

ADR Town Hall

Ryan White HIV/AIDS Program ADAP Data Report (ADR)

HIV/AIDS Bureau

August 7, 2024



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

My name is Debbie Isenberg. I'm a member of the DISQ Team, one of several groups engaged by HAB to provide training and technical assistance to AIDS Drug Assistance Programs, or ADAPs, in completing the ADAP Data Report (ADR). Following the ADR submission every year, we have an ADR Town Hall webinar to talk about the submission and things to think about for next year.

Today's Webinar is Presented by:



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Throughout the presentation, we will reference some resources that we think are important. To help you keep track of these and make sure you have access to them immediately, my colleague David is going to chat out the link to the presentation slides right now which include all the resources mentioned in today's webinar.

At any time during the presentation, you'll be able to send us questions using the "Q&A" function on the settings bar on the bottom of the screen. All questions will be addressed at the end of the webinar in our live Q&A portion. During that time, you will also be able to ask questions live if you'd like to unmute yourself and chat with us directly.

Now before we start, I'm going to answer one of the most commonly asked questions about the recording. The recording of today's webinar will be available on the TargetHIV website within one week of the webinar. The slides are already available for you to access on the TargetHIV website using the link that David just chatted out. Please note that these slides are not 508 compliant, but we will follow up with all registrants in about two weeks when the 508 compliant slides and written question and answer are posted.

Disclaimer

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

The DISQ Team is composed of CAI, Abt Associates, and Mission Analytics and is supported by HRSA of HHS as part of a cooperative agreement totaling over \$4 Million.

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

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

Agenda

Why Have A Town Hall?

Looking Back: 2023 ADR

Moving Ahead: Next Steps

Let's Hear From You!

We're going to touch briefly on several topics today, but we're also going to leave time to hear from you! (CLICK) First, I'll review why we do a Town Hall. (CLICK) Next I'll highlight some of the main challenges from the 2023 ADR. (CLICK) I'll touch on what our next steps will be and look forward to the 2024 submission then (CLICK) I'll turn it over to you for your feedback, questions and concerns.

I also want to note that I'll be asking poll questions throughout the presentation as a way of getting additional feedback.

We Want to Hear From You!

- Review reporting requirements that may need clarification or modifications
- Revise existing TA tools and materials
- Increase awareness of existing tools and resources

So why have a Town Hall. We know that there are challenges every year with the ADR and, today, we hope to learn more about challenges with the 2023 submission. We use your input to review any requirements that may need clarifications. We'll also use your feedback to revise existing tools and materials. For example, we may modify language in the instruction manual, so it is clearer. Or, if you find that a report in the ADR Web System is not that intuitive, we may update that tool. We'll also take today as an opportunity to increase awareness of existing tools and resources.

Other Channels of Feedback

- Outreach calls
- ADR webinar series
- 2023 report validation comments
- Contact us to ask questions or provide suggestions

Other than today, we have a couple of other venues to get your input.

First, we communicate with you through our regular Fall calls and data quality outreach, which I'll discuss later in the presentation. We also talk to some of you in the summer as well.

Many of you join us for our ADR webinars and we always love to hear from you during those calls.

We are carefully read your validation comments in the 2023 ADR to understand your specific program and how it affects data collection and submission.

If your ADAP wants to work on something now, you don't need to wait until we reach out to you. We are available all year to help.

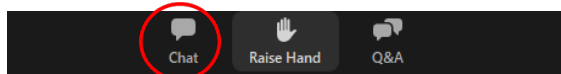
And, outside of the more formal forums, we are always available for questions or suggestions.

Let's 'Chat' Today!

- The “chat” function is enabled today
 - Share feedback and tips
- Submit questions by using the ‘Q & A’ feature

Chat

Who can see your messages?
To: Everyone
Type message here...



So, before we jump in, I wanted to share that we've turned on the chat feature today in zoom. We would like you to share feedback and tips during the webinar. You can also chat out if you are new to ADAP or the ADR and we'll be sure to reach out to you.

We'll still use the Q & A feature as we always have-you can type in questions now or ask questions live during the Q & A portion of the webinar and Debbie will tell you more about that later today.



