NHME Variables and Values
Data Variable Set (DVS)

Agency Level

Table: A	General Agency Information

This table is required to be completed by all directly funded grantees. It is also required for all agencies that indirectly receive CDC funds for HIV prevention AND: 1) Provide HIV prevention services and/or 2) Provide contracts using CDC funds to support the provision of HIV prevention services.

Num	*Variable Name*

A01 **Agency Name**   **XSD (Schema) Name:** **agencyName**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 100**

Definition: The official legal name of the agency or organization.

Instructions: Enter the official legal name of the agency funded by CDC to provide HIV prevention programs.

Business rules   Required for HIV testing. Not allowed for partner services or non-testing non-partner services.

A01a **Agency ID**   **XSD (Schema) Name:** **agencyId**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 12**

Definition: An alpha-numeric identification used to uniquely identify an agency.

Instructions: Enter the unique agency ID generated by the CDC-funded agency. If using EvaluationWeb for direct key entry, this number may be automatically generated by that system.

Business rules   Required for HIV testing, partner services and non-testing non-partner services.

NHME Variables and Values

Num	Variable Name			
A02	**Jurisdiction**		**XSD (Schema) Name:**	**populatedAreaValueCode**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 2**   **Max Length: 2**

Definition: The CDC-directly funded state, territory, city area, or region where a state or local health department receives funding to monitor HIV prevention activities. Each jurisdiction has a corresponding Federal Information Processing Standards (FIPS) code.

Instructions: Select the name of state, city or territory in which your agency is located. If uploading data to EvaluationWeb, submit the two number FIPS code for your state or territory, not the value description or the name of the jurisdiction.

Business rules Required for HIV testing, partner services and non-testing non-partner services.

Code	Value Description	Value Definition
1	AL	Alabama
10	DE	Delaware
11	DC	District of Columbia
12	FL	Florida
13	GA	Georgia
15	HI	Hawaii
16	ID	Idaho
17	IL	Illinois
18	IN	Indiana
19	IA	Iowa
2	AK	Alaska
20	KS	Kansas
21	KY	Kentucky
22	LA	Louisiana
23	ME	Maine
24	MD	Maryland
25	MA	Massachusetts
26	MI	Michigan
27	MN	Minnesota
28	MS	Mississippi
29	MO	Missouri
30	MT	Montana
31	NE	Nebraska
32	NV	Nevada
33	NH	New Hampshire
34	NJ	New Jersey
35	NM	New Mexico

NHME Variables and Values

Num	Variable Name	
36	NY	New York
37	NC	North Carolina
38	ND	North Dakota
39	OH	Ohio
4	AZ	Arizona
40	OK	Oklahoma
41	OR	Oregon
42	PA	Pennsylvania
44	RI	Rhode Island
45	SC	South Carolina
46	SD	South Dakota
47	TN	Tennessee
48	TX	Texas
49	UT	Utah
5	AR	Arkansas
50	VT	Vermont
51	VA	Virginia
53	WA	Washington
54	WV	West Virginia
55	WI	Wisconsin
56	WY	Wyoming
6	CA	California
60	AS	American Samoa
64	FM	Federated States of Micronesia
66	GU	Guam
68	MH	Marshall Islands
69	MP	Northern Mariana Islands
70	PW	Palau
72	PR	Puerto Rico
78	VI	Virgin Islands of the U.S.
8	CO	Colorado
80	San Francisco, CA	San Francisco Health Department
81	Los Angeles, CA	Los Angeles Health Department
82	New York City, NY	New York City Health Department
83	Houston, TX	Houston Health Department
84	Chicago, IL	City of Chicago Health Department
85	Philadelphia, PA	City of Philadelphia Health Department

Num	Variable Name	
86	*Atlanta, GA*	*Fulton County Department of Health and Wellness*
87	*Baltimore, MD*	*Baltimore City Health Department*
88	*Dallas, TX*	*Dallas County Health and Human Services*
89	*Miami, FL*	*Florida Department of Health*
9	*CT*	*Connecticut*
90	*San Juan, PR*	*Puerto Rico Department of Health*
91	*Fort Lauderdale, FL*	*Florida Department of Health*

A27   **CBO Agency Name**   **XSD (Schema) Name:**   **CBOAgencyName**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 100**

Definition: The official name of the community-based organization directly-funded by CDC to conduct HIV prevention activities.

Instructions: Enter the official name of the community-based organization directly-funded by CDC to conduct HIV prevention activities.

Business rules   Required for all CDC funded HIV prevention program services.

NHME Variables and Values

Num	Variable Name		
A28	CBO Agency ID	XSD (Schema) Name:	CBOAgencyID

Value Option: N/A **Format Type: Alpha-Numeric** **Min Length: 1** **Max Length: 12**

Definition: The identification number assigned by CDC to a CDC directly-funded community-based organization.

Instructions: Enter the CDC assigned CBO-agency ID.

Business rules Required for all CDC funded HIV prevention program services.

Code	Value Description	Value Definition
AL001	Aletheia House	CDC directly funded community-based organization, Birmingham, AL
AL002	AIDS Alabama, Inc.	CDC directly funded community-based organization, Birmingham, AL
AL003	AIDS Action Coalition	CDC directly funded community-based organization, Huntsville, AL
AZ001	Southern Arizona AIDS Foundation	CDC directly funded community-based organization, Tucson, AZ
CA001	AmASSI Center of South Central Los Angeles	CDC directly funded community-based organization, Inglewood, CA
CA002	AIDS Healthcare Foundation	CDC directly funded community-based organization, Los Angeles, CA
CA003	AIDS Project Los Angeles	CDC directly funded community-based organization, Los Angeles, CA
CA004	AltaMed Health Services Corporation	CDC directly funded community-based organization, Los Angeles, CA
CA005	Bienestar Human Services	CDC directly funded community-based organization, Los Angeles, CA
CA006	Children's Hospital of Los Angeles	CDC directly funded community-based organization, Los Angeles, CA
CA007	Friends Research Institute, Inc./Friends Community Center	CDC directly funded community-based organization, Los Angeles, CA
CA008	JWCH Institute, Inc.	CDC directly funded community-based organization, Los Angeles, CA
CA009	Los Angeles Gay and Lesbian Center (Metro Homeless Youth Services of LA)	CDC directly funded community-based organization, Los Angeles, CA
CA010	Realistic Education in Action Coalition to Foster Health (REACH LA)	CDC directly funded community-based organization, Los Angeles, CA
CA011	Special Service for Groups/Asian Pacific AIDS Intervention Team	CDC directly funded community-based organization, Los Angeles, CA
CA012	AIDS Project of the East Bay	CDC directly funded community-based organization, Oakland, CA
CA013	CA Prostitutes Education Project	CDC directly funded community-based organization, Oakland, CA
CA014	HIV Prevention Project of Alameda County	CDC directly funded community-based organization, Oakland, CA
CA015	La Clinica De la Raza, Inc.	CDC directly funded community-based organization, Oakland, CA
CA016	Center for AIDS Research Education & Services	CDC directly funded community-based organization, Sacramento, CA
CA017	Family Health Centers of San Diego	CDC directly funded community-based organization, San Diego, CA
CA018	Asian and Pacific Islander Wellness Center	CDC directly funded community-based organization, San Francisco, CA
CA019	Larkin St. Youth Services	CDC directly funded community-based organization, San Francisco, CA
CA020	Stop AIDS Project	CDC directly funded community-based organization, San Francisco, CA
CA021	Centerforce	CDC directly funded community-based organization, San Rafael, CA
CA022	Tarzana Treatment Centers, Inc.	CDC directly funded community-based organization, Tarzana, CA

NHME Variables and Values

Num	Variable Name	
CT001	Latinos Conta Cida (Latino Community Services, Inc.)	CDC directly funded community-based organization, Hartford, CT
DC001	Children's National Medical Center	CDC directly funded community-based organization, Washington, DC
DC002	Deaf-REACH	CDC directly funded community-based organization, Washington, DC
DC003	Sasha Bruce Youthwork, Inc.	CDC directly funded community-based organization, Washington, DC
DC004	The Women's Collective	CDC directly funded community-based organization, Washington, DC
DC005	Us Helping Us, People into Living, Inc.	CDC directly funded community-based organization, Washington, DC
DC006	Washington Area Consortium on HIV Infection in Youth dba Metro Teen AIDS	CDC directly funded community-based organization, Washington, DC
DC007	La Clinica Del Pueblo, Inc.	CDC directly funded community-based organization, Washington, DC
FL001	Broward House	CDC directly funded community-based organization, Fort Lauderdale, FL
FL002	River Region Human Services	CDC directly funded community-based organization, Jacksonville, FL
FL003	Jacksonville Area Sexual Minority Youth Network	CDC directly funded community-based organization, Jacksonville, FL
FL004	EmpowerU	CDC directly funded community-based organization, Miami, FL
FL005	Community AIDS Resource dba Care Resource	CDC directly funded community-based organization, Miami, FL
FL006	Miracle of Love	CDC directly funded community-based organization, Orlando, FL
FL007	Comprehensive AIDS Program of Palm Beach County, Inc.	CDC directly funded community-based organization, Palm Springs, FL
FL008	Gay Lesbian Community Center of Greater Fort Lauderdale	CDC directly funded community-based organization, Wilton Manors, FL
FL009	Latinos Salud	CDC directly funded community-based organization, Wilton Manors, FL
FL010	Hope and Help Center of Central FL, Inc.	CDC directly funded community-based organization, Winter Park, FL
GA001	Saint Joseph's Mercy Care Services	CDC directly funded community-based organization, Atlanta, GA
GA002	AID Atlanta, Inc.	CDC directly funded community-based organization, Atlanta, GA
GA003	Positive Impact, Inc.	CDC directly funded community-based organization, Atlanta, GA
GA004	AID Gwinnett	CDC directly funded community-based organization, Duluth, GA
HI001	Life Foundation	CDC directly funded community-based organization, Honolulu, HI
IA001	AID Greater Des Moines, Inc. (AIDS Project of Central Iowa)	CDC directly funded community-based organization, Des Moines, IA
IL001	Access Community Health Network	CDC directly funded community-based organization, Chicago, IL
IL002	Center on Halsted (dba Horizon Community Services)	CDC directly funded community-based organization, Chicago, IL
IL003	Chicago House and Social Service Agency	CDC directly funded community-based organization, Chicago, IL
IL004	Christian Community Health Center	CDC directly funded community-based organization, Chicago, IL
IL005	Heartland Human Care Services	CDC directly funded community-based organization, Chicago, IL
IL006	Lester and Rosalie Anixter Center (dba CALOR)	CDC directly funded community-based organization, Chicago, IL
IL007	McDermott Center dba Haymarket Center	CDC directly funded community-based organization, Chicago, IL
IL008	Puerto Rico Center (Puerto Rican Cultural Center)	CDC directly funded community-based organization, Chicago, IL
IL009	South Side Help Center	CDC directly funded community-based organization, Chicago, IL
IL010	Taskforce Prevention and Community Services	CDC directly funded community-based organization, Chicago, IL
LA001	HIV/AIDS Alliance for Region Two	CDC directly funded community-based organization, Baton Rouge, LA
LA002	Brotherhood, Inc.	CDC directly funded community-based organization, New Orleans, LA

NHME Variables and Values

Num	Variable Name	
LA003	Institute of Women and Ethnic Studies	CDC directly funded community-based organization, New Orleans, LA
LA004	New Orleans AIDS Taskforce (NO/AIDS Task Force)	CDC directly funded community-based organization, New Orleans, LA
MA001	Boston Medical Center	CDC directly funded community-based organization, Boston, MA
MA002	Fenway Community Health Center	CDC directly funded community-based organization, Boston, MA
MA003	Justice Resource Institute, Inc.	CDC directly funded community-based organization, Boston, MA
MA004	Massachusetts Alliance of Portuguese Speakers (MAPS)	CDC directly funded community-based organization, Cambridge, MA
MA005	Whittier Street Health Services	CDC directly funded community-based organization, Roxbury, MA
MD001	Women Accepting Responsibility	CDC directly funded community-based organization, Baltimore, MD
MD002	Identity Inc.	CDC directly funded community-based organization, Gaithersburg, MD
ME001	Regional Medical Center at Lubec	CDC directly funded community-based organization, Lubec, ME
MI001	Teen Hype Youth Development Program	CDC directly funded community-based organization, Detroit, MI
MI002	Community Health Awareness Group	CDC directly funded community-based organization, Detroit, MI
MN001	Indigenous People Task Force	CDC directly funded community-based organization, Minneapolis, MN
MN002	Minnesota AIDS Project	CDC directly funded community-based organization, Minneapolis, MN
MO001	Kansas City Free Health Clinic	CDC directly funded community-based organization, Kansas City, MO
MO002	The Community Wellness Project	CDC directly funded community-based organization, St. Louis, MO
MS001	Building Bridges, Inc.	CDC directly funded community-based organization, Jackson, MS
MS002	My Brother's Keeper, Inc.	CDC directly funded community-based organization, Ridgeland, MS
NC001	Carolina Cares Partnership (formerly Regional HIV/AIDS Consortium)	CDC directly funded community-based organization, Charlotte, NC
NC002	Quality Home Care Services	CDC directly funded community-based organization, Charlotte, NC
NJ001	PROCEED	CDC directly funded community-based organization, Elizabeth, NJ
NJ002	Hyacinth, Inc. (dba Hyacinth AIDS Foundation)	CDC directly funded community-based organization, New Brunswick, NJ
NJ003	Newark Beth Israel Medical Center	CDC directly funded community-based organization, Newark, NJ
NJ004	Newark Community Health Centers	CDC directly funded community-based organization, Newark, NJ
NJ005	North Jersey AIDS Alliance dba North Jersey Community Research Initiative	CDC directly funded community-based organization, Newark, NJ
NY001	AIDS Council of Northeastern New York	CDC directly funded community-based organization, Albany, NY
NY002	Whitney M Young Jr. Health Services	CDC directly funded community-based organization, Albany, NY
NY003	Bronx AIDS Services, Inc.	CDC directly funded community-based organization, Bronx, NY
NY004	CitiWide Harm Reduction Program	CDC directly funded community-based organization, Bronx, NY
NY005	Montefiore Medical Center/Women's Center	CDC directly funded community-based organization, Bronx, NY
NY006	Brookdale University Hospital and Medical Center	CDC directly funded community-based organization, Brooklyn, NY
NY007	Brooklyn AIDS Task Force	CDC directly funded community-based organization, Brooklyn, NY
NY008	Lutheran Family Health Center Network of Luther Medical Center	CDC directly funded community-based organization, Brooklyn, NY
NY009	Wyckoff Heights Medical Center	CDC directly funded community-based organization, Brooklyn, NY
NY010	AIDS Community Services of Western New York	CDC directly funded community-based organization, Buffalo, NY
NY011	Long Island Association For AIDS Care	CDC directly funded community-based organization, Hauppauge, NY

NHME Variables and Values

Num	Variable Name	
NY012	AIDS Service Center of Lower Manhattan, Inc.	CDC directly funded community-based organization, New York, NY
NY013	Asian and Pacific Islander Coalition on HIV/AIDS, Inc.	CDC directly funded community-based organization, New York, NY
NY014	Community Health Project	CDC directly funded community-based organization, NEW YORK, NY
NY015	Exponents	CDC directly funded community-based organization, New York, NY
NY016	Foundation for Research on Sexually Transmitted Diseases (FROSTD)	CDC directly funded community-based organization, New York, NY
NY017	Gay Men's Health Crisis	CDC directly funded community-based organization, New York, NY
NY018	Harlem United Community AIDS Center	CDC directly funded community-based organization, New York, NY
NY019	Hispanic AIDS Forum	CDC directly funded community-based organization, New York, NY
NY020	Iris House A Center for Women Living with HIV	CDC directly funded community-based organization, New York, NY
NY021	Latino Commission on AIDS	CDC directly funded community-based organization, New York, NY
NY022	Planned Parenthood of New York City, Inc.	CDC directly funded community-based organization, New York, NY
NY023	Safe Horizon	CDC directly funded community-based organization, New York, NY
NY024	The Door - A Center for Alternatives, Inc.	CDC directly funded community-based organization, New York, NY
NY025	The Hetrick-Martin Institute	CDC directly funded community-based organization, New York, NY
NY026	The Partnership for the Homeless	CDC directly funded community-based organization, New York, NY
NY027	Community Health Action of Staten Island	CDC directly funded community-based organization, Staten Island, NY
NY028	The Sharing Community	CDC directly funded community-based organization, Yonkers, NY
OH001	Columbus AIDS Task Force (dba AIDS Resource Center Ohio)	CDC directly funded community-based organization, Columbus, OH
OK001	Guiding Right, Inc.	CDC directly funded community-based organization, Midwest City, OK
OR001	Cascade AIDS Project	CDC directly funded community-based organization, Portland, OR
PA001	AIDS Care Group	CDC directly funded community-based organization, Chester, PA
PA002	Family Planning Council	CDC directly funded community-based organization, Philadelphia, PA
PA003	Mazzoni Center	CDC directly funded community-based organization, Philadelphia, PA
PA004	Philadelphia Fight	CDC directly funded community-based organization, Philadelphia, PA
PA005	Public Health Management Corp dba Philadelphia Health Management	CDC directly funded community-based organization, Philadelphia, PA
PA006	The Philadelphia AIDS Consortium	CDC directly funded community-based organization, Philadelphia, PA
PR001	Corporacion de Salud Y Medicina Avanzada (COSSMA)	CDC directly funded community-based organization, Cidra, PR
PR002	Estancia Corazon (Program Fondita)	CDC directly funded community-based organization, Mayague, PR
PR003	Migrant Health Center, Western Region, Inc.	CDC directly funded community-based organization, Mayaguez, PR
PR004	ASPIRA of Puerto Rico	CDC directly funded community-based organization, San Juan, PR
PR005	COAI, Inc.	CDC directly funded community-based organization, San Juan, PR
PR006	Puerto Rico Community Network for Clinical Research on AIDS (PR CONCRA)	CDC directly funded community-based organization, San Juan, PR
SC001	Palmetto AIDS Life Support Services of SC, Inc.	CDC directly funded community-based organization, Columbia, SC
SC002	South Carolina HIV/AIDS Council	CDC directly funded community-based organization, Columbia, SC
TN001	Women on Maintaining Education and Nutrition	CDC directly funded community-based organization, Nashville, TN
TX001	AIDS Services of Austin, Inc.	CDC directly funded community-based organization, Austin, TX
TX002	The Wright House Wellness Center	CDC directly funded community-based organization, Austin, TX

Num	Variable Name	
TX003	Coastal Bend AIDS Foundation	CDC directly funded community-based organization, Corpus Christi,
TX004	Abounding Prosperity Inc.	CDC directly funded community-based organization, DALLAS, TX
TX005	AIDS Arms, Inc.	CDC directly funded community-based organization, Dallas, TX
TX006	Parkland Health and Hospital System	CDC directly funded community-based organization, Dallas, TX
TX007	Urban League of Greater Dallas, Inc.	CDC directly funded community-based organization, Dallas, TX
TX008	AIDS Foundation Houston, Inc.	CDC directly funded community-based organization, Houston, TX
TX009	Change Happens (formerly Families Under Urban and Social Attack, Inc.)	CDC directly funded community-based organization, Houston, TX
TX010	Houston Area Community Services, Inc. (HACS)	CDC directly funded community-based organization, Houston, TX
TX011	Legacy Community Health Services, Inc.	CDC directly funded community-based organization, Houston, TX
TX012	St. Hope Foundation	CDC directly funded community-based organization, Houston, TX
TX013	South Texas Council on Alcohol and Drug Abuse	CDC directly funded community-based organization, Laredo, TX
TX014	Beat AIDS Coalition Trust	CDC directly funded community-based organization, San Antonio, TX
VA001	Candii Inc.	CDC directly funded community-based organization, Norfolk, VA
VI001	Virgin Islands Community AIDS Resource & Education (VICARE)	CDC directly funded community-based organization, Christiansted, VI
VI002	Helping Others in a Positive Environment, Inc. (HOPE)	CDC directly funded community-based organization, St. Thomas, VI
WA001	Neighborhood House	CDC directly funded community-based organization, Seattle, WA
WA002	People of Color Against AIDS Network	CDC directly funded community-based organization, Seattle, WA
WI001	Diverse and Resilient, Inc.	CDC directly funded community-based organization, Milwaukee, WI

Table: S   Site Information

A site is a facility or non-facility based setting (e.g. park, street corner), which serves as a point of service delivery. If an agency has multiple sites, this table is completed for each site. However, if an agency has multiple sites with the same zip code that are of the same site type, the agency may use a single site name and ID for the encompassing locations. For example, a mobile van that rotates to several sites within the same zip code.

Num	Variable Name	
S01	**Site ID**	XSD (Schema) Name: **siteId**

Value Option: N/A   Format Type: **Alpha-Numeric**   Min Length: **1**   Max Length: **12**

Definition: A unique code used to distinguish the locations where an agency delivers the HIV prevention service. A site ID is linked to the site type and the site zip code, and is unique to an agency. For Partner services (PS) the Site ID distinguishes between the agency site locations and should identify the locality where the PS case is assigned (i.e, the county health department).

Instructions: Indicate the unique ID that will be used to link prevention services delivered by a particular agency to a specific geographic area and type of setting. If using EvaluationWeb for direct key entry, this ID may be generated for you.

If a mobile van is used, an agency may assign the same ID to sites that are of the same type AND located within the same zip code (e.g., all churches in 39126).

Business rules Required for HIV testing, partner services and non-testing non-partner services.

The agency defined in Table A must also be a site defined in Table S.

NHME Variables and Values

Num	Variable Name		
S04	**Site Type**	XSD (Schema) Name:	**siteTypeValueCode**

Value Option: Choose only one **Format Type: Alpha-Numeric** **Min Length: 3** **Max Length: 6**

Definition: The setting of the location in which HIV prevention services are provided. For HIV testing, CDC will assume that testing done in a clinical (or health care) setting is part of a screening program and that testing done in a non-clinical (or non-health care) setting is part of a targeted testing strategy. For PS, this is the type of local agency to which the PS case is assigned.

Instructions: Select the site type from the list provided that best represents the setting and/or primary type of services offered at this site of service delivery. You can only choose one site type.

Business rules Required for HIV testing, partner services and non-testing non-partner services.

Code	Value Description	Value Definition
F01.01	Clinical - Inpatient hospital	A health facility that provides medical care to patients that reside within that facility while they are receiving those services.
F02.12	Clinical - TB clinic	A non-residential health care facility that specializes in the provision of tuberculosis treatment, care and prevention services.
F02.19	Clinical - Substance abuse treatment facility	A non-residential health care facility that provides alcohol and chemical dependency treatment services.
F02.51	Clinical - Community health center	A non-residential health care facility that provides primary and preventative health care services to the members of a community in which it is located.
F03	Clinical - Emergency department	A section of a hospital or clinic staffed and equipped to provide emergency care to persons requiring immediate medical treatment for sudden illness or trauma.
F04.05	Non-clinical - HIV testing site	A facility or non-facility based setting where HIV prevention counseling and testing services are provided.
F06.02	Non-clinical - Community setting - School/educational facility	A building or place where individuals receive knowledge through learning and instruction.
F06.03	Non-clinical - Community setting - Church/mosque/synagogue/temple	A building where a group of people who adhere to a common faith gather for prayer.
F06.04	Non-clinical - Community Setting - Shelter/transitional housing	A building or facility that provides supportive housing temporarily or may be used to facilitate the movement of homeless individuals and families to permanent housing.
F06.05	Non-clinical - Community setting - Commercial facility	A business or commercial facility (e.g., beauty salon, grocery store, shopping center) where HIV prevention services may also occur.
F06.07	Non-clinical - Community setting - Bar/club/adult entertainment	A place of entertainment, typically open at night, usually serves food and alcoholic beverages, and often provides music and space for dancing or having a floor show which may depict, describe, or relate to sexual conduct or sexual excitement.
F06.08	Non-clinical - Community setting - Public area	An area, environment or context that is open to the community as a whole such as a park or city street.
F06.12	Non-clinical – Community setting – Individual residence	An individual's home or place of residence.
F06.88	Non-clinical - Community setting - Other	A defined area, environment or context (other than those already specified) in which a group of people live, work or congregate.
F07	Non-clinical - Correctional facility - Non-healthcare	A penal or correctional facility, prison, jail detention center, community-based rehabilitation center, or any similar institution designed for the confinement or rehabilitation of criminal offenders

Num	Variable Name	
F08	Clinical - Primary care clinic (other than CHC)	A health care facility in which medical care is provided by a clinician to a patient as part of regular, ambulatory care, and sometimes followed by referral to other medical providers.
F09	Clinical - Pharmacy or other retail-based clinic	A health care facility or business in which prescription and non-prescription drugs and/or medical equipment are dispensed. Primary care clinical services may be provided by a practicing nurse or pharmacist at the facility.
F10	Clinical - STD clinic	A health care facility in which sexual health is specialized in the prevention and treatment of sexually transmitted infections.
F11	Clinical - Dental clinic	A health care facility in which care is provided for dental patients. The facility may provide various treatments for the teeth, e.g. cleaning, X-rays, fillings, extractions, and root canal surgery.
F12	Clinical - Correctional facility clinic	An area within a penal or correctional facility, , including adult or juvenile detention facilities, that provides medical or health services.
F13	Clinical - Other	A health care facility where medical services are provided, other than those specified.
F14	Non-clinical - Health department - field visit	Services are provided in an unspecified location away from the clinician's usual place of business, except for Correctional Institution, Inpatient, or Residential Care for adults or children. An example may be the clients' home or place of employment.
F15	Non-clinical - Community Setting - Syringe exchange program	A facility or center where clients may exchange used hypodermic needles for sterile needles.
F88	Non-clinical - Other	A site where prevention services are conducted other than those specified above.

S08   **Site - County**   **XSD (Schema) Name:** **siteCounty**

Value Option: **Choose only one**   **Format Type:** **Alpha-Numeric**   **Min Length:** **3**   **Max Length:** **3**

Definition: The county, parish, or municipality where the agency's site of service delivery is physically located.

Instructions: Indicate the FIPS code of the county where the site of service delivery is physically located. Note: Site County FIPS codes are unique within a jurisdiction.

Business rules   Required for HIV testing and non-testing non-partner services. Not allowed for partner services.

NHME Variables and Values

Num	Variable Name		
S09	**Site - State**	XSD (Schema) Name:	**siteState**

Value Option: Choose only one   **Format Type:** Number   **Min Length:** 2   **Max Length:** 2

Definition: The state, territory or district in which the official mailing address for the site is physically located.

Instructions: Select the value code for the name of the state, territory or district where the site you entered for variable S03: Site Name is located. This must represent one of the 50 states, the District of Columbia, the U.S. Virgin Islands, or Puerto Rico.

Business rules Required for HIV testing and non-testing non-partner services. Not required for partner services.

