Completing the RWHAP Part B and Part B Supplemental Program Terms Report (PTR)

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Thank you everyone for joining today. Here is the outline for today's presentation. We'll start off with a little background information. After that, we'll go through the step-by-step instructions on how to access the report. We'll briefly go over the Grantee Contract Management System (or GCMS) and then review how to complete the various sections of the PTR. Finally, we'll close out the presentation by looking at some additional Technical Assistance resources and wrap up by answering any questions you might have.



It is important that I take a moment to point out that while we are presenting both the Part B and Part B Supplemental reports in one webinar, they each have their own manuals.

The 2024 Part B PTR manual is available now on the TargetHIV website. It will review all instructions for the PTR that I will be going over today as well as a change to the 2024 report that I will also highlight.

The Part B Supplemental PTR manual will be available this summer on the TargetHIV website. Please note there are no changes to the Part B Supplemental PTR for 2024.

You can access the manuals by clicking on the text below the images. These manuals are essential resources for you to use while completing the PTR. I strongly encourage you to take the time to download and review them while working on your report(s).



Let's get started with some background information.



All Part B and Part B Supplemental recipients are required to complete a PTR each year. The PTR is where RWHAP Part B recipients report on the allocations of their grant funding for the budget year. Much like many of the other reports you submit for your Part B award, you can access it through the HRSA Electronic Handbooks, also known as the EHBs.

Please note that the Part B PTR must be submitted within 90 days of the release of the final Notice of Award, or NoA.

Reporting for the 2024 Part B Supplemental (X08) PTR will open in the EHBs later this year.



Here is a quick overview of the PTR submission process. A recipient must complete a PTR for their Part B Base (X07) and Part B Supplemental (X08) award. Furthermore, recipients must complete a separate PTR for each grant you receive. These reports serve as a reference for how recipients will allocate their grant funding.

You'll start by accessing the PTR in the EHBs. Next, you will need to complete your contracts in the GCMS. After that, you will start and complete the PTR, and, finally, you will validate and submit the PTR to your project officer for review.

We're going to review all these steps more in-depth on the upcoming slides.

I want to make note that the instructions I'm presenting today are applicable for both the Part B and Part B Supplemental PTR. I'll point out differences between the two reports as we work through the presentation.



Let's go over how to access the PTR in the EHBs.



The PTR is accessed and submitted in the EHBs. When accessing the EHBs, you will need to make sure you have a Login.gov account set up. After logging in with your Login.gov credentials, it will redirect you to your EHBs home page.

Next, you will want to make sure your EHBs account is ready to go with all the necessary permissions for your agency's Part B and/or Part B Supplemental awards to be able to access and complete the PTR. This is more so applicable for new users.

If you need any assistance with logging into the EHBs or have permission issues, your best resource is the EHBs Customer Support Center. Their contact information will be listed at the end of the presentation for you to reference.

Once you are all set, you will be ready to access the PTR.

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	Work on Progress Report	Request New Prior Approval ①	Work on a Grant in My Portfolio ①	Authorize New Users	
7	Work on Noncompeting Progress Reports	Request New Health Center H80 CIS 0	View My Access Requests	Approve Access Requests	
All	Work on Other Submissions ()	Manage HCCN PHCs			
2 Late A	Scope	Applications			
Late	Manage Sites	Validate Grants.gov Applications 0			
1 Due With	Manage Services	Allow Others to Work on My Applications ①			
	Manage Other Activities and Locations	View My Applications 🖸			
					9

After logging into the EHBs, you will see several tabs at the top of the screen, one of which is the 'Grants' tab. Start by hovering your mouse over the Grants tab.

	W	ork	on Othe	er Submiss	ions	
Contractions Tasks Organizations	Handbooks	FQHC-LALs	E ▼ Search			① ? Logout
Welcome My Tasks 7 All 2 Late A 1 Due Wit	Submissions Work on Financial Repor Work on Progress Repor Work on Performance R Work on Noncompeting Work on Other Submissi Scope Manage Sites Manage Sites Manage Other Activities	t O t O eport O Progress Reports ons O	Requests Work on existing Prior Approval © Request New Prior Approval © Work on Existing Health Center H80 Cl Manage HCCN PHCs Applications Validate Grants gov Applications © Search Funding Opportunities ©	Portfolio Add a Grant to My Portfolio O Work on a Grant in My Portfolio O View My Access Requests Is O	Users View Authorized Users Authorize New Users Approve Access Requests	
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From here, a drop-down menu will appear, and you will click on Work On Other Submissions under the Submissions header.

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	FY 2024 Program Terms Report	Other Submissions	State Health Department	X07HA00000		04/01/2024 - 03/31/2025	06/30/2024		Not Started	💽 Start 🔻
						04/01/2023 -		10.000	Outpatient	

After clicking on the Work on Other Submissions link, you will be navigated to the Submissions-All page, where a list of submissions for your organization will appear under the Submission Name column. You may have to scroll down a bit to locate your 2024 PTR within the submissions list which should be close to the top of the list of PTR submissions.

Under the "Options" column, select "Start" or "Edit." The first time the report is accessed the link will read "Start," but once the report has been started, the link will instead read "Edit."

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Search Contracts											,
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Once you click on either the start or edit link, you will be taken to the PTR inbox. I'd like to point out a couple of important links on this page.

