



Preparing for the 2020 RSR Submission - Understanding Reporting Changes

Ryan White HIV/AIDS Program Services Report

HRSA HIV/AIDS BUREAU

October 7, 2020



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

The DISQ Team, one of several groups engaged by HAB to provide training and technical assistance to recipients and providers for the Ryan White HIV/AIDS Program Services Report or RSR.

Today's Webinar is Presented by:



James Tedrow



AJ Jones



Today's Webcast is presented by James Tedrow from RWHP Data Support, the experts on RWHP reporting requirements, and me representing the DISQ team's work with client-level data. James will provide an overview of the RSR submission requirements and process to get you ready for the upcoming RSR, and I'll talk through how these changes impact the client-level data you'll submit with your RSR. This is a webinar intended for beginners who have limited knowledge of the RSR. Of course, it's also a great refresher if you've done it before.

Now before we start, I'm going to answer one of the most commonly asked questions about the slides. The recording of today's webinar will be available on the TargetHIV website within one week of the webinar; the slides and written question and answer are usually available within two weeks.

Disclaimer

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

- CAI and their partners Abt Associates and Mission Analytics, supported by HRSA, part of HHS as part of an award totaling \$4,000,000.00.
- Ryan White HIV/AIDS Program Data Coordination and Technical Assistance contract is supported by HRSA of HHS as part of an award totaling \$5,092,875.59.

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Overview

Review of Eligible Services Reporting

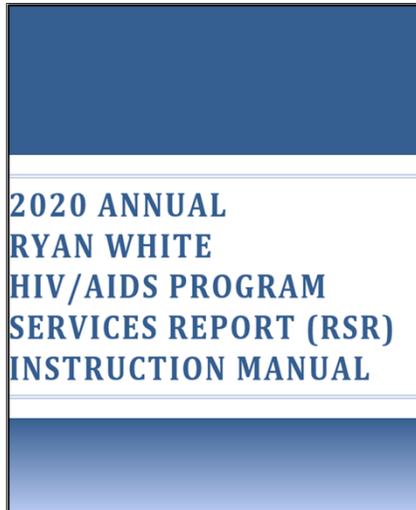
Ending the HIV Epidemic and CARES Act Reporting

Changes to the Client-level Data

RSR Submission Timeline

Upcoming Webinars and TA Resources

Today, we'll be going over the changes for 2020 RSR Reporting. We'll start by reviewing the transition to Eligible Services Reporting. Next, we'll take a look at Ending the HIV Epidemic and CARES Act Reporting and what these new funding sources mean for the 2020 RSR. Next, we'll go over changes to the client-level data. Then, we'll review the 2020 RSR Submission Timeline. And we'll close out the presentation by going over the upcoming webinars and additional technical assistance resources available to assist you.



2020 RSR Manual

Available in the fall on the [TargetHIV website](#)

I also want to take a moment to remind everyone of the 2020 RSR Instruction Manual which will be available soon on the TargetHIV website at the link on this slide. This manual includes all the instructions you need to complete your RSR and contains most of the information presented here today.

Eligible Services Reporting

- RSR data reporting transitioned to Eligible Services Reporting for the 2019 RSR
- Agencies submit client-level data for services funded through RWHAP and/or RWHAP-related funding (program income or pharmaceutical rebates)
- Phased implementation
 - 2020 RSR (submitted March 2021): For those who already collect this information
 - 2021 RSR (submitted March 2022): Final deadline for Eligible Services Reporting implementation

