

**Sacramento County Department of Health Services
Health Center Co-Applicant Board (CAB)**

**Summary of Uniform Data System (UDS) Report Submitted to HRSA,
February 2020**

What is the Uniform Data System (UDS)?

The Uniform Data System (UDS) is a standardized reporting system that provides consistent information about health centers throughout the United States. All Federally-Qualified Health Centers (FQHCs) like the Sacramento County Health Center are required to report this data set annually as a condition of operation. The UDS requests tables of data as well as answers to particular questions. The information requested includes:

- The number and socio-demographic characteristics of people served at the health center;
- Types and quantities of services provided by the health center;
- Counts of staff who provide these services;
- Measures of the quality of care provided to patients;
- Cost and efficiency data relative to the delivery of services; and
- Sources and amounts of health center income.

UDS data is based on eligible patient encounters that took place under the roof of the health center, regardless of whether the treated person was a patient of the health center. Only visits with particular types of providers can be included in the dataset.

This summary report consists of the UDS data tables submitted to HRSA and a brief discussion of the significance of some of findings.

Numbers and Socio-Demographic Characteristics of Health Center Patients (Tables 2-4)

HRSA is interested in knowing who is accessing care at FQHCs, and thus requires that information about the patients' residence zip code, age, gender, sexual orientation, race, ethnicity, and insurance source be reported.

HRSA requires FQHC's to submit the number of patients seen at the health center. As Table 2 on the next page shows, SCHC sees patients from a large variety of geographic locations. Note that the zip codes from which 5% or greater patients reside are highlighted in green in Table 1. As shown, patient residences are concentrated primary in five zip codes, 95820 (where SCHC is located), 95823 (Pollock Parkway/ Valley High-North Laguna area), 95824 (Lemon Hill, Fruitridge Manor), 95821 (Arcade), and 95608 (Carmichael). In 2019, 108 patients (1%) reported residing in 95811, where Loaves & Fishes is located. This low number reflects two facts: 1) nurse visits are not reportable under UDS and no other providers are currently stationed at the Loaves & Fishes site; and 2) many patients triaged at Loves & Fishes are sent to the nearest urgent care facility/ED or their own primary care provider (which is often not SCHC).

Table 2: Patient Residence by ZIP Code

January 1, 2019 to December 31, 2019

ZIP Code	Number of Patients Seen by Payment (Insurance) Type					% of All Patients Seen
	None/ Uninsured *	Medicaid / CHIP / Other Public	Medicare	Private	Total Patients	
95820	276	786	50		1,112	10.2%
95823	406	621	43	1	1,071	9.9%
95824	302	656	23		981	9.0%
95821	69	810	9		888	8.2%
95608	31	578	3		612	5.6%
95825	76	427	9		512	4.7%
95828	159	273	31		463	4.3%
95660	76	345	5		426	3.9%
95670	95	239	11		345	3.2%
95815	153	173	13		339	3.1%
95822	133	180	17		330	3.0%
95838	151	133	12		296	2.7%
95842	47	241	5		293	2.7%
95817	27	170	21		218	2.0%
95841	28	164	4		196	1.8%
95833	72	108	6		186	1.7%
95826	26	147	8		181	1.7%
95758	27	114	6		147	1.4%
95610	52	88	4		144	1.3%
95864	14	116	4		134	1.2%
95832	49	73	4		126	1.2%
95843	30	82	3		115	1.1%
95831	20	84	7		111	1.0%
95624	26	74	10		110	1.0%
95827	24	83	2		109	1.0%
95811	6	86	15	1	108	1.0%
95834	40	63	3		106	1.0%
95757	13	86	5		104	1.0%
95812	21	71	1		93	0.9%
95829	16	70	3		89	0.8%
95835	17	66	4		87	0.8%
95621	23	56	3		82	0.8%
95818	12	59	10		81	0.7%
95673	28	35	2		65	0.6%
95628	10	53	1		64	0.6%
95632	32	26	2		60	0.6%
95662	12	29	4		45	0.4%
95814	4	30	10		44	0.4%
95630	17	20	2		39	0.4%
95816	5	28	3		36	0.3%
95819		26	1		27	0.2%
95991		25			25	0.2%
95693	13	8			21	0.2%
95615	16	2			18	0.2%
95678	1	15	1		17	0.2%
95690	13	3			16	0.1%
95605		15			15	0.1%
95626	3	9	2		14	0.1%
95691	1	12	1		14	0.1%
95663		12			12	0.1%
95742	2	10			12	0.1%
95747	1	10			11	0.1%
Other ZIP Codes	24	96	3		123	1.1%
Unknown						0.0%
Total	2,699	7,786	386	2	10,873	100.0%

*Includes Healthy Partners

In 2019, over half of patients seen at SCHC were women (55.1% vs. 44.9% for men; see Table 3a). Just over a quarter (26.9%) of patients seen in 2019 were less than 19 years of age; 11.4% were aged 19-29 years; 57.4% were 30-64 years; and 3.8% were 65 years of age or older. This last statistic reflects the insurance contracts SCHC has, with few Medicare patients.

