| **#** | **Questions** | **Answers** |
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| **General Resources** | | |
| 1. | When will the presentation slides be available? | The webinar recording is usually available within 1 week of the webinar. The webinar slides and Q & A are usually posted within 2 weeks. You can find webinar archives on [TargetHIV](http://www.targethiv.org/dart/webinars). |
| 2. | When will the 2020 RSR Instruction Manual be released? | The 2020 RSR Instruction Manual will be released in the Fall on the [TargetHIV](https://targethiv.org/library/rsr-instruction-manual) website. For the time being, you can refer to the [2019 RSR Manual](https://targethiv.org/library/rsr-instruction-manual) for most questions.  Join the [DISQ listserv](http://www.targethiv.org/disq/subscribe) to receive a notification when the 2020 RSR Manual is available. |
| 3. | Will there be an EHB overview webinar? | Yes, the “[Overview of HRSA's Electronic Handbooks for Grant Recipients](https://targethiv.org/calendar/overview-hrsas-electronic-handbooks-grant-recipients-10-14-20)” webinar will take place on October 14th. The webinar recording, presentation slides, and Q&A summary will also be available for review after the webinar. Please keep in mind that this webinar is designed for direct recipients of RWHAP funding. For specific questions about the EHBs, contact the [EHBs Customer Support Center](https://www.hrsa.gov/about/contact/ehbhelp.aspx). |
| **CAREWare** | | |
| 4. | When will the new CAREWare build with changes reflecting changes to the RSR be released? Where can I find out more about these changes? | CAREWare Build 91 will be required for the 2020 RSR and will be released in mid-late October. Sign up for the [CAREWare listserv](https://list.nih.gov/cgi-bin/wa.exe?SUBED1=CAREWARE&A=1) to receive notifications for upcoming events and changes. For further questions, [contact the CAREWare Help Desk](mailto:cwhelp@jprog.com). |
| 5. | Will CAREWare host a webinar reviewing how the new build will address the 2020 changes? | Yes, HRSA HAB will present a CAREWare-specific webinar “CAREWare 6: Preparing Your 2020 RSR and New Features Review” on two days: [Tuesday, November 10th](https://targethiv.org/calendar/careware-6-2020-build-nov) and [Tuesday, December 1st.](https://targethiv.org/calendar/careware-6-2020-build-dec) |
| 6. | Can CAREWare collect data on RWHAP-related funding? | Yes, CAREWare has contracts that allow providers to specify RWHAP-related funding. Select the funding source for that particular contract. CAREWare is built to bring in eligible services into the file. |
| **CARES Act Funding** | | |
| 7. | Is COVID Care funding considered to be RWHAP-related funding? | CARES Act funding is considered RWHAP funding, not RWHAP-related funding.  CARES Act-funded services and RWHAP-eligible clients who received those services will be reported on the RSR. |
| 8. | Do subrecipients of CARES Act funding need to submit a Recipient Report? | No, subrecipients of CARES Act funding do not need to submit a Recipient report. The direct grant Recipient will submit the Recipient report. |
| 9. | If my organization is a RWHAP Part A recipient and a CARES Act recipient, do we need to complete two Recipient Reports for the 2020 RSR? | Yes, you should complete one Recipient Report for your Part A funding and one for your CARES Act funding. You will access each grant through the corresponding Grant folder in the EHBs. |
| 10. | Since the CDR only requires aggregate-level data about clients served by CARES Act funding, we had not expected to need to report client-level data on these clients. For those who don’t use CAREWare, what are the options for getting these data for the RSR? | Options for pulling client-level data on clients served with CARES Act funding will depend on the data system that you use. [Contact the DISQ Team](mailto:data.ta@caiglobal.org) to discuss your specific data process and get help pulling the data that you need. |
| 11. | My organization received CARES Act funds (not specifically for Ryan White recipients) for behavioral health services. However, the funds will be used in part to support Ryan White eligible clients. How should we report these services on the RSR? | CARES Act funding follows the same rules as eligible services reporting. You are not required to report behavioral health services that were funded exclusively by non-RWHAP/RWHAP-related funding. |
| 12. | If we collect our CARES Act data and RWHAP data in the same system and under the same contracts, do we need to separate the clients that received CARES Act services into a specific CARES Act Recipient Report? | The Recipient and Provider Reports for CARES Act funding will function just like any RWHAP base funding Recipient Report. You will submit one Provider Report that includes client-level data for all your funding sources; the RSR does not separate clients by funding stream.  For example, if you are a recipient of a CARES Act and Part C grant, you will submit 2 Recipient Reports and 1 Provider Report. |
| 13. | I am a recipient, and I received CARES Act funds. I am subcontracting with a Part C recipient to provide other services at their agency. They should be added as a provider to my grant in the EHBs, correct? Does the Part C need to do anything in their RSR to indicate to HRSA that the funds for certain services came from us? | As the recipient, you will need to add any contracts that you have with sub-recipients into the GCMS and indicate the services you are funding. This data will be pulled into your sub-recipients’ Provider Reports. |
