

Welcome to today's Webinar. Thank you so much for joining us today! My name is Ellie Coombs. 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.



I'm joined today by Denise Absher from RWHAP Data Support, the experts on RWHAP reporting requirements. Denise and I 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 "Q&A" function on the settings bar on the bottom of the screen. All questions will be addressed at the end of the webinar in our live Q&A portion. During that time, you will also be able to ask questions live if you'd like to unmute yourself and chat with us directly.

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. We will also send an email to everyone registered for this webinar when the recording, slides, and Q&A document are posted.



## 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.

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DIS Q Data Integration, Systems & Quality TECHNICAL ASSISTANCE

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 Denise.



Thank you, Ellie. I'd also like to thank everyone for taking time out of your busy schedule to join us for today's webinar.

Before we begin, I'd like to go over the goals for today's presentation.

First, we want to celebrate your hard work in completing the RSR

Next, we want to acknowledge the system issues and thank you for your patience.

Then, we'd like to clarify some common challenges and go over some tips for avoiding them in the future.

Finally, we'd like to get your feedback on what worked and what can be improved.



Let's start with a brief review of the importance of the RSR.

The RSR is a client-level data reporting requirement that monitors the characteristics of Ryan White HIV/AIDS Program Parts recipients, providers, and clients served.

More than half of the people diagnosed with HIV in the United States receive services through the Ryan White HIV/AIDS Program. The program provides a comprehensive system of care and treatment that plays a key role in ending the HIV epidemic in the United States and works to support the national goals outlined in the HIV National Strategic Plan. The data collected through the RSR is reported to Congress to demonstrate the effectiveness of the RWHAP and to demonstrate the need for continued program funding.

In addition to congressional reporting, the RSR data you submit each year is used to create some helpful tools available on HRSA's RWHAP website including the 2021 Report of Clients Served by the RWHAP and the RWHAP Compass Dashboard. The links to access these tools are included on the slide.

In case you are not familiar with the Compass Dashboard, the dashboard is a user-

friendly, interactive data tool that allows users to visualize the reach, impact, and outcomes of the RWHAP. It includes national, state, and metro area level data. You can even look at client characteristic and outcomes including age, housing status, transmission category, and viral suppression.

It's important to remember that the data you submit have an impact on the ability to continue to provide valued services to our client population.



Let's take a look at the 2022 RSR submission statistics.

2022 R	SR Submission	Statistics
	<u>2021 RSR Deadline</u> March 28, 2022	2022 RSR Deadline March 27, 2023
Percentage of Recipient Reports Submitted by the RSR Deadline	97.8%	97.9%
Percentage of Provider Reports Submitted by the RSR Deadline	99.0%	99.3%
		Di.

For the Recipient Reports, 97.9% were in "submitted" status by the RSR deadline of March 27<sup>th</sup>, which is a slight increase in the number of Recipient Reports submitted by last year's deadline with about 97.8% 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 99.3% of reports in submitted status by March 27<sup>th</sup>.

We're 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. We recognize and appreciate all the effort and dedication you put into the RSR submission. We know you'll continue to provide this amazing work.



Before we discuss the RSR system issues, I want to quickly recap the changes that were implemented in the 2022 RSR.



Several changes were made to the Provider Report.

A new feature was added that allowed agencies to link service delivery sites to multiple providers. When entering a service delivery site, users received a system prompt when the site name and/or address matched an existing service delivery site in the system.

Also, there was an enhancement to the action history, which updated to display the grant number of any recipient that accepts the Provider Report, allowing agencies to easily discern which recipients must accept the report before it will advance to "Submitted" status.

Another feature added allows users to update certain organization details at any point throughout the year using the new Organization Profile feature. Organizations that use the Electronic Handbook System (or EHBs) Service Provider login portal can find the Organization Profile after logging in. Providers can update the details in the Organization Profile and synchronize any changes with their RSR Provider Report. The information included in the Organization Profile consists of the organization address, EIN, UEI, organization contacts, and Provider Profile Information.