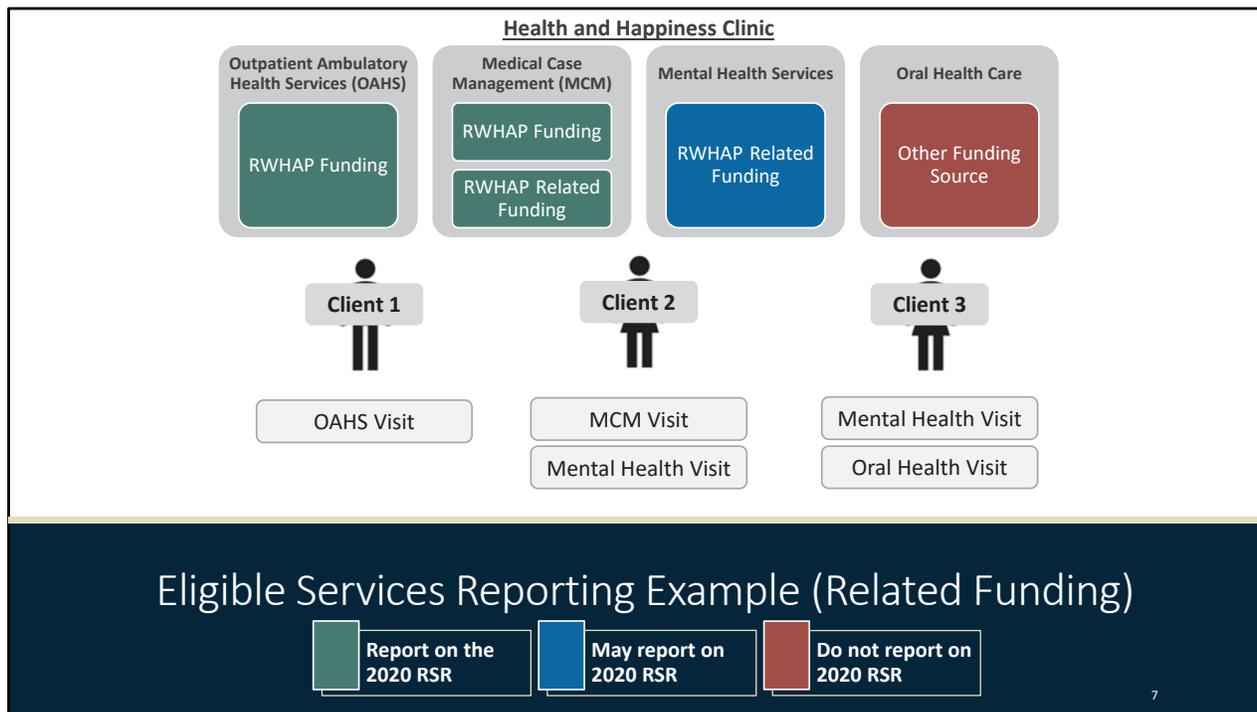


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Let's go ahead and jump right into the changes for the 2020 RSR. We'll start with a review of Eligible Services Reporting, which was first introduced in the 2019 RSR.

Under Eligible Services Reporting, agencies submit client-level data for services funded through Ryan White funding as well as Ryan White-related funding, which includes Ryan White-related program income and pharmaceutical rebates. Note that due to EHE and CARES Act funding, the scope of clients that are reported in RSR has been expanded, which we will get to in a few slides.

We are currently in a phased implementation for this reporting change to allow organizations plenty of time to begin collecting the necessary additional data on services funded through Ryan White-related funding. However, HAB strongly encourages agencies that already collect these data to report them on the 2020 RSR. All other organizations have until the 2021 RSR, submitted in March of 2022, which is the final deadline to begin providing that information.



So let's run through an example. Let's say we have a fictional clinic, the Health and Happiness Clinic, and we provide four different services: OAHS with our Ryan White funding, Medical Case Management with both Ryan White and Ryan White-related funding, Mental Health Services with just our Ryan White-related funding, and Oral Health Care with other funding that isn't related to the Ryan White program. We have three different clients, Client 1, 2, and 3 and let's say all these clients are eligible for Ryan White services. Let's determine which clients and which services we should be reporting on the 2020 RSR. Client 1 came to our clinic and only received OAHS. Because our clinic funded OAHS through Ryan White funding, we should be reporting Client 1 and their OAHS visit on the RSR. Client 2 was the recipient of both Medical Case Management and Mental Health Services. Because Medical Case Management is partially funded with our Ryan White funding, Client 2 should be reported on the RSR along with the Medical Case Management visit. Remember, even if Client 2's Medical Case Management visit is paid for with Ryan White-related funding, they would still need to be reported on the RSR this year. The payor of the services does not determine who should be reported and this service is funded with Ryan White funding as well. Client 2's Mental Health visit may be reported on the 2020 RSR but is not required until the 2021 RSR as this is an additional service funded with only Ryan White-related funding. Client 3 received Mental Health Services and Oral Health Care. Client 3 and their Mental Health visit may be reported on the 2020 RSR but it is not required until the 2021 RSR as they received no services funded by Ryan White funding but received a Ryan White-related funded service. There is no reporting requirement for Client 3's Oral Health visit as this service is not funded by Ryan White or Ryan White-related funding. Eligible Services Reporting only affects additional services funded with just Ryan White-related funding, as is the case for Mental Health Services in our example. If you use your Ryan White-related funding to fund the same services that you fund with your regular Ryan White funding, as is the case for Medical Case Management in our example, then your reporting will not change.

