

2010 Harris County Community Clinic
Annual Performance Indicator Report

Harris County Healthcare Alliance

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Harris County Healthcare Alliance
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Purpose

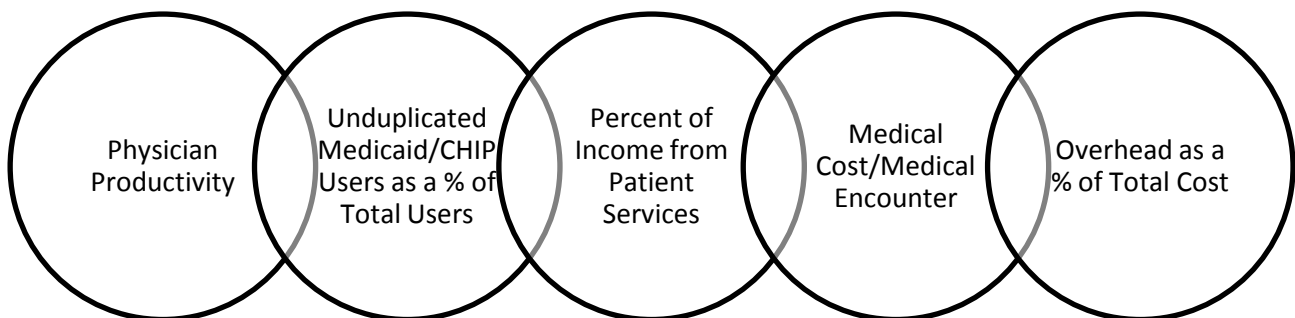
To better track and report the performance of Harris County’s community clinics, the Harris County Healthcare Alliance (the Alliance) collected and compiled 2009 and 2010 data from 18 community clinics (9 Federally Qualified Health Centers or FQHCs, 1 FQHC Look-Alike, and 8 non-FQHC clinics). This analysis was first conducted by Health Management Associates for their 2008 Strategic Assessment of Primary Care Capacity in Harris County report commissioned by the Alliance. After release of that report, the Alliance facilitated agreement among community clinic executives and philanthropic funders on a common set of performance indicators that would continue to be reported annually.

Methodology

Community clinic executives and philanthropic funders agreed upon three broad categories of performance indicators – sustainability, health outcomes, and patient demographics. The 15 sub-categories are detailed below.

Sustainability	Health Outcomes	Patient Demographics
<ul style="list-style-type: none">•Capacity•Staffing•Productivity•Payer Mix•Revenue•Costs•Operating Margin	<ul style="list-style-type: none">•Diabetes•Blood Pressure•PAP Tests•Prenatal Care•Immunizations	<ul style="list-style-type: none">•Age•Race/Ethnicity•Language

More than 100 variables are reported for each clinic; 5 specific indicators were selected to demonstrate improved sustainability of clinics supported by the Community Clinics Funders’ Collaborative. Note that all dollar figures are adjusted for inflation to 2009 dollars.¹

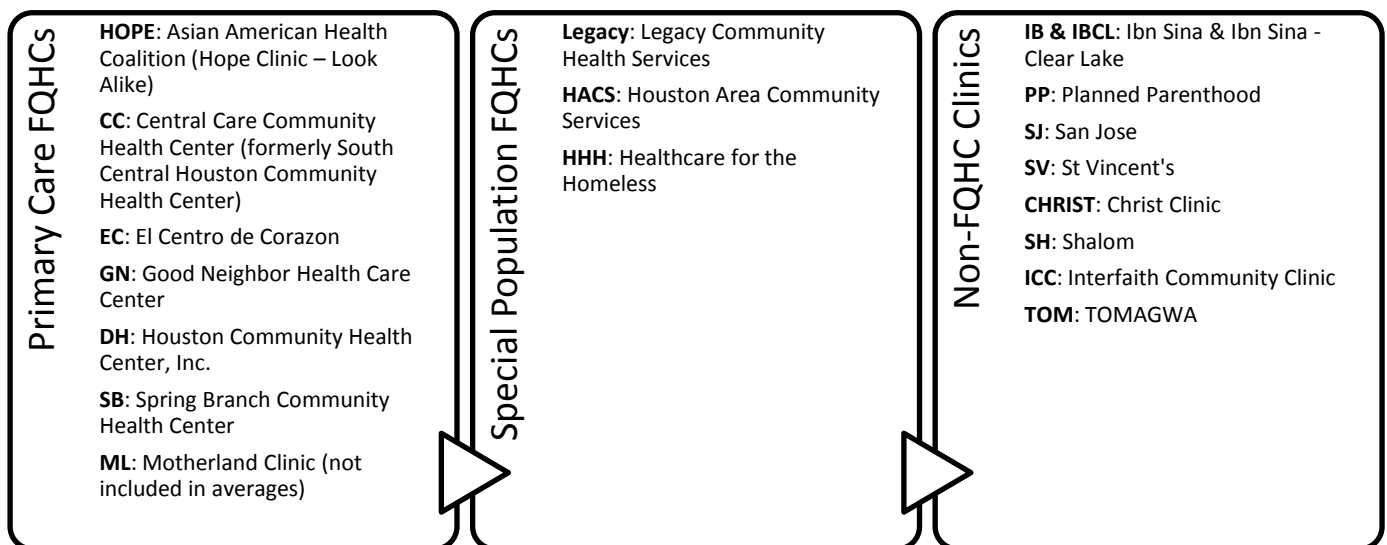


¹ 2010 dollars are adjusted back to 2009 dollars using the CPI – Medical inflation factor of 0.95467388427 from the Bureau of Labor Statistics.

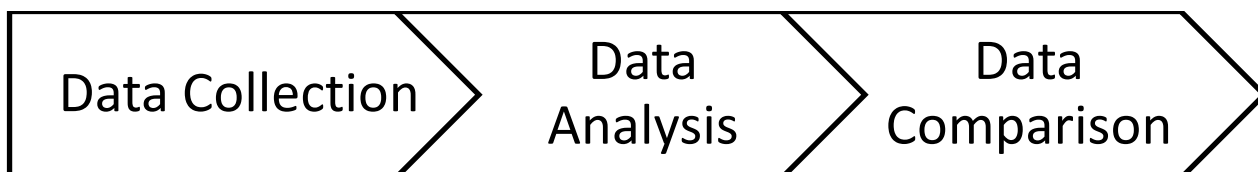
Due to the significant differences between the mandated cost structure and services provided by primary care FQHCs, special population FQHCs, and non-FQHC clinics, the Alliance and St. Luke’s Episcopal Health Charities established a mechanism to distinguish between the different types of clinics and subsequently benchmark data for these different categories of clinics. The 19 clinics are separated into three broad categories. The 7 primary care FQHCs are listed below. It is important to note that Motherland Clinic did not achieve FQHC designation or join the Alliance until after the original benchmarks were implemented; therefore, Motherland Clinic’s numbers are reported but not included in the Primary Care FQHC averages.

The 3 special population FQHCs listed below will be benchmarked and reported separately due to the vastly different cost structures and patient demographics. Legacy provides adult, child, and HIV/AIDs services to the community whereas HACs provide mainly adult HIV/AIDs services. Furthermore, Healthcare for the Homeless serves a mainly homeless and uninsured population with a different set of healthcare needs. Note that Legacy is compared to the state and national FQHC data, but HACs and HHH are not as these two clinics are not comparable to the state and national FQHCs as a whole.

Finally, the 8 non-FQHC clinics listed below are currently in the process of being benchmarked. It is anticipated that the next 6 months will focus on setting common definitions and goals for these 8 clinics. Analysis and reporting for the Non-FQHCs is forthcoming.



Alliance staff undertook a three-step process– data collection, data analysis, and data comparison. First, data was collected from all 19 community clinics. The 2009 and 2010 Uniform Data System (UDS) values from the U.S. Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA) reports or their equivalents were collected from each of the above listed clinics. Next, the un-weighted averages were calculated for Primary Care FQHC group for both years. Finally, those 2009 and 2010 averages were compared to the benchmarks established in 2010 and/or 2009 national or state data (the most recent available).



Primary Care FQHCs

In 2010 the six Harris County primary care FQHCs cared for a combined total of 40,454 medical patients through 91,405 medical encounters. While the 2010 average Primary Care FQHC number of patients and encounters remain significantly below the 2009 national average and 2009 Texas state average, it does represent a 23% increase in medical patients served and a 16% increase in medical encounters provided by these 6 FQHCs compared to 2009.

Capacity	2009 FQHC Average	2010 FQHC Average	2009 National Average	2009 Texas Average
Number of Patients	6,027	7,223	16,582	13,901
Medical Care Service Patients	5,489	6,742	14,294	12,143
Number of Encounters or Visits	15,927	18,296	65,278	51,756
Total Medical Care Service Encounters	13,079	15,234	48,211	38,988

In addition to this increased volume, there was a 23% increase in total accrued costs and 17% increase in accrued revenues (full patient charges plus total other revenue). The combined FQHC operating margin worsened only slightly from \$8.4M in 2009 to \$9M in 2010 as did the average operating margin from \$1.4M to \$1.5M, which is three times smaller in magnitude than the national and state averages in 2009.

Operating Margin	2009 FQHC Total	2009 FQHC Average	2010 FQHC Total	2010 FQHC Average	2009 National Average	2009 Texas Average
Total Accrued Costs	\$17,003,883	\$2,833,981	\$20,865,122	\$3,477,520	\$9,946,146	\$7,915,949
Total Accrued Revenue	\$25,451,423	\$4,241,904	\$29,894,634	\$4,982,439	\$14,368,230	\$12,261,092
Margin	\$8,447,540	\$1,407,923	\$9,029,512	\$1,504,919	\$4,422,084	\$4,345,143

Performance Indicator Summary

The results of the 2010 performance indicator analysis are summarized below. The attached chart contains a complete table of all composite results and the attached graphs contain an illustration of the benchmarks to date.

Provider Productivity

Reported average physician productivity fell among the Primary Care FQHCs from 3,778 in 2009 to 3,537 in 2010. The average Primary Care FQHC physician productivity in 2010 falls below both the 2009 national and 2009 Texas averages of 3,771 and 4,076, respectively. Among the six Primary Care FQHCs average physician productivity varies from 2,445 to 4,526.²

El Centro's provider productivity was low in 2010 due to the opening of two new clinics with low startup productivity. Additionally, Good Neighbor's physician productivity fell from 2009 to 2010 due to the implementation of a new Electronic Health Record or EHR (began in June/July 2010); therefore the physicians were slowed down by the learning curve associated with a new electronic health record system.

² In calculating the average physician productivity, residents were removed from the Harris County averages, but were not removed from the National or State averages due to data availability.

Also, Good Neighbor added a residency program at the Northside location; the physician dedicates time to educate the residents resulting in a lower number of encounters and therefore lower productivity.

Finally, the fall in physician productivity at Spring Branch is due to the clinic moving into a new main facility in April 2009 and adding a satellite location in November 2009. The change in business location impacted existing patients. The old location was taken over by a family physician that retained SBCHC patients because of proximity to their home. There were additional patient visits in 2009 because of the clinic relationship with the Spring Branch Medical Center (community hospital blocks away). In 2010, the hospital closed down and the prenatal program suffered significantly. The number of patients enrolling into the prenatal program declined due to the delivery hospital changing to LBJ. Patients were not satisfied with having to travel to a county hospital so they started dropping out of the program or not enrolling to find providers that delivered at Memorial Hermann Northwest. The prenatal program has always helped increase productivity in other departments especially in pediatrics so this has been a challenge.

The average mid-level productivity increased slightly (from 2,624 to 2,754) from 2009 to 2010, which is just below the national and state averages in 2009. The number of medical patients per medical provider fell in from 1,729 in 2009 to 1,604 in 2010, which is 500 above the national average and 400 above the state average. The ratio of medical encounters to medical users (often considered a measure of the continuity of care provided patients) fell from 2.44 to 2.37 almost one full encounter fewer per patient than the state and national averages. This decrease can be attributed to the fall in the physician productivity explained above.

Productivity	2009 FQHC Average	2010 FQHC Average	2009 National Average	2009 Texas Average
Physician Encounter Productivity	3,778	3,537	3,771	4,076
Midlevel Encounter Productivity	2,624	2,754	2,931	3,020
Medical Patients per Medical Provider	1,729	1,604	1,086	1,217
Ratio of Medical Encounters to User	2.44	2.37	3.37	3.21

Payer Mix

In 2010 the average percentage of unduplicated users of FQHCs who were self-pay declined from 61% to 55%. Harris County Primary Care FQHCs ranged from a low of 33% self-pay to a high of 78% self-pay. This is significantly higher than the national average but on par with the state average in 2009. Medicaid³ accounted for 25% of the unduplicated users of Harris County Primary Care FQHCs. The percentage of patients covered by Medicaid varied from 18% to 34% among these FQHCs in 2010. This is on par with the Texas average but below the national average of 37%. The fall in Medicaid patients at Spring Branch was due to the loss of prenatal and pediatric patients related to the hospital closure explained in the previous section.

Harris County Primary Care FQHC users who were funded by other public sources⁴ increased from 10% to 14%. This is five times larger than the national average and three times higher than the state average. The percentage of unduplicated users who were covered by Medicare remained relatively flat from 2% to 3% from 2009 to 2010; but the percentage covered by Private Insurance fell from 4% to 3% in 2010 for Harris

³ Medicaid includes CHIP.

⁴ Other Public sources includes the Primary Health Care (PHC) program and other public sources not included within the Medicaid/CHIP programs nor included as government grant programs with a limited and specific set of benefits (i.e. Family Health Plan (FHP), Ryan White, Title programs).

County FQHCs, which is significantly lower than the most recently reported national and state averages of 15% and 9%, respectively.

Payer By Percent of Total Patients	2009 FQHC Average	2010 FQHC Average	2009 National Average	2009 Texas Average
Medicaid/CHIP	23%	25%	37%	25%
Medicare	2%	3%	7%	6%
Other Public	10%	14%	3%	5%
Private Insurance	4%	3%	15%	9%
Uninsured/Self-Pay	61%	55%	38%	56%

Sources of Revenue

The percent of income from patient services increased from 31% to 39% of total income, which is an improvement, but still lower than the national average of 60% and state average of 47%. The percentage of income received by Harris County Primary Care FQHCs in 2010 from the Bureau of Primary Health Care (BPHC: source of Section 330 FQHC grants) fell from 28% to 22% as revenues from patient services increased. The percentage of income received from the BPHC among Harris County FQHCs ranged from 0% to 53% in 2010.⁵ The percentage of income from Section 330 grants is comparable to the Texas average of 23%; yet, this is higher than the national average of 17%.

The percent of income from Other Sources fell slightly from 41% to 39%, but is still higher than the national and state averages of 23% and 30%, respectively.⁶ This larger percent from other sources in Harris County is attributable to the large number of non-federal grants and contracts and other revenue (which includes but is not limited to state and local grants and contracts, foundation or private grants and contracts, and state or local indigent care programs).

Revenue By Percent of Total Revenue	2009 FQHC Average	2010 FQHC Average	2009 National Average	2009 Texas Average
% Income from Patient Services	31%	39%	60%	47%
% Income from 330 Grant BPHC	28%	22%	17%	23%
% Income from Other Sources	41%	39%	23%	30%
a. Other Federal Grants	2%	3%	4%	4%
b. Non-Federal Grants and Contracts	26%	26%	16%	24%
c. Other Revenue	12%	9%	3%	3%

Costs of Care

The 2010 inflation adjusted⁷ medical cost per medical encounter (factoring out dental, mental health and other services provided) at Harris County Primary Care FQHCs rose from \$145 in 2009 to \$160 in 2010 (range of \$74 to \$245). This is a 10% increase in the medical cost per medical encounter and about \$30 higher than

⁵ HOPE Clinic, as an FQHC look alike, does not receive Section 330 funding; therefore HOPE has 0% income from BPHC.

