



Selecting Performance Measures

DSHAP Administrative Reverse Site Visit

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Vision: Healthy Communities, Healthy People



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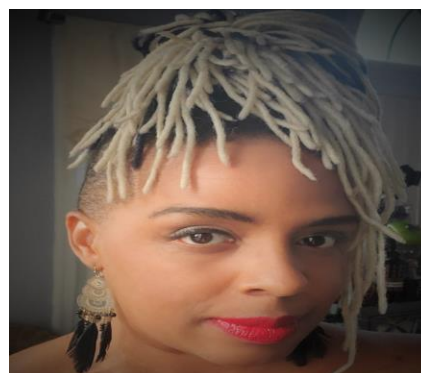
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Learning Objectives

- Understand basic requirements for CQM performance measures
- Learn strategies for selecting appropriate performance measures, beyond viral suppression, for funded service categories
- Use the HAB performance measures and other methods to develop unique performance measures, as needed



Performance Measurement

PERFORMANCE MEASUREMENT



- Selecting the appropriate number of performance measurements
- Conducting a review for relevance and need
- Collecting performance measure data
- Analyzing the performance measure data including stratifying the data to identify health disparities and sharing the data with stakeholders

RWHAP Treatment Modernization Act of 2006

Title XXVI of the Public Health Service (PHS) Act (Public Law 109-415, December 19, 2006)

All Ryan White HIV/AIDS Program recipients are required “to establish clinical quality management programs to:

Measure

Assess the extent to which HIV health services are consistent with the most recent Public Health Service guidelines for the treatment of HIV disease and related opportunistic infections;

Improvement

Develop strategies for ensuring that such services are consistent with the guidelines for improvement in the access to and quality of HIV services”

See §§ 2604(h)(5), 2618(b)(3)(E), 2664(g)(5), and 2671(f)(2) of the PHS Act.



CQM Policy Clarification Notice 15-02

Purpose:

This policy clarification notice is to clarify the HRSA RWHAP expectations for CQM programs.

Scope of Coverage:

- RWHAP Parts A, B, C, and D
- Recipients and Subrecipients

Released: September 2015

Revised: November 2018

Updated: September 2020

<https://ryanwhite.hrsa.gov/sites/default/files/ryanwhite/grants/pcn-15-02-cqm.pdf>



Components of a CQM Program

- A CQM program is the coordination of activities aimed at improving patient care, health outcomes, and patient satisfaction.
- CQM activities should be continuous and fit within and support the framework of grant administration functions.
- Components of a CQM program:
 1. Infrastructure
 2. Performance measurement
 3. Quality improvement



What Say You, PCN 15-02?

Frequency:

Regularly collect and analyze performance measure data which would occur more frequently than data collection for reporting – quarterly at a minimum.

Analysis:

Collect and analyze performance measure data to:

- Review and discuss with CQM committee members and stakeholders.
- Determine quality improvement projects.
- Assess for health disparities (such as stratifying the data).



Performance Measurement

- Performance measurement is the process of collecting, analyzing, and reporting data regarding patient care, health outcomes on an individual or population level, and patient satisfaction.
- Without measurement (data), the effectiveness of implemented improvement efforts and subsequently health outcomes, cannot adequately, accurately or appropriately be assessed.
- Recipients are strongly encouraged to include HRSA's HAB core measures.



Why Measure?

- Informs quality improvement efforts.
- Set a baseline for improving patient care, health outcomes, and patient satisfaction.
- Create buy-in for improvement work.
- Track improvements over time.
- Identify and prioritize quality improvement projects and goals.
- Track progress toward quality improvement goals.
- Monitor patient care, health outcomes, and patient satisfaction.

How Many is Enough?

- Percent of RWHAP eligible clients receiving at least one unit of service for a RWHAP-funded service category
- Minimum number of performance measures

