

COVID-19 Data Report (CDR) Instruction Manual - DRAFT

HIV/AIDS Bureau

Health Resources and Services Administration
U.S. Department of Health and Human Services
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Public Burden Statement: The purpose of this data collection system is to collect aggregate data on the numbers of RWHAP clients and immediate household members served for treatment or prevention of COVID-19 and the types of allowable RWHAP services provided with CARES Act RWHAP funding. HAB will use these data to show how CARES Act RWHAP funding is being used to support RWHAP clients (and immediate household members in limited circumstances) and to identify potential changes in RWHAP needs and service provision during and beyond the COVID-19 pandemic. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0906-XXXX and it is valid until XX/XX/202X. This information collection is required to obtain or retain a benefit (FY 2020 Coronavirus Aid, Relief, and Economic Security Act- P.L. 116-136). Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.

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Background

(Last Updated: May 28, 2020)

The Ryan White HIV/AIDS Program (RWHAP), codified in title XXVI of the Public Health Service Act, supports direct health care and support services for over half a million people with HIV—approximately half of all people with diagnosed HIV in the United States. The RWHAP funds and coordinates with cities, states, and local community-based organizations to deliver efficient and effective HIV care, treatment, and support services for low-income people with HIV.


On March 27, 2020, the President signed into law the “Coronavirus Aid, Relief, and Economic Security Act” (CARES Act). The CARES Act appropriated \$90 million to the Health Resources and Services Administration (HRSA) RWHAP to prevent, prepare for, and respond to coronavirus disease of 2019 (COVID-19). This funding supports 581 Ryan White HIV/AIDS Program recipients across the country, including city/county health departments, state health departments, health clinics, community-based organizations, and AIDS Education and Training Centers in their efforts to help prevent or minimize the impact of COVID-19 on RWHAP clients. The award provides RWHAP recipients the flexibility to meet evolving COVID-19 needs in their respective communities, including extending operational hours, increasing staffing hours, purchasing additional equipment, enhancing workforce training and capacity development, and providing critical services to people with HIV during this pandemic, such as home-delivered meals, emergency housing, and transportation.

Chapter I: Introduction

To support federal requirements to monitor and report on funds distributed under the CARES Act, the HRSA HIV/AIDS Bureau (HAB) created a new data reporting module – the COVID-19 Data Report (CDR) – to collect information on CARES Act funded activities. The CDR will collect monthly, aggregate data on the types of services provided and number of people served for the treatment or prevention of COVID-19 among RWHAP-eligible clients. Completion of the CDR is required for all providers (regardless of whether they are recipients or subrecipients) who receive CARES Act funding.

Purpose of Data Collection

The CDR will collect aggregate information on the number of RWHAP-eligible clients and immediate household members tested for COVID-19, the number of RWHAP-eligible clients newly diagnosed (or presumed positive) with COVID-19, the cumulative number of RWHAP-eligible clients with COVID-19, the number of RWHAP-eligible clients and immediate household members who received services in each RWHAP service category (identified in Policy Clarification Notice 16-02 Ryan White HIV/AIDS Program Services: Eligible Individuals and Allowable Uses of Funds), and the types of services provided using telehealth technology in the CDR. The information obtained in this module will assist HRSA HAB in understanding how CARES Act RWHAP funding is being used to support RWHAP clients (and immediate household members in limited circumstances) and ensures that HRSA HAB is compliant with federal reporting requirements.



Additional resources can be found here:

- [Coronavirus Disease 2019 \(COVID-19\) Frequently Asked Questions](#)
- [FY 2020 CARES Act Funding for Ryan White HIV/AIDS Program Recipients](#)
- [FY 2020 CARES Act Awards](#)

Where to Submit Data

Recipients and recipient-providers will access the CDR via the EHBs. Subrecipients will submit their data via HRSA HAB's Reg Login server.

Change in Contact Information

HRSA HAB may send occasional reminders and updates regarding changes in the RWHAP CDR data collection and reporting process. Therefore, it is imperative that RWHAP recipients inform their HRSA HAB project officer of any changes in key contact people or contact information. Please maintain the most up-to-date contact information in the EHBs.

Reporting Period

The first data submission will be due June 15, 2020 and monthly thereafter. Because CARES Act funding can be used to cover services retroactively back to January 20, 2020, the first data submission will include three distinct reports, collecting information on three different time periods.