Before we talk about the 2023 ADR, I like to get a sense of how you felt about the submission.

I'll turn things over to David to facilitate our first poll.

How was the submission of the 2023 ADR?

- ☐ Smooth, and I feel good about the quality of the data
- ☐ Challenging, but I feel good about the quality of the data.
- ☐ Challenging, and I'm concerned about the quality of the data
- ☐ I wasn't involved with submission

Agenda

Why Have A Town Hall?

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Moving Ahead: Next Steps

Let's Hear From You!

CLICK So let's look back at the 2023 ADR

Submission Overview

- All ADAPs submitted by the day of the deadline
- No reporting changes
- Login.gov Integration
- Multiple ADAPs had staff turnover or changed the data system that they use to create the ADR client-level data file



So, let's start by looking at the 2023 ADR. I'm happy to report all ADAPs successfully submitted their ADRs by the day of the deadline. Awesome job everyone.

On the positive side, there were not any updates to reporting changes but, to enhance the HRSA EHBs' security, recipients and providers used Login.gov and two-factor authentication when logging into the HRSA EHBs.

Similar with previous years, many ADAPs faced staff turnover or were changing their data systems, both of which can make the submission more challenging.

Electronic Handbooks

- Some ADAPs experienced long wait times to upload a file on the due date
- This did not result in any late submissions
- Thank you for letting us know when you notice issues



So, let's talk about some of the issues with the 2023 submission. I'll start with the Electronic Handbooks (EHBs).

On the day the ADR was due, some ADAPs experienced long wait times for file uploads to process (up to 30 minutes). The great new is this did not result in any late submissions.

We say this often, but I'd like to say it again. Thanks to all of you that alert us when you notice issues. When you find issues and bring them to our attention, we can then triage so the issue can get fixed.

TRAX

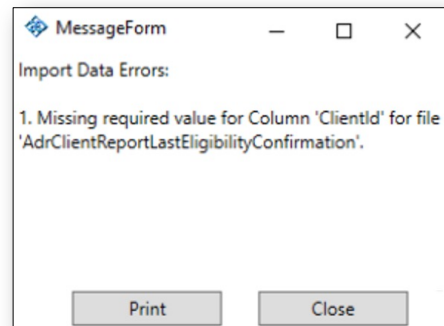
- Minor issue with TRAX
- Would not update automatically this year
- The solution was to uninstall and reinstall TRAX

Let's move on to TRAX. [TRAX](#) for the ADR helps ADAPs create the ADR client-level data file.

For those of you that use TRAX, you probably know that each time that you open TRAX, it checks the HRSA server to see if there are any updates. One issue that we identified this year is that TRAX would not update automatically as in previous years. However, the great news is that the solution was straightforward and to uninstall TRAX completely and then reinstall the application.

Troubleshooting TRAX Errors

- If you get an error message in TRAX:
 - The error message usually will tell you which file has the error
 - The [ADR TRAX Manual](#) can help you troubleshoot
- Reach out to DISQ if you need help



Many TRAX users ask us how they can diagnose and remedy errors themselves. The good news is that the error messages in TRAX usually describe what file(s) the issues are in. This will help you start to define the issue. The ADR TRAX Manual also includes a list of potential errors and screenshots that you can use to troubleshoot. If you receive an error message that you can't resolve, please contact the DISQ Team for further assistance.

TRAX Tips

- Use only numbers for Client IDs
- Client IDs cannot contain more than 10 characters
- Be sure to correctly format NDCs
 - Correct: 61958-0501-01
 - Incorrect: 61958-501-1
- Use whole numbers for cost information
- Format dates as MM/DD/YYYY

Let's continue by talking through some tips for TRAX. First, Client ID can only include numbers. TRAX will not accept letters or characters in the Client ID. Client IDs also cannot contain more than 10 characters.

Second, NDCs must be correctly formatted. NDCs are a sequence of 11 digits as in the example on the screen. It's critical that the NDC follow the 5-4-2 sequence with the dashes. We've seen leading zeros be left off or the dashes not be included. Either of these will result in an incorrect format.

