

Program Name: Health Center 330

Submission Status: Review In Progress, Version 2

## UDS Report - 2022

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Do you receive Bureau of Health Workforce funding during the reporting year?: No

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BHCNIS ID: 091230 - La Clinica De La Raza Inc., Oakland, CA

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## Table Patients by ZIP Code

## ZIP Codes

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
94103	0	12	0	1	13
94124	1	15	0	1	17
94501	88	994	34	58	1,174
94502	10	40	0	4	54
94503	63	138	8	15	224
94505	4	60	1	1	66
94506	9	21	1	2	33
94507	3	13	0	2	18
94509	323	2,207	29	37	2,596
94510	61	602	20	13	696
94511	10	50	3	4	67
94513	93	742	13	14	862
94514	9	29	0	0	38
94517	3	35	0	1	39
94518	142	860	12	13	1,027

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
94519	58	421	5	2	486
94520	475	3,085	24	31	3,615
94521	91	624	13	9	737
94522	0	11	0	0	11
94523	34	302	3	10	349
94525	7	3	0	1	11
94526	7	50	0	1	58
94530	19	71	1	9	100
94531	105	746	10	17	878
94533	81	481	12	6	580
94534	23	100	3	5	131
94536	5	45	0	3	53
94538	9	55	1	1	66
94539	3	12	0	1	16
94541	171	975	15	21	1,182
94542	10	40	0	2	52
94544	199	757	9	14	979
94545	101	261	2	7	371
94546	29	257	4	6	296
94547	10	40	1	7	58
94548	3	22	0	1	26
94549	6	60	0	7	73
94550	2	18	1	0	21
94551	7	23	0	2	32
94552	2	26	2	0	30
94553	74	435	7	5	521
94555	2	18	0	1	21
94556	3	32	0	2	37
94558	11	20	1	2	34
94559	8	12	0	0	20
94560	8	34	0	1	43
94561	126	943	28	31	1,128
94563	4	18	2	1	25
94564	9	76	2	0	87
94565	860	4,850	58	125	5,893
94566	4	16	0	1	21
94568	7	60	2	1	70
94571	4	16	1	2	23
94572	10	38	0	1	49
94577	158	986	14	36	1,194
94578	151	1,072	19	38	1,280
94579	38	281	10	13	342
94580	68	445	13	19	545
94582	10	91	1	1	103
94583	13	83	1	5	102

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
94585	23	150	6	5	184
94587	8	92	4	3	107
94588	3	30	0	0	33
94589	515	3,784	100	78	4,477
94590	849	5,015	120	116	6,100
94591	486	3,203	83	95	3,867
94592	5	32	1	4	42
94595	8	36	0	3	47
94596	33	193	1	3	230
94597	32	247	0	3	282
94598	13	105	3	2	123
94601	953	8,511	206	292	9,962
94602	107	885	31	41	1,064
94603	414	3,699	60	117	4,290
94604	2	29	1	1	33
94605	278	2,290	35	79	2,682
94606	353	3,061	128	118	3,660
94607	73	975	26	39	1,113
94608	62	706	10	27	805
94609	46	551	8	40	645
94610	30	278	7	26	341
94611	35	214	4	9	262
94612	46	453	13	14	526
94618	18	84	1	11	114
94619	114	922	26	27	1,089
94621	568	4,721	79	163	5,531
94702	12	143	0	15	170
94703	8	184	2	11	205
94704	8	60	1	2	71
94705	3	37	0	12	52
94706	8	91	0	2	101
94707	0	19	0	4	23
94708	0	9	0	3	12
94709	1	24	0	1	26
94710	7	112	2	5	126
94801	26	252	1	5	284
94803	11	76	0	2	89
94804	34	303	6	19	362
94805	8	57	0	3	68
94806	55	326	2	18	401
95205	2	21	0	1	24
95206	5	42	0	4	51
95207	2	16	0	2	20
95210	1	12	0	2	15
95330	3	17	0	0	20

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
95336	1	19	0	1	21
95337	2	15	0	1	18
95351	5	6	0	2	13
95354	2	9	0	0	11
95376	4	22	0	2	28
95391	5	8	0	0	13
95620	3	16	0	0	19
95687	24	79	5	4	112
95688	6	50	1	0	57

## Other ZIP Codes

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
Other ZIP Codes	142	625	8	47	822
Unknown Residence	0	0	0	0	0
<b>Total</b>	<b>9,306</b>	<b>66,745</b>	<b>1,367</b>	<b>2,098</b>	<b>79,516</b>

## Comments

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## Table 3A - Patients by Age and by Sex Assigned at Birth

### Universal

Line	Age Groups	Male Patients (a)	Female Patients (b)
1	Under age 1	638	562
2	Age 1	688	626
3	Age 2	754	746
4	Age 3	829	820
5	Age 4	889	846
6	Age 5	1,046	975
7	Age 6	1,099	1,086
8	Age 7	1,129	1,021
9	Age 8	1,085	1,036
10	Age 9	1,080	1,051
11	Age 10	1,060	993
12	Age 11	1,088	1,023
13	Age 12	1,028	1,002
14	Age 13	1,052	951
15	Age 14	1,098	1,169
16	Age 15	1,123	1,172
17	Age 16	983	1,036
18	Age 17	905	982
19	Age 18	731	871
20	Age 19	500	688
21	Age 20	353	685
22	Age 21	320	659
23	Age 22	263	605
24	Age 23	231	591

Line	Age Groups	Male Patients (a)	Female Patients (b)
25	Age 24	175	592
26	Ages 25-29	947	2,619
27	Ages 30-34	1,130	2,918
28	Ages 35-39	1,321	2,884
29	Ages 40-44	1,598	2,880
30	Ages 45-49	1,552	2,742
31	Ages 50-54	1,545	2,411
32	Ages 55-59	1,449	2,072
33	Ages 60-64	1,372	1,699
34	Ages 65-69	1,040	1,564
35	Ages 70-74	663	1,092
36	Ages 75-79	373	622
37	Ages 80-84	199	379
38	Age 85 and over	153	357
39	<b>Total Patients (Sum of Lines 1-38)</b>	<b>33,489</b>	<b>46,027</b>

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Table 3B - Demographic Characteristics

Universal

Patients by Race and Hispanic or Latino/a Ethnicity					
Line	Patients by Race	Hispanic or Latino/a (a)	Non-Hispanic or Latino/a (b)	Unreported/Chose Not to Disclose Ethnicity (c)	Total (d) (Sum Columns a+b+c)
1	Asian	114	6,470		6,584
2a	Native Hawaiian	9	35		44
2b	Other Pacific Islander	34	492		526
2	<b>Total Native Hawaiian/Other Pacific Islander (Sum Lines 2a + 2b)</b>	<b>43</b>	<b>527</b>		<b>570</b>
3	Black/African American	263	7,803		8,066
4	American Indian/Alaska Native	162	89		251
5	White	30,355	5,465		35,820
6	More than one race	100	374		474
7	Unreported/Chose not to disclose race	18,958	4,182	4,611	27,751
8	<b>Total Patients (Sum of Lines 1 + 2 + 3 to 7)</b>	<b>49,995</b>	<b>24,910</b>	<b>4,611</b>	<b>79,516</b>

Line	Patients Best Served in a Language Other than English	Number (a)
12	Patients Best Served in a Language Other than English	44,998

Line	Patients by Sexual Orientation	Number (a)
13	Lesbian or Gay	436
14	Heterosexual (or straight)	39,452
15	Bisexual	641
16	Other	252
17	Don't know	1,144
18	Chose not to disclose	2,257
18a	Unknown	35,334
19	<b>Total Patients</b> (Sum of Lines 13 to 18a)	<b>79,516</b>

Line	Patients by Gender Identity	Number (a)
20	Male	15,789
21	Female	27,840
22	Transgender Man/Transgender Male/Transmasculine	54
23	Transgender Woman/Transgender Female/Transfeminine	55
24	Other	181
25	Chose not to disclose	318
25a	Unknown	35,279
<b>26</b>	<b>Total Patients (Sum of Lines 20 to 25a)</b>	<b>79,516</b>

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### Table 4 - Selected Patient Characteristics

#### Universal

##### Income as Percent of Poverty Guideline

Line	Income as Percent of Poverty Guideline	Number of Patients (a)
1	100% and below	32,432
2	101 - 150%	8,314
3	151 - 200%	4,262
4	Over 200%	3,558
5	Unknown	30,950
<b>6</b>	<b>TOTAL (Sum of Lines 1-5)</b>	<b>79,516</b>

Line	Primary Third-Party Medical Insurance	0-17 years old (a)	18 and older (b)
7	None/Uninsured	2,186	7,120
8a	Medicaid (Title XIX)	31,734	32,156
8b	CHIP Medicaid	0	0
<b>8</b>	<b>Total Medicaid (Line 8a + 8b)</b>	<b>31,734</b>	<b>32,156</b>
9a	Dually Eligible (Medicare and Medicaid)	0	0
9	Medicare (Inclusive of dually eligible and other Title XVIII beneficiaries)	2	1,365
10a	Other Public Insurance (Non-CHIP) (specify) Contra Costa Cares Program, FamilyPac and HealthPac	1	2,854
10b	Other Public Insurance CHIP	0	0
<b>10</b>	<b>Total Public Insurance (Line 10a + 10b)</b>	<b>1</b>	<b>2,854</b>
11	Private Insurance	748	1,350
<b>12</b>	<b>TOTAL (Sum of Lines 7 + 8 + 9 +10 +11)</b>	<b>34,671</b>	<b>44,845</b>



## Managed Care Utilization

Line	Managed Care Utilization	Medicaid (a)	Medicare (b)	Other Public Including Non-Medicaid CHIP (c)	Private (d)	TOTAL (e)
13a	Capitated Member Months	640,394	29,205	0	9,797	679,396
13b	Fee-for-service Member Months	96,571	0	0	0	96,571
13c	<b>Total Member Months (Sum of Lines 13a + 13b)</b>	<b>736,965</b>	<b>29,205</b>	<b>0</b>	<b>9,797</b>	<b>775,967</b>

