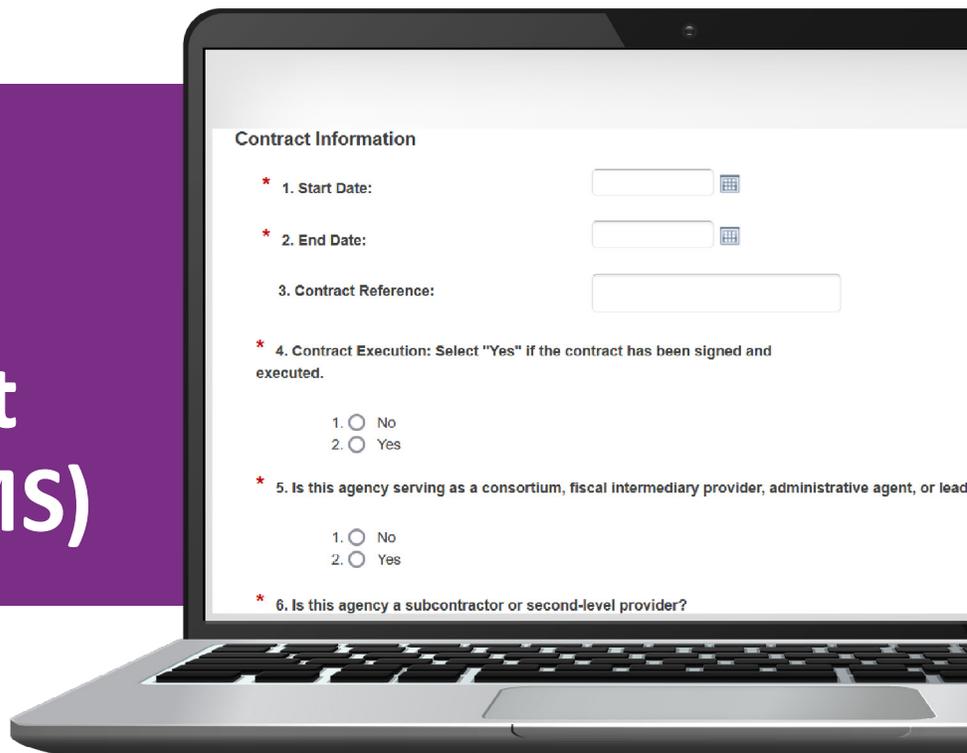# Grantee Contract Management System (GCMS)

Contract Information

* 1. Start Date:

* 2. End Date:

3. Contract Reference:

* 4. Contract Execution: Select "Yes" if the contract has been signed and executed.

    1. ◯ No
    2. ◯ Yes

* 5. Is this agency serving as a consortium, fiscal intermediary provider, administrative agent, or lead

    1. ◯ No
    2. ◯ Yes

* 6. Is this agency a subcontractor or second-level provider?

Instruction Manual 2023

Release Date: September 8, 2023

The Grantee Contract Management System (GCMS) collects and stores all Ryan White HIV/AIDS Program (RWHAP) recipient contract information. The information stored in the GCMS populates into the RWHAP Services Report (RSR), Ending the HIV Epidemic (EHE) Triannual Report, and the Program Terms Report (PTR)/Allocations Report.

HRSA Health Resources & Services Administration

RWHAP DATA SUPPORT

Table of Contents

Icons Used in This Manual

The following icons are used throughout this manual to alert you to important and/ or useful information.

The Note icon highlights information that you should know completing this section.

The Tip icon points out recommendations and suggestions that can make it easier to complete this section.

The Question Mark icon indicates common questions and their answers.

All new text in the document is indicated with a gray highlight.

The no icon indicates answer options that cannot be selected or information that cannot be entered under certain circumstances in the report.

What's New for 2023

Ending the HIV Epidemic (EHE) initiative recipients now have an option to indicate EHE carryover-funded core medical and support services in question 9 of the GCMS Contract Details page. Recipients should select the checkbox in the "EHE Carryover Funding" column and enter an amount in the box in the "EHE Carryover Funding Amount" for any services the agency is funded to provide with EHE carryover funding (Figure 1). The "EHE Carryover Funding Amount" box will only unlock if the service is selected in the "EHE Carryover Funding" column.

Figure 1. GCMS: Screenshot of the EHE Update Services Table

Services

Select the core medical, essential support and EHE initiative services for this contract that are funded through EHE program. For each service category funded through EHE, enter a funding amount in the corresponding column. The award amount should reflect the current year and should not include carryover funds.

Done updating services *

* Your changes will not be saved until you select the "Save" button on the contract details page.

Service Name	EHE Funding	EHE Carryover Funding	Base	EHE Carryover Funding Amount
Service Category: Core Medical Services				
Outpatient/Ambulatory Health Services	☐	☑		
AIDS Pharmaceutical Assistance	☐	☐		
Oral Health Care	☐	☐		
Early Intervention Services (EIS)	☐	☐		
Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	☐	☐		
Home Health Care	☐	☐		

> ! Contracts and services funded solely through EHE carryover funding as well as the associated funding amounts will not populate in your agency's EHE Allocations Report.

Background

The Grantee Contract Management System (GCMS) is a data-storage system located in the HRSA Electronic Handbooks (EHBs) for Ryan White HIV/AIDS Program (RWHAP) contract information. Contract information is entered and maintained in one place to decrease recipients' data-entry burden. The GCMS captures budgetary information entered by recipients including contract dates, funding relationship structures, funded service categories, and funding amounts.

Multiple data reports are populated with the information entered into the GCMS including the:

- RWHAP Services Report (RSR)
- Program Terms Report (PTR)/Allocations Report
- Ending the HIV Epidemic (EHE) Triannual Report

Recipients typically add their contracts into the GCMS during completion of the PTR/Allocations Report with the intended allocation of their award funding for the budget year. Recipients can edit these contracts with any necessary updates during the later completion of the agency's RSR or EHE Triannual Report (if applicable).

Every organization funded to provide services with a recipient's award (including the recipient itself if applicable) should have a contract in the GCMS. Providers should have a separate contract for each budget year with the contract dates ideally matching the dates of their budget period.

	Recipients cannot reuse the same contracts from year to year. Enter a new contract for each provider each budget year.

	If you have any questions about the GCMS, please contact Ryan White Data Support at 1-888-640-9356 or email RyanWhiteDataSupport@wrma.com for assistance.

Terminology

This section provides an overview of select terms used throughout this manual and the GCMS that will be helpful for agencies to understand.

Classification of Organizations

Recipient: A recipient is an organization that receives funding directly from HRSA HAB. Recipients may provide services themselves or allocate funding to other organizations to provide services.

Provider: A provider is any organization that provides services including direct services to clients and/or administrative and technical services. A provider may be a recipient, subrecipient, and/or second-level provider.

Subrecipient: A subrecipient (Figure 2) is an organization that receives funding directly from a recipient to provide services.

Second-level Provider: A second-level provider (Figure 3) is an organization that receives funding through a subrecipient to provide services. Occasionally, recipients will use an administrative agent to award and/or monitor the use of their funds. In this situation, the administrative agent (or fiscal intermediary provider) is the recipient's subrecipient. When this subrecipient enters into a contract with another provider to use the recipient's funds to deliver services, that provider is considered a second-level provider to the recipient.

