

LIST OF GRANTEES (14 Grantees)					
Grantee Name	City	State	Tracking Number	UDS Number	Funding Streams
ASHLAND COMMUNITY HEALTH CENTER	ASHLAND	MT	H80CS002972008	085900	CH
BULLHOOK COMMUNITY HEALTH CENTER, INC	HAVRE	MT	H80CS082192008	0818560	CH
BUTTE-SILVER BOW PRI. HLTH. C. CLN.	BUTTE	MT	H80CS007992008	083270	CH
CASCADE CITY-COUNTY HEALTH DEPARTMENT	GREAT FALLS	MT	H80CS005662008	084380	CH
CENTRAL MONTANA COMMUNITY HEALTH CENTER	LEWISTOWN	MT	H80CS105942008	08E00063	CH
COMMUNITY HEALTH PARTNERS, INC.	LIVINGSTON	MT	H80CS007362008	084990	CH,MH
CUSTER COUNTY COMMUNITY HEALTH CENTER, INC	MILES CITY	MT	H80CS014502008	0811490	CH
GLACIER COMMUNITY HEALTH CENTER, INC.	CUT BANK	MT	H80CS014512008	0811480	CH
LEWIS & CLARK CITY-CO. HEALTH DEPT.	HELENA	MT	H80CS005152008	083930	CH
LINCOLN COUNTY COMMUNITY HEALTH CENTER	LIBBY	MT	H80CS008052008	088300	CH
MISSOULA CITY/COUNTY HEALTH DEPT/PARTNERSHIP HC	MISSOULA	MT	H80CS005282008	083430	CH
MONTANA MIGRANT COUNCIL, INC.	BILLINGS	MT	H80CS007042008	082160	MH
SWEET MEDICAL CENTER, INC.	CHINOOK	MT	H80CS008692008	081100	CH
YELLOWSTONE CITY & COUNTY HEALTH DEPARTMENT	BILLINGS	MT	H80CS004182008	082500	CH,HCH

TABLE 3A: PATIENTS BY AGE AND GENDER**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

Age Groups		MALE PATIENTS (a)	FEMALE PATIENTS (b)	All Patients Number
Number of Patients				
1.	Under Age 1	510	518	1,028
2.	Age 1	564	560	1,124
3.	Age 2	449	434	883
4.	Age 3	439	394	833
5.	Age 4	460	462	922
6.	Age 5	426	456	882
7.	Age 6	412	337	749
8.	Age 7	375	394	769
9.	Age 8	387	355	742
10.	Age 9	344	346	690
11.	Age 10	438	356	794
12.	Age 11	397	406	803
13.	Age 12	460	437	897
14.	Age 13	504	472	976
15.	Age 14	477	499	976
16.	Age 15	531	560	1,091
17.	Age 16	481	605	1,086
18.	Age 17	529	730	1,259
19.	Age 18	554	813	1,367
20.	Age 19	567	920	1,487
Subtotal Patients (sum lines 1-20)		9,304	10,054	19,358
21.	Age 20	603	911	1,514
22.	Age 21	598	992	1,590
23.	Age 22	651	1,001	1,652
24.	Age 23	728	999	1,727
25.	Age 24	570	1,030	1,600
26.	Ages 25 - 29	3,119	4,618	7,737
27.	Ages 30 - 34	2,723	3,613	6,336
28.	Ages 35 - 39	2,715	3,400	6,115
29.	Ages 40 - 44	2,921	3,622	6,543
30.	Ages 45 - 49	3,482	3,999	7,481
31.	Ages 50 - 54	3,326	3,680	7,006
32.	Ages 55 - 59	2,462	2,762	5,224
33.	Ages 60 - 64	1,705	2,205	3,910
Subtotal Patients (sum lines 21-33)		25,603	32,832	58,435
34.	Ages 65 - 69	1,242	1,412	2,654
35.	Ages 70 - 74	737	936	1,673
36.	Ages 75 - 79	503	621	1,124
37.	Ages 80 - 84	282	429	711
38.	Ages 85 and over	271	534	805
Subtotal Patients (sum lines 34-38)		3,035	3,932	6,967
39.	Total Patients (sum lines 1-38)	37,942	46,818	84,760
Percent of Total		44.8%	55.2%	

Date Requested: 12/09/2009

TABLE 3B: PATIENTS BY RACE / ETHNICITY / LANGUAGE**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

PATIENTS BY HISPANIC/LATINO IDENTITY	Number (a)	Percent of Total
Number of Patients		
1. Hispanic or Latino	5,173	6.1%
2. All others (including Unreported)	79,587	93.9%
4. Total Patients (sum lines 1-2 must = line 11)	84,760	100.0%

