

This document describes the CAREWare data entry requirements for the Correctional Linkage-to-Care (CLTC) program.

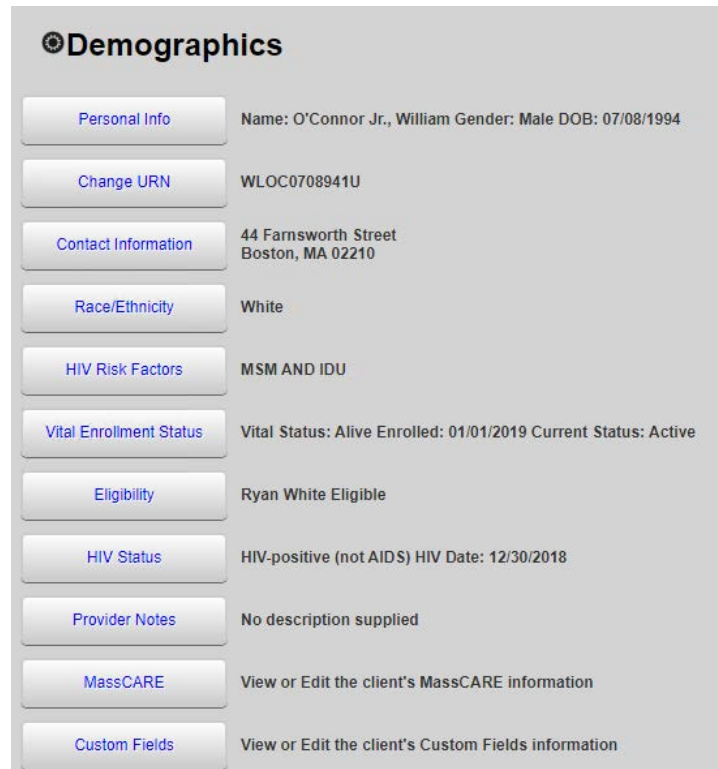
When to enter a client into CAREWare

Enter a client into CAREWare when they have completed an intake form.

Demographics

All fields on the demographics tab are required, except for these optional fields:

- Street address
- Phone number and type
- Asian subgroup, pacific subgroup, Hispanic subgroup
- Eligibility status (leave as default: Not Eligible for Ryan White)
- Provider notes

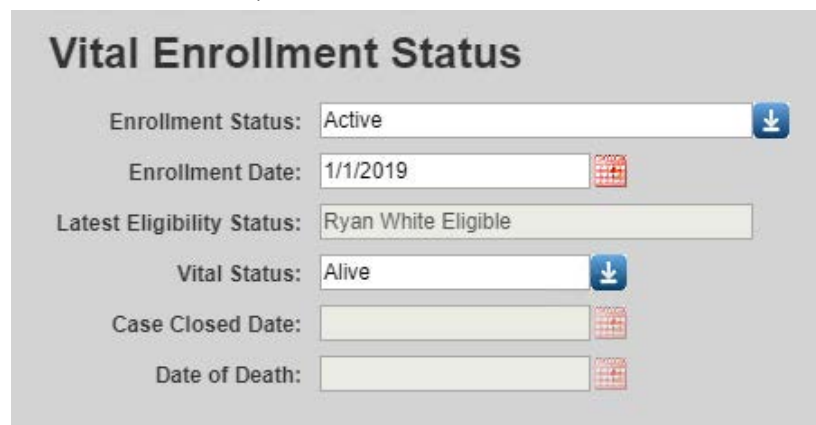


Demographics


Personal Info	Name: O'Connor Jr., William Gender: Male DOB: 07/08/1994
Change URN	WLOC0708941U
Contact Information	44 Farnsworth Street Boston, MA 02210
Race/Ethnicity	White
HIV Risk Factors	MSM AND IDU
Vital Enrollment Status	Vital Status: Alive Enrolled: 01/01/2019 Current Status: Active
Eligibility	Ryan White Eligible
HIV Status	HIV-positive (not AIDS) HIV Date: 12/30/2018
Provider Notes	No description supplied
MassCARE	View or Edit the client's MassCARE information
Custom Fields	View or Edit the client's Custom Fields information


Enrollment Status

If a client is transitioned from CLTC to medical case management, keep the enrollment status as "Active," but complete the CLTC close out fields on the Custom Fields tab (see instructions below).





Vital Enrollment Status


Enrollment Status: Active 

Enrollment Date: 1/1/2019 

Latest Eligibility Status: Ryan White Eligible

Vital Status: Alive 

Case Closed Date: 

Date of Death: 

Yellow highlights indicate changes since the last version.

HIV Status

Select the appropriate HIV positive status for HIV positive clients. For HCV clients, select “HIV-negative (affected)” (even though the client may not be affected). If the client’s HIV status is unknown, then select “HIV-indeterminate.”

