

List of Health Centers - 2018
National - Universal - 38 Health Centers

Health Center Name	City	State	Tracking Number
ALTAMED HEALTH SERVICES CORPORATION	LOS ANGELES	CA	UD7HP285232018
COMMUNITY HEALTH CENTER, INCORPORATED	MIDDLETOWN	CT	UD7HP285252018
FAMILY HEALTH CENTERS OF SAN DIEGO, INC.	SAN DIEGO	CA	UD7HP298672018
FLORIDA ATLANTIC UNIVERSITY	BOCA RATON	FL	UD7HP269042018
FLORIDA INTERNATIONAL UNIVERSITY	MIAMI	FL	UD7HP285262018
GEORGE MASON UNIVERSITY	FAIRFAX	VA	UD7HP309232018
HEALTHRIGHT 360	SAN FRANCISCO	CA	UD7HP316102018
IDAHO STATE UNIVERSITY	POCATELLO	ID	UD7HP285282018
LEWIS & CLARK COMMUNITY COLLEGE	GODFREY	IL	UD7HP285292018
LOYOLA UNIVERSITY OF CHICAGO	MAYWOOD	IL	UD7HP298682018
MEDICAL UNIVERSITY OF SOUTH CAROLINA	CHARLESTON	SC	UD7HP285312018
NATIONAL UNIVERSITY	LA JOLLA	CA	UD7HP285332018
NORTHEASTERN UNIVERSITY	BOSTON	MA	UD7HP285342018
PIEDMONT HEALTH SERVICES, INC.	CARRBORO	NC	UD7HP298692018
REGENTS OF THE UNIVERSITY OF COLORADO, THE	AURORA	CO	UD7HP302612018
REGENTS OF THE UNIVERSITY OF MICHIGAN	ANN ARBOR	MI	UD7HP285362018
RESEARCH FOUNDATION OF STATE UNIVERSITY OF NEW YORK, THE	BUFFALO	NY	UD7HP309242018
RESOURCES FOR HUMAN DEVELOPMENT, INC.	PHILADELPHIA	PA	UD7HP298702018
SAGINAW VALLEY STATE UNIVERSITY	UNIVERSITY CENTER	MI	UD7HP298712018
SHEPHERD UNIVERSITY	SHEPHERDSTOWN	WV	UD7HP285372018
SOUTHERN ILLINOIS UNIVERSITY	EDWARDSVILLE	IL	UD7HP285382018
ST. VINCENT HEALTHCARE FOUNDATION, INC.	BILLINGS	MT	UD7HP309252018
SUMMA HEALTH SYSTEM	AKRON	OH	UD7HP285392018
THE RESEARCH FOUNDATION OF STATE UNIVERSITY OF NEW YORK	STONY BROOK	NY	UD7HP285402018
TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK	NEW YORK	NY	UD7HP298722018

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UNIV OF MARYLAND BALTIMORE	BALTIMORE	MD	UD7HP285472018
UNIVERISTY OF MISSISSIPPI MEDICAL CENTER	JACKSON	MS	UD7HP309262018
UNIVERSITY OF ALABAMA	TUSCALOOSA	AL	UD7HP309272018
UNIVERSITY OF ALABAMA AT BIRMINGHAM	BIRMINGHAM	AL	UD7HP298732018
UNIVERSITY OF CALIFORNIA, SAN FRANCISCO	SAN FRANCISCO	CA	UD7HP298742018
UNIVERSITY OF DETROIT MERCY	DETROIT	MI	UD7HP309282018
UNIVERSITY OF ILLINOIS	CHICAGO	IL	UD7HP309292018
UNIVERSITY OF SOUTHERN INDIANA	EVANSVILLE	IN	UD7HP269002018
UNIVERSITY OF TEXAS RIO GRANDE VALLEY (UTRGV), THE	EDINBURG	TX	UD7HP294272018
UNIVERSITY OF WISCONSIN SYSTEM	MILWAUKEE	WI	UD7HP285422018
UNIVERSITY OF WISCONSIN SYSTEM	MILWAUKEE	WI	UD7HP309302018
VANDERBILT UNIVERSITY, THE	NASHVILLE	TN	UD7HP309322018
XAVIER UNIVERSITY	CINCINNATI	OH	UD7HP285442018

Table 3A - Patients by Age and by Sex Assigned at Birth - 2018
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Line	Age Groups	Male Patients (a)	Female Patients (b)	All Patients
1.	Under age 1	66	73	139
2.	Age 1	91	55	146
3.	Age 2	66	57	123
4.	Age 3	94	81	175
5.	Age 4	94	70	164
6.	Age 5	113	102	215
7.	Age 6	100	85	185
8.	Age 7	100	85	185
9.	Age 8	124	91	215
10.	Age 9	113	98	211
11.	Age 10	149	128	277
12.	Age 11	151	166	317
13.	Age 12	158	119	277
14.	Age 13	140	159	299
15.	Age 14	184	232	416
16.	Age 15	216	340	556
17.	Age 16	235	361	596
18.	Age 17	264	386	650
19.	Age 18	227	329	556
20.	Age 19	138	226	364
21.	Age 20	93	228	321
22.	Age 21	76	195	271
23.	Age 22	79	200	279
24.	Age 23	67	204	271
25.	Age 24	97	267	364
26.	Ages 25 - 29	514	1,442	1,956
27.	Ages 30 - 34	623	1,659	2,282
28.	Ages 35 - 39	641	1,512	2,153
29.	Ages 40 - 44	773	1,873	2,646
30.	Ages 45 - 49	776	1,481	2,257
31.	Ages 50 - 54	854	1,419	2,273
32.	Ages 55 - 59	860	1,575	2,435
33.	Ages 60 - 64	781	1,414	2,195
34.	Ages 65 - 69	582	1,126	1,708
35.	Ages 70 - 74	258	528	786
36.	Ages 75 - 79	174	258	432
37.	Ages 80 - 84	71	156	227
38.	Age 85 and over	75	158	233
39.	Total Patients (Sum of Lines 1-38)	10,217	18,938	29,155
% of Total		35.04%	64.96%	

Table 3B - Demographic Characteristics - 2018
National - Universal - 38 Health Centers

Line	Patients by Race	Patients by Race and Hispanic or Latino Ethnicity						
		Hispanic/Latino (a)	Non-Hispanic/Latino (b)	Unreported/Refused to Report Ethnicity (c)		Total (d) (Sum Columns a+b+c)		
		Number (a)	Number (b)	Number (c)	% of Total Patients ¹	Number (d)	% of Total Patients ¹	% of Known Race ²
1.	Asian	11	603			614	2.11%	2.92%
2a.	Native Hawaiian	3	8			11	0.04%	0.05%
2b.	Other Pacific Islander	23	31			54	0.19%	0.26%
2.	Total Native Hawaiian/ Other Pacific Islander (Sum Lines 2a + 2b)	26	39			65	0.22%	0.31%
3.	Black/African American	367	8,987			9,354	32.08%	44.53%
4.	American Indian/Alaska Native	18	97			115	0.39%	0.55%
5.	White	4,113	6,482			10,595	36.34%	50.43%
6.	More than one race	79	186			265	0.91%	1.26%
6a.	Total Known (Sum lines 1+2+3+4+5+6)	4,614	16,394			21,008		
7.	Unreported/Refused to report race	1,957	564	5,626	19.30%	8,147	27.94%	
8.	Total Patients (Sum Lines 1 + 2 + 3 to 7)	6,571	16,958	5,626		29,155	100.00%	
Total Known Ethnicity (Sum line 8, columns A + B)		23,529						
		% of Hispanic/Latino of Total Known Ethnicity³ (a)	% of Non-Hispanic/Latino of Total Known Ethnicity³ (b)					
9.	Total Patients	27.93%	72.07%					

Line	Patients Best Served in a Language Other than English	Number (a)	% of Total
12.	Patients Best Served in a Language Other than English	7,543	25.87%

¹ Total Patients is reported on line 8, column D.
² Known Race is reported on line 6a, column D.
³ Known Ethnicity is shown on the line titled 'Total Known Ethnicity'.
 % may not equal 100% due to rounding.