Figure 2. Subrecipient

Figure 3. Second-level Provider
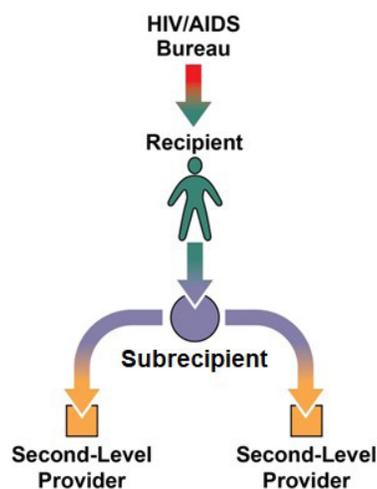
RWHAP Services

Funded services are divided into three groups:

- Administrative and technical services
- Core medical services
- Support services

Definitions for administrative and technical service categories can be found in Appendix A of this manual. RWHAP core medical and support service categories are listed and explained in Policy Clarification Notice (PCN) #16-02 "Eligible Individuals and Allowable Uses of Funds."

For agencies that received EHE initiative funds

The "EHE" service category includes those services that are funded through EHE initiative funding but do not meet the definition of one of the existing RWHAP service categories as outlined in PCN #16-02.

EHE initiative funding dedicated to services that do meet the definition of one of the RWHAP core medical or support service categories should be reported under that specific service category.

If you have any questions or need assistance with service category definitions, please contact Ryan White Data Support at 1-888-640-9356 or email RyanWhiteDataSupport@wrma.com for assistance.

Accessing the GCMS

The GCMS is accessible via the HRSA EHBs, through any of the reports that utilize the system. These include the RSR, PTR/Allocations Report, and EHE Triannual Report. By accessing the most recent version of any of these reports in the HRSA EHBs, you can navigate to the GCMS and work on your agency's contracts. Further detailed instructions for accessing the GCMS through each report follow below.
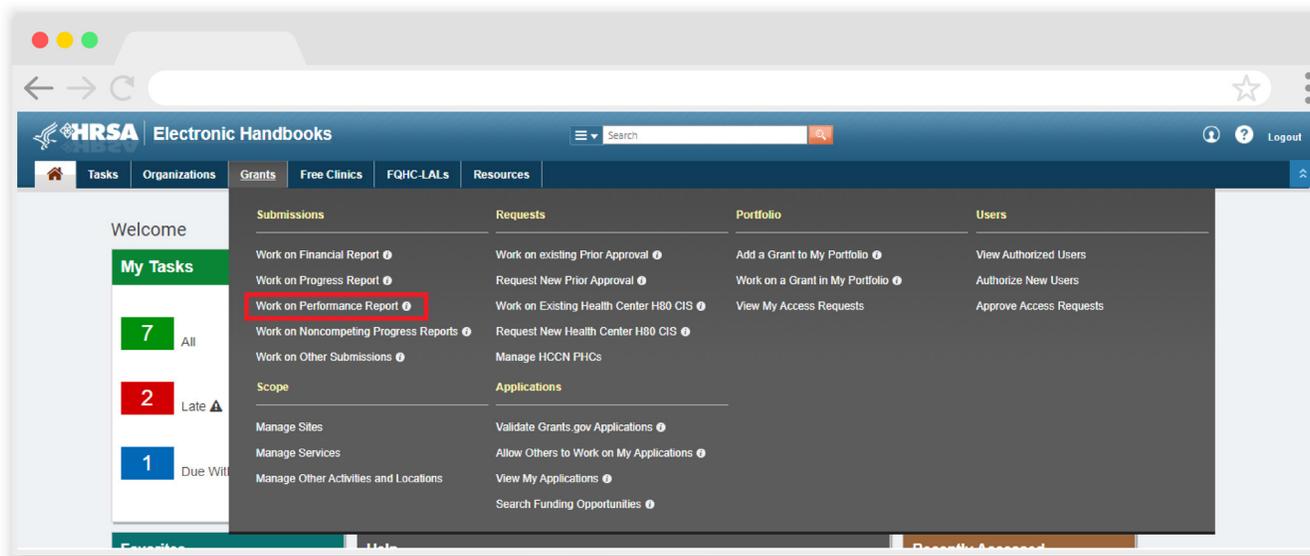
Via the PTR/Allocations Report

STEP ONE: Log in to the HRSA EHBs. Hover your cursor over the "Grants" tab at the top of the page.

> If you need assistance with your credentials to access the EHBs, call the EHBs Customer Support Center at 1-877-464-4772.

STEP TWO: In the resulting dropdown menu, select "Work on Other Submissions" (Figure 4).

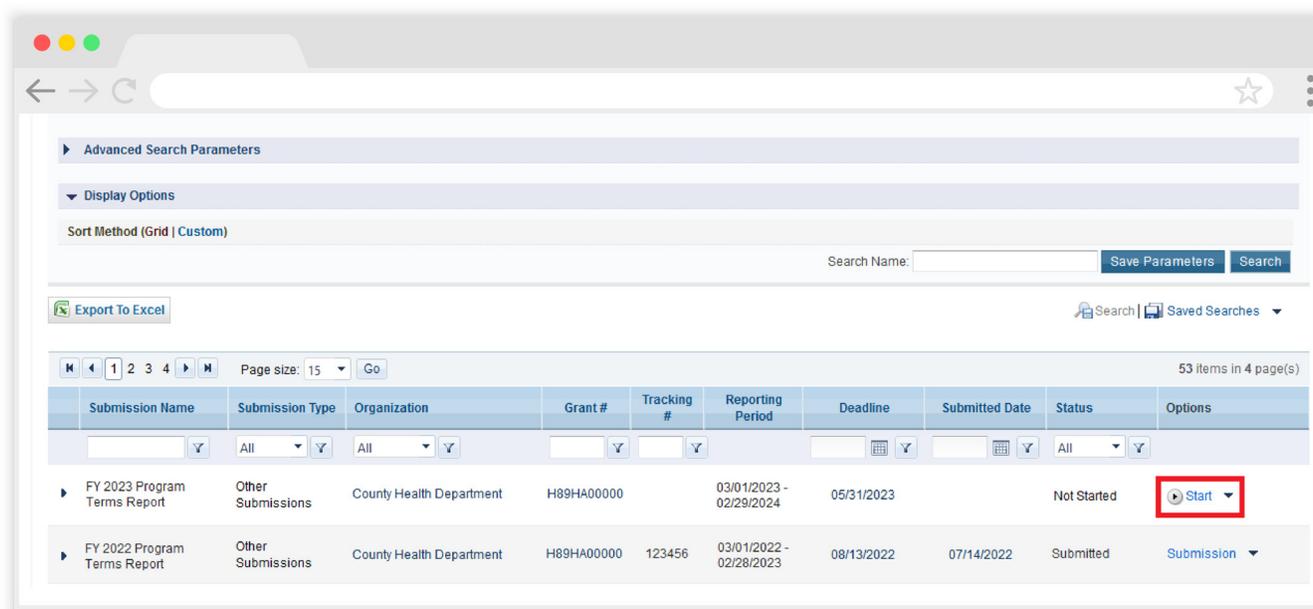**Figure 4. HRSA EHBs: Screenshot of the Grants Dropdown Menu**

STEP THREE: On the next page, "Submissions - All," locate your most recent PTR/Allocations Report submission (Figure 5). Select "Start" or "Edit" in the far right "Options" column. If your agency's report has not been started, the link will read "Start" and after it has been started the link will instead read "Edit."