⁶ Percentage of Total Revenue calculations exclude all ARRA Capital Improvement Project (CIP)/FIP funding, which falls under the Other Federal Grants category.

⁷ 2010 dollars are adjusted back to 2009 dollars using the CPI – Medical inflation factor of 0.95467388427 from the Bureau of Labor Statistics.

the national and state averages. At El Centro, the Medical Cost per Medical Encounter went up in 2010 because of the addition of a full time CMO, the opening of two new clinics with low startup productivity, the addition of a year round after hours clinic, and the utilization of an OB that did more gynecology than obstetrics. At Good Neighbor, due to additional space and increased staffing at current and new satellite sites, the Medical Cost/Medical Encounter rose from 2009 to 2010.

At Spring Branch the Medical Cost/Medical Encounter rose because the expenses increased due to expanding in 2009 to a new facility that almost tripled the size of the existing one. The clinic also added a satellite location in the same year. In 2010 Spring Branch began absorbing the costs of two locations totaling approximately 14,000 sq ft of space versus the small 3,000 sq ft building previously occupied. Staff numbers also increased from 18 employees to 33 employees between the two facilities not including providers. Provider costs added to the expenses since the clinic contracted with UT for additional services at the satellite location.

Harris County Primary Care FQHC medical cost per medical patient and total cost per patient (also inflation adjusted)⁶ both rose from 2009 to 2010. Harris County FQHC medical cost per patient in 2010 was \$388 (range of \$93 to \$644), which is also close to the Texas average and lower than the national average. The average total cost per patient was \$514 (range of \$235 to \$790), which is lower than the national and state averages. In 2010, 41% of total costs went to overhead; overhead as a percentage of total costs among Harris County FQHCs ranged from a low of 26% to a high of 48% in 2010. This is lower than the 2009 average of 44%, but still higher than the national and state averages of 32%.

Costs of Care	2009 FQHC Average	2010 FQHC Average	2009 National Average	2009 Texas Average
Medical Cost per Medical Encounter	\$144.60	\$159.77	\$131.08	\$130.01
Medical Cost per Medical Patient	\$350.64	\$387.98	\$414.43	\$386.03
Total Cost per Patient	\$466.66	\$513.56	\$599.83	\$569.44
Overhead as % of Total Cost	44%	41%	32%	32%

Note: All dollar figures are inflation-adjusted to 2009 dollars using Medical Consumer Price Index from the Bureau of Labor Statistics.

Demographic Characteristics

On average, Harris County Primary Care FQHCs saw a steady number of pediatric patients at 28% in 2009 to 29% in 2010, comparable to the national and state averages. However, in 2010 these FQHCs saw fewer geriatric patients (6% in 2009 to only 3% in 2010), which is lower than the state and national averages of 7%. As expected given the population of Harris County, its FQHCs see a higher percentage of patients who are Hispanic or Latino (55%) compared to the national average, but lower than the Texas average of 64%.

Demographics	2009 FQHC Average	2010 FQHC Average	2009 National Average	2009 Texas Average
Pediatrics (<15 years old)	28%	29%	29%	31%
Geriatric (age 65 and over)	6%	3%	7%	7%
Asian/Pacific Islander	8%	8%	3%	1%
Black/African American	19%	22%	20%	11%
Native American	0%	0%	1%	0%
Hispanic or Latino	60%	55%	33%	64%
White	4%	4%	34%	20%
More than One Race	0%	6%	1%	0%
Unreported/Refused to Report	8%	5%	8%	3%
With Linguistic Barrier	61%	61%	25%	38%

Health Outcome Indicators

Beginning in 2008, FQHCs were required to report several key health outcome indicators including the percentage of diabetic patients whose blood sugar levels were considered to be under control, the percentage of patients with cardiovascular disease whose blood pressure were considered to be under control, and the percentage of patients who received the age and gender appropriate cancer screenings.

From 2009 to 2010 the percent of patients with controlled blood sugar levels remained flat at 67% (ranging from 56% to 84% in 2010). This is comparable to the national and state averages of 71% and 65%, respectively. The percent of patients in Harris County FQHCs with controlled blood pressure decreased from 61% in 2009 to 55% in 2010 with a range from 40% to 72% in 2010, and falling below the national and state averages of 63% and 64%. Finally, from 2009 to 2010, the percentage of patients that received age and gender appropriate cancer screenings⁸ remained stable at 74% at Harris County FQHCs (ranging from 46% to 99%). This is significantly higher than the national and state averages of 58% and 55%, respectively.

Beginning in 2009, the percent of patients initiating prenatal care in the first, second, and third trimesters was abstracted from each FQHC's UDS report; these average percentages were 54%, 41%, and 5%, respectively at Harris County FQHCs. In 2010 these percentages rose for the first and third trimester, but fell for the second trimester at 57%, 34%, and 9%, respectively. This is similar to the Texas averages but lower than the national average for the 1st trimester. Also, the percent of patients receiving appropriate immunizations by their 2nd birthday rose from 75% to 76% in 2010 at Harris County FQHCs, which is higher than the national and state averages.

Health Outcome Indicators	2009 FQHC Average	2010 FQHC Average	2009 National Average	2009 Texas Average
Diabetes -HB A1c ≤ 9%	68%	67%	71%	65%
Cardiovascular Disease - Blood Pressure	61%	55%	63%	64%
Cancer - Screenings	73%	74%	58%	55%
Prenatal Care - 1st Trimester	54%	57%	67%	58%
Prenatal Care - 2nd Trimester	41%	34%	27%	34%
Prenatal Care - 3rd Trimester	5%	9%	6%	9%
Appropriate immunizations by 2nd bday	75%	76%	69%	68%

⁸ As measured by the number of female patients aged 21-64 who had at least one PAP during one of the two previous years.

Performance Indicator Goals

Community clinic executives and philanthropic funders agreed upon five specific performance indicators that were benchmarked in 2009 and are closely tracked. These five indicators were selected to demonstrate improved sustainability of the area's safety net clinics supported by the Community Clinics Funders' Collaborative. Below is a summary chart detailing the 2009 and 2010 averages compared to the 2012 goals. Each indicator is described in the subsequent sub-sections. Motherland Clinic is reported but not included in any averages or goals due to late entry into the collaboration.

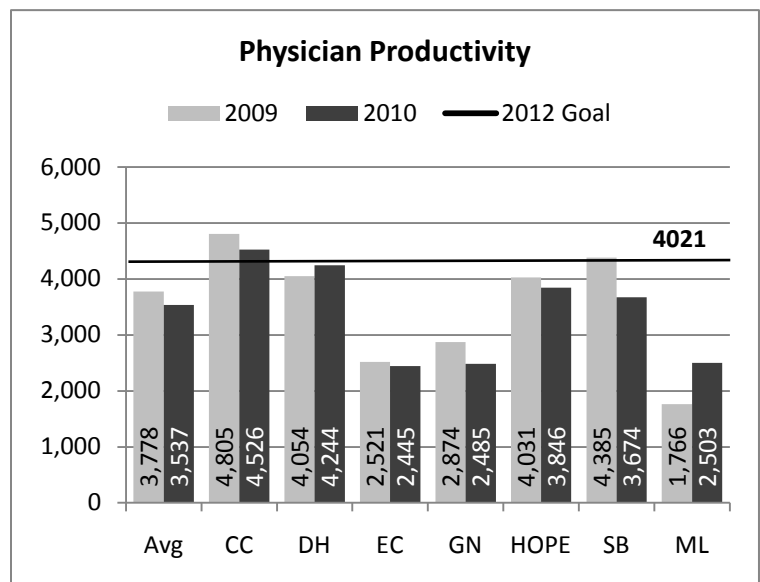
Performance Indicator	2009 Average (Baseline)	2010 Average (Year 1 Progress)	2012 Goal
Physician Productivity	3778	3537	4021
Unduplicated Medicaid/CHIP Users as a % of Total Users	23%	25%	29%
Percent of Income from Patient Services	31%	39%	40%
Medical Cost/Medical Encounter	\$145	\$160	\$137
Overhead as a % of Total Cost	44%	41%	37%

Physician Productivity

Average physician productivity⁹ fell by 6% from 2009 to 2010. The fall in the average physician productivity is driven by the 13.5% fall in productivity at Good Neighbor and 16% fall in productivity at Spring Branch.

Good Neighbor's physician productivity fell from 2009 to 2010 due to the implementation of a new Electronic Health Record or EHR (began in June/July 2010); therefore the physicians were slowed down by the learning curve associated with a new electronic health record system. Also, Good Neighbor added a residency program at the Northside location wherein the physician dedicates time to educate the residents, resulting in a lower number of encounters and therefore lower productivity.

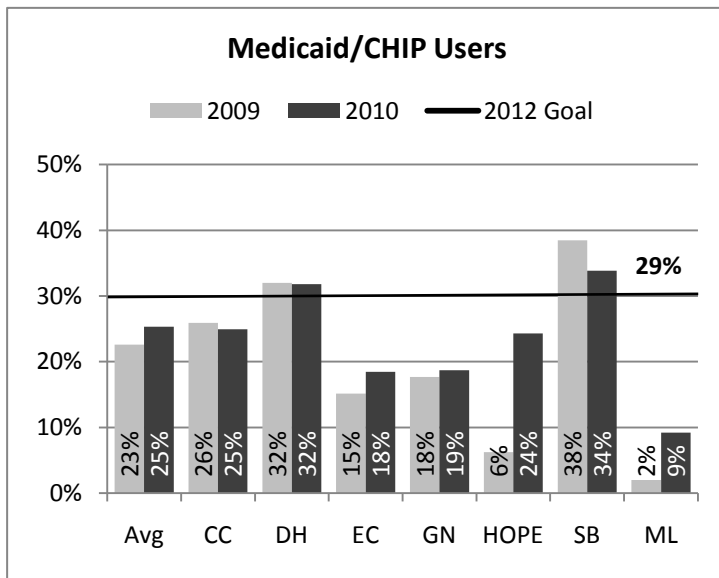
At Spring Branch Community Health Center (SBCHC), therefore, the fall in physician productivity is due to SBCHC moving into a new main facility in April 2009 and adding a satellite location in November 2009. The change in business location impacted the number of encounters of SBCHC existing patients. The old location was taken over by a family physician that retained SBCHC patients because of proximity to their home. SBCHC also realized more patient visits in 2009 because of the relationship SBCHC had with the Spring Branch Medical Center (community hospital blocks away). In 2010, the hospital closed down and the prenatal program suffered significantly. The number of patients enrolling into the prenatal program declined due to the delivery hospital changing to LBJ Hospital. Patients were not happy having to travel to LBJ so they started dropping out of the program or enrolling with Providers that delivered at Memorial Hermann Northwest. The prenatal program has always helped increase productivity in other departments especially in pediatrics so this has been a challenge.



⁹ Residents are not included in physician FTEs.

Unduplicated Medicaid/CHIP Users as a % of Total Users

The average percent of unduplicated Medicaid/CHIP users as a percent of total users increased from 23% to 25% from



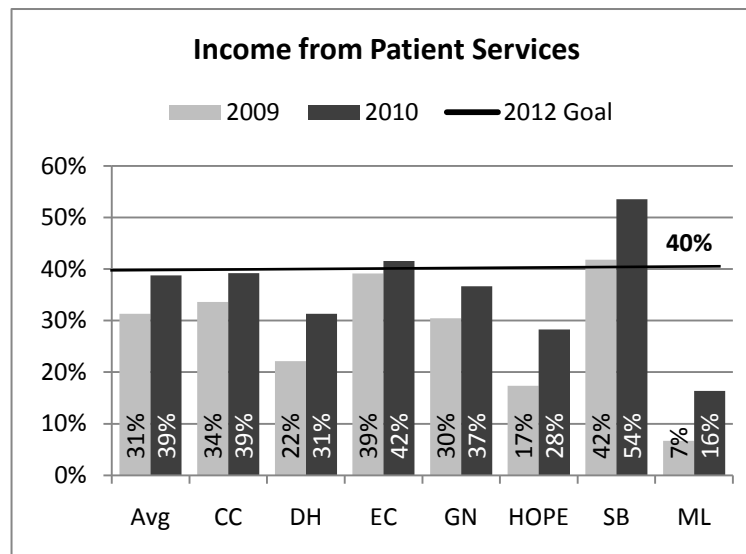
2009 to 2010. This increase was largely due to the increase in Medicaid/CHIP users at HOPE clinic, which increased from 6% to 24% in just one year. Although the mission of several of these clinics is to help the uninsured and underinsured population of Harris County, the goal of 29% of patients as Medicaid/CHIP users is aimed at creating a sustainable clinic.

One clinic, Spring Branch Community Health Center, experienced a fall in Medicaid/CHIP patients as a result of the aforementioned loss of prenatal patients and pediatric patients.

The remaining clinics saw a steady number of Medicaid/CHIP patients over the 2 year period.

Percent of Income from Patient Services

The average percent of income from Patient Services¹⁰ increased from 31% to 39% between 2009 and 2010 which is close to the 40% goal for 2012. The increase is driven by increases in Patient Services income from all clinics, mainly Spring Branch Community Health Center, which can be partially attributed to the increased expansion and therefore an increase in the collections received in 2010.



Medical Cost/Medical Encounter

The figures for medical cost per medical encounter are adjusted for inflation to 2009 dollars. The medical cost per medical encounter rose by 10% from 2009 to 2010 and is 17% above the 2012 goal of \$137. It is important to note that each clinic uses a different cost allocation methodology to distribute shared costs (rent, utilities, etc) across programs (medical, dental, etc).

¹⁰ Includes actual patient revenue collected from patients and their respective insurance or funding source.

The overall average increase is driven by El Centro, Good Neighbor, and Spring Branch. At El Centro, the Medical Cost per Medical Encounter went up in 2010 because of the addition of a full time Chief Medical Officer, the opening of two new clinics with low startup productivity, the addition of a year round after hours clinic, and the utilization of an

obstetrician who saw more gynecology than obstetrics patients.

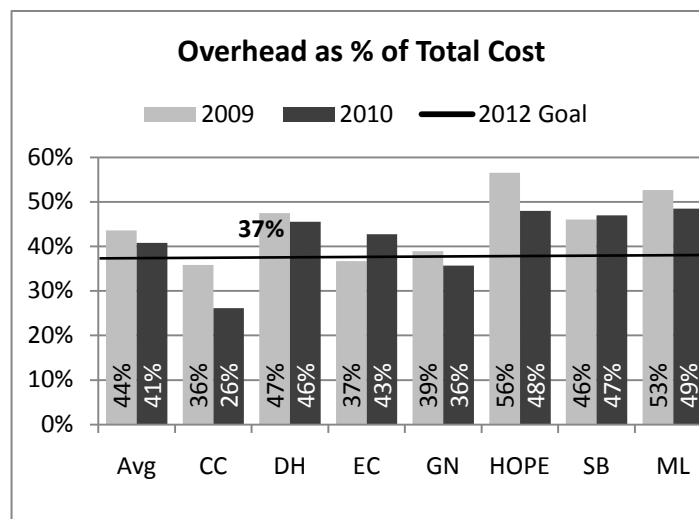
At Good Neighbor the medical cost/medical encounter rose from 2009 to 2010 due to additional space and increased staffing at the current and new satellite sites.

At Spring Branch this measure rose because the expenses increased due to expanding in 2009 to a new facility that almost tripled the size of the existing one. The clinic also added a satellite location in the same year. In 2010 Spring Branch began absorbing the costs of the two locations totaling approximately 14,000 sq ft of space versus the small 3,000 sq ft building previously occupied. Staff numbers also increased from 18 employees to 33

employees between the two facilities, not including providers. Provider costs added to the expenses as well since Spring Branch contracted with UT for additional services at the satellite location.

Overhead as a % of Total Cost

From 2009 to 2010 the average overhead as a percent of total cost fell from 44% to 41%, which is moving closer to the 2012 goal of 37%. This decrease is driven by a fall in overhead as a percent of total cost at a majority of the clinics.



