

# RWHAP Part B Program Terms Report

	1. Base Award		2. ADAP Earmark + ADAP Supplemental Award		3. Emerging Com Awar
	Amount	Percent	Amount	Percent	Amount
1. Part B AIDS Drug Assistance Program Subtotal					
a. ADAP Services					
b. Health Insurance to Provide Medications					
c. ADAP Access/Adherence/Monitoring Services					
2. Part B Health Insurance Premium & Cost Sharing Assistance for Low Income Individuals					
3. Part B Home and Community-based Health Services					
4a. Part B HIV Care Consortia / EC HIV Care Consortia					
4b. Part B HIV Care Consortia Administration / EC HIV Care Consortia Administration					

## FY25 Instruction Manual

Release Date: August 29, 2025

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*Public Burden Statement:* An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0915-0318 and it is valid until 04/30/2026. This information collection is mandatory (through increased Authority under the Public Health Service Act, Section 311(c) (42 U.S.C. 243(c)) and title XXVI (42 U.S.C. §§ 300ff-11 et seq.). Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov).

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**Division of Policy and Data**  
**Health Resources and Services Administration**  
**U.S. Department of Health and Human Services**  
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Health Resources & Services Administration



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# Icons Used in This Manual

The following icons are used throughout this manual to alert you to important and/or useful information.



The Note icon highlights information that you should know when completing this section.



The Tip icon points out recommendations and suggestions that can make it easier to complete this section.



The Question Mark icon indicates common questions asked with answers provided.



All new text in the document is indicated with a gray highlight.



The no icon indicates answer options that cannot be selected or information that cannot be entered under certain circumstances.

# Background

The Ryan White HIV/AIDS Program (RWHAP) Part B provides grants to states and territories. This funding helps them improve HIV medical and support services. The improvements focus on making these services better, easier to access, and more organized.

RWHAP Part B grant recipients are required as a Condition of Award to provide certain program and fiscal reports each year including an annual Program Terms Report (PTR). The PTR is an aggregate report submitted through the PTR web application accessed through the HRSA Electronic Handbooks (EHBs). All RWHAP Part B recipients must submit the PTR within 90 days of the release of the final Notice of Award (NoA). It serves as a reference to determine how recipients allocate funds each budget period to meet the needs of people with HIV. There are no changes to the FY25 RWHAP Part B PTR from the previous year's version.

The PTR is one of several RWHAP reports linked to the Grantee Contract Management System (GCMS). The GCMS decreases data entry burden by sharing information among multiple HRSA HAB reports.

The RWHAP Part B PTR includes both the Consolidated List of Contractors (CLC) and the Allocations Report. All remaining PTR components are uploaded within the PTR including the SF-424A, Budget Narrative Spreadsheet, Implementation Plan, Contract Review Certification (CRC), and Early Identification of Individuals with HIV/AIDS (EIHAA) Plan.

If you have programmatic questions about the RWHAP Part B PTR, please contact your Division of State HIV/AIDS Programs (DSHAP) project officer. If you need additional assistance or have technical questions about the RWHAP Part B PTR or GCMS, please contact RWHAP Data Support at 1-888-640-9356 or [RyanWhiteDataSupport@wrma.com](mailto:RyanWhiteDataSupport@wrma.com).



# Accessing the PTR

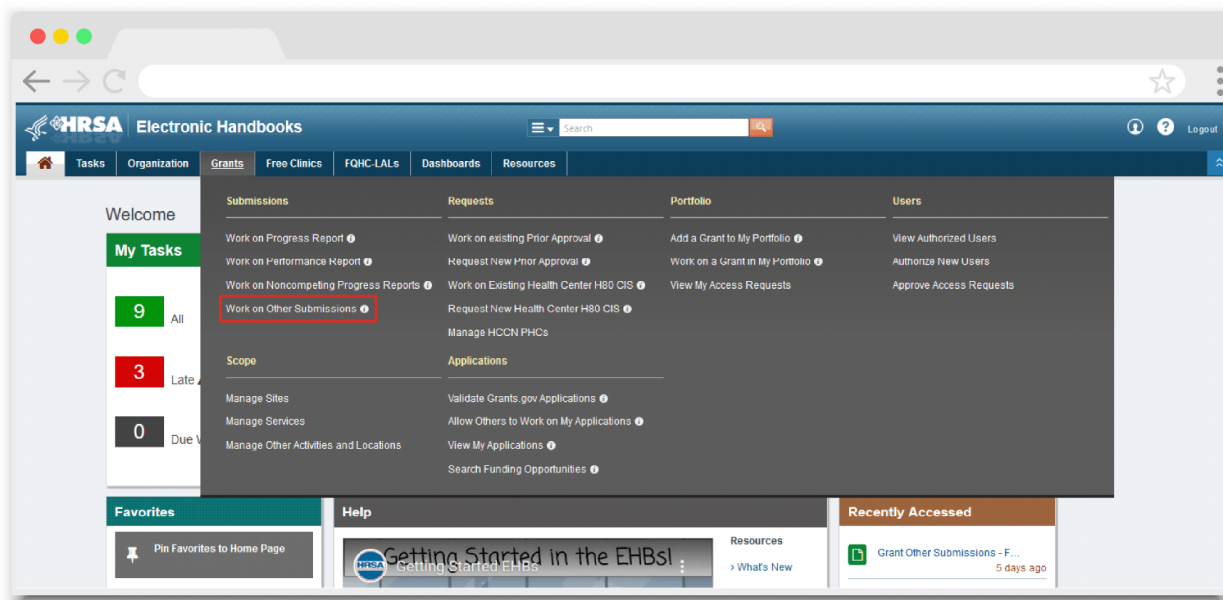
The RWHAP Part B PTR is accessible via the HRSA EHBs. You must have a HRSA EHBs user account with the appropriate access to your agency's grant to view and complete the report. To access the RWHAP Part B PTR, follow the steps below:

**STEP ONE:** Log in to the [HRSA EHBs](#) site. From the HRSA EHBs homepage, hover your cursor over the “Grants” tab at the top of the screen and select “Work on Other Submissions” under the “Submissions” header ([Figure 1](#)).



If you need assistance with your Login.gov username or password, contact the Login.gov Support Team at (844) 875-6446 or [submit a help ticket online](#).

**Figure 1. HRSA EHBs: Screenshot of the Grants Dropdown Menu**



**STEP TWO:** On the next page, “Submissions – All,” under the “Submission Name” column, locate the PTR you would like to access. Under the “Options” column, select “Start” or “Edit.” The first time the report is accessed the link will read “Start,” but once the report has been started, the link will instead read “Edit.” A new window will appear ([Figure 2](#)).



If you are attempting to work on your GCMS contracts before the submission period begins, you must access the GCMS through your previous year's PTR or your most recent RWHAP Services Report (RSR).

**Figure 2. HRSA EHBs: Screenshot of the Submissions - All Page**

Advanced Search Parameters

Display Options

Sort Method (Grid | Custom)

Search Name:  Save Parameters Search

Export To Excel

Page size: 15 Go 53 items in 4 page(s)

Submission Name	Submission Type	Organization	Grant #	Tracking #	Reporting Period	Deadline	Submitted Date	Status	Options
FY 2025 Program Terms Report	Other Submissions	State Health Department	X07HA00000		04/01/2025 - 03/31/2026	06/30/2025		Not Started	<a href="#">Start</a>
FY 2024 Program Terms Report	Other Submissions	State Health Department	X07HA00000	123456	04/01/2024 - 03/31/2025	09/30/2024	09/18/2024	Submitted	<a href="#">Submission</a>

**STEP THREE:** You are now in the PTR Inbox (Figure 3). From here, you can access your contracts in the GCMS and your report. To access the GCMS, select “Search Contracts” in the Navigation panel on the left side of the page. To access your PTR, select the envelope icon under the “Action” column on the right side of the page. The first time you access the report, the envelope icon will read “Create,” but once the report has been started, the icon will instead read “Open.”



