



January 13, 2025

Office of Quality and Data  
Health Resources and Services Administration  
U.S. Department of Health and Human Services  
5600 Fishers Lane  
Rockville, MD 20857

**RE:** Comments on Program Assistance Letter 2024-09: *Proposed Uniform Data System Changes for Calendar Year 2025*

*Sent via email*

To Whom it may Concern:

On behalf of our nearly 1,300 community health centers (CHCs), which provide high-quality, comprehensive care to more than 7.7 million people in California each year, the California Primary Care Association (CPCA) would like to thank you for considering comments on the UDS proposed changes as outlined in the program assistance letter (PAL) for calendar year 2025.

CHCs serve 33 percent of Medi-Cal patients and share the goals of advancing access, quality, and equity for Medi-Cal patients. CHCs also provide healthcare services to California's diverse populations, with about 68 percent of CHCs patients at or below 138 percent of the Federal Poverty Level (FPL) and more than 70 percent of patients being people of color. By their very mission, CHCs focus on providing culturally and linguistically diverse services to low income and non-English speaking communities. CHCs also provide high-quality, patient-centered care which they achieve through team-based coordinated, accessible, comprehensive, continuous, and equitable care. Care that focuses on these principles achieves the goals of better patient outcomes and experience, improved health equity, and reduced health care spending.

To achieve our shared goals of advancing access, quality, and equity for Medi-Cal patients, CPCA urges the Health Resources and Services Administration (HRSA) to take into consideration the comments in the following categories.

#### A. PROPOSED CHANGES AND UPDATES FOR CY 2025 UDS REPORTING

**Tobacco Use Cessation Pharmacotherapies** will be added to table 6A. No issues noted here.

Medications for Opioid Use Disorder (MOUD) will be added to table 6A in addition to questions asked about this in the appendix.

- **REQUEST TO CLARIFY:** HRSA to provide clarification on what "administered" means in the measure and if this is required it be within the walls of the health center.



**Alzheimer's Disease and Related Dementias (ADRD) Screening** will be added to table 6A.

- **REQUEST TO CLARIFY:** For the three measures described above that will be added to table 6A of the UDS 2025 reporting, given this being a new measure, that applicable ICD-10 codes (if applicable) are shared with the health centers for standard recording of this measure.

#### B. ADDITION TO TABLE 6B: QUALITY OF CARE MEASURES

**Initiation and Engagement of Substance Use Disorder Treatment** is a new measure being added to Table 6B. CPCA appreciates that this measure aligns with CMS and NCQA standards, supporting efforts toward greater standardization.

- **REQUEST TO CLARIFY:** Please provide clarification on the definition of "treatment" for purposes of meeting this measure.
- **RECOMMENDATION:** CPCA recommends that HRSA lower the eligible patient add to 12 years. Health centers are accustomed to reporting these measures for minors aged 12 and older given minor consent laws. However, the current measures require reporting for patients aged 13 and older instead of 12 and older. The discrepancy will be a data burden.

Additionally, it is important for HRSA to understand unique data collection and extraction issues facing health centers in California. Given that California has a siloed, trifurcated primary care, mental health, and substance use disorder delivery system, providers across the entire continuum of care often use separate electronic records system to manage data related. Pulling data from multiple systems could pose a significant burden. We want to bring this issue to HRSA's attention to ensure awareness of the potential impact on health centers.

#### C. UPDATES TO TABLE 6B AND 7: QUALITY OF CARE MEASURES ECQM ALIGNMENT

No issues were identified with the standardization of quality metrics to align with the eCQM measures for the 2025 reporting period. CPCA **requests** that the differences in the numerator and denominator be clearly communicated to health centers to ensure the accurate capture of the appropriate metrics for measures.

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Thank you for the opportunity to provide comments on the UDS PAL for 2025. We look forward to working with the HRSA to ensure we achieve our collective goal of advancing access, quality, and equity for Medi-Cal patients. For clarification or additional information regarding CPCA's comments, please contact Lucy Saenz by telephone at 916-440-8170 or email at [lsaenz@cpca.org](mailto:lsaenz@cpca.org).

Respectfully submitted,

*Lucy Saenz*

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