Table 3B - Demographic Characteristics - 2018
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Patients by Sexual Orientation			
Line		Number (a)	% of Known
13.	Lesbian or Gay	229	2.34%
14.	Straight (not lesbian or gay)	9,260	94.67%
15.	Bisexual	229	2.34%
16.	Something else	63	0.64%
		Number (a)	% of Total
17.	Don't know	18,253	62.61%
18.	Chose not to disclose	1,121	3.84%
19.	Total Patients (Sum Lines 13 to 18)	29,155	100.00%

Patients by Gender Identity			
Line		Number (a)	% of Known
20.	Male	6,067	36.32%
21.	Female	10,427	62.43%
22.	Transgender Male/ Female-to-Male	81	0.48%
23.	Transgender Female/ Male-to-Female	128	0.77%
		Number (a)	% of Total
24.	Other	11,552	39.62%
25.	Chose not to disclose	900	3.09%
26.	Total Patients (Sum Lines 20 to 25)	29,155	100.00%

Table 4 - Selected Patient Characteristics - 2018
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Line	Characteristic	Number of Patients (a)			% of Total	% of Known
Income as Percent of Poverty Guideline						
1.	100% and Below	12,956			44.44%	75.11%
2.	101–150%	2,026			6.95%	11.75%
3.	151–200%	874			3.00%	5.07%
4.	Over 200%	1,393			4.78%	8.08%
5.	Unknown	11,906			40.84%	
6.	TOTAL (Sum Lines 1–5)	29,155			100.00%	
Principal Third-Party Medical Insurance		Ages 0 - 17 (a)	Ages 18+ (b)	Total	%	
7.	None/Uninsured	1,983	8,585	10,568	36.25%	
8a.	Medicaid (Title XIX)	1,882	6,019	7,901	27.10%	
8b.	CHIP Medicaid	755	53	808	2.77%	
8.	Total Medicaid (Line 8a + 8b)	2,637	6,072	8,709	29.87%	
9a.	Dually Eligible (Medicare and Medicaid)	0	886	886	3.04%	
9.	Medicare (Inclusive of dually eligible and other Title XVIII beneficiaries)	1	2,999	3,000	10.29%	
10a.	Other Public Insurance (Non-CHIP)	18	121	139	0.48%	
10b.	Other Public Insurance CHIP	2	1	3	0.01%	
10.	Total Public Insurance (Line 10a + 10b)	20	122	142	0.49%	
11.	Private Insurance	501	6,235	6,736	23.10%	
12.	TOTAL (Sum Lines 7 + 8 + 9 + 10 + 11)	5,142	24,013	29,155	100.00%	
Managed Care Utilization						
Line	Managed Care Utilization	Medicaid (a)	Medicare (b)	Other Public Including Non-Medicaid CHIP (c)	Private (d)	Total (e)
13a.	Capitated Member Months	689	67	0	195	951
13b.	Fee-for-service Member Months	31,646	2,376	4	1,695	35,721
13c.	Total Member Months (Sum Lines 13a + 13b)	32,335	2,443	4	1,890	36,672
Line	Special Populations	Number of Patients (a)			%	
14.	Migratory (330g awardees only)	-			-	
15.	Seasonal (330g awardees only)	-			-	
	Migrant/Seasonal (non-330g awardees)	124			100.00%	
16.	Total Agricultural Workers or Dependents (All health centers report this line)	124			100.00%	
17.	Homeless Shelter (330h awardees only)	-			-	
18.	Transitional (330h awardees only)	-			-	
19.	Doubling Up (330h awardees only)	-			-	
20.	Street (330h awardees only)	-			-	
21.	Other (330h awardees only)	-			-	
22.	Unknown (330h awardees only)	-			-	
	Homeless (non-330h awardees)	590			100.00%	
23.	Total Homeless (All health centers report this line)	590			100.00%	
24.	Total School-Based Health Center Patients (All health centers report this line)	3,443				
25.	Total Veterans (All health centers report this line)	209				
26.	Total Patients Served at a Health Center Located In or Immediately Accessible to a Public Housing Site (All health centers report this line)	12,054				

% may not equal 100% due to rounding.

Table 5 - Staffing and Utilization - 2018
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Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Patients (c)
1.	Family Physicians	6.99	11,458	
2.	General Practitioners	0.03	2	
3.	Internists	0.40	159	
4.	Obstetrician/Gynecologists	0.00	0	
5.	Pediatricians	0.50	35	
7.	Other Specialty Physicians	1.05	50	
8.	Total Physicians (Lines 1–7)	8.97	11,704	
9a.	Nurse Practitioners	41.69	37,384	
9b.	Physician Assistants	2.72	2,923	
10.	Certified Nurse Midwives	0.35	0	
10a.	Total NPs, PAs, and CNMs (Lines 9a–10)	44.76	40,307	
11.	Nurses	21.06	3,887	
12.	Other Medical Personnel	17.55		
13.	Laboratory Personnel	0.00		
14.	X-ray Personnel	0.00		
15.	Total Medical (Lines 8 + 10a through 14)	92.34	55,898	24,031
16.	Dentists	0.40	218	
17.	Dental Hygienists	0.50	0	
17a.	Dental Therapists	0.00	0	
18.	Other Dental Personnel	0.60		
19.	Total Dental Services (Lines 16–18)	1.50	218	142
20a.	Psychiatrists	0.95	425	
20a1.	Licensed Clinical Psychologists	3.16	1,538	
20a2.	Licensed Clinical Social Workers	16.61	11,062	
20b.	Other Licensed Mental Health Providers	13.84	9,209	
20c.	Other Mental Health Staff	3.00	1,025	
20.	Total Mental Health (Lines 20a–c)	37.56	23,259	7,409
21.	Substance Use Disorder Services	0.48	18	11
22.	Other Professional Services	1.95	297	160
22a.	Ophthalmologists	0.00	0	
22b.	Optometrists	0.10	68	
22c.	Other Vision Care Staff	0.00		
22d.	Total Vision Services (Lines 22a–c)	0.10	68	62
23.	Pharmacy Personnel	1.96		
24.	Case Managers	16.22	3,127	
25.	Patient/Community Education Specialists	4.36	724	
26.	Outreach Workers	1.63		
27.	Transportation Staff	0.00		
27a.	Eligibility Assistance Workers	0.00		
27b.	Interpretation Staff	0.16		
27c.	Community Health Workers	2.64		
28.	Other Enabling Services	1.10		
29.	Total Enabling Services (Lines 24–28)	26.11	3,851	1,213

Clinic visits are shown only for personnel that generate reportable visits.
Subtotals may differ from the sum of cells due to rounding.

