ADR

AIDS Drug Assistance Program (ADAP) Data Report (ADR) Data Quality: Lessons from Outreach

Ryan White HIV/AIDS Program ADR

HIV/AIDS Bureau

April 24, 2024

RWHAP DATA SUPPORT

DISQ Data Integration, Systems & Quality TECHNICAL ASSISTANCE

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The DISQ Team is comprised of CAI, Abt Associates, and Mission Analytics and is supported by HRSA of HHS as part of a cooperative agreement totaling over $4 Million.

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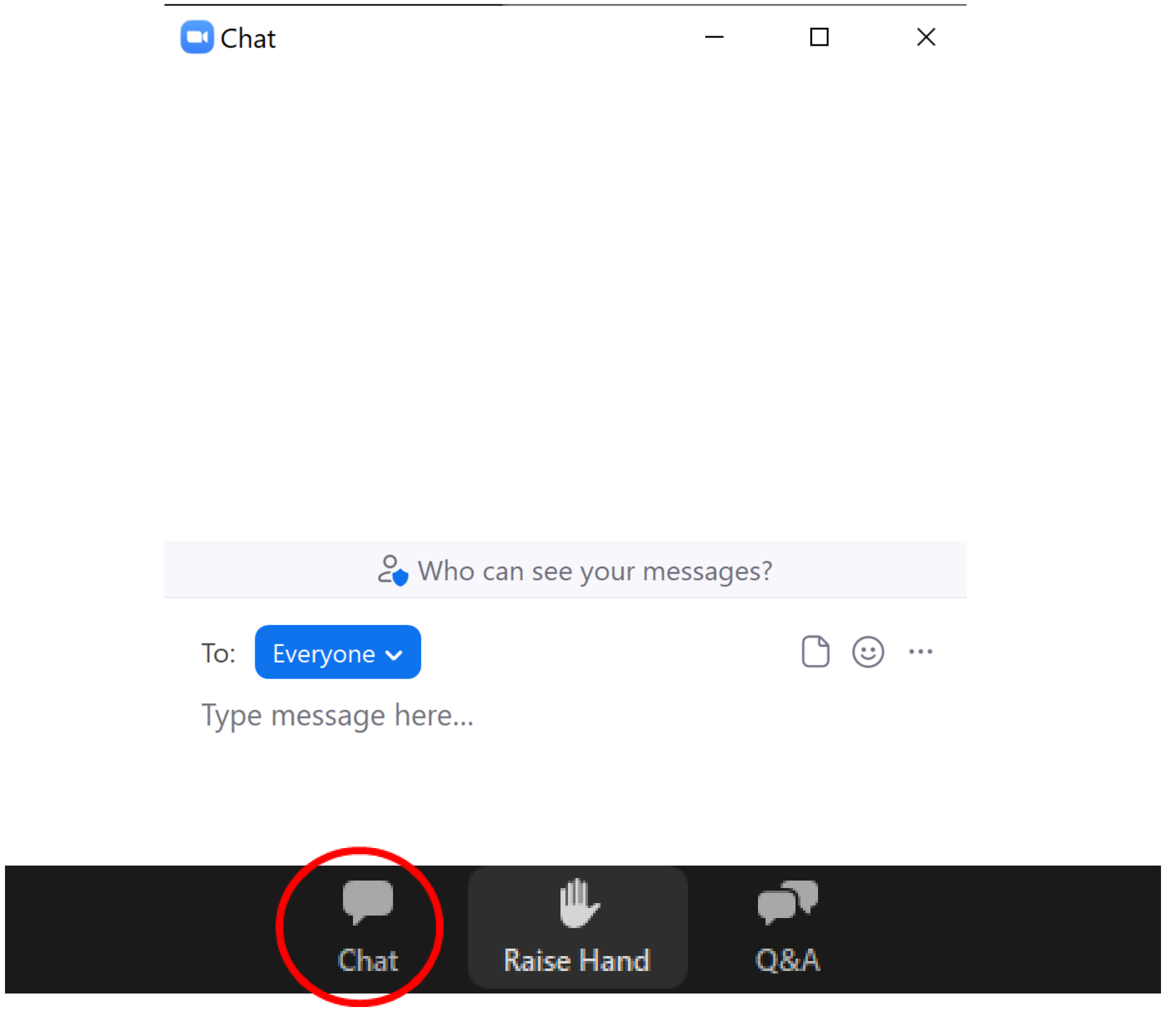
Let's 'Chat' Today!

