



<b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b> <b>Health Resources and Services Administration</b>  <b>Patient Impact Form</b>	<b>FOR HRSA USE ONLY</b>	
	<b>Grant Number</b>	<b>Application Tracking Number</b>

You must propose to increase the number of patients who will newly access integrated SUD and/or mental health services as a result of SUD-MH funding by December 31, 2019 (in Questions 1 and/or 3 below).

If you are eligible for and request additional MAT funding, you must also increase the number of patients receiving MAT for OUD by December 31, 2019 (in Question 5 below).

Note the following when completing this form:

- Break down your patient projection by existing patients that will access SUD and/or mental health services for the first time as a result of this funding separately from the projection for new patients. An example patient projection is provided on the [SUD-MH technical assistance website](#).
- A projection of new patients is not required if the proposed project will focus on making expanded SUD and/or mental health services newly available for existing health center patients who have not accessed these services through the health center in the past, and a projection for existing patients is provided below.
- If new patients are projected, enter the population type breakdown for the new unduplicated patients only in the Patients by Population Type section below.
- See the [2017 UDS Manual](#) for the definition of patients.

**Existing Patient Impact**

**1. Total Unduplicated Existing Patients:** Enter the total number of existing patients who will newly access SUD and/or mental health services in calendar year 2019 as a result of SUD-MH funding (e.g., existing medical patients not currently accessing these services that will begin to do so).

Attribute each patient to EITHER SUD or mental health in your response to Question 1, even if some existing patients are expected to access both expanded services (i.e., count each existing projected patient only once in this unduplicated patient projection).

**2. Existing Patients by Service Type:** Enter the number of existing patients who will newly access each service in calendar year 2019 below.

Count each projected existing patient according to the services they are expected to access. If a patient will start accessing both SUD and mental health services, they should be counted once for SUD and once for mental health.

A. SUD Services Patients	
B. Mental Health Services Patients	
<b>New Patient Impact</b>	
<p><b>3. <u>Total Unduplicated New Patients:</u> Enter the number of <u>new</u> patients (new to the health center) who will access SUD and/or mental health services in calendar year 2019 as a result of SUD-MH funding.</b></p> <p>Attribute each patient to EITHER SUD or mental health in your response to Question 3, even if some new patients are expected to access both expanded services (i.e., count each new projected patient only once in this unduplicated patient projection).</p> <p><b>Note:</b> New unduplicated projected patients entered in response to this question will be added to your patient target. Failure to achieve this new patient projection by December 31, 2019 may result in a funding reduction when your service area is next competed through Service Area Competition (SAC). See the <a href="#">SAC technical assistance website</a> for patient target resources.</p>	
<p><b>4. <u>New Patients by Service Type:</u> Enter the number of new patients (new to the health center) who will access each service in calendar year 2019 below.</b></p> <p>Count each projected new patient according to the services they are expected to access. If a new patient will access both SUD and mental health services, they should be counted once for SUD and once for mental health.</p>	
A. SUD Services Patients	
B. Mental Health Services Patients	
<b>Additional MAT Funding Impact</b>	
<p><b>5. <u>Patients Projected to Receive MAT:</u> Enter the number of existing and new patients who will newly receive MAT for OUD from a physician, certified nurse practitioner, or physician assistant with a DATA waiver working on behalf of the health center in calendar year 2019.</b></p> <p>For this projection, count existing patients that will begin to receive MAT for the first time, as well as new health center patients accessing MAT as a result of SUD-MH funding.</p>	



**New Patients by Population Type**

Enter the total number of new unduplicated patients by Health Center Program population type. The total must equal the number of new unduplicated patients entered in response to Question 3 above, if any. The information entered in the table below will be used to populate future Budget Period Progress Reports.

Population Type	NEW Patients Projected
<b>Total NEW Patients (from Question #3)</b>	[Prepopulated by EHB from response to Question 3 above]
<ul style="list-style-type: none"> <li>• <b>General Underserved Community</b></li> </ul>	
<ul style="list-style-type: none"> <li>• <b>Migratory and Seasonal Agricultural Workers</b></li> </ul>	
<ul style="list-style-type: none"> <li>• <b>People Experiencing Homelessness</b></li> </ul>	
<ul style="list-style-type: none"> <li>• <b>Public Housing Residents</b></li> </ul>	
<b>Total NEW Patients by Population Type</b>	[Calculated by EHB – must match the number entered for Question 3 above]

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0285. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 10-33, Rockville, Maryland, 20857.