Running the
HAB QM INDICATORS REPORT
in ARIES

PCP Prophylaxis

OPR Measure #3

ACCESSING THE REPORT

< Back	Home	Find	New	Reports	Shortcuts	Help	Logout

DEMO **DEMO** **DEMO** Client **DEMO** **DEMO** **DEMO**

Services
Finance ports
Management /AIDS Services to an XML file (for 2009 and later)
Cross Tab Wizard
Compliance

Click on **Compliance** under the **Reports** menu

Ryan White HIV/AIDS Program Annual Data Report — Displays the HRSA RDR Report (for 2007 and later)

CARE Act Data Report — Displays the HRSA CADR Report (for 2006 and earlier)

WICY — Displays services and totals for Women, Infants, Children and Youth

HAB QM Indicators Report

Select the **HAB QM Indictors Report** link

SELECTING FILTERS

DEMO   **DEMO**   **DEMO**   **DEMO**   **DEMO**   **DEMO**   **DEMO**

HAB QM Indicators Filters

Enter a range that is at least a year apart

Report Period Between 7/1/2010 ▦ **and** 6/30/2011 ▦

Select your agency

Agency or Administrative Agency CA Sample Provider Agency ▾

Funding Source CA State Office of AIDS ▾

Select these options for Funding Source and Program if running the report just for the HIV Care Program (RW Part B).

Program Ryan White ▾

Age ▾

Race ▾

Gender ▾

Group 1 (Select All)
- ☐ Medical Visits (OPR Measure 1)
- ☐ CD4 T-cell count (OPR Measure 2)
- ☑ PCP Prophylaxis (OPR Measure 3)
- ☐ HAART (OPR Measure 12a)
- ☐ ARV Therapy for Pregnant Women (OPR Measure 17)

Select the indicator(s) you want included in the report.

Group 2 (Select All)
- ☐ Adherence Assessment & Counseling (OPR Measure 13)
- ☐ Cervical Cancer Screening (OPR Measure 4)
- ☐ Hepatitis B Vaccination (OPR Measure 10)
- ☐ Hepatitis C Screening (OPR Measure 7)
- ☐ HIV Risk Counseling (OPR Measure 14)
- ☐ Oral Exam (OPR Measure 15)
- ☐ Syphilis Screening (OPR Measure 5)
- ☐ TB Screening (OPR Measure N/A)

Display 1000 **results** ☐ Display print format

Click **Report.**

Report >   **Export**

READING THE REPORT

HAB QM Indicators

QM Indicator	Numerator / Denominator	Percentage	
PCP Prophylaxis (OPR Measure 3): Percentage of clients with HIV infection and a CD4 T-cell count below 200 cells/mm3 who were prescribed PCP prophylaxis	7 / 9	77.78%	QM Client Follow-Up

Criteria: Reporting Period: Between '7/1/2010 12:00:00 AM' and '6/30/2011 12:00:00 AM'; Agency ID: 1500000153; Funding: CA State Office of AIDS; Program: Ryan White

This report was based on data generated at 10/20/2011 11:06:50 PM.

As defined by HRSA, the **Denominator** is the number of HIV-positive clients who had at least one medical visit with "a provider with prescribing privileges [i.e., MD, PA, NP] in an HIV care setting [i.e., Ryan White funded]" during the reporting period AND who had a CD4 T-Cell Count below 200 cells/mm^3 during the reporting period.

The **Numerator** is the number of clients from the Denominator who were prescribed PCP Prophylaxis during the reporting period.

DEFINING THE DENOMINATOR

✖ Clients must be HIV-positive to be included in Measure 3. This can be determined by any of these fields:

DEFINING THE DENOMINATOR

✖ Clients must also have:

➕ Been enrolled in your agency three months or longer as of the end of the reporting period based on Agency Enrollment Date.

➕ Had at least one service (any type) at your agency **and** one "flagged" medical service at any agency during the reporting period. Flagged services include:

Ryan White - Primary Service	Secondary Services	
Outpatient/Ambulatory Medical Care	• Outpatient/ Ambulatory Medical Care • Follow-Up Visit • Infectious Diseases • Medication	• Neurology • Ob/Gyn • Oncology • Other Specialty • Urgent Care Visit

➕ Had a CD4 T-Cell test with a result below 200 cells/mm^3 during the reporting period (at any agency)

➕ <u>Not</u> retested within three months with a result <u>above</u> 200 cells/mm^3

DEMO   DEMO

Fitch F Cooper Medical History

TESTS

CD4 Date ✳	T Cell Count ✳	%
1/1/2011	144	

Edit

New

DATA CONSIDERATIONS

× If you think the Denominator is lower than it should be, you may want to:

+ Check that your clients' HIV status information is up-to-date. Running the **Fix-It: CDC Disease Stage** report (under Reports > Client) will help identify clients with missing or incorrect CDC Disease Stages.

