

WELCOME!

- We'll get started momentarily.
- Your microphone, video, and chat features are not needed and will remain deactivated.
- To view closed captioning, select the *Show Captions* icon in the meeting controls toolbar.
- Please submit questions at any time in the Q&A feature.
- If you still have questions at the end of this session, please contact Health Center Program Support.





Bureau of Primary Health Care Program Updates

September 29, 2026

Vision: Healthy Communities, Healthy People



Health Center Program Updates

AGENDA

- ☐ Welcome and Agenda
- ☐ Uniform Data System (UDS) Updates
- ☐ Scope of Project Update
- ☐ Funding Updates
- ☐ Bureau Updates
- ☐ Mark Your Calendar
- ☐ Q&A



2025 Uniform Data System (UDS) Trends

Alison Feise, Public Health Advisor

Data and Evaluation Division, Office of Quality Improvement

Bureau of Primary Health Care



Uniform Data System Reporting Milestones

**Thank you to
all 2025 UDS
reporting teams!**

UDS Reporting Timeline

CY2025	• UDS Preliminary Reporting Environment (PRE) for 2025 opened October
CY2026	• UDS Reporting Period for 2025 Data (Jan 1 – Feb 15, 2026) • Public/Web Release of 2025 UDS – August 3rd at the start of National Health Center Week • UDS PRE for 2026 opens in November
CY2027	• UDS Reporting Period for 2026 Data (Jan 1 – Feb 15, 2027)



Record Number of Patients Served

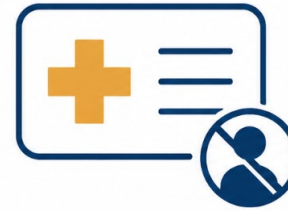
Health centers provided affordable, accessible, high quality preventive and primary health care to **32.7 million** patients across the country, an increase of over **358,000** patients since 2024.



