



RWHAP Parts C & D Allocations and Expenditures Reports

RYAN WHITE HIV/AIDS PROGRAM (RWHAP)
HRSA HIV/AIDS BUREAU
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Webcast Overview

Accessing the Allocations and Expenditures Reports

Completing the Allocations Report

Allocations Report Q&A

Completing the Expenditures Report

Validating and Submitting the Allocations and Expenditures Reports

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Expenditures Report Q&A

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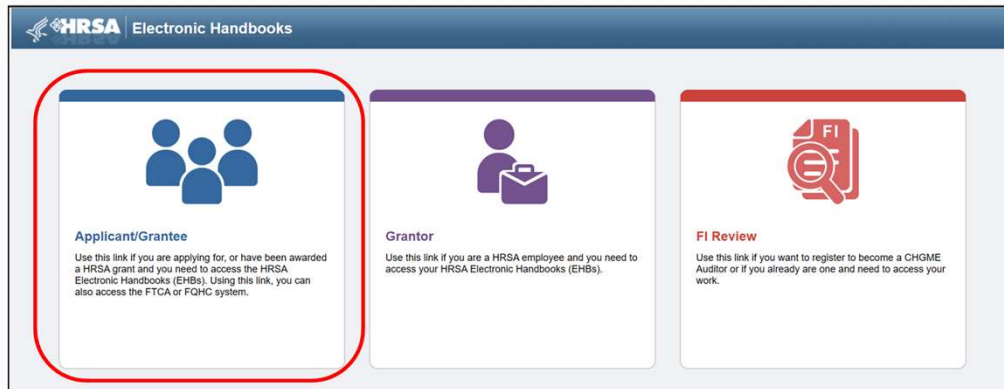
Thank you everyone for joining the presentation. In today's webcast, we will be going over both the Ryan White HIV/AIDS Program Part C and Part D Allocations Report as well as the Part C & D Expenditures Report. I will first go over accessing both the Allocations and Expenditures Reports. Then I will provide a brief background of what the Allocations Report is followed by a quick review of the Grantee Contract Management System and its relation to the Allocations Report. Next, I will dive into completing the Allocations Report. Once we have reviewed the steps for completing the Allocations Report, I will answer any questions you have about the Allocations report and then hand the presentation over to my colleague Denise who will go over completing the expenditures report, validating and submitting both the Allocations and Expenditures Report, provide Technical Assistance resources available to you to help with both report submissions and finally answer any questions you may have about your expenditures report.



Accessing the Allocations and Expenditures Reports

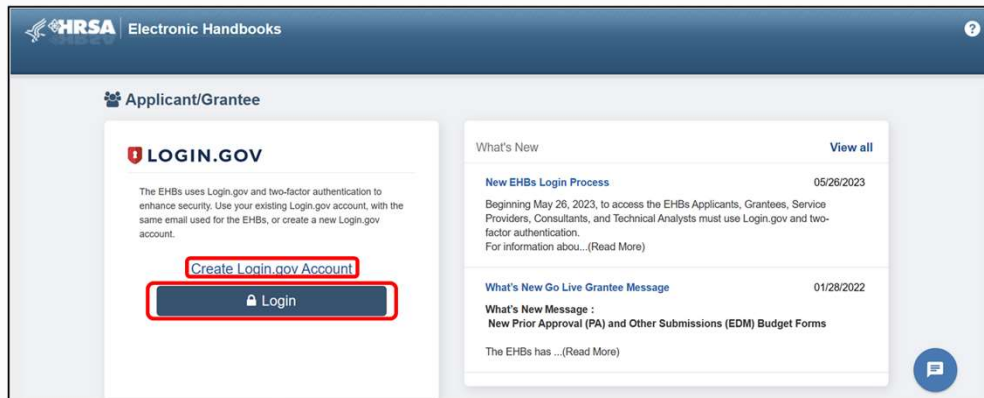
Let's start with going over how to access the Allocations Report and Expenditures Reports.

HRSA EHBs Landing Page



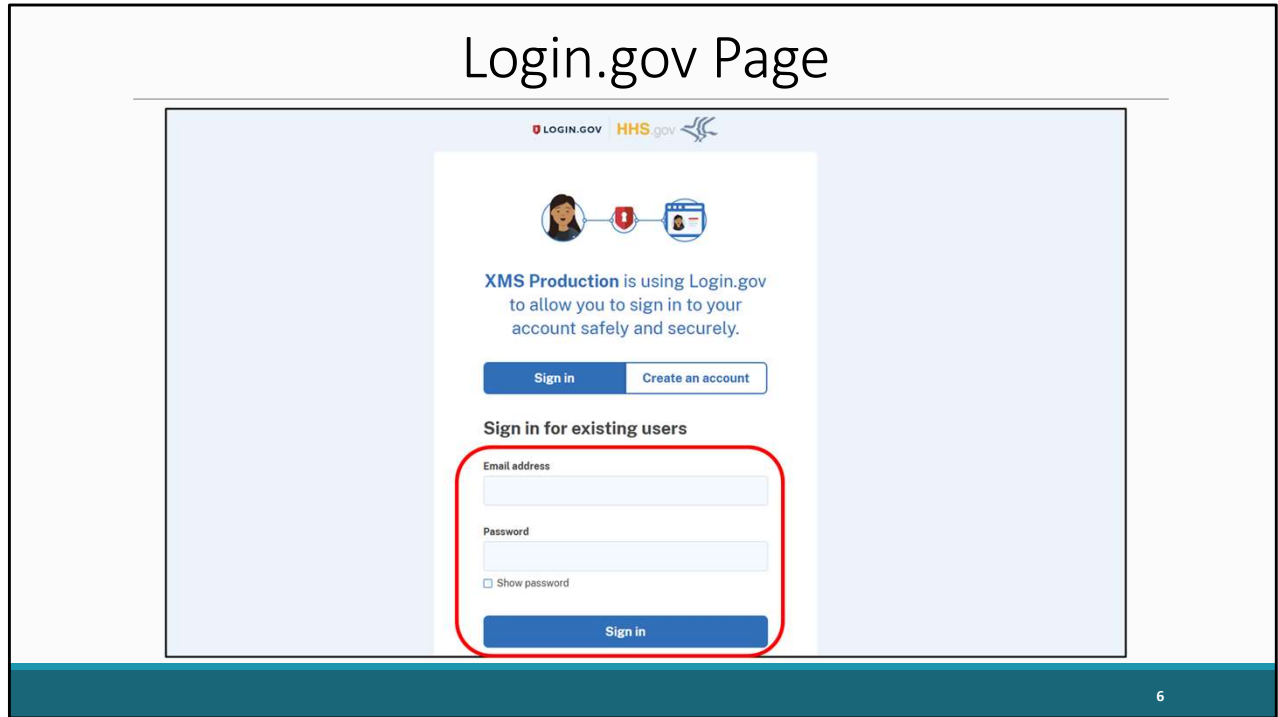
Currently, we are at the EHBs landing page on the grants.hrsa.gov website, where you will see a list of login links. Recipients will select the Applicant/Grantee link to enter the correct EHBs portal.

HRSA EHBs Access Page



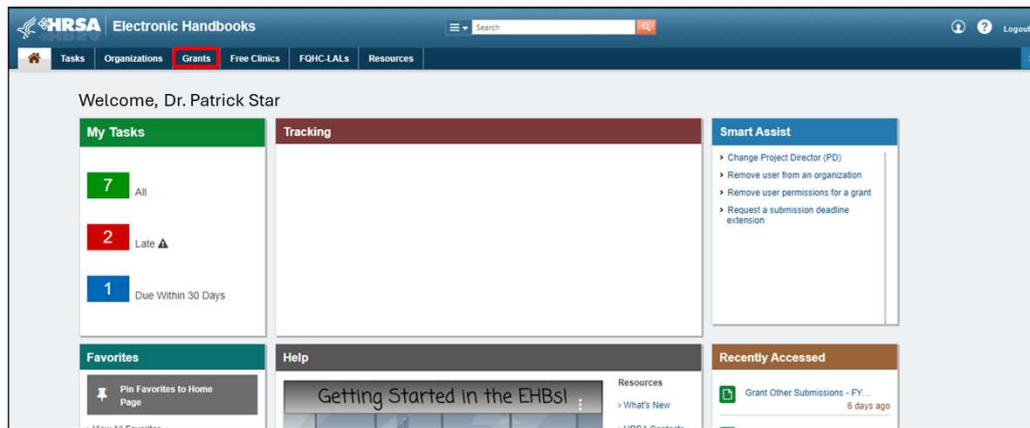
On the next page that opens you will be presented with two options: Create Login.gov Account or Login. For recipients who are currently registered in the EHBs you will select login. However, for those who are new to the system you will want to select “Create Login.gov Account” to begin your registration process. If you're in need of assistance with registration in the EHBs please contact the EHBs Customer Support Center whose information will be displayed towards the end of the presentation. For the purposes of today’s presentation, we will select login to continue our process.

Login.gov Page



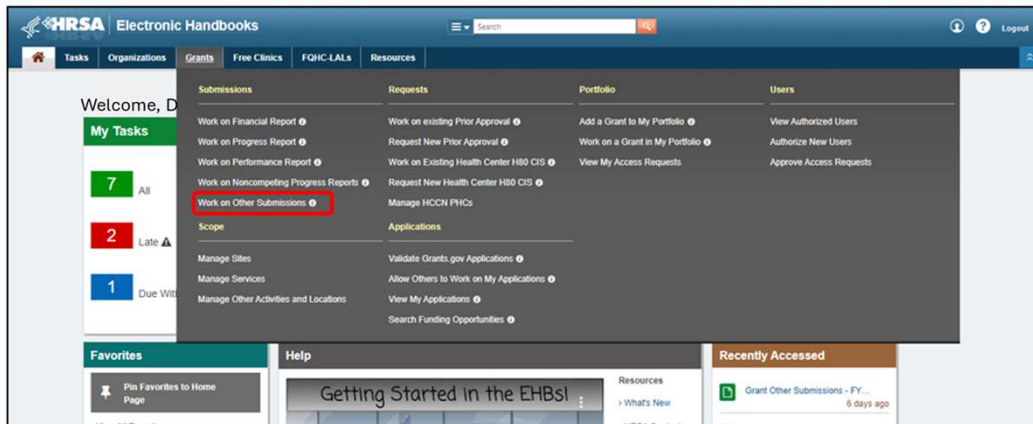
Now we are on the Login.gov page where we will enter our Email address and password and select sign in.

