LOUISIANA CAREWARE ACCESS NETWORK

RYAN WHITE CAREWARE 5.0
POLICIES & PROCEDURES

LaCAN Data Management Policies & Procedures

1) Date Security & Confidentiality
2) Data Sharing in CAREWare
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4) Required Fields and Data Entry Timelines
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1. Policy: Data Security & Confidentiality

Effective Date: April 1, 2012

Confidential information includes not only sensitive health and risk-related information, but also client personal identifiers, potentially identifying information, and any other information provided to contractors for which confidentiality was assured when the individual or establishment provided the information. "Potentially identifying information" includes information that when viewed in conjunction with other information could possibly identify and/or be harmful to a particular person or group of people.

Communicating CAREWare Client Information:

- Information containing patient or client personal identifiers is never sent by email, even if encrypted. CAREWare client URNs, UCIs, eURNs, and any other agency client IDs will not be transmitted via email between any parties. LaCAN users, partners, and SHP staff will communicate about specific client records either during a live telephone conversation or by using a secure electronic transmission established by SHP staff.
- Electronic files containing patient or client personal identifiers, URNs, UCIs, eURNs, and any other agency client IDs will be transmitted to SHP and LaCAN Partners only via secure folders established by SHP.
- Personal identifiers are never left on voicemail messages.
- Printed CAREWare reports should not be faxed unless being sent to a fax machine that is demonstrated to be housed in a locked office or secure area.

Physical and Electronic Security:

- Computers used to access CAREWare must:
    - Be located in an agency office setting;
    - Be in a secure area/office and/or behind a door with a locking mechanism;
    - Be password protected at the Windows login level and have a password protected screensaver program installed and activated;
    - Have the monitor facing away from open doorways, hallways, or other areas so onscreen data/information cannot be accidentally seen by non-agency or non-pertinent personnel;
    - Have current, SHP-approved anti-virus software and Windows updates as described in the *Approved Anti-Virus Software* section of this policy.

- CAREWare must not be accessed from any mobile device or unapproved laptop. The procedure for requesting laptop approval is outlined in the Hardware Requirements policy below.
- CAREWare passwords must not be saved anywhere that may be seen by others.
- Users are not permitted to save CAREWare data to their computer without prior LaCAN and SHP approval, which should be requested via an email to the SHP Help Desk at hap@la.gov.
- Users will be automatically logged out of CAREWare after 30 minutes of inactivity.

LaCAN Data System Access:

- Prior to being granted access to confidential information, each CAREWare user must:
    - Complete and submit:
        - Request to Add/Remove User
        - User Confidentiality Agreement
    - Complete the web-based LaCAN Privacy Training

  All are found at http://new.dhh.louisiana.gov/index.cfm/page/1147. All users will also be provided a copy of the current Louisiana STD/HIV Program Security and Confidentiality Policy.
- Access to and use of confidential records in CAREWare is limited to purposes related to each person's designated role ("need to know") at their employing agency. Not all CAREWare users are entitled to view or use all aspects of CAREWare. Full modification rights and view-only rights are defined for each person as determined by the LaCAN Partners and the supervisory staff at each user's employing agency.
- Each person authorized to access CAREWare must have a unique CAREWare username, and CAREWare password to verify authorization to access the LaCAN CAREWare system. Such identification codes and passwords shall be issued and changed regularly in accordance with the LaCAN policies.
- CAREWare accounts are user-specific and may only be accessed by the user assigned to that account.

LaCAN User Passwords:

All CAREWare passwords users must be 8-32 alphanumeric characters, including at least two numbers, at least one upper case letter, and at least one lower-case letter. CAREWare will prompt users to change their password every 30 days.

Passwords may <u>not</u> include the following:

- Any version of the user's name or username;
- User's birth date;
- Agency name or abbreviation;
- Sequential numbers (i.e. 12345678);
- A password already in use by the user for accessing anything else (e.g. VPN, screensaver, or Windows password).

Other Important Security Points to Remember:

- **NO ONE should know your CAREWare password, including coworkers, supervisors or IT. If someone needs access to CAREWare, they should have their own account.**
- Password must be changed after the first log in after being reset to the default password.
- Do NOT use a password that is easily guessed by anyone (e.g., your child's name or your birthdate).
- Do NOT distribute your CAREWare username or password to others.
- Do NOT write your CAREWare username or password where it can be easily accessed by others.
- Do NOT walk away from your computer with the CAREWare browser still up.
- Do NOT leave your computer unattended before logging off.

Client Data Security Breach:

- A security breach can be defined as, but is not limited to, the following:
  - Hardcopy or computer media from CAREWare, including mail outs, containing confidential material is lost or stolen.
  - Hardcopy or computer media from CAREWare containing confidential material has been given or shown to a person who is not authorized to receive it.
  - There is evidence of a break in to an office with a computer able to access CAREWare.
  - There is evidence of someone trying to "hack" into a CAREWare computer or the CAREWare network.
  - There is evidence, through media story or other that someone has obtained confidential material that may have come from the LaCAN system.
- If a breach occurs, the State of Louisiana Office of Public Health STD/HIV Program (SHP) Services Data Manager must be notified immediately at 504-568-7474. If this person is not available, the SHP Data Management & Analysis Unit Manager is notified at the same phone number. SHP will notify all other LaCAN Partners as appropriate.
- All media calls related to a breach must be referred to the SHP Administrative Director.
- Any breach of confidentiality will immediately be investigated to assess causes and implement remedies. Infractions related to inappropriate access to or disclosure of confidential information may result in loss of CAREWare access, disciplinary action, termination of employment, loss of professional licensure, and/or federal, civil, or criminal penalties. (HIPAA Privacy 164.530; 45 C.F.R, §§160.300 et seq., 160.400 et seq., 160.500 et seq., 42 U.S.C. §1320d-6) SHP and LaCAN will comply with all applicable federal and state requirements for the reporting and notification of breaches of protected health information. (45 C.F.R. §§164.400 et seq., R.S. 51:3071 et seq.)

2. Policy & Procedure: Data Sharing in CAREWare

Effective Date: January 1, 2012

Policy

The LaCAN Partners are committed to the sharing of client data between LaCAN provider agencies when appropriate to improve services to persons living with HIV, enhance performance measurement, and increase the quality of Ryan White HIV services data. The LaCAN Partners have established a process for sharing Protected Health Information (PHI) in a confidential environment that complies with the Privacy Regulations of the Health Insurance Portability and Accountability Act ("HIPAA"), the Health Information Technology for Economic and Clinical Health ("HITECH") Act, and all applicable state laws. This effort is intended to minimize the burdens on both patients and service providers to improve coordination and quality of care to patients serviced by Ryan White HIV services providers in Louisiana.

The LaCAN system will utilize client-by-client data sharing for services and clinical information for clients who have received services at a LaCAN provider on or after January 1, 2012. The purpose of implementing client data sharing in CAREWare is for LaCAN providers to have access to service and clinical data entered by other LaCAN providers for the same client. LaCAN users are able to see data only for clients who have received services at their agency or have been referred to their agency by another LaCAN provider using the internal referral function in CAREWare. No LaCAN provider will have access to information on clients that have not received services through their agency.

As of January 1, 2012, all clients receiving services funded by a LaCAN Partner are required to have a signed "Client Consent for CAREWare Data Sharing and Notice of Data Collection" attached to their CAREWare client record. No services or clinical information may be requested or granted sharing in CAREWare if the client has marked the "not shared" option on this form.

If a client who has previously granted providers the right to share services and clinical information in CAREWare wishes to revoke the sharing, their provider must give the client the "Client Revocation of CAREWare Sharing" form to sign. Providers are required to automatically comply with a client's wish to revoke sharing by deactivating services and clinical sharing in CAREWare. This form is to be attached to the client's CAREWare record.

Procedure for Client Consent to Share

- All clients will be presented the LaCAN-distributed "Client Consent for CAREWare Data Sharing and Notice of Data Collection" and the accompanying CAREWare information sheet at the time of intake by their Case Manager (or other appropriate provider staff).
- Provider staff will answer any questions the client has about the consent form. This discussion may take place via phone if the client cannot meet face-to-face. This discussion should be documented in the client's case notes. If staff are unable to answer questions, they are required to document the client's questions and communicate them to their supervisor or designated LaCAN Partner contact.
- After the client signs the form and indicates their sharing preference, the provider will scan the document and attach to the client's CAREWare record. The paper copy of the consent form will be placed in the client's hard copy file at the provider.

- If a client has agreed to share their information, the provider will request services and clinical information to be shared through CAREWare with the providers listed in the CAREWare sharing option.
- Providers currently funded through a LaCAN Partner will grant sharing of services and clinical information for any client with a consent attached to their CAREWare record.
- If a provider fails to grant sharing of services and clinical information when requested by another provider with client consent, a LaCAN Partner data manager will grant the approval in CAREWare.

Procedure for Deactivating Client Consent to Share

- When a client expresses to a LaCAN provider that they no longer wish to share data in CAREWare, that provider will supply the client with the "Client Revocation of CAREWare Sharing" form to sign.
- After the client signs the form revoking sharing, the provider will scan the document and attach to the client's CAREWare record. The paper copy of the consent form will be placed in the client's hard copy file at the provider.
- The provider will deactivate their services and clinical sharing in CAREWare.
- The provider will notify their designated LaCAN Partner contact within 1 business day that the client has revoked sharing and the LaCAN Partner will revoke all other sharing in CAREWare for the client.

3. Policy: Hardware Requirements

Effective Date: April 1, 2011

Hardware Requirements

The following hardware is required for all sites and computers accessing CAREWare:

- Broadband connection
- Color screen
- Windows 7 operating system or higher
- LaCAN approved antivirus software (see Appendix C for list of LaCAN approved antivirus software.)

Portable Computing Devices (Laptops)

CAREWare is not approved for use on laptop computers without specific approval from the Louisiana Department of Health & Hospitals' Office of Public Health STD/HIV Program and adherence to the following requirements:

- The provider must submit a form to SHP stating the following:
    - The laptop user has a separate signed statement indicating receipt and understanding of laptop agreement/requirements;
    - The laptop is docked; and
    - The laptop does not leave the office.
    - The Laptop Approval form can be found here:

- http://new.dhh.louisiana.gov/assets/oph/HIVSTD/hiv-aids/2016/CAREWare_Computer-Laptop_request_Form.pdf

- The provider must verify annually that the laptop designated for CAREWare use still meets the requirements in the submitted letter.

4. Policy & Procedure: Required Fields & Data Entry Timelines

Effective Date: January 1, 2012

Policy

The LaCAN Partners strongly encourage providers to use the CAREWare system to the fullest extent of its capabilities. Providers are required to ensure the correct entry and consistent updating of required client data and service elements in CAREWare for each client. CAREWare is intended to be a "real time" system, and accomplishing this requires timely data entry.

Providers are required to develop written procedures addressing the implementation and quality management of the elements contained in this policy. Provider policies should at a minimum include details of who will be responsible for the entry of data and the monitoring of data quality. The LACAN Partners will monitor the language and implementation of these policies on a regular basis.

Data Quality Management Plan Minimums

Data Quality Management Plans should at a **minimum** include:

- A plan to conduct data security checks with documentation of checks:
  - See LaCAN Data Management Policies and Procedures: Physical and Electronic Security
  - Ensure that computers are:
    - Located in an agency office setting
    - In a secure area/office and/or behind a door with a locking mechanism
    - Are password protected at the Windows login level and have a password protected screensaver program installed and activated
    - Have the monitor facing away from open doorways, hallways, or other areas so onscreen data/information cannot be accidentally seen by non-agency or non-pertinent personnel
    - Have current, SHP-approved anti-virus software and Windows updates
  - Ensure that CAREWare is not accessed from any mobile device or unapproved laptop.
  - Ensure that CAREWare passwords are not be saved by anywhere accessible by others.
  - Ensure that Users are not saving CAREWare data to their computer without prior LaCAN and SHP approval.

- A plan to conduct periodic data quality checks and how this will be documented:
  - Compare CAREWare to Client files for accuracy and timeliness of data entry.

- Establish a policy outlining how many clients files will be checked and at what frequency.
    - Compare a **minimum** of 10% of active clients each quarter

- A policy for determining when a client's case is considered closed: (After a certain number of attempts to contact, a certain number of months since last service, etc.)
  - Develop a plan to ensure that clients' enrollment status is current, closing out those who are no longer receiving services based on your established policy.

- A plan to check that all active clients are eligible to receive Ryan White Part B services. Documentation in file and CAREWare must reflect this.
  - All active clients are HIV positive
  - All active clients are currently Louisiana residents
  - All active clients have an eligible Federal Poverty Level
    - No greater than 300%

- A plan detailing how clients' eligibility will be reviewed every six months

Individual users and their employing agencies are responsible for the validity, accuracy, and security of the data they collect and enter into the LaCAN system. Invalid, inaccurate, or incomplete data will result in a corrective action plan by the LaCAN Partner providing the agency's primary funding.

The fields listed below represent the minimum requirements for data entry as necessitated by federal, state, and city reporting requirements. Providers may require additional data entry through their internal policies.

Procedure: Required Fields
See Appendix A: LaCAN CAREWare Data Entry Required Fields for fields required by each LaCAN Partner. See Appendix B: Ryan White Part B Required Fields for additional required fields for entering services.

Procedure: Data Entry Timelines

A. Newly enrolled clients will be added to CAREWare within 5 business days of their enrollment date.
B. Services will be entered into CAREWare by the 5^{th} business day of the month following service provision or invoice receipt, unless an extension is requested from the provider's LaCAN funder. *(Exception: Louisiana Health Insurance Program services, ADAP services, and other services entered through Provider Data Import)*
C. Outgoing referrals must be entered within 5 business days of initiation. Referral outcomes must be entered within 5 business days of the outcome information being received.

D. Changes to client information (demographic data, addresses, insurance coverage, and annual review information) will be updated in CAREWare within 5 business days of receipt by the LaCAN provider.

Procedure: Changes to Common Client Data Fields
Many fields in CAREWare are automatically shared with other providers the client receives services from. Providers will note in the *Common Notes* box on the Demographics tab when they update client information, including the date of the update, initials of the updater, agency name, and what was changed. The following example is suggested:
"12/1/2011 AgencyX OT: Updated address"

<u>Common fields in CAREWare are:</u>
Name
Date of Birth
Gender
Sex at Birth
Address, City, State, County, Phone
Race, Ethnicity
Hispanic Subgroup
Asian Subgroup
HIV Status, HIV+ Date, AIDS Date
HIV Risk Factors
Common Notes
Vital Status
Deceased Date
Primary Insurance
Housing/Living Arrangement
Annual Household Income
Number of People in Client's Household
Poverty Level
All fields on the Custom Annual Tab
All fields on the Client Information Tab
All fields on the Emergency Contacts Tab
All fields on select subforms
Most Attachments

5. Policy & Procedures: Entering Client Identifiers & Addresses

Effective Date: January 1, 2012

<u>Policy</u>
LaCAN Providers are required to follow the procedures below for entering client identifiers and addresses in CAREWare. Each provider is expected to develop internal policies that address who will be responsible for adding new clients to CAREWare and how the provider will monitor the accuracy of the client information entered.

Procedures for Entering Client Identifiers & Addresses in CAREWare

CLIENT NAMES

Client names must be entered using uniform rules to reduce the number of duplicates and ensure that clients can be properly matched between databases. Names in CAREWare are an official record of who is served. Do not use nicknames, aliases, John/Jane Doe, or anything other than a client's legal and verifiable name. ***If the name on a client's official ID conflicts with their intake form or another handwritten document, always use the name on the official ID.***

FIRST NAME

Enter the **legal** first name of the client from an identification card such as driver's license, birth certificate, social security card, passport, or other official document.

- Capitalize the first letter of the first name. If the first name is made up of two names or two parts of a name (e.g. Joe Bob or DSario), capitalize the first letter of each name or each part of the name.
- **Do not use** hyphens, apostrophes, accents (e.g., é ò), tildes (e.g., ñ ã), or other symbols (e.g., ü å ĉ), in the first name.
- Do not put "-C" or any other non-identifier information in any name field.
- **Do not put any suffixes** (e.g. Jr, Sr, III) in the first name field. If essential for contacting the client, put this in the last name field as instructed below.
- **Do not put initials in the first name field** – only the full legal first name.
- If a client is transgender but has not legally changed their name, put their preferred first name in parentheses after their legal first name (e.g., client legally named William but goes by Tanya would be "William (Tanya)").
- **Do not use nicknames or abbreviations in the first name field** (e.g. client is legally named Anthony but goes by Tony; this would be "Anthony").

Examples:

First Name	**How to Enter in CAREWare**
John, Jr.	John
D'Sario	DSario
Raúl	Raul
Kathryn, but client goes by Kate	Kathryn
William, but client goes by Tanya	William (Tanya)

MIDDLE NAME

Enter the **legal** middle name of the client from an identification card such as driver's license, birth certificate, social security card, passport, or other official document.

- If the client does not have a middle name or the client's middle name is unknown, leave it blank. A lack of a middle name will not impact the URN.
- The guidance provided for entering the first name should also be followed for entering the middle name.
- If only the middle initial is known, enter the initial with no period.

LAST NAME

Enter the **legal** last name of the client from an identification card such as driver's license, birth certificate, social security card, passport, or other official document.

- Capitalize the first letter of the last name. If the last name is made up of two names or two parts of a name (e.g. Johnson Smith, McMurphy, or O'Malley), capitalize the first letter of each name or each part of the name.
- If a client uses multiple last names (this may be common among Hispanic clients), follow legal documents provided by the client. In the absence of documentation or if the documents have conflicting information, use the client's first surname as the beginning of the last name field. Additional surnames may be added in the field after the first surname.
- **Do not use** apostrophes, accents, tildes, or any symbols other than hyphens in the last name. Use hyphens only to match their official identification, as shown in the next item and in the example below.
- If a client's name is legally hyphenated, put the names in the same order that they appear on the client's official identification (i.e., if name appears as Johnson-Smith on driver's license, do *not* enter as Smith-Johnson).
- If a client's legal name has a suffix, or a suffix is necessary to differentiate them when contacting clients, then a suffix may be included in the last name field. To add a suffix, put a comma after the last name, then a single space, then the suffix, and then a period. **For examples:** Joe Williams, JR. or Don Juan, III.
- **Do not put initials in the last name field** – only the full legal last name.

Examples:

Last Name	**How to Enter in CAREWare**
O'Connor	OConnor
Johnson-Smith	Johnson-Smith
Turner, JR.	Turner, JR.
Ramírez de Arroyo	Ramirez de Arroyo
Peña	Pena

Note: *Hispanic Surnames*

Many persons of Hispanic origin use two last names or surnames. The two surnames are referred as the first apellido and the second apellido. Many Hispanic Americans, such as Rafael Vicente Correa Delgado have one or two given names (Rafael Vicente in the example), a paternal surname and a maternal surname. In this example the person may be referred to as Mr. Correa or Mr. Correa Delgado but never as Mr. Delgado.

A child is given the surname of both his/her father and mother. The child receives the first surname of his/her father (which becomes the child's first surname) and the first surname of his/her mother (which becomes the child's second surname.)

When a woman gets married, she often does not change her name. Her first surname remains the same (her father's first), but her second surname could change to that of her husband. Sometimes the word 'de' is added between the two surnames to indicate that the second surname is her husband's. In today's world, many women do not change their name for professional or personal reasons. Unlike marriage-related name changes for women in the United States, typically under Hispanic naming convention, the woman in the marriage never changes her first surname (the name from her father.)

When entering the legal names of Hispanic clients into CAREWare, it may be somewhat confusing which name should go in the "last name" field. Follow the convention used on any legal document that is presented by the client. In the absence of documentation and/or if the document has conflicting information, use the client's father first surname (first apellido) as the beginning of the last name field. Additional surnames may be added in the field after the first surname.

The following table provides some an example to illustrate the above explanation.

Father	**Mother before marriage**	**Mother after marriage**	**Child**
Legal Name: *Gabriel Eligio García* Usually referred to as: *Mr. García* First given name: *Gabriel* Second given name: *Eligio* Father's first surname: *García*	Legal Name*: Luisa Santiaga Márquez Iguaran* Usually referred to as: *Ms. Márquez* First given name: *Luisa* Second given name: *Santiaga* Father's first surname: *Márquez* Mother's first surname: *Iguaran*	Legal Name may be: *Luisa Santiaga Márquez Iguaran (de) García* *Luisa Márquez García* *Luisa Márquez-García* Usually referred to as: *Mrs. Márquez* *Mrs. Márquez García* *Mrs. Márquez-García*	Legal Name: *Gabriel García Márquez*

CLIENT DATE OF BIRTH

Enter only correct, legal, and verifiable dates of birth for clients. The date of birth should be taken from a form of official identification such as a driver's license or Louisiana identification card. Do not estimate the date of birth for any client or enter a "placeholder" date of birth. **If you need to add a client to CAREWare and do not know their date of birth, contact SHP for assistance.**

CLIENT GENDER

All LaCAN providers will use the Ryan White Services Report (RSR) guidance for entering client gender:

Indicate the client's gender (the socially and psychologically constructed, understood, and interpreted set of characteristics that describe the current sexual identity of an individual) based on his or her self-report.

- **Male –** An individual with a strong and persistent identification with the male sex.
- **Female –** An individual with a strong and persistent identification with the female sex.
- **Transgender –** An individual whose gender identity is not congruent with his or her biological gender, regardless of the status of surgical and hormonal gender reassignment processes. Sometimes the term is used as an umbrella term encompassing transsexuals, transvestites, cross-dressers, and others. The term transgender refers to a continuum of gender expressions, identities, and roles, which expand the dominant cultural values of what it means to be male or female.

SEX AT BIRTH

Indicate the client's sex assigned at birth. This field will auto-populate based on the selected client gender unless "Transgender Unknown" is selected.

- **Male-** Individual assigned a male sex at birth.
- **Female-** Individual assigned a female sex at birth.

Further clarification expanding on the RSR definitions:

- If a client does not identify as transgender, use Male or Female as appropriate for their sex.
- If a client identifies as transgender or has transitioned to a different sex, select either "Transgender Male-to-Female" or "Transgender Female-to-Male" in the gender field. Their gender does not need to have been changed on their official identification to be marked as transgender in CAREWare.
- If you are attempting to add a client to CAREWare who is transgender and is likely to have received Louisiana Ryan White services in the past 10 years, contact your CAREWare administrator if you are unable to find a matching record.

CLIENT ADDRESS

Providers are required to enter the complete physical address for their use in maintaining client communications and accurate reporting.

If a provider *changes* any of the client address fields, the provider will note that a change was made in the common notes section of the client record. The note will include the date the change was made, the initials of the individual who made the change, and the agency at which the individual works.

Example: Client address changed 6/25/11 by AR at Agency ABC.

Adding/Removing Users & Connecting to the LaCAN System

Requesting to Add/Remove a CAREWare User
Each provider should designate a person within their program who is responsible for coordinating new user information and software installation.

<u>To add a new user:</u>

1. Complete the "LaCAN Request to Add/Remove User" form. Have the new user and the user's supervisor sign it.
2. Review the "LaCAN User Confidentiality Statement" with the new user. Have the new user and the user's supervisor sign it.
3. Have the new user complete the online LaCAN HIPAA training. Users must have a score of at least 80% to gain access to CAREWare. This score is sent automatically to LaCAN and there is not a time limit for the training. The user may complete the training multiple times to get the 80% score.
4. Fax or scan & email the user's forms (Add form and Confidentiality form) to your agency's designated LaCAN Partner.
5. The LaCAN Partner will approve/deny the request and forward the forms to SHP. SHP will set up the user in CAREWare and contact the agency with the user's login information.

<u>To remove a user from the CAREWare system after they leave the agency or no longer need access:</u>

1. Complete the "LaCAN Request to Add/Remove User" form.
2. Fax or scan/email the form to your agency's designated LaCAN Partner.
3. The LaCAN Partner will forward the form to SHP for account deactivation.

Find the Add/Remove user forms here:
http://new.dhh.louisiana.gov/assets/oph/HIVSTD/hiv-aids/2015/CWUserForm-Revised.docx.pdf

Installing CAREWARE Client Tier
The RW CAREWare Client Tier is a small application installed on your machine which allows you to access the RW CAREWare environment hosted for the State of Louisiana by AJ Boggs & Company. It is a relatively easy install process, but does require "Administrative Permissions" to install correctly. This part of the manual provides instructions for installing the CAREWare client tier and configuring it to access the CAREWare server.
If you have issues installing the CAREWare Client Tier please contact the external host, AJ BOGGS directly at 1-877-IXN-4IXN.

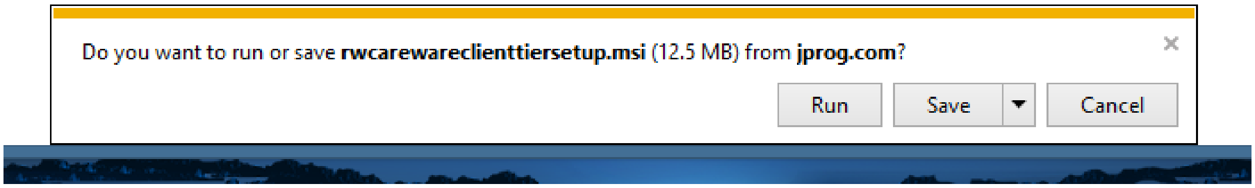
IMPORTANT INFORMATION FOR IT STAFF: CAREWare runs over port 8124 so the computer accessing the system will need to have this port open. We also recommend giving the port priority to ensure a stable connection betwenn the client tier and the

NOTE: *You will need administrative rights on your computer or you will need an IT person to install the CAREWare client tier for you.*

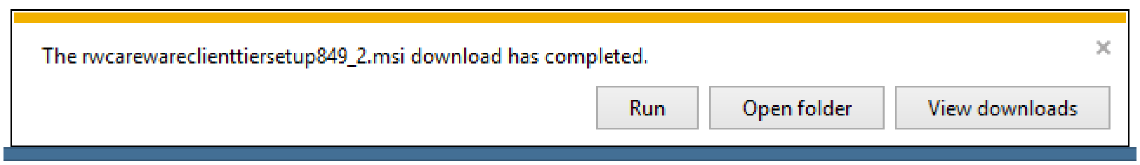
1) 1) Open your favorite web browser (Internet Explorer, Firefox, Google Chrome, etc)

2.) Navigate to the following web address:
http://www.jprog.com/tools/frmwk4.5.1/Build900/RWCAREWareClientTierSetup.exe

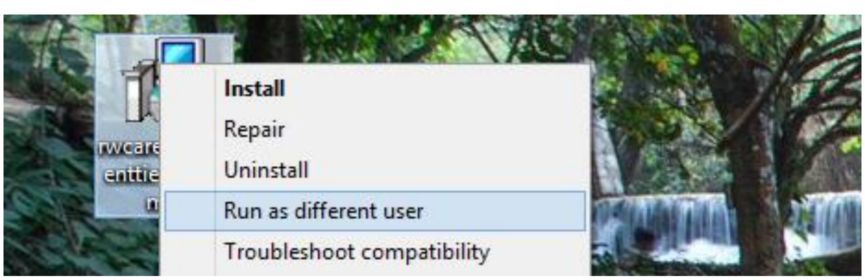
   a. Depending on the browser you use, you will be prompted in different ways to download the installer file. Here's how it looks in Internet Explorer:



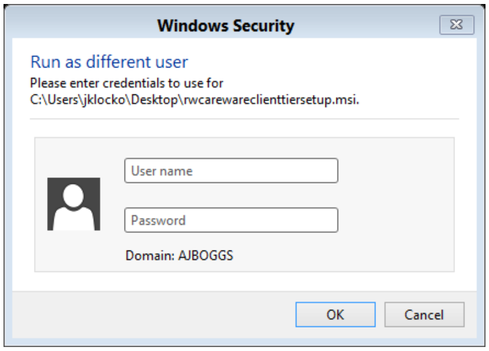
2) Do not click "Run." Instead, click the drop down arrow next to "Save" and click "Save As." A window pops up asking where you want to save the file.
3) Once the download completes, you can click "Open Folder," as shown below, or navigate to the location that you saved the file. Save the file to C:\Program Files (x86)\CAREWare\RW CAREWare Client Tier\



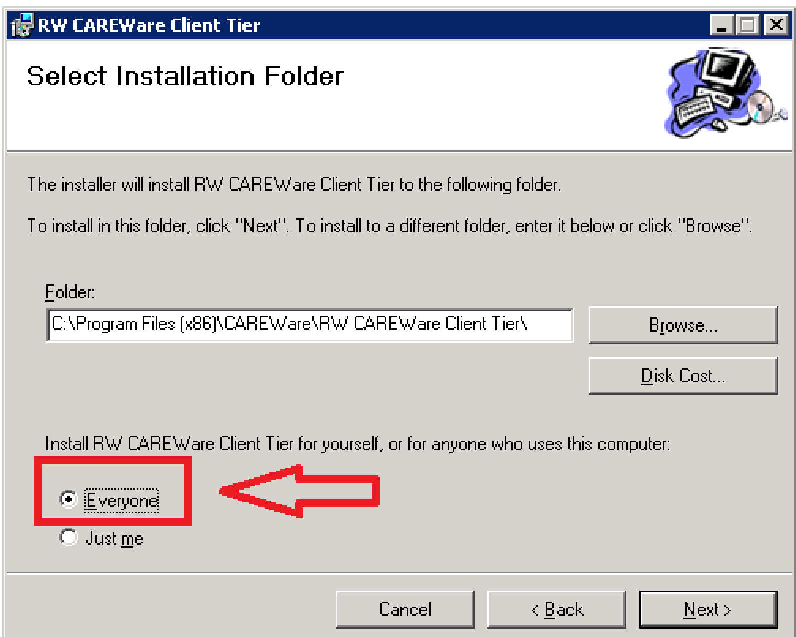
4) Here is where you must have administrator permissions to properly install the file. Hold the Shift key and right click on the file.
   a. You will see a menu pop up with several options, one of which is "Run as different user." **If you click simply "Install" and you do not have administrator permissions on your machine, the installation will not proceed properly and you will later receive a 2869 error.**
5) Click "Run as different user," as shown below.



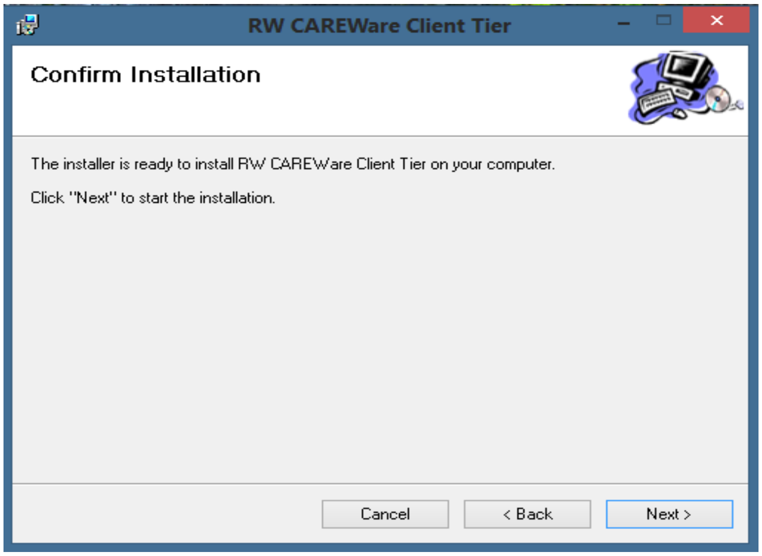
6) A “Windows Security” dialog box will pop up, as shown below, asking for a username and password. You must enter credentials of a user with administrative permissions in order to continue.



Once you have entered the correct credentials, the RW CAREWare Client Tier installer runs. Click “Next” once to get to the “Select Installation Folder” window. On this window, you must be sure to check the box for “Everyone,” as shown below, in order for the installation to continue correctly.



7) Click Next to continue to the next screen. You will see the “Confirm Installation” screen, as shown below. Click Next.



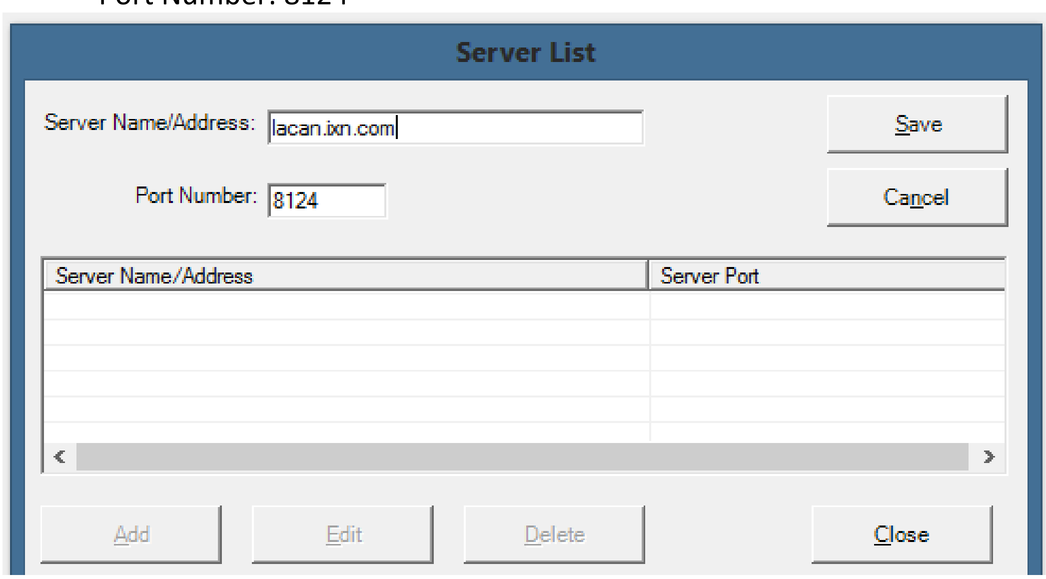
8) Click the "I Agree" option to agree to the License Agreement, and click "Next".
9) The installer will install the Client Tier, and you are presented with the "Installation Complete" window. Click Close.
10) The RW CAREWare Client Tier is now installed, and the "Run RW CAREWare" program is now in your programs list. You can get to it through the Start Menu.

Adding the CAREWare Server

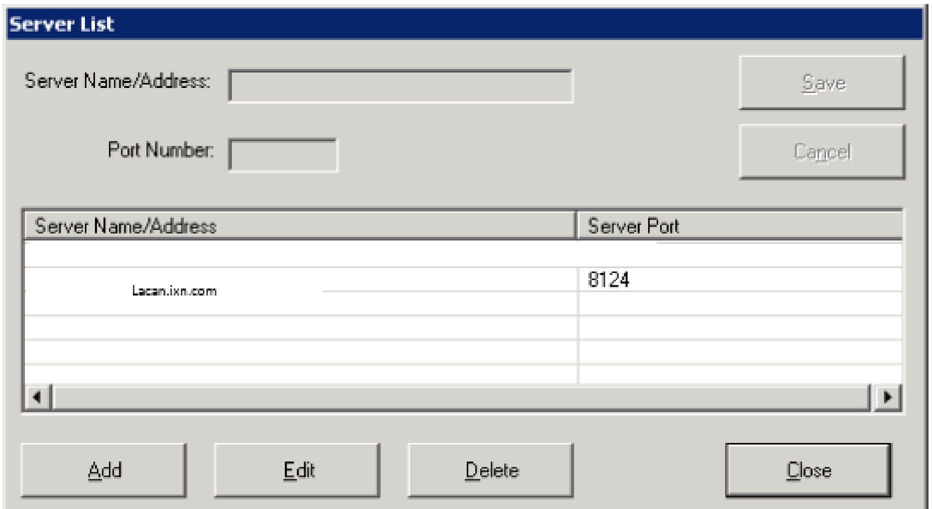
1) Open the CAREWare client and select **Options >>**

2) Click on **Server List**

3) Select **Add** and enter the following:
Server Name/ Address: lacan.ixn.com
Port Number: 8124



4) Click **Save.** It should look similar to the picture below (you will most likely have another entry above the one you just entered)



5) Click **Close** to return to the login screen
6) Select the new server you just entered from the Server pull down menu

Logging into CAREWare

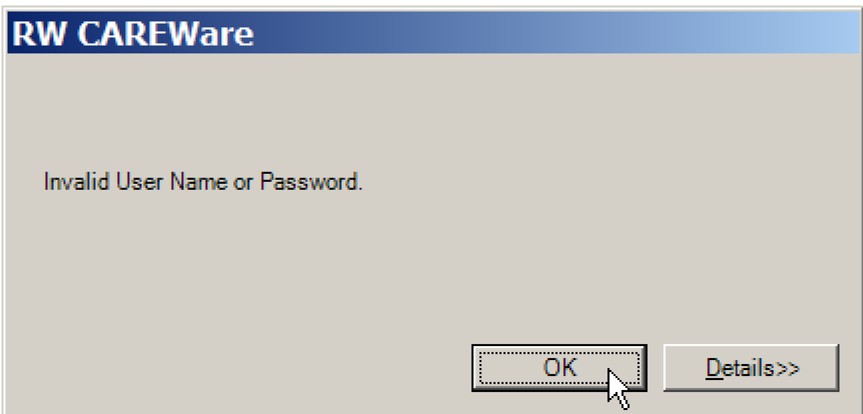
1) Click on the CAREWare logo on your computer.

The CAREWare login screen will appear. First check to ensure that CAREWare is connected to the correct server. The CAREWare you use must be directed to the correct server at SHP. If you select the “Options” button on the login screen, two additional fields, “Server” and “Port” will open (shown below). These fields should be set to lacan.ixn.com and the port should be set to 8124.

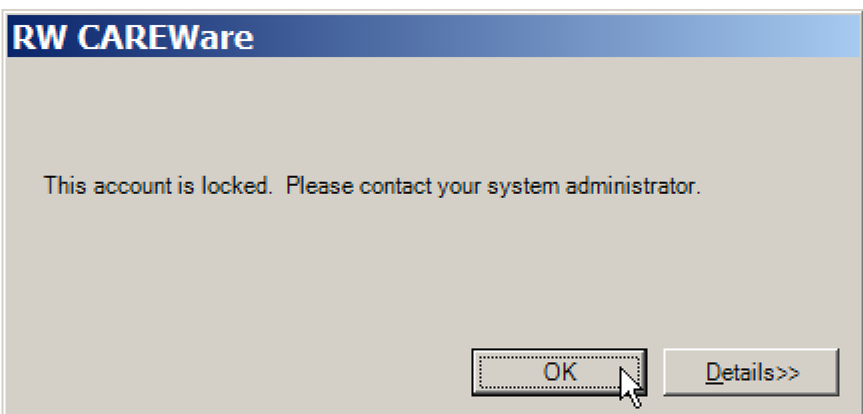
If your server address is different from the one shown above, or you have any trouble connecting to the server, contact the help desk at hap@la.gov.

Enter your user name in the "User Name" field. The user name is not case sensitive. Then enter your password in the "Password" field. The password is case sensitive so make sure to use UPPER or lower case letters as needed.

If you cannot remember or mistype your username/password, you will see an error screen that looks like this:

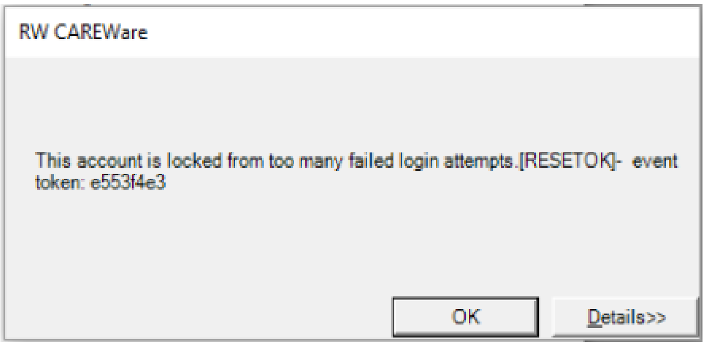


After three consecutive failed password entries, your account will be locked.



Resetting Your Password

The Password Reset Manager feature is triggered when a user account is locked because he or she entered an incorrect password more than three times. Once a user account is locked, CAREWare will show the following message:

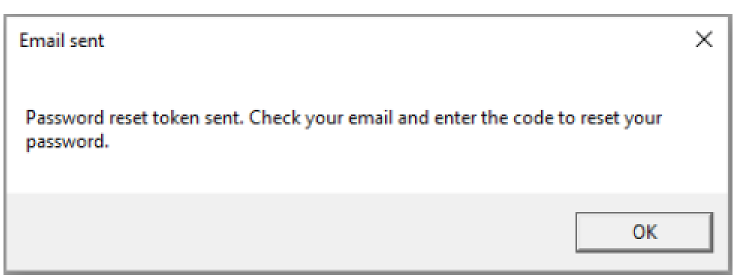


Once the user account is locked, a ***Reset** Password* button will be displayed.

1. Click ***Reset** Password*.

2. Click *Send **reset** code to user email*.

3. Click *OK*.



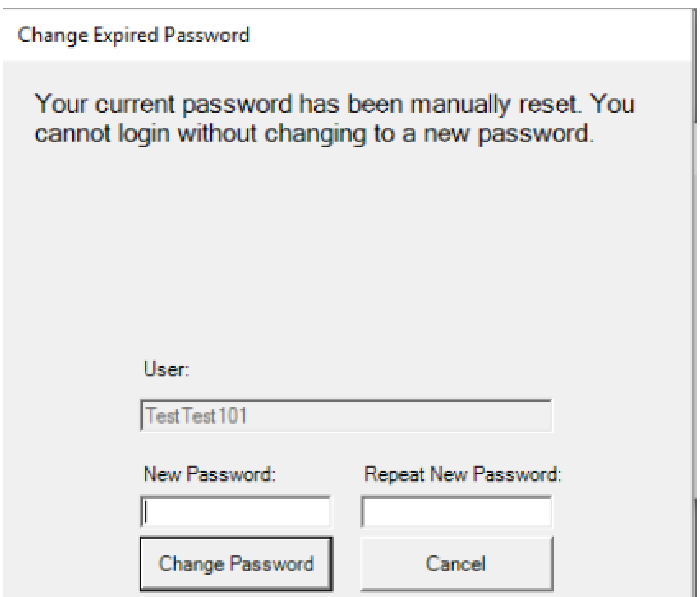
The user will receive an email like this:

A Password reset token was requested for user TESTTEST101. Click the Reset Password link on the login form and enter the following token: 6c621f6

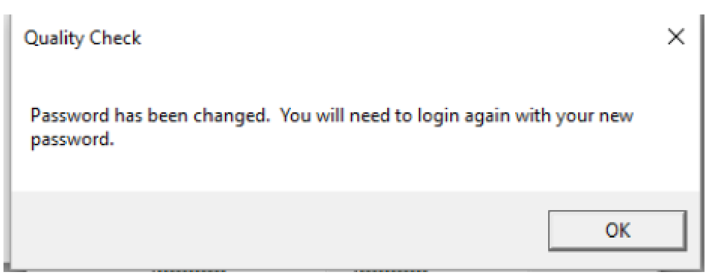
This token will be valid for 1 hour from the time the email was sent.

4. Enter the token from the email

5. Click Submit.
6. Enter a new password.
7. Click *Change Password*.



The user can now log into CAREWare with the new password.