Performance Indicator Tables

The following nine sets of tables provide the raw data associated with the above analysis.

Capacity

CAPACITY INDICATORS – TOTALS & AVERAGES	2009 National		2009 Texas		Harris County TOTAL		Harris County AVERAGE	
	1131 Grantees	AVERAGE	65 Grantees	AVERAGE	2009	2010	2009	2010
Number of Patients	18,753,858	16,582	903,586	13,901	36,160	43,337	6,027	7,223
Medical Care Service Patients	16,166,416	14,294	789,277	12,143	32,933	40,454	5,489	6,742
Dental Service Patients	3,438,340	3,040	178,474	2,746	4,204	4,400	701	733
Mental Health Service Patients	758,131	670	24,985	384	1,233	1,268	206	211
Vision Service Patients	NA	NA	NA	NA	NA	0	NA	0
Number of Visits	73,829,866	65,278	3,364,159	51,756	95,562	109,776	15,927	18,296
Physician Encounters	34,233,343	30,268	1,505,758	23,166	49,723	52,100	8,287	8,683
Family Physician Encounters	16,053,540	14,194	740,767	11,396	35,288	34,170	5,881	5,695
General Practitioner Encounters	1,493,045	1,320	39,926	614	0	0	0	0
Internists Encounters	5,671,680	5,015	227,164	3,495	2,060	1,688	343	281
Obstetrician/Gynecologists Encounters	3,054,101	2,700	155,905	2,399	2,968	1,906	495	318
Pediatricians Encounters	6,971,252	6,164	320,211	4,926	9,407	14,336	1,568	2,389
Other Specialist Physician Encounters	989,725	875	21,785	335	0	0	0	0
Midlevel Encounters	16,877,080	14,922	837,851	12,890	26,984	33,222	4,497	5,537
Nurse Practitioners Encounters	9,709,783	8,585	511,087	7,863	10,635	14,042	1,773	2,340
Physician Assistant Encounters	5,947,384	5,259	289,803	4,459	5,859	6,762	977	1,127
Certified Nurse Midwives Encounters	1,219,913	1,079	36,961	569	10,490	12,418	1,748	2,070
Nurse Encounters	3,416,755	3,021	190,605	2,932	3,909	6,083	652	1,014
Total Medical Care Service Encounters	54,527,178	48,211	2,534,214	38,988	78,476	91,405	13,079	15,234

CAPACITY INDICATORS - CLINICS	Central Care		Denver Harbor		El Centro		Good Neighbor		HOPE		Spring Branch		MotherLand	
	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010
Number of Patients	7,210	10,139	6,600	6,805	5,929	6,577	6,335	7,253	5,601	7,365	4,485	5,198	1,503	2,832
Medical Care Service Patients	6,951	10,139	5,687	6,208	4,999	5,535	5,210	6,009	5,601	7,365	4,485	5,198	1,503	2,832
Dental Service Patients	289	279	1,187	1,300	1,341	1,362	1,387	1,459	0	0	0	0	0	37
Mental Health Service Patients	0	0	291	305	896	850	23	87	0	0	23	26	0	7
Vision Service Patients	NA	0	NA	0	NA	0	NA	0	NA	0	NA	0	NA	0
Number of Visits	13,262	19,893	19,750	20,580	21,377	22,598	18,700	18,812	7,786	9,459	14,687	18,434	1,929	5,915
Physician Encounters	9,178	6,337	15,526	16,381	7,814	7,605	5,720	7,505	4,031	6,557	7,454	7,715	724	851
Family Physician Encounters	9,178	6,337	13,703	12,060	0	2,200	5,720	7,505	4,031	3,623	2,656	2,445	724	851
General Practitioner Encounters	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Internists Encounters	0	0	0	0	2,060	448	0	0	0	1,240	0	0	0	0
Obstetrician/Gynecologists Encounters	0	0	0	0	2,238	1,228	0	0	0	0	730	678	0	0
Pediatricians Encounters	0	0	1,823	4,321	3,516	3,729	0	0	0	1,694	4,068	4,592	0	0
Other Specialist Physician Encounters	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Midlevel Encounters	2,963	10,956	0	0	6,181	6,933	8,388	7,009	3,755	717	5,697	7,607	1,205	5,016
Nurse Practitioners Encounters	594	7,105	0	0	0	0	4,723	4,057	3,755	717	1,563	2,163	1,205	2,317
Physician Assistant Encounters	2,369	3,851	0	0	3,490	2,911	0	0	0	0	0	0	0	2,699
Certified Nurse Midwives Encounters	0	0	0	0	2,691	4,022	3,665	2,952	0	0	4,134	5,444	0	0
Nurse Encounters	763	1,810	145	0	0	0	46	120	2,140	2,185	815	1,968	0	0
Total Medical Care Service Encounters	12,904	19,103	15,671	16,381	13,995	14,538	14,154	14,634	7,786	9,459	13,966	17,290	1,929	5,867

Staffing¹¹

Staffing (FTEs)	2009 National		2009 Texas		Harris County TOTAL		Harris County AVERAGE	
	1131 Grantees	AVERAGE	65 Grantees	AVERAGE	2009	2010	2009	2010
Physicians	9124.78	8.07	371.20	5.71	13.73	16.49	2.29	2.75
Family Physicians	4259.93	3.77	179.97	2.77	11.16	13.19	1.86	2.20
Residents/Medical Students	-	-	-	-	2.61	3.90	0.44	0.65
General Practitioners	381.40	0.34	10.27	0.16	0.00	0.00	0.00	0.00
Internists	1545.32	1.37	56.37	0.87	0.96	1.31	0.16	0.22
Obstetrician/Gynecologists	864.06	0.76	39.02	0.60	1.10	1.10	0.18	0.18
Pediatricians	1763.95	1.56	78.45	1.21	3.12	4.79	0.52	0.80
Other Specialty Physicians	310.12	0.27	7.12	0.11	0.00	0.00	0.00	0.00
Mid-Levels	5758.07	5.09	277.41	4.27	7.54	10.28	1.26	1.71
Nurse Practitioners	3388.69	3.00	170.96	2.63	2.88	4.70	0.48	0.78
Physician Assistants	1880.64	1.66	92.87	1.43	1.98	1.95	0.33	0.33
Certified Nurse Midwives	488.74	0.43	13.58	0.21	2.68	3.63	0.45	0.61

Staffing (FTEs)	Central Care		Denver Harbor		El Centro		Good Neighbor		HOPE		Spring Branch		MotherLand	
	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010
Physicians	1.91	1.40	3.83	3.86	3.10	3.11	1.99	3.02	1.20	3.00	1.70	2.10	0.41	0.34
Family Physicians	1.91	1.40	5.15	5.23	0.00	0.64	2.20	4.12	1.20	1.00	0.70	0.80	0.41	0.34
Residents/Medical Students	0.00	0.00	2.40	2.60	0.00	0.00	0.21	1.10	0.00	0.00	0.00	0.20	0.00	0.00
General Practitioners	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Internists	0.00	0.00	0.00	0.00	0.96	0.31	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00
Obstetrician/Gynecologists	0.00	0.00	0.00	0.00	1.00	1.00	0.00	0.00	0.00	0.00	0.10	0.10	0.00	0.00
Pediatricians	0.00	0.00	1.08	1.23	1.14	1.16	0.00	0.00	0.00	1.00	0.90	1.40	0.00	0.00
Other Specialty Physicians	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Mid-Levels	0.98	2.75	0.00	0.00	2.16	2.63	2.40	2.60	0.80	0.20	1.20	2.10	0.63	1.40
Nurse Practitioners	0.18	1.80	0.00	0.00	0.00	0.00	1.50	1.70	0.80	0.20	0.40	1.00	0.63	0.69
Physician Assistants	0.80	0.95	0.00	0.00	1.18	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.71
Certified Nurse Midwives	0.00	0.00	0.00	0.00	0.98	1.63	0.90	0.90	0.00	0.00	0.80	1.10	0.00	0.00

¹¹ Residents are not included in physician FTEs for Harris County clinics. Residents are included in the national and Texas figures.

Productivity

Productivity	2009 National		2009 Texas		Harris County TOTAL		Harris County AVERAGE	
	1131 Grantees	Average	65 Grantees	Average	2009	2010	2009	2010
Physician Encounter Productivity	3,771	3,771	4,076	4,076	3,621	3,159	3,778	3,537
Midlevel Encounter Productivity	2,931	2,931	3,020	3,020	3,579	3,232	2,624	2,754
Medical Patients per Medical Provider	1,086	1,086	1,217	1,217	1,548	1,511	1,729	1,604
Ratio of Medical Encounters to User	3.37	3.37	3.21	3.21	2.38	2.26	2.44	2.37

Productivity	Central Care		Denver Harbor		El Centro		Good Neighbor		HOPE		Spring Branch		MotherLand	
	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010
Physician Encounter Productivity	4,805	4,526	4,054	4,244	2,521	2,445	2,874	2,485	4,031	3,846	4,385	3,674	1,766	2,503
Midlevel Encounter Productivity	3,023	3,984	0	0	2,862	2,636	3,495	2,696	1,616	3,585	4,748	3,622	1,913	3,583
Medical Patients per Medical Provider	2,405	2,443	1,485	1,608	950	964	1,187	1,069	2,801	2,302	1,547	1,238	1,445	1,628
Ratio of Medical Encounters to User	1.86	1.88	2.76	2.64	2.80	2.63	2.72	2.44	1.39	1.28	3.11	3.33	1.28	2.07

Payer Mix

Payer Mix	2009 National		2009 Texas		Harris County TOTAL		Harris County AVERAGE	
	1131 Grantees	Average	65 Grantees	Average	2009	2010	2009	2010
Number of Patients	18,753,858	16,582	903,586	13,901	36,160	43,337	6,027	7,223
Medicaid/CHIP	6,948,696	6,144	222,351	3,421	8,075	10,814	1,346	1,802
Medicare	1,363,744	1,206	53,233	819	682	1,262	114	210
Other Public	549,433	486	41,427	637	3,836	5,658	639	943
Private Insurance	2,734,948	2,418	80,174	1,233	1,694	1,249	282	208
Uninsured/Self-Pay	7,157,037	6,328	506,401	7,791	21,873	24,354	3,646	4,059
Payer By Percent of Total Patients	100%	100%	100%	100%	100%	100%	100%	100%
Medicaid/CHIP	37%	37%	25%	25%	22%	25%	23%	25%
Medicare	7%	7%	6%	6%	2%	3%	2%	3%
Other Public	3%	3%	5%	5%	11%	13%	10%	14%
Private Insurance	15%	15%	9%	9%	5%	3%	4%	3%
Uninsured/Self-Pay	38%	38%	56%	56%	60%	56%	61%	55%

Payer Mix	Central Care		Denver Harbor		El Centro		Good Neighbor		HOPE		Spring Branch		MotherLand	
	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010
Number of Patients	7,210	10,139	6,600	6,805	5,929	6,577	6,335	7,253	5,601	7,365	4,485	5,198	1,503	2,832
Medicaid/CHIP	1,869	2,529	2,112	2,165	898	1,215	1,121	1,355	349	1,791	1,726	1,759	30	261
Medicare	212	716	264	192	57	73	72	118	29	128	48	35	5	38
Other Public	1,219	520	0	0	699	1,171	0	13	1,913	2,895	5	1,059	0	0
Private Insurance	1,048	395	330	284	3	11	40	121	128	147	145	291	0	0
Uninsured/Self-Pay	2,862	5,979	3,894	4,164	4,272	4,107	5,102	5,646	3,182	2,404	2,561	2,054	1,468	2,533
Payer By Percent of Total Patients	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Medicaid/CHIP	26%	25%	32%	32%	15%	18%	18%	19%	6%	24%	38%	34%	2%	9%
Medicare	3%	7%	4%	3%	1%	1%	1%	2%	1%	2%	1%	1%	0%	1%
Other Public	17%	5%	0%	0%	12%	18%	0%	0%	34%	39%	0%	20%	0%	0%
Private Insurance	15%	4%	5%	4%	0%	0%	1%	2%	2%	2%	3%	6%	0%	0%
Uninsured/Self-Pay	40%	59%	59%	61%	72%	62%	81%	78%	57%	33%	57%	40%	98%	89%

Revenue¹²

Revenue	2009 National		2009 Texas		Harris County TOTAL		Harris County AVERAGE	
	1131 Grantees	Average	65 Grantees	Average	2009	2010	2009	2010
Revenue Collected	\$11,458,793,861	\$10,131,560	\$514,582,611	\$7,916,656	\$16,844,173	\$20,972,605	\$2,807,362	\$3,495,434
Total Patient Revenue Collected	\$6,789,760,358	\$6,003,325	\$236,532,214	\$3,638,957	\$5,121,670	\$7,682,739	\$853,612	\$1,280,456
Total Other Revenue	\$4,669,033,503	\$4,128,235	\$278,050,397	\$4,277,698	\$11,722,503	\$13,289,866	\$1,953,751	\$2,214,978
BPHC Grants	\$1,940,175,687	\$1,715,452	\$116,181,568	\$1,787,409	\$4,572,385	\$4,434,827	\$762,064	\$739,138
Other Federal Grants	\$569,149,197	\$503,227	\$28,064,212	\$431,757	\$846,892	\$1,741,560	\$141,149	\$290,260
ARRA Capital Improvement Program/FIP	\$169,779,252	\$150,114	\$9,462,249	\$145,573	\$495,261	\$1,173,364	\$82,544	\$195,561
Non-Federal Grants and Contracts	\$1,826,343,463	\$1,614,804	\$121,109,195	\$1,863,218	\$4,315,731	\$5,233,925	\$719,289	\$872,321
Other Revenue Sources	\$333,365,156	\$294,753	\$12,695,422	\$195,314	\$1,987,495	\$1,879,554	\$331,249	\$313,259
Revenue By Percent of Total Revenue¹³	100%	100%	100%	100%	100%	100%	100%	100%
% Income from Patient Services	60%	60%	47%	47%	31%	39%	31%	39%
% Income from 330 Grant BPHC	17%	17%	23%	23%	28%	22%	28%	22%
% Income from Other Sources	23%	23%	30%	30%	41%	39%	41%	39%
a. Other Federal Grants	4%	4%	4%	4%	2%	3%	2%	3%
b. Non-Federal Grants and Contracts	16%	16%	24%	24%	26%	26%	26%	26%
c. Other Revenue	3%	3%	3%	3%	12%	9%	12%	9%

Revenue	Central Care		Denver Harbor		El Centro		Good Neighbor	
	2009	2010	2009	2010	2009	2010	2009	2010
Revenue Collected	\$2,195,233	\$2,672,373	\$3,418,584	\$3,514,903	\$4,262,394	\$6,068,578	\$3,407,124	\$4,457,040
Total Patient Revenue Collected	\$738,516	\$944,022	\$696,991	\$1,060,101	\$1,622,934	\$2,392,695	\$1,020,960	\$1,511,017
Total Other Revenue	\$1,456,717	\$1,728,351	\$2,721,593	\$2,454,802	\$2,639,460	\$3,675,883	\$2,386,164	\$2,946,023
BPHC Grants	\$1,355,910	\$1,285,087	\$502,578	\$493,713	\$1,236,042	\$1,278,813	\$697,527	\$663,189
Other Federal Grants	\$9,807	\$374,528	\$359,116	\$221,025	\$268,041	\$410,284	\$129,928	\$469,315
ARRA Capital Improvement Program/FIP	\$0	\$263,338	\$268,616	\$134,627	\$119,151	\$313,805	\$57,494	\$339,605
Non-Federal Grants and Contracts	\$25,000	\$0	\$1,236,211	\$936,010	\$1,108,989	\$1,972,450	\$1,271,896	\$1,798,400
Other Revenue Sources	\$66,000	\$68,737	\$623,688	\$804,053	\$26,388	\$14,335	\$286,813	\$15,119
Revenue By Percent of Total Revenue¹²	100%	100%	100%	100%	100%	100%	100%	100%
% Income from Patient Services	34%	39%	22%	31%	39%	42%	30%	37%
% Income from 330 Grant BPHC	62%	53%	16%	15%	30%	22%	21%	16%
% Income from Other Sources	5%	7%	62%	54%	31%	36%	49%	47%
a. Other Federal Grants	0%	5%	3%	3%	4%	2%	2%	3%
b. Non-Federal Grants and Contracts	1%	0%	39%	28%	27%	34%	38%	44%
c. Other Revenue	3%	3%	20%	24%	1%	0%	9%	0%

¹² 2010 dollars are adjusted back to 2009 dollars using the CPI – Medical inflation factor of 0.95467388427 from the Bureau of Labor Statistics

¹³ Percentage of Total Revenue calculations exclude all ARRA Capital Improvement Project (CIP)/FIP funding.

