

U.S. Department of Health & Human Services

Hrsa

Health Resources & Services Administration
Office of Planning and Evaluation

MEMORANDUM

DATE: December 10, 2007

TO: Karen Matsuoka
OMB Desk Officer

FROM: Lisa Wright-Solomon
HRSA Reports Clearance Office

SUBJECT: Terms of Clearance
OMB Number 0915-0253

This memo is to provide an update on HRSA's progress regarding the terms of clearance that were issued in December 2004 for OMB Number 0915-0253. Specifically the terms state that as soon as possible but no later than 30 days after approval, HRSA shall submit to OMB a plan detailing the expected timeline for revising information collection methods to conform with the standard OMB two question format for collecting data on race and ethnicity at both the provider and grantee level. The plan should include a timeline for revising agency guidance to grantees to reflect the new format, and provide necessary lead time for respondents to implement changes. Additionally, the plan should address the timeframe to implement Agency plans to collect data at the respondent level.

HRSA previously provided a timeline for when the HIV/AIDS Bureau (HAB) planned to implement client level reporting. Plans to move to client level data were halted because of budget restrictions until HAB received clear guidance and funding from Congress with the passage of the Ryan White HIV/AIDS Treatment Modernization Act of 2006 (Ryan White HIV/AIDS Program). Since that time, HAB has moved forward with a new timeline for beginning client level reporting for January 2009.

In moving toward client level data collection, HAB has conducted several client level consultations. HAB held a one-day grantee consultation meeting in May 2005 (inviting 40 grantees from around the country) to discuss grantees' ability to collect and report client level data (CLD) and "funded" scope. A contractor was hired to report on the ability of grantees and providers to collect CLD on a routine basis—either quarterly or semi-annually. Recommendations included making the CLD system mandatory (Congressional mandate), adopting an encrypted reporting system without client names, building on the existing CAREWare software system, allowing grantees to design their own reporting system, and considering administrative, financial and technical assistance needed to implement and maintain the system.

A client level data reporting system is under development and we are working on a standard file format for client data reporting. In the coming months, HAB will review the proposed CLD system with Federal partners, grantees, and HAB external partners. Every HAB grantee will be invited to one of ten regional 1-day meetings to review and discuss the proposed CLD system.

Many resources are being made available to assist grantees in the move to CLD reporting. In the spring of 2008, grants will provide funds to those who need financial assistance to buy hardware and software to make the transition to CLD reporting. In addition, HAB's Division of Training and Technical Assistance (DTTA) will make resources available to all grantees to hire programmers on a one time basis to modify existing client level data reporting systems to be able to report HAB-required data elements. In addition, Ryan White CAREWare, free HRSA-sponsored software for collecting and submitting client level data to HAB, will be modified to collect the required data elements.

Even though HAB will continue to collect aggregate data for the next two years, the revised Ryan White Data Report (RDR) does collect race and ethnicity separately.

