



California Aging Reporting System (CARS)

Overview and Guidance

**CALIFORNIA DEPARTMENT OF AGING
LONG-TERM CARE AND AGING SERVICES DIVISION**

February 2011

Foreword

How to Read This Document?

This document describes and provides further guidance for the revised CARS (CA-Getcare) File Specifications spreadsheet (***CARS File Specifications***) (1-5-2011) developed by the California Department of Aging (CDA). The five main sections of the document provide:

- 1) An introduction to CARS;
- 2) A data collection/reporting overview (including an overview of the five basic data files);
- 3) Specific technical guidance on data file requirements;
- 4) Business logic governing separate system modules; and,
- 5) Discussion of common data submission problems and how to obtain technical assistance.

The last section, Appendices, provides a visual representation of the data processing and output for each of the five files.

The narrative descriptions and business logic in this document are intended to help Area Agencies on Aging (AAAs) understand and incorporate the ***CARS File Specifications*** requirements into their own (and their providers') software systems. AAA contracted database support providers, software vendors, and/or staff can use the technical details provided in this guidance to ensure local software systems have the capability to collect and report data per specification requirements, and also provide the ability to verify data between the AAA/provider local database and CARS (e.g. through local summary reports). When possible, technical provisions are illustrated by examples. When using this guidance, reference the ***CARS File Specifications*** spreadsheet (note, there are three tabs).

TABLE OF CONTENTS

	Page
I. INTRODUCTION TO CARS	
System Purpose and Overview	1
Separate CARS Modules, Programs, Data Files	1
II. DATA COLLECTION/REPORTING OVERVIEW	
What Data Is Reported In CARS?	3
CARS Data Organization Follows NAPIS	3
Data Submission Process.....	7
Data Output.....	8
Data Review, Correction and Approval Process	9
III. TECHNICAL GUIDANCE ON DATA FILE REQUIREMENTS	
Client/Caregiver File	12
Enrollment File	13
Service Units File	15
Service-Provider File	17
Caregiver Relationship File.....	18
IV. BUSINESS LOGIC ACROSS SYSTEM MODULES	
Why There May Be Differences between Your CARS File Upload Module and NAPISCare Module	20
NAPISCare Business Logic and Troubleshooting.....	20
V. COMMON DATA SUBMISSION PROBLEMS AND ASSISTANCE	
Common Data Submission Problems	23
How to Obtain Further Technical Assistance	24
VI. APPENDICES	
Appendix A	26
Appendix B	28
Appendix C.....	39
Appendix D.....	44

Section I Introduction to CARS

System Purpose and Overview

CARS (CA-Getcare) is a modified off-the-shelf system configured by CDA contractor, RTZ Associates, to meet State and Federal data reporting requirements. Data collection and reporting must adhere to Federal and State statutes and regulations and other guidance provided by CDA (e.g. Service Categories and Data Dictionary, etc.). The purpose of CARS is to allow CDA to monitor performance data and service targeting based on federal Older Americans Act (OAA) Title III and VII B guidelines. In addition, CDA uses this data when reporting statewide performance to the Administration on Aging (AoA) in the annual National Aging Program Information System (NAPIS) State Program Report (SPR), and when reporting statewide and beginning with FY 2009-10, Planning and Service Area (PSA) level performance to the California State Legislature in the annual Statistical Fact Sheets.

CARS has transformed the existing OAA aggregate reporting system into a new, web-based system capable of providing the State with client-level data (although some aggregate data continues to be reported in CARS depending on the type of service – see Non-Registered Services). Client-level data contains demographic and service information for each unique client across all OAA programs and services. Client-level data also links clients by their specific demographic characteristics to actual service utilization. This is a much more powerful public policy tool because it allows CDA and AAAs to move resources to where the data shows the most need exists, and the most positive outcomes will be achieved.

Separate CARS Modules, Programs and Data Files

Currently, there are three data Modules in CARS (<https://ca.getcare.com>):

1. Fiscal Module – This is a web-based, *monthly* reporting and approval tool for expenditures and request for funds for existing OAA and Older Californians Act (OCA) Community-Based Services Programs, except Health Insurance Counseling and Advocacy Program (HICAP). The CARS Fiscal Module allows AAAs to enter data directly into the Expenditures and Request for Funds screen, enabling CDA staff to receive and review submissions in real-time. CDA staff have the ability to approve the submitted expenditures and request for funds, and to request further modifications from AAAs to ensure the accuracy of the submitted fiscal data. **Note:** Currently, this Module does not interface with the File Upload and NAPISCare Modules and no further guidance on the Fiscal Module is provided in this document. The Fiscal Module will be further integrated with the File Upload and NAPISCare Modules as resources become available. If you have any questions regarding this Module please contact your assigned CDA Fiscal Team Analyst, send an email to CARS@aging.ca.gov or contact RTZ Associates at (510) 986-6700 or carshelp@getcare.com.
2. File Upload Manager Module – This is a web-based, *quarterly* performance data reporting tool in CARS. Currently, only OAA program performance data is reported through this web-based Module by each AAA. Reporting is done cumulatively, in that each quarter contains data from the prior quarter(s). These data are used to compile the annual National Aging NAPIS SPR and annual Statistical Fact Sheets.
3. NAPISCare Module – This is a web-based, *annual* performance data reporting tool in CARS that allows for the annual reporting of the NAPIS SPR data to AoA.

CDA and each AAA will use this Module to verify annual data submitted in CARS. The fourth quarter submission performance data reported in the File Upload Module is populated in NAPISCare at the end of each fiscal year after AAA approval. Some manual entry is required (e.g. staffing, focal points). NAPISCare mimics the AoA State Reporting Tool design and compiles, validates and transfers the data for the NAPIS SPR to AoA.

CARS collects information on the following Title III and VII programs:

- Title III B – Supportive Services
- Title III C and III D – Nutrition and Health Promotion Services
- Title III E – Family Caregiver Support Services (FCSP). Title III E and FCSP are equivalent terms for the same program
- Title VII B – Elder Abuse Prevention

All quarterly data is submitted in the CARS File Upload Module. All data is submitted within the following five interrelated data files:

- Client/Caregiver File – contains Client Profile information for AAA clients, caregivers and their care receivers
- Enrollment File – contains client enrollment information and links services and providers to specific clients
- Service Units File – contains information on units of service provided
- Service-Provider File – contains information on service providers
- Caregiver Relationship File – links caregivers to their care recipients

Section II Data Collection/Reporting Overview

What Data is Reported In CARS?

Currently, CARS collects information on services funded and provided in accordance with OAA Title III and VII B requirements. AAAs must submit performance data to CARS for only those services funded by Title III and VII B. Please refer to the CDA Service Categories and Data Dictionary available at <http://www.cda.ca.gov/aaa/cars/default.asp>.

CARS reporting incorporates two distinct service categories: services provided to elderly clients (age 60+) and services provided to caregivers (see Table 1 below):

**Table 1
Reporting Categories in CARS**

Services Provided to Elderly Clients (Age 60+)	Services Provided to Caregivers
<i>Title III B, III C & III D, VII B</i>	<i>Title III E (Family Caregiver Support Program - FCSP)</i>
1. Registered Services*	1. Registered Services*
2. Non-Registered Services*	2. Non-Registered Services*
3. Unduplicated Number of Clients*	3. Unduplicated Number of Caregivers/Care Receivers*

*Registered and Non-Registered Services and Unduplicated Number of Clients are further defined in the section below.

Each category consists of multiple services that are tracked by enrollments, service units, providers and various other data elements. AAAs are to report enrollments, service units, etc., for only those clients/caregivers eligible for services based on Title III and VII B regulations. For example, individuals under the age of 60 are not eligible to receive Title III B services and should not be served or reported in CARS in these service categories.

CARS Data Organization Follows NAPIS

Title III B - D and VII B 1. Registered Services

NAPIS groups similar programs/services into three “clusters,” which are also used in CARS. Cluster 1 (Registered Services) requires “Detailed Client Profile” information consisting of specific demographic data elements, including Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) and Nutritional Risk. Cluster 2 (Registered Services) requires only a Summary Client Profile. This includes specific demographic data elements and Nutritional Risk scores, but excludes ADLs and IADLs.

There are two exceptions to reporting Client Profile information in Clusters 1 and 2, Registered Services. For the Home Delivered Meals (Cluster 1) and Congregate Meals Programs (Cluster 2), a small number of Non-Registered services (i.e. meals) may be added at the end of each reporting quarter. **To preserve the integrity of client-level data reporting, CDA discourages the aggregate reporting of meals in these programs.** However, this option provides CDA the ability to track meals on an ongoing basis, while providing some flexibility for AAAs to report aggregate data as they continue to register clients throughout the year. Some examples of allowable aggregate reporting in the Home Delivered Meals Program include meals provided to spouses and volunteers, and in Congregate Meals, meals provided to spouses, volunteers, participants of one-time only events, and clients who refuse to provide or divulge their

demographic information. Table 2 provides a list of Registered Services for which Client Profile information must be reported.

**Table 2
Registered Services: Titles III B, C, and D**

Registered Services, Cluster 1 – requires Detailed Client Profile, Nutrition Risk*, including ADL/IADL data		Registered Services, Cluster 2 – requires Summary Client Profile, Nutrition Risk* and <u>no</u> ADL/IADL data	
<i>Service Category</i>	<i>Funding</i>	<i>Service Category</i>	<i>Funding</i>
Personal Care	Title III B	Assisted Transportation	Title III B
Homemaker	Title III B	Congregate Meals	Title III C-1
Chore	Title III B	Nutrition Counseling	Titles III C-1, C-2 & III D
Home Delivered Meals	Title III C-2		
Adult Day Care / Health	Title III B		
Case Management	Title III B		

*Nutrition Risk profile required for Home Delivered Meals, Case Management, Congregate Meals, and Nutrition Counseling only

2. Non-Registered Services

Cluster 3 (Non-Registered Services) does not require Client Profile information. AAAs should only report units of service and the estimated number of clients/estimated audience served for Cluster 3. Table 3 below provides a list of Non-Registered Services.

