Ryan White
Quality Management Update

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Continuous Quality Improvement

• Quality is defined as meeting and/or exceeding the expectations of our customers.

• Success is achieved through meeting the needs of those we serve.

• Most problems are found in processes, not in people. CQI does not seek to blame, but rather to improve processes.

• It is possible to achieve continual improvement through small, incremental changes.

• Continuous improvement is most effective when it becomes a natural part of the way everyday work is done.
Upcoming QM Changes

- On November 6, the HIV/AIDS Bureau (HAB) informed grantees of changes to the performance measure portfolio.
- The changes have placed priority of some measures—which yields fewer measures.
CURRENT PERFORMANCE MEASURE PORTFOLIO STRUCTURE

Old: 56 Measures
- Clinical Groups 1, 2, & 3
- Pediatric
- Medical Case Management
- ADAP
- Oral Health
- Systems

New: 46 Measures
- Core
- Clinical
- Medical Case Management
- ADAP
- Oral Health
- Systems
- Archived

http://hab.hrsa.gov/deliverhivaidscare/habperformmeasures.html
### Archived

#### Adolescent/Adult:
1. ARV Therapy for Pregnant Women  
2. CD4 T-Cell Count  
3. HAART  
4. Medical Visits  
5. PCP Prophylaxis  
6. Adherence Assessment & Counseling  
7. TB Screening  
8. Hepatitis/HIV Alcohol Counseling  
9. Influenza Vaccination  
10. MAC Prophylaxis  
11. Mental Health Screening  
12. Tobacco Screening  
13. Toxoplasma Screening

#### Pediatrics:
1. Adherence Assessment and Counseling  
2. ARV Therapy  
3. CD4 Value  
4. Developmental Surveillance  
5. Health Care Transition Planning for HIV-infected Youth  
6. HIV Drug Resistance Testing Before Initiation of Therapy  
7. Lipid Screening  
8. Medical Visit  
9. PCP Prophylaxis for HIV-Infected Children  
10. Planning for Disclosure of HIV Status to Child  
11. TB Screening

#### All Ages:
1. Viral Load Monitoring  
2. Viral Load Suppression on ART

#### Medical Case Management (MCM):
1. Medical Visits

#### System:
1. Disease Status at Time of Entry Into Care  
2. Quality Management Program

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Promoting and protecting the health of the public and the environment.
Questions?

⇒ Review HIV/AIDS Bureau performance measure webpage
⇒ Measure detail sheets
⇒ Frequently asked questions (FAQs)
⇒ Identify changes to own measure portfolio
⇒ Send questions to HIVmeasures@hrs.gov
  or call Marlene Matosky (301-443-0798)

http://hab.hrsa.gov/deliverhivaidscare/habperformmeasures.html
Ryan White Part B:
CY 2012 Quality Measure Outcomes

<table>
<thead>
<tr>
<th>Service/Screening</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory Service</td>
<td>78.7</td>
</tr>
<tr>
<td>At least 1 CD4 and VL in CY</td>
<td>98.5</td>
</tr>
<tr>
<td>2 or more CD4s and VLs in CY</td>
<td>82.3</td>
</tr>
<tr>
<td>CD4 &lt; 50, Rx MAC Proph.</td>
<td>80.2</td>
</tr>
<tr>
<td>CD4 &lt; 200, Rx PCP Proph.</td>
<td>82.4</td>
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<tr>
<td>TB Screening (Reporting Period)</td>
<td>37.9</td>
</tr>
<tr>
<td>TB Screening (Ever)</td>
<td>82.5</td>
</tr>
<tr>
<td>Syphilis Screening</td>
<td>73.2</td>
</tr>
<tr>
<td>Hepatitis C Screening (Reporting Period)</td>
<td>38.2</td>
</tr>
<tr>
<td>Hepatitis C Screening (Since Dx)</td>
<td>78.9</td>
</tr>
<tr>
<td>Pregnant Women Rx ART</td>
<td>35.0</td>
</tr>
<tr>
<td>PAP Exams</td>
<td>94.4</td>
</tr>
<tr>
<td>HIV Virus Supression (VL&lt;200)</td>
<td>84.0</td>
</tr>
</tbody>
</table>
Ambulatory Service  
At least 1 CD4 and VL in CY  
2 or more CD4's and VL's in CY  
CD4 < 50, prescribed MAC  
CD4 < 200, prescribed PCP  
TB Screening (Reporting Period)  
Syphilis Screening  
Hepatitis C Screening (Since Diagnosis)  
PAP Exams  

