

# **RSR Town Hall**

Ryan White HIV/AIDS Program Services Report (RSR) HIV/AIDS Bureau May 18, 2022





Welcome to today's Webinar. Thank you so much for joining us today!

My name is AJ Jones. I'm a member of the DISQ Team, one of several groups engaged by HAB to provide training and technical assistance to recipients and providers for the Ryan White HIV/AIDS Program Services Report or RSR.

# Today's Webinar is Presented by:





Richard Ali
RyanWhiteDataSupport@wrma.com



AJ Jones
<u>Data.TA@caiglobal.org</u>







Today's Webinar is presented by Richard Ali from RWHAP Data Support, the experts on RWHAP reporting requirements, and myself representing the DISQ team's work with client-level data. Richard will provide feedback for Ryan White HIV/AIDS (RWHAP) recipients on the challenges, and issues, experienced during the RSR submission process.

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 Isia 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 "Question" function on your settings on the bottom of the screen. You'll also be able to ask questions directly "live" at the end of the presentation. You can do so by clicking the "raise hand" button (on your settings) and my colleague Isia will conference you in.

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.



## **Disclaimer**

Today's webinar is supported by the following organizations and the contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, the Health Resources and Services Administration (HRSA), the U.S. Department of Health and Human Services (HHS), or the U.S. government.

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.

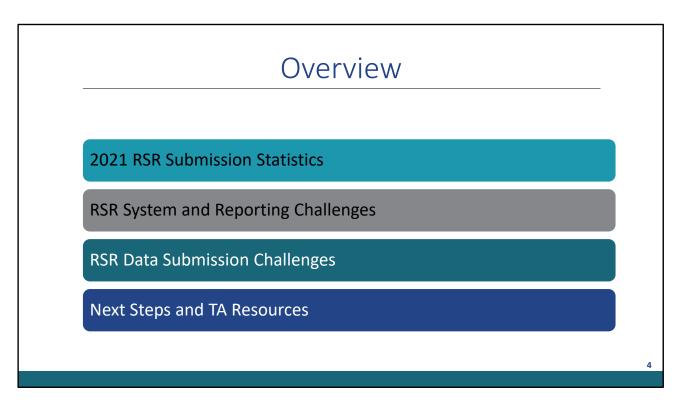
Ryan White HIV/AIDS Program Data Support is comprised of WRMA and CSR and is supported by HRSA of HHS as part of a contract totaling \$5,092,875.59.





Today's webinar is supported by the organizations shown on the slide, and the contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by the Health Resources and Services Administration, the U.S. Department of Health and Human Services, or the U.S. Government.

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



Thanks AJ and everyone for joining today's webinar.

Today we will go over the 2021 RSR Submission. We'll begin with a look at the 2021 RSR Submission Statistics. Second, we will discuss the RSR System and reporting challenges. Then my colleague AJ will discuss RSR Data Submission challenges and end the presentation by reviewing next steps and technical resources available to assist you.

	2020 RSR Deadline March 29, 2021	2021 RSR Deadline March 28, 2022	
Percentage of Recipient Reports Submitted by the RSR Deadline	94.8%	97.8%	
Percentage of Provider Reports Submitted by the RSR Deadline	97.7%	99.0%	
		S. J.	

Now let's begin today's presentation by taking a look at the 2021 RSR Submission statistics. 97.8% of Recipient Reports were in "submitted" status by the RSR deadline of March 28th, which is a big increase in the number of Recipient Reports submitted by last year's deadline with about 94.8% of Recipient Reports in submitted status. Furthermore, there was also an increase in the number of providers that submitted by this year's deadline, with 99% of reports in submitted status by March 28th compared to last year's March 29th deadline.

We are always working towards a 100 percent on-time submission rate. Therefore, it's encouraging to see a great number of Recipients and Providers submitting by the deadline. Congratulations to everyone on another successful submission, and continue the great work!



Before discussing the 2021 RSR Submission Challenges, let's start with first poll question of today's webinar. I will now pass the presentation to Isia from the DISQ team to launch the poll question. Isia?

How was your experience with submitting your 2021 RSR Submission?

