



FPAR 2.0 Submission: Grantee Insights, Challenges, and Lessons Learned

Jillian [00:00:00] Let's get started. So hello, everyone. This is FPAR 2.0 Submission Recap: Grantee Insights, Challenges, and Lessons Learned with the Reproductive Health National Training Center. And I am delighted to be here with you today. My name is Jillian Maccini. I have a few announcements before we begin today. First, everyone on the session today is muted, given the large number of participants. We do plan to have some time during today's session for questions. So please put in questions as they arise using the chat. We will be keeping an eye on those and referring to those whenever we have the opportunity throughout today's sessions. So please do put your questions in the chat throughout and we will be glad to share those and ask those throughout the time. Closed captioning has been enabled for this meeting. To view, click on the CC icon at the bottom of your screen. Your feedback is extremely important to us and has enabled RHNTC to make quality improvements in our work based on your comments. So please take a moment to open the evaluation that Vira is sharing in the chat and consider completing the evaluation in real time, or at least having it open so you can complete it whenever you have to leave the session. In order to obtain a certificate of completion for attending the webinar, you must be logged into rhntc.org when you complete the evaluation. Today's presentation was supported by the Office of Population Affairs or OPA. Its contents are solely the responsibility of the authors and presenters and do not necessarily represent the official views of OPA also I just want to note that Amy has put the PDF of the slides in the chat. So, please do download those slides there if you would like to follow along. Because today is a panel discussion, the slides maybe are a little bit less essential than they normally are, but I do want you to know that they are there.

Jillian [00:02:25] We are thrilled to be joined by four grantee panelists today who will be sharing their experiences reporting FPAR 2.0 encounter-level data or preparing to do so. They will be introducing themselves briefly in a moment. But before we get to that, let's take a quick look at the agenda, objectives, and a little bit of background.

Jillian [00:02:49] So the agenda today, short and sweet, we're really focusing on the phases of preparation for FPAR reporting or FPAR 2.0 reporting specifically, including coordination throughout the year, data validation prior to submission, what do those efforts look like, the actual submission process itself and some reflections and lessons learned. Through this discussion, we hope that you will be able to, or we think you will be able, to share practical experiences and lessons learned, explore effective coordination practices for collecting and compiling your data for FPAR 2.0 reporting, identify tools, processes, and checkpoints used for validations, and offer peer-driven tips and guidance that enable readiness.

Jillian [00:03:39] And one sort of fine point that I should put on today's session is that we do have grantee panelists today. And the way we're going to be talking about this is from the point of view of grantees who are gathering information from subs or sites or that sort of thing. And so that's sort of the framework that we're talking about this in. And I just wanna flag that for everyone. So a little background, grantees have been gradually

transitioning from FPAR to FPAR 2.0 over the past several years, with 2025 marking the third year of the transition. Since 2022, grantees have submitted encounter-level or aggregate FPAR 2.0 data while simultaneously preparing for sort of full adoption of this encounter-level reporting. And all grantees are expected to report encounter level 2025 FPAR 2.0 data in 2026. And so this is really focused on preparation for that. And this shift reflects years of preparation for those who have been in the Title X world for years. You know this has been a point of discussion for many years, so this is it, right? This is the moment where everybody is transitioning to that encounter-level reporting and many have been doing it for several years. Um today's session will mine the experience of this transition to support each other in this process.

Jillian [00:05:04] This is the sort of structure that we're going to frame this in. Is that we sort of start out with coordination across subs, sites, grantees, et cetera. We move to compiling and combining data, do some pre-submission data validation, and then we have submission that happens in January, February, then reflection, and then process improvement for next year. So this is the sort of structure that we'll be following in the panel discussion today and sort of the timeline or sort of readiness process that we would encourage everyone to maybe think of or use in this process.

Jillian [00:05:45] So I'm going to turn to our panelists now asking where are you joining us from, what is the structure of your program, and by that I mean, you know, how many subs or sites do you have and what generally do those subs or sights look like, and then when did you submit FPAR 2.0. encounter-level data for the first time if you've done that or if you're still preparing? So while I ask our panelists to respond to these questions, we are also going to launch a poll asking folks in the audience what is the status of your encounter-level reporting for FPAR 2.0? So I am going to start with Christina. Can you share with us these questions on the slide?

Christina [00:06:37] Yes, I am Christina Garza, a Reproductive Health Program Manager with the Nevada Primary Care Association. That's who and where I'm joining you from, so from Nevada, Northern Nevada. The structure of our program, we are a grantee. At a maximum, we have had five subrecipients who are federally qualified health centers, and we are preparing to submit FPAR 2.0 encounter-level data.

Jillian [00:07:11] You did last year as well or no?

Christina [00:07:15] We submitted aggregate. I don't believe we have fully transitioned.

Jillian [00:07:21] But okay, great, awesome, thank you so much. Kiauna, you want to go?

