

LIST OF GRANTEES (7 Grantees)					
Grantee Name	City	State	Tracking Number	UDS Number	Funding Streams
COMMUNITY HEALTH CENTER OF BURLINGTON, INC.	BURLINGTON	VT	H80CS003112008	010150	CH,HCH
COMMUNITY HEALTH CENTERS OF THE RUTLAND REGION, INC	BOMOSEEN	VT	H80CS066592008	0112230	CH
COMMUNITY HEALTH SERVICES OF THE LAMOILLE VALLEY	MORRISVILLE	VT	H80CS106112008	01E00069	CH
LITTLE RIVERS HEALTH CARE, INC	BRADFORD	VT	H80CS066582008	0112220	CH
NE WASHINGTON CTY CMTY HEALTH, INC. DBA THE HEALTH CENTER	PLAINFIELD	VT	H80CS082302008	011440	CH
NORTHERN COUNTIES HEALTH CARE, INC.	SAINTE JOHNSBURY	VT	H80CS006322008	010640	CH
RICHFORD HEALTH CENTER, INC.	RICHFORD	VT	H80CS002612008	013970	CH

TABLE 3A: PATIENTS BY AGE AND GENDER**State Summary for Vermont for 2008 : 7 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	381	408	789
2.	Age 1	375	319	694
3.	Age 2	372	353	725
4.	Age 3	404	381	785
5.	Age 4	407	371	778
6.	Age 5	399	372	771
7.	Age 6	405	395	800
8.	Age 7	413	443	856
9.	Age 8	395	346	741
10.	Age 9	368	345	713
11.	Age 10	411	413	824
12.	Age 11	410	402	812
13.	Age 12	408	401	809
14.	Age 13	379	419	798
15.	Age 14	429	443	872
16.	Age 15	474	453	927
17.	Age 16	469	506	975
18.	Age 17	493	605	1,098
19.	Age 18	530	667	1,197
20.	Age 19	550	713	1,263
Subtotal Patients (sum lines 1-20)		8,472	8,755	17,227
21.	Age 20	526	721	1,247
22.	Age 21	491	685	1,176
23.	Age 22	552	763	1,315
24.	Age 23	497	800	1,297
25.	Age 24	495	750	1,245
26.	Ages 25 - 29	2,601	3,555	6,156
27.	Ages 30 - 34	2,294	3,019	5,313
28.	Ages 35 - 39	2,547	3,020	5,567
29.	Ages 40 - 44	2,652	3,185	5,837
30.	Ages 45 - 49	3,096	3,595	6,691
31.	Ages 50 - 54	3,062	3,282	6,344
32.	Ages 55 - 59	2,760	3,023	5,783
33.	Ages 60 - 64	2,204	2,502	4,706
Subtotal Patients (sum lines 21-33)		23,777	28,900	52,677
34.	Ages 65 - 69	1,719	1,934	3,653
35.	Ages 70 - 74	1,286	1,491	2,777
36.	Ages 75 - 79	1,023	1,305	2,328
37.	Ages 80 - 84	802	1,082	1,884
38.	Ages 85 and over	790	1,368	2,158
Subtotal Patients (sum lines 34-38)		5,620	7,180	12,800
39.	Total Patients (sum lines 1-38)	37,869	44,835	82,704
Percent of Total		45.8%	54.2%	

Date Requested: 12/09/2009

TABLE 3B: PATIENTS BY RACE / ETHNICITY / LANGUAGE**State Summary for Vermont for 2008 : 7 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	591	0.7%
2. All others (including Unreported)	82,113	99.3%
4. Total Patients (sum lines 1-2 must = line 11)	82,704	100.0%

PATIENTS BY RACE	Number (a)	Percent of Total	% of Known
Number of Patients			
5b. Native Hawaiian	21	0.0%	0.0%
5c. Other Pacific Islander	38	0.0%	0.1%
5. Subtotal (sum lines 5b + 5c)	59	0.1%	0.1%
5a. Asian	976	1.2%	1.5%
6. Black/African American	1,383	1.7%	2.2%
7. American Indian/Alaska Native	1,118	1.4%	1.8%
8. White	60,068	72.6%	94.1%
9. More than one race	228	0.3%	0.4%
10. Unreported / Refused to report	18,872	22.8%	
11. Total (sum lines 5+5a+6 to 10 must = line 4)	82,704	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	933	1.1%

