





DC EMA CAREWare Centralized Eligibility System

# User Guide Version 2022



HIV/AIDS, Hepatitis, STD, and TB Administration



## HIV, AIDS, Hepatitis, STD and TB Administration Care and Treatment Division

DC EMA CAREWare Centralized Eligibility System User Guide 2022

# Contents How Does Centralized Eligibility Work?......1 What Are the Benefits of Centralized Eligibility?......1 Link Actions When Attaching/Uploading Documents ...... 10 Types of Eligibility Documents for Upload...... 10 Uploading Release of Information Documentation......14

#### What is Centralized Eligibility?

DC EMA CAREWare (CW) Centralized Eligibility (CE) is a system whereby network providers can upload and access Ryan White services eligibility fields and documentation for shared clients. Eligibility records and supporting documents will be viewable across providers of shared clients.

#### How Does Centralized Eligibility Work?

For CE to work, every provider must have Provider-by-Provider Sharing enabled in the system. These pre-configured permissions are centrally managed by HAHSTA. The success of the CE system is dependent on the accuracy of client records across all DC EMA CAREWare domains to include the proactive prevention, identification, and reconciliation of duplicate clients in the system. CAREWare has functionality to check for possible duplicates. As such, it is crucial to properly review customer information when possible duplicate flagging occurs prior to marking a client as new.

#### What Are the Benefits of Centralized Eligibility?

This functionality will reduce the burden of <u>Ryan White eligibility determination and recertification</u> <u>requirements (PCN 21-02)</u> for the customers and providers. CE also enables Program Officers and authorized HAHSTA staff to review service eligibility information and documents remotely using CAREWare.

#### Data-Sharing in CAREWare

Providers have the option of sharing services, clinical data, case notes, custom sub-forms, appointments, form designer records, and eligibility status records with other network providers. Sharing data with other providers, who have a need-to-know specific information about clients they also serve, has many advantages:

- Comprehensive picture of a client's needs, services rendered, and gaps in care.
- Cutdown on or avoid duplicate testing and service delivery.
- Identify potentially dangerous medication interactions.
- Provide better continuity of care.

Sharing data can be limited to individual clients, individual providers, to specific data types (such as services or case notes) and to date ranges. Client-by-Client Sharing sets sharing to specific clients and

supports agreements with expiration dates. Provider-by-Provider Sharing establishes which other providers can view the shared data (this task will be performed centrally by HAHSTA). Currently, Provider sharing across DC EMA CAREWare network is activated only for eligibility status and documents.

#### Eligibility Record Sharing

When a client's eligibility status changes from eligible to not eligible (or vice versa) their Eligibility History must be manually updated for each Ryan White Part for which your program receives funding. Note: If a client receives services at more than one Care and Treatment funded provider, all information on the Annual Review screen can be seen and edited by staff at either/every provider providing services to that client. However, information in the Eligibility tab can be viewed by providers sharing the client but can only be modified or edited by providers which initially created them.

#### Expanded Eligibility Record Fields

Originally, the Demographic/Eligibility tab had the following fields: Eligibility date, Is Eligible (Yes or No Options), Funding Source (Part A, Part B, MAI, etc.) and a Comment box. The Demographic/Eligibility tab has now been expanded to include the following custom fields in addition to the original fields: Proof of HIV Status, Proof of HIV Status Documentation, Proof of Income, Proof of Income Documentation, Proof of Residency, Proof of Residency Documentation, Proof of Insurance, Proof of Insurance Documentation, Eligibility Expiration Date, Consent to Share Eligibility Information, Release of Information Form, Name of Staff Collecting Eligibility.

Add			
	Eligibility Date:	02/22/2022	Existing fields
	Is Eligible:		
	Funding Source:		
	Proof of HIV Status:	•	
Proof	f of HIV Status Documentation:	O Attachments (Access in view mode only)	
	Proof of Income:		
Proof of Inc	come Required Docomentation:	0 Attachments (Access in view mode only)	Newly added
	Proof of Residency:	•	fields
Proof of Reside	ency Required Documentation:	0 Attachments (Access in view mode only)	neids
	Proof of Insurance:		
Proof of Insura	ance Required Documentation:	0 Attachments (Access in view mode only)	
	Eligibility expiration Date:		
Consented to share	eligibility information and doc:		±
	Release of information form:	0 Attachments (Access in view mode only)	
	Eligibility Staff Name:		
	Comment:		
			Existing field

#### Figure 1. Screenshot of Eligibility tab in CAREWare

#### Adding an Eligibility Record

To add eligibility records to a client's CAREWare account, click on "Find Client" options from the menu.



