



Dear Reader:

The survival of persons with HIV disease and reduced transmission to others involves engagement in a continuum of care which includes: HIV testing, linkage to care, engagement in continuous care, receiving antiretroviral therapy (ART), and becoming virally suppressed. Without treatment, most people develop acquired immunodeficiency syndrome (AIDS) which compromises their immune system especially if they remain without treatment for extended periods of time. A consistently suppressed viral load is associated with reduced morbidity and mortality, and a lower probability of transmitting HIV to sexual partners¹.

Early initiation of HIV care helps to control levels of the virus during the acute stage when people are seroconverting and have a high viral burden. Following a person's diagnosis, they should be immediately linked into medical care. Kentucky's data shows that seventy-two percent (72%) of 391 adults/adolescents newly diagnosed in 2021 were successfully linked to medical care within one month of HIV diagnosis.

There were 8,615 adult/adolescents living in Kentucky and diagnosed with HIV disease from the start of the HIV epidemic in 1982 through 2020, and were living at the end of 2021. Of those in 2021, 71% received medical care, 47% were retained in continuous care, and 58% achieved viral suppression.

Of the 6,146 adult/adolescent diagnoses who received medical care in 2021, 66% were retained in continuous care and 81% achieved viral suppression. It is also noteworthy that of the 4,059 adult/adolescents who were retained in care, 87% achieved viral suppression.

Sincerely,

Manny Singh, MBBS, MPH Senior Epidemiologist HIV/AIDS Section

¹Cohen MS, Chen YQ, McCauley M, et al. Prevention of HIV-1 infection with early antiretroviral therapy. N Engl J Med 2011;365:493-505.

Kentucky HIV Continuum of Care Report, 2022

Data Sets:

Data used in this report were reported to the Kentucky Department for Public Health (KDPH) and recorded in the enhanced HIV/AIDS Reporting System (eHARS).

Data used for linkage to care was as of June 30, 2022.

Data used for all other markers on the continuum of care were as follows:

□ The denominator (overall population included in analysis) was obtained from data as of December 31, 2021. □ The numerators (persons engaged at each stage of care, out of the denominator) were calculated using laboratory data as of June 30, 2022 to account for reporting delays.

Since only cases which have been diagnosed with HIV and reported are included in this analysis, comparisons to other jurisdictional reports and to national data should be made with caution as different measures may be utilized.

Methodology and Definitions:

This is a diagnosis-based continuum of care. Persons who have not yet been diagnosed and reported to KDPH have not been included.

HIV Diagnosed (denominator) – This includes all persons who were diagnosed with HIV disease by December 31, 2020 and living through December 31, 2021 (persons with HIV [PWH]). Persons included were adult/adolescents (≥ 13 years old) at time of diagnosis and had their most recent known address in Kentucky. Data as of December 31, 2021 were used to calculate the denominator.

Linked to Care – Defined as Kentuckians newly diagnosed in 2021 and successfully linked to HIV-related medical care within one month of their initial HIV diagnosis. Linkage to care was calculated by the number of months between the HIV diagnosis date and initial medical care visit. Medical care visits were defined as having a CD4+ cell count or percent, a viral load test, or a nucleotide sequence test. (Note that this is a different denominator than the other indicators and data as of June 30, 2022 were used to account for reporting delays for those diagnosed later in 2021).

Receipt of Care – Also known as any evidence of HIV-related medical care. Defined as PWH who had at least one HIV-related medical care visit. Viral load, CD4+ cell count and percent, and nucleotide sequence tests collected in 2021 were used as measures for medical care visits.

