

## Completing the HIV Quality Measures (HIVQM) Module : 2019 Features



HIV/AIDS Bureau  
September 24, 2019



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Hello everyone. Thank you for attending this webinar with us today. My name is Imogen Fua and I am with the Ryan White Data Support which some of you may already know of since we also provide technical assistance with the RSR, ADR and other data collections.

Today I am going to talk about the HIV Quality Measures Module or the HIVQM. The Module was created by HAB to give recipients and their subrecipients a tool that better supports them in their assessments of their services and to ensuring that their services are consistent with the Health and Human Services guidelines. The Module is a voluntary data collection -- not a required data collection like the RSR and the ADR -- so it's up to your organization on whether you would like to use the Module.

I know that some of you are probably working on entering your performance measures in the Module right now as this month is one of the reporting periods and we hope that this webinar will help with that. We will have a Q&A at the end of the presentation so we are happy to address any issues you may be having. There are also some new features that we will be talking about today that will prepare you for the next reporting periods such as the import feature and the special access to previous reports.

# Webcast Overview

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Overview of the HIVQM Module and Timeline

Demo: Generating Summary Reports  
Uploading Your .CSV file  
Accessing and editing reports in March

Technical Assistance Resources

Question and Answer

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Let me give you an overview of what we'll be talking about today - I'll be giving you a quick introduction on the Module for those of you who are new, I'll also go over the timeline and the components of the Module.

The bulk of this presentation will be a demo presented by Abhitej Mopuri from REI. REI maintains the Module. Since we have a few exciting features to show you, we thought this would be a good opportunity to actually give you a live demo. First, Abhitej will show you how to generate your reports, – something most of you have probably already done – but this year HAB has released new reports so we will go over those today. Finally, we will demonstrate a new feature where you will now be able to upload a file of your performance measures data rather than entering them manually into the Module. I know for some of you, this feature has been long awaited. Another new feature is being able to access all your reports once a year in March to edit and enter or import data.

Today, we will not go over how to manually data into the Module, but you can look at our previous webinar on the TargetHIV website which I will cite at the end of this presentation.

Lastly, we will go over the technical assistance resources that HAB has available for us, our contact information, as well as written resources such as the HIVQM Manual, which was just also updated and is available on the TargetHIV website.

## What does the Module do?

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- Allows you to enter performance data 4 times a year so you can monitor your progress over time
- Allows access to the previous four reporting periods to edit or enter data.
- Creates your organizational summary reports
- Allows you to compare your performance with other organizations who also enter data in the Module

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Just to give the new folks a bit of an introduction - the Module is accessible via the RSR portal which all recipients and subrecipients should have access to.

Recipients and subrecipients can enter performance measures data 4 times a year so that you can continually monitor your progress throughout the year. I will show you that schedule in a couple of slides.

As I mentioned in March of every year, the system will also now allow you access to the previous four reporting periods to edit or enter data. So if you have any updates or you found some errors in previous reporting periods, you will be able to edit them during this time. You will also be able to enter data for an entire measurement period, if you happened to have missed a reporting month when the Module was open.

After you enter your data, you can immediately generate your organization's summary reports that calculates the percentage of how well you are doing with particular performance measures you entered.

Finally, you can also generate reports that compare your performance with other recipients who have also entered data into the Module. The data is de-identified so no one will know who's data is who's. There are three different kinds of reports that you can generate and download -- and we have some new kinds of reports this year -- which Abhitej will go over in his demo.

# Module Components

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The HIVQM Module consists of three components:

1. Provider Information: pre-populated data taken from the last RSR
2. Performance Measures: 44 clinical measures under nine main categories  
<http://hab.hrsa.gov/deliverhivaidscare/habperformmeasures.html>
3. HIVQM Reports: generate reports of data entered as well as comparison reports with other recipients

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The Module comprises of three parts:

The first part is the Provider Information page. It consists of 4 data elements about the provider. This page will be already populated from your latest RSR so you can just check the information and update any incorrect data. It's basically your caseload number or your total number of unduplicated clients enrolled at the end of the reporting period; your Ryan White funding sources, the type of provider you are – hospital, health department, community based organizations, etc. and then lastly, the data collection system you use.

The second part is the Performance Measures. This is where your performance measures data will be entered or imported. If you are entering your performance measures manually, this is the section where you will do that. I will refer you to the Intro webinar that was done about a year ago as it is still the same. If you are uploading your performance measures – which is a new feature we will be discussing – this is where you will be able to check and see the data you uploaded.

There are 44 clinical performance measures under nine main categories that you can enter or upload. I'm not going to go over these measures, but this link on the slide can give you more details about these measures.

