



Data Quality Tips for Section 5 of the RDR

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INTRODUCTION:

Agencies that provide medical services and receive Ryan White funding are required to complete section 5 of the RDR.

This document seeks to help you improve your overall data collection in preparation for the RDR and to clarify some of the specific questions asked in Section 5 of the RDR. Many of the questions in section 5 relate to clinical data that is collected either from the lab tests or the “services” provided at the encounters. [The data entered throughout the year, for clinical and laboratory services, is captured here.](#)

3 Key Suggestions To Help Improve RDR Data Quality

1. Plan in advance for RDR related data entry and try to sustain the effort throughout the year.

Entry of encounters, underlying services, lab tests and applicable histories should be on-going activities. Try not to wait until the end of the year to play “catch-up” to get in missing data. You might find that if you wait, you will have not allowed enough time to get in all your data and your RDR might then not reflect the full complement of medical services in section 5.

Not only is timely data important for the RDR, but the data will be routinely checked for completeness by AI staff.

2. Print out and review the ‘AIRS Encounter and Services Listing’ report.

Log onto AIRS. From the top menu, click on Reporting and then click on “Activities and Services”. Choose the “AIRS Encounters and Services Listing” report. Right-click on Service Category to choose either Primary Care, Primary Care 5 Tier, Primary Care 7 tier, Primary Medical Specialty Care, etc. Proceed and print the report for each applicable service category.

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AIDS INSTITUTE Test System

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AIRS - AIDS Institute Reporting System
AIRS ENCOUNTERS AND SERVICES LISTING

Selection Criteria: Active Only

Service Category: Primary Care**Encounter:**

34 Clinical Trial Follow-Up

Service:

	Active	RDR Category	RDR2 Category	MAI Category
34 Clinical Trial Follow-Up	Yes	33A		01
6 AFB Culture	Yes	33A		01
36 Assessment of Mental Health & Social Needs	Yes	33A		01
909 Basic Patient Education	Yes	33A		
912 Buprenorphine Administration	Yes	33A		
913 Buprenorphine Education	Yes	33A		
65 CBC/Differential	Yes	33A		01
82 Chemistry Panel	Yes	33A		01
83 Chest X-Ray	Yes	33A		01
92 Chlamydia Screen	Yes	33A	48C	01
93 Cholesterol Test	Yes	33A		
986 Domestic Violence Screening	Yes	33A		
309 Gonococcal Culture	Yes	33A	48C	01
334 HIV Transmission Prevention Education	Yes	33A		
358 Hepatitis Panel	Yes	33A	48E	01
442 Interim Medical History	Yes	33A		01
453 Lab Test: CD4	Yes	33A	46A	01
451 Lab Test: RPR/Syph Serology	Yes	33A	48A	01
452 Lab Test: TB Screen/PPD/Anergy Screen	Yes	33A	47B	01
454 Lab Test: Viral Load	Yes	33A	46B	01
1029 Lipid Screening	Yes	33A		

Keep this report in a binder and in a location that is easily referenced when planning for or doing RDR related data entry. The report provides a listing of every encounter and the services that underlie each encounter. The report will help you understand what encounters and underlying services get mapped to what RDR questions.

- Not every encounter or underlying service maps to the RDR.
- Only a small subset of encounters and services map to section 5 of the RDR.
- Just because encounters and services have names that are similar to RDR items, they may not get included.
- Only concern yourself with “Active” encounters and services.

Report details:

- On the left side of this report, you will see each encounter and its underlying services.
- On the right hand side, you will see four columns. The first column is labeled “Active”.

- The 2nd column is labeled “RDR”. ***All encounters / services with a value of 33A in the RDR category are considered ambulatory medical encounters for the purposes of the RDR.*** In order for an encounter/service to be counted in Section 5, it must have a RDR category value of 33A.
 - Please note that there may be encounters/services which you enter that have a service category of Primary Care, but do not have a RDR Category value of 33A. If a client ONLY has this type of encounter/service, he/she will NOT be counted in section 5 of the RDR, but the client may be counted elsewhere on the RDR.

- The RDR2 category column governs how Services underlie the encounters are mapped with respect to Section 5. You will see that some of the services listed have a corresponding number in the RDR2 column and some do not. ***Only services that have a number in the RDR2 column are mapped to a corresponding RDR question with respect to Section 5.***
 - For example, the item in section 5 of the RDR relating to Pelvic/cervical Pap examinations is question 52. Only services that have a value of 52 in the RDR2 column will map to that question when the RDR is generated by AIRS. Services that may have the words “Pelvic” or “Pap” in their name, but do not have a value of 52 in the RDR2 column, will not map to question 52 when the RDR is generated.



Important: The item numbers might change from year to year, depending on the numbering of the RDR form. Therefore, it is important to make sure that you are current with respect to the version of AIRS. Print out a new copy of the “AIRS Encounters and Services Listing” report after EACH upgrade. Destroy the previous copy.

Based on the above explanation of how the RDR service mapping works, you must choose an encounter and an underlying service that reflects BOTH the actual patient service and maps to the specific applicable RDR question.

3. Develop a check list that can be attached to the patient's chart where the clinician can easily check off the following while including the relevant dates:

1. Hepatitis C Screening
2. Hepatitis C Treatment
3. Syphilis Screening
4. Syphilis Treatment
5. STI Screening (other than for Syphilis)
6. STI Treatment (other than for Syphilis)
7. Pelvic Exam and Cervical Pap Test
8. Latent TB testing
9. CD4/Viral load

Creating a data entry check list where the clinician can easily and quickly check the items with their dates has worked well for several providers and this will reduce the need to manually pull the information from patients' charts. See Attachment 1 for an example of this type of form which was developed by Greenwich House.

Section 5 Service Level Data Questions Explained



Basic Inclusion Criteria: For a client to be included in the counts for the questions noted below, each must have an “HIV+ “status or an “Indeterminate” status AND have at least one ambulatory care encounter with a RDR Category value of 33A. There may be additional qualifying conditions that further RESTRICT clients who get to be counted and these will be discussed individually within each question.

Q42—Gender of Clients who have received medical services.

Gender is taken from the client intake. Make sure that every client has a *Gender* entered on the intake. AIRS will compute the appropriate breakdowns when it calculates the RDR.

