

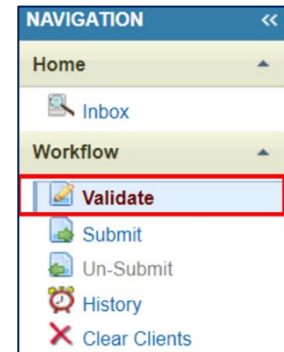
ADR In Focus: 2023 Validations

What are data validations?

When you upload your ADAP Data Report (ADR), data pass through a series of validation checks. These validation checks look for consistency and accuracy in your data to improve your data quality. If your data do not pass a validation check, you may have to explain why or re-upload your report with corrected data.




Where do I encounter validation checks?

The validation process occurs within the ADR Web Application when you upload your client- level data. Go to the left navigation menu and click on the link “Validate.” A This tool will tell you which clients (by eUCI) do not pass the validation checks.



What will I see and how do I respond?

You may encounter three types of notifications:

-  **Errors:** Data with errors are not accepted. You must edit your data and re-upload.
-  **Warnings:** In response to warnings, you should go back and look at your data to see if edits can be made. If edits cannot be made, you will need to submit a validation comment explaining why your data look the way they do.
-  **Alerts:** Alerts are informational and do not prevent submission. However, please make corrections as necessary if you receive a validation alert.

How can I reduce the stress of the validation process?

Upload early! Don't wait until the deadline to upload your data. By uploading early, you'll have time to fix issues and submit well before the deadline. The ADR Web System opens in April before the June deadline. Use the [Check Your XML](#) feature to validate your data before the system opens, but transition to the Recipient Report as soon as it opens.

Review your Upload Completeness Report (UCR) before the Validation Report. 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. By reviewing your UCR first, you will be in a better position to understand and address any validations that arise in the Validation Report. Check out our In Focus on [How to Use the ADR Upload Completeness Report \(UCR\)](#) for more information.

Finally, review any alerts, warnings, or errors that came up last year. You may find that they occurred because of

Remember!

Validation checks help prevent mistakes, but they can't ensure that you are collecting and reporting on all required data. Remember to keep data quality in mind throughout the data collection and reporting process and use the UCR to review data before submission.

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shortcomings in your data collection or reporting processes that still exist. Modifying these processes can eliminate corresponding notifications.

Note: [The complete list of validations](#) can be found on TargetHIV.

Check #	Recipient Report Validation Checks	Error	Warning	Alert
8	Missing poverty level in ADAP eligibility requirements	●		
14	Funding Type Total reported as zero		●	
17	Expenditure total reported as zero	●		
18	Missing amount expended in current reporting period	●		
19	Date of ARV(s) added to the formulary falls outside of reporting period		●	
20	Formulary missing ARVs	●		
32	Missing recipient contact information		●	
82	Missing information on unexpected increase in enrollment	●		
83	Missing information on Drug Pricing Program	●		
114	Missing response on whether ADAP has an open formulary	●		
115	Incomplete responses to Q7a, Q7b, and Q7c		●	
Check #	Client Report Validation Messages	Error	Warning	Alert
34	No Client Records uploaded	●		
35	Clients with Birth Year after the reporting period year		●	
36	Clients with age of 90+		●	
37	Clients with Insurance Premium Months of Coverage reported but missing Insurance Premium Paid Amount		●	
38, 39	Medication Start Date(s) before or after the reporting period		●	
40, 41	CD4 or Viral Load Test Date(s) after the reporting period		●	
42	Clients with ADAP-Funded Medications reported as “yes” with missing or \$0 for Medication Dispensed Total Cost		●	
44, 47	Clients reported as Enrolled but missing Application Received Date, Application Approval Date			●
46	Application Received Date before or after the reporting period			●
48, 49	Application Approval Date before or after the reporting period			●
50	Clients reported as newly enrolled with Application Approval Date after July 1 and ADAP Recertification Date reported			●

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53	Clients with Disenrollment Reason reported and not reported as Disenrolled in Enrollment Status at the End of the Year	●
54	Clients received Insurance Assistance but missing Insurance Premium Amount and Medication Co-Pay or Deductible Amount	●
55, 56, 57	Insurance Premium Paid Amount, Months of Coverage, or Medication Co-Pay/Deductible Amount more than zero but Insurance Assistance Received reported “no”	●

Check #	Client Report Validation Messages	Error	Warning	Alert
58	ADAP Medications Dispensed but ADAP-Funded Medications reported as “no”		●	
59	ADAP-Funded Dispensed Flag reported “yes” but missing ADAP-Funded Medications Dispensed		●	
60, 61	Clients with inconsistencies in Medication Start Date and ADAP-Funded Medications			●
62, 63	Clients with inconsistencies in Medication Days Supply and ADAP-Funded Medications			●
65, 72	Clients missing CD4 or Viral Load test(s)		●	
66, 73	CD4 or Viral Load Test Date(s) before the reporting period			●
80	Clients with Medication Dispensed Total Cost reported but “no” reported for Medication Dispensed		●	
84, 85	Clients with inconsistencies in Insurance Assistance Received and Insurance Assistance Type		●	
86, 89, 91, 93, 96	Missing ethnicity, or racial or ethnic subgroup data without corresponding race/ethnicity reported		●	
87, 88, 90, 92	Missing race, racial subgroup or ethnic subgroup data			●
94	Missing Sex at Birth			●
95	Clients reported as Enrolled, Receiving Services with no services reported			●
98	Clients over age 2 with HIV/AIDS status Indeterminate		●	
99, 100	Clients reported as newly enrolled but Application or Approval Date more than two years ago		●	
101	Missing Enrollment Status at the End of the Year		●	
102, 107	Clients with two or more disparate CD4 or Viral Load counts on the same date		●	
103	Missing or invalid HIV/AIDS Status ID		●	
105	Missing or invalid current Medical Insurance		●	
106	Enrollment Status at End of the Year of “Enrolled, on waiting list”			●

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108	Missing or out of range Insurance Premium Assistance Months (Range is 1-18 months)	•
109	Clients with Insurance Assistance Type reported as 'Full Premium Payment' or 'Partial Premium Payment', but Insurance Premium Amount is missing or zero.	•
110	Insurance Premium amount greater than zero but missing Insurance Assistance Type.	•
111	Insurance Assistance Type reported as 'Medication Co-pay/deductible', but Medication Co-pay/deductible Amount is missing or zero.	•
112	Last Eligibility Confirmation Date is missing or out of range.	•
117	Clients missing Poverty Level Percent	•

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