New York State
HIV Quality of Care Program

Annual Benchmark Report

Based on Performance Data from the 2020 Organizational Treatment Cascade Review
with Comparison to Data from 2019

Overview of Organizational Treatment Cascade Data and Benchmark Report Methodology

The NYS Qualify of Care Program within the Office of Quality Initiatives at the AIDS Institute organizes self-review of clinical care by HIV providers at hospitals and community health centers across New York State. These reviews serve to engage providers in the use of quality improvement methodology to improve identified deficits in care outcomes. Recent reviews have focused on HIV cascade of care indicators. Each participating medical organization includes all persons with HIV seen within the organization individually and without duplication (although they may match patients included in other submissions), and for each patient providers are required to include patient identifiers and information where available on sex at birth, current gender, race/ethnicity, primary language, HIV exposure risk, current housing status, diagnosis status (current or past) and HIV care enrollment status. Outcomes data are also provided for each patient as per indicators defined for particular caseloads. Measures related to antiretroviral therapy prescription, viral load testing and viral load suppression apply to all cohorts. Rates of timely linkage to care and baseline resistance testing* are also calculated for newly diagnosed patients. Providers can validate their data and generate indicator scores within the data collection instrument. The Quality of Care Program asks that they use these results to develop quality improvement projects, descriptions of which, including annual goals, are included as part of the submission.

This benchmarking report enables providers to compare their individual HIV care results with statewide and regional results as a part of their efforts to improve HIV care. To prepare it, we used SAS statistical software, version 9.4, to clean and score these indicator data for all medical organizations that submitted retrospective treatment cascade reviews for care provided during the previous calendar year (i.e., the “review period”). (Some of the largest organizations completed multiple submissions defined by their ability to deduplicate data across clinics, and each of these submissions is treated as an "organization" in the tables and benchmark calculations.) For those that had also reported previously on care provided in the year preceding the review period, we calculate the change in each indicator for the reporting organization at the organizational and clinical levels, as applicable (see tables below). The distribution of these organization- and clinic-specific changes is characterized in separate sets of benchmark tables with the same parameters (mean, median, and various percentiles) used to report results for the review period. All benchmark calculations, including quartile thresholds and other summary statistics (e.g. means, medians, percentiles), were computed directly in SAS using its statistical procedures and custom macros. Conditional formatting to identify performance in the top (green) and bottom (red) quartiles – based on organizations or clinics with at least 10 eligible patients – was also applied within SAS-generated output. [These facility-identified results are not currently available as public reports; the data will be shared in a different format on the Health Data NY website.] These benchmarks are provided in three tables: organization level, clinic level, and clinic level within geographic regions** defined by New York State Ryan White reporting (which, in New York City, correspond to that city’s five boroughs). These tables include statistics specific to each indicator for the number of organizations or clinics with eligible patients, number of eligible patients among organizations or clinics that had at least one, indicator performance rates (reported as percentages) among those with eligible patients, and degree of change from the prior year to the review period (expressed as percentage points).

Some indicator data were missing for a few different reasons. A few organizations did not provide any data for the current review period, and these results are coded “NS” (no submission) on the organization-level report (no entries are included for them in the clinic-level report). Other organizations provided data for the review period but not the preceding year, and this is coded as “PD” (partial data) for the degree-of-change columns. Some organizations provided data for one or both years but did not have any eligible patients for particular indicators; this is coded as “NEP” (no eligible patients). Finally, data provided for facilities within Health + Hospitals, the public health system in New York City, did not include sufficient information for scoring some indicators, and these instances are coded as “ND” (no data).

This report is not intended as a final ranking of performance as (i) random effects outside of provider control can have a significant impact on rates when caseloads are small and (ii) different organizations and even clinics within particular organizations face different challenges related both to client circumstances and institutional resources. Rather, the report is designed to provide general insights into individual and collective performance and identify areas for further improvement.

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*Introduced for the review of care provided in 2019.
**Mobile clinics could not be assigned to a specific region.