The screenshot shows the 'Intake and Personal Information' form in the AIRS system. The 'Identification' tab is selected, and the 'Client ID' is 1. The 'Intake Date' is 01/01/2000. The 'Gender' field is highlighted with a red box, showing a value of 10 and the text 'Female'. Other fields include 'Last Name' (APPLE), 'First Name' (EVE), 'Middle Name' (ADAMS), 'SSN' (123-45-6789), and 'Case #' (C9988776).

Field	Value
Intake Date	01/01/2000
Client ID	1
SSN	123-45-6789
Case #	C9988776
Last Name	APPLE
First Name	EVE
Middle Name	ADAMS
Gender	10 Female
Primary Language	01 English
Secondary Language	02 Spanish

Q43—Number of clients with 1 to 5 or more medical visits.

Clients counted in Q42, are placed in the appropriate visit category based on the number of encounters/services which are entered and maintained in the Services Form.

- AIRS will count how many Encounters/Services the client has had during the reporting period.
- There should be no clients where the number of visits is unknown. Every client will have at least one medical visit entered.

The screenshot displays the 'Client Information and Services' application window. The client name is 'APPLE, EVE'. The left sidebar contains a tree view with categories: Intake Information, Enrollments / Assignments, Historical Information, Assessments, and Services. The 'Services' category is expanded, showing 'Services Form...' (highlighted with a red box and arrow), 'Legal Services...', and 'Counseling Testing and Referrals...'. The main window has a 'Service Encounters' section with a search bar and tabs for 'Encounter Information', 'Progress Note', and 'Additional Information'. The 'Encounter Information' tab is active, showing fields for 'Actual Date', 'Program', 'Contract#', 'Model', 'Serv. Cat.', and 'Intervention'. Below this are fields for 'Encounter', 'Location', 'Encounter With', 'Staff', 'Team', and 'Site'. The 'PEMS Related Information' section includes 'Session Number', 'Incentive Provided', and 'Unit of Delivery'. The 'Next Scheduled Appointment' section has 'Date' and 'Location' fields. At the bottom, there are sections for 'Services/Activities Provided' and 'Referrals Provided', both currently showing 'Not Entered'. A status box at the bottom left provides client details: Status: Active 01/01/2000 12:00 AM, Intake: 01/01/2000, Agency ID#: 1, Full Name: Eve Adams Apple (Female), DOB: 01/01/1960 Age: 48, Contact By: Discretion, Mail, Phone, Home Visit, and Social Security Number: 123-45-6789.

Q44—Risk Factors for HIV+/Indeterminate clients receiving medical care.

Each client receiving medical services during the RDR year should have at least 1 risk history record during the reporting year that reflects his/her current risk status.

- If the client's risk profile has changed during the course of the year, **the client's risk history should be updated as needed.** Unless you have made a data entry error, Do NOT edit the current risk history record to reflect the client's current risk. Instead, update the risk history by entering a NEW record.
- It is not advisable for your RDR to reflect a high proportion of clients with unknown/unreported risk histories.
- *Note: Risks are hierarchy based.* (The first risk on RDR list is highest while the last is the lowest.) If there are multiple HIV/AIDS Risk records for a client up through the End Date of the RDR, the Risk record with the most risk is reported.

Risks are entered in the **HIV/AIDS Risks History** form. Click on [Add] to start and enter information on the 3 tabs (Factors, Risk in last 12 Months, and Characteristics).

Client Information and Services

Client: APPLE, EVE

HIV/AIDS Risk History

Date	CDC Risk Category	RW Risk Category
01/01/2006	Heterosexual Contact	Hemophilia/Coagulation Disorder
01/01/2000	Heterosexual Contact	Heterosexual Contact
///		

Clients Sex: Female

Effective Date: // Recall Period: CDC Local

Factors Risk in last 12 Months Characteristics Risk History (Legacy)

For all of the questions on this page: No Risk identified Refused Not Asked

Sexual Risk Factors: Sex (vaginal or anal) with...

Male	Female	Transgender	Description
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	In exchange: Sex for drugs/money.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	While intoxicated and/or high on drugs.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	With a person who is an IDU.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	With a person who is HIV positive.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	With person of unknown HIV status.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	With person who exchanges sex for drugs/money.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	With anonymous partner.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	With hemophilic or transfusion/transplant recipient.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	With person who is a known MSM (Female client only)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No additional risk information specified.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Refused to report additional risk factors.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not asked additional risk factors.

Non-Sexual

- Injection Drug Use (IDU)
- Shared Drug Injection Equipment
- Hemophilia/Coagulation disorder
- Blood product or transplant recipient
- Mother at risk/perinatal
- Other

Status: Active 01/01/2000 12:00 AM
 Intake: 01/01/2000
 Agency ID#: 1
 Full Name: Eve Adams Apple (Female)
 DOB: 01/01/1960 Age: 48
 Contact By: Discretion, Mail, Phone, Home Visit
 Social Security Number: 123-45-6789

HIV/AIDS Risk History

Date	CDC Risk Category	RW Risk Category
01/01/2006	Heterosexual Contact	Hemophilia/Coagulation Disorder
01/01/2000	Heterosexual Contact	Heterosexual Contact
/ /		

Clients Sex: Female

Effective Date: / / Recall Period: CDC Local

Factors: **Risk in last 12 Months** Characteristics Risk History (Legacy)

For all of the questions on this page: Refused Not Asked

Recent STD (not HIV)

Yes (Self-report)

Yes (Lab confirmed)

No

Don't Know

Refused

Not Asked

Incarcerated

Yes

No

Refused

Not Asked

Sex Worker

Yes

No

Refused

Not Asked

Housing Status

Permanent

Non-permanent

Institution

Other

Don't Know

Refused

Not asked

+ Add Edit Remove... **Save** Cancel Help

HIV/AIDS Risk History

Date	CDC Risk Category	RW Risk Category
01/01/2006	Heterosexual Contact	Hemophilia/Coagulation Disorder
01/01/2000	Heterosexual Contact	Heterosexual Contact
03/15/2008		

Clients Sex: Female

Effective Date: 03/15/2008 Recall Period: CDC Local

Factors: Risk in last 12 Months **Characteristics** Risk History (Legacy)

Pregnant

Yes

No

Don't know

Refused

Not asked

Previous HIV Test

Yes

No

Don't know

Refused

Not asked

MM/YYYY 09/2006

Self-reported Test Results

Positive

Negative

Preliminary Positive/Indeterminate

Don't Know

Refused

Not asked

In HIV Medical Care

Yes

No

Don't know

Refused

Not asked

In Prenatal Care

Yes

No

Don't know

Refused

Not asked

- If you answer 'Yes' to "Previous HIV Test", you must enter the MM/YYYY and answer the "Self-reported Test Results" question.
- If you answer 'Positive' in "Self-reported Test Results" you must answer the "In HIV Medical Care" question.

