**AETC PTP AGGREGATE DATA AND PERFORMANCE MEASURES**

**Unless otherwise stated, all aggregate data and performance measures should reflect your last fiscal year or the last calendar year.**

1. Clinic Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Define the dates of the measurement year reported on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
   Please note, all future data submissions should use the same date range as listed above (e.g., January 1 to December 31, etc.).

# Aggregate Clinic-Level Data to be Collected from all Participating PTP Sites

1. Number of unique (i.e., unduplicated) patients seen in clinic/unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Number of unique patients tested for HIV: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. What percentage of your active (i.e., at least one visit in measurement year) clinic/unit population has ever had an HIV test (i.e., documented HIV test result or HIV status in their EHR)?

% (\_\_\_\_\_numerator/ denominator)

1. Number of unique patients with HIV seen in clinic/unit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. What percentage of your unique clinic/unit population and unique HIV patient population[[1]](#footnote-1) (HIV patient population portion to be left blank by clinics that do not provide HIV care) fall into the categories listed below:

|  | **Clinic/Unit Population** | | | **Patient Population with HIV** | | |
| --- | --- | --- | --- | --- | --- | --- |
|  | **%** | **Numerator** | **Denominator [Q3]** | **%** | **Numerator** | **Denominator [Q6]** |
| Below 25 years of age |  |  |  |  |  |  |
| Hispanic/Latino/ or Spanish Origin |  |  |  |  |  |  |
| Black or African American |  |  |  |  |  |  |
| American Indian or Alaska Native |  |  |  |  |  |  |
| Men who have sex with men (MSM) |  |  |  |  |  |  |
| Women |  |  |  |  |  |  |
| Transwomen (MTF) |  |  |  |  |  |  |
| Men |  |  |  |  |  |  |
| Transmen (FTM) |  |  |  |  |  |  |
| Unstably housed[[2]](#footnote-2) |  |  |  |  |  |  |

1. Number of unique patients living with HIV (PLWH) who had at least one viral load test: \_\_\_\_\_\_\_\_\_\_\_
2. What percentage of PLWH at your clinic/unit fall into the following categories:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Patient Population with HIV** | | |
|  | **%** | **Numerator** | **Denominator [Q6]** |
| Newly diagnosed (i.e., diagnosed during measurement year) with HIV at clinic |  |  |  |
| Newly receiving HIV care at clinic (i.e., PLWH new to clinic) |  |  |  |
| Previously diagnosed with HIV who have never been in care |  |  |  |
| PLWH that have missed scheduled appointment for 6 or more months (any 6 month period within the year) |  |  |  |
| PLWH returning to care after more than a 12 month absence at the clinic |  |  |  |

# Performance Measures to be Collected from all Participating PTP Sites

1. **Percentage of tested patients with documentation that they received the results of HIV test:** Date of notification is needed in order to accurately calculate the percentage for those notified. Unique patients with a date of notification make up the numerator and unique patients tested are the denominator; if a patient had multiple tests during the measurement year, use the most recent test. (Source: [HRSA/HAB](http://hab.hrsa.gov/deliverhivaidscare/files/habpmssystems.pdf), see appendix B)
2. **HIV Positivity**: Percentage of HIV positive tests in the measurement year (Source: [HRSA/HAB](http://hab.hrsa.gov/deliverhivaidscare/systemlevelmeasures.pdf), see appendix B)
3. **Percentage of newly diagnosed HIV patients who were linked to HIV care within 30 days:** Percentage of patients who a documented test result for CD4 count or viral load within 30 days of HIV diagnosis (Source: [NHAS 2020 indicator](https://www.whitehouse.gov/sites/default/files/docs/nhas_2020_indicator_supplement_8-15.pdf), see appendix B)
4. **Percentage of newly diagnosed HIV patients who were linked to HIV care within 90 days:** Percentage of patients who attended a routine HIV medical care visit within 90 days of HIV diagnosis (Source: [HRSA/HAB](http://hab.hrsa.gov/deliverhivaidscare/systemlevelmeasures.pdf), see appendix A and B)
5. **HIV Medical Visit Frequency**: Percentage of patients, regardless of age, with a diagnosis of HIV who had at least one medical visit in each 6‐month period of the 24‐month measurement period with a minimum of 60 days between medical visits (Source: [HRSA/HAB (NQF 2079)](http://hab.hrsa.gov/deliverhivaidscare/coremeasures.pdf), see appendix B)
6. **Gap in HIV Medical Visits**: Percentage of patients, regardless of age, with a diagnosis of HIV who did not have a medical visit in the last 6 months of the measurement year (Source: [HRSA/HAB (NQF 2080)](http://hab.hrsa.gov/deliverhivaidscare/coremeasures.pdf), see appendix B)
7. **Substance Abuse Screening**: Percentage of new patients with a diagnosis of HIV who have been screened for substance use (alcohol & drugs) in the measurement year (Source: [HRSA/HAB](http://hab.hrsa.gov/deliverhivaidscare/adolescentadultmeasures.pdf), see appendix A and B)
8. **Prescription of HIV Antiretroviral Therapy**: Percentage of patients, regardless of age, with a diagnosis of HIV prescribed antiretroviral therapy for the treatment of HIV infection during the measurement year (Source: [HRSA/HAB (NQF 2083)](http://hab.hrsa.gov/deliverhivaidscare/coremeasures.pdf), see appendix A and B)
9. **Viral load suppression**: Percentage of patients, regardless of age, with a diagnosis of HIV with a HIV viral load less than 200 copies /mL at last HIV viral load test during the measurement year (Source: [HRSA/HAB (NQF 2082)](http://hab.hrsa.gov/deliverhivaidscare/coremeasures.pdf), see appendix B)