Ending the HIV Epidemic Reporting in the RSR

- Ending the HIV Epidemic (EHE) funding is considered RWHAP funding
- EHE recipients and subrecipients should report all HIV+ clients that receive services funded through the EHE awards in the 2020 RSR
- New EHE-specific service category
 - Initiative Services include those services that are funded through EHE Initiative funding but do not meet the definition of a RWHAP service, as outlined in [PCN #16-02](#)
- Each EHE recipient will complete an RSR Recipient Report for their EHE funding

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Let's move on and take a look at how EHE and CARES Act funding will affect the 2020 RSR.

The Ending the HIV Epidemic (EHE) initiative awards are intended to expand access to HIV care and treatment for people with HIV who are newly diagnosed, not engaged in care, and/or not virally suppressed, as well as to provide workforce training and technical assistance. For the purposes of reporting in the RSR, this funding is considered Ryan White funding.

EHE recipients and subrecipients should report all HIV+ clients that receive services funded through the EHE awards in the 2020 RSR.

There is also a new EHE-specific service category, Initiative Services, which include those services that are funded through EHE Initiative funding but do not meet the definition of a Ryan White service, as outlined in PCN #16-02. This EHE Initiative Services category is meant to capture those services.

So for the 2020 RSR, each EHE recipient will complete an RSR Recipient Report for their EHE funding. But don't worry, this new RSR Recipient Report will function in exactly the same way recipient reports function for base funding awards.

CARES Act Reporting in the RSR

- CARES Act funding is considered RWHAP funding
- CARES Act recipients and subrecipients should report eligible RWHAP clients that receive services funded through the CARES Act in the 2020 RSR
- While CARES Act funding could be used to provide services to household members, those individuals **should not** be reported in the RSR
- Each CARES Act recipient will complete an RSR Recipient Report for their CARES Act funding

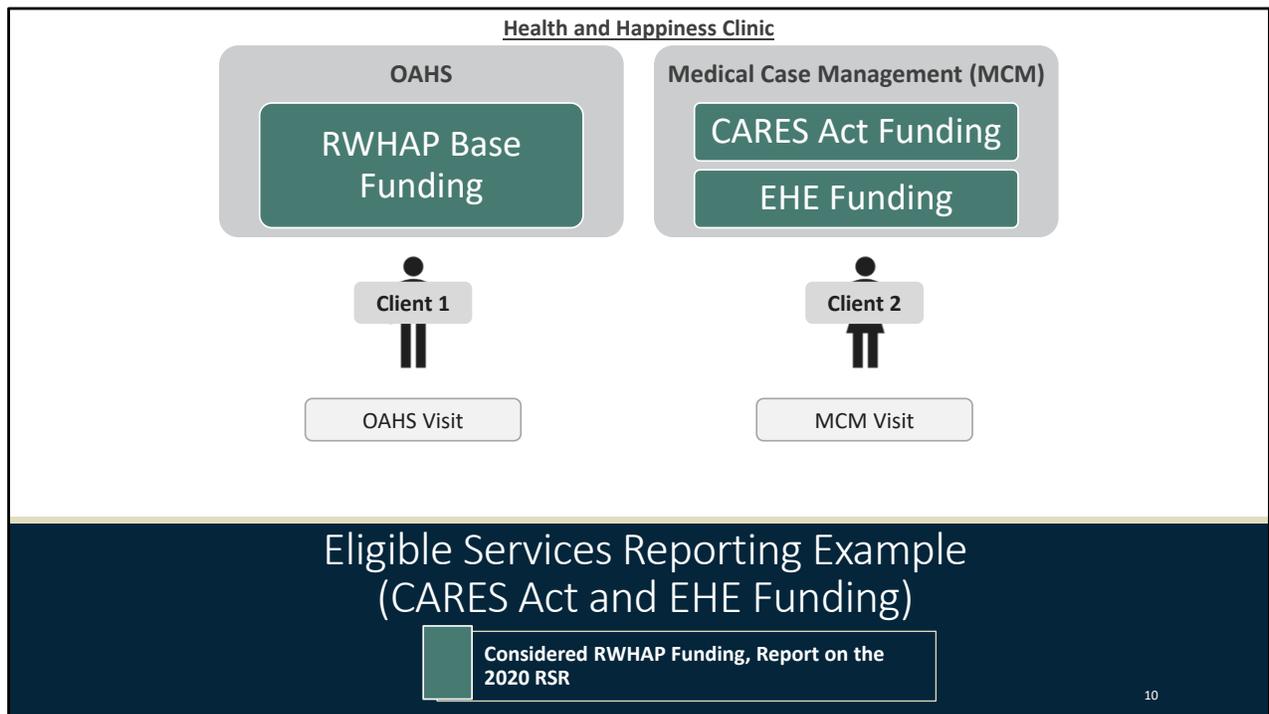
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The 2020 CARES Act provides one-time funding for eligible health care providers, including current Ryan White recipients to prevent, prepare for, and respond to COVID-19. For the purposes of reporting in the RSR, this funding is considered Ryan White funding.

