

### **RSR TRAX**

Ryan White HIV/AIDS Program Services Report (RSR) HIV/AIDS Bureau November 30, 2022





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

My name is Ruchi. 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 RSR.

### Today's Webinar is Presented by:





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Today's Webinar is presented by Ellie Coombs. Ellie represents the DISQ Team's work with TRAX for the RSR. In this webinar, Ellie will showcase the TRAX application, which is s a free tool that you can download from the TargetHIV website and can be used to generate your XML.

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.

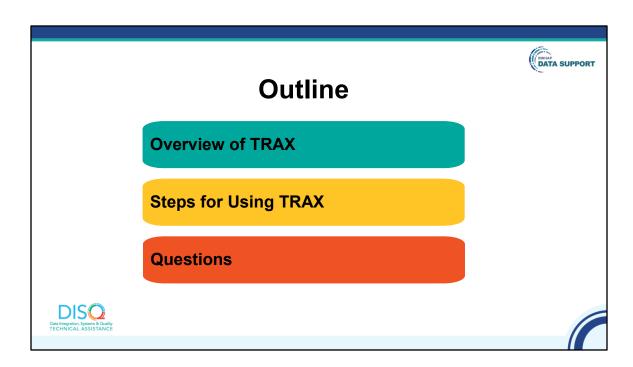
DSAS (Ryan White Data Support) is comprised of WRMA, CSR and Mission Analytics and is supported by HRSA of HHS as part of a contract totaling over \$7.2 Million.





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



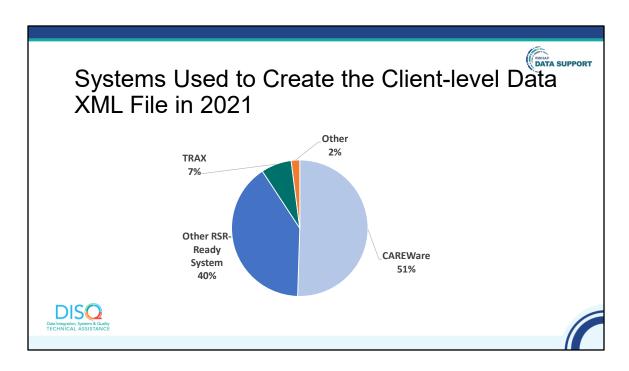
TRAX is a free tool that you can download from the TargetHIV website. It takes files with your client-level data as input and converts those data to the correctly structured XML file.

I'll start the presentation with an overview of TRAX. Then, we'll go into more detail about each step. Throughout this discussion, we'll be pulling up resources and demoing key activities.

Finally, as always, we'll take your questions.

This webcast is very detailed, but don't worry. There is a detailed user manual with the same information in the TRAX download package. The webcast recording and slides will also be posted on TargetHIV. This webcast just focuses on TRAX for the RSR; ADR TRAX users can find a recording of a similar webinar that targets the ADR.

Also, the TRAX process has not changed in the last couple of years, so if you are a seasoned user, you may not need to be here. But you may want a quick refresher to get your head around the RSR!



Let's take a step back. There are three main strategies for creating your client-level data file. The first is to use an RSR-Ready System. These are data management systems that create the XML file for you. As you can see on this pie chart, the vast majority of provider files created in 2021 were created with one of these systems. CAREWare is the most commonly used RSR-Ready System.

About 2% of files were created by providers that developed their own file generation functions. Finally, 7% of files in 2021 were created by TRAX, up one percentage point from last year. So, you can see that this tool plays an important part in the RSR.



