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.

Please note: for jurisdictions that upload CT data, there is currently no way to enter the actual name of the agency via XML upload. The system substitutes the Agency ID for the name. System administrators can log into EvaluationWeb(r) and update this field to their actual name.

Business rule
HIV Testing: Required, see business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Allowed, but not reported to CDC

Business rule:
Required for testing events reported by agencies funded by PS12-1201 Category A, B or C (DVS#X137; progAnnouncementProgStrategy=1, 2 or 3).
Not expected otherwise.

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

Value Option: N/A	**Format Type:** **Alpha-Numeric**	**Min Length:** **1**	**Max Length:** **32**

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 rule
HIV Testing: Mandatory, see additional business rule
Partner Services: Mandatory
HD Risk Reduction Activities: Mandatory
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Allowed, but not reported to CDC

Additional business rule:
Mandatory for testing events reported by agencies funded by PS12-1201 Category A, B or C (DVS# X137; progAnnouncementProgStrategy = 1, 2 or 3). Either agencyID or CBOAgencyID is mandatory for all testing events.

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: 3**

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 code 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. FIPS codes contain leading zeros when applicable.

Business rule HIV Testing: Mandatory
Partner Services: Mandatory
HD Risk Reduction Activities: Mandatory
CBO Risk Reduction Activities: Mandatory
HD Aggregate: Mandatory

Code	Value Description	Value Definition
01	AL	Alabama
02	AK	Alaska
04	AZ	Arizona
05	AR	Arkansas
06	CA	California
08	CO	Colorado
09	CT	Connecticut
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
20	KS	Kansas
21	KY	Kentucky
22	LA	Louisiana

NHME Variables and Values

Num	Variable Name	
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
37	NC	North Carolina
38	ND	North Dakota
39	OH	Ohio
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
50	VT	Vermont
51	VA	Virginia
53	WA	Washington
54	WV	West Virginia
55	WI	Wisconsin
56	WY	Wyoming
60	AS	American Samoa

Num	Variable Name	
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.
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
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
90	San Juan, PR	Puerto Rico Department of Health
91	Fort Lauderdale, FL	Florida Department of Health
999	CDC-Directly Funded CBO	CDC-Directly Funded CBO Instance

Num	Variable Name			
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.

Please note: for CBOs that upload CT data, there is currently no way to enter the actual name of the CBO via XML upload. The system substitutes the CBO ID for the name. System administrators can log into EvaluationWeb® and update this field to their actual name.

Business rule   HIV Testing: Required, see business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Allowed, but not reported to CDC
CBO Aggregate: Not applicable

Business rule for HIV testing:
Required for testing events funded by PS10-1003, PS11-1113 Category A or B, PS13-1310, and PS15-1502 (X137=5 or 6 or 8 or 9 or 11 or 13 or 14).
Not expected otherwise.

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: 5**   **Max Length: 5**

Definition: An alpha-numeric identification assigned by CDC to community-based organizations that CDC has directly funded since January 1, 2012.

Instructions: Enter the CDC assigned CBO Agency ID.

Business rule
HIV Testing: Mandatory, see additional business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Mandatory
HD Aggregate: Allowed, but not reported to CDC

Additional business rule for HIV testing:
Mandatory for testing events funded by PS10-1003, PS11-1113 Category A or B, PS13-1310, and PS15-1502 Category A or B; (X137=5 or 6 or 8 or 9 or 11 or 13 or 14). Either agencyID or CBOAgencyID is mandatory for all testing events.

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
AL004	Birmingham AIDS Outreach	CDC directly funded community-based organization, Birmingham, AL
AZ001	Southern Arizona AIDS Foundation	CDC directly funded community-based organization, Tucson, AZ
AZ002	Ebony House, Inc.	CDC directly funded community-based organization, Phoenix, AZ
AZ003	Native American Community Health Center, Inc.	CDC directly funded community-based organization, Phoenix, 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

Num	Variable Name	
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
CA023	AIDS Services Foundation Orange County	CDC directly funded community-based organization, Irvine, CA
CA024	Centro de Salud de San Ysidro dba San Ysidro Health Center	CDC directly funded community-based organization, San Diego, CA
CA025	Black AIDS Institute/African-American AIDS Policy & Training Institute	CDC directly funded community-based organization, Los Angeles, CA
CA026	San Francisco AIDS Foundation	CDC directly funded community-based organization, San Francisco, CA
CO001	Empowerment Program	CDC directly funded community-based organization, Denver, CO
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
DC008	Family and Medical Counseling Service, 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

NHME Variables and Values

Num	Variable Name	
FL005	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
FL011	Metropolitan Charities, Inc.	CDC directly funded community-based organization, St. Petersburg, 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
GA005	Empowerment Resource Center	CDC directly funded community-based organization, Atlanta, GA
GA006	Recovery Consultants of Atlanta, Inc.	CDC directly funded community-based organization, Decatur, GA
GA007	Positive Impact Health Centers, Inc.	CDC directly funded community-based organization, Atlanta, 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	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	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
IL011	Association House of Chicago	CDC directly funded community-based organization, Chicago, IL
IL012	Howard Brown Heatlh Center	CDC directly funded community-based organization, Chicago, IL
KY001	Volunteers of America of Kentucky, Inc.	CDC directly funded community-based organization, Louisville, KY
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	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

Num	Variable Name	
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
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. (APICHA)	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
NY029	AIDS Center of Queens County, Inc.	CDC directly funded community-based organization, Jamaica, NY
NY030	Harlem Hospital Center/NYC Health & Hospitals Corporation	CDC directly funded community-based organization, New York, NY
NY031	North Shore University	CDC directly funded community-based organization, Manhasset, NY
NY032	William F. Ryan Community Health Center	CDC directly funded community-based organization, New York, NY
NY033	Women's Prison Association & Home	CDC directly funded community-based organization, New York, NY
OH001	AIDS Resource Center Ohio	CDC directly funded community-based organization, Columbus, OH
OH002	Recovery Resources	CDC directly funded community-based organization, Cleveland, 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

Num	Variable Name	
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, Mayaguez, 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
TN002	Le Bonheur Community Health and Well-Being	CDC directly funded community-based organization, Memphis, TN
TN003	Nashville CARES	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
TX003	Coastal Bend AIDS Foundation	CDC directly funded community-based organization, Corpus Christi, TX
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	ACCESS AIDS Care	CDC directly funded community-based organization, Norfolk, VA

Num	Variable Name	
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*
VI003	*Frederiksted Health Care, Inc.*	*CDC directly funded community-based organization, St. Croix, 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: 32**

Definition: A unique alpha-numeric identification 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 alpha-numeric 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 rule   HIV Testing: Mandatory
Partner Services: Mandatory
HD Risk Reduction Activities: Mandatory
CBO Risk Reduction Activities: Mandatory
HD Aggregate: Not applicable

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 rule   HIV Testing: Required
Partner Services: Required
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

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.

NHME Variables and Values

Num	Variable Name	
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
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.

Num	Variable Name		
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 rule　　HIV Testing: Required
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

NHME Variables and Values

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

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

Definition:	The numeric FIPS code for the state, territory or district in which the official mailing address for the site is physically located.
Instructions:	Select the value code (numeric FIPS code, not state/territory abbreviation) 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. The value codes are numeric FIPS codes and contain leading zeros. Do not submit your state or territory abbrevision.
Business rule	HIV Testing: Required Partner Services: Allowed, but not reported to CDC HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable

Code	Value Description	Value Definition
01	*AL*	*Alabama*
02	*AK*	*Alaska*
04	*AZ*	*Arizona*
05	*AR*	*Arkansas*
06	*CA*	*California*
08	*CO*	*Colorado*
09	*CT*	*Connecticut*
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*
20	*KS*	*Kansas*
21	*KY*	*Kentucky*
22	*LA*	*Louisiana*

NHME Variables and Values

Num	Variable Name	
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
37	NC	North Carolina
38	ND	North Dakota
39	OH	Ohio
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
50	VT	Vermont
51	VA	Virginia
53	WA	Washington
54	WV	West Virginia
55	WI	Wisconsin
56	WY	Wyoming
60	AS	American Samoa

Num	Variable Name	
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.*

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 rule   HIV Testing: Required
Partner Services: Required
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

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

NHME Variables and Values

Num   *Variable Name*

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:** **otherCdcVariable3**

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 rule   HIV Testing: Allowed, but not reported to CDC, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule for HIV testing:
Allowed only for HIV testing within the MSM testing initiative project (DVS# X137; progAnnouncementProgStrategy=7).

CDC04   **CDC Variable 4**   **XSD (Schema) Name:** **otherCdcVariable4**

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 rule   HIV Testing: Allowed, but not reported to CDC, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule for HIV testing:
Allowed only for HIV testing within the MSM testing initiative project (DVS# X137; progAnnouncementProgStrategy=7).

NHME Variables and Values

Num	Variable Name		
CDC05	**CDC Variable 5**	XSD (Schema) Name:	**otherCdcVariable5**

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 rule   HIV Testing: Allowed, but not reported to CDC, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule for HIV testing:
Allowed only for HIV testing within the MSM testing initiative project (DVS# X137; progAnnouncementProgStrategy=7).

CDC06	**CDC Variable 6**	XSD (Schema) Name:	**otherCdcVariable6**

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

Definition: TBD

Instructions: TBD

Business rule   HIV Testing: Allowed, but not reported to CDC
Partner Services: Not applicable
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

CDC07	**CDC Variable 7**	XSD (Schema) Name:	**otherCdcVariable7**

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

Definition: TBD

Instructions: TBD

Business rule   HIV Testing: Allowed, but not reported to CDC
Partner Services: Not applicable
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Num	Variable Name			
CDC08	**CDC Variable 8**	XSD (Schema) Name:	**otherCdcVariable8**	

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

Definition:	TBD
Instructions:	TBD
Business rule	HIV Testing: Allowed, but not reported to CDC Partner Services: Not applicable HD Risk Reduction Activities: Allowed, but not reported to CDC CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable CBO Aggregate: Not applicable

CDC09	**CDC Variable 9**	XSD (Schema) Name:	**CDCVariable9**	

Value Option: TBD   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 100**

Definition:	This field will be dedicated for Partner Services use. Use is TBD.
Instructions:	Dedicated for Partner Services
Business rule	

CDC10	**CDC Variable 10**	XSD (Schema) Name:	**CDCVariable10**	

Value Option: TBD   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 100**

Definition:	This field will be dedicated for Partner Services use. Use is TBD.
Instructions:	Dedicated for Partner Services
Business rule	

NHME Variables and Values

Num   *Variable Name*

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: 8**   **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 rule	HIV Testing: Not applicable Partner Services: Required HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Required HD Aggregate: Not applicable CBO Aggregate: Not applicable Cannot be greater than the current date at the time of data entry.

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

Value Option: N/A   **Format Type:** **Alpha-Numeric**   **Min Length: 1**   **Max Length: 32**

Definition:	A locally developed alpha-numeric unique client identification code 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 rule	HIV Testing: Allowed, but not reported to CDC Partner Services: Mandatory HD Risk Reduction Activities: Mandatory CBO Risk Reduction Activities: Mandatory HD Aggregate: Not applicable This ID must be unique for each client. At a minimum this ID needs to be unique within an agency, but may be unique across agencies.

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 rule
HIV Testing: Required
Partner Services: Required
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable

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

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's self-reported ethnicity of Hispanic/Latino or not Hispanic/Latino.

Business rule
HIV Testing: Required
Partner Services: Required
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable

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 rule   HIV Testing: Required, see detailed business rule regarding multiple responses
Partner Services: Required, see detailed business rule regarding multiple responses
HD Risk Reduction Activities: Required, see detailed business rule regarding multiple responses
CBO Risk Reduction Activities: Required, see detailed business rule regarding multiple responses
HD Aggregate: Not applicable

Detailed business rule:
Multiple value codes may be selected if value code ≠ 66 or 77 or 99. If value= 66 or 77 or 99, then only that single value may 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. Leading zeros are retained as the value codes are FIPS codes.

Business rule
HIV Testing: Required
Partner Services: Required
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Code	Value Description	Value Definition
01	AL	Alabama
02	AK	Alaska
04	AZ	Arizona
05	AR	Arkansas
06	CA	California
08	CO	Colorado
09	CT	Connecticut
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
20	KS	Kansas
21	KY	Kentucky
22	LA	Louisiana
23	ME	Maine

Num	Variable Name	
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
37	NC	North Carolina
38	ND	North Dakota
39	OH	Ohio
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
50	VT	Vermont
51	VA	Virginia
53	WA	Washington
54	WV	West Virginia
55	WI	Wisconsin
56	WY	Wyoming
60	AS	American Samoa
64	FM	Federated States of Micronesia

Num	Variable Name	
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.
88	Other	Client does not currently reside in a US state, territory, or district.

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 rule   HIV Testing: Required
Partner Services: Required
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable

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 rule   HIV Testing: Required
Partner Services: Required
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable

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.

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 rule HIV Testing: Required, see detailed business rule
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if current gender is 'Additional specify' (currentGenderValueCode = 89).
Not expected if current gender isn't 'Additional specify' (currentGenderValueCode not 89).

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 rule HIV Testing: Required
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

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.

These data are collected from clients but not reported to CDC.