The first important link is under the Action column. You can access the PTR itself by selecting the envelope icon. When you are first starting the report, the icon will read "Create". After it has been started, it will read "Open".

Before we enter the report, we are going to access the GCMS from within the report inbox. Under the Manage Contracts heading, you can access the GCMS, by selecting the "Search Contracts" link in the Navigation panel on the left side of the screen.



Before we dive into the steps for completing the PTR, I would like to briefly discuss the GCMS.



The GCMS is a data storage system for RWHAP contract information that only recipients have access to. Its purpose is to decrease the data entry burden on recipients as the information entered there is used for multiple reports. Your contract information, for instance, is also used for the RWHAP Services Report (or RSR) thereby eliminating the need to re-enter all your contract information for that report.

Recipients enter their contracts into the GCMS, with a separate contract for each subrecipient funded to provide services. Then, the PTR automatically looks in the GCMS for any contracts that overlap the report's budget period and pulls the contracts into the report. In other words, any of your contracts that touch the report period, will be pulled into the report – in this case, the PTR.



Typically, recipients will add their contracts to the GCMS during the completion of the PTR.

For the PTR, you'll need to make sure that you have a contract for each organization that is funded to provide services with your award. This includes your own organization if your agency provides services.

Your agency's contracts in the GCMS should align with the dates of your budget period, so for Part B that would be from April to March. You should not have a contract that exceeds 12 months.

Also, prior years' contracts need to be preserved. Each provider must have a separate contract for each year they are funded. We have seen numerous recipients do this incorrectly.

While you are encouraged to use the 'copy contract' feature in the system, you cannot simply copy the prior years' contracts and only update the dates. It's important you review and update all information accordingly.

Additional GCMS Resources



 For additional assistance entering contracts into the GCMS, please see the <u>GCMS</u> <u>Manual</u> and the <u>Completing the</u> <u>GCMS webinar</u> available on the TargetHIV website

We have some additional materials available that walk you through the whole process including the GCMS Manual and the Completing the GCMS webinar. These resources are available on the TargetHIV website and provide a step-by-step process of accessing, adding, editing, and deleting contracts in the GCMS.

Please reach out to us at RWHAP Data Support if you need a provider added to the system or if you have any changes that need to be made to an organization, such as a name change. This will help prevent duplicate providers within the EHBs.



Let's dive into the process for completing the PTR.



I'd like to take a moment to highlight one of the most important parts of the EHBs the Navigation panel. The Navigation panel is always displayed on the left side of the screen. It will help you navigate through the PTR report and complete all report actions.

Up at the top you can use the link here to get back to the PTR inbox at any time.

As previously discussed, you can access the GCMS by selecting Search Contracts under the Manage Contracts heading.

The Navigation heading is where you'll find links for each section of the PTR.

Also, under the References heading, you can find the links for both the Validation Rules document and the Part B and Part B Supplemental PTR Instructions.

In the Actions section, you'll find the links for both validating and submitting the PTR.

Finally, down towards the bottom, we have options for printing and exporting both the CLC Report and the Allocations Report which you'll need for the separate Program

Submission.

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PTR/Allocations Report Inbox	1		Program Terms Report	State Health Department	X07HA00000	04/01/2024 - 03/31/2025		Not Started	Create	Comment	Ö History
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Back in the PTR inbox, we'll now open the report by selecting the envelope icon under the "Action" column. This is a repeat of a step that I showed you earlier when we were discussing how to access the PTR.

	Recipient Information
NAVIGATION «	Program Terms Report Your session will expire in: 28:20
CSearch	▶X07HA00000 : State Health Department
Inbox 🔺	Recipient Information
PTR/Allocations Report Inbox	The data shown below are pre-populated from the HRSA Electronic Handbooks (EHBs). Please verify that the information shown below is accurate. A field with an asterisk * before it is a required field. NOTE: Updating the information on this page does not update your information in the EHBs. You must revise your agency's
Manage Contracts	information in the EHBs as well.
Search Contracts	1. Official Mailing Address:
Recipient Information	* a. Street:
 File Upload CLC Report Allocations Report 	* b. City:
References *	* c. State:
Validation Rules Guidance Actions	* d. Zip Code:

After clicking on the envelope icon, you will be navigated to the first section of the report, which is Recipient Information. The information in the Official Mailing Address section prepopulates from information listed in the HRSA EHBs, so please make sure to review it for accuracy and make any changes if necessary.

F	Recipient Information (cont.)	
Validate	2. Organization Identification:	
Comments	a. EIN:	
Add Comments	b. UEI:	
Reports A Print/Export Report Action History	3. Contact information of person responsible for this submission: a. Name:	
Search Reports	b. Title:	
	¢ c. Phone:	
	d. Fax:	
	e, E-mail:	
	Cancel	Save
		21

Further down the page, you will see the Organization Identification section. Specifically, there are fields displaying the recipient's EIN and the Unique Entity Identifier, also known as the UEI number. This information is also prepopulated.

On this page you will also see the contact information for the person responsible for the submission. This information is important as we'll need to know who to reach out to in case there are any questions on your report. Please review the information to ensure its accuracy and update any information if needed.