**Table 3
Non-Registered Services: Titles III B, C, D and VII B**

Non-Registered, Cluster 3 – requires units of service and the estimated number of clients/audience served			
<i>Service Category</i>	<i>Funding</i>	<i>Service Category (Cont.)</i>	<i>Funding (Cont.)</i>
Transportation	Title III B	Housing	Title III B
Legal Assistance	Title III B	Interpretation/ Translation	Title III B
Nutrition Education	Title III C-1, C-2, III D	Mobility Management Activities	Title III B
Information & Assistance	Title III B	Medication Management	Title III D
Outreach	Title III B	Mental Health	Title III B
Health Promotion	Title III D	Peer Counseling	Title III B
Other Services:		Personal Affairs Assistance	Title III B
Alzheimer's Day Care Services	Title III B	Personal/Home Security	Title III B
Cash/Material Aid	Title III B	Public Information	Title III B
Community Education	Title III B	Registry	Title III B
Comprehensive Assessment	Title III B	Residential Repairs/Modifications	Title III B
Disaster Preparedness Materials	Title III B	Respite Care	Title III B
Elder Abuse Prevention, Education & Training	Title VII B	Senior Center Activities	Title III B
Elder Abuse Prevention Training Materials	Title VII B	Telephone Reassurance	Title III B
Employment	Title III B	Visiting	Title III B
Health	Title III B		

3. Unduplicated Number of Clients

For Registered Services, CARS uses unique participant identifiers (Participant ID) to calculate an unduplicated count of persons served. For clients served in Registered Services, AAA must report an actual unduplicated count of persons. For clients served in Non-Registered Services, AAAs must report an estimated unduplicated count of persons served. AAA must also report a total estimated unduplicated count of persons served in Registered + Non-Registered Services (the total is estimated because it contains estimated unduplicated clients). While AAAs have the option to report estimates at the end of each reporting quarter, they **must** report estimated unduplicated client counts at the end of each fiscal year (see Table 4).

Table 4
Total Clients Served

Unduplicated Total Persons Served	Enrollments
Unduplicated Count of Persons Served For Registered Services	Required Quarterly/Annually
Estimated Unduplicated Count of Persons Served For Non-Registered Services	Optional Quarterly/Required Annually
Total Estimated Unduplicated Count of Persons Served	Optional Quarterly/Required Annually

Title III E

1. Registered Services

Client profile data reported for FCSP is not separated by Clusters (i.e. Cluster 1 or 2), but rather by groups. Group 1 consists of Registered Services and Group 2 of Non-Registered Services. Furthermore, CDA requires Client Profiles for both caregivers and their care receivers in this program. The "FCSP Reference Guide" tab in the **CARS File Specifications** provides guidance for caregiver and care receiver Client Profile reporting requirements. Also, please reference Appendices A and B for further explanation of how data is processed for this program.

All services indicated in Tables 5 and 6 below are funded through Title III E. AAAs must separately report caregiver and care receiver information by specific FCSP service component (i.e. Caregivers Caring for the Elderly and Grandparents/Elderly Caregivers Caring for Children).

**Table 5
Registered Services: Title III E**

Registered Services, FCSP Caregivers Caring for the Elderly*	Registered Services, FCSP Grandparents/Elderly Caregivers Caring for Children
<i>Service Category</i>	<i>Service Category</i>
1. Support Services Caregiver Assessment Caregiver Counseling Caregiver Peer Counseling Caregiver Support Groups Caregiver Training Caregiver Case Management	1. Support Services Caregiver Assessment Caregiver Counseling Caregiver Peer Counseling Caregiver Support Groups Caregiver Training Caregiver Case Management
2. Respite Care In-Home Supervision Homemaker Assistance In-Home Personal Care Home Chore Out-Of-Home Day Care Out-Of-Home Overnight Care	2. Respite Care In-Home Supervision Homemaker Assistance In-Home Personal Care Home Chore Out-Of-Home Day Care Out-Of-Home Overnight Care
3. Supplemental Services Assistive Devices for Caregiving Home Adaptations for Caregiving Caregiving Services Registry Caregiving Emergency Cash / Material Aid	3. Supplemental Services Assistive Devices for Caregiving Home Adaptations for Caregiving Caregiving Services Registry Caregiving Emergency Cash / Material Aid

* Must report ADLs/IADLs for Care Receivers only

2. Non-Registered Services

As with Titles III B, C, D and Title VII B Services, FCSP Non-Registered Services do not require Client Profile information. AAA may only report units of service and the estimated number of clients/estimated audience served. Table 6 below provides a list of Non-Registered Services for Title III E.

**Table 6
Non-Registered Services: Title III E**

Non-Registered Services, FCSP Caregivers Caring for the Elderly	Non-Registered Services, FCSP Grandparents/Elderly Caregivers Caring for Children
<i>Service Category</i>	<i>Service Category</i>
Access Assistance <ul style="list-style-type: none"> ▪ Caregiver Information and Assistance ▪ Caregiver Outreach ▪ Caregiver Interpretation ▪ Caregiver Legal Resources 	Access Assistance <ul style="list-style-type: none"> ▪ Caregiver Information and Assistance ▪ Caregiver Outreach ▪ Caregiver Interpretation ▪ Caregiver Legal Resources
Information Services <ul style="list-style-type: none"> ▪ Public Information on Caregiving ▪ Community Education on Caregiving 	Information Services <ul style="list-style-type: none"> ▪ Public Information on Caregiving ▪ Community Education on Caregiving

3. Unduplicated Persons Served

CARS uses unique participant identifiers (Participant ID) to calculate an unduplicated count of caregivers served and their care receivers. **For caregivers served in Registered Services, an unduplicated count of caregivers must be reported along with their related unduplicated count of care receivers.** In addition, AAAs must report an unduplicated count of all caregivers in CARS (i.e. if multiple caregivers care for one care receiver, Client Profile/Service Units must be reported for all caregivers). For caregivers reported in Non-Registered Services, AAAs must report an estimated unduplicated count of caregivers served. There is no need to report an estimated unduplicated count of care receivers for Non-Registered Services. While AAAs have the option to report estimated caregivers served at the end of each reporting quarter, they **must** report estimated unduplicated caregiver counts at the end of each fiscal year. There is no need to report a combined total of unduplicated caregivers served in Registered and Non-Registered Services in this program (see Table 7).

**Table 7
Total Clients Served (Title III E)**

Unduplicated Total Persons Served		
	Caregivers	Care Receivers
<i>Unduplicated Count of Persons in Registered Services</i>		
Caregivers Caring for the Elderly	Required Quarterly/Annually	Required Quarterly/Annually
Caregivers Caring for Children	Required Quarterly/Annually	Required Quarterly/Annually
<i>Estimated Unduplicated Count of Persons in Non-Registered Services</i>		
Caregivers Caring for the Elderly	Optional Quarterly/Required Annually	Not Required
Caregivers Caring for Children	Optional Quarterly/Required Annually	Not Required
<i>Total Estimated Unduplicated Count of Persons Served</i>		
Caregivers Caring for the Elderly	Not Required	Not Required
Caregivers Caring for Children	Not Required	Not Required

Data Submission Process

The CARS reporting process consists of three stages:

Stage 1. Recording - providers and AAAs track clients and services received through the AAA data management system.

Stage 2. Exporting - at the end of the quarter, AAAs create five files that represent the data in their data management system.

Stage 3. Uploading/CARS processing (i.e. data submission) - these five files are then uploaded and processed by CARS to meet CDA and AoA requirements for reporting. CARS applies CDA logic as explained in this guidance document to count and display completed data records from the file submissions.

All data must comply with the CDA Cumulative Submission Rule. AAAs should submit cumulative data with each submission as follows:

- The first submission will contain Q1 data.
- The second submission will contain Q1 resubmitted and Q2 data, still separated by quarter, not combined.
- The third submission will contain Q1, Q2, and Q3 data (separated by quarter).
- The fourth (and final) submission will contain Q1, Q2, Q3, and Q4 data (i.e. data for the entire fiscal year, separated by quarter). All quarter specific data must contain data for that quarter only, not a cumulative for prior quarters.

This cumulative submission process will allow AAAs to correct previously submitted data without adjusting old files. For example, if the first submission omitted 1 enrollment and 10 home delivered meals, these counts should be included with the second submission as an update to Q1 data. CARS will automatically adjust Q1 numbers accordingly in the second submission reports. See Table 8 below for clarification:

**Table 8
Cumulative Submission Process**

Services	First Submission		Second Submission			
	Q1		Q1		Q2	
	Enrollments	Units	Enrollments	Units	Enrollments	Units
Home Delivered Meals	25	100	26	110	15	80

Please note that, CARS does not over-ride revised Q1 numbers submitted in the original first submission as long as AAA staff have reviewed and approved the data in this submission. Therefore, it is important for AAA staff to review and **approve** each quarterly submission.

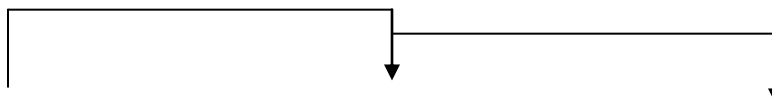
Once data passes technical validations (usually within 48 hours of file submission), AAA staff will receive an email notification from RTZ Associates with an attached “CARS Quarterly Error Report” informing them whether their files are ready for review and approval or if they need to be resubmitted due to technical errors. RTZ Associates will also send a copy of this notification with the error report to CDA at DataTeam.Reports@aging.ca.gov. AAAs must approve their reports within ten working days of receiving a “passed” notification from RTZ Associates.

Data Output

After data is processed, AAAs have the ability to review their submission on various Service Summary and Demographic Summary reports in the File Upload Module prior to approving their quarterly data. During the review process, AAAs may modify any Non-Registered Services fields directly on the CARS Service Summary reports. AAAs do not have the capability to modify any Registered Services fields. At the end of each fiscal year, AAAs have the ability to see their annual data in NAPISCare reports prior to submitting their verification for these reports. Even though AAAs will have the ability to modify these reports, CDA does not encourage significant modifications. Instead, AAAs are encouraged to review their data on an ongoing basis and resubmit corrected files to more accurately reflect services provided.

Figure 1 below illustrates the flow of data from the five data files to the File Upload Module reports and then the NAPISCare Module reports.

**Figure 1
Data Flow Across Modules**



Data File Name	File Upload Reports	NAPISCare Reports
<i>Client/Caregiver File</i>	Demographic Summary Reports	Sections I - II
<i>Enrollment File</i>	Service Summary Report	Sections I - II
<i>Service Units File</i>	Service Summary Report	Sections II A -C
<i>Service-Provider File</i>	N/A*	Sections II A-C, III C
<i>Caregiver Relationship File</i>	FCSP Demographic Summary Reports	Sections I E-F

*Currently, there are no output reports in the File Upload Module that display service provider information.

The File Upload Demographic Summary reports (including those for FCSP) contain demographic data elements such as age, gender, ADLs/IADLs as required in the Client/Caregiver File and the Caregiver Relationship File (for FCSP only). The Demographic Summary of Unduplicated Total Number of Persons Served contains unduplicated client totals and is populated from the Enrollment File. The Service Summary reports (including for FCSP), contain information on service units and enrollments as required in the Enrollment and Service Units Files.