Table 3A: Patients by Age and by Sex Assigned at Birth
January 1, 2019 to December 31, 2019

Line	Age Groups	Number of Patients by Gender			% of Patients by Age
		Male	Female	All	
1	Under age 1	188	159	347	3.2%
2	Age 1	126	101	227	2.1%
3	Age 2	97	114	211	1.9%
4	Age 3	96	93	189	1.7%
5	Age 4	111	89	200	1.8%
6	Age 5	98	92	190	1.7%
7	Age 6	91	94	185	1.7%
8	Age 7	69	82	151	1.4%
9	Age 8	75	76	151	1.4%
10	Age 9	78	55	133	1.2%
11	Age 10	100	77	177	1.6%
12	Age 11	81	57	138	1.3%
13	Age 12	57	61	118	1.1%
14	Age 13	52	57	109	1.0%
15	Age 14	53	61	114	1.0%
16	Age 15	64	38	102	0.9%
17	Age 16	42	53	95	0.9%
18	Age 17	42	47	89	0.8%
19	Age 18	37	35	72	0.7%
20	Age 19	39	56	95	0.9%
21	Age 20	34	55	89	0.8%
22	Age 21	39	61	100	0.9%
23	Age 22	33	55	88	0.8%
24	Age 23	36	84	120	1.1%
25	Age 24	36	61	97	0.9%
26	Ages 25–29	238	415	653	6.0%
27	Ages 30–34	376	568	944	8.7%
28	Ages 35–39	462	692	1,154	10.6%
29	Ages 40–44	414	653	1,067	9.8%
30	Ages 45–49	385	542	927	8.5%
31	Ages 50–54	369	410	779	7.2%
32	Ages 55–59	369	381	750	6.9%
33	Ages 60–64	303	302	605	5.6%
34	Ages 65–69	121	138	259	2.4%
35	Ages 70–74	45	38	83	0.8%
36	Ages 75–79	13	23	36	0.3%
37	Ages 80–84	8	8	16	0.1%
38	Age 85 and over	7	6	13	0.1%
39	Total	4,884	5,989	10,873	100.0%

HRSA requires that race and ethnicity be reported according to federal government standards, which define race as a socially-constructed category based primary on skin color and origin while ethnicity is defined as a socially-constructed category based primarily on language and culture. As seen in Table 3B, more than half of patients self-disclosed as of Non-Hispanic/Latino ethnicity. In addition, approximately a

third of patients self-described as White, over a quarter as Asian, under 10% as Black/African American, less than 1% as Native Hawaiian or Other Pacific Islander, and less than 1% of more than one race. However, lack of reporting of race was an issue, with more than a quarter of patients did not self-identify with one of the categories. It seems that many Latino patients did not identify a race in addition to this ethnic identity.

Over two-thirds of patients seen at SCHC in 2019 were best served in a language other than English. This highlights the need for interpretation capacity at the health center.

The figures showing self-disclosed gender orientation revealed the same problem as discussed concerning race – a large percentage of patients (26.3%) did not self-report any category. Over two-thirds self-described as straight, and less than 1% self-described as either lesbian or gay or as bisexual.

In terms of gender identity, 44.7% self-reported as male, 55.0% as female, and 0.1% each as female (male to female transgendered) and male (female to male transgendered).

Due to challenges in patient reporting demographic characteristics that SCHC is required to report to HRSA, the processes for obtaining this information are being revised and staff retrained in the importance of knowing this information for quality health care. Sensitive questions such as gender orientation and identity will now be asked by MAs or providers in the exam room, to promote assure of the confidentiality of this information and help explain its relevance to the care received.

Table 3B: Patients by Race and Hispanic or Latino Ethnicity, Linguistic Barriers, and Sexual Orientation
January 1, 2019 to December 31, 2019

Line	Patients by Race	Hispanic/ Latino	Non- Hispanic/ Latino	Unreported/ Refused to Report Ethnicity	Total	Percent of Patients by Race
1	Asian	25	2,953	62	3,040	28.0%
2a	Native Hawaiian	1	14	1	16	0.1%
2b	Other Pacific Islander	4	77	6	87	0.8%
2	Total Native Hawaiian/ Other	5	91	7	103	0.9%
3	Black/African American	23	877	46	946	8.7%
4	American Indian/Alaska Native	7	18	6	31	0.3%
5	White	1,875	1,855	97	3,827	35.2%
6	More than one race	5	26	3	34	0.3%
7	Unreported/Refused to report	2,009	270	613	2,892	26.6%
8	Total Patients	3,949 36.3%	6,090 56.0%	834 7.7%	10,873 100%	100%
Line	Patients by Linguistic Barriers to Care	Number		Percent		
12	Patients Best Served in a Language Other Than English	6,949		69.3%		

Line	Patients by Sexual Orientation	Number	Percent
13	Lesbian or Gay	61	0.6%
14	Straight (not lesbian or gay)	7,509	69.1%
15	Bisexual	48	0.4%
16	Something else	12	0.1%
17	Don't know	2,864	26.3%
18	Chose not to disclose	379	3.5%
19	Total Patients	10,873	100.0%

Line	Patients by Gender Identity	Number	Percent
20	Male	4,860	44.7%
21	Female	5,985	55.0%
22	Transgender Male/ Female-to- Male	16	0.1%
23	Transgender Female/ Male-to- Female	11	0.1%
24	Other	1	0.0%
25	Chose not to disclose	0	0.0%
26	Total Patients	10,873	100%

As shown in Table 4 (below), more than two-thirds (71%) of patients seen at SCHC in 2019 qualified as living under the Federal Poverty Line (FPL).