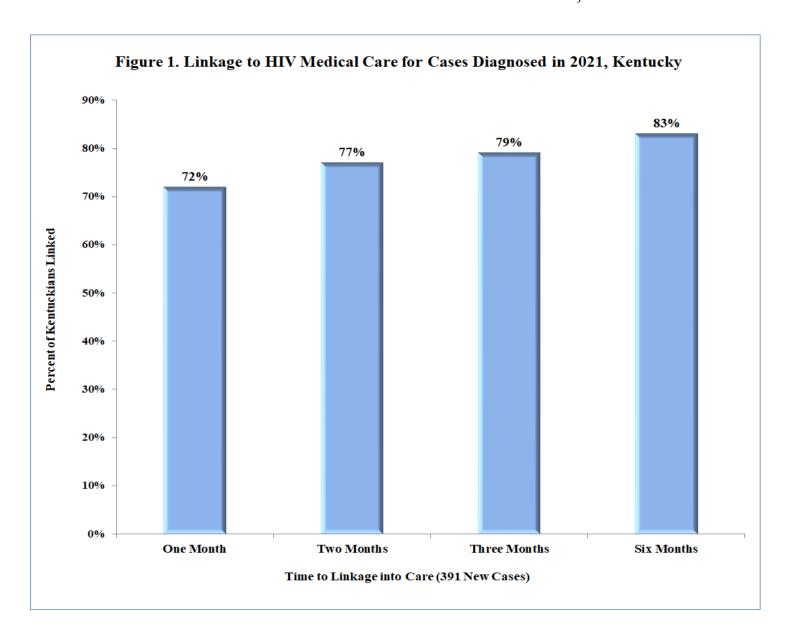
Retained in Care – Defined as PWH who had two or more HIV-related medical care visits performed at least three months apart during a 12-month period. Viral load, CD4+ cell count and percent, and nucleotide sequence tests collected in 2021 were used as measures for medical care visits.

Viral Suppression – Defined as the number of PWH whose most recent viral load test in 2021 was < 200 copies/ml. The most recent viral load result collected at any point in 2021 was considered.

Morbidity – Defined as the state of being symptomatic or unhealthy for a disease or condition.

Mortality Rate – Defined as the measure of the frequency of occurrence of death in a defined population during a specified interval.

LINKAGE TO CARE FOR CASES DIAGNOSED IN 2021, KENTUCKY



Entry into the HIV care continuum begins with diagnosis and linkage to care. Figure 1 shows linkage to HIV medical care for Kentuckians newly diagnosed with HIV in 2021 (391 cases) as of June 30, 2022.

The data shows that 72% of Kentuckians diagnosed with HIV during 2021 were linked to HIV related medical care within one month of diagnosis. Seventy-nine percent of newly diagnosed cases were linked to care within three months of HIV diagnosis. Eighty-three out of every 100 newly diagnosed cases were linked to care within six months of initial HIV diagnosis. Research has shown that viral suppression is achieved more quickly if treatment is started within three months of diagnosis¹.

¹Hall HI, Tang T, Westafall AO, Mugavero MJ. HIV care visits and time to suppression, 19 U.S. jurisdictions, and implications for treatment, prevention and the national HIV/AIDS strategy. Plos ONE. 2013;8(12):e84318. doi: 10.1371/journal.pone.0084318.

Linkage to Care by Selected Characteristics, 2021, Kentucky

Table 1. New HIV Diagnoses in 2021 Showing Linkage to Care Status within One Month of Diagnosis by Sex at Birth, Age at Diagnosis, Race/Ethnicity, and Transmission Category, Kentucky.

	Linked to Care*		Not Linked	l to Care**	Total New Diagnoses		
Characteristics	No.	% (1)	No.	% ⁽¹⁾	No.	% ⁽¹⁾	
SEX			3,00		2,00		
Male SEX	237	84	81	74	318	81	
Female	45	16	28	26	73	19	
AGE AT DIAGNOSIS		10			,,		
13-19	8	3	2	2	10	3	
20-29	91	32	35	32	126	32	
30-39	89	32	46	42	135	35	
40-49	51	18	14	13	65	17	
50+	43	15	12	11	55	14	
RACE/ETHNICITY							
White, Not Hispanic	163	59	60	55	223	57	
Black, Not Hispanic	82	29	34	31	116	30	
Hispanic	22	8	9	8	31	8	
Other/Unknown	15	5	6	6	21	5	
TRANSMISSION CATEGORY							
MMSC ⁽²⁾	136	48	33	30	169	43	
IDU ⁽³⁾	36	13	39	36	75	19	
MMSC/IDU	19	7	5	5	24	6	
Heterosexual ⁽⁴⁾	18	6	3	3	21	5	
Undetermined ⁽⁵⁾	73	26	29	27	102	26	
CARE COORDINATOR					102		
REGION ⁽⁶⁾							
Purchase	16	6	7	6	24	6	
Barren	27	10	8	7	35	9	
Lake Cumberland	12	4	7	6	19	5	
Lexington	61	22	22	20	83	21	
Louisville	143	51	57	52	200	51	
Northern Kentucky	20	7	7	6	27	7	
Kentucky River	3	1	1	1	4	1	
TOTAL	282	100	109	100	391	100	

^{*}Linked to HIV Care within one month of diagnosis.