A "Find Client" search box will appear. You may search clients by Last Name, Fist Name, Preferred Name, DOB, Client ID, URN or EURN and Encrypted UCI. In this case, we are using the client's Last name. The full name we are looking for is Centralized, Eligibility. Start by typing the first few letters of the Last Name and hit "Client Search." If you want the search to include inactive clients, uncheck the "Active Only" checkbox.

Find Clie	nt		
Last Name:	center		
First Name:			
Preferred Name:	Č		
DOB:		11 A A A A A A A A A A A A A A A A A A	
ClientID:			
LIRNorELIRN-	(		

A pop-up window will appear with matches for the search criteria entered. Select the record of interest and click "View Details" in the upper left-hand corner.

Find Client > Se	earch Results						
View Details	Custom Forms Back	Print or Export					
Search I	Results						
Search:							
Last Name	First Name	DOB	Client ID	URN	EURN	Encrypted UCI	Match Type
Centralized	Eligibility	2/2/1990		EICN0202902U	NXhY3KAlq	C702CA572515AA3E0A2772E61808D00B53246E49U	Exact

Next click "Demographics" from the client menu link list. A Demographics window will open. Look for and select the "Eligibility" option to start adding records.

Oustomize	Find C		
Client Summary	Print	Operation Demograph	ics
Demographics			
Client Report		Personal Info	Client ID: Name: Centralized, Eligibility Gender: Female DOB: 02/02/1990
Encounter Report		1. Bertheline (	
Services		Change URN	EICN0202902U
Annual Review			-
Case Notes	·	Contact Information	No description supplied
Custom Forms			-
Vital Signs		Race/Ethnicity	Asian (Chinese), Hispanic (Other)
Hospital Admissions			-
Medications		HIV Risk Factors	No description supplied
		Vital Enroliment Status	Vital Status: Alive Current Status: Active
		Fishibu	Not Elizable for Duan White
		Englowity	Not Engible for Ryan White
		HIV Status	HIV-positive (AIDS status unknown) HIV Date: 12/01/2021

"Eligibility History" records window will open. There may be multiple records listed for clients with previously eligibility determinations. From the actions links click "Add."

Find (	Client >	Search	Results	> View	Details >	> Demographics > I	Eligibility							
View	Add	Edit	Delete	Help	Back	Print or Export								
Elig	gibil	lity I	listo	ry										
Search	e [ .													
Date	^		Is Eligit	ole F	unding S	ource	Rya	an White Funded	Provider	Comment	Proof of HIV Status	Proof of HIV Statu:	Proof of Income	Proof of Income R

The following screen will open.

ave Back	
Add	
Eligibility Date:	02/22/2022
Is Eligible:	
Funding Source:	±
Proof of HIV Status:	
Proof of HIV Status Documentation:	0 Attachments (Access in view mode only)
Proof of Income:	
Proof of Income Required Docomentation:	0 Attachments (Access in view mode only)
Proof of Residency:	
Proof of Residency Required Documentation:	0 Attachments (Access in view mode only)
Proof of Insurance:	
Proof of Insurance Required Documentation:	0 Attachments (Access in view mode only)
Eligibility expiration Date:	
Consented to share eligibility information and doc:	
Release of information form:	0 Attachments (Access in view mode only)
Eligibility Staff Name:	
Comment:	

For "Is Eligible" select the appropriate Yes/No option.

For "Funding Source" select from the dropdown list of Ryan White-related funding sources. A client's Eligibility Status changes to Ryan White Eligible when yes is eligible and a RW funding source are entered. Clients can be eligible for multiple funding sources. Separate Eligibility records need to be entered for each funding source they are eligible for. For instance, they may be eligible for Part A (which began 03/01/2022) and Part B services (which began 04/01/2022). Separate Eligibility records need to be created for each funding source and corresponding date.

Note: Eligibility Status – eligible or ineligible – and Eligibility Date entered here determines whether services and outcome data will be included in the Ryan White Services Report (RSR).

RW-funded services delivered during the date span in which clients are missing or deemed ineligible are excluded from the RSR except for Outpatient Ambulatory Health Services (OAHS). If a client is eligible for OAHS anytime during the RSR report year, all OAHS services are included in the RSR. For all other services, they are only counted if the service date is during the time frame the client is eligible for the corresponding RW-related funding source.

Eligibility Data	02/22/2022	-	1998	
Eligibility Date:	02/22/2022	a characteristic		
Is Eligible:	Yes	1		
	Part A			Ψ

Complete the top section of the add eligibility screen as follows:

Next click the appropriate Proof of HIV Status, Proof of Income, Proof of Residency, and Insurance checkboxes. Enter "Eligibility expiration date" and select if patient consented to share eligibility information and documents with other providers. Enter your name and any additional comments, then click "Save".

