# How to Use the ADR Upload Completeness Report (UCR)

What is the Upload Completeness Report (UCR)?

The UCR is a report available in the AIDS Drug Assistance Program (ADAP) Data Report (ADR) Web System after you upload a client-level data (CLD) file. The UCR displays the uploaded data by data element so you can review your data quality. It also allows you to identify both missing data and data that may be incorrect.

> The UCR helps you review your uploaded data to make sure your data accurately reflect your program.

Where can I find my UCR?
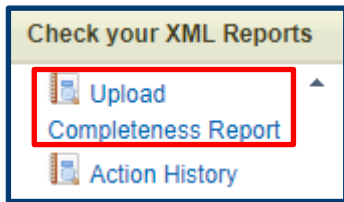
ADAPs can access the UCR through the Electronic Handbooks (EHBs). If you are checking data prior to the reporting period, you can access the UCR through the Check Your XML Feature (as shown to the left).

Once the reporting period opens, you can access the UCR by clicking "Upload Completeness Report" in the navigation menu on the left side of the screen (as shown to the right). Using this UCR, you will be able to compare this year's data with the submission from the previous year.
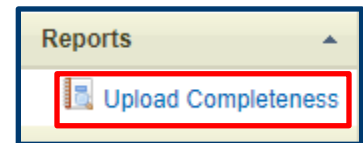
What should I look for?

The UCR presents aggregated responses for each ADR data element. For each element, the response options are listed along with the aggregate values uploaded and missing/out of range data. Each table header also includes the number of clients for whom each data element is required. The ADR UCR has six sections. For each section, we present sample tables below along with questions to help guide your data review.

Section 1. Summary Data: This table includes the total number of clients uploaded in your CLD file and the number and percent of clients with or without services. Percentages may not equal 100% because clients can receive both insurance and medication services.

	2023		2022	
Population	N	%	N	%
Total clients submitted	125	100.00%	100	80.00%
Clients who received insurance services	87	69.60%	85	68.00%
Clients who received ADAP-funded medications	52	41.60%	50	40.00%
Clients with no services reported	6	4.80%	5	4.00%

Things to Consider:

A project of **CAI** in partnership with **Abt** and **MISSION ANALYTICS GROUP**

- Do the total client numbers look correct?
- Do the numbers and percentages reflect the services your ADAP provides?
- Does the number of clients with no services look correct?
- How do the numbers compare to last year?

Section 2. Demographic Data: The demographic data section has eleven tables, with one for each demographic data element. Except for racial and ethnic subgroups, data in this section is required for all clients.

Sex at Birth (Item #71)

Current year Denominator: Number of unique clients reported (N = 125)
Prior year Denominator: Number of unique clients reported (N = 100)

	2023		2022	
Population	N	%	N	%
Male	87	69.60%	76	60.80%
Female	38	30.40%	20	16.00%
Incongruent	0	0.00%	0	0.00%
Missing/Out of range	0	0.00%	4	3.20%

Things to Consider:
- Do the numbers and percentages look correct?
- Are there any incongruent values?
- Do you have any missing data?
- How do the numbers compare to last year?

Section 3. Enrollment and Certification: This section includes six tables summarizing client enrollment patterns and certification processes during the reporting period. The denominator for these data elements varies, with some tables including all clients, some including newly-enrolled clients only, and some including only disenrolled clients.

Note: In 2023, the "Prior to Current Reporting Period" row was added. Now, "Missing/Out of range" only includes missing data and dates in the future for Last Eligibility Confirmation Date (Item #17)

Last Eligibility Confirmation Date (Item #17)

Current year Denominator: Number of unique clients reported who are not (1) disenrolled or (2) newly enrolled (N = 115)
Prior year Denominator: Number of unique clients reported who are not (1) disenrolled or (2) newly enrolled (N = 90)
Note: Count reflects the date the client was last determined to be eligible to receive ADAP services.

	2023		2022	
Population	N	%	N	%
Prior to Current Reporting Date	1	0.80%	2	1.60%
January - March	28	22.40%	25	20.00%

A project of CAI in partnership with Abt ASSOCIATES and MISSION ANALYTICS GROUP

April - June	30	24.00%	26	20.80%
July - September	29	31.20%	17	21.60%
October - December	26	20.80%	18	14.40%
Missing/Out of range	1	0.80%	2	1.60%

Things to Consider:
- Do the numbers and percentages look correct?
- Do you have any missing or out of range data?
- How do the numbers compare to last year?

Enrollment Status at the End of the Calendar Year (Item #18)

Current year Denominator: Number of unique clients reported (N = 125)
Prior year Denominator: Number of unique clients reported (N = 100)

	2023		2022	
Population	N	%	N	%
Enrolled, receiving services	107	85.60%	81	64.80%
Enrolled, on waiting list	2	1.60%	0	0.00%
Enrolled, services not requested	6	4.80%	4	3.20%
Disenrolled	10	8.00%	10	8.00%
Missing/Out of range	0	0.00%	5	4.00%

Things to Consider:
- Do the numbers and percentages look correct?
- Is the client count for "enrolled, services not requested" similar to "no services reported" in the Summary Table?
- Do you have any missing or out of range data?
- How do the numbers compare to last year?

