

MINNESOTA			
Achieving a More Coordinated National Response to the HIV Epidemic	Do both the state HIV planning group and the state jurisdictional plans integrate prevention and care?	No	
Reducing New HIV Infections	Require ALL tests be reported to state health authority?	CD4	Yes
		Viral Load	Yes
	Is routine HIV screening for adults covered under state Medicaid program?	Yes	
	State HIV testing laws in alignment with CDC's 2006 HIV testing recommendations	Yes	
	Percentage of newly diagnosed HIV-positive individuals actively linked to care, 2011 ²¹	80%	
	Percentage of diagnosed HIV-positive individuals retained in care, 2010 ²²	30%	
	Percentage of HIV diagnoses among MSM (2008–2012)*	69%	
	Percentage of HIV deaths among MSM (2008–2011)*	64%	
	Sex education mandated	Yes	
	HIV education mandated	Yes	
	Sex or HIV education must be medically accurate		
	Sex education must include sexual orientation		
	HIV education must include condoms		
	HIV education must include abstinence**	Cover	
Increasing Access to Care and Improving Health Outcomes for People Living with HIV	Has state expanded Medicaid under the ACA (as of May 2015)? ³¹	Yes	
	ADAP covers medical co-pays/co-insurance ³²	No Response	
	ADAP covers prescription deductibles ³³	No Response	
	Percentage of ADAP budget contributed by the state ³⁴	10%	
Reducing HIV-Related Disparities and Health Inequities	State data reported to CDC mature for Continuum of Care Analysis as of December 2012 ³⁵	Yes	
	Percentage of diagnosed patients achieving viral suppression (VL <200), 2010 ³⁶	36%	
	Percentage of patients in care achieving viral suppression (VL <200), 2010 ³⁷	75%	
	Does state have specific laws criminalizing HIV transmission or exposure? ⁴⁴	Yes	
	Does state use general criminal laws to prosecute HIV transmission or exposure? ⁴⁵	Yes	
	Does state have scientifically inaccurate/implausible laws (spitting, biting, throwing)? ⁴⁶	No	
	Number of state prosecutions relating to HIV transmission or exposure (2008–2014) ⁴⁷	2	

Full report may be accessed at 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.

* 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.