If the client ID or NDC are not formatted correctly, it could cause TRAX to crash without giving an error message.

Also, TRAX will only accept whole numbers for cost, so no decimals.

One final TRAX tip is to be sure to format dates as MM/DD/YYYY. TRAX will format the dates as required for the XML.

CAREWare

- Validation Report Improvements
- Validation 108 was not working correctly
- The CAREWare Viewer excluded premiums >15 months from the viewer
- Did not affect the underlying data

It is the most common data system used for the ADR. We wanted to highlight a few things with CAREWARE this year.

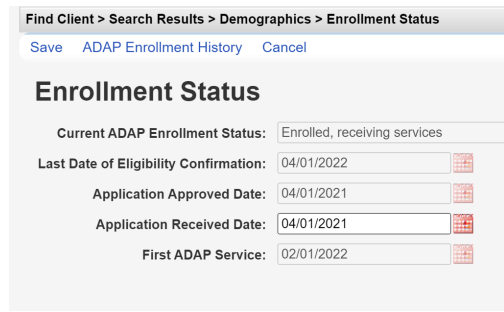
Even if you don't use CAREWare, hang in there with me for the next few slides. Many of these tips can help with when troubleshooting your own data system.

We know that a lot of you use the Validation Report in CAREWARE to review your data. In past years, you may remember that the Validation Report in CAREWare did not include all the validations found in the EHB. This meant that you could get new validation messages once you uploaded your data into the EHBs. The great news was that this was less of an issue for the 2023 ADR. However, one of the validations, validation 108 clients with insurance premium assistance months outside of 1-18, was not working correctly. This meant that CAREWare was incorrectly flagging clients with that validation when they had no insurance assistance.

Another issue was that the CAREWare Viewer, which you can think of as the CAREWare version of the Upload Completeness Report, excluded premiums over 15 months from the viewer. The great news is that neither this issue with the viewer nor validation 108 affected the underlying data.

CAREWare

- Updating Enrollment Status



The screenshot shows a web interface for updating enrollment status. At the top, a breadcrumb trail reads 'Find Client > Search Results > Demographics > Enrollment Status'. Below this are three links: 'Save', 'ADAP Enrollment History', and 'Cancel'. The main section is titled 'Enrollment Status'. It contains several fields with labels and values, each with a calendar icon to its right for date selection. The fields are: 'Current ADAP Enrollment Status' with the value 'Enrolled, receiving services'; 'Last Date of Eligibility Confirmation' with the value '04/01/2022'; 'Application Approved Date' with the value '04/01/2021'; 'Application Received Date' with the value '04/01/2021'; and 'First ADAP Service' with the value '02/01/2022'.

Field	Value
Current ADAP Enrollment Status	Enrolled, receiving services
Last Date of Eligibility Confirmation	04/01/2022
Application Approved Date	04/01/2021
Application Received Date	04/01/2021
First ADAP Service	02/01/2022

I'll want to touch on an issue that we have mentioned before. Specifically, CAREWARE users have previously identified that manually updating the enrollment status for clients who did not receive services is not feasible because of the time it would take. HAB is exploring if this can be automated for the 2024 ADR so stay tuned!.

CAREWare

- Confusion regarding where to enter/import medication claims data depending upon whether it was medication copayments, coinsurance and deductibles or full pay medications
- Confusion about funding source that must be chosen for CAREWare to include full pay medications in the ADR

Now there was some confusion about where to put data in CAREWare so it shows up correctly in the ADR. While this hasn't changed, we wanted to review this because some CAREWare users experienced it this year.

CAREWare

- Full pay medications are a medication assistance service
- Entered as drug payments
- Imported into the exp_drug_payment table

The screenshot shows the CAREWare interface. On the left, a sidebar menu lists various options: Customize, FHIR Link Not Connected, Client Summary, Demographics, Client Report, Encounter Report, Drug Payments (highlighted with a red box and a red arrow), Insurance Services, and Annual Review. On the right, the main content area displays the 'Drug Payments' section. It includes a breadcrumb trail: Find Client > Search Results > View Detail. Below this, there are links for View, Add, Edit, Delete, and Dispensers. A search bar is present with the text 'Search:'. Below the search bar, a table displays drug payment data with columns for Date, Dispenser, and Gen. The table contains one row of data: 07/16/2019, ADAP, and abac.