Searching for “Terms” in the filter header under “Submission Name” may help you find your current PTR faster.



If you need help navigating the EHBs to find your annual PTR, call the EHBs Customer Support Center at 1-877-464-4772.

Figure 3. HRSA EHBs: Screenshot of the PTR Inbox Page

**HRSA Electronic Handbooks**

Support Logout

Tasks Organizations Grants Dashboards Free Clinics FQHC-LALs Resources

Welcome Recently Accessed What's New Guide Me

**NAVIGATION**

Search

Inbox

**PTR/Allocations Report Inbox**

Manage Contracts

Search Contracts

Search

Search Reports

**Program Terms Report Inbox**

Your session will expire in: 29:25

#	Report ID	Submission	Name	Grant Number	Budget Year	Modified Date	Status	Action	Comments	Action History
1		Program Terms Report	State Health Department	X07HA00000	04/01/2025 - 03/31/2026		Not Started	Create	Comment	History

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](mailto: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 [here](#).

# Completing the PTR

The RWHAP Part B PTR is an aggregate report that captures budgetary information on the allocation of grant funding for the specified budget year. The fiscal data submitted as part of the PTR are entered in two places in the RWHAP Part B PTR web system: within the PTR itself and in the agency's contracts in the GCMS.

RWHAP Part B recipients must have a contract in the GCMS for each agency funded to provide services with their RWHAP Part B award. These contracts include values for the amount of funding allocated to core medical and support services. Details from the GCMS contracts are then imported into the PTR, where recipients will also enter values for additional allocations from their award.

Once recipients have entered all values and completed their report, they can validate and submit it, at which point it is sent to their DSHAP project officer for review. If you need assistance or have questions about the RWHAP Part B PTR submission, please contact your DSHAP project officer.

## GCMS Contracts

As part of the RWHAP Part B PTR submission, recipients must have contracts present in the GCMS for all agencies funded to provide services with their RWHAP Part B award. This includes providers of direct core medical and support services to clients as well as providers of administrative, clinical quality management, and planning and evaluation services. Information from the contracts in the GCMS is imported into both the CLC and Allocations Report sections of the PTR.

Contracts are typically added to the GCMS during submission of the PTR. It is recommended that recipients add their contracts before beginning the PTR, as this saves them the extra step of synchronizing any contract updates with the report. Agencies should also be sure to align their contract dates in the GCMS with the dates of their award's budget period. Each provider should have a separate contract for each year they are funded to provide services. Do not reuse the prior year's contracts by updating the dates to the current year.

You can access the GCMS at any time in the RWHAP Part B PTR web system by selecting "Search Contracts" in the Navigation panel on the left side of the screen. For further instructions on adding your contracts to the GCMS, please see the [GCMS Manual](#) on the HRSA HAB website.

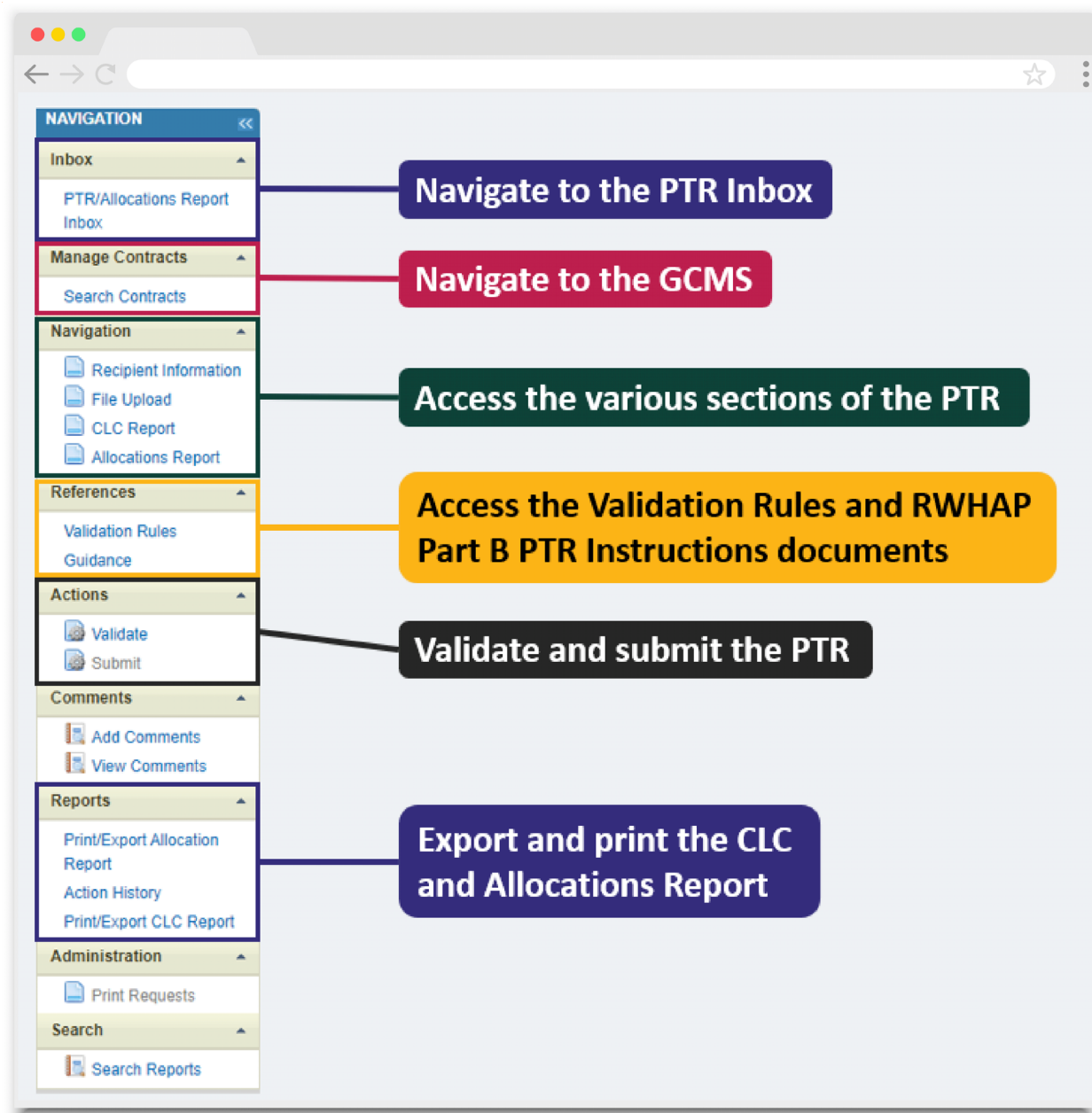
## PTR Navigation

Navigation through the PTR web system and within the PTR itself is done using the Navigation panel on the left side of the screen ([Figure 4](#)). Use the links in the Navigation panel to access the different sections of the PTR as well as to validate and submit it.



If you need help navigating the PTR web system, contact RWHAP Data Support for assistance at 1-888-640-9356 or email [RyanWhiteDataSupport@wrma.com](mailto:RyanWhiteDataSupport@wrma.com).

