



U.S. Department of Health and Human Services

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U.S. Department of Health and Human Services

Health Resources and Services Administration

National Health Center Data from the 2011 Uniform Data System

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TABLE 3A - Patients by Age and Gender - 2011
National - Universal - 1128 Grantees

Age Groups		Male Patients (a)	Female Patients (b)	All Patients
1.	Under Age 1	305,382	292,223	597,605
2.	Age 1	201,887	195,660	397,547
3.	Age 2	195,196	189,082	384,278
4.	Age 3	207,391	201,227	408,618
5.	Age 4	216,589	210,749	427,338
6.	Age 5	200,197	195,118	395,315
7.	Age 6	180,060	173,939	353,999
8.	Age 7	170,374	164,973	335,347
9.	Age 8	162,645	158,880	321,525
10.	Age 9	155,946	153,760	309,706
11.	Age 10	155,100	153,306	308,406
12.	Age 11	161,401	159,146	320,547
13.	Age 12	158,370	156,414	314,784
14.	Age 13	151,840	153,964	305,804
15.	Age 14	150,052	158,661	308,713
16.	Age 15	145,925	167,637	313,562
17.	Age 16	144,913	183,136	328,049
18.	Age 17	139,218	196,191	335,409
19.	Age 18	118,150	199,402	317,552
20.	Age 19	97,972	197,578	295,550
Subtotal Patients (Sum lines 1-20)		3,418,608	3,661,046	7,079,654
21.	Age 20	93,939	207,340	301,279
22.	Age 21	92,198	210,652	302,850
23.	Age 22	91,785	211,060	302,845
24.	Age 23	91,873	212,431	304,304
25.	Age 24	94,077	212,550	306,627
26.	Ages 25 - 29	486,061	1,042,020	1,528,081
27.	Ages 30 - 34	488,876	938,392	1,427,268
28.	Ages 35 - 39	463,430	809,950	1,273,380
29.	Ages 40 - 44	508,956	782,600	1,291,556
30.	Ages 45 - 49	568,507	797,768	1,366,275
31.	Ages 50 - 54	572,902	770,207	1,343,109
32.	Ages 55 - 59	478,402	646,008	1,124,410
33.	Ages 60 - 64	353,183	524,003	877,186
Subtotal Patients (Sum lines 21-33)		4,384,189	7,364,981	11,749,170
34.	Ages 65 - 69	213,979	309,159	523,138
35.	Ages 70 - 74	140,485	201,832	342,317
36.	Ages 75 - 79	92,350	141,866	234,216
37.	Ages 80 - 84	58,208	98,066	156,274
38.	Ages 85 and over	44,271	95,717	139,988
Subtotal Patients (Sum lines 34-38)		549,293	846,640	1,395,933
39.	Total Patients (Sum lines 1-38)	8,352,090	11,872,667	20,224,757
% of Total		41.3%	58.7%	

TABLE 3B - Patients by Hispanic or Latino Ethnicity / Race / Language - 2011
National - Universal - 1128 Grantees

PATIENTS BY RACE		PATIENTS BY HISPANIC OR LATINO ETHNICITY						
		Hispanic/Latino (a)	Non-Hispanic/Latino (b)	Unreported/Refused to Report (c)		Total (d)		
				Number	% of Total	Number	% of Total	% of Known
1.	Asian	13,503	552,466			565,969	2.8%	3.4%
2a.	Native Hawaiian	3,696	42,555			46,251	0.2%	0.3%
2b.	Other Pacific Islander	21,889	134,051			155,940	0.8%	0.9%
2.	Total Hawaiian/Pacific Islander (Sum lines 2a+2b)	25,585	176,606			202,191	1.0%	1.2%
3.	Black/African American	121,149	4,050,343			4,171,492	20.6%	25.2%
4.	American Indian/Alaska native	41,765	198,539			240,304	1.2%	1.5%
5.	White	3,548,489	7,185,054			10,733,543	53.1%	64.8%
6.	More than one race	485,819	162,219			648,038	3.2%	3.9%
6a.	Total Known (Sum lines 1+2+3+4+5+6)	4,236,310	12,325,227			16,561,537		
7.	Unreported/Refused to report	2,450,688	396,055	816,477	4.0%	3,663,220	18.1%	
8.	Total Patients(Sum lines 1+2+3 to 7)	6,686,998	12,721,282	816,477	4.0%	20,224,757	100%	
		<i>% of Known (a)</i>	<i>% of Known (b)</i>					
9.	Total Patients	34.5%	65.5%					

PATIENTS BY LANGUAGE		Number (a)	% of Total
12.	Patients best served in a language other than English	4,648,137	23.0%

% may not equal 100% due to rounding

TABLE 4 - Selected Patient Characteristics - 2011
National - Universal - 1128 Grantees

