

<b>DEPARTMENT OF HEALTH AND HUMAN SERVICES</b> <b>Health Resources and Services Administration</b>  <b>Form 9: NEED FOR ASSISTANCE WORKSHEET</b>	<b>FOR HRSA USE ONLY</b>	
	<b>Grant Number</b>	<b>Application Tracking Number</b>

**Section I: CORE BARRIERS** *Note: Provide information for 3 out of the 4 Core Barriers listed below.*

**Population to One FTE Primary Care Physician**

Is this Core Barrier Applicable?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Data Response	___:1 (Ratio)
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

**Percent of Population Below 200 Percent of Poverty**

Is this Core Barrier Applicable?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Data Response	___ (%)
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

**Percent of Population Uninsured**

Is this Core Barrier Applicable?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Data Response	___ (%)
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

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

Is this Core Barrier Applicable?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Data Response	___ (Miles or Minutes)
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

**Section II: CORE HEALTH INDICATORS** *Note: Provide information for all six health indicator categories listed below. You are required to select one Core Health Indicator for each category and provide complete information for the selected indicator.*

**Diabetes**

Core Health Indicator	
National/Severe Benchmark	Pre-populated
Data Response	
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

**Cardiovascular Disease**

Core Health Indicator	
National/Severe Benchmark	Pre-populated
Data Response	
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

**Cancer**

Core Health Indicator	
National/Severe Benchmark	Pre-populated
Data Response	
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

**Prenatal and Perinatal Health**

Core Health Indicator	
National/Severe Benchmark	Pre-populated
Data Response	
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

**Child Health**

Core Health Indicator	
National/Severe Benchmark	Pre-populated
Data Response	
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

**Behavioral Health**

Core Health Indicator	
National/Severe Benchmark	Pre-populated
Data Response	
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	

Identify Geographic Service Area or Target Population for Data	
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**Section III: OTHER HEALTH AND ACCESS INDICATORS**  
*Note: Provide information for 2 out of 13 of the Other Health and Access Indicators*

<b>Indicator #1</b>	
Other Health and Access Indicator	
National Benchmark	Pre-populated
Data Response	
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	
<b>Indicator #2</b>	
Other Health and Access Indicator	
National Benchmark	Pre-populated
Data Response	
Year to which Data Apply	
Data Source/Description	
Methodology Utilized/Extrapolation method	
Identify Geographic Service Area or Target Population for Data	

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915 0285. Public reporting burden for this collection of information is estimated to average 4.5 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N-39, Rockville, Maryland, 20857.