Patient Status Categories			
Enrollment Status	Diagnosis Status		
	Newly Diagnosed by Reporting Organization	Newly Diagnosed Outside Reporting Organization	Previously Diagnosed (before Review Year) or Unknown Diagnosis Date
Active, new to organization	"Newly diagnosed active - linkage eligible"	"Newly diagnosed active - linkage ineligible"	"Other new to care"
Active, established in care	NOT ALLOWED		"Established active"
Deceased, incarcerated, relocated outside New York State or receiving ongoing HIV care at another New York provider	"Linkage only"	"Excused – newly diagnosed"	"Excused – previously diagnosed"
HIV care status unknown	"Newly diagnosed of unknown status – linkage eligible"	"Newly diagnosed of unknown status – linkage ineligible"	"Open non-active"

Indicators		
Measure	Eligible Patients	Applicable Levels
Suppression on final viral load during the review year among established active patients	"Established active"	Clinic and organization
Suppression on final viral load during the review year among other new to care patients	"Other new to care"	Clinic and organization
Suppression on final viral load during the review year among all previously diagnosed active patients	"Established active" and "Other new to care"	Clinic and organization
Suppression on final viral load during the review year among "open" patients	"Established active" and "Open non-active"	Organization
Viral load suppression within 91 days of diagnosis among patients diagnosed during the review year	"Newly diagnosed active - linkage eligible", "newly diagnosed active - linkage ineligible", "Newly diagnosed of unknown status - linkage eligible" and "Newly diagnosed of unknown status - linkage ineligible"	Organization
Linkage to care (HIV-specific care visit or ARV prescription) within 3 days of diagnosis among newly diagnosed patients	"Newly diagnosed active - linkage eligible", "Newly diagnosed of unknown status - linkage eligible" and "Linkage only"	Organization
Resistance testing among active newly diagnosed patients*	"Newly diagnosed active - linkage eligible" and "newly diagnosed active - linkage ineligible"	Organization

*Introduced for the review of care provided in 2019.

Summary Statistics

New York State Organization-Level Caseload Statistics and Performance Bencmarks	Established Active Patients - Suppression on Final Viral Load	Previously Diagnosed but New to Care Patients - Suppression on Final Viral Load	All Previously Diagnosed Active Patients - Suppression on Final Viral Load	(Open Patients) - Suppression on Final Viral Load	Newly Diagnosed Patients (Dx. Internally) – 3-Day Linkage to Care	Newly Diagnosed Patients (Active Pts.) – Resistance Testing	Newly Diagnosed Patients – Viral Load Suppression (Within 91 Days of Dx.)
2020 Participation and Caseloads							
Organizations with Patient Data for 2019 and 2020	64	62	81	64	49	70	56
Organizations with Patient Data for 2020 Only	9	10	9	9	14	11	26
Organizations with No Eligible Patients in 2020	0	1	0	0	10	9	8
Organizations with No Data for Scoring This Indicator	0	0	0	0	0	0	0
Organizations Without an Approved Submission (2020)	23	23	6	23	23	6	6
Average Caseload	757	56	794	1061	11	14	15
10th Percentile Caseload	67	4	73	95	1	1	1
25th Percentile Caseload	172	8	183	205	3	4	4
Median Caseload	343	26	441	466	7	9	11
75th Percentile Caseload	901	64	1120	1084	12	20	20
90th Percentile Caseload	1394	149	1590	2175	26	27	29
2020 Indicator Benchmarks							
Average Rate	84.6%	73.2%	83.6%	72.7%	50.4%	69.9%	46.7%
10th Percentile Rate	72.9%	51.9%	71.8%	40.5%	0.0%	8.0%	0.0%
25th Percentile Rate	80.9%	64.1%	80.0%	62.7%	16.7%	55.0%	27.3%
Median Rate	87.0%	77.0%	85.0%	77.3%	54.5%	80.0%	46.1%
75th Percentile Rate	91.2%	86.5%	90.3%	86.1%	81.8%	100.0%	64.0%
90th Percentile Rate	93.8%	100.0%	92.9%	90.8%	100.0%	100.0%	100.0%
Benchmarks for Percentage Point Change by Organization from 2019 to 2020							
Average Change	-1.2	-1.6	-1.1	-1.3	1.3	6.4	-3.5
10th Percentile Change	-7.0	-22.2	-6.0	-10.1	-41.7	-31.6	-46.4
25th Percentile Change	-5.1	-11.8	-4.4	-5.6	-8.2	-5.9	-20.6
Median Change	-1.8	-2.2	-1.3	-1.5	0.0	1.2	-1.8
75th Percentile Change	1.3	6.0	0.7	2.6	19.2	14.3	13.7
90th Percentile Change	6.5	25.1	4.3	7.2	28.6	60.7	33.3

