

CAREWare 6

August 2020

Miscellaneous Features Guide

Cap on Charges, Required Data Elements, Provider Summary,
and HIVQM File Export

CAREWare Quick Start Guides will walk you through the basics of setting up, managing, and using the main CAREWare functions. It is intended for non-technical users who need to get basic information in and out of CAREWare.

PLEASE NOTE: The client data used in these manuals is purely fictional.

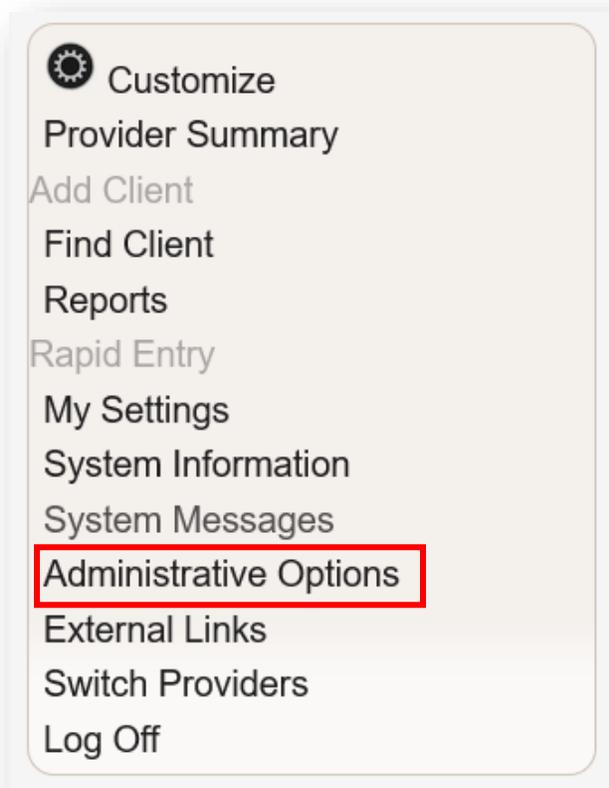
Cap on Charges

The Cap on Charges feature tracks a client's maximum out-of-pocket expenses for services, medications, and any other eligible miscellaneous purchase. The cap is derived from a formula based on a percentage of the client's individual (not household) income relative to the Federal Poverty Level (FPL). Once the cap is reached, the client is not responsible for further out of pocket expenses.

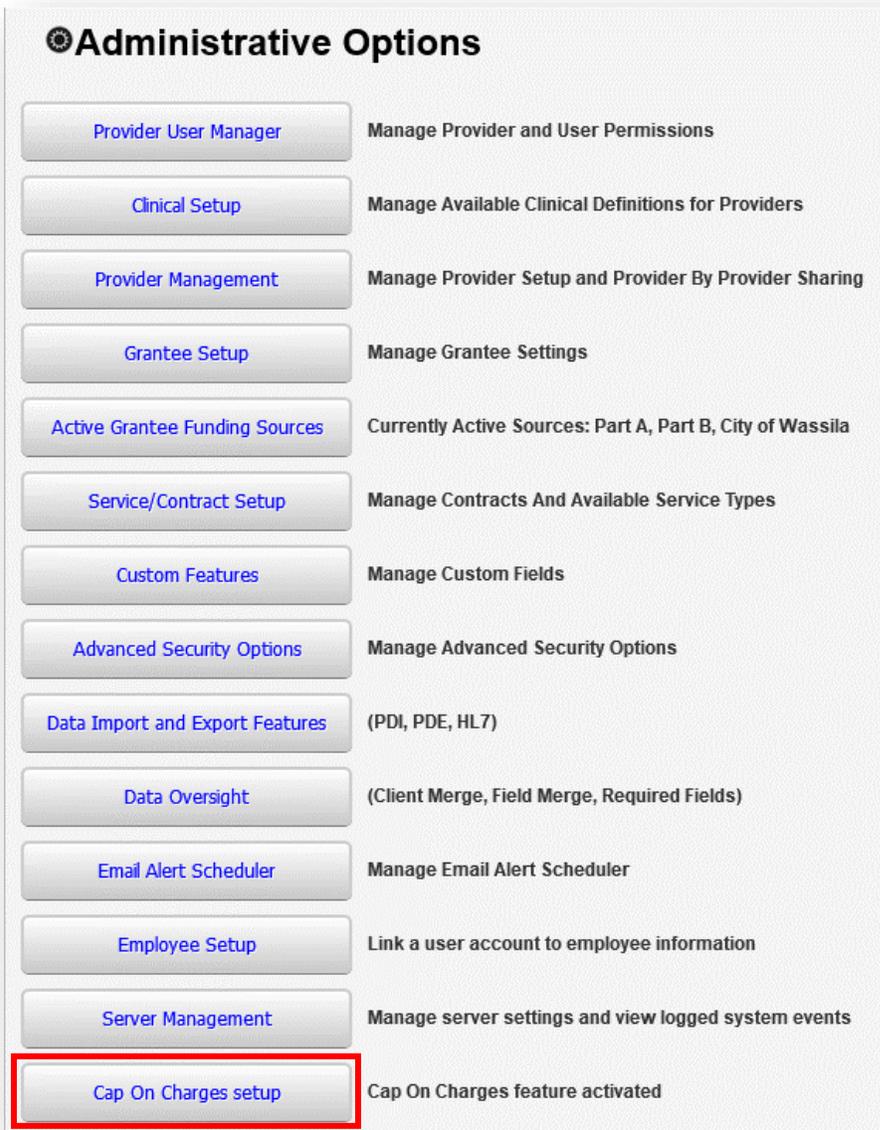
If you run CAREWare in a real-time network with multiple providers, the calculations will draw from all expenses incurred by the individual across the network.

