

FY2026 HUD HMIS Data Standards Updates

Effective October 1, 2025

Introduction / Background

- HMIS Data Standards are set by HUD to define required data elements
- Guide vendors, leads, and agencies in data collection and reporting
- FY2026 updates effective October 1, 2025

Data Standard Updates Overview

- 3.04 / Race & Ethnicity
- 3.06 / Gender & R3 / Sexual Orientation
- 4.05-4.10 / Specific Disabling Conditions
- 4.21 / Sex
- C4 / Translation Assistance Needed
- V3 / Financial Assistance – SSVF
- V7 / HP Targeting Criteria
- V10 / Mental Health Consultation
- R13 / Family Critical Issues

3.04 / Race & Ethnicity

- Label for Hispanic/Latina/o updated

Client Information

Basic Client Demographics

Birth Date: * 08/01/1999 ⓘ

Client Age: 26

Date of Birth Quality: * ☒ Full DOB Reported
☐ Approximate or Partial DOB Reported
☐ Client doesn't know
☐ Client prefers not to answer
☐ Data not collected

Race and Ethnicity: * ✓ American Indian, Alaska Native, or Indigenous
Asian or Asian American
Black, African American, or African
Hispanic/Latina/o
Middle Eastern or North African ⓘ

Additional Race and Ethnicity Detail:

Sex: Male ⓘ

Gender:
Man (Boy, if child)
Culturally Specific Identity (e.g., Two-Spirit)
Transgender
Men, Boys

Pregnancy Status: -- SELECT --

Veteran Status: * Yes ⓘ

Show Address and Contact Information: ☐ ⓘ

3.06 / Gender

- Gender data field is “retired”
- Remains visible – collect if needed

ntake (2322) 6/6/1997 444189

Basic Client Information

Family Members

Program Enrollment

Pause Cancel

Client Information

Birth Date: 06/06/1997

Client Age: 28

Date of Birth Quality: ☒ Full DOB Reported
☐ Approximate or Partial DOB Reported
☐ Don't Know
☐ Prefers not to answer
☐ Data not collected

Race and Ethnicity: American Indian, Alaska Native, or Indigenous
☒ Asian or Asian American
Black, African American, or African
Hispanic/Latina/e/o
Middle Eastern or North African

Additional Race and Ethnicity Detail:

Sex: -- SELECT --

Gender: Woman (Girl, if child)
☒ Man (Boy, if child)
Other
Unknown
Culturally Specific Identity (e.g., Two-Spirit)

Pregnancy Status: No

Veteran Status: No

Show Address and Contact Information: ☐

Finish

3.06 / Gender

ntake (2322)

Basic Client Information

Family Members

Program Enrollment

Pause

Cancel

HomelessAdult, Chronically
6/6/1997

ClientID
444189

Family Members

The selected client's family members are displayed below. You may search for existing clients to add to this family or add new clients to the database and associate them with this family.

It's important to note that family members are the people who the client is related to. Family isn't always the same as a client's household. According to HUD "[a] household is a single individual or a group of persons who apply together to a continuum project for assistance and who live together in one dwelling unit (or, for persons who are not housed, who would live together in one dwelling unit if they were housed)." (Data Manual)

This workflow will allow you to enroll all family members or select which family members you want to enroll.

+

3 results found (+1).

Relationship*	Birth Date*	Age	Birth Date Quality*	Gender	Please Specify	Sex At Birth
ne reported	06/06/1997	28	Full DOB Reported	...		-- SELECT --
ne reported	06/06/2018	7	Full DOB Reported	Woman (Girl, if chil...		-- SELECT --
ne reported	06/04/2024	1	Full DOB Reported	Other		-- SELECT --

Save

Save & Close

4.21/ Sex

- New Data Element
- HUD has explicitly stated this data element is distinct from the retired “Gender” element and no mapping will be done

The screenshot displays a web form titled "Client Information" with a section for "Basic Client Demographics". The form includes fields for Birth Date (04/03/1989), Client Age (36), Date of Birth Quality (Full DOB Reported), Race and Ethnicity (American Indian, Alaska Native, or Indigenous; Black, African American, or African), and Pregnancy Status (No, Pregnant). The "Sex" dropdown menu is highlighted with a blue box, showing options: Woman (Girl, if child), Man (Boy, if child), Culturally Specific Identity (e.g., Two-Spirit), Transgender, and Non-Binary. The "Gender" field is also visible, showing the same options. The "Veteran Status" is set to "No". The "Show Address and Contact Information" checkbox is unchecked. The form has a "Finish" button and a "No Changes" button at the bottom right.