Table 5 - Staffing and Utilization - 2018
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Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Patients (c)
29a.	Other Programs/Services	0.00		
29b.	Quality Improvement Staff	2.00		
30a.	Management and Support Staff	31.00		
30b.	Fiscal and Billing Staff	3.94		
30c.	IT Staff	3.18		
31.	Facility Staff	2.70		
32.	Patient Support Staff	6.18		
33.	Total Facility and Non-Clinical Support Staff (Lines 30a-32)	47.00		
34.	Grand Total (Lines 15+19+20+21+22+22d+23+29+29a+29b+33)	211.00	83,609	

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Table 5 - Staffing and Utilization - 2018
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Line	Personnel by Major Service Category	FTEs		Clinic Visits	
		% Group	% Total	% Group	% Total
1.	Family Physicians	7.57%	3.31%	20.50%	13.70%
2.	General Practitioners	0.03%	0.01%	0.00%	0.00%
3.	Internists	0.43%	0.19%	0.28%	0.19%
4.	Obstetrician/Gynecologists	0.00%	0.00%	0.00%	0.00%
5.	Pediatricians	0.54%	0.24%	0.06%	0.04%
7.	Other Specialty Physicians	1.14%	0.50%	0.09%	0.06%
8.	Total Physicians (Lines 1–7)	9.71%	4.25%	20.94%	14.00%
9a.	Nurse Practitioners	45.15%	19.76%	66.88%	44.71%
9b.	Physician Assistants	2.95%	1.29%	5.23%	3.50%
10.	Certified Nurse Midwives	0.38%	0.17%	0.00%	0.00%
10a.	Total NPs, PAs, and CNMs (Lines 9a–10)	48.47%	21.21%	72.11%	48.21%
11.	Nurses	22.81%	9.98%	6.95%	4.65%
12.	Other Medical Personnel	19.01%	8.32%		
13.	Laboratory Personnel	0.00%	0.00%		
14.	X-ray Personnel	0.00%	0.00%		
15.	Total Medical (Lines 8 + 10a through 14)	100.00%	43.76%	100.00%	66.86%
16.	Dentists	26.67%	0.19%	100.00%	0.26%
17.	Dental Hygienists	33.33%	0.24%	0.00%	0.00%
17a.	Dental Therapists	0.00%	0.00%	0.00%	0.00%
18.	Other Dental Personnel	40.00%	0.28%		
19.	Total Dental Services (Lines 16–18)	100.00%	0.71%	100.00%	0.26%
20a.	Psychiatrists	2.53%	0.45%	1.83%	0.51%
20a1.	Licensed Clinical Psychologists	8.41%	1.50%	6.61%	1.84%
20a2.	Licensed Clinical Social Workers	44.22%	7.87%	47.56%	13.23%
20b.	Other Licensed Mental Health Providers	36.85%	6.56%	39.59%	11.01%
20c.	Other Mental Health Staff	7.99%	1.42%	4.41%	1.23%
20.	Total Mental Health (Lines 20a–c)	100.00%	17.80%	100.00%	27.82%
21.	Substance Use Disorder Services	100.00%	0.23%	100.00%	0.02%
22.	Other Professional Services	100.00%	0.92%	100.00%	0.36%
22a.	Ophthalmologists	0.00%	0.00%	0.00%	0.00%
22b.	Optometrists	100.00%	0.05%	100.00%	0.08%
22c.	Other Vision Care Staff	0.00%	0.00%		
22d.	Total Vision Services (Lines 22a–c)	100.00%	0.05%	100.00%	0.08%
23.	Pharmacy Personnel	100.00%	0.93%		
24.	Case Managers	62.12%	7.69%	81.20%	3.74%
25.	Patient/Community Education Specialists	16.70%	2.07%	18.80%	0.87%
26.	Outreach Workers	6.24%	0.77%		
27.	Transportation Staff	0.00%	0.00%		
27a.	Eligibility Assistance Workers	0.00%	0.00%		
27b.	Interpretation Staff	0.61%	0.08%		
27c.	Community Health Workers	10.11%	1.25%		
28.	Other Enabling Services	4.21%	0.52%		
29.	Total Enabling Services (Lines 24–28)	100.00%	12.37%	100.00%	4.61%

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Table 5 - Staffing and Utilization - 2018
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Line	Personnel by Major Service Category	FTEs		Clinic Visits	
		% Group	% Total	% Group	% Total
29a.	Other Programs/Services	-	0.00%		
29b.	Quality Improvement Staff	100.00%	0.95%		
30a.	Management and Support Staff		14.69%		
30b.	Fiscal and Billing Staff		1.87%		
30c.	IT Staff		1.51%		
31.	Facility Staff		1.28%		
32.	Patient Support Staff		2.93%		
33.	Total Facility and Non-Clinical Support Staff (Lines 30a-32)	100.00%	22.27%		
34.	Grand Total (Lines 15+19+20+21+22+22d+23+29+29a+29b+33)		100.00%		100.00%

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Table 5A - Tenure for Health Center Staff - 2018
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Line	Health Center Staff	Full- and Part-Time		Locum, On-Call, etc.	
		Persons (a)	Total Months (b)	Persons (c)	Total Months (d)
1.	Family Physicians	9	388	0	0
2.	General Practitioners	1	24	0	0
3.	Internists	4	68	0	0
4.	Obstetrician/Gynecologists	0	0	0	0
5.	Pediatricians	0	0	0	0
7.	Other Specialty Physicians	1	12	0	0
9a.	Nurse Practitioners	64	2,894	1	13
9b.	Physician Assistants	1	12	0	0
10.	Certified Nurse Midwives	1	6	0	0
11.	Nurses	76	2,739	0	0
16.	Dentists	2	72	0	0
17.	Dental Hygienists	2	52	0	0
17a.	Dental Therapists	0	0	0	0
20a.	Psychiatrists	7	101	1	2
20a1.	Licensed Clinical Psychologists	10	322	0	0
20a2.	Licensed Clinical Social Workers	20	406	0	0
20b.	Other Licensed Mental Health Providers	30	643	0	0
22a.	Ophthalmologist	0	0	0	0
22b.	Optometrist	1	30	0	0
30a1.	Chief Executive Officer	9	551	0	0
30a2.	Chief Medical Officer	2	62	0	0
30a3.	Chief Financial Officer	4	90	0	0
30a4.	Chief Information Officer	3	253	0	0

