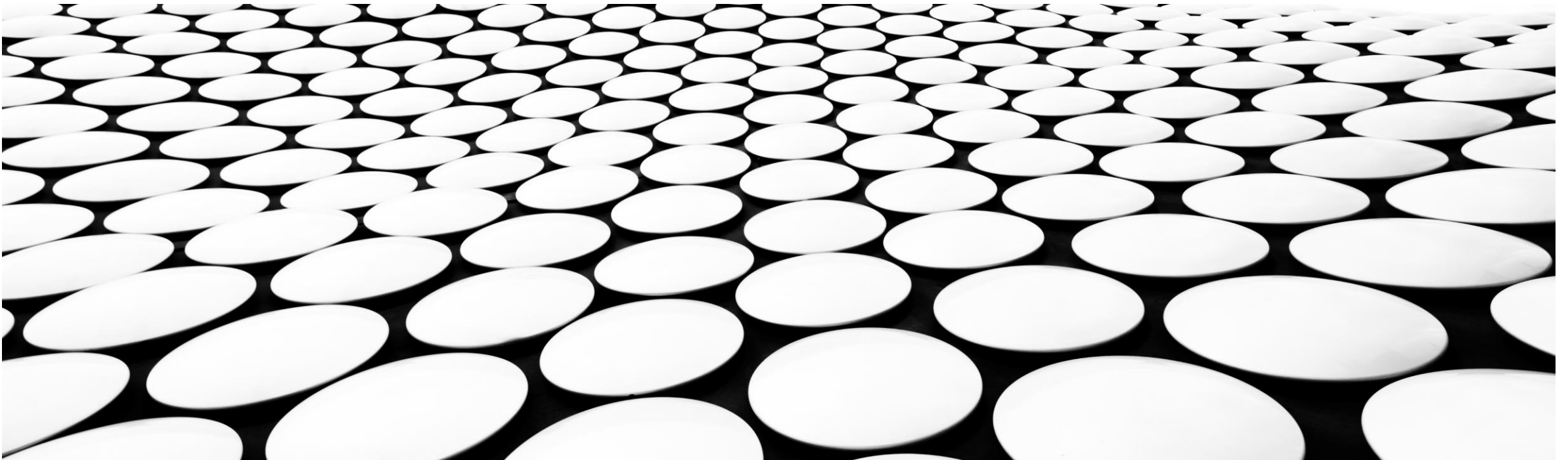

2021 HCAI REPORTING

RCHC DATA WORKGROUP WEBINAR, JANUARY 20, 2022 BY BEN FOUTS, DATA ANALYST





AGENDA

- Changes for the 2021 measurement period
- Changes to the Relevant HCAi report set
- The right Relevant report for the right HCAi section



CHANGES FOR THE 2021 MEASUREMENT PERIOD

THINGS THAT ARE DIFFERENT FROM THE 2020 MEASUREMENT PERIOD






California Department of Health Care Access and Information

HTTPS://DATA.CHHS.CA.GOV/DATASET/PRIMARY-CARE-CLINIC-ANNUAL-UTILIZATION-DATA

Primary Care Clinic Annual Utilization Data

The complete data set of annual utilization data reported by primary care clinics contains basic clinic identification information including community services, clinic staffing data, and patient and staff language data; financial information including gross revenue, itemized write-offs by program, an income statement, and selected capital project items; and information on encounters by service, principal diagnosis, and procedure codes (CPT codes). These products provide trend utilization information for primary care clinics in the form of tables and pivot tables. The primary care clinic trends resource includes information on the number of clinics by type, the number of patients (by race, ethnicity, gender and age), the number of encounters by payer source; and revenues by payer source including the average revenue per encounter.

Data and Resources

 **Individual Reports Search Tool (ALIRTS)** 🔥
The Automated Licensing Information and Report Tracking System (ALIRTS)...

 **Data Importing Instructions for Excel** 🔥


 **2021 Primary Care Clinic Report Form** 🔥


 **2021 Primary Care Clinic Instructions** 🔥

Just the tables

The instructions

 Download all


 More Info


 Go to resource


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INSTRUCTIONS FOR COMPLETING

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS
(COMMUNITY AND FREE)

REPORT PERIOD
JANUARY 1, 2021 THROUGH DECEMBER 31, 2021

CHANGES TO THE TABLES (RACE AND ETHNICITY)

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2020

PATIENT DEMOGRAPHICS

Report Page 3

RACE

Line No.	Race	No. of Patients (1)
1	White (include Hispanic)	
2	Black	
3	Native American / Alaskan Native	
4	Asian / Pacific Islander	
5	More Than One Race	
6	Other / Unknown	
7	Total Patients*	