Code	Value Description	Value Definition
1	AL	Alabama
10	DE	Delaware
11	DC	District of Columbia
12	FL	Florida
13	GA	Georgia
15	HI	Hawaii
16	ID	Idaho
17	IL	Illinois
18	IN	Indiana
19	IA	Iowa
2	AK	Alaska
20	KS	Kansas
21	KY	Kentucky
22	LA	Louisiana
23	ME	Maine
24	MD	Maryland
25	MA	Massachusetts
26	MI	Michigan
27	MN	Minnesota
28	MS	Mississippi
29	MO	Missouri
30	MT	Montana
31	NE	Nebraska
32	NV	Nevada
33	NH	New Hampshire
34	NJ	New Jersey
35	NM	New Mexico
36	NY	New York

NHME Variables and Values

Num	Variable Name	
37	NC	North Carolina
38	ND	North Dakota
39	OH	Ohio
4	AZ	Arizona
40	OK	Oklahoma
41	OR	Oregon
42	PA	Pennsylvania
44	RI	Rhode Island
45	SC	South Carolina
46	SD	South Dakota
47	TN	Tennessee
48	TX	Texas
49	UT	Utah
5	AR	Arkansas
50	VT	Vermont
51	VA	Virginia
53	WA	Washington
54	WV	West Virginia
55	WI	Wisconsin
56	WY	Wyoming
6	CA	California
60	AS	American Samoa
64	FM	Federated States of Micronesia
66	GU	Guam
68	MH	Marshall Islands
69	MP	Northern Mariana Islands
70	PW	Palau
72	PR	Puerto Rico
78	VI	Virgin Islands of the U.S.
8	CO	Colorado
9	CT	Connecticut

NHME Variables and Values

Num	Variable Name				
S10	**Site - Zip Code**		**XSD (Schema) Name:**	**zip**	

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 5**   **Max Length: 10**

Definition: The postal zip code associated with the site where services are provided. The site's postal zip code is linked to the unique Site ID and Site Type. For PS, this is the zip code of the local agency to which the case is assigned.

Instructions: Enter the postal zip code for the site of service delivery.

Business rules   Required for HIV testing, partner services and non-testing non-partner services.

Code	Value Description	Value Definition
	#####-####	*Only the 5 digit zip code is mandatory.*

Num	Variable Name				
S18	**Site Status**		**XSD (Schema) Name:**	**siteStatus**	

Value Option: Choose only one   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 1**

Definition: The variable is used to capture any changes to the local agency to which the PS case is assigned.

Instructions: Select the appropriate option if changes have been made to the local agency to which the PS case is assigned.

Business rules   Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
D	Deleted Site	*Deleted Site (implies that the grantee has deleted the site and all associated information and that CDC should also delete)*
N	New Site	*New Site (implies new SITE_ID and SITE_TYPE and all other site related variables).*
U	Updated Site	*Updated Site information (implies that grantee has updated some information to one of the fields associated with the site).*

NHME Variables and Values

Client Level

Table: CDC	CDC Use Variables

This table is for CDC use only. All variables are defined by the CDC for grantee use.

Num   *Variable Name*

CDC03   **CDC Variable 3**   **XSD (Schema) Name:** **CDCVariable3**

Value Option: TBD   **Format Type:** **Alpha-Numeric**   **Min Length:** **1**   **Max Length:** **8**

Definition: This field is reserved for use within the MSM Testing Initiative Project. The specifications are to be determined (TBD).

Instructions: TBD

Business rules   Required for HIV testing within the MSM testing initiative project. Not allowed for partner services or non-testing non-partner services.

CDC04   **CDC Variable 4**   **XSD (Schema) Name:** **CDCVariable4**

Value Option: TBD   **Format Type:** **Alpha-Numeric**   **Min Length:** **1**   **Max Length:** **8**

Definition: This field is reserved for use within the MSM Testing Initiative Project. The specifications are to be determined (TBD).

Instructions: TBD

Business rules   Required for HIV testing within the MSM testing initiative project. Not allowed for partner services or non-testing non-partner services.

CDC05   **CDC Variable 5**   **XSD (Schema) Name:** **CDCVariable5**

Value Option: TBD   **Format Type:** **Alpha-Numeric**   **Min Length:** **1**   **Max Length:** **8**

Definition: This field is reserved for use within the MSM Testing Initiative Project. The specifications are to be determined (TBD).

Instructions: TBD

Business rules   Required for HIV testing within the MSM testing initiative project. Not allowed for partner services or non-testing non-partner services.

CDC06   **CDC Variable 6**   **XSD (Schema) Name:** **CDCVariable6**

Value Option: TBD   **Format Type:** **TBD**   **Min Length:** **TBD**   **Max Length:** **TBD**

Definition: TBD

Instructions: TBD

Business rules

NHME Variables and Values

Num	Variable Name			
CDC07	**CDC Variable 7**		XSD (Schema) Name:	**CDCVariable7**

Value Option: TBD **Format Type: TBD** **Min Length: TBD** **Max Length: TBD**

Definition: TBD

Instructions: TBD

Business rules

Num	Variable Name			
CDC08	**CDC Variable 8**		XSD (Schema) Name:	**CDCVariable8**

Value Option: TBD **Format Type: TBD** **Min Length: TBD** **Max Length: TBD**

Definition: TBD

Instructions: TBD

Business rules

Table: G1   Client Characteristics-Demographic

This table is required to be completed by all agencies that provide HIV prevention interventions or services individually to clients (e.g., HIV testing). It is also required for most effective behavioral interventions delivered to groups and some outreach.

Num	Variable Name			
G101	**Date Client Demographic Data Collected**		XSD (Schema) Name:	**collectedDateForClient**

Value Option: N/A **Format Type: MM/DD/YYYY** **Min Length: 10** **Max Length: 10**

Definition: The date on which client demographic data are collected. For reporting to CDC, this should be the intake date or the date of the first session before the intervention begins.

Instructions: Enter the date that client demographic data are collected. This should be the intake date or the date of the first session before the intervention begins.

Business rules Required for partner services and non-testing non-partner services. Not allowed for HIV testing.

Cannot be greater than the current date at the time of data entry.

Num	Variable Name			
G103	**Local Client ID**		XSD (Schema) Name:	**localClientId**

Value Option: N/A **Format Type: Alpha-Numeric** **Min Length: 1** **Max Length: 12**

Definition: A locally developed client unique key used to distinguish an individual client receiving multiple services within an agency.

Instructions: This code can be shared and used by more than one agency throughout a city, territory or state. This code should not contain personal information that is organized in a way that can be easily deciphered (e.g., birth date, month and year).

Business rules Required for partner services and non-testing non-partner services. Not allowed for HIV testing.

This ID must be unique for each client. At a minimum this ID needs to be unique w/in an agency, but may be unique across agencies.

NHME Variables and Values

Num	Variable Name			
G112	**Date of Birth - Year**	**XSD (Schema) Name:**	**birthYear**	

Value Option: N/A   **Format Type: Number**   **Min Length: 4**   **Max Length: 4**

Definition: The calendar year in which the client was born.

Instructions: Enter the year in which the client was born. If birth year is unknown, enter 1800.

Business rules   Required for HIV testing, partner services and non-testing non-partner services.

Value must be ≥ 1900 or 1800 if birth year is unknown.

Num	Variable Name			
G114	**Ethnicity**	**XSD (Schema) Name:**	**ethnicity**	

Value Option: Choose only one   **Format Type: Alpha-Numeric**   **Min Length: 2**   **Max Length: 2**

Definition: The client's self report of whether they are of Hispanic or Latino origin. Standard OMB ethnicity codes are applied.

Instructions: Indicate whether the client reported that he or she is or is not Hispanic or Latino.

Business rules   Required for HIV testing, partner services and non-testing non-partner services.

Code	Value Description	Value Definition
66	Not asked	The client was not asked to report his or her ethnicity.
77	Declined to answer	The client declines or is unwilling to report his or her ethnicity.
99	Don't know	The client reports that he or she is unaware of his or her ethnicity.
E1	Hispanic or Latino	A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
E2	Not Hispanic or Latino	A person not identified by the definition of Hispanic or Latino.

NHME Variables and Values

Num	Variable Name		
G116	**Race**	**XSD (Schema) Name:**	**raceValueCode**

Value Option: Choose all that apply   **Format Type: Alpha-Numeric**   **Min Length: 2**   **Max Length: 2**

Definition: A client's self-reported classification or classifications of the biological heritage with which they most closely identify. Standard OMB race codes are applied.

Instructions: Indicate the client's self-reported race(s) using standard OMB race codes. Record all race categories that the client reports.

Business rules Required for HIV testing, partner services and non-testing non-partner services.
Multiple value codes may be selected if value code ≠ 66 or 77 or 99. If value= 66 or 77 or 99, other values may not be selected.

Code	Value Description	Value Definition
66	Not asked	The client was not asked to report his or her race.
77	Declined to answer	The client declines or is unwilling to report his or her race.
99	Don't know	The client reports that he or she is unaware of their race.
R1	American Indian or Alaska Native	A person having origins in any of the original peoples of North or South America (including Central America), and who maintains tribal affiliation or community attachment.
R2	Asian	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
R3	Black or African American	A person having origins in any of the black racial groups of Africa.
R4	Native Hawaiian or Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
R5	White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

NHME Variables and Values

Num	Variable Name			
G120	State/Territory of Residence	XSD (Schema) Name:	stateOfResidence	

Value Option: Choose only one **Format Type:** Number **Min Length:** 2 **Max Length:** 2

Definition: The state, territory or district where the client was residing at the time of service delivery.

Instructions: Select the value code for the state, territory or district where the client lives at the time services are delivered. In some cases, where the client lives may not be the same as where the client is receiving HIV prevention services. For example, a person could reside in one state (or jurisdiction) but drive to another state to receive HIV testing out of fear of having their privacy or confidentiality exposed.

Business rules Required for HIV testing, partner services and non-testing non-partner services.

Code	Value Description	Value Definition
1	AL	Alabama
10	DE	Delaware
11	DC	District of Columbia
12	FL	Florida
13	GA	Georgia
15	HI	Hawaii
16	ID	Idaho
17	IL	Illinois
18	IN	Indiana
19	IA	Iowa
2	AK	Alaska
20	KS	Kansas
21	KY	Kentucky
22	LA	Louisiana
23	ME	Maine
24	MD	Maryland
25	MA	Massachusetts
26	MI	Michigan
27	MN	Minnesota
28	MS	Mississippi
29	MO	Missouri
30	MT	Montana
31	NE	Nebraska
32	NV	Nevada
33	NH	New Hampshire
34	NJ	New Jersey
35	NM	New Mexico

NHME Variables and Values

Num	Variable Name	
36	NY	New York
37	NC	North Carolina
38	ND	North Dakota
39	OH	Ohio
4	AZ	Arizona
40	OK	Oklahoma
41	OR	Oregon
42	PA	Pennsylvania
44	RI	Rhode Island
45	SC	South Carolina
46	SD	South Dakota
47	TN	Tennessee
48	TX	Texas
49	UT	Utah
5	AR	Arkansas
50	VT	Vermont
51	VA	Virginia
53	WA	Washington
54	WV	West Virginia
55	WI	Wisconsin
56	WY	Wyoming
6	CA	California
60	AS	American Samoa
64	FM	Federated States of Micronesia
66	GU	Guam
68	MH	Marshall Islands
69	MP	Northern Mariana Islands
70	PW	Palau
72	PR	Puerto Rico
78	VI	Virgin Islands of the U.S.
8	CO	Colorado
88	Other	Client does not currently reside in a US state, territory, or district.
9	CT	Connecticut

NHME Variables and Values

Num	Variable Name		
G123	**Assigned Sex at Birth**	**XSD (Schema) Name:**	**birthGenderValueCode**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The biological sex assigned to the client at birth, (i.e., the sex noted on the client's birth certificate).

Instructions: Indicate whether the client reports being born a male or female (i.e., born with male or female genitalia).

Business rules   Required for HIV testing, partner services and non-testing non-partner services.

Code	Value Description	Value Definition
1	Male	*The sex that produces spermatozoa by which female ova are fertilized.*
2	Female	*The sex that produces ova, can conceive and bear offspring/children.*
66	Not asked	*The client was not asked to report his or her assigned sex at birth.*
77	Declined to answer	*The client declines or is unwilling to report his or her assigned sex at birth.*

Num	Variable Name		
G124	**Current Gender Identity**	**XSD (Schema) Name:**	**currentGenderValueCode**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client's current self-reported gender identity. This may include one's social status, self-identification, legal status, and biology.

Instructions: Select the value that most closely describes the client's current, self-reported gender identity.

Business rules   Required for HIV testing, partner services and non-testing non-partner services.

Code	Value Description	Value Definition
1	Male	*A person who identifies as a male and whose behavioral, cultural, or psychological traits are typically associated with the male sex.*
2	Female	*A person who identifies as a female and whose behavioral, cultural, or psychological traits are typically associated with the female sex.*
3	Transgender - MTF	*Individuals whose physical or birth sex is male but whose gender expression and/or gender identity is female. MTF = male to female.*
4	Transgender - FTM	*Individuals whose physical or birth sex is female but whose gender expression and/or gender identity is male. FTM = female to male.*
5	Transgender - Unspecified	*Individuals whose physical or birth sex is male or female but whose gender expression and/or gender identity differs from that which was documented at birth.*
66	Not asked	*The client was not asked to report his or her current gender.*
77	Declined to answer	*The individual declines to self report his or her current gender identity.*
89	Additional (specify)	*The individual reports a current gender other than those specified above.*

NHME Variables and Values

Num	Variable Name		
G124a	**Specify Current Gender Identity**	**XSD (Schema) Name:**	**otherCurrentGender**

Value Option: N/A   **Format Type:** **Alpha-Numeric**   **Min Length:** 1   **Max Length:** 50

Definition:	The additional specification of Current Gender Identity if G124 = 89 "Additional (specify)".
Instructions:	Specify the current gender identity if G124 = 89 "Additional (specify)".
Business rules	Required for HIV testing, partner services and non-testing non-partner services. Required only if current gender is 'Additional specify' (currentGenderValueCode = 89). Not allowed if current gender isn't 'Additional specify'.

G132	**Client - County**	**XSD (Schema) Name:**	**clientCounty**

Value Option: N/A   **Format Type:** **Alpha-Numeric**   **Min Length:** 3   **Max Length:** 3

Definition:	The county, parish, or municipality of the client's locating address.
Instructions:	Enter the three-digit FIPS code of the county where the client's address is located.
Business rules	Required for HIV testing and non-testing non-partner services. Not allowed for partner services.

G134	**Client - Zip Code**	**XSD (Schema) Name:**	**clientZipCode**

Value Option: N/A   **Format Type:** **Alpha-Numeric**   **Min Length:** 5   **Max Length:** 10

Definition:	The postal zip code for the client's locating address.
Instructions:	Enter the postal zip code of the client's locating address.
Business rules	Required for HIV testing and non-testing non-partner services.
	Not allowed for partner services.

Code	Value Description	Value Definition
	#####-####	*Only the 5 digit zip code is mandatory.*

NHME Variables and Values

Table: G2   Client Characteristics-Risk Profile

This table is required to be completed by all agencies when data are collected on individual clients. This could be part of interventions or services delivered individually (e.g., HIV testing), or delivered in groups as part of effective behavioral interventions.

Num	*Variable Name*

G200   **Date Client Risk Collected**   XSD (Schema) Name: **dateCollectedForRiskProfile**

Value Option: N/A   **Format Type: MM/DD/YYYY**   **Min Length: 10**   **Max Length: 10**

Definition: The date client risk profile data are collected. For reporting to CDC, this should be the intake date or the date of the first session before the intervention begins.

Instructions: Enter the date on which these risk profile data are collected. This should be the intake date or the date of the first session before the intervention begins.

Business rules   Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

The client risk profile date collected must be equal or great than Case open date. Date collected cannot be greater than the date of file submissiom to CDC.

G204   **Previous HIV Test**   XSD (Schema) Name: **previousHivTestValueCode**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client's self-report of having had at least one prior HIV test.

Instructions: Indicate if the client reports having at least one prior HIV test.

Business rules   Required for HIV testing and non-testing non-partner services. Not allowed for partner services.

Code	Value Description	Value Definition
0	*No*	*The client reports that he or she has never had an HIV test.*
1	*Yes*	*The client reports that he or she has had at least one previous HIV test.*
66	*Not asked*	*The provider did not ask the client about having a prior HIV test.*
77	*Declined to answer*	*The client declines or is unwilling to report if he or she has had a previous HIV test.*
99	*Don't know*	*The client reports that he or she is unaware if he or she has had a previous HIV test.*

NHME Variables and Values

Num	Variable Name		
G205	**Self-Reported HIV Test Result**	XSD (Schema) Name:	**hivStatusValueCode**

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 2**

Definition: The client's self-reported result from his/her most recent HIV test.

Instructions: If the client reports having had a previous HIV test (i.e. G204: Previous HIV Test = "Yes"), then indicate the client's self-reported HIV test result. When asking about the "Self-Reported Test Result" it is very important to ask about the test result from the most recent HIV test because that will reflect the client's current HIV serostatus. Ensure that the client understands that he or she is being asked to report his or her test results and not what he or she believes their status is to be.

Business rules Required for HIV testing and non-testing non-partner services. Required only if previous HIV test was done (previousHivTestValueCode = 1).

Not allowed if previous HIV test wasn't done (previousHivTestValueCode=0) or client doesn't know (=99), wasn't asked (=66) or declined to answer (=77). Not allowed for partner services.

Code	Value Description	Value Definition
1	Positive	The client reports that his or her HIV serostatus is positive based on a confirmatory test result.
2	Negative	The client reports that his or her HIV serostatus is negative based on a negative test result.
3	Preliminary positive	The client reports that he or she received either a "Preliminary positive" test result (i.e., the client had a reactive HIV rapid test but did not receive the results of the associated conventional confirmatory test).
4	Indeterminate	The client reports that he or she received an "Indeterminate" test result (i.e., the client received results but those results did not conclusively indicate whether he or she is HIV-positive or HIV-negative).
66	Not asked	The provider did not ask the client about his or her HIV serostatus.
77	Declined to answer	The client declines or is unwilling to report his or her HIV serostatus.
99	Don't know	The client reports that he or she is unaware of his or her HIV serostatus.

NHME Variables and Values

Num	Variable Name		
G209	**Pregnant (Only If Female)**	**XSD (Schema) Name:**	**pregnantStatusValueCode**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The self-reported pregnancy status of the client.

Instructions: If the client is female and HIV positive, then indicate whether she is pregnant.

Business rules   Required for HIV testing. Required only for birth gender females (birthGenderValueCode = 2) with a confirmed positive HIV test (testTechnology=1 or 4 or 88 AND testResultValueCode=01) or preliminarily positive HIV test (teshTechnology=2 AND testResultValueCode=1).

Not allowed for birth gender males (birthGenderValueCode = 1) or birth gender females without a positive HIV test (birthGenderValueCode=2 AND currentTestValueCode not 01).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*The client reports she is not pregnant.*
1	Yes	*The client reports she is pregnant.*
66	Not asked	*The provider did not ask the client if she was currently pregnant.*
77	Declined to answer	*The client declines or is unwilling to report if she is currently pregnant.*
99	Don't know	*The client reports that she is unaware if she is currently pregnant.*

NHME Variables and Values

Num	Variable Name		
G210	**In Prenatal Care (Only if Pregnant)**	**XSD (Schema) Name:**	**prenatalCareStatusValueCode**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The self-reported status of the pregnant client's receipt of regular health care during pregnancy.

Instructions: If the client is pregnant (G209: Pregnant = "Yes"), indicate whether she is receiving prenatal care.

Business rules Required for HIV testing. Required only for pregnant females (pregnantStatusValueCode=1).

Not allowed for birth gender males (birthGenderValueCode=1), birth gender females without a positive HIV test (birthGenderValueCode=2 AND testResultValueCode not 1), or non-pregnant birth gender females with a positive HIV test (pregnantStatusValueCode not 1).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*The client reports she is not currently receiving prenatal care.*
1	Yes	*The client reports she is currently receiving prenatal care.*
66	Not asked	*The provider did not ask the client if she was currently receiving prenatal care.*
77	Declined to answer	*The client declines or is unwilling to report if she is currently receiving prenatal care.*
99	Don't know	*The client reports that she is unaware if she is currently receiving prenatal care.*

NHME Variables and Values

Num	Variable Name		
G211_01	**Injection Drug Use**	**XSD (Schema) Name:**	**injectionDrugUse**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client self-reported use in the past 12 months any illicit injection drugs/substances (including narcotics, hormones, silicon, etc.). Illicit injection drugs/substances are those for which a client does not have a prescription (or which the client uses in a way other than is prescribed) or drugs/substances that are not available over the counter (or which are used in a way other than intended).

Instructions: Indicate if the client reported having used injection drugs within the last 12 months.

Business rules Required for HIV testing, partner services and non-testing non-partner services. Required only if a client behavioral risk profile was collected (ClientRiskProfile = 1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77).

Code	Value Description	Value Definition
0	*No*	*Client indicates that he/she did not engage in illicit injection drug use in the past 12 months.*
1	*Yes*	*Client indicates that he/she engaged in illicit injection drug use in the past 12 months.*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if illicit injection drugs were used in the last 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G211_08	**Share Drug Injection Equipment**	XSD (Schema) Name:	**shareDrugInjectionEquipment**

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 2**

Definition: The client self-reported whether or not he/she shared hypodermic needles, syringes, or other injection equipment within the last 12-months. This variable should only be completed if client has reported injection drug use (i.e., G211_01 Injection Drug Use = "Yes").

Instructions: Indicate if the client reported sharing hypodermic needles, syringes, or other injection drug equipment within the last 12 months.

Business rules Required for HIV testing, partner services and non-testing non-partner services. Required only if client reported injection drug use (injectionDrugUse=1).

Not allowed if a client reported no injection drug use (injectionDrugUse=0) or doesn't know if injection drugs were used (injectionDrugUse=99). Not allowed if client reported no behavioral risk factors (clientRiskProfile=5), wasn't asked (clientRiskProfile=66) or declined to discuss behavioral risk factors (clientRiskProfile=77).

Code	Value Description	Value Definition
0	*No*	*Client indicates injection drug equipment wasn't shared in the past 12 months.*
1	*Yes*	*Client indicates injection drug equipment was shared in the past 12 months.*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if injection drug equipment was shared in the last 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G212	**Additional Client Risk Factors**	**XSD (Schema) Name:**	**additionalClientRiskFactors**

Value Option: **Choose all that apply**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **2**

Definition: If the client's risk factors in the past 12 months involve anal or vaginal sexual activity, these are additional factors that further describe the client's sexual risk for HIV exposure and/or transmission.

Instructions: Complete this variable if the client reported anal or vaginal sex with male, female, or transgender individual(s) in the variables G216a, G216b or G216c: Vaginal or Anal Sex in the past 12 months. Note, these values are not stratified by gender of the client's partner.

Business rules   Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (ClientRiskProfile=1) and risks in the pre-specified categories were not reported (withMale ne 1 AND withFemale ne 1 AND withTransgender ne 1 AND withMaleWithoutCondom ne 1 AND withFemaleWithoutCondom ne 1 AND withTransgenderWithoutCondom ne 1 and withMaleIDU ne 1 and withFemaleIDU ne 1 and withTransgenderIDU ne 1 and withMaleHIVPositive ne 1 AND withFemaleHIVPositive ne 1 and withTransgenderHIVPositive ne 1 AND injectionDrugUse ne 1 AND (currentGenderValueCode = 2 or 3 AND vaginalOrAnalSexWithMsm ne 1)).

Allowed, but not required, if a client risk profile was completed (clientRiskProfile=1) and risks in the pre-specified categories were reported.

Not allowed if a client reported no behavioral risk factors (clientRiskProfile=5), client wasn't asked about risk factors (clientRiskProfile=66) or client declined to discuss risk factors (clientRiskProfile=77).

Not allowed for partner services.

Code	Value Description	Value Definition
1	*Exchange sex for drugs/money/or something they needed*	*The client participated in sex events in exchange for drugs or money or something they needed.*
12	*Diagnosed with a sexually transmitted disease (STD)*	*The client has been diagnosed with a sexual transmitted disease in the past 12 months (e.g. syphilis, gonorrhea, or Chlamydia).*
13	*Sex with multiple partners*	*The client indicates that he/she has had sex with more than one partner during the past 12 months.*
14	*Oral Sex (optional)*	*The client has had oral sex during the past 12 months.*
15	*Unprotected vaginal/anal sex with a person who is an IDU*	*The client has had unprotected (without a condom) vaginal/anal sex with a person who is an IDU during the past 12 months.*
16	*Unprotected vaginal/anal sex with a person who is HIV positive*	*The client has had unprotected (without a condom) vaginal/anal sex with a person who is HIV positive during the past 12 months.*
17	*Unprotected vaginal/anal sex in exchange for drugs/money/or something they needed*	*The client participated in unprotected (without a condom) vaginal/anal sex events in exchange for drugs or money or something they needed.*
18	*Unprotected vaginal/anal sex with person who exchanges sex for drugs/money*	*The client has had unprotected (without a condom) vaginal/anal sex with a person who he or she knows exchanges sex for drugs/money.*
19	*Unprotected sex with multiple partners*	*The client indicates that he/she has had unprotected (without a condom) vaginal/anal sex with more than one partner during the past 12 months.*
2	*While intoxicated and/or high on drugs*	*The client used alcohol and/or illicit drugs before and/or during sex.*
5	*With person of unknown HIV status*	*The client has had sex with a person whose HIV status is unknown to either the client or to the partner.*
6	*With person who exchanges sex for drugs/money*	*The client has had a sex with a person who he or she knows exchanges sex for drugs/money.*

Num	Variable Name	
8	*With anonymous partner*	*The client has had sex with a person whose identity was unknown to the client. A person's identity is a set of behavioral or personal characteristics by which that person is known. This can include information about a person's name, address, and habits that allow the client to identify the person.*

G216a   **Vaginal or Anal Sex with a Male**

XSD (Schema) Name: **withMale**

Value Option: **Choose only one**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **2**

Definition: The client self-reported having vaginal or anal sex with a male in the past 12 months.

Instructions: Indicate if the client reported vaginal or anal sex in the past 12 months with a male.

Business rules   Required for HIV testing, partner services, and non-testing non-partner services. Required only if a client behavioral risk profile was collected (ClientRiskProfile=1).

If client was asked but no behavioral risks were identified (clientRiskProfile=5) then set to 0.

Not allowed if client wasn't asked or declined to discuss behavioral risks (clientRiskProfile= 66 or 77).

Code	Value Description	Value Definition
0	*No*	*Client indicates that he or she did not have vaginal or anal sex with a male in the past 12 months.*
1	*Yes*	*Client indicates that he or she had vaginal or anal sex with a male in the past 12 months.*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a male in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G216b	**Vaginal or Anal Sex with a Female**	XSD (Schema) Name:	**withFemale**

Value Option: Choose only one   **Format Type:** Number   **Min Length:** 1   **Max Length:** 2

Definition: The client self-reported having vaginal or anal sex with a female in the past 12 months.

Instructions: Indicate if the client reported vaginal or anal sex in the past 12 months with a female.

Business rules   Required for HIV testing, partner services, and non-testing non-partner services. Required only if a client behavioral risk profile was collected (ClientRiskProfile=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77).

Code	Value Description	Value Definition
0	*No*	*Client indicates that he or she did not have vaginal or anal sex with a female in the past 12 months.*
1	*Yes*	*Client indicates that he or she had vaginal or anal sex with a female in the past 12 months.*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a female in the past 12 months. Do not select 'don't know' if the client was not asked.*

G216c	**Vaginal or Anal Sex with a Transgender Person**	XSD (Schema) Name:	**withTransgender**

Value Option: Choose only one   **Format Type:** Number   **Min Length:** 1   **Max Length:** 2

Definition: The client self-reported having vaginal or anal sex with a transgender person in the past 12 months.