Revenue	HOPE		Spring Branch		MotherLand	
	2009	2010	2009	2010	2009	2010
Revenue Collected	\$1,740,249	\$1,745,483	\$1,820,589	\$2,514,228	\$511,006	\$1,081,100
Total Patient Revenue Collected	\$302,042	\$493,247	\$740,227	\$1,281,656	\$34,020	\$159,326
Total Other Revenue	\$1,438,207	\$1,252,235	\$1,080,362	\$1,232,572	\$476,986	\$921,774
BPHC Grants	\$79,900	\$0	\$700,428	\$714,024	\$0	\$0
Other Federal Grants	\$0	\$0	\$80,000	\$266,407	\$426,459	\$765,302
ARRA Capital Improvement Program/FIP	\$0	\$0	\$50,000	\$121,988	\$0	\$105,834
Non-Federal Grants and Contracts	\$374,535	\$281,802	\$299,100	\$245,263	\$42,957	\$156,472
Other Revenue Sources	\$983,772	\$970,434	\$834	\$6,877	\$7,570	\$0
Revenue By Percent of Total Revenue¹²	100%	100%	100%	100%	100%	100%
% Income from Patient Services	17%	28%	42%	54%	7%	16%
% Income from 330 Grant BPHC	5%	0%	40%	30%	0%	0%
% Income from Other Sources	78%	72%	19%	17%	93%	84%
a. Other Federal Grants	0%	0%	2%	6%	83%	68%
b. Non-Federal Grants and Contracts	22%	16%	17%	10%	8%	16%
c. Other Revenue	57%	56%	0%	0%	1%	0%

Costs¹⁴

Costs	2009 National		2009 Texas		Harris County TOTAL		Harris County AVERAGE	
	1131 Grantees	Average	65 Grantees	Average	2009	2010	2009	2010
Medical Cost per Medical Encounter	\$131	\$131	\$130	\$130	\$152	\$176	\$145	\$160
Medical Cost per Medical Patient	\$414	\$414	\$386	\$386	\$345	\$371	\$351	\$388
Total Medical Care Services Cost After Allocation	\$7,166,568,324	\$6,336,488	\$338,460,518	\$5,207,085	\$12,211,542	\$15,815,740	\$2,035,257	\$2,635,957
Lab and X-Ray After Allocation	\$466,770,521	\$412,706	\$33,778,078	\$519,663	\$862,806	\$817,461	\$143,801	\$136,244
Total Cost per Patient	\$600	\$600	\$569	\$569	\$470	\$481	\$467	\$514
Total Accrued Cost After Allocation	\$11,249,091,011	\$9,946,146	\$514,536,680	\$7,915,949	\$17,003,883	\$20,865,122	\$2,833,981	\$3,477,520
Overhead as % of Total Cost	32%	32%	32%	32%	42%	41%	44%	41%
Total Accrued Cost	\$11,249,091,011	\$9,946,146	\$514,536,680	\$7,915,949	\$17,003,883	\$20,865,122	\$2,833,981	\$3,477,520
Facility Cost	\$824,781,943	\$729,250	\$35,164,377	\$540,990	\$1,301,298	\$1,561,594	\$216,883	\$260,266
Administration Cost	\$2,796,439,682	\$2,472,537	\$129,634,504	\$1,994,377	\$5,847,156	\$7,006,452	\$974,526	\$1,167,742

Costs	Central Care		Denver Harbor		El Centro		Good Neighbor	
	2009	2010	2009	2010	2009	2010	2009	2010
Medical Cost per Medical Encounter	\$159	\$124	\$156	\$143	\$221	\$245	\$155	\$181
Medical Cost per Medical Patient	\$278	\$211	\$427	\$378	\$620	\$644	\$420	\$437
Total Medical Care Services Cost After Allocation	\$2,041,907	\$2,230,562	\$2,581,820	\$2,498,419	\$3,154,661	\$3,765,315	\$2,409,542	\$2,907,170
Lab and X-Ray After Allocation	\$108,645	\$94,248	\$155,735	\$154,447	\$54,834	\$200,104	\$220,978	\$280,892
Total Cost per Patient	\$297	\$235	\$558	\$556	\$748	\$790	\$576	\$580
Total Accrued Cost After Allocation	\$2,141,936	\$2,387,121	\$3,684,130	\$3,784,761	\$4,434,417	\$5,198,903	\$3,648,656	\$4,209,718
Overhead as % of Total Cost	36%	26%	47%	46%	37%	43%	39%	36%
Total Accrued Cost	\$2,141,936	\$2,387,121	\$3,684,130	\$3,784,761	\$4,434,417	\$5,198,903	\$3,648,656	\$4,209,718
Facility Cost	\$157,848	\$125,500	\$351,320	\$407,248	\$188,344	\$361,367	\$143,053	\$178,273
Administration Cost	\$608,992	\$497,722	\$1,396,749	\$1,315,269	\$1,438,890	\$1,858,456	\$1,276,124	\$1,323,788

Costs	HOPE		Spring Branch		MotherLand	
	2009	2010	2009	2010	2009	2010
Medical Cost per Medical Encounter	\$81	\$74	\$95	\$192	\$246	\$107
Medical Cost per Medical Patient	\$82	\$93	\$277	\$565	\$315	\$221
Total Medical Care Services Cost After Allocation	\$636,320	\$1,387,309	\$1,387,292	\$3,026,964	\$564,309	\$693,693
Lab and X-Ray After Allocation	\$179,645	\$0	\$142,969	\$87,770	\$90,206	\$67,308
Total Cost per Patient	\$278	\$266	\$343	\$653	\$411	\$311
Total Accrued Cost After Allocation	\$1,557,903	\$1,890,884	\$1,536,841	\$3,393,736	\$617,092	\$881,823
Overhead as % of Total Cost	56%	48%	46%	47%	53%	49%
Total Accrued Cost	\$1,557,903	\$1,890,884	\$1,536,841	\$3,393,736	\$617,092	\$881,823
Facility Cost	\$285,924	\$181,525	\$174,809	\$307,682	\$27,148	\$30,635
Administration Cost	\$594,253	\$726,100	\$532,148	\$1,285,118	\$297,623	\$397,060

¹⁴ 2010 dollars are adjusted back to 2009 dollars using the CPI – Medical inflation factor of 0.95467388427 from the Bureau of Labor Statistics

Operating Margin ¹⁵

Operating Margi	2009 National		2009 Texas		Harris County TOTAL		Harris County AVERAGE	
	1131 Grantees	Average	65 Grantees	Average	2009	2010	2009	2010
Total Accrued Costs	\$11,249,091,011	\$9,946,146	\$514,536,680	\$7,915,949	\$17,003,883	\$20,865,122	\$2,833,981	\$3,477,520
Total Accrued Revenue	\$16,250,467,763	\$14,368,230	\$796,970,972	\$12,261,092	\$25,451,423	\$29,894,634	\$4,241,904	\$4,982,439
Patient Revenue Full Charges	\$11,581,434,260	\$10,239,995	\$518,920,575	\$7,983,393	\$13,728,920	\$16,604,768	\$2,288,153	\$2,767,461
Total Other Revenue	\$4,669,033,503	\$4,128,235	\$278,050,397	\$4,277,698	\$11,722,503	\$13,289,866	\$1,953,751	\$2,214,978
Margin	\$5,001,376,752	\$4,422,084	\$282,434,292	\$4,345,143	\$8,447,540	\$9,029,512	\$1,407,923	\$1,504,919

Operating Margin	Central Care		Denver Harbor		El Centro		Good Neighbor	
	2009	2010	2009	2010	2009	2010	2009	2010
Total Accrued Costs	\$2,141,936	\$2,387,121	\$3,684,130	\$3,784,761	\$4,434,417	\$5,198,903	\$3,648,656	\$4,209,718
Total Accrued Revenue	\$3,140,159	\$4,037,496	\$6,000,206	\$5,789,501	\$5,862,298	\$8,353,476	\$5,231,476	\$6,348,300
Patient Revenue Full Charges	\$1,683,442	\$2,309,145	\$3,278,613	\$3,334,700	\$3,222,838	\$4,677,593	\$2,845,312	\$3,402,276
Total Other Revenue	\$1,456,717	\$1,728,351	\$2,721,593	\$2,454,802	\$2,639,460	\$3,675,883	\$2,386,164	\$2,946,023
Margin	\$998,223	\$1,650,375	\$2,316,076	\$2,004,741	\$1,427,881	\$3,154,573	\$1,582,820	\$2,138,582

Operating Margin	HOPE		Spring Branch		MotherLand	
	2009	2010	2009	2010	2009	2010
Total Accrued Costs	\$1,557,903	\$1,890,884	\$1,536,841	\$3,393,736	\$617,092	\$881,823
Total Accrued Revenue	\$2,116,245	\$1,974,170	\$3,101,039	\$3,391,691	\$679,620	\$1,464,913
Patient Revenue Full Charges	\$678,038	\$721,935	\$2,020,677	\$2,159,119	\$202,634	\$543,139
Total Other Revenue	\$1,438,207	\$1,252,235	\$1,080,362	\$1,232,572	\$476,986	\$921,774
Margin	\$558,342	\$83,286	\$1,564,198	-\$2,045	\$62,528	\$583,090

¹⁵ 2010 dollars are adjusted back to 2009 dollars using the CPI – Medical inflation factor of 0.95467388427 from the Bureau of Labor Statistics; Costs and revenue are reported on an accrual basis. Margin is Revenue minus Costs.

HEALTH OUTCOME INDICATORS	2009 National		2009 Texas		Harris County TOTAL		Harris County AVERAGE	
	1131 Grantees	Average	65 Grantees	Average	2009	2010	2009	2010
Diabetes -HB A1c ≤ 9%	71%	71%	65%	65%	82%	74%	68%	67%
Patients with HBA1c < 7%	446,875	395	25,674	395	854	202	142	40
Patients with HBA1c 7% ≤ HBA1c ≤ 9%	346,946	307	23,039	354	301	242	50	48
Patients with HBA1c > 9%	328,981	291	26,578	409	255	155	43	31
Charts sampled or EHR Total	1,122,802	993	75,291	1,158	1,410	599	235	120
Cardiovascular Disease - Blood Pressure	63%	63%	64%	64%	70%	48%	61%	55%
Patients with Controlled Blood Pressure	1,300,976	1,150	66,454	1,022	682	869	114	174
Charts sampled or EHR Total	2,061,768	1,823	103,672	1,595	978	1,822	163	364
Cancer - Screenings	58%	58%	55%	55%	54%	50%	73%	74%
# Female Patients PAP	1,782,103	1,576	82,190	1,264	3,175	1,639	529	273
Charts sampled or EHR Total	3,062,033	2,707	149,165	2,295	5,833	3,285	972	548
Prenatal Care - 1st Trimester	67%	67%	58%	58%	46%	56%	54%	57%
# of 1st Trimester Patients first visit with your clinic	306,583	271	15,844	244	858	1,333	172	267
# of 1st Trimester Patients first visit with another provider	16,528	15	594	9	4	0	1	0
Prenatal Care - 2nd Trimester	27%	27%	34%	34%	47%	35%	41%	34%
# of 2nd Trimester Patients first visit with your clinic	117,516	104	9,172	141	857	794	171	159
# of 2nd Trimester Patients first visit with another provider	10,297	9	507	8	28	35	6	7
Prenatal Care - 3rd Trimester	6%	6%	9%	9%	7%	10%	5%	9%
# of third Trimester Patients first visit with your clinic	25,225	22	2,055	32	120	231	24	46
# of third Trimester Patients first visit with another provider	4,292	4	381	6	11	4	2	1
Total Number of Prenatal Patients	480,441	425	28,553	439	1,878	2,397	376	479
Appropriate immunizations by 2nd bday	69%	69%	68%	68%	78%	73%	75%	76%
Number of children who have received required vaccines	160,092	142	7,803	120	339	524	57	87
Total Patients with 2nd Birthday During Measurement Year	232,692	206	11,408	176	435	716	73	119

¹⁶ Diabetes: Patients with HBA1c ≤ 9% out of total # of charts sampled of patients diagnosed with Type I or II diabetes.
 Patients with controlled blood pressure out of the charts sampled of patients diagnosed with hypertension.
 PAP Test: Number of female patients aged 21-64 who had at least one PAP during one of the two previous years.
 Prenatal Care - 1st Trimester: Percentage of prenatal patients initiating care at clinic during the first trimester.
 Prenatal Care - 2nd Trimester: Percentage of prenatal patients initiating care at clinic during the second trimester.
 Prenatal Care - 3rd Trimester: Percentage of prenatal patients initiating care at clinic during the third trimester.
 Appropriate immunizations by 2nd birthday: Percent of 2 year olds who have received required vaccines.

HEALTH OUTCOME INDICATORS	Central Care		Denver Harbor		El Centro		Good Neighbor		HOPE		Spring Branch		MotherLand	
	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010
Diabetes - HB A1c ≤ 9%	83%	84%	64%	70%	76%	69%	53%	57%	88%	NA	46%	56%	NA	59%
Patients with HBA1c < 7%	35	121	15	20	28	22	16	21	750	NA	10	18	0	19
Patients with HBA1c 7% ≤ HBA1c ≤ 9%	23	147	30	29	25	26	21	19	180	NA	22	21	0	22
Patients with HBA1c > 9%	12	51	25	21	17	22	33	30	130	NA	38	31	0	29
Charts sampled or EHR Total	70	319	70	70	70	70	70	70	1,060	NA	70	70	0	70
Cardiovascular Disease - Blood Pressure	89%	40%	74%	61%	63%	72%	43%	53%	74%	NA	24%	49%	NA	51%
Patients with Controlled Blood Pressure	62	512	483	43	44	243	30	37	52	NA	11	34	0	36
Charts sampled or EHR Total	70	1,276	652	70	70	336	70	70	70	NA	46	70	0	70
Cancer - Screenings	94%	99%	87%	81%	72%	74%	77%	80%	41%	46%	66%	63%	90%	33%
# Female Patients PAP	66	69	61	57	1,538	52	54	56	1,410	1,361	46	44	63	326
Charts sampled or EHR Total	70	70	70	70	2,129	70	70	70	3,424	2,935	70	70	70	1,003
Prenatal Care - 1st Trimester	89%	80%	54%	49%	43%	42%	34%	55%	NA	NA	48%	58%	NA	NA
# of 1st Trimester Patients first visit with your clinic	113	297	56	52	260	304	167	172	NA	NA	262	508	0	0
# of 1st Trimester Patients first visit with another provider	0	0	1	0	0	0	3	0	NA	NA	0	0	0	0
Prenatal Care - 2nd Trimester	11%	15%	43%	46%	48%	47%	57%	32%	NA	NA	46%	32%	NA	NA
# of 2nd Trimester Patients first visit with your clinic	14	23	40	49	292	342	281	99	NA	NA	230	281	0	0
# of 2nd Trimester Patients first visit with another provider	0	31	5	0	0	0	0	1	NA	NA	23	3	0	0
Prenatal Care - 3rd Trimester	0%	5%	3%	5%	9%	11%	9%	13%	NA	NA	6%	10%	NA	NA
# of third Trimester Patients first visit with your clinic	0	17	3	5	53	80	42	42	NA	NA	22	87	0	0
# of third Trimester Patients first visit with another provider	0	1	0	0	0	0	0	0	NA	NA	11	3	0	0
Total Number of Prenatal Patients	127	369	105	106	605	726	493	314	NA	NA	548	882	0	0
Appropriate immunizations by 2nd bday	99%	96%	69%	74%	79%	89%	90%	81%	55%	55%	61%	63%	21%	100%
Number of children who have received required vaccines	69	161	53	52	99	62	63	57	12	148	43	44	3	11
Total Patients with 2nd Birthday During Measurement Year	70	167	77	70	126	70	70	70	22	269	70	70	14	11

