

Program Name: Health Center 330

Submission Status: Accepted, Version 4

UDS Report - 2020

Contact Information

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

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BHCMS ID: 0622440 - Pasadena Health Center, Pasadena, TX

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Patients by ZIP Code**ZIP Codes**

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
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ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
77587	135	14	1	43	193
77586	38	0	0	2	40
77581	18	0	0	6	24
77573	49	0	0	8	57
77571	72	11	1	13	97
77547	10	4	1	1	16
77546	40	0	0	0	40
77539	30	0	0	5	35
77536	90	7	1	20	118
77530	26	3	0	3	32
77521	39	0	0	12	51
77520	22	1	0	4	27
77511	13	0	0	4	17
77089	100	3	0	4	107
77087	32	0	0	5	37
77075	101	10	3	13	127
77062	59	0	3	6	68
77061	16	2	0	3	21
77059	61	1	0	5	67
77058	12	0	2	4	18
77049	17	1	0	3	21
77044	18	1	0	3	22
77034	178	7	2	19	206
77029	14	1	0	5	20
77023	14	0	0	0	14
77017	108	10	4	46	168
77015	36	0	0	2	38
77012	36	2	1	4	43
77011	24	1	0	1	26
77563	25	0	0	0	25
77501	12	0	0	1	13
77502	471	107	9	180	767
77503	206	27	1	52	286
77504	285	24	4	23	336
77505	144	9	1	12	166
77506	519	94	6	138	757
77591	46	0	0	1	47
77598	26	1	0	2	29
77568	48	0	0	0	48
77583	11	0	0	0	11

Other ZIP Codes

ZIP Code (a)	None/Uninsured (b)	Medicaid/CHIP/Other Public (c)	Medicare (d)	Private (e)	Total Patients (f)
Other ZIP Codes	296	10	3	43	352
Unknown Residence	0	0	0	0	0
Total	3,497	351	43	696	4,587

Comments

I added the zip codes that I overlooked that had more than 10 users. Zip Codes with 9 or less users is captured under Other ZIP Codes.

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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)
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Line	Age Groups	Male Patients (a)	Female Patients (b)
1	Under age 1	7	6
2	Age 1	3	12
3	Age 2	14	3
4	Age 3	9	10
5	Age 4	27	19
6	Age 5	30	15
7	Age 6	18	21
8	Age 7	11	15
9	Age 8	11	15
10	Age 9	19	11
11	Age 10	22	14
12	Age 11	45	32
13	Age 12	118	75
14	Age 13	49	49
15	Age 14	31	35
16	Age 15	43	44
17	Age 16	37	47
18	Age 17	29	48
19	Age 18	55	62
20	Age 19	39	50
21	Age 20	33	48
22	Age 21	33	44
23	Age 22	22	49
24	Age 23	24	49
25	Age 24	31	45
26	Ages 25-29	119	217
27	Ages 30-34	112	219
28	Ages 35-39	110	222
29	Ages 40-44	120	233
30	Ages 45-49	115	224
31	Ages 50-54	119	190
32	Ages 55-59	128	203
33	Ages 60-64	96	185
34	Ages 65-69	90	111
35	Ages 70-74	40	56
36	Ages 75-79	17	39
37	Ages 80-84	7	21
38	Age 85 and over	8	8
39	Total Patients (Sum of Lines 1-38)	1,841	2,746

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Table 3B - Demographic Characteristics

Universal

Line	Patients by Race	Hispanic or Latino/a (a)	Non-Hispanic or Latino/a (b)	Unreported/Refused to Report Ethnicity (c)	Total (d) (Sum Columns a+b+c)
1	Asian	0	59		59
2a	Native Hawaiian	0	0		0
2b	Other Pacific Islander	2	9		11
2	Total Native Hawaiian/Other Pacific Islander (Sum Lines 2a + 2b)	2	9		11
3	Black/African American	7	462		469
4	American Indian/Alaska Native	0	21		21
5	White	3,177	719		3,896
6	More than one race	25	27		52
7	Unreported/Refused to report race	4	75	0	79
8	Total Patients (Sum of Lines 1 + 2 + 3 to 7)	3,215	1,372	0	4,587

Line	Patients Best Served in a Language Other than English	Number (a)
12	Patients Best Served in a Language Other than English	1,239

Line	Patients by Sexual Orientation	Number (a)
13	Lesbian or Gay	0
14	Heterosexual (or straight)	0
15	Bisexual	0
16	Something else	0
17	Don't know	0
18	Chose not to disclose	4,585
18a	Unknown	2
19	Total Patients (Sum of Lines 13 to 18a)	4,587

Line	Patients by Gender Identity	Number (a)
20	Male	1,839
21	Female	2,746
22	Transgender Man/Transgender Male	0
23	Transgender Woman/Transgender Female	0
24	Other	0
25	Chose not to disclose	0
25a	Unknown	2
26	Total Patients (Sum of Lines 20 to 25a)	4,587

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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	3,302
2	101 - 150%	848
3	151 - 200%	275
4	Over 200%	75
5	Unknown	87
6	TOTAL (Sum of Lines 1-5)	4,587

Line	Principal Third-Party Medical Insurance	0-17 years old (a)	18 and older (b)
7	None/Uninsured	826	2,671
8a	Medicaid (Title XIX)	120	220
8b	CHIP Medicaid	0	0
8	Total Medicaid (Line 8a + 8b)	120	220
9a	Dually Eligible (Medicare and Medicaid)	0	9
9	Medicare (Inclusive of dually eligible and other Title XVIII beneficiaries)	0	43
10a	Other Public Insurance (Non-CHIP) (specify)	0	0
10b	Other Public Insurance CHIP	7	4
10	Total Public Insurance (Line 10a + 10b)	7	4
11	Private Insurance	41	655
12	TOTAL (Sum of Lines 7 + 8 + 9 + 10 + 11)	994	3,593

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	0	0	0	0	0
13b	Fee-for-service Member Months	3,141	0	87	359	3,587
13c	Total Member Months (Sum of Lines 13a + 13b)	3,141	0	87	359	3,587