Instructions: Indicate if the client reported vaginal or anal sex in the past 12 months with a transgender person.

Business rules   Required for HIV testing, partner services, and non-testing non-partner services. Required only if a client behavioral risk profile was collected (ClientRiskProfile=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77).

Code	Value Description	Value Definition
0	*No*	*Client indicates that he or she did not have vaginal or anal sex with a transgender person in the past 12 months.*
1	*Yes*	*Client indicates that he or she had vaginal or anal sex with a transgender person in the past 12 months.*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a transgender person in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G217a	**Vaginal or Anal Sex without a Condom with a Male**	XSD (Schema) Name:	**withMaleWithoutCondom**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client self-reported having unprotected vaginal or anal sex with a male in the past 12 months.

Instructions: Indicate if the client reported unprotected (without a condom) vaginal or anal sex in the past 12 months with a male.

Business rules Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and vaginal or anal sex with male was reported (withMale=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed if sex with male wasn't reported (withMale=0 or 99).

Not allowed for partner services.

Code	Value Description	Value Definition
0	*No*	*Client indicates that he or she did not have vaginal or anal sex with a male without a condom in the past 12 months.*
1	*Yes*	*Client indicates that he or she had vaginal or anal sex with a male without a condom in the past 12 months.*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a male without a condom in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G217b	**Vaginal or Anal Sex without a Condom with a Female**	**XSD (Schema) Name:**	**withFemaleWithoutCondom**

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 2**

Definition: The client self-reported having unprotected vaginal or anal sex with a female in the past 12 months.

Instructions: Indicate if the client reported unprotected (without a condom) vaginal or anal sex in the past 12 months with a female.

Business rules Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and sex with female was reported (withFemale=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed if sex with female wasn't reported (withFemale=0 or 99).

Not allowed for partner services.

Code	Value Description	Value Definition
0	*No*	*Client indicates that he or she did not have vaginal or anal sex with a female without a condom in the past 12 months*
1	*Yes*	*Client indicates that he or she had vaginal or anal sex with a female without a condom in the past 12 months*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a female without a condom in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G217c	**Vaginal or Anal Sex without a Condom with a Transgender Person**	**XSD (Schema) Name:**	**withTrangenderWithoutCondom**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client self-reported having unprotected vaginal or anal sex with a transgender person in the past 12 months.

Instructions: Indicate if the client reported unprotected (without a condom) vaginal or anal sex in the past 12 months with a transgender person.

Business rules   Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and sex with a transgender person was reported (withTransgender=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed if sex with transgender wasn't reported (withTransgender=0 or 99).

Not allowed for partner services.

Code	Value Description	Value Definition
0	*No*	*Client indicates that he or she did not have vaginal or anal sex with a transgender person without a condom in the past 12 months*
1	*Yes*	*Client indicates that he or she had vaginal or anal sex with a transgender person without a condom in the past 12 months*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a transgender person without a condom in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G218a	**Vaginal or Anal Sex with a Male IDU**	**XSD (Schema) Name:**	**withMaleIDU**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client self-reported having vaginal or anal sex with an identified IDU male partner in the past 12 months.

Instructions: Indicate if the client reported vaginal or anal sex with an identified or known male IDU partner in the past 12 months.

Business rules   Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and sex with male was reported (withMale=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed if sex with male wasn't reported (withMale=0 or 99).

Not allowed for partner services.

Code	Value Description	Value Definition
0	*No*	*Client indicates that he or she did not have vaginal or anal sex with a male IDU in the past 12 months*
1	*Yes*	*Client indicates that he or she had vaginal or anal sex with a male IDU in the past 12 months*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a male IDU in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G218b	**Vaginal or Anal Sex with a Female IDU**	**XSD (Schema) Name:**	**withFemaleIDU**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client self-reported having vaginal or anal sex with an identified IDU female partner in the past 12 months.

Instructions: Indicate if the client reported vaginal or anal sex with an identified or known female IDU partner in the past 12 months.

Business rules   Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and sex with a female was reported (withFemale=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed if sex with female wasn't reported (withFemale=0 or 99).

Not allowed for partner services.

Code	Value Description	Value Definition
0	*No*	*Client indicates that he or she did not have vaginal or anal sex with a female IDU in the past 12 months*
1	*Yes*	*Client indicates that he or she had vaginal or anal sex with a female IDU in the past 12 months*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a female IDU in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G218c	**Vaginal or Anal Sex with a Transgender IDU**	XSD (Schema) Name:	**withTransgenderIDU**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client self-reported having vaginal or anal sex with an identified transgender IDU partner in the past 12 months.

Instructions: Indicate if the client reported vaginal or anal sex with an identified transgender IDU partner in the past 12 months.

Business rules Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and sex with a transgender person was reported (withTransgender=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed if sex with transgender wasn't reported (withTransgender=0 or 99).

Not allowed for partner services.

Code	Value Description	Value Definition
0	*No*	*Client indicates that he or she did not have vaginal or anal sex with a transgender IDU in the past 12 months*
1	*Yes*	*Client indicates that he or she had vaginal or anal sex with a transgender IDU in the past 12 months*
99	*Don't know*	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a transgender IDU in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G219a	**Vaginal or Anal Sex with HIV-Positive Male**	XSD (Schema) Name:	**withMaleHIVPositive**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client self-reported having vaginal or anal sex with an HIV-positive male partner(s) in the past 12 months.

Instructions: Indicate if the client reported having vaginal or anal sex with a known or identified HIV-positive male in the past 12 months.

Business rules   Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and sex with a male was reported (withMale=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed if sex with male wasn't reported (withMale=0 or 99).

Not allowed for partner services.

Code	Value Description	Value Definition
0	No	*Client indicates that he or she did not have vaginal or anal sex with a HIV positive male in the past 12 months*
1	Yes	*Client indicates that he or she had vaginal or anal sex with a HIV positive male in the past 12 months*
99	Don't know	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a HIV positive male in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G219b	**Vaginal or Anal Sex with HIV-Positive Female**	XSD (Schema) Name:	**withFemaleHIVPositive**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client self-reported having vaginal or anal sex with an HIV-positive female partner(s) in the past 12 months.

Instructions: Indicate if the client reported having vaginal or anal sex with a known or identified HIV-positive female in the past 12 months.

Business rules Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and sex with a female was reported (withFemale=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed if sex with female wasn't reported (withFemale=0 or 99).

Not allowed for partner services.

Code	Value Description	Value Definition
0	No	*Client indicates that he or she did not have vaginal or anal sex with a HIV positive female in the past 12 months*
1	Yes	*Client indicates that he or she had vaginal or anal sex with a HIV positive female in the past 12 months*
99	Don't know	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a HIV positive female in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num	Variable Name		
G219c	**Vaginal or Anal Sex with HIV-Positive Transgender Person**	**XSD (Schema) Name:**	**withTransgenderHIVPositive**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client self-reported having vaginal or anal sex with an HIV-positive transgender partner(s) in the past 12 months.

Instructions: Indicate if the client reported having vaginal or anal sex with a known or identified HIV-positive transgender partner in the past 12 months.

Business rules Required for HIV testing and non-testing non-partner services. Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and sex with a transgender person was reported (withTransgender=1).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed if sex with transgender wasn't reported (withTransgender=0 or 99).

Not allowed for partner services.

Code	Value Description	Value Definition
0	No	*Client indicates that he or she did not have vaginal or anal sex with a HIV positive transgender person in the past 12 months*
1	Yes	*Client indicates that he or she had vaginal or anal sex with a HIV positive transgender person in the past 12 months*
99	Don't know	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a HIV positive transgender person in the past 12 months. Do not select 'don't know' if the client was not asked.*

Num	Variable Name

G220   **Vaginal or Anal Sex with MSM (female only)**   **XSD (Schema) Name:** **vaginalOrAnalSexWithMSM**

Value Option: **Choose only one**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **2**

Definition: The client self-reported having vaginal or anal sex with identified MSM partner(s) in the past 12 months.

Instructions: Indicate if the client reported vaginal or anal sex with a MSM in the past 12 months. The question should only be asked of and reported for female (current gender) clients.

Business rules   Required for HIV testing and non-testing non-partner services.

Required only if a client behavioral risk profile was collected (clientRiskProfile=1) and current gender is female or transgender MTF (currentGenderValueCode = 2 or 3).

If client reported no behavioral risk factors (clientRiskProfile=5) then set to 0.

Not allowed if the client wasn't asked or declined to discuss behavioral risk factors (ClientRiskProfile = 66 or 77). Not allowed for current gender males or transgender FTM (currentGenderValueCode = 1 or 4). Not allowed for partner services.

Code	Value Description	Value Definition
0	No	*Client indicates that they have not had vaginal or anal sex with a MSM in the past 12 months.*
1	Yes	*Client indicates that they have had vaginal or anal sex with a MSM in the past 12 months.*
99	Don't know	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex with a MSM in the past 12 months. Do not select 'don't know' if the client was not asked.*

G221   **Client behavioral risk profile**   **XSD (Schema) Name:** **clientRiskProfile**

Value Option: **Choose only one**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **2**

Definition: An indication of whether the client was asked about behavioral risk factors and why behavioral risk data may not be available. A risk may not have been identified, or identified during the 12 month recall period; the HIV testing provider may not have asked the client about his or her risks; or, the client was asked but declined to provide behavioral risk information.

Instructions: Indicate outcome of attempt to complete a behavioral risk profile.

Business rules   Required for HIV testing, partner services and non-testing non-partner services.

Code	Value Description	Value Definition
1	*Client completed a behavioral risk profile*	*The client completed a behavioral risk profile and risks were identified.*
5	*Client was asked but no behavioral risks were identified*	*The client reports that none of the listed risk factors may have placed the client at potential risk for HIV exposure and/or transmission.*
66	*Client was not asked about behavioral risk factors*	*The provider did not ask the client about his or her risk factors.*
77	*Client declined to discuss behavioral risk factors*	*The client declined or was unwilling to discuss his or her risk factors.*

NHME Variables and Values

Num	Variable Name

G222 **Vaginal or Anal Sex without a Condom (PS only)**   XSD (Schema) Name: **vaginalOrAnalSexWithoutCondomPS**

Value Option: **Choose only one**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **2**

Definition: The client self-reported having unprotected vaginal or anal sex with a partner during the past 12 months.

Instructions: Indicate if the client reported unprotected (without a condom) vaginal or anal sex in the past 12 months.

Business rules   Required for partner services.

Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*The client indicates they have not had vaginal or anal sex without a condom in the past 12 months.*
1	Yes	*The client indicates they have had vaginal or anal sex without a condom in the past 12 months.*
99	Don't know	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex without a condom in the past 12 months. Do not select 'don't know' if the client wasn't asked.*

G223 **Vaginal or Anal Sex with an IDU (PS only)**   XSD (Schema) Name: **vaginalOrAnalSexWithIDUPS**

Value Option: **Choose only one**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **2**

Definition: The client self-reported having vaginal or anal sex with an identified IDU partner in the past 12 months.

Instructions: Indicate if the client reported vaginal or anal sex in the past 12 months with a partner(s) who is an identified IDU

Business rules   Required for partner services.

Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*Client has not had vaginal or anal sex with an identified IDU in the past 12 months.*
1	Yes	*Client has had vaginal or anal sex with an identified IDU in the past 12 months.*
99	Don't know	*Only select 'don't know' if the client states that he or she doesn't know if he or she had vaginal or anal sex without an identified IDU in the past 12 months. Do not select 'don't know' if the client wasn't asked.*

NHME Variables and Values

Num	Variable Name

Table: H	Client Intervention Characteristics

This table is required to be completed for all interventions in which client level data are collected. This includes HIV prevention interventions delivered individually to clients (e.g. HIV testing or PS) and some interventions delivered in groups or through outreach. These data are captured for each provider/client interaction.

Num	Variable Name

H01   **Intervention ID**   XSD (Schema) Name: **interventionId**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 12**

Definition: A number used to uniquely identify an intervention.

Instructions: Enter the ID used by your agency to identify this intervention. Intervention ID is unique for each agency. Agencies may choose to have EvaluationWeb generate this ID.

Business rules   Required for HIV testing, partner services and non-testing non-partner services.

In accordance to the prevention programs structure, every intervention must be part of a program model and a program.

Intervention session data entry status is considered "incomplete" until all necessary data for the session are entered.

H01a   **Intervention Name**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 100**

Definition: The unique name of the intervention as defined by the agency.

Instructions: Indicate the unique name of the intervention. Each intervention must have a unique name that will link it to the associated client-level data and distinguish it from other interventions.

Business rules   Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name	
H01b	Program Evidence Base	XSD (Schema) Name:

Value Option: Choose only one   **Format Type:** Alpha-Numeric   **Min Length:** 1   **Max Length:** 4

Definition: The name of Program Evidence Base.

Instructions: Select a Program Evidence Base name from the list. If the name of intervention is not in the list, please select 3.01 - Study / Special study or 3.02 – Other (specify) and enter an intervention name into H01b.

Business rules   Required for non-testing non-partner services. Not allowed for Partner Services or HIV testing. H01b cannot be equal to 0.

Code	Value Description	Value Definition
1.01	Community PROMISE	A community-level STD/HIV prevention intervention that relies on the outreach work of peer advocates from the target community to deliver role model stories to members of the target population.
1.02	Healthy Relationships	A five-session, small-group intervention for men and women living with HIV/AIDS that focuses on developing skills and self-efficacy and positive expectations about new behaviors through modeling behaviors and practicing new skills.
1.03	Holistic Health Recovery	A 12-session, manual-guided, group level program to reduce harm, promote health, and improve quality of life for HIV-positive injection drug users.
1.04	Many Men, Many Voices	A six- or seven-session, group level STD/HIV prevention intervention for gay and bisexual men of color.
1.05	Mpowerment	A community-level HIV prevention intervention for young men who have sex with men. The intervention is run by a core group of 12-20 young gay/bi-sexual men from the community and paid staff.
1.06	Popular Opinion Leader	A specialized type of outreach that consists of a group of trusted, well-liked people who are recruited and trained to endorse safer sexual behaviors in casual, one-on-one conversations with peers in their own social network at a range of venues and settings.
1.07	RAPP	A community-level HIV prevention intervention designed to help low-income women (aged 15-34) and their partners reduce their risk for HIV infection. The intervention objectives are to increase consistent condom use by women and their partners, to change community norms so that practicing safer sex is seen as the acceptable norm, and to involve as many people in the community as possible.
1.08	Safety Counts	A cognitive-behavioral intervention to reduce HIV risks among active drug users and specifically target active crack cocaine and injection drug users who are at very high risk for HIV/STD infection.
1.09	SISTA	A social skills training intervention aimed at reducing HIV sexual risk behavior among African-American women at highest risk.
1.10	Street Smart	An intensive HIV/AIDS and STD prevention program for youth whose behaviors place them at very high risk of becoming infected.
1.11	Together Learning Choices	An intervention for young people, (ages 13-29) living with HIV. It is delivered in small groups using cognitive-behavioral strategies to change behavior.

NHME Variables and Values

Num	Variable Name	
1.12	VOICES/VOCES	A single-session, video-based HIV/STD prevention workshop designed to encourage condom use and improve condom negotiation skills among heterosexual African American and Latino men and women.
1.13	WiLLOW	A four-session intervention for HIV positive, heterosexual women.
1.14	SiHLE	A four-session intervention designed to lower teen's risk for STDs and teen pregnancy.
1.15	CLEAR	A three module intervention that is delivered in one-on-one sessions to young people living with HIV.
1.16	OPTIONS	A clinician-initiated HIV risk reduction intervention for HIV positive persons in clinical care using motivational interviewing techniques.
1.17	Focus on Youth with imPact	A community-based, eight session group intervention that provides youth with the skills and knowledge they need to protect themselves from HIV and other STDs. The curriculum, founded on the Protection Motivation Theory, uses fun, interactive activities such as games, role plays and discussions to convey prevention knowledge and skills.
1.18	MIP	A holistic behavioral intervention for reducing high-risk behaviors for infection and transmission of HIV among intravenous drug users (IDUs).
1.19	D-UP	An adaptation of Popular Opinion Leader (POL) intervention for African-American MSM.
1.20	Sister to Sister	A single-session, skills-building intervention with a group- and individual-level component to increase self-efficacy, condom use skills, and condom negotiation with sex partners among inner-city African American female clinic patients.
1.21	Project START	A multi-session individual level intervention that aims to reduce HIV/STI and hepatitis risk for people returning to the community after incarceration.
1.22	Connect	A 5-session HIV/STD prevention intervention delivered to heterosexual couples or women alone that emphasizes the importance of communication, negotiating safer sex, and problem-solving skills.
1.23	SHIELD	Self - Health in Eliminating Life-Threatening Disease - A small-group, interactive intervention that relies on peer networks to reduce drug and sex risk behaviors.
1.24	Nia	A video-based motivational skills-building small-group intervention targeting inner-city heterosexually active, African American men.
1.25	Cuidate!	¡Cuídate! (Take Care of Yourself) is a small-group, culturally based intervention to reduce HIV sexual risk among Latino youth. The intervention consists of six 60-minute modules delivered to small, mixed-gender groups.
1.26	Partnership for Health	A brief counseling program for individual men and women living with HIV/AIDS delivered by medical providers in HIV outpatient clinics.
1.27	Personalized Cognitive Counseling (PCC)	The Personalized Cognitive Risk-Reduction Counseling intervention (previously referred to as Self-Justifications Counseling) involves a single counseling session delivered to clients during the 1- to 2-week period between standard "pre-test" (risk-assessment) and "post-test" (results disclosure) HIV counseling.

Num	Variable Name	
1.28	*Project AIM*	*Project AIM is a group-level youth development intervention designed to reduce HIV risk behaviors among youth. It consisted 12 sessions. The intervention is divided into four parts. Part One encourages youth to explore their personal interests, social surrounding, and what they want to become as an adult. In Part Two, youth envision themselves in a future career and connect current behavior with success as an adult. Part Three engages youth in role-plays around communication and small group activities involving planning and decision-making. Part Four provides the opportunity for youth to think about their future.*
1.29	*Safe in the City*	*Safe in the City is a single-session, video-based intervention for diverse STD clinic patients. The intervention involves the presentation of a 23-minute STD/HIV prevention video to patients in an STD clinic waiting room.*
1.30	*RESPECT*	*There are two RESPECT interventions – Brief Counseling (Best-evidence) and Enhanced Counseling (GOOD-EVIDENCE). Both are one-on-one, client-focused HIV/STD prevention counseling interventions, consisting of either 2 (Brief) or 4 (Enhanced) interactive counseling sessions.*
2.01	*Comprehensive Risk Counseling Services*	*A client-centered HIV prevention counseling activity with the fundamental goal of promoting the adoption and maintenance of HIV risk-reduction behaviors by clients with multiple, complex problems and risk-reduction needs. CRCS provides intensive, on-going, individualized prevention counseling, support, and service brokerage. This HIV prevention activity addresses the relationship between HIV risk and other issues such as substance abuse, STD treatment, mental health, and social and cultural factors.*
3.01	*Study / Special Study (specify)*	
3.02	*Other (specify)*	

H01c   **Specify Other Program Evidence Base**   **XSD (Schema) Name:**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 100**

Definition: A name of Program Evidence Base if 3.01 - Study / Special Study (specify) or 3.02-Other (specify) was selected in H01b.

Instructions: Specify the name of Program Evidence Base if 3.01 - Study / Special Study (specify) or 3.02-Other (specify) was selected and other value choice in H01b does not apply.

Business rules   Required for Non-testing non-partner services. Required when the name of intervention = 3.01 - Study / Special Study (specify) or 3.02-Other (specify).

Not allowed for partner services or HIV testing.

H02   **Number of Planned Sessions**   **XSD (Schema) Name: numberPlannedSessions**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 4**

Definition: The total number of sessions planned for an intervention. The number of planned sessions can differ depending on the needs of individual clients (e.g., CRCS).

Instructions: Enter the number of planned sessions for the intervention. Only entered at the first session.

Business rules   Required for non-testing non-partner services. Not allowed for HIV testing or partner services.

NHME Variables and Values

Num	Variable Name		
H04a	**Form ID**	XSD (Schema) Name:	**formId**

Value Option: N/A   Format Type: **Alpha-Numeric**   Min Length: **1**   Max Length: **19**

Definition: A code or identification number used to uniquely identify and connect data collected on a standardized form for a given intervention. This is system and program required for HIV Testing and optional for other interventions.

Instructions: If you use a standardized form to collect data for the intervention specified in H01: Intervention Name/ID, enter the Form ID. The Form ID is used to uniquely identify data collected on the form. Form ID is unique at the agency level. This variable is most often used for data collected on the EvaluationWeb HIV Test Form template or locally developed HIV testing forms.

Business rules   Required for HIV testing. Not allowed for partner services or non-testing non-partner services.

'FORM ID' must be unique within an intervention type and can be associated with only one client. The same form ID can be used one or many times within the same intervention for the same client.

| **H05** | **Number of Completed Sessions** | XSD (Schema) Name: | **numberCompletedSessions** |

Value Option: N/A   Format Type: **Number**   Min Length: **1**   Max Length: **4**

Definition: The number of sessions that were completed by the client for a particular intervention.

Instructions: For interventions with more than one session, enter the number of sessions that were completed by each client. If you are implementing interventions that only have one session, this number will always be "1".

Business rules   Required for non-testing non-partner services. Not allowed for partner services or HIV testing.

| **H06** | **Session Date** | XSD (Schema) Name: | **sessionDate** |

Value Option: N/A   Format Type: **MM/DD/YYYY**   Min Length: **10**   Max Length: **10**

Definition: The calendar date (month, day, and year) on which the session was delivered to the client.

Instructions: Enter the month, day, and year during which this session was delivered.

Business rules   Required for HIV testing and partner services. Not allowed for non-testing non-partner services.

Session date cannot be greater than the current date at the time of data entry.

For PS intervention session data, the following validations are required: 1) the session date falls within a valid case period and 2) the case has an attempt to locate record with an enrollment status of 'accepted'.

Session dates must fall within the program model start and end dates.

| **H07** | **Date of enrollment** | XSD (Schema) Name: | |

Value Option: N/A   Format Type: **MM/DD/YYYY**   Min Length: **10**   Max Length: **10**

Definition: The calendar month, day, and year on which the client enrolls in the intervention.

Instructions: Enter the calendar month, day, and year intervention services were initiated.

Business rules   Required for HD and CBO's non-testing non-partner services.

NHME Variables and Values

Num	Variable Name		
H08	**Program ID**	XSD (Schema) Name:	

Value Option: N/A	**Format Type:** Alpha-Numeric	**Min Length:** 1	**Max Length:** 12

Definition: A number used to uniquely identify a program.

Instructions: Enter the ID used by your agency to identify this program. Program ID is unique for each agency. The Program ID can be associated with a group of one or more interventions. Agencies may choose to have EvaluationWeb generate this ID.

Business rules Required for HD Non-testing non-partner services.

Num	Variable Name		
H08a	**Program Name**	XSD (Schema) Name:	

Value Option: N/A	**Format Type:** Alpha-Numeric	**Min Length:** 1	**Max Length:** 100

Definition: The unique name of the program as defined by the agency.

Instructions: Indicate the unique name of the program.

Business rules Required for HD Non-testing non-partner services.

Table: PCRS-1   Partner Services Case

This table provides details for a Partner Services (PS) case. A PS case will indirectly associate an HIV+ index case to his/her partners and the intervention through which services are provided.

Num	Variable Name		
PCR101	**Case Number**	XSD (Schema) Name:	**partnerServiceCaseNumber**

Value Option: N/A	**Format Type:** Alpha-Numeric	**Min Length:** 1	**Max Length:** 20

Definition: A number to uniquely identify a PS case within an agency. This number is system-generated when establishing a PS case. It can also be an assigned number that is key-entered by the provider (e.g., interview record number). A PS case can only be created for PS intervention types. Only one PS case may have a status of open for any given index client at any given time. A PS case may be associated with 1 or more of the following types: 1) not associated with an index client or partner;   2) associated with an index client only; 3) associated with one or more partners only; 4) associated with both an index client and one or more partners.

Instructions: Select the system-generated PS case number or enter the locally-defined case number (e.g., interview record number).

Business rules Required for partner services. A case number uniquely identifies a PS case within an agency.

Not allowed for HIV testing or non-testing non-partner services.

Num	Variable Name		
PCR103	**Case Open Date**	XSD (Schema) Name:	**caseOpenDate**

Value Option: N/A	**Format Type:** MM/DD/YYYY	**Min Length:** 10	**Max Length:** 10

Definition: The calendar date on which the PS case was opened at this agency.

Instructions: Enter the date on which the PS case was opened at this agency.

Business rules Required for partner services. The case open date must be less than the date of file submission to CDC.

Not allowed for HIV testing or non-testing non-partner services.

NHME Variables and Values

Num	Variable Name

PCR104   **Case Close Date**   **XSD (Schema) Name:** **caseCloseDate**

Value Option: N/A   **Format Type:** **MM/DD/YYYY**   **Min Length:** **10**   **Max Length:** **10**

Definition: The calendar date on which the PS case was closed at this agency.

Instructions: Enter the date on which the PS case was closed at this agency.

Business rules   Required for partner services. The Case Closed Date should be between the caseOpenDate and the date of file submission to CDC. This date can be blank.

Not allowed for HIV testing or non-testing non-partner services.

PCR108   **Date of Report**   **XSD (Schema) Name:** **dateOfReport**

Value Option: N/A   **Format Type:** **MM/DD/YYYY**   **Min Length:** **10**   **Max Length:** **10**

Definition: The date on which an index client was newly reported to surveillance as being infected with HIV. Persons reported to surveillance have not previously been reported to the same health department surveillance unit.

Instructions: Enter the date on which an index client was newly reported to surveillance as being infected with HIV. This would be the date linked to the HARS or eHARS ID.

Business rules   Required for partner services.The Date of Report must be less than the date of file submission to CDC.

Not allowed for HIV testing or non-testing non-partner services.

PCR109   **Reported to Surveillance**   **XSD (Schema) Name:** **reportedToSurveillance**

Value Option: Choose only one   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **2**

Definition: An indication of whether or not the index client's HIV case was reported to surveillance.

Instructions: Indicate whether or not the index client's HIV case was reported to surveillance.

Business rules   Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
0	*No*	*The index client's HIV case was not reported to the health department's surveillance department.*
1	*Yes*	*The index client's HIV case was reported to the health department's surveillance department.*
99	*Don't know*	*It is not known whether or not the index client's HIV case has been reported to surveillance.*

NHME Variables and Values

Num   *Variable Name*

Table: PCRS-2   Partner Services Partner

This table provides details about partners for a PS case and will include partner identifying and locating information as well as services received by the partner.

Num   *Variable Name*

PCR200   **Date Collected**   **XSD (Schema) Name:**   **dateCollected**

Value Option: N/A   **Format Type:** **MM/DD/YYYY**   **Min Length:** **10**   **Max Length:** **10**

Definition: The date on which information about the partner is initially collected. Information includes partner type, demographic and risk behaviors of the partner.

Instructions: Indicate the initial date (mm/dd/yyyy) that information was provided about the partner.

Business rules   Required for partner services. The Date Collected must be less than the date of file submission to CDC.

