

Summary of First Quarterly NextGen Systems User Call

Call Date: September 26, 2019

A 2019 survey conducted by the [DART team](#) on Electronic Health Records (EHRs) and [the Ryan White HIV/AIDS Program \(RWHAP\)](#) found that NextGen is a commonly used system among RWHAP providers. On September 26, 2019, the DART team hosted the first quarterly meeting with providers who use NextGen to discuss strategies, challenges, and best practices for using NextGen to complete the [RWHAP Services Report \(RSR\)](#). Twenty-nine participants attended the webinar, most of whom were current NextGen users (68%) or considering NextGen in the near future (21%).¹ This memo describes how NextGen users create the RSR and employ strategies to capture RSR-required fields.

Contact information regarding attendees has been shared on the last page with participant permission. If you would like to be connected with another NextGen user not listed in this document, please email the [DART team](#). According to NextGen, if you need support, “open a case in the success community so that requests for support can be properly triaged and directed as needed.”

Creating the RSR

The call primarily focused on strategies used by participants to create the RSR. Based on a webinar poll of 18 respondents, three users create the RSR directly from NextGen with the RSR Utility Tool, and another two users use NextGen data extracts and TRAX. Six respondents rely on an RSR-Ready System: half export data from NextGen and half manually enter data. Most commonly, respondents used another system or were unsure (7).

NextGen RSR Utility Tool

- An attendee reported that there is a NextGen RSR Utility that can be purchased to help standardize data entry and create the RSR. There is a lot of work involved. A user would have to pay for the license to use the RSR export, have a staff member get everything to match the RSR, and train their team to use NextGen templates.
- Another attendee stated that the utility is a good investment, but it takes time and IT support.
- An attendee stated that the utility costs about \$10,000. There have been some issues around where the utility pulls the data, and users would have to make sure the data gets mapped correctly. Furthermore, the tool has specific RSR templates that have to be used by clinicians. However, there are long term maintenance issues with this tool as data sometimes drops off during extract. Furthermore, there has not been a lot of assistance from NextGen in how to use the utility and understanding where the data are pulled from.
- Another attendee stated they have the utility but have not submitted an RSR with it. Instead, they have used TRAX and ARIES. They plan to use it going forward but have struggled with its functionality.
- There have been struggles in communicating with NextGen staff because of high staff turnover and no dedicated person to provide assistance to users. Furthermore, DART has contacted a representative at NextGen and was assured that they are working on 2019 changes and are open to further discussion. DART will continue to work with them to make sure they are getting the 2019 changes in their function. NextGen encourages users to open tickets through their [Success Community](#) to receive support most efficiently.

¹ A smaller proportion was unsure (11%).

- An attendee notified the group that there has been a recent update to the utility. This attendee found out by chance and has scheduled a call to be updated to the current version. There is an issue with NextGen updating the utility tool without notifying users. The DART Team informed attendees that many EHR systems do not know how many of their users are Ryan White recipients and therefore find it difficult to notify their users of updates.
- Also, DART has had multiple providers reach out and say they can't afford tools within EHRs that create the RSR. DART advises users to conduct a cost analysis and look at how much time is being spent on manual data entry and potentially make the argument that the cost of the tool could be offset by the savings in labor time.
- There was unanimous agreement to have NextGen do a demo for the utility. DART is working to schedule a NextGen demo. In the meantime, users can access a recorded NextGen RSR demo [here](#).

Using an RSR-Ready System

- An attendee stated that they have supportive IT staff who can build reports for any requests. They can extract information from NextGen and make reports every month. Data from those reports are then manually entered into CAREWare because their facility has used CAREWare since its inception, so CAREWare is how their data has always been stored. Also, they use CAREWare because they are a recipient and a subrecipient and it is used as a tool to create the RSR and to get other reports. They receive state funding and they have their own state CAREWare system they enter data into as well. However, there is hope that this process can be automated to save time.
- Another user received some support from IT, which builds the SQL reports for them to convert to .CSV files; they import that data into TRAX for the XML. However, this process has been difficult.
- Another attendee stated that they use Azara DRVS, which is a Centralized Data Reporting and Analytics Solutions for Community Health Centers (CHCs) and health center networks and is used to facilitate care transformation, drive quality improvement, aid in cost reduction, and simplify mandated reporting. They use Azara DRVS to generate reports to avoid paying additional staff for data entry. More information on Azara DRVS can be found here: <https://azarahealthcare.com/solutions/azara-drvs/>.

How to Use TRAX

A suggested strategy was to get data extracts and manually convert them into .CSV files and upload them into TRAX. A user inquired whether TRAX is the same as using HL7 Mapping. No, TRAX is a separate tool that HAB created to support the RSR. A user imports a folder that has 12 .CSV files into TRAX and generates the XML file. The hardest part of using TRAX is getting your data into the 12 .CSV files. That involves extracting reports that you can generate from your EHR and conducting manual manipulation of the data reports. The DART Team just updated the package and it can be found on this link: <https://targethiv.org/library/trax-rsr-application-and-manual>.

NextGen Issues

Some users have been having data extraction issues. NextGen is potentially pulling data incorrectly for clients in the following ways:

- Multiple viral load values have been pulled for the same client on the same day with different values.

- Over counting service visits as outpatient care. For example, the number of outpatient services was around 36,000 for a facility with 1,300 clients. Case management visits and other services are potentially being pulled as outpatient visits.
- Pulling HIV diagnosis dates that were outside of the reporting period.

The DART team is working with NextGen to resolve these issues.

Tips for New Users

There was a brief discussion about best practices for NextGen users.

- One attendee stated that support from IT is essential to completing the RSR. Users should have their clinical team use the Ryan White template every time there is a visit. Continuous education of your staff with a lot of monitoring and oversight to make sure they are doing the reporting correctly is important as well. One clinic stated that they created a job aide and introduced it in their meetings with clinical staff to help facilitate their familiarization with the Ryan White templates.
- Another user contracts with a company called [OSIS](#) for NextGen support. If they have issues with NextGen, need training, need data exports into a different system (i.e. Casewatch), or need a special report, OSIS they will act as intermediaries. If OSIS can't solve the problem on their end, they will contact NextGen. Attendee Contact Information