

How to Complete the HIV Quality Measure (HIVQM) Module - Written Q & A Summary

#	Questions	Answers
Resources		
1.	When will the webinar recording, slides, and Q&A summary be available?	The webinar recording is usually available within 1 week of the webinar. The webinar slides and Q&A are usually posted within 2 weeks. You can find more information in the corresponding archived webinar page on TargetHIV .
2.	Where can I find more resources on using the HIVQM?	For more resources on the HIVQM Module, including the manual and past webinars, check out the HIVQM topic page on TargetHIV.
3.	How often will there be trainings on the HIVQM?	It depends on the feedback we receive! Thus far we have only conducted annual trainings and at the Ryan White HIV/AIDS Program (RWHAP) Conference. Please reach out to HIVQM Technical Assistance (TA) Providers if you would want more frequent training on using the HIVQM Module. Please do not hesitate to contact Data Support so we can give you one-on-one training as well.
4.	What technical assistance is available if I have questions about using the HIVQM Module?	<p>For assistance with navigating the HIVQM Module, resolving any validation errors, and/or understanding the HIVQM Instruction Manual, contact Data Support.</p> <p>For assistance creating the CSV file and ensuring data quality, contact the DISQ Team.</p> <p>CAREWare users can visit TargetHIV for the HIVQM File Export Guide or contact the CAREWare Help Desk for help in creating the CSV file for upload.</p> <p>For assistance with the Electronic Handbooks (EHBs), submit a request to the EHBs Customer Support Center.</p>
Accessing the HIVQM		
5.	How do you access the HIVQM Module?	The HIVQM Module is located within the RWHAP Services Report (RSR) Inbox. At the bottom of the left hand navigation panel, under “Performance Measures”, click the HIVQM Inbox. Clicking the HIVQM Inbox will take you to the HIVQM Module. For more information, visit the TargetHIV for the HIVQM Module manual .
6.	How can I obtain an account to use the Module?	In order to enter data into the HIVQM Module, you will need to be registered in the RSR system.

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		For questions regarding registration and access, contact the Data Support Team or the EHB Customer Support Center .
7.	Can contracted providers enter data into the HIVQM Module so long as they have EHB access?	Yes, if they have access to the RSR, they should also be able to enter data.
8.	Is the HIVQM Module for Recipients only or can Providers access/enter their own data into the module?	Providers who have access to the RSR can access the HIVQM Module and enter their own data. Recipients can also enter their providers' data. We encourage providers to enter their own data.
9.	How can I find older data my program has entered into the Module?	Go to any of the report links to generate a report. Once in the report, go to reporting period drop-down menu and choose a reporting period. You will then be able to see your agency's data that was submitted during that period. The Data Support Team can also help in finding previously submitted data.
Reporting Guidelines		
10.	When is the HIVQM due?	The HIVQM Module is open four times a year (March, June, September, and December) for an entire month to submit performance measure data for a specified 12-month period. The next reporting period is open from March 1 st to the 31 st , for calendar years 2019 and 2020. For the annual schedule, visit TargetHIV for the HIVQM Module manual .
11.	Why is the March 2021 reporting period open for performance measure data for two calendar years (2019 and 2020)?	The March 2021 reporting period is special in that you can go back into the previous year to enter performance data. This change was made in response to comments from the field to allow for updating or editing data from the previous year.
12.	Is the HIVQM for reporting core performance measures only?	No, recipients can submit data for any of the HAB performance measures, including core, all ages, adolescent, HIV infected children, HIV exposed children, MCM, Oral health, ADAP, and systems-level measures. For a full list of performance measures on the HIVQM, refer to the HRSA Performance Measures .
13.	Is there a minimum of performance measures you have to select to use the Module?	There is no requirement for which or how many performance measures to be entered. Recipients and providers may pick and choose the performance measures for which they would like to report data.

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14.	Is this Module for all HIV clients or only Ryan White eligible clients?	Recipients may enter data for all clients served, including but not limited to RWHAP-eligible clients.
15.	My agency receives multiple streams of RWHAP Part funding. How much and for which Parts should we enter data?	Recipients and providers may enter data for any or all RWHAP Part funding they receive. You only need to enter data once.
16.	Are states required to enter their data?	The use of HIVQM Module is voluntary. No state is required to enter their data into the HIVQM Module.

