

Louisiana HIV Clinical Quality Group

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STD/HIV PROGRAM

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Louisiana HIV Clinical Quality Group

- Previous Iterations of Statewide CQG
- Most Recent Chapter
 - Established in 2013
 - Ryan White Cross-parts participation
 - National Quality Center Coach recognized and assessed the need for regional group
 - Supporting/Planning Committee agencies
 - Louisiana OPH STD/HIV Program
 - LSU HIV Outpatient Clinic
 - CrescentCare (NO/AIDS Task Force)

Objectives of LHCQG

- Promote **data sharing and strategies**
- Improve **patient care** through quality improvement efforts
- Identify and promote **improvement strategies** through peer exchange
- **Build, sustain and implement** knowledge of improvement methods and tools to improve patient care
- Promote sustainability through quality management **infrastructure development**
- Build **regional success** through sharing of documents and strategies
- Establish **self-evaluation methodologies** to achieve goals and objectives
- Promote the national quality framework through **speaking engagements** by experts
- Coordinate relevant national, state and local priorities around HIV quality
- Facilitate quality based organizational assessments and program evaluation

What an ideal CQI group looks like

- Core group of RWHAP-funded agencies consistently participate
- Peer learning – sharing of QI needs & strategies
- Consumers routinely involved
- Data used to prioritize QI needs
- Group conducts joint QI projects
- Most members can use basic CQI processes
- Successful strategies documented and accessible to members
- Outline of expectations

Louisiana HIV Clinical Quality Group

- Primary goal – collect and submit data for Performance Measures
- Current PMs include HAB Measures:
 - Core 01: Viral Suppression
 - Core 02: ARV Therapy
 - Core 04: Gap in HIV Medical Visits
- Match Out of Care Lists
- Report trends and barriers to STD testing among PLWH
- Use Lightning Rounds to present brief QI project reports
- Implement additional QI projects as able

QM Plan – Membership/Infrastructure

- Meetings occur quarterly
- Additional subcommittees and conference calls as needed
- Membership inclusion and exclusion criteria
 - include clinical/quality/data experts
- Meetings recorded and notes distributed as Action Plan
- Utilize GlassCubes

<https://nationalqualitycenter.glasscubes.com>

QM Plan – Leadership

- SHP plays central role in leadership
- Group co-led by SHP QM Manager & agency member
- Additional roles filled by agency members
- Roles filled on rolling basis for predefined term

QM Plan – Roles

- Co-leads: central role in planning and conducting meetings
- Data liaison: collects needed data and aggregates it
- Meeting facilitator: facilitates meetings
- Secretary: records minutes at all meetings
- Historian: committed member who provides context & guidance

QM Plan – Discussion

- Questions/Concerns of proposed plan?
- Are there gaps in membership?
- Too many roles? More roles needed?
- Should additional PMs be added?
- What quality measures should be the focus of coming year?
- What skills or resources are lacking at your site for HIV quality improvement work?

Out of Care Initiative

- Participants to define and generate out of care patient list
- Share with SHP program to identify 'true' out of care
- Adopt Gap Measure
 - Percentage of patients, regardless of age, with a diagnosis of HIV who did not have a medical visit in the last 6 months of the measurement year
 - Numerator: Number of patients in the denominator who did not have a medical visit in the last 6 months of the measurement year
 - Denominator: Number of patients, regardless of age, with a diagnosis of HIV who had at least one medical visit in the first 6 months of the measurement year

CrescentCare Out of Care List Nov 2015

Submitted 607 medical records for SHP matching program

Status after matching	Patients
Out of Care	332
In Care Elsewhere	157
In Care at Clinic	30
Deceased	33
Moved Out of State	53



Tulane University Medical Group CD4 Clinic

VIRAL LOAD SUPPRESSION QI PROJECT

1ST QUARTER, 2017

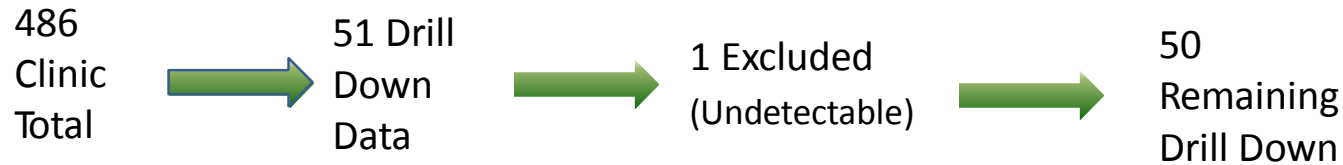
Tulane Medical Center, 1ST Qtr, 2017

560 – Active Patients

486 – Patients with at least one TMC visit in 2016

389 – 80% Viral Suppression goal

338 – 69% of patients virally suppressed



Steps to Viral Load Suppression

Develop list of unsuppressed patients

Develop data collection method

Develop mini Multidisciplinary Team (MDT) meetings every Wednesday to conduct assessment of barriers

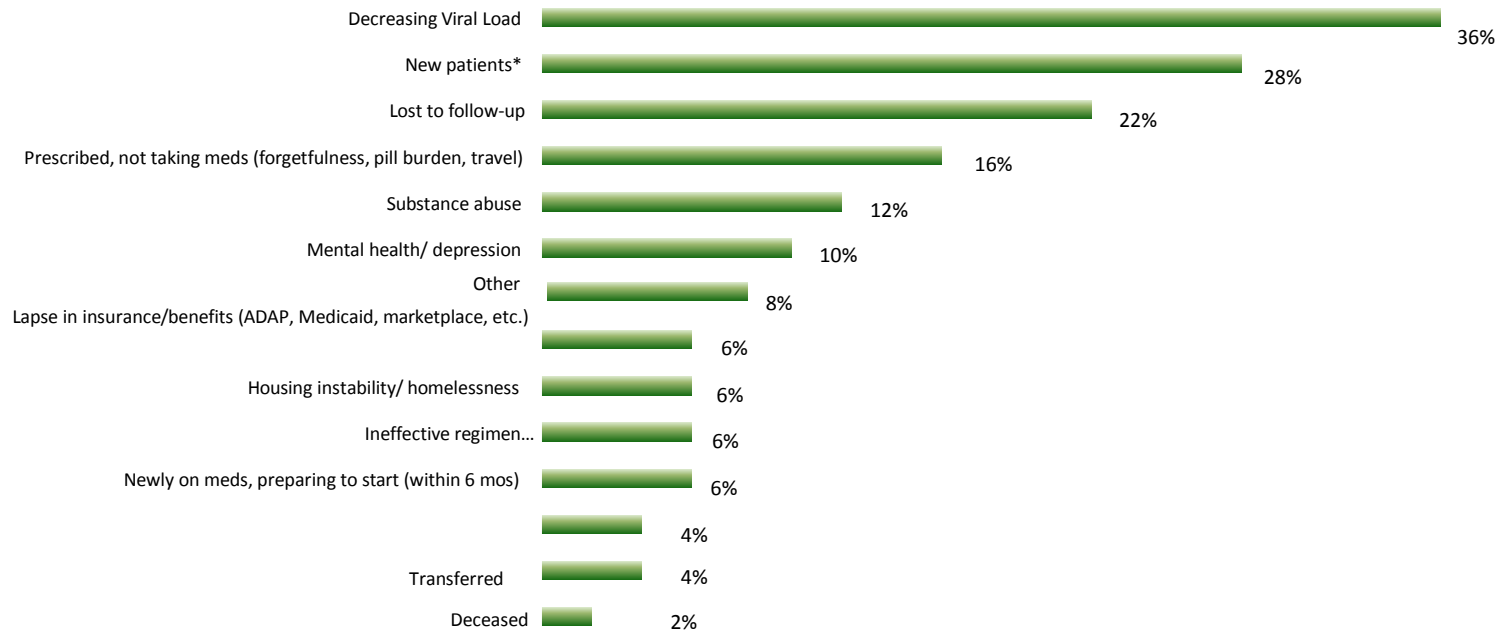
Mini MDT members (Clinic NP, Nurses, Case Workers, OPH Case Finder, Sr. Patient Representative)