Patient Demographics

PATIENT DEMOGRAPHICS	2009 National		2009 Texas		Harris County TOTAL		Harris County AVERAGE	
	1131 Grantees	Average	65 Grantees	Average	2009	2010	2009	2010
Age								
Pediatrics (<15 years old)	29%	29%	31%	31%	28%	29%	28%	29%
Male Pediatrics (<15)	2,761,603	2,442	141,930	2,184	4,910	5,996	818	999
Female Pediatrics (<15)	2,745,725	2,428	141,828	2,182	5,224	6,410	871	1,068
Geriatric (age 65 and over)	7%	7%	7%	7%	6%	4%	6%	3%
Male Geriatric (65+)	505,146	447	22,710	349	1,113	532	186	89
Female Geriatric (65+)	786,102	695	36,344	559	1,037	1,034	173	172
Race Ethnicity/Language								
Number of Patients By Race	18,753,858	16,582	903,586	13,901	36,160	43,337	6,027	7,223
Asian/Pacific Islander	632,105	559	7,562	116	2,858	3,305	476	551
Black/African American	3,786,257	3,348	100,068	1,540	7,838	12,004	1,306	2,001
Native American	186,162	165	1,942	30	55	52	9	9
Hispanic or Latino	6,204,872	5,486	581,306	8,943	21,703	21,848	3,617	3,641
White	6,384,182	5,645	179,124	2,756	1,464	1,848	244	308
More than One Race	148,367	131	2,887	44	77	2,621	13	437
Unreported/Refused to Report	1,411,913	1,248	30,697	472	2,165	1,659	361	277
With Linguistic Barrier	4,635,500	4,099	339,929	5,230	21,098	23,983	3,516	3,997
Percent of Patients by Race	100%	100%	100%	100%	100%	100%	1	1
Asian/Pacific Islander	3%	3%	1%	1%	8%	8%	8%	8%
Black/African American	20%	20%	11%	11%	22%	28%	19%	22%
Native American	1%	1%	0%	0%	0%	0%	0%	0%
Hispanic or Latino	33%	33%	64%	64%	60%	50%	60%	55%
White	34%	34%	20%	20%	4%	4%	4%	4%
More than One Race	1%	1%	0%	0%	0%	6%	0%	6%
Unreported/Refused to Report	8%	8%	3%	3%	6%	4%	8%	5%
With Linguistic Barrier	25%	25%	38%	38%	58%	55%	61%	61%

PATIENT DEMOGRAPHICS	Central Care		Denver Harbor		El Centro		Good Neighbor		HOPE		Spring Branch		MotherLand	
	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010
Age														
Pediatrics (<15 years old)	29%	28%	36%	31%	30%	29%	21%	21%	15%	24%	40%	44%	35%	25%
Male Pediatrics (<15)	1,005	1,305	1,164	1,061	875	920	610	760	420	886	836	1,064	300	364
Female Pediatrics (<15)	1,066	1,495	1,180	1,018	908	1,020	693	749	427	887	950	1,241	232	336
Geriatric (age 65 and over)	3%	4%	5%	5%	2%	2%	4%	4%	21%	4%	2%	1%	0%	2%
Male Geriatric (65+)	70	141	118	126	37	39	66	75	796	129	26	22	2	18
Female Geriatric (65+)	175	315	180	202	70	95	175	189	390	187	47	46	3	31
Race Ethnicity/Language														
Number of Patients By Race	7,210	10,139	6,600	6,805	5,929	6,577	6,335	7,253	5,601	7,365	4,485	5,198	1,503	2,832
Asian/Pacific Islander	91	93	53	21	12	17	55	59	2,576	3,033	71	82	10	28
Black/African American	5,660	9,117	630	628	143	246	519	800	560	888	326	325	662	1,230
Native American	11	11	5	7	0	0	11	10	22	24	6	0	0	1
Hispanic or Latino	1,038	587	5,677	5,916	5,649	6,156	5,267	5,925	2,236	0	1,836	3,264	740	1,345
White	397	161	205	186	112	137	300	352	138	683	312	329	77	199
More than One Race	0	15	0	0	0	0	23	16	0	2,558	54	32	0	13
Unreported/Refused to Report	13	155	30	47	13	21	160	91	69	179	1,880	1,166	14	16
With Linguistic Barrier	673	65	4,542	4,733	4,688	5,311	3,657	4,129	3,726	5,439	3,812	4,306	540	874
Percent of Patients by Race	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Asian/Pacific Islander	1%	1%	1%	0%	0%	0%	1%	1%	46%	41%	2%	2%	1%	1%
Black/African American	79%	90%	10%	9%	2%	4%	8%	11%	10%	12%	7%	6%	44%	43%
Native American	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Hispanic or Latino	14%	6%	86%	87%	95%	94%	83%	82%	40%	0%	41%	63%	49%	47%
White	6%	2%	3%	3%	2%	2%	5%	5%	2%	9%	7%	6%	5%	7%
More than One Race	0%	0%	0%	0%	0%	0%	0%	0%	0%	35%	1%	1%	0%	0%
Unreported/Refused to Report	0%	2%	0%	1%	0%	0%	3%	1%	1%	2%	42%	22%	1%	1%
With Linguistic Barrier	9%	1%	69%	70%	79%	81%	58%	57%	67%	74%	85%	83%	36%	31%

Special Population FQHCs

The 3 special population FQHCs (Legacy, HACS and Healthcare for the Homeless-Houston) are all benchmarked and reported separately due to their vastly different patients, cost structures and demographics.

Legacy provides adult, child, and HIV/AIDs services to the community whereas HACS provides mainly adult HIV/AIDs services. Furthermore, Healthcare for the Homeless serves a mainly homeless and uninsured population with a different set of healthcare needs. Although Legacy receives different sources of funding (mainly Ryan White grants) from the “typical FQHC” included in the national and state averages, Legacy’s 2010 values will be compared to the national and state averages due to their expansion in services to both child and adult primary care.

HACS and HHH will not be compared to the national and state averages due to the major differences in funding streams and patient base. Ongoing research is being conducted to determine appropriate comparable benchmarks for HACS and HHH.

In 2010 Legacy cared for 18,941 medical patients and provided 64,383 medical encounters. Not only is this significantly larger than the national and state averages, but it is also a 132% increase in medical patients served and a 192% increase in medical encounters provided by Legacy compared to 2009. This large increase is due to facility and service expansion in 2010, particularly the acquisition of the former Christus Southwest Clinic.

Capacity	2009 Legacy	2010 Legacy	2009 National Average	2009 Texas Average
Number of Patients	16,484	26,472	16,582	13,901
Medical Care Service Patients	8,162	18,941	14,294	12,143
Number of Encounters or Visits	40,755	93,660	65,278	51,756
Total Medical Care Service Encounters	22,029	64,383	48,211	38,988

In 2010 HACS cared for 1,276 medical patients through 5,103 medical encounters; this is a 34% fall in patients seen from 2009 and a 47% increase in encounters from 2009.

Capacity	2009 HACS	2010 HACS
Number of Patients	1,943	2,488
Medical Care Service Patients	1,943	1,276
Number of Encounters or Visits	9,366	15,969
Total Medical Care Service Encounters	3,481	5,103

HHH cared for 4,392 medical patients and 10,530 medical encounters, which is a 16% increase in patients and a 1% fall in encounters from 2009.

Capacity	2009 HHH	2010 HHH
Number of Patients	3,792	4,392
Medical Care Service Patients	3,792	4,392
Number of Encounters or Visits	19,268	21,995
Total Medical Care Service Encounters	10,606	10,530

At Legacy there was a 46% increase in total accrued costs and 66% increase in accrued revenues (full patient charges plus total other revenue).

Operating Margin (in \$100,000s)	2009 Legacy	2010 Legacy	2009 National Average	2009 Texas Average
Total Accrued Costs	\$ 159	\$ 232	\$ 99	\$ 79
Total Accrued Revenue	\$ 155	\$ 258	\$ 144	\$ 123
Margin	\$ (4)	\$ 26	\$ 44	\$ 43

HACS saw a 44% increase in accrued costs and a 25% increase in accrued revenues.

Operating Margin (in \$100,000s)	2009 HACS	2010 HACS
Total Accrued Costs	\$ 43	\$ 62
Total Accrued Revenue	\$ 50	\$ 63
Margin	\$ 7	\$ 1

HHH realized a 5% decrease in accrued costs and a 2% increase in accrued revenues.

Operating Margin (in \$100,000s)	2009 HHH	2010 HHH
Total Accrued Costs	\$ 24	\$ 23
Total Accrued Revenue	\$ 44	\$ 45
Margin	\$ 20	\$ 22

Performance Indicator Summary

The results of the 2010 special population FQHC performance indicator analysis are summarized below. The attached chart contains a complete table of all composite results and subsequent graphs contain an illustration of the goals to date.

Provider Productivity¹⁷

Legacy's reported physician productivity fell from 2009 to 2010 from 5,678 in 2009 to 4,990 in 2010. This fall can be partially attributed to the addition of Legacy's Southwest Clinic; the ramp up associated with the addition of a new clinic site contributed to the fall in productivity. The 2010 physician productivity is greater than the 2009 national and 2009 Texas averages of 3,771 and 4,076, respectively. Mid-level productivity increased from 2,643 to 3,697, which is above the national and state averages in 2009. The number of medical patients per medical provider increased from 1,151 in 2009 to 1,289 in 2010 of 1,217 and above the national average of 1,086. The ratio of medical encounters to medical users (often considered a measure of the continuity of care provided patients) increased from 2.70 to 3.40, both above the state and national averages.

Productivity	2009 Legacy	2010 Legacy	2009 National Average	2009 Texas Average
Physician Encounter Productivity	5,678	4,990	3,771	4,076
Midlevel Encounter Productivity	2,643	3,697	2,931	3,020
Medical Patients per Medical Provider	1,151	1,289	1,086	1,217
Ratio of Medical Encounters to User	2.70	3.40	3.37	3.21

HACS' physician productivity fell from 3,027 to 1,691 while mid-level productivity increased from 146 to 808. In addition the number of medical patients per medical provider fell by 37% and the ratio of medical encounters to users increased more than two-fold.

Productivity	2009 HACS	2010 HACS
Physician Encounter Productivity	3,027	1,691
Midlevel Encounter Productivity	146	808
Medical Patients per Medical Provider	486	304
Ratio of Medical Encounters to User	1.79	4.00

¹⁷ In calculating the average physician productivity, residents were removed from the Harris County averages, but were not removed from the National or State averages due to data availability.

Healthcare for the Homeless had an increase in physician productivity but a fall in mid-level productivity. While the medical patients per medical provider rose, the ratio of medical encounters to users fell.

Productivity	2009 HHH	2010 HHH
Physician Encounter Productivity	4,100	4,232
Midlevel Encounter Productivity	2,829	2,617
Medical Patients per Medical Provider	1,115	1,408
Ratio of Medical Encounters to User	2.80	2.40

Payer Mix

In 2010 Legacy’s percentage of unduplicated users of FQHCs who were uninsured or self-pay declined from 71% to 58% (Legacy’s uninsured/self-pay category also includes Ryan White grantees). This is higher than the national average for all FQHCs but on par with the state average in 2009. Medicaid¹⁸ accounted for 30% of the unduplicated users of Legacy. This is on par with the Texas average but below the national average of 37%. Private insurance fell from 16% to 9% less than the national average but the same as the Texas average. This fall is due to the greater number of uninsured and Medicaid/CHIP patients at the newly opened Southwest Clinic.

Payer By Percent of Total Patients	2009 Legacy	2010 Legacy	2009 National Average	2009 Texas Average
Medicaid/CHIP	6%	30%	37%	25%
Medicare	6%	3%	7%	6%
Other Public	0%	0%	3%	5%
Private Insurance	16%	9%	15%	9%
Uninsured/Self-Pay	71%	58%	38%	56%

Due to its recent FQHC designation, HACS’ payer mix is largely uninsured and self pay (including Ryan White funded patients) with a small increase in Medicaid/CHIP users from 1% to 3% and Medicare population from 1% to 4%.

Payer By Percent of Total Patients	2009 HACS	2010 HACS
Medicaid/CHIP	1%	3%
Medicare	1%	4%
Other Public	0%	0%
Private Insurance	0%	3%
Uninsured/Self-Pay	98%	89%

¹⁸ Medicaid includes CHIP.

Healthcare for the Homeless remains steady in caring for an almost entirely uninsured/self-pay population.

Payer By Percent of Total Patients	2009 HHH	2010 HHH
Medicaid/CHIP	2%	2%
Medicare	0%	1%
Other Public	0%	0%
Private Insurance	0%	0%
Uninsured/Self-Pay	98%	97%

Sources of Revenue

The percentage of income received by Legacy in 2010 from the Bureau of Primary Health Care (BPHC: source of Section 330 FQHC grants) remained the same from 2009 to 2010 at 8%, which is far lower than the Texas average of 23% and the national average of 17%. The percent of income from patient services increased from 5% to 30% of total income, but still lower than the national average of 60% and state average of 47%.

Legacy’s percent of income from Other Sources fell slightly from 87% to 62%, but is still higher than the national and state averages of 23% and 30%, respectively.¹⁹ This larger percent from other sources is attributable to the large number of non-federal grants and contracts and other revenue (which includes but is not limited to state and local grants and contracts, foundation or private grants and contracts, and state or local indigent care programs).

Revenue By Percent of Total Revenue	2009 Legacy	2010 Legacy	2009 National Average	2009 Texas Average
% Income from Patient Services	5%	30%	60%	47%
% Income from 330 Grant BPHC	8%	8%	17%	23%
% Income from Other Sources	87%	62%	23%	30%
a. Other Federal Grants	4%	3%	4%	4%
b. Non-Federal Grants and Contracts	63%	36%	16%	24%
c. Other Revenue	20%	23%	3%	3%

HACS, like Legacy, remained steady in the percent of income from Section 330 funds; however, the low percent of income from patient services is made up in income from other sources, namely non-federal grants and contracts as well as other federal grants.

¹⁹ Percentage of Total Revenue calculations exclude all ARRA Capital Improvement Project (CIP)/FIP funding, which falls under the Other Federal Grants category.

Revenue By Percent of Total Revenue	2009 HACS	2010 HACS
% Income from Patient Services	0%	1%
% Income from 330 Grant BPHC	11%	12%
% Income from Other Sources	89%	87%
a. Other Federal Grants	56%	30%
b. Non-Federal Grants and Contracts	33%	56%
c. Other Revenue	0%	0%

On the other hand, Healthcare for the Homeless relied heavily on approximately a quarter of revenues from Section 330 funds and the remainder from other sources, mainly non-federal grants and contracts.

Revenue By Percent of Total Revenue	2009 HHH	2010 HHH
% Income from Patient Services	0%	0%
% Income from 330 Grant BPHC	27%	23%
% Income from Other Sources	73%	77%
a. Other Federal Grants	3%	4%
b. Non-Federal Grants and Contracts	65%	68%
c. Other Revenue	5%	4%

Costs of Care

The 2010 inflation adjusted²⁰ medical cost per medical encounter (factoring out dental, mental health and other services provided) at Legacy fell from \$323 in 2009 to \$120 in 2010. However, the Medical Cost per Medical Encounter drops significantly because of Legacy's accounting system change between 2009 and 2010 (as costs were bucketed differently in the two years (i.e. vision services were broken out into their own category in 2010 but that was not the case in 2009)). The 2010 average is \$10 below the national and state averages.

