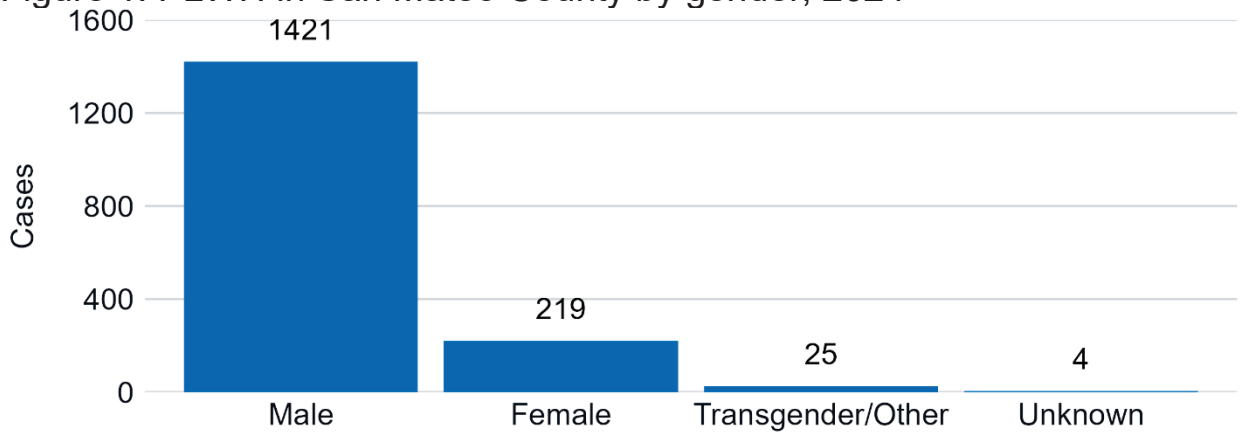
People Living with HIV

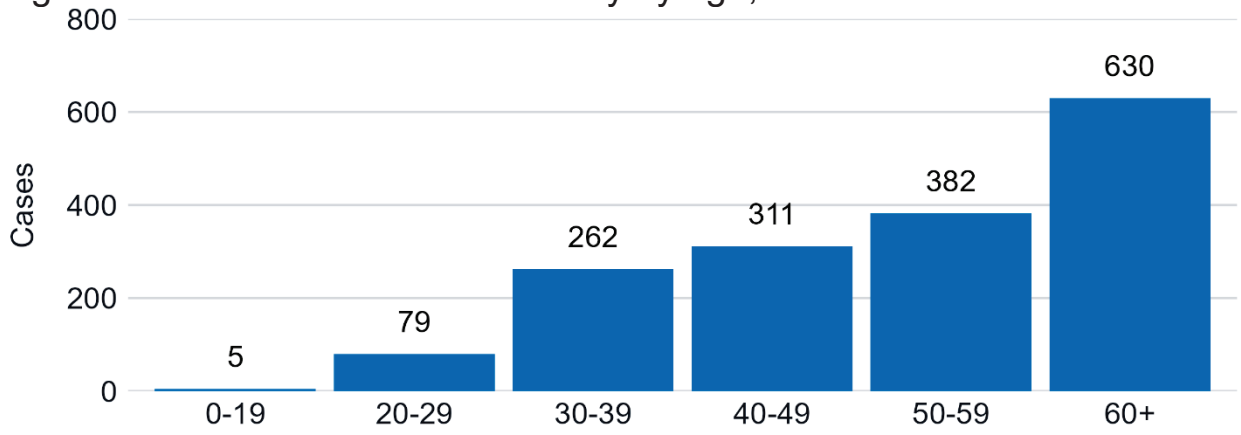
As of December 31, 2024, there were 1,669 people living with HIV (PLWH) in San Mateo County. 85.1% of PLWH are male.

Figure 1. PLWH in San Mateo County by gender, 2024



Over a third are above the age of 60, reflecting a growing population of aging PLWH.

Figure 2. PLWH in San Mateo County by age, 2024



By race/ethnicity, the highest proportions of PLWH are Hispanic or Latino and White.

