

# Validation Rule Alignment and Usage Guide

MER, DATIM, DRT Validation Rules

MER 2.0 (Version 2.8.2)

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# Abbreviations

ART	Antiretroviral Therapy
ARV	Antiretroviral
BF	Breastfeeding
CBS	Case-Based Surveillance
COD	Cause of Death
COP	PEPFAR Country Operational Plan
CQI	Continuous Quality Improvement
CRVS	Civil Registration and Vital Statistics
CXCA	Cervical Cancer
DATIM	Data for Accountability, Transparency, and Impact
DQA	Data Quality Assessment
DREAMS	Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe
DRT	Data Review Tool
DSD	Direct Service Delivery
EID	Early Infant Diagnosis
EMR	Electronic Medical Record
FBO	Faith-based Organization
FCI	Faith and Community Initiative
FY	Fiscal Year
GAM	UNAIDS Global AIDS Monitoring
HCW	Health Care Worker
HEI	HIV-Exposed Infant
HIVST	HIV Self-testing
HRH	Human Resources for Health
HTS	HIV Testing Services
IIT	Interruption in Treatment
IM	Implementing Mechanism
IP	Implementing Partner
L&D	Labor and Delivery
LTFU	Lost to Follow-up
MAT	Medication-Assisted Treatment
MER	Monitoring, Evaluation, and Reporting Indicators
MMD	Multi-Month Dispensing
MOH	Ministry of Health
PEP	Post-Exposure Prophylaxis



PEPFAR	United States President's Emergency Plan for AIDS Relief
PHIA	Public Health Impact Assessment
PITC	Provider-Initiated Testing and Counseling
PLHIV	People Living with HIV
PMTCT	Prevention of Mother-To-Child Transmission
POART	PEPFAR Oversight and Accountability Response Team
POCT	Point-Of-Care Testing
PP	Priority Populations
PrEP	Pre-Exposure Prophylaxis
PT	Proficiency Testing
PVLS	Patient Viral Load Suppression
SID	Sustainability Index
SI	Strategic Information
SPEV	Sexual, Physical, and Emotional Violence
STI	Sexually Transmitted Infection
TA-SDI	Technical Assistance for Service Delivery Improvement
TB	Tuberculosis
TX	Treatment
UNAIDS	Joint United Nations Programme on HIV/AIDS
USG	United States Government
VL	Viral Load
VLS	Viral Load Suppression
WHO	World Health Organization

# Overview

This document serves as a guide for validation and logic checks for Monitoring, Evaluation, and Reporting (MER) targets and results set using the indicators included in the MER 2.8.2 Guidance. Numerous logic checks that are applicable to multiple indicators are listed below; in addition, each indicator includes logic checks unique to the indicator to assist in data entry prior to submission. Many of these flags serve as a signal for additional review. Some OUs may have programmatic reasoning for violating particular checks, but these flags should serve as an opportunity for review in the case of data error. These validation and logic checks are not exhaustive but should serve as guides for quality control in the processing and submission of PEPFAR data.

## Data Systems Overview

This document contains the validation rules currently applicable for the following data systems. Each data system maintains validation rules on its own schedule, and this document may not align with all validation rules, if rules have been added/retired. The applicable system(s) is marked for each rule within the document.

## DATIM

Data for Accountability, Transparency, Impact (DATIM) Global serves as the primary data entry tool used by Implementing Partners and USG users to enter and analyze data. DATIM captures data for each of the PEPFAR data streams, epidemiologic, quality checks, and expenditures and Workplan budgets. DATIM is the primary tool for MER data collection. Further information about DATIM can be found in the DATIM Training & Tutorials section of DATIM Support.

The DATIM validations are primarily reviewed and incorporated during the yearly MER update process; however, validation updates could occur during numerous data periods throughout the year. The PEPFAR data calendar provides a detailed look at the various data entry and cleaning periods throughout the year. The validation rules in this document might not reflect current DATIM validation rules depending on when you are accessing the system.

Please note that DATIM validation rules are not enforced at the point of data entry, due to the aggregate nature of the MER dataset. Rather, validation rules are triggered when the user clicks the "Run Validation" or "Complete" button on the dataset they are working in.

Users are encouraged to use these functions as a primary data quality check within the MER datasets in DATIM before submitting their data for approval.

For questions surrounding DATIM Validation rules, please submit a [DATIM support ticket](#).

## DRT

The Data Review Tool (DRT), located in the Genie app, contains checks to assess several aspects of data quality that can help field teams identify potential issues and inconsistencies from the DATIM data entry process. The best time to utilize the DRT is during the open data entry periods. The DRT contains various types of data quality checks:

- MER Logic Checks
- Disaggregate Completeness
- Checks across Time Periods (comparison to Targets or the prior quarter)
- Contextual Site by IM Information
  - Note the DRT Informational-only checks labeled “SiteInfo” are not detailed in this document as no action is required per se. Users may choose to review the output in the DRT to ensure accurate data is reported for each Site by Implementing Mechanism

These data validation checks are intended to serve as a reference, and to help prioritize data cleaning efforts. The [DRT User Guide](#) is available in the [DATIM Training & Tutorials](#) section of [DATIM Support](#) to provide additional reference. Proposals to add new DRT validations, retire current validations, and update current validations are collected throughout the year by contacting GHSD. DRT validations are primarily reviewed during the MER update process; however, validation updates could occur throughout the year. The [PEPFAR data calendar](#) provides a detailed look at the various data entry and cleaning periods throughout the year. The validation rules in this document might not reflect current DRT validation rules depending on when you are accessing the system.

## Target Setting Tool

The Target Setting Tool (TST) leverages similar validation rules for MER Targets as for MER Results, as well as some non-indicator specific validation rules related to the completion and validity of the tool itself. These TST validation rules for the most recent FY26 Bridge Target Setting Tool can be accessed within the [Target Setting Tool User Guide on PEPFAR Sharepoint](#).

## MER 2.8.2 Validation Checks

The MER 2.8.2 validation checks are included in the [MER 2.8.2 Indicator Reference Guide](#), and intend to serve as logic checks to be carried out between indicators prior to data submission to Interagency. Indicator specific validations are in the *How to review for data quality*: row within the indicator reference sheet (see below).

INDICATOR CODE		
<b>Description:</b>	Name of indicator	
<b>Numerator:</b>	Name of the numerator	Descriptive information about the numerator
<b>Denominator:</b>	Name of the denominator	Descriptive information about the denominator
<b>Indicator Changes (MER 2.0 v2.8 to v2.8.2)</b>	Highlights any changes that have occurred between MER 2.0 (Version 2.8 and 2.8.2). For changes prior to 2.8.2, refer to guidance from previous years.	
<b>Reporting level:</b>	Defines the level at which the indicator is reported: facility, community, and/or above-site.	
<b>Reporting frequency:</b>	Defines the period at which the indicator is reported: quarterly, semi-annually, or annually	
<b>How to use:</b>	Defines how the data is used to monitor PEPFAR program activities.	
<b>How to collect:</b>	Defines how the data is collected (highlighting data source, issues with double counting/deduplication, and important components of data collection that ensure data quality)	
<b>How to review for data quality:</b>	Outlines specific data quality considerations for the indicator	
<b>How to calculate annual total:</b>	Defines how annual totals are calculated for the indicator at the end of the fiscal year	

The MER validations are reviewed during the MER update process. The validation rules in this document are updated with the MER validations, though differences between the MER Reference Guides and this document might occur.

## General Validation Checks

The following validation checks can be used to verify the accuracy of all indicators and should be used as general logic checks.

### Disaggregates

It is important to review the disaggregates associated with each indicator. Disaggregates must logically fit into the total findings.

- Each disaggregate must be less than or equal to the total number of findings.
  - e.g., The amount found for Females over the age of 15, cannot be more than the total findings for the indicator.
- Disaggregates should sum to the total amount of the element (e.g., Females + Males + Unspecified Sex)
  - e.g., The amount found for females, the amount found for males, and the amount found for Unspecified sex, should sum to, and not exceed the amount found for the data element in total.

### TA vs DSD vs CS

When comparing and reviewing data elements and indicators, be sure to compare similar categories of support.

- Numerators should be compared to denominators of the same category type (e.g., TA-SDI to TA-SDI).
- Disaggregates should be compared to the total amounts of the same type.

### Numerator and Denominators

For data elements and indicators that include a numerator and denominator, it is important to check that the numerator is less than or equal to the denominator.

## How to Read the Indicator Specific Validation Checks

INDICATOR CODE				
<b>Description:</b>	Name of the Indicator Code			
<b>Numerator:</b>	Name of the Numerator	Descriptive information about the Numerator		
<b>Denominator:</b>	Name of the Denominator	Descriptive information about the Denominator		
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	Validation rule as it appears in Data System	Description of the Validation Rule	System that the rule is implemented in (DRT, DATIM, MER 2.8.2.	Actions the data entry user can take to remediate the validation error.

Note: Within this document, validation rules are not differentiated between DSD and TA, or National and Subnational. When searching for a Validation Rule, do not include these identifiers in your search term. In addition, validation rules where multiple disaggregate options are available (e.g., positive/negative) are not differentiated. Do not include disaggregate values when searching. It is recommended to search by indicator.

## User Action

Each validation check is accompanied by a User Action that can be taken to correct the validation rule if necessary. Though validation rules may appear in any of the systems or references, they must be corrected in the appropriate system.

If the Validation Rule Error appears here:	Correct the Error here:
MER 2.8.2 Reference Guide	DATIM
DATIM	
DRT	

## Indicator Specific Validation Checks

AGYW_PREV		
<b>Description:</b>	Percentage of active DREAMS participants that completed at least the DREAMS primary package of evidence-based services/interventions.	
<b>Numerator:</b>	Number of active DREAMS participants that have completed at least the DREAMS primary package of services/interventions as of the end of reporting period.	<p>The numerator is the sum of the following age/sex/layering disaggregates:</p> <ol style="list-style-type: none"> <li>1. Number of active DREAMS participants that have fully completed the DREAMS primary package of services/interventions but no additional services/interventions.</li> <li>2. Number of AGYW that have fully completed the DREAMS primary package of services/interventions AND at least one secondary service/intervention</li> </ol>
<b>Denominator:</b>	Number of active DREAMS participants that have started or completed any DREAMS service/intervention as of the end of the reporting period.	<p>The denominator is the sum of the following age/sex/layering disaggregates:</p> <ol style="list-style-type: none"> <li>1. Number of active DREAMS participants that have fully completed the DREAMS primary package of services/interventions but no additional services/interventions.</li> <li>2. Number of active DREAMS participants that have fully completed the DREAMS primary package of services/interventions AND at least one secondary service/intervention.</li> </ol>

			3. Number of active DREAMS participants that have completed at least one DREAMS Service /intervention but not the full primary package. 4. Number of active DREAMS participants that have started a DREAMS service/intervention but have not yet completed it.	
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01, AGYW_PREV: AGYW_PREV_N is greater than AGYW_PREV_D	AGYW_PREV_N is greater than AGYW_PREV_D	DRT	Determine if the numerator for AGYW_PREV is greater than the denominator for AGYW_PREV due to data error or programmatic nuance. Follow up on data errors for correction.

