

**Data Resource Guide:
Need for Assistance Worksheet**

**Health Resources and Services Administration
Bureau of Primary Health Care**

2012

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How to Use the Data Resource Guide

The Data Resource Guide (DRG) is a technical assistance tool for completing Form 9: Need for Assistance (NFA) Worksheet, to be used in conjunction with the NFA Worksheet Instructions made available in the New Access Point funding opportunity announcement. The NFA worksheet uses key health indicators to provide a snapshot of the barriers and health problems in the proposed service area and for the target population as they compare to national data and provides HRSA with a quantitative measure of need for each application. Applicants must adhere to the instructions in the funding opportunity announcement and the guidelines presented in this document when completing the form. Applicants will be required to certify the accuracy of the data reported in this worksheet.

In addition to providing the resources and data parameters for completing the NFA Worksheet, this guide includes considerations and instructions for using alternative data sources, instructions and considerations for data extrapolation, and a listing of data sources. It is organized into the following sections:

- **Using Indicators to Describe Need** provides an overview of how indicators are described in the guide.
- **Extrapolating Data to Describe Need** discusses when extrapolation is appropriate and acceptable methods for data extrapolation. Tools to support the techniques described this section are available on the NAP Technical Assistance web site at <http://www.hrsa.gov/grants/apply/assistance/nap>.
- **Data Resources for Indicators**
 - **Core Barriers** describes data sources for each of the indicators in the Core Barriers section. Applicants must report on three of the four indicators in this section.
 - **Core Health Indicators** describes data sources for the indicators that may be reported for each of the Core Health areas. Applicants must report one indicator for each of the six health areas (diabetes, cardiovascular disease, cancer, prenatal and perinatal health, child health, and behavioral health) in this section.
 - **Other Health and Access Indicators** describes data sources 13 other indicators. Applicants must report on two indicators from this section.
- **Additional Data Resources** provides a listing of data sources that may be useful in completing the NFA worksheet, including resources specific to homeless, agricultural workers, and public housing special populations.

Extrapolating Data to Describe Need

The NFA instructions specify the level of data to be reported for each measure based on application type (section 330 (e, g, h, or i)). When the data available through the recommended/available sources do not match the geographic units for the proposed service

area or the characteristics of the proposed target population, the available data may be extrapolated to develop estimates that describe the area and/or population to be served. For the purposes of the NFA, extrapolation is the process of using data that describes one population to estimate data for a comparable population, based on one or more common differentiating demographic characteristics. This process requires careful consideration of the nature of the measure and the available factors upon which it will be differentiated, as there is potential to introduce bias due to correlated factors that cannot be included in the extrapolation.

The requirements for extrapolation include:

- The measure is reported separately for different demographic groups.
- There are differences in the relative rates/percentages for the demographic groups (or the extrapolation will not alter the measure).
- The service area or target population can be quantified according to the same differentiating demographic characteristics.
- The demographic groups that the measure is reported on are conceptually similar in other characteristics to those groups in the service area or target population. For example, one would not want to extrapolate a diabetes rate using race if the black population in the service area was considerably younger than the overall black population for which the measure is reported.

Note that if portions of the service area fall into separate areas for which the measure is reported (e.g., different zip codes), the extrapolation must be done separately for each area for which the measure is reported, and then combined to show the overall rate for the area.

Table 1: Data Requirements for Extrapolation

Extrapolation Level	Appropriate When
Extrapolation to service area	Data for the measure is available at the county level but the applicant’s service area includes only a few Census tracts in the county. OR Applicant’s service area is split across two counties with different rates for the measure.
Extrapolation to target population	Data for the measure is available at the county level, but the applicant intends to serve primarily the low income population within the county. OR The applicant intends to serve a special population for which data is not normally reported.

Extrapolation Level	Appropriate When
Extrapolation to both service area and target population	Data for the measure is available at the county level but the applicant intends to target the low income population in a few census tracts within the county.

Applicants must document how any extrapolation was conducted and the data sources used. Specifically, applicants should note:

- The level of geography and population for the indicator data obtained.
- The differentiating factor(s) on which extrapolation was based (e.g., separate rates by income/poverty, age, gender).
- The source for the service area population data.
- The level of geography for the data reported.

If data are not available to conduct a valid extrapolation to the service area and/or target population within it, the applicant must use data pertaining to the immediately surrounding geographic area/population (e.g., if target population data are not available, service area data may be used; if county level data are available, state level data cannot be used).

The following example shows how extrapolation is typically performed and how it can impact the value of a measure.

Example: Extrapolating Core Barrier: Percent Population Uninsured, from County to Service Area

Extrapolation Requirements: Applicants must provide data response at service area level.

Scenario: Data for the measure (% uninsured) is available at the county level, but the applicants' service area includes a group of Census tracts within that county. Data must be reported for the total population in the service area. Extrapolating data for percent population uninsured will require the following steps.

Step 1: Calculating Percent of Population Uninsured by Federal Poverty Level (FPL) at County Level

Obtain data for the measure, at the most detailed available geography, broken out by the demographic characteristic(s) on which the measure will be extrapolated.

In this instance (see table below), data are available for the county containing the service area, and the extrapolation uses different ratios of the federal poverty level. The county has 293,685 residents of which 28,664 or 9.8% are uninsured. The rate of uninsurance is considerably higher for those in the lower income ranges.

Statistical data can be raw population data (as in Table 1, columns a and b) from which the measure must be calculated or a standard statistic as in column c below (i.e., $4,419/14,777=29.9\%$ uninsurance rate for those below poverty).

Table 2: Percent of Population Uninsured by Federal Poverty Level (FPL) at County Level

Demographic Differentiating Factor	Differentiated Measure at LARGER Geography (County)		
	a	b	c (= a / b)
<i>Federal Poverty Level (FPL)¹</i>	<i>Uninsured by FPL in County</i>	<i>Total Population by FPL in County</i>	<i>Percent Population Uninsured by FPL in County</i>
< 100% FPL	4,419	14,777	29.9%
100-199% FPL	7,004	28,173	24.9%
200 to 299% FPL	6,644	37,296	17.8%
300 to 399% FPL	4,756	46,751	10.2%
400 % FPL and over	5,841	166,688	3.5%
Totals	28,664	293,685	9.8%

Note: U.S. Census American Community Survey (ACS) data is the usual source for population counts by demographic characteristics. In this example, the uninsurance data also comes from the ACS, but that may not be the case for other measures.

Step 3: Calculating Percent of Population by FPL in Service Area

Obtain service area or target population data for the same demographic characteristics as the county data in Table 1.

The service area is comprised of several Census tracts and Table 2, Column d shows raw population counts that are the sum of the population count by FPL for the Census tracts in the service area. Column e shows the percentages by FPL within the service area (calculated from the sum of the numbers in column d). Table 2 shows that the service area has a total of 29,893 residents, of which 4,293 or 14.4% are below 100% FPL, 5,519 or 18.5% are between 100-200% FPL, etc.

Table 3: Percent of Population by FPL in Service Area

Demographic Differentiating Factor	TOTAL Population Within Service Area (Several Tracts within County)	
	d	e (= d / sum of d)
<i>Federal Poverty Level (FPL)</i>	<i>Population Count by FPL in Service Area</i>	<i>Percent of Population by FPL in Service Area</i>
< 100% FPL	4,293	14.4%
100-199% FPL	5,519	18.5%
200 to 299% FPL	5,042	16.9%
300 to 399% FPL	4,133	13.8%
400 % FPL and over	10,906	36.5%
Totals	29,893	

¹ In the data source (the U.S. Census American Community Survey), FPL is described as “the ratio of income to poverty” and is expressed as “Under 1.00 of poverty threshold, 1.00 to 1.99 of poverty threshold”, etc.

Step 3: Apply the demographic-specific rates obtained for the measure (% uninsured) from the county to the service area or target population to obtain an estimate of the measure for the service area or target population.

Multiply the percentage of uninsured by FPL at the county level (Table 1, column c) by the count of individuals in that poverty range in the service area (Table 2, column d). This will provide an estimate of the uninsured for each poverty range (see Column f in Table 3).

Table 4: Percent of the Service Area Population (Several Tracts within County) that is Uninsured

Demographic Differentiating Factor	Table 1, column c	Table 2, column d	column f (Table 1, column c * Table 2, column d)
<i>Federal Poverty Level (FPL)</i>	<i>Percent Population Uninsured by FPL in County</i>	<i>Population Count by FPL in Service Area</i>	<i>Number of Service Area Population Uninsured</i>
< 100% FPL	29.9%	4,293	1,284
100-199% FPL	24.9%	5,519	1,372
200 to 299% FPL	17.8%	5,042	898
300 to 399% FPL	10.2%	4,133	420
400 % FPL and over	3.5%	10,906	382
Totals	9.8%	29,893	4,357
Calculation of % Uninsured in Service Area		4,357 divided by 29,893 = 14.6%	

Add the estimate of uninsured across poverty ranges in column f to get the count of total uninsured in the service area (Table 3, column f, Total). Divide the count of total uninsured (Column f, Total) by the total population in the service area (Table 2, Column d, Total) to get the % population uninsured in the service area.