The NAPISCare reports are identical to the AoA NAPIS SPR (a blank copy of this report may be accessed at http://www.cda.ca.gov/stats/documents/spr_reports/NAPIS_SPR_Form_Aug_2008.pdf). The majority of data for these reports are automatically populated in the four sections below:

- **Section I. Elderly Clients and Caregivers.** - Displays unduplicated client/caregiver counts and appropriate demographic data;
- **Section II. Utilization and Expenditure Profiles.** - Displays service-provider information, service units, enrollments and expenditures (because the Fiscal Module does not currently interface with the NAPISCare Module, fiscal data in CARS NAPISCare will not self-populate and requires manual entry per Program Memo 10-17 available at http://www.cda.ca.gov/PM/PM_index.asp);
- **Section III. Network Profiles.** - Displays service-provider information, AAA staffing and focal points (manual data entry is required in some of these reports per Program Memo 09-17);
- **Section IV. Developmental Accomplishments.** - Displays narratives of AAA accomplishments and requires manual entry per Program Memo 10-17.

Data Review, Correction and Approval Process

AAAs must review their data submission on a quarterly basis in the File Upload Module. For guidance on how to review and finalize annual data in NAPISCare see Program Memo 10-17.

Reviewing Quarterly Data

While reviewing quarterly data for approval, look for missing elements in the following reports:

- *Service Summary* (check for enrollments and service units by each program)

- *Demographic Summary* (e.g. Home Delivered Meals, FCSP, Unduplicated Clients Served) (check for missing demographic elements, such as race, ethnicity, poverty, etc.)
- *Demographic Summary* (ADL/IADL detail by each program) (check for missing ADL/IADL elements by each ADL/IADL category)

AAAs should have the ability to query similar internal reports that will allow them to verify their data with CARS and should reference these reports when verifying data in CARS. If data in the AAA's local software system and CARS does not match, the AAA's local software/support provider and/or AAA staff should review the flat file to see if any required elements are missing. Contact the CDA Data Team at DataTeam.Reports@aging.ca.gov and RTZ Associates at carshelp@getcare.com if you need further assistance with analyzing these errors. Only data that is reported correctly and meets the required elements will be counted and recorded in the system.

Data Correction Process

Many times, the quarterly data files uploaded in CARS do not have the necessary data elements needed to accurately reflect AAA performance and AAAs notice a discrepancy between data in their internal system and data that is displayed in CARS. In other words, for various reasons, when a AAA software system generates the five flat files, some required elements are not included in these files and are not uploaded in CARS. For example, the AAA served 125 clients in Home Delivered Services as reflected in its internal database. On the other hand, the flat files uploaded to CARS have a record of only 120 clients and only 120 clients display in CARS reports. In such cases, it is impossible for RTZ Associates or CDA to know that there is a discrepancy. This means that the bulk of the problems occur in the Recording and/or Exporting stages, where the required information was not collected or where the files generated by the AAA software system do not reflect all the data that should be included, do not meet CDA file specifications, or both.

As a way to incorporate better feedback to AAAs and their technical support providers about the export process, CDA and RTZ Associates have developed a "CARS Quarterly Error Report" (Error Report). A copy of the template is posted on the CDA Website at <http://www.cda.ca.gov/aaa/cars/default.asp>. (this will be posted at a later date) This Error Report will identify whether the submitted files have met CARS File Specifications requirements and, if not, how the AAA file submissions were affected. Beginning with FY 2010-11 first submissions, RTZ Associates will provide a copy of the Error Report to each AAA upon submission of quarterly data. RTZ will also email a copy of the report to the CDA Data Team at DataTeam.Reports@aging.ca.gov. The Error Report will inform AAAs in which file the error has occurred, identify the specific field that is affected, and why the error has occurred. The Error Report will also identify whether the error has resulted in a warning, deletion of a record, or failed files. Finally, it will identify how many records the error affects.

The Error Report is based entirely on the CARS File Specifications, making sure that: 1) all required values are present; 2) all look-up values reference only items in the look-up tables; 3) the identifiers referenced within the files are defined; and 4) the records follow the logic set forth by the CARS File Specifications and CARS Overview and Guidance documents.

AAAs are encouraged to correct these errors throughout the course of the year (in some instances, the submission will not be considered complete if the errors have not been corrected). If the Error Report contains only "warning" or "record discarded" errors, AAAs may correct these errors and resubmit their files within 10 working days of receiving the Error Report.

AAAs may also correct these errors in time for their next submission. If the Error Report contains “fail” or “automatic fail” errors, the AAA quarterly submission will not be considered complete until the AAA corrects and resubmits these files. AAAs must correct and resubmit their files within 10 working days of receiving the error report.

Please Note: All errors with the result “record discarded” will receive a “fail” notification starting with FY 2011-12 submissions.

Appendix D provides further detail on how to reference the “CARS Quarterly Error Report” to make the necessary corrections.

Data Approval

After AAAs receive the “CARS Quarterly Error Report,” they must review, correct (if necessary) and approve their quarterly submission data within 10 working days.

Section III Technical Guidance on Data File Requirements

Please refer to the **CARS File Specifications** spreadsheet and **Appendices A – C** when reviewing this section. The Appendices provide a visual representation of how each of the five files is interrelated.

Client/Caregiver File

This file collects client/caregiver and care receiver Client Profile information for Registered Services. It is the first of five tab-delimited flat files uploaded to CARS during each reporting quarter.

The Client Profile consists of various demographic data elements, ADLs and IADLs, and Nutritional Risk Status. It is possible that an individual who is a current AAA client with an already established Participant ID (for example, a Title IIIB or IIIC services client) is also a care receiver in FCSP. If the care receiver is not a current AAA client and does not have an already established “Participant ID,” a unique “Participant ID” must be created for this individual and reported in this file. In addition, AAAs must track and report the Client Profile for all caregivers.

Note: *In very rare circumstances, it is also possible that an FCSP caregiver is also a current AAA client who receives Title III B/C/D services and already has an established Participant ID. In these circumstances, you may use the existing Title III B/C/D services Participant ID when delivering and reporting Title III E services for the same individual.*

See Tables 2 and 5 for a list of Registered Services for which Client Profile information must be reported.

Also note the following additional conditions that must be met for data contained in this file:

- Each data element must be reported in its current order (see **CARS File Specifications** spreadsheet, “Specifications” tab).
- Fields have defined values (e.g. gender, nutrition risk) to ensure consistency (see **CARS File Specifications** spreadsheet, “Lookup Tables” tab for these values).
- CARS requires client-level data reporting for Registered Services. The client records for all clients enrolled in the Registered Services must contain the data elements as specified in this file, unless when noted as an optional field (see **CARS File Specifications** spreadsheet, “Specifications” tab).
- There should be no blank values submitted in this file when the data element is required. AAAs must use the appropriate “Lookup Table” value when reporting data for required fields.

For example, if a AAA has been unable to obtain data in required fields, instead of reporting blank fields, the “Declined to State” or “Missing” values should be used as specified by “Lookup Tables” for those fields. As a general reference, “Missing” will always be identified by a 0 in CARS.

In addition, if a AAA has been unable to obtain age data in the “Birth Date” field for which there is no “Lookup Table” reference, this field should be identified as a 0000-00-00 or 0, rather than submitted as a blank.

- “Participant ID” in this file must also correspond to a “Participant ID” in the Enrollment File, the Service Unit File and the Caregiver Relationship File (if appropriate) for the reporting period.
- The same “Participant ID” assigned to a client receiving Title III B, C, D or VII B services must be used when reporting this client as a care receiver whose caregiver receives Title III E services.
- To reduce file errors and rejections, we request that AAAs not include any labels in the data file (i.e. headers such as "Participant ID", "Birth Date", "Poverty Status", etc.).
- Submitted client identifiers will be stored in an encrypted database.

Enrollment File

This is the second of five tab delimited flat files uploaded to CARS during each reporting quarter. The Enrollment File identifies the number of new and current participants receiving services each year and records the reason for the deactivated status of any participants leaving the program or service.

This file contains enrollment information for clients/caregivers who are currently enrolled (active) or whose enrollment has been terminated (deactivated) in Registered Services (client-level enrollment information is optional for Non-Registered Services). It also contains information on the types of services received by specific clients/caregivers and identifies the provider responsible for the reported services. Please note that for FCSP, the “Service ID” field must be linked to a caregiver “Participant ID”, not to a care receiver. There is no need to report care receivers in this file; however, if a care receiver is an already established AAA client, their record should be automatically included in this file. Appendices A and B illustrate this in further detail. In addition, AAAs must track and report enrollments for all caregivers in this file. In Non-Registered Services where clients/caregivers are not required to have an assigned “Participant ID,” an estimated unduplicated count of persons enrolled must be reported. AAAs may report an estimated unduplicated count of persons served on a *quarterly* basis, but must report an estimated unduplicated count of persons served in Non-Registered Services in their *final* CARS data submission for the year. If the AAA data management system does not have the capability to export aggregate data for Non-Registered enrollments, AAAs also have the capability to manually enter aggregate, Non-Registered enrollments directly in CARS for each reporting quarter.

Also note the following additional conditions that must be met for data contained in this file:

- Each data element must be reported in its current order (see **CARS File Specifications** spreadsheet, “Specifications” tab).
- The “Reason for Deactivation” field has defined values to ensure consistency (see **CARS File Specifications** spreadsheet, "Lookup Tables" tab for these values).
- CARS requires client-level data reporting for Registered Services. All data collected for clients enrolled in the Registered Services must contain these data elements as specified in this file, unless when noted as an optional field.

- Since the information contained in this file pertains to clients/caregivers who received Registered Services, the “Participant ID” **must** be reported in this file to ensure accurate unduplicated client counts. If the “Participant ID” is missing, the record will be discarded.
- “Participant ID” in this file must also correspond to a “Participant ID” in the Client/Caregiver File, the Service Unit File and the Caregiver Relationship File (if appropriate) for the reporting period.
- If a “Participant ID” has not been assigned to an individual served in Non-Registered Services **and** the AAA internal system does not have the capability to export aggregate enrollments for Non-Registered Services, AAAs have the capability to manually enter aggregate, Non-Registered Services enrollments directly in CARS Service Summary Reports for each reporting quarter. Note, that for each quarterly submission, the enrollments from the previous quarter will have to be re-entered (click on “view by quarter” link to enter aggregate data directly on the screen).
- “Provider ID” in this file must also correspond to a “Provider ID” in the Service-Provider File, the Service Units File, and the Caregiver Relationship File (if appropriate) for the reporting period.
- “Service ID” in this file must also correspond to a “Service ID” in the Service-Provider File, the Service Unit File and the Caregiver Relationship File (if appropriate) for the reporting period.
- An individual reported in a Registered Service **must receive services** during the reporting period for services/enrollment to be counted.

For example, if Client A is reported in the Enrollment File during the first quarter submission, but has not received any services as indicated in the Service Units File and Service-Provider File, the client record will be discarded by CARS for this submission. On the other hand, if Client A is reported in the Enrollment File during the third quarter cumulative submission, has received services during the second reporting period as indicated in the Service Units File and Service-Provider File, the client record will be counted by CARS. This method ensures that as long as a client has received services at some point during the reporting year, they will be counted as a client served.