PATIENTS BY RACE	Number (a)	Percent of Total	% of Known
Number of Patients			
5b. Native Hawaiian	40	0.0%	0.1%
5c. Other Pacific Islander	52	0.1%	0.1%
5. Subtotal (sum lines 5b + 5c)	92	0.1%	0.1%
5a. Asian	390	0.5%	0.5%
6. Black/African American	665	0.8%	0.9%
7. American Indian/Alaska Native	4,744	5.6%	6.6%
8. White	65,099	76.8%	91.1%
9. More than one race	497	0.6%	0.7%
10. Unreported / Refused to report	13,273	15.7%	
11. Total (sum lines 5+5a+6 to 10 must = line 4)	84,760	100.0%	100.0%

PATIENTS BY LANGUAGE	Number (a)	Percent of Total
Number of Patients		
12. Patients best served in a language other than English	5,024	5.9%

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 4: PATIENTS BY SOCIOECONOMIC CHARACTERISTICS**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

Income as Percent of Poverty Level		Number of Patients (a)	% of Total	% of Known		
1.	100% and Below	40,033	47.2%	60.1%		
2.	101 - 150%	9,645	11.4%	14.5%		
3.	151 - 200%	4,553	5.4%	6.8%		
4.	Over 200%	12,335	14.6%	18.5%		
5.	Unknown	18,194	21.5%			
6.	Total (sum lines 1-5)	84,760	100.0%			
Principal Third Party Medical Insurance Source		Ages 0 - 19 (a)	Ages 20+ (b)	TOTAL	%	
7.	None/Uninsured	7,171	37,412	44,583	52.6%	
8a.	Regular Medicaid (Title XIX)	5,764	6,658	12,422	14.7%	
8b.	CHIP Medicaid	0	0	0	0.0%	
8.	Total Medicaid (Sum lines 8a+8b)	5,764	6,658	12,422	14.7%	
9.	Medicare (Title XVIII)	1	7,866	7,867	9.3%	
10a.	Other Public Insurance non-S-CHIP	0	448	448	0.5%	
10b.	Other Public Insurance S-CHIP	1,166	0	1,166	1.4%	
10.	Total Public Insurance (Sum lines 10a+10b)	1,166	448	1,614	1.9%	
11.	Private Insurance	5,256	13,018	18,274	21.6%	
12.	Total (Sum Lines 7+8+9+10+11)	19,358	65,402	84,760	100.0%	
MANAGED CARE UTILIZATION						
Payor Category		Medicaid (a)	Medicare (b)	Other Public Including Non-Medicaid S-Chip (c)	Private (d)	Total (e)
13a.	Capitated Member months	0	0	3,582	0	3,582
13b.	Fee-for-service Member months	0	0	0	0	0
13c.	Total Member Months (Sum lines 13a+13b)	0	0	3,582	0	3,582
Characteristics - Special Populations				Number of Patients (a)	%	
14.	Migrant (330g grantees Only)			4,255	77.8%	
15.	Seasonal (330g grantees Only)			1,093	20.0%	
	Migrant/Seasonal (non-330 g grantees)			118	2.2%	
16.	Total Migrant/Seasonal Agricultural Worker or Dependent (All Grantees Report This Line)			5,466	100.0%	
17.	Homeless Shelter (330h grantees Only)			1,337	21.8%	
18.	Transitional (330h grantees Only)			526	8.6%	
19.	Doubling Up (330h grantees Only)			479	7.8%	
20.	Street (330h grantees Only)			167	2.7%	
21.	Other (330h grantees Only)			125	2.0%	
22.	Unknown (330h grantees Only)			606	9.9%	
23.	Total Homeless (All Grantees Report This Line)			6,136	100.0%	
24.	Total School Based Health Center Patients (All Grantees Report This Line)			748		
25.	Total Veterans (All Grantees Report this Line)			2,291		