Business rule HIV Testing: Allowed, but not reported to CDC
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

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

Num	Variable Name

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: 8**   **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 rule   HIV Testing: Not applicable
Partner Services: Required
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

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

Num	Variable Name		
G200_1	**Client Behavioral Risk Profile**	**XSD (Schema) Name:**	**noClientRiskFactors**

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 have been identified during the 12 month recall period; a risk may not have been identified during the 12 month recall period; the provider may not have asked the client about his or her risks; or, the client was asked but declined to provide behavioral risk information.

This variable is a revision of variable G221 (XSD schema name: noClientRiskFactors). The value codes have changed to match those on the 2012 HIV test template. Variable G221 is no longer used, yet the schema name has remained the same.

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

Business rule   HIV Testing: Required
Partner Services: Required
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

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

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

Definition:	Evidence that the client has had at least one previous HIV test.
Instructions:	Indicate if the client has had at least one previous HIV test, based on client self-report, prior report to surveillance, or documentation of previous test through other data sources (e.g., laboratory records, medical records, partner services database, ADAP database).
Business rule	HIV Testing: Required Partner Services: Not applicable HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable

Code	Value Description	Value Definition
0	*No*	*There is no evidence that the client has ever had a previous HIV test.*
1	*Yes*	*There is evidence that the client has had at least one previous HIV test.*
66	*Not asked*	*Do not use this option.*
77	*Declined to answer*	*Do not use this option.*
99	*Don't know*	*No attempt was made (through client interview, cross-check with surveillance, or search of other data sources) to determine if the client has had a previous HIV test.*

NHME Variables and Values

Num	Variable Name		
G205	**Previous HIV Test Result**	XSD (Schema) Name:	**hivStatusValueCode**

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

Definition: The result of the client's most recent previous HIV test.

Instructions: Indicate the result of the client's most recent previous HIV test. If the client self-reports a previous positive test OR the client has been previously reported to the surveillance system OR there is documentation of a previous positive test in other records, mark "Positive."

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if previous HIV test was done (previousHivTestValueCode = 1).
Not expected if previous HIV test wasn't done (previousHivTestValueCode=0) or client doesn't know (=99), wasn't asked (=66) or declined to answer (=77).

Code	Value Description	Value Definition
1	*Positive*	*There is evidence, through client self-report OR search of other data sources OR previous report to surveillance, that the client has tested HIV-positive before the current test.*
2	*Negative*	*There is evidence, through client self-report or search of other data sources, that the client's most recent previous HIV test result was negative AND there is no evidence that the client has tested HIV-positive before the current test.*
3	*Preliminary positive*	*The client previously had a "Preliminary positive" test result (i.e., the client had a reactive point-of-care rapid HIV test, but no results of a confirmatory test are available).*
4	*Indeterminate*	*The client previously had an "Indeterminate" test result (i.e., the client had a previous conventional test, but the results did not conclusively indicate whether the client was HIV-positive or HIV-negative).*
66	*Not asked*	*Do not use this response option.*
77	*Declined to answer*	*Do not use this response option.*
99	*Don't know*	*The client has had at least one previous HIV test, but no information about the result is available..*

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 a client with a preliminary or confirmed positive HIV test.
	Prior to 2012, these data were collected for only confirmed positive female clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive female clients.
Instructions:	If the client is female and HIV-positive, from any HIV test (conventional, rapid, NAAT, RNA or other), then indicate whether she is pregnant.
Business rule	HIV Testing: Required, see detailed business rule
	Partner Services: Not applicable
	HD Risk Reduction Activities: Not applicable
	CBO Risk Reduction Activities: Not applicable
	HD Aggregate: Not applicable
	Detailed business rule:
	Required for birth gender females (birthGenderValueCode=2) with any positive HIV test (testResultValueCode=1). Not expected for birth gender males (birthGenderValueCode = 1) or birth gender females without a positive HIV test (birthGenderValueCode=2 AND currentTestValueCode not 1).

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.

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 HIV-positive pregnant client's receipt of regular health care during pregnancy.

Prior to 2012, these data were collected for only confirmed positive pregnant female clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive pregnant clients.

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

Business rule   HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required for pregnant females (pregnantStatusValueCode=1).
Not expected 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).

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 of 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 rule HIV Testing: Required, see detailed business rule
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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 rule HIV Testing: Required, see detailed business rule
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if behavioral risks were reported (noClientRiskFactors=1) and client reported injection drug use (injectionDrugUse=1)
Not expected if a client reported no injection drug use (injectionDrugUse=blank, 0, 99)
Not expected if client reported no behavioral risk factors (noClientRiskFactors=5), wasn't asked (noClientRiskFactors=66), declined to discuss behavioral risk factors (noClientRiskFactors=77), or status of behavioral risk profile is missing (noClientRiskFactors=blank).

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.*

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. Multiple addional risks can be reported.

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and vaginal or anal sex with a male (withMale=1), with a female (withFemale=1) or with a transgender person (withTransgender=1) was reported, however can be missing if client did not report any additional risk factors.
Not expected if a client reported no behavioral risk factors (noClientRiskFactors=5), client wasn't asked about risk factors (noClientRiskFactors=66), client declined to discuss risk factors (noClientRiskFactors=77).

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.*

Num	Variable Name	
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.*
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 rule HIV Testing: Required, see detailed business rule
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1)
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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 rule HIV Testing: Required, see detailed business rule
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1)
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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.*

NHME Variables and Values

Num	Variable Name		
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 rule   HIV Testing: Required, see detailed business rule
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1)
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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.*

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 rule HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with male was reported (withMale=1).
Not expected if sex with male was not reported (withMale = blank, 0 or 99).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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 rule
HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with female was reported (withFemale=1).
Not expected if sex with female was not reported (withFemale = blank, 0 or 99).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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.*

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 rule HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with transgender person was reported (withTransgender=1).
Not expected if sex with transgender person was not reported (withTransgender = blank, 0 or 99).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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.*

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 rule	HIV Testing: Required, see detailed business rule

Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with male was reported (withMale=1).
Not expected if sex with male was not reported (withMale = blank, 0 or 99).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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 rule HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with female was reported (withFemale=1).
Not expected if sex with female was not reported (withFemale = blank, 0 or 99).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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 rule HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with transgender person was reported (withTransgender=1).
Not expected if sex with transgender person was not reported (withTransgender = blank, 0 or 99).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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.*

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 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 rule	HIV Testing: Required, see detailed business rule
	Partner Services: Allowed, but not reported to CDC
	HD Risk Reduction Activities: Required, see detailed business rule
	CBO Risk Reduction Activities: Not applicable
	HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with male was reported (withMale=1).
Not expected if sex with male was not reported (withMale = blank, 0 or 99).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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.*

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 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 rule HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with female was reported (withFemale=1).
Not expected if sex with female was not reported (withFemale = blank, 0 or 99).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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.*

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 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 rule   HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with transgender person was reported (withTransgender=1).
Not expected if sex with transgender person was not reported (withTransgender = blank, 0 or 99).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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 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 rule HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and current gender is female or transgender M2F (currentGenderValueCode = 2 or 3).
Not expected for current gender males or transgender F2M (currentGenderValueCode = 1 or 4).
Not expected if client was asked and no behavioral risk factors were reported, wasn't asked or declined to discuss behavioral risks (noClientRiskFactors= 5, 66 or 77).
Not expected if status of behavioral risk profile collection is missing (noClientRiskFactors = blank).

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.

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 rule   HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required when a client behavioral risk profile was collected (noClientRiskFactors=1) and vaginal or anal sex with a male (withMale=1), with a female (withFemale=1) or with a transgender person (withTransgender=1) was reported, however can be missing if client did not respond to this specific risk question.

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.*

NHME Variables and Values

Num	Variable Name		
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 rule   HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Required when a client behavioral risk profile was collected (noClientRiskFactors=1) and vaginal or anal sex with a male (withMale=1), with a female (withFemale=1) or with a transgender person (withTransgender=1) was reported, however can be missing if client did not respond to this specific risk question.

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

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:** **32**

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

Instructions: Enter the alpha-numeric identification code used by your agency to identify the intervention. Intervention ID is unique for each agency.

Business rule   HIV Testing: Mandatory
Partner Services: Required
HD Risk Reduction Activities: Mandatory
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

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

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
H01b	**Program Evidence Base**	**XSD (Schema) Name:**	**program@EBI**

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

Definition: The name of a Program Evidence Base.

Instructions: Select a Program Evidence Base name from the list. If the intervention name is not in the list, please select 3.01 - Study / Special study or 3.02 – Other (specify) and enter an intervention name into H01c.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable
CBO Aggregate: Required

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.

Num	Variable Name	
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.
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.

NHME Variables and Values

Num	Variable Name	
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.*
1.28	Project AIM	*Project AIM is a group-level youth development intervention designed to reduce HIV risk behaviors among youth. It consists of 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.*
1.31	ARTAS	*ARTAS is an individual-level, multi-session, time-limited intervention with the goal of linking recently diagnosed persons with HIV to medical care soon after receiving their positive test result.*
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.*
2.02	Condom Distribution	*A CDC-funded HIV prevention program activity provided in conjunction with other HIV prevention services, such as participation in an HIV prevention intervention, receiving a referral to HIV prevention and support services, or receiving referrals and linkage specifically for HIV positive clients.*

Num	Variable Name	
2.03	*Referral / Linkage to Care*	*A process by which immediate client needs for prevention, care, and supportive services are assessed and prioritized; and by which, clients are provided with assistance in identifying and accessing services (such as setting up appointments and providing transportation). This also includes necessary follow-up efforts to facilitate initial contact with appropriate service providers. Clients receiving these services may be HIV positive, HIV negative, or HIV status unknown.*
3.01	*Study / Special Study (specify)*	
3.02	*Other (specify)*	
CT	*CTR*	
PS	*PS*	

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

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

Definition:	A name of a Program Evidence Base if 3.01 - Study / Special Study (specify) or 3.02-Other (specify) was selected in H01b.
Instructions:	Specify the name of a 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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Required, see detailed business rule CBO Risk Reduction Activities: Required, see detailed business rule HD Aggregate: Not applicable CBO Aggregate: Required, see detailed business rule Detailed business rule: Required when the intervention name = 3.01 - Study / Special Study (specify) or 3.02-Other (specify). Not expected otherwise.

NHME Variables and Values

Num	Variable Name		
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. If the number of planned sessions is unknown or can't be specified at the time that the data were entered, enter "9999" instead (i.e., 9999 = "Unknown/unspecified").

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
"Number of Planned Sessions" must be >0 and <10,000.

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

Value Option: N/A   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 32**

Definition: A unique alpha-numeric code or identification number used to 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 rule HIV Testing: Mandatory
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

'FORM ID' must be unique within an agency and will be associated with only one client.

Num	Variable Name	
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". If the number of completed sessions is unknown or can't be specified at the time that the data were entered, enter "9999" instead (i.e., 9999 = "Unknown/unspecified").

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
"Number of Completed Sessions" must be >0 and <10,000.

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

Value Option: **N/A**   **Format Type:** **MM/DD/YYYY**   **Min Length:** **8**   **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 rule   HIV Testing: Mandatory
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
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 been located with an enrollment status of 'accepted' (enrollmentStatus=1).

Num	Variable Name

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

Value Option: N/A   Format Type: **MM/DD/YYYY**   Min Length: **8**   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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

H08   **Program ID**   XSD (Schema) Name: **program@id**

Value Option: N/A   Format Type: **Alpha-Numeric**   Min Length: **1**   Max Length: **32**

Definition: A unique alpha-numeric identifiaction number used to 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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

H08a   **Program Name**   XSD (Schema) Name: **program@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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Required
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

NHME Variables and Values

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:** **32**

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 rule   HIV Testing: Not applicable
Partner Services: Mandatory
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

A case number uniquely identifies a PS case within an agency.

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

Value Option: N/A   **Format Type:** **MM/DD/YYYY**   **Min Length:** **8**   **Max Length:** **10**

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

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

Business rule   HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
The case open date must be less than the date of file submission to CDC.

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: 8** **Max Length: 10**

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

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

Business rule HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
The Case Closed Date must be between the caseOpenDate and the date of file submission to CDC. This date can be blank.

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

Value Option: N/A **Format Type: MM/DD/YYYY** **Min Length: 8** **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 rule HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
The Date of Report must be less than the date of file submission to CDC.

NHME Variables and Values

Num	Variable Name		
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 rule
HIV Testing: Not applicable
Partner Services: Required
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

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.*

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:**	**partnerDateCollected**

Value Option: N/A   **Format Type: MM/DD/YYYY**   **Min Length: 8**   **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 rule
HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
The Date Collected (partnerDateCollected) must be less than the date of file submission to CDC.

NHME Variables and Values

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

Value Option: N/A   Format Type: **Alpha-Numeric**   Min Length: **1**   Max Length: **32**

Definition:	An alpha-numeric identification that 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 rule	HIV Testing: Not applicable Partner Services: Mandatory HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable CBO Aggregate: Not applicable Local PS ID must be unique within an agency and can be associated with only one client.

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

Value Option: Choose only one   Format Type: **Number**   Min Length: **1**   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 rule	HIV Testing: Not applicable Partner Services: Required HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable CBO Aggregate: Not applicable

Code	Value Description	Value Definition
1	*Sex partner*	*A person who engages in any type of sexual activity with the index client.*
2	*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.*
3	*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.*

Num	Variable Name

Table: X-1	**HIV Test**

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: 1**	**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 rule	HIV Testing: Required, see detailed business rule Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable CBO Aggregate: Not applicable Detailed business rule: Required when testing event is reported (sampleDate isn't missing and testElection = 0 or 1). Not expected if a testing event isn't reported or didn't occur (sampleDate is missing or testElection=66 or 77).

