

Table 3A - Patients by Age and by Sex Assigned at Birth - 2017
National - Universal - 1373 Health Centers

S.No.	Age Groups	Male Patients (a)	Female Patients (b)	All Patients
1.	Under Age 1	339,744	323,847	663,591
2.	Age 1	229,766	220,497	450,263
3.	Age 2	222,337	212,512	434,849
4.	Age 3	231,707	223,557	455,264
5.	Age 4	249,889	241,822	491,711
6.	Age 5	251,190	242,316	493,506
7.	Age 6	237,285	227,622	464,907
8.	Age 7	236,640	226,755	463,395
9.	Age 8	238,229	228,464	466,693
10.	Age 9	238,116	229,106	467,222
11.	Age 10	234,780	224,771	459,551
12.	Age 11	236,671	228,491	465,162
13.	Age 12	229,707	222,919	452,626
14.	Age 13	215,658	212,279	427,937
15.	Age 14	212,012	218,265	430,277
16.	Age 15	203,465	226,641	430,106
17.	Age 16	201,381	238,894	440,275
18.	Age 17	191,728	246,071	437,799
Subtotal Patients, Children <18 Years (Sum lines 1-18)		4,200,305	4,194,829	8,395,134
19.	Age 18	155,598	234,907	390,505
20.	Age 19	122,288	221,112	343,400
21.	Age 20	112,488	219,938	332,426
22.	Age 21	109,575	222,364	331,939
23.	Age 22	111,635	231,533	343,168
24.	Age 23	115,965	240,242	356,207
25.	Age 24	119,866	248,334	368,200
26.	Ages 25 - 29	654,315	1,301,154	1,955,469
27.	Ages 30 - 34	667,501	1,232,422	1,899,923
28.	Ages 35 - 39	675,338	1,142,837	1,818,175
29.	Ages 40 - 44	638,430	1,008,038	1,646,468
30.	Ages 45 - 49	688,789	991,620	1,680,409
31.	Ages 50 - 54	753,656	995,092	1,748,748
32.	Ages 55 - 59	760,533	967,164	1,727,697
33.	Ages 60 - 64	639,820	834,416	1,474,236
Subtotal Patients, Adults 18-64 Years (Sum lines 19-33)		6,325,797	10,091,173	16,416,970
34.	Ages 65 - 69	409,121	556,752	965,873
35.	Ages 70 - 74	246,091	349,034	595,125
36.	Ages 75 - 79	151,593	221,881	373,474
37.	Ages 80 - 84	87,589	140,097	227,686
38.	Ages 85 and over	66,097	134,013	200,110
Subtotal Patients, Older Adults Age 65 and Older (Sum lines 34-38)		960,491	1,401,777	2,362,268
39.	Total Patients (Sum lines 1-38)	11,486,593	15,687,779	27,174,372
% of Total		42.27%	57.73%	

Table 3B - Demographic Characteristics - 2017
National - Universal - 1373 Health Centers

S.No.	Patients by Race	Patients by Hispanic or Latino Ethnicity						
		Hispanic/Latino (a)	Non-Hispanic/Latino (b)	Unreported/Refused to Report Ethnicity (c)		Total (d) (Sum Columns A+B+C)		
		Number (a)	Number (b)	Number (c)	% of Total Patients ¹	Number (d)	% of Total Patients ¹	% of Known Race ²
1.	Asian	20,653	942,191			962,844	3.54%	4.12%
2a.	Native Hawaiian	8,701	40,350			49,051	0.18%	0.21%
2b.	Other Pacific Islander	47,197	168,041			215,238	0.79%	0.92%
2.	Total Hawaiian/Other Pacific Islander (Sum lines 2a+2b)	55,898	208,391			264,289	0.97%	1.13%
3.	Black/African American	214,082	5,026,320			5,240,402	19.28%	22.41%
4.	American Indian/Alaska Native	66,699	250,653			317,352	1.17%	1.36%
5.	White	6,182,280	9,603,574			15,785,854	58.09%	67.50%
6.	More than one race	486,069	328,956			815,025	3.00%	3.49%
6a.	Total Known (Sum lines 1+2+3+4+5+6)	7,025,681	16,360,085			23,385,766		
7.	Unreported/Refused to report Race	2,375,042	530,853	882,711	3.25%	3,788,606	13.94%	
8.	Total Patients (Sum lines 1+2+3 through 7)	9,400,723	16,890,938	882,711		27,174,372	100.00%	
Total Known Ethnicity (Sum line 8, columns A + B)		26,291,661						
		% of Hispanic/Latino of Total Known Ethnicity³ (a)	% of Non-Hispanic/Latino of Total Known Ethnicity³ (b)					
9.	Total Patients	35.76%	64.24%					

S.No.	Patients by Language	Number (a)	% of Total
12.	Patients best served in a language other than English	6,446,929	23.72%

¹ Total Patients is reported on line 8, column D.

² Known Race is reported on line 6a, column D.

³ Known Ethnicity is shown on the line titled 'Total Known Ethnicity'.

% may not equal 100% due to rounding.

Table 3B - Demographic Characteristics - 2017

National - Universal - 1373 Health Centers

S.No.	Patients by Sexual Orientation		
		Number (a)	% of Known
13.	Lesbian or Gay	223,510	0.82%
14.	Straight (not lesbian or gay)	9,750,705	35.88%
15.	Bisexual	112,877	0.42%
16.	Something else	72,893	0.27%
		Number (a)	% of Total
17.	Don't know	14,647,744	53.90%
18.	Chose not to disclose	2,366,643	8.71%
19.	Total Patients (Sum Lines 13 to 18)	27,174,372	100.00%

S.No.	Patients by Gender Identity		
		Number (a)	% of Known
20.	Male	6,066,612	22.32%
21.	Female	8,782,838	32.32%
22.	Transgender Male/ Female-to-Male	35,215	0.13%
23.	Transgender Female/ Male-to-Female	30,472	0.11%
		Number (a)	% of Total
24.	Other	10,654,038	39.21%
25.	Chose not to disclose	1,605,197	5.91%
26.	Total Patients (Sum Lines 20 to 25)	27,174,372	100.00%

Table 4 - Selected Patient Characteristics - 2017
National - Universal - 1373 Health Centers

