

# **Oregon Public Health Division**

## **REALD Reporting**

### **CSV (Comma Separated Values)**

### **Implementation Guide**

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Version 1.9

# Oregon REALD Reporting for Public Health

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## What is REALD?

Race, Ethnicity, Language, and Disability (REALD) are types of demographic information, like age, marital status, or employment. The REALD data collection effort increases and standardizes race, ethnicity, language, and disability data collection across the Oregon Department of Human Services (ODHS) and the Oregon Health Authority (OHA). Collection and analysis of REALD data will help us better understand which communities in Oregon experience adverse health conditions, measure the magnitude of disproportionate health effects across different communities, identify populations at greatest risk of health inequities, and guide the development of culturally specific and accessible services.

REALD was advanced through the passage of House Bill 2134 in 2013. HB 2134 required ODHS and OHA to partner with community stakeholders to develop a standard for collection of REALD data. The statutory authority for these rules is codified in the Oregon Revised Statutes (ORS) 413.161. In 2014 data collection standards were completed (OARs 943-070-0000 thru 943-070-0070).

## REALD Reporting Requirements

In 2020, the COVID-19 public health emergency has re-affirmed that communities of color and people living with disabilities experience significant health disparities. To support Oregon's COVID-19 response and better identify health disparities due to differences in race, ethnicity, language, and disability, the Legislature passed House Bill 4212, requiring OHA to establish requirements for health care providers to collect and report REALD data for all COVID-19 patients encounters<sup>1</sup> and provide that information to the Oregon Public Health Division (OPHD).

By October 1, 2021, all health care providers will be required to collect and report REALD information. For more information about Oregon REALD laws and reporting requirements, including the phased implementation rollout, please visit:

<https://www.oregon.gov/oha/OEI/Pages/REALD-Providers.aspx>.

## Collecting REALD Information

OHA has developed a set of REALD collection [templates](#) in multiple languages for health care settings. These should be used to collect REALD from patients at the time of the patient encounter. Oregon law requires that all questions must be asked during the patient encounter, or as close to the encounter as possible, but patients may decline to answer any question or indicate if they do not know the answer to the question. REALD is intended to be self-reported by the individual, or if the individual is unable to respond, by their caregiver proxy. The information should not be inferred by the provider or from existing non-REALD information in the existent medical record.

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<sup>1</sup> COVID-19 encounters include any COVID-19 test result, hospitalizations or deaths due to COVID-19, or Multisystem Inflammatory Syndrome in Children (MIS-C).

Providers may choose to adapt their existing data collection processes to collect REALD data, but they may not modify wording in the questions or in the response choices for any question.

## Reporting REALD to OHA

Currently, the only electronic method for reporting REALD to OHA is to create a CSV using the specification in this Guide. Providers that are not prepared to implement this required format must use the online OHA COVID Reporting Portal (OCRCP) for reporting REALD for COVID-19 encounters (<http://healthoregon.org/howtoreport>). Low volume submitters are also encouraged to use OCRCP.

## Scope of This Document

This guide describes the file format and data content specifications for electronic submission of REALD data to OPHD. Currently, OPHD only accepts these files via secure file transfer protocol (SFTP).

REALD data is reported separately from point of care tests, laboratory testing data and expanded case reporting. These data must be reported using ELR or eCR format options and have a separate file review and approval process (<http://healthoregon.org/elr> or <http://healthoregon.org/ecr>).

## File Format – Comma Separated Values (CSV)

File names should include the following elements:

- Name or abbreviation of the sending organization
- “REALD”
- Date file sent (YYYYMMDD)

Example: generalhosp\_ REALD\_202010107

## Interpreting the specification table

The first column in the table (**Seq**) refers to the field order; the second (**Use**) describes whether the field is required (R), conditional (C), or optional (O); the third (**Name**) describes the name of the field; and the last column (**Guidance**) provides instructions for how to populate that field.

Please note: as this is a comma separated format, individual fields should not contain commas. Remove commas from any free text entry field before submission.

Some fields may include multiple responses, in that case, values should be separated with a tilde (~).