# APPENDIX A

**UDS[[3]](#footnote-3) Data elements:**

**Percentage of newly diagnosed HIV patients who were linked to HIV care within 90 days**

HIV LINKAGE TO CARE (LINE 20) – Section L

PERFORMANCE MEASURE: The performance measure is “Percentage of newly diagnosed HIV patients who had a medical visit for HIV care within 90 days of first-ever HIV diagnosis. 14 This is calculated as follows:

* Numerator: Number of patients in the denominator who had a medical visit for HIV care within 90 days of first-ever HIV diagnosis
* Denominator: Number of patients first diagnosed with HIV between October 1, of the prior year through September 30, of the current measurement year.

**RSR[[4]](#footnote-4) Data Elements:**

**Substance Abuse Screening**

|  |  |
| --- | --- |
| **Field** | **Description** |
| **Reference ID** | 61 |
| **Element Name** | ScreenedSubstanceAbuseID |
| **Parent Element** | ClientReport |
| **Definition** | Value indicating whether the client was screened for substance use (alcohol and drugs) during this reporting period. |
| **Required** | OA |
| **Occurrence** | 1 per required client |
| **Allowed Values** | 1 = No 2 = Yes 3 = Not medically indicated  The allowed values below have been removed:  4 = Unknown (Removed) |

**Prescription of HIV Antiretroviral Therapy**

3.7.7 PrescribedArtID (Revised)

|  |  |
| --- | --- |
| **Field** | **Description** |
| **Reference ID** | 52 |
| **Element Name** | PrescribedArtID  **NOTE**: “PrescribedHaartID” has been renamed “PrescribedArtID”. |
| **Parent Element** | ClientReport |
| **Definition** | Value indicating whether the client prescribed ART at any time during this reporting period. |
| **Required** | OA |
| **Occurrence** | 0-1 per required client |
| **Allowed Values** | 1 = Yes  3 = No, not ready (as determined by clinician)  4 = No, client refused  5 = No, intolerance, side-effect, toxicity  6 = No, ART payment assistance unavailable  7 = No, other reason  The allowed values below have been removed:  2 = No, not medically indicated (Removed)  8 = Unknown (Removed) |