S.No.	Characteristic	Number of Patients (a)		% of Total	% of Known	
Income as Percent of Poverty Guideline						
1.	100% and Below	13,483,840		49.62%	69.15%	
2.	101 - 150%	2,986,034		10.99%	15.31%	
3.	151 - 200%	1,366,693		5.03%	7.01%	
4.	Over 200%	1,661,886		6.12%	8.52%	
5.	Unknown	7,675,919		28.25%		
6.	Total (Sum lines 1-5)		27,174,372	100.00%		
Principal Third Party Medical Insurance Source		Ages 0 - 17 (a)	Ages 18+ (b)	Total	%	
7.	None/Uninsured	1,066,596	5,150,215	6,216,811	22.88%	
8a.	Regular Medicaid (Title XIX)	6,067,222	7,101,531	13,168,753	48.46%	
8b.	CHIP Medicaid	146,854	25,392	172,246	0.63%	
8.	Total Medicaid (Sum lines 8a+8b)	6,214,076	7,126,923	13,340,999	49.09%	
9a.	Dually eligible (Medicare and Medicaid)	2,447	1,036,162	1,038,609	3.82%	
9.	Medicare (Inclusive of dually eligible (line 9a) and other Title XVIII beneficiaries)	6,634	2,548,677	2,555,311	9.40%	
10a.	Other Public Insurance Non-CHIP	20,216	103,568	123,784	0.46%	
10b.	Other Public Insurance CHIP	123,239	26,353	149,592	0.55%	
10.	Total Public Insurance (Sum lines 10a+10b)	143,455	129,921	273,376	1.01%	
11.	Private Insurance	964,373	3,823,502	4,787,875	17.62%	
12.	Total (Sum Lines 7+8+9+10+11)	8,395,134	18,779,238	27,174,372	100.00%	
Managed Care Utilization						
S.No.	Payer Category	Medicaid (a)	Medicare (b)	Other Public Including Non-Medicaid CHIP (c)	Private (d)	Total (e)
13a.	Capitated Member months	47,863,385	923,519	346,840	1,966,861	51,100,605
13b.	Fee-for-service Member months	50,892,578	2,329,400	873,433	3,450,192	57,545,603
13c.	Total Member Months (Sum lines 13a+13b)	98,755,963	3,252,919	1,220,273	5,417,053	108,646,208
S.No.	Special Populations				Number of Patients (a)	%
14.	Migratory (330g grantees only)				286,741	29.49%
15.	Seasonal (330g grantees only)				585,824	60.25%
	Migrant/Seasonal (non-330g grantees)				99,686	10.25%
16.	Total Agricultural Workers or Dependents (All Health Centers Report This Line)				972,251	100.00%
17.	Homeless Shelter (330h grantees only)				257,086	18.88%
18.	Transitional (330h grantees only)				116,478	8.55%
19.	Doubling Up (330h grantees only)				298,839	21.95%
20.	Street (330h grantees only)				86,774	6.37%
21.	Other (330h grantees only)				129,041	9.48%
22.	Unknown (330h grantees only)				80,182	5.89%
	Homeless (non-330h grantees)				393,275	28.88%
23.	Total Homeless (All Health Centers Report This Line)				1,361,675	100.00%
24.	Total School Based Health Center Patients (All Health Centers Report This Line)				802,630	
25.	Total Veterans (All Health Centers Report This Line)				355,648	
26.	Total Patients Served at a Health Center Located In or Immediately Accessible to a Public Housing Site (All Health Centers Report This Line)				3,466,074	

% may not equal 100% due to rounding.

Table 5 - Staffing and Utilization - 2017
National - Universal - 1373 Health Centers

S.No	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Patients (c)
1.	Family Physicians	5,933.44	17,549,536	
2.	General Practitioners	457.50	1,393,328	
3.	Internists	1,950.06	5,758,971	
4.	Obstetrician/Gynecologists	1,266.40	3,586,416	
5.	Pediatricians	2,831.71	9,039,622	
7.	Other Specialty Physicians	454.72	1,630,665	
8.	Total Physicians (Sum lines 1-7)	12,893.83	38,958,538	
9a.	Nurse Practitioners	8,851.71	22,365,601	
9b.	Physician Assistants	3,076.92	8,677,475	
10.	Certified Nurse Midwives	691.87	1,510,321	
10a.	Total NPs, PAs, CNMs (Sum lines 9a-10)	12,620.50	32,553,397	
11.	Nurses	17,663.41	2,828,799	
12.	Other Medical Personnel	30,681.06		
13.	Laboratory Personnel	2,444.10		
14.	X-Ray Personnel	994.62		
15.	Total Medical Services (Sum lines 8+10a through 14)	77,297.52	74,340,734	22,866,468
16.	Dentists	4,882.42	12,691,316	
17.	Dental Hygienists	2,497.90	2,946,507	
17a.	Dental Therapists	31.38	28,289	
18.	Other Dental Personnel	10,390.13		
19.	Total Dental Services (Sum lines 16-18)	17,801.83	15,666,112	6,116,732
20a.	Psychiatrists	753.74	1,647,606	
20a1.	Licensed Clinical Psychologists	869.20	946,654	
20a2.	Licensed Clinical Social Workers	3,713.06	3,325,441	
20b.	Other Licensed Mental Health Providers	2,808.43	2,772,963	
20c.	Other Mental Health Staff	2,503.17	1,184,005	
20.	Total Mental Health Services (Sum lines 20a-20c)	10,647.60	9,876,669	2,049,194
21.	Substance Abuse Services	1,416.12	1,227,629	168,508
22.	Other Professional Services	1,511.17	2,090,917	709,623
22a.	Ophthalmologists	42.88	103,346	
22b.	Optometrists	320.17	785,302	
22c.	Other Vision Care Staff	407.35		
22d.	Total Vision Services (Sum lines 22a-22c)	770.40	888,648	670,973
23.	Pharmacy Personnel	4,988.09		
24.	Case Managers	8,495.99	4,632,073	
25.	Patient/Community Education Specialists	2,585.00	1,697,246	
26.	Outreach Workers	2,688.06		
27.	Transportation Staff	750.68		
27a.	Eligibility Assistance Workers	4,455.06		
27b.	Interpretation Staff	1,129.46		
27c.	Community Health Workers	1,130.36		
28.	Other Enabling Services	497.41		
29.	Total Enabling Services (Sum lines 24-28)	21,732.02	6,329,319	2,549,897

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

Table 5 - Staffing and Utilization - 2017
National - Universal - 1373 Health Centers

S.No	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Patients (c)
29a.	Other Programs/Services	5,312.86		
29b.	Quality Improvement Staff	2,671.61		
30a.	Management and Support Staff	21,727.00		
30b.	Fiscal and Billing Staff	12,540.75		
30c.	IT Staff	3,631.92		
31.	Facility Staff	5,423.92		
32.	Patient Support Staff	36,367.50		
33.	Total Facility and Non-Clinical Support Staff (Lines 30a - 32)	79,691.09		
34.	Grand Total (Sum lines 15+19+20+21+22+22d+23+29+29a+29b+33)	223,840.31	110,420,028	

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Table 5 - Staffing and Utilization - 2017
National - Universal - 1373 Health Centers