To set up the Cap on Charges feature:

1. Log into CW6. For more details on how to do so, please refer to the [Navigating CAREWare Version 6.0 Guide](#). Log into the Central Administration domain of CW6.
2. Select **Administrative Options** from the **Main Menu**.



3. Select **Cap On Charges setup** from the link menu.



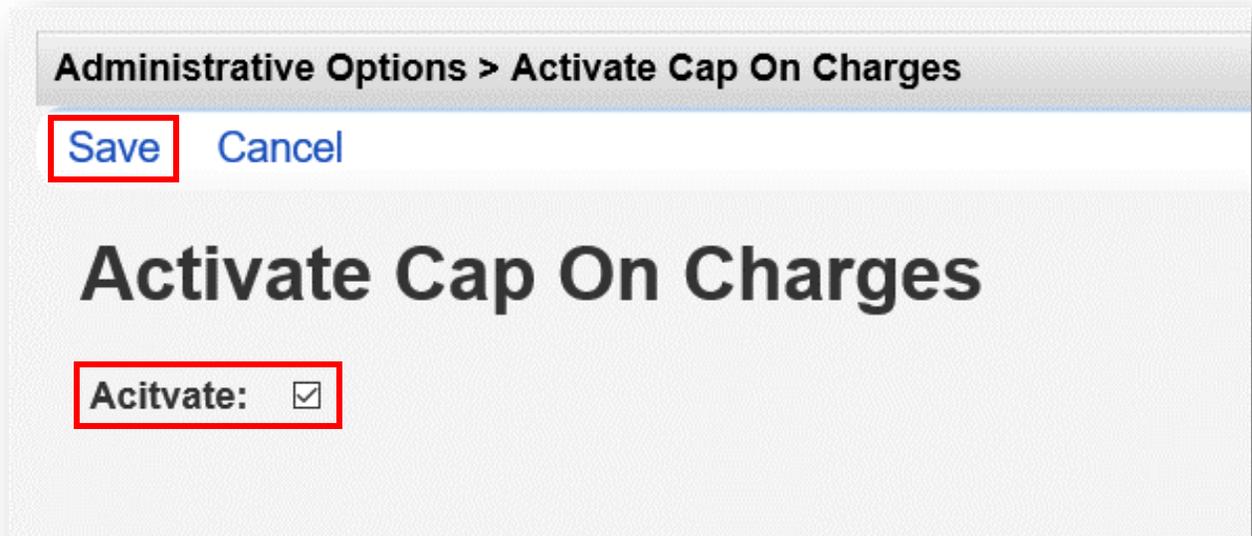
Administrative Options

Provider User Manager	Manage Provider and User Permissions
Clinical Setup	Manage Available Clinical Definitions for Providers
Provider Management	Manage Provider Setup and Provider By Provider Sharing
Grantee Setup	Manage Grantee Settings
Active Grantee Funding Sources	Currently Active Sources: Part A, Part B, City of Wassila
Service/Contract Setup	Manage Contracts And Available Service Types
Custom Features	Manage Custom Fields
Advanced Security Options	Manage Advanced Security Options
Data Import and Export Features	(PDI, PDE, HL7)
Data Oversight	(Client Merge, Field Merge, Required Fields)
Email Alert Scheduler	Manage Email Alert Scheduler
Employee Setup	Link a user account to employee information
Server Management	Manage server settings and view logged system events
Cap On Charges setup	Cap On Charges feature activated



NOTE: The Cap on Charges feature can only be activated for ALL providers. Selection of specific providers is not available.

4. Check **Activate** and then click **Save**.



Administrative Options > Activate Cap On Charges

Save Cancel

Activate Cap On Charges

Acitvate:

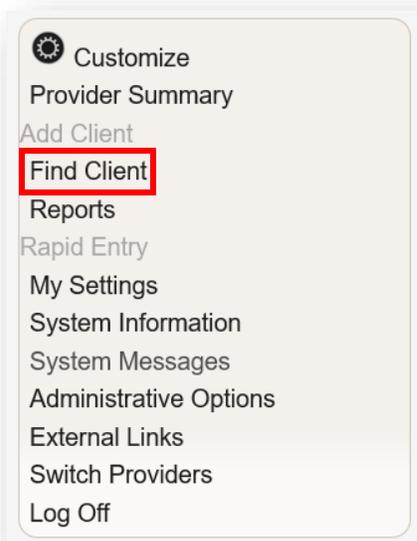
The client's total Annual Cap On Charges and Maximum Out-of-Pocket Expenses are based on where their annual income falls in relation to the Federal Poverty Level (FPL) guidelines, as follows:

Cap on Charges Federal Poverty Level (FPL) categories:

- Under 101% FPL = No annual cap or out-of-pocket expenses
- 101% - 200% FPL = 5% maximum out-of-pocket expenses
- 201% - 300% FPL = 7% maximum out-of-pocket expenses
- Over 300% FPL = 10% maximum out-of-pocket expenses

To begin tracking client out-of-pocket expenses:

1. Use the Find Client feature to open any client record in CW6.



- Navigate to the **Annual Review/Annual Data** page (see breadcrumb links for the navigation path). Ensure there is an Individual Income amount entered under the Poverty Level Assessment for the desired reporting period (calendar year). In this example, the Individual Income is reported as \$40,000.

[Annual Data](#) > [Poverty Level Assessments](#) > [View](#)

[Edit](#) [Back](#)

View

Date: 

Household Size:

Household Income: \$

Individual Income: \$

- Notice the client's FPL percentage equals 348% based on the reported individual income. Refer to the FPL percentage guidelines listed on page 3 of this manual. The client's maximum out-of-pocket expense for 2020 would be: \$4,000 (10% of \$40,000).

