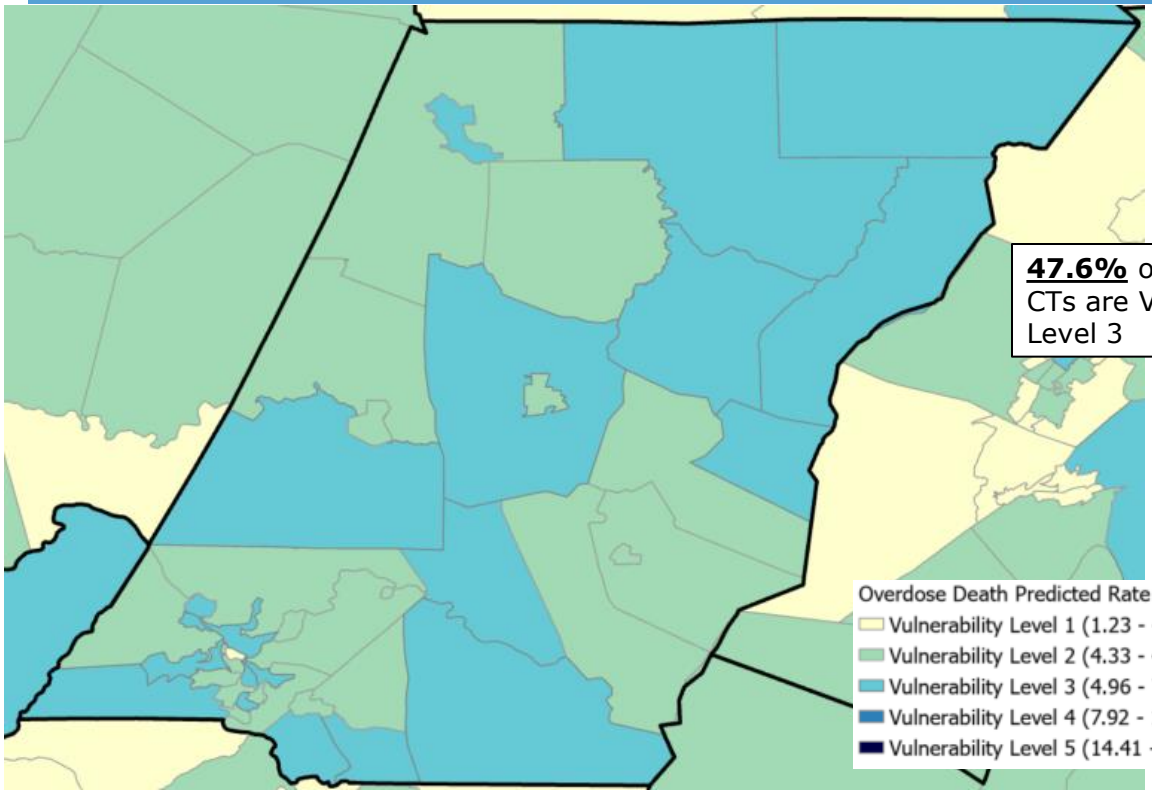
OD Model – Cambria County



47.6% of Cambria Co. CTs are Vulnerability Level 3

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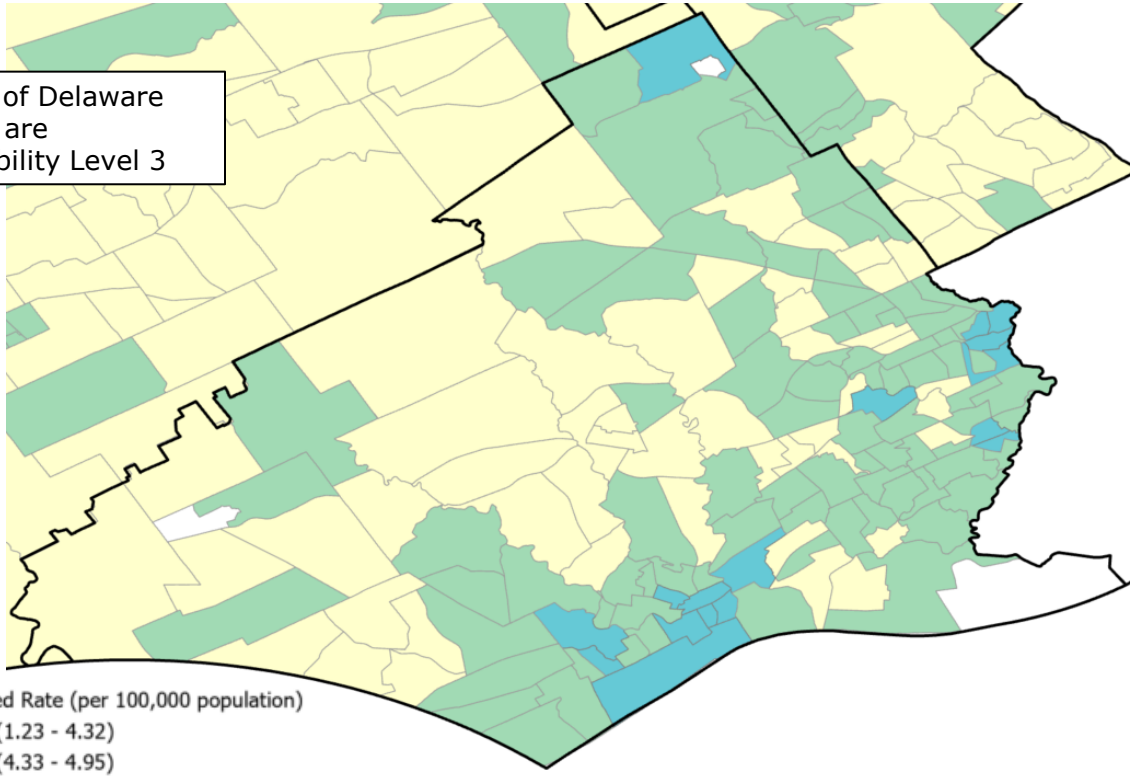
OD Model – Delaware County

11.2% of Delaware Co. CTs are Vulnerability Level 3



Overdose Death Predicted Rate (per 100,000 population)

- Vulnerability Level 1 (1.23 - 4.32)
- Vulnerability Level 2 (4.33 - 4.95)
- Vulnerability Level 3 (4.96 - 7.91)
- Vulnerability Level 4 (7.92 - 14.40)
- Vulnerability Level 5 (14.41 - 27.84)