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 4: PATIENTS BY SOCIOECONOMIC CHARACTERISTICS**State Summary for Vermont for 2008 : 7 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	9,135	11.0%	26.9%		
2.	101 - 150%	5,570	6.7%	16.4%		
3.	151 - 200%	5,174	6.3%	15.2%		
4.	Over 200%	14,129	17.1%	41.5%		
5.	Unknown	48,696	58.9%			
6.	Total (sum lines 1-5)	82,704	100.0%			
Principal Third Party Medical Insurance Source		Ages 0 - 19 (a)	Ages 20+ (b)	TOTAL	%	
7.	None/Uninsured	1,244	8,947	10,191	12.3%	
8a.	Regular Medicaid (Title XIX)	9,295	13,104	22,399	27.1%	
8b.	CHIP Medicaid	0	0	0	0.0%	
8.	Total Medicaid (Sum lines 8a+8b)	9,295	13,104	22,399	27.1%	
9.	Medicare (Title XVIII)	7	13,773	13,780	16.7%	
10a.	Other Public Insurance non-S-CHIP	11	73	84	0.1%	
10b.	Other Public Insurance S-CHIP	0	0	0	0.0%	
10.	Total Public Insurance (Sum lines 10a+10b)	11	73	84	0.1%	
11.	Private Insurance	6,670	29,580	36,250	43.8%	
12.	Total (Sum Lines 7+8+9+10+11)	17,227	65,477	82,704	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	0	11,412	11,412
13b.	Fee-for-service Member months	25,123	0	0	19,054	44,177
13c.	Total Member Months (Sum lines 13a+13b)	25,123	0	0	30,466	55,589
Characteristics - Special Populations			Number of Patients (a)	%		
14.	Migrant (330g grantees Only)		0	0.0%		
15.	Seasonal (330g grantees Only)		0	0.0%		
	Migrant/Seasonal (non-330 g grantees)		66	100.0%		
16.	Total Migrant/Seasonal Agricultural Worker or Dependent (All Grantees Report This Line)		66	-		
17.	Homeless Shelter (330h grantees Only)		568	42.8%		
18.	Transitional (330h grantees Only)		264	19.9%		
19.	Doubling Up (330h grantees Only)		312	23.5%		
20.	Street (330h grantees Only)		87	6.6%		
21.	Other (330h grantees Only)		0	0.0%		
22.	Unknown (330h grantees Only)		11	0.8%		
23.	Total Homeless (All Grantees Report This Line)		1,327	100.0%		
24.	Total School Based Health Center Patients (All Grantees Report This Line)		668			
25.	Total Veterans (All Grantees Report this Line)		1,453			

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 5: STAFFING AND UTILIZATION**State Summary for Vermont for 2008 : 7 Grantees****Universal**