[Annual Data](#) > [Poverty Level Assessments](#)

[View](#) [Add](#) [Edit](#) [Delete](#) [Back](#) [Help](#) [Print or Export](#)

Poverty Level Assessments

Search:

Date	Household Size	Household Income	Individual Income	Federal Poverty Level
01/01/2020	2	\$60,000	\$40,000	348%

4. The client's Annual Cap of \$4,000 is listed in the Cap On Charges link description.

Cap On Charges

[Back](#)

Cap On Charges

[Annual Cap On Charges Summary](#) \$3,600.00 remaining to reach the annual cap of \$4,000.00

[Cap On Charges Ledger](#) [View or update Cap On Charges](#)

5. Click the **Annual Cap On Charges Summary** (see screenshot above). In the summary for 2020, the Year, Annual Cap, Total Paid (if any), and Difference (Annual cap minus Total Paid) are listed. A total of \$400.00 has been paid toward the maximum out-of-pocket expenses of \$4,000.00, leaving a balance of \$3,600.00 for 2020.

Cap On Charges > Annual Cap on charges summary

[Go To Ledger](#) [Back](#) [Print or Export](#)

Annual Cap on charges summary

Search:

Year	Annual Cap	Total Paid	Difference
2020	\$4,000.00	\$400.00	\$3,600.00
2019	\$0.00	\$150.00	(\$150.00)
2018	\$500.00	\$500.00	\$0.00

There are two (2) methods by which client out-of-pocket expenses are tracked in CW6: Through service receipts and/or the Cap on Charges Ledger.

Reporting Service Receipts

In the example below, the Receipt portion of a client service record has been edited, complete with Receipt Date, Amount, Source, and the Out of Pocket Expense checkbox selected. Enter a new client service or Edit any existing client service in the desired calendar year.

Demographics > Services > View > Receipts > View > Edit

Save Cancel

Edit

Receipt Date: 3/10/2020 

Amount: 50.00 \$

Source: copay

Out of Pocket Expense:



NOTE: The Out of Pocket Expense box must be checked for the receipt amount to be included in the Cap on Charges Ledger. See screenshot above.

Cap on Charges Ledger

In this example, an Out-of-Pocket Charge in the Cap On Charges Ledger has been added, complete with Receipt Date, Amount, and Description.

Demographics > Cap On Charges > Cap On Charges Ledger > View > Edit

Save Cancel

Edit

Out-of-Pocket Charge

Receipt Date: 6/17/2020 

Amount: 100.00 \$

Description: OTC supplements

Provider: Ryan White AIDS Care Treatment Clinic

For networked CW6 systems, the client's Cap On Charges will be tracked across multiple providers. For the year 2020, below are three (3) client payments, at two different providers, that are all counted toward their maximum out-of-pocket expenses:

Demographics > Cap On Charges > Cap On Charges Ledger

[View](#) [Add](#) [Delete](#) [Go To Summary](#) [Back](#) [Print or Export](#)

Cap On Charges Ledger

Search:

Date	Description	Amount	Provider	Service Receipt
06/17/2020	OTC supplements	\$100.00	Ryan White AIDS Care Treatment Clinic	
05/01/2020	MRI lab	\$250.00	Kevin's Clinic	
03/10/2020	copay	\$50.00	Ryan White AIDS Care Treatment Clinic	Yes

A total of \$400.00 has been paid toward the maximum out-of-pocket expenses of \$4,000.00, leaving a balance of \$3,600.00 for 2020 (see first screenshot on page 5).

Note: If the charge is a Service Receipt (such as the co-pay in the screenshot above), it will be indicated as such in the Service Receipt column.

Required Data Elements

This feature can be used to require specific client Demographic fields to be completed first, before allowing any other data entry for client records, including entering services, annual review, clinical information, etc.

1. Log into the Central Administration domain of CW6. Go to **Administrative Options** and then **Data Oversight**.

The screenshot shows the 'Administrative Options' page. On the left is a navigation menu with items like 'Customize', 'Provider Summary', 'Add Client', 'Find Client', 'Reports', 'Rapid Entry', 'My Settings', 'System Information', 'System Messages', 'Administrative Options' (highlighted), 'External Links', 'Switch Providers', and 'Log Off'. Below the menu is a notification: 'This is a test notification' and a reminder to contact the helpdesk for CAREWare 6. The main content area is titled 'Administrative Options' and contains several buttons with descriptions:

- Provider User Manager**: Manage Provider and User Permissions
- Provider Management**: Manage Provider Setup and Provider By Provider Sharing
- Grantee Setup**: Manage Grantee Settings
- Service/Contract Setup**: Manage Contracts And Available Service Types
- Custom Features**: Manage Custom Fields
- Advanced Security Options**: Manage Advanced Security Options
- Data Oversight**: (Client Merge, Field Merge, Required Fields) (highlighted)
- Email Alert Scheduler**: Manage Email Alert Scheduler

2. Select **Required Data Elements**.

The screenshot shows the 'Data Oversight Features' page. It contains several buttons with descriptions:

- Client Merge**: Merge duplicate client records
- Required Data Elements**: Manage the required data elements settings for providers (highlighted)
- Field Merge**: Merge custom fields
- Definition Merge**: Merge test definition or medications
- Archive and Purge Data**: Globally archive user activity data and purge the rows from the database
- User Activity Archive Setup**: Configure how to store user action and change history data