Table 6A - Selected Diagnoses and Services Rendered - 2018
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Line	Diagnostic Category	Applicable ICD - 10 - CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)	Visits per Patient
Selected Infectious and Parasitic Diseases					
1-2.	Symptomatic / Asymptomatic HIV	B20, B97.35, O98.7-, Z21	51	27	1.89
3.	Tuberculosis	A15- through A19-, O98.01	21	20	1.05
4.	Sexually transmitted infections	A50- through A64- (exclude A63.0)	171	125	1.37
4a.	Hepatitis B	B16.0 through B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11, O98.4-	22	17	1.29
4b.	Hepatitis C	B17.10, B17.11, B18.2, B19.20, B19.21	229	94	2.44
Selected Diseases of the Respiratory System					
5.	Asthma	J45-	2,195	1,696	1.29
6.	Chronic lower respiratory diseases	J40- through J44-, J47-	800	426	1.88
Selected Other Medical Conditions					
7.	Abnormal breast findings, female	C50.01-, C50.11-, C50.21-, C50.31-, C50.41-, C50.51-, C50.61-, C50.81-, C50.91-, C79.81, D05-, D48.6-, D49.3-, N60-, N63-, R92-	225	178	1.26
8.	Abnormal cervical findings	C53-, C79.82, D06-, R87.61-, R87.629, R87.810, R87.820	127	92	1.38
9.	Diabetes mellitus	E08- through E13-, O24- (exclude O24.41-)	10,534	3,860	2.73
10.	Heart disease (selected)	I01-, I02- (exclude I02.9), I20- through I25-, I27-, I28-, I30- through I52-	1,818	637	2.85
11.	Hypertension	I10- thru I16-	13,992	6,114	2.29
12.	Contact dermatitis and other eczema	L23- through L25-, L30- (exclude L30.1, L30.3, L30.4, L30.5), L58-	584	438	1.33
13.	Dehydration	E86-	41	34	1.21
14.	Exposure to heat or cold	T33-, T34-, T67-, T68-, T69-	13	13	1.00
14a.	Overweight and obesity	E66-, Z68- (exclude Z68.1, Z68.20 through Z68.24, Z68.51, Z68.52)	5,342	3,183	1.68
Selected Childhood Conditions (limited to ages 0 through 17)					
15.	Otitis media and Eustachian tube disorders	H65- thru H69-	276	206	1.34
16.	Selected perinatal medical conditions	A33-, P19-, P22- through P29- (exclude P29.3), P35- through P96- (exclude P54-, P91.6-, P92-, P96.81), R78.81, R78.89	23	14	1.64

Table 6A - Selected Diagnoses and Services Rendered - 2018
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Line	Diagnostic Category	Applicable ICD - 10 - CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)	Visits per Patient
Selected Childhood Conditions (limited to ages 0 through 17)					
17.	Lack of expected normal physiological development (such as delayed milestone; failure to gain weight; failure to thrive); nutritional deficiencies in children only. Does not include sexual or mental development	E40- through E46-, E50- through E63-, P92-, R62- (exclude R62.7), R63.3	105	65	1.62
Selected Mental Health Conditions and Substance Use Disorders					
18.	Alcohol-related disorders	F10-, G62.1, O99.31	1,104	550	2.01
19.	Other substance-related disorders (excluding tobacco use disorders)	F11- thru F19- (Exclude F17-), G62.0, O99.32-	8,727	761	11.47
19a.	Tobacco use disorders	F17-, O99.33	4,599	2,307	1.99
20a.	Depression and other mood disorders	F30- thru F39-	12,541	3,874	3.24
20b.	Anxiety disorders, including post-traumatic stress disorder (PTSD)	F06.4, F40- thru F42-, F43.0, F43.1-, F93.0	8,641	2,816	3.07
20c.	Attention deficit and disruptive behavior disorders	F90- thru F91-	1,295	382	3.39
20d.	Other mental disorders, excluding drug or alcohol dependence	F01- through F09- (exclude F06.4), F20- through F29-, F43- through F48- (exclude F43.0- and F43.1-), F50- through F99- (exclude F55-, F84.2, F90-, F91-, F93.0, F98-), O99.34, R45.1, R45.2, R45.5, R45.6, R45.7, R45.81, R45.82, R48.0	8,752	3,420	2.56

Table 6A - Selected Diagnoses and Services Rendered - 2018
National - Universal - 38 Health Centers

Line	Service Category	Applicable ICD-10-CM or CPT-4/II Code	Number of Visits (a)	Number of Patients (b)	Visits per Patient
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV test	CPT-4: 86689; 86701 through 86703; 87389 through 87391, 87534 through 87539, 87806	1,076	1,018	1.06
21a.	Hepatitis B test	CPT-4: 86704 through 86707, 87340, 87341, 87350	88	85	1.04
21b.	Hepatitis C test	CPT-4: 86803, 86804, 87520 through 87522	466	435	1.07
22.	Mammogram	CPT-4: 77052, 77057, 77065, 77066, 77067 OR ICD-10: Z12.31	448	426	1.05
23.	Pap tests	CPT-4: 88141 through 88153, 88155, 88164 through 88167, 88174, 88175 OR ICD-10: Z01.41-, Z01.42, Z12.4 (exclude Z01.411 and Z01.419)	1,186	1,155	1.03
24.	Selected immunizations: hepatitis A; haemophilus influenzae B (HiB); pneumococcal; diphtheria; tetanus; pertussis (DTaP) (DTP) (DT); mumps; measles; rubella (MMR); poliovirus; varicella; hepatitis B	CPT-4: 90632, 90633, 90634, 90636, 90643, 90644, 90645, 90646, 90647, 90648, 90669, 90670, 90696, 90697, 90698, 90700, 90701, 90702, 90703, 90704, 90705, 90706, 90707, 90708, 90710, 90712, 90713, 90714, 90715, 90716, 90718, 90720, 90721, 90723, 90730, 90731, 90732, 90740, 90743, 90744, 90745, 90746, 90747, 90748	2,164	1,761	1.23
24a.	Seasonal flu vaccine	CPT-4: 90630, 90653 through 90657, 90661, 90662, 90672, 90673, 90674, 90682, 90685 through 90688, 90749, 90756	3,287	3,086	1.07
25.	Contraceptive management	ICD-10: Z30-	1,112	633	1.76
26.	Health supervision of infant or child (ages 0 through 11)	CPT-4: 99381 through 99383, 99391 through 99393	1,307	910	1.44
26a.	Childhood lead test screening (ages 9 to 72 months)	ICD-10: Z13.88 CPT-4: 83655	356	263	1.35
26b.	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408, 99409 HCPCS: G0396, G0397, H0050	2,293	1,038	2.21
26c.	Smoke and tobacco use cessation counseling	CPT-4: 99406, 99407 OR HCPCS: S9075 OR CPT-II: 4000F, 4001F, 4004F	1,524	713	2.14
26d.	Comprehensive and intermediate eye exams	CPT-4: 92002, 92004, 92012, 92014	68	62	1.10

Table 6A - Selected Diagnoses and Services Rendered - 2018
National - Universal - 38 Health Centers

Line	Service Category	Applicable ADA Code	Number of Visits (a)	Number of Patients (b)	Visits per Patient
Selected Dental Services					
27.	Emergency Services	ADA: D9110	0	0	-
28.	Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0171, D0180	46	35	1.31
29.	Prophylaxis - adult or child	ADA: D1110, D1120	15	10	1.50
30.	Sealants	ADA: D1351	0	0	-
31.	Fluoride treatment - adult or child	ADA: D1206, D1208, CPT-4: 99188	0	0	-
32.	Restorative services	ADA: D21xx through D29xx	21	14	1.50
33.	Oral surgery (extractions and other surgical procedures)	ADA: D7xxx	27	26	1.04
34.	Rehabilitation services (Endo, Perio, Prostho, Ortho)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	33	16	2.06

Sources of codes:

- International Classification of Diseases, 2018, (ICD-10-CM). National Center for Health Statistics (NCHS).
- Current Procedural Terminology (CPT), 2018. American Medical Association (AMA).
- Current Dental Terminology (CDT), 2018 - Dental Procedure Codes. American Dental Association (ADA).

Note: "X" in a code denotes any number including the absence of a number in that place.

Dashes (-) in a code indicate that additional characters are required.

ICD-10-CM codes all have at least four digits. These codes are not intended to reflect if a code is billable or not. Instead they are used to point out that other codes in the series are to be considered.

