

UDS Forms: HIT Capabilities, Other Data Elements, and Workforce

This fact sheet provides guidance on completing the Appendix D: Health Center Health Information Technology (HIT) Capabilities, Appendix E: Other Data Elements, and Appendix F: Workforce forms that are required elements of the annual UDS submission. Each form will be discussed separately below.

APPENDIX D: HEALTH CENTER HEALTH INFORMATION TECHNOLOGY (HIT) CAPABILITIES FORM

PURPOSE:

Appendix D collects information on health centers' health information technology (HIT) capabilities, including questions about electronic health records (EHRs) interoperability, as well as eligibility for [CMS Promoting Interoperability programs](#).

CHANGES:

- Addition of Question 11a: Social Risk Factors
- Clarification of Questions 12a and 12b: Social Risk Factors
- Removal of Questions 1d and 1e: EHR
- Removal of Question 7: UDS Clinical Data

KEY TERMS:

Electronic Health Record (EHR). A digital record of a patient's registration profile, history of services provided, diagnostic results, and other patient information; it often includes a communication portal for patients and providers. The record information is made available securely to authorized users.

Health Information Exchange (HIE). According to [HealthIT.gov](#), HIEs allow health care professionals and patients to appropriately access and securely share a patient's vital medical information electronically.

HOW DATA ARE USED:

- The data are used to better understand HIT interoperability and patient access to health information. It also assesses how many health centers are collecting and using social determinants of health data.

FORM TIPS:

- Please respond to the questions in this form based on your health center status as of December 31 of the calendar year.
- The form provides definitions and explanations for each question. Please review carefully before responding.
- You will need to know your EHR vendor, product name, and version number. You will also need to obtain the Office of the National Coordinator for Health Information Technology (ONC) Certified Health IT Product List Number for your EHR. For more information, you can access the [Certified Health IT Product List](#).
- It is helpful to work with your EHR and HIT team early to make sure you have accurate information to complete this form.

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APPENDIX E: OTHER DATA ELEMENTS FORM

PURPOSE:

This form is used to capture the increasingly diverse and comprehensive care provided by health centers. These services include medication-assisted treatment (MAT), telehealth, and outreach and enrollment assists.

CHANGES:

- There are no changes to the Other Data Elements Form reporting requirements for 2022.

KEY TERMS:

Medication-Assisted Treatment (MAT) for Opioid Use Disorder. According to [SAMHSA](#), MAT is the use of FDA-approved medications, in combination with counseling and behavioral therapies, to provide a “whole-patient” approach to treatment of substance use disorders.

Drug Addiction Treatment Act (DATA) Waivers. The [Drug Addiction Treatment Act of 2000 \(DATA 2000\)](#) provides practitioners, including certain qualifying nurse practitioners (NPs), physician assistants (PAs), and certified nurse midwives (CNMs) waivers to treat opioid use disorder with medications specifically approved by the U.S. Food and Drug Administration (FDA) (i.e., buprenorphine).

Telemedicine and Telehealth. The term “telehealth” includes “telemedicine” services but encompasses a broader scope of remote health care services. Telemedicine is specific to remote clinical services, whereas telehealth may include remote non-clinical services, such as provider training, administrative meetings, and continuing medical education, in addition to clinical services.

HOW DATA ARE USED:

- The data are used to better understand how many patients are accessing MAT and how many providers have Drug Addiction Treatment Act (DATA) waivers to treat opiate use disorder with medications.
- Telemedicine and telehealth data are used to understand how many health centers are increasing access to services remotely through these delivery models.
- This form also captures the number of assists (customizable education sessions provided by a trained health center assister) to health center patients about affordable health insurance coverage options and any other assistance provided to facilitate health insurance enrollment.

FORM TIPS:

- Please respond to the questions in this form based on your health center status as of December 31 of the calendar year.
- The form provides definitions and explanations for each question. Please review carefully before responding.
- It is helpful to work with your team early to make sure you have accurate information to complete this form.
- Assists do not count as visits on the UDS tables. Refer to this [Outreach and Enrollment Assists Reporting resource for additional information](#).

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APPENDIX F: WORKFORCE FORM

PURPOSE:

To understand the current state of health center workforce training and different staffing models to better support recruitment and retention of health center professionals.

CHANGES:

- There are no changes to the Workforce Form reporting requirements for 2022.

KEY TERMS:

Training Sponsor. Hosts a comprehensive health profession education and/or training program, the implementation of which may require partnerships with other entities that deliver focused, time-limited education and/or training (e.g., a teaching health center with a family medicine residency program).

Training Site Partner. An entity that delivers focused, time-limited education and/or training to learners in support of a comprehensive curriculum hosted by another health profession education provider (e.g., month-long primary care dentistry experience for dental students).

Pre-graduate/Certificate Training. Examples include student clinical rotations or externships.

Post-Graduate Training. Examples include a residency, fellowship, or practicum.

HOW DATA ARE USED:

- These data are used to better understand the range of health professional education and training offered by health centers and the number of individuals trained during the reporting year.

FORM TIPS:

- Please respond to the questions in this form based on your health center status as of December 31 of the calendar year.
- The form provides definitions and explanations for each question. Please review carefully before responding. Include non-health-center individuals who are trained by your health center during the reporting year.
- It is helpful to work with your human resources and/or training team early to make sure you have accurate information to complete this form.