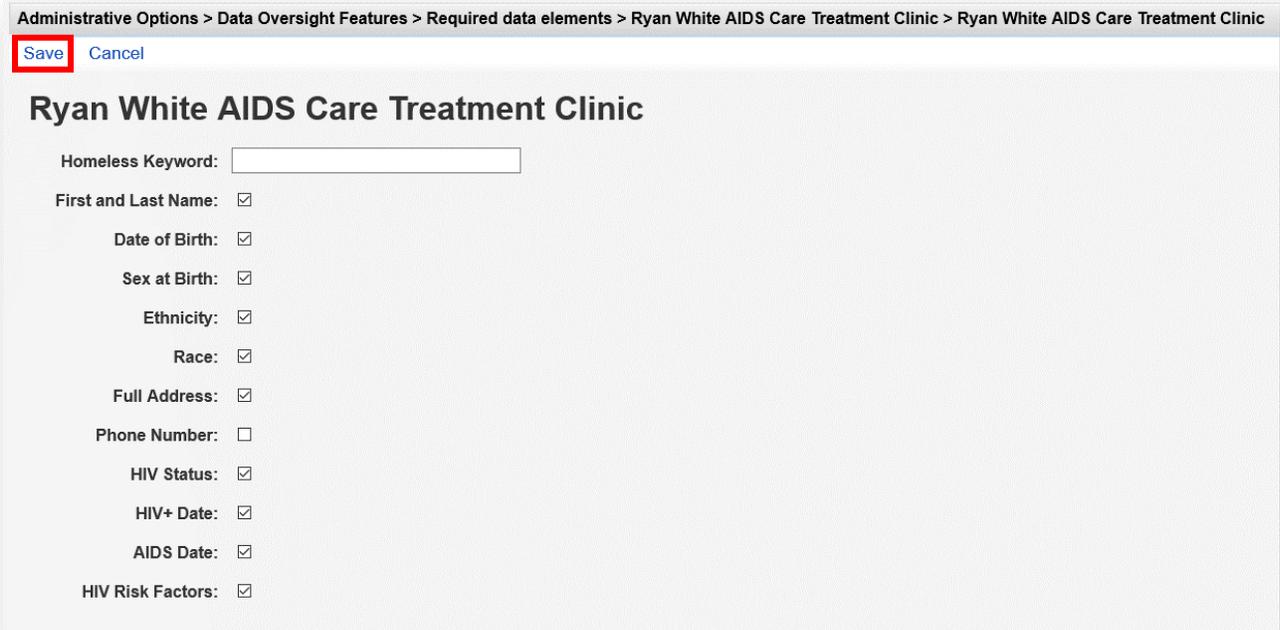
3. Select a Provider from the list. Click **Manage Selected Provider** from the action bar. As an example, we have selected the Ryan White AIDS Care Treatment Clinic provider.

The screenshot shows a web interface with a breadcrumb trail: **Administrative Options > Data Oversight Features > Required data elements**. Below the breadcrumb, there is an action bar with three items: **Manage Selected Provider** (highlighted with a red box), **Back**, and **Print or Export**. The main heading is **Required data elements**. Below the heading is a search bar with the text **Search: Ryan White**. Underneath the search bar is a table with a header **Provider** and one row containing **Ryan White AIDS Care Treatment Clinic**, which is highlighted with a red box.

4. Click **Edit**. Select which data elements are to be required from the list.

The screenshot shows a web interface with a breadcrumb trail: **Administrative Options > Data Oversight Features > Required data elements > Ryan White AIDS Care Treatment Clinic**. Below the breadcrumb, there is an action bar with three items: **Edit**, **Copy to Providers**, and **Back**. The main heading is **Ryan White AIDS Care Treatment Clinic**. Below the heading is a list of data elements with checkboxes. The entire list is enclosed in a red box. The items are: **Homeless Keyword:** (text input field), **First and Last Name:** , **Date of Birth:** , **Sex at Birth:** , **Ethnicity:** , **Race:** , **Full Address:** , **Phone Number:** , **HIV Status:** , **HIV+ Date:** , **AIDS Date:** , and **HIV Risk Factors:** .

5. Click **Save**. In this example we have chosen all fields, except Phone Number and the Homeless Keyword fields.



Administrative Options > Data Oversight Features > Required data elements > Ryan White AIDS Care Treatment Clinic > Ryan White AIDS Care Treatment Clinic

Save Cancel

Ryan White AIDS Care Treatment Clinic

Homeless Keyword:

First and Last Name:

Date of Birth:

Sex at Birth:

Ethnicity:

Race:

Full Address:

Phone Number:

HIV Status:

HIV+ Date:

AIDS Date:

HIV Risk Factors:

The Required Data Elements feature is now activated for this provider. All client Demographic fields (selected above), will now need to be completed before any other data entry in client records is allowed, including entering services, annual review, and clinical information.

Provider Summary

The Provider Summary feature allows graphic display of Performance Measure outcomes. The measures and provider summary will be updated once a day. Default HAB and custom performance measures can be configured. The Provider Summary also includes client look-up lists for those that meet (Numerator), and those that do not meet (Not in Numerator), the performance measure criteria.

To set up the Provider Summary feature, follow these instructions:

1. Log into the Central Administration domain of CW6 (Provider Summaries can only be setup if you have access to Central Administration). Go to **Administrative Options** and then **Custom Features**.

