Reviewing Your Data at Upload: Tools within the ADR Web System and the Check Your XML Feature
March 3, 2021 -- Written Q & A Summary

#	Questions	Answers
1.	How should ADAPs report health insurance services when a client purchases health insurance through the Marketplace but does not qualify for an advance premium tax credit (APTC)? Should ADAPs report this as a full premium or partial premium payment?	If a client is not receiving a subsidy through the Marketplace, the ADAP is paying the full cost of the premium and it should be reported as a full premium. If a client is receiving a subsidy and the ADAP is paying the non-subsidized portion of the premium, it should be reported as a partial premium. For more information, refer to the ADR Instruction Manual.
2.	How should ADAPs report insurance premium payment if they did not pay the full 12-months of premiums for a year of insurance?	When reporting premium payments, ADAPs report the total number of months for which the program paid the health insurance premium as well as the total amount paid.
3.	Can a client be reported as receiving a full and partial payments in the same reporting period?	Since the ADR reporting period is for twelve months, it is possible that the premium assistance provided by the ADAP may change based on the client's needs. For example, a client may be receiving full premium assistance, but may have an income change that results in the client becoming eligible for a subsidy through the Marketplace. In this example, the client received both full and partial premium assistance during the reporting period.
4.	How should ADAPs report insurance payments for clients who receive a Low-Income Subsidy (LIS) for Medicare Part D?	ADAPs should report these payments as a partial premium because the coverage is subsidized.
5.	I have a client for whom we've paid medication in full. This client then switched to our insurance program during the reporting period. How should we report the payments made for this client?	When someone switches from your full medication program to an insurance program, your payment may shift from paying all the medication costs to only paying the co-pay/co-insurance/deductible for medications. Report all ADAP services received in the reporting period. In this example, you would report both medication services (full pay medication) as well as insurance services (medication copay/co-insurance/deductible) for the client.
6.	Do we need to report CARES Act and EHE (Ending the HIV Epidemic Initiative) funding in the 2020 ADR?	All funding allocated to your ADAP is considered ADAP funding for which data must be reported. If you allocated any of your EHE or CARES Act funding to your ADAP, report clients who received services using these funds in your Client Report. You would also report EHE funding amount in Q5 of the Recipient Report. For more information, be sure to tune into the "Completing the ADR: Recipient Report & Client

		Level Data Upload." View the Data Webinar Calendar here.
7.	For the Race/Ethnicity field, the option "other" shows up as "missing" in the Validation Reports. How should I handle these missing data?	If your data system collects responses other than those reported in the ADR for the Race/Ethnicity field, those options will be treated as missing data for the purposes of the ADR. Remember that Race/Ethnicity is a self-report field. Please be sure that it is the client reporting this data and ADAP staff are not adding information to resolve the "missing" message. ADAPs can write a comment to explain why the data for these clients shows up as "missing."
8.	What should we do when data matching and a client's demographic data are not consistent across different data sources (e.g. enrollment data versus surveillance data)?	It is common that the specific program's data are the data of record and that matched data are used to address missing data. However, if there are concerns regarding data quality, an ADAP may determine that other data obtained through matching may be used. Each ADAP should determine rules regarding how matched data are used.
9.	Are there any plans to expand options for gender identify and begin collecting sexual orientation data?	The changes for the 2021 ADR have been released and do not include any changes regarding gender identity and sexual orientation. Locally, you may collect additional data as long as you meet federal reporting requirements. Preview the data reporting changes for the 2021 ADR here.
10.	Is a client considered as new enrollment for this reporting period if the client returned after a two-year gap?	A client is new if they are applying to your state ADAP for the first time ever. Even after a two-year gap, if they are returning to your ADAP, the client would not be considered new but would be an existing client.
11.	What resources are available for ADAPs to help determine whether they are collecting the required data for the purposes of the ADR?	Be sure to review the ADR Crosswalk, a table that lists what ADAPs need to report and a blank space to indicate the source for those data. You can also contact the DISQ Team for additional assistance.
12.	Our ADAP needs assistance with establishing processes and infrastructure to make sure we are collecting and reporting all the data we need.	As part of available technical assistance, the DISQ Team can meet with ADAPs to review existing processes and infrastructure and provide feedback regarding areas for improvement. Contact the DISQ Team to request additional assistance.

13.	I would like help with using the Check Your XML feature and/or the Upload Completeness Report. Who should I contact?	The DISQ Team offers individual TA for using these features in the ADR Web System. Contact the DISQ Team to get started.