^{**}Not linked to HIV Care within one month of diagnosis.

⁽¹⁾ Percentages may not total to 100% due to rounding. Percentages for each characteristic add up to 100% by column.

⁽²⁾ MMSC = Male-to-male sexual contact.

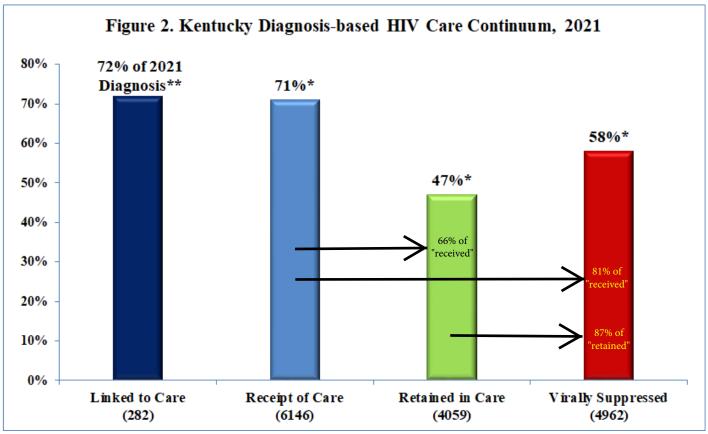
⁽³⁾ IDU = Injection drug use.

⁽⁴⁾ Heterosexual includes persons who have had heterosexual contact with a PWH or at risk for HIV.

⁽⁵⁾ Undetermined refers to persons whose mode of exposure to HIV is unknown. This includes persons who are under investigation, dead, lost to investigation or refused interview, and persons whose mode of exposure remains undetermined after investigation.

⁽⁶⁾ Care coordinator region reflects county of residence at time of initial diagnosis.

Spectrum of Engagement in HIV Care among Adults/Adolescents in 2021, Kentucky



^{*} Of persons living with diagnosed HIV disease (Denominator) = 8615

Figure 2 represents the percentage of Kentuckians engaged in selected stages of HIV continuum of care during 2021. The HIV continuum presented only reflects adult/adolescents diagnosed and reported to the HIV Surveillance Program, thereby also referred to as a "Diagnosis-based Continuum". Of the 391 new HIV cases diagnosed in Kentucky during 2021, 282 (72%) were linked to HIV medical care within one month of the HIV diagnosis. There were 8,615 adult/adolescents with their most recent address in Kentucky diagnosed with HIV disease (regardless of progresion to AIDS) at the end of 2020 and living at the end of 2021. Of those: 71% had a care marker in 2021 and were considered to be in care. Forty-seven percent were retained in continous care in 2021, and 58% achieved viral suppression.

Of the 6,146 adult/adolescent PWH, who received care in 2021, 66% were retained in continuous care and 81% achieved viral suppression. It is also noteworthy that of the 4,059 adult/adolescents who were retained in continuous care, 87% achieved viral suppression. These data highlight the need to get people linked and engaged in care, as this greatly improves their retention and viral load suppression rates (with adherence to ART). Sustained viral suppression is the key to optimal health outcomes at both the individual and population levels as treatment helps prevent forward transmission¹.

^{**} Linkage to care among newly diagnosed 391 adult/adolescents in 2021 only, therefore the total of new cases for linkage to care is different than all the other measures presented, and should not be directly compared.

¹ Hall HI, Tang T, Westafall AO, Mugavero MJ. HIV care visits and time to suppression, 19 U.S. jurisdictions, and implications for treatment, prevention and the national HIV/AIDS strategy. Plos ONE. 2013;8(12):e84318. doi: 10.1371/journal.pone.0084318.