Table 4: Selected Patient Characteristics: Income, Health Insurance, and Special Populations

January 1, 2019 to December 31, 2019

Line	Income as Percent of Poverty	Number of Patients	Percent of Patients
1	100% and below	7,754	71.3%
2	101–150%	402	3.7%
3	151–200%	94	0.9%
4	Over 200%	2,565	23.6%
5	Unknown	58	0.5%
6	TOTAL	10,873	100%

As shown in the remainder of Table 4 (on the next page), over-two thirds of patients had some form of MediCal. The majority of these were in fee-for-service programs (including the Refugee Health Assistance Program). Most patients reporting as having no insurance were enrolled in the County's Healthy Partners program.

HRSA requires reporting on "special populations" related to the grant designation each FQHC holds. SCHC has an "h" designation as a homeless care site and also an "e" designation to treat low income patients. The location of SCHC is within the distance HRSA specifies as serving individuals living in public housing, so while many patients do not live in such housing, all are counted under that designation. The most important information in this section of Table 4 is the low number and percentage of homeless patients served by SCHC in 2019 – 576 patients, 5.3% of all patients served. The UDS team investigated this number more carefully and found that two issues may be at play. First, many patients are skipping the homeless question, which involves a series of check boxes. We think a significant number of homeless patients may provide a mailing address, rather than a residential address when they are unhoused. This would lead to an undercount of homeless patients. Staff training and revised forms should help fix this problem. The second reason for a low number and percentage of homeless patients is likely due to the fact that the homeless outreach site at Loaves and Fishes is staffed only with nurses (whose encounters cannot be counted under UDS) and the policy changed in 2019 to send patients to their primary care provider (providing transportation) rather than to SCHC for care.

Table 4: Selected Patient Characteristics: Income, Health Insurance, and Special Populations, CONTNUED

January 1, 2019 to December 31, 2019

Line	Principal Third-Party Medical Insurance	0-17 years old	18 and older	Total Patients	Percent of Patients
7	None/Uninsured	39	2,660	2,699	24.8%
8a	Medicaid (Title XIX)	2,887	4,899	7,786	71.6%
8b	CHIP Medicaid			-	0.0%
8	Total Medicaid	2,887	4,899	7,786	71.6%
9a	Dually Eligible (Medicare and Medicaid)		342	342	3.1%
9	Medicare (Inclusive of dually eligible and other Title XVIII)		386	386	3.6%
10a	Other Public Insurance (Non-CHIP) (specify)			-	0.0%
10b	Other Public Insurance CHIP			-	0.0%
10	Total Public Insurance	0	0	-	0.0%
11	Private Insurance		2	2	0.0%
12	TOTAL	2,926	7,947	10,873	100.0%

Line	Managed Care Utilization	Medicaid	Medicare	Other Public Including Non-Medicaid CHIP	Private	TOTAL
13a	Capitated Member Months	32,605				32,605
13b	Fee-for-service Member Months	47,599				47,599
13c	Total Member Months	80,204	0	0	0	80,204

Line	Special Populations	Number of Patients	Percent of Patients
14	Migratory	185	1.7%
15	Seasonal	4	0.0%
16	Total Agricultural Workers or Dependents)	189	1.7%
17	Homeless	314	2.9%
18	Transitional	11	0.1%
19	Doubling Up	213	2.0%
20	Street	34	0.3%
21	Permanent Supportive Housing	3	0.0%
21	Other	1	0.0%
22	Unknown	0	0.0%
23	Total Homeless	576	5.3%
24	Total School-Based Health Center Patients	0	0.0%
25	Total Veterans	33	0.3%
26	Total Patients Served at a Health Center Located In or Immediately Accessible to a Public Housing Site	10,873	100%

Clinic Staff and Service Utilization (Table 5)

HRSA requires FQHC's to report who provides health care and supportive services by full-time equivalent (FTE) units. As shown in Table 5 below, in 2019, SCHC employed or contracted with a total of 100.2 FTEs. Of these, 48.8 FTE were clinical staff, 8.8 were clinically enabling staff, and 42.6 nonclinical staff. With this staffing, SCHC conducted 27,814 reportable clinical visits for 10,873 unique patients (10,808 with medical services and 582 with mental health services).

