Despite the decrease in staffing and resources in 2009, ICHS staff continued to provide excellent health care to many people. ICHS served a total of 17,260 patients, an increase of 8% from the previous year. Patient visits for medical, dental, and behavioral health services and Chinese Traditional Medicine added up to 81,076 visits, 13.5% more than in 2008. Asian Pacific Islanders (APIs) made up the majority (85%) of ICHS patients. Of these, the largest API groups were Chinese (41.3%) and Vietnamese (26.4%), followed by Filipinos (6.1%) and Koreans (5.2%). Nearly two-thirds of all ICHS patients needed language interpretation during their appointments.

Additional information about ICHS patients:

<table>
<thead>
<tr>
<th>Income by Federal Poverty Guidelines*</th>
<th>No. of patients</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below FPL</td>
<td>7880</td>
<td>45.7</td>
</tr>
<tr>
<td>100 –150 %</td>
<td>3006</td>
<td>17.4</td>
</tr>
<tr>
<td>151 – 200 %</td>
<td>1777</td>
<td>10.3</td>
</tr>
<tr>
<td>201 – 250 %</td>
<td>562</td>
<td>3.3</td>
</tr>
<tr>
<td>251 – 300 %</td>
<td>170</td>
<td>1.0</td>
</tr>
<tr>
<td>301 – 400 %</td>
<td>82</td>
<td>0.5</td>
</tr>
<tr>
<td>Above 400 %</td>
<td>178</td>
<td>1.0</td>
</tr>
<tr>
<td>Unknown</td>
<td>3605</td>
<td>20.9</td>
</tr>
</tbody>
</table>

*2009 Federal Poverty Guidelines income was $10,830 for a single person and was $22,050 for a family of four.

<table>
<thead>
<tr>
<th>Patients by age</th>
<th>No. of patients</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 – 14</td>
<td>3580</td>
<td>20.7</td>
</tr>
<tr>
<td>15 – 19</td>
<td>1018</td>
<td>5.9</td>
</tr>
<tr>
<td>20 – 29</td>
<td>1715</td>
<td>10.0</td>
</tr>
<tr>
<td>30 – 44</td>
<td>3173</td>
<td>18.4</td>
</tr>
<tr>
<td>45 – 64</td>
<td>4776</td>
<td>27.7</td>
</tr>
<tr>
<td>65 – 79</td>
<td>2369</td>
<td>13.7</td>
</tr>
<tr>
<td>80 and older</td>
<td>629</td>
<td>3.7</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Preferred Language</th>
<th>No. of patients</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cantonese</td>
<td>5470</td>
<td>31.7</td>
</tr>
<tr>
<td>Vietnamese</td>
<td>4242</td>
<td>24.6</td>
</tr>
<tr>
<td>English</td>
<td>3634</td>
<td>21.1</td>
</tr>
<tr>
<td>Mandarin</td>
<td>1025</td>
<td>5.9</td>
</tr>
<tr>
<td>Korean</td>
<td>806</td>
<td>4.7</td>
</tr>
<tr>
<td>Tagalog</td>
<td>440</td>
<td>2.5</td>
</tr>
<tr>
<td>Other Languages</td>
<td>435</td>
<td>2.5</td>
</tr>
<tr>
<td>Somali</td>
<td>268</td>
<td>1.6</td>
</tr>
<tr>
<td>Toisanese</td>
<td>254</td>
<td>1.5</td>
</tr>
<tr>
<td>Cambodian/Khmer</td>
<td>178</td>
<td>1.0</td>
</tr>
<tr>
<td>Lao</td>
<td>151</td>
<td>0.9</td>
</tr>
<tr>
<td>Mien</td>
<td>135</td>
<td>0.8</td>
</tr>
<tr>
<td>Ilokano</td>
<td>130</td>
<td>0.8</td>
</tr>
<tr>
<td>Spanish</td>
<td>92</td>
<td>0.5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Health Care Coverage</th>
<th>No. of patients</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid</td>
<td>5631</td>
<td>32.6</td>
</tr>
<tr>
<td>Uninsured</td>
<td>3828</td>
<td>22.2</td>
</tr>
<tr>
<td>Basic Health</td>
<td>2828</td>
<td>16.4</td>
</tr>
<tr>
<td>Private Insurance</td>
<td>2784</td>
<td>16.1</td>
</tr>
<tr>
<td>Medicaid/Medicare Crossover</td>
<td>1406</td>
<td>8.1</td>
</tr>
<tr>
<td>Medicare</td>
<td>629</td>
<td>3.6</td>
</tr>
<tr>
<td>Other Public Ins/S-CHIP</td>
<td>154</td>
<td>0.9</td>
</tr>
</tbody>
</table>
2009 ICHS Consolidated Fiscal Highlights

