



Reporting Visits in the Uniform Data System (UDS)

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Vision: Healthy Communities, Healthy People



Opening Remarks

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Office of Quality Improvement

Bureau of Primary Health Care (BPHC)

Health Resources and Services Administration (HRSA)



Agenda

- Welcome
- Definition of visits
- How to report visits
- Completing the Selected Services Detailed Addendum
- Coronavirus Disease 2019 (COVID-19) implications
- Resources and references
- Questions and answers



Source: iStock

Objectives of the Webinar

By the end of the webinar, participants will be able to:

- Define visits for the purposes of the UDS
- Accurately report a variety of visit types, including clinic (in-person) and virtual visits
- Understand what visits or services are to be reported in the Table 5 Selected Services Detailed Addendum
- Understand the relationship between reportable visits and other tables in the UDS Report
- Understand how changes in services as a result of COVID-19 may impact visit reporting
- Access additional reporting support



Visits: The Foundation of the UDS Report

- Visits determine who will be reported as a patient throughout the UDS Report.
- Patients with reported visits in Table 5 will be included in:
 - Patient Profile Tables 3A, 3B, 4, and the ZIP Code Table
 - All clinical measures on Tables 6A, 6B, and 7 for which they meet the inclusion criteria
- The costs of visits will be included on Table 8A.
- The revenues that support visits will be included in Tables 9D and 9E.



Source: iStock

Defining and Reporting Clinic and Virtual Visits



Purpose of Table 5: Staffing and Utilization

Table 5 provides a profile of health center staff, the number of visits, and the number of patients served in each service category:

- Medical
- Dental
- Mental health
- Substance use disorder
- Vision
- Other professional
- Enabling

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1	Family Physicians				
2	General Practitioners				
3	Internists				
4	Obstetrician/Gynecologists				
5	Pediatricians				
7	Other Specialty Physicians				
8	Total Physicians (Lines 1–7)				
9a	Nurse Practitioners				
9b	Physician Assistants				
10	Certified Nurse Midwives				
10a	Total NPs, PAs, and CNMs (Lines 9a–10)				

Excerpt from Table 5



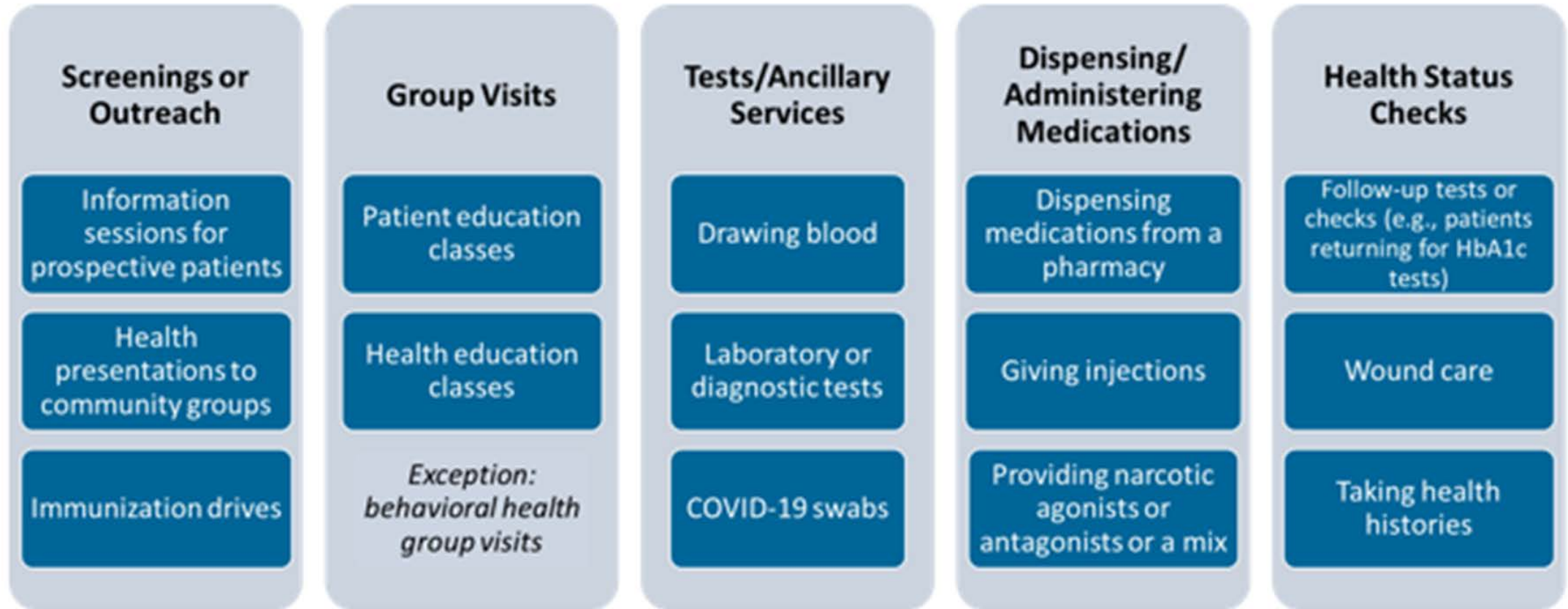
Definition: Visit

A **visit** is a documented contact between a patient and a licensed or credentialed provider who exercises independent, professional judgment that is unique to their training and education in the provision of services to the patient.