Summary Statistics - New York State

New York State Clinic-Level Caseload Statistics and Performance Bencmarks	Established Active Patients - Suppression on Final Viral Load	Previously Diagnosed but New to Care Patients - Suppression on Final Viral Load	All Previously Diagnosed Active Patients - Suppression on Final Viral Load
2020 Participation and Caseloads			
Clinics with Patient Data for 2019 and 2020	195	154	220
Clinics with Patient Data for 2020 Only	32	35	29
Clinics with No Eligible Patients in 2020	9	47	4
Clinics with No Data for Scoring This Indicator	0	0	0
Clinics Without an Approved Submission (2020)	179	179	162
Average Caseload	243	21	287
10th Percentile Caseload	3	1	3
25th Percentile Caseload	14	3	16
Median Caseload	66	7	74
75th Percentile Caseload	226	25	306
90th Percentile Caseload	638	55	912
2020 Indicator Benchmarks			
Average Rate	78.4%	66.2%	77.2%
10th Percentile Rate	50.0%	20.0%	50.0%
25th Percentile Rate	73.0%	50.0%	71.4%
Median Rate	84.7%	71.4%	83.7%
75th Percentile Rate	92.2%	88.9%	90.9%
90th Percentile Rate	100.0%	100.0%	96.7%
Benchmarks for Percentage Point Change by Clinic from 2019 to 2020			
Average Change	-3.9	-6.7	-4.1
10th Percentile Change	-15.0	-44.4	-16.8
25th Percentile Change	-6.5	-19.5	-6.1
Median Change	-1.6	-0.4	-1.8
75th Percentile Change	1.9	8.3	1.5
90th Percentile Change	8.9	28.6	7.7

Summary Statistics - New York City by Region (Borough)

Clinic-Level Caseload Statistics and Performance Bencmarks for New York City Regions (Boroughs)	Established Active Patients – Suppression on Final Viral Load	Previously Diagnosed but New to Care Patients – Suppression on Final Viral Load	All Previously Diagnosed Active Patients – Suppression on Final Viral Load
New York City - Number of Clinics with Patient Data for 2020	146	122	166
New York City - Median Indicator Rate for 2020	80.0%	66.7%	80.0%
New York City - 25th Percentile Indicator Rate for 2020	70.3%	42.9%	68.3%
New York City - 75th Percentile Indicator Rate for 2020	87.7%	81.9%	86.6%
Bronx - Clinics with Patient Data for 2020	46	33	51
Bronx - Median Rate for 2020	75.4%	51.9%	76.6%
Bronx - 25th Percentile Rate for 2020	66.7%	33.3%	65.7%
Bronx - 75th Percentile Rate for 2020	85.2%	83.3%	85.0%
Brooklyn - Clinics with Patient Data for 2020	33	29	39
Brooklyn - Median Rate for 2020	80.0%	66.7%	79.6%
Brooklyn - 25th Percentile Rate for 2020	72.4%	50.0%	69.4%
Brooklyn - 75th Percentile Rate for 2020	86.4%	76.7%	84.8%
Manhattan - Clinics with Patient Data for 2020	47	41	52
Manhattan - Median Rate for 2020	81.6%	68.1%	80.9%
Manhattan - 25th Percentile Rate for 2020	67.7%	56.3%	69.5%
Manhattan - 75th Percentile Rate for 2020	87.9%	81.9%	86.9%
Queens - Clinics with Patient Data for 2020	14	14	18
Queens - Median Rate for 2020	87.2%	72.8%	85.0%
Queens - 25th Percentile Rate for 2020	76.8%	50.0%	70.5%
Queens - 75th Percentile Rate for 2020	94.5%	84.6%	90.6%
Staten Island - Clinics with Patient Data for 2020	4	3	4
Staten Island - Median Rate for 2020	76.1%	64.3%	76.4%
Staten Island - 25th Percentile Rate for 2020	68.8%	34.5%	65.0%
Staten Island - 75th Percentile Rate for 2020	86.6%	100.0%	85.7%