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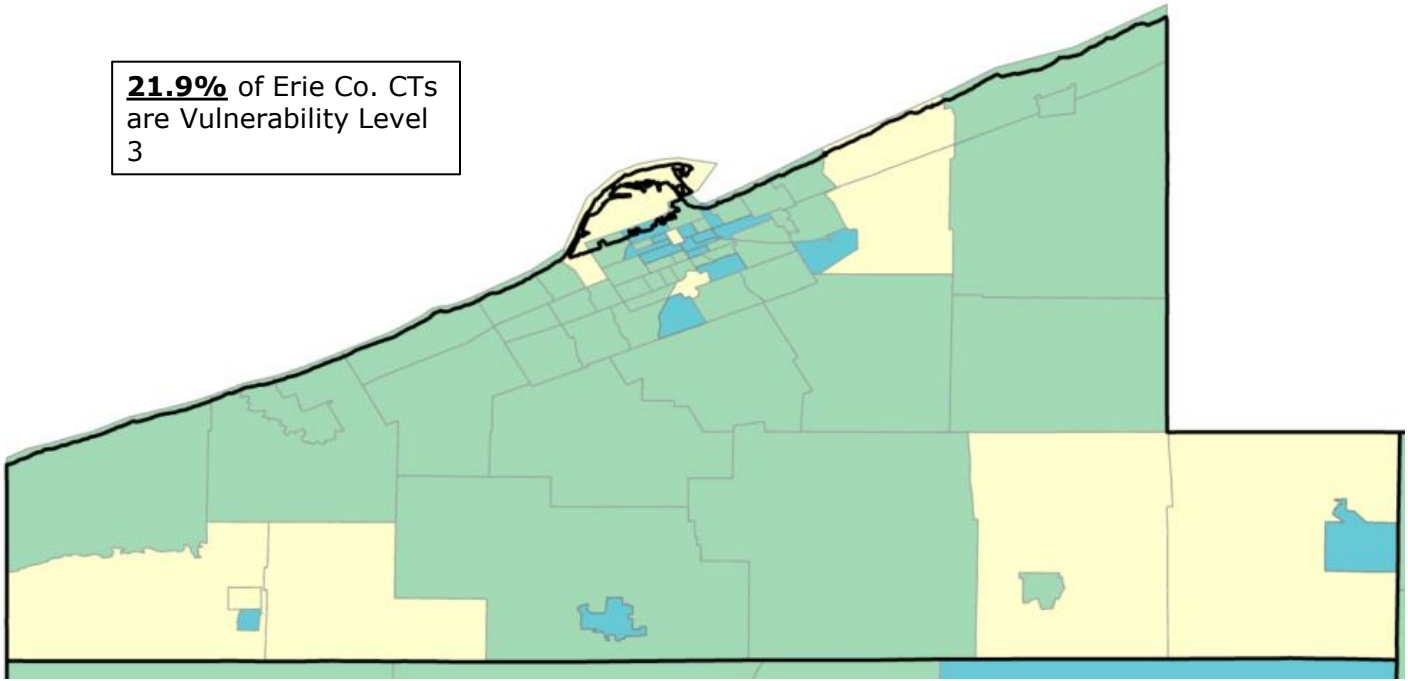
OD Model – Erie County

21.9% of Erie Co. CTs are Vulnerability Level 3



Overdose Death Predicted Rate (per 100,000 population)

- Vulnerability Level 1 (1.23 - 4.32)
- Vulnerability Level 2 (4.33 - 4.95)
- Vulnerability Level 3 (4.96 - 7.91)
- Vulnerability Level 4 (7.92 - 14.40)
- Vulnerability Level 5 (14.41 - 27.84)

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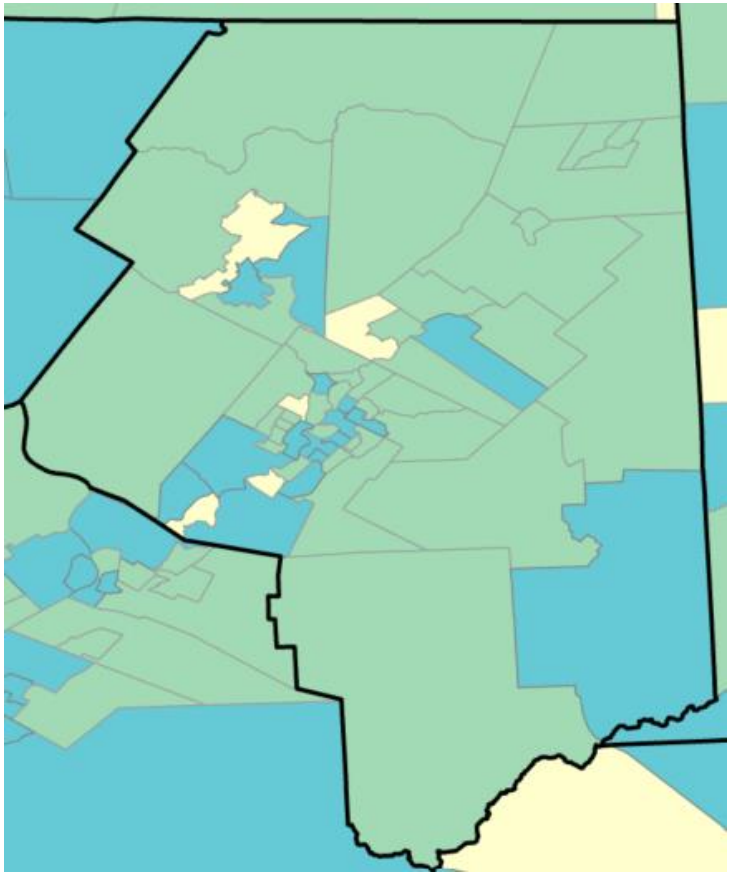
OD Model – Lackawanna County



