Using CAREWare for RSR Reporting

Ryan White HIV/AIDS Program Services Report (RSR)

HIV/AIDS Bureau

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Today's Webinar is Presented by:

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Today's Webinar is presented by Steve Overman from jProg and myself, Debbie Isenberg from the DISQ team. **We support data collection, management and reporting for HAB, including several reports that we'll talk about in today's session.** Today, we're going to talk about **producing the RSR with CAREWare.**

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 Isia is going to chat out the link to a document right now that includes the locations of all the resources mentioned in today's webinar.

At any time during the presentation, you'll be able to send us questions using the "Question" function on your settings on the bottom of the screen. You'll also be able to ask questions directly "live" at the end of the presentation. You can do so by clicking the "raise hand" button (on your settings) and my colleague Isia will conference you in.

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), the U.S. Department of Health and Human Services (HHS), or the U.S. government.

The DISQ Team is comprised of CAI, Abt Associates, and Mission Analytics and is supported by HRSA of HHS as part of a cooperative agreement totaling over $4 Million.	jProg is the developer of CAREWare and is supported by HRSA of HHS as a part of a contract totaling over $3.6 Million.

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Using CAREWare for RSR reporting - Agenda

- What makes a client appear on the RSR from CAREWare data entry?
- Data entry
- Ways CAREWare can help you with RSR
- Creating the RSR file from CAREWare
- Questions

Hi everyone, my name is Steve Overman, and I'm the Senior Program & Interface Consultant at jProg. Today we'll be talking about using CAREWare for RSR reporting. Here are the points we'll be covering today:

What makes a client appear on the RSR from CAREWare data entry?
The data entry itself, and where data lives that is used to collect and calculate values for the RSR
Descriptions and demonstrations of multiple ways CAREWare can help you collect and check data for the RSR
How to create the RSR file from within CAREWare itself
Then, we will open up for questions

Let's start with a poll to gauge the attendees' history of CAREWare with the RSR.

How many times have you used CAREWare to complete your yearly RSR requirement?

Never
Once
Twice
Many, many times

{Reflection re: RSR experience of users}

What makes a client appear on the RSR from CAREWare data entry?

- The client is entered in CAREWare.
- The client is marked eligible in CAREWare.
- The client received a service from a category the agency was funded for by Ryan White, Ryan White Related, or EHE Initiative funding.

Ok, let's get started by talking about what criteria are necessary to make someone appear on the RSR?

First, the client must be in CAREWare. Every client must be entered with a first name, last name, date of birth and a gender.
Second, the client must be marked as eligible for a Ryan White funding funding source during the calendar year of the RSR, and during one of those periods of eligibility…
The client must have at least one visit of a service category for which the agency received Ryan White, Ryan White Related, or EHE Initiative funding.

CAREWare data entry for RSR

- RSR Values vs CAREWare data entry.
  - More information about exactly how CAREWare calculates these values can be found at RSR Client-level Data Elements.
- RSR Minimums vs recipient requirements.
- Data entry requirements determined by service category utilized.
  - More information can be found in Appendix A of the RSR Manual.

Now let's talk about data entry.

When we talk about data entry in CAREWare for RSR, it is important to note a few things:

CAREWare calculates some values based on data entry rather than discrete fields. For example, it checks on the enrollment date to determine if the client is a new client in this RSR year. We have documentation about how these are calculated available in the document RSR Client-level Data Elements. A link is available at the end of the slides, too.

Your recipient may require more data entry for clients than RSR minimums. You should follow the guidance of your recipient.

Finally, specific data points needed for RSR are determined by the service categories the client has utilized. Outpatient Ambulatory Health Services have the most requirements due to the required clinical data, followed by EHE Initiative services, Medical Case Management, and Non-Medical Case Management. All core Medical Services have a requirement of health coverage data collection, and support services have the least data collection requirements.

This is Appendix A of the RSR Manual, which is sometimes affectionately referred to as "the meatball chart." It shows each service category and which data elements are required in the file for clients who receive those services. Again, Outpatient Ambulatory Health Services have the most data requirements, followed by EHE Initiative Services, Medical and Non-Medical Case Management services, then other Core Medical Services, followed by Support Services.