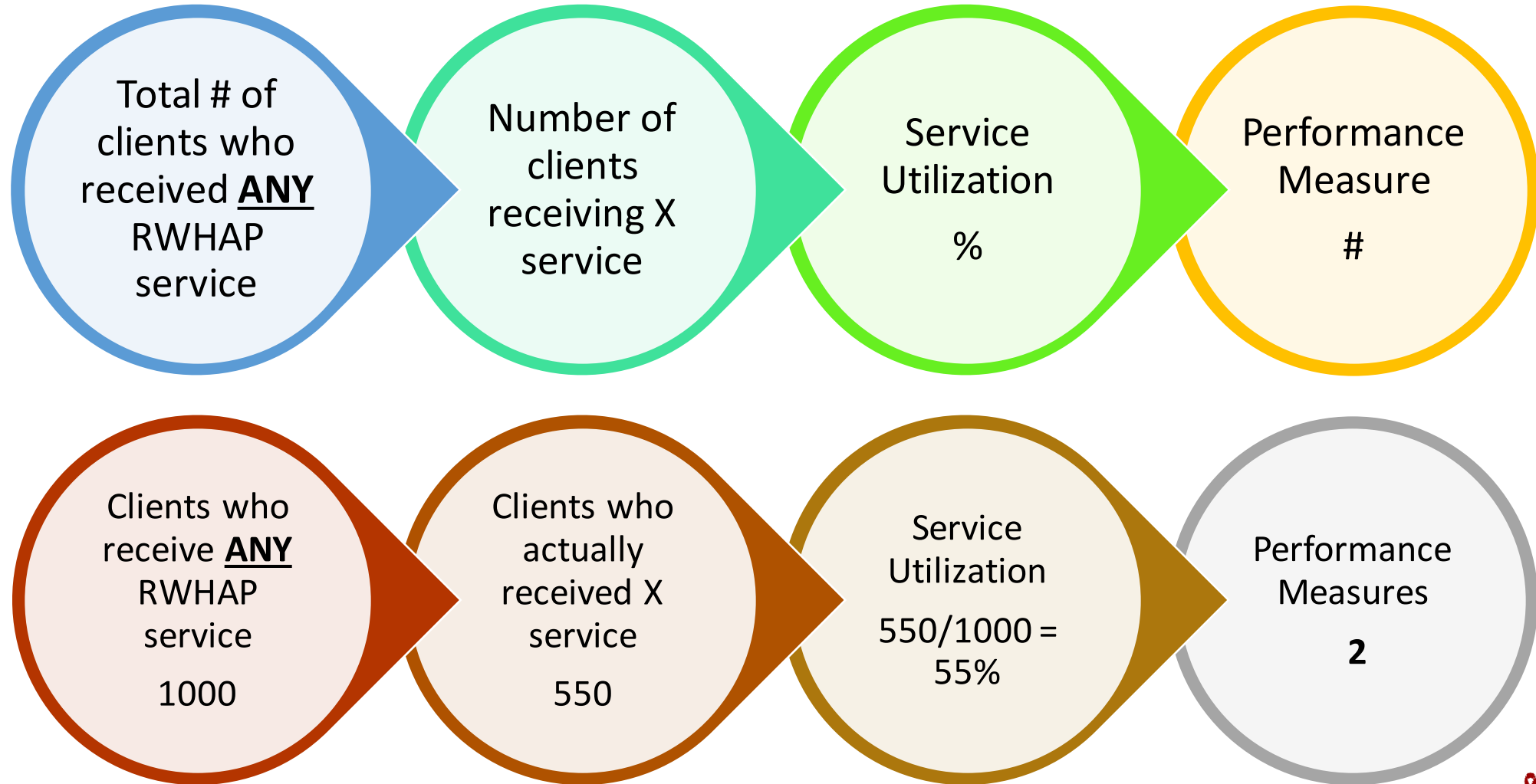


How Many Measures? Client Services Utilization

Percent of RWHAP eligible clients receiving at least one unit of service for a RWHAP-funded service category	Minimum number of performance measures
> = 50%	2
> 15% to <50%	1
< =15%	0



Determine Minimum Number of Performance Measures



Data Analysis

What's your process?



Performance Measurement

Frequency:

Regularly collect and analyze performance measure data which would occur more frequently than data collection for reporting – quarterly at a minimum.

Analysis:

Collect and analyze performance measure data that allow for inspection and improvement of health disparities (such as stratifying the data) across different target populations.

Performance Measures Selection



Performance Measure Selection

- Measures should be selected that best assess the services the recipient is funding.
- Consider a mixed portfolio of process and outcome measures.
- Consider measures that have measurability, improvability, relevance, and validity.
- Recipients are strongly encouraged to use HRSA's HIV/AIDS Bureau core measures.



Performance Measure Selection (cont.)