S.No	Personnel by Major Service Category	FTEs		Clinic Visits	
		% Group	% Total	% Group	% Total
1.	Family Physicians	7.68%	2.65%	23.61%	15.89%
2.	General Practitioners	0.59%	0.20%	1.87%	1.26%
3.	Internists	2.52%	0.87%	7.75%	5.22%
4.	Obstetrician/Gynecologists	1.64%	0.57%	4.82%	3.25%
5.	Pediatricians	3.66%	1.27%	12.16%	8.19%
7.	Other Specialty Physicians	0.59%	0.20%	2.19%	1.48%
8.	Total Physicians (Sum lines 1-7)	16.68%	5.76%	52.41%	35.28%
9a.	Nurse Practitioners	11.45%	3.95%	30.09%	20.26%
9b.	Physician Assistants	3.98%	1.37%	11.67%	7.86%
10.	Certified Nurse Midwives	0.90%	0.31%	2.03%	1.37%
10a.	Total NPs, PAs, CNMs (Sum lines 9a-10)	16.33%	5.64%	43.79%	29.48%
11.	Nurses	22.85%	7.89%	3.81%	2.56%
12.	Other Medical Personnel	39.69%	13.71%		
13.	Laboratory Personnel	3.16%	1.09%		
14.	X-Ray Personnel	1.29%	0.44%		
15.	Total Medical (Sum lines 8+10a through 14)	100.00%	34.53%	100.00%	67.33%
16.	Dentists	27.43%	2.18%	81.01%	11.49%
17.	Dental Hygienists	14.03%	1.12%	18.81%	2.67%
17a.	Dental Therapists	0.18%	0.01%	0.18%	0.03%
18.	Other Dental Personnel	58.37%	4.64%		
19.	Total Dental Services (Sum lines 16-18)	100.00%	7.95%	100.00%	14.19%
20a.	Psychiatrists	7.08%	0.34%	16.68%	1.49%
20a1.	Licensed Clinical Psychologists	8.16%	0.39%	9.58%	0.86%
20a2.	Licensed Clinical Social Workers	34.87%	1.66%	33.67%	3.01%
20b.	Other Licensed Mental Health Providers	26.38%	1.25%	28.08%	2.51%
20c.	Other Mental Health Staff	23.51%	1.12%	11.99%	1.07%
20.	Total Mental Health Services (Sum lines 20a-20c)	100.00%	4.76%	100.00%	8.94%
21.	Substance Abuse Services	100.00%	0.63%	100.00%	1.11%
22.	Other Professional Services	100.00%	0.68%	100.00%	1.89%
22a.	Ophthalmologists	5.57%	0.02%	11.63%	0.09%
22b.	Optometrists	41.56%	0.14%	88.37%	0.71%
22c.	Other Vision Care Staff	52.88%	0.18%		
22d.	Total Vision Services (Sum lines 22a-22c)	100.00%	0.34%	100.00%	0.80%
23.	Pharmacy Personnel	100.00%	2.23%		
24.	Case Managers	39.09%	3.80%	73.18%	4.19%
25.	Patient/Community Education Specialists	11.89%	1.15%	26.82%	1.54%
26.	Outreach Workers	12.37%	1.20%		
27.	Transportation Staff	3.45%	0.34%		
27a.	Eligibility Assistance Workers	20.50%	1.99%		
27b.	Interpretation Staff	5.20%	0.50%		
27c.	Community Health Workers	5.20%	0.50%		
28.	Other Enabling Services	2.29%	0.22%		
29.	Total Enabling Services (Sum lines 24-28)	100.00%	9.71%	100.00%	5.73%

Clinic visits are shown only for personnel that generate reportable visits.
Subtotals may differ from the sum of cells due to rounding.
% may not equal 100% due to rounding.

Table 5 - Staffing and Utilization - 2017
National - Universal - 1373 Health Centers

S.No	Personnel by Major Service Category	FTEs		Clinic Visits	
		% Group	% Total	% Group	% Total
29a.	Other Programs/Services	100.00%	2.37%		
29b.	Quality Improvement Staff	100.00%	1.19%		
30a.	Management and Support Staff		9.71%		
30b.	Fiscal and Billing Staff		5.60%		
30c.	IT Staff		1.62%		
31.	Facility Staff		2.42%		
32.	Patient Support Staff		16.25%		
33.	Total Facility and Non-Clinical Support Staff (Lines 30a - 32)	100.00%	35.60%		
34.	Grand Total (Sum lines 15+19+20+21+22+22d+23+29+29a+29b+33)		100.00%		100.00%

Clinic Visits are shown only for personnel that generate reportable visits.
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Table 5A - Tenure for Health Center Staff - 2017

National - Universal - 1373 Health Centers

S.No	Key Staff	Full and Part Time		Locum, On-Call, etc	
		Persons (a)	Total Months (b)	Persons (c)	Total Months (d)
1.	Family Physicians	7,973	560,345	1,808	51,199
2.	General Practitioners	719	49,098	69	1,594
3.	Internists	2,795	239,001	917	25,281
4.	Obstetrician/Gynecologists	2,008	135,807	523	23,663
5.	Pediatricians	3,664	309,809	553	15,617
7.	Other Specialty Physicians	1,455	133,311	549	22,491
9a.	Nurse Practitioners	11,397	549,998	610	16,903
9b.	Physician Assistants	3,922	237,125	215	6,685
10.	Certified Nurse Midwives	937	64,897	117	7,389
11.	Nurses	22,623	1,336,419	654	27,402
16.	Dentists	6,308	351,080	621	22,715
17.	Dental Hygienists	3,229	191,652	127	2,934
17a.	Dental Therapists	37	1,905	0	0
20a.	Psychiatrists	1,368	76,475	204	7,361
20a1.	Licensed Clinical Psychologists	1,176	69,486	42	1,536
20a2.	Licensed Clinical Social Workers	4,743	222,257	89	2,654
20b.	Other Licensed Mental Health Providers	4,164	160,398	103	3,660
22a.	Ophthalmologists	123	12,018	69	4,563
22b.	Optometrists	509	33,854	93	3,951
30a1.	Chief Executive Officer	1,371	173,212	2	22
30a2.	Chief Medical Officer	1,300	100,802	12	445
30a3.	Chief Financial Officer	1,265	98,680	28	1,071
30a4.	Chief Information Officer	567	49,395	14	793

Table 6A - Selected Diagnoses and Services Rendered - 2017
National - Universal - 1373 Health Centers

S.No	Diagnostic Category	Applicable ICD - 10 - CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)	Visits per Patient
Selected Infectious and Parasitic Diseases					
1-2.	Symptomatic / Asymptomatic HIV	B20, B97.35, O98.7-, Z21	616,392	165,745	3.72
3.	Tuberculosis	A15- thru A19-	14,862	6,843	2.17
4.	Sexually transmitted infections	A50- through A64- (exclude A63.0), M02.3-	374,618	259,874	1.44
4a.	Hepatitis B	B16.0-B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11, Z22.51	98,522	47,790	2.06
4b.	Hepatitis C	B17.10, B17.11, B18.2, B19.20, B19.21	475,065	208,508	2.28
Selected Diseases of the Respiratory System					
5.	Asthma	J45-	2,322,114	1,272,531	1.82
6.	Chronic obstructive pulmonary diseases	J40- through J44-, J47-	1,605,687	778,150	2.06
Selected Other Medical Conditions					
7.	Abnormal breast findings, female	C50.01-, C50.11-, C50.21-, C50.31-, C50.41-, C50.51-, C50.61-, C50.81-, C50.91-, C79.81, D05-, D48.6-, N63-, R92-	294,043	197,038	1.49
8.	Abnormal cervical findings	C53-, C79.82, D06-, R87.61-, R87.810, R87.820	311,238	189,923	1.64
9.	Diabetes mellitus	E08- through E13-, O24- (exclude O24.41-)	8,170,072	2,441,686	3.35
10.	Heart disease (selected)	I01-, I02- (exclude I02.9), I20- through I25-, I27-, I28-, I30- through I52-	1,834,512	755,781	2.43
11.	Hypertension	I10- thru I16-	11,530,573	4,526,756	2.55
12.	Contact dermatitis and other eczema	L23- thru L25-, L30- (Exclude L30.1, L30.3, L30.4, L30.5), L55- thru L59- (Exclude L57.0 thru L57.4)	894,843	704,464	1.27
13.	Dehydration	E86-	59,410	45,592	1.30
14.	Exposure to heat or cold	T33-, T34-, T67-, T68-, T69-	5,790	4,267	1.36
14a.	Overweight and obesity	E66-, Z68- (exclude Z68.1, Z68.20 through Z68.24, Z68.51, Z68.52)	11,225,846	5,491,407	2.04
Selected Childhood Conditions (limited to ages 0 through 17)					
15.	Otitis media and Eustachian tube disorders	H65- thru H69-	1,090,669	745,679	1.46
16.	Selected perinatal medical conditions	A33-, P22- through P29- (exclude P29.3), P35- through P96- (exclude P54-, P91.6-, P92-, P96.81), R78.81, R78.89	192,499	115,100	1.67