90%
of patients
at or below 200%
of the federal
poverty guideline



3.8M
Medicare
patients



5.6M
uninsured
patients



15.6M
Medicaid
patients



1 in 15
people 65 or
older



1 in 8
children



1 in 5
people living
in rural
communities



414K
veterans

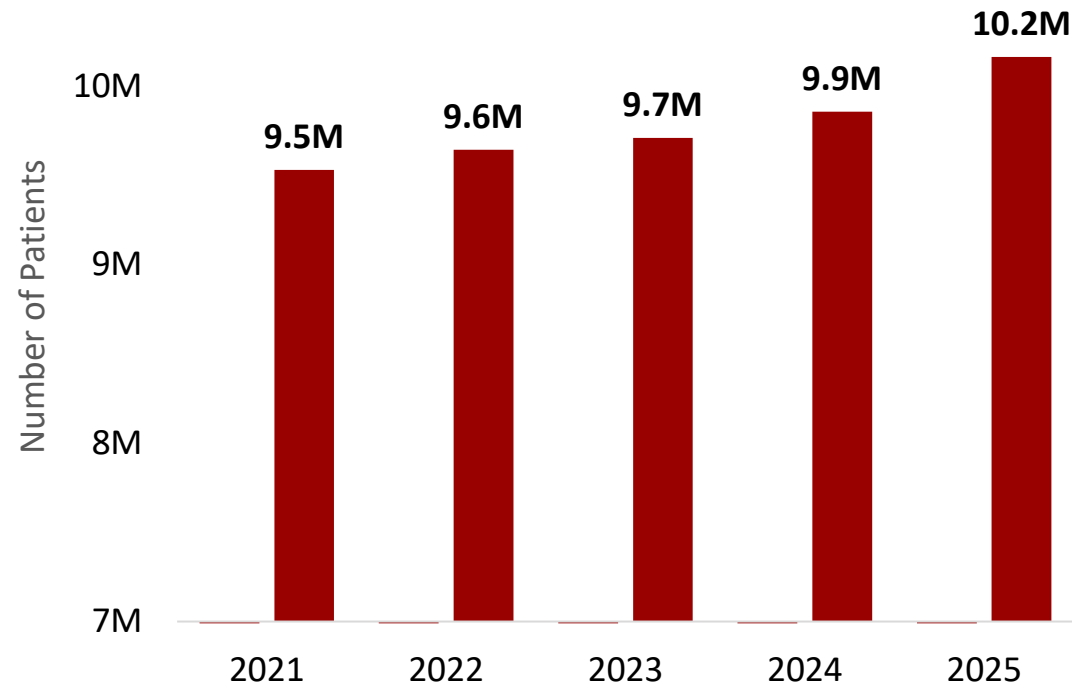


Source: Uniform Data System, 2025 – Table 3A, Table 3B, and Table 4

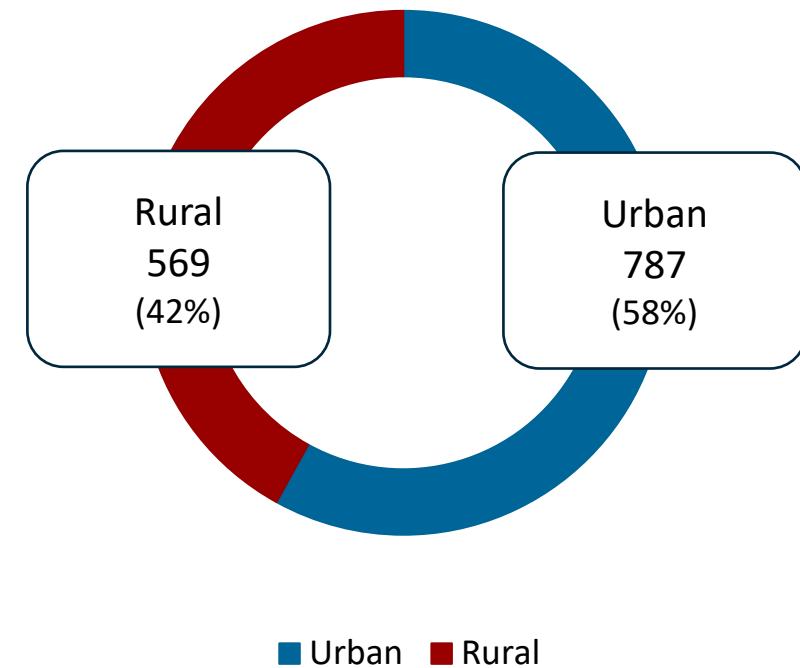
Rural Health Centers Fuel Patient Growth

Nearly 308,000 additional patients were served by rural health centers – 86% of total growth in 2025