Table 6B - Quality of Care Measures - 2018
National - Universal - 38 Health Centers

Prenatal Care Provided by Referral Only		
Answer	Number of Health Centers	% Total
Yes	22	57.89%
No	16	42.11%

Section A - Age Categories for Prenatal Care Patients: (Health Centers Who Provide Prenatal Care Only)			
Demographic Characteristics of Prenatal Care Patients			
Line	Age	Number of Patients (a)	Percent
1.	Less than 15 Years	0	0.00%
2.	Ages 15–19	8	4.97%
3.	Ages 20–24	22	13.66%
4.	Ages 25–44	130	80.75%
5.	Ages 45 and Over	1	0.62%
6.	Total Patients (Sum lines 1–5)	161	100.00%

Section B - Early Entry into Prenatal Care						
Line	Early Entry into Prenatal Care	Women Having First Visit with Health Center		Women Having First Visit with Another Provider		% Total
		(a)	%	(b)	%	
7.	First Trimester	127	78.88%	1	0.62%	79.50%
8.	Second Trimester	31	19.25%	1	0.62%	19.88%
9.	Third Trimester	1	0.62%	0	0.00%	0.62%

Section C - Childhood Immunization Status				
Line	Childhood Immunization Status	Total Patients with 2 nd Birthday (a)	Estimated Number of Patients Immunized	Estimated % of Patients Immunized
10.	MEASURE: Percentage of children 2 years of age who received age appropriate vaccines by their 2 nd birthday	121	72	59.50%

Section D - Cervical Cancer Screening				
Line	Cervical Cancer Screening	Total Female Patients Aged 23 through 64 (a)	Estimated Number of Patients Tested	Estimated % of Patients Tested
11.	MEASURE: Percentage of women 23-64 years of age who were screened for cervical cancer	9,297	2,845	30.60%

Section E – Weight Assessment and Counseling for Nutrition and Physical Activity of Children and Adolescents				
Line	Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	Total Patients Aged 3 through 17 (a)	Estimated Number of Patients Assessed and COUNSELED	Estimated % of Patients Assessed and COUNSELED
12.	MEASURE: Percentage of patients 3-17 years of age with a BMI percentile <i>and</i> counseling on nutrition <i>and</i> physical activity documented	3,606	2,232	61.91%

% may not equal 100% due to rounding.

Estimated % of Patients for Sections C through N are based on the total of the estimated number of patients included in column b for each health center, for each measure, divided by the total number of patients in the applicable category (i.e., the Universe) for each measure.

Table 6B - Quality of Care Measures - 2018
National - Universal - 38 Health Centers

Section F – Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan				
Line	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	Total Patients Aged 18 and Older (a)	Estimated Number of Patients with BMI Charted and Follow-Up Plan Documented as Appropriate	Estimated % of Patients with BMI Charted and Follow-Up Plan Documented as Appropriate
13.	MEASURE: Percentage of patients 18 years of age and older with (1) BMI documented and (2) follow-up plan documented if BMI is outside normal parameters	17,977	9,012	50.13%

Section G – Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention				
Line	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Total Patients Aged 18 and Older (a)	Estimated Number of Patients Assessed for Tobacco Use and Provided Intervention if a Tobacco User	Estimated % of Patients Assessed for Tobacco Use and Provided Intervention if a Tobacco User
14a.	MEASURE: Percentage of patients aged 18 years of age and older who (1) were screened for tobacco use one or more times within 24 months, and (2) if identified to be a tobacco user received cessation counseling intervention	16,635	9,155	55.03%

Section H – Use of Appropriate Medications for Asthma				
Line	Use of Appropriate Medications for Asthma	Total Patients Aged 5 through 64 with Persistent Asthma (a)	Estimated Number of Patients with Acceptable Plan	Estimated % of Patients with Acceptable Plan
16.	MEASURE: Percentage of patients 5 through 64 years of age identified as having persistent asthma and were appropriately ordered medication	1,378	1,308	94.92%

Section I – Coronary Artery Disease (CAD): Lipid Therapy				
Line	Coronary Artery Disease (CAD): Lipid Therapy	Total Patients Aged 18 and Older with CAD Diagnosis (a)	Estimated Number of Patients Prescribed a Lipid Lowering Therapy	Estimated % of Patients Prescribed a Lipid Lowering Therapy
17.	MEASURE: Percentage of patients 18 years of age and older with a diagnosis of CAD who were prescribed a lipid lowering therapy	557	444	79.71%

Section J – Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet				
Line	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	Total Patients Aged 18 and Older with IVD Diagnosis or AMI, CABG, or PCI Procedure (a)	Estimated Number of Patients with Aspirin or Other Antiplatelet Therapy	Estimated % of Patients with Documentation of Aspirin or Other Antiplatelet Therapy
18.	MEASURE: Percentage of patients 18 years of age and older with a diagnosis of IVD or AMI, CABG, or PCI procedure with aspirin or another antiplatelet	379	325	85.75%

% may not equal 100% due to rounding.

Estimated % of Patients for Sections C through N are based on the total of the estimated number of patients included in column b for each health center, for each measure, divided by the total number of patients in the applicable category (i.e., the Universe) for each measure.

Table 6B - Quality of Care Measures - 2018
National - Universal - 38 Health Centers

Section K – Colorectal Cancer Screening				
Line	Colorectal Cancer Screening	Total Patients Aged 50 through 75 (a)	Estimated Number of Patients with Appropriate Screening for Colorectal Cancer	Estimated % of Patients with Appropriate Screening for Colorectal Cancer
19.	MEASURE: Percentage of patients 50 through 75 years of age who had appropriate screening for colorectal cancer	5,977	1,631	27.29%

Section L – HIV Linkage to Care				
Line	HIV Linkage to Care	Total Patients First Diagnosed with HIV (a)	Estimated Number of Patients Seen Within 90 Days of First Diagnosis of HIV	Estimated % of Patients Seen Within 90 Days of First Diagnosis of HIV
20.	MEASURE: Percentage of patients whose first ever HIV diagnosis was made by health center staff between October 1 of the prior year and September 30 of the measurement year and who were seen for follow-up treatment within 90 days of that first ever diagnosis	1	1	100.00%

Section M – Preventive Care and Screening: Screening for Depression and Follow-Up Plan				
Line	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Total Patients Aged 12 and Older (a)	Estimated Number of Patients Screened for Depression and Follow-up Plan Documented as Appropriate	Estimated % of Patients Screened for Depression and Follow-up Plan Documented as Appropriate
21.	MEASURE: Percentage of patients 12 years of age and older who were (1) screened for depression with a standardized tool <i>and</i> , if screening was positive, (2) had a follow-up plan documented	14,611	9,507	65.06%

Section N – Dental Sealants for Children between 6-9 Years				
Line	Dental Sealants for Children between 6-9 Years	Total Patients Aged 6 through 9 at Moderate to High Risk for Caries (a)	Estimated Number of Patients with Sealants to First Molars	Estimated % of Patients with Sealants to First Molars
22.	MEASURE: Percentage of children 6 through 9 years of age at moderate to high risk of caries who received a sealant on a first permanent molar	0	-	-

% may not equal 100% due to rounding.

Estimated % of Patients for Sections C through N are based on the total of the estimated number of patients included in column b for each health center, for each measure, divided by the total number of patients in the applicable category (i.e., the Universe) for each measure.