Table 6A - Selected Diagnoses and Services Rendered - 2017
National - Universal - 1373 Health Centers

S.No	Diagnostic Category	Applicable ICD - 10 - CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)	Visits per Patient
Selected Childhood Conditions (limited to ages 0 through 17)					
17.	Lack of expected normal physiological development (such as delayed milestone; failure to gain weight; failure to thrive); Nutritional deficiencies in children only. Does not include sexual or mental development	E40- through E46-, E50- through E63-, P92-, R62- (exclude R62.7), R63.2, R63.3	1,081,183	648,159	1.67
Selected Mental Health and Substance Abuse Conditions					
18.	Alcohol related disorders	F10-, G62.1	1,093,455	317,518	3.44
19.	Other substance related disorders (excludes tobacco use disorders)	F11- thru F19- (Exclude F17-), G62.0, O99.32-	2,225,371	485,992	4.58
19a.	Tobacco use disorders	F17-	2,373,723	1,182,710	2.01
20a.	Depression and other mood disorders	F30- thru F39-	7,785,806	2,284,818	3.41
20b.	Anxiety disorders including PTSD	F06.4, F40- thru F42-, F43.0, F43.1-, F93.0	6,425,374	2,026,904	3.17
20c.	Attention deficit and disruptive behavior disorders	F90- thru F91-	2,007,703	520,573	3.86
20d.	Other mental disorders, excluding drug or alcohol dependence	F01- through F09- (exclude F06.4), F20- through F29-, F43- through F48- (exclude F43.0- and F43.1-), F50- through F59- (exclude F55-), F60- through F99- (exclude F84.2, F90-, F91-, F98-), R45.1, R45.2, R45.5, R45.6, R45.7, R45.81, R45.82, R48.0	4,569,410	1,520,311	3.01

Table 6A - Selected Diagnoses and Services Rendered - 2017
National - Universal - 1373 Health Centers

S.No	Service Category	Applicable ICD-10-CM or CPT-4/II Code	Number of Visits (a)	Number of Patients (b)	Visits per Patient
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV test	CPT-4: 86689; 86701 through 86703; 87389 through 87391	2,085,341	1,808,062	1.15
21a.	Hepatitis B test	CPT-4: 86704, 86706, 87515 through 87517	920,862	718,715	1.28
21b.	Hepatitis C test	CPT-4: 86803, 86804, 87520 through 87522	1,154,994	966,976	1.19
22.	Mammogram	CPT-4: 77052, 77057, 77065, 77066, 77067 OR ICD-10: Z12.31	807,299	724,187	1.11
23.	Pap tests	CPT-4: 88141 through 88155, 88164 through 88167, 88174, 88175 OR ICD-10: Z01.41-, Z01.42, Z12.4 (exclude Z01.411, and Z01.419)	1,993,194	1,853,912	1.08
24.	Selected Immunizations: Hepatitis A, Hemophilus Influenza B (HiB), Pneumococcal, Diphtheria, Tetanus, Pertussis (DTaP) (DTP) (DT), Mumps, Measles, Rubella, Poliovirus, Varicella, Hepatitis B Child)	CPT-4: 90633, 90634, 90645 through 90648, 90670, 90696 through 90702, 90704 through 90716, 90718 through 90723, 90743, 90744, 90748	4,629,449	3,393,346	1.36
24a.	Seasonal flu vaccine	CPT-4: 90654 through 90662, 90672, 90673, 90685 through 90688	4,413,155	4,041,961	1.09
25.	Contraceptive management	ICD-10: Z30-	2,656,680	1,559,968	1.70
26.	Health supervision of infant or child (ages 0 through 11)	CPT-4: 99381 through 99383, 99391 through 99393	4,985,097	3,270,604	1.52
26a.	Childhood lead test screening (ages 9 to 72 months)	CPT-4: 83655	586,646	527,824	1.11
26b.	Screening, brief intervention, and referral to treatment (SBIRT)	CPT-4: 99408, 99409 HCPCS: G0396, G0397, H0050	1,530,719	1,017,249	1.50
26c.	Smoke and tobacco use cessation counseling	CPT-4: 99406, 99407 OR HCPCS: S9075 OR CPT-II: 4000F, 4001F	2,215,635	1,183,306	1.87
26d.	Comprehensive and intermediate eye exams	CPT-4: 92002, 92004, 92012, 92014	630,831	554,596	1.14

Table 6A - Selected Diagnoses and Services Rendered - 2017
National - Universal - 1373 Health Centers

S.No	Service Category	Applicable ADA Code	Number of Visits (a)	Number of Patients (b)	Visits per Patient
Selected Dental Services					
27.	I. Emergency services	ADA: D9110	266,333	217,731	1.22
28.	II. Oral exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0171, D0180	6,495,891	5,005,766	1.30
29.	Prophylaxis - adult or child	ADA: D1110, D1120	3,878,242	3,136,394	1.24
30.	Sealants	ADA: D1351	538,427	462,177	1.16
31.	Fluoride treatment - adult or child	ADA: D1206, D1208	2,780,598	2,209,459	1.26
32.	III. Restorative services	ADA: D21xx - D29xx	3,657,790	1,834,308	1.99
33.	IV. Oral Surgery (extractions and other surgical procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7251, D7260, D7261, D7270, D7272, D7280, D7290 through D7294	1,339,876	1,006,547	1.33
34.	V. Rehabilitation services (Endo,Perio,Prosth,Orhto)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	1,799,225	885,374	2.03

Sources of codes:

- International Classification of Diseases, 2017, (ICD-10-CM). National Center for Health Statistics (NCHS).
- Current Procedural Terminology (CPT), 2017. American Medical Association (AMA).
- Current Dental Terminology (CDT), 2017 – Dental Procedure Codes. American Dental Association (ADA).