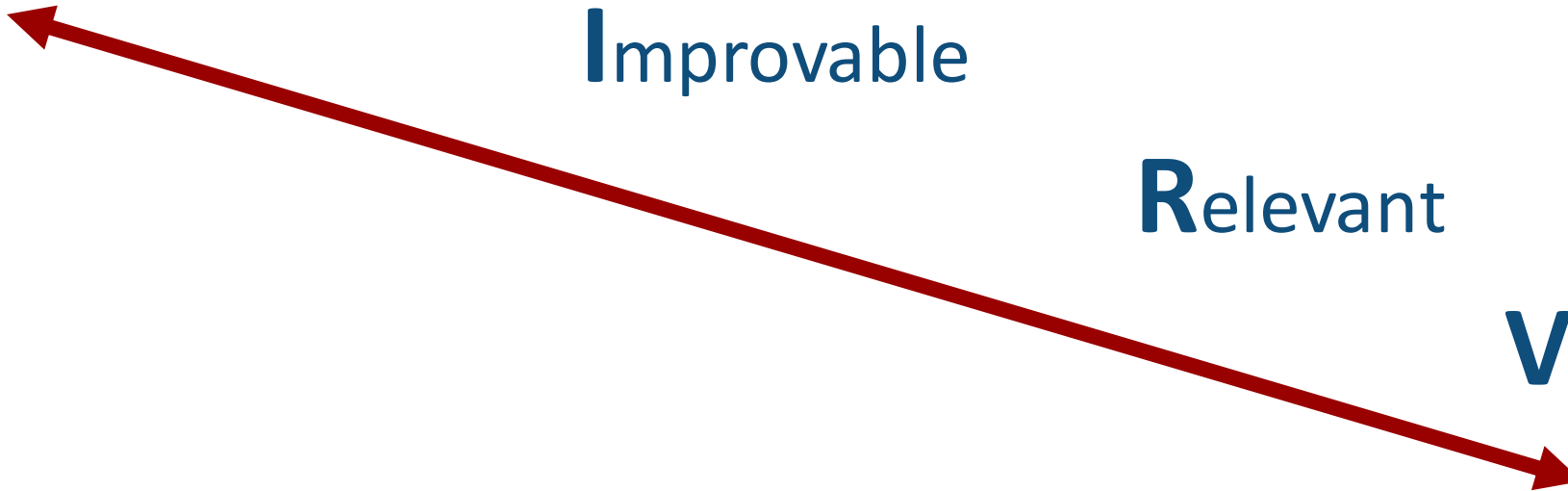
MIVR Value

Measurable

Improvable

Relevant

Valid



Measure Components: Annual Retention in Care

Eligible Patients

- # of patients, regardless of age, with a diagnosis of HIV who had at least one medical care encounter within the 12-month measurement year
- **Patient Exclusions:**
Patients who died at any time during the measurement period