A visit can take place:

- In person (clinic visits)
- Virtually (telemedicine/telehealth visits)

Examples of Services That Do Not Count



Refer to page 22 of the UDS Manual for additional examples and detail.

Visit Criteria Knowledge Check

Which of the following criteria is *not* necessary for a visit to be counted in the UDS Report?

- A. The service must be documented.
- B. The service must include clinic or virtual contact between a patient and a licensed or credentialed provider.
- C. The provider must use independent, professional judgement in the provision of the service.
- D. All the criteria listed above must be met for a service to be counted in the UDS Report.

Visit Criteria Knowledge Check (Cont.)

Which of the following criteria is *not* necessary for a visit to be counted in the UDS Report?

- A. The service must be documented.
- B. The service must include clinic or virtual contact between a patient and a licensed or credentialed provider.
- C. The provider must use independent, professional judgement in the provision of the service.
- D. All the criteria listed above must be met for a service to be counted in the UDS Report.**

Definition: Clinic Visits

Documented ***in-person contact*** between a patient and a licensed or credentialed provider who exercises independent, professional judgement that is unique to their training in the provision of services to the patient.



Source: iStock

Reporting Clinic Visits on Table 5

- Report clinic visits by service category in Column B.
- Include visits:
 - Provided by staff reported in terms of annualized full-time equivalents (FTE) in Column A (employed directly or contracted on an hourly basis)
 - Purchased from contracted providers (generally on a fee-for-service basis)

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1	Family Physicians				
2	General Practitioners				
3	Internists				
4	Obstetrician/Gynecologists				
5	Pediatricians				
7	Other Specialty Physicians				
8	Total Physicians (Lines 1–7)				
9a	Nurse Practitioners				
9b	Physician Assistants				
10	Certified Nurse Midwives				
10a	Total NPs, Pas, and CNMs (Lines 9a–10)				

Excerpt from Table 5

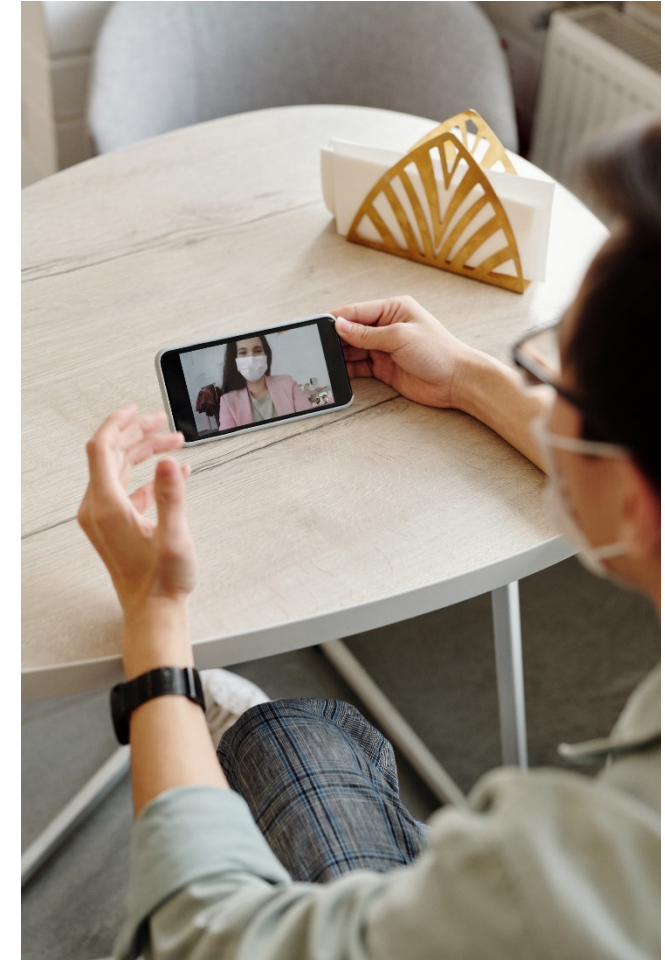


Definition: Virtual Visits

A documented ***virtual (telemedicine/telehealth) contact*** between a patient and a licensed or credentialed provider who exercises independent, professional judgement in the provision of services to the patient.