ETHNICITY

Line No.	Ethnicity	No. of Patients (1)
10	Hispanic	
11	Non-Hispanic	
12	Unknown	
13	Total Patients*	



ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

PATIENT DEMOGRAPHICS

Report Page 3

RACE & ETHNICITY

Line No.	Race	Hispanic (1)	Non-Hispanic (2)	Unknown (3)	Total Patient (4)
1	White (include Hispanic)				
2	Black				
3	Native American / Alaskan Native				
4	Asian / Pacific Islander				
5	More Than One Race				
6	Other / Unknown				
7	Total Patients*				

CHANGES TO THE TABLES (AGE AND GENDER)

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2020

PATIENT DEMOGRAPHICS

Report Page 3

AGE CATEGORY

Line No.	Age Category	Males (1)	Females (2)
30	Under 1 Year		
31	1 – 4 Years		
32	5 – 12 Years		
33	13 – 14 Years		
34	15 – 19 Years		
35	20 – 34 Years		
36	35 – 44 Years		
37	45 – 64 Years		
38	65 and Over		
39	Total Patients*		



ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

PATIENT DEMOGRAPHICS

Report Page 3

AGE CATEGORY AND GENDER

Line No.	Age Category	Males (1)	Females (2)	Other/Unknown (3)	Total Patient (4)
30	Under 1 Year				
31	1 – 4 Years				
32	5 – 12 Years				
33	13 – 14 Years				
34	15 – 19 Years				
35	20 – 34 Years				
36	35 – 44 Years				
37	45 – 64 Years				
38	65 and Over				
39	Total Patients*				

REPORT LINE NUMBERS ARE BASICALLY THE SAME

Some of the tables may be in a different position on the printed page

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2020

SEASONAL AGRICULTURAL AND MIGRATORY WORKERS

Line No.		Number (1)
75	Total Patients	
76	Total Encounters	

PATIENT COVERAGE

Line No.	Patient Coverage	No. of Patients (1)
45	Medicare	
46	Medicare – Managed Care	
47	Medi-Cal	
48	Medi-Cal – Managed Care	
49	County Indigent / CMSP / MISP	
50	Private Insurance	
51	Covered California	
52	Alameda Alliance for Health	
53	My Health LA (MHLA)	
54	PACE Program	
55	Self-Pay / Sliding Fee	
56	Free	
57	All Other Payers	
58	Total Patients*	

Totals for these tables must agree

EPISODIC PROGRAMS

Line No.	Episodic Programs	No. of Patients (1)
60	BCCCP	
61	CHDP	
62	Family PACT	
63	Other County Programs	
64	Children's Treatment Program	
65	Other Payer – Covered by Grant	
	Total Episodic Patients	
66	(Duplicated)	

CHILD HEALTH AND DISABILITY PREVENTION (CHDP)

Line No.		Number (1)
70	CHDP Assessments	

PATIENT DEMOGRAPHICS

PATIENT COVERAGE

Line No.	Patient Coverage	No. of Patients (1)
45	Medicare	
46	Medicare – Managed Care	
47	Medi-Cal	
48	Medi-Cal – Managed Care	
49	County Indigent / CMSP / MISP	
50	Private Insurance	
51	Covered California	
52	Alameda Alliance for Health	
53	My Health LA (MHLA)	
54	PACE Program	
55	Self-Pay / Sliding Fee	
56	Free	
57	All Other Payers	
58	Total Patients*	

* Totals for these tables must agree

SEASONAL AGRICULTURAL AND MIGRATORY WORKERS

Line No.		Number (1)
75	Total Patients	
76	Total Encounters	

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

EPISODIC PROGRAMS

Line No.	Episodic Programs	No. of Patients (1)
60	BCCCP	
61	CHDP	
62	Family PACT	
63	Other County Programs	
64	Children's Treatment Program	
65	Other Payer – Covered by Grant	
	Total Episodic Patients	
66	(Duplicated)	

CHILD HEALTH AND DISABILITY PREVENTION (CHDP)

Line No.		Number (1)
70	CHDP Assessments	

ENCOUNTERS BY PRINCIPAL DIAGNOSIS

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

Report Page 4

FACILITY ID No. _____

Report the diagnosis (or symptom, condition, problem, or complaint) as the main reason for the encounter. Do not report the secondary diagnosis(es). There should be only one principal diagnosis for each encounter.