Categorize patients by barriers (*Currently where we are at*)

Develop an overall plan per barrier to be narrowed to individual plan per patient if necessary

Barriers to Viral Load Suppression

(N=50)



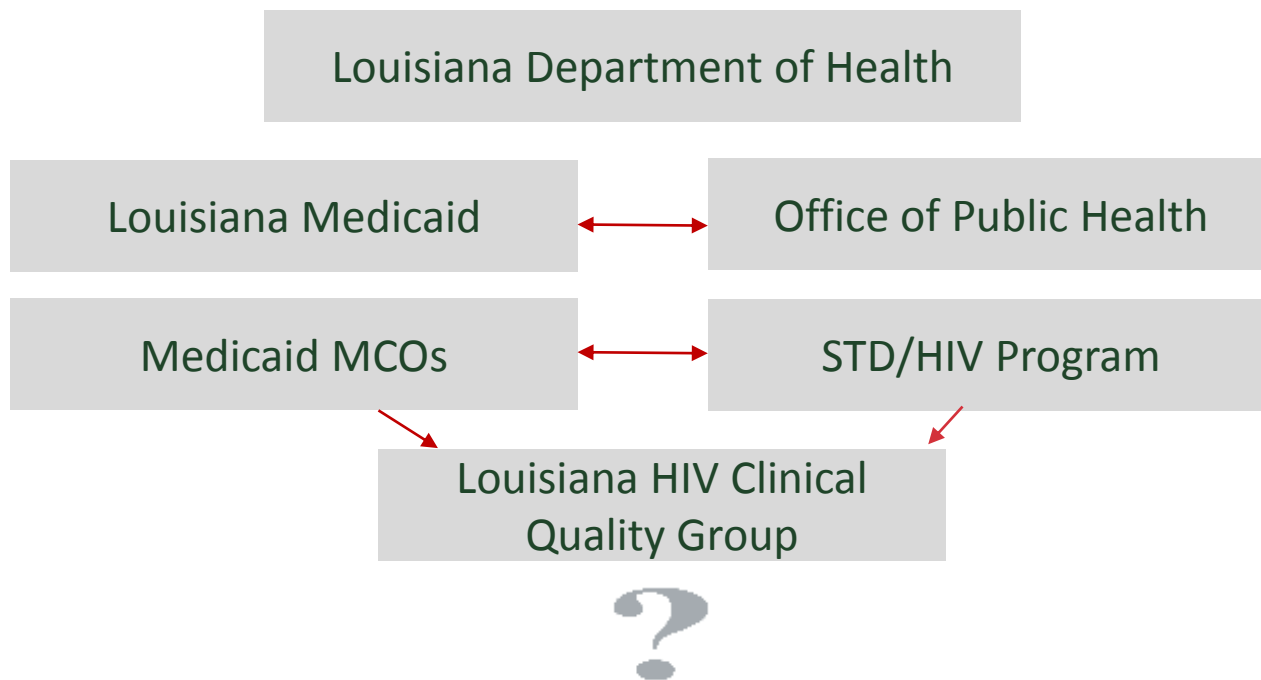
Context: Changes to the Louisiana Healthcare Landscape

- **Louisiana Medicaid**
 - Louisiana Department of Health (LDH) administers the Office of Public Health and Bureau of Health Services Financing (Medicaid)
 - Transition to Managed Care model in 2010
 - Medicaid Expansion began in July 2016
- **Privatization of Louisiana's public hospital network**
 - Louisiana State University (LSU) hospitals provided direct patient care for the majority of state's indigent citizens
 - Provided healthcare for many Ryan White clients
 - In 2012, state officials announced landmark public-private partnership agreements for LSU hospitals
 - Severe disruption of LSU hospital-based HIV care network

Louisiana HIV Clinical Quality Group

- Added value of Medicaid participation at this time:
 - Enhanced understanding of Payer perspective and priorities
 - Clarity on diagnosis codes
 - Provider education resources
 - Data-sharing
 - Increased understanding of HIV care retention and treatment for MCO quality improvement staff participants
- Moving forward
 - Seize opportunities
 - Continued sharing of QI activities
 - CMS HIV Health Improvement Affinity Group

How did Louisiana Medicaid managed care organizations (MCOs) become involved in Ryan White quality initiatives?



Medicaid Viral Suppression Measure

OPH/Medicaid Data Sharing Agreement

- Office of Public Health (OPH) and Medicaid are both part of the Louisiana Department of Health
- OPH and Medicaid signed a data sharing agreement in Feb 2014
- Allows for very broad sharing of data between programs
- Recent challenges with getting access to data due to personnel changes at Medicaid

Medicaid Viral Suppression Measure

- 5 Medicaid MCOs in Louisiana
- Viral load measure included as an incentivized measure in the RFP in 2014
- Based on HRSA HAB Performance Measure



HIV/AIDS Bureau Performance Measures



Performance Measure:	HIV Viral Load Suppression	National Quality Forum #: 2082
Percentage of patients, regardless of age, with a diagnosis of HIV with a HIV viral load less than 200 copies/mL at last HIV viral load test during the measurement year		
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	
Denominator:	Number of patients, regardless of age, with a diagnosis of HIV with at least one medical visit in the measurement year	

