

RSR CROSSWALK

OCTOBER 2025

Purpose

This document can help you compare the data you currently collect in your data management system to the data required in the Ryan White Services Report (RSR). The Crosswalk is a table in which you list the variables and values in your data management system that correspond to RSR data elements. Using this Crosswalk will help you to:

- Find the data you need to report
- Understand what you need to do to transform the data you have into the data you need to report
- Identify any missing data that you'll need to start collecting

Audience

This Crosswalk is intended for grantee or provider staff who must report client-level data elements in XML file format to the Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB).

Definitions

Variable: Refers to the name of a set of data pertaining to the client. Variables are also referred to as data elements or items.

ID: Identifies the variable. Each variable has been assigned an ID for convenient reference between this document and the RSR Data Dictionary.

Values: Refers to the allowed values or response options corresponding to each variable.

Notes: This column in the Crosswalk can help you keep a record of the data transformations that you have to perform to provide the required RSR client-level data elements and allowed values.

	YOUR DATA	RSR DATA
Variables	Client Race	Race ID
Values	White	1
	Black	2
	Asian	3
	Hawaiian/Pacific Islander	4
	Native American/Alaska Native	5

Updates

This document will be revised as variables and values are updated or when other overall changes are made. The most up-to-date version of this document will be made available [here](#).

Ryan White Services Report (RSR) Crosswalk

RSR				Your System		
ID	Variable	Definition	Value	Variable	Value	Notes
Demographics						
2	Vital Status	The client's vital enrollment status at the end of the reporting period.	12. Alive 6. Deceased 7. Unknown			
4	Birth Year	Client's year of birth. This value should be on or before all service date years for the client.	yyyy			
5	Ethnicity	Client's ethnicity.	1. Hispanic/Latino/a, or Spanish origin 2. Non-Hispanic/Latino(a), or Spanish origin			
68	Hispanic Subgroup	If Ethnicity = Hispanic/Latino(a), Client's Hispanic Subgroup (choose all that apply)	1. Mexican, Mexican American, Chicano/a 2. Puerto Rican 3. Cuban 4. Another Hispanic, Latino/a or Spanish origin			
6	Race	Client's race.	1. White 2. Black or African American 3. Asian 4. Native Hawaiian/Pacific Islander 5. American Indian or Alaska Native			
69	Asian Subgroup	If Race = Asian, Client's Asian subgroup. (choose all that apply)	1. Asian Indian 2. Chinese 3. Filipino 4. Japanese			

RSR				Your System		
ID	Variable	Definition	Value	Variable	Value	Notes
			5. Korean 6. Vietnamese 7. Other Asian			
70	NHPI Subgroup	If Race = Native Hawaiian/Pacific Islander, Client's Native Hawaiian/Pacific Islander subgroup (choose all that apply)	1. Native Hawaiian 2. Guamanian or Chamorro 3. Samoan 4. Other Pacific Islander			
71	Sex at Birth	The biological sex assigned to the client at birth	1. Male 2. Female 4. Unknown			
9	Poverty Level Percent	Client's percent of the Federal poverty level at the end of the reporting period.	Integer up to 4 digits			
10	Housing Status	Client's housing status at the end of the reporting period.	1. Stable/permanent 2. Temporary 3. Unstable			
11	Housing Status Collected Date	The collection date of the client's housing status at the end of the reporting period.	HousingStatusCollectedDate : MM/DD/YYYY			
12	HIV/AIDS Status	Client's HIV/AIDS status at the end of the reporting period. For HIV affected clients for whom HIV/AIDS status is not known, leave this value blank.	1. HIV negative 2. HIV +, not AIDS 3. HIV-positive, AIDS status unknown 4. CDC-defined AIDS 7. HIV indeterminate (infants <2 only)			
14	HIV Risk Factor	Client's HIV/AIDS risk factor. <i>Report all that apply.</i> For HIV affected clients	1. Male who has sex with male(s) (MSM) 2. Injecting drug use (IDU) 3. Hemophilia/coagulation disorder			