HRSA EHBs Home Page



After logging into the EHBs you will be brought to the EHBs home page shown here on the screen. You'll then hover over the Grants tab at the top of the page.

Grants Dropdown Menu



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On the drop-down menu that appears, click on “Work on Other Submissions” under the Submissions header.

Submissions-All Page

The screenshot displays the 'Submissions-All Page' interface. At the top, there are search filters for 'Submission Deadline' and 'Submission Type'. The 'Submission Type' dropdown is set to 'All', with 'Financial Report' and 'Noncompeting' also selected. Below the filters are sections for 'Advanced Search Parameters', 'Display Options', and 'Sort Method (Grid | Custom)'. A 'Search Name' field and 'Save Parameters' and 'Search' buttons are present. An 'Export To Excel' button is located on the left, and 'Search' and 'Saved Searches' options are on the right. The main content is a table with 10 columns: Submission Name, Submission Type, Organization, Grant #, Tracking #, Reporting Period, Deadline, Submitted Date, Status, and Options. Two rows are visible, both for 'Lagoon Beach Clinic' with grant # 'H76HA00000'. The first row is 'FY 2023 Expenditures Report' with a reporting period of '04/01/2023 - 3/31/2024' and a deadline of '07/31/2024'. The second row is 'FY 2024 Allocations Report' with a reporting period of '04/01/2024 - 3/31/2025' and a deadline of '05/31/2024'. Both rows have a status of 'Not Started'. Red boxes highlight the 'FY 2023 Expenditures Report' and 'FY 2024 Allocations Report' in the first column, and the 'Start' link in the 'Options' column for both rows. The page footer shows '55 items in 4 page(s)' and the number '9'.

Submission Name	Submission Type	Organization	Grant #	Tracking #	Reporting Period	Deadline	Submitted Date	Status	Options
FY 2023 Expenditures Report	Other Submissions	Lagoon Beach Clinic	H76HA00000		04/01/2023 - 3/31/2024	07/31/2024		Not Started	Start
FY 2024 Allocations Report	Other Submissions	Lagoon Beach Clinic	H76HA00000		04/01/2024 - 3/31/2025	05/31/2024		Not Started	Start

That's going to take you to the Submissions-All page which is going to look like the one shown here. Scroll down past these search criteria to find your list of submissions. In this list, locate either your 2024 Allocations Report or your 2023 Expenditures Report which we see here, and then select the "Start" link under the far-right Options column for the report you wish to complete. Just for clarification the first time you access your report this link will say "Start" but once your report has been opened it will instead say "Edit".

Allocations Report Inbox

The screenshot shows the HRSA Electronic Handbooks interface. The top navigation bar includes 'Tasks', 'Organizations', 'Grants', 'Dashboards', 'Free Clinics', 'FQHC-LALs', and 'Resources'. The main content area is titled 'Allocations Report Inbox' and features a table with the following data:

#	Report ID	Submission	Name	Grant Number	Budget Year	Modified Date	Status	Action	Comments	Action History
1		Allocations Report	Lagoon Beach Clinic	H76HA00000	3/1/2024-2/28/2025		Not Started	Create	Comment	History

Below the table, there is a help section with contact information for the HRSA Help Desk and Data Support. At the bottom, it shows the user is logged in as 'GranteeDataViewer, GranteeDataEditor, GranteeDataSubmitter' and provides a link to download Adobe Acrobat Reader.

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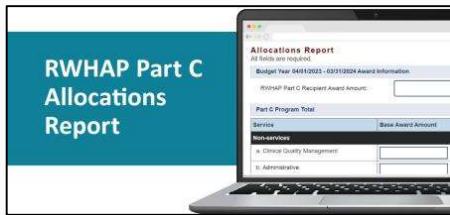
We are now in the Allocations Report inbox however for those who chose to work on the Expenditures Report, the screen will look similar but indicate you're in the Expenditures Report Inbox and for both reports you'll notice the report is listed in the center of the page. For recipients who are working on the Allocations Report before you begin your Report, we recommend that you first enter your contracts into the GCMS to ensure they are complete and accurate. To access the GCMS you will select the Search Contracts link in the navigation panel to the left as shown here.

RWHAP Part C Allocations Report

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So, lets dive into the background of the Allocations Report and our brief overview the of the GCMS.

RWHAP Parts C and D Allocations Report Manuals



Available [here](#) on the TargetHIV website



Available [here](#) on the TargetHIV website

Before we move further into the presentation, I do want to remind everyone that the Part C Allocations Report manual will be available soon on the TargetHIV website at the link shown on this slide and the part D manual will be available closer to the time of the Part D report opening. These manuals will contain all the information I'll present here today and are great resources if you need assistance working on these reports.

Background

- All RWHAP Part C and RWHAP Part D grant recipients are expected to complete an Allocations Report
- Recipients will complete an Allocations Report for each grant received
- Recipients report their allocation of RWHAP funds
- Completed through the [HRSA Electronic Handbooks](#) (EHBs)



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Let's start off with a little background information about the Allocations Report. All Ryan White HIV/AIDs Program Part C and Part D grant recipients are expected to complete an Allocations Report. Recipients will complete an allocations report for each grant that they receive. So, if you receive a part C and part D grant, that means you will complete two reports, one for each grant. These reports serve as a reference to determine how recipients allocate funds each budget period and allows HRSA to monitor and track the use of grant funds in accordance with the conditions of their grant award.

The Allocations Report is an annual report completed through the Electronic Handbooks, or EHBs, where recipients report on the allocation of their grant funding for the year.



Grantee Contract Management System (GCMS)

So, let's briefly review what the GCMS is and some helpful resources available to everyone that provide guidance on how to access and manage contracts in the system.

What is the GCMS?

- A data-storage system for RWHAP contract information used to decrease data-entry burden
- Multiple reports are populated with the information entered
- Add, edit, copy, or delete contracts year-round
- New contracts must be added every year
 - Recipients should not overwrite prior year's contracts

The GCMS is a data-storage system for Ryan White contract information. Information about a recipient's contracts are entered into the GCMS and maintained in this one place to decrease the data-entry burden.

From this contract information, multiple data reports are populated with the information entered in the GCMS including the Allocations Report and the RWHAP Services Report (or RSR).

Within the GCMS, you will add new contracts, as well as edit, copy, or delete existing ones. However, regarding deleting contracts, they should only be removed if they were mistakenly added. The GCMS is available year-round allowing recipients to make changes to their contracts throughout the year. New contracts are required to be added every year as you work on your reports. We recommend not writing over your previous year's contracts as they are there for your reference and were used for the previous reporting periods.

The Allocations Report and the GCMS

- Contracts are typically added to the GCMS during completion of the Allocations Report
- Values for core medical and support services are entered in these contracts
- Recipients must have a contract in the GCMS for each organization funded to provide services with their RWHAP award

Results													
	Id	Funded By	Org ID	Organization Name	Reg Code	Reference	Start	End	Services	Funded Through	Funded Amount	Is Executed	Action
+	000001	H76HA00000		Lagoon Beach Clinic			3/1/2023	2/28/2024	12		\$200,000.00	Yes	Edit/Remo Go
+	000002	H76HA00000		Lagoon Beach Clinic			3/1/2024	2/28/2025	7		\$200,000.00	Yes	Edit/Remo Go

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Typically, recipients will add their contracts to the GCMS during completion of the Allocations Report. These contracts will contain the budget values for your core medical and support services, rather than entering them directly into the Allocations Tables. You'll want to make sure that you have a separate contract for each organization that is funded to provide services for your Ryan White grant. This includes entering a contract for your own organization if your agency provides services. The contract dates should match the dates of your budget period and each contract should cover a single year of your grant award.

At the bottom of this slide is a brief example of what the GCMS results page should look like after you search. As you can see the details for each contract are presented concisely here as well as options on the right to edit each contract.

GCMS Resources



GCMS Instruction Manual
available [here](#)

GCMS webinar available
[here](#)

As mentioned before, this is just a brief overview about the process of adding contracts into the GCMS. However, I do recommend looking over the two resources provided on this slide. The GCMS Instruction Manual and Completing the Grantee Contract Management System webinar.






Completing the Allocations Report

Once you have reviewed and updated your contracts in the GCMS, you are now ready to start working on the submission of the Allocations Report.

Opening the Allocations Report

The screenshot displays the HRSA Electronic Handbooks interface. The main content area is titled "Allocations Report Inbox" and features a table with the following data:

#	Report ID	Submission	Name	Grant Number	Budget Year	Modified Date	Status	Action	Comments	Action History
1		Allocations Report	Lagoon Beach Clinic	H76HA00000	3/1/2024-2/28/2025		Not Started			

Below the table, there is a help section with contact information for the HRSA Help Desk and Data Support. At the bottom, it indicates the user is logged in as "GranteeDataViewer, GranteeDataEditor, GranteeDataSubmitter" and provides a link to download Adobe Acrobat Reader.

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So, let's go back to our Allocations Report inbox, and we'll now open our report by selecting the envelope icon under the "Action" column. For clarification, if this is your first time opening your report the icon will say create as shown on this screen, but if you are returning to your report, it will instead say open.