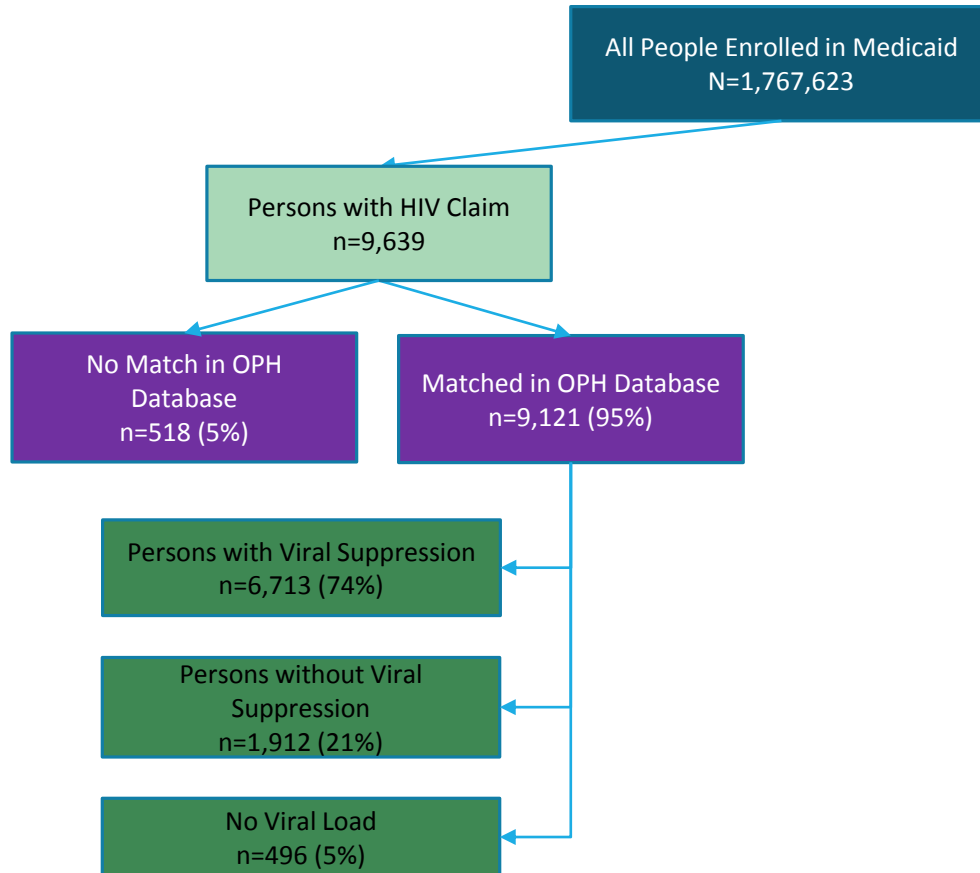
2016 Core Set of Adult Health Care Quality Measures for Medicaid (Adult Core Set):
<https://www.medicare.gov/medicaid/quality-of-care/downloads/medicaid-adult-core-set-manual.pdf>

Medicaid Viral Suppression Measure

- Plans are penalized \$250,000 annually if VL measure is not achieved
- Target set too low (54.3%)
- The VS measure will be included as an incentive measure in the next RFP with a VS target of 75%

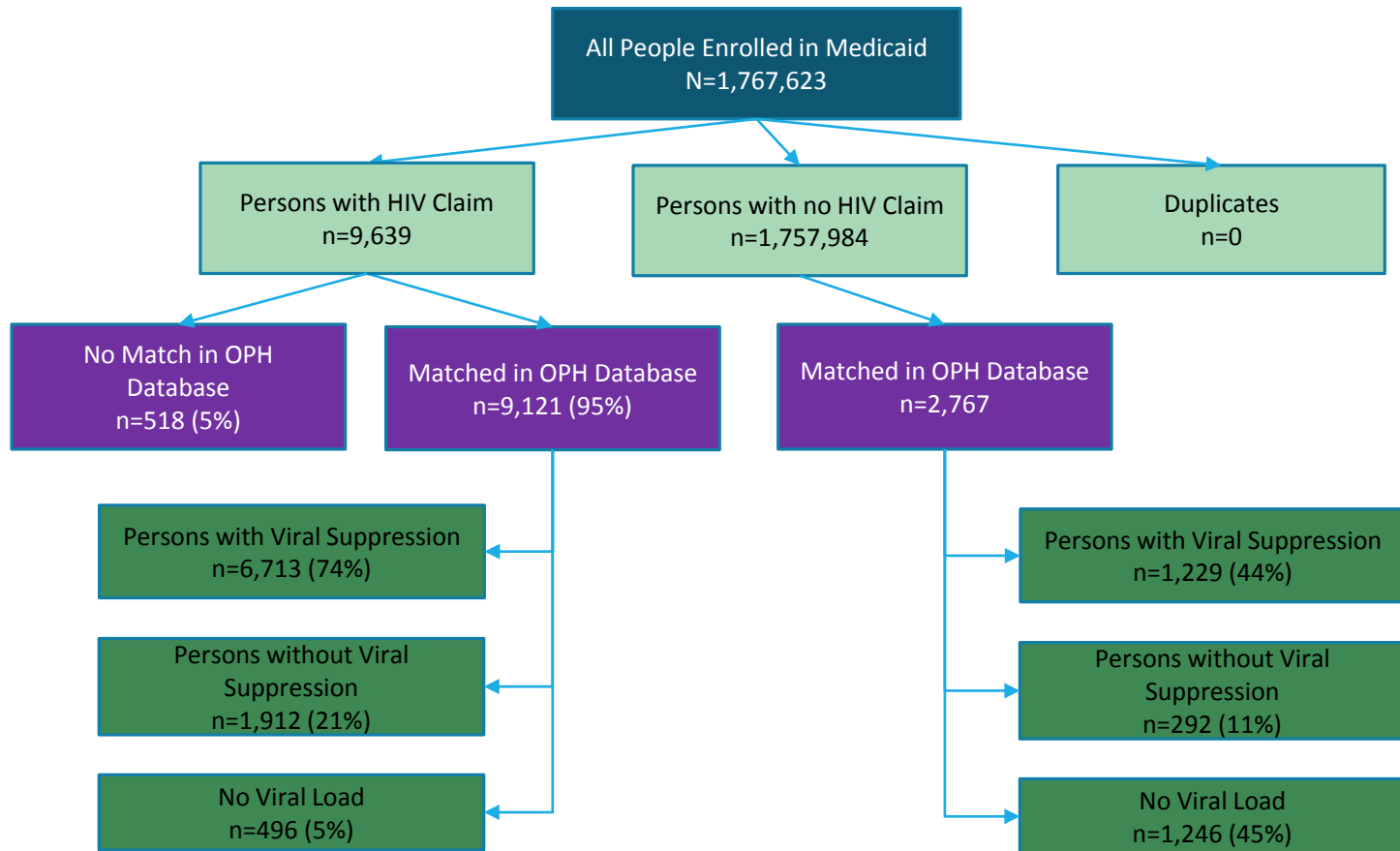
Match Results

July 2016 – June 2017



Match Results

July 2016 – June 2017



Louisiana Public Health Information Exchange (LaPHIE)

Louisiana Public Health Information Exchange (LaPHIE)

- Bi-directional electronic information exchange
- Uses Office of Public Health (OPH) surveillance data to generate point of care messages for providers at hospitals
 - Once it was established, LaPHIE was implemented in eight public hospitals
- Includes persons living with HIV who have fallen out of care or never received test results and HIV-exposed infants needing follow-up