Data as of: 07/31/2009

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Encounters (b)	Patients (c)
1.	Family Physicians	33.96	126,586	
2.	General Practitioners	0.28	1,003	
3.	Internists	8.99	30,309	
4.	Obstetrician/Gynecologists	1.04	1,205	
5.	Pediatricians	0.60	2,885	
7.	Other Specialty Physicians	0.40	68	
8.	Total Physicians (Sum lines 1-7)	45.27	162,056	
9a.	Nurse Practitioners	16.79	48,533	
9b.	Physician Assistants	16.66	50,940	
10.	Certified Nurse Midwives	2.15	2,888	
10a.	Total Mid-Levels (Sum lines 9a-10)	35.60	102,361	
11.	Nurses	89.55	19,759	
12.	Other Medical Personnel	23.87		
13.	Laboratory Personnel	7.41		
14.	X-Ray Personnel	2.90		
15.	Total Medical (Sum lines 8+10a through 14)	204.60	284,176	71,001
16.	Dentists	10.93	24,583	
17.	Dental Hygienists	12.79	18,317	
18.	Dental Assistance,Aides,Techs	19.82		
19.	Total Dental Services (Sum lines 16-18)	43.54	42,900	16,749
20a.	Psychiatrists	1.24	1,829	
20a1.	Licensed Clinical Psychologists	1.53	1,614	
20a2.	Licensed Clinical Social Workers	10.61	10,606	
20b.	Other Licensed Mental Health Providers	3.40	2,015	
20c.	Other Mental Health Staff	1.23	834	
20.	Mental Health (Sum lines 20a-c)	18.01	16,898	4,112
21.	Substance Abuse Services	4.01	2,942	333
22.	Other Professional Services	0.10	184	97
23.	Pharmacy Personnel	4.09		
24.	Case Managers	5.76	10,514	
25.	Patient/Community Education Specialists	0.58	302	
26.	Outreach Workers	5.19		
27.	Transportation Staff	0.00		
27a.	Eligibility Assistance Workers	1.90		
27b.	Interpretation Staff	0.00		
28.	Other Enabling Services	0.56		
29.	Total Enabling Services (Sum lines 24-28)	13.99	10,816	2,171
29a.	Other Programs/Services	2.47		
30a.	Management and Support Staff	40.30		
30b.	Fiscal and Billing Staff	44.20		
30c.	IT Staff	8.43		
30.	Total Administrative Staff (Sum lines 30a-30c)	92.93		
31.	Facility Staff	10.09		
32.	Patient Support Staff	110.26		
33.	Total Administrative & Facility (Sum lines 30-32)	213.28		
34.	Grand Total (Sum lines 15+19+20+21+22+23+29+29a+33)	504.09	357,916	

Encounters are shown only for personnel that generate reportable encounters
Subtotals may differ from the sum of cells due to rounding

Date Requested: 12/09/2009

TABLE 5: STAFFING AND UTILIZATION**State Summary for Vermont for 2008 : 7 Grantees****Universal**

Data as of: 07/31/2009

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Encounters	
		% Group	% Total	% Group	% Total
1.	Family Physicians	16.6%	6.7%	44.5%	35.4%
2.	General Practitioners	0.1%	0.1%	0.4%	0.3%
3.	Internists	4.4%	1.8%	10.7%	8.5%
4.	Obstetrician/Gynecologists	0.5%	0.2%	0.4%	0.3%
5.	Pediatricians	0.3%	0.1%	1.0%	0.8%
7.	Other Specialty Physicians	0.2%	0.1%	0.0%	0.0%
8.	Total Physicians (Sum lines 1-7)	22.1%	9.0%	57.0%	45.3%
9a.	Nurse Practitioners	8.2%	3.3%	17.1%	13.6%
9b.	Physician Assistants	8.1%	3.3%	17.9%	14.2%
10.	Certified Nurse Midwives	1.1%	0.4%	1.0%	0.8%
10a.	Total Mid-Levels (Sum lines 9a-10)	17.4%	7.1%	36.0%	28.6%
11.	Nurses	43.8%	17.8%	7.0%	5.5%
12.	Other Medical Personnel	11.7%	4.7%		
13.	Laboratory Personnel	3.6%	1.5%		
14.	X-Ray Personnel	1.4%	0.6%		
15.	Total Medical (Sum lines 8+10a through 14)	100.0%	40.6%	100.0%	79.4%
16.	Dentists	25.1%	2.2%	57.3%	6.9%
17.	Dental Hygienists	29.4%	2.5%	42.7%	5.1%
18.	Dental Assistance,Aides,Techs	45.5%	3.9%		
19.	Total Dental Services (Sum lines 16-18)	100.0%	8.6%	100.0%	12.0%
20a.	Psychiatrists	6.9%	0.2%	10.8%	0.5%
20a1.	Licensed Clinical Psychologists	8.5%	0.3%	9.6%	0.5%
20a2.	Licensed Clinical Social Workers	58.9%	2.1%	62.8%	3.0%
20b.	Other Licensed Mental Health Providers	18.9%	0.7%	11.9%	0.6%
20c.	Other Mental Health Staff	6.8%	0.2%	4.9%	0.2%
20.	Mental Health (Sum lines 20a-c)	100.0%	3.6%	100.0%	4.7%
21.	Substance Abuse Services	100.0%	0.8%	100.0%	0.8%
22.	Other Professional Services	100.0%	0.0%	100.0%	0.1%
23.	Pharmacy Personnel	100.0%	0.8%		
24.	Case Managers	41.2%	1.1%	97.2%	2.9%
25.	Patient/Community Education Specialists	4.1%	0.1%	2.8%	0.1%
26.	Outreach Workers	37.1%	1.0%		
27.	Transportation Staff	0.0%	0.0%		
27a.	Eligibility Assistance Workers	13.6%	0.4%		
27b.	Interpretation Staff	0.0%	0.0%		
28.	Other Enabling Services	4.0%	0.1%		
29.	Total Enabling Services (Sum lines 24-28)	100.0%	2.8%	100.0%	3.0%
29a.	Other Programs/Services	100.0%	0.5%		

