TriYoung Inc.

Transforming Data into Information

2026

Nevada RWISE Manual

6/18/2026

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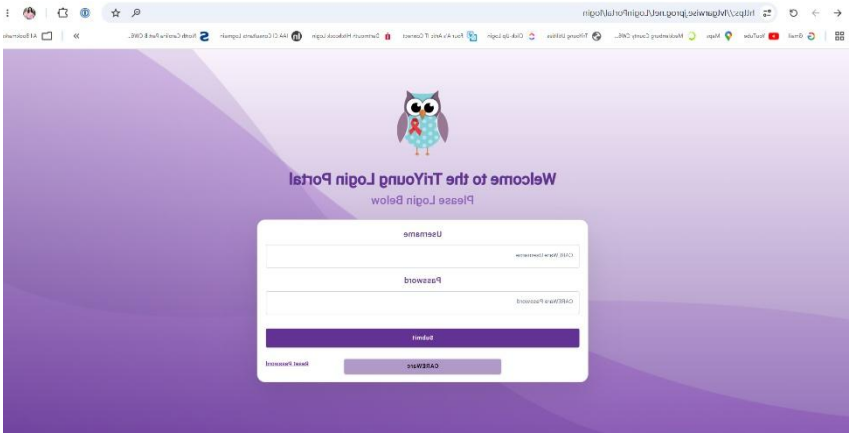
Overview

Ryan White Integrated Statewide Eligibility (RWISE) is a web-based interface developed by TriYoung, Inc. that uses the CAREWare database to provide an interface for eligibility teams to receive, review and process eligibility for the Ryan White Program. The interface is built using the standard program interface available for CAREWare along with direct data access as needed for the custom areas of CAREWare.

Nevada RWISE was developed for the Clark County Ryan White Part A and Nevada Department of Health Services Ryan White Part B program.

RWISE Login Information

- Use Web-based link – **https://lvtgarwise.jprog.net/CCPortal/**
- Use CAREWare Username and Password



The RWISE link will bring up the NV Portal screen.

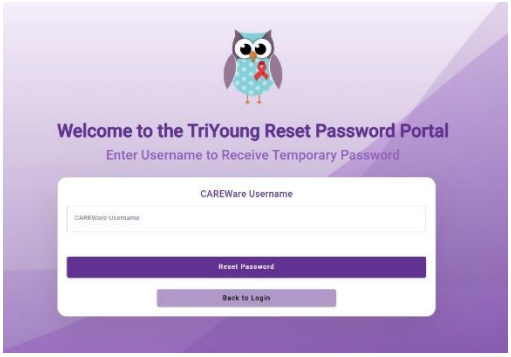
RWISE Login – Functions

- ***Log In*** – Enter the main menu after entering CAREWare Username, CAREWare Password and Enter the token from your app. (see **Setting up Two Factor Authentication in CAREWare** section for details)
- ***Reset Password*** – Enter Send Temporary Password screen to reset password

The reset password feature is linked to CAREWare. If the password is changed in RWISE it will also impact CAREWare and vice versa.

Send Temporary Password – Functions

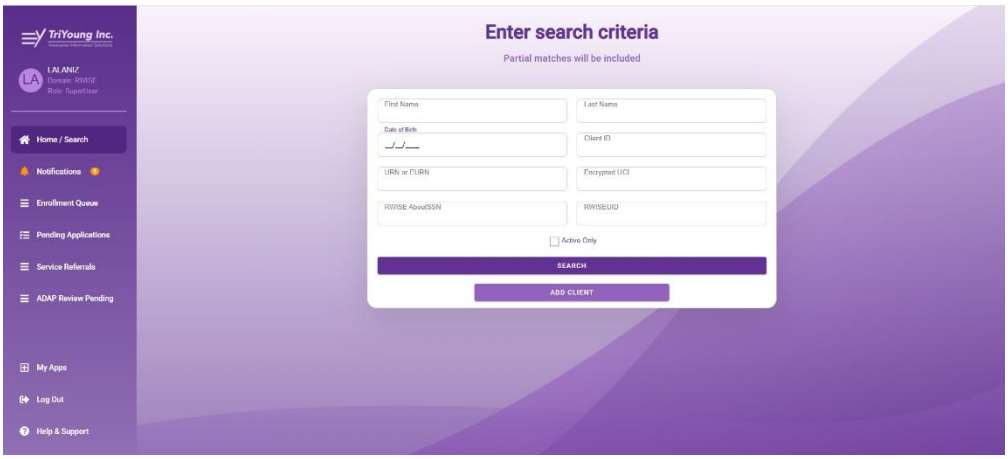
- ***Reset Password –*** Request a temporary password
- ***Back to Login*** – Return to the RWISE Login screen



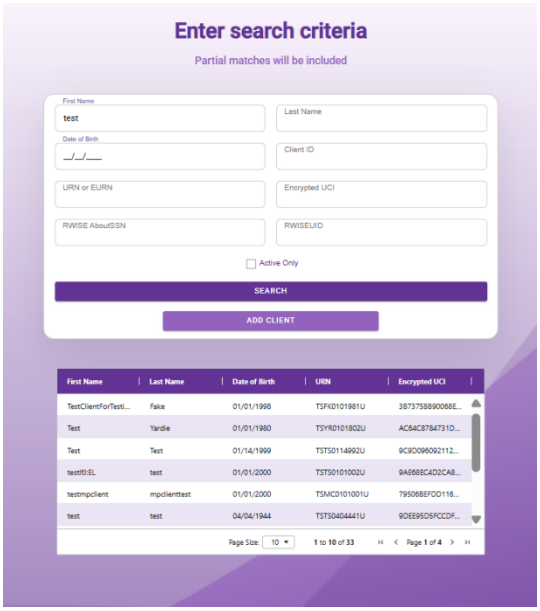
After logging into the system, the Main Menu will appear.

Main Menu – Functions

- ***Home/Search*** – Return to Home and/or Search for a Client
- ***Add Client***- Add New Client
- ***Notifications*** – Notifies the CM user if application is returned.
- ***Enrollment Queue*** – A list of clients who Recently Renewed, Disenrolled, or have an Upcoming Renewal.
- ***Pending Applications*** - View List of all pending applications for Eligibility Specialists
- ***Service Referrals*** – Queue to manage incoming and outgoing Service Referrals.
- ***ADAP Review Pending***– View a list of applications pending insurance review for Insurance Specialists.
- ***My Apps*** – Used to toggle between applications such as RWISE and CAP**.**
- ***Log Out*** – Log out of RWISE
- ***Help & Support*** – Opens for to complete for help desk assistance from TriYoung, Inc.



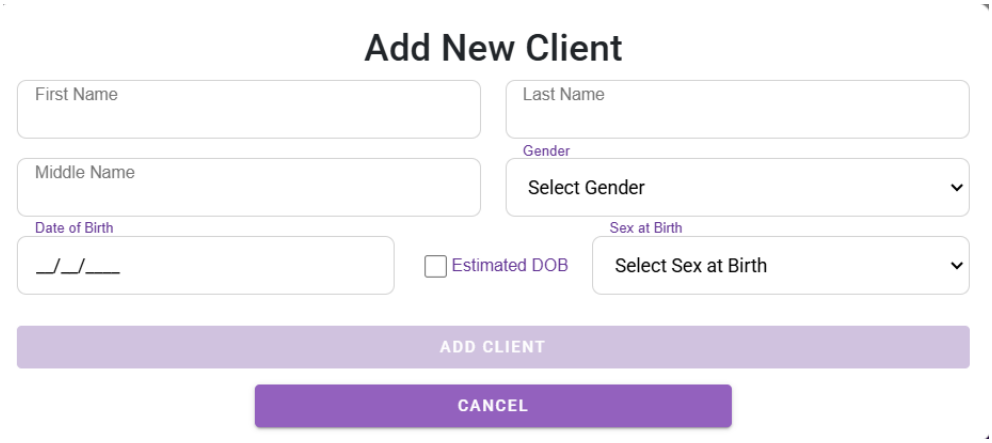
Search



Add a Client – Functions

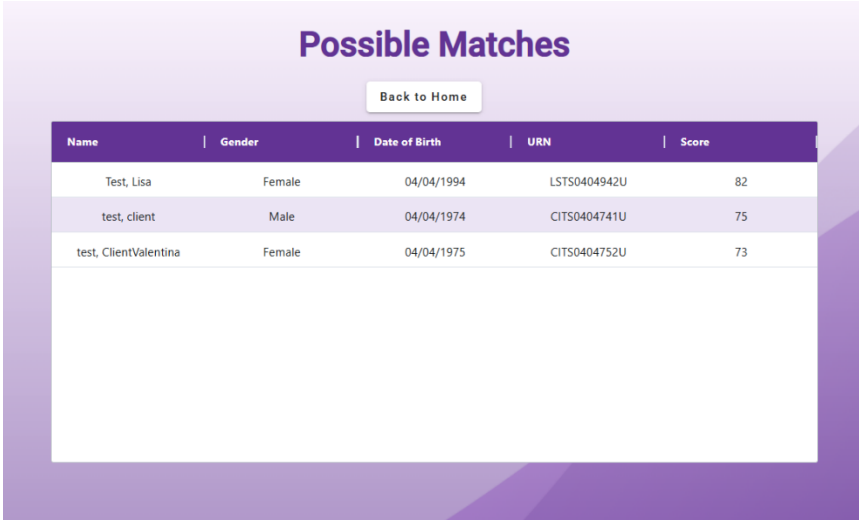
- ***Add Client*** – Add a brand-new client

- ***Cancel*** – Return to the previous menu

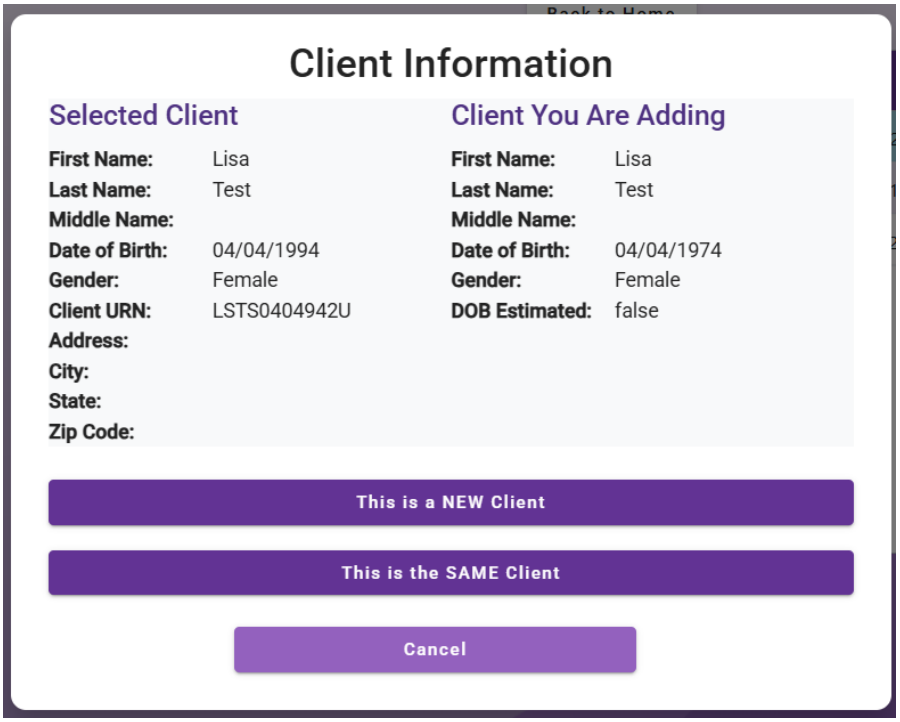


When adding a client, it is important to enter accurate information as it is used to create the **Client URN** (Unique Record Number).

When the client's information is entered and the **Add Client** button is selected, the system will check for any duplicate clients. A list will appear if any potential duplicates are found. Please see the example below and proceed according to the instructions:



Select the client you to compare and the system will present both clients' information side by side for comparison.

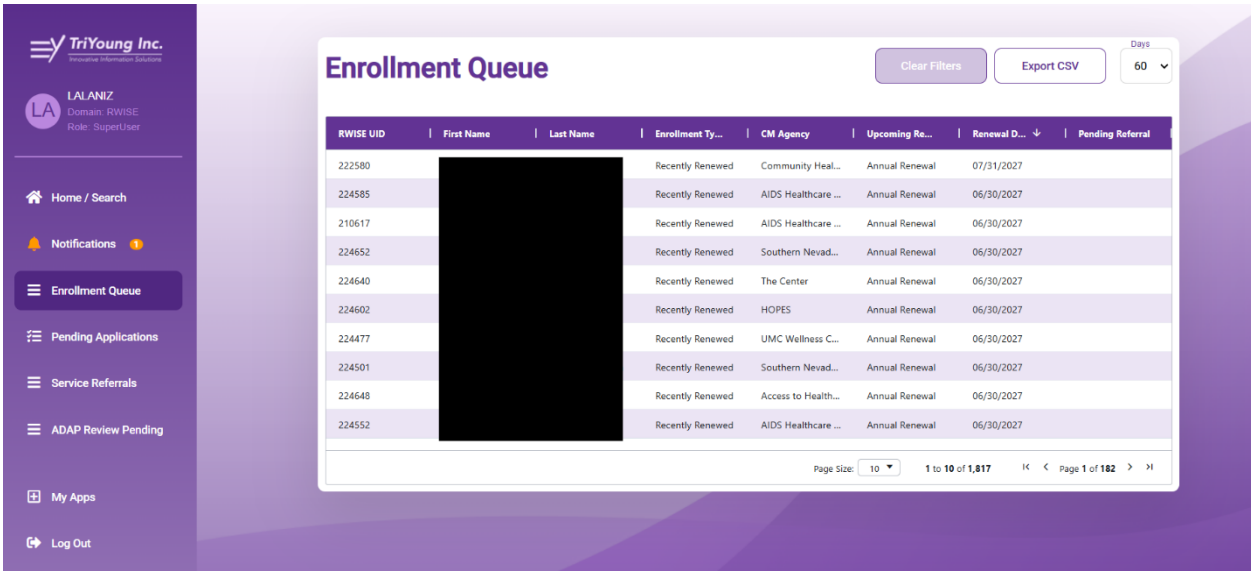


Select 'This is a NEW Client' button if the client is new.

Select 'This is the Same Client' if it is the client you were trying to add.

Enrollment Queue

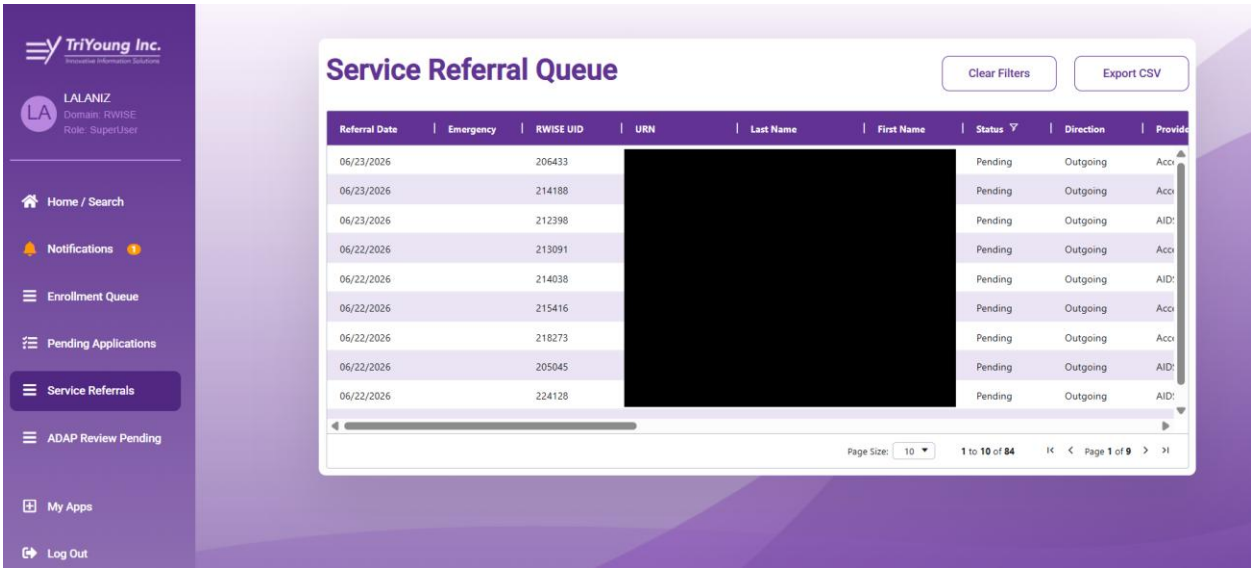
This queue provides a list of clients who have been recently renewed, have upcoming renewals or were recently disenrolled.



Revised 06/23/2026.