Finally, there were a few categorical updates to three of the Provider Report validation messages regarding service delivery sites. There was also two new validation messages. One was an alert regarding a missing website URL for a service delivery site. The other was a warning if the services listed in Additional Services Delivered section were reported

as delivered but were not uploaded.



There were also a few changes to the Client-Level Data requirements.

Two data elements were added to the client-level data for the 2020 RSR that were required to be reported by ALL providers. In 2022, the reporting requirement changed. These two data elements were only required to be reported by providers who received EHE initiative funding.

In addition, the RSR Upload Completeness Report (UCR) was updated to display data from the prior year's submission (including counts and percentages). Footnotes were added to describe any data anomalies or changes in measures between current and prior years.



Before discussing the 2022 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 2022 RSR Submission?

- A. My submission went smoothly with no issues.
- B. I had a few issues during my submission, but I was able to work through them.
- C. I had multiple issues during my submission, but I was able to work through them.

Great, thank you Isia! Please remember that you can always call Data Support or the DISQ team if you need assistance with any questions you might have regarding your RSR submission.



Let's move on and go over the RSR system issues that were encountered during the 2022 reporting period.



Some users experienced a system error message when trying to open and/or submit their RSR on deadline days. You can expect delays and possible system errors if you wait until the deadline days (target date, return for changes, and final submission day) to submit. Most of those users reported they were successful accessing the report after trying multiple times.

Please try and submit your reports as early as possible.



Some providers were unable to add or delete rows to the Client by Zip Code table in the Provider Report. We worked with the System Team to resolve this issue. If you even encounter issues like this, again, please do not hesitate to reach out to Data Support!



There were also some issues related to Recipient Report status. For some recipients, a system issue arose that prevented reports from advancing to "Submitted" status even though all funding recipients accepted all provider reports.

Some recipients experienced a system issue that was the opposite of this situation, having their Recipient Report advance to "submitted" status when there were still Provider Reports that were NOT accepted by all the recipients/funding sources.

We worked with the System Team by escalating tickets to ensure the Recipient Reports advanced from "Certified" to "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 27<sup>th</sup> of March due to this system error, your report was not marked as late.



Let's take a few minutes to discuss some of the validation issues.

In particular, there was one validation error and two validation alerts that were encountered during the 2022 submission that I'd like to discuss.

Providers were receiving these erroneous messages in their validation results with no ability to resolve them.

Check #6 was an error message that prevented providers from moving forward with submitting their report.

Check #234 and #237 were alert messages and did NOT prevent providers from moving forward with submitting.

We worked with the System Team by escalating a ticket in order to resolve these validation messages.

These issues were fixed, but users had to revalidate their report to get the messages to clear. As a reminder, to get your report to revalidate, you need to save one of the

editable sections such as the Program Information section or the Service Information section in the Provider Report.



Now let's go over some common challenges that were encountered during the report submission as well as some helpful tips.



Some providers encountered system challenges due to confusion over which HRSA EHBs link to use for registration and completion of the 2022 RSR. There were some 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. Providers will only use the Service Provider link for the EHBs when completing reports. These links are available in the 2022 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 for the steps in accessing the RSR Provider report via the HRSA EHBs home page.

If you encounter any issues, please reach out! We're happy to help.

