

HIV Surveillance **Report** | Supplemental Report

Volume 19, Number 1

HIV/AIDS Data through December 2011

**Provided for the Ryan White
HIV/AIDS Treatment Extension
Act of 2009, for Fiscal Year 2013**



This issue of the *HIV Surveillance Supplemental Report* is published by the Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention (CDC), Atlanta, Georgia, and the HIV/AIDS Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services, Rockville, Maryland.

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Suggested citation

Centers for Disease Control and Prevention. HIV/AIDS data through December 2011 provided for the Ryan White HIV/AIDS Treatment Extension Act of 2009, for fiscal year 2013. *HIV Surveillance Supplemental Report* 2014;19(No. 1):[inclusive page numbers]. <http://www.cdc.gov/hiv/library/reports/surveillance/>. Published July 2014. Accessed [date].

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Acknowledgments

Publication of this report would not have been possible without the contributions of the state and territorial health departments and the HIV surveillance programs that provided surveillance data to CDC.

This report was prepared by the following CDC and HRSA staff and contractors: William Adih, Patricia Sweeney, Jianmin Li, Anne Patala, Faye Malitz, Kelley Weld, and Michael Friend (desktop publishing).

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Commentary

The Ryan White HIV/AIDS Treatment Extension Act of 2009 (formerly the Comprehensive AIDS Resources Emergency Act) was first enacted into law in 1990, and amended in 1996, 2000, 2006, and 2009. More information about the legislation and its history is available from the Health Resources and Services Administration (HRSA) HIV/AIDS Bureau at <http://hab.hrsa.gov/about/hab/legislation.html>. The National HIV/AIDS Strategy calls for supporting and strengthening existing HIV screening and surveillance activities to identify populations at greatest risk and to help them access HIV prevention and care services [1].

In FY 2013, HRSA, for the seventh year in a row, used total counts of persons living with diagnosed HIV infection and persons living with infection ever classified as AIDS in the Ryan White HIV/AIDS Treatment Program Parts A and B (formerly Titles I and II) allocation formulas. Prior to FY 2007, only AIDS cases, adjusted by a survival rate (estimated number of persons living with infection ever classified as AIDS), were used in the formulas. Beginning in FY 2007, persons living with diagnosed HIV infection non-AIDS as well as persons living with infection ever classified as AIDS, as reported to and confirmed by the Director of the Centers for Disease Control and Prevention (CDC), were used to calculate funding allocation amounts. See Technical Notes for further explanation.

As instructed by the law, HRSA continues to use cumulative cases of AIDS reported to and confirmed by the Director of CDC for the most recent 5 calendar years for which such data are available to determine eligibility for Part A grantees. Part A has two categories of grantees, Eligible Metropolitan Areas (EMAs) and Transitional Grant Areas (TGAs). EMAs are defined as jurisdictions that have a cumulative total of more than 2,000 AIDS cases reported to and confirmed by the Director of CDC during the most recent 5 calendar years for which such data are available and with a minimum population of 50,000 persons (prior to FY 2007, the minimum population threshold for inclusion as an EMA was 500,000). An area will continue to be an EMA unless it fails to meet both of the following requirements for 3 consecutive fiscal years: (a) a cumulative total of 2,000 or more AIDS cases reported to and confirmed by the Director of CDC during the

most recent period of 5 calendar years for which such data are available, and (b) a cumulative total of 3,000 or more persons living with HIV infection ever classified as AIDS reported to and confirmed by the Director of CDC as of December 31 of the most recent calendar year for which such data are available. There are 24 EMAs for FY 2013.