LaPHIE - Surveillance Data Inputs



- HIV Surveillance Database
- Laboratory Database

*Filtered dataset after
business rules applied*



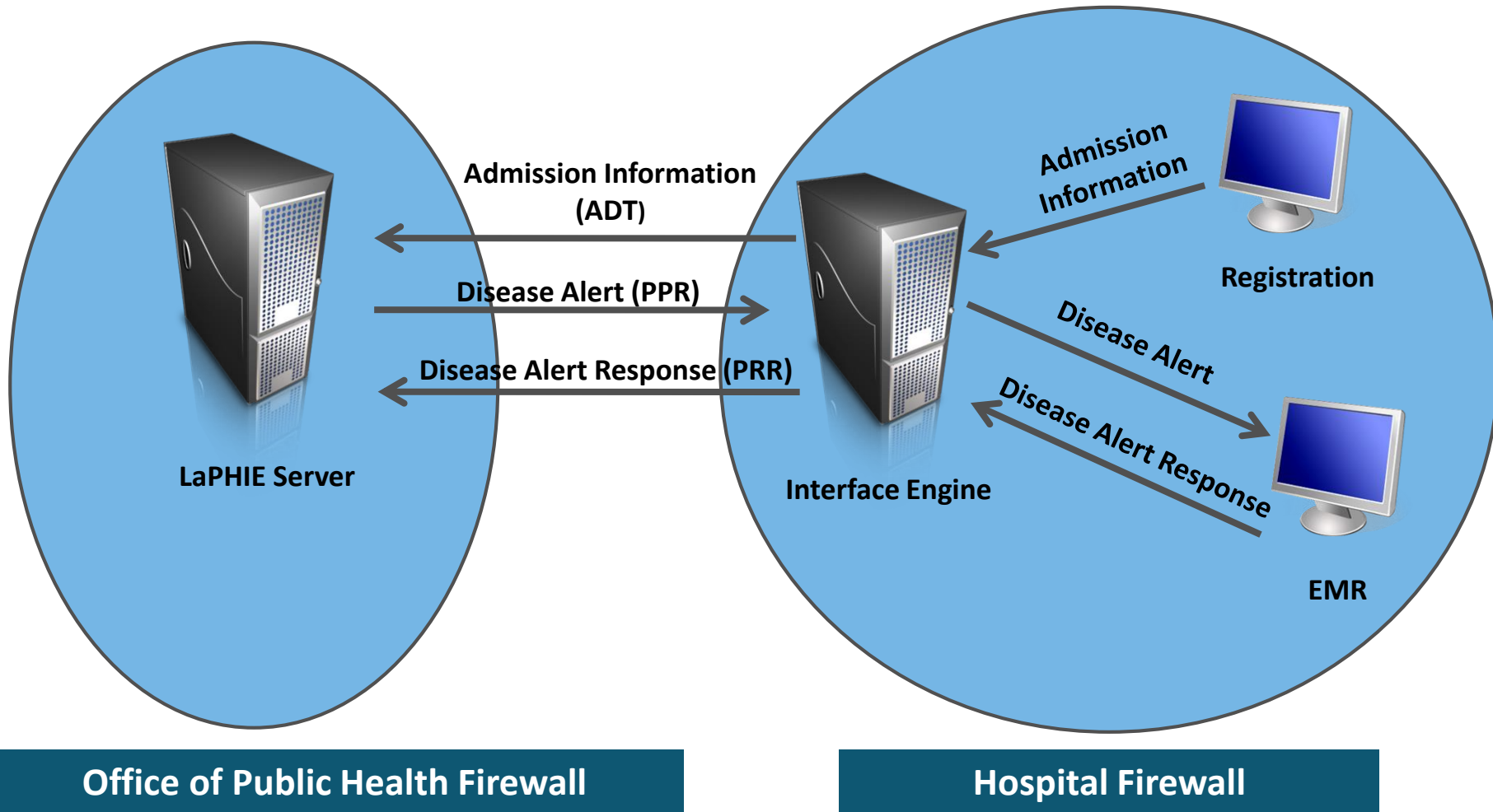
LaPHIE Server

- LaPHIE Database
- Communication system:
MIRTH – open source
(behind OPH firewall)

Target populations:

- Persons considered “not in care”
(no record of CD4/VL in 9 months)
- Persons who have not received test
results and may be unaware of HIV status
- HIV-exposed infants in need of follow-up

LaPHIE – Data Flow



How LaPHIE Works...



Patient comes to clinic, hospital, or ED for any service



Real time communication with surveillance system alerts physician that patient needs attention for HIV



Patient Summary

Last Inpatient Admission: 12/19/2008

CBC	CHEM	ESR	LFT	LIPID	TSH	U/A	CXR
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QuickView - Mouse over buttons above for quick view of most recent results for these test types



Patient may require follow up for an infectious disease. [\(Click here to take action.\)](#)

How LaPHIE Works...

Patient may require follow up X

Details: Intervention Needs for HIV

The Louisiana Office of Public Health records indicate that this patient has HIV, but does not appear to have accessed HIV-related medical care in at least the last 12 months. No CD4 or viral load test results have been received by OPH from public or private laboratories.


Please proceed with the Recommended Actions for intervention.

Recommended Actions	Actions Taken
Assess need for intervention	<p>Please check the actions that you are completing with the patient. Some actions may already contain a check indicating completion by another provider. Other actions may not apply and can be left blank. Please hit SAVE once you have completed your actions.</p> <p><input checked="" type="checkbox"/> Discussed OPH message and need for treatment with the patient</p> <p><input checked="" type="checkbox"/> Re-ordered confirmatory Western Blot</p> <p><input type="checkbox"/> Assessed stage of illness</p> <p><input type="checkbox"/> Scheduled follow up appointment</p> <p><input type="checkbox"/> Counseled pregnant patient (if needed)</p> <p><input type="checkbox"/> Documented patient report of receiving treatment at another site</p> <p><input type="checkbox"/> Confirmed patient is not interested in treatment at this time</p>
Offer education	
Assess patient and need for treatment	
Initiate treatment and monitoring plan	
Verify pregnancy or breastfeeding status	

Mouse over Recommended Actions and Actions Taken for more details

Comments:

[CDC Website...](#) Save



DELTA REGION
AIDS Education &
Training Center
Louisiana

The Delta AIDS Education & Training Center is available for training regarding HIV/AIDS at 504-903-0788; any questions about HIV/AIDS can also be addressed by calling 504-903-0623

How LaPHIE Works...