Finally, please make sure to save your entries in this section by selecting the "Save" button on the bottom right of the screen.

Now let's move on to the next section, which is the File Upload.

- 10	le Upload						
Do	ocument Name	Description		Size	Part	Budget Year	Action
FY	/ 2024 RWHAP Part B Program Terms Report Instructions Final.	Report Instructions Final.docx FY 2024 RWHAP Part B Program Terms Report Instructions Final			Part B	4/1/2024 - 3/31/2025	View
FY	2024 RWHAP Part B Standard Outcomes Measures Final.docx	FY 2024 RWHAP Part B Standard Outcom	FY 2024 RWHAP Part B Standard Outcomes Measures Final			4/1/2024 - 3/31/2025	View
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The File Upload section shown on the screen is for a Part B X07 report. However, the Part B Supplemental X08 File Upload section functions the same way.

You will notice there are two different parts to this section. In the first table, File Upload , there are links to a few different helpful documents for your PTR submission. You can review these documents by selecting "View" under the Action column on the right.

The second part of the page, Submission Components, is for uploading required documents. Here, you can upload two types of documents: Primary Documents and Supplemental Documents.

Under Primary Documents, you can access document templates required for your submission. For each one here, you can select the "Download Template" link to get a template of the required document. You will need to save the document somewhere on your computer where you can easily access and complete it. Once you are ready to upload it, you can select the **** "Upload" link on the right under the Action column.

To upload additional documents that don't require a template, you can look under Supplemental Documents and elect the "Upload Supplemental Document" button listed at the bottom of the page.

Next, I'd like to go over the list of required documents for Part B and Part B Supplemental grants.



Here is a list of the required document uploads for each report. For the Part B PTR, there is the SF-424A, Budget Narrative Spreadsheet, Implementation Plan, Contract Review Certification or CRC, and the Early Identification of Individuals with HIV/AIDS, or EIIHA Plan. The EIIHA Plan does not have a template and will need to be uploaded as a separate document.

The Part B Supplemental PTR will require that you upload all of these same documents except for the EIIHA Plan.

If you have any questions about the required documents for your PTR submission, please contact your project officer.

				CLC	Rep	ort					-
NAVIGATION <	Program	m Terms I HA00000 :	Report State Health D	epartment					Your	session will ex	(pire in: 29:55
Inbox PTR/Allocations Report Inbox Manage Contracts	Cons Review Contract	the list of you	d List of Co or organization's co the left menu.	ntractors ntracts for the fiscal year. If a	i contract is mis	sing, look for	the missing c	ontract by se	ecting the "Search Cor	ntracts" link unde	r the Manage
Search Contracts Navigation	+	arning Id	Funded B 3456 X07HA000	y Organization 00 State Health Dept.	Reference	Start 4/1/2024	End 3/31/2025	Services 2	Funded Through	Is Executed Yes	Amount \$100.00
Recipient Information File Upload CLC Report Allocations Report References	For help HRSA E For que	o with EHBs c Electronic Han stions regardi	contact the HRSA H dbooks Contact C ing data content an	elp Desk by phone at 1-877 enter help request form to su d/or reporting requirements,	-Go4-HRSA (1-& Ibmit your quest please contact	77-464-4772 on online. Data Suppor	2) Monday thro t at 1-888-640	ough Friday, i -9356 or ema	8:00 a.m. to 8:00 p.m. l ill to RyanWhiteDataS	Eastern Time. Or upport@wrma.c	use the om.
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The next section for the PTR that we will discuss is the CLC or Consolidated List of Contractors Report. This is a list of all organizations that are funded to provide services with your agency's RWHAP Part B grant. The CLC Report pulls information directly from the GCMS. It will pull in every contract that overlaps with the budget period and list it here. In this example, the recipient has only one provider listed.

Review the CLC Report for accuracy and completeness by double checking the contract dates, funding amounts, and funded services. You can select the expansion button to view the services for each provider. All agencies funded to provide services with your Part B award (including your own organization if it provides services) should have a contract in the GCMS and should be listed in the CLC Report. The contract dates should align with your budget year to prevent future reporting issues.

Again, if you need any assistance with updating your contracts in the GCMS, we recommend reviewing the GCMS instruction manual and/or reaching out to RWHAP Data Support for further assistance.

Synchronize All

NAVIGATION «	Program Terms Report		Your session will expire in: 29:50
Inbox PTR/Allocations Report Inbox Manage Contracts Search Contracts	Warning: The program information displayed below does in blue font below or select the icon in the "Warning information across all providers, click the "Synch Health and Hoppinese Clinic (Added) Synchronize All	not match the program information in the Grantee Contract Mar g" column below to review the updates for each provider and, if rronize All" button. Please note that the synchronization process	nagement system (GCMS). Click the provider name listed in correct, synchronize the information. To synchronize program s updates data for both the CLC Report and Allocation Report.
Recipient Information	▼ X07HA00000 : State Health Departm	ient	
File Upload CLC Report Allocations Report	Report ID: 123456 Budget Year: 4/1/2024 - 3/31/2025 Access Mode: ReadWrite	Status: Working Last Modified Date: 5/24/2024 2:32:20 PM UEI: AB1C23DEF4G	Due Date: 6/30/2024 11:59:58 PM Last Modified By: user@statehealth.gov
Validation Rules Guidance Actions	Consolidated List of Contract Review the list of your organization's contracts for Manage Contracts heading in the left menu.	ctors or the fiscal year. If a contract is missing, look for the missing co	ontract by selecting the "Search Contracts" link under the
			25

If you add or edit any contracts to the GCMS after you have already started the PTR, you will need to synchronize these changes with your report. You will know the report needs to be synchronized by the yellow warning banner at the top of the page. The message in this banner lets you know that changes were made to the GCMS that need to be synchronized with your report. If you skip this step, your contract updates will not be reflected in your report, so please make sure to synchronize before you submit your report.