RSR				Your System		
ID	Variable	Definition	Value	Variable	Value	Notes
		for whom HIV/AIDS status is not known, leave this value blank.	4. Heterosexual contact 5. Receipt of blood transfusion, blood components, or tissue 6. Mother w/at risk for HIV infection (perinatal transmission) 9. Risk factor not reported or not identified			
15	Health Coverage	Client's medical insurance. <i>Report all that apply.</i>	10. Private – Employer 11. Private - Individual 2. Medicare 12. Medicaid, CHIP or other public plan 13. VA, Tricare and other military health care 14. IHS 15. Other plan 16. No Insurance/ uninsured			
72	HIV Diagnosis Year	Year of client's HIV diagnosis, if known. To be completed for a new client when the response is not "HIV-negative" or "HIV indeterminate" in 12 (HivAidsStatusId). This value must be on or before the last date of the reporting period.	yyyy Must be less than or equal to the reporting period year.			
76	New Client	Whether the client is new to care at the provider of HIV services.	1. No 2. Yes			
77	Received Services Previous	Whether the client received at least one service in the previous	1. No 2. Yes			

RSR				Your System		
ID	Variable	Definition	Value	Variable	Value	Notes
	Year	year.				
Service Visits						
16, 18-19, 21-27, 28-44, 75, 78	Service Visits	The number of visits received for each core medical service during the reporting period.	Item ID: Core Medical Services: ID 8: Outpatient ambulatory health services ID 10: Oral health care ID 11: Early intervention services ID 13: Home health care ID 14: Home and community-based health services ID 15: Hospice services ID 16: Mental health services ID 17: Medical nutrition therapy ID 18: Medical case Management (including treatment adherence) ID 19: Substance Abuse Outpatient Care Item ID: Support Services: ID 20: Case management (non-medical) services ID 21: Child care services ID 23: Emergency financial assistance ID 24: Food bank/home-delivered meals ID 25: Health education/risk reduction ID 26: Housing services			

RSR				Your System		
ID	Variable	Definition	Value	Variable	Value	Notes
			ID 28: Linguistic services ID 29: Medical transportation ID 30: Outreach services ID 32: Psychosocial support services ID 33: Referral for health care/supportive services ID 34: Rehabilitation services ID 35: Respite care ID 36: Substance abuse services-residential ID 42: Other professional services Item ID: EHE Initiative Services: ID 46: EHE Initiative Services Visits: 1-365 (must be an integer)			
17, 20	Service Delivered	The service and service delivered indicator (yes) for each core medical or support service received by the client during the reporting period.	Core Medical Services: Item ID: ID 9: Local AIDS Pharmaceutical Assistance (APA, not ADAP) ID 12: Health Insurance Program(HIP) DeliveredID: 2 = Yes			
Clinical Data						
47	First Ambulatory Care Date	Date of client's first HIV ambulatory care date at this provider agency. This value must be on or	MM/DD/YYYY			

RSR				Your System		
ID	Variable	Definition	Value	Variable	Value	Notes
		before the last date of the reporting period.				
48	Ambulatory - Service Dates	All the dates of the client's outpatient ambulatory care visits in this provider's HIV care setting with a clinical care provider during this reporting period. The service dates must be within the reporting period.	MM/DD/YYYY Must be within the reporting period start and end dates.			
49	CD4 Test Count Service Date	Values indicating all CD4 counts and their dates for this client during this report period. The service dates must be within the reporting period.	Count: Integer ServiceDate: MM/DD/YYYY Must be within the reporting period start and end dates.			
50	Viral Load Test Count Service Date	All Viral Load counts and their dates for this client during this report period	Count: Integer Report undetectable values as the lower bound of the test limit. If the lower bound is not available, report 0. ServiceDate: MM/DD/YYYY Must be within the reporting period start and end dates.			
52	Prescribed ART	Value indicating whether the client prescribed	1. Yes 8. No			

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ID	Variable	Definition	Value	Variable	Value	Notes
		ART at any time during this reporting period.				
55	Screened Syphilis	Value indicating whether the client was screened for syphilis during this reporting period (exclude all clients under the age of 18 who are not sexually active)	1. No 2. Yes 3. Not Medically indicated			
64	Pregnant	Value indicating whether the client was pregnant during this reporting period. This should be completed for HIV+ women only.	1. No 2. Yes 3. Not applicable			
Linkage to Care						
73	HIV Positive Test Date	Date of client's confidential confirmatory HIV test with a positive result within the reporting period.	HIV Positive Test Date: MM/DD/YYYY Must be within the reporting period.			
74	OAMC Link Date	Date of client's first OAMC medical care visit after positive HIV test. Date must be the same day or after the date of client's confidential confirmatory HIV test with a positive result.	HIV OAMC linkage date: MM/DD/YYYY Must be within the reporting period and on the same day or later than HIV positive test date.			