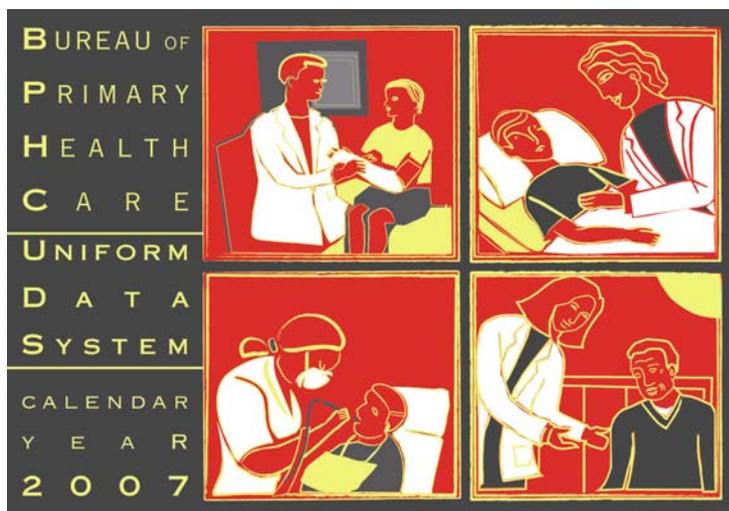


Bureau of Primary Health Care Section 330 Grantees Uniform Data System (UDS)

Calendar Year 2007 Data



Indiana Rollup Report

TABLE 2: SERVICES OFFERED AND DELIVERY METHOD

State Summary for Indiana for 2007

18 Grantees

SERVICE TYPE NOTE: NOT ALL CENTERS PROVIDE ALL SERVICES (See Appendix B for Definitions)		DELIVERY METHOD (More than one method may apply for a given service)			
		PROVIDED BY GRANTEE (a)	BY REFERRAL/ GRANTEE PAYS (b)	BY REFERRAL/ GRANTEE DOESN'T PAY (c)	PROVIDES ONE OR MORE DELIVERY METHOD
PRIMARY MEDICAL CARE SERVICES					
1.	General Primary Medical Care (other than listed below)	94.4%	0.0%	5.6%	94.4%
2.	Diagnostic Laboratory (technical component)	77.8%	50.0%	88.9%	94.4%
3.	Diagnostic X-Ray Procedures (technical component)	33.3%	38.9%	88.9%	94.4%
4.	Diagnostic Tests/Screenings (professional component)	66.7%	44.4%	88.9%	94.4%
5.	Emergency medical services	38.9%	5.6%	83.3%	94.4%
6.	Urgent medical care	94.4%	5.6%	33.3%	94.4%
7.	24-hour coverage	94.4%	0.0%	16.7%	94.4%
8.	Family Planning	77.8%	5.6%	38.9%	94.4%
9.	HIV testing and counseling	66.7%	5.6%	55.6%	94.4%
10.	Testing for Blood Lead Levels	88.9%	5.6%	33.3%	94.4%
11.	Immunizations	94.4%	0.0%	11.1%	94.4%
12.	Following hospitalized patients	83.3%	5.6%	38.9%	94.4%
OBSTETRICAL AND GYNECOLOGICAL CARE					
13.	Gynecological Care	94.4%	5.6%	27.8%	94.4%
14.	Prenatal care	77.8%	0.0%	55.6%	94.4%
15.	Antepartum fetal assessment	72.2%	0.0%	44.4%	94.4%
16.	Ultrasound	50.0%	0.0%	77.8%	94.4%
17.	Genetic counseling and testing	11.1%	5.6%	88.9%	88.9%
18.	Amniocentesis	11.1%	5.6%	83.3%	94.4%
19.	Labor and delivery professional care	55.6%	0.0%	61.1%	94.4%
20.	Postpartum care	72.2%	0.0%	50.0%	94.4%

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Report Criteria:

STATES: IN

TABLE 2: SERVICES OFFERED AND DELIVERY METHOD

State Summary for Indiana for 2007

18 Grantees

SERVICE TYPE NOTE: NOT ALL CENTERS PROVIDE ALL SERVICES (See Appendix B for Definitions)		DELIVERY METHOD (More than one method may apply for a given service)			
		PROVIDED BY GRANTEE (a)	BY REFERRAL/ GRANTEE PAYS (b)	BY REFERRAL/ GRANTEE DOESN'T PAY (c)	PROVIDES ONE OR MORE DELIVERY METHOD
SPECIALTY MEDICAL CARE					
21.	Directly observed TB therapy	16.7%	5.6%	88.9%	94.4%
22.	Respite Care	0.0%	0.0%	83.3%	83.3%
23.	Other Specialty Care	27.8%	5.6%	88.9%	94.4%
DENTAL CARE SERVICES					
24.	Dental Care - Preventive	77.8%	22.2%	27.8%	94.4%
25.	Dental Care - Restorative	77.8%	11.1%	44.4%	94.4%
26.	Dental Care - Emergency	61.1%	16.7%	55.6%	94.4%
27.	Dental Care - Rehabilitative	61.1%	5.6%	66.7%	94.4%
MENTAL HEALTH/SUBSTANCE ABUSE SERVICES					
28.	Mental Health Treatment/Counseling	44.4%	5.6%	83.3%	94.4%
29.	Developmental Screening	61.1%	0.0%	55.6%	94.4%
30.	24-hour Crisis Intervention/Counseling	0.0%	0.0%	94.4%	94.4%
31.	Other Mental Health Services	38.9%	5.6%	77.8%	94.4%
32.	Substance Abuse Treatment/Counseling	33.3%	11.1%	94.4%	94.4%
33.	Other Substance Abuse Services	16.7%	11.1%	88.9%	88.9%
33a.	Comprehensive mental health / Substance abuse screening	27.8%	0.0%	77.8%	88.9%
OTHER PROFESSIONAL SERVICES					
34.	Hearing Screening	77.8%	0.0%	50.0%	94.4%
35.	Nutrition Services Other than WIC	72.2%	5.6%	55.6%	94.4%
36.	Occupational or Vocational Therapy	5.6%	0.0%	94.4%	94.4%
37.	Physical Therapy	5.6%	0.0%	94.4%	94.4%
38.	Pharmacy - Licensed Pharmacy staffed by Registered Pharmacist	16.7%	22.2%	83.3%	94.4%
39.	Pharmacy - Provider Dispensing	66.7%	0.0%	16.7%	77.8%
	Total Pharmacy	83.3%	22.2%	83.3%	94.4%
40.	Vision Screening	88.9%	0.0%	50.0%	94.4%
41.	Podiatry	22.2%	0.0%	83.3%	94.4%
42.	Optometry	27.8%	0.0%	72.2%	94.4%

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Report Criteria:

STATES: IN

TABLE 2: SERVICES OFFERED AND DELIVERY METHOD

State Summary for Indiana for 2007

18 Grantees

SERVICE TYPE NOTE: NOT ALL CENTERS PROVIDE ALL SERVICES (See Appendix B for Definitions)		DELIVERY METHOD (More than one method may apply for a given service)			
		PROVIDED BY GRANTEE (a)	BY REFERRAL/ GRANTEE PAYS (b)	BY REFERRAL/ GRANTEE DOESN'T PAY (c)	PROVIDES ONE OR MORE DELIVERY METHOD
ENABLING SERVICES					
43.	Case management	88.9%	5.6%	50.0%	94.4%
44.	Child Care (during visit to center)	5.6%	0.0%	61.1%	61.1%
45.	Discharge Planning	44.4%	5.6%	55.6%	88.9%
46.	Eligibility Assistance	94.4%	0.0%	27.8%	94.4%
47.	Environmental Health Risk Reduction (via detection and/or alleviation)	16.7%	0.0%	77.8%	77.8%
48.	Health education	94.4%	0.0%	33.3%	94.4%
49.	Interpretation/Translation services	88.9%	11.1%	22.2%	94.4%
50.	Nursing home and assisted-living placement	33.3%	0.0%	61.1%	83.3%
51.	Outreach	83.3%	0.0%	22.2%	88.9%
52.	Transportation	33.3%	55.6%	72.2%	88.9%
53.	Out Stationed Eligibility Workers	50.0%	0.0%	44.4%	83.3%
54.	Home Visiting	61.1%	0.0%	50.0%	88.9%
55.	Parenting Education	72.2%	0.0%	44.4%	88.9%
56.	Special Education Program	16.7%	0.0%	72.2%	77.8%
57.	Other	16.7%	0.0%	11.1%	22.2%
PREVENTATIVE SERVICES RELATED TO TARGET CLINICAL AREAS					
I. Cancer					
58.	Pap Test	94.4%	5.6%	5.6%	94.4%
59.	Fecal occult blood test	88.9%	5.6%	11.1%	94.4%
60.	Sigmoidoscopy	0.0%	0.0%	88.9%	88.9%
61.	Colonoscopy	0.0%	5.6%	88.9%	88.9%
62.	Mammograms	5.6%	22.2%	83.3%	94.4%
63.	Smoking cessation program	66.7%	0.0%	72.2%	88.9%
II. Diabetes					
64.	Glycosylated hemoglobin measurement for people with diabetes	77.8%	16.7%	33.3%	94.4%
65.	Urinary microalbumin measurement for people with diabetes	72.2%	16.7%	33.3%	94.4%
66.	Foot exam for people with diabetes	88.9%	0.0%	33.3%	94.4%
67.	Dilated eye exam for people with diabetes	38.9%	0.0%	66.7%	88.9%

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Report Criteria:

STATES: IN

TABLE 2: SERVICES OFFERED AND DELIVERY METHOD

State Summary for Indiana for 2007

18 Grantees

SERVICE TYPE NOTE: NOT ALL CENTERS PROVIDE ALL SERVICES (See Appendix B for Definitions)		DELIVERY METHOD (More than one method may apply for a given service)			
		PROVIDED BY GRANTEE (a)	BY REFERRAL/ GRANTEE PAYS (b)	BY REFERRAL/ GRANTEE DOESN'T PAY (c)	PROVIDES ONE OR MORE DELIVERY METHOD
III. Cardiovascular Disease					
68.	Blood pressure monitoring	94.4%	0.0%	5.6%	94.4%
69.	Weight reduction program	94.4%	0.0%	22.2%	94.4%
70.	Blood cholesterol screening	83.3%	22.2%	27.8%	94.4%
IV. HIV/AIDS					
See line 9. HIV testing and counseling					
V. Infant Mortality					
Also see line 14. Prenatal Care					
71.	Follow-up testing and related health care services for abnormal newborn bloodspot screening	55.6%	0.0%	61.1%	83.3%
VI. Immunizations		See line 11. Immunizations			
OTHER SERVICES					
72.	WIC Services	11.1%	0.0%	83.3%	94.4%
73.	Head Start services	11.1%	0.0%	88.9%	94.4%
74.	Food bank/delivered meals	5.6%	0.0%	88.9%	88.9%
75.	Employment/Educational Counseling	5.6%	0.0%	83.3%	88.9%
76.	Assistance in obtaining housing	27.8%	5.6%	72.2%	83.3%

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TABLE 3A: PATIENTS BY AGE AND GENDER

State Summary for Indiana for 2007

18 Grantees

Universal

Age Groups		MALE PATIENTS	FEMALE PATIENTS	All Patients	
		(a)	(b)	Number	Percent
Number of Patients					
1.	Under Age 1	6,809	6,470	13,279	6.7%
2.	Age 1	3,740	3,580	7,320	3.7%
3.	Age 2	2,751	2,701	5,452	2.8%
4.	Age 3	2,598	2,465	5,063	2.6%
5.	Age 4	2,337	2,320	4,657	2.4%
6.	Age 5	2,165	2,191	4,356	2.2%
7.	Age 6	1,905	1,850	3,755	1.9%
8.	Age 7	1,673	1,642	3,315	1.7%
9.	Age 8	1,818	1,682	3,500	1.8%
10.	Age 9	1,647	1,681	3,328	1.7%
11.	Age 10	1,501	1,395	2,896	1.5%
12.	Age 11	1,401	1,380	2,781	1.4%
13.	Age 12	1,466	1,538	3,004	1.5%
14.	Age 13	1,603	1,650	3,253	1.6%
15.	Age 14	1,669	1,657	3,326	1.7%
16.	Age 15	1,434	1,675	3,109	1.6%
17.	Age 16	1,244	1,996	3,240	1.6%
18.	Age 17	1,183	2,165	3,348	1.7%
19.	Age 18	856	2,388	3,244	1.6%
20.	Age 19	715	2,579	3,294	1.7%
21.	Age 20	654	2,913	3,567	1.8%
22.	Age 21	712	3,014	3,726	1.9%
23.	Age 22	727	3,044	3,771	1.9%
24.	Age 23	740	2,968	3,708	1.9%
25.	Age 24	819	2,994	3,813	1.9%
26.	Ages 25 - 29	4,047	12,830	16,877	8.5%
27.	Ages 30 - 34	3,797	9,648	13,445	6.8%
28.	Ages 35 - 39	3,844	7,875	11,719	5.9%
29.	Ages 40 - 44	4,212	7,146	11,358	5.7%
30.	Ages 45 - 49	4,562	6,737	11,299	5.7%
31.	Ages 50 - 54	3,982	5,718	9,700	4.9%
32.	Ages 55 - 59	2,580	4,243	6,823	3.4%
33.	Ages 60 - 64	1,760	3,156	4,916	2.5%
34.	Ages 65 - 69	1,133	1,874	3,007	1.5%
35.	Ages 70 - 74	684	1,227	1,911	1.0%
36.	Ages 75 - 79	465	884	1,349	0.7%
37.	Ages 80 - 84	260	572	832	0.4%
38.	Ages 85 and over	160	438	598	0.3%
39.	Total Patients (sum lines 1-38)	75,653	122,286	197,939	100.0%
	Percent of Total	38.2%	61.8%		

* Percents may not total to 100% due to rounding.

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Report Criteria:

STATES: IN

TABLE 3B: PATIENTS BY RACE / ETHNICITY / LANGUAGE

State Summary for Indiana for 2007

18 Grantees

Universal

PATIENTS BY HISPANIC/LATINO IDENTITY		Number (a)	Percent of Total	% of Known
Number of Patients				
1.	Hispanic or Latino	40,604	20.5%	
2.	All others (including Unreported)	157,335	79.5%	
3.	<not used>			
4.	Total Patients (sum lines 1-3 must = line 11)	197,939	100.0%	

PATIENTS BY RACE		Number (a)	Percent of Total	% of Known
Number of Patients				
5a.	Asian	1,155	0.6%	0.7%
5b.	Native Hawaiian	13	0.0%	0.0%
5c.	Other Pacific Islander	545	0.3%	0.3%
5.	Total Asian/Hawaiian/Pacific Islander (sum lines 5a+5b+5c)	1,713	0.9%	1.0%
6.	Black/African American (including Blacks or African Americans of Latino/Hispanic descent)	44,313	22.4%	26.7%
7.	American Indian/Alaska Native (including American Indians or Alaska Natives of Latino/Hispanic descent)	263	0.1%	0.2%
8.	White (including Whites of Latino/Hispanic descent)	117,937	59.6%	71.0%
9.	More than one race	1,941	1.0%	1.2%
10.	Unreported / Refused to report	31,772	16.1%	
11.	Total Patients (sum lines 5-10 must = line 4)	197,939	100.0%	100.0%

PATIENTS BY LANGUAGE		Number (a)	Percent of Total	% of Known
Number of Patients				
12.	Patients best served in a language other than English	24,442	12.3%	