> **!** The GCMS is grant-specific. If your organization has more than one RWHAP or EHE award, you must access the GCMS through each grant's submission separately.

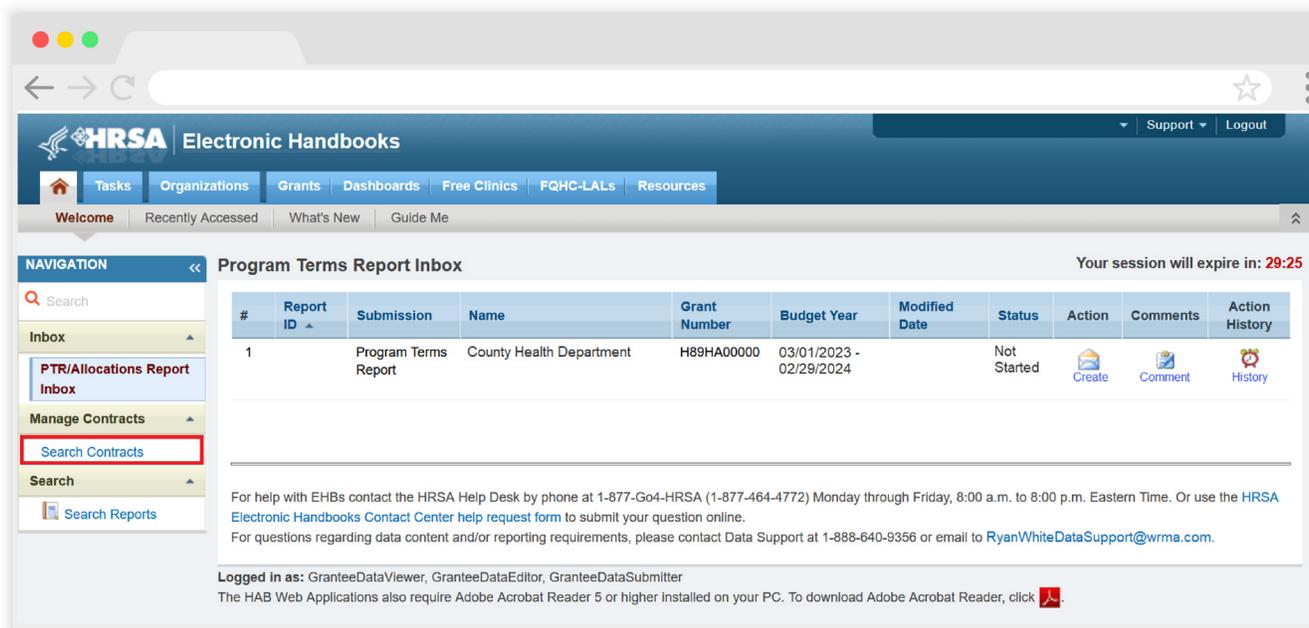**Figure 5. HRSA EHBs: Screenshot of the Submissions - All Page**

STEP FOUR: In the new window (the "Program Terms Report Inbox" or "Allocations Report Inbox"), select "Search Contracts" in the Navigation panel on the left side of the page (Figure 6). You will now be in the GCMS.

Figure 6. PTR/Allocations Report: Screenshot of the Program Terms Report Inbox

Via the RSR or EHE Triannual Report

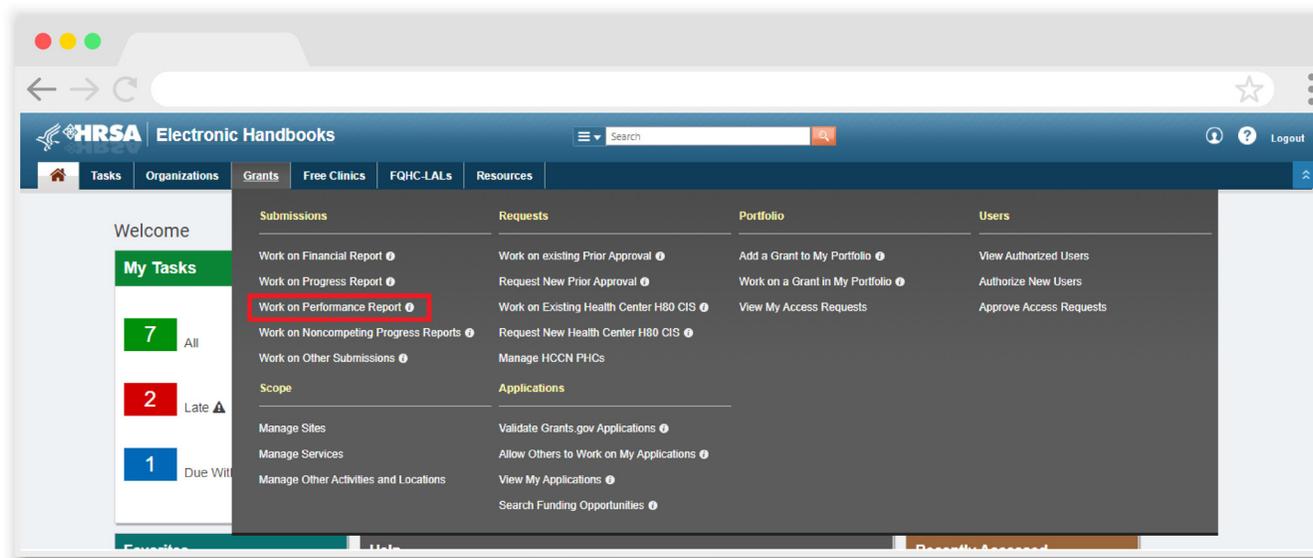**STEP ONE:** Log in to the HRSA EHBs. Hover your cursor over the "Grants" tab at the top of the page.

> If you need assistance with your credentials to access the EHBs, call the EHBs Customer Support Center at 1-877-464-4772.

STEP TWO: In the resulting dropdown menu, select "Work on Performance Report" (Figure 7).

**Figure 7. HRSA EHBs: Screenshot of the Grants Dropdown Menu**

STEP THREE: On the next page, "Submissions - All" (Figure 8), locate your most recent RSR or EHE Triannual Report (if applicable) submission. Select "Start" or "Edit" in the far right "Options" column. If your agency's report has not been started, the link will read "Start," and after it has been started the link will instead read "Edit."

> **!** The GCMS is grant-specific. If your organization has more than one RWHAP or EHE award, you must access the GCMS through each grant's submission separately.

