## TX DSHS Ryan White Part-B and State Services Contract Language re: Clinical Quality Management Updated 3/20/2020

To adhere to the legislative requirement to establish and maintain a Clinical Quality Management (CQM) Program and ensure each regional Administrative Agency (AA) and associated subrecipients are following requirements independently or as part of the regional CQM Program as outlined in Policy Clarification Notice (PCN) 15-02. The following State CQM Program requirements for all funded agencies include yet are not limited to ensuring key components are in place and are ongoing:

- 1. Quality management plan with annual review and update at minimum
- 2. Annual goals with quarterly update as needed and annual review at minimum
- 3. Quality management work plan with annual review and update at minimum
- 4. Stakeholder involvement in the CQM Plan to include people living with HIV in Texas
- 5. Quality management committee with quarterly meetings at minimum
- 6. Record and disseminate CQM committee meeting minutes/summary notes quarterly at minimum.
- 7. Collect and report all required data elements as per funded service category requirements into the AIDS Regional Information and Evaluation System (ARIES) within 10 business days of service delivery. This requirement includes all data elements for the Ryan White Service Report (RSR) and the HIV/AIDS Bureau Quality Management Report (HAB/QM).
- 8. Care continuum and other data are stratified for analysis of potential disparities by age, gender, socioeconomic status, risk factor and geography
- 9. Analysis and dissemination to stakeholders of HIV Care Continuum data, selected HAB/QM performance measures, and other regional data are completed quarterly at minimum
- 10. Established systematic review process for subrecipient data including regional care continuum cascades, clinical, consumer satisfaction and operational measures
- 11. Established method to validate data in ARIES to include quality indicators addressing accuracy, completeness and timeliness of data entered in ARIES with a deficiency response plan for noncompliance toward correction and improvement
- 12. Ongoing CQM and HIV capacity building activities related to statewide and or regional goals in COM Plan
- 13. Participate in annual program monitoring to include the post-monitoring deficiency response plan and all related activities of corrective actions toward improvement/compliance
- 14. Regularly report to stakeholders, the Texas Ryan White Part-B and State Services quality management staff and your regional care consultant information related to progress and or challenges to meeting goals
- 15. At least one quality improvement project ongoing always; that is linked to one of the following Four Strategic Domains of the Texas Ryan White Part-B QM Program:

Strategic Domains	
Improving Access to Care	Improving the Client/Patient
	Experience
Improving Health Outcomes	Eliminating Health Disparities

PCN 15-02 located at: <a href="https://hab.hrsa.gov/sites/default/files/hab/clinical-quality-management/clinicalquality-managementpcn.pdf">https://hab.hrsa.gov/sites/default/files/hab/clinical-quality-managementpcn.pdf</a>.