**Figure 4. PTR Navigation Panel Guide**



## Recipient Information

Once you open the PTR, you will be taken to the Recipient Information section of the report ([Figure 5](#)). This section is pre-populated with information from the HRSA EHBs. Review all information and ensure it is accurate and up to date. Edit any field by selecting the text box. Once you have finished reviewing and making any necessary updates, select “Save” on the lower-right corner of the page.

**Figure 5. RWHAP Part B PTR: Screenshot of the Recipient Information Page**

**NAVIGATION** << Search

**Program Terms Report** Your session will expire in: 28:29

**X07HA00000 : State Health Department**

### Recipient Information

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.

- Official Mailing Address:**
  - \* a. Street:
  - \* b. City:
  - \* c. State:
  - \* d. Zip Code:
- Organization Identification:**
  - a. EIN:
  - b. UEI:
- Contact information of person responsible for this submission:**
  - \* a. Name:
  - b. Title:
  - \* c. Phone:
  - d. Fax:
  - \* e. E-mail:

## File Upload

In the Navigation panel on the left side of the screen, select “File Upload” to access the File Upload section. All required PTR forms must be uploaded to this section of the PTR. The required PTR uploads include the:

- SF-424A
- Budget Narrative Spreadsheet
- Implementation Plan
- Contract Review Certification (CRC)
- Early Identification of Individuals with HIV/AIDS (EIIHA) Plan



Your DSHAP project officer must approve all the individual report items listed above before approving the entire PTR.

In the first table on this page, labeled “File Upload,” you can find both the PTR Instructions and Standard Outcome Measures documents. Download and view the PTR Instructions document for further guidance on the required PTR uploads.



Do not include program income, pharmaceutical rebates, or any other federal, state, or local funding sources in the PTR components.

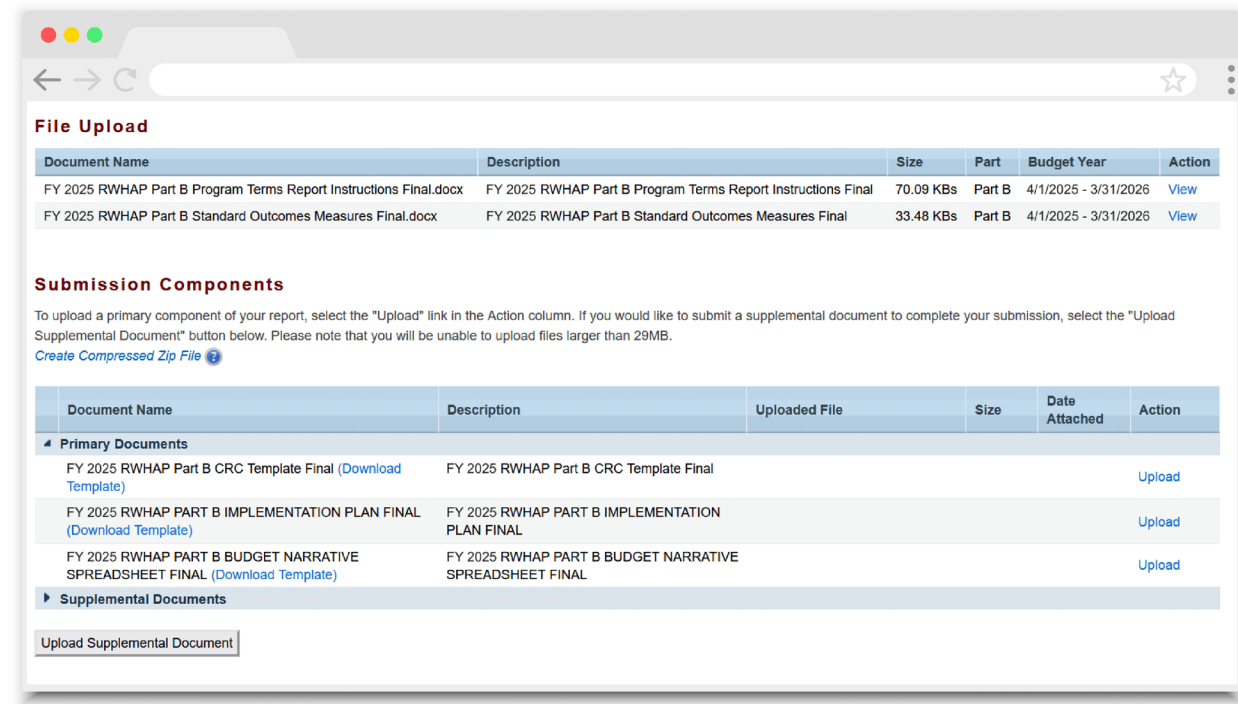


If you have additional questions about the required PTR documents, contact your DSHAP project officer.

The “Submission Components” table is where you will upload your required documents. Select “Download Template” to the right of each upload ([Figure 6](#)) to download a copy of the document template. Complete the template for each document listed and save each of them to a folder or drive on your computer that is easy to access.

Once you are ready to upload a document, select “Upload” in the “Action” column and a new field will appear at the bottom of the page. Select “Browse,” locate the completed template you saved on your computer, and lastly select “Submit” to upload the document to your report.

Figure 6. RWHP Part B PTR: Screenshot of the File Upload Page



**File Upload**

Document Name	Description	Size	Part	Budget Year	Action
FY 2025 RWHP Part B Program Terms Report Instructions Final.docx	FY 2025 RWHP Part B Program Terms Report Instructions Final	70.09 KBs	Part B	4/1/2025 - 3/31/2026	<a href="#">View</a>
FY 2025 RWHP Part B Standard Outcomes Measures Final.docx	FY 2025 RWHP Part B Standard Outcomes Measures Final	33.48 KBs	Part B	4/1/2025 - 3/31/2026	<a href="#">View</a>

**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](#)

Document Name	Description	Uploaded File	Size	Date Attached	Action
<b>Primary Documents</b>					
FY 2025 RWHP Part B CRC Template Final ( <a href="#">Download Template</a> )	FY 2025 RWHP Part B CRC Template Final				<a href="#">Upload</a>
FY 2025 RWHP PART B IMPLEMENTATION PLAN FINAL ( <a href="#">Download Template</a> )	FY 2025 RWHP PART B IMPLEMENTATION PLAN FINAL				<a href="#">Upload</a>
FY 2025 RWHP PART B BUDGET NARRATIVE SPREADSHEET FINAL ( <a href="#">Download Template</a> )	FY 2025 RWHP PART B BUDGET NARRATIVE SPREADSHEET FINAL				<a href="#">Upload</a>
<b>Supplemental Documents</b>					

[Upload Supplemental Document](#)

If your DSHAP project officer requires additional documentation or your agency needs to upload a document not listed in the "Primary Documents" section of the "Submission Components" table, select the "Upload Supplemental Document" button. Locate and select the supplemental documentation saved on your computer to add it to your report.



The File Upload feature only stores the most recent version of a file you uploaded. The system does not store past versions of uploaded files.



