### NEW YORK

#### Achieving a More Coordinated National Response to the HIV Epidemic

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do both the state HIV planning group and the state jurisdictional plans integrate prevention and care?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

#### Reducing New HIV Infections

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Require ALL tests be reported to state health authority?</td>
<td>CD4 Yes</td>
</tr>
<tr>
<td>Require ALL tests be reported to state health authority?</td>
<td>Viral Load Yes</td>
</tr>
<tr>
<td>Is routine HIV screening for adults covered under state Medicaid program?</td>
<td>Yes</td>
</tr>
<tr>
<td>State HIV testing laws in alignment with CDC’s 2006 HIV testing recommendations</td>
<td>No</td>
</tr>
<tr>
<td>Percentage of newly diagnosed HIV-positive individuals actively linked to care, 2011</td>
<td>84%</td>
</tr>
<tr>
<td>Percentage of diagnosed HIV-positive individuals retained in care, 2010</td>
<td>58%</td>
</tr>
<tr>
<td>Percentage of HIV diagnoses among MSM (2008–2012)*</td>
<td>58%</td>
</tr>
<tr>
<td>Percentage of HIV deaths among MSM (2008–2011)*</td>
<td>30%</td>
</tr>
<tr>
<td>Sex education mandated</td>
<td>Yes</td>
</tr>
<tr>
<td>HIV education mandated</td>
<td>Yes</td>
</tr>
<tr>
<td>Sex or HIV education must be medically accurate</td>
<td>Yes</td>
</tr>
<tr>
<td>Sex or HIV education must include sexual orientation</td>
<td>Yes</td>
</tr>
<tr>
<td>HIV education must include condoms</td>
<td>Yes</td>
</tr>
<tr>
<td>HIV education must include abstinence**</td>
<td>Stress</td>
</tr>
</tbody>
</table>

#### Increasing Access to Care and Improving Health Outcomes for People Living with HIV

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has state expanded Medicaid under the ACA (as of May 2015)?</td>
<td>Yes</td>
</tr>
<tr>
<td>ADAP covers medical co-pays/co-insurance</td>
<td>Yes</td>
</tr>
<tr>
<td>ADAP covers prescription deductibles</td>
<td>Yes</td>
</tr>
<tr>
<td>Percentage of ADAP budget contributed by the state</td>
<td>10%</td>
</tr>
</tbody>
</table>

#### Reducing HIV-Related Disparities and Health Inequities

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>State data reported to CDC mature for Continuum of Care Analysis as of December 2012</td>
<td>Yes</td>
</tr>
<tr>
<td>Percentage of diagnosed patients achieving viral suppression (VL &lt;200), 2010</td>
<td>47%</td>
</tr>
<tr>
<td>Percentage of patients in care achieving viral suppression (VL &lt;200), 2010</td>
<td>70%</td>
</tr>
<tr>
<td>Does state have specific laws criminalizing HIV transmission or exposure?</td>
<td>No</td>
</tr>
<tr>
<td>Does state use general criminal laws to prosecute HIV transmission or exposure?</td>
<td>Yes</td>
</tr>
<tr>
<td>Does state have scientifically inaccurate/implausible laws (spitting, biting, throwing)?</td>
<td>No</td>
</tr>
<tr>
<td>Number of state prosecutions relating to HIV transmission or exposure (2008–2014)</td>
<td>3</td>
</tr>
</tbody>
</table>

---

* MSM includes those reported as MSM/IDU.

** For abstinence education, “Stress” indicates that HIV education must emphasize the importance of abstinence until marriage, while “Cover” indicates that HIV education must cover abstinence as an option that must be discussed.

---

Full report may be accessed at [www.amfar.org/key-indicators](http://www.amfar.org/key-indicators).

For numbered references, please refer to full report.

Note: Blank spaces indicate there is no estimate available or no statewide policy.