

## ADR Data Quality - Written Q & A Summary

April 24, 2024

#	Questions	Answers
1.	For "Other" for disenrollment reason, if we have sub-categories that can be collected under "Other," will those help at all?	Collecting additional information for when "Other" is used in your local data can make it easier to recode the data for the purposes of the ADR. It will also enable you to provide feedback to staff reported "Other" so they can use the correct category moving forward. If you need any assistance with recoding the data, please reach out to the the <a href="#">DISQ Team</a> .
2.	Every year we get warnings for missing CD4 and viral load tests, but the ADR Instruction Manual requires that the only tests we can report are "tests administered to the client DURING the reporting period." When will the requirements be updated so we can submit the latest tests for our clients, even if they were in prior years? Or when will this warning be removed because it's impossible to resolve?	The current reporting requirement for the ADR is all CD4 and viral load counts for all clients for tests that were administered in the reporting period; this means that the date that the lab was drawn was in the reporting period. Validation comments should be added in the ADR for clients for whom these data were not reported. ADAPs are encouraged to establish data sharing with the HIV surveillance program whenever possible to assist in meeting this reporting requirement. If you need any assistance in establishing data sharing with your HIV surveillance program, please reach out to the the <a href="#">DISQ Team</a> .
3.	Can you clarify, for Enrollment Status the "Enrolled, services not requested" identifies clients who have not had paid pharmacy claims or insurance premiums, but they have received services, such as assistance in obtaining insurance, navigating Medicare, etc.	For the ADR, enrollment status as of the end of the reporting period should be reported. The response option 'enrolled, receiving services' should be used for clients who received a medication or insurance service during the reporting period. Any other ADAP activities are not considered services for the purposes of the ADR.
4.	We have issues knowing sufficient details about some of our client's insurance in order to correctly categorize it.	The <a href="#">DISQ Team is available to meet with ADAPs to discuss any reporting challenges and share possible approaches to be able to gather the needed data.</a>
5.	If we updated the TRAX application for the 2023 RSR, will we also have the updated version for the ADR?	The TRAX version for the ADR is 5.8 which is the same version that was used for the ADR. You can check to see if your TRAX is up-to-date by opening the application and looking under File>Application Setup. On the dropdown list, there should be an option to choose ADR (1/1/2023-12/31/2023). If that option is not their, you will need to re-install <a href="#">TRAX</a> to get the current version. While the csv files that you need to use TRAX are unchanged, both CHEX and the TRAX manual have been updated.

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		Download <a href="#">TRAX for the ADR: Application and Manual</a> to get the newest version of these resources.