Click on [Save]. AIRS will identify the client's *RW Risk Category*.

HIV/AIDS Risk History

Date	CDC Risk Category	RW Risk Category
03/15/2008	IDU	IDU
01/01/2006	Heterosexual Contact	Hemophilia/Coagulation Disorder
01/01/2000	Heterosexual Contact	Heterosexual Contact

Q45—Number of clients who have received medical services for the first time.

In addition to the basic inclusion criteria, clients must have had their first medical encounter during the current reporting year to be included in this question.

- For each client reported in Question 42, AIRS will determine if they have or do not have any Encounters/Services associated with RDR equal to 33A prior to the start of the reporting period. If they do not, they are counted here.
- Clients whose cases are reopened during the current reporting year but have had prior medical encounters will NOT be counted.

Q46—Clients who are new to medical services and who either have had a CD4 count or Viral Load test during the RDR year.

This is a subset of clients counted in Q45 who either had a CD4 or Viral Load test. The counts are drawn from either the data entered in the **Services Form** or the results found in the **Laboratory & Psychological Tests** form. Although most providers tend to choose the encounters and services method, AIRS will consider either so it is your choice.

- CD4 COUNT:
 - *SERVICE Method:*
Although the specific encounter codes will vary depending on your program, choosing the *Lab Test: CD4* service (code **453**) will add the client to this question.
 - If you look at the “AIRS Encounters and Services Listing” report you can see all the Services associated with the RDR2 category of **46A** that correspond to each Encounter/Service combo.
 - *LAB TEST Method:*
Enter the *CD4 (T-Helper Tests)* into the **Laboratory & Psychological Tests** form.

Client Information and Services

Client: APPLE, EVE

Intake Information:

Enrollments / Assignments:

Historical Information:

Collateral Information...

Diagnosis Information...

Financial Information...

HIV Status Information...

HIV/AIDS Risk History...

Insurance Information...

Laboratory & Psychological Tests...

Medication History...

Placement / Visit History...

Pregnancy Information...

Primary Care Physician Information...

Referral Tracking...

Substance Use History...

TB Status...

Assessments:

Services:

Services Form...

Legal Services...

Counseling Testing and Referrals...

Laboratory & Psychological Test Information

Date	Type	Description	Result	Count	%
03/15/2007	05	HIV DETECTION/ANTIGEN/MIFPCR	Positive	0	0
08/08/2008	06	CD4 (T-HELPER) TESTS		175	0

Test Type: 06 CD4 (T-HELPER) TESTS

Test:

Test Result:

Range: 01 <200

Count: 175

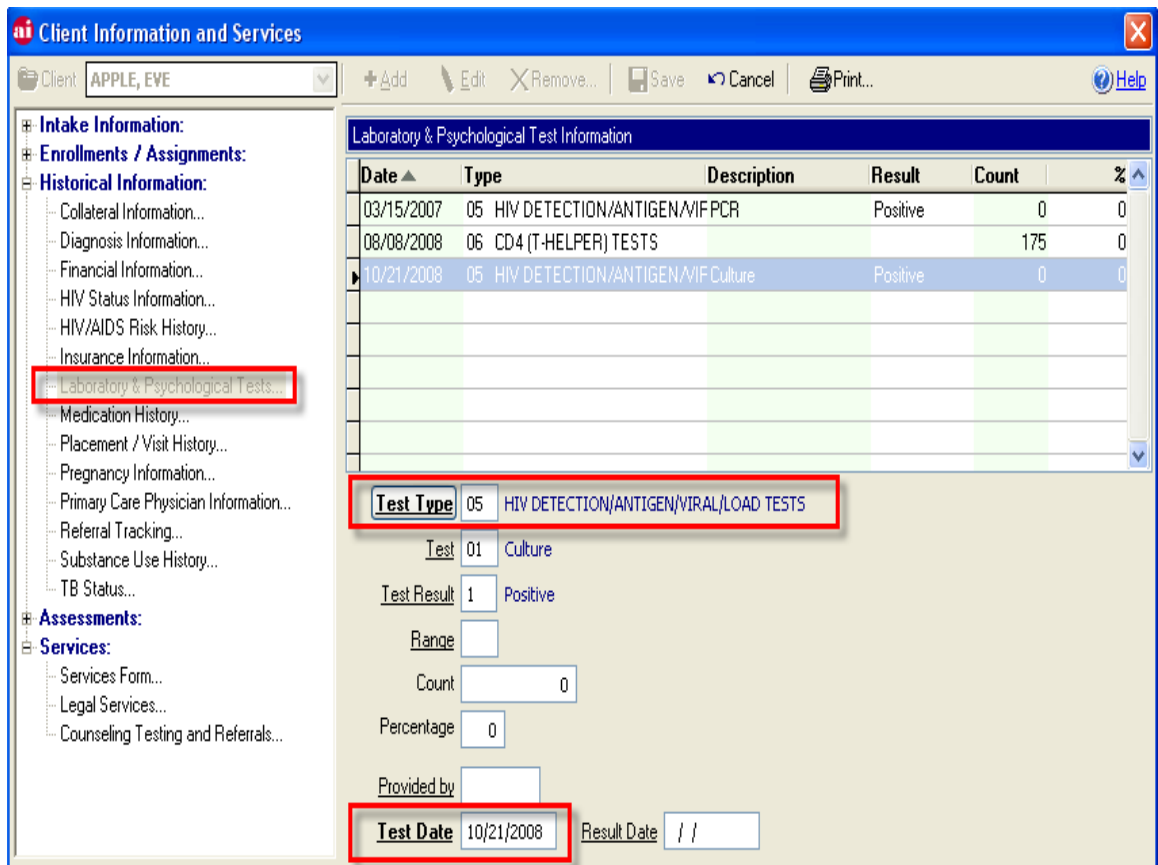
Percentage: 0

Provided by:

Test Date: 08/08/2008

Result Date: //

- **VIRAL LOAD:**
 - **SERVICE Method:**
 Although the specific encounter codes will vary depending on your program, choosing the **Lab Test: Viral Load (454)** service will add the client to this question
 - If you look at the “AIRS Encounters and Services Listing” report you can see all the Services associated with the RDR2 category of **46B** that correspond to each Encounter/Service combo.
 - **LAB TEST Method:**
 Enter the **HIV Detection/Antigen/Viral/Load Test** into the **Laboratory & Psychological Tests** form.