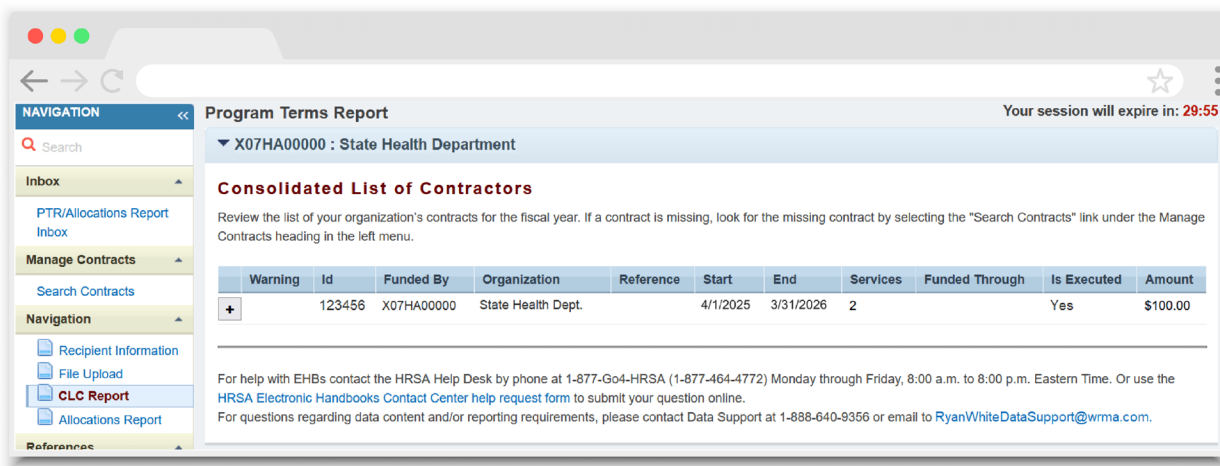
## Consolidated List of Contractors (CLC)

To access the Consolidated List of Contractors (CLC) Report, select “CLC Report” in the Navigation panel on the left side of the screen. The CLC is a list of all organizations that are funded to provide services with your agency’s RWHAP Part B grant, including providers of core medical and support services to clients as well as providers of administrative and technical services. The list is generated automatically based on the information entered into the GCMS.

Review the CLC Report ([Figure 7](#)) for accuracy and completeness, paying attention to the contract dates, funding amounts, and funded services (select the expansion button to view the services for each provider). All agencies funded to provide services with your RWHAP Part B award (including your own organization if it provides services) should have a contract in the GCMS and be listed in the CLC Report. The contract dates should align with your budget year to prevent future reporting issues.

To update the CLC, you must modify the associated contract(s) in the GCMS. For further instructions on editing contracts, see the [GCMS Manual](#).

**Figure 7. RWHAP Part B PTR: Screenshot of the Consolidated List of Contractors Page**

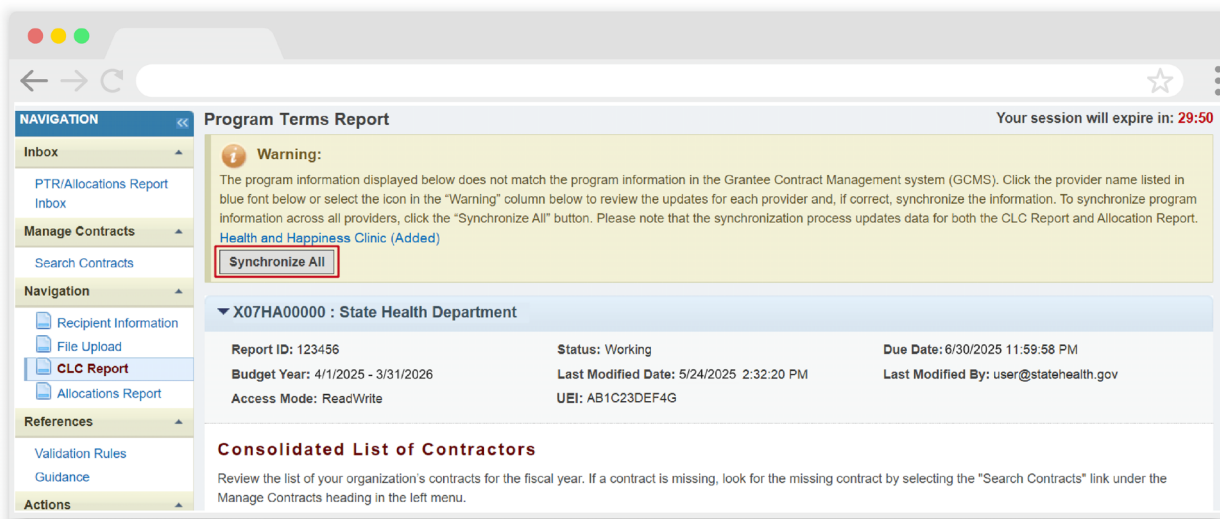


If you make any changes to your contracts in the GCMS after starting your PTR, you will need to synchronize these changes to add them to your report. You will know that you have pending changes to synchronize if a yellow warning banner is present at the top of the page ([Figure 8](#)). Select the “Synchronize All” button to synchronize all changes at once or synchronize changes individually by selecting the agency’s name in blue in the yellow warning banner. On the next page ([Figure 9](#)), review the changes for accuracy and select the “Synchronize” button to add the contract updates to your report.

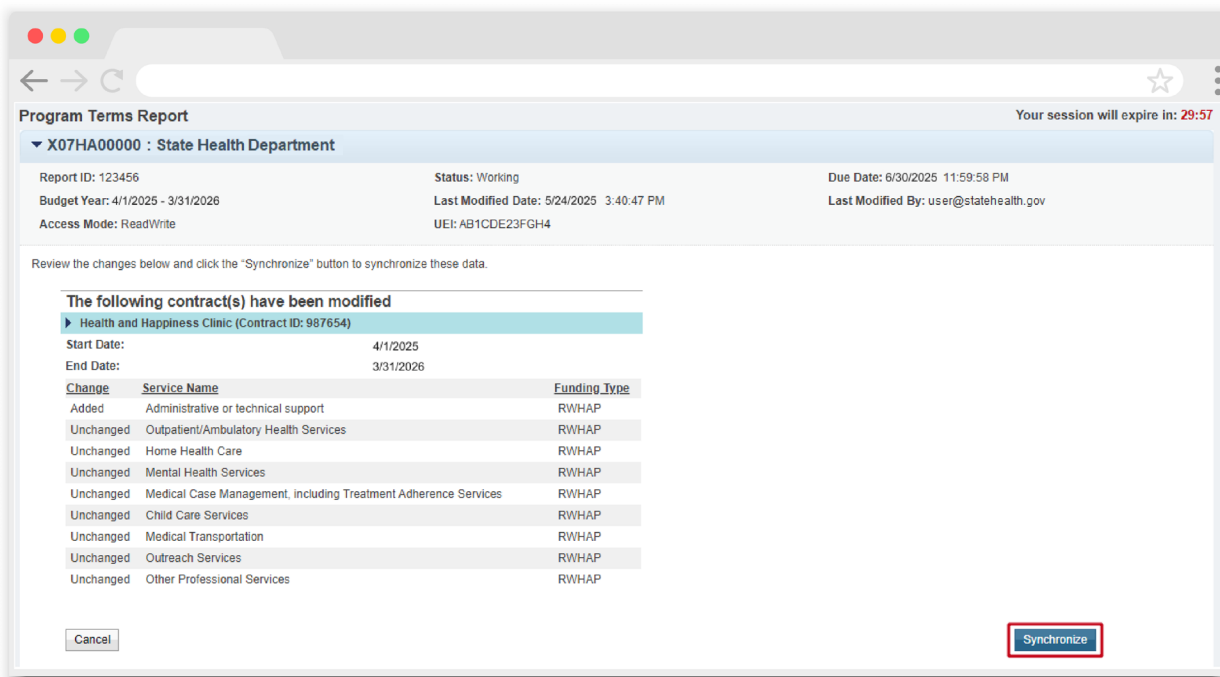


RWHAP-related funded services and contracts funded solely through RWHAP-related funding will not populate in the PTR.