- A. It went well, submitted on time without any issues
- B. I ran into a few issues during the submission, but submitted on time
- C. My agency had trouble with our data this year and couldn't submit by the deadline

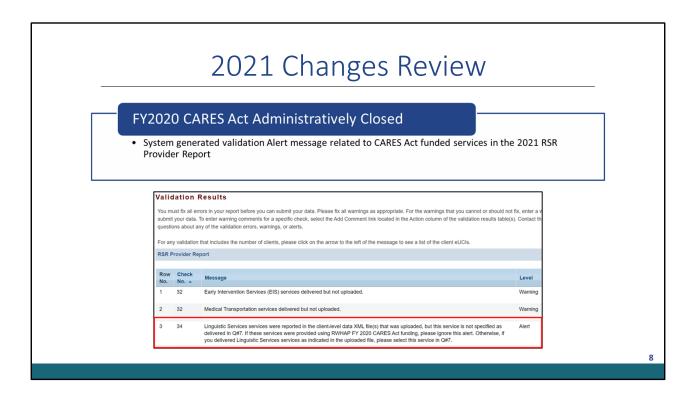
Great, thank you Isia! For anyone who ran into a few issues, and would like Ryan White Data Support or the DISQ team to reach out to them regarding their RSR submission, we can certainly reach out.

# 2021 Changes Review Clients by ZIP Code System Update • The system was updated so providers were able to submit 3,000 ZIP Code records No Requirement for FY 2020 CARES Act • FY 2020 CARES Act funding ended in 2021 • No requirement for CARES Act Recipient Reports • CARES Act funded services did not populate in the Provider Report • Providers were still required to report data on services provided with FY 2020 CARES Act funding

Before I move onto the 2021 RSR submission challenges, I wanted to take a quick moment to a recap the 2021 RSR changes.

The first change was an update to the system, specifically the clients by Zip code section which allowed providers to upload 3,000 zip code records. This was a change from last years report where the cap for zip code records was set at 490 records.

The second change was an update for CARES Act funded services in this years RSR. FY 2020 CARES Act grant funding ended in 2021. Because of this there was no requirement for CARES Act Recipient Reports and subsequently CARES Act funded services did not populate in the program information section or service information section of the report. This meant that providers could not mark CARES Act funded services as funded and/or delivered in the service information section. However, providers were still required to report data on services provided with FY 2020 CARES Act funding.



For those who did report services funded under the FY 2020 CARES Act you received a system generated validation alert for data uploaded into the report for services provided under the CARES Act. As you can see from the screenshot, if the service was indeed funded with FY2020 CARES Act funds the guidance was to ignore the alert and proceed with your submission.

# 2021 Changes Review

### Eligible Services Reporting Requirement

- Eligible Services Reporting: agencies are required to report client-level data on RWHAP-eligible clients who received at least one RWHAP and/or RWHAP related (program income or pharmaceutical rebates) funded service
- Eligible Services Reporting was not required until submission of the 2021 RSR.
- For further information on understanding Eligible Services Reporting please refer to the <u>RSR In Focus</u> document available on the TargetHIV website

Understanding Eligible Services Reporting

All Ryan White HIV/AIDS Program (RWHAP) agencies will be required to complete Eligible Services reporting beginning with the 2021 RWHAP Services Report (RSR). Previously included in the RSR. Under Eligible Scoop, providers only reported data on clients who wer RWHAP-eligible and received a service for which the provider received RWHAP funding Under the new Eligible Services Reporting requirement, providers will be required to also include services funded through RWHAP-related funding, which includes program incomand pharmaceutical rebates.

Eligible Services

Eligible Services

Eligible Services

Eligible Scope

Report data on clients who are RWHAP-eligible AND received at least one service for which the provider received RWHAP funding

OR received at least one service which the provider used RWHAPrelated funding (program income or pharmaceutical rebates) to provide

9

Prior to this years RSR, requirements fell under Eligible Scope which required providers to report all RWHAP-eligible clients who received a service funded by RWHAP funding regardless of payor. However, this year's requirement fell under Eligible Services Reporting. Eligible Services reporting required all recipients and providers to report client-level data on RWHAP eligible clients who received a service provided with RWHAP funding and RWHAP-related funding (program income and/or pharmaceutical rebates). For further information regarding eligible services reporting, I recommend reviewing the RSR in focus document which can be found on the TargetHIV website.

I will now turn the presentation over to Isia for our second poll question of the day. Isia.



It's now time for the second poll question of today's webinar, specifically for Eligible Services Reporting.

Did your agency experience issue with submitting the RSR with the Eligible Services Reporting Requirement?

- A. No, we did not experience any issues with the Eligible Services Reporting Requirement
- B. Yes, we had a few issues but received technical assistance to resolve them
- C. Yes, we did not understand the Eligible Services Reporting Requirement

Thanks Isia. For those who are still having trouble understanding the Eligible Services Reporting Requirement we recommend reviewing the RSR In focus document on Eligible Services Reporting available on the TargetHIV website or reaching out to either Data Support or the DISQ team for further guidance. We will be more than happy to clarify any confusion over Eligible Services Reporting.