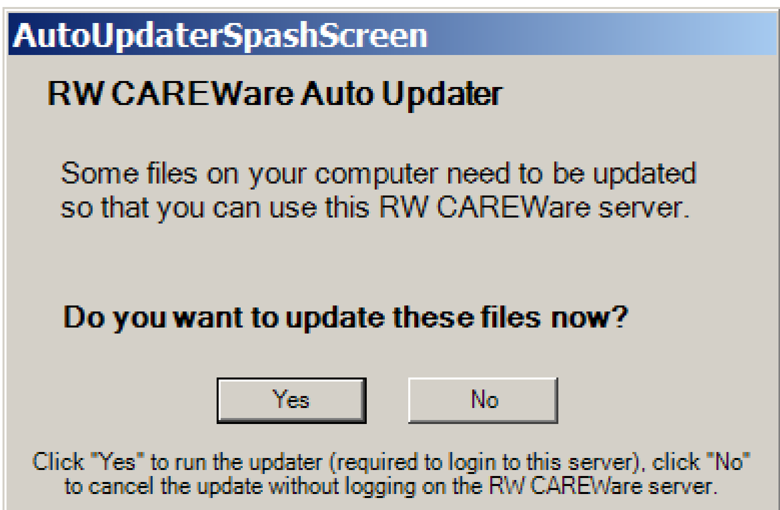


IF YOU CONTINUE TO HAVE ISSUES LOGGING INTO CAREWare CONTACT YOUR DESIGNATED LaCAN PARTNER TO HAVE YOUR ACCOUNT UNLOCKED.

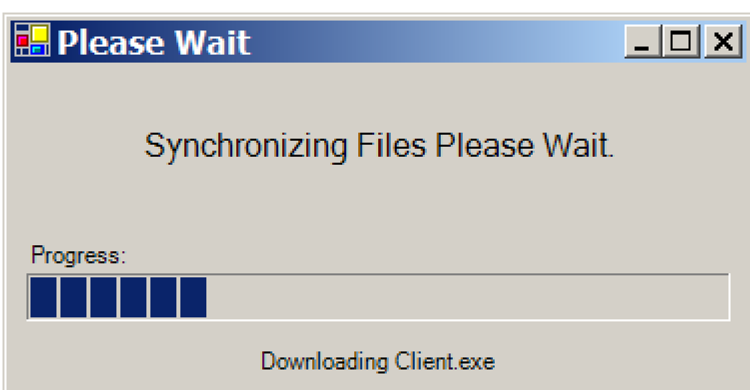
There is no penalty for forgetting your password.
Forgetting your password is preferable to having it written down or accessible to others.

Software Updates

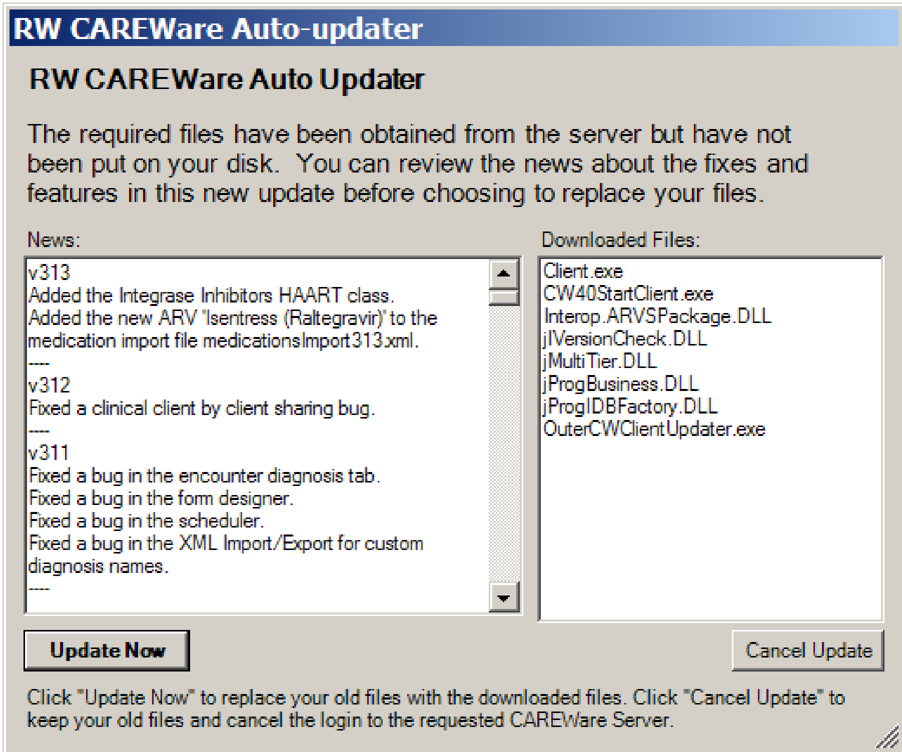
All software updates are conducted by the "Business Tier" part of CAREWare, which is housed with our external host, AJ Boggs. This means that local agencies do not need to track or schedule any program updates. When the software has been updated on the business tier, the local user will receive a prompt to install the new files. This prompt (shown below) will occur the first time the user attempts to log-in after the Business Tier has been updated.



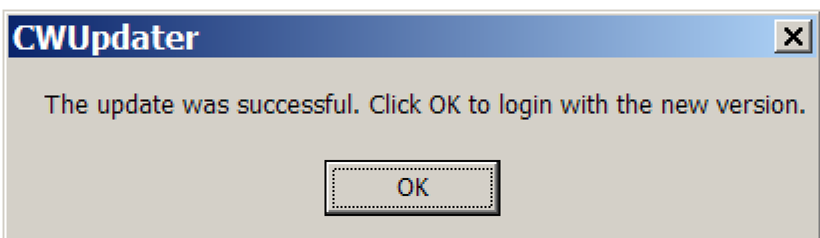
Select *Yes* and you will see a Progress screen (shown below) advising you that the files are being synchronized.



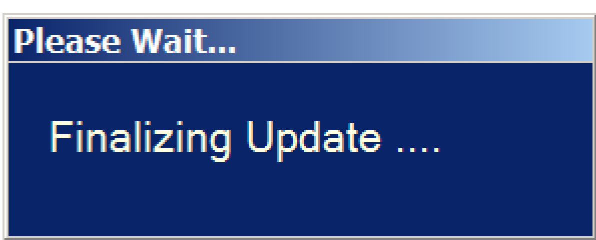
The next screen (shown below) will provide an overview of the files that are being updated. Select *Update Now* in the bottom left corner of the screen.



Once the update is complete and you receive the Success! Message (shown below), you will need to log-in again to the new version.



The update will then finalize.



Next, you will need to log in to the new version.

Once you have successfully logged in, the main menu will appear (shown below.)

The **main menu** will allow you to select your next task.

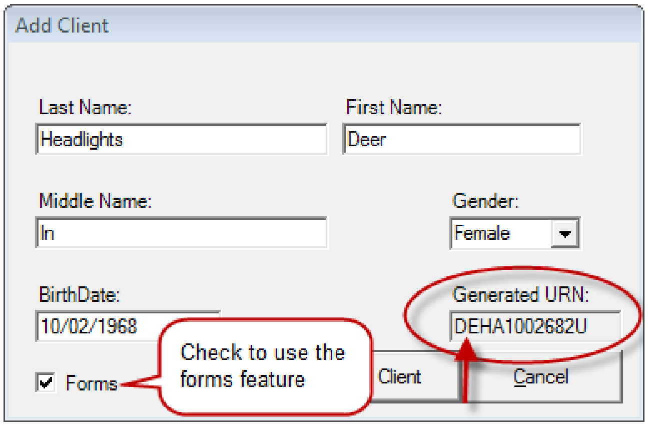
- The *Add Client* button opens a screen for you to add a new client.
- The *Find Client* button opens a search screen to search for an existing client.
- The *Reports* button opens a report menu screen for pre-built and custom reports.
- The *Administrative Options* button will allow you to access the *Performance Measures* worksheet and the *Clinical Encounter Setup* functionality.
- The *Rapid Service Entry* button opens a form for entering multiple services at once without having to open each individual client record.
- The *Log Off* button will end your CW session but leave the log-in screen open on your computer.
- The *Exit* button closes CW.
- If there are pending referrals, a hyperlink will display on the right side of the screen for quick access to a list of the pending referrals.

Note: Options that are "greyed out" such as Pharmacy, Appointments, My Settings and Orders in the above menu are not available for use. Users may have access to different menu options depending on their role within the case management program

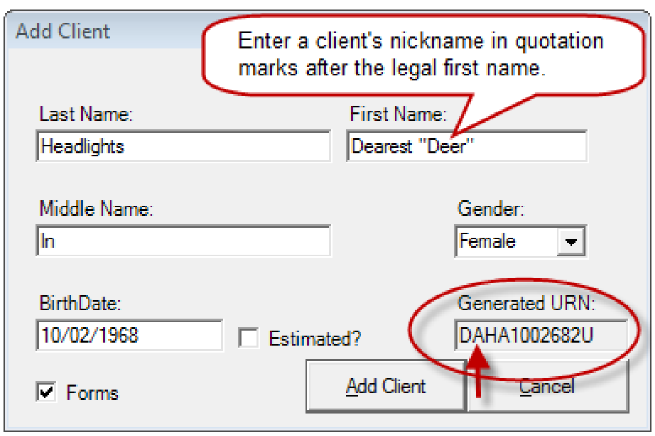
Adding a New Client

REFER TO THE POLICY FOR CLIENT IDENTIFIERS & ADDRESSES WHEN ENTERING NEW CLIENT INFORMATION

To add a new client, select *Add Client* from the main menu. Enter the client's name, gender, & birth date. Do not use an estimated birthdate and do not check the *"Estimated?"* box. Once all the information is completed, select *Add Client*.



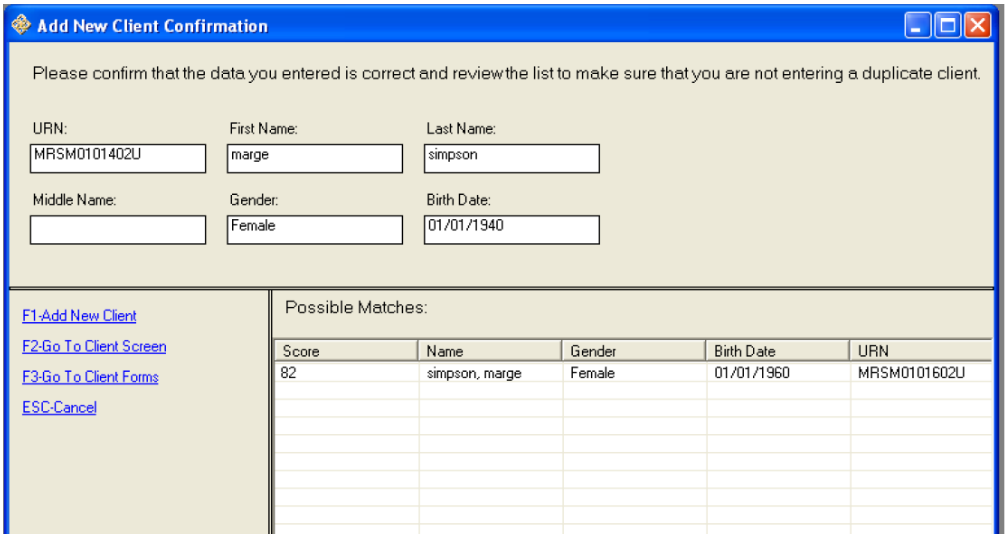
CW will create a *Generated URN* based on the 1st and 3rd letters of the first name, the 1st and 3rd letters of the last name, the date of birth and a code for gender. If you enter a nickname rather than the full legal name, the URN will change. CW uses the URN to determine if the client is already in the database and to generate an unduplicated client count for many reports. Therefore, it is very important that all *Add Client* entries are accurate. Note the difference between the URNs in the two screens below for Dearest Headlights and Deer Headlights.



Resolving Possible Duplicates When Adding Clients

When you enter a client in CAREWare who has previously been entered by someone else, one of two things will happen:

If the client was previously entered *by your agency* then you will see this screen:



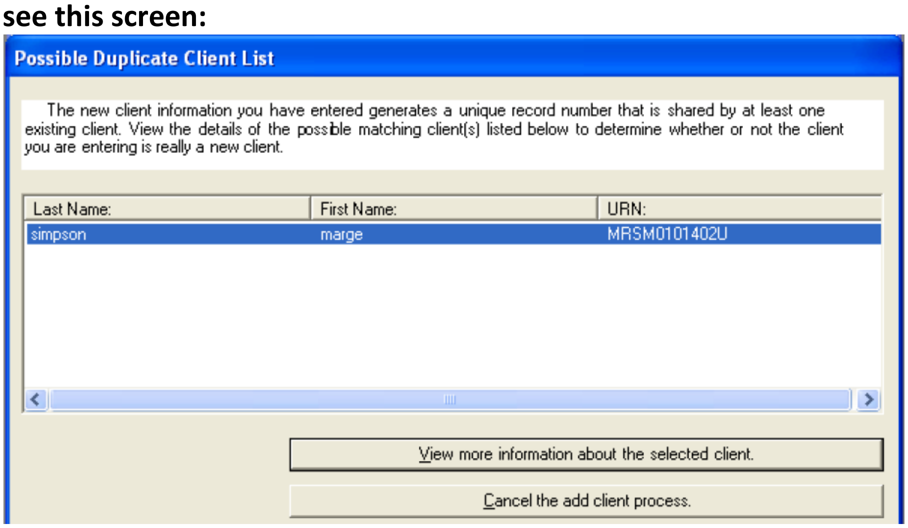
On this screen, you have the information for the client you are attempting to add at the top and a possible match in the Possible Match section. These clients are similar because they have very close URN components; only the birth year does not match.

In this case, you may click on the Possible Match client row and then click Go To Client Screen (F2) to view the record and determine whether this is the same client.

If this is the same client: Proceed with navigating the client record and entering information.

If this is NOT the same client: Click CLOSE on the open client record (shown above). Click ADD CLIENT again and then click the “Add New Client” (F1) link on the “Add New Client Confirmation” screen.

If the client was previously entered *by another agency and is new to your agency* then you will see this screen:



This screen tells you that there is another client record with a similar URN to the record you want to add. CAREWare will let you see *limited* information about the potential match so that you can determine whether this is the same client.
Select the record and click the “View More Information About the Selected Client” button:

If this is the same client: Click “this is the client I was attempting to add…” to confirm the client is a match and proceed with entering/updating information..

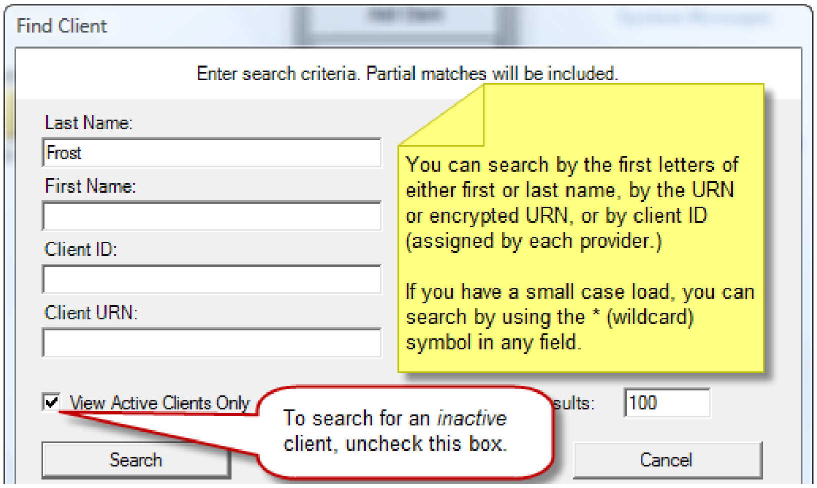
If this is NOT the same client: If there were multiple potential matches on the previous screen, click “return to the list of possible matches…” and repeat the check for the next possible client match. If this was the only potential match, click “the client I am adding is not on the list…” to create a new client record.

IF YOU HAVE ANY QUESTIONS ABOUT ADDING CLIENTS OR NEED HELP DETERMINING IF A CLIENT IS ALREADY IN CAREWARE, EMAIL THE HELP DESK AT HAP@LA.GOV.

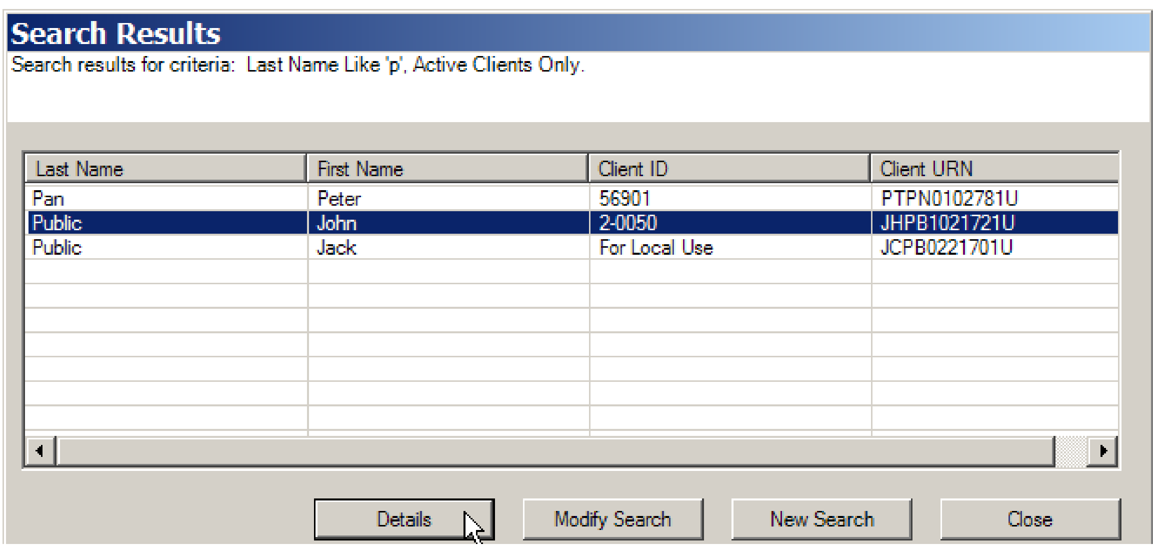
DO NOT INCLUDE ANY CLIENT INFORMATION IN YOUR EMAIL.
YOU WILL BE CONTACTED BY THE HELP DESK.

Finding a Client

To search for a client, select *Find Client* from the main menu. Enter search text into any of the fields and press *Search.*



If your provider has custom client fields that are set-up for searching, they will display in the *Find Client* box.
The results window will provide a list of clients who match the criteria entered into the search screen.



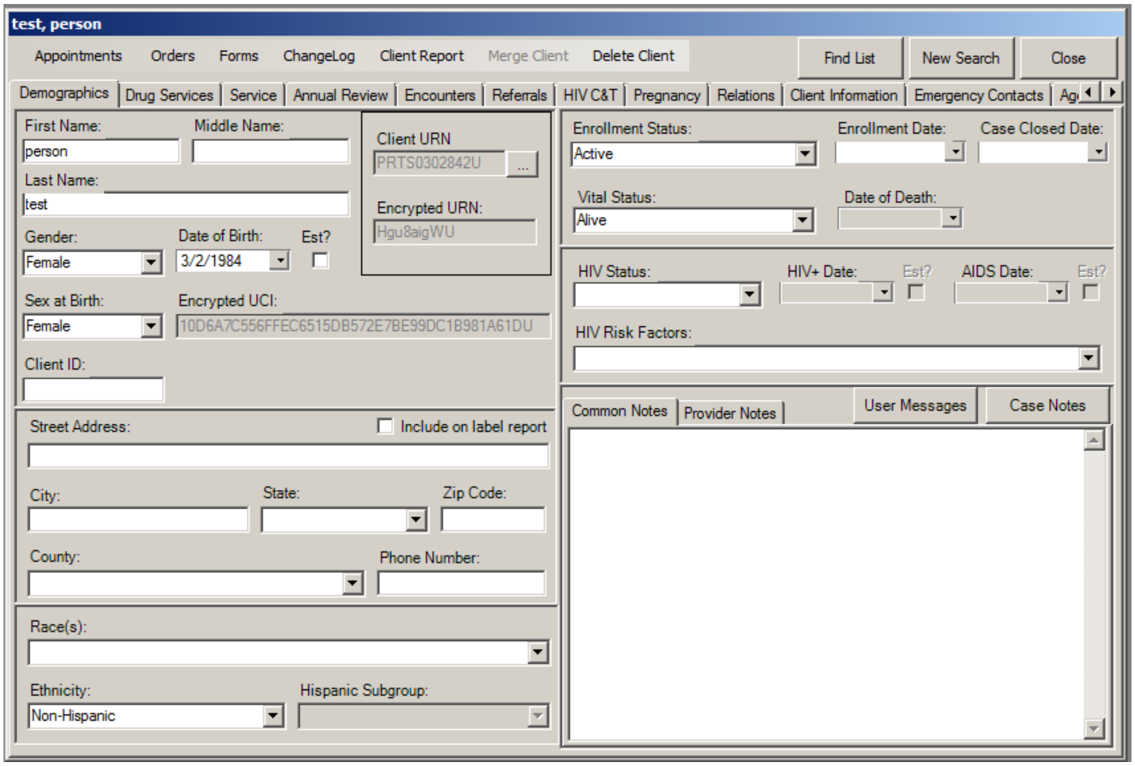
Select the record you are looking for and double-click or highlight and select *Details* to pull the client's record up.

If the results do not contain the client you are searching for, select *Modify Search* and edit your search criteria. To begin again, select *New Search* and to leave the search process, select *Close*.

If you cannot find an existing client after thoroughly searching, contact your LaCAN contact for assistance. *Do not add a new client record if you have reason to believe the client has previously received services at your agency.*

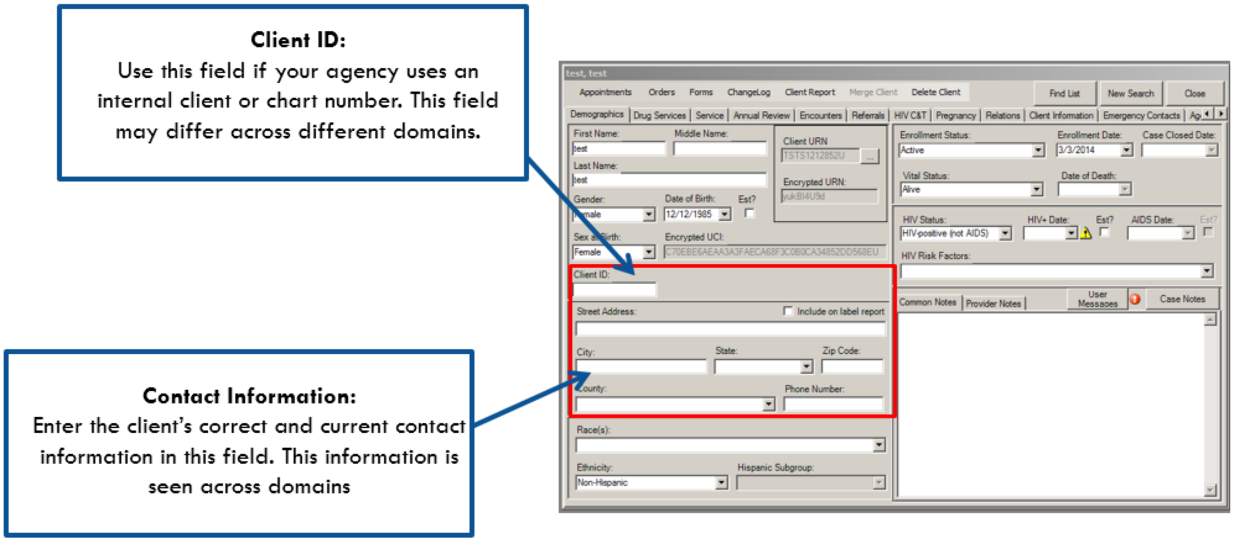
Note: You can also access the *Find Client* function from the client screen, by selecting *New Search*.

Demographics Tab

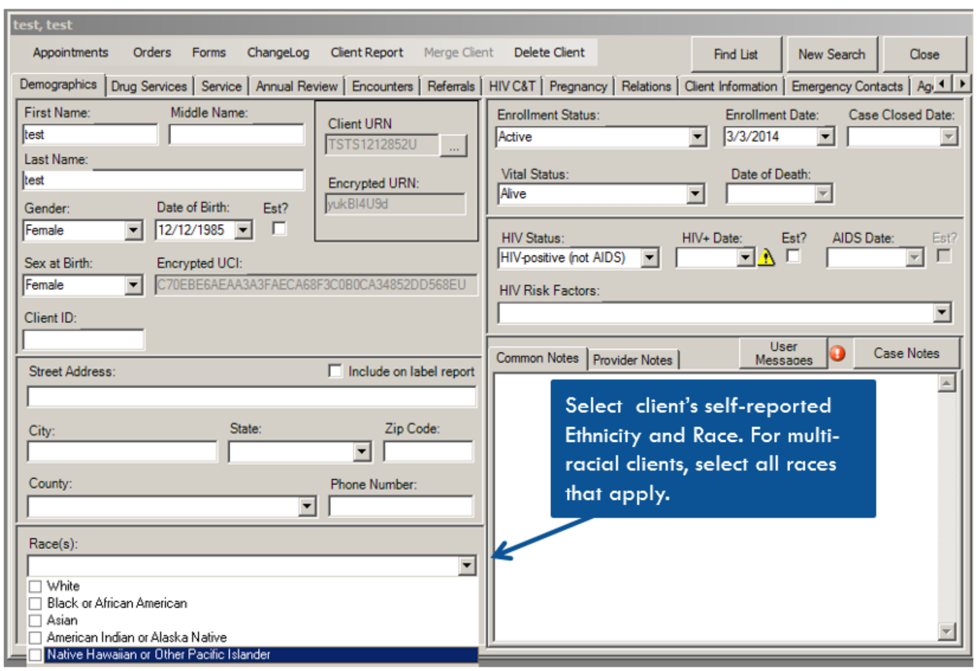


After finding or adding a client, the client's file will open to the *Demographic* tab. Enter the following fields on the *Demographics* Tab:

- *Client ID*: This field is for use at the local level. If your agency uses an internal client or chart number, enter it in this field. A client may have different values in the field at different agencies.
- Contact information: Enter the client's *Address*, *City*, *State*, *Zip Code*, *County*, and *Phone Number*. You must select "Louisiana" form the drop down menu in the *State* field before you can select the appropriate county.

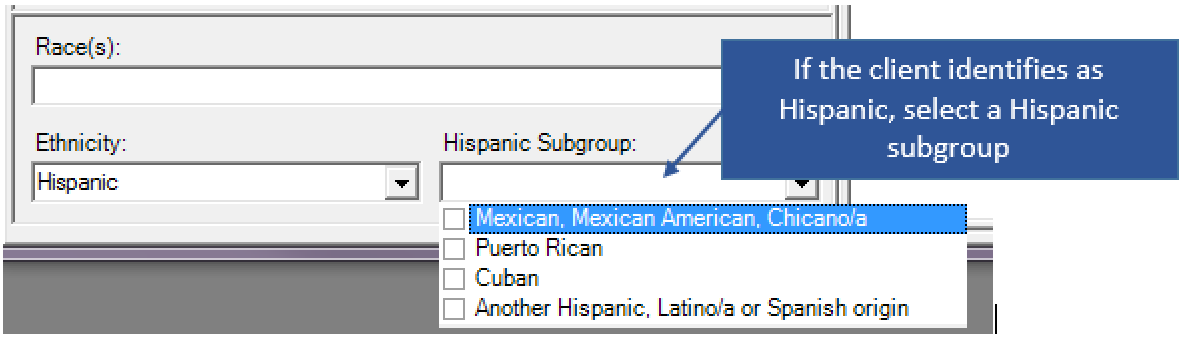


- *Include on label report*: This field is 'checked' by default indicating that it is ok to use this client's name and address when running mailing labels from CW. If the client does not want to receive any mail at this address, *uncheck* this box.



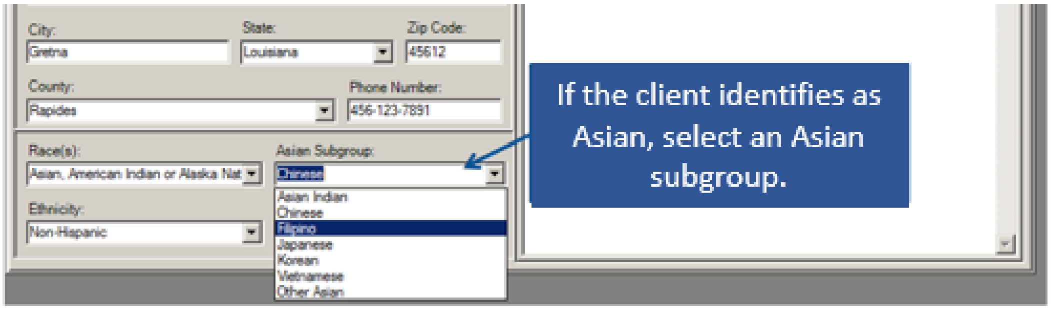
- *Ethnicity*: Enter the client's self-reported ethnicity (Hispanic or non-Hispanic). For purposes of the RSR, the ethnicity categories are defined as follows:
    - *Hispanic or Latino:* A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be synonymous of "Hispanic or Latino."
    - *Not Hispanic or Latino:* A person who does not identify his or her ethnicity as "Hispanic or Latino."
    - *Unknown:* The client's ethnicity is unknown or was not reported.

- *Hispanic Subgroup:* If the client identifies as Hispanic or Latino(a), indicate the client's Hispanic subgroup.
    - *Mexican, Mexican American, Chicano(a)*
    - *Puerto Rican*
    - *Cuban*
    - *Another Hispanic, Latino(a) or Spanish Origin*

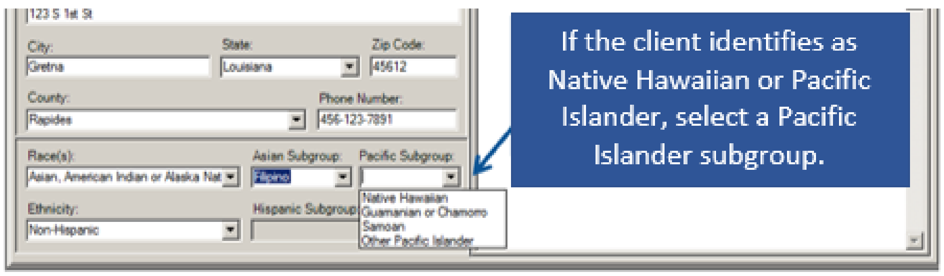


- *Race*: Enter the client's self-reported race categories. Multi-racial clients would have all categories that apply selected.
    - *American Indian or Alaska Native*: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
    - *Asian:* A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, & Vietnam.
    - *Black or African American:* A person having origins in any of the black racial groups of Africa.
    - *Native Hawaiian or Other Pacific Islander:* A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
    - *White:* A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
    - *Unknown:* Indicates the client's racial category is unknown or was not reported.

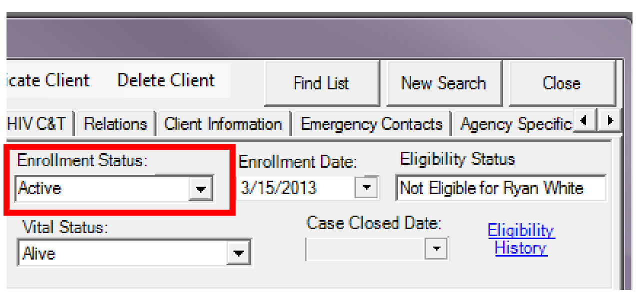
- *Asian Subgroup:* If a client identifies as Asian, select an Asian Subgroup.
    - Asian Indian
    - Chinese
    - Filipino
    - Japanese
    - Korean
    - Vietnamese
    - Other Asian



- *Native Hawaiian or Pacific Islander Subgroup*
  - Native Hawaiian
  - Guamanian or Chamorro
  - Samoan
  - Other Pacific Islander



- *Enrollment Status*



- Select the appropriate *Enrollment Status* from the drop down menu. This field is agency-specific. For example, a client may have an Enrollment Status of "*Relocated*" at NO/AIDS Task Force but "*Active*" at Southwest Louisiana AIDS Council.

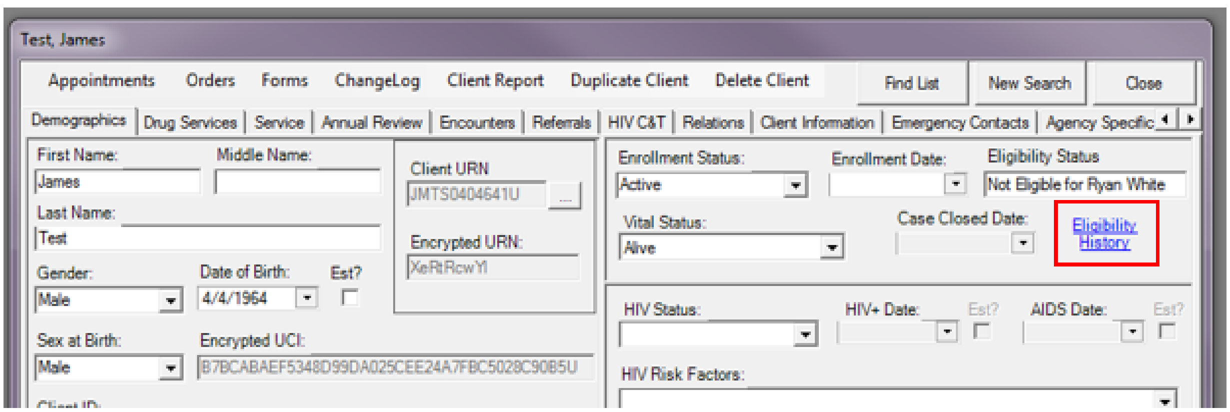
  - *Active* - The client is currently enrolled at the agency and will be continuing in the program.
  - *Referred or Discharged* - The client was referred to another program or services and will not continue to receive services at this agency. Also select this category if the client was discharged from a program because he or she became self-sufficient and no longer needed Ryan White Program-funded services, the client voluntarily leaves your program, or the client refuses to participate.

- *Removed* - The client was removed from treatment due to violation of rules.
- *Incarcerated* - The client will not be continuing in the agency's program because he or she is serving a criminal sentence in a Federal, State, or local penitentiary, prison, jail, reformatory, work farm, or similar correctional institution (whether operated by the government or a contractor).
- *Relocated* - The client has moved out of the agency's service area and will not continue to receive services at the agency's location.

> Your designated LaCAN Partner or funding agency will provide guidance in determining when a client is "lost to follow-up" and the enrollment status should be set to *Inactive/Case Closed"*.

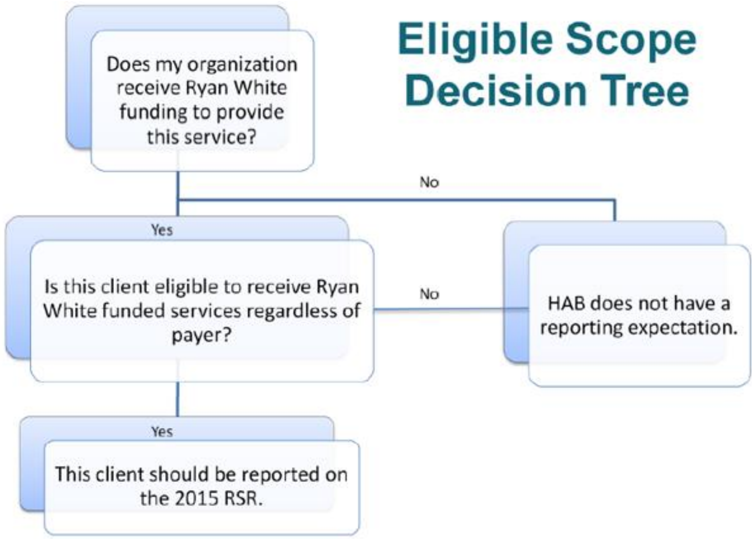
- *Enrollment Date*
  - **The *Enrollment Date* is the first day the client was served by your agency.**
  - The *year* will default to the current year.
- *Case Closed Date*
  - The date the client's case is closed at you agency.

Client Eligibility

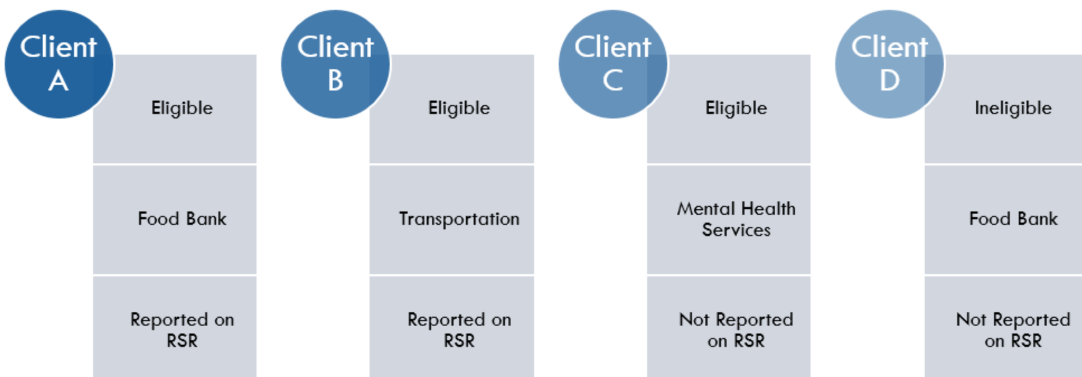


- Things to know about eligibility:
  - The Ryan White Federal funding agency, HRSA, moved their data scope from funded scope to eligibility scope. Previously all clients who received a Ryan White funded service were included on the RSR. Beginning in 2015, whether or not a client is included in the RSR is based on their eligibility to receive Ryan White Services.
  - Clients will be included in the RSR if they:
    - 1. Are eligible to receive Ryan White services at your agency
    - 2. Received a service that is funded by Ryan White at your agency, even if the client's visit was not funded by Ryan White

- This shift in scope in largely due to the Affordable Care Act and more clients being able to access insurance to cover their services.



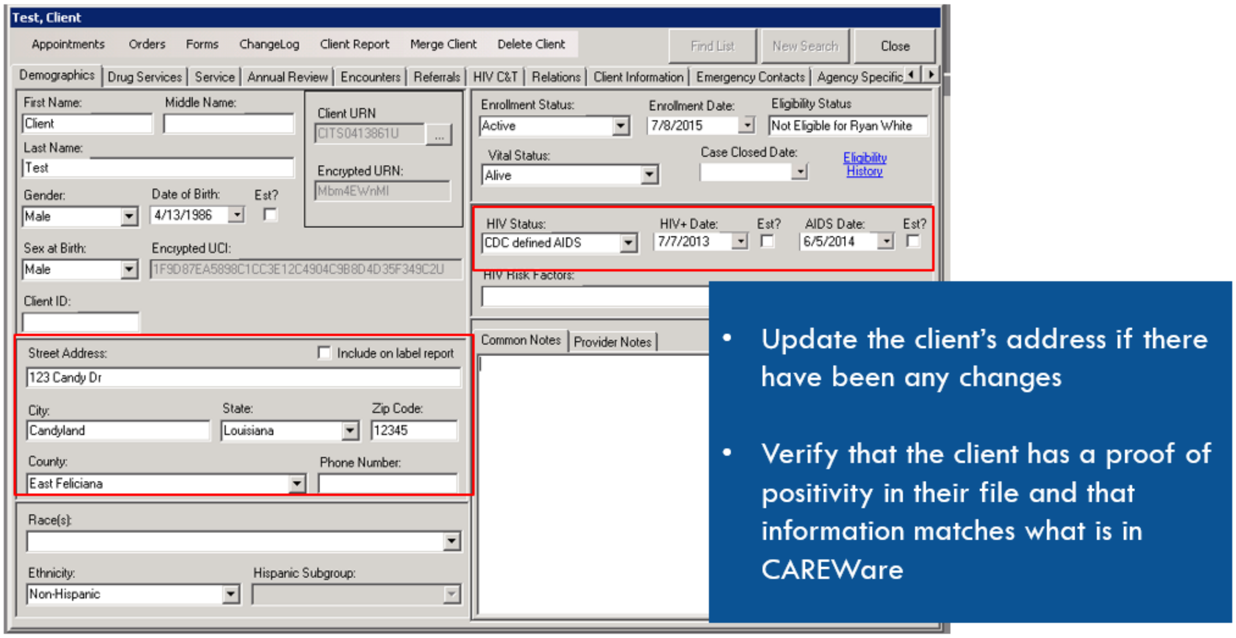
- Example- Your agency is funded by Ryan White to provide Food Bank and Transportation services.



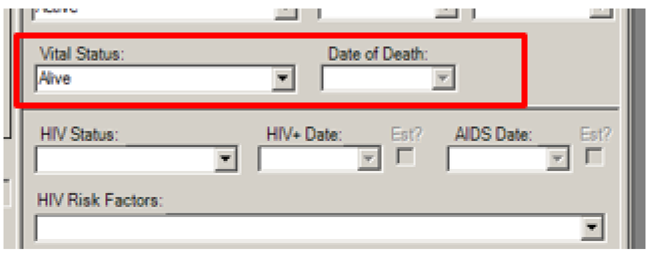
Eligibility Criteria

- A client is eligible for Part B if:
    - The client is HIV Positive
    - The client is a Louisiana resident
    - The client's Federal Poverty Level is 300% or lower
- A client is eligible for Part A New Orleans if:
    - The client is HIV Positive

        - The client resides in Orleans, Plaquemines, Jefferson, St. James, St. Charles, St. Tammany or St. Bernard Parish
        - The client's Federal Poverty Level is 400% or lower
    - A client is eligible for Part A Baton Rouge if:
        - The client is HIV Positive
        - The client resides in East and West Feliciana, Pointe Coupee, East and West Baton Rouge, Ascension, Iberville, Livingston, and St. Helena Parish
        - The client's Federal Poverty Level is 300% or lower
    - Part C & D agencies should ensure that their clients meet their agency's eligibility requirements.
    - New or Returning Clients
        - Eligibility information in CAREWare includes:
        - Residence information
        - Poverty Level
        - Enrollment Status
        - HIV Status
        - Eligibility History
        - This information should be entered in CAREWare within five (5) days of intake.
        - If the client is returning, make sure their name, date of birth and gender are up to date and correct

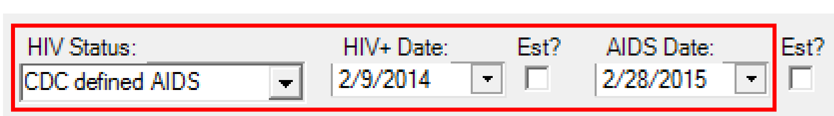


- *Vital Status and Death Date:*



  - The *Year* will default to the current year.
  - Select the appropriate *Vital Status* from the drop down menu. This data field will be shared by all agencies who are serving this client. The option *Unknown* should not be used.
  - If the *Vital Status* is set to *Deceased*, a field for *Deceased Date* will open and the date of death should be entered in the field.

- *HIV Status*: The client's current HIV Status should be entered from among the options in the drop-down menu. This information should be verified if possible.



- *HIV-negative (affected)*—Client has tested negative for HIV, is an affected partner or family member of an individual who is HIV-positive, and has received at least one RWHAP-funded support service during the reporting period.

- *HIV-positive, not AIDS*—Client has been diagnosed with HIV but has not advanced to AIDS.