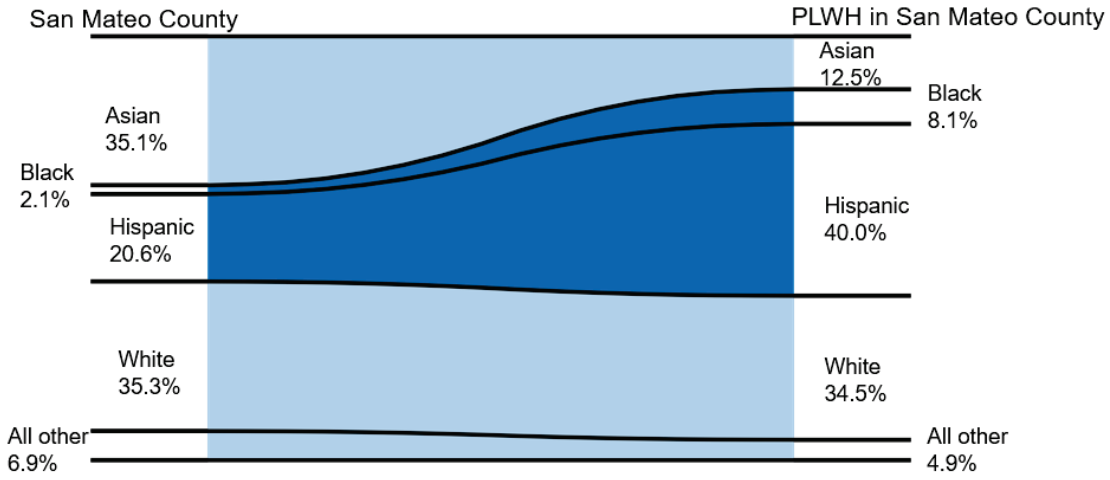
HIV/AIDS data is compiled from the September 30, 2025 data set from the electronic HIV/AIDS Reporting System of California (eHARS)

Table 1. PLWH in San Mateo County by race/ethnicity, 2024

Race/Ethnicity	n	Percent
American Indian or Alaska Native	4	0.2
Asian	209	12.5
Black or African American	136	8.1
Hispanic or Latino	667	40.0
Native Hawaiian or Pacific Islander	18	1.1
Multiracial	45	2.7
White	575	34.5
Other	15	0.9

Compared to the demographics of San Mateo County as a whole, Black or African American and Hispanic or Latino individuals are overrepresented among PLWH in San Mateo County.

Figure 3. Proportion of HIV among PLWH vs. the San Mateo County population, 2024



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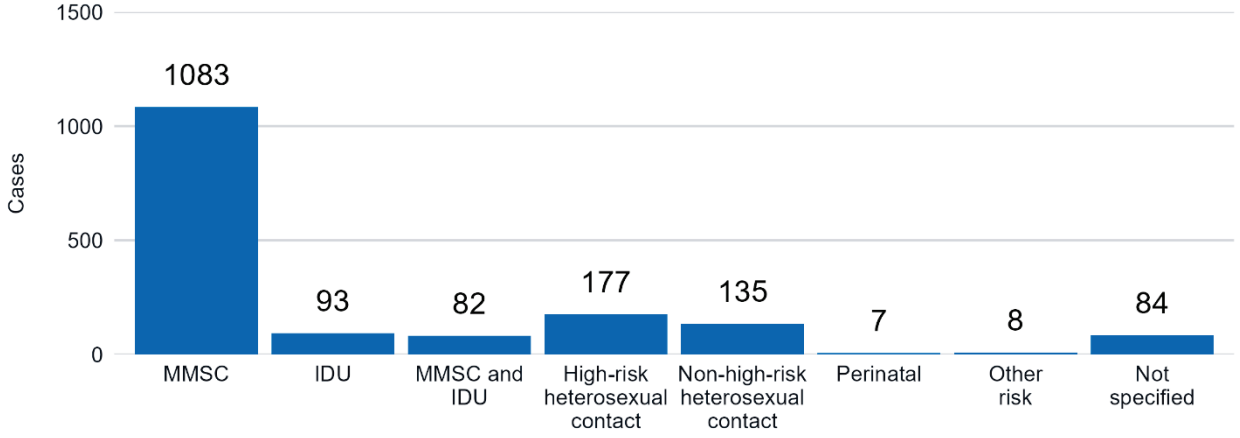
Majority of PLWH reported male-to-male sexual contact (MMSC).

