

2022 Organizational Treatment Cascade Review of Care Provided in 2021

Patient-Level Data Elements

Patient Information	Variable Name	Applies To	Field Type	Allowed Values	Guidance
First name	first_name	All patients	Text	Up to 50 characters	For transgender patients or others who have changed their first name, enter just the patient's current name (nothing in parenthesis, etc.).
Last name	last_name	All patients	Text	Up to 80 characters	For any patients who have changed their name, enter just the current name. For married patients or anyone else who uses two last names, enter their current legal name if known.
Middle initial	middle_initial	All patients	Text	Single character	Recommended for full deduplication of patient list but can be blank if needed.
Date of birth	dob	All patients	Date	*m/*d/yyyy	
Medical record number	mrn	All patients	Text	Up to 50 characters	Optional
Zip Code	zip	All patients	Text	5 numerical characters entered as text	Mark 'UK' if unknown or 'NA' if not applicable (i.e., a patient who has never been domiciled in the United States).
Sex at birth	birth_sex	All patients	Single selection	F (= female), I (= intersex), M (= male), UK (= unknown)	Mark 'UK' if unknown, but sex at birth and current gender cannot both be unknown.
Current gender	gender	All patients	Single selection	F (= female), M (= male), TGM (= transgender man), TGW (= transgender woman), OTH (= transgender other, non-binary, gender non-conforming, other), UK (= unknown)	Mark 'UK' if unknown, but sex at birth and current gender cannot both be unknown. Mark 'OTH' for patients reporting gender as 'X'.
Ethnicity	ethnicity	All patients	Single selection	H (= Hispanic or Latino/Latina), NH (= non-Hispanic/Latino/Latina), UK (= unknown)	Mark 'UK' if unknown.
Hispanic subgroup	hispanic_subgroup	Hispanic patients	Multiple selection (as needed, comma separated)	CA (= Central American), CU (= Cuban), D (= Dominican), M (= Mexican, Mexican American or Chicano/Chicana), PR (= Puerto Rican), SA (= South American), SP (= Spanish), OH (= other Hispanic, Latino/Latina, Spanish Origin), UK (= unknown), NA (= not applicable as patient is not Hispanic)	Mark 'NA' if patient is not Hispanic, 'UK' if unknown.
Race	race	All patients	Multiple selection (as needed, comma separated)	ASIAN, AIAN (= American Indian or Alaska Native), B (= Black or African American), , NHPI (= Native Hawaiian or Pacific Islander), W (= White), UK (= unknown)	Mark 'UK' if unknown (warning issued if 'UK' and <i>enrollment</i> = ACTNEW or ACTEST).
Asian subgroup	asian_subgroup	Asian patients	Multiple selection (as needed, comma separated)	AI (= Asian Indian), BAN (= Bangladeshi), BUR (= Burmese), CAM (= Cambodian), CHI (= Chinese), FIL (= Filipino), HM (= Hmong), IND (= Indonesian), JP (= Japanese), KOR (= Korean), LAO (= Laotian), MAL (= Malaysian), NEP (= Nepalese), PK (= Pakistani), SL (= Sri Lankan), TA (= Taiwanese), TH (= Thai), TI (= Tibetan), V (= Vietnamese), OA (= other Asian), UK (= unknown), NA (= not applicable)	Mark 'NA' if patient is not Asian, 'UK' if unknown.

