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California Department of Public Health



EDMUND G. BROWN JR.  
Governor

**OFFICE OF AIDS  
HIV Care Program**

**Management Memorandum  
Memorandum Number 15-03**

March 10, 2015

TO: HIV CARE PROGRAM (HCP) CONTRACTORS

SUBJECT: SUBMISSION REQUIREMENTS FOR QUALITY MANAGEMENT (QM) PLANS  
AND UPDATE OF REQUIRED QM INDICIATORS

**I. Purpose**

The purpose of this Management Memo is to clarify submission requirements for QM plans and update required QM indicators.

**II. Background**

The goal of the HCP QM program is to ensure that services provided to people living with HIV/AIDS (PLWHA) support retention in HIV care and viral suppression. HCP contractors are required to ensure that all service providers have a QM program in place. The QM program should fit within the framework of the providers' other programmatic quality assurance and quality improvement activities. Providers may use an existing QM program (e.g., Joint Commission on Accreditation of Healthcare Organizations, Medicaid) or develop their own program.

The HAB HIV Performance Measures represent clinical decision points that align with the National HIV/AIDS goal of increasing access to care and improving health outcomes for PLWHA. In 2013, HAB revised its performance measure portfolio for clinical accuracy and relevance, consistency with national guidelines, alignment with other federal agencies, and feasibility for implementation in electronic health record systems. OA formerly monitored and reported on five clinical measures from the past HAB Core Clinical Performance Measures. The updated HAB measures will be available in ARIES by late summer, 2015.

**III. Policy**

All HCP contractors are required to have a QM Plan and must ensure that all of their providers have a QM program in place to assess how funded service(s) retain clients in care. Effective April 1, 2015, QM plans must be submitted to OA on an annual basis prior to the beginning of each contract year. QM plans will be evaluated using the [Checklist for the Review of an HIV-Specific Quality Management Plan](#); an assessment tool developed by the HRSA funded National Quality Center (NQC).

The QM plan must demonstrate efforts to engage and retain clients in HIV care and address the following updated HAB performance measures.

- [Viral Load Suppression](#)
- [Medical Visit Frequency](#) (page 6)

The data necessary for these measures (viral load results and medical visit dates) are required in the Ryan White Services Report (RSR) for clients receiving any OAMC funded service. For clients receiving any other RW funded service, the development of a method to assess viral load suppression and retention in HIV care is highly encouraged.

Activities conducted to assess and improve outcomes on the above measures at each subcontractor must be described in the QM plan. Results of the monitoring and improvement efforts for these measures must be described in the HCP and MAI Progress Report.

Pursuant to California Health and Safety Code Section 38077(b)(2), CDPH/OA contractors shall implement the above referenced modifications to the HIV Care Program Scope of Work.

Questions and/or requests for additional assistance in developing and monitoring QM programs and plans should be directed to Aileen Barandas, MSN, NP, Quality Management Nurse at (916) 445-9221; [aileen.barandas@cdph.ca.gov](mailto:aileen.barandas@cdph.ca.gov).

Assistance with running HAB QM Indicators and QM Client Follow-Up Reports in ARIES should be directed to the ARIES Help Desk at 866-411-ARIES (866-411-2743).

Sincerely,

Ayanna Kiburi, MPH  
Chief, HIV Care Branch  
Office of AIDS  
California Department of Public Health