

RSR
Ryan White HIV/AIDS Program
Services Reporting System

Part II:
Completing the Provider Report

MC

Welcome to this webcast: “Completing the Provider Report.” This is Part 2 of a 3- Part series designed to familiarize grantees with the online RSR Reporting System. Thank you so much for joining us today!

My name is Michael Costa. I am a member of the SPHERE/Abt Team, one of several groups engaged by HAB to provide training and technical assistance to Ryan White grantees during the implementation of the RSR. I will introduce our speakers and facilitate the question and answer period at the end of the presentation. At any time during the presentation, you will be able to send us questions using the “Chat” function. You will also be able to call in to ask questions directly (“live”) at the end of the presentation.

Today’s webcast is presented by Stefani Olsen of the SAIC team and Maria Jackson Hittle of the WRMA/CSR team.

After the presentation we will take questions from both the “chat” function and over the phone. We hope that all of you will use this opportunity to ask any questions that you have about completing the Provider Report.

RSR System Webcasts

- **RSR System**
Part I: Completing the Grantee Report
June 29, 2009
http://www.careacttarget.org/rsr_archive.asp
- **RSR System**
Part II: Completing the Provider Report
Today
- **RSR System**
Part III: Managing the RSR Deliverable
Tuesday, July 14, 2009
1:00 - 2:00 pm ET

MC

On June 29th, there was a webcast about completing the Grantee Report which showed the RSR system features frequently used when completing that component of the RSR. In addition to providing a review of how to complete the online Grantee Report forms, this web cast provided participants with a "first glimpse" of the new Grantee Report XML upload feature. If you missed this presentation, you can find an archived copy of the slides on the TARGET Center Web site.

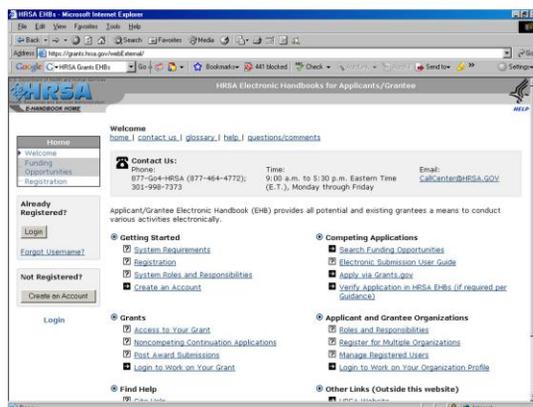
Today's webcast will provide you with the information you need to know in order to successfully complete the Provider Report. It is designed to provide you with a "guided tour" of the RSR System and the features frequently used when completing this component of the RSR. We hope that by giving you this opportunity, you will be comfortable when it comes time to complete the Provider Report.

The July 14th webcast, will present Part 3 of the series: Managing the RSR Deliverable. This webcast will focus entirely on the RSR System features grantees use to administer their deliverable. Grantees will be shown how to review, approve, and – if necessary – return a Provider Report. You'll learn how to track the status of individual Provider Reports as well as your overall RSR deliverable status.

Again, today's webcast will provide you with the information you need to know in order to complete the Provider Report. If you find yourself with a question related to completing the Grantee Report, we encourage you to review the archived presentation and then contact the appropriate help desk. If you have questions about managing the RSR deliverable, please be sure to attend the upcoming session.

Stefani Olsen will begin today's discussion with an explanation on how to access your Provider Reports.

Accessing the Provider Report as a Grantee



Grantees access the RSR Web system through the EHBs at
<https://grants.hrsa.gov/webExternal/Login.asp>

SO

ALL grantees, including grantees that provide services (grantee/providers), access the RSR System via the HRSA Electronic Handbooks (EHBs) at the URL shown:
<https://grants.hrsa.gov/webExternal/Login.asp>.

Notices/Tips while the screen is loading:

- There will be a slight delay as we switch over to the RSR application. Your screen may go blank for a few moments while the system connects.
- The information you're about to see is targeted to grantees, the provider interface is slightly different. If there is interest in the community, we'll plan another webcast with providers as the target audience.
- The data in the Provider Report you're about to see are fictitious and are provided for training demonstration purposes only.
- Continue to send your questions via the chat function. You can open the chat interface window by selecting the oval "callout" button in the Webex toolbar on the lower right hand corner of your screen. To ensure that a response to questions submitted via chat are posted on the TARGET Center web page, please be sure to address your questions to "all participants." All other message types are considered "private" messages and the questions are not saved by the system.

Once logged into the EHB:

1. Select "View Portfolio" from the left navigation menu.
2. Find the Ryan White grant program in your Grants list, and click on "Open Grant Handbook."
3. On your Grant Menu (left navigation Menu), under Submissions, select "Performance Reports."
4. In your list of Performance Reports, find the "RSR Interim Performance Report," and click on "Edit Report."

Important Note!

**You must complete and certify the
Grantee Report before you can
work on any Provider Report(s)!**

SO

You must complete and certify your Grantee Report before you can work on your Provider Reports.

Accessing Provider Report as a Grantee

Ryan White HIV/AIDS Services Reporting

Home | **Provider Report List** | Inbox | Reports | Logout

Your session will expire in: 29:52

Technical Support | Help | Feedback

Inbox

Progress Report	Favorite Reports	Task List	Grantee List	Grantee Report	Provider Report	Print Request	Un-Submit Request	Change Request	Provider List	Validation Request
[Help]										
Number of Providers		Providers that Created Reports			Reports in Review Status		Reports You Have Viewed/Accepted			
5		0			0		0			

Two Ways to Access Your Provider Reports:

- The “Provider Report List” on the top menu bar; or
- The Provider Report tab from your Inbox.

SO

To access a Provider Report as a grantee (including your own), click on “Provider Report List” on the top menu bar OR the Provider Report tab from your Inbox.

Accessing Provider Report as a Grantee: The Provider Report List Link

Grantee Provider Report List

The lists below contain all providers with which your grantee organization is associated. If you have providers that are not listed below, please add them to your Grantee Report and Re-Certify.