Physician follows on-screen steps to re-engage patient into care and provide HIV treatment, as appropriate



Patient attends appointment to receive HIV-related care

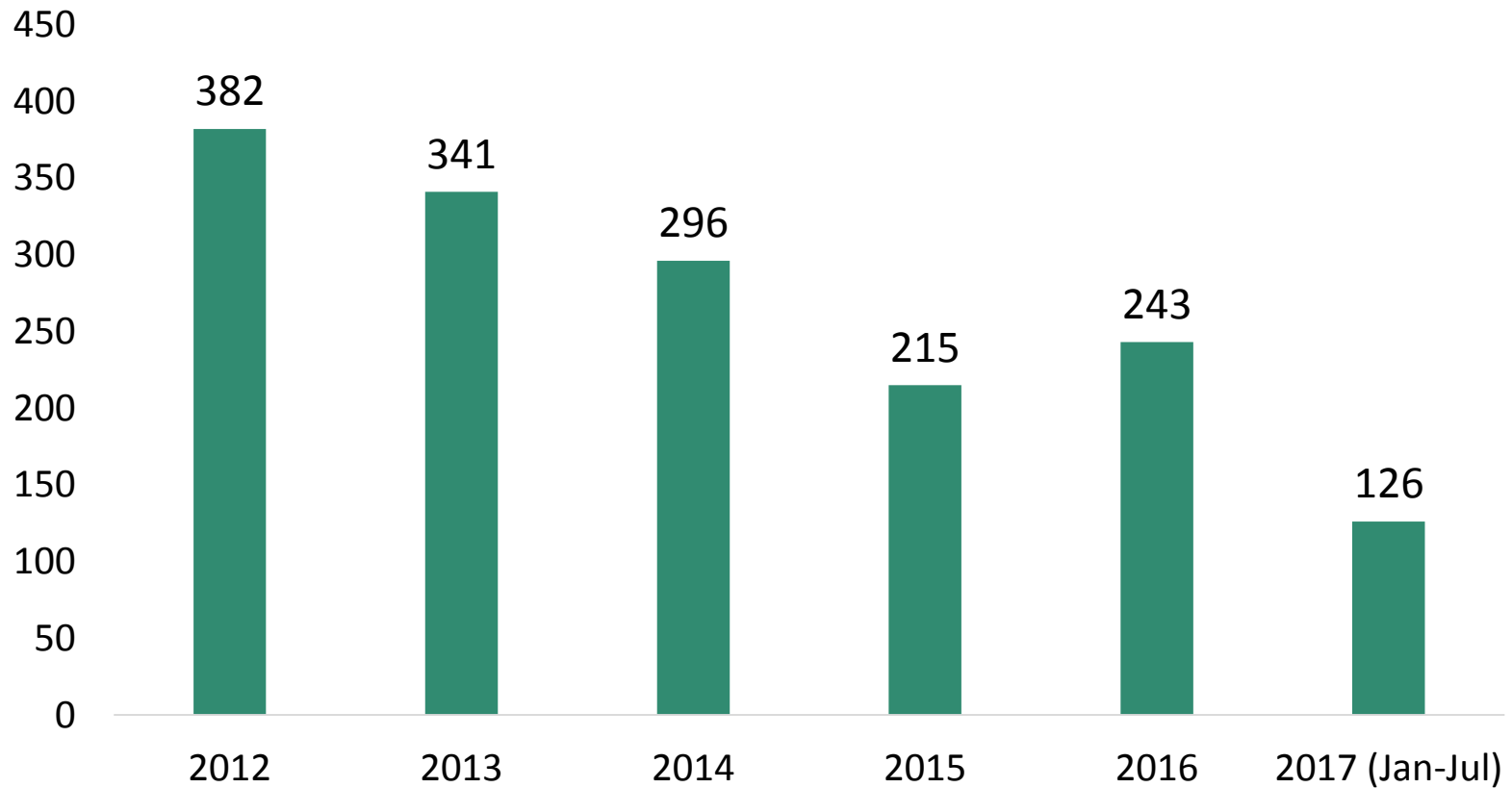


Expansion and Systemic Changes

- SPNS Linkages Award – 2011
 - Funded to replicate LaPHIE in a large private hospital in Baton Rouge
 - Administrative challenges when public hospital closed in April 2013 and hospital assumed operations
 - Successfully launched in August 2015
- Public/Private Hospital Partnerships – 2013
 - Nine of ten public hospitals were transitioned to the private sector or closed
 - LaPHIE is currently operating in two of the former public hospitals (New Orleans and Independence)

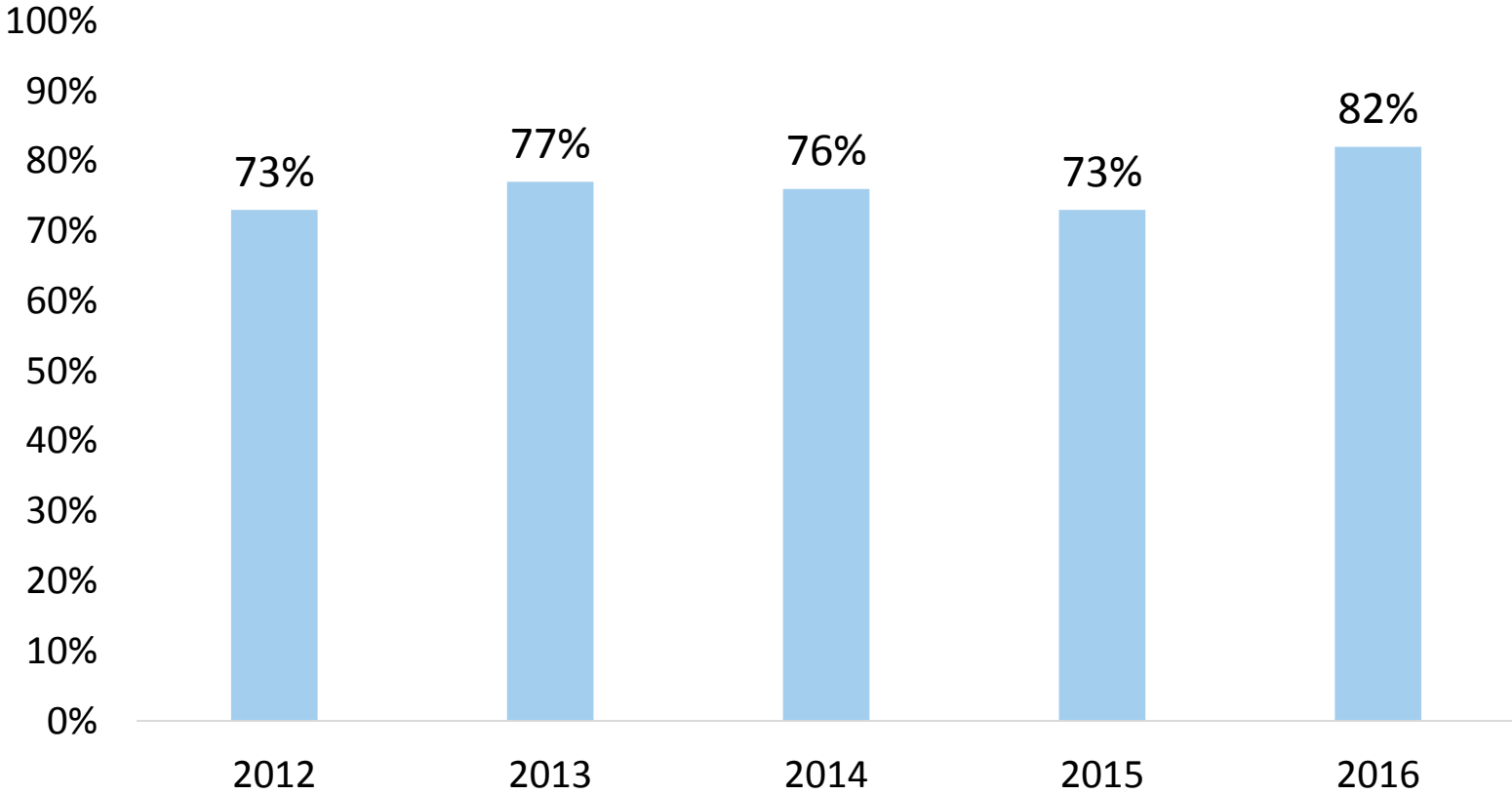
LaPHIE Results

No. of People who Received an Alert



LaPHIE Results

% Linked to Care within 90 Days



Step-by-Step Creation of a PHIE

1. Define Persons of Interest
2. Establish Criteria for Out of Care Data Set
3. Build an Out of Care Data Set
4. Design an HL7 Interface between Hospital and the Health Department and Test System
5. Establish Referral Process
6. Establish Monitoring System
7. Identify PHIE Users and Roles
8. Train Clinical Providers

