

Completing the EHE Triannual Provider Report

Ending the HIV Epidemic (EHE) Triannual Report HRSA HIV/AIDS Bureau September 7, 2021





Hello everyone and welcome to today's webinar, "Completing the EHE Triannual Provider Report".



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Today's Webinar is presented by Brian McBee from RWHAP Data Support, the experts on RWHAP reporting requirements, and myself representing the DISQ team's work with client-level data. Today, Brian will review step-by-step instructions for how to complete the EHE Triannual Provider Report and provide information on the submission timeline and other technical assistance resources available. Please note, this webinar is intended for service providers who receive EHE funds either directly from HRSA HAB or from a recipient agency. If your agency does not provide EHE services, our webinar from last week on the EHE Recipient Report may be more suitable for you.

Throughout the presentation, we will reference some resources that we think are important. To help you keep track of these and make sure you have access to them immediately, my colleague Audrey is going to chat out the link to a document right now that includes the locations of all the resources mentioned in today's webinar.

At any time during the presentation, you'll be able to send us questions using the "Q&A" function on your settings on the bottom of the screen. All questions will be answered live at the end of the webinar, so make sure to stay on until the end to see all your questions answered.

Now before we start, I'm going to answer one of the most commonly asked questions about the slides. The recording of today's webinar will be available on the TargetHIV website within one week of the webinar; the slides and written question and answer are usually available within two weeks.



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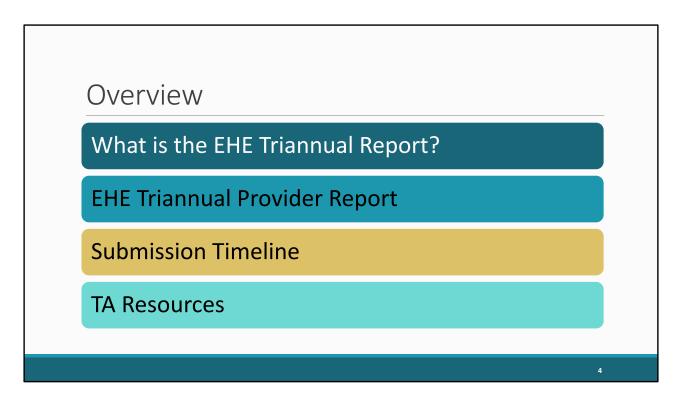
The DISQ Team is comprised of CAI, Abt Associates, and Mission Analytics and is supported by HRSA of HHS as part of a cooperative agreement totaling \$4,000,000.00.

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Now I'd like to turn the webinar over to Brian.



Thanks, Ruchi. Our presentation topic for today is the EHE Triannual Provider Report. We'll start off by taking a look at some background information and reviewing what exactly the EHE Triannual Report is and who needs to complete it. Then we'll move on to the EHE Triannual Provider Report, where EHE-funded providers submit their aggregate data. And then we'll close out our presentation with a look at the EHE submission timeline as well as the TA resources available to assist you. Let's get started.



But let's jump to a poll question to see how experienced you all are at submitting the EHE Triannual Report.

How many times have you submitted the EHE Triannual Report previously?

- I have never submitted before.
- I have submitted once before.
- I have submitted 2-3 times.

What is the EHE Triannual Report?

- Aggregate data report submitted three times a year by Ending the HIV Epidemic (EHE) recipients and EHE-funded providers
- Includes data on services received and antiretroviral therapy (ART) prescription for new and existing clients
- Consists of two parts:

EHE Triannual Recipient
Report

Including the Grantee Contract Management System (GCMS) EHE Triannual Provider
Report

6

So, what is the EHE Triannual Report? The EHE Triannual Report is an aggregate data report submitted three times a year by EHE recipients and EHE-funded providers of services. Organizations that use EHE funding to provide services will submit aggregate data on the services their clients receive and prescription of ART, specifying whether these clients are new or existing clients. The EHE Triannual submission is comprised of two parts: the EHE Recipient Report which includes the Grantee Contract Management System (or GCMS) and the EHE Provider Report. For today's presentation we're just going to be discussing the EHE Triannual Provider Report.

EHE Triannual Provider Report

- Completed by EHE-funded providers
 - Each provider completes an individual report
 - Recipients may submit the report on behalf of their providers
- Providers enter aggregate data on the number of clients receiving certain RWHAP services as well as the number of clients prescribed ART
- Providers submit report which then must be accepted by their recipient(s)

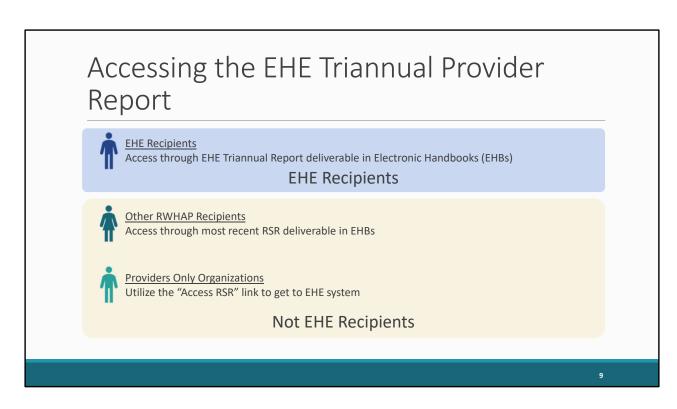


7

The EHE Triannual Provider Report is submitted by EHE-funded providers. Each provider must complete an individual report and while it's always preferred that providers complete their own reports since they are closest to their own data, recipients are able to submit on behalf of their providers. As part of this report providers will enter aggregate data directly into the system on the number of clients receiving certain service categories as well as the number of clients prescribed ART during the reporting period. Once providers have done that, they can submit their report at which point, their recipient(s) will go in and either accept the report or return it back to the provider for changes.



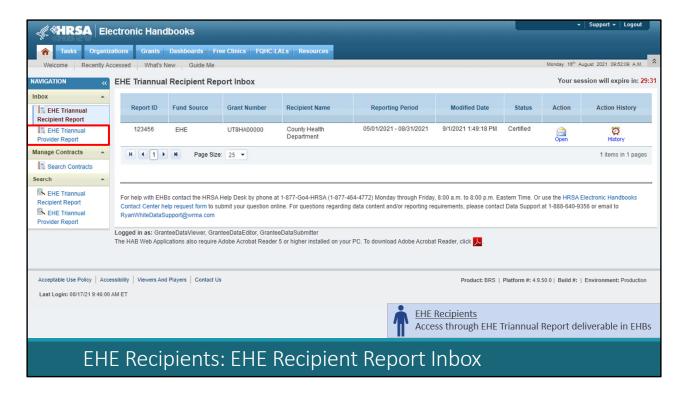
So, let's go ahead and now walk through the EHE Provider Report.



The way organizations will access the EHE Provider Report differs depending on what kind of organization they are, and I'll walk through each of these methods more in depth on the upcoming slides. EHE recipients have the simplest process, just open up your EHE deliverable in the EHBs and then select the EHE Provider Report inbox.