Figure 4. Transmission Categories among PLWH in San Mateo County, 2024



MMSC: male-to-male sexual contact. IDU: injecting drug use. High-risk heterosexual contact: heterosexual contact with a person known to have HIV or engaged in an activity that put them at high risk for HIV (i.e. MMSC, IDU). Non-high-risk heterosexual contact: persons with no other identified risk who reported engaging in heterosexual intercourse.

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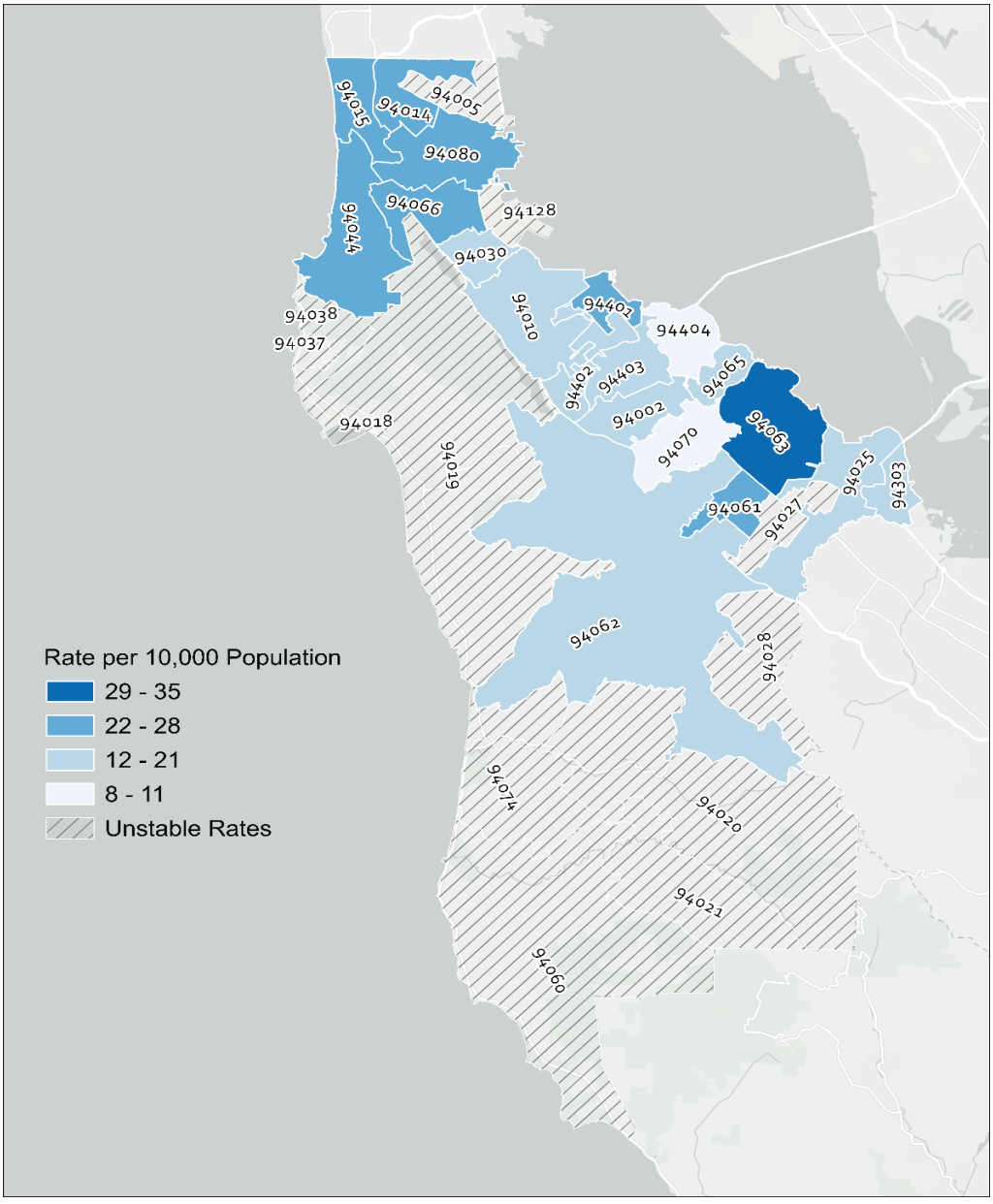
Geography of PLWH

The areas with the highest rates of PLWH are the zip codes of 94063 (Redwood City), 94401 (San Mateo), 94014 (Colma), 94080 (South San Francisco), and 94044 (Pacifica).