Kiauna [00:07:27] Sure. Hi, I'm Kiauna Graham. I'm Family Planning Nurse Consultant at the Maryland Department of Health. The structure of our program is that we are a grantee and we have 25 subrecipients as of right now with 70 service sites across the state. So we actually, I've been with program for three years. We were submitting program encounter-level data prior to me coming, so I believe at least four years that Maryland has been submitting encounter-level data.

Jillian [00:08:05] Great, Kelsie?

Kelsie [00:08:09] Hi, I'm Kelsey Ostergaard. I'm an epidemiologist at Maryland Health Department. I work with Kiauna Graham there. So I only just started last summer, so even though the program has done FPAR 2.0 for the last few years, this is the first time I've

done it and we've had quite a bit of turnover in my position. So the process was pretty up in the air when I got here.

Jillian [00:08:33] Great, thank you. And Lorraine.

Lorraine [00:08:38] Good afternoon, everybody. Well, depending on where you're located, it's either afternoon or morning. My name is Dr. Lorraine Lacroix-Williamson. I'm an epidemiologist with the Massachusetts Department of Public Health. I use the she, her pronouns. I'm joining you just outside of Boston, the state's capital. The structure of our program, we have a mix of federally qualified health centers, as well as 330s, as well community health centers, and then some freestanding clinics that solely provide SRH services. And we have not submitted FPAR 2.0 encounter-level data. However, the data is ready to go for this year. So we've been slowly working with our vendor to ensure that our data is ready in the event that we did want to submit encounter-level of data. And so we didn't last year, but we will this coming year.

Jillian [00:09:35] Great, great. Thanks all so much. And we can end the poll now, 100% response rate on the poll, which I have like literally never seen in all of my years. So shout out to this group. And I'm seeing that about 70% of folks on the line have reported some encounter-level data with about half of you doing it for more than one year. So I can't wait for you all to share your experiences in the chat as well. Please share your responses to the questions that we're asking that will continue to enrich the conversation. And then I see 30-ish percent of folks are preparing to submit for the first time this year or still working on a plan. So hopefully those who are still working on a plan come away with some takeaways from this. So let me just move a couple things around.

Jillian [00:10:30] Alright, so as I said, we are going to start with coordination in this conversation, and I am going to ask panelists, can you walk us through your timeline from setting up or updating the system to the initial data poll to final submission? What is your timeline look and what is sort of critical to it. And Christina I'm going to ask you to start us off again.

Christina [00:11:05] Okay, so our internal timeline, we kind of broke it down into three steps. Filling our FPAR tables, reviewing the data, and then that final submission to the OPA. We like to submit early, and so that also asks our subrecipients to also get us everything early, which can be a lot with everything else that they have to do, other reporting that they have to do like UDS, so making sure that we have dates from them, you know, when do they think they can have all of our requested data to us again early so that we time to review and go back and forth and see if, you know, they can get us anything that is missing or was not mapped properly and then them also have time to correct that. Get it back to us, resubmit and redo that process until everything looks good for that final submission.

Jillian [00:12:28] Great. And when you say early, what are what are we talking about there?

Christina [00:12:33] We are talking about, to us, the beginning or middle of January.

Jillian [00:12:40] Right. Kiauna and Kelsey, what about you all?

Kiauna [00:12:50] I can go ahead. So we start our process around in November, because we do collect some data that is, we use Ahlers, and Ahlers collects data, some of you are

familiar, not on table 14, and not half of table 13. So, we start early collecting data for table 14 around in November and also doing the work for table 13 around in that same time. We also alert our subrecipients that all of the data for the previous year is due January 15th. So around in January, well, around in November, we start looking to make sure that all sites have some data reported if there are any issues, or we are missing a significant chunk of data that we can see. We will reach out for one-to-one, like TA, with them.

Jillian [00:13:48] Great, so start checking in the fall, and if it's clear that there's things missing, we start to do those meetings at least in the fall.

Kiauna [00:13:54] Yes.

Jillian [00:13:54] Great.

Kelsie [00:13:57] I'd add on that our state fiscal year goes through July 1st to June 30th. So for me, I started, well, I only started in June, so I was very, just, confused and didn't know what was going on for several months. But I started trying to get people to fill in their state fiscal year for that reporting probably around September. So that at least got us halfway through the year. And then it was that November, December, that then we did the next set, which went up to like two days before submission day.

Jillian [00:14:30] Yes, excellent. Thanks so much. And just pointing out a couple discussions happening in the chat. Some folks asked, does anyone use a vendor other than Ahlers? Because we mentioned Ahlers. Several folks in the chatter mentioning Bowlink, and I know several on our panel today use Bowlink. And then there are several with in-house systems in the chat sharing as well. But our panelists today, you all use either Bowlink or Ahlers, is that correct? Yes, right. And Lorraine, what else would you add in terms of timeline?