Client Information

Basic Client Demographics

Birth Date: * 04/03/1989

Client Age: 36

Date of Birth Quality: * ☒ Full DOB Reported

☐ Approximate or Partial DOB Reported

☐ Client doesn't know

☐ Client prefers not to answer

☐ Data not collected

Race and Ethnicity: * ☒ American Indian, Alaska Native, or Indigenous

☒ Black, African American, or African

Hispanic/Latina/o

Middle Eastern or North African

Additional Race and Ethnicity Detail:

Sex: Female

Gender: Woman (Girl, if child)

Man (Boy, if child)

Culturally Specific Identity (e.g., Two-Spirit)

Transgender

Non-Binary

Pregnancy Status: -- SELECT --

Veteran Status: * No

Show Address and Contact Information: ☐

Finish No Changes

4.21/ Sex

take (4344)

4/3/1989

troan 426595

Basic Client Information

Family Members

Program Enrollment

Pause X Cancel

Family Members

The selected client's family members are displayed below. You may search for existing clients to add to this family or add new clients to the database and associate them with this family.

It's important to note that family members are the people who the client is related to. Family isn't always the same as a client's household. According to HUD "[a] household is a single individual or a group of persons who apply together to a continuum project for assistance and who live together in one dwelling unit (or, for persons who are not housed, who would live together in one dwelling unit if they were housed)." (Data Manual)

This workflow will allow you to enroll all family members or select which family members you want to enroll.

+ 1 result found (+1).

Age	Birth Date Quality*	Gender ⓘ Please Specify	Sex	SSN	SSN Quality*	Relationship to Head of Household*
36	Full DOB Reported	...	Female	- - -	Data not collected	Self
N/A	-- SELECT --	...	-- SELECT --	- - -	-- SELECT --	-- SELECT --

4.21/ Sex

ntake (2322)

6/6/1997

444189

Basic Client Information

Family Members

Program Enrollment

Pause Cancel

HUD Program Enrollment

For all types of **Permanent Housing**, including **Rapid Re-Housing** – it is the date following application that the client was admitted into the project. To be admitted indicates the following factors have been met:

1. Information provided by the client or from the referral indicates they meet the criteria for admission (for example if chronic homelessness is required the client indicates they have a serious disability and have been homeless long enough to qualify – though all documentation may not yet have been gathered)
2. The client has indicated they want to be housed in this project
3. The client is able to access services and housing through the project. The expectation is the project has a housing opening (on-site, site-based, scattered-site subsidy) or expects to have one in a reasonably short amount of time

For all other types of Service projects including but not limited to: services only, day shelter, homelessness prevention, coordinated assessment, health care it is the date the client first began working with the project and generally received the first provision of service.

Project: * Homeless Prevention - SSVF ⓘ

Household

Excerpt from the HMIS Data Standards Manual "A household is a single individual or a group of persons who apply together to a continuum project for assistance and who live together in one dwelling unit (or, for persons who are not housed, who would live together in one dwelling unit if they were housed)."

☐	Name	Sex **	Age	Project Start Date	Exit Date	Case Manager ⓘ	ProjectTypes	Relationship to Head of Household*
☒	HomelessAdult, Chronically	-- SELECT --	28	06/18/2025 ⓘ	MM/DD/YYYY	Jessica Fleming ⓘ		Self
☒	Child, CH	-- SELECT --	7	06/18/2025 ⓘ	MM/DD/YYYY	Jessica Fleming ⓘ		Daughter
☒	Child2, CH	-- SELECT --	1	06/18/2025 ⓘ	MM/DD/YYYY	Jessica Fleming ⓘ		Daughter

Save

No Changes

R3 / Sexual Orientation

- Data Field Retired – Historical data is accessible via reports
- **RHY Projects** – remains available for collection, but is no longer required

Intake (2322)

SPM_m1, c1
4/14/1999

ClientID
444147



Basic Client Information

Family Members

Program Enrollment

★ c1 SPM_m1

★ New Assessment

- BCP Status
- Barriers / Special Needs
- Income
- Employment
- Education
- Health
- RHY Entry Assessment**
- Formerly Ward Of

RHY Entry Assessment

The RHY Entry Assessment is used to collect project entry data for RHY funded projects. This Entry Assessment is also used to collect sexual orientation information for CoC, Unsheltered Special NOFO and Rural Special NOFO funded projects.