Entering Data

17.	How can I create the CSV to upload to the Module?	<p>Creating the CSV file will vary among organizations. See the HIVQM Module, Appendix A, for guidance on what the file should contain.</p> <p>CAREWare users can visit the TargetHIV link to the HIVQM File Export Guide or contact the CAREWare Help Desk for help in creating the CSV file for upload.</p> <p>The DISQ Team can assist you in creating the CSV file. Contact DISQ at Data.TA@caiglobal.org.</p>
18.	I am interested in uploading data using a CSV file but need help. Who can I contact for assistance?	<p>For CAREWare users, visit the TargetHIV link to the HIVQM File Export Guide the CAREWare Helpdesk can help with creating the proper CSV file.</p> <p>The DISQ Team is also available to assist in creating the CSV file.</p>
19.	How are the validation messages in the HIVQM different from the ones in the RSR?	<p>In the HIVQM Module there are only Errors and Alerts. Errors must be corrected. Alerts do not need to be addressed, but they do provide a good hint about possible gaps in data accuracy.</p> <p>For more details on the HIVQM Validation messages, refer to page 44 of the HIVQM Instruction Manual.</p>

HIVQM Reports

20.	What is the added value of using this Module when agencies already submit client-level data in the RSR?	<p>Recipients and providers may find the comparison data helpful for the clinical quality management programs. The comparison data can assist recipient and providers when setting annual quality goals or goals for quality improvement projects. The graphic functions can save recipients and providers time and effort. The HIVQM Module also provides recipient and provider level performance measure data that is not found in the RSR report such as adolescents,</p>
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		HIV infected children, HIV exposed children, MCM, oral health, ADAP, and systems-level performance measures. Recipients and providers also have more frequent and quicker access to the HIVQM Module data compared to the RSR report that is published once a year. .
21.	How is the data entered into the Module used?	After entering data, recipients can see how their agency is performing in a certain performance measure over time and compare their performance to other agencies that have also submitted data. Agencies may find the Summary, Comparison Trend, and Program Parts Comparison Reports to be useful tools in their quality improvement projects; in comparing their performance with state, regional, national level data, as well as with other RWHAP providers. Agencies can also use the data to set goals, highlight efforts to share with staff, or use in reports for various stakeholders.
22.	How does HRSA HAB use the data that is entered into the HIVQM?	The HIVQM Module was primarily designed as a tool for RWHAP recipients and providers. HRSA HAB uses the HIVQM Module to assess which recipients are using the system and to monitor which performance measures are reported. In addition, HRSA HAB uses HIVQM Module data to provide RWHAP recipients and subrecipients TA on their funded projects to include in their clinical quality management programs.
23.	In the Summary Report, how large of an area do regional comparisons cover?	The regions represent the HHS regions .
24.	Can recipients see what data their contracted providers entered?	Yes, the recipient is able to see all data submitted by their sub-recipients.
25.	Is there a way to compare predominantly rural areas to metropolitan areas?	No, that functionality is not available at this time.
Other		
26.	Is this similar to the In+Care Campaign	No. The In+Care campaign was limited to recipients and subrecipients that participated. The HIVQM Module is open to all RWHAP recipients and subrecipients. Recipients and subrecipients can submit as many HAB performance measure they choose and can access their data and comparison data at any time (do not rely on an organization to compile the data and send it out). Also, the In+Care Campaign ended about five years ago and organizations cannot enter data anymore.

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27.	The HIVQM is voluntary, but will it be mandatory in the future?	HAB does not have the legislative authority to make the HIVQM Module mandatory.
28.	If data entry for the module is voluntary, then how do the comparison reports work if there is missing data from LHDs or regions?	The regional data will only reflect the data that is entered into the HIVQM Module from that region. It is also important to remember that recipients and subrecipients determine the performance measures for their clinical quality management programs. Recipients and subrecipients do not fund all the same RWHAP service categories and use the same performance measures.
29.	If entering data into the HIVQM is voluntary, how can we know which and how many programs entered data?	At this time, the system will not generate the number of recipients or sub-recipients (N) who enter data.