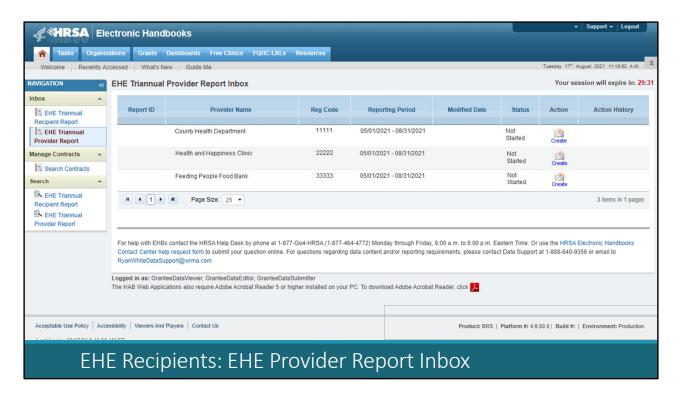
If your organization is not an EHE recipient but is an other RWHAP recipient, such as a RWHAP Part C or D recipient, that receives EHE funding to provide services, you will access the EHE system through your most recent RSR deliverable in the EHBs.

And lastly, if your organization is a provider only, then you'll use the "Access RSR" link once you log in and then navigate to the EHE inbox.



So, let's start out with EHE recipients. We are in the EHE Recipient Report inbox. This is where you get after selecting your EHE submission in the EHBs. If you need a refresher on how to get to this point, check out the last webinar, we presented for the EHE Recipient Report or the EHE Manual contains instructions for getting to this point as well. And if you or your providers, anybody on the webinar today, if you need help navigating the system, you can always reach out to us at Data Support for assistance.

From here, select "EHE Triannual Provider Report" under the Inbox header in the Navigation panel on the left side of the screen.

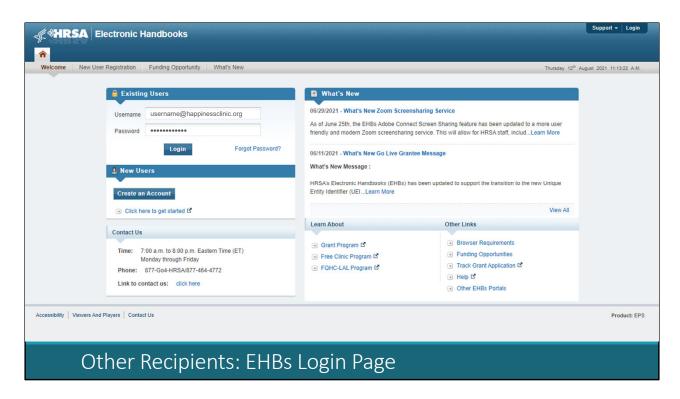


You'll be taken to the EHE Provider Report inbox where you can see all the EHE Provider Reports associated with your grant.

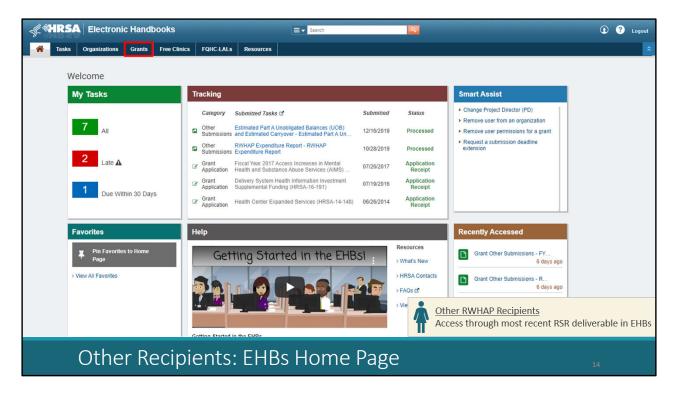


Now let's take a look at the steps for other RWHAP recipients. As a reminder, these are organizations that are not direct EHE recipients but are the recipient of another RWHAP grant (such as a RWHAP Part C or Part D recipient) that receive funding from an EHE recipient to provide services.

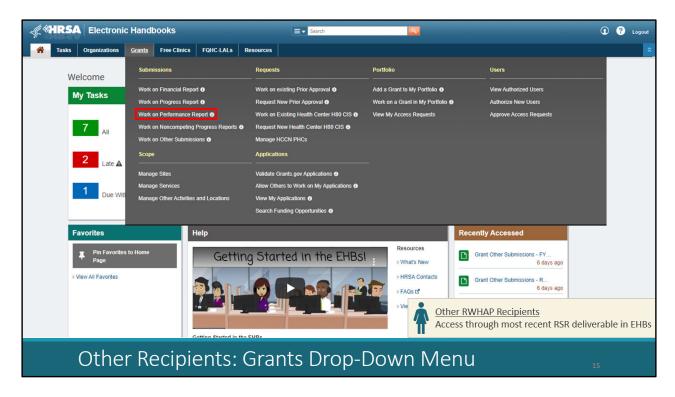
We're back at the main EHBs landing page. You'll login the same way you normally do, starting with selecting the "Applicant/Grantee" box at the top left of the page.



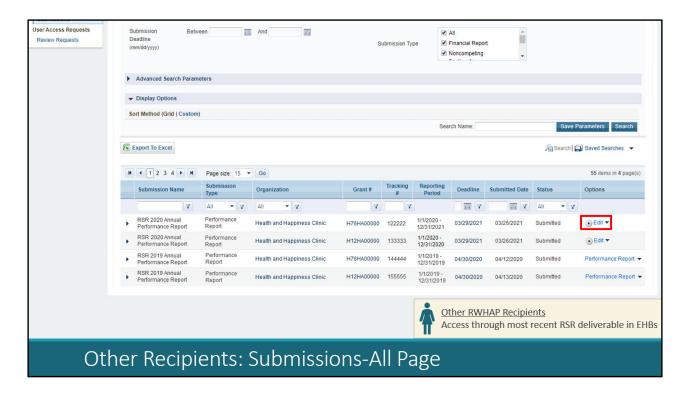
Login by entering your username and password, and then select the "Login" button.



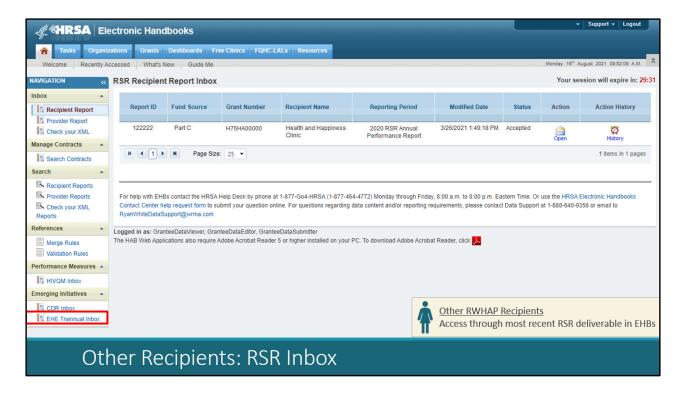
Once you have logged in, you'll be at the EHBs Home page. Hover over the "Grants" tab at the top of the page.



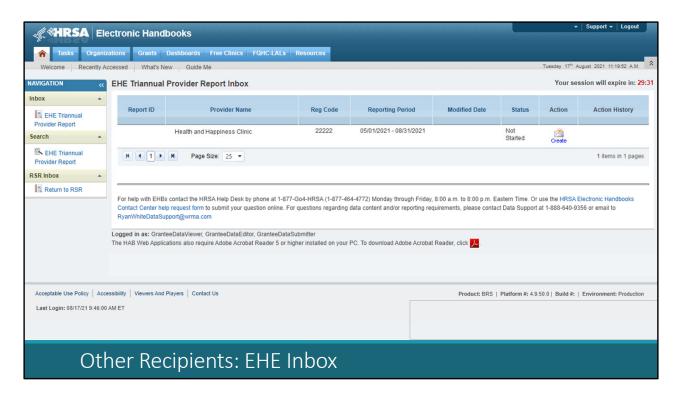
And then select "Work on Performance Report" from the drop-down menu.



