Objective	Population	Baseline (2016)	2017	2018	2019	2020	2021	Status	2021 Goal
Goal 1: Reduce New HIV Infections									
1.1 Aware of HIV status	Statewide	88% (1,100 people)	90% (1000 people)	90% (960 people)	91% (860 people)	88% (1200 people)	89% (1100 people)	Not Met	90%
1.2 Increase MDH funded PrEP utilization by 60%[1]	Statewide (MDH funded programs only)	400	493	359	418	208	316	Not Met	640
1.3 Increase MDH funded PrEP utilization by 60% among African Americans[1]	African Americans (MDH funded programs only)	136	148	57	72	45	57	Not Met	218
1.4 Increase individuals using MDH funded harm reduction and syringe exchange services by 20%[8]	Statewide (MDH funded programs only)	5,942	5,902	6,815	5,462	5,856	11,463	Met	7,131
1.5 Decrease new infections by 20%*	African American	59	76	62	62	72	78	Not Met	47
	- African American MSM	28	42	35	29	28	35	Not Met	22
	- African American Women	14	18	13	11	11	10	Met	11
	African-born	72	60	48	37	25	46	Met	57
	- African-born MSM	5	<5	<5	<5	<5	<5	*	*
	- African-born Women	33	35	25	25	11	25	Met	26
	Latinx	24	33	36	37	33	43	Not Met	19
	- Latino MSM	14	23	28	26	26	25	Not Met	11
	- Latina Women	<5	<5	<5	<5	<5	<5	*	*
	Transgender (All Races/Ethnicities)	4	9	5	11	10	12	*	*
	Statewide (Total)	**294**	**284**	**286**	**275**	**226**	**298**	**Not Met**	**235**
1.6 Increase MDH and RW funded testing by 20%	Black (African American & African-born)	4,333	4,837	3,156	3,052	1,240	1,967	Not Met	5,200
	- Black MSM	532	650	372	453	129	292	Not Met	638
	- Black Women	1,397	1,628	1,230	1,031	395	596	Not Met	1,700
	Latinx	1,490	1,623	899	731	392	911	Not Met	1,788
	- Latino MSM	519	669	285	210	99	245	Not Met	623
	- Latina Women	368	411	278	205	98	315	Not Met	442
	Black Transgender	29	36	39	49	14	21	Not Met	35
	Latinx Transgender	30	38	36	30	2	26	Not Met	36

Objective	Population	Baseline (2016)	2017	2018	2019	2020	2021	Status	2021 Goal
Goal 2: Increase Access to Care & Improve Health Outcomes for People Living with HIV									
2.1 Increase 30 day linkage to 85%	Statewide[3]	83% (251/301)	84%	86% (240/279)	77% (222/287)	87% (241/276)	90% (206/230)	Met	85%
	Ryan White (identified through Early Intervention Services or Outreach Services)	84% (31/37)	90% (44/49)	84% (36/43)	96% (47/49)	85% (28/33)	85% (17/20)	Not Met	90%
2.2 Increase retention in care to 90%	Statewide[4]	71% (5,872/8,297)	73% (6,243/8,580)	72% (6224/8702)	77% (6813/8875)	72% (6572/9185)	71% (6609/9374)	Not Met	90%
Retention in care for Ryan White clients	Ryan White[5]	95% (3,811/4,006)	95% (3,950/4,154)	96% (4,304/4,484)	96% (4,544/4,728)	96% (4607/4812)	96% (4683/4853)	Met	95%
2.3 Increase viral suppression to 80%	Statewide[6]	63% (5,253/8,297)	64% (5,508/8,580)	64% (5530/8702)	68% (6017/8875)	65% (5924/9185)	64% (6018/9374)	Not Met	80%
Viral suppression for Ryan White clients with a viral load in CAREWare	Ryan White[7]	87% (3,042/3,480)	89% (3,169/3,578)	90% (3,468/3,857)	91% (3,752/4,123)	91% (3646/4000)	91% (3857/4219)	Met	90%
2.4 Increase ART prescription to 92%	Ryan White Outpatient Clients	99% (1,275/1,294)†	99% (1,183/1,195)†	99% (911/925)†	99% (1,205/1,217)†	99% (2,031/2,051)†	96% (2,053/2,126)†	Met	92%

