**Uniform Data System**

**OMB Control No. 0915-0193**

### Table 6A: Selected Diagnoses and Services Rendered

Calendar Year: January 1, 2025, through December 31, 2025

| Line | Service Category | Applicable ICD-10-CM, CPT-4/I/PLA, HCPCS, or Value Set Object Identifier (OID) | Number of Visits (a) | Number of Patients (b) |
| --- | --- | --- | --- | --- |
|  | **Selected Diagnostic Tests/ Screening/Preventive Services** |  |  |  |
| 26c | Smoke and tobacco use cessation counseling | **CPT-4**: 99406, 99407  **HCPCS**: S9075 | <blank for demonstration> | <blank for demonstration> |
| 26c2 | Tobacco use cessation pharmacotherapies | **OID:** 2.16.840.1.113883.3.526.3.1190 | <blank for demonstration> | <blank for demonstration> |
| 26c3 | Medications for opioid use disorder (MOUD) | **OID:** 2.16.840.1.113762.1.4.1046.269 |  |  |
| 26d | Comprehensive and intermediate eye exams | **CPT-4**: 92002, 92004, 92012, 92014 | <blank for demonstration> | <blank for demonstration> |
| 26e | Childhood development screenings and evaluations | **CPT-4:** 96110, 96112, 96113, 96127  **ICD-10:** Z13.4- | <blank for demonstration> | <blank for demonstration> |
| 26f | Alzheimer’s disease and related dementias (ADRD) screening | **OID**: 2.16.840.1.113883.3.526.3.1006 | <blank for demonstration> | <blank for demonstration> |

### Table 6B: Quality of Care Measures

Calendar Year: January 1, 2025, through December 31, 2025

**Section N—Substance Use Disorder (SUD) Measures**

| Line | Initiation and Engagement of Substance Use Disorder (SUD) Treatment | Total Patients Aged 13 and Older Diagnosed with a New SUD Episode (a) | Number of Records Reviewed (b) | Number of Patients who Received SUD Treatment (c) |
| --- | --- | --- | --- | --- |
| 23a | MEASURE: Percentage of patients with a new SUD episode who initiated treatment, including either an intervention or medication for the treatment of SUD, within 14 days of the new SUD episode | [blank for demonstration] | [blank for demonstration] | [blank for demonstration] |
| 23b | MEASURE: Percentage of patients with a new SUD episode who engaged in ongoing treatment, including two additional interventions or medication treatment events for SUD, or one long-acting medication event for the treatment of SUD, within 34 days of the initiation |  |  |  |

PUBLIC BURDEN STATEMENT

The Uniform Data System (UDS) provides consistent information about health centers including patient characteristics, services provided, clinical processes and health outcomes, patients’ use of services, costs, and revenues. It is the source of unduplicated data for the entire scope of services included in the grant or designation for the calendar year. 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 Office of Management and Budget (OMB) control number. The OMB control number for this project is 0915-0193 and it is valid until 04/30/2026. This information collection is mandatory under the Health Center Program authorized by section 330 of the Public Health Service (PHS) Act ([42 U.S.C. 254b](https://www.govinfo.gov/app/details/USCODE-2021-title42/USCODE-2021-title42-chap6A-subchapII-partD-subparti-sec254b)). Public reporting burden for this collection of information is estimated to average 238 hours 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 the Health Resources and Services Administration (HRSA) Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov).

DISCLAIMER

“This publication lists non-federal resources to provide additional information to consumers. Neither the U.S. Department of Health and Human Services (HHS) nor the Health Resources and Services Administration (HRSA) has formally approved the non-federal resources in this manual. Listing these is not an endorsement by HHS or HRSA.”