Engagement in Selected Stages of Care by Demographics, 2021, Kentucky

Table 2. Kentuckians Aged⁽¹⁾ 13+ Years Living with Diagnosed HIV Engaged in Selected Stages of HIV Care in 2021 by Sex, Current Age, Race/Ethnicity, and Transmission Route, Kentucky

Care III 2021 D	y sex, Cui	Tent Age,	Race/ Lum	ncity, and	1 i ansiniss	ion Koute,	Kentucky	
	HIN/ D.		D : 14	HIN C	Retained in HIV Care Virally Suppressed			,
Characteristics		agnosed %		ny HIV Care				
<u>SEX</u>	No.		No.	%	No.	%	No.	%
Male	6,972 1,643	81	5,004 1,142	81	3,308 751	81 19	4,034 928	81
Female	-	19		19				19
TOTAL	8,615	100	6,146	100	4,059	100	4,962	100
AGE in 2021								
13-19	12	<1	9	<1	5	<1	6	<1
20-29	635	7	495	8	281	7	379	8
30-39	1,802	21	1,312	21	826	20	1,026	21
40-49	1,924	22	1,342	22	854	21	1,080	22
50+	4,242	49	2,988	49	2,093	52	2,471	50
TOTAL	8,615	100	6,146	100	4,059	100	4,962	100
RACE/ETHNICITY								
White, Not Hispanic	4,705	55	3,496	57	2,356	58	2,888	58
Black, Not Hispanic	2,731	32	1,819	30	1,109	27	1,353	27
Hispanic	696	8	451	7	340	8	400	8
Other/Unknown	483	6	380	6	254	6	321	6
TOTAL	8,615	100	6,146	100	4,059	100	4,962	100
TRANSMISSION ROUTE								
MMSC ⁽³⁾	4,770	55	3,590	58	2,383	59	2,928	59
IDU ⁽⁴⁾	807	9	515	8	326	8	412	8
MMSC/IDU	601	7	434	7	273	7	342	7
Heterosexual ⁽⁵⁾	1,211	14	893	15	611	15	726	15
Other ⁽⁶⁾	14	<1	9	<1	4	<1	8	<1
Undetermined ⁽⁷⁾	1,212	14	705	11	462	11	546	11
TOTAL	8,615	100	6,146	100	4,059	100	4,962	100
CARE COORDINATOR								
REGION ⁽⁸⁾								
Barren	919	11	676	11	471	12	577	12
Kentucky River	62	1	47	1	32	1	44	1
Lake Cumberland	458	5	313	5	198	5	274	6
Lexington	2,027	24	1,565	25	1,200	30	1,438	29
Louisville	3,777	44	2,673	44	1,588	39	1,839	37
Northern Kentucky	820	10	454	7	246	6	405	8
Purchase	549	6	417	7	323	8	384	8
TOTAL ⁽²⁾	8,612	100	6,145	100	4,059	100	4,961	100

⁽¹⁾ Current age in 2021.

⁽²⁾ Percentages may not total 100% due to rounding.

⁽³⁾ MMSC = Male-to-male sexual contact.

⁽⁴⁾ IDU = Injection drug use.

⁽⁵⁾ Heterosexual includes persons who have had heterosexual contact with a PWH or at risk for HIV.

⁽⁶⁾ Other includes persons who had exposure through hemophilia/coagulation disorder, transfusion/transplant, or perinatal, but diagnosed as an adult.

⁽⁷⁾ Undetermined refers to persons whose route of exposure to HIV is unknown. This includes persons who are under investigation, deceased, lost to investigation or refused interview, and persons whose route of exposure remains undetermined after investigation.

⁽⁸⁾ Care coordinator region reflects county of residence at time of initial diagnosis.

Engagement in Selected Stages of Care by Demographics, 2021, Kentucky

Table 3. Kentuckians Aged⁽¹⁾ 13+ Years Living with Diagnosed HIV Not Engaged in Selected Stages of HIV Care in 2021 by Sex, Current Age, Race/Ethnicity, and Transmission Route, Kentucky