- The "chat" function is enabled today
  - Share feedback and tips

- Submit questions by using the 'Q & A' feature



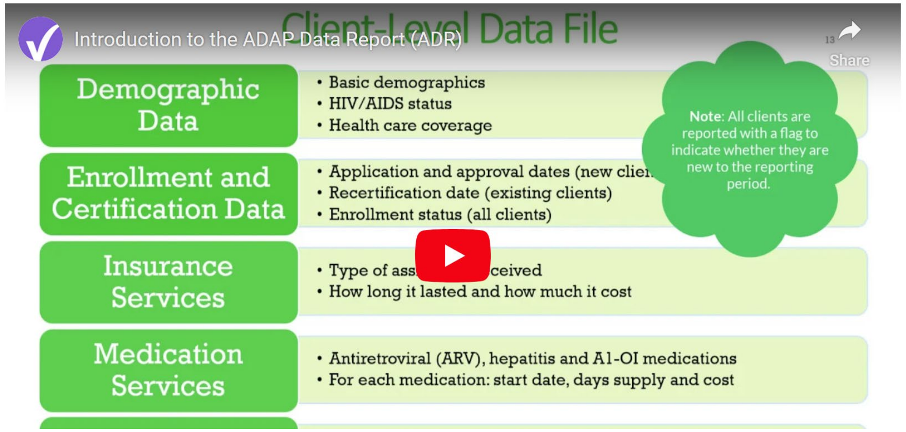
Outline

- Data Management Practices
- Data Quality Issues Identified During Outreach
- TA Resources and Next Steps
- Questions

Poll #1

What is the ADR?

- Annual Report Requirement for AIDS Drug Assistance Programs
  - Due on the first Monday of June
- Comprised of two components
  - Recipient Report
  - Client Report



[ADR Training Video Series]

What To Do If You're New

- Download the ADR Roles and Responsibilities document
  - Clarify your role
  - Get EHBs access
  - Download the ADR from the prior year
  - Review the ADR Training Video Series
  - Sign up for the ADR listserv
  - Contact the DISQ Team and Ryan White Data Support

AIDS DRUG ASSISTANCE PROGRAM REPORT (ADR)
ADAP ROLES AND RESPONSIBILITIES

Activity	Key Steps	Resources
New Staff Orientation	• Clarify your role and ensure you have the correct permissions in the EHBs • Download the ADR from the prior year so you can see how it was historically reported • Review the introductory videos in the ADR Training Video Series • Contact the DISQ Team and Ryan White Data Support to get you started • Sign up for the ADR listserv to receive key updates	• ADR Training Video Series • ADR Technical Assistance Brochure • ADR Listserv
General ADR Preparation Steps	• Make sure that everyone who has a role is registered in the EHBs with correct permissions • Establish an internal timeline to meet the ADR deadline • Notify your finance team that information will be needed for the report and provide timeline • Download ADR materials and register for upcoming ADR webinars • Review the ADR In Focus Series for reporting changes, common challenges and best practices in submitting the report • Determine what system you will use to create the client-level data file (e.g. ADR-ready system, TRAX) • Review client-level data throughout the year	• ADR Submission Timeline • Data Webinar Calendar • TargetHIV ADR Resources • ADR In Focus Series
Recipient Report	• Compile financial information for the grant year including funding sources and expenditures • Compile changes to your formulary (if any) for the grant year • Enter required information on your program, funding, expenditures and formulary • Review the "Completing the ADR webinar" for a walk through of the report • Submit by the deadline	• ADR Instruction Manual • "Completing the ADR" webinar
Client-Level Data File	• Download the ADR Download Package for documentation on any client-level data changes • Upload your file in Check Your XML to review your data before the ADR opens • Upload Data in the Recipient Report once the system opens • Review the Reviewing Your Data at Upload webinar to learn about the different ways to review your data in the EHBs • Review validation messages and the Upload Completeness Report (UCR) • Review lessons learned about ADR data quality to review common issues • Review your medication data using the Medication Dashboard Tool	• ADR Download Package • ADR Instruction Manual • 2019 ADR Data Quality: Lessons Learned from Outreach • Reviewing Your Data at Upload: Tools within the ADR Web System and Check Your XML • ADR Medication Dashboard Tool • Completing the ADR webinar

Download TA Materials and Resources → Start the Recipient Report on the first Monday in April → Upload a client-level data file by the last Monday in April → Check your data quality in the UCR, validations, and medication dashboard → Submit your ADR by the first Monday in June at 6:00pm ET