Encounters are shown only for personnel that generate reportable encounters
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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 Vermont for 2008 : 7 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	18.9%	8.0%		
30b. Fiscal and Billing Staff	20.7%	8.8%		
30c. IT Staff	4.0%	1.7%		
30. Total Administrative Staff (Sum lines 30a-30c)	43.6%	18.4%		
31. Facility Staff	4.7%	2.0%		
32. Patient Support Staff	51.7%	21.9%		
33. Total Administrative & Facility (Sum lines 30-32)	100.0%	42.3%		
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 Vermont for 2008 : 7 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	10	7	1.43
2. Asymptomatic HIV	V08	1	1	1.00
3. Tuberculosis	010.xx - 018.xx	24	20	1.20
4. Syphilis and other venereal Diseases	090.xx - 099.xx	32	20	1.60
Selected Diseases of the Respiratory System				
5. Asthma	493.xx	2,536	1,874	1.35
6. Chronic bronchitis and Emphysema	490.xx - 492.xx	4,733	2,708	1.75
Selected Other Medical Conditions				
7. Abnormal Breast Findings,Female	174.xx; 198.81; 233.0x; 793.8x	108	89	1.21
8. Abnormal Cervical Findings	180.xx; 198.82; 233.1x; 795.0x	261	229	1.14
9. Diabetes Mellitus	250.xx; 775.1x;	12,048	4,958	2.43
10. Heart Disease (selected)	391.xx - 392.0x 410.xx - 429.xx	10,012	2,289	4.37
11. Hypertension	410.xx - 405.xx;	14,972	8,913	1.68
12. Contact Dermatitis and other Eczema	692.xx	2,118	1,862	1.14
13. Dehydration	276.5x	100	74	1.35
14. Exposure to Heat or Cold	991.xx - 992.xx	23	18	1.28
Selected Childhood Conditions				
15. Otitis Media and Eustachian Tube Disorders	381.xx - 382.xx	3,414	2,453	1.39
16. Selected Perinatal Medical Conditions	770.xx; 771.xx; 773.xx; 774.xx - 779.xx (Excluding 779.3x)	155	102	1.52
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;	841	538	1.56

Date Requested: 12/09/2009

TABLE 6A: SELECTED DIAGNOSES AND SERVICES RENDERED**State Summary for Vermont for 2008 : 7 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	2,361	622	3.80
19.	Other Substance Related Disorders (Excluding Tobacco Use Disorders)	292.1x - 292.8x; 304.xx; 305.2x - 305.9x; 357.6x; 648.3x	5,038	886	5.69
20a.	Depression and Other Mood Disorders	296.xx; 300.4 301.13; 311.xx	13,800	5,121	2.69
20b.	Anxiety Disorders Including PTSD	300.0x; 300.21; 300.22; 300.23; 300.29; 300.3; 308.3; 309.81	5,242	2,311	2.27
20c.	Attention Deficit and Disruptive Behavior Disorders	312.8x; 312.9x; 313.81; 314.xx	2,568	978	2.63
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)	5,740	2,269	2.53
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	740	694	1.07
22.	Mammogram	CPT - 4: 77055 - 77057 OR ICD - 9: V76.11; V76.12	1	1	1.00
23.	Pap Test	CPT - 4: 88141 - 88155; 88164 - 88167 OR ICD - 9: V72.3; V72.31; V76.2	5,754	5,249	1.10
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	26,019	20,848	1.25
25.	Contraceptive Management	ICD - 9: V25.xx	2,662	1,831	1.45
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	7,069	4,771	1.48