or in the care in 202	I by sen,	e un reme na	No Receipt of Any HIV Not Retained in HIV			CILJ		
Characteristics	HIV Diagnosed Care		·	Care		Not Virally Suppressed		
SEX	No.	%	No.	%	No.	%	No.	%
Male	6,972	81	1,968	80	3,664	80	2,938	80
Female	1,643	19	501	20	892	20	715	20
TOTAL	8,615	100	2,469	100	4,556	100	3,653	100
AGE in 2021								
13-19	12	<1	3	<1	7	<1	6	<1
20-29	635	7	140	6	354	8	256	7
30-39	1,802	21	490	20	976	21	776	21
40-49	1,924	22	582	24	1,070	23	844	23
50+	4,242	49	1,254	51	2,149	47	1,771	48
TOTAL	8,615	100	2,469	100	4,556	100	3,653	100
RACE/ETHNICITY								
White, Not Hispanic	4,705	55	1,209	49	2,349	52	1,817	50
Black, Not Hispanic	2,731	32	912	37	1,622	36	1,378	38
Hispanic	696	8	245	10	356	8	296	8
Other/Unknown	483	6	103	4	229	5	162	4
TOTAL	8,615	100	2,469	100	4,556	100	3,653	100
TRANSMISSION ROUTE								
MMSC ³⁾	4,770	55	1,180	48	2,387	52	1,842	50
IDU ⁽⁴⁾	807	9	292	12	481	11	395	11
MMSC/IDU	601	7	167	7	328	7	259	7
Heterosexual ⁽⁵⁾	1,211	14	318	13	600	13	485	13
Other ⁽⁶⁾	14	<1	5	<1	10	<1	6	<1
Undetermined ⁽⁷⁾	1,212	14	507	21	750	16	666	18
TOTAL	8,615	100	2,469	100	4,556	100	3,653	100
CARE COORDINATOR								
REGION ⁽⁸⁾								
Barren	919	11	243	10	448	10	342	9
Kentucky River	62	1	15	1	30	1	18	<1
Lake Cumberland	458	5	145	6	260	6	184	5
Lexington	2,027	24	462	19	827	18	589	16
Louisville	3,777	44	1,104	45	2,189	48	1,938	53
Northern Kentucky	820	10	366	15	574	13	415	11
Purchase	549	7	132	5	226	5	165	5
TOTAL ⁽²⁾	8,612	100	2,467	100	4,554	100	3,651	100

⁽¹⁾ Current age in 2021.

⁽²⁾ Percentages may not total 100% due to rounding.

⁽³⁾ MMSC= Male-to-male sexual contact.

⁽⁴⁾ IDU= Injection drug use.

⁽⁵⁾ Heterosexual includes persons who have had heterosexual contact with a PWH or at risk for HIV.

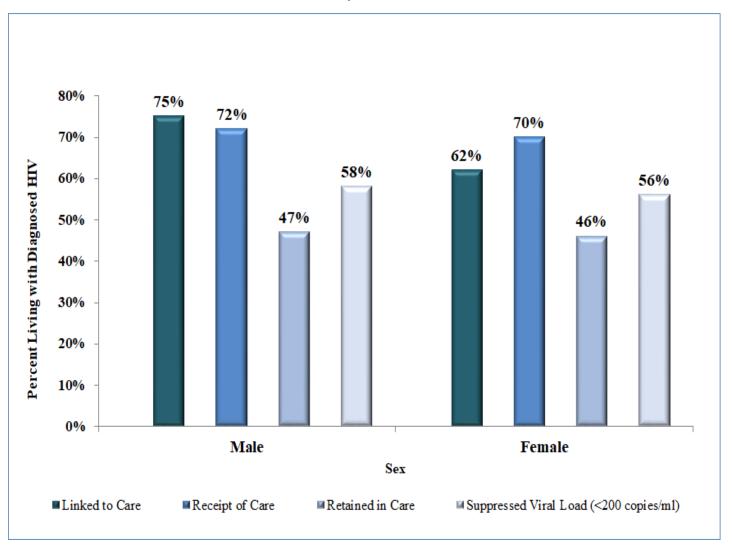
⁽⁶⁾ Other includes persons who had exposure through hemophilia/coagulation disorder, transfusion/transplant, or perinatal, but diagnosed as an adult.

⁽⁷⁾ Undetermined refers to persons those route of exposure to HIV is unknown. This includes persons who are under investigation, deceased, lost to investigation or refused interview, and persons whose route of exposure remains undetermined after investigation.

⁽⁸⁾ Care coordinator region reflects county of residence at time of initial diagnosis.

Engagement in Selected Stages of Care by Sex, 2021, Kentucky

Figure 3. Percentage of HIV-Diagnosed Adult/Adolescent Kentuckians Engaged in Selected Stages of HIV Care by Sex at Birth, 2021



Linkage to care among newly diagnosed adult/adolescents in 2021 only. Therefore the total of new cases for linkage to care is different than all the other measures presented, and should not be directly compared.

