

Monitoring HIV Care in the United States: Indicators and Data Systems

Institute of Medicine of the National Academies

In response to the National HIV/AIDS Strategy (NHAS, July 2010), the Institute of Medicine (IOM) identified core clinical indicators* related to continuous HIV clinical care and access to supportive services. The indicators will measure the progress of the 2015 benchmarks set by the NHAS. The national benchmarks include increasing access to care and optimizing health outcomes for people living with HIV/AIDS, and reducing HIV-related health disparities.

Core indicators for clinical HIV care

- **Proportion of people newly diagnosed with HIV with a CD4+ cell count >200 cells/mm³ and without a clinical diagnosis of AIDS**

Oregon status: During 2012, 64% (167/261) of newly diagnosed HIV cases had CD4 counts >200 cells/mm³ without a clinical diagnosis of AIDS and did not progress to AIDS within 12 months compared to 61% (145/237) during 2010.

- **Proportion of people newly diagnosed with HIV who are linked to clinical care for HIV within three months of diagnosis**

Oregon status: During 2012, 85% (221/261) of newly diagnosed HIV-infection cases were linked to clinical care within 90 days of initial diagnosis compared to 81% (192/237) during 2010.

(Clinical care is defined here as a viral load or CD4 test collected within 90 days of initial HIV infection diagnosis and reported to the Oregon Public Health Division.)

- **Proportion of people with diagnosed HIV infection who are in continuous care (two or more visits for routine HIV medical care in the preceding 12 months at least three months apart)**

Oregon status: During 2012, 63% (4,072/6,510) of living Oregon resident HIV cases were in continuous care compared to 62% (3,791/6,155) during 2010.

(Oregon has no direct way to measure medical visits for all people living with HIV/AIDS (PLWH/A). Instead, Oregon relies on a surrogate measure based on laboratory reporting. The proportion reported represents people with reported cases of HIV infection who had two separate viral load or CD4 test results collected at least 90 days apart during 2012 and reported to the Oregon HIV/STD/TB Program.)

* Monitoring HIV care in the United States: indicator and data systems: www.iom.edu/Reports/2012/Monitoring-HIV-Care-in-the-United-States.aspx.

- **Proportion of people with diagnosed HIV infection who received two or more CD4 tests in the preceding 12 months**

Oregon status: During 2012, 62% (4,065/6,510) of living Oregon resident HIV cases received two or more CD4 tests compared to 62% (3,821/6,155) during 2010.

- **Proportion of people with diagnosed HIV infection who received two or more viral load tests in the preceding 12 months**

Oregon status: During 2012, 62% (4,049/6,510) of living Oregon resident HIV cases received two or more viral loads compared to 59% (3,598/6,155) during 2010.

- **Proportion of people with diagnosed HIV infection in continuous care for 12 or more months and with a CD4+ cell count ≥ 350 cells/mm³**

Oregon status: Among living Oregon resident HIV cases during 2012, 63% were in continuous care, of which 81% (3,298/4,072) had a CD4+ cell count ≥ 350 cells/mm³ compared to 79% (3,008/3,791) during 2010.

- **Proportion of people with diagnosed HIV infection and a measured CD4+ cell count < 500 cells/mm³ who are not on antiretroviral therapy (ART)**

Oregon status: During 2011–2012, 5% of living Oregon resident HIV cases with a CD4+ cell count < 500 cells/mm³ were not on ART and a comparable proportion was observed during 2009–2010 (5%).

(The proportion reported is a proportion of 290 participants interviewed for the Medical Monitoring Project (MMP) during 2011–2012 with a CD4+ cell count < 500 cells/mm³ collected during the 12 months preceding the interview.)

- **Proportion of people with diagnosed HIV infection who have been on ART for 12 or more months and have a viral load below the level of detection**

Oregon status: During 2011–2012, 73% of living Oregon HIV cases on ART for 12 or more months had their last viral load below the level of detection compared to 79% during 2009–2010.