The screenshot shows the 'Administrative Options' page. On the left sidebar, the 'Administrative Options' menu item is highlighted with a red box. The main content area displays a list of administrative options, with 'Custom Features' also highlighted by a red box. The options listed are:

Option	Description
Provider User Manager	Manage Provider and User Permissions
Provider Management	Manage Provider Setup and Provider By Provider Sharing
Grantee Setup	Manage Grantee Settings
Service/Contract Setup	Manage Contracts And Available Service Types
Custom Features	Manage Custom Fields and provider/client summaries
Advanced Security Options	Manage Advanced Security Options
Data Oversight	(Client Merge, Field Merge, Required Fields)
Email Alert Scheduler	Manage Email Alert Scheduler

2. Select **Provider Summary**.

Custom Feature Setup

- [Custom Fields](#) Create custom data fields and place them in various domains and user screens
- [Custom Service Data Entry Rules](#) Manage Custom Service Rules
- [Client Menu Link Management](#) Manage external links that appear on the client menu
- [Main Menu Link Management](#) Manage external links for the main menu
- [Incoming URL Lookup](#) Manage http query fields for incoming data lookup requests
- [Form Designs](#) Manage Form Designs
- [Client Summary Designer](#) Create, design, and assign Client Summary Screens
- [Provider Summary](#)** Create, configure, and assign Provider Summary (PS) screens

In this example, a new Provider Summary will be created from the Central Administration domain. This summary will include two (2) performance measure outcome results. One from a custom created performance measure, and the other from a default HAB Core performance measure.

3. Click **New Summary** from the Action Task bar.

Administrative Options > Custom Feature Setup > Provider Summary

[Configure Charts](#) [Edit Name](#) [New Summary](#) [Delete](#) [Assign Providers](#) [Back](#) [Print or Export](#)

Provider Summaries

Search:

Summary Name	Summary Type	Mapped Providers
Default Summary	Default	55
assigned 2	Assigned	1

4. Enter the new **Provider Summary Name**. In this example, the provider summary name was entered as New Provider Summary. Click **Save**.

Administrative Options > Custom Feature Setup > Provider Summary

[Save](#) [Cancel](#)

New Summary

Provider Summary Name:

5. Select the newly created WRMA Provider Summary from the list. Click **Configure Charts**.

Administrative Options > Custom Feature Setup > Provider Summary

[Configure Charts](#) [Edit Name](#) [New Summary](#) [Delete](#) [Assign Providers](#) [Back](#) [Print or Export](#)

Provider Summaries

Search:

Summary Name	Summary Type	Mapped Providers
New Provider Summary	Assigned	0
Default Summary	Default	55
assigned 2	Assigned	1

6. Click **Add Bar Graph**.

Administrative Options > Custom Feature Setup > Provider Summary > New Provider Summary Chart Configuration

[Edit](#) [Add Pie Chart](#) [Add Bar Graph](#) [Delete](#) [Move Up](#) [Move Down](#) [Back](#) [Print or Export](#)

New Provider Summary Chart Configuration

Search:

Description	Type

The bar graph chart will report data on a custom performance measure created in CAREWare “New 6mo New Clients within the Last 6 Months.”

The **Days Between Measurements** default value is 90 days. This setting determines the date span used on the bar graph for two previous results. In this example, the bar graph results are 90-days apart (Note: This setting is only available when using the bar graph chart).

The **Title** was entered as “New Clients.” The measure is designed to identify any new clients within the last 6 months (Note: Default values for Title Properties and Bar Graph Properties were used).

7. Click **Save**.

8. To add a pie chart, click **Add Pie Chart**.

The pie chart will report data on a default HAB performance measure in CAREWare, “Core01 – HAB HIV viral load suppression.” The Title field was entered as “Viral Suppressed Clients in Measurement Year.” The measure is designed to identify clients with a viral load test result of

199 or lower within the last 12 months (Note: Default values for Title Properties and Pie Chart Properties were used).

9. Click **Save**.

Administrative Options > Custom Feature Setup > Provider Summary > New Provider Summary Chart Configuration

Save Cancel

Add Pie Chart

Performance Measure: Core01 - HAB: HIV viral load suppression

Title: Viral Suppressed Clients in Measurement Year

Title Properties

Title Text Color: Black

Title Font Size: 24

Title Italics:

Pie Chart Properties

Numerator Color: Green

Numerator Text Color: Black

Numerator Font Size: 24

Numerator Italics:

Not In Numerator Color: Red

Not In Numerator Text Color: Black

Both Summary Charts are now listed:

Administrative Options > Custom Feature Setup > Provider Summary > New Provider Summary Chart Configuration

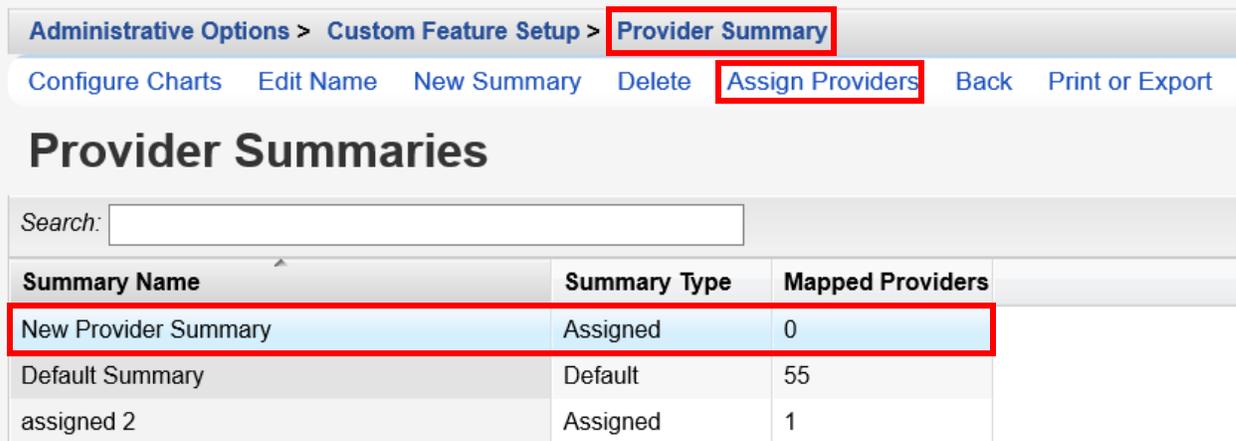
Edit Add Pie Chart Add Bar Graph Delete Move Up Move Down Back Print or Export

