

**Sacramento County Department of Health Services  
Health Center Co-Applicant Board (CAB)  
Special UDS Report Meeting**

**Meeting Agenda**

February 14, 2023 / 9:30-10:30 AM

**Meeting Location**

Either by Zoom: To see/share documents on the screen, go to Join ZoomGov Meeting  
<https://www.zoomgov.com/j/1616971267?pwd=RWtxL2V2b1p6SmxSTXM5dVRqVjRXUT09>

Meeting ID: 161 697 1267

Passcode: 290525

One tap mobile

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Find your local number: <https://www.zoomgov.com/u/adhYypJAWA>

Or *in Person*: Community Room 2020 at 4600 Broadway / Sacramento, CA

- The Community Room 2020 is easily accessible without staff/security needing to let you in. It is at the top of the back stairs (near the Broadway entrance, not the garage entrance).
- Please RSVP at least 24 hours in advance to Dr. Hutchins at [HutchinsS@saccounty.gov](mailto:HutchinsS@saccounty.gov) for staff to prepare you a packet if you wish to attend in person.
- Facemasks are still required in the Primary Care Center.

Topic
Opening Remarks – <i>Jan Winbigler, Chair – 3 minutes</i> <ul style="list-style-type: none"> <li>• Roll Call</li> </ul>
UDS Report – <i>Dr. Hutchins, Diana Barney, Rachel Callan, Robert Rushing – 40 minutes</i> <ul style="list-style-type: none"> <li>• Presentation of highlights of UDS report</li> <li>• Questions and discussion of report</li> <li>• *Vote on report submission</li> </ul>
Other Urgent Items – <i>Group – 10 min</i> <ul style="list-style-type: none"> <li>• TBD</li> </ul>
Public Comment – <i>Suhmer Fryer, Vice-Chair – 5 min</i>
Closing Remarks and Adjourn – <i>Jan Winbigler, Chair – 2 min</i>

Next Meeting: February 17, 2023 / 9:30-11:00 AM

\*Items that require a quorum and vote.

The Co-Applicant Board welcomes and encourages participation in the meetings.

Matters under the jurisdiction of the Co-Applicant Board and not on the posted agenda may be addressed by the public following completion of regular business.

The agenda is posted on-line for your convenience at <https://dhs.saccounty.net/PRI/Pages/Health%20Center/Co-Applicant%20Board/County-Health-Center-Co-Applicant-Board.aspx>

**Sacramento County Department of Health Services**  
**Health Center Co-Applicant Board (CAB)**  
**Special UDS Report Meeting**

Per the Brown Act, those attending a CAB meeting through teleconferencing are required to disclose the location from which they are calling. It is illegal to call while driving. There is a cap on how many CAB members can attend from outside Sacramento County.

Meeting facilities are accessible to persons with disabilities. Requests for interpreting services, assistive listening devices or other considerations should be submitted by contacting the Primary Health Division at (916) 875-5701 (voice) and CA Relay Services 711 (for the hearing impaired), no later than five working days prior to the meeting.

**Patients by ZIP Code**

Reporting Period: January 1, 2022 through December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

ZIP Code (a)	None/Uninsured (b)	Medicaid / CHIP/ Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
95820	209	1201	72	4	1,486
95823	326	1036	55		1,417
95824	233	1090	53	4	1,380
95821	85	758	9		852
95825	143	498	12		653
95828	131	475	44		650
95608	64	569	5		638
95670	151	413	19		583
95842	94	432	5		531
95815	140	371	16		527
95660	92	407	9		508
95822	100	313	30		443
95838	138	236	12		386
95843	44	279	3		326
95826	35	247	18		300
95811	46	195	54	1	296
95758	36	240	10		286
95841	27	241	7		275
95817	27	222	24		273
95833	54	146	15		215
95757	10	195	4		209
95834	47	133	5		185
95610	54	129	1		184
95624	26	149	8		183
95621	27	134	4		165
95831	26	129	8		163
95827	23	132	8		163
95832	42	103	6		151
95829	14	121	8		143
95835	25	92	11		128
95628	18	91	1	1	111
95747	18	86	1		105
95818	8	84	12		104
95864	14	83	4		101
95673	26	62	5	1	94
95630	19	66	4		89
95632	39	44	3		86
95814	11	47	14		72
95816	3	54	8		65
95691	9	50	1		60
95662	12	27	3		42
95605		42			42
95819	2	34	4		40
95765	2	38			40
95812	4	23	5		32
95742	6	21	2		29
95678	1	27			28
95991		26			26
95626	6	15	2		23
95661		22			22
95961	5	15			20
95641	8	10	1		19
95690	11	8			19
95693	7	8	1		16
95993		16			16
95655	2	12	2		16
95677	3	9			12
95638	5	6			11
94571	7	4			11
Other Zip Codes	48	209	8	2	267
Unknown Residence	0	0	0	0	0
<b>Total</b>	<b>2,763</b>	<b>11,925</b>	<b>616</b>	<b>13</b>	<b>15,317</b>

**Table 3A: Patients by Age and by Sex Assigned at Birth**

Reporting Period: January 1, 2022 through December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH &amp; HUMAN SERVICES

Line	Age Groups	Male Patients (a)	Female Patients (b)
1	Under Age 1	179	125
2	Age 1	169	153
3	Age 2	157	142
4	Age 3	172	151
5	Age 4	131	156
6	Age 5	146	129
7	Age 6	135	128
8	Age 7	142	126
9	Age 8	156	113
10	Age 9	130	117
11	Age 10	123	128
12	Age 11	152	139
13	Age 12	133	138
14	Age 13	113	130
15	Age 14	112	119
16	Age 15	119	109
17	Age 16	88	126
18	Age 17	104	105
19	Age 18	87	78
20	Age 19	51	82
21	Age 20	55	100
22	Age 21	59	94
23	Age 22	56	98
24	Age 23	52	111
25	Age 24	55	97
26	Ages 25-29	356	614
27	Ages 30-34	494	662
28	Ages 35-39	495	752
29	Ages 40-44	509	799
30	Ages 45-49	477	693
31	Ages 50-54	424	571
32	Ages 55-59	407	508
33	Ages 60-64	377	421
34	Ages 65-69	238	292
35	Ages 70-74	101	111
36	Ages 75-79	33	46
37	Ages 80-84	15	28
38	Ages 85 and over	10	14
39	<b>Total Patients (Sum of Lines 1-38)</b>	<b>6,812</b>	<b>8,505</b>

**Table 3B: Demographic Characteristics**

Reporting Period: January 1, 2022 through December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

