# Detection and Linkage of People Living with HIV Who Are Out of Care in 94 Emergency Departments Across the US

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Disclaimer: Gilead Sciences' FOCUS funding supports HIV, HCV and HBV screening and linkage to a first appointment. FOCUS partners do not use FOCUS awards for activities beyond linkage to a first appointment.

# Conclusions

**Between 2021 and 2023, 39% of persons identified** with HIV infection were previously diagnosed and OOC. The proportion of persons previously diagnosed and OOC were similar among males and females, though females had a lower linkage to care rate. The proportion of persons previously diagnosed and OOC increased as age increased – 28% of persons aged 20 – 29; 36% among persons aged 30 – 39; and 41% among persons aged 40 – 49. Linkage to care was lowest among persons aged 30 – 39. Among Black/African American and White persons identified with HIV infection, 39% were previously diagnosed OOC. However, only 64% of Black/African American persons were linked to care, while 71% of White persons were linked.

These findings highlight the critical role of EDs in identifying persons newly and previously diagnosed with HIV infection through routine HIV screening. FOCUS ED partners have identified numerous best practices to facilitate effective screening and linkage to care, including:

- Leveraging existing clinical infrastructure and staff to integrate testing and linkage into normal clinic flow
- Modifying EMRs to identify, screen and link eligible patients
- Deploying navigation staff to provide education and address barriers to care
- Partnering with local and state public health agencies to facilitate effective identification, reporting and linkage of newly and previously diagnosed persons

Further research is needed on barriers to accessing care for persons previously diagnosed and OOC and effective strategies (e.g., navigation, wraparound support services) for improving linkage to care. Patient navigation, a key component of FOCUS' routine screening programs, is an evidence-based intervention to improve linkage to care but requires additional policy support for sustainable funding streams. Furthermore, these findings may have programmatic implications for health departments and other initiatives focused on ending the HIV epidemic.

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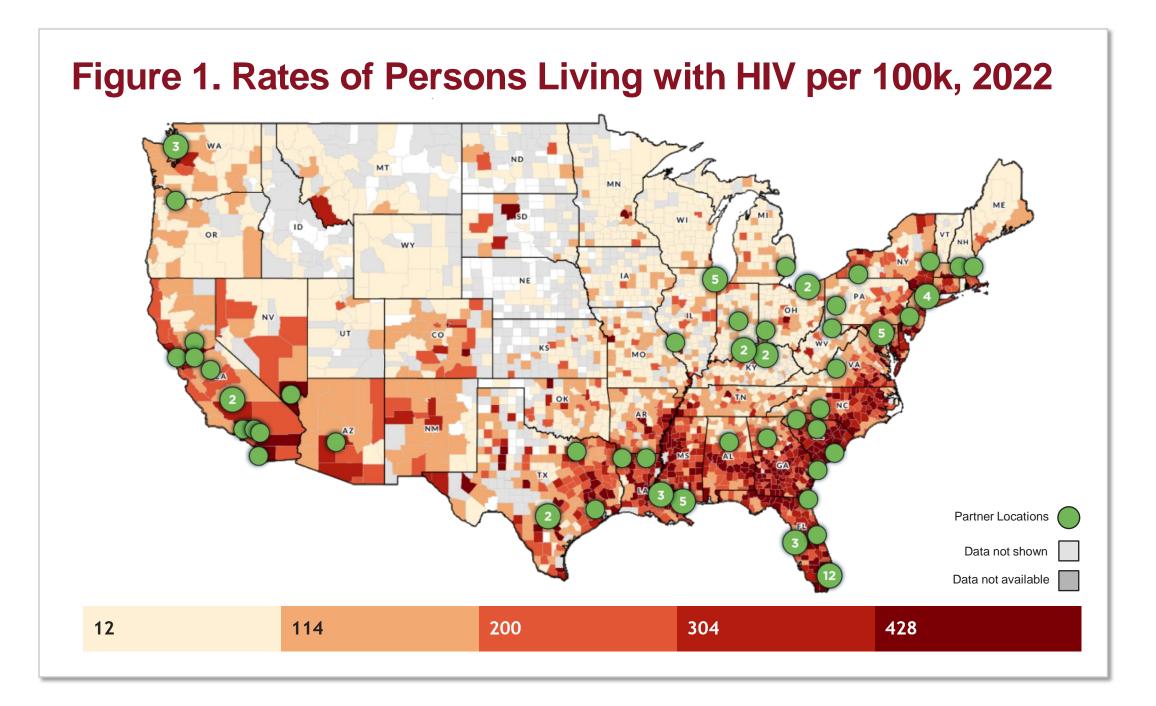
# Background