Search:

Description	Type
New Clients	Bar Graph
Viral Suppressed Clients in Measurement Year	Pie Chart

Setup of a new Provider Summary is complete, which consists of two performance measures, "New Clients," and "Viral Suppressed Clients in Measurement Year." The Provider Summary is assigned to ALL or specific provider domains in CAREWare. To assign the Provider Summary to specific providers:

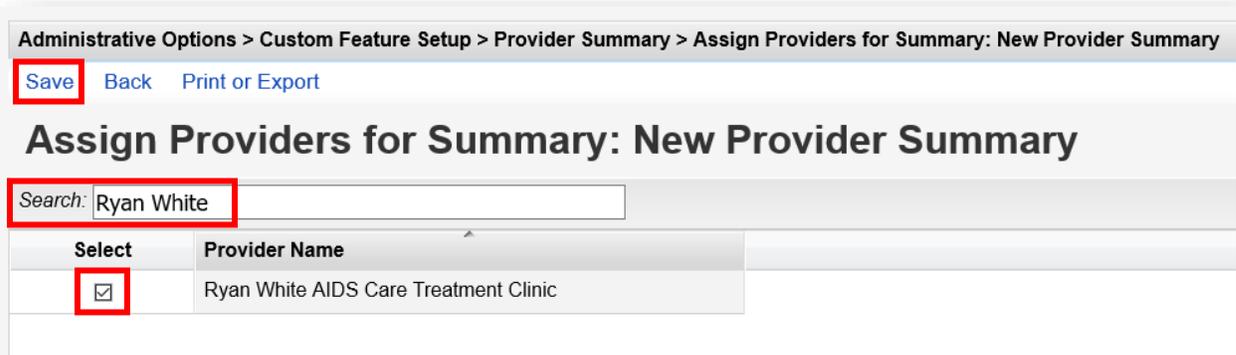
- From the **Provider Summary** link, select the desired Summary (in this case, New Provider Summary), and click **Assign Providers** from the Action Task bar.



The screenshot shows the 'Provider Summary' page. The breadcrumb trail is 'Administrative Options > Custom Feature Setup > Provider Summary'. The action bar contains 'Configure Charts', 'Edit Name', 'New Summary', 'Delete', 'Assign Providers', 'Back', and 'Print or Export'. The main heading is 'Provider Summaries'. Below it is a search box. A table lists the summaries:

Summary Name	Summary Type	Mapped Providers
New Provider Summary	Assigned	0
Default Summary	Default	55
assigned 2	Assigned	1

- We have filtered for the Ryan White AIDS Care Treatment Clinic provider in the Search box. Check the Select box. Click **Save**.



The screenshot shows the 'Assign Providers for Summary: New Provider Summary' page. The breadcrumb trail is 'Administrative Options > Custom Feature Setup > Provider Summary > Assign Providers for Summary: New Provider Summary'. The action bar contains 'Save', 'Back', and 'Print or Export'. The main heading is 'Assign Providers for Summary: New Provider Summary'. Below it is a search box containing 'Ryan White'. A table lists the providers:

Select	Provider Name
<input checked="" type="checkbox"/>	Ryan White AIDS Care Treatment Clinic

The Mapped Providers column for New Provider Summary now lists the number one - 1. This indicates how many providers have been assigned to this Summary Name.

Administrative Options > Custom Feature Setup > Provider Summary

[Configure Charts](#) [Edit Name](#) [New Summary](#) [Delete](#) [Assign Providers](#) [Back](#) [Print or Export](#)

Provider Summaries

Search:

Summary Name	Summary Type	Mapped Providers
New Provider Summary	Assigned	1
Default Summary	Default	55
assigned 2	Assigned	1

We will now switch from the Central Administration domain to the Ryan White AIDS Care Treatment Clinic domain to view the Provider Summary results.

1. Click **Switch Providers** from the Main Menu on the left. In this example, we have selected the Ryan White AIDS Care Treatment Clinic. Click **Switch Providers** in the Action Task bar.
2. Note that the "Switch Providers" option *will only show for users that have been granted the right to log into multiple provider domains.*

Customize

- Provider Summary
- Add Client
- Find Client
- Reports
- Rapid Entry
- My Settings
- System Information
- System Messages
- Administrative Options
- External Links
- Switch Providers**
- Log Off

