

List of Grantees - 2010
State - Universal - 16 Grantees

Grantee Name	City	State	Tracking Number	BHCMIS ID	Funding Streams
BALTIMORE CITY HEALTH DEPARTMENT	BALTIMORE	MD	H80CS003662010	038480	CH
BALTIMORE MEDICAL SYSTEM, INC.	BALTIMORE	MD	H80CS008002010	033180	CH
CHASE BREXTON HEALTH SERVICES	BALTIMORE	MD	H80CS007342010	036640	CH
CHOPTANK COMMUNITY HEALTH SYSTEM, INC.	DENTON	MD	H80CS001762010	032750	CH,MH
COMMUNITY CLINIC, INC.	DERWOOD	MD	H80CS105912010	03E00060	CH
FAMILY HEALTH CENTERS OF BALTIMORE, INC.	BALTIMORE	MD	H80CS004362010	031270	CH
GREATER BADEN MEDICAL SERVICES	UPPER MARLBORO	MD	H80CS005492010	033770	CH,MH
HEALTH CARE FOR THE HOMELESS	BALTIMORE	MD	H80CS000172010	031690	HCH
PARKWEST HEALTH SYSTEMS, INC.	BALTIMORE	MD	H80CS000672010	030130	CH
PEOPLE'S COMMUNITY HEALTH CENTER	BALTIMORE	MD	H80CS005882010	032930	CH
THREE LOWER COUNTIES COMM. SVCS., INC.	SALISBURY	MD	H80CS007742010	033010	CH,MH
TOTAL HEALTH CARE, INC.	BALTIMORE	MD	H80CS000682010	030150	CH
TRI-STATE COMMUNITY HEALTH CENTER	HANCOCK	MD	H80CS000692010	031600	CH
WALNUT STREET COMMUNITY HEALTH CENTER	HAGERSTOWN	MD	H80CS008572010	039840	CH
WEST CECIL HEALTH CENTER, INC.	CONOWINGO	MD	H80CS087662010	0322280	CH
WESTERN MARYLAND HEALTH CARE CORPORATION	OAKLAND	MD	H80CS066422010	0318380	CH

TABLE 3A - Patients by Age and Gender - 2010
State - Universal - 16 Grantees

Age Groups		Male Patients (a)	Female Patients (b)	All Patients
1.	Under Age 1	4,879	4,777	9,656
2.	Age 1	3,249	3,075	6,324
3.	Age 2	2,955	2,930	5,885
4.	Age 3	2,984	2,894	5,878
5.	Age 4	2,824	2,765	5,589
6.	Age 5	2,548	2,446	4,994
7.	Age 6	2,538	2,388	4,926
8.	Age 7	2,360	2,292	4,652
9.	Age 8	2,241	2,152	4,393
10.	Age 9	1,966	2,022	3,988
11.	Age 10	1,936	1,950	3,886
12.	Age 11	1,895	1,861	3,756
13.	Age 12	1,788	1,845	3,633
14.	Age 13	1,779	1,867	3,646
15.	Age 14	1,669	1,939	3,608
16.	Age 15	1,689	2,074	3,763
17.	Age 16	1,661	2,341	4,002
18.	Age 17	1,671	2,445	4,116
19.	Age 18	1,288	2,645	3,933
20.	Age 19	1,070	2,637	3,707
Subtotal Patients (Sum lines 1-20)		44,990	49,345	94,335
21.	Age 20	927	2,742	3,669
22.	Age 21	897	2,812	3,709
23.	Age 22	905	2,907	3,812
24.	Age 23	919	3,040	3,959
25.	Age 24	930	3,038	3,968
26.	Ages 25 - 29	5,114	15,350	20,464
27.	Ages 30 - 34	5,222	12,547	17,769
28.	Ages 35 - 39	5,281	10,925	16,206
29.	Ages 40 - 44	6,953	10,937	17,890
30.	Ages 45 - 49	8,177	12,227	20,404
31.	Ages 50 - 54	7,647	11,013	18,660
32.	Ages 55 - 59	5,699	8,243	13,942
33.	Ages 60 - 64	3,577	6,628	10,205
Subtotal Patients (Sum lines 21-33)		52,248	102,409	154,657
34.	Ages 65 - 69	2,286	4,305	6,591
35.	Ages 70 - 74	1,353	2,870	4,223
36.	Ages 75 - 79	826	1,962	2,788
37.	Ages 80 - 84	576	1,408	1,984
38.	Ages 85 and over	408	1,186	1,594
Subtotal Patients (Sum lines 34-38)		5,449	11,731	17,180
Total Patients (Sum lines 1-38)		102,687	163,485	266,172
% of Total		38.6%	61.4%	