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

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

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

Table 6B - Quality of Care Measures - 2017
National - Universal - 1373 Health Centers

Prenatal Care Provided by Referral Only		
Answer	Number of Health Centers	% Total
Yes	394	28.70%
No	979	71.30%

Section A - Age Categories for Prenatal Care Patients: (Health Centers Who Provide Prenatal Care Only)			
Demographic Characteristics of Prenatal Care Patients			
	Age	Number of Patients (a)	Percent (b)
1.	Less than 15 Years	950	0.17%
2.	Ages 15 - 19	54,490	9.51%
3.	Ages 20 - 24	153,119	26.72%
4.	Ages 25 - 44	362,940	63.34%
5.	Ages 45 and Over	1,527	0.27%
6.	Total Patients (Sum lines 1-5)	573,026	100.00%

Section B - Early Entry into Prenatal Care					
	Early Entry into Prenatal Care	Women Having First Visit with Health Center		Women Having First Visit with Another Provider	
		(a)	%	(b)	%
7.	First Trimester	394,558	68.86%	29,314	5.12%
8.	Second Trimester	106,019	18.50%	12,971	2.26%
9.	Third Trimester	23,449	4.09%	6,715	1.17%
					5.26%

Section C - Childhood Immunization Status				
	Childhood Immunization Status	Total Patients with 2nd Birthday (a)	Estimated Number Patients Immunized (b)	Estimated % Patients Immunized (c)
10.	Percentage of children 2 years of age who received age appropriate vaccines by their 2nd birthday	384,056	154,557	40.24%

Section D - Cervical Cancer Screening				
	Cervical Cancer Screening	Total Female Patients Aged 23 through 64 (a)	Estimated Number Patients Tested (b)	Estimated % Patients Tested (c)
11.	Percentage of women 23-64 years of age, who were screened for cervical cancer	6,995,030	3,894,117	55.67%

Section E - Weight Assessment and Counseling for Nutrition and Physical Activity of Children and Adolescents				
	Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	Total Patients Aged 3 through 17 (a)	Estimated Number Patients Assessed and Counseled (b)	Estimated % Patients Assessed and Counseled (c)
12.	Percentage of patients 3-17 years of age with a BMI percentile, and counseling on nutrition and physical activity documented	4,993,610	3,288,504	65.85%

% may not equal 100% due to rounding.

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

Table 6B - Quality of Care Measures - 2017
National - Universal - 1373 Health Centers

Section F – Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan				
	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	Total Patients Aged 18 and Older (a)	Estimated Number Patients with BMI Charted and Follow-Up Plan Documented as Appropriate (b)	Estimated % Patients with BMI Charted and Follow-Up Plan Documented as Appropriate (c)
13.	Percentage of patients 18 years of age and older with (1) BMI documented and (2) follow-up plan documented if BMI is outside normal parameters	14,922,214	9,527,334	63.85%

Section G – Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention				
	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Total Patients Aged 18 and Older (a)	Estimated Number Patients Assessed for Tobacco Use and provided Intervention if a Tobacco User (b)	Estimated % Patients Assessed for Tobacco Use and provided Intervention if a Tobacco User (c)
14a.	Percentage of patients aged 18 years of age and older who (1) were screened for tobacco use one or more times within 24 months and if identified to be a tobacco user (2) received cessation counseling intervention	11,781,652	10,309,070	87.50%

Section H – Use of Appropriate Medications for Asthma				
	Use of Appropriate Medications for Asthma	Total Patients Aged 5 through 64 with Persistent Asthma (a)	Estimated Number with Acceptable Plan (b)	Estimated % Patients with Acceptable Plan (c)
16.	Percentage of patients 5 through 64 years of age identified as having persistent asthma and were appropriately ordered medication	386,500	334,805	86.62%

Section I – Coronary Artery Disease (CAD): Lipid Therapy				
	Coronary Artery Disease (CAD): Lipid Therapy	Total Patients Aged 18 and Older With CAD Diagnosis (a)	Estimated Number Patients Prescribed a Lipid Lowering Therapy (b)	Estimated % Patients Prescribed a Lipid Lowering Therapy (c)
17.	Percentage of patients 18 years of age and older with a diagnosis of CAD who were prescribed a lipid lowering therapy	300,406	242,500	80.72%

Section J – Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet				
	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	Total Patients Aged 18 And Older With IVD Diagnosis or AMI, CABG, or PCI Procedure (a)	Estimated Number Patients with Aspirin or Other Antiplatelet Therapy (b)	Number of Patients with Documentation of Aspirin or Other Antiplatelet Therapy (c)
18.	Percentage of patients 18 years of age and older with a diagnosis of IVD or AMI, CABG, or PCI procedure with aspirin or another antiplatelet	544,513	431,614	79.27%

% may not equal 100% due to rounding.

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

Table 6B - Quality of Care Measures - 2017
National - Universal - 1373 Health Centers

Section K – Colorectal Cancer Screening				
	Colorectal Cancer Screening	Total Patients Aged 50 through 75 (a)	Estimated Number Patients with Appropriate Screening for Colorectal Cancer (b)	Estimated % Patients with Appropriate Screening for Colorectal Cancer (c)
19.	Percentage of patients 50 through 75 years of age who had appropriate screening for colorectal cancer	5,405,197	2,271,055	42.02%

Section L – HIV Linkage to Care				
	HIV Linkage to Care	Total Patients First Diagnosed with HIV (a)	Estimated Number Patients Seen Within 90 Days of First Diagnosis of HIV (b)	Estimated % Patients Seen Within 90 Days of First Diagnosis of HIV (c)
20.	Percentage of patients whose first ever HIV diagnosis was made by health center staff between October 1, of the prior year and September 30, of the measurement year and who were seen for follow-up treatment within 90 days of that first ever diagnosis	8,060	6,812	84.52%

Section M – Preventive Care and Screening: Screening for Depression and Follow-Up Plan				
	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Total Patients Aged 12 and Older (a)	Estimated Number Patients Screened for Depression and Follow-up Plan Documented as Appropriate (b)	Estimated % Patients Screened for Depression and Follow-up Plan Documented as Appropriate (c)
21.	Percentage of patients 12 years of age and older who were (1) screened for depression with a standardized tool and, if screening was positive, (2) had a follow-up plan documented	14,972,995	9,904,540	66.15%

Section N – Dental Sealants for Children between 6-9 Years				
	Dental Sealants for Children between 6-9 Years	Total Patients Aged 6 through 9 at Moderate to High Risk for Caries (a)	Estimated Number Patients with Sealants to First Molars (b)	Estimated % Patients with Sealants to First Molars (c)
22.	Percentage of children 6 through 9 years of age, at moderate to high risk of caries who received a sealant on a first permanent molar	266,511	135,142	50.71%

% may not equal 100% due to rounding.