**Figure 8. RWHAP Part B PTR: Screenshot of the Consolidated List of Contractors Page with Synchronization Warning Banner**



**Figure 9. RWHAP Part B PTR: Screenshot of the Synchronize Contract Page**



## Allocations Report

To access the Allocations Report, select “Allocations Report” in the Navigation panel on the left side of the screen. The RWHAP Part B Allocations Report comprises five sections:

- *Award Information*
- *Current FY RWHAP Part B Allocations by Program Component*
- *Current FY RWHAP Breakdown for Consortia, State Direct Services, and Emerging Communities*
- *Current FY RWHAP MAI Allocations by Program Component*
- *Legislative Requirements Checklist*

Only whole number values are allowed in the editable fields. Each field requires a response. Therefore, if you don’t receive an award type or don’t have any allocations to report for a specific category, enter a “0.”

The Allocations Report contains 35 total editable fields that you must complete using your agency’s final Notice of Award (NoA). Once you have entered a value for every field, select “Save” at the bottom-right of the page.

### Award Information

1. *RWHAP Part B Base Award:* Enter the total amount of your agency’s RWHAP Part B base award indicated on your agency’s final NoA.
2. *RWHAP Part B ADAP Earmark Award:* Enter the total amount of your agency’s RWHAP Part B ADAP earmark award indicated on your agency’s NoA.
3. *RWHAP Part B ADAP Supplemental Award:* Enter the total amount of your agency’s RWHAP Part B ADAP supplemental award indicated on your agency’s final NoA.



Not all states/territories receive a RWHAP Part B ADAP supplemental award. If your agency did not receive one, enter a “0” in this field.

5. *RWHAP Part B Emerging Communities Award:* Enter the total amount of your agency’s RWHAP Part B Emerging Communities award indicated on your agency’s final NoA.



Not all states/territories receive a Part B Emerging Communities award. If your agency did not receive one, enter a "0" in this field.

- 7. RWHAP Part B MAI Funds:** Enter the total amount of your agency's RWHAP Part B MAI funding indicated on your agency's final NoA.



Not all states/territories receive a Part B MAI award. If your agency did not receive one, enter a "0" in this field.

**Figure 10. RWHAP Part B PTR: Screenshot of the Award Information Table**

**Allocations Report**

All fields are required.

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

Budget Year Award Information	Award Amount
1. RWHAP Part B Base Award	<input type="text"/>
2. RWHAP Part B ADAP Earmark Award	<input type="text"/>
3. RWHAP Part B ADAP Supplemental Award	<input type="text"/>
4. Total RWHAP Part B ADAP Earmark + ADAP Supplemental Funds	
5. RWHAP Part B Emerging Communities Award	<input type="text"/>
6. Total RWHAP Part B Funds	
7. RWHAP Part B MAI Funds	<input type="text"/>
8. Total RWHAP Part B + MAI Funds	

## Current FY RWHAP Part B Allocations by Program Component

### 1. Part B AIDS Drug Assistance Program Subtotal

#### a. ADAP Services

- *Base Award Amount:* Enter the amount of your agency's RWHAP Part B base award that is allocated for ADAP medication purchases.
- *ADAP Earmark + ADAP Supplemental Award Amount:* Enter the combined amount of your agency's ADAP earmark and ADAP supplemental awards that is allocated for ADAP medication purchases.
- *Emerging Communities Award Amount:* Enter the amount of your agency's Emerging Communities award that is allocated for ADAP medication purchases.

#### b. Health Insurance to Provide Medications

- *Base Award Amount:* Enter the amount of your agency's RWHAP Part B base award that is allocated for ADAP insurance purchases for clients.
- *ADAP Earmark + ADAP Supplemental Award Amount:* Enter the combined amount of your agency's ADAP earmark and ADAP supplemental awards that is allocated for ADAP insurance purchases for clients.
- *Emerging Communities Award Amount:* Enter the amount of your agency's Emerging Communities award that is allocated for ADAP insurance purchases for clients.

#### c. ADAP Access/Adherence/Monitoring Services

- *Base Award Amount:* Enter the amount of your agency's RWHAP Part B base award that is allocated for supporting ADAP access, adherence, and monitoring activities.
- *ADAP Earmark + ADAP Supplemental Award Amount:* Enter the combined amount of your agency's ADAP earmark and ADAP supplemental awards that is allocated for supporting ADAP access, adherence, and monitoring activities.
- *Emerging Communities Award Amount:* Enter the amount of your agency's Emerging Communities award that is allocated for supporting ADAP access, adherence, and monitoring activities.

### 4a. Part B HIV Care Consortia / EC HIV Care Consortia

- *Emerging Communities Award Amount:* Enter the total amount of your agency's Emerging Communities award that is allocated for directly funding HIV care consortia.

**4b. Part B HIV Care Consortia Administration / EC HIV Care Consortia Administration**

- *Base Award Amount:* Enter the amount of your agency's RWHAP Part B base award that is allocated for HIV care consortia administrative activities.
- *Emerging Communities Award Amount:* Enter the amount of your agency's Emerging Communities award that is allocated for HIV care consortia administrative activities.

**4c. Part B HIV Care Consortia Planning & Evaluation / EC HIV Care Consortia Planning & Evaluation**

- *Base Award Amount:* Enter the amount of your agency's RWHAP Part B base award that is allocated for HIV care consortia planning and evaluation activities.
- *Emerging Communities Award Amount:* Enter the amount of your agency's Emerging Communities award that is allocated for HIV care consortia planning and evaluation activities.

**4d. Part B HIV Care Consortia CQM / EC HIV Care Consortia CQM**

- *Base Award Amount:* Enter the amount of your agency's RWHAP Part B base award that is allocated for HIV care consortia clinical quality management (CQM) activities.
- *Emerging Communities Award Amount:* Enter the amount of your agency's Emerging Communities award that is allocated for HIV care consortia CQM activities.

**7. Part B Clinical Quality Management**

- *Base Award Amount:* Enter the amount of your agency's RWHAP Part B base award that is allocated for supporting CQM activities.
- *ADAP Earmark + ADAP Supplemental Award Amount:* Enter the combined amount of your agency's ADAP earmark and ADAP supplemental awards that is allocated for supporting CQM activities.
- *Emerging Communities Award Amount:* Enter the amount of your agency's Emerging Communities award that is allocated for supporting clinical quality management activities.



The combined total amount allocated to clinical quality management in all fields of the following rows must not exceed 5 percent of your total award or \$3 million (whichever is smaller):

- 4d. *Part B HIV Care Consortia CQM / EC HIV Care Consortia CQM*
- 7. *Part B Clinical Quality Management*
- 3. *Clinical Quality Management of the Current FY RWHAP MAI Allocations by Program Component table*

#### 8. *Part B Recipient Planning and Evaluation Activities*

- *Base Award Amount:* Enter the amount of your agency's RWHAP Part B base award that is allocated for supporting planning and evaluation activities.
- *ADAP Earmark + ADAP Supplemental Award Amount:* Enter the combined amount of your agency's ADAP earmark and ADAP supplemental awards that is allocated for supporting planning and evaluation activities.
- *Emerging Communities Award Amount:* Enter the amount of your agency's Emerging Communities award that is allocated for supporting planning and evaluation activities.



The combined total amount allocated to planning and evaluation in all fields of the following rows must not exceed 10 percent of your total award:

- 4c. *Part B HIV Care Consortia Planning & Evaluation / EC HIV Care Consortia Planning & Evaluation*
- 8. *Part B Recipient Planning and Evaluation Activities*
- 4. *Recipient Planning & Evaluation Activities of the Current FY RWHAP MAI Allocations by Program Component table*

#### 9. *Recipient Administration*

- *Base Award Amount:* Enter the amount of your agency's RWHAP Part B base award that is allocated for supporting recipient administration activities.
- *ADAP Earmark + ADAP Supplemental Award Amount:* Enter the combined amount of your agency's ADAP earmark and ADAP supplemental awards that is allocated for supporting recipient administration activities.