| 14. | If we are funding MCM with both CARES Act funding and our regular RWHAP funds, in which column in the RSR should these visits be included (RWHAP Funding or CARES Act funding)? | The columns on the Service Information screen that indicate funding sources (RWHAP, RWHAP-related, EHE, CARES Act) are automatically generated from the information that recipients enter into the GCMS. You will only be able to edit the “Delivered” column within the Provider Report, by placing a check if the service was delivered, regardless of funding source. |
| **Data Systems & TRAX** | | |
| 15. | How can I determine if my specific data system/EHR software has integrated the 2020 changes? How can I use my data system to collect/report these new data? | The DISQ Team has contacts with several data systems and EHR software vendors. Please [reach out to DISQ](mailto:data.ta@caiglobal.org) to get connected with a representative from your data system vendor. |
| 16. | For those of us using TRAX, do the new client-level data elements go into the ClientReport extract file? | Because there is only one value allowed for each data element, they will be added to the ClientReport file in TRAX. The updated version of TRAX which includes the new data elements will be released later this fall. Subscribe to the [DISQ listserv](http://www.targethiv.org/disq/subscribe) to receive a notification when TRAX is available. |
| **RWHAP Funding & RWHAP-Related Funding** | | |
| 17. | Are non-RWHAP funded programs required to participate and complete the submission? | No, only RWHAP-funded recipients and providers are required to complete the RSR. |
| 18. | What is RWHAP-related funding (program income and/or pharmaceutical rebates). Where can I find examples of this funding category? | Services funded by RWHAP-related funding are services that are paid for with revenue  generated by the RWHAP; this includes program income and pharmaceutical rebates. This does NOT include services funded by other federal funding, other state or local funds, or  other sources of funding. See [PCN 15-03](https://hab.hrsa.gov/sites/default/files/hab/Global/pcn_15-03_program_income.pdf) (on program income) and [PCN 15-04](https://hab.hrsa.gov/sites/default/files/hab/Global/pcn_15-04_pharmaceutical_rebates.pdf) (on pharmaceutical rebates) for more information.  Also see [RSR In Focus: Understanding Eligible Services for 2019 Data](https://targethiv.org/sites/default/files/file-upload/resources/11-19%20Understanding%20Eligible%20Services%20for%202019%20Data.pdf) for examples of RWHAP-related funded services. |
| 19. | Do I need to report RWHAP-related funded services in the 2020 RSR? | Reporting RWHAP-related funded services is encouraged, but not required for the 2020 RSR. It will be required starting with the 2021 RSR that will be submitted in March 2022. |
| 20. | If a subrecipient is funded with program income and RWHAP grant dollars, would we have to submit two RSR Recipient reports for this subrecipient? | No, RWHAP base funding and program income (RWHAP-related funding) are both captured in your RWHAP base award Recipient Report. If you only have one RWHAP base award and RWHAP-related funding, you will still only complete one Recipient Report. |
| 21. | Do providers need to report clients and services even when the services received were not funded by RWHAP? | If the client 1) received at least one service during the reporting period that your organization was funded to provide with RWHAP and/or RWHAP-related funding (regardless of payor) and 2) the client is eligible to receive RWHAP and/or RWHAP-related funded services, then they should be reported on the RSR. |
| 22. | Are we supposed to report on HIV Medicaid/Medicare clients who receive OAHS? These services are not paid by RWHAP funds**.** | You should report RWHAP eligible clients regardless of who paid for the service. If you have a client who is RWHAP eligible but has another payor you should still be reporting that service because the client is eligible for RWHAP. |
| 23. | How many Recipient Reports does a recipient need to submit if they receive RWHAP, EHE, and CARES Act funding? | This recipient would need to submit three Recipient Reports – one for each source of funding. |
| **EHE Services** | | |
| 24. | If we are funded for OAHS services under the EHE contract, will OAHS visits be reported OAHS or EHE services? | OAHS is a RWHAP service as defined in [PCN 16-02](https://hab.hrsa.gov/sites/default/files/hab/program-grants-management/ServiceCategoryPCN_16-02Final.pdf), meaning these services would be reported as OAHS. The EHE service category should only include services funded by EHE that do not fit into a preexisting service category. |
| 25. | You referenced EHE being a catch-all for services outside of PCN 16-02. My understanding is that the EHE initiative is a specific award separate from RWHAP. Should we also use it as a catch-all for services funded by RWHAP and RWHAP-related funding? | No, the new EHE Initiative Services service category can only be used for EHE funding. |