Line	Special Populations	Number of Patients (a)
16	Total Agricultural Workers or Dependents (All health centers report this line)	0
23	Total Homeless (All health centers report this line)	118
24	Total School-Based Health Center Patients (All health centers report this line)	0
25	Total Veterans (All health centers report this line)	45
26	Total Patients Served at a Health Center Located In or Immediately Accessible to a Public Housing Site (All health centers report this line)	0

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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)
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Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
1	Family Physicians	1	2,455	0	
2	General Practitioners	0	0	0	
3	Internists	1	2,909	0	
4	Obstetrician/Gynecologists	0	123	0	
5	Pediatricians	0	0	0	
7	Other Specialty Physicians	0	0	0	
8	Total Physicians (Lines 1-7)	2	5,487	0	
9a	Nurse Practitioners	1	1,392	0	
9b	Physician Assistants	0	0	0	
10	Certified Nurse Midwives	0	0	0	
10a	Total NPs, PAs, and CNMs (Lines 9a-10)	1	1,392	0	
11	Nurses	1	0	0	
12	Other Medical Personnel	3			
13	Laboratory Personnel	0			
14	X-ray Personnel	1			
15	Total Medical Care Services (Lines 8 + 10a through 14)	7	6,879	0	4,216

Dental Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
16	Dentists	1	1,635	0	
17	Dental Hygienists	0	0	0	
17a	Dental Therapists	0	0	0	
18	Other Dental Personnel	2			
19	Total Dental Services (Lines 16-18)	3	1,635	0	540

Mental Health Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
20a	Psychiatrists	0	0	0	
20a1	Licensed Clinical Psychologists	1	351	11	
20a2	Licensed Clinical Social Workers	0	0	0	
20b	Other Licensed Mental Health Providers	0	0	0	
20c	Other Mental Health Staff	0	0	0	
20	Total Mental Health Services (Lines 20a-c)	1	351	11	143

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	0	0	0	0

Other Professional Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
22	Other Professional Services Specify	0	0	0	0

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	0	0	
22c	Other Vision Care Staff	0			
22d	Total Vision Services (Lines 22a-c)	0	0	0	0

Pharmacy Personnel

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
23	Pharmacy Personnel	1			

Enabling Services

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
24	Case Managers	0	0	0	
25	Patient and Community Education Specialists	0	0	0	
26	Outreach Workers	0			
27	Transportation Staff	0			
27a	Eligibility Assistance Workers	0			
27b	Interpretation Staff	0			
27c	Community Health Workers	0			
28	Other Enabling Services Specify	0			
29	Total Enabling Services (Lines 24-28)	1	0	0	0

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	0			
29b	Quality Improvement Staff	0			

Administration and Facility

Line	Personnel by Major Service Category	FTEs (a)	Clinic Visits (b)	Virtual Visits (b2)	Patients (c)
30a	Management and Support Staff	1			
30b	Fiscal and Billing Staff	2			
30c	IT Staff	1			
31	Facility Staff	1			
32	Patient Support Staff	3			
33	Total Facility and Non-Clinical Support Staff (Lines 30a-32)	8			

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)	21	8,865	11	

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)	2	99	0	97
20a02	Nurse Practitioners	1	19	0	14
20a03	Physician Assistants	0	0	0	0
20a04	Certified Nurse Midwives	0	0	0	0

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)	2	17	0	14
21b	Nurse Practitioners (Medical)	1	1	0	1
21c	Physician Assistants	0	0	0	0
21d	Certified Nurse Midwives	0	0	0	0
21e	Psychiatrists	0	0	0	0
21f	Licensed Clinical Psychologists	0	0	0	0
21g	Licensed Clinical Social Workers	0	0	0	0
21h	Other Licensed Mental Health Providers	0	0	0	0

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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	1	1
3	Tuberculosis	A15- through A19-, O98.0-	0	0
4	Sexually transmitted infections	A50- through A64-	32	28
4a	Hepatitis B	B16.0 through B16.2, B16.9, B17.0, B18.0, B18.1, B19.1-, O98.4-	0	0
4b	Hepatitis C	B17.1-, B18.2, B19.2-	7	6
4c	Novel coronavirus (SARS-CoV-2) disease	U07.1	0	0

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)
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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-	28	27
6	Chronic lower respiratory diseases	J40 (count only when code U07.1 is not present), J41- through J44-, J47-	37	24
6a	Acute respiratory illness due to novel coronavirus (SARS-CoV-2) disease	J12.89, J20.8, J40, J22, J98.8, J80 (count only when code U07.1 is present)	0	0

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-	15	13
8	Abnormal cervical findings	C53-, C79.82, D06-, R87.61-, R87.629, R87.810, R87.820	7	7
9	Diabetes mellitus	E08- through E13-, O24-(exclude O24.41-)	800	376
10	Heart disease (selected)	I01-, I02- (exclude I02.9), I20- through I25-, I27-, I28-, I30- through I52-	27	20
11	Hypertension	I10- through I16-, O10-, O11-	999	569
12	Contact dermatitis and other eczema	L23- through L25-, L30- (exclude L30.1, L30.3, L30.4, L30.5), L58-	17	16
13	Dehydration	E86-	1	1
14	Exposure to heat or cold	T33-, T34-, T67-, T68-, T69-, W92-, W93-	0	0
14a	Overweight and obesity	E66-, Z68- (exclude Z68.1, Z68.20 through Z68.24, Z68.51, Z68.52)	168	149

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-	79	79
16	Selected perinatal/neonatal medical conditions	A33-, P19-, P22-through P29- (exclude P29.3), P35- through P96- (exclude P54-, P91.6-, P92-, P96.81), R78.81, R78.89	3	2
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	35	28

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-	12	9
19	Other substance-related disorders (excluding tobacco use disorders)	F11- through F19- (exclude F17-), G62.0, O99.32-	13	7
19a	Tobacco use disorder	F17-, O99.33-	2	2
20a	Depression and other mood disorders	F30- through F39-	40	32
20b	Anxiety disorders, including post-traumatic stress disorder (PTSD)	F06.4, F40- through F42-, F43.0, F43.1-, F93.0	196	87
20c	Attention deficit and disruptive behavior disorders	F90- through F91-	0	0
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-, 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	242	128
20e	Human trafficking	T74.5- through T74.6-, T76.5- through T76.6-, Z04.81, Z04.82, Z62.813, Z91.42	1	1
20f	Intimate partner violence	T74.11, T74.21, T74.31, Z69.11, Y07.0	0	0