Working Provider Reports (Count: 2)									
Provider Name	Period	Owner	Lock	Modified Date	Status [Help]	Comments	Open	Print	
AIDS CENTER OF QUEENS COUNTY, INC.	2009 Interim	Nassau/Suffolk County	Jcappetta	07/08/2009	Working				
Albany Medical College AIDS Program/Mid-Hudson HIV Care Center	2009 Interim	Nassau/Suffolk County	Jcappetta	06/30/2009	Working				

Not Started Provider Reports (Count: 1)									
Provider Name	Period	Owner	Lock	Modified Date	Status [Help]	Comments	Open	Print	
Care For The Homeless (Create Provider Report)									

For technical issues or support in using this software application, please contact the HRSA Call Center at 1-877-Go4-HRSA (1-877-454-4772).
For questions regarding data content and/or reporting requirements, please contact Data Support at 1-888-640-9356.

Copyright © HRSA. All Rights Reserved.

SO

If you click on the “Provider Report List” link on the top menu bar, the RSR System will present your Provider Reports in a simple list format. In this screen, they will be grouped by **status**. All reports – both started and not created – will be shown here. You can click on the link to create a Provider Report that has not been started, or to open a Provider Report that is in working status.

Accessing Provider Report as a Grantee: The Provider Report Tab

Inbox

Progress Report	Favorite Reports	Task List	Grantee Report	Provider Report	Print Request	Un-Submit Request	Change Request	Provider List	Validation Request
-----------------	------------------	-----------	----------------	------------------------	---------------	-------------------	----------------	---------------	--------------------

Status: All

[Help]

Page 1 of 1 (Total 3 Records)

Items per page: 15

Report ID	Provider Name*	Part	Report Period	Lock	Modified Date	Status	Comments	Action	Print
9272	AIDS CENTER OF QUEENS COUNTY, INC.	Part A,Part B	2009 Interim	Jcappetta	07/06/2009	Working		Open	
9273	Albany Medical College AIDS Program/Mid-Hudson HIV Care Center	Part A,Part B,Part D	2009 Interim	Jcappetta	06/30/2009	Working		Open	
0	Care For The Homeless	None	None	None	None	None		Create	

Accessing the Provider Reports via the Provider Report tab from your Inbox

SO

If you select the Provider Report tab from your Inbox bar, your Provider Reports will appear in **alphabetical** order. From this screen you can “filter” the reports you see by clicking on the status pickbox. For example, if you want to see and access only reports in “working” status, you can select “working” in this pickbox and the screen will refresh showing you only those reports in working status. If you want to see only reports that have not been created, you can select “Not Created”; select “Submitted” to review only reports in submitted status, and so on.

Let’s take a look at what is shown in the “Action” column. Note that for the first report, the Action column shows an open envelope and has the word “Open.” This report has already been started and is in working status. Note that for the other two reports shown, the Action column shows a closed envelope, and the word “Create.” These are providers for which reports have not been started. Also note that for reports that have been started, there will be a value in the following columns: Report ID, Program “Part”, Report Period, Lock, Modified Date, and Status, whereas for those that have not been created, the values displayed in those columns will be zero or “None.”

Also from this interface, you can click on the PDF icon to generate a printer-ready, PDF version of the Provider Report; or, view and/or add comments to the Provider Report by clicking the clipboard icon.

Accessing Provider Report as a Grantee

Inbox

Progress Report	Favorite Reports	Task List	Grantee Report	Provider Report	Print Request	Un-Submit Request	Change Request	Provider List	Validation Request
Status: All									
[Help]									
Page 1 of 1 (Total 3 Records)									
Items per page: 15									
Report ID	Provider Name*	Part	Report Period	Lock	Modified Date	Status	Comments	Action	Print
9272	AIDS CENTER OF QUEENS COUNTY, INC.	Part A,Part B	2009 Interim	Jcappetta	07/06/2009	Working		Open	
9273	Albany Medical College AIDS Program/Mid-Hudson HIV Care Center	Part A,Part B,Part D	2009 Interim	Jcappetta	08/30/2009	Working		Open	
0	Care For The Homeless	None	None	None	None	None		Create	

Pay attention to “Ownership” status and “Locks” when trying to edit a Provider Report

SO

Note: A grantee user, or a provider user, may be unable to access a report in “Edit” mode due to ownership issues or locks. Note in the slide, the user id “jcappetta” is displayed in the Lock column on the first row. If I am not “jcappetta” I will not be able to edit this report, and will be restricted to view-only access. The user who has the lock can release the lock to allow other users within their organization to work on the report by clicking on “Release Lock” in the left navigation bar in the Provider Report. However, if the user who currently has the “lock” wants to allow someone from another organization to work on the report, ownership of the Provider Report must be transferred to the next user’s organization. The current owner must contact the HRSR Call Center or Data Support to have ownership transferred to next organization.

Now Maria will walk us through online completion of a Provider Report. Maria.

Completing the Provider Report Questions 1 – 2 (Web Entry)

Department of Health and Human Services
HRSA
Ryan White HIV/AIDS Services Administration

Ryan White HIV/AIDS Services Reporting
Home | Provider Report | Inbox | Reports | Logout

E-HANDBOOK

RSR Administration
Validate
Import Clients
Import Provider
Un-Submit
Submit

RSR Navigation
Section 1
- Q1-2
- Q3-7
- Q8 Contracts
- Q9-11
Section 2

Data Entry Instructions
Logged in as: provider1
Role(s):
* Provider
Logout

The deadline to submit the RSR to your grantee is September 01, 2009 06:00 PM EDT
The deadline to un-submit your RSR is September 09, 2009 06:00 PM EDT

Section 1 of 2 - Page 1 of 5 - Questions 1 - 2 Access Mode: **edit** - Data can be edited by: provider1 only - RSR Status: working

Provider Name: Health Equity Partnership Reporting Period: 1 January 2009 through 30 June 2009

SECTION 1. SERVICE PROVIDER INFORMATION

Fields with a red star (*) are required

1. Provider Address: (edit)

a. Street: 345 Main Street
b. City: Rockville
c. State: MD
d. ZIP Code: 20852

2. Contact information: (edit)

a. Name: mike provider
b. Title: master & lord
c. Phone #: (301) 555-1111
d. Fax #:
e. Email: dotsm@saic.com

< Previous Page Next Page > Save Restore Initial Values

For technical help please call 1-877-Go4-HRSA (1-877-464-4772). For data support, please call 1-888-640-9358

MJH

Thanks Stephanie.