The other category of Part A grantees, TGAs, are defined as those jurisdictions that have a cumulative total of at least 1,000 but fewer than 2,000 AIDS cases reported to and confirmed by the Director of CDC during the most recent 5 calendar years for which such data are available and with a minimum population of 50,000 persons. An area will remain a TGA unless it fails to meet both of the following requirements for 3 consecutive fiscal years: (a) a cumulative total of at least 1,000—but fewer than 2,000—AIDS cases reported to and confirmed by the Director of CDC during the most recent period of 5 calendar years for which such data are available, and (b) a cumulative total of 1,500 or more persons living with HIV infection ever classified as AIDS reported to and confirmed by the Director of CDC as of December 31 of the most recent calendar year for which such data are available. Provisions in the Ryan White HIV/AIDS Treatment Extension Act of 2009 provided for a modification beginning in FY 2009. In the case where a metropolitan area has a cumulative total of at least 1,400 but fewer than 1,500 persons living with HIV infection ever classified as AIDS as of December 31 of the most recent calendar year for which such data are available, the area shall be treated as having met TGA criteria (b) as long as the area did not have more than 5% of its formula funding unobligated at the end of the most recent fiscal year for which such data are available. *Note:* The first year the consecutive year requirement was applied was FY 2008. Areas that have fallen below the required TGA thresholds that continue to be eligible per the Ryan White Treatment Extension Act of 2009 are presented in the tables and remain designated as TGAs. For FY 2013, there were 29 TGAs. The one new TGA in FY 2013 is Columbus, Ohio.

The geographic boundaries for all jurisdictions that received Part A funding in FY 2013—both EMAs and TGAs—are those boundaries that were in effect when

they were initially funded under Part A (formerly Title I). For all newly eligible areas, the boundaries are based on current metropolitan statistical area (MSA) boundary definitions determined by the Office of Management and Budget for use in federal statistical activities [2–4].

The Part B Emerging Community (EC) eligibility is also determined based on the number of persons living with HIV infection ever classified as AIDS in that jurisdiction. ECs are defined as metropolitan areas for which there have been at least 500 but fewer than 1,000 AIDS cases reported to and confirmed by the Director of CDC during the most recent 5 calendar years for which such data are available. An area will remain an EC unless it fails to meet both of the following requirements for 3 consecutive fiscal years: (a) a cumulative total of at least 500 but fewer than 1,000 AIDS cases reported to and confirmed by the Director of CDC during the most recent 5 calendar years for which such data are available, and (b) a cumulative total of 750 or more persons living with HIV infection ever classified as AIDS reported to and confirmed by the Director of CDC as of December 31 of the most recent year for which such data are available. In FY 2013, the Charleston-North Charleston, South Carolina MSA was designated as an eligible EC.

The number of persons living with diagnosed HIV infection non-AIDS and the number of persons living with infection ever classified as AIDS are used to determine funding levels for Ryan White Parts A and B. For FY 2013, CDC provided HRSA with data files containing the total number of persons reported living with diagnosed HIV infection non-AIDS and the total number of persons living with infection ever classified as AIDS through calendar year 2011 for all jurisdictions. FY 2013 marks the first year in which HRSA calculated funding amounts based on name-based HIV reporting for both the total number of persons living with diagnosed HIV infection non-AIDS and the total number of persons living with infection ever classified as AIDS across all jurisdictions. From 2007 through 2012, HRSA was required to accept code-based or non-name HIV non-AIDS data from jurisdictions without mature name-based data.

The number of persons living with diagnosed HIV infection non-AIDS and the number of persons living with infection ever classified as AIDS were added together to arrive at the total number of persons living with diagnosed HIV infection non-AIDS and infection

ever classified as AIDS for each EMA/TGA, EC, state, and territory. These totals were used in the Part A and B funding formula calculations.

REFERENCES

1. The White House Office of National AIDS Policy. National HIV/AIDS strategy for the United States. <http://www.WhiteHouse.gov/administration/eop/onap/nhas>. Published July 2010. Accessed June 6, 2014.
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4. Office of Management and Budget. Update of statistical area definitions and guidance on their uses. OMB Bulletin 08-01. <http://www.whitehouse.gov/omb/bulletins/fy2008/b08-01.pdf>. Published November 20, 2007. Accessed April 1, 2014.