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 5: STAFFING AND UTILIZATION**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Encounters (b)	Patients (c)
1.	Family Physicians	28.14	89,347	
2.	General Practitioners	0.02	161	
3.	Internists	0.31	1,192	
4.	Obstetrician/Gynecologists	0.47	1,798	
5.	Pediatricians	2.00	8,103	
7.	Other Specialty Physicians	0.08	551	
8.	Total Physicians (Sum lines 1-7)	31.02	101,152	
9a.	Nurse Practitioners	12.20	37,026	
9b.	Physician Assistants	19.62	52,374	
10.	Certified Nurse Midwives	0.00	5	
10a.	Total Mid-Levels (Sum lines 9a-10)	31.82	89,405	
11.	Nurses	77.51	22,806	
12.	Other Medical Personnel	16.34		
13.	Laboratory Personnel	2.44		
14.	X-Ray Personnel	2.15		
15.	Total Medical (Sum lines 8+10a through 14)	161.28	213,363	75,191
16.	Dentists	10.14	32,656	
17.	Dental Hygienists	5.63	8,264	
18.	Dental Assistance,Aides,Techs	21.85		
19.	Total Dental Services (Sum lines 16-18)	37.62	40,920	20,011
20a.	Psychiatrists	0.01	16	
20a1.	Licensed Clinical Psychologists	0.15	85	
20a2.	Licensed Clinical Social Workers	7.31	5,995	
20b.	Other Licensed Mental Health Providers	2.38	3,097	
20c.	Other Mental Health Staff	0.57	349	
20.	Mental Health (Sum lines 20a-c)	10.42	9,542	3,044
21.	Substance Abuse Services	1.66	1,636	402
22.	Other Professional Services	0.32	390	194
23.	Pharmacy Personnel	11.92		
24.	Case Managers	23.77	24,793	
25.	Patient/Community Education Specialists	6.93	4,419	
26.	Outreach Workers	10.53		
27.	Transportation Staff	0.02		
27a.	Eligibility Assistance Workers	3.09		
27b.	Interpretation Staff	0.00		
28.	Other Enabling Services	3.95		
29.	Total Enabling Services (Sum lines 24-28)	48.28	29,212	11,437
29a.	Other Programs/Services	4.22		
30a.	Management and Support Staff	51.49		
30b.	Fiscal and Billing Staff	32.33		
30c.	IT Staff	4.84		
30.	Total Administrative Staff (Sum lines 30a-30c)	88.66		
31.	Facility Staff	3.38		
32.	Patient Support Staff	96.54		
33.	Total Administrative & Facility (Sum lines 30-32)	188.57		
34.	Grand Total (Sum lines 15+19+20+21+22+23+29+29a+33)	464.29	295,063	

Encounters are shown only for personnel that generate reportable encounters

Date Requested: 12/09/2009

Subtotals may differ from the sum of cells due to rounding

TABLE 5: STAFFING AND UTILIZATION**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Encounters	
		% Group	% Total	% Group	% Total
1.	Family Physicians	17.4%	6.1%	41.9%	30.3%
2.	General Practitioners	0.0%	0.0%	0.1%	0.1%
3.	Internists	0.2%	0.1%	0.6%	0.4%
4.	Obstetrician/Gynecologists	0.3%	0.1%	0.8%	0.6%
5.	Pediatricians	1.2%	0.4%	3.8%	2.7%
7.	Other Specialty Physicians	0.0%	0.0%	0.3%	0.2%
8.	Total Physicians (Sum lines 1-7)	19.2%	6.7%	47.4%	34.3%
9a.	Nurse Practitioners	7.6%	2.6%	17.4%	12.5%
9b.	Physician Assistants	12.2%	4.2%	24.5%	17.8%
10.	Certified Nurse Midwives	0.0%	0.0%	0.0%	0.0%
10a.	Total Mid-Levels (Sum lines 9a-10)	19.7%	6.9%	41.9%	30.3%
11.	Nurses	48.1%	16.7%	10.7%	7.7%
12.	Other Medical Personnel	10.1%	3.5%		
13.	Laboratory Personnel	1.5%	0.5%		
14.	X-Ray Personnel	1.3%	0.5%		
15.	Total Medical (Sum lines 8+10a through 14)	100.0%	34.7%	100.0%	72.3%
16.	Dentists	27.0%	2.2%	79.8%	11.1%
17.	Dental Hygienists	15.0%	1.2%	20.2%	2.8%
18.	Dental Assistance,Aides,Techs	58.1%	4.7%		
19.	Total Dental Services (Sum lines 16-18)	100.0%	8.1%	100.0%	13.9%
20a.	Psychiatrists	0.1%	0.0%	0.2%	0.0%
20a1.	Licensed Clinical Psychologists	1.5%	0.0%	0.9%	0.0%
20a2.	Licensed Clinical Social Workers	70.1%	1.6%	62.8%	2.0%
20b.	Other Licensed Mental Health Providers	22.8%	0.5%	32.5%	1.0%
20c.	Other Mental Health Staff	5.5%	0.1%	3.7%	0.1%
20.	Mental Health (Sum lines 20a-c)	100.0%	2.2%	100.0%	3.2%
21.	Substance Abuse Services	100.0%	0.4%	100.0%	0.6%
22.	Other Professional Services	100.0%	0.1%	100.0%	0.1%
23.	Pharmacy Personnel	100.0%	2.6%		
24.	Case Managers	49.2%	5.1%	84.9%	8.4%
25.	Patient/Community Education Specialists	14.3%	1.5%	15.1%	1.5%
26.	Outreach Workers	21.8%	2.3%		
27.	Transportation Staff	0.0%	0.0%		
27a.	Eligibility Assistance Workers	6.4%	0.7%		
27b.	Interpretation Staff	0.0%	0.0%		
28.	Other Enabling Services	8.2%	0.9%		
29.	Total Enabling Services (Sum lines 24-28)	100.0%	10.4%	100.0%	9.9%
29a.	Other Programs/Services	100.0%	0.9%		