To complete the Provider Report, first verify the contents of Item 1, Provider Address, and Item 2, Provider Contact Information. If you find errors in the data in Item 1, click the “Edit” link next to the question to amend the provider’s address information. Please note that as the grantee, there will not be an Edit link next to question 2 because you must update your contact information in the EHBs. If you don’t know how to do this, I would encourage you to review the first presentation in our series, Completing the Grantee Report.

When entering information into your Provider Report, please keep the following in mind:

- Save each page using “Next Page”, “Previous Page”, or “Save”.
- Direct navigation from RDR navigation menu on the left hand side of the web page does not save the data on the page before moving to the selected section.
- The RSR system will time you out after 30 minutes of inactivity and it doesn’t recognize typing as activity.

Completing the Provider Report Questions 3 – 7 (Web Entry)

MJH

Next, respond to Items 3 through 7. Notice the radio-button style selection for Items 3 through 6? This means only one selection can be made for these items.

- For Item 3, select the Provider Type that best describes the organization; definitions for each organization type can be found in the RSR Instruction Manual. If you select, Publicly Funded Community Health Center, then you must answer Question 4 and indicate whether the provider organization received funding under Section 330 of the Public Health Service Act. If you select “Other” as your provider type, you must provide a brief description of the Provider Type in the accompanying text box.
- Next select a response to Item 5a, Ownership Status. If you indicate that your organization’s ownership status is “Private, Non-Profit”, then you must also respond to question 5b, indicating whether or not the organization is a faith-based organization.
- Indicate whether or not MAI funds were received during this reporting period in Item 6.
- Item 7, Oral Health Care, asks the provider to report the amount of Part A, B, C and/or D funds expended on Oral Health Care during the reporting period. Please note that there is a validation check between the value entered here and the services reported as delivered in Item 8.
 - 1.If the provider is not authorized to provide oral health care by its grantee then this item should be left blank.
 - 2.If the provider is authorized to provide oral health care by its grantee BUT does not report that it delivered the service in Item 8, the provider must enter a value of zero in this item.
 - 3.If the provider is authorized to provide oral health care by its grantee AND reports that it delivered oral health care services in Item 8, the provider must enter a value greater than zero in this item.

Completing the Provider Report Question 8 (Web Entry)

Section 1 of 2 - Page 3 of 5 - Question 8 Access Mode: **edit** - Data can be edited by: **provider8** only - RSR Status: **working**

Provider Name: South Side Health Association Reporting Period: 1 January 2009 through 30 June 2009

SECTION 1. SERVICE PROVIDER INFORMATION (Continued)

B. Please indicate if your organization expended Ryan White HIV/AIDS Program funds to provide services to the grantees listed in the table below.

Grantee Name	Funding Source	Grant Number	Contract Reference	Services	Amount Funded
Illinois	Part B	X07HA00013		Services (0)	\$ 200,000
Roseland Christian Health Ministries	Part C EIS	H76HA00685		Services (0)	\$ 333,333
Chicago, IL	Part F MAI Part A	H3MHA008490		Services (0)	\$ 0
Chicago, IL	Part F MAI Part A	H3MHA008490		Services (0)	\$ 0
Total Funded:					\$533,333

To view the crosswalk of services Funded, Delivered and Uploaded, [click here](#).

* Fiscal Intermediary service has been selected.

< Previous Page
Next Page >
Save
Restore Initial Values

Indicate services delivered under each contract.

MJH

Question 8 lists all the active contracts the provider had during the reporting period. The grantee's name(s) are listed for each contract, as well as the Program Part and grant number under which the provider is funded; the contract reference (if any) entered by the grantee; and the funding amount indicated by the grantee. All of these items are display-only, and the information displayed is based on the information reported by the grantee in the Grantee Report. So, if a contract is missing or the information associated with a contract is incorrect, the provider will need to contact its grantee-of-record to have the information amended.

To complete this item, providers will need to indicate the services delivered under each contract. Note that in the example shown on this slide, there is a "zero" in parentheses next to the word "Services." This zero indicates that the provider has not yet selected any services as "delivered" under that contract.

Select the "Services" link to open the services window.

Completing the Provider Report

Question 8 (Web Entry)

Grantee: ILLINOIS DEPARTMENT OF PUBLIC HEALTH
Provider: South Side Health Association

Funding Source: Part B
Grant #: X07HA00013

Administrative & Technical Services
Core Medical Services
Support Services
HIV Counseling & Testing

Select the services this agency was funded to provide under this agreement. (Check all that apply.)

Funded	Delivered	Service
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Outpatient/ambulatory medical care
<input type="checkbox"/>	<input type="checkbox"/>	Local AIDS Pharmaceutical Assistance
<input type="checkbox"/>	<input type="checkbox"/>	Oral health care
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Early intervention services (Parts A and B)
<input type="checkbox"/>	<input type="checkbox"/>	Health Insurance Premium & Cost Sharing Assistance
<input type="checkbox"/>	<input type="checkbox"/>	Home health care
<input type="checkbox"/>	<input type="checkbox"/>	Home and community-based health services
<input type="checkbox"/>	<input type="checkbox"/>	Hospice services
<input type="checkbox"/>	<input type="checkbox"/>	Mental health services
<input type="checkbox"/>	<input type="checkbox"/>	Medical nutrition therapy
<input type="checkbox"/>	<input type="checkbox"/>	Medical case management (including treatment adherence)
<input type="checkbox"/>	<input type="checkbox"/>	Substance abuse services-outpatient

< Previous Page
Next Page >
Save
Restore Initial Values

[Close Window and Return to Contracts Page](#)

MJH

The Services are divided into four tabs – one for each of the following categories:

- Administrative and Technical Services
- Core Medical Services
- Support Services
- HIV Counseling and Testing

By default, the window appears with the first tab (Administrative and Technical Services) selected.