Figure 3 shows the percentages of adult/adolescent Kentuckians engaged in the care continuum by sex at birth. Adult/adolescent males in Kentucky performed better than females for linkage to care (75% for males vs 62% for females). Males attained higher level for receipt of care at 72%, compared to 70% for females. Males also achieved higher levels of retention in care at 47% versus 46% for females and viral suppression at 58% compared to females at 56%.

Engagement in Selected Stages of Care by Race/Ethnicity, 2021, Kentucky

80% Percent Living with Diagnosed HIV 74% 73% 71% 71% 67% 70% 65% 61% 57% 60% 50% 50% 49% 50% 40% 40% 30% 20% 10% 0% White Black Hispanic Race/Ethnicity ■ Linked to Care ■Receipt of Care ■ Retained in Care ■ Suppressed Viral Load (<200 copies/ml)

Figure 4. Percentage of HIV-Diagnosed Adult/Adolescent Kentuckians Engaged in Selected Stages of HIV Care by Race/Ethnicity, 2021

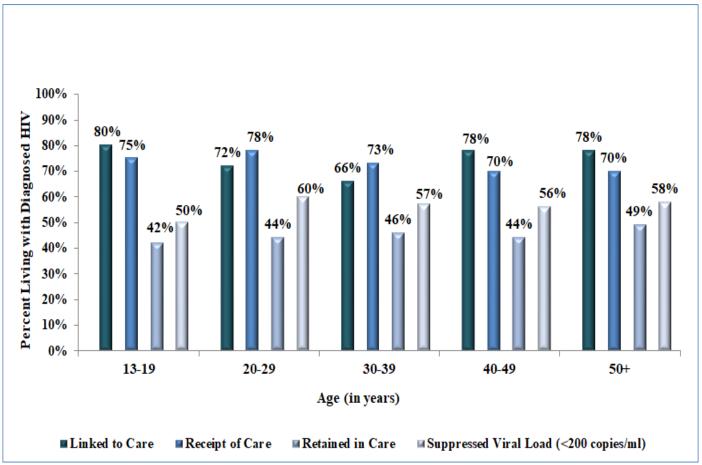
Linkage to care among newly diagnosed adult/adolescents in 2021 only. Therefore the total of new cases for linkage to care is different than all the other measures presented, and should not be directly compared.

Figure 4 shows the percentages of adult/adolescent Kentuckians engaged in the HIV care continuum by race/ethnicity. In 2021, White adult/adolescent Kentuckians newly diagnosed with HIV attained higher levels of linkage to HIV medical care (73%) compared to their Black and Hispanic counterparts at 71%. White adult/adolescents also attained higher rates compared to Black and Hispanic adult/adolescents for receipt of care, retention in care, and viral suppression. Sixty-one percent of White adult/adolescents were virally suppressed in 2021, compared to 50% of Black and 57% of Hispanic adult/adolescents.

In order for PWH to attain viral suppression, they need to be linked to care and remain engaged or re-engaged if they fall out of care. The figure highlights health disparities, whereby Black adult/adolescents diagnosed with HIV are less likely to be linked to medical care, retained in care and ultimately less likely to be virally suppressed compared to their White and Hispanic counterparts.

Engagement in Selected Stages of Care by Current Age, 2021, Kentucky

Figure 5. Percentage of HIV-Diagnosed Adult/Adolescent Kentuckians Engaged in Selected Stages of HIV Care by Current Age, 2021

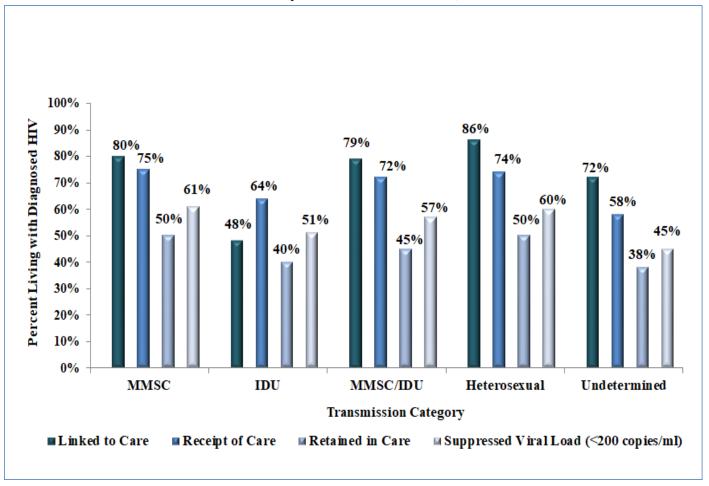


Linkage to care among newly diagnosed adult/adolescents in 2021 only. Therefore the total of new cases for linkage to care is different than all the other measures presented, and should not be directly compared.