(The proportion reported is a proportion of 430 participants interviewed for the MMP during 2011–2012 who had received ART for at least 12 months and whose most recent viral load information was available.)

- **All-cause mortality rate among people diagnosed with HIV infection**

Oregon status: During 2012, 112 deaths were reported among Oregon resident HIV cases, and the case fatality rate among people living with HIV in Oregon was 1.69 per 100 compared to 1.79 per 100 during 2010 when 112 deaths were reported among people living with HIV in Oregon.

Core indicators for mental health, substance abuse and supportive services

- **Proportion of people with diagnosed HIV infection and mental health disorder who are referred for mental health services and receive these services within 60 days**

Oregon status: During 2011–2012, 78% of people with diagnosed HIV infection and mental health disorder received mental health services within 60 days of their referrals.

(The proportion reported is a proportion of the 59 participants interviewed for the MMP during 2011–2012 who received a mental health referral. Receipt of mental health services and diagnosis of depression, bipolar disorder, anxiety and psychosis are received in interviews with MMP participants. No data was available for this indicator prior to 2011.)

- **Proportion of people with diagnosed HIV infection and substance use disorder who are referred for substance abuse services and receive these services within 60 days**

Oregon status: During 2011–2012, 62% of people with diagnosed HIV infection and substance abuse disorder received substance abuse services within 60 days of their referrals.

(The proportion reported is a proportion of the 13 participants interviewed for the MMP during 2011–2012 who received a substance abuse referral. Receipt of substance abuse services and current substance use is received in interviews with MMP participants. No data was available for this indicator prior to 2011.)

- **Proportion of people with diagnosed HIV infection who were homeless or temporarily or unstably housed at least once in the preceding 12 months**

Oregon status: During 2011–2012, 10% of Oregon HIV cases receiving regular medical care reported having been homeless compared to 6% during 2009–2010.

Sixteen percent of Ryan White HIV/AIDS Program clients reported having been unstably housed during 2012.

(The first proportion reported is a proportion of 500 participants interviewed for the Medical Monitoring Project during 2011–2012 who reported living in one of the following places at least once in the previous 12 months:

- *In a shelter;*
- *On the street; or*
- *In their car.*

The second statement reported represents 628 of 3,942 Ryan White Program clients statewide who reported living in temporary or unstable housing during 2012. The MMP definition of “homelessness” is more restrictive than the Ryan White Program definition of “unstably housed.” In addition, the Ryan White population is less affluent than the overall population of people living with HIV. As a result, the two measures cannot be directly compared.)

- **Proportion of people with diagnosed HIV infection who experienced food or nutrition insecurity at least once in the preceding 12 months**

Oregon status: During 2011–2012, 17% of living Oregon HIV cases reported experiencing food or nutrition insecurity at least once in the preceding 12 months.

(The proportion reported is based on 498 participants interviewed for the MMP during 2011–2012 who answered “Often true” to the following statements:

- *The food (I/we) bought didn’t last and (I/we) didn’t have money to get more; or*
- *(I/we) couldn’t afford to eat balanced meals.*

Answered “Yes” to the questions:

- *Ever cut the size of your meals or skip meals because there wasn’t enough money for food?; or*
- *Ever eat less than you felt you should because there wasn’t enough money for food?; or*
- *Were ever hungry but didn’t eat because there wasn’t enough money for food? No data was available for this indicator prior to 2011.)*

- **Proportion of people with diagnosed HIV infection who had an unmet need for transportation services to facilitate access to medical care and related services at least once in the preceding 12 months**

Oregon status: During 2011–2012, 11% (57/501) of living Oregon HIV cases receiving regular medical care reported an unmet need for transportation services compared to 7% (39/538) during 2009–2010.

(The proportion reported is a proportion of 501 participants interviewed for the MMP during 2011–2012 who answered “Yes” to the question “Have you needed transportation assistance?” and “No” to the question “Did you get transportation assistance?”)