Figure 8. HRSA EHBs: Screenshot of the Submissions - All Page
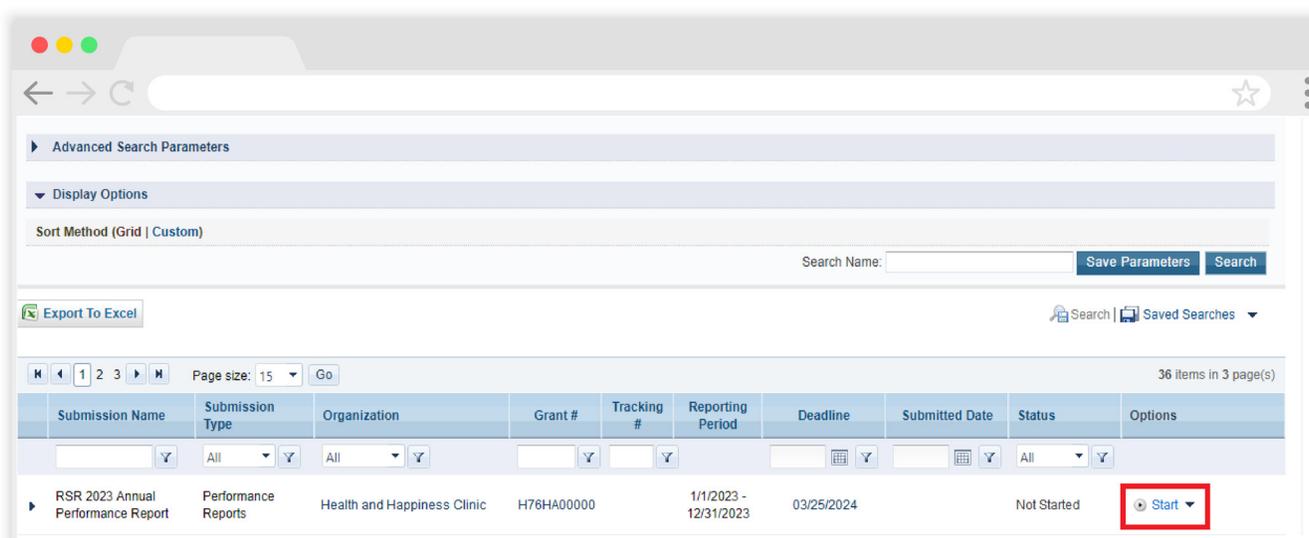
STEP FOUR: In the new window (the "RSR Recipient Report Inbox" or "EHE Triannual Recipient Report Inbox" depending on the report selected on the previous page), select "Search Contracts" in the Navigation panel on the left side of the page (Figures 9 and 10). You will now be in the GCMS.

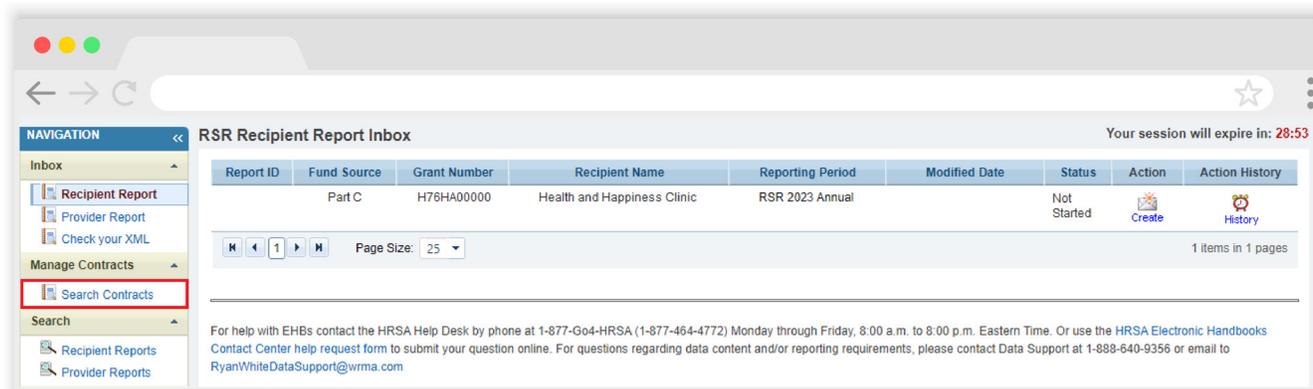**Figure 9. RSR Recipient Report: Screenshot of the RSR Recipient Report Inbox**

Figure 10. EHE Triannual Recipient Report: Screenshot of the EHE Triannual Recipient Report Inbox

Using the GCMS

Accessing the GCMS will first bring you to the GCMS search page. Before you are able to add, copy, edit, or delete contracts, you must perform a search.

Searching for Contracts

To find a contract, you can search by any criterion or combination of criteria. Searching without any additional search criteria will return all contracts associated with your agency's grant that have previously been entered into the GCMS.

If you are not sure of the exact name, date, etc., search by broader criteria. For example, if you are searching by Organization Name and are looking for "Health and Happiness Clinic," searching just for the term "Happiness" may return more results than searching for the whole organization name but is more likely to return the desired result. Below are descriptions of the fields present on the GCMS search page (Figure 11).

- **Grant Number:** This field is prepopulated with the grant number of the submission you used to access the GCMS.

> ! If you need to access the contracts for a grant other than the one listed in the Grant Number field, then you must access through the GCMS through a separate report tied to that grant number.

- **Org (Organization) ID:** A system-generated number unique to each organization in the system. Searching by this criterion will return all contracts associated with the specified organization.

- **Registration Code:** A system-generated number unique to each organization in the system. Searching by this criterion will return all contracts associated with the specified organization.

- **Organization Name:** The title or name listed for an organization in the system directory. You may search for the entire name or a portion of the agency's name. Searching by this criterion will return all contracts associated with the specified organization name.

> ! You must spell the organization name or portion of the agency's name exactly as it is listed in the system, including any punctuation.

- **Funded Through:** The name of the fiscal intermediary provider administering the contract for the recipient (if applicable). This includes administrative agents, consortia, fiscal intermediaries, and lead agencies. Searching by this criterion will return all contracts where the specified name is functioning as a fiscal intermediary provider for the recipient.

- **Contract ID:** A system-generated number unique to each individual contract entered into the system. Searching by this criterion will return the single contract that corresponds with the specified number.

- **Reference:** A user-generated contract identifier. Recipients may enter any identifier they wish in the optional "Reference" field of their contracts such as internal tracking numbers. Searching by this criterion will return all contracts with the specified identifier.

- **Range Start Date:** Corresponds to the contract dates. Searching by this criterion will return all contracts that were funded at any point after the specified date.

- **Range End Date:** Corresponds to the contract dates. Searching by this criterion will return all contracts that were funded at any point prior to the specified date.

> Searching using the reporting period dates of a report as the Range Start Date and Range End Date will return all contracts that overlap with the reporting period.

Figure 11. GCMS: Screenshot of the GCMS Search Page

Adding a Contract

Recipients must add a new contract each budget year for every organization funded to provide services with their award. When adding a new contract, recipients have two options: copy an existing contract or add a new one. Copying a contract makes the most sense when the recipient is funding the same provider from year to year (see Copying a Contract for further instructions). Recipients can copy a contract by selecting "Copy Contract" on a previous entry and entering the new contract dates.

If it does not make sense for your agency or if you are unable to copy an existing contract, you must add a new contract. To add a new contract, follow these steps:

STEP ONE: Start by performing a search in the GCMS (see Searching for Contracts for further instructions) to confirm that the contract you wish to add has not already been entered into the system. Beneath the search results, select the "Add Contract" button (Figure 12).

> **!** Your agency should establish guidelines on who will be responsible for accessing the GCMS to make modifications and enter any new contracts.

> **🚫** Recipients cannot reuse the same contracts from year to year. Enter a new contract for each provider each budget year by copying an existing contract or adding a new one.