# RSR System and Reporting Challenges

Now let's go over RSR System and Reporting Submission challenges that were encountered during the reporting period. We will first take a look at system challenges experienced by users in the HRSA Electronic Handbooks, then we will go over reporting challenges noticed in the Recipient Report and Provider Report, and lastly data submission challenges that AJ will go over.

# HRSA EHBs for Service Providers

- Some providers were unsure of which EHBs link to use, creating an account using the Applicant/Grantee link vs. Service Provider link
- Organizations classified as Providers only will only use the <u>Service</u> Provider login link for the EHBs
- How to access the RSR Provider Report



12

Some providers encountered system challenges due to confusion over which HRSA EHBs link to use for registration and completion of the 2021 RSR. There were many instances where providers accidentally registered in the EHBs using the Applicant/Grantee link instead of the Service provider link. Because of this issue, providers were confused on how to access their reports.

# HRSA EHBs for Service Providers

- Some providers were unsure of which EHBs link to use, creating an account using the Applicant/Grantee link vs.
   Service Provider link
- Organizations classified as Providers only will only use the <u>Service</u> <u>Provider</u> login link for the EHBs
- How to access the RSR Provider Report



13

Providers will only use the Service Provider link for the EHBs when completing reports. These links are available in the 2021 RSR manual and labeled according to how your organization is categorized in the system. We recommend looking at our "How to access the RSR Provider Report" video available on the TargetHIV website, however If you're unsure of which link to use when registering for an EHBs account, please contact Data Support for assistance. Contact information for Data Support will be displayed at the end of the presentation.

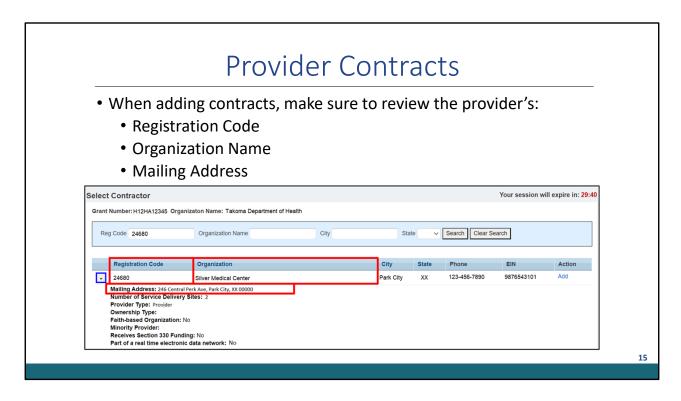
# Service Provider Registration Update

- System update that requires GUID code instead of registration code to complete registration for the HRSA Electronic Handbooks (EHBs)
- GUID (Global Unique Identifier) is system generated code used to associate the users account with their organization
- Contact <u>Ryan White Data Support</u> via email if your GUID code is needed

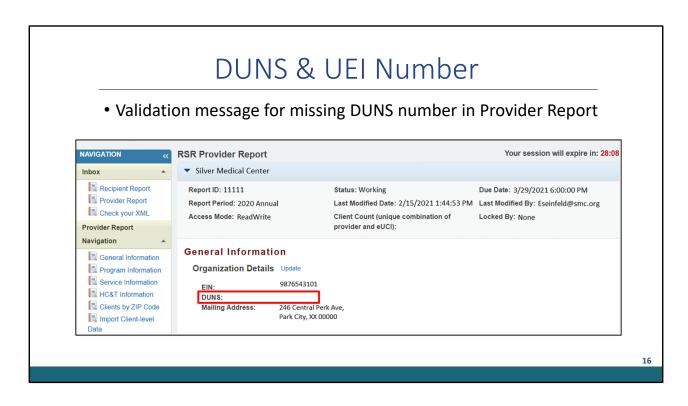


14

Also, the registration process changed for service providers. There was a system update that transitioned registering news users with their registration code to the Global Unique Identifier or GUID code. New provider only users to the EHBs were required to enter a GUID code to associate their accounts to their organizations. Data Support received TA throughout the submission period from new users not being able to locate or identify their GUID. If you need your organizations GUID code when registering for the EHBs, contact Data Support for assistance.



