2019 RSR OMB Changes

The 2019 Ryan White HIV/AIDS Program Services Report (RSR) will include revisions to the current Client, Recipient and Provider data collection instruments and changes to the services reported in the Client Report. These modifications largely reflect HRSA HAB's efforts to: reduce data reporting burden on recipients and subrecipients; improve the quality of all data collected and reported; ensure HRSA HAB can measure the investment and impact of all RWHAP-related expenditures at state and local levels; and align the data collection and reporting efforts with recently released Policy Clarification Notices (PCNs).

This document provides an overview of the changes and details on implementation dates. All changes contained in this document have been approved for data collection and reporting under OMB Control Number 0906-0039 (expires 12/31/2021).

Client Level Data		
Variable	**Current Reporting**	**New Reporting**
Vital Enrollment Status	Response Options: • Active, continuing in program • Referred to another program or services, or self-sufficient • Removed from treatment due to violation of rules • Incarcerated • Relocated • Deceased	Change variable name to Vital Status Response Options: • Alive • Deceased • Unknown
HIV Infection Risk Factor	Response Options: • Male who have sex with male(s) • Injecting drug use (IDU) • Hemophilia/coagulation disorder • Heterosexual contact • Receipt of blood transfusion, blood components, or tissue • Mother w/at risk for HIV infection (perinatal transmission) • Risk factor not reported or not identified	Response Options: • Male-to-male sexual contact (MSM) • Injection drug use (IDU) • Hemophilia/coagulation disorder • Heterosexual contact • Receipt of blood transfusion, blood components, or tissue • Perinatal transmission • Risk factor not reported or not identified
Medical Insurance		Change variable name to Health Coverage
Federal Poverty Level	Response Options: • Below 100 percent of the Federal poverty level • 100–138 percent of the Federal poverty level • 139–200 percent of the Federal poverty level • 201–250 percent of the Federal poverty level • 251–400 percent of the Federal poverty level • 401–500 percent of the Federal poverty level • More than 500 percent of the Federal poverty level	Continuous Variable (data entry field, up to three digits. No decimals allowed) Number
Support Services Delivered	• Yes • No	Continuous Variable (data entry field, up to three digits. No decimals allowed) Number of Support Service Visits
Prescribed ART	Response Options: • Yes • No, not ready (as determined by clinician) • No, client refused • No, intolerance, side-effect, toxicity • No, ART payment assistance unavailable • No, other reason	Response Options: • Yes • No

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Variable	Current Reporting	New Reporting
HIV Risk-Reduction Screening/Counseling Provided		Remove
Screened for TB Since HIV-diagnosis		Remove
Screened for Hepatitis B Since HIV Diagnosis		Remove
Vaccinated for Hepatitis B		Remove
Screened for Hepatitis C Since HIV Diagnosis		Remove
Screened for Substance Abuse		Remove
Screened for Mental Health		Remove
Received Cervical Pap Smear		Remove
Prescribed PCP Prophylaxis		Remove
Date Housing Status Collected		Number (MMDDYYYY)
Recipient Report		
Variable	**Current Reporting**	**New Reporting**
Status of clinical quality management program for assessing HIV health services		Remove
Indicate which subrecipients are connected in a real time electronic data network		Multi-select checkboxes. The response options will display list of providers from the Program Information page. Response to this question is required for all grantees.
Provider Report		
Variable	**Current Reporting**	**New Reporting**
Categories that best describe the agency's racial/ethnic characteristics		Remove
Number of paid staff, in full-time equivalents (FTEs), funded by RWHAP		Remove
Number who tested NEGATIVE and received post-test counseling		Remove
Number who tested POSITIVE and received post-test counseling		Remove
Status of clinical quality management program for assessing HIV core medical services	Response Options: • Not applicable • Clinical quality management program initiated this reporting period; • Previously established clinical quality management program; • Previously established program with new quality standards added this reporting period	Change variable name to *Select the status of your agency's clinical quality management program;* Response Options: • Do not have a clinical quality management program • Clinical quality management program initiated this reporting period; • Previously established clinical quality management program; • Previously established program with new quality standards added this reporting period

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List of provider zip codes in service area and number of clients serviced in each zip code.		Number (up to five digits. No decimals) U or * for unknown .

Eligible Services Reporting

Current reporting requires recipients report client level data for all eligible clients who receive a RWHAP service from a recipient/subrecipient funded to provide that service (Eligible Scope Reporting). However, as recipients fund additional services using pharmaceutical rebates and program income generated as a result of the RWHAP investments, HRSA HAB's ability to measure the full investment and impact of the RWHAP at state and local levels is limited. For the 2019 RSR submission, HAB will implement Eligible Services Reporting, in which recipients and subrecipients will submit client-level data for clients determined to be RWHAP-eligible clients that received an allowable service funded through any RWHAP and RWHAP-related expenditure. RWHAP-related funding will specifically include: RWHAP related program income and pharmaceutical rebate funds. Reporting data on RWHAP eligible clients who receive services funded by program income and pharmaceutical rebates, generated as a result of the RWHAP award, will accurately capture the clients served under the RWHAP.