Characteristic		Number of Patients (a)	% of Total	% of Known		
Income as Percent of Poverty Level						
1.	100% and Below	11,213,993	55.4%	71.8%		
2.	101 - 150%	2,201,355	10.9%	14.1%		
3.	151 - 200%	1,029,036	5.1%	6.6%		
4.	Over 200%	1,164,804	5.8%	7.5%		
5.	Unknown	4,615,569	22.8%			
6.	Total (Sum lines 1-5)	20,224,757	100%			
Principal Third Party Medical Insurance Source		Ages 0 - 19 (a)	Ages 20+ (b)	TOTAL	%	
7.	None/Uninsured	1,318,435	6,045,726	7,364,161	36.4%	
8a.	Regular Medicaid (Title XIX)	4,576,592	3,244,539	7,821,131	38.7%	
8b.	CHIP Medicaid	119,298	9,686	128,984	0.6%	
8.	Total Medicaid (Sum lines 8a+8b)	4,695,890	3,254,225	7,950,115	39.3%	
9.	Medicare (Title XVIII)	4,528	1,564,022	1,568,550	7.8%	
10a.	Other Public Insurance Non-CHIP	44,038	223,570	267,608	1.3%	
10b.	Other Public Insurance CHIP	203,444	19,895	223,339	1.1%	
10.	Total Public Insurance (Sum lines 10a+10b)	247,482	243,465	490,947	2.4%	
11.	Private Insurance	813,319	2,037,665	2,850,984	14.1%	
12.	Total (Sum Lines 7+8+9+10+11)	7,079,654	13,145,103	20,224,757	100%	
Managed Care Utilization						
Payor Category		Medicaid (a)	Medicare (b)	Other Public Including Non-Medicaid CHIP (c)	Private (d)	Total (e)
13a.	Capitated Member months	23,290,182	419,272	1,505,387	1,330,194	26,545,035
13b.	Fee-for-service Member months	21,484,242	791,430	1,310,977	1,518,683	25,105,332
13c.	Total Member Months (Sum lines 13a+13b)	44,774,424	1,210,702	2,816,364	2,848,877	51,650,367
Characteristics - Special Populations		Number of Patients (a)		%		
14.	Migrant (330g grantees only)	335,281		38.9%		
15.	Seasonal (330g grantees only)	457,421		53.0%		
	Migrant/Seasonal (non-330 g grantees)	70,106		8.1%		
16.	Total Migrant/Seasonal Agricultural Worker or Dependent (All Grantees Report This Line)	862,808		100%		
17.	Homeless Shelter (330h grantees only)	294,483		27.1%		
18.	Transitional (330h grantees only)	110,559		10.2%		
19.	Doubling Up (330h grantees only)	201,708		18.5%		
20.	Street (330h grantees only)	68,035		6.3%		
21.	Other (330h grantees only)	85,260		7.8%		
22.	Unknown (330h grantees only)	71,507		6.6%		
	Homeless (non-330 h grantees)	255,879		23.5%		
23.	Total Homeless (All Grantees Report This Line)	1,087,431		100%		
24.	Total School Based Health Center Patients (All Grantees Report This Line)	434,607				
25.	Total Veterans (All Grantees Report this Line)	249,548				

% may not equal 100% due to rounding

TABLE 5 - Staffing and Utilization - 2011
National - Universal - 1128 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Clinic Visits (b)	Patients (c)
1.	Family Physicians	4,657.08	16,261,943	
2.	General Practitioners	376.62	1,476,900	
3.	Internists	1,606.82	5,474,780	
4.	Obstetrician/Gynecologists	978.95	3,198,031	
5.	Pediatricians	2,010.51	7,401,267	
7.	Other Specialty Physicians	305.76	1,024,588	
8.	Total Physicians (Sum lines 1-7)	9,935.74	34,837,509	
9a.	Nurse Practitioners	4,186.55	11,736,674	
9b.	Physician Assistants	2,193.83	6,678,746	
10.	Certified Nurse Midwives	552.80	1,307,590	
10a.	Total NP, PA, CNMs (Sum lines 9a-10)	6,933.18	19,723,010	
11.	Nurses	11,854.24	3,191,618	
12.	Other Medical Personnel	17,711.17		
13.	Laboratory Personnel	2,034.97		
14.	X-Ray Personnel	742.53		
15.	Total Medical Services (Sum lines 8+10a through 14)	49,211.83	57,752,137	17,354,833
16.	Dentists	3,095.72	8,303,212	
17.	Dental Hygienists	1,285.06	1,688,108	
18.	Dental Assistants, Aides, Techs	5,956.59		
19.	Total Dental Services (Sum lines 16-18)	10,337.37	9,991,320	4,037,384
20a.	Psychiatrists	401.32	1,025,754	
20a1.	Licensed Clinical Psychologists	403.05	456,818	
20a2.	Licensed Clinical Social Workers	1,394.25	1,389,637	
20b.	Other Licensed Mental Health Providers	1,005.53	1,034,342	
20c.	Other Mental Health Staff	1,281.53	767,899	
20.	Total Mental Health Services (Sum lines 20a-c)	4,485.68	4,674,450	932,950
21.	Substance Abuse Services	874.14	1,056,754	105,084
22.	Other Professional Services	977.17	1,152,635	426,448
22a.	Ophthalmologist	30.39	110,463	
22b.	Optometrist	133.93	340,169	
22c.	Other Vision Care Staff	134.48		
22d.	Total Vision Services (Sum lines 22a-c)	298.80	450,632	318,045
23.	Pharmacy Personnel	2,999.34		
24.	Case Managers	4,407.57	3,399,004	
25.	Patient/Community Education Specialists	2,096.27	1,550,764	
26.	Outreach Workers	2,004.36		
27.	Transportation Staff	461.90		
27a.	Eligibility Assistance Workers	2,261.70		
27b.	Interpretation Staff	836.10		
28.	Other Enabling Services	435.92		
29.	Total Enabling Services (Sum lines 24-28)	12,503.82	4,949,768	1,873,745
29a.	Other Programs/Services	4,255.83		

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 - 2011
National - Universal - 1128 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Clinic Visits (b)	Patients (c)
30a.	Management and Support Staff	13,874.99		
30b.	Fiscal and Billing Staff	9,261.25		
30c.	IT Staff	2,179.41		
31.	Facility Staff	3,547.33		
32.	Patient Support Staff	23,596.29		
33.	Total Facility and Non-Clinical Support Services(Lines 30a through 32)	52,459.27		
34.	Total (Sum lines 15+19+20+21+22+22d+23+29+29a+33)	138,403.25	80,027,696	