Because the service area/target tracts have a higher portion of people at the lower end of the income scale, and the uninsurance rate is higher among the lower income groups, the rate for percent uninsured in the targeted service area is estimated to be 14.6% compared to 9.8% for the county overall.

Note: The calculations for an extrapolation to a specific target population (or for an extrapolation that includes both service area and target population estimates) involves changing only the values for the population to which the extrapolation is applied (Columns d & e in the example above).

Table 5 below combines the 3 steps taken above.

Table 5: Steps 1, 2, and 3 Combined

Demographic Differentiating Factor	Differentiated Measure at LARGER Geography (County)			TOTAL Population Within Service Area (Several Tracts within County)		Service Area Estimates of Measure	
	a	b	c (= a / b)	d	e (= d / sum of d)	c * d	c * e
Poverty Ratio	<i>Uninsured by Poverty Ratio in County</i>	<i>Total Population by Poverty Ratio in County</i>	<i>Percent Population Uninsured by Poverty Ratio in County</i>	<i>Population Count by Poverty Ratio in Service Area Census Tracts</i>	<i>Percent of Population by Poverty Ratio in Service Area Census Tracts</i>	<i>Estimates of Uninsured Population</i>	<i>Estimate of Uninsured by Percent of Total Pop</i>
Under 1.00 of poverty threshold	4,419	14,777	29.9%	4,293	14.4%	1,284	4.3%
1.00 to 1.99 of poverty threshold	7,004	28,173	24.9%	5,519	18.5%	1,372	4.6%
2.00 to 2.99 of poverty threshold	6,644	37,296	17.8%	5,042	16.9%	898	3.0%
3.00 to 3.99 of poverty threshold	4,756	46,751	10.2%	4,133	13.8%	420	1.4%
4.00 to 4.99 of poverty threshold	5,841	166,688	3.5%	10,906	36.5%	382	1.3%
<i>Totals</i>	28,664	293,685	9.8%	29,893		4,357	14.6%

The example above shows the general approach to extrapolation. By considering the sources of information available and the nature of the population you are trying to develop estimates for, one can adapt this approach to a variety of situations. Data extrapolation tools to assist applicants in calculating extrapolated data are available at <http://www.hrsa.gov/grants/apply/assistance/nap>.

Data Resources

The format and definitions for data sources for each NFA measure/indicator are provided in the example below.

Format

Table 6: Indicator Name (for this example: Diabetes Prevalence)	
Primary Data Source	<p><u>FOR COUNTY LEVEL DATA</u> CDC National Diabetes Surveillance System http://apps.nccd.cdc.gov/DDT_STRS2/NationalDiabetesPrevalenceEstimates.aspx At the bottom of the page, select your state under County Level Estimates of Diagnosed Diabetes — State Maps and use your mouse to see the rate for your county/counties</p>
	<p><u>FOR METRO/MICROPOLITAN AREAS</u> BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SelMMSAPrevData.asp Select "SMART: City and County Database". Then Choose "Access Local Area Health Risk Data". Select MMSA on Drop Down List: →Category → Diabetes → "Have you ever been told by a doctor that you have diabetes"</p>
	<p><u>FOR STATE DATA</u> BRFSS http://www.cdc.gov/brfss/ Prevalence and Trend Data→ Category → Diabetes → "Have you ever been told by a doctor that you have diabetes"</p>

Table 6: Indicator Name (for this example: Diabetes Prevalence)	
Other Recommended Data Source(s)	Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/ County Health Rankings http://www.countyhealthrankings.org/#app/
Format	Percent
Notes	Must be age-adjusted

Definitions

Indicator: This is the name of the indicator on the Need for Assistance Worksheet.

Primary Data Source: This is the primary data source upon which the indicator scoring was developed. Where appropriate, the Data Resource Guide provides a hyperlink to the data source and the click path (or steps/selections) that applicants will use to access the specific data needed for the indicator.

Other Recommended Data Sources: These are additional data sources that may be used to get data for the indicator. Most often these data sources link to the primary data source but provide a more tailored or user-friendly interface.

Format: This indicates the format in which the indicator must be reported on the worksheet.

Notes: If applicable, this column provides important notes regarding indicator parameters that must be followed when pulling data from data sources.

Alternate Data Sources

Applicants are strongly encouraged to use the data sources outlined in the Data Resource Guide. Alternate data sources are permitted if they meet **all** of the following conditions:

1. The alternate data source is a **reliable and independent source** such as a state or local government agency, professional body, foundation, or other well-known organization using recognized, scientifically accepted data collection and/or analysis methods. Examples of such sources are local or state health departments. Data generated by providers (including UDS data) and unscientific surveys are **not** acceptable;
2. The alternate data source is publicly available; **and**
3. The data in the alternate data source is **collected and analyzed in the same way** as the suggested data source.

An example of an acceptable alternate data source would be Behavioral Risk Factor Surveillance Survey data gathered and published by the state health department, as long as the state survey question utilizes the same wording and response choices as the suggested source.

An example of an ***unacceptable*** alternate data source would be a community survey that asks respondents about health or income but does not define the question in the same way as the data source OR does not use a scientifically valid sampling methodology.

If an alternate data source is used, applicants must provide the following information in the NFA worksheet:

- Full citation for the data source (including an internet address where available)
- The parameters for the indicator as defined by the data source
- The year(s) to which the data apply
- The geographic service area or target population for the data

Note: In addition to the use of alternate data sources, applicants may use alternate measures for each of the six health areas in Section B of the NFA worksheet. Instructions for identifying acceptable measures are included in the Section B instructions below. Applicants may **not** use alternate measures for sections A (Core Barriers) or C (Other Health and Access Indicators).

Data Resources for Individual Indicators

Core Barriers

Applicants must respond to three of the four core barrier indicators. Applicants should report on the three indicators which best characterize the needs of the service area or target population.

Population to One FTE Primary Care Physician

Table 7: Population to One FTE Primary Care Physician	
Primary Data Source	<p>Primary Care Service Area (PCSA) & Zip Code Tabulation Area (ZCTA) level data (older but more geographically specific) http://pcsa.dartmouth.edu/pcsa_data.php</p> <p>OR</p> <p>Area Resource File (County Level Data) http://arf.hrsa.gov/index.htm (more recent data but at county level)</p>
Other Recommended Data Source(s)	<p>Health Professional Shortage Area data (HPSA) (HRSA geospatial warehouse) http://datawarehouse.hrsa.gov/default.aspx</p>
Format	Number of persons
Notes	<p>Applicants should report the number of persons per 1 FTE provider. This measure cannot be extrapolated. It is NOT permissible to use UDS or other practice-based sources of information. Patient data is not equivalent to community-level data.</p>

Dartmouth Primary Care Service Area (PCSA) and Zip Code Tabulation Area (ZCTA) Instructions

- Geographic Units: ZCTAs are Census defined units composed of one or more Zip Codes. PCSAs are composed of one or more ZCTAs. It will likely be best to use the ZCTA level data in order to best match your proposed service area. Use the “**Crosswalks**” section of the website and download the **ZIP code to ZCTA 2009** data file. Find the ZIP codes that constitute your service area to identify the ZCTAs in which they are located. Use this same group of ZCTAs for the following steps. Note that these ZCTAs reflect the boundaries established for the 2000 Census and cannot be used with data related to the new ZCTAs developed for 2010.
- Use the “**Populations**” section of the website to identify the total population in the ZCTAs that you identified for your service area. Download the **ZCTA Level 2008 Population Estimates** data file and use **PTOTPOP_08** field for the population portion of the calculation.
- Use the “**Clinicians**” section to identify AMA/AOA primary care physicians available for the ZCTA(s) that constitute your service area. Download the **ZCTA Level 2007 AMA/AOA Physicians** data file (AMA data is a year-end file so it is acceptable to relate

counts to population estimates from the following year). Add fields (**PG_NFEDDOC + PO_NFEDDOC**) for the ZCTAs in your service area to get the count of primary care providers.