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Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 5: STAFFING AND UTILIZATION**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

PERSONNEL BY MAJOR SERVICE CATEGORY	FTEs		Encounters	
	<i>% Group</i>	<i>% Total</i>	<i>% Group</i>	<i>% Total</i>
30a. Management and Support Staff	27.3%	11.1%		
30b. Fiscal and Billing Staff	17.1%	7.0%		
30c. IT Staff	2.6%	1.0%		
30. Total Administrative Staff (Sum lines 30a-30c)	47.0%	19.1%		
31. Facility Staff	1.8%	0.7%		
32. Patient Support Staff	51.2%	20.8%		
33. Total Administrative & Facility (Sum lines 30-32)	100.0%	40.6%		
34. Grand Total (Sum lines 15+19+20+21+22+23+29+29a+33)		100.0%		100.0%

Encounters are shown only for personnel that generate reportable encounters

Subtotals may differ from the sum of cells due to rounding

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 6A: SELECTED DIAGNOSES AND SERVICES RENDERED**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

Diagnostic Category	Applicable ICD - 9 - CM Code	Number of Encounters by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Encounters Per Patient
Selected Infectious and Parasitic Diseases				
1. Symptomatic HIV	042.xx; 079.53	622	205	3.03
2. Asymptomatic HIV	V08	172	56	3.07
3. Tuberculosis	010.xx - 018.xx	61	56	1.09
4. Syphilis and other venereal Diseases	090.xx - 099.xx	262	202	1.30
Selected Diseases of the Respiratory System				
5. Asthma	493.xx	2,860	1,883	1.52
6. Chronic bronchitis and Emphysema	490.xx - 492.xx	3,727	2,122	1.76
Selected Other Medical Conditions				
7. Abnormal Breast Findings,Female	174.xx; 198.81; 233.0x; 793.8x	140	128	1.09
8. Abnormal Cervical Findings	180.xx; 198.82; 233.1x; 795.0x	704	488	1.44
9. Diabetes Mellitus	250.xx; 775.1x;	11,362	4,370	2.60
10. Heart Disease (selected)	391.xx - 392.0x 410.xx - 429.xx	4,006	1,538	2.60
11. Hypertension	410.xx - 405.xx;	13,111	6,453	2.03
12. Contact Dermatitis and other Eczema	692.xx	903	767	1.18
13. Dehydration	276.5x	179	115	1.56
14. Exposure to Heat or Cold	991.xx - 992.xx	40	26	1.54
Selected Childhood Conditions				
15. Otitis Media and Eustachian Tube Disorders	381.xx - 382.xx	3,177	2,460	1.29
16. Selected Perinatal Medical Conditions	770.xx; 771.xx; 773.xx; 774.xx - 779.xx (Excluding 779.3x)	157	111	1.41
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;	272	134	2.03

