*Following are changes proposed changes for HIV test data collection and reporting. Data reporting requirements will also need to be reflected on the CDC HIV Test Form, Parts I and II. The approval status indicates whether or not the change was preliminarily approved by the PEB-lead HIV test form, reporting requirements workgroup.*

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| ***New HIV Testing Variables*** | | | |
| **Variable Name** | **Rationale or Specific Change** | **Key Notes and Implications** | **Approval Status** |
| Assigned Sex at Birth | New variable on form, with the following value codes: 01 – Male; 02 – Female; 77 – Declined. | After considerable research and consultation with grantees, national partners, experts in the field and within CDC, this variable was added to more accurately identify transgendered persons. This variable is part of the “Two-step model” where *current gender identity* and *assigned sex at birth* are both used to calculate transgender. Preliminary data show that use of only current gender identity to identify transgendered persons results in undercounting of these individuals in the data. | Approved |
| Program Announcement | New variable on form. Variable is currently required, but will be added to the test form to more readily identify for analysis and reporting the program announcement under which a test is conducted. Would apply to all HIV testing. | Depending on the final decision regarding how this variable is implemented (multiple choice, fill in the blank, etc.), the variable currently exists in the required data set. | Approved |
| In surveillance system/records | New variable. The addition of this variable is used as a second mechanism for categorizing newly identified HIV-positive clients, rather than relying solely on client’s self-reported result, which is currently the case. Value options are yes; no; not checked.  Encourages CDC’s emphasis on collaboration between program and surveillance, while providing CDC more accurate data. | Self-reported result and in surveillance system/records would both be used for analyses and reporting.  **For positive clients only.** | Approved |
| Referral variable – Did the client receive prevention services? | New variable. If the client is referred to prevention services (currently on test form), this variable would also be required.  Added to emphasize linkages to services for HIV-positive clients.  Already present for HIV medical care (1st appt within 90 days) and PS (interviewed within 30 days) | **For positive clients only.** | Approved |
| Was client interviewed for PS within 30 days of receiving their HIV test result? | New variable. Required for HIV Partner Services program M&E; needs to be reflected on this round of form updates | **For positive clients only.** | Approved |
| Site County | New variable on form, with no value options:  Requires 3 spaces | Page 1 - Agency |  |
| Was the first appointment within 90 days of the HIV test? | New variable, value options:  Yes  No  Don’t Know | Page 2 – Referrals  *This is an add-on question to ‘If yes, did client attend the first appointment’. Use the “🡪” to continue the question pattern.* |  |
| ***Variables Proposed to be Removed from Required Reporting*** | | | |
| **Variable Name** | **Rationale or Specific Change** | **Key Notes and Implications** | **Approval Status** |
| Provide date of last test (2 variables, month and year) | Currently missing > 1/3 of HIV test records.  Not necessary for any current analyses, known planned analyses and no previous data requests required use of this variable  Removal would go toward goal of reducing data requirements |  | Approved |
| Specimen Type | Never used for analysis; removal would go toward goal of reducing data requirements |  | Approved |
| Date result provided | Incomplete in HIV CT Legacy data, so expect same for M&E.  Not necessary for any current analyses, known planned analyses and no previous data requests required use of this variable  Removal would go toward goal of reducing data requirements |  | Pending |
| If rapid reactive, did client provide confirmatory sample? | If the client provided confirmatory sample, and was captured, it would be captured as part of the HIV testing event (e.g., Test 1, Test 2, etc.)  Removal would go toward goal of reducing data requirements by 20% |  | Approved |
| Two variables:  -Was client referred for prenatal care?  -Did client attend first prenatal care appointment? | Pregnancy related variables (all 4) seem missing/invalid  Can assume that prenatal care needs are also addressed in the context of HIV medical care if necessary  Not necessary for any current analyses, known planned analyses and no previous data requests required use of this variable  Removal would go toward goal of reducing data requirements | **For positive clients only.** | Approved |