Objective	Population	Baseline (2016)	2017	2018	2019	2020	2021	Status	2021 Goal
Goal 3: Reduce HIV-Related Disparities & Health Inequities									
3.1 Increase retention in care to 90% for subpopulations (Statewide)[4]	African American	68% (1201/1788)	68% (1242/1826)	69% (1249/1820)	74% (1358/1830)	68% (1292/1895)	67% (1321/1960)	Not Met	90%
	African-born	68% (815/1188)	71% (921/1302)	69% (961/1400)	73% (1072/1465)	67% (1027/1526)	66% (1030/1560)	Not Met	90%
	Hispanic	63% (508/805)	65% (552/851)	66% (581/886)	68% (647/953)	64% (650/1019)	64% (690/1070)	Not Met	90%
3.1 a. Increase retention in care to 95% for subpopulations (Ryan White)[5]	African American	96% (978/1,010)	96% (991/1,036)	96% 1,164/1,212	96% (1,270/1,325)	95% (1279/1340)	95% (1318/1385)	Met	95%
	- African American MSM	96% (317/329)	95% (331/350)	95% (437/460)	96% (469/487)	95% (468/492)	97% (446/461)	Met	95%
	- African American Women	96% (360/376)	96% (364/379)	96% (417/434)	96% (462/481)	97% (458/474)	95% (472/497)	Met	95%
	African-born	95% (612/644)	95% (678/710)	98% (691/708)	98% (684/699)	98% (660/676)	99% (706/716)	Met	95%
	- African-born Men	96% (253/263)	96% (276/287)	97% (270/278)	98% (265/271)	98% (257/263)	99% (276/280)	Met	95%
	- African-born Women	94% (358/380)	95% (399/420)	98% (417/426)	98% (416/425)	98% (401/410)	99% (427/433)	Met	95%
	Hispanic (All Genders)	93% (407/436)	94% (431/460)	96% (482/504)	97% (526/543)	96% (545/568)	98% (570/583)	Met	95%
	-Hispanic MSM	95% (204/225)	93% (224/241)	96% (286/299)	97% (319/329)	95% (348/366)	98% (333/340)	Met	95%
	- Hispanic Women	77 PWH **	73 PWH **	76 PWH **	89 PWH**	87 PWH**	87 PWH**		
	Native Americans	92 PWH **	87 PWH **	91 PWH **	81 PWH**	73 PWH**	56 PWH**		
	Transgender (All Races/Ethnicities)	69 PWH **	75 PWH **	91% (97/107)	88% (105/119)	87% (126/145)	90% (110/122)		
For Comparison (Ryan White)[5]	White, non-Hispanic			97% (1,652/1,705)	97% (1,688/1,747)	96% (1662/1733)	97% (1642/1696)		
	White MSM	96% (1,113/1,162)	95% (1,144/1,200)	97% (1,220/1,254)	97% (1,269/1,312)	96% (1264/1320)	97% (1215/1254)		
	White Men (Non-MSM)	94% (170/180)	93% (166/179)	96% (179/186)	97% (170/176)	96% (148/154)	97% (147/152)		
	White Women	96% (228/238)	96% (238/247)	96% (247/258)	96% (247/256)	97% (250/259)	97% (254/262)		
	Asian/Pacific Islander			94% (100/106)	95% (120/126)	95% (101/106)	95% (101/106)		
	Multi-racial			97% (108/111)	96% (165/172)	94% (260/276)	96% (284/296)		
3.1 b. Increase number of PLWH in MN accessing Ryan White services to 60%[2]	Statewide	50% (4271/8554)	50% (4373/8789)	50% (4483/8981)	52% (4,728/9,178)	52% (4812/9185)	52% (4853/9374)	Not Met	60%