Q47A--47E—Latent TB testing.

The data for items in Q47 are drawn from either the data entered in the **Services Form** or entered in the **TB Status History** screen. AIRS will consider either entry for the RDR.

- For the purposes of the RDR, the **TB Status History** should be updated at least annually for each patient for whom a TB screening is clinically indicated. Exceptions are identified below. (Please note that these requirements may differ from HIVQUAL standards.)
 - Patients with positive PPD results from a previous reporting year
 - Patients that have been treated for active or latent TB infection in a previous reporting year.
 - Patients who are anergic do not need subsequent annual updates if their TB Status History records have already indicated their anergic status.
- **Q47a – Latent TB Test was Indicated:**

The total unduplicated client count will include clients with Services mapped to RDR Question 47A or 47B or have a **TB Status History** record indicating a *PPD* was performed during reporting period.

- *SERVICE Method:*

Although the specific encounter codes will vary depending on your program, choosing the ***TB Skin Test (PPD) Indicated (815)***, ***Lab Test: TB Screen/PPD/Anergy Screen (452)***, or ***PPD (602)*** service will add the client to this question.

 - If you look at the “AIRS Encounters and Services Listing” report you can see all the Services associated with the RDR2 category of 47A and 47B that correspond to each Encounter/Service combo.
- *TB STATUS HISTORY Method:*

Enter a record into the **TB Status History** screen indicating a *PPD* was performed during reporting period. See next page.

Client Information and Services

Client: APPLE, EVE

Historical Information:

- Collateral Information...
- Diagnosis Information...
- Financial Information...
- HIV Status Information...
- HIV/AIDS Risk History...
- Insurance Information...
- Laboratory & Psychological Tests...
- Medication History...
- Placement / Visit History...
- Pregnancy Information...
- Primary Care Physician Information...
- Referral Tracking...
- Substance Use History...
- TB Status...**

Assessments:

Services:

Status: Active 01/01/2000 12:00 AM
 Intake: 01/01/2000
 Agency ID#: 1
 Full Name: Eve Adams Apple (Female)
 DOB: 01/01/1960 Age: 48
 Contact By: Discretion, Mail, Phone, Home Visit
 Social Security Number: 123-45-6789

TB Status History

Previous TB History: 01 No History of TB

Date of Status	Treatment/Therapy
07/01/2000	Directly Observed Prophylactic Therapy
02/06/2007	TB Therapy

Effective Date of Status: 02/06/2007 TB Status Unknown

PPD

Performed: Yes No **PPD Date:** 02/06/2007 **Result:** 2 **Positive:** Yes No

Chest X-Ray

Performed: Yes No **X-Ray Date:** 02/06/2007 **Result:** 02 Indicates disease

Treatment/Therapy: 03 TB Therapy

Date Started: 02/16/2007 Date Completed: / /

Diagnosis Information:

ICD9 Code	Diagnosis Description	HIV ICD9 Code	Diagnosed	Date	State	County
042	AIDS	042.		01/01/2001		
042	AIDS	042.		01/01/2003		
042	AIDS	042.		01/01/2006		

Test Information:

Test Type	Test Code	Result	Count	Percent	Test Date	Result Date
05	HIV DETECTION/ANTIGEN/IR01	Positive	0	0	10/21/2008	/ /
06	CD4 (T-HELPER) TESTS		175	0	08/08/2008	/ /
05	HIV DETECTION/ANTIGEN/IR03	Positive	0	0	03/15/2007	/ /

- **Q47b – Received TB Test:**

The total unduplicated client count will include clients with Services mapped to RDR Question **47B** or have a **TB Status History** record indicating a **PPD** was performed during reporting period.

- **SERVICE Method:**

Although the specific encounter codes will vary depending on your program, choosing the **Lab Test: TB Screen/PPD/Anergy Screen (452)** or **PPD (602)** service will add the client to this question.

- If you look at the “AIRS Encounters and Services Listing” report you can see all the Services associated with the RDR2 category of **47A** and **47B** that correspond to each Encounter/Service combo.

- **TB STATUS HISTORY Method:**

Enter a record into the **TB Status History** screen indicating a **PPD** was performed during reporting period. See the screen shot above.

- **Q47c – TB Test Results:**

Of the clients reported in Question 47b, the PPD *Result* field from the **TB Status History** screen is used to determine the reported results.

- *Note:* If a Result is not entered in the **TB Status History** record, the client will be counted into the "Unknown" category.
- *Note:* If a client is included in 47b due only to the Service being entered, the client will be counted into the "Unknown" category.

TB Status History

Previous TB History: No History of TB

Date of Status ▲	Treatment/Therapy
07/01/2000	Directly Observed Prophylactic Therapy
02/06/2007	TB Therapy

Effective Date of Status: TB Status Unknown

PPD →

Performed Yes No PPD Date Result Positive

Chest X-Ray

Performed Yes No X-Ray Date Result Indicates disease

Treatment/Therapy: TB Therapy

Date Started: Date Completed:

Diagnosis Information:

ICD9 Code	Diagnosis Description	HIV ICD9 Code	Diagnosed	Date	State	County
042.	AIDS	042.		01/01/2001		
042.	AIDS	042.		01/01/2003		
042.	AIDS	042.		01/01/2006		

Test Information:

Test Type	Test Code	Result	Count	Percent	Test Date	Result Date
05	HIV DETECTION/ANTIGEN/VIR01	Positive	0	0	10/21/2008	//
06	CD4 (T-HELPER) TESTS		175	0	08/08/2008	//
05	HIV DETECTION/ANTIGEN/VIR03	Positive	0	0	03/15/2007	//

- **Q47d – Treatment:**

Of the clients who tested Positive in Question 47c, the *Treatment/Therapy* field from the **TB Status History** screen is used.

- *Note:* If a *Treatment/Therapy* is not entered in the **TB Status History** record, the client will be counted into the "Unknown/lost to follow-up" category unless Service 816 has been entered. (See next bullet.)
- *SERVICE Method:* Although the specific encounter codes will vary depending on your program, choosing the **TB Treatment (816)** service will (also) add the client to the "Completed treatment for active TB disease" category.