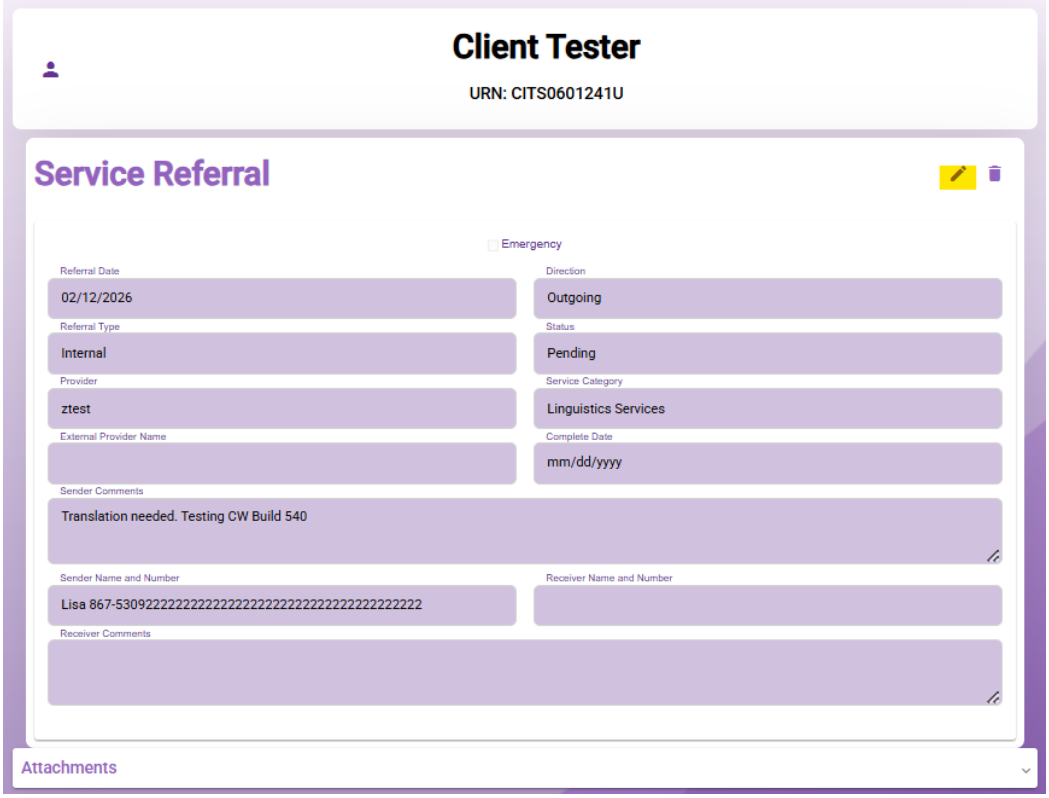
Service Referrals

This screen provides a list of pending service referrals. These are referrals for clients to receive provider services.



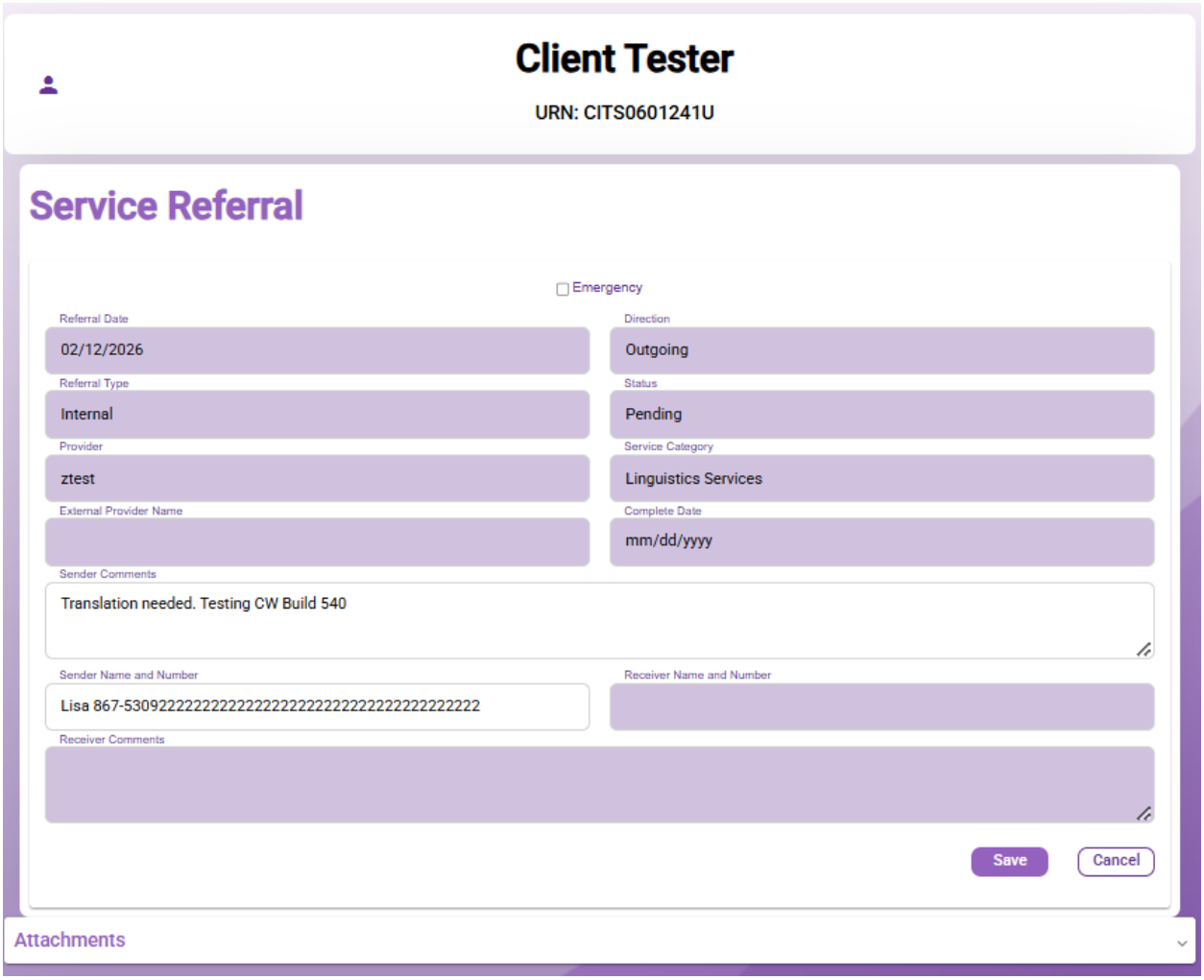
The Service Referral queue is where providers can manage their incoming and outgoing service referrals.

When you select the client, the service referral screen will open.



To edit a service referral, select the pencil icon.

Pending **Outgoing** service referrals will allow additional notes to be added and updates to Sender Name and Number.



Pending **Incoming** Service Referral will allow editing of Status, Receiver Name and Number, and Receiver Comments.

Pending Applications

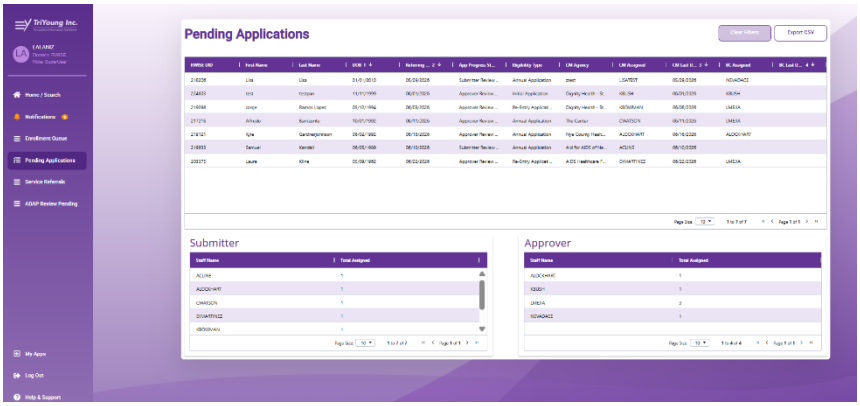
This screen allows you to view a list of clients that have pending applications as well as the number of open applications assigned to each staff member. This is useful for quality assurance and enhanced service delivery.

Use this Screen to:

- View the reason for pending application (i.e., missing documents)
- View the applications assigned to each staff member

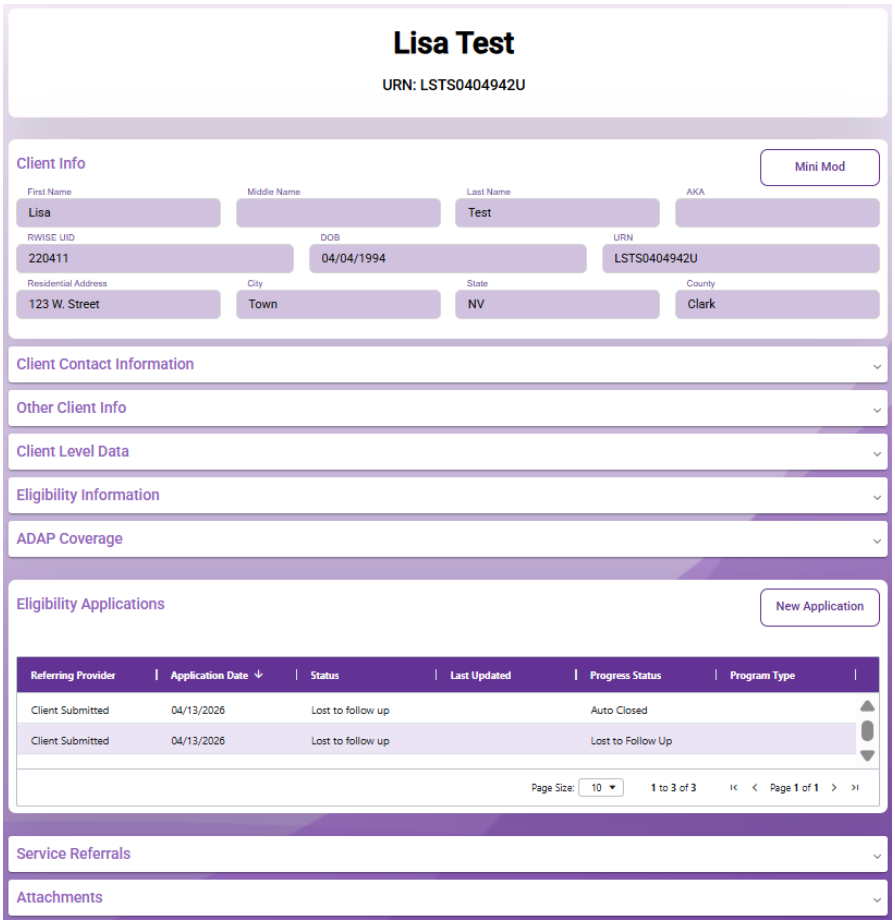
Revised 06/23/2026.

Once you have searched for a client or added a client the system will bring you to the RWISE Client Display.



RWISE Client Display

- ***Client Info*** – Client's name, unique identifiers, and address.
- ***Client Contact Information*** – Client contact, Case Manager and Medical Provider.
- ***Other Client Info*** – Provider domain specific enrollment, Provider Client ID, Housing Status and Sex at Birth.
- ***Client Level Data*** – Race, HIV Status, and Insurance.
- ***Eligibility Information*** – Eligibility Status, eligibility area, and eligibility dates. Household income and FPL.
- ***ADAP Coverage***– ADAP status and type.
- ***Eligibility Applications –*** List of all eligibility applications for the client.
- ***Service Referrals*** – List of Service Referrals for the client.
- ***Attachments –*** A list of all attachments for the client including diagnosis, application, and service referral documentation.



Eligibility Applications are how all activities are managed in RWISE. Applications are used to keep track of what needs to be processed. This includes new applications, eligibility renewals or just adding additional supporting documentation.

Add New Application

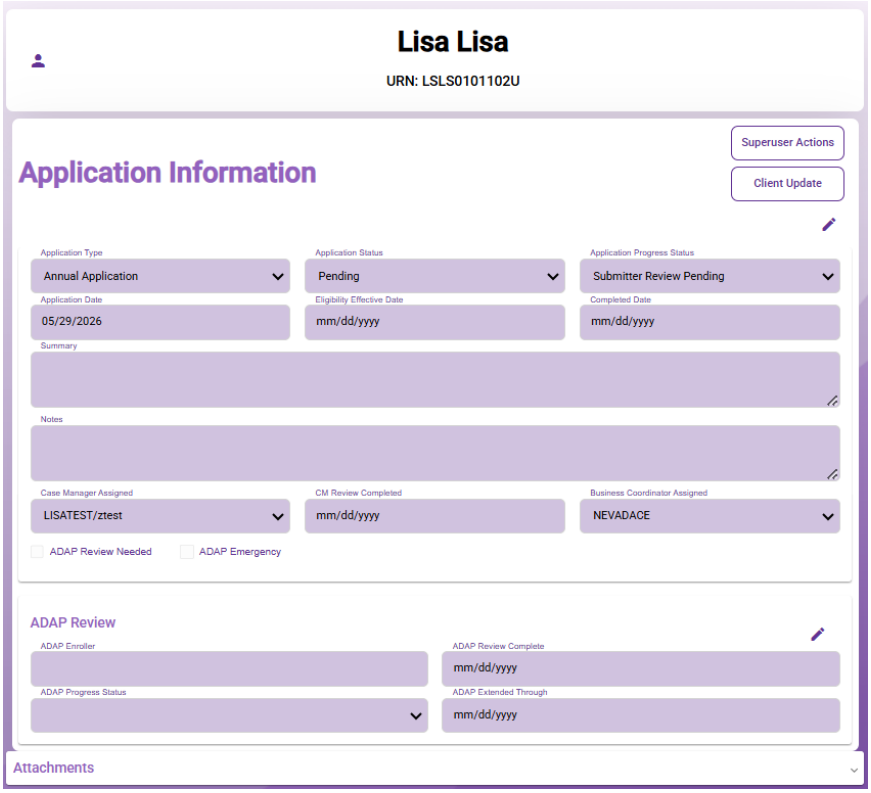
Used when processing an initial application, a renewal application and when a document supporting eligibility is received. The web applications only allow one pending referral at a time per client into the RWISE processing system. The system requires users to always use the current pending application to provide new attachments, information, or responses to the client's application.

Once the **New Application** button is selected the system will bring up the **Application** screen.