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

Table 7 - Health Outcomes and Disparities - 2017
National - Universal - 1373 Health Centers

Total (i)						
HIV Positive Pregnant Women	986					
Deliveries Performed by Health Center Provider	178,049					
Section A: Deliveries And Birth Weight						
Race and Ethnicity	Prenatal Care Patients Who Delivered During the Year (1a)	Live Births < 1500 grams (1b)	Live Births 1500- 2499 grams (1c)	Live Births >= 2500 grams (1d)	% Low and Very Low Birth Weight	
By Race						
Asian (a)	11,820	3.95%	110	773	10,709	7.62%
Native Hawaiian (b1)	825	0.28%	13	65	742	9.51%
Other Pacific Islander (b2)	3,913	1.31%	50	246	3,618	7.56%
Black/African American (c)	57,346	19.16%	1,163	5,355	49,305	11.68%
Hispanic/Latino	2,915	0.97%	55	223	2,626	9.57%
Non-Hispanic/Latino	54,431	18.18%	1,108	5,132	46,679	11.79%
American Indian/Alaska Native (d)	3,356	1.12%	42	226	3,115	7.92%
White (e)	166,879	55.74%	1,667	9,727	151,106	7.01%
Hispanic/Latino	101,460	33.89%	1,013	5,385	92,645	6.46%
Non-Hispanic/Latino	65,419	21.85%	654	4,342	58,461	7.87%
More than one race (f)	8,883	2.97%	101	600	8,585	7.55%
Race Unreported/Refused to Report (g)	41,543	13.88%	457	2,447	39,340	6.87%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	294,565	98.39%	3,603	19,439	266,520	7.96%
By Ethnicity						
Hispanic/Latino (section 1)	149,005	49.77%	1,527	8,224	137,371	6.63%
Non-Hispanic/Latino (section 2)	145,560	48.62%	2,076	11,215	129,149	9.33%
Sub-total (Sum section 1 + section 2)	294,565	98.39%	3,603	19,439	266,520	7.96%
Unreported/Refused to Report Race and Ethnicity (h)	4,808	1.61%	235	746	8,687	10.15%
Total (i)	299,373	100.00%	3,838	20,185	275,207	8.03%

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

Table 7 - Health Outcomes and Disparities - 2017
National - Universal - 1373 Health Centers

Section B: Controlling High Blood Pressure		
Patients 18 through 85 Years of Age Diagnosed with Hypertension whose Last Blood Pressure was Less than 140/90		
Race and Ethnicity	Total Patients 18 through 85 Years of Age with Hypertension (2a)	Estimated % Patients with Controlled Blood Pressure (2b)
By Race		
Asian (a)	154,403	67.66%
Native Hawaiian (b1)	7,881	59.27%
Other Pacific Islander (b2)	24,413	60.05%
Black/African American (c)	1,068,643	55.74%
Hispanic/Latino	29,491	62.34%
Non-Hispanic/Latino	1,039,152	55.53%
American Indian/Alaska Native (d)	43,133	60.92%
White (e)	2,464,154	65.34%
Hispanic/Latino	721,205	65.22%
Non-Hispanic/Latino	1,742,949	65.39%
More than one race (f)	74,983	63.28%
Race Unreported/Refused to Report (g)	332,996	64.15%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	4,170,606	
By Ethnicity		
Hispanic/Latino (section 1)	1,087,099	64.96%
Non-Hispanic/Latino (section 2)	3,083,507	61.94%
Sub-total (Sum section 1 + section 2)	4,170,606	
Unreported/Refused to Report Race and Ethnicity (h)	69,861	60.52%
Total (i)	4,240,467	62.71%

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

Table 7 - Health Outcomes and Disparities - 2017
National - Universal - 1373 Health Centers

Section C: Diabetes: Hemoglobin A1c Poor Control			
Patients 18 to 75 years of age diagnosed with Type I or Type II Diabetes: Most Recent Test Results			
Race and Ethnicity	Total Patients 18 through 75 Years of Age with Diabetes (3a)	Estimated % Patients with Hba1c > 9% (3b)	Estimated % Patients with Hba1c < 8% (3c)
By Race			
Asian (a)	86,522	21.98%	66.82%
Native Hawaiian (b1)	5,011	38.65%	50.42%
Other Pacific Islander (b2)	19,937	43.24%	41.13%
Black/African American (c)	497,096	34.96%	52.84%
Hispanic/Latino	17,206	32.36%	49.55%
Non-Hispanic/Latino	479,890	35.07%	52.90%
American Indian/Alaska Native (d)	27,096	37.49%	48.71%
White (e)	1,296,498	32.15%	55.13%
Hispanic/Latino	544,196	34.77%	52.46%
Non-Hispanic/Latino	752,302	30.27%	57.08%
More than one race (f)	47,642	34.32%	52.06%
Race Unreported/Refused to Report (g)	247,225	34.80%	52.19%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	2,227,027		
By Ethnicity			
Hispanic/Latino (section 1)	815,461	34.77%	52.32%
Non-Hispanic/Latino (section 2)	1,411,566	31.83%	55.73%
Sub-total (Sum section 1 + section 2)	2,227,027		
Unreported/Refused to Report Race and Ethnicity (h)	39,875	35.05%	51.36%
Total (i)	2,266,902	32.95%	54.43%

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

Table 8A - Financial Costs - 2017
National - Universal - 1373 Health Centers

S.No		Accrued Cost (a) \$	Allocation of Facility and Non-Clinical Support Services (b) \$	Total Cost After Allocation of Facility and Non-Clinical Support Services (c) \$
Financial Costs for Medical Care				
1.	Medical Staff	7,575,029,110	4,032,317,190	11,607,346,300
2.	Lab and X-ray	437,141,086	220,121,278	657,262,364
3.	Medical/Other Direct	1,400,529,741	746,459,789	2,146,989,530
4.	Total Medical Care Services (Sum lines 1-3)	9,412,699,937	4,998,898,257	14,411,598,194
Financial Costs for Other Clinical Services				
5.	Dental	2,108,252,008	1,029,835,904	3,138,087,912
6.	Mental Health	1,138,863,161	548,977,372	1,687,840,533
7.	Substance Abuse	126,771,996	69,688,168	196,460,164
8a.	Pharmacy not including pharmaceuticals	752,301,744	360,447,599	1,112,749,343
8b.	Pharmaceuticals	1,739,734,966		1,739,734,966
9.	Other Professional	180,875,025	85,515,659	266,390,684
9a.	Vision	97,545,793	52,129,932	149,675,725
10.	Total Other Clinical Services (Sum lines 5-9a)	6,144,344,693	2,146,594,634	8,290,939,327
Financial Costs of Enabling and Other Services				
11a.	Case Management	506,596,909		506,596,909
11b.	Transportation	50,821,827		50,821,827
11c.	Outreach	165,635,619		165,635,619
11d.	Patient and Community Education	165,949,311		165,949,311
11e.	Eligibility Assistance	213,822,003		213,822,003
11f.	Interpretation Services	78,196,312		78,196,312
11g.	Other Enabling Services	32,987,562		32,987,562
11h.	Community Health Workers	53,793,393		53,793,393
11.	Total Enabling Services Cost (Sum lines 11a through 11h)	1,267,802,936	596,675,581	1,864,478,517
12.	Other Related Services	520,886,664	189,548,169	710,434,833
12a.	Quality Improvement	222,775,596	97,174,710	319,950,306
13.	Total Enabling and Other Services (Sum lines 11, 12, and 12a)	2,011,465,196	883,398,460	2,894,863,656
Facility and Non-Clinical Support Services and Totals				
14.	Facility	1,866,359,525		
15.	Non-Clinical Support Services	6,162,531,826		
16.	Total Facility and Non-Clinical Support Services(Sum lines 14 and 15)	8,028,891,351		
17.	Total Accrued Costs (Sum lines 4+10+13+16)	25,597,401,177		25,597,401,177
18.	Value of Donated Facilities, Services and Supplies			537,747,921
19.	Grand Total including Donations (Sum lines 17-18)			26,135,149,098