DISQ

ADR Outreach

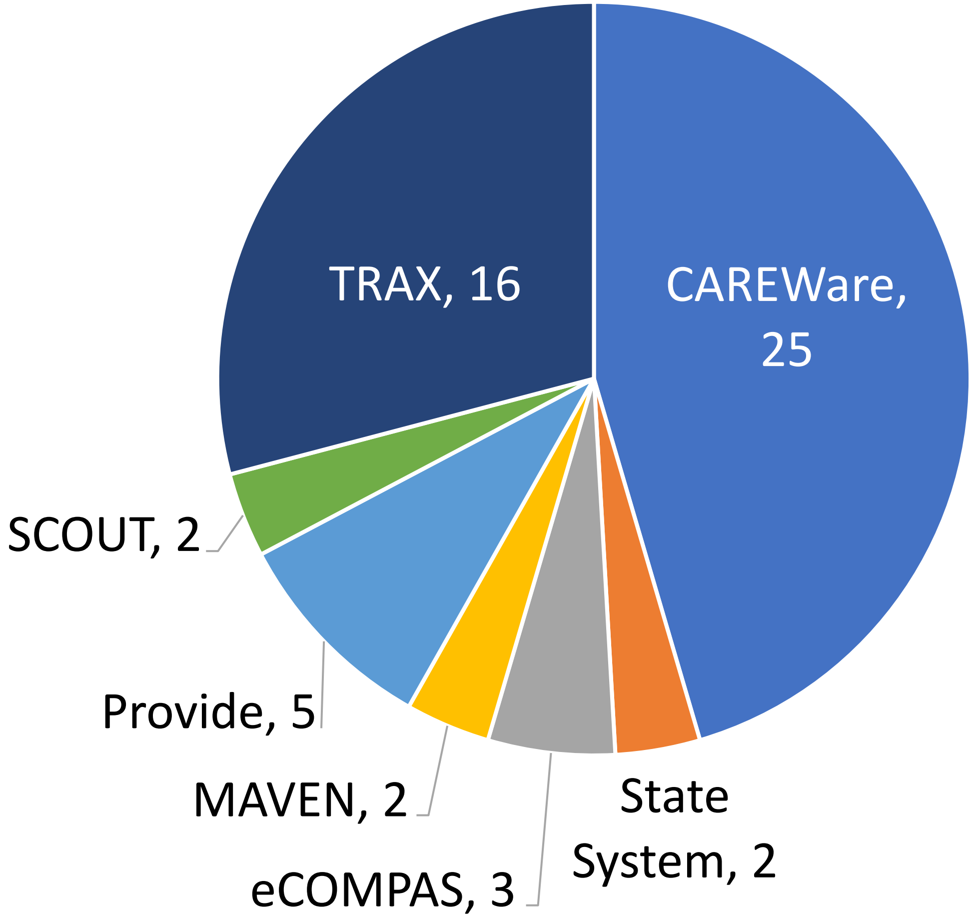
- Conducted two stages of outreach
  - Stage 1 - possible data quality issues that may take longer to resolve or require a change in processes
  - Stage 2 – more comprehensive review

ADR Outreach

- Reviewed your data
- Created and distributed ADR Data Quality Summary Reports to all ADAPs
- Cumulatively we met with 39 ADAPs

Strategies for Creating the ADR

Several of you changed data systems last year or are planning new approaches this year



*One ADAP used two different strategies

Data Management Strategies

- Making changes to your processes or new to doing the ADR?
  - Give yourself plenty of time for submission to identify and address issues
- Make sure you have the latest versions/builds
  - CAREWare 6 Build 230
  - TRAX 5.8

Data Management Strategies

- Importing/merging data from multiple sources?
  - Check data throughout the year, not just before the deadline
- Use your data for program purposes!

You Continue To Make Great Progress!

- Multiple ADAPs had or were in the process of implementing changes to improve data quality
- Data reported continues to be ‘translated’ better

Data Quality Issues

- Demographic data
- Enrollment and certification data
- Insurance services data
- Medication services data
- Clinical data

Demographic and Enrollment Data

Known Rates for Demographic Data

Ethnicity	Gender	Birth Year
Race	Sex at Birth	Poverty Level
Hispanic SG	Asian SG	NHPI SG
HIV/AIDS Status	Health Coverage	

Demographics > Enrollment > Insurance > Medication > Clinical

Health Coverage

- “Other Plan” response option being reported incorrectly

Challenges	Strategies
Confusion about how to report marketplace plans	Marketplace plans are reported as private-individual
CAREWare users check off to enter text field	Create a custom field if you need to gather more information

Demographics → Enrollment → Insurance → Medication → Clinical

Health Coverage

- "Medicare Part C" response option not being reported

Challenges	Strategies
• Legacy systems that don't have this response option	• Update system as feasible to incorporate option
• Applications don't capture information	• Update applications as feasible to incorporate option

Demographics Enrollment Insurance Medication Clinical

Last Eligibility Confirmation Date

12 ADAPs reported 10% or more of required data as missing/out of range

Challenges	Strategies
• Data systems not updated	• Review data early to ensure that data are being updated
• Clients were disenrolled but status not updated (so date was required)	• Review data early to ensure that eligibility status is correct
• Enrollment extensions during COVID	• Should be addressed once enrollment extensions end

Demographics → **Enrollment** → Insurance → Medication → Clinical

Disenrollment Reason

- Disenrollment reasons of other and unknown used instead of specific categories

- Program eligibility criteria changed, client no longer eligible
- Client's eligibility changed, client no longer meets eligibility criteria
- Did not recertify
- Did not fill prescription as required by program
- Deceased
- Dropped out, no reason given