Denominator

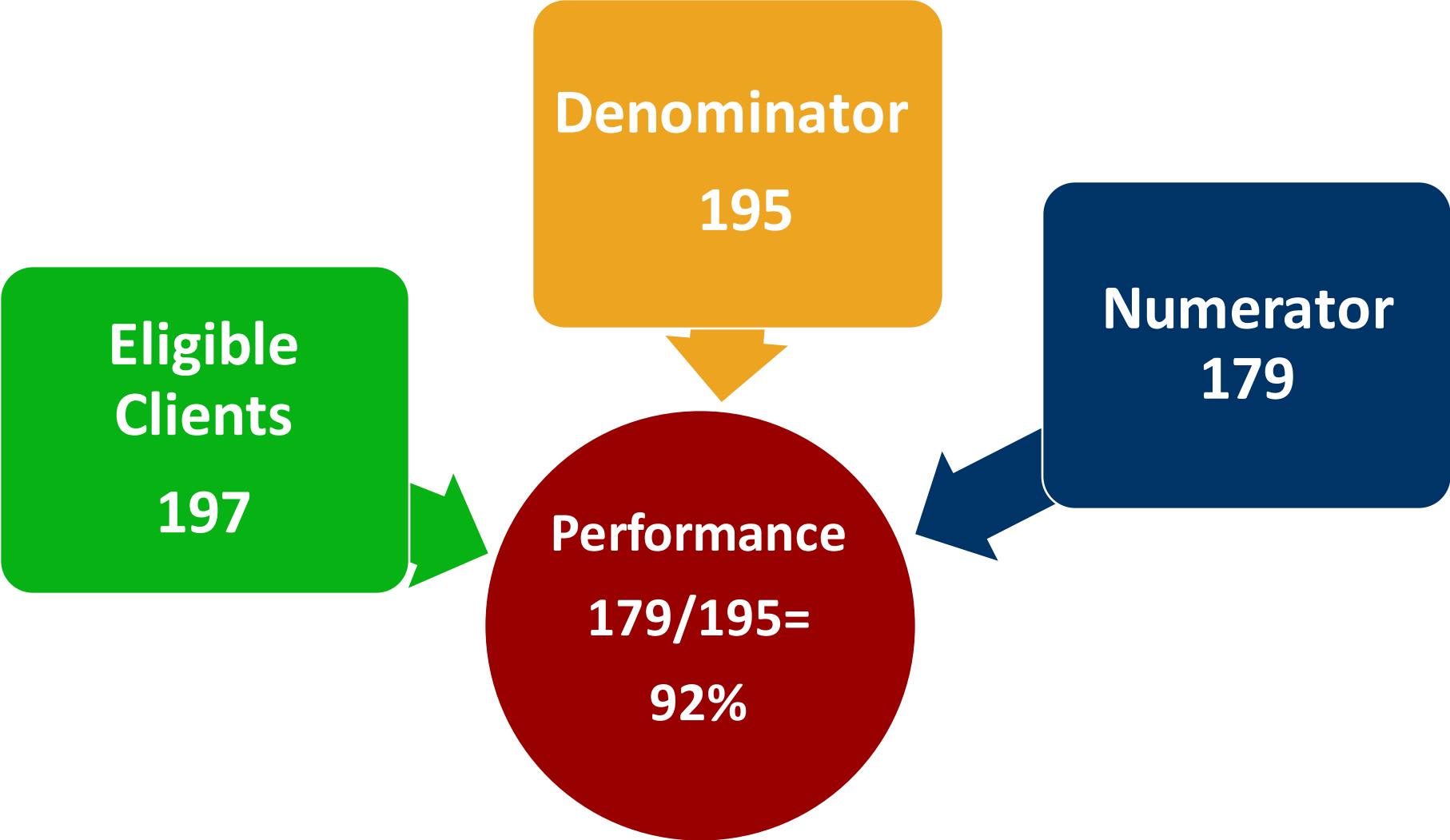
- # of patients, regardless of age, with a diagnosis of HIV who had at least one HIV medical care encounter within the 12-month measurement year

Numerator

- # of patients in denominator, regardless of age, with a diagnosis of HIV who had at least two (2) encounters at least 90 days apart within the 12-month measurement year



Measure Components: Annual Retention in Care (cont.)



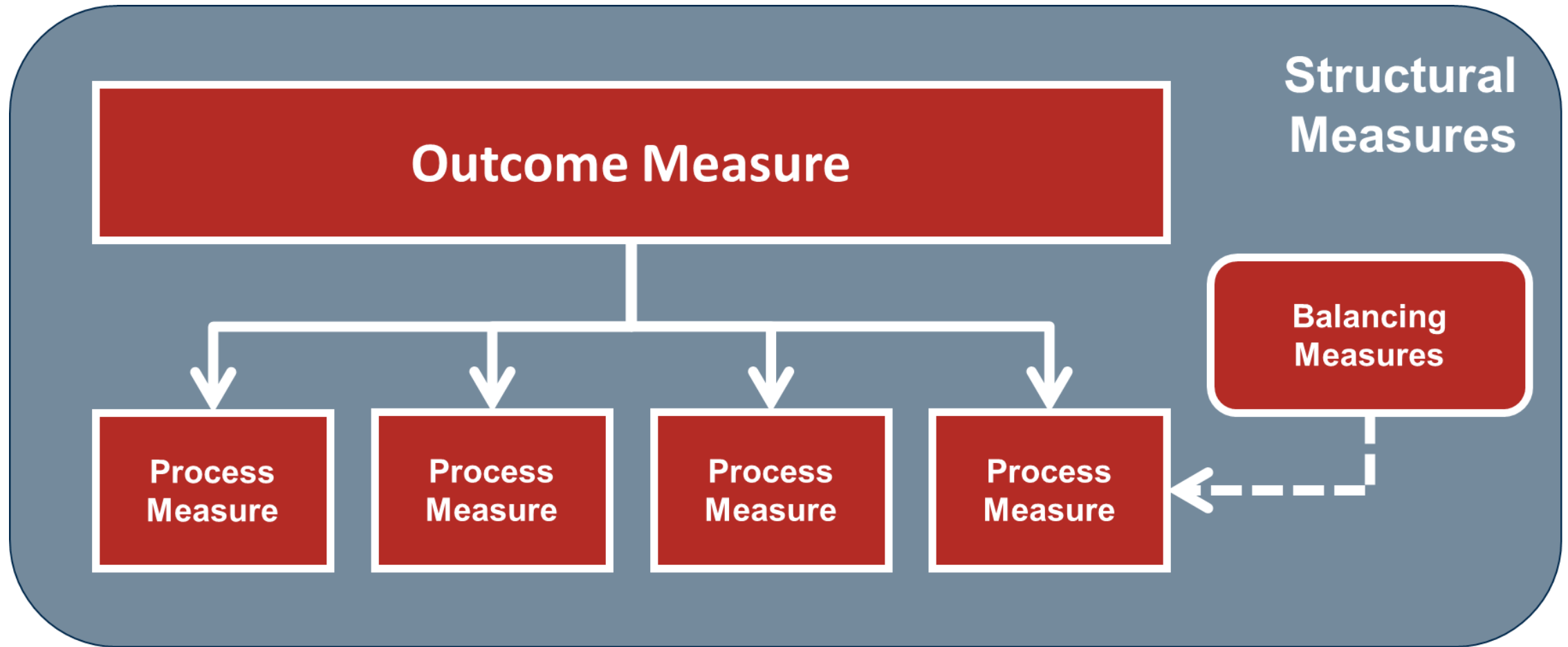
Example: Stratifying Performance Measure Data