Create Application – Functions

- Pencil Icon – Edit data

- ***Person Icon*** – Return to Client Display

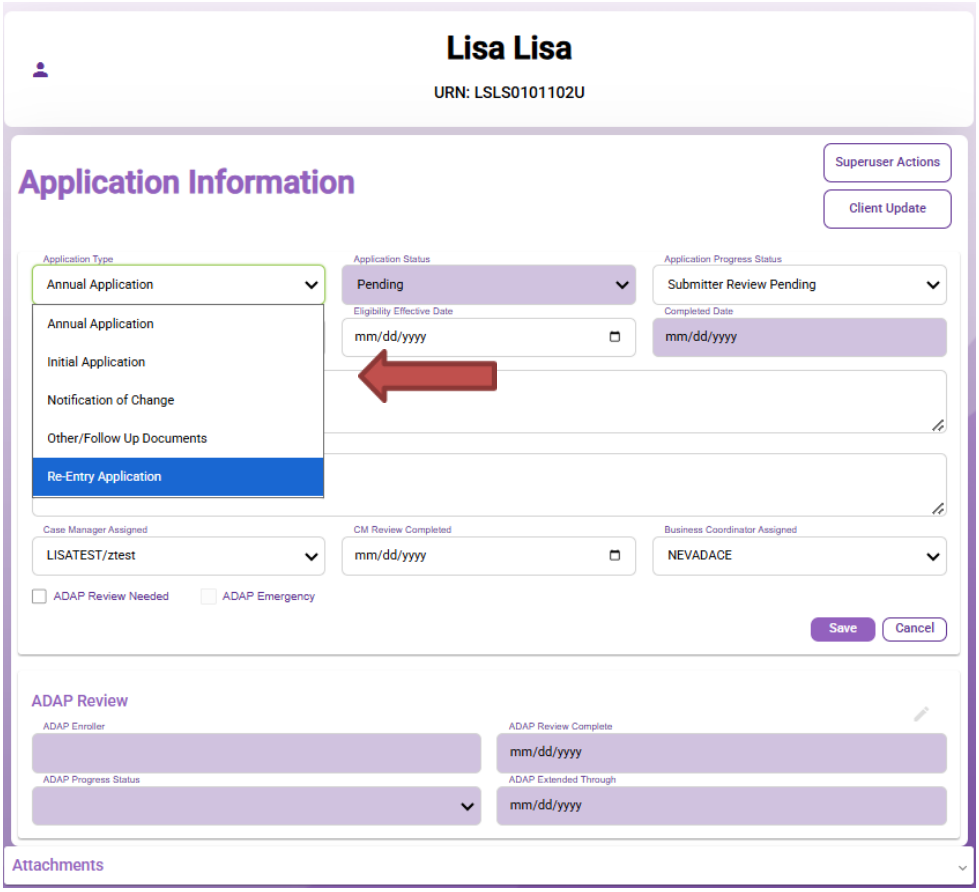


New Application - Functions

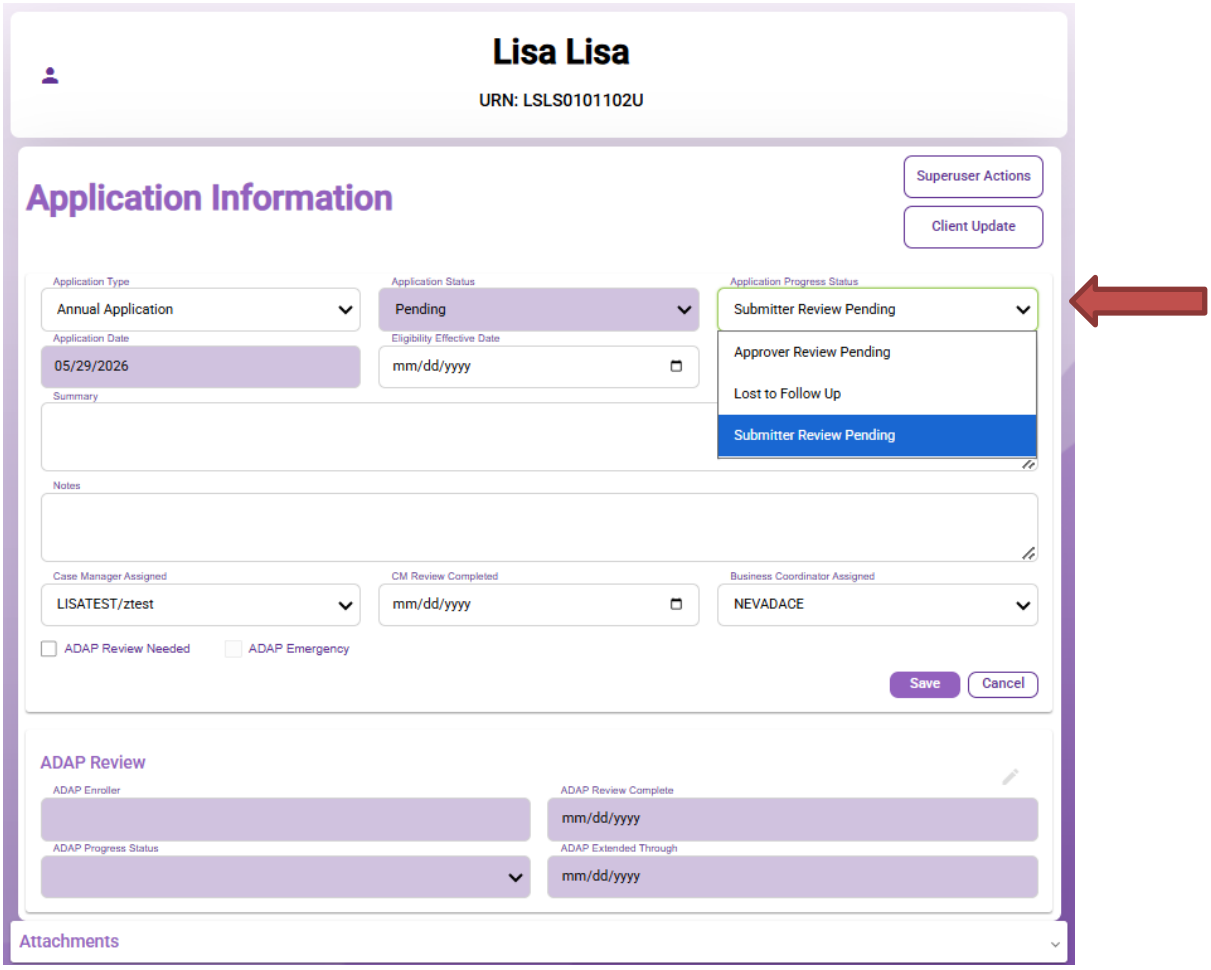
Application Type – Highlight the type of documents you are processing, i.e., birthday renewal.
Application Status – Indicates the status of the application, i.e., pending, completed, lost to follow-up, and rejected. This field is updated by the system logic.
Application Progress Status – Indicates the progress of the application, i.e., Approver Review Pending, Lost to Follow Up, and submitter review pending.
Completed Date – Date all documents are received, and eligibility is completed
Summary - Brief description of eligibility which auto populates in notes sections
Notes – Shared notes regarding eligibility
Case Manager Assigned – The Case Manager who submitted the application.
ADAP Review Needed – Check this box when an application is created. It can be unchecked if ADAP review is not needed.
ADAP Emergency – This is selected when the review is needed urgently.
Business Coordinator Assigned – The user who is processing the application.
ADAP Enroller – Name of user processing ADAP Enrollment.
ADAP Progress Status – The status of the ADAP Review.

ADAP Review Complete – Date the ADAP review is complete
ADAP Review Extended Through – A date field for ADAP Progress Status of Extended.

Please see the examples of **Application Types** in the dropdown below:

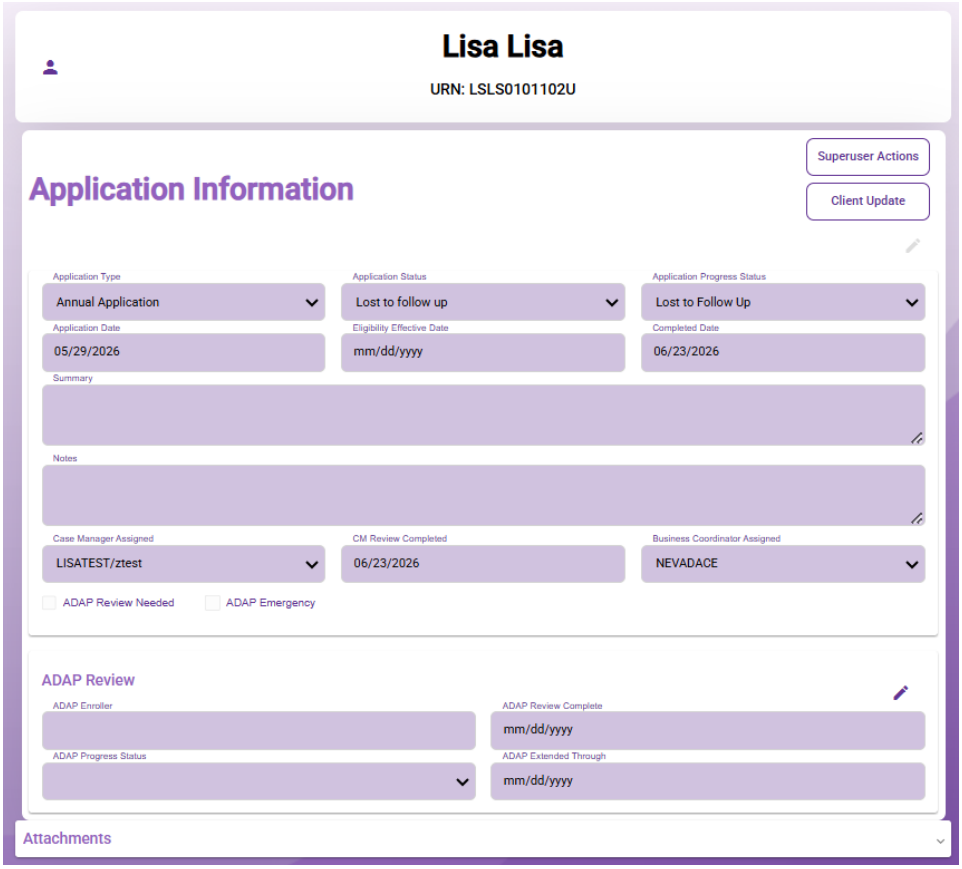


Please see the examples of **Application Progress Status** in the dropdown below:

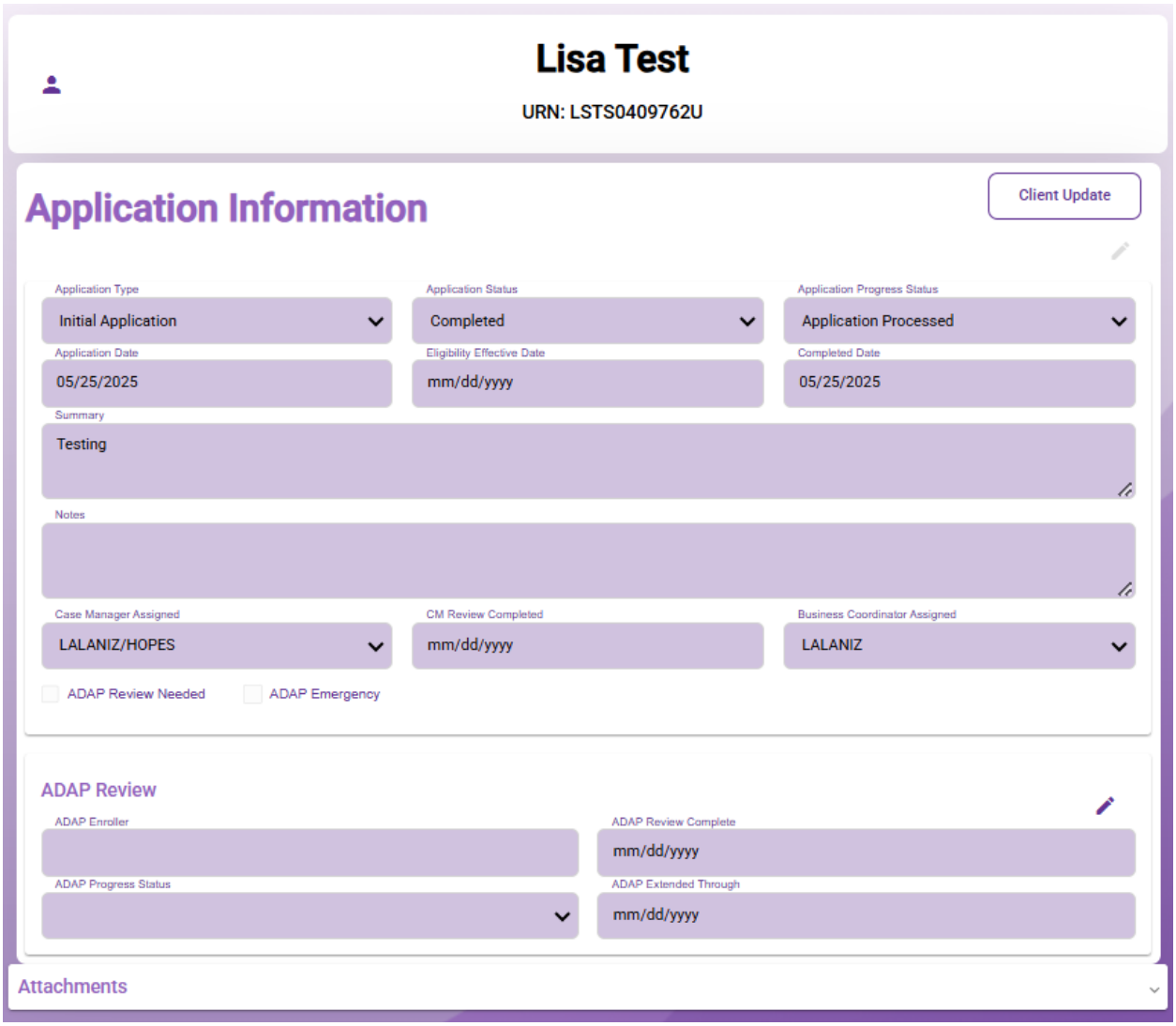


This application will remain in the **Pending Applications** queue until the application is processed.

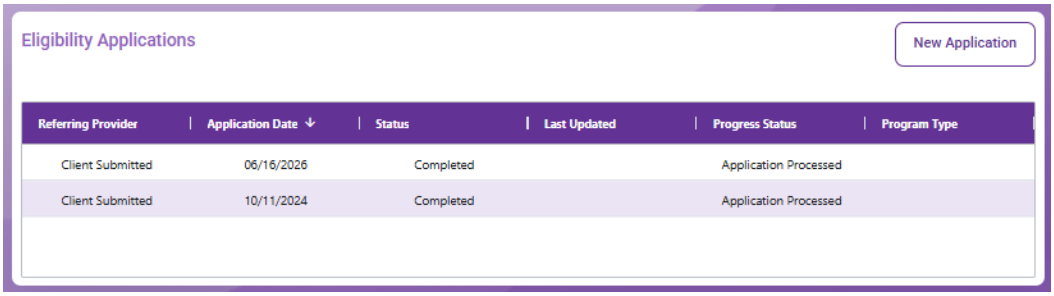
When documents you have requested are not provided, the **Application Progress Status** can be changed to **Lost to follow up** which will automatically change the Application status to **Lost to follow up**. See example below:



If a client's application is complete and the Application is processed, the **Application Status** will automatically change to **Completed** and the Application Progress Status to **Application Processed**.


Lisa Test
URN: LSTS0409762U
Application Information
Client Update
Application Type
Initial Application
Application Status
Completed
Application Progress Status
Application Processed
Application Date
05/25/2025
Eligibility Effective Date
mm/dd/yyyy
Completed Date
05/25/2025
Summary
Testing
Notes
Case Manager Assigned
LALANIZ/HOPES
CM Review Completed
mm/dd/yyyy
Business Coordinator Assigned
LALANIZ
ADAP Review Needed
ADAP Emergency
ADAP Review
ADAP Enroller
ADAP Review Complete
mm/dd/yyyy
ADAP Progress Status
ADAP Extended Through
mm/dd/yyyy
Attachments

After the application is processed for a client, eligibility status will automatically update. A historical list of applications is available on the Client Display screen. Please see example below.



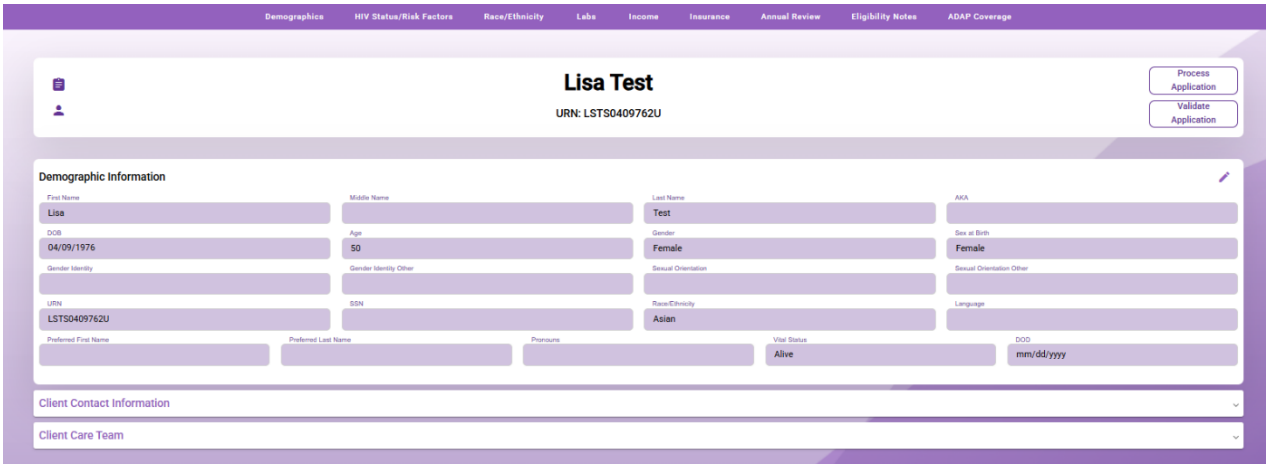
If the client has a pending application a new application cannot be added until the old application is processed. The **New Application Button** will be grayed out on the screen for a client with a pending application.

Client Updates is the button used to process and eligibility application. The buttons are located on the Application Information screen.

When to use each function:

Client Update is used to make a change to current information and process applications.

The **Client Update Screen** will appear when **Client Update** is selected. In this screen you will be able to enter and update the client's information.



Client Update Screen– Functions

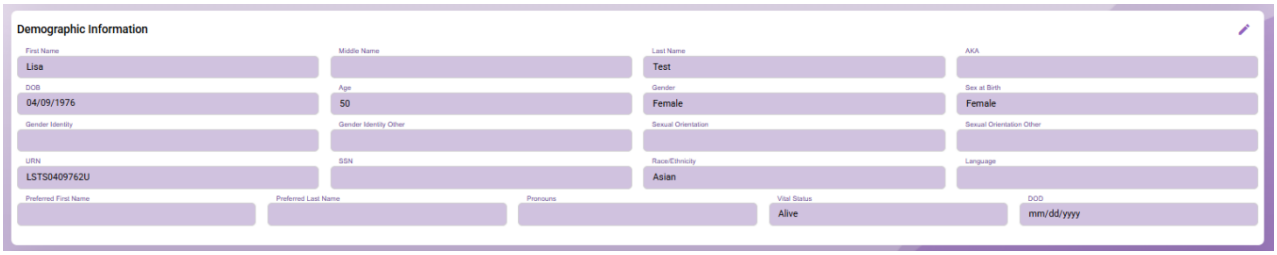
- ***Process Application*** – Save the information entered and update the client's eligibility status
- ***Validate Application –*** Verifies that all required data has been captured.
- ***Person Icon*** – Return to Client Display.
- ***Paper Icon*** – Return to Application.

The **Client Update Screen** also features data entry tabs across the top where additional information is collected. Please refer to the **RWISE Eligibility Tabs** section.

Please note: Data collected from this screen is required for the Ryan White Services Report (RSR) submitted to the Health Resources and Services Administration (HRSA).