* Percents may not equal 100% due to rounding

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Report Criteria:

STATES: IN

TABLE 4: PATIENTS BY SOCIOECONOMIC CHARACTERISTICS

State Summary for Indiana for 2007

18 Grantees

Universal

Income as Percent of Poverty Level		Number of Patients (a)	% of Total	% of Known	
1.	100% and Below	94,689	47.8%	66.8%	
2.	101 - 150%	18,437	9.3%	13.0%	
3.	151 - 200%	18,056	9.1%	12.7%	
4.	Over 200%	10,472	5.3%	7.4%	
5.	Unknown	56,285	28.4%		
6.	Total (sum lines 1-5)	197,939	100.0%		
Principal Third Party Insurance Source		Ages 0 - 19 (a)	Ages 20+ (b)	TOTAL	%
7.	None/Uninsured	25,416	65,130	90,546	45.7%
8a.	Regular Medicaid (Title XIX)	44,299	21,178	65,477	33.1%
8b.	S-CHIP Medicaid	7,908	375	8,283	4.2%
8.	Total Medicaid (Line 8a + 8b)	52,207	21,553	73,760	37.3%
9.	Medicare (Title XVIII)	5	10,382	10,387	5.2%
10a.	Other Public Insurance non-S-CHIP	0	0	0	0.0%
10b.	Other Public Insurance S-CHIP	0	0	0	0.0%
10.	Total Public Insurance (Line 10a + 10b)	0	0	0	0.0%
11.	Private Insurance	7,892	15,354	23,246	11.7%
12.	Total (Sum Lines 7 + 8 + 9 + 10 + 11)	85,520	112,419	197,939	100.0%
Selected Patient Characteristics		Number of Patients (a)	%		
13.	Migrant (330g grantees Only)	3,780	79.5%		
14.	Seasonal (330g grantees Only)	976	20.5%		
15.	Total Migrant/Seasonal Agricultural Worker or Dependent (MHC Funded Total)	4,756	100.0%		
	Total Migrant/Seasonal Agricultural Worker or Dependent (All Grantees Report This Line)	4,796			
16.	Homeless Shelter (330h grantees Only)	2,817	37.6%		
17.	Transitional (330h grantees Only)	409	5.5%		
18.	Doubling Up (330h grantees Only)	2,091	27.9%		
19.	Street (330h grantees Only)	691	9.2%		
20.	Other (330h grantees Only)	1,045	13.9%		
21.	Unknown (330h grantees Only)	446	5.9%		
22.	Total Homeless (HO Funded Total)	7,499	100.0%		
	Total Homeless (All Grantees Report This Line)	8,517			
23.	Total School Based Health Center Patients (All Grantees Report this Line)	8,250			

* Percents may not equal 100% due to rounding

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* Grantees without HO and/or MHC funding report totals on line 15 and 22, but not the detail. These lines are duplicated to show totals from all grantees

Report Criteria:

STATES: IN

TABLE 5: STAFFING AND UTILIZATION

State Summary for Indiana for 2007

18 Grantees

Universal

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Encounters (b)	Patients (c)
1.	Family Practitioners	42.62	176,968	
2.	General Practitioners	0.01	7	
3.	Internists	13.95	51,802	
4.	Obstetrician/Gynecologists	11.69	33,771	
5.	Pediatricians	22.85	102,390	
7.	Other Specialty Physicians	0.11	581	
8.	Total Physicians (lines 1-7)	91.23	365,519	
9a.	Nurse Practitioners	46.11	128,618	
9b.	Physician Assistants	2.02	3,639	
10.	Certified Nurse Midwives	19.97	37,811	
10a.	Total Midlevel Practitioners (lines 9a-10)	68.10	170,068	
11.	Nurses	126.20	34,268	
12.	Other Medical Personnel	173.27		
13.	Laboratory Personnel	15.04		
14.	X-ray Personnel	2.28		
15.	Total Medical Care Services (lines 8-14)	476.12	569,855	169,731
16.	Dentists	21.29	48,944	
17.	Dental Hygienists	9.92	12,895	
18.	Dental Assistants, Aides, and Technicians	37.75		
19.	Total Dental Services (lines 16-18)	68.96	61,839	28,390
20a.	Psychiatrists	0.15	370	
20b.	Other Licensed Mental Health Providers	4.50	5,116	
20c.	Other Mental Health Staff	8.78	2,009	
20.	Mental Health Services (lines 20a + 20b + 20c)	13.43	7,495	2,655
21.	Substance Abuse Services	0.99	1,519	916
22.	Other Professional Services	1.76	3,087	1,723
23.	Pharmacy Personnel	18.26		
24.	Case Managers	81.05	86,107	
25.	Patient and Community Education Specialists	9.87	9,894	
26.	Outreach workers	21.74		
27.	Transportation Staff	1.23		
27a.	Eligibility Assistance Workers	26.07		
28.	Other Enabling Services	52.50		
29.	Total Enabling Services (lines 24-28)	192.46	96,001	30,433
29a.	Other Programs and Services	62.43		
30.	Administrative Staff	239.55		
31.	Facility Staff	8.94		
32.	Patient services support staff	188.86		
33.	Total Administration and Facility (lines 30-32)	437.35		
34.	Total (Total Lines 15+19+20+21+22+23+29+29a+33)	1,271.76	739,796	

Note: Subtotals may differ from the sum of cells due to rounding.

* % Unduplicated patients exceeds 100% due to use of multiple services

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Report Criteria:

STATES: IN

TABLE 5: STAFFING AND UTILIZATION

State Summary for Indiana for 2007

18 Grantees

Universal

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Encounters			Patients
		% Group	% Total	% Group	% Total	Encounters per FTE	% of T3A * Unduplicated
1.	Family Practitioners	9.0%	3.4%	31.1%	23.9%	4,152	
2.	General Practitioners	0.0%	0.0%	0.0%	0.0%	700	
3.	Internists	2.9%	1.1%	9.1%	7.0%	3,713	
4.	Obstetrician/Gynecologists	2.5%	0.9%	5.9%	4.6%	2,889	
5.	Pediatricians	4.8%	1.8%	18.0%	13.8%	4,481	
7.	Other Specialty Physicians	0.0%	0.0%	0.1%	0.1%	5,282	
8.	Total Physicians (lines 1-7)	19.2%	7.2%	64.1%	49.4%	4,007	
9a.	Nurse Practitioners	9.7%	3.6%	22.6%	17.4%	2,789	
9b.	Physician Assistants	0.4%	0.2%	0.6%	0.5%	1,801	
10.	Certified Nurse Midwives	4.2%	1.6%	6.6%	5.1%	1,893	
10a.	Total Midlevel Practitioners (lines 9a-10)	14.3%	5.4%	29.8%	23.0%	2,497	
11.	Nurses	26.5%	9.9%	6.0%	4.6%	272	
12.	Other Medical Personnel	36.4%	13.6%				
13.	Laboratory Personnel	3.2%	1.2%				
14.	X-ray Personnel	0.5%	0.2%				
15.	Total Medical Care Services (lines 8-14)	100.0%	37.4%	100.0%	77.0%	1,996	85.7%
16.	Dentists	30.9%	1.7%	79.1%	6.6%	2,299	
17.	Dental Hygienists	14.4%	0.8%	20.9%	1.7%	1,300	
18.	Dental Assistants, Aides, and Technicians	54.7%	3.0%				
19.	Total Dental Services (lines 16-18)	100.0%	5.4%	100.0%	8.4%	1,981	14.3%
20a.	Psychiatrists	1.1%	0.0%	4.9%	0.1%	2,467	
20b.	Other Licensed Mental Health Providers	33.5%	0.4%	68.3%	0.7%	1,137	
20c.	Other Mental Health Staff	65.4%	0.7%	26.8%	0.3%	229	
20.	Mental Health Services (lines 20a + 20b + 20c)	100.0%	1.1%	100.0%	1.0%	558	1.3%
21.	Substance Abuse Services	100.0%	0.1%	100.0%	0.2%	1,534	0.5%
22.	Other Professional Services	100.0%	0.1%	100.0%	0.4%	1,754	0.9%
23.	Pharmacy Personnel	100.0%	1.4%				
24.	Case Managers	42.1%	6.4%	89.7%	11.6%	1,062	
25.	Patient and Community Education Specialists	5.1%	0.8%	10.3%	1.3%	1,002	
26.	Outreach workers	11.3%	1.7%				
27.	Transportation Staff	0.6%	0.1%				
27a.	Eligibility Assistance Workers	13.5%	2.0%				
28.	Other enabling services	27.3%	4.1%				
29.	Total Enabling Services (lines 24-28)	100.0%	15.1%	100.0%	13.0%	1,056	15.4%
29a.	Other Programs and Services	100.0%	4.9%				
30.	Administrative Staff	54.8%	18.8%				
31.	Facility Staff	2.0%	0.7%				
32.	Patient services support staff	43.2%	14.9%				
33.	Total Administration and Facility (lines 30-32)	100.0%	34.4%				
34.	Total (Total Lines 15+19+20+21+22+23+29+29a+33)		100.0%		100.0%		