Then the final part is the Reports. This is where you can generate reports – you can choose particular performance measures, a main category, or choose ALL performance measures. You can run a report of your recipient's performance measures and have a side by side comparison with other recipient's data who have entered data. You can compare your performance regionally, nationally and recently, HAB added a state-level comparison. Also a new feature is the Parts Comparison Report where you can compare your data by Ryan White Part.

## Some Things to Know

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### ***Which clients can be included in the HIVQM Module?***

- All clients who receive HIV services, regardless of funding source, can be included in the HIVQM Module

### ***Who enters data in the HIVQM Module?***

- Recipient and sub-recipient who provide HIV services can enter data
- Recipients can complete the HIVQM Module data entry for any of their sub-recipients
- Recipients with funding from multiple Parts only need to enter data once

***Summary Reports only include recipient data entered into the HIVQM Module.***

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So some things to know. Which clients can be entered in the Module? Similar to the RSR, all clients who receive HIV services, regardless of funding source, can be included in the Module. So all of the HIV clients that your recipient provides services to should be included in the HIVQM, regardless of whether they received them with Ryan White funding or not.

The Module is available to recipients and sub-recipients who provide HIV services. Recipients and sub-recipients can enter their own data. But also, recipients can complete the data entry on behalf of their sub-recipients.

Also, those recipients that receive funding from multiple Parts only need to input data once. For example: If a recipient receives Part A and Part C funding, they will only need to input data once and the Part A and Part C recipients can access that data.

One caveat about the summary reports that I mentioned is that they will only include data that are entered into the Module. So the more recipients enter data into the Module, the more representative and useful those reports will be. So HAB strongly encourages recipients to enter data into the Module in that respect.

## HIVQM Module - Timeline

HIVQM Module is open 4 times a year

Measurement year is 12 months except for medical visit frequency measures (24 months)

1 month to enter data

HIVQM Module Opens	HIVQM Module Closes	Measurement Year
September 1, 2019	September 30, 2019	July 1, 2018 – June 30, 2019
December 1, 2019	December 31, 2019	October 1, 2018 – September 30, 2019
March 1, 2020	March 31, 2020	January 1 – December 31, 2019
June 1, 2020	June 30, 2020	April 1, 2019 – March 31, 2020

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This is the reporting timeline. HAB believes that in order to optimally support quality improvement activities, data collection of performance measure should occur quarterly, at a minimum, so the Module will allow data to be entered up to four times a year. Each time, recipients will have one month to enter their data. So during the calendar year, they can enter data during the entire months of March, June, Sept and Dec as shown in this table.

During these months that the Module is open, you will be entering data for a 12 month period for each performance measurement except for the medical visit frequency measure, which is 24 months.

So, for this month of September, when the Module is open, you should only enter performance measure data for the 12 month period of July 1, 2018 – June 30, 2019. But, as I mentioned, March is the only time you can go back to the previous 4 reports and edit and enter data.

So that's the intro to the Module. I will now turn it over to Abhitej who will demo all the new exciting features that we hope will make entering and creating reports more helpful in monitoring your successes. So, let me now switch presenters....

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DEMO

# Technical Assistance Resources

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**TargetHIV:** <https://www.targethiv.org/searches/hivqm>

- Webinars:
  - Introduction to the HIVQM Module Webinar
  - Completing the HIVQM Module: 2019 Features
  
- 2019 HIVQM Module Instruction Manual - NEW

**HAB Email:** [RWHAPQuality@hrsa.gov](mailto:RWHAPQuality@hrsa.gov)

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Great, thank you, Abhitej. WE hope that you are all really excited about these features as much as we are. Before we go open up the webinar to answer your questions, I just wanted to show you what technical resources are available to you. The TargetHIV website is your source for HAB information and technical assistance, including the HIVQM Module. This link will bring you to the resources that are available. You will find the earlier webinar which will include how to enter your data manually. Today's webinar will also be posted in a couple of weeks including the Q&A portion.

We have also updated the HIVQM Manual which is also on the TargetHIV website and it explains everything that we went over today and more.

Finally, we have a HAB email to which they can direct questions on performance measures and other programmatic data collection questions. This email address is monitored daily.

## Technical Assistance Resources

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Ryan White Data Support (WRMA/CSR):

- (888) 640-9356
- [RyanWhiteDataSupport@wrma.com](mailto:RyanWhiteDataSupport@wrma.com)

HRSA Hel Desk:

- (877) Go4-HRSA (877) 464-4772
- <http://www.hrsa.gov/about/contact/ehbhelp.aspx>

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Finally, there are two help centers for you to call if you need technical assistance. Of course, there's us - the Ryan White Data Support. We can answer questions on navigating the Module and help with resolving any system errors. You can also call us if they have any questions on the Manual and really just give us a call if you have any question. If we can't answer it, we'll point you in the right direction or help you find the answer.

And finally, they can contact the HRSA Contact Center for help with the EHBs, such as setting up user accounts or navigating the system.