### Why Use TRAX?

- You don't use an RSR-Ready System to capture RSR data
- You are tired of doing double data entry into your Electronic Health Record (EHR) and an RSR-Ready System
- You would like to report some data not captured in your existing system



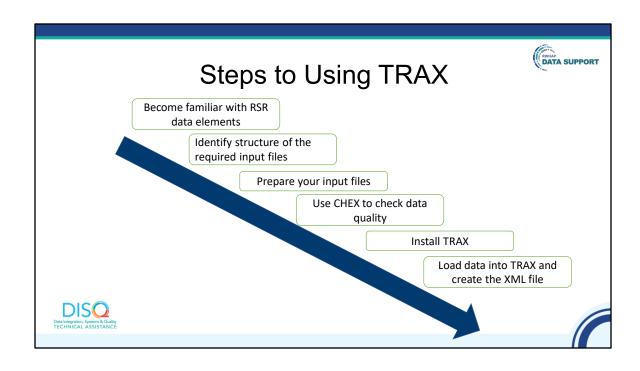


Some of you may be wondering if you should be here today. You've been diligently signing up for all the webinars – yay – but this content may not be relevant for you. TRAX is a good tool for you if you don't already input or export your data into an RSR-Ready System.

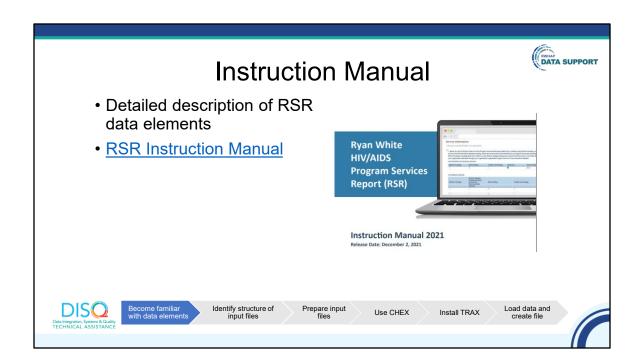
TRAX is also good for folks who input data into an RSR-Ready System but are tired of it and you want to start using your EHR to create the RSR.

Finally, you may need to report data not already captured in your RSR-Ready System. You can create a supplemental file with TRAX. The data will be merged on client eUCI. All RSR-Ready Systems and TRAX use the same algorithm for creating that eUCI.

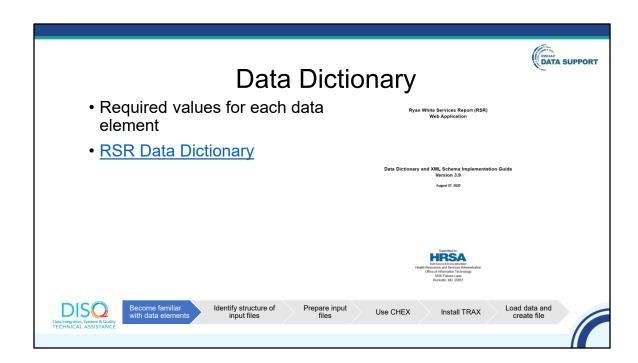
If this sounds like you, then you are in the right place today!



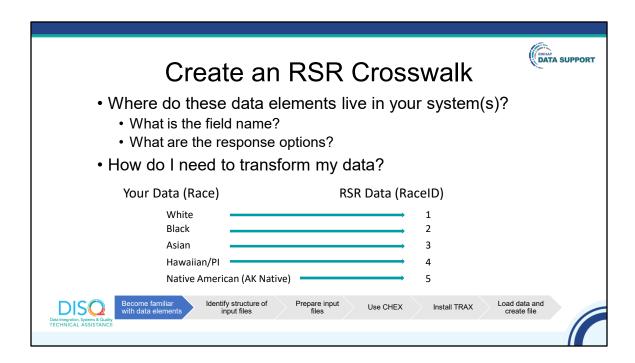
- 1. Become familiar with the RSR data elements.
- 2. Identify structure of the required input files.
- 3. Prepare your input files (12 .CSV files) that we will talk about in more detail later.
- 4. Use CHEX to check data quality.
- Install TRAX.
- 6. And lastly Load data into TRAX and create the client-level data XML file.



To start preparing your input files, you need to become very familiar with the RSR data elements. If you haven't already done so, check out the instruction manual, which has a detailed description of each item required. The 2022 RSR manual will be released soon, but there have been few changes to the RSR in the last year, so feel free to start with this one.



You'll also need the data dictionary, which provides values for each data element and response option. This is a helpful guide because you'll need this to know which values to put in your input files. The RSR Data Dictionary has not been updated because there have been no schema changes.