Reporting Timeline:

# of Reports:	Reporting Period:	System Opens:	Deadline:
3	1. January 20, 2020 – March 31, 2020 (pre-award) 2. April 1-30, 2020 3. May 1-31, 2020	June 1, 2020	June 15, 2020
1	June 1-30, 2020	July 1, 2020	July 15, 2020
1	July 1-31, 2020	August 1, 2020	August 15, 2020
1	August 1-31, 2020	September 1, 2020	September 15, 2020
1	September 1-30, 2020	October 1, 2020	October 15, 2020
1	October 1-31, 2020	November 1, 2020	November 15, 2020
1	November 1-30, 2020	December 1, 2020	December 15, 2020
1	December 1-31, 2020	January 1, 2021	January 15, 2021
1	January 1-31, 2021	February 1, 2021	February 15, 2021
1	February 1-28, 2021	March 1, 2021	March 15, 2021
1	March 1-31, 2021	April 1, 2021	April 15, 2021
1	April 1-30, 2021	May 1, 2021	May 15, 2021
1	May 1-31, 2021	June 1, 2021	June 15, 2021



If you need EHBs technical assistance, please contact the EHBs Customer Support Center at 877-464-4772. If you need assistance navigating the RWHAP CDR system, please contact Data Support at 888-640-9356.

Chapter II: Data Submission Steps

Creating CARES Act Contract(s) in the GCMS

Step One: Access the GCMS (CARES Act recipients and recipient-providers only)

- Log in to the HRSA HAB electronic handbooks (EHBs) site at <https://grants.hrsa.gov/webexternal>. The EHBs home page will appear in the main window.
- Select the “Grants” tab. The “Grants” tab is located in the upper left-hand corner of the page.
- The My Grant Portfolio page will open in the main window. Locate your assigned organization’s grant number on the grant portfolio page. Select the “Grant Folder” link on the right side of the page on the same row.
- The Grant Home page will open in the main window. Select the “Manage Contracts” link under the Others heading.
- The Search Contracts page (GCMS) will open in the same window



If you need assistance navigating the EHBs, contact the EHBs Customer Support Center at 877-464-4772.



For additional GCMS guidance, the GCMS Instruction Manual is available for download here:
<https://targethiv.org/library/gcms-manual>

Step Two: Create/Verify your contract(s) in the GCMS

For the first submission period, all recipients and recipient-providers must create a new CARES Act contract in the GCMS.

- With only the grant number pre-populated, click “Search”.
- Click the “Add Contract” button below the search results table.
- Search for the organization by registration code, name, or city/state.



If you need assistance locating/adding a subrecipient to the GCMS, call Data Support at 888-640-9356 or email RyanWhiteDataSupport@wrma.com.

- Locate the subrecipient in the results table and click “Add” under the Action column.
- Complete questions 1–9.
 1. Contract start date.
 2. Contract end date.



Contract start and end dates must align with your subrecipient contract dates.

3. Contract reference (optional).
4. Contract Execution.
 - No
 - Yes
5. Is this agency serving as a consortium, fiscal intermediary provider, administrative agent, or lead agency under this contract?
 - No
 - Yes
6. Is this agency a subcontractor or second-level provider?
 - No
 - Yes
7. Does this agency provide direct client services?
 - No
 - Yes
8. If applicable, select the administrative and technical services that are funded for this contractor.
 - Planning or evaluation
 - Administrative or technical support
 - Fiscal intermediary support
 - Other fiscal services
 - Technical assistance
 - Capacity development
 - Quality management
 - Other
9. If applicable, indicate the core medical and essential support services that are funded for this contract by selecting the “Update Services” button
- Click on the “Done updating services” button inside the pop-up to return to the contract page.
- Click on the Save button at the bottom of the page.



For future reporting periods, contracts can be duplicated and edited to minimize data reporting burden. A GCMS training webinar is available here:

<https://targethiv.org/library/completing-gcms>.

Step Three: Open and complete your CDR Report (Recipient-providers only)

- From the left Navigation panel, select “COVID-19 Data Report” to navigate to the CDR Inbox.
- Click the envelope icon under the Action column to begin entering data.
- Follow the steps below to complete the CDR Report.

Completing the CDR

Step One: Access your CDR Report

Recipient-providers:

- Log in to the HRSA HAB electronic handbooks (EHBs) site at <https://grants.hrsa.gov/webexternal>. The EHBs home page will appear in the main window.
- Select the “Grants” tab. The “Grants” tab is located in the upper left-hand corner of the page.
- The My Grant Portfolio page will open in the main window. Locate your assigned organization’s grant number on the grant portfolio page. Select the “Grant Folder” link on the right side of the page on the same row.
- The Grant Home page will open in the main window. Select the “Manage Contracts” link under the Others heading.
- The Search Contracts page (GCMS) will open in the same window. Locate the COVID-19 Response Report and click “Start” or “Edit.”
- Use the envelope icon in the Action column to access your report.