Date	Dispenser	Gen
07/16/2019	ADAP	abac

Full pay medications are entered as a drug payment in CAREWare. Included in the data reported is the date the medication was dispensed, the NDC, the duration (or days supply), the quantity and the price.

CAREWare

- Funding for full pay medications must be 'ADAP' to be included in the ADR

Find Client > Search Results > View Details > Drug Payments > Add

Save Back

Add

Date: 07/02/2024

Dispenser:

Drug/NDC:

Funding:

Days: **ADAP**

Units: Other

Be sure to choose 'ADAP' for funding. If you choose anything else, it won't be included in the ADR.

CAREWare

- Medication copayments, coinsurance and deductibles are an insurance assistance service
- Entered as insurance services
- Imported into the exp_service table

Find Client > Search Results > View Details

View Add Delete Receipts Help

Insurance Services

Search:

Date	Subservice
03/07/2023	High-risk insurance premium
01/13/2023	Medicare supplement premium

Medication co-pay/deductible including Medicare Part D co-insurance, copayment, or donut hole coverage	High risk-insurance copayments (ADAP)
	Medicare supplement deductibles (ADAP)
	Medicare supplement copayments (ADAP)
	Other health insurance deductibles (ADAP)
	Other health insurance copayments (ADAP)
	Medicare Part D copayment (ADAP)
	Medicare Part D Co-Insurance (ADAP)
	Medicare Part D Out-of-Pocket (ADAP)

Medication copayments, co-insurance and deductibles are reported in a different place. This should be entered as an insurance service using any of the default subservice categories already in CAREWare. It doesn't matter which subservice you use. There's also much less data required from the claims data. Report the date that the medication copayment, coinsurance and deductible claim was paid and the amount of the claim. The quantity is always 1.

CAREWare Tips

- New webinar on [Using CAREWare for the ADR](#)
- Use CAREWare viewer and validation reports
- Check out the [ADR In Focus on TargetHIV](#)
- HAB is always interested in hearing your suggestions about the CAREWare ADAP domain

In March, Jprog and DISQ presented a webinar about using CAREWare for ADR Reporting. This is a great resource if you are new to CAREWare for the ADR or if you want to improve your CAREWare skills.

I'd also like to share a few additional CAREWARE tips for those of you using CAREWARE for the ADR. We always suggest using reports in CAREWare (or your data system) to review your data before upload. It is always easier to fix data in your data system before you upload it to the EHBs.

TargetHIV has an ADR In Focus you may find helpful that that focuses on contract and service setup, ADAP application received date, and updating enrollment status.

HAB is always interested in hearing your suggestions about the CAREWare ADAP domain so your feedback is always welcomed. There's no wrong door for feedback, so if you have suggestions, contact the CAREWare Help Desk, DISQ, Ryan White Data Support, or your Project Officer.

Upload Completeness Report Tips

- The UCR is a great tool to ensure that data are of high quality and accurately reflect services being provided
- The UCR includes the current and previous years data
- Use the [ADR in Focus: How To Use the Upload Completeness Report](#) as a guide to reviewing the tool
- The DISQ team can also review your UCR with you- just ask us

Let's move on to the Upload Completeness Report. The UCR is a great tool but we think many ADAPs are not using it. It is very important to review the UCR to make sure that you have minimized missing data and that the data accurately reflect the services that you are providing.

The UCR also includes data for both the previous and current year. This is a great tool to help you find possible issues and you can use it while creating the ADR or preparing the future.

There is also an ADR in Focus that we've created that provides guidance regarding how to review the Upload Completeness Report.

The DISQ team can review the UCR with you. We can review to help you prepare for next year's ADR or after upload during the submission. Just ask! We had several ADAPs take us up on the offer to review the UCR and it made a difference.