Lorraine [00:15:06] So I entered this role 13 months ago. And so what we use Bowlink as our vendor, and we have, I forgot to mention in the intro, we have 21 subrecipients and 91 sites that we're coordinating throughout the state of Massachusetts. And we have fairly regular check-ins with our subrecipients. And in terms of data, every month they're uploading data to the system. And then every quarter, we do a clear C-check just to make sure that there's no mapping issues, that there is not a lot of unknowns missing in the data set, and also to check the data integrity. And so we're constantly in contact with the data analysts that are subrecipients. And so that's part of the coordination. And then we also hold bi-monthly data meetings with the data stewards of our subrecipients, just as a place for everyone to come together, convene, share news, share questions or concerns that they may have strategies, et cetera.

Jillian [00:16:11] Great. And so Lorraine really brought us into the next question that I'm now going to pose to others on the panel. What kinds of internal communication or coordination have you found to be most effective? How frequently are you meeting? With who? What are those based around? What would you share from Maryland or Nevada?

Kiauna [00:16:37] I can go ahead for Maryland. So we do have monthly due dates. We do have the 15th of each month is when the previous month's data is due. Of course, we give subrecipients flexibility, but that is the time that we would like the data to be returned to us so that we can look for errors and we can use it in our program planning process. So, we are in the process of kind of like improving our, you know, the way that we, how timely we look at data and can give feedback and, you know, to, get back with subrecipients to make

sure, you know, that they're reporting, you know, on time so that we can have the most accurate data possible.

Jillian [00:17:26] Got it, so you've got those monthly due dates as well, and you're checking in on those so that you can follow up if someone's not meeting them to see has something happened, is something broken, is there a turnover?

Kiauna [00:17:39] Yes.

Kelsie [00:17:41] And I definitely add to that, that theoretically it's supposed to come in like a month chunk by a month chunk worth of visits by the next month. That's not realistically what happens once I started monitoring it regularly is that really it just kind of dribbles and drabs in. So each month what they submit is probably across the last four or five, three or four months. And then we had some people who looked complete and then suddenly gave us from six months ago, you know, several hundred more visits. So definitely that's something to work on this year, which we'll get to later, I'm sure.

Jillian [00:18:15] Yeah and those were our understanding is those were like corrections from errors from previous submissions or that type of thing. Is that right Kelsie?

Kelsie [00:18:25] Not necessarily. I haven't gotten to the bottom of all that yet, but I think there was just a lot of like, oh yeah, we forgot, like one month was zero or one month, was only half as much. So I haven't gotten there yet.

Jillian [00:18:39] Okay, that's fine.

Kelsie [00:18:41] It was usually staff turnover I think at the site, to be honest.

Jillian [00:18:46] Oh, absolutely, and I think that's something that really is helpful from the sort of structures that you all have talked about already and some folks are sharing in the chat as well is that having these regular check-in points, these regular expectations allows it to be like okay there's kind of an automatic check of whether this is like not happening at all because of turnover. Someone in the chat has shared, we submit quarterly and each quarter we run year to date cumulative and check that against error ratings in order to sort of intervene as early as possible. Lots of discussion about... About, oh, I just totally lost my train of thought because I scrolled somewhere else, but lots of discussion about sort of what the expectation is around those. And so moving to the next question, I'm gonna start with a question that's coming in in the chat quite a bit, which is, are these integrated systems or how are your subrecipients and sites putting this information into Ahlers or Bowlink or whatever system you're using, folks on the panel?

Christina [00:19:56] I can go. So we use Bowlink and our subrecipients have typically one or two account holders and a lead on that will monthly submit themselves directly into the Bowlink system.

Jillian [00:20:16] And do they do it via upload?

Christina [00:20:20] Yes, they do. It's an Excel document that is perfectly mapped the way it's supposed to so that everything is read properly. And then Bowlink does its thing on their end and it reads it and flags things and accepts things or denies. And then on our end, we see what's been accepted and rejected and we go from there.

Jillian [00:20:43] Great, OK, so folks are uploading that Excel and they're accept, reject. So it's not directly integrated, as folks are asking, but it's also not a full sort of double entry situation.

Christina [00:20:57] Correct, and now that you mentioned that there actually is one subrecipient that does a manual entry on their end into Bowlink instead of uploading that file.

Jillian [00:21:08] Okay, great, great. Others similar or different?

Kiauna [00:21:14] I can go for Maryland. So we have, I believe, three ways that we get data. There are two main ones. There is the manual kind of upload. So subrecipients are entering one patient at a time up to the Ahlers web CVR portal. And then we also have those who have a data map file that they pull from their EHR. And they're able to... To upload a file to Ahlers every month. There is another way with like Ahlers software that I'm a little less familiar with, but there is that third way that that can happen.

Jillian [00:21:58] Great, and just turning to a question that someone has asked in the chat that I have not prepped any of you for. So feel free to say I'm actually not sure the details on that. But, when thinking, so thinking about those mapped files, CSV files that your subs are downloading from their EHRs and then uploading into your systems, how are those defined? Are there someone asked, is there CPT or ICD codes that are being required for those to be pulled out?

Kiauna [00:22:30] Yes, we do use CPT. I think it's mainly CPT codes. There are other ways of mapping, but I do know of some subs that do use CPT code.

