

NEW JERSEY			
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?	Yes	
Reducing New HIV Infections	Require ALL tests be reported to state health authority?	CD4	CD4<200 only
		Viral Load	Yes
	Is routine HIV screening for adults covered under state Medicaid program?	No Response	
	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		
	Percentage of diagnosed HIV-positive individuals retained in care, 2010 ²²		
	Percentage of HIV diagnoses among MSM (2008–2012)*	50%	
	Percentage of HIV deaths among MSM (2008–2011)*	25%	
	Sex education mandated	Yes	
	HIV education mandated	Yes	
	Sex or HIV education must be medically accurate	Yes	
	Sex education must include sexual orientation	Yes	
	HIV education must include condoms	Yes	
HIV education must include abstinence**	Stress		
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	
	ADAP covers prescription deductibles ³³	Yes	
	Percentage of ADAP budget contributed by the state ³⁴	0%	
Reducing HIV-Related Disparities and Health Inequities	State data reported to CDC mature for Continuum of Care Analysis as of December 2012 ³⁵	No	
	Percentage of diagnosed patients achieving viral suppression (VL <200), 2010 ³⁶		
	Percentage of patients in care achieving viral suppression (VL <200), 2010 ³⁷		
	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.