<b>CXCA_SCRN</b>				
<b>Description:</b>	Percentage of HIV-positive women on ART screened for cervical cancer			
<b>Numerator:</b>	Number of HIV-positive women on ART screened for cervical cancer	The numerator captures the number of individual HIV-positive women on ART who received a screening test for cervical cancer.		
<b>Denominator:</b>	Number of HIV-positive women ages 15+ on ART at PEPFAR-supported sites	See <a href="#">TX_CURR</a>		
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01, CXCA_SCRN: CXCA_SCRN_N is greater than TX_CURR female 15+ results	The number of adolescent women and women on treatment (TX_CURR) should be equal to or more than CXCA_SCRN for this IM and site.	DRT	Determine if CXCA_SCRN_N is greater than TX_CURR female 15+ results due to data error or programmatic nuance. Follow up on data errors for correction

<b>CXCA_TX</b>				
<b>Description:</b>	Percentage of cervical cancer screen-positive women who are HIV-positive and on ART eligible for cryotherapy, thermocoagulation or LEEP who received cryotherapy, thermocoagulation or LEEP.			
<b>Numerator:</b>	Number of cervical cancer screen-positive women who are HIV-positive and on ART eligible for cryotherapy, thermocoagulation or LEEP who received cryotherapy, thermocoagulation or LEEP.	The numerator captures the number of individual HIV-positive women on ART who required treatment for precancerous cervical lesions, who received treatment.		
<b>Denominator:</b>	Number of cervical cancer screen-positive women who are HIV-positive and on ART eligible for cryotherapy, thermocoagulation or LEEP (I.e., CXCA_SCRN_POS)	See <a href="#">CXCA_SCRN_POS</a>		
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	CXCA_TX Numerator is greater than CXCA_SCRN numerator	The number of cervical cancer positive patients receiving treatment (CXCA_TX (N)) must be less than or equal to the number of HIV-positive women screened for cervical cancer (CXCA_SCRN (N)).	DRT	Determine if CXCA_TX is greater than CXCA_SCRN due to data error or programmatic nuance. Follow up on data errors for correction



	CXCA_TX (N, TA, Age/Sex/HIV/Tx/Visit) options 50-54, 55-59, 60-64, 65+ :OR: CXCA_TX (N, TA, Age/Sex/HIV/Tx/Visit) option 50+	Either the Fine age (50-54, 55-59, 60-64, 65+) or the aggregate age (50+) should be utilized, but not both, for CXCA_TX.	DATIM	Determine if the fine age, or aggregate age, should be used for 50+ age bands. Follow up on data errors for correction.
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DIAGNOSED_NAT / DIAGNOSED_SUBNAT				
<b>Description:</b>	Percentage of people living with HIV who know their HIV status			
<b>Numerator:</b>	Number who know their HIV Status			
<b>Denominator:</b>	Number of people with HIV (PLHIV Estimate)			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	DIAGNOSED_NAT / SUBNAT (N, NAT, Age Agg/S/HIV) TARGET :OR: DIAGNOSED_NAT (N, NAT, HIV/Sex) TARGET	Either the Aggregated AGE/SEX disaggregate, or the Sex disaggregate should be filled in, but not both, for the DIAGNOSED_NAT (N, NAT) TARGET indicator.	MER 2.8.2 DATIM	Determine if both the Coarse Age/Sex disaggregate and the sex disaggregate is entered for the TARGET for DIAGNOSED_NAT due to programmatic nuance or data error. Follow up on data errors for correction.
	DIAGNOSED_NAT /SUBNAT (N, NAT/SUBNAT, Age/Sex/HIV) :OR: DIAGNOSED_NAT /SUBNAT (N, NAT/SUBNAT, HIV/Sex)	Either the AGE/SEX disaggregate, or the Sex disaggregate should be filled in, but not both, for the DIAGNOSED_NAT (N, NAT/SUBNAT) indicator.	MER 2.8.2 DATIM	Determine if both the Coarse Age/Sex disaggregate and the sex disaggregate is entered for the TARGET for DIAGNOSED_NAT /SUBNAT due to programmatic nuance or data error. Follow up on data errors for correction.
	DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT HIVStatus) >= DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT, Age Agg/S/HIV) + DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT, HIV/Sex)	DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT, HIVStatus) must be larger than or equal to DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT, AGE Agg/S HIV) + DIAGNOSED_NAT /SUBNAT (N, NAT/SUBNAT, HIV/Sex)	MER 2.8.2 DATIM	Determine if DIAGNOSED_NAT/SUBNAT for the HIVStatus result is less than the sum of DIAGNOSED_NAT/SUBNAT Age aggregate and DIAGNOSED_NAT/SUBNAT HIV/Sex aggregate due to data error or programmatic nuance. Follow up on data errors for correction
	DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT, HIVStatus) TARGET >= DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT, Age Agg/S/HIV) TARGET + DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT, HIV/Sex) TARGET	DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT, HIVStatus) TARGET must be larger than or equal to DIAGNOSED_NAT/SUBNAT (N, NAT/SUBNAT, AGE Agg/S HIV) TARGET + DIAGNOSED_NAT /SUBNAT (N, NAT/SUBNAT, HIV/Sex) TARGET	DATIM	Determine if DIAGNOSED_NAT/SUBNAT for the HIVStatus Target is less than the sum of DIAGNOSED_NAT/SUBNAT Age aggregate and DIAGNOSED_NAT/SUBNAT HIV/Sex aggregate due to data error or programmatic nuance. Follow up on data errors for correction



HTS_INDEX				
<b>Description:</b>	Number of individuals who were identified and tested using Index testing services and received their results			
<b>Numerator:</b>	Number of individuals who were identified and tested using Index testing services and received their results		Number of individuals who were identified and tested using Index testing services and received their results	
<b>Denominator :</b>	N/A		There is no official denominator. However, this indicator represents a cascade and the collected disaggregations serve as both numerators and denominators when analyzing the index testing cascade.	
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagT_01, HTS_INDEX: Previous period results reported, but no current period results reported for HTS_INDEX	Last quarter's data included HTS_INDEX, but no current period results are reported for HTS_INDEX	DRT	Determine if accurate amounts are reported for the current reporting period for HTS_INDEX. If a period is missing, determine if it is due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagT_02, HTS_INDEX: Current period results reported, but no previous period results reported for HTS_INDEX	Current period results are reported, but last quarter did not include HTS_INDEX data	DRT	Determine if accurate amounts are reported for the previous reporting period for HTS_INDEX. If a period is missing, determine if it is due to programmatic nuance, or data error. Follow up on data errors for correction.
	HTS_INDEX (N, Index/Age/Sex/Accepted) <= HTS_INDEX (N, Index/Age/Sex/Offered)	HTS_INDEX (N, Index/Age/Sex/Accepted) must be less than or equal to HTS_INDEX (N, Index/Age/Sex/Offered)	MER 2.8.2 DATIM	Determine if the total number of individuals that accepted index testing is greater than the total number of individuals offered testing services, for HTS_INDEX (FACILITY) due to programmatic nuance, or data error. Follow up on data errors for correction.
	HTS_INDEX (N, IndexMod/Age/Sex/Accepted) <= HTS_INDEX (N, IndexMod/Age/Sex/Offered)	HTS_INDEX (N, IndexMod/Age/Sex/Accepted) must be less than or equal to HTS_INDEX (N, IndexMod/Age/Sex/Offered)	MER 2.8.2 DATIM	Determine the total number of individuals that accepted index testing, is greater than the total number of individuals offered testing services for HTS_INDEX (COMMUNITY) due to programmatic nuance, or data error. Follow up on data errors for correction.

HTS_SELF				
<b>Description:</b>	Number of individual HIV self-test kits distributed			
<b>Numerator:</b>	Number of individual HIV self-test kits distributed		This indicator aims to monitor trends in the distribution of HIV self-test kits within a country at the lowest distribution point.	
<b>Denominator :</b>	N/A		N/A	
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>

	HTS_SELF (N, HIVSelfTestUser) <= HTS_SELF (N, Age /Sex/HIVSelfTest) option Unassisted	HTS_SELF (N, HIVSelfTestUser) must be less than or equal to HTS_SELF (N, Age/Sex/HIVSelfTest)	MER 2.8.2 DATIM	Determine if the number of self-test kits by type (Direct Testing/Unassisted Testing) is less than the total number of kits distributed in total due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagD_02, HTS_SELF: HTS_SELF Unassisted Self-Testing Disaggregates greater than the sum of HTS_SELF Age/Sex/HIVSelfTest with the option Unassisted	HTS_SELF data for Unassisted Self-Testing (HIVSelfTestUser) disaggregates (without age) are greater than the HTS_SELF data for Age, Sex and HIV Self Test (Unassisted)	DRT	Ensure accurate data is entered for both HTS_SELF data for Unassisted Self-Testing (HIVSelfTestUser) disaggregates (without age) and HTS_SELF data for Age, Sex and HIV Self Test (Unassisted)

## HTS\_TST (including HTS\_TST\_POS) - Path 1

<b>Description:</b>	Number of individuals who received HIV testing services (HTS) and received their test results.			
<b>Numerator:</b>	Number of individuals who received HIV testing services and received their test results	The numerator captures the number of individuals who received HIV Testing Services (HTS) and received their test results. At a minimum, this means the person was tested for HIV and received their HIV test results		
<b>Denominator:</b>	N/A			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagT_01, HTS_TST: Targets reported, but no current period results for HTS_TST	Targets reported, but there is no data reported in this quarter for HTS_TST results	DRT	Determine if accurate Targets and results are reported for HTS_TST.
	FlagT_02, HTS_TST: Current period results reported, but no targets reported for HTS_TST	Current period results are reported for HTS_TST, but no targets were reported for HTS_TST	DRT	Determine if Targets and results are reported for HTS_TST.
	FlagT_03, HTS_TST: Previous period results reported, but no current period results reported for HTS_TST	Last quarter's data included HTS_TST, but no current period results are reported for HTS_TST	DRT	Determine if accurate results were entered the previous and current quarters for HTS_TST
	FlagT_04, HTS_TST: current period results reported, but no previous period results reported for HTS_TST	Data is reported this quarter for HTS_TST results, but was not reported last quarter	DRT	Determine if accurate results were entered the previous and current quarters for HTS_TST
	HTS_TST (N, DSD, Age/Sex/Result) :OR: HTS_TST (N, DSD, Path 2 disaggregates including Inpat, Pediatric, MN, PMTCT, STI, EW, OtPITC, SNS, VCT, TB_STAT, HTS_INDEX, and PMTCT_STAT)	Users must report data for HTS_TST Path 1 (Age/Sex/Result) or HTS_TST Path 2 (disaggregates such as Inpat, Pediatric, MN, PMTCT, STI, EW, OtPITC, SNS, VCT, TB_STAT, HTS_INDEX, and	MER 2.8.2	Determine if data is reported for HTS_TST Path 1 or HTS_TST Path 2, but not both, per site.

		PMTCT_STAT), but not both. This ensures exclusivity between the two paths.		
	HTS_TST (N, (Each Applicable Modality) /Age/Sex/Result) :OR: HTS_TST (N, (Each Applicable Modality)/Age Agg/Sex/Result)	Either the Fine Age disaggregate (Age) or Aggregate Age disaggregate (Age Agg) should be entered, but not both, for HTS_TST (for each modality)	DATIM MER 2.8.2	Determine if both the Fine Age Disaggregate (<1, 1-4, etc.) and the coarse disaggregate (<15 or 15+) are filled out due to programmatic nuance, or data error. Follow up on data errors for correction.
	HTS_TST (N, PMTCT P/Age/Sex/Result) TARGET <= PMTCT_STAT (N, Age/Sex/Known NewResult) TARGET	HTS_TST (N, PMTCT P/Age/Sex/Result) TARGET must be less than or equal to PMTCT_STAT (N, Age/Sex/KnownNewResult) TARGET	DATIM MER 2.8.2	Determine if the results entered for the HTS_TST, PMTCT (Post ANC1) Modality, for the age/sex result (Positive, Negative) disaggregate are more than the amount entered for the PMTCT_STAT (numerator) age/sex result (Known Positive, Newly Tested Positives, New Negatives) disaggregate Target due to programmatic nuance, or data error. Follow up on data errors for correction.