Switch Providers

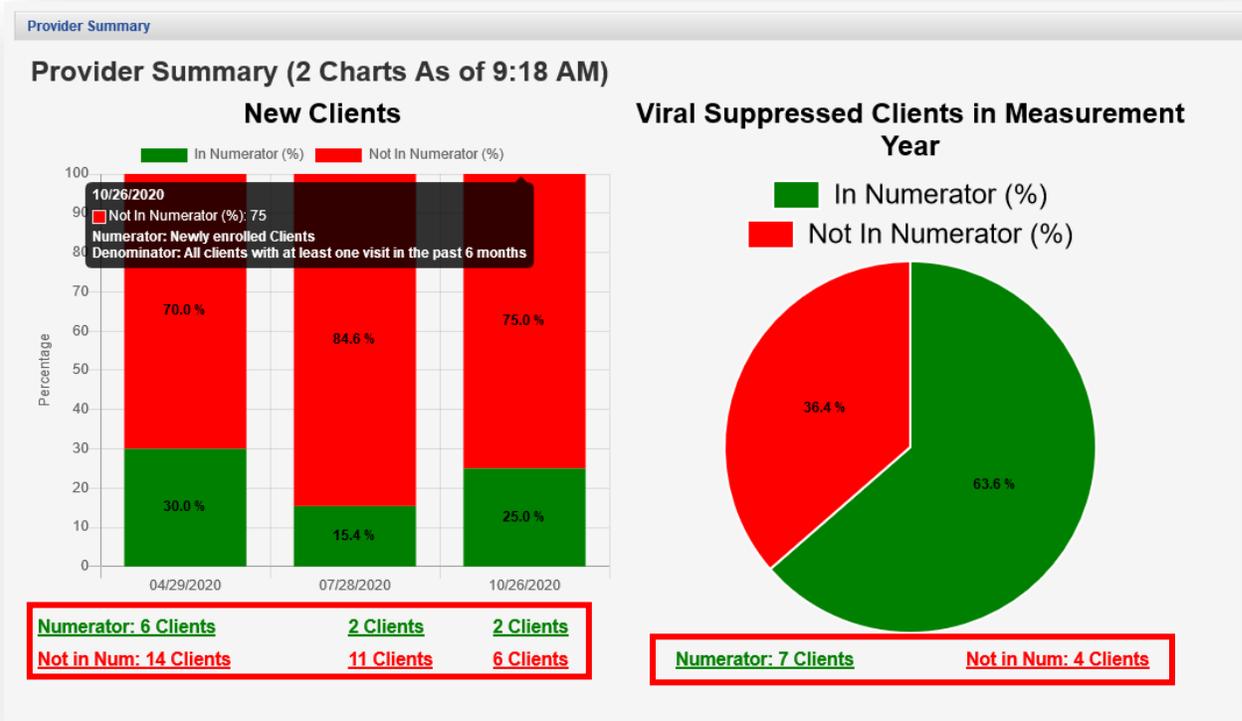
[Switch Providers](#) [Back](#) [Print or Export](#)

Choose a new provider

Search:

Provider
Central Administration
Kevin's Clinic
Ryan White AIDS Care Treatment Clinic
State ADAP Program
WRMA (DO NOT EDIT)

- The Provider Summary results are automatically displayed adjacent to each other upon login to the Ryan White AIDS Care Treatment Clinic domain. Hovering over the charts provides additional information about the numerator and denominator.



Note that if you have more than two charts, they will be placed below the two above. CAREWare indicates how many charts are shown and the time that they were last updated.

If you make changes to the graphs, or to your underlying data, and want to redraw the graphs, follow the bread crumbs listed below, highlight the Provider of interest and hit "Recalculate."

Administrative Options > Custom Feature Setup > Provider Summary > Assign Providers for Summary: New Webinar Provider Summary

Save **Recalculate** Back Print or Export

Assign Providers for Summary: New Webinar Provider Summary

- Clicking on any of the green or red links (see above screenshot) will bring up a list of clients that fall into the relevant categories (Numerator or Not in Num). Click **Go To Client** to pull up a specific client record.

Provider Summary > New Clients (In Numerator as of 07/28/2020)

[Go To Client](#) [Back](#) [Print or Export](#)

New Clients (In Numerator as of 07/28/2020)

Search:

Client	Viewed
Badland, Abbi	
Covida, Anna	

- Additional Provider Summaries can be created and configured as desired in CAREWare 6. One or more Provider Summaries can be assigned to ALL providers or selected providers. Provider Summary results are clearly displayed upon user login to the provider domain.
- In addition, the Provider Summary creates client look-up lists of those that meet or do not meet summary criteria. Users can use the Go To Client link to identify clients in the Numerator or Not in Numerator sections of the Provider Summary.

(Note: It may take several minutes for a newly created, edited, or recently assigned Provider Summary to be displayed on the provider domain screen.)

HIVQM CSV File Export

This feature can be used to generate a .csv file for upload to the HAB HIVQM Module. The .csv file will include performance measure results, for one or more selected measures, including numerator, denominator, and percent totals.

There is also the option to export the .csv file in the HIVQM Format for upload to the HRSA HIVQM Module.

To export the .csv file, follow these instructions:

1. Log into a Provider domain of CW6. Go to **Reports** and then **Performance Measures**.

The screenshot displays the CAREWare Reports interface. On the left is a navigation sidebar with the following items: Customize, Provider Summary, Add Client, Find Client, Reports (highlighted with a red box), Rapid Entry, Appointments, My Settings, System Information, System Messages, Administrative Options, External Links, Switch Providers, and Log Off. Below the sidebar, there is a note: "This space intentionally left not blank." and a message: "We hope that you enjoyed the virtual National Ryan White conference last week." The main content area is titled "CAREWare Reports" and contains a list of report options, each with a button and a description:

Report Name	Description
HRSA Reports	RSR and ADR
Custom Reports	Run or manage custom reports
Performance Measures	Run or Manage Performance Measures
Client Data Reports	Run reports on client information
Financial Report	Setup and run the financial report
RDR	Manage/Run the RDR
EHE Triannual Report	Manage/Run the EHE Triannual Report
Mailing Labels Report	Setup and run the Mailing Labels Report

2. Select HIVQM Export Groups.

CAREWare Reports > Performance Measures

Back

Performance Measures

Run Performance Measures	Evaluate the current status of one or more performance measures
Create Client List	Examine clients in the performance measure sections
Create Aggregate Report	Track results for a performance measure over time
Set up, Copy, and Customize Performance Measures	Manage the list of available performance measures
Import Performance Measures	Import external performance measures from file
Export Performance Measures	Create an export containing performance measure configurations
Setup Client Tab	Configure the performance measure tab within the client record
HIVQM Export Groups	Manage HIVQM Export Groups

3. Select a Group Name from the list. We have selected the CORE Group (01 – 04), which is the group of performance measures we will be running. For more information, see the [Performance Measure Portfolio](#). Click **Evaluate** from the action bar.