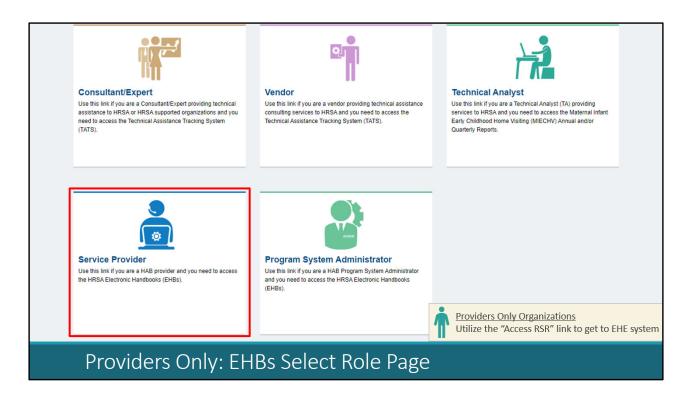
On the next page, Submissions-All, scroll down to get to your list of submissions and locate your most recent RSR. This organization in our example has both a RWHAP Part C and a RWHAP Part D grant so we have two for 2020. We'll select the first one here, and then access the RSR system by selecting "Edit" under the "Options" column on the right side of this table.



That will then take you to the RSR system. You can see the RSR Recipient Report in the center of the page here. To get to the EHE system, select "EHE Triannual Inbox" all the way at the bottom of the Navigation panel on the left side of the screen.

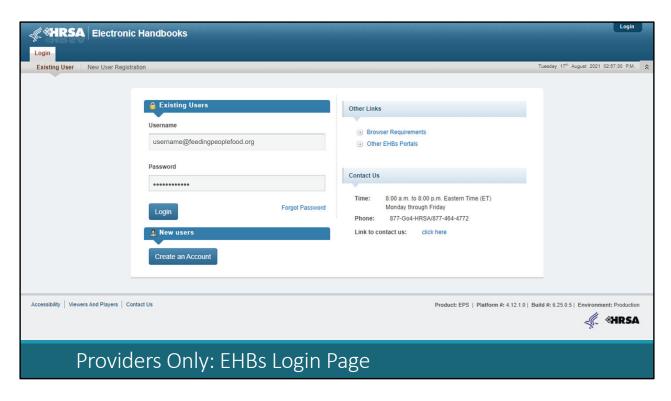


That will take you directly to the EHE Provider Report inbox where you can open up and work on your report.

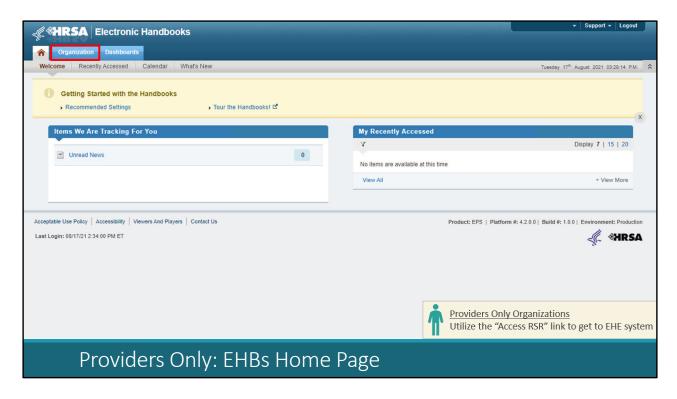


Now let's move on to the last set of instructions for getting to the EHE Provider Report for providers only organizations. These are organizations that are not the direct recipient of any RWHAP grant but do receive EHE funding from an EHE recipient to provide services.

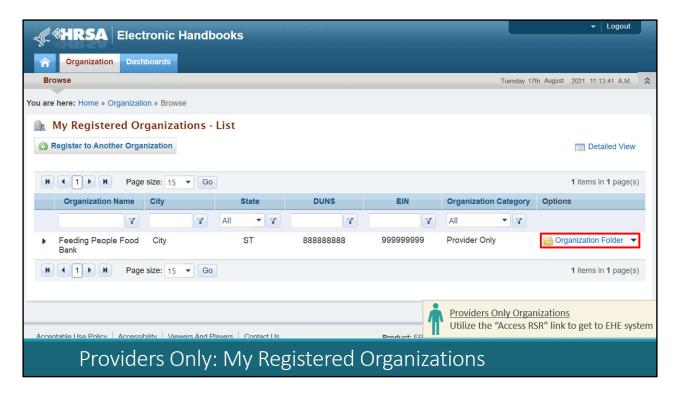
We're back at the starting point for the EHBs again and I'll go ahead and scroll down. Providers will log in to the system using the "Service Provider" box at the bottom left of this screen.



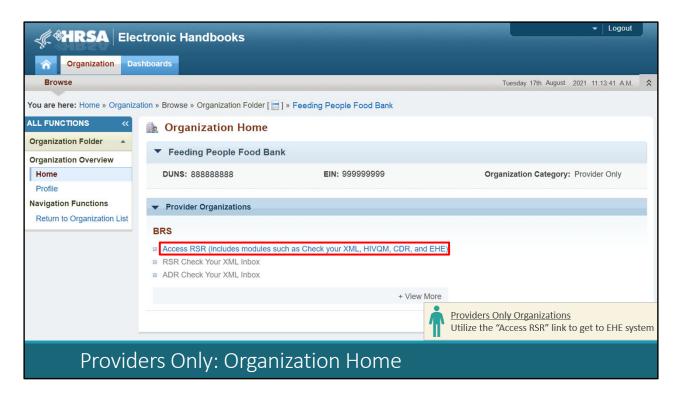
Log in by entering your username and password, and then selecting the "Login" button.



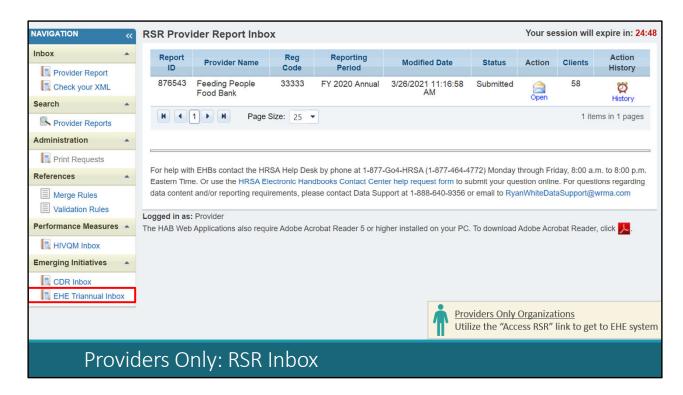
On the Home page, select the "Organization" tab at the top of the screen.



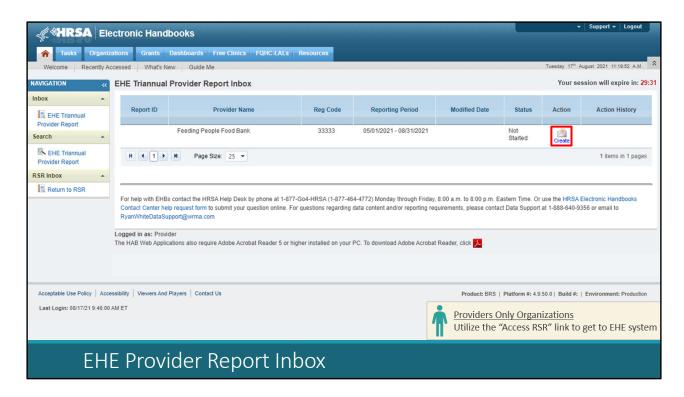
The next page will show you the organizations your account is registered to. Locate your organization and then select the "Organization Folder" under the "Options" column on the right side of the table.