Recipient Information

The screenshot displays the 'Recipient Information' page within an 'Allocations Report' for 'H76HA00000: Lagoon Beach Clinic'. The page is divided into several sections:

- NAVIGATION:** A sidebar on the left with categories like 'Inbox', 'Manage Contracts', 'Navigation', 'References', 'Actions', and 'Comments'. The 'Navigation' section is expanded, showing 'Recipient Information' as the selected option.
- Header:** 'Allocations Report' and 'Your session will expire in: 29:39'.
- Report Details:** A table with the following information:

Report ID: 12345	Status: Working	Due Date: 5/31/2024 5:59:59 PM
Budget Year: 3/1/2024-2/28/2025	Last Modified Date: 5/18/2024 11:00:22 AM	Last Modified By:
Access Mode: ReadWrite	UEI: ABCDEFGHIJKLMN	
- Recipient Information:** A section with a warning: 'The data shown below are pre-populated from the HRSA Electronic Handbooks (EHBs). Please verify that the information shown below is accurate. A field with an asterisk * before it is a required field. NOTE: Updating the information on this page does not update your information in the EHBs. You must revise your agency's information in the EHBs as well.'
- 1. Official Mailing Address:** A list of required fields:
 - a. Street:
 - b. City:
 - c. State:
 - d. Zip Code:
- 2. Organization Identification:** A list of required fields:
 - a. EIN:
 - b. UEI:

When your report is opened, the system will take you to the first section, the Recipient Information page. This section is going to be prepopulated with information from the EHBs but make sure to review it for accuracy and make any adjustments and additions as needed. Included in this section are the recipient mailing address, the EIN and UEI.

Recipient Information, cont.

2. Organization Identification:

a. EIN:

b. UEI:

3. Contact information of person responsible for this submission:

* a. Name:

b. Title:

* c. Phone:

d. Fax:

* e. E-mail:

For help with EHBs contact the HRSA Help Desk by phone at 1-877-G04-HRSA (1-877-464-4772) Monday through Friday, 8:00 a.m. to 8:00 p.m. Eastern Time. Or use the HRSA Electronic Handbooks Contact Center help request form to submit your question online.
For questions regarding data content and/or reporting requirements, please contact Data Support at 1-888-640-9356 or email to RyanWhiteDataSupport@wrma.com

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Further down we have a section for contact information for the person responsible for completing the submission. If you make any changes to this section, make sure to save them by selecting the “Save” button on the bottom right of the page.

Let’s move on to the next section of the report which is the File upload section.

File Upload

The screenshot shows the 'Allocations Report' page for 'H76HA00000: Lagoon Beach Clinic'. A blue callout bubble with a red 'X' over a file icon and a red circle with a slash states: 'No file upload required for both Part C & Part D recipients'. In the left navigation panel, 'File Upload' is highlighted with a red box. In the 'Submission Components' section, the 'Upload Supplemental Document' link is also highlighted with a red box. The page includes a search bar, a navigation menu, a status bar (Working, Due Date: 5/31/2024 5:59 PM), and a table with columns: Description, Size, Part, Budget Year, and Action. The 'Submission Components' section contains instructions on how to upload a primary component or a supplemental document, and a note that files larger than 29MB cannot be uploaded. A 'No records to display' message is shown below the instructions. The page footer includes contact information for the HRSA Help Desk and the user's login details (SysAdmin, DataSupportUser, HccUser).

Using the navigation panel on the left you can reach the File Upload section by selecting File Upload here. For both Part C and D recipients, no files are required to be uploaded with your Allocations report submission; however, if there are supplemental documents or documents your project officer wants you to upload, you can do so here using the upload supplemental document function .

Consolidated List of Contractors (CLC)

The screenshot displays the 'Allocations Report' interface for recipient H76HA00000: Lagoon Beach Clinic. The navigation panel on the left includes options like 'Inbox', 'PTR/Allocations Report', 'Manage Contracts', and 'CLC Report' (which is highlighted with a red box). The main content area shows the 'Consolidated List of Contractors' section with a table of contractor information.

Warning	Id	Funded By	Organization	Reference	Start	End	Services	Funded Through	Is Executed	Amount
+		H76HA00000	Lagoon Beach Clinic		3/1/2024	2/28/2025	3		Yes	\$300,000.00

Using our navigation panel, we move into our next section which is the CLC Report by selecting the appropriate panel, as shown here.

This page shows all the contracts in the GCMS for the reporting period for your report. Here you can see, this recipient has just the one provider listed. You can review the information next to each organization including the funding amount as well as funded services if you click on the plus icon next to each listing. If you realize that you need to make any edits to the information in this section, you'll have to make changes to your contracts in the GCMS.

When you open your report for the first time, it's going to pull in all contract information from the GCMS automatically at that point. But if you make changes to your contracts after your report has already been opened, then you'll have to synchronize those changes. So, let's say we made a small edit in our contract....

Synchronization Warning Banner

The screenshot displays a software interface for an Allocations Report. A yellow warning banner at the top contains the following text: "Warning: The program information displayed below does not match the program information in the Grantee Contract Management system (GCMS). Click the provider name listed in blue font below or select the icon in the 'Warning' column below to review the updates for each provider and, if correct, synchronize the information. To synchronize program information across all providers, click the 'Synchronize All' button. Please note that the synchronization process updates data for both the CLC Report and Allocation Report." Below the banner, the organization "Lagoon Beach Clinic (modified)" is listed with a red box around the "Synchronize All" button. Further down, details for "H76HA00000: Lagoon Beach Clinic" are shown, including Report ID, Budget Year, Access Mode, Status, Last Modified Date, and Due Date. A section titled "Consolidated List of Contractors" includes a sub-header and a table with columns: Warning, Id, Funded By, Organization, Reference, Start, End, Services, Funded Through, Is Executed, and Amount. The table contains one row with a plus sign in the Warning column and the following data: Id: H76HA00000, Organization: Lagoon Beach Clinic, Start: 3/1/2024, End: 2/28/2025, Services: 3, Is Executed: Yes, Amount: \$300,000.00.

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When you have a change that needs to be synchronized, you'll see this yellow warning banner at the top of the page. The message in this banner just lets you know that changes were made to the GCMS that need to be synchronized with your report. If you skip this synchronization step, your contract changes will not be reflected in your report. Make sure before you submit the report that you don't see this banner.

In this example, there was a contract modified for the organization. To synchronize the changes, we'll select the "Synchronize All" button in the yellow banner.

Synchronize Contract Page

The screenshot displays the 'Allocations Report' interface for contract 'H76HA00000: Lagoon Beach Clinic'. A warning banner at the top states: 'Warning: This Contract was modified in the GCMS'. The contract details include:

- Report ID: 12345
- Status: Working
- Due Date: 5/31/2024 5:59:59 PM
- Budget Year: 3/1/2024-2/28/2025
- Last Modified Date: 5/18/2024 11:00:22 AM
- Last Modified By:
- Access Mode: ReadWrite
- UEI: ABCDEFGHIJKLMN

Additional contract information:

- Start Date: 3/1/2024
- End Date: 2/28/2025
- Reference: 000000
- Is Executed: Yes
- Lead Agency Type: No
- Prime Contractor: None
- Direct Services: Yes

Change	Service	Base
Added	Outpatient/Ambulatory Health Services	\$100,000.00
Added	Oral Health Care	\$100,000.00

At the bottom of the report, there is a red 'Synchronize' button and a grey 'Cancel' button.

On the following page, review the contract changes to make sure that they are accurate. We see here our contract was modified with all the relevant information from the GCMS. If everything looks correct, click the “Synchronize” button to finish adding those changes to the report.

CLC Report Page After Synchronization

NAVIGATION << Search

Allocations Report Your session will expire in: 29:27

▼ H76HA00000: Lagoon Beach Clinic

Report ID: 12345 Status: Working Due Date: 5/31/2024 5:59:59 PM
Budget Year: 3/1/2024-2/28/2025 Last Modified Date: 5/18/2024 11:00:22 AM Last Modified By:
Access Mode: ReadWrite UEI: ABCDEFGHIJKLMN

Consolidated List of Contractors

Review the list of your organization's contracts for the fiscal year. If a contract is missing, look for the missing contract by selecting the "Search Contracts" link under the Manage Contracts heading in the left menu.

Warning	Id	Funded By	Organization	Reference	Start	End	Services	Funded Through	Is Executed	Amount
+		H76HA00000	Lagoon Beach Clinic		3/1/2024	2/28/2025	5		Yes	\$500,000

For help with EHBs contact the HRSA Help Desk by phone at 1-877-Go4-HRSA (1-877-464-4772) Monday through Friday, 8:00 a.m. to 8:00 p.m. Eastern Time. Or use the HRSA Electronic Handbooks Contact Center help request form to submit your question online.
For questions regarding data content and/or reporting requirements, please contact Data Support at 1-888-640-9356 or email to RyanWhiteDataSupport@wrma.com

Logged in as: SysAdmin, DataSupportUser, HccUser
The HAB Web Applications also require Adobe Acrobat Reader 5 or higher installed on your PC. To download Adobe Acrobat Reader, click

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Once you have synchronized the contract, you will see your updated contract listed in the CLC Report accurately reflecting the changes made.

Now let's move on to the last section of the report, the Allocations Report. You can get there by selecting the "Allocations Report" link in the Navigation panel on the left side of the screen.

Early Intervention Services

- There are two definitions of Early Intervention Services (EIS) to be aware of when completing the RWHAP Part C Allocations and Expenditures Reports

RWHAP Part C EIS

Recipients must allocate/expend at least 50 percent of their award on RWHAP Part C EIS

Made up of multiple different core medical service categories (e.g., Outpatient/Ambulatory Health Services)

Policy Clarification Notice (PCN) #16-02 EIS

All mentions of EIS in the GCMS, Allocations Report, and Expenditures Report refer to PCN #16-02 EIS

Must include:

- Counseling individuals with respect to HIV
- High risk targeted HIV testing
- Referral and linkage to care
- Other clinical and diagnostic services related to HIV diagnosis

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Before we start looking at the Allocations Report section and service categories, I want to take a moment to highlight one of the most common errors we see when agencies submit the RWHAP Part C Allocations and Expenditures Reports which has to do with one of the service categories in the report, Early Intervention Services (or EIS). There are actually two different definitions of EIS that recipients need to be aware of when completing their reports.