3.2 Increase ART prescription to 92% for subpopulations	Ryan White Outpatient Clients	99% (1,275/1,294)†	99% (1,183/1,195)†	99% (911/925)†	99% (1,205/1,217)†	99% (2,031/2,051)†	96% (2053/2126)†	Met	92%
3.3 Increase viral suppression to 80% for subpopulations (Statewide)[6]	African American	55% (989/1788)	57% (1035/1826)	57% (1039/1820)	63% (1150/1830)	59% (1124/1895)	57% (1126/1960)	Not Met	80%
	African-born	60% (715/1188)	62% (804/1302)	61% (850/1400)	64% (938/1465)	60% (916/1526)	61% (948/1560)	Not Met	80%
	Hispanic	57% (461/805)	57% (488/851)	61% (537/886)	61% (580/953)	58% (592/1019)	60% (637/1070)	Not Met	80%
Viral suppression for subpopulations who have a viral load in CAREWare (Ryan White clients only) -- not comparable to statewide MDH percentages. [7]	African American (All Genders)	81% (730/899)	83% (741/892)	85% (897/1,053)	88% (1,020/1,162)	88% (1000/1132)	88% (1049/1190)	Not Met	90%
	- African American MSM	82% (235/287)	81% (246/304)	82% (322/395)	89% (381/430)	87% (356/411)	87% (350/401)	Not Met	90%
	- African American Women	81% (268/332)	84% (270/321)	87% (324/373)	87% (362/418)	92% 364/398	90% (389/433)	Met	90%
	African-born (All Genders)	89% (501/566)	90% (559/621)	92% (577/625)	94% (585/622)	92% (539/584)	94% (602/642)	Met	90%
	- African-born Men	90% (213/237)	91% (225/248)	92% (227/248)	93% (224/241)	93% (221/237)	93% (235/254)	Met	90%
	- African-born Women	88% (287/328)	90% (270/321)	93% (346/373)	95% (358/378)	92% (316/345)	95% (365/386)	Met	90%
	Hispanic (All Genders)	91% (345/380)	92% (369/400)	92% (402/436)	93% (424/457)	93% (420/452)	92% (472/512)	Met	90%
	-Hispanic MSM	92% (178/193)	92% (191/207)	92% (237/258)	95% (261/274)	93% (262/281)	93% (280/302)	Met	90%
	-Hispanic Women	77 PWH **	73 PWH **	67 PWH **	76 PWH**	78 PWH**	78 PWH**	*	90%
	Native Americans (All Genders)	92 PWH **	87 PWH **	76 PWH**	76 PWH**	59 PWH**	48 PWH**	*	90%
	Transgender (All Races/Ethnicities)	69 PWH **	75 PWH **	89 PWH**	79 PWH**	96 PWH**	87 PWH**	*	90%
For comparison: Viral suppression for other populations who have a viral load in CAREWare (Ryan White)[7]	White, Non-Hispanic			92% (1,352/1,465)	93% (1,418/1,530)	93% (1336/1434)	94% (1397/1484)		
	White MSM	92% (934/1,015)	92% (961/1,039)	93% (1,005/1,086)	93% (1,086/1,165)	94% (1026/1096)	95% (1038/1095)		
	White Men (Non-MSM)	89% (133/150)	91% (140/154)	90% (148/165)	92% (134/146)	95% (120/127)	93% (127/136)		
	White Women	91% (180/198)	88% (187/213)	93% (194/209)	90% (195/216)	90% (191/212)	92% (213/232)		
	Asian/Pacific Islander			87 PWH **	93% (100/108)	80 PWH**	89 PWH**		
	Multi-racial			92 PWH **	86% (133/155)	91% (211/233)	88% (216/246)		

