
NHM&E Data Variables and Values

**National HIV Prevention Program Monitoring and Evaluation
(NHM&E)**



NHM&E Data Variables and Values

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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	XSD (Schema) Name:
A01	Agency Name	agencyName
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 100
<i>Definition:</i>	The official legal name of the agency or organization.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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 CBO Aggregate: Not applicable 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.	

Num	Variable Name	XSD (Schema) Name:
A01a	Agency ID	agencyId
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 32
<i>Definition:</i>	An alpha-numeric identification used to uniquely identify an agency.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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 CBO Aggregate: Not applicable 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
 CBO 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



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<i>Num</i>	<i>Variable Name</i>	
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



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<i>Num</i>	<i>Variable Name</i>	
64	<i>FM</i>	<i>Federated States of Micronesia</i>
66	<i>GU</i>	<i>Guam</i>
68	<i>MH</i>	<i>Marshall Islands</i>
69	<i>MP</i>	<i>Northern Mariana Islands</i>
70	<i>PW</i>	<i>Palau</i>
72	<i>PR</i>	<i>Puerto Rico</i>
78	<i>VI</i>	<i>Virgin Islands of the U.S.</i>
80	<i>San Francisco, CA</i>	<i>San Francisco Health Department</i>
81	<i>Los Angeles, CA</i>	<i>Los Angeles Health Department</i>
82	<i>New York City, NY</i>	<i>New York City Health Department</i>
83	<i>Houston, TX</i>	<i>Houston Health Department</i>
84	<i>Chicago, IL</i>	<i>City of Chicago Health Department</i>
85	<i>Philadelphia, PA</i>	<i>City of Philadelphia Health Department</i>
86	<i>Atlanta, GA</i>	<i>Fulton County Department of Health and Wellness</i>
87	<i>Baltimore, MD</i>	<i>Baltimore City Health Department</i>
88	<i>Dallas, TX</i>	<i>Dallas County Health and Human Services</i>
89	<i>Miami, FL</i>	<i>Florida Department of Health</i>
90	<i>San Juan, PR</i>	<i>Puerto Rico Department of Health</i>
91	<i>Fort Lauderdale, FL</i>	<i>Florida Department of Health</i>
999	<i>CDC-Directly Funded CBO</i>	<i>CDC-Directly Funded CBO Instance</i>



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>
A27	CBO Agency Name
	XSD (Schema) Name: CBOAgencyName
Value Option: N/A	Format Type: Alpha-Numeric Min Length: 1 Max Length: 100
<i>Definition:</i>	The official name of the community-based organization directly-funded by CDC to conduct HIV prevention activities.
<i>Instructions:</i>	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.
<i>Business rule</i>	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	XSD (Schema) Name: CBOAgencyID
A28	CBO Agency ID	

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
 CBO Aggregate: Not applicable

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).

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



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<i>Num</i>	<i>Variable Name</i>	
CA011	<i>Special Service for Groups/Asian Pacific AIDS Intervention Team</i>	<i>CDC directly funded community-based organization, Los Angeles, CA</i>
CA012	<i>AIDS Project of the East Bay</i>	<i>CDC directly funded community-based organization, Oakland, CA</i>
CA013	<i>CA Prostitutes Education Project</i>	<i>CDC directly funded community-based organization, Oakland, CA</i>
CA014	<i>HIV Prevention Project of Alameda County</i>	<i>CDC directly funded community-based organization, Oakland, CA</i>
CA015	<i>La Clinica De la Raza, Inc.</i>	<i>CDC directly funded community-based organization, Oakland, CA</i>
CA016	<i>Center for AIDS Research Education & Services</i>	<i>CDC directly funded community-based organization, Sacramento, CA</i>
CA017	<i>Family Health Centers of San Diego</i>	<i>CDC directly funded community-based organization, San Diego, CA</i>
CA018	<i>Asian and Pacific Islander Wellness Center</i>	<i>CDC directly funded community-based organization, San Francisco, CA</i>
CA019	<i>Larkin St. Youth Services</i>	<i>CDC directly funded community-based organization, San Francisco, CA</i>
CA020	<i>Stop AIDS Project</i>	<i>CDC directly funded community-based organization, San Francisco, CA</i>
CA021	<i>Centerforce</i>	<i>CDC directly funded community-based organization, San Rafael, CA</i>
CA022	<i>Tarzana Treatment Centers, Inc.</i>	<i>CDC directly funded community-based organization, Tarzana, CA</i>
CA023	<i>AIDS Services Foundation Orange County</i>	<i>CDC directly funded community-based organization, Irvine, CA</i>
CA024	<i>Centro de Salud de San Ysidro dba San Ysidro Health Center</i>	<i>CDC directly funded community-based organization, San Diego, CA</i>
CA025	<i>Black AIDS Institute/African-American AIDS Policy & Training Institute</i>	<i>CDC directly funded community-based organization, Los Angeles, CA</i>
CA026	<i>San Francisco AIDS Foundation</i>	<i>CDC directly funded community-based organization, San Francisco, CA</i>
CO001	<i>Empowerment Program</i>	<i>CDC directly funded community-based organization, Denver, CO</i>
CT001	<i>Latinos Conta Cida (Latino Community Services, Inc.)</i>	<i>CDC directly funded community-based organization, Hartford, CT</i>
DC001	<i>Children's National Medical Center</i>	<i>CDC directly funded community-based organization, Washington, DC</i>
DC002	<i>Deaf-REACH</i>	<i>CDC directly funded community-based organization, Washington, DC</i>
DC003	<i>Sasha Bruce Youthwork, Inc.</i>	<i>CDC directly funded community-based organization, Washington, DC</i>
DC004	<i>The Women's Collective</i>	<i>CDC directly funded community-based organization, Washington, DC</i>
DC005	<i>Us Helping Us, People Into Living, Inc.</i>	<i>CDC directly funded community-based organization, Washington, DC</i>
DC006	<i>Washington Area Consortium on HIV Infection in Youth (dba Metro Teen AIDS)</i>	<i>CDC directly funded community-based organization, Washington, DC</i>
DC007	<i>La Clinica Del Pueblo, Inc.</i>	<i>CDC directly funded community-based organization, Washington, DC</i>
DC008	<i>Family and Medical Counseling Service, Inc.</i>	<i>CDC directly funded community-based organization, Washington, DC</i>
FL001	<i>Broward House</i>	<i>CDC directly funded community-based organization, Fort Lauderdale, FL</i>
FL002	<i>River Region Human Services</i>	<i>CDC directly funded community-based organization, Jacksonville, FL</i>
FL003	<i>Jacksonville Area Sexual Minority Youth Network</i>	<i>CDC directly funded community-based organization, Jacksonville, FL</i>



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<i>Num</i>	<i>Variable Name</i>	
FL004	EmpowerU	CDC directly funded community-based organization, Miami, FL
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 Health 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



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<i>Num</i>	<i>Variable Name</i>	
LA002	<i>Brotherhood, Inc.</i>	<i>CDC directly funded community-based organization, New Orleans, LA</i>
LA003	<i>Institute of Women and Ethnic Studies</i>	<i>CDC directly funded community-based organization, New Orleans, LA</i>
LA004	<i>NO/AIDS Task Force</i>	<i>CDC directly funded community-based organization, New Orleans, LA</i>
MA001	<i>Boston Medical Center</i>	<i>CDC directly funded community-based organization, Boston, MA</i>
MA002	<i>Fenway Community Health Center</i>	<i>CDC directly funded community-based organization, Boston, MA</i>
MA003	<i>Justice Resource Institute, Inc.</i>	<i>CDC directly funded community-based organization, Boston, MA</i>
MA004	<i>Massachusetts Alliance of Portuguese Speakers (MAPS)</i>	<i>CDC directly funded community-based organization, Cambridge, MA</i>
MA005	<i>Whittier Street Health Services</i>	<i>CDC directly funded community-based organization, Roxbury, MA</i>
MD001	<i>Women Accepting Responsibility</i>	<i>CDC directly funded community-based organization, Baltimore, MD</i>
MD002	<i>Identity, Inc.</i>	<i>CDC directly funded community-based organization, Gaithersburg, MD</i>
ME001	<i>Regional Medical Center at Lubec</i>	<i>CDC directly funded community-based organization, Lubec, ME</i>
MI001	<i>Teen Hype Youth Development Program</i>	<i>CDC directly funded community-based organization, Detroit, MI</i>
MI002	<i>Community Health Awareness Group</i>	<i>CDC directly funded community-based organization, Detroit, MI</i>
MN001	<i>Indigenous People Task Force</i>	<i>CDC directly funded community-based organization, Minneapolis, MN</i>
MN002	<i>Minnesota AIDS Project</i>	<i>CDC directly funded community-based organization, Minneapolis, MN</i>
MO001	<i>Kansas City Free Health Clinic</i>	<i>CDC directly funded community-based organization, Kansas City, MO</i>
MO002	<i>The Community Wellness Project</i>	<i>CDC directly funded community-based organization, St. Louis, MO</i>
MS001	<i>Building Bridges, Inc.</i>	<i>CDC directly funded community-based organization, Jackson, MS</i>
MS002	<i>My Brother's Keeper, Inc.</i>	<i>CDC directly funded community-based organization, Ridgeland, MS</i>
NC001	<i>Carolina Cares Partnership (formerly Regional HIV/AIDS Consortium)</i>	<i>CDC directly funded community-based organization, Charlotte, NC</i>
NC002	<i>Quality Home Care Services</i>	<i>CDC directly funded community-based organization, Charlotte, NC</i>
NJ001	<i>PROCEED</i>	<i>CDC directly funded community-based organization, Elizabeth, NJ</i>
NJ002	<i>Hyacinth, Inc. (dba Hyacinth AIDS Foundation)</i>	<i>CDC directly funded community-based organization, New Brunswick, NJ</i>
NJ003	<i>Newark Beth Israel Medical Center</i>	<i>CDC directly funded community-based organization, Newark, NJ</i>
NJ004	<i>Newark Community Health Centers</i>	<i>CDC directly funded community-based organization, Newark, NJ</i>
NJ005	<i>North Jersey AIDS Alliance (dba North Jersey Community Research Initiative)</i>	<i>CDC directly funded community-based organization, Newark, NJ</i>
NY001	<i>AIDS Council of Northeastern New York</i>	<i>CDC directly funded community-based organization, Albany, NY</i>
NY002	<i>Whitney M Young Jr. Health Services</i>	<i>CDC directly funded community-based organization, Albany, NY</i>
NY003	<i>Bronx AIDS Services, Inc.</i>	<i>CDC directly funded community-based organization, Bronx, NY</i>
NY004	<i>CitiWide Harm Reduction Program</i>	<i>CDC directly funded community-based organization, Bronx, NY</i>
NY005	<i>Montefiore Medical Center/Women's Center</i>	<i>CDC directly funded community-based organization, Bronx, NY</i>