On the "Organization Home" page, select the "Access RSR" link in the center of the page which you'll notice mentions that it also includes EHE.

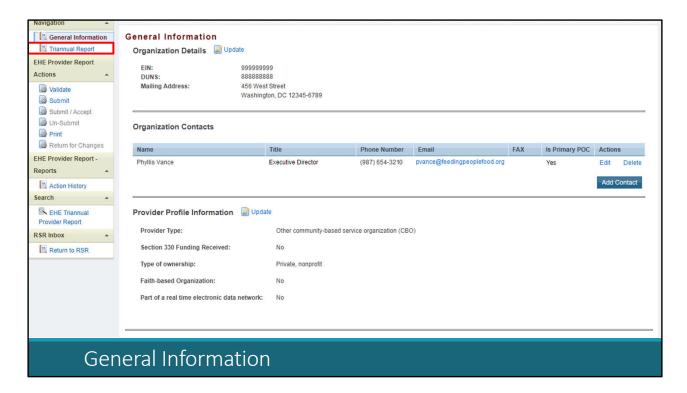


That will take you to the RSR Provider Report inbox. Just like we saw earlier, to get to the EHE system, look all the way at the bottom of the Navigation panel on the left side of the screen and select "EHE Triannual Inbox."



That will take you right to the EHE Provider Report inbox.

So, that was a lot of instructions on just getting to the EHE Provider Report but let's go ahead and look at how you all will actually complete it. To get started, select the envelope icon under the "Action" column to open up the report.

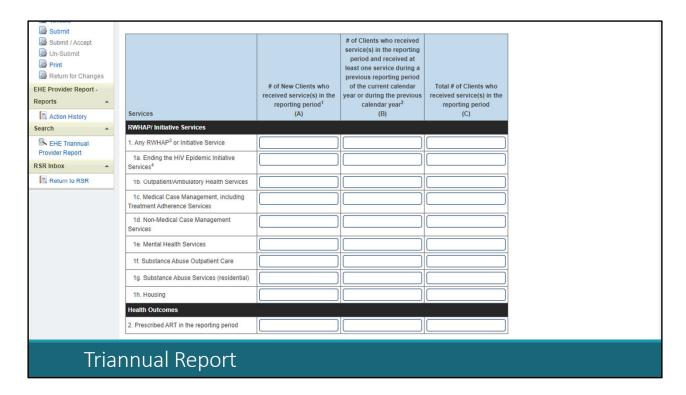


When you open up your report, you'll be taken to the first section, General Information. This section contains three different parts with information prepopulated from prior EHE/RSR submissions. The first section, Organization Details, contains your organization's EIN, DUNS number, and mailing address. If you need to make any changes to this section, select the "Update" link to the right of the section header, make your edits and select "Save." As a reminder, the DUNS number is being updated to the Unique Entity Identifier (or UEI) but that doesn't require any action from you all at this time.

The next section is Organization Contacts. Again, make sure that this information is up to date. If you need to edit or remove one of the contacts listed, you can make those changes under the far-right Actions column. Or if you need to add a new contact, you can use the "Add Contact" button under the contacts table.

And then the last section in General Information is Provider Profile Information. This section contains a few different organization characteristics and, much like the first section on this page, if you need to make any changes here, select the "Update" link to the right of the section header.

Once you have reviewed all the information in this section and made sure it is accurate and up-to-date, move on to the next and last section of the report, the Triannual Report, by selecting "Triannual Report" in the Navigation panel on the left side of the screen.



I'll go ahead and scroll down here so we can better see the table in the center of the page. This table is where you will do your data entry. Every box here does require a response. So, if you don't have any data to report for one of the fields here, just enter a zero.

Once you've entered a value for every field scroll down to the bottom of the page, and then select the "Save" button at the bottom right.

But now that you know what it looks like in the system let's move ahead to the next slide and discuss the data that go into this table.

EHE Data Table				
For each row report three client counts: Column A: New clients			# of Clients who received service(s) in the reporting period and received at	
Column B: Existing clientsColumn C: Total clients	Services	# of New Clients who received service(s) in the reporting period ¹ (A)	least one service during a previous reporting period of the current calendar year or during the previous calendar year ² (B)	Total # of Clients received service(s) reporting perio
 Two sections of table: RWHAP/Initiative Services: Report number of clients that received each service during the reporting period Health Outcomes: Report number of clients served during the reporting period that were prescribed or continued ART 	RWHAP/I Initiative Services 1. Any RWHAP ³ or Initiative Service 1a. Ending the HIV Epidemic Initiative Services 1b. Outpatient/Ambidatory Health Services 1c. Medical Case Management, including Treatment Adherence Services 1d. Non-Medical Case Management Services 1d. Non-Medical Case Management Services 1f. Substance Abuse Outpatient Care 1g. Substance Abuse Outpatient Care 1g. Substance Abuse Services (residential) 1h. Housing Health Outcomes 2. Prescribed ART in the reporting period			

Now for all sections you're going to be reporting three different client counts, represented by these three columns. In the first column, Column A, you'll be reporting new clients. New clients are those RWHAP clients that never received services from the provider in the past. So, for example, this upcoming reporting period, which is May 1 to August 31, 2021, these would be clients that were seen during that time period but had never been seen by your organization before May 1, 2021.

The second column, Column B, represents existing clients. In this column, you'll report clients who also received services during a previous reporting period either in the current or the prior calendar year. So, for example, for this upcoming reporting period, these would be clients seen between May 1 and August 31, 2021, that were also seen by your organization at some point during January 1, 2020, to April 30, 2021, the time periods that represent the previous reporting periods in this year 2021 and last year 2020.

And then the last column, Column C, pretty straightforward, is just the total number of clients. So, all clients seen by your organization during the reporting period. As such, for each row of the table, Column C must be greater than or equal to the total of Columns A and B. You obviously can't have more new or existing clients served than your total clients served.

Let's switch and take a look at the rows of the table now. The first section is on services with a total of 9 rows, each being a different service. For each row report the number of clients who received the service during the reporting period. So, for example, if we're looking at Row 1e here, Mental Health Services, we'll report the number of new clients that received Mental Health Services during the reporting period in Column A, the number of existing clients who received Mental Health Services during the reporting period in Column B, and the total number of clients that received Mental Health Services during the reporting period in Column C.

Going through each row here, Row 1 is Any RWHAP or Initiative Service. So, if a client received any RWHAP or EHE Initiative service, they would be reported here. This is an unduplicated count of your clients served. The other 8 rows correspond to specific service categories, including EHE Initiative Services,

Outpatient/Ambulatory Health Services, Medical Case Management, Non-medical Case Management, Mental Health Services, Substance Abuse Outpatient, Substance Abuse (residential), and Housing. As such, much like we saw with the columns and how Column C must be greater than A and B, Row 1 must be greater than the values for Rows 1a through 1h. You can't have more clients served with a specific service category than any

service category.

