CA Area: Improving Prenatal HIV Screening Rates

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What Data Need to be Collected?

- Mission is to improve health status of Al/AN people and populations
- Defined data fields should be driven by this mission
- May be different for each end user and each community; for instance, some communities may monitor
 - □ STD rates
 - □ IV drug use rates
 - □ TB rates



So, does data matter?

- Used to improve primary care for patients
- Used to identify at risk communities
- Increased HIV screening rates in prenatal AI/AN patients

Improving Prenatal HIV Screening Rates

Indian Health Service



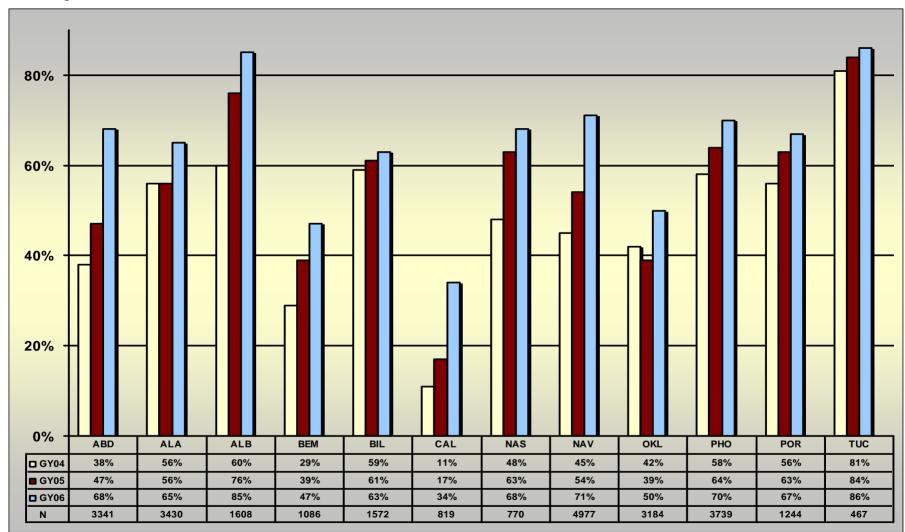
Perinatal HIV Infection

- Maternal Risk Factors (may be difficult to ascertain on history/physical)
- Prevention of Perinatal transmission
 - Requires identification of maternal HIV infection
 - Offer testing to all pregnant women as routine part of early pregnancy care

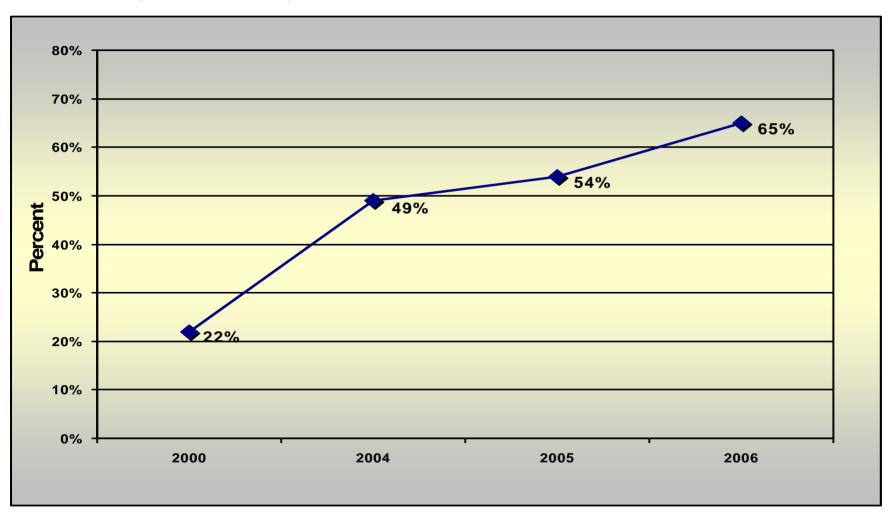
GPRA mandatory HIV testing for pregnant women

- GPRA is a Congressional mandate that requires federal agencies to develop and report on agency defined performance measures
- One IHS GPRA measure includes quarterly and annual evaluation of screening for HIV in pregnant patients (consistent with CDC guidance)
- Testing is NOT mandated by IHS, but recommended

Prenatal HIV Screening: By Area 2004-2006



IHS Prenatal HIV Screening Rates: 2000, 2004, 2005 & 2006



GPRA Measure for Prenatal HIV Screening

GPRA Measure Description: In FY 2007, maintain the proportion of pregnant female patients screened for HIV at the *FY 06 rate of 65%*.

■ **Denominator:** All pregnant patients with no documented miscarriage or abortion during the past 20 months and NO recorded HIV diagnosis ever.

■ Numerators:

- 1) Patients who received counseling and/or patient education about HIV and testing during the past 20 months.
- 2) **GPRA:** Patients who received HIV test during the past 20 months, including refusals. 2A) Number of documented refusals.

CRS Logic: Definitions

- 1) **Pregnancy:** At least 2 visits with POV: V22.0-V23.9, 640.*-648.*, 651.*-676.* during the past 20 months, with one diagnosis occurring during the reporting period.
- 2) **Miscarriage:** Occurring after the second pregnancy POV and during the past 20 months. POV: 630, 631, 632, 633*, 634*, CPT: 59812, 59820, 59821, 59830
- **Abortion:** Occurring after the second pregnancy POV and during the past 20 months. POV: 635*, 636*, 637*, CPT: 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857
- **4) HIV:** V POV or Problem List: *042*, 042.0-044.9 (*old codes*), V08, 795.71
- 5) HIV Counseling/Patient Education: POV: V65.44, Patient Education codes containing "HIV-" or "-HIV" or HIV diagnosis 042.0-044.9, V08, 795.71
- 6) **HIV Test:** CPT: 86689, 86701-86703, 87390, 87391, *87534-87539*; LOINC taxonomy; site-populated taxonomy BGP GPRA HIV TESTS
- 7) **Refusal of HIV Test:** Lab Test HIV

"Cheat Sheet" for Documenting Prenatal HIV Screening

Objective	Standard	Provider Documentation	Data Entry
HIV Testing in Women	Pregnant women should be tested for HIV at least on their first visit; education and follow-up provided as appropriate	Standard PCC documentation for tests performed at the facility To document Refusals on PCC: Write "Refused HIV test" in POV section	Standard PCC data entry for tests performed at the facility Historical Mnemonic: <i>HLAB</i> Date of Test: Name of Lab Test: Results: Refusals Mnemonic: <i>REF</i> Lab Test Value: Date Refused:

HIV –Case Management System-HMS

- RPMS (health information system for IHS) software application
- Released 2006

What is HMS?

- HMS is a case management component of the IHS Resource and Patient Management System (RPMS) and provides Indian Health Service/Tribal/Urban (I/T/U) healthcare providers with another tool for improving the direct care and management of patients with HIV, AIDS, or who have been identified as being "at risk" for the disease. The primary functions of HMS version 1.0 are:
 - to identify any patients who could benefit from case management, and
 - provide condition-specific reminders and reports to assist providers in improving the quality of care extended to this population.

Use of HMS

HMS provides the following capability:

- identify candidates for a register from the RPMS database, based not only on diagnosis but also on combinations of lab test results and medications
- create and maintain a patient register and collect HIV/AIDS-related data not currently available within RPMS, such as CDC Etiology categories, HAART medication compliance, and state reporting status
- provides condition-relevant reminders and reports for register patients
 - □ the HIV/AIDS Supplement
 - □ a quality of care population report
 - □ clinical treatment guidelines
 - □ a due/overdue reminder report
 - □ a state surveillance report.