| 26. | If a client receives an EHE-funded service that is not a RWHAP service as specified in [PCN 16-02](https://hab.hrsa.gov/sites/default/files/hab/program-grants-management/ServiceCategoryPCN_16-02Final.pdf), does it have to be reported on the RSR? | Yes. Use the new EHE Initiative service category to report any EHE funded services that fall outside the scope of RWHAP services as defined in [PCN 16-02](https://hab.hrsa.gov/sites/default/files/hab/program-grants-management/ServiceCategoryPCN_16-02Final.pdf). |
| 27. | How do I report the number of EHE Initiative services provided in the Client Level Data? | Report (1) EHE visit for each day a client receives a service that falls under the EHE Initiatives service category, no matter how many individual services or how many units of service within this category the client receives that day.  This guidance applies to all service categories in the RSR, such as OAHS, Mental Health, etc. |
| **New Client-Level Data Elements** | | |
| 28. | If a client has previously received a service at my agency but didn’t start receiving HIV care until this year, would this client be considered new? | No. Regardless of what service the client has received, if a client has a service from the agency, they would not be considered new on the RSR. The preference is to base this differentiation on RWHAP services received, rather than eligibility or non RWHAP services received.  If you have questions on a particular client or how your data system is set up, contact [Data Support](mailto:RyanWhiteDataSupport@wrma.com) or the [DISQ Team](mailto:Data.TA@caiglobal.org). |
| 29. | If a youth client transitions into an adult program, are they considered a new client? | No, a client is not considered new if they received a service within the provider’s care delivery system before the reporting period. |
| 30. | How will we indicate if a client is new? Is this done manually for each client? | If you have questions on how your data system is set up, contact the [DISQ Team](mailto:Data.TA@caiglobal.org). |
| 31. | Is a client’s determination as “new” dependent on the funding stream of the service they received? (i.e. If a client receives MCM which is funded by RWHAP, and mental health services funded by RWHAP-related funding, is this client considered “unique” for each funding stream?) | No, the type of service received and how that service is funded is not relevant to whether a client is considered “new” for RSR reporting purposes. |
| **XML Upload & Web System** | | |
| 32. | Who needs to submit an XML file? | If you are a direct service provider who receives any RWHAP or RWHAP-related funding (including Parts A, B, C, and D, CARES Act funding and EHE funding), you are expected to submit an XML file including client-level data. |
| 33. | How can providers check if their XML format is correct? Can providers submit multiple sample XML files for testing? | The RSR Web System includes a feature called Check Your XML that allows providers to check for schema compliance and data quality prior to the RSR system opening. Providers can test as many files as they wish, including uploading multiple files at the same time if needed.  Join DISQ for the “[RSR Check Your XML Feature” webinar](https://targethiv.org/calendar/rsr-check-your-xml-feature-11-18-20) on November 18th for more information on how to use this tool to check client-level data quality prior to submission. |
| 34. | If you have 1000 patients, do you need to submit a report about each patient and the services they received? | Client-level data will be submitted through an XML file, which will be uploaded within one Provider Report. Review the [RSR Manual](https://targethiv.org/library/rsr-instruction-manual) and the [Data Dictionary and Schema Implementation Guide](https://targethiv.org/library/ryan-white-services-report-rsr-data-dictionary-and-xml-schema-implementation-guide-client) for more detail on the structure and contents of the XML file. |
| 35. | Will a subrecipient be able to upload more than one client level data file in their Provider Report? This is helpful for grant services that are captured in CAREWare and program income services that will be uploaded from TRAX. | Yes, providers can upload more than one XML file to merge their client-level data from multiple sources. |
| 36. | Are immunizations, including flu shots, counted this year on the RSR? | Vaccinations and immunizations are no longer reported in the RSR client-level data. Keep in mind that the RSR is a data collection instrument and should not guide clinical practice. |
| 37. | Will subrecipients/provider access the RSR through the GCMS or through the EHBs? | As of the 2020 RSR, subrecipients/providers will now access the RSR through the EHBs. All affected subrecipients will receive further guidance from HAB on this change. |
| **ZIP Code Reporting** | | |
| 38. | Can providers upload multiple Excel spreadsheets of ZIP codes and have them combined/deduplicated in the RSR Web System? | The RSR Web system does not support uploading multiple Excel spreadsheets for client ZIP codes. Providers will still have to upload a single, combined ZIP code file.  If you require assistance, [contact the DISQ Team](mailto:data.ta@caiglobal.org). The DISQ Team can work with you on the best strategy for working with multiple data systems to create the ZIP code file. |
| 39. | How should providers enter ZIP codes for clients who are homeless? | For clients who are homeless or for whom their ZIP code is unknown, please enter the ZIP code of the provider agency. |