If you need assistance navigating the EHBs, contact the EHBs Customer Support Center at 877-464-4772.

Subrecipients or Second-level Provider:

- To access the CDR system, go to <https://grants6.hrsa.gov/hab/regloginapp/Admin/Login.aspx>. Enter your username and password, select “HAB RSR Web Application”, and click “Log In.”



CDR login is the same as accessing the RSR Web System.



If you have submitted an RSR Provider Report in the past, you do not need to reregister in the system. If you are a new system user, you will need your agency’s registration code to create a username and password.



If you need assistance accessing the CDR, call Data Support at 888-640-9356 or email RyanWhiteDataSupport@wrma.com.

- On the left Navigation panel under Emerging Initiatives, select “CDR Inbox”.
- Select the envelope icon in the “Action” column to access your CDR Report. You will automatically be directed to the General Information page.


Step Two: Complete the CDR Report

Use the left Navigation panel to complete two report sections: the General Information and the COVID-19 Data Collection.

- General Information (*Figure 1*):
 - Enter/Update the Organization Details:
 - Organization Name
 - Tax ID/EIN
 - DUNS
 - Mailing Address
 - Enter/Update the Organization Contacts:
 - Select “Add Contact” to add a new contact to your report.
 - Select the “Edit or “Delete” links under the Actions column to modify or remove an existing contact.

Figure 1. General Information Page of the CDR

General Information

Organization Details  [Update](#)

EIN:

123456789

DUNS:

123456789

Mailing Address:


123 Happiness Lane
Washington, DC 01210

Organization Contacts

Name	Title	Phone Number	Email	FAX	Is Primary POC	Actions
Big Bird	Data Lead	(123) 456-7890	bigbird@test.com		Yes	Edit Delete

[Add Contact](#)

- COVID-19 Data Collection:
 - Section 1 (*Figure 2*): Organization-level activities:
 - Indicate which core medical and support services were provided using telehealth during the reporting period.
 - Section 2 (



A value must be reported for each question. If zero, enter '0' in the appropriate field.
 - *Figure 3*): Clients served
 - Complete questions 1-4 and fill in the table
- When finished, click “Save”.

Figure 2. Section 1: Organization-level Activities

COVID-19 Data Collection

Public Burden Statement: OMB Control Number (0906-XXXX) Valid Until XX/XX/202X

Answer all the questions and fill in the data for all fields in the form. If there are no data to be reported for a particular field, fill in with a zero.

Section 1: Organization-level activities

1. What services were provided using telehealth **during the reporting period?** (Select all that apply¹)

Report all service categories that used telehealth during the reporting period **whether or not CARES Act funds were used for the service.**

☐ Do not have telehealth capacity for any service/ Do not provide telehealth for any services

Core Medical Services

- ☐ Outpatient/Ambulatory Health Services
- ☐ AIDS Pharmaceutical Assistance (LPAP, CPAP)
- ☐ Oral Health Care
- ☐ Early Intervention Services (EIS)
- ☐ Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals
- ☐ Home Health Care
- ☐ Home and Community-Based Health Services
- ☐ Hospice
- ☐ Mental Health Services
- ☐ Medical Nutrition Therapy
- ☐ Medical Case Management, including Treatment Adherence Services
- ☐ Substance Abuse Outpatient Care
- ☐ AIDS Drug Assistance Program Treatments

Support Services

- ☐ Non-Medical Case Management Services
- ☐ Child Care Services
- ☐ Emergency Financial Assistance
- ☐ Food Bank/Home Delivered Meals
- ☐ Health Education/Risk Reduction
- ☐ Housing
- ☐ Linguistic Services
- ☐ Medical Transportation
- ☐ Outreach Services
- ☐ Psychosocial Support Services
- ☐ Referral for Health Care and Support Services
- ☐ Rehabilitation Services
- ☐ Respite Care
- ☐ Substance Abuse Services (residential)
- ☐ Other Professional Services

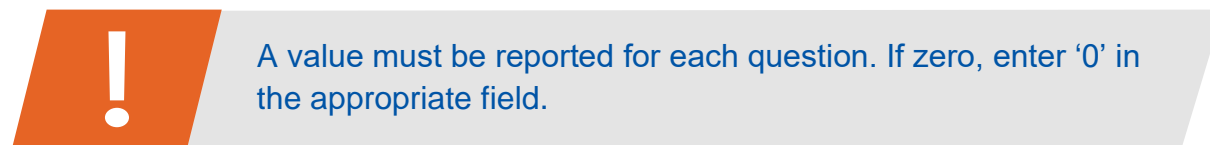


Figure 3. Section 2: Clients Served

Section 2: Clients served

1. Is your provider site conducting COVID-19 testing?
☐ Yes ☒ No

If yes, how many RWHAP-eligible clients and immediate household members **were tested** for COVID-19 **in the reporting period**?