Line	Patients by Race	Patients by Race and Hispanic or Latino/a Ethnicity			
		Hispanic or Latino/a (a)	Non-Hispanic or Latino/a (b)	Unreported/Chose Not to Disclose Ethnicity (c)	Total (d) (Sums Columns a+b+c)
1	Asian	23	4,795		<b>4,818</b>
2a	Native Hawaiian	1	17		<b>18</b>
2b	Other Pacific Islander	7	118		<b>125</b>
2	Total Hawaiian/Other Pacific Islander (Sum Lines 2a + 2b)	<b>8</b>	<b>135</b>		<b>143</b>
3	Black/African American	42	1,268		<b>1,310</b>
4	American Indian/Alaska Native	24	57		<b>81</b>
5	White	4,607	3,164		<b>7,771</b>
6	More than one race	21	125		<b>146</b>
7	Unreported/Chose not to disclose race	382	306	360	<b>1,048</b>
8	<b>Total Patients</b> (Sum of Lines 1 + 2 + 3 to 7)	5,107	9,850	360	15,317
<b>Line</b>	<b>Patients Best Served in a Language Other than English</b>	<b>Number (a)</b>			
12	Patients Best Served in a Language Other than English				9,646

Line	Patients by Sexual Orientation	Number (a)
13	Lesbian or Gay	74
14	Heterosexual (or straight)	10,115
15	Bisexual	75
16	Other	35
17	Don't know	203
18	Chose not to disclose	517
18a	Unknown	4,298
19	<b>Total Patients</b> (Sum of Lines 13 to 18a)	<b>15,317</b>

Line	Patients by Gender Identity	Number (a)
20	Male	4,926
21	Female	6,720
22	Transgender Man/Transgender Male/Transmasculine	7
23	Transgender Woman/Transgender Female/Transfeminine	12
24	Other	17
25	Chose not to disclose	47
25a	Unknown	3,588
26	<b>Total Patients</b> (Sum of Lines 20 to 25a)	<b>15,317</b>

**Table 4: Selected Patient Characteristics**

Reporting Period: January 1, 2022 through December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

Line	Characteristic	Number of Patients (a)				
<b>Income as Percent of Poverty Guideline</b>						
1	100% and below	14,169				
2	101 - 150%	523				
3	151 - 200%	177				
4	Over 200%	134				
5	Unknown	314				
6	<b>Total (Sum of Lines 1-5)</b>	15,317				
<b>Primary Third Party Medical Insurance</b>		<b>0-17 Years Old (a)</b>		<b>18 and Older (b)</b>		
7	<b>None/Uninsured</b>	514		2,249		
8a	Medicaid (Title XIX)	4,280		7,645		
8b	CHIP Medicaid	0		0		
8	<b>Total Medicaid (Sum lines 8a+8b)</b>	<b>4,280</b>		<b>7,645</b>		
9a	Dually Eligible (Medicare and Medicaid)	0		575		
9	<b>Medicare (Inclusive of dually eligible and other Title XVIII</b>	0		616		
10a	Other Public Insurance (Non-CHIP) (specify _____)	0		0		
10b	Other Public Insurance CHIP	0		0		
10	<b>Total Public Insurance (Sum lines 10a+10b)</b>	<b>0</b>		<b>0</b>		
11	<b>Private Insurance</b>	1		12		
12	<b>Total (Sum of Lines 7+8+9+10+11)</b>	4,795		10,522		
<b>Managed Care Utilization</b>						
S.No	Managed Care Utilization	Medicaid (a)	Medicare (b)	Other Public Including Non-Medicaid CHIP (c)	Private (d)	Total (e)
13a	Capitated Member Months	168,078	1,008	0	0	169,086
13b	Fee-for-service Member Months	0	0	0	0	0
13c	<b>Total Member Months (Sum of Lines 13a+13b)</b>	<b>168,078</b>	<b>1,008</b>	<b>0</b>	<b>0</b>	<b>169,086</b>
<b>S.No Special Populations</b>						<b>Number of Patients (a)</b>
14	Migratory (330g awardees only)					
15	Seasonal (330g awardees only)					
16	<b>Total Agricultural Workers or Dependents (All health centers report this line)</b>					154
17	Homeless Shelter (330h awardees only)					233
18	Transitional (330h awardees only)					109
19	Doubling Up (330h awardees only)					713
20	Street (330h awardees only)					268
21a	Permanent Supportive Housing (330h awardees only)					33
21	Other (330h awardees only)					0
22	Unknown (330h awardees only)					0
23	<b>Total Homeless (All health centers report this line)</b>					1,356
24	<b>Total School-Based Service Site Patients (All health centers report this line)</b>					0
25	<b>Total Veterans (All health centers report this line)</b>					50
26	<b>Total Patients Served at a Health Center Located In or Immediately Accessible to a Public Housing Site (All health centers report this line)</b>					14,855

**Table 5: Staffing and Utilization**

Reporting Period: January 1, 2022 through December 31, 2022  
 HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1	Family Physicians	1.7	1,825	2,764	
2	General Practitioners	0.0	0	0	
3	Internists	5.7	12,085	4,659	
4	Obstetrician/Gynecologists	0.0	0	0	
5	Pediatricians	1.7	4,551	564	
7	Other Specialty Physicians	0.5	464	17	
8	<b>Total Physicians (Sum lines 1-7)</b>	<b>9.6</b>	<b>18,925</b>	<b>8,004</b>	
9a	Nurse Practitioners	2.7	3,936	2,398	
9b	Physician Assistants	0.3	432	104	
10	Certified Nurse Midwives	0.0	0	0	
10a	<b>Total NP, PA, and CNMs (Sum lines 9a - 10)</b>	<b>3.0</b>	<b>4,368</b>	<b>2,502</b>	
11	Nurses	13.9	495	3	
12	Other Medical Personnel	27.9			
13	Laboratory Personnel	0.0			
14	X-Ray Personnel	2.3			
15	<b>Total Medical Care Services (Sum lines 8+10a through 14)</b>	<b>56.7</b>	<b>23,788</b>	<b>10,509</b>	<b>14,832</b>
16	Dentists	0.0	0	0	
17	Dental Hygienists	0.2	153	0	
17a	Dental Therapists	0.0	0	0	
18	Other Dental Personnel	0.0			
19	<b>Total Dental Services (Sum lines 16-18)</b>	<b>0.2</b>	<b>153</b>	<b>0</b>	<b>149</b>
20a	Psychiatrists	0.3	622	287	
20a1	Licensed Clinical Psychologists	1.0	184	0	
20a2	Licensed Clinical Social Workers	8.4	2,112	17	
20b	Other Licensed Mental Health Providers	18.7	3,501	331	
20c	Other Mental Health Personnel	0.0	0	0	
20	<b>Total Mental Health Services (Sum lines 20a-c)</b>	<b>28.4</b>	<b>6,419</b>	<b>635</b>	<b>989</b>
21	<b>Substance Use Disorder Services</b>	0.0	0	0	0
22	<b>Other Professional Services (specify __)</b>	0.0	0	0	0
22a	Ophthalmologists	0.0	0	0	
22b	Optometrists	0.0	0	0	
22c	Other Vision Care Personnel	0.0			
22d	<b>Total Vision Services (Sum lines 22a-c)</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
23	<b>Pharmacy Personnel</b>	5.6			
24	Case Managers	0.0	0	0	
25	Patient and Community Education Specialists	0.0	0	0	
26	Outreach Workers	2.0			
27	Transportation Personnel	0.0			
27a	Eligibility Assistance Workers	2.0			
27b	Interpretation Personnel	2.0			
27c	Community Health Workers	0.0			
28	Other Enabling Services (specify __)	0.0			
29	<b>Total Enabling Services (Lines 24-28)</b>	<b>6.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
29a	<b>Other Programs and Services (specify __)</b>	0.0			
29b	<b>Quality Improvement Personnel</b>	4.3			
30a	Management and Support Personnel	4.0			
30b	Fiscal and Billing Personnel	5.6			
30c	IT Personnel	0.0			
31	Facility Personnel	1.0			
32	Patient Support Personnel	33.5			
33	<b>Total Facility and Non-Clinical Support Personnel (Lines 30a - 32)</b>	<b>44.1</b>			
34	<b>Grand Total (Lines 15+19+20+21+22+22d+23+29+29a+29b+33)</b>	<b>145.3</b>	<b>30,360</b>	<b>11,144</b>	