- *Emerging Communities Award Amount:* Enter the amount of your agency's Emerging Communities award that is allocated for supporting recipient administration activities.



The combined total amount allocated to administration in all fields of the following rows must not exceed 10 percent of your total award:

- 4b. *Part B HIV Care Consortia Administration / EC HIV Care Consortia Administration*
- 9. *Recipient Administration*
- 5. *Recipient Administration of the Current FY RWHAP MAI Allocations by Program Component table*



The combined total amount allocated to planning and evaluation and recipient administration must not exceed 15 percent of your total award.



**Figure 11. RWHAP Part B PTR: Screenshot of the Current FY RWHAP Part B Allocations by Program Component Table**

Current FY RWHAP Part B Allocations by Program Component								
	1. Base Award		2. ADAP Earmark + ADAP Supplemental Award		3. Emerging Communities (EC) Award		4. Total	
	Amount	Percent	Amount	Percent	Amount	Percent	Amount	Percent
<b>1. Part B AIDS Drug Assistance Program Subtotal</b>								
a. ADAP Services								
b. Health Insurance to Provide Medications								
c. ADAP Access/Adherence /Monitoring Services								
<b>2. Part B Health Insurance Premium &amp; Cost Sharing Assistance for Low Income Individuals</b>								
<b>3. Part B Home and Community-based Health Services</b>								
4a. Part B HIV Care Consortia / EC HIV Care Consortia								
4b. Part B HIV Care Consortia Administration / EC HIV Care Consortia Administration								
4c. Part B HIV Care Consortia Planning & Evaluation / EC HIV Care Consortia Planning & Evaluation								
4d. Part B HIV Care Consortia CQM / EC HIV Care Consortia CQM								
<b>5. Part B Emerging Community Services</b>								
<b>6. Part B State Direct Services</b>								
<b>7. Part B Clinical Quality Management</b>								
<b>8. Part B Recipient Planning &amp; Evaluation Activities</b>								
<b>9. Recipient Administration</b>								
<b>10. Column Subtotals</b>								

## Current FY RWHAP Breakdown for Consortia, State Direct Services, and Emerging Communities

The *Current FY RWHAP Breakdown for Consortia, State Direct Services, and Emerging Communities* table details your agency's funding that has been allocated to core medical and support services. All fields in this table are populated by your agency's contracts in the GCMS. Review the amounts listed here, and if you need to make any changes, you must modify the associated contract(s) in the GCMS for the organization(s) providing the service. See the [GCMS Manual](#) for further assistance.



To review the RWHAP core medical and support service categories, see [PCN #16-02](#) on the HRSA HAB website.



At least 75 percent of your total award (minus funding allocated to recipient administration, planning and evaluation, and CQM) must be allocated to core medical services. As a reminder, all consortia services are considered support services.



Only consortia funding allocated to ADAP Treatments should be entered in the GCMS. Direct Services and Emerging Communities funding allocated to ADAP Treatments should be entered in the Current FY RWHAP Part B Allocations by Program Component table of the Allocations Report.

**Figure 12. RWHP Part B PTR: Screenshot of the Current FY RWHP Breakdown for Consortia, State Direct Services, and Emerging Communities Table**

Current FY RWHP Breakdown for Consortia, State Direct Services and Emerging Communities Section								
Services	1. Consortia		2. Direct Services		3. Emerging Communities		4. Total	
	Amount	Percent	Amount	Percent	Amount	Percent	Amount	Percent
<b>Core Medical Services</b>								
a. AIDS Drug Assistance Program Treatments	\$0	0.00 %					\$0	0.00 %
b. AIDS Pharmaceutical Assistance	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
c. Early Intervention Services (EIS)	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
d. Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
e. Home and Community-Based Health Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
f. Home Health Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
g. Hospice Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
h. Medical Case Management, including Treatment Adherence Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
i. Medical Nutrition Therapy	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
j. Mental Health Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
k. Oral Health Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
l. Outpatient/Ambulatory Health Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
m. Substance Abuse Outpatient Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
<b>1. Core Medical Services Allocation Subtotal</b>	<b>\$0</b>	<b>0.00 %</b>	<b>\$0</b>	<b>0.00 %</b>	<b>\$0</b>	<b>0.00 %</b>	<b>\$0</b>	<b>0.00 %</b>
<b>Support Services</b>								
a. Child Care Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
b. Emergency Financial Assistance	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
c. Food Bank/Home Delivered Meals	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
d. Health Education/Risk Reduction	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
e. Housing	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
f. Linguistic Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
g. Medical Transportation	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
h. Non-Medical Case Management Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
i. Other Professional Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
j. Outreach Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
k. Psychosocial Support Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
l. Referral for Health Care and Support Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
m. Rehabilitation Services	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
n. Respite Care	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
o. Substance Abuse Services (residential)	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %	\$0	0.00 %
<b>2. Support Services Allocation Subtotal</b>	<b>\$0</b>	<b>0.00 %</b>	<b>\$0</b>	<b>0.00 %</b>	<b>\$0</b>	<b>0.00 %</b>	<b>\$0</b>	<b>0.00 %</b>
<b>3. Services Allocation Total</b>	<b>\$0</b>	<b>0.00 %</b>	<b>\$0</b>	<b>0.00 %</b>	<b>\$0</b>	<b>0.00 %</b>	<b>\$0</b>	<b>0.00 %</b>

## Current FY RWHAP MAI Allocations by Program Component

The Minority AIDS Initiative (“MAI”) is a statutory requirement to provide additional funding to RWHAP Parts A, B, C, D, and F to improve access to HIV care and health outcomes for racial and ethnic minority populations disproportionately affected by HIV. See 42 U.S.C. § 300ff-121 (§ 2693 of the Public Health Service Act).

The *Current FY RWHAP MAI Allocations by Program Component* table ([Figure 13](#)) contains five editable fields that must be completed:

1. *Education to increase minority participation in ADAP:* Enter the amount of your agency’s MAI funding that is allocated for education activities.
2. *Outreach to increase minority participation in ADAP:* Enter the amount of your agency’s MAI funding that is allocated for outreach activities.
3. *Clinical Quality Management:* Enter the amount of your agency’s MAI funding that is allocated for supporting CQM activities.
4. *Recipient Planning & Evaluation Activities:* Enter the amount of your agency’s MAI funding that is allocated for supporting planning and evaluation activities.
5. *Recipient Administration:* Enter the amount of your agency’s MAI funding that is allocated for supporting recipient administration activities.



Do not enter RWHAP Part B MAI funding into the GCMS. Only enter MAI funding information in the the *Current FY RWHAP MAI Allocations by Program Component* table in the Allocations Report.

**Figure 13. RWHP Part B PTR: Screenshot of the Current FY MAI Allocations by Program Component Table and Core Medical Services Requirement Waiver Checkbox**

The screenshot shows a web browser window with a title bar and navigation icons. The main content area displays a table titled "Current FY RWHP MAI Allocations by Program Component". The table has three columns: "Program Component", "MAI Award Amount", and "Percent". There are six rows of data. The first two rows are for "Education to increase minority participation in ADAP" and "Outreach to increase minority participation in ADAP". The next three rows are for "Clinical Quality Management", "Recipient Planning & Evaluation Activities", and "Recipient Administration". The final row is a total row labeled "6. MAI Allocations Total". The "Percent" column for the last three rows and the total row is blacked out. Below the table is a checkbox labeled "Recipient received waiver for 75% core medical services requirement."