Note: Subtotals may differ from the sum of cells due to rounding.

* % Unduplicated patients exceeds 100% due to use of multiple services

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Report Criteria:

STATES: IN

TABLE 6: SELECTED DIAGNOSES AND SERVICES RENDERED

State Summary for Indiana for 2007 18 Grantees

Universal

Diagnostic Category		Applicable Primary ICD-9-CM or CPT Code (where applicable)	Number of Encounters (a)	Number of Patients (b)	Encounters Per Patient
Selected Infectious and Parasitic Diseases					
1.	Symptomatic HIV	042.xx; 079.53	98	55	1.78
2.	Asymptomatic HIV	V08	36	28	1.29
3.	Tuberculosis	010.xx - 018.xx	51	41	1.24
4.	Syphilis and other sexually transmitted diseases	090.xx - 099.xx	810	746	1.09
Selected Diseases of the Respiratory System					
5.	Asthma	493.xx	8,042	5,598	1.44
6.	Chronic bronchitis and emphysema	490.xx - 492.xx	4,635	2,687	1.72
Selected Other Medical Conditions					
7.	Abnormal breast findings, female	174.xx; 198.81; 233.0x; 793.8x	107	86	1.24
8.	Abnormal cervical findings	180.xx; 198.82; 233.1x; 795.0x	2,401	1,971	1.22
9.	Diabetes mellitus	250.xx; 775.1x	33,237	11,011	3.02
10.	Heart disease (selected)	391.xx - 392.xx 410.xx - 429.xx	3,394	1,965	1.73
11.	Hypertension	401.xx - 405.xx	34,960	14,903	2.35
12.	Contact dermatitis and other eczema	692.xx	4,870	4,348	1.12
13.	Dehydration	276.5x	174	137	1.27
14.	Exposure to heat or cold	991.xx - 992.xx	11	10	1.10
Selected Childhood Conditions					
15.	Otitis media and eustachian tube disorders	381.xx - 382.xx	11,375	8,449	1.35
16.	Selected perinatal medical conditions	770.xx; 771.xx; 773.xx; 774.xx - 779.xx (excluding 779.3x)	873	563	1.55
17.	Lack of expected normal physiological development (such as delayed milestone; failure to gain weight; failure to thrive) -- does not include sexual or mental development; Nutritional deficiencies	260.xx - 269.xx; 779.3x; 783.3x - 783.4x	1,168	790	1.48

* Encounters and patients are reported by Primary Diagnosis for lines 1-20d

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Note: x denotes any number including the absence of a number in that place.

Report Criteria:

STATES: IN

TABLE 6: SELECTED DIAGNOSES AND SERVICES RENDERED

State Summary for Indiana for 2007 18 Grantees

Universal

Diagnostic Category		Applicable Primary ICD-9-CM or CPT Code (where applicable)	Number of Encounters (a)	Number of Patients (b)	Encounters Per Patient
Selected Mental Health and Substance Abuse Conditions					
18.	Alcohol related disorders	291.xx, 303.xx, 305.0x 357.5x	739	486	1.52
19.	Other substance related disorders (excluding tobacco use disorders)	292.1x – 292.8x, 304.xx, 305.2x – 305.9x, 357.6x, 648.3x	310	252	1.23
20a.	Depression and other mood disorders	296.xx, 300.4 301.13, 311.xx	8,581	5,474	1.57
20b.	Anxiety disorders including PTSD	300.0x, 300.21, 300.22, 300.23, 300.29, 300.3, 308.3, 309.81	7,449	4,474	1.66
20c.	Attention deficit and disruptive behavior disorders	312.8x, 312.9x, 313.81, 314.xx	5,124	2,752	1.86
20d.	Other mental disorders, excluding drug or alcohol dependence (includes mental retardation)	290.xx 293.xx - 302.xx (excluding 296.xx, 300.0x, 300.21, 300.22, 300.23, 300.29, 300.3, 300.4, 301.13); 306.xx - 319.xx (excluding 308.3, 309.81, 311.xx, 312.8x, 312.9x, 313.81, 314.xx)	2,793	2,059	1.36
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV Test	CPT-4: 86689; 86701-86703; 87390-87391	7,183	6,751	1.06
22.	Mammogram	CPT-4: 77055-77057 OR ICD-9: V76.11, V76.12	1,287	1,276	1.01
23.	Pap Test	CPT-4: 88141-88155; 88164-88167 OR ICD-9: V72.3; V72.31; V76.2	18,934	17,439	1.09
24.	Selected Immunizations: Hepatitis A, Hemophilus Influenza B (HiB), Influenza virus, Pneumococcal, Diphtheria, Tetanus, Pertussis (DTaP) (DTP) (DT), Mumps, Measles, Rubella, Poliovirus, Varicella, Hepatitis B Child)	CPT-4: 90633-90634, 90645 – 90648; 90657 – 90660; 90669; 90700 – 90702; 90704 – 90716; 90718; 90720-90721, 90723, 90743 – 90744; 90748	64,375	38,746	1.66
25.	Contraceptive management	ICD-9: V25.xx	23,371	15,664	1.49
26.	Health supervision of infant or child (ages 0 through 11)	CPT-4: 99391-99393; 99381- 99383; 99431-99433 or ICD-9: V20.xx; V29.xx	63,663	33,384	1.91

* Encounters and patients are reported by Primary Diagnosis for lines 1-20d

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TABLE 6: SELECTED DIAGNOSES AND SERVICES RENDERED

State Summary for Indiana for 2007 18 Grantees

Universal

Diagnostic Category		Applicable Primary ICD-9-CM or CPT Code (where applicable)	Number of Encounters (a)	Number of Patients (b)	Encounters Per Patient
Selected Dental Services					
27.	I. Emergency Services	ADA: D9110	172	155	1.11
28.	II. Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0180	26,204	21,163	1.24
29.	Prophylaxis – adult or child	ADA: D1110, D1120	11,358	10,010	1.13
30.	Sealants	ADA: D1351	2,557	2,099	1.22
31.	Fluoride Treatment – adult or child	ADA: D1203, D1204	5,335	4,871	1.10
32.	III. Restorative Services	ADA: D21xx, D23xx, D27xx	11,498	6,633	1.73
33.	IV. Oral Surgery (extractions and other surgical procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7260, D7261, D7270, D7272, D7280	6,719	4,828	1.39
34.	V. Rehabilitative Services (Endo, Perio, Prosth, Ortho)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	5,046	3,400	1.48