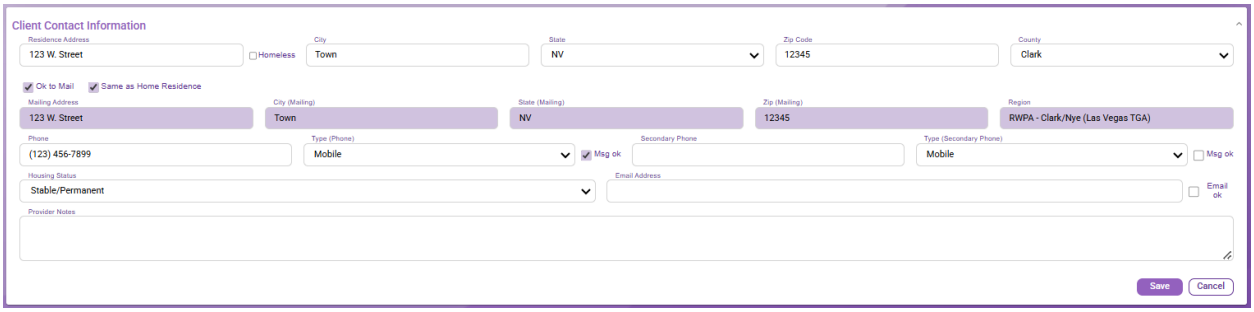
Each section of the ***Client Update Screen*** is broken down below.

The Demographic Information section below includes Client First, Middle Name, Last Name, Date, AKA List, URN, Preferred First Name, Preferred Last Name, DOB, Vital Status, DOD, Gender, Language, Interpreter Needed, SSN, Gender at Birth, Race/Ethnicity.



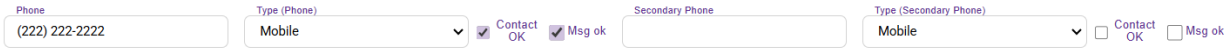
The Client Contact Information section of the **RWISE Eligibility Screen** records Home/Residence Address, Mailing Address, City, State, Zip Code, County, Region, Phone numbers, Housing Status, Email Address, and Provider Notes.

When entering the **Residence Address** the mailing address will remain grayed out until you select the **Okay to Mail** check box. If the Home/Residence address is the same as the **Mailing Address** select the **Same as Home Residence** check box. If the Mailing Address is different than the Home/Residence address, select the Okay to Mail check box and enter the mailing address information. If the client is homeless, select the **Homeless** check box and both the home and mailing address will be grayed out.



When selecting the **County** from the dropdown, the **Region** will auto populate.

The **Phone** and **Secondary Phone** have a dropdown that allows you to select the **Type** of phone number and a check boxes, **MSG OK**, indicating a message can be left at that phone number and **Contact OK**, indicating it is okay to contact the client at this number.

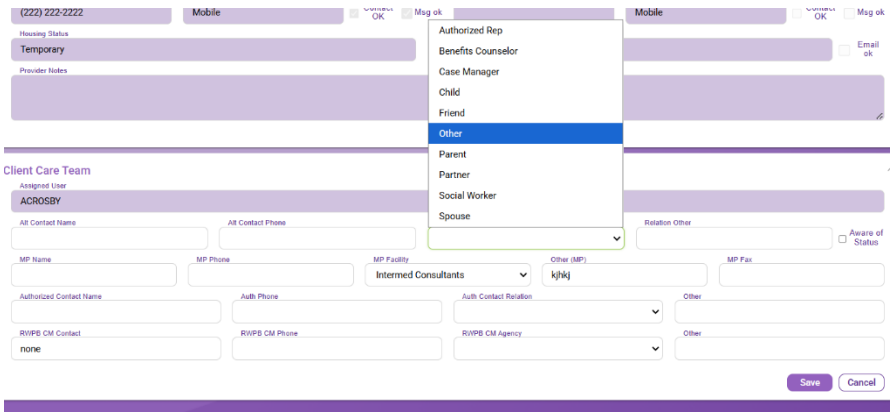


The **Housing Status** has a dropdown with three options to choose from ***Stable/Permanent***, ***Temporary*** and ***Unstable***.

Figure 1

The **Email Address** has an **Email ok** checkbox which should be selected if the email address can be used for communication.

The Client Care Team section includes Case Manager and Medical Provider information. The section also includes **Alt Contact**, **RWPB CM Agency** and **MP Facility** information.



Revised 06/23/2026.

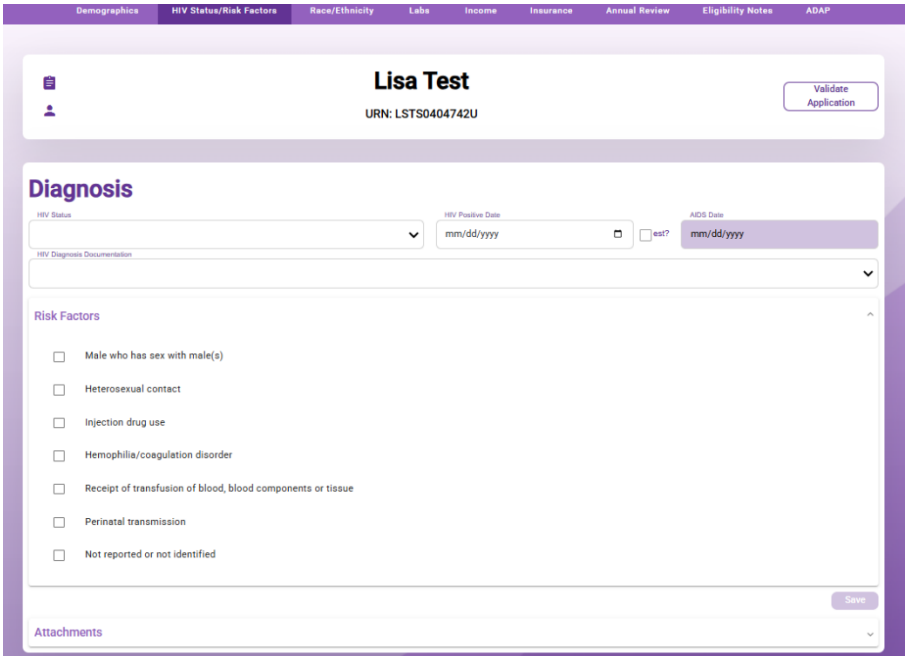
RWISE Eligibility Tabs

The RWISE Eligibility Tabs contain additional information needed for the client's eligibility application.

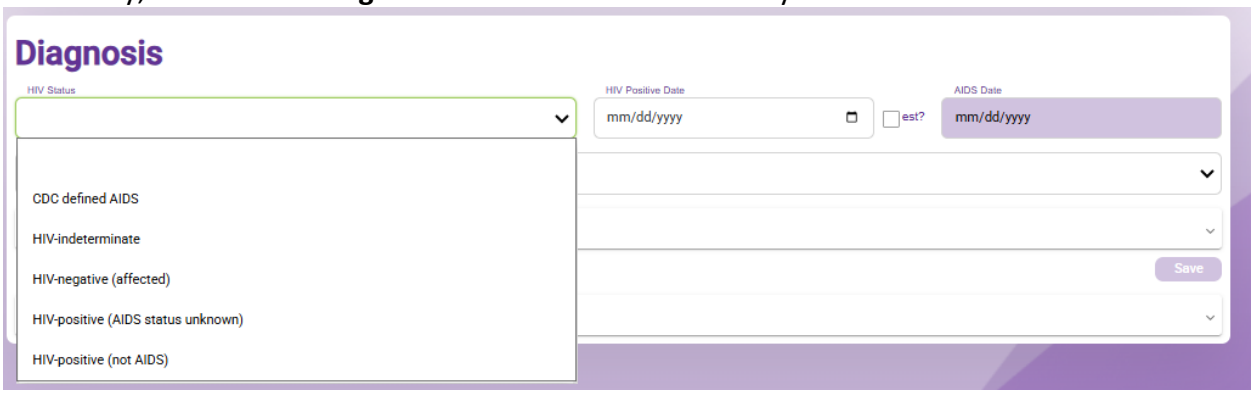
The tabs include **Demographics**, **HIV Status/Risk Factor**, **Race/Ethnicity**, **Labs**, **Income**, **Insurance**, **Eligibility Notes**, and **ADAP Coverage**.

HIV Status/Risk Factor

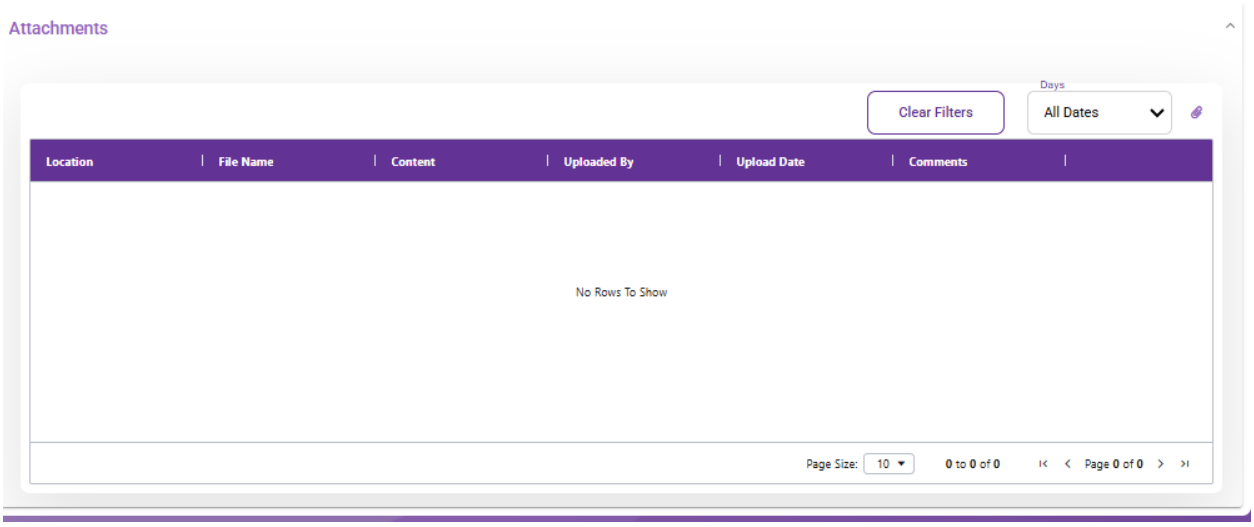
The **HIV Status/Risk Factor** tab is used to record proof of HIV/AIDS diagnosis and risk factors.



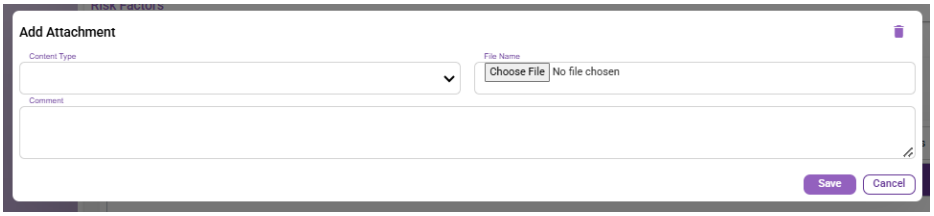
The **HIV Status** dropdown provides multiple HIV Status options. Once you have completed all data entry, hit the **Save Diagnosis** button to record the entry.



If there is a need to upload a diagnosis document to this area, select the down arrow next to “Attachments”

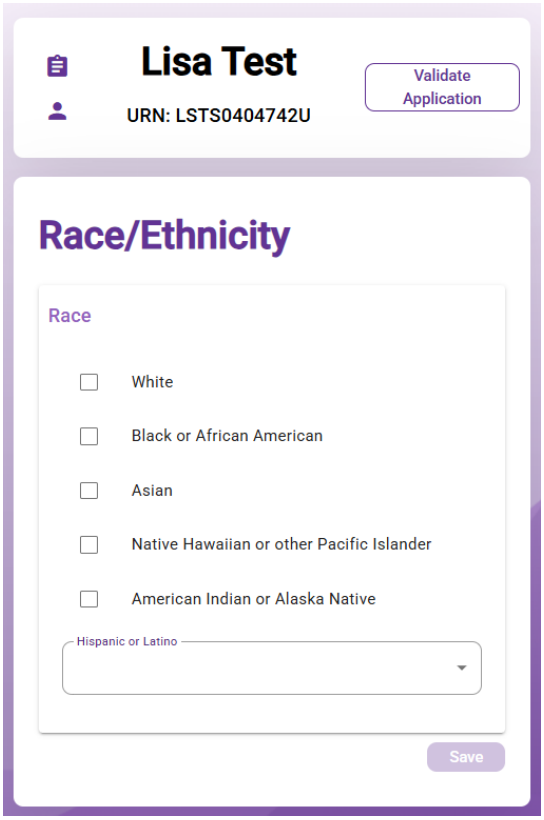


Select the paperclip to upload a document. A new **Add Attachment** window will open. Click “Choose File” to find your file on your local drive. The file format must be a PDF. Then click “Save.”

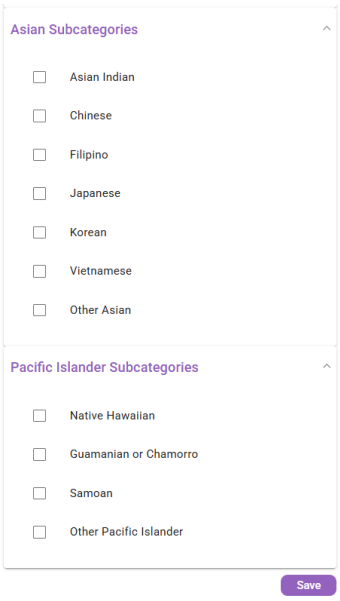


Race/Ethnicity

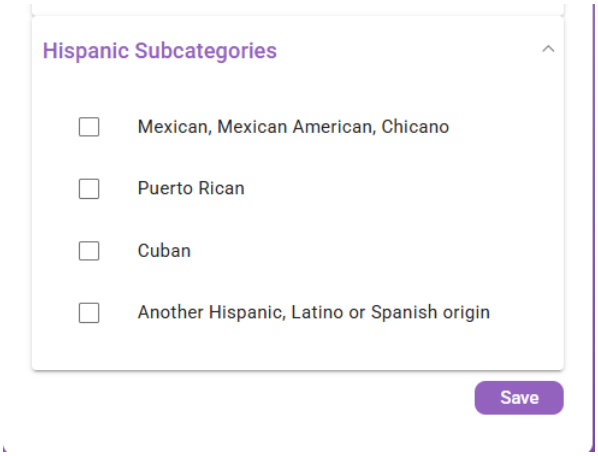
This tab allows you to document the clients **Race** and **Ethnicity** as well as Subgroup(s).



When a **Race** with subcategories is selected, an additional list will appear. Please see the two examples which include Asian Subcategories and Pacific Islander Subcategories



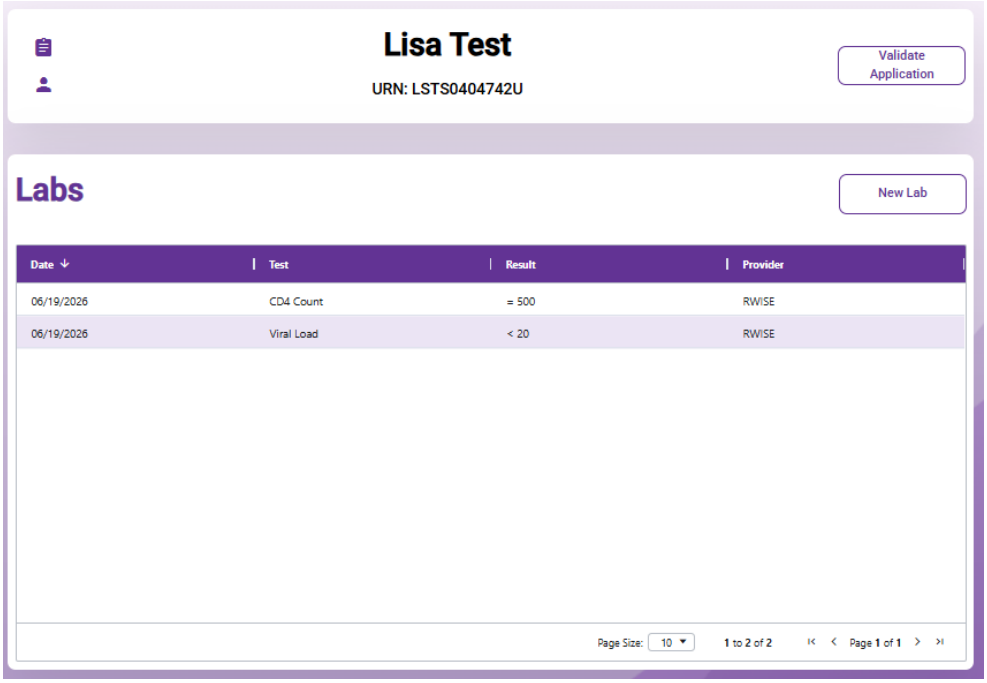
The **Ethnicity** dropdown contains two options, ***Hispanic*** and ***Non-Hispanic***. If Hispanic is selected, the Hispanic Subgroups will appear.



Once you have completed all data entry in this tab, hit the **Save** button to record the entry.