Figure 5. PLWH by residential zip code in San Mateo County, 2024

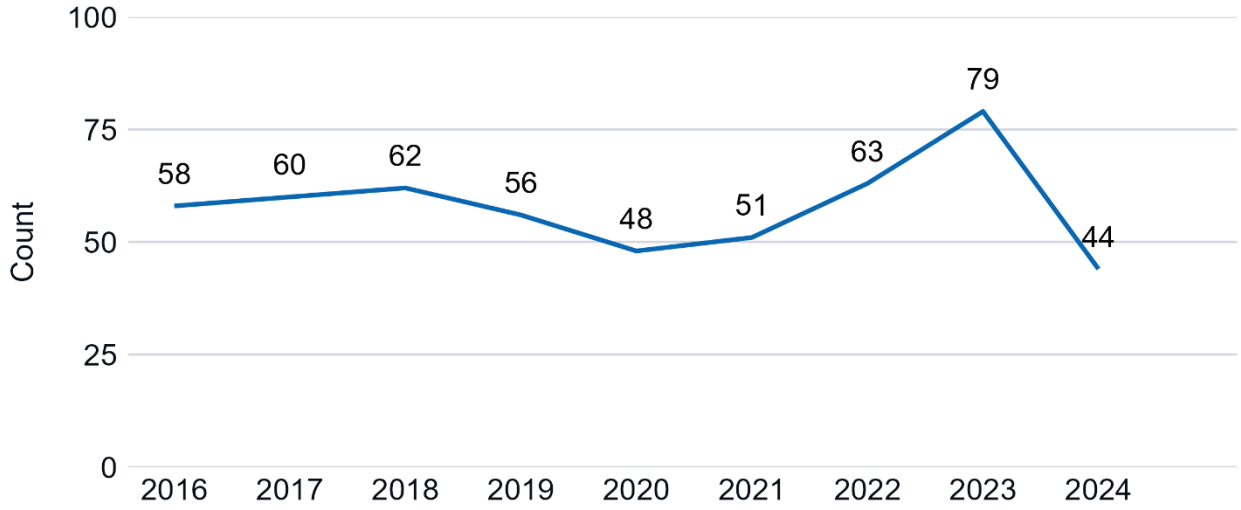


HIV/AIDS data is compiled from the September 30, 2025 data set from the electronic HIV/AIDS Reporting System of California (eHARS)

New Diagnoses of HIV

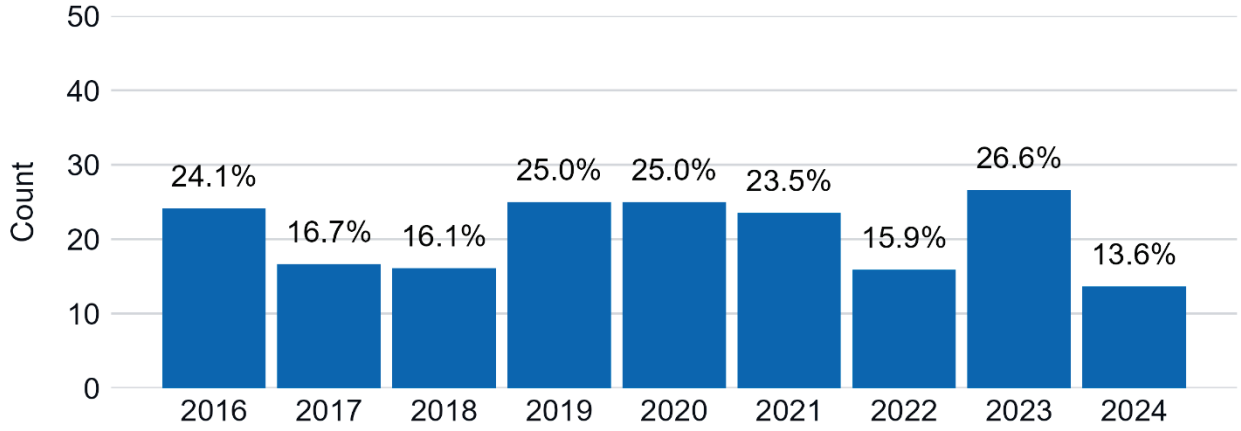
There were 44 new diagnoses of HIV in San Mateo County in 2024, a decrease compared to 79 new cases in 2023 (numbers subject to change).