TABLE 3B - Patients by Hispanic or Latino Identity / Race / Language - 2010
State - Universal - 16 Grantees

PATIENTS BY RACE	PATIENTS BY HISPANIC OR LATINO IDENTITY						
	Hispanic/Latino (a)	Non-Hispanic/Latino (b)	Unreported/Refused to Report (c)		Total (d)		
			Number	% of Total	Number	% of Total	% of Known
1. Asian	100	4,606			4,706	1.8%	2.0%
2a. Native Hawaiian	3	27			30	0.0%	0.0%
2b. Other Pacific Islander	328	516			844	0.3%	0.4%
2. Total Hawaiian/Pacific Islander (Sum lines 2a+2b)	331	543			874	0.3%	0.4%
3. Black/African American	711	123,793			124,504	46.8%	53.3%
4. American Indian/Alaska native	2,375	681			3,056	1.1%	1.3%
5. White	7,150	89,218			96,368	36.2%	41.3%
6. More than one race	710	3,389			4,099	1.5%	1.8%
6a. Total Known (Sum lines 1+2+3+4+5+6)	11,377	222,230			233,607		
7. Unreported/Refused to report	17,647	4,795	10,123	3.8%	32,565	12.2%	
8. Total Patients (Sum lines 1+2+3 to 7)	29,024	227,025	10,123	3.8%	266,172	100%	
	<i>% of Known (a)</i>	<i>% of Known (b)</i>					
9. Total Patients	11.3%	88.7%					

PATIENTS BY LANGUAGE	Number (a)	% of Total
12. Patients best served in a language other than English	28,830	10.8%

% may not equal 100% due to rounding

TABLE 4 - Selected Patient Characteristics - 2010
State - Universal - 16 Grantees

Characteristic		Number of Patients (a)	% of Total	% of Known		
Income as Percent of Poverty Level						
1.	100% and Below	97,179	36.5%	60.0%		
2.	101 - 150%	29,700	11.2%	18.3%		
3.	151 - 200%	16,891	6.3%	10.4%		
4.	Over 200%	18,276	6.9%	11.3%		
5.	Unknown	104,126	39.1%			
6.	Total (Sum lines 1-5)	266,172	100%			
Principal Third Party Medical Insurance Source		Ages 0 - 19 (a)	Ages 20+ (b)	TOTAL	%	
7.	None/Uninsured	12,794	47,138	59,932	22.5%	
8a.	Regular Medicaid (Title XIX)	66,922	46,890	113,812	42.8%	
8b.	CHIP Medicaid	1,937	377	2,314	0.9%	
8.	Total Medicaid (Sum lines 8a+8b)	68,859	47,267	116,126	43.6%	
9.	Medicare (Title XVIII)	11	20,785	20,796	7.8%	
10a.	Other Public Insurance Non-CHIP	79	8,597	8,676	3.3%	
10b.	Other Public Insurance CHIP	252	64	316	0.1%	
10.	Total Public Insurance (Sum lines 10a+10b)	331	8,661	8,992	3.4%	
11.	Private Insurance	12,340	47,986	60,326	22.7%	
12.	Total (Sum Lines 7+8+9+10+11)	94,335	171,837	266,172	100%	
Managed Care Utilization						
Payor Category		Medicaid (a)	Medicare (b)	Other Public Including Non-Medicaid CHIP (c)	Private (d)	Total (e)
13a.	Capitated Member months	1,891	6,804	0	24,496	33,191
13b.	Fee-for-service Member months	1,123,907	7,660	53,819	49,547	1,234,933
13c.	Total Member Months (Sum lines 13a+13b)	1,125,798	14,464	53,819	74,043	1,268,124
Characteristics - Special Populations		Number of Patients (a)		%		
14.	Migrant (330g grantees Only)	864		55.7%		
15.	Seasonal (330g grantees Only)	592		38.1%		
	Migrant/Seasonal (non-330g grantees)	96		6.2%		
16.	Total Migrant/Seasonal Agricultural Worker or Dependent (All Grantees Report This Line)	1,552		100%		
17.	Homeless Shelter (330h grantees Only)	2,507		20.3%		
18.	Transitional (330h grantees Only)	1,716		13.9%		
19.	Doubling Up (330h grantees Only)	2,887		23.4%		
20.	Street (330h grantees Only)	1,264		10.2%		
21.	Other (330h grantees Only)	915		7.4%		
22.	Unknown (330h grantees Only)	263		2.1%		
	Homeless (non-330h grantees)	2,786		22.6%		
23.	Total Homeless (All Grantees Report This Line)	12,338		100%		
24.	Total School Based Health Center Patients (All Grantees Report This Line)	8,886				
25.	Total Veterans (All Grantees Report this Line)	3,960				