- If a “Deactivation Date” is reported in this file, the “Reason for Deactivation” field should not have a value of 1 (refer to “Lookup Tables” for detail on values for this field).
- To reduce file errors and rejections, we request that AAAs not include any labels in the data file (i.e. headers such as "Participant ID", "Provider ID", "First Enrollment Date", etc.).
- Submitted client identifiers will be stored in an encrypted database.

Service Units File

This is the third of five tab delimited flat files uploaded to CARS during each reporting quarter. This file includes information on units of service provided.

This file contains service unit information for clients/caregivers served in Registered and Non-Registered Services. Since there are no service requirements for care receivers, service units contained in this file apply only to clients or caregivers served. **In addition, if multiple caregivers care for one care receiver and receive a service from which they (i.e. both caregivers) benefit, AAAs should assign the service unit to the caregiver who initiated the service request.** For example, if a son and his wife care for an elderly parent and receive 2 hours of Respite Care – In-Home Supervision, they both benefit from this service. However, since the son requested the service, the service unit is tied to his participant ID. The AAA will report his Client Profile information and that he received 2 hours of Respite Care, while only the Client Profile information is reported for his wife (with appropriate service units tied to her Participant ID). This will ensure that AAAs are not over-reporting service units or arbitrarily assigning them to the multiple caregivers. This file also contains information on the types of services received by specific clients/caregivers and identifies the provider responsible for the provision of the reported services. Each service unit must also display its unit name and quantity.

Also note the following additional conditions that must be met for data contained in this file:

- Each data element must be reported in its current order (see **CARS File Specifications** spreadsheet, “Specifications” tab).
- The “Unit Name” field has defined values to ensure consistency (see **CARS File Specifications** spreadsheet, "Lookup Tables" tab for these values).
- CARS requires client-level data reporting for Registered Services. All data collected for clients enrolled in the Registered Services must contain these data elements as specified in this file, unless when noted as an optional field.
- “Provider ID” in this file must also correspond to a “Provider ID” in the Enrollment File, the Service-Provider File, and the Caregiver Relationship File (if appropriate) for the reporting period.
- The “Participant ID” field may be left blank to allow for aggregate service unit reporting in Non-Registered Services, but **must** be reported if the service unit reported in this file is a service provided in Registered Services, or the record will be discarded by the system.
- Service units reported in a Registered Service **must** be tied to a “Participant ID” in this file that corresponds to a “Participant ID” in the Enrollment File and the Caregiver Relationship File (if appropriate) for the reporting period for the service units to be counted; otherwise, the record will be discarded by the system.
- All service units measured in hours must be reported as whole numbers (no fractions/partial units can be reported). However, AAAs must track the actual time services were provided in their local database (i.e. minutes, fractions). The AAA’s local software system must then round the **total** service units for each client by month and by service category to the nearest integer (i.e. can round up or down) when exporting these data to CARS. Please note that this should not affect the actual data in the AAA database, only the service unit totals in the CARS export files. Due to rounding, CDA

expects minor service unit discrepancies (not to exceed 5-10 percent) between the AAA database and CARS.

- AAAs are to use the following **rounding methodology** when exporting their files:
 - **If less than one hour of service was provided in a given month, round to a full hour.**
 - For example, if 25 minutes of service were provided, report as 1 hour.
 - **If more than one hour of service was provided, round the total service units for each client in the appropriate service category for an entire month to the nearest integer by using the following rounding rule - services that are equal to or greater than half an hour, should be rounded up and services that are less than half an hour, should be rounded down.**
 - For example, if 1 hour 25 minutes of service were provided in the month of April, report as 1 hour; if 1 hour 35 minutes of service were provided, report as 2 hours.
 - AAAs may reference Table 9 below to record the actual time services were provided.

**Table 9
Time Conversion**

Minutes	Decimal	Fraction	Minutes	Decimal	Fraction
5	0.08	2/25	35	0.58	29/50
10	0.17	8/47	40	0.67	65/97
15	0.25	1/4	45	0.75	3/4
20	0.33	1/3	50	0.83	39/47
25	0.42	21/50	55	0.92	23/25
30	0.5	1/2	60	1	1

- “Service ID” in this file must also correspond to a “Service ID” in the Enrollment File, the Service-Provider File, and the Caregiver Relationship File (if appropriate) for the reporting period.
- There are two exceptions in Registered Services that allow for aggregate reporting. For Congregate Meals and Home Delivered Meals, a small number of Non-Registered services (i.e. meals), may be added to the total unduplicated Registered services at the end of each reporting quarter (e.g. meals served to volunteers, spouses, participants of one-time-only events and clients who refuse to provide or divulge their demographic information).
- In addition to service units reported for the Registered Services, this file must contain service units for Non-Registered Services.

- Unless all service units (i.e. for Registered and Non-Registered Services) are tied directly to a Participant ID, CDA recommends that AAA local systems have the ability to export aggregate data for Non-Registered Services.
- If the AAA local system does not have the capability to export aggregate data for Non-Registered service units, AAAs also have the capability to manually enter aggregate, Non-Registered service units directly in CARS for each reporting quarter. **Note:** For each quarterly submission, the service units from the previous quarter will have to be re-entered (click on “view by quarter” link to enter aggregate data directly on the screen).
- To reduce file errors and rejections, we request that AAAs not include any labels in the data file (i.e. headers such as "Participant ID", "Service ID", "Quantity", etc.).
- Submitted client identifiers will be stored in an encrypted database.

Service-Provider File

This is the fourth of five tab delimited flat files uploaded to CARS during each reporting quarter. This file identifies providers responsible for the provision of a service; allows AAAs to report an unduplicated provider count for each reporting year; identifies whether the provider was a minority provider, and; identifies whether services were provided directly by the AAA.

This file contains provider information for services provided to clients/caregivers in Registered and Non-Registered Services.

Also note the following conditions that must be met for data contained in this file:

- Each data element must be reported in its current order (see **CARS File Specifications** spreadsheet, “Specifications” tab).
- The “Program Type ID,” “Minority Provider,” and “Is AAA the Provider?” fields have defined values to ensure consistency (see **CARS File Specifications** spreadsheet, "Lookup Tables" tab for these values).
- CARS requires client-level data reporting for Registered Services. All data collected for clients enrolled in the Registered Services listed below must contain these data elements as specified in this file, except when noted as an optional field.
- Each provider must be reported by name and must have a unique identifier (i.e. “Provider ID”) to allow for an unduplicated count of providers in a particular AAA.
- “Provider ID” in this file must also correspond to a “Provider ID” in the Enrollment File, the Service Units File, and the Caregiver Relationship File (if appropriate) for the reporting period.
- “Service ID” in this file must also correspond to a “Service ID” in the Enrollment File, the Service Units File, and the Caregiver Relationship File (if appropriate) for the reporting period.
- To reduce file errors and rejections, we request that AAAs not include any labels in the data file (i.e. headers such as "Provider Name", "Service Name ", "Minority Provider", etc.).

- Submitted client identifiers will be stored in an encrypted database.

Caregiver Relationship File

This is the last of five tab delimited flat files uploaded to CARS during each reporting quarter. This file links a caregiver to a care receiver in FCSP.

This file contains caregiver/care receiver relationship information for caregivers served in Registered Services. It also contains information on the types of services received by specific caregivers and identifies the provider responsible for the provision of the reported services. It is not necessary to submit relationship information for Non-Registered Services. In instances where multiple caregivers serve a care recipient or if a caregiver cares for more than one care recipient, AAAs must track and report the relationship between all caregivers and their care recipients in this file.

Note the following conditions that must be met for data contained in this file:

- AAAs must distinguish and report separately participants and services under “Caregivers Caring for the Elderly” and “Grandparents/Elderly Caregivers Caring for Children” per Title III E eligibility criteria. Refer to the Service Categories and Data Dictionary at <http://www.cda.ca.gov/aaa/cars/default.asp> and the CDA FCSP Systems Matrix (to be issued in an upcoming Program Memo) for further guidance. Note that care receivers between the ages 19-59 may be reported in both sections of FCSP, determined by eligibility criteria applicable to the particular care receiver.
- Each data element must be reported in its current order (see **CARS File Specifications** spreadsheet, “Specifications” tab).
- The “Caregiver Relationship” field has defined values to ensure consistency (see **CARS File Specifications** spreadsheet, “Lookup Tables” tab for these values). This required reporting field must be submitted for caregivers.
- CARS requires client-level data reporting for Registered Services. All data collected for caregivers enrolled in the Registered Services listed below must contain these data elements as specified in this file, unless when noted as an optional field.
- Both, caregiver and care receiver “Participant IDs” **must** be reported in order for the record to be counted by the system. This ensures that a relationship has been established between a caregiver and their care receiver. CARS will not display caregiver data without reporting the associated care receiver Participant ID and profile information.
- If the care receiver is not a current AAA client and does not have an already established “Participant ID,” a unique “Participant ID” must be created for this individual and reported in this file.
- “Provider ID” in this file must also correspond to a “Provider ID” in the Enrollment File, the Service Units File, and the Service-Provider File for the reporting period.
- There is no “Service ID” requirement for a care receiver. The “Service ID” **must** always be tied to a caregiver in this file, **never** to the care receiver.

- “Service ID” in this file must also correspond to a “Service ID” in the Enrollment File, the Service Units File, and the Service-Provider File for the reporting period.
- To reduce file errors and rejections, we request that AAAs not include any labels in the data file (i.e. headers such as "Caregiver Participant ID", "Caregiver Relationship", "Provider ID", etc.).
- Submitted client identifiers will be stored in an encrypted database.

Section IV Business Logic Across System Modules

Why There May Be Differences between Your CARS File Upload Module and NAPISCare Module

Every year each AAA verifies the total annual data submitted in CARS. This process is conducted in the NAPISCare Module. While AAAs must manually enter some data in the NAPISCare reports (for example, AAA staffing report, focal points, etc.), the majority of data are automatically populated from File Upload Module fourth quarter submission files.

Due to data entry and other errors, quarterly file submissions may contain data on ineligible clients age of 60 and under in some services where it is not allowed under NAPIS rules. To ensure only eligible clients are reported, CARS uses the following logic when populating NAPISCare with File Upload fourth submission data. This process may result in data discrepancies between these system modules.