First is RWHAP Part C EIS. This is the legislative requirement EIS definition. At least 50% of your award must be allocated or expended toward RWHAP Part C EIS. There are actually multiple different core medical service categories that go towards this requirement and make up RWHAP Part C EIS. RWHAP Part C EIS refers to primary medical care services and the main thing you should be doing with your award, which include things like OAHS, Medical Case Management, Oral Health, Mental Health, etc. Say for example your agency is paying the salary for a doctor to see clients, that funding should be reported under OAHS and that will go towards your 50% EIS requirement.

The other definition is Policy Clarification Notice (or PCN) #16-02 EIS. PCN #16-02 is the HAB document that contains definitions for all core medical and support service categories. Now, every mention of EIS that you see in the GCMS, the Allocations Report, and the Expenditures Report is going to be referring to PCN #16-02 EIS. PCN #16-02 EIS is more a

point-of-entry service than the primary medical centered focus of RWHAP Part C EIS. For RWHAP Part C recipients, PCN #16-02 defines EIS as having to include counseling individuals with respect to HIV, high risk targeted HIV testing, referral and linkage to care, and any other clinical and diagnostic services related to an HIV diagnosis.

Tips for Deciding on Service Categories

- Review the service category definitions in [PCN #16-02](#) before working on your report
- The service category reported in the Allocations and Expenditures Report should match the service category used to record data for that service
- Do not report that the majority of your award has been allocated to/expended on EIS
 - Contact HRSA Project Officer to confirm guidance on how EIS funding should be allocated
- If you have any questions about service categories, contact RWHAP Data Support for assistance



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Here are a few tips to help when deciding what service categories to put your funding under in the Allocations and Expenditures Reports. To start, before you begin, you'll want to review the service category definitions in PCN #16-02. All the services you'll see in both reports are defined in that document. The service category that you report in your Allocations and Expenditures Reports should match with the service category used to record and report data for that service. For example, let's say you're funding a case manager doing treatment adherence. Based on PCN #16-02, that would best fit under Medical Case Management. So, you'll report funding for those services under Medical Case Management and record your data for that service under Medical Case Management as well.

You don't want the majority of your award reported under the EIS service category. Remember in your report that's going to be the PCN #16-02 definition of EIS. Your RWHAP Part C EIS, the services going toward that 50% EIS requirement, need to be reported under the appropriate core medical service category. If you have any questions on how EIS funding should be allocated in your contracts, please confirm this information with your HRSA Project Officer

And as always, if you have any questions or concerns about what service category you should use, you can always contact us at RWHAP Data Support.

RWHAP Part C Allocations Report

Allocations Report
 Report ID: 12345 Status: Working Due Date: 5/31/2024 5:59:59 PM
 Budget Year: 3/1/2024-2/28/2025 Last Modified Date: 5/18/2024 11:00:22 AM Last Modified By:
 Access Mode: ReadWrite UEI: ABCDEFGHIJKLMN

Allocations Report
 All fields are required.
 Public Burden Statement: OMB Control Number (0915-0318) Valid Until 04/30/2026
 Budget Year 3/1/2024-2/28/2025 Award Information

RWHAP Part C Recipient Award Amount

Service	Base Award Amount	Base Award Percent
Part C Program Total		
Non-services		
a. Clinical Quality Management	<input type="text"/>	
b. Administrative	<input type="text"/>	
Non-services Subtotal		
Client Services		
c. Core Medical Services		
d. Support Services		
Service Allocation Subtotal		
Total Allocations (Service+Non-service)		

The total amount allocated for Administrative Services cannot exceed 10% of your total award

I'm going to start by going over the allocations report table for Part C Recipients and after I will review the tables for Part D recipients.

Part C recipients will have three editable fields in the Allocations Report section along with the tables for both core medical and support services with information you've entered in the GCMS that has been synchronized into the report. Once all this information has been updated you will save the information on this page before moving onto the next section of the report. First let's go over our three editable fields. In this first box, we have your Part C Recipient Award Amount, which is the total amount of your agency's Part C award indicated on your notice of award. Next, we have the "Non-services" section of the Part C program Total table which are the areas where you will enter the allocated amounts for your agency's Clinical Quality Management and Administrative costs. As a reminder the amount for administration may not exceed 10 percent of your total Ryan White Part C Award.

Right below the Non-services categories we have some Client Services fields that are not editable, but instead are subtotals that are going to automatically calculate from values entered from both the editable fields on this page, as well as from the core medical and support services entered from your contracts in the GCMS.

Part C Allocation Categories

The screenshot shows a web application interface. On the left is a navigation menu with sections: Reports (Print/Export Report, Action History), Administration (Admin Reports, Admin Tools), and Search (Search Reports). The main content area is titled 'Part C Allocations Categories' and contains a table with the following data:

Service	Base Award	
	Amount	Percent
Core Medical Services		
a. AIDS Drug Assistance Program Treatments	\$0	0.00%
b. AIDS Pharmaceutical Assistance	\$0	0.00%
c. Early Intervention Services (EIS)	\$0	0.00%
d. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	\$0	0.00%
e. Home and Community-Based Health Services	\$0	0.00%
f. Home Health Care	\$0	0.00%
g. Hospice	\$0	0.00%
h. Medical Case Management, including Treatment Adherence Services	\$0	0.00%
i. Medical Nutrition Therapy	\$0	0.00%
j. Mental Health Services	\$0	0.00%
k. Oral Health Care	\$0	0.00%
l. Outpatient/Ambulatory Health Services	\$0	0.00%
m. Substance Abuse Outpatient Care	\$0	0.00%
1. Core Medical Services Subtotal	\$0	0.00%

Scrolling down further on this page, we have the breakdown for your Core Medical Services as you can see listed here. All the information from this table is populated from the GCMS. So, if a value here is missing or needs to be changed, you'll have to make edits to your contracts in the GCMS. Remember, if you make any edits to your contracts in the GCMS you will need to synchronize the changes as previously shown.

Core Medical Services Requirement Waiver Checkbox

Support Services		
a. Child Care Services	\$0	0.00%
b. Emergency Financial Assistance	\$0	0.00%
c. Food Bank/Home Delivered Meals	\$0	0.00%
d. Health Education/Risk Reduction	\$0	0.00%
e. Housing	\$0	0.00%
f. Linguistic Services	\$0	0.00%
g. Medical Transportation	\$0	0.00%
h. Non-Medical Case Management Services	\$0	0.00%
i. Other Professional Services	\$0	0.00%
j. Outreach Services	\$0	0.00%
k. Psychosocial Support Services	\$0	0.00%
l. Referral for Health Care and Support Services	\$0	0.00%
m. Rehabilitation Services	\$0	0.00%
n. Respite Care	\$0	0.00%
o. Substance Abuse Services (residential)	\$0	0.00%
2. Support Services Subtotal	\$0	0.00%
3. Total Service Allocations	\$0	0.00%

Recipient received waiver for 75% core medical services requirement.

Cancel Save

[HAB Policy Notice \(PN\) 21-01, Waiver of the Ryan White HIV/AIDS Program Core Medical Services Expenditure Requirement](#)

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And right below your Core Medical Services are your Support Services. At the bottom of your tables, you will see the checkbox for the 75% core medical services requirement. For more background information on the waiver, I recommend reviewing Policy Notice 21-01 which details the requirements for the waiver and the process of requesting it which I have linked here on the slide. If you have received a waiver for that 75% core medical services requirement, then make sure to select this checkbox at the bottom of the page. If you are unsure if your organization received a waiver for that requirement, please reach out to your project officer for assistance.

Lastly, if you make any changes on this page, be sure to select the Save button at the bottom right.

Now let's review at the Part D Allocations report.

RWHAP Part D Allocations Report

Allocations Report
All fields are required.

Public Burden Statement: OMB Control Number (0915-0318) Valid Until 04/30/2026

Budget Year 3/1/2024-2/28/2025 Award Information

RWHAP Part D Recipient Award Amount

Service	Base Award Amount	Base Award Percentage
Non-services		
a. Clinical Quality Management	<input type="text"/>	57.41%
b. Administrative	<input type="text"/>	42.59%
c. Indirect Costs	<input type="text"/>	0.00%
Non-services Subtotal	\$65,282	100.00%
Client Services		
d. Core Medical Services	\$0	0.00%
e. Support Services	\$0	0.00%
Service Allocation Subtotal	\$0	0.00%
Total Allocations (Service+Non-service)	\$65,282	100.00%

The total amount allocated for Administrative Services cannot exceed 10% of your total award. Additionally Administrative and Indirect Costs combined cannot exceed 10% of your total award

Here we have our Part D Allocations Tables.

Part D recipients will have four editable fields in the Allocations Report section along with the tables for both core medical and support services with information you've entered in the GCMS that has been synchronized into the report. Once all this information has been updated you will save the information on this page before moving onto the next section of the report. First let's go over our four editable fields. Starting at the top we have the Part D Recipient Award Amount which is the total amount of your agency's Part D award indicated on your agency's notice of Award. Next, we have the "Non-services" section, where you will enter the allocated amounts for your agency's Clinical Quality Management, Administrative costs, and indirect costs. Like Part C, the amount for Administrative costs may not exceed 10 percent of your total Ryan White Part D Award. Additionally, Administrative and Indirect Costs combined may not exceed 10 percent of your total Ryan White Part D Award.

Right below the Non-services categories we have our Client Services fields that are not editable, and like part C, these amounts are subtotals that are going to be automatically calculated from values entered from both the editable fields on this page, as well as from the core medical and support services entered from your contracts in the GCMS.