Demographics > **Enrollment** > Insurance > Medication > Clinical

Chat About It

Insurance Services

- Insurance Assistance Flag
- Insurance Assistance Type
- Insurance Premium Amount
- Insurance Premium Month Count
- Medication Copay and Deductible Amount

Known Rates for Insurance Services Data

- Issues were more specific to accuracy of the reported data, not completeness
- Over the last three several years, DISQ has focused a lot more on the accuracy of insurance services
- ADAPS have been able to implement changes once they knew they were reporting incorrectly

Demographics → Enrollment → Insurance → Medication → Clinical

Reporting Flags and Associated Data Elements

New Enrollment

Insurance Assistance Received Flag

Medications Dispensed Flag

Demographics | Enrollment | **Insurance** | Medication | Clinical

Reporting Flags and Associated Data Elements

Yes =1

No=0

InsuranceAssistance ReceivedFlag

Report associated data elements

No other insurance services data reported

Demographics | Enrollment | Insurance | Medication | Clinical

Reporting Flags and Associated Data Elements

Full premium payment=1

Partial premium payment=2

Medication co-payment, co-insurance and/or deductible=3

- Insurance Premium Amount
- Insurance Premium Month Count

Medication Copay or Deductible Amount

Demographics | Enrollment | Insurance | Medication | Clinical

Insurance Assistance Type

Challenges	Strategies
• Confusion about definitions (but getting better!)	• Review ADR instruction manual • ADR In Focus: Partial Premiums
• Can't differentiate insurance type in claims/premium data	• Review claims data with PBM/IBM • Use internal program names • Enter premium type when requesting payment
• Data entered/imported in wrong place in data system	• Talk to system vendor about where to enter/import data

Demographics > Enrollment > Insurance > Medication > Clinical

Full and Partial Premiums Amounts

A total premium cost is $100…		The premium type is…
ADAP pays $100		Full
Employer pays $80	ADAP $20 Client's portion	Partial
ACA Marketplace subsidy pays $90	ADAP $10 Client's portion	Partial

Demographics > Enrollment > Insurance > Medication > Clinical

Full and Partial Premiums Amounts

Medicare Part D Premium
$50

Enrolled in 'Extra Help'(LIS)

Maximum for the state is paid

Extra Help pays $34

ADAP pays remainder

$16

Partial

Not Enrolled in 'Extra Help'

ADAP pays entire bill

$50

Full

Demographics | Enrollment | Insurance | Medication | Clinical

Using the UCR To Identify Inaccurate Data

Insurance Assistance Type* (Item #67)
Denominator: Number of unique clients reported who received insurance services (N=500)

Insurance Assistance Type Received	**N**	**Percentage**
Full Premium payment	250	50.0%
Partial Premium payment	0	0.0%
Medication co-pay/deductible including Medicare Part D co-Insurance, co-payment, or donut hole coverage	400	80.0%
Missing/Out of range	0	0.0%

Do these numbers make sense?

Poll #2

Premium Months Count

Challenges	Strategies
• Upload Completeness Report includes both accurate and inaccurate data in missing/out of range	• Review data before upload

EXAMPLE

- Accurate data - Client has 13 or 14 months of coverage due to timing of premium payments, additional payments for clients receiving APTC or multiple Medicare premiums that were paid
- Inaccurate data – Premiums paid outside of the reporting period are included

Demographics > Enrollment > Insurance > Medication > Clinical

Premium Months Count

Insurance Premium Number of Months of Coverage (Item #22)

Denominator: Number of unique clients reported with full or partial premium payment insurance assistance received (N = 400)

Insurance Premium Number of Months of Coverage	**N**	**Percentage**
0 month	0	0.0%
1 - 3 months	20	5.0%
4 - 6 months	100	25.0%
7 - 9 months	60	15.0%
10 - 12 months	200	50.0%
13 -15 months	10	2.5%
Missing/Out of range	10	2.5%

Premium Months Count

108	InsurancePremiumMonthCount, InsurancePremiumAmount	XX clients with insurance premium assistance months outside of 1-18.

▸	8	108	4 client(s) with insurance premium assistance months outside of 1-18.

Click on the 'caret' to get the list of eUCIs

Click on the excel logo to the right of the validation message to download the eUCIs

Demographics | Enrollment | Insurance | Medication | Clinical

Medication Services

- Medication Dispensed Flag
- Medication ID (NDC)
- Medication Start Date
- Medication Days
- Medication Cost

Medication Services

Challenges	Strategies
• Medication co-payments, co-insurance and/or deductibles reported as full pays	• Request distinct data files • Use program name/other structured fields
• Data not mapped correctly	• Review mapping/develop documentation
• Costs of less than .50 reported as $0	• Round up to $1 before data are imported into ADR-ready system/TRAX

