Aliados Health

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UDS Validation Strategies in Relevant

Data Workgroup Presentation, November 10, 2026

By Ben Fouts, Data Analyst

Aliados Health

Agenda

- Upcoming Trainings and General Data Quality Discussion
- UDS Report Tools in Relevant: Provider Visit and Patient Insurance Validation Reports
- UDS Report Tools in Relevant: Clinical Validation Reports
- Relevant UDS Snapshots
- UDS Comparison Dashboard

Upcoming Trainings and General Data Quality Discussion

Upcoming HRSA Trainings (2026)

- https://bphc.hrsa.gov/data-reporting/uds-training-and-technical-assistance/reporting-training-schedule
- *Also check this page for recordings and PDF presentations*
- UDS Clinical Tables Part 1: Screening and Preventive Care Measures (October 15)
- UDS Clinical Tables Part 2: Maternal Care and Children's Health, Tuesday (October 20)
- UDS Clinical Tables Part 3: Disease Management (October 29)
- Reporting UDS Financial and Operational Tables (November 12)
- Strategies for Successful Submission (January 14, 2027)
- California Primary Care Association In-Person (December 1 – 3)

Relevant Training

Wednesday, November 18, 2026 at 11:00am Pacific Time

What's New for UDS 2026, November 18, 2026 at ~~2:00 PM EST~~

In this webinar we'll cover the changes to the UDS Manual for the 2026 submission year. We'll address how the changes are reflected in Relevant, provide guidance around mapping new concepts, and offer strategies for validation. All Relevant users submitting UDS 2026 should plan to attend.

Business as Usual in the Data World

Every year, it is normal to expect…

- New staff trained to enter data (in perhaps different ways)
- New or modified clinical, operational and data entry workflows
- Changes to the EHR data entry fields (new, modified, abandoned)
- Different or emerging priorities that may override good data entry

- Data quality assurance staff see how these factors have impacted the completeness and accuracy of reporting results.

Annual Review Opportunity

- Cleaning and validating your 2026 UDS data is a necessary exercise not just for reporting to HRSA, but for good health center management
- Recognize trends and give feedback to leadership and staff
- Identify areas for performance improvement and training
- Quality Improvement Leads should make conclusions and recommendations
- Achievements should be highlighted to staff so they see the results of their hard work!

General Validation Approach

- Use tools in Relevant to scan for invalid data or large changes. Make list of items to “fix” or to further research.
- Are the large changes true? Do they cause a positive or negative impact on clinical care or operations?
- Can they be explained by identifying a root cause? Is the root cause within the health center’s control? Can you create a recommendation or a data summary that can help leadership make a decision on how to proceed?
- Is the change large enough to lead to a note on the UDS table? If so, how should it be worded?

Different Teams for Different Tables

Focus data performance improvement efforts on the staff group entering the data. For example:

- Front desk (e.g., patient demographics)
- Operational and fiscal staff (e.g., scheduling, confirmation of codes on claims, payments)
- Clinical staff (e.g., clinical data on patient assessment and treatment)

- Each team has different skill sets, assignments, and priorities

Expectation From HRSA

Unless your health center has experienced a substantial change or disruption in the service delivery model (new services, change in number or type of providers, or change in number of patients served), year-to-year changes are generally minor. Table changes can be viewed using the Comparison Tool within EHBs.

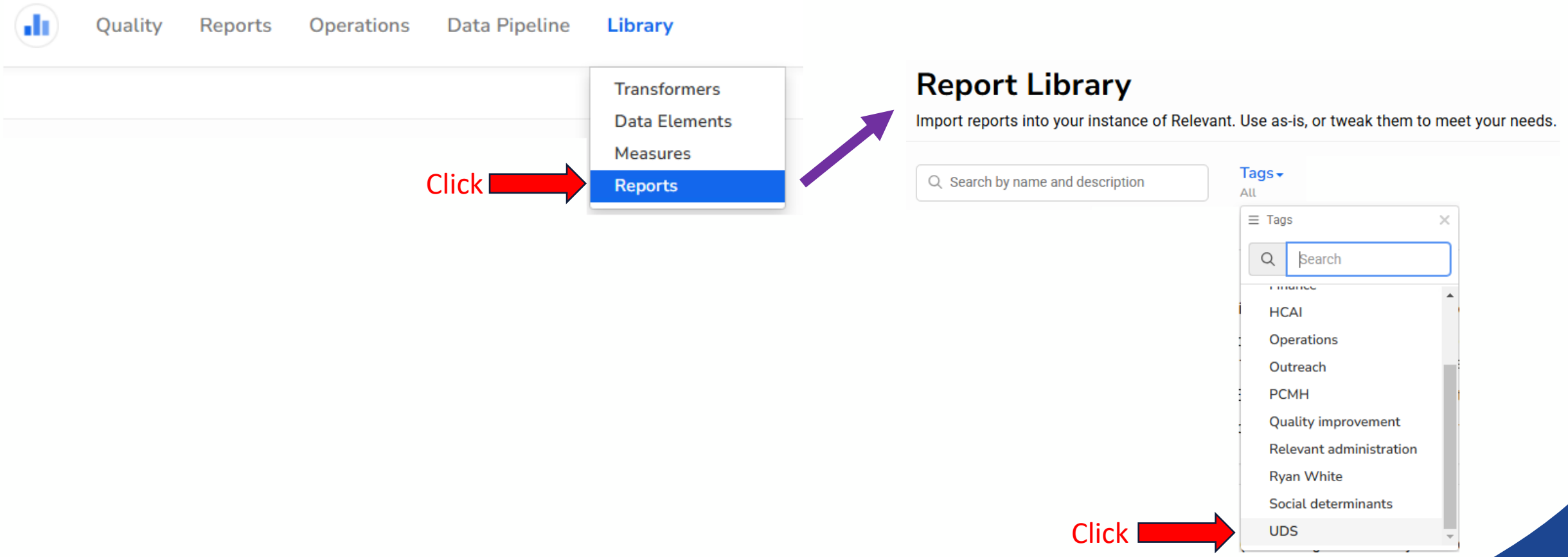
Note: If your program has experienced a significant change in activity, provide a brief explanation in the report comments.

Compare key metrics across years. Investigate large increases or decreases for accuracy. At minimum, review:

- Tables 3A, 3B, 4, and Patients by ZIP Code: Patient demographics, income, and insurance shifts, and special medically underserved population counts,
- Tables 5, 6A, and 8A: Patients, visits, services, and costs by service category,
- Tables 6B and 7: Denominator and compliance for each clinical quality measure

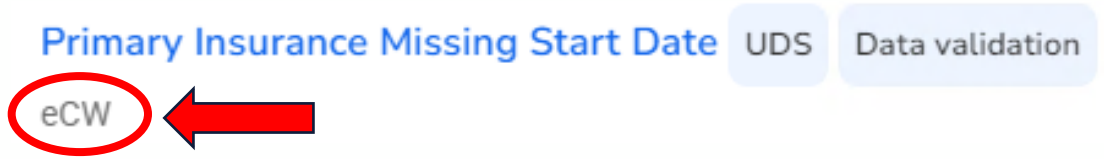
UDS Report Tools in Relevant: Provider Visit and Patient Insurance Validation Reports