Figure 12. GCMS: Screenshot of the GCMS Search Results Page
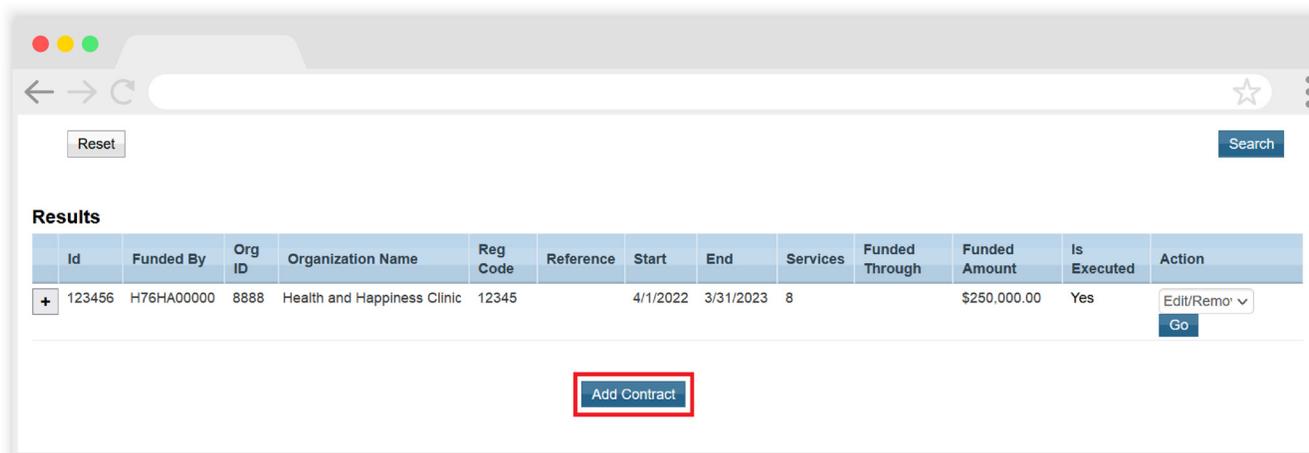
STEP TWO: On the next page, "Select Contractor," you must search for and identify the organization for which you are adding a contract. The fields available to search include the Reg (Registration) Code, Organization Name, City, and State. You may use any combination of these criteria to search the system directory. Enter your desired search criteria and then select the "Search" button (Figure 13).

> **!** Recipients must add a contract with themselves for the services that they provide.

> **💡** Search by the registration code to ensure the correct agency is being added to the contract. If you need help identifying or confirming a registration code, contact Ryan White Data Support at 1-888-640-9356 or email RyanWhiteDataSupport@wrma.com.

Figure 13. GCMS: Screenshot of the Select Contractor Page

STEP THREE: Locate the provider you wish to add to the contract in the search results. Select "Add" in the "Action" column to add the agency to the contract.

> If you need help locating a provider within the GCMS, contact Ryan White Data Support at 1-888-640-9356 or email RyanWhiteDataSupport@wrma.com.

> If you need to add a new provider to the system directory email Ryan White Data Support at RyanWhiteDataSupport@wrma.com. In your email include the provider's name, address, EIN, and a point of contact including the person's name, title, phone number, and email address.

STEP FOUR: The next page, "Edit Contract Details," begins with three sections of information prepopulated from the HRSA EHBs about your recipient organization and the agency you are adding the contract with. Scroll to the "Contract Information" section (Figure 14) to begin entering your contract information. Once you have entered a response for all required fields, select "Save" at the bottom of the page. A detailed description of each field follows below.

1. **Start Date:** Enter the start date of the contract by typing it into the text box or selecting the date from the calendar. To enter the contract start date, use the format "MM/DD/YYYY."

2. **End Date:** Enter the end date of the contract by typing it into the text box or selecting the date from the calendar. To enter the contract end date, use the format "MM/DD/YYYY."

> The contract Start Date and End Date should match the start and end date of the budget year for which you are adding the contract.

3. **Contract Reference (if applicable):** Enter any combination of letters, numbers, and/or special characters to make the contract easier to identify such as an internal contract ID. This item is for your reference and is not required for you to be able to enter the contract.

4. **Contract Execution:** Select "Yes" if the contract has been signed and executed. Otherwise, select "No."

5. **Is this agency serving as a consortium, fiscal intermediary provider, administrative agent, or lead agency under this contract?** Select "Yes" or "No." Recipients may utilize a fiscal intermediary or similar provider to award and/or monitor the use of their funds. If the organization in this contract is functioning as one of the listed designations for the recipient and one or more second-level providers, select "Yes." If you select "Yes," choose the appropriate designation in question 5a that appears after you select "Yes." See the Glossary for definitions of each of these terms.

> 🚫 A recipient cannot serve as an administrative agent, consortium, fiscal intermediary, or lead agency for its own grant. Select "No" if adding a contract for your own recipient agency.

> ❗ For further assistance selecting the correct type of fiscal intermediary, contact your HRSA HAB project officer.

6. **Is this agency a subcontractor or second-level provider?** Select "Yes" or "No." For the purposes of the GCMS a subcontractor and second-level provider are the same thing, a provider that receives funding to provide services through a fiscal intermediary. If you select "Yes," a dropdown menu will appear as question 6a where you must select the provider's fiscal intermediary.

> 🚫 A recipient cannot be a second-level provider for its own grant. Select "No" if adding a contract for your own recipient agency.

> ❗ If adding a contract for a second-level provider, make sure you have added the fiscal intermediary's contract first. You will not be able to save the contract of the second-level provider without specifying the associated fiscal intermediary.

> ❗ Pay attention to the contract dates of any fiscal intermediary contract selected in question 6a. The fiscal intermediary contract selected should be from the same budget year as the second-level provider's contract.

Figure 14. GCMS: Screenshot of the Contract Information Section

7. **Does this agency provide direct client services?** Select "Yes" or "No."

8. **If applicable, select the administrative and technical services that are funded for this contractor.** Select all administrative and technical services that the provider is funded to provide. See Appendix A for definitions of the administrative and technical service categories.

The GCMS does not capture funding amounts allocated to administrative and technical services. Enter these values into your agency's PTR or Allocations Report.

9. **If applicable, indicate the core medical and essential support services that are funded for this contract by selecting the "Update Services" button.** Select the "Update Services" button to add any core medical or support services the provider is funded to provide. A new window will appear with a table containing the list of possible services. This table will differ based on the grant you are adding the contract for (see below for further instructions). Once you have finished entering the provider's services, select the "Done Updating Services" button.

> To review the RWHAP core medical and support service category definitions, please see PCN #16-02 available on the HRSA HAB website.

> To save the contract, you must mark at least one service the provider is funded to provide in either question 8 or 9.

> Do not enter funding amounts for RWHAP-related funding or RWHAP carryover into your contracts.

Figure 15. GCMS: Screenshot of the Service Information Section

Service Information

* 7. Does this agency provide direct client services?