Date Requested: 12/09/2009

TABLE 6A: SELECTED DIAGNOSES AND SERVICES RENDERED**State Summary for Vermont for 2008 : 7 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	907	750	1.21
28. II. Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0180	17,498	13,794	1.27
29. Prophylaxis - Adult or Child	ADA: D1110, D1120	13,128	10,489	1.25
30. Sealants	ADA: D1351	939	903	1.04
31. Flouride Treatment - adult or child	ADA: D1203, D1204, D1206	5,259	4,226	1.24
32. III. Restorative Services	ADA: D21xx, D23xx, D27xx	10,388	5,596	1.86
33. IV. Oral Surgery (Extractions and other Surgical Procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7260, D7261, D7270, D7272, D7280	4,617	3,964	1.16
34. V. Rehabilitation Services (Endo,Perio,Prosth,Orhto)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	2,694	2,211	1.22

Date Requested: 12/09/2009

TABLE 6B: QUALITY OF CARE INDICATORS**State Summary for Vermont for 2008 : 7 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	0	0.0%
2. Ages 15 - 19	59	9.0%
3. Ages 20 - 24	181	27.6%
4. Ages 25 - 44	416	63.4%
5. Ages 45 and Over	0	0.0%
6. Total Patients (Sum lines 1-5)	656	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	419	63.9%	29	4.4%	68.3%
8. Second Trimester	195	29.7%	8	1.2%	30.9%
9. Third Trimester	5	0.8%	0	0.0%	0.8%

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	506	367	72.6%

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	26,286	13,272	50.5%

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 Vermont for 2008 : 7 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:									0 100.0%
SECTION A: DELIVERIES AND LOW BIRTH WEIGHT BY RACE									
Deliveries and Babies by birth weight									
1. Prenatal care patients who delivered during the year	11 2.7%	0 0.0%	1 0.2%	17 4.2%	3 0.7%	367 90.8%	2 0.5%	3 0.7%	404 100.0%
2. Deliveries performed by grantee provider									299 100.0%
3. Live Births < 1500 grams	0	0	0	0	0	3	0	0	3
4. Live Births 1500 - 2499 grams	1	0	0	1	0	16	0	0	18
5. Live Births ≥ 2500 grams	10	0	1	16	3	343	2	3	378
% Low and Very Low Birth Weight	9.1%	-	0.0%	5.9%	0.0%	5.2%	0.0%	0.0%	5.3%
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	4 1.0%		400 99.0%		404 100.0%				
3. Live Births < 1500 grams	0		3		3				
4. Live Births 1500 - 2499 grams	0		18		18				
5. Live Births ≥ 2500 grams	4		374		378				
% Low and Very Low Birth Weight	0.0%		5.3%		5.3%				

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 7: HEALTH OUTCOMES AND DISPARITIES**State Summary for Vermont for 2008 : 7 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	63	2	-	99	27	9,246	3	5,763	15,247
7a.	Estimated # patients with controlled blood pressure									11,706
7b.	Estimated % patients with controlled blood pressure**									76.8%
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	16		15,206						15,247
7a.	Estimated # patients with controlled blood pressure									11,706
7b.	Estimated % patients with controlled blood pressure**									76.8%

* 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 Vermont for 2008 : 7 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	25	-	-	37	21	3,150	1	2,104	5,406
10a.	Estimated # patients with Hba1c < or= 9%									3,825
10b.	Estimated % patients with Hba1c < or= 9%**									70.8%
11a.	Estimated # patients with Hba1c < 7 %									2,536
11b.	Estimated % patients with Hba1c < 7 %**									46.9%
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			5		5,386				5,406
10a.	Estimated # patients with Hba1c < or= 9%									3,825
10b.	Estimated % patients with Hba1c < or= 9%**									70.8%
11a.	Estimated # patients with Hba1c < 7 %									2,536
11b.	Estimated % patients with Hba1c < 7 %**									46.9%