**Table 5: Selected Service Detail Addendum**

Reporting Period: January 1, 2022 through December 31, 2022  
 HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

Line	Personnel by Major Service Category: Mental Health Service Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a01	Physicians (other than Psychiatrists)	119	1,965	663	1,993
20a02	Nurse Practitioners	10	419	230	529
20a03	Physician Assistants	1	7	3	10
20a04	Certified Nurse Midwives	0	0	0	0
Line	Personnel by Major Service Category: Substance Use Disorder Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
21a	Physicians (other than Psychiatrists)	70	637	316	733
21b	Nurse Practitioners (Medical)	8	122	63	164
21c	Physician Assistants	1	10	4	13
21d	Certified Nurse Midwives	0	0	0	0
21e	Psychiatrists	3	17	3	14
21f	Licensed Clinical Psychologists	0	0	0	0
21g	Licensed Clinical Social Workers	1	1	0	1
21h	Other Licensed Mental Health Providers	1	1	0	1

**Table 6A - Selected Diagnoses and Services Rendered**

Reporting Period: January 1, 2022 through December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

Diagnostic Category		Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
<b>Selected Infectious and Parasitic Diseases</b>				
1-2	Symptomatic / Asymptomatic human immunodeficiency virus (HIV)	B20, B97.35, O98.7-, Z21	39	23
3	Tuberculosis	A15- through A19-, O98.0	17	13
4	Sexually transmitted infections	A50- through A64-	130	86
4a	Hepatitis B	B16.0 through B16.2, B16.9, B17.0, B18.0, B18.1, B19.1-, O98.4-	104	56
4b	Hepatitis C	B17.1-, B18.2, B19.2-	192	102
4c	Novel coronavirus (SARS-CoV-2) disease	U07.1	281	249
4d	Post COVID-19 condition	U09.9	76	56
<b>Selected Diseases of the Respiratory System</b>				
5	Asthma	J45-	906	614
6	Chronic lower respiratory diseases	J40 (count J40 only when code U07.1 is <b>not</b> present), J41- through J44-, J47-	284	166
6a	Acute respiratory illness due to novel coronavirus (SARS-CoV-2) disease	J12.82, J12.89, J20.8, J40, J22, J98.8, J80 (count codes listed only when code U07.1 is also present)	6	5
<b>Selected Other Medical Conditions</b>				
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-	298	207
8	Abnormal cervical findings	C53-, C79.82, D06-, R87.61-, R87.629, R87.810, R87.820	122	98
9	Diabetes mellitus	E08- through E13-, O24- (exclude O24.41-)	4,705	1,742
10	Heart disease (selected)	I01-, I02- (exclude I02.9), I20- through I25-, I27-, I28-, I30- through I52-	861	471
11	Hypertension	I10- through I16-, O10-, O11-	5,004	2,349
12	Contact dermatitis and other eczema	L23- through L25-, L30- (exclude L30.1, L30.3, L30.4, L30.5), L58-	392	310
13	Dehydration	E86-	8	8
14	Exposure to heat or cold	T33-, T34-, T67-, T68-, T69-, W92-, W93-, X30-, X31-, X32-	8	8
14a	Overweight and obesity	E66-, Z68- (exclude Z68.1, Z68.20 through Z68.24, Z68.51, Z68.52)	10,940	5,297
<b>Selected Childhood Conditions (limited to ages 0 through 17)</b>				
15	Otitis media and Eustachian tube disorders	H65- through H69-	87	73
16	Selected perinatal/neonatal medical conditions	A33, P19-, P22- through P29- (exclude P29.3), P35- through P96- (exclude P54-, P92-, P96.81), R78.81, R78.89	82	58
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	377	212

Selected Mental Health Conditions, Substance Use Disorders, and Exploitations				
18	Alcohol-related disorders	F10-, G62.1, O99.31-	234	123
19	Other substance related disorders (excluding tobacco use disorders)	F11- through F19- (exclude F17-), G62.0, O99.32-	392	186
19a	Tobacco use disorder	F17-, O99.33-, Z72.0	696	579
20a	Depression and other mood disorders	F30- through F39-	2,515	941
20b	Anxiety disorders, including post-traumatic stress disorder (PTSD)	F06.4, F40- through F42-, F43.0, F43.1-, F93.0	3,731	1,201
20c	Attention deficit and disruptive behavior disorders	F90- through F91-	786	145
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-, F64-, 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	3,116	1,126
20e	Human trafficking	T74.5- through T74.6-, T76.5- through T76.6-, Z04.81, Z04.82, Z62.813, Z91.42	0	0
20f	Intimate partner violence	T74.11, T74.21, T74.31, Z69.11	0	0
Service Category		Applicable ICD-10-CM, CPT-4/I/II/PLA or HCPCS Code	Number of Visits (a)	Number of Patients (b)
Selected Diagnostic Tests/Screening/Preventive Services				
21	HIV test	CPT-4: 86689, 86701 through 86703, 87389 through 87391, 87534 through 87539, 87806	5,019	4,979
21a	Hepatitis B test	CPT-4: 80074, 86704 through 86707, 87340, 87341, 87350, 87912	202	196
21b	Hepatitis C test	CPT-4: 80074, 86803, 86804, 87520 through 87522, 87902	637	611
21c	Novel coronavirus (SARS-CoV-2) diagnostic test	CPT-4: 87426, 87428, 87635, 87636, 87637 HCPCS: U0001, U0002, U0003, U0004 CPT PLA: 0202U, 0223U, 0225U, 0240U, 0241U	657	595
21d	Novel coronavirus (SARS-CoV-2) antibody test	CPT-4: 86318, 86328, 86408, 86409, 86413, 86769 CPT PLA: 0224U, 0226U CDT: D0605	4	4
21e	Pre-Exposure Prophylaxis (PrEP)-associated management of all patients on PrEP	<b>Possible codes to explore for PrEP management:</b> CPT-4: 99401-99404 ICD-10: Z11.3, Z11.4, Z20.2, Z20.6, Z51.81, Z71.51, Z71.7, Z79.899 Limited to prescribed PrEP based on a patient's risk for HIV exposure AND limited to emtricitabine/tenofovir disoproxil fumarate (FTC/TDF), emtricitabine/tenofovir alafenamide (FTC/TAF), or cabotegravir for PrEP	36	12
22	Mammogram	CPT-4: 77063, 77065, 77066, 77067 ICD-10: Z12.31 HCPCS: G0279	200	189
23	Pap test	CPT-4: 88141 through 88153, 88155, 88164 through 88167, 88174, 88175 ICD-10: Z01.41-, Z01.42, Z12.4 (exclude Z01.411 and Z01.419) HCPCS: G0144, G0145, G0147, G0148	799	755