Legacy's medical cost per medical patient and total cost per patient both fell from 2009 to 2010. These measures were also affected by the aforementioned accounting system change between 2009 and 2010. The medical cost per patient in 2010 was \$407, which is between the Texas average and national average. The total cost per patient was \$878, which is far above the national and state averages. In 2010, 35% of total costs went to overhead. This is above the national and state averages of 32%.

Costs of Care	2009 Legacy	2010 Legacy	2009 National Average	2009 Texas Average
Medical Cost per Medical Encounter	\$323	\$120	\$131	\$130
Medical Cost per Medical Patient	\$872	\$407	\$414	\$386
Total Cost per Patient	\$967	\$878	\$600	\$569
Overhead as % of Total Cost	13%	35%	32%	32%

²⁰ 2010 dollars are adjusted back to 2009 dollars using the CPI – Medical inflation factor of 0.95467388427 from the Bureau of Labor Statistics.

HACS realized a rise in medical cost per medical encounter, medical cost per medical patient, and total cost per patient as well as a decrease in overhead as a percent of total costs.

Costs of Care	2009 HACS	2010 HACS
Medical Cost per Medical Encounter	\$189	\$228
Medical Cost per Medical Patient	\$339	\$911
Total Cost per Patient	\$2,222	\$2,499
Overhead as % of Total Cost	39%	33%

On the other hand, these same metrics for Healthcare for the Homeless fell.

Costs of Care	2009 HHH	2010 HHH
Medical Cost per Medical Encounter	\$124	\$95
Medical Cost per Medical Patient	\$274	\$227
Total Cost per Patient	\$629	\$518
Overhead as % of Total Cost	32%	30%

Demographic Characteristics

From 2009 to 2010 Legacy saw an increased number of pediatric patients from 2% to 25%, which is much closer to the national and state averages of 29% and 31%, respectively. Legacy’s patient base was evenly split between Black, Hispanic, and White in 2009, but the population has shifted to more than half of patients identifying themselves as Hispanic. Much of the reason for these shifts relate to the acquisition of the former Christus Southwest Clinic.

Demographics	2009 Legacy	2010 Legacy	2009 National Average	2009 Texas Average
Pediatrics (<15 years old)	2%	25%	29%	31%
Geriatric (age 65 and over)	2%	2%	7%	7%
Asian/Pacific Islander	3%	2%	3%	1%
Black/African American	33%	19%	20%	11%
Native American	1%	0%	1%	0%
Hispanic or Latino	29%	55%	33%	64%
White	33%	17%	34%	20%
More than One Race	0%	0%	1%	0%
Unreported/Refused to Report	1%	6%	8%	3%
With Linguistic Barrier	13%	46%	25%	38%

HACS serves a predominately Black and Hispanic adult population with minimal demographic shifts between 2009 and 2010.

Demographics	2009 HACS	2010 HACS
Pediatrics (<15 years old)	0%	3%
Geriatric (age 65 and over)	1%	1%
Asian/Pacific Islander	0%	0%
Black/African American	57%	53%
Native American	0%	0%
Hispanic or Latino	38%	42%
White	5%	5%
More than One Race	0%	0%
Unreported/Refused to Report	0%	0%
With Linguistic Barrier	30%	26%

Healthcare for the Homeless cares for a predominately Black and White adult population.

Demographics	2009 HHH	2010 HHH
Pediatrics (<15 years old)	1%	1%
Geriatric (age 65 and over)	1%	1%
Asian/Pacific Islander	1%	1%
Black/African American	56%	52%
Native American	0%	0%
Hispanic or Latino	9%	10%
White	31%	34%
More than One Race	1%	1%
Unreported/Refused to Report	2%	2%
With Linguistic Barrier	6%	2%

Health Outcome Indicators

At Legacy, from 2009 to 2010 the percent of patients with controlled blood sugar levels rose from 51% to 80%. This is higher than the national and state averages of 71% and 65%, respectively. The percent of patients with controlled blood pressure fell from 44% in 2009 to 31% in 2010; this fall puts Legacy below the national and state averages of 63% and 64%. The fall in controlled blood pressure patients can be attributed to the new population being seen at the new Southwest Clinic. Finally, from 2009 to 2010, the percentage of patients that received age and gender appropriate cancer screenings²¹ rose from 70% to 81%, which is significantly higher than the national and state averages of 58% and 55%, respectively. The percent of patients receiving appropriate immunizations by their 2nd birthday rose from 38% to 89% in 2010 due to the addition of the after-hours pediatric clinic among other targeted campaigns to the pediatric population, which is higher than the national and state averages.

²¹ As measured by the number of female patients aged 21-64 who had at least one PAP during one of the two previous years.

Health Outcome Indicators	2009 Legacy	2010 Legacy	2009 National Average	2009 Texas Average
Diabetes -HB A1c ≤ 9%	51%	80%	71%	65%
Cardiovascular Disease - Blood Pressure	44%	31%	63%	64%
Cancer - Screenings	70%	81%	58%	55%
Prenatal Care - 1st Trimester	NA	43%	67%	58%
Prenatal Care - 2nd Trimester	NA	52%	27%	34%
Prenatal Care - 3rd Trimester	NA	5%	6%	9%
Appropriate immunizations by 2nd bday	38%	89%	69%	68%

HACS saw a rise in controlled diabetes and controlled blood pressure; however a fall in PAP tests and prenatal care.

Health Outcome Indicators	2009 HACS	2010 HACS
Diabetes -HB A1c ≤ 9%	48%	65%
Cardiovascular Disease - Blood Pressure	64%	70%
Cancer - Screenings	84%	34%
Prenatal Care - 1st Trimester	100%	60%
Prenatal Care - 2nd Trimester	0%	32%
Prenatal Care - 3rd Trimester	0%	8%
Appropriate immunizations by 2nd bday	NA	NA

Healthcare for the Homeless saw a slight rise in controlled diabetes cases, but a slight fall in controlled blood pressure.

Health Outcome Indicators	2009 HHH	2010 HHH
Diabetes -HB A1c ≤ 9%	7%	10%
Cardiovascular Disease - Blood Pressure	63%	56%
Cancer - Screenings	37%	63%
Prenatal Care - 1st Trimester	NA	NA
Prenatal Care - 2nd Trimester	NA	NA
Prenatal Care - 3rd Trimester	NA	NA
Appropriate immunizations by 2nd bday	NA	NA

Performance Indicator Goals

Community clinic executives and philanthropic funders agreed upon a comprehensive set of performance indicators that were benchmarked in 2009 and are closely tracked. Five of these indicators were selected to demonstrate improved sustainability of the area's safety net clinics supported by the Community Clinics Funders' Collaborative. Below is a

summary chart for each of the three clinics detailing the 2009 baseline and 2010 year one progress compared to the 2012 goals. Each indicator is described in the sub-sections below.

LEGACY Performance Indicator	2009 Baseline	2010 Year 1 Progress	2012 Goal
Physician Productivity	3,597	4,944	4,500
Unduplicated Medicaid/CHIP Users as a % of Total Users	6%	30%	30%
Percent of Income from Patient Services	5%	30%	40%
Medical Cost/Medical Encounter	\$323	\$120	\$140
Overhead as a % of Total Cost	13%	35%	35%

HOUSTON AREA COMMUNITY SERVICES (HACS) Performance Indicator	2009 Baseline	2010 Year 1 Progress	2012 Goal
Physician Productivity	3,027	1,691	2,418
Unduplicated Medicaid/CHIP Users as a % of Total Users	1%	3%	12%
Percent of Income from Patient Services	0%	1%	6% ²²
Medical Cost/Medical Encounter	\$189	\$228	\$215
Overhead as a % of Total Cost	39%	33%	31%

HEALTHCARE FOR THE HOMELESS HOUSTON (HHH) Performance Indicator	2009 Baseline	2010 Year 1 Progress	2012 Goal
Physician Productivity	4,100	4,232	4,200
Unduplicated Medicaid/CHIP Users as a % of Total Users	2%	2%	NA
Percent of Income from Patient Services	0%	0%	1%
Medical Cost/Medical Encounter	\$124	\$95	\$115
Overhead as a % of Total Cost	32%	30%	30%

²² Note that HACS 2012 goal and 2009 and 2010 values do not include Ryan White patients per the UDS instructions. However, it is noted that if Ryan White patients are included (per the Service Area Competition instructions), the 2012 goal would become 32%. There is ongoing discussion regarding the bucketing of Ryan White patients; however the current classifications are consistent across time and clinics. For reference, the Service Area Competition instructions are below:

PART 1: PROGRAM INCOME

NOTE: This form reports only on those visits which are billable to first or third parties including individuals who, after the schedule of discounts/sliding fee scale, may pay little or none of the actual charge.

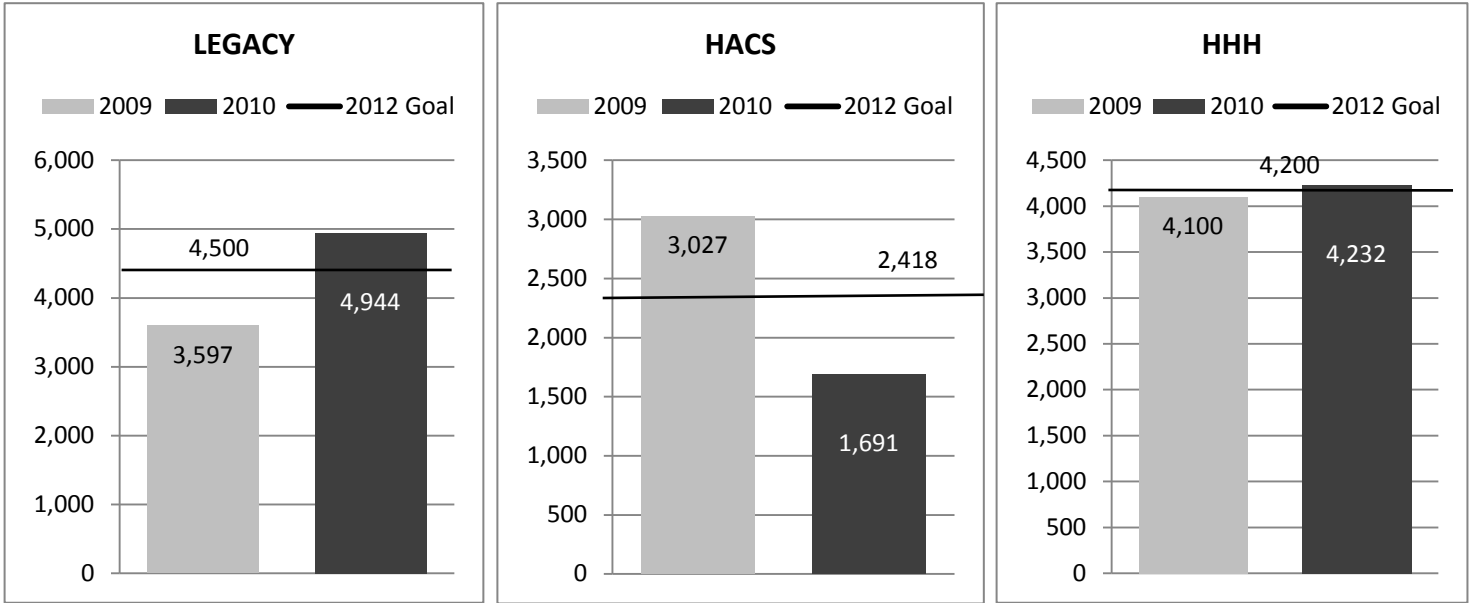
PROJECTED FEE FOR SERVICE INCOME

Lines 1a.-1e. and 2a. – 2b (Medicaid and Medicare): Show income from Medicaid and Medicare regardless of whether there is another intermediary involved. For example, if the applicant has a Blue Cross fee-for-service managed Medicaid contract, the information would be included on lines 1a.-1e., not on lines 3a.-3c. If the State Child Health Insurance Program (SCHIP) is paid through Medicaid, it should be included in the appropriate category on lines 1a-1e. In addition, if the applicant receives Medicaid reimbursement via a Primary Care Case Management (PCCM) model, this income should be included on line 1e. "Medicaid: Other Fee for Service."

Line 5 (Other Public): Include here any SCHIP program NOT paid through the Medicaid program as well as any other state or local programs that pay for visits including Title X family planning visits, CDC's Breast and Cervical Cancer Early Detection Program, Title I and II Ryan White visits, etc

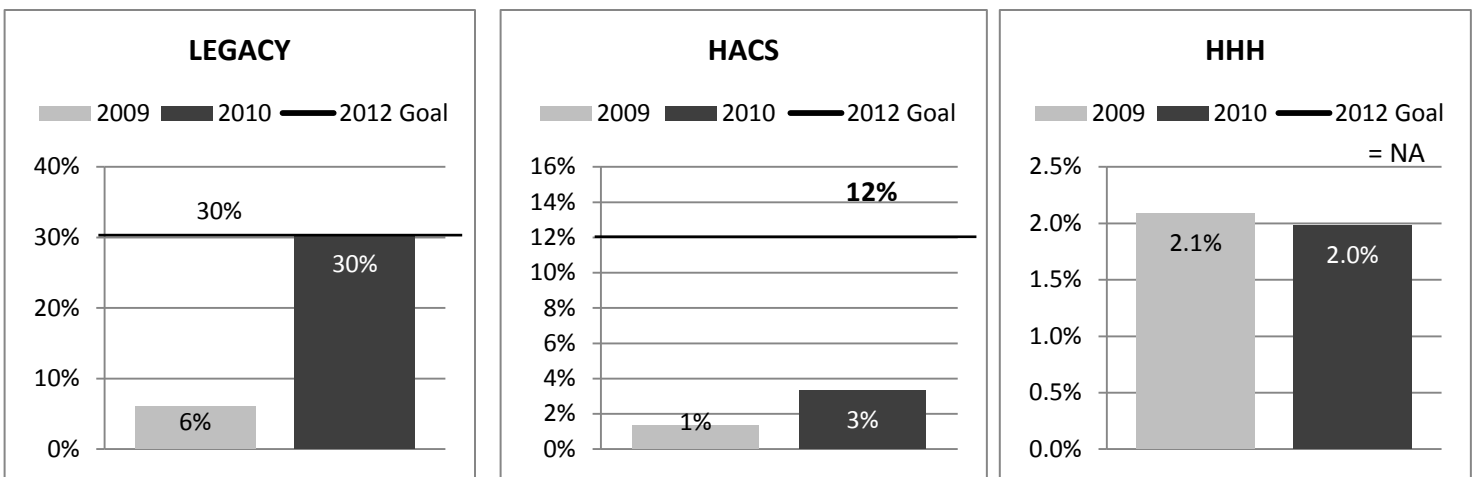
Physician Productivity²³

Legacy physician productivity rose by 37% from 2009 to 2010 to above the 2012 goal of 4,500. Conversely, HACS physician productivity fell by 44% to 2,691. Finally, HHH physician productivity remained relatively steady and is just above the 2012 goal of 4,200.