Ryan White Data Support had a few encounters with recipients that noticed during the RSR submission that a contract was created for a subrecipient using an incorrect registration code. As a reminder, when adding contracts in the GCMS, make sure to review the provider's information that is associated with the registration code, including their organization name and mailing address, to prevent any issues during the RSR submission. We always recommend recipients to review the contracts in the GCMS and make any updates if needed before the RSR submission. Also, if a recipient wants confirmation that they are using the correct registration code before adding a contract, they can always reach out to Ryan White Data Support. We can confirm the provider's information as well as assist you with creating the contract in the GCMS. For additional guidance on accessing and using the GCMS to manage contracts please refer to our helpful resources such as the GCMS instruction manual and short "How to Video" which are available on the TargetHIV website.



During the RSR Submission Period the system was scheduled to update the DUNS field and replace it with the UEI. However, during this transition there was a period during the RSR submission where the DUNS was removed from all reports prompting a validation message for missing DUNS. Data support worked with the system team to have this validation removed because of the transition and UEI will be reflected in future reports.

# Service Delivery Site Error

HRSA

### HRSA Electronic Handbooks

Error Encountered

Sequence contains no elements

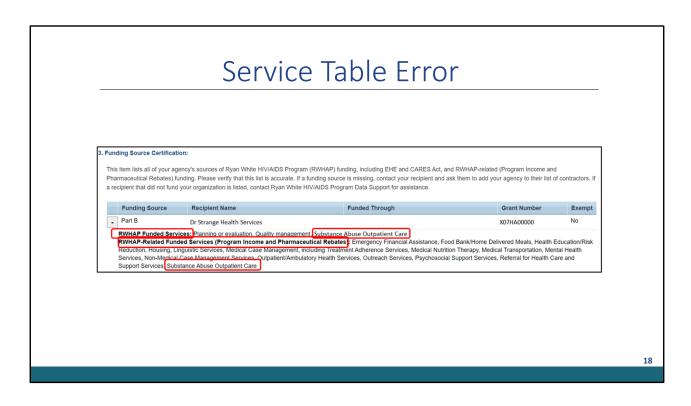
Reference Id: E20220210182056006772R000000

For help with EHBs contact the HRSA Help Desk by phone at 1-877-Go4-HRSA (1-877-464-4772) Monday through Friday, 8:00 a.m. to 8:00 p.m. Eastern Time. Or use the HRSA Electronic Handbooks Contact Center help request form to submit your question online.

- Providers that attempted to edit information for their service delivery sites in the General Information section of the RSR received a system error.
- Data Support worked with the System Team to resolve system error.

17

Some providers experienced issues with editing information for their service delivery sites. When some providers validated their reports, they received a validation message stating that some of the services they indicted as delivered in the service information section were not marked as a service provided at the service delivery site listed in the general information section of the report. Providers that attempted to edit information for their service delivery site received the error message shown on the screen. Data Support worked with the system team by escalating several tickets related to this issue and was resolved before the submission deadline.



Data Support received TA regarding funded services not being correctly marked in the service information table of the report. For Example, lets take this agency which is funded for Substance Abuse Outpatient Care under Ryan White funding as well as Ryan White related funding. As you can see you in the screenshot the agency has the service correctly listed in the program information section of the report.

		ervice	TUDIC		
Service Informat	tion				
A field with an asterisk * b	before it is a required field.				
	at your organization delivere				
Administrative and Tec			Delivered	Service Category	
Administrative and Teo RWHAP Funding No records to display	chnical Services  EHE Funding	CARES Act Funding	Delivered	Service Category	
RWHAP Funding	EHE Funding		Delivered	Service Category	
RWHAP Funding No records to display	EHE Funding  RWHAP-Related Funding (Program Income and Pharmaceutical		Delivered  CARES Act Funding	Service Category  Delivered	Service Category
RWHAP Funding No records to display Core Medical Services	EHE Funding  RWHAP-Related Funding (Program Income and	CARES Act Funding			Service Category  Medical Case Management, including Treatment Adherence Services

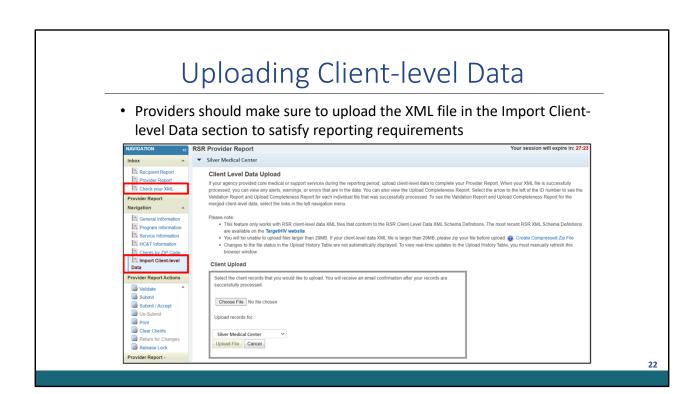
However, when we look at the Service Information section of the report, because of the system bug, the system shows Substance Abuse Outpatient Care funded with Ryan White funding but not funded with RWHAP-related funding.