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TABLE 5 - Staffing and Utilization - 2011
National - Universal - 1128 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Clinic Visits	
		% Group	% Total	% Group	% Total
1.	Family Physicians	9.5%	3.4%	28.2%	20.3%
2.	General Practitioners	0.8%	0.3%	2.6%	1.8%
3.	Internists	3.3%	1.2%	9.5%	6.8%
4.	Obstetrician/Gynecologists	2.0%	0.7%	5.5%	4.0%
5.	Pediatricians	4.1%	1.5%	12.8%	9.2%
7.	Other Specialty Physicians	0.6%	0.2%	1.8%	1.3%
8.	Total Physicians (Sum lines 1-7)	20.2%	7.2%	60.3%	43.5%
9a.	Nurse Practitioners	8.5%	3.0%	20.3%	14.7%
9b.	Physician Assistants	4.5%	1.6%	11.6%	8.3%
10.	Certified Nurse Midwives	1.1%	0.4%	2.3%	1.6%
10a.	Total Mid-Levels (Sum lines 9a-10)	14.1%	5.0%	34.2%	24.6%
11.	Nurses	24.1%	8.6%	5.5%	4.0%
12.	Other Medical Personnel	36.0%	12.8%		
13.	Laboratory Personnel	4.1%	1.5%		
14.	X-Ray Personnel	1.5%	0.5%		
15.	Total Medical (Sum lines 8+10a through 14)	100%	35.6%	100%	72.2%
16.	Dentists	29.9%	2.2%	83.1%	10.4%
17.	Dental Hygienists	12.4%	0.9%	16.9%	2.1%
18.	Dental Assistance, Aides, Techs	57.6%	4.3%		
19.	Total Dental Services (Sum lines 16-18)	100%	7.5%	100%	12.5%
20a.	Psychiatrists	8.9%	0.3%	21.9%	1.3%
20a1.	Licensed Clinical Psychologists	9.0%	0.3%	9.8%	0.6%
20a2.	Licensed Clinical Social Workers	31.1%	1.0%	29.7%	1.7%
20b.	Other Licensed Mental Health Providers	22.4%	0.7%	22.1%	1.3%
20c.	Other Mental Health Staff	28.6%	0.9%	16.4%	1.0%
20.	Total Mental Health (Sum lines 20a-c)	100%	3.2%	100%	5.8%
21.	Substance Abuse Services	100%	0.6%	100%	1.3%
22.	Other Professional Services	100%	0.7%	100%	1.4%
22a.	Ophthalmologist	10.2%	0.0%	24.5%	0.1%
22b.	Optometrist	44.8%	0.1%	75.5%	0.4%
22c.	Other Vision Care Staff	45.0%	0.1%		
22d.	Total Vision Services (Sum lines 22a-22c)	100%	0.2%	100%	0.6%
23.	Pharmacy Personnel	100%	2.2%		
24.	Case Managers	35.2%	3.2%	68.7%	4.2%
25.	Patient/Community Education Specialists	16.8%	1.5%	31.3%	1.9%
26.	Outreach Workers	16.0%	1.4%		
27.	Transportation Staff	3.7%	0.3%		
27a.	Eligibility Assistance Workers	18.1%	1.6%		
27b.	Interpretation Staff	6.7%	0.6%		
28.	Other Enabling Services	3.5%	0.3%		
29.	Total Enabling Services (Sum lines 24-28)	100%	9.0%	100%	6.2%
29a.	Other Programs/Services	100%	3.1%		

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 - 2011
National - Universal - 1128 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Clinic Visits	
		% Group	% Total	% Group	% Total
30a.	Management and Support Staff		10.0%		
30b.	Fiscal and Billing Staff		6.7%		
30c.	IT Staff		1.6%		
31.	Facility Staff		2.6%		
32.	Patient Support Staff		17.0%		
33.	Total Facility and Non-Clinical Support Services(Lines 30a through 32)	100%	37.9%		
34.	Total (Sum lines 15+19+20+21+22+22d+23+29+29a+33)		100%		100%