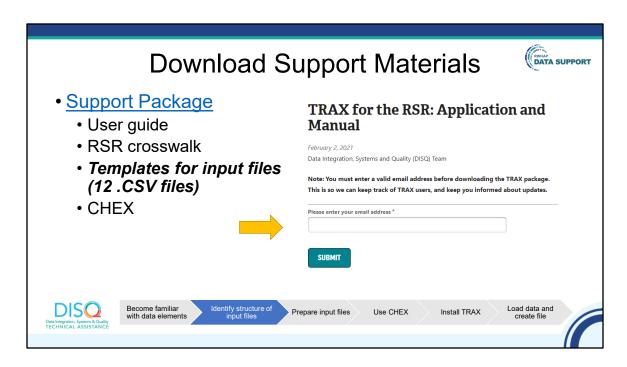
Next, you'll need to map the data elements in the RSR to the data elements in your data management system.

By creating a crosswalk, you will identify the field name and response options of the data elements in your system that correspond to the RSR. This will help you assess the data you have and determine what, if any, changes are necessary to correctly format and report your data using the RSR.

In this example, with the RaceID variable, your own database might categorize clients as "white", "black", etc. However, the RSR requires this variable be categorized as numbers 1 through 5. Using this crosswalk, it will be easier to see and track what data transformations are necessary, as "white" becomes "1", "black" becomes "2", and so on.

	Ryan White Services Report (RSR) Crosswalk					
ID	Variable	Definition	Value	Variable	Value	Notes
	- Liliubic	20	Demographics			
2	Vital Status	The client's vital enrollment status at the end of the reporting period.	12. Alive 6. Deceased 7. Unknown			
4	Birth Year	Client's year of birth. This value should be on or before all service date years for the client.	уууу			
5	Ethnicity	Client's ethnicity.	Hispanic/Latino/a, or Spanish origin     Non- Hispanic/Latino(a),or Spanish origin			
68	Hispanic Subgroup	If Ethnicity = Hispanic/Latino(a),	Mexican, Mexican     American, Chicano/a			

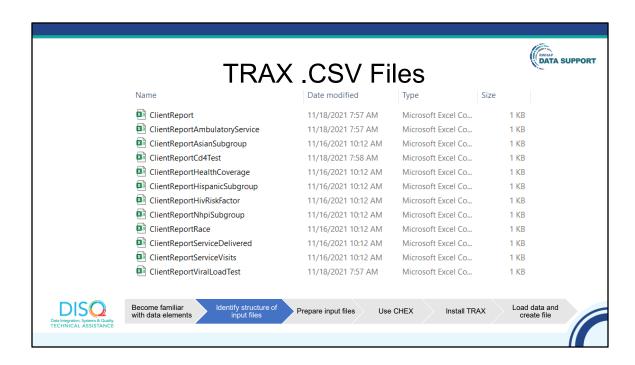
We've created a crosswalk template for you to fill out. You can access this through the TRAX download package.



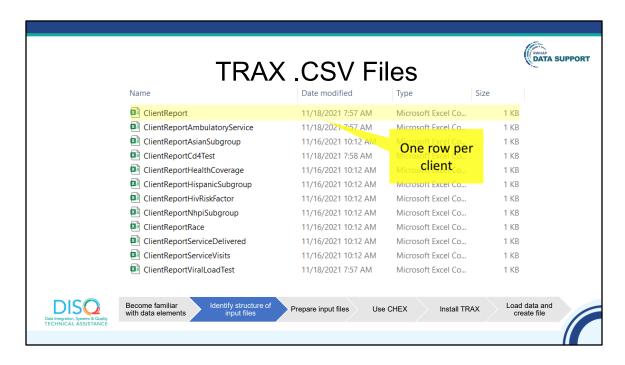
Speaking of the TRAX download package we encourage you to download support materials.

Now that you have a good idea of what is required for the RSR, you'll need to start creating the input files, which consist of 12 .CSV files. If you don't know what .CSV is, please do not worry. It is essentially the same as Excel, and you can easily create a .CSV file from an Excel file using "Save As".

To know how to structure your data, go to the TargetHIV website, input your email address, and download the support package. The support package is a zip file with the TRAX user manual and templates for the 12 input files.