	Service	Tabl	e Eri	ror		
Service Inform	ation					
RWHAP funding, Pharmaceutical F reporting period CARES Act, and f form, select any a generated Progra		Act, and RWHA e services that was in addition to re used to fund or organization	AP-related (Prowere delivered to the RWHAP to the service. In	ogram Incom by your age funding, incl n the table at	ne and ency during the luding EHE and t the bottom of the	
RWHAP Funding	RWHAP-Related Funding (Program Income and Pharmaceutical Rebates)	EHE Funding	CARES Act Funding	Delivered	Service Category	
	Ø				Medical Case Management, including Treatment Adherence Services	
	Ø		0		Substance Abuse Outpatient Care	

We were able to discover that the services had indeed been marked correctly and could confirm this by viewing the print version of the report as shown on the screen. The system team reviewed this error, and it has been resolved.

Additional Service	s Delivered Through Your Organization's Generated Program Income and/or Pharmaceutical Rebates	
Delivered	Service Category	
	AIDS Pharmaceutical Assistance (LPAP, CPAP)	
	Child Care Services	
	Early Intervention Services (EIS)	
	Emergency Financial Assistance	
	Food Bank/Home Delivered Meals	
	Health Education/Risk Reduction	
	Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	
	Home and Community-Based Health Services	
	Home Health Care	
	Hospice	
	Housing	
	Linguistic Services	
	Medical Case Management, including Treatment Adherence Services	
	Medical Nutrition Therapy	
	Medical Transportation	
	Mental Health Services	
	Non-Medical Case Management Services	
	Oral Health Care	
	Other Professional Services	
	Outpatient/Ambulatory Health Services	
	Outreach Services	
	Psychosocial Support Services	

In the Service Information section of the RSR Provider Report there is an additional table below for you to select additional services provided through your organizations program income and/or pharmaceutical rebates. Data Support provided TA to many agencies who were confused on whether services should be marked in this table. Providers were mistakenly marking services in this section regardless of funding source causing the system to generate validations for missing data. As a reminder this table is for services provided with your agencies OWN RWHAP-related funding (your agencies program income and/or pharmaceutical rebates). If the funding comes from your recipient, then the recipient should add the service to the contract. As a reminder, if the funded service categories are incorrect, you should contact your Recipient to confirm your agency was indicated as funded on their Recipient Report.



An additional reporting challenge that we noticed during the RSR submission, is that a few providers would upload their client-level data in the Check your XML feature and would forget to upload their client-level data in the Import Client-Level Data Section of the Provider Report. The Check Your XML Feature is a great tool to check if your client-level data is compliant with system schema and to run a validation and use the upload completeness report to check data quality. It is important to note though that the Check your XML feature is not tied to the Provider Report. Therefore, all providers that use the Check your XML feature will need to make sure to also upload the client-level data in the Import client-level data section to ensure they are completing all required sections of the Provider Report.

# Recipient Report Status

- Recipient Reports staying in "Certified" status:
  - All funding sources haven't accepted the Provider Report
- Once Provider Reports have been accepted by all funding sources they will move into "Submitted" status



23

Finally, one last challenge that we noticed during the RSR submission was that many recipient reports were staying in "certified" status versus advancing to "submitted" status. With some recipients, we noticed that they were not accepting the Provider Reports via all funding sources. All recipients must accept the Provider Reports via all funding sources to ensure the Provider Reports move into "submitted" status.

# Recipient Report Status

- Widespread system issue that prevented reports from advancing to "Submitted" status despite recipients accepting all their associated Provider Reports
- Data Support collaborated with the systems team by escalating ticket to help advance reports from "Certified" status to "Submitted" status
- Recipients/Providers who submitted by the March 28<sup>th</sup> deadline but were still in "Certified" status were not marked as late



24

For other recipients, a system issue arose that did prevent reports from advancing to "Submitted" status although all funding recipients accepted all provider reports. To assist with this issue, Ryan White Data support worked with the systems team to escalate a ticket listing all recipients with this issue to help advance completed RSRs into "Submitted" status. After the bug was reviewed by the system team the issue was resolved and reports were correctly advanced into "submitted" status. Please Note: If you completed all reporting obligations prior to the deadline and your organization was still stuck in "certified" status on the 28th of March due to this system error, your report was not marked as late.