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

TABLE 6A - Selected Diagnoses and Services Rendered - 2011
National - Universal - 1128 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (A)	Number of Patients with Primary Diagnosis (B)	Visits Per Patient
Selected Infectious and Parasitic Diseases					
1, 2.	Symptomatic and Asymptomatic HIV	042 , 079.53, V08	413,219	94,605	4.37
3.	Tuberculosis	010.xx - 018.xx	12,688	6,816	1.86
4.	Syphilis and other Sexually Transmitted Diseases	090.xx - 099.xx	109,429	66,674	1.64
4a.	Hepatitis B	070.20,070.22, 070.30, 070.32	21,423	11,108	1.93
4b.	Hepatitis C	070.41, 070.44, 070.51, 070.54, 070.70, 070.71	120,655	61,294	1.97
Selected Diseases of the Respiratory System					
5.	Asthma	493.xx	945,955	562,121	1.68
6.	Chronic Bronchitis and Emphysema	490.xx - 492.xx	286,002	193,911	1.47
Selected Other Medical Conditions					
7.	Abnormal Breast Findings, Female	174.xx; 198.81; 233.0x; 238.3; 793.8x	63,942	41,301	1.55
8.	Abnormal Cervical Findings	180.xx; 198.82; 233.1x; 795.0x	193,977	124,894	1.55
9.	Diabetes Mellitus	250.xx; 648.0x; 775.1x	3,904,579	1,366,643	2.86
10.	Heart Disease (selected)	391.xx - 392.0x 410.xx - 429.xx	644,535	276,202	2.33
11.	Hypertension	401.xx - 405.xx	4,321,260	2,101,506	2.06
12.	Contact Dermatitis and other Eczema	692.xx	391,553	321,498	1.22
13.	Dehydration	276.5x	23,333	17,196	1.36
14.	Exposure to Heat or Cold	991.xx - 992.xx	5,469	3,797	1.44
14a.	Overweight and Obesity	ICD-9 : 278.0 - 278.02 or V85.xx (Excluding V85.0, V85.1, V85.51 V85.52)	592,089	378,818	1.56
Selected Childhood Conditions					
15.	Otitis Media and Eustachian Tube Disorders	381.xx - 382.xx	909,042	645,810	1.41
16.	Selected Perinatal Medical Conditions	770.xx; 771.xx; 773.xx; 774.xx - 779.xx (Excluding 779.3x)	65,087	44,089	1.48
17.	Lack of Expected Normal Physiological Development (Such as Delayed Milestone; Failure to Gain Weight; Failure to Thrive)- does not include Sexual or Mental Development; Nutritional Deficiencies	260.xx - 269.xx; 779.3x; 783.3x - 783.4x	237,008	142,096	1.67

TABLE 6A - Selected Diagnoses and Services Rendered - 2011
National - Universal - 1128 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (A)	Number of Patients with Primary Diagnosis (B)	Visits Per Patient
Selected Mental Health and Substance Abuse Conditions					
18.	Alcohol Related Disorders	291.xx; 303.xx; 305.0x; 357.5x	301,180	77,051	3.91
19.	Other Substance Related Disorders (Excludes Tobacco Use Disorders)	292.1x - 292.8x; 304.xx; 305.2x - 305.9x; 357.6x; 648.3x	678,803	102,849	6.60
19a.	Tobacco Use Disorders	305.1	190,903	129,918	1.47
20a.	Depression and other Mood Disorders	296.xx; 300.4 301.13; 311.xx	2,611,219	772,895	3.38
20b.	Anxiety Disorders Including PTSD	300.0x; 300.2x; 300.3; 308.3; 309.81	1,095,927	438,218	2.50
20c.	Attention Deficit and Disruptive Behavior Disorders	312.8x; 312.9x; 313.81; 314.xx	765,701	231,360	3.31
20d.	Other Mental Disorders, Excluding Drug or Alcohol Dependence (includes Mental Retardation)	290.xx; 293.xx - 302.xx (Excluding 296.xx; 300.0x; 300.2x; 300.3; 300.4; 301.13); 306.xx - 319.xx (Excluding 308.3; 309.81; 311.xx; 312.8x; 312.9x; 313.81; 314.xx)	1,478,090	449,771	3.29

TABLE 6A - Selected Diagnoses and Services Rendered - 2011
National - Universal - 1128 Grantees

Service Category		Applicable ICD - 9 - CM or CPT - 4 Codes	Number of Visits (A)	Number of Patients (B)	Visits Per Patient
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV Test	CPT - 4: 86689; 86701 - 86703; 87390 - 87391	970,854	883,548	1.10
21a.	Hepatitis B Test	CPT-4: 88704, 88705, 87515-17	265,556	228,050	1.16
21b.	Hepatitis C Test	CPT-4: 86803-04, 87520-22	223,364	197,987	1.13
22.	Mammogram	CPT-4: 77052, 77057 OR ICD-9: V76.11; V76.12	334,591	314,776	1.06
23.	Pap Test	CPT - 4: 88141 - 88155; 88164 - 88167; 88174 - 88175 OR ICD - 9: V72.3; V72.31; V76.2	1,966,883	1,826,624	1.08
24.	Selected Immunizations (Hepatitis A, Hemophilus Influenza B (HiB), Pneumococcal, Diptheria, Tetanus, Pertussis (DTaP) (DTP) (DT), Mumps, Measles, Rubella, Poliovirus, Varicella, Hepatitis B Child)	CPT - 4: 90633 - 90634, 90645 - 90648; 90670; 90696 - 90702; 90704 - 90716; 90718 - 90723; 90743 - 90744; 90748	3,714,488	2,730,174	1.36
24a.	Seasonal Flu Vaccine	CPT-4: 90655 - 90662	2,828,349	2,580,026	1.10
24b.	H1N1 Flu Vaccine	CPT-4: 90663; 90470	102,120	90,707	1.13
25.	Contraceptive Management	ICD - 9: V25.xx	2,046,491	1,164,669	1.76
26.	Health Supervision of Infant or Child (ages 0 through 11)	CPT - 4: 99391 - 99393; 99381 - 99383	3,874,045	2,439,114	1.59
26a.	Childhood Lead Test Screening (Ages 9 to 72 months)	CPT-4: 83655	410,707	370,053	1.11
26b.	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408-99409	108,590	93,582	1.16
26c.	Smoke and Tobacco Use Cessation Counseling	CPT-4: 99406 and 99407; S9075	330,698	218,237	1.52
26d.	Comprehensive and Intermediate Eye Exams	CPT-4: 92002, 92004, 92012, 92014	264,001	226,182	1.17

TABLE 6A - Selected Diagnoses and Services Rendered - 2011
National - Universal - 1128 Grantees

