

**CBE ID**

0406

**Title**

HIV/AIDS: Adolescent and Adult Patients who are Prescribed Potent Antiretroviral Therapy

**Project**

Infectious Disease Endorsement Maintenance

**Endorsement Status**

Endorsement Removed

**Is Under Review**

No

**Previous Endorsement Cycle**

Spring 2013

**Removal Date**

Mon, 01/07/2013 - 19:00

**Initial Endorsement**

Wed, 07/30/2008 - 20:00

**Steward**

National Committee for Quality Assurance

**1.0 New or Maintenance**

Maintenance

**1.1 Measure Structure**

Single Measure

**1.3 Electronic Clinical Quality Measure (eCQM)**

No

**1.6 Measure Description**

Percentage of patients with a diagnosis of HIV/AIDS, with at least two visits during the measurement year, with at least 90 days between each visit: aged 13 years and older who have a history of a CD4 count less than or equal to 500 cells/mm<sup>3</sup>; aged 13 years and older who have a history of an AIDS-defining illness, regardless of CD4 count; or who are pregnant, regardless of CD4 count or age, who were prescribed potent antiretroviral therapy

**1.7 Measure Type**

Process

## 1.8 Level of Analysis

Clinician: Group/Practice, Clinician: Individual

## 1.9 Care Setting

Outpatient Services

## 1.14 Numerator

Patients who were prescribed potent antiretroviral\* therapy\*Potent antiretroviral therapy is described as any antiretroviral therapy that has demonstrated optimal efficacy and results in durable suppression of HIV as shown by prior clinical trials

## 1.15 Denominator

A. All patients aged 13 years and older with a diagnosis of HIV/AIDS, with at least two medical visits during the measurement year, with at least 90 days between each visit, who have a history of a CD4 count less than or equal to 500 cells/mm<sup>3</sup>; and B. All patients aged 13 years and older with a diagnosis of HIV/AIDS, with at least two medical visits during the measurement year, with at least 90 days between each visit, who have a history an AIDS-defining illness\*\*, regardless of CD4 count; and C. All patients with a diagnosis of HIV/AIDS, with at least two medical visits during the measurement year, with at least 90 days between each visit, who are pregnant, regardless of CD4 count or age.\*\*The most commonly used case definition for AIDS is the 1993 Revised Surveillance Case Definition from the CDC. It includes: Candidiasis of bronchi, trachea, or lungs; candidiasis, esophageal; cervical cancer, invasive; coccidioidomycosis, disseminated or extrapulmonary; cryptococcosis, extrapulmonary; crytosporidiosis, chronic intestinal (greater than 1 month's duration); cytomegalovirus disease (other than liver, spleen, or nodes); cytomegalovirus retinitis (with loss of vision); encephalopathy, HIV-related; herpes simplex: chronic ulcer(s) (greater than 1 month's duration); or bronchitis, pneumonitis, or esophagitis; histoplasmosis, disseminated or extrapulmonary; isosporiasis, chronic intestinal (greater than 1 month's duration); Kaposi's sarcoma; lymphoma, Burkitt's (or equivalent term); lymphoma, immunoblastic (or equivalent term); lymphoma, primary, of brain; mycobacterium avium complex or M. kansasii, disseminated or extrapulmonary; mycobacterium tuberculosis, any site (pulmonary or extrapulmonary); mycobacterium, other species or unidentified species, disseminated or extrapulmonary; pneumocystis carinii pneumonia; pneumonia, recurrent; progressive multifocal leukoencephalopathy; salmonella septicemia, recurrent; toxoplasmosis of brain; wasting syndrome due to HIV. (Aberg, 2009; National Center for Infectious Diseases Division of HIV/AIDS)Definition of "Medical Visit" - any visit with a health care professional who provides routine primary care for the patient with HIV/AIDS (may be but is not limited to a primary care clinician, ob/gyn, pediatrician, infectious diseases specialist)Note: For potent antiretroviral therapy recommendations refer to current DHHS guidelines available at [www.aids.gov](http://www.aids.gov)Aberg JA, Kaplan JE, Libman H, Emmanuel P, Anderson JR, Stone VE, Oleske JM, Currier JS, Gallant JE; HIV Medicine Association of the Infectious Diseases Society of America. Primary care guidelines for the management of persons infected with human immunodeficiency virus: 2009 update by the HIV medicine Association of the Infectious Diseases Society of America. Clin Infect Dis. 2009 Sep 1;49(5):651-81. Available at [http://www.ups.upenn.edu/bugdrug/antibiotic\\_manual/idsahivprimarycare2....](http://www.ups.upenn.edu/bugdrug/antibiotic_manual/idsahivprimarycare2....) Accessed May 25, 2012.National Center for Infectious Diseases Division of HIV/AIDS. 1993 Revised classification system for HIV infection and expanded surveillance case definition for AIDS among adolescents

---

and adults. MMRW Recomm Rep. 1992;41(RR-17):1-19.

## **1.20 Types of Data Sources**

Claims Data, Electronic Health Data, Electronic Health Records: Electronic Health Records

### **6.1.2 Current or Planned Use(s)**

Public Reporting, Quality Improvement (Internal to the specific organization)

### **6.1.3 Current Use(s)**

Public Reporting, Quality Improvement (Internal to the specific organization)

## **Exclusions**

None

## **Measure Disclaimer**

These performance measures are not clinical guidelines and do not establish a standard of medical care, and have not been tested for all potential applications.

THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

## **Risk Adjustment**

No risk adjustment or risk stratification

## **Target Population**

Women

## **Steward Organization**

National Committee for Quality Assurance

## **Steward POC email**

measureendorsement@ncqa.org