	MAI Award Amount	Percent
1. Education to increase minority participation in ADAP		
2. Outreach to increase minority participation in ADAP		
3. Clinical Quality Management		
4. Recipient Planning & Evaluation Activities		
5. Recipient Administration		
6. MAI Allocations Total		

☐ Recipient received waiver for 75% core medical services requirement.

Below the *Current FY RWHP MAI Allocations by Program Component* table, there is a checkbox that you should select if your agency received a waiver for the 75 percent core medical services requirement (Figure 13). You will receive a validation message on your report if you do not select the waiver checkbox and have not met the 75 percent core medical services requirement based on the allocations entered. If you are unsure if your organization received a waiver, please contact your DSHAP project officer for further assistance.

## Legislative Requirements Checklist

The last section of the Allocations Report, the Legislative Requirements Checklist (Figure 14), is there for your reference when completing the PTR. You can quickly view the percentage or capped amount for each legislative requirement to make sure your agency is in compliance.



If you need help completing the Allocations Report, contact [RWHP Data Support](#) for assistance at 1-888-640-9356 or email [RyanWhiteDataSupport@wrma.com](mailto:RyanWhiteDataSupport@wrma.com).

**Figure 14. RWHP Part B PTR: Screenshot of the Legislative Requirements Checklist**

Legislative Requirements Checklist			
Core Medical Services Allocations	Amount	Percent (Amount/Total Service Allocations)	
ADAP	\$100,000	38.46 %	
State-Direct Services: Core Medical Services	\$100,000	38.46 %	
Emerging Communities: Core Medical Services	\$0	0.00 %	
<b>Total Core Medical Service Allocations</b>	<b>\$200,000</b>	<b>76.92 %</b>	
Support Services Allocations	Amount	Percent	
Consortia Services	\$0	0.00 %	
Consortia EC Services	\$0	0.00 %	
State-Direct Services: Support Services	\$60,000	23.08 %	
Emerging Communities: Support Services	\$0	0.00 %	
MAI Allocations for Education + Outreach Services	\$0	0.00 %	
<b>Total Support Services Allocations</b>	<b>\$60,000</b>	<b>23.08 %</b>	
<b>Total Services Allocations</b>	<b>\$260,000</b>	<b>100.00 %</b>	
CLINICAL QUALITY MANAGEMENT	Allocations	Amount	
<p>Total Clinical Quality Management Allocations must be 5% of the total X07 award or \$3 million (whichever is smaller.)</p> <p>To the right, is the maximum (Capped Amount) that may be allocated to Clinical Quality Management as well as the amount of Current Fiscal Year dollars allocated (CQM Allocations) on Clinical Quality Management. Please check to make sure the Allocations do not exceed the Capped Amount.</p>	Capped Amount	\$15,000	
	CQM Allocations	\$10,000	
PLANNING AND EVALAUTION / RECIPIENT ADMINISTRATION	Allocations	Amount	Percent
<p>Total Part B X07 Planning and Evaluation Allocations and total Recipient Administration Allocations must each be 10% or less than the total X07 award. Planning and Evaluation and Recipient Administration do not necessarily need to be 10% of each funding stream as long as the combined total of each is 10% or less of the total X07 award. In addition, Planning and Evaluation and Recipient Administration Allocations combined must not exceed 15% of the total X07 award.</p> <p>To the right, is the percentage of Planning and Evaluation Allocations divided by the Total X07 award and Recipient Administration Allocation divided by the Total X07 award. Please check to make sure these percentages are not greater than 10%. Also, shown is the percentage of the combined Planning and Evaluation and Recipient Administration Allocations divided by the Total X07 Award.</p>	Planning & Evaluation	\$10,000	3.33 %
	Recipient Administration	\$20,000	6.67 %
	Planning & Evaluation + Recipient Administration	\$30,000	10.00 %

## Validating and Submitting the PTR

After you have completed all required sections of the PTR, the next step is to validate it. The validation process looks for potential problems in the information you entered and lets you review them before the PTR is sent to your DSHAP project officer for review.

Select “Validate” in the Navigation panel on the left side of the screen to begin the validation process. Wait a few minutes for the process to complete and then refresh the page by selecting “Validate” in the Navigation panel again. The system will either display your validation results or ask you to continue to wait while the validation request continues to process.

If you receive a green congratulations message, then you can proceed to submitting your report. Alternatively, you will see a table of validation results ([Figure 15](#)). Validation messages are sorted into categories. For the RWHAP Part B PTR, there are two categories of validation messages:

- **Errors** must be corrected before submitting the PTR.
- **Warnings** should be addressed, if possible, to prevent your DSHAP project officer from returning the report to you. You are still able to submit your report with warnings by adding a comment for each warning you receive.

To add a comment to a warning, select “Add Comment” under the “Actions” column to the right of the warning validation. A new window will appear for you to enter your comment. When finished, select “Save” at the bottom of the text box. In your comment, provide an explanation regarding the warning. The comment does not change the information in your report.

If you make changes to the information in your report, you must validate your report again before you are able to submit it.

Figure 15. RWHAP Part B PTR: Screenshot of the Validation Results Page

**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
No report validation errors found.					

**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
No report validation errors found.					

**Allocations Report**

Row No.	Check No.	Message	Type	Comment Count	Action
1	22	Total Clinical Quality Management allocations must be no more than 5% of the total X07 award or \$3 million (whichever is smaller).	Error	0	



If you need help understanding or resolving a specific validation message, contact RWHAP Data Support at 1-888-640-9356 or email [RyanWhiteDataSupport@wrma.com](mailto:RyanWhiteDataSupport@wrma.com).

Once you have addressed all validation messages as necessary, you are ready to submit your report. To submit the report, select "Submit" in the Navigation panel on the left side of the screen. On the next page (Figure 16), enter a comment in the text box with any meaningful feedback you have related to your PTR submission. Read and acknowledge the statement under the comment box by selecting the checkbox. Once done, select the "Submit" button at the bottom of the page.



**Figure 16. RWHAP Part B PTR: Screenshot of the Submit Report Page**

**Submit Report**

A field with an asterisk \* before it is a required field.

Please enter comments regarding your certification.

\* Comments:

Rich text editor toolbar with icons for bold, italic, underline, font color, background color, link, unlink, list, and other formatting options. The font size is set to 12px.

Design Preview

Characters remaining: 3000

☐ I certify that the data in this report is accurate and complete. I understand that reporting accurate and complete data is a condition of this grant award and is subject to federal audit.

**Submit**



## Frequently Asked Questions

### **My PTR says it is “locked” and I cannot edit anything. What does that mean?**

Another user from your agency is accessing your report. If you believe this is an error, contact Ryan White Data Support by phone at 1-888-640-9356 or via email at [RyanWhiteDataSupport@wrma.com](mailto:RyanWhiteDataSupport@wrma.com).

### **Is my agency required to upload documents to complete the PTR?**

Yes, you must complete and upload the required documents as listed in the RWHAP Part B PTR instructions in the File Upload section of the PTR. See the [File Upload](#) section for details.

### **How do I add a new organization to the GCMS provider directory?**

Email RWHAP Data Support at [RyanWhiteDataSupport@wrma.com](mailto:RyanWhiteDataSupport@wrma.com) to have the organization added to the directory. Be sure to include the organization’s full name, complete street address, federal Employer Identification Number (EIN), and a contact person for the agency including their name, title, phone number, and email address.