The screenshot shows the 'TB Status History' form. At the top, 'Previous TB History' is set to '01 No History of TB'. A table lists 'Date of Status' and 'Treatment/Therapy', with the current record showing '02/06/2007' and 'TB Therapy'. Below this, the 'Effective Date of Status' is '02/06/2007'. The 'PPD' section shows 'Performed' as 'Yes', 'PPD Date' as '02/06/2007', and 'Result' as '2 Positive'. The 'Chest X-Ray' section shows 'Performed' as 'Yes', 'X-Ray Date' as '02/06/2007', and 'Result' as '02 Indicates disease'. A red box highlights the 'Treatment/Therapy' field set to '03 TB Therapy' and the 'Date Started' field set to '02/16/2007'. The 'Diagnosis Information' table lists three entries for AIDS (ICD9 Code 042) with dates 01/01/2001, 01/01/2003, and 01/01/2006. The 'Test Information' table shows three tests: HIV DETECTION/ANTIGEN/VIR 01 (Positive, Count 0, Date 10/21/2008), CD4 (T-HELPER) TESTS (Count 175, Date 08/08/2008), and HIV DETECTION/ANTIGEN/VIR 03 (Positive, Count 0, Date 03/15/2007).

• **Q47e – Treatment:**

Of the clients who started Treatment in Question 47d, clients are counted if a date has been entered in the Treatment/Therapy *Date Completed* field from the **TB Status History** screen.

- *Note:* If the *Date Started* has been entered but the *Date Completed* is empty, the client will be counted in the "Are currently undergoing treatment for either LTBI or active TB disease" category.
- *Note:* If the *Date Started* AND the *Date Completed* are both empty, the client will be counted in the "Are unknown, lost to follow-up, or did not complete treatment" category.
- *Note:* If the client was counted in Question 47d as "Unknown/lost to follow-up", the client will be counted in the "Are unknown, lost to follow-up, or did not complete treatment" category.

The screenshot shows the 'TB Status History' form. Red arrows point to the following fields: 'Effective Date of Status' (02/06/2007), 'PPD Date' (02/06/2007), 'X-Ray Date' (02/06/2007), 'Date Started' (02/16/2007), and 'Date Completed' (//). The 'Date Completed' field is highlighted with a red box.

Date of Status	Treatment/Therapy
07/01/2000	Directly Observed Prophylactic Therapy
02/06/2007	TB Therapy

Effective Date of Status: 02/06/2007 TB Status Unknown

PPD Performed: Yes No PPD Date: 02/06/2007 Result: 2 Positive Patient: Yes No Anergic: No No

Chest X-Ray Performed: Yes No X-Ray Date: 02/06/2007 Result: 02 Indicates disease

Treatment/Therapy: 03 TB Therapy

Date Started: 02/16/2007 Date Completed: //

ICD9 Code	Diagnosis Description	HIV ICD9 Code	Diagnosed	Date	State	County
042.	AIDS	042.		01/01/2001		
042.	AIDS	042.		01/01/2003		
042.	AIDS	042.		01/01/2006		

Test Type	Test Code	Result	Count	Percent	Test Date	Result Date
05	HIV DETECTION/ANTIGEN/VIR01	Positive	0	0	10/21/2008	//
06	CD4 (T-HELPER) TESTS		175	0	08/08/2008	//
05	HIV DETECTION/ANTIGEN/VIR03	Positive	0	0	03/15/2007	//

Q48—Number of clients who received screening and/or treatments for Hepatitis C, Syphilis, and STI infections other than Syphilis.

The data for items in Q48 are drawn from the data entered for the clients in the **Services Form**.

If you look at question 48 on the RDR report form, you will see that it is really divided into 6 sub-parts. The first one should be considered 48A and the last 48 F. These codes correspond to the RDR2 Category seen in the “AIRS Encounters and Services Listing” report.

- The specific encounter codes will vary depending on your program. However, choosing the appropriate Service Code (see the services below) will count the client in the correct reporting categories.
 - If you look at the “AIRS Encounters and Services Listing” report you can see all the Services associated with the RDR2 category of 48A, 48B, 48C, 48D, 48E, and 48F that correspond to each Encounter/Service combo.
- **Q48A – Screening/Testing for Syphilis:**
 - Providing any one of the following Services (with the **code**) will add the client to this count.
 - **Lab Test: RPR/Syph Serology (451)**
 - **Screening/Testing for Syphilis Blood Test (761)**
- **Q48B – Treatment for Syphilis:**
 - Providing the **Treatment for Syphilis** service (**846**) will add the client to this count.
- **Q48C – Screening/Testing for any STI other than Syphilis:**
 - Providing any one of the following Services (with the **code**) will add the client to this count.
 - **Chlamydia Screen (92)**
 - **GYN: STD Screen (294)**
 - **Gonococcal Culture (309)**
 - **Pelvic Exam With Gonococcal Culture (620)**
 - **STD Screen (739)**
 - **Screening for STI other than HIV or Syphilis - Blood Test (751)**
 - **Screening for STI other than HIV or Syphilis – Urine (1098)**

- **Q48D – Treatment for any STI (other than Syphilis):**
 - Providing any one of the following Services (with the **code**) will add the client to this count.
 - ***GYN: STD Treatment (295)***
 - ***STD Treatment (740)***
 - ***Treatment of STI other than HIV or Syphilis (847).***

- **Q48E – Screening/Testing for Hepatitis C:**
 - Providing any one of the following Services (with the **code**) will add the client to this count.
 - ***Hepatitis Panel (358)***
 - ***Screening/Testing for Hepatitis C (759).***

 - *Note:* You will see a service called “Hepatitis Screening Offered but Refused.” While you should select this service if it truly reflects what transpired with the patient, this service will not be counted for the Hepatitis Screenings in the RDR because the RDR makes no provisions for this. Note that this may differ from HIVQUAL standards.

- **Q48F – Treatment for Hepatitis C:**
 - Providing the ***Treatment for Hepatitis C*** service (**844**) will add the client to this count.

Q49—Clients who were newly diagnosed with AIDS during the RDR reporting period.

One of the following is required for the client to be included in this question. The client must have an:

- HIV-Positive Status with a *Diagnosis* (entered in the **Diagnoses Information** screen) that has an associated *HIV ICD9 Code* (indicating it is an AIDS-defining condition) within the reporting period.

Or

- HIV-Positive Status with a *CD4 Test* (entered in the **Laboratory & Psychological Tests** screen) that has a value less than 200 and was performed within the reporting period.