As shown on the screen, a contract was modified to add an additional service. To synchronize the changes, we'll select the "Synchronize All" button in the yellow banner.

rogram Terms	Report				Your session will expire in: 29:
- X07HA0000	0 : State Health Department				
Report ID: 12345	6	Status: Working		Due Date: 6/30/2024 11	59:58 PM
Budget Year: 4/1/	2024 - 3/31/2025	Last Modified D	ate: 5/24/2024 3:40:47 PM	Last Modified By: user	Østatehealth.gov
Access Mode: Re	adWrite	UEI: AB1CDE23	GH4		
Start Date: End Date:	Santico Namo	4/1/2024 3/31/2025	Funding Type		
Change	Service Name		Funding Type		
Added	Administrative or technical support		RWHAP		
Unchanged	Outpatient/Ambulatory Health Services		RWHAP		
Unchanged	Home Health Care		DIAMAP		
Unchanged	Medical Case Management including Tre	atment Adherence Services	RWHAP		
Unchanged	Child Care Services		RWHAP		
Unchanged	Medical Transportation		RWHAP		
Unchanged	Outreach Services		RWHAP		
Unchanged	Other Professional Services		RWHAP		

After clicking on "Synchronize All", you will be taken to the synchronize contracts page, where you can review the changes to make sure that they are accurate. We see here a contract was modified in the GCMS to include a new RWHAP funded service. Since the update looks correct, I'll go ahead and click the "Synchronize" button to finish adding those changes to the report.

Please remember if you make changes in the GCMS after you have started your PTR, you'll need to synchronize the changes in the CLC Report section.

RWHAP Part B A	llocations Report	-
Allocations Report All fields are required. Public Burden Statement: OMB Control Numb Budget Year 04/01/2024 - 03/31/2025 Award	er (0915-0318) Valid Until 04/30/2026	
Budget Year Award Information	Award Amount	
1. RWHAP Part B Base Award		
2. RWHAP Part B ADAP Earmark Award		
3. RWHAP Part B ADAP Supplemental Award		
4. Total RWHAP Part B ADAP Earmark + ADAP Supplemental Funds		
5. RWHAP Part B Emerging Communities Award		
6. Total RWHAP Part B Funds		
7. RWHAP Part B MAI Funds		
8. Total RWHAP Part B + MAI Funds		
		27

Let's move on to the last section of the PTR, which is the Allocations Report. The sections displayed here are for the Part B X07 PTR. I will go over the Part B X07 report first and then we will review the Allocations Report for the Part B Supplemental X08 report.

You can navigate to the Allocations Report section by selecting "Allocations Report" in the Navigation panel. The first section of the report is displayed – the Budget Year Award Information.

Beginning with the Award Information, this table is for your total award amounts. In each box here, you'll enter the specified total award amount, which includes your Part B base award, ADAP Earmark Award, the ADAP Supplemental Award, the EC Award and the Minority AIDS Initiative (MAI) Funding Amount.

Please note that every modifiable field in the Award Amount column requires a response and only whole number values are allowed. If you don't receive an award type or don't have any allocations to report for a specific category, enter a "0."

You'll notice that rows 4, 6, and 8 do not require a response. These cells will

automatically calculate and populate figures once you have entered and saved the values for each of these fields.

I would like to note that you should not be reporting values for carryover funding in this report or in the GCMS.

		С	ompone	ent				
Current FY RWHAP Part B Allocation	ns by Program Compo	nent						
	1. Base Awa	ard	2. ADAP Earmark Supplemental A	+ ADAP Award	3. Emerging Commu Award	inities (EC)	4. To	tal
	Amount	Percent	Amount	Percent	Amount	Percent	Amount	Percent
1. Part B AIDS Drug Assistance Program Subtotal								
a. ADAP Services								
b. Health Insurance to Provide Medications								
c. ADAP Access/Adherence /Monitoring Services								
2. Part B Health Insurance Premium & Cost Sharing Assistance for Low Income Individuals								
3. Part B Home and Community- based Health Services								

The next section of the Allocations Report is the Allocations by Program Component section. All of the sections I'm going to go through will be on the same page in the EHBs. For the purpose of legibility, we are breaking the sections up over the next few slides. We're going to start with the top part of the table which are questions 1-3.

There are three award columns here: Base Award, ADAP Earmark + ADAP Supplemental Award, and EC Award. In each of the modifiable column fields, you'll enter the allocation amounts that corresponds with each service listed on the left.

The first three rows all pertain to ADAP: 1a. ADAP Services, : 1b. Health Insurance to Provide Medications : and 1c. ADAP Access/Adherence/Monitoring Services. You will need to complete these rows for each of the three corresponding columns.