Figure 5 shows the percentages of adult/adolescent Kentuckians engaged in the HIV care continuum by their current age in 2021 – the analysis year. The figure shows that 13-19 year olds were most likely (80%) to get linked to care, when compared to the other current age categories. Receipt of care was highest among 20-29 years old (78%), while both 40-49 and 50+ years old categories were least likely to receive care at 70% each. Retention in care was highest among 50+ year olds at 49%, and lowest among 13-19 year age category at 42%. Adults/adolescent Kentuckians aged 20-29 years were most likely to be virally suppressed at 60% when compared to other age categories, while the 13-19 years age category were least likely to be virally suppressed at 50%.

Engagement in Selected Stages of Care by Mode of Transmission, 2021, Kentucky

Figure 6. Percentage of HIV-Diagnosed Adult/Adolescent Kentuckians Engaged in Selected Stages of HIV Care by Mode of Transmission, 2021



Linkage to care among newly diagnosed adult/adolescents in 2021 only. Therefore the total of new cases for linkage to care is different than all the other measures presented, and should not be directly compared.

MMSC = Male-to-male sexual contact.

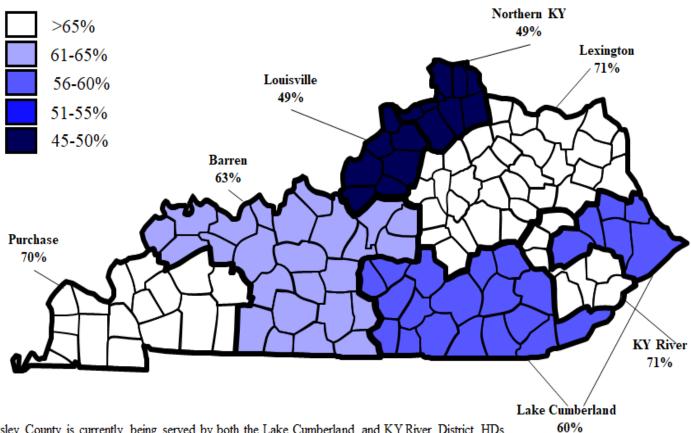
IDU = Injection drug use.

Figure 6 shows the percentages of adult/adolescent Kentuckians engaged in the care continuum by mode of transmission. Persons with IDU as a risk factor identified had the lowest percentages of linkage to care, while Kentuckians with no identified risk factor had the lowest percentage for receipt of care, retention in care, and viral load suppression. Conversely, those who reported heterosexual as category of transmission had the highest rates of linkage to care, while MMSC category had the highest percentage of receipt of HIV care, retention in care and viral load suppression.

A comparison of adult/adolescents with either IDU or MMSC or a combination of both transmission categories shows that IDU had the lowest percentage of linkage to care at 48% in comparison to MMSC at 80%, and MMSC/IDU at 79%. Adult/adolescent MMSC also had higher rates of engagement and retention in care, and viral suppression in comparison to IDU and MMSC/IDU.

Viral Suppression Attainment by Care Coordinator Region, 2021, Kentucky

Figure 7. Percentage of Kentuckians Living with HIV as of December 31, 2021 Who were Virally Suppressed in 2021 in each Care Coordinator Region



Owsley County is currently being served by both the Lake Cumberland and KY River District HDs. Todd County is covered by both the Todd County Health Department and Purchase Region.

Graves County is covered by both Graves County Health Department and Purchase Region.

Note: The percentages presented in Figure 7 represent the proportion of persons achieving viral suppression out of the total for each individual region. Total numbers of persons diagnosed for each region are presented in Table 2. Care coordinator region reflects county of residence at time of initial diagnosis.