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<i>Num</i>	<i>Variable Name</i>	
NY006	Brookdale University Hospital and Medical Center	CDC directly funded community-based organization, Brooklyn, NY
NY007	Brooklyn AIDS Task Force	CDC directly funded community-based organization, Brooklyn, NY
NY008	Lutheran Family Health Center Network of Luther Medical Center	CDC directly funded community-based organization, Brooklyn, NY
NY009	Wyckoff Heights Medical Center	CDC directly funded community-based organization, Brooklyn, NY
NY010	AIDS Community Services of Western New York	CDC directly funded community-based organization, Buffalo, NY
NY011	Long Island Association for AIDS Care	CDC directly funded community-based organization, Hauppauge, NY
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



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<i>Num</i>	<i>Variable Name</i>	
PA001	AIDS Care Group	CDC directly funded community-based organization, Chester, PA
PA002	Family Planning Council	CDC directly funded community-based organization, Philadelphia, PA
PA003	Mazzoni Center	CDC directly funded community-based organization, Philadelphia, PA
PA004	Philadelphia Fight	CDC directly funded community-based organization, Philadelphia, PA
PA005	Public Health Management Corp (dba Philadelphia Health Management)	CDC directly funded community-based organization, Philadelphia, PA
PA006	The Philadelphia AIDS Consortium	CDC directly funded community-based organization, Philadelphia, PA
PR001	Corporacion de Salud Y Medicina Avanzada (COSSMA)	CDC directly funded community-based organization, Cidra, PR
PR002	Estancia Corazon (Program Fondita)	CDC directly funded community-based organization, 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



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Num	Variable Name	
VA001	ACCESS AIDS Care	CDC directly funded community-based organization, Norfolk, VA
VI001	Virgin Islands Community AIDS Resource & Education (VICARE)	CDC directly funded community-based organization, Christiansted, VI
VI002	Helping Others in a Positive Environment, Inc. (HOPE)	CDC directly funded community-based organization, St. Thomas, VI
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: siteld
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 32
<i>Definition:</i>	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).	
<i>Instructions:</i>	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).	
<i>Business rule</i>	HIV Testing: Mandatory Partner Services: Mandatory HD Risk Reduction Activities: Mandatory CBO Risk Reduction Activities: Mandatory HD Aggregate: Not applicable CBO Aggregate: Not applicable	



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name: siteTypeValueCode		
S04	Site Type	Value Option: Choose only one	Format Type: Alpha-Numeric	Min Length: 3 Max Length: 6
<i>Definition:</i>	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.			
<i>Instructions:</i>	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.			
<i>Business rule</i>	HIV Testing: Required Partner Services: Required HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable CBO 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

<i>Num</i>	<i>Variable Name</i>	
F06.07	<i>Non-clinical - Community setting - Bar/club/adult entertainment</i>	<i>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.</i>
F06.08	<i>Non-clinical - Community setting - Public area</i>	<i>An area, environment or context that is open to the community as a whole such as a park or city street.</i>
F06.12	<i>Non-clinical - Community setting - Individual residence</i>	<i>An individual's home or place of residence.</i>
F06.88	<i>Non-clinical - Community setting - Other</i>	<i>A defined area, environment or context (other than those already specified) in which a group of people live, work or congregate.</i>
F07	<i>Non-clinical - Correctional facility - Non-healthcare</i>	<i>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</i>
F08	<i>Clinical - Primary care clinic (other than CHC)</i>	<i>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.</i>
F09	<i>Clinical - Pharmacy or other retail-based clinic</i>	<i>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.</i>
F10	<i>Clinical - STD clinic</i>	<i>A health care facility in which sexual health is specialized in the prevention and treatment of sexually transmitted infections.</i>
F11	<i>Clinical - Dental clinic</i>	<i>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.</i>
F12	<i>Clinical - Correctional facility clinic</i>	<i>An area within a penal or correctional facility, including adult or juvenile detention facilities, that provides medical or health services.</i>
F13	<i>Clinical - Other</i>	<i>A health care facility where medical services are provided, other than those specified.</i>
F14	<i>Non-clinical - Health department - field visit</i>	<i>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.</i>
F15	<i>Non-clinical - Community Setting - Syringe exchange program</i>	<i>A facility or center where clients may exchange used hypodermic needles for sterile needles.</i>
F88	<i>Non-clinical - Other</i>	<i>A site where prevention services are conducted other than those specified above.</i>

NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
S08	Site - County	XSD (Schema) Name: siteCounty
Value Option: Choose only one	Format Type: Alpha-Numeric	Min Length: 3 Max Length: 3
<i>Definition:</i>	The county, parish, or municipality where the agency's site of service delivery is physically located.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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 CBO 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 abbreviation.

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
CBO 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



Version Date: 01-Nov-15

NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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



NHME Variables and Values

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
 CBO 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	
<i>Definition:</i>	This field is reserved for use within the MSM Testing Initiative Project. The specifications are to be determined (TBD).			
<i>Instructions:</i>	TBD			
<i>Business rule</i>	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	
<i>Definition:</i>	TBD			
<i>Instructions:</i>	TBD			
<i>Business rule</i>	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	
<i>Definition:</i>	TBD			
<i>Instructions:</i>	TBD			
<i>Business rule</i>	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			



NHME Variables and Values

Num	Variable Name			
CDC08	CDC Variable 8	XSD (Schema) Name: otherCdcVariable8		
Value Option: TBD	Format Type: TBD	Min Length: TBD	Max Length: TBD	
<i>Definition:</i>	TBD			
<i>Instructions:</i>	TBD			
<i>Business rule</i>	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	
<i>Definition:</i>	This field will be dedicated for Partner Services use. Use is TBD.			
<i>Instructions:</i>	Dedicated for Partner Services			
<i>Business rule</i>				
CDC10	CDC Variable 10	XSD (Schema) Name: CDCVariable10		
Value Option: TBD	Format Type: Alpha-Numeric	Min Length: 1	Max Length: 100	
<i>Definition:</i>	This field will be dedicated for Partner Services use. Use is TBD.			
<i>Instructions:</i>	Dedicated for Partner Services			
<i>Business rule</i>				



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
 CBO 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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
G112	Date of Birth - Year	XSD (Schema) Name: birthYear
Value Option: N/A	Format Type: Number	Min Length: 4 Max Length: 4
<i>Definition:</i>	The calendar year in which the client was born.	
<i>Instructions:</i>	Enter the year in which the client was born. If birth year is unknown, enter 1800.	
<i>Business rule</i>	HIV Testing: Required Partner Services: Required HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Required HD Aggregate: Not applicable CBO 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
<i>Definition:</i>	The client's self-report of whether they are of Hispanic or Latino origin. Standard OMB ethnicity codes are applied.	
<i>Instructions:</i>	Indicate whether the client's self-reported ethnicity of Hispanic/Latino or not Hispanic/Latino.	
<i>Business rule</i>	HIV Testing: Required Partner Services: Required HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Required HD Aggregate: Not applicable CBO 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
 CBO 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

<i>Num</i>	<i>Variable Name</i>	
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



NHME Variables and Values

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.
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
 CBO 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.



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name: currentGenderValueCode		
G124	Current Gender Identity	Format Type: Number	Min Length: 1	Max Length: 2
<i>Definition:</i>	The client's current self-reported gender identity. This may include one's social status, self-identification, legal status, and biology.			
<i>Instructions:</i>	Select the value that most closely describes the client's current, self-reported gender identity.			
<i>Business rule</i>	HIV Testing: Required Partner Services: Required HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Required HD Aggregate: Not applicable CBO 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.

NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
G124a	Specify Current Gender Identity	otherCurrentGender
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 50
<i>Definition:</i>	The additional specification of Current Gender Identity if G124 = 89 "Additional (specify)".	
<i>Instructions:</i>	Specify the current gender identity if G124 = 89 "Additional (specify)".	
<i>Business rule</i>	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 CBO 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
<i>Definition:</i>	The county, parish, or municipality of the client's locating address.	
<i>Instructions:</i>	Enter the three-digit FIPS code of the county where the client's address is located.	
<i>Business rule</i>	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 CBO Aggregate: Not applicable	



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
G134	Client - Zip Code	clientZipCode
Value Option: N/A		
Format Type: Alpha-Numeric		
Min Length: 5		
Max Length: 10		
<i>Definition:</i>	The postal zip code for the client's locating address.	
<i>Instructions:</i>	Enter the postal zip code of the client's locating address.	
<i>Business rule</i>	These data are collected from clients but not reported to CDC. 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 CBO Aggregate: Not applicable	
Code	Value Description	Value Definition
	##### ####	Only the 5 digit zip code is mandatory.