HTS_TST (including HTS_TST_POS) - Path 2				
Description:	Number of individuals who received HIV testing services (HTS) and received their test results.			
Numerator:	Number of individuals who received HIV testing services and received their test results	The numerator captures the number of individuals who received HIV Testing Services (HTS) and received their test results. At a minimum, this means the person was tested for HIV and received their HIV test results		
Denominator:	N/A			
Validation Check:	Validation Rule	Layperson's Definition of Validation Rule	Applicable System	User Action
	FlagT_01, HTS_TST: Targets reported, but no current period results for HTS_TST	Targets reported, but there is no data reported in this quarter for HTS_TST results	DRT	Determine if accurate Targets and results are reported for HTS_TST.
	FlagT_02, HTS_TST: Current period results reported, but no targets reported for HTS_TST	Current period results are reported for HTS_TST, but no targets were reported for HTS_TST	DRT	Determine if Targets and results are reported for HTS_TST.
	FlagT_03, HTS_TST: Previous period results reported, but no current period results reported for HTS_TST	Last quarter's data included HTS_TST, but no current period results are reported for HTS_TST	DRT	Determine if accurate results were entered the previous and current quarters for HTS_TST

	FlagT_04, HTS_TST: current period results reported, but no previous period results reported for HTS_TST	Data is reported this quarter for HTS_TST results, but was not reported last quarter	DRT	Determine if accurate results were entered the previous and current quarters for HTS_TST
	HTS_TST (N, DSD, Age/Sex/Result) :OR: HTS_TST (N, DSD, Path 2 disaggregates including Inpat, Pediatric, MN, PMTCT, STI, EW, OtPITC, SNS, VCT, TB_STAT, HTS_INDEX, and PMTCT_STAT)	Users must report data for HTS_TST Path 1 (Age/Sex/Result) or HTS_TST Path 2 (disaggregates such as Inpat, Pediatric, MN, PMTCT, STI, EW, OtPITC, SNS, VCT, TB_STAT, HTS_INDEX, and PMTCT_STAT), but not both. This ensures exclusivity between the two paths.	MER 2.8.2	Determine if data is reported for HTS_TST Path 1 or HTS_TST Path 2, but not both, per site.
	HTS_TST (N, (Each Applicable Modality) /Age/Sex/Result) :OR: HTS_TST (N, (Each Applicable Modality)/Age Agg/Sex/Result)	Either the Fine Age disaggregate (Age) or Aggregate Age disaggregate (Age Agg) should be entered, but not both, for HTS_TST (for each modality)	DATIM MER 2.8.2	Determine if both the Fine Age Disaggregate (<1, 1-4, etc.) and the coarse disaggregate (<15 or 15+) are filled out due to programmatic nuance, or data error. Follow up on data errors for correction.
	HTS_TST (N, PMTCT P/Age/Sex/Result) TARGET <= PMTCT_STAT (N, Age/Sex/Known NewResult) TARGET	HTS_TST (N, PMTCT P/Age/Sex/Result) TARGET must be less than or equal to PMTCT_STAT (N, Age/Sex/KnownNewResult) TARGET	DATIM MER 2.8.2	Determine if the results entered for the HTS_TST, PMTCT (Post ANC1) Modality, for the age/sex result (Positive, Negative) disaggregate are more than the amount entered for the PMTCT_STAT (numerator) age/sex result (Known Positive, Newly Tested Positives, New Negatives) disaggregate Target due to programmatic nuance, or data error. Follow up on data errors for correction.

OVC_HIVSTAT		
<b>Description:</b>	Percentage of orphans and vulnerable children (<18 years old and 18-20 years old) enrolled in the OVC Comprehensive program with HIV status reported to implementing partner.	
<b>Numerator:</b>	Number of orphans and vulnerable children (<18 years old and 18-20 years old) enrolled in the OVC Comprehensive program with HIV status reported, disaggregated by HIV status.	Data sources for this indicator include HIV test results that are self-reported by OVC (or their caregivers), results of HIV Risk Assessments conducted by implementing partners, registers, referral forms, client records, or other confidential case management and program monitoring tools that track those in treatment and care. Partners are encouraged to confirm HIV and ART status through clinical record confirmation wherever possible.
<b>Denominator:</b>	Number of orphans and vulnerable children reported under <a href="#">OVC SERV</a> "OVC Comprehensive" disaggregate (<18 years old, active and graduated)	The denominator is not collected again as part of this indicator, but is collected under the "OVC Comprehensive" disaggregate of OVC_SERV.

	Validation Rule	Layperson's Definition of Validation Rule	Applicable System	User Action
<b>Validation Check:</b>	FlagB_01, OVC_SERV: OVC_SERV <18 is less than OVC_HIVSTAT_N	OVC_SERV data disaggregated by Age/Sex/ProgramStatus should be equal to OVC_HIVSTAT Numerator data	DRT	Determine if the number entered for OVC_SERV (ages less than 18) is not equal to the number entered for OVC_HIVSTAT Numerator due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_02, OVC_SERV: OVC_SERV <18 is greater than OVC_HIVSTAT_N	OVC_SERV Age/Sex/Program data should be equal to OVC_HIVSTAT Numerator data	MER 2.8.2 DRT	Determine if the number entered for OVC_SERV (ages less than 18) is not equal to the number entered for OVC_HIVSTAT Numerator due to programmatic nuance, or data error. Follow up on data errors for correction.
	OVC_HIVSTAT (N, ReportedStatus) options <1, 1-4, 5-9, 10-14, 15-17, 18-20 <= OVC_SERV (N, Age/Sex/ProgramStatus) options Unknown Age, <1, 1-4, 5-9, 10-14, 15-17, 18-20 + OVC_SERV (N)	OVC_HIVSTAT (N, Reported Status) must be less than or equal to OVC_SERV (N/ProgramStatus)	DATIM	Determine if the number entered for OVC_HIVSTAT reported status is greater than OVC_SERV program status due to programmatic nuance, or data error. Follow up on data errors for correction.

<b>OVC_SERV</b>				
<b>Description:</b>	Number of beneficiaries served by PEPFAR OVC programs for children and families affected by HIV			
<b>Numerator:</b>	Number of beneficiaries served by PEPFAR OVC programs for children and families affected by HIV		The numerator is the sum of the following Program Participation Status disaggregates: 1. OVC Comprehensive Active and Graduated beneficiaries (children and caregivers) 2. DREAMS beneficiaries 3. OVC Preventive beneficiaries	
<b>Denominator:</b>	N/A		N/A	
<b>Validation Check:</b>	Validation Rule	Layperson's Definition of Validation Rule	Applicable System	User Action
	FlagB_01, OVC_SERV: OVC_SERV <18 is less than OVC_HIVSTAT_N	OVC_SERV data disaggregated by Age/Sex/ProgramStatus should be equal to OVC_HIVSTAT Numerator data	DRT	Determine if the number entered for OVC_SERV (ages less than 18) is not equal to the number entered for OVC_HIVSTAT Numerator due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_02, OVC_SERV: OVC_SERV <18 is greater than OVC_HIVSTAT_N	OVC_SERV Age/Sex/Program data should be equal to OVC_HIVSTAT Numerator data	MER 2.8.2 DRT	Determine if the number entered for OVC_SERV (ages less than 18) is not equal to the number entered for OVC_HIVSTAT Numerator due to programmatic nuance, or data error. Follow up on data errors for correction.

# PMTCT\_ART

<b>Description:</b>	Percentage of HIV-positive pregnant women who received ART to reduce the risk of mother-to-child-transmission (MTCT) during pregnancy			
<b>Numerator:</b>	Percentage of HIV-positive pregnant women who received ART to reduce the risk of mother-to-child-transmission during pregnancy	Auto-Calculated indicator in DATIM, sum of: 1) New on life-long ART 2) Already on lifelong ART at the beginning of the current pregnancy		
<b>Denominator:</b>	PMTCT_STAT_POS (See <a href="#">PMTCT_STAT</a> )	Collected as part of PMTCT_STAT. Calculated indicator in DATIM, sum of: 1) New Positives, 2) Known Positive at entry (see PMTCT_STAT, Disaggregate Group Positivity Status for more details)		
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_02, PMTCT_ART: PMTCT_ART Already on ART is greater than PMTCT_STAT_POS Known Status	PMTCT_ART data for the disagg Already on ART at the beginning of current pregnancy is greater than the data for PMTCT_STAT for Known Positives Status	DRT	Determine if the total number of individuals entered for the 'Already on ART' regime type disaggregate for PMTCT_ART is less than the number of individuals entered for the 'Known Positives' disaggregate for PMTCT_STAT due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_03, PMTCT_ART: PMTCT_ART N is greater than PMTCT_STAT_POS (PMTCT_ART D)	PMTCT_ART N is greater than PMTCT_STAT_POS (PMTCT_ART D)	DRT	Determine if the total number of individuals entered for PMTCT_ART (numerator) is less than the number of individuals entered for the PMTCT_STAT_POS due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagT_01, PMTCT_ART: Targets reported, but no current period results for PMTCT_ART	Targets reported, but there is no data reported in this quarter for PMTCT_ART results	DRT	Ensure accurate amounts are reported for both Targets and Results for the current reporting period for PMTCT_ART.
	FlagT_02, PMTCT_ART: Current period results reported, but no targets reported for PMTCT_ART	Current period results are reported for PMTCT_ART results, but no targets were reported for PMTCT_ART	DRT	Ensure accurate amounts are reported for both Targets and Results for the current reporting period for PMTCT_ART.
	FlagT_03, PMTCT_ART: Previous period results reported, but no current period results reported for PMTCT_ART	Last quarter's data included PMTCT_ART, but no current period results are reported for PMTCT_ART	DRT	Ensure accurate amounts are reported for Results for the current reporting period for PMTCT_ART.
	FlagT_04, PMTCT_ART: Current period results reported, but no previous period results reported for PMTCT_ART	Current period results are reported, but last quarter did not include PMTCT_ART data	DRT	Ensure accurate amounts are reported for Results for the current and previous reporting periods for PMTCT_ART.



	FlagB_04, PMTCT_ART: PMTCT_ART greater than TX_CURR	PMTCT_ART should be less than or equal to TX_CURR.	MER 2.8.2 DRT	Determine if the total number of individuals entered for PMTCT_ART (numerator) is less than the number of individuals entered for the TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction.
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PMTCT_ART_NAT / PMTCT_ART_SUBNAT				
<b>Description:</b>	Percentage of HIV-positive pregnant women who received ART to reduce the risk of mother-to-child-transmission (MTCT) during pregnancy			
<b>Numerator:</b>	Percentage of HIV-positive pregnant women who received ART to reduce the risk of mother-to-child-transmission during pregnancy			
<b>Denominator:</b>	Estimated number of HIV-positive pregnant women			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	PMTCT_ART_NAT/SUBNAT (N, NAT/SUBNAT, NewExistArt) <= PMTCT_ART_NAT/SUBNAT (D, NAT/SUBNAT)	PMTCT_ART_NAT (N, NAT/SUBNAT, NewExistArt) must be less than or equal to PMTCT_ART_NAT/SUBNAT (D, NAT/SUBNAT)	MER 2.8.2 DATIM	Determine if the amount entered for each disaggregate (New on ART/Already on ART) is greater than the total number entered for 'Estimated number of HIV infected pregnant Women' for PMTCT_ART_NAT/SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.

PMTCT_EID				
<b>Description:</b>	Percentage of infants born to women living with HIV who received a sample collected for a virologic test by 12 months of age			
<b>Numerator:</b>	Number of infants who had a first virologic HIV test (sample collected) by 12 months of age during the reporting period			
<b>Denominator:</b>	<i>PMTCT_STAT_POS + HTS_TST_POS Post ANC modality</i>		Calculated indicator, sum of: PMTCT_STAT POS: 1) Newly Tested Positive, 2) Known Positive at entry (see PMTCT_STAT reference sheet for more details) and HTS_TST_POS: Post ANC1: Pregnancy/L&D/BF modality (see HTS_TST reference sheet for more details)	
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01, PMTCT_EID: PMTCT_EID_N is greater than [PMTCT_STAT_POS + HTS_TST_POS (PostANC1)] (PMTCT_EID Proxy D)	PMTCT_EID Numerator is greater than the total of PMTCT_STAT_POS plus the total of HTS_TST modality for Post ANC1 – only positives (PMTCT_EID Proxy D)	DRT	Determine if the total number (numerator) entered for PMTCT_EID is greater than sum of the numerator from PMTCT_STAT_POS and the subtotal from HTS_TST Post ANC1 Modality due to programmatic nuance, or data error. Follow up on data errors for correction.

