## Section 5 - A

## **OVERVIEW: DATA- COLLECTION, SHARING, AND REPORTING**

Much of the data collected, shared, and reported between providers and the Grantee is considered Protected Health Information (PHI) and is, therefore, protected by state and federal laws. Because all clients served under Part A funding have HIV/AIDS, this information is considered extremely sensitive. If HIV/AIDS information was improperly used or released, the patient's privacy, healthcare, or other interests may be irreparably damaged. This section provides the required documents used under the Part A contracts to ensure that client data remains secure and is only shared with those providers in which sharing agreements have been executed.

In addition to the sharing and reporting of data between providers and the Grantee, data is required to be submitted to HRSA in order to ensure the correct allocation of Part A funding is followed, and to ensure that providers are meeting their contract requirements. Two means of ensuring the correct use of funds is through the Ryan White Services Report (RSR) and the Women, Infant, Children, and Youth Report (WICY).

The RSR requires the following information be submitted via an electronic report once per year: client demographic status; HIV clinical information (if the client received medical services at the provider agency); Ryan White-funded HIV-care medical and support services received at the service provider; and the client's UCI, an encrypted, unique client identifier. Service providers also provide basic information about their organization. Due to the extensive requirements of the RSR, the RSR manual is provided in its entirety.

Title XXVI of the Public Health Service Act, as amended by the Ryan White HIV/AIDS Treatment Modernization Act Extension of 2009, requires Part A and Part B grantees to use a proportionate amount of their grant dollars to provide services to women, infants, children and youth (WICY) living with HIV/AIDS. The information used to track the services provided for WICY is reported to HRSA each contract year.