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	XSD (Schema) Name:
G200	Date Client Risk Collected	dateCollectedForRiskProfile
Value Option: N/A		
Format Type: MM/DD/YYYY		
Min Length: 8		
Max Length: 10		
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
	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.	



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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: Required
 HD Aggregate: Not applicable
 CBO 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: The client's self-report of having had at least one prior HIV test.

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

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

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



NHME Variables and Values

Num **Variable Name**

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

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

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

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

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



NHME Variables and Values

Num **Variable Name**

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

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

Definition: The self-reported pregnancy status of 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
 CBO 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.



NHME Variables and Values

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

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
 CBO 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

<i>Num</i>	<i>Variable Name</i>	
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: Required, see detailed business rule
 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
 CBO 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.



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
G212	Additional Client Risk Factors	additionalClientRiskFactors
Value Option: Choose all that apply		
Format Type: Number		
Min Length: 1		
Max Length: 2		
<i>Definition:</i>	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.	
<i>Instructions:</i>	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 additional risks can be reported.	
<i>Business rule</i>	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 CBO 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.



NHME Variables and Values

Num	Variable Name	
2	While intoxicated and/or high on drugs	The client used alcohol and/or illicit drugs before and/or during sex.
5	With person of unknown HIV status	The client has had sex with a person whose HIV status is unknown to either the client or to the partner.
6	With person who exchanges sex for drugs/money	The client has had a sex with a person who he or she knows exchanges sex for drugs/money.
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: Required, see detailed business rule
 HD Aggregate: Not applicable
 CBO 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

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i> withFemale
G216b	Vaginal or Anal Sex with a Female	

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: Required, see detailed business rule
 HD Aggregate: Not applicable
 CBO 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

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i> withTransgender
G216c	Vaginal or Anal Sex with a Transgender Person	

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
 CBO 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.



NHME Variables and Values

Num **Variable Name**

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

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

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

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

Business 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
 CBO 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
 CBO 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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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
<i>Definition:</i>	The client self-reported having unprotected vaginal or anal sex with a transgender person in the past 12 months.	
<i>Instructions:</i>	Indicate if the client reported unprotected (without a condom) vaginal or anal sex in the past 12 months with a transgender person.	
<i>Business rule</i>	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 CBO Aggregate: Not applicable Detailed business rule: Required if a client behavioral risk profile was collected (noClientRiskFactors=1) and sex with transgender person was reported (withTrangender=1). Not expected if sex with transgender person was not reported (withTrangender = 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.



NHME Variables and Values

Num **Variable Name**

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

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

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

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

Business 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
 CBO 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
 CBO 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

<i>Num</i>	<i>Variable Name</i>	
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
<i>Definition:</i>	The client self-reported having vaginal or anal sex with an identified transgender IDU partner in the past 12 months.	
<i>Instructions:</i>	Indicate if the client reported vaginal or anal sex with an identified transgender IDU partner in the past 12 months.	
<i>Business rule</i>	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 CBO 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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i> withMaleHIVPositive
G219a	Vaginal or Anal Sex with HIV-Positive Male	

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
 CBO 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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i> withFemaleHIVPositive
G219b	Vaginal or Anal Sex with HIV-Positive Female	

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
 CBO 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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>			
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
<i>Definition:</i>	The client self-reported having vaginal or anal sex with an HIV-positive transgender partner in the past 12 months.			
<i>Instructions:</i>	Indicate if the client reported having vaginal or anal sex with a known or identified HIV-positive transgender partner in the past 12 months.			
<i>Business rule</i>	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 CBO 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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i> vaginalOrAnalSexWithMSM
G220	Vaginal or Anal Sex with MSM (female only)	

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
 CBO 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
 CBO 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

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i> vaginalOrAnalSexWithIDUPS
G223	Vaginal or Anal Sex with an IDU (PS only)	

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
 CBO 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

Num *Variable Name*

Table: H **Client Intervention Characteristics**

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

Num *Variable Name*

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

Value Option: N/A **Format Type: Alpha-Numeric** **Min Length: 1** **Max Length: 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: Not applicable
 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: Not applicable
 HD Aggregate: Not applicable
 CBO Aggregate: Not applicable



NHME Variables and Values

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

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: Not applicable
 HD Aggregate: Not applicable
 CBO Aggregate: Not applicable

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.



NHME Variables and Values

Num	Variable Name	
1.09	SISTA	<i>A social skills training intervention aimed at reducing HIV sexual risk behavior among African-American women at highest risk.</i>
1.10	Street Smart	<i>An intensive HIV/AIDS and STD prevention program for youth whose behaviors place them at very high risk of becoming infected.</i>
1.11	Together Learning Choices	<i>An intervention for young people, (ages 13-29) living with HIV. It is delivered in small groups using cognitive-behavioral strategies to change behavior.</i>
1.12	VOICES/VOCES	<i>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.</i>
1.13	WILLOW	<i>A four-session intervention for HIV positive, heterosexual women.</i>
1.14	SiHLE	<i>A four-session intervention designed to lower teen's risk for STDs and teen pregnancy.</i>
1.15	CLEAR	<i>A three module intervention that is delivered in one-on-one sessions to young people living with HIV.</i>
1.16	OPTIONS	<i>A clinician-initiated HIV risk reduction intervention for HIV positive persons in clinical care using motivational interviewing techniques.</i>
1.17	Focus on Youth with imPact	<i>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.</i>
1.18	MIP	<i>A holistic behavioral intervention for reducing high-risk behaviors for infection and transmission of HIV among intravenous drug users (IDUs).</i>
1.19	D-UP	<i>An adaptation of Popular Opinion Leader (POL) intervention for African-American MSM.</i>
1.20	Sister to Sister	<i>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.</i>
1.21	Project START	<i>A multi-session individual level intervention that aims to reduce HIV/STI and hepatitis risk for people returning to the community after incarceration.</i>
1.22	Connect	<i>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.</i>
1.23	SHIELD	<i>Self-Health in Eliminating Life-Threatening Disease - A small-group, interactive intervention that relies on peer networks to reduce drug and sex risk behaviors.</i>
1.24	Nia	<i>A video-based motivational skills-building small-group intervention targeting inner-city heterosexually active, African American men.</i>

NHME Variables and Values

Num	Variable Name	
1.25	<i>Cuidate!</i>	<i>¡Cuidate! (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.</i>
1.26	<i>Partnership for Health</i>	<i>A brief counseling program for individual men and women living with HIV/AIDS delivered by medical providers in HIV outpatient clinics.</i>
1.27	<i>Personalized Cognitive Counseling (PCC)</i>	<i>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.</i>
1.28	<i>Project AIM</i>	<i>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.</i>
1.29	<i>Safe in the City</i>	<i>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.</i>
1.30	<i>RESPECT</i>	<i>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.</i>
1.31	<i>ARTAS</i>	<i>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.</i>
1.32	<i>HEART</i>	<i>An individual/dyadic, social support and problem-solving intervention delivered before and in the first two months after initiating ART, includes a patient-identified support partner.</i>
1.33	<i>Peer Support</i>	<i>An individual-and-group-level intervention, where HIV-positive people, currently adherent to ART, serve as peers and provide medication-related social support.</i>
1.34	<i>Partnership for Health (Medication Adherence)</i>	<i>An individual-level, clinic-based, brief provider-administered intervention emphasizes that emphasizes the importance of the patient-provider relationship to promote adherence.</i>
1.35	<i>SMART Couples</i>	<i>A discordant couple-level intervention, that addresses ART adherence and safer sex practices within the dyad, by fostering active support between partners.</i>

NHME Variables and Values

Num	Variable Name	
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.
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: Not applicable
 HD Aggregate: Not applicable
 CBO Aggregate: Not applicable

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	XSD (Schema) Name:
H02	Number of Planned Sessions	numberPlannedSessions
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 4
<i>Definition:</i>	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).	
<i>Instructions:</i>	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").	
<i>Business rule</i>	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	formId
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 32
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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.	



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
H05	Number of Completed Sessions	numberCompletedSessions
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 4
<i>Definition:</i>	The number of sessions that were completed by the client for a particular intervention.	
<i>Instructions:</i>	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").	
<i>Business rule</i>	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	sessionDate
Value Option: N/A	Format Type: MM/DD/YYYY	Min Length: 8 Max Length: 10
<i>Definition:</i>	The calendar date (month, day, and year) on which the session was delivered to the client.	
<i>Instructions:</i>	Enter the month, day, and year during which this session was delivered.	
<i>Business rule</i>	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).	