Not allowed for HIV testing or non-testing non-partner services.

PCR202a   **Local PS ID**   **XSD (Schema) Name:**   **localPartnerServiceId**

Value Option: N/A   **Format Type:** **Alpha-Numeric**   **Min Length:** **1**   **Max Length:** **12**

Definition: This variable is unique to each partner. Each local PS ID is associated with a specific PS case number (PCR101).

Instructions: If you have a local identification system for PS partners, enter the local ID here. For example, a partner ID from STD*MIS could be entered here.

Business rules   Required for partner services. Local PS ID must be unique within an agency and can be associated with only one client.

Not allowed for HIV testing or non-testing non-partner services.

PCR207   **Partner Type**   **XSD (Schema) Name:**   **partnerType**

Value Option: Choose only one   **Format Type:** **Number**   **Min Length:** **2**   **Max Length:** **2**

Definition: The partner's sex and needle-sharing relationship with the index client. This relationship could involve sexual relations between the client and the partner, needle-sharing between the client and partner or both sex and needle-sharing partners.

Instructions: For each partner identified, indicate whether the partner and client are sex partners, needle-sharing partners or both sex and needle-sharing partners.

Business rules   Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
01	*Sex partner*	*A person who engages in any type of sexual activity with the index client.*
02	*Needle-sharing partner*	*A person who engages in any type of needle-sharing activity (e.g., shares needles to inject drug intravenously), with the index client.*
03	*Both sex and needle sharing partner*	*A person who engages in any type of sexual activity and needle-sharing activity (e.g., shares needles to inject drug intravenously), with the index client.*

NHME Variables and Values

Num	Variable Name		
PCR209	**Notification Plan**	XSD (Schema) Name:	**notificationPlan**

Value Option: **Choose only one**   **Format Type:** **Number**   **Min Length:** **2**   **Max Length:** **2**

Definition: The method that will be used to inform the partner that he or she has been potentially exposed to HIV.

Instructions: Indicate the planned method agreed upon by the index client and PS provider for notifying this partner of his or her potential exposure to HIV.

Business rules Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
1	*Client notification*	*The HIV-infected client informs his or her partners of their possible exposure to HIV and refers them to HIV counseling, testing, and other support services.*
2	*Provider notification*	*The PS provider, with the consent of the HIV-infected client, takes the responsibility for informing the partner of his or her possible exposure to HIV and referring them to HIV counseling, testing, and other support services.*
3	*Dual notification*	*The HIV-infected client informs his or her partners of their possible exposure to HIV and refers them to HIV counseling, testing, and other support services in the presence of the PS provider.*
4	*Contract*	*The PS provider and HIV-infected client negotiate a time frame for the client to inform his or her partners of their possible exposure to HIV. If the client is unable to inform a partner within an agreed-upon time, the provider has the permission to notify and refer partners to HIV counseling, testing, and other support services.*
5	*Third-party notification*	*A notification strategy whereby the partner would be notified by a professional other than the health department provider (e.g., a private physician).*

NHME Variables and Values

Num	Variable Name

Table: U   Updated Records Indicators

This table contains the variables and the XML values to be used for records to identify updated and modified records. This table is only required for jurisdictions that upload XML files to EvaluationWeb.

Num	Variable Name

U01   **FormID_status**   **XSD (Schema) Name:**   **formId_status**

Value Option: **N/A**   **Format Type:**   **Alpha-Numeric**   **Min Length:**   **1**   **Max Length:**   **1**

Definition: The indicator to define the status of the record. This status indicator is used for HIV testing records only.

Instructions: Indicate if the records are new, updated or should be marked for deletion.

Business rules

Code	Value Description	Value Definition
D	Deleted Record	*This record is marked for deletion and should be deleted for the database for this agency.*
N	New Record	*This record is a new record and has not been previously submitted to CDC.*
U	Updated Record	*This record is an updated record; the record has been previously submitted to CDC and contains updated information.*

U02   **FormId_lastModifiedDate**   **XSD (Schema) Name:**   **formId_lastModifiedDate**

Value Option: **N/A**   **Format Type:**   **MM/DD/YYYY**   **Min Length:**   **10**   **Max Length:**   **10**

Definition: An indicator to denote the date on which the record was modified based on the status in U01: formID_Status. This status indicator is used for HIV testing records only.

Instructions: Indicate the date the record was last modified.
If this is a new record, the date of data entry should be entered.
If the record is an update, the date should be date the record was last modified.
If the record should be deleted, the date should be the date when the status changed to a deleted record.

Business rules

NHME Variables and Values

Num	Variable Name		
U03	**Client ID Status**	XSD (Schema) Name:	**ClientId_status**

Value Option: Choose only one   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 1**

Definition: The indicator to define the status of the record. This status indicator is used for Partner Services records only.

Instructions: Indicate if the records are new, updated or should be marked for deletion.

Business rules

Code	Value Description	Value Definition
D	*Deleted Record*	*This record is marked for deletion and should be deleted for the database for this agency.*
N	*New Record*	*This record is a new record and has not been previously submitted to CDC.*
U	*Updated Record*	*This record is an updated record; the record has been previously submitted to CDC and contains updated information.*

Num	Variable Name		
U04	**Client ID Last Modified Date**	XSD (Schema) Name:	**ClientId_lastModfiedDate**

Value Option: N/A   **Format Type: MM/DD/YYYY**   **Min Length: 10**   **Max Length: 10**

Definition: An indicator to denote the date in which the record was modified based on the status in U03: IndexClientID_Status. This status indicator is used for Partner Services records only.

Instructions: Indicate the date the record was last modified.
If this is a new record, the date of data entry should be entered.
If the record is an update, the date should be when the record was last modified.
If the record should be deleted, the date should be when the status changed to a deleted record.

Business rules

NHME Variables and Values

Num	Variable Name

This table is completed for each HIV antibody test conducted for a client.

Num	Variable Name

X103   **Test Technology**   **XSD (Schema) Name:**   **testTechnology**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 2**   **Max Length: 2**

Definition: A description of the type of test or test methods used to screen for HIV antibodies.

Instructions: Indicate the type of HIV test technology used for this test.

Business rules   Required for HIV testing. Required when testing event is reported (sampleDate isn't missing and anonymousTest = 0 or 1).

Not allowed if a testing event isn't reported (sampleDate is missing). Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
1	Conventional	A standard test used to detect antibodies to HIV, typically referred to as an EIA or ELISA (Enzyme-linked immunosorbant assay).
2	Rapid	A test to detect antibodies to HIV that can be collected and processed within a short interval of time (e.g., approximately 10-60 minutes).
4	NAAT/RNA Testing	A test that detects the genetic material of HIV. (Nucleic Acid Amplification Testing or Ribonucleic Acid Testing)
88	Other	Additional testing technologies that are not considered conventional or rapid such as oral mucosa or urine based tests.

X104   **HIV Test Election**   **XSD (Schema) Name:**   **anonymousTest**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: An indication of whether the test is linked to a name or is anonymous.

Instructions: Indicate if the written test record is linked to the client's name.

Business rules   Required for HIV testing. Required when testing event is reported (sampleDate isn't missing).

Not allowed if a testing event isn't reported (sampleDate is missing).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	Tested anonymously	The HIV test was not linked to the client's name.
1	Tested confidentially	The HIV test was confidential.
66	Test not offered	The HIV test was not offered to the client.
77	Declined testing	The client declined or is unwilling to take an HIV test.

NHME Variables and Values

Num	Variable Name			
X105	**Sample Date**		XSD (Schema) Name:	**sampleDate**

Value Option: N/A   Format Type: **MM/DD/YYYY**   Min Length: **10**   Max Length: **10**

Definition: The calendar date (month, day, year) on which the specimen for the HIV test was collected.

Instructions: Indicate the month, day, and year that the specimen for the HIV test was collected.

Business rules   Required for HIV testing. Not allowed for partner services or non-testing non-partner services.

Sample date cannot be greater than date of submission of XML file or data entry date.

Num	Variable Name			
X110	**Test Result**		XSD (Schema) Name:	**testResultValueCode**

Value Option: Choose only one   Format Type: **Number**   Min Length: **2**   Max Length: **2**

Definition: The outcome of the current HIV test.

Instructions: Indicate the result of this HIV test.

Business rules   Required for HIV testing. Required when a testing event is reported (sampleDate is not missing OR anonymousTest= 0 or 1 OR testTechnology is not missing).

Not allowed if a testing event wasn't reported (sampleDate is missing).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
1	Positive/reactive	A test result that is reactive on an initial ELISA test, repeatedly reactive on a second ELISA run on the same specimen, and confirmed positive on a Western blot or other supplemental test indicating that the client is infected.
3	Negative	A test result that is non-reactive on an initial ELISA test indicating the absence of HIV infection or an ELISA that was repeatedly reactive and the confirmatory test (Western Blot or IFA) was negative.
4	Indeterminate	A test result that has not been precisely determined. A possible result of a Western-blot, which might represent a recent HIV infection or a false positive.
5	Invalid	A test result cannot be confirmed due to conditions related to errors in the testing technology, specimen collection, or transport.
6	No result	No result was obtained even though the specimen was drawn (e.g., blood sample hemolyzed, blood tube broke, blood tube lost in transit, unable to draw blood from veins).

NHME Variables and Values

Num	Variable Name

X111 **Result Provided** XSD (Schema) Name: **provisionOfResultValueCode**

Value Option: **Choose only one** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **1**

Definition: The act of informing the client of the HIV test result.

Instructions: Indicate whether the result of this HIV test was provided.

Business rules Required for HIV testing. Required when at least one testing event occurred and result is available (testResultValueCode isn't missing).

Not allowed if a testing event didn't occur (sampleDate is missing).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	The result of this HIV test was not provided to the client.
1	Yes	The result of this HIV test was provided to the client.
2	Yes, client obtained the result from another agency	The result of this HIV test was provided to the client from a provider at another agency.

X115 **If Result Not Provided, Why** XSD (Schema) Name: **reasonResultsNotProvidedValueCode**

Value Option: **Choose only one** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **2**

Definition: An explanation for why the HIV test result was not provided to the client.

Instructions: Select the reason why the HIV test result was not provided to the client.

Business rules Required for HIV testing. Required when at least one testing event occurred, a result is available and the results was not communicated to the client (provisionOfResultValueCode = 0).

Not allowed if a testing event didn't occur (sampleDate is missing) or a testing event occurred and results were provided to the client (provisionOfResultValueCode=1 or 2).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
1	Declined notification	The client declined to accept notification of his or her HIV test result from the provider.
2	Did not return/could not locate	The client did not return for his or her HIV test result or could not be located to administer the test result.
88	Other	The result of the HIV test was not provided to client for some other reason not listed above.

NHME Variables and Values

Num	Variable Name		
X135	**Worker ID**	XSD (Schema) Name:	**HIVTestWorkerId**

Value Option: N/A　　　　**Format Type: Alpha-Numeric**　　　**Min Length: 1**　　　**Max Length: 12**

Definition:　　　A unique ID used to distinguish between persons who are delivering services to clients.

Instructions:　　Enter the unique ID of the worker delivering the HIV prevention service. Worker ID is unique at the jurisdiction level. If a state does not tie tests to a worker, no ID should be reported.

Business rules　Allowed for HIV testing. Allowed when at least one testing event occurred (sampleDate is not missing). Can be missing if a state does not tie tests to a worker.

Not allowed for partner services or non-testing non-partner services.

| **X136** | **In Surveillance System or Records** | XSD (Schema) Name: | **inSurveillanceSystemRecords** |

Value Option: Choose only one　　**Format Type: Number**　　　**Min Length: 1**　　　**Max Length: 2**

Definition:　　　Information obtained via surveillance system or records that verifies whether or not a client who has tested positive, with a conventional, RNA, NAAT or other non-rapid test, was previously reported to your jurisdiction's surveillance department as a new HIV case.

Instructions:　　Indicate if the client was previously reported in the jurisdiction's surveillance system as being HIV positive. This variable is only used for HIV testing and for reporting on HIV positive clients and should only be completed by the jurisdictional health department. Health departments should also complete this variable for HIV testing records submitted to the health department by CDC directly-funded CBOs.

Business rules　Required for HIV testing. Required only for health departments, yet should be completed for tests reported by CBOs if records are entered through a health department.

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	Client cannot be located in the jurisdiction surveillance system or records
1	Yes	Client has been located in the jurisdiction surveillance system or records
88	Not checked	The provider cannot or has not checked the jurisdiction surveillance system or records.
99	Don't know	The provider doesn't know if the client was previously reported to the surveillance department as a new HIV case.

NHME Variables and Values

Num	Variable Name		
X137	**Program Announcement or Program Strategy**	**XSD (Schema) Name:**	**progAnnouncementProgStrategy**

Value Option: **Choose only one**	**Format Type:** **Number**	**Min Length:** **2**	**Max Length:** **2**

Definition: The CDC program announcement or program strategy and the category (e.g., Part A, Part B), if applicable, under which HIV prevention service (e.g., HIV testing event, risk reduction, partner service) was conducted. This variable is required to be completed by health departments and CBOs directly funded by CDC to conduct HIV prevention services.

Instructions: Indicate the CDC funding source under which this HIV testing event is associated. Choose only one. If 'other-specify' is selected, you must also complete X137-1 (Specify - Program Announcement/Strategy). CBOs funded directly by CDC to conduct HIV testing should select either '04 – PS11-1113' or '05 – PS10-1003'.

Business rules Required for HIV testing and non-testing non-partner services. Not allowed for partner services

Code	Value Description	Value Definition
1	*PS 12-1201 – Category A*	*PS12-1201: The category within the health department flagship FOA that relates to overall HIV prevention program activities.*
2	*PS 12-1201 – Category B*	*PS12-1201: The category within the health department flagship FOA that specifically addresses the Expanded HIV Testing Initiative.*
3	*PS 12-1201 – Category C*	*PS12-1201: The category within the health department flagship FOA that funds demonstration projects.*
4	*PS 11-1113*	*PS11-1113: HIV Prevention Projects for Young Men of Color Who Have Sex with Men and Young Transgender Persons of Color for Community Based Organizations*
5	*PS 10-1003*	*PS10-1003: HIV Prevention Projects for Community-Based Organizations*
6	*PS 08-803*	*PS08-803: HIV Prevention Projects in Puerto Rico and US Virgin Islands*
7	*MSM Testing Initiative*	*Scaling-up HIV Testing among African American & Hispanic MSM: The MSM Testing Initiative (MTI): The special study funded to conduct testing among MSM only with the goal of identifying 3,000 newly identified HIV positive MSM over the course of the 3-year project. This project uses four different strategies to identify and test high risk MSM.*
89	*Other (specify)*	*A Program Announcement or Program Strategy other than those listed. This value option should also be used if the test being reported to CDC has been funded by another agency or organization.*

X137-1	**Specify Program Announcement/Strategy**	**XSD (Schema) Name:**	**spfyProgAnnouncementProgStrategy**

Value Option: **N/A**	**Format Type:** **Alpha-Numeric**	**Min Length:** **1**	**Max Length:** **50**

Definition: A specification of the funding source for the HIV testing event if '89 Other-specify' was selected in X137 Program Announcement (PA) or Program Strategy (PS).

Instructions: If '89 Other-specify' was selected in X137 Program Announcement (PA) or Program Strategy (PS), indicate the other CDC funding source or the non-CDC funding source (e.g., HRSA, SAMHSA) under which this HIV testing event was conducted.

Business rules Required for HIV testing and non-testing non-partner services. Required only if 'other' program annoucement was selected (progAnnoucementProgStrategy = 89).

Not allowed for partner services.

NHME Variables and Values

Table: X-3   Attempt to Locate

This table is to be completed for each index client or partner to be located. While this table is intended to be for PS, it may be used optionally for any intervention.

Num   *Variable Name*

X302   **Attempt to Locate Outcome**   **XSD (Schema) Name:**   **attemptToLocateOutcome**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 2**   **Max Length: 2**

Definition: The result of a PS provider's attempt to locate the index client or the index client's partner(s).

Instructions: Indicate the result of the attempt to locate.

Business rules   Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
01	*Unable to locate*	*The provider did not locate the index client or partner during this attempt.*
02	*Located*	*The provider did locate the index client or partner during this attempt.*

X303   **Reason for Unsuccessful Attempt**   **XSD (Schema) Name:**   **reasonForUnsuccessfulAttempt**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 2**   **Max Length: 2**

Definition: The explanation for why the location attempt was not achieved.

Instructions: If the attempt to locate the index client or index client's partner was unsuccessful (X302: Attempt to Locate Outcome = "Unable to locate"), indicate why the client or partner was unable to be located.

Business rules   Required for partner services. Required if client could not be located (attemptToLocateOutcome = 1).

Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
1	*Deceased*	*The index client or partner is no longer alive.*
2	*Out of jurisdiction*	*The index client or partner resides outside of the jurisdiction in which the provider is authorized to provide services.*
89	*Other (specify)*	*The index client or partner was not located due to another reason not listed.*

NHME Variables and Values

Num	Variable Name		
X303a	**Specify Reason for Unsuccessful Attempt**	XSD (Schema) Name:	**specifyReasonUnsuccessAttempt**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 50**

Definition: A specification for why the client was not located if X303--89 Other (specify) is selected.

Instructions: Specify the reason why the client was unable to be located.

Business rules Required for partner services. Required if reason for unsuccessful attempt to locate was 'other' (reasonForUnsuccessfulAttempt = 89). Not allowed otherwise (reasonForUnsuccessfulAttempt= 1 or 2).

Not allowed for HIV testing or non-testing non-partner services.

Num	Variable Name		
X306	**Enrollment Status**	XSD (Schema) Name:	**enrollmentStatus**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 2**   **Max Length: 2**

Definition: The decision made by the index client or the index client's partner to enroll in PS.

Instructions: If X302: Attempt to Locate Outcome = "Located", indicate if the index client or index client's partner accepted or declined enrollment into PS.

Business rules Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
1	*Accepted*	*The index client or partner enrolled in PS.*
2	*Declined*	*The index client or partner chose not to enroll in PS.*

Table: X-5   Elicit partners

This table is to be completed for each enrolled PS index client to capture partner information (e.g. recall period, number of partners).

Num	Variable Name		
X502	**Time Period for Recall (in months)**	XSD (Schema) Name:	**timePeriodForRecallInMonths**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The period of time as defined in months for which the client is asked to remember and report his or her number of sex and/or needle-sharing partners.

Instructions: Indicate the period of time as defined in months for which the client is asked to remember and report his or her number of sex and/or needle-sharing partners.

Business rules Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

NHME Variables and Values

Num	Variable Name		
X503	**Total Number of Partners Claimed**	XSD (Schema) Name:	**totalNumberOfPartnersClaimed**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 5**

Definition: The total number of sex or needle-sharing partners reported by the client over a specified recall period. This would include anonymous partners and partners for which there is not sufficient information to locate and notify.

Instructions: Enter the total number of partners identified by the index client. This includes all anonymous, male, female, and transgender partners.

Business rules Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

X511	**Total Number of Named Partners**	XSD (Schema) Name:	**totalNumberOfNamedPartners**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: The total number of sex or needle-sharing partners for which there is sufficient identifying and locating information.

Instructions: Indicate the total number of sex or needle-sharing partners named for which there is sufficient information to identify and locate the partner. The total number of named partners should be equal to X511a+X511b+X511c.

Business rules Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

X511a	**Total Number of Named Male Partners**	XSD (Schema) Name:	**totalNumberOfNamedMalePartners**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: The total number of sex or needle-sharing male partners for which there is sufficient identifying and locating information.

Instructions: Indicate the total number of sex or needle-sharing male partners for which there is sufficient identifying and locating information.

Business rules Required for partner services. Must be equal or less than the total number of named partners (totalNumberOfNamedPartners).

Not allowed for HIV testing or non-testing non-partner services.

X511b	**Total Number of Named Female Partners**	XSD (Schema) Name:	**totalNumberOfNamedFemalePartners**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: The total number of sex or needle-sharing female partners for which there is sufficient identifying and locating information.

Instructions: Indicate the total number of sex or needle-sharing female partners for which there is sufficient identifying and locating information.

Business rules Required for partner services. Must be equal or less than the total number of named partners (totalNumberOfNamedPartners).

Not allowed for HIV testing or non-testing non-partner services.

Num	Variable Name		
X511c	**Total Number of Named Transgender Partners**	XSD (Schema) Name:	**totalNumberOfTransgenderPartners**

Value Option: N/A	Format Type: **Number**	Min Length: **1**	Max Length: **3**

Definition: The total number of sex or needle-sharing transgender partners for which there is sufficient identifying and locating information.

Instructions: Indicate the total number of sex or needle-sharing transgender partners for which there is sufficient identifying and locating information.

Business rules: Required for partner services. Must be equal or less than the total number of named partners (totalNumberOfNamedPartners).

Not allowed for HIV testing or non-testing non-partner services.

Table: X-6   Notification of Exposure

This table is completed for each partner located to determine their knowledge of HIV exposure and HIV status.

Num	Variable Name		
X600	**Partner Notifiability**	XSD (Schema) Name:	**partnerNotifiability**

Value Option: **Choose only one**	Format Type: **Number**	Min Length: **2**	Max Length: **2**

Definition: An indication of whether or not a named partner is determined to be eligible for notification of exposure. Partners that are found to be previously positive, deceased, or for which there is a risk of domestic violence are not considered to be notifiable.

Instructions: For each partner named, indicate whether or not he or she is able to be notified of his or her exposure to HIV.

Business rules: Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
1	No - Partner is deceased	The partner is no longer alive.
2	No - Partner is out of jurisdiction	The partner resides outside of the jurisdiction in which the provider is authorized to provide services.
3	No - Partner has a risk of domestic violence	The provider has assessed that notifying the partner of his or her exposure to HIV could pose a risk of domestic violence to the partner.
5	No - Partner is known to be previously positive	The partner was not notified because he/she is known to be previously positive for HIV.
6	Yes - Partner is notifiable	The partner is able to be notified of his/her exposure to HIV.
88	No - Other	The partner was not notified due to another reason not listed.

NHME Variables and Values

Num	Variable Name		
X601	**Actual Notification Method**	**XSD (Schema) Name:**	**actualNotificationMethod**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 2**   **Max Length: 2**

Definition: The actual method used to notify each identified partner that they may have been exposed to HIV. This outcome may differ from the notification plan (PCR209).

Instructions: Indicate the method used to notify each notifiable partner identified in X511: Total Number of Named Partners that they may have been exposed to HIV.

Business rules   Required for partner services only if X600= 06. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
1	Client notification	The index client informed his or her partner of their possible exposure to HIV and referred them to counseling, testing, and other support services.
2	Provider notification	The PS provider informed the partner of his or her possible exposure to HIV and referred them to counseling, testing, and other support services.
3	Dual notification	The index client informed the partner of his or her serostatus in the presence of the PS provider.
5	Third-party notification	A notification strategy whereby the partner was notified by a professional other than the health department provider (e.g., a private physician) of his or her possible exposure to HIV.
6	Refused notification	The index client's partner refused to be informed of his or her possible exposure to HIV.

NHME Variables and Values

Num	Variable Name		
X602	**Previous HIV Test**	**XSD (Schema) Name:**	**previousHIVTest**

Value Option: **Choose only one**	**Format Type:** **Number**	**Min Length:** **1**	**Max Length:** **2**

Definition: The partner's self-report of having had at least one prior HIV test before these data were collected.

Instructions: Indicate if the partner reports having had a previous HIV test.

Business rules Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
0	*No*	*The index client's partner reports that he or she has never had an HIV test.*
1	*Yes*	*The index client's partner reports that they have had a previous HIV test.*
66	*Not asked*	*The provider did not ask the index client's partner about having a prior HIV test.*
77	*Declined to answer*	*The index client's partner declines or is unwilling to report if he or she has had a previous HIV test.*
99	*Don't know*	*The index client's partner reports that he or she is unaware if he or she has had a previous HIV test.*

NHME Variables and Values

Num	Variable Name		
X603	**Self-Reported HIV Test Result**	XSD (Schema) Name:	**selfReportedHIVTestResult**

Value Option: Choose only one   Format Type: **Number**   Min Length: **2**   Max Length: **2**

Definition: The client's self-reported test result from his/her most recent HIV test prior to notification.

Instructions: If the partner reports having had a previous HIV test (i.e. X602: Previous HIV Test = "Yes"), then indicate the partner's self-reported HIV test result at the time of notification. When asking about the "Self-Reported Test Result" it is very important that the provider ask about the test result from the most recent HIV test because this is the result that will reflect the partner's current HIV serostatus. Ensure that the partner understands that he/she is being asked to report his/her test results and not what he/she believes their status is.

Business rules Required for partner services. Required if X602: Previous HIV Test = 1.

Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
1	Positive	The index client's partner reports that his or her HIV status is positive based on a confirmatory test result.
2	Negative	The index client's partner reports that their HIV status is negative.
3	Preliminary positive	The index client's partner reports that he or she received a "Preliminary positive" test result (i.e., the index client's partner had a reactive HIV rapid test but did not receive the results of the associated conventional confirmatory test).
4	Indeterminate	The client reports that he or she received an "Indeterminate" test result (i.e., the client received results but those results did not conclusively indicate whether he or she is HIV-positive or HIV-negative).
66	Not asked	The provider did not ask the client about his or her HIV status.
77	Declined to answer	The index client's partner declines or is unwilling to report his or her HIV status.
99	Don't know	The index client's partner reports that he or she is unaware of his or her HIV status.

X604	**Date of Last HIV Test**	XSD (Schema) Name:	**dateOfLastHIVTest**

Value Option: N/A   Format Type: **MM/DD/YYYY**   Min Length: **10**   Max Length: **10**

Definition: The date of the partner's last HIV test.

Instructions: If the partner reports having a previous HIV test (X602: Previous HIV test = "Yes"), indicate the date of the partner's last HIV test.

Business rules Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

NHME Variables and Values

Num	Variable Name

Table: X-7 Referral

This table is completed for all clients receiving a referral.

Num	Variable Name

X702 **Referral Date** XSD (Schema) Name: **referralDate**

Value Option: N/A Format Type: **MM/DD/YYYY** Min Length: **10** Max Length: **10**

Definition: The date on which the referral was made for the client.

Instructions: Indicate the date on which the referral was made. This variable can be pre-populated based on the date of the session when the referral was made for the client.

Business rules Required for partner services. Date must be between the case open date (caseOpenDate) and the date of file submission to CDC.

Not allowed for HIV testing or non-testing non-partner services.

X702a **Reason Client Not Referred to HIV Medical Care** XSD (Schema) Name: **reasonForNoMedicalCareReferral**

Value Option: Choose only one Format Type: **Number** Min Length: **2** Max Length: **2**

Definition: The reason why a referral to HIV medical care for an HIV-positive client was not made.

Instructions: Complete if a client tests positive for HIV during a testing event but is not referred to HIV medical care.

Business rules Required for HIV testing. Required only for clients with a confirmed positive HIV test (testTechnology=1 or 4 or 88 AND testResultValueCode=1) or preliminarily positive HIV test (techTechnology=2 AND testResultValueCode=1) who were not referred to HIV medical care (referredToMedicalCare=0).

