

# **New York State HIV Quality of Care Program Annual Benchmark Report**

Based on Performance Data from the 2021 Organizational Treatment Cascade Review  
with Comparison to Data from 2020

### **Overview of Organizational Treatment Cascade Data and Benchmark Report Methodology**

The New York State HIV Quality of Care Program conducts annual retrospective reviews of clinical care provided at hospitals and community health centers across New York State. 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.

To prepare this benchmark report, 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). 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.

This report was prepared by Abdullah Albalawi, Christopher Wells and Daniel Belanger, all in the Quality of Care Program, Office of Quality Initiatives, AIDS Institute. If you have questions about this report, please feel free to contact us at [gocreviews@health.ny.gov](mailto:gocreviews@health.ny.gov).

\*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" and "Newly diagnosed of unknown status - linkage ineligible"	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

<b>New York State Organization-Level Caseload Statistics and Performance Benchmarks</b>	<b>Established Active Patients - Suppression on Final Viral Load</b>	<b>Previously Diagnosed but New to Care Patients - Suppression on Final Viral Load</b>	<b>All Previously Diagnosed Active Patients - Suppression on Final Viral Load</b>	<b>(Open Patients) - Suppression on Final Viral Load</b>	<b>Newly Diagnosed Patients (Dx. Internally) – 3-Day Linkage to Care</b>	<b>Newly Diagnosed Patients (Active Pts.) – Resistance Testing</b>	<b>Newly Diagnosed Patients – Viral Load Suppression (Within 91 Days of Dx.)</b>
<b>2021 Participation and Caseloads</b>							
Organizations with Patient Data for 2020 and 2021	72	66	89	72	60	78	79
Organizations with Patient Data for 2021 Only	3	4	3	3	6	6	6
Organizations with No Eligible Patients in 2021	0	5	0	0	9	8	7
Organizations with No Data for Scoring This Indicator	17	17	0	17	17	0	0
Organizations Without an Approved Submission (2021)	5	5	5	5	5	5	5
Average Caseload	728	59	771	1060	10	14	14
10th Percentile Caseload	53	3	60	63	1	2	2
25th Percentile Caseload	146	10	158	156	2	4	4
Median Caseload	340	27	411	423	6	10	10
75th Percentile Caseload	903	58	1022	1082	13	19	21
90th Percentile Caseload	1463	139	1554	2278	24	26	28
<b>2021 Indicator Benchmarks</b>							
Average Rate	84.2%	69.3%	83.9%	73.4%	56.1%	68.3%	47.4%
10th Percentile Rate	71.2%	46.1%	71.8%	41.9%	0.0%	0.0%	0.0%
25th Percentile Rate	80.5%	58.3%	80.1%	64.6%	33.3%	48.1%	28.6%
Median Rate	88.1%	69.1%	87.6%	79.4%	60.9%	81.8%	50.0%
75th Percentile Rate	91.7%	84.4%	91.1%	88.4%	85.7%	100.0%	70.0%
90th Percentile Rate	95.4%	97.8%	94.4%	93.9%	100.0%	100.0%	75.0%
<b>Benchmarks for Percentage Point Change from 2020 to 2021</b>							
Average Change	0.0	-3.9	0.7	0.6	1.6	0.7	1.7
10th Percentile Change	-8.1	-31.0	-6.6	-7.5	-39.7	-36.1	-33.3
25th Percentile Change	-2.5	-11.8	-2.2	-3.4	-12.0	-7.8	-10.7
Median Change	0.4	-2.2	1.0	1.5	0.0	0.0	5.5
75th Percentile Change	3.9	9.2	3.8	4.5	17.5	14.9	19.3
90th Percentile Change	6.1	18.8	7.7	7.0	40.1	28.0	33.1

Summary Statistics - New York State

New York State Clinic-Level Caseload Statistics and Performance Benchmarks	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
2021 Participation and Caseloads			
Clinics with Patient Data for 2020 and 2021	202	154	227
Clinics with Patient Data for 2021 Only	42	40	42
Clinics with No Eligible Patients in 2021	9	59	1
Clinics with No Data for Scoring This Indicator	17	17	0
Clinics Without an Approved Submission (2021)	119	119	119
Average Caseload	224	21	264
10th Percentile Caseload	2	1	2
25th Percentile Caseload	8	3	11
Median Caseload	53	7	61
75th Percentile Caseload	208	18	252
90th Percentile Caseload	605	65	781
2021 Indicator Benchmarks			
Average Rate	78.9%	66.5%	77.1%
10th Percentile Rate	50.0%	10.0%	44.4%
25th Percentile Rate	75.1%	51.1%	73.9%
Median Rate	85.8%	69.8%	84.2%
75th Percentile Rate	92.6%	88.9%	91.8%
90th Percentile Rate	100.0%	100.0%	100.0%
Benchmarks for Percentage Point Change from 2020 to 2021			
Average Change	0.7	1.4	1.0
10th Percentile Change	-11.5	-33.3	-9.1
25th Percentile Change	-3.8	-16.7	-3.1
Median Change	0.6	0.0	0.9
75th Percentile Change	4.6	16.7	4.9
90th Percentile Change	12.1	43.3	13.4