+ Check that all their services – particularly the "flagged" medical services – have been entered completely and timely.

+ Be sure that the date the service was provided – not the date of entry – is being entered on the Services Screen.

+ Check that all their CD4 tests have been entered accurately. Running the **Fix-It: CD4 and Viral Load** report (under Reports > Client) will help identify clients with missing CD4 tests.

× Remember that newly-enrolled clients won't show up in the Denominator because HAB excludes clients enrolled during the last three months of the reporting period for Measure 3.

DEFINING THE NUMERATOR

✖ Clients are considered as meeting the measure if they have an **Other Medications** record indicating PCP Prophylaxis during the reporting period.

Fitch F Cooper Other Medications

Other Medications ✳	Prescribed by	Used for ✳	Type ✳	Start/End Date ✳	Dosage
Mepron (atovaquone) (d01120)	Dr. Doctor	PCP	Prophylaxis	1/1/2011 - no end	

1. The record must be for one of the following drugs:

   Bactrim (sulfamethoxazole-trimethoprim) (d00124)

   Dapsone (dapsone) (d00098)

   Mepron (atovaquone) (d01120)

   Nebupent (pentamidine) (d00030)

2. The **Used For** field must contain the text "PCP" (manual entry, not case-sensitive)
3. The **Type** field must have the value "Prophylaxis" selected from the dropdown
4. The **Start Date** must be within or prior to the reporting period
5. The **End Date** must be within or after the reporting period, or blank

DEFINING THE NUMERATOR

❌ Clients who were in the Denominator but did <u>not</u> meet the criteria for the Numerator may be viewed by clicking the QM Client Follow-Up button.

DATA CONSIDERATIONS

✖ Look up the Other Medications screen for those clients who are listed on the **QM Client Follow-Up** report in ARIES.

  ✚ Verify that PCP Prophylaxis was entered using one of the four authorized drugs.

  ✚ Check that the text "PCP" appears in the **Used For** field and is spelled correctly.

  ✚ Make sure that "Prophylaxis" is selected from the **Type** dropdown.

  ✚ Confirm that the **Start/End Dates** cover some portion of the reporting period.

✖ Re-run the **HAB QM Indicator Report** for Measure 3 at least one day after you have entered any missing or incorrect data. You should see the percentage improve and fewer (no) clients on the **QM Client Follow-Up** report.

EXPORTING QM DATA

✖ Some providers may find it more helpful to export the QM data for client follow-up or data analysis. There are two types of exports available.

✖ The first export includes all the clients who were in the Denominator. The export file includes a flag identifying which clients were in the Numerator, as well as additional demographic data. To export this data, click Export on either Filter or Summary Report screens.

	A	B	C	D	E	F	G	H	I	J
1	Period Start Date	Period End Date	InNumerator	URN Extended	Age	Gender	County	ZIP	Race	Primary Language
2	7/1/2010 0:00	6/30/2011 0:00	1	FTCO0701721FMN	38	Male	San Diego	92103	Hispanic	Spanish
3	7/1/2010 0:00	6/30/2011 0:00	1	EINR0516001EMN	111	Male	Lassen	93130	White	English
4	7/1/2010 0:00	6/30/2011 0:00	0	WLWI1005581WMN	52	Male	San Mateo	95831	Hispanic	English
5	7/1/2010 0:00	6/30/2011 0:00	1	JCSE0501751JMN	36	Male	Sacramento	93703	More than one race	English
6	7/1/2010 0:00	6/30/2011 0:00	1	JCPY0515662JMN	45	Female	Sacramento	95758	Hispanic	English
7	7/1/2010 0:00	6/30/2011 0:00	0	NNBT0701692NMN	41	Female	San Diego	92103	White	English
8	7/1/2010 0:00	6/30/2011 0:00	1	SLBT0701901SMN	20	Male	Fresno	93721	Black or African American	English
9	7/1/2010 0:00	6/30/2011 0:00	1	MGSM0815102MBU	0	Female	Lassen	96130	White	Other
10	7/1/2010 0:00	6/30/2011 0:00	1	RGSE0507301RMN	81	Male	Riverside	93704	More than one race	Unknown
11										
12										

EXPORTING QM DATA

× The second export includes only the clients who were listed on the Follow-Up Report (in the Denominator but not in the Numerator). To export this data, first click on the desired QM Client Follow-Up button on the Summary Report screen, then click the Export button on the Follow-up Report screen.

FOR MORE INFORMATION

✖ If you need help accessing, running, or exporting the HAB QM Indicators Report, please:

+ Consult *The ARIES Advisor* (October 2008) posted under Newsletters at www.projectaries.org.

+ Call the ARIES Help Desk at 1-866-411-ARIES (2743).

✖ For information on the **CDC Disease Stage Fix-It Report** or the **CD4 and Viral Load Fix-It Report**, go to www.projectaries.org and click on Training > Focused Technical Assistance.