- Divide the Population by the primary care providers to obtain the Population to Provider ratio for your service area: **PTOTPOP_08 / (PG_NFEDDOC + PO_NFEDDOC)**

Area Resource File (ARF) Instructions

- Download the MS Access interface version of the file at http://datawarehouse.hrsa.gov/datadownload/ARF/arf2011-2012_Access.zip. Unzip the file and run **ARFSetup.exe** to install the tool on your computer. This will place an icon on your desktop for the **2011-2012 ARF Access System** that will launch the program. Click NEXT at the bottom of the main window to get to the “Select Variables” window.
 - NOTE: The ARF site also provides a “Health Resources County Comparison” tool that should not be used as the source because the counts are not equivalent to those specified below.
- In the “Select **Variables**” window choose the “**Health Professionals**” tab. Select the following categories to find the variables listed below and move them into the Variables Selected column using the select arrow:
 - **Most Recent – Primary Care Physicians**
 - MD's, NF, Prim Care Pat Care Excl Hsp Rsdnts(2010)
 - DO's, NF, Prim Care Pat Care Excl Hsp Rsdnts(2010)
 - **Most Recent -- MDs by Specialty (Surgical) and Major Prof Activity**
 - MD's, NF, Ob-Gyn, Gen, PC, Off Based (2010)
 - **Most Recent -- DOs**
 - DO's, NF, Ob-Gyn, Gen, Total Pat Care (2010)
- In the “**Select Desired Counties**” window, choose the county or counties that cover your service area. Click OK to see your results. This table can be copied into a spreadsheet to sum the values. Close the table to return to the main menu.
- Select the “**Population**” tab and select the population variable below:
 - **Most Recent – Population**
 - **Census Population (2010)**
- Divide the population by the primary care provider counts from above to obtain the population to provider ratio for your service area.

Health Professional Shortage Area (HPSA) Data Instructions

HPSAs are designated by HRSA as having shortages of primary medical, dental, or mental health providers and may be geographic (county or service area), demographic (low income population), or institutional (comprehensive health center, federally qualified health center, or other public facility).

- HPSA data may be used only if the area designated as a HPSA fully encompasses the service area or has substantial overlap with the service area. HPSAs must be in “designated” status. Facility HPSAs cannot be used.

- HPSAs that are designated for low-income or other population specific designations may not be used to identify population to provider estimates unless the target population for the application is the same as that for which the HPSA is designated.
- In order to provide the most accurate scoring, National Health Service Corps (NHSC) and J-1 visa waiver providers should be counted (they are not counted in HPSA designations). Applicants should contact their Primary Care Office (PCO) or Primary Care Association (PCA) for assistance in determining the number of NHSC and J-1 visa providers. Lists of PCOs and PCAs can be accessed at <http://bphc.hrsa.gov/technicalassistance/partnerlinks>.

Percent of Population Below 200% FPL

Table 8: Percent of Population Below 200% FPL	
Primary Data Source	American Community Survey (U.S. Census Bureau) http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t Under "narrow your search" select C17002. Check the box in the row for 2010 ACS 5-year estimates Under Geographies, select the geography for which you need data, then complete the drop down boxes to select the specific geographies Click view or download to access the data
Other Recommended Data Source(s)	Special populations applicants ONLY may use reputable, publicly available local studies or data sources
Format	Percent
Notes	This measure specifies the use of 5-year ACS data for the Percent Below 200% of Poverty. For some areas, 1-year or 3-year data may be available. However, for consistency, the 5-year rate is to be used even in these circumstances.

- Applicants should use the most recent 5-year average available for the smallest geographic units within ACS that fit the boundaries of the service area (data is available at the MCD/county subdivision, ZCTA, and Census tract levels).
- To arrive at the percent of the population below 200% of poverty, add the estimated number of people below 200% of the FPL (rows 2-13), and divide by the total number of people for whom poverty status is determined (row 1).
- Alternate data sources are acceptable for special populations applicants, provided they meet the conditions discussed in the Alternate Data Sources section above, are documented on Form 9, and are no more than five years old.

Percent of Population Uninsured

Table 9: Percent of Population Uninsured	
Primary Data Source	<p>American Community Survey (U.S. Census Bureau) http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t</p> <p>Under “narrow your search” select DP03 – if no extrapolation is needed</p> <p>In many cases, extrapolation to the service area will be required; in these instances narrow your search to “C27016”</p> <p>In either case, check the box 2010 ACS 3-year estimates</p> <p>Under Geographies, select the geography for which you need data, then complete the drop down boxes to select the specific geographies</p> <p>Click view or download to access the data</p>
Other Recommended Data Source(s)	Special populations applicants ONLY may use reputable, publicly available local studies or data sources
Format	Percent
Notes	This measure specifies the use of 3-year ACS data for the percent uninsured. For some areas, 1-year data may be available. However, for consistency, the 3-year rate is to be used even in these circumstances.

- Applicants should use the most recent 3-year data available for the geographic unit within ACS. *Note: there are some counties (those with population <20,000) for which the 3-year data is not available. These areas will have to use the 3-year estimate for the next largest geography (the state in some cases). Extrapolation to local areas will often be necessary and will be based on 5-year data for those below 200% of poverty as noted below.*
- Within the DP03 file, find the “Health Insurance Coverage” section, and the “No health insurance coverage” line, and report the value in the Percent (%) column or, if combining several units of geography, divide the sum of “No Health Insurance Coverage” by the sum of “Civilian noninstitutionalized population” reported 3 lines above.
- While uninsurance data is not yet available at the most local geographies (MCD, Subdivision, Tract), the data can readily be extrapolated to the local level using the 5-year estimates of population by poverty ratio. The extrapolation example earlier in this document demonstrates this process. The extrapolation would involve applying the 3-year ACS uninsurance rates by poverty ratio to 5-year estimates of the uninsured population. Within the **C27016** file, sum the “No Health Insurance Coverage” lines for the 3 age ranges within each poverty ratio and apply the data to the population by poverty ratio obtained for the measure above; however, here you will use all poverty ratio ranges, not just those below 200% of poverty.
- Alternate data sources are acceptable for special populations applicants, provided they meet the conditions discussed in the Alternate Data Sources section above, are documented on Form 9, and are no more than five years old.

Distance (miles) or Travel Time (minutes) to the Nearest Primary Care Provider Accepting New Medicaid Patients and Uninsured Patients

Table 10: Distance (miles) or Travel Time (minutes) to the Nearest Primary Care Provider Accepting New Medicaid Patients and Uninsured Patients	
Primary Data Source	<p>Google maps for drive times and public transportation times</p> <p>UDS Mapper is the best map tool for identifying the nearest Federally funded primary care providers</p> <p>UDS Mapper: http://www.udsmapper.org (you will need to register for access)</p> <p>Turn on the following layers under the “Optional” tab in the “Map Elements” box</p> <ul style="list-style-type: none"> ▪ HCP Grantee Service Access Points <ul style="list-style-type: none"> ▪ FQHC Look-Alikes ▪ Rural Health Clinics ▪ NHSC Sites <p>Hover the mouse over each point shown to see the site address. You will need to use Google maps to determine the time/distance to each site.</p> <p>Do not simply report the distance to the closest site found. You may need to call each site to determine if they are accepting new Medicaid and uninsured patients on a sliding fee basis.</p>
Other Recommended Data Source(s)	Special populations applicants ONLY may use reputable, publicly available local studies or data sources
Format	Number
Notes	See below

- Distance should be measured from the address of the proposed service site to the nearest provider meeting the criteria below. If multiple sites are proposed, distance should be the average of the distance of the proposed sites from the nearest provider meeting the criteria below. All providers meeting the following criteria should be considered when identifying the nearest available provider:
 - Health Center Program (HCP) look-alikes and grantee service sites (including other sites operated by the applicant), and Rural Health Centers.
 - To be counted as the nearest provider, the provider must be:
 - Currently accepting new Medicaid **and** uninsured patients, and providing services to uninsured patients on a sliding fee scale, or at no cost.
 - Providing comprehensive primary care services (whether provided by a physician or other provider within the scope of their license, such as a nurse practitioner)
- Distance by public transportation may be used when 1) at least 20% of the target population lives below poverty, **and** 2) 30% of the target population uses public transportation as the main source of transportation to work. This data is available through ACS
 at: <http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t>.
 Search for GCT0804 in “narrow your search”, select the row labeled “PERCENT OF WORKERS 16 YEARS AND OVER WHO TRAVELED TO WORK BY PUBLIC

TRANSPORTATION (EXCLUDING TAXICAB) - State --," with the geography most aligned with the service area, then under "Geographies" select "State" as the geographic type, and then select your state from the dropdown list. Click "view" or "download" at the top of the screen. A list of geographies throughout the state will be generated, with the percent of the population using public transportation indicated for each.

- Alternate data sources are acceptable for special populations applicants, provided they meet the conditions discussed in the Alternate Data Sources section above, are documented on Form 9, and are no more than five years old.