Technical Notes

In October 2009, Congress enacted the Ryan White HIV/AIDS Treatment Extension Act of 2009. The Act specifies the use of surveillance data on persons living with diagnosed HIV infection non-AIDS and infection ever classified as AIDS to determine formula funding for Part A and Part B HIV care and services programs. The Ryan White HIV/AIDS Treatment Extension Act of 2009 authorizes CDC to provide AIDS data to HRSA for use in their funding formulas for all jurisdictions and to provide HIV non-AIDS case data for areas with accurate and reliable name-based reporting as specified in the Act. The Act provided that areas without name-based HIV reporting systems in place could report HIV non-AIDS data directly to HRSA until such time that they had an operational name-based reporting system in place and the data were deemed sufficiently accurate and reliable for CDC to provide to HRSA. Beginning in FY 2013, determinations were to be based on CDC reported HIV non-AIDS and AIDS data in all jurisdictions. As of December 2011, the Marshall Islands and the Federated States of Micronesia had not implemented name-based or code-based reporting systems but were given the option of reporting case counts to HRSA. The Marshall Islands had one case of HIV non-AIDS reported by the State of Hawaii for calculating funding amounts in FY 2013. The Federated States of Micronesia did not report any case data to HRSA in FY 2013. These areas continued to submit their own HIV non-AIDS case data directly to HRSA in FY 2013.

DATA REQUIREMENTS AND DEFINITIONS

Case counts in all tables are presented by residence at earliest HIV diagnosis for persons with diagnosed HIV infection non-AIDS and residence at earliest AIDS diagnosis for persons with infection ever classified as AIDS. Data are presented by date of report rather than date of diagnosis (e.g., persons reported as alive as of December 31, 2010). Boundaries for MSAs are based on 1994 U.S. Census MSA definitions for EMAs and TGAs that became eligible prior to FY 2007. Boundaries for newly eligible EMAs, TGAs, and ECs are determined using applicable definitions based on the 2000 U.S. Census.

Reported persons living with diagnosed HIV infection non-AIDS or infection ever classified as AIDS and 5-year AIDS case counts are not adjusted for delays in reporting of cases or deaths. Reported persons living with diagnosed HIV infection non-AIDS or infection ever classified as AIDS are defined as persons reported as “alive” at last update.

HIV non-AIDS cases for code-based data submitted to HRSA and HIV non-AIDS cases and AIDS case data reported from CDC met the CDC surveillance case definitions published in the revised surveillance case definitions for HIV infection among adults, adolescents, and children <18 months and for HIV infection and AIDS among children aged 18 months to <13 years [1].

REFERENCES

1. CDC. Revised surveillance case definitions for HIV infection among adults, adolescents, and children <18 months and for HIV infection and AIDS among children aged 18 months to <13 years—United States, 2008. *MMWR* 2008;57(RR-10);1–8. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5710a1.htm>. Accessed April 1, 2014.

Table 1. Reported AIDS cases and persons reported living with diagnosed HIV infection ever classified as AIDS, by area of residence, 2007–2011 and as of December 2011—eligible metropolitan areas and transitional grant areas for the Ryan White HIV/AIDS Treatment Extension Act of 2009