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	81	80
21a	Hepatitis B test	CPT-4: 86704 through 86707, 87340, 87341, 87350	55	55
21b	Hepatitis C test	CPT-4: 86803, 86804, 87520 through 87522	79	78
21c	Novel coronavirus (SARS-CoV-2) diagnostic test	CPT-4: 87426, 87635 HCPCS: U0001, U0002, U0003, U0004 CPT PLA: 0202U, 0223U, 0225U	578	455
21d	Novel coronavirus (SARS-CoV-2) antibody test	CPT-4: 86328, 86408, 86409, 86769 CPT PLA: 0224U, 0226U	910	817
21e	Pre-Exposure Prophylaxis (PrEP)-associated management of all PrEP patients	CPT-4: 99401-99404 ICD-10: Z11.3, Z11.4, Z20.2, Z20.6, Z51.81, Z71.51, Z71.7, Z79.899 Limit to emtricitabine/tenofovir disoproxil fumarate (FTC/TDF) or emtricitabine/tenofovir alafenamide (FTC/TAF) for PrEP	97	90
22	Mammogram	CPT-4: 77065, 77066, 77067 ICD-10: Z12.31	26	26
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)	143	138
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	549	522
24a	Seasonal flu vaccine	CPT-4: 90630, 90653 through 90657, 90658, 90661, 90662, 90672, 90673, 90674, 90682, 90685 through 90689, 90756	131	128
25	Contraceptive management	ICD-10: Z30-	23	20
26	Health supervision of infant or child (ages 0 through 11)	CPT-4: 99381 through 99383, 99391 through 99393 ICD-10: Z00.1-	96	92
26a	Childhood lead test screening (9 to 72 months)	ICD-10: Z13.88 CPT-4: 83655	18	18
26b	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408, 99409 HCPCS: G0396, G0397, G0443, H0050	0	0
26c	Smoke and tobacco use cessation counseling	CPT-4: 99406, 99407 HCPCS: S9075 CPT-II: 4000F, 4001F, 4004F	0	0
26d	Comprehensive and intermediate eye exams	CPT-4: 92002, 92004, 92012, 92014	0	0

Selected Dental Services

Line	Service Category	Applicable ADA Code	Number of Visits (a)	Number of Patients (b)
27	Emergency services	CDT: D0140, D9110	127	123
28	Oral exams	CDT: D0120, D0145, D0150, D0160, D0170, D0171, D0180	564	343
29	Prophylaxis-adult or child	CDT: D1110, D1120	100	94
30	Sealants	CDT: D1351	10	7
31	Fluoride treatment-adult or child	CDT: D1206, D1208 CPT-4: 99188	7	7
32	Restorative services	CDT: D21xx through D29xx	494	206
33	Oral surgery (extractions and other surgical procedures)	CDT: D7xxx	244	90
34	Rehabilitative services (Endo, Perio, Prostho, Ortho)	CDT: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	204	109

Sources of Codes

ICD-10-CM (2020)-[National Center for Health Statistics \(NCHS\)](#)

CPT (2020)-[American Medical Association \(AMA\)](#)

Code on Dental Procedures and Nomenclature CDT Code (2020)-Dental Procedure Codes. [American Dental Association \(ADA\)](#)

Note: "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

[X]: 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	0
3	Ages 20-24	0
4	Ages 25-44	0
5	Ages 45 and over	0
6	Total Patients (Sum of Lines 1-5)	0

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	0	0
8	Second Trimester	0	0
9	Third Trimester	0	0

Section C - Childhood Immunization Status

Line	Childhood Immunization Status	Total Patients with 2 nd Birthday (a)	Number Charts Sampled or EHR Total (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	16	16	1

Section D - Cervical and Breast Cancer Screening

Line	Cervical Cancer Screening	Total Female Patients Aged 23 through 64 (a)	Number Charts Sampled or EHR Total (b)	Number of Patients Tested (c)
11	MEASURE: Percentage of women 23-64 years of age who were screened for cervical cancer	1,469	1,469	117

Line	Breast Cancer Screening	Total Female Patients Aged 51 through 73 (a)	Number Charts Sampled or EHR Total (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	375	375	160

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

Line	Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	Total Patients Aged 3 through 16 (a)	Number Charts Sampled or EHR Total (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	826	826	578

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 Charts Sampled or EHR Total (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	3,280	3,280	2,335

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 Charts Sampled or EHR Total (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 within 24 months, <i>and</i> (2) if identified to be a tobacco user received cessation counseling intervention	2,253	2,253	1,968

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 Aged 21 and Older at High Risk of Cardiovascular Events (a)	Number Charts Sampled or EHR Total (b)	Number of Patients Prescribed or On Statin Therapy (c)
17a	MEASURE: Percentage of patients 21 years of age and older at high risk of cardiovascular events who were prescribed or were on statin therapy	49	49	45

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 Charts Sampled or EHR Total (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	13	13	10

Section J - Colorectal Cancer Screening

Line	Colorectal Cancer Screening	Total Patients Aged 50 through 74 (a)	Number Charts Sampled or EHR Total (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	1,071	1,071	417

Section K - HIV Measures

Line	HIV Linkage to Care	Total Patients First Diagnosed with HIV (a)	Number Charts Sampled or EHR Total (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 staff between December 1 of the prior year and November 30 of the measurement year and who were seen for follow-up treatment within 30 days of that first-ever diagnosis	1	1	1

Line	HIV Screening	Total Patients Aged 15 through 65 (a)	Number Charts Sampled or EHR Total (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	1,879	1,879	125

Section L - Depression Measures

Line	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Total Patients Aged 12 and Older (a)	Number Charts Sampled or EHR Total (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	3,344	3,344	314

Line	Depression Remission at Twelve Months	Total Patients Aged 12 and Older with Major Depression or Dysthymia (a)	Number Charts Sampled or EHR Total (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	2	1

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 Charts Sampled or EHR Total (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	13	13	9