Core Health Indicators

Applicants must report on one indicator for each of the core health categories. Applicants may choose any of the listed indicators for each category, or they may provide an alternative related to the category in the "other" column. Note that alternative indicators are allowed a maximum possible score of 4 points (as for the national median benchmarks), and additional points are not available for exceeding severe benchmarks.

Other Health Indicators

"Other" indicators must be reported from a reliable and independent source such as a state or local government agency, professional body, foundation, or other well-known organization using recognized, scientifically accepted data collection and/or analysis methods. Data generated by providers (including UDS data) and unscientific surveys are **not** allowable.

If an alternate indicator is used, applicants must provide the following information in the NFA worksheet:

- The parameters (definition) for the indicator as defined by the data source
- The proposed benchmark to be used, including the data unit and whether the benchmark is less than or greater than the data response
- The data response and year to which the data apply (if the data apply to a period of more than one year, provide the most recent year)
- Full citation for the data source (including an internet address where available) and the rationale for using the alternative indicator
- Under methodology utilized, the source of the benchmark and explanation of extrapolation, if applicable
- The geographic service area or target population for the data

Data Sources for Health Indicators

Diabetes

Table 11: Diabetes Prevalence	
Primary Data Source	<p style="text-align: center;"><u>FOR COUNTY LEVEL DATA</u></p> <p>Centers for Disease Control (CDC) National Diabetes Surveillance System http://apps.nccd.cdc.gov/DDT_STRS2/NationalDiabetesPrevalenceEstimates.aspx</p> <p style="text-align: center;">At the bottom of the page, select your state under County Level Estimates of Diagnosed Diabetes — State Maps and use your mouse to see the rate for your county/counties</p> <p style="text-align: center;"><u>FOR METRO/MICROPOLITAN AREAS</u></p> <p>Behavioral Risk Factor Surveillance System (BRFSS) http://apps.nccd.cdc.gov/BRFSS-SMART/SelMMSAPrevData.asp Select “SMART: City and County Database” then Choose “Access Local Area Health Risk Data” Select MMSA on Drop Down List: → Select Category: Diabetes → “Have you ever been told by a doctor that you have diabetes”</p> <p style="text-align: center;"><u>FOR STATE DATA</u></p> <p>BRFSS http://www.cdc.gov/brfss/ → Select Prevalence and Trends Database → Select Category: Diabetes → “Have you ever been told by a doctor that you have diabetes”</p>
Other Recommended Data Source(s)	<p>Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/</p> <p>County Health Rankings http://www.countyhealthrankings.org/#app/</p>
Format	Percent
Notes	<p>Must be age-adjusted</p> <p>State level data is available by gender, age, race, income and education</p>

Table 12: Adult Obesity Prevalence

Table 12: Adult Obesity Prevalence	
Primary Data Source	<p style="text-align: center;"><u>FOR COUNTY LEVEL DATA</u></p> <p>BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SelMMSAPrevData.asp</p> <ul style="list-style-type: none"> → Select your area from MMSA Drop Down List → Select Category: Overweight and Obesity (BMI) → Select “Weight Classification by Body Mass Index” <p style="text-align: center;"><u>FOR STATE DATA</u></p> <p>BRFSS http://www.cdc.gov/brfss/</p> <ul style="list-style-type: none"> → Select Prevalence and Trends Database → Select Category: Overweight and Obesity (BMI) → Select “Weight Classification by Body Mass Index”
Other Recommended Data Source(s)	<p style="text-align: center;">CDC National Diabetes Surveillance System http://www.cdc.gov/diabetes/statistics/lea/fig1.htm</p> <p style="text-align: center;">Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/</p> <p style="text-align: center;">County Health Rankings http://www.countyhealthrankings.org/#app/</p>
Format	Percent
Notes	<p style="text-align: center;">State level data is available by gender, age, race, income and education Obesity is defined as a body mass index (BMI) equal to or greater than 30, based on weight and height</p>

Table 13: Diabetes Mortality Rate	
Primary Data Source	<p style="text-align: center;">CDC WONDER http://wonder.cdc.gov</p> <ul style="list-style-type: none"> → Select “Detailed Mortality” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select location” choose “States” and then select your state → Under “3. Select demographics” choose five-year or ten-year age groups. Select “all ages” → Select any other desired demographics → Use default values under sections 4 & 5 → Under “6. Select cause of death” choose “ICD-10 113 cause list” and in list select “Diabetes mellitus (E10-E14)” → Under “7. Select rate options” select “100,000” under “Calculate Rates Per” and select “Use standard age-adjusted rates” under “Age-Adjusted Rate Options” → Use Default values under section 8
Other Recommended Data Source(s)	State and Local Health Departments

Table 13: Diabetes Mortality Rate	
Format	Rate per 100,000
Notes	<p>Must be age-adjusted</p> <p>Diabetes mortality rate is number of deaths per 100,000 population reported due to diabetes as the underlying cause or as one of multiple causes of death (ICD-10 codes E10-E14)</p> <p>For less populated geographies, it may be necessary to choose 10-year data groups for data to be available</p> <p>Data is available at some geographies by race, ethnicity, age, and gender</p>

Table 14: Diabetic Medicare Enrollees Not Receiving a Hemoglobin A1c (HbA1c) Test	
Primary Data Source	<p>Dartmouth Atlas of Health Care http://www.healthindicators.gov/Indicators/HbA1c-test-diabetic-Medicare-beneficiaries-65-75-years-percent_29/Profile</p> <p>Click Data tab → Click on "by Geography" link in "Switch to: by Geography"</p> <p>→ Choose state in "Geography" drop down box → Find rate for County</p> <p>→ Subtract rate from 100, and report result</p>
Other Recommended Data Source(s)	<p>County Health Rankings</p> <p>http://www.countyhealthrankings.org/</p>
Format	Percent

Table 15: Adults with No Physical Activity in Past 30 Days	
Primary Data Source	<p>CDC National Diabetes Surveillance System</p> <p>http://apps.nccd.cdc.gov/DDT_STRS2/CountyPrevalenceData.aspx</p> <p>Under Indicator choose "Physical Inactivity" → Choose desired state under "State"</p> <p>→ Use default year → Choose "Percent of Adults" under data type → Click "GO"</p> <p>→ Scroll down for County level percentages</p>
Other Recommended Data Source(s)	<p>Community Health Status Indicators (CHSI)</p> <p>http://www.communityhealth.hhs.gov/</p> <p>County Health Rankings</p> <p>http://www.countyhealthrankings.org/</p>
Format	Percent

Cardiovascular Disease

Table 16: Hypertension Hospital Admission	
Primary Data Source	Health Care Cost and Utilization Project (HCUP) for national rates by age and gender http://hcupnet.ahrq.gov/HCUPnet.jsp?Id=EFF272FAADE64853&Form=MAINSEL&JS=Y&Action=%3E%3ENext%3E%3E&MAINSEL=AHRQ%20Quality%20Indicators Scroll down and select AHRQ Quality Indicators → QI Summary Tables → Indicator Selection: Detailed statistics (select most recent year) → Hypertension
Other Recommended Data Source(s)	State Data Sources for State and County Data
Format	Rate per 100,000
Notes	Indicator should be calculated using the Agency for Healthcare Research and Quality PQI Methodology for patients 18 and older. The measure should be adjusted for patient and hospital factors (per the AHRQ methodology). Crude hypertension admission rates should not be used. National rate available by age and gender

Table 17: Congestive Heart Failure Hospital Admission	
Primary Data Source	State Data Sources for State and County Data HCUP for national rates by age and gender http://hcupnet.ahrq.gov/HCUPnet.jsp?Id=EFF272FAADE64853&Form=MAINSEL&JS=Y&Action=%3E%3ENext%3E%3E&MAINSEL=AHRQ%20Quality%20Indicators Scroll down and select AHRQ Quality Indicators → QI Summary Tables → Indicator Selection: Detailed statistics (select most recent year) → Congestive heart failure
Other Recommended Data Source(s)	N/A
Format	Rate per 100,000
Notes	Indicator should be calculated using the Agency for Healthcare Research and Quality PQI Methodology for patients 18 and older. The measure should be adjusted for patient and hospital factors (per the AHRQ methodology). Crude congestive heart failure admission rates should not be used. National rate available by age and gender