Proof of HIV Status:	
Proof of HIV Status Documentation:	0 Attachments (Access in view mode only)
Proof of Income:	
Proof of Income Required Docomentation:	0 Attachments (Access in view mode only)
Proof of Residency:	
Proof of Residency Required Documentation:	0 Attachments (Access in view mode only)
Proof of Insurance:	
Proof of Insurance Required Documentation:	0 Attachments (Access in view mode only)
Eligibility expiration Date:	02/22/2023
consented to share eligibility information and doc:	Yes
Release of information form:	0 Attachments (Access in view mode only)
Eligibility Staff Name:	Mr X
Comment:	,

Once you click save, the eligibility record will be added to the "Eligibility History."

View Add	Edit De	lete Help Back	Print or Export											
Eligibi	lity His	story												
Search:														
Date 1	Is Eligible	Funding Source	Ryan White Funded	Provider	Comment Proof of HIV State	Proof of HIV Status D	Proof of Income	Proof of Income R	Proof of Ret	Proof of Residence	Pr Proof of Insurance E	li Eligibility	Consente	Release of inform
02/22/2022	Yes	PartA	Yes	HAHSTA TEST PROVIDER	Yes	0 Attachments	Yes	0 Attachments	Yes	0 Attachments	Yi 0 Attachments 0	2. Chris Wal	I Yes	0 Attachments

#### Add Attachments/Documents

From the "Eligibility History" screen double-click or select the record and click "View" for the record to which the attachment(s) will be added. Everything will be grayed out. (It is supposed to look like that, so

don't worry). Do not select edit. Instead, select the category that you want to add an attachment (ex. Proof of HIV Status Documentation).

Find Client > Search Results > View Details > Demo	ographics > Eligibility > View
Edit Back	
View	
Eligibility Date:	02/22/2022
Is Eligible:	Yes
Funding Source:	Part A
Proof of HIV Status:	12
Proof of HIV Status Documentation:	0 Attachments (Access in view mode only)
Proof of Income:	2
Proof of Income Required Docomentation:	0 Attachments (Access in view mode only)
Proof of Residency:	
Proof of Residency Required Documentation:	0 Attachments (Access in view mode only)
Proof of Insurance:	
Proof of Insurance Required Documentation:	0 Attachments (Access in view mode only)
Eligibility expiration Date:	02/22/2023
Consented to share eligibility information and doc:	Yes
Release of information form:	O Attachments (Access in view mode only)
Eligibility Staff Name:	Chris Wallace

Then select "Add" and select the "Choose Files" button and choose the correct file.

Find Client > Sear	ch Results >	View	Details >	Demographics >	Eligibility >	View >	0 Attachments					
View Add Edit	Delete	Link	Back	Print or Export								
Attachme	nts											
Search:												
Content Type		Attac	h Date	Attach User	Mod	Date	Mod User	1	File Type	File Na	ame	Comment



Prior to uploading files, label and save the eligibility files that will be uploaded in a convenient location. Click on "Choose Files" and navigate to the folder where the file(s) is saved using Windows Explorer.

nd Client > Sea	rch Results > View Details > Demograph	hics > Eligibility > View > 0 Attachments > Add
lext pack		
Add		
File Name(s):	Choose Files Proof of HIification.	docx Upload Completed Successfully. (11.66 KB of 11.66 KB)

After selecting the file, make sure the message "Upload Completed Successfully" appears then select "Next." Under "Content Type" select the type of document being uploaded from the drop-down menu, add a Comment if necessary and select "Save."

Find Client > Sear	ch Results > View Details > Demographics > Elig	ibility > View > 0 Attachments > Add > Next
Save Back		
Next		
	Proof of HIV Verification.docx	
Content Type:	<u> </u>	Click here to select from 5 choices.
Comment:	Detectable HIV Viral Load Result	
	HIV Western Blot Test	
	Lab Document	
	Provider Note	
	Rapid HIV Test Result(Positive)	

You will be taken back to the main page of that attachment category. You can add another document under that category, if needed. If you don't need to add any additional documents, then select "Back."

View Add Edit Delet	Link Back	Print or Export					
Attachments							
Search:							
Content Type	Attach Date	Attach User	Mod Date	Mod User	File Type	File Name	Comment
Detectable HIV Viral Load Res	lt 2/22/2022	ZERGAM	2/22/2022	ZERGAM	.docx	Proof of HIV Verification	

Note: If you need to delete an attachment, click the attachment (one time) and select Delete at the top of the page. It will ask you to confirm. Select Confirm. Once you do that, the attachment will be deleted. Attachments can only be deleted by users of providers who uploaded the document with delete attachment permission only.