Date Requested: 12/09/2009

TABLE 6A: SELECTED DIAGNOSES AND SERVICES RENDERED**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

Diagnostic Category		Applicable ICD - 9 - CM Code	Number of Encounters by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Encounters Per Patient
Selected Mental Health and Substance Abuse Conditions					
18.	Alcohol Related Disorders	291.xx, 303.xx; 305.0x; 357.5x	1,785	779	2.29
19.	Other Substance Related Disorders (Excluding Tobacco Use Disorders)	292.1x - 292.8x; 304.xx; 305.2x - 305.9x; 357.6x; 648.3x	523	304	1.72
20a.	Depression and Other Mood Disorders	296.xx; 300.4 301.13; 311.xx	16,036	7,342	2.18
20b.	Anxiety Disorders Including PTSD	300.0x; 300.21; 300.22; 300.23; 300.29; 300.3; 308.3; 309.81	4,581	2,326	1.97
20c.	Attention Deficit and Disruptive Behavior Disorders	312.8x; 312.9x; 313.81; 314.xx	2,285	960	2.38
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)	5,368	1,894	2.83
Diagnostic Category		Applicable ICD - 9 - CM Code	Number of Encounters (a)	Number of Patients (b)	Encounters Per Patient
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV Test	CPT - 4: 86689; 86701 - 86703; 87390 - 87391	1,044	934	1.12
22.	Mammogram	CPT - 4: 77055 - 77057 OR ICD - 9: V76.11; V76.12	2,455	2,366	1.04
23.	Pap Test	CPT - 4: 88141 - 88155; 88164 - 88167 OR ICD - 9: V72.3; V72.31; V76.2	6,871	6,305	1.09
24.	Selected Immunizations (Hepatitis A, Hemophilus Influenza B (HiB), Influenza virus, Pneumococcal Diptheria, 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	11,424	10,086	1.13
25.	Contraceptive Management	ICD - 9: V25.xx	3,936	2,202	1.79
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	7,410	3,675	2.02

Date Requested: 12/09/2009

TABLE 6A: SELECTED DIAGNOSES AND SERVICES RENDERED**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

Diagnostic Category	Applicable ICD - 9 - CM Code	Number of Encounters (a)	Number of Patients (b)	Encounters Per Patient
Selected Dental Services				
27. I. Emergency Services	ADA: D9110	54	48	1.13
28. II. Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0180	16,855	12,822	1.31
29. Prophylaxis - Adult or Child	ADA: D1110, D1120	5,288	4,285	1.23
30. Sealants	ADA: D1351	972	792	1.23
31. Flouride Treatment - adult or child	ADA: D1203, D1204, D1206	3,427	2,581	1.33
32. III. Restorative Services	ADA: D21xx, D23xx, D27xx	10,089	5,371	1.88
33. IV. Oral Surgery (Extractions and other Surgical Procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7260, D7261, D7270, D7272, D7280	8,337	5,596	1.49
34. V. Rehabilitation Services (Endo,Perio,Prosth,Orhto)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	2,190	1,453	1.51

Date Requested: 12/09/2009

TABLE 6B: QUALITY OF CARE INDICATORS**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

SECTION A - AGE CATEGORIES FOR PRENATAL PATIENTS (GRANTEES WHO PROVIDE PRENATAL CARE ONLY)		
DEMOGRAPHIC CHARACTERISTICS OF PRENATAL CARE PATIENTS		
AGE	Number of Patients (a)	Percent
1. Less than 15 Years	4	0.4%
2. Ages 15 - 19	265	24.8%
3. Ages 20 - 24	382	35.8%
4. Ages 25 - 44	415	38.9%
5. Ages 45 and Over	1	0.1%
6. Total Patients (Sum lines 1-5)	1,067	100.0%

SECTION 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		% Total
	(a)	%	(b)	%	
7. First Trimester	543	50.9%	257	24.1%	75.0%
8. Second Trimester	125	11.7%	101	9.5%	21.2%
9. Third Trimester	31	2.9%	10	0.9%	3.8%

C - CHILDHOOD IMMUNIZATION RATE			
Childhood Immunization Rate	Total Number Patients with 2nd Birthday During Measurement Year (a)	Estimated number patients immunized (b)	Estimated % patients immunized (c)
10. Number of children who have received required vaccines who had their 2nd birthday during measurement year	654	354	54.2%

SECTION D - PAP TEST			
Pap Test	Total Number of Female Patients 21- 64 Years of Age (a)	Estimated number patients tested (b)	Estimated % patients tested (c)
11. Number of female patients aged 21-64 who had at least one PAP test performed during the measurement year or during one of the previous two years	23,933	9,372	39.2%

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

The childhood immunization and Pap test rates are based on the total of the estimated number of patients tested or immunized for each health center divided by the total number patients in the applicable category (i.e., the universe) for each measure.

TABLE 7: HEALTH OUTCOMES AND DISPARITIES**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