% may not equal 100% due to rounding

TABLE 5 - Staffing and Utilization - 2010
State - Universal - 16 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Clinic Visits (b)	Patients (c)
1.	Family Physicians	55.46	198,493	
2.	General Practitioners	2.63	11,779	
3.	Internists	35.00	114,664	
4.	Obstetrician/Gynecologists	22.96	108,969	
5.	Pediatricians	41.43	146,720	
7.	Other Specialty Physicians	0.37	5,974	
8.	Total Physicians (Sum lines 1-7)	157.85	586,599	
9a.	Nurse Practitioners	52.87	131,867	
9b.	Physician Assistants	18.31	49,153	
10.	Certified Nurse Midwives	5.90	18,038	
10a.	Total NPs, PAs, CNMs (Sum lines 9a - 10)	77.08	199,058	
11.	Nurses	173.46	72,982	
12.	Other Medical Personnel	284.75		
13.	Laboratory Personnel	12.98		
14.	X-Ray Personnel	0.00		
15.	Total Medical Services (Sum lines 8+10a through 14)	706.12	858,639	236,321
16.	Dentists	26.45	60,844	
17.	Dental Hygienists	10.20	14,764	
18.	Dental Assistants, Aides, Techs	36.58		
19.	Total Dental Services (Sum lines 16-18)	73.23	75,608	34,468
20a.	Psychiatrists	10.30	22,744	
20a1.	Licensed Clinical Psychologists	16.90	17,085	
20a2.	Licensed Clinical Social Workers	28.14	28,721	
20b.	Other Licensed Mental Health Providers	15.99	7,976	
20c.	Other Mental Health Staff	4.78	1,257	
20.	Total Mental Health Services (Sum lines 20a-20c)	76.11	77,783	11,136
21.	Substance Abuse Services	37.30	52,201	3,001
22.	Other Professional Services	3.89	5,977	2,273
22a.	Ophthalmologist	0.01	63	
22b.	Optometrist	0.00	0	
22c.	Other Vision Care Staff	0.00		
22d.	Total Vision Services (Sum lines 22a-22c)	0.01	63	63
23.	Pharmacy Personnel	68.66		
24.	Case Managers	105.79	114,239	
25.	Patient/Community Education Specialists	13.82	8,687	
26.	Outreach Workers	49.98		
27.	Transportation Staff	8.27		
27a.	Eligibility Assistance Workers	35.62		
27b.	Interpretation Staff	27.92		
28.	Other Enabling Services	0.25		
29.	Total Enabling Services (Sum lines 24-28)	241.65	122,926	33,748
29a.	Other Programs/Services	59.42		

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 - 2010
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PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Clinic Visits (b)	Patients (c)
30a.	Management and Support Staff	189.10		
30b.	Fiscal and Billing Staff	144.07		
30c.	IT Staff	33.47		
30.	Total Administrative Staff (Sum lines 30a-30c)	366.64		
31.	Facility Staff	50.46		
32.	Patient Support Staff	411.35		
33.	Total Administrative & Facility (Sum lines 30-32)	828.45		
34.	Total (Sum lines 15+19+20+21+22+22d+23+29+29a+33)	2,094.84	1,193,197	

