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Suggested Citation:

ABOUT COMMUNITY HEALTH CENTERS

The National Association of Community Health Centers (NACHC) is pleased to present Community Health Center Chartbook, an overview of the Health Center Program and the communities they serve. Health centers began over fifty years ago as part of President Lyndon B. Johnson’s declared “War on Poverty.” Their aim then, as it is now, is to provide affordable, high quality, comprehensive primary care to medically underserved populations, regardless of their insurance status or ability to pay for services. A growing number of health centers also provide dental, behavioral health, pharmacy, and other important services. No two health centers are alike, but they all share one common purpose: to provide primary and preventive health care services that are coordinated, culturally and linguistically competent, and community-directed.

Health centers play a critical role in the U.S. health care system, delivering care to over 25 million* people today. Across the country, health centers produce positive results for their patients and for the communities they serve. They stand as evidence that communities can improve health, reduce health disparities, and deal with a multitude of costly and significant public health and social problems – including substance abuse, HIV/AIDS, mental illness, and homelessness – if they have the resources to do so. Federal and state support, along with adequate third party reimbursement, are critically important to keep pace with escalating health care needs and rising costs among populations served by health centers.

Who health centers serve, what they do, and their impressive record of accomplishment in keeping communities healthy are represented in the following charts.

*Includes patients of federally-funded health centers, non-federally funded health centers (health center “look-alikes”), and expected patient growth for 2016.

Source: 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
ABOUT THIS CHARTBOOK

This Chartbook highlights data from and research findings on Community, Migrant, Homeless and Public Housing Health Centers, as well as other Federally-Qualified Health Centers (FQHCs). In this document, unless otherwise noted, the term “health center” is generally used to refer to organizations that receive grants under the Health Center Program as authorized under section 330 of the Public Health Service Act, as amended (referred to as “grantees”). Data and research sources can be found at the bottom of each figure. Most slides draw from the Uniform Data System (UDS) maintained by the Bureau of Primary Health Care, HRSA, DHHS. UDS data included in this Chartbook are limited to health centers that meet the federal grant requirements and receive federal funding from the Bureau of Primary Health Care. For more information about UDS data, visit https://bphc.hrsa.gov/uds/datacenter.aspx.
About Community Health Centers

About this Chartbook

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Section I

Who Health Centers Serve
Health Centers Serve

1 in 13 people in the US, including:

1 in 6 people receiving Medicaid

1 in 3 low income uninsured

1 in 3 individuals living below poverty

1 in 4 rural Americans

Note: Includes patients of federally-funded health centers and non-federally funded health centers, and expected patient growth for 2016.

Federal Poverty Level (FPL) for a family of three in 2015 was $20,090. (See https://aspe.hhs.gov/2015-poverty-guidelines). Based on percent known. Percents may not total 100% due to rounding.

Source: Federally-funded health centers only. 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.

Figure 1.2
Health Center Patients are Predominately Low Income

100% FPL and Below: 71%
101-150% FPL: 15%
151-200% FPL: 7%
Over 200% FPL: 8%

Note: Federal Poverty Level (FPL) for a family of three in 2015 was $20,090. (See https://aspe.hhs.gov/2015-poverty-guidelines). Based on percent known. Percents may not total 100% due to rounding.
Source: Federally-funded health centers only. 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Most Health Center Patients are Members of Racial and Ethnic Minority Groups

62% of health center patients are members of racial and ethnic minority groups

- Hispanic/Latino: 35%
- Black/African American: 23%
- American Indian/Alaska Native: 1%
- Asian/Hawaiian/Pacific Islander: 5%
- White: 67%
- More than one race: 4%
- Non-Hispanic/ Latino: 65%

Note: Based on percent known. Percents may not total 100% due to rounding. The 62% of health center patients that are members of racial and ethnic minorities is not shown in this figure.