* Encounters and patients are reported by Primary Diagnosis for lines 1-20d

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TABLE 7: PERINATAL PROFILE

State Summary for Indiana for 2007

18 Grantees

SECTION 1 ALL GRANTEEES					
CHARACTERISTICS		Number of Patients (a)			
1.	Total Patients Known to be Pregnant:	This Line No Longer Reported			
2.	Total Patients Known to be HIV+ Pregnant Women	11			
CONTINUE ONLY IF YOU PROVIDE PRENATAL SERVICES!!					
SECTION II GRANTEES WHO PROVIDE PRENATAL CARE					
A. DEMOGRAPHIC CHARACTERISTICS OF PRENATAL CARE PATIENTS					
AGE		Number of Patients (a)	Percent		
3.	Less than 15 years	41	0.4%		
4.	Ages 15 - 19	2,209	19.3%		
5.	Ages 20 - 24	4,455	38.9%		
6.	Ages 25 - 44	4,742	41.4%		
7.	Ages 45 and Over	8	0.1%		
8.	Total Patients (Sum Lines 3-7)	11,455	100.0%		
RACE		Number of Patients (a)	Percent		
9a.	Asian	81	0.7%		
9b.	Native Hawaiian	1	0.0%		
9c.	Other Pacific Islander	23	0.2%		
9.	Total Asian/Hawaiian/Pacific Islander (sum lines 9a through 9c)	105	0.9%		
10.	Black/African American	2,992	26.1%		
11.	American Indian/Alaska Native	18	0.2%		
12.	White	5,121	44.7%		
13.	More than one race	130	1.1%		
14.	Unreported / Refused to report	3,089	27.0%		
15.	Total Patients (Sum Lines 9 - 14)	11,455	100.0%		
LATINO/HISPANIC IDENTITY		Number of Patients (a)	Percent		
28.	Latino/Hispanic	2,873	25.1%		
29.	All other including Unreported/Refused to report	8,582	74.9%		
30.	Total Patients (Sum Lines 28+29)	11,455	100.0%		
B. TRIMESTER OF ENTRY INTO PRENATAL CARE					
Trimester of First Known Visit for Women Receiving Prenatal Care During Reporting Year		Women Having First Visit with Grantee		Women Having First Visit with Another Provider	
		(a)	%	(b)	%
16.	First Trimester	6,292	54.9%	101	0.9%
17.	Second Trimester	3,602	31.4%	71	0.6%
18.	Third Trimester	1,355	11.8%	34	0.3%

* Percents may not equal 100% due to rounding

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TABLE 7: PERINATAL PROFILE

State Summary for Indiana for 2007

18 Grantees

C. DELIVERY, POSTPARTUM AND INFANT UTILIZATION DURING THE CALENDAR YEAR by race									
	Asian (a)	Native Hawaiian (b1)	Pacific Islander (b2)	Black or African American (c)	American Indian or Alaska Native (d)	White (e)	More than one race (f)	Unreported/ Refused to Report (g)	Total (h)
19. Prenatal care patients who delivered during the year	52	1	12	1,477	12	2,435	60	1,623	5,672
	0.9%	0.0%	0.2%	26.0%	0.2%	42.9%	1.1%	28.6%	100.0%
19a. Deliveries performed by grantee provider									2,282
									100.0%
20. Births less than 1,500 grams (very low)	0	0	0	19	0	27	1	15	62
	0.0%	0.0%	0.0%	30.6%	0.0%	43.5%	1.6%	24.2%	100.0%
21. Births 1,500 to 2,499 grams (low)	1	0	0	97	1	128	4	64	295
	0.3%	0.0%	0.0%	32.9%	0.3%	43.4%	1.4%	21.7%	100.0%
22. Births 2,500 grams or more (normal)	51	1	12	1,371	11	2,281	62	1,550	5,339
	1.0%	0.0%	0.2%	25.7%	0.2%	42.7%	1.2%	29.0%	100.0%
% Low & very low birthweight	1.9%	0.0%	0.0%	7.8%	8.3%	6.4%	7.5%	4.8%	6.3%
23. Prenatal care patients who received postpartum care within 8 weeks of delivery	22	0	4	991	2	1,347	16	1,007	3,389
	0.6%	0.0%	0.1%	29.2%	0.1%	39.7%	0.5%	29.7%	100.0%
24. Infant who received newborn visit w/in 4 weeks of birth	56	0	8	1,017	1	1,663	126	1,408	4,279
	1.3%	0.0%	0.2%	23.8%	0.0%	38.9%	2.9%	32.9%	100.0%
C. DELIVERY, POSTPARTUM AND INFANT UTILIZATION DURING THE CALENDAR YEAR by Latino Identity									
	Latino/Hispanic (i)		All others including Unreported (j)				Total (k)		
19. Prenatal care patients who delivered during the year	1,699		3,973				5,672		
	30.0%		70.0%				100.0%		
20. Births less than 1,500 grams (very low)	15		47				62		
	24.2%		75.8%				100.0%		
21. Births 1,500 to 2,499 grams (low)	65		230				295		
	22.0%		78.0%				100.0%		
22. Births 2,500 grams or more (normal)	1,620		3,719				5,339		
	30.3%		69.7%				100.0%		
% Low & very low birthweight	4.7%		6.9%				6.3%		
23. Prenatal care patients who received postpartum care within 8 weeks of delivery	1,040		2,349				3,389		
	30.7%		69.3%				100.0%		
24. Infant who received newborn visit w/in 4 weeks of birth	1,375		2,904				4,279		
	32.1%		67.9%				100.0%		

* Percents may not equal 100% due to rounding

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TABLE 7: PERINATAL PROFILE

State Summary for Indiana for 2007

18 Grantees

D. ENROLLMENT OF PRENATAL CARE PATIENTS AND THEIR INFANTS IN WIC (only patients who receive prenatal services from the grantee)			
CHARACTERISTICS		Number of Patients (a)	%
25.	Prenatal Care Patients (% Total Patients)	4,658	40.7%
26.	Infants (% Infant Births)	2,536	44.5%
27.	Postpartum Care Patients (% Prenatal Care patients who Delivered)	1,320	23.3%

* Percents may not equal 100% due to rounding

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TABLE 8A: FINANCIAL COSTS

State Summary for Indiana for 2007

18 Grantees

		Accrued Cost	Allocation of Facility and Administration	Total Cost After Allocation of Facility and Administration	Overhead as Percent of Total Cost
		(a)	(b)	(c)	(c1)
Financial Costs for Medical Care					
1.	Medical Staff	35,912,991	17,867,577	53,780,568	33.22%
2.	Lab and X-ray	2,676,019	1,158,922	3,834,941	30.22%
3.	Medical/Other Direct	5,153,716	2,604,672	7,758,388	33.57%
4.	Total Medical Care Services (sum lines 1 through 3)	43,742,726	21,631,171	65,373,897	33.09%
Financial Costs for Other Clinical Services					
5.	Dental	5,732,961	3,179,714	8,912,675	35.68%
6.	Mental Health	670,587	247,223	917,810	26.94%
7.	Substance Abuse	37,778	14,417	52,195	27.62%
8a.	Pharmacy not including pharmaceuticals	973,971	739,395	1,713,366	43.15%
8b.	Pharmaceuticals	2,620,795		2,620,795	
9.	Other Professional	133,677	79,637	213,314	37.33%
10.	Total Other Clinical Services (Sum Lines 5 through 9)	10,169,769	4,260,386	14,430,155	29.52%
Financial Costs of Enabling and Other Program Related Services					
11.	Enabling	7,474,087	3,413,986	10,888,073	31.36%
12.	Other Related Services	3,000,008	1,359,164	4,359,172	31.18%
13.	Total Enabling and Other Services (Sum Lines 11 and 12)	10,474,095	4,773,150	15,247,245	31.30%
Overhead and Totals					
14.	Facility	6,093,537			6.41%
15.	Administration	24,571,170			25.85%
16.	Total Overhead (Sum Lines 14 and 15)	30,664,707			32.26%
17.	Total Accrued Costs (Sum lines 4+10 + 13 + 16)	95,051,297		95,051,297	
18.	Value of Donated Facilities, Services and Supplies			8,140,951	
19.	Total With Donations (Sum Lines 17 and 18)			103,192,248	