Assessment Date: *

05/31/2025



Sexual Orientation:

-- SELECT --



Referral Source: *

-- SELECT --



☐ Critical Issue

Status*

☐ Unemployment - Family member

-- SELECT --



☐ Mental Health Disorder - Family member

-- SELECT --



4.05-4.10 / Specific Disabling Conditions

- Removed conditions referencing VA funding
- No longer collected for VA projects:

Assessment Active

Identified Date: 09/30/2025

Screen: HMIS Barriers

Disabling Condition: Yes

☐ Barrier ^{1 2}	Help	Barrier Present?*	Condition is Indefinite	Explanation	Previous Barrier Details
☐ Alcohol Use Disorder	?	-- SELECT --			☐
☐ Chronic Health Condition	?	-- SELECT --			☐
☐ Developmental Disability	?	-- SELECT --			☐
☐ Drug Use Disorder	?	-- SELECT --			☐
☐ HIV/AIDS	?	-- SELECT --			☐
☐ Mental Health	?	-- SELECT --			☐
☐ Physical Disability	?	-- SELECT --			☐



C4 / Translation Assistance Needed

- Element retired
- No longer shows up in APR/CAPER reports

Translation Assistance Assessment

Select the appropriate translation assistance needed option at the time of assessment. If the client needs translation assistance, record the preferred languages below. Specify other if applicable.

Default Client's Last Assessment

Assessment:

No Assessment Selected

Assessment Date: * 09/30/2025

Translation Assistance Needed: * Yes

Preferred Language: * -- SELECT --

V3 / Financial Assistance – SSVF

- New Information Date field

service

Enter the information about the service provided to the client below.

Family Income:

Income	Family Income	Family Members	Poverty Level	% of Poverty
\$0.00	\$0.00	1	\$1,304.17	0.00 %

Enrollment:

08/01/2025 - HUD CoC PSH - FY2026

Grant:

-- SELECT --

Service:

SSVF Financial Assistance

Location:

Eccovia County PSH

Financial Assistance Start Date:

08/26/2025

Financial Assistance End Date:

MM/DD/YYYY

Information Date:

08/26/2025

Units Of Measure:

☐ Dollars

☐ Minutes

☒ Count

☐ Hours

Units:

1.00

Unit Value:

\$0.00

Total:

\$0.00

User Performing the Service:

Jessica Fleming

Save

Cancel

V7 / HP Targeting Criteria

- Updated language on two questions:

Question	Previous Language	Updated Language
Dependency P	Household size of 5 or more requiring at least 3 bedrooms (due to age/gender mix)	Household size of 5 or more requiring at least 3 bedrooms (due to household composition)
Dependency Q	Household includes one or more members of a n overrepresented population in the homelessness system when compared to the general population	Households which may include one or more members meeting other criteria for targeting prevention determined by the CoC

V10 / Mental Health Consultation

- New element added for SSVF providers

Veteran Elements

Household Income as a Percentage of AMI: * -- SELECT -- ▼

HP Screening Score: *

VAMC Station Number: * -- SELECT -- ▼

Mental Health Consultation: * -- SELECT -- ▼

-- SELECT --

Mental health consultation completed

Mental health consultation being coordinated/arranged with VA provider

Mental health consultation being coordinated/arranged with other provider

Offer declined

Enrollment CoC

Select or enter the CoC code assigned to the geographic area where the workflow.

default

R13 / Family Critical Issues

- Form updated to expanded Yes/No options
- Includes Client Doesn't Know, Prefers Not to Answer, Data Not Collected

Take (2322) 4/14/1999 444147

Basic Client Information

Family Members

Program Enrollment

SPM_m1, c1

Universal Data Assessment

BCP Status

Barriers / Special Needs

Income

Employment

Education

Health

RHY Entry Assessment

Formerly Ward Of

SPM_m1, Ad1

SPM_m1, ch1

RHY Entry Assessment

The RHY Entry Assessment is used to collect project entry data for RHY funded projects. This Entry Assessment is also used to collect sexual orientation information for CoC, Unsheltered Special NOFO and Rural Special NOFO funded projects.

Assessment Active

Assessment Date: 05/31/2025

Sexual Orientation: -- SELECT --

Referral Source: -- SELECT --

☐ Critical Issue

☒ Unemployment - Family member

☐ Mental Health Disorder - Family member

☐ Physical Disability - Family member

☐ Alcohol or Substance Use Disorder - Family member

Status:

No

-- SELECT --

Yes

No

Client Doesn't Know

Client prefers not to answer

Data Not Collected