2. Total number of RWHAP-eligible clients served in the reporting period with **NEWLY IDENTIFIED COVID-19** (confirmed or presumed positive).²

3. Total number RWHAP-eligible clients with COVID-19 (confirmed or presumed) served to-date as of **04/30/2020**.³

4. Answer the following questions for the services provided using CARES Act funds for the prevention or treatment of COVID-19:
Total number of RWHAP-eligible clients and immediate household members receiving CARES Act funded services in the reporting period.
 The table below should **only** include the number of RWHAP-eligible clients and immediate household members who received at least 1 service in the reporting period. Those who received RWHAP services under multiple service categories should be counted one time in each service category.

Services	Number of RWHAP-eligible clients and immediate household members who received service(s) in the reporting period ⁴
Core Medical Services	
Outpatient/Ambulatory Health Services	<input type="text"/>
AIDS Pharmaceutical Assistance (LPAP, CPAP)	<input type="text"/>
Oral Health Care	<input type="text"/>
Early Intervention Services (EIS)	<input type="text"/>
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	<input type="text"/>
Home Health Care	<input type="text"/>
Home and Community-Based Health Services	<input type="text"/>
Hospice	<input type="text"/>
Mental Health Services	<input type="text"/>
Medical Nutrition Therapy	<input type="text"/>
Medical Case Management, including Treatment Adherence Services	<input type="text"/>
Substance Abuse Outpatient Care	<input type="text"/>
AIDS Drug Assistance Program Treatments	<input type="text"/>
Support Services	
Non-Medical Case Management Services	<input type="text"/>
Child Care Services	<input type="text"/>
Emergency Financial Assistance	<input type="text"/>
Food Bank/Home Delivered Meals	<input type="text"/>
Health Education/Risk Reduction	<input type="text"/>
Housing	<input type="text"/>
Linguistic Services	<input type="text"/>
Medical Transportation	<input type="text"/>
Outreach Services	<input type="text"/>
Psychosocial Support Services	<input type="text"/>
Referral for Health Care and Support Services	<input type="text"/>
Rehabilitation Services	<input type="text"/>
Respite Care	<input type="text"/>
Substance Abuse Services (residential)	<input type="text"/>
Other Professional Services	<input type="text"/>

Step Three: Validate the CDR Report

- Once the data has been entered, click “Validate” on the left Navigation panel.
- Correct errors before you submit your CDR Report. If the errors are triggered, you must correct the information. When you have finished updating your data, validate your report again.

Step Four: Submit the CDR Report

- When the CDR Report is complete, click “Submit” in the left Navigation panel.
- When prompted, enter a submission comment, certify the data are accurate, and click “Submit Report”.



Once your CDR Report is submitted, it cannot be unsubmitted.
Please ensure accurate data are entered prior to submitting.

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Chapter III: Data Collection & Reporting Requirements

This section reviews each item on the form and the reporting requirements.

Section 1: Organization-level Activities

What services were provided using telehealth during the reporting period?

Respondents should **select all that apply** from the available Core Medical Services and Support Services. If telehealth was not available or not provided, respondents should select, “Do not have telehealth capacity for any service/ Do not provide telehealth for any services.”

Refer to [PCN 16-02](#) for information on service category definitions and [Examples of Allowable Uses of Funds](#).

Core Medical Services:

- AIDS Drug Assistance Program (ADAP) Treatments
- AIDS Pharmaceutical Assistance
- Early Intervention Services (EIS)
- Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals
- Home and Community-Based Health Services
- Home Health Care
- Hospice
- Medical Case Management, including Treatment Adherence Services
- Medical Nutrition Therapy
- Mental Health Services
- Oral Health Care
- Outpatient/Ambulatory Health Services
- Substance Abuse Outpatient Care

Support Services:

- Child Care Services
- Emergency Financial Assistance
- Food Bank/Home Delivered Meals
- Health Education/Risk Reduction
- Housing
- Linguistic Services
- Medical Transportation
- Non-Medical Case Management Services
- Other Professional Services
- Outreach Services
- Psychosocial Support Services
- Referral for Health Care and Support Services
- Rehabilitation Services
- Respite Care
- Substance Abuse Services (residential)

Other:

- Do not have telehealth capacity for any service/ Do not provide telehealth for any services



Report all service categories that used telehealth during the reporting period **whether or not CARES Act funds were used for the service.**

Section 2: Clients Served

1. Is your provider site conducting COVID-19 testing?

Respondents should report “yes” or “no”.