Table 5: Staffing and Utilization
Reporting Period: January 1, 2019, through December 31, 2019

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1	Family Physicians	1.3	4,306		
2	General Practitioners				
3	Internists	4.3	11,589		
4	Obstetrician/Gynecologists				
5	Pediatricians	1.3	4,041		
7	Other Specialty Physicians	0.3	467		
8	Total Physicians (Lines 1–7)	7.1	20,403		
9a	Nurse Practitioners	1.6	5,247		
9b	Physician Assistants				
10	Certified Nurse Midwives				
10a	Total NPs, PAs, and CNMs (Lines 9a–10)	1.6	5,247		
11	Nurses	6.8	860		
12	Other Medical Personnel	25.7			
13	Laboratory Personnel				
14	X-ray Personnel	2.0			
15	Total Medical (Lines 8 + 10a through 14)	43.2	26,510		10,808
16	Dentists				
17	Dental Hygienists				
17a	Dental Therapists				
18	Other Dental Personnel				
19	Total Dental Services (Lines 16–18)	0.0	0		0
20a	Psychiatrists	0.3	740		
20a1	Licensed Clinical Psychologists				
20a2	Licensed Clinical Social Workers	0.4	17		
20b	Other Licensed Mental Health Providers	2.4	547		
20c	Other Mental Health Staff				
20	Total Mental Health (Lines 20a–c)	3.1	1,304		582
21	Substance Use Disorder Services				
22	Other Professional Services (specify _____)				
22a	Ophthalmologists				
22b	Optometrists				
22c	Other Vision Care Staff				
22d	Total Vision Services (Lines 22a–c)	0.0	0		
23	Pharmacy Personnel	2.5			
24	Case Managers				
25	Patient/Community Education Specialists				
26	Outreach Workers	2.3			
27	Transportation Staff				
27a	Eligibility Assistance Workers				
27b	Interpretation Staff	5.7			
27c	Community Health Workers				
28	Other Enabling Services (specify _____)				
29	Total Enabling Services (Lines 24–28)	8.0	0		
29a	Other Programs/Services (specify _____)	0.0			
29b	Quality Improvement Staff	0.8			
30a	Management and Support Staff	9.4			
30b	Fiscal and Billing Staff	4.3			
30c	IT Staff	1.4			
31	Facility Staff	1.0			
32	Patient Support Staff	26.5			
33	Total Facility and Non-Clinical Support Staff (Lines 30a–32)	42.6			
34	Grand Total (Lines 15+19+20+21+22+22d+23+29+29a+29b+33)	100.2	27,814	0	

Patient Health Outcomes (Table 6)

HRSA requires FQHC's to report on the types of conditions treated and numbers of patients with particular diagnoses as part of an examination of the quality of health care delivered. As shown in Table 6A, the most prevalent conditions for SCHC patients are chronic conditions such as diabetes and hypertension, followed by mental health conditions such as depression.

Table 6A: Selected Diagnoses and Services Rendered
Reporting Period: January 1, 2019, through December 31, 2019

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy	Number of Patients with Diagnosis
Selected Infectious and Parasitic Diseases				
1-2	Symptomatic / Asymptomatic HIV	B20, B97.35, O98.7-, Z21	15	9
3	Tuberculosis	A15- through A19-, O98.01	12	7
4	Sexually transmitted infections	A50- through A64- (exclude A63.0)	83	54
4a	Hepatitis B	B16.0 through B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11, O98.4-	104	54
4b	Hepatitis C	B17.10, B17.11, B18.2, B19.20, B19.21	226	125
Selected Diseases of the Respiratory System				
5	Asthma	J45-	868	541
6	Chronic lower respiratory diseases	J40- through J44-, J47-	287	157
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-, D49.3-, N60-, N63-, R92-	225	164
8	Abnormal cervical findings	C53-, C79.82, D06-, R87.61-, R87.629, R87.810, R87.820	88	60
9	Diabetes mellitus	E08- through E13-, O24- (exclude O24.41-)	3,541	1,250
10	Heart disease (selected)	I01-, I02- (exclude I02.9), I20- through I25-, I27-, I28-, I30- through I52-	771	411
11	Hypertension	I10- through I16-	3,578	1,667
12	Contact dermatitis and other eczema	L23- through L25-, L30- (exclude L30.1, L30.3, L30.4, L30.5), L58-	328	258
13	Dehydration	E86-	10	10
14	Exposure to heat or cold	T33-, T34-, T67-, T68-, T69-	5	3
14a	Overweight and obesity	E66-, Z68- (exclude Z68.1, Z68.20 through Z68.24, Z68.51, Z68.52)	2,688	1,973
Selected Childhood Conditions (limited to ages 0 through 17)				
15	Otitis media and Eustachian tube disorders	H65- through H69-	99	78
16	Selected perinatal medical conditions	A33-, P19-, P22- through P29- (exclude P29.3), P35- through P96- (exclude P54-, P91.6-, P92-, P96.81), R78.81, R78.89	62	46
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), R63.3	262	173

As shown in the remainder of Table 6A, the most commonly performed service at SCHC in 2019 was Immunization followed by testing for sexually-transmitted and blood-borne pathogens.