2009 Average  
73.3  95.3  55.7  24.0  37.8  42.9  68.1  44.6  
2010 Average  
72.0  96.6  63.3  52.8  53.4  37.9  64.0  42.1  
2011 Average  
73.1  96.9  82.7  73.3  67.9  53.4  63.8  45.4  
2012 Average  
78.7  98.5  82.3  80.2  82.4  37.9  73.2  78.9  35.0
Ryan White Part B Trends: Ambulatory Service

*Inclusive of clients who had at least 1 Ambulatory Service during the reporting period, and their first service was prior to six months after the start of the reporting period.
Ryan White Part B: 2 or More CD4's and VL's in CY 2012

- 2009: 55.7%
- 2010: 63.3%
- 2011: 82.7%
- 2012: 82.3%

Target: 90%
Ryan White Part B Trends: Pap Exams

Percentage

- 2009: 44.6%
- 2010: 42.1%
- 2011: 45.4%
- 2012: 35.0%

Pap Exam Average vs Target

Promoting and protecting the health of the public and the environment
Ryan White Part B: Syphilis Exam

Syphilis Exam Completed  Target

2009: 68.1%  
2010: 64.0%  
2011: 63.8%  
2012: 73.2%
Ryan White Part B Trends: MAC and PCP Prophylaxis

- CD4 < 50, prescribed MAC Prophylaxis:
  - 2009: 24.0%
  - 2010: 52.8%
  - 2011: 73.3%
  - 2012: 80.2%

- CD4 < 200, prescribed PCP Prophylaxis:
  - 2009: 37.8%
  - 2010: 53.4%
  - 2011: 67.9%
  - 2012: 82.4%
Ryan White Part B Trends: TB Screening

- 2009: 42.9%
- 2010: 37.9%
- 2011: 53.4%
- 2012: 82.5%
Ryan White Part B: Oral Health Care Referrals

- Paid by Other Source: 9%
- Paid by RW Program: 15.8%

75% Target
Ryan White Part B: Older Than 13 years and Prescribed ART

** This measure represents clients who had a CD4 <= 350 or VL >= 100,000, older than 13 yrs, and prescribed ART

- Not Prescribed ART: 10.9%
- Prescribed ART: 89.2%
Ryan White Part B: Pregnant Women and ART

- ART Prescription Received: 94%
- ART Prescription Not Received: 6%

Promoting and protecting the health of the public and the environment
Ryan White Part B: HIV Virus Suppression (VL<200)

HIV Virus Suppression (VL<200) 84.0%
Key Elements of a Breakthrough Performance

• Providers will have to:
  – Have the will to do what it takes to change to a new system.
  – Share and implement ideas on which to base the design of the new system.
  – Execute the ideas.
Any Questions
Ryan White Part C Update

Aaron O’Brien
South Carolina Part C Programs

- BJ Comprehensive Health
- CareSouth Carolina
- Catawba Care
- Eau Claire Cooperative Health Centers, Inc
- HopeHealth, Inc
- Little River Medical Center Inc.
- Low Country Health Care System, Inc
- New Horizon Family Health Services
- Roper St. Francis Healthcare
- Sandhills Medical Foundation
- Spartanburg Regional Healthcare System
In +Care Campaign

• All Part C Programs Participating - Over 3000 patients

• Year 1
  – Building Participation
  – Improving Data Collection & Submission
  – Providing TA
  – Creating a learning community

• Year 2
  – Statewide Patient Engagement Survey
In +Care Campaign

Gap Measure
Patient Engagement Survey

- 9 Part C Programs conducted interviews
- Facilitators/barriers to care
- Asked to rate their own level of engagement

Please review this diagram, then mark on the arrow how engaged you are with your medical care...

Not At All Engaged

First visit in two years or more, come only when ill

Fully Engaged

Attend all scheduled visits, ask questions, take medications as directed, participate in clinic activities
Participants

- Male, 61%
- Female, 39%

- African American, 77%
- White, 22%
- Hispanic, 1%

- Yes, 83%
- No, 17%
Personal Facilitators
Personal Facilitators

• Family/Children
Personal Facilitators

• Family/Children
• Good health, feeling better
Personal Facilitators

• Family/Children
• Good health, feeling better
• Empowerment
Personal Facilitators

- Family/Children
- Good health, feeling better
- Empowerment
- Feeling educated
Personal Facilitators

- Family/Children
- Good health, feeling better
- Empowerment
- Feeling educated
- Spirituality/Faith
Personal Facilitators

• Family/Children
• Good health, feeling better
• Empowerment
• Feeling educated
• Spirituality/Faith
• Accomplishments/Improved Results
Personal Facilitators

- Family/Children
- Good health, feeling better
- Empowerment
- Feeling educated
- Spirituality/Faith
- Accomplishments/Improved Results
- Keeping Calendar
Personal Barriers
Personal Barriers