Key considerations for virtual visits:

- Must meet the reportable visit definitions
- Reporting should be consistent with the health center's scope of project
- Must be provided using interactive, synchronous audio and/or video telecommunication systems permitting real-time communication between the provider and a patient
- Should use telehealth-specific Common Procedural Technology (CPT) or Healthcare Common Procedure Coding System (HCPCS) codes



Source: Pexels



Reporting Virtual Visits on Table 5

- Report virtual visits by service category in Column B2.
- Include virtual visits:
 - Provided by staff reported in terms of annualized FTE in Column A (employed directly or contracted on an hourly basis)
 - Purchased from contracted providers on a fee-for-service basis



If the first or only visit is a reportable virtual visit, you must report the patient and all relevant demographic, service, clinical, and financial data on the UDS tables.

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1	Family Physicians				
2	General Practitioners				
3	Internists				
4	Obstetrician/Gynecologists				
5	Pediatricians				
7	Other Specialty Physicians				
8	Total Physicians (Lines 1–7)				
9a	Nurse Practitioners				
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10	Certified Nurse Midwives				
10a	Total NPs, PAs, and CNMs (Lines 9a–10)				

Excerpt from Table 5

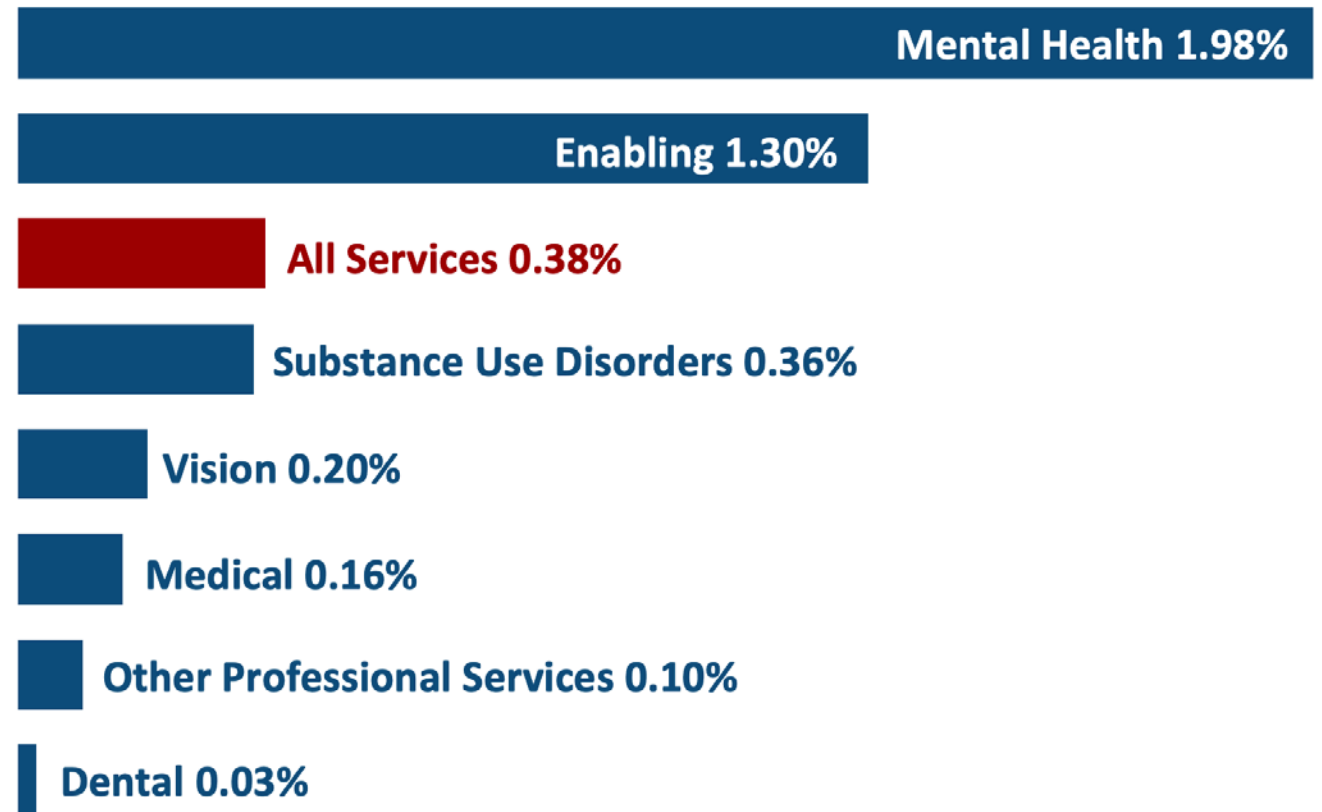


Summary of Calendar Year (CY) 2019

Virtual Visit Findings

- Virtual visits were newly reportable in CY2019.
- Overall, virtual visits represented a small proportion of visits in 2019 (0.38%).
- Virtual visits were most commonly used for mental health services.
- Virtual visits are expected to increase in CY2020.