Area of residence	Reported AIDS cases 2007–2011	Persons reported living with diagnosed HIV infection ever classified as AIDS (as of December 2011)
	No.	No.
Eligible metropolitan areas (EMAs)		
Atlanta-Sandy Springs-Marietta, Georgia	5,057	14,055
Baltimore, Maryland	3,608	11,090
Boston-Brockton-Nashua, Massachusetts-New Hampshire	2,774	9,092
Chicago, Illinois	5,230	15,421
Dallas, Texas	3,166	9,196
Detroit, Michigan	1,953	5,393
Fort Lauderdale, Florida	3,486	9,194
Houston, Texas	4,903	12,705
Los Angeles-Long Beach, California	8,002	26,027
Miami, Florida	4,314	14,159
Nassau-Suffolk, New York	1,234	3,671
New Haven-Bridgeport-Danbury-Waterbury, Connecticut	978	4,261
New Orleans, Louisiana	1,544	4,472
New York, New York	17,597	66,006
Newark, New Jersey	2,445	7,094
Orlando, Florida	2,087	5,424
Philadelphia, Pennsylvania-New Jersey	4,558	14,126
Phoenix-Mesa, Arizona	1,905	4,616
San Diego, California	1,853	7,114
San Francisco, California	2,658	11,081
San Juan-Bayamon, Puerto Rico	1,990	7,012
Tampa-St. Petersburg-Clearwater, Florida	2,200	6,030
Washington, DC-Maryland-Virginia-West Virginia	6,785	19,186
West Palm Beach-Boca Raton, Florida	1,435	4,899
Transitional grant areas (TGAs)		
Austin-San Marcos, Texas	874	2,764
Baton Rouge, Louisiana	1,240	2,399
Bergen-Passaic, New Jersey	709	2,359
Charlotte-Gastonia-Concord, North Carolina-South Carolina	1,117	2,302
Cleveland-Lorain-Elyria, Ohio	701	2,377
Columbus, Ohio	1,013	1,983
Denver, Colorado	1,163	3,782
Fort Worth-Arlington, Texas	798	2,252
Hartford, Connecticut	634	2,492
Indianapolis, Indiana	823	2,306
Jacksonville, Florida	1,427	3,511

Table 1. Reported AIDS cases and persons reported living with diagnosed HIV infection ever classified as AIDS, by area of residence, 2007–2011 and as of December 2011—eligible metropolitan areas and transitional grant areas for the Ryan White HIV/AIDS Treatment Extension Act of 2009 (cont)

Area of residence	Reported AIDS cases 2007–2011	Persons reported living with diagnosed HIV infection ever classified as AIDS (as of December 2011)
	No.	No.
Jersey City, New Jersey	948	2,837
Kansas City, Missouri-Kansas	1,011	2,709
Las Vegas, Nevada-Arizona	1,267	3,115
Memphis, Tennessee-Mississippi-Arkansas	1,117	3,379
Middlesex-Somerset-Hunterdon, New Jersey	480	1,617
Minneapolis-St. Paul, Minnesota-Wisconsin	998	2,758
Nashville-Davidson-Murfreesboro, Tennessee	857	2,678
Norfolk-Virginia Beach-Newport News, Virginia	869	2,499
Oakland, California	1,755	4,869
Orange County, California	1,222	3,877
Ponce, Puerto Rico	329	1,320
Portland-Vancouver, Oregon-Washington	795	2,702
Riverside-San Bernardino, California	1,639	5,137
Sacramento, California	634	1,951
St. Louis, Missouri-Illinois	1,174	3,411
San Antonio, Texas	1,134	2,901
San Jose, California	765	2,241
Seattle-Bellevue-Everett, Washington	1,177	4,395

Note. See Commentary for definition of eligible metropolitan areas (EMAs) and transitional grant areas (TGAs).

Columbus, Ohio, formerly a Part B emerging community, became an eligible TGA in FY 2013.

Four TGAs (Caguas, Puerto Rico; Dutchess County, New York; Santa Rosa, California; and Vineland-Millville-Bridgeton, New Jersey) failed for three consecutive years to meet eligibility criteria to remain a TGA. Therefore, they did not receive funding in FY 2013.