Number of Health Center Patients Served
by Rural Health Centers



Number of Health Centers in 2025

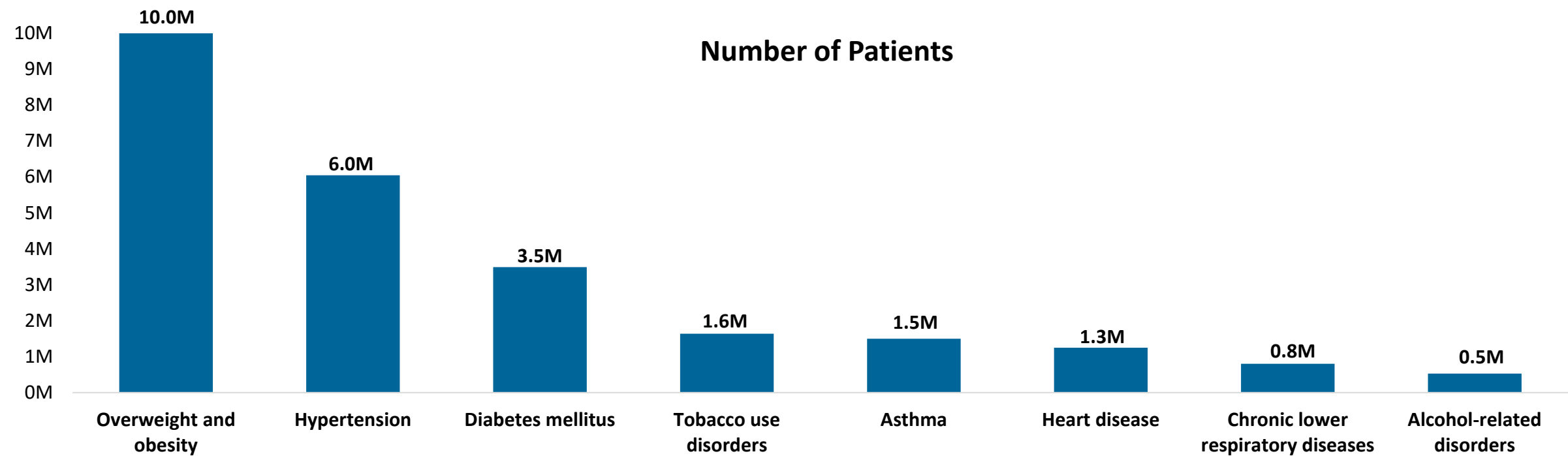


Note: HRSA is required to make awards to ensure that the ratio of rural to urban target populations is not less than two to three or greater than three to two as set forth in 42 USC §254b.

Source: Uniform Data System, 2021-2025 – Table 3A

Health Centers Serve Patients with Complex Health Needs

Managing chronic disease is a core component of primary care delivery



Source: Uniform Data System, 2025 – Table 6A



Health Centers Advance Preventive Care

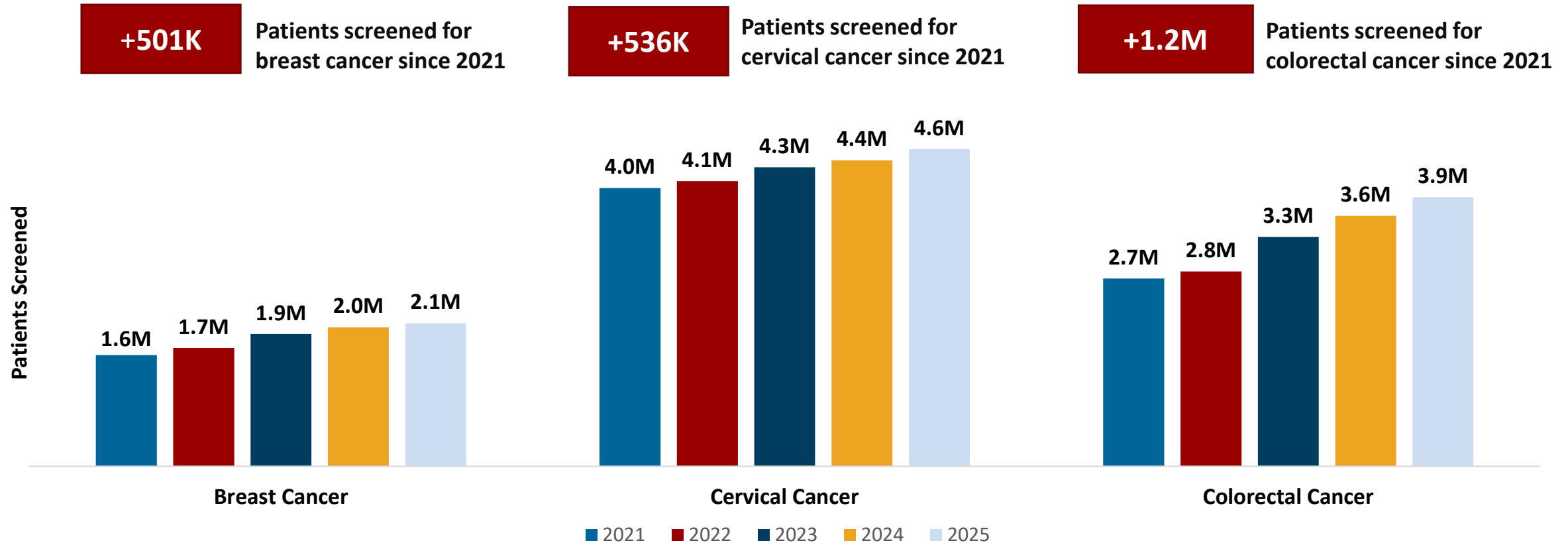
Chronic Disease Prevention/Management	2021	2024	2025	Change in Number of Patients; 2024-2025	Change in Number of Patients; 2021-2025
Hypertension Control	60% (3,329,017)	67% (3,687,941)	69% (3,850,469)	+162,528	+521,452
Controlled Diabetes (<9% HbA1c)	68% (1,808,421)	72% (2,238,249)	74% (2,363,970)	+125,721	+555,549