The far left column, which is read only in the Provider Report, shows the services selected as “funded” by the grantee for that contract. These are the services you are authorized to provide under the contract. Review each service category and select the services delivered under the contract. If your selections for “delivered” services under the contract do not match the services the grantee indicated as “funded,” you will receive a validation warning. However, just as in RDR, warnings will not prevent submission.

On the other hand, if you believe the grantee has made an error, please contact the grantee and ask them to amend the contract in their Grantee Report. The grantee can update the list of “funded” services at any time and recertify the Grantee Report. Once the grantee has certified their report, the new/corrected selections will appear here.

Please remember to click on the “Save” or “Next page” buttons to make sure your selections are saved. Once you have made all selections desired on all tabs, close the window by clicking on the hyperlink in the lower left corner, which says “Close Window and Return to Contracts Page.”

Repeat this process for all the contracts listed in Item 8.

Important Note:
**If the provider only delivers
Administrative and Technical
Services under all contracts, STOP
HERE; they are finished with the
their Provider Report.**

MJH

We're not quite done with entering the Provider Report; but, for those organizations that only deliver Administrative and Technical Services under all contracts, they are finished with their report after completing Item 8.

Completing the Provider Report Question 9- 11 (Web Entry)

Section 1 of 2 - Page 4 of 5 - Questions 9 - 11 Access Mode: **edit** - Data can be edited by: **provider8** only - RSR Status: **working**

Provider Name: South Side Health Association Reporting Period: 1 January 2009 through 30 June 2009

SECTION 1. SERVICE PROVIDER INFORMATION (Continued)

9. Which of the following categories describes your agency? (Check all that apply.)

- An agency in which racial/ethnic minority group members make up more than 50% of the agency's board members
- Racial/ethnic minority group members make up more than 50% of the agency's professional staff members in HIV direct services
- Solo or group private health care practice in which more than 50% of the clinicians are racial/ethnic minority group members
- Other "traditional" provider that has historically served racial/ethnic minority clients but does not meet any of the criteria above
- Other type of agency or facility

10. Report the number of paid staff, in full-time equivalents (FTEs) in up to two decimal places, that were funded by the Ryan White HIV/AIDS Program during this reporting period:

11. Please select the status of your agency's clinical quality management program for assessing HIV health services. (Select only one)(Clear my answer)

- Clinical quality management program introduced this reporting period
- Previously established quality management program
- Previously established program with new quality standards added this reporting period
- Not applicable

< Previous Page Next Page > Save Restore Initial Values

MJH

Question 9 requires the user to select from a list of categories to describe their agency. Multiple selections are permitted for this question.

In Question 10, report the number of paid staff in Full Time Equivalent (FTEs) funded by the Ryan White HIV/AIDS program during the reporting period. The instruction manual provides directions on how to calculate an organization's FTEs; but, if you require additional assistance, please contact Data Support.

Indicate the status of your clinical quality management program by selecting one of four responses available in Question 11. Note: All Ryan White Programs that deliver client services are required to have a clinical quality management program. So, if the provider delivers clinical services, "Not Applicable" is not a good answer! But the system won't stop you from choosing it!

Select "Next Page" button to save and continue.

Completing the Provider Report Question 12 - 17 (Web Entry)

Section 2 of 2 - Page 5 of 5 - Questions 12 - 17 Access Mode: **edit** - Data can be edited by: **provider8** only - RSR Status: **working**
Provider Name: South Side Health Association Reporting Period: 1 January 2009 through 30 June 2009

SECTION 2. HIV Counseling & Testing

12. Number of individuals tested for HIV:

13. Of those tested (#12 above), number who tested **NEGATIVE**:

14. Number who tested **NEGATIVE** (#13 above) and received posttest counseling:

15. Of those tested (#12 above), number who tested **POSITIVE**:

16. Number who tested **POSITIVE** (#15 above) and received posttest counseling:

17. Of those tested **POSITIVE** (#15 above), number referred to HIV medical care:

< Previous Page Next Page > Save Restore Initial Values

Questions 12-17 can only be filled out if the Provider selected “HIV Counseling and Testing” as a delivered service

MJH

Agencies that provide RW-funded HIV counseling and testing services (partial or full funding) must complete Section 2 (Questions 12 - 17). If the provider did not indicate that it delivered HIV Counseling and Testing for any of its contracts in Item 8, this entire section will be disabled, and the Provider will be alerted with a popup window. If, however, the agency reports that they delivered HIV Counseling and Testing Services in Item 8, then this section will be enabled and a response required in each field.

There are some important data relationships to keep in mind when responding to Item 12 – 17:

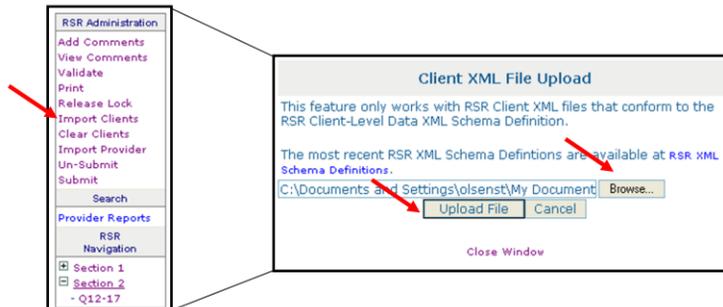
1. The sum of individuals reported in Items 13 and 15 must be less than or equal to the number of individuals reported in Item 12;
2. The number of individuals reported in Item 14 must be less than or equal to the number of individuals reported in Item 13;
3. The number of individuals reported in Item 16 must be less than or equal to the number of individuals reported in Item 15; and
4. The number of individuals reported in Item 17 must be less than or equal to the number of individuals reported in Item 16.

Keep in mind that the numbers you'll report for the C&T Items of the Provider Report may include individuals who are not counted or reported as RW clients in any of your other data reporting items, because RW funding may also be used to test individuals anonymously.

Once you've completed these items, the Provider Report component of the RSR is complete. All that remains is to upload your client-level data (if applicable), validate, and submit your report.