Source: Federally-funded health centers only. 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 1.4

Health Center Patients are Disproportionately Members of Racial/Ethnic Minority Groups

<table>
<thead>
<tr>
<th>Group</th>
<th>Health Centers</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic/Latino</td>
<td>35%</td>
<td>18%</td>
</tr>
<tr>
<td>African American/Black</td>
<td>23%</td>
<td>13%</td>
</tr>
<tr>
<td>Asian/Hawaiian/Pacific Islander</td>
<td>5%</td>
<td>6%</td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td>1%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Figure 1.5
Health Centers Serve Patients Throughout the Life Cycle

Source: Federally-funded health centers only. 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS. Note: Percents may not total 100% due to rounding.
Figure 1.6

Most Health Center Patients are Publicly Insured or Uninsured

- Medicaid: 49%
- Medicare: 9%
- Private: 17%
- Uninsured: 24%
- Other Public Insurance: 1%

Notes: Percents may not total 100% due to rounding. "Other public insurance" may include non-Medicaid CHIP and state-funded insurance programs.
Source: Federally-funded health centers only. 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 1.7
Health Center Patient Mix is Unique Among Ambulatory Care Providers

<table>
<thead>
<tr>
<th>Source</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private</td>
<td>17%</td>
</tr>
<tr>
<td>Emergency Department</td>
<td>1%</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>9%</td>
</tr>
<tr>
<td>Medicare</td>
<td>24%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>49%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>4%</td>
</tr>
<tr>
<td>Medicare</td>
<td>27%</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>13%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>15%</td>
</tr>
<tr>
<td>Medicare</td>
<td>30%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>36%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>11%</td>
</tr>
</tbody>
</table>

Note: Private Physician and Emergency Department numbers may not add up to 100% because of rounding and more than one category could be indicated.

Poverty levels based on percent known.

Many Health Center Patients Suffer From Chronic Conditions

**Figure 1.9**

Percent of patients who report ever being told they have:

- High cholesterol: 42%
- Hypertension: 33%
- Asthma: 22%
- Diabetes*: 15%

Percent of patients reporting:

- Health is fair or poor: 32%
- Needed mental health care in the past year: 22%

* Other than during pregnancy.

Figure 1.10

Health Centers Serve Many Special Populations

- 910,172 Agricultural Worker Patients
- 1,191,772 Homeless Patients
- 649,132 School-Based Health Center Patients
- 305,520 Veteran Patients
- 1,510,842 Public Housing Patients

Source: 2015 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Figure 1.11

Health Centers Serve Disproportionate Amounts of Special Populations

<table>
<thead>
<tr>
<th>Population Type</th>
<th>Percent of HC Population</th>
<th>Percent of US Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Migratory/Seasonal Farmworkers</td>
<td>3%</td>
<td>0.95%</td>
</tr>
<tr>
<td>Homeless Persons</td>
<td>5%</td>
<td>0.18%</td>
</tr>
<tr>
<td>Residents of Public Housing</td>
<td>6%</td>
<td>0.68%</td>
</tr>
</tbody>
</table>

Sources:
- 2015 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Health Centers’ Insurance Revenue Sources Do Not Resemble Those of Private Physicians

Note: Health Centers includes third party revenue only. Private Physicians does not equal 100% because more than one category could be indicated. Numbers also may not add to 100% because of rounding.

Section II
Expanding Access to Care
Figure 2.1

Health Center Grantee Organizations and Sites, 2006-2015

Source: Federally-funded health centers only. 2006-2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 2.2

The Number of Health Center Patients and Visits Continues to Increase

62% growth in patients and 64% growth in visits since 2006

Source: Federally-funded health centers only. 2006-2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 2.3
Health Center Patients by Insurance Status, 2006-2015

Source: Federally-funded health centers only. 2006-2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 2.4

Even as More Patients Receive Insurance, Health Centers are Serving Increasingly More of the Nation’s Uninsured

2012

1 in 7 uninsured people

2015

1 in 5 uninsured people

Note: Proportion of all US residents does not account for health centers located in U.S. territories.
Figure 2.5
The Number of Health Center Patients in Poverty is Growing Faster than the Number in Poverty Nationally, 2006 - 2015