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	247,824	205,222	1.21
28.	II. Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0180	4,189,502	3,165,526	1.32
29.	Prophylaxis - Adult or Child	ADA: D1110, D1120	2,300,600	1,857,984	1.24
30.	Sealants	ADA: D1351	404,461	292,656	1.38
31.	Fluoride Treatment - Adult or Child	ADA: D1203, D1204, D1206	1,557,143	1,227,621	1.27
32.	III. Restorative Services	ADA: D21xx - D29xx	2,236,309	1,177,884	1.90
33.	IV. Oral Surgery (Extractions and other Surgical Procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7260, D7261, D7270, D7272, D7280	1,086,744	811,947	1.34
34.	V. Rehabilitation Services (Endo,Perio,Prosth,Orhto)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	907,133	483,544	1.88

Sources of codes:

- International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM), Volumes 1 and 2, 2010/2011. American Medical Association.
- Current Procedural Terminology, (CPT) 2010/2011. American Medical Association.
- Current Dental Terminology, (CDT) 2010/2011. American Dental Association.

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

TABLE 6B - Quality of Care Indicators - 2011
National - Universal - 1128 Grantees

SECTION A - AGE CATEGORIES FOR PRENATAL PATIENTS (GRANTEES WHO PROVIDE PRENATAL CARE ONLY)					
DEMOGRAPHIC CHARACTERISTICS OF PRENATAL CARE PATIENTS					
AGE		Number of Patients (a)		Percent	
1.	Less than 15 Years		1,594		0.3%
2.	Ages 15 - 19		70,681		14.5%
3.	Ages 20 - 24		150,871		30.9%
4.	Ages 25 - 44		263,325		54.0%
5.	Ages 45 and Over		1,091		0.2%
6.	Total Patients (Sum lines 1-5)		487,562		100%

SECTION B - TRIMESTER OF ENTRY INTO PRENATAL CARE						
Trimester of First Known Visit for Women Receiving Prenatal Care During Reporting Year		Women Having First Visit with Grantee		Women Having First Visit with Another Provider		% Total
		(a)	%	(b)	%	
7.	First Trimester	321,091	65.9%	20,355	4.2%	70.0%
8.	Second Trimester	107,231	22.0%	9,977	2.0%	24.0%
9.	Third Trimester	23,658	4.9%	5,250	1.1%	5.9%

SECTION C - CHILDHOOD IMMUNIZATION				
Childhood Immunization		Total Number Patients with 2nd Birthday During Measurement Year (a)	Estimated number patients immunized	Estimated % patients immunized
10.	Children who have received age appropriate vaccines who had their 2nd birthday during measurement year *	-	-	-

SECTION D - CERVICAL CANCER SCREENING				
Pap Test		Total Number of Female Patients 24-64 Years of Age (a)	Estimated Number Patients tested	Estimated % Patients Tested
11.	Female patients aged 24-64 who had at least one Pap test performed during the measurement year or during one of the previous two calendar years	5,587,793	3,227,784	57.8%

SECTION E - WEIGHT ASSESSMENT AND COUNSELING FOR CHILDREN AND ADOLESCENTS				
Child and Adolescent Weight Assessment and Counseling		Total Patients Aged 3 - 17 ON December 31 (a)	Estimated number patients Assessed and Counseled	Estimated % patients Assessed and Counseled
12.	Children and adolescents aged 3 -17 with a BMI percentile, and counselling on nutrition and physical activity documented for the current year.	3,974,199	1,556,444	39.2%

SECTION F - ADULT WEIGHT SCREENING AND FOLLOWUP				
Adult Weight Screening and Follow-Up		Total Patients 18 and Over (a)	Estimated number patients with BMI Charted and Follow- UP Plan Documented as Appropriate	Estimated % patients with BMI Charted and Follow- UP Plan Documented as Appropriate
13.	Patients aged 18 and over with (1) BMI charted and (2) follow-up plan documented if patients are overweight or underweight	11,186,658	4,391,090	39.3%

SECTION G1 - TOBACCO USE ASSESSMENT				
Tobacco Assessment		Total Patients 18 and Over (a)	Estimated number patients assessed for Tobacco use	Estimated % patients assessed for Tobacco use
14.	Patients queried about tobacco use one or more times in the measurement year or prior year	9,676,820	7,696,564	79.5%

SECTION G2 - TOBACCO CESSATION INTERVENTION				
Tobacco Cessation Intervention		Total Patients with Diagnosed Tobacco Dependence (a)	Estimated number patients Advised to Quit	Estimated % patients Advised to Quit
15.	Tobacco users aged 18 or older who have received cessation advice or medication	2,108,601	1,110,973	52.7%

SECTION H - ASTHMA PHARMACOLOGICAL THERAPY				
Asthma Treatment Plan		Total Patients aged 5-40 with Persistent Asthma (a)	Estimated number with Acceptable Plan	Estimated % patients with Acceptable Plan
16.	Patients aged 5 through 40 diagnosed with asthma who have an acceptable pharmacological treatment plan	489,614	338,190	69.1%

% may not equal 100% due to rounding

Estimated % Patients for the Childhood Immunization, Pap Test, Weight Assessment and Counseling, Weight Screening and Follow-up, Tobacco Assessment and Counseling, Tobacco Cessation Advice, and Asthma Treatment Plan is 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.

* Measure was revised in 2011 and is not comparable to calendar year 2010 and prior.