CARES Act recipients and subrecipients should report eligible Ryan White clients that receive services funded through the CARES Act in the 2020 RSR.

Please note, CARES Act funding could be used to provide Ryan White core medical or support services to Ryan White-eligible clients and their household members. However, household members that receive services funded through the CARES Act should not be reported in the RSR.

And just like for EHE funding, each CARES Act recipient will complete an RSR Recipient Report for their CARES Act funding.



So let's return to our Health and Happiness Clinic example from a few slides ago, and look at two of the services we are providing. We provide OAHS with our Ryan White Base funding and Medical Case Management with both CARES Act and EHE funding.

Now as we have stated on the previous two slides, both CARES Act and EHE Funding, for purposes of RSR reporting, are considered Ryan White funding.

So Client 1 who came to our clinic and only received OAHS, which is funding only with our Ryan White base funding will absolutely get reported on the RSR.

Client 2, who was the recipient of Medical Case Management, will also get reported on the RSR, because even though no base funding went toward this service category, CARES Act and EHE funding did, making it a Ryan White funded service category.

The most important thing to remember is that CARES Act funding and EHE funding are considered Ryan White funding for the purposes of the RSR. If you remember that, it should clear up a lot of the confusion that may arise.

Provider Report: Service Information

Service Information

A field with an asterisk * before it is a required field.

* 7. Below is a list of all Ryan White HIV/AIDS Program services that were funded fully or partially using RWHAP funding, including EHE and CARES Act, and RWHAP-related (Program Income and Pharmaceutical Rebates) funding. Select the services that were delivered by your agency during the reporting period even if other funding streams in addition to the RWHAP funding, including EHE and CARES Act, and RWHAP-related funding were used to fund the service. In the table at the bottom of the form, select any additional services that your organization delivered through your organization's generated Program Income or Pharmaceutical Rebates.

Administrative and Technical Services

RWHAP Funding	EHE Funding	CARES Act Funding	Delivered	Service Category
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Administrative or technical support

Core Medical Services

RWHAP Funding	RWHAP-Related Funding (Program Income and Pharmaceutical Rebates)	EHE Funding	CARES Act Funding	Delivered	Service Category
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outpatient/Ambulatory Health Services
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oral Health Care
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Early Intervention Services (EIS)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mental Health Services
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Medical Case Management, including Treatment Adherence Services
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Substance Abuse Outpatient Care

So what do these changes mean for the RSR? As you can see from the screenshot on this page, the Service Information page of the Provider Report will now show a list of all Ryan White HIV/AIDS Program services that were funded fully or partially using Ryan White funding, including EHE and CARES Act, and Ryan White-related (Program Income and Pharmaceutical Rebates) funding.

You will still mark the services as Delivered as in previous years, however, the funding is just broken down into specific sources.

Providers Only – RSR Web Application

- Providers will no longer use the RSR Web Application to access their RSR
- Instead, they will log in through the Electronic Handbooks (EHBs)
- No action is required at this time, more information is forthcoming

The screenshot shows the login interface for the HRSA HIV/AIDS Bureau. At the top is the HRSA logo and the text 'HIV/AIDS Bureau'. Below that is a header: 'Welcome to the HAB ADR, AETC, PTR and RSR Web Application'. The login form includes fields for 'Username:' and 'Password:', with a link for 'I forgot my username/password'. Below the password field is a note: 'If you do not have an account, please use the Registration Form'. There is a dropdown menu for 'Select Application:' currently set to 'HAB RSR Web Application'. At the bottom of the form are 'Log In' and 'Clear' buttons.

Ryan White HIV/AIDS Recipients cannot access the HAB Web Application system through this login page. If you are a recipient you must access the HAB Web Application through HRSA's Electronic Handbooks (EHBs).