Note: Represents patients/people under 100% of the federal poverty level.
Source: 2006-2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS. US Census Bureau, Historical Poverty Data, Table 2: Poverty Status of People By Family Relationship, Race, and Hispanic Origin.
The Number of Health Center Medicaid Patients is Growing Faster than the Number of Medicaid Beneficiaries Nationally, 2006-2015

Figure 2.7
Health Centers Have Expanded the Breadth of Services Offered to Both New and Existing Patients

Number of Patient Visits in 2015 and Percent Growth Since 2010

- Total Visits: 97.0 M, 26%
- Medical: 67.4 M, 20%
- Dental: 13.2 M, 43%
- Behavioral Health: 8.3 M, 57%
- Vision: 672 K, 63%

Note: Behavioral health refers to mental health and substance abuse. Sources: 2015 and 2010 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 2.8
Health Centers Have Expanded Their Capacity to Provide More Services by Employing a Wider Variety of Staff Types and Integrating Care

Number of Health Centers with Staff to Provide Select Services Onsite 2010 vs. 2015

<table>
<thead>
<tr>
<th>Service</th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral Health</td>
<td>828</td>
<td>1,131</td>
</tr>
<tr>
<td>Dental</td>
<td>857</td>
<td>1,045</td>
</tr>
<tr>
<td>Case Management</td>
<td>758</td>
<td>1,018</td>
</tr>
<tr>
<td>Vision</td>
<td>199</td>
<td>294</td>
</tr>
</tbody>
</table>

Note: Behavioral health refers to mental health and substance abuse. Sources: 2015 and 2010 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
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Health Centers Have Higher Rates of Accepting New Patients Compared to Other Primary Care Providers

Figure 2.10
Percent of Uninsured Served by Health Centers, 2015

Figure 2.11

Percent of Medicaid Beneficiaries Served By Health Centers, 2015

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Federal Health Center Appropriation History, FY2004-FY2016

Note: Federal appropriations are for consolidated health centers under PHSA Section 330. Federally funded health centers only.
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High Quality Care and Reducing Health Disparities
Figure 3.1
Health Centers Perform Better on Ambulatory Care Quality Measures than Private Practice Physicians

Figure 3.2

Health Centers Exceed Medicaid Managed Care Organization High Performance Benchmark Scores

Note: Quality Measures include control of diabetes: share of patients with diabetes with HbA1c between 7% and 9%; Control of hypertension: share of patients with hypertension with blood pressure < 140/90 mm Hg; Pap Tests: share of female patients age 24 – 64 who received Pap test within past three years.

Figure 3.3
Health Center Patients Have Higher Rates of Diabetes and Blood Pressure Control than the National Average

* Estimated percentage of patients with Hba1c < 9%
† Estimated percentage of patients with blood pressure < 140/90

Figure 3.4
Health Center Patients Have Fewer Low Birth Weight Babies than the US Average

Figure 3.5
Health Centers Provide More Preventive Services than Other Primary Care Providers

Many Health Centers Exceed Healthy People 2020 Goals by Key Health Outcomes

% Meeting or Exceeding Healthy People 2020 Goal

- Hypertension Control: 15%
- Diabetes Control: 37%
- Low Birth Weight: 60%
- Meet or Exceed at Least One Goal: 93%

Figure 3.7

Health Center Patients Are More Satisfied with the Overall Care Received Compared with Low Income Patients Nationally

Figure 3.8
Health Center Women Needing Mammograms are More Likely to Receive Them than Their Counterparts Nationally

*Includes women below 100% FPL or at 100% FPL and below
Figure 3.9

Health Center Women Needing *Pap Smears* are More Likely to Receive Them than Their Counterparts Nationally