In short, if you see a box within the cell, it means that you need to enter a value in that cell. If the cell does not contain a box, the value will be calculated and populate once you save the information on the screen.



Again, this is a continuation of the same table on the previous slide, but we are continuing with rows 4-10 in the Part B Allocations by Program Component section.

Row 4a is for the total amount of your agency's EC award that is allocated for directly funding HIV care consortia. Row 4b - 4d you will enter the base award amount and EC award amount that is allocated for HIV care consortia for the following categories: administration, planning and evaluation, and clinical quality management.

Row 7. is for Part B clinical quality management, and Row 8. is for recipient planning and evaluation activities.

Finally, Row 9 is for recipient administration.

The subtotals for Row 10 will be calculated and will populate once you save the information on the page. Likewise, column amounts and percentages will also calculate and populate once you save the information you have entered.

		Se	rvice	es, a	and I	EC		
Current FY RWHAP Breakdown 1	or Consorti	a, State Dir	ect Services a	nd Emerging	J Communities	Section		
Services	1. Consortia 2. Direct Services 3. Emerging Communities 4. Total							
	Amount	Percent	Amount	Percent	Amount	Percent	Amount	Percent
Core Medical Services						a.		
a. AIDS Drug Assistance Program Treatments	\$0	0.00 %					\$0	0.00 %
b. AIDS Pharmaceutical Assistance	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
c. Early Intervention Services (EIS)	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
d. Health Insurance Premium and Cost Sharing Assistance for Low- Income Individuals	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
e. Home and Community-Based Health Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
f. Home Health Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
g. Hospice Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
h. Medical Case Management, including Treatment Adherence Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
i. Medical Nutrition Therapy	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
j. Mental Health Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
k. Oral Health Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
I. Outpatient/Ambulatory Health Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 % š
m. Substance Abuse Outpatient Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
1. Core Medical Services Allocation Subtotal	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %

The next section of the Allocations Report, contains the Breakdown for Consortia, State Direct Services, and EC.

All core medical services information for this table are going to populate from the GCMS. If you see a value that is incorrect, you will need to make changes to the corresponding contract (or contracts) in the GCMS and synchronize your changes afterwards.

You will notice for Row A for ADAP Treatments, the cells are blacked out for Direct Services and Emerging Communities. Funding allocated to ADAP Treatments from these sources should be entered in the current fiscal year RWHAP Part B Allocations by Program Component table of the Allocations Report. This is also the same for your Part B Supplemental PTR.

Sunn	ort	S۵	rvic	ρç	Rre:	akdu	ראיר)
		50		0.5	DICO			
a. Child Care Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
b. Emergency Financial Assistance	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
c. Food Bank/Home Delivered Meals	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
d. Health Education/Risk Reduction	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
e. Housing	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
f. Linguistic Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
g. Medical Transportation	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
h. Non-Medical Case Managemen Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
i. Other Professional Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
j. Outreach Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
k. Psychosocial Support Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
I. Referral for Health Care and Support Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
m. Rehabilitation Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
n. Respite Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
o. Substance Abuse Services (residential)	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
2. Support Services Allocation Subtotal	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
3. Services Allocation Total	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %

Continuing with the Breakdown for Consortia, State Direct Services and EC section, below the Core Medical section you will see the Support Services information displayed.

Like the core medical services on the previous screen, the support service information for this table will also populate from the GCMS. As I stated before, if a value here is incorrect, please make the necessary changes to the corresponding contract(s) in the GCMS and synchronize the changes to your PTR report.



Next, we will cover the MAI Allocations by Program Component section of the Allocations Report. This is specifically for your MAI Award funding.

Just to clarify, MAI Award funding is not entered in the contracts in the GCMS. Therefore, you will need to enter the funding amounts into the table for questions 1-5. The table collects funding amounts for MAI education, outreach, clinical quality management, planning and evaluation, and administration.

Row 6, Total MAI Allocations, will automatically populate once you save the information on the page.

Directly below the MAI Allocations by Program Component table, you will see a checkbox that you should select if your agency received a waiver for the 75 percent core medical services requirement. You'll receive a validation message on your report if you do not select the waiver checkbox and have not met the 75 percent core medical services requirement based on the allocations you entered.

If you are unsure if your organization received a waiver, please contact your project officer for further assistance.

Please be sure to save your report once you have completed all the required components of the Part B Allocations Report.

Ecolorative re	quirements	
Legislative Requirements Checklist		
Core Medical Services Allocations	Amount	Percent (Amount/Total Service Allocations)
ADAP	\$100,000	38.46 %
State-Direct Services: Core Medical Services	\$100,000	38.46 %
Emerging Communities: Core Medical Services	\$0	0.00 %
Total Core Medical Service Allocations	\$200,000	76.92 %
Support Services Allocations	Amount	Percent
Consortia Services	\$0	0.00 %
Consortia EC Services	\$0	0.00 %
State-Direct Services: Support Services	\$60,000	23.08 %
Emerging Communities: Support Services	\$0	0.00 %
MAI Allocations for Education + Outreach Services	\$0	0.00 %
Total Support Services Allocations	\$60,000	23.08 %
Total Services Allocations	\$260,000	100.00 %

The Legislative Requirements Checklist is the last section of the Allocations Report. The percentages in the table are populated from the prior tables.