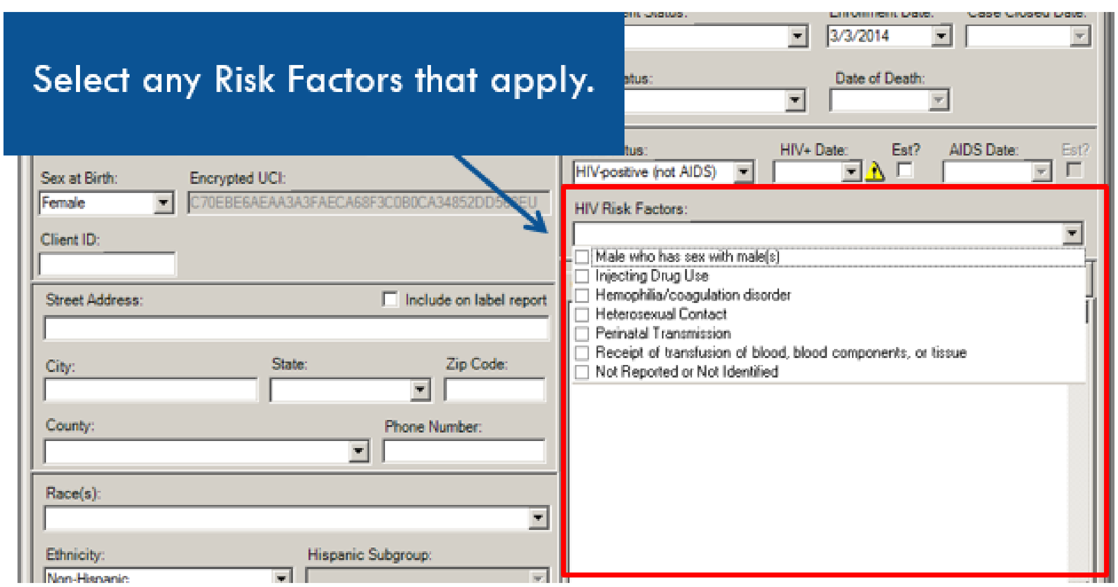
- *HIV-positive, AIDS status unknown*—Client has been diagnosed with HIV. It is not known whether the client has advanced to AIDS.

- *CDC defined AIDS*—Client is an HIV-infected individual who meets the CDC AIDS case definition for an adult or child. NOTE: Once a client has been diagnosed with AIDS, he or she always is counted in the CDC-defined AIDS category regardless of changes in CD4 counts. For additional information, see: http://www.cdc.gov/hiv/default.htm

For all diagnoses in 2014 and forward, the case definition for AIDS includes all HIV-infected persons with a CD4+ T-lymphocyte count of <200 cells/μL

- *HIV-indeterminate (infants only)*—A child under the age of 2 whose HIV status is not yet determined but was born to an HIV-infected mother.

- *HIV Risk Factors*: Check all the boxes that apply for HIV Risk Factors (modes of HIV transmission to the client.) These entries may be based on client self-report and/or the case manager's professional assessment. If you have a question about a mode of transmission that does not appear to fit in the categories, contact your funder for guidance.



- *Men who have sex with men (MSM)* cases include men who report sexual contact with other men (i.e., homosexual contact) and men who report sexual contact with both men and women (i.e., bisexual contact).

- *Injection drug user (IDU)* cases include clients who report use of drugs intravenously or through skin-popping.

- *Hemophilia/coagulation disorder* cases include clients with delayed clotting of the blood.

- *Heterosexual contact* cases include clients who report specific heterosexual contact with an individual with, or at increased risk for, HIV infection (e.g., an injection drug user).

- *Receipt of transfusion of blood, blood components, or tissue* cases include transmission through receipt of infected blood or tissue products given for medical care.

- *Mother with/at risk for HIV infection (perinatal transmission)* cases include the transmission of disease from mother to child during pregnancy. This category is exclusively for infants and children infected by mothers who are HIV-positive or at risk.

- *Not reported or identified* indicates the individual's exposure is unknown or not reported for data collection.

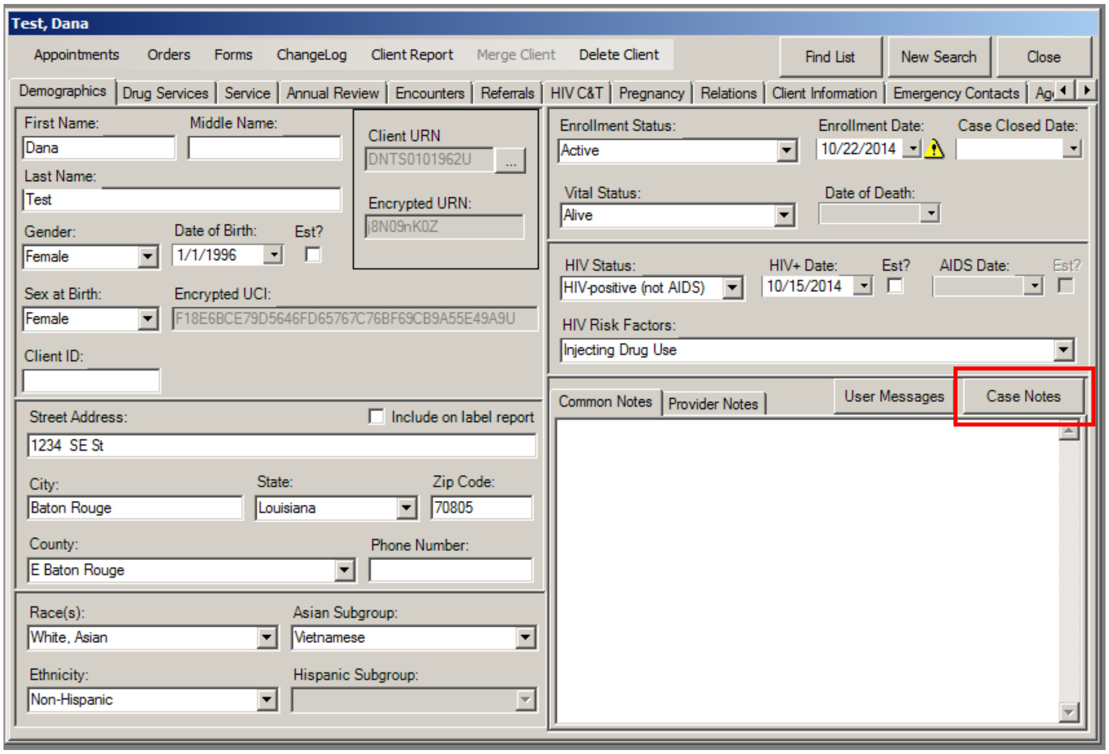
Notes in CAREWare

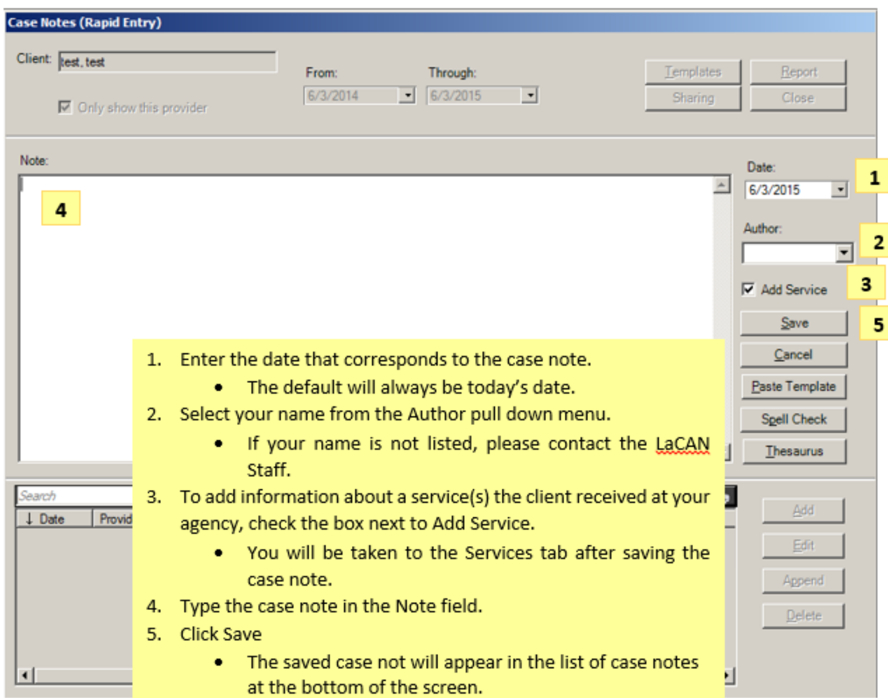
- *Common Notes*: The Common Notes field can be used to collect additional information about the client. The information in this field is available to any agency that serves the client. **When you change information in one of the client's shared fields (e.g. address), put a notification in this box. Example: "12/1/2011 AgencyX OT: Updated address"**

- *Provider Notes*: The Provider Notes field can be used to collect additional information about the client. The information in this field is **only available** to the agency entering the data.

- *Case Notes*

Open the *Case Notes* entry screen either from the *Demographics* tab.

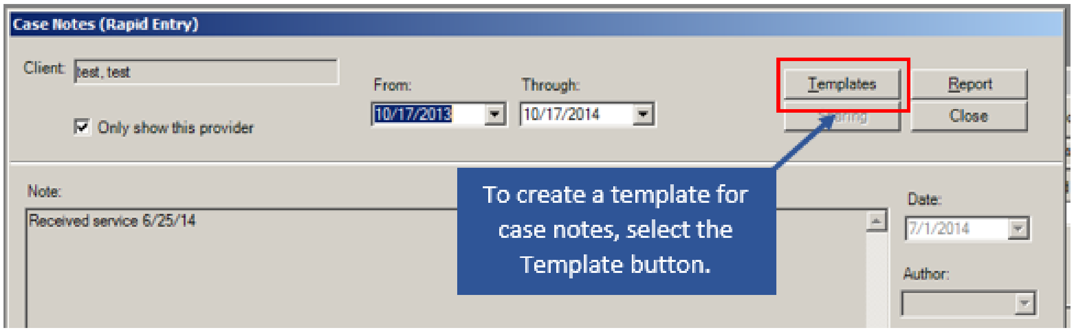


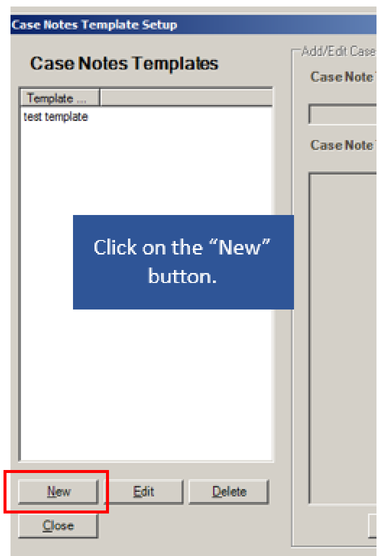


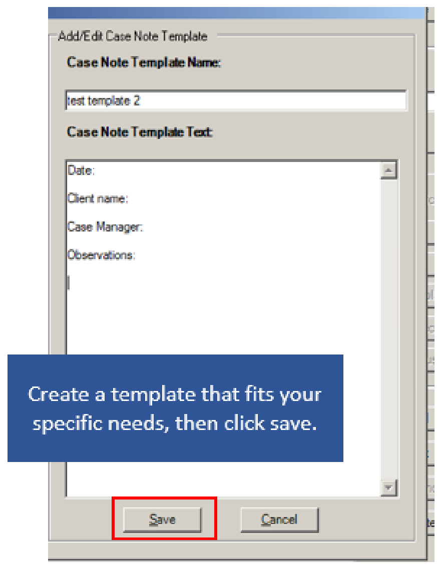
1. Enter the date that corresponds to the case note.
   - The default will always be today's date.
2. Select your name from the Author pull down menu.
   - If your name is not listed, please contact the LaCAN Staff.
3. To add information about a service(s) the client received at your agency, check the box next to Add Service.
   - You will be taken to the Services tab after saving the case note.
4. Type the case note in the Note field.
5. Click Save
   - The saved case not will appear in the list of case notes at the bottom of the screen.

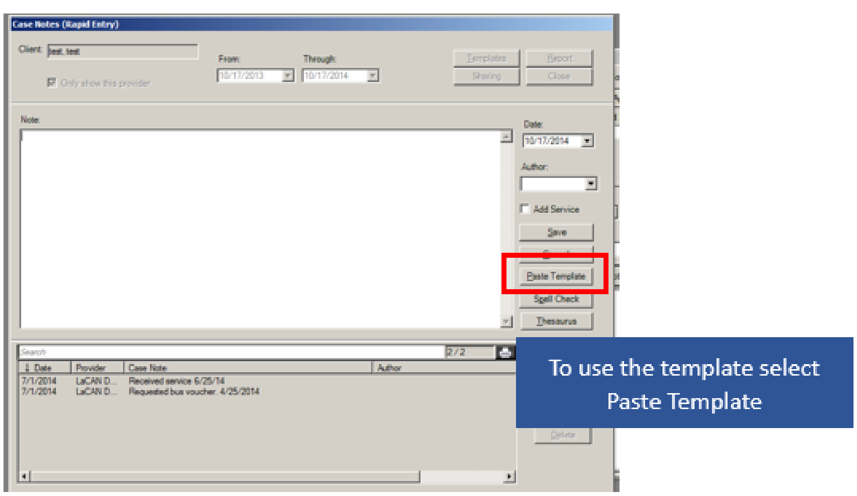
Case Note Templates:

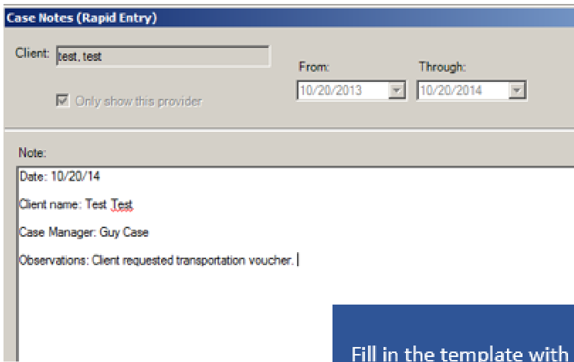
Creating a template allows you to set up a format for case notes that you can use multiple times. This is great for when you want all case notes for your agency to follow a specific format.







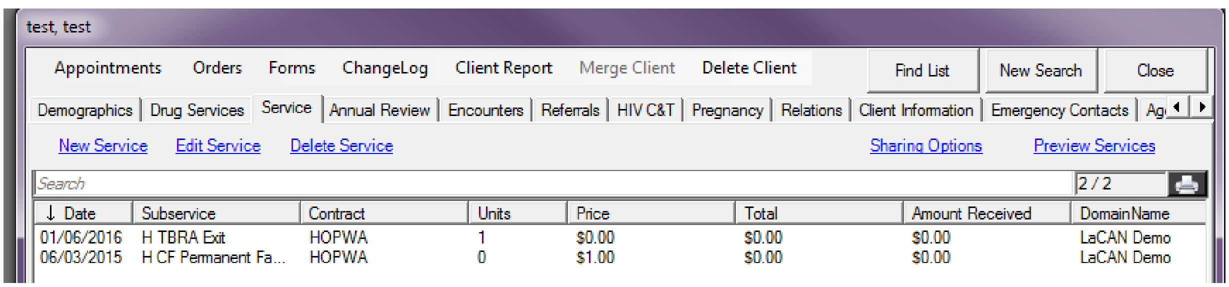




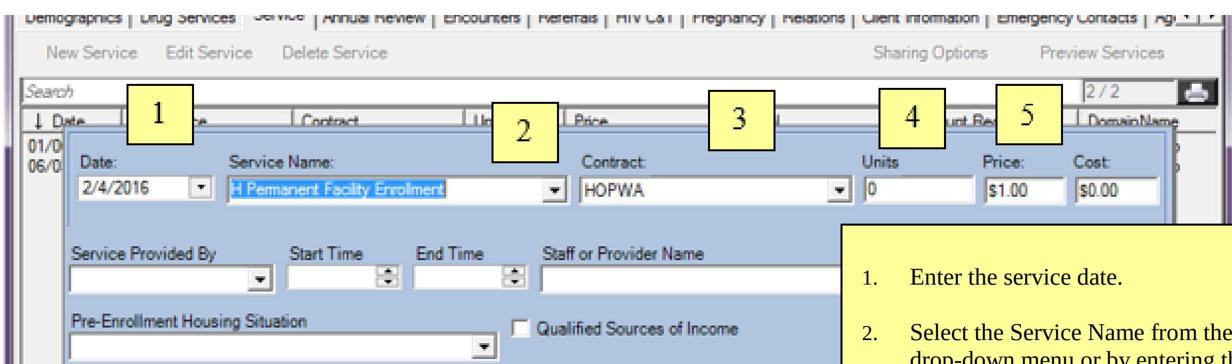
Fill in the template with client specific information then click save.

Services Tab

To <u>enter</u> a new service, go the "*Services Tab*" and select "*New Service*" at the bottom of the screen.



The *"Add/Edit Service Details*" line will open for data entry. Referencing the guidance provided by your agency's funders will help to ensure compliance with service provision program policies as well as ensure quality in your data entry.

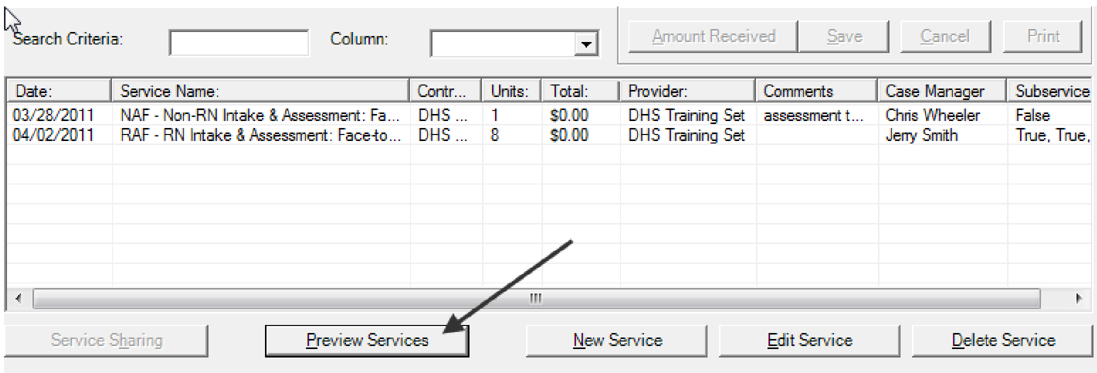


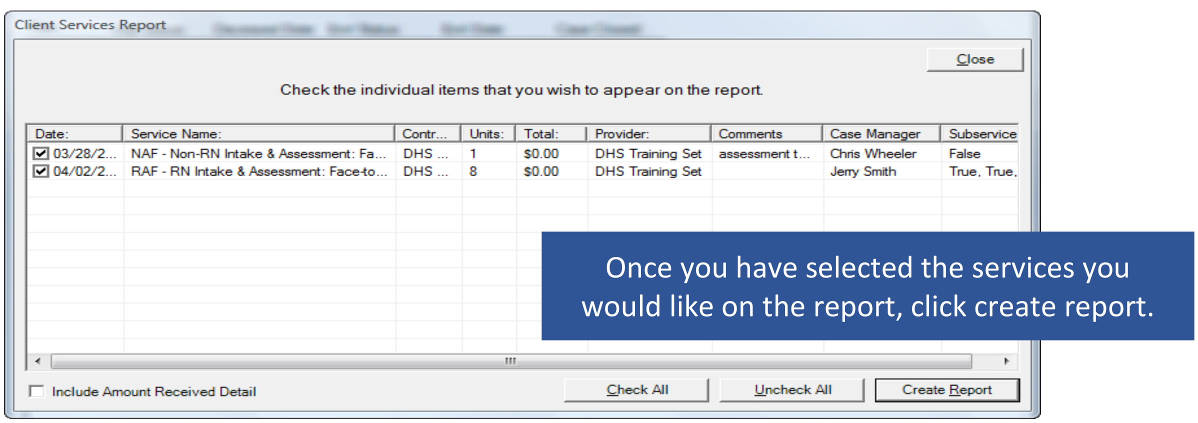
1. Enter the service date.
2. Select the Service Name from the drop-down menu or by entering the first hew letters of the sub-service.
3. Select the Contract, if necessary.
4. Enter the number of units of service.
5. Enter the Price per unit if applicable.

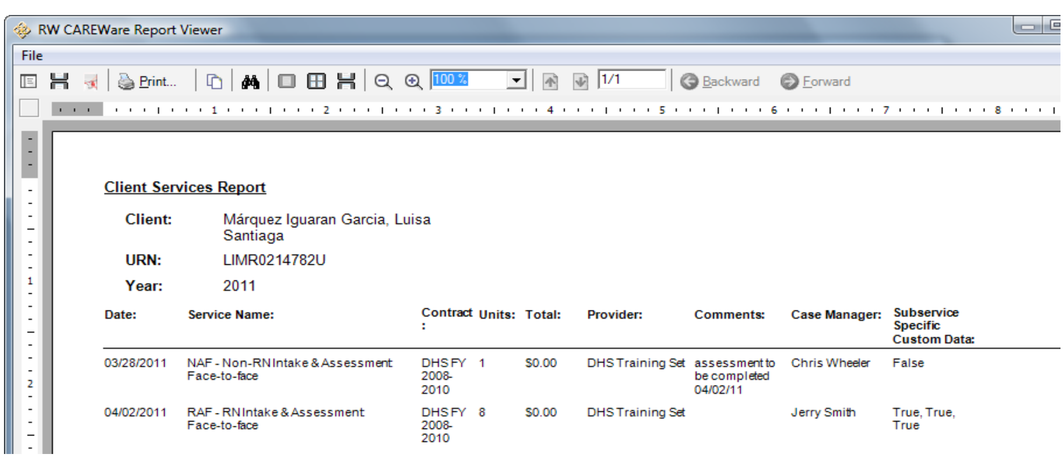
To edit an existing service, select one of the services in the history area of the window and select "*Edit Service*".

To delete an existing service, select one of the services in the history area of the window and select "*Delete Service*". **If you do not have permission to delete a service, see your supervisor.**

To generate a report of client services from the Services screen, use the **Client Services Report.** Click on the ***Preview Services*** button to select the services to appear on the *Client Services Report*.



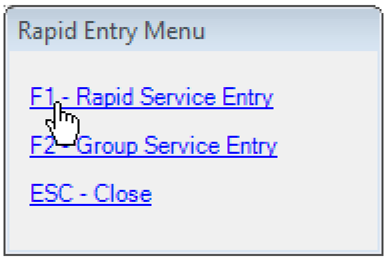




Rapid Service Entry

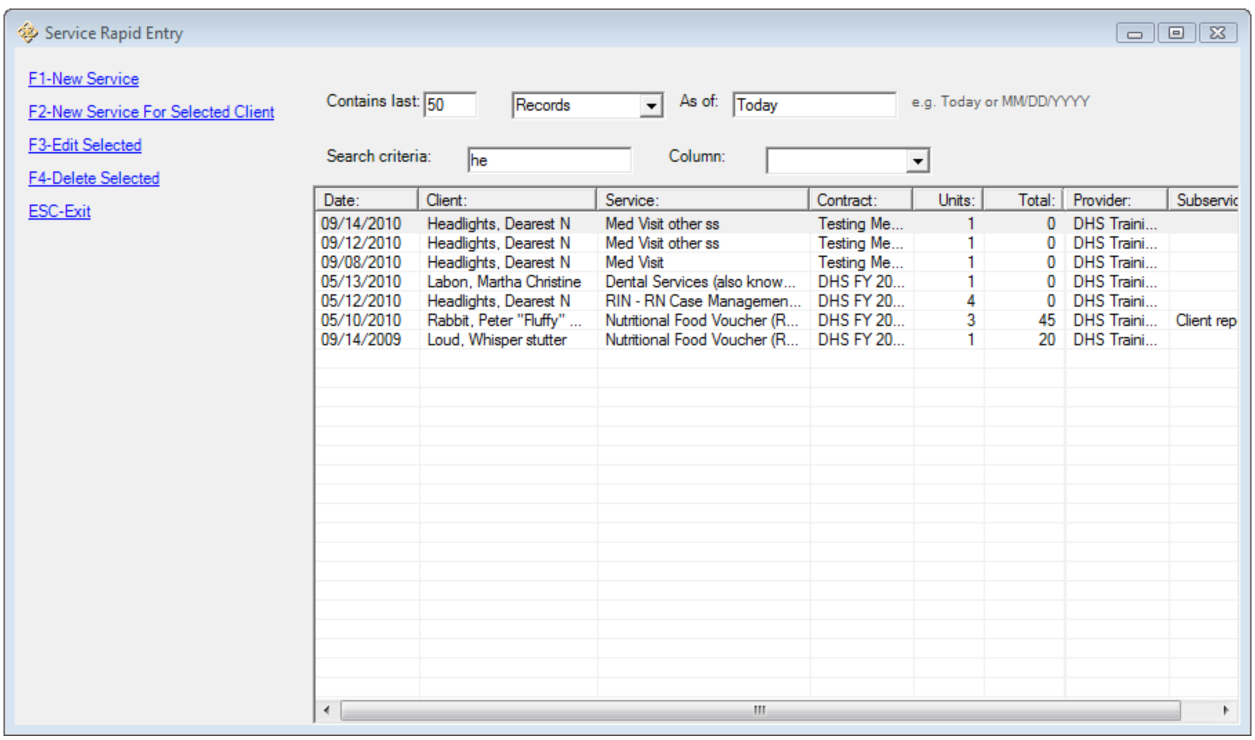
The *Rapid Service Entry* allows you to enter multiple services at once without requiring you to open each client's individual record. For example, if you provided case management services to 5 different clients in the same day, you could enter the service data through Rapid Service Entry. However, you would need to open the clients' individual CAREWare records in order to be able to enter the Case Notes affiliated with the case management visits.

Click on **Rapid Service Entry** from the Main Menu.

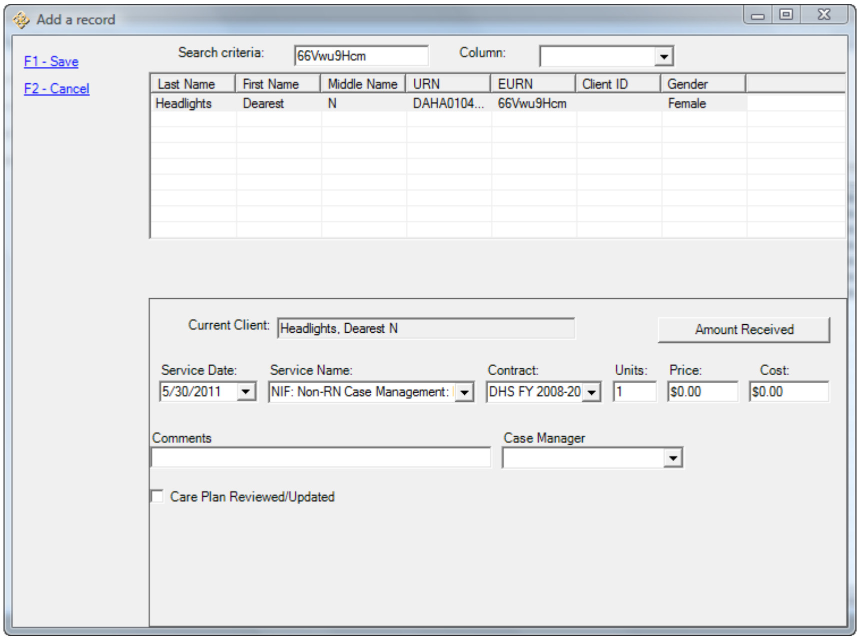


Select "F1- Rapid Service Entry"

To enter a new service, select a client by scrolling through the names or entering data in the *Search criteria* box. Highlight the client for whom you wish to enter a service and click on *F2-New Service For Selected Client.*



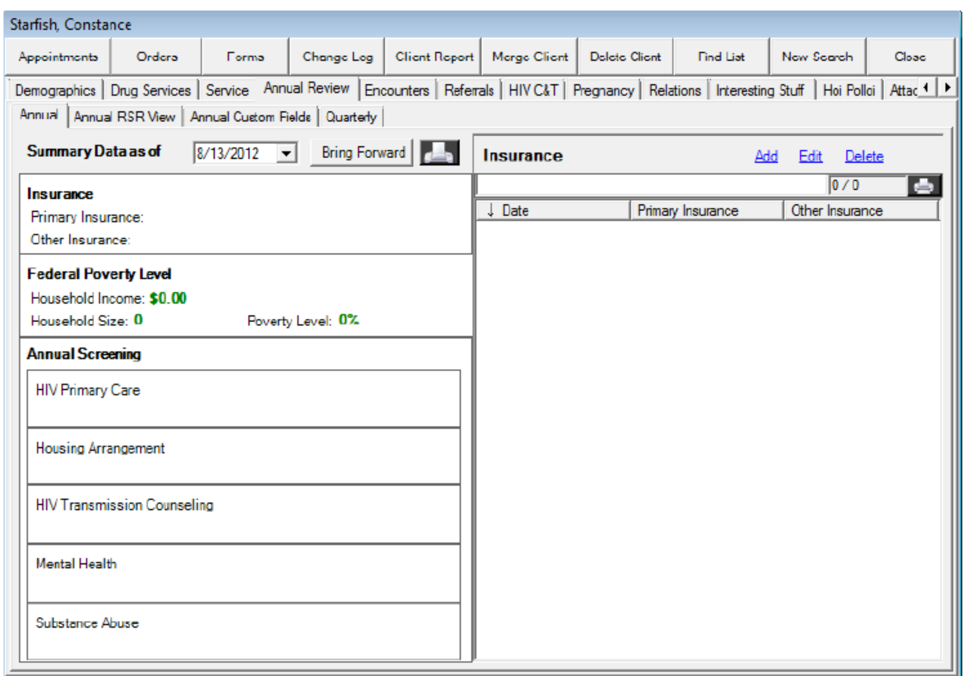
On the Add a record screen, select the service date and service name and then press the F1 key or click on the *F1 – Save* link on the left side.



Annual Review Tab

Data entered on the *Annual* tab should be updated either annually or every 6 months and should be as accurate and up-to-date as possible at the end of the calendar year. All active fields should be completed.

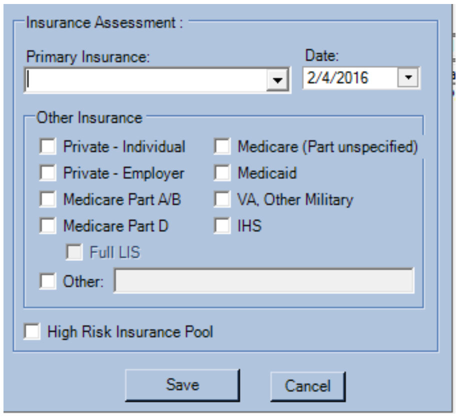
- After entering and saving the client's first service, go to the **Annual Review** tab.



- As you roll over each area on the left, the window on the right will show the previous entries for that section. To add a new record click on the plus sign (+).

Insurance Assessment.

Enter the primary source of insurance and any other secondary sources if applicable. Use the drop down menu to select the **Primary** source, then one of the check boxes if the client has any other or supplemental source.



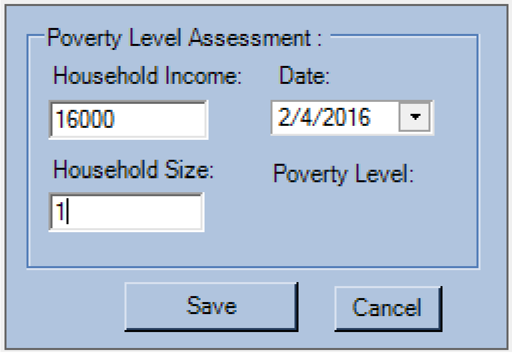
- *Primary Insurance* is the source of insurance the client uses for the majority of their medical care. This insurance should cover actual medical visits, not only prescription drugs

  - *Private- Employer*
  - *Private-Individual*
    - For those clients who have insurance through the Marketplace, select "Private – Individual" as their Primary Insurance.
  - *Medicare* is a health insurance program for people ages 65 years and older, people with disabilities under age 65 (those who receive Social Security Disability Income – SSDI), and people with End-Stage Renal Disease (permanent kidney failure treated with dialysis or a transplant).
  - *Medicaid* is a jointly funded, Federal-State health insurance program for people with low incomes.
  - *IHS- Indian Health Service*
  - *Other*- indicates that the client has an insurance type other than those listed above.

    - Other (blank text field) If the 'Other' box is checked then the name of the insurance can be listed here.

If a client has only ADAP coverage, list them as having *No Insurance*. ADAP is NOT a form of medical insurance.

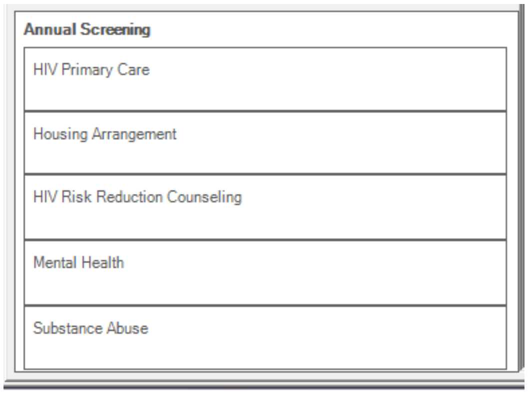
Household Income, Size & Poverty Level



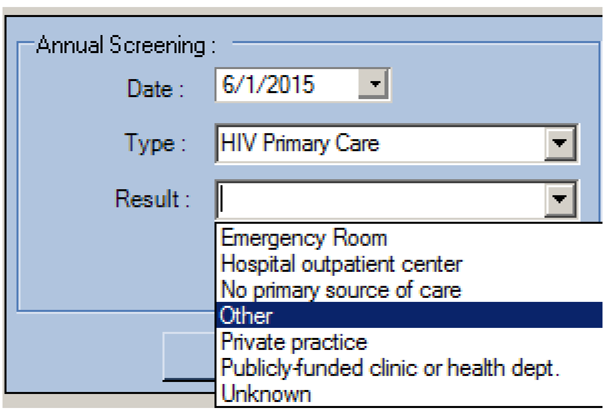
- Enter the client's **annual** *Household Income.* The client's income and the income of any blood relatives or legal spouse living with them should be included.
  - Things to remember about Household Income:
    - Enter the client's current household income as of the date you reviewed it.
    - A family income refers only to the income on which this individual can legally rely on.
    - Family income is based on the legal definition of family
    - If the household has an intermittent or uncertain income, have the client estimate their current monthly house hold income and multiply by twelve.
    - If the household has no income, put a 0.
- Enter the total *Household Size* for the client this calendar year. This should include the client and anyone included in the income above.
  - Things to remember about Household Size:
    - Enter the number of people of any age (including the client) in the household who are legally dependent on the annual household income.
    - The response must always be at least '1' for the client.
    - If the client is unclear, ask the client how many family members they are able to claim as dependents on their income taxes.
- CW will calculate the *Federal Poverty Level* based on the *Household Income* and *Household Size* entries. CAREWare automatically updates the formula used to determine FPL each year.
  - Note: The level will not calculate until after you save the entry.

Annual Screening Fields

Annual Screening fields are accessible through the Annual Screening area by rolling over any of these on the left hand side. Click Add then select the Type from the drop down menu.

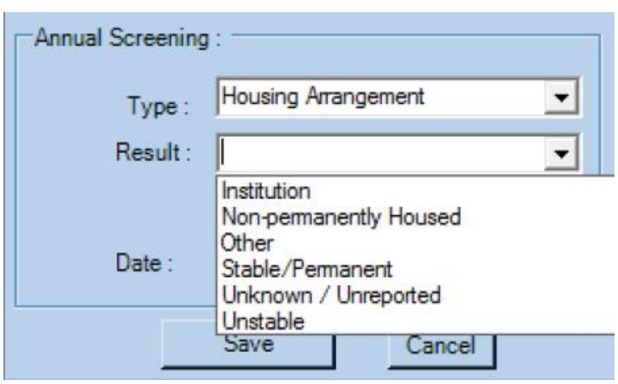


- *Primary HIV Medical Care*
    - Enter the source of *Primary HIV Medical Care* for the client.
    - If the client's assessment is completed, *Unknown* should not be used



- *Housing/Living Arrangement*

    - Enter the *Housing/Living Arrangement* of the client.



- *Non-Permanently Housed* includes:
    - Transitional housing for homeless people;
    - Temporary arrangement to stay or live with family or friends;

    - Other temporary arrangement such as a Ryan White Program housing subsidy;
    - Temporary placement in an institution (e.g. hospital, psychiatric hospital or other psychiatric facility, substance abuse treatment facility, or detoxification center);
    - Hotel or motel paid for *without* emergency shelter voucher.

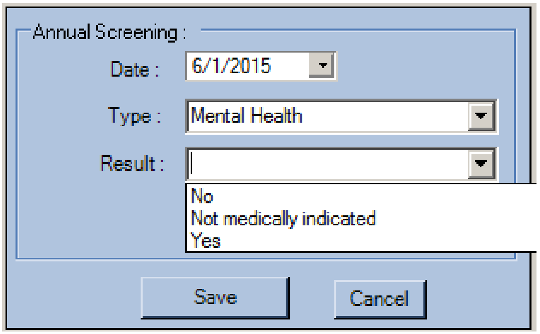
  - *Stable/Permanent* includes:
    - Renting and living in an unsubsidized room, house, or apartment;
    - Owning and living in an unsubsidized house or apartment;
    - Unsubsidized permanent placement with families or other self-sufficient arrangements;
    - Housing Opportunities for Persons with AIDS (HOPWA)-funded housing assistance, including Tenant-Based Rental Assistance (TBRA) or Facility-Based Housing Assistance, but *not including* the Short-Term Rent, Mortgage, and Utility (STRMU) Assistance Program;
    - Subsidized, non-HOPWA, house or apartment, including Section 8, the HOME Investment Partnerships Program, and Public Housing;
    - Permanent housing for formerly homeless persons, including Shelter Plus Care, the Supportive Housing Program, and the Moderate Rehabilitation Program for SRO Dwellings;
    - Institutional setting with greater support and continued residence expected (psychiatric hospital or other psychiatric facility, foster care home or foster care group home, or other residence or long-term care facility).

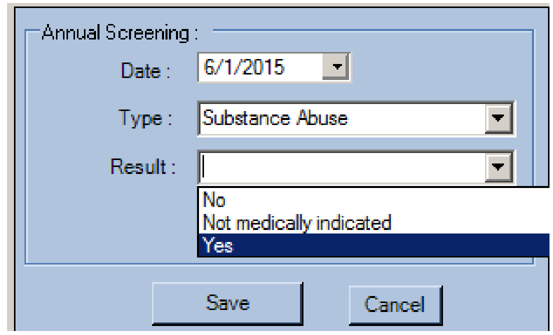
  - *Unknown/unreported*
    - Indicates that housing/living arrangements were not reported. If the client assessment is completed, *Unknown/Unreported* should not be used.

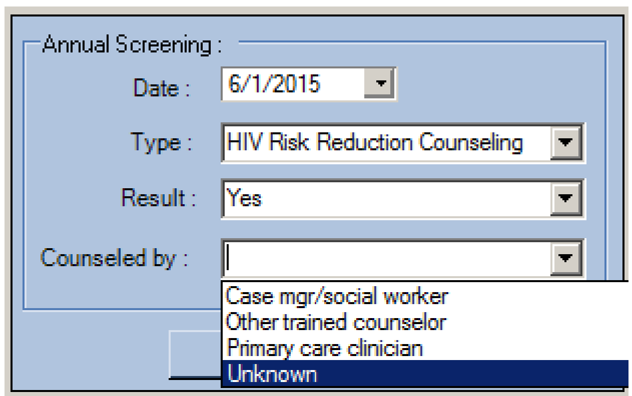
  - *Unstable* includes:
    - Emergency shelter, a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings, including a vehicle, an abandoned building, a bus/train/subway station/airport, or anywhere outside;
    - Jail, prison, or a juvenile detention facility;
    - Hotel or motel paid for *with* emergency shelter voucher.

- *HIV Risk Reduction Counseling*

  - If the counseling has been provided, select the appropriate authorized counselor who performed it.

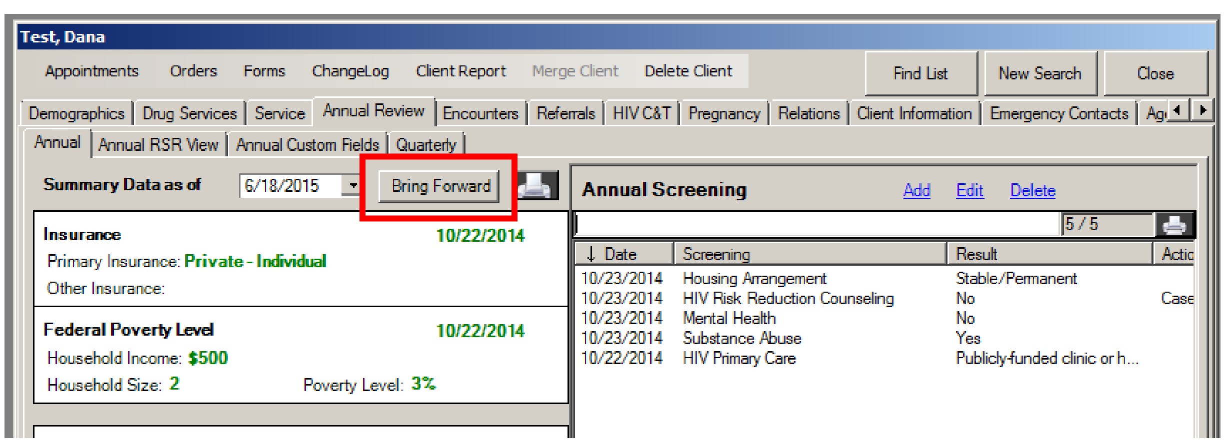




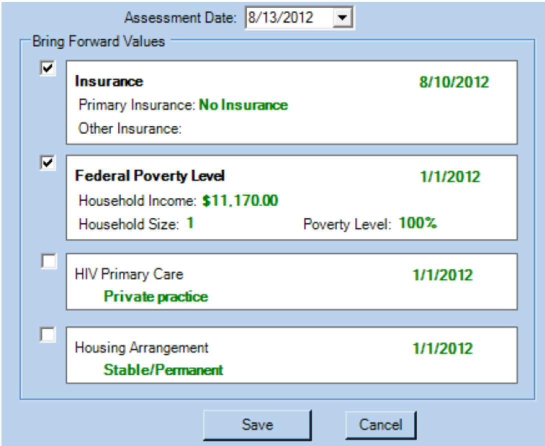


- Enter any mental health or substance abuse screening performed, if applicable.

Data entry hint: Much of the information on the Annual Review tab may stay the same from year to year. CAREWare contains a feature that will "roll-over" these data from one year to the next. To use this feature, click the **Bring Forward** button at the top of the tab. The date will appear in RED if the data is more than a year old. Though shown here as "1/1/2010," in a forthcoming build, the legacy data will be set to 12/31 of the year in which it is reported.