Future of LaPHIE

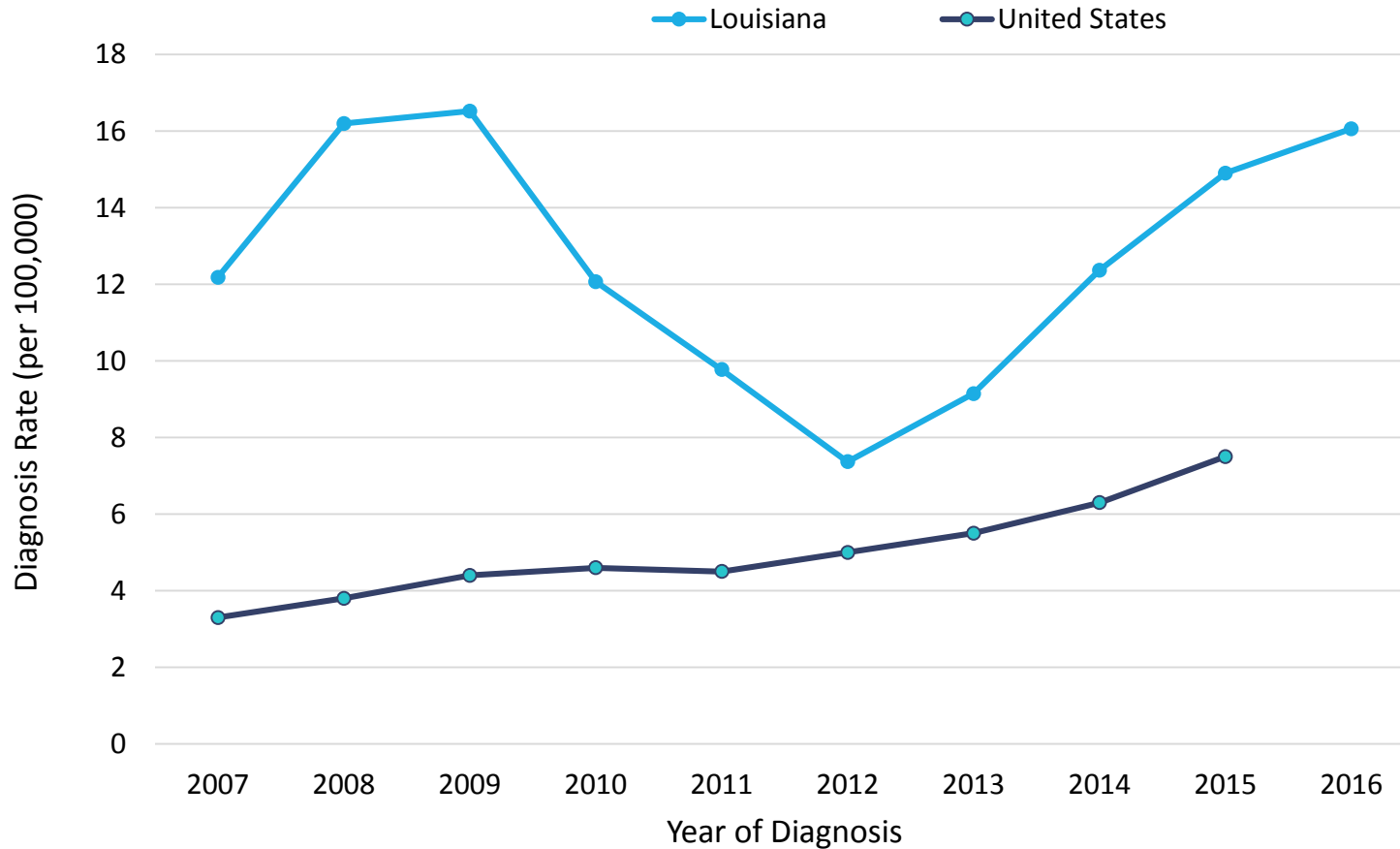
- Negotiate with hospitals to preserve LaPHIE as new EHRs are being implemented
- Offer resources to assist with software programming modifications
- Expand to additional private medical centers and clinics

STIs in Louisiana

Louisiana STI and HIV 2015 vs 2016

	2015 Ranking	2015	2016	% Change
P&S Syphilis	1 st	696	750	7.8%
Chlamydia	2 nd	32,305	31,727	-1.8%
Gonorrhea	1 st	10,274	10,782	4.9%
Congenital Syphilis	1 st	54	48	- 11.1%

Primary and Secondary Syphilis Diagnosis Rates Louisiana and the United States, 2007-2016