	Asian (a)	Native Hawaiian (b1)	Pacific Islander (b2)	Black/ African American (c)	American Indian/ Alaska Native (d)	White (e)	More than One Race (f)	Unreported/ Refused to Report (g)	Total (h)
HIV Positive Pregnant Women:									1 100.0%
SECTION A: DELIVERIES AND LOW BIRTH WEIGHT BY RACE									
Deliveries and Babies by birth weight									
1. Prenatal care patients who delivered during the year	1 0.2%	0 0.0%	1 0.2%	6 1.0%	97 15.5%	475 75.9%	5 0.8%	41 6.5%	626 100.0%
2. Deliveries performed by grantee provider									303 100.0%
3. Live Births < 1500 grams	0	0	0	0	1	6	0	0	7
4. Live Births 1500 - 2499 grams	0	0	1	0	11	59	0	2	73
5. Live Births ≥ 2500 grams	1	0	0	6	81	415	5	39	547
% Low and Very Low Birth Weight	0.0%	-	100.0%	0.0%	12.9%	13.5%	0.0%	4.9%	12.8%
SECTION D: DELIVERIES AND LOW BIRTH WEIGHT BY ETHNICITY									
Deliveries and Babies by birth weight									
	Hispanic or Latino (i)		All Other Including Unreported/Refused to Report (j)				Total (k)		
1. Prenatal care patients who delivered during the year	24 3.8%		602 96.2%				626 100.0%		
3. Live Births < 1500 grams	0		7				7		
4. Live Births 1500 - 2499 grams	13		60				73		
5. Live Births ≥ 2500 grams	11		536				547		
% Low and Very Low Birth Weight	54.2%		11.1%				12.8%		

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 7: HEALTH OUTCOMES AND DISPARITIES**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

	Asian (a)	Native Hawaiian (b1)	Pacific Islander (b2)	Black/ African American (c)	American Indian/ Alaska Native (d)	White (e)	More than One Race (f)	Unreported/ Refused to Report (g)	*Total (h)	
SECTION B: HYPERTENSION BY RACE										
Patients diagnosed with hypertension whose last blood pressure was less than 140/90										
6.	Total patients aged 18 + with hypertension	12	4	-	33	114	4,714	4	718	5,741
7a.	Estimated # patients with controlled blood pressure									3,599
7b.	Estimated % patients with controlled blood pressure**									62.7%
SECTION E: HYPERTENSION BY ETHNICITY										
Patients diagnosed with hypertension whose last blood pressure was less than 140/90										
	Hispanic or Latino (i)		All Other Including Unreported/Refused to Report (j)				*Total (k)			
6.	Total patients aged 18 + with hypertension	202	5,538				5,741			
7a.	Estimated # patients with controlled blood pressure						3,599			
7b.	Estimated % patients with controlled blood pressure**						62.7%			

* Totals col (h) and col (k) are for all patients, including those patients excluded due to reporting problems (and not shown) in the race and ethnicity columns.

** %'s shown are rounded to the .1% level for table display purposes; calculations are made using %'s to 8 decimal places

Date Requested:
12/09/2009

TABLE 7: HEALTH OUTCOMES AND DISPARITIES**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

	Asian (a)	Native Hawaiian (b1)	Pacific Islander (b2)	Black/ African American (c)	American Indian/ Alaska Native (d)	White (e)	More than One Race (f)	Unreported/ Refused to Report (g)	*Total (h)	
SECTION C: DIABETES BY RACE										
Patients diagnosed with Type I or Type II diabetes: Most recent test results										
9.	Total patients aged 18 + with diabetes	6	1	5	9	179	3,096	2	907	4,230
10a.	Estimated # patients with Hba1c < or= 9%									3,027
10b.	Estimated % patients with Hba1c < or= 9%**									71.6%
11a.	Estimated # patients with Hba1c < 7 %									1,974
11b.	Estimated % patients with Hba1c < 7 %**									46.7%
SECTION F: DIABETES BY ETHNICITY										
Patients diagnosed with Type I or Type II diabetes: Most recent test results										
	Hispanic or Latino (i)		All Other Including Unreported/Refused to Report (j)					*Total (k)		
9.	Total patients aged 18 + with diabetes	185		4,037					4,230	
10a.	Estimated # patients with Hba1c < or= 9%								3,027	
10b.	Estimated % patients with Hba1c < or= 9%**								71.6%	
11a.	Estimated # patients with Hba1c < 7 %								1,974	
11b.	Estimated % patients with Hba1c < 7 %**								46.7%	

* Totals col (h) and col (k) are for all patients, including those patients excluded due to reporting problems (and not shown) in the race and ethnicity columns.