ENCOUNTERS BY PRINCIPAL DIAGNOSIS (do not input any commas)

Line No.	Classification of Diseases and/or Injuries for each Principal Diagnosis	ICD-10-CM Codes	No. of Encounters (1)
1	Infectious and Parasitic Diseases	A00 - B99	
2	Neoplasms	C00 - D49	
3	Endocrine, Nutritional, and Metabolic Diseases; and Immunity Disorders	E00 - E89	
4	Blood and Blood Forming Disorders	D50 - D89	
5	Mental, Behavioral, and Neurodevelopment Disorders	F01 - F99	
6	Nervous System and Sense Organs Diseases	G00 - H95	
7	Circulatory System Diseases	I00 - I99	
8	Respiratory System Diseases	J00 - J99	
9	Digestive System Diseases, excluding dental diagnoses	K20 - K95	
10	Genitourinary System Diseases	N00 - N99	
11	Pregnancy, Childbirth & the Puerperium	O00 - O9A	
12	Skin and Subcutaneous Tissue Diseases	L00 - L99	
13	Musculoskeletal System and Connective Tissue Diseases	M00 - M99	
14	Congenital Anomalies	Q00 - Q99	
15	Certain Conditions Originating in the Perinatal Period	P00 - P96	
16	Symptoms, Signs, and Ill-defined Conditions	R00 - R99	
17	Injury and Poisoning	S00 - T88	
18	Factors Influencing Health Status and Contact with Health Services	Z00 - Z29, Z32 - Z99	
19	Dental Diagnosis	K00 - K14	
20	Family Planning "Z" Codes	Z30 - Z31	
21	Other	All other codes not in Lines 1-20	
22	Total		

CHANGES TO THE TABLES (PRINCIPAL DIAGNOSIS)

➡ Line 18, Column 3 – Z32-Z99 changed from Z40-Z99

➡ Line 20, Column 3 – Z30-Z31 changed from Z30-Z39

Report Page 5

FACILITY ID No. _____

Classify each encounter by the principal CPT code that was reported on the billing document for this encounter. Do not report secondary procedures. There should be one and only one procedure code reported for each encounter.

ENCOUNTERS BY PRINCIPAL SERVICE (do not input any commas)

Line No.	Principal Service	CPT Codes	No. of Encounters (1)
	EVALUATION AND MANAGEMENT SERVICES		
1	Evaluation and Management (new patient)	99202 - 99205	
2	Evaluation and Management (established patient)	99211 - 99215	
3	Hospital Related Services	99217 - 99226, 99231 - 99239	
4	Consultations	99241 - 99245, 99444, 99451 - 99453	
5	Other Evaluation and Management Services	99291 - 99292, 99354 - 99360, 99415 - 99416, 99421 - 99423, 99450, 99455 - 99456, 99499	
6	Nursing Facility Related Services	99304 - 99318	
7	Case Management Services	99366 - 99368	
8	Preventive Medicine (infant, child, adolescent)	99381 - 99384, 99391 - 99394, 99460 - 99463	
9	Preventive Medicine (adult)	99385 - 99387, 99395 - 99397, 99429	
10	Counseling	99401 - 99404, 99406 - 99409, 99411 - 99412	
	ALL OTHER SERVICES		
11	Anesthesia	00100 - 01999, 99100, 99116, 99135, 99140, 99151 - 99157	
12	Integumentary System	10030 - 19499	
13	Musculoskeletal System	20100 - 29999	
14	Respiratory System	30000 - 32999	
15	Cardiovascular System	33016 - 37799	
16	Hemic and Lymphatic System	38100 - 38999	
17	Mediastinum and Diaphragm System	39000 - 39599	
18	Digestive System	40490 - 49999	
19	Urinary System	50010 - 53899	
20	Male Genital System	54000 - 55920	
21	Intersex Surgery	55970, 55980	
22	Female Genital System	56405 - 58999	
23	Maternal Care and Delivery	59000 - 59899	
24	Endocrine System	60000 - 60699	
25	Nervous System	61000 - 64999	
26	Eye and Ocular Adnexa System	65091 - 68899	
27	Auditory System	69000 - 69979	
28	Radiology	70010 - 79999	
29	Pathology / Laboratory	80047 - 89356, 89398, 0001U-0284U	
30	Medicine - Special Services	90281 - 99082	
31	Family Planning "Z" Codes	"Z" codes	
32	Dental Encounters (CDT codes)	D0100 - D0999	
33	CPT Category III Codes	0042T - 0713T	
34	Other	All other codes not in Lines 1-33	
35	Total		

CHANGES TO THE TABLES (PRINCIPAL SERVICE)



Line 1, Column 3 – 99202-99205 changed from 99201-99205

Line 5, Column 3 – Added 99421-99423

Line 12, Column 3 – 10030-19499 changed from 10004-19499

Line 13, Column 3 – 20100-29999 changed from 20005-29999

Line 15, Column 3 – 33016-37799 changed from 33010-37799

Line 20, Column 3 – 54000-55920 changed from 54000-55899

Line 29, Column 3 – Added 0001U-0284U

Line 30, Column 3 – 90281-99082 changed from 90281-99091

Line 30, Column 3 – Removed 99170-99199

Line 33, Column 3 – 0042T-0713T changed from 0042T-0542T



OTHER CHANGES TO THE TABLES (LANGUAGE)