Service Category		Applicable ICD-10-CM, CPT-4/I/II/PLA or HCPCS Code	Number of Visits (a)	Number of Patients (b)
24	Selected immunizations: hepatitis A; hemophilus Influenza B (HiB); pneumococcal; diphtheria, tetanus, pertussis (DTaP) (DTP) (DT); measles, mumps, rubella (MMR); poliovirus; varicella; hepatitis B	<b>CPT-4:</b> 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	4,176	3,301
24a	Seasonal flu vaccine	<b>CPT-4:</b> 90630, 90653 through 90657, 90658, 90661, 90662, 90672, 90673, 90674, 90682, 90685 through 90689, 90756	3,224	2,973
24b	Coronavirus (SARS-CoV-2) vaccine	<b>CPT-I:</b> 0001A-0004A, 0011A- 0014A, 0021A-0024A, 0031A-0034A, 0041A-0044A, 0051A-0054A, 0064A, 0071A, 0072A, 91300-91307, 91308-91310	1,656	1,320
25	Contraceptive management	<b>ICD-10:</b> Z30-	488	355
26	Health supervision of infant or child (ages 0 through 11)	<b>CPT-4:</b> 99381 through 99383, 99391 through 99393 <b>ICD-10:</b> Z00.1-, Z76.1, Z76.2	2,763	1,744
26a	Childhood lead test screening (9 to 72 months)	<b>ICD-10:</b> Z13.88 <b>CPT-4:</b> 83655	788	780
26b	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	<b>CPT-4:</b> 99408, 99409 <b>HCPCS:</b> G0396, G0397, G0443, H0050	0	0
26c	Smoke and tobacco use cessation counseling	<b>CPT-4:</b> 99406, 99407 <b>HCPCS:</b> S9075 <b>CPT-II:</b> 4000F, 4001F, 4004F	0	0
26d	Comprehensive and intermediate eye exams	<b>CPT-4:</b> 92002, 92004, 92012, 92014	0	0
Service Category		Applicable ADA Code	Number of Visits (a)	Number of Patients (b)
<b>Selected Dental Services</b>				
27	Emergency services	<b>CDT:</b> D0140, D9110	0	0
28	Oral exams	<b>CDT:</b> D0120, D0145, D0150, D0160, D0170, D0171, D0180	4	4
29	Prophylaxis—adult or child	<b>CDT:</b> D1110, D1120	129	126
30	Sealants	<b>CDT:</b> D1351	18	18
31	Fluoride treatment—adult or child	<b>CDT:</b> D1206, D1208 <b>CPT-4:</b> 99188	149	146
32	Restorative services	<b>CDT:</b> D21xx through D29xx	0	0
33	Oral surgery (extractions and other surgical procedures)	<b>CDT:</b> D7xxx	0	0
34	Rehabilitative services (Endo, Perio, Prostho, Ortho)	<b>CDT:</b> D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	2	1
Sources of codes:	<ul style="list-style-type: none"> <li>• ICD-10-CM (2022) National Center for Health Statistics (NCHS)</li> <li>• (CPT) (2022). American Medical Association (AMA).</li> <li>• Code on Dental Procedures and Nomenclature CDT Code (2022) – Dental Procedure Codes –American Dental Association (ADA).</li> </ul>			
<b>Comments</b> (Max 4000 characters)				

**Table 6B: Quality of Care Measures**

Reporting Period: January 1, 2022 - December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

0	Prenatal Care Provided by Referral Only? (Indicate Yes or No)		No		
<b>Section A—Age Categories for Prenatal Patients: Demographic Characteristics of Prenatal Care Patients</b>					
Line	Age	Number of Patients (a)			
1	Less than 15 years	1			
2	Ages 15-19	6			
3	Ages 20-24	30			
4	Ages 25-44	108			
5	Ages 45 and over	0			
6	<b>Total Patients</b> (Sum of Lines 1-5)	<b>145</b>			
<b>Section B—Early Entry into Prenatal Care</b>					
Line	Early Entry into Prenatal Care	Patients Having First Visit with Health Center (a)	Patients Having First Visit with Another Provider (b)		
7	First Trimester	45	36	31.0%	
8	Second Trimester	23	20		
9	Third Trimester	5	16		
<b>Section C—Childhood Immunization Status</b>					
Line	Childhood Immunization Status	Total Patients with 2nd Birthday (a)	Number of Records Reviewed (b)	Number of Patients Immunized (c)	
10	MEASURE: Percentage of children 2 years of age who received age appropriate vaccines by their 2nd birthday	299	299	55	18.4%
<b>Section D—Cervical and Breast Cancer Screening</b>					
Line	Cervical Cancer Screening	Total Female Patients Aged 23 through 64 (a)	Number of Records Reviewed (b)	Number of Patients Tested (c)	
11	MEASURE: Percentage of women 23-64 years of age who were screened for cervical cancer	4,873	4,873	2,448	50.2%
Line	Breast Cancer Screening	Total Female Patients Aged 51 through 73 (a)	Number of Records Reviewed (b)	Number of Patients with Mammogram (c)	
11a	MEASURE: Percentage of women 51–73 years of age who had a mammogram to screen for breast cancer	1,611	1,611	610	37.9%
<b>Section E—Weight Assessment and Counseling for Nutrition and Physical Activity of Children and Adolescents</b>					
Line	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	Total Patients Aged 3 through 16 (a)	Number of Records Reviewed (b)	Number of Patients with Counseling and BMI Documented (c)	
12	MEASURE: Percentage of patients 3-16 years of age with a BMI percentile, <b>and</b> counseling on nutrition <b>and</b> physical activity documented	2,949	2,949	1,013	34.4%
<b>Section F—Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan</b>					
Line	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	Total Patients Aged 18 and Older (a)	Number of Records Reviewed (b)	Number of Patients with BMI Charted and Follow-Up Plan Documented as	
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	7,026	7,026	1,506	21.4%
<b>Section G—Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention</b>					
Line	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Total Patients Aged 18 and Older (a)	Number of Records Reviewed (b)	Number of Patients Assessed for Tobacco Use and Provided	
14a	MEASURE: Percentage of patients aged 18 years of age and older who (1) were screened for tobacco use one or more times during the measurement period, <b>and</b> (2) if identified to be a tobacco user received cessation counseling intervention	5,612	5,612	4,282	76.3%