* Percents may not equal 100% due to rounding

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TABLE 8A: FINANCIAL COSTS

State Summary for Indiana for 2007 18 Grantees

Services		Direct Accrued Cost (a)		Loaded Cost (c) Includes Overhead
		% of Category	% of Total	% of Total
Financial Costs for Medical Care				
1.	Medical Staff	82.1%	37.8%	56.6%
2.	Lab and X-ray	6.1%	2.8%	4.0%
3.	Medical/Other Direct	11.8%	5.4%	8.2%
4.	Total Medical Care Services (sum lines 1 through 3)	100.0%	46.0%	68.8%
Financial Costs for Other Clinical Services				
5.	Dental	56.4%	6.0%	9.4%
6.	Mental Health	6.6%	0.7%	1.0%
7.	Substance Abuse	0.4%	0.0%	0.1%
8a.	Pharmacy not including pharmaceuticals	9.6%	1.0%	1.8%
8b.	Pharmaceuticals	25.8%	2.8%	2.8%
9.	Other Professional	1.3%	0.1%	0.2%
10.	Total Other Clinical Services (Sum Lines 5 through 9)	100.0%	10.7%	15.2%
Financial Costs of Enabling and Other Program Related Services				
11.	Enabling	71.4%	7.9%	11.5%
12.	Other Related Services	28.6%	3.2%	4.6%
13.	Total Enabling and Other Services (Sum Lines 11 and 12)	100.0%	11.0%	16.0%
Overhead and Totals				
14.	Facility	19.9%	6.4%	
15.	Administration	80.1%	25.9%	
16.	Total Overhead (Sum Lines 14 and 15)	100.0%	32.3%	
17.	Total Accrued Costs (Sum lines 4+10 + 13 + 16)	100.0%	100.0%	100.0%
18.	Value of Donated Facilities, Services and Supplies (As % of direct cost - Line 17)			8.6%

* Percents may not equal 100% due to rounding

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TABLE 8B: ENABLING SERVICES

State Summary for Indiana for 2007 18 Grantees

SERVICE		COST (a)	Percentage
Mental Health/Substance Abuse Services			
1-3	(These lines are no longer required)		
Enabling Services			
4.	Case Management	3,251,319	44%
5.	Transportation	120,534	2%
6.	Outreach	1,066,116	14%
7.	Patient Education	504,234	7%
8.	Translation/Interpretation	1,346,882	18%
9.	Community Education	22,279	0%
10.	Environmental Health Risk Reduction	4,712	0%
11.	Eligibility Assistance	1,128,986	15%
12.	Other Enabling Services	29,025	0%
13.	Total Enabling Services Cost (Sum Line 4-12)	7,474,087	100%

* Percents may not equal 100% due to rounding

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TABLE 9C: MANAGED CARE ENROLLMENT/UTILIZATION

State Summary for Indiana for 2007 18 Grantees

Payor Category		Medicaid	Medicare	Other Public Including non-Medicaid CHIP	Private	Total
		(a)	(b)	(c)	(d)	(e)
Revenue						
1a.	Capitation revenue for Services	713,995	0	0	230,114	944,109
1b.	Fee-for-Service revenue for Services	10,236,444	45,745	21,454	0	10,303,643
1.	Total revenue for Services (Lines 1a + 1b)	10,950,439	45,745	21,454	230,114	11,247,752
3a.	Collections from Medicaid or Medicare reconciliation/wrap around (for current Year)	16,123,122	0			16,123,122
3b.	Collections from Medicaid or Medicare reconciliation/wrap around (for prior years)	1,361,749	0			1,361,749
3c.	Collections from patient co-payments and from managed care plans for other retroactive payments/ risk pool/ incentive/ withhold	152,182	0	0	0	152,182
3d.	Penalties or paybacks to managed care plans	104,030	0	0	0	104,030
4.	Total Managed Care Revenue (Line 1 + 3a + 3b + 3c) - (Line 3d)	28,483,462	45,745	21,454	230,114	28,780,775
Expenses						
5a.	Capitation expenses for Services	1,747,807	0	0	486,819	2,234,626
5b.	Fee-for-Service expenses for Services	24,977,392	54,793	27,513	0	25,059,698
5.	Total expenses for Services (Lines 5a + 5b)	26,725,199	54,793	27,513	486,819	27,294,324
7.	Total Managed Care Expenses (Line 5)	26,725,199	54,793	27,513	486,819	27,294,324
	Surplus / Deficit (Line 4 - Line 7)	1,758,263	-9,048	-6,059	-256,705	1,486,451
	Surplus / Deficit as % of Expenses (L4 - L7)/L7	6.6%	-16.5%	-22.0%	-52.7%	5.4%

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TABLE 9C: MANAGED CARE ENROLLMENT/UTILIZATION

State Summary for Indiana for 2007 18 Grantees

Payor Category		Medicaid	Medicare	Other Public Including non-Medicaid CHIP	Private	Total
		(a)	(b)	(c)	(d)	(e)
Utilization Data						
8a.	Member months for managed care (capitated)	47,648	0	0	52,721	100,369
8b.	Member months for managed care (fee-for-service)	605,269	155	708	0	606,132
8.	Total Member months for managed care (Lines 8a + 8b)	652,917	155	708	52,721	706,501
9a.	Managed Care Encounters (capitated)	19,691	514	236	3,494	23,935
9b.	Managed Care Encounters (fee-for-service)	185,832	0	0	0	185,832
9.	Total Managed Care Encounters (Lines 9a + 9b)	205,523	514	236	3,494	209,767
10a.	Enrollees in Managed Care Plans (capitated) (as of 12/31)	3,992	0	0	4,338	8,330
10b.	Enrollees in Managed Care Plans (fee-for-service) (as of 12/31)	52,413	43	68	0	52,524
10.	Total Managed Care Enrollees (Lines 10a + 10b) (as of 12/31)	56,405	43	68	4,338	60,854
11.	Enrollees in Primary Care Case Management Programs (PCCM)	4,852	0	0	0	4,852
12.	Number of Managed Care Contracts	49	1	1	2	53

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TABLE 9D: PATIENT RELATED REVENUE (Scope of Project Only)

State Summary for Indiana for 2007

18 Grantees

Payor Category		Charges			Collections			
		Full Charges This Period (a)	% of Payor	% of Total	Amount Collected This Period (b)	% of Payor	% of Total	% of Charges
1.	Medicaid Non-Managed Care	16,487,317	36.4%	18.8%	9,714,703	25.0%	18.5%	58.9%
2a.	Medicaid Managed Care (capitated)	1,916,168	4.2%	2.2%	1,137,334	2.9%	2.2%	59.4%
2b.	Medicaid managed Care (fee-for-service)	26,909,337	59.4%	30.8%	28,015,990	72.1%	53.3%	104.1%
3.	Total Medicaid (Lines 1 + 2a + 2b)	45,312,822	100.0%	51.8%	38,868,027	100.0%	73.9%	85.8%
4.	Medicare Non-Managed Care	5,549,616	99.0%	6.3%	3,599,252	99.0%	6.8%	64.9%
5a.	Medicare Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	---
5b.	Medicare managed Care (fee-for-service)	54,667	1.0%	0.1%	35,890	1.0%	0.1%	65.7%
6.	Total Medicare (Lines 4 + 5a + 5b)	5,604,283	100.0%	6.4%	3,635,142	100.0%	6.9%	64.9%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	928,802	96.7%	1.1%	325,647	96.5%	0.6%	35.1%
8a.	Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0.0%	0.0%	0	0.0%	0.0%	---
8b.	Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	31,564	3.3%	0.0%	11,814	3.5%	0.0%	37.4%
9.	Total Other Public (Lines 7 + 8a + 8b)	960,366	100.0%	1.1%	337,461	100.0%	0.6%	35.1%
10.	Private Non-Managed Care	7,536,811	93.7%	8.6%	3,301,606	93.5%	6.3%	43.8%
11a.	Private Managed Care (capitated)	506,398	6.3%	0.6%	230,114	6.5%	0.4%	45.4%
11b.	Private Managed Care (fee-for-service)	419	0.0%	0.0%	0	0.0%	0.0%	0.0%
12.	Total Private (Lines 10 + 11a + 11b)	8,043,628	100.0%	9.2%	3,531,720	100.0%	6.7%	43.9%
13.	Self-Pay	27,547,607	100.0%	31.5%	6,222,368	100.0%	11.8%	22.6%
14.	Total (Lines 3 + 6 + 9 + 12 + 13)	87,468,706		100.0%	52,594,718		100.0%	60.1%