Relevant Library UDS Reports

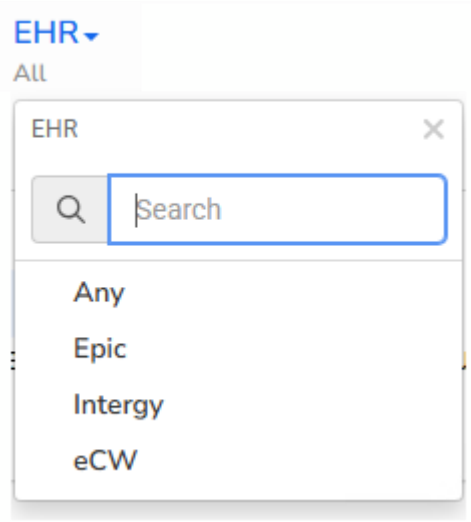


Note EHR Specificity in the Library

- Note that some Library reports are for users of specific EHRs



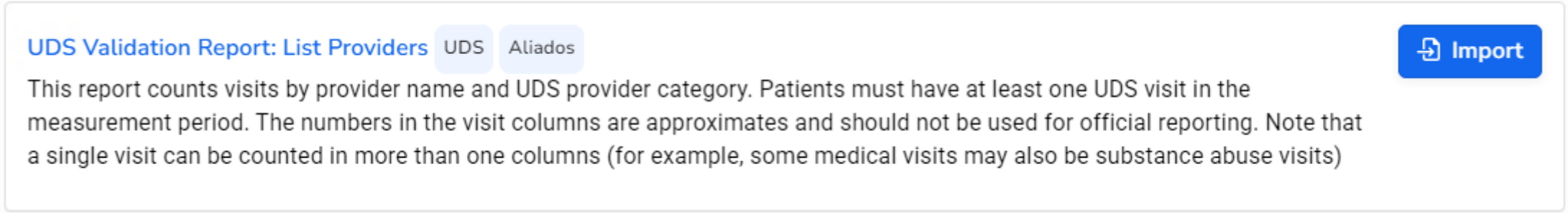
- You can filter the report for a specific EHR



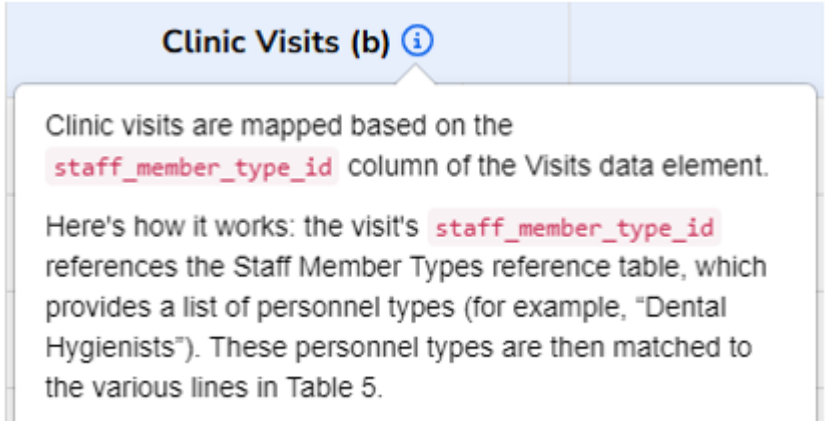
If there is no EHR mentioned under the report title, it works for all (in other words, it is based only on Data Elements)

UDS Validation Report: List Providers

Relevant Report Library



Relevant UDS Module – Table 5 Tab, Column B



This report displays the mapping for staff_member_type_id and visit information based on visits.uds_universe and visit_set_membership

UDS Validation Report: List Providers

- The report allows you to check which providers are being counted on which lines of Table 5
- Different health centers may have different ways that provider mapping is done within the Transformers
- If you find that the mapping is not correct, a programmer will have to trace the data through the Transformer logic. No single approach exists for this process
- The main assumption with this report is that on the rdm.visits table, the staff_member_type_id assigned to the visit corresponds to the staff member type of the provider_id assigned to the visit

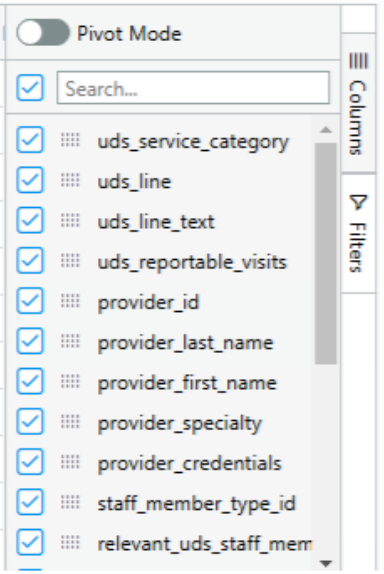
Output of the List Providers Report (Slide 1)

UDS Mapping

Provider Detail From EHR

Filter as you like (or export to Excel)

uds_service_category	uds_line	uds_line_text	uds_reportable_visits	provider_id	provider_last_name	provider_first_name	provider_specialty	provider_credentials
Medical	1	Family Physicians	TRUE					DO
Medical	1	Family Physicians	TRUE					MD
Medical	1	Family Physicians	TRUE					MD
Medical	1	Family Physicians	TRUE					MD
Medical	1	Family Physicians	TRUE					MD
Medical	1	Family Physicians	TRUE					MD
Medical	1	Family Physicians	TRUE					MD
Medical	4	Obstetrician/Gynecologists	TRUE					MD
Medical	5	Pediatricians	TRUE					MD
Medical	9a	Nurse Practitioners	TRUE					AGNP
Medical	9a	Nurse Practitioners	TRUE					FNP-C



UDS Validation Report: List Providers (Slide 2)

If used

Based on Visit Set Membership (like with Visit Calendar)

relevant_raw_fte	all_system_visits	uds_universe_visits	uds_medical_visits	uds_dental_visits	uds_mental_health_visits	uds_substance_use_disord...
	1183	1183	1182	0	0	0
	98	98	98	0	0	0
	1824	1801	1801	0	0	0
	2392	2392	2389	0	0	0
	726	724	724	0	0	0
	1249	1248	1240	0	0	0

"Visit totals" are not the official UDS totals, but can be generally used to see where visits are mapped through the Visit Set Membership Data Element

UDS Patient List: Table 5 Staffing and Utilization

- To see how individual visits are attributed to Table 5 rows. Each row is one visit and some detail is displayed
- Summary table should show numbers like in the UDS Module

Table 5 Summary View

				virtual_status	Clinic Visits (b)	Virtual Visits (b2)	Totals
uds_line_order	uds_line	uds_major_service_category	uds_staff_member_type_name				

- Also displays a count of visits that were de-duplicated for same day rules

Counted vs. Already Counted

				countable_status	Already Counted		Countable		Totals
				virtual_status	Clinic Visits (b)	Virtual Visits (b2)	Clinic Visits (b)	Virtual Visits (b2)	
uds_line_order	uds_line	uds_major_service_category	uds_staff_member_type_name						

UDS Validation Report: List Insurance

Relevant Report Library

UDS Validation Report: List Insurance Aliados UDS Data validation

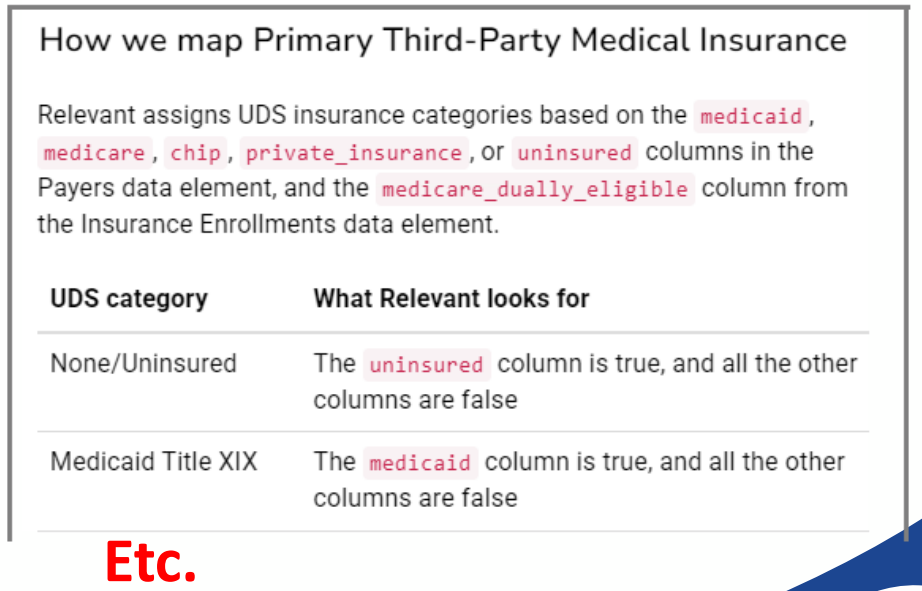
Import

This report counts unduplicated patients by insurance name and UDS insurance category. Patients must have a UDS visit in the measurement period and the measurement period must be one year or less (and not span parts of two years).