Jillian [00:22:42] Okay, for some consistency, most likely.

Lorraine [00:22:48] So we use Bowlink as our system and similar to what Christina said, each agency has a dedicated person or a few that have access to the system or they can upload files. And we do have those that do a CSV upload from their EMR, or we have a few that do manual entry as well. And in terms of how they qualify. A SRH visit or a Title X encounter, it varies based off of the type of facility it is. So if it's a freestanding clinic, then most of their patients, if not all, would be considered a Title X patient and we get that information. Others that may be a family health center that sees some SRH clients, they use a combination of ICD-10 codes to qualify an encounter and then based off of certain elements within the EMR that would also determine whether or not it's an SRH encounter such as asking for a PISQ or SINC or pregnancy intention, anything like that. So it varies across our subrecipients

Jillian [00:24:01] Great. Thanks so much for sharing that. One, anything else that anybody would add to that conversation before I turn to a couple other points that folks have made? Great, two other notes that I'll make is someone, James, in the chat has pointed out that they tie data entry to invoicing, which helps ensure monthly submission. Obviously that depends on your contracts and relationships with your subs, but I think that's a really interesting note. And then the other thing that I'm going to ask you, Lorraine, to talk about just for a moment is your regular meetings with your vendor and how that comes into play, how that's helpful?

Lorraine [00:24:52] All right. So we have regular meetings with Bowlink, our vendor, and we talk about, you know, issues at different sub-recipients, how things are moving with

FPAR 2.0. So again, last year, when I came on, it was more which of our agencies are ready to go 2.0, which ones are we still working out kinks with in terms of their uploads, etc. And so we go over each agency as needed. And then we move on to any specific questions that may have come in during regular programmatic check-ins with their programmatic staff. And if anything has come across my desk that needs greater attention, I can always send an email to our vendor liaisons or schedule a meeting with a subrecipient, schedule that for all parties to come together or via email. So there's a variety of ways that we connect with our, I guess, coordinate our efforts to monitor how data is being collected for the program at our subrecipient sites. But with Bowlink, we have regular conversations, some things change. They also handle some billing, not directly with the Title X, but that's also part of our conversation as well, there's a module in there that handles that. Yeah, so we have a very close working relationship and our subrecipients know that they can either reach out to me or Bowlink directly and they'll get a response, especially when it comes to staff turnover at some of our organizations. And that's really integral to make sure that the person coming in kind of understands the system, understands the data elements that are needed, how Bowlink works as a system and then how the program works overall and what we're expecting to see in terms of data requirements.

Jillian [00:26:41] Great, thanks for sharing that. And so in some ways you're sort of liaising between Bowlink and the subs sometimes, but really keeping like an open line of communication so that there isn't anything piling up or that sort of thing.

Lorraine [00:26:54] Yes, I like to call it, and my Program Director laughs at me, but I like to call agency centered care, kind of like they provide people centered care. You know, so I want to make the agencies understand that this is, I don't want it to be more than a burden than it already is. It can be very intimidating for some folks that are not IT or data savvy, but it's really more like how can we help hold their hand through the process so that it's easier for all parties involved.

Jillian [00:27:20] Yeah, absolutely. Great. And one other point that I just want to make from earlier conversations, and Christina, this is something that came up in our early conversation, was just recognizing the need to keep those lines of communication and accept that these data often end up being an undercount, or there ends up being follow-up needed for those additional records because of EHR transitions, because of ransomware, because of errors, all of that. Is there anything more you would say about that, Christina?

Christina [00:28:02] No, just really keeping communication open and constant. Again, with those deadlines, like you mentioned. So we had two subrecipients who went through an EHR transition. And so there was times where at first they didn't know when they were going to be fully online and able to provide us with data. And then it was slowly coming back to us. And we would give a date. We would get a date. And at that point, you know, it wasn't just we were asking for one month, we were asking for multiple months, which is a big ask. And so, you know, again, working towards that final date, we would like to have all the missing data. And again, having that early date before mid-January, all of the missing data, if they can, because of the huge transition that they just went through.

Jillian [00:29:08] Great, great, thanks so much. That's super helpful. And especially for folks working with subs and sites that have done EHR transitions, important to think about that for sure. So let's move on to talking about pre-submission validation. And we got into this a little bit with the questions that came in in the chat. What systems did you need to

pull data from and how did you manage any interaction, integration, matching challenges? Kelsie, can I ask you to reflect on this first?

Kelsie [00:29:42] Yeah, so for data validation, Ahlers did a really good job of making sure that all the individual line level data was a valid value that it accepted. So when we just ran it through that data validation tool, we got zero returns. There was nothing wrong, apparently. But then when we did do the real thing and got the aggregates, there were lots of things we had to fix.

Jillian [00:30:10] So let's take one step further back. So what are you getting data from? Like how are you working with your sites to get that data pulled out and then how are bringing it in? And like what, just working through sort of before you get to that submission process, what comes up in that?