• Homelessness
Personal Barriers

• Homelessness
• Meeting Basic Needs
Personal Barriers

• Homelessness
• Meeting Basic Needs
• Transportation
Personal Barriers

• Homelessness
• Meeting Basic Needs
• Transportation
• Drug Use
Personal Barriers

- Homelessness
- Meeting Basic Needs
- Transportation
- Drug Use
- Sickness Leads to Depression
Personal Barriers

• Homelessness
• Meeting Basic Needs
• Transportation
• Drug Use
• Sickness Leads to Depression
• Family Problems
Personal Barriers

- Homelessness
- Meeting Basic Needs
- Transportation
- Drug Use
- Sickness Leads to Depression
- Family Problems
- None HIV Health Problems
Personal Barriers

- Homelessness
- Meeting Basic Needs
- Transportation
- Drug Use
- Sickness Leads to Depression
- Family Problems
- None HIV Health Problems
- Stigma/Acceptance of Disease
Provider Facilitators
Provider Facilitators

• Communication
Provider Facilitators

• Communication
• Trust
Provider Facilitators

• Communication
• Trust
• Relationship
Provider Facilitators

• Communication
• Trust
• Relationship
• Knowledge/expertise
Provider Facilitators

• Communication
• Trust
• Relationship
• Knowledge/expertise
• Provider reinforces appointment adherence
Provider Facilitators

• Communication
• Trust
• Relationship
• Knowledge/expertise
• Provider reinforces appointment adherence
• Consistency
Provider Facilitators

- Communication
- Trust
- Relationship
- Knowledge/expertise
- Provider reinforces appointment adherence
- Consistency
- Safety
Provider Barriers
Provider Barriers

• Communication (typing during visits)
Provider Barriers

- Communication (typing during visits)
- Transition between providers
Provider Barriers

• Communication (typing during visits)
• Transition between providers
• Poor communication between providers
Provider Barriers

• Communication (typing during visits)
• Transition between providers
• Poor communication between providers
• Bad experience at HIV diagnosis - indifference
System Facilitators
System Facilitators

• Flexible Scheduling
System Facilitators

• Flexible Scheduling
• Free/Inexpensive Care
System Facilitators

• Flexible Scheduling
• Free/Inexpensive Care
• Case Managers
System Facilitators

• Flexible Scheduling
• Free/Inexpensive Care
• Case Managers
• Collocation of Services
System Facilitators

- Flexible Scheduling
- Free/Inexpensive Care
- Case Managers
- Collocation of Services
- Coverage of non-HIV Care
System Facilitators

- Flexible Scheduling
- Free/Inexpensive Care
- Case Managers
- Collocation of Services
- Coverage of non-HIV Care
- Reminders/Calls between visits
System Facilitators

- Flexible Scheduling
- Free/Inexpensive Care
- Case Managers
- Collocation of Services
- Coverage of non-HIV Care
- Reminders/Calls between visits
- Short Wait Times
System Facilitators

- Flexible Scheduling
- Free/Inexpensive Care
- Case Managers
- Collocation of Services
- Coverage of non-HIV Care
- Reminders/Calls between visits
- Short Wait Times
- Clear Understanding of Staff Roles
System Barriers
System Barriers

• Phone Systems
System Barriers

- Phone Systems
- Group Activities
System Barriers

• Phone Systems
• Group Activities
• Burdensome Paperwork
System Barriers

• Phone Systems
• Group Activities
• Burdensome Paperwork
• Wait times
Improving Engagement
Improving Engagement

• Patient Experience
Improving Engagement

- Patient Experience
- Empower/Educate Patients
Improving Engagement

• Patient Experience
• Empower/Educate Patients
• HOPWA Programs
Improving Engagement

• Patient Experience
• Empower/Educate Patients
• HOPWA Programs
• Supportive Testing
Improving Engagement

• Patient Experience
• Empower/Educate Patients
• HOPWA Programs
• Supportive Testing
• Flexible Scheduling
Improving Engagement

• Patient Experience
• Empower/Educate Patients
• HOPWA Programs
• Supportive Testing
• Flexible Scheduling
• Consistency – CMs & Providers
Improving Engagement

• Patient Experience
• Empower/Educate Patients
• HOPWA Programs
• Supportive Testing
• Flexible Scheduling
• Consistency – CMs & Providers
• Treat Comorbidities
<table>
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<tr>
<th>Measure</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
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<tbody>
<tr>
<td>MAC Prophylaxis</td>
<td>63%</td>
<td>68%</td>
<td>61%</td>
<td>83%</td>
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<tr>
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<td>72%</td>
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