Percentage of Virtual Visits, CY2019
All Programs



What Counts as a Reportable Virtual Visit?

Examples of Type of Service*	Counts	Does Not Count
Health center provider provides in-scope services via telemedicine/telehealth to a patient not physically present at the same location as the provider.	X	
Health center provider provides out-of-scope services via telemedicine/telehealth to a patient not physically present at the same location as the provider.		X
A non–health center provider not physically present at the health center provides services to patient at the health center through telemedicine/telehealth, and the health center pays for the virtual services by the provider.	X	
A non–health center provider not physically present at the health center provides services for a patient at the health center through telemedicine/telehealth, and the health center does not pay for services by the provider.		X
A health center provider located at their home provides in-scope services via telemedicine/telehealth to a patient located within their own home.	X	
A patient and a provider discuss a patient’s health concerns via a secure message through the Electronic Health Record (EHR)/portal.		X
A staff member at the health center takes a photograph of a patient’s skin condition and sends it through the portal to a provider not physically present at the health center for diagnosis.		X
An interaction that is not coded or charged as telemedicine/telehealth services.		X

*Table assumes that interactions meet the other criteria of a visit (e.g., documented, conducted by a provider who exercises independent, professional judgement).



Resources for Telemedicine/Telehealth

- [UDS Manual Appendix A: Listing of Personnel](#)
- [UDS Training Website](#)
 - [UDS Virtual Visits Reporting Guide](#)
 - [BPHC COVID-19 Frequently Asked Questions \(FAQs\)](#)
- [UDS Resources](#)
- [U.S. Department of Health and Human Services \(HHS\) Telehealth Webpage](#)

Virtual Visit Knowledge Check

Which of the following examples **would** count as a reportable virtual visit for the purposes of the UDS Report?


- A. A provider sends a patient lab results via secure email through the EHR.
- B. A provider at your health center confers with a provider at a different health center via video chat to discuss a patient.
- C. A provider at the health center provides in-scope services via a secure video platform to a patient who is at home.
- D. A health center sends a patient medication reminders via an app on their smartphone.

Virtual Visit Knowledge Check (Cont.)

Which of the following examples **would** count as a reportable virtual visit for the purposes of the UDS Report?

- A. A provider sends a patient lab results via secure email through the EHR.
- B. A provider at your health center confers with a provider at a different health center via video chat to discuss a patient.
- C. **A provider at the health center provides in-scope services via a secure video platform to a patient who is at home.**
- D. A health center sends a patient medication reminders via an app on their smartphone.

Reporting Multiple Visits

- On any given day, a patient may have only one visit per service category.
 - If multiple providers in a single category deliver multiple services at the same location on a single day, count only one visit.
 - If services are provided by two different providers at ***two different sites*** on the same day, report two visits.
-  A virtual visit and a clinic visit are considered two different sites and may each be reported as a visit, even when they occur on the same day.

Reporting Nursing Visits

- Nursing visits must meet the criteria of a reportable visit to be counted in the UDS Report.
- It is also important that nursing visits:
 - Are reported only when the nurse saw the patient independently
 - Are not a continuation of a previous visit or a follow-up service
 - Are not a service that is never reportable in the UDS
- The most common reportable nursing visits are those billed using CPT code 99211; however most 99211 services are **not** visits.
- The most common visit examples that may count include:
 - Triage
 - Nurse evaluation of a patient's medical condition and patient doesn't see another medical provider
 - Home health care
- For additional information on nursing visits, review the [Nurse Visits for UDS Reporting](#) resource.



Definition: Patient

- A **patient** is someone who has had at least one reportable visit during the reporting year.
- Within ***each service category*** on Table 5, include in Column C as ***one*** patient:
 - A person who had one or more reportable clinic visits
 - A person who had one or more reportable virtual visits
 - A person who had one or more reportable clinic visits *and* one or more virtual visits



The term “patient” applies to anyone who receives a reportable *clinic or virtual visit*.

- Some services do not count as a reportable visit for the purposes of the UDS Report. Do not count as a patient any individual who only receives non-reportable services.

Reporting Table 6A Diagnosis and Services

- Table 6A provides data on selected diagnosis and selected services rendered as part of reportable visits with select staff.
- Tests and treatments captured on Table 6A may be reported as visits when they meet the criteria of a reportable visit **and** are either:
 - Performed by the health center
 - Not performed by the health center, but paid for by the health center
 - Not performed or paid for by the health center, but the results are returned to the health center provider to evaluate and provide results to the patient