Table 18: Morality from Diseases of the Heart	
Primary Data Source	<p>CDC WONDER http://wonder.cdc.gov</p> <ul style="list-style-type: none"> → Select “Detailed Mortality” → Under “1. Organize table layout” choose group results by county (and any other demographics required) <ul style="list-style-type: none"> → Under “2. Select location” choose “States” and then select your state → Under “3. Select demographics“ choose “ten-year age groups” and any other desired demographics <ul style="list-style-type: none"> → Use default values under sections 4 & 5 → Under “6. Select cause of death” choose “ICD-10 113 cause list” and in list select “Diseases of heart (100-109, 111,113,120-151)” → Under “7. Select rate options” select “100,000” under “Calculate Rates Per” and select “Use standard age-adjusted rates” under “Age-Adjusted Rate Options” <ul style="list-style-type: none"> → Use Default values under section 8
Other Recommended Data Source(s)	<p>Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/</p> <p>Health Indicators Warehouse (HIW) http://healthindicators.gov</p>
Format	Rate per 100,000
Notes	<p>Must be age-adjusted</p> <p>Total number of deaths per 100,000 reported as due to heart disease (includes ICD-10 codes 100-109, 111, 113, and 120-151)</p> <p>For less populated geographies, it may be necessary to choose 10-year data groups for data to be available</p>

Table 19: Adults Reporting Diagnosis of High Blood Pressure	
Primary Data Source	<p><u>FOR COUNTY LEVEL DATA</u></p> <p>BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SeIMMSAPrevData.asp</p> <ul style="list-style-type: none"> → Select your area from MMSA Drop Down List → Select Category: Hypertension Awareness → Select “Adults who have been told they have high blood pressure” <p><u>FOR STATE DATA</u></p> <p>BRFSS http://www.cdc.gov/brfss/</p> <ul style="list-style-type: none"> → Select Prevalence and Trends Database → Select Category: Hypertension Awareness → Select “Adults who have been told they have high blood pressure”
Other Recommended Data Source(s)	<p>Community Health Status Indicators (CHSI) for County Data (some counties) http://www.communityhealth.hhs.gov/</p> <p>Choose State → choose County → choose Risk Factors for Premature Death</p>
Format	Percent

Table 19: Adults Reporting Diagnosis of High Blood Pressure

Notes	Data available odd years Data at national and state geographies is available by race/ethnicity, gender, age, current insurance status, income, and education
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Table 20: No Cholesterol Screening

Primary Data Source	<p style="text-align: center;"><u>FOR COUNTY LEVEL DATA</u></p> <p>BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SelMMSAPrevData.asp → Select area from MMSA Drop Down List → Select Category: Cholesterol Awareness → “Adults who have had their blood cholesterol checked within the last five years”</p> <p style="text-align: center;"><u>FOR STATE DATA</u></p> <p>BRFSS http://www.cdc.gov/brfss/ → Select Prevalence and Trends Database → Select Category: Cholesterol Awareness → “Adults who have had their blood cholesterol checked within the last five years”</p>
Other Recommended Data Source(s)	State BRFSS (Behavioral Risk Factor Surveillance Survey) Offices
Format	Percent
Notes	No screening in past 5 years; Data available odd years Data at national and state geographies is available by race/ethnicity, gender, age, current insurance status, income, and education Data for this indicator is not readily available at county or sub-county geographies. Applicants may extrapolate state rates to the service area or target population based on demographic characteristics, to the extent feasible.

Table 21: Cerebrovascular Disease Mortality

Primary Data Source	<p style="text-align: center;">CDC WONDER http://wonder.cdc.gov</p> <p style="text-align: center;">→ Select “Detailed Mortality”</p> <p>→ Under “1. Organize table layout” choose group results by county (and any other demographics required)</p> <p style="padding-left: 20px;">→ Under “2. Select location” choose “States” and then select your state</p> <p>→ Under “3. Select demographics” choose “ten-year age groups” and any other desired demographics</p> <p style="padding-left: 20px;">→ Use default values under sections 4 & 5</p> <p>→ Under “6. Select cause of death” choose “ICD-10 113 cause list” and in list “Cerebrovascular diseases (160-169)”</p> <p>→ Under “7. Select rate options” select “100,000” under “Calculate Rates Per” and select “Use standard age-adjusted rates” under “Age-Adjusted Rate Options”</p> <p style="padding-left: 20px;">→ Use Default values under section 8</p>
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Table 21: Cerebrovascular Disease Mortality	
Other Recommended Data Source(s)	Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/ Area Resource File (ARF) http://arf.hrsa.gov/index.htm
Format	Rate per 100,000
Notes	Must be age-adjusted Total number of deaths per 100,000 reported as due to cerebrovascular disease (includes ICD-10 codes 160-169) For less populated geographies it may be necessary to choose 10-year data groups for data to be available

Cancer

Table 22: Women with No Pap Test in the Past 3 years	
Primary Data Source	<p><u>FOR COUNTY LEVEL DATA</u></p> <p>BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SelMMSAPrevData.asp → Select area from MMSA Drop Down List → Select Category: Women’s Health → “Women aged 18+ who have had a pap test within the past three years” → report the % in the “No” column</p> <p><u>FOR STATE DATA</u></p> <p>BRFSS http://www.cdc.gov/brfss/ → Select Prevalence and Trends Database → Select Category: Women’s Health → “Women aged 18+ who have had a pap test within the past three years” → report the % in the “No” column</p>
Other Recommended Data Source(s)	Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/ Kaiser State Health Facts http://www.statehealthfacts.org/index.jsp
Format	Percent
Notes	Women 18+, No Pap Test in past 3 years Data at national and state geographies is available by race/ethnicity, gender, age, current insurance status, income, and education Other recommended data sources include County-level data

Table 23: Women with No Mammogram in the Past 2 Years

<p>Primary Data Source</p>	<p style="text-align: center;"><u>FOR COUNTY LEVEL DATA</u></p> <p>BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SelMMSAPrevData.asp → Select your area from MMSA Drop Down List → Select Category: Women’s Health → “Women aged 50+ who have had a mammogram within the past two years” → report the % in the “No” column</p> <p style="text-align: center;"><u>FOR STATE DATA</u></p> <p>BRFSS http://www.cdc.gov/brfss/ → Select Prevalence and Trends Database → Select Category: Women’s Health → “Women aged 50+ who have had a mammogram within the past two years” → report the % in the “No” column</p>
<p>Other Recommended Data Source(s)</p>	<p>Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/ Kaiser State Health Facts http://www.statehealthfacts.org/index.jsp</p>
<p>Format</p>	<p style="text-align: center;">Percent</p>
<p>Notes</p>	<p style="text-align: center;">Women 50+, No Mammogram in past 2 years Data at national and state geographies is available by race/ethnicity, gender, age, current insurance status, income, and education Other recommended data sources include County-level data</p>

Table 24: Adults with No Fecal Occult Blood Test (FOBT) within the Past 2 Years

<p>Primary Data Source</p>	<p style="text-align: center;"><u>FOR COUNTY LEVEL DATA</u></p> <p>BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SelMMSAPrevData.asp → Select your area from MMSA Drop Down List → Select Category: Colorectal Cancer Screening → “Adults aged 50+ who have had a blood stool test within the past two years” → report the % in the “No” column</p> <p style="text-align: center;"><u>FOR STATE DATA</u></p> <p>BRFSS http://www.cdc.gov/brfss/ → Select Prevalence and Trends Database → Select Category: Colorectal Cancer Screening → “Adults aged 50+ who have had a blood stool test within the past two years” → report the % in the “No” column</p>
<p>Other Recommended Data Source(s)</p>	<p style="text-align: center;">N/A</p>
<p>Format</p>	<p style="text-align: center;">Percent</p>

Table 24: Adults with No Fecal Occult Blood Test (FOBT) within the Past 2 Years	
Notes	<p>Adults 50+, No FOBT in past 2 years</p> <p>Data at national and state geographies is available by race/ethnicity, gender, age, current insurance status, income, and education</p> <p>Data for this indicator is not readily available at county or sub-county geographies</p> <p>Applicants may extrapolate state rates to the service area or target population based on demographic characteristics, to the extent feasible</p>

Table 25: Adults who Currently Smoke Cigarettes	
Primary Data Source	<p>FOR COUNTY LEVEL DATA</p> <p>BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SelMMSAPrevData.asp</p> <p>→ Select your area from MMSA Drop Down List → Select Category: Tobacco Use</p> <p>→ “Adults who are current smokers”</p> <p>FOR STATE DATA</p> <p>BRFSS http://www.cdc.gov/brfss/</p> <p>→ Select Prevalence and Trends Database → Select Category: Tobacco Use</p> <p>→ “Adults who are current smokers”</p>
Other Recommended Data Source(s)	<p>Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/</p> <p>County Health Rankings http://www.countyhealthrankings.org/</p>
Format	Percent
Notes	<p>Data at national and state geographies is available by race/ethnicity, gender, age, current insurance status, income, and education</p> <p>Other recommended data sources include County-level data</p>