Line	Special Populations	Number of Patients (a)
16	<b>Total Agricultural Workers or Dependents</b> (All health centers report this line)	<b>1,578</b>
23	<b>Total Homeless</b> (All health centers report this line)	<b>243</b>
24	<b>Total School-Based Service Site Patients</b> (All health centers report this line)	<b>4,818</b>
25	<b>Total Veterans</b> (All health centers report this line)	<b>125</b>
26	<b>Total Patients Served at a Health Center Located In or Immediately Accessible to a Public Housing Site</b> (All health centers report this line)	<b>520</b>

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## Table 5 - Staffing and Utilization

### Universal

#### Medical Care Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1	Family Physicians	24.15	46,239	19,516	
2	General Practitioners	0	0	0	
3	Internists	2.08	1,331	716	
4	Obstetrician/Gynecologists	5.39	7,259	1,759	
5	Pediatricians	11.74	24,698	11,348	
7	Other Specialty Physicians	0	0	0	
8	<b>Total Physicians (Lines 1-7)</b>	<b>43.36</b>	<b>79,527</b>	<b>33,339</b>	
9a	Nurse Practitioners	29.09	43,672	18,764	

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
9b	Physician Assistants	13.28	15,024	8,568	
10	Certified Nurse Midwives	1.13	3,899	2,067	
10a	<b>Total NPs, PAs, and CNMs (Lines 9a-10)</b>	<b>43.5</b>	<b>62,595</b>	<b>29,399</b>	
11	Nurses	19.4	2,478	202	
12	Other Medical Personnel	144.17			
13	Laboratory Personnel	4.33			
14	X-ray Personnel	1.09			
15	<b>Total Medical Care Services (Lines 8 + 10a through 14)</b>	<b>255.85</b>	<b>144,600</b>	<b>62,940</b>	<b>57,822</b>

Dental Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
16	Dentists	33.05	85,048	12,970	
17	Dental Hygienists	5.81	6,707	0	
17a	Dental Therapists	0	0	0	
18	Other Dental Personnel	89.55			
19	<b>Total Dental Services (Lines 16-18)</b>	<b>128.41</b>	<b>91,755</b>	<b>12,970</b>	<b>33,187</b>

Mental Health Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a	Psychiatrists	0.57	763	284	
20a1	Licensed Clinical Psychologists	1.09	288	178	
20a2	Licensed Clinical Social Workers	12.21	6,616	4,671	
20b	Other Licensed Mental Health Providers	22.6	4,597	5,931	
20c	Other Mental Health Personnel	6.2	3,882	3,147	
20	<b>Total Mental Health Services (Lines 20a-c)</b>	<b>42.67</b>	<b>16,146</b>	<b>14,211</b>	<b>5,673</b>

Substance Use Disorder Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
21	Substance Use Disorder Services	1.5	83	304	134

Other Professional Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
22	<b>Other Professional Services</b> <b>Specify</b> Nutritionists, Podiatrist, Physical Therapist and Acupuncturist	4.78	1,482	3,580	2,563

## Vision Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
22a	Ophthalmologists	0	0	0	
22b	Optometrists	2.28	4,184	81	
22c	Other Vision Care Personnel	5.12			
22d	<b>Total Vision Services (Lines 22a-c)</b>	<b>7.4</b>	<b>4,184</b>	<b>81</b>	<b>3,491</b>

## Pharmacy Personnel

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
23	<b>Pharmacy Personnel</b>	6.78			

## Enabling Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
24	Case Managers	7.82	316	1,612	
25	Patient and Community Education Specialists	38.05	1,700	5,384	
26	Outreach Workers	2.18			
27	Transportation Personnel	0			
27a	Eligibility Assistance Workers	39.68			
27b	Interpretation Personnel	1.86			
27c	Community Health Workers	0			
28	<b>Other Enabling Services Specify</b>	0			
29	<b>Total Enabling Services (Lines 24-28)</b>	<b>89.59</b>	<b>2,016</b>	<b>6,996</b>	<b>3,858</b>

## Other Programs/Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
29a	<b>Other Programs and Services</b> Specify WIC and Children Worker	8.63			
29b	<b>Quality Improvement Personnel</b>	1.82			

## Administration and Facility

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
30a	Management and Support Personnel	181.88			
30b	Fiscal and Billing Personnel	38.55			
30c	IT Personnel	28.81			
31	Facility Personnel	6.58			
32	Patient Support Personnel	123.09			
33	<b>Total Facility and Non-Clinical Support Personnel</b> (Lines 30a-32)	378.91			

## Grand Total

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
34	<b>Grand Total</b> (Lines 15+19+20+21+22+22d+23+29+29a+29b+33)	926.34	260,266	101,082	

## Selected Service Detail Addendum

Line	Personnel by Major Service Category: Mental Health Service Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a01	Physicians (other than Psychiatrists)	88	7,809	3,469	6,257
20a02	Nurse Practitioners	55	4,117	1,934	3,457
20a03	Physician Assistants	12	1,377	864	1,414
20a04	Certified Nurse Midwives	4	129	136	177

## Substance Use Disorder Detail

Line	Personnel by Major Service Category: Substance Use Disorder Detail	Personnel (a1)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
21a	Physicians (other than Psychiatrists)	70	1,950	690	1,572
21b	Nurse Practitioners (Medical)	47	945	280	788
21c	Physician Assistants	11	430	194	441
21d	Certified Nurse Midwives	3	48	47	59
21e	Psychiatrists	3	69	20	12
21f	Licensed Clinical Psychologists	3	9	11	4
21g	Licensed Clinical Social Workers	17	114	104	79
21h	Other Licensed Mental Health Providers	10	56	165	40

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## Table 6A - Selected Diagnoses and Services Rendered

### Universal

#### Selected Infectious and Parasitic Diseases

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
1-2	Symptomatic/Asymptomatic human immunodeficiency virus (HIV)	B20, B97.35, O98.7-, Z21	482	172
3	Tuberculosis	A15- through A19-, O98.0-	34	18
4	Sexually transmitted infections	A50- through A64-	1,131	625
4a	Hepatitis B	B16.0 through B16.2, B16.9, B17.0, B18.0, B18.1, B19.1-, O98.4-	211	128
4b	Hepatitis C	B17.1-, B18.2, B19.2-	253	142
4c	Novel coronavirus (SARS-CoV-2) disease	U07.1	5,029	4,229
4d	Post COVID-19 condition	U09.9	142	98

#### Selected Diseases of the Respiratory System

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
5	Asthma	J45-	6,953	3,553

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
6	Chronic lower respiratory diseases	J40 (count J40 only when code U07.1 <b>is not</b> present), J41- through J44-, J47-	1,139	647
6a	Acute respiratory illness due to novel coronavirus (SARS-CoV-2) disease	J12.82, J12.89, J20.8, J40, J22, J98.8, J80 (count codes listed only when code U07.1 <b>is</b> also present)	36	31

Selected Other Medical Conditions

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
7	Abnormal breast findings, female	C50.01-, C50.11-, C50.21-, C50.31-, C50.41-, C50.51-, C50.61-, C50.81-, C50.91-, C79.81, D05-, D48.6-, D49.3-, N60-, N63-, R92-	1,285	878
8	Abnormal cervical findings	C53-, C79.82, D06-, R87.61-, R87.629, R87.810, R87.820	1,594	970
9	Diabetes mellitus	E08- through E13-, O24-(exclude O24.41-)	23,226	7,386
10	Heart disease (selected)	I01-, I02- (exclude I02.9), I20- through I25-, I27-, I28-, I30- through I52-	2,988	1,513
11	Hypertension	I10- through I16-, O10-, O11-	18,783	8,340
12	Contact dermatitis and other eczema	L23- through L25-, L30- (exclude L30.1, L30.3, L30.4, L30.5), L58-	2,363	1,860
13	Dehydration	E86-	42	35
14	Exposure to heat or cold	T33-, T34-, T67-, T68-, T69-, W92-, W93-, X30-, X31-, X32-	6	6
14a	Overweight and obesity	E66-, Z68- (exclude Z68.1, Z68.20 through Z68.24, Z68.51, Z68.52)	13,892	8,943

Selected Childhood Conditions (limited to ages 0 through 17)

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
15	Otitis media and Eustachian tube disorders	H65- through H69-	736	575
16	Selected perinatal/neonatal medical conditions	A33, P19-, P22- through P29- (exclude P29.3), P35- through P96- (exclude P54-, P92-, P96.81), R78.81, R78.89	762	424
17	Lack of expected normal physiological development (such as delayed milestone, failure to gain weight, failure to thrive); nutritional deficiencies in children only. Does not include sexual or mental development.	E40- through E46-, E50- through E63-, P92-, R62- (exclude R62.7), R63.3	3,121	1,975

Selected Mental Health Conditions, Substance Use Disorders, and Exploitations

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
18	Alcohol-related disorders	F10-, G62.1, O99.31-	1,278	643

Line	Diagnostic Category	Applicable ICD-10-CM Code	Number of Visits by Diagnosis Regardless of Primacy (a)	Number of Patients with Diagnosis (b)
19	Other substance-related disorders (excluding tobacco use disorders)	F11- through F19- (exclude F17-), G62.0, O99.32-	2,136	1,071
19a	Tobacco use disorder	F17-, O99.33-, Z72.0	2,248	1,448
20a	Depression and other mood disorders	F30- through F39-	14,607	3,104
20b	Anxiety disorders, including post- traumatic stress disorder (PTSD)	F06.4, F40- through F42-, F43.0, F43.1-, F93.0	20,038	5,778
20c	Attention deficit and disruptive behavior disorders	F90- through F91-	2,525	603
20d	Other mental disorders, excluding drug or alcohol dependence	F01- through F09- (exclude F06.4), F20- through F29-, F43- through F48- (exclude F43.0- and F43.1-), F50- through F99- (exclude F55-, F64-, F84.2, F90-, F91-, F93.0, F98-), O99.34-, R45.1, R45.2, R45.5, R45.6, R45.7, R45.81, R45.82, R48.0	17,479	6,204
20e	Human trafficking	T74.5- through T74.6-, T76.5- through T76.6-, Z04.81, Z04.82, Z62.813, Z91.42	0	0
20f	Intimate partner violence	T74.11, T74.21, T74.31, Z69.11	27	12