Line	Service Category	Applicable ICD-10-CM, CPT-4/II, or HCPCS Code	Number of Visits (a)	Number of Patients (b)
Selected Diagnostic Tests/ Screening/Preventive Services				
21	HIV test	CPT-4: 86689, 86701 through 86703, 87389 through 87391, 87534 through 87539, 87806		
21a	Hepatitis B test	CPT-4: 86704 through 86707, 87340, 87341, 87350		
21b	Hepatitis C test	CPT-4: 86803, 86804, 87520 through 87522		
21c	Novel coronavirus (SARS-CoV-2) diagnostic test	CPT-4: 87635 HCPCS: U0001, U0002, U0003, U0004		
21d	Novel coronavirus (SARS-CoV-2) antibody test	CPT-4: 86328, 86769		

**Excerpt from Table 6A*



Example: Reporting Table 6A Diagnosis and Services

- Example 1: A person who received a COVID-19 test then receives subsequent treatment for a COVID-19 diagnosis:
 - The test, treatment, patient, and visit are reported on Table 6A **and**
 - The patient and visit are reported on all appropriate UDS tables
- Example 2: A person only receives a COVID-19 test from the health center and has no other reportable visits with the health center:
 - *This encounter and person are not reported anywhere in the UDS Report*

Review page 62 of the UDS Manual for additional information.

Line	Service Category	Applicable ICD-10-CM, CPT-4/II, or HCPCS Code	Number of Visits (a)	Number of Patients (b)
Selected Diagnostic Tests/ Screening/Preventive Services				
21	HIV test	CPT-4: 86689, 86701 through 86703, 87389 through 87391, 87534 through 87539, 87806		
21a	Hepatitis B test	CPT-4: 86704 through 86707, 87340, 87341, 87350		
21b	Hepatitis C test	CPT-4: 86803, 86804, 87520 through 87522		
21c	Novel coronavirus (SARS-CoV-2) diagnostic test	CPT-4: 87635 HCPCS: U0001, U0002, U0003, U0004		
21d	Novel coronavirus (SARS-CoV-2) antibody test	CPT-4: 86328, 86769		

**Excerpt from Table 6A*



Completing the Selected Service Detail Addendum to Table 5



Purpose of Table 5 Addendum

- The Table 5 addendum captures data on mental health (MH) services provided by medical providers.
- It also captures data on substance use disorder (SUD) services provided by medical providers *and* MH providers.
- Together with services/visits reported in the main part of Table 5, the addendum provides an ***unduplicated count*** of MH and SUD services across all provider types.

Line	Personnel by Major Service Category: Mental Health Service Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a01	Physicians (other than Psychiatrists)				
20a02	Nurse Practitioners				
20a03	Physician Assistants				
20a04	Certified Nurse Midwives				
Line	Personnel by Major Service Category: Substance Use Disorder Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
21a	Physicians (other than Psychiatrists)				
21b	Nurse Practitioners (Medical)				
21c	Physician Assistants				
21b	Certified Nurse Midwives				
21e	Psychiatrists				
21f	Licensed Clinical Psychologists				
21g	Licensed Clinical Social Workers				
21h	Other Licensed Mental Health Providers				

**Table 5 Selected Service Detail Addendum*



Reporting Personnel in Addendum

- In Column A1, report the **number** of providers who provided MH and/or SUD treatment.
 - Medical providers can be reported once in each section (MH and SUD) if they provide both MH and SUD services in the context of medical visits.



The addendum documents **number** of personnel. Do not report FTEs in the addendum.



Providers contracted on a fee-for-service basis should be reported in the addendum (but not in the main part of Table 5).

Line	Personnel by Major Service Category: Mental Health Service Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a01	Physicians (other than Psychiatrists)				
20a02	Nurse Practitioners				
20a03	Physician Assistants				
20a04	Certified Nurse Midwives				
Line	Personnel by Major Service Category: Substance Use Disorder Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
21a	Physicians (other than Psychiatrists)				
21b	Nurse Practitioners (Medical)				
21c	Physician Assistants				
21b	Certified Nurse Midwives				
21e	Psychiatrists				
21f	Licensed Clinical Psychologists				
21g	Licensed Clinical Social Workers				
21h	Other Licensed Mental Health Providers				

**Table 5 Selected Service Detail Addendum*



Reporting MH/SUD Treatment Provided as Part of Medical Visits in the Addendum

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1	Family Physicians				
2	General Practitioners				
3	Internists				
4	Obstetrician/Gynecologists				
5	Pediatricians				
7	Other Specialty Physicians				
8	Total Physicians (Lines 1–7)				
9a	Nurse Practitioners				
9b	Physician Assistants				
10	Certified Nurse Midwives				
10a	Total NPs, Pas, and CNMs (Lines 9a–10)				
11	Nurses				
12	Other Medical Professional				
13	Laboratory Personnel				
14	X-ray Personnel				
15	Total Medical Care Services (Lines 8 + 10a through 14)				

Line	Personnel by Major Service Category: Substance Use Disorder Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
21a	Physicians (other than Psychiatrists)				
21b	Nurse Practitioners (Medical)				
21c	Physician Assistants				
21b	Certified Nurse Midwives				

Medical FTEs, Visits, and Patients are reported in Lines 1–15 of the main part of Table 5.