	FlagT_03, PMTCT_EID: Previous period results reported, but no current period results reported for PMTCT_EID	Last quarter's data included PMTCT_EID, but no current period results are reported for PMTCT_EID	DRT	Ensure accurate amounts are reported for Results for the current and previous reporting periods for PMTCT_EID.
	FlagT_04, PMTCT_EID: Current period results reported, but no previous period results reported for PMTCT_EID	Current period results are reported, but last quarter did not include PMTCT_EID data	DRT	Ensure accurate amounts are reported for Results for the current and previous reporting periods for PMTCT_EID.

PMTCT_FO				
<b>Description:</b> Percentage of final outcomes among HIV exposed infants registered in a birth cohort				
<b>Numerator:</b>	Number of HIV-exposed infants with a documented outcome by 18 months of age disaggregated by outcome type.		Calculated indicator in DATIM, sum of: HIV-infected, HIV-uninfected, HIV-final status unknown, died without status known. It is recommended to wait to collect the 18 month visit outcomes until the patient is 24 months old for the following reasons: 1) this allows for children who present several months late to their 18 month visit to be included in the numerator and 2) cohort reporting is easiest when monthly reporting by facilities is used and where the birth month and the reporting month are the same calendar month (i.e., for infants born in January 2012, their 24 month reporting month would be January 2014, rather than using the 18 month reporting month of July 2013).	
	<b>Denominator:</b> Number of HIV-exposed infants who were born 24 months prior to the reporting period and registered in the birth cohort.		Only those HIV-exposed infants registered in the birth cohort at any time between 0 and 18 months of age (including transfers-ins) who were born 24 months prior to the reporting period are included in the denominator.	
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	PMTCT_FO (N, Outcome) v2 <= PMTCT_FO (D)	PMTCT_FO (N, Outcome) v2 must be less than or equal to PMTCT_FO (D)	MER 2.8.2 DATIM	Determine if each outcome disaggregate (HIV-infected, HIV-uninfected, HIV-final status unknown, Died without status known) is greater than the Denominator (Number of HIV-exposed infants who were born 24 months prior to reporting period) for PMTCT_FO due to programmatic nuance, or data error. Follow up on data errors for correction.

PMTCT_HEI (PMTCT_HEI_POS_ART)	
<b>Description:</b>	Number of HIV-exposed infants, with a virologic HIV test result returned in the reporting period, whose diagnostic sample was collected by 12 months of age.



<b>Numerator:</b>	Number of HIV-exposed infants with a virologic HIV Test returned in the reporting period, whose diagnostic sample was collected by 12 months of age.	This indicator includes negative results and the first positive test (excludes confirmatory testing). It includes 3 required sets of disaggregations: (1) disaggregation by result outcome (positive or negative), (2) disaggregation by age based on the infant's age at specimen collection for virologic testing; (3) Confirmation of ART initiation, also disaggregated by age at specimen collection.		
<b>Denominator:</b>	N/A			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_02, PMTCT_EID: Is PMTCT_HEI_POS greater than PMTCT_EID	Is PMTCT_HEI_POS greater than PMTCT_EID	DRT	Ensure that the amount entered for PMTCT_HEI_POS is less than the amount entered for PMTCT_EID
	FlagB_02, PMTCT_HEI_POS: PMTCT_HEI_POS_N reported (not null) and PMTCT_EID_N not reported (null).	PMTCT_HEI_POS_ART Positive Infants on ART data is reported but PMTCT_EID is not reported. HIV-Exposed infants, positive and on ART (PMTCT_HEI_POS_ART) should have a first test (PMTCT_EID)	DRT	Ensure accurate Results are reported for the current reporting period for PMTCT_EID and PMTCT_HEI_POS_ART
	FlagT_03, PMTCT_HEI: Previous results reported, but no current results reported for PMTCT_HEI	Last quarter's data included PMTCT_HEI, but no current period results are reported for PMTCT_HEI	DRT	Ensure accurate Results are reported for the current and previous reporting periods for PMTCT_HEI.
	FlagT_04, PMTCT_HEI: Current period results reported, but no previous period results reported for PMTCT_HEI	Current period results are reported, but last quarter did not include PMTCT_HEI data	DRT	Ensure accurate Results are reported for the current and previous reporting periods for PMTCT_HEI.
	FlagB_04 PMTCT_HEI_POS_ART (N, Age/HIVStatus/ARTStatus) <= PMTCT_HEI_POS (N, Age/HIVStatus)	PMTCT_HEI_POS_ART (N, Age/HIVStatus/ARTStatus) must be less than or equal to PMTCT_HEI_POS (N, Age/HIVStatus)	MER 2.8.2 DATIM DRT	Determine if the total number entered for the ART Status (Positive, Confirmed Initiated ART) disaggregate, is greater than the total number entered for the Virologic Sample collection disaggregate (Positive) due to programmatic nuance, or data error. Follow up on data errors for correction. This rule is to be applied within age disaggregates.

## PMTCT\_STAT (including PMTCT\_STAT\_POS)

<b>Description:</b>	Percentage of pregnant women with known HIV status at antenatal care (includes those who already knew their HIV status prior to ANC)	
<b>Numerator:</b>	Number of pregnant women with known HIV status at first antenatal care visit (ANC1) (includes those who already knew their HIV status prior to ANC1)	The numerator is the sum of the following two data elements: 1. The number of women with a previously known HIV status (both known HIV positive and known negative) attending their first ANC visit (ANC1) for a new pregnancy over the last reporting period. 2. The number of women attending ANC1 who were

<b>Denominator :</b>	Number of new ANC clients in reporting period		N/A	
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01, PMTCT_STAT: PMTCT_STAT_N reported (not null) and PMTCT_STAT_D not reported (null)	PMTCT_STAT_N results are reported and PMTCT_STAT_D results are not reported	DRT	Ensure accurate Results are reported for both the numerator and denominator for PMTCT_STAT.
	FlagB_02, PMTCT_STAT: PMTCT_STAT_D reported (not null) and PMTCT_STAT_N not reported (null)	PMTCT_STAT_D results are reported and PMTCT_STAT_N results are not reported	DRT	Ensure accurate Results are reported for both the numerator and denominator for PMTCT_STAT.
	FlagB_04, PMTCT_STAT: PMTCT_STAT_N greater than PMTCT_STAT_D	PMTCT_STAT_N results for this quarter are greater than PMTCT_STAT_D results for this quarter	DRT	Ensure the total number entered for PMTCT_STAT Numerator is less than or equal to the total number entered for PMTCT_STAT Denominator
	FlagT_01, PMTCT_STAT: Targets reported, but no current period results for PMTCT_STAT	Targets reported, but there is no data reported in this quarter for PMTCT_STAT numerator results	DRT	Ensure accurate Targets and Results are reported for the current reporting period for PMTCT_STAT numerator..
	FlagT_02, PMTCT_STAT: Current period results reported, but no targets reported for PMTCT_STAT	Current period results are reported for PMTCT_STAT numerator, but no targets reported for PMTCT_STAT numerator	DRT	Ensure accurate Targets and Results are reported for the current reporting period for PMTCT_STAT numerator.
	FlagT_03, PMTCT_STAT: Previous period results reported, but no current period results reported for PMTCT_STAT	Last quarter's data included PMTCT_STAT numerator, but no current period results are reported for PMTCT_STAT numerator	DRT	Ensure accurate Results are reported for the current and previous reporting periods for PMTCT_STAT numerator.
	FlagT_04, PMTCT_STAT: Current period results reported, but no previous period results reported for PMTCT_STAT	Current period results are reported, but last quarter did not include PMTCT_STAT numerator data	DRT	Ensure accurate Results are reported for the current and previous reporting periods for PMTCT_STAT numerator.
	PMTCT_STAT (N, Age/Sex/KnownNewResult) TARGET <= PMTCT_STAT (D, Age/Sex) TARGET	PMTCT_STAT (N, Age/Sex/KnownNewResult) TARGET must be less than or equal to PMTCT_STAT (D, Age/Sex) TARGET	MER 2.8.2 DATIM	Determine if the number entered for each age/sex disaggregate for the PMTCT_STAT Numerator status section, is greater than or equal to the number entered related age/sex within PMTCT_STAT Denominator due to programmatic nuance, or data error. Follow up on data errors for correction.

## PMTCT\_STAT\_NAT / SUBNAT

**Description:** Percentage of pregnant women with known HIV status

<b>Numerator:</b>	Number of pregnant women attending antenatal clinics (ANC) and/or had a facility-based delivery and were tested for HIV during pregnancy, or already knew they were HIV positive			
<b>Denominator :</b>	Number of pregnant women who attended ANC or had a facility-based delivery in the past 12 months			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	PMTCT_STAT_NAT/SUBNAT (N, NAT/SUBNAT) <= PMTCT_STAT_NAT/SUBNAT (D, NAT/SUBAT)	PMTCT_STAT_NAT/SUBNAT (N) must be less than or equal to PMTCT_STAT_NAT/SUBNAT (D)	MER 2.8.2 DATIM	Determine if the total number entered for the PMTCT_STAT_NAT/SUBNAT numerator (Number of Pregnant women with known HIV Status) is greater than the denominator (Number of new ANC clients in a reporting period) due to programmatic nuance, or data error. Follow up on data errors for correction.
	PMTCT_STAT_NAT/SUBAT (N, NAT/SUBAT) TARGET <= PMTCT_STAT_NAT/SUBAT (D, NAT/SUBAT) TARGET	PMTCT_STAT_NAT/SUBNAT (N) TARGET must be less than or equal to PMTCT_STAT_NAT/SUBNAT (D) TARGET	MER 2.8.2 DATIM	Determine if the total number entered for the PMTCT_STAT_NAT/SUBNAT TARGET numerator (Number of Pregnant women with known HIV Status) is greater than the TARGET denominator (Number of new ANC clients in a reporting period) due to programmatic nuance, or data error. Follow up on data errors for correction.
	PMTCT_STAT_NAT/SUBAT (N, NAT/SUBAT, KnownPosNeg) <= PMTCT_STAT_NAT/SUBAT (N, NAT/SUBAT)	PMTCT_STAT_NAT (N, KnownPosNeg) must be less than or equal to PMTCT_STAT_NAT /SUBNAT (N)	MER 2.8.2 DATIM	Determine if the number entered for each Numerator Disaggregate (Known Positives, New Positives, New Negatives) is greater than the total number entered for the numerator for PMTCT_STAT_NAT /SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.