And Stefani will take you through those steps now.

Completing the Provider Report: Uploading Client Level Data



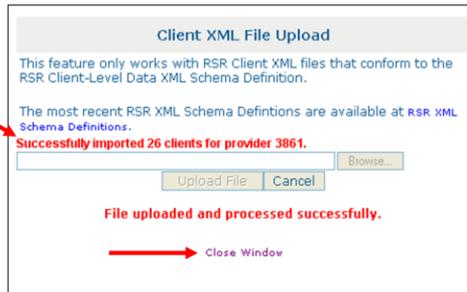
Once you have completed the forms, upload your client level data if you have delivered outpatient ambulatory or case management services.

SO

As you already know, for the first two RSR Reporting periods, only service providers that delivered outpatient/ambulatory medical care or case management (medical or non-medical) services are expected to upload a client level data file. If the service provider indicates that it delivered any of the “big three” services (OAMC, MCM, and/or NMCM) in Item 8, it must upload client-level data for all clients that received any Ryan White-funded service the provider delivered.

To upload your XML file, click on the “Import Clients” link on the left navigation menu. The file upload popup window will appear. Click on the “Browse” button, then find and select the client-level data XML file. Remember, the file must be in the appropriate XML schema format before it can be uploaded. Once you have selected the file, click on the “Upload File” button.

Completing the Provider Report: Uploading Client Level Data



If your client upload is successful, you will see a confirmation message, and the number of client records imported will be displayed.

SO

If your client-level file upload is successful, you will see a message in the upload window confirming the upload. The message will include the number of clients included in the uploaded file (make sure this number is what you were expecting) and the provider number associated with the provider's organization in the system.

Close the window by clicking on the Close Window link.

If your client file contains invalid values or is not formatted correctly, you will not be able to upload the records into the system, and you will receive an error message. If this occurs, please contact the HRSA Call Center, who will put you in touch with a technical staff member who can help you understand the message and fix the problem.

Completing the Provider Report: Uploading Multiple Client Files

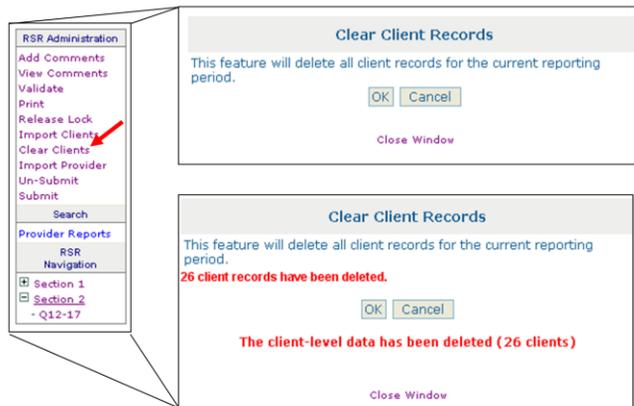
- If multiple client level files are uploaded for the same report period into the same Provider Report, the following rules will apply:
 - Records for new clients (whose UCI does not already exist in previously uploaded data) will be added to the stored data set.
 - Records for clients who already exist in the system for that provider and reporting period will be updated as follows:
 - New data elements will be added for all fields that allow multiple values.
 - For fields which can have only one value for a unique client, the first saved value will be retained, and will not be replaced with subsequently uploaded values.

SO

Remember you can upload multiple client level XML files to build your Client Report. If multiple client level files are uploaded for the same report period into the same Provider Report, the following rules will apply:

1. Records for new clients (whose UCI does not already exist in previously uploaded data) will be added to the stored data set.
2. Records for clients who already exist in the system for that provider and reporting period will be updated as follows:
 - New data elements will be added for all fields that allow multiple values. For example, if the first client level file uploaded reported that Client A had 3 Outpatient Ambulatory Health Service visits in Quarter 2, and the second client level file reports that the same client received 2 Early Intervention service visits in Quarter 2, the RSR system record for that client will reflect 3 Outpatient Ambulatory Health Service visits and 2 Early Intervention service visits in Quarter 2.
 - For fields which can have only one value for a unique client, the first saved value will be retained, and will not be replaced with subsequently uploaded values. For example, if the first client level file uploaded reports Client A's gender as male, and the second client level file reports Client A's gender as female, the RSR system record for that client will show Client A's gender as male.

Completing the Provider Report: Deleting Client Level Records



Delete uploaded records by clicking “Clear Clients.”

SO

What if you upload client level data, and then realize that something in your upload file was incorrect or incomplete?

You can delete client records that you have uploaded by clicking on the “Clear Clients” link on the left navigation menu. The system will prompt you to confirm the deletion by clicking “OK.”

PLEASE NOTE: This feature will only delete client records that YOU uploaded; for example:

1. You upload one client-level data XML file and a week later you upload a second client-level data file into the same Provider Report. When you click “clear clients” the system will delete ALL of the records you uploaded.
2. Both you and another user upload a client-level XML file into the same Provider Report, when you click “clear clients” the system will only delete those records uploaded by YOUR user account, not those associated with other user’s account.

If you need to clear ALL records entered by ALL users for a given report, you either have to ask each user to perform this function while logged in under their own account, or contact the HRSA Call Center for system administrator assistance.

(Note: Organizations may want to assign one individual to perform all data entry tasks.)

Reviewing the Data: Validating your Report

The screenshot shows the RSR Administration interface. On the left, a navigation menu includes 'Validate' and 'Provider Reports'. The main area displays a validation report titled '8 Errors/Warnings Found In Report 192730'. The report is organized into sections, with Section 1 containing 8 items. Each item has a question number, a status (Error or Warning), and a detailed error message. Red arrows point to the 'Validate' link in the menu and the '8 Errors/Warnings Found' header in the report.