Poll #2



Time for the final poll! We'd like to get a better sense of why you may or may not use the UCR, and what else we could do to improve it. David, can you launch the poll?

How would you best describe your use of the UCR for the ADR submission?

- ☐ It helped me identify data quality issues
- ☐ It helped me, but I have suggestions about content
- ☐ I knew it was available but did not use it
- ☐ I did not know it was available

If you said you knew it was available but did not use it, let us know why in the chat. Please also feel free to share suggestions about the UCR as well. It's really important to us that this report serves as a good tool for you to assess your data.

Validations

- Validation 112 (*Last Eligibility Confirmation Date is missing or out of range*) was incorrect
 - Last eligibility confirmation date is only required for existing clients
 - The validation included disenrolled clients, which it should not
 - The UCR represented the data correctly

Validation 112 (Last Eligibility Confirmation Date is missing or out of range) included disenrolled clients, which it shouldn't. Fortunately, the UCR represented the data correctly.

Validation Tips

- Validations are usually updated each year
 - [ADR Data Validations](#)
 - [ADR In Focus: 2023 Validations](#)
- Changes are highlighted during ADR webinars

DISQ
ADR In Focus: 2023 Validations

What are data validations?
When you upload your ADAP Data Report (ADR), data pass through a series of validation checks. These validation checks look for consistency and accuracy in your data to improve your data quality. If your data do not pass a validation check, you may have to explain why or reupload your report with corrected data.

Where do I encounter validation checks?
The validation process occurs within the ADR Web Application when you upload your client-level data. Go to the left navigation menu and click on the link "Validate." A This tool will tell you which clients (by eUCI) do not pass the validation checks.

What will I see and how do I respond?
You may encounter three types of notifications:

- Errors:** Data with errors are not accepted. You must edit your data and re-upload.
- Warnings:** In response to warnings, you should go back and look at your data to see if edits can be made. If edits cannot be made, you will need to submit a validation comment explaining why your data look the way they do.
- Alerts:** Alerts are informational and do not prevent submission. However, please make corrections as necessary if you receive a validation alert.

The ADR validations are usually updated each year, so you'll want to be sure to check out the resources on TargetHIV. You can find a list of all the ADR data validations as well as an ADR In Focus that is more of a high-level summary with suggestions. We also highlight any changes during the ADR webinar series each year.

Reporting Requirements

Scenario	Health Coverage
ADAP is paying the subsidized premium of a marketplace plan	Private-Individual
ADAP is paying the employee portion of an employer sponsored plan	Private-Employer
Client has a Medicaid plan that has limited coverage	Medicaid, Children's Health Insurance Program (CHIP), or other public plan
Client works for company that self-insures and pays the medical expenses of the employees	Other Plan
Medicare Advantage Plans	Medicare Part C

There is also some confusion about health coverage, so let's look at some common insurance scenarios and how they are reported.

If an ADAP is paying the subsidized premium of a marketplace plan, that's reported as Private-Individual

If an ADAP is paying the employee portion of an employer sponsored plan, that is Private-Employer

If a client has a Medicaid plan that has limited coverage, that's Medicaid, Children's Health Insurance Program (CHIP), or other public plan

If a client works for company that self-insures and pays the medical expenses of the employees, this should be reported as Other plan

And, if a client has a Medicare Advantage Plan, that is Medicare Part C

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Let's Hear From You!

CLICK So let's look at our next steps

Next Steps

- Initial outreach to ADAPs with possible data quality issues based on preliminary ADR review
- Complete reviewing 2023 ADR report comments
- Share the ADR Data Summary Report we create for you
- Conduct outreach to all ADAPs including calls to discuss
 - Data trends
 - Low completeness rates for certain data elements
 - Data quality issues

ADAPs have asked us each year if we can reach out earlier than we usually do and last year we started outreach a little earlier. Like last year, we'll reach out this summer to ADAPs who, based on our initial review of your submitted ADR, may have data quality issues.