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
H07	Date of enrollment	enrollmentDate
Value Option: N/A	Format Type: MM/DD/YYYY	Min Length: 8 Max Length: 10
<i>Definition:</i>	The calendar month, day, and year on which the client enrolls in the intervention.	
<i>Instructions:</i>	Enter the calendar month, day, and year intervention services were initiated.	
<i>Business rule</i>	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable CBO Aggregate: Not applicable	
H08	Program ID	program@id
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 32
<i>Definition:</i>	A unique alpha-numeric identification number used to identify a program.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable CBO Aggregate: Not applicable	
H08a	Program Name	program@name
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 100
<i>Definition:</i>	The unique name of the program as defined by the agency.	
<i>Instructions:</i>	Indicate the unique name of the program.	
<i>Business rule</i>	HIV Testing: Not applicable Partner Services: Not applicable HD Risk Reduction Activities: Required CBO Risk Reduction Activities: Not applicable HD Aggregate: Not applicable CBO Aggregate: Not applicable	



NHME Variables and Values

Num *Variable Name*

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

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i>
PCR104	Case Close Date	caseCloseDate
Value Option: N/A		
	Format Type: MM/DD/YYYY	Min Length: 8 Max Length: 10
<i>Definition:</i>	The calendar date on which the PS case was closed at the agency.	
<i>Instructions:</i>	Enter the date on which the PS case was closed at the agency.	
<i>Business rule</i>	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
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
PCR109	Reported to Surveillance	reportedToSurveillance
Value Option: Choose only one Format Type: Number Min Length: 1 Max Length: 2		
<i>Definition:</i> An indication of whether or not the index client's HIV case was reported to surveillance.		
<i>Instructions:</i> Indicate whether or not the index client's HIV case was reported to surveillance.		
<i>Business rule</i> 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	XSD (Schema) Name:
PCR200	Date Collected	partnerDateCollected
Value Option: N/A Format Type: MM/DD/YYYY Min Length: 8 Max Length: 10		
<i>Definition:</i> The date on which information about the partner is initially collected. Information includes partner type, demographic and risk behaviors of the partner.		
<i>Instructions:</i> Indicate the initial date (mm/dd/yyyy) that information was provided about the partner.		
<i>Business rule</i> 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	XSD (Schema) Name:
PCR202a	Local PS ID	localPartnerServiceId
Value Option: N/A		
Format Type: Alpha-Numeric		
Min Length: 1		
Max Length: 32		
<i>Definition:</i>	An alpha-numeric identification that is unique to each partner. Each local PS ID is associated with a specific PS case number (PCR101).	
<i>Instructions:</i>	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.	
<i>Business rule</i>	HIV Testing: Not applicable Partner Services: Mandatory (Not applicable to PS V2.1 schema) 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.		

Num	Variable Name	XSD (Schema) Name:
PCR207	Partner Type	partnerType
Value Option: Choose only one		
Format Type: Number		
Min Length: 1		
Max Length: 2		
<i>Definition:</i>	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.	
<i>Instructions:</i>	For each partner identified, indicate whether the partner and client are sex partners, needle-sharing partners or both sex and needle-sharing partners.	
<i>Business rule</i>	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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
PCR209	Notification Plan	XSD (Schema) Name: notificationPlan

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

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

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

Business rule HIV Testing: Not applicable
 Partner Services: Required (Not applicable to PS V2.1 schema)
 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	Client notification	The HIV-infected client informs his or her partners of their possible exposure to HIV and refers them to HIV counseling, testing, and other support services.
2	Provider notification	The PS provider, with the consent of the HIV-infected client, takes the responsibility for informing the partner of his or her possible exposure to HIV and referring them to HIV counseling, testing, and other support services.
3	Dual notification	The HIV-infected client informs his or her partners of their possible exposure to HIV and refers them to HIV counseling, testing, and other support services in the presence of the PS provider.
4	Contract	The PS provider and HIV-infected client negotiate a time frame for the client to inform his or her partners of their possible exposure to HIV. If the client is unable to inform a partner within an agreed-upon time, the provider has the permission to notify and refer partners to HIV counseling, testing, and other support services.
5	Third-party notification	A notification strategy whereby the partner would be notified by a professional other than the health department provider (e.g., a private physician).



NHME Variables and Values

Num Variable Name

Table: 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.



NHME Variables and Values

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

<i>Num</i>	<i>Variable Name</i>	
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).



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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.



NHME Variables and Values

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.



NHME Variables and Values

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.

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

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 jurisdiction'S surveillance system or records has not or cannot be checked



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 '8 - PS11-1113 Category A - YMSM' or '9 - PS11-1113 Category B - YTG' 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
 HD Aggregate: Mandatory
 CBO Aggregate: Not applicable

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.
12	PS 14-1410	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	PS 15-1502 – Category A	PS15-1502: HIV prevention services for members of racial/ethnic minority communities.
14	PS 15-1502 – Category B	PS15-1502: HIV prevention services for members of groups at greatest risk for acquiring and transmitting HIV infection, regardless of race/ethnicity.
15	PS 15-1506 PrIDE	PS15-1506: Health Department Demonstration Projects to Reduce HIV Infections and Improve Engagement in HIV Medical Care among Men Who Have Sex with Men (MSM) and Transgender Persons (PrIDE) Demonstration Project. This program announcement is applicable only to 12 funded jurisdictions: Baltimore, California, Chicago, Colorado, Houston, Los Angeles, Louisiana, Michigan, New York City, San Francisco, Tennessee, and Virginia.



NHME Variables and Values

Num	Variable Name	
16	PS 15-1509	PS15-1509: Health Department Demonstration Projects for Comprehensive Prevention and Care for Men Who Have Sex with Men (MSM) of Color at Risk for and Living with HIV Infection. This program announcement is applicable only to seven funded jurisdictions: Alabama, Baltimore, District of Columbia, Louisiana, New York City, Philadelphia, and Virginia.
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.
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: <code>spfyProgAnnouncementProgStrategy</code>

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: Not applicable

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

Num Variable Name

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.



NHME Variables and Values

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.

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

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

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

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

Business rule HIV Testing: Not applicable
 Partner Services: Required, see detailed business rule (Not applicable to PS V2.1 schema)
 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 reason for unsuccessful attempt to locate was 'other' (reasonForUnsuccessfulAttempt = 89).
 Not expected otherwise (reasonForUnsuccessfulAttempt= 1 or 2).



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
X306	Enrollment Status	enrollmentStatus
Value Option: Choose only one Format Type: Number Min Length: 2 Max Length: 2		
<i>Definition:</i> The decision made by the index client or the index client's partner to enroll in PS.		
<i>Instructions:</i> If X302: Attempt to Locate Outcome = "Located", indicate if the index client or index client's partner accepted or declined enrollment into PS.		
<i>Business rule</i> 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
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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	XSD (Schema) Name:
X502	Time Period for Recall (in months)	timePeriodForRecallInMonths
Value Option: N/A Format Type: Number Min Length: 1 Max Length: 2		
<i>Definition:</i> 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.		
<i>Instructions:</i> 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.		
<i>Business rule</i> 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		



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
X503	Total Number of Partners Claimed	totalNumberOfPartnersClaimed
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 5
<i>Definition:</i>	The total number of sex or needle-sharing partners reported by the client over a specified recall period. This would include anonymous partners and partners for which there is not sufficient information to locate and notify.	
<i>Instructions:</i>	Enter the total number of partners identified by the index client. This includes all anonymous, male, female, and transgender partners.	
<i>Business rule</i>	HIV Testing: Not applicable Partner Services: Required, see detailed business rule (Not applicable to PS V2.1 schema) 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 Partners Claimed" must be greater than or equal to the number of named partners (totalNumberOfNamedPartners).	
X511	Total Number of Named Partners	totalNumberOfNamedPartners
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 3
<i>Definition:</i>	The total number of sex or needle-sharing partners for which there is sufficient identifying and locating information.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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).	



NHME Variables and Values

Num	Variable Name			
X511a	Total Number of Named Male Partners	XSD (Schema) Name: totalNumberOfNamedMalePartners		
Value Option: N/A	Format Type: Number	Min Length: 1	Max Length: 3	
<i>Definition:</i>	The total number of sex or needle-sharing male partners for which there is sufficient identifying and locating information.			
<i>Instructions:</i>	Indicate the total number of sex or needle-sharing male partners for which there is sufficient identifying and locating information.			
<i>Business rule</i>	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).			
X511b	Total Number of Named Female Partners	XSD (Schema) Name: totalNumberOfNamedFemalePartners		
Value Option: N/A	Format Type: Number	Min Length: 1	Max Length: 3	
<i>Definition:</i>	The total number of sex or needle-sharing female partners for which there is sufficient identifying and locating information.			
<i>Instructions:</i>	Indicate the total number of sex or needle-sharing female partners for which there is sufficient identifying and locating information.			
<i>Business rule</i>	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).			



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>			
X511c	Total Number of Named Transgender Partners	XSD (Schema) Name:	totalNumberOfTransgenderPartners	
Value Option:	N/A	Format Type:	Number	Min Length: 1 Max Length: 3
<i>Definition:</i>	The total number of sex or needle-sharing transgender partners for which there is sufficient identifying and locating information.			
<i>Instructions:</i>	Indicate the total number of sex or needle-sharing transgender partners for which there is sufficient identifying and locating information.			
<i>Business rule</i>	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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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

<i>Num</i>	<i>Variable Name</i>	
X602	Previous HIV Test	XSD (Schema) Name: previousHIVTest

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

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

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

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 partner reports that he or she has never had an HIV test.
1	Yes	The index client's partner reports that they had a previous HIV test.
66	Not asked	The provider did not ask the index client's partner about having a prior HIV test.
77	Declined to answer	The index client's partner declines or is unwilling to report if he or she had a previous HIV test.
99	Don't know	The index client's partner reports that he or she is unaware if he or she had a previous HIV test.



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
X603	Self-Reported HIV Test Result	selfReportedHIVTestResult
Value Option:	Choose only one	Format Type: Number
		Min Length: 1
		Max Length: 2
<i>Definition:</i>	The client's self-reported test result from his/her most recent HIV test prior to notification.	
<i>Instructions:</i>	If the partner reports having had a previous HIV test (i.e. X602: Previous HIV Test = "Yes"), then indicate the partner's self-reported HIV test result at the time of notification. When asking about the "Self-Reported Test Result" it is very important that the provider ask about the test result from the most recent HIV test because this is the result that will reflect the partner's current HIV serostatus. Ensure that the partner understands that he/she is being asked to report his/her test results and not what he/she believes their status is.	
<i>Business rule</i>	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	The index client's partner reports that his or her HIV status is positive based on a confirmatory test result.
2	Negative	The index client's partner reports that their HIV status is negative.
3	Preliminary positive	The index client's partner reports that he or she received a "Preliminary positive" test result (i.e., the index client's partner had a reactive HIV rapid test but did not receive the results of the associated conventional confirmatory test).
4	Indeterminate	The client reports that he or she received an "Indeterminate" test result (i.e., the client received results but those results did not conclusively indicate whether he or she is HIV-positive or HIV-negative).
66	Not asked	The provider did not ask the client about his or her HIV status.
77	Declined to answer	The index client's partner declines or is unwilling to report his or her HIV status.
99	Don't know	The index client's partner reports that he or she is unaware of his or her HIV status.