I also want to point out Row 1a here, EHE Initiative Services. This is for the EHE Initiative Services service category which are services funded through EHE Initiative funding that do not meet the definition of a RWHAP service. Which is to say, this is not just saying report all clients served with EHE funding.

Looking at our table the majority of it is taken up by the Services section but there is one additional section here, Health Outcomes. In this section there is one row, Prescribed ART during the reporting period. Again, providers will report the number of clients served during the reporting period that were prescribed ART splitting those clients up into new, existing, and total clients. And since the clients you're reporting here are clients served during the reporting period, the values for each column must be less than or equal to the values you entered for Row 1, the total clients served with any service.

Data Reporting Requirements

- Report all HIV-positive clients that received a direct service during the reporting period regardless of payor or RWHAP eligibility
- Report clients who received direct services funded by one or more of the following funding sources:
 - o EHE
 - o RWHAP
 - o RWHAP-related funding (program income or pharmaceutical rebates)
 - CARES Act
- Data are not required for services not funded by one of these sources
- Only report on ART for clients who were prescribed ART during the reporting period via Outpatient/Ambulatory Health Services (OAHS) or any other mechanism through which ART could be prescribed or provided (e.g., Rapid ART programs under EHE Initiative Services, bundled services, etc.)



29

But let's go over a few data reporting requirements to understand just what data you all need to be reporting. You'll be reporting on all HIV-positive clients that received a direct service during the reporting period, regardless of the final payor for the service or whether or not the client is RWHAP eligible.

Providers should report those clients who received direct services that are funded through either EHE funding, RWHAP funding (including RWHAP Parts A, B, C, and D), RWHAP-related funding such as RWHAP-related program income or pharmaceutical rebates, and CARES Act funding, if still applicable. If you do not fund one of those specific services that we saw in the table with any one of these funding sources, then you do not need to report data for that service category. But this still means that only EHE-funded providers need to complete the EHE Triannual Provider Report. If you only receive say regular RWHAP funding, you won't be completing this report even though that funding is included here.

Now for that additional row at the bottom on ART prescription, there is a slight change in how you'll be reporting here. Previously, you would only report on ART for clients that received Outpatient/Ambulatory Health Services (or OAHS). But now you'll report on ART for clients who were prescribed or continued on it during the reporting period via OAHS or any other mechanism through which ART could be prescribed. So, if you're funding say a Rapid ART program under EHE Initiative Services you would report clients prescribed ART through that as well now in your EHE data. And like I said on the previous slide this is still your clients served during the reporting period, so your clients served that were prescribed or continued on ART during the reporting period.

First State Housing Hell Initiative Services (Rapid ART) Yolanda New HIV-positive client that was prescribed ART through our rapid ART program and received: EHE Initiative Services Food Bank/Home Delivered Meals Food Bank/Home Delivered Meals Pharmaceutical Rebates From State From HaB Fro	Da	ata	a Reporti	ng Exam	nple			
Yolanda New HIV-positive client that was prescribed ART through our rapid ART program and received: • EHE Initiative Services • Food Bank/Home Delivered Meals 1. Any RWHAP³ or Initiative Service 1. Loutpatient/Ambutatory Health Services 1. Coutpatient/Ambutatory Health Services	From County Health Department Housing EHE Initiative		Grant From HAB OAHS Medical	Rebates From State Food Bank/Home	Services	received service(s) in the reporting period ¹	service(s) in the reporting period and received at least one service during a previous reporting period of the current calendar year or during the previous calendar year ²	received service(s) in the reporting period
Yolanda New HIV-positive client that was prescribed ART through our rapid ART program and received: • EHE Initiative Services • Food Bank/Home Delivered Meals 1a. Ending the HIV Epidemic Initiative Services 1b. Outpatient/Ambulatory Health Services 1c. Medical Case Management, including Treatment Adherence Services 1c. Medical Case Management Services 1c. Medical Ca								
		Nev pre AR	w HIV-positive client scribed ART through I program and receiv HE Initiative Service	n our rapid ved: s	1a. Ending the HIV Epidemic Initiative Services* 1b. Outpatient/Ambulatory Health Services 1c. Medical Case Management, including Treatment Adherence Services 1d. Mon-Medical Case Management Services 1e. Mental Health Services 1f. Substance Abuse Outpatient Care 1g. Substance Abuse Services (residential) 1h. Housing Health Outcomes			
					2. Prescribed ART in the reporting period			

So, let's take a look at an example to help clarify how you all should be reporting clients and services in the EHE Triannual Report. We have our provider, and they receive three sources of funding. They receive EHE funding from the County Health Department, they have their own RWHAP Part C grant, and they also receive rebate dollars from the state. They provide Housing and EHE initiative services with their EHE funding, OAHS and Medical Transportation with their Part C grant, and Food Bank/Home Delivered Meals with the rebate dollars. And we'll say in our example the EHE Initiative Services we are providing are Rapid ART. So, this provider is going to need to report on all of the services listed here since these are all one of those funding sources we saw on the previous slide: EHE funding, RWHAP funding (their Part C grant), and RWHAP-related funding (the pharmaceutical rebate dollars).

And let's move that up here so we can have that for reference. And then here is the table we saw a couple slides ago where you enter your data for the report.

So, let's start with our first client, Yolanda. Yolanda is a new client to our clinic; we have never seen her before. She received EHE Initiative Services and Food Bank/Home Delivered Meals during the reporting period which are funded by EHE funding and RWHAP-related funding, those rebate dollars, respectively. In other words, Yolanda is an HIV-positive client that received a direct service that we are funded to provide so we should be reporting her.

With that information looking at the table over on the right here where we're going to add our numbers as we go along, we can report Yolanda under the new client column (because remember she has never been seen by our agency before) as having received any RWHAP or Initiative service in Row 1 and EHE Initiative services in Row 1a. She was prescribed ART through our EHE Initiative Services rapid ART program, so we can count her under Row 2 as well. And then we'll also include her under the same fields for Column C as well which is our total clients.

Data Reporting Example								
EHE Funding From County Health Department		RWHAP Part C Grant From HAB	Pharmaceutical Rebates From State			# of Clients who received service(s) in the reporting period and received at least one service during a previous reporting period		
HousingEHE Initiative Services (Rapid AR)	Т)	OAHSMedical Transportation	 Food Bank/Home Delivered Meals 	Services	# of New Clients who received service(s) in the reporting period ¹ (A)	of the current calendar year or during the previous calendar year ² (B)	Total # of Clients who received service(s) in the reporting period (C)	
				RWHAP/Initiative Services 1. Any RWHAP ³ or Initiative Service	1	1	2	
	Bruce HIV-positive client continuing ART that was last seen in 2020 and received:			1a. Ending the HIV Epidemic Initiative Services ⁴	1		1	
				1b. Outpatient/Ambulatory Health Services		1	1	
				1c. Medical Case Management, including Treatment Adherence Services				
				1d. Non-Medical Case Management Services				
		DAHS		1e. Mental Health Services				
	_			1f. Substance Abuse Outpatient Care				
	Medical TransportationMental Health Services			1g. Substance Abuse Services (residential)				
				1h. Housing				
				Health Outcomes				
				Prescribed ART in the reporting period	1	1	2	
							31	

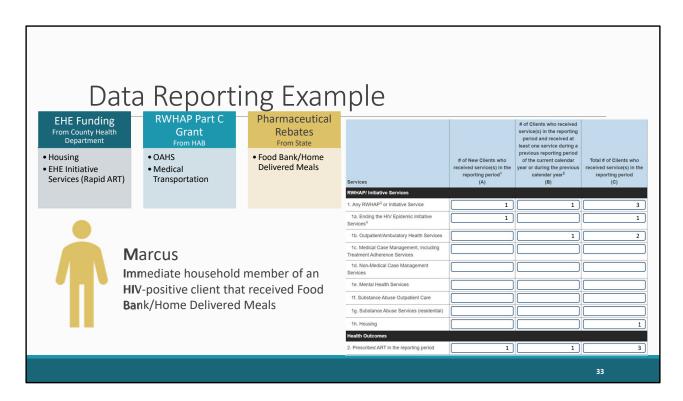
So, let's move on to the next client but we'll keep our table as is and update it as we go along. Next, we have Bruce. Now Bruce is not a new client for us. We saw him during a previous reporting period last year. He came to us and received three services: OAHS, Medical Transportation, and Mental Health Services. Since he is an HIV-positive client that we saw during the previous year, 2020, he would be listed under the second column for our existing clients.