## Selected Diagnostic Tests/Screening/Preventive Services

Line	Service Category	Applicable ICD-10-CM, CPT-4/II/PLA, or HCPCS Code	Number of Visits (a)	Number of Patients (b)
21	HIV test	<b>CPT-4:</b> 86689, 86701 through 86703, 87389 through 87391, 87534 through 87539, 87806	7,503	6,836
21a	Hepatitis B test	<b>CPT-4:</b> 80074, 86704 through 86707, 87340, 87341, 87350, 87912	2,191	2,070
21b	Hepatitis C test	<b>CPT-4:</b> 80074, 86803, 86804, 87520 through 87522, 87902	6,053	5,719
21c	Novel coronavirus (SARS-CoV-2) diagnostic test	<b>CPT-4:</b> 87426, 87428, 87635, 87636, 87637 <b>HCPCS:</b> U0001, U0002, U0003, U0004 <b>CPT PLA:</b> 0202U, 0223U, 0225U, 0240U, 0241U	26,054	18,180
21d	Novel coronavirus (SARS-CoV-2) antibody test	<b>CPT-4:</b> 86318, 86328, 86408, 86409, 86413, 86769 <b>CPT PLA:</b> 0224U, 0226U	4	4
21e	Pre-Exposure Prophylaxis (PrEP)-associated management of <b>all</b> patients on PrEP	<b>Possible codes to explore for PrEP management:</b> <b>CPT-4:</b> 99401 through 99404 <b>ICD-10:</b> Z11.3, Z11.4, Z20.2, Z20.6, Z51.81, Z71.51, Z71.7, Z79.899 Limited to prescribed PrEP based on a patient's risk for HIV exposure <b>AND</b> limited to emtricitabine/tenofovir disoproxil fumarate (FTC/TDF), emtricitabine/tenofovir alafenamide (FTC/TAF), or cabotegravir for PrEP	436	150
22	Mammogram	<b>CPT-4:</b> 77063, 77065, 77066, 77067 <b>ICD-10:</b> Z12.31 <b>HCPCS:</b> G0279	0	0
23	Pap test	<b>CPT-4:</b> 88141 through 88153, 88155, 88164 through 88167, 88174, 88175 <b>ICD-10:</b> Z01.41-, Z01.42, Z12.4 (exclude Z01.411 and Z01.419) <b>HCPCS:</b> G0144, G0145, G0147, G0148	5,598	5,458
24	Selected immunizations: hepatitis A; haemophilus influenzae B (HiB); pneumococcal, diphtheria, tetanus, pertussis (DTaP) (DTP) (DT); measles, mumps, rubella (MMR); poliovirus; varicella; hepatitis B	<b>CPT-4:</b> 90632, 90633, 90634, 90636, 90643, 90644, 90645, 90646, 90647, 90648, 90669, 90670, 90696, 90697, 90698, 90700, 90701, 90702, 90703, 90704, 90705, 90706, 90707, 90708, 90710, 90712, 90713, 90714, 90715, 90716, 90718, 90720, 90721, 90723, 90730, 90731, 90732, 90740, 90743, 90744, 90745, 90746, 90747, 90748	16,383	12,046
24a	Seasonal flu vaccine	<b>CPT-4:</b> 90630, 90653 through 90657, 90658, 90661, 90662, 90672, 90673, 90674, 90682, 90685 through 90689, 90756	19,642	17,688
24b	Coronavirus (SARS-CoV-2) vaccine	<b>CPT-I:</b> 0001A-0004A, 0011A- 0014A, 0021A-0024A, 0031A-0034A, 0041A-0044A, 0051A-0054A, 0064A, 0071A, 0072A, 91300-91307, 91308-91310	19,668	15,749
25	Contraceptive management	<b>ICD-10:</b> Z30-	14,315	7,087
26	Health supervision of infant or child (ages 0 through 11)	<b>CPT-4:</b> 99381 through 99383, 99391 through 99393 <b>ICD-10:</b> Z00.1-, Z76.1, Z76.2	18,015	11,111
26a	Childhood lead test screening (9 to 72 months)	<b>ICD-10:</b> Z13.88 <b>CPT-4:</b> 83655	1,916	1,807
26b	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	<b>CPT-4:</b> 99408, 99409 <b>HCPCS:</b> G0396, G0397, G0443, H0050	21,502	19,421
26c	Smoke and tobacco use cessation counseling	<b>CPT-4:</b> 99406, 99407 <b>HCPCS:</b> S9075 <b>CPT-II:</b> 4000F, 4001F, 4004F	0	0
26d	Comprehensive and intermediate eye exams	<b>CPT-4:</b> 92002, 92004, 92012, 92014	2,669	2,667



## Selected Dental Services

Line	Service Category	Applicable ADA Code	Number of Visits (a)	Number of Patients (b)
27	Emergency services	CDT: D0140, D9110	4,362	3,950
28	Oral exams	CDT: D0120, D0145, D0150, D0160, D0170, D0171, D0180	34,871	26,678
29	Prophylaxis-adult or child	CDT: D1110, D1120	28,333	21,158
30	Sealants	CDT: D1351	4,907	4,285
31	Fluoride treatment-adult or child	CDT: D1206, D1208 CPT-4: 99188	27,583	19,623
32	Restorative services	CDT: D21xx through D29xx	17,553	9,130
33	Oral surgery (extractions and other surgical procedures)	CDT: D7xxx	3,870	3,226
34	Rehabilitative services (Endo, Perio, Prostho, Ortho)	CDT: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	9,536	4,085

**Notes:** Sources of Codes:

ICD-10-CM (2022)-[National Center for Health Statistics \(NCHS\)](#)

CPT (2022)-[American Medical Association \(AMA\)](#)

Code on Dental Procedures and Nomenclature CDT Code (2022)—Dental Procedure Codes-[American Dental Association \(ADA\)](#)

**"X" in a code:** Denotes any number, including the absence of a number in that place. Dashes (-) in a code indicate that additional characters are required. ICD-10-CM codes all have at least four digits. These codes are not intended to reflect whether or not a code is billable. Instead, they are used to point out that other codes in the series are to be considered.

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## Table 6B - Quality of Care Measures

### Universal

[ ]: Prenatal Care Provided by Referral Only (Check if Yes)

### Section A - Age Categories for Prenatal Care Patients:

### Demographic Characteristics of Prenatal Care Patients

Line	Age	Number of Patients (a)
1	Less than 15 years	0
2	Ages 15—19	142
3	Ages 20—24	459
4	Ages 25—44	1,516
5	Ages 45 and over	13
6	<b>Total Patients (Sum of Lines 1-5)</b>	<b>2,130</b>

## Section B - Early Entry into Prenatal Care

Line	Early Entry into Prenatal Care	Patients Having First Visit with Health Center (a)	Patients Having First Visit with Another Provider (b)
7	First Trimester	1,721	0
8	Second Trimester	336	0
9	Third Trimester	73	0

## Section C - Childhood Immunization Status

Line	Childhood Immunization Status	Total Patients with 2 <sup>nd</sup> Birthday (a)	Number of Records Reviewed (b)	Number of Patients Immunized (c)
10	MEASURE: Percentage of children 2 years of age who received age appropriate vaccines by their 2 <sup>nd</sup> birthday	1,107	1,107	615

## Section D - Cervical and Breast Cancer Screening

Line	Cervical Cancer Screening	Total Female Patients Aged 23 through 64 (a)	Number of Records Reviewed (b)	Number of Patients Tested (c)
11	MEASURE: Percentage of women 23-64 years of age who were screened for cervical cancer	16,591	16,591	12,272

Line	Breast Cancer Screening	Total Female Patients Aged 51 through 73 (a)	Number of Records Reviewed (b)	Number of Patients with Mammogram (c)
11a	MEASURE: Percentage of women 51-73 years of age who had a mammogram to screen for breast cancer	6,583	6,583	2,979

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

Line	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	Total Patients Aged 3 through 16 (a)	Number of Records Reviewed (b)	Number of Patients with Counseling and BMI Documented (c)
12	MEASURE: Percentage of patients 3-16 years of age with a BMI percentile <i>and</i> counseling on nutrition <i>and</i> physical activity documented	15,843	15,843	9,749

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

Line	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	Total Patients Aged 18 and Older (a)	Number of Records Reviewed (b)	Number of Patients with BMI Charted and Follow-Up Plan Documented as Appropriate (c)
13	MEASURE: Percentage of patients 18 years of age and older with (1) BMI documented and (2) follow-up plan documented if BMI is outside normal parameters	29,032	29,032	6,467

## Section G - Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Line	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Total Patients Aged 18 and Older (a)	Number of Records Reviewed (b)	Number of Patients Assessed for Tobacco Use <i>and</i> Provided Intervention if a Tobacco User (c)
14a	MEASURE: Percentage of patients aged 18 years of age and older who (1) were screened for tobacco use one or more times during the measurement period, <b>and</b> (2) if identified to be a tobacco user received cessation counseling intervention	25,997	25,997	21,905

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

Line	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	Total Patients at High Risk of Cardiovascular Events (a)	Number of Records Reviewed (b)	Number of Patients Prescribed or On Statin Therapy (c)
17a	MEASURE: Percentage of patients at high risk of cardiovascular events who were prescribed or were on statin therapy	8,517	8,517	6,630

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

Line	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	Total Patients Aged 18 and Older with IVD Diagnosis or AMI, CABG, or PCI Procedure (a)	Number of Records Reviewed (b)	Number of Patients with Documentation of Aspirin or Other Antiplatelet Therapy (c)
18	MEASURE: Percentage of patients 18 years of age and older with a diagnosis of IVD or AMI, CABG, or PCI procedure with aspirin or another antiplatelet	1,082	1,082	791