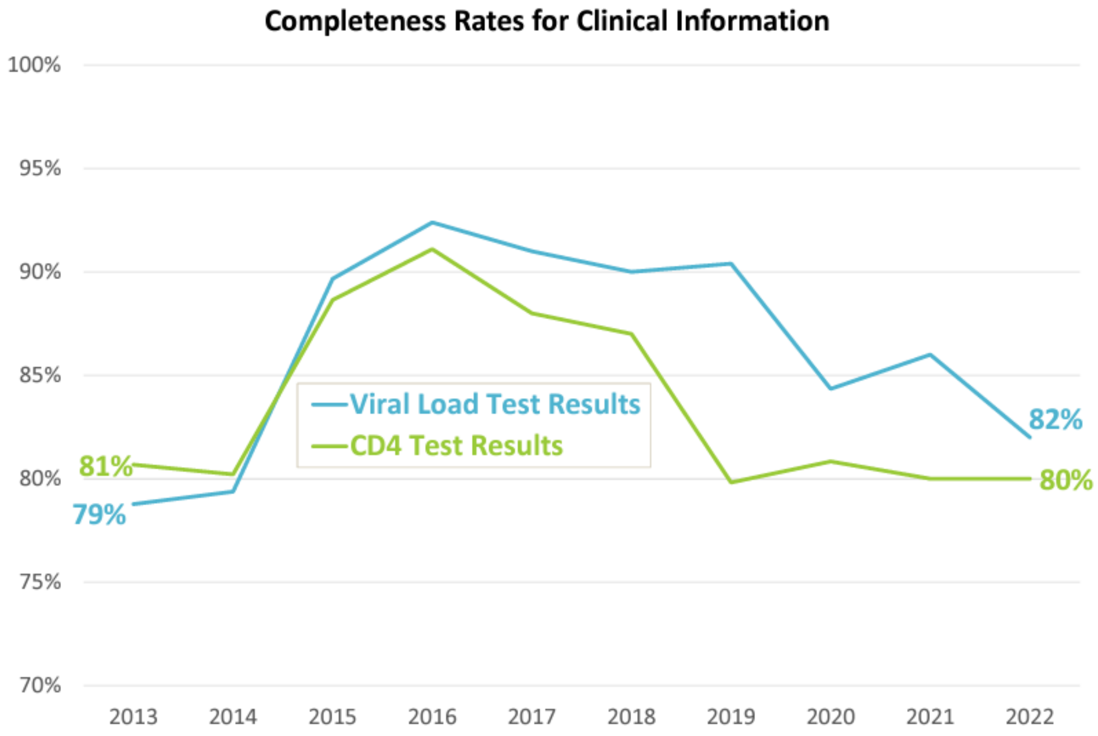
Demographics > Enrollment > Insurance > **Medication** > Clinical

Chat About It

Clinical Data

- CD4 Test Dates
- CD4 Test Counts
- Viral Load Test Dates
- Viral Load Test Counts

Clinical Data



Demographics | Enrollment | Insurance | Medication | Clinical

Clinical Data

Challenges	Strategies
• Rely on application/recertification or clinical providers for data	• Implement routine matching with HIV surveillance program
• Only exact matches are reported	• Revise HIV surveillance approach to include fuzzy matches
• Manually matching surveillance data but no routine match	• Implement routine matching with HIV surveillance program
• Import/matching issues	• Write validation comment
• CD4s not ordered as much/required to be reported	• Write validation comment