Nutrition Counseling/Health Education	2021	2024	2025	Change in Number of Patients; 2024-2025	Change in Number of Patients; 2021-2025
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	69% (3,602,381)	73% (4,573,353)	75% (4,692,006)	+118,653	+1,089,625
Adult Weight Assessment and Follow-up Plan	61% (9,823,612)	68% (12,355,556)	70% (13,067,999)	+712,443	+3,244,387
Tobacco Use Screening and Cessation	82% (10,747,935)	84% (13,876,552)	85% (15,006,442)	+1,129,890	+4,258,507
Cancer Screening	2021	2024	2025	Change in Number of Patients; 2024-2025	Change in Number of Patients; 2021-2025
Breast Cancer Screening	46% (1,557,112)	54% (1,966,405)	56% (2,058,248)	+91,843	+501,136
Colorectal Cancer Screening	42% (2,680,583)	43% (3,617,246)	45% (3,868,425)	+251,179	+1,187,842
Cervical Cancer Screening	53% (4,025,004)	55% (4,431,850)	57% (4,560,965)	+129,115	+535,961
Mental Health Care	2021	2024	2025	Change in Number of Patients; 2024-2025	Change in Number of Patients; 2021-2025
Screening for Depression and Follow-up	67% (10,949,757)	74% (15,446,771)	75% (16,047,663)	+600,892	+5,097,906