# APPENDIX B

| **Measure** | **Source** | **Definition** | **Numerator** | **Denominator** | **Data Elements** |
| --- | --- | --- | --- | --- | --- |
| Percentage of tested patients who were notified of HIV test results  (Q.8) | HRSA/HAB  (<http://hab.hrsa.gov/deliverhivaidscare/files/habpmssystems.pdf>, p.5) | Percentage of individuals who test positive for HIV who are given their HIV-antibody test results in the measurement year. | Number of individuals who are tested in the system/network who test positive for HIV and who are given their HIV antibody test results in the measurement year. | Number of individuals who are tested in the system/ network and who test positive for HIV in the measurement year. | For each agency:  1. Was the patient tested for HIV infection during the measurement year? (Y/N)  a. If yes, did the patient have a positive confirmatory test? (Y/N)  i. If yes, was the patient given his/her confirmatory test result in the measurement year? (Y/N)  For the system:  1. How many patients were tested for HIV infection within the system/network in the measurement year?  a. How many patients had positive confirmatory tests?  i. Of those patients, how many received the confirmatory test results? |
| HIV Positivity  (Q. 9) | HRSA  (<http://hab.hrsa.gov/deliverhivaidscare/systemlevelmeasures.pdf>, p. 1) | Percentage of HIV positive tests in the measurement year | Number of HIV positive tests in the 12-month measurement period | Number of HIV tests conducted in the 12-month measurement period | 1. Number of HIV tests conducted in the measurement year  a. Of the number of HIV tests conducted, number that were HIV positive |
| Percentage of newly diagnosed HIV patients who were linked to HIV care within 30 days  (Q.10) | NHAS 2020 indicator #4  (<https://www.whitehouse.gov/sites/default/files/docs/nhas_2020_indicator_supplement_8-15.pdf> p. 10) | Percentage of patients who attended a routine HIV medical care visit within 30 days of HIV diagnosis | Number of persons newly diagnosed with HIV infection during the 12-month measurement period who were linked to care within 30 days of their diagnosis date as measured by a documented test results for a CD4 count or viral load. | Number of persons with an HIV diagnosis in 12-month measurement period | 1. Did the patient receive a diagnosis of HIV in the measurement year? (Y/N)  a. If yes, did the patient have at least one documented test result for a CD4 count or viral load within 30 days of diagnosis of HIV? (Y/N) |
| Linkage to HIV Medical Care  (Q.11) | HRSA  (<http://hab.hrsa.gov/deliverhivaidscare/systemlevelmeasures.pdf>, p.4) | Percentage of patients who attended a routine HIV medical care visit within 3 months of HIV diagnosis | Number of persons who attended a routine HIV medical care visit within 3 months of HIV  diagnosis | Number of persons with an HIV diagnosis in 12-month measurement period | 1. Did the patient receive a diagnosis of HIV in the measurement year? (Y/N)  a. If yes, did the patient have at least one routine HIV medical care visit within 3 months of a diagnosis of HIV? (Y/N) |
| HIV Medical Visit Frequency (Q.12) | HRSA/HAB (NQF 2079)  (<http://hab.hrsa.gov/deliverhivaidscare/coremeasures.pdf>,  p. 6) | Percentage of patients, regardless of age, with a diagnosis of HIV who had at least one medical visit in each 6‐month period of the 24‐month measurement period with a minimum of 60 days between medical visits | Number of patients in the denominator who had at least one medical visit in each 6-month period of the 24-month measurement period with a minimum of 60 days between first medical visit in the prior 6-month period and the last medical visit in the subsequent 6-month period | Number of patients, regardless of age, with a diagnosis of HIV with at least one medical visit in the first 6 months of the 24-month measurement period. | 1. Does the patient, regardless of age, have a diagnosis of HIV? (Y/N)  a. If yes, did the patient have at least one medical case management visit in the first 6 months of the 24‐month measurement period? (Y/N)  i. If yes, did the patient have at least one medical visit in the first 6 months of the 24‐month measurement period? (Y/N)  1) If yes, did the patient have at least one medical visit in the second 6‐month period of the 24‐month measurement period?  AND  Was the patient's last visit in the second 6‐month period 60 days or more from the 1st visit in the first 6‐month period? (Y/N)  a) Did the patient have at least one medical visit in the third 6‐month period of the 24‐month measurement period?  AND  Was the patient's last visit in the third 6‐month period 60 days or more from the 1st visit in the second 6‐month period? (Y/N)  i) If yes, Did the patient have at least one medical visit in the fourth 6‐month period of the 24‐month measurement period? AND  Was the patient's last visit in the fourth 6‐month period 60 days or more from the 1st visit in the third 6‐month period? (Y/N) |