	Servic	e Provider Registration
	JUIVIC	c rioviaci negistration
<ul> <li>A system</li> <li>only org</li> <li>Contact</li> <li>Please</li> </ul>	m generated Glob ganizations to con t <u>Ryan White Data</u> be sure to have th	bal Unique Identifier (GUID) code is needed for provider mplete HRSA EHBs registration <u>a Support</u> via email if you need your agency's GUID code he EXACT organization name
	You are here; Home User Account - Create Registration Status Create Crea	Associate Account to Organization
	Fields with * are required	
	Fields with * are required User Information	
	Fields with   are required User information  First Name Middle Initial	
	Fields with	
	Fields with * are required User Information * First Name Middle Initial • Last Name • Username (i)	[Check Availability]
	Fields with <sup>4</sup> are required Usar Information	Check Availability       Password Instructions       Plasmord Instructions in length and contain the following       - A failer on ownerscale (in (x))       - A failer on ownerscale in special damanters - 1 (i) # *
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	Fields with <sup>4</sup> are required User information - Trick Name Middle Instal - Last Name - Username (i) - Password	Check Availability           Check Availability           Passavot Instructions           Plasmoth much low low low the characters is length and contain the following           • A less one supercase limber (if a)

Another common challenge that was encountered had to do with service provider registration. New 'provider only' users (provider only organizations utilizing the Service Provider portal) who are registering to the EHBs, are required to enter a Global Unique Identifier (GUID) code to associate their accounts to their organizations.

If you need your organization's GUID code when registering for the EHBs, contact Data Support for assistance.

Now when you contact us, please be sure to have the exact organization name as we'll need it to ensure new users are associated with the correct organization.



Let's continue by looking at provider contracts entered in the Grantee Contract Management System (or GCMS).

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.

Recipients, please be sure to to review the contracts in the GCMS and make any updates if needed before the RSR submission. It really is worth the extra time up front to ensure that the registration code listed in the GCMS is accurate. If you don't catch this before the RSR Provider Report opens, and incorrect agencies are showing up in a provider report, it can be very complex to untangle the web once providers have started and perhaps even submitted their reports. It will save recipients and providers a lot of time and confusion if you ensure the registration code and organization name is correct in the GCMS before the Recipient Report is certified.

Also, if a recipient wants confirmation that they are using the correct registration code before adding a contract, they can always reach out to Data Support. We can confirm the provider's information as well and 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.



There appeared to be some confusion and even fear surrounding the synchronization of reports.

If a Recipient Report is in "certified" status and the recipient makes a change to their contracts in the GCMS, then the report must be synchronized by Data Support.

Many users were very cautious about pressing that "Synchronize All" button. Don't be afraid to click on the "Synchronize All" link if the system allows it.

Pr	oviders struggled with the	new procedures for updating the
Ge	eneral Information section	
	Provider Profile Information	
	Provider Type:	Health department
	Section 330 Funding Received:	No
	Type of ownership:	Public/Local
	Faith-based Organization:	No
	Dest of a seal time all other aid data maturally	Vec

Providers also had a difficult time updating the General Information section of the Provider Report including the Organization Details, Organization Contacts, and Provider Profile Information. Updating these sections directly in the report would result in a synchronization warning. If providers synchronized, it would then revert their changes since the report pulls in whatever information is listed in the new Organization Profile. Again, you don't have to wait for the RSR to open in the EHBs to access your Organization Profile.

Alternatively, if you are a recipient who is trying to edit this information for yourself or one of your provider agencies, please contact Data Support for assistance.



Now let's talk a little bit about the Additional Services Table. In the Service Information section of the Provider Report there is an Additional Services table which is used to identify additional services that were provided through your organization's 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 agency's OWN RWHAPrelated 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. If the funded service categories are incorrect, you should contact your recipient to confirm your agency was indicated as funded on their Recipient Report.