Objective	Population	Baseline (2016)	2017	2018	2019	2020	2021	Status	2021 Goal

* Incidence is determined by a variety of factors that go beyond programmatic outcomes. Without at least 5 years of historical data, projections are not possible. Furthermore, incidence can fluctuate from year to year, particularly with small populations. Use caution when interpreting.

** These outcomes are calculated using lab values in CAREWare from the MDH surveillance system. In accordance with MDH's re-release policy, denominators less than 100 cannot be released publicly.

† Based on data received directly from outpatient/ambulatory healthcare providers.

[1] Funding for MDH funded PrEP programs declined in 2018

[2] Objective added in 2018

[3] Statewide linkage to care: Calculated as the percentage of people age 13 and older linked to care within 30 days after initial HIV diagnosis in Minnesota during the calendar year prior to follow-up for retention in care and viral suppression.

[4] Statewide retention in care: Calculated as the percentage of people age 13 and older who had ≥1 CD4 or viral load test results reported to MDH during the follow-up year among those alive and living in Minnesota during the entire calendar follow-up year.

[5] Ryan White clients retention in care: Numerator is consumers in the denominator who had at least one of the following: viral load, CD4 Count, completed Form 1, Outpatient Ambulatory Health Service Visit in 2019. Denominator is consumers who received a Ryan White service in 2019

[6] Statewide viral suppression: Calculated as the percentage of people age 13 and older who had a suppressed viral load (≤200 copies/mL) at most recent test during the follow-up year among those alive and living in Minnesota during the entire calendar follow-up year.

[7] Ryan White viral suppression: Numerator is consumers in denominator with a HIV viral load less than 200 copies/ml at their last HIV viral load test in 2019. Denominator is consumers with a HIV viral load test in 2019.

Exclusion: missing viral load tests are not included

[8] Possibly some duplicated clients from 2016-2019, but general percentage increases are likely reliable. 2021 numbers should not have duplication issue, but is missing 1 grantee.

Goal	Objective	Measure	Data Source	Responsible Party
Key: Council (MN Council for HIV AIDS Care & Prevention); **DEC** (Disparities Elimination Committee); **NA&E** (Needs Assessment & Evaluation); **PAC** (Planning & Allocations Committee); **M&T** (Membership and Training Committee); **DHS** (Department of Human Services); **HC** (Hennepin County); **MDH** (Minnesota Department of Health)				
Goal 1: Reduce New HIV Infections				
1	1.1 Increase from 86% (current CDC estimate) to 90% (NHAS) of individuals living with HIV in TGA & MN aware of HIV status	Estimate percent of PLWH in MN who are unaware of their HIV infection	eHARS[1]	MDH/Council/NA&E/PAC
1	1.2 Increase by 60% access and utilization of PrEP at MDH funded organizations	Percent of individuals utilizing PrEP as determined by MDH funded organizations that utilize PrEP using program database	MDH grantee reports[2]	MDH
1	1.3 Increase by 60% access and utilization of PrEP to African American communities at MDH funded organizations	Percent of African American individuals utilizing PrEP as determined by MDH funded organizations that utilize PrEP using program database	MDH grantee reports	MDH
1	1.4 Increase by 20% utilization of MDH funded harm reduction and syringe exchange activities	Number of individuals utilizing MDH funded harm reduction and syringe exchange services	MDH grantee reports	MDH
1	1.5 Decrease by 20% new infections within each of the following populations: African American, African-born, Latinos and their subpopulations (MSM, transgender, and women)	Number of new infections among African American, African-born, Latinos and their subpopulations (MSM, transgender, and women) in reporting data including eHARS	eHARS	MDH
1	1.6 Increase by 20% the number of African American, African-born, Latinos and their subpopulations (MSM, transgender, and women) getting tested through MDH and RW funded organizations	Number of African American, African-born, Latinos and their subpopulations (MSM, transgender, and women) tested	EvaluationWeb[3]	MDH/DHS/HC/Council/PAC