Section 4. ADAP Insurance Services Received: This section includes five tables that summarize ADAP-funded health insurance assistance services and expenditures.

Note: As of 2023, the total N represents unduplicated clients. N will match for Items #21 and #22. For Items #21, #23 and #29, Missing/Out of Range will be above the table, rather than as the final row of the table.

Insurance Premium (Item #21)

Current year Count: Number of unique clients reported with full or partial premium payment insurance assistance received (N = 87)
Prior year Count: Number of unique clients reported with full or partial premium payment insurance assistance received (N = 85)
Missing/Out of Range Count of Clients Current Year: 1
Missing/Out of Range Count of Clients Prior Year: 0

	2023	2022
Insurance Premium	Amount	Amount
Minimum amount paid on behalf of clients	$100	$50
Maximum amount paid on behalf of clients	$19,000	$40000
Medium amount paid on behalf of clients	$6000	$3000

Things to Consider:
- Do the min, max, and median amounts look correct based on the types of premiums you pay?
- Are there data missing?
- How do they compare to last year?

Section 5. Clinical Information: This section includes four tables that summarize the clinical characteristics of ADAP clients who received services during the reporting period. In these tables, missing and out of range values are separated into two categories.

Note: As of 2023, the first row was added for undetectable (<= 20 copies).

Viral Load Values Reported (Item #35)
Current year Denominator: Number of unique clients reported (N = 125)
Prior year Denominator: Number of unique clients reported (N = 100)

	2023		2022	
Population	N	%	N	%
<=20 copies	80	64.00%	53	42.40%
21 to 200 copies	37	29.60%	23	18.40%
>200 copies	2	1.60%	5	4.00%
Missing	5	4.00%	18	14.40%
Out of range	1	0.80%	1	0.80%

Things to Consider:
- Do the total client numbers look correct?
- Does the viral suppression rate look accurate?
- Are there data missing?
- How do they compare to last year?

Section 6. Drug and Drug Expenditures: This section includes six tables that summarize the medications paid for and dispensed to clients during the reporting period, including related expenditures. The final three tables in the UCR list the generic names and brand names of ARV, Hepatitis B and C, and A1-OI medications reported in the ADR.

Note: As of 2023, for Items #21, #23 and #29, Missing/Out of Range will be above the table, rather than as the final row of the table.

A project of **CAI** in partnership with **Abt** and **Mission Analytics Group**

Total Cost of Dispensed ADAP Funded Medication (Item #29)
Current year Denominator: Number of unique clients reported (N = 52)
Prior year Denominator: Number of unique clients reported (N = 20)
Missing/Out of Range Count of Clients Current Year: 1
Missing/Out of Range Count of Clients Prior Year: 0

	2023	2022
Total Cost of Dispensed Medications	Amount	Amount
Minimum amount paid on behalf of clients	$1	$30
Maximum amount paid on behalf of clients	$6000	$3000
Medium amount paid on behalf of clients	$2000	$150

ADAP-Funded Medications Listed: ARVs (Item #26)
Current Denominator: Number of unique clients who received ADAP-funded medications (n = 52)
Prior Denominator: Number of unique clients who received ADAP-funded medications (n = 50)

		2023		2022	
Generic Name	Brand Name	N	%	N	%
ABACAVIR SULFATE, DOLUTEGRAVIR SODIUM, LAMIVUDINE	TRIUMEQ	14	23.33%	14	28.00%
DOLUTEGRAVIR SODIUM	TIVICAY	20	33.33%	9	18.00%
EMTRICITABINE AND TENOFOVIR DISOPROXIL FUMARATE	TRUVADA	11	18.33%	12	24.00%
BICTEGRAVIR SODIUM, EMTRICITABINE, AND TENOFOVIR ALAFENAMIDE FUMARATE	BIKTARVY	24	40.00%	19	38.00%

Things to Consider:
- Does the list include all ARV medications that were dispensed?
- Does the distribution of medications look correct?

What if my data doesn't look quite right?

There are many reasons why your ADR data may not reflect your program activities. You might not collect some data elements as part of enrollment. Alternatively, you might collect the data, but not have the capacity to enter them into the data management system from which you create the ADR. Many ADAPs struggle to import and merge multiple data files

A project of CAI in partnership with Abt and Mission Analytics Group

for enrollment, insurance and medication services for your ADR. To learn more about potential reasons for data quality issues and solutions, check out the [“Reviewing Your Data at Upload: Tools in the ADR Web System and the Check Your XML Feature” webinar](#) on TargetHIV.

Why is data quality important?

You want your ADR data to reflect the good work you do. Your project officer and HAB leadership will review ADR data to learn more about your program. ADR data are also used to present the Ryan White HIV/AIDS Program to Congress, the HIV community, and the public at large. Lastly, high-quality can help you understand program performance and improve quality of care, but poor-quality data cannot.

> ### Need help with your ADR data?
>
> Contact the DISQ Team at data.ta@caiglobal.org for individualized technical assistance to help you address your data quality needs!