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
X604	Date of Last HIV Test	dateOfLastHIVTest
Value Option: N/A	Format Type: MM/DD/YYYY	Min Length: 8 Max Length: 10
<i>Definition:</i>	The date of the partner's last HIV test.	
<i>Instructions:</i>	If the partner reports having a previous HIV test (X602: Previous HIV test = "Yes"), indicate the date of the partner's last HIV test.	
<i>Business rule</i>	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	XSD (Schema) Name:
X702	Referral Date	referralDate
Value Option: N/A	Format Type: MM/DD/YYYY	Min Length: 8 Max Length: 10
<i>Definition:</i>	The date that the referral was made for the client.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i>
X702a	Reason Client Not Referred to HIV Medical Care	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	<i>Client already in care</i>	<i>Client was not referred to HIV medical care because he or she is already receiving care.</i>
2	<i>Client declined care</i>	<i>Client was offered a referral to HIV medical care but client declined.</i>



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>			
X703_01	Referred To HIV Testing	XSD (Schema) Name: referredToHIVTesting		
Value Option: Choose only one	Format Type: Number	Min Length: 1	Max Length: 2	
<i>Definition:</i>	The client was referred to HIV testing. HIV testing is a diagnostic, laboratory procedure to assess for the presence of HIV antibodies.			
<i>Instructions:</i>	Indicate if the client was referred to HIV testing.			
<i>Business rule</i>	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			

<i>Code</i>	<i>Value Description</i>	<i>Value Definition</i>
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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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.



NHME Variables and Values

Num Variable Name

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

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

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

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.



NHME Variables and Values

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

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

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

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.



NHME Variables and Values

Num **Variable Name**

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

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

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

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

<i>Num</i>	<i>Variable Name</i>	
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.



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name: HIVTestResult
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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

<i>Num</i>	<i>Variable Name</i>	
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	<i>The result of this HIV test was not provided to the partner.</i>
1	Yes	<i>The result of this HIV test was provided to the partner.</i>



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.



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i>
X725a	Was the PS Interview within 30 Days of Receiving a Positive HIV Test Result	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 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 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	XSD (Schema) Name: housingStatusRevised
X730a	Housing status in past 12 months - revised	

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 nor typically 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 at 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	XSD (Schema) Name:
ME101	Number of HIV-diagnosed clients linked to HIV medical care	hivPosLinkedToCare/total
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of HIV-diagnosed clients who were linked to HIV medical care during the reporting period.	
<i>Business rule</i>	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	
ME101a	Number of HIV-diagnosed MSM/IDU linked to HIV medical care	hivPosLinkedToCare/MSMIDU
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed MSM/IDU who were linked to HIV medical care during the reporting period.	
<i>Business rule</i>	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	
ME101b	Number of HIV-diagnosed MSM linked to HIV medical care	hivPosLinkedToCare/MSM
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed MSM who were linked to HIV medical care during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME101c	Number of HIV-diagnosed IDU linked to HIV medical care	hivPosLinkedToCare/IDU
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed IDU who were linked to HIV medical care during the reporting period.	
<i>Business rule</i>	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	hivPosLinkedToCare/heterosexual
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed heterosexuals who were linked to HIV medical care during the reporting period.	
<i>Business rule</i>	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	hivPosLinkedToCare/otherRisk
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed clients with other/unknown behavioral risk factors who were linked to HIV medical care during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME101f	Number of HIV-diagnosed African Americans linked to HIV medical care	hivPosLinkedToCare/AfricanAmerican
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed non-Hispanic blacks or African Americans who were linked to HIV medical care during the reporting period.	
<i>Business rule</i>	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	
ME101g	Number of HIV-diagnosed Hispanics linked to HIV medical care	hivPosLinkedToCare/Hispanic
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed Hispanics/Latinos of any race who were linked to HIV medical care during the reporting period.	
<i>Business rule</i>	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	
ME101h	Number of HIV-diagnosed clients of other race/ethnicity linked to HIV medical care	hivPosLinkedToCare/otherRace
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:	Min Length:	Max Length:
ME102	Number of HIV-diagnosed clients linked to treatment adherence services	hivClientsAdhereToART/total	1	8
Value Option: N/A				
Format Type: Number				
<i>Definition:</i> 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.				
<i>Instructions:</i> Enter the total number of HIV-diagnosed clients who were linked to ART adherence services during the reporting period.				
<i>Business rule</i> 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				
ME102a	Number of HIV-diagnosed MSM/IDU linked to treatment adherence services	hivClientsAdhereToART/MSMIUD	1	8
Value Option: N/A				
Format Type: Number				
<i>Definition:</i> 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.				
<i>Instructions:</i> Enter the number of HIV-diagnosed MSM/IDU who were linked to ART adherence services during the reporting period.				
<i>Business rule</i> 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	XSD (Schema) Name:
ME102b	Number of HIV-diagnosed MSM linked to treatment adherence services	hivClientsAdhereToART/MSM
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed MSM who were linked to ART adherence services during the reporting period.	
<i>Business rule</i>	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	hivClientsAdhereToART/IDU
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed IDU who were linked to ART adherence services during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME102d	Number of HIV-diagnosed heterosexuals linked to treatment adherence services	hivClientsAdhereToART/heterosexual
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed heterosexuals who were linked to ART adherence services during the reporting period.	
<i>Business rule</i>	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	
ME102e	Number of HIV-diagnosed clients with other/unknown behavioral risk factors linked to treatment adherence services	hivClientsAdhereToART/otherRisk
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed clients with other/unknown behavioral risks who were linked to ART adherence services during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME102f	Number of HIV-diagnosed African Americans linked to treatment adherence services	hivClientsAdhereToART/AfricanAmerican
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed non-Hispanic blacks or African Americans who were linked to ART adherence services during the reporting period.	
<i>Business rule</i>	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	
ME102g	Number of HIV-diagnosed Hispanics linked to treatment adherence services	hivAdhereToART/Hispanic
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of HIV-diagnosed Hispanics/Latinos of any race who were linked to ART adherence services during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME102h	Number of HIV-diagnosed clients of another race/ethnicity linked to treatment adherence services	hivClientsAdhereToART/otherRace
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
ME103	Number of out-of-care HIV-diagnosed clients re-engaged into HIV medical care and treatment services	hivClientsRetained/total
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME103a	Numbers of out-of-care HIV-diagnosed MSM/IDU re-engaged into HIV medical care and treatment services	hivClientsRetained/MSMIDU
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	hivClientsMSMRetained/MSM
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	The number of out-of-care HIV-diagnosed MSM 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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME103c	Numbers of out-of-care HIV-diagnosed IDU re-engaged into HIV medical care and treatment services	hivClientsRetained/IDU
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	hivClientsRetained/heterosexual
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) 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	hivClientsRetained/otherRisk
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
ME103f	Numbers of out-of-care HIV-diagnosed African Americans re-engaged into HIV medical care and treatment services	hivClientsRetained/AfricanAmerican
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME103g	Numbers of out-of-care HIV-diagnosed Hispanics re-engaged into HIV medical care and treatment services	hivClientsRetained/Hispanic
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	hivClientsRetained/otherRace
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME104	Number of condoms distributed	condomsDistributedtotal
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	The total number of condoms distributed.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	condomsDistributedHIVNeg
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME105b	Number of condoms distributed to HIV positive individuals	condomsDistributedHIVPos
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	The estimated number of condoms distributed to HIV-positive clients.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	communityEBIConducted
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of community evidence-based interventions (EBI) conducted in the reporting period.	
<i>Business rule</i>	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	peopleReachedCommunityEBI
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of high-risk HIV-negative individuals that accessed or were reached by community EBIs conducted during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME111	Number of social marketing/public information conducted	socialMarketingConducted
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the estimated total number of social marketing/public information events conducted in the reporting period.	
<i>Business rule</i>	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	
ME112	Number of people reached by social marketing/public information events	peoplecontactSMarketing
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of people exposed to all social marketing /public info events that were conducted during the reporting period.	
<i>Business rule</i>	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	
ME113	Number of media placements for marketing campaigns	mediaPlacements
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of media placements for all marketing campaigns that were conducted in the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:		
ME114	Number of clients referred to non-occupational PEP therapy	referredToPEP/total		
Value Option:	N/A	Format Type:	Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.			
<i>Instructions:</i>	Enter the total number of clients who were referred to non-occupational PEP therapy during the reporting period.			
<i>Business rule</i>	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	referredToPEP/MSMIDU		
Value Option:	N/A	Format Type:	Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	The number of MSM/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.			
<i>Instructions:</i>	Enter the number of MSM referred to non-occupational PEP therapy during the reporting period.			
<i>Business rule</i>	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	referredToPEP/MSM		
Value Option:	N/A	Format Type:	Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.			
<i>Instructions:</i>	Enter the number of MSM referred to non-occupational PEP therapy during the reporting period.			
<i>Business rule</i>	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	XSD (Schema) Name:	referredToPEP/IDU
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
<i>Definition:</i>	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.		
<i>Instructions:</i>	Enter the number of IDU referred to non-occupational PEP therapy during the reporting period.		
<i>Business rule</i>	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		
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
<i>Definition:</i>	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.		
<i>Instructions:</i>	Enter the number of high-risk heterosexuals referred to non-occupational PEP therapy during the reporting period.		
<i>Business rule</i>	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		
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
<i>Definition:</i>	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.		
<i>Instructions:</i>	Enter the number of clients with other/unknown risks referred to non-occupational PEP therapy during the reporting period.		
<i>Business rule</i>	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	XSD (Schema) Name:	referredToPEP/AfricanAmerican
ME114f	Number of African Americans referred to non-occupational PEP therapy		
Value Option:	N/A	Format Type:	Number
		Min Length:	1
		Max Length:	8
<i>Definition:</i>	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.		
<i>Instructions:</i>	Enter the number of African Americans referred to non-occupational PEP therapy during the reporting period.		
<i>Business rule</i>	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
<i>Definition:</i>	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.		
<i>Instructions:</i>	Enter the number of Hispanics referred to non-occupational PEP therapy during the reporting period.		
<i>Business rule</i>	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
<i>Definition:</i>	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.		
<i>Instructions:</i>	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.		
<i>Business rule</i>	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	XSD (Schema) Name:		
ME115	Number of clients initiated non-occupational PEP therapy	initiatedPEP/total		
Value Option:	N/A	Format Type:	Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.			
<i>Instructions:</i>	Enter the total number of clients who were referred to and initiated non-occupational PEP therapy during the reporting period.			
<i>Business rule</i>	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			
ME115a	Number of MSM/IDU who initiated non-occupational PEP therapy	initiatedPEP/MSMIDU		
Value Option:	N/A	Format Type:	Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.			
<i>Instructions:</i>	Enter the number of MSM/IDU who were referred and initiated non-occupational PEP therapy during the reporting period.			
<i>Business rule</i>	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			
ME115b	Number of MSM who initiated non-occupational PEP therapy	initiatedPEP/MSM		
Value Option:	N/A	Format Type:	Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.			
<i>Instructions:</i>	Enter the number of MSM who were referred and initiated non-occupational PEP therapy during the reporting period.			
<i>Business rule</i>	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	XSD (Schema) Name:
ME115c	Number of IDU who initiated non-occupational PEP therapy	initiatedPEP/IDU
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of IDU who were referred and initiated non-occupational PEP therapy during the reporting period.	
<i>Business rule</i>	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	
ME115d	Number of high-risk heterosexuals who initiated non-occupational PEP therapy	initiatedPEP/heterosexual
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of high-risk heterosexuals who were referred and initiated non-occupational PEP therapy during the reporting period.	
<i>Business rule</i>	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	
ME115e	Number of clients with other or unknown risks who initiated non-occupational PEP therapy	initiatedPEP/otherRisk
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of clients with unknown/other risks who were referred and initiated non-occupational PEP therapy during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME115f	Number of African American who initiated non-occupational PEP therapy	initiatedPEP/AfricanAmerican
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of African Americans who were referred to and initiated non-occupational PEP therapy during the reporting period.	
<i>Business rule</i>	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	initiatedPEP/Hispanic
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of Hispanics who were referred to and initiated non-occupational PEP therapy during the reporting period.	
<i>Business rule</i>	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	initiatedPEP/otherRace
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME116	Number of MSM referred to PrEP therapy	referredToPrEP/total
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of MSM referred to pre-exposure prophylaxis (PrEP) therapy during the reporting period.	
<i>Business rule</i>	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	referredToPrEP/AfricanAmerican therapy
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of African American MSM referred to Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.	
<i>Business rule</i>	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	referredToPrEP/Hispanic
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of Hispanic/Latino MSM referred to Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:		
ME116c	Number of MSM of another or unknown race/ethnicity referred to PrEP therapy	referredToPrEP/otherRace		
Value Option:	N/A	Format Type:	Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.			
<i>Instructions:</i>	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.			
<i>Business rule</i>	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	initiatedPrEP/total		
Value Option:	N/A	Format Type:	Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.			
<i>Instructions:</i>	Enter the total number of MSM who were referred to and initiated pre-exposure prophylaxis (PrEP) therapy during the reporting period.			
<i>Business rule</i>	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	XSD (Schema) Name:
ME117a	Number of African American MSM who initiated PrEP therapy	initiatedPrEP/AfricanAmerican
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of African American MSM who were referred and initiated Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.	
<i>Business rule</i>	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	
ME117b	Number of Hispanic/Latino MSM who initiated PrEP therapy	initiatedPrEP/Hispanic
Value Option:	N/A	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the number of Hispanic MSM who were referred and initiated Pre-Exposure Prophylaxis (PrEP) therapy during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME117c	Number of MSM of another or unknown race/ethnicity initiated PrEP therapy	initiatedPrEP/otherRace
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of Category A PS12-1201-funded aggregate HIV test events conducted during the reporting period.	
<i>Business rule</i>	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
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of Category A reimbursed aggregate HIV testing events conducted during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME202a	Category A PS12-1201-funded aggregate newly diagnosed HIV-positive test events	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of Category A PS12-1201-funded aggregate newly diagnosed HIV-positive testing events conducted during the reporting period.	
<i>Business rule</i>	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	
ME202b	Category A reimbursed aggregate newly diagnosed HIV-positive testing events	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of Category A reimbursed aggregate newly diagnosed HIV-positive testing events conducted during the reporting period.	
<i>Business rule</i>	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