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.*

Num	Variable Name		
X104	**HIV Test Election**	**XSD (Schema) Name:**	**testElection**

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 rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required when testing event is reported (sampleDate isn't missing).
Not expected if a testing event isn't reported (sampleDate is missing).

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.

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

Value Option: N/A   **Format Type: MM/DD/YYYY**   **Min Length: 8**   **Max Length: 10**

Definition: The calendar date (month, day, year) that 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 rule HIV Testing: Required
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

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

NHME Variables and Values

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

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

Definition: The outcome of the current HIV test.

Instructions: Indicate the result of this HIV test.

Business rule   HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required when a testing event is reported (sampleDate is not missing OR testElection= 0 or 1 OR testTechnology is not missing).
Not expected if a testing event isn't reported or didn't occur (sampleDate is missing or testElection=66 or 77).

Code	Value Description	Value Definition
1	Positive/reactive	a test result that is reactive or positive on any HIV test technology
3	Negative	a test result that is non-reactive or negative on any HIV test technology
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).

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 rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required when at least one testing event occurred (testElection = 0 or 1) and result is available (testResultValueCode isn't missing).
Not expected if a testing event isn't reported or didn't occur (sampleDate is missing or testElection=66 or 77).

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.

Num	Variable Name		
X115	**If Result Not Provided, Why**	XSD (Schema) Name:	**reasonResultNotProvidedValueCode**

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 rule   HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required when at least one testing event occurred, a result is available and the results were not communicated to the client (provisionOfResultValueCode = 0).
Not expected if a testing event isn't reported or didn't occur (sampleDate is missing or testElection=66 or 77).
Not expected if a testing event occurred and results were provided to the client (provisionOfResultValueCode=1 or 2).

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.*

X135	**Worker ID**	XSD (Schema) Name:	**workerId**

Value Option: N/A   Format Type: **Alpha-Numeric**   Min Length: **1**   Max Length: **32**

Definition: A unique alpha-numeric identification code 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 rule   HIV Testing: Allowed but not reported to CDC
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

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.

Num	Variable Name		
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 rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required for health departments.
Allowed but not required for tests reported by CBOs, yet should be completed if records are entered through a health department.

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: **1**   Max Length: **2**

Definition: The CDC program announcement or program strategy and the category (e.g., Part A, Part B), if applicable, under which an HIV prevention service (e.g., HIV testing event, risk-reduction, Partner Services, referral to HIV prevention and support services, referrals and linkage specifically for positives) 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 '5 – PS10-1003' or '6 - PS08-803' or '8 - PS11-1113 Category A - YMSM' or '9 - PS11-1113 Category B - YTG' or '11 - PS13-1310' or 13 - PS15-1502 Category A' or '14 - PS15-1502 Category B'.

Business rule   HIV Testing: Mandatory
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Mandatory
CBO Risk Reduction Activities: Mandatory, see additional business rule below.
HD Aggregate: Mandatory
CBO Aggregate: Mandatory

Detailed business rule:
For directly-funded CBOs, program announcement (PS11-1113 Category A, PS11-1113 Category B, PS15-1502 Category A, or PS15-1502 Category B) for each service a client is provided or referred to.

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.
10	PS 12-1210 CAPUS	PS12-1210 CAPUS: This is the Secretary's Minority AIDS Initiative Fund for Care and Prevention in the United States (CAPUS) Demonstration Project. This program announcement is applicable only to eight funded health departments: Georgia, Illinois, Louisiana, Mississippi, Missouri, North Carolina, Tennessee, and Virginia.
11	PS 13-1310	PS13-1310: HIV Prevention Projects for the Commonwealth of Puerto Rico and the United States Virgin Islands.
12	PS14-1410	PS14-1410: This is the Secretary's Minority AIDS Initiative Funding to Increase HIV Prevention and Care Services Delivery among Health Centers Serving High HIV Prevalence Jurisdictions (Partnerships for Care (P4C)) Demonstration Project. This program announcement is applicable only to four funded health departments: Florida, Maryland, Massachusetts, and New York.
13	PS15-1502 Category A	PS15-1502: HIV prevention services for members of racial/ethnic minority communities.
14	PS15-1502 Category B	PS15-1502: HIV prevention services for members of groups at greatest risk for acquiring and transmitting HIV infection, regardless of race/ethnicity.

Num	Variable Name	
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: Option 4 - PS11-1113 available March 2012 - July 2013. Please select 8 - PS11-1113 Category A or 9 - PS11-1113 Category B
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.
8	PS 11-1113 Category A - YMSM	PS11-1113: This category provides funding to Community-Based Organizations for HIV Prevention Programs for Young Men of Color Who Have Sex with Men and their partners
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.
9	PS 11-1113 Category B - YTG	PS11-1113: This category provides funding to Community-Based Organizations for HIV Prevention Programs for Young Transgender Persons of Color and their partners

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 rule   HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Required, see detailed business rule
CBO Risk Reduction Activities: Allowed, but not reported to CDC
HD Aggregate: Allowed, but not required
CBO Aggregate: Allowed, but not reported to CDC

Detailed business rule:
Required if 'other' program announcement was selected (progAnnouncementProgStrategy = 89).
Not expected if 'other' program announcement wasn't selected (progAnnouncementProgStrategy not 89).

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: 1**   **Max Length: 1**

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 rule   HIV Testing: Not applicable
Partner Services: Required
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

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

Num	Variable Name		
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 rule   HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required if client could not be located (attemptToLocateOutcome = 1).
Not expected if a client was located (attemptToLocateOutcome = 2).

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.*

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 rule	HIV Testing: Not applicable
	Partner Services: Required, see detailed business rule
	HD Risk Reduction Activities: Not applicable
	CBO Risk Reduction Activities: Not applicable
	HD Aggregate: Not applicable
	CBO Aggregate: Not applicable
	Detailed business rule:
	Required if a client was located (attemptToLocateOutcome = 2).
	Not expected if a client wasn't located (attemptToLocateOutcome = 1).

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 between 1 and 12 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 rule	HIV Testing: Not applicable
	Partner Services: Required
	HD Risk Reduction Activities: Not applicable
	CBO Risk Reduction Activities: Not applicable
	HD Aggregate: Not applicable
	CBO Aggregate: Not applicable

Num	Variable Name		
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 must be equal to the total number of named male, female and transgender partners.

Business rule HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
"Total Number of Named Partners" must be less than or equal to the Total Number of Partners Claimed (totalNumberOfPartnersClaimed).

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 rule HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
"Total Number of Named Male Partners" must be less than or equal to the Total Number of Named Partners (totalNumberOfNamedPartners).

NHME Variables and Values

Num	Variable Name		
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 rule   HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
"Total Number of Named Female Partners" must be less than or equal to the Total Number of Named Partners (totalNumberOfNamedPartners).

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 rule   HIV Testing: Not applicable
Partner Services: Required,, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
"Total Number of Named Transgender Partners" must be less than or equal to the Total Number of Named Partners (totalNumberOfNamedPartners).

NHME Variables and Values

Num	Variable Name

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: 1**   **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 rule   HIV Testing: Not applicable
Partner Services: Required
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

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.*

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

Value Option: Choose only one   **Format Type: Number**   **Min Length: 1**   **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 rule HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required if the partner is able to be notified (partnerNotifiability =06).
Not expected otherwise.

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: Evidence that the partner has had at least one previous HIV test.

Instructions: Indicate if the partner has had at least one previous HIV test, based on partner self-report, prior report to surveillance, or documentation of previous test through other data sources (e.g., laboratory records, medical records, ADAP database).

Business rule HIV Testing: Not applicable
Partner Services: Required
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Code	Value Description	Value Definition
0	*No*	*There is no evidence that the partner has ever had a previous HIV test.*
1	*Yes*	*There is evidence that the partner has had at least one previous HIV test.*
66	*Not asked*	*Do not use this option.*
77	*Declined to answer*	*Do not use this option.*
99	*Don't know*	*No attempt was made (through client interview, cross-check with surveillance, or search of other data sources) to determine if the partner has had a previous HIV test.*

NHME Variables and Values

Num	Variable Name		
X603	**Previous HIV Test Result**	**XSD (Schema) Name:**	**hivStatusValueCode**

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

Definition: The result of the partner's most recent previous HIV test.

Instructions: Indicate the result of the partner's most recent previous HIV test. If the partner self-reports a previous positive test OR the partner has been previously reported to the surveillance system OR there is documentation of a previous positive test in other records, mark "Positive."

Business rule HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required when Previous HIV Test was done (previousHIVTest = 1).
Not expected otherwise.

Code	Value Description	Value Definition
1	Positive	There is evidence, through partner self-report OR search of other data sources OR previous report to surveillance, that the partner has tested HIV-positive before the current test.
2	Negative	There is evidence, through partner self-report or search of other data sources, that the partner's most recent previous HIV test result was negative AND there is no evidence that the partner has tested HIV-positive before the current test.
3	Preliminary positive	The partner previously had a "Preliminary positive" test result (i.e., the partner had a reactive point-of-care rapid HIV test, but no results of a confirmatory test are available).
4	Indeterminate	The partner previously had an "Indeterminate" test result (i.e., the partner had a previous conventional test, but the results did not conclusively indicate whether the partner was HIV-positive or HIV-negative).
66	Not asked	Do not use this response option.
77	Declined to answer	Do not use this response option.
99	Don't know	The partner has had at least one previous HIV test, but no information about the result is available..

NHME Variables and Values

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

Value Option: N/A	**Format Type: MM/DD/YYYY**	**Min Length: 8**	**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 rule HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required if a previous HIV test was reported (previousHIVtest=1).
Not expected otherwise.

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: 8**	**Max Length: 10**

Definition: The date that 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 rule HIV Testing: Not applicable
Partner Services: Required
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
"Referral Date" must be between the case open date (caseOpenDate) and the date of file submission to CDC.

NHME Variables and Values

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

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

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

Prior to 2012, these data were collected for only confirmed positive clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive clients.

Instructions: Complete if a client tests positive for HIV, on any HIV test, conventional, RNA/NAAT, rapid or other, during a testing event but is not referred to HIV medical care.

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required for clients with a positive HIV test (testResultValueCode=1) who were not referred to HIV medical care (referredToMedicalCare=0).
Not expected for clients without a positive HIV test (testResultValueCode not 1) or clients with a positive HIV test were referred to HIV medical care (referredToMedicalCare=1).

Code	Value Description	Value Definition
1	*Client already in care*	*Client was not referred to HIV medical care because he or she is already receiving care.*
2	*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 rule	HIV Testing: Not applicable Partner Services: Required HD Risk Reduction Activities: Allowed, but not reported to CDC CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable CBO Aggregate: Not applicable

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

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.
	Prior to 2012, these data were collected for only confirmed positive clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive clients.
Instructions:	Indicate if the client was referred to HIV medical care.
Business rule	HIV Testing: Required, see detailed business rule
	Partner Services: Required, see detailed business rule
	HD Risk Reduction Activities: Allowed, but not reported to CDC
	CBO Risk Reduction Activities: Not applicable
	HD Aggregate: Not applicable
	CBO Aggregate: Not applicable
	Detailed business rule for HIV testing:
	Required for clients with a positive HIV test (testResultValueCode=1).
	Not expected for clients without a positive HIV test (testResultValueCode not 1).
	Detailed business rule for Partner Services:
	Required if HIV test result was positive/reactive (HIVTestResult=1).
	Not expected otherwise.

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.*

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.

Prior to 2012, these data were collected for only confirmed positive clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive clients.

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

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required for clients with a positive HIV test (testResultValueCode=1).
Not expected for clients without a positive HIV test (testResultValueCode not 1).

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.*

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.

Prior to 2012, these data were collected for only confirmed positive clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive clients.

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

Business rule   HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required for clients with a positive HIV test (testResultValueCode=1).
Not expected for clients without a positive HIV test (testResultValueCode not 1).

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.*

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.

Prior to 2012, these data were collected for only confirmed positive clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive clients.

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

Business rule   HIV Testing: Required, see detailed business rule
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule for HIV testing:
Required for clients with a positive HIV test (testResultValueCode=1) who were referred to medical care (referredToMedicalCare = 1).
Not expected for HIV testing clients without a positive HIV test (testResultValueCode not 1) or those who were not referred to medical care (referredToMedicalCare=0).

Detailed business rule for Partner Services:
Required if clients with a positive HIV Test Result (HIVTestResult=1) who were referred to medical care (referredToMedicalCare = 1).

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.

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.

Prior to 2012, these data were collected for only confirmed positive clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) and preliminary (rapid test) positive clients.

Instructions: Indicate if the client attended his/her HIV medical appointment within 90 days of the HIV test 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.

Please see business rule for specific data elements incorporated into this instruction.

Business rule   HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required for clients with a positive HIV test (testResultValueCode=1) who were referred to medical care (referredToMedicalCare = 1) and attended first appointment (firstMedicalCareAppointment=2).
Not expected 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).

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.*

NHME Variables and Values

Num	Variable Name		
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 rule HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required if the client was referred to an HIV Testing (referredToHIVTesting= 1).
Not expected otherwise.