1. ◯ No
2. ◯ Yes

8. If applicable, select the administrative and technical services that are funded for this contractor.

1. ☐ Planning or evaluation
2. ☐ Administrative or technical support
3. ☐ Fiscal intermediary support
4. ☐ Other fiscal services
5. ☐ Technical assistance
6. ☐ Capacity development
7. ☐ Quality management
8. ☐ Other

9. If applicable, indicate the core medical and essential support services that are funded for this contract by selecting the "Update Services" button.
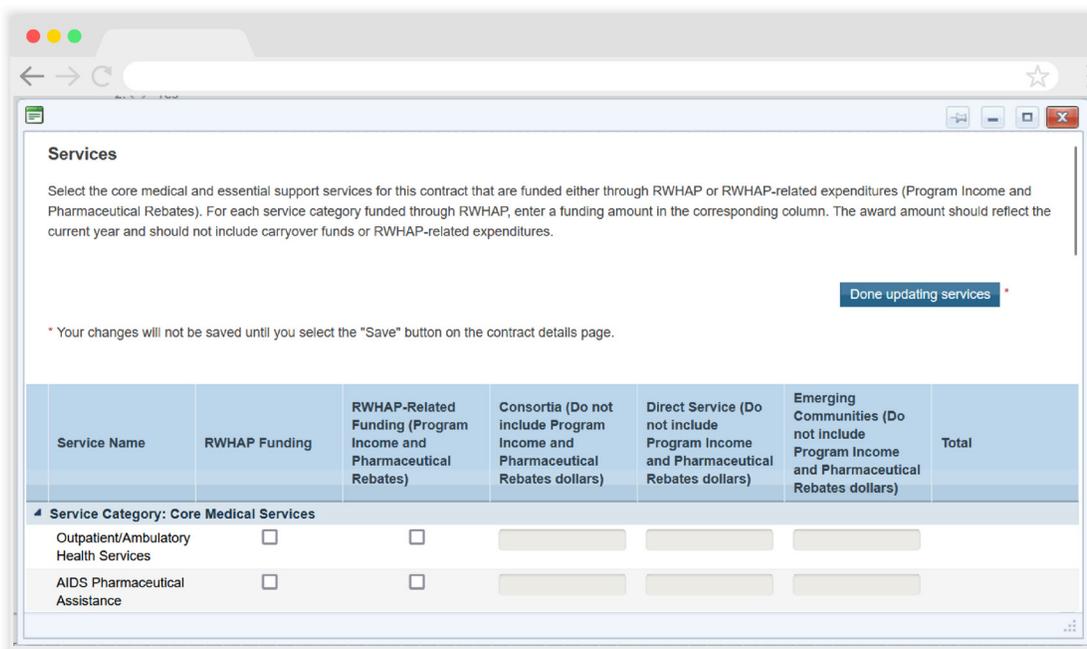
[Update Services]

RWHAP Grant (including RWHAP Parts A, B, B Supplemental, C, and D)

- **RWHAP Funding:** Select the checkbox for any service the provider is funded to provide with your agency's grant funding.

- **RWHAP-Related Funding (Program Income and Pharmaceutical Rebates):** Select the checkbox for any service the provider is funded to provide with your agency's RWHAP-related funding (including RWHAP-related program income and pharmaceutical rebates).

- **Funding Amount:** The number and titles of the columns in which to enter funding amounts varies based on the grant for which you are adding the contract. The funding amount box(es) will unlock for any service selected as being funded with RWHAP funding. Enter the funding amount(s) in the appropriate column(s) for each service funded with RWHAP funding. Do not enter any RWHAP-related funding into the funding amount column(s). The titles of funding amount columns by program part are listed below:

  a. **RWHAP Part A:** Base, MAI Award, and Supplemental
  b. **RWHAP Part B:** Consortia, Direct Service, and Emerging Communities
  c. **RWHAP Part B Supplemental:** Consortia and Direct Service
  d. **RWHAP Part C:** Base Award
  e. **RWHAP Part D:** Base Award

> 🚫 RWHAP Part A recipients shoud combine their formula and supplemental award amounts into the "Base" column. Do not enter any funding amounts in the "Supplemental" column.

Figure 16. GCMS: Screenshot of the RWHAP Part B Update Services Table

EHE Initiative Award

- **EHE Funding:** Select the checkbox for any service the provider is funded to provide with your agency's EHE initiative funding.

- **EHE Carryover Funding:** Select the checkbox for any service the provider is funded to provide with your agency's EHE carryover funding.

- **Base:** Enter the amount of EHE initiative funding given to the provider to support the indicated service category. The box will unlock for any service category selected in the "EHE Funding" column. Please do not enter any RWHAP-related or EHE carryover funding amounts in this column.

- **EHE Carryover Funding Amount:** Enter the amount of EHE carryover funding given to the provider to support the indicated service category. The box will unlock for any service category selected in the "EHE Carryover Funding" column. Only enter EHE carryover funding amounts into this column.

Figure 17. GCMS: Screenshot of the EHE Update Services Table

Copying a Contract

Recipients may copy an existing contract in the GCMS if they need to add a contract for the same provider. Copying a contract allows you to skip the extra step of searching for and adding the specific provider to the contract. You may not change the provider when copying a contract. To copy one of your contracts, follow the steps below:

STEP ONE: Search for the contract you wish to copy using the instructions detailed in the Searching for Contracts section of this manual.

STEP TWO: In the "Action" column on the right side of the search results table, select "Copy Contract" in the dropdown menu (Figure 18). Then select the "Go" button.

Figure 18. GCMS: Screenshot of Search Results Table
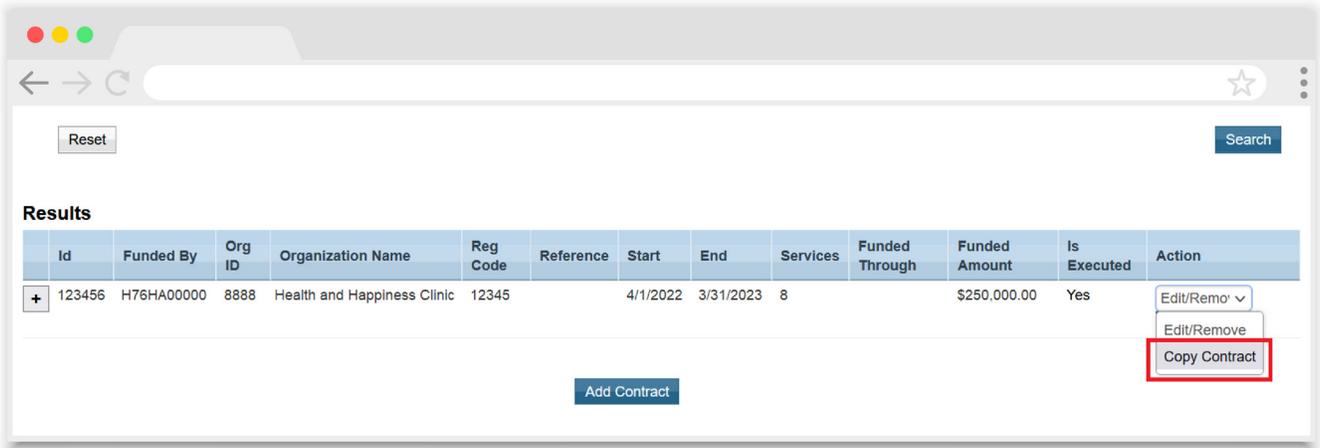
STEP THREE: On the next page (Figure 19), enter the dates of the new contract by typing them into the text boxes or selecting the dates from the calendar.

> **!** If you are copying the contract of a fiscal intermediary, the corresponding subcontracts of all second-level providers will also be copied with the same contract dates.

Figure 19. GCMS: Screenshot of the Specify Contract Dates Page

STEP FOUR: You will then be taken to the Edit Contract Details page. The details from the previously copied contract will be prepopulated into the current contract. Update all contract details for the current contract. See Adding a Contract for further instructions. Once you have updated all fields as necessary, click "Save" at the bottom right of the page.