Kelsie [00:30:31] Well, so for this past year, it was really just pulling it down from Ahlers because I was new and it was already halfway through the year. Now I've made a Tableau dashboard that I'm updating monthly when I roll down the Ahlers data. And that has been immensely helpful because then I'm much easier able to see the trends of when people submit their data. So it's a lot easier to identify if they're missing some somewhere. Because when I initially got it, I could tell they hadn't submitted if there were zero cases. Right. If there were some cases, I suppose they had submitted. But really, there were ones where they had only submitted half of it, right, for several months, but I had no way of knowing it until I had several months or years worth of data that I could look at. So I'm pretty excited about my Tableau dashboard. And then I'm also using it to find values that Ahlers would accept, but that are clearly incorrect. Such as a date of birth that was also in 2024. You know, where clearly someone put their date of birth, but then put 2024 instead of 1988 or whatever. So when we had zero year olds or minus one year olds or two year olds, I was able to go back to Ahlers to take those out and now starting to get back to the sites to fix them.

Jillian [00:31:52] That's great. I am putting a sort of note related to this is like that rejections tracking, but also something that allows you to see not just the zeros, but just like the outliers. And that ideally like that visual feedback like you're describing in your Tableau dashboards becomes really, really useful. Is that right?

Kelsie [00:32:12] Yes, oh yeah, love me some Tableau. I use it for everything.

Jillian [00:32:17] Kiauna, anything you would add?

Kiauna [00:32:21] I think Kelsie had the shout out again to the Tableau. They really helped us this year. I think we ran into an issue just with our unknowns. Our unknowns were calculating in a different category when we actually submitted the Ahlers data. So we had to take the time to extract that data and Kelsie's Tableau really helped us be able to zero in. On what we needed to extract and manually fix FPAR tables. So we needed definitely to have time for that.

Jillian [00:32:59] Yep, that's great, thank you. Christina, Lorraine, anything you would share about your, what systems you were pulling data from, sort of how that process was working, how you managed any integration or matching challenges?

Lorraine [00:33:18] I have to give a shout out to Bowlink again, because everything is kind of done before I see anything. And so when it came time to validate everything again,

checking the data, I really do a deep dive every quarter, just to see how are our unknowns looking, how is our utilization looking to make sure that we are getting the encounters as needed as well as decline. And so once I see that they, they're very small submission numbers or maybe they have not submitted anything for a month, that's when we kind of start reaching out. And I will also say that Bowlink staff does that as well. So I'm doing it on my own. And then, you know, I will get a message saying, hey, if it's not already announced at our bi-weekly meeting, that everybody's okay, or so-and-so hasn't submitted data for X amount of months. Or hey, they've been submitting data, but they found a problem on their end. So now all their data has to be reprocessed to fix, you know, a data measure or something. And it could be something like mapping. So, you know I had an agency where they were doing really well. Minimal unknowns, it was under 10%. Then all of a sudden it jumped up. They had changed their EMR. That what they were using to pull info from the EMR was not being picked up by Bowlink correctly, and it wasn't mapping correctly, then all of a sudden, 70% of the data was unknown. It's like, oh no, that doesn't look correct. And so I really do encourage the agencies and subrecipients themselves to go and do their own QC checks as well to make sure that what their sending us is reflective of what they're expecting.

Jillian [00:35:04] Yeah, and I think that's a great point, and I'm gonna take that in two directions. One is, again, reinforcing what Kelsie and Kiauna just shared, the importance of having something that allows you to sort of see the outliers. So if someone's been at 5% unknown for the last six months and is suddenly at 70%, it's like a clear visual, like having that visually becomes really, really useful. Kelsie, I see you off mute. Did you wanna add something there?

Kelsie [00:35:35] One of the things I'm starting to explore too on my Tableau is how long, what the lag is between a visit occurring and it getting to us so that I put on a download date, like a create date for every time I download new Ahlers, and then I look at the time between that and the date of visit. That's been starting to get pretty useful because then when people have long lag times as well, you know that there's something going on.

Jillian [00:35:58] Yeah, good point. And then the other thing about the unknown and, um, and that part of things is Christina, I think you all do some analyzing of your data as a whole and some of just your known data. Do you want to say a little bit about that?

Christina [00:36:25] Yeah, so similar to everyone else, we do monthly meetings with our subrecipients. We go over what's unknown, but we also look at the known in terms of when it comes to writing the narrative of our annual report, because that's always, that's also something worth mentioning, not just focusing on the unknown.

Jillian [00:36:54] Say more about what you mean there.

Christina [00:36:57] So, if we know, I'm trying to think of an example that, I don't know, there's one agency that has a high known for, oh, gosh, I don't know, using a certain, I don't, know method. It could be due to whatever they mentioned throughout the entire year that patients were saying XYZ, it was really popular for some reason. And we could highlight that as to why that certain method has such a high utilization within our network.

Jillian [00:37:44] Got it. So, so what you're saying is some of this analysis that you do before actual submission, you're using to inform your narrative and your comments, admitting within your actual submission that adds like sort of the color commentary that's necessary to really understand what's being seen. Is that right?