## Summary Statistics - New York City by Region (Borough)

Clinic-Level Caseload Statistics and Performance Benchmarks 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 2021	156	130	178
New York City - Median Indicator Rate for 2021	82.2%	66.7%	81.2%
New York City - 25th Percentile Indicator Rate for 2021	71.3%	50.0%	68.9%
New York City - 75th Percentile Indicator Rate for 2021	88.5%	83.3%	88.0%
Bronx - Clinics with Patient Data for 2021	51	45	56
Bronx - Median Rate for 2021	75.3%	54.8%	74.6%
Bronx - 25th Percentile Rate for 2021	61.4%	30.0%	55.8%
Bronx - 75th Percentile Rate for 2021	83.1%	69.7%	82.4%
Brooklyn - Clinics with Patient Data for 2021	36	28	41
Brooklyn - Median Rate for 2021	86.5%	69.9%	84.3%
Brooklyn - 25th Percentile Rate for 2021	79.6%	59.5%	78.2%
Brooklyn - 75th Percentile Rate for 2021	90.4%	82.9%	89.7%
Manhattan - Clinics with Patient Data for 2021	48	38	56
Manhattan - Median Rate for 2021	83.8%	77.3%	83.9%
Manhattan - 25th Percentile Rate for 2021	72.2%	62.5%	71.0%
Manhattan - 75th Percentile Rate for 2021	90.5%	88.9%	90.1%
Queens - Clinics with Patient Data for 2021	15	16	19
Queens - Median Rate for 2021	84.6%	59.2%	81.3%
Queens - 25th Percentile Rate for 2021	71.4%	25.0%	68.8%
Queens - 75th Percentile Rate for 2021	88.6%	78.9%	87.3%
Staten Island - Clinics with Patient Data for 2021	4	2	4
Staten Island - Median Rate for 2021	91.1%	78.3%	90.3%
Staten Island - 25th Percentile Rate for 2021	75.0%	77.8%	75.0%
Staten Island - 75th Percentile Rate for 2021	91.7%	78.8%	91.7%

## Summary Statistics - Rest of State by Region

Clinic-Level Caseload Statistics and Performance Benchmarks 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 2021	88	64	91
Rest of State - Median Indicator Rate for 2021	93.2%	83.0%	92.8%
Rest of State - 25th Percentile Indicator Rate for 2021	85.3%	66.7%	83.9%
Rest of State - 75th Percentile Indicator Rate for 2021	97.3%	100.0%	96.8%
Central NY - Clinics with Patient Data for 2021	11	7	11
Central NY - Median Rate for 2021	91.4%	76.2%	91.4%
Central NY - 25th Percentile Rate for 2021	89.2%	66.7%	88.9%
Central NY - 75th Percentile Rate for 2021	100.0%	100.0%	100.0%
Finger Lakes - Clinics with Patient Data for 2021	13	8	13
Finger Lakes - Median Rate for 2021	83.3%	79.7%	80.0%
Finger Lakes - 25th Percentile Rate for 2021	72.7%	66.7%	72.7%
Finger Lakes - 75th Percentile Rate for 2021	96.6%	93.4%	96.8%
Long Island - Clinics with Patient Data for 2021	15	15	16
Long Island - Median Rate for 2021	90.0%	82.4%	89.5%
Long Island - 25th Percentile Rate for 2021	86.8%	60.0%	86.5%
Long Island - 75th Percentile Rate for 2021	95.7%	100.0%	94.5%
Lower Hudson - Clinics with Patient Data for 2021	21	13	21
Lower Hudson - Median Rate for 2021	95.8%	100.0%	95.8%
Lower Hudson - 25th Percentile Rate for 2021	92.9%	66.7%	93.7%
Lower Hudson - 75th Percentile Rate for 2021	100.0%	100.0%	100.0%
Mid Hudson - Clinics with Patient Data for 2021	16	12	18
Mid Hudson - Median Rate for 2021	95.3%	85.4%	94.2%
Mid Hudson - 25th Percentile Rate for 2021	76.8%	53.2%	78.9%
Mid Hudson - 75th Percentile Rate for 2021	100.0%	100.0%	100.0%
Northeastern NY - Clinics with Patient Data for 2021	10	7	10
Northeastern NY - Median Rate for 2021	87.3%	75.0%	86.2%
Northeastern NY - 25th Percentile Rate for 2021	82.8%	50.0%	80.7%

Northeastern NY - 75th Percentile Rate for 2021	92.4%	100.0%	92.8%
Western NY - Clinics with Patient Data for 2021	2	2	2
Western NY - Median Rate for 2021	93.2%	68.4%	92.2%
Western NY - 25th Percentile Rate for 2021	91.0%	68.1%	89.6%
Western NY - 75th Percentile Rate for 2021	95.4%	68.8%	94.7%