Table 7 - Health Outcomes and Disparities - 2018
National - Universal - 38 Health Centers

Line	Total (i)						
0.	HIV-Positive Pregnant Women						0
2.	Deliveries Performed by Health Center's Providers						0
Section A: Deliveries And Birth Weight							
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)	% Low and Very Low Birth Weight	
Hispanic/Latino							
1a.	Asian	0	0	0	0	-	
1b1.	Native Hawaiian	0	0	0	0	-	
1b2.	Other Pacific Islander	0	0	0	0	-	
1c.	Black/African American	2	0	0	2	0.00%	
1d.	American Indian/Alaska Native	0	0	0	0	-	
1e.	White	64	0	2	62	3.13%	
1f.	More than One Race	0	0	0	0	-	
1g.	Unreported/Refused to Report Race	8	0	0	8	0.00%	
<i>Subtotal Hispanic/Latino</i>		74	0	2	72	2.70%	
Non-Hispanic/Latino							
2a.	Asian	14	0	0	14	0.00%	
2b1.	Native Hawaiian	0	0	0	0	-	
2b2.	Other Pacific Islander	0	0	0	0	-	
2c.	Black/African American	9	1	0	8	11.11%	
2d.	American Indian/Alaska Native	0	0	0	0	-	
2e.	White	4	0	2	3	40.00%	
2f.	More than One Race	0	0	0	0	-	
2g.	Unreported/Refused to Report Race	0	0	0	0	-	
<i>Subtotal Non-Hispanic/Latino</i>		27	1	2	25	10.71%	
Unreported/Refused to Report Race and Ethnicity							
h.	Unreported/Refused to Report Race and Ethnicity	0	0	0	0	-	
i.	Total	101	1	4	97	4.90%	

% shown are rounded to the .01% level for table display purposes; calculations are made using % to 8 decimal places.

Table 7 - Health Outcomes and Disparities - 2018
National - Universal - 38 Health Centers

Section B: Controlling High Blood Pressure					
Line	Race and Ethnicity	Total Patients 18 through 85 Years of Age with Hypertension (2a)	Charts Sampled or EHR Total (2b)	Patients with Hypertension Controlled (2c)	Estimated % Patients with Controlled Blood Pressure
Hispanic/Latino					
1a.	Asian	7	7	5	71.43%
1b1.	Native Hawaiian	0	0	0	-
1b2.	Other Pacific Islander	2	2	0	0.00%
1c.	Black/African American	69	69	41	59.42%
1d.	American Indian/Alaska Native	1	1	1	100.00%
1e.	White	815	815	467	57.30%
1f.	More than One Race	13	13	9	69.23%
1g.	Unreported/Refused to Report Race	481	481	283	58.84%
<i>Subtotal Hispanic/Latino</i>		1,388	1,388	806	58.07%
Non-Hispanic/Latino					
2a.	Asian	64	64	39	60.94%
2b1.	Native Hawaiian	2	2	1	50.00%
2b2.	Other Pacific Islander	6	6	5	83.33%
2c.	Black/African American	2,101	2,101	1,242	59.11%
2d.	American Indian/Alaska Native	12	12	9	75.00%
2e.	White	1,237	1,237	781	63.14%
2f.	More than One Race	22	22	14	63.64%
2g.	Unreported/Refused to Report Race	105	105	66	62.86%
<i>Subtotal Non-Hispanic/Latino</i>		3,549	3,549	2,157	60.78%
Unreported/Refused to Report Race and Ethnicity					
h.	Unreported/Refused to Report Race and Ethnicity	3,268	3,268	1,849	56.58%
i.	Total	8,205	8,205	4,812	58.65%

% shown are rounded to the .01% level for table display purposes; calculations are made using % to 8 decimal places
% by race are low estimates, not adjusted at the health center level for samples with zero patients in racial categories.

Table 7 - Health Outcomes and Disparities - 2018
National - Universal - 38 Health Centers

Section C: Diabetes: Hemoglobin A1c Poor Control					
Line	Race and Ethnicity	Total Patients 18 through 75 Years of Age with Diabetes (3a)	Charts Sampled or EHR Total (3b)	Patients with HbA1c >9% or No Test During Year (3f)	Estimated % Patients with Hba1c > 9%
Hispanic/Latino					
1a.	Asian	4	4	1	25.00%
1b1.	Native Hawaiian	0	0	0	-
1b2.	Other Pacific Islander	1	1	0	0.00%
1c.	Black/African American	51	51	20	39.22%
1d.	American Indian/Alaska Native	0	0	0	-
1e.	White	700	700	359	51.29%
1f.	More than One Race	10	10	5	50.00%
1g.	Unreported/Refused to Report Race	533	533	254	47.65%
<i>Subtotal Hispanic/Latino</i>		1,299	1,299	639	49.19%
Non-Hispanic/Latino					
2a.	Asian	60	60	23	38.33%
2b1.	Native Hawaiian	2	2	1	50.00%
2b2.	Other Pacific Islander	3	3	2	66.67%
2c.	Black/African American	1,102	1,102	509	46.19%
2d.	American Indian/Alaska Native	11	11	7	63.64%
2e.	White	728	728	274	37.64%
2f.	More than One Race	17	17	7	41.18%
2g.	Unreported/Refused to Report Race	63	63	21	33.33%
<i>Subtotal Non-Hispanic/Latino</i>		1,986	1,986	844	42.50%
Unreported/Refused to Report Race and Ethnicity					
h.	Unreported/Refused to Report Race and Ethnicity	1,527	1,527	462	30.26%
i.	Total	4,812	4,812	1,945	40.42%

% shown are rounded to the .01% level for table display purposes; calculations are made using % to 8 decimal places
 % by race are low estimates, not adjusted at the health center level for samples with zero patients in racial categories.

Table 8A - Financial Costs - 2018
National - Universal - 38 Health Centers

Line	Cost Center	Accrued Cost (a) \$	Allocation of Facility and Non-Clinical Support Services (b) \$	Total Cost After Allocation of Facility and Non-Clinical Support Services (c) \$
Financial Costs of Medical Care				
1.	Medical Staff	4,269,817	1,200,137	5,469,954
2.	Lab and X-ray	37,843	7,172	45,015
3.	Medical/Other Direct	872,264	389,014	1,261,278
4.	Total Medical Care Services (Sum Lines 1-3)	5,179,924	1,596,323	6,776,247
Financial Costs of Other Clinical Services				
5.	Dental	46,081	40,645	86,726
6.	Mental Health	3,642,238	1,453,004	5,095,242
7.	Substance Use Disorder	33,469	19,249	52,718
8a.	Pharmacy not including pharmaceuticals	60,080	8,798	68,878
8b.	Pharmaceuticals	44,664		44,664
9.	Other Professional	77,799	27,618	105,417
9a.	Vision	0	0	0
10.	Total Other Clinical Services (Sum Lines 5 through 9a)	3,904,331	1,549,314	5,453,645
Financial Costs of Enabling and Other Services				
11a.	Case Management	750,591		750,591
11b.	Transportation	31,335		31,335
11c.	Outreach	154,733		154,733
11d.	Patient and Community Education	215,397		215,397
11e.	Eligibility Assistance	0		0
11f.	Interpretation Services	29,130		29,130
11g.	Other Enabling Services	373,149		373,149
11h.	Community Health Workers	94,443		94,443
11.	Total Enabling Services Cost (Sum Lines 11a through 11h)	1,648,778	675,346	2,324,124
12.	Other Related Services	126,552	3,082	129,634
12a.	Quality Improvement	250,310	195,237	445,547
13.	Total Enabling and Other Services (Sum Lines 11, 12, and 12a)	2,025,640	873,665	2,899,305
Facility and Non-Clinical Support Services and Totals				
14.	Facility	475,547		
15.	Non-Clinical Support Services	3,543,755		
16.	Total Facility and Non-Clinical Support Services (Sum Lines 14 and 15)	4,019,302		
17.	Total Accrued Costs (Sum Lines 4 + 10 + 13 + 16)	15,129,197		15,129,197
18.	Value of Donated Facilities, Services and Supplies			3,313,865
19.	Total with Donations (Sum Lines 17 and 18)			18,443,062