** %'s shown are rounded to the .1% level for table display purposes; calculations are made using %'s to 8 decimal places

Date Requested:
12/09/2009

TABLE 8A: FINANCIAL COSTS**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

	Accrued Cost (a)	Allocation of Facility and Administration (b)	Total Cost After Allocation of Facility and Administration (c)
Financial Costs for Medical Care			
1. Medical Staff	12,681,780	7,142,361	19,824,141
2. Lab and X-ray	1,121,806	617,053	1,738,859
3. Medical/Other Direct	1,896,257	919,772	2,816,029
4. Total Medical Care Services (Sum lines 1-3)	15,699,843	8,679,186	24,379,029
Financial Costs for Other Clinical Services			
5. Dental	3,518,748	1,778,817	5,297,565
6. Mental Health	805,669	386,235	1,191,904
7. Substance Abuse	133,083	65,560	198,643
8a. Pharmacy not including pharmaceuticals	949,039	520,822	1,469,861
8b. Pharmaceuticals	1,162,727		1,162,727
9. Other Professional	69,214	71,545	140,759
10. Total Other Clinical Services (Sum lines 5-9)	6,638,480	2,822,979	9,461,459
Financial Costs of Enabling and Other Program Related Services			
11a. Case Management	1,278,698		1,278,698
11b. Transportation	35,532		35,532
11c. Outreach	469,436		469,436
11d. Patient and Community Education	736,337		736,337
11e. Eligibility Assistance	250,135		250,135
11f. Interpretation Services	1,685		1,685
11g. Other Enabling Services	53,292		53,292
11. Total Enabling Services Cost (Sum lines 11a-11g)	2,825,115	1,305,885	4,131,000
12. Other Related Services	230,208	186,770	416,978
13. Total Enabling and Other Services (Sum lines 11-12)	3,055,323	1,492,655	4,547,978
Overhead and Totals			
14. Facility	1,932,220		
15. Administration	11,062,600		
16. Total Overhead (Sum lines 14-15)	12,994,820		
17. Total Accrued Costs (Sum lines 4+10+13+16)	38,388,466		38,388,466
18. Value of Donated Facilities, Services and Supplies			764,903
19. Grand Total including Donations (Sum lines 17-18)			39,153,369

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 8A: FINANCIAL COSTS**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

Services	Direct Accrued Cost (a)		Loaded Cost (c) Includes Overhead
	% of Category	% of Total	% of Total
Financial Costs for Medical Care			
1. Medical Staff	80.8%	33.0%	51.6%
2. Lab and X-ray	7.1%	2.9%	4.5%
3. Medical/Other Direct	12.1%	4.9%	7.3%
4. Total Medical Care Services (Sum lines 1-3)	100.0%	40.9%	63.5%
Financial Costs for Other Clinical Services			
5. Dental	53.0%	9.2%	13.8%
6. Mental Health	12.1%	2.1%	3.1%
7. Substance Abuse	2.0%	0.3%	0.5%
8a. Pharmacy not including pharmaceuticals	14.3%	2.5%	3.8%
8b. Pharmaceuticals	17.5%	3.0%	3.0%
9. Other Professional	1.0%	0.2%	0.4%
10. Total Other Clinical Services (Sum lines 5-9)	100.0%	17.3%	24.6%
Financial Costs of Enabling and Other Program Related Services			
11a. Case Management	41.9%	3.3%	3.3%
11b. Transportation	1.2%	0.1%	0.1%
11c. Outreach	15.4%	1.2%	1.2%
11d. Patient and Community Education	24.1%	1.9%	1.9%
11e. Eligibility Assistance	8.2%	0.7%	0.7%
11f. Interpretation Services	0.1%	0.0%	0.0%
11g. Other Enabling Services	1.7%	0.1%	0.1%
11. Total Enabling Services Cost (Sum lines 11a-11g)	92.5%	7.4%	10.8%
12. Other Related Services	7.5%	0.6%	1.1%
13. Total Enabling and Other Services (Sum lines 11-12)	100.0%	8.0%	11.8%
Overhead and Totals			
14. Facility	14.9%	5.0%	
15. Administration	85.1%	28.8%	
16. Total Overhead (Sum lines 14-15)	100.0%	33.9%	
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 costs - line 17)			2.0%

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 9D: PATIENT RELATED REVENUE (Scope of Project Only)**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