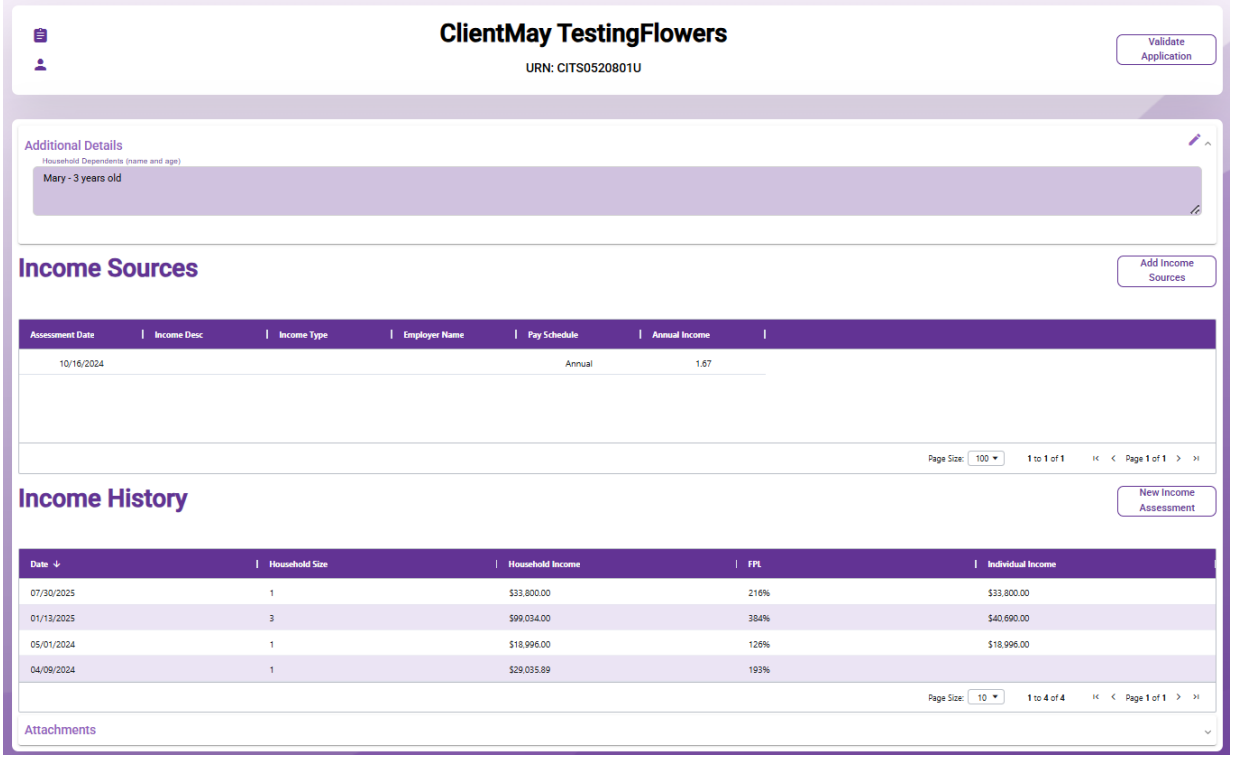
Labs

The **Labs** tab collects the CD4 and Viral Load Lab values. This tab will display the most recently reported Lab values for CD4 and Viral Load. Please see below:



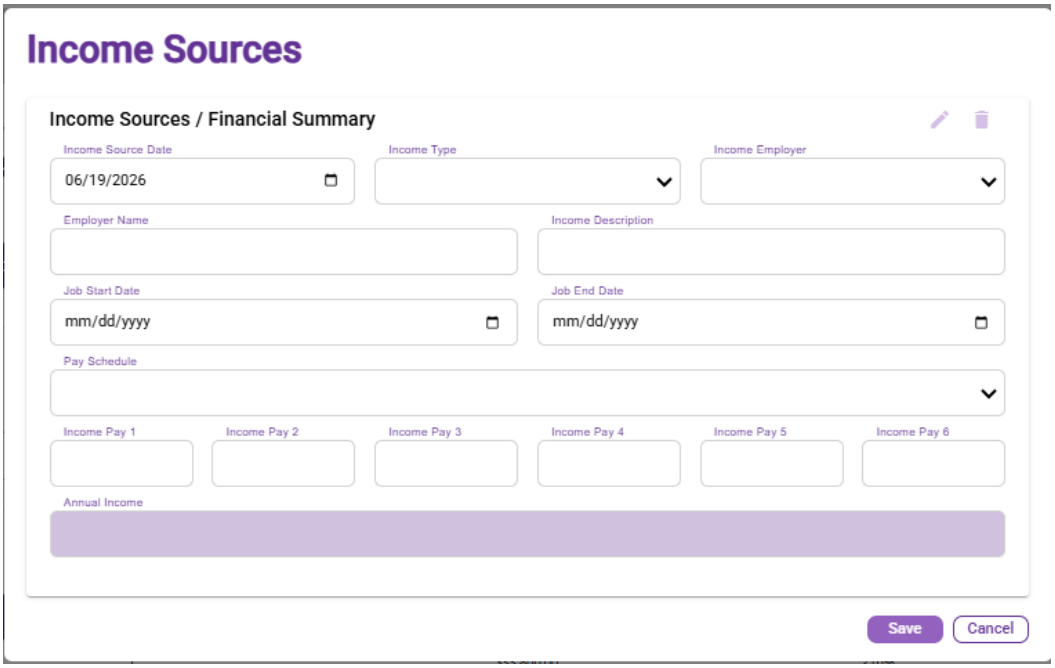
Income

The ***Income*** tab is pictured below where household dependents, income sources, income history, and income attachments are collected.

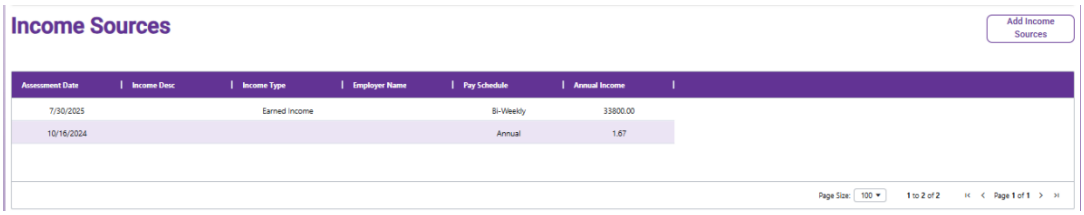


To add an Income Assessment, select the **Add Income Sources** button. This section requires a **Date**, the **Income Type** (Business Income, Child Support Income, Credits – Business Income Expenses, Credit – Child Support Payment, Earned Income, Long Term Disability (LTD), Retirement Income, Unearned Income, Unemployed – No Income, Unemployment Income), **Income Employer** (Credits-Income Reductions, Emp1, Emp2, Emp3, Self Employed, Social Security), **Employer Name**, **Job Start Date**, **Job End Date**, **Income Description** (free text field), **Income Pay 1-6** fields (to record individual checks), and **Pay Schedule** (Annual, Bi-Monthly, Bi-Weekly, Monthly, Seasonal, Weekly). Once you have completed this section, hit the **Save**

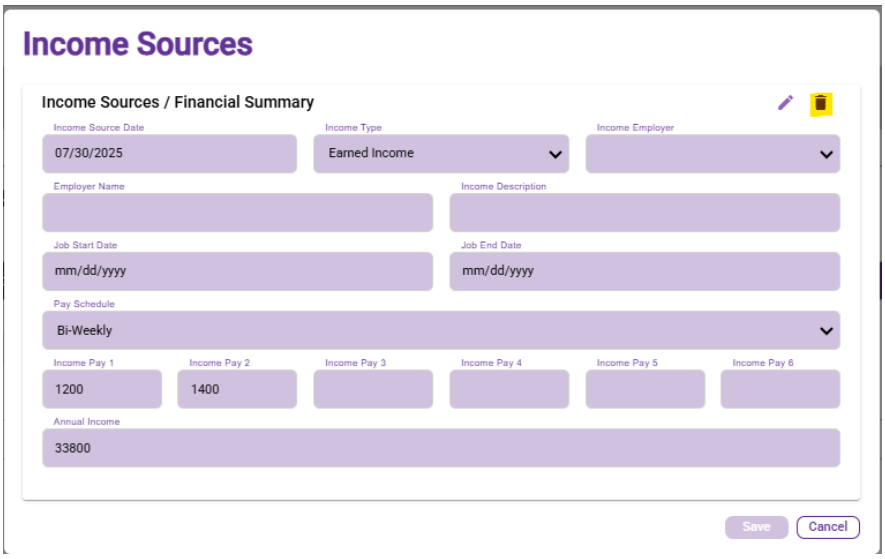
button to record the data.



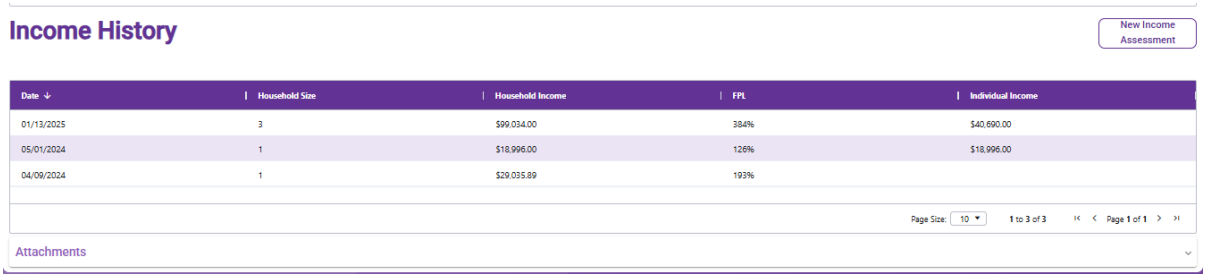
If you wish to add additional income, please follow the steps above until income from all sources have been entered. All entries on the ***same date*** will automatically be added together by the system.



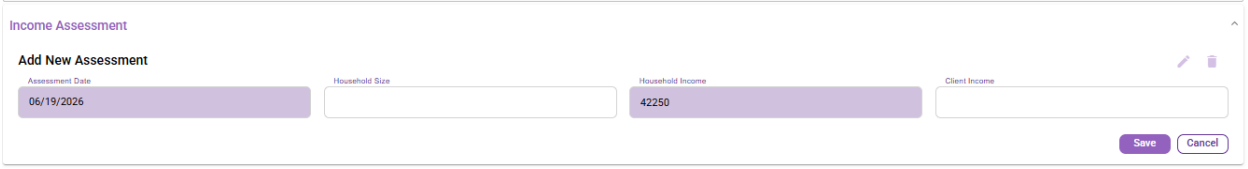
If you wish to delete an entry, select the Income Assessment you no longer need and hit the **Trash Can** Icon.



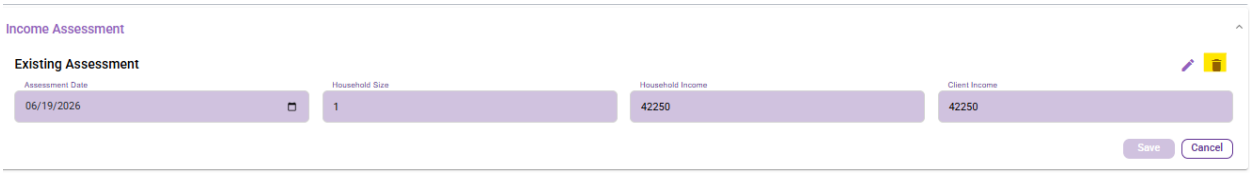
To add a Poverty Assessment, the **New Income Assessment** box must be selected. This section requires an **Assessment Date**, the **Household Size, Household Income** and **Client Income** if more people than just the client are in household.



When New Income Assessment button is selected, a new section opens.



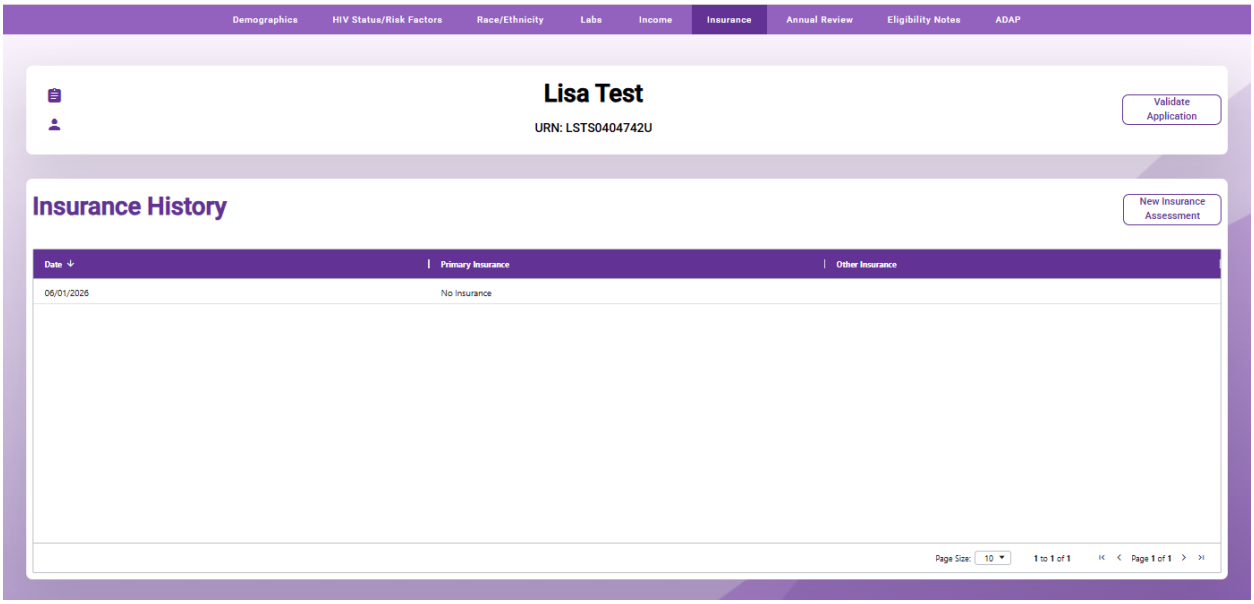
If you wish to delete an entry, select the Income Assessment you no longer need and hit the **trashcan** icon.



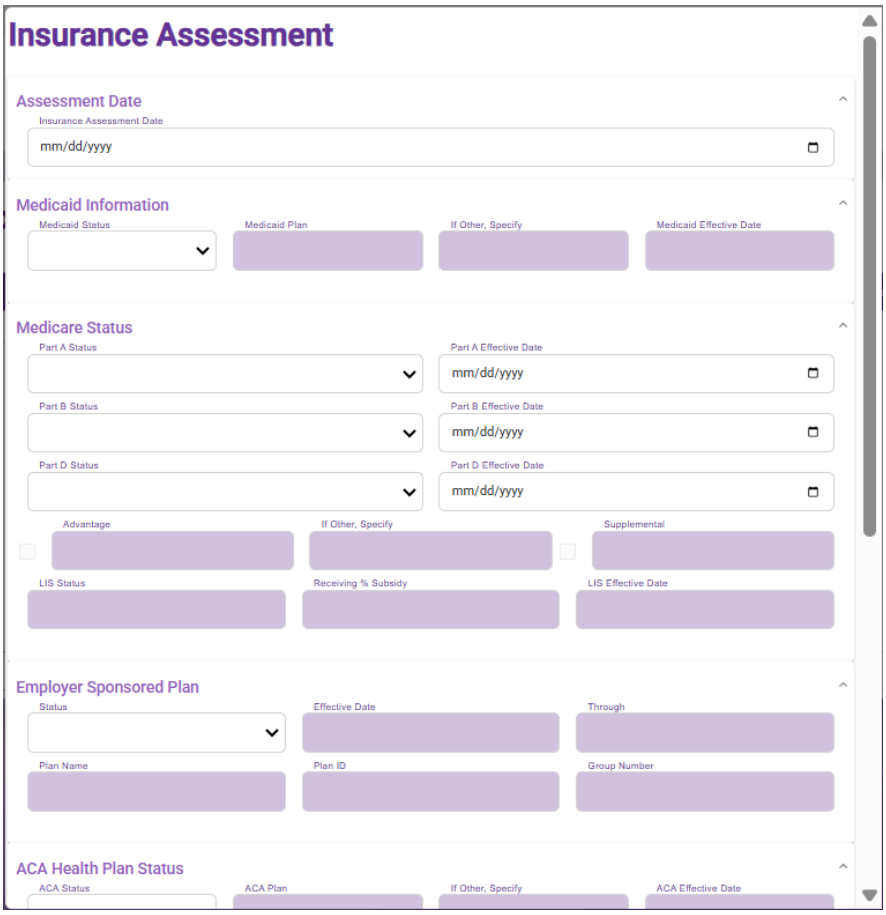
Revised 06/23/2026.