Table 9D: Patient Related Revenue - 2018
National - Universal - 38 Health Centers

Line	Payer Category	Charges			Collections			
		Full Charges This Period (a) \$	% of Payer	% of Total	Amount Collected This Period (b) \$	% of Payer	% of Total	% of Charges
1.	Medicaid Non-Managed Care	1,308,516	49.50%	16.94%	730,876	35.53%	18.83%	55.86%
2a.	Medicaid Managed Care (capitated)	158,334	5.99%	2.05%	85,006	4.13%	2.19%	53.69%
2b.	Medicaid Managed Care (fee-for-service)	1,176,507	44.51%	15.23%	1,241,170	60.34%	31.98%	105.50%
3.	Total Medicaid (Sum Lines 1 + 2a + 2b)	2,643,357	100.00%	34.21%	2,057,052	100.00%	53.00%	77.82%
4.	Medicare Non-Managed Care	919,689	77.18%	11.90%	351,065	76.90%	9.04%	38.17%
5a.	Medicare Managed Care (capitated)	957	0.08%	0.01%	3,741	0.82%	0.10%	390.91%
5b.	Medicare Managed Care (fee-for-service)	270,898	22.74%	3.51%	101,742	22.29%	2.62%	37.56%
6.	Total Medicare (Sum Lines 4 + 5a + 5b)	1,191,544	100.00%	15.42%	456,548	100.00%	11.76%	38.32%
7.	Other Public, including Non-Medicaid CHIP (Non-Managed Care)	16,439	100.00%	0.21%	4,480	100.00%	0.12%	27.25%
8a.	Other Public, including Non-Medicaid CHIP (Managed Care capitated)	0	0.00%	0.00%	0	0.00%	0.00%	-
8b.	Other Public, including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0.00%	0.00%	0	0.00%	0.00%	-
9.	Total Other Public (Sum Lines 7 + 8a + 8b)	16,439	100.00%	0.21%	4,480	100.00%	0.12%	27.25%
10.	Private Non-Managed Care	2,387,216	97.93%	30.90%	1,039,748	97.73%	26.79%	43.55%
11a.	Private Managed Care (capitated)	35,025	1.44%	0.45%	15,125	1.42%	0.39%	43.18%
11b.	Private Managed Care (fee-for-service)	15,466	0.63%	0.20%	9,043	0.85%	0.23%	58.47%
12.	Total Private (Lines 10 + 11a + 11b)	2,437,707	100.00%	31.55%	1,063,916	100.00%	27.41%	43.64%
13.	Self-pay	1,437,520	100.00%	18.60%	299,539	100.00%	7.72%	20.84%
14.	TOTAL (Lines 3 + 6 + 9 + 12 + 13)	7,726,567		100.00%	3,881,535		100.00%	50.24%

% may not equal 100% due to rounding.

Table 9D: Patient Related Revenue - 2018
National - Universal - 38 Health Centers

Line	Payer Category	Retroactive Settlements, Receipts, and Paybacks						Allowances	
		(c)						Allowances (d) \$	Allowances % of Charges
		Collection of Recon/Wrap Around Current Year (c1) \$	Collection of Recon/Wrap Around Previous Years (c2) \$	Collection of Other Payments: P4P, Risk Pools, etc. (c3) \$	Penalty/ Payback (c4) \$	Net Retros \$	Net Retros % of Charges		
1.	Medicaid Non-Managed Care	0	50,373	0	0	50,373	3.85%	334,195	25.54%
2a.	Medicaid Managed Care (capitated)	26,687	0	0	0	26,687	16.85%	20,194	12.75%
2b.	Medicaid Managed Care (fee-for-service)	93	0	0	0	93	0.01%	128,057	10.88%
3.	Total Medicaid (Lines 1 + 2a + 2b)	26,780	50,373	0	0	77,153	2.92%	482,446	18.25%
4.	Medicare Non-Managed Care	0	0	0	0	0	0.00%	469,123	51.01%
5a.	Medicare Managed Care (capitated)	0	0	0	0	0	0.00%	-2,784	-290.91%
5b.	Medicare Managed Care (fee-for-service)	0	0	0	0	0	0.00%	73,135	27.00%
6.	Total Medicare (Lines 4 + 5a + 5b)	0	0	0	0	0	0.00%	539,474	45.28%
7.	Other Public, including Non-Medicaid CHIP (Non-Managed Care)	0	0	0	0	0	0.00%	4,842	29.45%
8a.	Other Public, including Non-Medicaid CHIP (Managed Care capitated)	0	0	0	0	0	-	0	-
8b.	Other Public, including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0	0	0	0	-	0	-
9.	Total Other Public (Lines 7 + 8a + 8b)	0	0	0	0	0	0.00%	4,842	29.45%

% may not equal 100% due to rounding.

Table 9D: Patient Related Revenue - 2018
 National - Universal - 38 Health Centers

Line	Payer Category	Retroactive Settlements, Receipts, and Paybacks						Allowances	
		(c)						Allowances (d) \$	Allowances % of Charges
		Collection of Recon/Wrap Around Current Year (c1) \$	Collection of Recon/Wrap Around Previous Years (c2) \$	Collection of Other Payments: P4P, Risk Pools, etc. (c3) \$	Penalty/ Payback (c4) \$	Net Retros \$	Net Retros % of Charges		
10.	Private Non-Managed Care			0	0	0	0.00%	753,266	31.55%
11a.	Private Managed Care (capitated)			0	0	0	0.00%	0	0.00%
11b.	Private Managed Care (fee-for-service)			0	0	0	0.00%	17,499	113.14%
12.	Total Private (Lines 10 + 11a + 11b)			0	0	0	0.00%	770,765	31.62%
13.	Self-pay								
14.	TOTAL (Lines 3 + 6 + 9 + 12 + 13)	26,780	50,373	0	0	77,153	1.00%	1,797,527	23.26%

Line		Sliding Fee Discounts (e)	Bad Debt Write Off (f)
13.	Self-pay	676,788	27,271

% may not equal 100% due to rounding.

Table 9E - Other Revenues - 2018
National - Universal - 38 Health Centers

Line	Source	Amount (a) \$	% Group Total
BPHC Grants (Enter Amount Drawn Down - Consistent with PMS 272)			
1a.	Migrant Health Center	-	-
1b.	Community Health Center	-	-
1c.	Health Care for the Homeless	-	-
1e.	Public Housing Primary Care	-	-
1g.	Total Health Center (Sum Lines 1a through 1e)	-	-
1j.	Capital Improvement Program Grants	-	-
1k.	Capital Development Grants, including School-Based Health Center Capital Grants	-	-
1.	Total BPHC Grants (Sum Lines 1g + 1j + 1k)	-	-
Other Federal Grants			
2.	Ryan White Part C HIV Early Intervention	0	0.00%
3.	Other Federal Grants	12,080,345	99.51%
3a.	Medicare and Medicaid EHR Incentive Payments for Eligible Providers	59,500	0.49%
5.	Total Other Federal Grants (Sum Lines 2-3a)	12,139,845	100.00%
Non-Federal Grants or Contracts			
6.	State Government Grants and Contracts	358,942	37.77%
6a.	State/Local Indigent Care Programs	151,867	15.98%
7.	Local Government Grants and Contracts	0	0.00%
8.	Foundation/Private Grants and Contracts	439,544	46.25%
9.	Total Non-Federal Grants And Contracts (Sum Lines 6 + 6A + 7 + 8)	950,353	100.00%
10.	Other Revenue (non-patient related revenue not reported elsewhere)	42,201	100.00%
11.	Total Revenue (Lines 1 + 5 + 9 + 10)	13,132,399	

% may not equal 100% due to rounding.