Viewing Client Eligibility Attachments (Basic Overview)

For your agency and other Ryan White network providers.

- 1. Log-in to CAREWare.
- 2. Select "Find Client" and search for the client of interest.
- 3. Once the client file is open, select the "Eligibility" tab under "Demographics" from the menu of links on the right-hand side.
- 4. If there are no documents or records, you may have to add eligibility records and attach supporting documentations. If there is record available, highlight the records, and then click view from the link actions on the top.

Eligibility Date:       02/22/2022         Is Eligible:       Yes         Funding Source:       Part A         Proof of HIV Status:       Proof of HIV Status:         Proof of HIV Status Documentation:       1 Attachments (Access in view mode only)         Proof of Income:       Proof of Income:         View       Add       Edit       Delete       Link       Back       Print or Export         Attachments         Search:         Content Type       Attach Date       Mod Date       Mod User       File Type       File Name       Comm		View					
Is Eligible: Yes Funding Source: Part A Proof of HIV Status: Proof of HIV Status: Proof of HIV Status Documentation: 1Attachments (Access in view mode only) Proof of Income: View Add Edit Delete Link Back Print or Export Attachments Search: Content Type Attach Date Attach User Mod Date Mod User File Type File Name Comm				Eligibility Date:	02/22/2022		
Funding Source:       Part A         Proof of HIV Status:       Proof of HIV Status:         Proof of HIV Status Documentation:       1 Attachments         Proof of Income:       Proof of Income:				Is Eligible:	Yes		
Proof of HIV Status: Proof of HIV Status: Access in view mode only) Proof of HIV Status Documentation: 1 Attachments Proof of Income: Access in view mode only) Proof of Income: Access in view mode only Proof of Income:				Funding Source:	Part A		
Proof of HIV Status Documentation:       1 Attachments       (Access in view mode only)         Proof of Income:       Image: Comparison of Co				Proof of HIV Status:			
View     Add     Edit     Delete     Link     Back     Print or Export       Attachments       Search:       Content Type     Attach Üser     Mod Date     Mod User     File Type     File Name     Comm			Proof of HIV	Status Documentation	1 Attachments (Ac	cess in view mode only)	
View Add Edit Delete Link Back Print or Export           Attachments           Search:           Content Type         Attach Date         Mod Date         Mod User         File Type         File Name         Comm				Proof of Income:			
View Add Edit Delete Link Back Print or Export           Attachments           Search:           Content Type         Attach Date         Mod Date         Mod User         File Type         File Name         Comm				Proof of income.			
Add Edit Delete Link Back Print of Export       Attachments       Search:       Content Type     Attach Date       Attach Date     Mod Date       Mod User     File Type       File Name     Comm	View Add Edit Delete	Link Pack F	hint or Evenant				
Attachments Search: Content Type Attach Date Attach User Mod Date Mod User File Type File Name Comm	Att	LINK DOCK P	Time or Export				
Search: Content Type Attach Date Attach User Mod Date Mod User File Type File Name Comm	Attachments						
Content Type Attach Date Attach User Mod Date Mod User File Type File Name Comm	Search:						
	Content Type	Attach Date	Attach User	Mod Date Mod	d User File Type	File Name	Comment
Jetectable HIV Viral Load Result 2/22/2022 ZERGAM 2/22/2022 ZERGAM docx Proof of HIV Verification	Condit type						
	Detectable HIV Viral Load Result	2/22/2022	ZERGAM	2/22/2022 ZEF	RGAM .docx	Proof of HIV Verification	1
Find Client > Search Results > View Details > Demographics > Eligibility > View > 1 Attachments > View	Detectable HIV Viral Load Result	2/22/2022 Client > Search	ZERGAM Results > View Do	2/22/2022 ZEF	RGAM .docx Eligibility > View > 1 A	Proof of HIV Verification ttachments > View	
Find Client > Search Results > View Details > Demographics > Eligibility > View > 1 Attachments > View Edit Back	Detectable HIV Viral Load Result Find	2/22/2022 Client > Search Back	ZERGAM Results > View D	2/22/2022 ZEF	RGAM .docx Eligibility > View > 1 A	Proof of HIV Verification	1
Find Client > Search Results > View Details > Demographics > Eligibility > View > 1 Attachments > View Edit Back View	Detectable HIV Viral Load Resul Find Edit Vi	2/22/2022 Client > Search Back	ZERGAM Results > View D	2/22/2022 ZEF	RGAM .docx	Proof of HIV Verification	
Find Client > Search Results > View Details > Demographics > Eligibility > View > 1 Attachments > View Edit Back View File Name: Proof of HIV Verification.docx	Edit	2/22/2022 Client > Search Back EW File Name: Prov	ZERGAM Results > View Do	2/22/2022 ZEF etails > Demographics > on.docx	RGAM .docx	Proof of HIV Verification	
Find Client > Search Results > View Details > Demographics > Eligibility > View > 1 Attachments > View Edit Back View File Name: Proof of HIV Verification.docx Content Type: Detectable HIV Viral Load Result	Detectable HIV Viral Load Resul Find Edit Vi	2/22/2022 Client > Search Back EW File Name: Provintent Type: Dete	ZERGAM Results > View Do of of HIV Verification ctable HIV Viral Loa	2/22/2022 ZEF etails > Demographics > on.docx ad Result	RGAM .docx	Proof of HIV Verification	