Relevant UDS Module – Table 4 (second table down)

Primary Third-Party Medical Insurance How we map this section

This report shows the TRUE/FALSE insurance type columns as they appear on the Data Element rdm.payers. Therefore, you can directly see the mapping for each insurance name



How we map Primary Third-Party Medical Insurance

Relevant assigns UDS insurance categories based on the `medicaid`, `medicare`, `chip`, `private_insurance`, or `uninsured` columns in the Payers data element, and the `medicare_dually_eligible` column from the Insurance Enrollments data element.

UDS category	What Relevant looks for
None/Uninsured	The `uninsured` column is true, and all the other columns are false
Medicaid Title XIX	The `medicaid` column is true, and all the other columns are false

Etc.

Output of the List Insurance Report (Slide 1)

UDS Mapping

Insurance Detail From EHR

uds_category_table4	uds_category_zip_table	payer_id	payer_name	payer_group_name
1. None Uninsured	1. None/Uninsured	999999	No Insurance Assigned	No Group Assigned
2. Medicaid Title XIX	2. Medicaid/CHIP/Other Public	2	MEDI-CAL	Medicaid
2. Medicaid Title XIX	2. Medicaid/CHIP/Other Public	4	PARTNERSHIP HEALTHPLAN O...	MMC - Partnership
4b. Medicare (not dually eligib...	3. Medicare	3	MEDICARE	Medicare
5. Other Public Insurance Non ...	2. Medicaid/CHIP/Other Public	101	Sliding Fee	No Group Assigned
7. Private Insurance	4. Private	38	AETNA	Commercial

Look for any rows with “5. Other Public…”

Note: Payers that do not have a payer group assigned in your EHR may not be summarized correctly on financial reports

Output of the List Insurance Report (Slide 2)

TRUE/FALSE Mapping Columns

Follow-up Comments

Number of patients

uninsured	medicaid	chip	medicare_dually_eligible	medicare	private_insurance	check_if_true	undup_pts
true	false	false	false	false	false		61
false	true	false	false	false	false		1
false	true	false	false	false	false		223
false	false	false	true	true	false		1
false	false	false	false	true	false		17
false	false	false	false	false	false	Insurance has no mapping and is going into a default category	3

- Check unmapped insurance (i.e., all “false”) that goes into the default “uninsured” category. It may be new and need to be mapped
- Number of patients is not the “official” UDS number but can give you an idea of the relative general number of patients (e.g., commonly used n = 233 versus rare n = 1)

Report for Table 4:
UDS Validation: Payer Assignments (Slide 1)

- To see how individual patients are attributed to Table 4 Primary Insurance rows. Each row is one patient and some detail is displayed
- Summary table should show numbers like in the UDS Module

By UDS Category

uds_category	Totals
Dually Eligible Medicare and Medicaid	
Medicaid Title XIX	
Medicare	
None Uninsured	
Other Public Insurance Non CHIP	
Private Insurance	
Totals	

Remember that it is unlikely that Aliados health centers will have "Other Public" insurance. It should be mapped to another category

UDS Validation: Payer Assignments (Slide 2)

- This report can also show a summary similar to the “List Insurance” report we just looked at
- For example, add a new tab to make a table like this

view 5 | Add view

payer	payer_group	uds_category	Totals
AETNA	Commercial	Private Insurance	
MEDI-CAL	Medicaid	Medicaid Title XIX	
CONTRA COSTA HEALTH PLAN	No Group Assigned	Other Public Insurance Non CHIP	
PARTNERSHIP HEALTHPLAN OF CALIFORNIA	MMC - Partnership	Medicaid Title XIX	
SAN FRANCISCO HEALTH PLAN	No Group Assigned	None Uninsured	

Here is the “Other Public” insurance

This is an unmapped insurance defaulting to “None Uninsured” (perhaps new in 2026)

UDS Report Tools in Relevant: Clinical Validation Reports

To surface mapping errors, incomplete data or unexpected data

Prenatal Data Tracking Report

Relevant Report Library Description

Prenatal Data Tracking UDS Data validation

This report returns all patients who, during the selected Measurement Period,:

- Were referred for OB care OR
- Received OB care OR
- Delivered

Use this report to ensure you have captured all the data required for UDS:

- Table 6B Section B (Early Entry into Prenatal Care)
  - All patients on this list must have an entry for:
    - `prenatal_treatment_initial_trimester`
    - `prenatal_treatment_initiated_at_health_center`
- Table 7 Section A (Deliveries and Birth Weight).
  - Patients whose ended_on date is in the past must have an entry for:
    - `delivered_on`
    - `delivered_at_health_center`
    - `live_birth`
    - `birth_weight_grams`

Note: this report needs the Transformer "custom.relevant_pregnancies" because rdm.pregnancies filters out pregnancies with missing data

Prenatal Data Report Description

Lists patients with potential issues with prenatal data. Includes all patients who qualify for the UDS Trimester of Entry and Birth Weight measures who have one or more of the following data quality issues:

1. Trimester of entry is missing or not 1, 2, or 3
2. The pregnancy is listed as ended or it has been at least 10 months since the start date and no delivery is present
3. There is a delivery record but is missing the birth weight

Prenatal Data Report Design

- Patients displayed on the report have one or more potential data problems. Therefore, the report shows a mix of patients
- Page 129 of the 2026 UDS Instructions: “Report all health center prenatal care patients who delivered during the calendar year, including those whose care or delivery was provided partly or entirely by a referral provider.”
- Health centers are expected to make an effort to complete delivery information (even for patients who might have transferred care)
- The UDS Editor might question you if the number of deliveries is out-of-proportion to the number of prenatal patients

Table 6B: Quality of Care Measures

Section A—Age Categories for Prenatal Care Patients: Demographic Characteristics of Prenatal Care Patients

Line	Age	Number of Patients (a)
1	Less than 15 years	
2	Ages 15–19	
3	Ages 20–24	
4	Ages 25–44	
5	Ages 45 and over	
6	Total Patients (Sum of Lines 1–5)	

Section B—Early Entry into Prenatal Care

Line	Early Entry into Prenatal Care	Patients Having First Visit with Health Center (a)	Patients Having First Visit with Another Provider (b)
7	First Trimester		
8	Second Trimester		
9	Third Trimester		

Pregnancies with any of the following in the measurement year:

- A prenatal visit
- A prenatal care referral
- A delivery (with a prenatal visit or referral at any time)