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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	0	0	0	0
1d	American Indian/Alaska Native	0	0	0	0
1e	White	0	0	0	0
1f	More than One Race	0	0	0	0
1g	Unreported/Refused to Report Race	0	0	0	0
	Subtotal Hispanic or Latino/a	0	0	0	0

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	0	0	0	0
2b1	Native Hawaiian	0	0	0	0
2b2	Other Pacific Islander	0	0	0	0
2c	Black/African American	0	0	0	0
2d	American Indian/Alaska Native	0	0	0	0
2e	White	0	0	0	0
2f	More than One Race	0	0	0	0
2g	Unreported/Refused to Report Race	0	0	0	0
	Subtotal Non-Hispanic or Latino/a	0	0	0	0

Unreported/Refused to Report 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/Refused to Report Race and Ethnicity	0	0	0	0
i	Total	0	0	0	0

Hispanic or Latino/a

Line	Race and Ethnicity	Total Patients 18 through 84 Years of Age with Hypertension (2a)	Number Charts Sampled or EHR Total (2b)	Patients with Hypertension Controlled (2c)
1a	Asian	0	0	0
1b1	Native Hawaiian	0	0	0
1b2	Other Pacific Islander	0	0	0
1c	Black/African American	0	0	0
1d	American Indian/Alaska Native	0	0	0
1e	White	398	398	267
1f	More than One Race	0	0	0
1g	Unreported/Refused to Report Race	0	0	0
	Subtotal Hispanic or Latino/a	398	398	267

Non-Hispanic or Latino/a

Line	Race and Ethnicity	Total Patients 18 through 84 Years of Age with Hypertension (2a)	Number Charts Sampled or EHR Total (2b)	Patients with Hypertension Controlled (2c)
2a	Asian	2	2	2
2b1	Native Hawaiian	0	0	0
2b2	Other Pacific Islander	0	0	0
2c	Black/African American	34	34	29
2d	American Indian/Alaska Native	2	2	0
2e	White	89	89	59
2f	More than One Race	2	2	0
2g	Unreported/Refused to Report Race	0	0	0
	Subtotal Non-Hispanic or Latino/a	129	129	90

Unreported/Refused to Report Race and Ethnicity

Line	Race and Ethnicity	Total Patients 18 through 84 Years of Age with Hypertension (2a)	Number Charts Sampled or EHR Total (2b)	Patients with Hypertension Controlled (2c)
h.	Unreported/Refused to Report Race and Ethnicity	0	0	0
i	Total	527	527	357

Hispanic or Latino/a

Line	Race and Ethnicity	Total Patients 18 through 74 Years of Age with Diabetes (3a)	Number Charts Sampled or EHR Total (3b)	Patients with HbA1c >9% or No Test During Year (3f)
1a	Asian	0	0	0
1b1	Native Hawaiian	0	0	0
1b2	Other Pacific Islander	0	0	0
1c	Black/African American	0	0	0
1d	American Indian/Alaska Native	0	0	0
1e	White	312	312	204
1f	More than One Race	0	0	0
1g	Unreported/Refused to Report Race	0	0	0
	Subtotal Hispanic or Latino/a	312	312	204

Non-Hispanic or Latino/a

Line	Race and Ethnicity	Total Patients 18 through 74 Years of Age with Diabetes (3a)	Number Charts Sampled or EHR Total (3b)	Patients with HbA1c >9% or No Test During Year (3f)
2a	Asian	2	2	1
2b1	Native Hawaiian	0	0	0
2b2	Other Pacific Islander	0	0	0
2c	Black/African American	14	14	8
2d	American Indian/Alaska Native	0	0	0
2e	White	41	41	29
2f	More than One Race	2	2	2
2g	Unreported/Refused to Report Race	0	0	0
	Subtotal Non-Hispanic or Latino/a	59	59	40

Unreported/Refused to Report Race and Ethnicity

Line	Race and Ethnicity	Total Patients 18 through 74 Years of Age with Diabetes (3a)	Number Charts Sampled or EHR Total (3b)	Patients with HbA1c >9% or No Test During Year (3f)
h	Unreported/Refused to Report Race and Ethnicity	0	0	0
i	Total	371	371	244

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 Staff	\$903,880	\$621,900	\$1,525,780
2	Lab and X-ray	\$119,063	\$81,919	\$200,982
3	Medical/Other Direct	\$0	\$0	\$0
4	Total Medical Care Services (Sum of Lines 1 through 3)	\$1,022,943	\$703,819	\$1,726,762

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	\$289,716	\$199,335	\$489,051
6	Mental Health	\$103,172	\$70,986	\$174,158
7	Substance Use Disorder	\$0	\$0	\$0
8a	Pharmacy (not including pharmaceuticals)	\$62,974	\$43,328	\$106,302
8b	Pharmaceuticals	\$19,482		\$19,482
9	Other Professional specify	\$0	\$0	\$0
9a	Vision	\$0	\$0	\$0
10	Total Other Clinical Services (Sum of Lines 5 through 9a)	\$475,344	\$313,649	\$788,993

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	\$0		\$0
11b	Transportation	\$0		\$0
11c	Outreach	\$0		\$0
11d	Patient and Community Education	\$0		\$0
11e	Eligibility Assistance	\$21,449		\$21,449
11f	Interpretation Services	\$0		\$0
11g	Other Enabling Services specify	\$0		\$0
11h	Community Health Workers	\$15,361		\$15,361
11	Total Enabling Services (Sum of Lines 11a through 11h)	\$36,810	\$25,327	\$62,137
12	Other Program-Related Services specify	\$0	\$0	\$0
12a	Quality Improvement	\$3,783	\$2,603	\$6,386
13	Total Enabling and Other Services (Sum of Lines 11, 12, and 12a)	\$40,593	\$27,930	\$68,523

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	\$173,989		
15	Non-Clinical Support Services	\$871,409		
16	Total Facility and Non-Clinical Support Services (Sum of Lines 14 and 15)	\$1,045,398		
17	Total Accrued Costs (Sum of Lines 4 + 10 + 13 + 16)	\$2,584,278		\$2,584,278
18	Value of Donated Facilities, Services, and Supplies specify Donated crisis relief and medical supplies from DirectRelief			\$118,025
19	Total with Donations (Sum of Lines 17 and 18)			\$2,702,303

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Table 9D - Patient-Related Revenue

