


Implementing a Client Level Database  
Using CAREWare Across the System of  
Care



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2008 Ryan White HIV/AIDS Program Grantee Meeting

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## Agenda

- Stakeholders
- Requirements
- Options Available
- Establishment of Standards
- Implementation Process
- Phoenix EMA – Strategy
- Lessons Learned

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## Stakeholders

- Financially – Paying for system
- Responsibility – Will be accountable to others for the system outcomes
  - HRSA
  - Grantee
  - Information Technology
  - Planning Council or other Steering Body
  - Sub-Grantee's

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## System Requirements

- Determine what the system needs to do
  - Capacity and System Availability
  - Security / HIPAA
  - Data Elements
  - System Functionality
  - Reporting
  - Customization
  - Data Mining
  - Outcome Measurements
  - Disaster Recovery/Backup

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## Grantee - Requirements

- HRSA reporting requirements
- Fiscal/Programmatic Monitoring
- Grant Performance
- Continuum of Care
- Information Technology Infrastructure

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## Planning Council Requirements

- Service Utilization
- Planning Service and Resource Allocation
- Comprehensive Care Plan
- Service Gap Analysis
- EPI Data Comparisons

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 Sub-Grantee Requirements

- Financial and Programmatic Reporting
- Referral Tracking and Processing
- Clinical Client Management
- Multiple Funding Source Reporting
- Reduce Administrative Costs – Double Data Entry
- Information Technology Infrastructure

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 Requirements Overview

- Identify Stakeholders to the system
- Identify What the system needs to do
- Review System Options
- Assess the current Infrastructure of both Grantee and Sub-Grantee's

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 Implementation

- Purchasing
  - Hardware/Software purchases
- Installation
  - Hardware/Software Installation
- System Standards
  - Establish Standard Policies and Procedures
- Standard Reporting
- Customization
- Support and Maintenance

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 **System Wide Standards**

- Identify Key Data Elements
  - Data elements required
    - Data entry standards for each element
- Identify Exception Reports Needed
  - Critical Fields
    - RDR Reporting
    - Grantee Reporting
    - Eligibility Determination
- Identify Standard Reports Needed
  - Fiscal and Programmatic Reporting
  - RDR Reporting

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 **Phoenix EMA**

Implementation of CAREWare

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 **Phoenix EMA**

- Why CAREWare
  - Developed and supported with HRSA funds
  - Implemented in 2001 by one sub-grantee
    - System Review / Evaluation Completed
  - Implemented in 2002 by several sub-grantees
  - 2005 Planning Council approved to Centralize the System to enhance reporting and monitoring
  - 2006 Began Centralizing across EMA

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## Phoenix EMA

- Infrastructure – Maricopa County
  - Windows 2003 Server
  - SQL Server and CAREWare Business Tier
  - Store and Forward used only for importing original data , then providers converted to Real-Time
- Security
  - Virtual Private Network to Access server
  - Role Based Security in CAREWare – User Agreements, renewed annually

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## Phoenix EMA

- Grantee
  - ODBC (open database connector) as Read only to CAREWare database
  - Microsoft Access Reporting Modules
- Sub-Grantee's
  - 14 sub-grantees
    - Several with Multiple Service Categories
    - Several with Custom Microsoft Access Reporting
  - CAREWare Contracts and Custom Fields
    - Managed by Grantee

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## Phoenix EMA

- CAREWare Standardization
  - All demographic data fields are defined in the Policy and Procedure
    - Modified version of the CAREWare manual
    - Simplified to cover the required areas
  - Custom Tabs
    - Tab 1 – Assigned to Each provider
    - Tab 2 – Assigned for Central Eligibility
    - Tab 3 – Assigned to Grantee
  - Custom Subform
    - Assigned to all providers with Grantee specific data entry requirements for Central Eligibility

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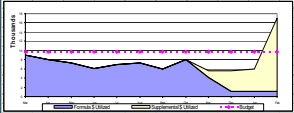
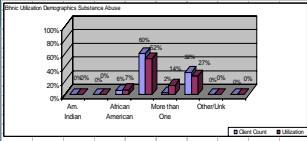
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## Phoenix EMA

**Monitoring/Oversight**

- Exception reporting – without having to review everything every month.
  - Trends
  - Anomalies
  - Identification of potential issues\
    - Client unmet need/service gaps
    - Cost variances/allowability

Ethnicity	Utilization (%)
Am. Indian	100%
African American	6%
Hispanic	7%
More than One	60%
Other/Unk	27%

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## Phoenix EMA

**Custom Reporting**

Cross reference clients receiving Case Mgmt and other services they also received in the Continuum

Client Services Receiving Case Mgmt	Number of Clients	Percent of Program
Food Bank/Wares	676	28.17%
PHC	353	14.69%
Home Health	99	3.12%
Laund.	166	10.48%
Meals Program	99	5.21%
Nutritional Services	296	13.15%
One Health Care	823	48.81%
Psychosocial Support	244	13.69%
Case Mgmt	55	2.31%
Transportation	653	38.01%



Of 1,796 clients receiving WPPA funded Case Management in FY 06 - 823 also received One Health Care. Etc.

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## Phoenix EMA

- Standardized Sub-Service Activities
  - Each service is defined
  - Units of service are defined
  - All sub-grantees are required to report using the standardized sub-service activities
- Grantee Service Utilization Reports
  - Analysis of monthly fiscal and programmatic utilization
  - Summary to Planning Council
  - Grantee Management System – Grant funds management, ie Formula/Supplemental and Core Services >= 75%

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## Phoenix EMA

- Extending CAREWare
  - Integration with Sub-Grantee Systems
    - Ability to import service activity
  - Central Eligibility
    - Standardize Forms, data entry requirements
    - Establish Monitoring Reporting
    - Shared status across the EMA
    - Clients can enter/recertify with any Provider
    - Grantee Monitors for Compliance at every billing cycle, not just annually

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## Phoenix EMA

### Central Eligibility Tracking

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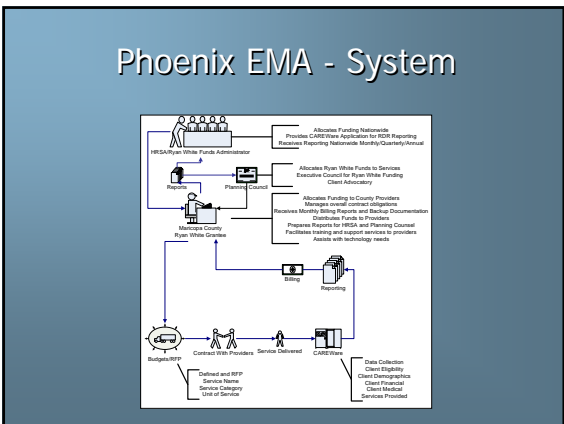
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## Phoenix EMA

CAREWare Benefits

- Established Standards
- Fiscal and Programmatic Monitoring
- Exception Reporting
- Compliance Monitoring Built In
- Utilization Across the Continuum of Care

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## Lessons Learned

- Involving all stakeholders is critical to success
  - BUY-IN Needed for an EMA wide collaborative effort
- Establishing Standards is critical for accountability and data integrity
  - The Grantee must establish how the system will be used otherwise data will be inconsistent
- Staggered Implementation ensures each sub-grantee will be successful
  - Technical Assistance and the System of Care is not disrupted

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