Christina [00:38:04] Yes.

Jillian [00:38:05] Great. And I will say, I have actually word of Nevada's comments and the value of them has made it to me. So it's like a lesson learned that sometimes those data validations that happen upon submission, which we'll talk about in just a moment, feel like just like the thing that's like taking, you know, stealing your last breath as you do your submission. But there's really an opportunity to provide some really meaningful feedback there. So anything else that folks would add about specific tools or checkpoints during the year or experiences with the data validation explorer tool. So Kelsie mentioned finding that the data validation explorer tool didn't have any major issues because of really strong... Lorraine, I think maybe you did not use the data validation explorer tool. Am I right about that?

Lorraine [00:39:01] Correct. We haven't done it yet. I think it's opening in the fall. So even though we haven't submitted 2.0 data, we are ready to do so. And so I'll be using what we submitted this year to practice later on in the calendar year just to see how does this new version compare to what we did last year so I kind of know what to look out for with the 2025 data.

Jillian [00:39:27] Yeah, that's a great idea. Using this year to test it first and then putting in or last year then this year both of those experiences and be able to compare them. I love that idea. Anything else anybody would share on these items here? Or any questions in the chat about this pre-submission validation process? And I just want to highlight again, one of the things that has come up in conversations is that as a grantee, your subs that are submitting are going to have a certain amount of errors, rejections, that sort of thing, and working those is really important because once you're putting information into the actual FPAR 2.0 system, those can be, those are sort of lost at that point, so you need to be sort of following up on those and working on those. Lolita says the data validation tool in Bowlink was very helpful. Jenna says, currently setting up our system to report data in 2026, but we are establishing an FPAR widget to collect FPAR-specific data elements in each family planning encounter, details and aggregating data across subs. Would be curious about other Patagonia users if they have already submitted FPAR 2.0. And so there are several Patagonia users in the chat, so others please do respond to Jenna's note in the chat. Dionne is saying this as well, we're experiencing some issues with results not available for STIs, Patagonia is aware, and working through correcting. When we randomly search various files, we notice results are in the clinic files, just a snafu that we're working through, and Angela says they're having the same experience. Yeah, great. And again, this is exactly what others have been talking about, about sort of like digging in to see like, oh, we really saw a change here. Did that mean the tool stopped working or did that mean that there is an issue at the sub level?

Jillian [00:41:30] So let's talk about the submission process.

Jillian [00:41:35] So wondering how long before the due date did you submit? How did you handle the data validations that arose during submission? Were there particular errors that were harder to resolve? That sort of thing. And so Kelsie, if I can, I'm gonna turn back to you because you started to reflect on this earlier. So I'd love to hear more about your experience here.

Kelsie [00:41:55] Oh yeah, our final submission wasn't until probably two days beforehand. Because what I found from looking at the year before 2023 was that there

were pretty substantial undercounts. And once I re-pulled 2023, we had thousands more visits, so we really held off longer. And we had people submitting every day in January and February. Like every day we were getting something new. So that was the big one and that we're going to try to work through next year. But yeah, so I think that gave us way more accuracy though, just holding off, but it didn't really suck for Kiauna and I the last week or so.

Jillian [00:42:34] Not great. And then I'm also guessing that because there was this big change from trying to gather these additional records, um, that maybe you had more validations when you submitted that you had to work through. Is that, is that correct?

Kelsie [00:42:51] Yeah, I was pretty concerned about it because then there would be a bunch more, more than 10% change kind of thing in numbers of whatever. Luckily, actually, Kiauna, did you have to address too many of those, we ended up not having to address too many more but what is it was just like well we have more counts.

Kiauna [00:43:08] Right. Yeah, not too many more than previous years, but we were concerned as we were like, you know, we upload once and then you upload again. It's like, oh, we're just going to change, it's going to change the narrative. But I would feel like in general, we have pretty much the same amount of-

Kelsie [00:43:27] Percentage-wise, yeah.

Jillian [00:43:32] Great, and so was your concern that you would have to rewrite your narrative? I'm curious how these comment sections are used to like, you know, you're improving your data collection. How can you make that narrative or those comments work for you when you are showing big change because you're proving that data collection?

Kiauna [00:43:53] Yeah, it definitely takes creativity and knowing about, you know, the site, knowing about the subrecipients and sites during the year to kind of, you know, tell us of an accurate story, one an accurate story, but also, you know, one that makes sense that's reflected in the data. So I think, yeah, I know I was primarily concerned about like, oh, if we have this huge percent change am I going to have a creative narrative to write about why this is actually happening or showing or different, significantly different from last year.

Jillian [00:44:32] Yeah. But something that you said earlier- oh, sorry, go ahead, Kelsie.

Kelsie [00:44:37] I'm sorry. I was actually kind of surprised if it's good or bad, but there was more wiggle room than I was kind of thinking of because like I was tracking down the onesies and twosies for errors. Yeah, I'm finding out that the year before we were missing like thousands of visits I was like, oh wow, like I am tracking down to ones and twos. Maybe I can be a little less detail oriented to get this moving faster. But that's always a tie-off, you know, between time.