## POST\_RESP

<b>Description:</b>	Number of people receiving post-sexual, physical and emotional violence (SPEV) clinical care based on the minimum package			
<b>Numerator:</b>	Number of people receiving post-sexual, physical and emotional violence (SPEV) clinical care based on the minimum package	This indicator DOES NOT include post-sexual, physical and emotional violence (SPEV) prevention activities or non-clinical community-based response.		
<b>Denominator:</b>	N/A			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	POST_RESP(N, Age/Sex/PEP) <= POST_RESP (N, Age/Sex/ViolenceType)	The number of individuals receiving PEP (POST_RESP (N, Age/Sex/PEP)) must be less than or equal to the	MER 2.8.2 DATIM	Determine if POST_RESP for the PEP disaggregate is greater than POST_RESP for the Sexual Violence disaggregate is due to

	v2 option Sexual Violence (Post-Response Care)	number of individuals identified as receiving post-response care (POST_RESP (N, Age/Sex/ViolenceType))		data error or programmatic nuance. Follow up on data errors for correction.
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PrEP_CT				
<b>Description:</b>	Number of individuals, excluding those newly enrolled, that return for a follow-up visit or re-initiation visit to receive pre-exposure prophylaxis (PrEP) to prevent HIV during the reporting period.			
<b>Numerator:</b>	Number of individuals that returned for a follow-up or re-initiation visit to receive PrEP during the reporting period.	N/A		
<b>Denominator:</b>	N/A	N/A		
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_02 PrEP_CT_N_test result is greater than PrEP_CT_N	PrEP_CT Test Result disaggregate must be less than or equal to PrEP_CT numerator.	MER 2.8.2 DATIM DRT	Determine if the total number entered for the Test Result disaggregate for PrEP_CT is greater than the numerator for PrEP_CT due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagT_04, PrEP_CT: current period results reported, but no previous period results reported for PrEP_CT	Last quarter's data included PMTCT_STAT numerator, but no current period results are reported for PrEP_CT data	DRT	Ensure accurate results are reported for the current and previous reporting periods for PrEP_CT.
	FlagT_03, PrEP_CT: previous period results reported, but no current period results reported for PrEP_CT	Current period results are reported, but last quarter did not include PrEP_CT data	DRT	Ensure accurate results are reported for the current and previous reporting periods for PrEP_CT.
	PrEP_CT (N,DSD, Pregnant/Breastfeeding) options is less than or equal to PrEP_CT (N, DSD, Age/Sex).	The total number of individuals reported under the Pregnant/Breastfeeding disaggregate for PrEP_CT must not exceed the total number of individuals reported under the Age/Sex disaggregate for PrEP_CT.	MER 2.8.2	Check whether the total number entered for the Pregnant/Breastfeeding disaggregate exceeds the total number entered for the Age/Sex disaggregate. If the discrepancy is due to programmatic nuances, document the justification. If it is a data entry error, follow up with the reporting team to correct the data.
	FlagD_02, PrEP_CT: PrEP_CT Reported (Not Null) but PrEP_CT Test Result not reported (Null)	PrEP_CT Age/Sex data is reported but PrEP_CT Test Result data is not reported.	DRT	Determine if the test result disaggregate for PrEP_CT was not entered, when PrEP_CT Age/Sex data was entered due to programmatic nuance, or data error. Follow up on data errors for correction.

PrEP_NEW		
<b>Description:</b>	Number of individuals who were newly enrolled on oral antiretroviral pre-exposure prophylaxis (PrEP) to prevent HIV infection in the reporting period	
<b>Numerator:</b>	Number of individuals who were newly enrolled on oral antiretroviral pre-exposure prophylaxis (PrEP) to prevent HIV infection in the reporting period.	

<b>Denominator:</b>	N/A		N/A	
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagT_01, PrEP_NEW: Targets reported, but no current period results for PrEP_NEW	Targets reported, but there is no data reported in this quarter for PrEP_NEW results	DRT	Ensure accurate Results and Targets are reported for the current reporting period for PrEP_NEW.
	FlagT_02, PrEP_NEW: Current period results reported, but no targets reported for PrEP_NEW	Current period results are reported for PrEP_NEW, but no targets reported for PrEP_NEW	DRT	Ensure accurate Results and Targets are reported for the current reporting period for PrEP_NEW.
	FlagT_03, PrEP_NEW: Previous period results reported, but no current period results reported for PrEP_NEW	Last quarter's data included PrEP_NEW, but no current period results are reported for PrEP_NEW	DRT	Ensure accurate Results and Targets are reported for the current and previous reporting periods for PrEP_NEW.
	FlagT_04, PrEP_NEW: Current period results reported, but no previous period results reported for PrEP_NEW	Current period results are reported, but last quarter did not include PrEP_NEW data	DRT	Ensure accurate Results are reported for the current and previous reporting periods for PrEP_NEW.
	PrEP_NEW (N, TA, Pregnant/Breastfeeding) options must be less than or equal to PrEP_NEW (N, TA, Age/Sex) v2 options.	The total number of individuals reported under the Pregnant/Breastfeeding disaggregate for PrEP_NEW (Technical Assistance) must not exceed the total number of individuals reported under the Age/Sex disaggregate for PrEP_NEW (Technical Assistance).	MER 2.8.2, DATIM	Determine if the number entered for the Pregnant/Breastfeeding disaggregate exceeds the total number entered for the Age/Sex disaggregate. If the discrepancy is due to programmatic nuances, document the justification. If it is a data entry error, follow up with the reporting team to correct the data.
	PrEP_NEW (N, DSD, Pregnant/Breastfeeding) options must be less than or equal to PrEP_NEW (N, DSD, Age/Sex) v2 options.	The total number of individuals reported under the Pregnant/Breastfeeding disaggregate for PrEP_NEW (Direct Service Delivery) must not exceed the total number of individuals reported under the Age/Sex disaggregate for PrEP_NEW (Direct Service Delivery).	MER 2.8.2, DATIM	Determine if the number entered for the Pregnant/Breastfeeding disaggregate exceeds the total number entered for the Age/Sex disaggregate. If the discrepancy is due to programmatic nuances, document the justification. If it is a data entry error, follow up with the reporting team to correct the data.

<b>TB_ART</b>				
<b>Description:</b>	Proportion of HIV-positive new and relapsed TB cases on ART during TB treatment.			
<b>Numerator:</b>	Number of TB cases with documented HIV-positive status who start or continue ART during the reporting period			
<b>Denominator:</b>	TB_STAT_POS (see <u><a href="#">TB_STAT</a></u> ): Number of registered TB cases with documented HIV positive status during the reporting period.			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>

	FlagT_01, TB_ART: Targets reported, but no current period results for TB_ART	Targets reported, but there is no data reported in this quarter for TB_ART results	DRT	Ensure accurate Results and Targets reported for the current reporting periods for TB_ART.
	FlagT_02, TB_ART: Current period results reported, but no targets reported for TB_ART	Current period results are reported for TB_ART, but no targets reported for TB_ART	DRT	Ensure accurate Results are reported for the current reporting period for TB_ART and TX_CURR
	FlagT_03, PrEP_NEW: Previous period results reported, but no current period results reported for PrEP_NEW	Last quarter's data included TB_ART, but no current period results are reported for TB_ART	DRT	Ensure accurate Results are reported for the current and previous reporting periods for TB_ART.
	FlagT_04, TB_ART: Previous period results reported, but no current period results reported for TB_ART	Current period results are reported, but last quarter did not include TB_ART data	DRT	Ensure accurate Results are reported for the current and previous reporting periods for TB_ART.
	FlagB_04, TB_ART: TB_ART_N greater than TB_ART_D (TB_STAT_POS)	TB_ART numerator is greater than TB_STAT for all Positives (TB_ART_D Proxy)	MER 2.8.2 DRT	Determine if the result entered for TB_ART numerator is greater than TB_STAT Positives data (TB_ART_D) due to programmatic nuance, or data error. Follow up on data error.
	FlagB_06, TB_ART: TB_ART reported (not null) and TX_CURR_N not reported (null)	TB_ART is reported but TX_CURR data is not reported	DRT	Ensure accurate results are entered for TB_ART and TX_CURR for the current reporting period. When TB_ART is reported the people on ARV treatment (TX_CURR) should also be reported

TB_PREV				
<b>Description:</b>	Proportion of ART patients who started on a standard course of TB Preventive Treatment (TPT) in the previous reporting period who completed therapy			
<b>Numerator:</b>	Among those who started a course of TPT in the previous reporting period, the number that completed a full course of therapy (for continuous IPT programs, this includes the patients who have completed the first 6 months of isoniazid preventive therapy (IPT), or any other standard course of TPT such as 3 months of weekly isoniazid and rifapentine, or 3-HP)	The numerator is generated by counting the number of PLHIV on ART from the previous reporting period who were documented as having received at least six months of IPT or having completed any other standard course of TPT (such as 3-HP).		
<b>Denominator:</b>	Number of ART patients who were initiated on any course of TPT during the previous reporting period.	The denominator is generated by counting the total number of patients who were started on ART who were started on any course of TPT during the reporting period prior to the one being reported.		
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01, TB_PREV: TB_PREV_N is greater than TB_PREV_D	TB_PREV numerator data is greater than TB_PREV denominator data	DRT	Ensure the total number entered for TB_PREV Numerator is less than or equal to the total number entered for TB_PREV Denominator
	FlagB_04, TB_PREV: TB_PREV_N reported (not null) and TB_PREV_D not reported (null)	TB_PREV numerator data is reported but TB_PREV denominator data is not reported	DRT	Ensure that accurate information has been entered for both the numerator and denominator for TB_PREV



	FlagB_05, TB_PREV: TB_PREV_N not reported (null) and TB_PREV_D reported (not null)	TB_PREV numerator data is not reported when TB_PREV denominator data is reported	DRT	Ensure that accurate information has been entered for both the numerator and denominator for TB_PREV
	FlagB_06, TB_PREV: TB_PREV result greater than the reported TX_CURR?	TB_PREV Denominator result is greater than the reported TX_CURR	DRT	Determine if the amount entered for the numerator for TB_PREV denominator is less than the amount reported for TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_07, TB_PREV: TX_CURR reported (not null) and TB_PREV_D not reported (null)	TX_CURR data is reported but TB_PREV denominator data is not reported this quarter	DRT	Ensure that accurate information has been entered for both TX_CURR and the denominator for TB_PREV
	FlagB_08, TB_PREV: TX_TB Denom less than TB_PREV Denom	TX_TB denominator data is less than TB_PREV denominator data for this quarter	DRT	Determine if the amount entered for the TX_TB denominator is less than the amount reported for TB_PREV denominator due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagT_03, TB_PREV: Targets reported for TB_PREV Numerator, but no current period results for TB_PREV_N	Targets reported, but there is no data reported in this quarter for TB_PREV numerator results	DRT	Ensure that accurate information has been entered for the numerator for Targets and Results for TB_PREV.
	FlagT_04, TB_PREV: current period results reported, but no targets reported for TB_PREV Numerator	Current period results are reported for TB_PREV numerator, but no targets reported for TB_PREV numerator	DRT	Ensure that accurate information has been entered for the numerator for Targets and results for TB_PREV.
	TB_PREV (N, DSD, Age/Sex/NewExArt/HIV) TARGET <= TB_PREV (D, Age/Sex/NewExArt/HIV) TARGET	TB_PREV (N, Age/Sex/NewExArt/HIV) TARGET must be less than or equal to TB_PREV (D, Age/Sex/NewExArt/HIV) TARGET	MER 2.8.2 DATIM	Determine if the amount entered for each of the ART Age/Sex disaggregates (Newly Enrolled, Previously Enrolled) for TB_PREV numerator TARGETS is greater than the amount entered for the same disaggregates for TB_PREV denominator TARGETS due to programmatic nuance, or data error. Follow up on data errors for correction.
	TB_PREV (N, Age/Sex/NewExArt/HIVStatus) <= TB_PREV (D, Age/Sex/NewExArt/HIVStatus)	TB_PREV (N, Age/Sex/NewExArt/HIVStatus) must be less than or equal to TB_PREV (D, Age/Sex/NewExArt/HIVStatus)	MER 2.8.2 DATIM	Determine if the amount entered for each of the ART Age/Sex disaggregates (Newly Enrolled, Previously Enrolled) for TB_PREV numerator is greater than the amount entered for the same disaggregates for TB_PREV denominator due to programmatic nuance, or data error. Follow up on data errors for correction.

## TB\_STAT (including TB\_STAT\_POS)

**Description:** Percentage of new and relapse TB cases with documented HIV status

<b>Numerator:</b>	Number of new and relapsed TB cases with documented HIV status, during the reporting period			
<b>Denominator:</b>	Total number of new and relapsed TB cases, during the reporting period			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01/02, TB_STAT: TB_STAT_N/D reported (not null) and TB_STAT_D/N not reported (null)	TB_STAT (Numerator/Denominator) data is reported but the opposite TB_STAT (Numerator/Denominator) data is not reported	DRT	Ensure that accurate information is entered for both the numerator and denominator for TB_STAT.
	FlagB_04, TB_STAT: TB_STAT_N greater than TB_STAT_D	TB_STAT numerator data is greater than TB_STAT denominator data for this quarter	DRT	Ensure the total number entered for TB_STAT Numerator is less than or equal to the total number entered for TB_STAT Denominator
	TB_STAT (N, Age/Sex/KnownNewPosNegRecentNeg) <= TB_STAT (D, Age/Sex)	TB_STAT (N, Age/Sex/KnownNewPosNegRecentNeg) must be less than or equal to TB_STAT (D, Age/Sex)	MER 2.8.2 DATIM	Determine if the number entered for each TB_STAT numerator Age/Sex/Result disaggregate (Known Positive, Newly Tested Positive, New Negatives, Recent Negatives) is greater than the number entered for the TB_STAT denominator Age/Sex disaggregate due to programmatic nuance, or data error. Follow up on data errors for correction.
	TB_STAT (N, Age/Sex/KnownNewPosNeg) TARGET <= TB_STAT (D, Age/Sex) TARGET	TB_STAT (N, Age/Sex/KnownNewPosNeg) TARGET must be less than or equal to TB_STAT (D, Age/Sex) TARGET	MER 2.8.2 DATIM	Determine if the number entered for each TB_STAT numerator Age/Sex/Result disaggregate (Known Positive, Newly Tested Positive, New Negatives) TARGET is greater than the number entered for the TB_STAT denominator Age/Sex disaggregate TARGET due to programmatic nuance, or data error. Follow up on data errors for correction.