NHPI subgroup	nhpi_subgroup	Native Hawaiian / Pacific Islander patients	Multiple selection (as needed, comma separated)	F (= Fijian), G (= Guamanian), H (= Hawaiian), S (= Samoan), T (= Tongan), OPI (= other Pacific Islander), UK (= unknown), NA (= not applicable)	Mark 'NA' if patient is not Native Hawaiian or Pacific Islander, 'UK' if unknown.
Primary language	language	All patients	Single selection	ARABIC, BENGALI, CHINESE, CREOLE (= Haitian Creole), ENGLISH, ITALIAN, KOREAN, POLISH, RUSSIAN, SPANISH, YIDDISH, OTH (= other language), UK (= unknown)	Primary language spoken at patient's home, if known. Enter 'UK' if unknown.
Other language specification	other_language_specify	Patients who speak a language not on list	Text	Up to 50 characters	Enter language name or description for patients whose primary language spoken at home is not one of choices for Primary Language. Leave blank if not applicable.
Housing status	housing	All patients	Single selection	S (= stable / permanent), T (= temporary), US (= unstable), UK (= unknown)	Mark 'UK' if unknown.
HIV exposure risk	hiv_risk	All patients	Multiple selection (as needed, comma separated)	BLOOD (= blood transfusion/blood products), HEMO (= hemophilia/coagulation disorder), HETERO (= heterosexual contact), IDU (= injecting drug use), MSM (= male who has sex with male(s)), PERI (= perinatal transmission), OTH (= other), UK (= unknown)	Patient's HIV exposure risk factor(s); mark 'UK' if unknown (warning issued if 'UK' and <i>enrollment</i> = ACTNEW or ACTEST). Please note: this field is for reporting, using established categories, of the most likely way(s) the patient was exposed to HIV at the time of infection and is not necessarily intended to reflect the patient's current gender identity or recent substance use history. Provider judgment, in conjunction with patient input, should be used as necessary to determine which option(s) to use for this and related fields.
Insurance	insurance	All patients	Single selection	ADAP (= AIDS Drug Assistance Program (Primary Care)), DUALELG (= Medicaid & Medicare), MEDICAID, MEDICARE, PRIVATE (= individual or employer-based private insurance), VA (= Veteran's Administration), OP (= other plan), NONE, UK (= unknown)	Primary insurance on last status check during the review period; mark 'UK' if unknown (warning issued if 'UK' and <i>enrollment</i> = ACTNEW or ACTEST).
Medicaid number	medicaid_number	Patients whose primary insurance is Medicaid	Text	Eight characters in this sequence: two letters, five numbers, and one letter.	Also applies to dual-eligible patients (those also covered through Medicare). Mark 'NA' for patients with other primary insurance, 'UK' if unknown.
Enrollment status (as of the end of the review period, was the patient established in care, new to care, deceased, incarcerated, relocated, in external care, or other?)	enrollment	All patients	Single selection	ACTEST (= active, seen prior to the review period, continuing in program), DEC (= died during review period), ACTNEW (= active, new to clinic during review period or returning after not being seen the previous two years, continuing in program), EXTCARE (= confirmed to be receiving ongoing HIV care at another site as of end of the review period), INC (= incarcerated as of end of review period), RELOC (= relocated out of New York State during the review period), OTH (= other status, not enrolled in care at your organization)	For ACTEST, the patient must (1) have had during the two years immediately prior to the review period at least one HIV ambulatory care visit at your clinic or at least one viral load test performed within or reported to your organization; and (2) have had at least one HIV ambulatory care visit at your clinic during the review period; and (3) not be analytically excludable due to death during the review period or incarceration, relocation outside of NYS or ongoing external HIV care within NYS as of the end of the review period. For ACTNEW, the patient must (1) have NOT had during the two years immediately prior to the review period any HIV ambulatory care visits at your clinic nor any viral load tests

					<p>performed within or reported to your organization; and (2) have had at least one HIV ambulatory care visit at your clinic during the review period; and (3) not be analytically excludable due to death during the review period or incarceration, relocation outside of NYS or ongoing external HIV care within NYS as of the end of the review period.</p> <p>Patients who died during the review period, relocated outside of NYS during the review period or who were receiving ongoing external HIV care or were incarcerated as of the end of the review period should be included in the reported data but will be excluded from most indicator scoring. These patients should be classified as DEC, RELOC, EXTCARE or INC, respectively.</p> <p>All other patients should be entered as 'OTH' (other status).</p>
Clinic (where was the patient enrolled in care?)	clinic_code	New or established active patients	Single selection	Must match one of the clinic codes we have defined for your organization.	If seen at multiple sites, location where seen most often or, if tied, where seen last. Leave blank if not applicable (<i>enrollment</i> does <u>not</u> equal ACTEST or ACTNEW).
Service line (where was the patient seen within your system?)	service_line	Unknown-status patients (enrollment = 'OTH')	Multiple selection (as needed, comma separated)	DS (= dental services), ED (= emergency department/urgent care), FACHIV (= faculty practice HIV care outside HIV clinic(s)), IP (= inpatient care, including ICU, surgery and psychiatric care), MBHS (= outpatient mental and behavioral health services), NHSC (= non-HIV specialty care such as cardiology, pulmonology, neurology, ambulatory surgery, etc.), PC (= primary care provided outside of your HIV clinic(s)), RHS (= reproductive health services), SS (= supportive services), OTH (= other)	Leave blank if not applicable.
Service line specifics	other_service_specify	Patient seen on "other" service	Text	Up to 200 characters	Enter a brief description of any service line that does not match one of the predefined categories. Leave blank if not applicable.
Diagnosis status (when was the patient diagnosed, and if during the review period, where?)	diagnosis	All patients	Single selection	NEWEXT (= externally diagnosed during the review period), NEWINT (= internally diagnosed during the review period), PREV (= diagnosed prior to the review period), UK (= unknown)	Mark 'UK' if unknown.
Was the patient on ARV (besides PREP) during review period?	arv	All patients	Single selection	NO, YES, UK (= unknown)	For "YES": At least one prescription for ARV therapy, concurrent with or following diagnosis and during the review period, from any provider (within your medical organization or outside).
Was a VL test obtained during the review period?	vl_test_review_year	All patients	Single selection	NO, YES, UK (= unknown)	Mark 'UK' if unknown.