There is a link called RSR Manual located at the end of this PowerPoint where a copy of this chart can be accessed.

Data entry

- Where does data live in CAREWare used to calculate values for the RSR file?
  - **Demographics**
    - Demographics
      - Personal Info > Gender
      - Contact Information > ZIP Code
      - Race/Ethnicity
        - Hispanic Ethnicity
        - Racial subgroups
      - HIV Risk Factors
      - Vital and Enrollment Status > Enrollment Date
      - Eligibility
      - HIV Status

In the Demographics screen: Personal Info > Gender (this is a self report of gender by the client.) Contact Information > ZIP Code (this is used for the ZIP code report, that is created separately from the RSR client file.)
Race/Ethnicity, including Hispanic Ethnicity and Racial subgroups. (This is a client self-report. There may be multiple races, racial subgroups, and Hispanic ethnicities selected. Selecting other or leaving race blank will result in comments being necessary for RSR.)

HIV Risk Factors are the risk factors involved in the client's initial infection with HIV. There may be multiple.
Vital and Enrollment Status > Enrollment Date. This is the first date a client received services at the agency. If the client leaves service and returns later, this date does not change.

Eligibility – this is where periods of eligibility for each funding source are tracked in CAREWare. Think of each funding source them as an On/Off switch per funding source. Whatever value has the latest date "wins." If you go back one screen, you will see the current eligibility status of the client reflected to the right of the eligibility button. Clients who have no eligible periods in the year will not report on the RSR at all. This is the first thing to check should you create an RSR file and the number of total clients seems low.
HIV Status – this is the client's HIV status and date. If the client has CDC defined AIDS, s/he will need an AIDS diagnosis date as well.

Data entry, continued

- Minimums for the RSR
    - Annual Review
        - Annual Screenings > Housing Arrangement
        - Insurance Assessments
        - Poverty Level Assessments
    - **Services**
        - Services
    - **Clinical Information**
        - Medications
        - Labs > CD4 and Viral Load
        - Screening Labs > Syphilis
        - Pregnancy Status > First day of LMP and Pregnancy Outcome

Annual Review – as the name states, the RSR requirement is a yearly assessment of these three data points. You may (and probably do) have requirements to collect them more frequently.

Annual Screenings > Housing Arrangement – this is where the client's housing status is collected. It should be updated whenever there are known changes, such as someone becoming homeless, or a homeless person getting housed.
Insurance Assessments – CAREWare collects health coverage as a Primary and Secondary coverages. All health coverage types should be entered along with the date of the assessment.
Poverty Level Assessments – this is where the household and individual incomes are collected. A federal poverty level is calculated based on data entry. Services – the client's services are entered here…the date of service, contract, and subservice need to be entered for the record to be able to save. Medications – the client's medications are entered here. The data entry minimal requirements to save the record are: prescription start date,

medication type, units, strength, and frequency. For an ARV medication to "count" for RSR, it be active in the reporting period. It can't be end dated before the reporting period, nor can it be absent completely.
Labs > CD4 and Viral Load – there are two RSR required labs. CD4 and Viral Load. Both will need a lab date, the name of the lab, and the result. Screening Labs > Syphilis – There is one screening lab, syphilis. You will need to enter the screening date and result. If a client is not medically indicated for a syphilis screening, you should mark the client as NMI yearly.
Pregnancy Status > First day of LMP and Pregnancy Outcome – Pregnancy status for female clients minimally requires the first day of LMP and Pregnancy Outcome.

For more information on how CAREWare uses data entry to calculate and collect RSR values

- RSR Client-level Data Elements

The previous information was based on documentation you can review at RSR Client-level Data Elements which is located in the RSR Documents hyperlink at the end of this PowerPoint.