Unduplicated Medicaid/CHIP Users as a % of Total Users

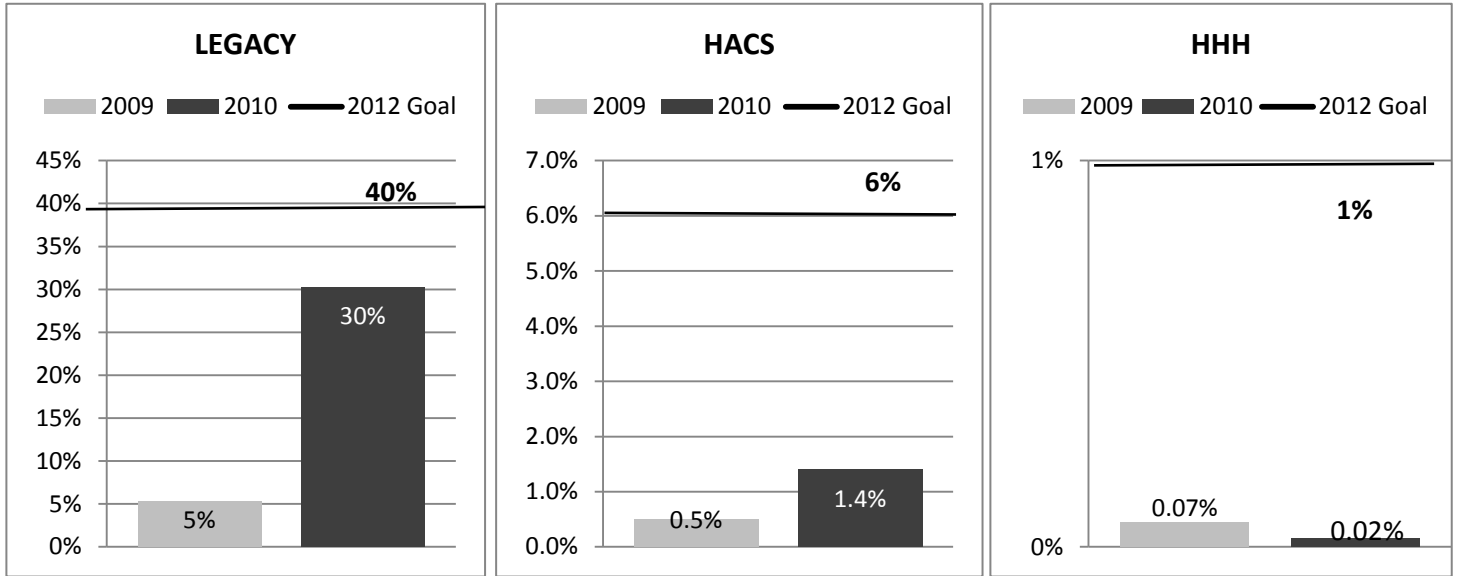
Legacy’s unduplicated Medicaid/CHIP users as a percent of total users increased from 6% to 30% from 2009 to 2010. Legacy’s 2012 goal is to maintain this 30% payer mix. HACS saw an increase from 1% to 3% of users. Finally, Healthcare for the Homeless saw a steady 2% of users. Healthcare for the Homeless did not set a 2012 goal because of their mainly homeless, uninsured population. Although, Healthcare for the Homeless anticipates this measure will remain fairly constant around 2% of users.



²³ Residents are not included in physician FTEs.

Percent of Income from Patient Services

Legacy’s percent of income from patient services²⁴ increased from 5% to 30% between 2009 and 2010 which is closer to the 40% goal for 2012. HACS increased from 0.5% to 1.4%. The 2012 goal of 6% does not include Ryan White patients as explained in footnote 22. Healthcare for the Homeless remained steady at 0% (due to the clinic’s uninsured, homeless population).

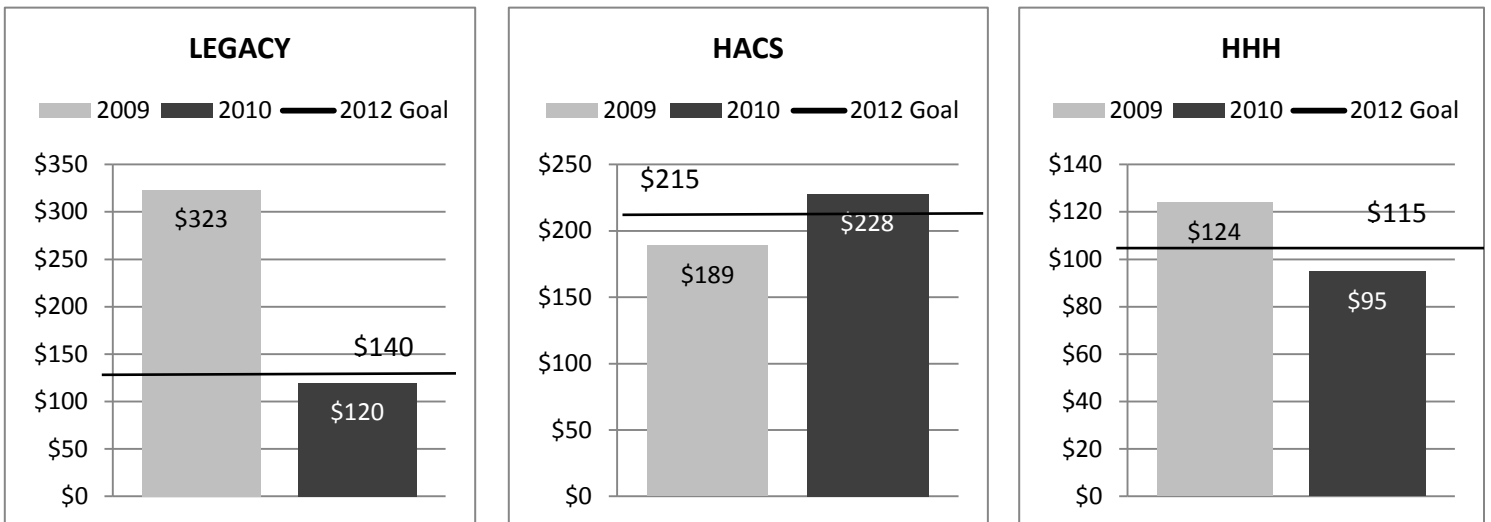


Medical Cost/Medical Encounter

The figures for medical cost per medical encounter are adjusted for inflation to 2009 dollars. It is important to note that each clinic uses a different cost allocation methodology to distribute shared costs (rent, utilities, etc) across programs (medical, dental, etc).

Legacy’s Medical Cost per Medical Encounter drops significantly because of Legacy's accounting system change between 2009 and 2010 (as costs were bucketed differently in the two years (i.e. vision services were broken out into their own category in 2010 but that was not the case in 2009)). The 2010 average is \$20 below the 2012 goal.

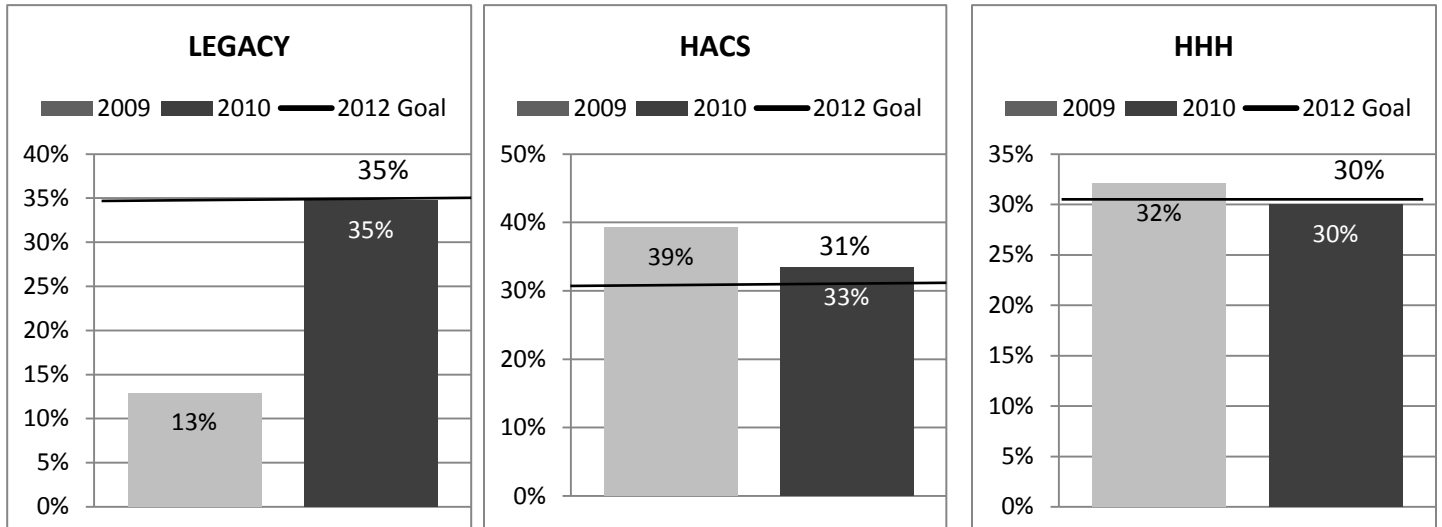
HACS’ Medical Cost per Medical Encounter rose by 21% whereas Healthcare for the Homeless’ fell by 23%.



²⁴ Includes actual patient revenue collected from patients and their respective insurance or funding source.

Overhead as a % of Total Cost

From 2009 to 2010 Legacy's overhead as a percent of total cost rose from 13% to 35% (the 2012 goal) as a result of the opening of a new clinic site as well as the bucketing of costs in the accounting system as previously mentioned. The 2012 goal is to maintain this level of overhead at 35%. HACS' fell by 15% to 33%. Finally, Healthcare for the Homeless fell by 7% from 32% to 30% (the 2012 goal).



Performance Indicator Tables

The following nine sets of tables provide the raw data associated with the above analysis.

Capacity

Capacity	2009 National FQHC		2009 Texas FQHC		Legacy	
	1131 Grantees	Average	65 Grantees	Average	2009	2010
Number of Patients	18,753,858	16,582	903,586	13,901	16,484	26,472
Medical Care Service Patients	16,166,416	14,294	789,277	12,143	8,162	18,941
Dental Service Patients	3,438,340	3,040	178,474	2,746	0	146
Mental Health Service Patients	758,131	670	24,985	384	948	1,789
Vision Service Patients	NA	NA	NA	NA	NA	3,051
Number of Visits	73,829,866	65,278	3,364,159	51,756	40,755	93,660
Physician Encounters	34,233,343	30,268	1,505,758	23,166	14,099	39,241
Family Physician Encounters	16,053,540	14,194	740,767	11,396	4,019	10,130
General Practitioner Encounters	1,493,045	1,320	39,926	614	0	0
Internists Encounters	5,671,680	5,015	227,164	3,495	6,917	7,327
Obstetrician/Gynecologists Encounters	3,054,101	2,700	155,905	2,399	0	2,226
Pediatricians Encounters	6,971,252	6,164	320,211	4,926	0	19,377
Other Specialist Physician Encounters	989,725	875	21,785	335	3,163	181
Midlevel Encounters	16,877,080	14,922	837,851	12,890	7,930	25,142
Nurse Practitioners Encounters	9,709,783	8,585	511,087	7,863	7,930	25,142
Physician Assistant Encounters	5,947,384	5,259	289,803	4,459	0	0
Certified Nurse Midwives Encounters	1,219,913	1,079	36,961	569	0	0
Nurse Encounters	3,416,755	3,021	190,605	2,932	0	0
Total Medical Care Service Encounters	54,527,178	48,211	2,534,214	38,988	22,029	64,383

Capacity	HACS		HHH	
	2009	2010	2009	2010
Number of Patients	1,943	2,488	3,792	4,392
Medical Care Service Patients	1,943	1,276	3,792	4,392
Dental Service Patients	0	0	1,056	1,051
Mental Health Service Patients	376	367	237	442
Vision Service Patients	NA	0	NA	204
Number of Visits	9,366	15,969	19,268	21,995
Physician Encounters	3,115	3,488	4,741	4,904
Family Physician Encounters	0	0	4,741	4,702
General Practitioner Encounters	0	0	0	0
Internists Encounters	2,604	2,576	0	0
Obstetrician/Gynecologists Encounters	423	750	0	0
Pediatricians Encounters	0	55	0	0
Other Specialist Physician Encounters	88	107	0	202
Midlevel Encounters	366	1,615	5,865	5,626
Nurse Practitioners Encounters	366	1,615	5,865	5,626
Physician Assistant Encounters	0	0	0	0
Certified Nurse Midwives Encounters	0	0	0	0
Nurse Encounters	0	0	0	0
Total Medical Care Service Encounters	3,481	5,103	10,606	10,530

Staffing²⁵

Staffing (FTEs)	2009 National FQHC		2009 Texas FQHC		Legacy	
	1131 Grantees	Average	65 Grantees	Average	2009	2010
Physicians (excludes residents)	9124.78	8.07	371.20	5.71	4.09	7.90
Family Physicians	4259.93	3.77	179.97	2.77	1.00	2.00
Residents/Medical Students	-	-	-	-	0.00	0.00
General Practitioners	381.40	0.34	10.27	0.16	0.00	0.00
Internists	1545.32	1.37	56.37	0.87	2.04	2.00
Obstetrician/Gynecologists	864.06	0.76	39.02	0.60	0.00	0.30
Pediatricians	1763.95	1.56	78.45	1.21	0.00	3.60
Other Specialty Physicians	310.12	0.27	7.12	0.11	1.05	0.00
Mid-Levels	5758.07	5.09	277.41	4.27	3.00	6.80
Nurse Practitioners	3388.69	3.00	170.96	2.63	3.00	6.80
Physician Assistants	1880.64	1.66	92.87	1.43	0.00	0.00
Certified Nurse Midwives	488.74	0.43	13.58	0.21	0.00	0.00

Staffing (FTEs)	HACS		HHH	
	2009	2010	2009	2010
Physicians (excludes residents)	1.50	2.20	0.90	0.97
Family Physicians	0.00	0.00	0.90	0.90
Residents/Medical Students	0.00	0.00	0.00	0.00
General Practitioners	0.00	0.00	0.00	0.00
Internists	0.80	1.00	0.00	0.00
Obstetrician/Gynecologists	0.20	0.75	0.00	0.00
Pediatricians	0.00	0.50	0.00	0.00
Other Specialty Physicians	0.50	0.20	0.00	0.07
Mid-Levels	2.50	2.00	2.50	2.15
Nurse Practitioners	2.50	2.00	2.50	2.15
Physician Assistants	0.00	0.00	0.00	0.00
Certified Nurse Midwives	0.00	0.00	0.00	0.00

²⁵ Residents are not included in physician FTEs for Harris County clinics. Residents are included in the national and Texas figures.