Table 6A: Selected Diagnoses and Services Rendered, CONTINUED

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy	Number of Patients with Diagnosis
Selected Mental Health Conditions and Substance Use Disorders				
18	Alcohol-related disorders	F10-, G62.1, O99.31	219	138
19	Other substance-related disorders (excluding tobacco use disorders)	F11- through F19- (exclude F17-), G62.0, O99.32-	217	145
19a	Tobacco use disorder	F17-, O99.33	417	329
20a	Depression and other mood disorders	F30- through F39-	2,199	1,064
20b	Anxiety disorders, including post-traumatic stress disorder (PTSD)	F06.4, F40- through F42-, F43.0, F43.1-, F93.0	1,300	713
20c	Attention deficit and disruptive behavior disorders	F90- through F91-	105	58
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 F99- (exclude F55-, F84.2, F90-, F91-, F93.0, F98-), O99.34, R45.1, R45.2, R45.5, R45.6, R45.7, R45.81, R45.82, R48.0	948	458
Line	Service Category	Applicable ICD-10-CM Code or CPT-4/II Code	Number of Visits	Number of Patients
Selected Diagnostic Tests/ Screening/ Preventive Services				
21	HIV test	CPT-4: 86689, 86701 through 86703, 87389 through 87391, 87534 through 87539, 87806	2,449	2,382
21a	Hepatitis B test	CPT-4: 86704 through 86707, 87340, 87341, 87350	1,721	1,658
21b	Hepatitis C test	CPT-4: 86803, 86804, 87520 through 87522	424	408
22	Mammogram	CPT-4: 77052, 77057, 77065, 77066, 77067 OR ICD-10: Z12.31	173	167
23	Pap test	CPT-4: 88141 through 88153, 88155, 88164 through 88167, 88174, 88175 OR ICD-10: Z01.41-, Z01.42, Z12.4 (exclude Z01.411 and Z01.419)	927	876
24	Selected immunizations: hepatitis A; haemophilus influenzae B (HiB); pneumococcal; diphtheria; tetanus; pertussis (DTaP) (DTP) (DT); mumps; measles; rubella (MMR); poliovirus; varicella; hepatitis B	CPT-4: 90632, 90633, 90634, 90636, 90643, 90644, 90645, 90646, 90647, 90648, 90669, 90670, 90696, 90697, 90698, 90700, 90701, 90702, 90703, 90704, 90705, 90706, 90707, 90708, 90710, 90712, 90713, 90714, 90715, 90716, 90718, 90720, 90721, 90723, 90730, 90731, 90732, 90740, 90743, 90744, 90745, 90746, 90747, 90748	3,147	2,573

Table 6A: Selected Diagnoses and Services Rendered, CONTINUED

<i>Line</i>	<i>Service Category</i>	<i>Applicable ICD-10-CM Code or CPT-4/II Code</i>	<i>Number of Visits</i>	<i>Number of Patients</i>
24a	Seasonal flu vaccine	CPT-4: 90630, 90653 through 90657, 90661, 90662, 90672, 90673, 90674, 90682, 90685 through 90688, 90749, 90756	2,887	2,691
25	Contraceptive management	ICD-10: Z30-	342	260
26	Health supervision of infant or child (ages 0 through 11)	CPT-4: 99381 through 99383, 99391 through 99393	1,815	1,243
26a	Childhood lead test screening (9 to 72 months)	ICD-10: Z13.88 CPT-4: 83655	268	247
26b	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408, 99409 HCPCS: G0396, G0397, H0050	0	0
26c	Smoke and tobacco use cessation counseling	CPT-4: 99406, 99407 OR HCPCS: S9075 OR CPT-II: 4000F, 4001F, 4004F	0	0
26d	Comprehensive and intermediate eye exams	CPT-4: 92002, 92004, 92012, 92014	0	0
Line	Service Category	Applicable ADA Code	Number of Visits	Number of Patients
Selected Dental Services				
27	Emergency Services	ADA: D9110	0	0
28	Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0171, D0180	0	0
29	Prophylaxis – adult or child	ADA: D1110, D1120	0	0
30	Sealants	ADA: D1351	0	0
31	Fluoride treatment – adult or child	ADA: D1206, D1208 CPT-4: 99188	0	0
32	Restorative services	ADA: D21xx through D29xx	0	0
33	Oral surgery (extractions and other surgical procedures)	ADA: D7xxx	0	0
34	Rehabilitative services (Endo, Perio, Prostho, Ortho)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	0	0

Sources of Codes:

ICD-10-CM (2018) – [National Center for Health Statistics \(NCHS\)](#)

CPT (2018) – [American Medical Association \(AMA\)](#)

Code on Dental Procedures and Nomenclature CDT Code (2018) – 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

HRSA also requires FQHC's to report on certain measures of the quality of care provided. Table 6B (the next 5 pages) shows quality metrics in the areas of prenatal care; childhood immunizations; weight, nutrition and physical activity counseling; interventions for tobacco use; medication for asthma and other chronic conditions; cancer screening; linkage to care for HIV; screening and follow up for depression; and dental sealants for children.