- Added two languages to the LANGUAGES SPOKEN BY STAFF AND PATIENTS table (Report Page 2) plus the ability to type-in other languages
- The Relevant HCAi report lists all languages spoken by 2021 patients. You check the boxes of languages spoken by at least 1% of your patients (or at least 100 patients)
- Information from languages spoken by staff does not come from the standard Relevant reports



OTHER CHANGES TO THE TABLES (SERVICES)

- Tables for COMMUNITY SERVICES and HEALTH SERVICES have additional services listed
- This information does not come from the standard Relevant reports



CHANGES TO THE RELEVANT HCAI REPORT SET

REPORTS ARE AVAILABLE FOR BOTH ECW AND NEXTGEN



UPDATED INSTRUCTIONS

- 2021 HCAi Report: Relevant Instructions
- File name: HCAi_2021_Relevant_Instructions_v1
- Posted today on Slack
- Will be posted (along with these slides and recording) on the RCHC website

2021 HCAi Report: Relevant Instructions

A number of custom reports are available to assist with 2021 HCAi reporting (formerly known as OSHPD reporting). These instructions describe the reports and how to configure them along with associated Transformers. This document was originally developed by Relevant for the 2019 reporting period but has been modified by RCHC for the 2021 reporting period.

Relevant Staging / Analytics Databases

The Analytics Database was used in the design of the reports as much as possible in order to leverage data that has already been mapped and to create reports that will work at RCHC member health centers using Nextgen or eCW. However, some reports contain data points that are not already in the Analytics Database or are mapped differently, so some of the reports are designed in the Staging Database. Reports based on the Staging Database have separate eCW and NextGen versions and you may need to tweak the names tables or fields to get them to work (depending on the unique set-up at your health center). **Please email us at support@relevant.healthcare if you have any questions or would like our assistance.**

All reports have Location parameters so you can view them based on the location of visits/patients in question. All reports also have measurement period parameters so they can be run for any calendar year, as long as the current mapping in your system accurately manages data from distant years.

Definition of an HCAi Encounter / Matching counts

Because it is important to have a consistent count across tables, the definition of an encounter is the same in all reports. The default approach is that an HCAi encounter is one that:

- Is a visit in Relevant -- it shows up in the Visits Data Element
- Has a claim associated with the visit -- it shows up in the Claims Data Element
- Is a UDS visit -- "uds_universe" is TRUE on the Visits Data Element
- Has a visit provider matching one of the HCAi Provider Categories (lines 75-86 of "Report Page 2" ¹)

Make sure that the total encounters match exactly on the following reports:

- Encounters by Provider / Contacts by Staff (HCAi 2021): just encounters, not contacts
- Encounters by Principal Diagnosis and Service

¹ Reference to the section titled "Report Page 2" in the document "ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021" by HCAi. A similar approach is used elsewhere to reference the forms titled as "Report Pages"



UPDATED INSTRUCTIONS

- There are no changes to the set-up of the reports or the Transformers. The text in the instructions is basically the same. Changes were made so that “2019” now reads “2021” and “OSHDPD” changed to “HCAi”
- The SQL code in some of the reports was changed. A description of these changes follows in this presentation.
- Note that the old term “OSHDPD” continues to be used in the SQL code, but it is synonymous with HCAi.

NEW REPORT SET NAME

Report Set Name	Reports
HCAi 2021	<ul style="list-style-type: none">• Encounters by Principal Diagnosis and Service (HCAi 2021) – eCW• Encounters by Principal Diagnosis and Service (HCAi 2021) – Nextgen• Encounters by Provider / Contacts by Staff (HCAi 2021) - Nextgen and eCW• Patient Coverage and Episodic Programs (HCAi 2021) - eCW• Patient Demographics (HCAi 2021) - Nextgen and eCW• Selected Procedures (HCAi 2021) - Nextgen and eCW

Note that the 2019 OSHPD Relevant report set will soon be deleted



REPORTS IN THE ANALYTICS DATABASE

- Patient Demographics (HCAi 2021)
- Encounters by Provider / Contacts by Staff (HCAi 2021)
- Selected Procedures (HCAi 2021)

BOLD = modified report

Both eCW and NextGen health centers can use the same reports from the Analytics Database



REPORTS IN THE STAGING DATABASE

- Patient Coverage and Episodic Programs (HCAi 2021)
- Encounters by Principal Diagnosis and Service (HCAi 2021)

BOLD = modified report

Separate reports exist for eCW and NextGen (but no coverage report for NextGen)