NAPISCare Business Logic and Troubleshooting

NAPIS reports, Section I.A.:

Unduplicated Count of Persons Served for Registered Services

Include clients under the age of 60 in the total category for the following programs: Home Delivered Meals, Congregate Meals, Nutrition Counseling, but exclude clients under the age of 60 for all other Registered programs: Personal Care, Homemaker, Chore, Adult Day Care/Health (ADC/H), Case Management, Assisted Transportation. Therefore,

- File Upload and NAPISCare totals MAY be different if clients under the age of 60 were reported for non-nutrition programs.
- File Upload is greater than or equal to NAPISCare unduplicated client count

Consider the examples in Figure 2 below to further understand this logic:

**Figure 2
File Upload and NAPISCare Differences for Unduplicated Persons Served
(Registered Services)**

<i>Personal Care</i>			
	File Upload	Condition	NAPISCare
Total Clients (including under age 60)	100	≥	90
Clients Under the Age of 60	10	≥	0
<i>Congregate Meals</i>			
Total Clients (including under age 60)	100	=	100
Clients Under the Age of 60	10	=	10
<i>Unduplicated Persons Served for Registered Services*</i>			
Total Clients	200	≥	190

*The scenario above assumes that the PSA administered only the two Registered Services indicated above and clients, who received Personal Care services, did not receive Congregate Meals services; therefore, the total represents a true unduplicated count of persons served in Registered Services.

Estimated Unduplicated Count of Persons Served for Non-Registered Services

1. IF an aggregate number WAS NOT manually entered by a AAA, report estimated unduplicated clients under the age of 60 in the total category for Nutrition Education, but

exclude clients under the age of 60 for all other Non-Registered Services: Transportation, Legal Assistance, Information and Assistance, Outreach, Other services. Therefore,

- File Upload and NAPISCare totals MAY be different if clients under the age of 60 were reported for non-nutrition programs.
- File Upload is greater than or equal to NAPISCare estimated unduplicated client count

Consider the examples in Figure 3 below to further understand this logic:

Figure 3
File Upload and NAPISCare Differences for Unduplicated Persons Served (Non-Registered Services)

Transportation			
	File Upload	Condition	NAPISCare
Total Clients (including under age 60)	100	≥	90
Clients Under the Age of 60	10	≥	0
Nutrition Education			
Total Clients (including under age 60)	100	=	100
Clients Under the Age of 60	10	=	10
Unduplicated Persons Served for Non-Registered Services*			
Total Clients	200	≥	190

* The scenario above assumes that the PSA administered only the two Non-Registered Services indicated above and clients, who received Transportation services, did not receive Nutrition Education services; therefore, the total represents a true unduplicated count of persons served in Non-Registered Services.

2. IF a AAA manually entered aggregate estimated unduplicated count of persons served for these services in the File Upload Module, then the File Upload unduplicated client count is equal to NAPISCare unduplicated client count.

Consider the examples in Figure 4 below to further understand this logic:

Figure 4
File Upload and NAPISCare Differences for Unduplicated Persons Served (Non-Registered Services)

Transportation			
	File Upload	Condition	NAPISCare
Total Clients (including under age 60)	100	≥	100
Clients Under the Age of 60	unknown	≥	unknown
Nutrition Education			
Total Clients (including under age 60)	100	=	100
Clients Under the Age of 60	unknown	=	unknown
Unduplicated Persons Served for Non-Registered Services*			
Total Clients	200	=	200

* The scenario above assumes that the PSA administered only the two Non-Registered Services indicated above and clients, who received Transportation services, did not receive Nutrition Education services; therefore, the total represents a true unduplicated count of persons served in Non-Registered Services.

Total Estimated Unduplicated Count of Persons Served

1. IF an aggregate number WAS NOT manually entered by a AAA, report the estimated unduplicated clients under the age of 60 in the total category for the following programs: Home Delivered Meals, Congregate Meals, Nutrition Counseling, and Nutrition Education. Exclude clients under the age of 60 for all other Registered programs: Personal Care, Homemaker, Chore, ADC/H, Case Management, Assisted Transportation and Non-Registered programs: Transportation, Legal Assistance, Information and Assistance, Outreach, Other services. Therefore,

- File Upload and NAPISCare totals MAY be different if clients under the age of 60 were reported for non-nutrition programs.
- File Upload is greater than or equal to NAPISCare estimated unduplicated client count

2. IF a AAA manually entered aggregate total estimated unduplicated count of persons served, then the File Upload service client count is equal to NAPIS service client count.

NAPIS reports, Sections I.B, I.C., I.D., and II.A.:

Enrollments and Service Units for Registered Services

1. Include enrollment and service units for clients under the age of 60 in the total category for the following programs: Home Delivered Meals, Congregate Meals, and Nutrition Counseling. Therefore,

- File Upload is equal to NAPISCare client enrollment and service unit count

2. Exclude enrollment and service units for clients under the age of 60 for all other Registered programs: Personal Care, Homemaker, Chore, ADC/H, Case Management, and Assisted Transportation. Therefore,

- File Upload is greater than or equal to NAPISCare client enrollment and service unit count

Enrollments and Service Units for Non-Registered Services

1. IF an aggregate number WAS NOT manually entered by a AAA, include service units for clients under the age of 60 in the total category for the following programs: *Nutrition Education*

- File Upload is equal to NAPISCare service unit count

2. IF an aggregate number WAS NOT manually entered by a AAA, exclude service units for clients under the age of 60 for all other non-Registered programs: *Transportation, Legal Services, Information and Assistance, Outreach* (Other Services is not reported in this section of the report)

- File Upload is greater than or equal to NAPISCare service unit count

3. IF a AAA manually entered aggregate service unit counts for these services, then the File Upload service units count is equal to NAPISCare service unit count.

Section V Common Data Submission Problems and Assistance

Common Data Submissions Problems

The following issues are the most common data submission problems.

Issue 1

Non-Registered aggregate service units are reported with a Participant ID "0".

If an aggregate service unit is reported with a Participant ID listed as 0, the system looks to cross-reference the Participant ID with other data files that have a Participant ID as 0. Data would not be counted and recorded on the Service Summary screen because there is no reported client with this Participant ID when cross-referencing all other files.

If a Non-Registered service unit is not tied to an individual in the AAA database, AAAs are to report a Non-Registered aggregate service unit in the Service Units File and leave the Participant ID field NULL (i.e. blank).

Example: On Your Side (provider ID=105) provided 68 hours of legal assistance (service ID=35) for the entire second quarter sometime in December.

Service Units File						
Participant ID	Provider ID	Service ID	Reporting Month	Reporting Year	Unit Name	Quantity
	105	35	12	2009	Hour	68
Service-Provider File						
Provider Name	Provider ID	Service Name	Service ID	Program Type ID	Minority Provider	Is AAA the Provider?
On Your Side	105	Legal Assistance	35	11	1	2

Issue 2

Enrollment and Service Unit files are submitted for a caregiver, but required data elements are missing from the Caregiver Relationship file.

Data Files:	Client/Caregiver File	Enrollment File	Service Units Files	Service-Provider File	Caregiver Relationship File
Caregiver	R	R	R	R	R - Missing
Care Receiver	R	Note	Note	Note	R - Missing

R: Required files for all FCSP Caregivers and Care Receivers.

Note: The Care Receiver Enrollment, Service Units, and Service-Provider files would be submitted if a care receiver is a current AAA client receiving Title IIIB, IIIC, IIID or VIIB services.

For data to be recorded, all five data files, Client/Caregiver, Enrollment, Service Units, Service-Provider, and Caregiver Relationship File, must be submitted with the required elements. FCSP enrollments and service units are counted if the caregiver receiving the FCSP service has a relationship defined in the Caregiver Relationship file.

Issue 3

No records for the care receivers in the Client/Caregiver file and no Participant ID records for care receivers in the Caregiver Relationship file.

Data Files:	Client/Caregiver File	Enrollment File	Service Units Files	Service-Provider File	Caregiver Relationship File
Caregiver	R	R	R	R	R
Care Receiver	R - Missing	Note	Note	Note	R - Missing

R: Required files for all FCSP Caregivers and Care Receivers.

Note: The Care Receiver Enrollment, Service Units, and Service-Provider files would be submitted if a care receiver is a current AAA client receiving Title IIIB, IIIC, IIID or VIIB services.

If there is no record of the care receiver in the Client/Caregiver file and the Caregiver Relationship file is missing the care receiver "Participant ID," the data will not be counted. The Caregiver Relationship file requires all five fields (caregiver, care receiver, caregiver relationship, provider ID, and service ID) to be reported in order for the caregiver enrollment and services units to be counted and recorded in the Service Summary screen.

For further information about the Caregiver Relationship file please see page 15 and Appendices B and C.

Issue 4

Incomplete ADL/IADL assessment data has been submitted in the Client/Caregiver file.

ADL/IADL assessments are required for all clients who receive Cluster 1 Registered Services, and for care receivers reported in FCSP "Caregivers Caring for the Elderly" Registered Services. AAAs submit Client/Caregiver files where for the same participant some ADL/IADL fields are blank, while others contain appropriate data values. It is possible that individuals are more comfortable with providing information on certain ADLs/IADLs, than others. In such instances, the ADLs/IADLs for which information was not provided/obtained, the submitted data in CARS should be coded appropriately (i.e. as "0" for missing or "6" for declined to state).

Issue 5

Inaccurate ADL/IADL assessment data has been submitted in the Client/Caregiver file.

Currently, ADL/IADL data is required to be submitted for only clients who receive Cluster 1 Title III Registered Services, and for care receivers reported in FCSP "Caregivers Caring for the Elderly" Registered Services. In some instances, AAAs submit ADL/IADL data that is required for the Multipurpose Senior Services Program (MSSP). This is inaccurate. AAAs should report ADLs/IADLs required specifically for MSSP reporting if MSSP is integrated with CARS in the future.

For further information about ADL/IADL reporting please see Appendix C.

How to Obtain Further Technical Assistance

Please visit the CARS Help screen to obtain CARS user manuals and the FAQ/Help screen to post and view frequently asked questions. For technical assistance contact CARS/CA-GetCare support through RTZ Associates at (510) 986-6700 or email carshelp@getcare.com. Issues or problems with data submission or data discrepancies should be addressed with the AAA local

software/support provider and RTZ Associates. Please also report the problems to CDA at DataTeam.Reports@aging.ca.gov.

Section VI Appendices

Appendix A

How to Report Caregivers and Care Receivers in the Five Data Files

The information below provides general guidelines about reporting, processing, and displaying data on FCSP caregivers and care receivers, in CARS.