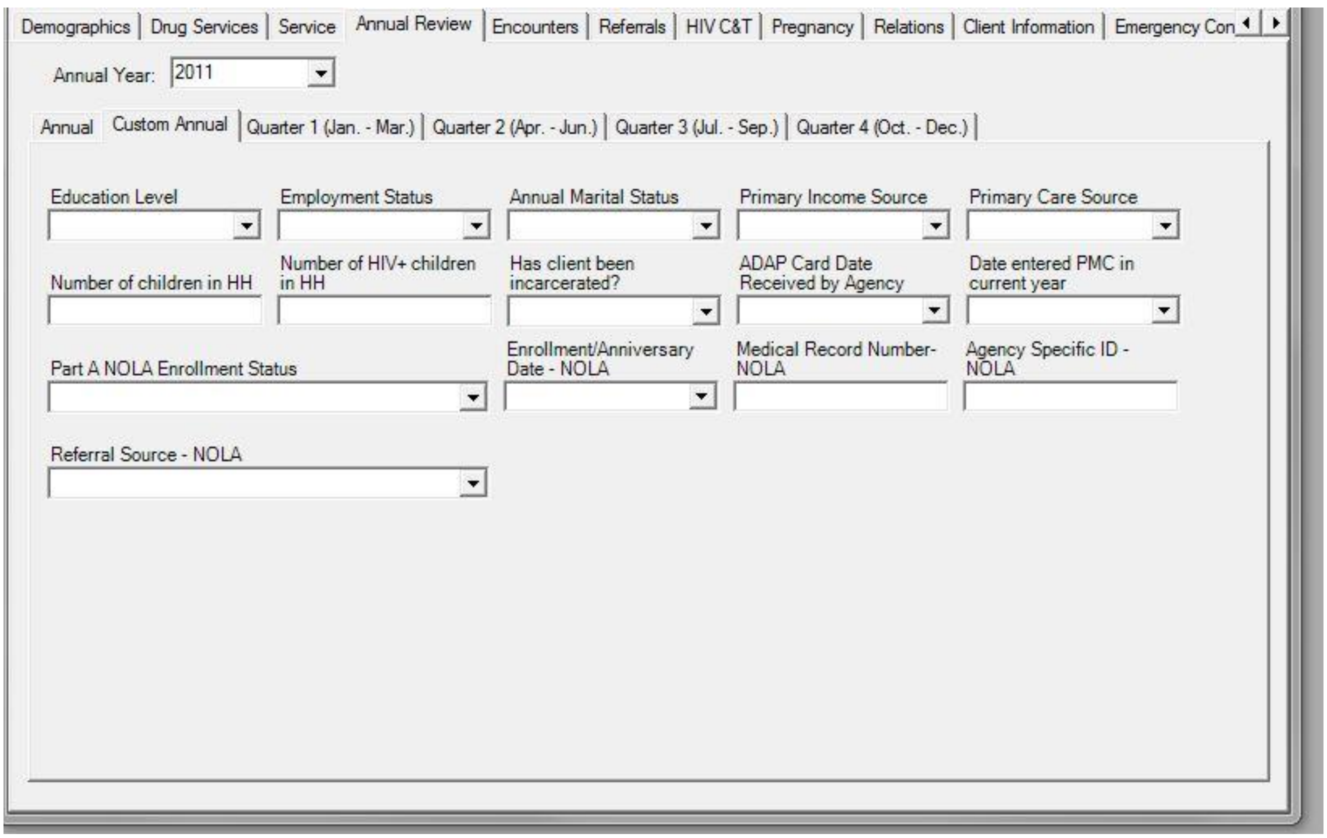
You will be given the option to check boxes next to the prior information to carry it forward if there are no changes.



Custom Annual Tab

There are several fields on the “Custom Annual” tab within the Annual Review to complete.

These fields should be completed at the same time as those on the Annual screen. Fields with “NOLA” in them are not required for agencies not funded by New Orleans Part A:



Clinical Encounters Tab

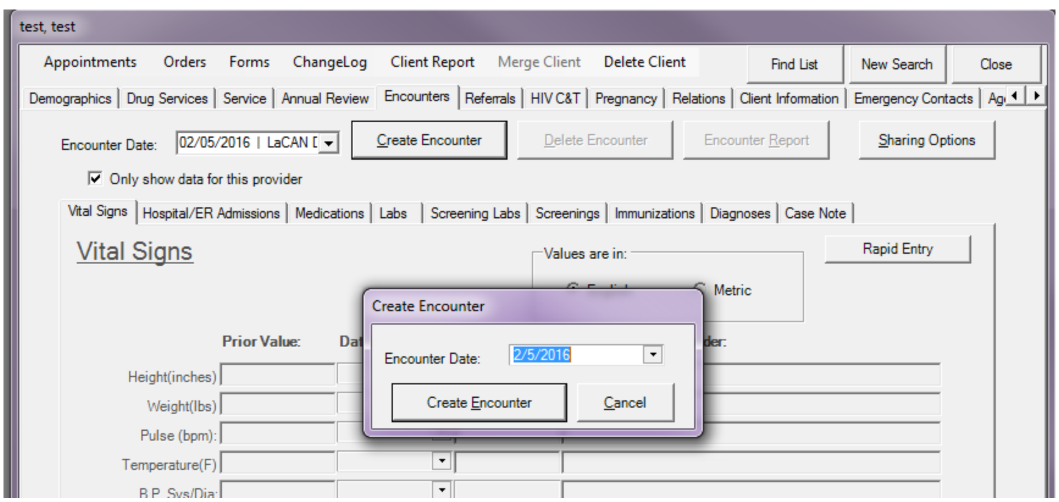
The Encounters tab in the LaCAN system holds clinical and selected assessment data. Agencies with Outpatient/Ambulatory Medical Care or who provide lab services will be able to view and report on this tab.

The clinical encounter information tab appears **only** if you have user privileges that allow you to view or edit clinical information. **If you have not been granted these rights, either as a user or a provider, you will not have access to the clinical encounter module. If you need access please contact your Grantee.**

- When entering data through an Encounter, remember **that the information applies only to the specific date of that encounter, whether it is today or a prior visit**.
- The Encounter Report and Encounter Preprint function (available in the Reports menu), allow you to print out the information in the clinical module in any order; these client specific reports are used by many clinics as a paper form that eases data entry into CAREWare.

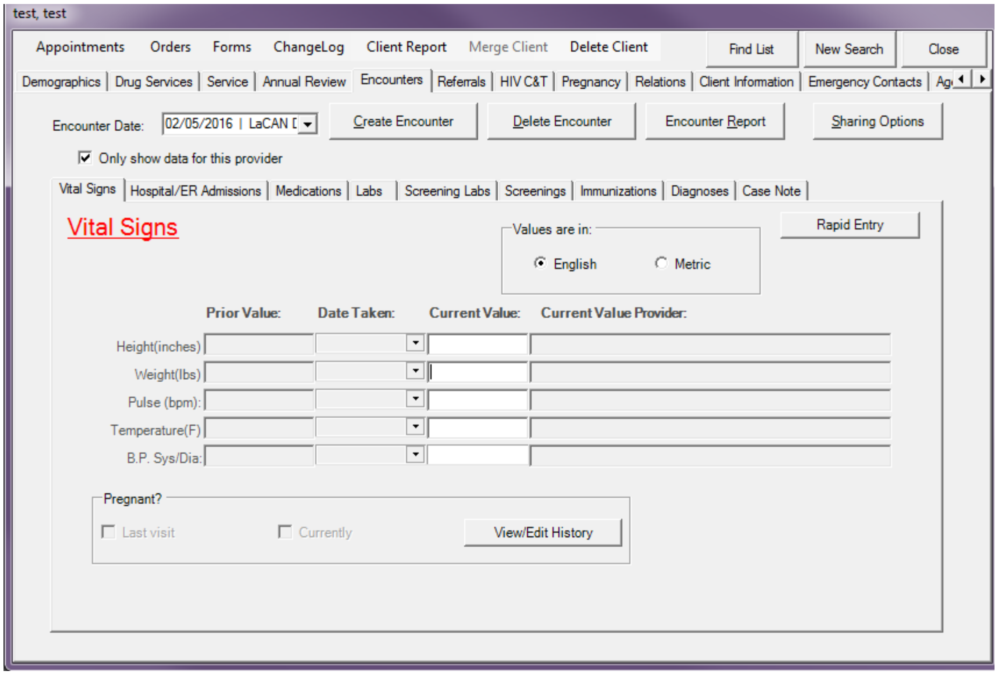
- To access a prior encounter, use the pull down menu to find the previous encounter date.

- To begin a new encounter, press **Create Encounter** and enter the encounter date, then press **Create Encounter**. The date shown will default to today's date.



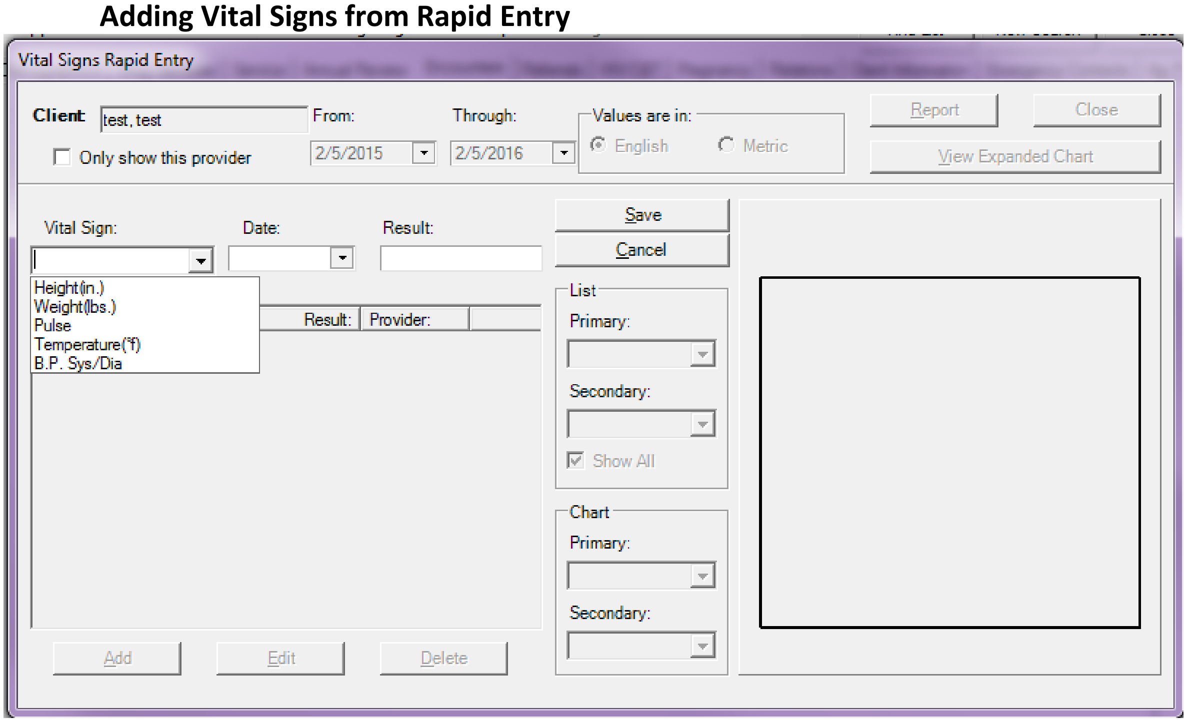
Vital signs

- Vital signs can be entered in English or metric values. Height is entered in inches or centimeters, weight in pounds or kilograms, and temperature in Fahrenheit or Celsius. (Pulse and blood pressure are not affected.)

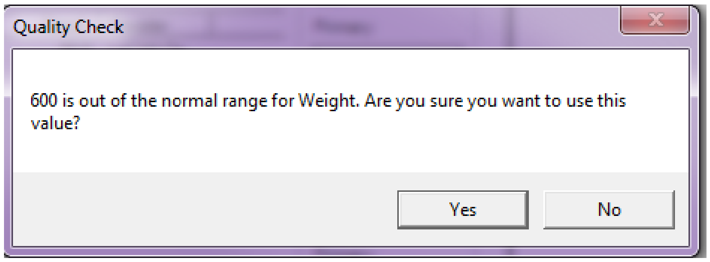


If there is a prior clinical encounter for this client, and their height has been entered, this value will be brought forward to the current record. This will ensure that if you also enter body weight, then the Body Mass Index or BMI (weight (kg)/height (m)2) will also be calculated. Of course, for infants and children, don't forget to update the height as it changes!

Adding Vital Signs from Rapid Entry

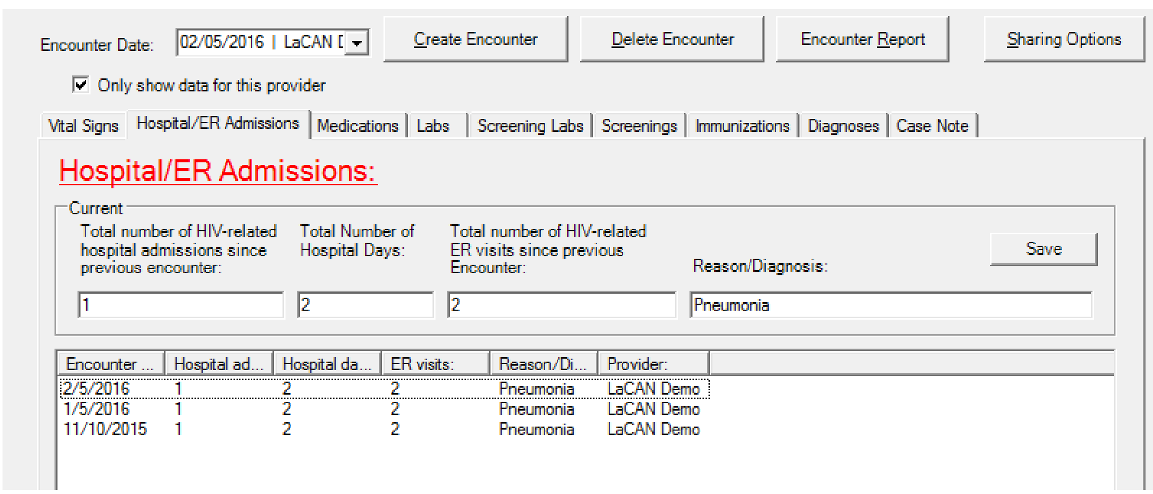


- For each vital sign, CAREWare has set a "normal" range. If the value you enter is outside of that range, you'll be asked if you want to correct it or not.



Hospital/ER Admissions

- Hospital/ER admissions Information on a client's HIV-related hospital and ER admissions, number of days in hospital, and reason for ER visit/diagnosis can be entered here. Historical information entered at previous encounters shows up on the bottom half of the screen.



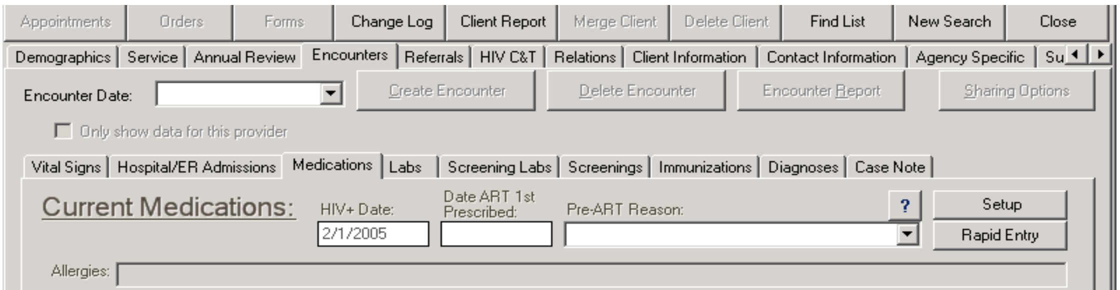
Medications

- Enter the client's complete medication prescribing history here for antiretroviral and any other medications. **For purposes of the Ryan White Service Report (RSR), you must enter the client's HIV antiretroviral medications.**
- "**Date ART 1st Prescribed**" (antiretroviral therapy) defaults to the date of the first HIV medication entered into CAREWare. However, since many clients may have started ART before they came into your care, this field is editable in the "Medications Rapid Entry" screen, and an earlier date may be entered.

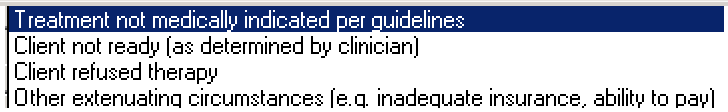
  Enter any medication allergies in the "Allergies" box. This information will carry over into future clinical encounters.

NOTE: Before you start entering medications for individual clients, you may want to go into the Medications Setup screen and make sure all the medications in your formulary are active and properly named for your purposes.

Client Not Receiving HAART

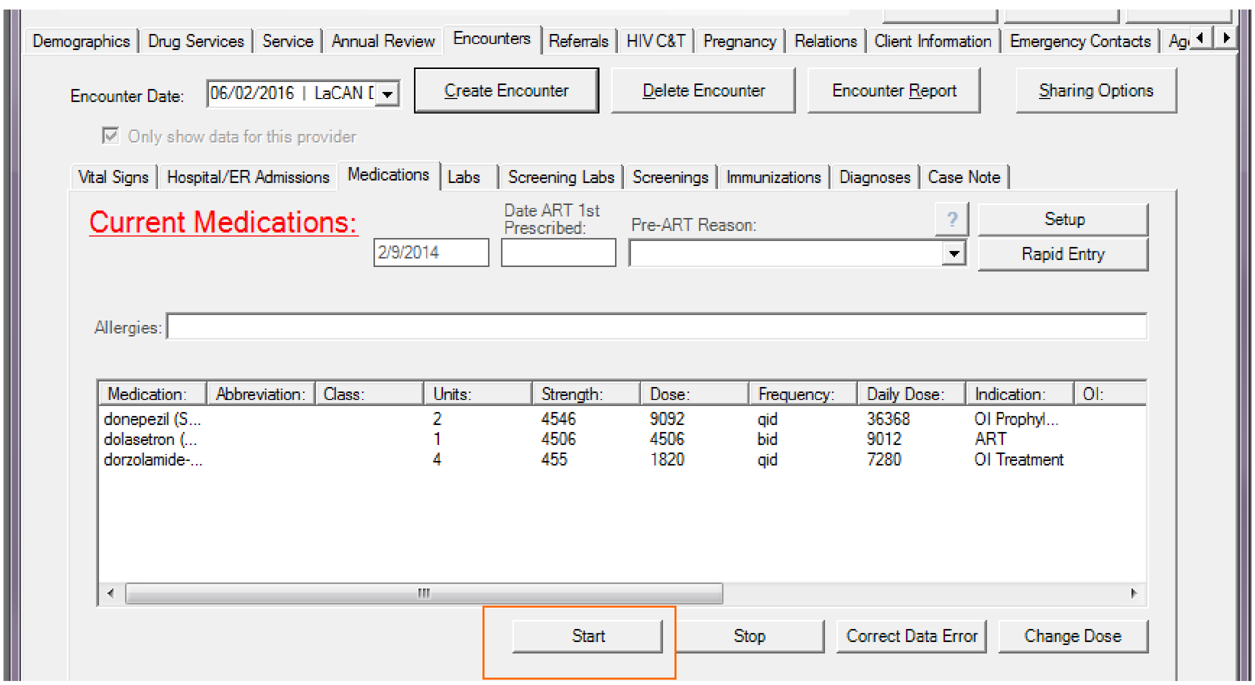


Pre-ART Reasons are:



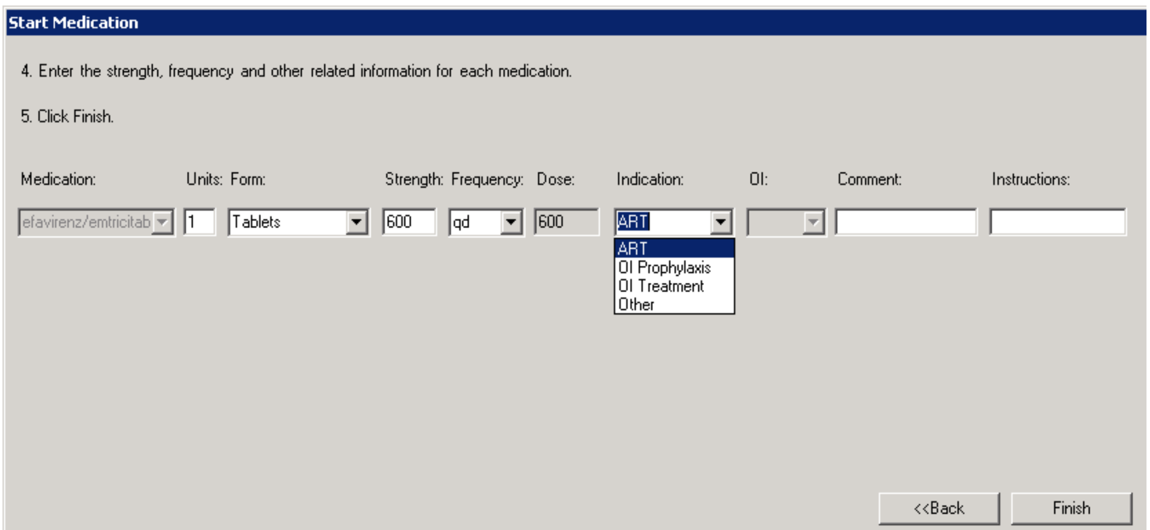
Starting Medications

- To start medications, click **Start**



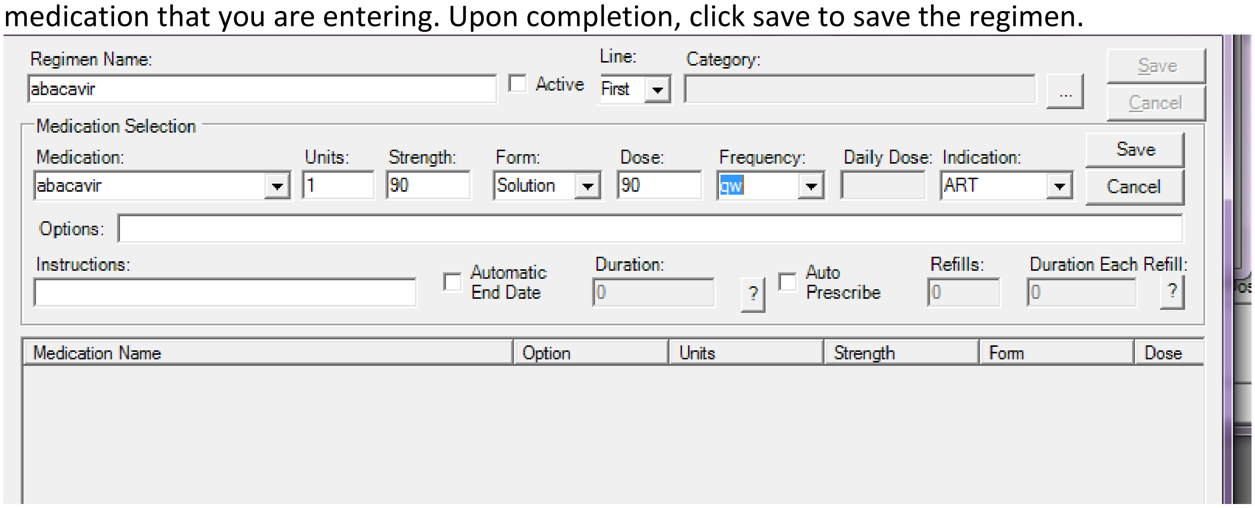
- Enter the medication name. You can select it from the pull down menu, or type the first few letters of the medication. You can add the strength and frequency
  Indication will be:
  - ART (for HIV antiretrovirals)
  - OI (opportunistic infection) prophylaxis
  - OI treatment
  - Other (for other medications you may enter not related to HIV care)

If the indication is OI prophylaxis or treatment, the OI pull down will become active; select the relevant OI for which the medication (s) is being prescribed as treatment or prophylaxis.

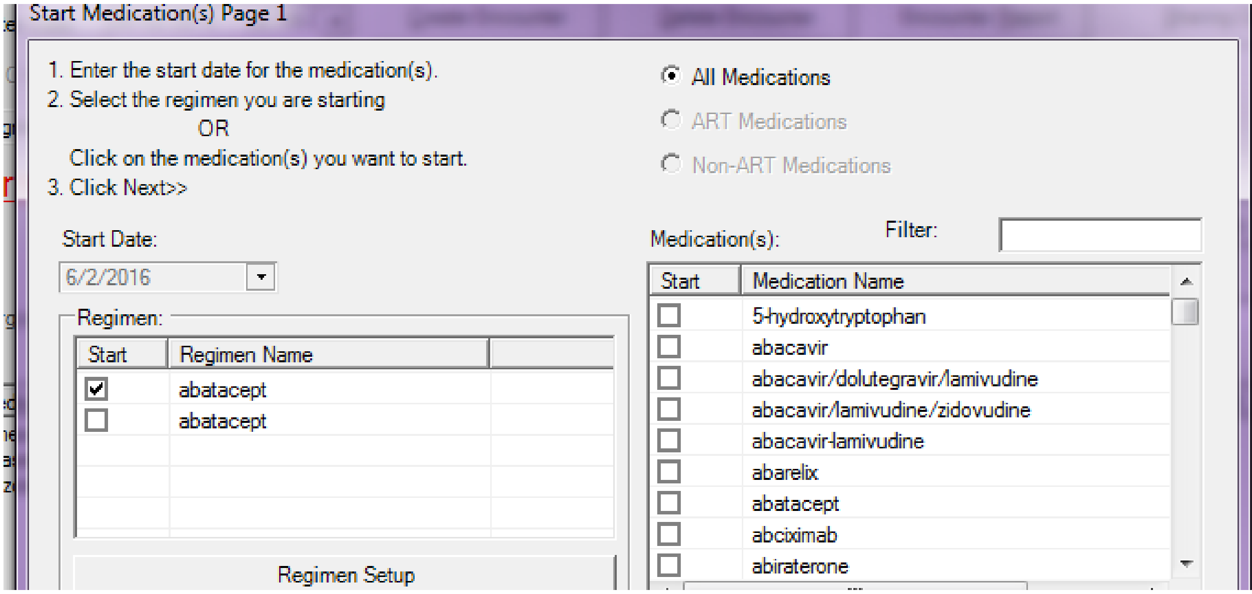


Adding a Regimen

Adding a regimen minimizes data entry when medications are entered more than once. To setup a regimen, click Regimen Setup, enter the regimen's name, add the medications from the list of medication drop list and complete the fields in the in the image below as it relates to the medication that you are entering. Upon completion, click save to save the regimen.

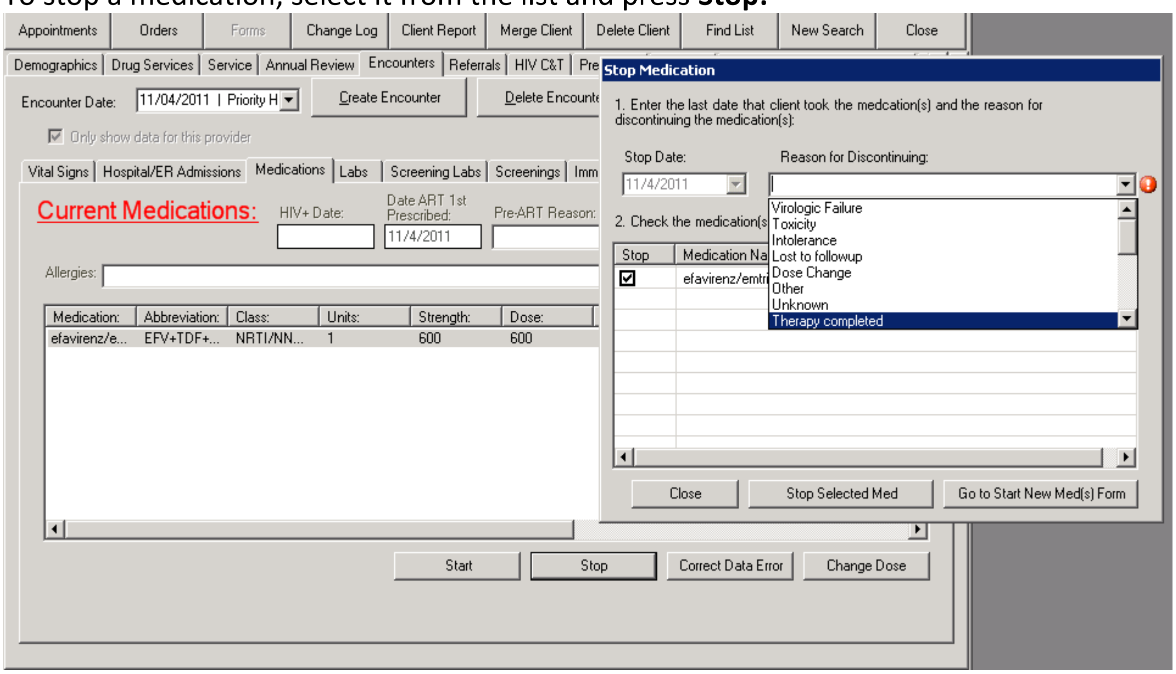


This image shows a list of regimens that can be used on client when taking the listed medications.



Stopping Medications

To stop a medication, select it from the list and press **Stop:**



- ○ Medications are discontinued because of one of the reasons above, as defined below:
  - Virologic Failure: the medication has ceased to be effective in fighting the virus.
- ○ Toxicity: the medication has become toxic to the client’s system (usually to one or more vital organs, for example, as measured by specific liver function tests or lipids).

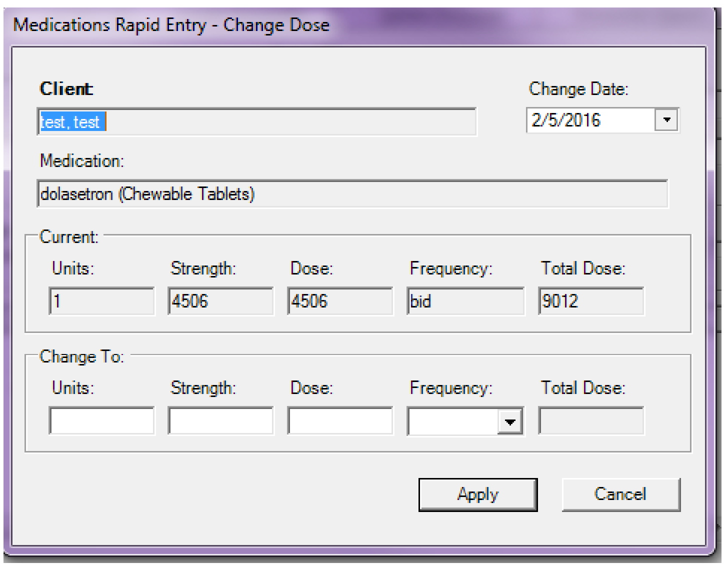
- Intolerance: the medication’s side effects have become intolerable to the patient.
- Lost to follow-up: the patient has stopped receiving treatment.
- Dose change: the medication has been re-prescribed with a different dosage.
- Therapy completed
- Other: if you choose, the comment field can be used to elaborate.

Correcting a Data Error

If you make an error in entering the medication, you can change it through the Correct Data Error button. You can correct any information entered under the Start or Stop menus.

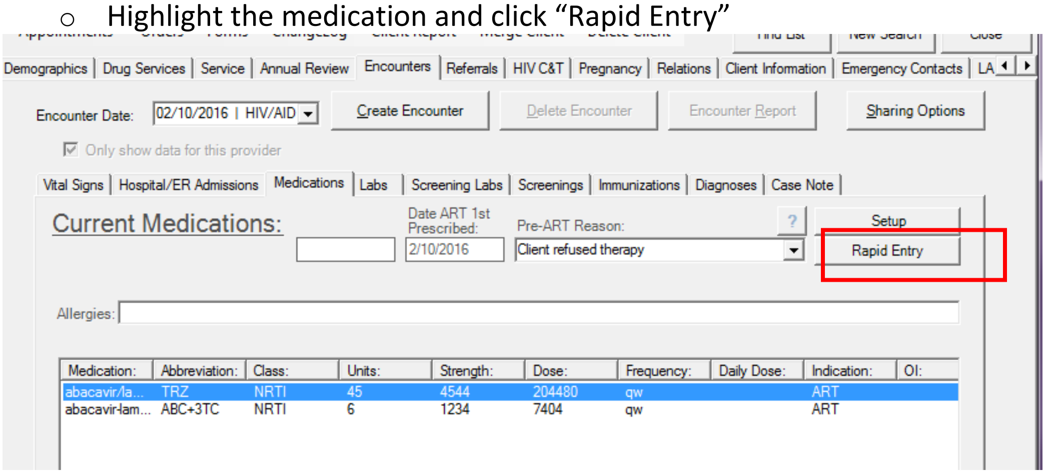
Change Dose

This button allows you to change a medication’s dose, rather than having to stop the medication and restart at a different dose. Information on the prior dose will be retained. The change date defaults to the date of the current encounter.

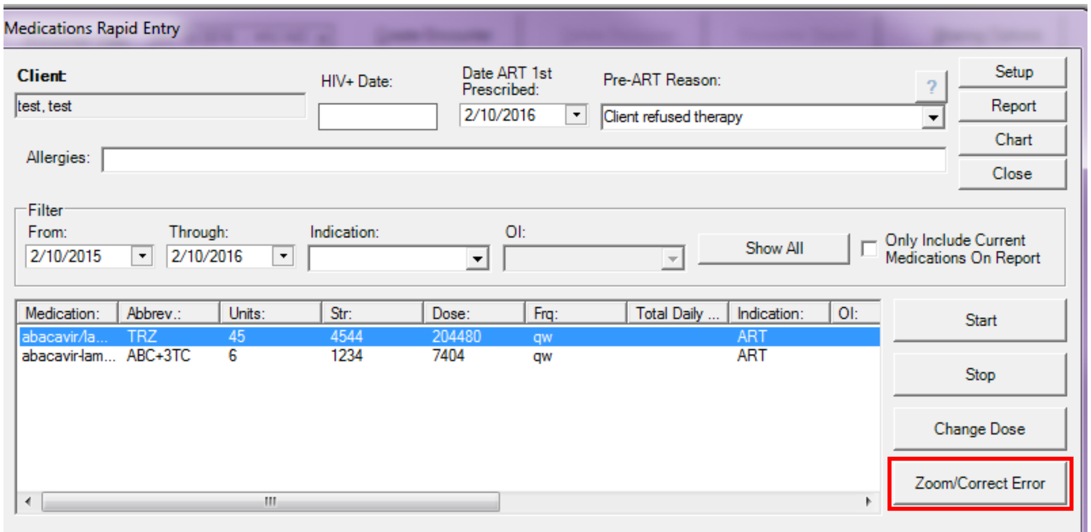


Delete a Medication

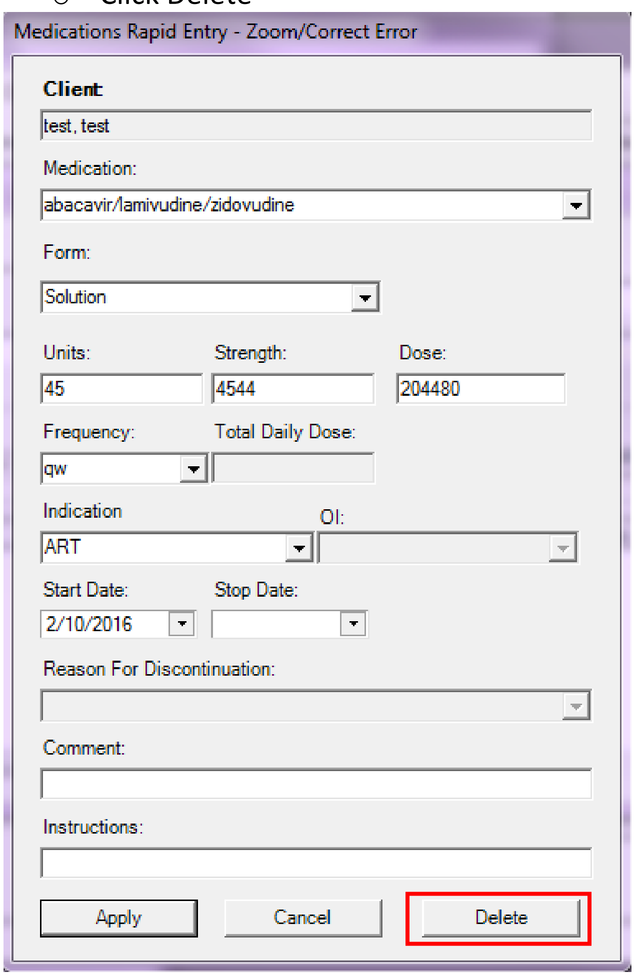
- Highlight the medication and click “Rapid Entry”



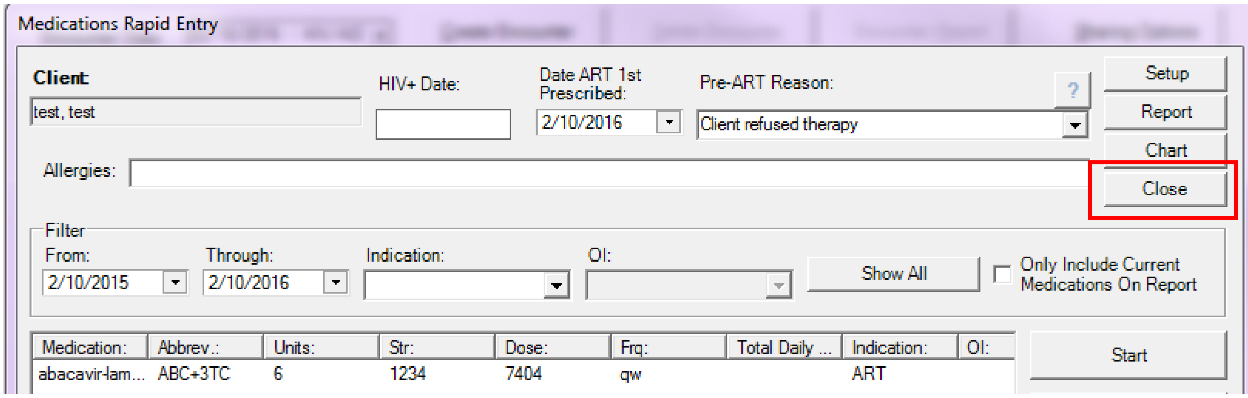
- Highlight the medication and click “Zoom/ Correct Error”



- Click Delete



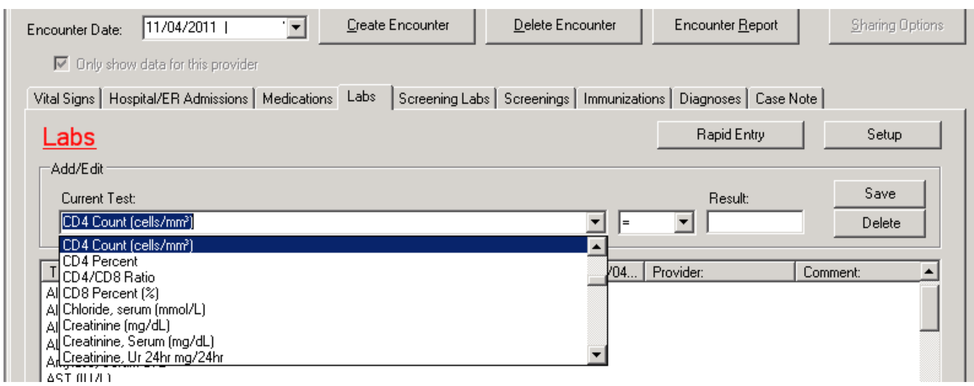
- Click “Close”



Entering Labs

To enter a lab value:

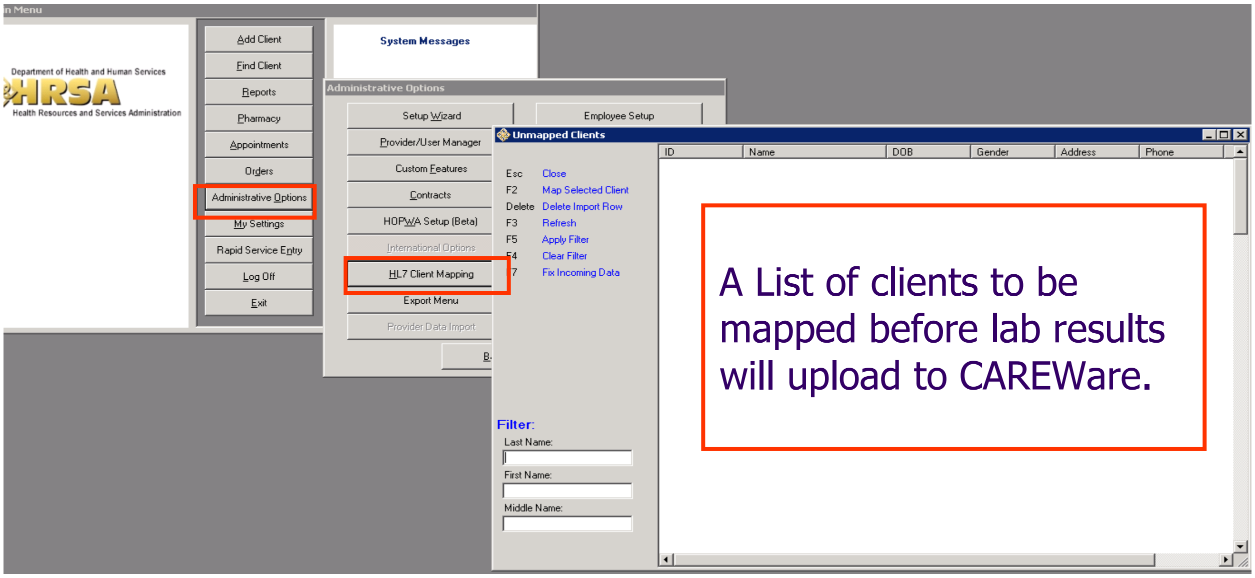
- Select a lab from or type the first few letters of the name of the test in the “Current Test” field.
- Enter the value in the “Result” field.
  NOTE: the pull down menu allows values of =(equal to), <= (less than or equal to), and >= (greater than or equal to). An “undetectable” viral load under 50, then, would be entered as <=49.



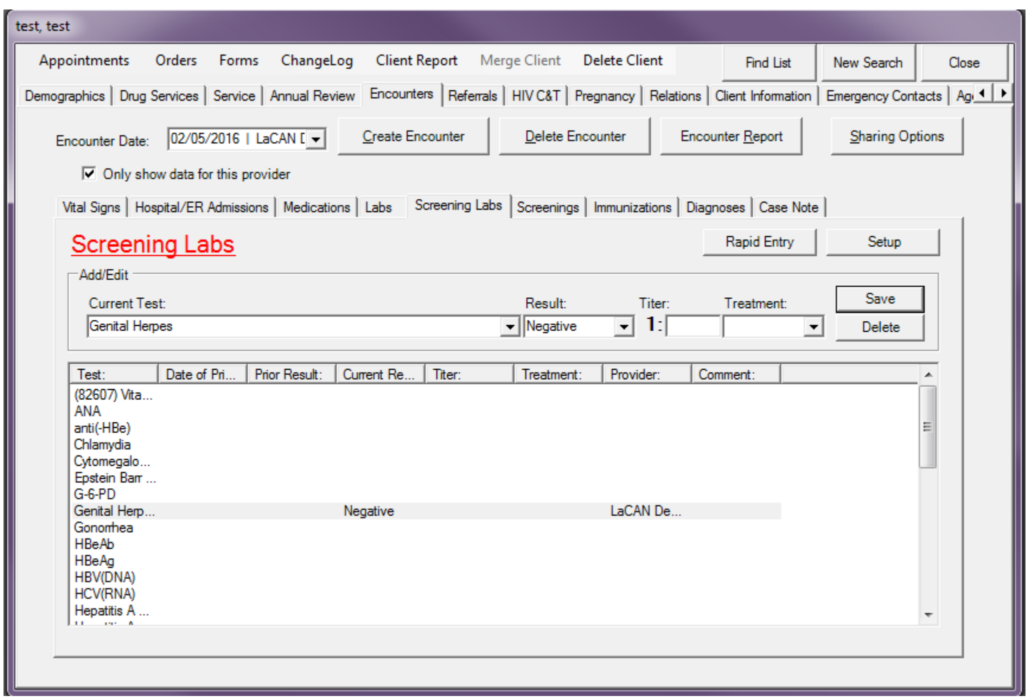
Providers using **HL7 uploads** are required to manually map clients who are receiving lab data via upload. To get to the unmapped client list, click the following from the Main Menu

- Administrative Options
- HL7 Client Mapping

NOTE: When mapping clients, you must be certain that the client is being mapped to the correct record in CAREWare. Once a client has been mapped, the client’s lab data will upload.