Table 6B: Quality of Care Measures
Reporting Period: January 1, 2019, through December 31, 2019

Section A – Age Categories for Prenatal Care Patients: Demographic Characteristics of Prenatal Care Patients

Line	Age	Number of Patients	Percentage of Patients
1	Less than 15 years		
2	Ages 15–19	2	1.9%
3	Ages 20–24	29	26.9%
4	Ages 25–44	77	71.3%
5	Ages 45 and over		
6	Total Patients (Sum lines 1–5)	108	100%

Section B - Early Entry into Prenatal Care

Line	Early Entry into Prenatal Care	Women Having First Visit with Health Center		Women Having First Visit with Another Provider	
		#	%	#	%
7	First Trimester	41	57.7%	10	27.0%
8	Second Trimester	16	22.5%	16	43.2%
9	Third Trimester	14	19.7%	11	29.7%

Section C - Childhood Immunization Status

Line	Childhood Immunization Status	Total Patients with 2 nd Birthday	Number Charts Sampled or EHR total	Number of Patients Immunized	Percent of Patients Fully Immunized
10	MEASURE: Percentage of children 2 years of age who received age appropriate vaccines by their 2 nd birthday	226	226	32	14.2%

Section D - Cervical Cancer Screening

Line	Cervical Cancer Screening	Total Female Patients Aged 23 through 64	Number Charts Sampled or EHR total	Number of Patients Tested	Percent of Patients Tested
11	MEASURE: Percentage of women 23-64 years of age who were screened for cervical cancer	3,842	3,842	1,743	45.4%

Section E - Weight Assessment and Counseling for Nutrition and Physical Activity of Children and Adolescents

Line	Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	Total Patients Aged 3 through 17	Number Charts Sampled or EHR Total	Number of Patients with Counseling and BMI Documented	Percent of Patients with Counseling and BMI Documented
12	MEASURE: Percentage of patients 3–17 years of age with a BMI percentile <i>and</i> counseling on nutrition <i>and</i> physical activity documented	2,044	2,044	1,557	76.2%

Section F – Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan

Line	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow- Up Plan	Total Patients Aged 18 and Older	Number Charts Sampled or EHR Total	Number of Patients with BMI Charted and Follow-Up Plan Documented as Appropriate	Percent of Patients with BMI Charted and Follow-Up Plan Documented as Appropriate
13	MEASURE: 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	7,346	7,346	4,178	56.9%

Section G – Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Line	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Total Patients Aged 18 and Older	Number Charts Sampled or EHR total	Number Assessed Tobacco User given Intervention	Percent Assessed Tobacco User given Intervention
14a	MEASURE: Percentage of patients aged 18 years of age and older who (1) were screened for tobacco use one or more times within 24 months, <i>and</i> (2) if identified to be a tobacco user received cessation counseling intervention	4,792	4,792	4,260	88.9%

Section H – Use of Appropriate Medications for Asthma

Line	Use of Appropriate Medications for Asthma	Total Patients Aged 5 through 64 with Persistent Asthma	Number Charts Sampled or EHR Total	Number of Patients with Acceptable Plan	Percent of Patients with Acceptable Plan
16	MEASURE: Percentage of patients 5 through 64 years of age identified as having persistent asthma and were appropriately ordered medication	199	199	184	92.5%

Section I - Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

Line	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	Total Patients Aged 21 and Older at High Risk of Cardiovascular Events	Number Charts Sampled or EHR Total	Number of Patients Prescribed or On Statin Therapy	Percent of Patients Prescribed or On Statin Therapy
17a	MEASURE: Percentage of patients 21 years of age and older at high risk of cardiovascular events who were prescribed or were on statin therapy	1,246	1,246	812	65.2%

Section J - Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet

Line	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	Charts Sampled or EHR Total	Number of Patients with Documentation of Aspirin or Other Antiplatelet Therapy	Percent of Patients with Documentation of Aspirin or Other Antiplatelet Therapy
18	MEASURE: 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	257	257	214	83.3%

Section K - Colorectal Cancer Screening

Line	Colorectal Cancer Screening	Total Patients Aged 50 through 75	Charts Sampled or EHR Total	Number of Patients with Appropriate Screening for Colorectal Cancer	Percent of Patients with Appropriate Screening for Colorectal Cancer
19	MEASURE: Percentage of patients 50 through 75 years of age who had appropriate screening for colorectal cancer	2,285	2,285	730	31.9%

Section L - HIV Linkage to Care

Line	HIV Linkage to Care	Total Patients First Diagnosed with HIV	Charts Sampled or EHR Total	Number of Patients Seen Within 90 Days of First Diagnosis of HIV	Percent of Patients Seen Within 90 Days of First Diagnosis of HIV
20	MEASURE: 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	1	1	0	0%

Section M – Preventive Care and Screening: Screening for Depression and Follow-Up Plan

Line	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Total Patients Aged 12 and Older	Charts Sampled or EHR Total	Number of Patients Screened for Depression with Follow-Up Plan	Percent of Patients Screened for Depression with Follow-Up Plan
21	MEASURE: Percentage of patients 12 years of age and older who were (1) screened	7,490	7,490	4,065	54.3%

Section N – Dental Sealants for Children between 6–9 Years

Line	Dental Sealants for Children between 6–9 Years	Total Patients Aged 6 through 9 at Moderate to High Risk for Caries	Charts Sampled or EHR Total	Number of Patients with Sealants to First Molars	Percent of Patients with Sealants to First Molars
22	MEASURE: 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	0	0	0	0%

Table 7 (next 3 pages) takes a closer look at racial and ethnic disparities in the birthweight as well as controlling high blood pressure for hypertensives and blood sugar for diabetics seen at SCHC in 2019. Due to small numbers of patients who gave birth, it is hard to detect differences by race in birthweight. However, there do not appear to be significant ethnic differences. In 2019, hypertensive patients self-identifying as Hispanic or Latino were slightly more likely to have their blood pressure under control, while diabetic patients self-identifying as Hispanic or Latino as slightly less likely to have their blood sugar under control.