Here is a view of the inside of the folder you'll download from the TARGETHIV website with the 12 .CSV files. You'll create a folder that looks exactly like this, but the files will be populated with your data.

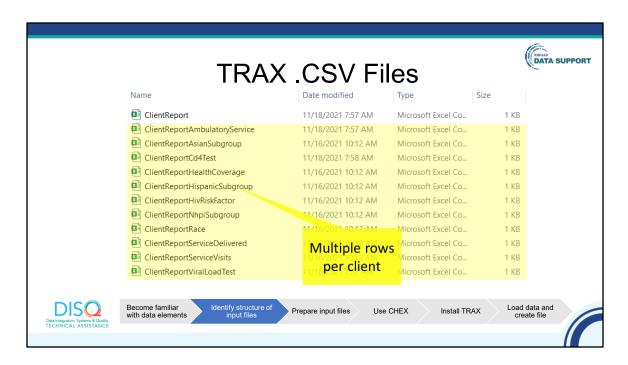


The first file contains the bulk of the data elements in the RSR. It has all the data elements with just one response per client, like ethnicity.

You'll have just one row per client in this file.

I will pull up this file now for you to see it. Here is what that client report looks like. You can see that there is a row for each client and a column for each data element. As previously mentioned, this is where the bulk of your data for the RSR will live.

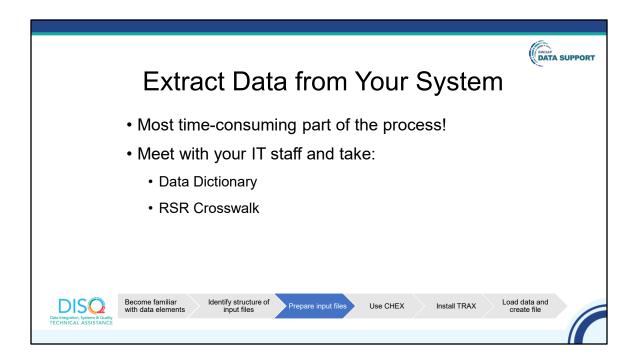
<sup>\*</sup>pull in client report\*



Each of the subsequent files represent one data element that allows for multiple responses. So, for example, an individual might have more than one Race or multiple viral load counts. I'm going to pull in one of those files.

For example, here is the race file that I hope you can see on my screen. You can see client number 29 has two races. There is a row for each client id, race combination.

<sup>\*</sup>pull in race .csv\*



After you have completed the RSR Crosswalk and downloaded the example input files, you need to extract client-level data from your system or from multiple systems. Some providers have set up an automated process that pulls data from the EHR and spits it out in the correct .CSV file format. Others have to do the work manually.

Either way, we understand that getting data out of your EHR is the hardest part of the process. Most likely, you'll need to meet with your IT staff. When you do this. Please take your crosswalk and data dictionary, so they understand exactly what data you need. Please Start now! IT staff are notoriously busy, so it could take some time to create the files you need.



## **Prepare Input Files**

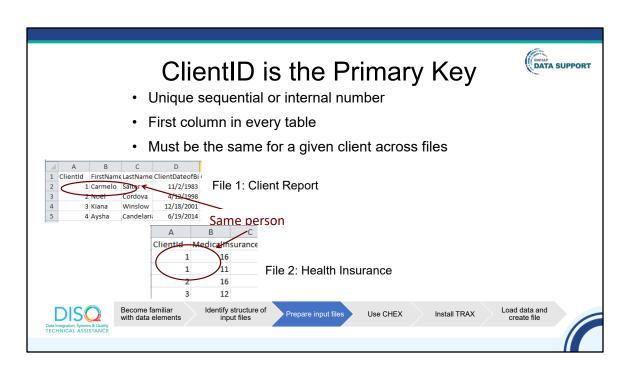
- Your files must have identical names as the templates
- Column order does not matter, but column headers should be identical
- Replace your values with RSR-required values



Then, you will structure your data to mirror TRAX's 12 .CSV files. First, file names must be identical to those in the folder on TargetHIV.

Second, within the file, although the column order does not matter, the columns headers do – they must be identical to the ones in the .CSV files. As a reminder, capitalization in the header names matters!