Part D Allocation Categories

Part D Allocations Categories		
Service	Base Award	
	Amount	Percent
Core Medical Services		
a. AIDS Drug Assistance Program Treatments	\$0	0.00%
b. AIDS Pharmaceutical Assistance	\$0	0.00%
c. Early Intervention Services (EIS)	\$0	0.00%
d. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	\$0	0.00%
e. Home and Community-Based Health Services	\$0	0.00%
f. Home Health Care	\$0	0.00%
g. Hospice	\$0	0.00%
h. Medical Case Management, including Treatment Adherence Services	\$0	0.00%
i. Medical Nutrition Therapy	\$0	0.00%
j. Mental Health Services	\$0	0.00%
k. Oral Health Care	\$0	0.00%
l. Outpatient/Ambulatory Health Services	\$0	0.00%
m. Substance Abuse Outpatient Care	\$0	0.00%
1. Core Medical Services Subtotal	\$0	0.00%

Further down on this page, we have the breakdown for your Core Medical Services as shown here. Again, all the information from this table is going to come from the GCMS. So, if a value here is missing or needs to be changed, you'll have to make edits to your contracts in the GCMS. Again, if you make any edits to your contracts in the GCMS you will need to synchronize the changes, so the updates appear in this table.

Part D Allocation Categories: Support Services

Support Services		
a. Child Care Services	\$0	0.00%
b. Emergency Financial Assistance	\$0	0.00%
c. Food Bank/Home Delivered Meals	\$0	0.00%
d. Health Education/Risk Reduction	\$0	0.00%
e. Housing	\$0	0.00%
f. Linguistic Services	\$0	0.00%
g. Medical Transportation	\$0	0.00%
h. Non-Medical Case Management Services	\$0	0.00%
i. Other Professional Services	\$0	0.00%
j. Outreach Services	\$0	0.00%
k. Psychosocial Support Services	\$0	0.00%
l. Referral for Health Care and Support Services	\$0	0.00%
m. Rehabilitation Services	\$0	0.00%
n. Respite Care	\$0	0.00%
o. Substance Abuse Services (residential)	\$0	0.00%
2. Support Services Subtotal	\$0	0.00%
3. Total Service Allocations	\$0	0.00%

Cancel

Save

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And right below our Core Medical services we have our Support Services. Remember, if you make any changes, be sure to scroll down to the bottom of the page and select the Save button on the right.

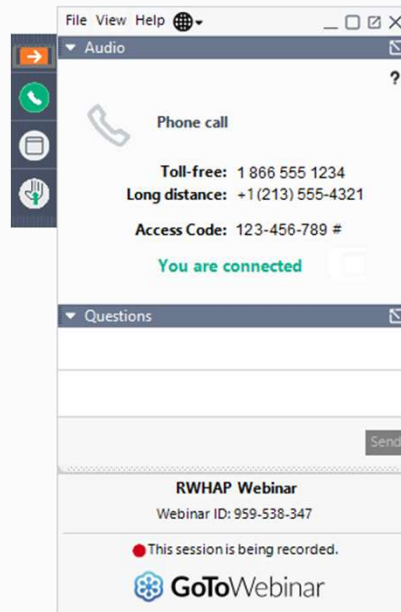
Now that we have gone through each section of the Allocations report, lets answer any questions you may have about your Ryan White Allocations Report submission.

Questions?

Please use the raise hand function to speak. We will unmute you in the order that you appear.

OR

Type your question in the question box.



RWHAP Part C & D Expenditures Reports



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We're now going to cover how to complete the Ryan White HIV/AIDS Program Part C and Part D Expenditures Reports.

Session Outline

- ➔ Overview
- ➔ Completing the Parts C and D Expenditures Reports
- ➔ Validating and Submitting the Allocations and Expenditures Reports
- ➔ Technical Assistance Resources
- ➔ Question and Answer Session

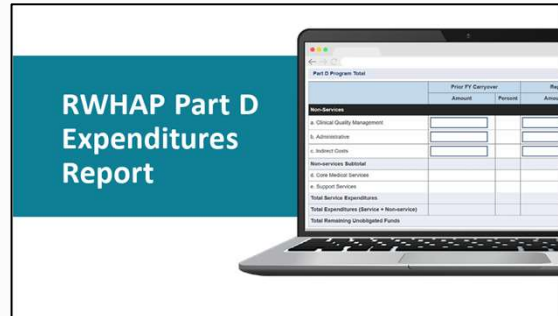
37 37

I will start with an overview of the Part C and D Expenditures Reports before moving on to completing the Parts C and D Expenditures Reports. I'll then review the process for validating and submitting both the Allocations and Expenditures Reports. Next, I will go over the technical assistance resources available to you. Finally, we'll wrap up today's presentation with another Q&A session.

Expenditures Report Instruction Manuals



Available [here](#) on the TargetHIV website



Available [here](#) on the TargetHIV website

I want to mention that the Part C and Part D Expenditures Report instruction manuals will be available on the TargetHIV website soon. The links are provided here on the slide. These manuals are an excellent resource to have while completing the Expenditures reports; therefore, I highly recommend downloading them once they are available.

RWHAP Parts C & D Expenditures Reports Overview



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Let's start by going through a quick overview of the Parts C & D Expenditures Reports.

Expenditures Report Overview



- All RWHAP Part C (H76) and RWHAP Part D (H12) grant recipients are required to submit an Expenditures Report
- Serves as a reference for how recipients expended RWHAP funds during FY23
- Accessed and submitted via the HRSA Electronic Handbooks (EHBs)

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All Part C (H76) and Part D (H12) recipients must complete an Expenditures Report. The expenditures report serves as a reference for how recipients expended their grant funding for the fiscal year. The current report is for FY23.

Just like the Allocations Report, the Expenditures Report is also accessed and completed via the EHBs.

Expenditures Report Due Dates



- Part C and D recipients must submit no later than 90 days after the budget period end date listed on the Notice of Award (NoA).
- NoA questions can be directed to your Division of Community HIV/AIDS Programs (DCHAP) project officer.

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RWHAP Part C and Part D recipients must submit their Expenditures Report in the HRSA EHBs no later than 90 days after the budget period end date listed on their Notice of Award (NoA).

The Part C Expenditures Report for FY 23 is currently open in the system. The Part D Expenditures Report is not yet open.

If you have questions on your NoA, please contact your Division of Community HIV/AIDS Programs (DCHAP) project officer.

Expenditures Report Navigation Panel

Use the Navigation panel on the left side of the screen to navigate throughout the report and complete all report actions

The screenshot shows a vertical navigation menu on the left side of a web application. The menu is titled 'NAVIGATION' and contains several expandable sections: 'Inbox' (with a sub-link 'Expenditures Report Inbox'), 'Manage Contracts' (with a sub-link 'Search Contracts'), 'Navigation' (with sub-links 'Recipient Information', 'File Upload', and 'Expenditures Report'), 'References' (with sub-links 'Validation Rules' and 'Guidance'), 'Actions' (with sub-links 'Validate' and 'Submit'), 'Comments' (with sub-links 'Add Comments' and 'View Comments'), 'Reports' (with sub-links 'Print/Export Expenditures Report' and 'Action History'), 'Administration' (with a sub-link 'Print Requests'), and 'Search' (with a sub-link 'Search Reports').

Five callout boxes point to specific items in the menu:

- A grey box points to 'Expenditures Report Inbox' with the text: **Navigate to the Expenditures Report Inbox**
- A dark blue box points to 'Search Contracts' with the text: **Navigate to the GCMS**
- A teal box points to the 'Navigation' section with the text: **Access the various sections of the Expenditures Report**
- A teal box points to 'Validation Rules' with the text: **Access the Validation Rules document**
- A yellow box points to 'Validate' with the text: **Validate and submit the Expenditures Report**

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I'd like to briefly go over the Navigation panel as it is essential for getting around the various sections of the Expenditures Report. You can get back to the Expenditures Report Inbox up here at the top. Now, the Expenditures Report doesn't utilize the contracts in the GCMS but you can still go look at your contracts at any time in the Expenditures Report system by using this "Search Contract" link.

Use the options here to get to any of the report sections. You can view the validation rules and instructions documents using the links in this section. And then you'll validate and submit the Expenditures Report using these two options.

Expenditures Report Sections

Adding/Editing contracts in the GCMS is not required.

1. Recipient Information

- Includes general information about the organization

2. File Upload

- No files are required

3. Expenditures Report

- Breakdown of funding expended by service category

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Unlike the Allocations Report, the Expenditures Report comprises three sections. You'll notice that the Expenditures Report does not have a CLC section. Therefore, again, adding/editing contracts in the GCMS isn't required for the Expenditures Report submission like it is for the Allocations Report. All data entry is done directly within the report.

The Expenditures Report begins with the Recipient Information section, which includes general information about your organization.

Next is the File Upload section. There are no required files to be uploaded for Part C or Part D recipients.

And lastly, there is the Expenditures Report section. This section includes a breakdown of the funding expenditures during the budget period by service category.


Completing the RWHAP Parts C & D Expenditures Reports

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The first two sections of the Expenditures Report, the Recipient Information and the File Upload sections, are identical for both Parts C & D. I'm going to review these steps first. Then I'll go through the last section, the Expenditures Report Section, separately.

Expenditures Report

NAVIGATION << Expenditures Report Inbox Your session will expire in: 29:32

#	Report ID	Submission	Name	Grant Number	Budget Year	Modified Date	Status	Action	Comments	Action History
1	0	Expenditures Report	Lagoon Beach Clinic	H76HA00000	01/01/2023 - 12/31/2023			 Create		

For help with EHBs contact the HRSA Help Desk by phone at 1-877-Go4-HRSA (1-877-464-4772) Monday through Friday, 8:00 a.m. to 8:00 p.m. Eastern Time. Or use the HRSA Electronic Handbooks Contact Center help request form to submit your question online.
For questions regarding data content and/or reporting requirements, please contact Data Support at 1-888-640-9356 or email to RyanWhiteDataSupport@wrma.com

Logged in as: GranteeDataViewer, GranteeDataEditor, GranteeDataSubmitter
The HAB Web Applications also require Adobe Acrobat Reader 5 or higher installed on your PC. To download Adobe Acrobat Reader, click 

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To access the Expenditures Report, you will follow the same steps Richard demonstrated for the Allocations Report. However, rather than selecting the 2024 Allocations Report submission from the Submissions-All Page, you will select the FY 2023 Expenditures Report Submission. Once you do, you will be navigated to the Expenditures Report inbox (pictured here), where you will see your Expenditures Report listed.

Again, although you see a Part C grant listed in the screenshot, the steps I'm going over apply to Part D as well.