Figure 6. New HIV diagnoses by year in San Mateo County, 2016-2024



Of new diagnoses, more than a tenth in 2024 were late testers, individuals who were diagnosed with AIDS within 12 months of their HIV diagnosis. Given that early diagnosis results in better outcomes and decreases the risk of transmission, decreasing late testing is an important programmatic goal.

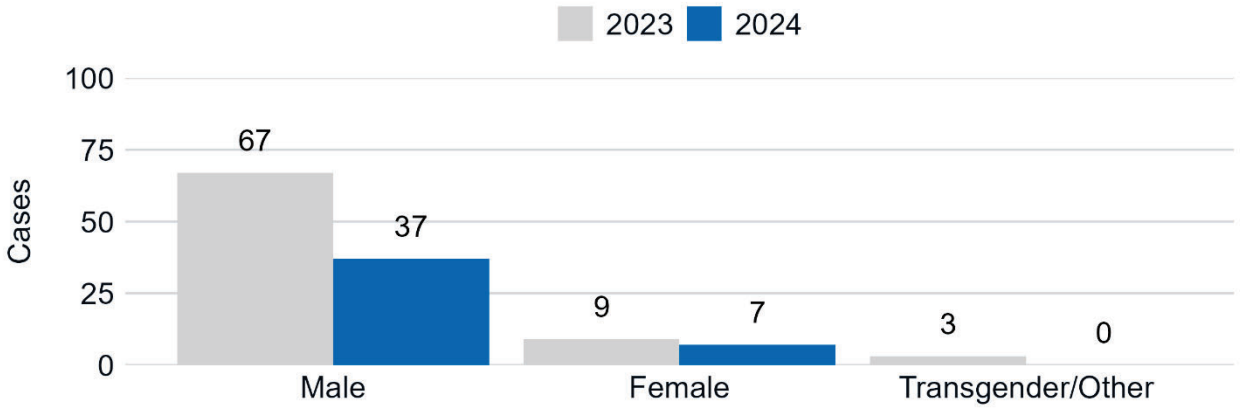
Figure 7. Late testers by year in San Mateo County, 2016-2024



HIV/AIDS data is compiled from the September 30, 2025 data set from the electronic HIV/AIDS Reporting System of California (eHARS)

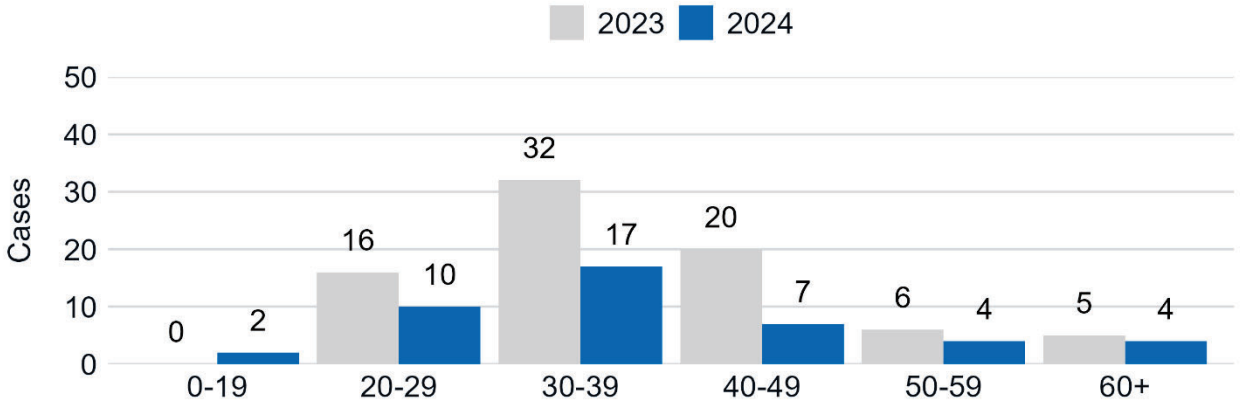
Most new diagnoses are among males.

Figure 8. New HIV diagnoses by gender in San Mateo County, 2023-2024



Almost 60% of new diagnoses in 2024 were among adults aged 20-39 years of age.