Figure 7 shows the percentage of adult/adolescent Kentuckians who achieved viral suppression within each individual care coordinator region. Lexington and Kentucky River Care Coordinator regions had the highest percentage of persons achieving viral suppression at 71%, followed by Purchase Care Coordinator region at 70%.

In Barren 63 out of every 100 PWH were virally suppressed during 2021. Sixty percent of the Kentuckians living with HIV in the Lake Cumberland region achieved viral suppression. Louisville and Northern Kentucky regions had the lowest percentage of viral suppression in the state at 49% each.

Kentucky HIV Continuum of Care Report, 2022

Limitations:

The analysis presented uses a diagnosis-based continuum, therefore it's noteworthy that Kentuckians living with HIV who have not been diagnosed and reported to the Kentucky Department for Public Health's HIV/AIDS Surveillance Program were not included.

Most recent known address was used to determine persons (Kentuckians) in the denominator. Only about two-third of PWH had a current address listed within the most recent two years. The other one-third had more dated addresses listed.

These estimates do not account for in-and-out migration to/from the jurisdiction. This means the estimate may exclude those who have moved into the area and may also include those who have moved out of the area if immediate notification is not received at KDPH. The Surveillance Program participates in the Routine Interstate Duplication Resolution (RIDR) which helps to account for some of the information on migration, but isn't always complete or timely.

The current continuum only used HIV surveillance data, therefore any laboratory reports that may not be reported therein but may be in other data sources such as the care coordinator and drug assistance programs have not been utilized.

HIV Care Coordinator Regions, Kentucky

Map for Counties Covered	Region Name and Address	Counties Covered:				
	Purchase Region: LivWell Community Health Sevices 1903 Broadway Street Paducah, KY 42001 (270) 444-8183 (877) 444-8183 Fax: (270) 444-8147	Ballard Caldwell Calloway Carlisle	Christian Crittenden Fulton Graves	Hickman Hopkins Livingston Lyon	McCracken Marshall Muhlenberg Todd Trigg	
	Barren Region: Matthew 25 452 Old Corydon Road Henderson, KY 42420 (270) 826-0200 (866) 607-6590 Fax: (270) 826-0212	Allen Barren Breckinridge Butler Daviess Edmonson	Grayson Hancock Hardin Hart Henderson Larue	Logan McLean Marion Meade Metcalfe Monroe	Nelson Ohio Simpson Union Warren Washington Webster	
	Louisville Region: U of L KCCP 1212 S. 4th Street, Suite 120 Louisville, KY 40203 (502) 852-2008 Fax: (502) 852-2510	Bullitt Henry Jefferson Oldham	Shelby Spencer Trimble			
	Northern Kentucky Region: Northern KY Dist HD 8001 Veterans Memorial Drive Florence, KY 41042 (859) 341-4264 Fax: (859) 578-3689	Boone Campbell Carroll Gallatin Grant	Kenton Owen Pendleton			
	Lexington Region: UK Bluegrass Care Clinic 3101 Beaumont Circle, Suite 300 Lexington, KY 40513 (859) 323-5544 (866) 761-0206 Fax: (859) 257-3477	Anderson Bath Bourbon Boyd Boyle Bracken Carter Clark	Elliott Estill Fayette Fleming Franklin Garrard Greenup Harrison	Jessamine Lawrence Lewis Lincoln Madison Mason Menifee Mercer	Montgomery Morgan Nicholas Powell Robertson Rowan Scott Woodford	
	Lake Cumberland Region: Lake Cumberland Dist HD 500 Bourne Avenue Somerset, KY 42501 (606) 678-4761 (800) 928-4416 Fax: (606) 678-2708	Adair Bell Breathitt Casey Clay Clinton Cumberland	Floyd Green Harlan Jackson Johnson Knox	Laurel Magoffin Martin McCreary Owsley Pike	Pulaski Rockcastle Russell Taylor Wayne Whitley	
	Kentucky River Region: Kentucky River Dist HD 441 Gorman Hollow Road Hazard, KY 41701 (606) 439-2361 Fax: (606) 439-0870	Knott Lee Leslie Letcher	Owsley Perry Wolfe			
	Graves County HD 416 Central Ave Mayfield, KY 42066 (270) 247-3553		ty is covered by 0 Purchase Region		ealth Department ,	
	Todd County HD 205 Public Square Elkton, KY 42220 (270) 265-2362	* Todd County well as the Pur		dd County Health	Department , as	