* 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 Vermont for 2008 : 7 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	18,333,803	10,569,040	28,902,843
2. Lab and X-ray	746,343	415,092	1,161,435
3. Medical/Other Direct	2,012,127	871,865	2,883,992
4. Total Medical Care Services (Sum lines 1-3)	21,092,273	11,855,997	32,948,270
Financial Costs for Other Clinical Services			
5. Dental	5,014,953	2,645,342	7,660,295
6. Mental Health	1,423,466	668,100	2,091,566
7. Substance Abuse	179,965	77,165	257,130
8a. Pharmacy not including pharmaceuticals	393,978	348,401	742,379
8b. Pharmaceuticals	1,062,270		1,062,270
9. Other Professional	7,711	3,891	11,602
10. Total Other Clinical Services (Sum lines 5-9)	8,082,343	3,742,899	11,825,242
Financial Costs of Enabling and Other Program Related Services			
11a. Case Management	397,271		397,271
11b. Transportation	7,566		7,566
11c. Outreach	236,568		236,568
11d. Patient and Community Education	53,627		53,627
11e. Eligibility Assistance	79,353		79,353
11f. Interpretation Services	185,272		185,272
11g. Other Enabling Services	44,494		44,494
11. Total Enabling Services Cost (Sum lines 11a-11g)	1,004,151	471,075	1,475,226
12. Other Related Services	941,821	111,187	1,053,008
13. Total Enabling and Other Services (Sum lines 11-12)	1,945,972	582,262	2,528,234
Overhead and Totals			
14. Facility	2,987,864		
15. Administration	13,193,294		
16. Total Overhead (Sum lines 14-15)	16,181,158		
17. Total Accrued Costs (Sum lines 4+10+13+16)	47,301,746		47,301,746
18. Value of Donated Facilities, Services and Supplies			472,821
19. Grand Total including Donations (Sum lines 17-18)			47,774,567

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 8A: FINANCIAL COSTS**State Summary for Vermont for 2008 : 7 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	86.9%	38.8%	61.1%
2.	Lab and X-ray	3.5%	1.6%	2.5%
3.	Medical/Other Direct	9.5%	4.3%	6.1%
4.	Total Medical Care Services (Sum lines 1-3)	100.0%	44.6%	69.7%
Financial Costs for Other Clinical Services				
5.	Dental	62.0%	10.6%	16.2%
6.	Mental Health	17.6%	3.0%	4.4%
7.	Substance Abuse	2.2%	0.4%	0.5%
8a.	Pharmacy not including pharmaceuticals	4.9%	0.8%	1.6%
8b.	Pharmaceuticals	13.1%	2.2%	2.2%
9.	Other Professional	0.1%	0.0%	0.0%
10.	Total Other Clinical Services (Sum lines 5-9)	100.0%	17.1%	25.0%
Financial Costs of Enabling and Other Program Related Services				
11a.	Case Management	20.4%	0.8%	0.8%
11b.	Transportation	0.4%	0.0%	0.0%
11c.	Outreach	12.2%	0.5%	0.5%
11d.	Patient and Community Education	2.8%	0.1%	0.1%
11e.	Eligibility Assistance	4.1%	0.2%	0.2%
11f.	Interpretation Services	9.5%	0.4%	0.4%
11g.	Other Enabling Services	2.3%	0.1%	0.1%
11.	Total Enabling Services Cost (Sum lines 11a-11g)	51.6%	2.1%	3.1%
12.	Other Related Services	48.4%	2.0%	2.2%
13.	Total Enabling and Other Services (Sum lines 11-12)	100.0%	4.1%	5.3%
Overhead and Totals				
14.	Facility	18.5%	6.3%	
15.	Administration	81.5%	27.9%	
16.	Total Overhead (Sum lines 14-15)	100.0%	34.2%	
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)			1.0%