Table 9D - Patient Related Revenue (Scope of Project Only) - 2017
National - Universal - 1373 Health Centers

S.No	Payer Category	Charges			Collections			
		Full Charges This Period (a)	% of Payer	% of Total	Amount Collected This Period (b)	% of Payer	% of Total	% of Charges
1.	Medicaid Non-Managed Care	5,974,870,264	41.09%	21.55%	4,744,878,588	41.34%	27.25%	79.41%
2a.	Medicaid Managed Care (capitated)	2,811,826,192	19.34%	10.14%	2,528,833,928	22.03%	14.52%	89.94%
2b.	Medicaid Managed Care (fee-for-service)	5,753,387,431	39.57%	20.75%	4,204,157,798	36.63%	24.15%	73.07%
3.	Total Medicaid (Sum lines 1+2a+2b)	14,540,083,887	100.00%	52.44%	11,477,870,314	100.00%	65.92%	78.94%
4.	Medicare Non-Managed Care	2,773,789,670	81.57%	10.00%	1,640,240,164	83.09%	9.42%	59.13%
5a.	Medicare Managed Care (capitated)	138,056,609	4.06%	0.50%	98,025,476	4.97%	0.56%	71.00%
5b.	Medicare Managed Care (fee-for-service)	488,772,418	14.37%	1.76%	235,830,290	11.95%	1.35%	48.25%
6.	Total Medicare (Sum lines 4+5a+5b)	3,400,618,697	100.00%	12.26%	1,974,095,930	100.00%	11.34%	58.05%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	360,377,851	73.07%	1.30%	198,491,335	70.70%	1.14%	55.08%
8a.	Other Public including Non-Medicaid CHIP (Managed Care capitated)	23,197,499	4.70%	0.08%	15,703,333	5.59%	0.09%	67.69%
8b.	Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	109,588,792	22.22%	0.40%	66,545,930	23.70%	0.38%	60.72%
9.	Total Other Public (Sum lines 7+8a+8b)	493,164,142	100.00%	1.78%	280,740,598	100.00%	1.61%	56.93%
10.	Private Non-Managed Care	3,893,074,621	84.40%	14.04%	2,228,021,166	86.74%	12.80%	57.23%
11a.	Private Managed Care (capitated)	138,802,509	3.01%	0.50%	73,650,099	2.87%	0.42%	53.06%
11b.	Private Managed Care (fee-for-service)	580,651,142	12.59%	2.09%	267,000,940	10.39%	1.53%	45.98%
12.	Total Private (Sum lines 10+11a+11b)	4,612,528,272	100.00%	16.64%	2,568,672,205	100.00%	14.75%	55.69%
13.	Self-Pay	4,680,727,210	100.00%	16.88%	1,109,443,349	100.00%	6.37%	23.70%
14.	Total (Sum lines 3+6+9+12+13)	27,727,122,208		100.00%	17,410,822,396		100.00%	62.79%

% may not equal 100% due to rounding.

Table 9D - Patient Related Revenue (Scope of Project Only) - 2017
National - Universal - 1373 Health Centers

S.No	Payer Category	Retroactive Settlements, Receipts, and Paybacks						Allowances	
		(c)						Allowances (d)	Allowances % of Charges
		Collection of Recon/Wrap Around Current Year (c1)	Collection of Recon/Wrap Around Previous Years (c2)	Collection of Other Payments: P4P, Risk Pools, Withholds, etc. (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges		
1.	Medicaid Non-Managed Care	447,527,973	160,401,527	44,515,465	30,151,163	622,293,802	10.42%	1,302,025,644	21.79%
2a.	Medicaid Managed Care (capitated)	1,016,545,795	120,280,104	206,879,368	28,733,564	1,314,971,703	46.77%	281,866,104	10.02%
2b.	Medicaid Managed Care (fee-for-service)	803,070,666	191,098,514	124,994,798	7,941,672	1,111,222,306	19.31%	1,534,349,655	26.67%
3.	Total Medicaid (Sum lines 1+2a+2b)	2,267,144,434	471,780,145	376,389,631	66,826,399	3,048,487,811	20.97%	3,118,241,403	21.45%
4.	Medicare Non-Managed Care	21,813,386	17,477,336	8,180,402	2,110,168	45,360,956	1.64%	1,025,515,904	36.97%
5a.	Medicare Managed Care (capitated)	2,103,114	626,045	1,497,914	0	4,227,073	3.06%	39,596,619	28.68%
5b.	Medicare Managed Care (fee-for-service)	4,796,077	2,624,811	3,585,767	254,426	10,752,229	2.20%	226,655,687	46.37%
6.	Total Medicare (Sum lines 4+5a+5b)	28,712,577	20,728,192	13,264,083	2,364,594	60,340,258	1.77%	1,291,768,210	37.99%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	154,719	703,622	157,801	56,127	960,015	0.27%	142,106,359	39.43%
8a.	Other Public including Non-Medicaid CHIP (Managed Care capitated)	1,823,960	4,221,045	810,129	3,056	6,852,078	29.54%	7,453,727	32.13%
8b.	Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	1,441,770	3,211,329	285,045	102,612	4,835,532	4.41%	38,875,619	35.47%
9.	Total Other Public (Sum lines 7+8a+8b)	3,420,449	8,135,996	1,252,975	161,795	12,647,625	2.56%	188,435,705	38.21%

% may not equal 100% due to rounding.

Table 9D - Patient Related Revenue (Scope of Project Only) - 2017
National - Universal - 1373 Health Centers

S.No	Payer Category	Retroactive Settlements, Receipts, and Paybacks						Allowances	
		(c)							
		Collection of Recon/Wrap Around Current Year (c1)	Collection of Recon/Wrap Around Previous Years (c2)	Collection of Other Payments: P4P, Risk Pools, Withholds, etc. (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
10.	Private Non-Managed Care			10,884,550	341,740	10,542,810	0.27%	1,465,575,792	37.65%
11a.	Private Managed Care (capitated)			5,045,567	0	5,045,567	3.64%	66,419,564	47.85%
11b.	Private Managed Care (fee-for-service)			6,313,085	20,893	6,292,192	1.08%	280,576,155	48.32%
12.	Total Private (Sum lines 10+11a+11b)			22,243,202	362,633	21,880,569	0.47%	1,812,571,511	39.30%
13.	Self-Pay								
14.	Total (Sum lines 3+6+9+12+13)	2,299,277,460	500,644,333	413,149,891	69,715,421	3,143,356,263	11.34%	6,411,016,829	23.12%

S.No		Sliding Discounts (e)	Bad Debt Write Off (f)
13.	Self-Pay	2,892,681,676	455,310,777

% may not equal 100% due to rounding.