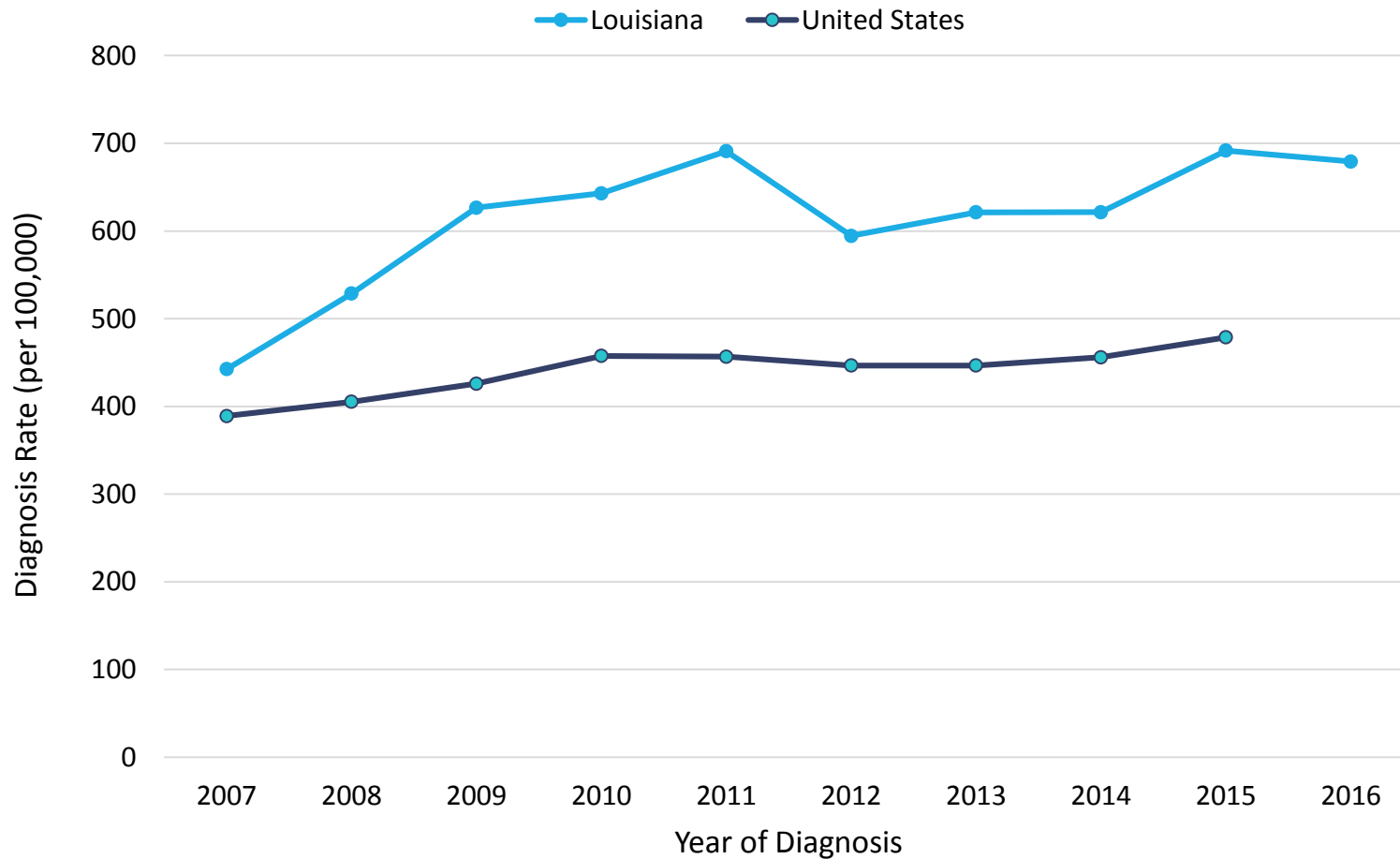
Primary and Secondary Syphilis in Louisiana, 2016

P&S Syphilis	750	100%
By Sex at Birth	Male	74%
	Female	26%
By Race	Black	74%
	White	25%
	Hispanic	2%
By Age Group	< 20 years	14%
	20-29 years	49%
	30 and older	37%
By Region	New Orleans	29%
	Baton Rouge	16%
	Houma	7%
	Lafayette	9%
	Lake Charles	3%
	Alexandria	4%
	Shreveport	20%
	Monroe	10%
	Hammond/Slidell	3%

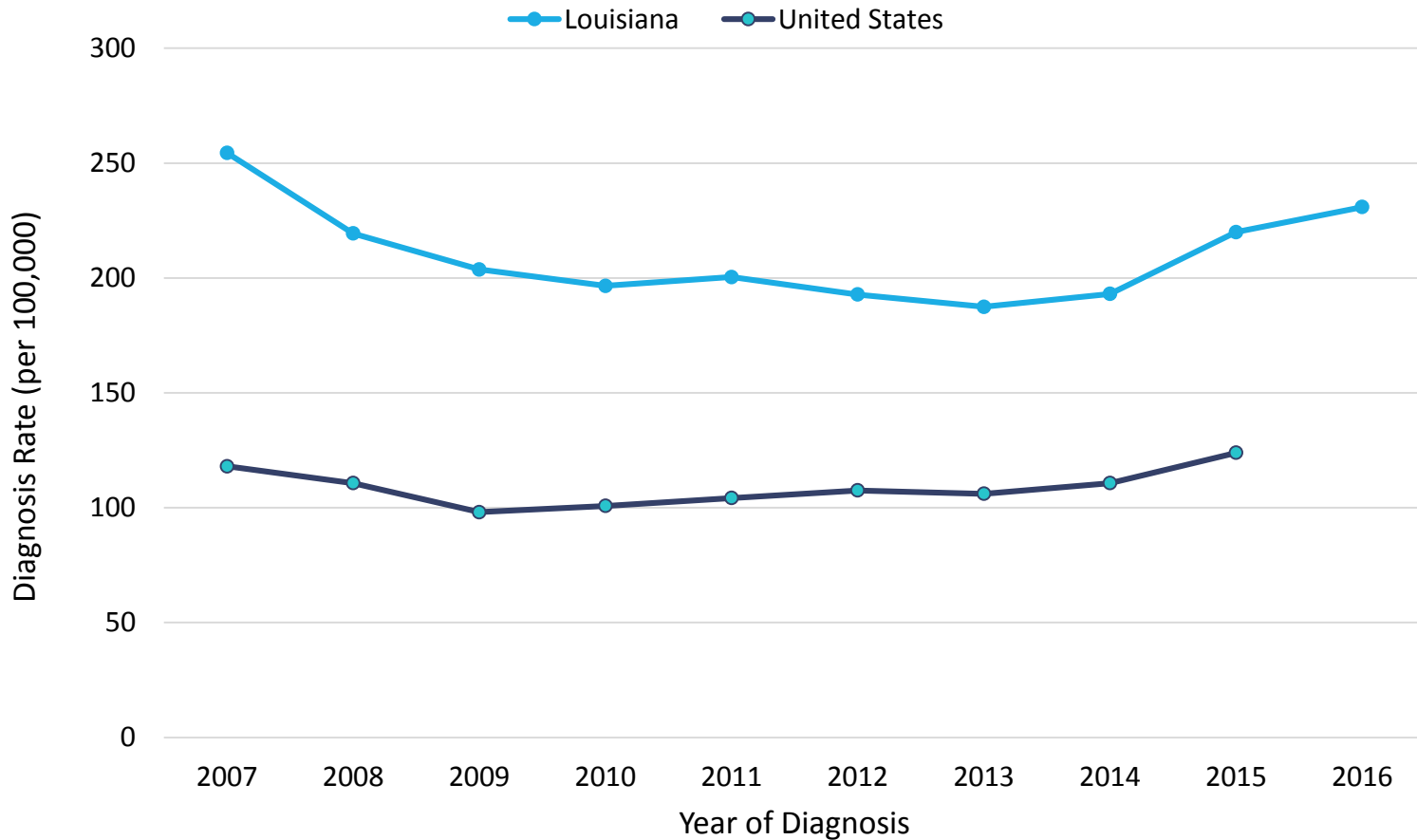
Chlamydia and Gonorrhea Diagnoses in Louisiana, 2016

		Chlamydia	Gonorrhea
		31,727	10,783
By Sex at Birth	Male	28%	49%
	Female	72%	51%
By Race/Ethnicity	Black	71%	78%
	White	25%	20%
	Hispanic	4%	2%
By Age Group	< 20 years	33%	26%
	20-29 years	54%	53%
	30 and older	13%	21%