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 Vermont for 2008 : 7 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	17,124,602	96.5%	33.2%	14,968,793	99.0%	41.0%	87.4%
2a.	Medicaid Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
2b.	Medicaid Managed Care (fee-for-service)	624,673	3.5%	1.2%	144,681	1.0%	0.4%	23.2%
3.	Total Medicaid (Sum lines 1+2a+2b)	17,749,275	100.0%	34.4%	15,113,474	100.0%	41.4%	85.1%
4.	Medicare Non-Managed Care	9,555,194	100.0%	18.5%	6,080,725	100.0%	16.6%	63.6%
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)	9,555,194	100.0%	18.5%	6,080,725	100.0%	16.6%	63.6%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	89,602	100.0%	0.2%	36,105	100.0%	0.1%	40.3%
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)	0	0.0%	0.0%	0	0.0%	0.0%	-
9.	Total Other Public (Sum lines 7+8a+8b)	89,602	100.0%	0.2%	36,105	100.0%	0.1%	40.3%
10.	Private Non-Managed Care	16,259,494	91.4%	31.5%	10,264,473	96.6%	28.1%	63.1%
11a.	Private Managed Care (Capitated)	78,129	0.4%	0.2%	48,997	0.5%	0.1%	62.7%
11b.	Private Managed Care (fee-for-service)	1,449,899	8.2%	2.8%	315,586	3.0%	0.9%	21.8%
12.	Total Private (Sum lines 10+11a+11b)	17,787,522	100.0%	34.5%	10,629,056	100.0%	29.1%	59.8%
13.	Self Pay	6,406,279	100.0%	12.4%	4,686,139	100.0%	12.8%	73.1%
14.	Grand Total (Sum lines 3+6+9+12+13)	51,587,872		100.0%	36,545,499		100.0%	70.8%

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 Vermont for 2008 : 7 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	943,459	490,794		30,359	1,403,894	8.2%	2,369,874	13.8%	
2a. Medicaid Managed Care (capitated)	0	0	0	0	0	-	0	-	
2b. Medicaid Managed Care (fee-for-service)	0	0	0	0	0	0.0%	5,479	0.9%	
3. Total Medicaid (Sum lines 1+2a+2b)	943,459	490,794	0	30,359	1,403,894	7.9%	2,375,353	13.4%	
4. Medicare Non-Managed Care	5,000	251,012		16,068	239,944	2.5%	2,252,921	23.6%	
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)	5,000	251,012	0	16,068	239,944	2.5%	2,252,921	23.6%	
7. Other Public including Non-Medicaid CHIP (Non Managed Care)				0	0	0.0%	59,149	66.0%	
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	-	
9. Total Other Public (Sum lines 7+8a+8b)			0	0	0	0.0%	59,149	66.0%	

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 Vermont for 2008 : 7 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				0	0	0.0%	4,958,446	30.5%
11a. Private Managed Care (Capitated)			0	0	0	0.0%	29,132	37.3%
11b. Private Managed Care (fee-for-service)			54,827	0	54,827	3.8%	150,015	10.3%
12. Total Private (Sum lines 10+11a+11b)			54,827	0	54,827	0.3%	5,137,593	28.9%
13. Self Pay								
14. Grand Total (Sum lines 3+6+9+12+13)	948,459	741,806	54,827	46,427	1,698,665	3.3%	9,825,016	19.0%

13. Self Pay	Sliding Discounts (e)	Bad Debt Write Off (f)
	2,365,598	1,009,866

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009

TABLE 9E: OTHER REVENUES**State Summary for Vermont for 2008 : 7 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	0	0.0%
1b. Community Health Center	5,231,477	86.8%
1c. Health Care for the Homeless	797,619	13.2%
1e. Public Housing Primary Care	0	0.0%
1g. Total Health Center Cluster (Sum lines 1a through 1e)	6,029,096	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 BHPC Grants (Sum lines 1g+1h+1i+1j)	6,029,096	100.0%
Other Federal Grants		
2. Ryan White Title III HIV Early Intervention	0	0.0%
3. Other Federal Grants	8,736	100.0%
5. Total Other Federal Grants (Sum lines 2-4)	8,736	100.0%
Non-Federal Grants Or Contracts		
6. State Government Grants and Contracts	580,906	18.0%
6a. State/Local Indigent Care Programs	27,000	0.8%
7. Local Government Grants and Contracts	91,198	2.8%
8. Foundation/Private Grants and Contracts	2,529,855	78.3%
9. Total Non-Federal Grants Or Contracts (Sum lines 6+6a+7+8)	3,228,959	100.0%
10. Other Revenue (Non-patient related revenue not reported elsewhere)	1,422,414	100.0%
11. Grand Total Revenue (Sum lines 1+5+9+10)	10,689,205	

Percents may not equal 100% due to rounding

Date Requested: 12/09/2009