Age Stratification	Numerator	Denominator	Percentage
Total	179	195	92%
<18 years old	0	0	--
18-30 years old	57	65	88%
30-50 years old	46	50	92%
>50 years old	76	80	95%

Performance Measures Creation



4 Types of Measures



Outcome Measures

- Outcome measures: Capture **impact** of the health service or intervention **on health status** of patients.
- Outcome is the result of numerous factors, many beyond providers' control.
 - Risk-adjustment methods—mathematical models that correct for differing characteristics within a population, such as patient health status—can help account for these factors. However, the science of risk adjustment is still evolving.
- **Examples: Share one of yours!**
 - Percentage of clients who are virally suppressed



Process Measures

- Process measures: Indicate **what a provider or the organization does** to maintain or improve health or services for people with HIV.
- They are the evidence-based **best practices** that represent a health system's efforts to systematize its improvement efforts
 - A measure that focuses on **steps** that should be followed to provide good care.
 - There should be some basis (preferably scientific) for believing the process, when executed well, will increase the probability of a desired outcome.
- **Examples: Please share!**
 - Percentage of patients with a diagnosis of HIV prescribed antiretroviral therapy



Structural Measures

- Structural measures: Give a sense of a health care provider's or organization's **capacity, systems, and processes** to provide high-quality care and services.
- **Examples: Can you think of any to share?**
 - Whether the health care organization uses electronic medical records
 - The number or proportion of staff reflecting the community served
 - The ratio of case managers to clients

Balancing Measures

- Balancing measures: Enable a system to monitor any **unintended consequences** (good or bad) of the improvement effort.
- Balancing measures help answer the question, “Are the changes designed to improve one part of the system causing new problems in other parts of the system?”
- Very useful when there is a concern that a change might have an unintended negative consequence.
- **Examples: Give it a try!**
 - Staff satisfaction
 - Client experience of a process the team is aiming to improve



HAB Performance Measures Demo



HAB Performance Measures

<https://ryanwhite.hrsa.gov/grants/performance-measure-portfolio>

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HIV/AIDS Bureau Core Performance Measures
Updated June 2023



NEW: ADAP Measures Updates

ARCHIVED

- ADAP Eligibility Recertification (ARCHIVE)
- ADAP Formulary (ARCHIVE)

REVISED

- ADAP Application Determination (REVISED)
- ADAP Inappropriate Antiretroviral Regimen Components Resolved by ADAP (REVISED)

NEW: ADAP Measures Updates (cont.)

NEW

- Viral Suppression for ADAP Clients
- Loss of ADAP services due to Failure to Confirm Eligibility
- Timely Payment of Health Insurance Premiums
- Enrollment in Health Care Coverage (including Medicaid, Medicare Part D and private health insurance)

Key Takeaways

- Performance measures are integral to your CQM program.
- Identify the minimum required measures for each funded service category.
- Select appropriate measures that are ideally based on the most recent professional knowledge.
- After measures are identified, collect and analyze the data quarterly, at minimum.