<b>TX_CURR</b>				
<b>Description:</b>	Number of adults and children currently receiving antiretroviral therapy (ART)			
<b>Numerator:</b>	Number of adults and children currently receiving antiretroviral therapy (ART)	Count the number of adults and children who are currently receiving ART.		
<b>Denominator:</b>	N/A			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01, TX_CURR: TX_NEW_N reported (not null) and TX_CURR_N not reported (null)	TX_NEW data is reported but TX_CURR data is not reported	DRT	Ensure accurate results are inputted for both TX_CURR and TX_NEW



FlagB_02, TX_CURR: TX_CURR_N reported (not null) and TX_NEW_N not reported (null)	TX_CURR data is reported but TX_NEW data is not reported	DRT	Ensure accurate results are inputted for both TX_CURR and TX_NEW
FlagB_04, TX_CURR: TX_NEW_N greater than TX_CURR_N	TX_NEW data is greater than TX_CURR data	DRT	Ensure accurate results are reported. Typically data for TX_NEW is less than or equal to the total TX_CURR
FlagB_05, TX_CURR: TX_CURR_ARVDISP not equal to TX_CURR_N	TX_CURR data entered for the ARV Dispensing Quantity by Coarse Age/Sex is less than or greater than data entered for TX_CURR Age/Sex/HIVStatus disaggs	DRT	Ensure accurate results are reported. Typically data for TX_CURR ARV Dispensing Quantity by Coarse Age/Sex is equal to TX_CURR Age/Sex data.
FlagB_07, TX_PVLS: TX_CURR reported (not null) and TX_PVLS_D not reported (null)	TX_CURR data is reported but TX_PVLS denominator data is not reported	DRT	Ensure accurate results are inputted for both TX_CURR and TX_PVLS denominator
FlagB_07, TX_TB: TX_CURR_N reported (not null) and TX_TB_D not reported (null)	TX_CURR data is reported but TX_TB denominator data is not reported	DRT	Ensure accurate results are inputted for both TX_CURR and TX_TB denominator
FlagT_01, TX_CURR: Targets reported, but no current period results for TX_CURR	Targets reported, but there is no data reported in this quarter for TX_CURR results	DRT	Ensure accurate results are inputted for both Targets and Results for TX_CURR.
FlagT_02, TX_CURR: Current period results reported, but no targets reported for TX_CURR	Current period results are reported for TX_CURR, but no targets reported for TX_CURR	DRT	Ensure accurate results are inputted for both Targets and Results for TX_CURR.
FlagT_03, TX_CURR: Previous period results reported, but no current period results reported for TX_CURR	Last quarter's data included TX_CURR, but no current period results are reported for TX_CURR	DRT	Ensure accurate results are inputted for both the current and previous reporting period for TX_CURR.
FlagT_04, TX_CURR: Current period results reported, but no previous period results reported for TX_CURR	Current period results are reported, but last quarter did not include TX_CURR data	DRT	Ensure accurate results are inputted for both the current and previous reporting period for TX_CURR.
TX_CURR (N, Age/Sex/ARVDispense/HIVStatus) == TX_CURR (N, Age/Sex/HIVStatus) + TX_CURR (N, Age Agg/Sex/HIVStatus)	TX_CURR (N, Age/Sex/ARVDispense/HIVStatus) must be equal to TX_CURR (N, Age/Sex/HIVStatus) + TX_CURR (N, Age Agg/Sex/HIVStatus)	MER 2.8.2 DATIM	Determine if the total number entered for TX_CURR disaggregation by ARV Dispensing Quantity (<3 Mos, 3-5 mos, 6+ mos), Sex, and Age, is not equal to the total entered for the fine age/sex disaggregate and coarse age/sex disaggregate for TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction.
TX_CURR (N, Age/Sex/CD4/HIVStatus) :OR: TX_CURR (N, Age Agg/Sex/HIVStatus)	Either the Fine Age disaggregate (Age) or Aggregate Age disaggregate (Age Agg) should be entered, but not both, for TX_CURR	MER 2.8.2 DATIM	Determine if both the fine age disaggregate (<1, 1-4, 5-9, etc.) and the coarse age disaggregate (<15, 15+) is entered for TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction.

	TX_CURR (N, FC) <= TX_CURR (N, Age/Sex/HIVStatus)	TX_NEW (N, FC) must be less than or or equal to TX_NEW (N, Age/Sex/HIVStatus)	MER 2.8.2 DATIM	Determine if the result entered for the Focus Client disaggregate for TX_CURR is greater than or equal to result entered for the Age/Sex disaggregate for TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_01, TX_ML: TX_CURR reported (not null) and TX_ML not reported (null)	TX_CURR data is but TX_ML data is not reported	DRT	Ensure accurate results are inputted for Results for TX_CURR and TX_ML.
	FlagB_02, TX_RTT: TX_CURR reported (not null) and TX_RTT not reported (null)	TX_CURR data is reported but TX_RTT data is not reported	DRT	Ensure accurate results are inputted for Results for TX_CURR and TX_RTT.
	FlagB_04, PMTCT_ART: PMTCT_ART greater than TX_CURR	PMTCT_ART should be less than or equal to TX_CURR.	MER 2.8.2 DRT	Determine if the total number of individuals entered for PMTCT_ART (numerator) is less than the number of individuals entered for the TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction

TX_CURR_NAT / TX_CURR_SUBNAT				
<b>Description:</b>	Percentage of people living with HIV receiving antiretroviral therapy			
<b>Numerator:</b>	Number of PLHIV on ART at the end of the reporting period			
<b>Denominator:</b>	Number of people living with HIV (PLHIV Estimate)			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	TX_CURR_NAT/SUBNAT (N, NAT/SUBNAT) >= TX_CURR_NAT/SUBNAT (N, NAT/SUBNAT, Age/Sex/HIVStatus) + TX_CURR_NAT/SUBNAT (N, NAT/SUBNAT, Age Agg/Sex/HIVStatus) + TX_CURR_NAT/SUBNAT (N, NAT/SUBNAT, Sex)	TX_CURR_NAT/SUBNAT must be more than or equal to TX_CURR_NAT/SUBNAT (N, Age/Sex/HIVStatus) + TX_CURR_NAT/SUBNAT (N, Age Agg/Sex/HIVStatus) + TX_CURR_NAT/SUBNAT (N, Sex)	MER 2.8.2 DATIM	Determine if the total number entered for TX_CURR_NAT / SUBNAT disaggregation by Sex and Age, is greater than the sum of the total entered for the fine age/sex disaggregate and coarse age/sex disaggregate for TX_CURR_NAT / SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_CURR_NAT/SUBNAT (N, NAT/SUBNAT, Age Agg/Sex) TARGET :OR: TX_CURR_NAT/SUBNAT (N, NAT/SUBNAT, Sex) TARGET	Either the AGE/SEX disaggregate, or the Sex disaggregate should be filled in, but not both, for the TX_CURR_NAT/SUBNAT indicator.	MER 2.8.2 DATIM	Determine if both the fine age disaggregate (<1, 1-4, 5-9, etc.) and the coarse age disaggregate (<15, 15+) is entered for TX_CURR_NAT/SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_CURR_NAT/SUBNAT (N, NAT/SUBNAT, Age/Sex/HIVStatus) :OR: TX_CURR_NAT/SUBNAT (N, NAT/SUBNAT, Age Agg/Sex/HIVStatus)	Either the AGE/SEX disaggregate, or the Sex disaggregate should be filled in, but not both, for the TX_CURR_NAT/SUBNAT indicator for the HIV disaggregate	MER 2.8.2 DATIM	Determine If both the coarse Age/Sex disaggregate (<15, 15+, Male/Female) and the Sex Disaggregate is entered TX_CURR_NAT/SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.

	TX_CURR_ NAT/SUBNAT (N, NAT/SUBNAT, Age/Sex/HIVStatus) :OR: TX_CURR_ NAT/SUBNAT (N, NAT/SUBNAT, Sex)	Either the Age/Sex/HIVStatus disaggregate or the Sex disaggregate should be filled in, but not both for TX_CURR_ NAT/SUBNAT	MER 2.8.2 DATIM	Determine if both the fine age/sex disaggregate (<1, 1-4, 5-9, etc. Male/Female), and the Sex disaggregate is entered for TX_CURR_ NAT/SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.
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TX_ML				
<b>Description:</b>	Number of ART patients (who were on ART at the beginning of the quarterly reporting Period or initiated treatment during the reporting period) and then had no clinical contact since their last expected contact.			
<b>Numerator:</b>	Number of ART patients with no clinical contact or ARV pick-up for greater than 28 days since their last expected clinical contact or ARV pick-up			
<b>Denominator:</b>	N/A			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01, TX_ML: TX_CURR reported (not null) and TX_ML not reported (null)	TX_CURR data is but TX_ML data is not reported	DRT	Ensure accurate results are inputted for Results for TX_CURR and TX_ML.
	FlagT_03, TX_ML: Previous period results reported, but no current period results reported for TX_ML	Last quarter's data included TX_ML, but no current period results are reported for TX_ML	DRT	Ensure accurate results are inputted for both the previous and current reporting periods for TX_ML.
	FlagT_04, TX_ML: current period results reported, but no previous period results reported for TX_ML	Current period results are reported, but last quarter did not include TX_ML data	DRT	Ensure accurate results are inputted for both the previous and current reporting periods for TX_ML.
	TX_ML (N, DSD/TA/CS, Age/Sex/ARTCOD/HIVStatus) options 50-54, 55-59, 60-64, 65+ :OR: TX_ML (N, DSD/TA/CS, Age/Sex/ARTCOD/HIVStatus) option 50+	Either TX_ML (N, DSD/TA/CS, Age/Sex/ARTCOD/HIVStatus) options 50-54, 55-59, 60-64, 65+ :OR: TX_ML (N, DSD/TA/CS, Age/Sex/ARTCOD/HIVStatus) option 50+ should be reported	DATIM	Results should only be reported for fine age bands, or aggregate age bands. Follow up on data errors for correction.
	TX_ML (N, DSD/TA/CS, Age/Sex/ARTNoContact/HIVStatus) options 50-54, 55-59, 60-64, 65+ :OR: TX_ML (N, DSD, Age/Sex/ARTNoContact/HIVStatus) option 50+	Either TX_ML (N, DSD/TA/CS, Age/Sex/ARTNoContact/HIVStatus) options 50-54, 55-59, 60-64, 65+ :OR: TX_ML (N, DSD, Age/Sex/ARTNoContact/HIVStatus) option 50+ should be reported on	MER 2.8.2	Results should only be reported for fine age bands, or aggregate age bands. Follow up on data errors for correction.