Table 2. Reported AIDS cases and persons reported living with diagnosed HIV infection ever classified as AIDS, by area of residence, 2007–2011 and as of December 2011—emerging communities for the Ryan White HIV/AIDS Treatment Extension Act of 2009

Emerging communities (ECs)	Reported AIDS cases 2007–2011	Persons reported living with diagnosed HIV infection ever classified as AIDS (as of December 2011)
	No.	No.
Albany-Schenectady-Troy, New York	401	1,196
Augusta-Richmond County, Georgia-South Carolina	329	1,101
Bakersfield, California	501	1,262
Birmingham-Hoover, Alabama	388	1,298
Bradenton-Sarasota-Venice, Florida	332	1,044
Buffalo-Niagara Falls, New York	457	1,258
Charleston-North Charleston, South Carolina	510	1,220
Cincinnati-Middletown, Ohio-Kentucky-Indiana	762	1,793
Columbia, South Carolina	880	2,246
Jackson, Mississippi	604	1,509
Lakeland, Florida	481	1,097
Louisville, Kentucky-Indiana	619	1,449
Milwaukee-Waukesha-West Allis, Wisconsin	488	1,467
Oklahoma City, Oklahoma	444	1,179
Philadelphia, Pennsylvania-New Jersey-Delaware-Maryland— Wilmington Division	459	1,465
Pittsburgh, Pennsylvania	562	1,672
Port St. Lucie-Fort Pierce, Florida	530	1,388
Providence-New Bedford-Fall River, Rhode Island-Massachusetts	376	1,411
Raleigh-Cary, North Carolina	763	1,594
Richmond, Virginia	807	1,950
Rochester, New York	538	1,731

Note. See Commentary for definition of emerging communities (ECs).

Charleston-North Charleston, South Carolina, became an eligible EC in FY 2013.

Table 3. Reported number of persons living with diagnosed HIV infection non-AIDS, infection ever classified as AIDS, and total, by area of residence, as of December 2011—United States and dependent areas for the Ryan White HIV/AIDS Treatment Extension Act of 2009

Area of residence	HIV non-AIDS	HIV infection ever classified as AIDS	Total
	No.	No.	No.
Alabama	6,924	4,800	11,724
Alaska	304	373	677
Arizona	6,403	6,278	12,681
Arkansas	2,501	2,376	4,877
California	42,588	70,972	113,560
Colorado	6,431	5,007	11,438
Connecticut	3,615	7,420	11,035
Delaware	1,222	1,932	3,154
District of Columbia	6,133	9,497	15,630
Florida	44,753	56,263	101,016
Georgia	17,210	20,811	38,021
Hawaii	914	1,447	2,361
Idaho	441	389	830
Illinois	15,173	18,135	33,308
Indiana	4,279	4,796	9,075
Iowa	800	1,144	1,944
Kansas	1,277	1,628	2,905
Kentucky	2,620	3,035	5,655
Louisiana	8,788	10,095	18,883
Maine	552	638	1,190
Maryland	13,372	18,154	31,526
Massachusetts	6,472	10,161	16,633
Michigan	6,882	8,057	14,939
Minnesota	3,844	3,133	6,977
Mississippi	4,891	4,107	8,998
Missouri	5,388	6,247	11,635
Montana	156	255	411
Nebraska	841	961	1,802
Nevada	3,621	3,584	7,205
New Hampshire	518	645	1,163
New Jersey	16,925	19,132	36,057
New Mexico	1,153	1,512	2,665

Table 3. Reported number of persons living with diagnosed HIV infection non-AIDS, infection ever classified as AIDS, and total, by area of residence, as of December 2011—United States and dependent areas for the Ryan White HIV/AIDS Treatment Extension Act of 2009 (cont)

Area of residence	HIV non-AIDS	HIV infection ever classified as AIDS	Total
	No.	No.	No.
New York	52,069	80,519	132,588
North Carolina	15,196	10,805	26,001
North Dakota	111	93	204
Ohio	9,521	8,885	18,406
Oklahoma	2,578	2,527	5,105
Oregon	2,022	3,420	5,442
Pennsylvania	13,924	19,292	33,216
Rhode Island	643	1,442	2,085
South Carolina	6,915	8,288	15,203
South Dakota	265	189	454
Tennessee	8,447	8,457	16,904
Texas	30,695	38,338	69,033
Utah	1,091	1,379	2,470
Vermont	176	246	422
Virginia	11,066	9,835	20,901
Washington	4,968	6,491	11,459
West Virginia	751	865	1,616
Wisconsin	2,697	2,667	5,364
Wyoming	136	139	275
American Samoa	1	1	2
Federated States of Micronesia*			
Guam	50	34	84
Marshall Islands	0	1	1
Northern Mariana Islands	6	4	10
Palau	3	1	4
Puerto Rico	7,739	11,463	19,202
U.S. Virgin Islands	267	337	604