¹Measure first captured in 2020. Trend shown is based on data from 2021-2025.

Source: Uniform Data System 2021, 2025 – Table 6B, Table 7; *Each measure is the percent of eligible patients who received the service or experienced the outcome.

Driving Better Health Through Prevention

More Patients Are Screened for Cancer

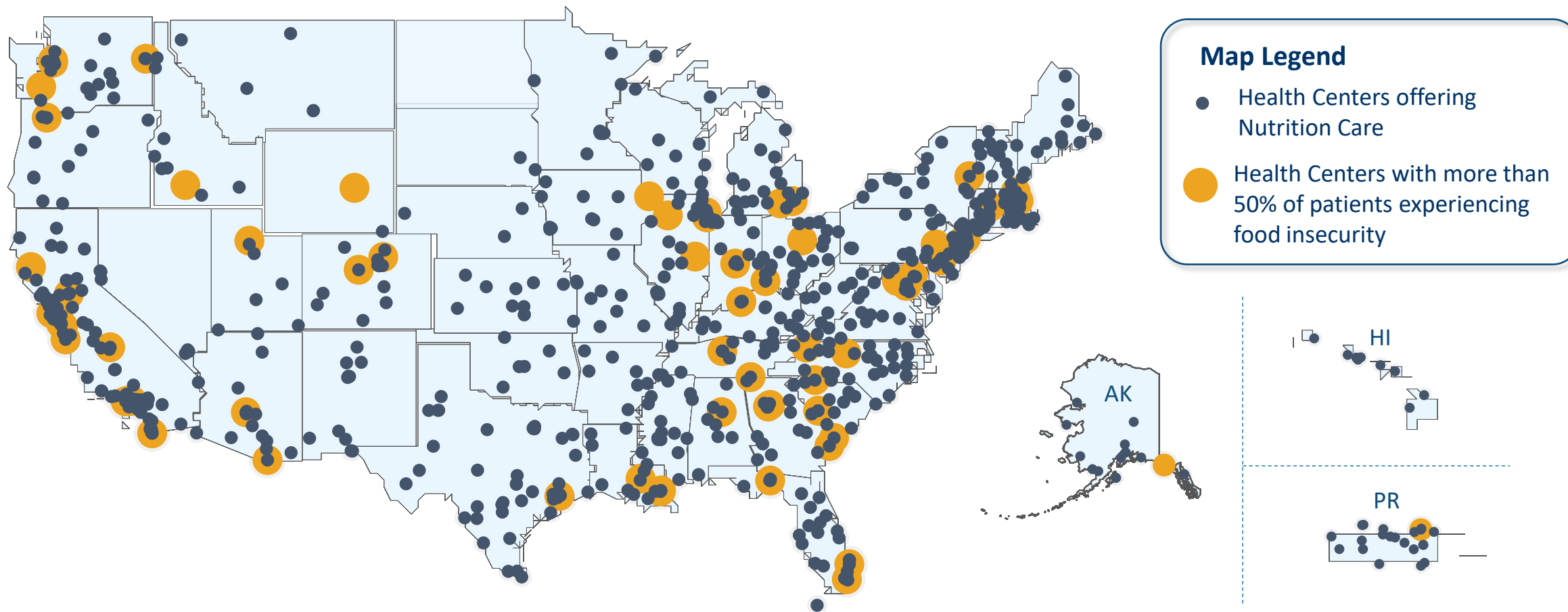


Note: Patients screened based on those that met CQM inclusion criteria
For each chart, the order from left to right is 2021, 2022, 2023, 2024, 2025



Expanding Access to Nutrition Services

Nearly two thirds of health centers (850+) offer nutrition care



Source: Uniform Data System 2025 – Table 5, Table EHR, Table Workforce, BHCNIS Form 5A Snapshot.
Not shown in map: VI (1), MH (1), PW (1), GU (1), AS (1), and FM (3) health centers.

Nutrition: Clinical Quality Continues to Improve

+1.1 Million More Patients Screened

	Body Mass Index (BMI) Screening and Follow Up (Adult)	+6%
	Controlled Diabetes (Hba1c <9%)	+6%
	Hypertension Control	+4%
	Weight Assessment and Nutrition Counseling (Child)	+3%

Rural Health Centers Saw the Largest Gains



+10%

More patients with controlled diabetes¹



+9%

More patients with BMI Screening¹

Among rural health centers serving 5,000 – 15,000 patients since 2024¹



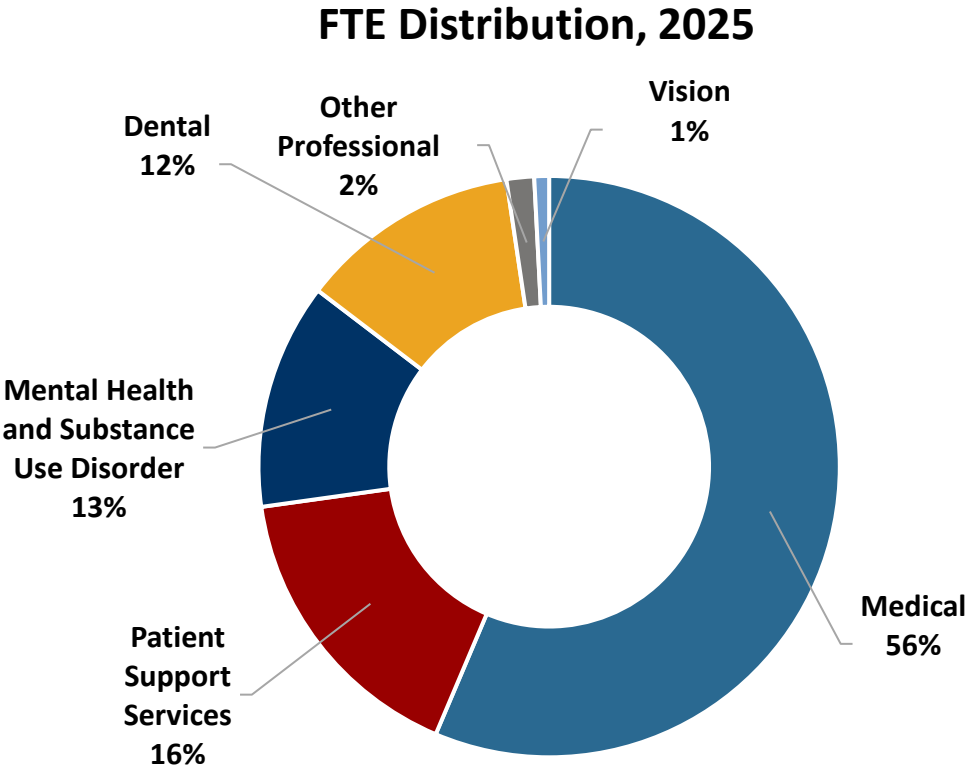
KEY TAKEAWAY: Nutrition quality improved across health centers, with the largest gains among rural health centers.