If you are a provider who receives funding from a Ryan White HIV/AIDS recipient, you may use this web system to enter, validate and submit your Ryan White HIV/AIDS Report (RSR), AIDS Drug Assistance Report (ADR), Program Terms Report (PTR), and AIDS Education and Training Centers (AETC) Report. To access the system, enter your **username** and **password** in the text boxes above, then click '**Log In**'. If you forgot your password, or need help logging in, call the HRSA Contact Center at **1-877-Go4-HRSA (1-877-464-4772)**.

And just a quick note while we are discussing the Provider Report. Providers only, that is providers who are not also recipients, who are used to accessing the RSR through the RSR Web Application, pictured on this slide, will no longer do so starting with the 2020 RSR. Instead they will access their RSR Provider Reports through the Electronic Handbooks, or EHBs. No action is required at this time, more information is coming soon from HAB.

Schema Changes on the RSR

1. Two new client-level data elements:
 - Is the client new?
 - Did the client receive services last year?
2. One new service category for EHE

Ryan White Services Report (RSR)
Web Application

Data Dictionary and XML Schema Implementation Guide
Version 3.9
August 27, 2020

Check out the [RSR Schema Guide](#) for more info

Submitted to:
HRSA
Health Resources and Services Administration
Office of Information Technology
5500 Fishers Lane
Rockville, MD 20857

I'm going to briefly go over the changes to the RSR client-level data to support the changes that Brian has explained during this presentation.

There are two major changes to the RSR schema for this year: first, there were two data elements added to file, which I will discuss in more detail later, and second there is a new service category for EHE services that James explained previously.

The best resource to help you understand how these changes impact your file is the Data Dictionary and Schema Implementation Guide. This document is updated any time there are changes to the RSR client-level data elements, and is posted on TargetHIV.

New Data Elements

Data Element	Report For Clients who Received	Allowed Values	Data Element Definition
New Client	Any Service	1 = No 2 = Yes	Indicate whether the client was new to the service provider in the year
Received Services Previous Year	OAHS, case management	1 = No 2 = Yes	If the client is not new, indicate if they received at least one service in the previous year

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I'll start with a high level overview of the new data elements for the RSR.

First, for clients who receive any service, you'll report whether the client was "new" during the reporting period. "New" means that this is the first time the client is receiving HIV services at your provider location for the first time – meaning for this upcoming report, they first received a service in calendar year 2020.

If you answer no to that question, and the client received outpatient ambulatory health services (OAHS) or case management services (including medical and non-medical case management), you will also report the next data element. For this, indicate whether the client received a service at your site in the previous year – in the next year's RSR, this would mean that they received a service in calendar year 2019.

Who Counts as a New Client?

Community HIV
Clinic



University HIV Clinic
Part D Youth Program Part C Adult Program



Services Last Year

Services This Year

Data Element	
New Client	--
Received Previous Year	--

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Let's walk through a couple examples to help us understand who counts as a new client.

For the purposes of reporting on the RSR, a "service provider" counts as an integrated HIV care delivery system. Integrated in key because HAB does not expect providers to access data on client services that are not already available to them. But, there are cases where providers operate multiple clinics – in the examples we're going to walk through today, University HIV Clinic has both a Part D Youth Program and a Part C adult program.