Table 7: Health Outcomes and Disparities
Reporting Period: January 1, 2019, through December 31, 2019

Section A: Deliveries and Birth Weight

	Race and Ethnicity	Prenatal Care Patients Who Delivered During the Year	Live Births: <1500 grams	Live Births: 1500–2499 grams	Live Births: ≥2500 grams
Hispanic/Latino					
	Asian	0	0	0	0
	Native Hawaiian	0	0	0	0
	Other Pacific Islander	0	0	0	0
	Black/African American	1	0	0	1
	American Indian/Alaska Native	0	0	0	0
	White	3	0	0	4
	More than One Race	0	0	0	0
	Unreported/Refused to Report Race	9	0	1	8
	<i>Subtotal Hispanic/Latino</i>	<i>13</i>	<i>0</i>	<i>1</i>	<i>13</i>
		<i>100%</i>	<i>0%</i>	<i>7.7%</i>	<i>100%</i>
Non-Hispanic/Latino					
	Asian	40	0	1	39
	Native Hawaiian	0	0	0	0
	Other Pacific Islander	0	0	0	0
	Black/African American	3	0	1	2
	American Indian/Alaska Native	0	0	0	0
	White	12	0	1	11
	More than One Race	0	0	0	0
	Unreported/Refused to Report Race	1	0	0	1
	<i>Subtotal Non-Hispanic/Latino</i>	<i>56</i>	<i>0</i>	<i>3</i>	<i>53</i>
		<i>100%</i>	<i>0%</i>	<i>5.4%</i>	<i>94.6%</i>
Unreported/Refused to Report Race and Ethnicity					
	Unreported/Refused to Report Race and Ethnicity	3	2	1	1
		<i>100%</i>	<i>66.7%</i>	<i>33.3%</i>	<i>33.3%</i>
	Total	72	2	5	67
		100%	2.8%	6.9%	95.8%

Section B: Controlling High Blood Pressure

	Race and Ethnicity	Total Patients 18 through 85 Years of Age with Hypertension	Charts Sampled or EHR Total	Number of Patients with Hypertension Controlled	Percent of Patients with Hypertension Controlled
Hispanic/Latino					
	Asian	2	2	2	100.0%
	Native Hawaiian	0	0	0	
	Other Pacific Islander	0	0	0	
	Black/African American	4	4	2	50.0%
	American Indian/Alaska Native	2	2	1	50.0%
	White	230	230	142	61.7%
	More than One Race	0	0	0	
	Unreported/Refused to Report Race	439	439	291	66.3%
	<i>Subtotal Hispanic/Latino</i>	677	677	438	64.7%
Non-Hispanic/Latino					
	Asian	144	144	101	70.1%
	Native Hawaiian	5	5	3	60.0%
	Other Pacific Islander	26	26	14	53.8%
	Black/African American	247	247	145	58.7%
	American Indian/Alaska Native	2	2	2	100.0%
	White	260	260	156	60.0%
	More than One Race	4	4	4	100.0%
	Unreported/Refused to Report Race	43	43	30	69.8%
	<i>Subtotal Non-Hispanic/Latino</i>	731	731	455	62.2%
Unreported/Refused to Report Race and Ethnicity					
	Unreported/Refused to Report Race and Ethnicity	110	110	70	63.6%
	Total	1,518	1,518	963	63.4%

Section C: Diabetes: Hemoglobin A1c Poor Control

	Race and Ethnicity	Total Patients 18 through 75 Years of Age with Diabetes	Charts Sampled or EHR Total	Patients with HbA1c >9% or No Test During Year	Percentage Not in Compliance
Hispanic/Latino					
	Asian	3	3	1	33.3%
	Native Hawaiian	0	0	0	
	Other Pacific Islander	0	0	0	
	Black/African American	3	3	1	33.3%
	American Indian/ Alaska Native	3	3	2	66.7%
	White	288	288	106	36.8%
	More than One Race	1	1	1	100.0%
	Unreported/Refused to Report Race	458	458	176	38.4%
	<i>Subtotal Hispanic/Latino</i>	<i>756</i>	<i>756</i>	<i>287</i>	<i>38.0%</i>
Non-Hispanic/Latino					
	Asian	141	141	39	27.7%
	Native Hawaiian	6	6	4	66.7%
	Other Pacific Islander	27	27	8	29.6%
	Black/African American	109	109	46	42.2%
	American Indian/ Alaska Native	2	2	1	50.0%
	White	144	144	51	35.4%
	More than One Race	1	1	0	0%
	Unreported/Refused to Report Race	36	36	11	30.6%
	<i>Subtotal Non-Hispanic/Latino</i>	<i>466</i>	<i>466</i>	<i>160</i>	<i>34.3%</i>
Unreported/Refused to Report Race and Ethnicity					
	Unreported/Refused to Report Race and Ethnicity	72	72	25	34.7%
	Total	1,294	1,294	472	36.5%

Finances (Tables 8-9)

HRSA requires FQHC's to report on expenditures (see Table 8A) and revenue (see Table 9D and 9E).