Insurance

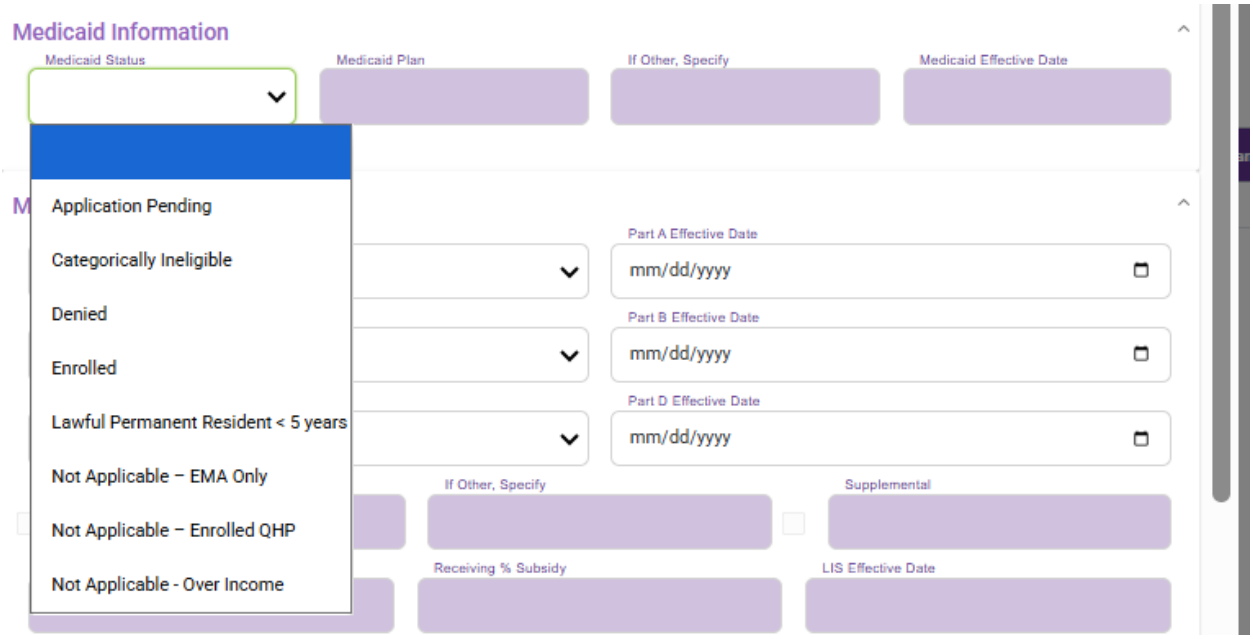
The Insurance section records insurance information for the client. This section is important to ensure that Ryan White is payer of last resort.



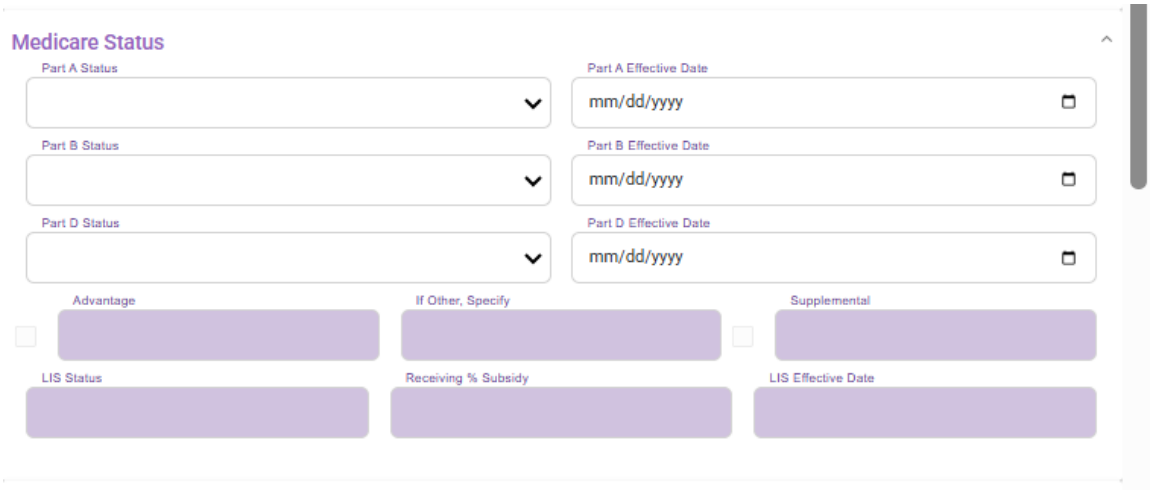
Select the **New Insurance Assessment** button to add a new insurance assessment. The Insurance Assessment window will open.



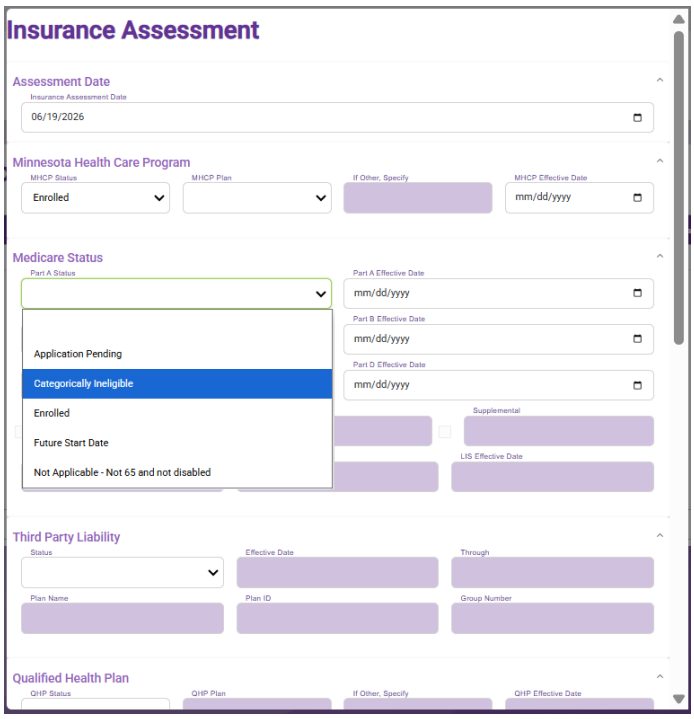
Medicaid Information records Medicaid status, Medicaid Plan and Medicaid effective date.



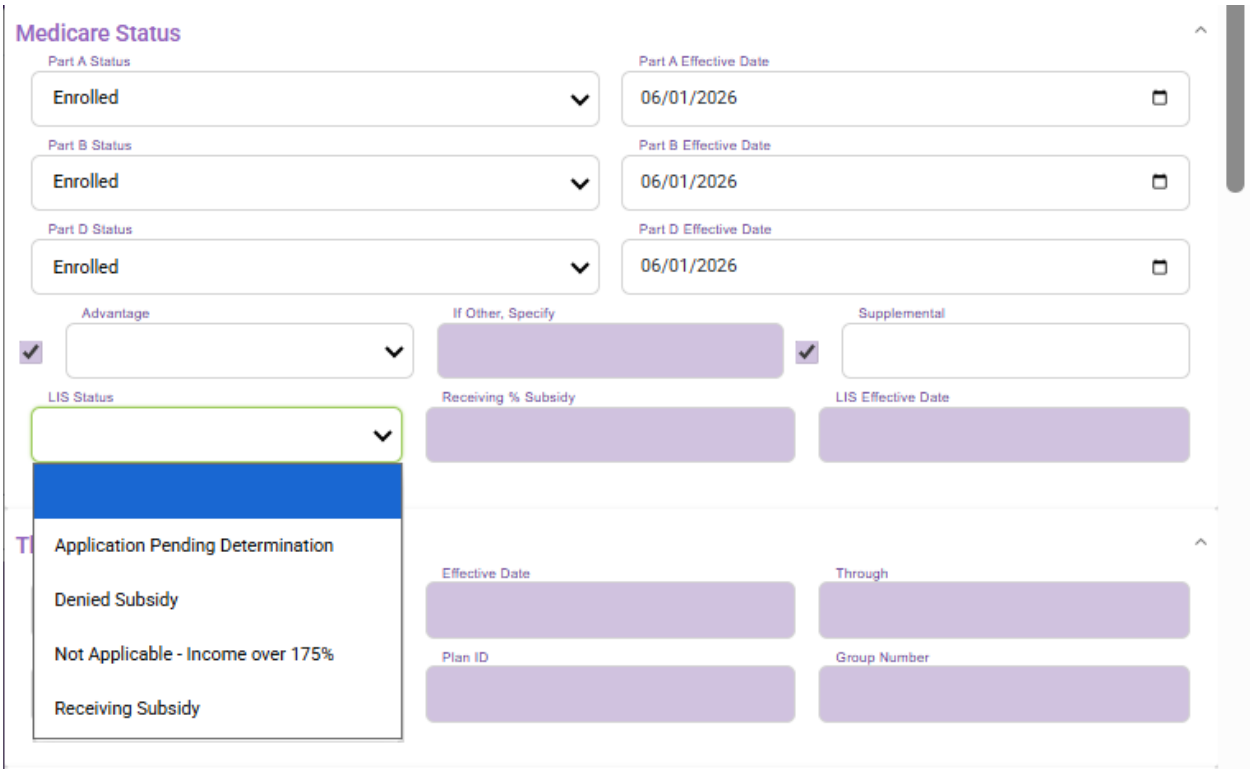
The **Medicare Status** records the Medicare Part A Status, Part B Status, Part D Status, Effective Date, Plan name, Advantage plan, Supplemental plan, Low Income Subsidy (LIS) with Receiving % Subsidy and the LIS Effective Date.



The Medicare Part A Status, Medicare Part B Status, Medicare Part D Status all have the same dropdown options which are Enrolled, Not Applicable – Categorically Ineligible and Not Applicable – Under Age 65 and Not Disabled, Past Enrollment, no longer enrolled, SSI only <24 months SSDI, will be eligible in next 12 months. Each status contains the same calendar option to select the status date.



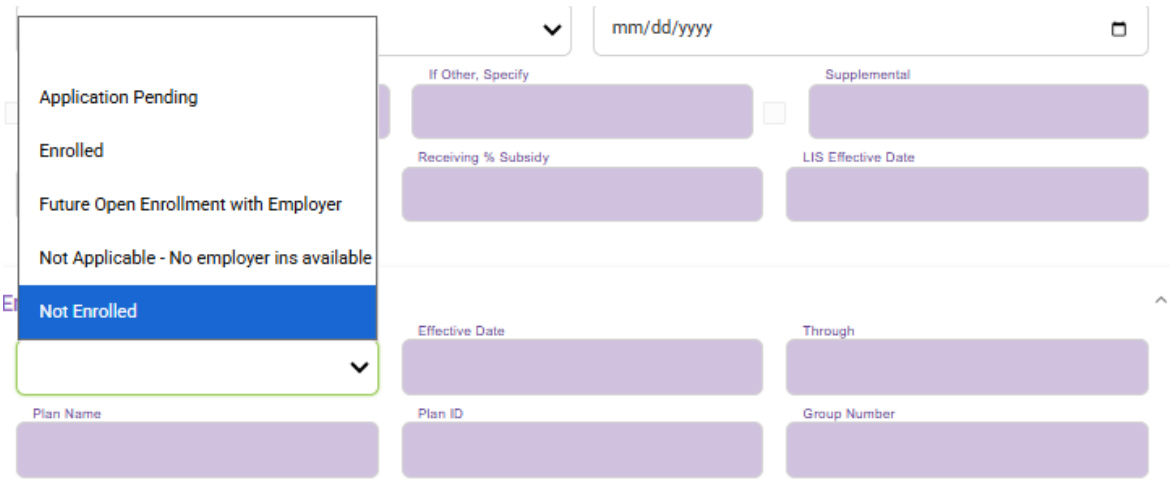
The Low-Income Subsidy is recorded under LIS Status. The options include Application Pending determination, Denied Subsidy, Not Applicable – Income over 175% and Receiving Subsidy.



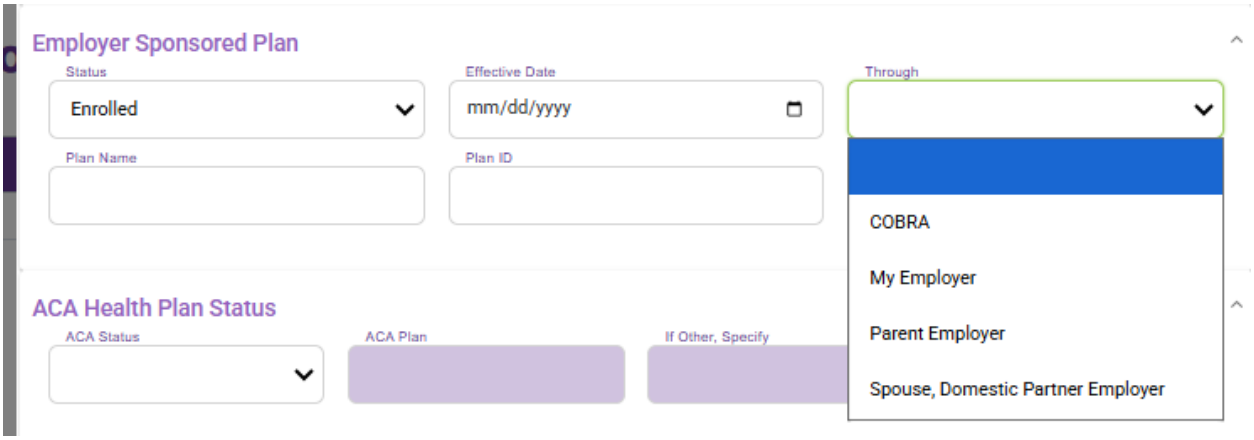
Revised 06/23/2026.

The **Employer Sponsored Plan** section is used to record private, employer-based or COBRA insurance.

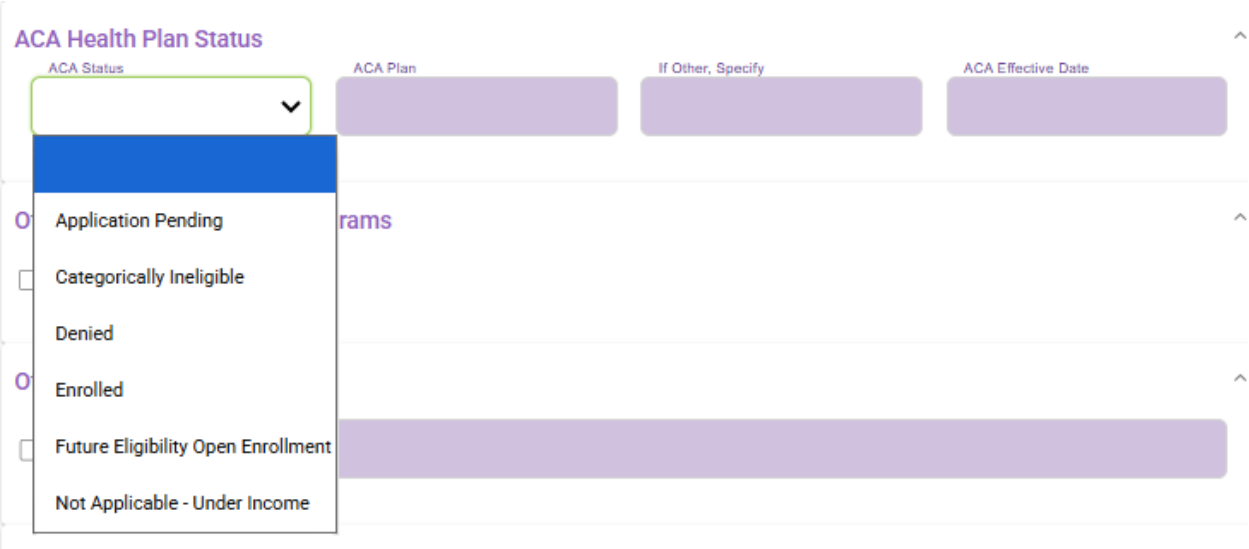
The first dropdown provides a list of enrollment status options which includes Application Pending, Enrolled, Future Open Enrollment with Employer, Not Applicable- No employer insurance available and Not Enrolled. The Effective Date field next to the dropdown is used to record the date associated with the status.



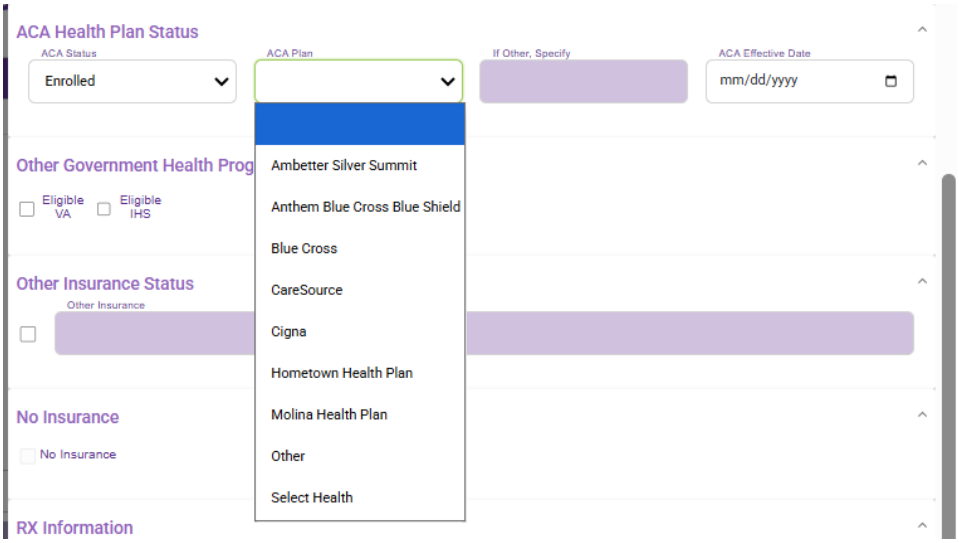
The second dropdown, Through, allows you to record the source of the insurance. The options include COBRA, My Employer, Parent Employer, Private Individual Plan (not on Federal Marketplace), and Spouse Domestic Partner Employer.



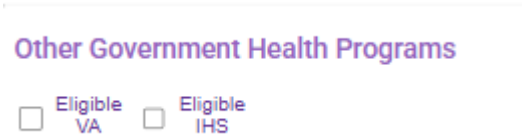
The **ACA Health Plan** Status section has a dropdown to indicate the client's Application is Pending Determination, Categorically Ineligible, is Denied, is Enrolled, Future Eligibility Open Enrollment, and Not Applicable – Under Income.