Who Counts as a New Client? Example 1, Part 1

Community HIV Clinic



University HIV Clinic

Part D
Youth Program
Part C
Adult Program



Services This Year



Matt

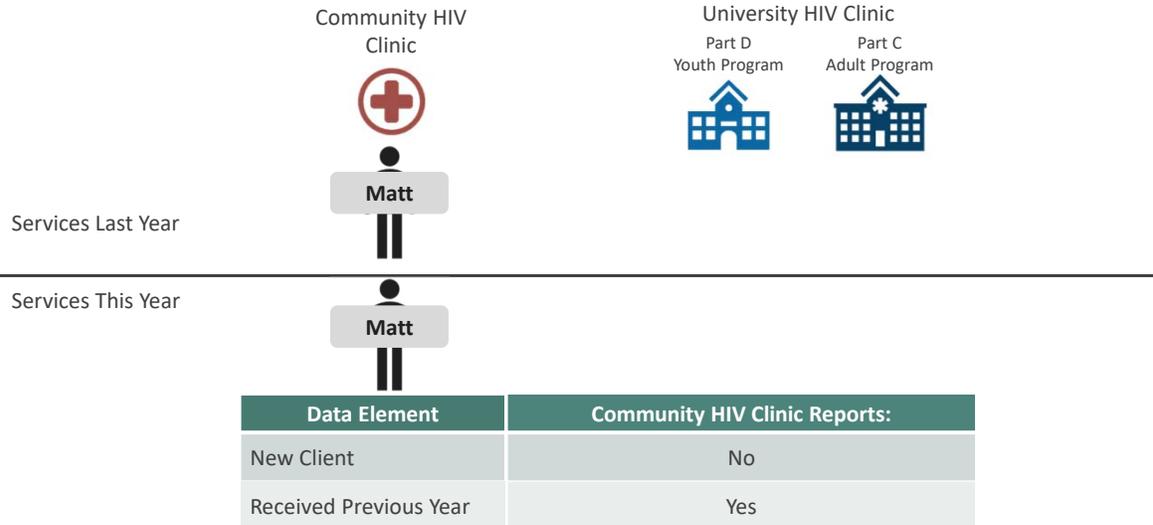


Data Element	Community HIV Clinic Reports:
New Client	Yes
Received Previous Year	Not required

In our first example, our client Matt comes into Community HIV Clinic for the very first time in the reporting year and gets oral health services and OAHS.

Community HIV Clinic would report that Matt is a New Client because this is the first year that he is receiving services on-site. And, because we already know that Matt is a new client a response for the second element is not required.

Who Counts as a New Client? Example 1, Part 2

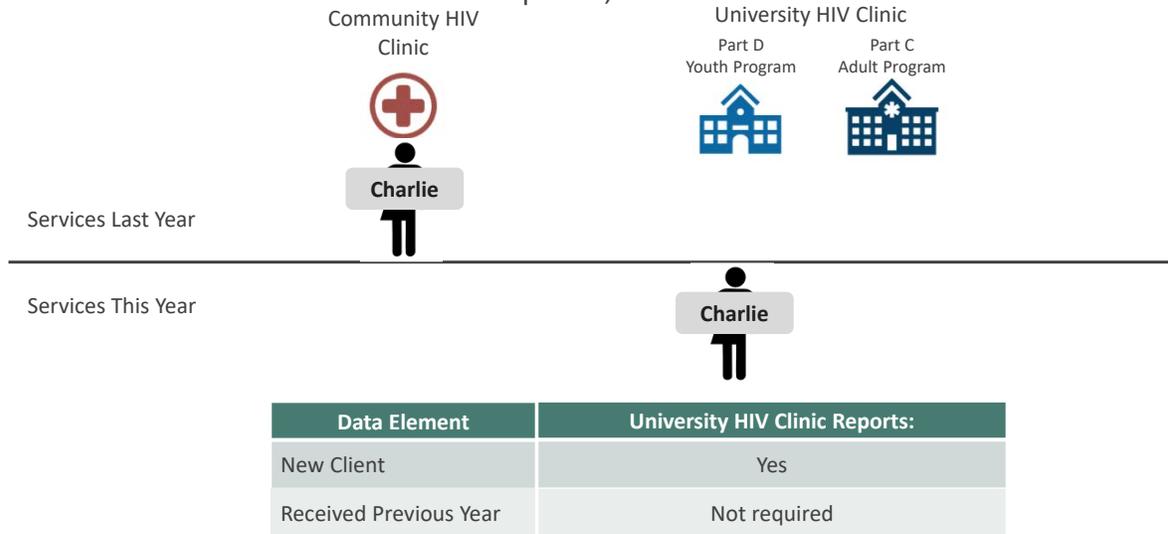


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On the next RSR, let's assume that Matt still receives the same services at Community HIV clinic. He's no longer a new client, so we'd report "No" for that element. Because he also received services last year, we'd report "yes" for that data element.

Who Counts as a New Client?

Example 2, Part 1



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Now that's we've gotten the basics down, let's talk through a couple more complex cases!

Our next client, Charlie, received OAHS services from Community HIV Clinic last year. They were accepted to a university away from home and enrolled in their university's Part D program for medical care.

HAB doesn't expect University HIV Clinic to know that Charlie went to another RWHAP provider for care in the previous year – so, for the purposes of the RSR Charlie is "new" to University HIV clinic.

Who Counts as a New Client? Example 2, Part 2

Community HIV
Clinic



University HIV Clinic

Part D
Youth Program



Part C
Adult Program



Services Last Year



Charlie

Services This Year




Data Element	University HIV Clinic Reports:
New Client	No
Received Previous Year	Yes

For our final example, Charlie was enrolled last year in University HIV Clinic’s Part D program. This year, they turned 25 so they have transitioned into the same University’s Part C program.