### **If my agency awards part of our grant to subrecipients, why is our agency not marked as an administrative agent, fiscal intermediary, or lead agency in the GCMS?**

As a recipient, your agency is expected to manage all RWHAP funds. Management of RWHAP funds includes but is not limited to selecting subrecipients, awarding contracts, providing clinical quality management guidelines, and ensuring subrecipient compliance with RWHAP policies. As a recipient, you may choose to delegate some of your agency’s responsibilities. If your agency does choose to delegate some responsibilities to a third party, this entity would be classified as an administrative agent, fiscal intermediary, or lead agency. See the Glossary for definitions of these terms.

### **There are no contracts listed on the CLC Report page. What do I do?**

The information displayed on the CLC Report page is populated from the contracts you entered into the GCMS. If there are no contracts listed in the CLC Report, you may have pending changes that need to be synchronized or you may not have any contracts entered that overlap your grant’s budget year.

Please refer to the [CLC section](#) for more information on reviewing and synchronizing contract changes or the [GCMS Manual](#) for assistance adding and modifying contracts.

**Do I need to enter contracts funded through RWHAP-related funding (program income and/or pharmaceutical rebates) for the PTR?**

It is recommended to add services funded through RWHAP-related funding (including program income and pharmaceutical rebates) to your contracts, though it is not required for your PTR submission. If these services are not added during the completion of your PTR, then they will need to be entered into the contracts in the GCMS for the completion of the RSR.

**I entered my RWHAP-related funded contracts into the GCMS. Why aren't they being imported to my CLC Report or Allocations Report?**

The PTR only captures RWHAP funding. RWHAP-related-funded services will not show up in your Allocations Report or CLC. Services funded with RWHAP-related funding are reported on the RSR. It is not required to enter information on RWHAP-related funded services for completion of the PTR, but it must be done before completion of the RSR. Do not enter any funding amounts for RWHAP-related funding into the GCMS or PTR. Agencies should develop policies to establish who will be responsible for entering RWHAP-related funded services into contracts. Please contact RWHAP Data Support at 1-888-640-9356 or email [RyanWhiteDataSupport@wrma.com](mailto:RyanWhiteDataSupport@wrma.com) if you have any questions.

**Do you enter contracts into the GCMS for RWHAP Part B ADAP base funds?**

No. RWHAP Part B ADAP funds are only entered into the Allocations Report section of the PTR.

**Are MAI funds captured in the GCMS or PTR?**

MAI funds allocated to administration and client services are captured in the PTR in the Allocations Report section. Do not enter MAI funding information into contracts in the GCMS. See the Allocations Report section for details.

**Are the contracts I entered into the GCMS also used for other RWHAP reports?**

Yes, RWHAP Part B contract information is also used to populate the RWHAP Services Report (RSR).

**The core medical and support services table in the Allocations Report is empty, and I cannot edit the fields. What do I do?**

Core medical and support services allocations are populated in the PTR from your agency's contracts entered into the GCMS. Therefore, you will need to make the required updates in the GCMS. See the [GCMS Manual](#) for more details. Once you have updated any services, you will need to synchronize the changes in the CLC.

**How can we correct funding amounts in the report?**

If your agency needs to change amounts allocated to administrative activities, update those amounts in the Allocations Report section of your PTR. If your agency needs to change amounts allocated to client services, update those amounts in the associated contract(s) in the GCMS. See the [GCMS Manual](#) for more details.

**The Allocations Report or CLC are not capturing my contracts even though I have entered them in the GCMS. What do I do?**

Information entered into the GCMS is not automatically pulled into the Allocations Report or CLC once your agency's PTR has been opened. You will need to synchronize the changes you have made to your contracts with your report. See the [CLC section](#) for details.

**How can I tell if my PTR was submitted?**

The status of your report is listed in the status column in your PTR Inbox as well as the status field of the report header. If your report has been submitted, it will advance to "Review" status. It will advance to "Submitted" status once it has been accepted by your DSHAP project officer and to "Accepted" status once it has been accepted by the project quality controller (PQC).

**Can I edit my report after I submit it?**

No. Once your report has been submitted, you cannot edit it. However, you may ask your DSHAP project officer or PQC to return your report to you for changes.

# Glossary

**Administrative Agent:** An entity that functions to assist the grant recipient, consortium, or other planning body in carrying out administrative activities (e.g., disbursing program funds, developing reimbursement and accounting systems, developing funding announcements, monitoring contracts).

**Allocations:** The proposed allotment of funds to their different service categories.

**Consolidated List of Contractors (CLC):** Summarizes each RWHAP-funded contract, the contract amount, and the service(s) provided under the contract.

**Consortia:** An association of public and nonprofit health care and support service providers and community-based organizations with which the state/territory establishes a legal agreement to conduct specific activities outlined in the RWHAP legislation for a specific region(s) or the entire state/territory.

**Core Medical Services:** A set of essential, direct health care services provided to people with HIV and specified in the Ryan White HIV/AIDS Treatment Extension Act. For definitions of each core medical service category, please see [PCN 16-02: RWHAP Services: Eligible Individuals and Allowable Uses of Funds](#) on the HRSA HAB website.

**Emerging Communities Funding:** Funding distributed to the states or territories for communities that report between 500 and 999 cumulative reported AIDS cases over the most recent five years.

**Fiscal Intermediary:** An administrative agent that acts on the behalf of the recipient to monitor the use of its RWHAP funds.

**Grantee Contract Management System (GCMS):** A data-storage system that allows recipients to enter and maintain RWHAP contracts.

**Lead Agency:** An entity with which the state/territory establishes a legal agreement to do one or more of the following: conduct needs assessments, engage in planning activities, manage procurement processes, ensure delivery of comprehensive services to people with HIV, and/or conduct program and fiscal monitoring.

**Minority AIDS Initiative (MAI):** MAI is statutorily required funding “[f]or the purpose of carrying out activities ... To evaluate and address the disproportionate impact of HIV/AIDS on, and the disparities in access, treatment, care and outcomes, for racial and ethnic minorities.” 42 U.S.C. 300ff-121. By law, “the Secretary shall provide [MAI funding] for ... care grants under part B.” 42 U.S.C. 300ff-121(b)(1)(B).

**Notice of Award (NoA):** An official document from HRSA HAB stating an agency’s RWHAP funding amount and the funding terms and conditions imposed on such funding.

**Provider:** An agency funded to provide services. Services may include direct core medical and support services to clients as well as administrative and technical services.

**Recipient:** An organization receiving financial assistance directly from an HHS-awarding agency to carry out a project or program. A recipient also may be a recipient-provider if it provides direct services in addition to administering its grant.

**Recipient Administration:** Activities relating to routine grant administration and monitoring activities.

**RWHAP-related Funding of Services:** Refers to RWHAP-eligible services that are funded with program income or pharmaceutical rebates, as distinguished from direct RWHAP grant funds. See [PCN 15-03 \(Clarifications Regarding the Ryan White HIV/AIDS Program and Program Income\)](#) and [PCN 15-04 \(Utilization and Reporting of Pharmaceutical Rebates\)](#) for additional information.

**Subrecipient:** An organization that receives RWHAP funds from a recipient and is accountable to the recipient for the use of the funds. Subrecipients may provide direct client or administrative services.

**Support Services:** A set of services needed to achieve medical outcomes that affect the HIV-related clinical status of a person with HIV. For definitions of each core medical service category, please see [PCN 16-02: RWHAP Services: Eligible Individuals and Allowable Uses of Funds](#) on the HRSA HAB website.

**Synchronization:** The process of incorporating changes made in the GCMS into the report being updated.

**Validation:** A system-administered check that reviews all data entered into the PTR for consistency with RWHAP guidelines.