About Community Health Centers

The National Association of Community Health Centers (NACHC) is pleased to present the 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 “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 30 million* people today. They stand as evidence that communities can improve health, reduce health disparities, generate taxpayer savings, and deal with a multitude of costly and significant public health and social problems – including substance use disorder, mental illness, natural disasters, and homelessness – if they have the resources to do so. In response to COVID-19, health centers quickly pivoted in order to provide testing to hundreds of thousands of patients each month, while working to continue important health care services. Their work during this time has been vital to slowing the virus’s spread and reopening communities. Across the country, health centers produce positive results for their patients and for the communities they serve before and during the pandemic. Federal and state support, along with 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 accomplishments in keeping communities healthy are represented in this chartbook.

* Includes patients of federally-funded health centers, look-alikes, and expected patient growth for 2020.
About this Chartbook

The Community Health Center Chartbook highlights important research and data on Health Center Program Grantees, 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.
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Section 1

Who Health Centers Serve
Health Centers Serve 1 in 11 People in the U.S.
Including...

- 1 in 8 Children
- 1 in 7 Racial/Ethnic Minorities
- 1 in 5 Medicaid Beneficiaries
- 1 in 5 Uninsured Persons
- 1 in 3 People in Poverty

Health Centers Serve Many Special Populations

- 885,553 School-Based Health Center Patients
- 1,031,049 Agricultural Worker Patients
- 398,788 Veterans
- 1,459,446 Patients Experiencing Homelessness
- 5,165,074 Public Housing Patients
- 7,356,355 Patients Best Served in a Language Other than English

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Health centers serve greater proportions of special populations. 

**Figure 1-3**

Health Centers Serve Greater Proportions of Special Populations

<table>
<thead>
<tr>
<th>Population</th>
<th>U.S. Population</th>
<th>Health Center Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agricultural Workers</td>
<td>0.90%</td>
<td>3%</td>
</tr>
<tr>
<td>Individuals Experiencing Homelessness</td>
<td>0.20%</td>
<td>5%</td>
</tr>
<tr>
<td>Residents of Public Housing*</td>
<td>0.60%</td>
<td>17%</td>
</tr>
</tbody>
</table>

*Health center population defined as residents of public housing includes all patients served at a health center located in or immediately accessible to a public housing site.

Sources:
1. 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
91% of health center patients are in or near poverty.
Figure 1-5

Most Health Center Patients are Uninsured or Publicly Insured

81% of health center patients are uninsured or publicly insured.

Note: Percentage for “Other Public Insurance” includes non-Medicaid CHIP, or coverage where states contract CHIP through private third-party payers and not Medicaid. Source: 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Notes: Percentages may not add to 100% due to rounding and private physician and emergency department numbers allow for more than one category to be indicated. Dual eligible patient visits were removed from the Medicaid category in NAMCS/NHAMCS data for private physicians and emergency department visits. This was done to be more comparable with conventional groupings of Medicare and Medicaid patients when reporting UDS data for health centers.

Health Centers Serve More Medicare and Medicaid Dual Eligibles than Other Ambulatory Care Providers

Nationally, 19% of the Medicare population is dually enrolled in Medicaid.

Figure 1-7

Sources:
1. 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Note: FPL = federal poverty level.
* Medicaid alone and not in combination with other insurance.
Sources: (1) 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS. (2) U.S. Census Bureau, 2019 American Community Survey 1-Year Estimates, Tables S1701, S2704, S2701
Health Center Patients are Disproportionately Members of Racial/Ethnic Minority Groups

Nationally, 62% of the health center patients are members of racial/ethnic minorities compared to 40% of the general U.S. population.

Notes: Figures may not add to 100% due to rounding and patients of Hispanic ethnicity can identify with any racial category. Based on known race and/or ethnicity.
Sources: (1) 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS. Note: National racial/ethnic minority estimate calculated using the Reference Guide for UDS Data Reports Available to Health Centers, CY 2019, Bureau of Primary Health Care, HRSA, DHHS. (2) U.S. Census Bureau, 2019 American Community Survey 1-Year Estimates, Tables B03002 and B02010.
Figure 1-10

Health Center Patients Suffer from Chronic Conditions at Higher Rates than the General Population

Percent of Adults who Report Ever Being Told They Have:

- Hypertension
  - U.S. Population: 32%
  - Health Center: 45%

- High Cholesterol
  - U.S. Population: 36%
  - Health Center: 42%

- Asthma
  - U.S. Population: 14%
  - Health Center: 21%

- Diabetes*
  - U.S. Population: 11%
  - Health Center: 21%

Percent Reporting:

- Health is Fair or Poor
  - U.S. Population: 18%
  - Health Center: 42%

* Other than during pregnancy.

Note: Includes only adult population ages 18 and older.