TX_NEW	
<b>Description:</b>	Number of adults and children newly enrolled on antiretroviral therapy (ART)

<b>Numerator:</b>	Number of adults and children newly enrolled on antiretroviral therapy (ART)			
<b>Denominator:</b>	N/A			
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01/02, TB_CURR: TX_NEW_N (reported / not reported) and TX_CURR_N (not reported / reported)	TX_NEW data is reported but TX_CURR data is not Or TX_NEW data is not reported but TX_CURR data is reported	DRT	Ensure that accurate information is entered for both TX_NEW and TX_CURR. When one is reported they both should be reported.
	FlagT_01, TX_NEW: Targets reported, but no current period results for TX_NEW	Targets reported, but there is no data reported in this quarter for TX_NEW results	DRT	Ensure that accurate information is entered for both TARGETS and results for TX_NEW.
	FlagT_02, TX_NEW: Current period results reported, but no targets reported for TX_NEW	Current period results are reported for TX_NEW, but no targets reported for TX_NEW	DRT	Ensure that accurate information is entered for both TARGETS and results for TX_NEW.
	FlagT_03, TX_NEW: Previous period results reported, but no current period results reported for TX_NEW	Last quarter's data included TX_NEW, but no current period results are reported for TX_NEW	DRT	Ensure that accurate information is entered for both the previous and current reporting period for TX_NEW.
	FlagT_04, TX_NEW: Current period results reported, but no previous period results reported for TX_NEW	Current period results are reported, but last quarter did not include TX_NEW data	DRT	Ensure that accurate information is entered for both the previous and current reporting period for TX_NEW.
	TX_NEW (N, Age Agg/Sex/CD4/HIVStatus) <= TX_CURR (N, Age/Sex/CD4/HIVStatus) + TX_CURR (N, Age Agg/Sex/CD4/HIVStatus)	TX_NEW (N, Age Agg/Sex/CD4/HIVStatus) must be less than or equal to TX_CURR (N, Age/Sex/CD4/HIVStatus) + TX_CURR (N, Age Agg/Sex/CD4/HIVStatus)	MER 2.8.2 DATIM	Determine if the total number entered for the TX_NEW disaggregation by CD4, Sex and Age, is greater than the sum of the total entered for the fine age/sex/CD4 disaggregate and coarse age/sex/CD4 disaggregate for TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_NEW (N, Age/Sex/CD4/HIVStatus) <= TX_CURR (N, Age/Sex/CD4/HIVStatus) + TX_CURR (N, Age Agg/Sex/CD4/HIVStatus)	TX_NEW (N, Age/Sex/CD4/HIVStatus) must be less than or equal to TX_CURR (N, Age/Sex/CD4/HIVStatus) + TX_CURR (N, Age Agg/Sex/CD4/HIVStatus)	MER 2.8.2 DATIM	Determine if the total number entered for the TX_NEW disaggregation by CD4, Sex and Age, is greater than the sum of the total entered for the fine age/sex/CD4 disaggregate and coarse age/sex/CD4 disaggregate for TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_NEW (N, Age/Sex/CD4/HIVStatus) :OR: TX_NEW (N, Age Agg/Sex/CD4/HIVStatus)	Either the AGE/SEX/HIV disaggregate, or the Age aggregate Sex/HIVStatus disaggregate should be filled in, but not both, for the TX_NEW indicator.	MER 2.8.2 DATIM	Determine if both the fine age disaggregate (<1, 1-4, 5-9, etc.) and the coarse age/sex disaggregate (<15, 15+) entered for TX_NEW due to programmatic nuance, or data error. Follow up on data errors for correction.

	TX_NEW (N, Age/Sex/CD4/HIVStatus) options 50-54, 55-59, 60-64, 65+ :OR: TX_NEW (N, Age/Sex/CD4/HIVStatus) option 50+	Either the Age/Sex/CD4/HIVStatus Expanded Age bands or the Age/Sex/CD4/HIVStatus Coarse 50+ Age Bands should be filled in, but not both for TX_NEW	MER 2.8.2 DATIM	Determine if both the expanded fine age disaggregate (50-54, 55-59, etc.) and the coarse age/sex/CD4 disaggregate (50+) was entered for TX_NEW due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_NEW (N, PregnantBF/HIVStatus) <= TX_NEW (N, Age/Sex/CD4/HIVStatus) + TX_NEW (N, Age Agg/Sex/CD4/HIVStatus)	TX_NEW (N, DSD, PregnantBF/HIVStatus) must be less than or equal to TX_NEW (N, DSD, Age/Sex/CD4/HIVStatus) + TX_NEW (N, DSD, Age Agg/Sex/CD4/HIVStatus)	MER 2.8.2 DATIM	Determine if the number entered for TX_NEW for the Disaggregate by Breastfeeding Status at ART disaggregate (Breastfeeding) is greater than the sum of the total entered for the fine age/sex/CD4 disaggregate and coarse age/sex/CD4 disaggregate for TX_NEW due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_NEW (N, Age/Sex/HIVStatus) TARGET <= TX_CURR (N, Age/Sex/HIVStatus) TARGET	TX_NEW (N, Age/Sex/HIVStatus) TARGET must be less than or equal to TX_CURR (N, Age/Sex/HIVStatus) TARGET	MER 2.8.2 DATIM	Determine if the TARGET entered for the TX_NEW, Age/Sex disaggregate is greater than the TARGET entered for the TX_CURR Age/Sex disaggregate due to programmatic nuance, or data error. Follow up on data errors for correction.

TX_PVLS				
<b>Description:</b>	Percentage of ART patients with a suppressed viral load (VL) result (<1000 copies/ml) documented in the medical or laboratory records/laboratory information systems (LIS) within the past 12 months			
<b>Numerator:</b>	Number of ART patients with suppressed VL results (<1,000 copies/ml) documented in the medical or laboratory records/LIS within the past 12 months	<ul style="list-style-type: none"> <li>• If there is more than one VL result for a patient during the past 12 months, report the most recent result.</li> <li>• Only patients who have been on ART for at least 3 months should be considered.</li> </ul>		
<b>Denominator:</b>	Number of ART patients with a VL result documented in the medical or laboratory records/LIS within the past 12 months.	Only patients who have been on ART for at least 3 months should be considered.		
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01/FlagB_02, TX_PVLS: TX_PVLS_D reported/not reported and TX_PVLS_N not reported /reported	TX_PVLS numerator data is reported but TX_PVLS denominator data is not Or TX_PVLS numerator data is not reported but TX_PVLS denominator data is reported	DRT	Ensure accurate results are entered for both the numerator and denominator for TX_PVLS.
	FlagB_04, TX_PVLS: TX_PVLS_N greater than TX_PVLS_D	TX_PVLS numerator data is greater than TX_PVLS denominator data for this quarter	DRT	Ensure the total number entered for TX_PVLS Numerator is less than or equal to the total number entered for TX_PVLS Denominator
	FlagB_05, TX_PVLS: Is TX_PVLS_D in current period greater than TX_CURR in current period	Is TX_PVLS denominator data for the current period results is greater than TX_CURR data	DRT	Ensure the result entered for the TX_PVLS denominator is less than or equal to TX_CURR.



FlagB_07, TX_TB: TX_CURR_N reported (not null) and TX_TB_D not reported (null)	TX_CURR data is reported but TX_TB denominator data is not reported	DRT	Ensure accurate results are inputted for both TX_CURR and TX_TB denominator
FlagB_08, TX_PVLS: TX_PVLS_D reported (not null) and TX_CURR_N not reported (null)	TX_PVLS denominator data is reported but TX_CURR data is not reported	DRT	Ensure accurate results are entered for the denominator for TX_PVLS and the TX_CURR numerator.
FlagT_01, TX_PVLS_N: Targets reported, but no current period results for TX_PVLS_N	Targets reported, but there is no data reported in this quarter for TX_PVLS numerator results	DRT	Ensure accurate results and targets are entered for the TX_PVLS numerator for the current reporting period.
FlagT_01, TX_PVLS_D: Targets reported, but no current period results for TX_PVLS_D	Targets reported, but there is no data reported in this quarter for TX_PVLS denominator results	DRT	Ensure accurate results and targets are entered for the TX_PVLS denominator for the current reporting period.
FlagT_02, TX_PVLS_N: Current period results reported, but no targets reported for TX_PVLS_N	Current period results are reported for TX_PVLS numerator, but no targets reported	DRT	Ensure accurate results and targets are entered for the TX_PVLS numerator for the current reporting period.
FlagT_02, TX_PVLS_D: Current period results reported, but no targets reported for TX_PVLS_D	Current period results are reported for TX_PVLS denominator, but no targets reported	DRT	Ensure accurate results and targets are entered for the TX_PVLS denominator for the current reporting period.
FlagT_03, TX_PVLS_N: Previous period results reported, but no current period results reported for TX_PVLS_N	Last quarter's data included TX_PVLS numerator, but no current period results are reported	DRT	Ensure accurate results are entered for the numerator for TX_PVLS for the current and previous reporting period
FlagT_03, TX_PVLS_D: Previous period results reported, but no current period results reported for TX_PVLS_D	Last quarter's data included TX_PVLS denominator, but no current period results are reported	DRT	Ensure accurate results are entered for the denominator for TX_PVLS for the current and previous reporting period.
FlagT_04, TX_PVLS_N: Current period results reported, but no previous period results reported for TX_PVLS_N	Current period results are reported, but last quarter did not include TX_PVLS numerator data	DRT	Ensure accurate results are entered for the numerator for TX_PVLS for both the current and previous periods.
FlagT_04, TX_PVLS_D: Current period results reported, but no previous period results reported for TX_PVLS_D	Current period results are reported, but last quarter did not include TX_PVLS denominator data	DRT	Ensure accurate results are entered for the denominator for TX_PVLS for both the current and previous periods.
TX_PVLS (N/D, Age/Sex/HIV) :OR: TX_PVLS (N/D, Age Agg/Sex/HIV)	Either the Fine Age disaggregate (Age) or Aggregate Age disaggregate (Age Agg) should be entered, but not both, for TX_PVLS	MER 2.8.2 DATIM	Determine if both the fine age disaggregate (<1, 1-4, 5-9, etc.) and the coarse age/sex disaggregate (<15, 15+) are entered for TX_PVLS due to programmatic nuance, or data error. Follow up on data errors for correction.

	TX_PVLS (N/D, Age/Sex/HIV) options 50-54, 55-59, 60-64, 65+ :OR: TX_PVLS (N/D, Age/Sex/HIV) options 50+	Either the expanded fine age disaggregate or the 50+ age disaggregate should be used, but not both.	MER 2.8.2 DATIM	Determine if both the expanded fine age disaggregate 50-54, 55-59, etc.) and the coarse age/sex disaggregate 50+) are entered for TX_PVLS due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_PVLS (N, Age/Sex/HIV) <= TX_PVLS (D, Age/Sex/HIV) + TX_PVLS (D, Age Agg/Sex/HIV)	TX_PVLS (N, Age/Sex/HIV) must be less than or equal to TX_PVLS (D, Age/Sex/HIV) + TX_PVLS (D, Age Agg/Sex/HIV)	MER 2.8.2 DATIM	Determine if the numbers entered for the fine age/sex /testing disaggregate for the TX_PVLS denominator, is greater than or equal to the sum of the totals entered for the fine and coarse age disaggregates for TX_PVLS denominator due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_PVLS (N, PregBF/HIV) <= TX_PVLS (N, Age/Sex/HIV) + TX_PVLS (N, Age Agg/Sex/HIV)	TX_PVLS (N, PregBF/HIV) must be less than or equal to TX_PVLS (N, Age/Sex/HIV) + TX_PVLS (N, Age Agg/Sex/HIV)	MER 2.8.2 DATIM	Determine if the numbers entered for the fine age/sex /Preg Breastfeeding disaggregate (Pregnant, Breastfeeding) for the TX_PVLS denominator, is greater than the sum of the totals entered for the fine and coarse age disaggregates for TX_PVLS denominator due to programmatic nuance, or data error. Follow up on data errors for correction.