Once we finish reviewing the comments reported and can review your submitted data more extensively, we'll conduct outreach to all ADAPs just like the last couple of years. We'll also be sharing the ADR Data Quality Summary Report that we create for each of you. During the calls, we'll review your ADR data to make sure your data reflect your program and learn about any changes you're making to your data management processes.

The goal of our outreach and technical assistance is to improve the accuracy of your data so that the story of the great work your program does serving people with HIV can be told so we look forward to speaking with you all soon.

Next Steps

- Develop new resources for ADAPs
- Work with ADAPs to document ADR processes
- Support ADAPs in implementing data sharing with HIV surveillance program

We're also developing some new resources to support ADAPs. For example, we're working to develop a resource to identify possible data quality checks that an ADAP can complete in reviewing data throughout the year.

We'll also work with ADAPs who haven't yet documented their processes to do just that. This may mean crosswalking your ADAP activities to the reporting requirements since usually ADAPs use different terms locally than are used nationally. It could also mean developing a data crosswalk to align the data you collect with reporting requirements. We can adjust our approach to meet the needs of your ADAP.

DISQ also supports ADAPs that want to implement data sharing with HIV surveillance.

If you'd like to get started on any of this, you can either email us directly or fill out a TA request form on TargetHIV. I'll share how to request TA in just a moment.

What To Expect For The 2024 ADR

- Updates to the Validation Report and Upload Completeness Report to address issues identified this year and improve usability
- Updates to the ADR manual to clarify reporting requirements

Before we wrap up, we wanted to give a quick overview of what to expect for next year's submission.

As always, there will be updates to the validation and upload completeness reports to both address issues identified this year and improve usability.

We'll also update the ADR manual to help clarify reporting requirements.

Be sure that you're signed up for the DISQ ADR emails so that we can share any new information.

Be Proactive!

- If you're having data issues, please reach out!
- DISQ is available to help improve the quality and timeliness of your submissions.



Now before we wrap up, I'd to speak briefly on being proactive. We know that all of you are working hard but there are times that things happen that make reporting difficult. DISQ is always available to help with the ADR. The ADR is a 365-day a year work in progress, and we know you each have your own methods and timelines for monitoring your data quality. If you have a concern or a question, especially if it will impact your ability to report data accurately or have it submitted on-time, please let us know and we are happy to help. You are all experts in your program but, sometimes, each of us needs some help. Don't struggle in silence, we are in this together!

Earlier in the presentation, I mentioned that you don't need to wait for us to contact you if you have something you'd like to address. We available all year to help so please get in touch.

RWHAP Technical Assistance Resources

The [RWHAP TA Resources Brochure](#) features information on each RWHAP technical assistance provider, including:




- RWHAP reports they support
- Questions they frequently respond to
- Contact information