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TABLE 5 - Staffing and Utilization - 2010
State - Universal - 16 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Clinic Visits	
		% Group	% Total	% Group	% Total
1.	Family Physicians	7.9%	2.6%	23.1%	16.6%
2.	General Practitioners	0.4%	0.1%	1.4%	1.0%
3.	Internists	5.0%	1.7%	13.4%	9.6%
4.	Obstetrician/Gynecologists	3.3%	1.1%	12.7%	9.1%
5.	Pediatricians	5.9%	2.0%	17.1%	12.3%
7.	Other Specialty Physicians	0.1%	0.0%	0.7%	0.5%
8.	Total Physicians (Sum lines 1-7)	22.4%	7.5%	68.3%	49.2%
9a.	Nurse Practitioners	7.5%	2.5%	15.4%	11.1%
9b.	Physician Assistants	2.6%	0.9%	5.7%	4.1%
10.	Certified Nurse Midwives	0.8%	0.3%	2.1%	1.5%
10a.	Total NPs, PAs, CNMs (Sum lines 9a - 10)	10.9%	3.7%	23.2%	16.7%
11.	Nurses	24.6%	8.3%	8.5%	6.1%
12.	Other Medical Personnel	40.3%	13.6%		
13.	Laboratory Personnel	1.8%	0.6%		
14.	X-Ray Personnel	0.0%	0.0%		
15.	Total Medical Services (Sum lines 8+10a through 14)	100%	33.7%	100%	72.0%
16.	Dentists	36.1%	1.3%	80.5%	5.1%
17.	Dental Hygienists	13.9%	0.5%	19.5%	1.2%
18.	Dental Assistance, Aides, Techs	50.0%	1.7%		
19.	Total Dental Services (Sum lines 16-18)	100%	3.5%	100%	6.3%
20a.	Psychiatrists	13.5%	0.5%	29.2%	1.9%
20a1.	Licensed Clinical Psychologists	22.2%	0.8%	22.0%	1.4%
20a2.	Licensed Clinical Social Workers	37.0%	1.3%	36.9%	2.4%
20b.	Other Licensed Mental Health Providers	21.0%	0.8%	10.3%	0.7%
20c.	Other Mental Health Staff	6.3%	0.2%	1.6%	0.1%
20.	Total Mental Health Services (Sum lines 20a-c)	100%	3.6%	100%	6.5%
21.	Substance Abuse Services	100%	1.8%	100%	4.4%
22.	Other Professional Services	100%	0.2%	100%	0.5%
22a.	Ophthalmologist	100%	0.0%	100%	0.0%
22b.	Optometrist	0.0%	0.0%	0.0%	0.0%
22c.	Other Vision Care Staff	0.0%	0.0%		
22d.	Total Vision Services (Sum lines 22a-22c)	100%	0.0%	100%	0.0%
23.	Pharmacy Personnel	100%	3.3%		
24.	Case Managers	43.8%	5.1%	92.9%	9.6%
25.	Patient/Community Education Specialists	5.7%	0.7%	7.1%	0.7%
26.	Outreach Workers	20.7%	2.4%		
27.	Transportation Staff	3.4%	0.4%		
27a.	Eligibility Assistance Workers	14.7%	1.7%		
27b.	Interpretation Staff	11.6%	1.3%		
28.	Other Enabling Services	0.1%	0.0%		
29.	Total Enabling Services (Sum lines 24-28)	100%	11.5%	100%	10.3%
29a.	Other Programs/Services	100%	2.8%		

Clinic visits are shown only for personnel that generate reportable visits
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TABLE 5 - Staffing and Utilization - 2010
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PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Clinic Visits	
		% Group	% Total	% Group	% Total
30a.	Management and Support Staff	22.8%	9.0%		
30b.	Fiscal and Billing Staff	17.4%	6.9%		
30c.	IT Staff	4.0%	1.6%		
30.	Total Administrative Staff (Sum lines 30a-30c)	44.3%	17.5%		
31.	Facility Staff	6.1%	2.4%		
32.	Patient Support Staff	49.7%	19.6%		
33.	Total Administrative & Facility (Sum lines 30-32)	100%	39.5%		
34.	Total (Sum lines 15+19+20+21+22+22d+23+29+29a+33)		100%		100%

Clinic Visits are shown only for personnel that generate reportable visits
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TABLE 6A - Selected Diagnoses and Services Rendered - 2010
State - Universal - 16 Grantees

Diagnostic Category		Applicable ICD-9-CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Infectious and Parasitic Diseases					
1, 2.	Symptomatic HIV, Asymptomatic HIV	042, 079.53, V08	15,157	3,713	4.08
3.	Tuberculosis	010.xx - 018.xx	36	20	1.80
4.	Syphilis and other sexually transmitted diseases	090.xx - 099.xx	887	687	1.29
4a.	Hepatitis B	070.20, 070.22, 070.30, 070.32	198	124	1.60
4b.	Hepatitis C	070.41, 070.44, 070.51, 070.54, 070.70, 070.71	2,303	1,410	1.63
Selected Diseases of the Respiratory System					
5.	Asthma	493.xx	14,026	9,113	1.54
6.	Chronic bronchitis and Emphysema	490.xx - 492.xx	2,247	1,450	1.55
Selected Other Medical Conditions					
7.	Abnormal Breast Findings, Female	174.xx; 198.81; 233.0x; 238.3; 793.8x	685	481	1.42
8.	Abnormal Cervical Findings	180.xx; 198.82; 233.1x; 795.0x	3,391	2,472	1.37
9.	Diabetes Mellitus	250.xx; 648.0x; 775.1x	39,213	15,568	2.52
10.	Heart Disease (selected)	391.xx - 392.0x 410.xx - 429.xx	6,091	3,480	1.75
11.	Hypertension	401.xx - 405.xx	69,063	33,912	2.04
12.	Contact Dermatitis and other Eczema	692.xx	5,286	4,634	1.14
13.	Dehydration	276.5x	177	150	1.18
14.	Exposure to Heat or Cold	991.xx - 992.xx	42	41	1.02
14a.	Overweight and obesity	ICD-9 : 278.0 - 278.02 or V85.xx (Excluding V85.0, V85.1, V85.51 V85.52)	5,266	3,729	1.41
Selected Childhood Conditions					
15.	Otitis Media and Eustachian Tube Disorders	381.xx - 382.xx	10,371	7,365	1.41
16.	Selected Perinatal Medical Conditions	770.xx; 771.xx; 773.xx; 774.xx - 779.xx (Excluding 779.3x)	1,420	1,134	1.25
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	2,995	1,891	1.58

Source of codes:

International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), Volumes 1 and 2, 2009 / 2010. American Medical Association.