Note. The number of cases shown in the Total column was used by the Health Resources and Services Administration in FY 2013 funding calculations.

* Did not submit any name-based or code-based HIV data to HRSA in FY 2013.

Table 4. Reported number of persons living with diagnosed HIV infection non-AIDS, infection ever classified as AIDS, and total, by area of residence, as of December 2011—eligible metropolitan areas and transitional grant areas for the Ryan White HIV/AIDS Treatment Extension Act of 2009

Area of residence	HIV non-AIDS	HIV infection ever classified as AIDS	Total
	No.	No.	No.
Eligible metropolitan areas (EMAs)			
Atlanta-Sandy Springs-Marietta, Georgia	10,604	14,055	24,659
Baltimore, Maryland	8,177	11,090	19,269
Boston-Brockton-Nashua, Massachusetts-New Hampshire	5,638	9,092	14,730
Chicago, Illinois	12,830	15,421	28,251
Dallas, Texas	7,814	9,196	17,010
Detroit, Michigan	4,384	5,393	9,777
Fort Lauderdale, Florida	7,926	9,194	17,120
Houston, Texas	9,573	12,705	22,278
Los Angeles-Long Beach, California	17,023	26,027	43,050
Miami, Florida	12,587	14,159	26,746
Nassau-Suffolk, New York	2,306	3,671	5,977
New Haven-Bridgeport-Danbury-Waterbury, Connecticut	2,024	4,261	6,285
New Orleans, Louisiana	3,734	4,472	8,206
New York, New York	41,835	66,006	107,841
Newark, New Jersey	6,554	7,094	13,648
Orlando, Florida	4,834	4,424	10,258
Philadelphia, Pennsylvania-New Jersey	10,410	14,126	24,536
Phoenix-Mesa, Arizona	4,926	4,616	9,542
San Diego, California	4,772	7,114	11,886
San Francisco, California	6,292	11,081	17,373
San Juan-Bayamon, Puerto Rico	4,857	7,012	11,869
Tampa-St. Petersburg-Clearwater, Florida	4,687	6,030	10,717
Washington, DC-Maryland-Virginia-West Virginia	13,635	19,186	32,821
West Palm Beach-Boca Raton, Florida	3,158	4,899	8,057
Transitional grant areas (TGAs)			
Austin-San Marcos, Texas	1,926	2,764	4,690
Baton Rouge, Louisiana	2,118	2,399	4,517
Bergen-Passaic, New Jersey	1,967	2,359	4,326
Charlotte-Gastonia-Concord, North Carolina-South Carolina	3,965	2,302	6,267
Cleveland-Lorain-Elyria, Ohio	2,394	2,377	4,771
Columbus, Ohio	2,736	1,983	4,719

Table 4. Reported number of persons living with diagnosed HIV infection non-AIDS, infection ever classified as AIDS, and total, by area of residence, as of December 2011—eligible metropolitan areas and transitional grant areas for the Ryan White HIV/AIDS Treatment Extension Act of 2009 (cont)

