INFORMATIONAL LETTER

DIVISION: Executive

TO: Commissioners of Services and Social Services

DATE: September 4, 1992

SUBJECT: HIV-Related Disease Classification System

SUGGESTED DISTRIBUTION: Public Assistance Staff
Medical Assistance Staff
Adult Services Staff
Family and Children Services Staff
Staff Development Staff

CONTACT PERSON: Lynn E. Stone 1-800-342-3715, ext. 4-7420
Office of the Commissioner

ATTACHMENTS: NYSDOH HIV-Related Disease Classification System
(available on-line)

FILING REFERENCES

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DSS-329EL (Rev. 9/89)
The New York State Department of Health's AIDS Institute (AI) has revised its definition of HIV-related disease, effective immediately. This revised definition has been reviewed and approved by the AI's Medical Care Criteria Committee, which consists of experts in the care and treatment of AIDS/HIV infection from throughout New York State.

The new HIV-related disease classification system promulgated by the Department of Health reflects our evolving understanding of HIV infection and AIDS. The definition of HIV-related disease includes AIDS, as defined by the Federal Centers for Disease Control (CDC), along with clinical conditions that are substantially affected by their association with HIV infection and represent evidence of clinical disease. These additional conditions include cardiologic, gynecologic, and neoplastic manifestations, as well as syphilis.

The Department of Health's definition of HIV-related disease is used as a criteria for determining eligibility for housing and services for a number of Department of Social Services programs for which persons with HIV-related disease may apply. Most notably, the definition is used in determining eligibility for the "Emergency Shelter Allowance for Persons with AIDS or HIV-related Illness Faced with Homelessness" (90 ADM-8), and the AIDS Health Insurance Program (91 ADM-54.) Be advised that the Department is now reviewing both these ADMs to determine whether revisions are necessary to reflect the definitional shift. If such revisions are made, this information will be sent to all local social services districts.

A copy of the updated classification system is attached for your information. If you have any questions regarding this issue, please call Lynn Stone, Special Assistant to the Commissioner, Office of the Commissioner, at 1-800-342-3715, ext. 4-7420 (USER ID No. AZ0070).

Mark B. Lewis
Deputy Commissioner for
Executive Services and Support
NEW YORK STATE DEPARTMENT OF HEALTH
AIDS INSTITUTE

Standard for
Clinical/Symptomatic HIV Illness

I. CDC Defined AIDS

a. Candidiasis: bronchi, trachea, lung
b. Candidiasis: esophageal
c. Coccidiomycosis: disseminated or extrapulmonary
d. Cryptococcosis: extrapulmonary
e. Cryptosporidiosis: chronic intestinal
f. Cytomegalovirus disease
g. Cytomegalovirus retinitis
h. HIV encephalopathy
i. Herpes simplex: chronic ulcers
j. Histoplasmosis
k. Isosporiasis: chronic intestinal
l. Kaposi's sarcoma
m. Lymphoma, Burkitt's
n. Lymphoma, immunoblastic
o. Lymphoma, CNS
p. Mycobacterium avium complex or M. kansasii
q. M. tuberculosis, disseminated or extrapulmonary
r. Mycobacterium or other species
s. Pneumocystis carinii pneumonia
t. Progressive multifocal leukoencephalopathy
u. Salmonella septicemia: recurrent
v. Toxoplasmosis of the brain
w. Wasting Syndrome: Defined as a combination of the following:
   - Greater than 10% involuntary weight loss, plus
   - Chronic diarrhea (two loose stools a day for thirty days) or chronic weakness
   - Documented fever for more than thirty days, intermittent or constant.

II. HIV-Related Disease

Documentation of HIV infection by HIV antibody test, antigen, and/or culture plus any of the following:

1. Pulmonary Tuberculosis

2. Mucocutaneous/Dermatological Conditions
   a. Candidiasis of throat/mouth (Thrush)
   b. Oral hairy leukoplakia
   c. Non-healing cutaneous herpes zoster
   d. Extensive, poorly responsive seborrheic dermatitis
3. **Major Bacterial Infections**
   a. Pneumonia
   b. Meningitis
   c. Sepsis
   d. Endocarditis
   e. Other deep-seated infections (pelvic inflammatory disease)

4. **Hematological Abnormalities** (without evidence for other causes after evaluation)
   a. Thrombocytopenia: Platelet count < 100,000
   b. Granulocytopenia: Granulocyte count < 1,800
   c. Anemia: Hematocrit < 30%

5. **Immunological Abnormalities**
   a. CD4 count of less than 200/mm$^3$ or 20% of total lymphocytes

6. **Rheumatological**
   a. Reiter's syndrome

7. **Renal**
   a. HIV nephropathy

8. **Neurological**
   a. HIV neuropathy
   b. HIV myopathy
   c. Aseptic meningitis

9. **Constitutional**
   a. Chronic persistent fever without obvious etiology
   b. Chronic persistent weight loss: > 10% baseline weight

10. **Cardiologic**
    a. HIV cardiomyopathy
11. **Gynecologic**
   a. Cervical dysplasia or neoplasia
   b. Chronic vaginal candidiasis
   c. Pelvic inflammatory disease

12. **Neoplastic**
   a. Anal neoplasia

13. **Syphilis**
   a. Secondary latent syphilis
   b. Tertiary syphilis