Lastly, you also must replace your values with the RSR-required values.

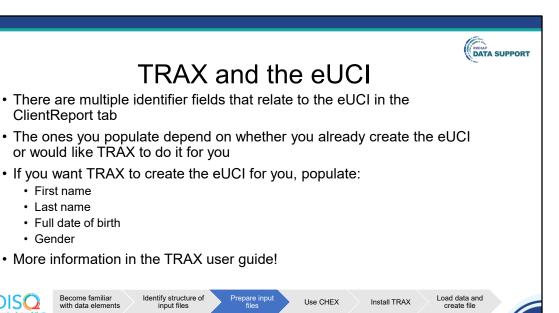


Now, let's talk about a couple of specific data elements.

The tables are linked by the Client ID. It is the first column in every file.

This number must be unique for every client. It can be a sequential number or internal number, like a medical record number and it does not show up on the XML file.

You must make sure that the same client has the same ID in each table. Let's look at an example on this slide here. Through the linking ClientID 1, you know which health insurance status Carmelo has



Another important data element I want to go over is the eUCI. It's the identifier HAB uses to link data across providers. It's made up of letters within the first and last name, date of birth, and a gender code. This 11-digit number is then encrypted to a 40-digit number. The last digit is used to indicate whether more than one client shares the same eUCI.

That first .CSV file – ClientReport – has multiple data elements related to the eUCI. The ones you populate depend on whether you already create the eUCI or want TRAX to create it for you.

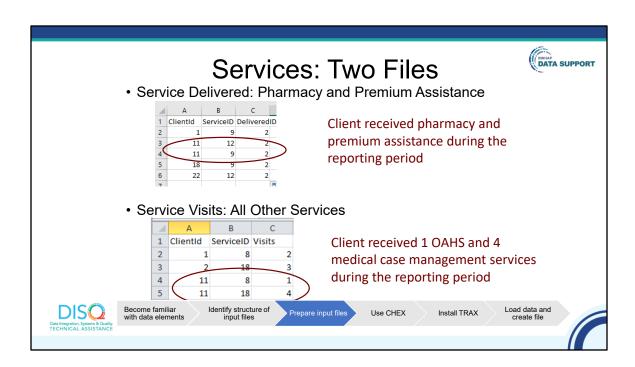
If you do not already create the eUCI and you want TRAX to create it for you, you need to populate the first and last name, full date of birth, and gender ID.

For more information, please take a look at the user guide!

 First name Last name

Gender

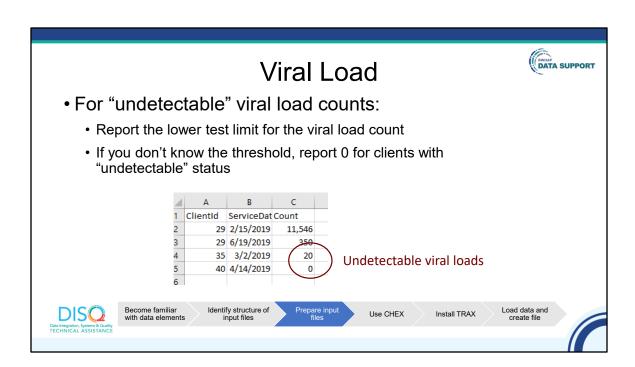
DISC



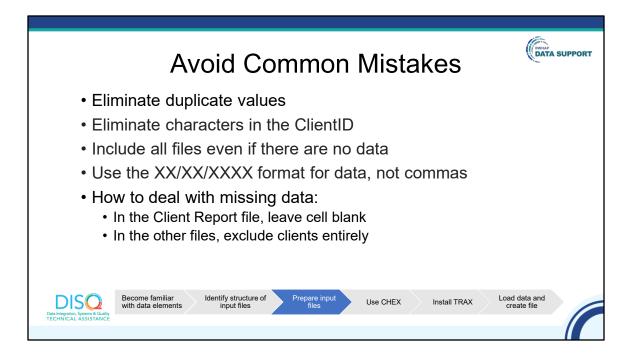
Let's talk a little about reporting services. You report services in two files in TRAX. One file captures two services: Health Insurance Premium and Cost Sharing Assistance for Low-income Individuals. The other one is for all other services. For each of these files, you report the ClientID and the ServiceID. For the Health Insurance Premium and Cost Sharing Assistance file, or the services delivered file, you just indicate that the client received the service with the value of 2.