Universal

Line	Payer Category	Full Charges This Period (a)	Amount Collected This Period (b)	Retroactive Settlements, Receipts, and Paybacks (c)				Adjustment (d)	Sliding Fee Discounts (e)	Bad Debt Write-Off (f)
				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)			
1	Medicaid Non-Managed Care	\$71,460	\$13,708	\$0	\$0	\$0	\$0	\$55,434		
2a	Medicaid Managed Care (capitated)	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
2b	Medicaid Managed Care (fee-for-service)	\$34,222	\$28,894	\$0	\$0	\$0	\$0	\$15,055		
3	Total Medicaid (Sum of Lines 1 + 2a + 2b)	\$105,682	\$42,602	\$0	\$0	\$0	\$0	\$70,489		
4	Medicare Non-Managed Care	\$31,247	\$3,867	\$0	\$0	\$0	\$0	\$28,760		
5a	Medicare Managed Care (capitated)	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
5b	Medicare Managed Care (fee-for-service)	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
6	Total Medicare (Sum of Lines 4 + 5a + 5b)	\$31,247	\$3,867	\$0	\$0	\$0	\$0	\$28,760		
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)	\$2,710	\$2,211	\$0	\$0	\$0	\$0	\$1,462		
8c	Other Public, including COVID-19 Uninsured Program	\$0	\$0			\$0	\$0	\$0		
9	Total Other Public (Sum of Lines 7 + 8a + 8b + 8c)	\$2,710	\$2,211	\$0	\$0	\$0	\$0	\$1,462		
10	Private Non-Managed Care	\$5,141	\$1,769			\$0	\$0	\$2,415		
11a	Private Managed Care (capitated)	\$0	\$0			\$0	\$0	\$0		
11b	Private Managed Care (fee-for-service)	\$232,501	\$74,649			\$0	\$0	\$170,489		
12	Total Private (Sum of Lines 10 + 11a + 11b)	\$237,642	\$76,418			\$0	\$0	\$172,904		
13	Self-Pay	\$1,560,788	\$440,150						\$780,276	\$340,347
14	TOTAL (Sum of Lines 3 + 6 + 9 + 12 + 13)	\$1,938,069	\$565,248	\$0	\$0	\$0	\$0	\$273,615	\$780,276	\$340,347

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	\$1,921,187
1c	Health Care for the Homeless	\$0
1e	Public Housing Primary Care	\$0
1g	Total Health Center (Sum of Lines 1a through 1e)	\$1,921,187
1k	Capital Development Grants, including School-Based Health Center Capital Grants	\$0
1l	Coronavirus Preparedness and Response Supplemental Appropriations Act (H8C)	\$18,640
1m	Coronavirus Aid, Relief, and Economic Security Act (CARES) (H8D)	\$203,094
1n	Expanding Capacity for Coronavirus Testing (ECT) (H8E and LAL ECT)	\$56,615
1o	Health and Economic Recovery Omnibus Emergency Solutions Act (HEROES)/ Health, Economic Assistance, Liability Protection and Schools Act (HEALS)	\$0
1p	Other COVID-19-Related Funding from BPHC specify	\$0
1q	Total COVID-19 Supplemental (Sum of Lines 1l through 1p)	\$278,349
1	Total BPHC Grants (Sum of Lines 1g + 1k + 1q)	\$2,199,536

Other Federal Grants

Line	Source	Amount (a)
2	Ryan White Part C HIV Early Intervention	\$0
3	Other Federal Grants specify	\$0
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)	\$0

Non-Federal Grants Or Contracts

Line	Source	Amount (a)
6	State Government Grants and Contracts specify	\$0
6a	State/Local Indigent Care Programs specify	\$0
7	Local Government Grants and Contracts specify	\$0
8	Foundation/Private Grants and Contracts specify MD Anderson (smoking cessation) - \$12,500 Chevron (vaccines) - \$55,000 Direct Relief (COVID-19 Response Fund) - \$50,000 Delta Dental (general fund) - \$35,000	\$152,500
9	Total Non-Federal Grants and Contracts (Sum of Lines 6 + 6a + 7 + 8)	\$152,500
10	Other Revenue (non-patient related revenue not reported elsewhere) specify Interest Income - \$166 Guaranteed pharma returns - \$33,695 Donation from an individual - \$5,000 Stimulus Funds - \$11,603 Vendor refunds - \$2,213 Crisis relief supplies - \$118,025 Misc - \$1,127	\$171,829
11	Total Revenue (Sum of Lines 1 + 5 + 9 + 10)	\$2,523,865

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Health Center Health Information Technology (HIT) Capabilities

HIT

1. Does your center currently have an electronic health record (EHR) system installed and in use?:

: Yes, installed at all sites and used by all providers

: Yes, but only installed at some 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: Other (Please specify)

Other (Please specify): Conceptual Mindworks, Inc.

1a2.Product Name: Sevocity

1a3.Version Number: 12.0 (rev 0)

1a4.ONC-certified Health IT Product List Number: 15.04.04.2324.Sevo.12.00.1.171229

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 or data system across your organization?:

: Yes

: No

If yes, what is the reason?:

: Second EHR/data system is used during transition to primary EHR

: Second EHR/data system is specific to one service type (e.g., dental, behavioral health)

: Second EHR/data system is used at specific sites with no plan to transition

: Other (please describe)

Other (please describe):

1d. Is your EHR up to date with the latest software and system patches?:

: Yes

: No

: Not sure

1e. When do you plan to update/install the latest EHR software and system patches?:

: a. 3 months

: b. 6 months

: c. 1 Year or more

: d. Not planned

2. Question removed.

3. Question removed.

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

: Hospitals/Emergency rooms

: Specialty clinicians

: Other primary care providers

: Labs or imaging

: Health information exchange (HIE)

: None of the above

: Other (please describe)

Other (please describe):

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

: Patient portals

: Kiosks

: Secure messaging

: Other (please describe)

: No, we do not engage patients using HIT

Other (please describe):

6. Question removed.

7. How do you collect data for UDS clinical reporting (Tables 6B and 7)?:

: We use the EHR to extract automated reports

: We use the EHR but only to access individual patient charts

: We use the EHR in combination with another data analytic system

: We do not use the EHR

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 reportable in the UDS?:

: Yes

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

: No, we are not planning to collect this information

12. Which standardized screener(s) for social risk factors, if any, do you use? (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. Please provide the total number of patients that screened positive for the following:

Food insecurity: 83

Housing insecurity: 118

Financial strain: 288

Lack of transportation/access to public transportation: 0

12b. If you do not use a standardized assessment to collect this information, please indicate why. (Select all that apply.):

: Have not considered/unfamiliar with assessments

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

: Lack of training for staff 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 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

Comments

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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 obtained 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) for that indication?: 0

b. How many patients received MAT for opioid use disorder from a physician, certified nurse practitioner, or physician assistant, with a DATA waiver working on behalf of the health center?: 0

2. Did your organization use telemedicine to provide remote 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 specify)

Other (Please specify):

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 specify)

Other (Please specify):

Policy barriers (Select all that apply):

- : Lack of or limited reimbursement
- : Credentialing, licensing, or privileging
- : Privacy and security
- : Other (Please specify)

Other (Please specify):

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

- : Cost of service
- : Lack of infrastructure
- : Other (Please specify)

Other (Please specify):

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 (employees, contractors, or volunteers), regardless of the funding source that is supporting the assisters' activities. Outreach and enrollment assists are defined as customizable education sessions about affordable 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: 0

4. How many patients received a FDA-approved COVID-19 vaccine during the calendar year at your organization?: 0

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: 0622440 - Pasadena Health Center, Pasadena, TX

Date Requested: 08/23/2021 5:09 PM EST

Program Name: Health Center 330

Date of Last Report Refreshed: 08/23/2021 5:09 PM EST

Submission Status: Accepted

UDS Report - 2020

Workforce

Workforce

1. Does your health center provide 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 reporting year.

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

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

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

	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.	Dieticians/Nutritionists	0	0
24.	Pharmacists	0	0
25.	Other please specify	0	0

3. Provide the number of health center staff serving as preceptors at your health center.: 2

4. Provide the number of health center staff (non-preceptors) supporting ongoing health center training programs.: 0

5. How often does your health center implement satisfaction surveys for providers? (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 implement satisfaction surveys for general staff (report provider surveys in question 5 only)? (Select one.):

- : Monthly
: Quarterly
: Annually
: We do not currently conduct staff 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

Table 3B-Demographic Characteristics

Edit 06170: Patients in Question - A high proportion of Patients by Sexual Orientation are reported on Line 18, Chose not to disclose (99.96)%. Be sure to report only those patients who self-reported that they chose not to disclose their sexual orientation on this line. Please correct or explain.

Related Tables: Table 3B(UR)

Deepika Kandasamy (Reviewer) on 03/29/2021 10:35 PM EST: Collecting SO data is required. Considering that no one is reporting on sexual orientation currently, what will your program do to improve collection of this data? HC Response: Sexual orientation is on our demographic forms. The clinic is going to work with the medical assistants to ask this question in the exam room. There is a stigma for our users to answer this question, truthfully. Pasadena was once a small, working-class city, refineries and chemical plants line the ship channel from Baytown to Houston. Pasadena was previously the headquarters of the Ku Klux Klan and former home of Mickey Gilley's Nightclub made famous in the movie Urban Cowboy.

Table 4-Selected Patient Characteristics

Edit 05087: SCHIP - More than 25% of SCHIP patients are adults. Please confirm that adults are included in SCHIP. Please correct or explain.

Related Tables: Table 4(UR)

Diane Thompson (Health Center) on 02/05/2021 1:23 PM EST: Table 4 Line 8b: In Texas the age limit for CHIP is age 19 CHIPS/Texas Children's Health Plan with the patients DOB this but them in the 18 and older column.

Edit 04162: Inter-year change in Medicaid patients - The proportion of Medicaid patients to total patients has significantly decreased when compared to prior year. Current Year ((7.41)% (340)); Prior Year ((10.25)% (457)). Please review the insurance reporting to ensure the information reported is patient's primary medical care insurance. Please correct or explain.

Related Tables: Table 4(UR)

Diane Thompson (Health Center) on 02/05/2021 5:29 PM EST: Due to COVID-19 and no brick to mortar schooling had an impact from PY to CY. Clients were also telling us that they were not receiving any correspondence from Medicaid and/or Managed Care plans when time for them to renew.

Edit 04163: Inter-year change in patients - The proportion of Private patients to total patients has significantly decreased when compared to prior year. Current Year ((15.17)% (696)); Prior Year ((19.90)% (887)). Please review the insurance reporting to ensure the information reported is patient's primary medical care insurance. Please correct or explain.

Related Tables: Table 4(UR)

Diane Thompson (Health Center) on 02/05/2021 5:40 PM EST: COVID had an impact on all patient categories. The state of Texas place mandatory shelter in place several times in 2020. Also, Texas experienced double the unemployment rate in 2020 from 2019.

Table 5-Staffing and Utilization

Edit 00123: Ob/Gyn Productivity Questioned - A significant change in Productivity (visits/FTE) of Obstetrician/Gynecologists on Line 4 (3075) is reported from the prior year (2466.67). Please check to see that the FTE and visit numbers are entered correctly.

Related Tables: Table 5(UR)

Deepika Kandasamy (Reviewer) on 03/13/2021 11:58 AM EST: OB/GYN productivity actually increased since last year. What happened within your program for this to occur? Please review and explain further or correct.

Edit 00058: NP Productivity Questioned - A significant change in Productivity (visits/FTE) of Nurse Practitioners on Line 9a (1546.67) is reported from the prior year (1144.16). Please check to see that the FTE and visit numbers are entered correctly.

Related Tables: Table 5(UR)

Deepika Kandasamy (Reviewer) on 03/13/2021 11:57 AM EST: NP productivity actually increased since last year. What happened within your program for this to occur? Please review and explain further or correct.

Edit 00052: Dentist Productivity Questioned - A significant change in Productivity (visits/FTE) of Dentists on Line 16 (1635) is reported from the prior year (2167). Please check to see that the FTE and visit numbers are entered correctly.