Before we select the envelope icon, I want to emphasize that although you can see the Search Contracts link in the navigation panel on the left, you do not need to make any updates to contracts for the Expenditures Report.

To open the report, click on the envelope icon.

Recipient Information (cont.)

The screenshot displays a web application interface for an Expenditures Report. On the left is a navigation sidebar with categories like 'Inbox', 'Manage Contracts', 'Navigation', 'References', 'Actions', 'Comments', 'Reports', and 'Administration'. The 'Recipient Information' link in the 'Navigation' section is highlighted with a red box. The main content area is titled 'Expenditures Report' and shows details for 'H76HA00000 : Lagoon Beach Clinic'. Below this, there is a 'Recipient Information' section with a warning note and two numbered sections: '1. Official Mailing Address' and '2. Organization Identification'. Each section contains four fields with asterisks indicating they are required.

Field	Value
1. a. Street	123 Sesame Street
1. b. City	City
1. c. State	ST
1. d. Zip Code	12345
2. a. EIN	123456789
2. b. UEI	AB1C2DEF34GH

After clicking on the envelope icon, you will be navigated to the Recipient Information section. Just like the Allocations Report, the information listed on this page includes the official mailing address and the organization identification information.

Recipient Information (cont.)

The screenshot shows a web form titled "Recipient Information (cont.)". On the left is a navigation sidebar with "Action History" at the top, followed by "Administration" (with a dropdown arrow), "Print Requests" (with a printer icon), "Search" (with a dropdown arrow), and "Search Reports" (with a magnifying glass icon). The main form area contains the following fields:

- a. EIN: 123456789
- b. UEI: AB1C2DEF34GH
- 3. Contact information of person responsible for this submission:
 - * a. Name: Patrick Star
 - b. Title: Project Director
 - * c. Phone: (000) 000 - 0000
 - d. Fax: (000) 000 - 0000
 - * e. E-mail: pstar@lagoonclinic.org

At the bottom of the form are two buttons: "Cancel" on the left and "Save" on the right. The "Save" button is highlighted with a red rectangular box. The page number "47" is located in the bottom right corner of the page.

Moving down the page, also included is this section is the contact information of the person responsible for the submission. This information populates from the information listed in the HRSA EHBs.

Please review the information listed for accuracy. Once you have verified the information, please click on save to move on to the next section.

File Upload

NAVIGATION << Expenditures Report Your session will expire in: 29:54

▼ H76HA00000 : Lagoon Beach Clinic

Report ID: 123456 Status: Working Due Date: 4/30/2024 11:59:58 PM
Budget Year: 1/1/2023 - 12/31/2023 Last Modified Date: 3/18/2024 3:33:57 PM Last Modified By: pstar@lagoonclinic.org
Access Mode: ReadWrite UEI: AB1C2DEF34GH

File Upload

Document Name	Description	Action
No records to display.		

Submission Components

To upload a primary component of your report, select the "Upload" link in the Action column. If you would like to submit a supplemental document to complete your submission, select the "Upload Supplemental Document" button below. Please note that you will be unable to upload files larger than 29MB.
[Create Compressed Zip File](#)

No records to display.

[Upload Supplemental Document](#)

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The next section is the File Upload section. As previously mentioned, there are no required uploads for this report; however, if your project officer specifically requests that you upload a document, you can do so by clicking on the Upload Supplemental Document link. Locate and select the supplemental documentation saved on your computer and upload it to your report.

Completing the RWHAP Part C Expenditures Report Section

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Now I'm going to go over the third section of the report – the Expenditures Section. I'll cover the Part C Expenditures Report Section first and then move on to reviewing the steps for completing the Part D Expenditures Section.

Part C Award Information

NAVIGATION << Expenditures Report Your session will expire in: 29:48

H76HA00000 : Lagoon Beach Clinic

Report ID: 123456 Status: Working Due Date: 4/30/2024 11:59:58 PM
 Budget Year: 1/1/2023 - 12/31/2023 Last Modified Date: 3/18/2024 7:53:14 AM Last Modified By: pstar@lagoonclinic.org
 Access Mode: ReadWrite UEI: AB1C2DEF34GH

Expenditures Report

Fill in the data for all fields in the form. If there are no data to be reported for a particular field, fill in with a zero. After completing the form, click the Save button to view the calculated totals.

Budget Year 01/01/2023 - 12/31/2023 Award Information

RWHAP Part C Recipient Award Amount:

RWHAP Part C Approved Carryover Amount:

Part C Program Total:

	Prior FY Carryover		Reporting FY		Total	
	Amount	Percent	Amount	Percent	Amount	Percent
Non-Services						
a. Clinical Quality Management	<input type="text"/>		<input type="text"/>			
b. Administrative	<input type="text"/>		<input type="text"/>			
Non-services Subtotal						
c. Core Medical Services						

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Please note that the data entry for this report is completed entirely in the Expenditures Report section. All the fields require a response, so if you have no expenditures to report, enter a zero.

The Part C Expenditures Section includes three components: Award Information, Part C Program Total, and Part C Expenditure Categories.

As shown on the screen you will begin with the award information, where you will enter the total amount for your RWHAP Part C Recipient Award Amount and RWHAP Part C Approved Carryover Amount.

Both the Part C Recipient Award Amount and the Part C Approved Carryover Amount are indicated on your agency's final NoA.

Part C Program Total

Part C Program Total						
	Prior FY Carryover		Reporting FY		Total	
	Amount	Percent	Amount	Percent	Amount	Percent
Non-Services						
a. Clinical Quality Management	<input type="text"/>		<input type="text"/>			
b. Administrative	<input type="text"/>		<input type="text"/>			
Non-services Subtotal						
c. Core Medical Services						
d. Support Services						
Total Service Expenditures						
Total Expenditures (Service + Non-service)						
Total Remaining Unobligated Funds						
Part C Expenditure Categories						
	Prior FY Carryover		Reporting FY		Total	
	Amount	Percent	Amount	Percent	Amount	Percent
Core Medical Services						
a. AIDS Drug Assistance Program Treatments	<input type="text"/>		<input type="text"/>			

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The next component of the Part C Expenditures Report Section is Part C Program total. Here you will enter the amount expended for the listed non-services including Clinical Quality Management and Administrative using the two funding source columns shown which are Prior FY Carryover and Reporting FY. There are four editable fields that must be completed.

Also, please note that the non-editable fields included in the Part C Program Total which are currently greyed out are automatically calculated once you save the Expenditures Report section.

Part C Expenditure Categories

Part C Expenditure Categories						
	Prior FY Carryover		Reporting FY		Total	
	Amount	Percent	Amount	Percent	Amount	Percent
Core Medical Services						
a. AIDS Drug Assistance Program Treatments						
b. AIDS Pharmaceutical Assistance						
c. Early Intervention Services (EIS)						
d. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals						
e. Home and Community-Based Health Services						
f. Home Health Care						
g. Hospice						
h. Medical Case Management, including Treatment Adherence Services						
i. Medical Nutrition Therapy						
j. Mental Health Services						
k. Oral Health Care						
l. Outpatient/Ambulatory Health Services						
m. Substance Abuse Outpatient Care						
1. Core Medical Services Subtotal						
Support Services						
a. Child Care Services						
b. Emergency Financial Assistance						

The third component of the Expenditures Report Section is the Part C Expenditure Categories. This section is split into two parts: core medical and support services. Each row lists a different service category. You will enter the amount expended towards each service category under each funding source columns, which are Prior FY Carryover and Reporting FY.

In each Prior FY Carryover field, enter the approved amount of the Part C award carryover from the previous year that was expended to support that service category in the current budget year.

In each Reporting FY field, enter the amount of your agency's Part C award that was expended to support that service category.

Core Medical Services Requirement Waiver

g. Medical Transportation	<input type="text"/>		<input type="text"/>			
h. Non-Medical Case Management Services	<input type="text"/>		<input type="text"/>			
i. Other Professional Services	<input type="text"/>		<input type="text"/>			
j. Outreach Services	<input type="text"/>		<input type="text"/>			
k. Psychosocial Support Services	<input type="text"/>		<input type="text"/>			
l. Referral for Health Care and Support Services	<input type="text"/>		<input type="text"/>			
m. Rehabilitation Services	<input type="text"/>		<input type="text"/>			
n. Respite Care	<input type="text"/>		<input type="text"/>			
o. Substance Abuse Services (residential)	<input type="text"/>		<input type="text"/>			
2. Support Services Subtotal						
3. Total Service Expenditures						

Recipient received waiver for 75% core medical services requirement.

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Below the Part C Expenditure Categories is the checkbox for the 75% core medical services requirement. At least 75 percent of your total award (minus funding expended on recipient administration and clinical quality management) must be expended on core medical services. If you received a waiver for the 75% core medical services requirement for your report, then make sure to select this checkbox at the bottom of the page.

If you are unsure if your organization received a waiver for that requirement, please reach out to your project officer for assistance.

Part C Legislative Requirements

Legislative Requirements Checklist

At least 75% of your total award (less CQM and Administrative) must be spent on core medical services.

When reporting Core Medical Services expenditures, the Total in Section C, Row 1, Column F of the Expenditure Report which includes carryover dollars, must meet the 75% minimum requirement. The exception to this requirement is only for those recipients that requested, and were approved by HRSA, for a Part C Core Medical Services Waiver.

To the right is the percentage of your Current Fiscal Year Core Medical Services expenditures divided by your Total Part C Award less the CQM and Administrative expenditures. Please check to make sure this percentage is 75% or greater.

Clinical Quality Management expenditures should be reasonable.

To the right is your total CQM Expenditures which includes carryover dollars. Please check to make sure your CQM Expenditures are reasonable.

No more than 10% of your total award can be spent on Administrative.

When reporting Administrative expenses, the total (carryover included) must be 10% or less than the award amount.

Below is the maximum (Capped Amount) you can spend on Administrative (Part C Grant Award Amount * .10) as well as your Total Administrative expenditures which includes carryover dollars. Please check to make sure your Administrative expenditures do not exceed your Capped Amount.