Section H—Statin Therapy for the Prevention and Treatment of Cardiovascular Disease					
Line	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	Total Patients High Risk of Cardiovascular Events (a)	Number of Records Reviewed (b)	Number of Patients with Acceptable Plan (c)	
17a	MEASURE: Percentage of patients at high risk of cardiovascular events who were prescribed or were on statin therapy	2,153	2,153	1,707	79.3%
Section I—Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet					
Line	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	Total Patients 18 and Older with IVD Diagnosis or AMI, CABG, or PCI	Number of Records Reviewed (b)	Number of Patients with Documentation of Use of Aspirin or	
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	286	286	225	78.7%
Section J—Colorectal Cancer Screening					
Line	Colorectal Cancer Screening	Total Patients Aged 50 through 74 (a)	Number of Records Reviewed (b)	Number of Patients with Appropriate Screening for Colorectal Cancer (c)	
19	MEASURE: Percentage of patients 50 through 74 years of age who had appropriate screening for colorectal cancer	3,158	3,158	1,060	33.6%
Section K—HIV Measures					
Line	HIV Linkage to Care	Total Patients First Diagnosed with HIV (a)	Number of Records Reviewed (b)	Number of Patients Seen Within 30 Days of First Diagnosis of HIV (c)	
20	MEASURE: Percentage of patients whose first-ever HIV diagnosis was made by health center personnel between December 1 of the prior year and November 30 of the measurement period and who were seen for follow-up treatment within 30 days of that first-ever diagnosis	1	1	1	100.0%
Line	HIV Screening	Total Patients Aged 15 through 65 (a)	Number of Records Reviewed (b)	Number of Patients Tested for HIV (c)	
20a	MEASURE: Percentage of patients 15 through 65 years of age who were tested for HIV when within age range	10,108	10,108	8,008	79.2%
Section L—Depression Measures					
Line	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Total Patients Aged 12 and Older (a)	Number of Records Reviewed (b)	Number of Patients Screened for Depression and Follow-Up Plan	
21	MEASURE: 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	9,169	9,169	4,184	45.6%
Line	Depression Remission at Twelve Months	Total Patients Aged 12 and Older with Major Depression or Dysthymia (a)	Number of Records Reviewed (b)	Number of Patients who Reached Remission (c)	
21a	MEASURE: Percentage of patients 12 years of age and older with major depression or dysthymia who reached remission 12 months (+/- 60 days) after an index event	154	154	8	5.2%
Section M—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 (a)	Number of Records Reviewed (b)	Number of Patients with Sealants to First Molars (c)	
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	19	19	5	26.3%

**Table 7: Health Outcomes and Disparities**

Reporting Period: January 1, 2022 - December 31, 2022

HRSA Homeless Grant: H80CS00045 COUNTY OF SACRAMENTO DOH & HUMAN SERVICES, Sacramento, CA

<b>Section A: Deliveries and Birth Weight</b>						
Line	Description					Patients (a)
0	HIV-Positive Pregnant Patients					1
2	Deliveries Performed by Health Center's Providers					0
Line	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)	
<b>Hispanic or Latino/a</b>						
1a	Asian					
1b1	Native Hawaiian					
1b2	Other Pacific Islander					
1c	Black/African American	1			1	
1d	American Indian/Alaska Native					
1e	White	17	1		16	
1f	More Than One Race					
1g	Unreported/Chose Not to Disclose Race	1			1	
<i>Subtotal Hispanic or Latino/a</i>		<b>19</b>	<b>1</b>	<b>0</b>	<b>18</b>	
<b>Non-Hispanic or Latino/a</b>						
2a	Asian	27		1	26	
2b1	Native Hawaiian					
2b2	Other Pacific Islander	2			2	
2c	Black/African American	5		1	4	
2d	American Indian/Alaska Native					
2e	White	5			5	
2f	More Than One Race					
2g	Unreported/Chose Not to Disclose Race					
<i>Subtotal Non-Hispanic or Latino/a</i>		<b>39</b>	<b>0</b>	<b>2</b>	<b>37</b>	
<b>Unreported/Chose Not to Disclose Race and Ethnicity</b>						
h	Unreported /Chose Not to Disclose Race and Ethnicity	0	0	0	0	
i	Total	<b>58</b>	<b>1</b>	<b>2</b>	<b>55</b>	

<b>Section B: Controlling High Blood Pressure</b>				
Line	Race and Ethnicity	Total Patients 18 through 84 Years of Age with Hypertension (2a)	Number Charts Sampled or EHR Total (2b)	Patients with Hypertension Controlled (2c)
<b>Hispanic or Latino/a</b>				
1a	Asian	5	5	1
1b1	Native Hawaiian	0	0	0
1b2	Other Pacific Islander	3	3	1
1c	Black/African American	4	4	1
1d	American Indian/Alaska Native	4	4	2
1e	White	1,052	1,052	601
1f	More Than One Race	1	1	0
1g	Unreported/Chose Not to Disclose Race	40	40	25
<i>Subtotal Hispanic or Latino/a</i>		<b>1,109</b>	<b>1,109</b>	<b>631</b>
<b>Non-Hispanic or Latino/a</b>				
2a	Asian	333	333	166
2b1	Native Hawaiian	7	7	4
2b2	Other Pacific Islander	32	32	18
2c	Black/African American	367	367	161
2d	American Indian/Alaska Native	11	11	4
2e	White	368	368	173
2f	More Than One Race	16	16	8
2g	Unreported/Chose Not to Disclose Race	14	14	8
<i>Subtotal Non-Hispanic or Latino/a</i>		<b>1,148</b>	<b>1,148</b>	<b>542</b>
<b>Unreported/Chose Not to Disclose Race and Ethnicity</b>				
h	Unreported /Chose Not to Disclose Race and Ethnicity	20	20	6
i	Total	<b>2,277</b>	<b>2,277</b>	<b>1,179</b>

**Section C: Diabetes: Hemoglobin A1c Poor Control**

Line	Race and Ethnicity	Total Patients 18 through 74 Years of Age with Diabetes (3a)	Number Charts Sampled or EHR Total (3b)	Patients with Hba1c > 9% or No Test During Year (3f)
<b>Hispanic or Latino/a</b>				
1a	Asian	3	3	2
1b1	Native Hawaiian	0	0	0
1b2	Other Pacific Islander	1	1	0
1c	Black/African American	5	5	2
1d	American Indian/Alaska Native	6	6	2
1e	White	1,008	1,008	319
1f	More Than One Race	1	1	0
1g	Unreported/Chose Not to	41	41	21
<i>Subtotal Hispanic or Latino/a</i>		<b>1,065</b>	<b>1,065</b>	<b>346</b>
<b>Non-Hispanic or Latino/a</b>				
2a	Asian	259	259	76
2b1	Native Hawaiian	6	6	1
2b2	Other Pacific Islander	24	24	10
2c	Black/African American	166	166	64
2d	American Indian/Alaska Native	4	4	1
2e	White	220	220	68
2f	More Than One Race	9	9	3
2g	Unreported/Chose Not to	8	8	4
<i>Subtotal Non-Hispanic or Latino/a</i>		<b>696</b>	<b>696</b>	<b>227</b>
<b>Unreported/Chose Not to Disclose Race and Ethnicity</b>				
h	Unreported /Chose Not to	10	10	5
i	Total	<b>1,771</b>	<b>1,771</b>	<b>578</b>