Jillian [00:45:04] Yeah, trade-offs on that, for sure. Yeah, that's a great point. I also think that you all have made a really good need to track impacts at the sub level across the year in order to have those at your fingertips when you need to explain any particular like data anomaly. Is that sort of what you're getting at, Kiauna?

Kiauna [00:45:32] Yes, yes, yes. So we have to use like information that we've gathered like during regional meetings, just any feedback, any technical assistance, you know,

things that we're hearing, any survey data that we are collecting just to be able to feed those narratives at the end to explain some of the data.

Jillian [00:45:51] Yeah, and Christina, I think you have a functional approach for tracking information across the year. Can you share a little bit about that with us?

Christina [00:46:02] Yeah, can you just repeat that? You kind of cut out for a second.

Jillian [00:46:06] Yeah. So the need as we're preparing for the actual submission and the narrative around the submission, Kiauna was mentioning the need to sort of track the impacts across the year in order to have those at your fingertips and I think you all have a pretty intentional approach to that. Could you share a little bit about that approach?

Christina [00:46:26] Yeah, so how our narrative really comes about is, again, back to those monthly meetings, where our subrecipients tell us reasonings behind those knowns or unknowns. So we have essentially a huge list for the past year of what's been going on, the trends. And so when it comes time to write that final narrative for our report, it's really helpful to have already have that and if there's anything more that we need. We can follow up on just a little bit and not have to ask for a year's worth of reflection and going back and them having to dig down deep and remember the past year.

Jillian [00:47:20] Great. So if, am I right in understanding that you have monthly meetings with all the subs and you're sort of taking notes at those meetings about the impacts that are being seen so that you have that sort of full thing a year and then you can go back and say hey you said this back in February any update on that so you've got some something to hold on to when you do this.

Christina [00:47:45] Yes.

Jillian [00:47:46] And that those notes really become important in that way.

Christina [00:47:50] Yes.

Jillian [00:47:51] Great, thank you so much. Lorraine, anything you would add on this topic?

Lorraine [00:47:56] Um, yeah, so for our submission process, um, what I ended up doing was actually, um a gem by accident because I was so new this past fall, I scheduled, um just a data check in with each of our agencies to talk to staff to get kind of more of a historical institutional knowledge about what's happening at the agency, how their data workflow is, their processes and any other, um, roses and thorns that they wanted to share. So when it's not just, oh, what's the doom and gloom? What are the issues within the data collection process or the management? But also what's something that you're really proud of and that you'd like to highlight and share. And so by gathering that, I thought it was just for my own knowledge, but it ends up helping to provide context to what we were seeing in the data and to provide nuances. And so in preparing for the submission, I downloaded our 2023 tables and compared them to 2024 and really tried to just come up with my own story. And then if there were discrepancies that I saw from the previous year, I then, Bowlink has the capability to provide, you can drill down these reports down to the individual clinical sites. And so I would then go down to the agency, oh, what's happening at the agency is it a particular site? and then from there, reach out to staff via email if needed, a phone call was set up. But they were very responsive. And so

with that, I took that information and I met with the program director and because ultimately they were submitting the narrative portion as well as the tables. And we just went through each table and I told them what I thought was happening based off of my perspective. And then she provided any other knowledge that she may have because I'm very focused on just the data. My views are myopic. And so. Was from there that we were able to kind of tell the story about what was happening and that would then help shape our submission that came in February. So yeah, so we sent out a notice saying that all year end reporting would be due January 15th. Also, there were some data elements that we weren't sure was being correctly captured by Bowlink. And so we also created a supplemental form just to capture some information, particularly for tables 9, 13, and 14. Those seem to be a little bit more involved and they involve other staff too. Oh yes. So once we captured that, it was just sending out constant reminders. And I would say all but one agency really had all their information on time. And then that provided about three weeks for me to review everything, meet with internally before we hit that button on the OPA website.

Jillian [00:50:56] Great. So really helpful and I am noticing the theme of like trying to get that data by January 15th so that you're not competing with other things and to give time to sort of work through what you receive that if we push it out further it just becomes impossible to work through at that level and then tables 13 and 14 being the things that sometimes require some additional effort.

Jillian [00:51:21] So I'm going to ask each of you to respond to these reflection questions. So one is, were there any surprises, like really, you know, things positive or negative that came up during your FPAR 2.0 submission experience or that final preparation of that? And, Kelsie, I'll start with you.