TX_RTT				
Description:	Number of ART patients with no clinical contact (or ARV drug pick-up) for greater than 28 days since their last expected contact who restarted ARVs within the reporting period			
Numerator:	Number of ART patients with no clinical contact or ARV pick-up for greater than 28 days since their last expected contact who restarted ARVs within the reporting period.	These are individuals who were previously on ART who restarted ARVs after being off treatment for ≥28 days (and therefore experienced IIT).		
Denominator:	N/A			
Validation Check:	Validation Rule	Layperson's Definition of Validation Rule	Applicable System	User Action
	FlagT_03, TX_RTT: Previous period results reported, but no current period results reported for TX_RTT	Last quarter's data included TX_RTT, but no current period results are reported	DRT	Ensure accurate results are entered for both the current and previous reporting period for TX_RTT.
	FlagT_04, TX_RTT: Current period results reported, but no previous period results reported for TX_RTT	Current period results are reported, but last quarter did not include TX_RTT data	DRT	Ensure accurate results are entered for both the current and previous reporting periods for TX_RTT.
	FlagB_03, TX_RTT: TX_RTT reported (not null) and TX_RTT IIT not reported (null)	TX_RTT data for Age, Sex, CD4 is reported but TX_RTT data for Interruption in treatment (IIT) by number of months is not reported	MER 2.8.2 DRT	Ensure accurate results are entered for both the Age, Sex, CD4 disaggregate and Interruption in Treatment (IIT) disaggregate.

	FlagB_01, TX_RTT (N, Age/Sex/CD4/HIVStatus) <= TX_CURR (N, Age/Sex/HIVStatus) + TX_CURR (N, Age Agg/Sex/HIVStatus)	TX_RTT data reported for Age/Sex/CD4/HIVStatus disaggregates must be less than or equal to TX_CURR data reported for Age (or Age Aggregated), Sex and HIVStatus	MER 2.8.2 DATIM DRT	Determine if the number entered for the fine age/sex/CD4 disaggregate for TX_RTT is greater than the sum of the Fine and Coarse age/sex disaggregates for TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_02, TX_RTT: TX_CURR reported (not null) and TX_RTT not reported (null)	TX_CURR data is reported but TX_RTT data is not reported	DRT	Ensure accurate results are inputted for Results for TX_CURR and TX_RTT.
	TX_RTT (N, Age/Sex/CD4/HIVStatus) options 50-54, 55-59, 60-64, 65+ :OR: TX_RTT (N, Age/Sex/CD4/HIVStatus) Option 50+	Either the expanded fine age disaggregate or the 50+ age disaggregate should be used, but not both.	MER 2.8.2 DATIM	Determine if both the expanded fine age disaggregate 50-54, 55-59, etc.) and the coarse age/sex disaggregate 50+) are entered for TX_RTT due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_RTT (N, ART/NoContactIIT) <= TX_RTT (N, Age/Sex/CD4/HIVStatus)	TX_RTT (N, IIT/6+ Months) must be less than or equal to TX_RTT (N, Age/Sex/CD4/HIVStatus)	MER 2.8.2 DATIM	Determine if the number entered for the Duration of Interruption in Treatment disaggregate for TX_RTT is greater than the total numerator for TX_RTT is due to programmatic nuance, or data error. Follow up on data errors for correction.

TX_TB				
<b>Description:</b>	Proportion of ART patients screened for TB in the semiannual reporting period who start TB treatment.			
<b>Numerator:</b>	Number of ART patients who were started on TB treatment during the semiannual reporting period.	The numerator can be generated by counting the number of screened ART patients who were diagnosed with TB and started on anti-TB therapy during the reporting period.		
<b>Denominator:</b>	Number of ART patients who were screened for TB at least once during the semiannual reporting period.	The denominator can be generated by counting the number of ART patients who were screened for TB symptoms at least once during the reporting period.		
<b>Validation Check:</b>	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	FlagB_01, TX_TB: TX_TB_N is greater than TX_TB_D	TX_TB_N is greater than TX_TB_D	DRT	Determine if the number entered for TX_TB numerator is greater than the number entered for the TX_TB denominator due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_02/03 TX_TB: TX_TB_D POS/NEG is greater than TX_TB_D	TX_TB Positive denominator data or TX_TB Negative denominator data is greater than the total TX_TB denominator	DRT	Ensure accurate information is reported for both TX_TB Positive and Negative Screen Result Return denominator data



	FlagB_04, TX_TB: TX_TB_D_POS is greater than TX_TB_D_NEG	TX_TB Positive denominator data is greater than TX_TB Negative denominator	DRT	Determine if the number entered for the negative Screen Result disaggregate is greater than the number entered for a positive screen result, for TX_TB Denominator due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_06, TX_TB: TX_TB_D Positive Result Returned is greater than TX_TB_D	TX_TB denominator Positive Specimen Result Returned is greater than TX_TB denominator data for Age, Sex, TBScreen	DRT	Determine if the number entered for the positive Result disaggregate is greater than the total number entered for TX_TB Denominator due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_07, TX_TB: TX_TB_D Diagnostic sent is greater than TX_TB_D	TX_TB denominator data for Diagnostic TB Test Type must be less than or equal to TX_TB denominator data for Age, Sex, TBScreen data	DRT	Determine if the number entered for the Test Type disaggregate (Smear Only, Gene Xpert MTB, Other) is greater than the total number entered for TX_TB Denominator due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_10, TX_TB: TX_TB_D reported (not null) and TX_CURR_N not reported (null)	TX_TB denominator data is reported but TX_CURR data is not reported	DRT	Ensure accurate information is reported for both the TX_TB denominator and the TX_CURR numerator.
	FlagB_11, TX_TB: TX_TB (denominator) result greater than the reported TX CURR?	TX_TB denominator data is greater than TX CURR	DRT	Determine if the number entered for the TX_TB denominator is greater than the number entered for TX_CURR due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_08, TB_PREV: TX_TB Denom less than TB_PREV Denom	TX_TB denominator data is less than TB_PREV denominator data	DRT	Determine if the number entered for the denominator for TB_PREV is greater than the number entered for the TX_TB denominator due to programmatic nuance, or data error. Follow up on data errors for correction.
	FlagB_05, TX_TB (D, Specimen Sent/HIVStatus) <= TX_TB (D, Age/Sex/TBScreen/ART/HIV)	TX_TB denominator data for Specimen Sent must be less than or equal to TX_TB denominator Age, Sex, TBScreen data	MER 2.8.2 DATIM DRT	Determine if the number entered for the Specimen Sent disaggregate is greater than the number entered for those Previously on ART by Age Sex (Disaggregated by Start of ART by Screen Result by Age/Sex) for TX_TB Denominator due to programmatic nuance, or data error. Follow up on data errors for correction.
	TX_TB (D, TBTestType/HIVStatus) <= TX_TB (D, Specimen Sent/HIVStatus)	TX_TB denominator data for Diagnostic TB Test Type must be less than or equal to TX_TB denominator data for Specimen Sent	MER 2.8.2 DATIM	Determine if the number entered for the Test Type disaggregate (Smear Only, Gene Xpert MTB, Other) is greater than the number entered for the Specimen Sent disaggregate for TX_TB Denominator due to programmatic nuance, or data error. Follow up on data errors for correction.

# VL\_SUPPRESSION\_NAT / VL\_SUPPRESSION\_SUBNAT

<b>Description :</b>	Percentage of people living with HIV who have suppressed viral loads at the end of the reporting period			
<b>Numerator:</b>	Number of people living with HIV and on ART [in the reporting period] who have a suppressed viral load (<1000 copies/mL)			
<b>Denominator:</b>	Number of people living with HIV (PLHIV Estimate)			
	<b>Validation Rule</b>	<b>Layperson's Definition of Validation Rule</b>	<b>Applicable System</b>	<b>User Action</b>
	VL_SUPPRESSION_NAT (N, NAT, AgeAgg/Sex/HIV) :OR: VL_SUPPRESSION_NAT (N, NAT/SUBNAT, HIV/Sex)	Either the Age/Sex/HIV disaggregate or HIV/Sex disaggregate should be filled in, but not both for VL_SUPPRESSION_NAT/SUBNAT	MER 2.8.2 DATIM	Determine if both the coarse age disaggregate (<15, 15+) and HIV/Sex disaggregate are entered for VL_SUPPRESSION_NAT/SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.
	VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, Age/Sex/HIV) :OR: VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, HIV/Sex)	Either the Age/Sex/HIV disaggregate or HIV/Sex disaggregate should be filled in, but not both for VL_SUPPRESSION_NAT/SUBNAT TARGET	MER 2.8.2 DATIM	Determine if both the fine age disaggregate (<1, 1-4, 5-9, etc.) and the HIV/Sex disaggregate are entered for VL_SUPPRESSION_NAT/SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.
	VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, Age/Sex/HIV) :OR: VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, AgeAgg/Sex/HIV)	Either the Aggregate Age/Sex/HIV disaggregate should be filled in or the HIV/Sex disaggregate, but not for both for VL_SUPPRESSION_NAT/SUBNAT	MER 2.8.2 DATIM	Determine if the fine age disaggregate (<1, 1-4, 5-9, etc.) and the coarse age/sex disaggregate (<15, 15-29, 30+) are entered for VL_SUPPRESSION_NAT/SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.
	VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, HIV) >= VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, Age/Sex/HIV) + VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, AgeAgg/Sex/HIV) + VL_SUPPRESSION_NAT/SUBNAT (N, NAT, HIV/Sex)	VL_SUPPRESSION_NAT/SUBNAT (N, HIV) must be greater than or equal to VL_SUPPRESSION_NAT/SUBNAT (N, Age/Sex/HIV) plus VL_SUPPRESSION_NAT/SUBNAT (N, AgeAgg/Sex/HIV) plus VL_SUPPRESSION_NAT/SUBNAT (N, HIV/Sex)	MER 2.8.2 DATIM	Determine if the number entered for the numerator (Number of adults and children receiving antiretroviral therapy in the reporting period with suppressed viral load ) is less than the sum of the Fine Age/Sex disaggregate, the coarse age/sex disaggregate, and the sex only disaggregate for VL_SUPPRESSION_NAT/SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.

	VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, HIVStatus) TARGET >= VL_SUPPRESSION_NAT (N, NAT/SUBNAT, AgeA/S/H) TARGET + VL_SUPPRESSION_NAT (N, NAT/SUBNAT, HIV/Sex) TARGET	VL_SUPPRESSION_NAT (N, NAT, HIVStatus) TARGET >= VL_SUPPRESSION_NAT (N, NAT, AgeA/S/H) TARGET + VL_SUPPRESSION_NAT (N, NAT, HIV/Sex) TARGET	MER 2.8.2 DATIM	Determine if the number entered for the numerator (Number of adults and children receiving antiretroviral therapy in the reporting period with suppressed viral load ) is less than the sum of the Fine Age/Sex disaggregate, the coarse age/sex disaggregate, and the sex only disaggregate for VL_SUPPRESSION_NAT/SUBNAT TARGET due to programmatic nuance, or data error. Follow up on data errors for correction.
	VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, RT/HIV) <= VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, HIV)	VL_SUPPRESSION_NAT/SUBNAT (N, RT/HIV) must be less than or equal to VL_SUPPRESSION_NAT/SUBNAT (N, HIV)	MER 2.8.2 DATIM	Determine if number entered for the Test Indication Disaggregate (Targeted, Routine) is greater than the number entered for the numerator (Number of adults and children receiving antiretroviral therapy in the reporting period with suppressed viral load) for VL_SUPPRESSION_NAT/SUBNAT due to programmatic nuance, or data error. Follow up on data errors for correction.
	VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, RT/HIV) TARGET <= VL_SUPPRESSION_NAT/SUBNAT (N, NAT/SUBNAT, HIVStatus) TARGET	VL_SUPPRESSION_NAT/SUBNAT (N, RT/HIV) TARGET must be less than or equal to VL_SUPPRESSION_NAT/SUBNAT (N, HIVStatus) TARGET	MER 2.8.2 DATIM	Determine if the number entered for the Test Indication Disaggregate (Targeted, Routine) is greater than or equal to the number entered for the numerator (Number of adults and children receiving antiretroviral therapy in the reporting period with suppressed viral load) for VL_SUPPRESSION_NAT/SUBNAT TARGET due to programmatic nuance, or data error. Follow up on data errors for correction.