**Comments (Max 4000 characters)**

CY 2022: 1 set of twins

**Table 8A: Financial Costs**

Reporting Period: January 1, 2022 through December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

Line	Cost Center	Accrued Cost (a)	Allocation of Facility and Non-Clinical Support Services (b)	Total Cost After Allocation of Facility and Non-Clinical Support Services (c)
<b>Financial Costs for Medical Care</b>				
1	Medical Personnel	10,249,998	4,437,736	14,687,734
2	Lab and X-ray	630,074	272,791	902,865
3	Medical/Other Direct	1,895,885	820,823	2,716,708
4	<b>Total Medical Care Services</b> (Sum of Lines 1 through 3)	<b>12,775,957</b>	<b>5,531,350</b>	<b>18,307,307</b>
<b>Financial Costs for Other Clinical Services</b>				
5	Dental	60,315	26,113	86,428
6	Mental Health	2,050,640	887,824	2,938,464
7	Substance Use Disorder	0	0	0
8a	Pharmacy (not including pharmaceuticals)	1,277,289	553,002	1,830,291
8b	Pharmaceuticals	871,177		871,177
9	Other Professional (specify: ___)	0	0	0
9a	Vision	0	0	0
10	<b>Total Other Clinical Services</b> (Sum of Lines 5 through 9a)	<b>4,259,421</b>	<b>1,466,939</b>	<b>5,726,360</b>
<b>Financial Costs of Enabling and Other Program Related Services</b>				
11a	Case Management	0		0
11b	Transportation	0		0
11c	Outreach	354,336		354,336
11d	Patient and Community Education	0		0
11e	Eligibility Assistance	217,041		217,041
11f	Interpretation Services	861,829		861,829
11g	Other Enabling Services (specify: ___)	0		0
11h	Community Health Workers	0		0
11	<b>Total Enabling Services</b> (Sum of Lines 11a-11h)	<b>1,433,206</b>	<b>620,506</b>	<b>2,053,712</b>
12	Other Program-Related Services (specify: ___)	0	0	0
12a	Quality Improvement	743,253	321,792	1,065,045
13	<b>Total Enabling and Other Services</b> (Sum of Lines 11, 12, and 12a)	<b>2,176,459</b>	<b>942,298</b>	<b>3,118,757</b>
<b>Facility and Non-Clinical Support Services and Totals</b>				
14	Facility	1,358,990		
15	Non-Clinical Support Services	6,581,597		
16	<b>Total Facility and Non-Clinical Support Services</b> (Sum of Lines 14 and 15)	<b>7,940,587</b>		
17	<b>Total Accrued Costs</b> (Sum of Lines 4+10+13+16)	<b>27,152,424</b>		<b>27,152,424</b>
18	Value of Donated Facilities, Services and Supplies (specify: Pharmaceuticals)			10,600
19	<b>Total with Donations</b> (Sum of Lines 17 and 18)			<b>27,163,024</b>

**Table 9D: Patient Service Revenue**

Reporting Period: January 1, 2022 through December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

Line	Payer Category	Full Charges This Period (a)	Amount Collected This Period (b)	Retroactive Settlements, Receipts, and Paybacks (c)				Adjustments (d)	Sliding Fee Discounts (e)	Bad Debt Write Off (f)
				Collection of Reconciliation /Wrap-Around Current Year (c1)	Collection of Reconciliation /Wrap-Around Previous Years (c2)	Collection of Other Payments: P4P, Risk Pools, etc. (c3)	Penalty/ Payback (c4)			
1	Medicaid Non-Managed Care	\$1,806,480	\$5,082,742					\$702,305		
2a	Medicaid Managed Care (capitated)	\$6,313,652	\$11,472,168		\$2,233,119	\$122,247		(\$5,158,516)		
2b	Medicaid Managed Care (fee-for-service)									
3	<b>Total Medicaid (Sum of Lines 1+2a+2b)</b>	<b>\$8,120,132</b>	<b>\$16,554,910</b>	<b>\$0</b>	<b>\$2,233,119</b>	<b>\$122,247</b>	<b>\$0</b>	<b>(\$4,456,211)</b>		
4	Medicare Non-Managed Care	\$497,043	\$111,711					\$119,164		
5a	Medicare Managed Care (capitated)	\$25,012	\$120,960					(\$95,948)		
5b	Medicare Managed Care (fee-for-service)									
6	<b>Total Medicare (Sum of Lines 4+5a+5b)</b>	<b>\$522,055</b>	<b>\$232,671</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$23,216</b>		
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)									
8c	Other Public, including COVID-19 Uninsured Program									
9	<b>Total Other Public (Sum of Lines 7+8a+8b+8c)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>		
10	Private Non-Managed Care	\$106,941	\$7,241							
11a	Private Managed Care (capitated)									
11b	Private Managed Care (fee-for-service)									
12	<b>Total Private (Sum of Lines 10+11a+11b)</b>	<b>\$106,941</b>	<b>\$7,241</b>			<b>\$0</b>	<b>\$0</b>	<b>\$0</b>		
13	<b>Self-Pay</b>	<b>\$1,642,948</b>	<b>\$76,810</b>						\$138,061	\$1,886,863
14	<b>TOTAL (Sum of Lines 3+6+9+12+13)</b>	<b>\$10,392,076</b>	<b>\$16,871,632</b>	<b>\$0</b>	<b>\$2,233,119</b>	<b>\$122,247</b>	<b>\$0</b>	<b>(\$4,432,995)</b>	<b>\$138,061</b>	<b>\$1,886,863</b>
<b>Comments (Max 4000 characters)</b>										

**Table 9E: Other Revenues**

Reporting Period: January 1, 2022 through December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