> **Eligible Services Reporting does NOT include other federal funding, other State or local funds, or other sources of funding received by the subrecipient.**

Important Dates

> **The information contained in this document has been approved for data collection and reporting. You should begin to configure and update your systems for the new data collection and reporting requirements.**
>
> **Eligible Services Reporting Phased Implementation:**
>
> 2019 RSR (submitted March 2020): For those who already collect this information
> 2021 RSR (submitted March 2022): Final deadline for implementation for Eligible Services Reporting
>
> CAREWare will be updated to allow data collection to begin in January 2020.
>
> The RSR XML schema will be available for download on April 8, 2019.
>
> TRAX will available for download on May 16, 2019.

What Information Should be Reported?

Client-level Data Elements	Outpatient/ambulatory Health Services	Medical case management	Oral healthcare	Early intervention services	Home health care	Home & community-based health services	Hospice services	Mental health services	Medical nutrition therapy	Substance abuse services – outpatient	AIDS Pharmaceutical Assistance	Health Insurance Premium and Cost-Sharing	Non-medical case management	Child care services	Emergency financial assistance	Food bank/home-delivered meals	Health education/risk reduction	Housing services	Linguistics services	Medical transportation services	Outreach services	Other Professional Services	Psychosocial support services	Referral health care/support services	Rehabilitation services	Respite care	Substance abuse services – residential	Rationale
Client Demographics																												
Year of birth	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	2,7
Ethnicity	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	2,4,7
Hispanic Subgroup	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	2,4,7
Race	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	4,7
Asian Subgroup	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	4,7
NHPI Subgroup	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	4,7
Gender	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	2,3,4,7
Transgender subgroup	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	2,3,4,7
Sex at Birth	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	2,3,4,7
Health insurance	•	•	•	•	•																							2,7
Housing status	•	•											•							•								2,7
Federal poverty level	•	•											•															2,7
HIV/AIDS status	•	•											•															2,4
Client risk factor	•	•											•															7
Vital enrollment status	•	•											•															5,6
HIV Diagnosis Year	•	•											•															2,4
Client Clinical Data																												
HIV risk reduce screen/counseling	•																											2,3
First outpatient/ambulatory health service visit	•																											2,3,4
Outpatient ambulatory care visits	•																											3,4
CD4 counts and dates	•																											3,4
Viral Load Counts and Dates	•																											3,4
Prescribed PCP prophylaxis	•																											3
Prescribed ART	•																											3,4
Screened for TB since diagnosis	•																											3
Screened for syphilis	•																											3
Screened for Hep B since diagnosis	•																											3
Completed Hep B vaccine series	•																											3
Screened for Hep C since diagnosis	•																											3
Screened for substance use	•																											2,3
Screened for mental health	•																											2,3
Pap smear	•																											3,6
Pregnant	•																											2,3,4
Date of first Positive HIV Test	•																											1,3,4,5,6
Date of OAHS visit after first positive HIV test	•																											1,3,4,5

Only clients who are determined to be RWHAP eligible should be reported.

Most Core Medical Services require:
- Year of birth
- Race/Ethnicity (including subgroups)
- Gender
- Sex at birth
- Health Care Coverage

Most Support Services Require:
- Year of birth
- Race/Ethnicity (including subgroups)
- Gender
- Sex at birth

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Example: Multiply-Funded Subrecipient

Scenario: RWHAP Subrecipient funded by RWHAP Parts A and B provides OAHS, MCM, mental health, and substance abuse services.
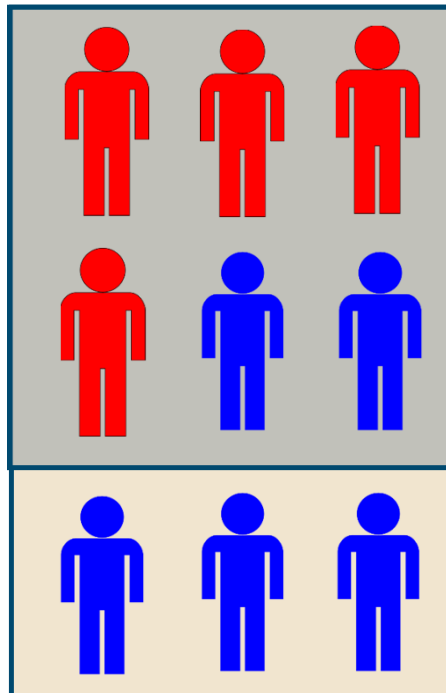
Service Category	Funding Streams	Current RSR Reporting	Eligible Services RSR Reporting
Outpatient Ambulatory Health Services (OAHS)	Part A, Part B	All RWHAP eligible clients	All RWHAP eligible clients
Medical Case Management (MCM)	Part A, Part B Rebate funds	All RWHAP eligible clients	All RWHAP eligible clients
Substance Abuse Services	Part B Rebate funds	No client level reporting	**All RWHAP eligible clients**
Mental Health Services	SAMHSA	No client level reporting	No client level reporting

Visual Representation of Reporting Changes

Client reporting depends on how the service is funded

Service 1

Service 2

Service 3

Eligible Scope Reporting

3 clients using RWHAP funding for Service 1,
1 client using RWHAP funding for Service 2, and
2 clients using RWHAP-related funding for Service 2

Eligible Services Reporting

All 9 clients

= RWHAP Funding   = RWHAP Related Funding