- 5. To view the attachment in that category, click it. The attachment page will open and show all the attachments under that category.
- 6. Double-click the attachment to view it in detail. Click the name of the file and it will open in a separate tab.
- 7. Print or download the document for your records.
- 8. Exit the tab when you are done viewing the document. That will take you back to home.

#### 9. Select Back to return to the main page.

#### Link Actions When Attaching/Uploading Documents

View Add Edit Delete Link Back Print or Export

• Add brings up a standard Browse window. CAREWare accepts these file types: DOC, JPG, JPEG, PDF, and DOCX. Once a file is selected and the Upload Completed Successfully message appears, the user must select the Contact Type and enter an optional Comment. A Comment helps to identify the document or its purpose at a later date for other users if the client is served by more than one provider. Save completes the upload process.

• Edit is not recommended. To correct data entered in error, the preferred method is to delete the attachment and add it back. "Edit" and "Delete" are active only for the user who uploaded the document or for the CAREWare organization's Site Administrator or Champion.

• Link allows users to point to a different document uploaded for the same client in a different item. This keeps the user from having to upload the same document twice. For example, a pay stub that verifies both income and residence.

**Note:** If you do not see any other attachments for this client after selecting Link, close Attachments for this item and return to the hyperlink where the original document is stored. Select a new Content Type. This is needed because the options for Content Type changed when HAHSTA issued official lists of acceptable source documents. However, an original Content Type will be retained until it is changed manually to a current option from the list. Once the Content Type has been changed to a valid selection, return to Attachments for the new document and select Link to see all the attached documents for this client. Select the attachment that meets the requirement for the new type of document and then Link in the Link Action bar. All information on the original will appear in Attachments for the new document.

#### Types of Eligibility Documents for Upload

#### **HIV Status Verification Documentation**

Once you checked the Proof of HIV Verification checkbox upload the verification document(s). Make sure to obtain accurate information about the client's HIV-positive date and status in Demographics. Acceptable Proof of HIV Verification Documents are written documentation from a medical provider or

laboratory reports denoting CD4 count and viral load. Laboratory results should be within 6-months of the date of certification. The dropdown options include:



#### **Proof of Income Documentation**

Click the underlined hyperlink to open a window to upload a scanned/saved copy of the document verifying the client's recent income. Upload additional documents as verification documents change. If a document uploaded for another item covers this one, link to it rather than upload it twice.

Customer income may not exceed 500% of the Federal Poverty Level (FPL). Income sources should be reported by the customer and any household members for whom customers have legal responsibility. For each income source, the customer must indicate the gross amount, how often the income is received, and whether it is client income or a household members. The following is an abbreviated list of acceptable forms of proof of income. For the complete list see DC Health's Ryan White Program Enrollment and Eligibility Policy.

- Pay stubs for the past 60 days. The pay stub must show the year-to-date earnings, hours worked, all deductions, and the dates covered by the paystub
- A notarized letter from the employer showing gross pay for the past 60 days, along with a copy of the most recent income tax return
- Business records for 2 months prior to application, indicating type of business, gross income, net income, and most recent year's individual income tax return.
- Copy of the tenant's lease showing customer as the landlord and a copy of their most recent income tax return
- SSD/SSI award letters, unemployment checks, social security checks, pension checks, etc. from the past 60 days

- Zero income attestation form and/or a letter from a supporting friend or family member stating how they support the customer
- Self-reported income(Self-attestation reporting cash-only income)

Drop-down options to select when uploading income documents are shown below:



#### **Proof of Residency Documentation**

The following is an abbreviated list of acceptable methods of meeting the burden of proof for residency. For the complete list see DC Health's Ryan White Program Enrollment and Eligibility Policy.