Error	Question #	Error Message
1	QPS (Error)	QPS Provider Type: At least one provider type must be selected.
2	QPS (Error)	QPS Ownership Status: At least one selection of Ownership Status options is required.
3	QPS (Error)	QPS MAI/ACS Initiative Funds: Answer to whether MAI/ACS Initiative Funds is received is required.
4	QPS (Warning)	QPS HIV Counseling and Testing service is delivered in QI by South Side Health Association service delivered but not funded. You specified that HIV Counseling and Testing service is delivered in QI by South Side Health Association, but this service is not specified as funded in Grantee Report.
5	QPS (Warning)	QPS Early intervention services (Parts A and B) service is funded in Grantee Report by ILLINOIS DEPARTMENT OF PUBLIC HEALTH. HI services funded but not delivered. You specified that Early intervention services (Parts A and B) service is funded in Grantee Report by ILLINOIS DEPARTMENT OF PUBLIC HEALTH, but that service is not specified as delivered in QI.
6	QPS (Warning)	QPS Psychosocial support services service uploaded but not delivered. Psychosocial support services are reported as delivered in the client level data file you have uploaded, but this service is not specified as delivered in QI. If you delivered Psychosocial support services as indicated in the uploaded file, please select this service in QI.
7	QPS (Warning)	QPS Health education/risk reduction service uploaded but not delivered. Health education/risk reduction services are reported as delivered in the client level data file you have uploaded, but this service is not specified as delivered in QI. If you delivered Health education/risk reduction as indicated in the uploaded file, please select this service in QI.
8	QPS (Warning)	QPS Treatment adherence counseling service uploaded but not delivered. Treatment adherence counseling services are reported as delivered in the client level data file you have uploaded, but this service is not specified as delivered in QI. If you delivered Treatment adherence counseling as indicated in the uploaded file, please select this service in QI.

To validate the Provider Report, click on the “Validate” link on the left navigation menu. Errors must be corrected in order to submit.

SO

The next step in the process of completing the Provider Report is Data Validation.

To validate your Provider Report, click on the Validate link in the left navigation menu. The validation report will be generated and presented. Remember that just as with RDR, you cannot submit with errors, but you can submit with warnings. The validation report is presented by section. For both errors and warnings, the Question number(s) associated with the error or warning appears in the second column, with errors denoted with red text. The third column provides detail on the cause of the error or warning. There are no hyperlinks in this report, so you may wish to print your validation report and refer to it as you correct errors, and/or address warnings. To do this, click on the “Print Validation” link that appears near the top of the validation report.

You can also add comments to explain any warning on the report. These comments can be viewed by the grantees who review the submitted report. To add warning comments, click on the “Add Warning Comments” link that appears near the top of the validation report. Remember that you can submit a Provider Report with warnings, but in many cases, you will want to enter an explanation.

Reviewing the Data: The Services Crosswalk

0 Errors/Warnings Found in Report 00 9279

[View Warning Comments](#) [Add Warning Comment](#) [Print Validation Report](#) [Close window](#)

To view the crosswalk of services Funded, Delivered and Uploaded, [click here.](#)

Error#	Question #	Error Message
Section 1		
Validation Help		
1	OP3 (Error)	OP3 Provider Type. At least one provider type must be selected.
2	OP5 (Error)	OP5 Ownership Status. At least one selection of Ownership Status options is required.
3	OP6 (Error)	OP6 HIV AIDS Initiative Funds. Answer to whether HIV AIDS Initiative Funds is received is required.
4	OP8 (Warning)	OP8 HIV Counseling and Testing service is delivered in Q8 by South Side Health Association service delivered but not funded. You specified that HIV Counseling and Testing service is delivered in Q8 by South Side Health Association, but this service is not specified as funded in Grantee Report.
5	OP8 (Warning)	OP8 Early intervention services (Parts A and B) service is funded in Grantee Report by ILLINOIS DEPARTMENT OF PUBLIC HEALTH. The service funded but not delivered. You specified that Early intervention services (Parts A and B) service is funded in Grantee Report by ILLINOIS DEPARTMENT OF PUBLIC HEALTH, but that service is not specified as delivered in Q8.
6	OP8 (Warning)	OP8 Psychosocial support services service uploaded but not delivered. Psychosocial support services are reported as delivered in the client level data file you have uploaded, but this service is not specified as delivered in Q8. If you delivered Psychosocial support services as indicated in the uploaded file, please select this service in Q8.
7	OP8 (Warning)	OP8 Health education/risk reduction service uploaded but not delivered. Health education/risk reduction services are reported as delivered in the client level data file you have uploaded, but this service is not specified as delivered in Q8. If you delivered Health education/risk reduction as indicated in the uploaded file, please select this service in Q8.
8	OP8 (Warning)	OP8 Treatment adherence counseling service uploaded but not delivered. Treatment adherence counseling services are reported as delivered in the client level data file you have uploaded, but this service is not specified as delivered in Q8. If you delivered Treatment adherence counseling as indicated in the uploaded file, please select this service in Q8.
Section 2		
Validation Help		

Access the Services Crosswalk report by clicking on the link above the table.

SO

One type of validation warning you might encounter for the Provider Report is a disagreement between the services that were selected by a grantee as Funded under your contract, and those services you indicated you delivered under that contract. Another type of validation warning you might receive is a disagreement between what you indicated was delivered, and what is reflected as delivered in the client level data you uploaded.

In order to help you identify this specific kind of discrepancy – that is, a disagreement between Funded, Delivered, and Uploaded services – we have developed the Services Crosswalk report.

You can access the Services Crosswalk report from inside the validation report, by clicking on the link that appears above the validation table, as shown in the screenshot on this slide.

Reviewing the Data: The Services Crosswalk

**RSR Services Crosswalk
for
Channels of Hope Support Center**

1. Indiana (X07HA00033 - Part B)
2. HEALTH & HOSPITAL CORP OF MARION COUNTY (H76HA00112 - Part C EIS)

Grantee Name: Indiana			Grant Number: X07HA00033		
Provider Contract ID: 293			Funding Source: Part B		
Category	Service	Funded	Delivered	Uploaded	Validation
core	Outpatient/ambulatory medical care	X	✓	Req (✓)	⚠

Grantee Name: HEALTH & HOSPITAL CORP OF MARION COUNTY			Grant Number: H76HA00112		
Provider Contract ID: 294			Funding Source: Part C EIS		
Category	Service	Funded	Delivered	Uploaded	Validation
counseling	HIV Counseling and Testing	✓	✓	N/A (X)	✓

Close Window

The Services Crosswalk Report shows in one place all the services selected as Funded and Delivered under each contract, as well as those services that are reported in the upload.