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	5,571,599	100.0%	15.9%	5,929,242	100.0%	32.9%	106.4%
2a.	Medicaid Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
2b.	Medicaid Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
3.	Total Medicaid (Sum lines 1+2a+2b)	5,571,599	100.0%	15.9%	5,929,242	100.0%	32.9%	106.4%
4.	Medicare Non-Managed Care	3,592,209	100.0%	10.3%	2,641,010	100.0%	14.7%	73.5%
5a.	Medicare Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
5b.	Medicare Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
6.	Total Medicare (Sum lines 4+5a+5b)	3,592,209	100.0%	10.3%	2,641,010	100.0%	14.7%	73.5%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	1,060,580	69.7%	3.0%	623,477	61.6%	3.5%	58.8%
8a.	Other Public including Non-Medicaid CHIP (Managed Care Capitated)	462,122	30.3%	1.3%	388,384	38.4%	2.2%	84.0%
8b.	Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
9.	Total Other Public (Sum lines 7+8a+8b)	1,522,702	100.0%	4.3%	1,011,861	100.0%	5.6%	66.5%
10.	Private Non-Managed Care	6,050,220	100.0%	17.3%	4,060,390	100.0%	22.6%	67.1%
11a.	Private Managed Care (Capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
11b.	Private Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
12.	Total Private (Sum lines 10+11a+11b)	6,050,220	100.0%	17.3%	4,060,390	100.0%	22.6%	67.1%
13.	Self Pay	18,290,330	100.0%	52.2%	4,359,499	100.0%	24.2%	23.8%
14.	Grand Total (Sum lines 3+6+9+12+13)	35,027,060		100.0%	18,002,002		100.0%	51.4%

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 9D: PATIENT RELATED REVENUE (Scope of Project Only)**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

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	30,990	0		459	30,531	0.5%	-85,314	-1.5%
2a. Medicaid Managed Care (capitated)	0	0	0	0	0	-	0	-
2b. Medicaid Managed Care (fee-for-service)	0	0	0	0	0	-	0	-
3. Total Medicaid (Sum lines 1+2a+2b)	30,990	0	0	459	30,531	0.5%	-85,314	-1.5%
4. Medicare Non-Managed Care	21,625	23,792		887	44,530	1.2%	719,837	20.0%
5a. Medicare Managed Care (capitated)	0	0	0	0	0	-	0	-
5b. Medicare Managed Care (fee-for-service)	0	0	0	0	0	-	0	-
6. Total Medicare (Sum lines 4+5a+5b)	21,625	23,792	0	887	44,530	1.2%	719,837	20.0%
7. Other Public including Non-Medicaid CHIP (Non Managed Care)				0	0	0.0%	108,782	10.3%
8a. Other Public including Non-Medicaid CHIP (Managed Care Capitated)			0	0	0	0.0%	0	0.0%
8b. Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)			0	0	0	-	0	-
9. Total Other Public (Sum lines 7+8a+8b)			0	0	0	0.0%	108,782	7.1%

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 9D: PATIENT RELATED REVENUE (Scope of Project Only)**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

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
10. Private Non-Managed Care				775	-775	0.0%	755,783	12.5%
11a. Private Managed Care (Capitated)			0	0	0	-	0	-
11b. Private Managed Care (fee-for-service)			0	0	0	-	0	-
12. Total Private (Sum lines 10+11a+11b)			0	775	-775	0.0%	755,783	12.5%
13. Self Pay								
14. Grand Total (Sum lines 3+6+9+12+13)	52,615	23,792	0	2,121	74,286	0.2%	1,499,088	4.3%

13. Self Pay	Sliding Discounts (e)	Bad Debt Write Off (f)
	11,766,564	1,803,278

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 9E: OTHER REVENUES**State Summary for Montana for 2008 : 14 Grantees****Universal**

Data as of: 07/31/2009

Source	Amount (a)	% Group Total
BPHC Grants (Enter Amount Drawn Down - Consistent with PMS-272)		
1a. Migrant Health Center	1,458,828	9.4%
1b. Community Health Center	12,657,339	81.3%
1c. Health Care for the Homeless	1,454,644	9.3%
1e. Public Housing Primary Care	0	0.0%
1g. Total Health Center Cluster (Sum lines 1a through 1e)	15,570,811	100.0%
1h. Integrated Services Development Initiative	0	0.0%
1i. Shared Integrated Management Information Systems	0	0.0%
1j. Capital Improvement Program Grants	0	0.0%
1. Total BPHC Grants (Sum lines 1g+1h+1i+1j)	15,570,811	100.0%
Other Federal Grants		
2. Ryan White Title III HIV Early Intervention	563,904	46.8%
3. Other Federal Grants	641,727	53.2%
5. Total Other Federal Grants (Sum lines 2-4)	1,205,631	100.0%
Non-Federal Grants Or Contracts		
6. State Government Grants and Contracts	1,162,024	37.7%
6a. State/Local Indigent Care Programs	241,058	7.8%
7. Local Government Grants and Contracts	879,145	28.5%
8. Foundation/Private Grants and Contracts	799,833	26.0%
9. Total Non-Federal Grants Or Contracts (Sum lines 6+6a+7+8)	3,082,060	100.0%
10. Other Revenue (Non-patient related revenue not reported elsewhere)	995,953	100.0%
11. Grand Total Revenue (Sum lines 1+5+9+10)	20,854,455	

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009