## Section J - Colorectal Cancer Screening

Line	Colorectal Cancer Screening	Total Patients Aged 50 through 74 (a)	Number of Records Reviewed (b)	Number of Patients with Appropriate Screening for Colorectal Cancer (c)
19	MEASURE: Percentage of patients 50 through 74 years of age who had appropriate screening for colorectal cancer	12,043	12,043	4,697

## Section K - HIV Measures

Line	HIV Linkage to Care	Total Patients First Diagnosed with HIV (a)	Number of Records Reviewed (b)	Number of Patients Seen Within 30 Days of First Diagnosis of HIV (c)
20	MEASURE: Percentage of patients whose first-ever HIV diagnosis was made by health center personnel between December 1 of the prior year and November 30 of the measurement period and who were seen for follow-up treatment within 30 days of that first-ever diagnosis	8	8	7

Line	HIV Screening	Total Patients Aged 15 through 65 (a)	Number of Records Reviewed (b)	Number of Patients Tested for HIV (c)
20a	MEASURE: Percentage of patients 15 through 65 years of age who were tested for HIV when within age range	34,492	34,492	24,031

## Section L - Depression Measures

Line	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Total Patients Aged 12 and Older (a)	Number of Records Reviewed (b)	Number of Patients Screened for Depression and Follow-Up Plan Documented as Appropriate (c)
21	MEASURE: Percentage of patients 12 years of age and older who were (1) screened for depression with a standardized tool <i>and</i> , if screening was positive, (2) had a follow-up plan documented	36,235	36,235	21,885

Line	Depression Remission at Twelve Months	Total Patients Aged 12 and Older with Major Depression or Dysthymia (a)	Number of Records Reviewed (b)	Number of Patients who Reached Remission (c)
21a	MEASURE: Percentage of patients 12 years of age and older with major depression or dysthymia who reached remission 12 months (+/- 60 days) after an index event	509	509	26

## Section M - Dental Sealants for Children between 6-9 Years

Line	Dental Sealants for Children between 6-9 Years	Total Patients Aged 6 through 9 at Moderate to High Risk for Caries (a)	Number of Records Reviewed (b)	Number of Patients with Sealants to First Molars (c)
22	MEASURE: Percentage of children 6 through 9 years of age at moderate to high risk of caries who received a sealant on a first permanent molar	2,850	2,850	1,447

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**Table 7 - Health Outcomes and Disparities****Deliveries and Birth Weight**

Line	Description	Patients (a)
0	HIV-Positive Pregnant Patients	1
2	Deliveries Performed by Health Center's Providers	646

**Hispanic or Latino/a**

Line	Race and Ethnicity	Prenatal Care Patients Who Delivered During the Year (1a)	Live Births: < 1500 grams (1b)	Live Births: 1500 - 2499 grams (1c)	Live Births: > = 2500 grams (1d)
1a	Asian	1	0	0	0
1b1	Native Hawaiian	1	0	0	1
1b2	Other Pacific Islander	0	0	0	0
1c	Black/African American	2	0	1	1
1d	American Indian/Alaska Native	0	0	0	0
1e	White	309	4	13	285
1f	More than One Race	0	0	0	0
1g	Unreported/Chose Not to Disclose Race	477	4	19	446
	<b>Subtotal Hispanic or Latino/a</b>	<b>790</b>	<b>8</b>	<b>33</b>	<b>733</b>

**Non-Hispanic or Latino/a**

Line	Race and Ethnicity	Prenatal Care Patients Who Delivered During the Year (1a)	Live Births: < 1500 grams (1b)	Live Births: 1500 - 2499 grams (1c)	Live Births: > = 2500 grams (1d)
2a	Asian	28	0	3	25
2b1	Native Hawaiian	0	0	0	0
2b2	Other Pacific Islander	3	0	1	2
2c	Black/African American	65	4	4	53
2d	American Indian/Alaska Native	3	0	0	3
2e	White	34	0	1	30
2f	More than One Race	0	0	0	0
2g	Unreported/Chose Not to Disclose Race	42	1	6	34
	<b>Subtotal Non-Hispanic or Latino/a</b>	<b>175</b>	<b>5</b>	<b>15</b>	<b>147</b>

Unreported/Chose Not to Disclose Race and Ethnicity

Line	Race and Ethnicity	Prenatal Care Patients Who Delivered During the Year (1a)	Live Births: < 1500 grams (1b)	Live Births: 1500 - 2499 grams (1c)	Live Births: > = 2500 grams (1d)
h	Unreported/Chose Not to Disclose Race and Ethnicity	50	1	5	45
i	<b>Total</b>	<b>1,015</b>	<b>14</b>	<b>53</b>	<b>925</b>

## Hispanic or Latino/a

Line	Race and Ethnicity	Total Patients 18 through 84 Years of Age with Hypertension (2a)	Number of Records Reviewed (2b)	Patients with Hypertension Controlled (2c)
1a	Asian	13	13	9
1b1	Native Hawaiian	0	0	0
1b2	Other Pacific Islander	6	6	5
1c	Black/African American	18	18	8
1d	American Indian/Alaska Native	16	16	11
1e	White	3,344	3,344	2,284
1f	More than One Race	6	6	4
1g	Unreported/Chose Not to Disclose Race	1,520	1,520	1,104
	<b>Subtotal Hispanic or Latino/a</b>	<b>4,923</b>	<b>4,923</b>	<b>3,425</b>

## Non-Hispanic or Latino/a

Line	Race and Ethnicity	Total Patients 18 through 84 Years of Age with Hypertension (2a)	Number of Records Reviewed (2b)	Patients with Hypertension Controlled (2c)
2a	Asian	1,237	1,237	835
2b1	Native Hawaiian	6	6	5
2b2	Other Pacific Islander	94	94	59
2c	Black/African American	1,254	1,254	698
2d	American Indian/Alaska Native	12	12	8
2e	White	902	902	548
2f	More than One Race	30	30	16
2g	Unreported/Chose Not to Disclose Race	242	242	149
	<b>Subtotal Non-Hispanic or Latino/a</b>	<b>3,777</b>	<b>3,777</b>	<b>2,318</b>



Unreported/Chose Not to Disclose Race and Ethnicity

Line	Race and Ethnicity	Total Patients 18 through 84 Years of Age with Hypertension (2a)	Number of Records Reviewed (2b)	Patients with Hypertension Controlled (2c)
h.	Unreported/Chose Not to Disclose Race and Ethnicity	373	373	226
i	<b>Total</b>	<b>9,073</b>	<b>9,073</b>	<b>5,969</b>

## Hispanic or Latino/a

Line	Race and Ethnicity	Total Patients 18 through 74 Years of Age with Diabetes (3a)	Number of Records Reviewed (3b)	Patients with HbA1c >9% or No Test During Year (3f)
1a	Asian	7	7	2
1b1	Native Hawaiian	0	0	0
1b2	Other Pacific Islander	7	7	1
1c	Black/African American	5	5	3
1d	American Indian/Alaska Native	15	15	9
1e	White	2,953	2,953	930
1f	More than One Race	2	2	0
1g	Unreported/Chose Not to Disclose Race	1,521	1,521	451
	<b>Subtotal Hispanic or Latino/a</b>	<b>4,510</b>	<b>4,510</b>	<b>1,396</b>

## Non-Hispanic or Latino/a

Line	Race and Ethnicity	Total Patients 18 through 74 Years of Age with Diabetes (3a)	Number of Records Reviewed (3b)	Patients with HbA1c >9% or No Test During Year (3f)
2a	Asian	492	492	156
2b1	Native Hawaiian	1	1	1
2b2	Other Pacific Islander	36	36	30
2c	Black/African American	323	323	162
2d	American Indian/Alaska Native	5	5	3
2e	White	241	241	114
2f	More than One Race	11	11	6
2g	Unreported/Chose Not to Disclose Race	104	104	44
	<b>Subtotal Non-Hispanic or Latino/a</b>	<b>1,213</b>	<b>1,213</b>	<b>516</b>

## Unreported/Chose Not to Disclose Race and Ethnicity

Line	Race and Ethnicity	Total Patients 18 through 74 Years of Age with Diabetes (3a)	Number of Records Reviewed (3b)	Patients with HbA1c >9% or No Test During Year (3f)
h	Unreported/Chose Not to Disclose Race and Ethnicity	115	115	71
i	<b>Total</b>	<b>5,838</b>	<b>5,838</b>	<b>1,983</b>

Table 8A - Financial Costs

## Universal

\* Column c is equal to the sum of column a and column b.

## Financial Costs of Medical Care

Line	Cost Center	Accrued Cost (a)	Allocation of Facility and Non-Clinical Support Services (b)	Total Cost After Allocation of Facility and Non-Clinical Support Services (c)
1	Medical Personnel	\$36,094,554	\$15,612,576	\$51,707,130
2	Lab and X-ray	\$1,804,428	\$827,972	\$2,632,400
3	Medical/Other Direct	\$12,719,987	\$7,302,504	\$20,022,491
4	<b>Total Medical Care Services</b> (Sum of Lines 1 through 3)	<b>\$50,618,969</b>	<b>\$23,743,052</b>	<b>\$74,362,021</b>

## Financial Costs of Other Clinical Services

Line	Cost Center	Accrued Cost (a)	Allocation of Facility and Non-Clinical Support Services (b)	Total Cost After Allocation of Facility and Non-Clinical Support Services (c)
5	Dental	\$25,619,283	\$7,940,340	\$33,559,623
6	Mental Health	\$6,866,671	\$2,715,873	\$9,582,544
7	Substance Use Disorder	\$223,591	\$15,806	\$239,397
8a	Pharmacy (not including pharmaceuticals)	\$1,458,172	\$561,851	\$2,020,023
8b	Pharmaceuticals	\$1,828,012		\$1,828,012
9	<b>Other Professional specify</b> Nutritionists	\$497,927	\$254,647	\$752,574
9a	Vision	\$1,375,753	\$1,060,976	\$2,436,729
10	<b>Total Other Clinical Services</b> (Sum of Lines 5 through 9a)	<b>\$37,869,409</b>	<b>\$12,549,493</b>	<b>\$50,418,902</b>