Area of residence	HIV non-AIDS	HIV infection ever classified as AIDS	Total
	No.	No.	No.
Denver, Colorado	5,020	3,782	8,802
Fort Worth-Arlington, Texas	2,029	2,252	4,281
Hartford, Connecticut	1,238	2,492	3,730
Indianapolis, Indiana	2,055	2,306	4,361
Jacksonville, Florida	2,610	3,511	6,121
Jersey City, New Jersey	2,406	2,837	5,243
Kansas City, Missouri-Kansas	2,077	2,709	4,786
Las Vegas, Nevada-Arizona	3,144	3,115	6,259
Memphis, Tennessee-Mississippi-Arkansas	4,168	3,379	7,547
Middlesex-Somerset-Hunterdon, New Jersey	1,291	1,617	2,908
Minneapolis-St. Paul, Minnesota-Wisconsin	3,372	2,758	6,130
Nashville-Davidson-Murfreesboro, Tennessee	2,481	2,678	5,159
Norfolk-Virginia Beach-Newport News, Virginia	3,673	2,499	6,172
Oakland, California	2,134	4,869	7,003
Orange County, California	2,720	3,877	6,597
Ponce, Puerto Rico	631	1,320	1,951
Portland-Vancouver, Oregon-Washington	1,752	2,702	4,454
Riverside-San Bernardino, California	2,870	5,137	8,007
Sacramento, California	1,474	1,951	3,425
St. Louis, Missouri-Illinois	3,169	3,411	6,580
San Antonio, Texas	1,995	2,901	4,896
San Jose, California	858	2,241	3,099
Seattle-Bellevue-Everett, Washington	3,425	4,395	7,820

Note. See Commentary for definition of eligible metropolitan areas (EMAs) and transitional grant areas (TGAs).

The number of cases shown in the Total column was used by the Health Resources and Services Administration in FY 2013 funding calculations.

Columbus, Ohio, formerly a Part B emerging community, became an eligible TGA in FY 2013.

Four TGAs (Caguas, Puerto Rico; Dutchess County, New York; Santa Rosa, California; and Vineland-Millville-Bridgeton, New Jersey) failed for three consecutive years to meet eligibility criteria to remain a TGA. Therefore, they did not receive funding in FY 2013.

Table 5. Reported number of persons living with diagnosed HIV infection non-AIDS, infection ever classified as AIDS, and total, by area of residence, as of December 2011—emerging communities for the Ryan White HIV/AIDS Treatment Extension Act of 2009

Emerging communities (ECs)	HIV non-AIDS	HIV infection ever classified as AIDS	Total
	No.	No.	No.
Albany-Schenectady-Troy, New York	895	1,196	2,115
Augusta-Richmond County, Georgia-South Carolina	1,061	1,101	2,162
Bakersfield, California	626	1,262	1,888
Birmingham-Hoover, Alabama	2,336	1,298	3,634
Bradenton-Sarasota-Venice, Florida	696	1,044	1,740
Buffalo-Niagara Falls, New York	1,033	1,258	2,291
Charleston-North Charleston, SC	1,026	1,220	2,246
Cincinnati-Middletown, Ohio-Kentucky-Indiana	1,635	1,793	3,428
Columbia, South Carolina	1,802	2,246	4,048
Jackson, Mississippi	1,748	1,509	3,257
Lakeland, Florida	737	1,097	1,834
Louisville, Kentucky-Indiana	1,518	1,449	2,967
Milwaukee-Waukesha-West Allis, Wisconsin	1,486	1,467	2,953
Oklahoma City, Oklahoma	1,271	1,179	2,450
Philadelphia, Pennsylvania-New Jersey-Delaware-Maryland— Wilmington Division	932	1,465	2,397
Pittsburgh, Pennsylvania	1,344	1,672	3,016
Port St. Lucie-Fort Pierce, Florida	600	1,388	2,048
Providence-New Bedford-Fall River, Rhode Island-Massachusetts	613	1,411	2,024
Raleigh-Cary, North Carolina	1,693	1,594	3,287
Richmond, Virginia	2,391	1,950	4,341
Rochester, New York	1,283	1,731	3,014

Note. See Commentary for definition of emerging communities (ECs).

The number of cases shown in the Total column was used by the Health Resources and Services Administration in FY 2013 funding calculations.

Charleston-North Charleston, South Carolina, became an eligible EC in FY 2013.