OAHS and Medical Transportation are both RWHAP funded services for us so we would report him under Row 1. Any RWHAP or Initiative Service and we'll update our total clients here as well and Row 1a. for OAHS, again updating our total too. Medical Transportation is not one of the selected categories in the table, so we don't have to report that service in any of the other rows. Bruce also received Mental Health Services. While Mental Health Services does have its own row in the table (row 1e), this service was not funded by any of our funding streams here: EHE funding, RWHAP funding, or RWHAP-related funding. Therefore, we don't need to report on Mental Health Services. Bruce is prescribed and continued on ART during the reporting period and was seen for OAHS, so we are going to report him row 2 as well for existing clients, and then update the total clients as well.

Data Reporting Example									
EHE Funding From County Health Department Housing EHE Initiative		RWHAP Part C Grant From HAB OAHS Medical	Pharmaceutical Rebates From State • Food Bank/Home Delivered Meals		# of New Clients who received service(s) in the reporting period ¹	# of Clients who received service(s) in the reporting period and received at least one service during a previous reporting period of the current calendar year or during the previous calendar year ²	Total # of Clients who received service(s) in the reporting period		
Services (Rapid AR	RT)	Transportation		Services RWHAP/ Initiative Services 1. Any RWHAP ³ or Initiative Service	(A)	(B)	(C)		
Penny HIV-positive client prescribed ART that was last seen in 2019. Her services were paid for by another funding source. She received: • Housing • OAHS • Food Bank/Home Delivered Meals			1a. Ending the HIV Epidemic initiative Services* 1b. Outpatenti/Ambulatory Health Services 1c. Medical Case Management, including Treatment Advernace Services 1d. Non-Medical Case Management Services 1e. Mental Health Services 1f. Substance Abuse Outpatient Care 1g. Substance Abuse Outpatient Care 1g. Housting Health Outcomes 2. Prescribed ART in the reporting period						
				z. Presuided ART in the reporting period	1		32		

Our next client that we have is Penny. Penny is again an HIV-positive client. Now she is not a new client to our organization, but we last saw her in 2019, two years ago. Therefore, she doesn't fit the definition for a new client, Column A, or existing client in Column B. Remember to be counted in Column B the client must have been seen in a previous reporting period during the current or previous calendar year. So, we would have had to have seen her in some prior period in 2020 or 2021 to count her there. Moving forward, if Penny continues to receive services from us, she can be counted in Column B since she has been this seen this year. So, Penny will only be counted in Column C.

She received Housing, OAHS, and Food Bank/Home Delivered Meals so we'll report her under Row 1. Any RWHAP or Initiative Services, Row 1b. OAHS, and Row 1h. Housing. We'll also add her down on Row 2 since she has been prescribed ART through OAHS. Now we also have in here that her services were paid for by another funding source. For EHE reporting, that does not matter. Remember the only requirements to be reported here are that the client is HIV-positive and received a direct service during the reporting period that your organization is funded to provide by any of those funding sources we saw a couple slides ago. It does not matter who the final payor for the services was. It does not matter if the client is RWHAP eligible or not. This client in our example is HIV-positive and received a funded service so we report her.



And then we have our last client for this example, Marcus. Marcus is not an HIV-positive client. He is an immediate household member of one and received Food Bank/Home Delivered Meals at our facility which is RWHAP-related funded. Even though Marcus received a service that is funded through RWHAP-related funding, we won't be reporting Marcus in our EHE data since he's not an HIV-positive client but is a household member of one.

So, if these were all the clients that our organization saw during the reporting period this is how we would report remembering to enter zeroes for any boxes we are not providing data for.



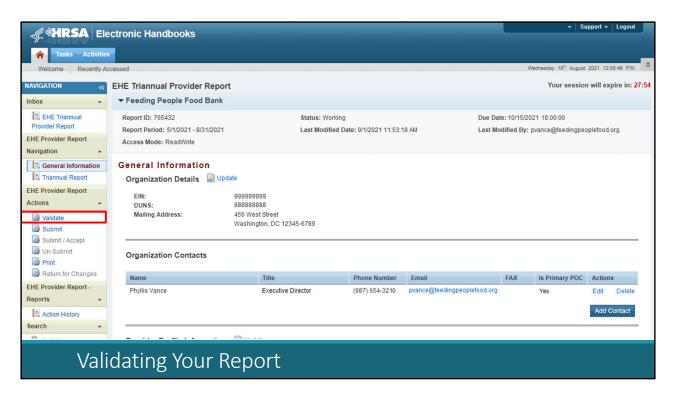
But let's go ahead and jump into our second and third poll questions.

My organization served a client during this reporting period (May 1, 2021 - August 31, 2021) with a funded service and they were last seen in March 2020. Under which columns should I report this client? (Choose all that apply).

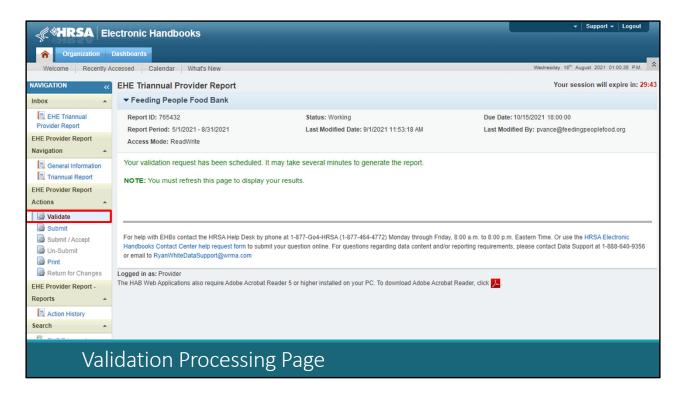
- a. New clients (Column A)
- b. Existing clients (Column B)
- c. Total clients (Column C)

My organization receives EHE funding to provide OAHS. We served a client during the reporting period with OAHS, and they were prescribed ART. Under which rows should I report this client? (Choose all that apply).