Diagnosis date	diagnosis_date	Newly diagnosed patients	Date	*m/*d/yyyy	<p>Enter the <u>earliest</u> available date when any of these events occurred:</p> <p>(i) HIV-1 and/or HIV-2 antibodies detected on antibody differentiation immunoassay (date of report) (ii) Acute HIV-1 infection detected on HIV-1 NAT (date of report) (iii) Second positive rapid HIV test (different manufacturer than for first test) conducted (iv) Date when treating physician entered a diagnosis of HIV disease or initiated ARV therapy on a presumptive diagnosis of HIV disease</p> <p>For externally diagnosed patients, this date should be when the external provider made the initial diagnosis (as specified above) if that can be determined. If necessary, this can be estimated using the assumed date of the first positive test.</p>
Resistance test (among newly diagnosed patients enrolled in HIV care)	resistance_test	Newly diagnosed patients	Single selection	NO, YES, UK (= unknown), NA (= not applicable)	Qualifying events include a resistance test performed within your organization or documentation of an external test performed during the review period. Mark 'NA' if patient is not enrolled in care (<i>enrollment</i> does not equal 'ACTNEW') or was previously diagnosed.
Was the patient seen for HIV care during review period?	hiv_clinic_visit	Newly diagnosed patients	Single selection	NO, YES, UK (= unknown), NA (= not applicable)	Qualifying events include an HIV ambulatory care visit at your clinic or at an external provider following your referral for external care. Mark 'UK' if unknown, 'NA' if patient was previously diagnosed.
If yes, date of first visit with an HIV provider	hiv_clinic_visit_date	Newly diagnosed patients	Date	*m/*d/yyyy	<p>Enter the <u>earliest</u> available date during the review period when either of these events occurred:</p> <p>(i) First HIV ambulatory care visit at one of your clinics (ii) First HIV ambulatory care visit at another medical organization following your referral for external care</p> <p>Date cannot be before the diagnosis date. Leave blank if diagnosis status is unknown or previously diagnosed or if the patient was not seen for HIV care during the review period.</p>
Date of ARV initiation	arv_initiation_date	Newly diagnosed patients	Date	*m/*d/yyyy	<p>Enter the date of the first known ARV prescription during the review period that was not prior to date of diagnosis or first visit within your medical organization.</p> <p>Date cannot be before the diagnosis date. Leave blank if diagnosis status is unknown or previously diagnosed or if the patient was not prescribed ARV therapy during the review period.</p>
Was a suppressed viral load obtained during the review period?	suppressed_ever_review_year	Newly diagnosed patients	Single selection	NO, YES, UK (= unknown), NA (= not applicable)	Mark 'UK' if unknown, 'NA' if patient was previously diagnosed or not tested.

Date of first VL test during review period	first_vl_date_newly_dx	Newly diagnosed patients	Date	*m/*d/yyyy	Enter the earliest available documented date, not prior to date of diagnosis or first visit within your medical organization, when a viral load test result was reported. Date cannot be before the diagnosis date. Leave blank if diagnosis status is unknown or previously diagnosed.
Date of first suppressed VL	first_suppressed_date_newly_dx	Newly diagnosed patients	Date	*m/*d/yyyy	Enter the earliest available documented date, not prior to date of diagnosis or first visit within your medical organization, when a viral load test result of less than 200 copies/mL (or "undetectable" based on a test with a threshold of sensitivity less than 200 copies/mL) was reported. Date cannot be before the date of first VL test. Leave blank if a suppressed viral load was not obtained during the review period.
Was the patient suppressed on final VL test during the review period?	suppressed_final_review_year	Previously diagnosed patients	Single selection	NO, YES, UK (= unknown), NA (= not applicable as the patient was newly diagnosed or not tested during the review period)	Mark 'UK' if unknown, 'NA' if patient is newly diagnosed or was not tested.