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.*

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

Value Option: Choose only one	**Format Type: Number**	**Min Length: 1**	**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 rule HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required if an HIV Test is performed (HIVTestPerformed = 1).
Not expected otherwise.

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		
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 rule   HIV Testing: Not applicable
Partner Services: Required, see detailed business rule
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required if HIV Test Performed =Yes (HIVTestPerformed = 1) and HIV Test Result was Positive (HIVTestResult = 1).
Not expected otherwise.

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.*

NHME Variables and Values

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, from a conventional, RNA/NAAT, rapid or other test. 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.

Prior to 2012, these data were collected for only confirmed positive clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive clients.

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 who have any positive test, either confirmed or preliminary.

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required for clients with a positive HIV test (testResultValueCode=1) who were referred to prevention services (referredToHIVPrevention=1).
Not expected for clients without a positive HIV test (testResultValueCode not 1).

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.*

Num	Variable Name
X725	**Partner Service Interview**

XSD (Schema) Name: **clientPSInterview**

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.

Prior to 2012, these data were collected for only confirmed positive clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive clients.

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, with either a confirmed or preliminary positive test.

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required for clients with a positive HIV test (testResultValueCode=1) who were referred to Partner Services (referredToPartnerServices=1).
Not expected 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).

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.

Prior to 2012, these data were collected for only confirmed positive clients. Currently, they are collected for both confirmed (conventional, RNA, NAAT or other test) or preliminary (rapid test) positive clients.

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, from either a conventional, RNA/NAAT, rapid or other test.

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activitiess: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required for clients with a positive HIV test (testResultValueCode=1) who was referred to Partner Services (referredToPartnerServices=1) and interviewed (partnerServiceInterview=1).
Not expected for clients without a positive HIV test (testResultValueCode not 1) or those with a positive HIV test who were not interviewed for Partner Services (partnerServiceInterview = 0 or 99).

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.*

NHME Variables and Values

Num	Variable Name		
X730a	**Housing status in past 12 months - revised**	**XSD (Schema) Name:**	**housingStatusRevised**

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

Definition: The client's self-report of the most severe housing status in the past 12 months.
Collection of these data began in 2013.

The original housing status variable (X730) was included in the Version 3 HIV testing schema and on the HIV test template revised in April, 2013. The number, schema name, and value options for this data element were changed in September, 2013, such that the number is X730a, schema name is 'housingStatusRevised', and only one response is required instead of selecting all housing statuses experienced by a client.

Instructions: For clients with a positive HIV test (confirmatory or preliminary), indicate the client's self-reported most severe housing status in the past 12 months.

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Allowed, but not reported to CDC
HD Risk Reduction Activities: Allowed, but not reported to CDC
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable
CBO Aggregate: Not applicable

Detailed business rule:
Required only for clients with a positive HIV test (testResultValueCode=1).
Not expected for clients without a positive HIV test (testResultValueCode not 1).

Code	Value Description	Value Definition
1	*Literally Homeless*	*Client has lived in places not designed nortypically used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus/train station or camping ground; or in a shelter or emergency shelter that provides temporary living arrangements.*
3	*Unstably housed and/or at-risk of losing housing*	*Client has not been homeless, however, client has experienced housing instability as evidenced by frequent moves due to economic reasons, living with others due to economic hardship; eviction from a private dwelling unit (but having another place to go); living in overcrowded housing; or being ar risk of having no housing options. This value code includes persons imminently losing housing.*
4	*Stably housed*	*Persons living in a consistent housing facility that is meant for human habitation and are not at risk of losing housing.*
66	*Not asked*	*Client was not asked about housing status in the past 12 months.*
77	*Declined to answer*	*Client declined to report housing status 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 housing status in the past 12 months. Do not select 'don't know' if the client was not asked.*

NHME Variables and Values

Num   *Variable Name*

Aggregate Level Requirements

Table: ME   Aggregate level Variables

This table should be reported at jurisdiction level and broken out by FOA and its categories.

Num   *Variable Name*

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

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

Definition: 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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Mandatory
CBO Aggregate: Not applicable

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

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

Definition: The 6-month period during which the HIV prevention program was delivered or implemented, and for which aggregate level data are being reported.

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

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Mandatory
CBO Aggregate: Not applicable

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.*

NHME Variables and Values

Num	Variable Name		
ME101	**Number of HIV-diagnosed clients linked to HIV medical care**	**XSD (Schema) Name:**	**hivPosLinkedToCare/total**

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

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

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name		
ME101b	**Number of HIV-diagnosed MSM linked to HIV medical care**	**XSD (Schema) Name:**	**hivPosLinkedToCare/MSM**

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME101c	**Number of HIV-diagnosed IDU linked to HIV medical care**	**XSD (Schema) Name:**	**hivPosLinkedToCare/IDU**

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 rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME101d	**Number of HIV-diagnosed heterosexuals linked to HIV medical care**	**XSD (Schema) Name:**	**hivPosLinkedToCare/heterosexual**

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 rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME101e	**Number of HIV-diagnosed clients with other/unknown behavioral risk factors linked to HIV medical care**	**XSD (Schema) Name:**	**hivPosLinkedToCare/otherRisk**

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 rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name			
ME101f	**Number of HIV-diagnosed African Americans linked to HIV medical care**	**XSD (Schema) Name:**	**hivPosLinkedToCare/AfricanAmerican**	

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name			
ME101g	**Number of HIV-diagnosed Hispanics linked to HIV medical care**	**XSD (Schema) Name:**	**hivPosLinkedToCare/Hispanic**	

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name			
ME101h	**Number of HIV-diagnosed clients of other race/ethnicity linked to HIV medical care**	**XSD (Schema) Name:**	**hivPosLinkedToCare/otherRace**	

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME102	**Number of HIV-diagnosed clients linked to treatment adherence services**	**XSD (Schema) Name:**	**hivClientsAdhereToART/total**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME102a	**Number of HIV-diagnosed MSM/IDU linked to treatment adherence services**	**XSD (Schema) Name:**	**hivClientsAdhereToART/MSMIUD**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME102b	**Number of HIV-diagnosed MSM linked to treatment adherence services**	**XSD (Schema) Name:**	**hivClientsAdhereToART/MSM**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME102c	**Number of HIV-diagnosed IDU linked to treatment adherence services**	**XSD (Schema) Name:**	**hivClientsAdhereToART/IDU**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME102d	**Number of HIV-diagnosed heterosexuals linked to treatment adherence services**	**XSD (Schema) Name:**	**hivClientsAdhereToART/heterosexual**

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name		
ME102e	**Number of HIV-diagnosed clients with other/unknown behavioral risk factors linked to treatment adherence services**	**XSD (Schema) Name:**	**hivClientsAdhereToART/otherRisk**

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name
ME102f	**Number of HIV-diagnosed African Americans linked to treatment adherence services**

XSD (Schema) Name: hivClientsAdhereToART/AfricanAmerican

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name
ME102g	**Number of HIV-diagnosed Hispanics linked to treatment adherence services**

XSD (Schema) Name: hivAdhereToART/Hispanic

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME102h	**Number of HIV-diagnosed clients of another race/ethnicity linked to treatment adherence services**	**XSD (Schema) Name:**	**hivClientsAdhereToART/otherRace**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

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/total**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME103a	**Numbers of out-of-care HIV-diagnosed MSM/IDU re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivClientsRetained/MSMIDU**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME103b	**Numbers of out-of-care HIV-diagnosed MSM re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivClientsMSMRetained/MSM**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name

ME103c | **Numbers of out-of-care HIV-diagnosed IDU re-engaged into HIV medical care and treatment services** | **XSD (Schema) Name:** hivClientsRetained/IDU

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME103d | **Numbers of out-of-care HIV-diagnosed heterosexuals re-engaged into HIV medical care and treatment services** | **XSD (Schema) Name:** hivClientsRetained/heterosexual

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
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:**	**hivClientsRetained/otherRisk**

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 rule　　HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME103f	**Numbers of out-of-care HIV-diagnosed African Americans re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivClientsRetained/AfricanAmerican**

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 rule　　HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME103g	**Numbers of out-of-care HIV-diagnosed Hispanics re-engaged into HIV medical care and treatment services**	**XSD (Schema) Name:**	**hivClientsRetained/Hispanic**

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

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:**	**hivClientsRetained/otherRace**

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME104	**Number of condoms distributed**	**XSD (Schema) Name:**	**condomsDistributedtotal**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME114	**Number of clients referred to non-occupational PEP therapy**	**XSD (Schema) Name:**	**referredToPEP/total**

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME114a	**Number of MSM/IDU referred to non-occupational PEP therapy**	**XSD (Schema) Name:**	**referredToPEP/MSMIDU**

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME114b	**Number of MSM referred to non-occupational PEP therapy**	**XSD (Schema) Name:**	**referredToPEP/MSM**

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME114c	**Number of IDU referred to non-occupational PEP therapy**	XSD (Schema) Name:	**referredToPEP/IDU**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME114d	**Number of high-risk heterosexuals referred to non-occupational PEP therapy**	XSD (Schema) Name:	**referredToPEP/heterosexual**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME114e	**Number of clients with other or unknown risks referred to non-occupational PEP therapy**	XSD (Schema) Name:	**referredToPEP/otherRisk**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME114f	**Number of African Americans referred to non-occupational PEP therapy**	**XSD (Schema) Name:**	**referredToPEP/AfricanAmerican**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME114g	**Number of Hispanics referred to non-occupational PEP therapy**	**XSD (Schema) Name:**	**referredToPEP/Hispanic**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME114h	**Number of clients of another race/ethnicity referred to non-occupational PEP therapy**	**XSD (Schema) Name:**	**referredToPEP/otherRace**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME115	**Number of clients initiated non-occupational PEP therapy**	XSD (Schema) Name:	**initiatedPEP/total**

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 rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME115a	**Number of MSM/IDU who initiated non-occupational PEP therapy**	XSD (Schema) Name:	**initiatedPEP/MSMIDU**

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 rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME115b	**Number of MSM who initiated non-occupational PEP therapy**	XSD (Schema) Name:	**initiatedPEP/MSM**

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 rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME115c	**Number of IDU who initiated non-occupational PEP therapy**	**XSD (Schema) Name:**	**initiatedPEP/IDU**

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name		
ME115d	**Number of high-risk heterosexuals who initiated non-occupational PEP therapy**	**XSD (Schema) Name:**	**initiatedPEP/heterosexual**

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name		
ME115e	**Number of clients with other or unknown risks who initiated non-occupational PEP therapy**	**XSD (Schema) Name:**	**initiatedPEP/otherRisk**

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME115f	**Number of African American who initiated non-occupational PEP therapy**	**XSD (Schema) Name:**	**initiatedPEP/AfricanAmerican**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME115g	**Number of Hispanics who initiated non-occupational PEP therapy**	**XSD (Schema) Name:**	**initiatedPEP/Hispanic**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME115h	**Number of clients of another race/ethnicity who initiated non-occupational PEP therapy**	**XSD (Schema) Name:**	**initiatedPEP/otherRace**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME116	**Number of MSM referred to PrEP therapy**	**XSD (Schema) Name:**	**referredToPrEP/total**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME116a	**Number of African American MSM referred to PrEP therapy**	**XSD (Schema) Name:**	**referredToPrEP/AfricanAmerican**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME116b	**Number of Hispanic MSM referred to PrEP therapy**	**XSD (Schema) Name:**	**referredToPrEP/Hispanic**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME116c	**Number of MSM of another or unknown race/ethnicity referred to PrEP therapy**	**XSD (Schema) Name:**	**referredToPrEP/otherRace**

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME117	**Number of MSM initiated PrEP therapy**	**XSD (Schema) Name:**	**initiatedPrEP/total**

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name
ME117a	**Number of African American MSM who initiated PrEP therapy**

XSD (Schema) Name: **initiatedPrEP/AfricanAmerican**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name
ME117b	**Number of Hispanic/Latino MSM who initiated PrEP therapy**

XSD (Schema) Name: **initiatedPrEP/Hispanic**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME117c	**Number of MSM of another or unknown race/ethnicity initiated PrEP therapy**	XSD (Schema) Name:	**initiatedPrEP/otherRace**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME201a	**Category A total PS12-1201-funded aggregate test events**	XSD (Schema) Name:	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: PS12-1201-funded aggregate test events are test events supported in any way by PS12-1201-funded resources (e.g., funding, test kits, personnel, training and technical assistance, laboratory support), but for which test-level data are not obtainable.

Instructions: Enter the total number of Category A PS12-1201-funded aggregate HIV test events conducted during the reporting period.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME201b	**Category A total reimbursed aggregate test events**	XSD (Schema) Name:	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: Reimbursed aggregate test events are done in PS12-1201-supported programs, but are actually paid for by a third-party payer (e.g., Medicaid, Medicare, private insurance). They are attributable to PS12-1201 because they would likely not be done in the absence of the PS12-1201-supported program, but they are not directly paid for by PS12-1201 funds.

Instructions: Enter the total number of Category A reimbursed aggregate HIV testing events conducted during the reporting period.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME202a	**Category A PS12-1201-funded aggregate newly diagnosed HIV-positive test events**	**XSD (Schema) Name:**	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: PS12-1201-funded aggregate test events are test events supported in any way by PS12-1201-funded resources (e.g., funding, test kits, personnel, training and technical assistance, laboratory support), but for which test-level data are not obtainable. Newly diagnosed HIV-positive test events include unconfirmed preliminary positive plus confirmed positive test events.