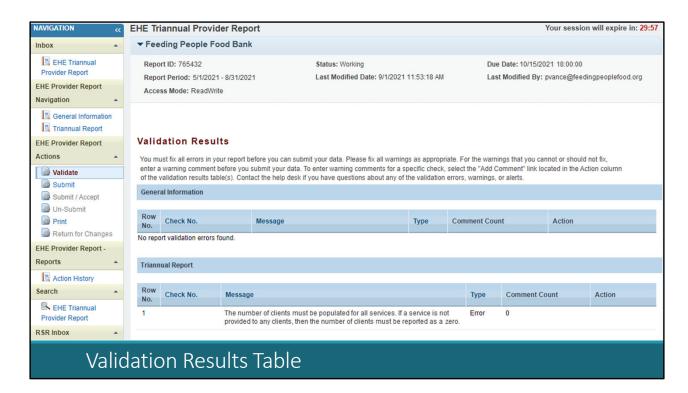
- 1. Any RWHAP or Initiative Service
- 1a. EHE Initiative Services
- 1b. OAHS
- 2. Prescribed ART in the reporting period



Once you have completed both sections of the report, the next step is to validate. To do that, select "Validate" under the Actions header in the Navigation Panel on the left side of the screen.

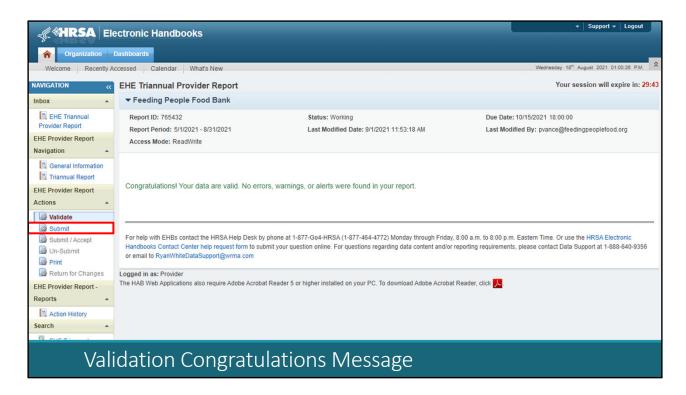


The system will let you know that the validation is processing. Wait a couple minutes and then select "Validate" again to refresh the page.



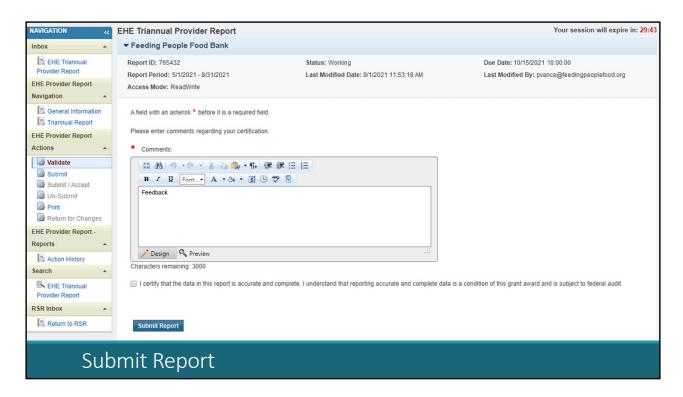
Once your validation request has completed, you'll see either a congratulations message or a table of validation results such as the one on this slide. If we scroll down, we have one error letting us know that we left some fields blank in the data table in that Triannual Report section that we need to go back and fill out.

The only validations in the EHE Triannual Provider Report are errors. Therefore, if you receive a validation like we have here then you will have to amend your report based on the message and revalidate before you can submit.

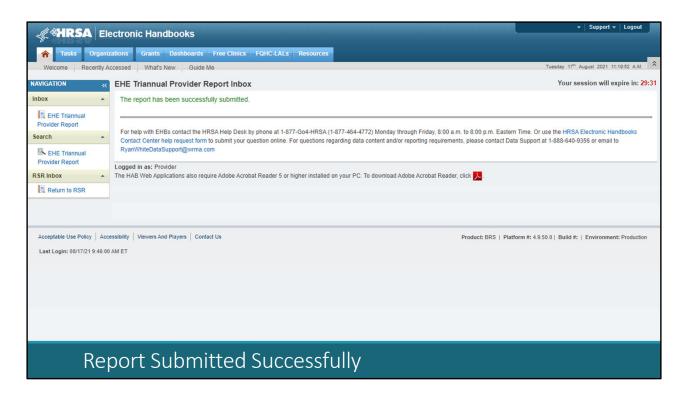


If you validate and receive this green congratulations message instead though, then you are ready to go ahead and submit.

To do that, select "Submit" in the Navigation panel on the left side of the screen.

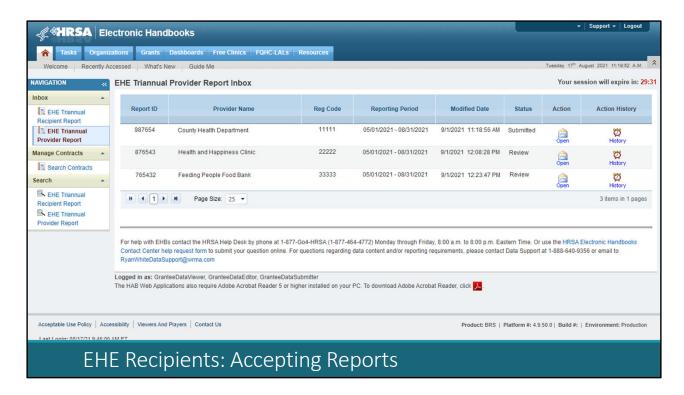


To submit your report, enter a comment with any meaningful feedback you have about the submission process, select the checkbox certifying that the data are accurate and complete, and lastly, select the "Submit Report" button.



You'll then see this green success message letting you know the report was submitted successfully. Now if you are an EHE recipient submitting an EHE Provider Report, the report will be submitted and accepted all in one step. Reports submitted by your subrecipients though still have to be accepted by you as the EHE recipient.

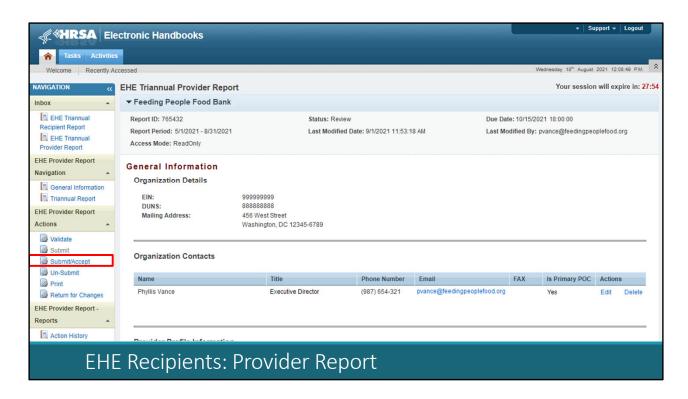
Let's check out what that looks like.



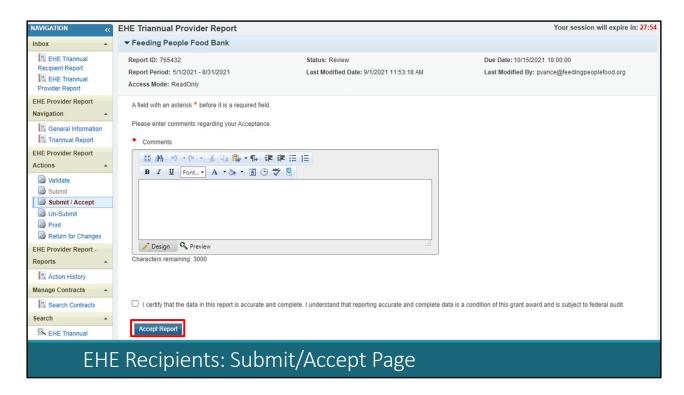
We're back now in the EHE Provider Report inbox. In our example, this recipient has three Provider Reports: one for their own organization, the County Health Department, in the first row, and then two subrecipients in the second and third row.