Editing/Deleting a Contract

The GCMS is open year-round, allowing recipients to edit and/or remove contracts as needed throughout the year. Recipients will typically update their contracts with any changes during submission of the RSR and they should establish policies and procedures for who will be responsible for making any necessary contract updates. As a reminder, historical contract information should not be deleted from the GCMS unless the recipient did not have a contract in place with the provider during the specified period. To edit or remove a previously added contract, use the instructions detailed below:

> **!** The GCMS populates multiple HRSA HAB deliverables. Only delete a contract from the GCMS if you no longer have a contract in place during the specified period.

STEP ONE: Search for the contract you wish to edit or remove using the instructions detailed in the Searching for Contracts section of this manual.

STEP TWO: In the "Action" column on the right side of the search results table, select "Edit/Remove" in the dropdown menu (Figure 20). Then select the "Go" button.

Figure 20. GCMS: Screenshot of the Search Results Table

STEP THREE: You will then be taken to the Edit Contract Details page. If you wish to edit the contract, make any necessary updates using the instructions in Adding a Contract and then click "Save" at the bottom right of the page to save the contract edits. To remove the contract, scroll to bottom of the page (Figure 21). Select the "Delete Contract" button and then confirm you wish to delete the contract.
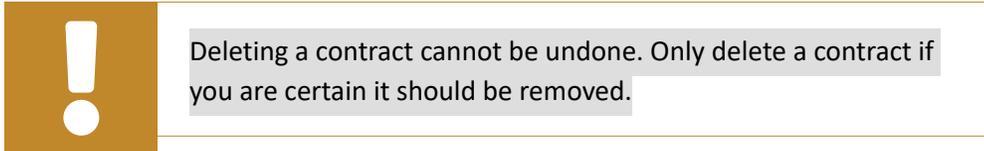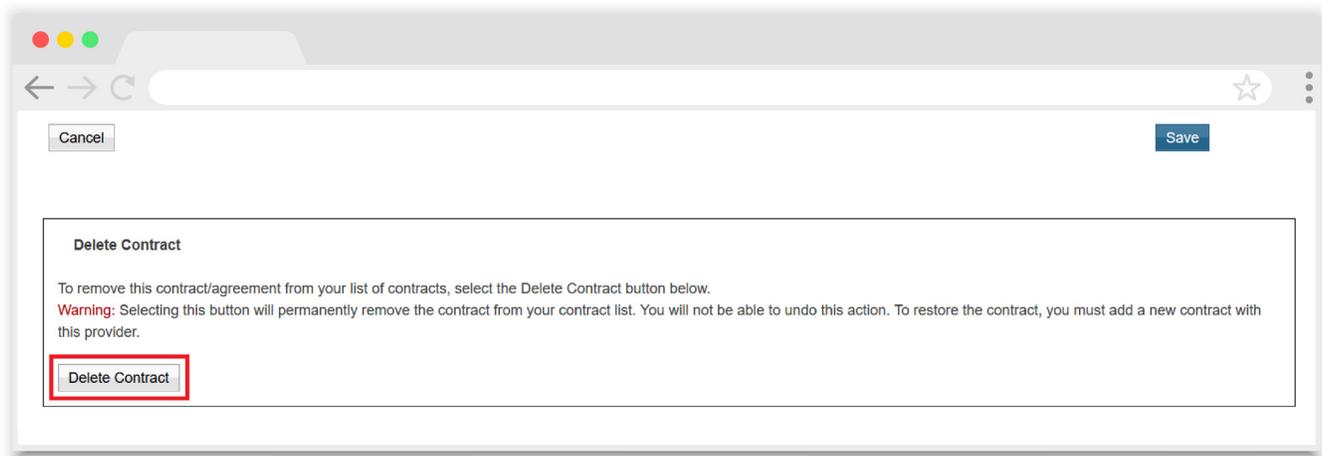
> **!** Deleting a contract cannot be undone. Only delete a contract if you are certain it should be removed.

Figure 21. GCMS: Screenshot of the Delete Contract Box

❓ Frequently Asked Questions

In the services table, our agency selected that we fund a service through RWHAP-related funding (program income or pharmaceutical rebates), but we are unable to enter a funding amount. Where do we enter this amount?

The GCMS does not capture dollar amounts for services funded with program income or pharmaceutical rebates. Recipients must select the checkboxes under the RWHAP-related funding column for all services provided through RWHAP-related funding in question 9, but the funding amounts entered in your contracts must only include RWHAP funding from the specific grant for which you are adding the contract. If a provider is funded solely with RWHAP-related funding, add a contract selecting each RWHAP-related funded service and do not enter any funding amounts.

Do we include Housing Opportunities for Persons with AIDS (HOPWA) funds in the GCMS?

No, HOPWA funds are not reported within the GCMS. Housing services provided using RWHAP funding are captured in the GCMS under the appropriate service category. Non-RWHAP, state, or private funds are not captured in the GCMS.

Where do I list HIV Counseling & Testing (HC&T) funds in the GCMS?

HC&T is not a distinct RWHAP service category, but HC&T could be an activity funded within a RWHAP service category such as Early Intervention Services (EIS) or Outreach Services. Recipients should review the RWHAP service categories in PCN 16-02 to determine what service category HC&T activities should be reported under.

I receive funds directly from HRSA HAB. Why am I not a lead agency?

A recipient cannot serve as a lead agency for its own grant. To be considered a lead agency, you must be managing the funds for a RWHAP recipient and have the authority from that recipient to enter into contracts on its behalf.

My agency directly funds a subrecipient to provide multiple services. Would I select "yes, the provider is a subcontractor or second-level provider" in question 6 of the contract?

An agency that receives funding directly from a recipient to provide direct client services is considered a subrecipient (see Classification of Organizations). Only mark "yes" for question 6 if the provider is funded through a fiscal intermediary.

What is my contract reference, or Q3, in the GCMS?

The contract reference is an optional field where recipients can enter additional information to distinguish contracts.

My fiscal intermediary funds a second-level provider. Where do I list funding amounts in the GCMS?

Funding amounts should be listed in the contract for the agency that is providing the service. Any services provided by the second-level provider should be listed in the second-level provider's contract. Any services provided by the fiscal intermediary should be listed in the fiscal intermediary's contract. For more information on fiscal intermediaries and second-level providers, see Classification of Organizations.

I entered a contract with my own agency. Where do I list my agency's administrative amounts in the GCMS?

Funds for administrative services are not captured in the GCMS. Report funding amounts for administrative services in the PTR/Allocations Report and Expenditures Report. Contact Ryan White Data Support at 1-888-640-9356 or email RyanWhiteDataSupport@wrma.com for further instructions.

I fund an agency on a fee-for-service basis. Do I capture that funding in the GCMS? If so, how?

Yes. Your agency should create a contract with itself in the GCMS and enter the amount(s) set aside for fee-for-service providers into the appropriate service categories. If any fee-for-service providers are required to report client-level data for services provided in the RSR, your agency will need to create contracts with these providers in the GCMS and reallocate the funding to these organizations later in the year.

I have searched my provider's organization name, and it says "duplicate," "inactive," or "do not use." Why?