	Recipient listed the services as funded	Checked off as delivered in Provider Report	Uploaded as part of client level data
Service(s) funded but not delivered	<b>√</b>	X	
Service(s) delivered but not uploaded		<b>✓</b>	X
Service(s) uploaded but not delivered		X	<b>✓</b>

Next let's take a moment to discuss validation messages that we often see that many recipients and providers have issues understanding. These validation messages are associated to services data such as services delivered but not uploaded, services funded but not delivered, and services uploaded but not delivered. Hopefully the table on the slide can provide some a clarity regarding the validation messages. We'll begin with services funded but not delivered. This validation message indicates that your recipient(s) have indicated the service category as being funded in their contracts, but the provider did not select the service as being delivered in the Service Information section of their report.

Services delivered but not uploaded essentially indicates missing data. The service category has been checked off as being delivered in the Service Information section of the Provider Report, but the client-level data do not include any data on the indicated service category.

Services uploaded but not delivered is the opposite of that. This validation indicates that your client-level data file includes data on the indicated service category, but it is not checked off as delivered in the Service Information section of the Provider Report.

# **Recipient & Provider Communication**

- Recipients and providers can frequently collaborate together to resolve any validation message
- Reach out to your recipient if a service is incorrectly listed as funded or missing in your Provider Report
- Contact Data Support for further assistance regarding services in the contracts or Provider Report



26

Let's take a look at what can be done to remove a few of these validation. A validation comment is an appropriate response at times, but usually communication between recipients and providers is the best way to resolve these validation messages. Services may be missing or listed incorrectly in an agency's Provider Report. In either case, providers should let their recipient know and collaborate with them to ensure the services listed are as accurate as possible.

We want your data to accurately reflect the wonderful work that you all do so if your report is missing data for a service that you all don't deliver, reach out to your recipient to see if it should be removed from your report. And if you have data for services, you're providing using RWHAP funding, but the service category isn't listed for you to check off as delivered, talk to your recipient to see if it should be added to their contracts.

Furthermore, if you need assistance with these validation messages or how to proceed if or when you receive one, please don't hesitate to reach out to Data Support using the contact information we'll display at the end of presentation, and we can help you figure out the best course of action.

# RSR Data Submission Challenges

Now I would like to pass the presentation to AJ to go over RSR Data Submission challenges.

# No Major Changes this Year!

- There were no schema or data element changes this year
- The merge rules were updated from the previous submission for New Client and Received Services Previous Year

28

### Thanks Richard!

Overall this year went pretty smoothly with client-level data reporting. There were no major changes to the RSR this year – if you're a veteran reporter, you'll remember that any time the data elements or the schema change, there are inevitably challenges in submitting data. This year, there weren't any changes that required a new schema.

We did make one small improvement to the RSR system. Last year, known values for New Client and Received Service Previous Year were overwritten by blank values. We corrected that so you'll "get credit" for those data in the Upload Completeness Report.

# But There Were Many First-time Submitters

- Many staff were completing the RSR for the first time, primarily due to staffing changes
- Some providers were funded for direct services for the first time (mostly EHE-funded providers)
- If you're new, reach out for assistance

29

This biggest challenge that we had this year is one that I'm sure we're all familiar with – there was abnormally high staff turnover this year, meaning we had a lot of people submitting the RSR for the first time. There were also a few providers, typically those that were newly funded by the EHE, who had to complete an RSR for the first time.

We spent a lot of time working with first-time submitters this year to get the reports in, which is exactly what we're here for! I'll come back to this later, but there are plenty of resources available to you in completing the RSR.

# Some Confusion on the EHE Service Category

If the service <u>aligns</u> with PCN 16-02, report as the RWHAP service category

EHE funds: medical case management

Report as: medical case management

If the service is not allowable per PCN 16-02, report as EHE Services

EHE funds supported employment

Report as: EHE Services

Check out PCN 16-02 for service definitions

30

Now, I'm going to talk through a few of the specific issues we encountered during the year.

We also got questions on the new EHE service category, so I'll quickly go over the requirement again.

- 1. If the service delivered aligns with a description in PCN 16-02, report as the RWHAP service category, even if EHE funds made that service available.
- 2. If the service delivered is not allowable under PCN 16-02, report as EHE services

# And What to Report for EHE clients

- Providers must report client-level data for clients who received EHE-funded services
  - Some providers are capturing EHE data outside of RWHAP data management systems
- The RSR Instruction Manual needed to be updated to reflect the correct data required for the EHE Services category

31

Some EHE-funded agencies weren't aware that they had to submit CLD on the RSR for their EHE services. This is a requirement, in addition to completing the aggregate EHE Triannual Report.