• Providor	Jploading Client-level Data	
	s should make sure to upload the XIVIL me in the impo	rt Chent
level Da	ta section to satisfy reporting requirements	
NAVIGATION «	RSR Provider Report Your session	n will expire in: 27:23
Roccivent Report     Provider Report     Provider Report     General Information     Service Information     Service Information     HCST Information     Const by 21P Code	Client Level Data Upload If your agency provided core medical or support services during the reporting period, upload client-level data to complete your Provider Report. When your XML file processed, you can view any alerts, warrings, or errors that are in the data. You can also view the Upload Completeness Report. Select the arrow to the left of the I Vaulation Report and Upload Completeness. Report reach individual file that was successfully processed. To see the Validation Report and Upload Completeness Report. Please note:      This feature only works with RSR client-level data XML files that conform to the RSR Client-Level Data XML Schema Definitions. The most recent RSR XML are available on the TargetHV vebsite.      Vou will be unable to upload files larger than ZMMB. If your client-level data XML file is larger than Z9MB, please zip your file before upload.     Create Corr      vouw will be insets in the Upload History Table are not automatically displayed. To view real-time updates to the Upload History Table, you must man     browser window	<ul> <li>is successfully</li> <li>ID number to see the ss Report for the</li> <li>L Schema Definitions</li> <li>mpressed Zip File</li> <li>nually refresh this</li> </ul>
Data Provider Report Actions Submit / Accept Submit / Accept Do Submit / Accept Clear Cleants Return for Changes Return for Changes Provider Report -	Client Upload Select the client records that you would like to upload. You will receive an email confirmation after your records are successfully processed. Choose File No file chosen Upload records for: Silver Medical Center  Upload File Cancel	

An additional challenge that we noticed during the RSR submission was 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 is an optional system to test your client-level data BEFORE the Provider Report opens. It's a great tool to use to check if your client-level data is compliant with system schema and to run a validation report.

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 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	$\checkmark$	x	
Service(s) delivered but not uploaded		$\checkmark$	X
Service(s) uploaded but not delivered		X	$\checkmark$
		~	v

Since we're on the subject, let's take a moment to discuss some additional validation messages that can be really confusing for recipients and providers.

These validation messages are associated with 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 clarity regarding the validation messages. In short, if services funded, services delivered and services uploaded don't match, you'll get a validation message.

Please refer to the Data Validations Document and the document entitled RSR In Focus: Reporting Services Correctly in the RSR which are both located on TargetHIV. Of course, if you need assistance, you are welcome to reach out to Data Support.



Let's take a look at what can be done to remove a few of these validations. 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.

If your report is missing data for a service that you 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 your contracts in the GCMS.

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, and we can help you figure out the best course of action.



There was also some confusion regarding the different report statuses for both Recipient Reports and Provider Reports.

Once a recipient accepts all the provider reports through their grant, that grant's Recipient Report moves to "Submitted" status. As a recipient, if you have providers that receive funding from other RWHAP funding sources, whatever the other recipient does won't affect the status of your report. If they don't accept a report, you've already accepted, it won't prevent your Recipient Report from moving to "Submitted" status.

A Provider Report stays in "Review" status until all recipients have accepted it. In other words, all recipients must accept the Provider Reports via all funding sources to ensure the Provider Reports move into "Submitted" status. This includes recipients who are recipient providers. So, recipient providers....once you submit your Provider Report, please check to make sure your Recipient Report advances to 'Submitted' status.

Action Type	Action Taken By	Action Taken On
<ul> <li>Accept PR</li> </ul>	CountyHealth@countyhealth.gov	3/18/2023 6:12:02 PM
Description: Recipient Accepts Pro	vider Report, advance Provider Report to Submitted status	
<ul> <li>Accept PR</li> </ul>	CountyHealth@countyhealth.gov	3/18/2023 6:12:02 PM
Description: Recipient Accepts Pro Out of 2 funding sources, H89HA00 Comment: Accept	wider Report, stay in Review Status since not all Recipients accepted 0000 has accepted.	
<ul> <li>Accept PR</li> </ul>	user@healthandhappiness.org	2/28/2023 3:55:05 PM
Description: Recipient Accepts Pro Out of 2 funding sources. H76HA00 Comment: Submit and accept	wider Report, stay in Review Status since not all Recipients accepted 2000 has accepted.	
+ Submit PR	user@healthandhappiness.org	2/28/2023 3:55:05 PM
Start PR	user@healthandhappiness.org	2/21/2023 11:59:47 AM

As previously mentioned, there was a new feature added for the 2022 RSR which is an update to the Action History.