Knowledge Check #1

A client's required data elements for RSR depend on the service categories the client utilizes. In terms of required data elements, rank these service categories, from most required data elements to fewest required data elements:

1. Outpatient/Ambulatory Health Services
2. Early Intervention Services
3. Food Bank/Home-Delivered Meals
4. Medical Case Management

In this list, the rank order from most to least data elements would be:

1. Outpatient/Ambulatory Health Services
2. Medical Case Management
3. Early Intervention Services
4. Food Bank/Home-Delivered Meals

Refer to Appendix A of the RSR Manual for more examples and more information.

Ways CAREWare can help you with RSR

1. Guiding you during data entry
2. Providing different ways to check data
3. Giving you the tools to create the files you need to submit

CAREWare collects data and has multiple ways to guide you in your data entry to make sure your RSR is the best possible.

We're going to talk about three ways CAREWare does this.

First, during the year, CAREWare shows you places where you may need to complete data entry or that you may have made a mistake. This gives you a real-time opportunity to correct problems.

Next, CAREWare has customizable reporting features to help you identify issues with data entry using custom reports.

Finally, the RSR module itself creates the very file you will submit with RSR. This allows you to see if the counts seem right and provide an opportunity to review multiple validation checks on the data to correct as well.

Ways CAREWare can help you with RSR

- Client page RSR validation—several validations for the year at a glance
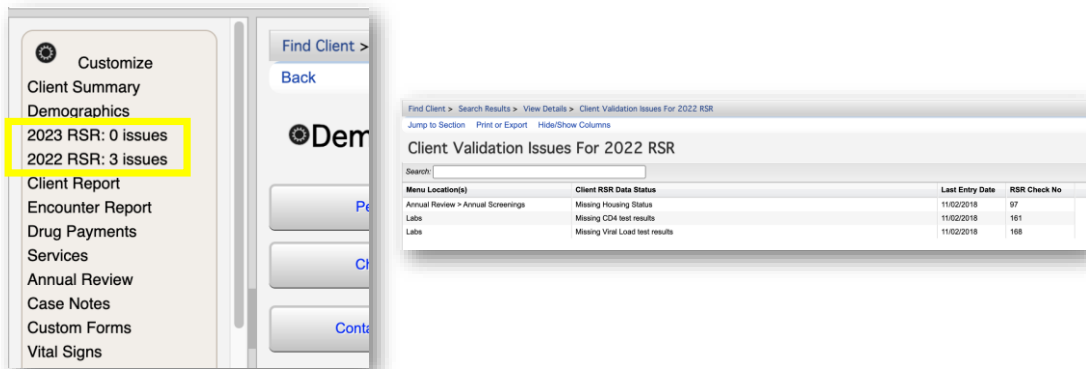
First, let's look at a recently added, client-level validation that checks for problems with data while you're on the client record. These are listed for the current and previous calendar year on the left side of the screen in CAREWare's main menu. This allows the user to be notified during the year about problems with client records so that they can be corrected well before the RSR submission deadline.

Clicking into the hyperlink gives you the ability to see what's missing and jump right to the section to enter the data as you verify it in your EMR or case management system.

Keep in mind that the RSR is a calendar year report, and these checks are the same. All an agency's clients do not come to the office on January 1 to get their labs and annual recertification screenings. So, some of these RSR checks may not really be relevant until later in the year. These are not all possible validation or completeness checks. It is important to use these together with other tools to ensure you have the best possible RSR—as complete as possible and problem-free as possible.

Ways CAREWare can help you with RSR

- Quality checks—provide real-time suggestions for you to review

CAREWare has multiple quality checks during data entry as well. In these examples, we see that CAREWare is reminding us to enter an AIDS Diagnosis date, that the client isn't marked as eligible when s/he is being rendered a service, and finally that the client has not had a poverty level assessment completed in over six months. Most of these quality checks do not happen when data is imported rather than hand-entered, so this is one case where manual data entry can have an advantage over imports.

Ways CAREWare can help you with RSR

Custom Reports for Data Quality

RSR Client has Service and Missing Eligibility
RSR Eligible
RSR Not Eligible
RSR Validation Check issue: Eligibility status date is after service date
RSR Validation Check issue: OAHS date is before HIV date

Many agencies use custom reports to identify data that may not necessarily be caught with canned reports and quality checks…or that have been missed with those tools. There is a bit of variation with these types of reports due to jurisdictional differences, so they are not "baked into" CAREWare. Typically, these reports will focus on services that are rendered outside of a period of eligibility.