Goal	Objective	Measure	Data Source	Responsible Party
	Key: Council (MN Council for HIV AIDS Care & Prevention); **DEC** (Disparities Elimination Committee)**; NA&E** (Needs Assessment & Evaluation)**; PAC** (Planning & Allocations Committee)**; M&T** (Membership and Training Committee)**; DHS** (Department of Human Services)**; HC** (Hennepin County)**; MDH** (Minnesota Department of Health)			
Goal 2: Increase Access to Care & Improve Health Outcomes for People Living with HIV				
2	2.1 Increase to 85% the proportion of individuals who attend a HIV medical care visit within 30 days of HIV diagnosis	Number of newly diagnosed individuals linked to care in 30 days	eHARS/CAREWare[4]	MDH/DHS/HC/Council/PAC
2	2.2 Increase to 90% the proportion of individuals living with HIV and retained in care	Number of diagnosed people living with HIV retained in care	eHARS/CAREWare	MDH/DHS/HC/Council/PAC
2	2.3 Increase to 80% the proportion of individuals living with HIV w/viral load of <200 copies/mL at last test in 12-month measurement period	Number of diagnosed people living with HIV with suppressed virus	eHARS/CAREWare	MDH/DHS/HC/Council/PAC
2	2.4 Increase to 92% the proportion of Ryan White (RW) Outpatient Ambulatory Care (OAC) clients who are prescribed ART in the 12-month measurement period	Percent of Ryan White outpatient care clients prescribed ART	CAREWare	DHS/HC/Council/NA&E/PAC
Goal 3: Reduce HIV-Related Disparities & Health Inequities				
3	3.1 Increase to 90% the proportion of African Americans, African-born, and Hispanic clients retained in care statewide	Percent of diagnosed African Americans, African-born, and Hispanic clients retained in care statewide	eHARS/CAREWare	MDH/DHS/HC/Council/DEC/PAC
	3.1 a. Increase to 95% the proportion of African Americans, African-born, and Hispanic RW clients retained in care	Percent of diagnosed African Americans, African-born, and Hispanic RW clients retained in care	eHARS/CAREWare	DHS/HC/DEC/PAC
3	3.1 b Increase number of PLWH in MN accessing Ryan White services to 60%	Percent of PLWH in MN accessing Ryan White services	eHARS/CAREWare	DHS/HC/DEC/PAC
3	3.2 Increase to 92% the proportion of RW OAC African American, African-born, and Hispanic clients who are prescribed ART in the 12-month measurement period	Percent of African American, African-born, and Hispanic clients who receive RW funded OHCS who are prescribed ART	CAREWare	DHS/HC/DEC/PAC
3	3.3 Increase to 80% proportion of African American, African-born, and Hispanic clients who achieve viral suppression	Percent of clients who receive RW funded OHCS who have a viral load of <200	eHARS/CAREWare	DHS/HC/DEC/PAC

Goal	Objective	Measure	Data Source	Responsible Party
Key: Council (MN Council for HIV AIDS Care & Prevention); **DEC** (Disparities Elimination Committee)**; NA&E** (Needs Assessment & Evaluation); **PAC** (Planning & Allocations Committee); **M&T** (Membership and Training Committee); **DHS** (Department of Human Services)**; HC** (Hennepin County)**; MDH** (Minnesota Department of Health)				
3	3.4 Implement systems changes to improve engagement from African American, African-born, and Hispanic communities in community planning and program development	Percent of participants from African American, African-born, and Latino communities that rate their involvement in planning and development activities favorably and the Council membership will be reflective based on the HIV epidemic in MN	Council survey	MDH/DHS/HC/Council/DEC/M&T

Goal	Objective	Measure	Data Source	Responsible Party
Key: Council (MN Council for HIV AIDS Care & Prevention); **DEC** (Disparities Elimination Committee)**; NA&E** (Needs Assessment & Evaluation); **PAC** (Planning & Allocations Committee); **M&T** (Membership and Training Committee); **DHS** (Department of Human Services)**; HC** (Hennepin County)**; MDH** (Minnesota Department of Health)				
Goal 4: Achieve a More Coordinated State & Local Response to the HIV Epidemic to reduce the number of Minnesotan's at risk of or living with HIV				
4	4.1 Increase coordination of HIV programs across state, local, and tribal government agencies, and the Council so that planning for funded services is completed in a timely manner	a) Percent of Council members who report receiving timely epi, service utilization, and other needed available data to make evidence based decisions. b) Percent of Council members who report being satisfied with their involvement in the development of the statewide strategy as defined by MDH	Council survey	NA&E/MDH/Council
4	4.2 Develop and improve mechanisms to monitor and report on progress towards achieving goals so that all goals can be measured	Percent of Council members who report being satisfied with mechanisms to monitor and report on progress towards achieving goals	Council survey	NA&E/MDH/DHS/HC/Council

[1]eHARS is the MDH HIV/AIDS Surveillance Data System; MDH receives data from the facility that diagnosis HIV/AIDS cases and from medical care providers that provide care for PLWA/A

[2]MDH Grantee Report; providers funded to provide HIV testing and prevention services funded by MDH

[3]EvaluationWeb is the HIV testing database that all MDH funded providers use to enter testing data

[4]CAREWare is the Ryan White services client level data reporting system; Ryan White funded providers enter data.