Instructions: Enter the total number of Category A PS12-1201-funded aggregate newly diagnosed HIV-positive testing events conducted during the reporting period.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME202b	**Category A reimbursed aggregate newly diagnosed HIV-positive testing events**	**XSD (Schema) Name:**	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: Reimbursed aggregate test events are test events that are done in PS12-1201-supported programs, but are actually paid for by a third-party payer (e.g., Medicaid, Medicare, private insurance). They are attributable to PS12-1201 because they would likely not be done in the absence of the PS12-1201-supported program, but they are not directly paid for by PS12-1201 funds. Newly diagnosed HIV-positive test events include unconfirmed preliminary positive plus confirmed positive test events.

Instructions: Enter the total number of Category A reimbursed aggregate newly diagnosed HIV-positive testing events conducted during the reporting period.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name			
ME203a	**Category B total PS12-1201-funded aggregate test events**	**XSD (Schema) Name:**		

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition:	PS12-1201-funded aggregate test events are test events supported in any way by PS12-1201-funded resources (e.g., funding, test kits, personnel, training and technical assistance, laboratory support), but for which test-level data are not obtainable.
Instructions:	Enter the total number of Category B PS12-1201-funded aggregate HIV test events conducted during the reporting period.
Business rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name			
ME203b	**Category B total reimbursed aggregate test events**	**XSD (Schema) Name:**		

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition:	Reimbursed aggregate test events are test events that are done in PS12-1201-supported programs, but are actually paid for by a third-party payer (e.g., Medicaid, Medicare, private insurance). They are attributable to PS12-1201 because they would likely not be done in the absence of the PS12-1201-supported program, but they are not directly paid for by PS12-1201 funds.
Instructions:	Enter the total number of Category B reimbursed aggregate HIV testing events conducted during the reporting period.
Business rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name			
ME204a	**Category B PS12-1201-funded aggregate newly diagnosed HIV-positive test events**	**XSD (Schema) Name:**		

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition:	PS12-1201-funded aggregate test events are test events supported in any way by PS12-1201-funded resources (e.g., funding, test kits, personnel, training and technical assistance, laboratory support), but for which test-level data are not obtainable. Newly diagnosed HIV-positive test events include unconfirmed preliminary positive plus confirmed positive test events.
Instructions:	Enter the total number of Category B PS12-1201-funded aggregate newly diagnosed HIV-positive testing events conducted during the reporting period.
Business rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name
ME204b	**Category B reimbursed aggregate newly diagnosed HIV-positive testing events**

XSD (Schema) Name:

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: Reimbursed aggregate test events are test events that are done in PS12-1201-supported programs, but are actually paid for by a third-party payer (e.g., Medicaid, Medicare, private insurance). They are attributable to PS12-1201 because they would likely not be done in the absence of the PS12-1201-supported program, but they are not directly paid for by PS12-1201 funds. Newly diagnosed HIV-positive test events include unconfirmed preliminary positive plus confirmed positive test events.

Instructions: Enter the total number of Category B reimbursed aggregate newly diagnosed HIV-positive testing events conducted during the reporting period.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name
ME207a	**Number of syphilis tests conducted as part of service integration in healthcare settings**

XSD (Schema) Name:

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of syphilis tests conducted under service integration for PS12-1201 Category B in healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of syphilis tests conducted in healthcare settings for the reporting period.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

Num	Variable Name

ME207b   **Number of syphilis tests conducted under service integration in non-healthcare settings**   **XSD (Schema) Name:**

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of syphilis tests conducted under service integration for PS12-1201 Category B in non-healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of syphilis tests conducted in non-healthcare settings for the reporting period.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

ME208a   **Number of gonorrhea tests conducted under service integration in healthcare settings**   **XSD (Schema) Name:**

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of gonorrhea tests conducted under service integration for PS12-1201 Category B in healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of gonorrhea tests conducted in healthcare settings for the reporting perod.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

Num	Variable Name

ME208b | **Number of gonorrhea tests conducted under service integration in non-healthcare settings** | **XSD (Schema) Name:**

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of gonorrhea tests conducted under service integration for PS12-1201 Category B in non-healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of gonorrhea tests conducted in non-healthcare settings for the reporting period.

Business rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

ME209a | **Number of chlamydia tests conducted under service integration in healthcare settings** | **XSD (Schema) Name:**

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of tests for chlamydial infection conducted under service integration for PS12-1201 Category B in healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of chlamydia tests conducted in healthcare settings for the reporting period.

Business rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

Num	Variable Name
ME209b	**Number of chlamydia tests conducted under service integration in non-healthcare settings**

XSD (Schema) Name:

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of tests for chlamydial infection conducted under service integration for PS12-1201 Category B in non-healthcare settigns. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of chlamydia tests conducted in non-healthcare settings for the reporting period.

Business rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

ME210a	**Number of tests for hepatitis B virus conducted under service integration in healthcare settings**

XSD (Schema) Name:

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of tests for hepatitis B virus (HBV) conducted under service integration for PS12-1201 Category B in healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of HBV tests conducted in healthcare settings for the reporting period.

Business rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

Num	Variable Name

ME210b — **Number of tests for hepatitis B virus conducted under service integration in non-healthcare settings**   **XSD (Schema) Name:**

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of tests for hepatitis B virus (HBV) conducted under service integration for PS12-1201 Category B in non-healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of HBV tests conducted in non-healthcare settings for the reporting period.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

ME211a — **Number of tests for hepatitis C virus conducted under service integration in healthcare settings**   **XSD (Schema) Name:**

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of tests for hepatitis C virus (HCV) conducted under service integration for PS12-1201 Category B in healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, and tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of HCV tests conducted in healthcare settings for the reporting period.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

Num	Variable Name

ME211b   **Number of tests for hepatitis C virus conducted under service integration in non-healthcare settings**   **XSD (Schema) Name:**

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of tests for hepatitis C virus (HCV) conducted as part of service integration for PS12-1201 Category B in non-healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of HCV tests conducted in non-healthcare settings for the reporting period.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

ME212a   **Number of tuberculosis tests conducted under service integration in healthcare settings**   **XSD (Schema) Name:**

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of tuberculosis tests conducted as part of service integration for PS 12-1201 Category B in healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of tuberculosis tests conducted in healthcare settings for the reporting period.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

NHME Variables and Values

Num	Variable Name	
ME212b	**Number of tuberculosis tests conducted under service integration in non-healthcare settings**	XSD (Schema) Name:

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The number of tuberculosis tests conducted as part of service integration for PS 12-1201 Category B in non-healthcare settings. Service integration is a situation in which a person is offered and can receive two or more CDC-recommended prevention, treatment, or care services for HIV/AIDS, sexually transmitted diseases (STDs), viral hepatitis, or tuberculosis (TB) in the course of a single visit within one facility.

Instructions: If funded to conduct integrated screening activities for other infections in conjunction with HIV testing (i.e., service integration), enter the number of tuberculosis tests conducted in non-healthcare settings for the reporting period.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Detailed business rule: Required if funded to conduct service integration under Program Announcement 12-1201 Category B. Not expected otherwise.

Num	Variable Name	
ME213a-z	**Target population of HIV-positive individuals**	XSD (Schema) Name:

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

Definition: Targeted HIV-positive populations (e.g., MSM, IDU, transgender) for prevention interventions.

Instructions: Specify the target population of HIV-positive individuals. Enter up to 26 target populations. Label the first target population as ME213a and label the service/intervention variables associated with this target population as ME214a, ME215a, ME216a, ME217a, respectively. Label the second target population as ME213b and its associated service/intervention variables as ME214b, ME215b, ME216b, and ME217b. Continue to apply this labeling convention to subsequent target populations, up to ME213z.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME214a-z	**Total number of HIV-positive persons enrolled in behavioral risk screening**	XSD (Schema) Name:	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: A behavioral risk screen is a brief evaluation of behavioral HIV risk factors used to decide who should be recommended for HIV testing, interventions, or other services.

Instructions: Specify the total number of HIV-positive persons from the specified Target Population (ME213a…z) enrolled in behavioral risk screening. Follow labeling instructions outlined in ME213a-z.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME215a-z	**Total number of HIV-positive persons enrolled in individual- and group-level evidence-based interventions**	XSD (Schema) Name:	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The total number of HIV-positive persons from the specified Target Population enrolled in individual- and group-level evidence-based interventions.

Instructions: Specify the total number of HIV-positive persons from the specified Target Population (ME213a…z) enrolled in individual- and group-level evidence-based interventions. Follow labeling instructions outlined in ME213a-z.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME216a-z	**Total number of HIV-positive persons enrolled in community-level evidence-based interventions**	XSD (Schema) Name:	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The total number of HIV-positive persons from the specified Target Population enrolled in community-level evidence-based interventions. A community-level evidence-based intervention (EBI) is defined as an EBI that seeks to improve the risk conditions through a focus on the community as a whole, rather than by interviewing only with individuals or small groups.

Instructions: Specify the total number of HIV-positive persons from the specified Target Population (ME213a…z) enrolled in community-level evidence-based interventions. Follow labeling instructions outlined in ME213a-z.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name			
ME217a-z	**Total number of HIV-positive persons enrolled in other locally developed programs**	XSD (Schema) Name:		

Value Option: TBD **Format Type: Number** **Min Length: 1** **Max Length: 8**

Definition: The total number of HIV-positive persons from the specified Target Population enrolled in other locally developed programs.

Instructions: Specify the total number of HIV-positive persons from the specified Target Population (ME213a-z) enrolled in other locally developed programs. Follow labeling instructions outlined in ME213a-z.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME218a-z	**Target population of high-risk HIV-negative individuals**	XSD (Schema) Name:		

Value Option: TBD **Format Type: Alpha-Numeric** **Min Length: 1** **Max Length: 100**

Definition: Targeted high-risk HIV-negative populations for prevention interventions (e.g., MSM, IDU, high-risk heterosexuals, transgender).

Instructions: Specify the target population of high-risk HIV-negative individuals. Enter up to 26 target populations. Label the first target population as ME218a and label the service/intervention variables associated with this target population as ME219a, ME220a, ME221a, ME222a, respectively. Label the second target population as ME218b and its associated service/intervention variables as ME219b, ME220b, ME221b, and ME222b. Continue to apply this labeling convention to subsequent target populations, up to ME218z.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

ME219a-z	**Total number of high-risk HIV-negative persons enrolled in behavioral risk screening**	XSD (Schema) Name:		

Value Option: TBD **Format Type: Number** **Min Length: 1** **Max Length: 8**

Definition: A behavioral risk screen is a brief evaluation of behavioral HIV risk factors used to decide who should be recommended for HIV testing, interventions, or other services.

Instructions: Specify the total number of high-risk HIV-negative persons from the specified Target Population (ME218a…z) enrolled in behavioral risk screening. Follow labeling instructions outlined in ME218a-z.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
ME220a-z	**Total number of high-risk HIV-negative persons enrolled in individual- and group-level evidence-based interventions**	XSD (Schema) Name:	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The total number of high-risk HIV-negative persons from the specified Target Population enrolled in individual- and group-level evidence based interventions.

Instructions: Specify the total number of high-risk HIV-negative persons from the specified Target Population (ME218a…z) enrolled in individual- and group-level evidence based interventions. Follow labeling instructions outlined in ME218a-z.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME221a-z	**Total number of high-risk HIV-negative persons enrolled in community-level evidence-based interventions**	XSD (Schema) Name:	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: A community-level evidence-based intervention (EBI) is defined as an EBI that seeks to improve the risk conditions through a focus on the community as a whole, rather than by interviewing only individuals or small groups.

Instructions: Specify the total number of high-risk HIV-negative persons from the specified Target Population (ME218a…z) enrolled in community-level evidence-based interventions. Follow labeling instructions outlined in ME218a-z.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
ME222a-z	**Total number of high-risk HIV-negative persons enrolled in other locally developed programs**	XSD (Schema) Name:	

Value Option: TBD   **Format Type: Number**   **Min Length: 1**   **Max Length: 8**

Definition: The total number of high-risk HIV-negative persons from the specified Target Population enrolled in other locally developed programs.

Instructions: Specify the total number of high-risk HIV-negative persons from the specified Target Population (ME218a…z) enrolled in other locally developed programs. Follow labeling instructions outlined in ME218a-z.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num   *Variable Name*

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. Budget allocation information is required for grantees receiving PS12-1201 Category A, Category B and Category C funds, and for all other CDC funds which support HIV prevention activities.