The Action History will update each time a recipient accepts a Provider Report by displaying the recipient's grant number. If you follow the Action History of a specific report, you can easily see which recipients have accepted the report. You can also view if a report was returned for changes. This is very helpful in tracking the progress of your Provider Report.

In this example, you can see that this agency has two funding sources. Once the Part C and Part A agency have accepted the report, the Action History will let you know that the Provider Report has advanced to "Submitted" status.



Now I would like to pass the presentation to Ellie who will go over RSR Data Submission challenges.



Thanks Denise!

Overall, this year went pretty smoothly with client-level data reporting. There were no schema updates this year, which always makes things a little easier.

There were some glitches that created confusion and frustration. We appreciate your patience with these issues and your feedback so we can address issues as soon as they arise.

There were also some questions about the Upload Completeness Report. Data elements only required for EHE-funded providers showed up as missing for non-EHE funded providers.

In addition, although HIV diagnosis year is only required for new clients, it was showing up as required for everyone in the UCR.

We told providers to disregard the missing rows in the tables. In the future, we'll work with the developers to modify the UCR, so it better reflects your program and data quality. We want to make the tool as effective as possible.



As we all know, RSR-Ready Systems make the RSR a success. 90% of files are created through an RSR-Ready System, so thank you to our RSR-Ready Systems for supporting RWHAP data reporting!

But nothing is easy

- Quite a few jurisdictions transitioned to new systems, which created additional work and often meant last minute updates. Those of you with a transition on the horizon, start now to get your 2023 work plan in place.
- Also, within vendor organization, there was staff turnover. Folks will no experience with HIV care and RWHAP were leading needed updates. They required additional guidance and support from TA providers. Also, our RWHAP providers did an excellent job training them.



Also, like last year, there was high staff turnover among RWHAP providers 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! If you're new or if you have some new staff coming in, I want to remind you of all the resources available:

- First off, you should contact the DISQ team so we can set up a personalized orientation call.
- You can watch our new user training, hosted by our amazing colleague, Ruchi.
- There is also a new staff training module available on Target
- Also, we plan on holding several orientation calls to talk through processes and resources.



Some EHE-funded agencies submitted the RSR for the first time. Or, if they had been previously funded by Ryan White, they started including their EHE clients and services in the RSR.

We 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

The RSR Instruction Manual describes what data elements are required for clients who received the EHE service category.



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.

First off, do your best! We understand if there are discrepancies. To get the numbers as close as possible, check to see what feature your system has to generate the report. All RSR-Ready Systems have a report generation function.

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.



I will now pass the presentation to Isia for the next poll question of today's webinar.

What type of challenges did your agency experience during the 2022 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)



Now let's discuss reminders & TA Resources.

TA C	ontact Information
TA Resource	Type of TA
Ryan White Data Support 888-640-9356   <u>RyanWhiteDataSupport@wrma.com</u>	<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 <u>Data.TA@caiglobal.org</u> <u>Sign up for the DISQ listserv</u> <u>Submit a DISQ TA Request</u>	<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   <u>Submit an EHBs TA Request</u>	<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   <u>cwhelp@jprog.com</u> Join the CAREWare listsery	<ul> <li>How to generate the XML file from CAREWare correctly;</li> <li>How to view a sample client summary file; and</li> <li>Creating custom reports.</li> </ul>

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.



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 webinar. We really appreciate your feedback and use this information to plan future webinars. My 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 "Q&A" button on your control panel on the bottom of your screen. You can also ask questions directly "live." You can do this by clicking the "raise hand" button, which is also on your control panel. If you raise your hand, we'll be able to allow you to unmute and ask your question. 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 via email to follow up. Sometimes we need to do some follow-up before providing you with a final answer, so stay tuned for the written Q&A as well for answers to all of your questions.