Productivity

Productivity	2009 National FQHC		2009 Texas FQHC		Legacy	
	1131 Grantees	Average	65 Grantees	Average	2009	2010
Physician Encounter Productivity	3,771	3,771	4,076	4,076	3,597	4,944
Midlevel Encounter Productivity	2,931	2,931	3,020	3,020	2,643	3,697
Medical Patients per Medical Provider	1,086	1,086	1,217	1,217	1,151	1,289
Ratio of Medical Encounters to User	3.37	3.37	3.21	3.21	2.70	3.40

Productivity	HACS		HHH	
	2009	2010	2009	2010
Physician Encounter Productivity	3,027	1,691	4,100	4,232
Midlevel Encounter Productivity	146	808	2,829	2,617
Medical Patients per Medical Provider	486	304	1,115	1,408
Ratio of Medical Encounters to User	1.79	4.00	2.80	2.40

Payer Mix

Payer Mix	2009 National FQHC		2009 Texas FQHC		Legacy	
	1131 Grantees	Average	65 Grantees	Average	2009	2010
Number of Patients	18,753,858	16,582	903,586	13,901	16,484	26,472
Medicaid/CHIP	6,948,696	6,144	222,351	3,421	998	8,051
Medicare	1,363,744	1,206	53,233	819	1,030	728
Other Public	549,433	486	41,427	637	0	0
Private Insurance	2,734,948	2,418	80,174	1,233	2,689	2,310
Uninsured/Self-Pay	7,157,037	6,328	506,401	7,791	11,767	15,383
Payer By Percent of Total Patients	100%	100%	100%	100%	100%	100%
Medicaid/CHIP	37%	37%	25%	25%	6%	30%
Medicare	7%	7%	6%	6%	6%	3%
Other Public	3%	3%	5%	5%	0%	0%
Private Insurance	15%	15%	9%	9%	16%	9%
Uninsured/Self-Pay	38%	38%	56%	56%	71%	58%

Payer Mix	HACS		HHH	
	2009	2010	2009	2010
Number of Patients	1,943	2,488	3,792	4,392
Medicaid/CHIP	26	83	79	87
Medicare	19	93	0	26
Other Public	0	7	0	0
Private Insurance	1	84	0	0
Uninsured/Self-Pay	1,897	2,221	3,713	4,279
Payer By Percent of Total Patients	100%	100%	100%	100%
Medicaid/CHIP	1%	3%	2%	2%
Medicare	1%	4%	0%	1%
Other Public	0%	0%	0%	0%
Private Insurance	0%	3%	0%	0%
Uninsured/Self-Pay	98%	89%	98%	97%

Revenue²⁶

Revenue	2009 National FQHC		2009 Texas FQHC		Legacy	
	1131 Grantees	Average	65 Grantees	Average	2009	2010
Revenue Collected	\$11,458,793,861	\$10,131,560	\$514,582,611	\$7,916,656	\$14,786,790	\$21,120,651
Total Patient Revenue Collected	\$6,789,760,358	\$6,003,325	\$236,532,214	\$3,638,957	\$784,218	\$6,280,744
Total Other Revenue	\$4,669,033,503	\$4,128,235	\$278,050,397	\$4,277,698	\$14,002,572	\$14,839,907
BPHC Grants	\$1,940,175,687	\$1,715,452	\$116,181,568	\$1,787,409	\$1,194,266	\$1,669,453
Other Federal Grants	\$569,149,197	\$503,227	\$28,064,212	\$431,757	\$589,969	\$1,024,707
ARRA Capital Improvement Program/FIP	\$169,779,252	\$150,114	\$9,462,249	\$145,573	\$52,260	\$395,667
Non-Federal Grants and Contracts	\$1,826,343,463	\$1,614,804	\$121,109,195	\$1,863,218	\$9,249,019	\$7,368,339
Other Revenue Sources	\$333,365,156	\$294,753	\$12,695,422	\$195,314	\$2,969,318	\$4,777,408
Revenue By Percent of Total Revenue	100%	100%	100%	100%	100%	100%
% Income from Patient Services	60%	60%	47%	47%	5%	30%
% Income from 330 Grant BPHC	17%	17%	23%	23%	8%	8%
% Income from Other Sources	23%	23%	30%	30%	87%	62%
a. Other Federal Grants	4%	4%	4%	4%	4%	3%
b. Non-Federal Grants and Contracts	16%	16%	24%	24%	63%	36%
c. Other Revenue	3%	3%	3%	3%	20%	23%

Revenue	HACS		HHH	
	2009	2010	2009	2010
Revenue Collected	\$5,013,913	\$6,184,361	\$2,380,607	\$2,477,574
Total Patient Revenue Collected	\$24,082	\$85,751	\$1,527	\$540
Total Other Revenue	\$4,989,831	\$6,098,610	\$2,379,080	\$2,477,034
BPHC Grants	\$516,020	\$755,012	\$628,157	\$565,067
Other Federal Grants	\$2,866,392	\$1,929,578	\$104,531	\$146,919
ARRA Capital Improvement Program/FIP	\$157,285	\$70,190	\$43,567	\$53,606
Non-Federal Grants and Contracts	\$1,607,419	\$3,414,020	\$1,518,470	\$1,656,204
Other Revenue Sources	\$0	\$0	\$127,922	\$108,845
Revenue By Percent of Total Revenue	100%	100%	100%	100%
% Income from Patient Services	0%	1%	0%	0%
% Income from 330 Grant BPHC	11%	12%	27%	23%
% Income from Other Sources	89%	87%	73%	77%
a. Other Federal Grants	56%	30%	3%	4%
b. Non-Federal Grants and Contracts	33%	56%	65%	68%
c. Other Revenue	0%	0%	5%	4%

²⁶ 2010 dollars are adjusted back to 2009 dollars using the CPI – Medical inflation factor of 0.95467388427 from the Bureau of Labor Statistics

Costs²⁷

Costs	2009 National FQHC		2009 Texas FQHC		Legacy	
	1131 Grantees	Average	65 Grantees	Average	2009	2010
Medical Cost per Medical Encounter	\$131	\$131	\$130	\$130	\$323	\$120
Medical Cost per Medical Patient	\$414	\$414	\$386	\$386	\$872	\$407
Total Medical Care Services Cost After Allocation	\$7,166,568,324	\$6,336,488	\$338,460,518	\$5,207,085	\$7,869,975	\$9,036,515
Lab and X-Ray After Allocation	\$466,770,521	\$412,706	\$33,778,078	\$519,663	\$755,245	\$1,330,991
Total Cost per Patient	\$600	\$600	\$569	\$569	\$967	\$878
Total Accrued Cost After Allocation	\$11,249,091,011	\$9,946,146	\$514,536,680	\$7,915,949	\$15,938,752	\$23,229,391
Overhead as % of Total Cost	32%	32%	32%	32%	13%	35%
Total Accrued Cost	\$11,249,091,011	\$9,946,146	\$514,536,680	\$7,915,949	\$15,938,752	\$23,229,391
Facility Cost	\$824,781,943	\$729,250	\$35,164,377	\$540,990	\$697,843	\$1,072,998
Administration Cost	\$2,796,439,682	\$2,472,537	\$129,634,504	\$1,994,377	\$1,363,204	\$6,994,825

Costs	HACS		HHH	
	2009	2010	2009	2010
Medical Cost per Medical Encounter	\$189	\$228	\$124	\$95
Medical Cost per Medical Patient	\$339	\$911	\$274	\$227
Total Medical Care Services Cost After Allocation	\$1,086,612	\$1,569,097	\$1,075,011	\$1,007,187
Lab and X-Ray After Allocation	\$428,870	\$406,947	\$36,236	\$8,070
Total Cost per Patient	\$2,222	\$2,499	\$629	\$518
Total Accrued Cost After Allocation	\$4,316,863	\$6,216,651	\$2,385,726	\$2,276,086
Overhead as % of Total Cost	39%	33%	32%	30%
Total Accrued Cost	\$4,316,863	\$6,216,651	\$2,385,726	\$2,276,086
Facility Cost	\$872,274	\$440,448	\$14,232	\$12,372
Administration Cost	\$820,750	\$1,635,753	\$750,899	\$669,656

²⁷ 2010 dollars are adjusted back to 2009 dollars using the CPI – Medical inflation factor of 0.95 from the Bureau of Labor Statistics

Operating Margin ²⁸

Operating Margin	2009 National FQHC		2009 Texas FQHC		Legacy	
	1131 Grantees	Average	65 Grantees	Average	2009	2010
Total Accrued Costs	\$11,249,091,011	\$9,946,146	\$514,536,680	\$7,915,949	\$15,938,752	\$23,229,391
Total Accrued Revenue	\$16,250,467,763	\$14,368,230	\$796,970,972	\$12,261,092	\$15,515,915	\$25,800,780
Patient Revenue Full Charges	\$11,581,434,260	\$10,239,995	\$518,920,575	\$7,983,393	\$1,513,343	\$10,960,872
Total Other Revenue	\$4,669,033,503	\$4,128,235	\$278,050,397	\$4,277,698	\$14,002,572	\$14,839,907
Margin	\$5,001,376,752	\$4,422,084	\$282,434,292	\$4,345,143	-\$422,837	\$2,571,388

Operating Margin	HACS		HHH	
	2009	2010	2009	2010
Total Accrued Costs	\$4,316,863	\$6,216,651	\$2,385,726	\$2,276,086
Total Accrued Revenue	\$5,024,051	\$6,280,398	\$4,368,335	\$4,455,023
Patient Revenue Full Charges	\$34,220	\$181,787	\$1,989,255	\$1,977,989
Total Other Revenue	\$4,989,831	\$6,098,610	\$2,379,080	\$2,477,034
Margin	\$707,188	\$63,746	\$1,982,609	\$2,178,937

²⁸ 2010 dollars are adjusted back to 2009 dollars using the CPI – Medical inflation factor of 0.95 from the Bureau of Labor Statistics; Costs and revenue are reported on an accrual basis. Margin is Revenue minus Costs.

Health Outcome Indicators²⁹

Health Outcome Indicators	2009 National FQHC		2009 Texas FQHC		Legacy	
	1131 Grantees	Average	65 Grantees	Average	2009	2010
Diabetes - HB A1c \leq 9%⁵	71%	71%	65%	65%	51%	80%
Patients with HBA1c < 7%	446,875	395	25,674	395	23	32
Patients with HBA1c 7% \leq HBA1c \leq 9%	346,946	307	23,039	354	13	24
Patients with HBA1c > 9%	328,981	291	26,578	409	34	14
Charts sampled or EHR Total	1,122,802	993	75,291	1,158	70	70
Cardiovascular Disease - Blood Pressure⁶	63%	63%	64%	64%	44%	31%
Patients with Controlled Blood Pressure	1,300,976	1,150	66,454	1,022	31	22
Charts sampled or EHR Total	2,061,768	1,823	103,672	1,595	70	70
Cancer - Screenings⁷	58%	58%	55%	55%	70%	81%
# Female Patients PAP	1,782,103	1,576	82,190	1,264	49	57
Charts sampled or EHR Total	3,062,033	2,707	149,165	2,295	70	70
Prenatal Care - 1st Trimester⁸	67%	67%	58%	58%	NA	43%
# of 1st Trimester Patients first visit with your clinic	306,583	271	15,844	244	0	1,288
# of 1st Trimester Patients first visit with another provider	16,528	15	594	9	0	0
Prenatal Care - 2nd Trimester⁹	27%	27%	34%	34%	NA	52%
# of 2nd Trimester Patients first visit with your clinic	117,516	104	9,172	141	0	1,527
# of 2nd Trimester Patients first visit with another provider	10,297	9	507	8	0	13
Prenatal Care - 3rd Trimester¹⁰	6%	6%	9%	9%	NA	5%
# of third Trimester Patients first visit with your clinic	25,225	22	2,055	32	0	154
# of third Trimester Patients first visit with another provider	4,292	4	381	6	0	5
Total Number of Prenatal Patients	480,441	425	28,553	439	0	2,987
Appropriate immunizations by 2nd bday¹¹	69%	69%	68%	68%	38%	89%
Number of children who have received required vaccines	160,092	142	7,803	120	3	62
Total Patients with 2nd Birthday During Measurement Year	232,692	206	11,408	176	8	70

²⁹ Diabetes: Patients with HBA1c \leq 9% out of total # of charts sampled of patients diagnosed with Type I or II diabetes.
 Patients with controlled blood pressure out of the charts sampled of patients diagnosed with hypertension.
 PAP Test: Number of female patients aged 21-64 who had at least one PAP during one of the two previous years.
 Prenatal Care - 1st Trimester: Percentage of prenatal patients initiating care at clinic during the first trimester.
 Prenatal Care - 2nd Trimester: Percentage of prenatal patients initiating care at clinic during the second trimester.
 Prenatal Care - 3rd Trimester: Percentage of prenatal patients initiating care at clinic during the third trimester.
 Appropriate immunizations by 2nd birthday: Percent of 2 year olds who have received required vaccines.

Health Outcome Indicators	HACS		HHH	
	2009	2010	2009	2010
Diabetes -HB A1c ≤ 9%⁵	48%	65%	7%	10%
Patients with HBA1c < 7%	6	20	2	4
Patients with HBA1c 7% ≤ HBA1c ≤ 9%	4	17	3	3
Patients with HBA1c > 9%	11	20	65	63
Charts sampled or EHR Total	21	57	70	70
Cardiovascular Disease - Blood Pressure⁶	64%	70%	63%	56%
Patients with Controlled Blood Pressure	38	100	44	39
Charts sampled or EHR Total	59	142	70	70
Cancer - Screenings⁷	84%	34%	37%	63%
# Female Patients PAP	59	157	26	44
Charts sampled or EHR Total	70	462	70	70
Prenatal Care - 1st Trimester⁸	100%	60%	NA	NA
# of 1st Trimester Patients first visit with your clinic	17	0	0	0
# of 1st Trimester Patients first visit with another provider	7	15	0	0
Prenatal Care - 2nd Trimester⁹	0%	32%	NA	NA
# of 2nd Trimester Patients first visit with your clinic	0	0	0	0
# of 2nd Trimester Patients first visit with another provider	0	8	0	0
Prenatal Care - 3rd Trimester¹⁰	0%	8%	NA	NA
# of third Trimester Patients first visit with your clinic	0	0	0	0
# of third Trimester Patients first visit with another provider	0	2	0	0
Total Number of Prenatal Patients	24	25	0	0
Appropriate immunizations by 2nd bday¹¹	NA	NA	NA	NA
Number of children who have received required vaccines	0	0	0	0
Total Patients with 2nd Birthday During Measurement Year	0	0	0	0

Patient Demographics

Patient Demographics	2009 National FQHC		2009 Texas FQHC		Legacy	
	1131 Grantees	Average	65 Grantees	Average	2009	2010
Age						
Pediatrics (<15 years old)	29%	29%	31%	31%	2%	25%
Male Pediatrics (<15)	2,761,603	2,442	141,930	2,184	129	3,275
Female Pediatrics (<15)	2,745,725	2,428	141,828	2,182	142	3,228
Geriatric (age 65 and over)	7%	7%	7%	7%	2%	2%
Male Geriatric (65+)	505,146	447	22,710	349	209	228
Female Geriatric (65+)	786,102	695	36,344	559	100	248
Race Ethnicity/Language						
Number of Patients By Race	18,753,858	16,582	903,586	13,901	16,484	26,472
Asian/Pacific Islander	632,105	559	7,562	116	501	602
Black/African American	3,786,257	3,348	100,068	1,540	5,475	5,073
Native American	186,162	165	1,942	30	165	84
Hispanic or Latino	6,204,872	5,486	581,306	8,943	4,731	14,446
White	6,384,182	5,645	179,124	2,756	5,395	4,629
More than One Race	148,367	131	2,887	44	68	91
Unreported/Refused to Report	1,411,913	1,248	30,697	472	149	1,547
With Linguistic Barrier	4,635,500	4,099	339,929	5,230	2,222	12,078
Percent of Patients by Race	100%	100%	100%	100%	100%	100%
Asian/Pacific Islander	3%	3%	1%	1%	3%	2%
Black/African American	20%	20%	11%	11%	33%	19%
Native American	1%	1%	0%	0%	1%	0%
Hispanic or Latino	33%	33%	64%	64%	29%	55%
White	34%	34%	20%	20%	33%	17%
More than One Race	1%	1%	0%	0%	0%	0%
Unreported/Refused to Report	8%	8%	3%	3%	1%	6%
With Linguistic Barrier	25%	25%	38%	38%	13%	46%

Patient Demographics	HACS		HHH	
	2009	2010	2009	2010
Age				
Pediatrics (<15 years old)	0%	3%	1%	1%
Male Pediatrics (<15)	4	42	16	22
Female Pediatrics (<15)	0	41	14	35
Geriatric (age 65 and over)	1%	1%	1%	1%
Male Geriatric (65+)	20	13	23	19
Female Geriatric (65+)	2	13	12	12
Race Ethnicity/Language				
Number of Patients By Race	1,943	2,488	3,792	4,392
Asian/Pacific Islander	4	7	25	37
Black/African American	1,101	1,318	2,122	2,280
Native American	0	0	6	8
Hispanic or Latino	737	1,045	339	443
White	101	118	1,190	1,513
More than One Race	0	0	52	40
Unreported/Refused to Report	0	0	58	71
With Linguistic Barrier	578	637	231	96
Percent of Patients by Race	100%	100%	100%	100%
Asian/Pacific Islander	0%	0%	1%	1%
Black/African American	57%	53%	56%	52%
Native American	0%	0%	0%	0%
Hispanic or Latino	38%	42%	9%	10%
White	5%	5%	31%	34%
More than One Race	0%	0%	1%	1%
Unreported/Refused to Report	0%	0%	2%	2%
With Linguistic Barrier	30%	26%	6%	2%