The total amounts and percentages for your Core Medical Services Allocations and the Support Services Allocations are displayed on the screen.

Make sure you review the information on this page to ensure the data look correct. On this screen, you can check to make sure that your agency is compliant with the 75 percent core medical services requirement (unless you have received a waiver as we previously discussed). You can see in this example that this agency has met the 75 percent core medical requirement as they have spent more than 75 percent of their Part B allocation on core medical services.

CLINICAL QUALITY MANAGEMENT	Allocations	Amount		
Total Clinical Quality Management Allocations must be 5% of the total X07 award or \$3 million (whichever is smaller.)	Capped Amount	\$15,000		
to Clinical Quality Management as well as the amount of Current Fiscal Year dollars allocated (CQM Allocations) on Clinical Quality Management. Please check to make sure the Allocations do not exceed the Capped Amount.	CQM Allocations	\$10,000		
PLANNING AND EVALAUTION / RECIPIENT ADMINISTRATION		Allocations	Amount	Percent
Total Part B X07 Planning and Evaluation Allocations and total Recipier Allocations must each be 10% or less than the total X07 award. Plannir Recipient Administration do not necessarily need to be 10% of each fur	nt Administration ng and Evaluation and nding stream as long as	Planning & Evaluation	\$10,000	3.33 %
the combined total of each is 10% or less of the total X07 award. In add Evaluation and Recipient Administration Allocations combined must not X07 award.	lition, Planning and exceed 15% of the total	Recipient Administration	\$20,000	6.67 %
To the right, is the percentage of Planning and Evaluation Allocations di award and Recipient Administration Allocation divided by the Total X07 make sure these percentages are not greater than 10%. Also, shown is combined Planning and Evaluation and Recipient Administration Alloca X07 Award.	vided by the Total X07 award. Please check to the percentage of the tions divided by the Total	Planning & Evaluation + Recipient Administration	\$30,000	10.00 %

The next few sections of the checklist display the Clinical Quality Management and the and Planning and Evaluation/Recipient Administration requirements. The fields here will automatically calculate once you have clicked on "Save" at the bottom of the page. Once updated, please review the clinical quality management calculations to ensure it does not exceed the capped amount listed in the first row of the table. Also, please ensure the allocations listed in the Planning and Evaluation/Recipient Administration section are ten percent or less than the total award amount.

For example, the table shows the recipient met all legislative requirements.

RWHAP Part B S	Uppleme Allocations Report Allofas are required. Public Burden Statement: ONG Control Num	ental	AII	OCã	ati	on	s R	ерс	ort	
Recipient Information File Upload	Budget Year 09/30/2024 - 09/29/2025 Award	Information			1					
CLC Report	Planned Funding by Program Component				J					
References Validation Rules		Total RWHAP Part B Sup Program Award	olemental							
Guidance Actions	4 DANAD Dark B Suspiremental AIDS Dove	Amount	Percent							
Validate	Assistance Program Subtotal a. ADAP Services		1							
Comments *	b. Health Insurance to Provide Medications]							
Add Comments View Comments	c. ADAP Access/Adherence/Monitoring Services]							
Print/Export Allocation Report	2. RWHAP Part B Supplemental Health Insurance Premium & Cost Sharing Assistance for Low Income Individuals]							
Action History Print/Export CLC	3. RWHAP Part B Supplemental Home and Community-Based Health Services]							
Administration	4a. RWHAP Part B Supplemental HIV Care Consortia (Provide detail in Section B)									
Print Requests Search	4b. RWHAP Part B Supplemental HIV Care Consortia Administration]							
Search Reports	5. RWHAP Part B Supplemental State Direct Services (Provide detail In Section B)									
	6. RWHAP Part B Supplemental Clinical Quality Management]							
	7. RWHAP Part B Supplemental Recipient Planning & Evaluation Activities									
	8. Recipient Administration 9. Total RWHAP Part B Supplemental Decomp Supplemental	L]							
	Program Punding Amounts				_					
									35	

Next, we are going to go over the Allocations Report sections for the Part B Supplemental X08 PTR.

The Allocations Report page for the Part B Supplemental PTR has 10 modifiable fields that you must complete using your agency's final NoA.

RWHAP Part B Supplemental Award Info	rmation
Allocations Report All fields are required.	
Public Burden Statement: OMB Control Number (0915-0318) Valid Until 04/30/2026	
Budget Year 09/30/2024 - 09/29/2025 Award Information	
RWHAP Part B Supplemental Program Award:	
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At the top of the Allocations Report screen, you will see only one award type which is your total Part B Supplemental award.



Below the award information, there is the second section which is the Planned Funding by Program Component section. There is only one award type, so you only have one column to enter funding amounts. These rows are much the same as what is seen in the Part B PTR.

Rows 1a, 1b, and 1c, again, are all for ADAP including ADAP services, health insurance, and access/adherence/monitoring services.

Row 2 is for Health Insurance Premium and Cost Sharing Assistance, and Row 3 is for Home and Community Based Health Services.

Please note that this information is to be reported in these cells and are not entered into contracts within the GCMS.



Row 4b is for consortia administration, and, just like the Part B PTR, the last three rows are for clinical quality management, planning and evaluation, and recipient administration.