| Testing Strategy (screening or targeted testing) | CDC emphasizes screening both through recommendations and guidelines and as part of specific program announcements.  Variable was originally added at the request of grantees, but is not analyzed by CDC.  Removal would go toward goal of reducing data requirements | Most notably requires changes to language captured in the HIV Prevention Program Performance Indicators and related guidance materials. CT indicators are stratified by screening and targeted testing.  Rich/Sam: CDC will assume that testing in clinical/healthcare settings is screening and that testing in non-clinical or non-healthcare settings is targeted testing, recognizing the limitations of this approach and applicability across test sites.  Rich, Sam, Wendy, Dale agreed this is something not needed or required by CDC. | Approved |
| Risk Reduction Plan | Variable not required by CDC and can be captured by grantees in one of the “Other session activities” fields located at the bottom of the HIV test form |  | Approved |
| ***Other planned changes to HIV testing reporting requirements*** | | | |
| **Variable Name** | **Rationale or Specific Change** | **Key Notes and Implications** | **Approval Status** |
| Form ID | Variable length. Extend the length of the form id to 19 characters to match data specifications (format/length) |  | Approved |
| Worker ID | Variable length. Extend the length of the field to accommodate up to 12 characters. |  | Approved |
| Site Type | Current list of site types is not mutually exclusive and as currently listed provide minimal utility for data analysis and reporting. | The proposed list also aligns with the healthcare and non-healthcare setting structure of FOA 10-10138. | Approved |
| Site type | Add new value codes proposed by the Prevention Program Branch for the expanded testing initiative:  F02.71 Outpatient - Federally funded CHC  F02.72 Outpatient - Private medical practice  F02.73 Outpatient - Other primary care clinic  F02.51 Outpatient- Federally funded community health clinic – isn’t this CHC? | Note – these were requested by PPB; we still have to confirm some of the changes to the value codes. | Pending |
| Current Gender Identity | Add value options  **05** – Transgender-unspecified  **77** – Declined  **89** – Additional |  | Approved |
| State of Residence | Add value options  **88** – Other – client does not currently reside in a US state, territory or district.  Not all clients tested are residents of the US |  | Approved |
| Test Technology | Add value option  ***NAAT/RNA testing.***  To allow for test technology and confirmation testing performed by some jurisdictions | Need to confirm the final value option label. | Approved |
| Test Result | Delete value option  **NAAT-pos**  Having two different positive values is cumbersome and confusing |  | Approved |
| Result Provided | Add a code “Yes, client obtained the result from another agency”. As it stands now, analytically, we have to go to the variable “If result not provided why?” to gather more “yes” answers to calculate the proportion of clients who received the test results. The current way is cumbersome and confusing. |  | Approved |
| If results not provided, why? | Add “Other” as a value option |  | Approved |
| Risk Factors | Recommended by Rich W: Reformat risk section to include basic categories (check all that apply) – MSM, IDU, Heterosexual, sex with an HIV positive person | Will need OD to provide the specific categories (those listed by Rich were noted but have not been confirmed) and provide input on risk behavior algorithms used for analysis and reporting | Approved |
| HIV Test Election | Add “test not offered” as value option. Align with DVS and NHM&E requirements |  | Approved |
| Was client referred to PCRS? | Change “PCRS” to “Partner Services”. Comply with current terminology |  | Approved |
| Referral variables | Re-order referrals:  1 – Referred to HIV medical care  2 – Referred to PS  3 – Referred to HIV Prevention Services  4 – Pregnancy variables  Referral variables should be listed in order of relative importance to align with DHAP priorities |  | Approved |
| Time period for referral variables | Medical care: 90 days; PS: 30 days  Consistent with DC MMWR, data would be more complete coming to CDC (grantees less likely to hold onto form), makes clear to grantees and CDC exact guidance needed. |  | Approved |