Additionally, we identified an issue in the appendix of the RSR Instruction Manual related to what data elements are required for clients who received the EHE service category. A revised version was put up on TargetHIV early in the submission.

# **CARES Act Reporting**

- There were no Recipient Reports for CARES Act funding on the 2021 RSR, though some providers received funding
- Providers still submitted client-level data for the services and received an alert in the system

Emergency Financial Assistance services were reported in the client-level data XML file(s) that was uploaded, but this service is not specified as delivered in Q#7. If these services were provided using RWHAP FY 2020 CARES Act funding, please ignore this alert. Otherwise, if you delivered Emergency Financial Assistance services as indicated in the uploaded file, please select this service in Q#7.

Alert

U

32

Some providers delivered services with CARES Act funding during calendar year 2021. However, there were no Recipient Reports for CARES Act grants this year, so any new services funded didn't show up in the RSR Provider Reports for those agencies. Providers were still expected to upload CLD for CARES Act services, which caused a mismatch and a validation. Initially this validation was an error, but it was downgraded to an alert with some additional context to allow providers to submit.

If this applies to you, you may recognize the alert on this screen.

Request Date	Processed Date	Clients in File	Status
12/27/2021 10:30:32 AM	12/27/2021 10:31:02 AM	0	Processed with Errors
Request Date	Processed Date	Clients in File	Status
12/27/2021 10:30:32 AM	12/27/2021 10:31:02 AM	300	Processed

Another system issue that was identified early on was related to files being "processed with errors" by the RSR system. Logic had been added to the backend of the system that was causing this issue for files that had clients missing birth year. This didn't impact many users because birth year data are very complete. DISQ worked to identify clients with missing data, and the system team removed the logic in January. Thanks again to folks who got started early on the report and caught this issue.

Be sure to check that your files have processed. You'll need to see a client count and a status of "processed."

# Mismatches Between Client-level Data and ZIP Code Data Data Integration, Systems and Quality (DISQ) Team Report ID: 123456 Status: Working Due Date: 3/28/2022 6:00 PM Report Period: RSR 2021 Annual Last Modified Date: 3/28/2022 Last Modified By: ajones Client Count (unique combination of provider and eUCI): 300 Calculated from merged client-level data file(s)

Finally, we commonly provided TA this year related to the RSR Zip code data. As a reminder, you report the total number of clients living in each zip code in the Provider Report. Ideally this total will match the number of clients in your CLD, but this is commonly off for a few reasons. You can check the total number of clients in your report in the header of the RSR.

Many providers, especially those with multiple funding streams, upload more than one CLD file. These providers often don't have a good way to match clients across these files. We advise providers in this situation to upload the zip code data from the system that has the most clients in it.

# Mismatches Between Client-level Data and ZIP Code Data

- CAREWare users commonly experienced issues due to:
  - Finding and using the custom report
  - Filters applied to the zip codes
- Agencies can now upload larger templates
- Leading 0's continue to be a problem in the upload template; there are two options:
  - Manually enter 0's after upload
  - Convert the ZIP column to text before you save and don't reopen the file before you upload

35

CAREWare users reported several challenges this year with zip codes. Users need to download a custom report from the CAREWare wiki site to run the template for upload. We had quite a few reports of users whose total number of clients in the zip code data did not make the CLD from CAREWare. In most instances, this was because a filter was applied that excluded some clients from one of the reports.

The good news is that providers can now upload larger zip code templates that have more rows in the data.

Those of you in states with zip codes starting with 0 continue to report challenges in uploading data. The Provider Report requires a 5-digit zip. You can manually add 0's after you upload, which may be the easiest work around for providers who aren't reporting many ZIP codes. The other option is to convert Column A (where the ZIP codes are reported) in the CSV template to text and specify 5 digits for the field. The CSV template will keep the formatting, but only if you don't open the file again before you upload.



(AJ) I will now pass the presentation to Isia for the last poll question of today's webinar.

What type of challenges did your agency experience during the 2021 RSR? Please select all that apply.

- 1. System challenges such as accessing the HRSA EHBs and/or accepting Provider Reports
- 2. Reporting challenges such as difficulty understanding the 2021 RSR Changes and submission process
- 3. Data submission challenges such as missing data and uploading client-level data
- 4. My agency did not experience any challenges

Great thank you Isia and for everyone who participated in the poll. (Contextualize response)

# Reminders & TA Resources

Now let's discuss reminders & TA Resources.