Breakdown for Consortia and State Direct	Services Final Funding							
Service Consortia Direct Services Combined Total								
	Amount	Percent	Amount	Percent	Amount	Percent		
Core Medical Services		1.5		age:				
a. AIDS Drug Assistance Program Treatments	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
b. AIDS Pharmaceutical Assistance	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
c. Early Intervention Services (EIS)	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
d. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
e. Home and Community-Based Health Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
f. Home Health Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
g. Hospice	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
h. Medical Case Management, including Treatment Adherence Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
i. Medical Nutrition Therapy	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
j. Mental Health Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
k. Oral Health Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
I. Outpatient/Ambulatory Health Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
m. Substance Abuse Outpatient Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		
1. Core Medical Services Subtotal	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %		

The third section of the Part B Supplemental Allocations Report is the Breakdown for Consortia and State Direct Services Final Funding. Just like for Part B, the core medical and support services and their funding amounts populate from the contracts in the GCMS and will automatically populate into the Allocations Report. On this screenshot we see the section for Core Medical Services.

Once again, if you find any values that are incorrect, please access the GCMS to make the necessary changes and synchronize the changes to your report.

Support Services						
a. Child Care Services	\$0	0.00%	\$0	0.00%	S0	0.00%
b Emergency Financial Assistance	50	0.00%	50	0.00%	50	0.00%
c. Food Bank/Home Delivered Meals	50	0.00%	so	0.00%	50	0.00%
d. Health Education/Risk Reduction	50	0.00%	so	0.00%	50	0.00%
e. Housing	\$0	0.00%	\$811,217	71.71%	\$811,217	71.71%
f. Linguistic Services	\$0	0.00%	\$0	0.00%	\$0	0.00%
g. Medical Transportation	\$0	0.00%	\$15,011	1.33%	\$15,011	1.33%
h. Non-Medical Case Management Services	\$0	0.00%	\$0	0.00%	\$0	0.00%
i. Other Professional Services	\$0	0.00%	\$0	0.00%	\$0	0.00%
j. Outreach Services	\$0	0.00%	\$0	0.00%	\$0	0.00%
k. Psychosocial Support Services	\$0	0.00%	\$63,959	5.65%	\$63,959	5.65%
I. Referral for Health Care and Support Services	\$0	0.00%	\$0	0.00%	\$0	0.00%
m. Rehabilitation Services	\$0	0.00%	\$0	0.00%	\$0	0.00%
n. Respite Care	\$0	0.00%	\$0	0.00%	\$0	0.00%
o. Substance Abuse Services (residential)	\$0	0.00%	\$0	0.00%	\$0	0.00%
2. Support Services Subtotal	\$0	0.00%	\$890,187	78.69%	\$890,187	78.69%
3. Total Service Allocations	\$0	0.00%	\$1,131,277	100.00%	\$1,131,277	100.00%

This is a continuation of the screenshot from the last slide. However, here we see the funding information for Support Services.

Much like the Part B PTR, there is the checkbox for the 75 percent core medical services requirement at the bottom of the table . If you received a waiver, make sure to select the checkbox.

Once you have completed all the components of the Part B Supplemental Allocations Report, make sure to save your report.

	Valida	ting the PTR	
NAVIGATION «	▼ X07HA00000 : State Health Department		
Search Inbox PTR/Allocations Report Inbox Manage Contracts	Report ID: 123456 St Budget Year: 4/1/2024 - 3/31/2025 La Access Mode: ReadWrite UE	tatus: Working ast Modified Date: 5/24/2024 2:32:20 PM EI: AB1C23DEF4G	Due Date: 6/30/2024 11:59:58 PM Last Modified By: user@statehealth.gov
Search Contracts Navigation Recipient Information File Upload CLC Report Allocations Report	Your validation request has been scheduled. It may take sev NOTE: You must refresh this page to display your results.	veral minutes to generate the report.	
References A Validation Rules Guidance Actions A Walidate	For help with EHBs contact the HRSA Help Desk by phone at 1-877-0 Handbooks Contact Center help request form to submit your question For questions regarding data content and/or reporting requirements, p	So4-HRSA (1-877-464-4772) Monday through Friday, 8:00 i online. Jease contact Data Support at 1-888-640-9356 or email tr) a.m. to 8:00 p.m. Eastern Time. Or use the HRSA Electronic o RyanWhiteDataSupport@wrma.com
Comments Add Comments View Comments	Logged in as: GraniteeUataViewer, GraniteeUataCdtor, GraniteeUataSu The HAB Web Applications also require Adobe Acrobat Reader 5 or high	uominer her installed on your PC. To download Adobe Acrobat Rea	ider, click 📕
Reports 🔺			
			41

Now that you've completed and saved each section of the report, you're ready to move on to validating your report.

You can validate your report by clicking on Validate under the Actions header in the Navigation panel. Once you do, the system will let you know that it is processing your validation request, and it may take a few minutes to complete. You can refresh the page to see your results by clicking on "Validate" again or refreshing your browser by pressing the F5 key on your keyboard. Now let's continue by reviewing two types of validation results you may receive for your report.



If your validation process results in a green "Congratulations" message, then you have no validation issues to address and can proceed to submitting your report. Alternatively, you may see a page with validation messages to address which we'll show an example in a minute.