Source: Uniform Data System 2024-2025 – Table 5, 6B, 7, and Workforce

Growing the Health Center Workforce

Health Centers expanded workforce by 18% (+49,000 FTEs) since 2021



Source: Uniform Data System, 2021-2025 – Table 5

Other Professional Services include: registered dietitians, podiatrists, chiropractors, community and behavioral health aides/practitioners, therapists, etc.



UDS Data Resources

Electronic Handbooks (EHBs)

- UDS Summary Report
- UDS Trend Report
- UDS Roll Up Report
- Health Center Performance Comparison Report
- UDS data file

→ View the [UDS 2026 Office Hours](#) August 6th recording and slides for more information

HRSA Webpages (data.hrsa.gov)

- [Health Center Program UDS Data webpage](#)
 - Award Recipients [National Summary](#)
 - National [UDS data files](#) for award recipients and look-alikes

Thank you!

Contact our team through the [BPHC Contact Form](#) by selecting UDS Reporting or Health Center Data and Public Resources



2026 Uniform Data System (UDS) Updates

Jonjelyn Gamble, Lead Public Health Analyst
Data and Evaluation Division, Office of Quality Improvement
Bureau of Primary Health Care



2026 Uniform Data System (UDS) Updates

Key Changes: New Measures

New in Table 6A: Selected Diagnoses and Services Rendered:

- Diabetes Mellitus Type 1
- Intellectual and Developmental Disabilities
- Autism Spectrum Disorder Screening
- Patient Support Services
- Upstream Drivers of Health Services

New in Appendix C (formerly Appendix D): Health Center Information Technology (IT) Capabilities and Other Data Elements:

- Alternative Payment Models (APM) (questions 17-19)
- Sex rejecting services and procedures (question 20)

New in Table 6B: Quality of Care Measures:

- Falls: Screening for Future Fall Risk
- Sealant Receipt on Permanent First Molars (SFM-CH)
(Replaces former Dental Sealants measure)

Resources

- [2026 UDS Final Changes PAL](#)
- [2026 UDS Manual](#)
- [2026 UDS Changes Webinar](#)

View the [UDS Reporting Training Schedule](#) webpage to register for the UDS webinar series and view archived webinars.



Hypertension Control TA Opportunity

Accelerating Chronic Disease Management Through SMBP and Community Wellness

- A new initiative to help health centers adopt and expand self-measured blood pressure (SMBP) and implement community wellness programming to improve hypertension control.
- Up to 50 participating health centers, selected through an application process.
- 12-month cohort begins December 2026.

Join **tomorrow's webinar** to learn more!

Wednesday, September 30, 2026

12:00 - 1:00 p.m. ET

[Register here](#)



Health Center Program Scope of Project Updates

Lauren Spears, Director

Program Guidance Division, Office of Policy and Program Development

Bureau of Primary Health Care



New Release: Scope Manual

- We published the [Health Center Program Scope of Project Policy Manual](#) on August 11, 2026.
- The Scope Manual:
 - ✓ Consolidates, streamlines, and updates scope-related policies.
 - ✓ **Is effective immediately.**
 - ✓ Incorporates your feedback received during the open comment period.
- Our systems, processes, and webpages will be updated in a phased approach.
- A summary of the [major changes](#) is available now.
- Stay tuned for additional resources and materials.



Why is the Scope Manual Important?

- **Modernizes:** Consolidates all scope of project policy into one document, incorporates updated grant regulations, aligns with Compliance Manual
- **Strengthens Programmatic Oversight:** Provides health centers with greater transparency and clarity and supports consistent and rapid decision making.
- **Ensures Accountability:** Improves HRSA's ability to hold health centers accountable to comply with program requirements and to use funds correctly.
- **Simplifies:** Reduces administrative burden by removing outdated forms and requirements. Allows health centers more autonomy in certain processes.