Table 26: Breast Cancer Mortality among Females	
Primary Data Source	<p>CDC WONDER http://wonder.cdc.gov</p> <p>→ Select “Detailed Mortality”</p> <p>→ Under “1. Organize table layout” choose group results by county (and any other demographics required)</p> <p>→ Under “2. Select location” choose “States” and then select your state</p> <p>→ Under “3. Select Demographics” choose five-year or ten-year age groups</p> <p>Select “all ages” and select any other desired demographics</p> <p>→ Use default values under sections 4 & 5</p> <p>→ Under “6. Select cause of death” choose “ICD-10 113 cause list” and in list select “Malignant neoplasm of breast (C50)”</p> <p>→ Under “7. Select rate options” select “100,000” under “Calculate Rates Per” and select “Use standard age-adjusted rates” under “Age-Adjusted Rate Options”</p> <p>→ Use Default values under section 8</p>

Table 26: Breast Cancer Mortality among Females	
Other Recommended Data Source(s)	Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/
Format	Rate per 100,000
Notes	Must be age-adjusted For less populated geographies, it may be necessary to choose 10-year data groups for data to be available Data is available at some geographies by race, ethnicity, age, and gender

Table 27: Colorectal Cancer Mortality	
Primary Data Source	CDC WONDER http://wonder.cdc.gov → Select “Detailed Mortality” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select location” choose “States” and then select your state → Under “3. Select Demographics” choose five-year or ten-year age groups Select “all ages” and select any other desired demographics → Use default values under sections 4 & 5 → Under “6. Select cause of death” choose “ICD-10 113 cause list” and in list select “Malignant neoplasms of colon, rectum and anus (C18-21)” → Under “7. Select rate options” select “100,000” under “Calculate Rates Per” and select “Use standard age-adjusted rates” under “Age-Adjusted Rate Options” → Use default values under section 8
Other Recommended Data Source(s)	Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/
Format	Rate per 100,000
Notes	Must be age-adjusted For less populated geographies, it may be necessary to choose 10-year data groups for data to be available Data is available at some geographies by race, ethnicity, age, gender, and other demographic factors

Prenatal and Perinatal Health

Table 28: Low Birth Weight	
Primary Data Source	County Health Rankings http://www.countyhealthrankings.org/#app/ Select county → Look under Health Outcomes, Morbidity, low birth weight → Report the % in the county column

Table 28: Low Birth Weight	
Other Recommended Data Source(s)	CDC National Vital Statistics System (NVSS) http://www.cdc.gov/nchs/nvss.htm Area Resource File (ARF) http://arf.hrsa.gov/index.htm CDC Wonder http://wonder.cdc.gov Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/ State Health Departments
Format	Percent
Notes	Low birth weight = less than 2500 grams, 5 year average Data available for ranges greater than five years is acceptable

Table 29: Infant Mortality Rate	
Primary Data Source	CDC WONDER http://wonder.cdc.gov → Select “Infant Deaths (Linked Birth/Infant Death Records)” → Select “Linked Birth/Infant Death Records for 2003-2006 with ICD 10 codes” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select maternal residence” choose “States” and then select your state → Use default values under sections 3, 4, & 5 → Under “6. Select infant characteristics” choose “All Ages” and “All Years” → Use default values under section 7 Select “Send” and report the number in the “Death Rate Per 1,000” column
Other Recommended Data Source(s)	CDC National Vital Statistics System (NVSS) http://www.cdc.gov/nchs/nvss.htm State Health Departments
Format	Rate per 1,000
Notes	Data available for a 4-year rate or more is acceptable

Table 30: Births to Teenage Mothers

<p>Primary Data Source</p>	<p>CDC WONDER http://wonder.cdc.gov → Select “Births” → Select “Natality for 2007-2009” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select maternal residence” choose “States” and then select your state → Under “3. Select other maternal characteristics” select “15-19 years” under “Age of Mother” and select any other desired demographics → Under “4. Select birth characteristics” select “All Years” under “Year” → Use default values under sections 5 & 6 → Select “Send” and note the number of births for 15-19 year olds for the desired county → Repeat, choosing “All Ages” under “Age of Mother” in →“3. Select other maternal characteristics” → Select “Send” and note the number of births for all ages → Divide the number of births for 15-19 year olds by the number of all births to obtain the percentage</p>
<p>Other Recommended Data Source(s)</p>	<p>CDC National Vital Statistics System (NVSS) http://www.cdc.gov/nchs/nvss.htm County Health Rankings http://www.countyhealthrankings.org/#app/ State Health Departments</p>
<p>Format</p>	<p>Percent</p>
<p>Notes</p>	<p>Ages 15-19, percent of all births Data is available at some geographies by race, ethnicity, age, gender, and other demographic factors For less populated geographies, it may be necessary to choose 10-year data groups for data to be available</p>

Table 31: Late Entry into Prenatal Care

<p>Primary Data Source</p>	<p>CDC WONDER http://wonder.cdc.gov → Select “Births” → Select “Natality for 2007-2009” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select maternal residence” choose “States” and then select your state → Under “3. Select other maternal characteristics” use default values → Under “4. Select birth characteristics” select “No Prenatal Care” and “4th month” through “10th month” under “Month Prenatal Care Began” → Use default values under sections 5 & 6 → Select “Send” and note the number of births for the desired county → Repeat, choosing “All Months” under “Month Prenatal Care Began” in → “4. Select birth characteristics” → Select “Send” and note the number of births → Divide the number of late entry into prenatal care by the number of all births to obtain the percentage</p>
<p>Other Recommended Data Source(s)</p>	<p>CDC National Vital Statistics System (NVSS) http://www.cdc.gov/nchs/nvss.htm State Health Departments</p>
<p>Format</p>	<p>Percent</p>
<p>Notes</p>	<p>Entry after first trimester, percent of all births Data is available at some geographies by race, ethnicity, age, gender, and other demographic factors For less populated geographies, it may be necessary to choose 10-year data groups for data to be available</p>

Table 32: Cigarette Use During Pregnancy

<p>Primary Data Source</p>	<p>CDC WONDER http://wonder.cdc.gov → Select “Births” → Select “Natality for 2007-2009” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select maternal residence” choose “States” and then select your state → Use default values under sections 3 & 4 → Under “5. Select maternal risk factors” select “Yes” under “Tobacco Use” → Use default values under section 6 → Select “Send” and note the number of births for tobacco users for the desired county → Repeat, choosing “All Values” under “Tobacco Use” in → “5. Select maternal risk factors” → Select “Send” and note the number of births → Divide the number of births for tobacco users by the number of all births to obtain the percentage</p>
<p>Other Recommended Data Source(s)</p>	<p>CDC National Vital Statistics System (NVSS) http://www.cdc.gov/nchs/nvss.htm State Health Departments</p>
<p>Format</p>	<p>Percent</p>
<p>Notes</p>	<p>Percent of all Pregnancies Data is available at some geographies by race, ethnicity, age, gender, and other demographic factors For less populated geographies, it may be necessary to choose 10-year data groups for data to be available</p>

Table 33: Preterm Births

<p>Primary Data Source</p>	<p>CDC WONDER http://wonder.cdc.gov → Select “Births” → Select “Natality for 2007-2009” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select maternal residence” choose “States” and then select your state → Under “3. Select other maternal characteristics” use default values → Under “4. Select birth characteristics” select “Under 20 weeks,” “20-27 weeks,” “28-31 weeks,” “32-33 weeks,” and “34-36 weeks” under “Gestational Age Group 2” → Use default values under sections 5 & 6 → Select “Send” and note the number of births for the desired county → Repeat, choosing “All Weeks” under “Gestational Age Group 2” in → “4. Select birth characteristics” → Select “Send” and note the number of births → Divide the number of preterm births by the number of all births to obtain percentage</p>
<p>Other Recommended Data Source(s)</p>	<p>CDC National Vital Statistics System (NVSS) http://www.cdc.gov/nchs/nvss.htm Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/</p>
<p>Format</p>	<p>Percent</p>
<p>Notes</p>	<p>Less than 37 weeks gestational age Data is available at some geographies by race, ethnicity, age, gender, and other demographic factors For less populated geographies, it may be necessary to choose 10-year data groups for data to be available</p>

Child Health

Table 34: Children not Receiving Recommended Immunizations (4-3-1-3-3-1-4)

<p>Primary Data Source</p>	<p>CDC NIS http://www.cdc.gov/nchs/nis.htm → Click “Immunization Coverage in the United States” → Under “Surveys of U.S. Vaccination Coverage” choose “Children Only” → Under (Children) NIS Data (timeframe) choose January – December 2011 → Under NIS-Child Data Tables choose “Overall” → Under “Overall” open file “Coverage with Individual Vaccines and Vaccination Series” → Find the row for your state/local area and the number in that row under the “4:3:1:3:3:1:4” column (record only the number before the ± sign) → This is the % of children vaccinated; subtract this number from 100 to arrive at the % of children NOT vaccinated</p>
<p>Other Recommended Data Source(s)</p>	<p>N/A</p>