SO

The services crosswalk report shows, for each contract, which services were selected as “Funded” and “Delivered,” and which categories of services were reported in the client-level upload. Keep in mind that the upload file does NOT associate services with specific contracts, so each service type shown on this report will either consistently have a check or an X in the uploaded column. If a warning was triggered by any discrepancy shown, a yellow “Warning” icon will appear in the validation column. If no validation warning is triggered (i.e., there is no discrepancy) a green check will appear in the validation column.

Reviewing the Data: Client-Level Data Summary Reports

The screenshot shows the Ryan White HIV/AIDS Services Reporting interface. At the top, the navigation menu includes 'Home', 'Provider Report', 'Inbox', 'reports', 'Administration', and 'Logout'. A red arrow points to the 'reports' link. Below the navigation, there is a sidebar with 'Workflow', 'Inbox', 'Search', and 'Provider Reports' sections. The main content area is titled 'Inbox' and contains a table of tasks. The table has columns for 'Task Name', 'Action', and 'Status'. The tasks listed include 'Gather Information Needed for Provider Report', 'Finish Provider Report Data Entry', 'Upload Client-Level Data', 'Validate and Correct Provider Report (if necessary)', 'Submit Provider Report to Grantee(s) for Review', 'Monitor Provider Report through Deadline', and 'Modify, Validate and Re-Submit Provider Report (if necessary)'. Each task has a 'Go Perform Task' button and a 'Completed?' status with 'Yes' and 'No' options.

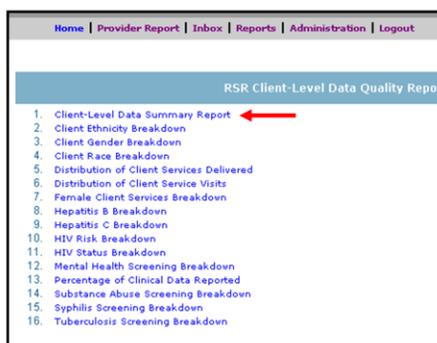
Task Name	Action	Status
Gather Information Needed for Provider Report		Completed? Yes No
Finish Provider Report Data Entry	Go Perform Task	Completed? Yes No
Upload Client-Level Data	Go Perform Task	Completed? Yes No
Validate and Correct Provider Report (if necessary)	Go Perform Task	Completed? Yes No
Submit Provider Report to Grantee(s) for Review	Go Perform Task	Completed? Yes No
Monitor Provider Report through Deadline	Go Perform Task	Completed? Yes No
Modify, Validate and Re-Submit Provider Report (if necessary)	Go Perform Task	Completed? Yes No

The Client-Level Data Summary reports present aggregate data about the client data that are in the system associated with this provider. Access them by clicking on the “Reports” link in the menu at the top of your screen.

SO

The Client-Level Data Summary Reports present aggregate data about the client data that are in the system associated with this provider. Access them by clicking on the “Reports” link in the menu at the top of your screen.

Reviewing the Data: Client-Level Data Summary Reports



There are 16 reports available from this menu, each presenting aggregate data based on the client level data uploaded. To generate a report, click on the title.

SO

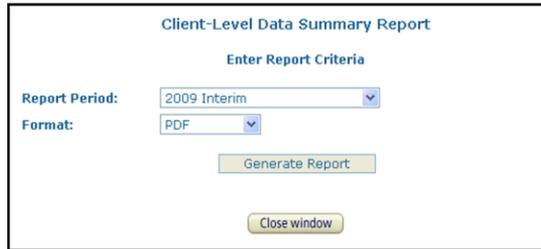
There are 16 reports available from this menu, each presenting aggregate data based on the client level data uploaded. We won't go over each report individually this afternoon. However, I would like to draw your attention to the first report, the Client-Level Data Summary report. This report provides the tables from ALL the other reports in one big report! It does not include any graphics like pie or bar charts, but it does include all the data from the other reports in table format.

This is an excellent report to use if you want to cross-check the numbers you were expecting in your upload. You can quickly see the numbers of clients by gender, race, ethnicity, service visits by category etcetera in this report. So, for example, let's say you believe that your upload file should have included records for 500 male clients, and 70 female clients. You can double check those numbers on this report.

All of the other reports "hone in" on specific categories of data. They also all include some kind of graphic representation, such as a pie chart or bar chart accompanying the table. These reports can be used by you to see a visual of the data you are providing to the grantee, just as the grantee will see it.

To generate a report, click on the report's title.

Reviewing the Data: Client-Level Data Summary Reports



The screenshot shows a web interface titled "Client-Level Data Summary Report" with a sub-header "Enter Report Criteria". It contains two dropdown menus: "Report Period" set to "2009 Interim" and "Format" set to "PDF". Below these are two buttons: "Generate Report" and "Close window".

Select the desired reporting period, and the desired format. Click “Generate Report.”

SO

Select the desired reporting period, and the desired format. Note that either PDF or Excel files may be generated. Click “Generate Report.”

Use the reports to check your data. If you discover the totals were not what you were expecting, you may wish to clear your client level data, fix the data issues in your local system, re-export the data, and then re-upload a revised client-level data file.

Once you are happy with the totals you are seeing and have confirmed that this matches what you were expecting to see from your client level upload, you can save these reports in either PDF or Excel format to your own computer for use in presentations, or for future reference. You’re also ready to submit the Provider Report.

Submitting the Provider Report: Prerequisites for Submission

- It must be July 16 or later.
- All of the funding Grantee Reports must be in “certified” status.
- There are no errors in the Provider Report.

SO

This slide shows the prerequisites that must be satisfied before a the Provider Report can be submitted.

- It must be July 16 or later.
- All of the funding Grantee Reports must be in “certified” status.
- There are no errors in the Provider Report.