This message indicates that Ryan White Data Support has conducted a thorough search of the web system and determined that the provider you have located is a duplicate of another in the system. Try broadening your search criteria or contact Ryan White Data Support at 1-888-640-9356 or email RyanWhiteDataSupport@wrma.com for help locating the agency's correct registration code.

Our agency reallocated the funding of some providers. Should we update the GCMS?

Yes. The GCMS is accessible year-round for agencies to adjust funding amounts or enter new contracts.

Will changing the contract amount in GCMS affect my previous submissions?

No. If a report has already been started or submitted, any GCMS updates must be synchronized to show in that report. Any reports started after making changes to the GCMS will reflect the contract updates.

I accidentally deleted a contract. Can I restore the contract?

No. Once a contract has been deleted from the GCMS, it is permanently erased. To restore the contract, you must re-enter it.

My agency funds all client services using rebate dollars. Where are these dollars captured in the GCMS?

The GCMS does not capture dollar amounts for services funded with RWHAP-related funding (program income or pharmaceutical rebates). However, services funded through RWHAP-related funding are required to be reported in question 9 of a contract. Select the checkboxes under the RWHAP-related funding column for all services provided through RWHAP-related expenditures in question 9, but do not include any RWHAP-related funding amounts.

Why are the amounts I entered into the GCMS not equal to my entire award amount?

Funding amounts for administrative and technical services are not captured in the GCMS. The total amount entered in the GCMS will reflect only core medical and support services.

Appendix A. Administrative and Technical Services Definitions

Administrative or Technical Support: The provision of quality and responsive support services to an organization. These may include human resources, financial management, and administrative services (e.g., property management, warehousing, printing/publications, libraries, claims, medical supplies, and conference/training facilities).

Capacity Development: Services to develop a set of core competencies that in turn help organizations foster effective HIV health care services, including the quality, quantity, and cost-effectiveness of such services. These competencies also sustain the infrastructure and resource base necessary to develop and support these services. Core competencies include management of program finances; effective HIV service delivery, including quality assurance, personnel management, and board development; resource development, including preparation of grant applications to obtain resources and purchase supplies/equipment; service evaluation; and development of cultural competency.

Fiscal Intermediary Support: The provision of administrative services to the recipient of record by a pass-through organization. The responsibilities of these organizations may include determining the eligibility of providers, deciding how funds are allocated to providers, awarding funds to providers, monitoring providers for compliance with RWHAP-specific requirements, and completing required reports.

Other Fiscal Services: The receipt or collection of reimbursements on behalf of health care professionals for services rendered or other related fiduciary services pursuant to health care professional contracts.

Planning or Evaluation: The systematic (orderly) collection of information about the characteristics, activities, and outcomes of services or programs to assess the extent to which objectives have been achieved, identify needed improvements, and/or make decisions about future programming.

Quality Management: The coordination of activities aimed at improving patient care, health outcomes, and patient satisfaction. To be effective, a CQM program requires:

- Specific aims based in health outcomes
- Support by identified leadership
- Accountability for CQM activities
- Dedicated resources
- Use of data and measurable outcomes to determine progress and make improvements to achieve the aims cited above

Please see PCN #15-02 for further information.

Technical Assistance: Identifying the need for and delivery of practical program and technical support to the RWHAP community. These services should help recipients, planning bodies, and communities affected by HIV and AIDS to design, implement, and evaluate RWHAP-supported planning and primary care service-delivery systems.

Glossary

Administrative Agent: An entity that functions to assist the grant recipient, consortium, or other planning body in carrying out administrative activities (e.g., disbursing program funds, developing reimbursement and accounting systems, developing funding announcements, monitoring contracts).

Consortium: A group of providers, consumers, and others who perform a planning and advisory function to regions or the entire state in determining needs and planning for the delivery of essential health and support services for people with HIV.

Contract: An agreement between two or more parties, especially one that is written and enforceable by law.[1] For the purposes of the RSR, contracts include formal contracts, memoranda of understanding, or other agreements.

Core Medical Services: A set of essential, direct health care services provided to people with HIV and specified in the Ryan White HIV/AIDS Treatment Extension Act.

Ending the HIV Epidemic (EHE) Initiative: The EHE initiative intends to reduce the number of new HIV infections in the United States by at least 90 percent by 2030. The initiative focuses on four strategies—diagnose, treat, prevent, and respond—that together can end the HIV epidemic in the U.S. To accomplish these goals, HRSA awarded funding to RWHAP EHE recipients to link people with HIV to critical care and treatment services as well as provide workforce training, technical assistance, and systems coordination. This initiative is focused on 48 counties; Washington, D.C.; and San Juan, Puerto Rico, where more than 50 percent of HIV diagnoses occur and on seven states with substantial rural burden of HIV.

Fee-for-service: The method of billing for health services whereby a physician or other health service provider charges the payer (whether it be the patient or his or her health insurance plan) separately for each patient encounter or service rendered.

Fiscal Intermediary: An administrative agent that acts on behalf of the recipient to monitor the use of its RWHAP funds.

GCMS: The Grantee Contract Management System. An electronic data system that RWHAP recipients use to manage their subrecipient contracts.

HOPWA: Housing opportunities for persons with AIDS. A program administered by the U.S. Department of Housing and Urban Development (HUD) that provides funding to support housing for people with HIV and their families.

Lead Agency: An organization that provides fiscal and administrative management, monitoring, and oversight to HIV disease providers of direct RWHAP services on behalf of a RWHAP recipient or consortia with which it has contracted.

Provider: An agency that provides direct services to clients (and their families) or the recipient. A provider may receive funds as a recipient (such as under RWHAP Parts C and D) or through a contractual relationship with a recipient funded directly by RWHAP. See also subrecipient.

Recipient: An organization receiving financial assistance directly from an HHS-awarding agency to carry out a project or program. A recipient also may be a recipient-provider if it provides direct services in addition to administering its grant.

Recipient-provider: An organization that receives RWHAP funds directly from HRSA HAB and provides direct client services.

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1 Contract. (n.d.). *The American Heritage® Dictionary of the English Language*, Fourth Edition. Accessed November 28, 2018, at Dictionary. com: https://dictionary.reference.com/browse/contract.

RWHAP Part A: The part of RWHAP that provides direct financial assistance to designated EMAs/TGAs who have been the most severely affected by the HIV epidemic. The purpose of these funds is to deliver or enhance HIV-related core medical and support services to people with HIV.

RWHAP Part B: The part of RWHAP that authorizes the distribution of federal funds to states and territories to improve the quality, availability, and delivery of core medical and support services for people with HIV. RWHAP emphasizes that such care and support is part of a coordinated continuum of care designed to improve medical outcomes.

RWHAP Part C: The part of RWHAP that provides funding to local community-based organizations to support outpatient/ambulatory health services and support services for people with HIV through Early Intervention Services program grants.

RWHAP Part D: The part of RWHAP that supports coordinated family-centered outpatient care for women, infants, children, and youth with HIV.

Second-level Provider: An organization that receives RWHAP funds from a recipient through a fiscal intermediary service provider.

Subrecipient: The legal entity that receives funds from a recipient and is accountable to the recipient for the use of the funds provided. Subrecipients may provide direct client services or administrative services directly to a recipient.

Support Services: A set of services needed to achieve medical outcomes that affect the HIV-related clinical status of a person with HIV.

Synchronization: The process of incorporating changes made in the GCMS into the corresponding report.