Not allowed for clients without a positive HIV test (testResultValueCode not 1) or clients with a positive HIV test were were referred to HIV medical care (referredToMedicalCare=1).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
01	*Client already in care*	*Client was not referred to HIV medical care because he or she is already receiving care.*
02	*Client declined care*	*Client was offered a referral to HIV medical care but client declined.*

NHME Variables and Values

Num	Variable Name		
X703_01	**Referred To HIV Testing**	XSD (Schema) Name:	**referredToHIVTesting**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client was referred to HIV testing. HIV testing is a diagnostic, laboratory procedure to assess for the presence of HIV antibodies.

Instructions: Indicate if the client was referred to HIV testing.

Business rules Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	
1	Yes	
99	Don't know	

Num	Variable Name		
X703_10	**Referred To Medical Care**	XSD (Schema) Name:	**referredToMedicalCare**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client was referred to medical services for (or due to their HIV positive diagnosis) HIV infection including: evaluation of immune system function and screening, treatment, and prevention of opportunistic infection.

Instructions: Indicate if the client was referred to HIV medical care.

Business rules Required for HIV testing and partner services.

For HIV testing events (formID isn't missing), required only for clients with a confirmed positive HIV test (techTechnology=1 or 4 or 88 AND testResultValueCode=1) or preliminarily positive HIV test (testTechnology=2 AND testResultValueCode=1). For partner services, required only if X713 HIV Test Result=01.

Not allowed for clients without a positive HIV test (testResultValueCode not 1).

Not allowed for non-testing non-partner services

Code	Value Description	Value Definition
0	No	*The client was not referred to HIV medical care after receiving an HIV positive test result.*
1	Yes	*The client was referred to HIV medical care after receiving an HIV positive test result.*
99	Don't know	*Provider is unaware if the client was referred to HIV medical care after receiving an HIV positive test result.*

NHME Variables and Values

Num	Variable Name		
X703_14	**Referred To Partner Services**	**XSD (Schema) Name:**	**referredToPartnerServices**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: The client was referred to Partner Services. Partner services include a range of available services for newly and previously diagnosed HIV-infected persons, their partners and affected communities. Services may include: informing current and past sex partners that a person who is HIV-infected has identified them as a sex or injection-drug-paraphernalia-sharing partner and advising them to have HIV counseling and testing. Additionally, it can include notifying partners, who may not have suspected that they were at increased risk for HIV that they can be tested for HIV. This enables those who test HIV positive to receive early medical evaluation, treatment, and prevention services, including risk-reduction counseling.

Instructions: Indicate if the client was referred to Partner Services.

Business rules Required for HIV testing. Required only for clients with a confirmed positive HIV test (testTechnology=1 or 4 or 88 AND testResultValueCode=1) or preliminarily positive HIV test (techTechnology=2 AND testResultValueCode=1).

Not allowed for clients without a positive HIV test (testResultValueCode not 1).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	*No*	*Client was not referred to partner services after receiving an HIV positive test result.*
1	*Yes*	*Client was referred to partner services after receiving an HIV positive test result.*
99	*Don't know*	*Provider is unaware if the client was referred to partner services after receiving an HIV positive test result.*

NHME Variables and Values

Num	Variable Name		
X703_17	**Referred To HIV Prevention Services**	**XSD (Schema) Name:**	**referredToHIVPrevention**

Value Option: Choose only one　　　**Format Type: Number**　　　**Min Length: 1**　　　**Max Length: 2**

Definition: The client was referred to HIV prevention services. Prevention services are defined as generally any service or intervention directly aimed at reducing risk for transmitting or acquiring HIV infection (e.g., prevention counseling, DEBIs, risk reduction counseling). It excludes indirect services such as mental health services or housing.

Instructions: Indicate if the client was referred to HIV Prevention services.

Business rules Required for HIV testing. Required only for clients with a confirmed positive HIV test (testTechnology=1 or 4 or 88 AND testResultValueCode=1) or preliminarily positive HIV test (techTechnology=2 AND testResultValueCode=1).

Not allowed for clients without a positive HIV test (testResultValueCode not 1).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	*No*	*Client was not referred to HIV prevention services after receiving a positive HIV test result.*
1	*Yes*	*Client was referred to HIV prevention services after receiving a positive HIV test result.*
99	*Don't know*	*Provider is unaware if the client was referred to HIV prevention services after receiving a positive HIV test result.*

NHME Variables and Values

Num	Variable Name		
X706	**Referral Outcome**	**XSD (Schema) Name:**	**firstMedicalCareAppointment**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 2**   **Max Length: 2**

Definition: The current status of the referral based on activities to verify that the service was accessed.

Instructions: Select the value that reflects the current status of this referral follow-up.

Business rules Required for HIV testing and partner services.

For HIV testing events (formID isn't missing), required only for clients with a confirmed positive HIV test (testTechnology=1 or 4 or 88 AND testResultValueCode=1) or preliminarily positive HIV test (techTechnology=2 AND testResultValueCode=1) who were referred to medical care (referredToMedicalCare = 1). For partner services, required only if X713 HIV Test Result=01 and X703_10 Referred to Medical Care=1.

Not allowed for HIV testing clients without a positive HIV test (testResultValueCode not 1) or those who were not referred to medical care (referredToMedicalCare=0).

Not allowed for non-testing non-partner services.

Code	Value Description	Value Definition
1	*Pending*	*The referring agency has not yet confirmed that the client accessed the service to which he or she was referred.*
2	*Confirmed - Accessed service*	*The referring agency has confirmed that the client accessed the service to which he or she was referred. For HIV testing, this value also corresponds to 'Yes' the client was linked to HIV medical care.*
3	*Confirmed - Did not access service*	*The referring agency has confirmed that the client had not accessed the service to which he or she was referred. For HIV testing, this value also corresponds to 'No' the client was not linked to HIV medical care*
4	*Lost to follow-up*	*After 90 days of the referral date (X702), access of the service to which the client was referred can't be confirmed or denied.*
5	*No follow-up*	*The referral was not tracked to confirm whether the client accessed the referred service.*
99	*Don't know*	*The referral outcome is unknown.*

NHME Variables and Values

Num	Variable Name			
X706b	**First HIV Medical Care Appointment within 90 Days of HIV Test**	**XSD (Schema) Name:**	**apptWithin90DaysOfHIVTest**	

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 2**

Definition: Confirmation that a client attended his/her HIV medical care appointment within 90 days of the HIV test date.

Instructions: Indicate if the client attended his/her HIV medical appointment with 90 days of the HIV test result date. This question would be asked if client had a "yes" response to "Did client attend the first appointment". This variable is only used for HIV testing and for reporting on HIV positive clients.

Business rules Required for HIV testing. Required only for clients with a confirmed positive HIV test (testTechnology=1 or 4 or 88 AND testResultValueCode=1) or preliminarily positive HIV test (techTechnology=2 AND testResultValueCode=1) who were referred to medical care (referredToMedicalCare = 1) and attended first appointment (firstMedicalCareAppointment=1).

Not allowed for clients without a positive HIV test (testResultValueCode not 1) or those with a positive HIV test who did not attend the first medical care appointment (firstMedicalCareAppointment = 3 or 4 or 5 or 99).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*Client did not attend his/her HIV medical appointment within 90 days of the HIV test date.*
1	Yes	*Client did attend his/her HIV medical appointment within 90 days of the HIV test date.*
99	Don't know	*The provider is unaware if client attended his/her HIV medical appointment within 90 days of the HIV test date.*

X712	**HIV Test Performed**	**XSD (Schema) Name:**	**HIVTestPerformed**

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 1**

Definition: A client received an HIV test as a result of a referral from PS to CTR. This variable is required for PS referrals only.

Instructions: If the client was referred to CTR from PS, indicate if the client was tested for HIV. If X703_01: Referred to HIV Testing= "Yes" and X706: Referral Outcome = "Accessed service", indicate if the client received an HIV test.

Business rules Required for partner services. Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*The client did not receive an HIV test as a result of a referral from PS to this agency/site for CTR.*
1	Yes	*The client received an HIV test as a result of a referral from PS to this agency/site for CTR.*

NHME Variables and Values

Num	Variable Name		
X713	**HIV Test Result**	XSD (Schema) Name:	**HIVTestResult**

Value Option: Choose only one	**Format Type: Number**	**Min Length: 2**	**Max Length: 2**

Definition: The confirmed outcome of an HIV test conducted on the partner as a result of a referral to HIV testing through Partner Services (PS).This variable is required for PS only.

Instructions: If the client received an HIV test (X712: HIV Test Performed = "Yes"), as a result of referral from PS to HIV testing, indicate the result of the HIV test.

Business rules   Required for partner services. Required if HIVTestPerformed = 1.

Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
1	Positive/reactive	A test result that is reactive on an initial ELISA test, repeatedly reactive on a second ELISA run on the same specimen, and confirmed positive on a Western blot or other supplemental test indicating that the client is infected.
3	Negative	A test result that is non-reactive on an initial ELISA test indicating the absence of HIV infection or an ELISA that was repeatedly reactive and the confirmatory test (Western Blot or IFA) was negative.
4	Indeterminate	A test result that has not been precisely determined. A possible result of a Western-blot, which might represent a recent HIV infection or a false positive.
5	Invalid	A test result cannot be confirmed due to conditions related to errors in the testing technology, specimen collection, or transport.
66	No result	No result was obtained even though the specimen was drawn (e.g., blood sample hemolyzed, blood tube broke, blood tube lost in transit, unable to draw blood from veins).

X714a	**HIV Test Results Provided**	XSD (Schema) Name:	**HIVTestResultsProvided**

Value Option: Choose only one	**Format Type: Number**	**Min Length: 1**	**Max Length: 1**

Definition: The act of informing the client of his or her HIV test result.

Instructions: Indicate whether or not the result of this HIV test was provided to the partner.

Business rules   Required for partner services. Required if HIVTestPerformed = 1 and HIVTestResult = 01.

Not allowed for HIV testing or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	The result of this HIV test was not provided to the partner.
1	Yes	The result of this HIV test was provided to the partner.

Num	Variable Name

X724 **Client Received Prevention Services** XSD (Schema) Name: **clientReceivedPreventionServices**

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 2**

Definition: Confirmation that a client received prevention services after receiving an HIV positive test result. Prevention services is defined as generally any service or intervention directly aimed at reducing risk for transmitting or acquiring HIV infection (e.g., prevention counseling, DEBIs, risk reduction counseling). It excludes indirect services such as mental health services or housing.

Instructions: Indicate if the client received prevention services following an HIV test and referral to prevention services. This variable is only used for HIV testing and for reporting on HIV positive clients.

Business rules Required for HIV testing. Required only for clients with a confirmed positive HIV test (testTechnology=1 or 4 or 88 AND testResultValueCode=1) or preliminarily positive HIV test (techTechnology=2 AND testResultValueCode=1).

Not allowed for clients without a positive HIV test (testResultValueCode not 1).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*Client did not receive prevention services after receiving an HIV positive test result.*
1	Yes	*Client did receive prevention services after receiving an HIV positive test result.*
99	Don't know	*Provider is unaware if the client received prevention services after receiving an HIV positive test result.*

X725 **Partner Service Interview** XSD (Schema) Name: **partnerServiceInterview**

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 2**

Definition: The indication that a client was interviewed for Partner Services.

Instructions: Indicate if the client was interviewed for Partner Services. This variable is only used for HIV testing and for reporting on HIV positive clients.

Business rules Required for HIV testing. Required only for clients with a confirmed positive HIV test (testTechnology=1 or 4 or 88 AND testResultValueCode=1) or preliminarily positive HIV test (techTechnology=2 AND testResultValueCode=1) who were referred to partner services (referredToPartnerServices=1).

Not allowed for clients without a positive HIV test (testResultValueCode not 1) or clients with a positive HIV test who were not referred to partner services (referredToPartnerServices=0 or 99).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*Client did not receive a Partner Services interview.*
1	Yes	*Client did have an interview with Partner Services.*
99	Don't know	*The provider is unaware if the client had a Partner Services interview.*

NHME Variables and Values

Num	Variable Name		
X725a	**Was the PS Interview within 30 Days of Receiving a Positive HIV Test Result**	**XSD (Schema) Name:**	**clientInterviewPS30DaysHIVResult**

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 2**

Definition: If a client was interviewed for Partner Services, this is an indication of whether or not he/she was interviewed within 30 days of receiving their HIV positive test result.

Instructions: Indicate whether or not the interview for Partner Services occurred within 30 days of the client receiving his or her positive HIV test result.

Business rules Required for HIV testing. Required only for clients with a confirmed positive HIV test (testTechnology=1 or 4 or 88 AND testResultValueCode=1) or preliminarily positive HIV test (techTechnology=2 AND testResultValueCode=1) who was referred to partner services (referredToPartnerServices=1) and interviewed (partnerServicesInterview=1).

Not allowed for clients without a positive HIV test (testResultValueCode not 1) or those with a positive HIV test who were not interviewed for partner services (partnerServicesInterview = 0 or 99).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*Client did not receive a partner service interview within 30 days of receiving an HIV positive test result.*
1	Yes	*Client did have an interview with partner services within 30 days of their HIV positive test result date.*
99	Don't know	*The provider is unaware if the client had a partner services interview within 30 days of their HIV positive test result date.*

Num	Variable Name		
X730	**Housing status in past 12 months**	**XSD (Schema) Name:**	**housingStatus**

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 2**

Definition: This variable is currently a place-holder for a housing status variable to be included in a future HIV testing template. 'Homeless' has yet to be defined.

Instructions: Indicate if the client reported experiencing homelessness in the past 12 months.

Business rules Required only for HIV testing. Required only for clients with a confirmed positive HIV test (testTechnology = 1 or 4 or 88 AND restResultValueCode=1) or preliminarily positive HIV test (testTechnology=2 AND testResultValueCode=1).

Not allowed for clients without a positive HIV test (testResultValueCode not 1).

Not allowed for partner services or non-testing non-partner services.

Code	Value Description	Value Definition
0	No	
1	Yes	
99	Don't know	*Only select 'don't know' if the client states that he or she doesn't know if homelessness was experienced in the past 12 months. Do not select 'don't know' if the client was not asked.'*

NHME Variables and Values

Table: XML   Header Table

This table is completed only for jurisdictions using the XML schema to upload and submit data to EvaluationWeb for transmission to CDC. It includes file header information.

Num   *Variable Name*

XML01a   **CT Schema Version Number**   **XSD (Schema) Name:**   **CTSchemaVersionNumber**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 3**

Definition: Specifies the version of the XSD which has been used to validate the XML file. This ensures proper synchronization of the validation of the XML data on both sides of the communication channel. This only refers to the HIV testing schema.

Instructions: This value will be hard coded within the schema. For the current schema dated, March 30, 2012, the value will be hard coded to '2.1'.

Business rules

XML01b   **PS Schema Version Number**   **XSD (Schema) Name:**   **psSchemaVersionNumber**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 3**

Definition: Specifies the version of the XSD which has been used to validate the XML file. This ensures proper synchronization of the validation of the XML data on both sides of the communication channel. This only refers to the HIV Partner Services schema.

Instructions: Allowable values for this variable are TBD.

Business rules

XML02   **Agency Id Sending XPEMS File**   **XSD (Schema) Name:**   **senderAgencyId**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 12**

Definition: The agency which sent the XML data file. This field allows for better CDC management of multiple files from multiple entities.

Instructions: Enter the ID of the agency sending the file to CDC.

Business rules

XML03   **Date Range Included in File**   **XSD (Schema) Name:**   **dateRange**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 15**

Definition: Specifies the date range which bounds the data and allows for better data management (duplicate identification).

Instructions: Enter the date range of the data located in the current file using the following example for CT: 2008Q1–2008Q2. For PS, use the following example: 2011QTR1234.

Business rules

NHME Variables and Values

Num	Variable Name		
XML04	**Data Type in File**	**XSD (Schema) Name:**	**dataType**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 15**

Definition: Specifies the type of data being sent (e.g., Agency, Service). This helps to identify the correct data receiving process necessary to handle the XML message.

Instructions: This value will default to either CT or PS, depending upon the schema being used.

Business rules

XML05	**Contact Person Information**	**XSD (Schema) Name:**	**contactPersonInformation**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 25**

Definition: Contact information of the person who manages the packaging and sending of the data.

Instructions: Provide the contact information of the person who manages the packaging and submission of the data in the current file. At a minimum, this should include the name and email address.

Business rules

XML06	**Collection of Agency IDs Included in File**	**XSD (Schema) Name:**	**agencyIDs**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 12**

Definition: The IDs of each agency for which data are being transmitted in the file.

Instructions: List the IDs of each unique agency for whom data are represented in the file. This field should draw from the variables 'Agency ID' and 'CBO Agency ID'. It should reflect all agencies directly-funded by CDC under any program announcement for whom data are included in the file.

Business rules

XML07	**Date xPEMS XML File Was Created**	**XSD (Schema) Name:**	**dateCreated**

Value Option: N/A   **Format Type: MM/DD/YYYY**   **Min Length: 10**   **Max Length: 10**

Definition: The date the XML file was created.

Instructions: Enter the date the current XML file was created.

Business rules

XML08	**Date File Last Modified**	**XSD (Schema) Name:**	**fileLastModifiedDate**

Value Option: N/A   **Format Type: MM/DD/YYYY**   **Min Length: 10**   **Max Length: 10**

Definition: If it has been modified, the last date it was modified.

Instructions: Enter the last date the XML file was modified.

Business rules

NHME Variables and Values

Num	Variable Name

XML09   **Special Instructions**   **XSD (Schema) Name:** **specialInstructions**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 50**

Definition: Special instructions about XML file, if any.

Instructions: Indicate any special instructions or notes about the XML file. This might include reasons the file was modified or updated.

Business rules

XML10   **Agency Name of Data Owner**   **XSD (Schema) Name:** **dataOwnerAgencyName**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 50**

Definition: The actual owner of the submitted XML file.

Instructions: Enter the actual owner of the XML file.

Business rules

Num	Variable Name

Aggregate Level Requirements

Table: ME   Aggregate level Variables

This table is completed by all agencies which are funded by PS12-1201.

Num	Variable Name

ME100a   **Program Delivery Year**   **XSD (Schema) Name:**

Value Option: N/A   **Format Type: Number**   **Min Length: 4**   **Max Length: 4**

Definition: Program delivery year refers to the year which the HIV prevention program was delivered or implemented, and for which aggregate level data are being reported.

Instructions: Indicate the year for which the HIV prevention program was delivered, and for which aggregate level data are being reported.

Business rules   Required for HD Non-testing non-partner services.

ME100b   **Program Delivery Period**   **XSD (Schema) Name:**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 1**

Definition: Program delivery period refers to the 6 months peroid during which the HIV prevention program was delivered or implemented, and for which aggregate level data are being reported.

Instructions: Indicate a 6 months period during which the HIV prevention program was delivered or implemented, and for which aggregate level data are being reported.

Business rules   Required for HD Non-testing non-partner services.

Code	Value Description	Value Definition
1	01/01-06/30	*The first 6 months of the year during which the HIV prevention program was delivered or implemented.*
2	07/01-12/31	*The second 6 months of the year during which the HIV prevention program was delivered or implemented.*

ME101   **Number of HIV-diagnosed clients linked to HIV medical care**   **XSD (Schema) Name:**   **hivClientslinkedtocare**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of HIV-diagnosed clients who were linked to HIV medical care. Linkage to HIV medical care occurs when a client attends a routine HIV medical care visit within 3 months of HIV diagnosis.

Instructions: Enter the total number of HIV-diagnosed clients who were linked to HIV medical care during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name		
ME101a	**Number of HIV-diagnosed MSM/IDU linked to HIV medical care**	**XSD (Schema) Name:**	

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 8**

Definition: The number of HIV-diagnosed MSM/IDU who were linked to HIV medical care. Linkage to HIV medical care occurs when a client attends a routine HIV medical care visit within 3 months of HIV diagnosis.

Instructions: Enter the number of HIV-diagnosed MSM/IDU who were linked to HIV medical care during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME101b	**Number of HIV-diagnosed MSM linked to HIV medical care**	**XSD (Schema) Name:**	**hivMSMlinkedtocare**

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 8**

Definition: The number of HIV-diagnosed MSM who were linked to HIV medical care. Linkage to HIV medical care occurs when a client attends a routine HIV medical care visit within 3 months of HIV diagnosis.

Instructions: Enter the number of HIV-diagnosed MSM who were linked to HIV medical care during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME101c	**Number of HIV-diagnosed IDU linked to HIV medical care**	**XSD (Schema) Name:**	**hivIDUlinkedtocare**

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 8**

Definition: The number of HIV-diagnosed IDU who were linked to HIV medical care. Linkage to HIV medical care occurs when a client attends a routine HIV medical care visit within 3 months of HIV diagnosis.

Instructions: Enter the number of HIV-diagnosed IDU who were linked to HIV medical care during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME101d	**Number of HIV-diagnosed heterosexuals linked to HIV medical care**	**XSD (Schema) Name:**	**hivHETlinkedtocare**

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 8**

Definition: The number of HIV-diagnosed heterosexuals who were linked to HIV medical care. Linkage to HIV medical care occurs when a client attends a routine HIV medical care visit within 3 months of HIV diagnosis.

Instructions: Enter the number of HIV-diagnosed heterosexuals who were linked to HIV medical care during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME101e	**Number of HIV-diagnosed clients with other/unknown behavioral risk factors linked to HIV medical care**	**XSD (Schema) Name:**	**hivOtherRisklinkedtocare**

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 8**

Definition: The number of HIV-diagnosed clients with other behavioral risks (i.e., excluding MSM, IDU, or heterosexual) or unknown behavioral risks who were linked to HIV medical care. Linkage to HIV medical care occurs when a client attends a routine HIV medical care visit within 3 months of HIV diagnosis.

Instructions: Enter the number of HIV-diagnosed clients with other/unknown behavioral risk factors who were linked to HIV medical care during the reporting period.

Business rules

NHME Variables and Values

Num	Variable Name		
ME101f	**Number of HIV-diagnosed African Americans linked to HIV medical care**	**XSD (Schema) Name:**	**hivAAlinkedtocare**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of HIV-diagnosed non-Hispanic blacks or African Americans who were linked to HIV medical care. Linkage to HIV medical care occurs when a client attends a routine HIV medical care visit within 3 months of HIV diagnosis.

Instructions: Enter the number of HIV-diagnosed non-Hispanic blacks or African Americans who were linked to HIV medical care during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME101g	**Number of HIV-diagnosed Hispanics linked to HIV medical care**	**XSD (Schema) Name:**	**hivHISPlinkedtocare**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of HIV-diagnosed Hispanics/Latinos of any race who were linked to HIV medical care. Linkage to HIV medical care occurs when a client attends a routine HIV medical care visit within 3 months of HIV diagnosis.

Instructions: Enter the number of HIV-diagnosed Hispanics/Latinos of any race who were linked to HIV medical care during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME101h	**Number of HIV-diagnosed clients of other race/ethnicity linked to HIV medical care**	**XSD (Schema) Name:**	**hivOtherRacelinkedtocare**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of HIV-diagnosed clients with a race/ethnicity other than black/African American, Hispanic/Latino, or unknown who were linked to HIV medical care. Linkage to HIV medical care occurs when a client attends a routine HIV medical care visit within 3 months of HIV diagnosis.

Instructions: Enter the number of HIV-diagnosed clients with a race/ethnicity other than black/African American, Hispanic/Latino, or unknown who were linked to HIV medical care during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME102	**Number of HIV-diagnosed clients linked to treatment adherence services**	**XSD (Schema) Name:**	**hivClientsadheretoART**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of HIV-diagnosed clients who were linked to anti-retroviral treatment (ART) adherence services. Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

Instructions: Enter the total number of HIV-diagnosed clients who were linked to ART adherence services during the reporting period.

Business rules

NHME Variables and Values

Num	Variable Name		
ME102a	**Number of HIV-diagnosed MSM/IDU linked to treatment adherence services**	**XSD (Schema) Name:**	

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of HIV-diagnosed MSM/IDU who were linked to anti-retroviral treatment (ART) adherence services. Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

Instructions: Enter the number of HIV-diagnosed MSM/IDU who were linked to ART adherence services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

Num	Variable Name		
ME102b	**Number of HIV-diagnosed MSM linked to treatment adherence services**	**XSD (Schema) Name:**	**hivMSMadheretoART**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of HIV-diagnosed MSM who were linked to anti-retroviral treatment (ART) adherence services. Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

Instructions: Enter the number of HIV-diagnosed MSM who were linked to ART adherence services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

Num	Variable Name		
ME102c	**Number of HIV-diagnosed IDU linked to treatment adherence services**	**XSD (Schema) Name:**	**hivIDUadheretoART**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of HIV-diagnosed IDU who were linked to anti-retroviral treatment (ART) adherence services. Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

Instructions: Enter the number of HIV-diagnosed IDU who were linked to ART adherence services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

Num	Variable Name		
ME102d	**Number of HIV-diagnosed heterosexuals linked to treatment adherence services**	**XSD (Schema) Name:**	**hivHETadheretoART**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of HIV-diagnosed heterosexuals who were linked to anti-retroviral treatment (ART) adherence services. Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

Instructions: Enter the number of HIV-diagnosed heterosexuals who were linked to ART adherence services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name		
ME102e	**Number of HIV-diagnosed clients with other/unknown behavioral risk factors linked to treatment adherence services**	**XSD (Schema) Name:**	**hivOtherRiskadheretoART**

Value Option: N/A **Format Type:** Number **Min Length:** 1 **Max Length:** 8

Definition: The number of HIV-diagnosed clients with other behavioral risks (i.e., excluding MSM, IDU, or heterosexual) or unknown behavioral risks who were linked to anti-retroviral treatment (ART) adherence services. Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

Instructions: Enter the number of HIV-diagnosed clients with other/unknown behavioral risks who were linked to ART adherence services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME102f	**Number of HIV-diagnosed African Americans linked to treatment adherence services**	**XSD (Schema) Name:**	**hivAAadheretoART**

Value Option: N/A **Format Type:** Number **Min Length:** 1 **Max Length:** 8

Definition: The number of HIV-diagnosed non-Hispanic blacks or African Americans who were linked to anti-retroviral treatment (ART) adherence services. Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

Instructions: Enter the number of HIV-diagnosed non-Hispanic blacks or African Americans who were linked to ART adherence services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME102g	**Number of HIV-diagnosed Hispanics linked to treatment adherence services**	**XSD (Schema) Name:**	**hivHispadheretoART**

Value Option: N/A **Format Type:** Number **Min Length:** 1 **Max Length:** 8

Definition: The number of HIV-diagnosed Hispanics/Latinos of any race who were linked to anti-retroviral treatment (ART) adherence services. Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

Instructions: Enter the number of HIV-diagnosed Hispanics/Latinos of any race who were linked to ART adherence services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME102h	**Number of HIV-diagnosed clients of another race/ethnicity linked to treatment adherence services**	**XSD (Schema) Name:**	**hivOtherRaceadheretoART**

Value Option: N/A **Format Type:** Number **Min Length:** 1 **Max Length:** 8

Definition: The number of HIV-diagnosed clients with a race/ethnicity other than black/African American, Hispanic/Latino, or unknown who were linked to anti-retroviral treatment (ART) adherence services. Medication adherence is defined as the extent to which patients follow medical regimens as prescribed by their health care providers. ART adherence services may include patient counseling and education, medication cues and reminders, and social and peer support interventions designed to improve ART use.