## How to report unanswered questions

Questions not answered by the respondent should be left blank. Throughout this specification, please use the following conventions:

- “U” (unknown) should be used when the respondent indicates the answer is unknown (i.e., “don’t know”)
- “D” (declined) should be used when the respondent refuses to answer the question (i.e., “don’t want to answer”)

## Specification Table

Seq	Use	Name	Guidance
1	R	MessageDate	Date of message creation Format: <b>YYYYMMDD</b>
2	R	FacilityName	Name of the facility where COVID encounter took place
3	R	FacilityID	Unique identifier for the facility (e.g., CLIA, NPI). If no unique identifier exists, one must be assigned by the eCR Coordinator prior to testing.
4	R	FacilityAddress	Include number, direction, and street name only
5	O	FacilityAddress2	May include PO Box, Suite, etc.
6	R	FacilityCity	Free text entry. Do not include commas.
7	R	FacilityState	Two characters (e.g., <b>OR</b> )
8	R	FacilityZip	Five digits required, additional four optional (separated by hyphen)
9	R	FacilityPhone	Formatted as <b>###-###-####</b> . Extension may be included in parentheses ().
10	R	ProviderID	National Provider Identifier (NPI) preferred
11	R	ProviderFirstName	Free text entry. Do not include commas.
12	R	ProviderLastName	Free text entry. Do not include commas.
13	R	ProviderPhone	Format: <b>###-###-####</b> . Extension may be included in parentheses ().
14	R	PatientID	Patient identifiers may include medical record number, account number, etc. <b>Do not use patient’s social security number.</b>
15	R	PatientFirstName	Free text entry. Do not include commas.
16	R	PatientLastName	Free text entry. Do not include commas.
17	R	PatientDOB	Patient date of birth. Format: <b>YYYYMMDD</b>
18	R	PatientSex	Female ( <b>F</b> ), Male ( <b>M</b> ), Non-Binary ( <b>X</b> ), Other ( <b>O</b> ), Refused ( <b>R</b> ), Unknown ( <b>U</b> )

Seq	Use	Name	Guidance
19	R	PatientAddress	Include house number, direction, and street name. Do not include commas.
20	O	PatientAddress2	May include PO Box, Suite, etc. Do not include commas.
21	R	PatientCity	Free text entry. Do not include commas.
22	R	PatientState	Oregon ( <b>OR</b> ) residents only. Out of state residents must be reported to the appropriate jurisdiction by the facility.
23	R	PatientZip	Five digits required. Format: #####
24	R	PatientCounty	Please spell out the entire county name.
25	R	PatientPhone	Format: ###-###-####
26	R	RaceEthnicityOpen	<ul style="list-style-type: none"> <li>Free text entry. Do not include commas.</li> <li>If this question is not answered and it was <b>not</b> actively declined by the respondent, please leave blank.</li> <li>If the question was actively declined by the respondent, add the code for declined, (<b>D</b>).</li> <li>If the respondent does not know how to answer, add the code for unknown (<b>U</b>).</li> </ul>
27	R	RaceEthnicityDiscrete	Value set: <a href="#">REALD_CDC RaceEthnicityCross_Walk_2020-5-5.xlsx</a> See <a href="#">Appendix A</a> if not implementing the full value set Separate multiple values with tilde (~)
28	R	RaceEthnicityPrimary	See <a href="#">Appendix D</a> for value options
29	C	LanguageSpeak	Applies if answer to LanguageHome (seq 52) includes a language <b>other than</b> English Value set: <a href="#">PHVS Language ISO 639-2 Alpha3</a> See <a href="#">Appendix B</a> if not implementing the full value set Separate multiple languages with tilde (~)
30	C	LanguageWrite	Applies if answer to LanguageHome (seq 52) includes a language <b>other than</b> English Value set: <a href="#">PHVS Language ISO 639-2 Alpha3</a> See <a href="#">Appendix B</a> if not implementing the full value set Separate multiple languages with tilde (~)
31	C	InterpreterNeeded	If answer to LanguageHome is <b>not</b> English Yes ( <b>Y</b> ), No ( <b>N</b> ), Declined( <b>D</b> ), Unknown ( <b>U</b> )
32	C	InterpreterType	Applies if answer to InterpreterNeeded is YSee <a href="#">Appendix C for value set</a> Separate multiple interpreter types with tilde (~)
33	C	EnglishProficiency	Applies if answer to LanguageHome (seq 52) does not include English, or ASL in combination with a language other than English Very Well ( <b>VW</b> ), Well ( <b>W</b> ), Not Well ( <b>NW</b> ), Not at all ( <b>NA</b> ), Unknown ( <b>U</b> ), Declined ( <b>D</b> )
34	R	Deaf	Yes ( <b>Y</b> ), No ( <b>N</b> ), Declined( <b>D</b> ), Unknown ( <b>U</b> )
35	C	DeafAge	If answer to Deaf is Y Age in years (if since infancy, enter 0) Enter 999 if unknown; enter 777 if declined
36	R	Blind	Yes ( <b>Y</b> ), No ( <b>N</b> ), Declined( <b>D</b> ), Unknown ( <b>U</b> )