TABLE 7 - Health Outcomes and Disparities - 2011
National - Universal - 1128 Grantees

Total (i)						
HIV Positive Pregnant Women	701					
Deliveries Performed by Grantee Provider	173,736					
Section A: DELIVERIES AND BIRTH WEIGHT						
	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)	8,917	3.4%	84	530	8,097	7.0%
Native Hawaiian (b1)	586	0.2%	2	34	520	6.5%
Pacific Islander (b2)	4,371	1.7%	56	219	4,341	6.0%
Black/ African American (c)	49,267	18.7%	1,118	4,347	43,826	11.1%
Hispanic/Latino	2,265	0.9%	66	138	2,091	8.9%
Non-Hispanic/Latino	47,002	17.8%	1,052	4,209	41,735	11.2%
American Indian/ Alaska Native (d)	3,312	1.3%	35	191	3,004	7.0%
White (e)	128,529	48.8%	1,407	6,765	118,647	6.4%
Hispanic/Latino	72,757	27.6%	758	3,358	67,394	5.8%
Non-Hispanic/Latino	55,772	21.2%	649	3,407	51,253	7.3%
More than one race (f)	10,173	3.9%	149	565	9,232	7.2%
Unreported/ Refused to Report Race (g)	53,305	20.2%	594	2,918	50,263	6.5%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	258,460	98.2%	3,445	15,569	237,930	7.4%
By Ethnicity						
Hispanic/Latino (section 1)	132,842	50.4%	1,478	6,535	123,169	6.1%
Non-Hispanic/Latino (section 2)	125,618	47.7%	1,967	9,034	114,761	8.7%
Sub-total (Sum section 1 + section 2)	258,460	98.2%	3,445	15,569	237,930	7.4%
Unreported / Refused to Report Race and Ethnicity (h)	4,867	1.8%	90	399	5,728	7.9%
Total (i)	263,327	100%	3,535	15,968	243,658	7.4%

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

TABLE 7 - Health Outcomes and Disparities - 2011
National - Universal - 1128 Grantees

SECTION B: HYPERTENSION		
Patients 18 to 85 diagnosed with hypertension whose last blood pressure was less than 140/90		
	Total Hypertensive Patients (2a)	Estimated % Patients with Controlled Blood Pressure
By Race		
Asian (a)	71,690	70.8%
Native Hawaiian (b1)	5,135	60.1%
Pacific Islander (b2)	12,025	64.8%
Black/ African American (c)	707,875	56.7%
Hispanic/Latino	13,240	62.5%
Non-Hispanic/Latino	694,635	56.6%
American Indian/ Alaska Native (d)	24,960	60.2%
White (e)	1,345,767	65.5%
Hispanic/Latino	307,335	65.7%
Non-Hispanic/Latino	1,038,432	65.5%
More than one race (f)	65,697	64.2%
Unreported/ Refused to Report Race(g)	269,639	66.3%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	2,502,788	
By Ethnicity		
Hispanic/Latino (section 1)	612,554	66.2%
Non-Hispanic/Latino (section 2)	1,890,234	62.3%
Sub-total (Sum section 1 + section 2)	2,502,788	
Unreported / Refused to Report Race and Ethnicity (h)	63,616	63.9%
Total (i)	2,566,404	63.3%

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

TABLE 7 - Health Outcomes and Disparities - 2011
National - Universal - 1128 Grantees

SECTION C: D114TES				
Patients 18 to 75 diagnosed with Type I or Type II diabetes: Most recent test results				
	Total patients with diabetes (3a)	Estimated % Patients with Hba1c <= 9%	Estimated % Patients with Hba1c < 8%	Estimated % Patients with Hba1c < 7%
By Race				
Asian (a)	40,222	84.3%	70.4%	45.1%
Native Hawaiian (b1)	2,914	57.9%	48.7%	32.8%
Pacific Islander (b2)	10,336	57.7%	44.5%	25.6%
Black/ African American (c)	322,911	69.3%	56.9%	38.5%
Hispanic/Latino	9,811	76.7%	59.4%	34.9%
Non-Hispanic/Latino	313,100	69.0%	56.7%	38.5%
American Indian/ Alaska Native (d)	15,270	63.5%	52.2%	36.0%
White (e)	695,917	72.1%	60.2%	41.3%
Hispanic/Latino	236,367	70.3%	56.7%	37.6%
Non-Hispanic/Latino	459,550	73.2%	62.1%	43.4%
More than one race (f)	40,440	66.6%	55.5%	36.9%
Unreported/ Refused to Report Race (g)	194,744	68.3%	54.9%	37.5%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	1,322,754			
By Ethnicity				
Hispanic/Latino (section 1)	452,000	69.3%	55.8%	37.1%
Non-Hispanic/Latino (section 2)	870,754	71.7%	60.0%	41.3%
Sub-total (Sum section 1 + section 2)	1,322,754			
Unreported / Refused to Report Race and Ethnicity (h)	30,518	69.5%	57.8%	38.0%
Total (i)	1,353,272	70.9%	58.5%	39.8%