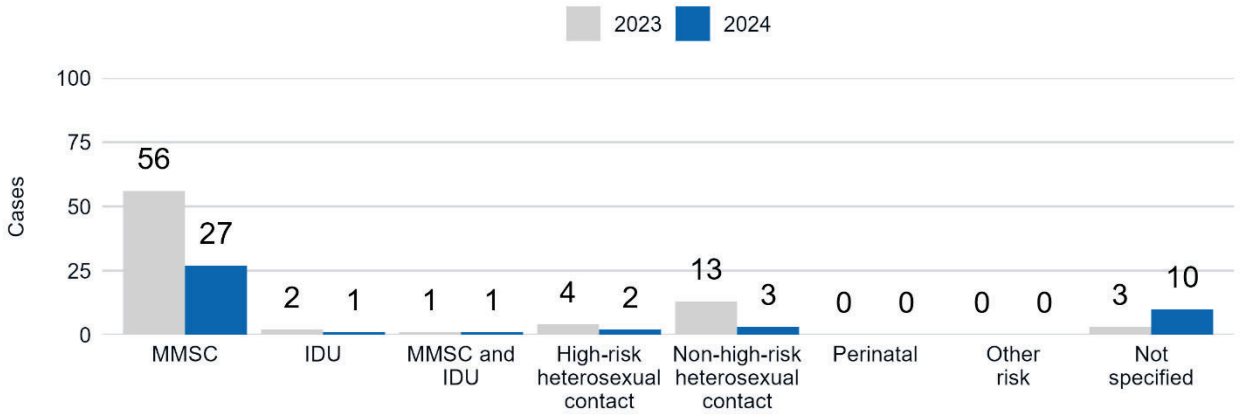
Figure 8. New HIV diagnoses by age in San Mateo County, 2023-2024



HIV/AIDS data is compiled from the September 30, 2025 data set from the electronic HIV/AIDS Reporting System of California (eHARS)

About 60% of new HIV diagnoses in 2024 reported MMSC, compared to about 70% in 2023.

Figure 9. Transmission Categories among new HIV diagnoses in San Mateo County, 2024



MMSC: male-to-male sexual contact. IDU: injecting drug use. High-risk heterosexual contact: heterosexual contact with a person known to have HIV or engaged in an activity that put them at high risk for HIV (i.e. MMSC, IDU). Non-high-risk heterosexual contact: persons with no other identified risk who reported engaging in heterosexual intercourse.

In 2024, the highest proportion of new diagnoses were Hispanic or Latino and White.

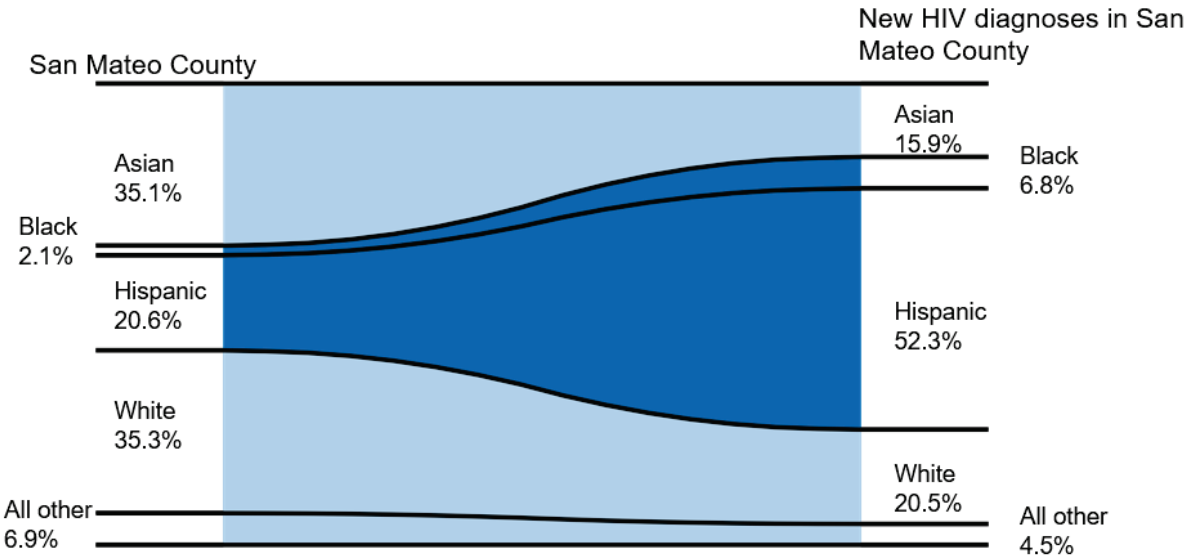
Table 2. New HIV diagnoses in San Mateo County by race/ethnicity, 2024