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i>
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
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of Category B PS12-1201-funded aggregate HIV test events conducted during the reporting period.	
<i>Business rule</i>	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	
ME203b	Category B total reimbursed aggregate test events	XSD (Schema) Name:
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of Category B reimbursed aggregate HIV testing events conducted during the reporting period.	
<i>Business rule</i>	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	
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
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of Category B PS12-1201-funded aggregate newly diagnosed HIV-positive testing events conducted during the reporting period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME204b	Category B reimbursed aggregate newly diagnosed HIV-positive testing events	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the total number of Category B reimbursed aggregate newly diagnosed HIV-positive testing events conducted during the reporting period.	
<i>Business rule</i>	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	
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
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME207b	Number of syphilis tests conducted under service integration in non-healthcare settings	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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 period.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME208b	Number of gonorrhea tests conducted under service integration in non-healthcare settings	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME209b	Number of chlamydia tests conducted under service integration in non-healthcare settings	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	The number of tests for chlamydial infection 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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME210b	Number of tests for hepatitis B virus conducted under service integration in non-healthcare settings	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME211b	Number of tests for hepatitis C virus conducted under service integration in non-healthcare settings	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME212b	Number of tuberculosis tests conducted under service integration in non-healthcare settings	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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.	
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
<i>Definition:</i>	Targeted HIV-positive populations (e.g., MSM, IDU, transgender) for prevention interventions.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME214a-z	Total number of HIV-positive persons enrolled in behavioral risk screening	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
ME215a-z	Total number of HIV-positive persons enrolled in individual- and group-level evidence-based interventions	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	The total number of HIV-positive persons from the specified Target Population enrolled in individual- and group-level evidence-based interventions.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
ME216a-z	Total number of HIV-positive persons enrolled in community-level evidence-based interventions	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME217a-z	Total number of HIV-positive persons enrolled in other locally developed programs	
Value Option: TBD	Format Type: Number	Min Length: 1 Max Length: 8
<i>Definition:</i>	The total number of HIV-positive persons from the specified Target Population enrolled in other locally developed programs.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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
<i>Definition:</i>	Targeted high-risk HIV-negative populations for prevention interventions (e.g., MSM, IDU, high-risk heterosexuals, transgender).	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
ME220a-z	Total number of high-risk HIV-negative persons enrolled in individual- and group-level evidence-based interventions	
Value Option:	TBD	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	The total number of high-risk HIV-negative persons from the specified Target Population enrolled in individual- and group-level evidence based interventions.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
ME221a-z	Total number of high-risk HIV-negative persons enrolled in community-level evidence-based interventions	
Value Option:	TBD	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
ME222a-z	Total number of high-risk HIV-negative persons enrolled in other locally developed programs	
Value Option:	TBD	Format Type: Number Min Length: 1 Max Length: 8
<i>Definition:</i>	The total number of high-risk HIV-negative persons from the specified Target Population enrolled in other locally developed programs.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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 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	XSD (Schema) Name:
BT101b	Amount of PS12-1201 Category B funds allocated for HIV testing in healthcare settings	amountHIVtestRoutineCateB
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	<p>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.</p> <p>CDC provides the amount of awarded PS12-1201 Category B funds annually to each grantee.</p>	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
BT101c	Amount of PS12-1201 Category C funds allocated for HIV testing in healthcare settings	amountHIVtestRoutineCateC
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	<p>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.</p> <p>CDC provides the amount of awarded PS12-1201 Category C funds annually to each grantee.</p>	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:	Min Length:	Max Length:
BT102a	Amount of PS12-1201 Category A funds allocated for HIV testing in non-healthcare settings	amountHIVtestTargetedCateA	1	8
Value Option: N/A				
Format Type: Currency				
<i>Definition:</i> 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.				
<i>Instructions:</i> 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.				
<i>Business rule</i> 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	amountHIVtestTargetedCateB	1	8
Value Option: N/A				
Format Type: Currency				
<i>Definition:</i> 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.				
<i>Instructions:</i> 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.				
<i>Business rule</i> 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	XSD (Schema) Name:	Min Length:	Max Length:
BT102c	Amount of PS12-1201 Category C funds allocated for HIV testing in non-healthcare settings	amountHIVtestTargetedCateC	1	8
Value Option: N/A				
Format Type: Currency				
<i>Definition:</i> 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				
<i>Instructions:</i> 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.				
<i>Business rule</i> 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	questionHIVtestTargeted2	1	650
Value Option: N/A				
Format Type: Alpha-Numeric				
<i>Definition:</i> 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.				
<i>Instructions:</i> Please answer the question in 100 words or less.				
<i>Business rule</i> 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	amountCPPCateA	1	12
Value Option: N/A				
Format Type: Currency				
<i>Definition:</i> 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.				
<i>Instructions:</i> 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.				
<i>Business rule</i> 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	XSD (Schema) Name:	Min Length:	Max Length:
BT103b	Amount of PS12-1201 Category B funds allocated for comprehensive prevention with positives	amountCPPCateB	1	12
Value Option: N/A				
Format Type: Currency				
<i>Definition:</i> 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.				
<i>Instructions:</i> Indicate the amount of your PS 12-1201Category B award that your agency allocated for comprehensive prevention with positives activities. If no funds were allocated then enter 0.				
<i>Business rule</i> 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	amountCPPCateC	1	12
Value Option: N/A				
Format Type: Currency				
<i>Definition:</i> 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.				
<i>Instructions:</i> 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.				
<i>Business rule</i> 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	XSD (Schema) Name:
BT103i	Open-ended question 1 for comprehensive prevention with positives	questionCPP1
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 650
<i>Definition:</i>	Please identify the specific prevention activities included in the allocations to “other CPP” activities category.	
<i>Instructions:</i>	Please answer the question in 100 words or less.	
<i>Business rule</i>	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.	
BT103k	Amount of PS12-1201 Category A funding allocated for partner services	XSD (Schema) Name:
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category A, this value represents the allocation associated with Partner Services.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category A funding that your agency allocated for Partner Services. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	
BT103l	Amount of PS12-1201 Category B funding allocated for partner services	XSD (Schema) Name:
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category B, this value represents the allocation associated with Partner Services.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category B funding that your agency allocated for Partner Services. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	XSD (Schema) Name:
BT103m	Amount of PS12-1201 Category C funding allocated for partner services	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category C, this value represents the allocation associated with Partner Services.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category C funding that your agency allocated for Partner Services. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	
BT103n	Amount of PS12-1201 Category A funding allocated for HIV continuum of care which includes linkage, retention, and re-engagement in care, and HIV medication adherence support	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category A, this value represents the allocation associated with HIV continuum of care which includes linkage, retention, and re-engagement in care, and HIV medication adherence support.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category A funding that your agency allocated for HIV continuum of care which includes linkage, retention, and re-engagement in care, and HIV medication adherence support. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	XSD (Schema) Name:
BT103o	Amount of PS12-1201 Category B funding allocated for HIV continuum of care which includes linkage, retention, and re-engagement in care, and HIV medication adherence support.	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category B, this value represents the allocation associated with HIV continuum of care which includes linkage, retention, and re-engagement in care, and HIV medication adherence support.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category B funding that your agency allocated for HIV continuum of care which includes linkage, retention, and re-engagement in care, and HIV medication adherence support. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	
BT103p	Amount of PS12-1201 Category C funding allocated for HIV continuum of care which includes linkage, retention, and re-engagement in care, and HIV medication adherence support	XSD (Schema) Name:
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category C, this value represents the allocation associated with HIV continuum of care which includes linkage, retention, and re-engagement in care, and HIV medication adherence support.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category C funding that your agency allocated for HIV continuum of care which includes linkage, retention, and re-engagement in care, and HIV medication adherence support. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	XSD (Schema) Name:
BT103q	Amount of PS12-1201 Category A funding allocated for risk-reduction EBIs with HIV-positive persons	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category A, this value represents the allocation associated with risk-reduction EBIs with HIV-positive persons.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category A funding that your agency allocated for risk-reduction EBIs with HIV-positive persons. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	
BT103r	Amount of PS12-1201 Category B funding allocated for risk-reduction EBIs with HIV-positive persons	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category B, this value represents the allocation associated with risk-reduction EBIs with HIV-positive persons.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category B funding that your agency allocated for risk-reduction EBIs with HIV-positive persons. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	
BT103s	Amount of PS12-1201 Category C funding allocated for risk-reduction EBIs with HIV-positive persons	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category C, this value represents the allocation associated with risk-reduction EBIs for HIV-positive persons.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category C funding that your agency allocated for risk-reduction EBIs with HIV-positive persons. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	XSD (Schema) Name:
BT103t	Amount of PS12-1201 Category A funding allocated for other comprehensive prevention activities with HIV-positive persons	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category A, this value represents the allocation associated with other comprehensive prevention activities with HIV-positive persons.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category A funding that your agency allocated for other comprehensive prevention activities with HIV-positive persons. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	
BT103u	Amount of PS12-1201 Category B funding allocated for other comprehensive prevention activities with HIV-positive persons	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category B, this value represents the allocation associated with other comprehensive prevention activities with HIV-positive persons.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category B funding that our agency allocated for other comprehensive prevention activities with HIV-positive persons. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	
BT103v	Amount of PS12-1201 Category C funding allocated for other comprehensive prevention activities with HIV-positive persons	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS2-1201 Category C, this value represents the allocation associated with other comprehensive activities with HIV-positive persons.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category C funding that your agency allocated for other comprehensive activities with HIV-positive persons. If no funds were allocated, enter 0.	
<i>Business rule</i>	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	XSD (Schema) Name:
BT104a	Amount of PS12-1201 Category A funding allocated for condom distribution	amountCondomCateA
Value Option:	N/A	Format Type: Currency Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category A award (HIV Prevention Programs for Health Departments), this value represents the funding allocation associated with condom distribution.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category A funds your agency allocated for condom distribution. If no funds were allocated then enter 0.	
<i>Business rule</i>	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	questionCondom2
Value Option:	N/A	Format Type: Alpha-Numeric Min Length: 1 Max Length: 650
<i>Definition:</i>	Please provide any additional information to explain condom distribution-related funding allocation limitations or caveats that may be a concern to you, if applicable.	
<i>Instructions:</i>	Please answer the question in 100 words or less.	
<i>Business rule</i>	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	
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
<i>Definition:</i>	For PS12-1201 Category C, this value represents the allocation associated with condom distribution.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category C funding that your agency allocated for condom distribution. If no funds were allocated then enter 0.	
<i>Business rule</i>	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	XSD (Schema) Name:
BT104i	Amount of PS12-1201 Category B funding allocated for condom distribution	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category B, this value represents the allocation associated with condom distribution.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 funding that your agency allocated for condom distribution. If no funds were allocated, enter 0.	
<i>Business rule</i>	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
<i>Definition:</i>	For PS12-1201 Category A award (HIV Prevention Programs for Health Departments), this value represents the allocation associated with policy initiatives.	
<i>Instructions:</i>	Indicate the amount of PS12-1201 Category A funds your agency allocated for policy initiatives. If no funds were allocated then enter 0.	
<i>Business rule</i>	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
<i>Definition:</i>	For PS12-1201 Category B award (Expanded HIV Testing for Disproportionately Affected Populations), this value represents the allocation associated with the optional services integration component.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
BT106e	Open-ended question for PS12-1201 Category B funds allocated for service integration	question121201RCCateB
Value Option:	N/A	Format Type: Alpha-Numeric Min Length: 1 Max Length: 650
<i>Definition:</i>	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.	
<i>Instructions:</i>	Please answer the question in 100 words or less.	
<i>Business rule</i>	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
<i>Definition:</i>	For PS12-1201 Category A, this value represents the allocation associated with other non-required prevention activities, excluding support services.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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
<i>Definition:</i>	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.	
<i>Instructions:</i>	Please answer the question in 100 words or less.	
<i>Business rule</i>	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	