Table 34: Children not Receiving Recommended Immunizations (4-3-1-3-3-1-4)	
Format	Percent
Notes	19-35 months old

Table 35: Children not Tested for Elevated Blood Lead Levels	
Primary Data Source	<p>CDC Lead Poisoning Branch http://www.cdc.gov/nceh/lead/data/index.htm</p> <p>→ Choose “CDC’s State Surveillance Data”</p> <p>→ Choose the state or county level data sheet for the most current year available</p> <p>→ Find the county or state in the row and the percent in the “% of children tested” column</p> <p>→ Subtract the number from 100 to arrive at the % of children not tested</p>
Other Recommended Data Source(s)	N/A
Format	Percent
Notes	<p>By 72 months of age</p> <p>Data not available for all states – where state data is available, data may not be available for all counties</p>

Table 36: Pediatric Asthma Hospital Admission	
Primary Data Source	<p>AHRQ Pediatric Quality Indicator</p> <p>http://statesnapshots.ahrq.gov/snaps11/</p> <p>→ Click on state selection map</p> <p>→ Select state in drop-down, or click on the state in the map</p> <p>→ In the bar on the left of the screen, under “State-Specific Information” select “Focus on Asthma”</p> <p>→ Select the “Quality of Care” link</p> <p>→ Report the state (or if state not available, regional) rate for Children (Ages 2-17)</p>
Other Recommended Data Source(s)	State Data Sources using AHRQ Pediatric Quality Indicator definition and exclusions
Format	Rate per 100,000
Notes	<p>2-17 year olds</p> <p>Data not readily available at county level</p> <p>If State Health Department data is used, the measure must follow the AHRQ Pediatric Quality Indicator definition and exclusions found at www.qualitymeasures.ahrq.gov/content.aspx?id=26552&search=pediatric+asthma</p>

Table 37: Children who are Obese	
Primary Data Source	<p>Child Health Data http://childhealthdata.org/browse/survey?s=2</p> <p>→ Under Section 1 select the most current year and the desired geography</p> <p>→ Under Section 2 choose “Healthy People 2010” and “HP 2010 Focus Area #19: Nutrition and Overweight”</p> <p>→ Under Section 3 choose “What is the weight status of children based on Body Mass Index-for-age?”</p> <p>→ Report the % In the “Obese” column</p> <p>→ Use “Edit Search Criteria” box on this page to obtain data by income, race/ethnicity, gender, and other characteristics</p>
Other Recommended Data Source(s)	State Health Department Data
Format	Percent
Notes	<p>10-17 year olds</p> <p>Data, available at national and state levels, are stratified by age, gender, race, language, and income to allow for extrapolation</p>

Behavioral and Oral Health

Table 38: Adults with at least One Major Depressive Episode in the Past Year	
Primary Data Source	<p><u>COUNTY RATES</u></p> <p>CHSI http://www.communityhealth.hhs.gov/homepage.aspx?j=1</p> <p>Choose State and County → Click “Display Data” → Click “Vulnerable Populations”</p> <p>→ Report number for “Have major depression”</p> <p><u>STATE RATES</u></p> <p>SAMHSA National Survey on Drug Use and Health</p> <p>http://oas.samhsa.gov/2k9State/AppB.htm#TabB.26</p> <p>Table B.26</p>
Other Recommended Data Source(s)	N/A
Format	Percent

Table 39: Suicide Rate	
Primary Data Source	<p style="text-align: center;"><u>COUNTY RATES</u></p> <p>CHSI http://www.communityhealth.hhs.gov/homepage.aspx?j=1 Choose State and County → Click “Display Data” → Click “Measures of Birth and Death” → Report number for “Suicide”</p> <p style="text-align: center;">CDC WONDER http://wonder.cdc.gov → Select “Detailed Mortality” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select location” choose “States” and then select your state → Under sections 3, 4, & 5, use default values → Under “6. Select cause of death” choose ICD-10 codes, and choose codes *U03, X60-X84, Y87.0 → Choose “Send” and report the rate for the desired county</p>
Other Recommended Data Source(s)	N/A
Format	Rate per 100,000
Notes	For less populated geographies, it may be necessary to choose 10-year data groups for data to be available

Table 40: Binge Alcohol Use in the Past Month	
Primary Data Source	<p style="text-align: center;">SAMHSA National Survey on Drug Use and Health http://oas.samhsa.gov/2k9State/AppB.htm# Tab B.10</p>
Other Recommended Data Source(s)	N/A
Format	Percent
Notes	Data available at national and state levels and stratified by age to allow for extrapolation

Table 41: Drug Poisoning Mortality (i.e., drug overdose)

<p>Primary Data Source</p>	<p>CDC WONDER http://wonder.cdc.gov → Select “Detailed Mortality” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select location” choose “States” and then select your state → Under sections 3, 4, & 5, use default values → Under “6. Select cause of death” choose ICD-10 codes, and choose codes X40-X44, X60-X64, X85, Y10-Y14 (choose “open” to expand code groupings) → Choose “Send” and report the rate for the desired county.</p>
<p>Other Recommended Data Source(s)</p>	<p>N/A</p>
<p>Format</p>	<p>Rate per 100,000</p>
<p>Notes</p>	<p>Must be age-adjusted For less populated geographies, it may be necessary to choose 10-year data groups for data to be available</p>

Other Health and Access Indicators

Some of the indicators in the Other Health and Access Indicators section are only available at the county or state level. However, a number of them are reported by demographic factors, such as race/ethnicity, income, age, or gender. These can be used in combination with service area demographic data to extrapolate to the proposed service area and/or target population. Please use the extrapolation techniques provided in the Extrapolating Data to Describe Need Section.

Age-adjusted Death Rate (per 100,000)

Table 42: Age-adjusted Death Rate (per 100,000)

<p>Primary Data Source</p>	<p>CDC WONDER http://wonder.cdc.gov → Select “Compressed Mortality” → Select “Mortality for 1999 – 2009 with ICD 10 codes” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select location” choose “States” and then select your state → Under “3. Select years and demographics” use the shift key to choose the most recent 3 years under “Year” → Under section 4, use default values → Under “5. Select rate options” choose “100,000” under “Calculate Rates Per” and “Use Standard populations for age-adjusted rates” under “Age-Adjusted Rate Options” → Choose “Send” and report the rate in the “Age Adjusted Rate per 100,000” column</p>
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Table 42: Age-adjusted Death Rate (per 100,000)

Other Recommended Data Source(s)	N/A
Format	Rate per 100,000
Notes	Must be age-adjusted For less populated geographies, it may be necessary to expand the selected range of years up to 10-year data groups for data to be available

HIV Infection Prevalence

Table 43: HIV Infection Prevalence

Primary Data Source	CDC HIV Surveillance Reports http://www.cdc.gov/hiv/topics/surveillance/resources/reports/index.htm
Other Recommended Data Source(s)	County Health Rankings http://www.countyhealthrankings.org/#app/ State Data Sources
Format	Percent
Notes	CDC state and national data is available by race/ethnicity for most states

Percent Elderly (65 and older)

Table 44: Elderly

Primary Data Source	American Community Survey on Fact Finder 2 http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml Topics → People → Age & Sex → Age
Other Recommended Data Source(s)	N/A
Format	Percent
Notes	65 and older

Adult Asthma Hospital Admission Rate (18 years and older; per 100,000)

Table 45: Adult Asthma Hospital Admission Rate	
Primary Data Source	<p>State Data Sources</p> <p>For National Data: HCUP</p> <p>http://hcupnet.ahrq.gov/HCUPnet.jsp?Id=EFF272FAADE64853&Form=MAINSEL&JS=Y&Action=%3E%3ENext%3E%3E&_MAINSEL=AHRQ%20Quality%20Indicators</p> <p>Scroll down and select AHRQ Quality Indicators → QI Summary Tables → Indicator Selection: Detailed statistics (select most recent year) → Adult Asthma</p>
Other Recommended Data Source(s)	N/A
Format	Rate per 100,000
Notes	<p>18 years and older</p> <p>HCUP provides national rates available by age and gender to support extrapolation</p>

Chronic Obstructive Pulmonary Disease Hospital Admission Rate (18 years and older; per 100,000)

Table 46: Chronic Obstructive Pulmonary Disease Hospital Admission Rate	
Primary Data Source	<p>State Data Sources</p> <p>For National Data: HCUP</p> <p>http://hcupnet.ahrq.gov/HCUPnet.jsp?Id=EFF272FAADE64853&Form=MAINSEL&JS=Y&Action=%3E%3ENext%3E%3E&_MAINSEL=AHRQ%20Quality%20Indicators</p> <p>Scroll down and select AHRQ Quality Indicators → QI Summary Tables → Indicator Selection: Detailed statistics (select most recent year) → Chronic obstructive pulmonary disease (COPD)</p>
Other Recommended Data Source(s)	N/A
Format	Rate per 100,000
Notes	<p>18 years and older</p> <p>HCUP provides national rates available by age and gender to support extrapolation</p>