Line	Source	Amount
<b>BPHC Grants (Enter Amount Drawn Down—Consistent with PMS-272)</b>		
1a	Migrant Health Center	
1b	Community Health Center	
1c	Health Care for the Homeless	1,132,877
1e	Public Housing Primary Care	
1g	<b>Total Health Center</b> (Sum Lines 1a through 1e)	<b>1,132,877</b>
1k	Capital Development Grants, including School-Based Service Site Capital Grants	
1l	Coronavirus Preparedness and Response Supplemental Appropriations Act (H8C)	
1m	Coronavirus Aid, Relief, and Economic Security Act (CARES) (H8D)	
1n	Expanding Capacity for Coronavirus Testing (ECT) (H8E and LAL ECT)	157,874
1o	American Rescue Plan (ARP) (H8F, L2C, C8E)	1,112,807
1p	Other COVID-19-Related Funding from BPHC (specify_____)	
1q	<b>Total COVID-19 Supplemental</b> (Sum of Lines 1l through 1p)	<b>1,270,681</b>
1	<b>Total BPHC Grants</b> (Sum of Lines 1g + 1k + 1q)	<b>2,403,558</b>
<b>Other Federal Grants</b>		
2	Ryan White Part C HIV Early Intervention	
3	Other Federal Grants (specify: ARPA, SLFRF)	336,282
3a	Medicare and Medicaid EHR Incentive Payments for Eligible Providers	
3b	Provider Relief Fund (specify_____)	
5	<b>Total Other Federal Grants</b> (Sum of Lines 2 through 3b)	<b>336,282</b>
<b>Non-Federal Grants Or Contracts</b>		
6	State Government Grants and Contracts (specify REFUGEE & CDPH CalVax Grants)	114,235
6a	State/Local Indigent Care Programs (specify Realignment Funds)	11,037,898
7	Local Government Grants and Contracts (specify_____)	
8	Foundation/Private Grants and Contracts (specify_____)	
9	<b>Total Non-Federal Grants and Contracts</b> (Sum of Lines 6 + 6a + 7 + 8)	<b>11,152,133</b>
10	Other Revenue (non-patient service revenue not reported elsewhere) (specify Reimbursement by other programs/department for cost of staff and other services, miscellaneous fees & refunds, general fund in lieu of CARES)	<b>1,405,276</b>
11	<b>Total Revenue</b> (Sum of Lines 1+5+9+10)	<b>15,297,249</b>

## Appendix D: Health Center Health Information Technology (HIT) Capabilities

### INTRODUCTION

The HIT Capabilities Form collects information through a series of questions on the health center’s HIT capabilities, including EHR interoperability and eligibility for CMS Promoting Interoperability programs. The HIT Form must be completed and submitted as part of the UDS submission. The form includes questions about the health center’s implementation of an EHR, certification of systems, and how widely adopted the system is throughout the health center and its providers.

Several notable changes have been made to the HIT Form, as outlined below:

- Question 11a has been added to measure the total number of patients screened for social risk factors.
- Questions throughout have also been revised to provide clarity, with additional selection options added.
- Questions 1d, 1e, and 7 have been removed.

### QUESTIONS

The following questions appear in the EHBs. Complete them before you file the UDS Report. Reporting requirements for the HIT questions are on-screen in the EHBs as you complete the form. Respond to each question based on your health center status **as of December 31**.

1. Does your health center currently have an electronic health record (EHR) system installed and in use, at minimum for medical care, by December 31?

**a. Yes,  
installed at  
all service delivery  
sites and used by  
all providers**

- For the purposes of this response, “providers” mean all medical providers, including physicians, nurse practitioners, physician assistants, and certified nurse midwives.
- Although some or all of the dental, mental health, or other providers may also be using the system, as may medical support personnel, this is not required to choose response (a).
- For the purposes of this response, “all service delivery sites” means all permanent service delivery sites where medical providers serve health center medical patients.
- It does not include administrative-only locations, hospitals or nursing homes, mobile vans, or sites used on a seasonal or temporary basis.
- You may check this option if a few newly hired, untrained personnel are the only ones not using the system.

**b. Yes, but only  
installed at  
some service  
delivery sites or  
used by  
some providers**

- Select option (b) if one or more permanent service delivery sites did not have the EHR installed or in use (even if this is planned), or if one or more medical providers (as defined on this page under [a]) do not yet use the system.
- When determining if all providers have access to the system, the health center should also consider part-time and locum providers who serve clinic patients.
- Do not select this option if the only medical providers who did not have access were those who were newly hired and still being trained on the system.

**c. No**

- Select “no” if no EHR was in use on December 31, even if you had the system installed and training had started.
- If the health center purchased an EHR but has not yet put it into use, answer “no.”
- If response is “c. No.” skip to Question 11.

If “Yes, but only installed at some service delivery sites or used by some providers” is selected, a box expands for health centers to identify how many service delivery sites have the EHR in use and how many (medical) providers are using it. Please enter the number of service delivery sites (as defined under question 1) where the EHR is in use and the number of providers who use the system (at all service delivery sites). Include part-time and locum medical providers who serve clinic patients. Count a provider who has separate login identities at more than one service delivery site as just one provider.

This next set of questions seek to determine whether the health center installed an EHR by December 31 and, if so, which product was in use, how broad system access was, and what features were available and in use. DO NOT include PMS or other billing systems, even though they can often produce much of the UDS data.

If a system is in use (i.e., if [a] or [b] has been selected), indicate that it has been certified by the Office of the National Coordinator—Authorized Testing and Certification Bodies.

1a. Is your system certified by the Office of the National Coordinator for Health IT (ONC) Health IT Certification Program?

a. Yes

b. No

Health centers are to indicate the vendor, product name, version number, and ONC-certified health IT product list number. (More information is available at <https://chpl.healthit.gov/#/search>.) If you have more than one EHR (if, for example, you acquired another practice with its own EHR), report the EHR that will be the successor system or the EHR used for capturing primary medical care.

1a1. Vendor : OCHIN Epic (Epic Systems Corporation)

1a2. Product Name : EpicCare Ambulatory Base

1a3. Version Number : May 2022

1a4. ONC-certified Health IT Product List Number : 15.04.04.1447.Epic.AM.22.1.220713

1b. Did you switch to your current EHR from a previous system this year?

a. Yes

b. No

1c. Do you use more than one EHR, data collection, and/or data analytics system across your organization?

a. Yes

b. No

1c1. If yes, what is the reason?

a. Additional EHR/data system(s) are used during transition from one primary EHR to another

b. Additional EHR/data system(s) are specific to one service type (e.g., dental, behavioral health, care coordination)

c. Additional EHR/data system(s) are used at specific service delivery sites with no plan to transition

d. Additional EHR/data system(s) are used for analysis and reporting (such as for clinical quality measures or custom reporting)

e. Other (please describe \_\_\_\_\_)

- 1d. Question removed.
- 1e. Question removed.
2. Question removed.
3. Question removed.
4. Which of the following key providers/health care settings does your health center electronically exchange clinical or patient information with? (Select all that apply.)
- a. Hospitals/Emergency rooms
  - b. Specialty providers
  - c. Other primary care providers
  - d. Labs or imaging
  - e. Health information exchange (HIE)
  - f. Community-based organizations/social service partners
  - g. None of the above
  - h. Other (please describe \_\_\_\_\_)
5. Does your health center engage patients through health IT in any of the following ways? (Select all that apply.)
- a. Patient portals
  - b. Kiosks
  - c. Secure messaging between patient and provider
  - d. Online or virtual scheduling
  - e. Automated electronic outreach for care gap closure or preventive care reminders
  - f. Application programming interface (API)-based patient access to their health record through mHealth apps<sup>1</sup>
  - g. Other (please describe \_\_\_\_\_)
  - h. No, we DO NOT engage patients using HIT
6. Question removed.
7. Question removed.
8. Question removed.
9. Question removed.