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

BT101a   **Amount of PS12-1201 Category A funds allocated for HIV testing in healthcare settings**   **XSD (Schema) Name:** **amountHIVtestRoutineCateA**

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 HIV testing in healthcare settings. HIV testing in healthcare settings 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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name		
BT101b	**Amount of PS12-1201 Category B funds allocated for HIV testing in healthcare settings**	**XSD (Schema) Name:**	**amountHIVtestRoutineCateB**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 12**

Definition: For PS12-1201 Category B award (Expanded HIV Testing for Disproportionately Affected Populations), this value represents the allocation associated with HIV testing in healthcare settings performed using Category B funds. HIV testing in healthcare settings 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 HIV testing in healthcare settings. If no funds were allocated then enter 0.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
BT101c	**Amount of PS12-1201 Category C funds allocated for HIV testing in healthcare settings**	**XSD (Schema) Name:**	**amountHIVtestRoutineCateC**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 12**

Definition: For PS12-1201 Category C award (Demonstration Projects), this value represents the funds allocated from your Category C award that are for HIV testing in healthcare settings. HIV testing in healthcare settings 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 HIV testing in healthcare settings. If no funds were allocated then enter 0.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

NHME Variables and Values

Num	Variable Name

BT102a — **Amount of PS12-1201 Category A funds allocated for HIV testing in non-healthcare settings**   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 HIV testing in non-healthcare settings. HIV testing in non-healthcare settings 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 HIV testing in non-healthcare settings. If no funds were allocated then enter 0.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

BT102b — **Amount of PS12-1201 Category B funds allocated for HIV testing in non-healthcare settings**   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 HIV testing in non-healthcare settings. HIV testing in non-healthcare settings 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 HIV testing in non-healthcare settings, if implemented or applicable. If no funds were allocated then enter 0.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
BT102c	**Amount of PS12-1201 Category C funds allocated for HIV testing in non-healthcare settings**	**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 HIV testing in non-healthcare settings. HIV testing in non-healthcare settings 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

Instructions: Indicate the amount of PS12-1201 Category C funds awarded to your agency that have been allocated for HIV testing in non-healthcare settings, if implemented or applicable. If no funds were allocated then enter 0.

Business rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

BT102m	**Open-ended question 2 for HIV testing in non-healthcare settings**	**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 in non-healthcare settings that may be a concern to you, if applicable.

Instructions: Please answer the question in 100 words or less.

Business rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Allowed but not required
CBO Aggregate: Not applicable

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: 12**

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 rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name

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: **12**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

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: **12**

Definition: For PS12-1201 Category C award (Demonstration Projects); 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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name

BT103e   **Amount of all PS12-1201 funds allocated to Partner Services**   **XSD (Schema) Name:**   **amountPSAll**

Value Option: N/A   **Format Type:**   **Currency**   **Min Length:**   **1**   **Max Length:**   **12**

Definition: For all PS12-1201 funding, this value represents the allocation associated with Partner Services.

Instructions: Indicate the amount of all PS12-1201 funds your agency allocated to Partner Services. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for comprehensive prevention with positives (amountPSAll<= (amountCPPCateA + amountCPPCateB + amountCPPCateC + amountCPPNon121201)).

BT103f   **Amount of all PS12-1201 funds allocated to HIV continuum of care**   **XSD (Schema) Name:**   **amountCCAll**

Value Option: N/A   **Format Type:**   **Currency**   **Min Length:**   **1**   **Max Length:**   **12**

Definition: For all PS12-1201 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 PS12-1201 funds your agency allocated to HIV continuum of care. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for comprehensive prevention with positives (amountCCAll<=(amountCPPCateA + amountCPPCateB + amountCPPCateC + amountCPPNon121201)).

Num	Variable Name			
BT103g	**Amount of all PS12-1201 funds allocated to Risk-Reduction EBIs with Positives**	**XSD (Schema) Name:**	**amountEBIAll**	

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 12**

Definition:	For all PS12-1201 funding, this value represents the allocation associated with risk-reduction EBIs with HIV-positive persons.
Instructions:	Indicate the amount of all PS12-1201 funds your agency allocated to risk-reduction EBIs with positive persons. If no funds were allocated then enter 0.
Business rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for comprehensive prevention with positives (amountEBIAll<= (amountCPPCateA + amountCPPCateB + amountCPPCateC + amountCPPNon121201)).

Num	Variable Name			
BT103h	**Amount of all PS12-1201 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: 12**

Definition:	For all PS12-1201 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 PS12-1201 funds your agency allocated to other CPP activities. If no funds were allocated then enter 0.
Business rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable Amount entered cannot be greater than sum of PS12-1201 and non-PS12-1201 funds allocated for comprehensive prevention with positives (amountOtherCPPAll<= (amountCPPCateA + amountCPPCateB + amountCPPCateC + amountCPPNon121201)).

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Allowed but not required
CBO Aggregate: Not applicable

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: **12**

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

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: **650**

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 rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Allowed but not required
CBO Aggregate: Not applicable

Num	Variable Name		
BT104h	**Amount of PS12-1201 Category C funding allocated for condom distribution**	**XSD (Schema) Name:**	

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 12**

Definition: For PS12-1201 Category C, this value represents the allocation associated with condom distribution.

Instructions: Indicate the amount of PS12-1201 Category C funding that your agency allocated for condom distribution. If no funds were allcoated then enter 0.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

| **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: 12**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

| **BT106b** | **Amount of PS12-1201 Category B allocated for service integration (optional)** | **XSD (Schema) Name:** amountRoutineCateB | |

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 12**

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 rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

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 funds to other components, please list the programs or activities that you are going to implement or have implemented.

Instructions: Please answer the question in 100 words or less.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Allowed but not required
CBO Aggregate: Not applicable

| **BT106g** | **Amount of PS12-1201 Category A funding allocated for other components** | **XSD (Schema) Name:** | |

Value Option: N/A   **Format Type:** **Currency**   **Min Length:** **1**   **Max Length:** **12**

Definition: For PS12-1201 Category A, this value represents the allocation associated with other non-required prevention activities, excluding support services.

Instructions: Indicate the amount of PS12-1201 Category A funding that your agency allocated for other components (non-required prevention activities excluding support services). If no funds were allocated then enter 0.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

| **BT106h** | **Open-ended question for PS12-1201 Category A funds allocated for other components** | **XSD (Schema) Name:** | |

Value Option: N/A   **Format Type:** **Alpha-Numeric**   **Min Length:** **1**   **Max Length:** **650**

Definition: If you have allocated PS12-1201 Category A funds to other components, please list the program or activities that you are going to implement or have implemented.

Instructions: Please answer the question in 100 words or less.

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name

BT106i   **Amount of PS12-1201 Category B funding allocated for other components**   **XSD (Schema) Name:**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 12**

Definition: For PS12-1201 Category B, this value represents the allocation associated with other non-required prevention activities excluding service integration and support services.

Instructions: Indicate the amount of PS12-1201 Category B funding that your agency allocated for other components (non-required prevention activities excluding service integration and support services). If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

BT106j   **Amount of PS12-1201 Category C funding allocated for other components**   **XSD (Schema) Name:**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 12**

Definition: For PS12-1201 Category C, this value represents the allocation associated with other non-required prevention activities excluding support services.

Instructions: Indicate the amount of PS12-1201 Category C funding that your agency allocated for other components (non-required prevention activities excluding support services). If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

BT107c   **Amount of PS12-1201 Category A funds allocated for HIV prevention program monitoring and evaluation**   **XSD (Schema) Name: amountMandE121201CateA**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 12**

Definition: For PS12-1201 Category A, this value represents the allocation associated with program monitoring and evaluation.

Instructions: Indicate the amount of PS12-1201 Category A funding that your agency allocated for program monitoring and evaluation. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name

BT107d   **Amount of PS12-1201 Category B funds alloacted for HIV prevention program monitoring and evaluation**   **XSD (Schema) Name:**   **amountMandE121201CateB**

Value Option: N/A   **Format Type:**   **Currency**   **Min Length:**   **1**   **Max Length:**   **12**

Definition: For PS12-1201 Category B, this value represents the allocation associated with program monitoring and evaluation.

Instructions: Indicate the amount of PS12-1201 Category B funding that your agency allocated for program monitoring and evaluation. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

BT107e   **Amount of PS12-1201 Category C funds allocated for HIV prevention program monitoring and evaluation**   **XSD (Schema) Name:**   **amountMandE121201CateC**

Value Option: N/A   **Format Type:**   **Currency**   **Min Length:**   **1**   **Max Length:**   **12**

Definition: For PS12-1201 Category C, this value represents the allocation associated with program monitoring and evaluation.

Instructions: Indicate the amount of PS12-1201 Category C funding that your agency allocated for program monitoring and evaluation. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

BT108c   **Amount of PS12-1201 Cateogry A funds allocated for Jurisdictional HIV Prevention Planning**   **XSD (Schema) Name:**   **amountPlanning121201CateA**

Value Option: N/A   **Format Type:**   **Currency**   **Min Length:**   **1**   **Max Length:**   **12**

Definition: For PS12-1201 Category A, this value represents the allocation associated with jurisdictional HIV prevention planning.

Instructions: Indicate the amount of PS12-1201 Category A funding that your agency allocated for jurisdictional HIV prevention planning. If no funds were allocated then enter 0

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name

BT108d   **Amount of PS12-1201 Category B funds allocated for Jurisdictional HIV Prevention Planning**   **XSD (Schema) Name:**   amountPlanning121201CateB

Value Option: N/A   **Format Type:** Currency   **Min Length:** 1   **Max Length:** 12

Definition: For PS12-1201 Category B, this value represents the allocation associated with jurisdictional HIV prevention planning.

Instructions: Indicate the amount of PS12-1201 Category B funding that your agency allocated for jurisdictional HIV prevention planning. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

BT108e   **Amount of PS12-1201 Category C funds allocated for Jurisdictional HIV Prevention Planning**   **XSD (Schema) Name:**   amountPlanning121201CateC

Value Option: N/A   **Format Type:** Currency   **Min Length:** 1   **Max Length:** 12

Definition: For PS12-1201 Category C, this value represents the allocation associated with jurisdictional HIV prevention planning.

Instructions: Indicate the amount of PS12-1201 Category C funding that your agency allocated for jurisdictional HIV prevention planning. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

BT109c   **Amount of PS12-1201 Category A funds allocated for Capacity Building and Technical Assistance**   **XSD (Schema) Name:**   amountCBTA121201CateA

Value Option: N/A   **Format Type:** Currency   **Min Length:** 1   **Max Length:** 12

Definition: For PS12-1201 Category A, this value represents the allocation associated with capacity building and technical assistance

Instructions: Indicate the amount of PS12-1201 Category A funding that your agency allocated for capacity building and technical assistance. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name		
BT109d	**Amount of PS12-1201 Category B funds allocated for Capacity Building, Technical Assistance, and systems for third party reimbursement for HIV testing and and other related co-infections**	**XSD (Schema) Name:**	**amountCBTA121201CateB**

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 12**

Definition: For PS12-1201 Category B, this value represents the allocation associated with capacity building, technical assistance, and systems for third party reimbursement for HIV testing and other related co-infections.

Instructions: Indicate the amount of PS12-1201 Category B funding that your agency allocated for capacity building, technical assistance, and systems for third party reimbursement for HIV testing and other related co-infections. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

| **BT109e** | **Amount of PS12-1201 Category C funds allocated for Capacity Building and Technical Assistance** | **XSD (Schema) Name:** | **amountCBTA121201CateC** |

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 12**

Definition: For PS12-1201 Category C, this value represents the allocation associated with capacity building and technical assistance.

Instructions: Indicate the amount of PS12-1201 Category C funding that your agency allocated for capacity building and technical assistance. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

| **BT110c** | **Amount of PS12-1201 Category A funds allocated for agency's general operations or admin activities** | **XSD (Schema) Name:** | **amountAdmin121201CateA** |

Value Option: N/A   **Format Type: Currency**   **Min Length: 1**   **Max Length: 12**

Definition: For PS12-1201 Category A, this value represents the allocation associated with agency's general operations or administrative activities.

Instructions: Indicate the amount of PS12-1201 Category A funding that your agency allocated for agency's general operations or administrative activities. If no funds were allocated then enter 0.

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Required
CBO Aggregate: Not applicable

Num	Variable Name
BT110d	**Amount of PS12-1201 Category B funds allocated for agency's general operations or admin activities**

XSD (Schema) Name: **amountAdmin121201CateB**

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 12**

Definition:	For PS12-1201 Category B, this value represents the allocation associated with agency's general operations or administrative activities.
Instructions:	Indicate the amount of PS12-1201 Category B funding that your agency allocated for agency's general operations or administrative activities. If no funds were allocated then enter 0.
Business rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

Num	Variable Name
BT110e	**Amount of PS12-1201 Category C funds allocated for agency's general operations or admin activities**

XSD (Schema) Name: **amountAdmin121201CateC**

Value Option: N/A **Format Type: Currency** **Min Length: 1** **Max Length: 12**

Definition:	For PS12-1201 Category C, this value represents the allocation associated with agency's general operations or administrative activities.
Instructions:	Indicate the amount of PS12-1201 Category B funding that your agency allocated for agency's general operations or administrative activities. If no funds were allocated then enter 0.
Business rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Required CBO Aggregate: Not applicable

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 rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Allowed but not required CBO Aggregate: Not applicable

Num   *Variable Name*

Additional HIV Testing Requirements: PS15-1502 Directly Funded CBOs only

Table: CBOTEST   Additional HIV Testing Variables, PS15-1502 only

This table is completed by all CDC directly funded community-based organizations funded by PS15-1502.

Num   *Variable Name*

CBOTEST001   **Target Population(s)**   **XSD (Schema) Name:**

Value Option: Choose all that apply   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 1**

Definition: The client belongs to the population(s) targeted by the CBO's PS15-1502-funded targeted HIV testing program.

Instructions: Indicate whether the client belongs to the primary or secondary population(s) targeted by your agency's PS15-1502-funded targeted HIV testing program.

Business rule   HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Required
HD Aggregate: Not applicable

Detailed business rule:
Should be reported reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Value option TP9 should only be selected if TP1, TP2, or TP3 is not selected.