- Current lease or mortgage statement
- Deed settlement agreement
- Current driver's license
- Current voter registration card
- Letter from any federal/state/local government agency addressed to applicant (within 1 year)
- Fuel/utility bill (past 60 days)
- Property tax bill or statement (past 60 days)
- Rent receipt (past 60 days)
- Pay stubs or bank statement with the name and address of the customer (past 60 days)
- Active (unexpired) homeowner's or renter's insurance policy
- DC Healthcare Alliance Proof of DC Residency form

• If homeless, a written statement from case manager or facility

Drop-down options in CAREWare for residency verification:



#### **Proof of Insurance Documentation**

First go to Annual Review from menu of links on the left-hand side on clients account and document insurance assessment date, primary and secondary insurance. Then under the Eligibility tab checkmark the proof of insurance checkbox and upload the insurance verification documents. Acceptable documents are Insurance ID or other written letters from an insurance company or government institutions. If client has no insurance, document under Annual review section and checkmark the Proof of insurance checkbox under eligibility tab. If patient has proof of no coverage, upload the document otherwise it isn't necessary to upload document if client is uninsured. Possible content type when uploading insurance verification is shown on the screen below.

Results > view Details > Demographics >	cligibility > view > 0 Attachments > Add > t	NEXL
oof of residency.png		
	Click here to select from 3 choices.	
nsurance Company ID		
ther		
Anei		
roof of no insurance letter		
	of of residency.png surance Company ID ther toof of no insurance letter	of of residency.png  Surance Company ID ther toof of no insurance letter

#### **Release of Information Form**

During the eligibility assessment, providers are required to upload a Release of Information (ROI) document signed by a client as it is highly likely that the client's eligibility information and required documents will be shared with other Ryan White network providers. The core requirements to be included in the ROI document are:

- 1. A specific description of the information that will be used;
- 2. The name of the authorized person or organization requesting the information;
- 3. The name of the person or organization with whom the requestor will share the requested information;
- 4. A specific description of the purpose of sharing the requested information;
- 5. An expiration date of the purpose of the disclosure; and
- 6. The signature of the individual, whose information is requested, or the signature of an authorized representative with a description of the representative's authority. 45 C.F.R. § 164.508(c)(1)(i)-(vi) (2013), <u>http://www.ecfr.gov/cgi-bin/text-idx?SID=2bbfc70ecdc65bfa13c058b40b2f0314&mc=true&node=se45.1.164\_1508&rgn=div8</u>.

Refer to the Appendix of this user guide for detailed release of information requirements.

Uploading Release of Information Documentation

To upload ROI document, make sure you are on the view mode and click on the Release of information

form Attachment hyperlink. Then click Add

Find Client > Search Resul	s > View Details >	Demographics >	Eligibility >	View >	0 Attachment	s				
View Add Edit Delet	e Link Back	Print or Export								
Attachments										
Search:										
Content Type	Atta	ach Date At	tach User	Mod	Date	Mod User	File Type	File Name	Com	nment

Next click choose files as shown below and click next

Find C Next	lient > Search Results > View Details > Demographics > Eligibility > View > 0 Attachments > Add Back
Ad File I	d Name(s) Choose Files No file chosen
	Find Client > Search Results > View Details > Demographics > Eligibility > View > 0 Attachments > Add
	Next Back
	Add File Name(s): Choose Files Release of i rmation.png Upload Completed Successfully. (17.6 KB of 17.6 KB)

Next Select the content type from the drop-down and provide any comments in the comment fields and click save. The screen should look like the ones shown below.

Next	
	Palassa of information one
Content Type:	Release of information.png
Comment:	Other
	Outer

Once you're done uploading the document successfully, the records should look like this

Find C	lient >	Search	Results >	View	Details >	Demogra	phics >	Eligibility >	View >	0 Attachm	ients			
View	Add	Edit	Delete	Link	Back	Print or E	xport							
Att	ach	mer	nts											
Search														
Conter	nt Type				Atta	ch Date	Att	ach User	Mo	d Date	Mod User	File Type	File Name	Comment
Releas	e of info	rmation			2/24	/2022	ZE	RGAM	2/24	4/2022	ZERGAM	.png	Release of information	

#### Centralized Eligibility Record

Now that we have seen how to enter eligibility information and upload documents in CAREWare clients account under Eligibility tab, now let us see how the information will be shared/visible if the patient goes to another Ryan White services provider using the same DC EMA CAREWare system.

For demonstration purposes we will assume patient (Centralized, Eligibility: DOB:02/02/1990 and Gender: Female) goes to HOPWA test provider to receive needed services.

Add the client to CW as you normally would do for new patient.