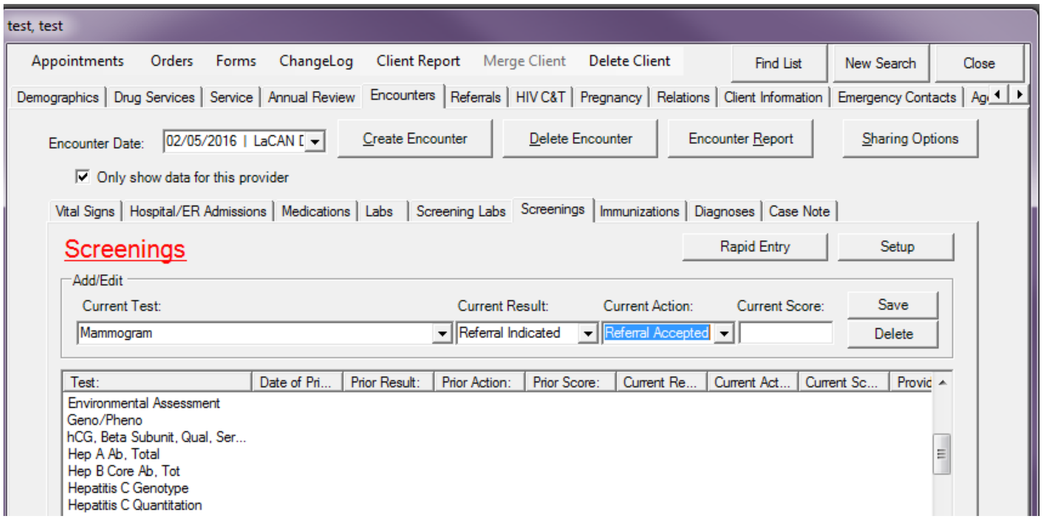


Screening labs allow you to track tests that have a qualitative result, that is, where the result is either positive or negative. For certain tests like syphilis RPR, you can also record the titer.



Entering Screenings

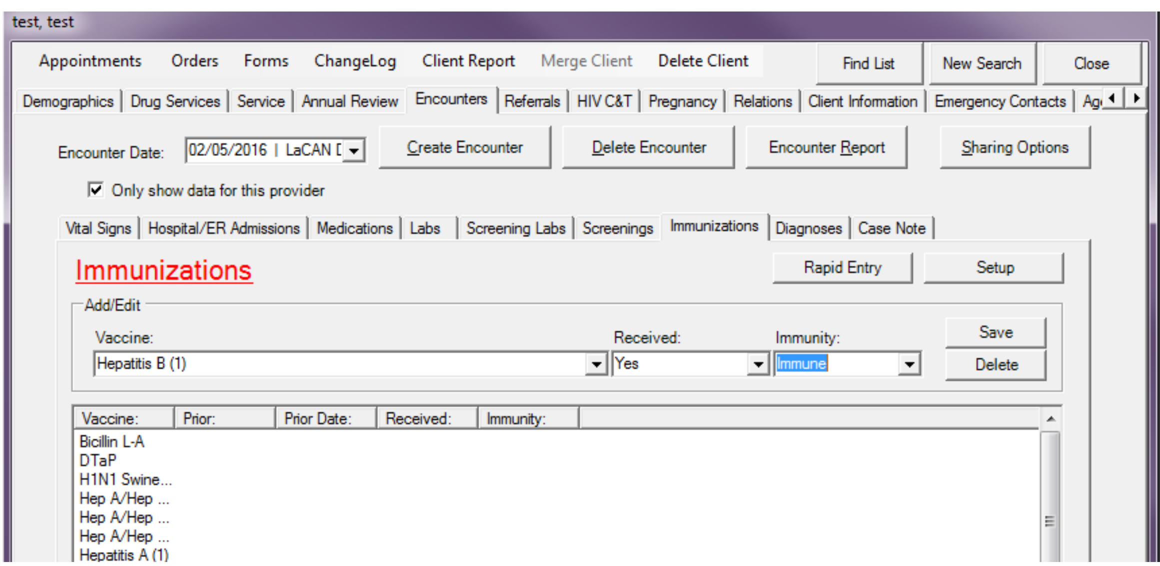
Screenings are tests typically performed annually, such as a Pap smear, or a TB skin test (PPD).



NOTE: Colposcopy, mammogram, Pap smear and pelvic exam options will only appear for female clients. Colposcopy and mammogram were created through the Screenings setup function that allows you to add your own tests.

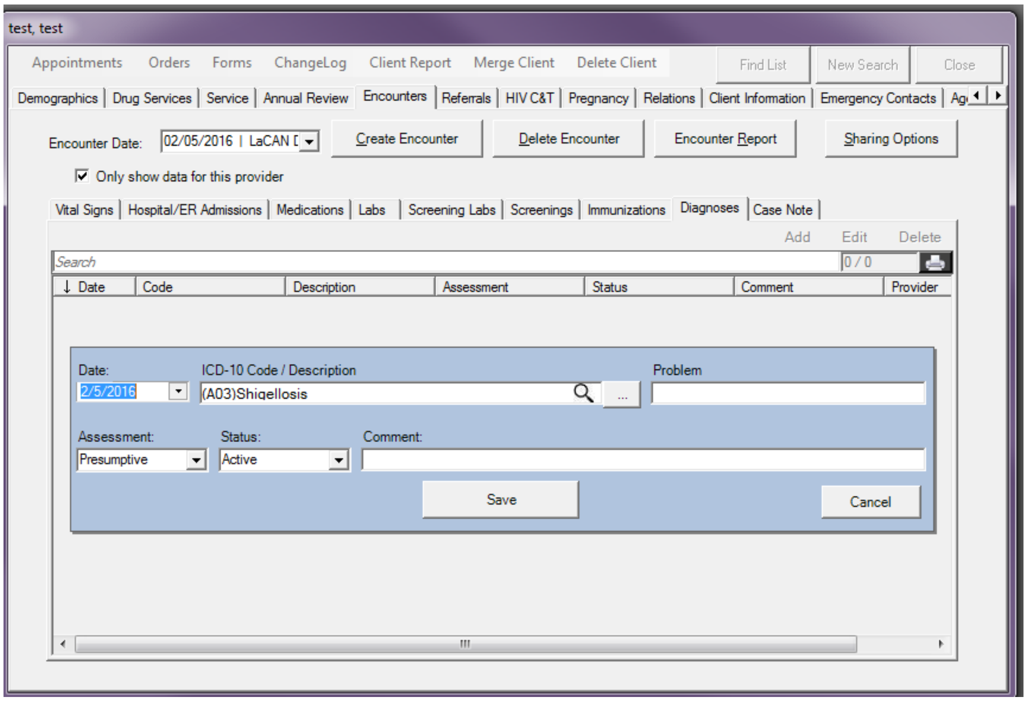
Entering Immunizations

- You can enter information on immunizations as you provide them, or enter a client's immunization history.
- For clients with a history of hepatitis or previous vaccination series, you can mark their immunization "NMI" (Not Medically Indicated) under the "Received:" field, then indicate "History of infection" or "history of vaccination" under the "Immunity:" menu. If a client has already been vaccinated, or is known positive from a prior infection, that information should be entered in the Screenings module to record serology.



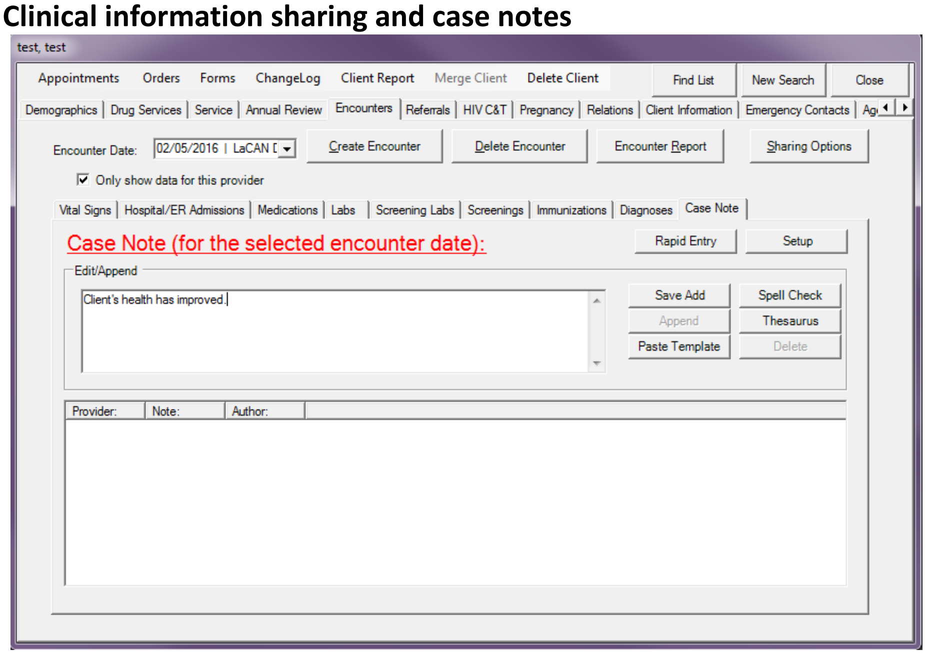
Entering Diagnoses

Enter an ICD-9 diagnosis, and indicate whether the diagnosis is presumptive or Definitive



Case Notes

Clinical information sharing and case notes



- **Important Note on Entering long case notes:** If you are entering a long series of Case notes at one sitting for one client, you may want to save your changes after each paragraph or two.

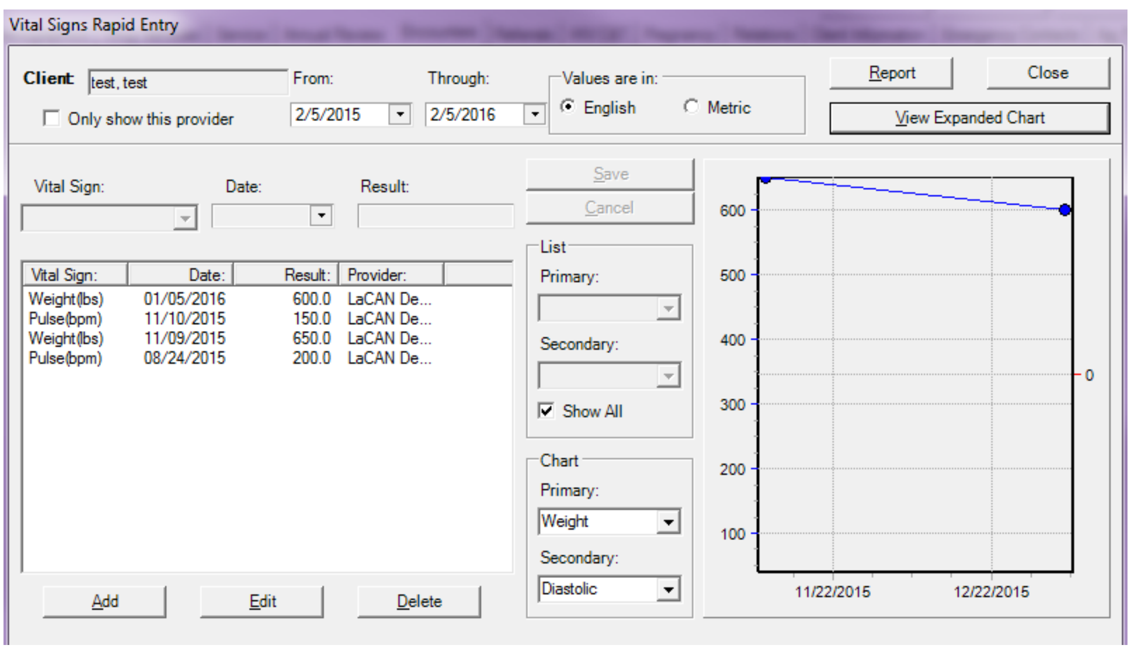
Rapid Entry Screens in Clinical Encounters
Rapid entry screens allow for quick adds and changes to clinical encounter information entered from any date. The encounter-by-encounter screens allow providers to see current information, as well as some information from the previous encounter. By default, all rapid entry screens show you the entire previous year of data, but you can change this to any date range.

Rapid entry screens give providers an overview of a client's historical data in each clinical area. Users can readily produce charts and progress reports that allow for quick review of the medical history for any date range selected. Charting options are available in sub-tabs to plot quantitative values that change over time such as lab results for CD4 count and viral load or any other test, and vital signs.

You can add, edit, or delete information in any of the rapid entry screens. We recommend you use rapid entry only for minor additions and corrections to clinical information, (i.e., a client stops or changes a medication between visits). Using dated clinical encounters to enter information makes it easier for yourself and others to access that information in the future.

Vital Signs Rapid Entry

- By default, all vital signs from the last year are shown. Un-checking the "Show All" box in the center of the screen will allow you to see only one or two (primary and secondary) values. You can also choose primary and secondary values on which to run a chart.



- *View Expanded Chart*

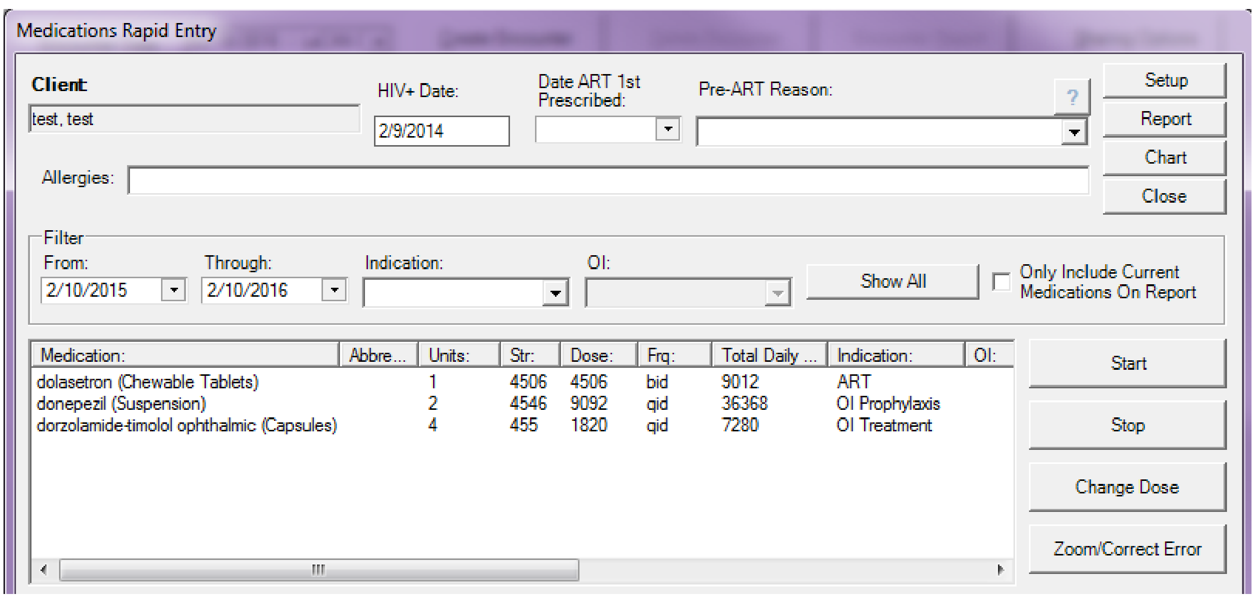
- **This** button allows you to see a larger version of the chart, and choose whether to see it three-dimensionally. The expanded chart is not printable from that window.

- *Report*
  - This button allows you to generate a printable report based on the filters you've selected:
  - Change the "From" and "Through" dates on the top of the screen and the graph will automatically re-plot using your new date range.

Medications Rapid Entry

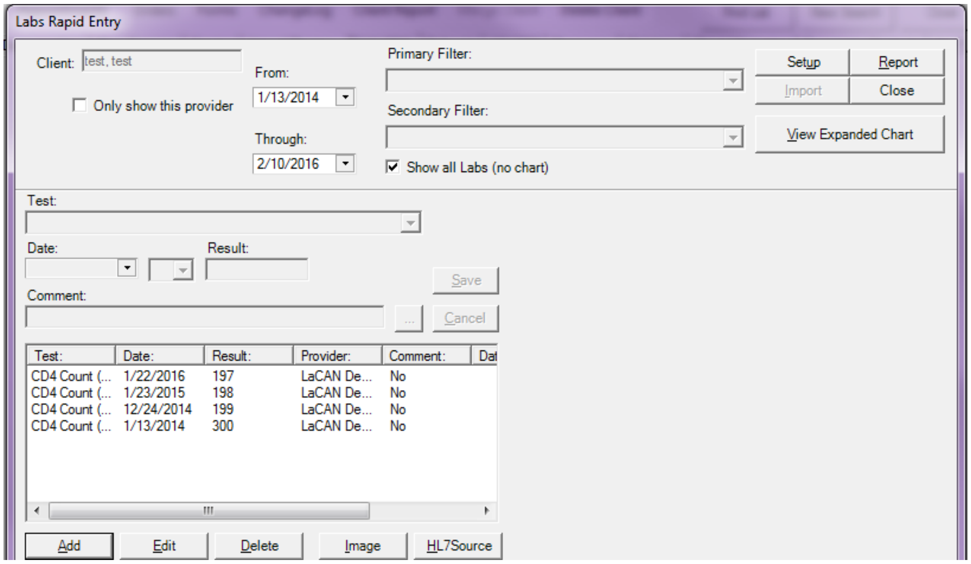
By default, all prescribed medications for this client are shown. You can filter them using the 'Indication' field to show only meds for ART, OI prophylaxis, OI treatment, or other. You can also modify the "Date ART first prescribed" if the client began ART treatment prior to becoming your client, otherwise CAREWare will populate this field with the earliest ARV start date entered.

- Note that you can also check on the top right to include only current medications, that is, those for which there is no stop date (or a stop date after the Date range selected). This will shorten the printout for clients with many non-active meds.



Labs Rapid Entry

By default, all labs are shown. You can apply primary and secondary filters (for instance, CD4 and viral load) to view only 1 or 2 labs, view charts, and run reports.



Screening Labs, Screenings, Immunizations and Diagnoses Rapid Entry

These work in the same way as the other tabs, allowing you to specify date ranges and primary and secondary filters, and produce basic reports. However, you cannot generate charts from these screens as their values are not chartable.**HIV C&T**

The HIV Counseling & Testing (C&T) tab can be used to track clients who enter care through an agency's C&T program. It also allows agencies to track C&T for clients who only receive HIV C&T and not any other CARE Act eligible service.

Part A uses this module to track and report client utilizing Early Intervention Services.

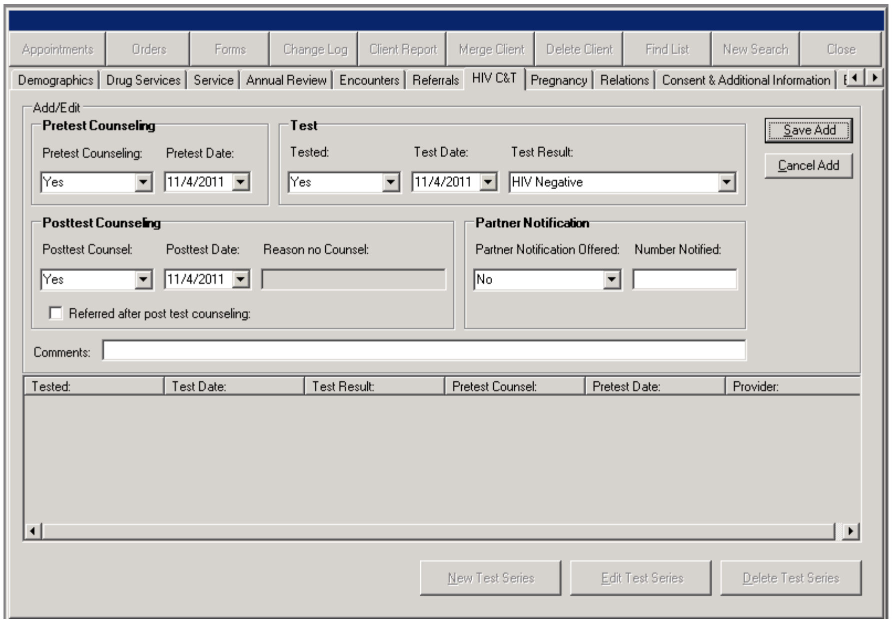
Clients who are entered here will be included in the C&T section of the RSR, **but they will not be included in the overall client counts unless they have also received an eligible CARE Act service in the reporting period.**

Pregnancy Tab

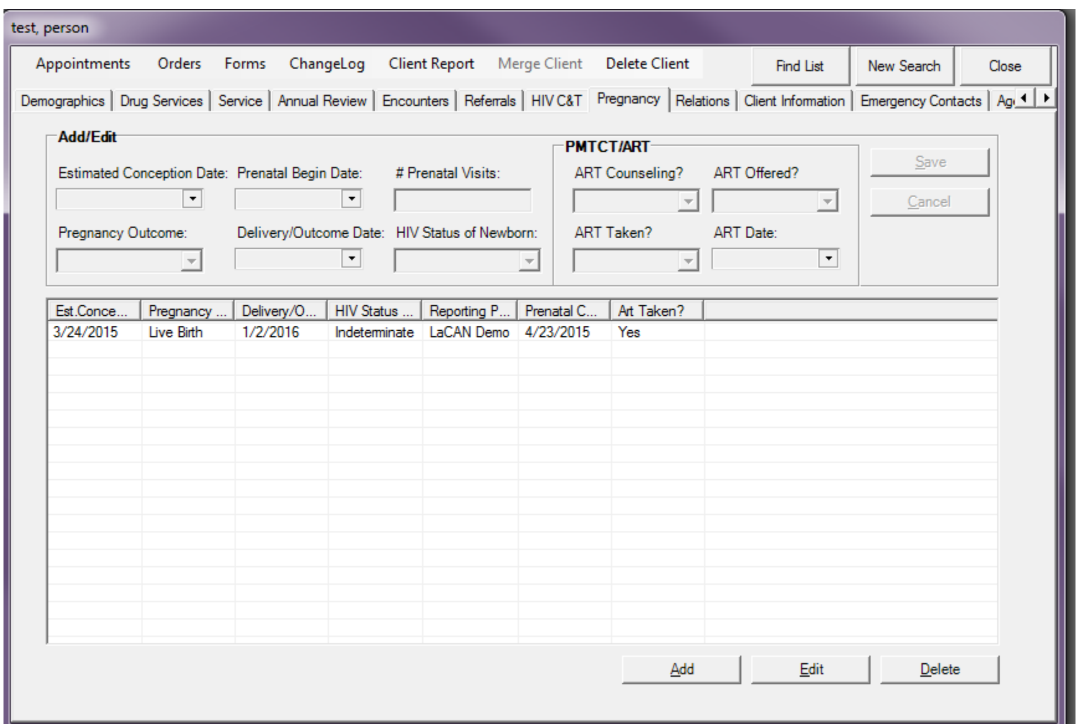
Pregnancy and prenatal care is collected on the Pregnancy tab (which only appears for female clients).

The following variable are collected on this tab

- Estimated Conception Date
- Date client begin Prenatal
- # of prenatal visits
- Pregnancy Outcome
- Delivery/outcome date
- Newborn HIV status
- ART Counseling
- ART Offered
- ART TakenDate
- ART begin



After completing the fields, click the “Save Add” button.



Referrals

Two types of client referrals may be recorded in CAREWare:

1. *External Referrals:* Referrals made to agencies not using the LaCAN CAREWare
2. *Internal Referrals:* Referrals made to agencies using the LaCAN CAREWare.

Note that *Internal* and *External* refers to whether the agency you are referring a client to uses LaCAN CAREWare, NOT whether the client is being referred within your agency.

1. Open the client record in CAREWare and go to their Referrals tab.

2. To enter a new referral, click the blue "Add Referral" link. This allows you to enter referral information.

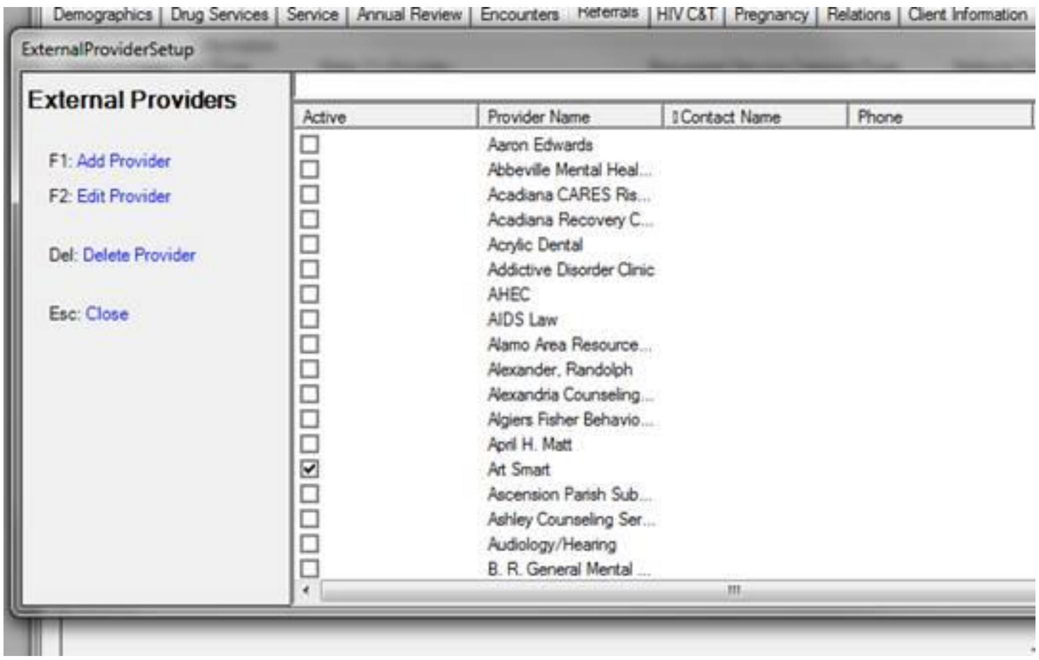
3. Enter the referral date in the **Referral Date** field (this is the date you make the referral, not of the appointment or when the client goes).

4. Select the appropriate referral type in the **Type** drop down box. You will not be able to select a Refer-to Provider until this is selected.
   a. **Internal:** Referrals made to agencies using the LaCAN system.
   b. **External:** Referrals made to agencies not using the LaCAN system.

   <u>Remember that you should only make Internal referrals if you already have a relationship with the agency you are referring to, know that they are accessing CAREWare frequently, and that you have both the client's consent to make the referral and are still sending over the appropriate paperwork.</u>

5. Select the name of the provider you are referring the client to in the **Refer-To Provider** drop down box.

a. If the provider is not listed on the drop down, click the **Add** button and browse the pop up list for the provider.
    i. If you find the provider on this list, check the box next to their name and click the blue **Close** link.
    ii. If the provider is **not** on the list, click the blue **Add Provider** link and complete as much information as you have. Only Provider Name is required, but the rest is helpful. Click **Save** and then the blue **Close** link.



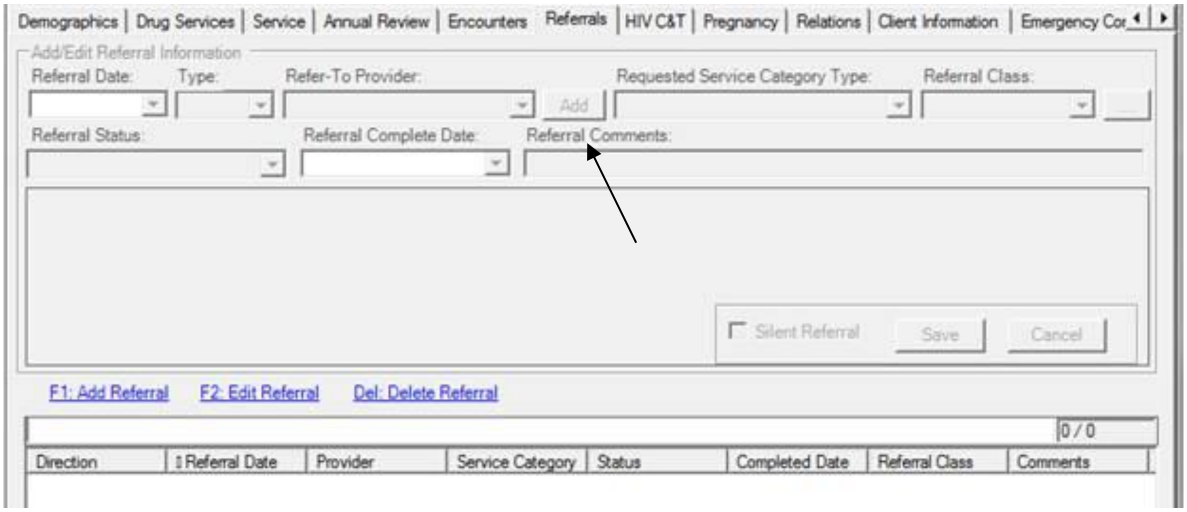
6. After selecting the Refer-to Provider, go to the **Requested Service Category Type** and choose the appropriate category. If you are completing an Internal referral, only the service categories currently active in a CW contract for that agency will appear.

7. If applicable, select the appropriate **Referral Class**.

8. The **Referral Status** will initially be Pending for all referrals unless you are entering them after an outcome has occurred. For External referrals, select the appropriate Referral Status and, for anything other than Pending, a **Referral Complete Date.** If doing an Internal referral, this information is completed by the Refer-To Provider.

- Enter any additional comments in the *Referral Comments* box.
- If you wish to make a *Silent Referral* check that box.
- Press *Save* to send the referral to the other agency.
- The referral will appear in the box at the bottom of the Outgoing Internal Referrals screen for that client.

Note: The *Referral Class* field is a customization available for additional referral tracking. Please contact LaCAN for more information. This field is ***not*** required to complete a referral.
To add, delete, activate, or deactivate providers on the drop-down list for *External Referrals*, select the "Add" button.



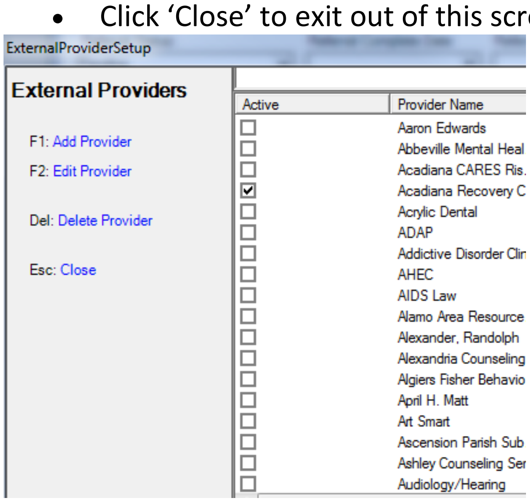
- To add a new provider, click "Add New Provider" and type the name into the Provider Name field, then click on "Save this Provider."

- To delete a provider, highlight the provider and click "Delete Selected".

- To activate a provider (have the name appear on the drop down menu), click the check box next to the provider name and make sure that the box is checked.

- To deactivate a provider (have the name appear on the drop down menu), click the check box next to the provider name and make sure that the box is unchecked.

- Click 'Close' to exit out of this screen and save changes.



About "Silent Referrals"

A silent referral is made with a greater degree of confidentiality. With a normal referral, the receiving agency is notified by a message on their CAREWare main menu that a referral has been received. With a silent referral, the receiving agency is not notified of the referral in CAREWare and does not know the client was referred unless they are notified through another method (e.g. the client coming in for the service or a phone call/email/fax from the agency sending the referral).

For silent referrals, the receiving agency must add the client to their CAREWare to see that a referral has been made. When they add the client, a message will appear notifying them of a possible duplicate and referral.

You may also edit outgoing internal referrals that have not been completed to change them to silent referrals.

When your agency has a **Received Internal Referral (non-silent):**

For users with permission to see incoming referrals, a link will appear on their CW main menu:

- Click on the *Incoming Referrals* link to view the referrals received electronically by your agency.
- In the list of clients that appears, select a record and click *Details.*
- If the client is already in your agency's CAREWare list (i.e., has been a client at your agency before) then you will be taken directly to the client record.

- If the client is new to your agency, the *Possible Duplicate Client* screen will appear and prompt you to add them as a client.
- You will be taken to the client's *Referrals* screen in their record and should then complete the *Referral Status* and *Referral Complete Date* fields once you have that information.
- **If a service is provided that is related to the referral you received, you can enter that service from the referral record. It will also show up on the client's Services tab.**

Client Information, Emergency Contacts, & Agency Specifics

Every client has three *custom tabs* in their record that LaCAN has set up:

1. ***Client Information:*** Used to record other client information such as who is their case manager, SSN, and mailing preferences. *Fields on this tab are shared with and editable by all of the client's providers.*

2. ***Emergency Contacts:*** Used to record the client's current emergency contact and evacuation information. *Fields on this tab are shared with and editable by all of the client's providers.*

3. ***Agency Specifics:*** A tab to include fields needed only by individual agencies. An agency may wish to record specific information collected only by their program that would not be useful to other agencies or is not otherwise required in CAREWare. For example: where a client's paper record is stored, other agency/local programs the client is enrolled in, or other staff assigned to the client. *Fields on this tab are only visible to your agency unless otherwise requested.* ***Contact your LaCAN Partner to have fields added.***

Client Information Tab

Case Management Program: Select the case management program the client is enrolled in. Contact your designated LaCAN Partner if you have questions about what to choose.

Other Case Management Program: If you select OTHER in the Case Management Program field, type the name/type of program in this field.

Case Manager Assigned: Part A: If the client is case managed through a Part A program, select their name from this box. If the name does not appear in the dropdown, contact your designated LaCAN Partner to add it to the field. If the client is not case managed through Part A, leave this blank.

Case Manager Assigned: Part B: If the client is case managed through a Part B program, select their name from this box. If the name does not appear in the dropdown, contact your designated LaCAN Partner to add it to the field. If the client is not case managed through Part B, leave this blank.

Case Manager Assigned: Part D: If the client is case managed through a Part D program, select their name from this box. If the name does not appear in the dropdown, contact your designated LaCAN Partner to add it to the field. If the client is not case managed through Part D, leave this blank.

SSN: Enter the client's Social Security Number. If the client does not have a SSN, leave the field BLANK.

Primary Language: The language the client is most comfortable speaking. If the client is most comfortable speaking Spanish and can only speak some English, put Spanish as their primary language. If you need a language not listed in this field, email hap@la.gov to have it added.

Secondary Language: Other language spoken by the client. Leave blank if not applicable. If you need a language not listed in this field, email hap@la.gov to have it added.

Consent to Mail: Indicate the client's mailing preference.

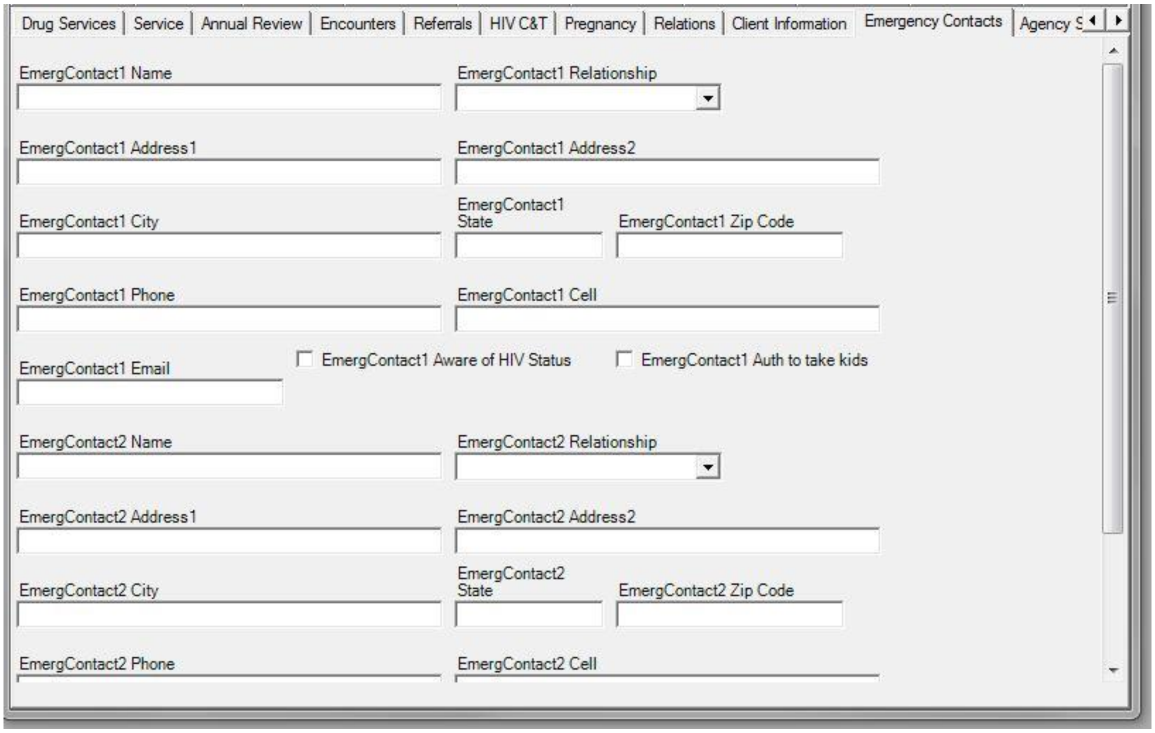
Consented Mailing Address: If client wishes to receive mail at a different address than the one listed on their Demographic Tab (the physical address), enter the address here.

Non-Logo Mailing Only: Check if only mail without the agency's logo should be sent to client.

Veteran: Check if the client qualifies as a military veteran.

Attachments: Links to attached documents. See Attachments section in this manual.

Emergency Contacts Tab



Emergency Evac Plan: Required for New Orleans agencies. Indicate the client's evacuation plan

This screen includes fields for two emergency contacts for the client. Each set includes the same fields:
Name: Name of the client's emergency contact

Relationship: This contact's relationship to the client

Address1, Address2: Street address for the emergency contact

City, State, Zip: City, state, and zip code for the emergency contact

Phone: The emergency contact's primary phone number

Cell: If not used for *Phone*, put the emergency contact's cell number in this field

Email: Emergency contact's email address

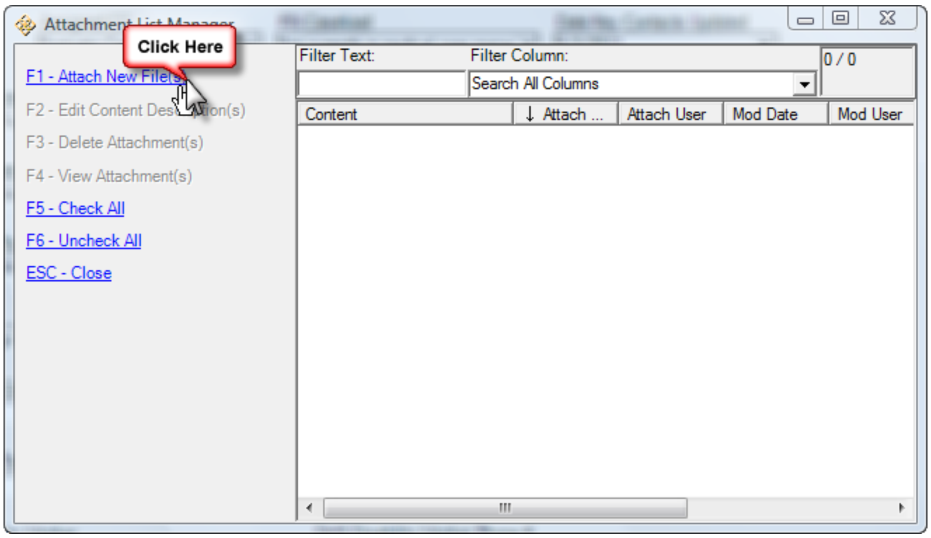
Aware of HIV Status: Check this box if the emergency contact IS aware of the client's HIV status

Auth to take kids: Check this box if the client has children AND the emergency contact is authorized to watch the children in the case of an emergency

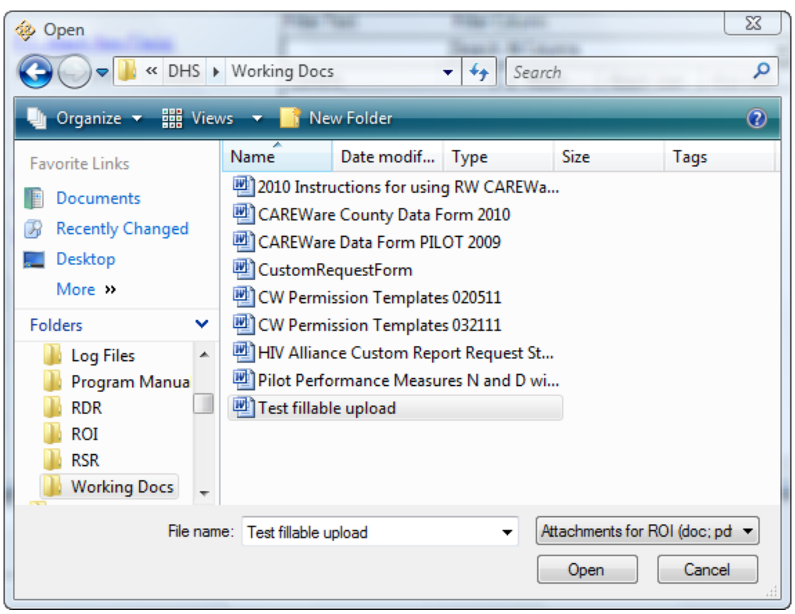
Attachments

The link for attachments is on the Client Information tab.

To attach a file to the client record, click on the field's hyperlink to open the attachment window. Click on F1 – *Attach New File*.

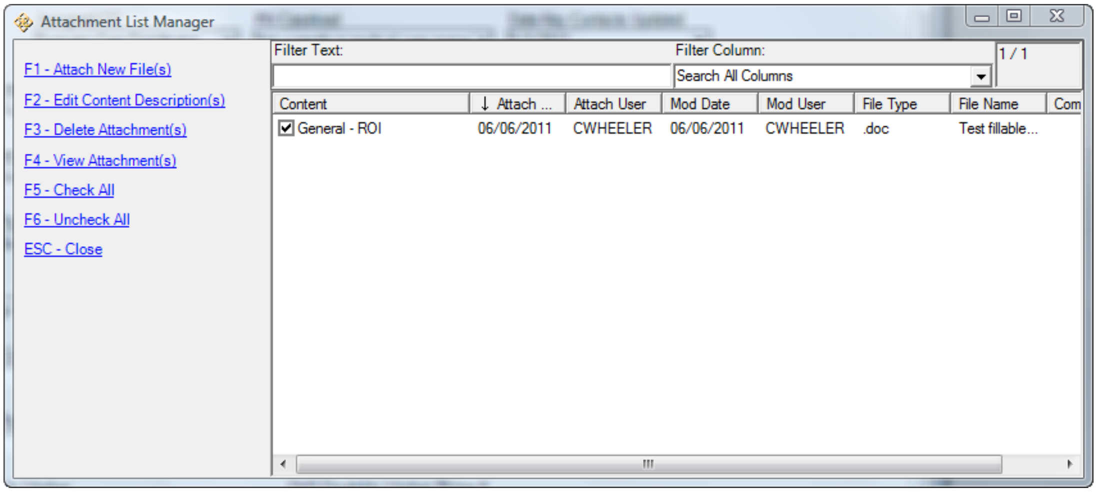


Navigate to the file you wish to upload and select *Open*.