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
BT106i	Amount of PS12-1201 Category B funding allocated for other components	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category B, this value represents the allocation associated with other non-required prevention activities excluding service integration and support services.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category C, this value represents the allocation associated with other non-required prevention activities excluding support services.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
BT106k	Open-ended question for PS12-1201 Category B funds allocated for recommended and other components	
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 650
<i>Definition:</i>	If you have allocated PS12-1201 Category B funds to other components, please list the program or activities that you are going to implement or have implemented.	
<i>Instructions:</i>	Please answer the question in 100 words or less.	
<i>Business rule</i>	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	



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
BT106I	Open-ended question for PS12-1201 Category C funds allocated for recommended and other components	
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 650
<i>Definition:</i>	If you have allocated PS12-1201 Category C funds or other components, please list the program or activities that you are going to implement or have implemented.	
<i>Instructions:</i>	Please answer the question in 100 words or less.	
<i>Business rule</i>	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	
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
<i>Definition:</i>	For PS12-1201 Category A, this value represents the allocation associated with program monitoring and evaluation.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
BT107d	Amount of PS12-1201 Category B funds allocated for HIV prevention program monitoring and evaluation	XSD (Schema) Name: amountMandE121201CateB
Value Option: N/A	Format Type: Currency	Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category B, this value represents the allocation associated with program monitoring and evaluation.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
BT107e	Amount of PS12-1201 Category C funds allocated for HIV prevention program monitoring and evaluation	amountMandE121201CateC
Value Option:	N/A	Format Type: Currency Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category C, this value represents the allocation associated with program monitoring and evaluation.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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 Category A funds allocated for Jurisdictional HIV Prevention Planning	amountPlanning121201CateA
Value Option:	N/A	Format Type: Currency Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category A, this value represents the allocation associated with jurisdictional HIV prevention planning.	
<i>Instructions:</i>	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	
<i>Business rule</i>	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	amountCBTA121201CateA
Value Option:	N/A	Format Type: Currency Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category A, this value represents the allocation associated with capacity building and technical assistance	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) 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	amountCBTA121201CateB
Value Option:	N/A	Format Type: Currency Min Length: 1 Max Length: 12
<i>Definition:</i>	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.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	amountCBTA121201CateC
Value Option:	N/A	Format Type: Currency Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category C, this value represents the allocation associated with capacity building and technical assistance.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	amountAdmin121201CateA
Value Option:	N/A	Format Type: Currency Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category A, this value represents the allocation associated with agency's general operations or administrative activities.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	XSD (Schema) Name:
BT110d	Amount of PS12-1201 Category B funds allocated for agency's general operations or admin activities	amountAdmin121201CateB
Value Option:	N/A	Format Type: Currency Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category B, this value represents the allocation associated with agency's general operations or administrative activities.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
BT110e	Amount of PS12-1201 Category C funds allocated for agency's general operations or admin activities	amountAdmin121201CateC
Value Option:	N/A	Format Type: Currency Min Length: 1 Max Length: 12
<i>Definition:</i>	For PS12-1201 Category C, this value represents the allocation associated with agency's general operations or administrative activities.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	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	
BT111	Open-ended question for overall budget allocation	questionOverallBT
Value Option:	N/A	Format Type: Alpha-Numeric Min Length: 1 Max Length: 650
<i>Definition:</i>	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.	
<i>Instructions:</i>	Please answer the question in 100 words or less.	
<i>Business rule</i>	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	



NHME Variables and Values

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 only one **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 populations
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.