Note that you do not have to report services that were not delivered. So, for the service delivered file, you'll report 2 across the board, indicating the client indeed received the service.

For all other services, you actually have to put the number of visits in the year.



We also get questions about viral load. Values under a certain threshold are captured as "undetectable." The RSR does not accept text or less than signs for the viral load value. Therefore, you should input the threshold value in the count field. In this example, you see these clients have undetectable viral loads. The test has a threshold of 20. If you don't know the threshold, report 0.



Eliminate duplicate values
Eliminate characters in the ClientID
Include all files even if there are no data
Use the XX/XX/XXXX format for data, not commas

Finally, TRAX allows you to create files with missing data. In the ClientReport file, just leave that cell empty. In the other files, exclude those clients entirely.



# **CHEX: Checking Data Quality**

- An Excel spreadsheet pre-loaded with drop down menus and conditional formatting
- Steps:
  - Copy and paste your data into each tab
  - "Validate" data to find invalid values
  - Review color-coded cells to identify other validation issues



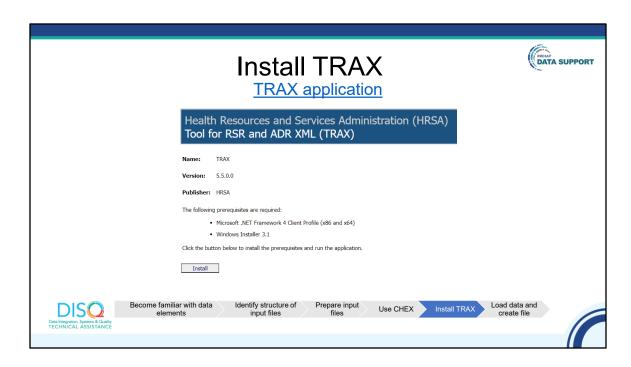
The next step is to use a tool called CHEX. It is an Excel spreadsheet pre-loaded with drop down menus and conditional formatting to help you check the quality of your data. It is also located in the support package and I will walk you through that!

#### \*show CHEX template\*

There is a tab for each of the 12 .csv files. What I do to use CHEX is I copy and paste my data from each of these 12 .CSV files into this template. Let me show you some of the features of CHEX. There are filters, so you can sort by different feature. Also, there are drop down menus that rpvide you a mapping of the values to the RSE option and forces you to sue the correct RSR values.

There is conditional formatting that helps you see if you have some sort of data validation issues. Here I can see that this is highlith gray, to know what that is, I an hover over the cell and it tells me that the birth year is not equal to the date of birth that is needed for the eUCL.

The next feature I want to show you is data validation. If I want to circle invalid values, I can go ahead and go to data validation "circle invalid values" and sure enough it looks like I have report three for ethnicity which is no a valid value and that means I have to go back to my source data and figure out the correct value.



Our next step is to install TRAX. When you click on the link, this is what you'll see. Click install; it'll walk you through the process.

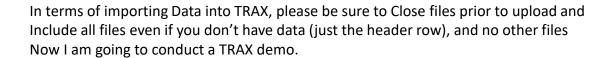
As a note, there is current issue that is being addressed where TRAX is converting dates to January. You can still get started with getting those .CSVs together but shouldn't generate the file until the issue is fixed, which should be December 16<sup>th</sup>.

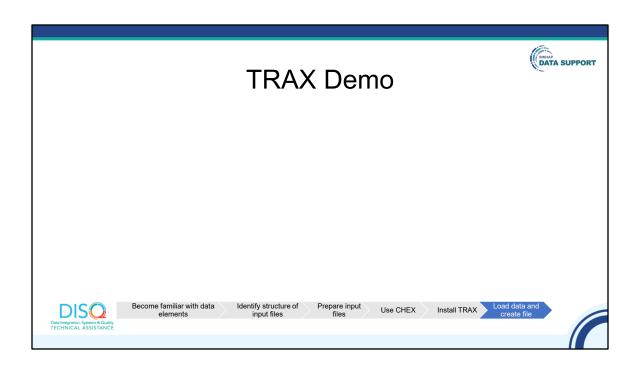


# Import Data into TRAX

- · Close files prior to upload
- Include all required files even if you don't have data (just the header row) and no other files







Close files prior to upload

Include all required files even if you don't have data (just the header row) and no other files

After you have downloaded TRAX on your computer, Open TRAX, click Tools and Import CLD, and browse to and upload your folder.