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

TABLE 8A - Financial Costs - 2011
National - Universal - 1128 Grantees

	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	4,301,453,481	2,328,815,577	6,630,269,058
2. Lab and X-ray	344,107,406	168,887,384	512,994,790
3. Medical/Other Direct	815,636,341	394,930,394	1,210,566,735
4. Total Medical Care Services (Sum lines 1-3)	5,461,197,228	2,892,633,355	8,353,830,583
Financial Costs for Other Clinical Services			
5. Dental	1,070,335,520	530,177,564	1,600,513,084
6. Mental Health	422,353,198	205,569,622	627,922,820
7. Substance Abuse	63,388,052	36,001,138	99,389,190
8a. Pharmacy not including pharmaceuticals	295,996,703	162,453,477	458,450,180
8b. Pharmaceuticals	500,987,909		500,987,909
9. Other Professional	92,219,199	43,301,427	135,520,626
9a. Vision	36,784,919	18,910,594	55,695,513
10. Total Other Clinical Services (Sum lines 5-9a)	2,482,065,500	996,413,822	3,478,479,322
Financial Costs of Enabling and Other Program Related Services			
11a. Case Management	235,070,718		235,070,718
11b. Transportation	27,332,445		27,332,445
11c. Outreach	96,666,768		96,666,768
11d. Patient and Community Education	116,842,160		116,842,160
11e. Eligibility Assistance	90,486,961		90,486,961
11f. Interpretation Services	37,820,642		37,820,642
11g. Other Enabling Services	25,419,581		25,419,581
11. Total Enabling Services Cost (Sum lines 11a-11g)	629,639,275	313,434,928	943,074,203
12. Other Related Services	317,932,936	131,255,661	449,188,597
13. Total Enabling and Other Services (Sum lines 11-12)	947,572,211	444,690,589	1,392,262,800
Facility and Non-Clinical Support Services and Totals			
14. Facility	1,002,969,796		
15. Non-Clinical Support Services	3,330,767,970		
16. Total Facility and Non-Clinical Support Services (Sum lines 14 and 15)	4,333,737,766		
17. Total Accrued Costs (Sum lines 4+10+13+16)	13,224,572,705		13,224,572,705
18. Value of Donated Facilities, Services and Supplies			433,652,300
19. Total with Donations (Sum lines 17 and 18)			13,658,225,005

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2011
National - Universal - 1128 Grantees

	Payor Category	Charges			Collections			
		Full Charges This Period (a)	% of Payor	% of Total	Amount Collected This Period (b)	% of Payor	% of Total	% of Charges
1.	Medicaid Non-Managed Care	3,563,649,068	54.3%	25.7%	2,829,509,528	53.5%	34.5%	79.4%
2a.	Medicaid Managed Care (capitated)	1,185,050,998	18.1%	8.5%	1,061,723,317	20.1%	13.0%	89.6%
2b.	Medicaid Managed Care (fee-for-service)	1,809,607,703	27.6%	13.0%	1,396,276,123	26.4%	17.0%	77.2%
3.	Total Medicaid (Sum lines 1+2a+2b)	6,558,307,769	100%	47.3%	5,287,508,968	100%	64.6%	80.6%
4.	Medicare Non-Managed Care	1,118,556,513	85.9%	8.1%	701,907,930	87.8%	8.6%	62.8%
5a.	Medicare Managed Care (capitated)	60,457,743	4.6%	0.4%	38,217,693	4.8%	0.5%	63.2%
5b.	Medicare Managed Care (fee-for-service)	122,551,103	9.4%	0.9%	59,498,228	7.4%	0.7%	48.5%
6.	Total Medicare (Sum lines 4+5a+5b)	1,301,565,359	100%	9.4%	799,623,851	100%	9.8%	61.4%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	362,646,954	64.5%	2.6%	210,868,756	63.2%	2.6%	58.1%
8a.	Other Public including Non-Medicaid CHIP (Managed Care Capitated)	71,280,102	12.7%	0.5%	59,353,143	17.8%	0.7%	83.3%
8b.	Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	128,400,404	22.8%	0.9%	63,367,272	19.0%	0.8%	49.4%
9.	Total Other Public (Sum lines 7+8a+8b)	562,327,460	100%	4.1%	333,589,171	100%	4.1%	59.3%
10.	Private Non-Managed Care	1,417,013,613	84.6%	10.2%	809,802,055	85.1%	9.9%	57.1%
11a.	Private Managed Care (Capitated)	64,725,239	3.9%	0.5%	43,864,982	4.6%	0.5%	67.8%
11b.	Private Managed Care (fee-for-service)	193,454,139	11.5%	1.4%	97,630,234	10.3%	1.2%	50.5%
12.	Total Private (Sum lines 10+11a+11b)	1,675,192,991	100%	12.1%	951,297,271	100%	11.6%	56.8%
13.	Self Pay	3,778,047,099	100%	27.2%	818,217,716	100%	10.0%	21.7%
14.	Total (Sum lines 3+6+9+12+13)	13,875,440,678		100%	8,190,236,977		100%	59.0%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2011
National - Universal - 1128 Grantees

Payor Category	Retroactive Settlements, Receipts, and Paybacks (c)						Allowances	
	Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
1. Medicaid Non-Managed Care	210,983,821	107,294,068	8,585,186	10,605,469	316,257,606	8.9%	724,885,958	20.3%
2a. Medicaid Managed Care (capitated)	417,033,000	90,007,011	43,536,488	1,101,410	549,475,089	46.4%	123,149,674	10.4%
2b. Medicaid Managed Care (fee-for-service)	344,332,162	129,445,005	15,272,825	5,160,640	483,889,352	26.7%	354,966,659	19.6%
3. Total Medicaid (Sum lines 1+2a+2b)	972,348,983	326,746,084	67,394,499	16,867,519	1,349,622,047	20.6%	1,203,002,291	18.3%
4. Medicare Non-Managed Care	5,819,113	13,757,376	5,184,022	725,503	24,035,008	2.1%	316,747,418	28.3%
5a. Medicare Managed Care (capitated)	299,889	4,704	1,089,432	0	1,394,025	2.3%	21,891,324	36.2%
5b. Medicare Managed Care (fee-for-service)	1,224,572	917,255	1,044,364	33,845	3,152,346	2.6%	51,269,248	41.8%
6. Total Medicare (Sum lines 4+5a+5b)	7,343,574	14,679,335	7,317,818	759,348	28,581,379	2.2%	389,907,990	30.0%
7. Other Public including Non-Medicaid CHIP (Non Managed Care)	530,458	908,033	185,881	354,430	1,269,942	0.4%	138,200,069	38.1%
8a. Other Public including Non-Medicaid CHIP (Managed Care Capitated)	7,649,220	1,867,686	11,987,573	6,158	21,498,321	30.2%	12,089,348	17.0%
8b. Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	650,193	239,722	140,807	41,087	989,635	0.8%	53,307,427	41.5%
9. Total Other Public (Sum lines 7+8a+8b)	8,829,871	3,015,441	12,314,261	401,675	23,757,898	4.2%	203,596,844	36.2%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2011
National - Universal - 1128 Grantees