Summary Statistics - Rest of State by Region

Clinic-Level Caseload Statistics and Performance Bencmarks for Regions Outside New York City	Established Active Patients – Suppression on Final Viral Load	Previously Diagnosed but New to Care Patients – Suppression on Final Viral Load	All Previously Diagnosed Active Patients – Suppression on Final Viral Load
Rest of State - Number of Clinics with Patient Data for 2020	81	67	83
Rest of State - Median Indicator Rate for 2020	92.0%	84.8%	91.7%
Rest of State - 25th Percentile Indicator Rate for 2020	85.7%	62.5%	84.0%
Rest of State - 75th Percentile Indicator Rate for 2020	95.6%	100.0%	95.2%
Central NY - Clinics with Patient Data for 2020	10	7	10
Central NY - Median Rate for 2020	92.1%	80.6%	88.7%
Central NY - 25th Percentile Rate for 2020	83.8%	62.5%	83.3%
Central NY - 75th Percentile Rate for 2020	94.1%	100.0%	92.4%
Finger Lakes - Clinics with Patient Data for 2020	11	9	11
Finger Lakes - Median Rate for 2020	88.5%	80.0%	86.5%
Finger Lakes - 25th Percentile Rate for 2020	82.4%	60.0%	81.1%
Finger Lakes - 75th Percentile Rate for 2020	100.0%	85.1%	100.0%
Long Island - Clinics with Patient Data for 2020	15	16	16
Long Island - Median Rate for 2020	94.6%	94.4%	94.0%
Long Island - 25th Percentile Rate for 2020	86.0%	62.9%	88.9%
Long Island - 75th Percentile Rate for 2020	97.0%	100.0%	96.5%
Lower Hudson - Clinics with Patient Data for 2020	16	12	16
Lower Hudson - Median Rate for 2020	93.8%	82.1%	92.1%
Lower Hudson - 25th Percentile Rate for 2020	90.8%	50.0%	89.6%
Lower Hudson - 75th Percentile Rate for 2020	99.3%	100.0%	99.4%
Mid Hudson - Clinics with Patient Data for 2020	16	13	17
Mid Hudson - Median Rate for 2020	85.7%	88.9%	87.5%
Mid Hudson - 25th Percentile Rate for 2020	41.7%	66.7%	60.0%
Mid Hudson - 75th Percentile Rate for 2020	92.5%	100.0%	92.9%
Northeastern NY - Clinics with Patient Data for 2020	11	8	11
Northeastern NY - Median Rate for 2020	90.3%	89.5%	88.5%
Northeastern NY - 25th Percentile Rate for 2020	86.1%	65.5%	85.7%
Northeastern NY - 75th Percentile Rate for 2020	94.9%	100.0%	93.8%

Western NY - Clinics with Patient Data for 2020	2	2	2
Western NY - Median Rate for 2020	90.6%	81.6%	90.3%
Western NY - 25th Percentile Rate for 2020	90.1%	76.9%	89.8%
Western NY - 75th Percentile Rate for 2020	91.2%	86.4%	90.8%