Kelsie [00:51:47] Yes, thank you. My big one was the unknowns, and I'm sure Kiauna will talk about it too. So once we got the aggregated tables, the ones with the unknowns for most of them were zero. And Ahlers told us, and I really wanna know from you guys, we had the same message, was that they couldn't upload unknowns for some of these as valid values. But when I just download the data from Ahlers, I could see the unknowns. So Kiauna and I had to go through all of our tables and recalculate everything, which is what I use that Tableau for, or at least for like five tables, I think, like age, race, sex, ethnicity, like a bunch of those. And cause they just lumped the unknowns in with some other category with poverty. Did anyone else see that or get told that by Ahlers? Oh, thank God someone else had to do that because I was like, that was our big like, What is this? Um, but yeah, it was so weird because like I could get it from our download from Ahlers, but they wouldn't send it in their FPAR formatted one because they have their FPAR formatted one that they can send us which just looks like gibberish to reading it. And then they have there one that's actually readable for human beings. So I was so glad I had made that Tableau dashboard for all of that which had kind of seemed like a costly waste of time for the few months coming into it and it ended up being amazing. So I'm going to keep using that for sure. But yeah, fixing all the unknowns. And the other thing is, then I would have to, Ahlers aggregates didn't look anything like my aggregates, or not nothing. It's more like differences between how they define the numerator and denominator, like is age the first visit of the year? Is age the last visit of the year, is age of June 30th of the year? Things like that, and I basically had to reverse engineer how OPA did it in my Tableau to make sure that the main numbers matched before I could put in the unknowns. But Ahlers tables, like they did such a good job with the line level validation, but then the tables didn't look anything like the definitions. But you know, it's that picky stuff, like that first versus last

visits, but it makes a big difference. So I was wondering if other people saw that too, Because I was like, Ahlers tables are not helping me at all.

Jillian [00:54:12] It does make a big difference. These are set forth in the standards and guidelines. It's not, there's not that much ambiguity. There's always some, right? And, but.

Kelsie [00:54:21] Yeah, I had to go dig through it and I had, I did not expect to have to do that, I guess.

Jillian [00:54:28] Yeah. Maddie is saying, we have sensed left Ahlers but had similar experiences where they didn't use, Maddie's words, not mine, sometimes that were not consistent with FPAR instructions.

Kelsie [00:54:41] Right? Like how they categorized race and more than one race versus or how they split out different you know Native American versus Pacific Islander or I don't know, like yeah there was a lot of things it took me a lot of reverse engineering which if you're really geeky was kind of interesting but was also really stressful for that last week.

Jillian [00:54:59] Yeah, absolutely. Others? So first I'm going to shout out in the chat, someone who's a brand new Patagonia user asks whether there's any words of wisdom that folks would share. And so I chatted out a couple others who are using it for people to share. But others, what would you share about surprises or advice that you would give to others?

Kiauna [00:55:30] I can go ahead. I would just say surprises, definitely, sorry. Surprise, definitely the unknown tables that Kelsie talked about. Advice I would give, start earlier than you think you need to. Yeah, just start collecting data early. Have a plan, have a plan for reaching out to subrecipients, just yeah, start early.

Jillian [00:55:58] Um, what else?

Christina [00:56:02] For us, I don't know that I would call it a positive or negative surprise, but there has been a challenge with collecting HIV linkage to care information and so we would we directly ask our subrecipients for those numbers. We don't rely on the report to tell us that information and then on their end they can narrow it down to just a family planning visit as well if that has come up. And then advice, like Kiauna said, start earlier than you think. And then, like I think we've all mentioned throughout this session, is meet with your subrecipients monthly, if you can, and then also taking notes. I think it was Lorraine who shouted out Bowlink, but I'm also going to shout out the folks who work on the data and do all the mapping, that is huge. So the communication between your Bowlink liaison and your data analysts at the subrecipient level crucial. So yeah, a huge shout out to them.

Jillian [00:57:26] Great, yeah, absolutely. And one thing that I saw Lorraine nod at that you said was these particular data analysis, basically we just can't rely on what comes out of the EHR because they require like very specific criteria or things like that. Those are going to require their own following up on. That's what I heard you say Christina, and I think that's a great point. Any final questions or reflections? Brynn in the chat is saying start earlier and you might want to suppress certain data. Ahlers was super helpful when thinking about Washingtonian privacy and what we felt comfortable with sharing. So definitely making those decisions early. Kelsie, go ahead.

Kelsie [00:58:10] Yeah, mine would be to say that our deadlines were treated kind of like, you know, the pirate code, kind of, like, guidelines, not actual rules, you know? So, and that was largely because of staff turnover on everybody's age, but it's like, no, no. This is actually following up on that immediately when before people didn't take it too seriously.

Jillian [00:58:34] Doing that follow-up lets people know that you're looking at it, which becomes kind of self-reinforcing. And Kiauna said in the chat, which I think is a great point, I saved the data validation comments and explanations from year to year since we tend to have the same ones each year, I just update. And Katie says, Angela, thanks for the idea of adding items to the monthly chart review. We are dropping the evaluation one last time. We sincerely appreciate our panelists for sharing their experience today and for doing interviews in advance of this. We had so much great information to share. Someone in the chat is shouting out teamwork, which I completely agree. Again, please do complete the evaluation. It means so much to us to have your feedback and thank you again to the panelists for being here. Really, really appreciate it. Have a great rest of the day, everyone. Bye all.