

# CADR Data Relationships & Requirements

## SECTION 1: SERVICE PROVIDER INFORMATION

Items	Checked Against	Requirement
1-3, 7, 9-10		A response is required.
10	19-22	For each source of funding checked in Item 10, the amount of funding received must be reported in the corresponding line in Items 19-22.  If a funding source is NOT checked in Item 10, you should NOT enter an amount in the corresponding line in Items 19-22.
11		A response must be selected for each service listed in this item.
12	13	If you select 'Yes' in Item 12, you must select one of the check boxes in Item 13.
16		A response is required.

## SECTION 2: CLIENT INFORMATION

Items	Checked Against	Requirement
24		A value is required for all three categories in this item.
24	25	Total Unduplicated Clients in Item 24 <b>must be greater than or equal to</b> the Total New Clients in Item 25.
24	26-34	Total Unduplicated Clients reported for each HIV status category (HIV-positive only or affected) in Item 24 <b>must be equal to</b> Total # of Clients reported in each corresponding HIV status category in Items 26-34.
24	35	Total Unduplicated Clients (HIV positive) in Item 24 <b>must be greater than or equal to</b> the Total # of Unduplicated Clients (HIV Positive) reported under each service category in Item 35.  Total Unduplicated Clients (HIV affected) in Item 24 <b>must be greater than or equal to</b> the Total # of Unduplicated Clients (HIV affected) reported under each service category in Item 35.
24	56-59	Total HIV Positive Clients in Item 24 <b>must be greater than or equal to</b> Grand Total of patients reported in each table in Items 56-59.
24	65-68	Total Unduplicated Clients reported for each HIV status category in Item 24 <b>must be greater than or equal to</b> the Total # of clients reported in each corresponding HIV status category in each table in Items 65-68.

25	34	Total New Clients (HIV positive) in Item 25 <b>must be equal to</b> the # reported under the category 'client new to program' (HIV positive) in Item 34.  Total New Clients (HIV affected) in Item 25 must be equal to the # reported under the category 'client new to program' (HIV affected) in Item 34.
26	45	Clients reported for each gender category (HIV positive) in Item 26 <b>must be greater than or equal to</b> the # of HIV positive clients reported for each gender category in Item 45.
26	56-59	Clients reported for each gender category (HIV positive) in Item 26 <b>must be greater than or equal to</b> the Total # of patients reported for each gender category in each table in Items 56-59.
26	65	Total # of clients reported for each gender category in Item 26 <b>must be greater than or equal to</b> the Total # of clients reported for each gender category in Item 65.
27	56, 57, 59	Clients reported for each age category (HIV positive) in Item 27 <b>must be greater than or equal to</b> the Total # of patients reported for each age category in each table in Items 56-57 and 59.
27	65-68	Total # of clients reported for each age category in Item 27 <b>must be greater than or equal to</b> the Total # of clients reported for each age category in each table in Items 65-68.
28	56	Clients reported for each ethnicity category (HIV positive) in Item 28 <b>must be greater than or equal to</b> the Total # of patients reported for each ethnicity category in Item 56.
28	66	Total # of clients reported for each ethnicity category in Item 28 <b>must be greater than or equal to</b> the Total # of clients reported for each ethnicity category in Item 66.
29	57-58	Clients reported for each race category (HIV positive) in Item 29 <b>must be greater than or equal to</b> the Total # of patients reported for each race category in each table in Items 57-58.
29	67	Total # of clients reported for each race category in Item 29 <b>must be greater than or equal to</b> the Total # of clients reported for each race category in Item 67.

### SECTION 3: SERVICE INFORMATION

Items	Checked Against	Requirement
35		Total # of HIV positive visits (column 4a) must be greater than or equal to the Total # of unduplicated HIV positive clients (column 3a).
35		Column 3b may only be checked for # of clients unknown if no # is entered for Total # of unduplicated clients in column 3a.

35		Column 4b may only be checked for # of visits unknown if no # is entered for Total # of visits in column 4a.
35j		Total # of HIV affected visits (column 4a) must be greater than or equal to the Total # of unduplicated HIV affected clients (column 3a).
35	24	Total Unduplicated Clients (HIV positive) in Item 24 <b>must be greater than or equal to</b> the Total # of Unduplicated Clients (HIV Positive) reported under each service category in Item 35.  Total Unduplicated Clients (HIV affected) in Item 24 <b>must be greater than or equal to</b> the Total # of Unduplicated Clients (HIV affected) reported under each service category in Item 35.
35a	45	Total Unduplicated Clients in Item 45 <b>must be equal to</b> the Total # of unduplicated HIV positive clients in Item 35a.
35a	56-59	Total # of Unduplicated Clients in Item 35a <b>must be equal to</b> the Total # of patients reported in each table in Items 56-59.

#### SECTION 4: HIV COUNSELING AND TESTING

Items	Checked Against	Requirement
36, 39	40	If you select Yes in Item 36 <i>and</i> report a # in Item 39, you <b>must enter a #</b> in Item 40.
38	39	The # of individuals who received pretest counseling under each category in Item 38 <b>must be greater than or equal to</b> the # of individuals tested for HIV antibodies under each corresponding category in Item 39.
39	40	Total # of individuals tested for HIV antibodies in Item 39 <b>must be greater than or equal to</b> the # of individuals who had a positive test result in Item 40.
39	41	The # of individuals tested for HIV antibodies under each category in Item 39 <b>must be greater than or equal to</b> the # of individuals who received posttest counseling under each corresponding category in Item 41.
40	42	If you report a # in Item 40, you must enter a number in Item 42.
40	42	The # of individuals who had a positive test result in Item 40 <b>must be greater than or equal to</b> the # of individuals who tested positive but did not return for posttest counseling in Item 42.
43	44	If you select Yes in Item 43, you <b>must enter a #</b> in Item 44. If you select No in Item 43, you <b>cannot enter a #</b> in Item 44.