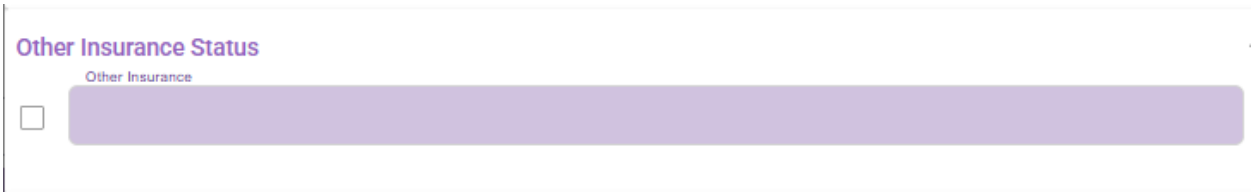
There is also a dropdown with ACA plan names.



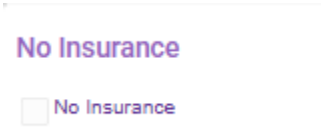
The **Other Governmental Health Insurance Programs** section has a check box for Eligible VA (Veterans Administration) and Eligible IHS (Indian Health Services).



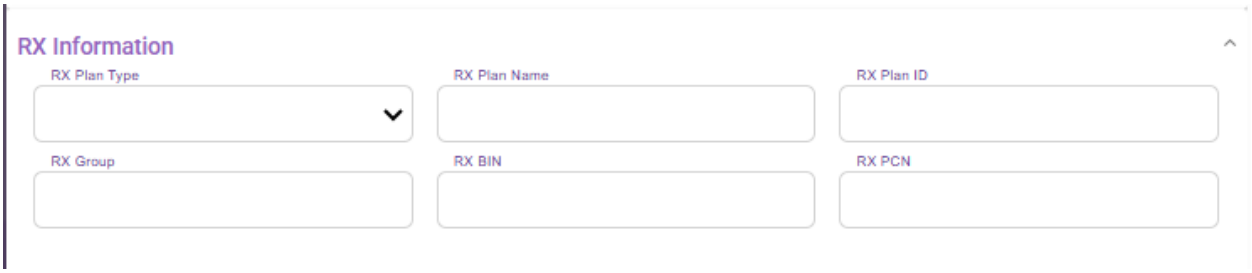
The **Other Insurance Status** has a check box to indicate Other Insurance and a text box for the insurance name.



The **No Insurance** section has a check box to document if a client has no insurance.

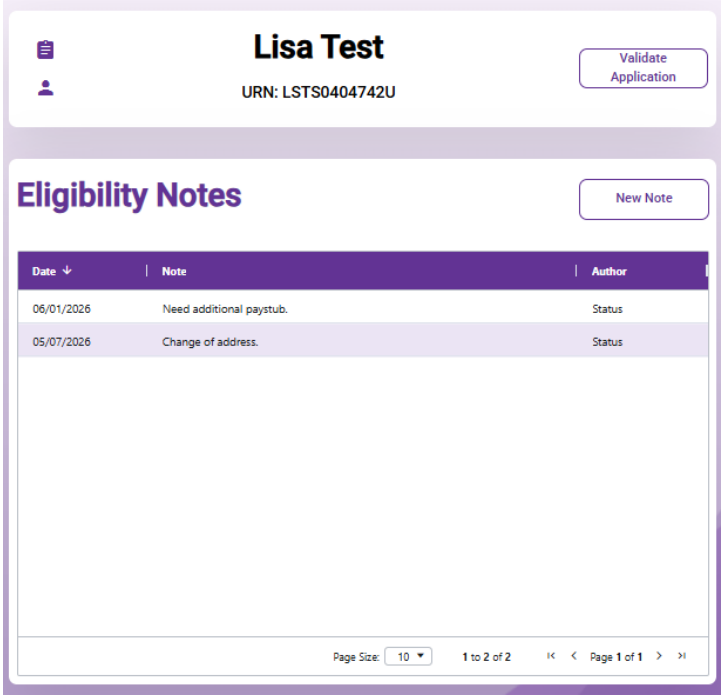


The RX Information section allows entry of RX Plan Type, RX Plan Name, RX Plan ID, RX Group, RX BIN and RX PCN.

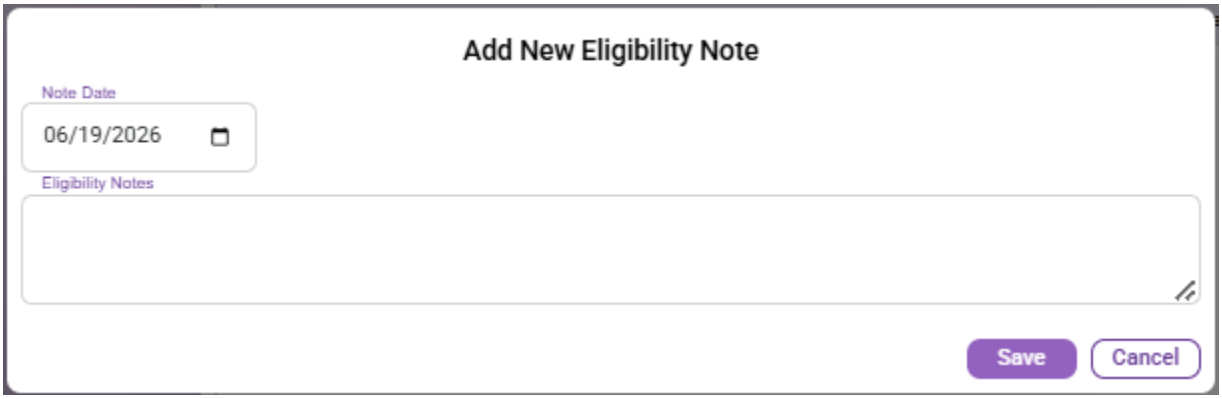


Eligibility Notes

The **Eligibility Notes** tab is where any notes regarding the referral is recorded. Please see below:



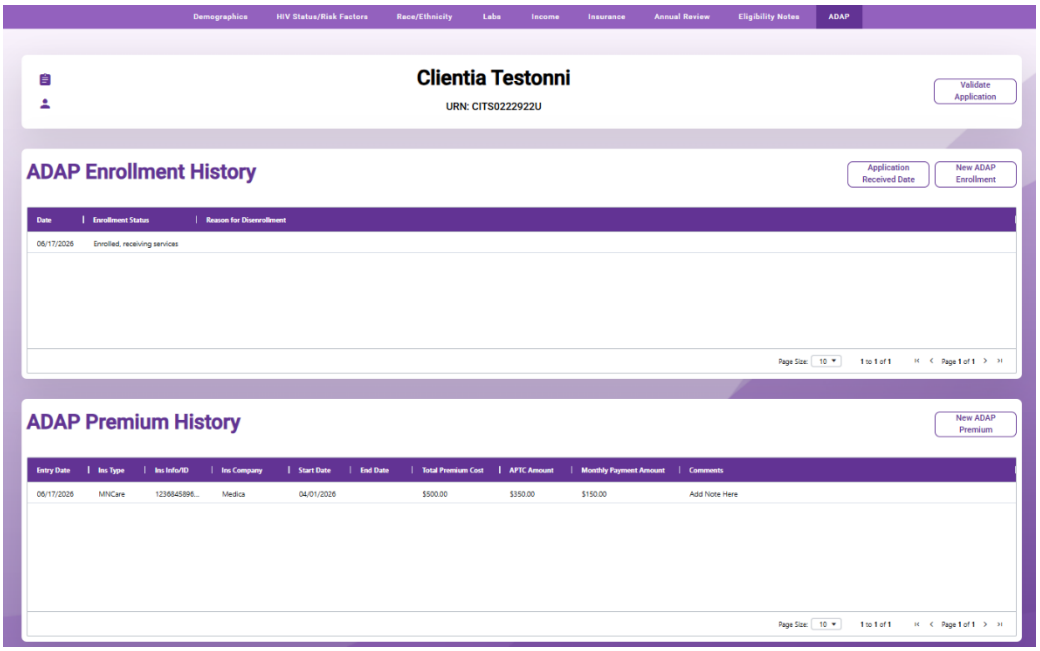
To add a new note, select the **New Note** button and the **Add New Eligibility Note** box will appear.



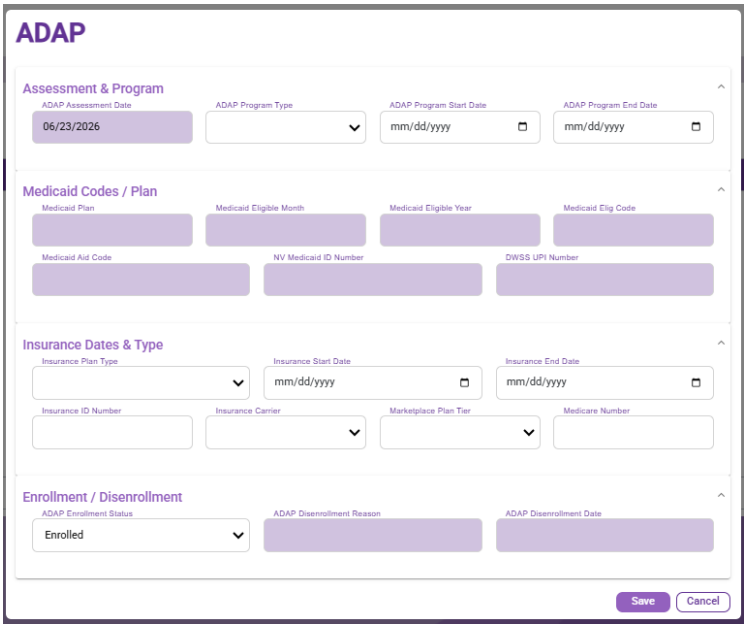
Select the **Save** button to record the note.

ADAP Coverage - Part B ADAP Users ONLY

This tab is used to document **ADAP Enrollment History**. It displays historic *ADAP Enrollment Services*.

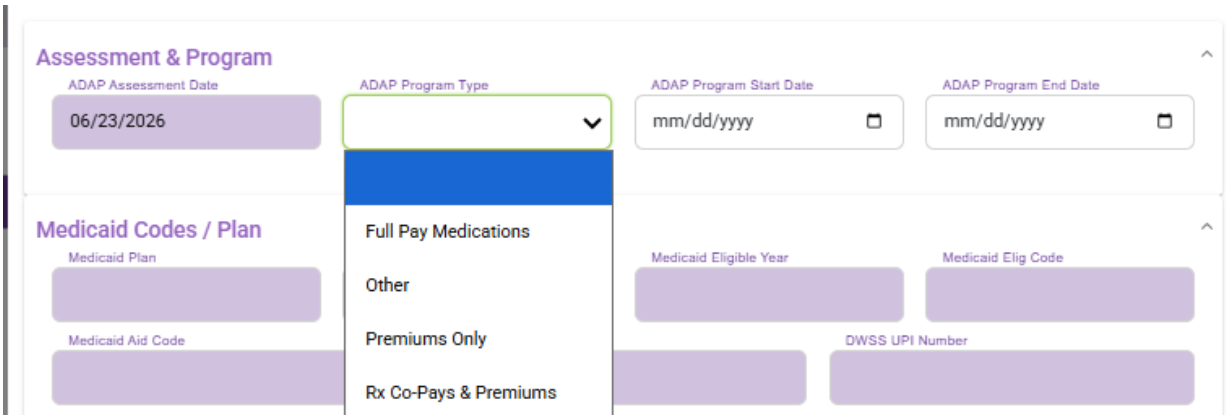


To add a new ADAP enrollment, select the **New ADAP Enrollment button**. The ADAP Enrollment window below will open.

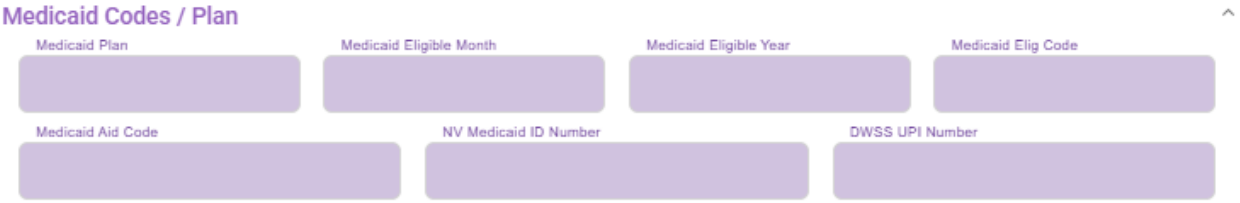


The **Program Type** dropdown options include ***Full Pay Medication, Other, Premiums Only, RX Copays and Premiums, RX Copays Only***.

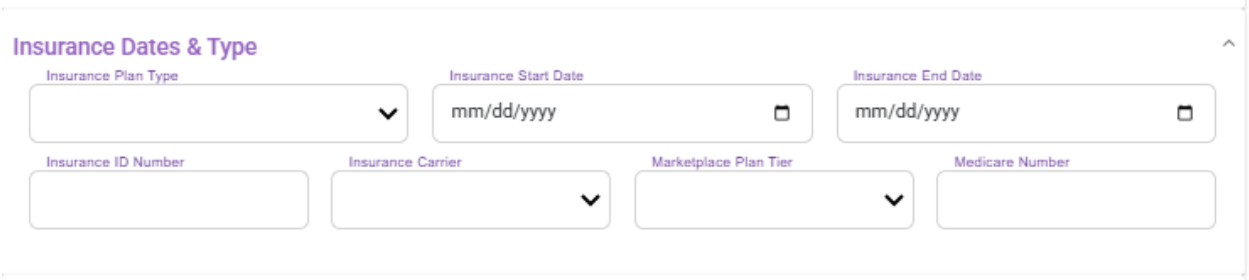
Revised 06/23/2026.



The Medicaid Codes/Plan information is populated via Medicaid import. This section is not editable.

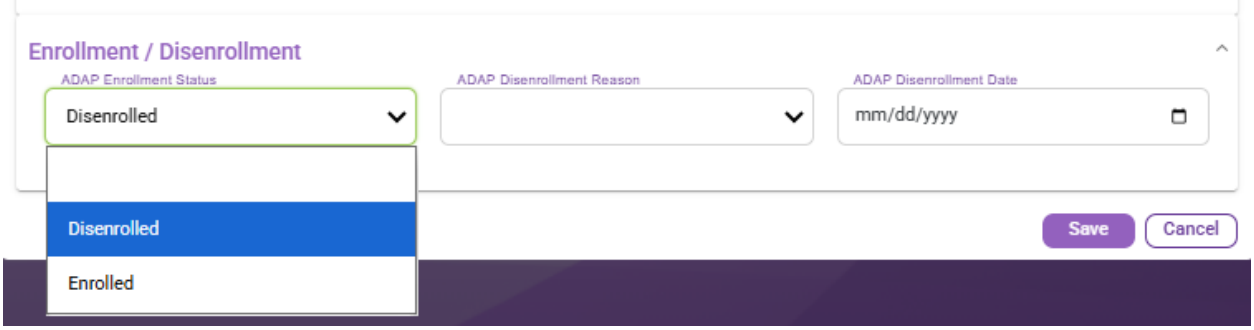


The Insurance Date and Type is a section where the ADAP user can document Insurance Plan Type, Insurance Start Date, Insurance End Date, Insurance ID Number, Insurance Carrier, Marketplace Plan Tier, and Medicare Number.



ADAP Enrollment and Disenrollment

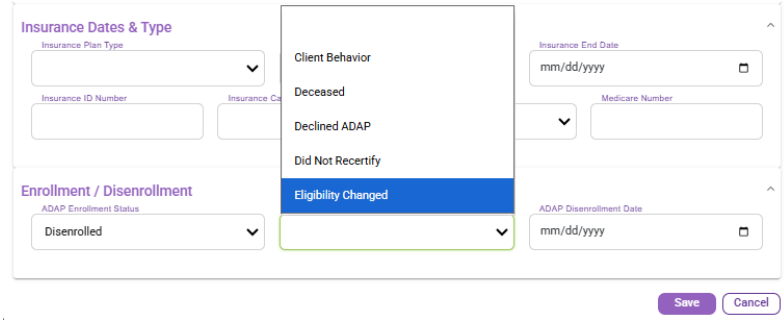
ADAP Enrollment Status controls enrollment into ADAP.