Instructions: Enter the number of HIV-diagnosed clients with a race/ethnicity other than black/African American, Hispanic/Latino, or unknown who were linked to ART adherence services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name		
ME103	**Number of out-of-care HIV-diagnosed clients re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivClientsRetained**

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of out-of-care HIV-diagnosed clients who were re-engaged into HIV medical care and treatment services. Re-engagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV diagnosed person, who is not in HIV medical care, is said to be re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

Instructions: Enter the total number of out-of-care HIV-diagnosed clients who were re-engaged into HIV medical care and treatment services during the reporting period.

Business rules

ME103a	**Numbers of out-of-care HIV-diagnosed MSM/IDU re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of out-of-care HIV-diagnosed MSM/IDU who were re-engaged into HIV medical care and treatment services. Reengagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV diagnosed person, who is not in HIV medical care, is said to be re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

Instructions: Enter the number of out-of-care HIV-diagnosed MSM/IDU who were re-engaged into HIV medical care and treatment services during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME103b	**Numbers of out-of-care HIV-diagnosed MSM re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivMSMRetained**

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of out-of-care HIV-diagnosed MSM who were re-engaged into HIV medical care and treatment services. Re-engagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV diagnosed person, who is not in HIV medical care, is said to be re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

Instructions: Enter the number of out-of-care HIV-diagnosed MSM who were re-engaged into HIV medical care and treatment services during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME103c	**Numbers of out-of-care HIV-diagnosed IDU re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivIDURetained**

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of out-of-care HIV-diagnosed IDU who were re-engaged into HIV medical care and treatment services. Re-engagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV diagnosed person, who is not in HIV medical care, is said to be re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

Instructions: Enter the number of out-of-care HIV-diagnosed IDU who were re-engaged into HIV medical care and treatment services during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

Num	Variable Name		
ME103d	**Numbers of out-of-care HIV-diagnosed heterosexuals re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivHETRetained**

Value Option: **N/A** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **8**

Definition: The number of out-of-care HIV-diagnosed heterosexuals who were re-engaged into HIV medical care and treatment services. Re-engagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV diagnosed person, who is not in HIV medical care, is said to be re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

Instructions: Enter the number of out-of-care HIV-diagnosed heterosexuals who were re-engaged into HIV medical care and treatment services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME103e	**Number of out-of-care HIV-diagnosed clients with other/unknown behavioral risk factors re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivOtherRiskRetained**

Value Option: **N/A** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **8**

Definition: The number of out-of-care HIV-diagnosed clients with other behavioral risks (i.e., excluding MSM, IDU, or heterosexual) or unknown behavioral risks, who were re-engaged into HIV medical care and treatment services. Re-engagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV diagnosed person, who is not in HIV medical care, is said to be re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

Instructions: Enter the number of out-of-care HIV-diagnosed clients with other/unknown behavioral risks, who were re-engaged into HIV medical care and treatment services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME103f	**Numbers of out-of-care HIV-diagnosed African Americans re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivAARetained**

Value Option: **N/A** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **8**

Definition: The number of out-of-care HIV-diagnosed non-Hispanic blacks or African Americans who were re-engaged into HIV medical care and treatment services. Re-engagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV diagnosed person, who is not in HIV medical care, is said to be re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

Instructions: Enter the number of out-of-care HIV-diagnosed non-Hispanic blacks or African Americans who were re-engaged into HIV medical care and treatment services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME103g	**Numbers of out-of-care HIV-diagnosed Hispanics re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivHispRetained**

Value Option: **N/A** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **8**

Definition: The number of out-of-care HIV-diagnosed Hispanics/Latinos of any race who were re-engaged into HIV medical care and treatment services. Re-engagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV diagnosed person, who is not in HIV medical care, is said to be re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

Instructions: Enter the number of out-of-care HIV-diagnosed Hispanics/Latinos of any race who were re-engaged into HIV medical care and treatment services during the reporting period.

Business rules Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name			
ME103h	**Number of out-of-care HIV-diagnosed clients of another race/ethnicity re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivOtherRaceRetained**	

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of out-of-care HIV-diagnosed clients with a race/ethnicity other than black/African American, Hispanic, or unknown, who were re-engaged into HIV medical care and treatment services. Re-engagement in HIV medical care is defined as the process of assisting persons with HIV to resume HIV medical care after a lapse in care. A previously HIV diagnosed person, who is not in HIV medical care, is said to be re-engaged in care when he/she re-enters care and begins attending scheduled follow-up HIV medical appointments.

Instructions: Enter the number of out-of-care HIV-diagnosed clients with a race/ethnicity other than black/African American, Hispanics, unknown, who were re-engaged into HIV medical care and treatment services during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME104	**Number of condoms distributed**	**XSD (Schema) Name:**	**condomsDistributed**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The total number of condoms distributed.

Instructions: Provide the estimated total number of condoms distributed to all clients in the reporting period. The number may be estimated by subtracting the number of condoms remaining at the end of the reporting period from the number of condoms purchased at the beginning of the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME105a	**Number of condoms distributed to high-risk individuals who are HIV-negative or whose HIV status is unknown**	**XSD (Schema) Name:**	**condomsDistributedHIVneg**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The estimated number of condoms distributed to high-risk HIV negative individuals and high-risk individuals whose HIV status is unknown. Persons likely to be at high risk for HIV infection include injection-drug users and their sex partners, persons who exchange sex for money or drugs, sex partners of HIV-infected persons, men who have sex with men, and heterosexual persons who themselves or whose sex partners have had more than one sex partner since their most recent HIV test.

Instructions: Provide the estimated number of condoms distributed to high-risk HIV negative individuals and high-risk individuals whose HIV status is unknown during the reporting period. The number of condoms distributed to high-risk HIV negatives/ clients of unknown status can be counted by monitoring condoms distributed to venues where a high-risk HIV negative/ client of unknown status is likely to be found, and monitoring condoms distributed at outreach and community events that target to high-risk HIV negatives/ clients of unknown status.

Business rules   Required for HD Non-testing non-partner services.

ME105b	**Number of condoms distributed to HIV positive individuals**	**XSD (Schema) Name:**	**condomsDistributedHIVpos**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The estimated number of condoms distributed to HIV positive clients.

Instructions: Provide the estimated number of condoms distributed to HIV positive clients during the reporting period. For example, you can sum up and report the number of condoms distributed to venues that serve HIV-positive clients, such as HIV clinics.

Business rules   Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name

ME109 **Number of community EBI conducted** **XSD (Schema) Name:** **communityEBIConducted**

Value Option: **N/A** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **8**

Definition: The total number of community-level evidence-based interventions (EBI) conducted. A community EBI is defined as an EBI that seeks to improve the risk conditions and behaviors in a community through a focus on the community as a whole, rather than by intervening only with individuals or small groups.

Instructions: Enter the total number of community evidence-based interventions (EBI) conducted in the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME110 **Number of people reached by community EBIs** **XSD (Schema) Name:** **peopleReachedCommunityEBI**

Value Option: **N/A** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **8**

Definition: The estimated total number of high-risk HIV negative individuals that accessed or were reached by (i.e., exposed) community evidence-based interventions (EBIs). A community EBI is defined as an EBI that seeks to improve the risk conditions and behaviors in a community through a focus on the community as a whole, rather than by intervening only with individuals or small groups. Exposure to a community EBI happens when a client sees or hears a key message disseminated by the intervention.

Instructions: Enter the total number of high-risk HIV negative individuals that accessed or were reached by community EBIs conducted during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME111 **Number of social marketing/public information conducted** **XSD (Schema) Name:** **socialMarketingConducted**

Value Option: **N/A** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **8**

Definition: The total number of social marketing/public information events conducted. Social marketing/public information events are defined as HIV-prevention messages delivered through one or more mass communication channels to target audiences.

Instructions: Enter the estimated total number of social marketing/public information events conducted in the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME112 **Number of people reached by social marketing/public information events** **XSD (Schema) Name:** **peoplecontactSMarketing**

Value Option: **N/A** **Format Type:** **Number** **Min Length:** **1** **Max Length:** **8**

Definition: The estimated total number of people exposed to a key message disseminated by social marketing /public information events. Exposure to a marketing campaign occurs when a person views or hears a key message disseminated by the campaign. This message could be advertised in a variety of ways throughout the community.

Instructions: Enter the total number of people exposed to all social marketing /public info events that were conducted during the reporting period.

Business rules Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name		
ME113	**Number of media placements for marketing campaigns**	**XSD (Schema) Name:**	**mediaPlacements**

Value Option: N/A　　　**Format Type: Number**　　　**Min Length: 1**　　　**Max Length: 8**

Definition:　　The total number of media placements for marketing campaigns. A media placement is the use of various types of media to promote or advertise a particular message. HIV/AIDS-related media placements may be produced in a variety of formats. Examples of media placements include: informational brochures, outreach palm cards, magazine advertisements, billboards, posters, newspapers, banner ads on websites, and signs on public transit vehicles and in transit stations.

Instructions:　　Enter the total number of media placements for all marketing campaigns that were conducted in the reporting period.

Business rules　　Required for HD Non-testing non-partner services.

ME114	**Number of clients referred to non-occupational PEP therapy**	**XSD (Schema) Name:**	**referredtoPEPTot**

Value Option: N/A　　　**Format Type: Number**　　　**Min Length: 1**　　　**Max Length: 8**

Definition:　　The number of clients who were referred to non-occupational post-exposure prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions:　　Enter the total number of clients who were referred to non-occupational PEP therapy during the reporting period.

Business rules　　Required for HD Non-testing non-partner services.

ME114a	**Number of MSM/IDU referred to non-occupational PEP therapy**	**XSD (Schema) Name:**	

Value Option: N/A　　　**Format Type: Number**　　　**Min Length: 1**　　　**Max Length: 8**

Definition:　　The number of MSM/IDU referred to non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medicallysupervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to
HIV.

Instructions:　　Enter the number of MSM referred to non-occupational PEP therapy during the reporting period.

Business rules　　Required for HD Non-testing non-partner services.

ME114b	**Number of MSM referred to non-occupational PEP therapy**	**XSD (Schema) Name:**	**referredtoPEPMSM**

Value Option: N/A　　　**Format Type: Number**　　　**Min Length: 1**　　　**Max Length: 8**

Definition:　　The number of MSM referred to non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions:　　Enter the number of MSM referred to non-occupational PEP therapy during the reporting period.

Business rules　　Required for HD Non-testing non-partner services.

Num	Variable Name

ME114c   **Number of IDU referred to non-occupational PEP therapy**   **XSD (Schema) Name:**   **referredtoPEPIDU**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of IDU referred to non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of IDU referred to non-occupational PEP therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME114d   **Number of high-risk heterosexuals referred to non-occupational PEP therapy**   **XSD (Schema) Name:**   **ReferredtoPEPHRHET**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of high-risk heterosexuals referred to non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of high-risk heterosexuals referred to non-occupational PEP therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME114e   **Number of clients with other or unknown risks referred to non-occupational PEP therapy**   **XSD (Schema) Name:**   **referredtoPEPOtherrisk**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of clients with other behavioral risks (i.e., excluding MSM, IDU, or high-risk heterosexuals) or unknown behavioral risks referred to non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of clients with other/unknown risks referred to non-occupational PEP therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME114f   **Number of African Americans referred to non-occupational PEP therapy**   **XSD (Schema) Name:**   **referredtoPEPAA**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of non-Hispanic blacks or African Americans referred to non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of African Americans referred to non-occupational PEP therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name

ME114g **Number of Hispanics referred to non-occupational PEP therapy**   XSD (Schema) Name: **referredtoPEPHisp**

Value Option: N/A   Format Type: **Number**   Min Length: **1**   Max Length: **8**

Definition: The number of Hispanics/Latinos of any race referred to non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of Hispanics referred to non-occupational PEP therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME114h **Number of clients of another race/ethnicity referred to non-occupational PEP therapy**   XSD (Schema) Name: **referredtoPEPOtherRace**

Value Option: N/A   Format Type: **Number**   Min Length: **1**   Max Length: **8**

Definition: The number of clients with a race/ethnicity other than blacks/African Americans or Hispanics, or clients of unknown race/ethnicity referred to non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of clients of other race/ethnicity (i.e., excluding blacks/African Americans and Hispanics/Latinos) or of unknown race/ethnicity who referred to non-occupational PEP therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME115 **Number of clients initiated non-occupational PEP therapy**   XSD (Schema) Name: **initiatedPEPTot**

Value Option: N/A   Format Type: **Number**   Min Length: **1**   Max Length: **8**

Definition: The number of clients who were referred to and initiated non-occupational post-exposure prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the total number of clients who were referred to and initiated non-occupational PEP therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME115a **Number of MSM/IDU who initiated non-occupational PEP therapy**   XSD (Schema) Name:

Value Option: N/A   Format Type: **Number**   Min Length: **1**   Max Length: **8**

Definition: The number of MSM/IDU who were referred and initiated non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of MSM/IDU who were referred and initiated non-occupational PEP therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name		
ME115b	**Number of MSM who initiated non-occupational PEP therapy**	XSD (Schema) Name:	**initiatedPEPMSM**

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of MSM who were referred and initiated non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of MSM who were referred and initiated non-occupational PEP therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME115c	**Number of IDU who initiated non-occupational PEP therapy**	XSD (Schema) Name:	**initiatedPEPIDU**

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of IDU who were referred and initiated non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of IDU who were referred and initiated non-occupational PEP therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME115d	**Number of high-risk heterosexuals who initiated non-occupational PEP therapy**	XSD (Schema) Name:	**initiatedPEPHRHET**

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of high-risk heterosexuals who were referred and initiated non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of high-risk heterosexuals who were referred and initiated non-occupational PEP therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

ME115e	**Number of clients with other or unknown risks who initiated non-occupational PEP therapy**	XSD (Schema) Name:	**initiatedPEPOtherrisk**

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of clients with other behavioral risks (i.e., excluding MSM, IDU, or high-risk heterosexuals) or unknown behavioral risks who were referred to and initiated non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of clients with unknown/other risks who were referred and initiated non-occupational PEP therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name			
ME115f	**Number of African American who initiated non-occupational PEP therapy**	**XSD (Schema) Name:**	**initiatedPEPAA**	

Value Option: N/A **Format Type:** Number **Min Length:** 1 **Max Length:** 8

Definition: The number of non-Hispanic blacks or African Americans who were referred to and initiated non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of African Americans who were referred to and initiated non-occupational PEP therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME115g	**Number of Hispanics who initiated non-occupational PEP therapy**	**XSD (Schema) Name:**	**initiatedPEPHisp**	

Value Option: N/A **Format Type:** Number **Min Length:** 1 **Max Length:** 8

Definition: The number of Hispanics/Latinos of any race who were referred to and initiated non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number of Hispanics who were referred to and initiated non-occupational PEP therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME115h	**Number of clients of another race/ethnicity who initiated non-occupational PEP therapy**	**XSD (Schema) Name:**	**initiatedPEPOtherRace**	

Value Option: N/A **Format Type:** Number **Min Length:** 1 **Max Length:** 8

Definition: The number of clients with a race/ethnicity other than blacks/African Americans or Hispanics, or clients of unknown race/ethnicity who were referred to and initiated non-occupational Post-Exposure Prophylaxis (PEP) therapy. PEP involves the medically-supervised provision of HIV antiretroviral drugs (ART) to HIV-negative persons who may have recently been exposed to HIV.

Instructions: Enter the number clients of other race/ethnicity (i.e., excluding blacks/African Americans and Hispanics/Latinos) or of unknown race/ethnicity who were referred to and initiated non-occupational PEP therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME116	**Number of MSM referred to PrEP therapy**	**XSD (Schema) Name:**	**referredtoPrEPTot**	

Value Option: N/A **Format Type:** Number **Min Length:** 1 **Max Length:** 8

Definition: The number of MSM referred to pre-exposure prophylaxis (PrEP) therapy. PrEP may be part of comprehensive HIV prevention services in which HIV negative individuals at high risk for HIV infection take antiretroviral medication daily to lower the risk of infection if exposed to HIV.

Instructions: Enter the total number of MSM referred to pre-exposure prophylaxis (PrEP) therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name	
ME116a	**Number of African American MSM referred to PrEP therapy**	**XSD (Schema) Name:** **referredtoPrEPAA**

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of high-risk non-Hispanic black or African American MSM referred to Pre-Exposure Prophylaxis (PrEP) therapy. PrEP may be part of comprehensive HIV prevention services in which HIV negative people at high risk for HIV take antiretroviral medication daily to lower the risk of infection if exposed to HIV.

Instructions: Enter the number of African American MSM referred to Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

| **ME116b** | **Number of Hispanic MSM referred to PrEP therapy** | **XSD (Schema) Name:** **referredtoPrEPHisp** |

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of Hispanic/Latino MSM of any race referred to Pre-Exposure Prophylaxis (PrEP) therapy. PrEP may be part of comprehensive HIV prevention services in which HIV negative people who are at high risk, take antiretroviral medication daily to try to lower their chances of becoming infected with HIV if they are exposed to it.

Instructions: Enter the number of Hispanic/Latino MSM referred to Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

| **ME116c** | **Number of MSM of another or unknown race/ethnicity referred to PrEP therapy** | **XSD (Schema) Name:** **referredtoPrEPOtherRace** |

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of MSM clients with a race/ethnicity other than black/African American or Hispanic, or MSM clients of unknown race/ethnicity referred to Pre-Exposure Prophylaxis (PrEP) therapy. PrEP may be part of comprehensive HIV prevention services in which HIV negative people who are at high risk, take antiretroviral medication daily to try to lower their chances of becoming infected with HIV if they are exposed to it.

Instructions: Enter the number of MSM clients of other race/ethnicity (i.e., excluding blacks/African Americans and Hispanics/Latinos) or of unknown race/ethnicity who were referred to Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

| **ME117** | **Number of MSM initiated PrEP therapy** | **XSD (Schema) Name:** **initiatedPrETot** |

Value Option: **N/A**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **8**

Definition: The number of MSM who were referred to and initiated pre-exposure prophylaxis (PrEP) therapy. PrEP may be part of comprehensive HIV prevention services in which HIV negative individuals at high risk for HIV infection, take antiretroviral medication daily to lower the risk of infection if exposed to HIV.

Instructions: Enter the total number of MSM who were referred to and initiated pre-exposure prophylaxis (PrEP) therapy during the reporting period.

Business rules   Required for HD Non-testing non-partner services.

NHME Variables and Values

Num	Variable Name

ME117a **Number of African American MSM who initiated PrEP therapy** **XSD (Schema) Name:** **initiatedPrEPAA**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of non-Hispanic blacks or African Americans MSM who were referred and initiated Pre-Exposure Prophylaxis (PrEP) therapy. PrEP may be part of comprehensive HIV prevention services in which HIV negative people who are at high risk, take antiretroviral medication daily to try to lower their chances of becoming infected with HIV if they are exposed to it.

Instructions: Enter the number of African American MSM who were referred and initiated Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME117b **Number of Hispanic/Latino MSM who initiated PrEP therapy** **XSD (Schema) Name:** **initiatedPrEPHisp**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of Hispanics/Latinos of any race MSM who were referred and initiated Pre-Exposure Prophylaxis (PrEP) therapy. PrEP may be part of comprehensive HIV prevention services in which HIV negative people who are at high risk, take antiretroviral medication daily to try to lower their chances of becoming infected with HIV if they are exposed to it.

Instructions: Enter the number of Hispanic MSM who were referred and initiated Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

ME117c **Number of MSM of another or unknown race/ethnicity initiated PrEP therapy** **XSD (Schema) Name:** **initiatedPrEPOtherRace**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of MSM clients with a race/ethnicity other than black/African American or Hispanic, or MSM clients of unknown race/ethnicity who were referred and initiated Pre-Exposure Prophylaxis (PrEP) therapy. PrEP may be part of comprehensive HIV prevention services in which HIV negative people who are at high risk, take antiretroviral medication daily to try to lower their chances of becoming infected with HIV if they are exposed to it.

Instructions: Enter the number of MSM clients of other race/ethnicity (i.e., excluding blacks/African Americans and Hispanics/Latinos) or of unknown race/ethnicity who were referred and initiated Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.

Business rules Required for HD Non-testing non-partner services.

NHME Variables and Values

Budget Allocation

Table: BT   Budget Allocation Variables

This table is completed annually by grantees. It is used to provide their budget allocation information to the CDC.

Num   Variable Name

BT100a   Budget allocation reporting year   **XSD (Schema) Name:** **budgetAllocationYear**

Value Option: N/A	**Format Type: Number**	**Min Length: 4**	**Max Length: 4**

Definition: Budget allocation reporting year refers to the 12-month calendar year (January-December) for which the budget allocation is being reported.

Instructions: Indicate the year for which the budget allocation data are being provided.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT101a   Amount of PS12-1201 Category A funds allocated for routine   XSD (Schema) Name: amountHIVtestRoutineCateA
HIV testing or screening

Value Option: N/A	**Format Type: Currency**	**Min Length: 1**	**Max Length: 8**

Definition: For PS12-1201 Category A award (HIV Prevention Programs for Health Departments), this value represents the allocation associated with routine HIV testing or screening. Routine HIV testing or screening is a testing strategy that involves testing persons regardless of whether they have a recognized behavioral risk or presence of signs or symptoms of HIV infection.

CDC provides the amount of awarded PS12-1201 Category A funds annually to each grantee.

Instructions: Indicate the amount of PS12-1201 Category A funds awarded to your agency that have been allocated for routine HIV testing or screening.

If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT101b   Amount of PS12-1201 Category B funds allocated for routine   XSD (Schema) Name: amountHIVtestRoutineCateB
HIV testing or screening

Value Option: N/A	**Format Type: Currency**	**Min Length: 1**	**Max Length: 8**

Definition: For PS12-1201 Category B award (Expanded HIV Testing for Disproportionately Affected Populations), this value represents the allocation associated with routine HIV testing or screening performed using Category B funds. Routine HIV testing or screening is a testing strategy that involves testing persons regardless of whether they have a recognized behavioral risk or presence of signs or symptoms of HIV infection.

CDC provides the amount of awarded PS12-1201 Category B funds annually to each grantee.

Instructions: Indicate the amount of PS12-1201 Category B funds awarded to your agency that have been allocated for routine HIV testing or screening. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Num	Variable Name

BT101c **Amount of PS12-1201 Category C funds allocated for routine HIV testing or screening**   XSD (Schema) Name: **amountHIVtestRoutineCateC**

Value Option: N/A　　　　**Format Type: Currency**　　　　**Min Length: 1**　　　　**Max Length: 8**

Definition:　For PS12-1201 Category C award (Demonstration Projects), this value represents the funds allocated from your Category C award that are for routine HIV testing or screening. Routine HIV testing or screening is a testing strategy that involves testing persons regardless of whether they have a recognized behavioral risk or presence of signs or symptoms of HIV infection.

CDC provides the amount of awarded PS12-1201 Category C funds annually to each grantee.

Instructions:　Indicate the amount of PS12-1201 Category C funds awarded to your agency that have been allocated for routine HIV testing or screening. If no funds were allocated then enter 0.

Business rules　Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT101d **Amount of CDC funds other than PS12-1201 award allocated for routine HIV testing or screening**   XSD (Schema) Name: **amountHIVtestRoutineNon121201**

Value Option: N/A　　　　**Format Type: Currency**　　　　**Min Length: 1**　　　　**Max Length: 8**

Definition:　For all CDC funds excluding PS12-1201, this value represents the amount allocated for routine HIV testing or screening that uses funding sources other than from PS12-1201. Routine HIV testing or screening is a testing strategy that involves testing persons regardless of whether they have a recognized behavioral risk or presence of signs or symptoms of HIV infection.

CDC provides the amount of awarded funds other than PS12-1201 annually to each grantee.

Instructions:　Indicate the amount of CDC funds, excluding PS12-1201, awarded to your agency that have been allocated for routine HIV testing or screening.

For all CDC funds excluding PS12-1201, this value represents the amount allocated for routine HIV testing that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).

If no funds were allocated then enter 0.

Business rules　Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT102a **Amount of PS12-1201 Category A funds allocated for targeted HIV testing**   XSD (Schema) Name: **amountHIVtestTargetedCateA**

Value Option: N/A　　　　**Format Type: Currency**　　　　**Min Length: 1**　　　　**Max Length: 8**

Definition:　For PS12-1201 Category A award (HIV Prevention Programs for Health Departments), this value represents the allocation associated with targeted HIV testing. Targeted HIV testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.

Instructions:　Indicate the amount of PS12-1201 Category A funds awarded to your agency that have been allocated for targeted HIV testing. If no funds were allocated then enter 0.

Business rules　Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Num	Variable Name		
BT102b	**Amount of PS12-1201 Category B funds allocated for targeted HIV testing**	**XSD (Schema) Name:**	**amountHIVtestTargetedCateB**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For PS12-1201 Category B award (Expanded HIV Testing for Disproportionately Affected Populations), this value represents the allocation associated with targeted HIV testing at non-health care settings (optional). Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.

Instructions: Indicate the amount of PS12-1201 Category B funds awarded to your agency that have been allocated for targeted HIV testing, if implemented or applicable. If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT102c	**Amount of PS12-1201 Category C funds allocated for targeted HIV testing**	**XSD (Schema) Name:**	**amountHIVtestTargetedCateC**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For PS12-1201 Category C award (Demonstration Projects), this value represents the allocation associated with targeted HIV testing. Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.

Instructions: Indicate the amount of PS12-1201 Category C funds awarded to your agency that have been allocated for targeted HIV testing, if implemented or applicable. If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT102d	**Amount of CDC funds other than from PS12-1201 award that was allocated for targeted HIV testing**	**XSD (Schema) Name:**	**amountHIVtestTargetedNon121201**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For all CDC funds excluding PS12-1201, this value represents the amount allocated for targeted HIV testing, that uses funding sources other than that from PS12-1201. Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.

Instructions: Indicate the amount of CDC funds, excluding PS12-1201, awarded to your agency that have been allocated for targeted HIV testing, if implemented or applicable.

For all CDC funds excluding PS12-1201, this value represents the amount allocated for targeted HIV testing that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).

If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

NHME Variables and Values

Num	Variable Name			
BT102e	**Amount of all CDC funds allocated to provide targeted HIV testing to MSM**	**XSD (Schema) Name:**		**amountHIVtestTargetedMSM**

Value Option: N/A   **Format Type:** Currency   **Min Length:** 1   **Max Length:** 8

Definition: For all CDC funds allocated to targeted HIV testing, this value represents allocation for testing persons who are MSM. Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.

Instructions: Indicate the amount of all CDC funds your agency allocated to provide targeted HIV testing of MSM. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for targeted testing (Logic in DVS numbers: BT102e<=(BT102a+BT102b+BT102c+BT102d); Logic in schema names: amountHIVTestTargetedMSM<=(amountHIVtestTargetedCateA + amountHIVtestTargetedCateB + amountHIVtestTargetedCateC + amountHIVtestTargetedNon121201))

BT102f	**Amount from all CDC funds allocated to provide targeted HIV testing to IDU**	**XSD (Schema) Name:**		**amountHIVtestTargetedIDU**

Value Option: N/A   **Format Type:** Currency   **Min Length:** 1   **Max Length:** 8

Definition: From all CDC funds allocated to targeted HIV testing, this value represents allocation for testing persons who are IDU. Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.