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

TABLE 6A - Selected Diagnoses and Services Rendered - 2010
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Diagnostic Category		Applicable ICD-9-CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Mental Health and Substance Abuse Conditions					
18.	Alcohol Related Disorders	291.xx; 303.xx; 305.0x; 357.5x	7,363	1,098	6.71
19.	Other Substance Related Disorders (Excludes Tobacco Use Disorders)	292.1x - 292.8x; 304.xx; 305.2x - 305.9x; 357.6x; 648.3x	52,735	3,725	14.16
19a.	Tobacco Use Disorders	305.1	5,292	1,836	2.88
20a.	Depression and Other Mood Disorders	296.xx; 300.4 301.13; 311.xx	45,321	9,084	4.99
20b.	Anxiety Disorders Including PTSD	300.0x; 300.2x; 300.3; 308.3; 309.81	13,048	4,317	3.02
20c.	Attention Deficit and Disruptive Behavior Disorders	312.8x; 312.9x; 313.81; 314.xx	11,267	2,585	4.36
20d.	Other Mental Disorders, Excluding Drug or Alcohol Dependence (includes mental retardation)	290.xx; 293.xx - 302.xx (Excluding 296.xx; 300.0x; 300.2x; 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)	16,837	4,985	3.38

Source of codes:

International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), Volumes 1 and 2, 2009 / 2010. American Medical Association.

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

TABLE 6A - Selected Diagnoses and Services Rendered - 2010
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Service Category		Applicable ICD-9-CM or CPT-4 Codes	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV Test	CPT-4: 86689; 86701 - 86703; 87390 - 87391	16,368	13,664	1.20
21a.	Hepatitis B Test	CPT-4: 86704, 86706, 87515-17	4,638	3,627	1.28
21b.	Hepatitis C Test	CPT-4: 86803-04, 87520-22	5,379	4,062	1.32
22.	Mammogram	CPT-4: 77052, 77057 OR ICD-9: V76.11; V76.12	2,615	2,442	1.07
23.	Pap Test	CPT-4: 88141 - 88155; 88164 - 88167; 88174 - 88175 OR ICD - 9: V72.3; V72.31; V76.2	33,639	32,818	1.03
24.	Selected Immunizations (Hepatitis A, Hemophilus Influenza B (HiB), Pneumococcal, Diptheria, Tetanus, Pertussis (DTaP) (DTP) (DT), Mumps, Measles, Rubella, Poliovirus, Varicella, Hepatitis B Child)	CPT-4: 90633 - 90634, 90645 - 90648; 90669; 90696 - 90702; 90704 - 90716; 90718 - 90723; 90743 - 90744; 90748	68,451	44,560	1.54
24a.	Seasonal Flu Vaccine	CPT-4: 90655 - 90662	44,375	39,249	1.13
24b.	H1N1 Flu Vaccine	CPT-4: 90663; 90470	9,968	9,073	1.10
25.	Contraceptive Management	ICD - 9: V25.xx	21,899	12,432	1.76
26.	Health Supervision of Infant or Child (ages 0 through 11)	CPT-4: 99391 - 99393; 99381 - 99383	76,714	43,148	1.78
26a.	Childhood lead test screening (Ages 9 to 72 months)	CPT-4: 83655	5,736	5,351	1.07
26b.	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408-99409	2,375	584	4.07
26c.	Smoke and tobacco use cessation counseling	CPT-4: 99406 and 99407; S9075	5,252	1,933	2.72
26d.	Comprehensive and Intermediate Eye Exams	CPT-4: 92002, 92004, 92012, 92014	63	63	1.00

Sources of codes:

International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), Volumes 1 and 2, 2009 / 2010. American Medical Association.
Current Procedural Terminology, (CPT) 2009 / 2010. American Medical Association.