MAJOR CHANGES TO THE REPORTS (MEASUREMENT PERIOD)

- Measurement period parameters added: MP Start Date and MP End Date
- Therefore, the reports can be used year after year as long as there are no other changes to the tables
- The measurement period works best when it is a standard calendar year

MAJOR CHANGES TO THE REPORTS (TABLE CHANGES)

- The reports were also modified to reflect the changes to the four tables mentioned earlier
- For example:

Reports: Patient Demographics (HCAi 2021) - Nextgen and eCW ⓘ

Language (#)	Language (%)	Language other than English (%)	Race and Ethnicity	Federal Poverty Level	Age Category and Gender	Patient Coverage (Payer)
Patient Coverage (Group)	Patient Coverage (Group/Payer)	Season Agricultural and Migratory Workers (patients)	Season Agricultural and Migratory Workers (visits)			
Visit Count for Validation						



THE RIGHT RELEVANT REPORT FOR THE RIGHT HCAI SECTION

AND TIPS FOR REPORT PREPARATION



THE PRESENTATION FROM LAST YEAR IS AVAILABLE ON THE RCHC WEBSITE



OSHDPD PREPARATION IN RELEVANT FOR HEALTH CENTERS USING ECW

By Ben Fouts, Data Analyst, Redwood Community Health Coalition
Data Workgroup Webinar, January 12, 2021

REVIEW THE PRESENTATION FROM LAST YEAR

Just ignore references to “OSHPD” and “2020”

Topics:

- How to import a report from the RCHC aggregate to your instance
- How to use two RCHC Validation Reports to ensure that provider and insurance mapping is consistent between the UDS and HCAi reports
- How to add or change the mapping of providers and insurance in your system

REPORT PAGE 2

CLINIC SERVICES

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

Report Page 2 (continued)

FACILITY ID No. _____

FTEs AND ENCOUNTERS BY PRIMARY CARE PROVIDER (do not input any commas)

Line No.	Primary Care Providers	No. of Salaried FTEs* (1)	No. of Contract FTEs* (2)	No. of Volunteer FTEs* (3)	Total FTEs* (4)	No. of Encounters (5)
75	Physicians					
76	Physician Assistants					
77	Family Nurse Practitioners					
78	Certified Nurse Midwives					
79	Visiting Nurses					
80	Dentists					
81	Registered Dental Hygienists (Alternative Practice)					
82	Psychiatrists					
83	Clinical Psychologists					
84	Licensed Clinical Social Workers (LCSW)					
85	Other Providers Billable to Medi-Cal**					
86	Other Certified CPSP Providers Not Listed Above***					
87	Total					

* Report FTEs to two decimal places, e.g. 2.25. If less than 1, include leading zero, e.g. 0.25 instead of .25.

** Other Providers Billable to Medi-Cal – Included here are Chiropractors, Physical Therapists, Optometrists and any other professionals who are able to be reimbursed through the Medi-Cal program.

*** Comprehensive Perinatal Services Program – List all other professionals not listed above that are certified by the CPSP program to render services and can be reimbursed.

FTEs AND CONTACTS BY CLINICAL SUPPORT STAFF (do not input any commas)

Line No.	Clinical Support staff	No. of Salaried FTEs* (1)	No. of Contract FTEs* (2)	No. of Volunteer FTEs* (3)	Total FTEs* (4)	No. of Contacts (5)
90	Registered Dental Hygienists (Not Alternative Practice)					
91	Registered Dental Assistants					
92	Dental Assistants – Not Licensed					
93	Marriage and Family Therapists (MFT)					
94	Registered Nurses					
95	Licensed Vocational Nurses					
96	Medical Assistants – Not Licensed (1)					
97	Non-Licensed Patient Education Staff					
98	Substance Abuse Counselors (2)					
99	Billing Staff (3)					
100	Other Administrative Staff (4)					
101	Other Providers Not Listed Above					
102	Total					

* Report FTEs to two decimal places, e.g. 2.25. If less than 1, include leading zero, e.g. 0.25 instead of .25.

(1) Also includes Certified Medical Assistants.

(2) Does not include substance abuse counseling performed by providers listed elsewhere.

(3) Staff must spend 80% of time on billing.

(4) Includes Executive Directors, CFOs, Medical and Dental Records staff, Medical and Dental Receptionists, and other management staff.

- Relevant Report: “Encounters by Provider / Contacts by Staff (HCAi 2021)”
- No changes to this table

REPORT PAGE 3

PATIENT DEMOGRAPHICS

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

Report Page 3

FACILITY ID No. _____

Do not input any commas for the following tables.