Instructions: Indicate the amount from all CDC funds your agency allocated to provide targeted HIV testing of IDU. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for targeted testing (Logic in DVS numbers: BT102f<=(BT102a+BT102b+BT102c+BT102d); Logic in schema names: amountHIVTestTargetedIDU<=(amountHIVtestTargetedCateA + amountHIVtestTargetedCateB + amountHIVtestTargetedCateC + amountHIVtestTargetedNon121201))

BT102g	**Amount of all CDC funds allocated to provide targeted HIV testing to heterosexuals**	**XSD (Schema) Name:**		**amountHIVtestTargetedhet**

Value Option: N/A   **Format Type:** Currency   **Min Length:** 1   **Max Length:** 8

Definition: For all CDC funds allocated to targeted HIV testing, this value represents allocation for testing of high-risk heterosexuals. Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.

Instructions: Indicate the amount of all CDC funds CDC funds your agency allocated to targeted HIV testing of high-risk heterosexuals. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for targeted testing (Logic in DVS numbers: BT102g<=(BT102a+BT102b+BT102c+BT102d); Logic in schema names: amountHIVTestTargetedhet<=(amountHIVtestTargetedCateA + amountHIVtestTargetedCateB + amountHIVtestTargetedCateC + amountHIVtestTargetedNon121201)).

Num	Variable Name		
BT102h	**Amount of all CDC funds allocated to provide targeted HIV testing to clients of other/unknown behavioral risks**	**XSD (Schema) Name:**	**amountHIVtestTargetedotherRisk**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition:	For all CDC funds allocated to targeted HIV testing, this value represents allocation for testing clients with other (i.e., excluding MSM, IDU, or heterosexuals) or unknown behavioral risks. Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.
Instructions:	Indicate the amount of all CDC funds your agency allocated to targeted HIV testing of clients with other or unknown behavioral risks. If no funds were allocated then enter 0.
Business rules	Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.
	Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for targeted testing (Logic in DVS numbers: BT102h<=(BT102a+BT102b+BT102c+BT102d); Logic in schema names: amountHIVTestTargetedOtherRisk<=(amountHIVtestTargetedCateA + amountHIVtestTargetedCateB + amountHIVtestTargetedCateC + amountHIVtestTargetedNon121201)).

Num	Variable Name		
BT102i	**Amount of all CDC funds allocated to provide targeted HIV testing to African Americans**	**XSD (Schema) Name:**	**amountHIVtestTargetedAA**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition:	For all CDC funds allocated to targeted HIV testing, this value represents allocation for testing of non-Hispanic blacks or African Americans. Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.
Instructions:	Indicate the amount of all CDC funds your agency allocated for targeted HIV testing of African Americans. If no funds were allocated then enter 0.
Business rules	Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.
	Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for targeted testing (Logic in DVS numbers: BT102i<=(BT102a+BT102b+BT102c+BT102d); Logic in schema names: amountHIVTestTargetedAA<=(amountHIVtestTargetedCateA + amountHIVtestTargetedCateB + amountHIVtestTargetedCateC + amountHIVtestTargetedNon121201)).

Num	Variable Name			
BT102j	**Amount of all CDC funds allocated to provide targeted HIV testing to Hispanics**	**XSD (Schema) Name:**	**amountHIVtestTargetedHispanic**	

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For all CDC funds allocated to targeted HIV testing, this value represents allocation for testing of Hispanics/Latinos of any race. Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.

Instructions: Indicate the amount of all CDC funds your agency allocated for targeted HIV testing of Hispanics.   If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for targeted testing (Logic in DVS numbers: BT102j<=(BT102a+BT102b+BT102c+BT102d); Logic in schema names: amountHIVTestTargetedHispanic<=(amountHIVtestTargetedCateA + amountHIVtestTargetedCateB + amountHIVtestTargetedCateC + amountHIVtestTargetedNon121201)).

| **BT102k** | **Amount of all CDC funds allocated to provide targeted HIV testing to clients of other or unknown race/ethnicity** | **XSD (Schema) Name:** | **amountHIVtestTargetedOtherRace** | |

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For all CDC funds allocated to targeted HIV testing, this value represents allocation for testing of clients with a race/ethnicity other than white, black/African American or Hispanic/Latino, or clients of unknown race/ethnicity. Targeted testing is a testing strategy that involves testing persons based on characteristics that increase their likelihood of being infected with HIV. These characteristics can include the presence of sexually transmitted diseases, behavioral risks, or attendance at venues frequented by high-risk persons.

Instructions: Indicate the amount of all CDC funds your agency allocated for targeted HIV testing of clients of other race/ethnicity than white, black/African American, Hispanic/Latino, or clients of unknown race/ethnicity.   If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for targeted testing (Logic in DVS numbers: BT102k<=(BT102a+BT102b+BT102c+BT102d); Logic in schema names: amountHIVTestTargetedOtherRace<=(amountHIVtestTargetedCateA + amountHIVtestTargetedCateB + amountHIVtestTargetedCateC + amountHIVtestTargetedNon121201)).

| **BT102l** | **Open-ended question 1 for Targeted HIV testing** | **XSD (Schema) Name:** | **questionHIVtestTargeted1** | |

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 650**

Definition: If you are unable to report funding allocations for targeted HIV testing by risk group or by race/ethnicity (above categories), please provide a brief explanation of any limitations to providing this level of detail.

Instructions: Please answer the question in 100 words or less.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Open ended question, free text field, may be left blank.

Num	Variable Name		

BT102m **Open-ended question 2 for Targeted HIV testing**   XSD (Schema) Name: **questionHIVtestTargeted2**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 650**

Definition: Please provide any additional information to explain funding allocation limitations or caveats for HIV testing that may be a concern to you, if applicable.

Instructions: Please answer the question in 100 words or less.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Open ended question, free text field, may be left blank.

BT103a **Amount of PS12-1201 Category A funds allocated for comprehensive prevention with positives**   XSD (Schema) Name: **amountCPPCateA**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For PS12-1201 Category A award (HIV Prevention Programs for Health Departments); this value represents the funding allocation associated with comprehensive prevention with positives (CPP) programs and services. CPP covers a range of prevention activities including Partner Services, continuum of care (linkage, retention, re-engagement in care, and treatment adherence), risk-reduction EBIs with HIV-positive people and other prevention programs that are targeted to HIV-diagnosed individuals and their partners.

Instructions: Indicate the amount of your PS 12-1201 Category A award that your agency allocated for comprehensive prevention with positives activities. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT103b **Amount of PS12-1201 Category B funds allocated for comprehensive prevention with positives**   XSD (Schema) Name: **amountCPPCateB**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For PS12-1201 Category B award (Expanded HIV Testing for Disproportionately Affected Populations); this value represents the funding allocation associated with comprehensive prevention with positives (CPP) programs and services. CPP covers a range of prevention activities including Partner Services, continuum of care (linkage, retention, re-engagement in care, and treatment adherence), risk-reduction EBIs with HIV-positives and other prevention programs that are targeted to HIV-diagnosed individuals and their partners.

Instructions: Indicate the amount of your PS 12-1201 Category B award that your agency allocated for comprehensive prevention with positives activities. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

NHME Variables and Values

Num	Variable Name				
BT103c	**Amount of PS12-1201 Category C funds allocated for comprehensive prevention with positives**	**XSD (Schema) Name:**	**amountCPPCateC**		

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For PS12-1201 Category C award (HIV Prevention Programs for Health Departments); this value represents the funding allocation associated with comprehensive prevention with positives (CPP) programs and services. CPP covers a range of prevention activities including Partner Services, continuum of care (linkage, retention, re-engagement in care, and treatment adherence), risk-reduction EBIs with HIV-positive people and other prevention programs that are targeted to HIV-diagnosed individuals and their partners.

Instructions: Indicate the amount of your PS12-1201 Category C award that your agency allocated for comprehensive prevention with positives activities. If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT103d	**Amount of CDC funds other than PS12-1201 allocated for comprehensive prevention with positives**	**XSD (Schema) Name:**	**amountCPPNon121201**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For CDC funds other than PS12-1201, this value represents the allocation associated with comprehensive prevention with positives (CPP). CPP includes Partner Services, continuum of care (linkage, retention, re-engagement in care, and treatment adherence), risk-reduction EBIs with HIV positive people and other prevention programs that are targeted to HIV-diagnosed individuals and their partners.

Instructions: Indicate the amount of CDC funds other than PS12-1201 award your agency allocated for comprehensive prevention with positives activities.

For all CDC funds excluding PS12-1201, this value represents the amount allocated for comprehensive prevention with positives that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).

If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT103e	**Amount of all CDC funds allocated to Partner Services**	**XSD (Schema) Name:**	**amountPSAll**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For all CDC funding, this value represents the allocation associated with Partner Services.

Instructions: Indicate the amount of all CDC funds your agency allocated to Partner Services. If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for comprehensive prevention with positives (Logic in DVS numbers: BT103e<=(BT103a+BT103b+BT103c+BT103d); Logic in schema names: amountPSAll<=(amountCPPCateA + amountCPPCateB + amountCPPCateC + amountCPPNon121201)).

NHME Variables and Values

Num	Variable Name		

BT103f   **Amount of all CDC funds allocated to HIV continuum of care**   **XSD (Schema) Name:**   **amountCCAll**

Value Option: N/A   **Format Type:**   **Currency**   **Min Length:**   **1**   **Max Length:**   **8**

Definition: For all CDC funding, this value represents the allocation associated with HIV continuum of care. HIV continuum of care activities include linkage, retention, and re-engagement in care, and HIV medication adherence support.

Instructions: Indicate the amount of all CDC funds your agency allocated to HIV continuum of care. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for comprehensive prevention with positives (Logic in DVS numbers: BT103f<=(BT103a+BT103b+BT103c+BT103d); Logic in schema names: amountCCAll<=(amountCPPCateA + amountCPPCateB + amountCPPCateC + amountCPPNon121201)).

BT103g   **Amount of all CDC funds allocated to Risk-Reduction EBIs with Positives**   **XSD (Schema) Name:**   **amountEBIAll**

Value Option: N/A   **Format Type:**   **Currency**   **Min Length:**   **1**   **Max Length:**   **8**

Definition: For all CDC funding, this value represents the allocation associated with risk-reduction EBIs with HIV positive persons.

Instructions: Indicate the amount of all CDC funds your agency allocated to risk-reduction EBIs with positive persons. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for comprehensive prevention with positives (Logic in DVS numbers: BT103g<=(BT103a+BT103b+BT103c+BT103d); Logic in schema names: amountEBIAll<=(amountCPPCateA + amountCPPCateB + amountCPPCateC + amountCPPNon121201)).

BT103h   **Amount of all CDC funds allocated to other comprehensive prevention with positives activities**   **XSD (Schema) Name:**   **amountOtherCPPAll**

Value Option: N/A   **Format Type:**   **Currency**   **Min Length:**   **1**   **Max Length:**   **8**

Definition: For all CDC funding, this value represents the allocation associated with comprehensive prevention with positive activities other than Partner services, continuum of care and risk-reduction EBIs with HIV positive persons.

Instructions: Indicate the amount of all CDC funds your agency allocated to other CPP activities. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for comprehensive prevention with positives (Logic in DVS numbers: BT103h<=(BT103a+BT103b+BT103c+BT103d); Logic in schema names: amountOtherCPPAll<=(amountCPPCateA + amountCPPCateB + amountCPPCateC + amountCPPNon121201)).

NHME Variables and Values

Num	Variable Name				
BT103i	**Open-ended question 1 for comprehensive prevention with positives**		**XSD (Schema) Name:**	**questionCPP1**	

Value Option: N/A **Format Type: Alpha-Numeric** **Min Length: 1** **Max Length: 650**

Definition: Please identify the specific prevention activities included in the allocations to "other CPP" activities category.

Instructions: Please answer the question in 100 words or less.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Open ended question, free text field, may be left blank.

BT103j	**Open-ended question 2 for comprehensive prevention with positives**		**XSD (Schema) Name:**	**questionCPP2**	

Value Option: N/A **Format Type: Alpha-Numeric** **Min Length: 1** **Max Length: 650**

Definition: Please provide any additional information to explain CPP-related funding allocation limitations or caveats that may be a concern to you, if applicable.

Instructions: Please answer the question in 100 words or less.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Open ended question, free text field, may be left blank.

BT104a	**Amount of PS12-1201 Category A funding allocated for condom distribution**		**XSD (Schema) Name:**	**amountCondomCateA**	

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 8**

Definition: For PS12-1201 Category A award (HIV Prevention Programs for Health Departments), this value represents the funding allocation associated with condom distribution.

Instructions: Indicate the amount of PS12-1201 Category A funds your agency allocated for condom distribution. If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT104b	**Amount of CDC funds other than PS12-1201 allocated for condom distribution**		**XSD (Schema) Name:**	**amountCondomNonPS121201**	

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 8**

Definition: For CDC funds other than PS12-1201, this value represents the allocation associated with condom distribution.

Instructions: Indicate the amount of CDC funds other than PS12-1201 your agency allocated for condom distribution. If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

NHME Variables and Values

Num	Variable Name		
BT104c	**Amount of all CDC funds allocated for condom distribution targeting HIV positives**	XSD (Schema) Name:	**amountCondomHIVpos**

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 8**

Definition:	For all CDC funds, this value represents the allocation associated with condom distribution that was targeting HIV-positive individuals.
Instructions:	Indicate the amount of all CDC funds your agency allocated to condom distribution for HIV positive individuals, if you can provide this level of information.
	If no funds were allocated then enter 0.
Business rules	Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.
	Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for condom distribution (Logic in DVS numbers: BT104c<=(BT104a+BT104b); Logic in schema names: amountCondomHIVPos<=(amountCondomCateA + amountCondomNonPS121201)).

Num	Variable Name		
BT104d	**Amount of all CDC funds allocated for condom distribution targeting high-risk individuals who are HIV-negative or whose HIV status is unknown**	XSD (Schema) Name:	**amountCondomHIVneg**

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 8**

Definition:	For all CDC funds, this value represents the allocation associated with condom distribution that was targeting high-risk individuals with HIV-negative or unknown status.
Instructions:	Indicate the amount of all CDC funds your agency allocated to condom distribution for high-risk individuals with HIV-negative or unknown status, if you can provide this level of information.
	For all CDC funds excluding PS12-1201, this value represents the amount allocated for condom distribution targeting high-risk individuals who are HIV negative or HIV status unknown that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).
	If no funds were allocated then enter 0.
Business rules	Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.
	Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for condom distribution (Logic in DVS numbers: BT104d<=(BT104a+BT104b); Logic in schema names: amountCondomHIVNeg<=(amountCondomCateA + amountCondomNonPS121201)).

Num	Variable Name		
BT104f	**Open-ended question 1 for condom distribution**	XSD (Schema) Name:	**questionCondom1**

Value Option: N/A **Format Type: Alpha-Numeric** **Min Length: 1** **Max Length: 650**

Definition:	If you are unable to report allocations to condom distribution for the three groups, please provide a brief explanation of any limitations to providing this level of detail.
Instructions:	Please answer the question in 100 words or less.
Business rules	Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.
	Open ended question, free text field, may be left blank.

Num	Variable Name		
BT104g	**Open-ended question 2 for condom distribution**	**XSD (Schema) Name:**	**questionCondom2**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 8**

Definition: Please provide any additional information to explain condom distribution-related funding allocation limitations or caveats that may be a concern to you, if applicable.

Instructions: Please answer the question in 100 words or less.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Open ended question, free text field, may be left blank.

BT105a	**Amount of PS12-1201 Category A allocated for Policy Initiatives**	**XSD (Schema) Name:**	**amountPolicyCateA**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For PS12-1201 Category A award (HIV Prevention Programs for Health Departments), this value represents the allocation associated with policy initiatives.

Instructions: Indicate the amount of PS12-1201 Category A funds your agency allocated for policy initiatives. If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT105b	**Amount of CDC funds other than PS12-1201 allocated for Policy Initiatives**	**XSD (Schema) Name:**	**amountPolicyNon121201**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For CDC funds other than PS12-1201, this value represents the allocation associated with policy initiatives.

Instructions: Indicate the amount of CDC funds other than PS12-1201 your agency allocated for policy initiatives.

For all CDC funds excluding PS12-1201, this value represents the amount allocated for policy initiatives that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).

If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

NHME Variables and Values

Num	Variable Name		
BT106a	**Amount of PS12-1201 Category A funds allocated for all PS12-1201 recommended components**	**XSD (Schema) Name:**	**amountRecommendCateA**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For PS12-1201 Category A award (HIV Prevention Programs for Health Departments) this value represents the allocation associated with all PS12-1201 recommended components (RC). RC includes evidence-based HIV prevention interventions for HIV-negative persons at highest risk of acquiring HIV, social marketing, media, and mobilization, and pre-exposure prophylaxis and non-occupational post-exposure prophylaxis services.

Instructions: Indicate the amount of PS12-1201 Category A funds your agency allocated for all recommended components, if implemented.

     If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT106b	**Amount of PS12-1201 Category B allocated for service integration (optional)**	**XSD (Schema) Name:**	**amountRecommendCateB**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For PS12-1201Category B award (Expanded HIV Testing for Disproportionately Affected Populations), this value represents the allocation associated with the optional services integration component.

Instructions: Indicate the amount of PS12-1201 Category B funds your agency allocated for the integration of testing programs for HIV, hepatitis B virus, hepatitis C virus, other STDs and tuberculosis, if implemented. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT106c	**Amount of CDC funds other than PS12-1201 allocated for all recommended components**	**XSD (Schema) Name:**	**amountRecommendNon121201**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For CDC funds other than PS12-1201, this value represents the annual allocation associated with all recommended components (RC). RC includes evidence-based HIV prevention interventions for HIV-negative persons at highest risk of acquiring HIV, social marketing, media, and mobilization, and pre-exposure prophylaxis and non-occupational post-exposure prophylaxis services.

Instructions: Indicate the amount of CDC funds other than PS12-1201 your agency allocated for all recommended components, if implemented.

     For all CDC funds excluding PS12-1201, this value represents the amount allocated for all recommended components that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).

     If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

NHME Variables and Values

Num	Variable Name		
BT106d	**Open-ended question for PS 12-1201 Category A funds allocated for Recommended Components**	**XSD (Schema) Name:**	**question121201RCCateA**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 650**

Definition:	If you have allocated PS12-1201 category A to recommended components, please give a brief list of programs or activities that you are going to implement.
Instructions:	Please answer the question in 100 words or less.
Business rules	Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.
	Open ended question, free text field, may be left blank.

Num	Variable Name		
BT106e	**Open-ended question for PS12-1201 Category B funds allocated for service integration**	**XSD (Schema) Name:**	**question121201RCCateB**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 650**

Definition:	If you have allocated PS12-1201 category B to integration of testing programs, please give a brief list of programs or activities that you implement.
Instructions:	Please answer the question in 100 words or less.
Business rules	Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.
	Open ended question, free text field, may be left blank.

Num	Variable Name		
BT106f	**Open-ended question for CDC funds other than PS 12-1201 allocated for PS12-1201 Recommended Components**	**XSD (Schema) Name:**	**questionnon121201RC**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 650**

Definition:	If you have allocated CDC funds other than PS 12-1201 to recommended components, please give a brief list of programs or activities that you implement.
Instructions:	Please answer the question in 100 words or less.
Business rules	Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.
	Open ended question, free text field, may be left blank.

Num	Variable Name		
BT107a	**Amount of PS12-1201 funds allocated for HIV prevention program monitoring and evaluation**	**XSD (Schema) Name:**	**amountMandE121201**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition:	For PS12-1201, this value represents the allocation associated with program monitoring and evaluation.
Instructions:	Indicate the amount of PS12-1201 award your agency allocated for program monitoring and evaluation. If no funds were allocated then enter 0.
Business rules	Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

NHME Variables and Values

Num	Variable Name		
BT107b	**Amount of CDC funds other than PS12-1201 allocated for program monitoring and evaluation**	**XSD (Schema) Name:**	**amountMandENon121201**

Value Option: **N/A**   **Format Type:** **Currency**   **Min Length:** **1**   **Max Length:** **8**

Definition: For CDC funds other than PS12-1201, this value represents the allocation associated with program monitoring and evaluation.

Instructions: Indicate the amount CDC funds other than PS12-1201 award your agency allocated for program monitoring and evaluation.

For all CDC funds excluding PS12-1201, this value represents the amount allocated for program monitoring and evaluation that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).

If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT108a	**Amount of PS12-1201 funding allocated for Jurisdictional HIV Prevention Planning**	**XSD (Schema) Name:**	**amountPlanning121201**

Value Option: **N/A**   **Format Type:** **Currency**   **Min Length:** **1**   **Max Length:** **8**

Definition: For PS12-1201, this value represents the allocation associated with jurisdictional HIV prevention planning.

Instructions: Indicate the amount of PS12-1201 award your agency allocated for jurisdictional HIV prevention planning. If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT108b	**Amount of CDC funds other than PS12-1201 allocated for Jurisdictional HIV Prevention Planning**	**XSD (Schema) Name:**	**amountPlanningNon121201**

Value Option: **N/A**   **Format Type:** **Currency**   **Min Length:** **1**   **Max Length:** **8**

Definition: For CDC funds other than PS12-1201, this value represents the allocation associated with jurisdictional HIV prevention planning.

Instructions: Indicate the amount of CDC funds other than PS12-1201 award your agency allocated for jurisdictional HIV prevention planning.

For all CDC funds excluding PS12-1201, this value represents the amount allocated for jurisdictional HIV prevention planning that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).

If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

NHME Variables and Values

Num	Variable Name			
BT109a	**Amount of PS12-1201 funding allocated for Capacity Building and Technical Assistance**	**XSD (Schema) Name:**	**amountCBTAPS121201**	

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 8**

Definition: For PS12-1201, this value represents the allocation associated with capacity building and technical assistance.

Instructions: Indicate the amount of PS12-1201 award your agency allocated for capacity building and technical assistance.   If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT109b	**Amount of CDC funds other than PS12-1201 allocated for Capacity Building and Technical Assistance**	**XSD (Schema) Name:**	**amountCBTANon121201**	

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 8**

Definition: For CDC funds other than PS12-1201, this value represents the allocation associated with capacity building and technical assistance.

Instructions: Indicate the amount CDC funds other than PS12-1201 award your agency allocated for capacity building and technical assistance.

For all CDC funds excluding PS12-1201, this value represents the amount allocated for capacity building and technical assistance that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).

If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

BT110a	**Amount PS12-1201 allocated for agency's general operations or admin activities**	**XSD (Schema) Name:**	**amountAdmin121201**	

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 8**

Definition: For PS12-1201, this value represents the allocation associated with agency's general operations or administrative activities.

Instructions: Indicate the amount of PS12-1201 award your agency allocated for agency's general operations or administrative activities. If no funds were allocated then enter 0.

Business rules Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Num	Variable Name		
BT110b	**Amount CDC funds other than PS12-1201 allocated for agency's general operations or admin activities**	**XSD (Schema) Name:**	**amountAdminNon121201**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 8**

Definition: For CDC funds other than PS12-1201, this value represents the allocation associated with agency's general operations or administrative activities.

Instructions: Indicate the amount CDC funds other than PS12-1201 award your agency allocated for agency's general operations or administrative activities.

For all CDC funds excluding PS12-1201, this value represents the amount allocated for general operations or administrative activities that uses funding sources other than PS12-1201. These funding sources include PS11-1117 (ECHPP), PS10-10175 (PCSI), and PS09-902 (STD Prevention).

If no funds were allocated then enter 0.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Num	Variable Name		
BT111	**Open-ended question for overall budget allocation**	**XSD (Schema) Name:**	**questionOverallBT**

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 650**

Definition: Please provide any additional information to explain funding allocation limitations or caveats that may be a concern to you, if applicable, for any of the budget allocation variables.

Instructions: Please answer the question in 100 words or less.

Business rules   Required for PS 12-1201 Category A, Category B, and Category C, and for all other CDC funds which support HIV prevention activities.

Open ended question, free text field, may be left blank.

NHME Variables and Values

CBO Client Level Requirements

Table: CBO	CBO Client-level Variables

This table is completed by all CDC directly funded community-based organizations funded by PS08-803, PS10-1003, or PS11-1113.

Num   *Variable Name*

CBO001   **Intervention funding category**   **XSD (Schema) Name:**

Value Option: N/A   **Format Type: Character**   **Min Length: 1**   **Max Length: 1**

Definition: The funding category under which the intervention is being delivered.

Instructions: Pre-populated based on CDC designation Category A or Category B

Business rules   Required for non-testing non-partner services.

Code	Value Description	Value Definition
A	Category A	Intervention funding Category A
B	Category B	Intervention funding Category B

CBO003   **Completed Intervention**   **XSD (Schema) Name:**

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 1**

Definition: Whether or not a client completes an intervention.

Instructions: Indicate whether the client completed all sessions of the intervention according to the intervention-specific definitions.

Business rules   Required for non-testing non-partner services.

Code	Value Description	Value Definition
0	No	Client did not complete the intervention
1	Yes	Client completed the intervention

Num	Variable Name		
CBO004	**Vaginal or Anal sex with a male partner**	**XSD (Schema) Name:**	

Value Option: Choose only one	**Format Type:** Number	**Min Length:** 1	**Max Length:** 2

Definition: A client's self-report of having had vaginal or anal sex with a male in the last 12 months.

Instructions: This question applies only to anal or vaginal sex and does not apply to oral sex.

Business rules Required for non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*Client did not have vaginal or anal sex with a male partner in the past 12 months*
1	Yes	*Client reported having vaginal or anal sex with a male partner in the past 12 months*
66	Not asked	*Client was not asked if he or she had vaginal or anal sex with a male partner in the past 12 months*
77	Declined to answer	*Client declined or is unwilling to report if he or she had vaginal or anal sex with a male partner in the past 12 months*

CBO005	**Injected drugs**	**XSD (Schema) Name:**	

Value Option: Choose only one	**Format Type:** Number	**Min Length:** 1	**Max Length:** 2

Definition: A client's self-report of whether he or she used hypodermic needles, syringes, or other injection drug equipment to inject illicit drugs/substances (including narcotics, hormones, silicon, etc.) at least once in the past 12 months. Illicit injection drugs/substances are those for which a client does not have a prescription (or used in a way other than is prescribed) or drugs/substances that are not available over the counter (or used in a way other than intended).

Instructions:

Business rules Required for non-testing non-partner services.

Code	Value Description	Value Definition
0	No	*Client did not inject illicit drugs/substances in the past 12 months*
1	Yes	*Client reported he or she injected illicit drugs/substances at least once in the past 12 months*
66	Not asked	*Client was not asked if he or she injected illicit drugs/substances in the past 12 months*
77	Declined to answer	*Client declined or is unwilling to report if he or she injected illicit drugs/substances in the past 12 months*

NHME Variables and Values

Num	Variable Name

CBO006 **HIV Positive** XSD (Schema) Name:

Value Option: Choose only one **Format Type: Number** **Min Length: 1** **Max Length: 2**

Definition: A client's self-report of whether he or she has received a positive HIV test result.

Instructions:

Business rules Required for non-testing non-partner services.