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TABLE 9D: PATIENT RELATED REVENUE (Scope of Project Only)

State Summary for Indiana for 2007

18 Grantees

Payor Category	Retroactive Settlements, Receipts, and Paybacks (c)						Allowances	
	Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
1. Medicaid Non-Managed Care	116,243	415,091		329,400	201,934	1.2%	6,296,452	38.2%
2a. Medicaid Managed Care (capitated)	423,339	0	0	25,000	398,339	20.8%	691,334	36.1%
2b. Medicaid managed Care (fee-for-service)	15,699,783	1,361,749	146,000	79,030	17,128,502	63.7%	-4,181,732	-15.5%
3. Total Medicaid (Lines 1 + 2a + 2b)	16,239,365	1,776,840	146,000	433,430	17,728,775	39.1%	2,806,054	6.2%
4. Medicare Non-Managed Care	0	23,485		83,606	-60,121	-1.1%	1,368,936	24.7%
5a. Medicare Managed Care (capitated)	0	0	0	0	0	---	0	---
5b. Medicare managed Care (fee-for-service)	0	0	0	0	0	0.0%	8,922	16.3%
6. Total Medicare (Lines 4 + 5a + 5b)	0	23,485	0	83,606	-60,121	-1.1%	1,377,858	24.6%
7. Other Public including Non-Medicaid CHIP (Non Managed Care)				0	0	0.0%	370,748	39.9%
8a. Other Public including Non-Medicaid CHIP (Managed Care Capitated)			0	0	0	---	0	---
8b. Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)			0	0	0	0.0%	10,110	32.0%
9. Total Other Public (Lines 7 + 8a + 8b)			0	0	0	0.0%	380,858	39.7%
10. Private Non-Managed Care				0	0	0.0%	2,792,863	37.1%
11a. Private Managed Care (capitated)			0	0	0	0.0%	276,284	54.6%
11b. Private Managed Care (fee-for-service)			0	0	0	0.0%	0	0.0%
12. Total Private (Lines 10 + 11a + 11b)			0	0	0	0.0%	3,069,147	38.2%
13. Self-Pay								
14. Total (Lines 3 + 6 + 9 + 12 + 13)	16,239,365	1,800,325	146,000	517,036	17,668,654	20.2%	7,633,917	8.7%

13. Self Pay (Line 14 is same)	Sliding Discounts (e)	S.D. % of S.P. Chgs	Bad Debt Write Off (f)	Bad Debt % of S.P. Chgs
	18,156,684	65.9%	2,918,380	10.6%

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TABLE 9E: OTHER REVENUES

State Summary for Indiana for 2007

18 Grantees

Source	Amount (a)	% Group Total
BPHC GRANTS (ENTER AMOUNT DRAWN DOWN - CONSISTENT WITH PMS-272)		
1a. Migrant Health Center	1,049,856	5.6%
1b. Community Health Center	15,623,802	83.8%
1c. Health Care for the Homeless	1,577,117	8.5%
1e. Public Housing Primary Care	308,549	1.7%
1g. Total Health Center Cluster (Sum Lines 1a - 1e)	18,559,324	99.6%
1h. Integrated Services Development Initiative	78,900	0.4%
1i. Shared Integrated Management Information Systems	0	0.0%
1j. Capital Improvement Program Grants	0	0.0%
1. Total BPHC Grants (Lines 1g + 1h + 1i + 1j)	18,638,224	100.0%
OTHER FEDERAL GRANTS		
2. Ryan White Title III HIV Early Intervention	496,195	58.5%
3-4. Other Federal Grants	352,443	41.5%
5. Total Other Federal Grants (Sum Lines 2-4)	848,638	100.0%
NON-FEDERAL GRANTS or CONTRACTS		
6. State Government Grants and Contracts	13,923,438	70.3%
6a. State/Local Indigent Care Programs	368,407	1.9%
7. Local Government Grants and Contracts	1,562,345	7.9%
8. Foundation/Private Grants and Contracts	3,948,706	19.9%
9. Total Non-Federal Grants and Contracts (Sum Lines 6 + 6a + 7 + 8)	19,802,896	100.0%
10. Other Revenue (Non-patient related revenue not reported elsewhere)	3,674,594	100.0%
11. Total Revenue (Lines 1+5+9+10)	42,964,352	

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EXHIBIT A: TOTAL REVENUE RECEIVED BY BPHC GRANTEES

State Summary for Indiana for 2007 18 Grantees

	<u>Amount</u>	<u>Percent of Total</u>
<u>GRANT REVENUE</u>	<u>38,921,351</u>	<u>40.7%</u>
FEDERAL	19,486,862	20.4%
BPHC Grants	18,638,224	19.5%
Other Federal Grants	848,638	0.9%
NON- FEDERAL	19,434,489	20.3%
State and Local Grants/Contracts	15,485,783	16.2%
Foundation/ Private Grants/Contracts	3,948,706	4.1%
<u>REVENUE FROM SERVICE TO PATIENTS</u>	<u>52,594,718</u>	<u>55.0%</u>
PATIENT SELF-PAY	6,222,368	6.5%
THIRD-PARTY PAYERS	46,372,350	48.5%
Medicaid	38,868,027	40.7%
Medicare	3,635,142	3.8%
Other Public	337,461	0.4%
Other (Private)Third Party	3,531,720	3.7%
<u>REVENUE FROM INDIGENT CARE PROGRAMS</u>	<u>368,407</u>	<u>0.4%</u>
<u>OTHER REVENUE</u>	<u>3,674,594</u>	<u>3.8%</u>
<u>TOTAL REVENUE</u>	<u>95,559,070</u>	<u>100.0%</u>

Note: Percents may not sum to 100% due to rounding.