ICHS’ funding comes primarily from public health care funds, insurance reimbursements, and self-pay patients. ICHS also receives grants from local, state, and federal government entities, including the City of Seattle, Public Health - Seattle & King County, the Washington State Health Care Authority, and the HRSA Bureau of Primary Health Care to provide affordable primary medical and dental health care.

ICHS weathered the turbulent economy this past year through a combination of measures that increased productivity while cutting costs. ICHS also benefited from federal stimulus funds and other one-time infusions of revenue. However, ICHS will continue to face uncertainties in 2010 and beyond, as the full and cumulative impact of the state and local government budget cuts hit and the one-time nature of stimulus and other funding are realized. Rising demand for services due to high unemployment and a slow economic recovery, in addition to ICHS’ reduced staff capacity and declining revenue base present considerable challenges in meeting the needs of the community.

January 1, 2009 – December 31, 2009

**SUPPORT, REVENUE, AND GAINS**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capitation and enhancements</td>
<td>1,959,207</td>
</tr>
<tr>
<td>Public-sponsored insurance and entitlements</td>
<td>7,993,277</td>
</tr>
<tr>
<td>Patient fees and private insurance</td>
<td>2,623,388</td>
</tr>
<tr>
<td>Fees and grants from government agencies</td>
<td>3,281,993</td>
</tr>
<tr>
<td>Contributions and private grants</td>
<td>617,568</td>
</tr>
<tr>
<td>In-kind donations</td>
<td>432,536</td>
</tr>
<tr>
<td>Interest and investment income</td>
<td>424,160</td>
</tr>
<tr>
<td>Other</td>
<td>355,924</td>
</tr>
<tr>
<td><strong>Total Operating Support, Revenue, and Gains</strong></td>
<td><strong>$17,688,053</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss on disposal of equipment &amp; improvements</td>
<td>(126,168)</td>
</tr>
<tr>
<td>Pool savings</td>
<td>4,672,732</td>
</tr>
<tr>
<td>Unrealized losses</td>
<td>455,107</td>
</tr>
<tr>
<td>Contributions to acquire long-term assets</td>
<td>698,909</td>
</tr>
<tr>
<td><strong>TOTAL REVENUES</strong></td>
<td><strong>$23,388,633</strong></td>
</tr>
</tbody>
</table>

**EXPENSES***

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
<td></td>
</tr>
<tr>
<td>Primary Medical Care</td>
<td>7,027,909</td>
</tr>
<tr>
<td>Primary Dental Care</td>
<td>3,073,601</td>
</tr>
<tr>
<td>Other Health and Enabling Services</td>
<td></td>
</tr>
<tr>
<td>Pharmacy</td>
<td>1,478,988</td>
</tr>
<tr>
<td>Access†</td>
<td>1,686,983</td>
</tr>
<tr>
<td>Health Education &amp; Case Management</td>
<td>881,116</td>
</tr>
<tr>
<td>Women, Infants &amp; Children</td>
<td>238,701</td>
</tr>
<tr>
<td>Acupuncture</td>
<td>171,545</td>
</tr>
<tr>
<td>Mental Health</td>
<td>235,630</td>
</tr>
<tr>
<td><strong>Total Program Services</strong></td>
<td><strong>$14,794,473</strong></td>
</tr>
<tr>
<td>Management &amp; General Administration</td>
<td>4,559,018</td>
</tr>
<tr>
<td>Fundraising</td>
<td>199,854</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td><strong>$19,553,345</strong></td>
</tr>
</tbody>
</table>

*Expenses include support of the ICHS Foundation
†Interpretation, Eligibility Screening, Outreach, and Other Enabling Services
ICHS and the ICHS Foundation would like to thank the following for their generous contributions. We have made every effort to be thorough and represent each name accurately. If an error of omission has occurred, please accept our apologies and contact us at 206.788.3694 or foundation@ichs.com so we can correct our records.

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Development Officer  

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**www.ichs.com**

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