

Q&A Summary for RSR, The Basics, 9-10-14

#	Questions	Answers
1.	Can you provide the website once again with the RSR manual?	The RSR Instruction Manual is available at: https://careacttarget.org/content/ryan-white-hiv-aids-program-services-report-rsr-instruction-manual
2.	What is the website for future RSR webinars?	The 2014 RSR Webinar Schedule is available at: https://careacttarget.org/category/event-type/webinar-online-event
3.	What period does the RSR cover?	The RSR reporting period is from January 1 st to December 31 st of the calendar year. In 2015, you are reporting on data from 1/1/2014 to 12/31/2014.
4.	We have patients that receive care from our providers, but services are not paid for with Part C or Part B grant money (the visits are paid by insurance). How should I categorize these services in CAREWare to get accurate RSR information?	For the most accurate and up to date answers to CAREWare questions and to register for the CAREWare listserv visit: http://hab.hrsa.gov/manageyourgrant/careware.html You may also contact the CAREWare Help Desk M-F 12pm-5pm ET at 877-294-3571 or cwhelp@jprog.com
5.	Can you send a copy of this webinar?	A recording of this webcast or corresponding documents will be available at: https://careacttarget.org/library/rsr-basics-webcast-1
6.	Will the Oct 1 webinar cover some of the changes that include the Unknown showing up as missing data?	Yes, the October 1st webcast will include several reporting updates. To register for the webcast visit: https://careacttarget.org/calendar/more-whats-new-2014-reporting-clarifications-and-instruction-manual-highlights
7.	In regards to having Ryan White Part B and C funding, will I have to complete two reports?	If you are a grantee with both a Part B grant and a Part C grant, you would need to fill out 2 grantee reports, one for each of your grants. However, if you are a provider that receives Part B & Part C funding, you will only complete 1 RSR provider report that contains all of your data.
8.	We get funds from our local hospital, who in turn receives funds through an organization that is funded directly through HRSA. What does that make my organization? A 2 nd level provider?	In that instance, the hospital is acting as a fiscal intermediary for the grantee and you're a 2 nd level provider. However, if the hospital is also a grantee and funds you directly, then you are a multi-level provider. Contact Data Support with questions at 888-640-9356

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9.	If I receive funding from Part A & Part B, would we be considered a 1 st level provider?	If you receive funds directly from the Part A & Part B grantees, you are a 1 st level provider. If you receive funds only from fiscal intermediaries, you are a second level provider. If you receive funds from both a grantee and a fiscal intermediary, you are a multi-level provider.
11.	I can't find it at the moment in the manual, but I recall something about one instance of service provision per HAB category per client per day being acceptable in the report. If this is correct, then does it follow that if a client has multiple labs run on one single service date, they should be reported as one service rather than each lab reported as an individual service?	If a person receives multiple labs on one day, associated with one service visit, it should be counted as one service visit not multiple labs. Lab-only visits are not reported in the RSR, and labs should be associated with a medical service visit regardless of when they occur. For more information, see page 57 of the 2014 RSR Instruction Manual or contact Data Support for clarification.