# Please Complete the DISQ Data Systems Needs Assessment!

Link for recipient-providers and providers

Link for recipient-only organizations

38

Every few years, the DISQ Team conducts an online needs assessment to learn more about how RWHAP agencies work with data. As part of this assessment, we are asking recipients and providers to complete a brief survey about your data management practices.

As a refresher, *recipients* are agencies who receive funds directly from HRSA HAB. *Providers* provide direct services to RWHAP clients. *Recipient-providers* receive funds directly from HAB and provide services.

The best person to complete this survey at your agency is the person with the deepest understanding of your data management processes, including data systems and data integration, so please feel free to forward this as needed to your colleagues. Your input helps us improve our TA offerings and connect providers who use similar data management systems.

TA Resource	Type of TA
Ryan White Data Support 888-640-9356   RyanWhiteDataSupport@wrma.com	<ul> <li>RSR-related content and submission questions;</li> <li>Interpretation of the RSR Instruction Manual and HAB's reporting requirements;</li> <li>Instructions for completing the RSR Recipient and Provider Reports; and</li> <li>Data validation questions.</li> </ul>
The Data Integration, Systems, & Quality (DISQ) Team  Data.TA@caiglobal.org Sign up for the DISQ listserv Submit a DISQ TA Request	<ul> <li>Data reporting requirements;</li> <li>Extracting data from systems and reporting it using the required XML schema;</li> <li>TRAX and the encrypted Unique Client Identifier (eUCI) Application; and</li> <li>Data quality issues.</li> </ul>
EHBs Customer Support Center 877-464-4772   Submit an EHBs TA Request	<ul> <li>RSR software-related questions;</li> <li>Electronic Handbooks (EHBs) navigation;</li> <li>EHBs registration;</li> <li>EHBs access and permissions;</li> <li>Performance Report submission statuses.</li> <li>RSR Web System navigation.</li> </ul>
CAREWare Help Desk 877-294-3571   cwhelp@jprog.com Join the CAREWare listserv	How to generate the XML file from CAREWare correctly;     How to view a sample client summary file; and     Creating custom reports.

Let's review technical assistance resources available to assist you during the RSR Submission.

The Ryan White Data Support team addresses RSR-related content, submission questions, interpretation of the RSR Instruction Manual and HAB's Reporting Requirements, instructions for completing the RSR Recipient and Provider Reports, and data validation questions.

The DISQ Team addresses questions for those needing assistance in extracting data from their systems and reporting those data using the required XML schema; they also offer TA on the TRAX Application, data reporting requirements, and data quality issues.

The EHBs Customer Support Center provides assistance with the EHBs, including registration, access and permissions, RSR software-related questions, and EHBs navigation.

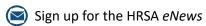
For our CAREWare users, the CAREWare Help Desk will be your best resource. The CAREWare help desk can assist you with generating XML files from CAREWare correction and also help create custom reports. I would encourage all CAREWare users to sign up for the listserv.

If you are unsure of who to call, feel free to contact any one of the resources provided and they will be able to direct you to the appropriate place.

# Connect with HRSA

## To learn more about our agency, visit

ryanwhite.hrsa.gov





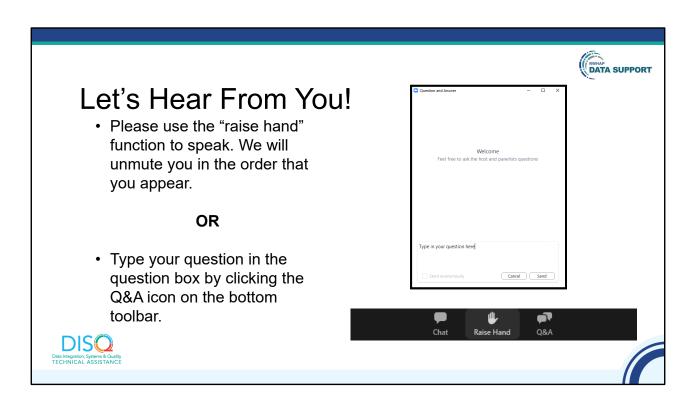






To connect with and find out more about HRSA, check out <a href="mailto:ryanwhite.hrsa.gov">ryanwhite.hrsa.gov</a>

I'd like to take a moment to thank everyone for joining us on today's presentation.



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 Isia 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 "Question" function on your control panel on the right-hand side of the screen. You can also ask questions directly "live." You can do this by clicking the raise hand button (on your control panel). If you are using a headset with a microphone, Isia 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.