Or

- *HIV Status* equal to *HIV-Positive, CDC- Defined AIDS* (code 10) with an Effective Date within the reporting period

For each client who is newly diagnosed with AIDS:

1. Enter the client's current HIV Status in the **HIV Status Information** screen. See the next page for the screen shot.
 - a. For patients with a previous HIV Status record entered, update the client's information with the new status by adding a NEW record.
 - i. Do NOT edit the existing record to change the client's existing **HIV Status Information** record.
 - b. *Note:* When entering an *HIV Status* equal to *HIV-Positive, CDC- Defined AIDS* (code 10), AIRS automatically adds a record with the AIDS Diagnosis to the **Diagnosis Information** form in AIRS.
 - i. The *Date Diagnosed* will be equal to the *Effective Date* on the **HIV Status Information** record.

Client Information and Services

Client: APPLE, EVE

HIV Status History

Date	Status
01/01/2006	HIV-Positive, CDC-Defined AIDS
01/01/2003	HIV-Positive, CDC-Defined AIDS
01/01/2000	HIV-Positive, Not AIDS

Effective Date: 01/01/2003 CDC - defined AIDS: Yes, Date: 01/01/2003

Status: 10 HIV-Positive, CDC-Defined AIDS

Symptoms (Pediatric Only):

Confirmed HIV Test Result:

HIV Test Date: / /

Confirmed Documentation Source:

Confirmation Date: / /

Diagnosis Information:

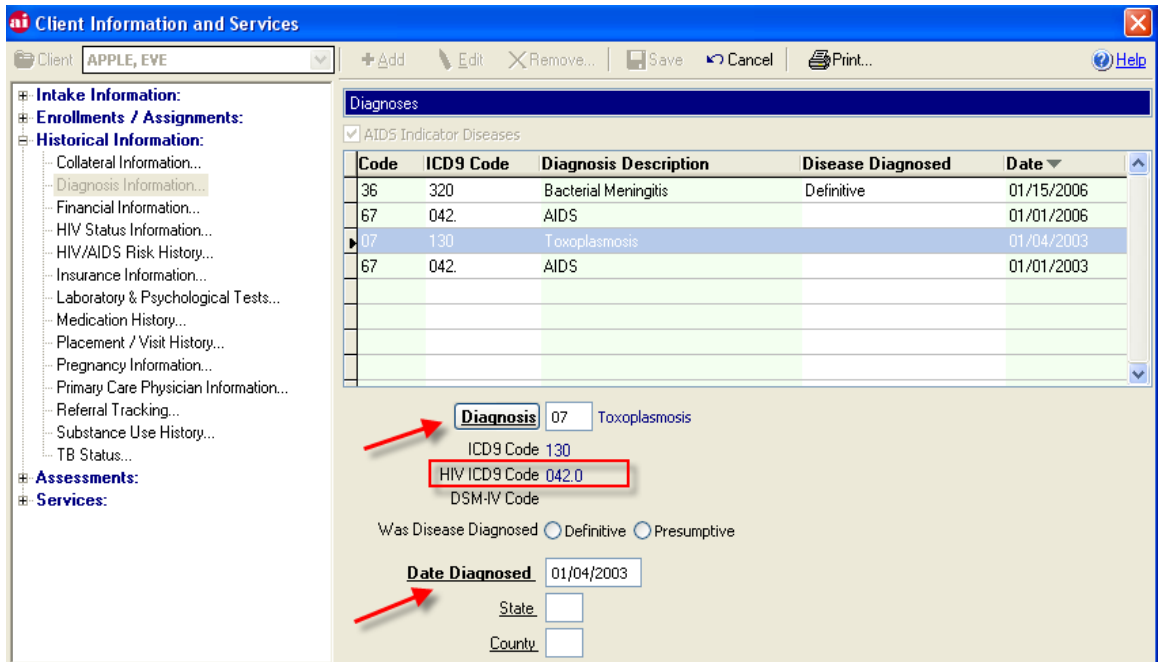
ICD9 Code	Diagnosis Description	HIV ICD9 Code	Diagnosed	Date	State	County
042	AIDS	042		01/01/2003		
042	AIDS	042		01/01/2006		
320	Bacterial Meningitis		Definitive	01/15/2006	NY	NEW YORK

Test Information:

Test Type	Test Code	Result	Count	Percent	Test Date	Result Date
05 HIV DETECTION/ANTIGEN/VR 01		Positive	0	0	10/21/2008	/ /
06 CD4 (T-HELPER) TESTS			175	0	08/08/2008	/ /
05 HIV DETECTION/ANTIGEN/VR 03		Positive	0	0	03/15/2007	/ /

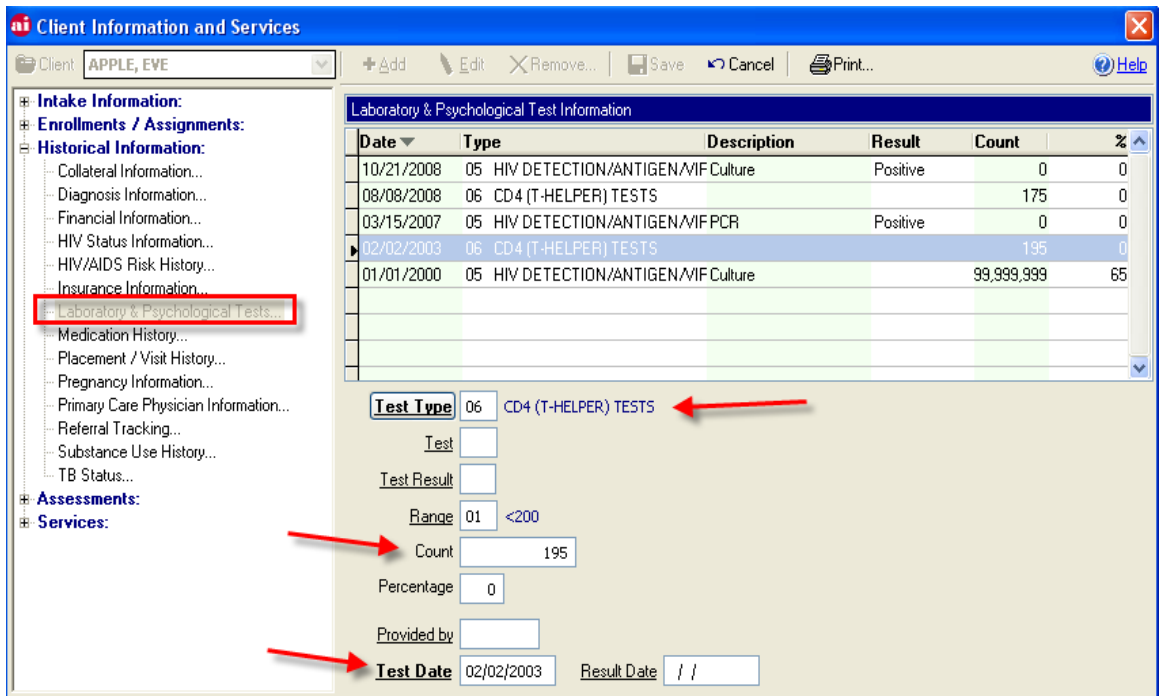
Status: Active 01/01/2000 12:00 AM
 Intake: 01/01/2000
 Agency ID#: 1
 Full Name: Eve Adams Apple (Female)
 DOB: 01/01/1960 Age: 48
 Contact By: Discretion, Mail, Phone, Home Visit
 Social Security Number: 123-45-6789

