



COMMISSIONERS COURT  
COMMUNICATION

REFERENCE NUMBER \_\_\_\_\_

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DATE: 11/21/2023

**SUBJECT: APPROVAL OF A WORK ORDER FROM ECLINICALWORKS FOR BUSINESS OPTIMIZER CUSTOM REPORTING WITH THE RYAN WHITE PART A GRANT HIV ADMINISTRATIVE AGENCY TO MEET GRANT REPORTING REQUIREMENTS**

**\*\*\* CONSENT AGENDA \*\*\***

**COMMISSIONERS COURT ACTION REQUESTED**

It is requested that the Commissioners Court approve a Work Order from eClinicalWorks (eCW) for Business Optimizer (eBO) Custom Reporting with the Ryan White Part A Grant HIV Administrative Agency (HAA) to meet grant reporting requirements.

**BACKGROUND**

The Tarrant County Public Health (TCPH) Preventive Medicine Clinic (PMC) receives annual Ryan White HIV/AIDS program funding distribution through the Tarrant County HIV Administrative Agency. The Ryan White HIV/AIDS program funding provides program care and treatment of individuals living with HIV/AIDS. HAA serves as a pass-through entity for federal and state funds provided for these purposes. eCW is the Sole Source provider of the (TCPH) Electronic Health Records System.

PMC is required to report specific data through the Provide Enterprise Client Management Information System (Provide) for the Ryan White Part A HIV/AIDS program, Ryan White Part B HIV/AIDS program (State-R) and State Services under the grant contract compliance. Provide is utilized to document and enter all patient services and required data elements, including patient demographics, medications, appointments, and laboratory results. HAA uploads/imports specific measures to the Health Resources and Services Administration (HRSA) and the Department of State Health Services in order to meet monitoring standards. The current eBO custom reports are not consistently reporting all the required data, and it takes significant staff time to manually compile and enter it.

With approval, eCW will remotely update the current custom report to include all of the HAA Ryan White Part A Grant reporting requirements. This one-time service will cost \$800.00 and is expected to be completed within two (2) weeks after submission of the signed work order.

The Criminal District Attorney's Office has reviewed this document as to form.

**FISCAL IMPACT**

The cost of this one-time service in the amount of \$800.00 will be paid from account T4100-2024/5100011000/500000.

SUBMITTED BY:	Public Health	PREPARED BY: APPROVED BY:	Amanda McKernan
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