Related Tables: Table 5(UR)

Diane Thompson (Health Center) on 02/05/2021 5:27 PM EST: In 2020 the Texas Medical Board place restrictions on dental providers from seeing dental patients for approximately 6 weeks. When allowed to open up there were restrictions on services, procedures, and how the patients were schedule, i.e.: no one in the waiting room, one patient at a time, patients to wait in their car until call into the office, etc.

Edit 04141: Inter-year Patients questioned - On Universal - A large change in Dental patients from the prior year is reported on Line 19 Column C. (PY = (769), CY = (540)). Please correct or explain.

Related Tables: Table 5(UR)

Diane Thompson (Health Center) on 02/05/2021 5:20 PM EST: In 2020 the Texas Medical Board place restrictions on dental providers from seeing dental patients for approximately 6 weeks. When allowed to open up there were restrictions on services, procedures, and how the patients were schedule, i.e.: no one in the waiting room, one patient at a time, patients to wait in their car until call into the office, etc.

Edit 04143: Inter-year Patients questioned - On Universal - A large change in Mental Health patients from the prior year is reported on Line 20 Column C. (PY = (89), CY= (143)). Please correct or explain.

Related Tables: Table 5(UR)

Diane Thompson (Health Center) on 02/05/2021 5:05 PM EST: Upon receiving the behavioral health grant we were able to hire another part-time counselor. The counselor also speaks Spanish. Now we are able to accommodate languages without the use of an interpreter.

Table 6A-Selected Diagnoses and Services Rendered

Edit 02149: Contraceptive Management Patients Questioned - The number reported on Line 25 Column (b) (20) on Table 6A appears low when compared to women aged 15-44 (1377) reported on Table 3A. If you use an alternate code for contraception management visits, especially Title X visits, use them to identify and add the patients and visits to line 25.

Related Tables: Table 6A(UR), Table 3A(UR)

Diane Thompson (Health Center) on 02/08/2021 5:32 PM EST: Table 6A Line 25 Column (b) The majority of our patients have religious beliefs that would prevent them from using contraceptives. The clinic OB/GYN is part time and has not had a lot of requests for this service.

Table 6B-Quality of Care Indicators

Edit 03391: Prenatal Care in Question - Zero prenatal patients are reported on Table 6B Line 6 Col a. All women receiving prenatal services, by formal referral or directly at the health center must be included. Please correct or explain.

Related Tables: Table 6B

Diane Thompson (Health Center) on 02/11/2021 5:28 PM EST: Edit 3391: At the end of 2020 the clinic had signed a new agreement with the local hospital and a mid-wife group to provide prenatal care for our patients. This has been slow to get off the ground due to COVID. Zoom meetings continue as we work out the logistics.

Edit 05786: Line 17a Universe in Question - Based on the total universe of patients age 21+ at High Risk of Cardiovascular Events reported on Table 6B Line 17a Column A, we estimate a prevalence rate of (1.61)%. This appears low compared to estimated medical patients in the age group being measured. Please review and correct or explain.

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

Diane Thompson (Health Center) on 02/10/2021 5:49 PM EST: Edit 5786: Line 17a: We do not have a lot of patients being seen with this diagnosis and/or diagnosed at this clinic.

Edit 05788: Line 18 Universe in Question - Based on the universe reported for total patients with Ischemic Vascular Disease (IVD) on line 18 column A we estimate a prevalence rate of (0.39)%. This appears low compared to the prior year national average. Please review and correct or explain.

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

Diane Thompson (Health Center) on 02/09/2021 5:09 PM EST: Edit 5788: Line 18 - The clinic does not have a large population who meet the criteria with a diagnosis of ischemic vascular disease (IVD).

Table 7-Health Outcomes and Disparities

Edit 05792: Hypertension Universe in Question - Based on the universe for Total Patients with Hypertension reported on Line i Column 2a we estimate a prevalence rate of (16.03)%. This appears low compared to national averages. Please review and correct or explain.

Related Tables: Table 7, Table 3A(UR), Table 4(UR), Table 5(UR)

Deepika Kandasamy (Reviewer) on 03/29/2021 10:37 PM EST: This answer does not address the question at hand. Please review and answer again.

Table 8A-Financial Costs

Edit 07501: Medical/Other Direct Costs in Question - Medical Staff costs are reported on Table 8A Line 1 Column A (903880), however no Medical/Other Direct costs are reported on Line 3 Column A. This is unusual. Please correct or explain.

Related Tables: Table 8A

Tyler Moore (Health Center) on 02/08/2021 1:00 PM EST: We do not have any Line 3 Column A costs. This is consistent with the way we report in all prior UDS years for Table 8A.

Edit 04125: Cost Per Visit Questioned - Dental Care Cost Per Visit is substantially different than the prior year. Current Year (299.11); Prior Year (227.67).

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

Tyler Moore (Health Center) on 02/08/2021 1:02 PM EST: Dental Care Cost Per Visit increased due to COVID. We did not lay off any Dental staff in 2020 but our number of visits was down from 2019 and this was especially pronounced during the first few months of the pandemic.

Edit 06301: Costs and FTE Questioned - Community Health Workers are reported on Table 8A, Line 11h (15361) and Table 5, Line 27c (0.3). Review and confirm that FTEs relate to costs or correct.

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

Tyler Moore (Health Center) on 02/08/2021 1:18 PM EST: This is correct. The costs reported on Table 8A, Line 11h for Community Health Workers is for the .3 FTE employee reported on Table 5, Line 27c.

Edit 06306: Costs and FTE Questioned - Quality Improvement is reported on Table 8A, Line 12a (3783) and Table 5, Line 29b (0.08). Review and confirm that FTEs relate to costs or correct.

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

Tyler Moore (Health Center) on 02/08/2021 1:20 PM EST: This is correct. The costs reported on Table 8A, Line 12a for Quality Improvement are the costs related to the .08 FTE employee reported on Table 5, Line 29b.

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

Edit 04121: Charge to Cost Ratio Questioned - Total charge to cost ratio of (0.77) 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

Tyler Moore (Health Center) on 02/08/2021 1:45 PM EST: Our total charge to cost ratio is consistently less than one because of our income mix being over 50% derived from Federal and Non-Federal Grants. This payer mix is due to our clinic being located in a very poor area. This ratio in 2020 was 0.77 which was also below one and comparable to 2019 of 0.81.