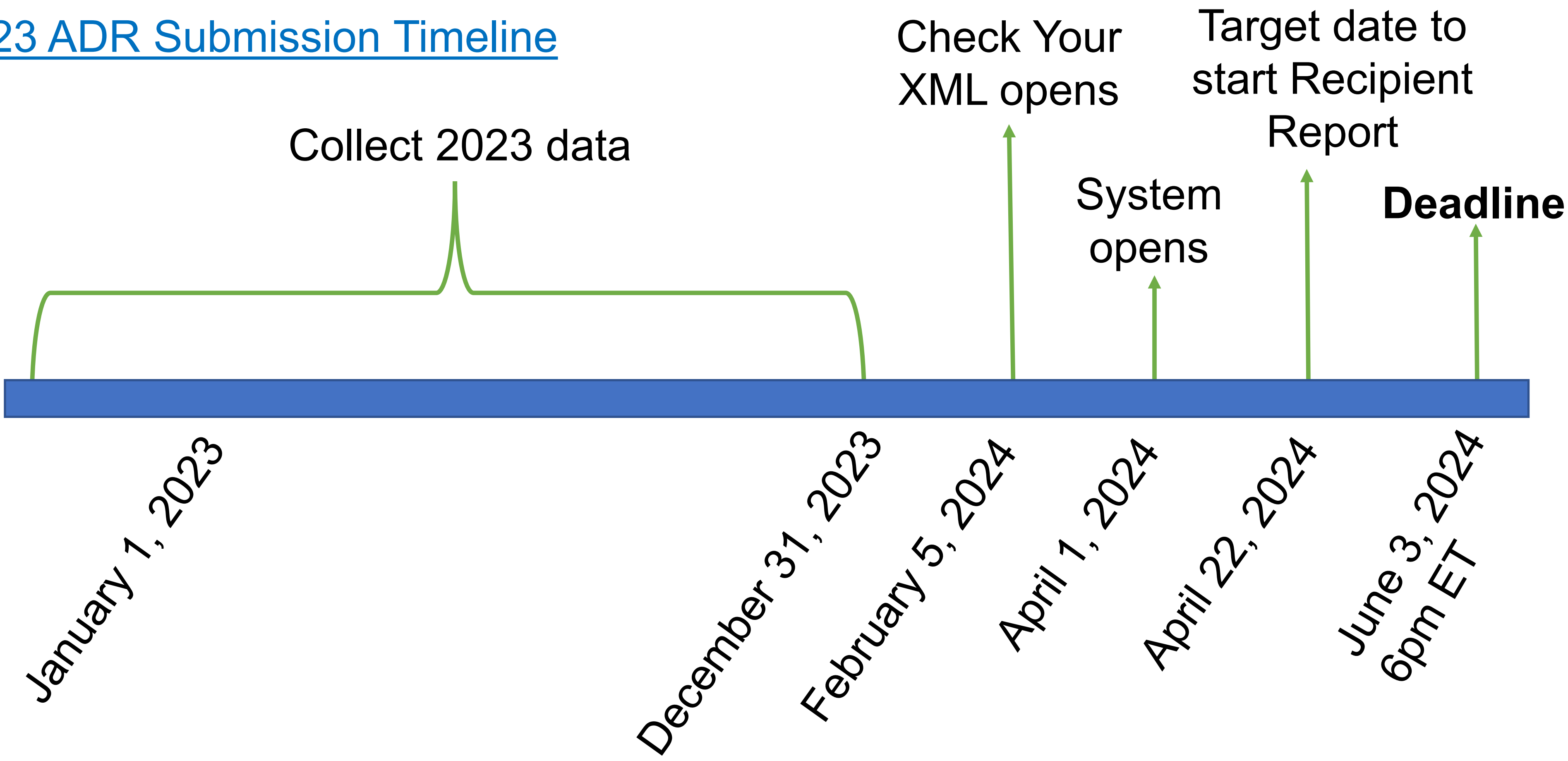
40 ADAPs were missing 10% or more for CD4 count; 30 for VLs

Demographics > Enrollment > Insurance > Medication > Clinical

Poll #3

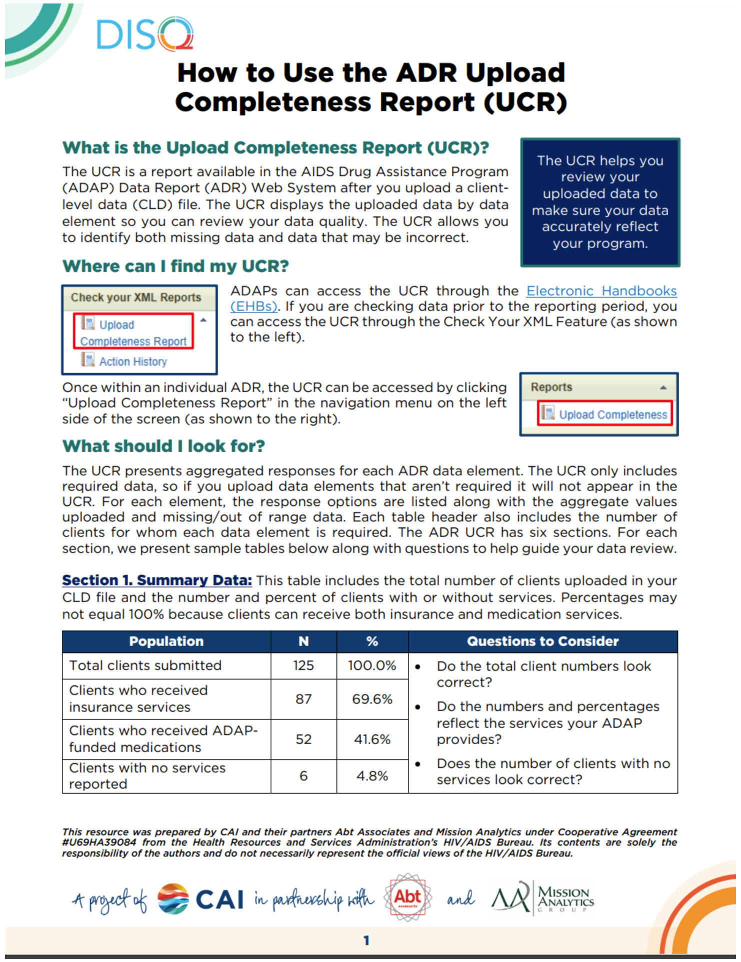
2023 ADR Submission Timeline

[2023 ADR Submission Timeline]()



TA Materials

- ADR Instruction Manual
- ADR Data Validations
- ADR In Focus Series
  - How to Use the Upload Completeness Report
  - Partial Premiums
  - CAREWare Tips for ADAPs: Key Areas that Impact ADR Data Quality


DISQ

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. The UCR 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?