2. Update the client's **Diagnosis Information** and/or their **Laboratory & Psychological Tests** information.
 - a. **Diagnosis:** Enter new record(s) to include the specific AIDS-defining condition(s). AIDS-defining conditions have an HIV ICD9 code associated. See the next page for the screen shot.
 - i. *Note:* If an AIDS Diagnosis has already been added after entering the HIV Status, you may not need to add anything here.
 - ii. Once an AIDS-defining condition has been entered, the user should enter the **HIV-Positive, CDC- Defined AIDS** (code 10) status in the client's **HIV Status Information** screen.
 - Remember: An AIDS Diagnosis will be added when this HIV Status is entered.



b. CD4 Test: Enter the CD4 Test and Result.

- i. If the value is less than 200, the user should enter the **HIV-Positive, CDC- Defined AIDS** (code **10**) status in the client's **HIV Status Information** screen.



Q50—Number of HIV+ clients who have died during the reporting year.

The RDR retrieves this information from the client status records. In order to have this information tabulated correctly by the RDR, be sure to close the client at the agency level by updating the client's agency status in the **Status Changes** screen.

- The *Reason for Closure* is “Death”.
- The *Date of Death* also needs to be entered.
 - If your agency does not know the client's *Date of Death*, you should enter an approximate date of death. This would be preferable to leaving the date blank.
 - Although clients can be closed at the program level due to death, unless the client is also closed at the agency level, he/she will be excluded from the RDR tabulation for this question.

Client Information and Services

Client: MOUSE, MICKEY

Intake Information:

Enrollments / Assignments:

Program Enrollments...

Worker Assignments...

Group Enrollments...

Site Assignments...

Historical Information:

Assessments:

Services:

Active Status - Maintain a clients association with the agency

The list below shows the selected clients active status history and history of treatment disruptions.

- Use the Add button to change the status of a client in the agency.
- Edit can only be used to make corrections to the effective date or a comment.

Effective Date	Status
11/01/2008 12:00:00 AM	Case Closed
09/09/2004 12:00:00 AM	Active

Effective Date: 11/01/2008 Time: 12:00 AM

Status Code: C Case Closed

If Case is Closed...

Reason for Closure: 10 Death

If the case is closed because of death:

Date of Death: 10/15/2008 State of Death:

Comment...

Status: Case Closed 11/01/2008 12:00 AM
 Intake: 09/09/2004
 Agency ID#: 9
 Full Name: Mickey Mouse (Male)
 DOB: 09/09/1990 Age: 18
 Contact By: *Not Allowed*
 Social Security Number: n/a
 Case Number: n/a

Q51—Number of clients on different types of ARV therapy.

The RDR uses clients' **Medication History** to tabulate the count for this question. In order to accurately reflect the client's ARV therapy status, every client who receives medical services during the year **MUST** have at least one medication history record with the ARV therapy information completed and the date the client began and ended ARV therapy (if applicable).

- At a minimum, the client **Medications History** in the AIRS should be reviewed annually and updated to reflect current ARV therapy status for each client.
- If the client's ARV therapy status changes during the course of the year, you will need to 1) enter the *ARV End Date* for the current ARV therapy and then 2) add a new record to reflect the client's new ARV therapy.
 - For example, let's say a client changes from "NOT on ARV therapy" to "HAART." In this case, you would enter the last known date that the client was not on any ARV therapy in the current record and then add a new medications history record that reflects the date the client was placed on HAART.
- Clients who have no **Medications History** records entered or have no *ARV Therapy* information entered are counted in the "Unknown/unreported" category.

The screenshot shows the 'Client Information and Services' window for a client named 'APPLE, EVE'. The 'ARV Therapy/Medication History' table is visible, showing records for Mono Therapy, HAART, and Medication 1. Below the table, the 'ARV Therapy Type' form is displayed, which includes a radio button for 'Is client currently on ARV Therapy?' (set to 'Yes'), a 'Reason' field, and input fields for 'ARV Therapy Type', 'ARV Start Date', 'ARV End Date', 'Date Asked', and 'Recent Prescription Fill Date'. Red arrows point to the 'ARV Therapy Type', 'ARV Start Date', and 'ARV End Date' fields.

ARV Therapy ->	Started	Ended	Medication ->	Started	Ended
Mono Therapy	01/03/2008	//	*Crixivan	01/03/2006	//
HAART	01/02/2003	12/31/2003		//	//
	//	//	Medication 1	01/01/2000	02/15/2000
	//	//	Medication 1	06/01/2006	//

ARV Therapy Type Medication

Is client currently on ARV Therapy? Yes No

If 'No' why not? Reason

ARV Therapy Type 04 Mono Therapy

ARV Start Date 01/03/2008

ARV End Date //

Date Asked 01/03/2008

Recent Prescription Fill Date //

Q52—Number of women who received a pelvic examination and cervical pap test during the reporting period.

To be compliant with the current clinical guidelines, all females ages 18 or older, regardless of sexual activity, should have an annual pelvic exam with a **cervical** pap test. Annual pelvic exams with cervical pap tests are also clinically indicated for female clients younger than 18 who are sexually active. Screenings may be more frequent, if clinically indicated. The correct encounters as well as their underlying services need to be selected and entered for each instance where a pelvic with cervical pap test is provided to a client.