Seq	Use	Name	Guidance
37	C	BlindAge	If answer to Blind is Y Age in years (if since infancy, enter 0) Enter 999 if unknown; enter 777 if declined
38	R/C	DifficultyStairs	Required for persons 5 years or older Yes (Y), No (N), Declined(D), Unknown (U)
39	C	DifficultyStairsAge	If answer to DifficultyStairs is Y Age in years (if since infancy, enter 0) Enter 999 if unknown; enter 777 if declined
40	R/C	DifficultyConcentrating	Required for persons 5 years or older Yes (Y), No (N), Declined(D), Unknown (U)
41	C	DifficultyConcentratingAge	If answer to DifficultyConcertrating is Y Age in years (if since infancy, enter 0) Enter 999 if unknown; enter 777 if declined
42	R/C	DifficultyDressing	Required for persons 5 years or older Yes (Y), No (N), Declined(D), Unknown (U)
43	C	DifficultyDressingAge	If answer to DifficultyDressing is Y Age in years (if since infancy, enter 0) Enter 999 if unknown; enter 777 if declined
44	R/C	DifficultyLearning	Required for persons 5 years or older Yes (Y), No (N), Declined(D), Unknown (U)
45	C	DifficultyLearningAge	If answer to DifficultyLearning is Y Age in years (if since infancy, enter 0) Enter 999 if unknown; enter 777 if declined
46	R/C	DifficultyCommunicating	Required for persons 5 years or older Yes (Y), No (N), Declined(D), Unknown (U), Do not understand (Q)
47	C	DifficultyCommunicatingAge	If answer to DifficultyCommunicating is Y Age in years (if since infancy, enter 0) Enter 999 if unknown; enter 777 if declined
48	R/C	DifficultyErrands	Required for persons 15 years or older Yes (Y), No (N), Declined(D), Unknown (U)
49	C	DifficultyErrandsAge	If answer to DifficultyErrands is Y Age in years (if since infancy, enter 0) Enter 999 if unknown; enter 777 if declined
50	R/C	DifficultyMoods	Required for persons 15 years or older Yes (Y), No (N), Declined(D), Unknown (U), Do not understand (Q)
51	C	DifficultyMoodsAge	If answer to DifficultyMoods is Y Age in years (if since infancy, enter 0) Enter 999 if unknown; enter 777 if declined
52	R	LanguageHome	Value set: <a href="#">PHVS Language ISO 639-2 Alpha3</a> See <a href="#">Appendix B</a> if not implementing the full value set Separate multiple languages with tilde (~)
53	R	REALDEncounter	Record why REALD data is being reported. Value set: MIS-C, Test, Death, Hosp.
54	C	ExemptReason	Patient incapacitated (INCAP)

## Concluding Remarks

This document was developed as an Oregon-specific CSV format Implementation Guide for REALD reporting. This guide represents the **minimum** expectation for message construction and submission. For more information about Oregon REALD statutes, collection of REALD within your organization, or provider specific reporting requirements, please visit:

<https://www.oregon.gov/oha/OEI/Pages/REALD-Providers.aspx>

General information about REALD can be found at:

<https://www.oregon.gov/oha/OEI/Pages/REALD.aspx>



## Version History

Revision History	Issue Date	Summary of Changes
V 1.0	October 7, 2020	Created as an option for providers to meet COVID-19 REALD reporting requirements that went into effect on October 1, 2020.
V 1.1	October 22, 2020	Modified description for PrimaryRaceEthnicity to clarify accepting only a single value. Modified Appendix A to add additional response options for PrimaryRaceEthnicity
V 1.2	October 29, 2020	Added column 52 to account for languages used at home.
V 1.3	November 3, 2020	Changed column 32 to conditional; only need to provide a value if answer to preceding question is yes.
V 1.4	November 6, 2020	Added coded values for column 33 - EnglishProficiency (VW, W, NW, NA, U, D). Added response option for Do not understand (Q) to column 44 – DifficultyCommunicating and column 50 – DifficultyMoods. Modified description of Appendix A value for RaceDecl to “Don’t want to answer”
V 1.5	November 12, 2020	Corrected coded value for Swahili in Appendix B. Removed DRAFT watermark.
V 1.6	November 13, 2020	Added options for entering unknown and declined age for all disability questions.
V 1.7	December 18, 2020	Updated Appendix A to include to include full value set for column 28. Updated columns 29-33 (language and interpreter questions) to be conditional instead of required if English is the language used at home. Added Appendix C for interpreter type code set. Added Appendix D to simplify expectations for column 28 (RaceEthnicityPrimary). Added column 53 “REALDEncounter” to record reason for sending REALD data. Added column 54 “ExemptReason” column to capture if data missing due to incapacitation. Deleted RaceOthS column and added nomenclature to capture free text in RaceOth column.
V 1.8	December 22, 2020	Updated 28 description and Appendices regarding reporting free text values. Updated columns where free text values are indicated to not include punctuation or special characters other than a tilde (~).
V 1.9	March 1, 2021, April 23, 2021	Omitted blank pages. Added guidance to leave fields blank when REALD data is not collected. Added additional languages to Appendix B. Added guidance to field # 26. Added file naming convention guidance. Made PatientCounty and PatientPhoneNumber required instead of optional. Updated narrative. Updated column guidance. Corrected table column numbering. Corrected version update date.