<table>
<thead>
<tr>
<th>Category</th>
<th>Health Centers</th>
<th>Nationally</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>92%</td>
<td>71%</td>
</tr>
<tr>
<td>Black</td>
<td>89%</td>
<td>75%</td>
</tr>
<tr>
<td>In Poverty*</td>
<td>82%</td>
<td>61%</td>
</tr>
<tr>
<td>Uninsured</td>
<td>76%</td>
<td>58%</td>
</tr>
</tbody>
</table>

*Includes women below 100% FPL or at 100% FPL and below

Figure 3.10

Health Center Patients Needing *Colorectal Cancer Screenings* Are More Likely to Receive Them than Their Counterparts Nationally

<table>
<thead>
<tr>
<th></th>
<th>Health Centers</th>
<th>Nationally</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>55%</td>
<td>38%</td>
</tr>
<tr>
<td>Black</td>
<td>55%</td>
<td>54%</td>
</tr>
<tr>
<td>In Poverty*</td>
<td>57%</td>
<td>41%</td>
</tr>
</tbody>
</table>

*Includes individuals below 100% FPL or at 100% FPL and below

Health Center Patients Have Lower Rates of Low Birth Weight than Their U.S. Counterparts

If the black-white low birth weight disparity seen at health centers could be achieved nationally, there would be 17,100 fewer black low birth weight infants annually.

Figure 3.12
Health Centers Reduce Disparities in Medicaid Patients’ Receipt of New Medications for Uncontrolled Hypertension Compared to Privately Insured Patients

% of Medicaid Patients Receiving New Medication for Uncontrolled Hypertension

Section IV

Cost Effective Care
Figure 4.1

Health Centers’ Average Daily Cost Per Patient is Lower Compared to All Physician Settings

Figure 4.2
Health Centers Save 24% Per Medicaid Patient Compared to Other Providers

Note: Non-health centers include private physician offices and outpatient clinics.
Fig. 4.3

Health Centers Have Lower Total Spending per Medicaid Patient Compared to Other Providers

Percent Lower Spending in State Studied

- AL: 63% lower
- CA: 22% lower
- CO: 26% lower
- CT: 19% lower
- FL: 32% lower
- IA: 27% lower
- IL: 27% lower
- MS: 19% lower
- NC: 29% lower
- TX: 22% lower
- VT: 15% lower
- WV: 18% lower

Notes: Non-health centers include private physician offices and outpatient clinics. MT was included in the national-level analyses, but did not have a large enough sample size to be included in the adjusted state-level analyses.

Figure 4.4

Health Centers Save 35% Per Child, Compared to Other Providers

High Health Center Penetration Area

Low Health Center Penetration Area

All Areas

Notes: High health center penetration corresponds to 54% health center penetration rate among low-income residents; Low health center penetration corresponds to 3% health center penetration rate among low-income residents; Average health center penetration rate among low-income residents was 21%.

Health Centers Are Associated with Lower Total Costs of Care for Medicare Patients Compared to Other Providers

Figure 4.6

10% lower than physician office patients and 30% lower than outpatient clinic patients

Health Centers Save $1,263 Per Patient Per Year

![Bar chart showing cost comparison between Health Center Users and Non-Health Center Users. Health Center Users save $4,043 per patient per year, while Non-Health Center Users save $5,306 per patient per year.](image)

Section V

Health Center Services and Staffing
Health Center Care Team Staff Provide a Broad Array of Services

Figure 5.1

- 10% Physicians
- 9% NPs/Pas/CNMs
- 13% Nurses
- 12% Dental
- 20% Enabling and Other Programs and Services
- 21% Other Medical Personnel
- 1% Laboratory
- 1% X-Ray
- 2% Other Professional Services
- 3% Pharmacy
- 7% Behavioral Health
- 2% Other Professional Services

104,531.7 Total Full Time Equivalent Care Team Staff

Notes: Percents may not total 100% due to rounding. NPs/Pas/CNMs represents Nurse Practitioners/Physicians Assistants/Certified Nurse Midwives. Source: 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5.2
Health Center Medical Services Staff, 2015