The data for items in Q52 are drawn from the data entered for the clients in the **Services Form**.

- The specific encounter codes will vary depending on your program. However, choosing the appropriate Service Code (see below) will count the client in the correct reporting categories.
 - If you look at the “AIRS Encounters and Services Listing” report you can see all the Services associated with the RDR2 category of 52 that correspond to each Encounter/Service combo.
- Providing any one of the following Services (with the **code**) within the reporting period will add the client to the count.
 - ***GYN: Pelvic Exam and Pap Smear (289)***
 - ***GYN: Pelvic Exam with Pap Smear (290)***
 - ***Pap Smear (606*** converted from URS but is not active in AIRS)
 - ***Pelvic Exam With Pap Smear (622)*** - *Note:* Currently, the Primary Care Encounter 343 (Initial Visit (General)) and Encounter 244 (Interim Visit (General)) are not mapped to Q52 and therefore will not be included in the RDR. This will be reviewed and probably changed to be included.

Q53A--53E—Pregnancy.

A current **Pregnancy Information** record must be entered into AIRS for All HIV+ female clients who:

- Received at least one medical service during the year even if it precedes the start of the pregnancy, and who are pregnant at ANY time during the reporting year (regardless of outcome).
- Received pre-natal services in your program.
- Were referred to another program within your agency for pre-natal services.
- Were referred to a program outside of your agency for pre-natal services.
- Will be terminating her care with your program, but has indicated she is pregnant.

Remember: A new **Pregnancy Information** record must be entered for EACH pregnancy.

Client Information and Services

Client: APPLE, EVE

Pregnancy History

Confirmed Date	Delivery Date	ARV Tx
02/14/2008	07/04/2008	Yes
11/01/2004	05/01/2005	Yes
01/01/2000	06/21/2000	No

Pregnancy Status

Information Confirmed Date: 02/14/2008

Estimated Date of Confinement: 07/11/2008

Mother Received ARV Tx Prior To Pregnancy: Yes No

Pregnancy Month When Prenatal Care Started: 2

Number of Previous Pregnancies: 3

Number of Previous Live Births: 2

Pregnancy Outcome: Live Birth

Delivery Profile

Actual Delivery Date: 07/04/2008

Birth Type: Single Twin > 2 Unknown

Delivery: Vaginal Caesarian Unknown

Neonatal Status: Full Term Premature # Wks: []

Children Born HIV+ (this pregnancy): 1

Mother Received ARV Tx During Pregnancy: Yes No Declined Unknown

Mother Counseled About ARV Tx: Yes No Declined Unknown

Mother Received ARV Tx During Labor/Delivery: Yes No Declined Unknown

Client Information:
 Status: Active 01/01/2000 12:00 AM
 Intake: 01/01/2000
 Agency ID#: 1
 Full Name: Eve Adams Apple (Female)
 DOB: 01/01/1960 Age: 48
 Contact By: Discretion, Mail, Phone, Home Visit
 Social Security Number: 123-45-6789

- **Q53a – HIV+ Pregnant Women:**
 - AIRS determines whether the client was pregnant at any time during the reporting period using the available entered dates (*Actual Delivery Date, Estimated Date of Confinement, and/or Information Confirmed Date*).

- **Q53b – Trimester of Prenatal Care:**
 - If there is a number entered in the *Pregnancy Month When Prenatal Care Started* field, it will be used.
 - If the *Pregnancy Month When Prenatal Care Started* field is not entered, AIRS will look for the *Actual Delivery Date* and subtract 9 months to determine the category.
 - If the *Actual Delivery Date* is not entered, URS will subtract 9 months from the *Estimated Date of Confinement* to determine the category.

- **Q53c – Those who Received ARV Medications:**
 - Client will be counted if they have entered “Yes” for either:
 - *Mother Received ARV Tx Prior to Pregnancy* OR
 - *Mother Received ARV Tx during Pregnancy*

- **Q53d – Number of Infants Delivered:**
 - Uses the “*Birth Type*” field where AIRS will count 3 for the “>2” entry and 1 for “*Unknown*”.

- **Q53e – HIV Status of Infants Delivered:**
 - Uses the “*# Children Born HIV+ (this pregnancy)*” field.

Q54—Quality Management Program.

Go to the Agency Module, select the RDR option, and click on the **RDR Service Information Form**.

The screenshot shows the 'Agency Setup' application window. On the left, a tree view under 'Agency Options' shows 'RDR' expanded, with 'RDR Service Information Form...' selected and highlighted by a red box. The main area displays the 'RDR Service Information' form for 'RDR Service 1' (Part C Only). The 'HIV Counseling and Testing (Section 4)' section contains three questions with radio buttons for 'Yes' and 'No':
- Was HIV Counseling and Testing Provided (Q34a)? Yes No
- Were CARE Act funds used for HIV Counseling and Testing (Q35)? Yes No
- Were Partner Notification Services Offered (Q41a)? Yes No
The 'Quality Management Program (Section 5)' section is highlighted with a red box. It contains a dropdown menu for 'Type of Quality Management Program Used to Assess Service by Medical Providers' with the selected value 'Established QM Program w/ Additional Quality Standards'. A red arrow points to this dropdown menu.

ATTACHMENT 1: HIV Primary Care Services Data Form

Client Name: _____ **Date of Service** _____

Provider _____

Please check box for services provided today

AIDS defined diagnosis

Services

Screening/testing for Syphilis

Treatment for Syphilis

Treatment for Syphilis

Screening/testing for any treatable Sexually transmitted infection (STI) other than Syphilis and HIV

Treatment for an STI (other than Syphilis and HIV)

Screening/testing for Hepatitis C

Treatment for Hepatitis C

TB PPD test planted: Date _____

Result: Negative

Positive: Date _____

Chest X-Ray done: Date _____

Result: Clear

Indicates Disease

Inconclusive

Treatment/Therapy started : Date _____

Prophylaxis for latent TB

Treatment for active TB

Treatment/Therapy completed): Date _____

Please check the appropriate box to indicate whether HIV medications are presently prescribed:

None

HAART

Other (mono or dual therapy)

FEMALE CLIENTS ONLY: Please check the box if the client:

Received a pelvic exam and Pap smear today

Was pregnant - entered care during 1st 2nd 3rd trimester at delivery

Received antiretroviral medications to prevent transmission of HIV to their children

Delivered a child Delivered a child infected with HIV