	2024		2023	
Race/Ethnicity	n	Percent	n	Percent
American Indian or Alaska Native	0	0.0	0	0.0
Asian	7	15.9	12	15.2
Black or African American	3	6.8	4	5.1
Hispanic or Latino	23	52.3	45	57.0
Native Hawaiian or Pacific Islander	0	0.0	0	0.0
Multiracial	2	4.5	4	5.1
White	9	20.5	14	17.7
Other	0	0.0	0	0.0

HIV/AIDS data is compiled from the September 30, 2025 data set from the electronic HIV/AIDS Reporting System of California (eHARS)

Compared to the demographics of San Mateo County as a whole, Black or African American and Hispanic or Latino individuals are overrepresented among new HIV diagnoses in San Mateo County.

Figure 10. Proportion of HIV among PLWH vs. the San Mateo County population, 2024



HIV/AIDS data is compiled from the September 30, 2025 data set from the electronic HIV/AIDS Reporting System of California (eHARS)

Funding Updates

The San Mateo County STD/HIV Program funding for fiscal year 2025-2026 remained the same as fiscal year 2024-2025 among all service categories for Ryan White Part A.

San Mateo County continues to see an increase of new clients seeking Ryan White and HOPWA funded services.

Number of clients who received a Ryan White and/or HOPWA funded service:

- 2022 - 2023 (612)
- 2023 - 2024 (657)
- 2024 - 2025 (664)

New Data Systems

California Department of Public Health (CDPH) Office of AIDS (OA) implemented a new data system, HIV Care Connect (HCC), as of April 2025. San Mateo County Edison and all county clinics implemented a new medical records system, EPIC, in November 2024.

The transition to these new systems has impacted clinic workflows and system level restructuring for data entry. The San Mateo Medical Center (SMCC), Health IT and STI/HIV Public Health Programs are currently collaborating to identify new data points to generate reports on services.

For 2024-2025 number of clients (664), we are unable to generate report at this time on how many clients were new to San Mateo HIV services due to HCC reporting limitations.

Prevention Funding

San Mateo continued to receive CDC HIV Prevention funding, PS24-0047, through the CDPH OA. We received $153,518 (Year 1). San Mateo uses county funds to cover the costs of most of our HIV prevention activities; targeted HIV testing, targeted outreach, PrEP linkage to and retention in care, syringe exchange services.

San Mateo County HIV Community Board

The San Mateo County HIV Program Community Board is made up of 6 full-time members. Members include HIV-positive consumers and HIV-negative community members. The Community Board generally meets (4) times a year. In 2025, we will be meeting (3) times due to the transition of the AIDS Director in March of 2025. All agendas, minutes and presentations can be found on our website.

Demographics of the San Mateo HIV Program Community Board

		n	Percent
Total	Total	6	100
Gender	Male	4	40
	Female	2	60
Race/Ethnicity	Asian	1	10
	Black or African American	1	10
	Hispanic or Latino	1	0
	White	3	60
Consumer status	Consumer of services	5	80
	Non-consumer of services	1	20

San Mateo County Prioritization Process

Our annual prioritization process usually takes place during our April meeting. However, this year we met in May 2025. The STI/HIV Program Director provided the board with information on service utilization as well as clarification of the service categories. The board voted to maintain the prioritization for both the Core Service categories and Support categories for last year and made no changes. In 2025, meeting was held May 20, 2025 and board voted to maintain the prioritization for the categories.