Expenditures	Amount
Capped Amount	
Admin Expenditures	

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If we scroll to the bottom of the screen, under the Part C Expenditure Categories, there is a legislative requirement checklist that you can use to make sure that you are meeting various legislative requirements. The information in this checklist is calculated from the data you entered in the Expenditures Report section. As shown, the legislative requirements that can be checked include 75% of the total award being spent on core medical services, ensuring that clinical quality management expenditures are reasonable and that no more than 10% of the total award is spent on administrative expenses.

The information listed in the table automatically populates once the expenditures report section has been saved, so please make sure to click on save once you have completed all the required components of the Part C Expenditures Report.

Completing the RWHAP Part D Expenditures Report Section

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Switching gears, we're now going to go over the instructions for the Expenditures Report Section of the Part D Expenditures Report.

Part D Award Information

NAVIGATION <<

- Inbox >
- Expenditures Report Inbox >
- Manage Contracts >
- Search Contracts >
- Navigation >
- Recipient Information >
- File Upload >
- Expenditures Report >
- References >
- Validation Rules >
- Guidance >
- Actions >
- Validate >
- Submit >
- Comments >
- Add Comments >
- View Comments >
- Reports >
- Print/Export Expenditures Report >

Expenditures Report Your session will expire in: 29:40

▼ H12HA00000 : Lagoon Beach Clinic

Report ID: 123456	Status: Working	Due Date: 10/30/2024 11:59:58 PM
Budget Year: 8/1/2023 - 7/31/2024	Last Modified Date: 8/18/2024 7:50:50 AM	Last Modified By: pstar@lagoonclinic.org
Access Mode: ReadWrite	UEI: AB1C2DEF34GH	

Expenditures Report

Fill in the data for all fields in the form. If there are no data to be reported for a particular field, fill in with a zero. After completing the form, click the Save button to view the calculated totals.

Budget Year 08/01/2023 - 07/31/2024 Award Information

RWHAP Part D Recipient Award Amount:

RWHAP Part D Approved Carryover Amount:

Part D Program Total:

	Prior FY Carryover		Reporting FY		Total	
	Amount	Percent	Amount	Percent	Amount	Percent
Non-Services						
a. Clinical Quality Management	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>
b. Administrative	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>	<input style="width: 80px;" type="text"/>

The Part D Expenditures Report Section also includes three components, beginning with the Award information which includes RWHAP Part D Recipient Award Amount and RWHAP Part D Approved Carryover Amount.

Both the Part D Recipient Award Amount and the Part C Approved Carryover Amount are indicated on your agency's final NoA.

Part D Program Total

Part D Program Total						
	Prior FY Carryover		Reporting FY		Total	
	Amount	Percent	Amount	Percent	Amount	Percent
Non-Services						
a. Clinical Quality Management	<input type="text"/>		<input type="text"/>			
b. Administrative	<input type="text"/>		<input type="text"/>			
c. Indirect Costs	<input type="text"/>		<input type="text"/>			
Non-services Subtotal						
d. Core Medical Services						
e. Support Services						
Total Service Expenditures						
Total Expenditures (Service + Non-service)						
Total Remaining Unobligated Funds						

The next component is the Part D Program Total. Here you will enter the amount expended for the non-services including clinical quality management, administrative, and indirect costs under the funding source columns Prior FY Carryover & Reporting FY. There are six editable fields that must be completed.

Just like for the Part C Expenditures Report, the non-editable fields which are currently greyed out will automatically populate once the report has been saved. As a reminder, all editable fields require a response, so if you have no expenditures to report, enter a zero.

Part D Expenditure Categories

Part D Expenditure Categories						
	Prior FY Carryover		Reporting FY		Total	
	Amount	Percent	Amount	Percent	Amount	Percent
Core Medical Services						
a. AIDS Drug Assistance Program Treatments	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. AIDS Pharmaceutical Assistance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
c. Early Intervention Services (EIS)						
d. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
e. Home and Community-Based Health Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
f. Home Health Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. Hospice	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
h. Medical Case Management, including Treatment Adherence Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
i. Medical Nutrition Therapy	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
j. Mental Health Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
k. Oral Health Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
l. Outpatient/Ambulatory Health Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
m. Substance Abuse Outpatient Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
1. Core Medical Services Subtotal						
Support Services						

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Moving down the page, we have the Part D Expenditure Categories section which, like the Part C report, are split into two parts: core medical and support services. Each row lists a different service category. There are two columns containing editable fields: Prior FY Carryover and Reporting FY. Each column contains fields for you to enter your agency's expenditures toward each service category.

For the Prior FY carryover column, you will enter the approved amount of RWHAP Part D award carryover from the previous year that was expended to support that service category in the current budget year.

In each Reporting FY field, enter the amount of your agency's Part D award that was expended to support that service category.

Please note that EIS is not an allowable service category for Part D recipients. Therefore, this row is blocked out.

Part D Legislative Requirements

Legislative Requirements Checklist

Clinical Quality Management expenditures should be reasonable.

To the right is your total CQM Expenditures which includes carryover dollars. Please check to make sure your CQM Expenditures are reasonable.

No more than 10% of your total award can be spent on Administrative.

When reporting Administrative expenses, the total (carryover included) must be 10% or less than the award amount.

Below is the maximum (Capped Amount) you can spend on Administrative (Part D Grant Award Amount * .10) as well as your Total Administrative expenditures which includes carryover dollars. Please check to make sure your Administrative expenditures do not exceed your Capped Amount. Note that Indirect Costs are included as part of the Administrative cap.

Expenditures	Amount
Capped Amount	
Admin Expenditures	

Cancel

Save

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Continuing along, under the Part D Expenditure Categories, there is a legislative requirement checklist that you can use to make sure that you are meeting various legislative requirements. The information in this checklist is calculated from the data you entered in the Expenditures Report section. As shown, the legislative requirements that can be checked include ensuring that clinical quality management expenditures are reasonable and that no more than 10% of the total award is spent on administrative expenses.

As a reminder, the information listed in the table automatically populates once the expenditures report section has been saved, so please make sure to click on save once you have completed all the required components of the Part D Expenditures Report.

Validating and Submitting the RWHAP Parts C & D Allocations and Expenditures Reports

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Next, we'll go over the instructions for validating and submitting the Parts C & D Allocations and Expenditures Reports.

Validating Your Report

The screenshot displays the 'Allocations Report' interface for 'H76HA00000: Lagoon Beach Clinic'. The main content area shows a message: 'Your validation request has been scheduled. It may take several minutes to generate the report.' Below this is a note: 'NOTE: You must refresh this page to display your results.' The left navigation panel has a red box around the 'Validate' button. The 'Actions' section also contains a 'Submit' button. The bottom of the interface shows the user is logged in as 'GranteeDataViewer, GranteeDataEditor, GranteeDataSubmitter' and provides contact information for HRSA Help Desk and Data Support.

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Submission of both the Allocations and Expenditures Reports require that the information in the reports pass through a series of validation checks. These validation checks look for consistency and accuracy of the information contained in your report(s). Unique numbers are assigned to each report validation so they can be easily identified.

Again, the process for validating your report is the exact same for both the Allocations and Expenditures Reports, but we're just going to walk through it once in the interest of time. The screenshots you see here are going to be from the Allocations (PTR) system but it's the same for Expenditures.

To validate your report, we'll start by selecting "Validate" in the Navigation panel on the left side of the screen.

You'll see a message like this letting you know the validation is processing. Simply wait a few minutes and refresh the page by selecting "Validate" again until you see your results. You can also use the F5 key to refresh the page.

Validation Results: Congratulations Message

The screenshot displays a web application interface for an Allocations Report. On the left is a navigation sidebar with sections: NAVIGATION, Search, Inbox (with PTR/Allocations Report and Inbox sub-items), Manage Contracts, Navigation (with Recipient Information, File Upload, CLC Report, and Allocations Report sub-items), References, and Actions (with Validate and Submit sub-items). The main content area is titled 'Allocations Report' and shows details for 'H76HA00000: Lagoon Beach Clinic'. A table lists report metadata: Report ID: 12345, Status: Working, Due Date: 5/31/2024 5:59 PM, Budget Year: 3/1/2024-2/28/2025, Last Modified Date: 5/18/2024 11:00:22 AM, Last Modified By: Pstar@tbcclinic.org, and Access Mode: ReadWrite. Below this, a green message states: 'Congratulations! No errors, warnings, or alerts were found in your report.' Further down, there is contact information for HRSA Help Desk and Data Support. At the bottom, it shows the user is logged in as 'GranteeDataViewer, GranteeDataEditor, GranteeDataSubmitter' and includes a note about Adobe Acrobat Reader.

Report ID: 12345	Status: Working	Due Date: 5/31/2024 5:59 PM
Budget Year: 3/1/2024-2/28/2025	Last Modified Date: 5/18/2024 11:00:22 AM	Last Modified By: Pstar@tbcclinic.org
Access Mode: ReadWrite	UEI: ABCDEFGHIJKLMN	

Message: Congratulations! No errors, warnings, or alerts were found in your report.

Logged in as: GranteeDataViewer, GranteeDataEditor, GranteeDataSubmitter

If you see a green congratulations message, then you're ready to go ahead and move on to submitting your report. This message means that there are no validations to address.

Validation Results

Validation Results

You must fix all errors in your report before you can submit your data. Please fix all warnings as appropriate. For the warnings that you cannot or should not fix, enter a warning comment before you submit your data. To enter warning comments for a specific check, select the "Add Comment" link located in the Action column of the validation results table(s). Contact the help desk if you have questions about any of the validation errors, warnings, or alerts.

Recipient Information

Row No.	Check No.	Message	Type	Comment Count	Action
1	3	Recipient Information page: Title is missing	Alert	0	

Required Documents

Row No.	Check No.	Message	Type	Comment Count	Action
No report validation errors found.					

