



To: HRSA/BPHC/Office of Quality Improvement

From: Converge: Partners in Access

Date: 02/20/24

Re: Proposed Uniform Data System Changes for Calendar Year 2024

[Converge: Partners in Access](#) is a non-profit organization dedicated to ensuring all individuals have access to quality and affordable reproductive and sexual health care. Converge defines quality care, in part, as being person-centered care, which places people's lived experience and needs at the center of their reproductive and sexual health care. Converge is the sole Title X grantee for the state of Mississippi as well as one of the grantees for the state of Tennessee. We work closely with Federally Qualified Health Centers (FQHCs) who are currently part of our Title X network or are interested in joining in order to support their family planning services. Converge was excited to hear the [proposed changes](#) from the Health Resources and Services Administration (HRSA) regarding the Uniform Data System (UDS) reporting requirements. Specifically, the inclusion of measuring pregnancy intention via the metric "*How many health center patients were screened for pregnancy intention using a standardized screener during the calendar year.*" However, Converge alongside much of the reproductive and sexual health field, encourages a shift beyond just a pregnancy intention framework and advocates for a broader view of sexual and reproductive health needs and services.

Research suggests that pregnancy intention screening [does not support person-centered care](#) and may [fall short identifying individual's reproductive and sexual health needs](#). This is particularly important when serving populations that cannot become pregnant, but still require and benefit from care defined currently as family planning, particularly in the Title X setting, (e.g., STI screenings, breast and cervical cancer screenings, contraceptive care). Therefore, Converge encourages the use of measures that address all reproductive and sexual health needs. One such tool is the [Self-Identified Need for Contraception \(SINC\)](#). We recommend SINC be included in the proposed language for new data elements regarding pregnancy intention for UDS reporting, as opposed to the current suggestion, which only includes the PATH framework and One Key Question®. We recognize clinic workflow and capacity vary across sites; therefore, one tool may be beneficial over another. We plan to work with FQHCs in our network to ensure they make an informed decision about what tool will suit their patient and data reporting needs.

As a Title X grantee, our goal is to provide excellent technical assistance to our clinic networks, including how to reduce the burden of administrative requirements to be a Title X and family planning provider. Through this work, we've received feedback that one of the biggest obstacles to being a Title X site is the data requirements, including the [Family Planning Annual Report](#). We have also heard from our network that Converge has excelled in providing TA, training and guidance on data requirements, reducing this barrier and encouraging sites, including FQHCs, to join our network. We believe that the new requirement for UDS to include pregnancy intention data provides an opportunity to streamline data collection for multiple federal data reporting requirements, particularly for FQHCs that receive multiple funding mechanisms. FPAR 2.0 includes required data elements for reporting pregnancy intention,



similar to the new UDS data requirements and has also included SINC as an optional data element, which many FQHCs have opted to utilize. As a grantee, we have included this element in our data specifications and are currently collecting such data. We hope this is an opportunity to identify additional data elements that are required for multiple reporting and funding mechanisms. For example, HIV and STI surveillance and breast and cervical cancer screenings.

We welcome the opportunity to collaborate with HRSA as well as other Title X grantees who are navigating these changes with other FQHCs. Thank you for your consideration. If you have any questions or concerns, please contact Director of Measurement, Learning and Evaluation, Dr. Ellie Smith at esmith@convergeaccess.org.