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-funded targeted HIV testing program
1	Yes	Client is at high-risk 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	XSD (Schema) Name:
CBOTEST004	Navigation and prevention and essential support services, HIV Testing	
Value Option:	Choose all that apply	Format Type: Alpha-Numeric Min Length: 1 Max Length: 4
<i>Definition:</i>	The navigation, prevention, and essential support services that a client was referred to or provided as part of PS15-1502 HIV testing program	
<i>Instructions:</i>	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	
<i>Business rule</i>	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 intervention, 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 intervention, 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



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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 assist 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 providing services such as assistance with homelessness, rental housing, or home-buying, access/eligibility assessment to HUD/HOPWA housing 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, eligibility assessment, enrollment, etc.
RF22	Referred to mental mental health counseling and services	Programs that are provided by a mental health professional. Services may include psychiatric 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	Client was referred to 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



NHME Variables and Values

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, gonorrhea, 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

Num Variable Name

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 budget year

Instructions: Enter the month, day, and year the client first visited the agency this budget 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: Number Min Length: 4 Max Length: 4

Definition: Budget year refers to the PS15-1502 12-month funding period (July 1 - June 30) in which the client received this service

Instructions: Enter the budget 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.



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
CBOCL003	Client Record Number	
Value Option: N/A	Format Type: Number	Min Length: 1 Max Length: 32
<i>Definition:</i>	A locally developed, unique-client number used to distinguish an individual client receiving one or more services within an agency	
<i>Instructions:</i>	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).	
<i>Business rule</i>	HIV Testing: Mandatory, see detailed business rule 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.	

Num	Variable Name	XSD (Schema) Name:
CBOCL005	Client's HIV Status	
Value Option: Choose only one	Format Type: Number	Min Length: 1 Max Length: 1
<i>Definition:</i>	The client's self-reported or documented HIV status at the time of his/her first visit this budget year	
<i>Instructions:</i>	Select the most appropriate option based on the information provided by the client at the time of his/her first visit this budget year	
<i>Business rule</i>	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	Client's self-reported HIV-negative status
9	Unknown	Client's HIV status is not known



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
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

<i>Num</i>	<i>Variable Name</i>	<i>XSD (Schema) Name:</i>
CBOCL007	HIV Linked to Medical Care - attended first medical appointment	
Value Option:	Choose only one	Format Type: Number Min Length: 1 Max Length: 1
<i>Definition:</i>	A client, not currently in HIV medical care, was linked to or re-engaged in HIV medical care - attended first medical appointment	
<i>Instructions:</i>	Complete if the client is not currently receiving HIV medical care	
<i>Business rule</i>	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	

<i>Code</i>	<i>Value Description</i>	<i>Value Definition</i>
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

<i>Num</i>	<i>Variable Name</i>	
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
<i>Definition:</i>	The client's HIV status changed from HIV-negative or unknown to HIV-positive since her/his first visit in this budget year	
<i>Instructions:</i>	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 budget year	
<i>Business rule</i>	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	<i>Client's HIV status has not changed since her/his first visit in this budget year</i>
1	Yes	<i>Client's HIV status changed from HIV-negative/unknown to HIV-positive since her/his first visit in this budget year</i>



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 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
P10	Provided screening for TB/TB infection, HIV-negative	Client was provided screening for latent or active strains of tuberculosis, HIV-negative only
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 intervention, HIV-negative	Client was provided a CDC-supported High Impact Prevention (HIP) behavioral intervention for high-risk HIV-negative persons
P7	Provided HIV testing, HIV-negative	Client was tested for HIV, 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



NHME Variables and Values

<i>Num</i>	<i>Variable Name</i>	
RF10	Referred to treatment for latent or active strains of tuberculosis, HIV-positive	Client was referred to treatment for TB/TB infection, HIV-positive only
RF11	Referred to 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
RF12	Referred to HIV testing, HIV-negative	Client was referred to HIV testing, HIV-negative only
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, gonorrhea, 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 latent or active strains of tuberculosis, 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 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
RF20	Referred to treatment for TB/TB infection, HIV-negative	Client was referred to treatment for latent or active strains of tuberculosis, HIV-negative only
RF21	Referred to basic education continuation and completion services	Programs that assist the client in improving basic reading, writing, math, spelling, and language skills (such as GED preparation, or English as a Second Language (ESL) classes)
RF22	Referred to employment services	Programs that provide employment assistance including vocational trainings, employment referrals, job placement, skills assessment, resume building support, etc.
RF23	Referred to housing services	Programs that help clients find adequate housing by providing services such as assistance with homelessness, rental housing, or home-buying, access/eligibility assessment to HUD/HOPWA housing programs
RF24	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. Eligibility assessment, enrollment, etc.
RF25	Referred to mental health counseling and services	Programs that are provided by a mental health professional. Services may include psychiatric assessment, consultation, treatment, psychotherapy, crisis intervention, etc.
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 drug and alcohol treatment and support programs/services



NHME Variables and Values

Num	Variable Name	
RF28	Referred to transportation services	Client received a referral to agencies providing transportation assistance (to and from HIV prevention and medical care appointments), e.g., through direct transportation services, vouchers, or tokens
RF29	Client 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 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
RF4	Referred to Partner Services, HIV-positive	Client was referred to Partner Services, HIV-positive only
RF5	Referred to screening for STDs (syphilis, gonorrhea, 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
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.



NHME Variables and Values

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	
<i>Definition:</i>	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.			
<i>Instructions:</i>	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.			
<i>Business rule</i>	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	
<i>Definition:</i>	Specifies the version of the XSD which has been used to validate the XML file.			
<i>Instructions:</i>	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.			
<i>Business rule</i>	Applicable only for XML uploads of CT data.			
Z03b	PS Schema Version Number	XSD (Schema) Name: psSchemaVersionNumber		
Value Option: Enter one value only	Format Type: Number	Min Length: 1	Max Length: 10	
<i>Definition:</i>	Specifies the version of the XSD which has been used to validate the XML file.			
<i>Instructions:</i>	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.			
<i>Business rule</i>	Applicable only for XML uploads of PS data.			



NHME Variables and Values

Num	Variable Name	XSD (Schema) Name:
Z03c	Schema Version Number	SchemaVersionNumber
Value Option:	Enter one value only	Format Type: Number
		Min Length: 1
		Max Length: 10
<i>Definition:</i>	Specifies the version of the XSD which has been used to validate the XML file.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	Applicable only for XML uploads after January 2013.	
Z04	Agency ID Sending File	senderAgencyID
Value Option:	N/A	Format Type: Alpha-Numeric
		Min Length: 1
		Max Length: 12
<i>Definition:</i>	The agency which sent the XML data file. This field allows for better CDC management of multiple files from multiple entities.	
<i>Instructions:</i>	Enter the ID of the agency sending the file to CDC	
<i>Business rule</i>	Applicable only for XML uploads.	
Z05a	First Date of Data Included in File	firstDate
Value Option:	N/A	Format Type: MM/DD/YYYY
		Min Length: 8
		Max Length: 10
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the first date of data submitted in the current file.	
<i>Business rule</i>	Applicable only for XML uploads	
Z05b	Last Date of Data Included in File	lastDate
Value Option:	N/A	Format Type: MM/DD/YYYY
		Min Length: 8
		Max Length: 10
<i>Definition:</i>	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.	
<i>Instructions:</i>	Enter the last date of data submitted in the current file.	
<i>Business rule</i>	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

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

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	XSD (Schema) Name:
Z09	Date File Was Created	dateCreated
Value Option: N/A	Format Type: MM/DD/YYYY	Min Length: 8 Max Length: 19
<i>Definition:</i>	The date (and optionally, the time) the XML file was created.	
<i>Instructions:</i>	Enter the date the current XML file was created. There should be sufficient precision to uniquely identify a file.	
<i>Business rule</i>	Applicable only for XML uploads	
Z10	Date File Last Modified	fileLastModifiedDate
Value Option: N/A	Format Type: MM/DD/YYYY	Min Length: 8 Max Length: 19
<i>Definition:</i>	If the file has been modified, the date (and optionally, the time) the XML file was last modified.	
<i>Instructions:</i>	Enter the date the current XML file was modified. There should be sufficient precision to uniquely identify a file submission.	
<i>Business rule</i>	Applicable only for XML uploads	
Z11	Special Instructions	specialInstructions
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 50
<i>Definition:</i>	Special instructions about XML file, if any.	
<i>Instructions:</i>	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.	
<i>Business rule</i>	Applicable only for XML uploads	
Z12	Agency Name of Data Owner	dataOwnerAgencyName
Value Option: N/A	Format Type: Alpha-Numeric	Min Length: 1 Max Length: 50
<i>Definition:</i>	The actual agency owner of the submitted XML file.	
<i>Instructions:</i>	Enter the agency name of the actual owner of the XML file.	
<i>Business rule</i>	Applicable only for XML uploads	