Consolidated List of Contractors

Row No.	Check No.	Message	Type	Comment Count	Action
1	29	At least one contract with at least one service must be specified. To correct this issue, please add a contract in the GCMS and/or synchronize contracts into your report.	Error	0	

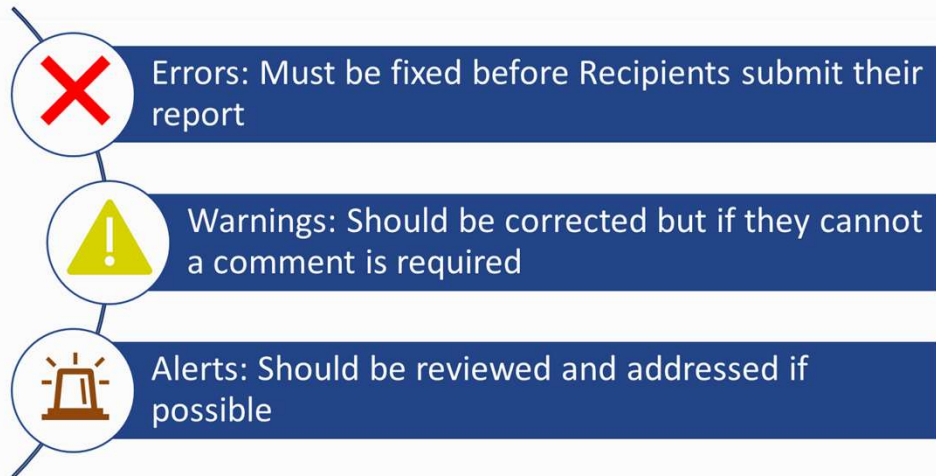
Allocations Report

Row No.	Check No.	Message	Type	Comment Count	Action
No report validation errors found.					

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However, let's go over what happens if you receive validation messages as displayed here on this slide. I'll review the different types of validation messages you could receive and how to address them.

Validation Categories



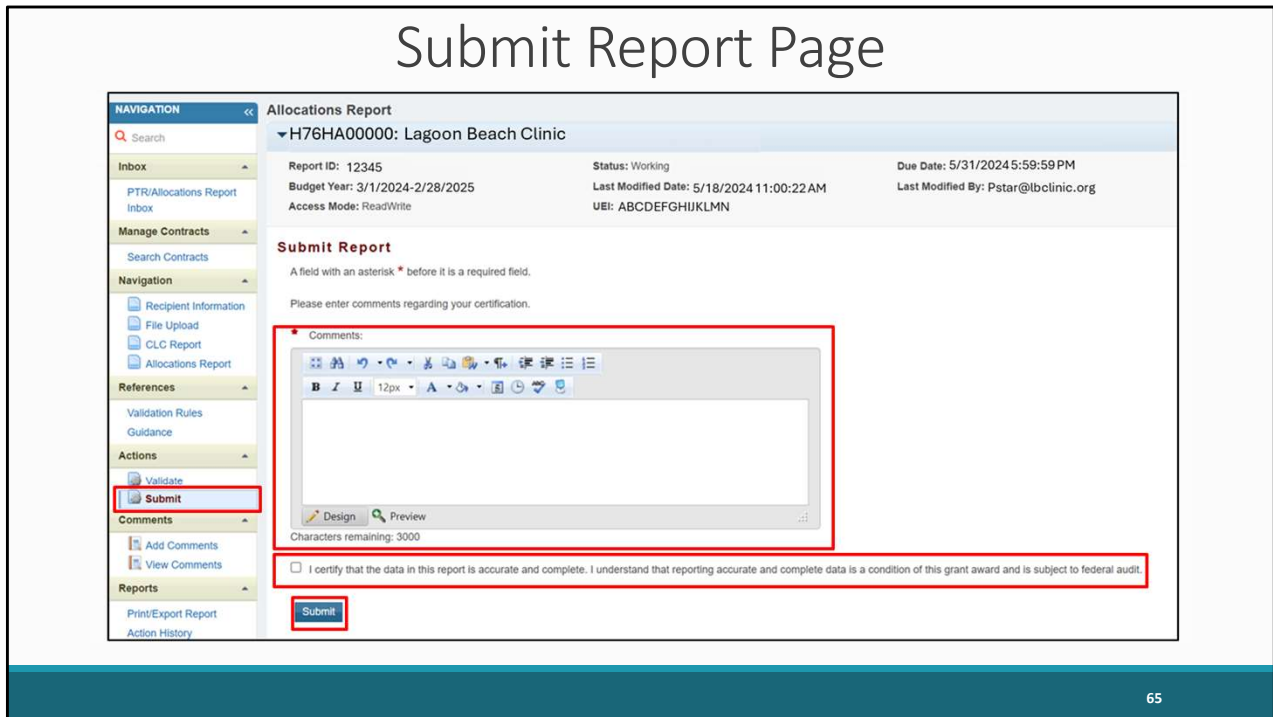
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The 3 validation types that may show up in your validation report are Errors, Warnings, and Alerts. Errors must be fixed before a recipient submits their report. Warnings are validations that should be corrected, but if they cannot, then a comment will be required. And lastly, alerts should be reviewed and corrected, if possible, but you may still submit your report with an alert.

If you make changes to your report in response to your validation results, you'll need to validate your report again before submitting. Just click the "Validate" link in the left Navigation panel to start the validation process again.

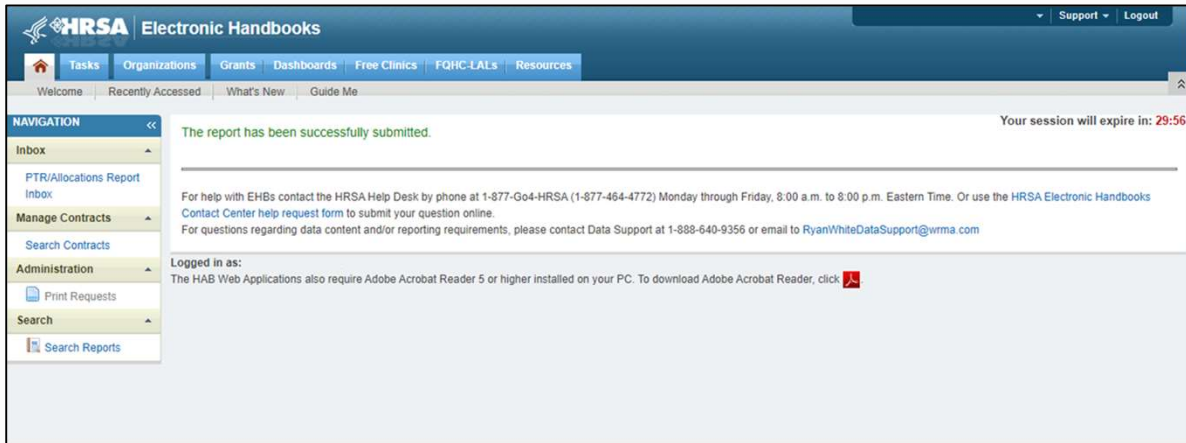
Once you've completed the report and addressed all the validations (if necessary), you're ready to submit the report.

Submit Report Page



To submit your report, first click on the submit link in the left navigation panel. Next, enter a comment with any meaningful feedback you have about the submission process. Next, select the checkbox certifying that the data in the report are accurate and complete. Finally, click the "Submit" button at the bottom of the page.

Report Successfully Submitted



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If everything submitted successfully, you'll see this green success message meaning your report is now ready to be reviewed by your project officer. Make sure to keep in touch with your project officer though just in case they return your report back to you for any changes. If that does happen, use the instructions detailed in this presentation to make any necessary changes and resubmit your report.

Technical Assistance Resources

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Before we get to your questions, let's wrap up the presentation by going over the technical assistance resources available to you.

Online Resources



The image shows two logos side-by-side. On the left is the TargetHIV logo, with 'Target' in blue and 'HIV' in purple. On the right is the HRSA logo, featuring a red ribbon icon, the letters 'HRSA' in large blue font, and 'Ryan White HIV/AIDS Program' in smaller red font below it.

[TargetHIV Website](#)

- [Part C Expenditures Report Instruction Manual](#)
- [Part D Expenditures Report Instruction Manual](#)

[HRSA HAB Website](#)

- [PCN #16-02](#)

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Here are some online resources available to assist you while completing the Expenditures Report including the Part C & D Expenditures Report Instruction Manuals which, as previously mentioned, will be posted soon on TargetHIV. The TargetHIV website contains additional resources on the RWHAP and data reporting. Also, listed on the slide is the link for the HRSA HAB website along with #PCN 16-02 which includes some very helpful definitions for core medical and support services.

TA Resources

- RWHAP Data Support
 - 888-640-9356
 - RyanWhiteDataSupport@wrma.com
- EHBs Customer Support Center
 - 877-464-4772
 - [Online TA Request](#)



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Listed here are TA resources available to assist you while completing the both the Expenditures Report and the Allocations Report. Please reach out to Ryan White Data Support if you need any assistance with navigating to and completing the Expenditures or Allocations Report.

Also, I recommend reaching out to the EHBs Customer Support Center if you need assistance with your EHBs account, like registering, resetting your password, or requesting permissions.

RWHAP Technical Assistance Resources

- The [RWHAP TA Resources Brochure](#) features information on each RWHAP technical assistance provider, including:
 - RWHAP reports they support
 - Questions they frequently respond to
 - Contact information



This is our RWHAP Technical Assistance Resources Brochure. This document lists the many technical assistance resources available to help you. It outlines information about each technical assistance provider, including the reports they support, frequently asked questions they respond to, and their best contact information. You can find this resource on the TargetHIV website.

Most importantly, please don't forget that there is no wrong door for TA – if we can't assist you, we're happy to refer you to someone who can!

Connect with HRSA

Learn more about our agency at:

www.HRSA.gov

 [Sign up for the HRSA eNews](#)

FOLLOW US:



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Finally, to connect with and find out more about HRSA, check out HRSA.gov.

I'd like to take a moment to thank everyone for joining us on today's presentation.

I will now turn it back over for the Q&A portion of the webinar.

Questions?

Please use the raise hand function to speak. We will unmute you in the order that you appear.

OR

Type your question in the question box.