Trimester of entry

Initiation at health center

Report Columns

prenatal_treatment_initial_trimester → Should be a number like 1, 2 or 3

prenatal_treatment_initiated_at_health_center → True or false

Report Output Tabs

initial_trimester is missing

Table 7: Health Outcomes and Disparities

Section A: Deliveries and Birth Weight

Line	Description	Patients (A)
0	HIV-Positive Pregnant Women	
2	Deliveries Performed by Health Center's Providers	

Line	Race and Ethnicity	Prenatal Care Patients Who Delivered During the Year (1A)	Live Births: <1500 grams (1B)	Live Births: 1500–2499 grams (1C)	Live Births: ≥2500 grams (1D)

Delivery date needed to place it in the measurement year

Live birth & birth weight

Report Columns

delivered_on	The date of delivery
delivered_at_health_center	True or False
live_birth	True or False
birth_weight_grams	The weight in grams

Report Output Tabs

delivered_on is missing (pregnancy has ended)

delivered_at_health_center is missing (pregnancy has ended)

live_birth is missing (pregnancy has ended)

birth weight is missing (pregnancy has ended)

UDS Validation: SUD Treatment Rate 1 & 2

- Gives additional detail for patients in the (same) denominator as the two Initiation And Engagement Of Substance Use Disorder Treatment (UDS 2026 Table 6B) Quality Measures:
  - Rate 1 Initiation
  - Rate 2 Engagement
- Each row is one patient, so you can see the two measure numerators together on one report. TRUE/FALSE columns:

rate1_numerator
rate2_numerator

Useful Columns

- Initiation episode detail

first_sud_episode_date
sud_diagnosis_codes
qualifying_visit_codes

- Additional detail for validation (similar to QM)

measurement_value

See next slides for options



Detail Column “Measurement Value” (Slide 1)

Not in denominator or numerator

- No initiation within 14 days of SUD visit
- Exclusion: Hospice (<date>)

Rate 1: Initiated treatment (intervention or medication) within 14 days

- Initiation: Non-Medication (<date>)
- Initiation: Short-Acting Medication (<date>)
- Initiation: Long-Acting Medication (<date>)

Detail Column “Measurement Value” (Slide 2)

Rate 2: Ongoing treatment (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

- Engagement: Short-Acting Medication (<date>), Non-Medication (<date>), Non-Medication (<date>)
- Engagement: Long-Acting Medication (<date>)
- (or other combinations)

Relevant UDS Snapshots

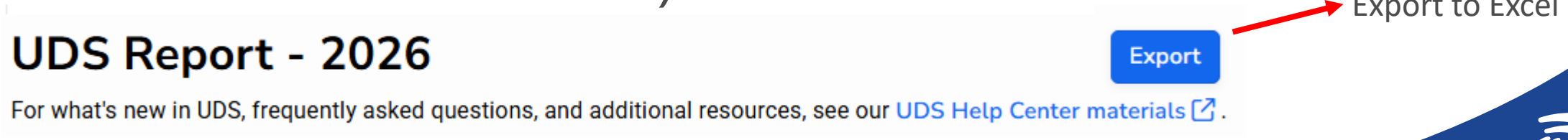


UDS Snapshots

- See heading “Freezing your UDS Data” in the UDS section of the Relevant Help pages
- A UDS “Snapshot” is a copy of the row-level data behind the UDS numbers. It can be used to compare one point in time with another
- A snapshot is automatically generated when the UDS is due in mid-February, but the health center can request up to five snapshots during a given UDS reporting year. Contact your Relevant analyst to request one.

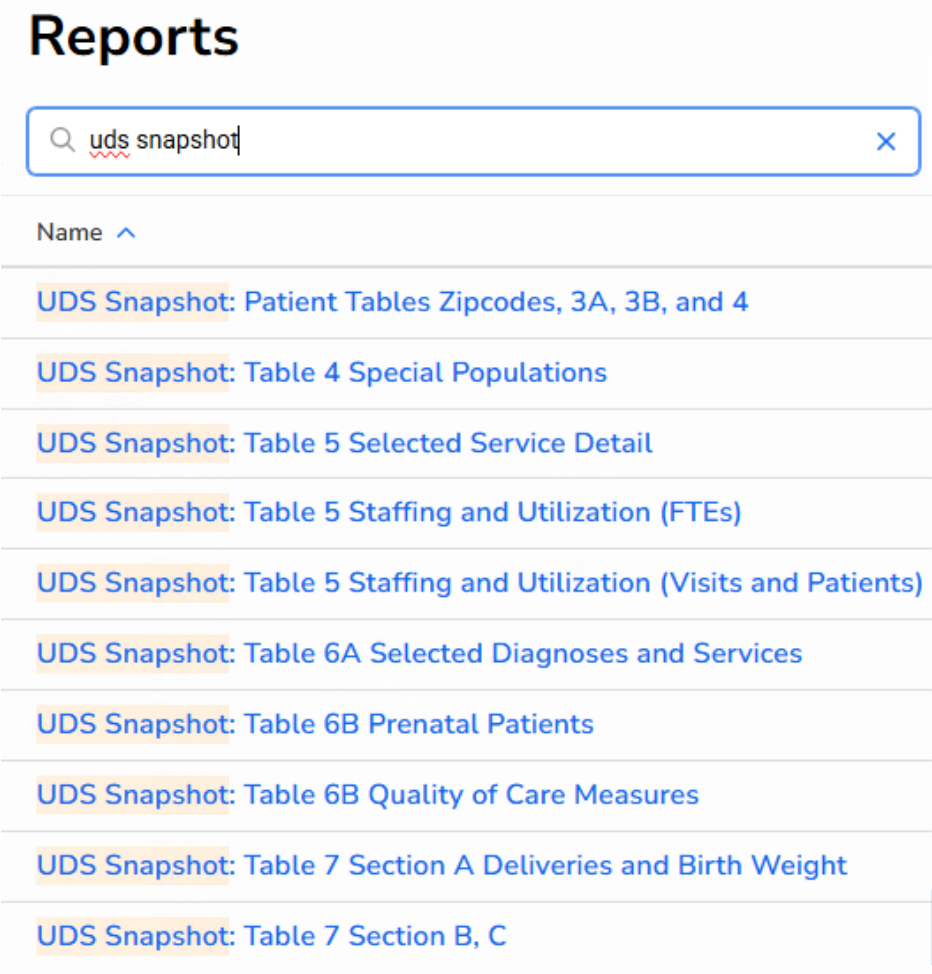
When to Make a Snapshot

- If you decide to begin entering data into your UDS tables on a particular day (say, at the end of January), have Relevant make a snapshot that same day so the detailed data is ‘frozen’
- Additional (options): first workday in January; mid-January after the clinical validation reviews are done, November 30 so you can compare to November 30 next year, etc.
- Note: You can also “Export” your data to Excel (but you can’t use the visualization tools)