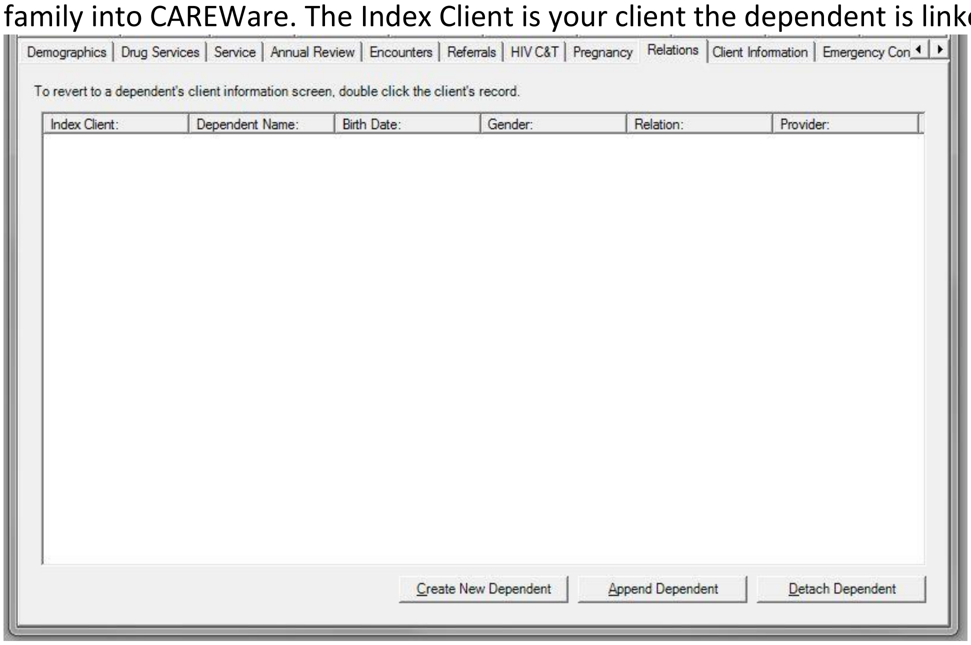
Select the type of attachment you are uploading.

You will see the attachment listed in the *Attachment List Manager*. You may delete, view or edit the attachment by selecting the file and using the command links on the left side of the screen.



Relations

The Relations tab allows you to enter HIV-Negative/Affected members of the "Index Client's" family into CAREWare. The Index Client is your client the dependent is linked to.

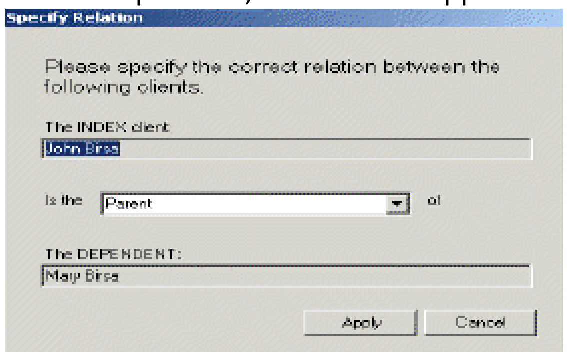


Entering dependents in CAREWare does not mean they will be counted on the RSR for your agency. You must provide at least 1 service to a relation for them to be included.

To create a new dependent:

- Click on *Create New Dependent* on the *Relations* tab within the record of your HIV-Positive client.

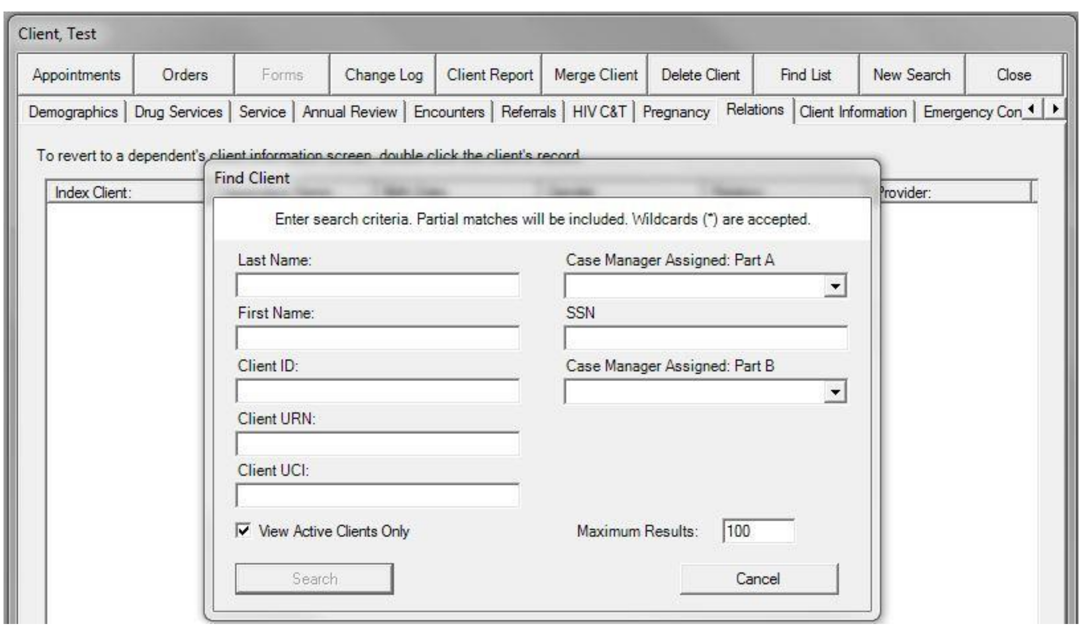
- A screen that looks like the same screen you use to add a new client will appear. Enter the URN components for the dependent.
- If you enter a dependent who is less than 2 years old, CAREWare will ask you to confirm that you are adding an infant.
- Once you add the dependent, a screen will appear asking you the relationship:



- The Relations tab will now list the new dependent.
- Double-click the dependent record to go to their CAREWare record.
- The RSR requires the following information for any dependents you are reporting a service for: Race, Ethnicity, Vital/Enrollment Status, Enrollment Date, Services, HIV status.

To *append* a dependent:

When the dependent already has a record in CAREWare, you can link them to the Index Client on the Relations tab by clicking Append Dependent, searching for their record, and then indicating they should be added to the Index Client's record as a dependent.

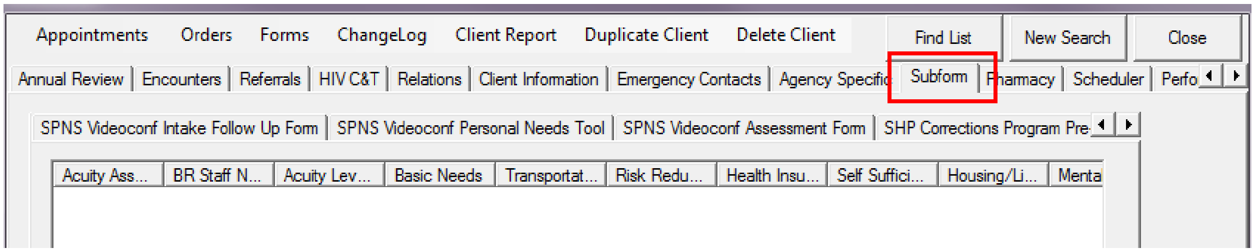


To *detach* a dependent:
If a dependent has been added by mistake, go to the Index Client's Relations screen, select the dependent record, and then click *Detach Dependent.*

Subforms

Subforms within each client record are another way to collect date-specific information that is not entered under services, referrals, or the annual review. The subforms currently established by LaCAN are listed below. Active subforms for your agency depend on your funder's requirements. Not everyone will have all of these subforms activated.

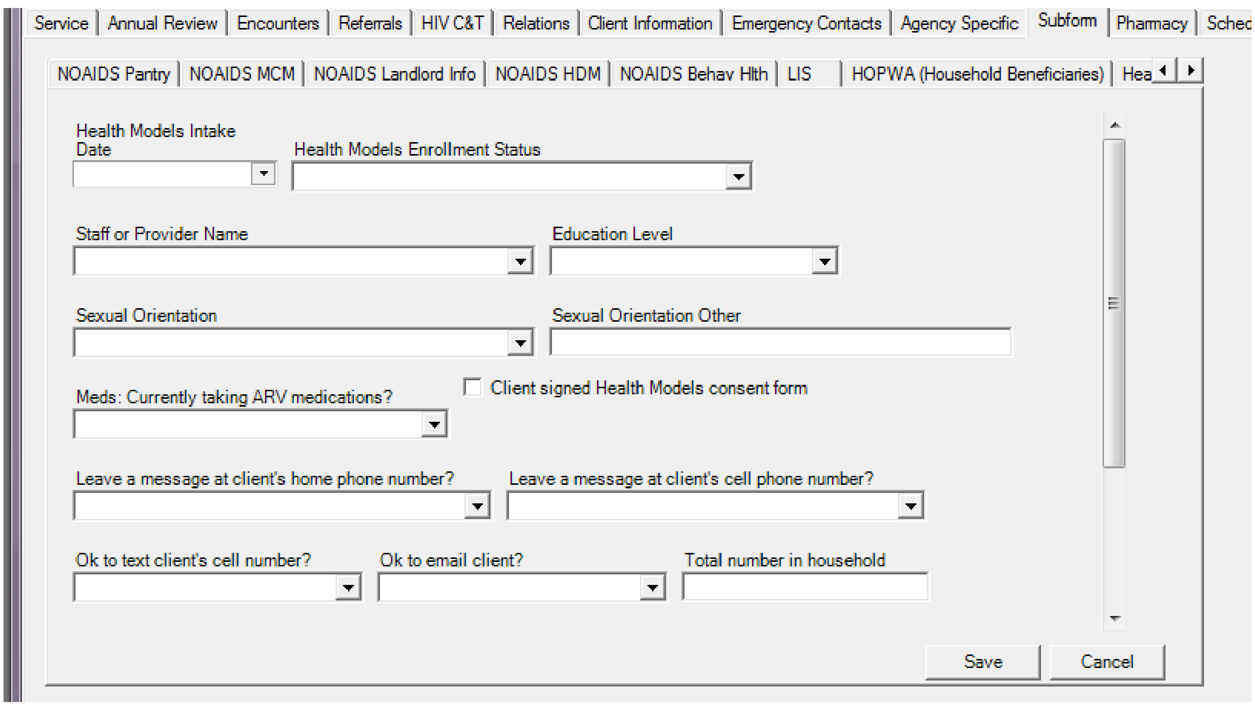
1. NOLA Part A Acuity Scale
2. BR Part A Subforms:
    a. Acuity Scale
    b. BR Part A Needs Assessment
    c. BR Mental Health/ Substance Abuse
3. SPNS:
    a. SPNS Videoconference Personal Needs Tool
    b. SPNS Videoconf Assesssment Form
    c. SPNS Videoconf Intake Follow Up Form
    d. Incarceration History
    e. SHP Corrections Program Pre-Release Intake
4. HOPWA (Household Beneficiaries)
5. LA Links Subforms:
    a. LA Links Intake Form
    b. La Links Client Locator Form
    c. LA Links Discharge Form
    d. LA Links Transition Plan
    e. LA Links Client Survey
5. NOAIDS-only subforms:
    a. NOAIDS Intake
    b. NOAIDS Discharge
    c. NOAIDS PMC
    d. NOAIDS MCM
    e. NOAIDS Pantry
    f. NOAIDS Behavioral Health
    g. NOAIDS HDM
    h. NOAIDS Housing



To enter data in a subform:

- Click on the *Subform* tab within a client's record
- Use the sub-tabs to select the correct form (e.g., 6 Month Eligibility Verification Review)
- After selecting the correct sub-tab, click *Add Row* to enter a new record

This opens up the subform on the *Edit Page* tab

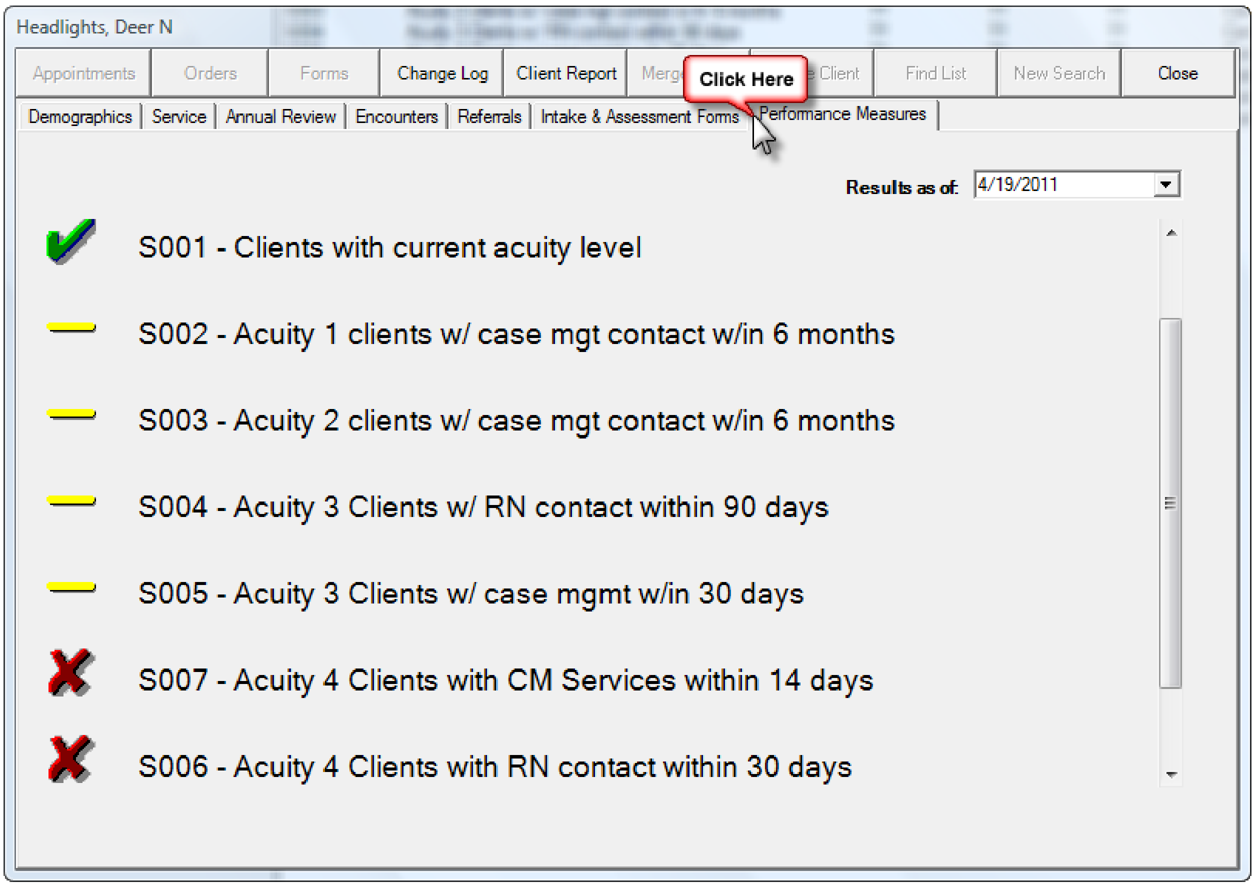


- Every subform includes a date field. In this example, it is *6 Month Review Date*. A date is required for every subform entry.
- Complete all applicable fields on the subform and click *Save.*
- Once the entry is saved, you will see a new row for the entry on that subform's page.

If not all of the information is available at the time you complete the subform then you may edit it at a later time by navigating to the subform, selecting the appropriate row, and clicking *Edit Row*.

Performance Measures

Performance Measures (PM) in CAREWare guide the case manager, quality management staff, and LaCAN in determining whether certain standards are being met. Once you are in a client's record, you can access PM data specific for that client. Within the client's record, select the *Performance Measures* tab. Those measures with a yellow line next to them indicate that the measure is not applicable to the client. Pay attention to the green check marks and the red x's, which tell you whether or not the client's PMs are being met.

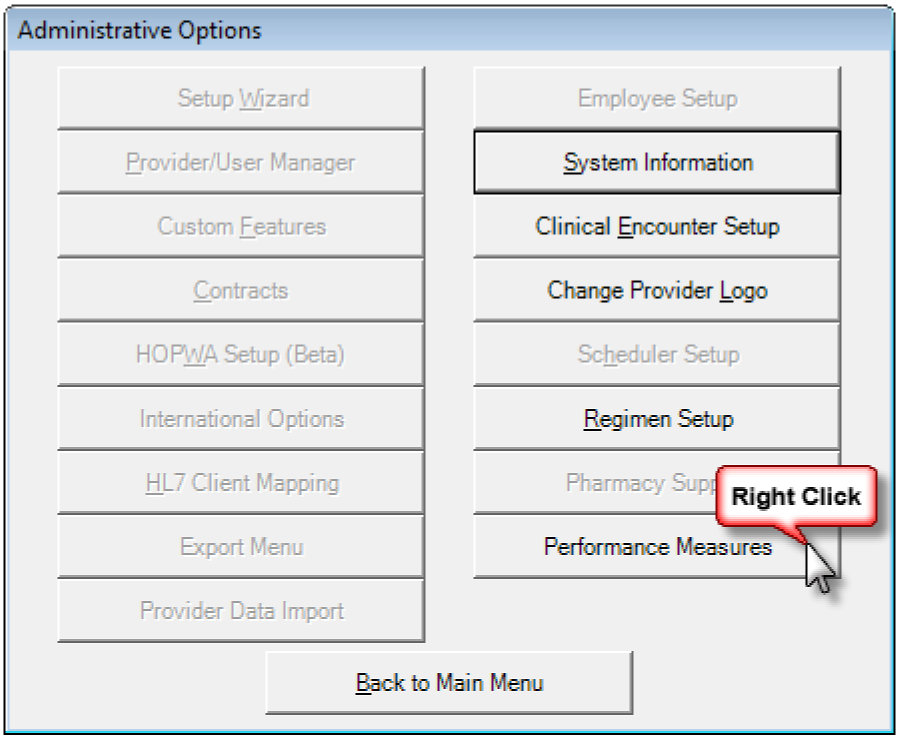


A red "x" indicates that the performance measure applies to the client but has not been met. A red "x" is a good reminder that this client and/or his/her CAREWare record need some case management attention.

A green check mark indicates that the performance measure applies to the client and has been met.

A yellow line indicates that the performance measure does not apply to the client and therefore the performance measure is not applicable.

You can easily get a list of all clients who meet or do not meet selected Performance Measures. From the main menu, select *Administration* then *Performance Measures.*

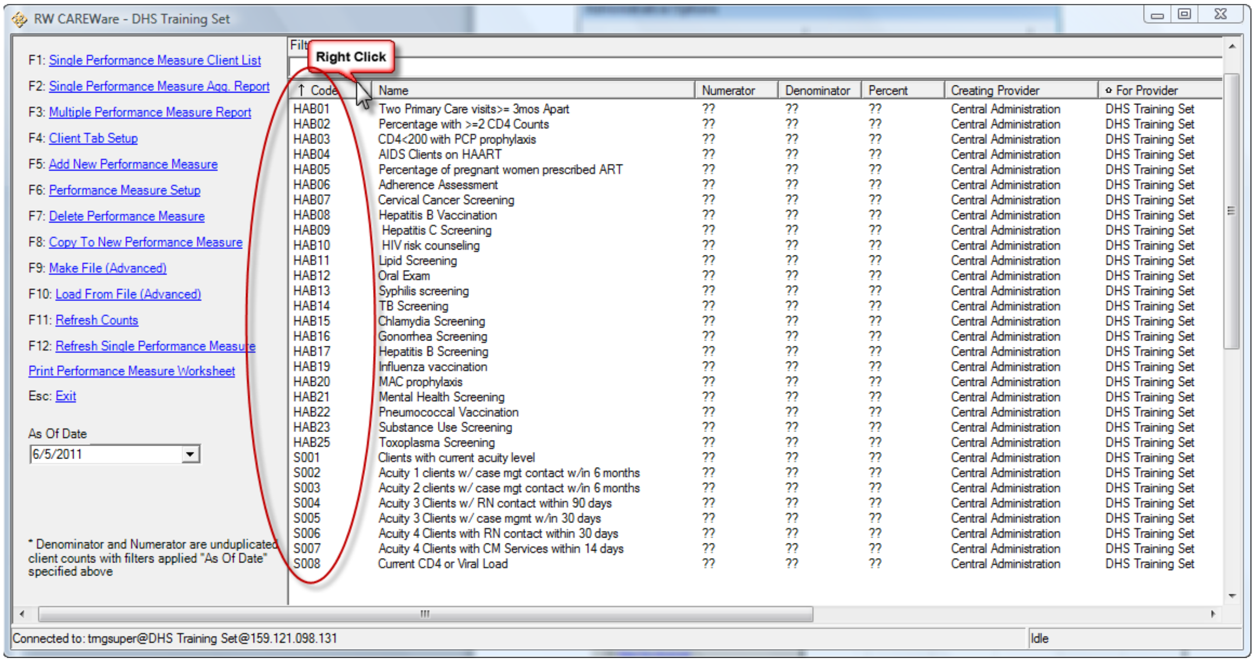


The *Performance Measures Worksheet* screen will contain a long list of Performance Measures (PM.) Each PM will have a unique code assigned to it. Only certain PMs are relevant to a specific agency's service delivery.

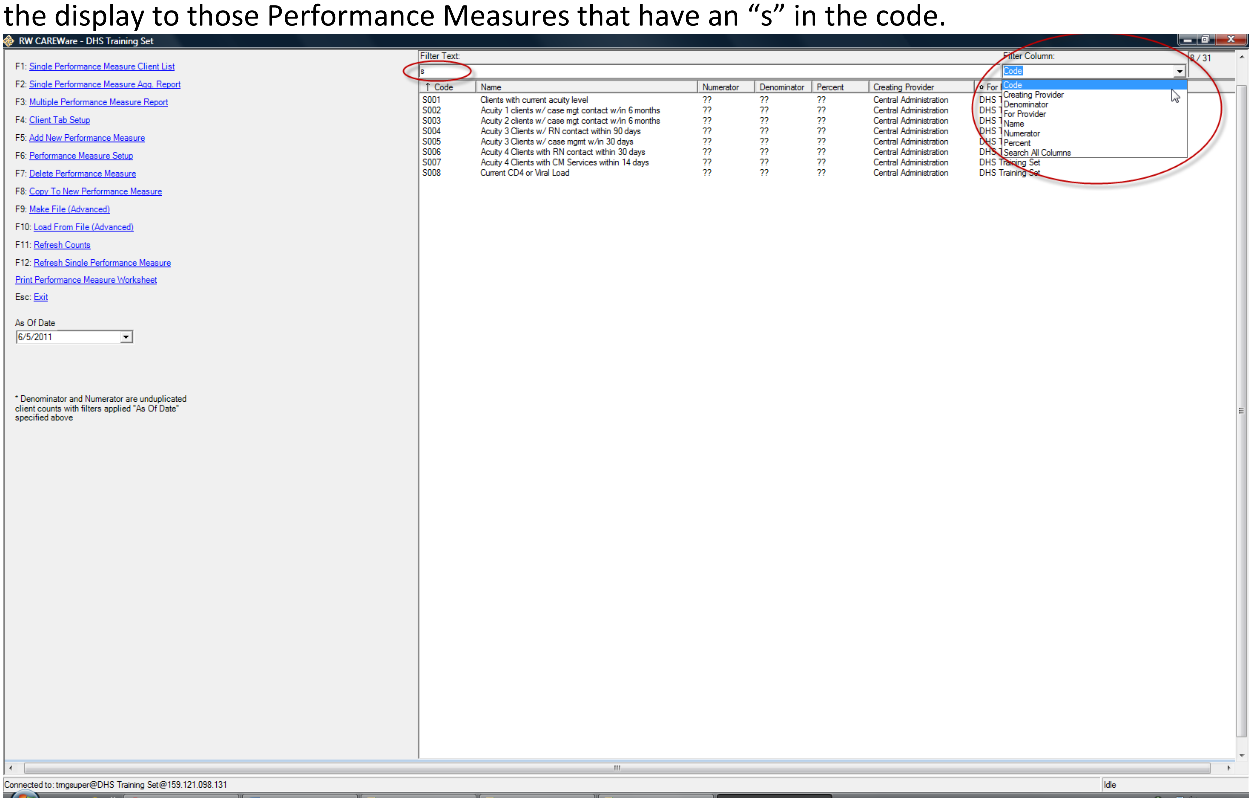
If you are uncertain which PMs are applicable to your program, contact the LaCAN Help Desk.

To sort the *Performance Measures Worksheet*, right click at the top of the *Code* column and the column will sort by code from A → Z or from Z → A.

PERFORMANCE MEASURES FOR LACAN ARE UNDER DEVELOPMENT. IF YOUR AGENCY HAS SPECIFIC MEASURES YOU WISH TO TRACK FOR CLIENTS, CONTACT YOUR DESIGNATED LACAN PARTNER FOR ASSISTANCE.



To filter the *Performance Measures Worksheet*, enter the filter criteria in the Filter Text field and then select the column you want CAREWare to search for the filter text. In the example below, we have asked CAREWare to filter for the letter “s” in the “Code” column. This will limit the display to those Performance Measures that have an “s” in the code.

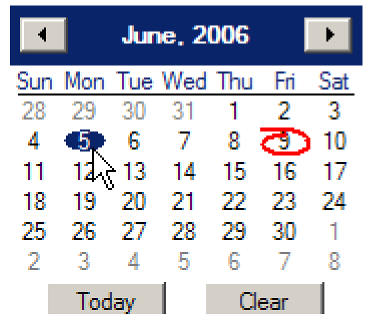


To get an overview of how your agency is performing with regard to a specific PM, select the PM and then click on F12: Refresh Single Performance Measure.

Using Calendar/Date Picker Screens

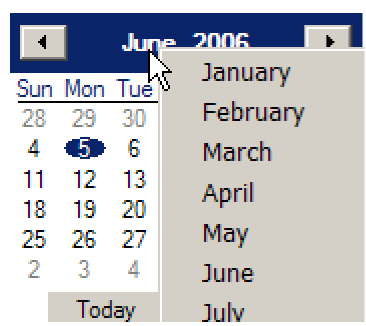
The following instructions apply to any “date field” used in CW. Click on the down arrow to the right of the date field and a calendar screen will open. The current date is circled in red.

Click on the date of the service to select the date for entry.



You can also scroll by month forwards or backwards using the arrows to the right and left of the month and year.

You can jump across several months by selecting the month at the top of the screen or you can jump across years by clicking on the year and using the arrows to scroll.



CAREWare 5.0 Reports

This manual focuses on those reports that are expected to be of greatest use to LaCAN users. Additional information on using the reporting functionality in RW CAREWare can be found in the HRSA developed RW CAREWare 4.0/4.1 manual as well as in the document describing new features for RW CAREWare 5.0 both available from http://hab.hrsa.gov/manageyourgrant/careware.html.

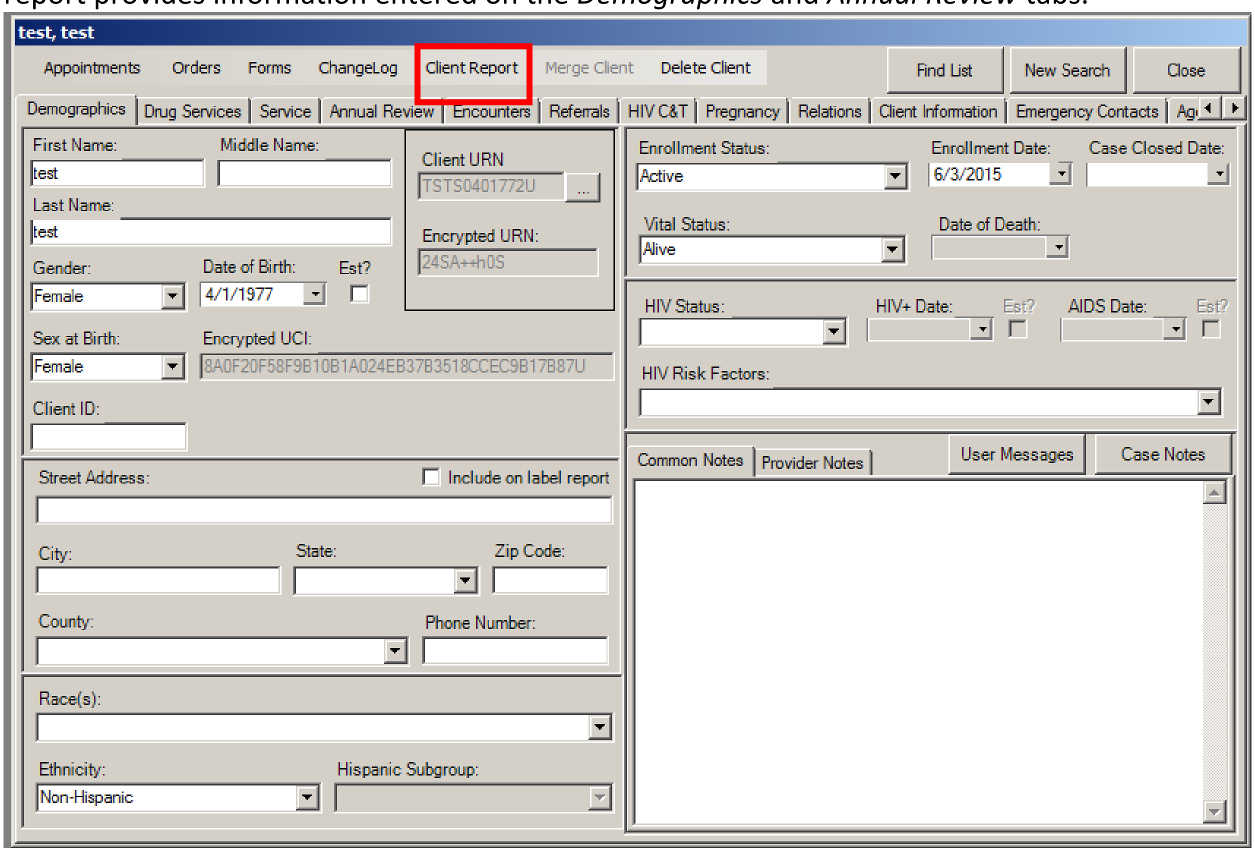
LaCAN will also be holding trainings on Custom Reports and adding to this manual in the future.

Commonly used reports accessed in client screens include:

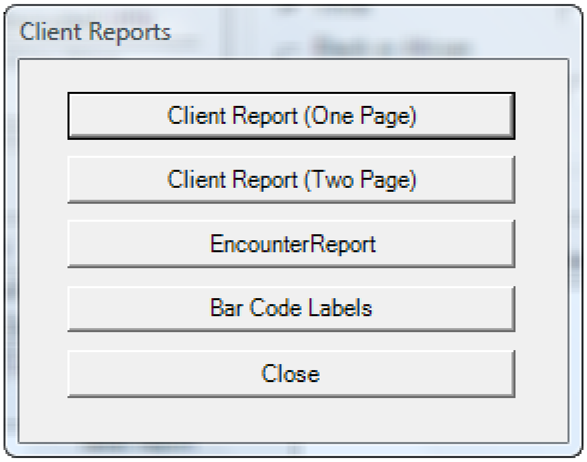
- Client Report (access through any *Client* screen)
- Case Note Report (access through the *Case Notes* screen*;* see section on Case Notes)
- Lab Rapid Entry Report (access through the *Encounters/Labs* screen; see section on Labs)

Client Report

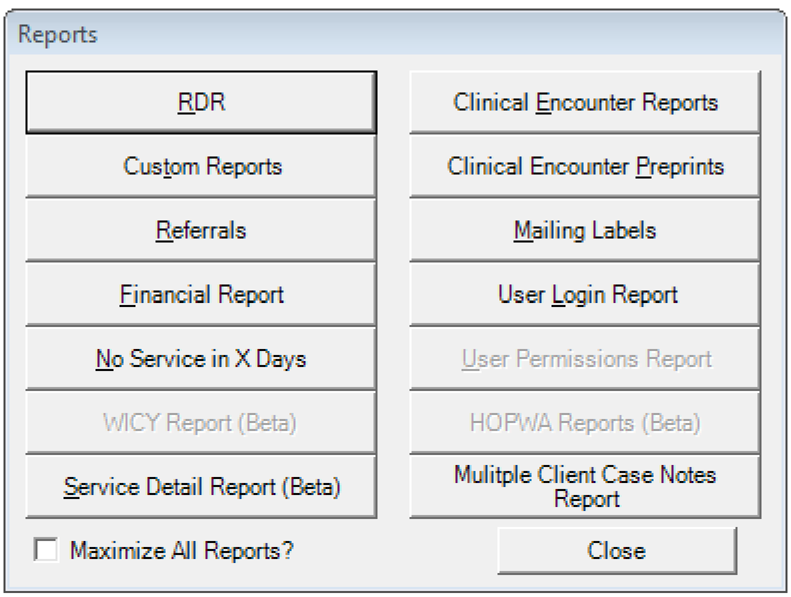
To run the Client Report, click on the *Client* Report button from the main client screen. This report provides information entered on the *Demographics* and *Annual Review* tabs.



The client report menu offers several viewing options. The two page report includes more client information than the one page report.



Several other useful reports are available through the *Reports* menu. From the main menu, select *Reports*. Descriptions of these reports follow the screen shot.



1. *HRSA Reports* opens a menu for the RSR and the RDR. The RSR is the annual report required by HRSA. The RSR gives a very useful demographic overview of the clients served by your agency during a specific time period. This report can also be useful in determining the completeness of your data.

2. *Custom Reports* opens the custom reporting module (more information follows.)

3. *Referrals* opens the referral reports module.

4. *Financial Report* is a good service utilization report that provides information about the quantity and type of services provided within a specified time frame.

5. *No Service in X Days* is used to identify clients who have not received services in a specific number of days.

6. *Service Detail Report* provides client level service information. You may choose to add a filter if needed (e.g. a specific service or subservice, clients with a certain acuity level, etc.)

7. *Clinical Encounter Reports* are related to specific clinical conditions.

8. *Clinical Encounter Preprints* are used to preprint client clinical data in preparation for a clinical visit.

9. *Mailing Labels* prepares a set of mailing labels to be used for US postal mail.

10. *User Action Report* provides information on user activities in your domain.

11. *Multiple Client Case Notes Report* allows you to print case notes for a specific date range for clients served within that date range.

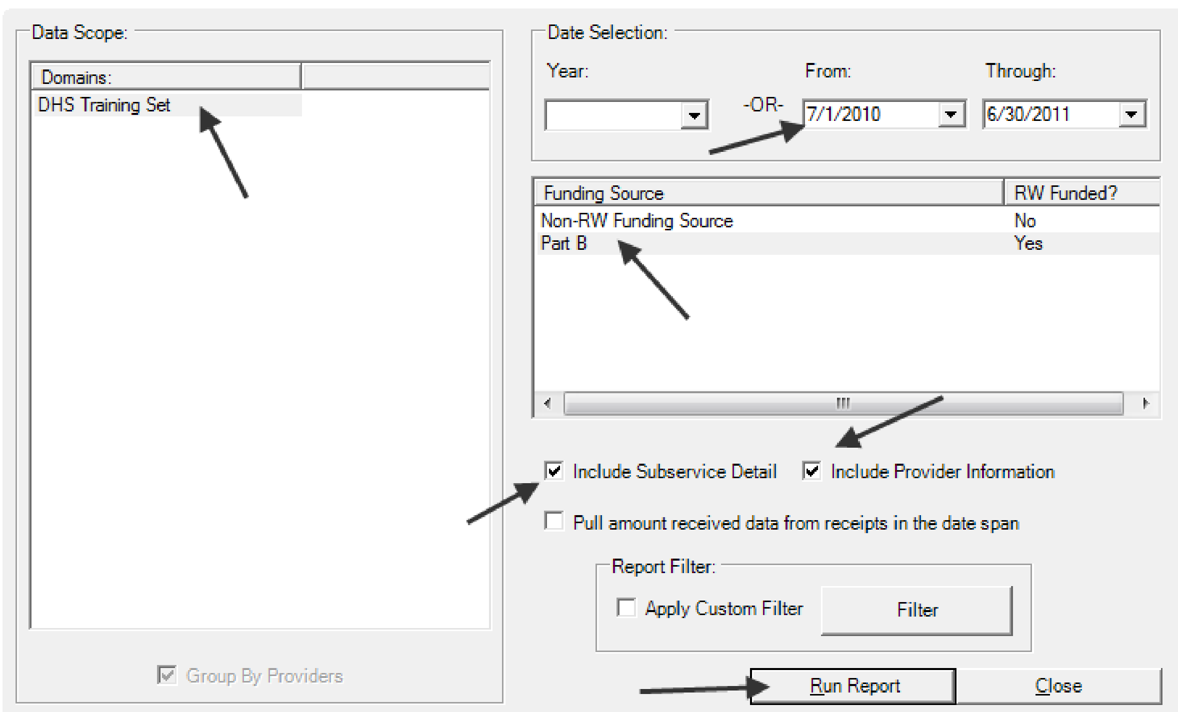
The “Maximize All Reports?” checkbox simply opens each report in full screen mode.

Financial Report

The CAREWare Financial Report is very useful as a simple service utilization report. The report will list the units and total costs of services/subservices provided by a specific agency, as well as the number of unduplicated client served for the specified time period. To access the Financial Report, from the Main Menu, select Reports, and then Financial Report.

To run the report:

- Highlight your agency's name
- Enter the date range in the *From* and *Through* boxes
- Highlight *RW Part B* under the *Funding Source* column
- Check the *Include Subservice Detail* box
- Check the *Include Provider Information* box
- Select *Run Report*



You may choose to use a filter to add to the Financial Report. See the section on Custom Reports or contact your LaCAN Partner for assistance in using filters.

Example of report output:

DHS Training Set

Phone:

Address:

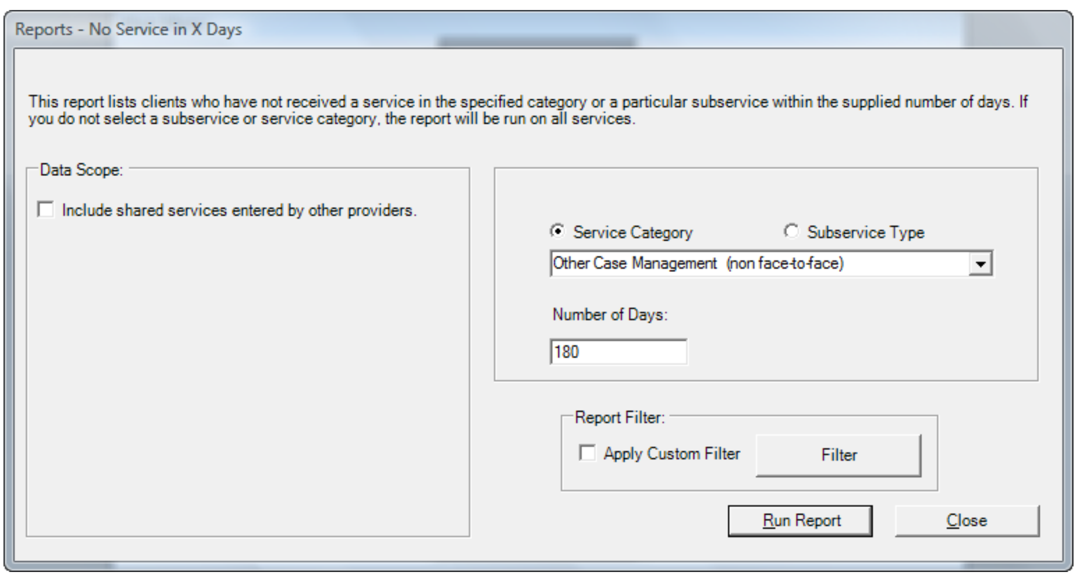
, Oregon

Medical Case Management	**Clients:**	**Units:**	**Total:**	**Amount Received:**	**Not Received:**
RAF - RN Intake & Assessment: Face-to-face	2	20	$0.00	$0.00	$0.00
RIF - RN Case Management: Face-to-face	2	6	$0.00	$0.00	$0.00
Medical Case Management Totals:	**4**	**26**	**$0.00**	**$0.00**	**$0.00**
Case Management (non-medical)	**Clients:**	**Units:**	**Total:**	**Amount Received:**	**Not Received:**
NAF - Non-RN Intake & Assessment: Face-to-face	1	1	$0.00	$0.00	$0.00
NIF: Non-RN Case Management: Face-to-face	3	8	$0.00	$0.00	$0.00
Case Management (non-medical) Totals:	**4**	**9**	**$0.00**	**$0.00**	**$0.00**
Provider Total	**7**	**35**	**$0.00**	**$0.00**	**$0.00**

No Service in X Days

This report allows you to create a list of clients who have not received a specified service in a certain number of days. As a general rule, clients who have not been seen in six months or more are often considered out of care or in danger of falling out of care. This report allows you to examine the records of individual clients and determine if action is necessary.

You can filter the search by service category or by an individual subservice name. Leaving this filter blank will run the report on all services.



You may choose to use an additional filter to add to the report. See the section on Custom Reports or contact your LaCAN Partner for assistance in using filters.

The names, URNs, date of last service and provider are returned. Example of report output:

Clients With no Service in 180 days.

Data Scope: **DHS Training Set**

Report Criteria:

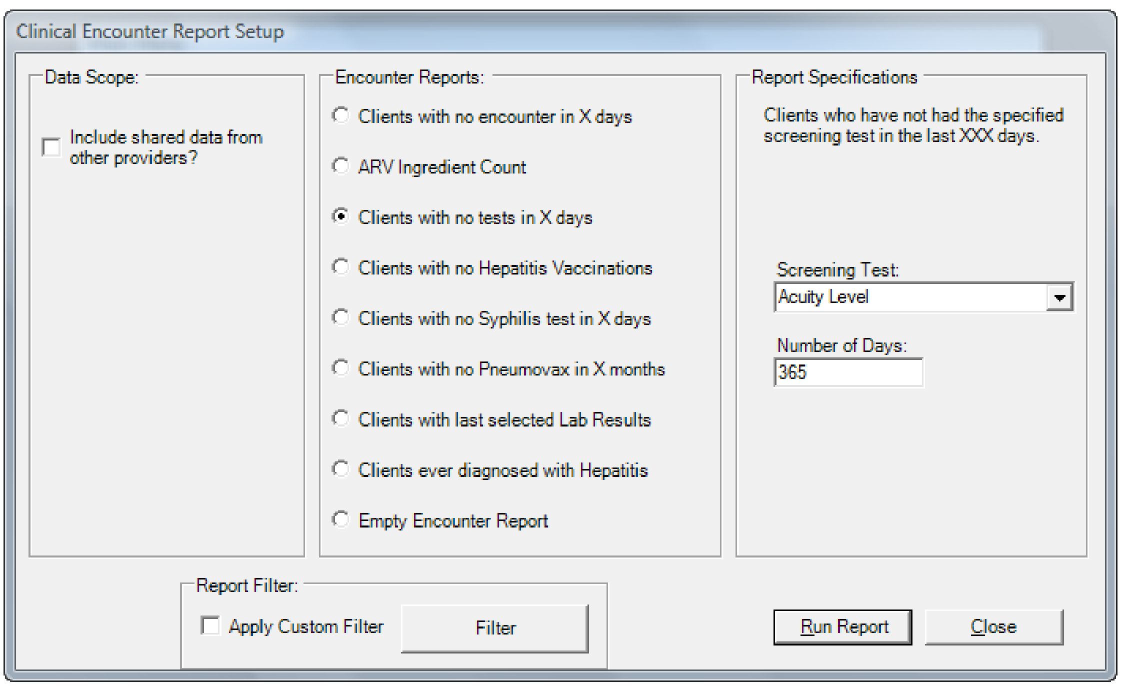
Provider:	**DHS Training Set**
Service Category:	**Case Management (non-medical)**
Last qualifying service:	**at least 180 days ago.**
Enrollment Status:	**active or unknown.**

Name:	URN:	Last Service Date:	Provider:
Adams, Boaz Bartholomew	BAAA0101411U		
Anderson, Michael Phillip	MCAD1002821U		
Another, Client To	CIAO1125501U		
BIGHHOUSE, MATT A	MTBG0301201U		
Blow, Joe J	JEBO0909991U		
Bob, Bob Bob	BBBB1212061U		
Bobo, Clown T	COBB1212523U		

For a more advanced understanding of these reports, please contact your LaCAN Partner or consult the *HRSA RW CAREWare 4.1 User Manual*.