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

TABLE 6A - Selected Diagnoses and Services Rendered - 2010
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Service Category		Applicable ADA Codes	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Dental Services					
27.	I. Emergency Services	ADA: D9110	4,723	2,939	1.61
28.	II. Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0180	30,588	23,807	1.28
29.	Prophylaxis - Adult or Child	ADA: D1110, D1120	17,821	14,895	1.20
30.	Sealants	ADA: D1351	3,691	2,458	1.50
31.	Fluoride Treatment - adult or child	ADA: D1203, D1204, D1206	17,240	13,951	1.24
32.	III. Restorative Services	ADA: D21xx - D29xx	12,751	6,877	1.85
33.	IV. Oral Surgery (Extractions and other Surgical Procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7260, D7261, D7270, D7272, D7280	8,296	5,903	1.41
34.	V. Rehabilitative Services (Endo, Perio, Prostho, Orhto)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	3,151	2,212	1.42

Source of codes:

Current Dental Terminology, (CDT) 2009 / 2010. American Dental Association.

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

TABLE 6B - Quality of Care Indicators - 2010
State - Universal - 16 Grantees

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		29		0.3%
2.	Ages 15 - 19		1,269		14.6%
3.	Ages 20 - 24		2,561		29.4%
4.	Ages 25 - 44		4,837		55.5%
5.	Ages 45 and Over		23		0.3%
6.	Total Patients (Sum lines 1-5)		8,719		100%

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	5,753	66.0%	143	1.6%	67.6%
8.	Second Trimester	2,131	24.4%	61	0.7%	25.1%
9.	Third Trimester	596	6.8%	35	0.4%	7.2%

SECTION C - CHILDHOOD IMMUNIZATION				
Childhood Immunization		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	5,547	4,502	81.2%

SECTION D - PAP TESTS				
Pap Tests		Total Number of Female Patients 24-64 Years of Age (a)	Estimated number patients tested (b)	Estimated % patients tested (c)
11.	Number of female patients aged 24-64 who had at least one Pap test performed during the measurement year or during one of the previous two calendar years	86,757	53,412	61.6%

% may not equal 100% due to rounding

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 - 2010
State - Universal - 16 Grantees

Total (i)						
HIV Positive Pregnant Women						18
Section A: DELIVERIES AND BIRTH WEIGHT						
	Prenatal care patients who delivered during the year	Deliveries performed by Grantee Provider	Live Births < 1500 grams	Live Births 1500-2499 grams	Live Births >= 2500 grams	% Low and Very Low Birth Weight
By Race						
Asian (a)	133	2.5%	6	4	121	7.6%
Native Hawaiian (b1)	1	0.0%	0	0	1	0.0%
Pacific Islander (b2)	36	0.7%	0	0	28	0.0%
Black/ African American (c)	2,342	43.5%	40	163	2,049	9.0%
American Indian/ Alaska Native (d)	19	0.4%	2	5	17	29.2%
White (e)	2,405	44.6%	22	140	2,162	7.0%
More than one race (f)	47	0.9%	15	3	28	39.1%
Race Unreported/ Refused to Report (g)	402	7.5%	4	14	314	5.4%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	5,385	99.9%	89	329	4,720	8.1%
By Ethnicity						
Hispanic/Latino (col1)	953	17.7%	9	36	865	4.9%
Non-Hispanic/Latino (col2)	4,432	82.3%	80	293	3,855	8.8%
Sub-total (Sum col1 + col2)	5,385	99.9%	89	329	4,720	8.1%
Unreported / Refused to Report Race and Ethnicity (h)	3	0.1%	0	1	3	25.0%
Total (i)	5,388	100%	3,847	89	330	8.1%

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

TABLE 7 - Health Outcomes and Disparities - 2010
State - Universal - 16 Grantees

SECTION B: HYPERTENSION		
Patients 18 to 85 diagnosed with hypertension whose last blood pressure was less than 140/90		
	Total hypertensive patients	Estimated % Patients with Controlled Blood Pressure
By Race		
Asian (a)	382	
Native Hawaiian (b1)	2	
Pacific Islander (b2)	62	
Black/ African American (c)	19,462	
American Indian/ Alaska Native (d)	105	
White (e)	15,913	
More than one race (f)	180	
Race Unreported/ Refused to Report (g)	1,837	
Sub-total (Sum a+b1+b2+c+d+e+f+g)	37,943	
By Ethnicity		
Hispanic/Latino (col1)	1,693	
Non-Hispanic/Latino (col2)	36,250	
Sub-total (Sum col1 + col2)	37,943	
Unreported / Refused to Report Race and Ethnicity (h)	1,105	
Total (i)	39,048	63.3%

% shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places
% by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 7 - Health Outcomes and Disparities - 2010
State - Universal - 16 Grantees