## Financial Costs of Enabling and Other Services

Line	Cost Center	Accrued Cost (a)	Allocation of Facility and Non-Clinical Support Services (b)	Total Cost After Allocation of Facility and Non-Clinical Support Services (c)
11a	Case Management	\$606,568		\$606,568
11b	Transportation	\$39,904		\$39,904
11c	Outreach	\$259,387		\$259,387
11d	Patient and Community Education	\$5,869,122		\$5,869,122
11e	Eligibility Assistance	\$2,623,193		\$2,623,193
11f	Interpretation Services	\$434,482		\$434,482
11g	Other Enabling Services specify	\$0		\$0
11h	Community Health Workers	\$0		\$0
11	<b>Total Enabling Services</b> (Sum of Lines 11a through 11h)	<b>\$9,832,656</b>	<b>\$3,017,079</b>	<b>\$12,849,735</b>
12	Other Program-Related Services specify WIC	\$530,680	\$152,746	\$683,426
12a	Quality Improvement	\$190,210	\$51,763	\$241,973
13	<b>Total Enabling and Other Services</b> (Sum of Lines 11, 12, and 12a)	<b>\$10,553,546</b>	<b>\$3,221,588</b>	<b>\$13,775,134</b>

## Facility and Non-Clinical Support Services and Totals

Line	Cost Center	Accrued Cost (a)	Allocation of Facility and Non-Clinical Support Services (b)	Total Cost After Allocation of Facility and Non-Clinical Support Services (c)
14	Facility	\$2,806,896		
15	Non-Clinical Support Services	\$36,707,237		
16	<b>Total Facility and Non-Clinical Support Services</b> (Sum of Lines 14 and 15)	<b>\$39,514,133</b>		
17	<b>Total Accrued Costs</b> (Sum of Lines 4 + 10 + 13 + 16)	<b>\$138,556,057</b>		<b>\$138,556,057</b>
18	Value of Donated Facilities, Services, and Supplies specify Donation for services and supply			\$1,030,874
19	<b>Total with Donations</b> (Sum of Lines 17 and 18)			<b>\$139,586,931</b>

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## Table 9D - Patient Service Revenue

Universal

				Retroactive Settlements, Receipts, and Paybacks (c)						
Line	Payer Category	Full Charges This Period (a)	Amount Collected This Period (b)	Collection of Reconciliation Wraparound Current Year (c1)	Collection of Reconciliation Wraparound Previous Years (c2)	Collection of Other Payments: P4P, Risk Pools, etc. (c3)	Penalty / Payback (c4)	Adjustments (d)	Sliding Fee Discounts (e)	Bad Debt Write-Off (f)
1	Medicaid Non-Managed Care	\$27,394,423	\$26,247,066	\$0	\$0	\$0	\$0	\$3,038,904		
2a	Medicaid Managed Care (capitated)	\$17,177,627	\$41,382,578	\$0	\$0	\$10,757,788	\$0	\$-15,061,201		
2b	Medicaid Managed Care (fee-for-service)	\$11,975,418	\$10,206,803	\$0	\$0	\$0	\$0	\$2,921,716		
3	<b>Total Medicaid (Sum of Lines 1 + 2a + 2b)</b>	<b>\$56,547,468</b>	<b>\$77,836,447</b>	<b>\$0</b>	<b>\$0</b>	<b>\$10,757,788</b>	<b>\$0</b>	<b>\$-9,100,581</b>		
4	Medicare Non-Managed Care	\$346,023	\$190,421	\$0	\$0	\$0	\$0	\$158,307		
5a	Medicare Managed Care (capitated)	\$345,950	\$601,830	\$0	\$0	\$0	\$0	\$260,980		
5b	Medicare Managed Care (fee-for-service)	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
6	<b>Total Medicare (Sum of Lines 4 + 5a + 5b)</b>	<b>\$691,973</b>	<b>\$792,251</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$419,287</b>		
7	Other Public, including Non-Medicaid CHIP, Non-Managed Care	\$384,195	\$10,591	\$0	\$0	\$0	\$0	\$395,619		
8a	Other Public, including Non-Medicaid CHIP, Managed Care (capitated)	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
8b	Other Public, including Non-Medicaid CHIP, Managed Care (fee-for-service)	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
8c	Other Public, including COVID-19 Uninsured Program	\$0	\$0			\$0	\$0	\$0		
9	<b>Total Other Public (Sum of Lines 7 + 8a + 8b + 8c)</b>	<b>\$384,195</b>	<b>\$10,591</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$395,619</b>		
10	Private Non-Managed Care	\$2,411,720	\$1,138,871			\$0	\$0	\$1,316,020		
11a	Private Managed Care (capitated)	\$137,694	\$167,573			\$0	\$0	\$98,617		
11b	Private Managed Care (fee-for-service)	\$0	\$0			\$0	\$0	\$0		
12	<b>Total Private (Sum of Lines 10 + 11a + 11b)</b>	<b>\$2,549,414</b>	<b>\$1,306,444</b>			<b>\$0</b>	<b>\$0</b>	<b>\$1,414,637</b>		
13	Self-Pay	\$8,125,849	\$1,426,536						\$5,950,198	\$628,726
14	<b>TOTAL (Sum of Lines 3 + 6 + 9 + 12 + 13)</b>	<b>\$68,298,899</b>	<b>\$81,372,269</b>	<b>\$0</b>	<b>\$0</b>	<b>\$10,757,788</b>	<b>\$0</b>	<b>\$-6,871,038</b>	<b>\$5,950,198</b>	<b>\$628,726</b>

## UDS Report - 2022

## Table 9E - Other Revenues

## Universal

## BPHC Grants (Enter Amount Drawn Down - Consistent with PMS-272)

Line	Source	Amount (a)
1a	Migrant Health Center	\$0
1b	Community Health Center	\$8,414,435
1c	Health Care for the Homeless	\$0
1e	Public Housing Primary Care	\$0
<b>1g</b>	<b>Total Health Center (Sum of Lines 1a through 1e)</b>	<b>\$8,414,435</b>
1k	<b>Capital Development Grants</b> , including School-Based Service Site Capital Grants	\$393,277
1l	Coronavirus Preparedness and Response Supplemental Appropriations Act (H8C)	\$0
1m	Coronavirus Aid, Relief, and Economic Security Act (CARES) (H8D)	\$0
1n	Expanding Capacity for Coronavirus Testing (ECT) (H8E and LAL ECT)	\$510,518
1o	American Rescue Plan (ARP) (H8F, L2C, C8E)	\$5,114,320
1p	<b>Other COVID-19-Related Funding from BPHC specify</b>	\$0
<b>1q</b>	<b>Total COVID-19 Supplemental (Sum of Lines 1l through 1p)</b>	<b>\$5,624,838</b>
<b>1</b>	<b>Total BPHC Grants (Sum of Lines 1g + 1k + 1q)</b>	<b>\$14,432,550</b>

## Other Federal Grants

Line	Source	Amount (a)
2	Ryan White Part C HIV Early Intervention	\$169,699
3	<b>Other Federal Grants specify</b> Data 2000 Waiver Payment Program	\$9,500
3a	Medicare and Medicaid EHR Incentive Payments for Eligible Provider	\$0
3b	<b>Provider Relief Fund specify</b> HRSA - Provider Relief	\$1,048,383
<b>5</b>	<b>Total Other Federal Grants (Sum of Lines 2 through 3b)</b>	<b>\$1,227,582</b>

## Non-Federal Grants Or Contracts

Line	Source	Amount (a)
6	<b>State Government Grants and Contracts specify</b> The most biggest fund is came from State for Woman, Infant and Children. This fund award is \$1,304,781. We have County grant for School Based Center is \$980,845 and for homeless dental program is \$114,127. All other funds are came from State.	\$3,794,966
6a	<b>State/Local Indigent Care Programs specify</b> Alameda County Health PAC	\$6,241,622
7	<b>Local Government Grants and Contracts specify</b> 49% of funds came from Short Doyle. 19% of funds was for Covid-19 program (Testing, Vaccine)	\$9,866,456
8	<b>Foundation/Private Grants and Contracts specify</b> 22% of fund are came for Covid-19 and supporting (Crankstart-General Operating Support, COVID-19 Feeding America Capacity Grant, COVID-19 Just East Bay Response Fund, etc.).	\$8,635,944
9	<b>Total Non-Federal Grants and Contracts (Sum of Lines 6 + 6a + 7 + 8)</b>	<b>\$28,538,988</b>
10	<b>Other Revenue (non-patient service revenue not reported elsewhere) specify</b> This include interest income for \$665,807. Other medical income (Anthem Blue Cross-Incentive, Donation, Medical Record Fee, Uncollected Grant Revenue from prior year, etc.)	\$2,294,469
11	<b>Total Revenue (Sum of Lines 1 + 5 + 9 + 10)</b>	<b>\$46,493,589</b>

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### UDS Report - 2022

## Health Center Health Information Technology (HIT) Capabilities

### HIT

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

☒: Yes, installed at all service delivery sites and used by all providers

☐: Yes, but only installed at some service delivery sites or used by some providers

☐: No

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

☒: Yes

☐: No

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

Other (Please specify):

1a2.Product Name: EpicCare Ambulatory Base

1a3.Version Number: May 2022

1a4.ONC-certified Health IT Product List Number: 15.04.04.1447.Epic.AM.19.1.210830

1a1.Vendor: Select one

Other (Please specify):

1a2.Product Name:

1a3.Version Number:

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

☐: Yes

☒: No

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

☒: Yes

☐: No

If yes, what is the reason?:

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

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

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

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

☐: Other (please describe)

Other (please describe):

1d. Question removed.

1e. Question removed.

2. Question removed.

3. Question removed.

4. Which of the following key providers/health care settings does your health center electronically exchange clinical or patient information with? (Select all that apply.):

☒: Hospitals/Emergency rooms

☒: Specialty providers

☒: Other primary care providers

☒: Labs or imaging

☒: Health information exchange (HIE)

☒: Community-based organizations/social service partners

☐: None of the above

☐: Other (please describe)

Other (please describe):

5. Does your health center engage patients through health IT in any of the following ways? (Select all that apply.):

☒: Patient portals

☐: Kiosks

☒: Secure messaging between patient and provider

☐: Online or virtual scheduling

☒: Automated electronic outreach for care gap closure or preventive care reminders

☐: Application programming interface (API)-based patient access to their health record through mHealth apps [1]

☐: Other (please describe)

☐: No, we DO NOT engage patients using HIT

Other (please describe):

6. Question removed.

7. Question removed.

8. Question removed.

9. Question removed.

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

☒: Quality improvement

☒: Population health management

☒: Program evaluation

☒: Research



☐: Other (please describe)

☐: We DO NOT utilize HIT or EHR data beyond direct patient care

**Other (please describe):**

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

☐: Yes

☒: No, but we are in planning stages to collect this information

☐: No, we are not planning to collect this information

**11a. How many health center patients were screened for social risk factors using a standardized screener during the calendar year? (Only respond to this if the response to Question 11 is "a. Yes.") :**

**12. Which standardized screener(s) for social risk factors, if any, did you use during the calendar year? (Select all that apply.):**

☐: Accountable Health Communities Screening Tools

☐: Upstream Risks Screening Tool and Guide

☐: iHELLP

☐: Recommend Social and Behavioral Domains for EHRs

☐: Protocol for Responding to and Assessing Patients Assets, Risks, and Experiences (PRAPARE)

☐: Well Child Care, Evaluation, Community Resources, Advocacy, Referral, Education (WE CARE)

☐: WellRx

☐: Health Leads Screening Toolkit

☐: Other (please describe)

☐: We DO NOT use a standardized screener

**Other (please describe):**

12a. Of the total patients screened for social risk factors (Question 11a), please provide the total number of patients that screened positive for any of the following at any point during the calendar year. (A patient may experience multiple social risks and should be counted once for each risk factor they screened positive for, regardless of the number of times screened during the year.):

**Food insecurity:** 0

**Housing insecurity:** 0

**Financial strain:** 0

**Lack of transportation/access to public transportation:** 0

**12b. If you DO NOT use a standardized screener to collect this information, please indicate why. (Select all that apply.):**

☐: Have not considered/unfamiliar with standardized screeners

☐: Lack of funding for addressing these unmet social needs of patients

☐: Lack of training for personnel to discuss these issues with patients

☐: Inability to include with patient intake and clinical workflow

☐: Not needed

☐: Other (please describe)

**Other (please describe):**

**13. Does your health center integrate a statewide Prescription Drug Monitoring Program (PDMP) database into the health information systems, such as health information exchanges, EHRs, and/or pharmacy dispensing software (PDS) to streamline provider access to controlled substance prescriptions?:**

☒: Yes

☐: No

☐: Not sure

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

## UDS Report - 2022

## Other Data Elements

## Other Data Elements

## 1. Medication-Assisted Treatment (MAT) for Opioid Use Disorder

a. How many physicians, certified nurse practitioners, physician assistants, and certified nurse midwives,<sup>1</sup> on-site or with whom the health center has contracts, have a Drug Addiction Treatment Act of 2000 (DATA) waiver to treat opioid use disorder with medications specifically approved by the U.S. Food and Drug Administration (FDA) (i.e., buprenorphine) for that indication during the calendar year?: 39

b. During the calendar year, how many patients received MAT for opioid use disorder from a physician, certified nurse practitioner, physician assistant, or certified nurse midwife with a DATA waiver working on behalf of the health center?: 294

## 2. Did your organization use telemedicine to provide remote (virtual) clinical care services?

The term "telehealth" includes "telemedicine" services, but encompasses a broader scope of remote health care services. Telemedicine is specific to remote clinical services, whereas telehealth may include remote non-clinical services, such as provider training, administrative meetings, and continuing medical education, in addition to clinical services.:

☒: Yes

☐: No

## 2a1. Who did you use telemedicine to communicate with? (Select all that apply.):

☒: Patients at remote locations from your organization (e.g., home telehealth, satellite locations)

☒: Specialists outside your organization (e.g., specialists at referral centers)

## 2a2. What telehealth technologies did you use? (Select all that apply.):

☒: Real-time telehealth (e.g., live videoconferencing)

☒: Store-and-forward telehealth (e.g., secure e-mail with photos or videos of patient examinations)

☐: Remote patient monitoring

☐: Mobile Health (mHealth)

## 2a3. What primary telemedicine services were used at your organization? (Select all that apply.):

☒: Primary care

☒: Oral health

☒: Behavioral health: Mental health

☒: Behavioral health: Substance use disorder

☒: Dermatology

☒: Chronic conditions

☐: Disaster management

☒: Consumer health education

☒: Provider-to-provider consultation

☐: Radiology

☒: Nutrition and dietary counseling

☒: Other (Please describe)

Other (Please describe): Ophthalmology

## 2b. If you did not have telemedicine services, please comment why. (Select all that apply.):

☐: Have not considered/unfamiliar with telehealth service options

☐: Policy barriers (Select all that apply)

☐: Inadequate broadband/telecommunication service (Select all that apply)

☐: Lack of funding for telehealth equipment

☐: Lack of training for telehealth services

☐: Not needed

☐: Other (Please describe)

**Other (Please describe):**

**Policy barriers (Select all that apply):**

☐: Lack of or limited reimbursement

☐: Credentialing, licensing, or privileging

☐: Privacy and security

☐: Other (Please describe)

**Other (Please describe):**

**Inadequate broadband/telecommunication service (Select all that apply):**

☐: Cost of service

☐: Lack of infrastructure

☐: Other (Please describe)

**Other (Please describe):**

**3. Provide the number of all assists provided during the past year by all trained assisters (e.g., certified application counselor or equivalent) working on behalf of the health center (personnel, contracted personnel, or volunteers), regardless of the funding source that is supporting the assisters' activities. Outreach and enrollment assists are defined as customizable education sessions about third-party primary care health insurance coverage options (one-on-one or small group) and any other assistance provided by a health center assister to facilitate enrollment.**

**Enter number of assists:** 16,285

<sup>1</sup> With the enactment of the Comprehensive Addiction and Recovery Act of 2016, PL 114-198, opioid treatment prescribing privileges have been extended beyond physicians to include certain qualifying nurse practitioners (NPs), physician assistants (PAs), and certified nurse midwives (CNMs).

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**UDS Report - 2022**

## Workforce

### Workforce

**1. Does your health center provide any health professional education/training that is a hands-on, practical, or clinical experience?:**

☒: Yes

☐: No

**1a. If yes, which category best describes your health center's role in the health professional education/training process? (Select all that apply.):**

☐: Sponsor [2]

☒: Training site partner [3]

☐: Other (please describe)

**Other (please describe):**

2. Please indicate the range of health professional education/training offered at your health center and how many individuals you have trained in each category<sup>4</sup> within the calendar year.

	Medical	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
1.	Physicians	9	41
	a. Family Physicians		35
	b. General Practitioners		0
	c. Internists		4
	d. Obstetrician/Gynecologists		2
	e. Pediatricians		0
	f. Other Specialty Physicians		0
2.	Nurse Practitioners	14	4
3.	Physician Assistants	12	0
4.	Certified Nurse Midwives	0	0
5.	Registered Nurses	0	0
6.	Licensed Practical Nurses/Vocational Nurses	0	0
7.	Medical Assistants	12	0

	Dental	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
8.	Dentists	83	27
9.	Dental Hygienists	0	0
10.	Dental Therapists	0	0
10a.	Dental Assistants	1	0

	Mental Health and Substance Use Disorder	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
11.	Psychiatrists		3
12.	Clinical Psychologists	0	0
13.	Clinical Social Workers	13	0
14.	Professional Counselors	0	0
15.	Marriage and Family Therapists	0	3
16.	Psychiatric Nurse Specialists	0	0
17.	Mental Health Nurse Practitioners	3	0
18.	Mental Health Physician Assistants	0	0
19.	Substance Use Disorder Personnel	0	0

	Vision	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
20.	Ophthalmologists	0	0
21.	Optometrists	0	0

	Other Professionals	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
22.	Chiropractors	0	0
23.	Dietitians/Nutritionists	0	0
24.	Pharmacists	0	0
25.	<b>Other please describe</b> Behaviors Health Bachelor's level trainees	7	0

3. Provide the number of health center personnel serving as preceptors at your health center.: 97

4. Provide the number of health center personnel (non-preceptors) supporting ongoing health center training programs.: 38

5. How often does your health center conduct satisfaction surveys to providers (as identified in Appendix A, Listing of Personnel) working for the health center? (Select one.):

☐: Monthly

☐: Quarterly

☒: Annually

☐: We DO NOT currently conduct provider satisfaction surveys

☐: Other (please describe)

Other (please describe):

6. How often does your health center conduct satisfaction surveys for general personnel (as identified in Appendix A, Listing of Personnel) working for the health center (report provider surveys in question 5 only)? (Select one.):

☐: Monthly

☐: Quarterly

☒: Annually

☐: We DO NOT currently conduct personnel satisfaction surveys

☐: Other (please describe)

Other (please describe):

<sup>2</sup> A sponsor hosts a comprehensive health profession education and/or training program, the implementation of which may require partnerships with other entities that deliver focused, time-limited education and/or training (e.g., a teaching health center with a family medicine residency program).

<sup>3</sup> A training site partner delivers focused, time-limited education and/or training to learners in support of a comprehensive curriculum hosted by another health profession education provider (e.g., month-long primary care dentistry experience for dental students).

<sup>4</sup> Examples of pre-graduate/certificate training include student clinical rotations or externships. A residency, fellowship, or practicum would be examples of post-graduate training. Include non-health-center individuals trained by your health center.

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Data Audit Report

Edit Comments

Edit Code	Comments

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Data Audit Report



Table 3B-Demographic Characteristics
<p><b>Edit 07247: Unreported/Chose not to Disclose greater than 25% of Total Patients</b> - Patients reported on the 'Unreported/Chose not to Disclose' Line 7 (27751) is greater than 25% of total patients (Line 8) (79516). Please correct or explain.</p>
<p><b>Related Tables:</b> Table 3B(UR)</p>
<p><b>Siyue Deng (Health Center) on 01/18/2023 1:03 PM EST:</b> Many of La Clinica's Patients are Hispanic and do not identify with the UDS race categories. We are planning a workflow change to guide patients to appropriate UDS race category.</p>

Table 4-Selected Patient Characteristics
<p><b>Edit 06093: Public Housing Patients in Question</b> - On Universal - There was a (86.38) % change in public housing patients this year compared to the prior year on line 26. Please correct or explain.</p>
<p><b>Related Tables:</b> Table 4(UR)</p>
<p><b>Siyue Deng (Health Center) on 01/18/2023 1:12 PM EST:</b> The CY2022 Patient number of 520 is in line with pre pandemic patient number of 433 in CY2019</p>

Table 5-Staffing And Utilization
<p><b>Edit 06809: Virtual Visits greater than Clinic Visits</b> - Other Professional virtual visits on Line 22 Column b2 (3580) are greater than or equal to Other Professional visits reported on Line 22 Column b (1482). Please correct or explain.</p>
<p><b>Related Tables:</b> Table 5(UR)</p>
<p><b>Siyue Deng (Health Center) on 02/06/2023 5:26 PM EST:</b> Due to ongoing concerns of spreading the COVID-19 virus, our provider continue to deliver most of their patient visits virtually</p>
<p><b>Edit 07252: Virtual Visits greater than Clinic Visits</b> - Substance Use Disorder virtual visits on Line 21 Column b2 (304) are greater than or equal to Substance Use Disorder visits reported on Line 21 Column b (83). Please correct or explain.</p>
<p><b>Related Tables:</b> Table 5(UR)</p>
<p><b>Siyue Deng (Health Center) on 02/06/2023 5:31 PM EST:</b> Due to ongoing concerns of spreading the COVID-19 virus, our providers continue to delivery most of their visits virtually</p>
<p><b>Edit 06811: Virtual Visits greater than Clinic Visits</b> - Enabling virtual visits on Line 29 Column b2 (6996) are greater than or equal to Enabling visits reported on Line 29 Column b (2016). Please correct or explain.</p>
<p><b>Related Tables:</b> Table 5(UR)</p>
<p><b>Siyue Deng (Health Center) on 02/06/2023 5:27 PM EST:</b> Due to ongoing concerns of spreading the COVID-19 virus, our Health Educator provider continue to deliver majority of their patient visits virtually</p>
<p><b>Edit 00024: Family Physicians Productivity Questioned</b> - A significant change in Productivity (visits/FTE) of Family Physicians Line 1 (2722.77) is reported from the prior year (2247.84). Please check to see that the FTE and visit numbers are entered correctly.</p>
<p><b>Related Tables:</b> Table 5(UR)</p>



<b>Siyue Deng (Health Center) on 02/06/2023 5:47 PM EST:</b> Productivity this year is similar to productivity in 2019. CY2019 productivity is 2,980.04. CY2021 were low due to ongoing COVID-19 Pandemic.
<b>Edit 00124: Internist Productivity Questioned</b> - A significant change in Productivity (visits/FTE) of Internists on Line 3 (984.13) is reported from the prior year (2937.33). Please check to see that the FTE and visit numbers are entered correctly.
<b>Related Tables:</b> Table 5(UR)
<b>Siyue Deng (Health Center) on 02/06/2023 5:52 PM EST:</b> FTE for internists was decreased 2.26 compared than last year.
<b>Edit 00033: Peds Productivity Questioned</b> - A significant change in Productivity (visits/FTE) of Pediatricians on Line 5 (3070.36) is reported from the prior year (2538.64). Please check to see that the FTE and visit numbers are entered correctly.
<b>Related Tables:</b> Table 5(UR)
<b>Siyue Deng (Health Center) on 02/06/2023 5:54 PM EST:</b> We carefully checked the numbers and believe the productivity in the current year is reasonable.
<b>Edit 04134: Substantial Inter-year variance in Providers</b> - The number of Physician FTEs reported on Line 8 Column a differs from the prior year. Current Year - (43.36). Prior Year - (46.95). Confirm that this is consistent with staffing changes and that the FTE is calculated based on paid hours.
<b>Related Tables:</b> Table 5(UR)
<b>Siyue Deng (Health Center) on 02/06/2023 5:56 PM EST:</b> We carefully checked the number and believe FTE calculation was calculated based on paid hours. There is 2.26 FTE decreased for Internists.
<b>Edit 00038: CNM Productivity Questioned</b> - A significant change in Productivity (visits/FTE) of Certified Nurse Midwives on Line 10 (5279.65) is reported from the prior year (2688.76). Please check to see that the FTE and visit numbers are entered correctly.
<b>Related Tables:</b> Table 5(UR)
<b>Siyue Deng (Health Center) on 02/06/2023 5:57 PM EST:</b> We carefully checked the number and believe the productivity in the current year is reasonable
<b>Edit 06375: Substance Use Disorder Visit per Patient in Question</b> - On Universal - Substance Use Disorder visits per Substance Use Disorder patient varies substantially from national average. CY (2.89); PY National Average (5.92). Please correct or explain.
<b>Related Tables:</b> Table 5(UR)
<b>Siyue Deng (Health Center) on 02/06/2023 6:06 PM EST:</b> Since 2020 we expand our program and continue to work on ensuring all visits by Substance Use Navigators is captured in our reporting. Some health centers use an intensive case management model with wrap-around resources which results in high number of patient contacts. Our model is a more resource-lean model of connecting patients to care and monitoring SUD patients' adherence to Medication Assisted Treatment.
<b>Edit 04145: Inter-year Patients questioned</b> - On Universal - A large change from the prior year in patients who received Substance Use Disorder services is reported on Line 21, Column C. (CY = (134), PY = (72)). Please correct or explain.
<b>Related Tables:</b> Table 5(UR)
<b>Siyue Deng (Health Center) on 02/06/2023 6:02 PM EST:</b> Our numbers of interventions for patients with Substance Use disorder have grown from 2020 as we expand our program
<b>Edit 04149: Inter-year Patients questioned</b> - On Universal - A large change from the prior year in patients who received Enabling services is reported on Line 29, Column C. (CY = (3858), PY = (5234)). Please correct or explain.
<b>Related Tables:</b> Table 5(UR)

## Table 6B-Quality of Care Indicators

**Edit 07283: Line 11a Column A in Question** - The value entered as the denominator (Column A) for the Breast Cancer Screening measure on Line 11a (6583) appears high compared to estimated medical patients in the age range for this measure. Your health center reports that (72.72)% of total patients receive medical services (as reported on Table 5) and you serve (8838) patients in the age range evaluated for this measure (as reported on Table 3A). Please review and correct or explain.

**Related Tables:** Table 6B, Table 3A(UR), Table 4(UR), Table 5(UR)

**Bridgette DelValle (Health Center) on 02/06/2023 4:15 PM EST:** The reported 2022 denominator and numerator for this measure are consistent with 2021 denominator/ numerators plus a larger number of visits. We conduct outreach and in reach to identify patient who need specific services.

**Edit 03872: No First Visit with Other Provider Reported** - No prenatal patients are reported as beginning care with another provider. Please verify that this data is collected and correct or explain.

**Related Tables:** Table 6B

**Bridgette DelValle (Health Center) on 02/06/2023 11:47 AM EST:** We offer extensive primary and prenatal care services and self-refer prenatal patients with in the agency.

**Edit 05775: Line 11 Column A in Question** - The value entered as the denominator (Column A) for the Cervical Cancer Screening measure on Line 11 (16591) appears high compared to estimated medical patients in the age range for this measure. Your health center reports that (72.72)% of total patients receive medical services (as reported on Table 5) and you serve (21408) patients in the age range evaluated for this measure (as reported on Table 3A). Please review and correct or explain.

**Related Tables:** Table 6B, Table 3A(UR), Table 4(UR), Table 5(UR)

**Bridgette DelValle (Health Center) on 02/06/2023 4:17 PM EST:** The reported 2022 denominator and numerator for this measure are close to 2021 denominator/numerators. We conduct outreach and in reach to identify patients who need specific services.

**Edit 05787: Line 17a Column A in Question** - The value entered as the denominator (Column A) for Patients Age 21+ at High Risk of Cardiovascular Events measure on Line 17a (8517) appears high compared to national prevalence rates of estimated medical patients in the age range for this measure. Your health center reports that (72.72)% of total patients receive medical services (as reported on Table 5) and you serve (41017) patients in the age range evaluated for this measure (as reported on Table 3A). Please review and correct or explain.

**Related Tables:** Table 6B, Table 3A(UR), Table 4(UR), Table 5(UR)

**Bridgette DelValle (Health Center) on 02/06/2023 4:18 PM EST:** The reported 2022 denominator and numerator for this measure are close to 2021 denominator/numerators, with a larger number of visits. We conduct outreach and in reach to identify patients who need specific services.

**Edit 05791: Line 19 Column A in Question** - The value entered as the denominator (Column A) for the Colorectal Cancer Screening measure on Line 19 (12043) appears high compared to estimated medical patients in the age range for this measure. Your health center reports that (72.72)% of total patients receive medical services (as reported on Table 5) and you serve (14907) patients in the age range evaluated for this measure (as reported on Table 3A). Please review and correct or explain.

**Related Tables:** Table 6B, Table 3A(UR), Table 4(UR), Table 5(UR)

**Bridgette DelValle (Health Center) on 02/06/2023 4:18 PM EST:** The reported 2022 denominator and numerator for this measure are consistent with 2021 denominator/numerators plus a larger number of visits. We conduct outreach and in reach to identify patients who need specific services.

Table 7-Health Outcomes and Disparities
<b>Edit 05466: Women delivering greater than Live Births</b> - Total women delivering is greater than the total of births. Please correct or explain.
<b>Related Tables:</b> Table 7
<b>Bridgette DelValle (Health Center) on 02/09/2023 5:22 PM EST:</b> We have birthweights for 98% of our deliveries. We are missing 2% of our birthweights due to not receiving birthweights from delivering hospitals and because we have been unable to contact these patients.

Table 8A-Financial Costs
<b>Edit 04126: Cost Per Visit Questioned</b> - Mental Health Cost Per Visit is substantially different than the prior year. Current Year (315.66); Prior Year (246.35).
<b>Related Tables:</b> Table 8A, Table 5(UR)
<b>Siyue Deng (Health Center) on 02/02/2023 5:40 PM EST:</b> FTE and salary both increased. Cost was increased by the inflation as well.
<b>Edit 04129: Cost Per Visit Questioned</b> - Other Professional Cost Per visits is substantially different than the prior year. Current Year (148.67); Prior Year (118.29).
<b>Related Tables:</b> Table 8A, Table 5(UR)
<b>Siyue Deng (Health Center) on 02/02/2023 5:41 PM EST:</b> FTE and salary both increased. Cost was increased by the inflation as well.
<b>Edit 03945: Inter-Year variance questioned</b> - Current Year Non-Clinical Support costs, Line 15 Column (a) (36707237) varies substantially from cost on the same line last year (31810327). Please correct or explain.
<b>Related Tables:</b> Table 8A
<b>Siyue Deng (Health Center) on 02/02/2023 5:39 PM EST:</b> 12% increase because of inflation and salary increase.

Table 9D-Patient-Related Revenue (Scope of Project Only)
<b>Edit 07600: Adjustments in Question</b> - Other Public adjustments reported on Line 9, Column D, are greater than Other Public charges reported on Line 9, Column A. This is generally not possible. Please correct or explain.
<b>Related Tables:</b> Table 9D
<b>Siyue Deng (Health Center) on 01/26/2023 12:22 PM EST:</b> The adjustment greater than changes it might be prior patient fee was included in this year
<b>Edit 03994: Accounts Receivable not equal to zero</b> - Line 2a, Capitated Medicaid Charges - Collections - Adjustments does not equal zero (-9143750). Adjustments for capitated plans are the difference between charges and payments unless payments are not received in the month of service. Please correct or explain.
<b>Related Tables:</b> Table 9D
<b>Siyue Deng (Health Center) on 01/26/2023 12:26 PM EST:</b> Lines 1, 2a and 2b, column b includes patient fee payments, capitation and a portion of 340B pharmacy revenue
<b>Edit 04121: Charge to Cost Ratio Questioned</b> - Total charge to cost ratio of (0.55) is reported, which suggests that charges are less than costs. Please review the information reported across the tables and correct or explain.
<b>Related Tables:</b> Table 9D, Table 8A

**Siyue Deng (Health Center) on 02/10/2023 3:55 PM EST:** Table 9D includes revenue from medical and dental patient services. Our scope of service is more than medical and dental patient services. Enabling and other grant funded services total more than \$13.7 million (per table 8A, Line 13, Col c). The agency received approx. \$8.4 million in DHHS Federal (table 9E, Line1b, Col a), another \$28.5 million in other Federal, State, County and Private grants (table 9E, Line 9, Col a), and \$5.6 million in Covid-19 supplemental funds (table 9E, Line1q, Col a), and we received \$10 million fogginess loan due to pandemic. These other grants help support patient care activity including the costs in Table 8A, Col c, Lines 1-10. Significant revenue comes from grants which are not include in the charges to cost ratio. Considering the above information, cost to charge comparison is erroneous. We will looking our charge schedule to bring it close to cost.

**Edit 03995: Accounts Receivable not equal to zero** - Line 5a, Medicare Managed Care (capitated) - Collections - Adjustments does not equal zero (-516860). Adjustments for capitated plans are the difference between charges and payments unless payments are not received in the month of service. Please correct or explain.

**Related Tables:** Table 9D

**Siyue Deng (Health Center) on 01/26/2023 12:28 PM EST:** Line 5, column b includes patient fee payment and capitation

**Edit 02016: Large change in accounts receivable for Total Medicare is reported** - Total Medicare, Line 6: When we compared the sum of collections (Column b) and adjustments (Column d) to total Medicare charges (Column a) there is a large difference (-75.08)%. While we do not expect it to be zero, a difference this large is unusual. Please explain or correct.

**Related Tables:** Table 9D

**Siyue Deng (Health Center) on 01/26/2023 12:30 PM EST:** The total collection include patient fee payment and capitation

**Edit 03997: Accounts Receivable not equal to zero** - Line 11a, Capitated Private Charges - Collections - Adjustments does not equal zero (-128496). Adjustments for capitated plans are the difference between charges and payments unless payments are not received in the month of service. Please correct or explain.

**Related Tables:** Table 9D

**Siyue Deng (Health Center) on 01/26/2023 12:37 PM EST:** Line 11a, column b includes patient fee payments and capitation

**Edit 05100: PMPM collections in question** - Private Capitation PMPM (17.10) is outside the typical range. Check to see that the revenue and member months are entered correctly or explain.

**Related Tables:** Table 9D, Table 4(UR)

**Siyue Deng (Health Center) on 02/10/2023 3:58 PM EST:** The amount in Table 9D, Table 4, Column b, line 11a includes more than just Capitation. The capitation included in this cell represents \$12.83 PMPM and appears reasonable.

## Table 9E-Other Revenues

**Edit 03466: Inter-Year variation in grant funds** - Current year Community Health Center(Section 330(e)) funds vary substantially from the prior year on Table 9E Line 1b. This may occur if BPHC has substantially changed the grant amount or may be due to the timing of draw downs. Please correct or explain. Current Year - On Table 9E Line 1b Column a (8414435). Prior Year - On Table 9E Line 1b Column a (9557029).

**Related Tables:** Table 9E

**Siyue Deng (Health Center) on 02/02/2023 2:19 PM EST:** We lost 4 grants from HRSA Quality improvement about \$650k. Federal DHHS fund is short \$330k than prior year.

**Edit 06343: Change in Revenues** - You report a large change on Line 3/Other Federal Grants revenues when compared to the prior year. Please correct or explain.

**Related Tables:** Table 9E

<b>Siyue Deng (Health Center) on 02/02/2023 2:20 PM EST:</b> We had Federal Stimulus Covid-19 Fund from prior year. We did not receive stimulus fund in CY2022.
<b>Edit 06344: Change in Revenues</b> - You report a large change on Line 6/State Government Grants and Contracts revenues when compared to the prior year. Please correct or explain.
<b>Related Tables:</b> Table 9E
<b>Siyue Deng (Health Center) on 02/02/2023 2:24 PM EST:</b> CY2022 we receive a grant for school based health center around \$1M.
<b>Edit 06346: Change in Revenues</b> - You report a large change on Line 8/Foundation/Private Grants and Contracts revenues when compared to the prior year. Please correct or explain.
<b>Related Tables:</b> Table 9E
<b>Siyue Deng (Health Center) on 02/02/2023 2:29 PM EST:</b> We received \$4M for new Vallejo Expansion Project in prior year. The expansion was done and did not receive any fund in CY2022.
<b>Edit 06348: Change in Revenues</b> - You report a large change on Line 10/Other Revenue (Non-patient related revenue not reported elsewhere) revenues when compared to the prior year. Please correct or explain.
<b>Related Tables:</b> Table 9E
<b>Siyue Deng (Health Center) on 02/02/2023 2:25 PM EST:</b> We received \$10M PPP loan forgiveness in CY2022.

BHCMIS ID: 091230 - La Clinica De La Raza Inc., Oakland, CA

Date Requested: 03/20/2023 10:48 AM EST

Program Name: Health Center 330

Date of Last Report Refreshed: 03/20/2023 10:48 AM EST

Submission Status: Review In Progress

UDS Report - 2022

Comments

<b>Report Comments</b>
Nothing to report
<b>Table 4 Comments</b>
edit #6093: We feel these patients are deemed immediately accessible to public housing.
<b>Table 5 Comments</b>
Edit 38,124 and 33: For pediatrician productivity increase, we have decreased supply of pediatricians coupled with an increase in demand following relaxation of the more stringent COVID restrictions resulting in an increased productivity. For the CNM productivity increase, we have decreased supply, now 1.13 FTE, with a growth in demand of CNM services due to a slight increase in deliveries and a simultaneous decrease in OB-Gyn FTE. Regarding the internist productivity decrease, we have decreased supply of internists who see the most complex patients. Relatively fewer complex patients have been empaneled with fuller-scope providers leaving the relatively few internists remaining (FTE 2.08) with the most complicated patients. Additionally, full-scope providers consult with internists on their most complex patients.
<b>Table 6A Comments</b>

1. Edit 5787 – please explain why your patients are more likely to be at higher risk of cardiovascular disease compared to other health center patients across the country. Latinx patients have higher rates of cardiovascular disease risk factors than the general population: <https://www.sciencedirect.com/journal/progress-in-cardiovascular-diseases/vol/57/issue/3>

Table 6B Comments

The % of agency patients seen for medical services, 72.72%, is an aggregate %. The% of agency patients in the denominators for breast, cervical and colorectal cancer screenings are 74, 77, and 81 % which is higher than the aggregate number of patients served in the age range, and it is relatively close to denominators that we have reported previously using different methodologies as a cross-check. Our sense is that we are more likely to deliver services to patients who qualify for cancer screenings due to their age, likely medical co-morbidities and outreach. We typically perform outreach on 18-month panels, pulling patients back into care. Pulling patients into care preferentially for outreach will pull the patients into the denominator since they will usually have a medical visit. It will pull the patient into the numerator if the patient has the designated service performed. We suspect that populations for whom outreach is not performed routinely are less likely to have medical vis.

Table 9D Comments

All charges have been reported appropriately as per page 142 of manual.

Table 9E Comments

PPP is excluded