**SECTION 5: MEDICAL INFORMATION**

Items	Checked Against	Requirement
45	26	Clients reported for each gender category (HIV positive) in Item 26 <b>must be greater than or equal to</b> the # of HIV positive clients reported for each gender category in Item 45.
45	35a	Total Unduplicated Clients in Item 45 <b>must be equal to</b> the Total # of unduplicated HIV positive clients in Item 35a.
45	46	Total # of HIV positive clients reported in Item 45 <b>must be equal to</b> the Total # of clients reported in Item 46.
45	47-48	Total # of HIV positive clients reported in Item 45 <b>must be greater than or equal to</b> the # of clients reported in <b>each category</b> in Items 47-48.
45	49	Total # of HIV positive clients reported in Item 45 <b>must be greater than or equal to</b> the Total # of clients reported in Item 49.
45	50	Total # of Female and Transgender clients reported in Item 45 <b>must be greater than or equal to</b> the # of clients who received pelvic exams/pap smears in Item 50.
45	51-52	Total # of Female clients reported in Item 45 <b>must be greater than or equal to</b> the Total # of clients reported in each question in Items 51-52.
51	52	Total # of HIV positive pregnant clients reported in Item 51 <b>must be greater than or equal to</b> the Total # of clients listed by trimester in Item 52.
51	53	Total # of HIV positive pregnant clients reported in Item 51 <b>must be greater than or equal to</b> the # of pregnant clients who received antiretroviral medications in Item 53.
54	55	The # of children delivered to HIV positive mothers in Item 54 <b>must be greater than or equal to</b> the # of HIV positive children delivered in Item 55.

**SECTION 6: DEMOGRAPHIC TABLES/TITLE-SPECIFIC DATA FOR TITLES III AND IV**

Items	Checked Against	Requirement
56-59	24	Total HIV Positive Clients in Item 24 <b>must be greater than or equal to</b> Grand Total of patients reported in each table in Items 56-59.
56-59	26	Clients reported for each gender category (HIV positive) in Item 26 <b>must be greater than or equal to</b> the Total # of patients reported for each gender category in each table in Items 56-59.

56-57, 59	27	Clients reported for each age category (HIV positive) in Item 27 <b>must be greater than or equal to</b> the Total # of patients reported for each age category in each table in Items 56-57 and 59.
56	28	Clients reported for each ethnicity category (HIV positive) in Item 28 <b>must be greater than or equal to</b> the Total # of patients reported for each ethnicity category in Item 56.
56-59	35a	Total # of patients reported in each table in Items 56-59 <b>must be equal to</b> the Total # of Unduplicated Clients in Item 35a.
56	57-59	Total HIV positive patients reported in Item 56 <b>must be equal to</b> the Total # of HIV positive patients reported in each table in Items 57-59.
56	64	Total HIV positive patients reported in Item 56 <b>must be greater than or equal to</b> the # of HIV positive patients referred outside the EIS program in Item 64.
57-58	29	Clients reported for each race category (HIV positive) in Item 29 <b>must be greater than or equal to</b> the Total # of patients reported for each race category in each table in Items 57-58.
61	62	If you select Yes in Item 61, you <b>must enter</b> a # in Item 62.
65	26	Total # of clients reported for each gender category in Item 26 <b>must be greater than or equal to</b> the Total # of clients reported for each gender category in Item 65.
65-68	24	Total Unduplicated Clients reported for each HIV status category in Item 24 <b>must be greater than or equal to</b> the Total # of clients reported in each corresponding HIV status category in each table in Items 65-68.
65-68	27	Total # of clients reported for each age category in Item 27 <b>must be greater than or equal to</b> the Total # of clients reported for each age category in each table in Items 65-68.
65	66-68	Total HIV affected clients reported in Item 65 <b>must be equal to</b> the Total # of HIV affected clients reported in each table in Items 66-68.
66	28	Total # of clients reported for each ethnicity category in Item 28 <b>must be greater than or equal to</b> the Total # of clients reported for each ethnicity category in Item 66.
67	29	Total # of clients reported for each race category in Item 29 <b>must be greater than or equal to</b> the Total # of clients reported for each race category in Item 67.

**SECTION 7: APA INFORMATION**

Items	Checked Against	Requirement
4	5	Total Unduplicated Clients in Item 4 <b>must be greater than or equal to</b> the Total New Clients in Item 5.
4	6-9	Total Unduplicated Clients in Item 4 <b>must be equal to</b> the Total # of clients reported in Items 6-9.
4	12	Total Unduplicated Clients in Item 4 <b>must be greater than or equal to</b> the Total # of Unduplicated clients reported in each category of Item 12.
4	15	Total Unduplicated Clients in Item 4 <b>must be greater than or equal to</b> the # of clients who received each drug in Item 15.
10	15	The sum of the Total funding received from Items 10 and 11 <b>must be greater than or equal to</b> the total cost of each drug listed in Item 15.

**SECTION 8: HEALTH INSURANCE PROGRAM (HIP) INFORMATION**

Items	Checked Against	Requirement
1	2	Total Unduplicated Clients in Item 1 <b>must be greater than or equal to</b> the Total New Clients in Item 2.
1	3-6	Total Unduplicated Clients in Item 1 <b>must be equal to</b> the Total # of clients reported in Items 3-6.
1	7	Total Unduplicated Clients in Item 1 <b>must be greater than or equal to</b> the Total # of Unduplicated clients reported in each category of Item 7.