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 (-35.54)%. While we do not expect it to be zero, a difference this large is unusual. Please explain or correct.

Related Tables: Table 9D

Tyler Moore (Health Center) on 02/08/2021 1:30 PM EST: The percentage difference is large because the amounts are so small. In this case, the receivable went from \$963 on 12/31/2019 to \$-0- on 12/31/2020.

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 (63.68); Prior year (56.91). Please review the information and correct or explain.

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

Tyler Moore (Health Center) on 02/08/2021 1:38 PM EST: This increase is primarily due to higher collections in 2020 (\$565,248) versus 2019 (\$504,935) while the denominator (total clinic visits) was relatively the same. The higher collections were primarily due to Self Pay where both our charges and collections were up in 2020.

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UDS Report - 2020

Comments

Summary of Tables With No Data Reported

Workforce UNIVERSAL REPORT

Reason: Insufficient Data or Not in Full Operation

Comments:

COVID-19 impacted our ability to offer professional education/training.

Report Comments

We had to overcome the widespread fear not just within our community but with our staff. We had some staff quit due to COVID despite implementing strict protocols, training in the proper use of PPE and N95 masks fittings. Being able to locate and have in stock our regular PPE supplies. Our dental department had to shut down for several weeks and when re-opened what services could be provided were limited. We also had to suspend the use of our Mobile Clinic. The biggest impact was the effect of fear in the community. Fear of infection caused our patient visits to decrease dramatically. Schools implemented virtual learning which lead to less visits for vaccinations, well child and sick visits. Purchasing of COVID testing was a challenge at first, which test: antibody, PCR, or rapid? The clinic has been able to secure all three at this time. Now we are facing issues with purchasing COVID vaccine(s). Only a handful of FQHC clinics in Texas received the first dose of the vaccine.

Patients by ZIP Code Comments

I added the zip codes that I overlooked that had more than 10 users. Zip Codes with 9 or less users is captured under Other ZIP Codes.

Table 3B Comments

Table 3B Line 18: Patients fill out their demographic information and self report as male or female. New patients are given the demographic form and establish patients are asked to fill out on an annual basis. During the pandemic our Hispanic patient users decreased. They did not want or understand virtual visits and/or feel comfortable coming into the office for a face-to-face visit. SO - Sexual orientation is on our demographic forms. The clinic is going to work with the medical assistants to ask this question in the exam room. There is a stigma for our users to answer this question, truthfully. Pasadena was once a small, working-class city, refineries and chemical plants line the ship channel from Baytown to Houston. Pasadena was previously the headquarters of the Ku Klux Klan and former home of Mickey Gilley's Nightclub made famous in the movie Urban Cowboy.

Table 4 Comments

Edit: 5087 Table 4 Line 8b: In Texas the age limit for CHIP is age 19 CHIPS/Texas Children's Health Plan with the patients DOB this but them in the 18 and older column. Edit: 6307 Other Public Member months have been reported on Line 13c column c but no patients are reported on line 10. Corrected Edit: 4162 Due to COVID-19 and no brick to mortar schooling had an impact from PY to CY. Clients were also telling us that due to COVID they were not receiving any correspondence from Medicaid and/or Managed Care plans when time for them to renew.

Table 5 Comments

Edit 4143: Upon receiving the behavioral health grant we were able to hire another part-time counselor. The counselor also speaks Spanish. Now we are able to accommodate languages without the use of an interpreter. Table 5 Virtual Visits - The clinic does have the capability to do virtual visits; patients have been hesitant to engage in this form of visit. Even during the pandemic patients wanted face to face visits. NP Productivity - The same nurse practitioner was here most of 2020 FTE 0.90 and was also bilingual. OB/GYN - This is correct. We were able to manage the OB/GYN's time in the clinic and have him see a few more patients. Clinic physician's utilized the OB/GYN services to provide female care.

Table 6B Comments

Line 19 - Patient education. Patients were reluctant to mail in the card for the screening to be processed. We informed the patient to bring the card back to the clinic and we would mail out for them. This has caused more patients to be compliant with this type of testing. Also, we have a collaboration with MD Anderson to provide this test for free to patients who qualify.

Table 7 Comments

Hypertension - The beginning of 2020 especially after the COVID outbreak had hit the US we started seeing a decline in patient visits. We started calling the hypertensive patients who were on maintenance medications. Many of our patients work 2 and 3 jobs and were unable to keep appointments in the past. With the pandemic and not working they were able to make and keep those appointments. Our pharmacy remained open in 2020 and was able to dispense their hypertension medications.

Table 8A Comments

Medical FTE's - There were 3 primary reasons for this: 1. Our personnel mixed changed in which FTEs were relatively stable but we replaced an MA at a low salary with a Nurse at a high salary because we needed a more qualified person to administer all of our new COVID testing protocols 2. Our medical benefits increase approximately \$30,000 3. Finally, our lab costs went up approximately \$47,000 due to COVID testing Dental FTE's - There were 2 primary reasons for this: 1. We had a full-time administrative person handling front desk duties who was paid a very low salary but we replaced that person and had our hygienist and dental assistant take over front desk duties and increased their salaries for the additional responsibilities. 2. Our dental department benefits costs increased approximately \$7,000

Table 9D Comments

The CFO reviewed charges and collections for the entire year for both Medicaid and Medicare and noted that all amounts recorded are correct. Medicaid: • The charges decreased primarily due to less Medicaid visits related to COVID. • The increase in collections is primarily due to the decrease in Account Receivable. Medicare: • The biggest driver of variances is due to the small numbers involved. We don't have that many Medicare patients so small changes in charges and collections can result in large percentage changes. • Charges decreased slightly due to COVID reducing visits. • We had issues with a few claims filed that reduced our collections by a few thousand dollars.

ODE Comments

Q1 - Changed to "No" Q3 - Our long time CHW resigned early in the year not wanting to work around COVID due to a close family member being ill, we did hire someone to replace him, but she only worked about 3 months and resigned due to family issues. The position was not filled again until the end of December 2020.

Workforce Comments

The clinic is a training site for Nurse Practitioner students for their clinical rotation. With the pandemic there were no students being assigned to the clinic for rotation.