Submitting the Provider Report

The diagram illustrates the process of submitting a Provider Report. On the left is a navigation menu with the following items: RSR Administration, Add Comments, View Comments, Validate, Print, Release Lock, Import Clients, Clear Clients, Import Provider, Un-Submit, Submit, Search, Provider Reports, RSR Navigation, Section 1 (with sub-items Q1-2, Q3-7, Q8 Contracts, Q9-11), and Section 2. Red arrows point from the 'Submit' link in the menu to the top-left corner of the 'Submit Attempt Unsuccessful' screenshot, and from the 'RSR Navigation' section to the top-left corner of the 'Submit Attempt Successful' screenshot.

Submit Attempt Unsuccessful

Submit Provider Report

You may not Submit this Provider Report. The following Grantees need to certify their Grantee Reports before this report can be submitted: Guam.

Submit Attempt Successful

Submit Provider Report

Step 1: Validate Provider Report

This Provider Report has passed validation. Your Provider Report is now ready for submission!

Please click the Submit Provider Report Button below to submit your Provider Report

Step 2: Submit Provider Report

Submit Provider Report

After your Provider Report is submitted, you have fulfilled your obligations, but it is still your responsibility to continue to monitor the workflow through the September 15, 2009 18:00:00 deadline in case there are changes brought about by the provider or other grantees.

Close this window

SO

To submit the Provider Report, click on the “Submit” link in the left navigation menu.

If any of the prerequisites we discussed on the prior slide have not been met, your attempt to submit will be unsuccessful, and you will see the “unsuccessful” message shown at the top of the slide.

If all prerequisites are met, you will see the success message, shown at the bottom of the slide. You will need to confirm the submission one more time by clicking on the “submit” button.

Submitting the Provider Report

Enter comments for workflow action. Comments are mandatory while performing any action on the workflow

Your comments: I am submitting the RSR Provider Report. If you have any questions, please contact me. Thank you!
Name: MICHAEL DOLS
Phone: 301-230-1234 e
Email: dolsm@saic.com
Organization: NORTH IDAHO AIDS COALITION

Additional Comments:

Please include any explanatory notes or supplemental information in the above comments.

[Close Window](#)

Enter Comments, and Click Submit

SO

After you confirm your submission, a comments box appears. Please enter your additional comments in the box provided. Remember that the grantees will be able to view and review these comments, so if there is anything you want them to know about your submission or the data provided, you can enter it here.

Once you have entered your comments, click Submit.

This concludes our review of submitting the Provider Report. But before we conclude for the afternoon, I'd like to tell you about two additional features of the RSR System available to grantees.

Completing Provider Report(s) and Client Level Uploads via Batch XML



Grantees can import multiple Provider Reports and/or multiple client level data files via Batch Upload. Special XML schema files are required; contact RSR Technical Lead Michael Dols at Michael.j.Dols@saic.com for schema definition files.

SO

As you should know by now, client-level data can ONLY be uploaded in a properly formatted XML file. Individual Provider Reports can be completed via XML file upload as well. This is an action available from inside a Provider report, and it can be done by either Providers or grantees. This would save the user the time required to complete the Provider Report online forms. To do the Provider Report via XML import requires a special XML schema file format (obviously not the same one used for client level data).

Also, grantees can complete Provider Reports and client level data imports via batch upload. The batch upload feature for Provider Reports and client level data is available ONLY from the Grantee Report. When you are in the Grantee Report, look at your left Navigation menu. There the option Batch Client will allow upload of a zip file containing multiple client level files, and Batch Provider will allow the upload of a zip file containing multiple Provider Report files. The use of these features requires special XML schema formats be used. To get a copy of the Provider Report XML schema format for batch uploads of Provider Reports, client level data files, or both, contact RSR Technical Lead Mike Dols at michael.j.dols@saic.com

Note that that use of these features require a certain amount of technical capability on the part of your staff.

This brings us to the end of the presentation on completing the Provider Report. Michael Costa will now provide a preview of future webcasts and some important reminders.

Future Webcasts

- **RSR System**
Part III: Managing the RSR Deliverable
Tuesday, July 14, 2009
1:00 - 2:00 pm ET

MC

The final webcast in our 3-part series about the RSR System: Managing the RSR Deliverable will be held Tuesday, July 14, 2009 at 1:00 pm ET. It will provide grantees with the information they need to administer their RSR deliverable. Grantees will be shown how to review and approve their Provider Reports. Grantees will also be shown how to return a Provider Report for correction and how to deal with workflow issues.

Please be sure to attend this upcoming session.

Completing the Grantee Report Technical Assistance Resources

- Read the Instruction Manual
<http://www.hab.hrsa.gov/manage/cld.htm>
- Review this presentation on the TARGET Center Website
http://www.careacttarget.org/rsr_archive.asp
- Ryan White HIV/AIDS Program Data Support
 - 888.640.9356
 - Available 9 a.m. to 5:30 p.m. ET, Monday through Friday
 - ryanwhitedatasupport.wrma@csrincorporated.com
- HRSA Call Center
 - 877.Go4.HRSA (877.464.4772)
 - Available 9 a.m. to 5:30 p.m. ET, Monday through Friday
 - CallCenter@HRSA.gov

MC

If you have questions about anything you have heard today, information can be found in the RSR Instruction Manual. We also encourage you to review this presentation when it is posted to the TARGET Center Web site. Live assistance is also available through the HRSA Call Center and Data Support.

Thank You

Questions?

MC

We will now take your questions. I plan to alternate between questions sent through the chat function and those on the telephone. We will do our best to answer each question. If there is not an answer ready at hand for you, it will be researched and the answer will be posted on the TARGET Center Website.

Your questions were great and I want to emphasize that anything we did not answer today will be researched and the answer will be posted on the TARGET Center Website. If you think of a question after this session ends, please feel free to send us a question through the help desk links we showed you on the TARGET website.

As we bring this webcast to a close, I would like to thank you all for your participation.

...And before we close, I'd like to ask each of you to respond to a few brief evaluation questions. If you look on the right-hand side of your screen, you will see that the "Polls" bar has been added.

You'll see three questions there. Please take a moment to answer these questions before leaving the session. Your input helps us to assure and improve the quality of future webcasts.