Ryan White HIV/AIDS Program TA Resources

RWHAP Data Support Reports: RSR, ADR, AETC, EHE, HIVQM, PTP (Performance Report), Expediency Report, GCMs, and DRI. The Ryan White Data Support team provides support for questions related to data report content and submission, data validation, and interpretation of the instruction manual and RWHAP data reporting requirements. They can address such issues as: • I don't understand something in the instruction manual. • I don't understand a reporting requirement. • What is the accurate response for a given data element? • I received a validation message (error, warning, error) and I don't know how to fix it. • What is my organization's relationship with our recipient (recipient/provider)? • How do I manage contracts in the GCMST? • What is my provider's registration code? • What is my QUID code? • How do I change my report's submission date? • I need the report returned to me for change. • I don't understand a certain RWHAP service category and what activities are included in that category.	DATA SUPPORT 1-888-640-9386 Hours: 10am-6:30pm ET, M-F RyanWhiteDataSupport@hrsa.gov Target HIV - Data Support
Data Integration, Systems and Quality (DISQ) Team Reports: RSR, ADR, AETC, EHE, HIVQM The DISQ Team aims to enhance the completeness, accuracy and consistency of RWHAP data-level data through capacity building, testing and technical assistance (TA) for recipients and providers. They can address such issues as: • I'm a new user and I don't know where to start. • I need help with my client-level data. • What is the data reporting schema and how do I use it to map my source data? • How do I create an XML file? • How do I use TRACT? • How do I integrate data from multiple sources? • How do I use the actual completeness report? • I need help addressing a data issue identified in my system-generated report. • How do I check the quality of our data? • I would like to improve my organization's process for addressing/validating our data. • I have another organization that uses the same data system that I can talk to!	DISQ Data Integration, Systems & Quality TECHNICAL ASSISTANCE Data.TA@disqglobal.org Target HIV - DISQ
EHBs Customer Support Center Reports: RSR, ADR, AETC, EHE, HIVQM, PTP (Performance Report), Expediency Report, GCMs The EHBs Customer Support Center assists with registering, accessing, and integrating the EHBs. They can address such issues as: • I can't log into the EHBs. • I need help registering a new EHBs. • I need to add/change who is allowed to complete the report. • I need help finding my report in the EHBs. • I have a web system error.	HRSA Electronic Handbooks 1-888-644-4772 Hours: 10am-3pm ET M-F EHBs.TA@hrsa.gov
CAREWare Help Desk Reports: RSR, ADR, EHE, HIVQM The CAREWare help desk can assist with generating XML files from CAREWare. They can address such issues as: • I need help with CAREWare. • How do I generate my complete XML file using CAREWare? • How do I import data from another system into CAREWare? • How do I create a custom report in CAREWare? • My organization is a recipient, and my provider is not submitting their data on time. • My organization did not collect all the required data. What do I do?	jProgr 1-877-694-8371 Hours: 12:00pm ET (Mon-Wed-Fri) and 10:30-6:30pm ET (Tue-Thu) info@jprogr.com
Contact Your Project Officer They can address such issues as: • I have questions about my organization's RWHAP program. • I need help with my program report. • I have a question about my grant funding. • I can't meet the report deadline. • My organization is a recipient, and my provider is not submitting their data on time. • My organization did not collect all the required data. What do I do?	HRSA Health Resources & Services Administration HHS Employee Directory

This may feel like a lot to do, but there are several technical assistance resources available to help you. The RWHAP TA Resources brochure outlines information about each technical assistance provider, including the reports they support, frequently asked questions they respond to, and their best contact information. You can find this resource on the TargetHIV website.

Most importantly, please don't forget that there is no wrong door for TA – if we can't assist you, we're happy to refer you to someone who can!




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

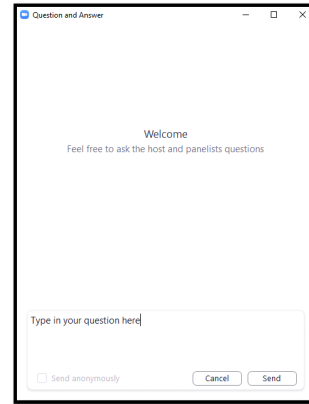
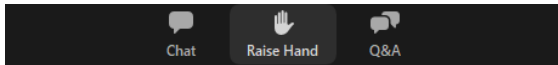
Now I'm going to turn things over to Debbie for the Q & A.

Let's Hear From You!

- Please use the “raise hand” function to speak. We will unmute you in the order that you appear.

OR

- Type your question in the question box by clicking the Q&A icon on the bottom toolbar.

And now to your questions – but first, I would like to remind you that a brief evaluation will appear on your screen as you exit, to help us understand how we did and what other information you would have liked included on this webcast. We appreciate your feedback very much, and use this information to plan future webcasts. My DISQ colleague David is going to put a link out in the chat feature if you would prefer to access the evaluation right now. We'll also send a final reminder via email shortly after the webinar

As a reminder, you can send us questions using the “Question” function on your control panel on the right hand side of the screen. You can also ask questions directly “live.” You can do this by clicking the raise hand button (on your control panel). If you are using a headset with a microphone, David will conference you in; or, you can click the telephone button and you will see a dial in number and code. We hope you consider asking questions “live” because we really like hearing voices other than our own.

We do want to get all of your questions answered, and we do not usually run over an hour. If you have submitted your question in the question box and we cannot respond to your question today, we will contact you to follow up. We often need to explore your question in order to give you the most appropriate answer.