RACE & ETHNICITY

Line No.	Race	Hispanic (1)	Non-Hispanic (2)	Unknown (3)	Total Patient (4)
1	White (include Hispanic)				
2	Black				
3	Native American / Alaskan Native				
4	Asian / Pacific Islander				
5	More Than One Race				
6	Other / Unknown				
7	Total Patients*				

FEDERAL POVERTY LEVEL

Line No.	Federal Poverty Level	No. of Patients (1)
20	Under 100%	
21	100 – 138%	
22	139 – 200%	
23	201 – 400%	
24	Above 400%	
25	Unknown	
26	Total Patients*	

AGE CATEGORY AND GENDER

Line No.	Age Category	Males (1)	Females (2)	Other/Unknown (3)	Total Patient (4)
30	Under 1 Year				
31	1 – 4 Years				
32	5 – 12 Years				
33	13 – 14 Years				
34	15 – 19 Years				
35	20 – 34 Years				
36	35 – 44 Years				
37	45 – 64 Years				
38	65 and Over				
39	Total Patients*				

- Relevant Report: “Patient Demographics (HCAi 2021)”
- There are changes to some of the tables in the demographics section (as mentioned earlier)

REPORT PAGE 3

PATIENT DEMOGRAPHICS

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

PATIENT COVERAGE

Line No.	Patient Coverage	No. of Patients (1)
45	Medicare	
46	Medicare – Managed Care	
47	Medi-Cal	
48	Medi-Cal – Managed Care	
49	County Indigent / CMSP / MISP	
50	Private Insurance	
51	Covered California	
52	Alameda Alliance for Health	
53	My Health LA (MHLA)	
54	PACE Program	
55	Self-Pay / Sliding Fee	
56	Free	
57	All Other Payers	
58	Total Patients*	

* Totals for these tables must agree

EPISODIC PROGRAMS

Line No.	Episodic Programs	No. of Patients (1)
60	BCCCP	
61	CHDP	
62	Family PACT	
63	Other County Programs	
64	Children's Treatment Program	
65	Other Payer – Covered by Grant	
66	Total Episodic Patients (Duplicated)	

CHILD HEALTH AND DISABILITY PREVENTION (CHDP)

Line No.		Number (1)
70	CHDP Assessments	

SEASONAL AGRICULTURAL AND MIGRATORY WORKERS

Line No.		Number (1)
75	Total Patients	
76	Total Encounters	

UTILIZATION-PCC (12/13/2021)

6

- Relevant supplemental report: “Patient Coverage and Episodic Programs (HCAi 2021)”
- Use this report in conjunction with data on the report “Patient Demographics (HCAi 2021)”

REPORT PAGE 4

ENCOUNTERS BY PRINCIPAL DIAGNOSIS

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

Report Page 4

FACILITY ID No. _____

Report the diagnosis (or symptom, condition, problem, or complaint) as the main reason for the encounter. Do not report the secondary diagnosis(es). There should be only one principal diagnosis for each encounter.

ENCOUNTERS BY PRINCIPAL DIAGNOSIS (do not input any commas)

Line No.	Classification of Diseases and/or Injuries for each Principal Diagnosis	ICD-10-CM Codes	No. of Encounters (1)
1	Infectious and Parasitic Diseases	A00 - B99	
2	Neoplasms	C00 - D49	
3	Endocrine, Nutritional, and Metabolic Diseases; and Immunity Disorders	E00 - E89	
4	Blood and Blood Forming Disorders	D50 - D89	
5	Mental, Behavioral, and Neurodevelopment Disorders	F01 - F99	
6	Nervous System and Sense Organs Diseases	G00 - H95	
7	Circulatory System Diseases	I00 - I99	
8	Respiratory System Diseases	J00 - J99	
9	Digestive System Diseases, excluding dental diagnoses	K20 - K95	
10	Genitourinary System Diseases	N00 - N99	
11	Pregnancy, Childbirth & the Puerperium	O00 - O9A	
12	Skin and Subcutaneous Tissue Diseases	L00 - L99	
13	Musculoskeletal System and Connective Tissue Diseases	M00 - M99	
14	Congenital Anomalies	Q00 - Q99	
15	Certain Conditions Originating in the Perinatal Period	P00 - P96	
16	Symptoms, Signs, and Ill-defined Conditions	R00 - R99	
17	Injury and Poisoning	S00 - T88	
18	Factors Influencing Health Status and Contact with Health Services	Z00 - Z29, Z32 - Z99	
19	Dental Diagnosis	K00 - K14	
20	Family Planning "Z" Codes	Z30 - Z31	
21	Other	All other codes not in Lines 1-20	
22	Total		

- Relevant Report: “Encounters by Principal Diagnosis and Service (HCAI 2021)”
- Table line numbers are the same, but some of the diagnosis codes used by the report have changed (mentioned earlier)

REPORT PAGE 5

ENCOUNTERS BY PRINCIPAL SERVICE ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

Report Page 5

FACILITY ID No. _____

Classify each encounter by the principal CPT code that was reported on the billing document for this encounter. Do not report secondary procedures. There should be one and only one procedure code reported for each encounter.