Total Medical Personnel = 67,627.62 Full Time Equivalents

Note: Total Physicians excludes Psychiatrists and Optometrists. NP, PA, CNM stands for Nurse Practitioners, Physician Assistants, Certified Nurse Midwives. Other Medical Personnel includes Laboratory personnel and X-Ray personnel. Percents may not total 100% due to rounding.
Source: 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5.3
Health Center Dental Services Staff, 2015

Total Dental Personnel = 14,557.84 Full Time Equivalents

- Dentists 28%
- Dental Hygienists 13%
- Dental Assistants, Aides, Techs 59%

Source: Federally-funded health centers only. 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS. Percents may not total 100% due to rounding.
Health Center Behavioral Health Services Staff, 2015

- Psychiatrists: 7%
- Licensed Clinical Psychologists: 8%
- Licensed Clinical Social Workers: 30%
- Other Licensed Mental Health Providers: 22%
- Other Mental Health Staff: 23%
- Substance Abuse Services: 11%
- Other Mental Health Staff: 23%

Total = 8,740.39
Full Time Equivalents

Note: Percents may not total 100% due to rounding.
Source: Federally-funded health centers only. 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5.5
Health Center Enabling Services Staff, 2015

- Case Managers: 36%
- Patients/Community Education Specialists: 14%
- Outreach Workers: 15%
- Transportation Staff: 3%
- Eligibility Assistance Workers: 25%
- Interpretation Staff: 5%
- Other Enabling Services: 3%

Total = 18,859.49 Full Time Equivalents

Note: Percents may not total 100% due to rounding.
Source: 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5.6
Growth in Health Center Medical Providers, 2006 - 2015

- Physicians: 2006 - 7,595, 2015 - 11,867, 56% Increase
- NPs, PAs, CNMs: 2006 - 4,292, 2015 - 10,332, 141% Increase
- Nurses: 2006 - 8,776, 2015 - 15,857, 81% Increase
- Behavioral Health Staff: 2006 - 3,018, 2015 - 8,740, 190% Increase
- Dental Staff: 2006 - 6,250, 2015 - 14,558, 133% Increase

Note: NP, PA, CNM stand for Nurse Practitioners, Physician Assistants, Certified Nurse Midwives, respectively. Behavioral Health Staff includes Substance Abuse staff.
Sources: 2006 and 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5.7
Health Centers are Hiring Non-Physician Providers at Higher Rates than Physicians

Notes: PA, NP, and CNM stand for Physician Assistant, Nurse Practitioner, Certified Nurse Midwife, respectively. FTE stands for Full-Time Equivalent.
Source: 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Section VI

Challenges in Meeting Demand for Care
Figure 6.1
Health Center Funding Per Uninsured Patient Is Well Below Total Per Patient Cost

Note: Not adjusted for inflation. Federal appropriations are for consolidated health centers under PHSA Section 330.
Source: 2006-2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 6.2
Payments from Third Party Payers Are Less Than Cost, 2015

Percent of Charges Collected From Third Party Payers

- Medicaid: 82%
- Medicare: 56%
- Other Public Insurance: 60%
- Private Insurance: 57%

Note: Health centers are non-profits, and thus charges are a proxy for costs.
Source: 2015 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Health Center Operating Margins are Less than Hospital Operating Margins

Thanks to ARRA funding between 2009 and 2014, health center operating margins nationally were higher, but were still below those of hospitals.
Figure 6.4
26 States Will Provide Funding to Health Centers in State Fiscal Year 2017

Figure 6.5

Estimated Percent of County Residents Experiencing Shortages of Primary Care Physicians, 2013

62 million people experience inadequate or no access to primary care because of shortages of physicians in their communities.

Health Center Capital Project Plans and Funding Needs, 2015

- 79% of health centers have plans to initiate capital projects within the next several years. These plans represent 2,300 capital projects.

- These planned projects are estimated to cost $4.6 billion:
  - which will result in 12 million square feet of new space,
  - accommodating 6,100 new providers
  - who will serve 5.4 million new patients annually

- However 75% of health centers report funding gaps for these planned projects.