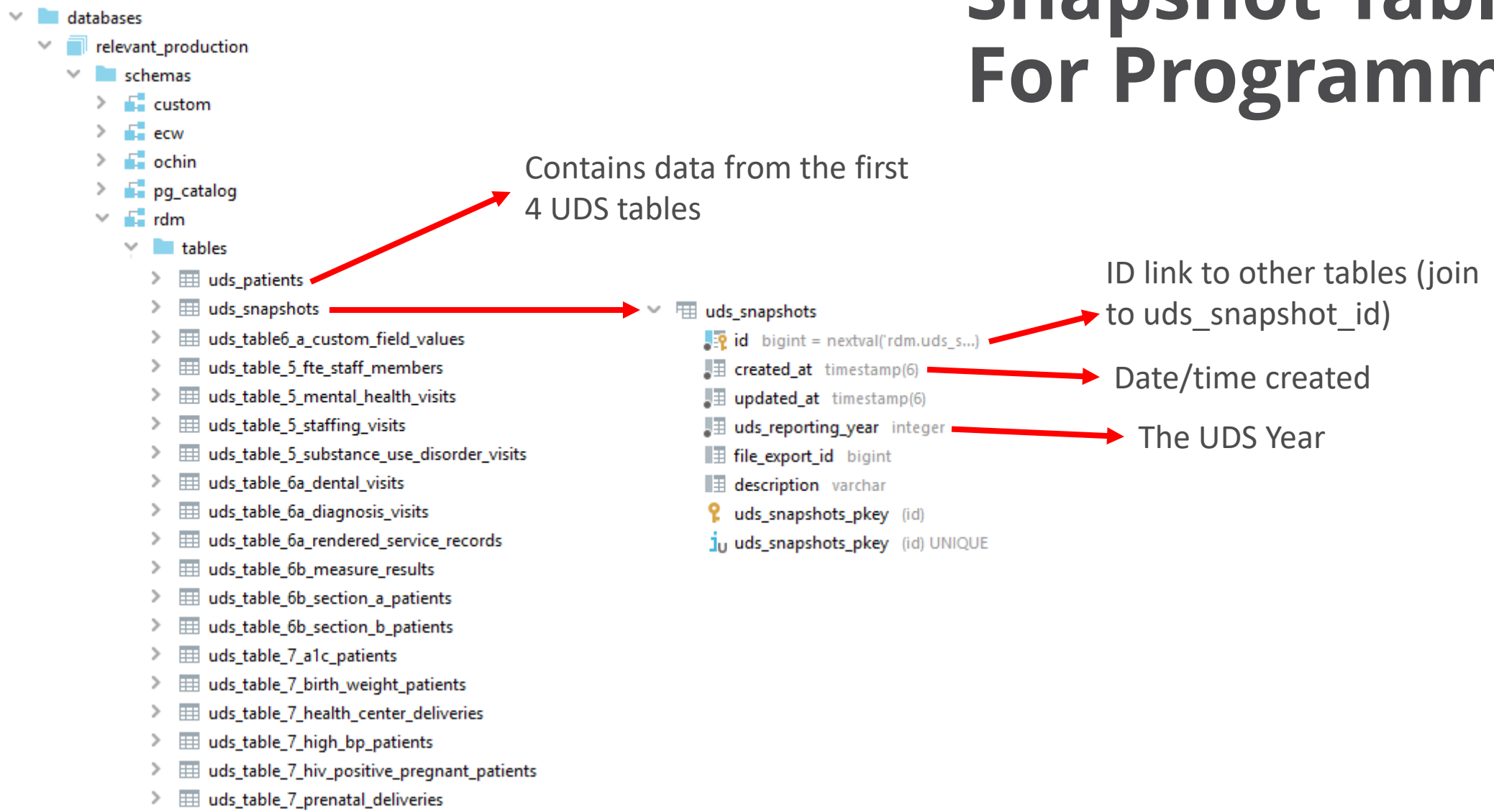


Snapshot Reports

- Snapshots cannot be viewed in the UDS module. They must be viewed with a report (or dashboard, which we will discuss next)
- The user chooses a snapshot (by date) to display
- Other tabs summarize the data by specific UDS Table
- The results tab has patient-level data



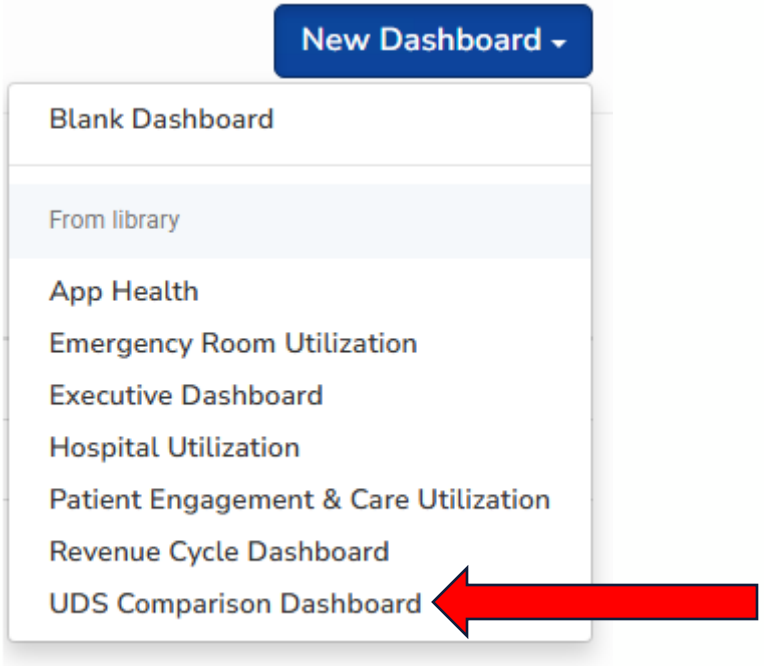
Snapshot Tables For Programmers



UDS Comparison Dashboard

UDS Comparison Dashboard

If you do not see it on your Dashboards page, bring it in from the library



Compares a Snapshot to the Current UDS Data

- Choose your snapshot by date
- Gives a comparison visualization for each table
- Some of them are side-by-side numbers or proportions
- Remember that if you are looking at it before December 31, “current” UDS data is year-to-date

Examples of Visualizations (Slide 1)

Table 4: Total Agricultural Workers

Agricultural workers

3.3%

Percentage of total patients (YTD)