Because Charlie had received services within the provider’s health care system in the previous year, they are not considered “new” for the RSR – but, because the clinic knows they received services in the last year, University HIV Clinic would report “Yes” for the second data element.

Clarifications on Previous Year Services

- Can be anything within a service category funded by RWHAP Parts A-D, RWHAP-related, CARES Act, or EHE funding
- Do not have to be paid for by RWHAP (e.g., Medicaid covered OAHS)
- Do not have to be the same services received in the reporting year

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We've also gotten some questions about what constitutes a service in the previous calendar year. It's any service within a category funded by RW, Related, CARES Act or EHE funding. It's in the spirit of eligible scope.

Where for example, if a provider is funded for OAHS, but the client received a medical service directly funded by Medicaid in the previous year, that service would still count.

Finally, the type of service does not matter – for example, even if the client is receiving OAHS in the reporting year but got just transportation services in the previous year, you should still indicate that they received that service.

New EHE Service Category

- Report allowable RWHAP services that are funded by EHE as their corresponding service category
- New service category may be used for services provided with EHE funding that are outside of allowable RWHAP services
 - Like other services, report the number of visit-days that the client received EHE services

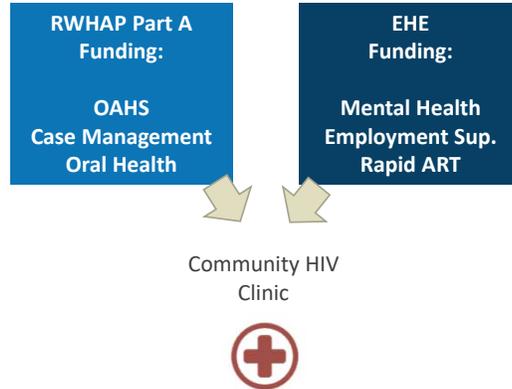
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Luckily, the new service category is a lot more straightforward.

If you use EHE funding to support and RWHAP allowable services, you should still report those services as you always did in the client-level data. For example, if you use EHE funding to support early intervention services, or EIS, you would report that as EIS in your file.

However, recipient may use EHE funding to support services, for example supportive employment, that are outside the services allowed under PCN 16-02. Any of these services should be captured in the “catch all” category for EHE funding.

EHE Service Category Example



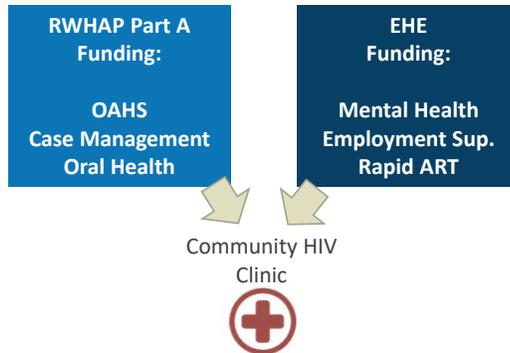
Client Receives:	Community HIV Clinic Reports:
OAHS on July 1	1 OAHS visit
Mental Health on July 1	1 Mental Health visit

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Let's quickly walk through a couple example to demonstrate what you should report for the EHE service category.

Let's say a new clients comes in for the first time and receives OAHS and mental health services. Even though mental health services were funded by EHE, Community HIV Clinic would report that as a mental health visit.

EHE Service Category Example (continued)



Client Receives:	Community HIV Clinic Reports:
OAHS on July 1	1 OAHS visit
Mental Health on July 1	1 Mental Health visit
Rapid ART Counseling on July 1 Employment Support on July 1	1 EHE visit

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As with other services, though, only 1 visit per day of a single type should be reported. If the client received Rapid ART Counseling and Employment Support services on the same day, only 1 EHE visit would be reported.

2020 RSR Submission Timeline

Date	Recipients	Subrecipients/Providers
Year-Round	GCMS is open	--
Monday, December 7, 2020	Recipient Report Start Date	--
Monday, February 1, 2021	Recipient Report Due Date	Provider Report Start Date
Monday, March 1, 2021	--	Provider Report Target Date
Monday, March 22, 2021	Return for Changes Deadline	--
Monday, March 29, 2021	All RSRs must be in "Submitted" status by 6pm ET	

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The Grantee Contract Management System (GCMS) is open year-round for recipients to enter their provider contract and service information.