Add Close	
Last Name:	Centralized
First Name:	Eligibility
Middle Name:	
Gender:	Female
Date of Birth:	02/02/1990
DOB Estimated?:	

CAREWare has a built-in mechanism to search for possible duplicates in the entire database using unique identifier created automatically when the client's initial account is created. Since, this client is

already in CW, when attempting to add it to CW, you will receive a flag from CW with the following message.

View More Information         Back         Print or Export           The client you are adding is a possible duplicate. Resolve the duplicate URNs if it is a new client           Search:           Last Name         First Name         Client URN           Controlling         Elicibility         Elicibility	Client Resolution			
The client you are adding is a possible duplicate. Resolve the duplicate URNs if it is a new client         Search:         Last Name       First Name       Client URN         Controlling       Elicibility       Elicibility	View More Information	Back Print or Export		
Search: Last Name First Name Client URN Controllined Elivibility EliCN/02020031	The client ye	ou are adding i	s a possible duplicate.	Resolve the duplicate URNs if it is a new client.
Last Name First Name Client URN	Search:			
Controlized Elizibility ElicN/020200211	Last Name	First Name	Client URN	
Contraited Englowing Elongetere	Centralized	Eligibility	EICN0202902U	

Select the client and click on "View More Information" from the link actions on the top. CAREWare will display additional detailed information about the client for you to review.

This is the same client	This is a new clier	t Back	
View More I	nformatio	n	
	First Name:	Eligibility	
	Middle Name:		
	Last Name:	Centralized	
	Date of Birth:	02/02/1990	
	Gender:	Female	
	Client URN:	EICN0202902U	
	Address:		
	City:		
	State:		
	County:		
	Zip Code:		
	Phone:		
	Ethnicity:		
	White:		
	Black:		
	Asian:		
American India	n or Alaska Native:		
Native Hawaiian or Oth	er Pacific Islander:		
	Other:		
	Unknown:		

Verify the client information and if this is the same client click on "This is the same client" from the Link action on the top.

ave Cancel			
Add Client			
First Name:	Eligibility		
Middle Name:			
Last Name:	Centralized		
Preferred Name:			
Preferred Language:			
Gender:	Female	76-40	Ł
Date of Birth:	02/02/1990		
DOB Estimated?:	•		
Sex At Birth:	Female		Ŀ
URN:	EICN0202902U		
Encrypted URN:	NXhY3KAlq		
Encrypted UCI:	C702CA572515AA3E0A2772E61808D00B53246E49U		
Client ID:			
LastService:	2/18/2022		
Last Poverty Level:	02/18/2022		

Provide any additional available patient information then click save. This will automatically take you to the patient's demographic screen.

Oemographie	ics
Personal Info	Client ID: Name: Centralized, Eligibility Gender: Female DOB: 02/02/1990
Change URN	EICN0202902U
Contact Information	No description supplied
Race/Ethnicity	Asian (Chinese), Hispanic (Other)
HIV Risk Factors	No description supplied
Vital Enrollment Status	Vital Status: Alive Current Status: Active
Eligibility	Ryan White Eligible
HIV Status	HIV-positive (AIDS status unknown) HIV Date: 12/01/2021

By default, the Eligibility tab summary description is "Not Ryan White Eligible". Now that the information from previous provider is being shared you will see that the eligibility status for this client is Ryan White Eligible. This is great! Now click on the eligibility tab and you will be able to view all records, eligibility information and documents created by other Ryan White providers in the network.

<b>Client Resolut</b>	tion > View More	Information > Pers	onal Info > Demograpi	hics > Eligibility										
View Add	Edit Delete	Help Back Pri	nt or Export											
Eligibili	ity Histor	ry												
Search														
Date	Is Eligible	Funding Source	Ryan White Funded	Provider	Comment Proof of HIV	Proof of HIV Status Dock	Proof of Incom	Proof of Income Required	Pi Proof of Residency	Pr Proof of Insurance	Eligibility expirati	Consente	Release of informa	Eligibility
02/24/2022	Yes	Part B	Yes	HAHSTATEST PROVIDER	Yes	1 Attachments	Yes	0 Attachments	Yi 0 Attachments	Ye 0 Attachments	02/24/2023	Yes	1 Attachments	sars cov16
02/22/2022	Yes	PatA	Yes	HAHSTATEST PROVIDER	Yes	1 Attachments	Yes	1 Attachments	Yi 1 Attachments	Yk 0 Attachments	02/22/2023	Yes	1 Attachments	Chris Wall

Now highlight/select each record to view documents and other information for the client. Since the client is Ryan White Eligible, you can provide eligible service to this client without having the need to complete new eligibility assessment.