	Previous Priority (FY 24-25)	New Priority (FY 25-26)	% Part A Allocation	Amount
Core Services				
Outpatient/Ambulatory Health Services	1	1	2%	$23,794
Medical Case Management	2	2	39%	$575,631
Mental Health Services	3	3	8%	$125,792
Early Intervention Services	4	4	10%	$152,770
Oral Health Care	5	5	5%	$75,000
Subtotal			*64%*	*$952,987*
Support Services				
Emergency Financial Assistance	1	1	8%	$112,500
Housing Services	2	2	1%	$20,000
Food Bank/Home Delivered Meals	3	3	27%	$400,000
Medical Transportation	4	4	0%	$-
Subtotal			*36%*	*$532,500*
Grand Total			100%	$1,485,487

San Mateo County – Shifting of Resources

With the implementation of the Affordable Care Act, and the Adult Full-Scope Medi-Cal Expansion that began on January 1, 2024, many clients have been able to enroll in Medi-Cal or other payor sources. These other payor sources covered many of the services that were traditionally funded under Ryan White. Due to payor of last resort requirements, fewer clients needed Ryan White to cover these services so San Mateo was able to re-allocate funding to service categories that that were not part of the California Essential Health Benefits. This included the addition of the Early Intervention Services category, which allowed the expansion of linkage to care/retention in care services, as well as the increase in allocation to services provided by CBOs in the county.

Core Services	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025	2025-2026
Outpatient/Ambulatory Health Services	$203,104	$170,019	$102,764	$120,764	$120,636	$90,803	$24,132	$23,794	$23,794
Oral Health Care	$75,000	$75,000	$75,000	$75,000	$75,000	$75,000	$75,000	$75,000	$75,000
Medical Case Management	$532,486	$519,987	$634,876	$577,361	$500,257	$584,715	$575,631	$575,631	$575,631
Mental Health Services	$120,069	$127,568	$82,507	$120,739	$99,579	$125,708	$125,792	$125,792	$125,792
Early Intervention Services	$31,461	$31,461	$123,599	$128,099	$129,176	$152,770	$152,770	$152,770	$152,770

Core Services	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025	2025-2026
Housing Services	$16,688	$16,688	$16,688	$20,000	$20,000	$20,000	$20,000	$20,000	$20,000
Food Bank/Home Delivered Meals	$120,000	$125,000	$140,000	$233,477	$348,000	$355,000	$364,000	$400,000	$400,000
Food Bank/Home Delivered Meals (Part A CARES)	NA	NA	NA	$53,715	NA	NA	NA	NA	NA
Medical Transportation (Part B)	$25,947	$25,947	$25,947	$27,500	$27,500	$27,500	$27,500	$27,500	$27,500
Emergency Financial Assistance	$77,495	$77,495	$92,495	$100,000	$100,000	$105,000	$105,000	$112,500	$112,500

Edison Clinic Updates

In 2024, Edison Clinic hired a full-time pharmacist who facilitates access to injectable ARVs and PrEP services. Referrals for PrEP come from other providers, the STI/HIV Program staff, STI Clinic and patient self-referrals. Information and protocols for PrEP are also available on our website.

Edison's PrEP clinic is entirely pharmacist "driven by protocol" meaning they are authorized to perform specific patient care activities under a pre-approved, written plan. Pharmacist currently provides PrEP care via oral medications to HIV-negative Health Plan of San Mateo (HPSM) patients and may be expanding the program over the next year to include injectable medications which is currently not offered at Edison.

Edison has already been providing injectable ARVs and overseen by Edison pharmacist by written protocol. Edison has also initiated protocol-driven diabetes, hypertension and COPD management by pharmacist with great success in terms of improvements in measurable outcomes.

Correction Health and Street/Field Medicine Collaborations

San Mateo still receives extra funding for enhanced STI and HCV screening activities. We collaborate with our Correctional Health partners to provide routine testing for chlamydia, gonorrhea, syphilis, HCV and HIV within the two county jail facilities.

In Oct 2025, Correctional Medical Services will be conducting opt-out testing for HIV and HCV due to change to blood draws (IGRA test) from skin tests (TST) for mandatory TB testing.

Our program also partners with our Street/Field Medicine, whose target population is the unhoused, to increase testing for the same infections as in the jails. This collaboration also assists our program to seek assistance when trying to locate individuals who may have been lost-to-care and assist to re-link them to HIV care.

Community Outreach and Engagement

STI/HIV Program conducts outreach in areas and communities identified as having barriers to access to care and disproportionally impacted by STI/HIV/HCV.

In 2024, outreach activities including screening, presentations and tabling *(health education, harm reduction counseling and supplies offered)* was conducted at over 40 community events.

On a monthly basis, screening and health education/harm reduction counseling is conducted at (5) Alcohol and Other Drugs (AOD) sites, Puente Food Distribution (Pescadero), Navigation Center and P90, Women's Recovery Association (WRA) and Latino Commission.