The 2020 RSR Recipient Report opens on December 7.

February 1 is both the deadline for the Recipient Report and the opening date of the Provider Report.

March 1 is the target deadline for the Provider Report.

The last day recipients can return their providers' reports for changes is March 22.

The final deadline for the 2020 RSR is on Monday, March 29, 2021. All RSRs must be in "Submitted" status by 6pm ET or they will be marked as late in the system. No extensions will be granted.

	October 14, 2020	Overview of HRSA's Electronic Handbooks for Grant Recipients
	November 13, 2020	RSR Check Your XML Feature
	December 09, 2020	How to Complete the RSR Recipient Report Using the GCMS
	December 16, 2020	RSR TRAX

Webinar schedule available on [TargetHIV](#)

2020 RSR Webinar Series

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On October 14, tune in for An Overview of HRSA's Electronic Handbooks for Grant Recipients.

On November 13, we'll go over the RSR Check Your XML feature.

On December 9, recipients can find out How to Complete the RSR Grant Recipient Report Using the GCMS.

And then on December 16, you can learn about RSR TRAX, a useful tool for agencies to help create their client-level data files. An updated version of TRAX will be released prior to the webinar.

You can access this webinar schedule at any time on the TargetHIV website at the link shown on this slide.

TA Resources

- [HAB Website](#)
 - Policy notices, instructions, and HAB information
- [TargetHIV Website](#)
 - Training materials, manuals, and submission timeline
 - [2020 RSR Instruction Manual](#)
 - [2020 RSR Submission Timeline](#)
 - [RSR Data Dictionary and XML Schema Implementation Guide](#)
 - Subscribe for [DISQ Email Updates](#)

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Let's take a look at the TA resources available to assist you through the reporting period.

The HAB website is a great place to find policy notices and lots of general information about the Ryan White program.

The TargetHIV website has a wealth of materials on RSR data reporting including the 2020 RSR Instruction Manual, the Submission Timeline, and the Data Dictionary. TargetHIV is also where you can sign up for the DISQ E-mail updates.

TA Contact Information

Contact Information	Type of TA
Ryan White HIV/AIDS Program Data Support Phone: 888-640-9356 Email: RyanWhiteDataSupport@wrma.com	<ul style="list-style-type: none">• RSR-related content and submission• Interpretation of the RSR Instruction Manual and HAB's reporting requirements• Instructions for completing the RSR Recipient and Provider Reports• Data validation questions
DISQ Team Email: Data.TA@caiglobal.org TA Request Form	<ul style="list-style-type: none">• Determine if systems collect required data• Extracting data from systems and reporting it using the required XML schema• Data quality issues• TRAX and CHEX applications

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Should you require further assistance, here are the additional TA resources available to assist you throughout the year.

Ryan White Data Support addresses RSR-related content and submission questions including interpretation of the RSR Instruction Manual and HAB's reporting requirements, instructions for completing the RSR Recipient and Provider Reports, as well as data validation questions.

The DISQ Team addresses questions for those needing significant assistance to meet data reporting requirements including helping determine if recipient systems collect required data, assisting agencies in extracting data from their systems and reporting it using the required XML schema, and connecting agencies to others that use the same data systems. DISQ also deals with data quality issues and provides technical assistance for the TRAX and CHEX applications.

TA Contact Information (cont.)

Contact Information	Type of TA
EHBs Customer Support Center: Phone: 877-464-4772 Website	<ul style="list-style-type: none">• Electronic Handbooks (EHBs) registration, access, permissions, and web system navigation
CAREWare Help Desk Phone: 877-294-3571 Email: cwhelp@jprog.com TA Request Form	<ul style="list-style-type: none">• How to generate the XML file from CAREWare correctly• How to view a sample client summary file• Creating custom reports• Help with CAREWare 6.0

[RSR Data TA Brochure](#)

The EHBs Customer Support Center addresses RSR software-related questions such as registering for and navigating the EHBs, resetting passwords, and making sure that you have the right permissions to complete the reports.

And for assistance working with CAREWare, contact the CAREWare Help Desk.

You can find all of this information in the RSR Data TA Brochure available on the TargetHIV website at the link on this slide. And as always, if you are unsure of who to contact, feel free to reach out to any one of the resources here and we'll be able to help direct you to exactly where you need to go.



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To learn more about our agency,
visit

www.HRSA.gov

 Sign up for the HRSA eNews

FOLLOW US:    

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

I'd like to thank everyone for joining us on today's presentation.