Emergency Departments (EDs) are a major source of medical care for persons living with HIV (PLWH) in the United States. Routine HIV screening can effectively diagnose new HIV infections as well as identify and link PLWH who are out of care (OOC). PLWH who are OOC experience poorer health outcomes and contribute to more than 40% of HIV transmissions.

#### THE FOCUS PROGRAM

Gilead Sciences' FOCUS program is a public health initiative that supports healthcare institutions to implement routine bloodborne virus (HIV, HCV, HBV) screening, diagnosis and linkage to a first appointment in accordance with CDC guidelines.

#### **FOCUS PARTNERSHIPS**



### **OBJECTIVE**

We examined data collected from 94 U.S. FOCUS ED-based HIV screening programs (*shown in Figure 1*) to determine the proportion of PLWH who were newly diagnosed, previously diagnosed in care, and previously diagnosed OOC; and to describe the demographic distribution of these patients.

## Methods

#### **DATA COLLECTION**

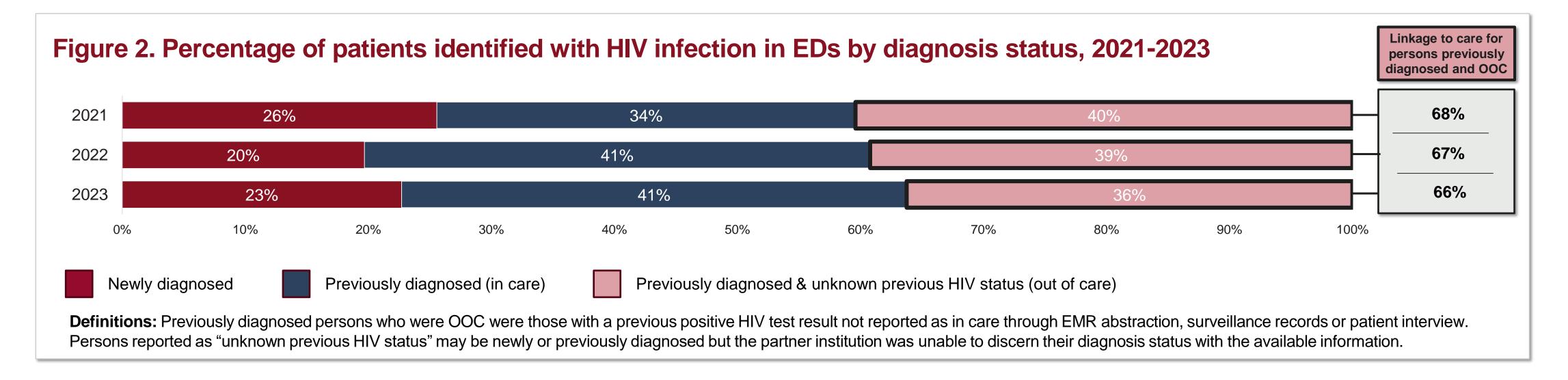
From 2021 – 2023, data from 94 ED-based HIV screening programs were reviewed for HIV testing volume, HIV test results, previous HIV test result and linkage status. Previously diagnosed persons were identified through routine screening or alternative mechanisms, including electronic medical record (EMR) flags.

#### **OUTCOMES**

Outcomes include the proportion of persons identified with HIV infection who were newly diagnosed, previously diagnosed in care, and previously diagnosed OOC and demographic characteristics of those identified and linked to care.

## Results

Between 2021 and 2023, 94 FOCUS ED partnerships conducted 1,561,517 HIV tests. These findings represent the proportion and demographic characteristics of PLWH who are OOC accessing EDs in our sample. Of persons identified with HIV infection:



#### **DEMOGRAPHICS**