1. Caregiver and Care Receiver are recipients of AAA services

Data Reporting Process

In instances where a care receiver is a current AAA client receiving Title IIIB, IIIC, IIID or VIIB services, the five files submitted should contain information on both the caregiver and their care receiver (see the table below):

Data Files:	Client/Caregiver File	Enrollment File	Service Units Files	Service-Provider File	Caregiver Relationship File
Caregiver	R	R	R	R	R
Care Receiver	R	R	R	R	R

R: Required files for all FCSP Caregivers and Care Receivers

Data Output

When a caregiver and a care receiver are both recipients of AAA services, data are displayed in the following output reports:

FCSP - Caregivers Caring for the Elderly			
Output Report Name:	Service Summary	Demographic Summary	ADLs/IADLs
Caregiver	✓	✓	
Care Receiver	✓	✓	✓

FCSP - Grandparents/Elderly Caregivers Caring for Children			
Output Report Name:	Service Summary	Demographic Summary	ADLs/IADLs
Caregiver	✓	✓	
Care Receiver	✓	✓	

2. Care Receiver is not a recipient of AAA services

Data Reporting Process

When a care receiver does not receive any OAA funded AAA services, a caregiver and their care receiver should be reported as follows:

Data Files:	Client/Caregiver File	Enrollment File	Service Units Files	Service-Provider File	Caregiver Relationship File
Caregiver	R	R	R	R	R
Care Receiver	R				R

R: Required files for all FCSP Caregivers and Care Receivers.

Data Output

When only a caregiver is a recipient of AAA services, data are displayed in the following output reports:

FCSP - Caregivers Caring for the Elderly			
<i>Output Report Name:</i>	<i>Service Summary</i>	<i>Demographic Summary</i>	<i>ADLs/IADLs</i>
Caregiver	✓	✓	
Care Receiver		✓	✓

FCSP - Grandparents/Elderly Caregivers Caring for Children			
<i>Output Report Name:</i>	<i>Service Summary</i>	<i>Demographic Summary</i>	<i>ADLs/IADLs</i>
Caregiver	✓	✓	
Care Receiver		✓	

Appendix B

Data Processing and Output Reports Based on Various Scenarios

Scenario 1

Jane Doe is currently a client at a AAA (Participant ID=123456) who receives Home Delivered Meals (HDM) services. The AAA contracts with Senior Meals (provider ID=15) to deliver meals (service ID=20) to Jane Doe.

Data Processing

The AAA internal system will generate five tab delimited data files that contain data values based on this scenario as follows:

Client/Caregiver File						
Participant ID	First Name	Last Name	Middle Name	Birth Date	Soc.Sec. Number	etc.
123456	Jane	Doe	Brenda	1930-05-12		
Enrollment File						
Participant ID	Provider ID	Service ID	First ever service date	First service current fiscal year	End Service	Enrollment Status
123456	15	20	2007-06-01	2009-07-01		1
Service Units File						
Participant ID	Provider ID	Service ID	Reporting Month	Reporting Year	Unit Name	Quantity
123456	15	20	7	2009	Meal	20
Service-Provider File						
Provider Name	Provider ID	Service Name	Service ID	Program Type ID	Minority Provider	Is AAA the Provider?
Senior Meals	15	HDM	20	4	1	2
Caregiver Relationship File						
(in this scenario, there is no need to submit any information on Jane Doe in this file)						

Data Output

Based on the information submitted in the five data files above, AAA staff will be able to see the processed data in various output reports.

Note: The output reports below are snapshots only. To see output reports in their entirety, use your assigned username and password to log in to CARS at ca.getcare.com.

Service Summary Report

Service Summary			
Agency Name:	PSA:	Approved By:	
FY:	Submission:	Date Approved:	
Year To Date View By Quarter			
Supportive and Nutrition Services (Title III B, III C and III D)			
Services	Type	Enrollments **	Units
Personal Care	Hours	0	0
Homemaker	Hours	0	0
Chore	Hours	0	0
Home Delivered Meals	Meals	1	20
Home Delivered Meals Non-Registered	Meals	0	0
Adult Day Care/Health	Hours	0	0
Case Management	Hours	0	0
Assisted Transportation	One Way Trips	0	0
Congregate Meals	Meals	0	0
Congregate Meals Non-Registered	Meals	0	0
Nutrition Counseling	Sessions per Participant	0	0
Transportation	One Way Trips	0	0
Legal Assistance	Hours	0	0
Nutrition Education	Sessions per Participant	0	0
Information and Assistance	Contacts	0	0
Outreach	Contacts	0	0
Etc....			

Demographic Summary Report

CLIENT DEMOGRAPHIC SUMMARY				
Home Delivered Meals				
Demographic Summary ADLs IADLs				
Agency Name:	PSA:	Approved By:		
FY:	Submission:	Date Approved:		
Year To Date Q1 Q2 Q3 Q4				
Demographic Summary	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients for Program/Service:	1			
Total Gender	1		1	
Female	1	100	1	100
Male	0	0	0	0

<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0
Total Age				
<60	0	0	0	0
60-64	0	0	0	0
65-74	0	0	0	0
75-84	1	100	1	100
85+	0	0	0	0
<i>Missing</i>	0	0	0	0

Demographic Summary Report (ADL Detail)

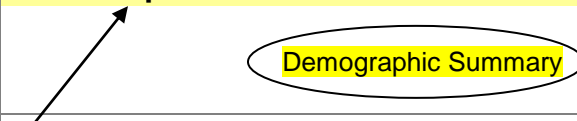
CLIENT DEMOGRAPHIC SUMMARY				
Home Delivered Meals				
<u>Demographic Summary</u>		ADLs	<u>IADLs</u>	
Agency Name:	PSA:	Approved By:		
FY:	Submission:	Date Approved:		
Year To Date Q1 Q2 Q3 Q4				
ADLs	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients (includes missing age):	1			
Eating	1			
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Human Help	0	0	0	0
Lots of Human Help	0	0	0	0
Dependent	1	100	1	100
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0

Demographic Summary Report (IADL Detail)

CLIENT DEMOGRAPHIC SUMMARY				
Home Delivered Meals				
<u>Demographic Summary</u>		<u>ADLs</u>	IADLs	
Agency Name:	PSA:	Approved By:		
FY:	Submission:	Date Approved:		
Year To Date Q1 Q2 Q3 Q4				

IADLs	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients (includes missing age):	1			
Meal Preparation	1			
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Human Help	0	0	0	0
Lots of Human Help	0	0	0	0
Dependent	1	100	1	100
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0

Demographic Summary Report (Unduplicated Registered Clients)

CLIENT DEMOGRAPHIC SUMMARY				
Unduplicated Count of Persons Served in Registered Services				
 Demographic Summary <u>ADLs</u> <u>IADLs</u>				
Agency Name:		PSA:	Approved By:	
FY:		Submission:	Date Approved:	
Year To Date <u>Q1</u> <u>Q2</u> <u>Q3</u> <u>Q4</u>				
Demographic Summary	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients for Program/Service:	1			
Total Gender	1		1	
Female	1	100	1	100
Male	0	0	0	0
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0
Total Age				
<60	0	0	0	0
60-64	0	0	0	0
65-74	0	0	0	0
75-84	1	100	1	100

Scenario 2

Jane Doe is currently a client at a AAA who receives Home Delivered Meals (HDM) services. Senior Meals is the provider used by the AAA to deliver these meals to Jane Doe. John Doe, who is Jane's caregiver and husband, receives assistance from the AAA for FCSP Respite Care - Respite In-Home Supervision (respite care) to care for her at home.

Data Processing

AAAs are to report the HDM services/demographic information for Jane Doe (participant ID=123456) in the same manner as they did in Scenario 1. In addition, the AAA internal system that generates the five data files will also include data on FCSP Respite Care - Respite In-Home Supervision (respite care) services (service ID=10) provided to John Doe (participant ID=777777) by Valley Services (provider ID=100).

Client/Caregiver File						
Participant ID	First Name	Last Name	Middle Name	Birth Date	Soc.Sec. Number	etc.
777777	John	Doe		1945-08-25		
123456	Jane	Doe	Brenda	1930-05-12		
Enrollment File						
Participant ID	Provider ID	Service ID	First ever service date	First service current fiscal year	End Service	Enrollment Status
777777	100	10	2009-07-01	2009-07-01		1
123456	15	20	2007-06-01	2009-07-01		1
Service Units File						
Participant ID	Provider ID	Service ID	Reporting Month	Reporting Year	Unit Name	Quantity
777777	100	10	12	2009	Hour	10
123456	15	20	7	2009	Meal	20
Service-Provider File						
Provider Name	Provider ID	Service Name	Service ID	Program Type ID	Minority Provider	Is AAA the Provider?
Valley Services	100	Respite Care	10	141	1	2
Senior Meals	15	HDM	20	4	1	2
Caregiver Relationship File						
Caregiver Participant ID	Care-receiver Participant ID	Caregiver Relationship	Provider ID	Service ID		
777777	123456	1	100	10		

Data Output

Service Summary Report

Service Summary			
Agency Name: FY:	PSA: Submission:	Approved By: Date Approved:	
Year To Date View By Quarter			
Supportive and Nutrition Services (Title III B, III C and III D)			
Services	Type	Enrollment	
Personal Care	Hours		
Homemaker	Hours	0	0
Chore	Hours	0	0
Home Delivered Meals	Meals	1	20
Etc....			
Family Caregiver Support Program (FCSP) (Title III-E)			
Caregivers Serving Elderly		1	
Client Demographic Summary			
1. Support Services		Hours	
Caregiver Assessment	Hours	0	0
Caregiver Counseling	Hours	0	0
Caregiver Peer Counseling	Hours	0	0
Caregiver Support Groups	Hours	0	0
Caregiver Training	Hours	0	0
Caregiver Case Management	Hours	0	0
2. Respite Care		Hours	
In-Home Supervision	Hours	1	10
Homemaker Assistance	Hours	0	0
In-Home Personal Care	Hours	0	0
Home Chore	Hours	0	0
Out-Of-Home Day Care	Hours	0	0
Out-Of-Home Overnight Care	Hours	0	0

Notice how this information is identical to the Service Summary output report for Jane Doe in Scenario I.

Demographic Summary Report (Caregivers Served)

CLIENT DEMOGRAPHIC SUMMARY				
Family Caregiver Support Program Serving Elderly				
CAREGIVERS CARE RECEIVERS				
Agency Name:		PSA:	Approved By:	
FY:		Submission:	Date Approved:	
Year To Date Q1 Q2 Q3 Q4				
CAREGIVERS	Total Clients	Valid %¹	Poverty Clients	Valid %¹
Total Clients for Program/Service:	1			
Gender	1		1	
Female	0	0	0	0
Male	1	100	1	100
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0
Age	1		1	
<60	0	0	0	0
60-64	0	0	0	0
65-74	1	100	1	100
75-84	0	0	0	0
85+	0	0	0	0
<i>Missing</i>	0	0	0	0

Demographic Summary Report (Care Receiver Detail)

CLIENT DEMOGRAPHIC SUMMARY				
Family Caregiver Support Program Serving Elderly				
CAREGIVERS CARE RECEIVERS				
Demographic Summary ADLs IADLs				
Agency Name:		PSA:	Approved By:	
FY:		Submission:	Date Approved:	
Year To Date Q1 Q2 Q3 Q4				
CARE RECEIVERS	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients for Program/Service:	1			

Total Gender	1		1	
Female	1	100	1	100
Male	0	0	0	0
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0
Total Age	1		1	
<60	0	0	0	0
60-64	0	0	0	0
65-74	0	0	0	0
75-84	1	100	1	100
85+	0	0	0	0
<i>Missing</i>	0	0	0	0

Notice how this information is identical to the Demographic Summary output report for Jane Doe in Scenario I.