SECTION C: DIABETES			
Patients 18 to 75 diagnosed with Type I or Type II diabetes: Most recent test results			
	Total patients with diabetes	Estimated % Patients with Hba1c <= 9%	Estimated % Patients with Hba1c < 7%
By Race			
Asian (a)	291		
Native Hawaiian (b1)	2		
Pacific Islander (b2)	34		
Black/ African American (c)	8,268		
American Indian/ Alaska Native (d)	50		
White (e)	6,867		
More than one race (f)	113		
Race Unreported/ Refused to Report (g)	1,128		
Sub-total (Sum a+b1+b2+c+d+e+f+g)	16,753		
By Ethnicity			
Hispanic/Latino (col1)	1,206		
Non-Hispanic/Latino (col2)	15,547		
Sub-total (Sum col1 + col2)	16,753		
Unreported / Refused to Report Race and Ethnicity (h)	84		
Total (i)	16,837	62.6%	33.1%

% shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places
% by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 8A - Financial Costs - 2010
State - Universal - 16 Grantees

	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	61,366,834	40,233,813	101,600,647
2. Lab and X-ray	1,774,296	923,311	2,697,607
3. Medical/Other Direct	15,235,833	7,460,201	22,696,034
4. Total Medical Care Services (Sum lines 1-3)	78,376,963	48,617,325	126,994,288
Financial Costs for Other Clinical Services			
5. Dental	8,119,474	4,540,487	12,659,961
6. Mental Health	7,050,605	3,899,066	10,949,671
7. Substance Abuse	2,375,405	1,668,580	4,043,985
8a. Pharmacy not including pharmaceuticals	6,732,618	3,515,504	10,248,122
8b. Pharmaceuticals	27,439,542		27,439,542
9. Other Professional	298,665	144,331	442,996
10. Total Other Clinical Services (Sum lines 5-9)	52,016,309	13,767,968	65,784,277
Financial Costs of Enabling and Other Program Related Services			
11a. Case Management	6,101,313		6,101,313
11b. Transportation	323,638		323,638
11c. Outreach	1,810,154		1,810,154
11d. Patient and Community Education	778,822		778,822
11e. Eligibility Assistance	1,511,736		1,511,736
11f. Interpretation Services	1,173,882		1,173,882
11g. Other Enabling Services	580,639		580,639
11. Total Enabling Services Cost (Sum lines 11a-11g)	12,280,184	6,373,368	18,653,552
12. Other Related Services	3,810,443	2,190,913	6,001,356
13. Total Enabling and Other Services (Sum lines 11-12)	16,090,627	8,564,281	24,654,908
Overhead and Totals			
14. Facility	16,106,863		
15. Administration	54,842,711		
16. Total Overhead (Sum lines 14-15)	70,949,574		
17. Total Accrued Costs (Sum lines 4+10+13+16)	217,433,473		217,433,473
18. Value of Donated Facilities, Services and Supplies			2,052,305
19. Grand Total including Donations (Sum lines 17-18)			219,485,778