Payor Category	Retroactive Settlements, Receipts, and Paybacks (c)					Allowances		
	Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
10. Private Non-Managed Care			1,322,584	93,838	1,228,746	0.1%	500,319,498	35.3%
11a. Private Managed Care (Capitated)			3,532,966	41	3,532,925	5.5%	20,829,359	32.2%
11b. Private Managed Care (fee-for-service)			1,979,939	18,700	1,961,239	1.0%	80,284,557	41.5%
12. Total Private (Sum lines 10+11a+11b)			6,835,489	112,579	6,722,910	0.4%	601,433,414	35.9%
13. Self Pay								
14. Total (Sum lines 3+6+9+12+13)	988,522,428	344,440,860	93,862,067	18,141,121	1,408,684,234	10.2%	2,397,940,539	17.3%
13. Self Pay	Sliding Discounts (e)				Bad Debt Write Off (f)			
				2,442,869,227				344,079,360

% may not equal 100% due to rounding

TABLE 9E -Other Revenues - 2011
National - Universal - 1128 Grantees

Source	Amount (a)	% Group Total
BPHC Grants (Enter Amount Drawn Down - Consistent with PMS-272)		
1a. Migrant Health Center	176,736,647	7.7%
1b. Community Health Center	1,778,588,921	77.5%
1c. Health Care for the Homeless	183,752,390	8.0%
1e. Public Housing Primary Care	28,229,004	1.2%
1g. Total Health Center Cluster (Sum lines 1a through 1e)	2,167,306,962	94.4%
1j. Capital Improvement Program Grants (excluding ARRA and ACA)	4,995,416	0.2%
1k. Affordable Care Act (ACA) Capital Development Grants	123,061,705	5.4%
1. Total BPHC Grants (Sum Lines 1g+1j+1k)	2,295,364,083	100%
Other Federal Grants		
2. Ryan White Part C HIV Early Intervention	77,311,380	7.7%
3. Other Federal Grants	173,404,459	17.2%
3a. Medicare and Medicaid EHR Incentive Payments for Eligible Providers	71,861,087	7.1%
4. American Recovery and Reinvestment Act (ARRA) New Access Point (NAP) and Increased Demand for Services (IDS)	76,255,614	7.5%
4a. American Recovery and Reinvestment Act (ARRA) Capital Improvement Project (CIP) and Facility Investment Program (FIP)	611,226,723	60.5%
5. Total Other Federal Grants (Sum Lines 2-4a)	1,010,059,263	100%
Non-Federal Grants Or Contracts		
6. State Government Grants and Contracts	584,723,241	30.1%
6a. State/Local Indigent Care Programs	442,613,899	22.8%
7. Local Government Grants and Contracts	417,346,400	21.5%
8. Foundation/Private Grants and Contracts	495,367,133	25.5%
9. Total Non-Federal Grants Or Contracts (Sum lines 6+6a+7+8)	1,940,050,673	100%
10. Other Revenue (Non-patient related revenue not reported elsewhere)	444,603,148	100%
11. Total Revenue (Sum lines 1+5+9+10)	5,690,077,167	

% may not equal 100% due to rounding

Electronic Health Record (EHR) Information - 2011
National - Universal - 1128 Grantees

Health Centers that have an EHR installed		Number of Grantees	% of Total
1a.	Available for all providers at all sites	735	65.2%
1b.	Limited to some sites or some providers	163	14.5%
Total Health Centers with EHR installed (Sum 1a + 1b)		898	79.6%
1c.	No EHR installed	230	20.4%
Total Health Centers reported		1,128	100%
EHR Functionalities^{1,2}		Number of Grantees³	% of Total³
2a.	Patient history and demographic information	896	99.8%
2b.	Clinical notes	894	99.6%
2c.	Computerized provider order entry (CPOE) for lab tests	872	97.1%
2d.	Computerized provider order entry (CPOE) for radiology tests	686	76.4%
2e.	Electronic entry of prescriptions	887	98.8%
2f.	Reminders for guideline-based interventions or screening tests	843	93.9%
2g.	Capability to exchange key clinical information among providers of care and patient-authorized entities electronically	697	77.6%
2h.	Notifiable diseases: notification sent electronically	362	40.3%
2i.	Reporting to immunization registries done electronically	548	61.0%
2j.	Ability to provide patients with a copy of their health information on request	789	87.9%
2k.	Capacity to provide clinical summaries for patients for each office visit	859	95.7%
2l.	Protection of electronic health information	891	99.2%
UDS Use¹		Number of Grantees	% of Total³
3	Use an EHR to report clinical UDS data (Table 6B and 7)	681	75.8%

1. For Health Centers with an EHR installed

2. Meaningful Use functionalities include lines 2a, 2c, 2f, 2g, 2i, 2j, 2k and 2l

3. Includes Health Centers whose systems have the capability but it is turned off or not used.