Demographic Summary Report (Care Receiver ADL Detail)

CLIENT DEMOGRAPHIC SUMMARY				
Family Caregiver Support Program Serving Elderly				
<u>CAREGIVERS</u>		<u>CARE RECEIVERS</u>		
<u>ADLs</u>		<u>IADLs</u>		
Agency Name: FY:	PSA: Submission:	Approved By: Date Approved:		
Year To Date <u>Q1</u> <u>Q2</u> <u>Q3</u> <u>Q4</u>				
CARE RECEIVERS ADLs	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients (includes missing age):	1			
Eating	1			
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Human Help	0	0	0	0
Lots of Human Help	0	0	0	0
Dependent	1	100	1	100
<i>Declined to State</i>	0	0	0	0

Notice how this information is identical to the ADL output report for Jane Doe in Scenario I.

Demographic Summary Report (Care Receiver IADL Detail)

CLIENT DEMOGRAPHIC SUMMARY				
Family Caregiver Support Program Serving Elderly				
<u>CAREGIVERS</u>		<u>CARE RECEIVERS</u>	Notice how this information is identical to the IADL output report for Jane Doe in Scenario I.	
<u>ADLs</u>		<u>IADLs</u>		
Agency Name: FY:	PSA: Submission:	Approved By: Date Approved:		
Year To Date Q1 Q2 Q3 Q4				
CARE RECEIVERS IADLs	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients (includes missing age):	1			
Meal Preparation	1			
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Human Help	0	0	0	0
Lots of Human Help	0	0	0	0
Dependent	1	100	1	100
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0

Demographic Summary Report (Unduplicated Registered Clients)

CLIENT DEMOGRAPHIC SUMMARY				
Unduplicated Count of Persons Served in Registered Services				
<u>Demographic Summary</u>		<u>ADLs</u>	<u>IADLs</u>	
Agency Name: FY:		PSA: Submission:	Approved By: Date Approved:	
Year To Date Q1 Q2 Q3 Q4				
Demographic Summary	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients for Program/Service:	1			
Total Gender	1		1	
Female	1	100	1	100
Male	0	0	0	0
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0
Total Age				

<60	0	0	0	0
60-64	0	0	0	0
Etc.				

Scenario 3

Maggie Smith, is a 70 year old woman (Participant ID=456789) who receives services through the local AAA as the caregiver of her grandson (Caregiver Relationship=Grandparent=6), George Smith. George Smith (Participant ID=987456) is a 25 year old individual with a developmental disability. He does not receive any services through the AAA funded by OAA Title III B-D or VII B funds. Maggie Smith receives caregiver counseling services (Support Services) (Service ID=178) through the local AAA (Provider ID=1). Since Maggie Smith is eligible to be served in FCSP based on her relationship with her disabled grandson, she is served by the FCSP "Grandparents Serving Children" funds.

Data Processing

AAAs are to report the Support Services/demographic information for Maggie Smith per the illustrations below. In addition, the AAA data management system that generates the five data files will include demographic data on George Smith and indicate how these two individuals are related to one another.

Client/Caregiver File						
Participant ID	First Name	Last Name	Middle Name	Birth Date	Soc.Sec. Number	etc.
456789	Maggie	Smith		1940-08-25		
987456	George	Smith		1985-05-12		
Enrollment File						
Participant ID	Provider ID	Service ID	First ever service date	First service current fiscal year	End Service	Enrollment Status
456789	1	178	2009-07-01	2009-07-01		1
Service Units File						
Participant ID	Provider ID	Service ID	Reporting Month	Reporting Year	Unit Name	Quantity
456789	1	178	10	2009	Hour	5
Service-Provider File						
Provider Name	Provider ID	Service Name	Service ID	Program Type ID	Minority Provider	Is AAA the Provider?
Area X Agency on Aging	1	Support Services	178	1552	2	1
Caregiver Relationship File						
Caregiver Participant ID	Care-receiver Participant ID	Caregiver Relationship	Provider ID	Service ID		
456789	987456	6	1	178		

Data Output

Since services are provided under the FCSP “Grandparents Serving Children” category, reporting ADL/IADL data is not required for care receivers, therefore, George Smith. There are no ADL/IADL requirements for caregivers in FCSP. Refer to Appendix A for a list of output reports that will be generated based on this scenario.

Appendix C

Data Processing and Output Reports for ADLs/IADLs Based on Various Scenarios

ADLs and IADLs are coded as follows in CARS (you may also reference the **CARS File Specifications, Look Up Table S,T**):

ID CODE	VALUE
1	Independent
2	Verbal Assistance
3	Some Human Help
4	Lots of Human Help
5	Dependent
6	Declined to State
0	Missing

AAAs must ensure that their intake forms and local data management systems are set up to collect ADL/IADL data according to the field values and codes above.

Scenario 1

Jane Doe, who receives home delivered meals through a local AAA provider, has been assessed to identify deficiencies in her ADLs. While some ADL information is identified, information on several ADLs is reported as “missing.”

Jane Doe is assessed by her case manager as being “Dependent” in bathing, toileting, transferring and walking. Her assessment does not indicate her level of dependency in eating or dressing, and has been submitted as “missing.” It is possible that Jane Doe was not asked or refused to provide this information.

Data Processing

Reference the **CARS File Specifications** spreadsheet, “Look Up Tables” tab for ADL values, which indicates 0=missing data, not 0 ADL deficiency (i.e. independent, for which the Look Up Table value is=1).

There is no need to report ADL information on “Grooming” since this is only an MSSP requirement and is not required to be reported in CARS at this time.

Participant ID	Eating	Bathing	Toileting	Transferring	Walking	Dressing	Grooming
123456	0	5	5	5	5	0	N/A

Data Output

When looking at the demographic summary, this individual will count towards the 3+ ADL category because she has indicated a deficiency in three or more ADLs.

Demographic Summary	Total Clients	Valid %¹	Poverty Clients	Valid %¹
Total Clients for Program/Service:	1			
Total ADLs	1		1	
0 ADLs	0	100	0	0
1 ADLs	0	0	0	0
2 ADLs	0	0	0	0
3+ ADLs	1	100	1	100
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0

When looking at the demographic summary by ADL detail, the output report will read as follows.

ADLs	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients (includes missing age):	1		1	
Eating	1			
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Assistance	0	0	0	0
Lots of Assistance	0	0	0	0
Dependent	0	0	0	0
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	1	100	1	100
Bathing	1		1	
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Assistance	0	0	0	0
Lots of Assistance	0	0	0	0
Dependent	1	100	1	100
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0
Toileting	1		1	
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Assistance	0	0	0	0
Lots of Assistance	0	0	0	0
Dependent	1	100	1	100
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0
Transferring	1		1	
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Assistance	0	0	0	0
Lots of Assistance	0	0	0	0
Dependent	1	100	1	100

Declined to State	0	0	0	0
Missing	0	0	0	0
Walking	1		1	
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Assistance	0	0	0	0
Lots of Assistance	0	0	0	0
Dependent	1	100	1	100
Declined to State	0	0	0	0
Missing	0	0	0	0
Dressing	1		1	
Independent	0	0	0	0
Verbal Assistance	0	0	0	0
Some Assistance	0	0	0	0
Lots of Assistance	0	0	0	0
Dependent	0	0	0	0
Declined to State	0	0	0	0
Missing	1	100	1	100

Scenario 2

A client has been assessed to identify deficiencies in her ADLs and IADLs. However, no ADL information has been identified or reported as “missing” or “declined to state.” On the other hand, some IADL information was identified and subsequently reported.

Data Processing

ADLs

Participant ID	Eating	Bathing	Toileting	Transferring	Walking	Dressing
521260802						

IADLs

Participant ID	Meal Prep.	Shopping	Med. Mgmt.	Money Mgmt.	Using Telephone	Heavy Hswrk	Light Hswrk	Transportation
521260802	3	0	0	0	0	0	0	0

Data Output

When looking at the demographic summary report, this individual will count towards the “Missing” ADL category and 1 IADLs category. ***She will not be counted towards the 0 ADL category.***

Demographic Summary	Total Clients	Valid %	Poverty Clients	Valid %
Total Clients for Program/Service:	1			
Total ADLs	1		0	
0 ADLs	0	0	0	0
1 ADLs	0	0	0	0
2 ADLs	0	0	0	0

3+ ADLs	0	0	0	0
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	1	100	0	0
Total IADLs	1		0	
0 IADLs	0	0	0	0
1 IADLs	1	100	0	0
2 IADLs	0	0	0	0
3+ IADLs	0	0	0	0
<i>Declined to State</i>	0	0	0	0
<i>Missing</i>	0	0	0	0

When looking at the ADL and IADL detail reports, this individual will count towards *Missing* in all ADL categories, and all IADL categories except for Meal Preparation, in which she will count as “dependent.”

Scenario 3

Data Processing

A client has been assessed to identify deficiencies in her ADLs. Only the MSSP ADL was assessed. All ADLs required for Title III Registered Services are missing.

Participant ID	Eating	Bathing	Toileting	Transferring	Walking	Dressing	Grooming
1400018353	0	0	0	0	0	0	3

Data Output

When looking at the demographic summary report, this individual will count towards the **Missing** ADL category, since “Grooming” is an ADL reporting requirement for MSSP, not Title III Registered Services. **She will not be counted towards the 0 ADL category.**

Scenario 4

Data Processing

A client has been assessed to identify deficiencies in her ADLs. No ADL information identified, but there is a nutritional risk score, which means an assessment was done.