Performance Measures Resources

Helpful
Resources
& Links



Performance Measurement (Example)

SERVICE CATEGORY	UTILIZATION DATA	PERFORMANCE MEASURE	DEFINITION	PM QTR 1: 2020	PM QTR 2: 2020	PM QTR 3: 2020	PM QTR 4: 2020	PM QTR 1: 2021
Outpatient/ Ambulatory Health Services: Part A	52%	1. Percentage of Patients on ART	Numerator: Number of patients from the denominator prescribed HIV antiretroviral therapy during the measurement year.	1834/1851 = 99%	1763/1782 = 99%	1732/1747 = 99%	1803/1819 = 99%	1854/1887 = 98%
			Denominator: Number of patients, regardless of age, with a diagnosis of HIV with at least one medical visit in the measurement year.					
			2. Medical Visit Frequency					
		Numerator: Number of clients from denominator, regardless of age, with a diagnosis of HIV who had at least one medical visit in each six month period of a 24 month reporting period with a minimum of 60 days between visits.	682/1283 = 53%	628/1287 = 49%	639/1302 = 49%	636/1301 = 49%	604/1269 = 48%	
		Denominator: Number of clients, regardless of age, with a diagnosis of HIV who had at least one medical visit in the first six months of the 24 month reporting period.						
		3. Viral Load Suppression						
		Numerator: Number of patients, in the denominator, with a HIV viral load less than 200 copies/mL at last HIV viral load test during the measurement year	1,557/1,789 = 87%	1,543/1,782 = 87%	1,503/1,747 = 86%	1,564/1,819 = 86%	1630/1887 = 86%	
		Denominator: Number of patients, regardless of age, with a diagnosis of HIV, who received at least one ambulatory outpatient service within the						

Performance Measurement (CQM Plan Checklist)

Content	Present: Yes/No/Partial	Comments
Describe how performance measures are selected and regularly reviewed for relevance, need, etc.		<p>Is client service utilization data used to determine the minimum # of measures required for each RWHAP-funded service category?</p> <p>What is the process to select measures? When does this occur? Who is involved?</p> <p>Are the measures appropriately reflective of RWHAP-funded services?</p> <p>Are the measures relative to the local HIV epidemiology?</p> <p>Do the measures address the needs of people with HIV?</p>

Performance Measurement (CQM Plan Checklist) (cont.)

Content	Present: Yes/No/Partial	Comments
Describe the process to collect performance measure data including engagement of subrecipients.		<p>How are subrecipients involved (if applicable)?</p> <p>What is the primary source of data?</p> <p>What other data management system(s) is (are) used and in what data system is data stored?</p> <p>How is subrecipient data transferred (e.g., all data is entered in one data system, manual entry by recipient staff, etc.)?</p> <p>How is data validated for accuracy, completeness, and timeliness (data quality and integrity)?</p>



HIV Quality Measures (HIVQM) Module

- Tool within the RSR portal that allows recipients to enter aggregate data specific to the HRSA HAB Performance Measures.
- The HIVQM Module allows recipients to conduct point-in-time benchmarking across RWHAPs that use the module.
- Module opens March, June, September, and December
- Additional resources available on [TargetHIV.org](https://www.targethiv.org).

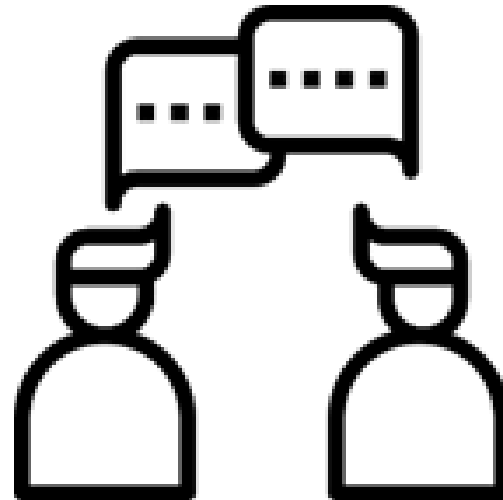


CQM Technical Assistance

To request CQM technical assistance:

Complete the technical assistance request form located at:

<https://www.targethiv.org/ta/cqm>



RWHAP CQM Listserv

- Place for people to:
 - Share ideas and resources
 - Make announcements
 - Ask questions
 - Seek resources
- More information and link to sign up:
<https://ryanwhite.hrsa.gov/grants/quality-of-care>



Questions



Questions are the path to learning

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