Table 8A: Financial Costs

Reporting Period: January 1, 2019, through December 31, 2019

Line	Cost Center	Accrued Cost	Allocation of Facility and Non-Clinical Support Services	Total Cost After Allocation of Facility and Non-Clinical Support Services
Financial Costs of Medical Care				
1	Medical Staff	6,192,479	5,357,797	11,550,276
2	Lab and X-ray	477,788	686,050	1,163,838
3	Medical/Other Direct	0	0	0
4	Total Medical Care Services	6,670,267	6,043,847	12,714,114
Financial Costs of Other Clinical Services				
5	Dental			0
6	Mental Health	303,016	262,173	565,189
7	Substance Use Disorder			0
8a	Pharmacy not including pharmaceuticals	618,701	535,307	1,154,008
8b	Pharmaceuticals	315,317		315,317
9	Other Professional (Specify:)			0
9a	Vision			0
10	Total Other Clinical Services	1,237,034	797,480	2,034,514
Financial Costs of Enabling and Other Services				
11a	Case Management			0
11b	Transportation			0
11c	Outreach	455,765		455,765
11d	Patient and Community Education			0
11e	Eligibility Assistance			0
11f	Interpretation Services	756,615		756,615
11g	Other Enabling Services (Specify:)			0
11h	Community Health Workers			0
11	Total Enabling Services Cost	1,212,380	1,050,109	1,212,380
12	Other Related Services (Specify:)			0
12a	Quality Improvement	116,276	100,603	216,879
13	Total Enabling and Other Services	1,328,656	1,150,712	2,479,368
Facility and Non-Clinical Support Services and Totals				
14	Facility	1,422,616		
15	Non-Clinical Support Services	6,569,423		
16	Total Facility and Non-Clinical	7,992,039		
17	Total Accrued Costs	17,227,996		17,227,996
18	Value of Donated Facilities, Services, and Supplies (specify:)			0
19	Total with Donations			17,227,996

Table 9D: Patient Related Revenue

Reporting Period: January 1, 2019, through December 31, 2019

Line	Payer Category	Full Charges This Period	Amount Collected This Period	Retroactive, Settlements, Receipts, and Paybacks (c)				Allowances	Sliding Fee Discounts	Bad Debt Write Off
				Collection of Reconciliation / Wrap-Around Current Year	Collection of Reconciliation / Wrap-Around Previous Years	Collection of Other Payments: P4P, Risk Pools, etc.	Penalty/Payback			
1	Medicaid Non-Managed Care	1,583,764	654,817					785,331		
2a	Medicaid Managed Care (capitated)	1,028,474	695,452		88,127	8,806		333,022		
2b	Medicaid Managed Care (fee-for-service)	2,510,227	2,112,710		267,582	26,737		1,244,730		
3	Total Medicaid	5,122,465	3,462,979	0	355,709	35,543	0	2,363,083		
4	Medicare Non-Managed Care	290,638	195,149					160,222		
5a	Medicare Managed Care (capitated)									
5b	Medicare Managed Care (fee-for-service)									
6	Total Medicare	290,638	195,149	0	0	0	0	160,222		
7	Other Public, including Non-Medicaid CHIP (Non-Managed Care)									
8a	Other Public, including Non-Medicaid CHIP (Managed Care Capitated)									
8b	Other Public, including Non-Medicaid CHIP (Managed Care fee-for-service)									
9	Total Other Public	0	0	0	0	0	0	0		
10	Private Non-Managed Care	2,614						4,211		
11a	Private Managed Care (capitated)									
11b	Private Managed Care (fee-for-service)									
12	Total Private	2,614	0			0	0	4,211		
13	Self-pay	1,730,013	116,483						0	
14	TOTAL	7,145,730	3,774,611	0	355,709	35,543	0	2,527,516	0	0

Table 9E: Other Revenues

Reporting Period: January 1, 2019, through December 31, 2019

Line	Source	Amount
BPHC Grants (Enter Amount Drawn Down – Consistent with PMS 272)		
1a	Migrant Health Center	
1b	Community Health Center	
1c	Health Care for the Homeless	1,126,516
1e	Public Housing Primary Care	
1g	Total Health Center	1,126,516
1j	Capital Improvement Program Grants	
1k	Capital Development Grants, including School-Based Health Center Capital Grants	
1	Total BPHC Grants	1,126,516
Other Federal Grants		
2	Ryan White Part C HIV Early Intervention	
3	Other Federal Grants (specify:)	
3a	Medicare and Medicaid EHR Incentive Payments for Eligible Providers	
5	Total Other Federal Grants	0
Non-Federal Grants or Contracts		
6	State Government Grants and Contracts (specify: Refugee Grants)	1,101,200
6a	State/Local Indigent Care Programs (specify: Realignment funds used to subsidize the cost of care of the uninsured)	8,442,986
7	Local Government Grants and Contracts (specify:)	
8	Foundation/Private Grants and Contracts (specify:)	
9	Total Non-Federal Grants and Contracts	9,544,186
10	Other Revenue (non-patient related revenue not reported elsewhere) (specify: Reimbursement by other programs/department for cost of staff and other services, miscellaneous fees received for copy of documents)	258,236
11	Total Revenue	10,928,938