Corresponding providers, visits, and patients may ***also*** be reported on the MH/SUD addendum ***if/when*** MH or SUD services were provided.

Reporting SUD Treatment Provided as Part of MH Visits in the Addendum

Mental health FTEs, Visits, and Patients are reported on Lines 20a–20 of the main part of Table 5. These mental health staff, visits, and patients may **also** be reported on the addendum, *if/when* SUD treatment were provided.

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a	Psychiatrists				
20a1	Licensed Clinical Psychologists				
20a2	Licensed Clinical Social Workers				
20b	Other Licensed Mental Health Providers				
20c	Other Mental Health Staff				
20	Total Mental Health Services (Lines 20a–c)				
21	Substance Use Disorder Services				

Line	Personnel by Major Service Category: Substance Use Disorder Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
21a	Physicians (other than Psychiatrists)				
21b	Nurse Practitioners (Medical)				
21c	Physician Assistants				
21b	Certified Nurse Midwives				
21e	Psychiatrists				
21f	Licensed Clinical Psychologists				
21g	Licensed Clinical Social Workers				
21h	Other Licensed Mental Health Providers				



Line 21 in main part of Table 5 fully captures **SUD FTEs, Visits, and Patients** (do not report in addendum).



Determining Visits to Include in Addendum

Include, at minimum, all reportable visits with providers included in Column A1 (Personnel), with International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) codes noted in Table 6A:

- SUD: Lines 18–19a
- MH: Lines 20a–20d

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
Selected Mental Health Conditions , Substance Use Disorders, and Exploitations				
18	Alcohol-related disorders	F10-, G62.1, O99.31-	18–19a = SUD	
19	Other substance-related disorders (excluding tobacco use disorders)	F11- through F19- (exclude F17-), G62.0, O99.32-		
19a	Tobacco use disorder	F17-, O99.33-		
20a	Depression and other mood disorders	F30- through F39-	20a–20d = MH	
20b	Anxiety disorders, including post-traumatic stress disorder (PTSD)	F06.4, F40- through F42-, F43.0, F43.1-, F93.0		
20c	Attention deficit and disruptive behavior disorders	F90- through F91-		
20d	Other mental disorders, excluding drug or alcohol dependence	F01- through F09- (exclude F06.4), F20- through F29-, F43- through F48- (exclude F43.0- and F43.1-), F50- through F99- (exclude F55-, F84.2, F90-, F91-, F93.0, F98-), O99.34-, R45.1, R45.2, R45.5, R45.6, R45.7, R45.81, R45.82, R48.0		

Determining Visits to Include in Addendum (Cont.)

Table 6A

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
Selected Mental Health Conditions, Substance Use Disorders, and Exploitations				
18	Alcohol-related disorders	F10-, G62.1, O99.31-		
19	Other substance-related disorders (excluding tobacco use disorders)	F11- through F19- (exclude F17-), G62.0, O99.32-		
19a	Tobacco use disorder	F17-, O99.33-		
20a	Depression and other mood disorders	F30- through F39-		
20b	Anxiety disorders, including post-traumatic stress disorder (PTSD)	F06.4, F40- through F42-, F43.0, F43.1-, F93.0		
20c	Attention deficit and disruptive behavior disorders	F90- through F91-		
20d	Other mental disorders, excluding drug or alcohol dependence	F01- through F09- (exclude F06.4), F20- through F29-, F43- through F48- (exclude F43.0- and F43.1-), F50- through F99- (exclude F55-, F84.2, F90-, F91-, F93.0, F98-), O99.34-, R45.1, R45.2, R45.5, R45.6, R45.7, R45.81, R45.82, R48.0	<blank>	<blank>

Addendum

Line	Personnel by Major Service Category: Mental Health Service Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a01	Physicians (other than Psychiatrists)				
20a02	Nurse Practitioners				
20a03	Physician Assistants				
20a04	Certified Nurse Midwives				
Line	Personnel by Major Service Category: Substance Use Disorder Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
21a	Physicians (other than Psychiatrists)				
21b	Nurse Practitioners (Medical)				
21c	Physician Assistants				
21b	Certified Nurse Midwives				
21e	Psychiatrists				
21f	Licensed Clinical Psychologists				
21g	Licensed Clinical Social Workers				
21h	Other Licensed Mental Health Providers				

Example: Reporting Visits in the Addendum

A family physician who works part-time sees a patient for an annual check-up, and during that visit the provider also treats the patient for depression and opioid use disorder (OUD).