26.7% of Lackawanna Co. CTs are Vulnerability Level 3

Overdose Death Predicted Rate (per 100,000 population)
- Vulnerability Level 1 (1.23 - 4.32)
- Vulnerability Level 2 (4.33 - 4.95)
- Vulnerability Level 3 (4.96 - 7.91)
- Vulnerability Level 4 (7.92 - 14.40)
- Vulnerability Level 5 (14.41 - 27.84)

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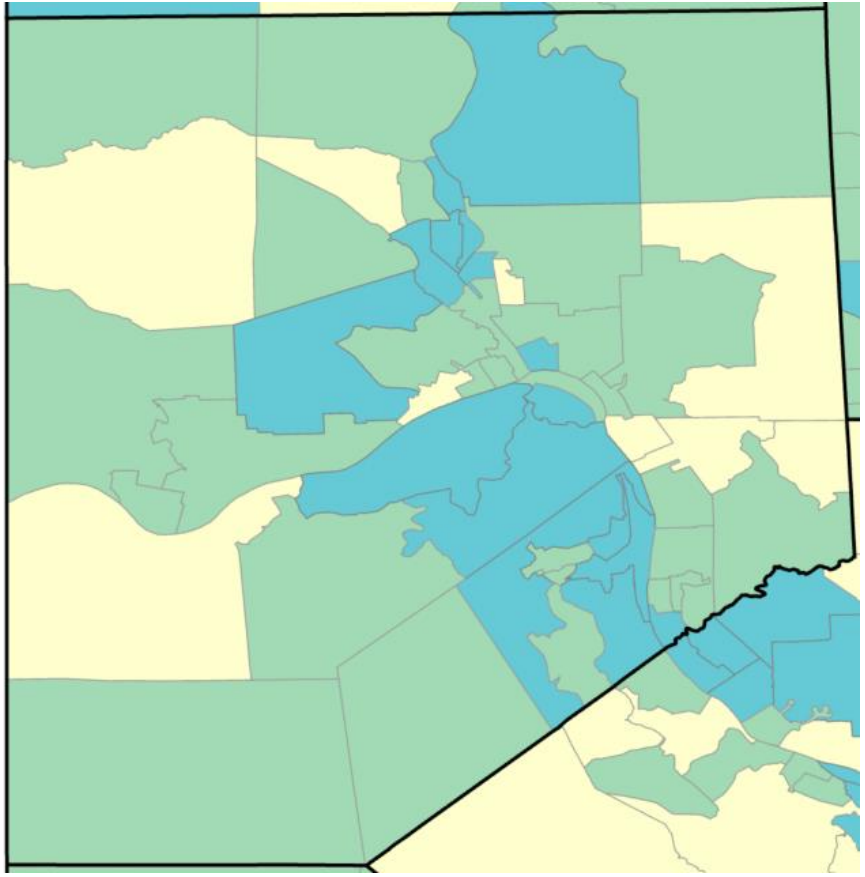
OD Model – Beaver County



30.2% of Beaver Co. CTs are Vulnerability Level 3

Overdose Death Predicted Rate (per 100,000 population)
- Vulnerability Level 1 (1.23 - 4.32)
- Vulnerability Level 2 (4.33 - 4.95)
- Vulnerability Level 3 (4.96 - 7.91)
- Vulnerability Level 4 (7.92 - 14.40)
- Vulnerability Level 5 (14.41 - 27.84)

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