It is important to show the full scope of how your organization uses Ryan White funding, and it is a common error to forget to update a client's eligibility in CAREWare. Remember, if a client does not have eligible services within a period defined as Ryan White eligible in CAREWare, he or she will not report on the RSR. Most of these reports will also require a calendar year date span to work correctly.

jProg has a few reports uploaded that you can download from our Custom Reports for Data Quality hyperlink noted toward the end of the slideshow.

Ways CAREWare can help you with RSR
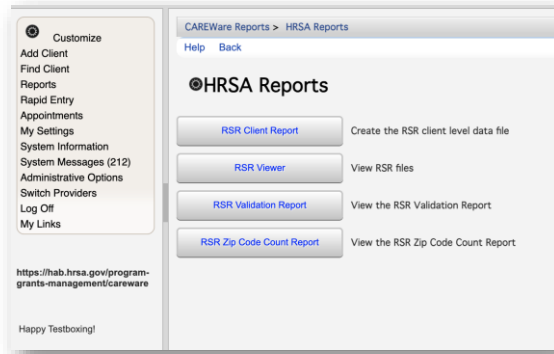
Many people create and check their RSR data in three steps:

1. Create the Client Report
2. Pull the Client Report into CAREWare to see it using the RSR Viewer
   1. This allows you to see if numbers "look right" and review unknown, missing, and no values.
3. After the report is reviewed and you've got all the data looking as good as you can, then run the validation report to run several checks and validations that identify data changes that are necessary for your data to be submitted or that will result in your having to add comments.

Ways CAREWare can help you with RSR

- Client report

Finally, The RSR Client Report allows you to review what's going to be submitted. You can check for Unknown, Missing, and "No" values here to more fully complete your RSR.

Ways CAREWare can help you with RSR

• Validation report

The validation report provides a summary of all clients and checks for problems with the data. It is located in Reports: HRSA Reports: RSR Validation Report.

For each row, we see a client count for each check. We can select the row and then View Client List to go into the clients' records and add information as we verify it from the EMR or case management system.

Knowledge Check #2

What has the potential to create the most impact on the number of clients you report on the RSR?

Forgetting to enter the ZIP codes
Forgetting to enter annual reviews
Forgetting to update periods of eligibility
Forgetting to enter the client's ethnic subgroup(s)

Eligibility

The answer is forgetting to update periods of eligibility. Remember that without Ryan White eligibility that encapsulates HRSA defined eligible services, a client will not report on the RSR at all. A clue to this will be a warning in CAREWare when you enter the client's services stating, "The client is not eligible to receive Ryan White services as of {the date.}"

And here we see the quality check if a Ryan White service is entered in a date outside of Ryan White eligibility.

Creating the client report in CAREWare (and a bonus sneak preview)

- Create the XML
- Import into CAREWare to review
- Preview of a new feature to help with your RSR reporting

To create the special XML file that you will submit to the Electronic Handbook, go to Reports: HRSA Reports: RSR Client Report. Select the RSR submission year and Select Run. Save the file to a secure network or local location.

To view the file, go back or navigate to Reports: HRSA Reports: RSR Viewer. Select Choose File and select the file you created. Then, select "View RSR File"

In the list view, keep an eye out for any values in Unknown or Missing for the different data points. These may be things you can complete to make your data the best possible. To view clients with these statuses, select the row, then "View Client List."

Make a note of the number of clients in the very first row, Total Clients (any service.) We will compare this number with the number of clients in the ZIP code report.

Remember that correcting these values does not update the file. When you have completed all the corrections and changes, create another RSR XML file to incorporate the changes.

After you have done all your changes through the client viewer, run the validation report to check for anything you may have missed. Correct these issues.
Finally, when your data is as complete and error free as possible, create a final Client File, naming it something that denotes it's the submission file. The next steps for submission to EHB are outside the scope of this presentation, but there are several TA resources on TargetHIV to help you with this.