Code	Value Description	Value Definition
TP1	*Primary target population*	*Client is a member of the primary population targeted by the CBO's PS15-1502-funded targeted HIV testing program*
TP2	*Secondary target population*	*Client is a member of the secondary population targeted by the CBO's PS15-1502-funded targeted HIV testing program*
TP3	*Both target populations*	*Client is a member of the primary and secondary target population*
TP9	*Not a member of either target population*	*Client is not a member of the primary or secondary population targeted by the CBO's PS15-1502-funded targeted HIV testing program*

NHME Variables and Values

Num	Variable Name		
CBOTEST002	**High-Risk Client**	**XSD (Schema) Name:**	

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

Definition: Assessment of a client's risk level is determined on the basis of his/her responses provided on the CBO's risk assessment tool and based on the definition provided by CDC for the CBO's PS15-1502-funded targeted HIV testing program.

Instructions: Indicate whether the client is at high-risk for HIV-infection.

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Not expected otherwise.

Code	Value Description	Value Definition
0	*No*	*Client is not at high-risk for HIV infection as defined by the CBO's PS15-1502-tunded targeted HIV testing program*
1	*Yes*	*Client is at high-risk for for HIV-infection as defined by the CBO's PS15-1502-funded targeted HIV testing program*
2	*Not assessed*	*No risk assessment was done for this client*

NHME Variables and Values

Num	Variable Name		
CBOTEST003	**HIV Medical Care at the time of this positive test**	**XSD (Schema) Name:**	

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

Definition: At the time of this positive test, is the client already in HIV medical care?

Instructions: Indicate if the client is already in HIV medical care at the time of this positive test.

Business rule   HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Not expected otherwise.

Code	Value Description	Value Definition
0	No	Client was not in HIV medical care at the time of this positive test
1	Yes	Client was in HIV medical care at the time of this positive test
66	Not asked	Client was not asked if he/she was already in HIV medical care at the time of this positive test
77	Declined to answer	Client declined to answer if he/she was already in HIV medical care at the time of this positive test

NHME Variables and Values

Num	Variable Name	
CBOTEST004	**Navigation and prevention and essential support services, HIV Testing**	**XSD (Schema) Name:**

Value Option: Choose all that apply　　　**Format Type: Alpha-Numeric**　　　**Min Length: 1**　　　**Max Length: 4**

Definition:	The navigation, prevention, and essential support services that a client was referred to or provided as part of PS15-1502 HIV testing program
Instructions:	Indicate all navigation, prevention, and essential support services the client was referred to or provided as part of the CBO's PS15-1502 HIV testing program
Business rule	HIV Testing: Required, see detailed business rule Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable Detailed business rule: Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14). Not expected otherwise.

Code	Value Description	Value Definition
P1	*Provided a High Impact Prevention (HIP) behavioral intevention, HIV-positive*	*Client was provided a CDC-supported evidence-based behavioral intervention (EBI) for HIV-positive persons that reduce sexual or drug-related risks related to the transmission of HIV infection*
P2	*Provided medication adherence support services, HIV-positive*	*Client was provided a CDC-supported medication adherence intervention that improves medication adherence and/or viral load among HIV patients who have been prescribed antiretroviral treatment (ART), HIV-positive only*
P3	*Provided screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive*	*Client was provided screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive only*
P4	*Provided screening for viral hepatitis, HIV-positive*	*Client was provided screening for viral hepatitis, HIV-positive only*
P5	*Provided screening for TB/TB infection, HIV-positive*	*Client was provided screening for latent or active strains of tuberculosis, HIV-positive only*
P6	*Provided a High Impact Prevention (HIP) behavioral intevention, HIV-negative*	*Client was provided a CDC-supported High Impact Prevention (HIP) behavioral intervention for high-risk HIV-negative persons*
P7	*Provided screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative*	*Client was provided screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative only*
P8	*Provided screening for viral hepatitis, HIV-negative*	*Client was provided screening for viral hepatitis, HIV-negative only*
P9	*Provided screening for TB/TB infection, HIV-negative*	*Client was provided screening for latent or active strains of tuberculosis, HIV-negative only*
RF1	*Referred to a High Impact Prevention (HIP) behavioral intervention, HIV-positive*	*Client was referred to a CDC-supported evidence based behavioral intervention (EBI) for HIV-positive persons that reduce sexual or drug-related risks related to the transmission of HIV infection*

Num	Variable Name	
RF10	Referred to non-occupational post-exposure prophylaxis (nPEP), HIV-negative	Client was referred to non-occupational post-exposure prophylaxis (nPEP), HIV-negative only
RF11	Referred to pre-exposure prophylaxis (PrEP), HIV-negative	Client was referred to pre-exposure prophylaxis (PrEP), HIV-negative only
RF12	Referred to screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative	Client was referred to screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative only
RF13	Referred to screening for viral hepatitis, HIV-negative	Client was referred to screening for viral hepatitis, HIV-negative only
RF14	Referred to screening for TB/TB infection, HIV-negative	Client was referred to screening for latent or active strains of tuberculosis, HIV-negative only
RF15	Referred to treatment for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative	Client was referred to treatment for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative only
RF16	Referred to treatment or vaccination for viral hepatitis, HIV-negative	Client was referred to treatment or vaccination for viral hepatitis, HIV-negative only
RF17	Referred to treatment for TB/TB infection, HIV-negative	Client was referred to treatment for latent or active strains of tuberculosis, HIV-negative only
RF18	Referred to basic education continuation and completion services	Programs that asisst the client in improving basic reading, writing, math, spelling, and language skills (such as GED preparation, or English as a Second Language (ESL) classes)
RF19	Referred to employment services	Programs that provide employment assistance including vocational trainings, employment referrals, job placement, skills assessment, resume building support, etc.
RF2	Referred to medication adherence support services, HIV-positive	Client was referred to a CDC-supported medication adherence intervention that improves medication adherence and/or viral load among HIV patients who have been prescribed antiretroviral treatment (ART), HIV-positive only
RF20	Referred to housing services	Programs that help clients find adequate housing by poviding services such as assistance with homelessness, rental housing, or home-buying, access/eligibility assessment to HUD/HOPWA housign programs
RF21	Referred to insurance navigation and enrollment services	Programs that help uninsured clients enroll in public or private healthcare insurance. Services may include outreach and education on available insurance options, eligivility assessment, enrollment, etc.
RF22	Referred to mental mental health counseling and services	Programs that are provided by a mental health professional. Services may include pyshiatric assessment, consultation, treatment, psychotherapy, crisis intervention, etc.
RF23	Referred to sex education, including HIV education	Client was referred to sex education, including HIV education (e.g. risk education programs, school-based HIV prevention providers) and HIV/AIDS prevention education
RF24	Referred to substance abuse treatment and services	Drug and alcohol abuse treatment and support programs/services
RF25	Referred to transportation services	Client received a referral to agencies providing transportation assistance (to and from HIV prevention and medical care appointments, including HIV medical care appointments), e.g., through direct transportation services, vouchers, or tokens

Num	Variable Name	
RF26	*Referred to other prevention and essential support services*	*Other navigation, prevention, and essential support services, e.g., social services, peer support, child care assistance, food, services for youth and/or seniors, etc.*
RF3	*Referred to screening for STDs (syphilis, gonorhea, and chlamydia), HIV-positive*	*Client was referred to screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive only*
RF4	*Referred to screening for viral hepatitis, HIV-positive*	*Client was referred to screening for viral hepatitis, HIV-positive only*
RF5	*Referred to screening for TB/TB infection, HIV-positive*	*Client was referred to screening for latent or active strains of tuberculosis, HIV-positive only*
RF6	*Referred to treatment for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive*	*Client was referred to treatment for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive only*
RF7	*Referred to treatment or vaccination for viral hepatitis, HIV-positive*	*Client was referred to treatment or vaccination for viral hepatitis, HIV-positive only*
RF8	*Referred to treatment for TB/TB infection, HIV-positive*	*Client was referred to treatment for latent or active strains of tuberculosis, HIV-positive only*
RF9	*Referred to a High Impact Prevention (HIP) behavioral intervention, HIV-negative*	*Client was referred to a CDC-supported High Impact Prevention (HIP) behavioral intervention for high-risk HIV-negative persons*

CBOTEST004SP **Other recommended support services, HIV testing**   **XSD (Schema) Name:**

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

Definition: Description of other navigation and prevention and essential support services a client was referred to or provided

Instructions: Enter the type of service the client was referred to or provided

Business rule HIV Testing: Required, see detailed business rule
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Not applicable
HD Aggregate: Not applicable

Detailed business rule:
Text must be entered if other prevention and essential support services (value option RF26) is selected for CBOTEST004.

NHME Variables and Values

CBO Client Summary Requirements

Table: CBOCL   CBO Client Summary Variables

This table is completed by all CDC directly funded community-based organizations funded by PS15-1502.

Num   *Variable Name*

CBOCL001   **Date of first visit in this budget year**   **XSD (Schema) Name:**

Value Option: **N/A**	Format Type: **Date**	Min Length: **8**	Max Length: **10**

Definition: The date of the client's first visit this funding year

Instructions: Enter the month, day, and year the client first visited the agency this funding year

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Required, see detailed business rule
HD Aggregate: Not applicable

Detailed business rule:
Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Not expected otherwise.

CBOCL002   **Budget year**   **XSD (Schema) Name:**

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

Definition: The P15-1502 funding year in which the client received this service

Instructions: Enter the funding year the client received PS15-1502 funded services

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Required, see detailed business rule
HD Aggregate: Not applicable

Detailed business rule:
Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Not expected otherwise.

Num	Variable Name		
CBOCL003	**Client Record Number**	**XSD (Schema) Name:**	

Value Option: N/A   **Format Type: Number**   **Min Length: 1**   **Max Length: 32**

Definition: A locally developed, unique-client number used to distnguish an individual client receiving one or more services within an agency

Instructions: Enter the unique client record number assigned by the CBO to an individual client. Client Record Number must not contain any personally identifiable information (PII).

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Mandatory, see detailed business rule
HD Aggregate: Not applicable

Detailed business rule:
Must be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Not expected otherwise.

NHME Variables and Values

Num	Variable Name		
CBOCL005	**Client's HIV Status**	XSD (Schema) Name:	

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

Definition: The client's self-reported or documented HIV status at the time of his/her first visit this funding year

Instructions: Select the most appropriate option based on the information provided by the client at the time of his/her first visit this funding year

Business rule
HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Required, see detailed business rule
HD Aggregate: Not applicable

Detailed business rule:
Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Not expected otherwise.

Code	Value Description	Value Definition
1	Positive	Client's self-reported HIV-positive status
2	Negative, verified	Client tested HIV-negative within the last 3 months, documentation provided
3	Negative, not verified	Client reports having tested HIV-negative within the last 3 months, no documentation provided
4	Negative	Client reports having last tested HIV-negative more than 3 months ago
9	Unknown	Client's HIV status is not known

NHME Variables and Values

Num	Variable Name		
CBOCL006	**HIV Medical Care**	**XSD (Schema) Name:**	

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

Definition:　　The client's self report of currently receiving HIV medical care

Instructions:　　Select one

Business rule　　HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Required, see detailed business rule
HD Aggregate: Not applicable

Detailed business rule:
Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Not expected otherwise.

Code	Value Description	Value Definition
0	*No*	*Client is not currently receiving HIV medical care*
1	*Yes*	*Client is currently receiving HIV medical care*
66	*Not asked*	*Client was not asked if he/she was currently receiving HIV medical care*
77	*Declined to answer*	*Client declined to answer if he/she was currently receiving HIV medical care*

NHME Variables and Values

Num	Variable Name		
CBOCL007	**HIV Linked to Medical Care - attended first medical appointment**	**XSD (Schema) Name:**	

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

Definition: A client, not currently in HIV medical care, was linked to or re-engaged in HIV medical care - attended first medical appointment

Instructions: Complete if the client is not currenty receiving HIV medical care

Business rule HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Required, see detailed business rule
HD Aggregate: Not applicable

Detailed business rule:
Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Required if CBOCL006 = 0

Code	Value Description	Value Definition
0	*No*	*Client who is not currently in HIV medical care was not linked to or re-engaged in HIV medical care*
1	*Yes*	*Client who is not currently in HIV medical care was linked to or re-engaged in HIV medical care*
2	*Staff person doesn't know*	*Staff person at CBO does not know if the client who is currently not in HIV medical care was linked to or re-engaged in HIV medical care*

NHME Variables and Values

Num	Variable Name		
CBOCL008	**Change in HIV Status since the first visit in this budget year**	XSD (Schema) Name:	

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

Definition:	The client's HIV status changed from HIV-negative or unknown to HIV-positive since her/his first visit in this funding year
Instructions:	Check only if the client's HIV status has changed from HIV-negative or unknown to HIV-positive since her/his first visit in this funding year
Business rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Required, see detailed business rule HD Aggregate: Not applicable Detailed business rule: Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14). Not expected otherwise.