Click Tools and Generate CLD XML. Browse to location where you want file saved and type in name of file, including .xml extension.

Data are deleted once you close TRAX.

TRAX does not serve as a merging tool; new data imported overwrite pre-existing data.

After you generate your file, go to View Client Report to obtain a crosswalk of eUCl to Client ID (copy and paste table into Excel).



### **Data Security**

- Keep the populated Excel and .CSV files secure:
  - Store on a secure system
  - · Only use secure transfer methods
- Resources on TargetHIV: <u>Data Security Refresher</u>





Lastly, I want to discuss data security. I used dummy data so it was on my desktop. The client XML does not contain personally identifying information, like name or full date of birth. However, most likely, your Excel spreadsheet or .CSV file will. So, I want to emphasize the importance of keeping these data secure. Store your .CSV files on secure systems, such as behind firewalls, and only use secure transfer mechanisms to transfer the files.

If you would like more information about data security, just go to TARGET and do a search on "data security." There are lots of archived webcasts and resources there.



## **Resources and Questions**

- Download <u>TRAX support package</u>
- Install TRAX
- Start with the DISQ Team: <u>Data.TA@caiglobal.org</u>
  - Be prepared to share your desktop with us through webinar software (we'll send you a link)





Lots of resources to help you with TRAX.



### **TA Resources**

- The DISQ Team:
  - oData.TA@caiglobal.org
  - oSign up for the DISQ listserv
  - oSubmit a DISQ TA request
- Ryan White HIV/AIDS Program Data Support:
  - oRyanWhiteDataSupport@wrma.com o888-640-9356

- EHBs Customer Support Center:
  - 0 877-464-4772
  - Submit an EHBs TA Request
- CAREWare Help Desk:
  - o cwhelp@jprog.com
  - 0 877-294-3571
  - Join the CAREWare listsery





Before we finish up, I'd like to review the available technical assistance. The DISQ Team addresses questions for those needing significant assistance to meet data reporting requirements. DISQ also deals with data quality issues, as well as providing TA on TRAX and support in creating documentation.

Data Support addresses RSR-related content and submission questions. Topics include: Interpretation of the Instruction Manual and HAB's reporting requirements; Allowable responses to data elements; Policy questions related to the data reporting requirements; and Data-related validation questions.

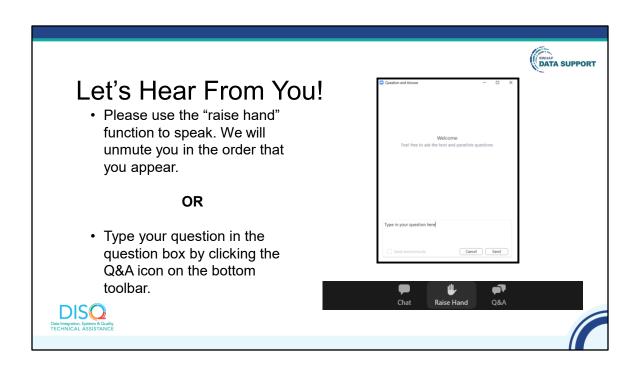
The EHBs Customer Support Center addresses software-related questions. Topics include: Electronic Handbook (EHB) navigation, registration, access and permissions and Performance Report submission statuses.

Finally, the CAREWare help desk is your best resource for any TA requests related to CAREWare. We encourage you to register for the listserv to join the conversation with other CAREWare users across the country.

Most importantly, there is no wrong door for TA – if you're not sure who to contact, we're happy to refer you to where you need to go!



Finally, to connect with and find out more about HRSA, check out HRSA.gov.



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.