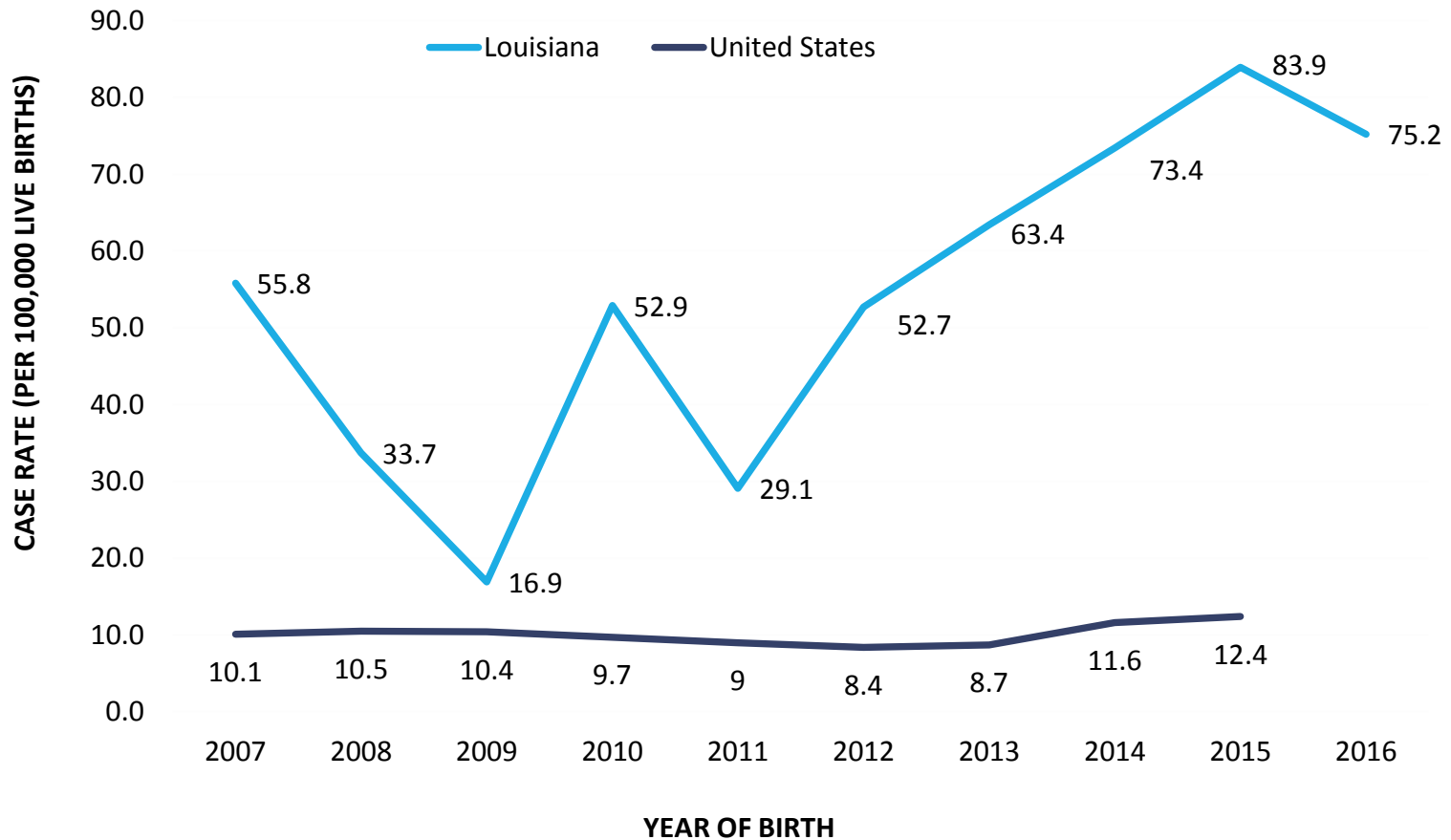
Chlamydia Diagnosis Rates Louisiana and the US, 2007-2016



Gonorrhea Diagnosis Rates Louisiana and the US, 2007-2016



Congenital Syphilis Rates Louisiana and the US, 2007-2016



STI/HIV Reduction Strategy

OLD PROBLEMS, NEW
SOLUTIONS

STI/HIV Reduction Strategy

A focused plan of action that encompasses goals, objectives, and strategies from past and present SHP activities

- I. **Direct Care Services:** To ensure optimal use of available healthcare services and resources for the prevention of new STD/HIV infection
- II. **Patient Awareness & Education:** To improve health outcomes through increased STD/HIV awareness and promotion of healthy sexual behaviors
- III. **Community Awareness & Engagement:** To promote strong community partnerships by expanding existing relationships and developing additional community-based services focused on reducing STD/HIV morbidity and mortality

STD/HIV Reduction Strategy

Direct Care Services

- Increase STD/HIV screening and testing
- Expand rapid syphilis and extra-genital test utilization in PHUs and CBOs
- Implement enhanced partner notification services including rapid syphilis and HIV testing and referrals to care and PrEP
- Increase PrEP awareness and education among providers and in the community
- Sponsor Undoing Racism workshops



STD/HIV Reduction Strategy

Patient Awareness & Education

- Update patient education materials
- Conduct Focus Groups
- Develop a Patient Education Toolkit (EHR & SHP website)

STI/HIV Reduction Strategy Successes

- More than tripled the number of syphilis tests performed at community-based organizations in 2016 (compared to 2015)
- Increased the number of primary and secondary syphilis cases that were treated within 14 days of specimen collection in PHUs to 91% (Jan-Jun 2016) compared to 78.6% (Jan-Dec 2015)
- Successfully implemented extra-genital GC/CT testing at 12 PHUs in all 9 OPH Regions, with plans for additional expansion by the end of 2017
- 228 GC/CT cases were diagnosed that would have been missed if depending on urogenital testing alone
- Increased the number of comprehensive PrEP clinics in the State from 3 in 2015 to 13 in 2017

STI/HIV Reduction Strategy Successes (cont.)

- Created a new website:
www.LouisianaHealthHub.org
- Established a Regional Task Force in each OPH region
 - OPH Regional leadership, Regional Coord, LCC, FQHCs, CBOs, Comm Partners
- Developed a Congenital Syphilis Case Review Team comprised of SHP Central Office staff, Regional Medical Teams, and Regional Disease Intervention Specialists

STI/HIV Reduction Strategy Successes (cont.)

- Viral suppression among persons newly diagnosed with HIV in Louisiana who entered HIV-related medical care within 90 days increased from 81% in 2014 to 86% in 2016
- Viral suppression among persons living with HIV in Louisiana who were in medical care increased from 65% in 2012 to 81% in 2016

STI/HIV in Louisiana: Old Problems, New Solutions

- Reduce the number of new cases of STI and HIV in Louisiana
- Reduce the number of new Congenital Syphilis cases in Louisiana
- Expand the Louisiana PrEP Provider network
- Increase access to PrEP for persons that would benefit most from this medication
- Continue to increase viral suppression rates among persons newly diagnosed with HIV
- Continue to promote use of available screening and testing technology to increase timely detection and treatment of infection

Clinical Quality Group

One of the Keys to

Ending the Epidemic