▼35.7% (-700 patients) from chosen snapshot

Table 4: Agricultural Worker Types

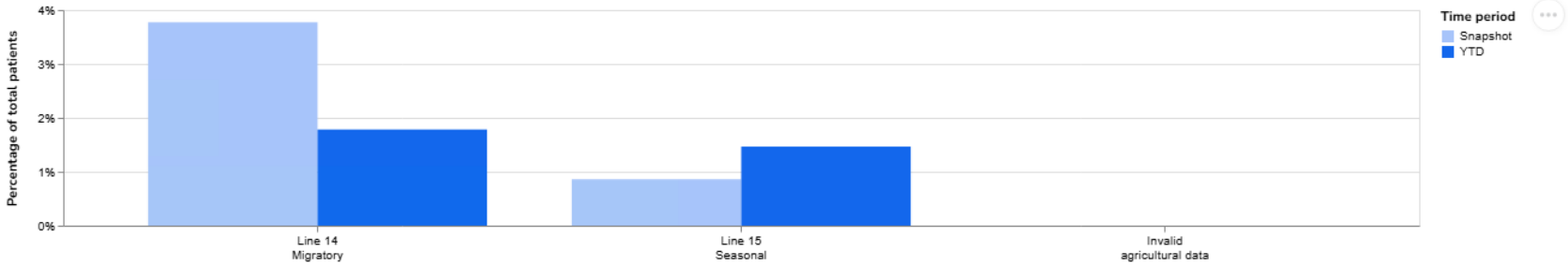


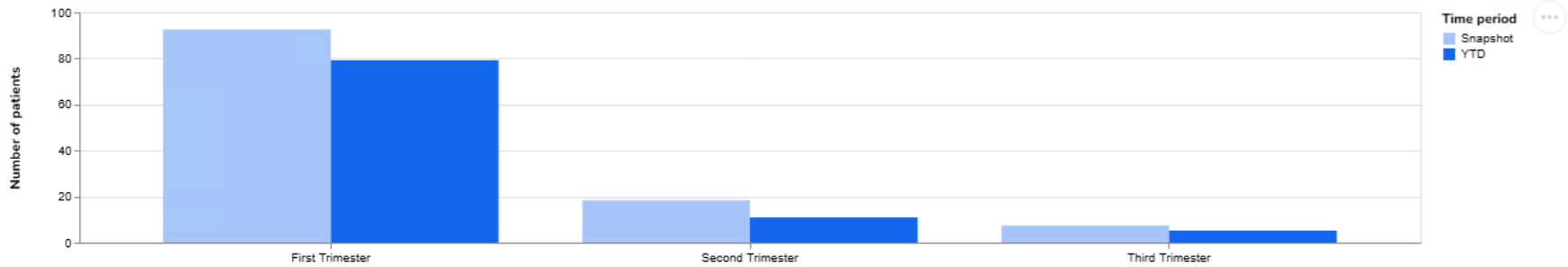
Table 6B Section A: Total Patients YTD

95

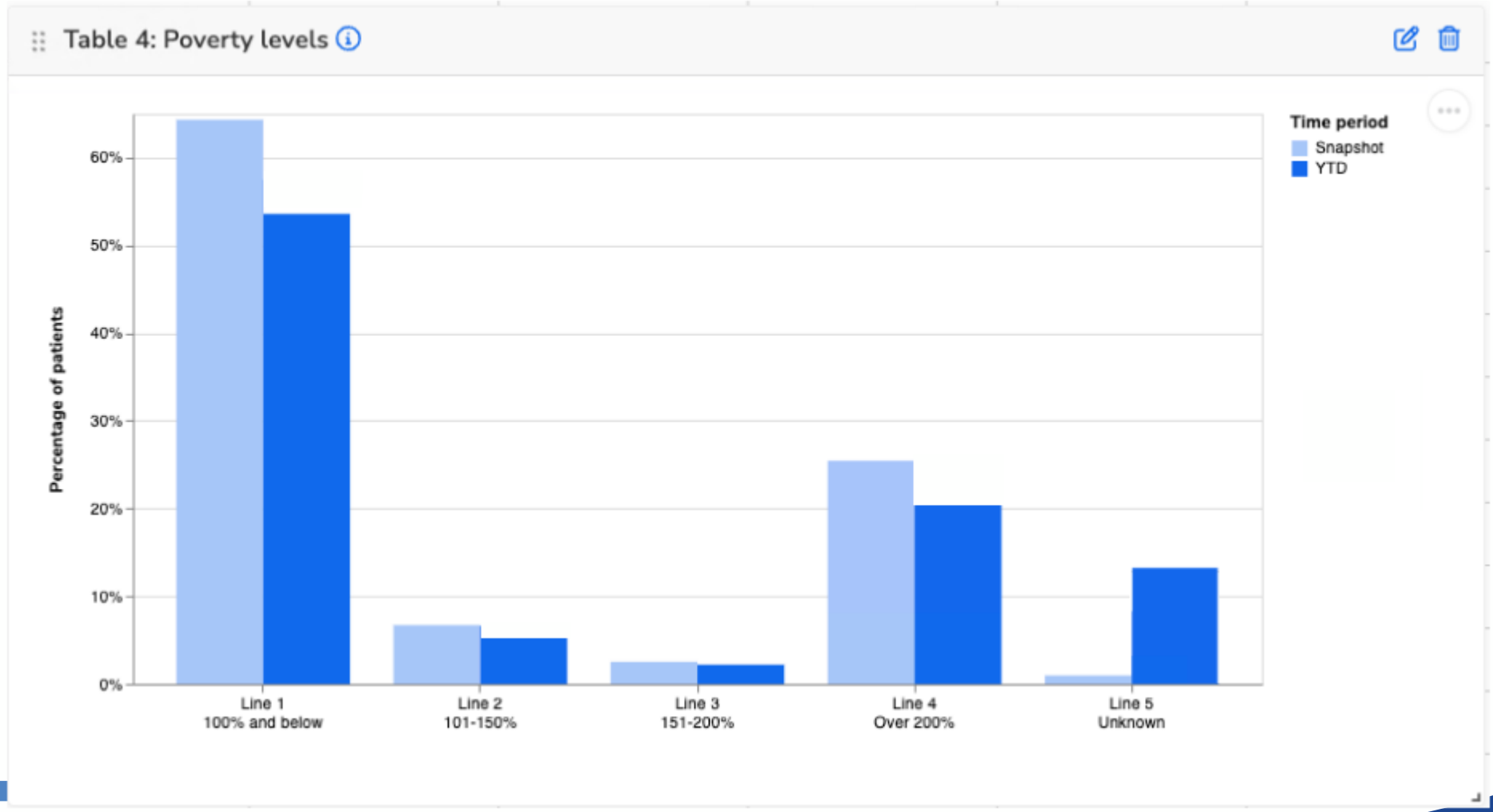
Patients YTD

▼−22 (19.4%) from chosen snapshot

Table 6B Section B: Early Entry into Prenatal Care

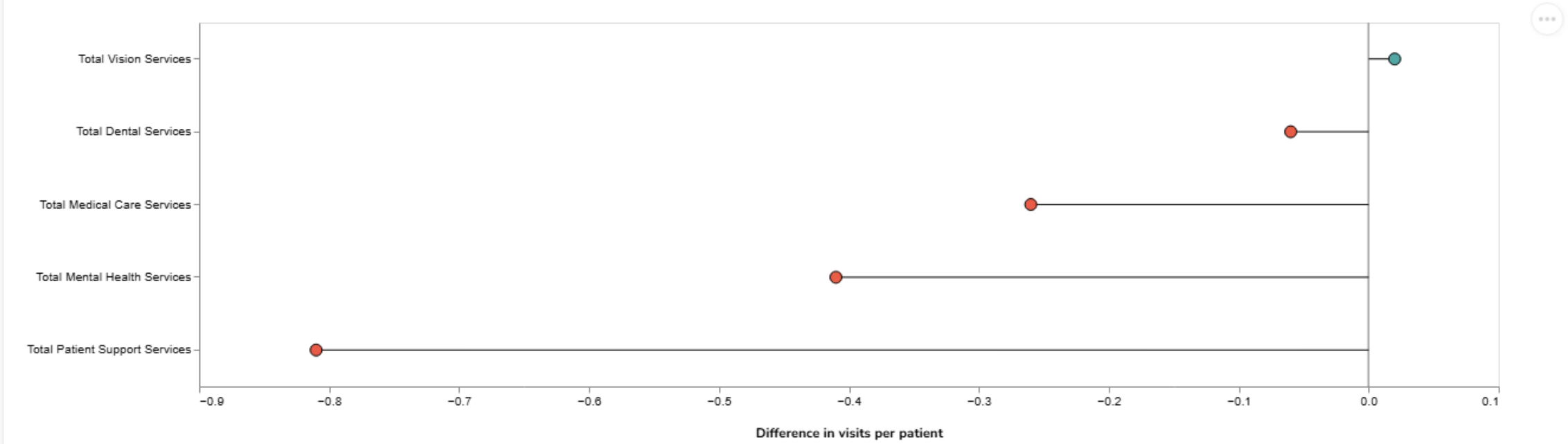


Validation Example: What do you see in this graph?



Examples of Visualizations (Slide 2)

Table 5: Change in Visits Per Patient



Note: this is a screenshot of year-to-date data taken in November, but what would you do if you saw this in January?