- The **provider** is reported in **three** places on Table 5:
 - FTE on Line 1 (0.5 FTE Family Physician)
 - 1 person on Line 20a01: Physician providing Mental Health Services
 - 1 person on Line 21a: Physician providing SUD Services
- The **visit** is reported in **three** places on Table 5:
 - Report the medical treatment (annual check-up) provided by the family physician in the main part of Table 5, on Line 1, and include the patient in the total on Line 15
 - Report the depression treatment (MH) provided by the physician in the Selected Services Detail section, Line 20a01
 - Report the treatment provided for OUD in the SUD Selected Service Detail section, on the Physician Line, Line 21a

Addendum Knowledge Check

Which of the following visits **would not** be reported in the Selected Services Detail Addendum?

- A. A family physician provides treatment for depression to a patient during an annual check-up.
- B. A substance use disorder (SUD) specialist provides counseling to a patient with a SUD.
- C. A psychiatrist provides substance use treatment to a patient.
- D. A physician assistant provides medication-assisted treatment (MAT) services to a patient with an opioid use disorder.

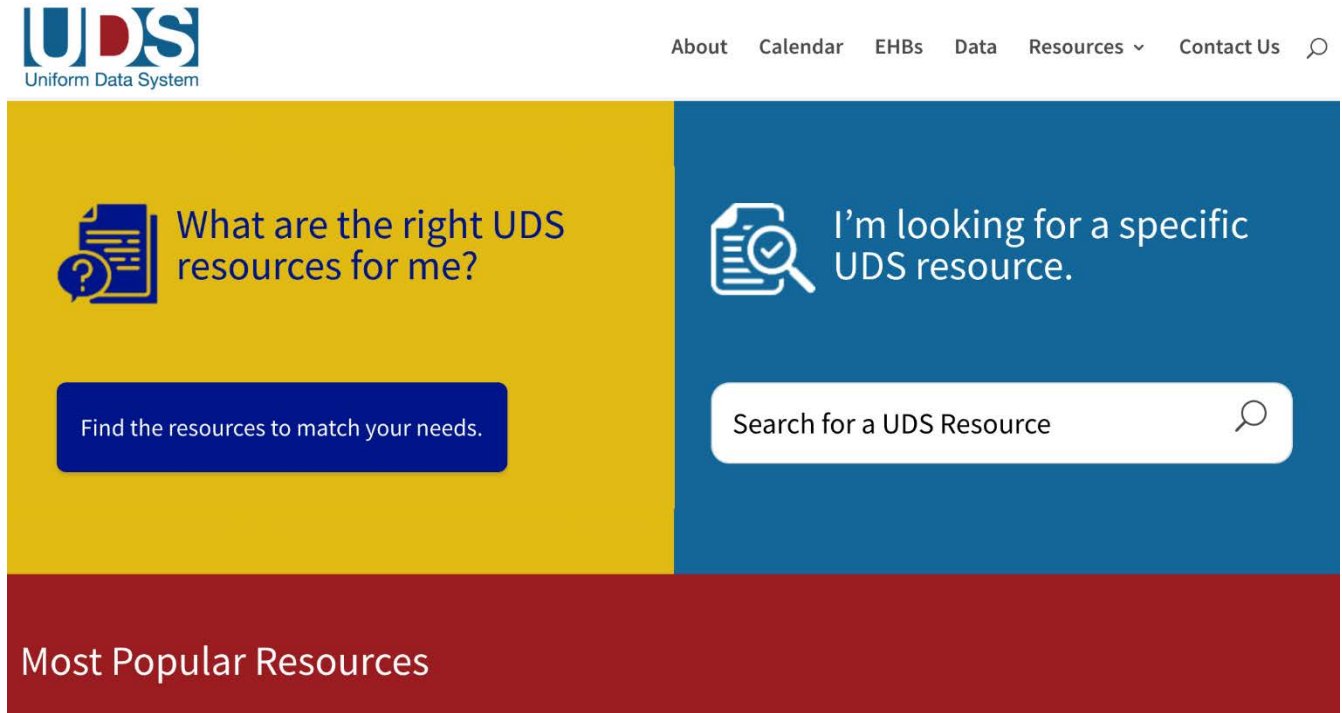
Addendum Knowledge Check (Cont.)

Which of the following visits **would not** be reported in the Selected Services Detail Addendum?

- A. A family physician provides treatment for depression to a patient during an annual check-up.
- B. A substance use disorder (SUD) specialist provides counseling to a patient with a SUD.**
- C. A psychiatrist provides substance use treatment to a patient.
- D. A physician assistant provides medication-assisted treatment (MAT) services to a patient with an opioid use disorder.