Clients with no tests in X days

The *Clients with no tests in X days* report produces a list of clients who have not had a particular screening test in a specified number of days. This report can be very useful for determining which clients are in need of a reassessment or updated lab values.



Example of report output:

Data Scope: DHS Training Set

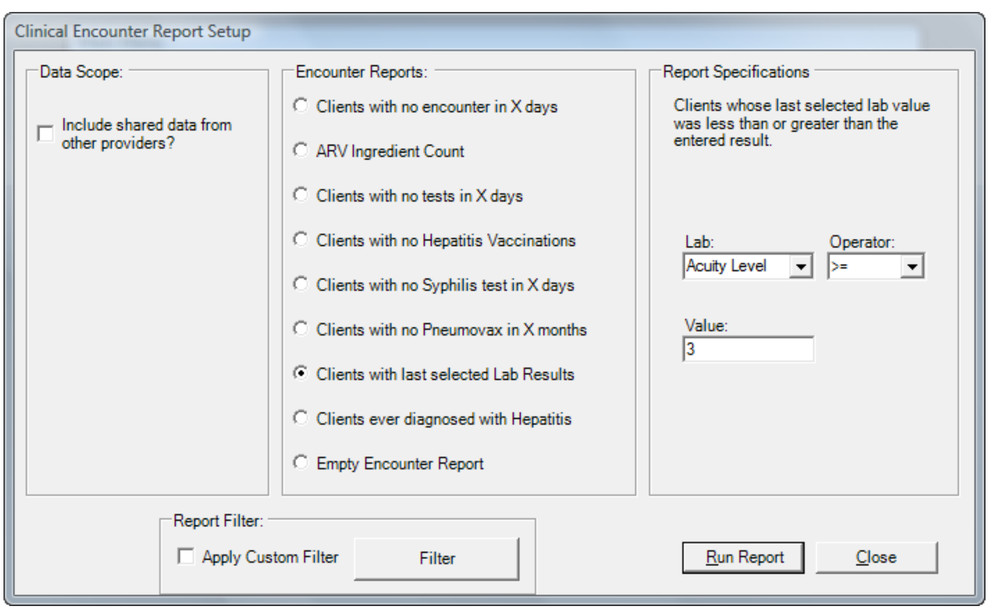
Report Criteria:

Provider:	**DHS Training Set**
The client:	**has not had a Acuity Level screening at the provider in the last 365 days.**
Or the client:	**has not had a Acuity Level screening at the provider.**
Client enrollment status:	**is active or unknown**
HIV Status:	**Not equal to Negative or Unknown**

Name:	URN:	Last Lab Result:	Last Screening Date:	Provider Name:
Adams, Boaz Bartholomew	BAAA0101411U			
BIGHHOUSE, MATT A	MTBG0301201U	2	1/10/2005	DHS Training Set
Blow, Joe J	JEBO0909991U			
Bob, Bob Bob	BBBB1212061U	12	10/2/2006	DHS Training Set
Bobo, Clown T	COBB1212523U	1	2/8/2006	DHS Training Set

Clients with last selected lab results

This report identifies clients with certain lab values. The report set-up below will provide a list of clients with Acuity Levels of 3 or 4. This report can also be used to identify clients with particular CD 4 Counts, Viral Loads, Adherence Life areas, etc.



You may choose to use an additional filter to add to the report.

Example of report output:

Clients with Acuity Level >= 3 at last test.

Data Scope: **DHS Training Set**

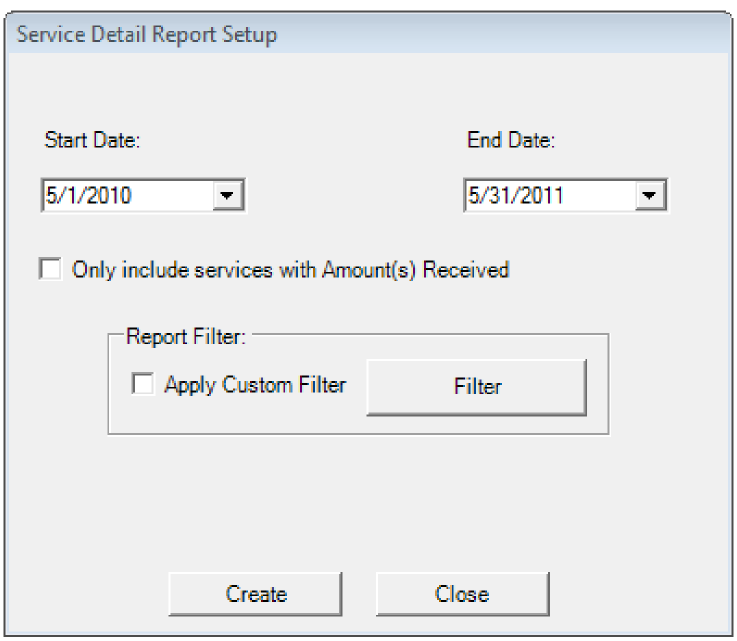
Report Criteria:

The client's:	**last Acuity Level result was >= 3.**
Client enrollment status:	**is active or unknown**
HIV Status:	**Not equal to Negative or Unknown**

Name:	URN:	Last Lab Result:	Last Lab Date:	Provider Name:
Bob, Bob Bob	BBBB1212061U	12	10/2/2006	DHS Training Set
Cadabra, Abra "Abby"	ARCD1005722U	3	7/12/2006	DHS Training Set
Clampett, Jedediah (Jed)	JDCA0304741U	4	4/21/2008	DHS Training Set
clark, mark j	MRCA1212901U	3	2/8/2006	DHS Training Set
Colombo, Cyna	CNCL1231672U	3	5/3/2010	DHS Training Set

Service Detail Report

This report will provide client level information for services provided within the specified time frame.



You may choose to use an additional filter to add to the report. See the section on Custom Reports or contact the LaCAN Help Desk for assistance in using filters.

Example of report output:

Headlights, Dearest N
URN: **DAHA0104802U**

Date:	Service Name:	Contract:	Units:	Total:	Received:	Provider:
5/30/2011	NIF: Non-RN Case Management Face-to-face	DHS FY 2008-2010	1	$0.00	$0.00	DHS Training Set
5/12/2010	RIN - RN Case Management Non-face-to-face	DHS FY 2008-2010	4	$0.00	$0.00	DHS Training Set
9/12/2010	Med Visit other ss	Testing Med Prov Contract	1	$0.00	$0.00	DHS Training Set

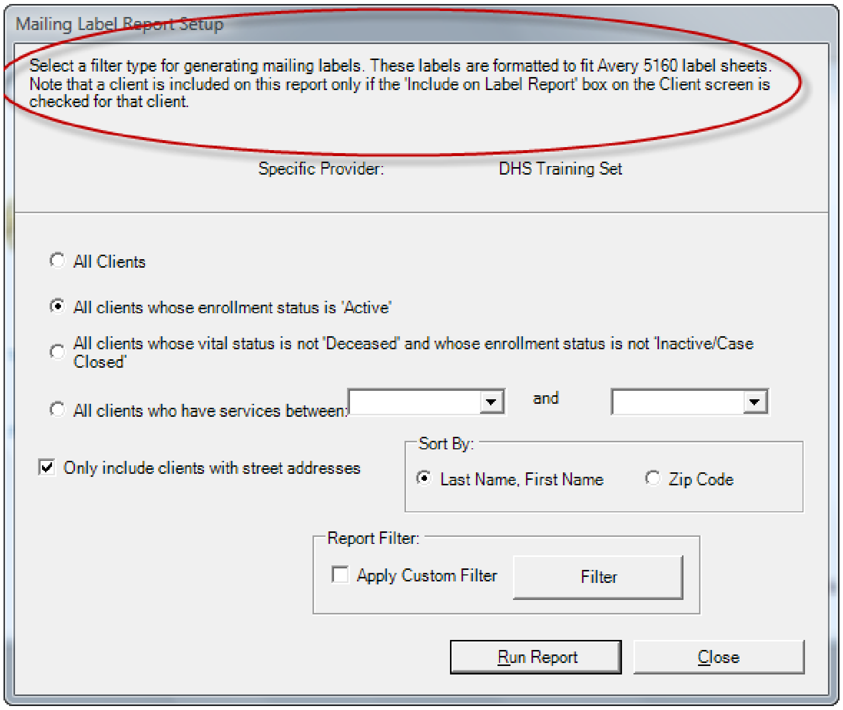
Mailing Labels

You can generate mailing labels for clients with this report, which pre-formats client names and addresses to the Avery 5160 layout.

Only clients who have the "Include on Label Report" box checked on their Demographics screen will be included; to screen out clients who do not wish to receive mail, uncheck this box in their record.

To generate mailing labels:

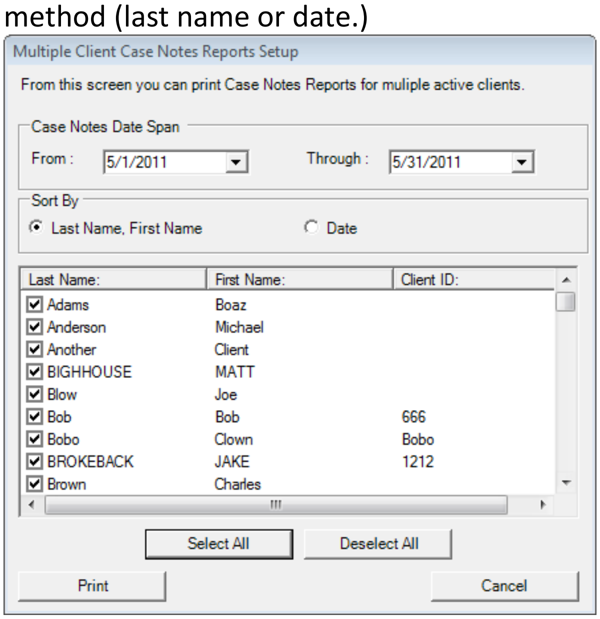
1. From the Main Menu, select Reports, then select *Mailing Labels*
2. Determine which clients to include on the labels by selecting from the four options
    - All Clients in the agency's database
    - All clients whose enrollment status is "Active"
    - All clients whose vital status is not "Deceased" and whose enrollment status is not "Inactive/Case Closed"
    - All clients who have received services for a selected date range
3. Check the box *Only include clients with street addresses*. This will omit clients who do not have a mailing address entered in CW.
4. Select whether to sort alphabetically by last name or numerically by zip code.
5. Select *Run Report*



Multiple Client Case Notes

This report prints case notes for a group of clients for a specified time frame.

Enter the date span, select the clients you wish to print reports for and choose your sorting method (last name or date.)



Example of report output:

Multiple Client Case Notes Report

Date From:	Date Through:
05/01/2011	05/31/2011

Name:	URN:	Provider Name:
Public, John	JHPB1021721U	DHS Training Set

Case Note Author:	Case Note Date:
Helpful, Case Manager, Proud to be	5/30/2011

Case Note:

Client telephoned today to let me know that he has lost his health insurance that was provided through his employer as he could no longer afford the COBRA payments. We discussed CAREAssist. Client

Custom Reports

RW CAREWare 5.0 has a very extensive custom reporting module. LaCAN can provide custom reports upon request. Please complete the *Custom Report Request Form* (example on the following page) found on the LaCAN website. Before requesting a custom report in CAREWare, it is important to understand what information you wish to generate. The following general guidelines may be helpful when requesting custom reports.

Questions to ask for designing a custom report:

- How am I going to use this information?
- What information do I want (e.g. poverty level and HIV Risk Factor by client name)?
- How do I want the information displayed (e.g. by client name, by service category)?
- For which clients do I want the information (e.g. clients served in the past year, Hispanic clients only)?
- Are there specific groups of clients that I want to exclude from the results (e.g. clients under 18 years of age)?
- Where do I want CW to look for the information that I want returned in the results (e.g. CW should look to Enrollment Status to determine "Active" clients)?

Louisiana CAREWare Access Network
RW CAREWare Custom Report Request Form

This form should be used to request a custom report from CAREWare. Please review the section on custom reports in the *LaCAN RW CAREWare User Guide* prior to completing this form.

Custom Reports will be created centrally within the system and you will be notified when they are ready for you to run locally within CAREWare. Please email this completed form to your designated LaCAN Partner

Date:

Agency (aka: CAREWare domain):

Name of person requesting report:

If we need additional information or clarification, who should we contact (name, e-mail, and phone)?

1. Has anyone in your agency tried to set-up or run this report? If so, what is the name of the report in CAREWare?

2. Please describe the report you need in your own words:

3. Who is going to use this report and how will the information be used?

4. Is this report a "one-time" report or will it be used on a regular basis?

5. What information do you want displayed in the report results (e.g. poverty level, HIV Risk Factor and client name)?

6. How do you want the information displayed (e.g. by client name alphabetically; by poverty level – lowest to highest)?

7. For which clients do you want the information (e.g. clients served in the past year, Hispanic clients only, all clients with an "active" enrollment status)?

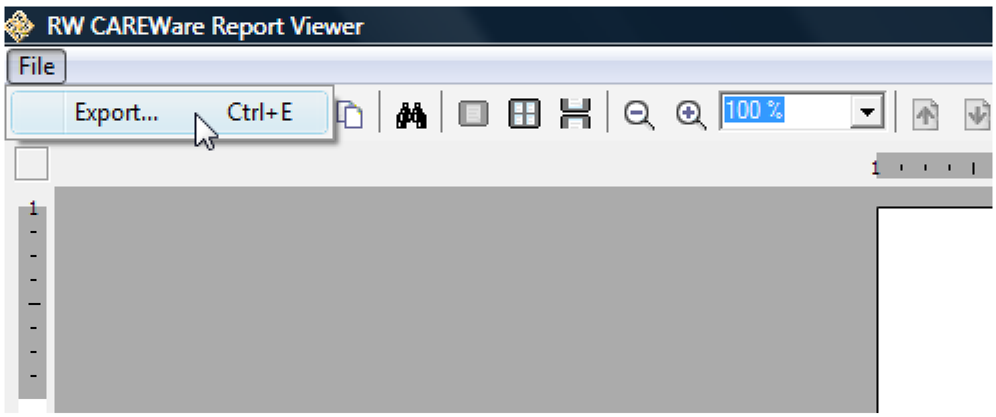
8. Are there specific groups of clients that you want to exclude from the results (e.g. clients under 18 years of age)?

Exporting Reports

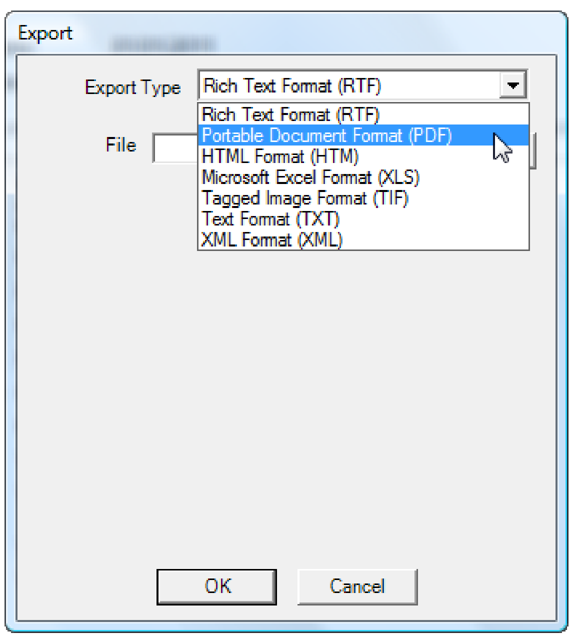
Most RW CAREWare reports can be exported into a variety of formats, including Portable Document Format or PDF (to be viewed using Adobe Reader) and Microsoft Excel.

To export a report:

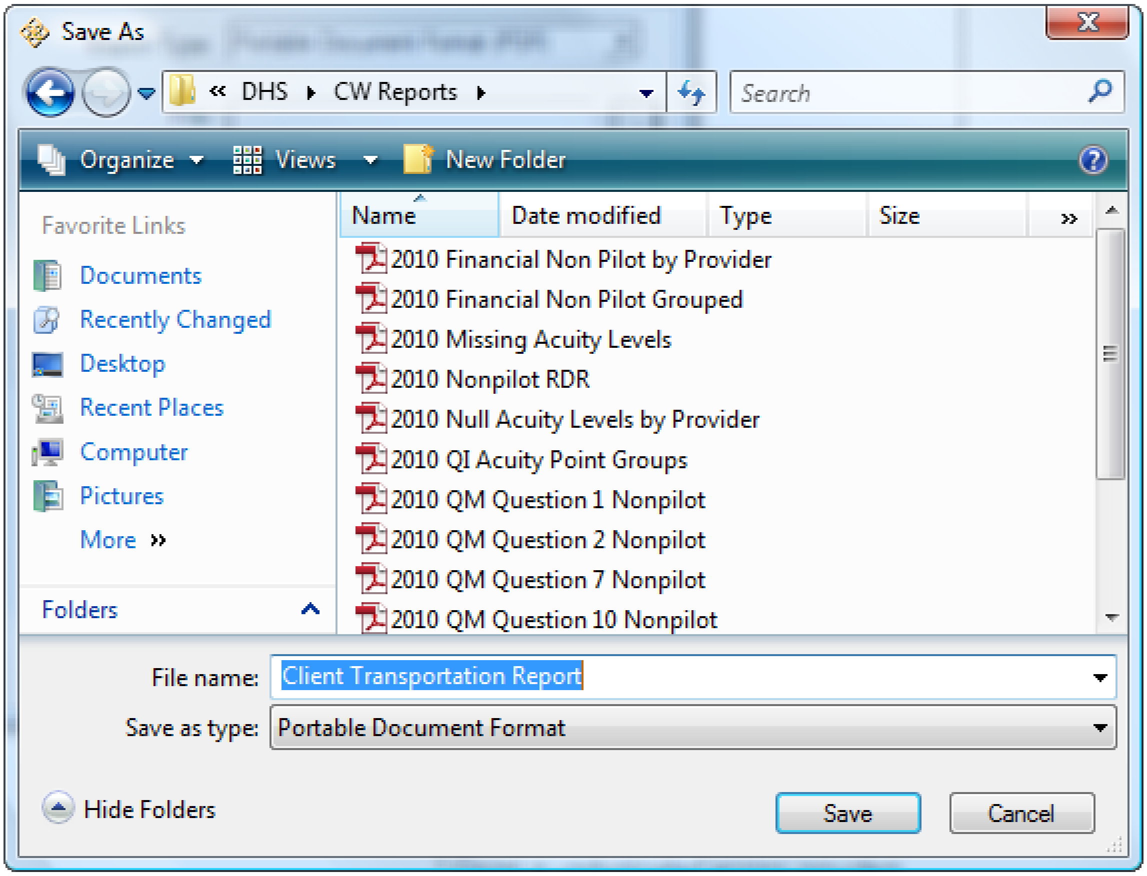
- Run the report
- Select *Export* from the File Menu



- Select the Export Type (e.g. Portable Document Format)
- Click on the box with the 3 dot ellipsis next the field called *File*



- Browse to the location where you wish to save the file
- Enter a Name for the exported file in the field *File name*
- Select *Save*



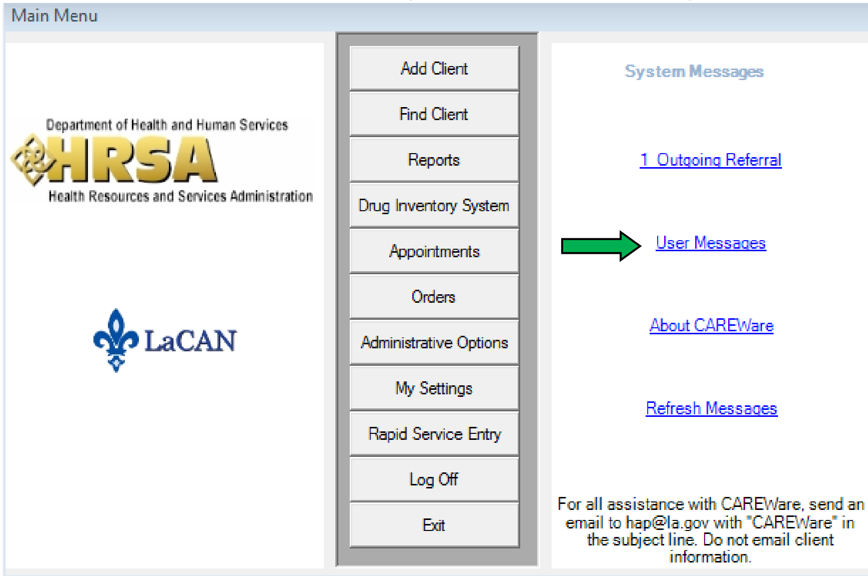
How To: User Messaging

What is User Messaging?

CAREWare users are now to able to transmit client related messages to other CAREWare users on the same or different provider domains within the same CAREWare network instance. This will allow users to instantly communicate new or time sensitive information regarding a specific client to other users and ensure reception of the message.

As with all data in CAREWare these messages will be securely stored in the CAREWare database and changes can be tracked using the change logs. Users will also be able to review all received and sent messages at their discretion. Messaging is only enabled on a single provider domain at a time by default. The CAREWare administrator can enable cross provider messaging in order for specific users to communicate across provider domains within the same CAREWare instance regarding specific clients.

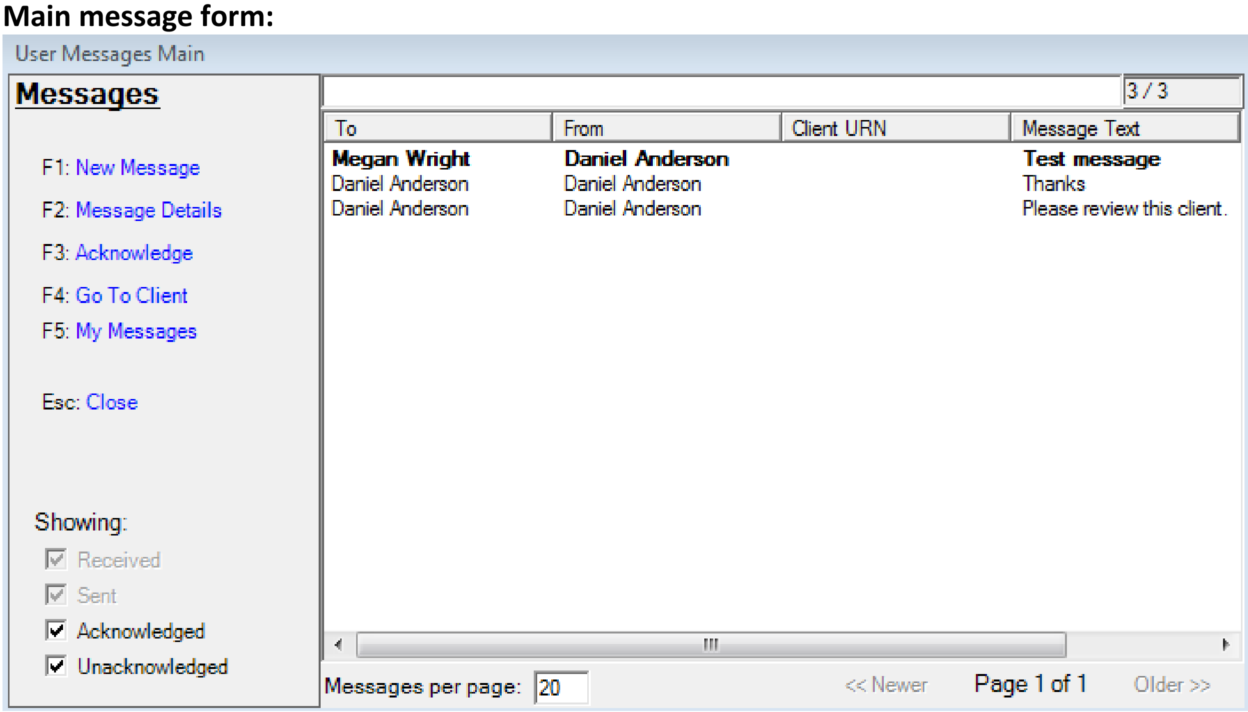
New link on the main menu to get to the user message form:



The number in parentheses shows the number of unacknowledged messages the user has.

Note: if you do not see the 'User Messages' link on your main menu then contact us at HAP@la.gov to have it activated.

Main message form:



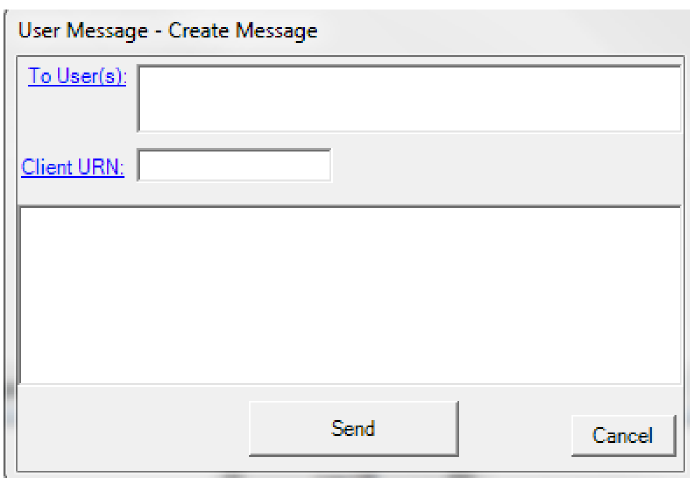
New messages will appear in **bold** until they are acknowledged. Sent messages (denoted by 'To') will be bold until acknowledged by the recipient.

F1 – Opens new ‘create message’ window.
F2 – Allows you to view the details of a message after you select it.
F3 – Allows Acknowledging multiple messages at once (multi-select listview).
F4 – Allows you to go directly to a client record that is attached to a message.
F5 – Returns to main message view.

ESC – Closes the messaging system.
Showing – Allows you to view the messages separated into the following categories; received, sent, acknowledged, or unacknowledged. (Check or deselect boxes as needed)

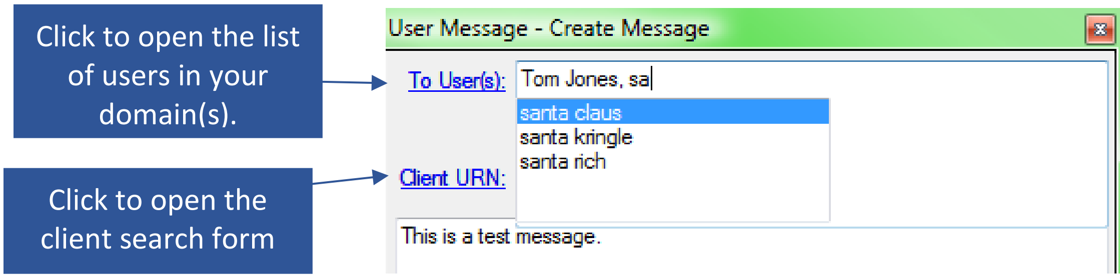
- Listview is NOT user sortable; it is always ordered by Date descending.
- Users can use the Search box to find items on the list. This search box uses the button since only some of the total records are shown in the listview. The Search will apply to any column.
- Only a small number of records will be displayed at one time. Use the Newer and Older links to retrieve more records.
- Messages can also be sent directly from a clients’ record via the User Messages button located by ‘Case Notes’.

Create New Message:

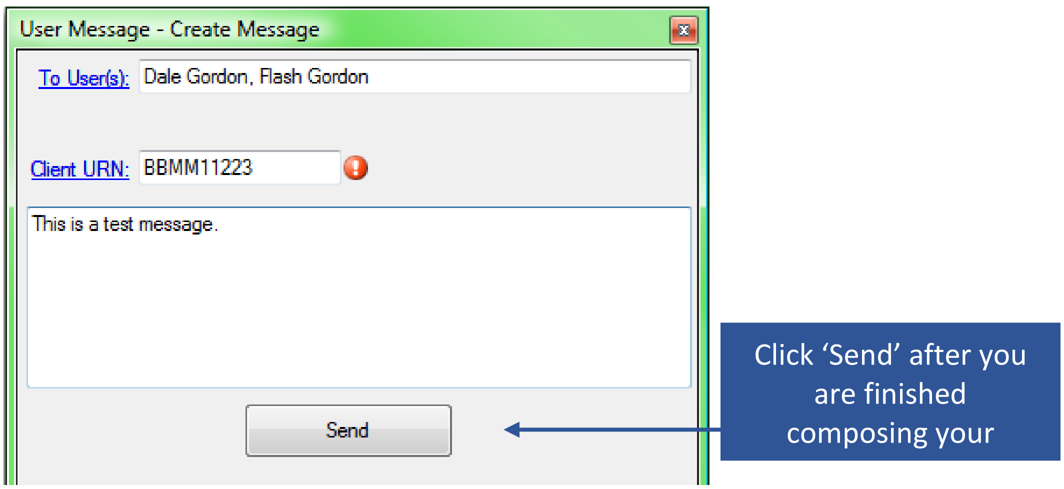


This can be opened from the main Messaging form or from within a client record. If opened from a client record, the URN for that client will be automatically entered.

There are 2 ways to select the Recipients for the message:
- Typing in a user’s name will open a filtered select list from which the user can choose. The textbox will allow a comma-delimited list of names to be entered and will make suggestions on the name currently being typed:

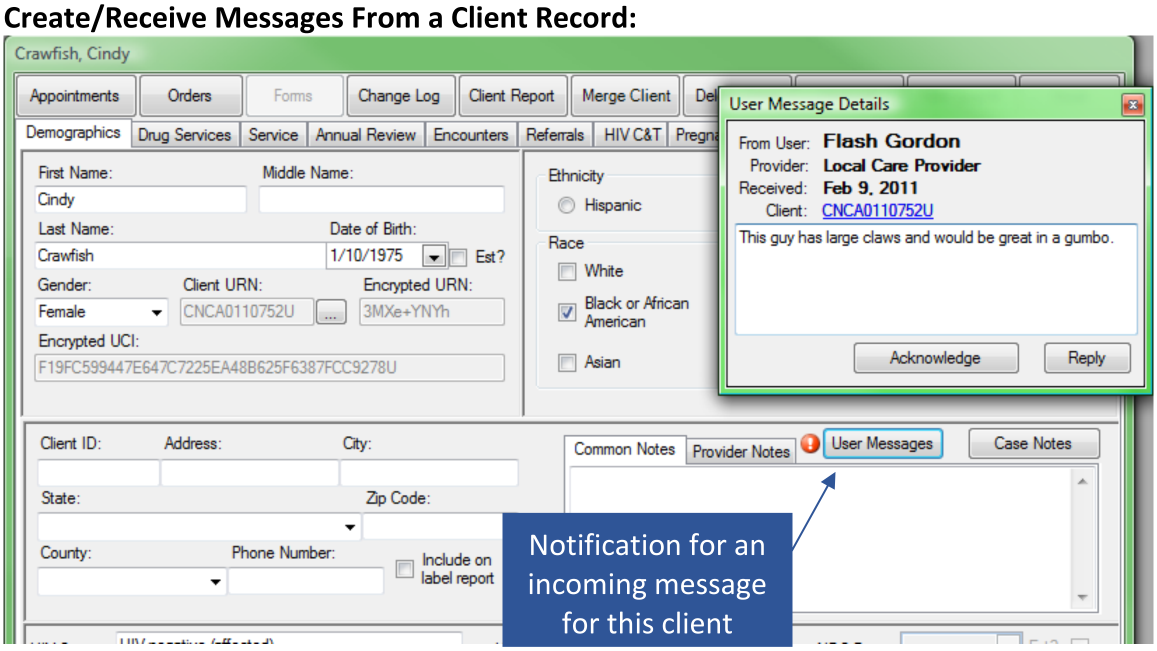


Messages can be tagged to a specific client. User can either type in the URN, or click the ClientURN link to go to the client search form.



Error provider warns if the URN is not a valid URN. The URN can be blank, but cannot be saved unless the URN is valid.

Create/Receive Messages From a Client Record:



- Click the 'User Messages' button to send and receive messages within a client's record.

Citrix

Citrix is now available for approved CAREWare users to securely share data with other users. If you need access to Citrix please contact your LaCAN Partner.

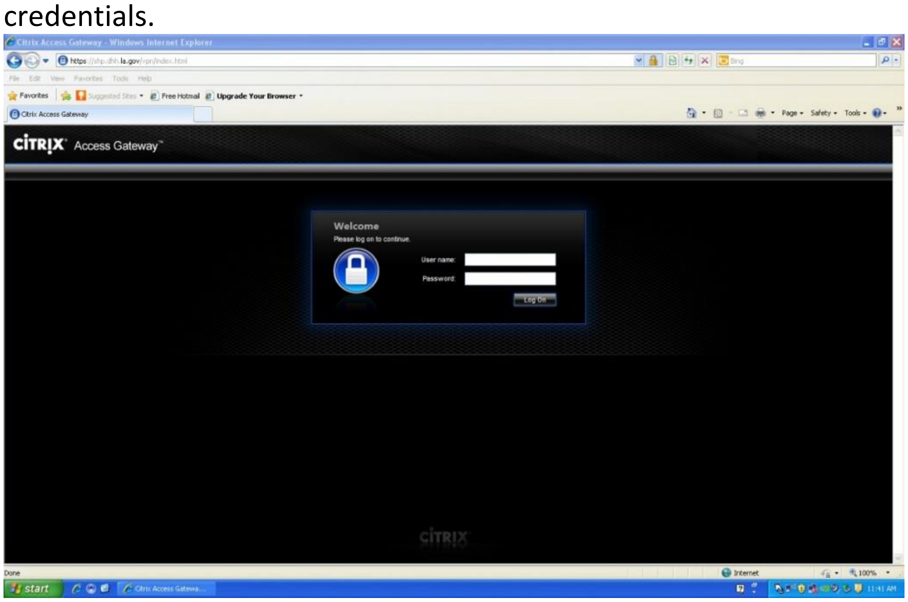
Some Things to Know About Citrix:

A. Citrix access are restricted to 7:00AM to 7:00PM Monday-Friday. Extensions or changes to this access schedule must be requested in advance by sending an email to the SHP Help Desk (hap@la.gov) and will be granted by the SHP HIV Services Data Management Supervisor on a user-by-user basis.
   a. Have current, SHP-approved anti-virus software and Windows updates as described in the *Approved Anti-Virus Software* section of this policy.
B. Citrix must not be accessed from any mobile device or unapproved laptop. The procedure for requesting laptop approval is outlined in the Hardware Requirements policy below.
C. Citrix passwords must not be saved by any user's internet browser.
D. Users will be automatically logged out of Citrix after 20 minutes of inactivity.

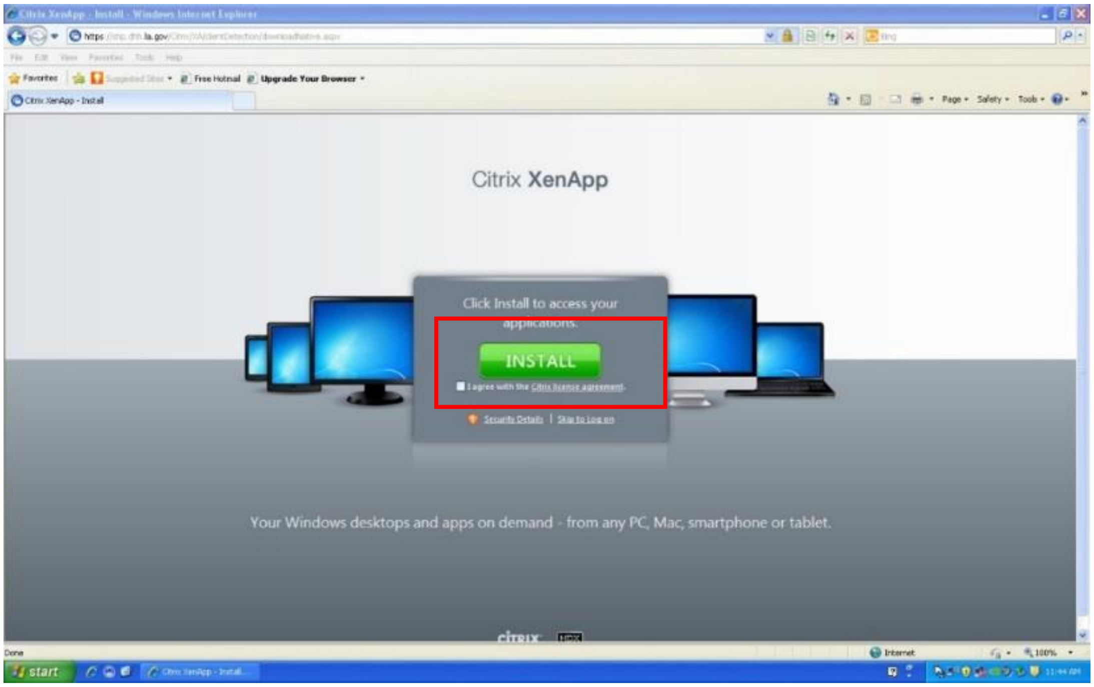
Accessing Citrix

1. Open Internet Explorer and go to: https://shp.dhh.la.gov

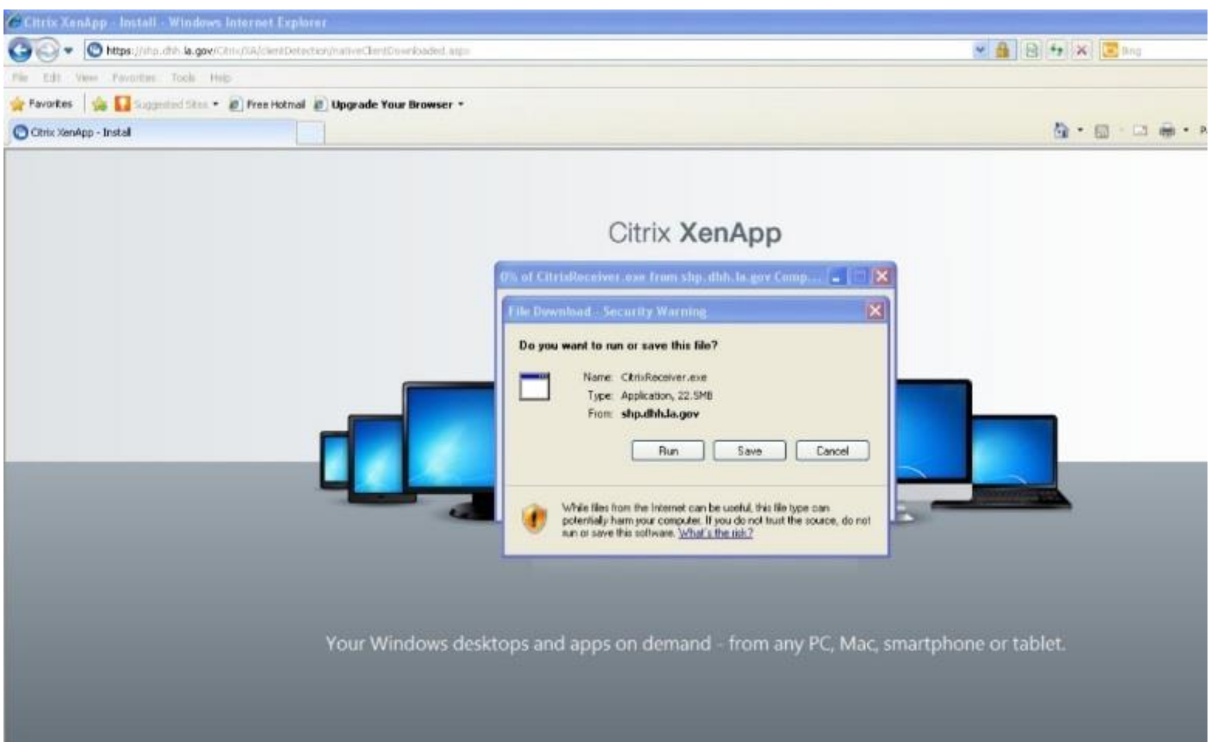
2. The Citrix Access Gateway login screen appears. Enter your Citrix user name and password. If you previously used the SHP VPN to access CAREWare, these are your same credentials.



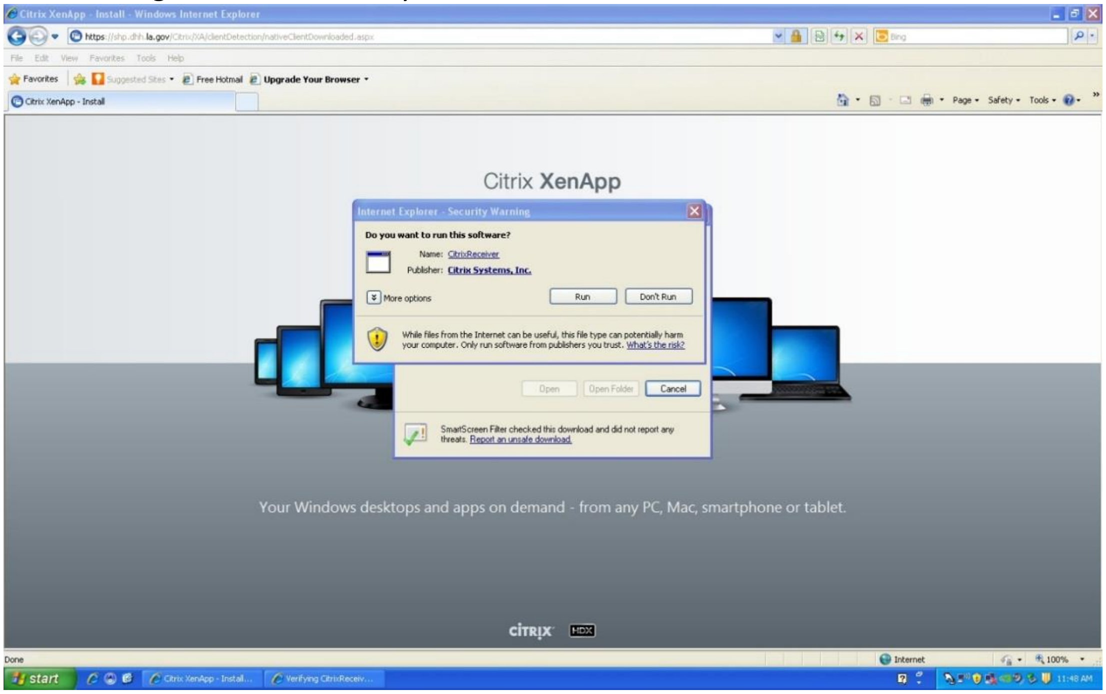
3. If you haven't access Citrix previously, you will need to install the Citrix Receiver application. Check the box to agree to the user terms and then click Install.