If yes, how many RWHAP-eligible clients and their immediate household members were tested for COVID-19 in the reporting period?

Report the total number of RWHAP-eligible clients and their immediate household members tested for COVID-19.

2. Total number of RWHAP-eligible clients served in the reporting period with NEWLY IDENTIFIED COVID-19 (confirmed or presumed positive).

Report the total number of confirmed or presumed positive COVID-19 cases.



Number of RWHAP-eligible clients who received a new positive test result for COVID-19 or were presumed positive during the reporting period, regardless of where testing took place. Do not include immediate household members.

3. Total number RWHAP-eligible clients with COVID-19 (confirmed or presumed) served to-date as of [end date of the reporting period].

Report the total number of RWHAP-eligible clients with COVID-19 served.



Cumulative number of RWHAP-eligible clients with COVID-19 (or presumed positive) since January 20, 2020, served by the provider as of the last day of the reporting period. Do not include immediate household members.

4. Answer the following questions for the services provided using CARES Act funds for the prevention or treatment of COVID-19.

The table below should only include the number of RWHAP-eligible clients and immediate household members who received at least one service in the reporting period.



Those who received RWHAP services under multiple service categories should be counted one time in each service category.

Number of RWHAP-eligible clients and immediate household members who received service(s) in the reporting period:

	Total number of RWHAP-eligible clients and immediate household members receiving CARES Act funded services in the reporting period. Note: Those who received RWHAP services under multiple service categories should be counted one time in each service category.	Total #
Core Medical Services	AIDS Drug Assistance Program (ADAP) Treatments	Total #
	AIDS Pharmaceutical Assistance	Total #
	Early Intervention Services (EIS)	Total #
	Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	Total #
	Home and Community-Based Health Services	Total #
	Home Health Care	Total #
	Hospice	Total #
	Medical Case Management, including Treatment Adherence Services	Total #
	Medical Nutrition Therapy	Total #
	Mental Health Services	Total #
	Oral Health Care	Total #
	Outpatient/Ambulatory Health Services	Total #
	Substance Abuse Outpatient Care	Total #
Support Services	Child Care Services	Total #
	Emergency Financial Assistance	Total #
	Food Bank/Home Delivered Meals	Total #
	Health Education/Risk Reduction	Total #
	Housing	Total #
	Linguistic Services	Total #
	Medical Transportation	Total #
	Non-Medical Case Management Services	Total #
	Other Professional Services	Total #
	Outreach Services	Total #
	Psychosocial Support Services	Total #
	Referral for Health Care and Support Services	Total #
	Rehabilitation Services	Total #
	Substance Abuse Services (residential)	Total #



In each funded service category, include RWHAP-eligible clients and immediate household members who received the service using CARES Act RWHAP funds during the reporting period, for COVID-19 related prevention or treatment activities. Refer to the [Examples of CARES Act Funding by Service Category](#) for details on allowable services for immediate household members.

Chapter IV: Frequently Asked Questions

Who should complete the monthly report?

All providers (recipient-providers, subrecipient-providers, and second-level providers) who used CARES Act funding to provide RWHAP core medical or support services.

What clients should be reported?

RWHAP-eligible clients and their immediate household members (where indicated).

How many reports should each provider site complete?

Provider agencies should complete only one COVID-19 Data Report (CDR) for all funding streams (e.g., A provider site with RWHAP Part A and Part C CARES Act grants will complete one CDR each month).

Whom do I contact for further assistance?

The EHBs Customer Support Center can be reached at 1-877-464-4772 (8am-8pm ET, M-F) or you may submit your request at <http://www.hrsa.gov/about/contact/ehbhelp.aspx>.

For reporting requirements or submission assistance, Data Support can be reached at 1-888-640-9356 or RyanWhiteDataSupport@wrma.com.

Program-related questions should be directed to your assigned HRSA HAB Project Officer.



If you need EHBs technical assistance, please contact the EHBs Customer Support Center at 877-464-4772. If you need assistance navigating the RWHAP CDR system, please contact Data Support at 888-640-9356.



Additional resources can be found here:

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