Code	Value Description	Value Definition
0	No	Client is not HIV positive
1	Yes	Client reported he or she is HIV positive
66	Not asked	Client was not asked if he or she is HIV positive
77	Declined to answer	Client declined or is unwilling to report if he or she is HIV positive
99	Don't know	Client doesn't know if he or she is HIV positive

CBO007 **Condom distribution date** XSD (Schema) Name:

Value Option: N/A **Format Type: Date** **Min Length: 10** **Max Length: 10**

Definition: The calendar month, day, and year on which a client first receives condoms in conjunction with another HIV prevention service (i.e., HIV prevention intervention, referral to HIV prevention and support services, referrals and linkage specifically for positives).

Instructions: Enter the calendar month, day, and year client was provided condoms. To be completed for PS11-1113 only.

Business rules Client-level variable should be completed for PS11-1113 only.

CBO008 **Basic education continuation and/or completion services** XSD (Schema) Name:

Value Option: N/A **Format Type: Date** **Min Length: 10** **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for basic education and/or completion services. Basic education and/or completion services include programs that help improve basic reading, writing, math, spelling, and language skills (such as GED preparation, or English as a Second Language (ESL) classes).

Instructions: Enter the calendar month, day, and year of each referral for basic education and/or completion services that a client receives.

Business rules Required for non-testing non-partner services.

Num	Variable Name

CBO009 **Behavioral interventions for HIV prevention**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for behavioral interventions for HIV prevention. HIV prevention interventions may be implemented internally by the CBO or by an external agency. The intervention does not have to be funded or approved by CDC.

Instructions: Enter the calendar month, day, and year of each referral for behavioral interventions for HIV prevention that a client receives.

Business rules Required for non-testing non-partner services.

CBO010 **Dental care**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day, and year of each referral a client receives for dental care.

Instructions: Enter the calendar month, day, and year of each referral for dental care that a client receives.

Business rules Required for non-testing non-partner services.

CBO011 **Employment and readiness and referral programs**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for employment and readiness and referral programs. Employment and readiness and referral programs are programs that provide employment assistance, training, and employment referral services.

Instructions: Enter the calendar month, day, and year of each referral for employment and readiness programs that a client receives.

Business rules Required for non-testing non-partner services.

CBO012 **Food/clothing/other basic needs**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for food, clothing, or other basic needs.

Instructions: Enter the calendar month, day, and year of each referral for food, clothing, or other basic needs that a client receives.

Business rules Required for non-testing non-partner services.

CBO013 **HIV testing**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for HIV testing.

Instructions: Enter the calendar month, day, and year of each referral for HIV testing that a client receives.

Business rules Required for non-testing non-partner services.

NHME Variables and Values

Num	Variable Name

CBO014   **Housing services**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day and year of each referral that a client receives for housing services. Housing services are programs that help clients find adequate housing by providing services such as assistance with homelessness, rental housing, or home-buying.

Instructions: Enter the calendar month, day, and year of each referral for housing services that a client receives.

Business rules Required for non-testing non-partner services.

CBO015   **Insurance enrollment**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for insurance enrollment. Insurance enrollment includes programs that help uninsured clients enroll in public or private healthcare insurance.

Instructions: Enter the calendar month, day, and year of each referral for insurance enrollment that a client receives.

Business rules Required for non-testing non-partner services.

CBO016   **Mental health services program**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day and year of each referral that a client receives for mental health services. Mental health services are programs that are provided by a mental health professional.

Instructions: Enter the calendar month, day, and year of each referral for a mental health services program that a client receives.

Business rules Required for non-testing non-partner services.

CBO017   **Post-exposure prophylaxis**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for post-exposure prophylaxis (PEP). Post-exposure prophylaxis (PEP) is prophylactic treatment immediately after client's exposure to disease.

Instructions: Enter the calendar month, day, and year of each referral for post-exposure prophylaxis that a client receives.

Business rules Required for non-testing non-partner services.

CBO018   **Pre-exposure prophylaxis**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for pre-exposure prophylaxis (PrEP). Pre-exposure prophylaxis (PrEP) is prophylactic treatment before client's exposure to disease.

Instructions: Enter the calendar month, day, and year of each referral for pre-exposure prophylaxis that a client receives.

Business rules Required for non-testing non-partner services.

Num	Variable Name

CBO019 **Primary health care** XSD (Schema) Name:

Value Option: N/A **Format Type: Date** **Min Length: 10** **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for primary health care. Primary health care is health care that is provided by medical providers who practice general medicine.

Instructions: Enter the calendar month, day, and year of each referral for primary health care that a client receives.

Business rules Required for non-testing non-partner services.

CBO020 **Screening and/or treatment for Hepatitis** XSD (Schema) Name:

Value Option: N/A **Format Type: Date** **Min Length: 10** **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for the screening and/or treatment for Hepatitis.

Instructions: Enter the calendar month, day, and year of each referral for the screening and/or treatment for Hepatitis that a client receives.

Business rules Required for non-testing non-partner services.

CBO021 **Screening and/or treatment for STDs** XSD (Schema) Name:

Value Option: N/A **Format Type: Date** **Min Length: 10** **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for the screening and/or treatment for STDs.

Instructions: Enter the calendar month, day, and year of each referral for the screening and/or treatment for STDs that a client receives.

Business rules Required for non-testing non-partner services.

CBO022 **Screening and/or treatment for substance abuse** XSD (Schema) Name:

Value Option: N/A **Format Type: Date** **Min Length: 10** **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for the screening and/or treatment for substance abuse.

Instructions: Enter the calendar month, day, and year of each referral for the screening and/or treatment for substance abuse that a client receives.

Business rules Required for non-testing non-partner services.

CBO023 **Screening and/or treatment for TB** XSD (Schema) Name:

Value Option: N/A **Format Type: Date** **Min Length: 10** **Max Length: 10**

Definition: The calendar month, day, and year of each referral that a client receives for the screening and/or treatment for TB.

Instructions: Enter the calendar month, day, and year of each referral for the screening and/or treatment for TB that a client receives.

Business rules Required for non-testing non-partner services.

NHME Variables and Values

Num	Variable Name

CBO024   **Support groups**   XSD (Schema) Name:

Value Option: **N/A**   **Format Type:** **Date**   **Min Length:** **10**   **Max Length:** **10**

Definition: The calendar month, day, and year of each referral that a client receives for peer support groups.

Instructions: Enter the calendar month, day, and year of each referral for support groups that a client receives.

Business rules   Required for non-testing non-partner services.

CBO025   **Syringe services program**   XSD (Schema) Name:

Value Option: **N/A**   **Format Type:** **Date**   **Min Length:** **10**   **Max Length:** **10**

Definition: The calendar month, day, and year of each referral that a client receives for a syringe services program.

Instructions: Enter the calendar month, day, and year of each referral for a syringe services program that a client receives.

Business rules   Required for non-testing non-partner services.

CBO026   **Transgender transition support services**   XSD (Schema) Name:

Value Option: **N/A**   **Format Type:** **Date**   **Min Length:** **10**   **Max Length:** **10**

Definition: The calendar month, day, and year of each referral that a client receives for transgender support services. Transgender support services include programs that support issues specific to transgender clients including name change, gender reassignment, etc.

Instructions: Enter the calendar month, day, and year of each referral for transgender transition services that a client receives.

Business rules   Required for non-testing non-partner services.

CBO027   **Specify other service**   XSD (Schema) Name:

Value Option: **N/A**   **Format Type:** **Alpha-Numeric**   **Min Length:** **1**   **Max Length:** **50**

Definition: Description of a service for which the client received a referral. The service cannot be classified by one of the previously specified referral categories.

Instructions: Enter the name of any other referral service that a client receives.

Business rules   Required for non-testing non-partner services.

CBO028   **Other services date**   XSD (Schema) Name:

Value Option: **N/A**   **Format Type:** **Date**   **Min Length:** **10**   **Max Length:** **10**

Definition: The calendar month, day and year of each referral that a client receives for other, specified services.

Instructions: Enter the calendar month, day, and year of each referral for other services that was given to a client.

Business rules   Required for non-testing non-partner services. Complete only if there is an entry for specify other service (CBO027 Is Not Missing)

NHME Variables and Values

Num	Variable Name

CBO029 **Discussion Date** XSD (Schema) Name:

Value Option: N/A **Format Type: Date** **Min Length: 10** **Max Length: 10**

Definition: The calendar month, day, and year that CBO staff initiate discussion of referral and linkage to HIV medical care with client.

Instructions: Enter the calendar month, day, and year that the CBO staff initiate discussion of referral and linkage to HIV medical care with client.

Business rules Required for non-testing non-partner services.

CBO030 **Date of HIV positive diagnosis** XSD (Schema) Name:

Value Option: N/A **Format Type: Month/Year** **Min Length: 7** **Max Length: 7**

Definition: The calendar month and year that a client received a positive HIV test result.

Instructions: Enter the calendar month and year that a client received a positive HIV test result.

Business rules Required for non-testing non-partner services.

CBO031 **No Date of HIV positive diagnosis** XSD (Schema) Name:

Value Option: Choose only one **Format Type: Number** **Min Length: 2** **Max Length: 2**

Definition: Reason date of HIV positive diagnosis is not provided.

Instructions: Complete only if HIV positive diagnosis date is not provided.

Business rules Required for non-testing non-partner services. Select an option only if date of HIV positive diagnosis is not entered (CBO030 = Missing).

Code	Value Description	Value Definition
66	*Not asked*	*Client was not asked to provide the date he or she was diagnosed with HIV infection*
77	*Declined to answer*	*Client declined or is unwilling to report the date he or she was diagnosed with HIV infection*

NHME Variables and Values

Num	Variable Name		
CBO032	**Client currently in HIV medical care**	**XSD (Schema) Name:**	

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 2**

Definition: A client's self-report of whether he or she is currently seeing an HIV medical care provider.

Instructions:

Business rules Required for non-testing non-partner services.

Code	Value Description	Value Definition
1	Yes	Client is currently in HIV medical care
2	No	Client is not in HIV medical care
66	Not asked	Client was not asked if he or she is currently in HIV medical care
77	Declined to answer	Client declined or is unwilling to report if he or she is currently in HIV medical care

CBO033	**Referred to HIV medical care**	**XSD (Schema) Name:**	

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **Max Length: 1**

Definition: CBO report of whether CBO staff referred a client who is not currently in care to HIV medical care.

Instructions: Complete only if client is not currently in HIV medical care.

Business rules Required for non-testing non-partner services. If Yes, skip to Evidence-based linkage to care activity (CBO036).

Code	Value Description	Value Definition
1	Yes	CBO staff referred a client who is not currently in care to HIV medical care
2	No, referral offered, but client declined	CBO staff offered to refer a client to HIV medical care, but client declined
3	No, other reason	CBO staff did not refer client to HIV medical care for some other reason

CBO034	**Date HIV medical care referral was made**	**XSD (Schema) Name:**	

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: The calendar month, day, and year on which CBO staff refer a client who is not currently in care to HIV medical care.

Instructions: Enter the calendar month, day, and year on which CBO staff refer a client who is not currently in care to HIV medical care.

Business rules Required for non-testing non-partner services. Skip if client is currently in HIV medical care (CBO033=1).

NHME Variables and Values

Num	Variable Name			
CBO035	**Date of first medical appointment**	**XSD (Schema) Name:**		

Value Option: N/A   **Format Type:** Date   **Min Length:** 10   **Max Length:** 10

Definition: The calendar month, day, and year on which the client attends his or her first medical appointment after referral is made by the CBO.

Instructions: Enter the calendar month, day, and year on which the client attends his or her first medical appointment after referral is made by the CBO.

Business rules   Required for non-testing non-partner services. Skip if client is currently in HIV medical care (CBO036=1).

| **CBO036** | **Evidence-based linkage to care activity** | **XSD (Schema) Name:** | | |

Value Option: N/A   **Format Type:** Date   **Min Length:** 10   **Max Length:** 10

Definition: The calendar month, day, and year of each referral that a client receives for an evidence-based linkage to care activity. Evidence-based linkage to care activities are evidence-based interventions that help clients link to care (e.g. ARTAS).

Instructions: Enter the calendar month, day, and year of each referral a client receives for an evidence-based linkage to care activity.

Business rules   Required for non-testing non-partner services.

| **CBO037** | **HIV Medical Care (after unsuccessful initial attempt to refer and/or link to care, or client needs to be re-engaged in care)** | **XSD (Schema) Name:** | | |

Value Option: N/A   **Format Type:** Date   **Min Length:** 10   **Max Length:** 10

Definition: The calendar month, day, and year of each referral that a client receives for HIV medical care after an unsuccessful initial attempt to refer and/or link to care, or for a client who needs to be re-engaged in care.

Instructions: Enter the calendar month, day, and year of each referral a client receives for medical care after an unsuccessful initial attempt to refer and/or link to care or for a client who needs to be re-engaged in care.

Business rules   Required for non-testing non-partner services.

| **CBO038** | **Partner services** | **XSD (Schema) Name:** | | |

Value Option: N/A   **Format Type:** Date   **Min Length:** 10   **Max Length:** 10

Definition: The calendar month, day, and year of each referral that a client receives for partner services.

Instructions: Enter the calendar month, day, and year of each referral a client receives for partner services given to the client.

Business rules   Required for non-testing non-partner services.

| **CBO039** | **Treatment adherence services, including adherence to ARV** | **XSD (Schema) Name:** | | |

Value Option: N/A   **Format Type:** Date   **Min Length:** 10   **Max Length:** 10

Definition: The calendar month, day, and year of each referral that a client receives for treatment adherence services, including adherence to ARV.

Instructions: Enter the calendar month, day, and year of each referral a client receives for treatment adherence services, including adherence to ARV.

Business rules   Required for non-testing non-partner services.

NHME Variables and Values

Num	Variable Name		

CBO040 **Specify other service for positives**   XSD (Schema) Name:

Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 0	Max Length: 50

Definition: Description of the service for positives that the client received a referral for. The service cannot be classified by one of the previously specified referrals for positives.

Instructions: Enter the name of any other referral service for positives that a client receives.

Business rules Required for non-testing non-partner services.

CBO041 **Other service for positives date**   XSD (Schema) Name:

Value Option: N/A	Format Type: Date	Min Length: 10	Max Length: 10

Definition: The calendar month, day, and year of each referral that a client receives for other services for HIV positive clients.

Instructions: Enter the calendar month, day, and year of each referral a client receives for other services provided to HIV positive clients.

Business rules Required for non-testing non-partner services. Complete only if there is an entry for specify other referral services for positives (CBO040 Is Not Missing)

CBO042 **No Date of Birth**   XSD (Schema) Name:

Value Option: Choose only one	Format Type: Number	Min Length: 2	Max Length: 2

Definition: Reason date of birth is not provided.

Instructions: Select an option only if client's date of birth is not provided.

Business rules Select an option only if date of birth is not entered ((G110 and G111 and G112) = Missing).

Code	Value Description	Value Definition
66	*Not Asked*	*CBO staff did not ask client's date of birth*
77	*Declined to answer*	*Client declined or is unwilling to provide his or her date of birth.*

NHME Variables and Values

CBO Aggregate Level Requirements

Table: CBO-AG   CBO Aggregate-level Variables

This table is completed by CDC directly funded community-based organizations funded by PS08-803, PS10-1003, or PS11-1113 to conduct Community-level interventions (CLIs) or Condom distribution as required by PS11-1113.

Num   *Variable Name*

CBOAG00a Aggregate Reporting Date   XSD (Schema) Name:

Value Option: N/A   **Format Type: Month/Year**   **Min Length: 7**   **Max Length: 7**

Definition: The calendar month and year for reported aggregate data.

Instructions: Aggregate data are to be captured monthly, beginning with the first month of the budget year.

Business rules   Reported by directly funded CBOs conducting the following CLIs: Community PROMISE (H01b=1.01), d-up! (H01b=1.19), Mpowerment (H01b=1.05), POL (H01b=1.06), RAPP (H01b=1.07).

CBOAG01   Peer Educators   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 5**

Definition: Number of peer educators who attended all required training sessions as planned (according to EBI guidance or approved adaptation).

Instructions: Value should be between 0-10,000. If value is > 1000, then confirm accuracy of value. Only CBOs conducting the following CLIs will collect this aggregate-level variable: Community PROMISE, d-up!; POL; RAPP.

Business rules   Aggregate-level variable should only be reported by directly funded CBOs conducting the following CLIs: Community PROMISE (H01b=1.01), d-up! (H01b=1.19), POL (H01b=1.06), RAPP (H01b=1.07).

CBOAG02   Risk Conversations   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 5**

Definition: Number of conversations conducted by trained peer educators that include risk reduction messaging.

Instructions: Value should be between 0-10,000. Only CBOs conducting the following CLIs will collect this aggregate-level variable: d-up!; POL; RAPP.

Business rules   Aggregate-level variable should only be reported by directly funded CBOs conducting the following CLIs: d-up! (H01b=1.19), POL (H01b=1.06), RAPP (H01b=1.07).

CBOAG03   Small media   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 5**

Definition: Total number of outreach materials distributed to the target population that promote HIV risk reduction.

Instructions: Value should be between 0-10,000. Only CBOs conducting the following CLIs will collect this aggregate-level variable: Community PROMISE; Mpowerment; RAPP.

Business rules   Aggregate-level variable should only be reported by directly funded CBOs conducting the following CLIs: Community PROMISE (H01b=1.01), Mpowerment (H01b=1.05), RAPP (H01b=1.07).

NHME Variables and Values

Num	Variable Name

CBOAG04   **Formal outreach events**

XSD (Schema) Name:

Value Option: N/A   **Format Type:** Number   **Min Length:** 1   **Max Length:** 4

Definition: Number of outreach events planned and conducted where safer sex or HIV risk reduction is promoted.

Instructions: Value should be between 0-1000. Only CBOs conducting the following CLIs will collect this aggregate-level variable: Mpowerment; RAPP.

Business rules   Aggregate-level variable should only be reported by directly funded CBOs conducting the following CLIs: Mpowerment (H01b=1.05), RAPP (H01b=1.07).

CBOAG05   **Condoms distributed as part of CLI**

XSD (Schema) Name:

Value Option: N/A   **Format Type:** Number   **Min Length:** 1   **Max Length:** 6

Definition: Total number of condoms that are distributed specifically as part of the community-level intervention.

Instructions: Value should be between 0-250,000. Only CBOs conducting the following CLIs will collect this aggregate-level variable: Community PROMISE; Mpowerment; RAPP.

Business rules   Aggregate-level variable should only be reported by directly funded CBOs conducting the following CLIs: Community PROMISE (H01b=1.01), Mpowerment (H01b=1.05), RAPP (H01b=1.07).

CBOAG06   **Total condoms purchased**

XSD (Schema) Name:

Value Option: N/A   **Format Type:** Number   **Min Length:** 1   **Max Length:** 6

Definition: Total number of all condoms bought using PS11-1113 funding.

Instructions: Value should be between 0-250,000.

Business rules   Aggregate-level variable should only be reported by directly funded CBOs funded by PS11-1113.

CBOAG07   **Condoms distributed for high-risk negative/HIV status unknown persons**

XSD (Schema) Name:

Value Option: N/A   **Format Type:** Number   **Min Length:** 1   **Max Length:** 6

Definition: Number of condoms that were provided during activities approved by and paid for by PS11-1113 funding intended to reach persons at high-risk of acquiring HIV who are currently HIV negative or unaware of their HIV status.

Instructions: Value should be between 0-250,000.

Business rules   Aggregate-level variable should only be reported by directly funded CBOs funded by PS11-1113.

CBOAG08   **Condoms distributed for HIV positive persons**

XSD (Schema) Name:

Value Option: N/A   **Format Type:** Number   **Min Length:** 1   **Max Length:** 6

Definition: Number of condoms that were provided during activities approved by and paid for by PS11-1113 funding intended to reach persons who are HIV positive.

Instructions: Value should be between 0-250,000.

Business rules   Aggregate-level variable should only be reported by directly funded CBOs funded by PS11-1113.

NHME Variables and Values

CBO Targets

Table: CBO-TG   CBO Targets

This table is completed annually by CDC directly funded community-based organizations funded by PS08-803, PS10-1003, or PS11-1113.

Num   *Variable Name*

CBOTG00 **Budget Start Date**   **XSD (Schema) Name:**

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: Budget period start date

Instructions: Enter the month, day, and year of the start of the budget period for the CDC funded program announcement.

Business rules

CBOTG00a **Budget End Date**   **XSD (Schema) Name:**

Value Option: N/A   **Format Type: Date**   **Min Length: 10**   **Max Length: 10**

Definition: Budget period end date

Instructions: Enter the month, day, and year of the end of the budget period for the CDC funded program announcement.

Business rules

CBOTG01 **Target for HIV testing events**   **XSD (Schema) Name:**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 5**

Definition: Number of HIV testing events the CBO plans to provide to clients.

Instructions: Value should be between 0-10,000.

Business rules Required for non-testing non-partner services.

CBOTG02 **Target for newly-identified HIV positive tests**   **XSD (Schema) Name:**

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: Percentage of total testing events that will be associated with a newly-identified HIV infection.

Instructions: % Value should be between 0-100.

Business rules Required for non-testing non-partner services.

Num	Variable Name

CBOTG03 **Target for receipt of results**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: Percentage of total newly-identified HIV positive testing events for which clients will receive their HIV positive test result.

Instructions: % Value should be between 0-100.

Business rules   Required for non-testing non-partner services.

CBOTG04 **Target for referral to HIV medical care (test-level)**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: Percentage of total newly-identified HIV positive testing events for which clients will receive a referral to HIV medical care. This target is set only for referrals provided through HIV testing events.

Instructions: % Value should be between 0-100.

Business rules   Required for non-testing non-partner services.

CBOTG05 **Target for linkage to HIV medical care (test-level)**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: Percentage of total newly-identified HIV positive testing events for which clients will be linked to HIV medical care (i.e., referred to HIV medical care and attended first appointment within 3 months of diagnosis). This target is set only for linkage to care through HIV testing events.

Instructions: % Value should be between 0-100.

Business rules   Required for non-testing non-partner services.

CBOTG06 **Target for referral to Partner Services**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: Percentage of total newly-identified HIV positive testing events for which clients will be referred to Partner Services. This target is set only for referral to Partner Services provided through HIV testing events.

Instructions: % Value should be between 0-100.

Business rules   Required for non-testing non-partner services.

CBOTG07 **Target for referral to prevention services**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: Percentage of total newly-identified HIV positive testing events for which clients will be referred to prevention services. This target is set only for referral to prevention services provided through HIV testing events.

Instructions: % Value should be between 0-100.

Business rules   Required for non-testing non-partner services.

NHME Variables and Values

Num	Variable Name			

CBOTG08 **Target for intervention enrollment** XSD (Schema) Name:

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 4**

Definition: Number of clients that will be enrolled in each HIV prevention intervention that the CBO is funded to conduct.

Instructions: Value should be between 0-5,000.

Business rules Required for non-testing non-partner services.

CBOTG09 **Target for intervention completion** XSD (Schema) Name:

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 3**

Definition: Percentage of clients enrolled in each intervention that will complete the intervention (according to EBI guidance or approved adaptation).

Instructions: % Value should be between 0-100.

Business rules Required for non-testing non-partner services.

CBOTG10 **Target for intervention enrollment of HIV positives** XSD (Schema) Name:

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 3**

Definition: Percentage of clients who will enroll in each intervention who are HIV positive.

Instructions: % Value should be between 0-100.

Business rules Required for non-testing non-partner services.

CBOTG11 **Target for M-group and RAPP enrollment** XSD (Schema) Name:

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 4**

Definition: Number of clients that will be enrolled in the M group and RAPP HIV informational sessions.

Instructions: Value should be between 0-5,000. Only CBOs conducting the following CLIs will report this target: Mpowerment; RAPP.

Business rules Target should only be reported by directly funded CBOs conducting the following CLIs: Mpowerment (H01b=1.05), RAPP (H01b=1.07).

CBOTG12 **Target for peer educator training** XSD (Schema) Name:

Value Option: N/A **Format Type: Number** **Min Length: 1** **Max Length: 4**

Definition: Number of peer educators who will attend all required training sessions as planned (according to EBI guidance or approved adaptation).

Instructions: Value should be between 0-1000. Only CBOs conducting the following CLIs will report this target: Community PROMISE, d-up!; POL; RAPP.

Business rules Target should only be reported by directly funded CBOs conducting the following CLIs: Community PROMISE (H01b=1.01), d-up! (H01b=1.19), POL (H01b=1.06), RAPP (H01b=1.07).

NHME Variables and Values

Num	Variable Name

CBOTG13 **Target for risk reduction conversations**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 5**

Definition: Number of conversations conducted by trained peer educators that include risk reduction messaging that will take place (e.g., informal outreach, stage-based encounters).

Instructions: Value should be between 0-10,000. Only CBOs conducting the following CLIs will report this target: d-up!; POL; RAPP.

Business rules Target should only be reported by directly funded CBOs conducting the following CLIs: d-up! (H01b=1.19), POL (H01b=1.06), RAPP (H01b=1.07).

CBOTG14 **Target for small media**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 5**

Definition: Total number of outreach materials that will be distributed to the target population that promote HIV risk reduction.

Instructions: Value should be between 0-10,000. Only CBOs conducting the following CLIs will report this target: Community PROMISE; Mpowerment; RAPP.

Business rules Target should only be reported by directly funded CBOs conducting the following CLIs: Community PROMISE (H01b=1.01), Mpowerment (H01b=1.05), RAPP (H01b=1.07).

CBOTG15 **Target for formal outreach**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 4**

Definition: Number of outreach events planned and conducted where safer sex or HIV risk reduction is promoted.

Instructions: Value should be between 0-1000. Only CBOs conducting the following CLIs will report this aggregate-level variable: Mpowerment; RAPP.

Business rules Target should only be reported by directly funded CBOs conducting the following CLIs: Mpowerment (H01b=1.05), RAPP (H01b=1.07).

CBOTG16 **Target for condom distribution for CLIs**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 6**

Definition: Number of condoms that will be distributed specifically as part of the community-level intervention.

Instructions: Value should be between 0-250,000. Only CBOs conducting the following CLIs will report this target: Community PROMISE; Mpowerment; RAPP.

Business rules Target should only be reported by directly funded CBOs conducting the following CLIs: Community PROMISE (H01b=1.01), Mpowerment (H01b=1.05), RAPP (H01b=1.07).

CBOTG17 **Target for client-level condom distribution**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: Percentage of the total number of clients receiving at least one PS11-1113 funded program activity (e.g., HIV prevention intervention, referral, or linkage to HIV medical care) who will be provided condoms.

Instructions: % Value should be between 0-100.

Business rules Target should only be reported by directly funded CBOs funded by PS11-1113.

NHME Variables and Values

Num	Variable Name

CBOTG18 **Target for total condoms purchased**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 6**

Definition: Total number of condoms that will be purchased through PS11-1113 funds.

Instructions: Value should be between 0-250,000.

Business rules   Target should only be reported by directly funded CBOs funded by PS11-1113.

CBOTG19 **Target for HIV positives referred to HIV medical care (client-level)**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: Percentage of HIV positive clients receiving referrals and linkage specifically for positives who are not yet in HIV medical care who will be referred to HIV medical care.

Instructions: % Value should be between 0-100.

Business rules   Required for non-testing non-partner services.

CBOTG20 **Target for HIV positives linked to HIV medical care (client-level)**   XSD (Schema) Name:

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 3**

Definition: Percentage of HIV positive clients who are referred to HIV medical care who will attend their HIV medical care appointment.

Instructions: % Value should be between 0-100.

Business rules   Required for non-testing non-partner services.

Num   *Variable Name*