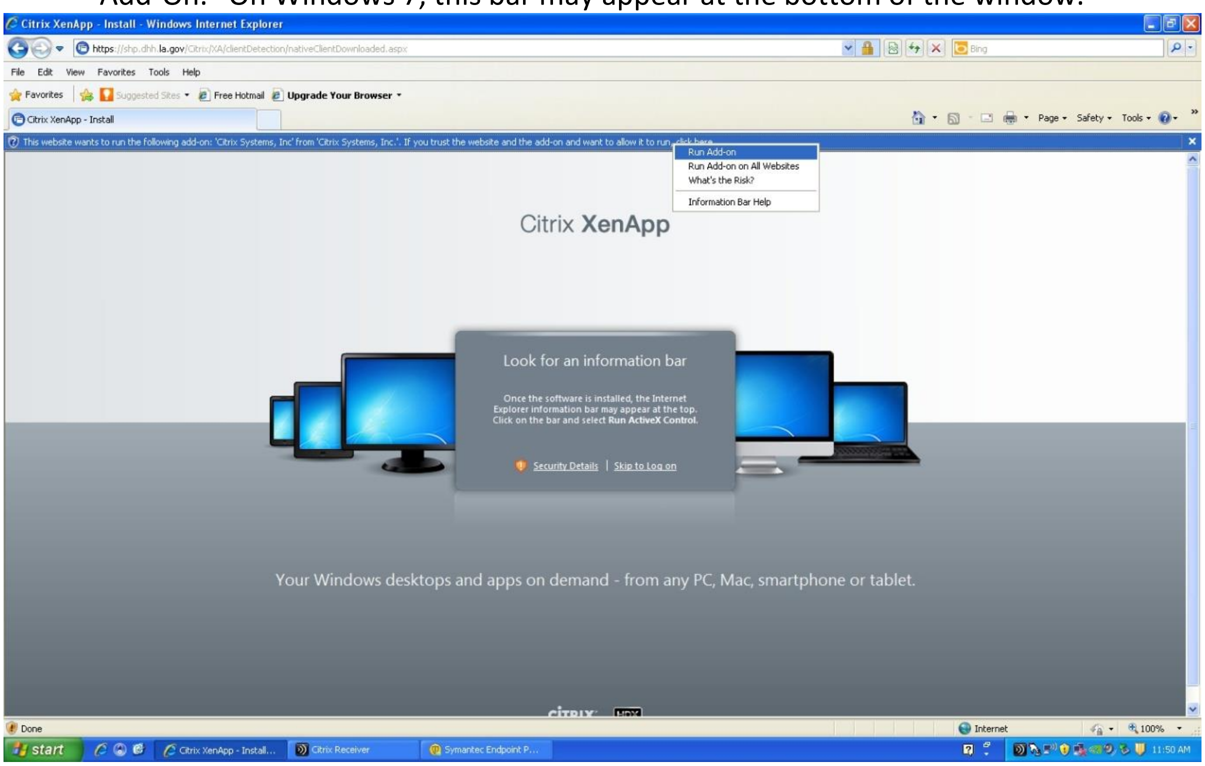
4. When the application setup box appears, click RUN.



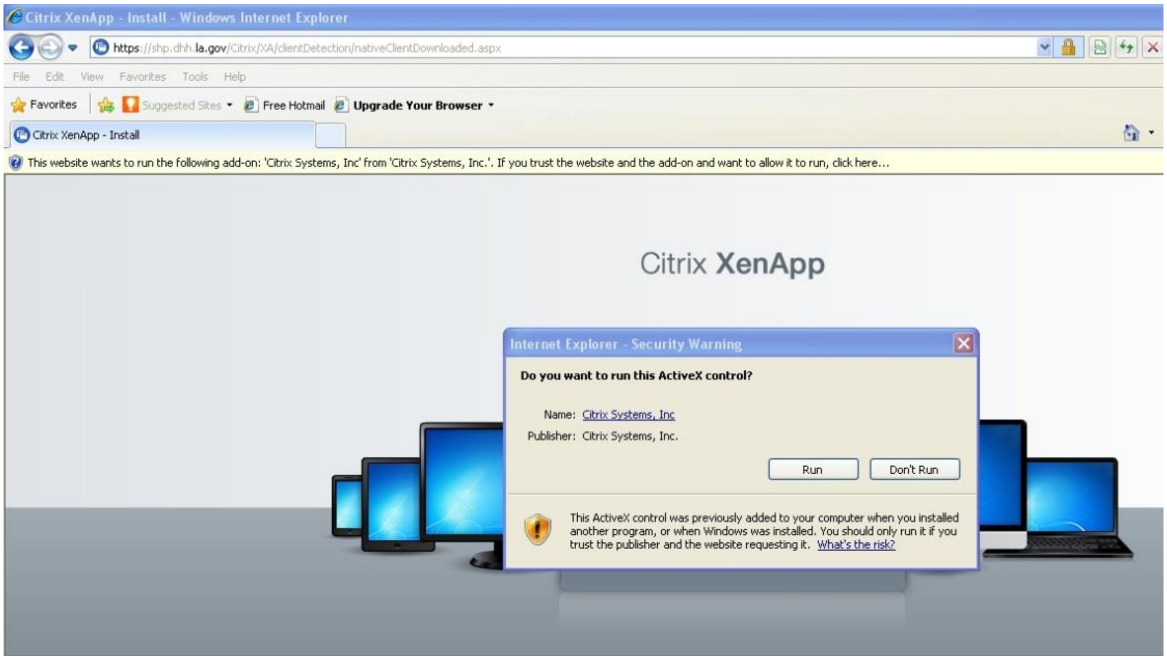
5. Click RUN again when asked if you want to run the software.



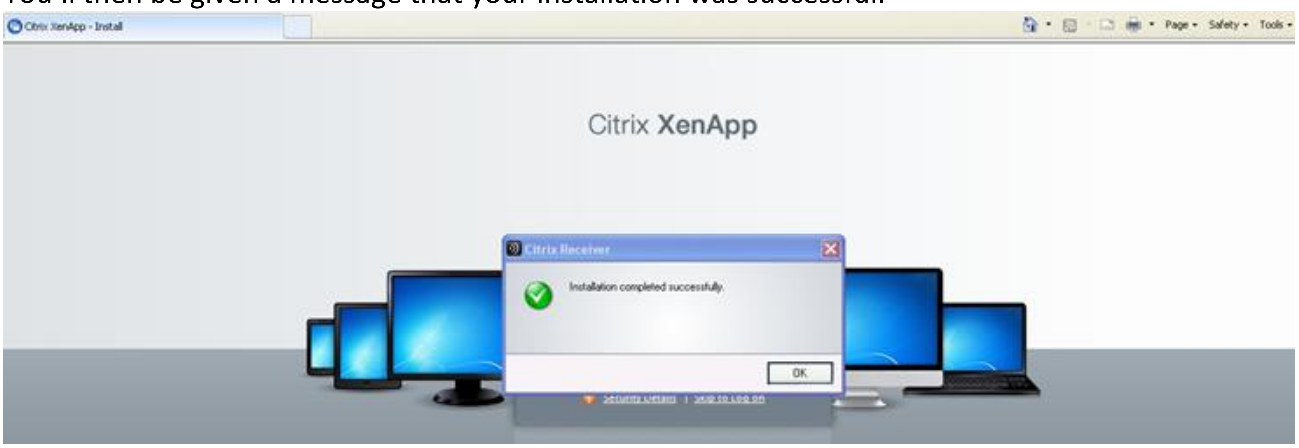
6. On Windows XP, look to the top of the window for an information bar. Choose "Run Add-On." On Windows 7, this bar may appear at the bottom of the window.



7. Click RUN on the ActiveX control box.

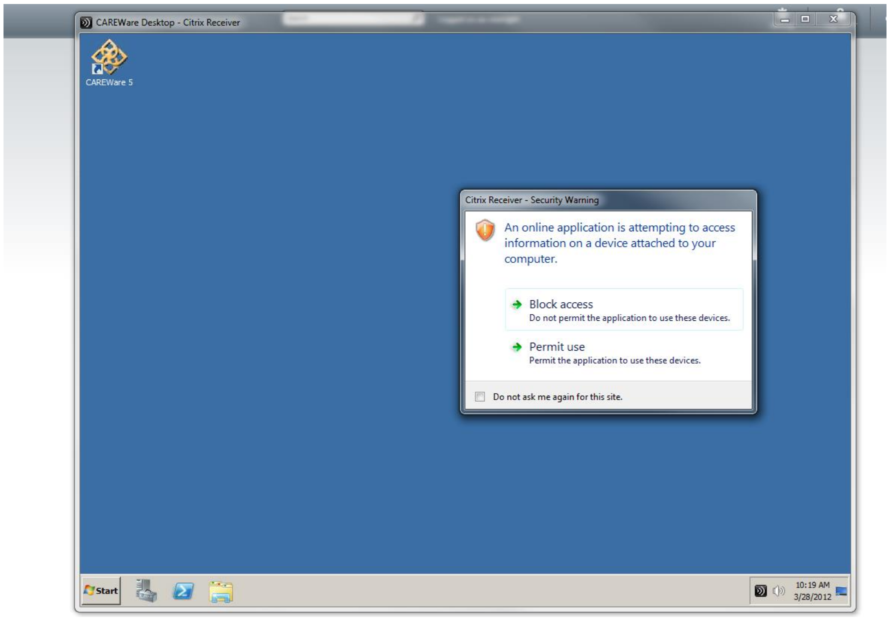


8. You'll then be given a message that your installation was successful.



9. Once installation is successful, every time you log in you will be brought to a screen that has an icon for the CAREWare Desktop. Click this icon **ONCE** to launch the desktop.

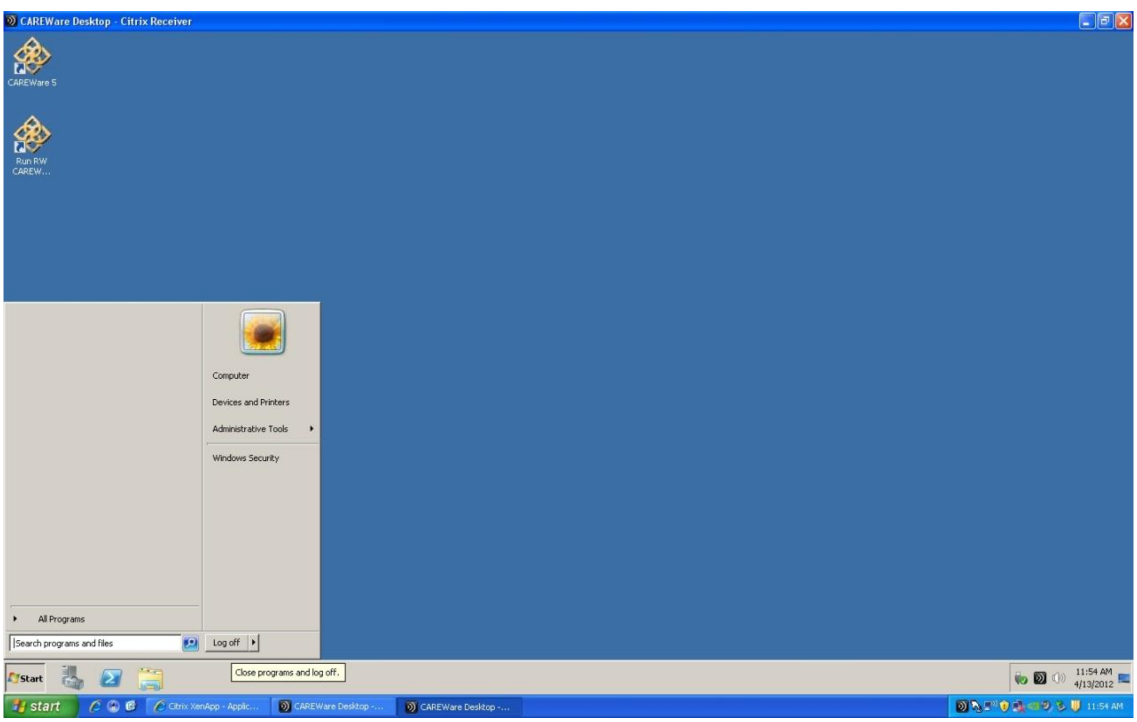
10. You will have a new window pop up. If you get a security warning (shown below), click **Permit Use.**



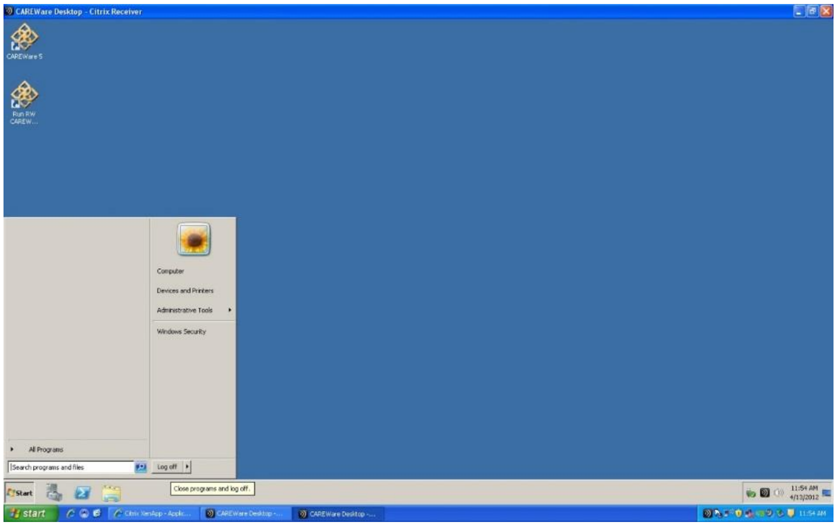
To LOG-OFF Citrix:

1. Go to the Start button on your Citrix Receiver CAREWare Desktop

2. Select Log Off

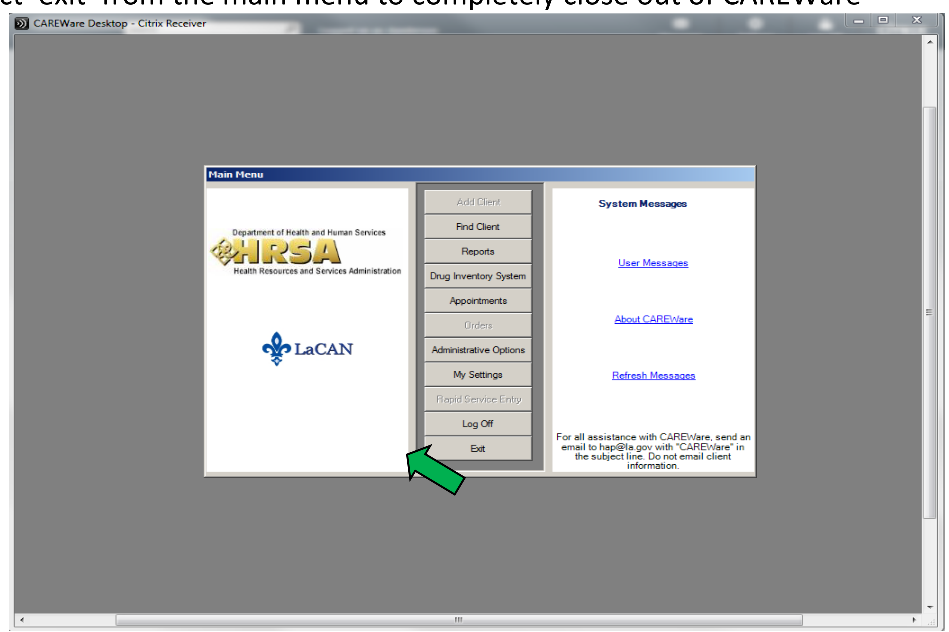


3. The Citrix desktop will close and you are left with the Citrix website
4. Select Log Off in the upper right of the Citrix website



Citrix Log-Off Instructions (Detailed)

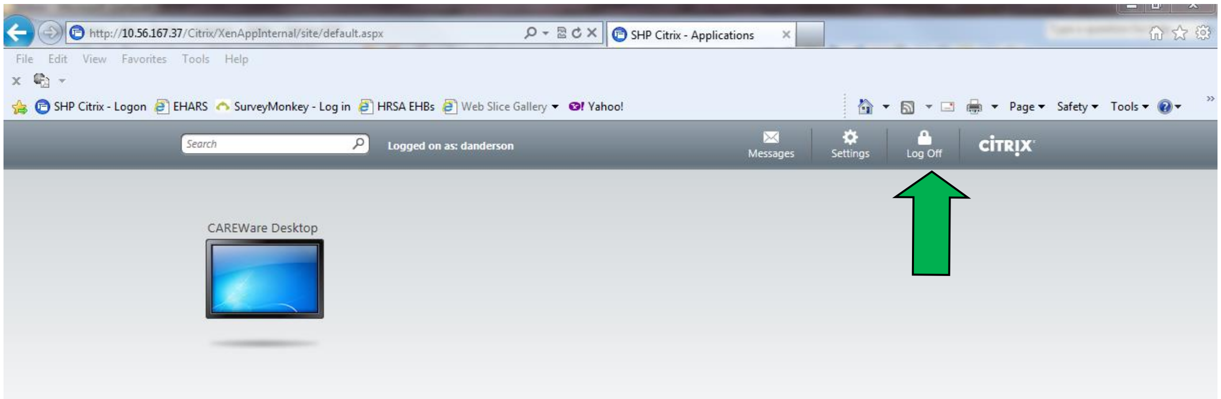
1. Select 'exit' from the main menu to completely close out of CAREWare



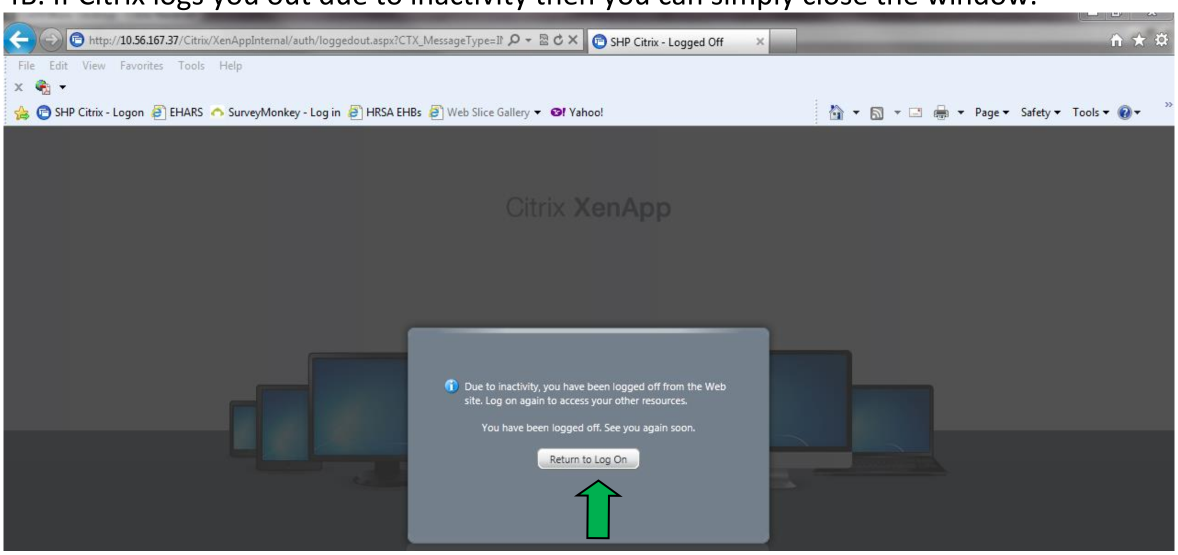
2. Go to the Start button on your <u>Citrix Receiver CAREWare Desktop</u>

3. Select 'Log Off'
   -After you 'Log Off' from the CW desktop this screen will completely disappear
*Please make sure this screen disappears

4A. Log out of Citrix by clicking the 'Log Off' button
- The next screen will display and then you can simply close the window



4B. If Citrix logs you out due to inactivity then you can simply close the window.



Appendices

Appendix A:

Field Requirements in LaCAN CAREWare - UPDATED 2/2/16

The following table summarizes the fields that are in LaCAN CAREWare. It also tells you whether the field is cross-provider (viewable/editable by all providers serving this client); whether the fields are required for the Medical or Non-Medical Ryan White Services Report (RSR), for LaCAN data collection (LA), and/or as a CAREWare function (CW); the frequency with which the data must be entered or submitted; and any corresponding notes.

Demographics Tab

Field Name	Cross Provider	RSR Requirement		Required For		Frequency			Notes
		Clinical RSR	Non-Clinical RSR	Only Part B Agencies	All LaCAN Agencies	Enter w/in 5 days of change or enrollment	Enter w/in 30 days	Update every 6 months	
Last Name	✓	✓	✓		✓	✓			Use legal last name only. No nicknames, initials, or symbols. Refer to LaCAN Policies & Procedures for examples of how to enter names. Very important to have correct because it affects the URN.
First Name	✓	✓	✓		✓	✓			Use legal first name only. No nicknames, initials, or symbols. Do not use parent's name if entering a child. Refer to LaCAN Policies & Procedures for examples of how to enter names. Very important to have correct because it affects the URN.
Middle Name	✓				✓	✓			Legal middle name only. Leave blank if client does not have middle name
Birth Sex	✓	✓	✓		✓	✓			Male or Female. The sex the client was assigned at birth. Does not affect URN, but this is required for RSR
Gender	✓	✓	✓		✓	✓			Male, Female, Trans FTM, Trans MTF, Trans Unknown. If a client does not identify as trans, use male or female as appropriate. Very important to have correct because it affects URN.
Birth Date	✓	✓	✓		✓	✓			Legal date of birth only. Do not estimate.
Client ID									The confidential ID number used to identify clients within the agency. For New Orleans Part A Agencies this is the URN.
Address	✓				✓	✓		✓	Client's Physical address. If client is homeless, put "homeless" and the date. E.G. "homeless 11-1-11"
City	✓				✓	✓		✓	City where the client resides.
State	✓				✓	✓		✓	State required in CAREWare to generate list of counties that apply to the state.
County	✓				✓	✓		✓	Parish where client resides

Zip Code	✓	✓	✓		✓	✓		✓	Required for RSR and address. Only the first three digits of the zip codes are submitted with the RSR
Ethnicity	✓	✓	✓		✓	✓			Client's self-reported ethnicity (Hispanic or non-Hispanic). See manual for further description
Race	✓	✓	✓		✓	✓			Client's self-reported race. See manual for further description.
Ethnicity & Race Subgroups	✓	✓	✓		✓	✓			Client's self-reported race &/or ethnicity subgroups. See RSR manual for further description.
Vital Status	✓	✓	✓		✓	✓		✓	Client's current vital status (seen by all providers)
Deceased Date	✓	✓	✓		✓	✓		✓	Must enter date of death if 'Deceased' is selected for Vital Status.
Enrollment Status		✓	✓		✓	✓	✓	✓	Specific for each agency. Enter the client's current enrollment status at your agency. See manual for definitions.
Enrollment Date					✓		✓		Will need to enter an enrollment date the first time you enter a service for a client. This field will not need to be updated after that, unless you realize that there was an error. Should be the *first* time a client received services at your agency.
Case Closed Date					✓		✓		If client's case is closed, enter date of closure.
HIV Status	✓	✓	✓		✓	✓		✓	Use designations as described in the manual.
HIV+ Date	✓				✓	✓		✓	Required in CAREWare if you select any of the following for HIV Status: HIV Positive (not AIDS), HIV Positive (AIDS status unknown), or CDC-defined AIDS.
AIDS Date	✓	✓	✓		✓	✓		✓	Required in CAREWare if you select 'CDC-defined AIDS' for HIV Status. Only year of AIDS diagnosis is sent to HRSA.
HIV Risk Factors	✓	✓	✓		✓	✓			Required by the RSR for ALL clients, even those whose HIV Status is 'Negative (affected)' or 'Unknown'.
Common Notes	✓	✓			✓	✓			Use this field to note when you make changes to common fields in the client record. Note date, agency,

									your name, and what was changed. Example: “11-05-11 @SLAC MT changed client address”

Eligibility History (Demographics Tab)

Field Name	Cross Provider	RSR Requirement		Required For		Frequency			Notes
		Clinical RSR	Non-Clinical RSR	Only Part B Agencies	All LaCAN Agencies	Enter w/in 5 days of change or enrollment	Enter w/in 30 days	Update every 6 months	
Eligibility Status	✓	✓	✓		✓	✓		✓	Whether or not a client is eligible to receive Ryan White Services.
Eligibility Date	✓	✓	✓		✓	✓		✓	Date client’s eligibility for services was reviewed. Required by HRSA to be verified every 6 months
Funding Source	✓	✓	✓		✓	✓		✓	Funding source client is elibible to revcieve services for. Create a new record for every funding source at your agency.
Is Eligible?	✓	✓	✓		✓	✓		✓	Select if a client is or is not eligible to receive services for each funding source at your agency. If a client was eligible but is no longer a new record must be created indicating that.
Comment									Use this field to note when a client is no longer eligible and why they are no longer eligible.

Client Information Tab

Field Name	Cross-Provider	RSR Requirement		Required for		Frequency			Notes
		Clinical RSR	Non-clinical RSR	Only Part B Agencies	All LaCAN Agencies	Enter w/in 5 days of change or enrollment	Enter w/in 30 days	Update every 6 months	
Consent to Mail	✓				✓	✓		✓	Select client’s mailing preference. If client wishes to use a different mailing address, enter that address in the “Consented Mailing Address” text field.
Non-Logo Mailing Only	✓				✓	✓		✓	Check if only mail without the agency’s logo should be sent to client.

Consented Mailing Address	✓				✓	✓		✓	If client wishes to receive mail at a different address than the one listed on their Demographic Tab (the physical address), enter the address here.
Case Management Program	✓				✓	✓			The client' current primary case management program. To be updated if the client changes programs. Example: Part B Medical Case Management.
Other Case Management Program	✓				✓	✓			Type other case management program here if selecting "Other" in Case Management Program field.
Case Manager Assigned: Part A	✓					✓			Name of current Part A case manager. Leave blank if client does not have Part A case manager.
Case Manager Assigned: Part B	✓			✓		✓			Name of current Part B case manager. Leave blank if client does not have Part A case manager.
Case Manager Assigned: Part D	✓					✓			Name of current Part D case manager. Leave blank if client does not have Part A case manager.
SSN	✓				✓	✓			Client's legal SSN. If client does not have a SSN, leave blank.
Primary Language	✓				✓	✓			The language the client is most comfortable speaking. If the client is most comfortable speaking Spanish and can only speak some English, put Spanish as their primary language.
Secondary Language	✓				✓	✓			Other language spoken by the client. Leave blank if not applicable.
Veteran	✓				✓	✓			Check this box if client is a veteran

Emergency Contacts Tab									
		RSR Requirement		Required For		Frequency			
Field Name	Cross-Provider	Clinical RSR	Non-Clinical RSR	Only Part B Agencies	All LaCAN Agencies	Enter w/in 5 days of change or enrollment	Enter w/in 30 days	Update every 6 months	Notes
EmergContact1 Name	✓				✓	✓			Name of client's first emergency contact
EmergContact1 Relationship	✓				✓	✓			Client's relationship to first emergency contact

EmergContact1 Aware of HIV Status	✓				✓	✓			Check if first emergency contact is aware of client’s HIV status
EmergContact1 Auth to take kids	✓				✓	✓			Check if first emergency contact is authorized to take custody of client’s children in emergency
EmergContact1 Address1	✓				✓	✓			First emergency contact’s street address
EmergContact1 Address2	✓				✓	✓			First emergency contact’s street address (2nd line if necessary)
EmergContact1 City	✓				✓	✓			First emergency contact’s city
EmergContact1 State	✓				✓	✓			First emergency contact’s state
EmergContact1 Zip Code	✓				✓	✓			First emergency contact’s zip code
EmergContact1 Phone	✓				✓	✓			First emergency contact’s phone
EmergContact1 Cell	✓				✓	✓			First emergency contact’s cell phone number
EmergContact1 Email	✓				✓	✓			First emergency contact’s email address
EmergContact1 Comments	✓								Comments or notes regarding emergency contact. (e.g. best times to contact, special instructions)
EmergContact2 Name	✓				✓	✓			Name of client’s second emergency contact
EmergContact2 Relationship	✓				✓	✓			Client’s relationship to second emergency contact
EmergContact2 Aware of HIV Status	✓				✓	✓			Check if second emergency contact is aware of client’s HIV status
EmergContact2 Auth to take kids	✓				✓	✓			Check if second emergency contact is authorized to take custody of client’s children in emergency
EmergContact2 Address1	✓				✓	✓			Second emergency contact’s street address
EmergContact2 Address2	✓				✓	✓			Second emergency contact’s street address (2nd line if necessary)
EmergContact2 City	✓				✓	✓			Second emergency contact’s city
EmergContact2 State	✓				✓	✓			Second emergency contact’s state
EmergContact2 Zip Code	✓				✓	✓			Second emergency contact’s zip code
EmergContact2 Phone	✓				✓	✓			Second emergency contact’s phone
EmergContact2 Cell	✓				✓				Second emergency contact’s cell phone number
EmergContact2 Email	✓				✓	✓			Second emergency contact’s email address
EmergContact 2 Comments	✓								Comments or notes regarding emergency contact. (e.g. best times to contact, special instructions)
Emerg Evac Plan	✓								Client’s emergency evacuation plan (required for New Orleans agencies)

Annual Review & Custom Annual Tabs									
Field Name	Cross-Provider	RSR Requirement		Required For		Frequency			Notes
		Clinical RSR	Non-Clinical RSR	Only Part B Agencies	All LaCAN Agencies	Enter w/in 5 days of change or enrollment	Enter w/in 30 days	Update every 6 months	
Insurance Assessment Date	✓	✓	✓		✓	✓		✓	Insurance status is required to be assessed at least every 6 months.
Insurance Assessment: Primary Insurance	✓	✓	✓		✓	✓		✓	Insurance source used by the client for the majority of their medical care on the date of the insurance assessment. See manual for definitions and examples.
Insurance Assessment: Other Insurance	✓	✓	✓		✓	✓		✓	Do not need to complete if client only has one source of insurance (identified under Primary Insurance) or has no insurance (also identified under Primary Insurance). See manual for definitions and examples.
FPL Assessment Date	✓	✓	✓		✓	✓		✓	FPL (household size and income) is required to be assessed at least every 6 months
FPL Assessment: Household Income	✓				✓	✓		✓	Total annual income of client and their spouse or blood relatives in the household. Required by CAREWare to calculate Poverty Level.
FPL Assessment: Household Size	✓				✓	✓		✓	Including client, the number of people living in the household who are either dependent upon the client or included in the above income. Required by CAREWare to calculate Poverty Level.
FPL Assessment: Poverty Level	✓	✓	✓		✓	✓		✓	Automatically calculated by CAREWare after Household Income and Household Size are entered.
Annual Screening: HIV Primary Care	✓				✓	✓		✓	Type of clinic where client receives most of their HIV medical care
Annual Screening: Housing/ Living Arrangements	✓	✓	✓		✓	✓		✓	Client's living arrangement this calendar year. See manual for examples and definitions of each type
Annual Screening: HIV Risk Reduction Counseling & Counseled By	✓	✓	✓			✓			ONLY Ryan White-funded primary care providers are required to enter/update this for clients who received a RW-funded primary care visit during the 6-month period.
Annual Screening: Mental Health & Result	✓	✓	✓			✓			ONLY Ryan White-funded primary care providers are required to enter/update this for clients who received a RW-funded primary care visit during the 6-month period
Annual Screening: Substance Abuse & Result	✓	✓	✓			✓			ONLY Ryan White-funded primary care providers are require to enter/update this for clients who received a RW-funded primary care visit during the 6-month period

Education Level	✓	✓	✓		✓	✓			Client’s highest education level this calendar year. Self-report.
Employment Status	✓				✓	✓			Client’s employment status this calendar year.
Primary Income Source	✓				✓	✓			Client’s primary income source this calendar year.
Primary Care Source	✓				✓	✓			Client’s source of primary care (physician name or clinic name).
Number of children in HH	✓				✓	✓			Number of children (under 18 yrs) in client’s household this calendar year.
Number of HIV+ children in HH	✓				✓	✓			Number of HIV+ children (under 18 yrs) in client’s household this calendar year.
Annual Marital Status	✓				✓	✓			Client’s marital status this calendar year.
Has client been incarcerated?	✓				✓	✓			Client’s incarceration status this calendar year.

Services Tab									
Field Name	Cross-Provider	RSR Requirement		Required for		Frequency			Notes
		Clinical RSR	Non-Clinical RSR	Only Part B Agencies	All LaCAN Agencies	Enter w/in 5 days of change or enrollment	Enter w/in 30 days	Update every 6 months	
Note: *if a client gives consent to share their information, all of the following fields (Date – Site) are automatically shared with the provider(s) authorized by the client.* *Some services will have additional custom service fields that appear depending on the service selected. Not all fields are listed below. Your grantee will provide you with a document listing additional fields to be completed per service name. Additional rows are provided below for you to fill in these fields if needed.*									
Date (of service)		✓	✓		✓		✓		Date the service was provided. Information about services received by a client needs to be entered monthly. However, the date should be entered for each service a client received during that month. So if a client received case management on three different dates, each date would be entered separately.
Service Name		✓	✓		✓		✓		Select from list of contracted services. What appears in the list depends on what your agency is under contract for on the date of service.
Contract		✓	✓		✓		✓		The contract field will automatically be populated when you select a service. If multiple contracts are available, choose the contract that funded this client’s service
Units		✓	✓		✓		✓		Each agency will receive a spreadsheet that describes what to count as a unit (e.g., bus card, session, billable unit, etc.) for each type of service

									the agency provides. This is determined by each agency’s contract with their grantee(s).
Price		✓	✓		✓		✓		Price will depend on how your agency is contracted to provide services and the reimbursement structure. Some services that are billed based on unit cost will have the unit cost set in CAREWare. Do NOT change the unit cost for these services.
Cost					✓		✓		The cost will automatically calculate for services with a unit rate (number of units x price= cost)
Staff or Provider Name					✓		✓		Select the name or agency that provided the service. For case management services, select the case manager.
Site					✓		✓		Site where the service was provided.

Appendix B:

Part 1

Louisiana Part B Case Management Service Entry Guidance

This technical assistance document is intended to clarify which work performed by case management staff may be entered in CAREWare as billable units. It complements the service definitions in each agency's Ryan White Part B contract and does not replace any contractual documents.

The negotiated unit cost associated with case management units includes all work done by case management staff that qualifies as case management– administrative tasks and travel time are not billable units because they are already included in the unit cost calculation.

Case management units are not intended to account for every moment of a case manager's time and a single case manager will rarely (outside of extreme circumstances) have 40 hours of client contact in one 40 hour work week. It is understood and expected that case managers will spend a portion of their time doing things that should not be entered in CAREWare as units of service, such as traveling to visit a client, writing case notes, and completing required forms. *These administrative tasks have been accounted for in the negotiated case management unit costs and are not separately billable.*

Each case management unit entered should reflect 15 minutes of either face-to-face or telephone contact with a client.

Examples of general tasks and their eligibility for CAREWare CM service entry

Billable in CAREWare	Not Billable in CAREWare
These are activities that would be eligible for entry as a Part B case management service in CAREWare: • Conducting an intake with the client • Setting up appointments with other providers on a client's behalf • Advocating for a client with a third party • Speaking to a third party about whether a client is eligible/ approved for the third party's services (if the client is unable to do this themselves) • Speaking directly to a client to remind them about an upcoming appointment • Assessing client needs with the client • Conducting case management face-to-face with the client • Conducting case management over the phone with the client • Conducting a videoconference meeting with the client	**These are activities that many case managers perform during the normal course of the day, but should not be entered as Part B case management services in CAREWare:** • Driving to or from a client's house or appointment • Faxing a document anywhere • Scheduling an appointment for a client to meet with you • Updating client records in CAREWare or their physical file • Filling out forms for about a client • Filing client documents • Entering case notes • Receiving a message from a client or leaving a message for a client • Sending a mass mailing to clients • Sending birthday/holiday cards to clients • Providing a food card, gas voucher, food bank delivery, etc. with no other discussion or case management involved

Example Scenarios

1. Case manager (CM) sees client (CL) in his office for 30 minutes. They discuss CL's upcoming doctor appointment and support services CL needs. CL leaves and CM spends the next 15 minutes writing up a case note for the visit.

Units of Service: 2 units of 15 min. case management
Explanation: CM spent 30 minutes with CL discussing their case – this is 2 units of service. The additional 15 minutes spent entering the case note is an administrative task and does not qualify as a unit of service. The cost of the additional time spent on administrative tasks is built into the unit cost established during contract negotiations.

2. Case manager (CM) sees client (CL) in his office for 30 minutes. They discuss CL's oral health needs. CL leaves and CM spends the next 15 minutes writing up a case note for the visit. CM then calls the CL's doctor and schedules the CL's appointment.

Units of Service: 3 units of 15 min. case management
Explanation: 2 units of service for the 30 minutes spent with CL discussing CL's needs. 1 unit of service for scheduling the oral health appointment on behalf of CL. Units are not entered for writing the case note or entering the referral.

3. a. CL goes to CM's office to pick up a food voucher or groceries. CM gives CL the voucher/bag of groceries and CL leaves without further discussion.

b. CM mails CL a food voucher after CL calls to request it. Nothing else is discussed during the phone call.

Units of Service: Each scenario is a food bank entry only.
Explanation: No case management has been provided in either situation. The client did receive a service – food bank – but no case management was required to receive this.

4. A CL calls the CBO and leaves a detailed message with the office manager regarding which services he needs assistance paying. The office manager gives the message to the appropriate CM. The CM enters a case note is entered summarizing what the client said.

Units of Service: None.
Explanation: No case management was provided. Receiving a message from a client is an administrative task and the cost is already built into the unit cost established during contract negotiations.

5. The CM meets with a currently incarcerated potential CL via video conference for 60 minutes as part of the SPNS Correctional Program intervention. They complete the SPNS VC assessment and personal needs tool, which the CM later enters into CAREWare.

Units of Service: 4 units of case management
Explanation: 4 units (15 minutes x 4 = 60 minutes) of case management were provided. The cost of any data entry associated with a client (e.g. entering information in CW) has already been included in the CM unit cost and is not entered as separate units.

Appendix B: Part 2

Service-Specific Part B Field Requirements in LaCAN CAREWare

The following tables specify and explain service-specific data entry requirements for Part B funded agencies. Each field listed is **required** for service billed as of June 1, 2015.

Service Name or Description	Custom Field Name	Custom Field Description	Values	Rationale

All Part B Case Management *face-to-face* services ***Beginning 7/1/15, all CM entries must have a corresponding case note entry in CAREWare (must have the same date as the CM service)***	**Staff or Provider Name**	Already included in CAREWare; person providing the service; drop-down box	All staff or provider names	Provides record of which staff member provided the service
	Service Comment	Already included in CAREWare; free text field	Any comment related to the service that *does not* need to be in a case note.	Allows for providers to enter additional information not covered in other fields
	Site	Already included for some agencies; drop down box Site of service provision	• Agency • Client's home • Medical Office • Other *(contact SHP to request additional values)*	Provides record of location of service provision
	Other Site	Text Field	Specify the site if choosing "other" in the site field.	Provides record of location of service provision
	Service Entry Date	Date Field	Date service entered (not when services was provided)	Provides record of data entry timeline
	Encounter Topics: Multiple Checkboxes	Series of checkboxes; Indicate all topics that were discussed during the CM encounter. At least one checkbox must be marked for each CM service entry	• Eligibility determination • 6-month eligibility review • Intake • Initial Assessment • 6-month reassessment • Acuity • Referral/advocacy • Treatment Adherence • Home Visit • Case Conferencing • Follow-up Monitoring • Transfer/ Inactivation • HIV Medical Appointment • Non-HIV Medical Appointment • Health Insurance Marketplace/ ACA • LA HAP/ADAP/ HIP • Health Education/ Risk Reduction Counseling • Schedule Appt. for CL with 3rd Party • Transportation Coordination • HOPWA Related CM • Other *(Contact SHP to request add'l values)*	Provides record of topics included in billed CM service and assurance that services billed are eligible for CM units; Case notes to document coverage of these topics must be entered in the case notes section of CAREWare.
	Other Encounter Topic	Text field	Specify additional encounter topic if "other" is selected as an encounter topic	Provides record of topics included in billed CM service; Case Notes to document coverage of these topics must be entered in the case notes section of CW

Service Name or Description	Custom Field Name	Custom Field Description	Values	Rationale

All Part B Case Management ***NON-face-to-face*** **services** ***Beginning 7/1/15, all CM entries must have a corresponding case note entry in CAREWare (must have the same date as the CM service)***	**Staff or Provider Name**	Already included in CAREWare; person providing the service; drop-down box	All staff or provider names	Provides record of which staff member provided the service
	Service Comment	Already included in CAREWare; free text field	Any comment related to the service that *does not* need to be in a case note.	Allows for providers to enter additional information not covered in other fields
	Contact Method	Dropdown box; method of contacting client for non-face-to-face CM	• Telephone contact • Letter to client via mail • No Client Contact • Other	Provides record of how CM was provided and assurance that method is allowable
	Other Contact Method	Text Field	Specify the site if choosing "other" in the site field.	Provides record of how CM was provided and assurance that method is allowable
	Service Entry Date	Date Field	Date service entered (not when services was provided)	Provides record of data entry timeline
	Encounter Topics: Multiple Checkboxes	Series of checkboxes; Indicate all topics that were discussed during the CM encounter. At least one checkbox must be marked for each CM service entry	• Eligibility determination • 6-month eligibility review • Intake • Initial Assessment • 6-month reassessment • Acuity • Referral/advocacy • Treatment Adherence • Home Visit • Case Conferencing • Follow-up Monitoring • Transfer/ Inactivation • HIV Medical Appointment • Non-HIV Medical Appointment • Health Insurance Marketplace/ ACA • LA HAP/ADAP/ HIP • Health Education/ Risk Reduction Counseling • Schedule Appt. for CL with 3rd Party • Transportation Coordination • HOPWA Related CM • Other *(Contact SHP to request add'l values)*	Provides record of topics included in billed CM service and assurance that services billed are eligible for CM units; Case notes to document coverage of these topics must be entered in the case notes section of CAREWare.
	Other Encounter Topic	Text field	Specify additional encounter topic if "other" is selected as an encounter topic	Provides record of topics included in billed CM service; Case Notes to document coverage of these topics must be entered in the case notes section of CW

Service Name or Description	Custom Field Name	Custom Field Description	Values	Rationale
All Part B Case Management *Transportation services*	**Staff or Provider Name**	Already included in CAREWare; person providing the service; drop-down box	All staff or provider names	Provides record of which staff member provided the service
	Service Comment	Already included in CAREWare; free text field	Any comment related to the service that *does not* need to be in a case note.	Allows for providers to enter additional information not covered in other fields
	Transportation Type	Dropdown box; Type of transportation service provided to client	• Gas voucher • Bus passes • Transportation gas card • Taxi service Mileage reimbursement (non-cash payment to someone other than the client)	Provides record of type of transportation provided
	Transportation Destination	Dropdown box; destination for the transportation service provided	• HIV Medical Appointment • Mental Health Counseling Appointment • Non-HIV Medical Appointment • Oral Health Appointment • Other • Pharmacy • Substance Use Treatment Appointment	Provides record that transportation funds were used for allowable destination
	Other Transportation Destination	Text field; used if destination is not listed above	Specify addition transportation destination if "other" is selected above. Destination is subject to approval prior to invoice	Provides record that RW transportation funds were used for allowable destination
	Service Entry Date	Date Field	Date service entered (not when services was provided)	Provides record of data entry timeline

Appendix C:

LaCAN Approved Anti-Virus Software

1. Bitdefender Antivirus Plus 2015
2. Norton Security
3. McAffee Antivirus Plus
4. Trend Micro Titanium Antivirus +
5. Avira Antivirus Pro
6. Sophos
7. BullGuard Antivirus
8. eScan Anti-Virus
9. Panda Antivirus Pro
10. Avast! Pro Antivirus