Check your XML Reports
Upload Completeness Report
Action History

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 within an individual ADR, the UCR can be accessed by clicking "Upload Completeness Report" in the navigation menu on the left side of the screen (as shown to the right).

Reports
Upload Completeness

What should I look for?

The UCR presents aggregated responses for each ADR data element. The UCR only includes required data, so if you upload data elements that aren't required it will not appear in the UCR. 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.

Population	N	%	Questions to Consider
Total clients submitted	125	100.0%	• Do the total client numbers look correct?
Clients who received insurance services	87	69.6%	• Do the numbers and percentages reflect the services your ADAP provides?
Clients who received ADAP-funded medications	52	41.6%	
Clients with no services reported	6	4.8%	• Does the number of clients with no services look correct?

This resource was prepared by CAI and their partners Abt Associates and Mission Analytics under Cooperative Agreement #U69HA39084 from the Health Resources and Services Administration's HIV/AIDS Bureau. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the HIV/AIDS Bureau.

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

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Past Webinars

Date	Title
October 25, 2023	Preparing for 2023 ADR Reporting: Updates and Best Practices
December 13, 2023	Strategies for ADR Integration
February 14, 2024	Reviewing Your Data at Upload: Tools in the ADR Web System and the Check Your XML Feature
April 3, 2024	Completing the ADR: Recipient Report & Client Level Data Upload

Tools Available for Data Review

- ADR-Ready Systems may have tools available
  - CAREWare has the Viewer and Validation Report
- TRAX users can use CHEX
- Upload data in EHBs and review the Upload Completeness Report
  - Focusing just on the validation report limits your data review