Influenza and Pneumonia Death Rate (3 year average; per 100,000)

Table 47: Influenza and Pneumonia Death Rate	
Primary Data Source	<p>CDC WONDER http://wonder.cdc.gov</p> <ul style="list-style-type: none"> → Select “Compressed Mortality” → Select “Mortality for 1999 – 2009 with ICD 10 codes” → Under “1. Organize table layout” choose group results by county (and any other demographics required) → Under “2. Select location” choose “States” and then select your state → Under “3. Select years and demographics” use the shift key to choose the most recent 3 years under “year” → Under “4. Select cause of death” choose ICD-10 codes J09-J18 (Influenza and pneumonia) (choose “open” to expand code groupings) → Under “5. Select rate options” choose “100,000” under “Calculate Rates Per” → Choose “Send” and report the rate per 100,000
Other Recommended Data Source(s)	<p>Area Resource File (ARF) http://arf.hrsa.gov/index.htm</p>
Format	Rate per 100,000
Notes	<p>3 year average</p> <p>For less populated geographies, it may be necessary to choose 10-year data groups for data to be available</p>

Adult Current Asthma Prevalence

Table 48: Adult Current Asthma Prevalence	
Primary Data Source	<p><u>FOR COUNTY LEVEL DATA</u></p> <p>BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SelMMSAPrevData.asp</p> <ul style="list-style-type: none"> → Select your area from MMSA Drop Down List → Select Category: Asthma → “Adults who have been told they currently have asthma” <p><u>FOR STATE DATA</u></p> <p>BRFSS http://www.cdc.gov/brfss/</p> <ul style="list-style-type: none"> → Select Prevalence and Trends Database → Select Category: Asthma → “Adults who have been told they currently have asthma”
Other Recommended Data Source(s)	N/A
Format	Percent

Age Adjusted Unintentional Injury Deaths (per 100,000)

Table 49: Age Adjusted Unintentional Injury Deaths	
Primary Data Source	<p>CDC WONDER http://wonder.cdc.gov</p> <ul style="list-style-type: none"> → Select “Detailed Mortality” → Under “1. Organize table layout” choose group results by county (and any other demographics required) <ul style="list-style-type: none"> → Under “2. Select location” choose “States” and then select your state → Under sections 3 & 5, use default values → Under “4. Select year and month” use the shift key to choose the most recent 3 years → Under “6. Select cause of death” choose “Injury Intent and Mechanism” and under “Injury Intent” select “Unintentional” → Under “7. Select rate options” choose “100,000” under “Calculate Rates Per” and “Use Standard populations for age-adjusted rates” under “Age-Adjusted Rate Options” → Choose “Send” and report the rate in the “Age Adjusted Rate per 100,000” column
Other Recommended Data Source(s)	<p>CDC Web Based Injury and Statistics Query and Reporting System (WISQARS™) http://www.cdc.gov/injury/wisqars/index.html</p> <p>Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/</p>
Format	Rate per 100,000
Notes	<p>Must be age-adjusted</p> <p>For less populated geographies it may be necessary to choose 10-year data groups for data to be available</p>

Percent Population Linguistically Isolated (people 5 years and over who speak a language other than English at home)

Table 50: Percent Population Linguistically Isolated (people 5 years and over who speak a language other than English at home)	
Primary Data Source	<p>American Community Survey on Fact Finder 2 http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml</p> <p>Topics → People → Language → Language Spoken at Home</p>
Other Recommended Data Source(s)	N/A
Format	Percent
Notes	5 years and older who speak a language other than English at home

Adults that Could Not See a Doctor in the Past Year Due to Cost

Table 51: Adults that Could Not See a Doctor in the Past Year Due to Cost	
Primary Data Source	County Health Rankings http://www.countyhealthrankings.org/#app/ → Select State → Choose Measures → Additional Measures → Under Health Care select “Could not see a doctor due to cost”
Other Recommended Data Source(s)	BRFSS http://www.cdc.gov/brfss/
Format	Percent
Notes	18 years and older BRFSS data available by age, gender, race, education, and income to allow for extrapolation

Adults 65 and Older Who Have Not Had a Flu Shot in the Past Year

Table 52: Adults 65 and Older Who Have Not Had a Flu Shot in the Past Year	
Primary Data Source	<p><u>FOR COUNTY LEVEL DATA</u> BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SeIMMSAPrevData.asp → Select your area from MMSA Drop Down List → Select Category: Immunization → “Adults aged 65+ who have had a flu shot within the past year”</p> <p><u>FOR STATE DATA</u> BRFSS http://www.cdc.gov/brfss/ → Select Prevalence and Trends Database → Select Category: Immunization → “Adults aged 65+ who have had a flu shot within the past year”</p>
Other Recommended Data Source(s)	Community Health Status Indicators (CHSI) http://www.communityhealth.hhs.gov/
Format	Percent

Chlamydia (sexually transmitted infection) Rate per 100,000

Table 53: Chlamydia (sexually transmitted infection) Rate per 100,000 Population	
Primary Data Source	CDC National Center for Hepatitis, HIV, STD, and TB Prevention http://www.cdc.gov/nchhstp/
Other Recommended Data Source(s)	County Health Rankings http://www.countyhealthrankings.org/#app/ Health Indicators Warehouse (HIW) http://healthindicators.gov
Format	Rate per 100,000

Percent of Adults Without a Visit to a Dentist or Dental Clinic in the Past Year for Any Reason

Table 54: Percent of Adults Without a Visit to a Dentist or Dental Clinic in the Past Year for Any Reason	
Primary Data Source	<p style="text-align: center;"><u>FOR COUNTY LEVEL DATA</u></p> <p>BRFSS http://apps.nccd.cdc.gov/BRFSS-SMART/SeIMMSAPrevData.asp → Select your area from MMSA Drop Down List → Select Category: Oral Health → “Visited dentist or dental clinic within the past year for any reason”</p> <p style="text-align: center;"><u>FOR STATE DATA</u></p> <p>BRFSS http://www.cdc.gov/brfss/ → Select Prevalence and Trends Database → Select Category: Oral Health → “Visited dentist or dental clinic within the past year for any reason”</p>
Other Recommended Data Source(s)	N/A
Format	Percent

Additional Data Resources

This section provides a listing of data sources that may be useful in completing the NFA Worksheet.

Centers for Disease Control and Prevention (CDC) Office of Minority Health and Health Disparities (OMHD)

- The OMHD provides data and fact sheets specific to migratory and seasonal agricultural workers on topics including cancer, cardiovascular disease, diabetes, HIV/AIDS, infant mortality, immunizations, mental health, tuberculosis, and lupus.
- Source: <http://www.cdc.gov/omhd/AMH/farmworker.htm>

Migrant and Seasonal Farmworker Enumeration Profiles Study (AC Larson)

- State-specific reports which combine national, state, and local reports and existing databases to calculate estimates for migratory and seasonal agricultural worker populations at the county level. The study is available for select states only.
- Source: <http://www.ncfh.org/?pid=23>

National Center for Farmworker Health Fact Sheets

- The National Center for Farmworker Health’s mission is to improve the health status of farm worker families through appropriate application of human, technical, and information resources. Their resource center and library collection include factsheets and listings of various data resources specific to the migratory and seasonal agricultural worker populations.

- Source: <http://www.ncfh.org/?pid=5>

National Coalition for the Homeless

- The National Coalition for the Homeless' mission is to end homelessness across the U.S. The information clearinghouse includes fact sheets and publications addressing homeless-population specific data.
- Source: <http://www.nationalhomeless.org/publications/>

The Urban Institute

- The Urban Institute's mission is to promote sound social policy and public debate on national priorities such as homelessness, and the link below connects to the collection of Urban Institute publications on homeless issues.
- Source: <http://www.urban.org/housing/homeless.cfm>

The U.S. Conference of Mayors Hunger and Homelessness Survey

- This report contains data collected from 29 cities with mayors on the Conference of Mayors Hunger and Homelessness Task Force. Survey topics included characteristics of the homeless population. The report also contains profiles of each of the 23 cities responding to the survey.
- Source: <http://usmayors.org/pressreleases/uploads/2011-hhreport.pdf>

U.S. Department of Housing and Urban Development (HUD) Annual Homeless Assessment Report to Congress

- This document reports the number of homeless people in the United States.
- Source: <http://www.hudhre.info/documents/2010HomelessAssessmentReport.pdf>