If status of ***Disenrolled*** is selected, the ***Ineligible Reason*** will become available. The reasons include ***Client Behavior, Deceased, Declined ADAP, Did Not Recertify, and Eligibility Changed,***

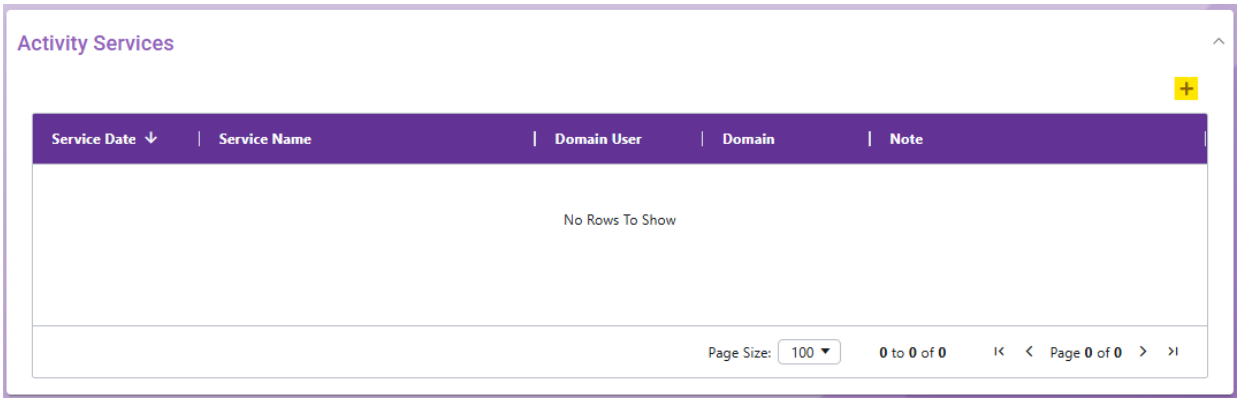
Once you have completed **ADAP Enrollment** entry, hit **Save**.

applicable notes regarding the client's premium

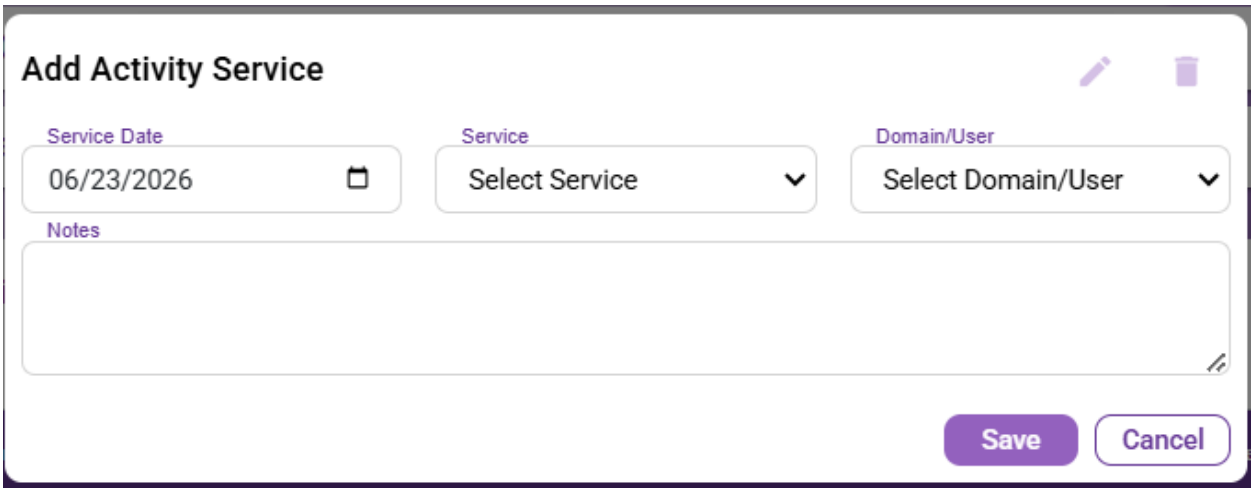


Activity Services

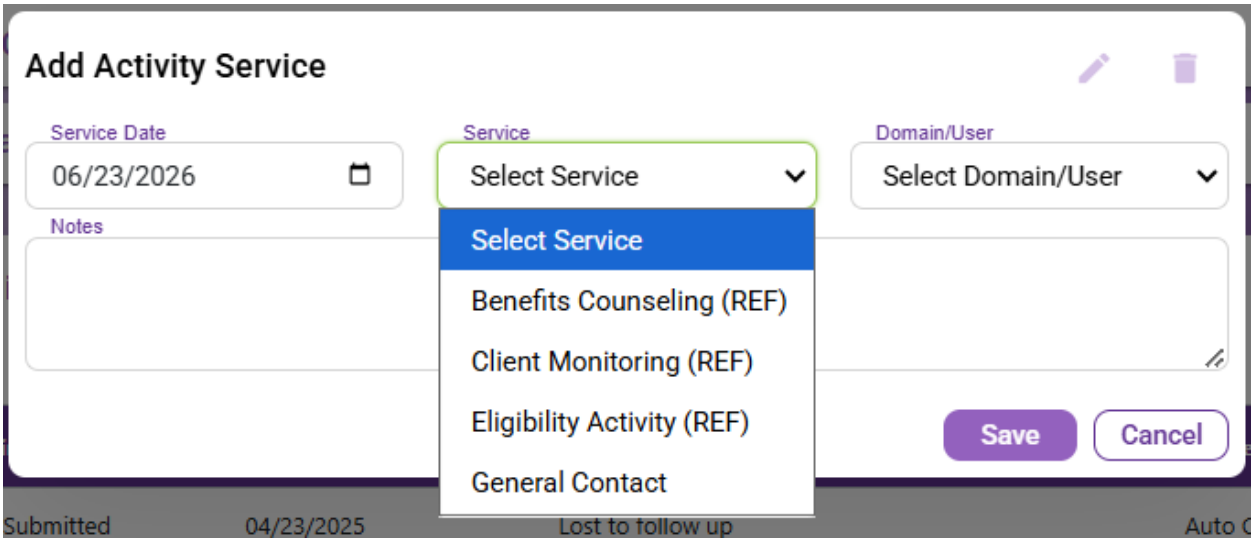
This card is located on the client display for RWPA and RWPB CE Users who login the RWISE domain.



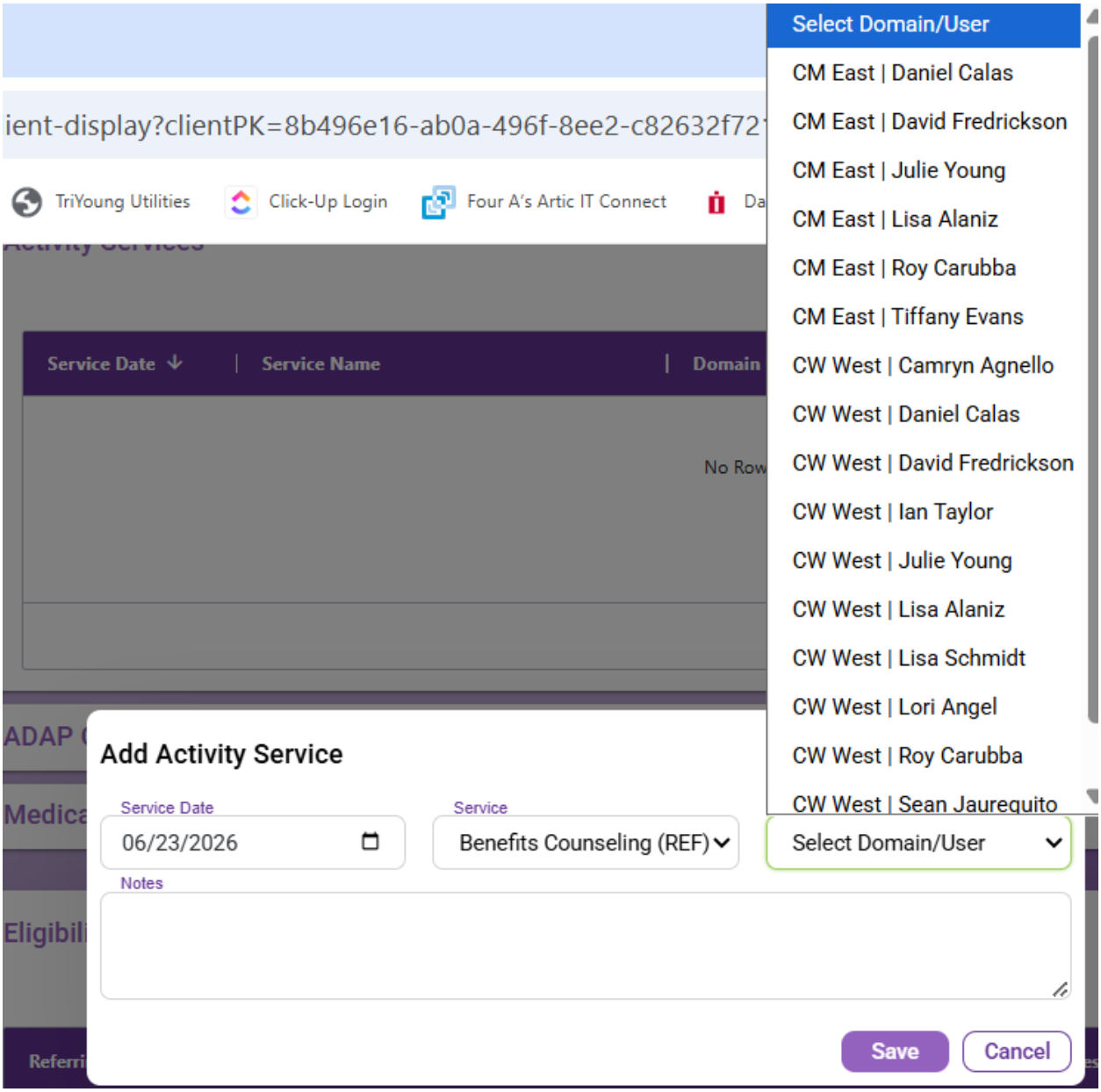
To add a new a new service entry, select the plus sign. The Add Activity Service window will open.



Select the service from the dropdown.



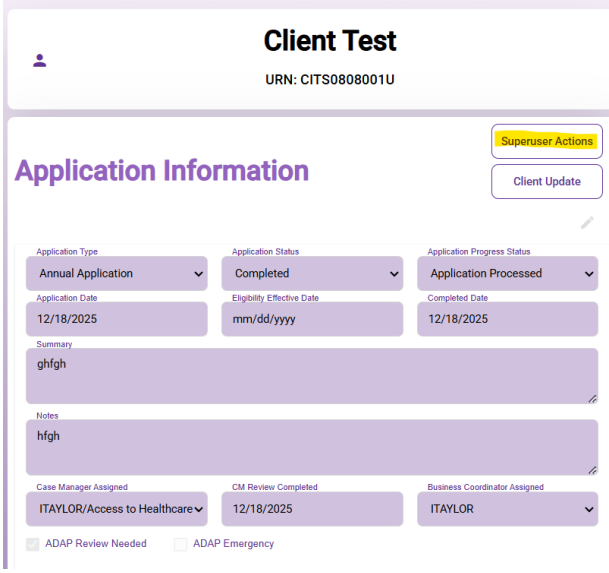
Next select the appropriate domain/user from the dropdown.



Adding a note is optional. When complete, select "Save".

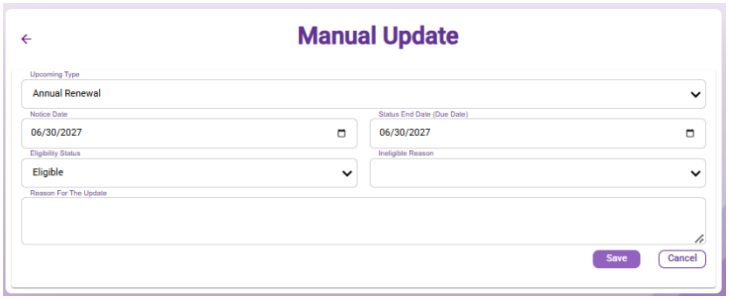
Manual Update

This function allows a **RWISE SuperUser** to fix data entry issues or manually update eligibility as needed. The **Manual Update** button in MN RWISE 2 is found on the Application Information page and will only be visible to a user with **RWISE Super User** permissions.

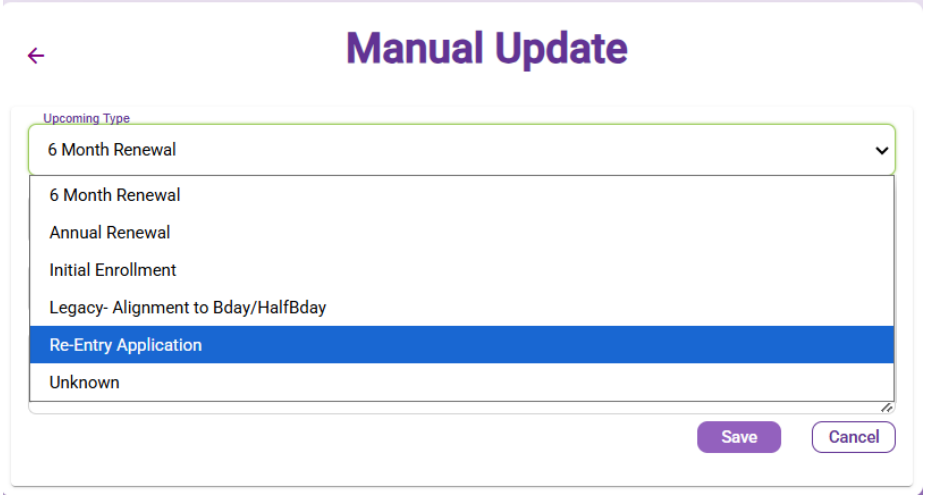


The **Manual Update** feature is used to update or edit a clients **Upcoming Type** of renewal, **Notice Date**, **Status End Date (Due Date)**, **Eligiblity Status, Ineligible Reason** if applicable and **Reason for the update**.

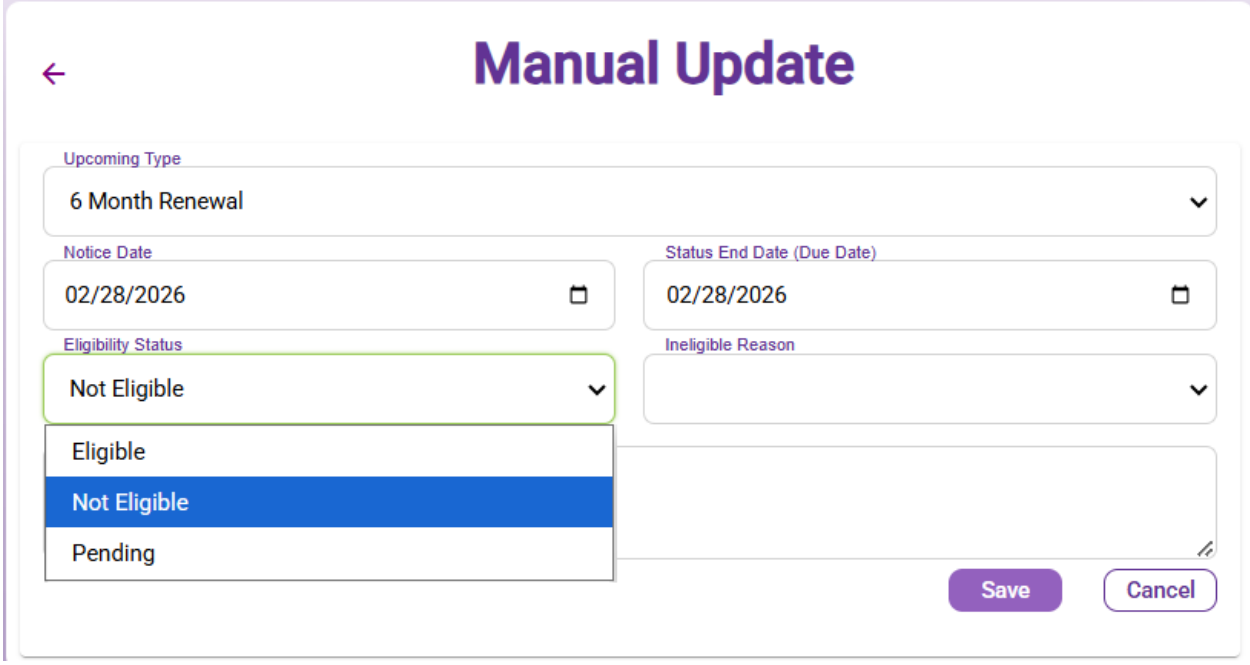
When the **Manual Update** button is selected, the **MN RWISE- Manual Update** screen will display.



Please see the **Upcoming Type** drop down options below:



Please see the **Eligibility Status** dropdown options below:



Once you have selected the **Upcoming Type**, **Status End Date**, **Eligibility Status**, add a note with the **Reason for the update** then select **Save Manual Update**.

Key Terms, Definitions and Acronyms

ADAP - AIDS Drug Assistance Program

ADR – ADAP Data Report

AKA – Also known as

Annual/Birthday Recertification: Annual renewal which occurs within the client's birthday month. This is also for clients who were eligible in the past, but at one point did not renew their eligibility. It requires a full application and all the required support documents.

Application Progress Status- Indicates the overall status of the referral (pending, completed, rejected, lost to follow-up)

Application Updates: used for initial applications and eligibility recertification. This function will update the client's upcoming renewal type and notice date.

CE – Centralized Eligibility – Users who process centralized eligibility for RWPA or RWPB.

Client Updates: used to view data and process applications.

DOB: Date of Birth

DOD: Date of Death

EURN: Encrypted Unique Record Number

Eligibility Applications- This is how all activities are managed. An application is created directly in RWISE.

Eligibility Type: the type of request that requires review and processing (annual recertification)

FPL- Federal Poverty Level

Initial/Full Application: Client new to Ryan White Services requires a full application and all the required supporting documents.

MSG OK– Message Okay

PBM – Pharmacy Benefits Manager

RWISE - Ryan White Integrated Statewide Eligibility

RWPA – Ryan White Part A

RWPB – Ryan White Part B

RSR - Ryan White Services Report

SSN – Social Security Number

URN: Unique Reference Number is a code that is assigned to the client.