Resources for Completing the Addendum

- [UDS Training Website](#)
 - [UDS Reporting Instructions Manual](#)
 - [Mental Health/Substance Use Disorder Services Detail Handout](#)
- [UDS Resources Website](#)



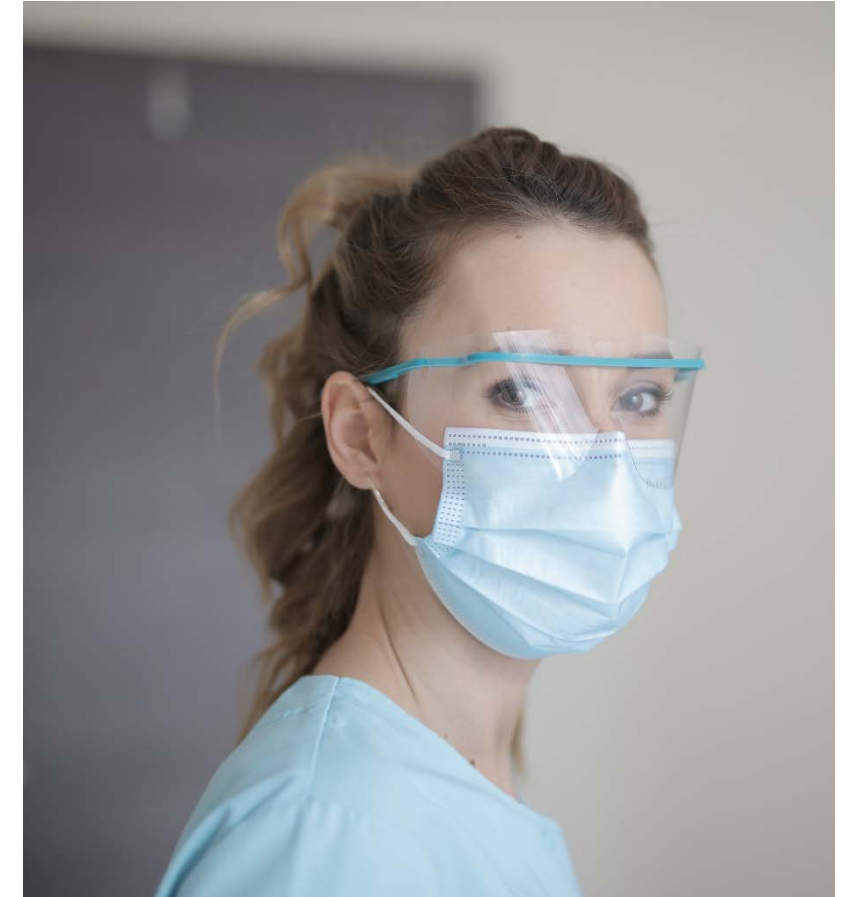
UDS Training Website

COVID-19 and Reportable Visits



Reporting Visits During COVID-19

- **UDS definitions of reportable patient visits remain in effect for the 2020 UDS Report.**
 - If an individual is screened or tested for COVID-19, but the health center *does not* provide additional services that meet the criteria of a reportable visit, this person and visit are not reported in the UDS Report.
 - If an individual is screened or tested for COVID-19 *and* the health center provides additional services that meet the criteria of a reportable visit, this patient and visit are reported in the UDS Report.



Source: Pexels

Virtual Visits During COVID-19

- The Centers for Medicare & Medicaid Services (CMS) has expanded telemedicine to allow virtual visits to be conducted with a patient in any location for the duration of the COVID-19 public health emergency. **Telehealth visits must still meet the criteria for visits to be reported in the UDS Report.**
- Telehealth visits may count toward clinical quality measures (CQMs) if they meet:
 - the CQM's specifications as directed by [CMS](#),
 - the measure steward guidance, and
 - UDS' definition of a virtual visit.

A patient reported due to a medical virtual visit *must also* be reported in all patient/demographic profile tables (Tables 3A, 3B, 4, and the ZIP Code Table) and considered in all appropriate clinical measures tables (Tables 6A, 6B, and 7).



Additional Resources and Support



UDS Support

- [UDS Reporting Instructions](#)
- [UDS Training Website](#)
- [UDS Resources Website](#)

Ongoing UDS content-related questions can
be addressed to
udshelp330@bphcddata.net
866-UDS-HELP

For other questions, consult the [UDS
Training Website Contact Us Resources](#)

Upcoming Webinars

- Upcoming Webinars
 - UDS Clinical Tables Part 1: Screening and Preventive Care (9/24/20, 1–2:30 p.m. ET)
 - UDS Clinical Tables Part 2: Women and Children’s Health (9/30/20, 1–2:30 p.m. ET)
 - UDS Clinical Tables Part 3: Disease Management (10/8/20, 1–2:30 p.m. ET)
 - Reporting UDS Financial and Operational Tables (10/22/20, 1–2:30 p.m. ET)
 - Using Comparison Performance Metrics from UDS Tables 8A, 9D, and 9E (10/28/20, 1–2:30 p.m. ET)
- Webinars will be archived on [HRSA’s Health Center Program Website](#).



Thank You!

Nicole Giron

Training and Technical Assistance Specialist, John Snow, Inc.

Bureau of Primary Health Care (BPHC)

Health Resources and Services Administration (HRSA)



udshelp330@bphcdata.net



866-UDS-HELP

<https://bphc.hrsa.gov/>



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