Health Information Technology Capabilities - 2018
National - Universal - 38 Health Centers

Line	Measures	Number of Health Centers	% of Total
1.	Health Centers that have an EHR installed and in use		
1a.	Yes, installed at all sites and used by all providers	33	86.84%
1b.	Yes, but only installed at some sites or used by some providers	1	2.63%
	Total Health Centers with EHR installed (Sum 1a + 1b)	34	89.47%
1c.	Health Centers who will install the EHR system in 3 months	0	0.00%
1d.	Health Centers who will install the EHR system in 6 months	0	0.00%
1e.	Health Centers who will install the EHR system in 1 year or more	1	2.63%
1f.	Health Centers who have Not Planned on installing the EHR system	3	7.89%
	Total Health Centers with No EHR installed (sum 1c + 1d + 1e + 1f)	4	10.53%
	Total Health Centers reported	38	100.00%
2.	Does your center send prescriptions to the pharmacy electronically? (Do not include faxing.)		
	a. Yes	31	81.58%
	b. No	2	5.26%
	c. Not Sure	1	2.63%
3.	Does your center use computerized, clinical decision support such as alerts for drug allergies, checks for drug-drug interactions, reminders for preventive screening tests, or other similar functions?		
	a. Yes	30	78.95%
	b. No	3	7.89%
	c. Not Sure	1	2.63%
4.	Does your center exchange clinical information electronically with other key providers/health care settings such as hospitals, emergency rooms, or subspecialty clinicians?		
	a. Yes	21	55.26%
	b. No	12	31.58%
	c. Not Sure	1	2.63%
5.	Does your center engage patients through health IT such as patient portals, kiosks, secure messaging (i.e., secure email) either through the EHR or through other technologies?		
	a. Yes	23	60.53%
	b. No	8	21.05%
	c. Not Sure	3	7.89%
6.	Does your center use the EHR or other health IT system to provide patients with electronic summaries of office visits or other clinical information when requested?		
	a. Yes	25	65.79%
	b. No	6	15.79%
	c. Not Sure	3	7.89%
7.	How do you collect data for UDS clinical reporting (Tables 6B and 7)?		
	a. We use the EHR to extract automated reports	11	28.95%
	b. We use the EHR but only to access individual patient charts	10	26.32%
	c. We use the EHR in combination with another data analytic system	13	34.21%
	d. We do not use the EHR	4	10.53%
8.	Are your eligible providers participating in the Centers for Medicare and Medicaid Services (CMS) EHR incentive program, commonly known as Meaningful Use?		
	a. Yes	18	47.37%
	b. No	12	31.58%
	c. Not sure	8	21.05%

Health Information Technology Capabilities - 2018
National - Universal - 38 Health Centers

Line.	Measures	Number of Health Centers	% of Total
8a.	If yes (a or b), at what stage of Meaningful Use (MU) are the majority (more than half) of your participating providers attested (i.e., what is the stage for which they most recently received incentive payments)?		
	a. Received MU for Modified Stage 2	9	50.00%
	b. Received MU for Stage 3	3	16.67%
	c. Not sure	6	33.33%
8b.	If no (c only), are your eligible providers planning to participate?	2	25.00%
9.	Does your center use health IT to coordinate or to provide enabling services such as outreach, language translation, transportation, case management, or other similar services?		
	a. Yes	22	57.89%
	b. No	16	42.11%

Other Data Elements - 2018
National - Universal - 38 Health Centers

Line	Measures	Number of Physicians (1a) or Patients (1b)	% of Total
1.	Medication-Assisted Treatment (MAT) for Opioid Use Disorder		
1a.	How many physicians, certified nurse practitioners and physician assistants, on-site or with whom the health center has contracts, have obtained a Drug Addiction Treatment Act of 2000 (DATA) waiver to treat opioid use disorder with medications specifically approved by the U.S. Food and Drug Administration (FDA) for that indication?	16	
1b.	How many patients received medication-assisted treatment for opioid use disorder from a physician, certified nurse practitioner, or physician assistant, with a DATA waiver working on behalf of the health center?	268	0.92%
Line	Measures	Number of Health Centers	% of Total
2.	Did your organization use telehealth in order to provide remote clinical care services? (<i>The term "telehealth" includes "telemedicine" services, but encompasses a broader scope of remote healthcare services. Telemedicine is specific to remote clinical services whereas telehealth may include remote non-clinical services, such as provider training, administrative meetings, and continuing medical education, in addition to clinical services.</i>)		
	a. Yes	10	26.32%
	b. No	28	73.68%
2a1.	Who did you use telehealth to communicate with? (Select all that apply)		
	a. Patients at remote locations from your organization (e.g., home telehealth, satellite locations)	5	50.00%
	b. Specialists outside your organization (e.g., specialists at referral centers)	7	70.00%
2a2.	What telehealth technologies did you use? (Select all that apply)		
	a. Real-time telehealth (e.g., video conference)	9	90.00%
	b. Store-and-forward telehealth (e.g., secure email with photos or videos of patient examinations)	2	20.00%
	c. Remote patient monitoring	0	0.00%
	d. Mobile Health (mHealth)	0	0.00%
2a3.	What primary telehealth services were used at your organization (Select all that apply)		
	a. Primary Care	3	30.00%
	b. Oral Health	0	0.00%
	c. Behavioral Health: Mental Health	7	70.00%
	d. Behavioral Health: Substance Use Disorder	0	0.00%
	e. Dermatology	1	10.00%
	f. Chronic Conditions	5	50.00%
	g. Disaster Management	0	0.00%
	h. Consumer and Professional Health Education	1	10.00%
	i. Other	1	10.00%
2b.	If you did not have telehealth services, please comment why (Select all that apply)		
	a. Have not considered/unfamiliar with telehealth service options	1	3.57%
	b. Lack of reimbursement for telehealth services	11	39.29%
	c. Inadequate broadband/telecommunication service (Select all that apply)	4	14.29%
	ci. Cost of Service	1	3.57%
	cii. Lack of Infrastructure	4	14.29%
	ciii. Other	0	0.00%
	d. Lack of funding for telehealth equipment	6	21.43%
	e. Lack of training for telehealth services	3	10.71%
	f. Not needed	6	21.43%
	g. Other	9	32.14%

Other Data Elements - 2018
National - Universal - 38 Health Centers

Line	Measures	Number of Assists ⁴
3.	Provide the number of all assists provided during the past year by all trained assisters (e.g., certified application counselor or equivalent) working on behalf of the health center (employees, contractors, or volunteers), regardless of the funding source that is supporting the assisters' activities. Outreach and enrollment assists are defined as customizable education sessions about affordable health insurance coverage options (one-on-one or small group) and any other assistance provided by a health center assister to facilitate enrollment.	23,751

⁴ Assists do not count as visits on the UDS tables.

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