Participant ID	Eating	Bathing	Toileting	Transferring	Walking	Dressing	Nutritional Risk
101203800	0	0	0	0	0	0	2

Data Output

When looking at the demographic summary report, this individual will count towards the **Missing** ADL category. “Nutritional Risk” is a separate category from an ADL. **She will not be counted towards the 0 ADL category.**

To summarize, please keep in mind the following rules:

- Report ADLs/IADLs for only Title III Registered Services per **CARS File Specifications** and program requirements (e.g. no requirement to report MSSP ADLs/IADLs, no requirement to report ADLs/IADLs for Title III E caregivers, etc.).
- If a value of “0” is reported for any ADL/IADL, this will be considered “missing” data, not a 0 ADL/IADL deficiency (i.e. independent).
- Please ensure that providers/AAA staff select the appropriate value for individuals who are independent in ADLs/IADLs. The value for zero ADL/IADL deficiencies is a “1.”
- As long as some ADLs/IADLs are assessed and reported in the Client/Caregiver File, they will count in the Demographic Summary reports.
- However, this means that the percentage of “missing” will always be greater in the ADL/IADL detail reports where each ADL/IADL is listed separately.
- In instances where all fields are marked as "declined to state" the detail and the summary report will capture ADLs/IADLs for a participant as "declined to state."
- In instances where some fields are marked as "declined to state" and some as "missing" the ADL/IADL for a participant will automatically default to “declined to state” in the summary report.
- As a general rule, CDA finds it questionable when only partial ADL/IADL assessment profiles are submitted as illustrated by first three scenarios above (unless reported as “declined to state”) and will work with AAA staff to ensure complete submission of required data elements.

Appendix D

How to Review the CARS Quarterly Error Reports

The “CARS Quarterly Error Report” (Error Report) was developed to identify whether the submitted files have met CARS File Specifications requirements and, if not, how the AAA file submissions were affected. The Error Report lists all required data fields in the same order they are in the current CARS File Specifications.

In general, errors that are isolated within a single file are typically easy to spot. Those errors which are relational in nature, involving two or more files, are more difficult to pinpoint just by looking at the raw files.

Error Reports are designed not only to identify each line item where errors occur, but also to give feedback about sources of problems, so that the export process itself is corrected.

The ultimate goal is that better data is provided, resulting in fewer re-submissions, fewer manual edits, and more accurate reporting overall.

Please follow the guidance below while reviewing the Error Reports.

1. Open the “CARS Quarterly Error Report” emailed for that submission by RTZ Associates (i.e. errors.xls).
2. Review the “# of errors” column in the Error Report.
3. Open the submission files for that reporting period where the Error Report lists an error (e.g. clientcaregiver.txt, enrollment.txt, serviceprovider.txt, servicenits.txt and/or caregiverrelationship.txt).
4. Identify the client records where the error has occurred. If the error affects more than one file, advanced knowledge of Excel formulas/functions or knowledge of how to import raw data into a relational database system like SQL Server, Oracle, or MySQL and then running database queries is necessary.
5. Contact your contracted technical support provider for assistance if necessary.
6. Contact the CDA Data Team at DataTeam.Reports@aging.ca.gov and RTZ Associates at carshelp@getcare.com if you need further assistance with analyzing these errors.
7. Make the necessary correction in your local system.
8. Resubmit your quarterly files to CARS at <https://ca.getcare.com> or depending on the type of error, you may submit them when the following quarterly submission is due.

The following examples provide helpful steps in how to analyze and correct specific errors. Please note that for analyzing more complex errors, you may need to contact your technical support provider.

Example #1

File Name: Client Caregiver File

File field /message: Client, Caregiver, Care Receiver Birth Date: Cannot be blank. 0 or 0000-00-00 is required for Missing

Condition: Null Birth Date ID value

Result: Warning

Number of Errors: Error Report will indicate the number of errors (e.g. 12, 200, 345, etc.)

- Open the clientcaregiver.txt file using Excel.
- Birthday is the 5th column (E). Check this column for blanks.
- The number of occurrences where you see blank cells should equal the number of errors listed for the birth date field in the error report.
- Check the Participant ID or any other client identifying information in this document.
- Find the clients who are missing the birth date in their client profile in your internal database. If this information is missing, indicate it as such in your system for each client.
- Since AAAs use various software systems, contact your technical support provider if necessary to learn how to record missing information. Regardless of how missing information is recorded (e.g. by selecting “missing,” or by selecting the value of “0”, etc.), your system should export missing data for the birth date field as a 0 or 0000-00-00.
- Resubmit your quarterly files to CARS. Since this error constitutes a “warning,” AAAs can wait to resubmit these corrections with their next quarterly submission in CARS.

Example #2

File Name: Client Caregiver File

File field /message: Client, Caregiver, Care Receiver Birth Date: Out of range value

Condition: Birth Date is either pre-1900 or a future date

Result: Warning

Number of Errors: Error Report will indicate the number of errors (e.g. 12, 200, 345, etc.)

- Open the clientcaregiver.txt file using Excel.
- Birthday is the 5th column (E). Check this column for dates outside the scope of 1900-01-01 and the end of the reporting period (e.g.2011-06-30).
- **Note:** These items require a bit of manipulation and advanced knowledge of Excel formulas, which include =DATEVALUE(), converting the cells to type date, and an estimator such as =INT(("2011-06-30"-E1)/365.25).
- The number of occurrences where you see out of range cells should equal the number of errors listed for the birth date field in the error report.
- Check the Participant ID or any other client identifying information in this document.

- Find the clients whose birth date information is reported erroneously. If this information is missing, indicate it as such in your system for each client. If you confirm it is a data entry error, make this correction in your system.
- Since AAAs use various software systems, contact your technical support provider if necessary to learn how to record missing information. Regardless of how missing information is recorded (e.g. by selecting “missing,” or by selecting the value of “0”, etc.), your system should export missing data for the birth date field as a 0 or 0000-00-00 in instances where birth date information is not available.
- Since this error constitutes a “warning,” AAAs can wait to resubmit these corrections with their next quarterly submission in CARS.

Example #3

File Name: Client Caregiver File

File field /message: Client, Care Receiver ADL Transferring: Out of range value.

Condition: Not 0,1,2,3,4,5,6

Result: Warning

Number of Errors: Error Report will indicate the number of errors (e.g. 12, 200, 345, etc.)

- Open the clientcaregiver.txt file using Excel.
- Transferring is the 24th column (X). Check this column for blanks or values other than 0-6.
- The number of occurrences where you see blank cells should equal the number of errors listed for the transferring field in the error report.
- Check the Participant ID or any other client identifying information in this document.
- Find the clients who are missing the transferring field in their client profile in your internal database. If this information is missing, indicate it as such in your system for each client. If it was coded incorrectly, make the appropriate correction.
- Since AAAs use various software systems, contact your technical support provider if necessary to learn how to record missing information. Regardless of how missing information is recorded (e.g. by selecting “missing,” or by selecting the value of “0”, etc.), your system should export missing data as a 0 and a “decline to state” field as a 6.
- Resubmit your quarterly files to CARS. Since this error constitutes a “warning,” AAAs can wait to resubmit these corrections with their next quarterly submission in CARS.

Example #4

File Name: Enrollment File

File field /message: End service date/deactivation date: Cannot be blank if participant if a reason for deactivation is reported

Condition: Null End service date/Deactivation date value, when Reason for Deactivation value = 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 0

Result: Warning

Number of Errors: Error Report will indicate the number of errors (e.g. 12, 200, 345, etc.)

- Open the enrollment.txt file using Excel.
- The End Service Date/Deactivation Date is the 6th column (F). Check this column for blanks.
- The Reason for Deactivation is the 7th column (G). If it is coded 13, this means "Past Active" status according to the CARS File Specifications Look Up Table (W,X).
- If there is a Reason for Deactivation, then there should be an End Service Date/Deactivation Date for consistent logic.
- The number of occurrences where you see blank cells should equal the number of errors listed for the End Service Date/Deactivation Date field in the error report.
- Check the Participant ID in this document to identify which client records this error affects. If necessary, cross reference it with the same Participant ID in the Client Caregiver file to obtain other client profile information, such as name, address, etc.
- Find the clients who are missing the end service date/deactivation date in their client profile in your internal database. If this information is missing, indicate it as such in your system for each client and do not leave it blank.
- Since AAAs use various software systems, contact your technical support provider if necessary to learn how to record missing information. Regardless of how missing information is recorded (e.g. by selecting "missing," or by selecting the value of "0", etc.), your system should export missing data for the End Service Date/Deactivation Date field as a 0.
- Resubmit your quarterly files to CARS. Since this error constitutes a "warning," AAAs can wait to resubmit these corrections with their next quarterly submission in CARS.

Example #5

File Name: Enrollment File (this error also affects the Service Units File)

File field /message: Enrollments declared for clients who did not have record of Service Units in Service Units file for the reporting quarter/year

Condition: Enrollment file has a Participant ID/Service ID/Provider ID combination not found in Service Units file

Result: Record Discarded

Number of Errors: Error Report will indicate the number of errors (e.g. 12, 200, 345, etc.)

- In this instance, enrollments were declared for clients who did not have a record of service units in the Service Units File for the reporting quarter/year.
- If an error affects more than one file, the particular record will be discarded.
- Contact your technical support provider for assistance in correcting this error (you may wish to send a copy of the error report to them).
- If you need additional assistance in understanding which records the error affects, contact the CDA Data Team and RTZ Associates via email.

- Resubmit your quarterly files to CARS. Since this error constitutes a “record discarded,” AAAs can wait to resubmit these corrections with their next quarterly submission in CARS. Please note that there will be discrepancies between your local database and your data in CARS until these errors are fixed.

Example #6

File Name: Service Units File (this error also affects the Service Provider File)

File field /message: Unit name: Does not match lookup table AA.

Condition: Unit names do not match lookup table values

Result: Warning

Number of Errors: Error Report will indicate the number of errors (e.g. 12, 200, 345, etc.)

- In this instance, the service unit measure, did not match its value in lookup table AA (e.g. a meal is reported as an hour).
- Contact your technical support provider for assistance in correcting this error (you may wish to send a copy of the error report to them).
- If you need additional assistance in understanding which records the error affects, contact the CDA Data Team and RTZ Associates via email.
- Resubmit your quarterly files to CARS. Since this error constitutes a “warning,” AAAs can wait to resubmit these corrections with their next quarterly submission in CARS.

Example #7

File Name: Caregiver Relationship File (this error also affects the Service Provider File)

File field /message: Service ID for FCSP is not linked to a Caregiver service Program Type ID: Out of range value

Condition: Not 111, 112, 121, 122, 123,124, 131, 132, 133, 134, 135, 136, 141, 142, 143, 144, 145, 146, 1501, 1502, 1503, 1506, 1545-1566.

Result: Record Discarded

Number of Errors: Error Report will indicate the number of errors (e.g. 12, 200, 345, etc.)

- In this instance, a caregiver is linked to a non-FCSP service (e.g. Personal Care). The Caregiver Relationship file must link to a FCSP service, so referencing a Personal Care service is incorrect for the purposes of the file structure.
- Contact your technical support provider for assistance in correcting this error (you may wish to send a copy of the Error Report to them).
- If you need additional assistance in understanding which records the error affects, contact the CDA Data Team and RTZ Associates via email.
- Resubmit your quarterly files to CARS. Since this error constitutes a “record discarded,” AAAs can wait to resubmit these corrections with their next quarterly submission in CARS. Please note that there will be discrepancies between your local database and your data in CARS until these errors are fixed.