Code	Value Description	Value Definition
0	No	*Client's HIV status has not changed since her/his first visit in this funding year*
1	Yes	*Client's HIV status changed from HIV-negative/unknown to HIV-positive since her/his first visit in this funding year*

NHME Variables and Values

Num	Variable Name		
CBOCL009	**Navigation and prevention and essential support services, RRA**	**XSD (Schema) Name:**	

Value Option: Choose all that apply   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 4**

Definition: The navigation, prevention, and essential support services that a client was referred to or provided as part of PS15-1502 risk reduction activities

Instructions: Select all services the client was referred to or provided as part o PS15-1502 risk reduction activities

Business rule   HIV Testing: Not applicable
Partner Services: Not applicable
HD Risk Reduction Activities: Not applicable
CBO Risk Reduction Activities: Required, see detailed business rule
HD Aggregate: Not applicable

Detailed business rule:
Should only be reported by directly funded CBOs funded by PS15-1502 (X137=13 or X137=14).

Not expected otherwise.

Code	Value Description	Value Definition
P1	*Provided High Impact Prevention (HIP) behavioral intervention, HIV-positive*	*Client was provided a High Impact Prevention (HIP) behavioral intervention, HIV-positive only*
P10	*Provided screening for TB/TB infection, HIV-negative*	*Client was provided screening for TB/TB infection, HIV-negative only*
P2	*Provided medication adherence support services, HIV-positive*	*Client was provided medication adherence support services, HIV-positive only*
P3	*Provided screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive*	*Client was provided screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive only*
P4	*Provided screening for viral hepatitis, HIV-positive*	*Client was provided screening for viral hepatitis, HIV-positive only*
P5	*Provided screening for TB/TB infection, HIV-positive*	*Client was provided screening for TB/TB infection, HIV-positive only*
P6	*Provided a High Impact Prevention (HIP) behavioral intevention, HIV-negative*	*Client was provided a High Impact Prevention (HIP) behavioral intervention, HIV-negative only*
P7	*Provided HIV testing, HIV-negative*	*Client provided HIV testing, HIV-negative only*
P8	*Provided screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative*	*Client was provided screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative only*
P9	*Provided screening for viral hepatitis, HIV-negative*	*Client was provided screening for viral hepatitis, HIV-negative only*
RF1	*Referred to HIV medical care, HIV-positive*	*Client was referred to HIV medical care, HIV-positive only*
RF10	*Referred to treatment for TB/TB infection, HIV-positive*	*Client was referred to treatment for TB/TB infection, HIV-positive only*
RF11	*Referred to High Impact Prevention (HIP) behavioral intevention, HIV-negative*	*Client was referred to a High Impact Prevention (HIP) behavioral intervention, HIV-negative only*
RF12	*Referred to HIV testing, HIV-negative*	*Client was referred to HIV testing, HIV-negative only*

NHME Variables and Values

Num	Variable Name	
RF13	*Referred to non-occupational post-exposure prophylaxis (nPEP), HIV-negative*	*Client was referred to non-occupational post-exposure prophylaxis (nPEP), HIV-negative only*
RF14	*Referred to pre-exposure prophylaxis (PrEP), HIV-negative*	*Client was referred to pre-exposure prophylaxis (PrEP), HIV-negative only*
RF15	*Referred to screening for STDs (syphilis, gonorhea, and chlamydia), HIV-negative*	*Client was referred to screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative only*
RF16	*Referred to screening for viral hepatitis, HIV-negative*	*Client was referred to screening for viral hepatitis, HIV-negative only*
RF17	*Referred to screening for TB/TB infection, HIV-negative*	*Client was referred to screening for TB/TB infection, HIV-negative only*
RF18	*Referred to treatment for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative*	*Client was referred to treatment for STDs (syphilis, gonorrhea, and chlamydia), HIV-negative only*
RF19	*Referred to treatment or vaccination for viral hepatitis, HIV-negative*	*Client was referred to treatment or vaccination for viral hepatitis, HIV-negative only*
RF2	*Referred to a High Impact Prevention (HIP) behavioral intervention, HIV-positive*	*Client was referred to a High Impact Prevention (HIP) behavioral intervention, HIV-positive only*
RF20	*Referred to treatment for TB/TB infection, HIV-negative*	*Client was referred to treatment for TB/TB infection, HIV-negative only*
RF21	*Referred to basic education continuation and completion services*	*Client was referred to basic education continuation and completion services*
RF22	*Referred to employment services*	*Client was referred to employment services*
RF23	*Referred to housing services*	*Client was referred to housing services*
RF24	*Referred to insurance navigation and enrollment services*	*Client was referred to insurance navigation and enrollment services*
RF25	*Referred to mental mental health counseling and services*	*Client was referred to mental health counseling and services*
RF26	*Referred to sex education, including HIV education*	*Client was referred to sex education, including HIV education (e.g. risk education programs, school-based HIV prevention providers)*
RF27	*Referred to substance abuse treatment and services*	*Client was referred to substance abuse treatment and services*
RF28	*Referred to transportation services*	*Client was referred to transportation services (to and from HIV prevention and medical care appointments, including HIV medical care appointments)*
RF29	*Client referred to other prevention and essential support servcies*	
RF3	*Referred to medication adherence support services, HIV-positive*	*Client was referred to medication adherence support services, HIV-positive only*
RF4	*Referred to Partner Services, HIV-positive*	*Client was referred to Partner Services, HIV-positive only*
RF5	*Referred to screening for STDs (syphilis, gonorhea, and chlamydia), HIV-positive*	*Client was referred to screening for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive only*
RF6	*Referred to screening for viral hepatitis, HIV-positive*	*Client was referred to screening for viral hepatitis, HIV-positive only*
RF7	*Referred to screening for TB/TB infection, HIV-positive*	*Client was referred to screening for TB/TB infection, HIV-positive only*
RF8	*Referred to treatment for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive*	*Client was referred to treatment for STDs (syphilis, gonorrhea, and chlamydia), HIV-positive only*

Num	Variable Name	
RF9	*Referred to treatment or vaccination for viral hepatitis, HIV-positive*	*Client was referred to treatment or vaccination for viral hepatitis, HIV-positive only*

CBOCL009SP **Other recommended support services, RRA**   **XSD (Schema) Name:**

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

Definition:	Description of other navigation and prevention and essential support services a client was referred to or provided
Instructions:	Enter the type of service the client was referred to or provided
Business rule	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Not applicable CBO Risk Reduction Activities: Required, see detailed business rule HD Aggregate: Not applicable Detailed business rule: Text must be entered if other prevention and essential support services (value option RF29) is selected for CBOCL009

NHME Variables and Values

Num   *Variable Name*

XML Specific Fields

Table: Z1	XML Specific Fields

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. These fields apply to all XML formats, with the exception of the now obsolete CTv1 format. (Some variable may have had different XSD (Schema) Names in older formats. See the individual variables for details.

Num	*Variable Name*		
Z01	**Status**	**XSD (Schema) Name:**	**@status**

Value Option: Enter one value only   **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 by a number of different records (Site, HivForm, aggregateData. Etc.). This indicator is always an attribute (for example <HivForm status="N">…). Check the relevant XSD to determine which elements can be modified with a status, and which element must be modified with a status.

Instructions: Indicate if the records are new, updated, should be deleted, are re-submitted but unchanged from a previous submission, or, for aggregate data, should be added to existing totals.

Business rule   Applicable only for XML uploads

Code	Value Description	Value Definition
A	*Added Record*	*Applies only to Aggregate Data. This record should be added to the totals for the period for the variable reported.*
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 EvaluationWeb. If the record is in the system from a previous submission and is not exactly identical to the submitted record, the system will report an error.*
R	*Resubmitted Record*	*This record has been submitted previously and is not changed in this submission.*
U	*Updated Record*	*This record is an updated record; the record has been previously submitted to EvaluationWeb and contains updated information. If the record is not currently in the system, the system will report an error.*

Num	Variable Name		
Z02	**Last Modified Date**	**XSD (Schema) Name:**	**@lastModifiedDate**

Value Option: N/A	**Format Type:** **MM/DD/YYYY**	**Min Length:** **8**	**Max Length:** **10**

Definition:	An indicator to denote the date on which the record was modified based on the last time the record was modified This indicator is always an attribute in the XML. (<HivForm lastModifiedDate="01/01/2013">). See the relevant XSD to determine which elements may contain a last modified date.
Instructions:	Indicate the date the record was last modified. If the record is added, the date should be the date the record was added. If the record should be deleted, the date should be the date when the status changed to a deleted record. If this is a new record, the date of data entry should be entered. If the record is resubmitted but unchanged from a previous submission, the date should be the same date as the last upload/submission. If the record is an update, the date should be date the record was last modified. If, for aggregate data, the record is to be added to previous data, the date should be when the record was added.
Business rule	Applicable only for XML uploads

Z03a	**CT Schema Version Number**	**XSD (Schema) Name:**	**CTSchemaVersion**

Value Option: Enter one value only	**Format Type:** **Number**	**Min Length:** **1**	**Max Length:** **10**

Definition:	Specifies the version of the XSD which has been used to validate the XML file.
Instructions:	This value will be hard coded within the schema. The number should exactly match the version number specified in the appropriate XSD - for 2012 CT data, use 2.1, CT schema 1.0 does not contain this field.
Business rule	Applicable only for XML uploads of CT data.

Z03b	**PS Schema Version Number**	**XSD (Schema) Name:**	**psSchemaVersion**

Value Option: Enter one value only	**Format Type:** **Number**	**Min Length:** **1**	**Max Length:** **10**

Definition:	Specifies the version of the XSD which has been used to validate the XML file.
Instructions:	This value will be hard coded within the schema. The number should exactly match the version number specified in the appropriate XSD - for Partner Services use 1.0 or 2.0 depending on which format is being submitted.
Business rule	Applicable only for XML uploads of PS data.

NHME Variables and Values

Num	Variable Name		
Z03c	**Schema Version Number**	XSD (Schema) Name:	**SchemaVersionNumber**

Value Option: **Enter one value only**   **Format Type:** **Number**   **Min Length:** **1**   **Max Length:** **10**

Definition: Specifies the version of the XSD which has been used to validate the XML file.

Instructions: This value will be hard coded within the schema.
The number should exactly match the version number specified in the appropriate XSD. For non-CT, non-PS data, it should be 1.0; for 2013 CT data, it should be 3.0.

Business rule Applicable only for XML uploads after January 2013.

Z04	**Agency ID Sending 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 rule Applicable only for XML uploads.

Z05a	**First Date of Data Included in File**	XSD (Schema) Name:	**firstDate**

Value Option: **N/A**   **Format Type:** **MM/DD/YYYY**   **Min Length:** **8**   **Max Length:** **10**

Definition: Specifies the first date of data included in the file and allows for better data management (duplicate identification). This helps to identify the correct data receiving process necessary to handle the XML message.

Instructions: Enter the first date of data submitted in the current file.

Business rule Applicable only for XML uploads

Z05b	**Last Date of Data Included in File**	XSD (Schema) Name:	**lastDate**

Value Option: **N/A**   **Format Type:** **MM/DD/YYYY**   **Min Length:** **8**   **Max Length:** **10**

Definition: Specifies the last date of data included in the file and allows for better data management (duplicate identification). This helps to identify the correct data receiving process necessary to handle the XML message.

Instructions: Enter the last date of data submitted in the current file.

Business rule Applicable only for XML uploads

NHME Variables and Values

Num	Variable Name			
Z06	**Data Type in File**		**XSD (Schema) Name:**	**dataType**

Value Option: Enter one value only   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 5**

Definition:	Specifies the type of data being sent.	
Instructions:	Enter the date type of data sent.	
Business rule	Applicable only for XML uploads.	

Code	Value Description	Value Definition
CBOAG	*CBO aggregate*	*Aggregate level directly funded CBO data*
CBOCL	*CBO client level*	*Client level directly funded CBO data*
CT	*Counseling and testing*	*Client level counseling and Testing Data*
HDAG	*Health department aggregate*	*Aggregate level health department data*
HDCL	*Health department client level*	*Client level health department non-CT non-PS data*
PS	*Partner services*	*Client level partner services data*

Num	Variable Name		
Z07	**Contact Person Information**	**XSD (Schema) Name:**	**contactPersonInformation**

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

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 rule	Applicable only for XML uploads

Num	Variable Name		
Z08	**Collection of Agency IDs Included in File**	**XSD (Schema) Name:**	**agencyIDs**

Value Option: TBD   **Format Type: Alpha-Numeric**   **Min Length: 1**   **Max Length: 1500**

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 rule	Applicable only for XML uploads

NHME Variables and Values

Num	Variable Name				
Z09	**Date File Was Created**		**XSD (Schema) Name:**	**dateCreated**	

Value Option: N/A   **Format Type: MM/DD/YYYY**   **Min Length: 8**   **Max Length: 19**

Definition: The date (and optionally, the time) the XML file was created.

Instructions: Enter the date the current XML file was created. There should be sufficient precision to uniquely identify a file.

Business rule Applicable only for XML uploads

Z10	**Date File Last Modified**		**XSD (Schema) Name:**	**fileLastModifiedDate**	

Value Option: N/A   **Format Type: MM/DD/YYYY**   **Min Length: 8**   **Max Length: 19**

Definition: If the file has been modified, the date (and optionally, the time) the XML file was last modified.

Instructions: Enter the date the current XML file was modified. There should be sufficient precision to uniquely identify a file submission.

Business rule Applicable only for XML uploads

Z11	**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, or the name of the software that generated the file.

Business rule Applicable only for XML uploads

Z12	**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 agency owner of the submitted XML file.

Instructions: Enter the agency name op the actual owner of the XML file.

Business rule Applicable only for XML uploads