## Appendix A – Race and Ethnicity Values

We encourage use of national standards when possible. If your site is unable to implement the full code set ([REALD CDC RaceEthnicityCross Walk 2020-5-5.xlsx](#)), this subset is acceptable for REALD reporting in Oregon. Please use the values in this appendix for populating Seq #27 RaceEthnicityDiscrete.

Code	Description
Amlnd	American Indian
AlaskNat	Alaska Native
LatInd	Indigenous Mexican, Central American, or South American
CanInd	Canadian Inuit, Metis, or First Nation
AsianInd	Asian Indian
Cambodian	Cambodian
Chinese	Chinese
Myanmar	Communities of Myanmar
Filipino	Filipino
Hmong	Hmong
Japanese	Japanese
Korean	Korean
Laotian	Laotian
SoAsian	South Asian
Vietnamese	Vietnamese
AsianOth	Other Asian
AfrAm	African American
Caribbean	Afro-Caribbean
Ethiopian	Ethiopian
Somali	Somali

Code	Description
African	Other African
BlackOth	Other Black
HisMex	Latinx Mexican
HisCen	Latinx Central American
HisSou	Latinx South American
HisOth	Other Hispanic/Latinx
Chamoru	Chamoru
Guam	Guamanian
Marshallese	Marshallese
Micronesian	Communities Micronesia Region
NatHaw	Native Hawaiian
Samoan	Samoan
Tongan	Tongan
NHPIoth	Other Pacific Islander
NoAfr	North African
MidEast	Middle Eastern
Slavic	Slavic
EastEur	Eastern European
WestEur	Western European
Othwhite	Other White
(If race is "other" and is written in, no code is used. Please see description.)	Other race (specify) Provide other race text value Separate any additional value with a tilde (~) Please do not include punctuation or special characters other than a tilde (~)
RaceDecl	Don't want to answer

Code	Description
RaceUnkn	Don't know

## Appendix B – Language Values

We encourage use of national standards when possible. If your site is unable to implement the full code set ([PHVS Language ISO 639-2 Alpha3](#)) this subset is acceptable for REALD reporting in Oregon. Please use the values in this appendix for populating Seq #29, 30 and 52; LanguageSpeak, LanguageWrite and LanguageHome.

Code	Description
eng	English
spa	Spanish
rus	Russian
vie	Vietnamese
hmn	Hmong
som	Somali
chi	Chinese (Mandarin)
zho	Chinese (Cantonese)
tgl	Tagalog
kor	Korean
swa	Swahili
ara	Arabic
chk	Chuukese
mah	Marshallese
ase	American Sign Language
sgn	Other Sign Language (specify)
bur	Burmese
fas	Farsi

Code	Description
(If language is "other" and is written in, no code is used. Please see description.)	Other Language (specify) Provide other language type text value Separate any additional value with a tilde (~) Please do not include punctuation or special characters other than a tilde (~)
LangDecl	Don't want to answer
LangUnkn	Don't know

## Appendix C – Interpreter Values

Please use the values in this appendix for populating Seq #32 Interpreter Type.

Code	Description
SLI	Spoken Language Interpreter
ASLI	American Sign Language Interpreter
DBI	Deaf Interpreter for DeafBlind, additional barriers, or both
PSEI	Contact Sign Language (PSE) interpreter
(If interpreter type is "other" and is written in, no code is used. Please see description.)	Other Interpreter (Specify) Provide other interpreter type text value Separate any additional value with a tilde (~) Please do not include punctuation or special characters other than a tilde (~).

## Appendix D – Primary Race and Ethnicity Values

Please use the values in this appendix for populating Seq #28 RaceEthnicityPrimary.

If more than one value is selected in seq #27 RaceEthnicityDiscreet, appropriate values for Seq #28 include any single value from the values previously selected in Seq #27 or one of the values below. If only one race/ethnicity value is provided in seq #27, "NA" should be used to populate seq #28.

Code	Description
PriNo	Don't have just one primary racial or ethnic identity
Multi	Identifies as Biracial or Multiracial

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<b>Code</b>	<b>Description</b>
NA	Only one race category selected
D	Don't want to answer
U	Unknown