ENCOUNTERS BY PRINCIPAL SERVICE (do not input any commas)

Line No.	Principal Service	CPT Codes	No. of Encounters (1)
EVALUATION AND MANAGEMENT SERVICES			
1	Evaluation and Management (new patient)	99202 - 99205	
2	Evaluation and Management (established patient)	99211 - 99215	
3	Hospital Related Services	99217 - 99226, 99231 - 99239	
4	Consultations	99241 - 99245, 99444, 99451 - 99453	
5	Other Evaluation and Management Services	99291 - 99292, 99354 - 99360, 99415 - 99416, 99421 - 99423, 99450, 99455 - 99456, 99499	
6	Nursing Facility Related Services	99304 - 99318	
7	Case Management Services	99366 - 99368	
8	Preventive Medicine (infant, child, adolescent)	99381 - 99384, 99391 - 99394, 99460 - 99463	
9	Preventive Medicine (adult)	99385 - 99387, 99395 - 99397, 99429	
10	Counseling	99401 - 99404, 99406 - 99409, 99411 - 99412	
ALL OTHER SERVICES			
11	Anesthesia	00100 - 01999, 99100, 99116, 99135, 99140, 99151 - 99157	
12	Integumentary System	10030 - 19499	
13	Musculoskeletal System	20100 - 29999	
14	Respiratory System	30000 - 32999	
15	Cardiovascular System	33016 - 37799	
16	Hemic and Lymphatic System	38100 - 38999	
17	Mediastinum and Diaphragm System	39000 - 39599	
18	Digestive System	40490 - 49999	
19	Urinary System	50010 - 53899	
20	Male Genital System	54000 - 55920	
21	Intersex Surgery	55970, 55980	
22	Female Genital System	56405 - 58999	
23	Maternal Care and Delivery	59000 - 59899	
24	Endocrine System	60000 - 60699	
25	Nervous System	61000 - 64999	
26	Eye and Ocular Adnexa System	65091 - 68899	
27	Auditory System	69000 - 69979	
28	Radiology	70010 - 79999	
29	Pathology / Laboratory	80047 - 89356, 89398, 0001U-0284U	
30	Medicine - Special Services	90281 - 99082	
31	Family Planning "Z" Codes	"Z" codes	
32	Dental Encounters (CDT codes)	D0100 - D0999	
33	CPT Category III Codes	0042T - 0713T	
34	Other	All other codes not in Lines 1-33	
35	Total		

- Relevant Report: “Encounters by Principal Diagnosis and Service (HCAi 2021)”
- Table line numbers are the same, but some of the procedure codes used by the report have changed (mentioned earlier)

REPORT PAGE 5

SELECTED PROCEDURES

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

Report Page 5 (continued)

FACILITY ID No. _____

Report the number of procedures for each code (or range of codes) regardless of whether it is the principal or secondary procedure code.

SELECTED PROCEDURE CODES (do not input any commas)

Line No.	Selected Procedures	CPT Codes	No. of Procedures (1)
40	Mammogram	77053 - 77067	
45	HIV Testing	86689, 86701 - 86703, 87389 - 87391	
50	Pap Smear	88150 - 88153, 88164 - 88167, 88174 - 88175	
51	Contraceptive Management	11976, 11980, 55250, 55300, 55400, 57170, 58300 - 58301, 58600, 58605, 58611, 58615	
	VACCINATIONS		
52	DTap, DTP, Diphtheria and Tetanus	90389, 90696, 90702, 90714 - 90715, 90723	
53	Hemophilus Influenza B (Hib)	90644, 90647 - 90648	
60	Hepatitis A	90632 - 90634, 90636	
61	Hepatitis B	90739 - 90740, 90743 - 90744, 90746 - 90747	
62	HepB and Hib	90748	
63	Influenza Virus Vaccine	90630, 90653, 90662, 90664, 90666 - 90668, 90672 - 90673, 90682, 90685 - 90688, 90756	
64	Measles, Mumps and Rubella (MMR) and Varicella (MMRV)	90707, 90710, 90716	
65	Pneumococcal	90670, 90732	
66	Poliovirus	90713	
67	Varicella	90396, 90716	

- Relevant Report: “Selected Procedures (HCAi 2021)”
- No changes to this table

NOTE: PATIENT TOTALS FOR PARTICULAR TABLES MUST MATCH

PATIENT DEMOGRAPHICS

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

Report Page 3

FACILITY ID No. _____

Do not input any commas for the following tables.