For both the Part B and Part B Supplemental PTR, there are just two types of validation messages: errors and warnings.

Errors must be corrected. You cannot submit your report with an error.

Warnings should be addressed, if possible, to prevent your project officer from returning the report to you. You are still able to submit your report with warnings by adding a comment for each warning you receive.

If you make changes to the information in your report, you must revalidate your report before you are able to submit.

New Notice of	Award Validation Warnings for X07
Check Code #	Validation Message
244	Award amount entered for RWHAP Part B Base Award (\$\$\$) does not match the corresponding amount from Notice of Award (\$\$\$).
245	Award amount entered for RWHAP Part B ADAP Earmark Award Amount (\$\$\$) does not match the corresponding amount from Notice of Award (\$\$\$).
246	Award amount entered for RWHAP Part B ADAP Supplemental Award Amount (\$\$\$) does not match the corresponding amount from Notice of Award (\$\$\$).
247	Award amount entered for RWHAP Part B Emerging Communities Award Amount (\$\$\$) does not match the corresponding amount from Notice of Award (\$\$\$).
248	Award amount entered for RWHAP Part B MAI Funds Amount (\$\$\$) does not match the corresponding amount from Notice of Award (\$\$\$).
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Before we go over an example of a validations results page, I would like to go over five new validation warnings that are new for the 2024 Part B PTR only. This does not affect the Part B Supplemental PTR. These new validation warnings are related to each agency's NoA.

You will receive a new validation warning if you enter a value for any of your award amount totals in the Award Information section that does not match the corresponding value in your NoA.

If you have any questions about your agency's NoA, please contact you project officer. These validations will be listed in the Validation Rules document in the Navigation panel for future reference, so please do not feel like you need to memorize these.

			Valida	tion	Results	1			
Valio	latior	Results							
You m before desk if	ust fix all you sub you hav	errors in your report before you mit your data. To enter warning e questions about any of the va	can submit your data. Please fix al comments for a specific check, sele lidation errors, warnings, or alerts.	I warnings as appropria act the "Add Comment"	te. For the warnings that you cann link located in the Action column o	ot or should r f the validatio	not fix, enter a n results table	warning comment e(s). Contact the help	
Recip	ent Info	rmation							
Row No.	Check	No.	Message	Туре	Comment Count		,	Action	
No rep	ort valida	tion errors found.							
Requi	red Doc	uments							
Row No.	Check	No.	Message	Туре	Comment Count		,	Action	
No rep	ort valida	tion errors found.							
Conse	lidated	List of Contractors							
Row	Check	No.	Message	Туре	Comment Count		1	Action	
No rep	ort valida	tion errors found.							
Alloca	uons Re	роп							
Row No.	Check No.	Message				Туре	Comment Count	Action	
1	92	At least 75% of grant funds (allocated to core medical se	minus the amount reserved for admin rvices.	istrative, CQM, and plan	ning/evaluation) must be	Warning	0	Add Comment	
	_								

Here is a sample validation results page.

In this example, there is one warning that was received in the Allocations Report section. If we make any corrections to our Allocations Report to correct validation messages, we'll have to revalidate the report.

If you receive a warning you will need to correct the data, or if you can't, add a comment by selecting "Add Comment" under the "Actions" column to the right of the warning validation. A new window will appear for you to enter your comment. When finished, select "Save" at the bottom of the text box. In your comment, provide an explanation regarding the warning. The comment does not change the information in your report.

Once you have the validation process squared away, you can proceed to submitting your report.

	Submit the PTR	
Search Contracts Navigation	Submit Report A fed with an astrisk * before it is a required field. Please enter comments regarding your certification. * comments:	
		45

To submit your PTR, first click on the "Submit" link.

In order to submit your report, you must enter a comment in the comment box. Please enter any meaningful feedback you have about your PTR submission.

Next, select the checkbox certifying the data in the report are accurate and complete.

Finally, click the "Submit" button at the bottom of the page. Once successfully submitted, your report will be sent to your project officer for review.



We've come to the end of our presentation for today. If you have any additional questions, please feel free to ask them during the Q&A portion which we'll get to in just a moment. First, let's look at the resources available to you if you need any additional assistance.



The TargetHIV website is the home of all our TA materials including the Part B and Part B Supplemental PTR Manuals, the GCMS webinar and manual, as well as this webinar which will posted to the site at a later date.

The HRSA HAB website also has plenty of helpful information, most notably PCN #16-02 which includes definitions of all the core medical and support service categories.



The two main TA Resources you may need for the PTR are going to be us at RWHAP Data Support and the EHBs Customer Support Center. Data Support can help with accessing and completing the PTR as well as making any changes to contracts in the GCMS.

The EHBs Customer Support Center will be your contact for any login or permission issues.

There is no wrong door for TA though! No matter who you contact, we will get you to the right person!



Our RWHAP TA Resources Brochure is a great resource if you are unsure of who to contact for assistance. This brochure outlines contact information for each TA resource, lists the reports the TA supports, as well as frequently asked questions they answer.

If you are still unsure of who to reach out to, we will always make sure you end up with the right resource for assistance. You can click the link at the top of the page to access the brochure.



Thank you for attending today's presentation and now we'll move on to the Q&A portion of the webinar.