If you look under the "Status" column in this table, you'll see that the first report for the EHE recipient has already advanced to "Submitted" status. It was accepted when we submitted it previously in one step.

Our subrecipients though are both in "Review" status, meaning that we need to go in and review those reports, deciding whether or not to accept them or return them for changes. We'll go ahead and open up this last one here.



Review your subrecipients' data in the Triannual Report section to make sure that it looks accurate to you. Once you are ready to make your recommendation you can either accept the report by selecting "Submit/Accept" in the Navigation panel or alternatively return it to the provider for changes by selecting "Return for Changes." We'll go ahead and accept this agency's report by selecting "Submit/Accept."



On the next page, again enter a comment with any feedback, select the checkbox, and then click the "Accept Report" button. Once the report has been accepted by all recipients that are funding the provider, then it will move into "Submitted" status.



But let's go to the last poll question first.

How do you feel about the upcoming EHE Triannual Report submission?

- a. I am confident and do not need any assistance.
- b. I am somewhat confident but don't want assistance at this time.
- c. I am somewhat confident and would like some assistance
- d. I am not confident in my ability and would like some assistance

Submission Timeline

Reporting Period	Opening Date	Closing Date
5/1/2021 – 8/31/2021	Wednesday, September 15, 2021	Friday, October 15, 2021

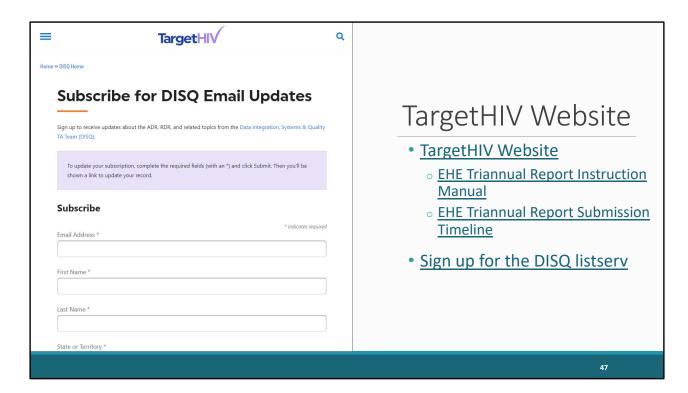
45

So that's it for our instructions on completing the EHE Triannual Report. We did go over a ton of information so if you still have questions be sure to speak up during the Q&A session and we can try and answer there and also, we'll go over some additional TA resources in just a second.

But let's first take a look at the EHE Triannual Report submission timeline. The next opening will begin on Wednesday, September 15 and will be open for a month for agencies to submit data for the May 1, 2021, to August 31, 2021, reporting period.

TA Resourc	es
TA Resource	Type of TA
Ryan White Data Support 1-888-640-9356 RyanWhiteDataSupport@wrma.com	EHE Triannual Report Instruction Manual, reporting requirements, and allowable data element responses Managing contracts in the Grantee Contract Management System (GCMS) Accessing, completing, reviewing or accepting the EHE Triannual Provider Report through the RSR Web System Locating or adding providers in the RSR Web System Resolving validation errors in the Web System Submitting your EHE Recipient or Provider Report
Data Integration, Systems & Quality (DISQ) Team Data.TA@caiglobal.org Submit a DISQ TA Request	 Planning how to collect and report your data to meet reporting requirements Extracting data from your Electronic Health Record (EHR) or other data management system Mapping data to required data elements Developing year-long processes for data collection, management, quality, and utilization
EHBs Customer Support Center 1-877-464-4772 Submit an EHBs TA Request	 How to use the Electronic Handbooks (EHBs) Accessing the EHE Triannual Recipient Report through the EHBs RSR Web System registration or permissions
CAREWare Help Desk 1-877-294-3571 cwhelp@jprog.com Join the CAREWare listsery	 Setting up contracts for your EHE-funded services in CAREWare Running an aggregate report to support completing the EHE Triannual Report using CAREWare
	46

And then here are the additional technical assistance resources available to assist you. Ryan White Data Support addresses EHE-related content and submission questions such as interpretation of the manual and HAB's reporting requirements, managing contracts, accessing and completing the EHE Recipient and Provider Reports, and validation issues. The DISQ Team, can help you with your EHE data including strategizing how to best collect and report your EHE data to meet reporting requirements, extracting your data and mapping it to the required data elements, as well as developing processes for data collection and management. The EHBs Customer Support Center addresses EHBs related questions such as navigation, EHBs account registration, and access and permissions. And finally, the CAREWare Help Desk can assist all you CAREWare users out there if you need some assistance utilizing CAREWare in submitting your EHE data like setting up your CAREWare contracts or running an aggregate report.



And then of course, the TargetHIV website is always the place to go for additional information on the RWHAP. Here you'll be able to find the EHE Instruction Manual as well as this webinar which as Ruchi mentioned at the beginning of our presentation will be posted on the TargetHIV website at a later date.

I also really want to highlight the EHE DISQ listserv. The EHE listserv helps to keep EHE recipients and providers in the loop about new EHE resources, reporting updates and upcoming events like this webinar. So, if you're interested in joining the listserv, go to targethiv.org/disq/subscribe, or follow the link on this slide. You'll come to the page shown on the slide here. You can enter your contact information and scroll all the way to the bottom. Under the "Interests" section, select "EHE," and then click on the "Subscribe" button at the bottom of the page.

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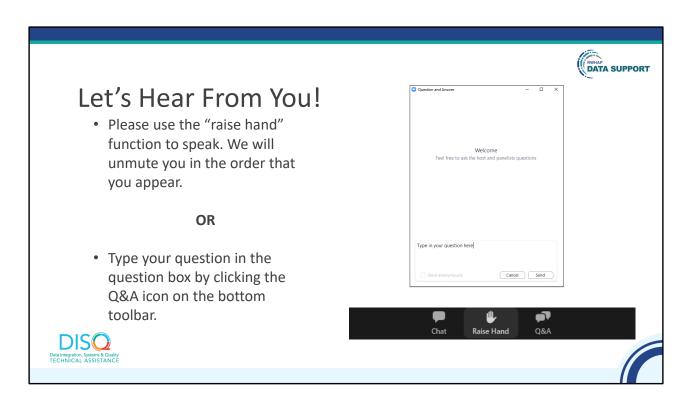








And then lastly, to find out more about HRSA, check out HRSA.gov. I'd like to thank everyone again for joining us on today's webinar and now we'll move onto the Q&A.



And now to your questions – but first, I would like to remind you that a brief evaluation will appear on your screen as you exit, to help us understand how we did and what other information you would have liked included on this webcast. We appreciate your feedback very much and use this information to plan future webcasts. My DISQ colleague Audrey is going to put a link out in the chat feature if you would prefer to access the evaluation right now. We'll also send a final reminder via email shortly after the webinar

As a reminder, you can send us questions using the "Q&A" function on your control panel on the bottom. You can also ask questions directly "live." You can do this by clicking the raise hand button (also on your control panel). If you are using a headset with a microphone, Audrey will conference you in; or, you can click the telephone button and you will see a dial in number and code. We hope you consider asking questions "live" because we really like hearing voices other than our own.

We do want to get all of your questions answered, and we do not usually run over an hour. If you have submitted your question in the question box and we cannot respond to your question today, we will contact you to follow up. We often need to explore your question in order to give you the most appropriate answer.