



UDS Reporting Q&A

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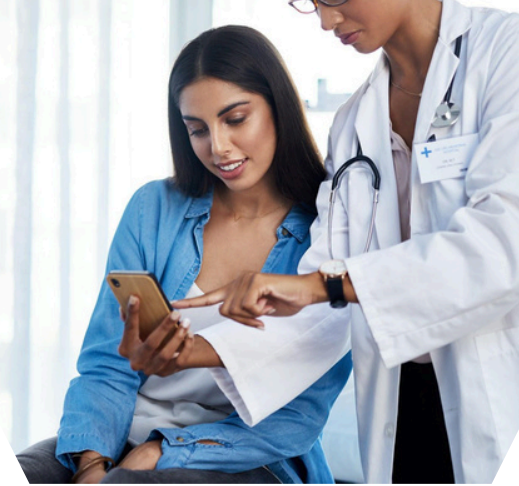


Wait– What counts for the HIV Clinical Quality Measures?

- There are TWO HIV-related clinical quality measures:
 - HIV Screening ([CMS349v6](#))
 - This is an eCQM and therefore relies on national specifications
 - HIV Linkage to Care
 - This is NOT an eCQM and is therefore defined by HRSA BPHC for the UDS

Review of HIV Clinical Quality Measures

HIV Screening (CMS349v6)



Denominator: Patients 15 to 65 years of age at the start of the measurement period AND who had at least one outpatient visit during the measurement period, excluding Patients diagnosed with HIV prior to the start of the measurement period and except Patients who die on or before the end of the measurement period.



Numerator: Patients with documentation of an HIV test performed on or after their 15th birthday and before their 66th birthday.



Documentation must align with measure specifications and requirements in your EHR.
See next slide!

Review of HIV Clinical Quality Measures

HIV Screening (CMS349v6)



Patients are included in **denominator** if they have a preventative visit or office visit in the measurement year.

- [Office Visit \(2.16.840.1.113883.3.464.1003.101.12.1001\)](#)
- [Preventive Care Services, Initial Office Visit, 0 to 17 \(2.16.840.1.113883.3.464.1003.101.12.1022\)](#)
- [Preventive Care, Established Office Visit, 0 to 17 \(2.16.840.1.113883.3.464.1003.101.12.1024\)](#)
- [Preventive Care Services Established Office Visit, 18 and Up \(2.16.840.1.113883.3.464.1003.101.12.1025\)](#)
- [Preventive Care Services Initial Office Visit, 18 and Up \(2.16.840.1.113883.3.464.1003.101.12.1023\)](#)



To meet the **numerator** patient must have documentation that aligns with one of the following:

- code "HIV 1 and 2 tests – Meaningful Use set" ("LOINC Code (75622-1)")
- valueset "HIV Lab Tests" (2.16.840.1.113762.1.4.1056.50)
 - Comprised of 170 LOINC codes (which are **lab codes** and usually related to recording results)



The key to understand is that, in order for a screening to count towards this measure, the documentation must align with specifications.

Codes that are **not** in the specifications, for example:

- ICD-10: Z11.4 – Encounter for HIV screening
- HCPCS: GO432, GO433, GO435, GO475: Infectious agent antibody detection in various forms
- CPT: 87806, 86689, 86701, 86701-86703, Various Antibody, HIV procedures

Review of HIV Clinical Quality Measures

HIV Linkage to Care



Denominator: Patients who were diagnosed with HIV for the first time ever by the health center between December 1, 2023, and November 30, 2024, and had at least one UDS countable visit during 2024 or 2023.

Patient needs to have had a confirmatory test, and HIV diagnosis in their chart.



Numerator: Newly diagnosed HIV patients that received treatment within 30 days of diagnosis. Include patients who were newly diagnosed by your health center providers and:

- had a visit with your health center provider who initiates treatment for HIV, or
- had a visit with a referral resource who initiates treatment for HIV.



Documentation must correctly identify when the patient was first identified to have HIV, with an onset date or date of initial diagnosis, in order to report accurately. This is NOT an eCQM, so does not have the same level of coding specificity as the HIV screening measure.



Do you see any future embellishments on the Family Planning question that was added this year?

- Good question! I don't know of anything coming down the pike.
- I think there are questions about how this could change related to any changes in Title X, but that's just my opinion!
- [UDS Family Planning Needs Screening Resource](#)



Tell us more about Appendix F: Workforce Form

Captures training programs at health centers, either pre-grad or post-grad, and some details.

- Examples of pre-graduate/certificate training include student clinical rotations or externships.
- A residency, fellowship, or practicum would be examples of post-graduate training.
- Include only those who are non-health-center individuals (meaning,

Pre-Graduate Training Program with a Local Community College

Health Center Name: Harmony Community Health

Location: Urban setting with diverse patient population of more than 10,000

Program Overview: Harmony Community Health has partnered with their local community college to create a Clinical Support Training Program, designed for students pursuing certificates in medical assisting and vocational nursing. The program provides hands-on experience in real-world health care settings while fulfilling academic credit requirements.

How It Works:

- **Curriculum Integration:** The program includes 8-week rotations where students assist in clinical tasks like taking vitals, documenting patient interactions in the EHR, and managing lab samples.
- **Mentorship:** Each student is paired with a health center staff member who supervises their work and provides feedback.
- **Community Impact:** Students also engage in outreach efforts, such as health fairs, that teach preventive care skills.

How is this reported on the Workforce form?

- Question 1: Yes
- Question 1a: Training-site partner
- Table in Question 2: The students would be reported the relevant lines (Line 6 and 7, in this example) in Column A, because this is pre-graduate.
- Questions 3 and 4: The health center staff who support this are reported as a count.

Post-Graduate Training Program for Family Physicians

Health Center Name: Sunrise Health Network

Location: Rural underserved area

Program Overview: Sunrise Health Network offers a Family Medicine Fellowship Program in partnership with a regional medical school. This 12-month fellowship trains family physicians and general practitioners in rural healthcare delivery, focusing on underserved populations.

How It Works:

- **Rotations and Specialties:** Fellows participate in rotations across outpatient, inpatient, and community health settings. Specialty tracks include behavioral health, obstetrics, and addiction medicine.
- **Leadership Training:** The program includes workshops on population health management and quality improvement in primary care.
- **Retention Incentive:** Physicians who commit to practicing in the area for three years receive loan repayment assistance and leadership roles within the health center.

How is this reported on the Workforce form?

- **Question 1:** Yes
- **Question 1a:** Training-site partner
- **Table in Question 2:** The fellows are reported in Line 1a, Column B.
- **Questions 3 and 4:** The health center staff who support this are reported as a count.