RACE & ETHNICITY

Line No.	Race	Hispanic (1)	Non-Hispanic (2)	Unknown (3)	Total Patient (4)
1	White (include Hispanic)				
2	Black				
3	Native American / Alaskan Native				
4	Asian / Pacific Islander				
5	More Than One Race				
6	Other / Unknown				
7	Total Patients*				

FEDERAL POVERTY LEVEL

Line No.	Federal Poverty Level	No. of Patients (1)
20	Under 100%	
21	100 – 138%	
22	139 – 200%	
23	201 – 400%	
24	Above 400%	
25	Unknown	
26	Total Patients*	

AGE CATEGORY AND GENDER

Line No.	Age Category	Males (1)	Females (2)	Other/Unknown (3)	Total Patient (4)
30	Under 1 Year				
31	1 – 4 Years				
32	5 – 12 Years				
33	13 – 14 Years				
34	15 – 19 Years				
35	20 – 34 Years				
36	35 – 44 Years				
37	45 – 64 Years				
38	65 and Over				
39	Total Patients*				

- Unduplicated Patient “Totals” must equal each other
- Four tables in Report Page 3 (Patient Demographics) must equal each other.

PATIENT COVERAGE

Line No.	Patient Coverage	No. of Patients (1)
45	Medicare	
46	Medicare – Managed Care	
47	Medi-Cal	
48	Medi-Cal – Managed Care	
49	County Indigent / CMSP / MISP	
50	Private Insurance	
51	Covered California	
52	Alameda Alliance for Health	
53	My Health LA (MHLA)	
54	PACE Program	
55	Self-Pay / Sliding Fee	
56	Free	
57	All Other Payers	
58	Total Patients*	

* Totals for these tables must agree

NOTE: ENCOUNTER TOTALS FOR PARTICULAR TABLES MUST MATCH

- Encounter “Totals” must equal each other on tables in Report Pages 2, 4, 5, and 6

CLINIC SERVICES

ANNUAL UTILIZATION REPORT OF PRIMARY CARE CLINICS – 2021

Report Page 2 (continued)

FTEs AND ENCOUNTERS BY PRIMARY CARE PROVIDER (do not input any commas)

Line No.	Primary Care Providers	No. of Salaried FTEs* (1)	No. of Contract FTEs* (2)	No. of Volunteer FTEs* (3)	Total FTEs* (4)	No. of Encounters (5)
75	Physicians					
76	Physician Assistants					
77	Family Nurse Practitioners					
78	Certified Nurse Midwives					
79	Visiting Nurses					
80	Dentists					
81	Registered Dental Hygienists (Alternative Practice)					
82	Psychiatrists					
83	Clinical Psychologists					
84	Licensed Clinical Social Workers (LCSW)					
85	Other Providers Billable to Medi-Cal**					
86	Other Certified CPSP Providers Not Listed Above***					
87	Total					

Report Page 4

ENCOUNTERS BY PRINCIPAL DIAGNOSIS (do not input any commas)

Line No.	Classification of Diseases and/or Injuries for each Principal Diagnosis	ICD-10-CM Codes	No. of Encounters (1)
22	Total		

Report Page 5

ENCOUNTERS BY PRINCIPAL SERVICE (do not input any commas)

Line No.	Principal Service	CPT Codes	No. of Encounters (1)
35	Total		

Report Page 6 (continued)

REVENUE AND UTILIZATION BY PAYMENT SOURCE

Line No.		PAYMENT SOURCE								Total
		Breast Cancer Programs*	CHDP	Family PACT	PACE Program**	My Health LA (MHLA)	Alameda Alliance for Health (15)	Other County Programs	All Other Payers	
1	Encounters	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)

LOCATIONS

- You have to report data by licensed site
- The reports have a parameter for location
- Work with your financial department or executive staff to define the “locations” in your EHR that correspond to your licensed sites
- Be consistent with the locations each time you run the reports

Parameters

Location(s)

All

EXAMPLE OF SQL FOR ALL LOCATIONS USED IN 2021

List of your health center locations from the Analytics Database. Each should be grouped with a health center licensed facility (if your health center has more than one licensed facility).

```
SELECT DISTINCT locations.*  
FROM visits  
    INNER JOIN locations ON locations.id = visits.location_id  
WHERE visits.visit_date :: DATE BETWEEN '2021-01-01' AND '2021-12-31'  
    AND uds_universe  
ORDER BY locations.name
```



OTHER TIPS

- Reports work best when they are run for a single calendar year
- Do not try and run the reports in the RCHC Aggregate instance. Import them to your own instance and run them there
- For reports based on the staging database, you may need to slightly modify table names and field names



QUESTIONS?