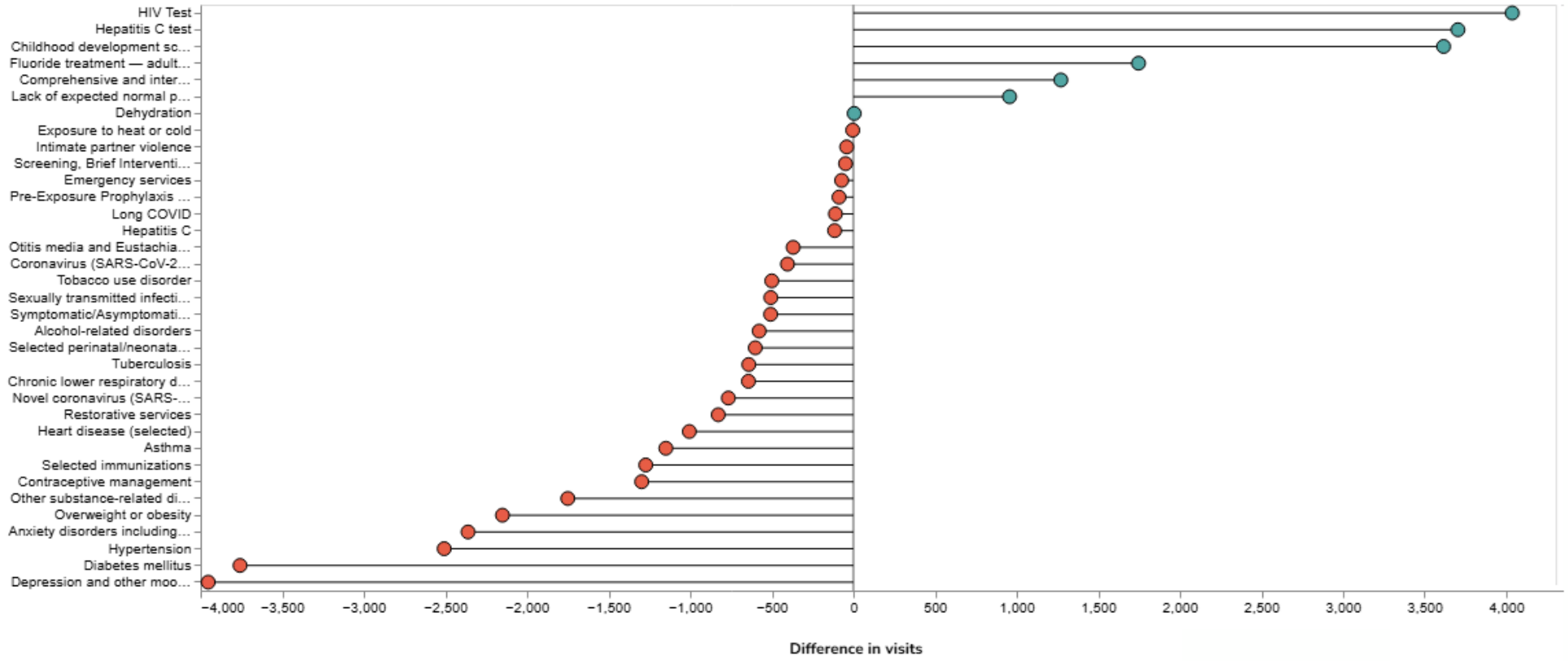
Table 5: Visit Trends

- Change in visit count by major department
- Change in visits per patient

- These figures are dependent on mapping
- You should be able to explain major changes to these numbers if a change is found to be true (the UDS editor will probably ask)

Table 6A Large Changes (> 10%)

Table 6A: Selected Diagnoses and Services with >10% Change

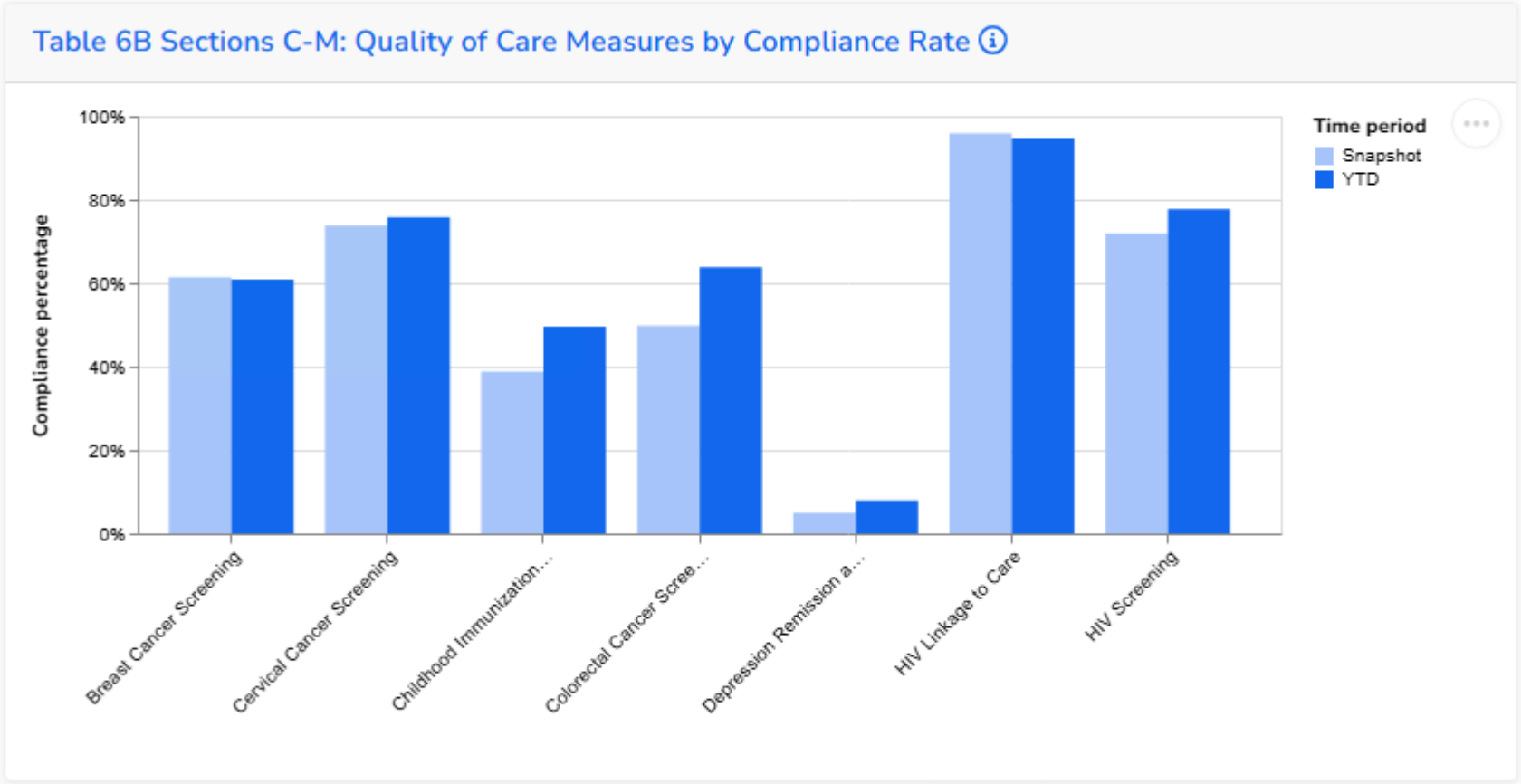


Note: if full-year 2025 data is compared to partial year 2026 data, there will be many negative differences in visits

Quality Measure Graphs

- Show denominator and numerator shifts
- Look for things to validate (e.g., new numerator data not captured)
- List opportunities for improvement. Break-down results by location or other factors
- Don’t forget to list achievements! Mention them in a newsletter or staff meetings