CAREWare Reports > Performance Measures > HIVQM Export Groups

Evaluate Add Edit Delete Select Performance Measures Back Print or Export

HIVQM Export Groups

Search:

Group Name
BillTest1
CORE Group (01 - 04)
HAB_Group1
HCV HIV Qual NC
NQC Syph

- Click **Set HRSA Submission Timeframe** from the action bar.

CAREWare Reports > Performance Measures > HIVQM Export Groups > Performance Measure Settings

Change Open In New Tab PDF CSV Set to Last 365 Days **Set HRSA Submission Timeframe** Back

Performance Measure Settings

Parameters

Performance Measure Group: CORE Group (01 - 04)

Begin Date: 11/3/2019

End Date: 11/2/2020

HIVQM Format:

- In this example, we have selected the HRSA Timeframe of 7/1/2019 – 6/30/2020 for the reporting period and 2020 for the year. Click **Save**.

CAREWare Reports > Performance Measures > HIVQM Export Groups > Performance Measure Settings > HRSA Timeframes for HIVQM Export

Save Cancel

HRSA Timeframes for HIVQM Export

Year: 2020

Reporting Period:

- 4/1/2019 - 3/31/2020
- 7/1/2019 - 6/30/2020**
- 10/1/2019 - 9/30/2020
- 1/1/2020 - 12/31/2020

- Click **Change** from the action bar. Select the **HIVQM Format** checkbox. Click **Save** (the Save button will replace the Change link).

CAREWare Reports > Performance Measures > HIVQM Export Groups > Performance Measure Settings

Change Open In New Tab PDF CSV Set to Last 365 Days Set HRSA Submission Timeframe Back

Performance Measure Settings

Parameters

Performance Measure Group: CORE Group (01 - 04)

Begin Date: 7/1/2019

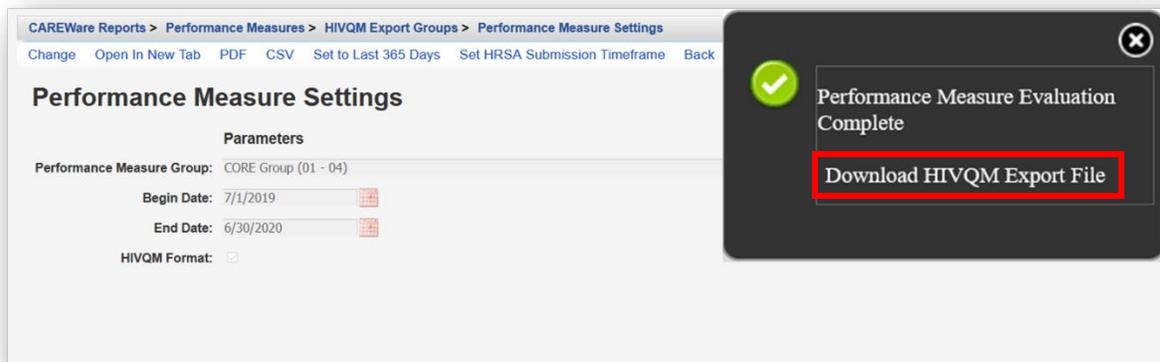
End Date: 6/30/2020

HIVQM Format:

7. Click **CSV** from the action bar.



8. Click **Download HIVQM Export File**. Save the file to your computer and then open the file to view it.



The following is a sample HIVQM .csv file, in the HRSA HIVQM Format, for HAB Core (01 – 04) Performance Measures.

The report is a single .csv file, which for readability, is shown in three (3) separate sections below:

Provider ID	Provider Name	Software Name	Measure ID	Measure name	
1234	Ryan White AIDS Care Treatment Clinic	CAREWare	Core03	HAB: HIV medical visit frequency	
1234	Ryan White AIDS Care Treatment Clinic	CAREWare	Core01	HAB: HIV viral load suppression	
1234	Ryan White AIDS Care Treatment Clinic	CAREWare	Core04	HAB: Gap in HIV medical visits	
1234	Ryan White AIDS Care Treatment Clinic	CAREWare	Core02	HAB: Prescription of antiretroviral therapy	
Report Start Date	Report End Date	Report Creation Date	Records Reviewed	Numerator	Denominator
7/1/2019	6/30/2020	10/29/2020	24	0	5
7/1/2019	6/30/2020	10/29/2020	24	4	9
7/1/2019	6/30/2020	10/29/2020	24	2	3
7/1/2019	6/30/2020	10/29/2020	24	68	125
MinAge	MaxAge	Gender	Race/Ethnicity	HIV Risk Factor	

Note: MinAge, MaxAge, Gender, Race/Ethnicity, and HIV Risk Factor: If you run measures stratified by any of these demographic factors, their corresponding codes will be populated.

The codes are:

Min Age	Minimum age if age range set
Max Age	Max age
Gender	1=Male; 2=female; 3=Transgender(all); 4=Trans MtoF; 5=Trans FtoM 6=Trans unk 9=Unk
Race/ethnicity	1 = American Indian/Alaska Native 2 = Asian 3 = Black/Afr. American 4 = Hispanic /Latinx (any race) 5 = Nat Haw/Pac. Island 6 = White 7 = Multiracial
HIV risk	1 = Male to Male sexual contact (MSM) 2 = Injection drug use (IDU) 3 = MSM and IDU 4 = Heterosexual contact 5 = Perinatal transmission 6 = Other 9 = unknown

For further details regarding submission of the HIVQM Module, refer to the [HIV Quality Measures Module Manual](#).