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2010
State - Universal - 16 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	25,040,100	22.1%	11.4%	21,044,354	22.9%	14.1%	84.0%
2a.	Medicaid Managed Care (capitated)	3,881,136	3.4%	1.8%	3,721,146	4.0%	2.5%	95.9%
2b.	Medicaid Managed Care (fee-for-service)	84,446,372	74.5%	38.5%	67,118,407	73.0%	45.0%	79.5%
3.	Total Medicaid (Sum lines 1+2a+2b)	113,367,608	100%	51.6%	91,883,907	100%	61.5%	81.0%
4.	Medicare Non-Managed Care	12,231,199	89.9%	5.6%	7,550,940	90.7%	5.1%	61.7%
5a.	Medicare Managed Care (capitated)	334,281	2.5%	0.2%	281,816	3.4%	0.2%	84.3%
5b.	Medicare Managed Care (fee-for-service)	1,042,758	7.7%	0.5%	490,755	5.9%	0.3%	47.1%
6.	Total Medicare (Sum lines 4+5a+5b)	13,608,238	100%	6.2%	8,323,511	100%	5.6%	61.2%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	4,470,060	48.2%	2.0%	3,588,008	72.2%	2.4%	80.3%
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)	4,798,237	51.8%	2.2%	1,381,606	27.8%	0.9%	28.8%
9.	Total Other Public (Sum lines 7+8a+8b)	9,268,297	100%	4.2%	4,969,614	100%	3.3%	53.6%
10.	Private Non-Managed Care	46,437,890	91.3%	21.2%	34,362,669	93.0%	23.0%	74.0%
11a.	Private Managed Care (Capitated)	649,884	1.3%	0.3%	519,474	1.4%	0.3%	79.9%
11b.	Private Managed Care (fee-for-service)	3,752,314	7.4%	1.7%	2,053,383	5.6%	1.4%	54.7%
12.	Total Private (Sum lines 10+11a+11b)	50,840,088	100%	23.2%	36,935,526	100%	24.7%	72.7%
13.	Self Pay	32,427,665	100%	14.8%	7,179,587	100%	4.8%	22.1%
14.	Grand Total (Sum lines 3+6+9+12+13)	219,511,896		100%	149,292,145		100%	68.0%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2010
State - Universal - 16 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	0	27,828		0	27,828	0.1%	4,708,232	18.8%
2a. Medicaid Managed Care (capitated)	0	0	0	0	0	0.0%	159,990	4.1%
2b. Medicaid Managed Care (fee-for-service)	1,485,931	2,130,143	47,531	3,095	3,660,510	4.3%	16,652,106	19.7%
3. Total Medicaid (Sum lines 1+2a+2b)	1,485,931	2,157,971	47,531	3,095	3,688,338	3.3%	21,520,328	19.0%
4. Medicare Non-Managed Care	110,553	217,840		6,595	321,798	2.6%	2,499,570	20.4%
5a. Medicare Managed Care (capitated)	0	0	0	0	0	0.0%	53,565	16.0%
5b. Medicare Managed Care (fee-for-service)	0	0	3,159	0	3,159	0.3%	616,142	59.1%
6. Total Medicare (Sum lines 4+5a+5b)	110,553	217,840	3,159	6,595	324,957	2.4%	3,169,277	23.3%
7. Other Public including Non-Medicaid CHIP (Non Managed Care)	0	0		22,353	-22,353	-0.5%	939,617	21.0%
8a. Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0	0	0	0	-	164	-
8b. Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0	0	2,930	-2,930	-0.1%	2,567,706	53.5%
9. Total Other Public (Sum lines 7+8a+8b)	0	0	0	25,283	-25,283	-0.3%	3,507,487	37.8%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2010
 State - Universal - 16 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
10. Private Non-Managed Care				306	-306	0.0%	11,197,462	24.1%
11a. Private Managed Care (Capitated)			0	0	0	0.0%	126,976	19.5%
11b. Private Managed Care (fee-for-service)			11,690	0	11,690	0.3%	1,969,810	52.5%
12. Total Private (Sum lines 10+11a+11b)			11,690	306	11,384	0.0%	13,294,248	26.1%
13. Self Pay								
14. Grand Total (Sum lines 3+6+9+12+13)	1,596,484	2,375,811	62,380	35,279	3,999,396	1.8%	41,491,340	18.9%
13. Self Pay	Sliding Discounts (e)				Bad Debt Write Off (f)			
					19,424,795	2,845,363		

% may not equal 100% due to rounding

TABLE 9E -Other Revenues - 2010
State - Universal - 16 Grantees

Source	Amount (a)	% Group Total
BPHC Grants (Enter Amount Drawn Down - Consistent with PMS-272)		
1a. Migrant Health Center	459,237	1.7%
1b. Community Health Center	23,601,802	89.2%
1c. Health Care for the Homeless	2,399,904	9.1%
1e. Public Housing Primary Care	0	0.0%
1g. Total Health Center Cluster (Sum lines 1a through 1e)	26,460,943	100%
1j. Capital Improvement Program Grants (excluding ARRA and ACA)	0	0.0%
1k. Capital Development Grants	10,790	0.0%
1. Total BPHC Grants (Sum Lines 1g+1j+1k)	26,471,733	100%
Other Federal Grants		
2. Ryan White Part C HIV Early Intervention	2,333,849	17.9%
3. Other Federal Grants	1,317,003	10.1%
4. American Recovery and Reinvestment Act (ARRA) New Access Point (NAP) and Increased Demand for Services (IDS)	2,237,395	17.2%
4a. American Recovery and Reinvestment Act (ARRA) Capital Improvement Project (CIP) and Facility Investment Program (FIP)	7,150,877	54.8%
5. Total Other Federal Grants (Sum Lines 2-4a)	13,039,124	100%
Non-Federal Grants Or Contracts		
6. State Government Grants and Contracts	12,224,292	40.0%
6a. State/Local Indigent Care Programs	758,554	2.5%
7. Local Government Grants and Contracts	10,316,884	33.7%
8. Foundation/Private Grants and Contracts	7,290,829	23.8%
9. Total Non-Federal Grants Or Contracts (Sum lines 6+6a+7+8)	30,590,559	100%
10. Other Revenue (Non-patient related revenue not reported elsewhere)	11,295,509	100%
11. Grand Total Revenue (Sum lines 1+5+9+10)	81,396,925	

% may not equal 100% due to rounding