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UDS - 2007 SITE SUMMARY REPORT

State Summary for Indiana for 2007

18 Grantees

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DEMOGRAPHIC AND CLINICAL DATA

PATIENTS		ENCOUNTERS	
Total Patients	197,939	Total Encounters	739,796
Number of patients who used:		Medical	569,855
Medical Services	169,731	Dental	61,839
Dental Services	28,390	Mental Health	7,495
Mental health services	2,655	Substance Abuse	1,519
Substance abuse services	916	Other Professional	3,087
Other professional Services	1,723	Enabling	96,001
Enabling Service	30,433	Medical Encounters per Medical Patient ³	3.16
Migrant/Seasonal Farmworker Patients	4,796	Dental Encounters per Dental Patient	2.18
Homeless Patients	8,517	Mental Health/ Substance Abuse per Patient	2.52
Total Prenatal Patients	11,455	Other Professional Encounters per Patient	1.79
Target populations		Enabling Encounters per Patient	3.15
% Pediatric (<12 years old)	30%	CLINICAL INFORMATION	
% Geriatric (age 65 and over)	4%	Service Patients to Target Population Ratios	
% Women's health (age 15-44)	32%	Pap smear patients per fem. patients 15+ yrs	19.80%
Gender of Patients, by Age		Well child patients per Patients < 12 yrs	55.92%
% patients under 15 who are female	49%	Family planning patients per fem. patients 15-44 yrs	24.77%
% patients 15-64 who are female	69%	Proportions of medical patients with key diagnoses	
% patients 65 and over who are female	65%	Asthma	3.30%
Other patient characteristics		Hypertension	8.78%
% Non-White	29%	Diabetes	6.49%
% Best served in another language	12%	Otitis Media	4.98%
% <= 200% Poverty	93%	Mental Disorder	8.70%
% Uninsured	46%	Visits per year for patients with specific diagnoses	
% with Medicaid coverage	37%	Asthma	1.44
STAFFING, PRODUCTIVITY AND SUPPORT RATIOS		Hypertension	2.35
Full Time Equivalents		Diabetes	3.02
Primary care physicians FTE	91.12	Otitis Media	1.35
Other physicians (not incl psych) FTE	0.11	Mental Disorder	1.62
NPs / PAs/ CNMs FTE	68.10	Perinatal Care	
Dental FTE	21.29	Total Patients	11,455
Dental Hyg FTE	9.92	% Prenatal teen patients	19.6%
Total Admin/Fac FTE	437.35	% Newborns Below Normal Birthweight	6.3%
Total FTE	1,271.76	% Late Entry Into Prenatal Care	44.2%
Support Ratios		% Deliveries with Postpartum Visit	59.7%
Direct medical support	1.88	% Deliveries with Newborn Visit	75.4%
Direct dental support ratio	1.21		
Patient support ratio (front office)	0.99		
Productivity and Patient Ratios			
Physician Productivity (excl. Psych)	4,005		
Mid-Level Productivity ³	2,497		
Medical Team Productivity ³	4,275		
Dentist Productivity	2,299		
Dental Hygienist Productivity	1,300		
Dental Team Productivity	2,356		
Medical Patients per Medical Provider ³	1,065		
Dental Patients per Dental Provider	910		

³ Excludes Nurses

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UDS - 2007 SITE SUMMARY REPORT

State Summary for Indiana for 2007

18 Grantees

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FISCAL INFORMATION			
COSTS		CHARGES, COLLECTIONS, AND ADJUSTMENTS	
Total Costs (excluding donations)	\$95,051,297	Ratio of Donations to Total Costs	0.09
Admin/Facility % of Total Cost	32%	Total Income (All Sources)	\$95,559,070
Costs by costs center after allocation		% Income from Patient Service	55%
Medical as % of total costs	69%	% Income from BPHC	20%
Dental as % of total costs	9%	% Income from other sources	25%
Pharmacy as % of total costs	5%	Total Charges (All Payors)	\$87,468,706
Lab/X-ray as % of total costs	4%	% Medicaid	52%
Mental/Addictive Srvc as % of total costs	1%	% Medicare	6%
Costs per patient		% Other Public	1%
Medical Cost per Medical Patient	\$363	% Private Insurance	9%
Dental Cost per Dental Patient	\$314	% Self Pay	31%
Total Cost per Total Patient	\$480	% Non-Managed Care	66%
Costs per encounter		%Capitated Managed Care	3%
Medical cost per medical encounter	\$115	% Fee-for-Service Managed Care	31%
Dental cost per dental encounter	\$144	Average Charge per Patient	\$442
Pharmacy cost per medical encounter	\$8	Average Charge per Billable Encounter	\$145
Lab & X-ray cost per medical encounter	\$7	Ratio of Charges to Reimbursable Costs	1.10
MANAGED CARE		Total Collections (All Payors)	\$52,594,718
Total managed care income	\$28,780,775	% Medicaid	74%
Total expenses	\$27,294,324	% Medicare	7%
Medicaid Expenses	\$26,725,199	% Other Public	1%
Medicare Expenses	\$54,793	% Private Insurance	7%
Other Public Expenses	\$27,513	% Self Pay	12%
Private Ins. Expenses	\$486,819	% from Retroactive Payments	34%
Total profit/loss	\$1,486,451	Overall Collection Rate (% of Charges)	60%
Medicaid MC Profit/Loss	\$1,758,263	Adjustments	
Medicare MC Profit/Loss	(\$9,048)	Sliding Discounts as % SP Charges	66%
Other Public MC Profit/Loss	(\$6,059)	Bad Debt as % of self pay charges	11%
Private MC Profit/Loss	(\$256,705)	Allowances as % of insured charges	13%
Total profit/loss as % of expenses	5%	Indigent Care Income as % of self pay chgs.	1%
Total Managed Care Encounters	209,767	Cash Receipts Less Accrued Costs	\$507,773
% Medicaid	98%	Surplus/Deficit as % Total Cost	1%
% Medicare	0%		
% Other Public	0%		
% Private Insurance	2%		
Total Encounters per Member Year	3.56		

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Rollup Summary

State Summary for Indiana for 2007

18 Grantees

	<u>Grantees</u>	<u>% of Total</u>
Region: Region V	18	100.0%
State: Indiana	18	100.0%
OverAll Count:	18	100.0%

* Summary by Grant Category may exceed 100% due to multiple funded grantees

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Rollup Summary

State Summary for Indiana for 2007

18 Grantees

Grant Categories:	CHC	17	94.4%
	MHC	1	5.6%
	HO	3	16.7%
	PH	1	5.6%
	SBH	1	5.6%

* Summary by Grant Category may exceed 100% due to multiple funded grantees

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Rollup Summary

State Summary for Indiana for 2007

18 Grantees

ISN Participation by Network Type and Funding

	Network Type			% Network Type
	BPHC Funded	No BPHC Funds	Total	
Horizontal	1	1	2	40%
Vertical	1	1	2	40%
Both	1	0	1	20%
Any	3	2	5	28%*
% BPHC Funded	60%	40%	100%	

* Percent of total grantees with Any ISN Participation

Other Grantee Statistics

Number of National Health Service Corps Assignees:	9
Number of Grantees deemed under Federal Tort Claims Act (FTCA):	14
Percentage of total deemed under FTCA:	78%

Drug Pricing Programs

	Total	Percentage
340(b)	13	72%
Alternative	7	39%
Any	16	89%*

* Percent of total grantees with any drug discounting program

Grantees Included in Rollup

State Summary for Indiana for 2007

18 Grantees

<u>UDS</u>	<u>Grantee Name</u>	<u>City, State</u>	<u>CHC</u>	<u>MHC</u>	<u>HO</u>	<u>PH</u>
0510700	Open Door/BMH Health Care, Inc.	Muncie, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0514720	Raphael Health Center	Indianapolis, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0516760	Madison County Community Health Center	Anderson, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0517410	Shalom Health Care Center, Inc.	Indianapolis, IN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
0518280	Northshore Health Centers	Portage, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0518290	Trafalgar Family Health Center	Trafalgar, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
052360	Health And Hospital Corporation of Marion County	Indianapolis, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
0526110	Heart City Health Center	Elkhart, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0530920	Hilltop Community Health Center	Valparaiso, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
053110	Indiana Health Centers, Inc.	Indianapolis, IN	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
053200	Healthnet, Inc.	Indianapolis, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
0537580	Vermillion-Parke Community Health Center	Vermillion, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0537610	Family Health Centers of Clark County	Jeffersonville, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
057480	Tippecanoe Community Health Clinic	Lafayette, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
058480	Neighborhood Health Clinics, Inc.	Fort Wayne, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
058490	ECHO Community Health Care, Inc.	Evansville, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
058660	Gary Community Health Center	Gary, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
059450	East Chicago Community Health Center, Inc.	East Chicago, IN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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