Scope Manual Key Changes

The Scope Manual increases health center accountability and strengthens HRSA oversight by establishing new and reaffirming existing policies in the following areas:

- **Limits New Subrecipient or Contractor Sites:** Defines a new threshold HRSA will consider before some health centers can add new sites operated by a subrecipient or contractor.
- **Telehealth:** Establishes criteria for the delivery of services through telehealth.
- **Service Area and Adding Sites:** Establishes factors that HRSA may consider when deciding whether to approve a health center's request to add a new site.
- **Responding to Emergency Events and Establishing Temporary Sites:** Clarifies policy for adding temporary sites during emergencies.
- **Mobile Units:** Mobile units may serve a health center's service area and adjacent areas but cannot alone be used to add new ZIP Codes to the service area.



Scope of Project Updates

Scope System Improvements Program Assistance Letter (PAL) - Released 8/14

Change in Scope (CIS): System Improvements



Simply the CIS Request Process

- ✓ Reduce administrative burden
- ✓ Make requests easier to prepare and submit
- ✓ Reduce requests for additional information



Strengthen the CIS Review Process

- ✓ Streamline review workflows
- ✓ Support more consistent and timely reviews
- ✓ Modernize internal review processes

~48% | Anticipated overall reduction in scope actions



System Notice

CIS Module Schedule



Closes: October 20



Reopens: November 20

CIS Module System Improvements

Health centers will **not be able to submit CIS requests** from **October 20, 2026, through November 19, 2026**. The CIS module will **reopen November 20, 2026**.

Important Deadlines:

- **October 19** (11:59 p.m. ET): Submit any new CIS requests. HRSA will close requests not submitted by this deadline.
- **October 24** (11:59 p.m. ET): Resubmit any CIS requests returned for clarification (Change Requests). HRSA will close requests not resubmitted by this deadline.

If a CIS request is closed, health centers may create and submit a new request when the CIS module reopens on November 20, 2026.



Preparing for the CIS System Closure

- **Plan ahead** for anticipated CIS request needs before the system closure.
- **Consult** your Project Officer early to discuss planned requests and timelines.
- **Submit** requests early to allow time for review and any needed revisions.
- **Monitor** request status and respond promptly to requests for additional information.
- **Complete** and resubmit draft and returned requests before the module closes.

Early planning and proactive communication helps minimize delays and supports timely processing before the system's pause.



Funding Updates

Matt Kozar, Director

Budget and Funding Division, Office of Policy and Program Development

Bureau of Primary Health Care



Funding Updates

Closed Funding Opportunities

FY 2027 Expanding Nutrition Services

- \$125 million for approximately 357 awards

Recently Awarded

FY 2026 Quality Improvement Fund – Improving Access to Dental Services for Children with Neurodevelopmental Disorders

- \$51 million for 28 awards

FY 2026 New Access Points

- \$102 million for 158 awards



FY 2027 Service Area Competition Updates

CURRENT COMPETITION DATE	WHAT TO KNOW
January 1 or February 1, 2027	Extended through June 30, 2027 . Stay tuned for more information.
March 1, 2027	Extended through July 31, 2027 . Stay tuned for more information.
April 1, 2027	Apply now to HRSA-27-005 by October 19, 2026 .
August 1, 2027	Welcome NAP new starts! Stay tuned for more information.



Updates from the Associate Administrator



Mark Your Calendar

BPHC Program Updates

- Thursday, October 22, 2 – 3 p.m. ET
- Thursday, November 12, 2 – 3 p.m. ET
- Thursday, December 17, 2 – 3 p.m. ET



Questions?



Thank You!

Bureau of Primary Health Care (BPHC)

Health Resources and Services Administration (HRSA)



[Health Center Program Support](#)



877-464-4772, 8 a.m. – 8 p.m. ET, Monday – Friday (except federal holidays)

bphc.hrsa.gov



[Sign up for the *Primary Health Care Digest*](#)



Connect with HRSA

Learn more about our agency at:

www.HRSA.gov

FOLLOW US:

