

Program Name: Health Center 330

Submission Status: Review In Progress, Version 2

UDS Report - 2022

Contact Information

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

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BHCMIS ID: 092880 - LIFELONG MEDICAL CARE, Berkeley, CA

Date Requested: 03/06/2023 9:34 AM EST

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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)
95687	1	11	0	3	15
95363	1	7	3	2	13
95207	0	9	0	3	12
94947	10	1	0	0	11
94903	10	4	3	2	19
94901	11	16	1	3	31
94820	2	10	2	1	15
94807	4	7	3	1	15
94806	1,758	5,679	298	413	8,148
94805	277	782	47	68	1,174
94804	1,158	4,466	250	274	6,148
94803	284	1,071	86	96	1,537
94802	4	20	4	3	31
94801	1,470	5,208	188	248	7,114
94720	2	19	0	7	28

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
94712	1	15	1	0	17
94710	202	772	116	65	1,155
94709	35	239	68	39	381
94708	23	122	43	26	214
94707	22	134	31	27	214
94706	108	581	60	52	801
94705	47	352	86	22	507
94704	104	647	85	84	920
94703	224	1,147	218	87	1,676
94702	235	944	253	85	1,517
94701	3	39	4	1	47
94662	1	18	7	1	27
94623	1	10	2	0	13
94621	112	1,060	170	53	1,395
94619	32	330	59	36	457
94618	18	150	33	9	210
94612	290	1,454	188	65	1,997
94611	61	334	85	33	513
94610	69	318	58	37	482
94609	101	945	125	62	1,233
94608	252	1,528	210	120	2,110
94607	137	1,153	127	66	1,483
94606	65	579	83	42	769
94605	124	1,401	270	121	1,916
94604	9	40	12	0	61
94603	125	1,134	166	82	1,507
94602	39	369	81	34	523
94601	96	853	123	40	1,112
94597	2	16	3	0	21
94596	7	28	4	0	39
94591	21	58	10	32	121
94590	22	68	6	14	110
94589	16	34	6	8	64
94588	2	8	0	1	11
94587	7	70	6	2	85
94585	3	7	2	6	18
94583	2	9	2	1	14
94582	2	18	3	2	25
94580	10	91	17	5	123
94579	5	66	7	5	83
94578	35	334	44	23	436
94577	30	353	62	35	480
94572	96	425	44	29	594
94568	5	35	6	0	46
94566	1	22	2	2	27

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
94565	36	247	21	22	326
94564	183	669	87	94	1,033
94563	2	23	6	1	32
94561	5	37	10	0	52
94560	3	26	7	1	37
94556	4	13	4	1	22
94555	0	13	1	1	15
94553	15	73	9	7	104
94552	0	16	1	0	17
94551	1	13	1	0	15
94550	0	11	1	1	13
94549	4	25	3	5	37
94547	122	468	72	70	732
94546	10	120	20	5	155
94545	6	40	9	0	55
94544	21	198	24	10	253
94542	2	23	9	2	36
94541	27	293	64	16	400
94539	2	9	1	2	14
94538	5	41	4	2	52
94536	4	41	2	0	47
94534	4	11	1	5	21
94533	6	29	6	12	53
94531	13	88	8	9	118
94530	158	679	76	72	985
94525	9	42	6	3	60
94523	3	23	6	1	33
94521	5	30	0	0	35
94520	21	90	5	2	118
94519	6	27	2	2	37
94518	5	20	1	3	29
94513	12	28	6	4	50
94510	3	6	1	3	13
94509	19	173	11	7	210
94502	2	27	3	5	37
94501	44	533	58	45	680
94124	3	14	2	0	19
94117	2	7	1	2	12
94112	4	9	3	1	17
94110	1	10	1	7	19
94109	2	11	1	3	17
94107	2	8	0	1	11
94103	1	10	5	4	20
94102	3	16	3	0	22

Other ZIP Codes

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
Other ZIP Codes	193	602	106	228	1,129
Unknown Residence	22	3	0	0	25
Total	8,789	40,515	4,541	3,237	57,082

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	541	531
2	Age 1	345	342
3	Age 2	373	315
4	Age 3	321	368
5	Age 4	399	393
6	Age 5	415	376
7	Age 6	406	377
8	Age 7	373	359
9	Age 8	381	345
10	Age 9	368	368
11	Age 10	373	361
12	Age 11	417	415
13	Age 12	491	490
14	Age 13	504	469
15	Age 14	494	489
16	Age 15	406	428
17	Age 16	389	396
18	Age 17	359	400
19	Age 18	296	399
20	Age 19	236	399
21	Age 20	252	401
22	Age 21	262	426
23	Age 22	210	417
24	Age 23	206	423

Line	Age Groups	Male Patients (a)	Female Patients (b)
25	Age 24	224	404
26	Ages 25-29	1,292	2,445
27	Ages 30-34	1,484	2,782
28	Ages 35-39	1,405	2,566
29	Ages 40-44	1,612	2,443
30	Ages 45-49	1,492	2,025
31	Ages 50-54	1,563	1,992
32	Ages 55-59	1,749	1,920
33	Ages 60-64	1,691	1,776
34	Ages 65-69	1,311	1,535
35	Ages 70-74	932	1,225
36	Ages 75-79	528	743
37	Ages 80-84	296	454
38	Age 85 and over	216	473
39	Total Patients (Sum of Lines 1-38)	24,612	32,470

Line	Age Groups	Male Patients (a)	Female Patients (b)
1	Under age 1	348	285
2	Age 1	197	174
3	Age 2	180	141
4	Age 3	153	157
5	Age 4	196	179
6	Age 5	186	166
7	Age 6	169	165
8	Age 7	147	127
9	Age 8	148	142
10	Age 9	137	141
11	Age 10	139	130
12	Age 11	151	135
13	Age 12	174	171
14	Age 13	163	159
15	Age 14	171	150
16	Age 15	157	182
17	Age 16	147	172
18	Age 17	138	166
19	Age 18	116	175
20	Age 19	106	197
21	Age 20	107	200
22	Age 21	139	234
23	Age 22	99	239
24	Age 23	100	256
25	Age 24	123	239
26	Ages 25-29	738	1,458
27	Ages 30-34	925	1,740
28	Ages 35-39	873	1,601
29	Ages 40-44	994	1,454
30	Ages 45-49	967	1,167
31	Ages 50-54	1,006	1,208
32	Ages 55-59	1,105	1,133
33	Ages 60-64	1,104	1,082
34	Ages 65-69	888	985
35	Ages 70-74	639	776
36	Ages 75-79	348	455
37	Ages 80-84	202	277
38	Age 85 and over	131	311
39	Total Patients (Sum of Lines 1-38)	13,811	18,129

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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	49	3,427		3,476
2a	Native Hawaiian	5	49		54
2b	Other Pacific Islander	36	228		264
2	Total Native Hawaiian/Other Pacific Islander (Sum Lines 2a + 2b)	41	277		318
3	Black/African American	361	14,108		14,469
4	American Indian/Alaska Native	64	176		240
5	White	5,968	7,407		13,375
6	More than one race	858	1,215		2,073
7	Unreported/Chose not to disclose race	14,751	3,658	4,722	23,131
8	Total Patients (Sum of Lines 1 + 2 + 3 to 7)	22,092	30,268	4,722	57,082

Line	Patients Best Served in a Language Other than English	Number (a)
12	Patients Best Served in a Language Other than English	19,749

Line	Patients by Sexual Orientation	Number (a)
13	Lesbian or Gay	503
14	Heterosexual (or straight)	28,465
15	Bisexual	511
16	Other	436
17	Don't know	1,747
18	Chose not to disclose	1,799
18a	Unknown	23,621
19	Total Patients (Sum of Lines 13 to 18a)	57,082

Line	Patients by Gender Identity	Number (a)
20	Male	12,940
21	Female	20,440
22	Transgender Man/Transgender Male/Transmasculine	73
23	Transgender Woman/Transgender Female/Transfeminine	72
24	Other	309
25	Chose not to disclose	402
25a	Unknown	22,846
26	Total Patients (Sum of Lines 20 to 25a)	57,082

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	31	2,062		2,093
2a	Native Hawaiian	4	27		31
2b	Other Pacific Islander	21	105		126
2	Total Native Hawaiian/Other Pacific Islander (Sum Lines 2a + 2b)	25	132		157
3	Black/African American	206	8,018		8,224
4	American Indian/Alaska Native	42	114		156
5	White	2,168	4,925		7,093
6	More than one race	469	805		1,274
7	Unreported/Chose not to disclose race	8,315	2,261	2,367	12,943
8	Total Patients (Sum of Lines 1 + 2 + 3 to 7)	11,256	18,317	2,367	31,940

Line	Patients Best Served in a Language Other than English	Number (a)
12	Patients Best Served in a Language Other than English	9,609

Line	Patients by Sexual Orientation	Number (a)
13	Lesbian or Gay	328
14	Heterosexual (or straight)	17,199
15	Bisexual	359
16	Other	313
17	Don't know	984
18	Chose not to disclose	1,426
18a	Unknown	11,331
19	Total Patients (Sum of Lines 13 to 18a)	31,940

Line	Patients by Gender Identity	Number (a)
20	Male	7,995
21	Female	12,374
22	Transgender Man/Transgender Male/Transmasculine	48
23	Transgender Woman/Transgender Female/Transfeminine	52
24	Other	219
25	Chose not to disclose	327
25a	Unknown	10,925
26	Total Patients (Sum of Lines 20 to 25a)	31,940

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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	43,574
2	101 - 150%	5,517
3	151 - 200%	3,270
4	Over 200%	1,684
5	Unknown	3,037
6	TOTAL (Sum of Lines 1-5)	57,082

Line	Primary Third-Party Medical Insurance	0-17 years old (a)	18 and older (b)
7	None/Uninsured	1,836	6,953
8a	Medicaid (Title XIX)	12,360	28,155
8b	CHIP Medicaid	0	0
8	Total Medicaid (Line 8a + 8b)	12,360	28,155
9a	Dually Eligible (Medicare and Medicaid)	0	3,405
9	Medicare (Inclusive of dually eligible and other Title XVIII beneficiaries)	0	4,541
10a	Other Public Insurance (Non-CHIP) (specify)	0	0
10b	Other Public Insurance CHIP	0	0
10	Total Public Insurance (Line 10a + 10b)	0	0
11	Private Insurance	381	2,856
12	TOTAL (Sum of Lines 7 + 8 + 9 +10 +11)	14,577	42,505

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	445,720	18,420	0	10,922	475,062
13b	Fee-for-service Member Months	171,245	0	0	0	171,245
13c	Total Member Months (Sum of Lines 13a + 13b)	616,965	18,420	0	10,922	646,307

Line	Special Populations	Number of Patients (a)
16	Total Agricultural Workers or Dependents (All health centers report this line)	2,359
23	Total Homeless (All health centers report this line)	2,324
24	Total School-Based Service Site Patients (All health centers report this line)	1,140
25	Total Veterans (All health centers report this line)	310
26	Total Patients Served at a Health Center Located In or Immediately Accessible to a Public Housing Site (All health centers report this line)	31,940

Income as Percent of Poverty Guideline

Line	Income as Percent of Poverty Guideline	Number of Patients (a)
1	100% and below	25,848
2	101 - 150%	2,311
3	151 - 200%	1,742
4	Over 200%	974
5	Unknown	1,065
6	TOTAL (Sum of Lines 1-5)	31,940

Line	Primary Third-Party Medical Insurance	0-17 years old (a)	18 and older (b)
7	None/Uninsured	127	2,663
8a	Medicaid (Title XIX)	5,779	18,482
8b	CHIP Medicaid	0	0
8	Total Medicaid (Line 8a + 8b)	5,779	18,482
9a	Dually Eligible (Medicare and Medicaid)	0	2,216
9	Medicare (Inclusive of dually eligible and other Title XVIII beneficiaries)	0	3,049
10a	Other Public Insurance (Non-CHIP) (specify)	0	0
10b	Other Public Insurance CHIP	0	0
10	Total Public Insurance (Line 10a + 10b)	0	0
11	Private Insurance	137	1,703
12	TOTAL (Sum of Lines 7 + 8 + 9 +10 +11)	6,043	25,897

Managed Care Utilization

Line	Special Populations	Number of Patients (a)
16	Total Agricultural Workers or Dependents (All health centers report this line)	197
23	Total Homeless (All health centers report this line)	2,183
24	Total School-Based Service Site Patients (All health centers report this line)	844
25	Total Veterans (All health centers report this line)	232
26	Total Patients Served at a Health Center Located In or Immediately Accessible to a Public Housing Site (All health centers report this line)	31,940

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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	21.7	34,017	15,651	
2	General Practitioners	0	0	0	
3	Internists	12.42	22,801	7,862	
4	Obstetrician/Gynecologists	0.47	390	430	
5	Pediatricians	3.82	6,054	2,003	
7	Other Specialty Physicians	0	0	0	
8	Total Physicians (Lines 1-7)	38.41	63,262	25,946	
9a	Nurse Practitioners	36.14	35,685	20,872	
9b	Physician Assistants	9.13	15,708	6,802	
10	Certified Nurse Midwives	3.94	6,791	1,630	
10a	Total NPs, PAs, and CNMs (Lines 9a-10)	49.21	58,184	29,304	
11	Nurses	33.32	5,178	33	
12	Other Medical Personnel	137.45			
13	Laboratory Personnel	0			
14	X-ray Personnel	1.67			
15	Total Medical Care Services (Lines 8 + 10a through 14)	260.06	126,624	55,283	51,730

Dental Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
16	Dentists	8.96	28,007	4	
17	Dental Hygienists	0	0	0	
17a	Dental Therapists	0	0	0	
18	Other Dental Personnel	20.29			
19	Total Dental Services (Lines 16-18)	29.25	28,007	4	11,468

Mental Health Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a	Psychiatrists	2.69	588	2,688	
20a1	Licensed Clinical Psychologists	0.76	142	705	
20a2	Licensed Clinical Social Workers	25.88	2,183	18,058	
20b	Other Licensed Mental Health Providers	6.15	751	5,086	
20c	Other Mental Health Personnel	13.98	2,822	6,082	
20	Total Mental Health Services (Lines 20a-c)	49.46	6,486	32,619	6,262

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	18.48	6,680	1,750	527

Other Professional Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
22	Other Professional Services Specify Acupuncturists, Chiropractors, Podiatrists & Registered Dieticians	8.87	13,094	2,350	4,156

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	0.2	514	0	
22c	Other Vision Care Personnel	0			

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
22d	Total Vision Services (Lines 22a-c)	0.2	514	0	405

Pharmacy Personnel

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
23	Pharmacy Personnel	11.86			

Enabling Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
24	Case Managers	63	29,922	18,100	
25	Patient and Community Education Specialists	9.81	1,728	3,595	
26	Outreach Workers	4.78			
27	Transportation Personnel	0			
27a	Eligibility Assistance Workers	27.79			
27b	Interpretation Personnel	0			
27c	Community Health Workers	31			
28	Other Enabling Services Specify SiteMonitor	4.12			
29	Total Enabling Services (Lines 24-28)	140.5	31,650	21,695	7,586

Other Programs/Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
29a	Other Programs and Services Specify School Health, Adult DayHealth activities and HomelessServices	10.73			
29b	Quality Improvement Personnel	8.67			

Administration and Facility

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
30a	Management and Support Personnel	138.35			
30b	Fiscal and Billing Personnel	34.55			
30c	IT Personnel	20.06			
31	Facility Personnel	7.13			
32	Patient Support Personnel	95.99			
33	Total Facility and Non-Clinical Support Personnel (Lines 30a-32)	296.08			

Grand Total

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
34	Grand Total (Lines 15+19+20+21+22+22d+23+29+29a+29b+33)	834.16	213,055	113,701	

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)	102	6,114	4,207	5,795
20a02	Nurse Practitioners	65	4,619	3,644	4,450
20a03	Physician Assistants	16	666	921	961
20a04	Certified Nurse Midwives	8	205	73	182

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)	88	2,802	1,704	2,148
21b	Nurse Practitioners (Medical)	58	1,797	1,199	1,533
21c	Physician Assistants	15	213	142	251
21d	Certified Nurse Midwives	6	65	7	48
21e	Psychiatrists	6	33	641	145
21f	Licensed Clinical Psychologists	2	10	4	6
21g	Licensed Clinical Social Workers	29	119	993	181
21h	Other Licensed Mental Health Providers	13	236	661	283

Medical Care Services

Line	Personnel by Major Service Category	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1	Family Physicians	22,847	10,792	
2	General Practitioners	0	0	
3	Internists	12,055	6,874	
4	Obstetrician/Gynecologists	288	350	
5	Pediatricians	3,350	1,053	
7	Other Specialty Physicians	0	0	
8	Total Physicians (Lines 1-7)	38,540	19,069	
9a	Nurse Practitioners	19,375	13,875	
9b	Physician Assistants	3,702	3,683	
10	Certified Nurse Midwives	4,759	1,255	
10a	Total NPs, PAs, and CNMs (Lines 9a-10)	27,836	18,813	
11	Nurses	1,938	25	
15	Total Medical Care Services (Lines 8 + 10a through 14)	68,314	37,907	30,488

Dental Services

Line	Personnel by Major Service Category	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
16	Dentists	11,671	1	
17	Dental Hygienists	0	0	
17a	Dental Therapists	0	0	
19	Total Dental Services (Lines 16-18)	11,671	1	5,140

Mental Health Services

Line	Personnel by Major Service Category	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a	Psychiatrists	453	1,463	
20a1	Licensed Clinical Psychologists	142	705	
20a2	Licensed Clinical Social Workers	1,035	12,199	
20b	Other Licensed Mental Health Providers	628	4,794	
20c	Other Mental Health Personnel	850	4,463	
20	Total Mental Health Services (Lines 20a-c)	3,108	23,624	4,426

Substance Use Disorder Services

Line	Personnel by Major Service Category	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
21	Substance Use Disorder Services	688	311	155

Other Professional Services

Line	Personnel by Major Service Category	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
22	Other Professional Services Specify Acupuncturists,Chiropractors,Podiatrists &Registered Dieticians	8,145	1,527	2,651

Vision Services

Line	Personnel by Major Service Category	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
22a	Ophthalmologists	0	0	
22b	Optometrists	514	0	
22d	Total Vision Services (Lines 22a-c)	514	0	405

Enabling Services

Line	Personnel by Major Service Category	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
24	Case Managers	20,538	14,170	
25	Patient and Community Education Specialists	358	2,156	
29	Total Enabling Services (Lines 24-28)	20,896	16,326	4,960

Grand Total

Line	Personnel by Major Service Category	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
34	Grand Total (Lines 15+19+20+21+22+22d+23+29+29a+29b+33)	113,336	79,696	

BHCMIS ID: 092880 - LIFELONG MEDICAL CARE, Berkeley, CA

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UDS Report - 2022

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	1,408	397
3	Tuberculosis	A15- through A19-, O98.0-	14	13
4	Sexually transmitted infections	A50- through A64-	1,322	843
4a	Hepatitis B	B16.0 through B16.2, B16.9, B17.0, B18.0, B18.1, B19.1-, O98.4-	179	92
4b	Hepatitis C	B17.1-, B18.2, B19.2-	845	343
4c	Novel coronavirus (SARS-CoV-2) disease	U07.1	3,238	2,627
4d	Post COVID-19 condition	U09.9	126	82

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-	5,393	3,109
6	Chronic lower respiratory diseases	J40 (count J40 only when code U07.1 is not present), J41- through J44-, J47-	2,801	1,250
6a	Acute respiratory illness due to novel coronavirus (SARS-CoV-2) disease	J12.82, J12.89, J20.8, J40, J22, J98.8, J80 (count codes listed only when code U07.1 is also present)	362	314

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-	1,232	787
8	Abnormal cervical findings	C53-, C79.82, D06-, R87.61-, R87.629, R87.810, R87.820	1,529	820
9	Diabetes mellitus	E08- through E13-, O24-(exclude O24.41-)	22,117	5,822
10	Heart disease (selected)	I01-, I02- (exclude I02.9), I20- through I25-, I27-, I28-, I30- through I52-	4,790	2,083
11	Hypertension	I10- through I16-, O10-, O11-	29,511	10,092
12	Contact dermatitis and other eczema	L23- through L25-, L30- (exclude L30.1, L30.3, L30.4, L30.5), L58-	1,905	1,482
13	Dehydration	E86-	31	29
14	Exposure to heat or cold	T33-, T34-, T67-, T68-, T69-, W92-, W93-, X30-, X31-, X32-	17	16
14a	Overweight and obesity	E66-, Z68- (exclude Z68.1, Z68.20 through Z68.24, Z68.51, Z68.52)	16,372	7,877

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-	864	708
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	365	239
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	3,866	2,562

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-	3,972	1,113
19	Other substance-related disorders (excluding tobacco use disorders)	F11- through F19- (exclude F17-), G62.0, O99.32-	6,362	1,900
19a	Tobacco use disorder	F17-, O99.33-, Z72.0	2,830	1,592
20a	Depression and other mood disorders	F30- through F39-	29,437	5,936
20b	Anxiety disorders, including post-traumatic stress disorder (PTSD)	F06.4, F40- through F42-, F43.0, F43.1-, F93.0	28,867	5,936
20c	Attention deficit and disruptive behavior disorders	F90- through F91-	1,641	506
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	18,004	5,498
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	69	43

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	CPT-4: 86689, 86701 through 86703, 87389 through 87391, 87534 through 87539, 87806	8,226	7,439
21a	Hepatitis B test	CPT-4: 80074, 86704 through 86707, 87340, 87341, 87350, 87912	1,990	1,936
21b	Hepatitis C test	CPT-4: 80074, 86803, 86804, 87520 through 87522, 87902	6,075	5,910
21c	Novel coronavirus (SARS-CoV-2) diagnostic test	CPT-4: 87426, 87428, 87635, 87636, 87637 HCPCS: U0001, U0002, U0003, U0004 CPT PLA: 0202U, 0223U, 0225U, 0240U, 0241U	5,786	4,857
21d	Novel coronavirus (SARS-CoV-2) antibody test	CPT-4: 86318, 86328, 86408, 86409, 86413, 86769 CPT PLA: 0224U, 0226U	10	10
21e	Pre-Exposure Prophylaxis (PrEP)-associated management of all patients on PrEP	Possible codes to explore for PrEP management: CPT-4: 99401 through 99404 ICD-10: Z11.3, Z11.4, Z20.2, Z20.6, Z51.81, Z71.51, Z71.7, Z79.899 Limited to prescribed PrEP based on a patient's risk for HIV exposure AND limited to emtricitabine/tenofovir disoproxil fumarate (FTC/TDF), emtricitabine/tenofovir alafenamide (FTC/TAF), or cabotegravir for PrEP	207	107
22	Mammogram	CPT-4: 77063, 77065, 77066, 77067 ICD-10: Z12.31 HCPCS: G0279	1,848	1,732
23	Pap test	CPT-4: 88141 through 88153, 88155, 88164 through 88167, 88174, 88175 ICD-10: Z01.41-, Z01.42, Z12.4 (exclude Z01.411 and Z01.419) HCPCS: G0144, G0145, G0147, G0148	3,608	3,503
24	Selected immunizations: hepatitis A; haemophilus influenzae B (HiB); pneumococcal, diphtheria, tetanus, pertussis (DTaP) (DTP) (DT); measles, mumps, rubella (MMR); poliovirus; varicella; hepatitis B	CPT-4: 90632, 90633, 90634, 90636, 90643, 90644, 90645, 90646, 90647, 90648, 90669, 90670, 90696, 90697, 90698, 90700, 90701, 90702, 90703, 90704, 90705, 90706, 90707, 90708, 90710, 90712, 90713, 90714, 90715, 90716, 90718, 90720, 90721, 90723, 90730, 90731, 90732, 90740, 90743, 90744, 90745, 90746, 90747, 90748	9,355	7,468
24a	Seasonal flu vaccine	CPT-4: 90630, 90653 through 90657, 90658, 90661, 90662, 90672, 90673, 90674, 90682, 90685 through 90689, 90756	8,559	7,940
24b	Coronavirus (SARS-CoV-2) vaccine	CPT-I: 0001A-0004A, 0011A- 0014A, 0021A-0024A, 0031A-0034A, 0041A-0044A, 0051A-0054A, 0064A, 0071A, 0072A, 91300-91307, 91308-91310	1,834	1,756
25	Contraceptive management	ICD-10: Z30-	4,818	3,052
26	Health supervision of infant or child (ages 0 through 11)	CPT-4: 99381 through 99383, 99391 through 99393 ICD-10: Z00.1-, Z76.1, Z76.2	9,446	6,065
26a	Childhood lead test screening (9 to 72 months)	ICD-10: Z13.88 CPT-4: 83655	416	391
26b	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408, 99409 HCPCS: G0396, G0397, G0443, H0050	11,827	10,002
26c	Smoke and tobacco use cessation counseling	CPT-4: 99406, 99407 HCPCS: S9075 CPT-II: 4000F, 4001F, 4004F	369	235
26d	Comprehensive and intermediate eye exams	CPT-4: 92002, 92004, 92012, 92014	57	57

Selected Dental Services

Line	Service Category	Applicable ADA Code	Number of Visits (a)	Number of Patients (b)
27	Emergency services	CDT: D0140, D9110	3,520	2,228
28	Oral exams	CDT: D0120, D0145, D0150, D0160, D0170, D0171, D0180	10,769	9,041
29	Prophylaxis-adult or child	CDT: D1110, D1120	8,278	6,477
30	Sealants	CDT: D1351	1,232	1,042
31	Fluoride treatment-adult or child	CDT: D1206, D1208 CPT-4: 99188	6,614	4,991
32	Restorative services	CDT: D21xx through D29xx	6,115	3,712
33	Oral surgery (extractions and other surgical procedures)	CDT: D7xxx	1,208	985
34	Rehabilitative services (Endo, Perio, Prostho, Ortho)	CDT: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	4,231	2,251

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.

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	931	261
3	Tuberculosis	A15- through A19-, O98.0-	7	6
4	Sexually transmitted infections	A50- through A64-	861	516
4a	Hepatitis B	B16.0 through B16.2, B16.9, B17.0, B18.0, B18.1, B19.1-, O98.4-	142	70
4b	Hepatitis C	B17.1-, B18.2, B19.2-	665	258
4c	Novel coronavirus (SARS-CoV-2) disease	U07.1	1,720	1,427
4d	Post COVID-19 condition	U09.9	104	63

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-	3,365	1,923
6	Chronic lower respiratory diseases	J40 (count J40 only when code U07.1 is not present), J41- through J44-, J47-	1,732	797
6a	Acute respiratory illness due to novel coronavirus (SARS-CoV-2) disease	J12.82, J12.89, J20.8, J40, J22, J98.8, J80 (count codes listed only when code U07.1 is also present)	246	211

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-	811	511
8	Abnormal cervical findings	C53-, C79.82, D06-, R87.61-, R87.629, R87.810, R87.820	1,152	604
9	Diabetes mellitus	E08- through E13-, O24-(exclude O24.41-)	13,075	3,586
10	Heart disease (selected)	I01-, I02- (exclude I02.9), I20- through I25-, I27-, I28-, I30- through I52-	3,149	1,431
11	Hypertension	I10- through I16-, O10-, O11-	18,986	6,740
12	Contact dermatitis and other eczema	L23- through L25-, L30- (exclude L30.1, L30.3, L30.4, L30.5), L58-	1,064	815
13	Dehydration	E86-	17	17
14	Exposure to heat or cold	T33-, T34-, T67-, T68-, T69-, W92-, W93-, X30-, X31-, X32-	12	12
14a	Overweight and obesity	E66-, Z68- (exclude Z68.1, Z68.20 through Z68.24, Z68.51, Z68.52)	8,566	4,043

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-	465	365
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	208	141
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	3,009	2,051

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-	2,753	887
19	Other substance-related disorders (excluding tobacco use disorders)	F11- through F19- (exclude F17-), G62.0, O99.32-	4,937	1,580
19a	Tobacco use disorder	F17-, O99.33-, Z72.0	2,103	1,177
20a	Depression and other mood disorders	F30- through F39-	20,210	4,395
20b	Anxiety disorders, including post-traumatic stress disorder (PTSD)	F06.4, F40- through F42-, F43.0, F43.1-, F93.0	19,734	4,363
20c	Attention deficit and disruptive behavior disorders	F90- through F91-	1,178	384
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	10,893	3,622
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	55	34

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	CPT-4: 86689, 86701 through 86703, 87389 through 87391, 87534 through 87539, 87806	5,398	4,953
21a	Hepatitis B test	CPT-4: 80074, 86704 through 86707, 87340, 87341, 87350, 87912	1,340	1,299
21b	Hepatitis C test	CPT-4: 80074, 86803, 86804, 87520 through 87522, 87902	4,205	4,081
21c	Novel coronavirus (SARS-CoV-2) diagnostic test	CPT-4: 87426, 87428, 87635, 87636, 87637 HCPCS: U0001, U0002, U0003, U0004 CPT PLA: 0202U, 0223U, 0225U, 0240U, 0241U	2,948	2,412
21d	Novel coronavirus (SARS-CoV-2) antibody test	CPT-4: 86318, 86328, 86408, 86409, 86413, 86769 CPT PLA: 0224U, 0226U	9	9
21e	Pre-Exposure Prophylaxis (PrEP)-associated management of all patients on PrEP	Possible codes to explore for PrEP management: CPT-4: 99401 through 99404 ICD-10: Z11.3, Z11.4, Z20.2, Z20.6, Z51.81, Z71.51, Z71.7, Z79.899 Limited to prescribed PrEP based on a patient's risk for HIV exposure AND limited to emtricitabine/tenofovir disoproxil fumarate (FTC/TDF), emtricitabine/tenofovir alafenamide (FTC/TAF), or cabotegravir for PrEP	136	62
22	Mammogram	CPT-4: 77063, 77065, 77066, 77067 ICD-10: Z12.31 HCPCS: G0279	1,365	1,275
23	Pap test	CPT-4: 88141 through 88153, 88155, 88164 through 88167, 88174, 88175 ICD-10: Z01.41-, Z01.42, Z12.4 (exclude Z01.411 and Z01.419) HCPCS: G0144, G0145, G0147, G0148	2,461	2,386
24	Selected immunizations: hepatitis A; haemophilus influenzae B (HiB); pneumococcal, diphtheria, tetanus, pertussis (DTaP) (DTP) (DT); measles, mumps, rubella (MMR); poliovirus; varicella; hepatitis B	CPT-4: 90632, 90633, 90634, 90636, 90643, 90644, 90645, 90646, 90647, 90648, 90669, 90670, 90696, 90697, 90698, 90700, 90701, 90702, 90703, 90704, 90705, 90706, 90707, 90708, 90710, 90712, 90713, 90714, 90715, 90716, 90718, 90720, 90721, 90723, 90730, 90731, 90732, 90740, 90743, 90744, 90745, 90746, 90747, 90748	5,707	4,581
24a	Seasonal flu vaccine	CPT-4: 90630, 90653 through 90657, 90658, 90661, 90662, 90672, 90673, 90674, 90682, 90685 through 90689, 90756	5,316	4,929
24b	Coronavirus (SARS-CoV-2) vaccine	CPT-I: 0001A-0004A, 0011A- 0014A, 0021A-0024A, 0031A-0034A, 0041A-0044A, 0051A-0054A, 0064A, 0071A, 0072A, 91300-91307, 91308-91310	1,666	1,591
25	Contraceptive management	ICD-10: Z30-	2,655	1,728
26	Health supervision of infant or child (ages 0 through 11)	CPT-4: 99381 through 99383, 99391 through 99393 ICD-10: Z00.1-, Z76.1, Z76.2	5,324	3,234
26a	Childhood lead test screening (9 to 72 months)	ICD-10: Z13.88 CPT-4: 83655	258	242
26b	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408, 99409 HCPCS: G0396, G0397, G0443, H0050	9,058	7,697
26c	Smoke and tobacco use cessation counseling	CPT-4: 99406, 99407 HCPCS: S9075 CPT-II: 4000F, 4001F, 4004F	36	25
26d	Comprehensive and intermediate eye exams	CPT-4: 92002, 92004, 92012, 92014	57	57

Selected Dental Services

Line	Service Category	Applicable ADA Code	Number of Visits (a)	Number of Patients (b)
27	Emergency services	CDT: D0140, D9110	1,418	939
28	Oral exams	CDT: D0120, D0145, D0150, D0160, D0170, D0171, D0180	4,626	4,043
29	Prophylaxis-adult or child	CDT: D1110, D1120	3,189	2,594
30	Sealants	CDT: D1351	365	328
31	Fluoride treatment-adult or child	CDT: D1206, D1208 CPT-4: 99188	2,525	1,982
32	Restorative services	CDT: D21xx through D29xx	2,339	1,441
33	Oral surgery (extractions and other surgical procedures)	CDT: D7xxx	570	471
34	Rehabilitative services (Endo, Perio, Prostho, Ortho)	CDT: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	1,548	931

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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Program Name: Health Center 330

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UDS Report - 2022

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	1
2	Ages 15—19	70
3	Ages 20—24	261
4	Ages 25—44	1,061
5	Ages 45 and over	15
6	Total Patients (Sum of Lines 1-5)	1,408

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	941	7
8	Second Trimester	261	5
9	Third Trimester	193	1

Section C - Childhood Immunization Status

Line	Childhood Immunization Status	Total Patients with 2 nd 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 nd birthday	651	651	220

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	16,225	16,225	6,980

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	6,921	6,921	4,959

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	9,427	9,427	2,226

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	32,983	32,983	2,326

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, and (2) if identified to be a tobacco user received cessation counseling intervention	29,248	29,248	20,363

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	6,913	6,913	3,197

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	955	955	785

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	14,335	14,335	4,205

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	18	18	11

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	34,546	34,546	21,340

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	33,125	33,125	13,652

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	2,608	2,608	400

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	248	248	83

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

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

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	0	0	0	0
1b1	Native Hawaiian	0	0	0	0
1b2	Other Pacific Islander	0	0	0	0
1c	Black/African American	6	0	1	5
1d	American Indian/Alaska Native	2	0	0	1
1e	White	155	1	9	129
1f	More than One Race	21	0	2	18
1g	Unreported/Chose Not to Disclose Race	166	0	14	146
	Subtotal Hispanic or Latino/a	350	1	26	299

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	36	0	1	34
2b1	Native Hawaiian	0	0	0	0
2b2	Other Pacific Islander	3	0	0	3
2c	Black/African American	123	2	19	100
2d	American Indian/Alaska Native	1	0	0	1
2e	White	40	0	2	36
2f	More than One Race	14	0	1	13
2g	Unreported/Chose Not to Disclose Race	31	0	3	27
	Subtotal Non-Hispanic or Latino/a	248	2	26	214

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	26	0	2	21
i	Total	624	3	54	534

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	6	6	2
1b1	Native Hawaiian	3	3	1
1b2	Other Pacific Islander	6	6	3
1c	Black/African American	58	58	30
1d	American Indian/Alaska Native	7	7	2
1e	White	725	725	381
1f	More than One Race	105	105	55
1g	Unreported/Chose Not to Disclose Race	1,476	1,476	721
	Subtotal Hispanic or Latino/a	2,386	2,386	1,195

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	578	578	296
2b1	Native Hawaiian	14	14	6
2b2	Other Pacific Islander	54	54	27
2c	Black/African American	4,044	4,044	1,878
2d	American Indian/Alaska Native	31	31	20
2e	White	1,285	1,285	672
2f	More than One Race	210	210	102
2g	Unreported/Chose Not to Disclose Race	851	851	389
	Subtotal Non-Hispanic or Latino/a	7,067	7,067	3,390

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	345	345	175
i	Total	9,798	9,798	4,760

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	4	4	1
1b1	Native Hawaiian	1	1	0
1b2	Other Pacific Islander	2	2	1
1c	Black/African American	28	28	10
1d	American Indian/Alaska Native	8	8	3
1e	White	634	634	224
1f	More than One Race	76	76	30
1g	Unreported/Chose Not to Disclose Race	1,184	1,184	494
	Subtotal Hispanic or Latino/a	1,937	1,937	763

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	312	312	90
2b1	Native Hawaiian	11	11	5
2b2	Other Pacific Islander	34	34	15
2c	Black/African American	1,626	1,626	564
2d	American Indian/Alaska Native	22	22	2
2e	White	455	455	152
2f	More than One Race	103	103	37
2g	Unreported/Chose Not to Disclose Race	437	437	152
	Subtotal Non-Hispanic or Latino/a	3,000	3,000	1,017

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	146	146	47
i	Total	5,083	5,083	1,827

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	\$36,263,182	\$29,866,100	\$66,129,282
2	Lab and X-ray	\$1,066,827	\$794,264	\$1,861,091
3	Medical/Other Direct	\$196,190	\$141,803	\$337,993
4	Total Medical Care Services (Sum of Lines 1 through 3)	\$37,526,199	\$30,802,167	\$68,328,366

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	\$4,046,950	\$3,330,048	\$7,376,998
6	Mental Health	\$6,443,347	\$5,340,314	\$11,783,661
7	Substance Use Disorder	\$1,396,530	\$1,251,009	\$2,647,539
8a	Pharmacy (not including pharmaceuticals)	\$1,724,171	\$1,410,435	\$3,134,606
8b	Pharmaceuticals	\$3,693,896		\$3,693,896
9	Other Professional specify Podiatrist, Acupuncturists, Chiropractor, Registered Dietician	\$1,527,342	\$1,226,703	\$2,754,045
9a	Vision	\$64,440	\$46,576	\$111,016
10	Total Other Clinical Services (Sum of Lines 5 through 9a)	\$18,896,676	\$12,605,085	\$31,501,761

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	\$4,691,668		\$4,691,668
11b	Transportation	\$0		\$0
11c	Outreach	\$406,993		\$406,993
11d	Patient and Community Education	\$593,361		\$593,361
11e	Eligibility Assistance	\$1,739,217		\$1,739,217
11f	Interpretation Services	\$14,686		\$14,686
11g	Other Enabling Services specify Site monitor	\$318,783		\$318,783
11h	Community Health Workers	\$2,068,988		\$2,068,988
11	Total Enabling Services (Sum of Lines 11a through 11h)	\$9,833,696	\$8,994,815	\$18,828,511
12	Other Program-Related Services specify School health, adult day health activities and homeless services	\$626,829	\$601,672	\$1,228,501
12a	Quality Improvement	\$911,763	\$779,003	\$1,690,766
13	Total Enabling and Other Services (Sum of Lines 11, 12, and 12a)	\$11,372,288	\$10,375,490	\$21,747,778

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	\$11,387,242		
15	Non-Clinical Support Services	\$42,395,500		
16	Total Facility and Non-Clinical Support Services (Sum of Lines 14 and 15)	\$53,782,742		
17	Total Accrued Costs (Sum of Lines 4 + 10 + 13 + 16)	\$121,577,905		\$121,577,905
18	Value of Donated Facilities, Services, and Supplies specify			\$0
19	Total with Donations (Sum of Lines 17 and 18)			\$121,577,905

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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	\$13,475,893	\$11,221,191	\$0	\$0	\$0	\$0	\$2,940,862		
2a	Medicaid Managed Care (capitated)	\$16,263,714	\$23,374,318	\$15,795,619	\$1,210,532	\$3,049,688	\$3,302,118	\$1,523,426		
2b	Medicaid Managed Care (fee-for-service)	\$17,096,671	\$24,973,517	\$20,938,379	\$0	\$0	\$0	\$-7,375,246		
3	Total Medicaid (Sum of Lines 1 + 2a + 2b)	\$46,836,278	\$59,569,026	\$36,733,998	\$1,210,532	\$3,049,688	\$3,302,118	\$-2,910,958		
4	Medicare Non-Managed Care	\$10,942,322	\$8,195,191	\$0	\$0	\$195,817	\$0	\$2,521,942		
5a	Medicare Managed Care (capitated)	\$2,723,343	\$1,737,242	\$0	\$0	\$0	\$0	\$1,639,916		
5b	Medicare Managed Care (fee-for-service)	\$1,338,860	\$744,392	\$0	\$0	\$0	\$0	\$500,730		
6	Total Medicare (Sum of Lines 4 + 5a + 5b)	\$15,004,525	\$10,676,825	\$0	\$0	\$195,817	\$0	\$4,662,588		
7	Other Public, including Non-Medicaid CHIP, Non-Managed Care	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
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	\$10,783	\$5,880			\$0	\$0	\$73,324		
9	Total Other Public (Sum of Lines 7 + 8a + 8b + 8c)	\$10,783	\$5,880	\$0	\$0	\$0	\$0	\$73,324		
10	Private Non-Managed Care	\$3,391,934	\$1,704,098			\$0	\$0	\$1,820,063		
11a	Private Managed Care (capitated)	\$26,534	\$162,236			\$0	\$0	\$14,259		
11b	Private Managed Care (fee-for-service)	\$661,981	\$255,095			\$0	\$0	\$408,206		
12	Total Private (Sum of Lines 10 + 11a + 11b)	\$4,080,449	\$2,121,429			\$0	\$0	\$2,242,528		
13	Self-Pay	\$5,064,903	\$723,993						\$4,357,793	\$168,359
14	TOTAL (Sum of Lines 3 + 6 + 9 + 12 + 13)	\$70,996,938	\$73,097,153	\$36,733,998	\$1,210,532	\$3,245,505	\$3,302,118	\$4,067,482	\$4,357,793	\$168,359

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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	\$3,962,740
1c	Health Care for the Homeless	\$0
1e	Public Housing Primary Care	\$4,706,274
1g	Total Health Center (Sum of Lines 1a through 1e)	\$8,669,014
1k	Capital Development Grants , including School-Based Service Site Capital Grants	\$0
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)	\$222,420
1o	American Rescue Plan (ARP) (H8F, L2C, C8E)	\$5,870,273
1p	Other COVID-19-Related Funding from BPHC specify	\$0
1q	Total COVID-19 Supplemental (Sum of Lines 1l through 1p)	\$6,092,693
1	Total BPHC Grants (Sum of Lines 1g + 1k + 1q)	\$14,761,707

Other Federal Grants

Line	Source	Amount (a)
2	Ryan White Part C HIV Early Intervention	\$0
3	Other Federal Grants specify THCGME, Ryan White, HUD, SAMHSA, AC COVID testing grants	\$8,983,721
3a	Medicare and Medicaid EHR Incentive Payments for Eligible Provider	\$0
3b	Provider Relief Fund specify	\$0
5	Total Other Federal Grants (Sum of Lines 2 through 3b)	\$8,983,721

Non-Federal Grants Or Contracts

Line	Source	Amount (a)
6	State Government Grants and Contracts specify	\$0
6a	State/Local Indigent Care Programs specify HealthPAC	\$1,674,000
7	Local Government Grants and Contracts specify county and city grants	\$13,553,046
8	Foundation/Private Grants and Contracts specify Grants and Contracts including Delta Dental Foundation, CHCN, Sutter Bay Hospital, Alameda Alliance for Health	\$6,588,870
9	Total Non-Federal Grants and Contracts (Sum of Lines 6 + 6a + 7 + 8)	\$21,815,916
10	Other Revenue (non-patient service revenue not reported elsewhere) specify Donations, other various revenue	\$1,580,617
11	Total Revenue (Sum of Lines 1 + 5 + 9 + 10)	\$47,141,961

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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.22.1.220713

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.") : 3451

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: 328

Housing insecurity: 2,715

Financial strain: 390

Lack of transportation/access to public transportation: 159

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

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

Comments

Screening, documenting and reporting on social risk factors (and services to address them) continue to be both a priority and challenge. While documentation of housing insecurity has improved since the prior year, social risk factors are clearly more prevalent (based on population data and reporting systems required by some funders) in the patient population than EHR data indicates.

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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,¹ 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?: 524

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):

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: 4,500

¹ 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).

BHCMIS ID: 092880 - LIFELONG MEDICAL CARE, Berkeley, CA

Date Requested: 03/06/2023 9:34 AM EST

Program Name: Health Center 330

Date of Last Report Refreshed: 03/06/2023 9:34 AM EST

Submission Status: Review In Progress

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 category⁴ within the calendar year.

	Medical	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
1.	Physicians	38	0
	a. Family Physicians		24
	b. General Practitioners		0
	c. Internists		19
	d. Obstetrician/Gynecologists		0
	e. Pediatricians		8
	f. Other Specialty Physicians		0
2.	Nurse Practitioners	4	28
3.	Physician Assistants	9	0
4.	Certified Nurse Midwives	5	0
5.	Registered Nurses	15	0
6.	Licensed Practical Nurses/Vocational Nurses	1	0
7.	Medical Assistants	21	0

	Dental	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
8.	Dentists	9	1
9.	Dental Hygienists	0	0
10.	Dental Therapists	0	0
10a.	Dental Assistants	12	0

	Mental Health and Substance Use Disorder	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
11.	Psychiatrists		0
12.	Clinical Psychologists	1	2
13.	Clinical Social Workers	28	12
14.	Professional Counselors	0	0
15.	Marriage and Family Therapists	13	0
16.	Psychiatric Nurse Specialists	0	0
17.	Mental Health Nurse Practitioners	4	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	18	0

	Other Professionals	Pre-Graduate/Certificate (a)	Post-Graduate Training (b)
22.	Chiropractors	0	0
23.	Dieticians/Nutritionists	0	0
24.	Pharmacists	4	0
25.	Other please describe Community Health Worker (interns)	2	0

3. Provide the number of health center personnel serving as preceptors at your health center.: 80

4. Provide the number of health center personnel (non-preceptors) supporting ongoing health center training programs.: 45

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):

² 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).

³ 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).

⁴ 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

UDS Report - 2022

Data Audit Report

Table 3B-Demographic Characteristics

Edit 03642: Unreported/Refused to report greater than 25% total - For Public Housing Table: Unreported/Refused patients on Total Line 7 Column (d) (12943) is greater than 25% of total patients on Table 3B (31940). Please correct or explain.

Related Tables: Table 3B(PHPC)

Deborah Workman (Health Center) on 02/13/2023 5:14 PM EST: The data is correct as reported. A review of health center data reveals that the majority of health center patients who identify as Hispanic/Latino do not select a race category.

Table 3B-Demographic Characteristics

Edit 07247: Unreported/Chose not to Disclose greater than 25% of Total Patients - Patients reported on the 'Unreported/Chose not to Disclose' Line 7 (23131) is greater than 25% of total patients (Line 8) (57082). Please correct or explain.

Related Tables: Table 3B(UR)

Deborah Workman (Health Center) on 02/13/2023 5:14 PM EST: The data is correct as reported. A review of health center data reveals that the majority of health center patients who identify as Hispanic/Latino do not select a race category.

Table 5-Staffing and Utilization

Edit 04691: Inter-year Patients questioned - On Public Housing Primary Care - A large change from the prior year in patients who received Dental services is reported on Line 19, Column C. (CY = (5140), PY = (4059)). Please correct or explain.

Related Tables: Table 5(PHPC)

Deborah Workman (Health Center) on 02/13/2023 5:25 PM EST: The data is correct. More dental visits were provided at PHPC sites in 2022 as a result of outreach.

Edit 04687: Inter-year Patients questioned - On Public Housing Primary Care - A large change from the prior year in patients who received Substance Use Disorder services is reported on Line 21, Column C. (CY = (155), PY = (258)). Please correct or explain.

Related Tables: Table 5(PHPC)

Deborah Workman (Health Center) on 02/13/2023 5:30 PM EST: The data is correct, with a small decline at PHPC sites since the prior year.

Edit 05140: Inter-year Patients questioned - On Public Housing Primary Care - A large change from the prior year in patients who received Vision services is reported on Line 22d, Column C. (CY = (405), PY = (277)). Please correct or explain.

Related Tables: Table 5(PHPC)

Deborah Workman (Health Center) on 02/13/2023 5:34 PM EST: The data is correct. LifeLong provided more vision services at PHPC sites in 2022 compared to 2021.

Edit 06390: Enabling Visit per Patient in Question - On Public Housing Primary Care - Enabling visits per enabling patient varies substantially from national average. CY (7.50); PY National Average (3.13). Please correct or explain.

Related Tables: Table 5(PHPC)

Deborah Workman (Health Center) on 02/13/2023 5:35 PM EST: The data is correct. LifeLong provides a high rate of enabling visits per enabling patient, in alignment with our focus on providing care for populations with complex needs.

Table 5-Staffing And Utilization

Edit 07251: Virtual Visits greater than Clinic Visits - Mental Health virtual visits on Line 20 Column b2 (32619) are greater than or equal to Mental Health visits reported on Line 20 Column b (6486). Please correct or explain.

Related Tables: Table 5(UR)

Deborah Workman (Health Center) on 02/13/2023 5:16 PM EST: The data is correct as reported. The majority of mental health visits continue to be provided virtually.

Edit 00123: Ob/Gyn Productivity Questioned - A significant change in Productivity (visits/FTE) of Obstetrician/Gynecologists on Line 4 (1744.68) is reported from the prior year (1190.91). Please check to see that the FTE and visit numbers are entered correctly.

Related Tables: Table 5(UR)

Deborah Workman (Health Center) on 02/13/2023 5:21 PM EST: The data is correct, and reflects change in productivity for one OB/GYN provided.

Edit 04134: Substantial Inter-year variance in Providers - The number of Physician FTEs reported on Line 8 Column a differs from the prior year. Current Year - (38.41). Prior Year - (34.71). Confirm that this is consistent with staffing changes and that the FTE is calculated based on paid hours.

Related Tables: Table 5(UR)

Deborah Workman (Health Center) on 02/14/2023 7:43 PM EST: The reported FTE is correct and consistent with staffing changes.

Edit 00158: PA Productivity Questioned - A significant change in Productivity (visits/FTE) of PAs on Line 9b (2465.50) is reported from the prior year (2032.70). Please check to see that the FTE and visit numbers are entered correctly.

Related Tables: Table 5(UR)

Deborah Workman (Health Center) on 02/13/2023 5:22 PM EST: The data is correct as reported, with higher productivity among PAs compared to the prior year.

Edit 04135: Substantial Inter-year variance in Providers - The number of Mid-Level FTEs reported on Line 10a Column a differs from the prior year. Current Year - (49.21). Prior Year - (51.31). Confirm that this is consistent with staffing changes and that the FTE is calculated based on paid hours.

Related Tables: Table 5(UR)

Deborah Workman (Health Center) on 02/13/2023 5:24 PM EST: The data correctly reflects staffing changes and paid FTE of Mid-Levels.

Edit 06375: Substance Use Disorder Visit per Patient in Question - On Universal - Substance Use Disorder visits per Substance Use Disorder patient varies substantially from national average. CY (16.00); PY National Average (5.92). Please correct or explain.

Related Tables: Table 5(UR)

Deborah Workman (Health Center) on 02/13/2023 5:32 PM EST: The data is correct, LifeLong has a robust SUD/MAT program.

Edit 05138: Inter-year Patients questioned - On Universal - A large change from the prior year in patients who received Vision services is reported on Line 22d, Column C. (CY = (405), PY= (277)). Please correct or explain.

Related Tables: Table 5(UR)

Deborah Workman (Health Center) on 02/13/2023 5:33 PM EST: The data is correct, indicating that more vision services were provided in 2022.

Edit 06387: Enabling Visit per Patient in Question - On Universal - Enabling visits per enabling patient varies substantially from national average. CY (7.03); PY National Average (2.84). Please correct or explain.

Related Tables: Table 5(UR)

Deborah Workman (Health Center) on 02/13/2023 5:35 PM EST: The data is correct. LifeLong provides a high rate of enabling visits per enabling patient, in alignment with our focus on providing care for populations with complex needs.

Table 6B-Quality of Care Indicators

Edit 06814: Line 12 Compliance Rate Questioned - Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents Line 12: The proportion of patients in compliance 23.61% dropped significantly when compared to the prior year 62.39%. Please review and correct or explain.

Related Tables: Table 6B

Deborah Workman (Health Center) on 02/14/2023 7:46 PM EST: This significant drop reflects changes in documentation practices that are inconsistent with standard documentation requirements. Steps are underway to rectify this issue.

Edit 07640: Line 21a Column A in Question - The value entered as the denominator (Column A) for the Depression Remission measure on Line 21a (2608) appears high compared to national prevalence rates for estimated medical patients in the age range for this measure. Your health center reports that (90.62)% of total patients receive medical services (as reported on Table 5) and you serve (47820) 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)

Deborah Workman (Health Center) on 02/14/2023 4:53 PM EST: The data is correct, reflecting health center focus on high risk populations, and targeted depression screening for high risk patients.

Table 7-Health Outcomes and Disparities

Edit 03877: Low Birthweights Questioned - The Asian LBW and VLBW percentage of births reported appears low. Please correct or explain. CY (2.86)%; PY National Average (8.26)%

Related Tables: Table 7

Deborah Workman (Health Center) on 02/13/2023 5:45 PM EST: The data is correct. There was only 1 LBW birth and zero VLBW births among Asian LifeLong patients, among only 36 births among Asian patients in 2022.

Edit 05466: Women delivering greater than Live Births - Total women delivering is greater than the total of births. Please correct or explain.

Related Tables: Table 7

Deborah Workman (Health Center) on 02/14/2023 7:48 PM EST: Deliveries that are higher than total births are due negative birth outcomes or transfer of care for a small number of patients.

Table 8A-Financial Costs

Edit 04126: Cost Per Visit Questioned - Mental Health Cost Per Visit is substantially different than the prior year. Current Year (301.33); Prior Year (239.48).

Related Tables: Table 8A, Table 5(UR)

Deborah Workman (Health Center) on 02/13/2023 5:54 PM EST: The data is correct. Changes in Mental Health provider staff, and a ramp-up period for new staff result in fewer Mental Health visits per Mental Health provider.

Edit 03948: Cost Per Visit Questioned - Substance Use Disorder cost per visit is substantially different than the prior year. Current Year (314.06); Prior Year (702.30). Please correct or explain.

Related Tables: Table 8A, Table 5(UR)

Deborah Workman (Health Center) on 02/13/2023 7:26 PM EST: Correct. There was an increase in documented SUD visits per FTE in 2022.

Edit 04129: Cost Per Visit Questioned - Other Professional Cost Per visits is substantially different than the prior year. Current Year (178.32); Prior Year (140.8).

Related Tables: Table 8A, Table 5(UR)

Deborah Workman (Health Center) on 02/14/2023 7:25 PM EST: The increase in Other Professional Cost per visit is explained by market adjustments in personnel and facility costs in the current year.

Table 9D-Patient-Related Revenue (Scope of Project Only)

Edit 07600: Adjustments in Question - 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.

Related Tables: Table 9D

Deborah Workman (Health Center) on 02/14/2023 7:11 PM EST: The reported adjustment amount is based on post date between 1/1/2022 - 12/31/2022, which may include charges posted in 2021 due to claim processing and adjudication processes.

Edit 03994: Accounts Receivable not equal to zero - Line 2a, Capitated Medicaid Charges - Collections - Adjustments does not equal zero (-8634030). 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

Deborah Workman (Health Center) on 02/14/2023 7:13 PM EST: Full payments are typically not received in the month of service as FQHCs are subject to annual PPS reconciliation.

Edit 05099: PMPM collections in question - Medicaid Capitation PMPM (14.85) 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)

Deborah Workman (Health Center) on 02/14/2023 7:30 PM EST: Data is confirmed as reported.

Edit 01973: FQHC Medicaid Capitation retros exceed 50% total collections - FQHC Medicaid Capitation retros(16753721) exceed 50% of (23374318). Verify that Verify that Cols C1 through C4 are included in Col B and subtracted from Col D. Please correct or explain.

Related Tables: Table 9D
Deborah Workman (Health Center) on 02/14/2023 7:12 PM EST: Wraparound payments (reported in C1) are more than capitation payments for FQHCs in California.
Edit 01916: FQHC Medicaid FFS Managed Care retros questioned - FQHC Medicaid FFS Managed Care retros (20938379) exceed 50% of Medicaid FFS Managed Care amount collected this period on Line 2b Column b (24973517).Verify that Columns C1 through C4 are included in Column b and subtracted from Column d. Please correct or explain.
Related Tables: Table 9D
Deborah Workman (Health Center) on 02/14/2023 7:14 PM EST: Wraparound payments (reported in C1) are more than capitation payments for FQHCs in California.
Edit 04121: Charge to Cost Ratio Questioned - Total charge to cost ratio of (0.71) is reported, which suggests that charges are less than costs. Please review the information reported across the tables and correct or explain.
Related Tables: Table 9D, Table 8A
Deborah Workman (Health Center) on 02/14/2023 7:27 PM EST: The ratio is correct. Funding from grants helps to cover the gap.
Edit 04156: Inter-year Capitation PMPM questioned - The average Medicare capitation PMPM reported on Line 5a (94.31) is significantly different from the prior year (58.28). Please correct or explain.
Related Tables: Table 9D, Table 4(UR)
Deborah Workman (Health Center) on 02/14/2023 7:54 PM EST: The data is correct as reported. LifeLong updated its Medicare G-codes, resulting in the increase identified.
Edit 03995: Accounts Receivable not equal to zero - Line 5a, Medicare Managed Care (capitated) - Collections - Adjustments does not equal zero (-653815). 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
Deborah Workman (Health Center) on 02/14/2023 7:16 PM EST: Data in Line 5a have been reviewed and confirmed. 340B related charges and payments are included.
Edit 01965: Large change in accounts receivable for Total Other Public is reported - Total Other Public, Line 9: When we compared the sum of collections (Column b) and adjustments (Column d) to total Other Public charges (Column a) there is a large difference (-634.53)%. While we do not expect it to be zero, a difference this large is unusual. Please explain or correct.
Related Tables: Table 9D
Deborah Workman (Health Center) on 02/14/2023 7:17 PM EST: The data is correct as reported. The difference is due to timing of pending claims, and amounts to be paid and adjusted.
Edit 05100: PMPM collections in question - Private Capitation PMPM (14.85) 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)
Deborah Workman (Health Center) on 02/14/2023 7:33 PM EST: Revenue and member months are entered correctly.
Edit 03997: Accounts Receivable not equal to zero - Line 11a, Capitated Private Charges - Collections - Adjustments does not equal zero (-149961). 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

Deborah Workman (Health Center) on 02/14/2023 7:18 PM EST: Data in Line 11a have been reviewed and confirmed. 340B related charges and payments are included.

Edit 03989: Self-pay numbers questioned - more collections and write-offs than charges - More collections and write-offs are reported than charges for self-pay, Line 13. Please review that proper re-allocations of all deductibles and co-payments to the self-pay category is being done. Please correct or explain. Current Year Accounts Receivable (-185242); Prior Year Accounts Receivable (-324859);

Related Tables: Table 9D

Deborah Workman (Health Center) on 02/14/2023 7:19 PM EST: The data was reviewed and confirmed. More collections and write-offs are reported than charges primarily due to timing of payment collection and determination of bad debt write-off.

Edit 04216: Average Collections - A large change from the prior year in collections per medical+dental+mental health+vision+other professional visit is reported. Current Year (281.39); Prior year (244.41). Please review the information and correct or explain.

Related Tables: Table 9D, Table 5(UR)

Deborah Workman (Health Center) on 02/14/2023 7:57 PM EST: The data is correct as reported. Collections from prospective payment were higher in the current year than the prior year primarily as a result of increases in PPS rates for a subset of health center sites.

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 (3962740). Prior Year - On Table 9E Line 1b Column a (4531966).

Related Tables: Table 9E

Deborah Workman (Health Center) on 02/14/2023 4:10 PM EST: The data is correct, and reflects corrected categorizing of THCGME award in Table 9E Line 3 in the current year.

Edit 03468: Inter-Year variation in grant funds - Current year Public Housing Primary Care(Section 330(i)) funds vary substantially from the prior year on Table 9E Line 1e. 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 1e Column a (4706274). Prior Year - On Table 9E Line 1e Column a (5382305).

Related Tables: Table 9E

Deborah Workman (Health Center) on 02/14/2023 4:11 PM EST: The data is correct, and reflects corrected categorizing of THCGME award in Table 9E Line 3 in the current 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

Deborah Workman (Health Center) on 02/14/2023 4:15 PM EST: The data is correct, and reflects corrected categorizing of THCGME award in Table 9E Line 3 in the current year (moved from Line 1B and in1E). The variance also reflects increased funds for THCGME award in the current year.

Edit 06345: Change in Revenues - You report a large change on Line 6a/State/Local Indigent Care Programs revenues when compared to the prior year. Please correct or explain.

Related Tables: Table 9E

Deborah Workman (Health Center) on 02/14/2023 4:17 PM EST: The data is correct. The variance is explained by timing of payment for the County HealthPAC grant in the prior year.

Edit 06346: Change in Revenues - You report a large change on Line 8/Foundation/Private Grants and Contracts revenues when compared to the prior year. Please correct or explain.

Related Tables: Table 9E

Deborah Workman (Health Center) on 02/14/2023 4:21 PM EST: The data is correct, reflecting an increase in new private/foundation grants from entities such as the Delta Dental Community Care Foundation and the Community Health Center Network (CHCN).

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Comments

Report Comments

In 2022 LifeLong focused primarily on post-Covid stabilization related to workforce, infrastructure and patient care, without major expansions in sites or services. This is reflected in fairly stable patient and visit numbers despite pervasive and ongoing workforce challenges.

HIT Comments

Screening, documenting and reporting on social risk factors (and services to address them) continue to be both a priority and challenge. While documentation of housing insecurity has improved since the prior year, social risk factors are clearly more prevalent (based on population data and reporting systems required by some funders) in the patient population than EHR data indicates.

ODE Comments

Telehealth continues to provide a viable option for patients who experience transportation barriers or prefer to access care remotely. LifeLong launched a new telehealth urgent care service in 2022, which has been highly utilized and will be expanded in 2023.

Workforce Comments

As part of a growing workforce development program, LifeLong is in its 3rd year of operating an accredited Family Medicine Residency Program, and will be graduating its first class of 6 residents in 2023. LifeLong is also in the process of pursuing accreditation for an Advanced Practice Provider Fellowship program, and becoming a site for a Dental Residency Program.