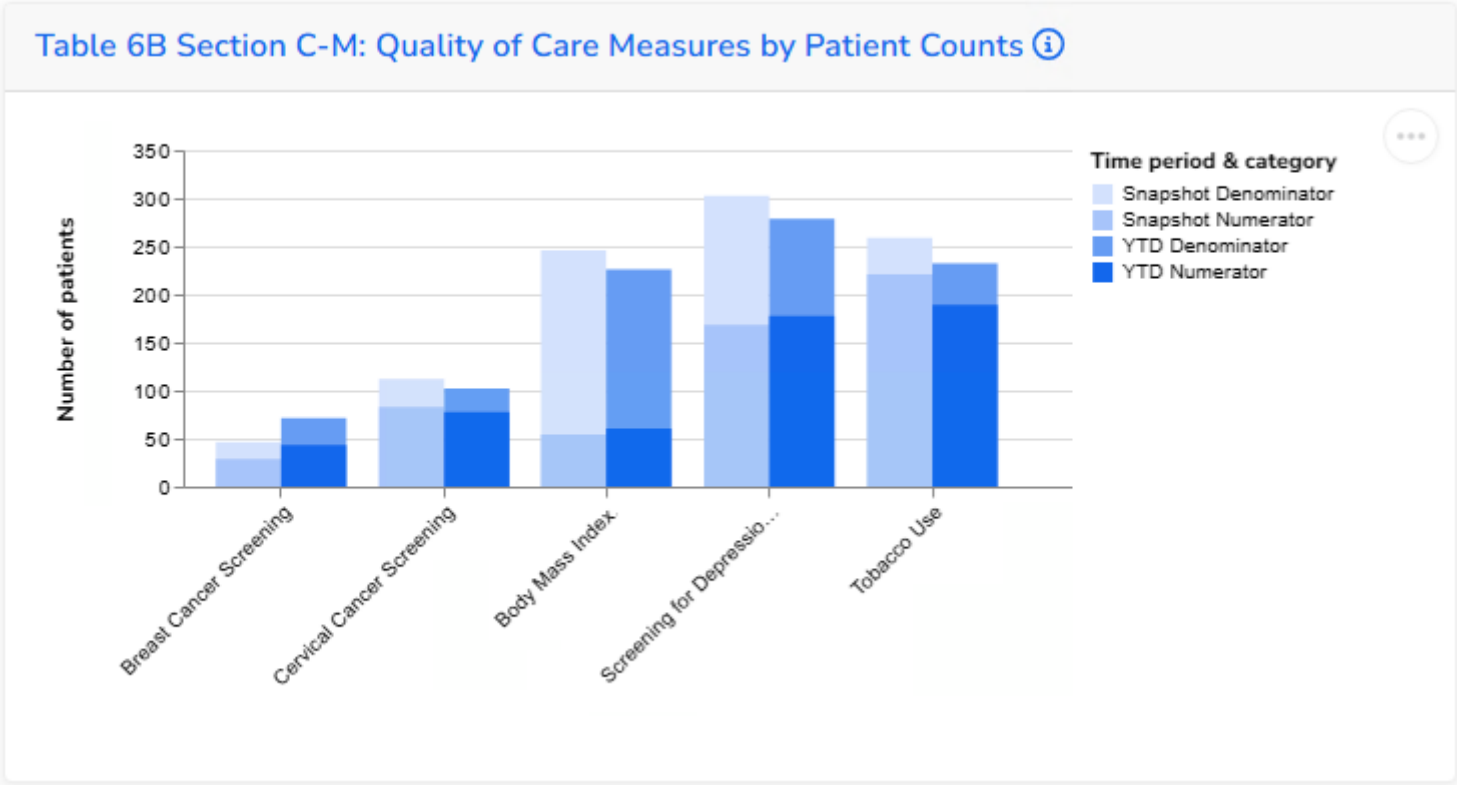
Quality Measure Validation (Slide 1)



Compare numerator percentages for your Quality Measures. Look for any that appear “large” and validate (or explain) accordingly.

Can be started before year-end.

Quality Measure Validation (Slide 2)

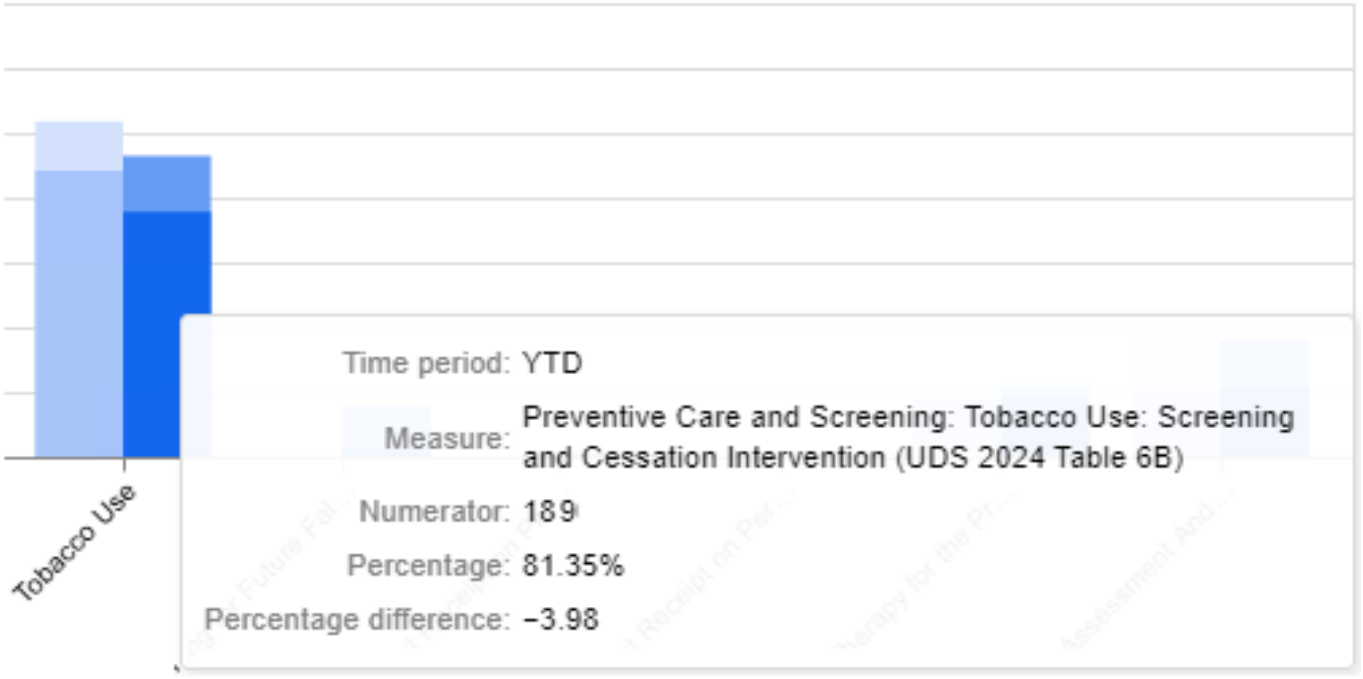


Displays a number comparison of Quality Measure denominators and numerators.

More useful after December 31 (if comparing to a full-year snapshot)

Quality Measure Validation (Slide 3)

- Note that there are lots of opportunities to “hover” your cursor over parts of the graphs in order to get additional detail



Tips from the Relevant Help Pages

- Review completeness of demographic data, especially if “Unreported” is increasing. Flag increases in “Unknown” that could indicate data collection issues
- Identify data issues if totals look unexpectedly skewed or inconsistent with previous trends
- Review data quality entries under “Unknown” or “Invalid” because these may suggest gaps in screening or documentation

Questions?