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<sup>1</sup> For more information on [How APIs in Health Care can Support Access to Health Information: Learning Module](#)

10. How does your health center utilize HIT and EHR data beyond direct patient care? (Select all that apply.)

- a. Quality improvement
- b. Population health management
- c. Program evaluation
- d. Research
- e. Other (please describe \_\_\_\_\_)
- f. We DO NOT utilize HIT or EHR data beyond direct patient care

11. Does your health center collect data on individual patients' social risk factors, outside of the data countable in the UDS?

The phrase "outside of the data countable in the UDS" means that collecting race, ethnicity, sexual orientation, gender identity, and/or income level would not be considered here as collecting data on individual patients' social risk factors, as this information is already counted in the UDS Report, on Tables 3B and 4. Similarly, intimate partner violence, domestic violence, and/or human trafficking would not be considered here as collecting data on individual patients' social risk factors, as this information is already counted in the UDS Report, on Table 6A.

- a. Yes

**Note:** Health centers should respond "a. Yes." If they are screening for social risks, meaning they have a consistent set of questions that are asked of individual patients uniformly for the purposes of collecting information on the non-medical, health-related social needs of patients, such as housing instability and/or food insecurity, **beyond** those demographic characteristics captured elsewhere on the UDS of patients.

- b. No, but we are in planning stages to collect this information
- c. No, we are not planning to collect this information

11a. How many health center patients were screened for social risk factors using a standardized screener during the calendar year? (Only respond to this if the response to Question 11 is "a. Yes.") 1,257 (SDOH) + 2,133 (SHA): 3,390

12. Which standardized screener(s) for social risk factors, if any, did you use during the calendar year? (Select all that apply. Only respond to this if Question 11a is greater than 0.)

- a. Accountable Health Communities Screening Tools
- b. Upstream Risks Screening Tool and Guide
- c. iHELLP
- d. Recommend Social and Behavioral Domains for EHRs
- e. Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE)
- f. Well Child Care, Evaluation, Community Resources, Advocacy, Referral, Education (WE CARE)
- g. WellRx
- h. Health Leads Screening Toolkit
- i. Other (please describe \_\_\_\_\_)

**Note:** Health centers who are screening for social risks, using the definition noted in Question 11, but are NOT using one of the standardized screening tools listed should respond “i. Other”. Specify that you are using standardized questions from various screening tools.

- j. We DO NOT use a standardized screener (skip to Question 12b)
- 12a. Of the total patients screened for social risk factors (Question 11a), please provide the total number of patients that screened positive for any of the following at any point during the calendar year. (A patient may experience multiple social risks and should be counted once for each risk factor they screened positive for, regardless of the number of times screened during the year.):
- a. Food insecurity 67 (SDOH)
  - b. Housing insecurity 76 (SDOH)
  - c. Financial strain 68 (SDOH)
  - d. Lack of transportation/access to public transportation 31 (SDOH)
- 12b. If you DO NOT use a standardized screener to collect this information, please indicate why. (Select all that apply.) (Only respond to this question if Question 11a is zero or Question 12, option J is selected.)
- a. Have not considered/unfamiliar with standardized screeners
  - b. Lack of funding for addressing these unmet social needs of patients
  - c. Lack of training for personnel to discuss these issues with patients
  - d. Inability to include with patient intake and clinical workflow
  - e. Not needed
  - f. Other (please describe \_\_\_\_\_)
13. Does your health center integrate a statewide Prescription Drug Monitoring Program (PDMP) database into the health information systems, such as health information exchanges, EHRs, and/or pharmacy dispensing software (PDS) to streamline provider access to controlled substance prescriptions?
- a. **Yes**
  - b. No
  - c. Not sure

**Appendix F: Workforce**

Reporting Period: January 1, 2022 through December 31, 2022

HRSA Homeless Grant: H80CS00045 | COUNTY OF SACRAMENTO DOH & HUMAN SERVICES

<b>1. Does your health center provide any health professional education/training that is hands-on, practical, or clinical experience?</b>		
Indicate Yes or No	Yes	
If yes, which category best describes your health center's role in the health professional education/training process? (Select all that apply.)	Sponsor	
a. Sponsor		
b. Training site partner		
c. Other (please describe _____)		
<b>2. Please indicate the range of health professional education/training offered at your health center and how many individuals you have trained in each category</b>		
<b>Medical</b>	<b>a. Pre-Graduate/Certificate</b>	<b>b. Post-Graduate Training</b>
1. Physicians	50	122
a. Family Physicians		43
b. General Practitioners		0
c. Internists		58
d. Obstetrician/Gynecologists		0
e. Pediatricians		21
f. Other Specialty Physicians		0
2. Nurse Practitioners	8	2
3. Physician Assistants	20	0
4. Certified Nurse Midwives	0	0
5. Registered Nurses	0	0
6. Licensed Practical Nurses/ Vocational Nurses	0	0
7. Medical Assistants	0	0
<b>Dental</b>	<b>a. Pre-Graduate/Certificate</b>	<b>b. Post-Graduate Training</b>
8. Dentists	0	0
9. Dental Hygienists	0	0
10. Dental Therapists	0	0
10a. Dental Assistants	0	0
<b>Mental Health and Substance Use Disorder</b>	<b>a. Pre-Graduate/Certificate</b>	<b>b. Post-Graduate Training</b>
11. Psychiatrists		21
12. Clinical Psychologists	0	0
13. Clinical Social Workers	0	0
14. Professional Counselors	0	0
15. Marriage and Family Therapists	0	0
16. Psychiatric Nurse Specialists	0	0
17. Mental Health Nurse Practitioners	0	0
18. Mental Health Physician Assistants	0	0
19. Substance Use Disorder Personnel	0	0
<b>Vision</b>	<b>a. Pre-Graduate/Certificate</b>	<b>b. Post-Graduate Training</b>
20. Ophthalmologists	0	0
21. Optometrists	0	0
<b>Other Professionals</b>	<b>a. Pre-Graduate/Certificate</b>	<b>b. Post-Graduate Training</b>
22. Chiropractors	0	0
23. Dietitians/Nutritionists	0	0
24. Pharmacists	0	0
25. Other (please describe _____)	0	0
<b>3. Provide the number of health center personnel serving as preceptors at your health center</b>	54	
<b>4. Provide the number of health center personnel (non-preceptors) supporting ongoing health center training programs</b>	115	
<b>5. How often does your health center conduct satisfaction surveys to providers (as identified in Appendix A, Listing of Personnel) working for the health center?</b>		
a. Monthly		
b. Quarterly		
c. Annually		
d. We DO NOT currently conduct provider satisfaction surveys		
e. Other (please describe _____)	Other - Surveyed as part of general staff survey	
<b>6. How often does your health center conduct satisfaction surveys for general personnel (as identified in Appendix A, Listing of Personnel) working for the health</b>		
a. Monthly		
b. Quarterly		
c. Annually	Annually	
d. We DO NOT currently conduct personnel satisfaction surveys		
e. Other (please describe _____)		
<b>Comments (Max 4000 characters)</b>		