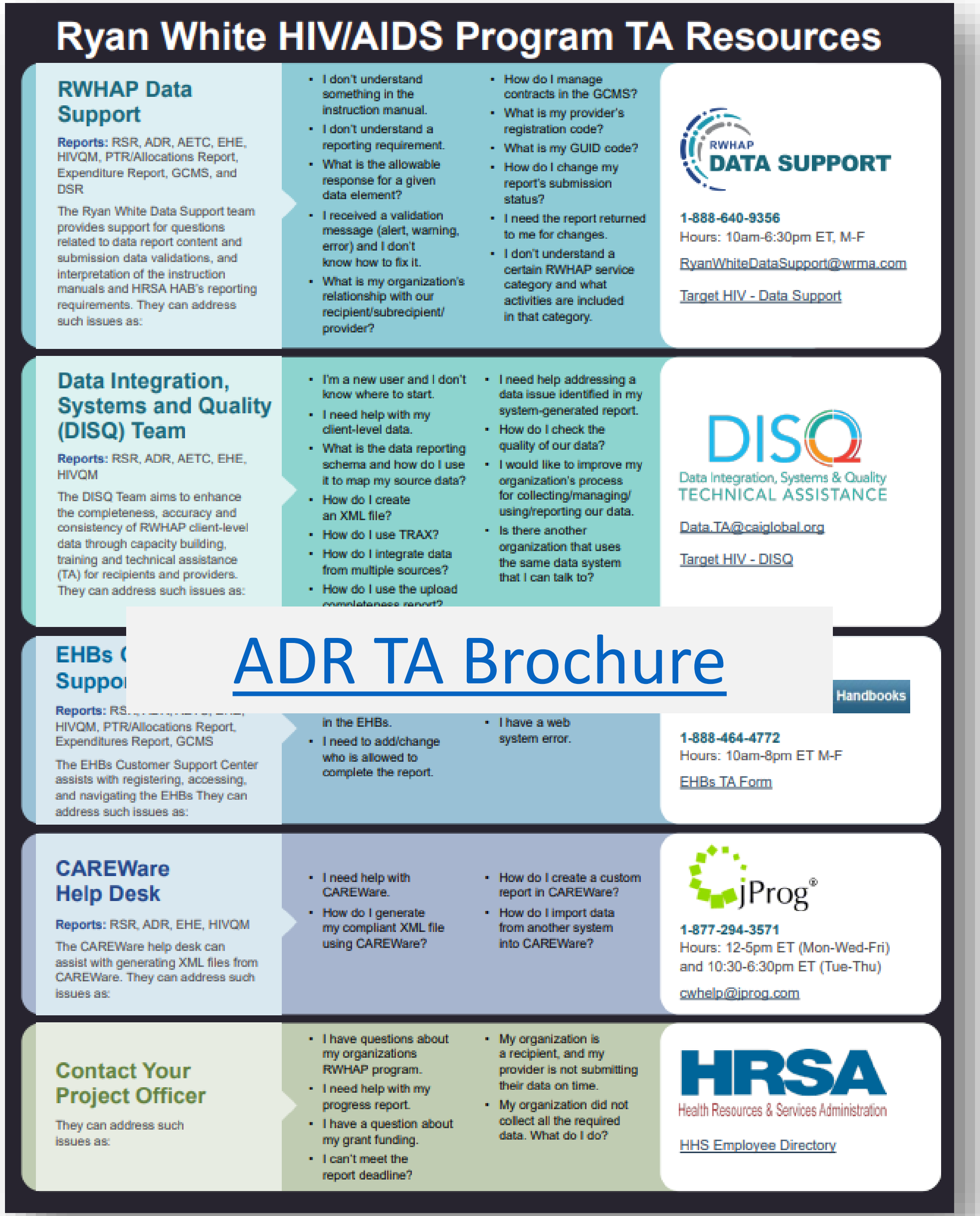
CAREWare Users

- CAREWare ADR Minimum Build – 230
- CAREWare webinars
  - Using CAREWare for ADR Reporting
  - CAREWare Custom Reports for the ADR
- CAREWare Custom Reports for Data Quality
- ADR in Focus: CAREWare Tips for ADAPs - Key Areas that Impact ADR Data Quality
- ADR Validation Reports
- ADR Viewer

RWHAP Technical Assistance Resources

The RWHAP TA Resources Brochure features information on each RWHAP technical assistance provider, including:

- RWHAP reports they support
- Questions they frequently respond to
- Contact information


Ryan White HIV/AIDS Program TA Resources

RWHAP Data Support

Reports: RSR, ADR, AETC, EHE, HIVQM, PTR/Allocations Report, Expenditure Report, GCMS, and DSR

The Ryan White Data Support team provides support for questions related to data report content and submission data validations, and interpretation of the instruction manuals and HRSA HAB's reporting requirements. They can address such issues as:

- I don't understand something in the instruction manual.
- I don't understand a reporting requirement.
- What is the allowable response for a given data element?
- I received a validation message (alert, warning, error) and I don't know how to fix it.
- What is my organization's relationship with our recipient/subrecipient/provider?
- How do I manage contracts in the GCMS?
- What is my provider's registration code?
- What is my GUID code?
- How do I change my report's submission status?
- I need the report returned to me for changes.
- I don't understand a certain RWHAP service category and what activities are included in that category.

RWHAP DATA SUPPORT

1-888-640-9356
Hours: 10am-6:30pm ET, M-F
RyanWhiteDataSupport@wrma.com
Target HIV - Data Support

Data Integration, Systems and Quality (DISQ) Team

Reports: RSR, ADR, AETC, EHE, HIVQM

The DISQ Team aims to enhance the completeness, accuracy and consistency of RWHAP client-level data through capacity building, training and technical assistance (TA) for recipients and providers. They can address such issues as:

- I'm a new user and I don't know where to start.
- I need help with my client-level data.
- What is the data reporting schema and how do I use it to map my source data?
- How do I create an XML file?
- How do I use TRAX?
- How do I integrate data from multiple sources?
- How do I use the upload completeness report?
- I need help addressing a data issue identified in my system-generated report.
- How do I check the quality of our data?
- I would like to improve my organization's process for collecting/managing/using/reporting our data.
- Is there another organization that uses the same data system that I can talk to?

DISQ
Data Integration, Systems & Quality
TECHNICAL ASSISTANCE

Data.TA@caiglobal.org
Target HIV - DISQ

EHBs Support

Reports: RS... HIVQM, PTR/Allocations Report, Expenditures Report, GCMS

The EHBs Customer Support Center assists with registering, accessing, and navigating the EHBs They can address such issues as:

- ... in the EHBs.
- I need to add/change who is allowed to complete the report.
- I have a web system error.

Handbooks

1-888-464-4772
Hours: 10am-8pm ET M-F
EHBs TA Form

CAREWare Help Desk

Reports: RSR, ADR, EHE, HIVQM

The CAREWare help desk can assist with generating XML files from CAREWare. They can address such issues as:

- I need help with CAREWare.
- How do I generate my compliant XML file using CAREWare?
- How do I create a custom report in CAREWare?
- How do I import data from another system into CAREWare?

jProg®

1-877-294-3571
Hours: 12-5pm ET (Mon-Wed-Fri) and 10:30-6:30pm ET (Tue-Thu)
cwhelp@jprog.com

Contact Your Project Officer

They can address such issues as:

- I have questions about my organizations RWHAP program.
- I need help with my progress report.
- I have a question about my grant funding.
- I can't meet the report deadline?
- My organization is a recipient, and my provider is not submitting their data on time.
- My organization did not collect all the required data. What do I do?

HRSA
Health Resources & Services Administration

HHS Employee Directory

ADR TA Brochure

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www.HRSA.gov

Sign up for the HRSA *eNews*

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Let’s Hear From You!

- Please use the “raise hand” function to speak. We will unmute you in the order that you appear.

OR

- Type your question in the question box by clicking the Q&A icon on the bottom toolbar.