| Gap in HIV Medical Visits  (Q. 13) | HRSA/HAB (NQF 2080)  (<http://hab.hrsa.gov/deliverhivaidscare/coremeasures.pdf>, p.8) | Percentage of patients, regardless of age, with a diagnosis of HIV who did not have a medical visit in the last 6 months of the measurement year | Number of patients in the denominator who did not have a medical visit in the last 6 months of the measurement year | Number of patients, regardless of age, with a diagnosis of HIV who had at least one medical visit in the first 6 months of the measurement year | 1. Does the patient, regardless of age, have a diagnosis of HIV? (Y/N)  a. If yes, did the patient have at least one medical visit in the first 6 months of the measurement year? (Y/N)  i. If yes, did the patient have one or more medical visits in the last 6 months of the measurement year? (Y/N) |
| Substance Abuse Screening (Q.14) | HRSA  (<http://hab.hrsa.gov/deliverhivaidscare/adolescentadultmeasures.pdf>, p.22) | Percentage of new patients with a diagnosis of HIV who have been screened for substance use (alcohol & drugs) in the measurement year | Number of new patients with a diagnosis of HIV who were screened for substance use  within the measurement year | Number of patients with a diagnosis of HIV who:  1.Were new during the measurement year  AND  2. Had a medical visit with a medical provider with prescribing privileges at least once in  the measurement year | 1. Does the patient have a diagnosis of HIV? (Y/N)  a. If yes, was the patient new to the program during the reporting period? (Y/N)  i. If yes, was the patient screened for substance use during the measurement year? (Y/N) |
| Prescription of HIV Antiretroviral Therapy  (Q.16) | HRSA/HAB (NQF 2083)  (<http://hab.hrsa.gov/deliverhivaidscare/coremeasures.pdf>, p.3) | Percentage of patients, regardless of age, with a diagnosis of HIV prescribed antiretroviral therapy for the treatment of HIV infection during the measurement year. | Number of patients in the denominator prescribed HIV antiretroviral therapy during the measurement year | Number of patients, regardless of age, with a diagnosis of HIV with at least one medical visit in the measurement year | 1. Does the patient, regardless of age, have a diagnosis of HIV? (Y/N)  a. If yes, did the patient have at least one medical visit during the measurement year? (Y/N)  i. If yes, was the patient prescribed HIV antiretroviral therapy during the measurement year? (Y/N) |
| Viral load suppression (Q.17) | HRSA/HAB (NQF 2082)  (<http://hab.hrsa.gov/deliverhivaidscare/coremeasures.pdf>, p.1) | Percentage of patients, regardless of age, with a diagnosis of HIV with a HIV viral load less than 200 copies /mL at last HIV viral load test during the measurement year. | Number of patients in the denominator with a HIV viral load less than 200 copies/ml at last HIV viral load test during the measurement year | Number of patients, regardless of age, with a diagnosis of HIV with at least one medical visit in the measurement year | 1. Does the patient, regardless of age, have a diagnosis of HIV? (Y/N)  a. If yes, did the patient have at least one medical visit during the measurement year? (Y/N)  i. If yes, did the patient have a HIV viral load test with a result <200 copies/mL at the last test? (Y/N) |

1. For example, if the clinic’s ambulatory care unit is the focus of practice transformation, then report on the ambulatory care unit population and the HIV population of the ambulatory care unit only. [↑](#footnote-ref-1)
2. Unstable Housing Arrangements RSR definition: 1) emergency shelter, a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings, including a vehicle, an abandoned building, a bus/train/subway station/airport, or anywhere outside; 2) jail, prison, or a juvenile detention facility; and 3) hotel or motel paid for with emergency shelter voucher. [↑](#footnote-ref-2)
3. 2015 UDS Manual—September 3, 2015 V 1.0 OMB Number: 0915-0193, Expiration Date: 02/28/2018 <http://www.bphc.hrsa.gov/datareporting/reporting/2015udsmanual.pdf>, p. 111-113. [↑](#footnote-ref-3)
4. HRSA. RSR Data Dictionary and XML Schema Implementation Guide v3.2, November 10, 2014. <https://careacttarget.org/sites/default/files/file-upload/resources/RSRDataDictionaryVersion3-2_rev2014-11-04%28final%29.pdf>, p. 28-31. [↑](#footnote-ref-4)