HIV Status

HIV Status: ↓

HIV+ Date:

Estimated?:

AIDS Date:

Estimated?:

HIV Risk Factors

Do not use HIV Risk Factors for CLTC Clients.

Eligibility Status

Make sure to leave the eligibility as “Not Eligible for Ryan White.”

Edit

Eligibility Date: 📅

Is Eligible: ↓

Funding Source: ↓

Services

Enter the date, service name, and unit(s). Leave price as \$0. The contract will populate automatically. As a reminder, units are 1 per 15 minutes for time-based services (e.g., face-to-face or phone conversations). See the **Subservices & Definitions** document for a complete list of CLTC services.

[Find Client](#) > [Search Results](#) > [Demographics](#) > [Services](#)

[View](#) [Add](#) [Delete](#) [Receipts](#) [Help](#) [Print or Export](#)

Services

Search:

Date	Subservice	Contract	Units	Price	Total	Amount Received	Provider
11/25/2019	CLTC Intake/Initial A	July 1, 2019 - June	4	\$0.00	\$0.00	\$0.00	MDPH
09/13/2019	CLTC Linkage to M	July 1, 2019 - June	1	\$0.00	\$0.00	\$0.00	MDPH
08/30/2019	CLTC Linkage to H	July 1, 2019 - June	2	\$0.00	\$0.00	\$0.00	MDPH

CAREWare MA CLTC Data Requirements

June 2020

Yellow highlights indicate changes since the last version.



MASSACHUSETTS careware

Referred by:

This field will appear when the CLTC Intake/Initial Assessment service is selected.

Find Client > Search Results > Demographics > Services > Add Service > Add Service

[Save](#) [Back](#)

Next

Client:

Date:

Service Name:

Contract:

Units:

Price: \$

Total: \$

Referred by:

- Jail
- Testing Provider

Date of HIV/HCV Medical Appointment:

This field will appear when the CLTC Linkage to Medical Care service is selected. Select the dropdown box to fill in Linkage type (HCV/HIV), Linkage status and Confirmation of Linkage Date

Next

Client:

Date:

Service Name:

Contract:

Units:

Price: \$

Total: \$

Linkage Type:

Linkage Status:

Confirmation of Linkage Date:

Correctional Referral Type:

This field will appear when the CLTC Referrals (non medical) service is selected. Select the appropriate referral type from the search box. **If your agency is funded for Medical Transportation for people with HIV, do not report that service for CLTC clients.** Use this option for as long as CLTC clients are in the program. Options for Correctional Referral Type include: Financial benefits, Food/nutrition support services, Housing, Legal, Mental Health, Other, Other Support (HCV+ only), Peer support services, SSP/OEND, Substance use, and Transportation.

Find Client > Search Results > Demographics > Services > Add Service > Add Service

Save Back

Next

Client: William O'Connor Jr.

Date: 10/28/2019

Service Name: CLTC Referrals (non medical)

Contract: July 1, 2019 - June 30, 2020 (State)

Units: 2

Price: 0.00 \$

Total: 0.00 \$

Correctional Referral Type: Legal

Status of Referral: Closed

Confirmation of Referral Date: 10/30/2019

Annual Review

Enter the client's insurance and housing arrangement. Insurance and housing are both recorded on the CLTC intake form. All other fields on this tab – including poverty level - are optional.

Annual Screenings

Search:

Date	Type	Result	Counseled By
11/12/2019	Housing Arrangeme	Stable/Permanent	
11/12/2019	HIV Primary Care	Hospital outpatient	
09/30/2019	Substance Abuse	No	
08/01/2019	Mental Health	Yes	
04/02/2019	HIV Risk Reduction	Yes	Case mgr/social wo

Find Client > Search Results > Demographics > Annual Data > Insurance Assessm

View Add Edit Delete Bring Forward Back Help Print or Export

Insurance Assessments

Search:

Date	Primary Insurance	Secondary Insurar	High Risk Insuranc
08/04/2019	Medicare Part A/B		

Encounters

No fields on this tab are required for CLTC clients.

Custom Fields


Only the case manager name and CLTC fields (release date from jail, date closed out, and completion status) will appear, unless your agency is funded for other services that have their own custom fields (e.g., medical case management, ARCH, housing, and legal services). All fields are required, except for Case Manager Name, which is optional.


Find Client > Search Results > Demographics > Custom Fields


Save Cancel


Custom Fields


Case Manager Name:


Date Closed Out of MCM Services: 


Date Closed Out of Housing Services: 

Date Closed Out of Legal Services: 


Date Closed Out of PACT Services: 

Date Closed Out of ARCH Services: 

Date Closed Out of CLTC Services: 


Next Acuity Assessment: 

At Risk HIV Negative Client:

Reason for Closing Case: 

Care Access Client:

Reason for Closing Case

Reason for Closing Case: 

Care Access Client:

- Linked to care
- Lost to Follow-Up
- Declined Further Follow-Up
- Deceased