Table 9E - Other Revenues - 2017
National - Universal - 1373 Health Centers

S.No	Source	Amount (a) \$	% Group Total
BPHC Grants (Enter Amount Drawn Down - Consistent with PMS-272)			
1a.	Migrant Health Center	378,413,020	8.00%
1b.	Community Health Center	3,781,772,094	79.92%
1c.	Health Care for the Homeless	376,902,234	7.97%
1e.	Public Housing Primary Care	62,064,938	1.31%
1g.	Total Health Center Cluster (Sum lines 1a through 1e)	4,599,152,286	97.20%
1j.	Capital Improvement Program Grants	64,746,242	1.37%
1k.	Capital Development Grants, including School Based Health Center Capital Grants	67,783,842	1.43%
1.	Total BPHC Grants (Sum Lines 1g+1j+1k)	4,731,682,370	100.00%
Other Federal Grants			
2.	Ryan White Part C HIV Early Intervention	76,915,682	15.09%
3.	Other Federal Grants	259,419,452	50.90%
3a.	Medicare and Medicaid EHR Incentive Payments for Eligible Providers	173,371,723	34.01%
5.	Total Other Federal Grants (Sum Lines 2-3a)	509,706,857	100.00%
Non-Federal Grants or Contracts			
6.	State Government Grants and Contracts	716,329,480	26.52%
6a.	State/Local Indigent Care Programs	575,769,260	21.32%
7.	Local Government Grants and Contracts	535,687,126	19.83%
8.	Foundation/Private Grants and Contracts	873,374,616	32.33%
9.	Total Non-Federal Grants And Contracts (Sum lines 6+6a+7+8)	2,701,160,482	100.00%
10.	Other Revenue (Non-patient related revenue not reported elsewhere)	983,184,076	100.00%
11.	Grand Total Revenue (Sum lines 1+5+9+10)	8,925,733,785	

% may not equal 100% due to rounding.

Health Information Technology Capabilities and Quality Recognition - 2017
National - Universal - 1373 Health Centers

S.No.	Measures	Number of Health Centers	% of Total
1.	Health Centers that have an EHR installed and in use		
1a.	Yes, installed at all sites and used by all providers	1,326	96.58%
1b.	Yes, but only installed at some sites or used by some providers	34	2.48%
Total Health Centers with EHR installed (Sum 1a + 1b)		1,360	99.05%
1c.	Health Centers who will install the EHR system in 3 months	3	0.22%
1d.	Health Centers who will install the EHR system in 6 months	2	0.15%
1e.	Health Centers who will install the EHR system in 1 year or more	6	0.44%
1f.	Health Centers who have Not Planned on installing the EHR system	2	0.15%
Total Health Centers with No EHR installed (sum 1c + 1d + 1e + 1f)		13	0.95%
Total Health Centers reported		1,373	100.00%
2.	Does your center send prescriptions to the pharmacy electronically? (Do not include faxing)		
	Yes	1,345	97.96%
	No	12	0.87%
	Not Sure	3	0.22%
3.	Does your center use computerized, clinical decision support such as alerts for drug allergies, checks for drug-drug interactions, reminders for preventive screening tests, or other similar functions?		
	Yes	1,349	98.25%
	No	6	0.44%
	Not Sure	5	0.36%
4.	Does your center exchange clinical information electronically with other key providers/health care settings such as hospitals, emergency rooms, or subspecialty clinicians?		
	Yes	1,096	79.83%
	No	247	17.99%
	Not Sure	17	1.24%
5.	Does your center engage patients through health IT such as patient portals, kiosks, secure messaging (i.e., secure email) either through the EHR or through other technologies?		
	Yes	1,238	90.17%
	No	118	8.59%
	Not Sure	4	0.29%
6.	Does your center use the EHR or other health IT system to provide patients with electronic summaries of office visits or other clinical information when requested?		
	Yes	1,316	95.85%
	No	41	2.99%
	Not Sure	3	0.22%
7.	How do you collect data for UDS clinical reporting (Tables 6B and 7)?		
	We use the EHR to extract automated reports	617	44.94%
	We use the EHR but only to access individual patient charts	26	1.89%
	We use the EHR in combination with another data analytic system	716	52.15%
	We do not use the EHR	14	1.02%
8.	Are your eligible providers participating in the Centers for Medicare and Medicaid Services (CMS) EHR Incentive Program commonly known as "Meaningful Use"?		
	Yes	1,158	84.34%
	No	200	14.57%
	Not sure	15	1.09%

Health Information Technology Capabilities and Quality Recognition - 2017
National - Universal - 1373 Health Centers

S.No.	Measures	Number of Health Centers	% of Total
8a.	If yes (a or b), at what stage of Meaningful Use (MU) are the majority (more than half) of your participating providers attested (i.e., what is the stage for which they most recently received incentive payments)?		
	a. Received MU for Modified Stage 2	840	72.54%
	b. Received MU for Stage 3	57	4.92%
	c. Not sure	261	22.54%
8b.	If no (c only), are your eligible providers planning to participate?	90	68.18%
9.	Does your center use health IT to coordinate or to provide enabling services such as outreach, language translation, transportation, case management, or other similar services?		
	Yes	1,090	79.39%
	No	283	20.61%
10.	Has your health center received or retained patient centered medical home recognition or certification for one or more sites during the measurement year?		
	Yes	1,059	77.13%
	No	314	22.87%
11.	Has your health center received accreditation?		
	Yes	368	26.80%
	No	1,005	73.20%

Other Data Elements - 2017
National - Universal - 1373 Health Centers

S.No.	Measures	Number of Physicians (1a) or Patients (1b)	% of Total
1.	Medication-Assisted Treatment (MAT) for Opioid Use Disorder		
1a.	How many physicians, certified nurse practitioners and physician assistants, on-site or with whom the health center has contracts, have obtained a Drug Addiction Treatment Act of 2000 (DATA) waiver to treat opioid use disorder with medications specifically approved by the U.S. Food and Drug Administration (FDA) for that indication?	2,973	
1b.	How many patients received medication-assisted treatment for opioid use disorder from a physician, certified nurse practitioner, or physician assistant, with a DATA waiver working on behalf of the health center?	64,597	0.24%
S.No.	Measures	Number of Health Centers	% of Total
2.	Are you using telehealth? Telehealth is defined as the use of telecommunications and information technologies to share information and provide clinical care, education, public health, and administrative services at a distance		
	Yes	600	43.70%
	No	773	56.30%
2a.	If yes (a), how are you using telehealth?		
	Provide primary care services	125	20.83%
	Provide specialty care services	164	27.33%
	Provide mental health services	315	52.50%
	Provide oral health services	37	6.17%
	Manage patients with chronic conditions	147	24.50%
	Other	140	23.33%
S.No.	Measures	Number of Assists ⁴	
3.	Provide the number of assists during the past year by a trained assister (e.g., certified application counselor or equivalent). Outreach and enrollment assists are defined as customizable education sessions about affordable health insurance coverage options (one-on-one or small group) and any other assistance provided by a health center assister to facilitate enrollment through the Marketplace, Medicaid or CHIP.	5,042,710	

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

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