When Can I Get the RSR Build of CAREWare?

The RSR build of CAREWare is anticipated to be released by the second half of **November.**

One of our most popular questions at the CAREWare Help Desk is when will the RSR build of CAREWare be ready. Every year, our programmers update CAREWare to comply with changes to RSR and to add features and fix bugs. This year, our target release for the RSR build is during the second half of November. We will announce the build's availability on the CAREWare Listserv.

Additional jProg Resources for the RSR and CAREWare

- jProg Happyfox Knowledge Base
  - CAREWare Knowledge Base
- Dedicated jProg Help Desk Knowledge Base articles related to the RSR
  - RSR Documents
  - Custom Reports for Data Quality

I'd like to give you the hyperlinks to get to some jProg CAREWare resources.

First, we have our knowledge base. The link is called CAREWare Knowledge Base

Second, there are multiple articles and files to help you with the RSR. These are located in the hyperlinks:

In the hyperlink RSR Documents, you will find a copy of the "meatball chart," the RSR-to-CAREWare data elements crosswalk, a copy of the RSR instruction manual, and an RSR-PDI-DTM field map for those of you using the data translation module to import data from external sources.

In the hyperlink Custom Reports for Data Quality, you will find eight different custom report templates that you can import. These mostly deal with eligibility checks. Remember…if you don't have a client's eligibility accurately reflected in CAREWare, your RSR client counts and visit counts will be off.

TA Resources

- The DISQ Team:
  - Data.TA@caiglobal.org
  - Sign up for the DISQ listserv
  - Submit a DISQ TA request

- Ryan White HIV/AIDS Program Data Support:
  - RyanWhiteDataSupport@wrma.com
  - 888-640-9356

- EHBs Customer Support Center:
  - 877-464-4772
  - Submit an EHBs TA Request

- CAREWare Help Desk:
  - cwhelp@jprog.com
  - 877-294-3571
  - Join the CAREWare listserv

Before we finish up, I'd like to review the available technical assistance. The DISQ Team addresses questions for those needing significant assistance to meet data reporting requirements. DISQ also deals with data quality issues, as well as providing TA on TRAX and support in creating documentation.

Data Support addresses RSR-related content and submission questions. Topics include: Interpretation of the Instruction Manual and HAB's reporting requirements; Allowable responses to data elements; Policy questions related to the data reporting requirements; and Data-related validation questions.

The EHBs Customer Support Center addresses software-related questions. Topics include: Electronic Handbook (EHB navigation, registration, access and permissions and Performance Report submission statuses.

Finally, the CAREWare help desk is your best resource for any TA requests related to CAREWare. We encourage you to register for the listserv to join the conversation with other CAREWare users across the country.
Most importantly, there is no wrong door for TA – if you're not sure who to contact, we're happy to refer you to where you need to go!

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And then lastly, to find out more about HRSA, check out HRSA.gov. I'd like to thank everyone again for joining us on today's webinar and now we'll move onto 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.
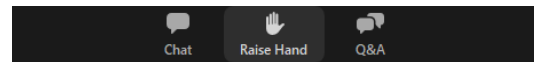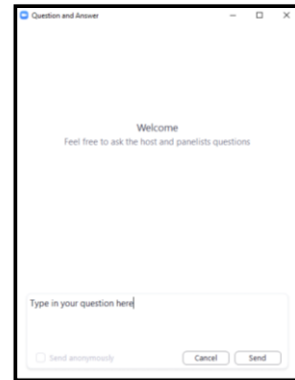
And now to your questions – but first, I would like to remind you that a brief evaluation will appear on your screen as you exit, to help us understand how we did and what other information you would have liked included on this webinar. We really appreciate your feedback, and use this information to plan future webinars. My colleague Isia 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 "Q&A" button on your control panel on the bottom of your screen. You can also ask questions directly "live." You can do this by clicking the "raise hand" button, which is also on your control panel. If you raise your hand, we'll be able to allow you to unmute and ask your question. 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 via email to follow up. Sometimes we need to do some follow-up before providing you with a final answer, so stay tuned for the written Q&A as well for answers to all of your questions.