To view document, select the record and click on View from the link actions on the top. Please refer the how to view attachment section and follow the instruction provided to view each attachment.

idit Back		
View		
Eligibility Date:	02/22/2022	
Is Eligible:	Yes	
Funding Source:	PartA	
Proof of HIV Status:		
Proof of HIV Status Documentation:	1 Attachments (Access in view mode only)	
Proof of Income:		
Proof of Income Required Docomentation:	1 Attachments (Access in view mode only)	
Proof of Residency:		
Proof of Residency Required Documentation:	1 Attachments (Access in view mode only)	
Proof of Insurance:		
Proof of Insurance Required Documentation:	0 Attachments (Access in view mode only)	
Eligibility expiration Date:	02/22/2023	
Consented to share eligibility information and doc:	Yes	
Release of information form:	1 Attachments (Access in view mode only)	
Eligibility Staff Name:	Chris Wallace	
Comment		

#### Shared Client Fields

In addition, go to the *Annual review* menu link on the left and verify that *Housing arrangement*, *Insurance Assessment* and *Poverty Level Assessments* section are completed. These data elements data are also shared across providers serving a single client.

Completing missing shared data elements or eligibility documents during a client encounter makes for seamless collaboration and improved care coordination.

Note: Enrollment status data is provider specific. Thus, each provider should update the enrolment status to reflect the client's current enrolment status at their agency. Services may not be entered before the enrollment date.

#### Adding Eligibility Records using the Provider Data Import Function

This section is currently being tested and will be incorporated in future updates.

## Appendix – A. CAREWare Release of Information

RE: Release of Information for CAREWare Clients

#### <u>Issue</u>

Under federal and District of Columbia laws, what are the required elements for the release of information (ROI) that DC CAREWare clients must sign in order for their providers to legally exchange the clients' information with one another.

#### Legal Requirements

Any effective ROI must contain the following elements. The requirements of the ROI are primarily dictated by relevant sections of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Pub. L. No. 104-191, 110 Stat. 1936, as well as sections of the Code of Federal Regulations and District of Columbia Code. Each section below is followed by specific citations to the relevant law.

#### Core Requirements

There are six core elements required in any effective ROI. They are:

- 1. A specific description of the information that will be used;
- 2. The name of the authorized person or organization requesting the information;
- 3. The name of the person or organization with whom the requestor will share the requested information;
- 4. A specific description of the purpose of sharing the requested information;
- 5. An expiration date of the purpose of the disclosure; and
- 6. The signature of the individual, whose information is requested, or the signature of an authorized representative with a description of the representative's authority.

45 C.F.R. § 164.508(c)(1)(i)-(vi) (2013), <u>http://www.ecfr.gov/cgi-bin/text-</u> idx?SID=2bbfc70ecdc65bfa13c058b40b2f0314&mc=true&node=se45.1.164\_1508&rgn=div8.

#### Additional Required Statements

In addition, there must be several statements listed in an ROI. These statements must make the subject of the ROI aware of the following:

- 1. The individual may revoke the ROI in writing;
- 2. Treatment may not be conditioned on whether or not the subject signs the ROI; and
- 3. In the event that the information disclosed as a result of the ROI is "re-disclosed" by the named recipient, the authorization does not apply.

§ 164.508(c)(1)(i)-(vi).

Moreover, the authorization must be written in "plain language" and a copy must be provided to the individual. § 164.508(c)(3)-(4).

#### DC Law Requirements

In addition to HIPAA, which is federal law, there are District of Columbia laws which also protect patients' information privacy and do not preempt federal law because they are either 1) consistent with HIPAA or 2) add additional protections for patients. *See* Summary of the HIPAA Privacy Rule, State Law, http://www.hhs.gov/ocr/privacy/hipaa/understanding/summary/index.html (last visited June 29, 2015). These laws particularly address mental health and mandate that legal disclosure of mental health information must be authorized by the patient. D.C. Code § 7-1202.01 (LexisNexis 2015). Further, the D.C. Code defines mental health information as "any written, recorded or oral information acquired by a mental health professional in attending a client in a professional capacity which...[i]ndicates the identity of a client; and...[r]elates to the diagnosis or treatment of a client's mental or emotional condition." § 7-1201.01. If mental health services are included in the information which may be disclosed pursuant to a signed ROI, the ROI must inform the authorizing individual that she may inspect her mental health record, and it must also include the authorization expiration date, which may not exceed 365 days from the authorization date.

§ 7-1202.02. Also, the authorization must accompany all disclosures and must be included in the client's mental health record. *Id*.

## Appendix – B. Disclaimer

Note that throughout this manual the term client is used to denote the field labels within the CAREWare system. Within the Washington DC, EMA clients are referred to as consumers.

