



Running the

HAB QM INDICATORS REPORT

in ARIES

ACCESSING THE REPORT

The screenshot shows a web application interface with a navigation menu at the top. The menu items are: < Back, Home, Find, New, Reports, Shortcuts, Help, and Logout. The 'Reports' menu is expanded, showing the following options: Client, Services, Finance, Management, Cross Tab Wizard, and Compliance. The 'Compliance' option is highlighted in orange. Below the menu, there is a list of reports with their descriptions:

Report Name	Description
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	

Two orange arrows are overlaid on the screenshot. One arrow points from the left towards the 'Compliance' option in the 'Reports' menu. The other arrow points from the right towards the 'HAB QM Indicators Report' link in the main content area.

Click on Compliance under the Reports menu

Select the HAB QM Indicators Report link

SELECTING FILTERS

< Back Home Find New Reports Shortcuts Help Logout

DEMO DEMO DEMO DEMO DEMO DEMO DEMO

HAB QM Indicators Filters

Report Period Between 5/1/2010 and 4/30/2011

Agency or Administrative Agency CA Sample Provider Agency

Funding Source CA State Office of AIDS

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 12b)

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

Report > Export

Enter a range that is at least a year apart

Select your agency

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

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

Click Report.

READING THE REPORT

< Back Home Find New Reports Shortcuts Help Logout

DEMO DEMO DEMO DEMO DEMO DEMO DEMO

HAB QM Indicators

QM Indicator	Numerator	Percentage
	Denominator	
Medical Visits (OPR Measure 1): Percentage of clients with HIV infection who had two or more medical visits in an HIV care setting in the measurement year	6	66.67%
	9	

[QM Client Follow-Up](#)

Criteria: Reporting Period: Between '5/1/2010 12:00:00 AM' and '4/30/2011 12:00:00 AM'; Agency ID: 1500000153; Funding: CA State Office of AIDS; Program: Ryan White

This report was based on data generated at 5/23/2011 11:05:53 PM.

[Export](#)

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.

The **Numerator** is the number of clients from the Denominator who had two or more medical visits **at least three months apart** during the reporting period.

DEFINING THE DENOMINATOR

- ✘ Clients must be HIV-positive to be included in Measure 1. This can be determined by any of these fields:

DEMO DEMO DEMO DEMO DEMO DEMO DEMO

Don S Draper Basic Medical (check the client's CDC Disease Stage)

Name

Primary Med Care

Primary HIV Care

CDC Disease Stage *

Date First HIV+ Year First HIV+

AIDS Diag Date * County State

A CDC Disease Stage of:

- HIV positive, disease stage unknown
- HIV positive, asymptomatic
- HIV positive, symptomatic, not AIDS
- HIV positive, disabling
- CDC-Defined AIDS
- Disabling AIDS

HIV TESTS

HIV Test Date *	Result	County	Counseling	Post-test Counseling

AIDS DEFINING CONDITIONS

AIDS Defining Condition *	Diagnosis Date *	Treatment Date

New

New

If the date is on or before the end of the reporting period for (1) **First HIV+**, (2) **AIDS Diagnosis**, or (3) any **AIDS Defining Condition**, the client is counted as HIV-positive.

DEFINING THE DENOMINATOR

- ✘ Clients must also have:
 - + Been enrolled in your agency six months or longer as of the end of the reporting period based on the Agency Enrollment Date on the Agency Specifics screen.
 - + Had at least one service (any type) at your agency **and** one “flagged” medical service at any agency during the reporting period.
- ✘ Note that only certain secondary services meet HAB’s definition of “medical visits.” The following services are flagged for QM in ARIES:

Ryan White - Primary Service	Secondary Services	
Outpatient/Ambulatory Medical Care	<ul style="list-style-type: none">• Outpatient/ Ambulatory Medical Care• Follow-Up Visit• Infectious Diseases• Medication	<ul style="list-style-type: none">• Neurology• Ob/Gyn• Oncology• Other Specialty• Urgent Care Visit

- ✘ Note that the Laboratory Services are **not** flagged for QM.



DATA CONSIDERATIONS

- ✘ If you think the denominator for Measure 1 looks lower than you think it should, 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 > Clients) 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.
- ✘ Remember that newly-enrolled clients won't show up in the denominator because HAB excludes clients enrolled during the last six months of the reporting period from Measure 1.

DEFINING THE NUMERATOR

- ✘ Clients are considered as meeting the measure if they have had two or more “flagged” medical services at least three months apart during the reporting period.

HAB QM Indicators		
QM Indicator	Numerator	Percentage
	Denominator	
Medical Visits (OPR Measure 1): Percentage of clients with HIV infection who had two or more medical visits in an HIV care setting in the measurement year	6	QM Client Follow-Up
	9	

Click to see which clients did not meet the measure

QM Client Follow-Up, HAB QM Ind					
Medical Visits (OPR Measure 1): Percentage of clients with HIV infection who did <u>not</u> have two or more medical visits in an HIV care setting in the measurement year					
Client	Age	Race	Gender	Share	Staff
Botwin, Nancy N	41	Not reported	Female	True	
Botwin, Silas S	20	Not reported	Male	True	
Shephard, Jack J	35	Not reported	Male	False	

3 records, generated 5/24/2011 11:59:34 AM
 Criteria: Reporting Period: Between '5/1/2010 12:00:00 AM' and '4/30/2011 12:00:00 AM'; Agency ID: 1500000153; Funding: CA State Office of AIDS; Program: Ryan White
 This report was based on data generated at 5/23/2011 11:05:53 PM.

[Export](#)



DATA CONSIDERATIONS

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

- ✘ Review the services that were provided during the reporting period.
 - + If there are any “flagged” medical services that have not been entered, please enter them with the correct date of service.

 - + If a “medical visit” occurs on the same day as a Laboratory Service, enter both services not just the Laboratory Service.

- ✘ Re-run the **HAB QM Indicator Report** for Measure 1 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.

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**, go to www.projectaries.org. > Training > Focused Technical Assistance.