

HAB HIV Performance Measures: Systems-Level



Performance Measure: System Level: Waiting time for initial access to outpatient/ambulatory medical care	
Percent of Ryan White Program-funded outpatient/ambulatory care organizations in the system/network with a waiting time of 15 or fewer business days for a Ryan White Program-eligible patient to receive an appointment to enroll in outpatient/ambulatory medical care ¹	
Numerator:	Number of Ryan White Program-funded outpatient/ambulatory medical care organizations in the system/network with a waiting time of 15 or fewer business days for a Ryan White Program-eligible patient to receive an appointment to enroll in outpatient/ambulatory medical care ¹ .
Denominator:	Number of Ryan White Program-funded outpatient/ambulatory medical care organizations in the system/network at a specific point in time in the measurement year.
Exclusions:	None
Data Element:	<p><i>For each agency:</i></p> <ol style="list-style-type: none"> 1. Is the organization funded by the Ryan-White Program to provide outpatient/ambulatory medical care? (Y/N) <ol style="list-style-type: none"> a. In how many business days is the third next available appointment for a Ryan White Program-eligible patient to enroll in outpatient/ambulatory medical care at this organization? <ol style="list-style-type: none"> i. Is the third next available appointment \leq 15 business days? (Y/N) <p><i>For the system:</i></p> <ol style="list-style-type: none"> 1. How many outpatient/ambulatory medical care organizations are funded by the Ryan White Program to provide outpatient/ambulatory medical care? <ol style="list-style-type: none"> a. Of those organizations, how many have \leq 15 business days for the third next available appointment to enroll in outpatient/ambulatory medical care?
Data Sources:	<ul style="list-style-type: none"> • Data reported to the system/network grantee at a common point in time on a quarterly basis by each of the organizations in the system/network that provides outpatient/ambulatory medical care using a standardized methodology. (See example below.)
National Goals, Targets, or Benchmarks for Comparison:	None available at this time.
Outcome Measures for Consideration:	<ul style="list-style-type: none"> • Percent of patients who are retained in outpatient/ambulatory medical care in the measurement year. • Percent of patients diagnosed with <i>Pneumocystis jiroveci</i> (PCP) in the measurement year.

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<p>Basis for Selection:</p>
<p>This measure addresses the importance of access to health care for Ryan White Program eligible patients. Improving “access to healthcare is important to the quality of healthcare outcomes. Patients who can promptly schedule appointments with their healthcare providers will have higher satisfaction, will likely return to work sooner, and may well have better medical outcomes.”² A study of the characteristics of scheduled new HIV+ patients who failed to attend their initial visit found that in addition to patient characteristics (younger age, black race, and public insurance), “longer waiting time from the call to schedule a new patient visit to the appointment date was associated with failure to establish care.”³</p>
<p>US Public Health Service Guidelines:</p>
<p>None</p>
<p>References/Notes:</p>
<p>¹ The type of visit for patient enrollment in outpatient/ambulatory medical care can be determined by each outpatient/ambulatory medical care provider in the system/network, but should be consistently defined at each data collection point. The type of appointment scheduled to enroll in outpatient/ambulatory medical care may vary among agencies within the system/network. For example, at one agency, to enroll in care, a new patient may first have an appointment to have routine laboratory tests and an initial health history taken by a nurse to then be followed by a subsequent appointment with a provider with prescribing privileges at the agency (i.e., MD, PA, NP), while at another agency, a new patient may first have an appointment with physician. Other examples of types of appointment to enroll in outpatient/ambulatory medical care may include an initial appointment with a case manager, social worker, patient navigator, peer advocate, clergy, or other designated staff.</p> <p>² National Quality Measures Clearinghouse, “Access: time to third next available appointment for an office visit”. Available at: http://www.qualitymeasures.ahrq.gov/summary/summary.aspx?ss=1&doc_id=10912 Further information on this measure is also available at: http://www.wchq.org/measures/index.php (Wisconsin Collaborative for Healthcare Quality).</p> <p>³ Mugavero MJ, Lin HY, Alison JJ, et al. Failure to Establish HIV Care: Characterizing the “No Show” Phenomenon. <i>Clinical Infectious Diseases</i>. 2007;45:127-130.</p>
<p>Example:</p>
<p>System A, which has six (6) outpatient medical care programs, decided to implement this measure on a quarterly basis. A point in time survey was scheduled to be conducted by telephone on the last Tuesday of the quarter. (Other methods of data collection, such as an on-line survey, e-mail, or fax may be used to collect data at the point in time by the system.) On the designated morning the System A administrative staff calls each outpatient program and asks the following question: “What are your three next available appointments for an individual who is seeking to enroll in outpatient/ambulatory medical care for his/her HIV disease at your clinic?”</p> <p>After data is collected from each of the agencies, the waiting time (number of business days from the date of data collection to the appointment date) are calculated for the third next available appointment. Those which are fifteen business days or fewer are identified and are counted as the numerator; while the denominator is the total number of ambulatory outpatient medical care providers in the system.</p>

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Results of System A Point in Time Survey
Date of data collection: September 14, 2010 (N=6)

Agency 1	Date	Days	Within 15 days?
1st appointment	9/14/2010	0	
2nd appointment	9/23/2010	7	
3rd appointment	10/15/2010	23	No
Agency 2	Date	Days	Within 15 days?
1st appointment	9/14/2010	0	
2nd appointment	9/14/2010 *	0	
3rd appointment	9/14/2010	0	Yes
Agency 3	Date	Days	Within 15 days?
1st appointment	11/24/2010	50	
2nd appointment	12/15/2010	64	
3rd appointment	1/19/2011	88	No
Agency 4	Date	Days	Within 15 days?
1st appointment	9/21/2011	5	
2nd appointment	9/21/2011	5	
3rd appointment	9/21/2011	6	Yes
Agency 5	Date	Days	Within 15 days?
1st appointment	None		
2nd appointment	None		
3rd appointment	None		No
Agency 6	Date	Days	Within 15 days?
1st appointment	9/14/2010	0	
2nd appointment	9/17/2010	3	
3rd appointment	9/20/2010	4	Yes

*Note: Different appointment times on the same day counts as separate appointment times.

Using the data collected, the performance measure is calculated by identifying the number of agencies that indicate that their third next available appointment is within 15 or fewer business days. In the example above, three of the agencies meet this criteria (Agencies 2, 4 and 6) and three (Agencies 1, 3 and 5) do not. Even though Agency 5 is closed to new patients, they are still included. The numerator is 3 and the denominator is 6. The percent of Ryan White Program-funded outpatient/ambulatory medical care organizations in the system/network with a waiting time of 15 or fewer business days for a Ryan White Program-eligible patient to receive

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an appointment to enroll in outpatient/ambulatory medical care at this point in time is 50%. (Calculated by dividing the numerator by the denominator: $(3 \div 6) \times 100 = 50\%$)

In addition to determining the rate of achievement of the performance measure, the average number of days until the third next available appointment across the system/network can also be calculated: Add the number of days for the third next available appointments (in this example the sum is 121 days) and then divide by the number of agencies in the system who report an available appointment (in this example the number is 5). The average number of days for the third next available appointment in the system/network reported on the date of data collection is 24.2 days. (Note: In this example Agency 5 reports that it is not accepting new patients—no appointments are available. This agency should still be included in the denominator for the calculation of the performance measure rate [Example 1] but it should not be included in the denominator for the calculation of the average number of days [Example 2].)

Figure 1 depicts percentage of agencies meeting the performance measure over three quarters.

Example: Graph of wait time performance measure for System: Performance measure rate for Quarters 1-3