Figure 1-11

Health Center Patients are Growing Increasingly Complex, with Higher Rates of Chronic Conditions than in Previous Years

Percent Growth in Health Center Patients Diagnosed with Selected Chronic Conditions, 2013 - 2017

* COPD = chronic obstructive pulmonary disease
** Excludes tobacco and alcohol use disorders

Any chronic condition

2 or more chronic conditions

Health Centers have 35% Higher Odds than Private Practices

Health Centers have 31% Higher Odds than Private Practices

Note: Rates are based on primary care and mental health visits.
Figure 1-13

Health Centers Serve Patients Throughout the Life Cycle

Selected Age Groups, Represented Two Ways

- Ages 18-44: 35%
- Ages 45-64: 24%
- Ages 65+: 10%
- Under 18: 31%
- Ages 5-12: 14%
- Ages 13-17: 8%
- Ages 18-19: 3%
- Ages 20-44: 33%
- Ages 45-64: 24%
- Ages 65+: 10%

Source: 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Health Center Patients Ages 65 and Older are the Fastest Growing Age Group

Number of Health Center Patients by Age Group, 2014 - 2019

- **Ages 18 – 44**
  - 2014: 8,366,216
  - 2019: 10,580,275
  - 26% Growth

- **Under 18**
  - 2014: 7,154,362
  - 2019: 9,204,942
  - 29% Growth

- **Ages 45-64**
  - 2014: 5,606,825
  - 2019: 7,186,895
  - 28% Growth

- **Ages 65+**
  - 2014: 1,745,840
  - 2019: 2,864,501
  - 64% Growth

Source: 2013 & 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Nationally, there are 1,385 federally-funded health center organizations.
Figure 2-2
Growth in Health Center Organizations and Sites, 2009 - 2019

Source: 2009 - 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Figure 2-3
Growth in Health Center Patients and Visits, 2009 - 2019

Source: 2009 - 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
The Health Resources and Services Administration (HRSA) defines enabling services as, “non-clinical services that do not include direct patient services that enable individuals to access health care and improve health outcomes.” Examples of enabling services include case management, translation/interpretation, transportation, and health education. (HRSA Health Center Program Terms and Definitions, n.d.).

Pharmacy services only include staff employed by health centers and do not include contract pharmacies operating in health center sites.

Four or more services are based on service types provided in the chart: enabling services, behavioral health, dental, pharmacy, and/or vision. The maximum number of services is five.

Source: 2010 & 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Figure 2-5

Health Centers Have Higher Rates of Accepting New Patients Compared to Other Primary Care Providers

<table>
<thead>
<tr>
<th>Category</th>
<th>Private Practice Physicians</th>
<th>Health Centers</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Medicaid Patients</td>
<td>73%</td>
<td>99%</td>
</tr>
<tr>
<td>New Medicare Patients</td>
<td>87%</td>
<td>97%</td>
</tr>
<tr>
<td>New Private Insurance Patients</td>
<td>92%</td>
<td>93%</td>
</tr>
<tr>
<td>New Self-Pay / Uninsured Patients</td>
<td>95%</td>
<td>99%</td>
</tr>
<tr>
<td>Any New Patients</td>
<td>95%</td>
<td>99%</td>
</tr>
</tbody>
</table>

Figure 2-6

Health Center Patients by Insurance Status, 2009 – 2019
(In Millions)

Source: 2009 - 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Nationally, health centers serve 19% of all Medicaid beneficiaries.

Notes: National figure excludes health center Medicaid patients in territories and does not include Puerto Rico. Binned by quartile for states and territories shown. Sources: NACHC Analysis of (1) 2019 Uniform Data System (UDS), Bureau of Primary Health Care, HRSA, BPHC. (2) Kaiser Family Foundation. Monthly Medicaid and CHIP Enrollment, December 2019. (3) Puerto Rico estimate based on NACHC analysis of 2019 UDS and U.S. Census Bureau, 2019 American Community Survey 1-Year Estimates, Table S2704.
Figure 2-8

Percent of the Uninsured Population Served by Health Centers, 2019

Nationally, health centers provide care to 23% of the uninsured population.

Notes: National figure includes health centers in every state, DC, and Puerto Rico. Binned by quartile for states and territories shown. Sources: (1) NACHC Analysis of 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS. (2) U.S. Census Bureau. 2019 American Community Survey, 1-Year Estimates, Table S2701.
Section 3
High Quality Care and Reducing Health Disparities
To see a comparison of the prevalence of chronic conditions for health center patients, see Figures 1-10 and 1-11.

Estimated percentage of hypertensive patients with blood pressure < 140/90.

Estimated percentage of diabetic patients with Hba1c < 9% for diabetes.

Many Health Centers Exceed Healthy People 2020 Goals

Note: Healthy People 2020 goals are based on national health objectives to identify and reduce the most significant, preventable threats to health. For more on Healthy People 2020, visit https://www.cdc.gov/dhdsp/hp2020.htm

Health Center Patients Have Lower Rates of Low Birth Weight than National Average, Despite Health Centers Serving More At-Risk Patients

Figure 3-3

<table>
<thead>
<tr>
<th>Race</th>
<th>National</th>
<th>Health Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Births</td>
<td>8.3%</td>
<td>8.1%</td>
</tr>
<tr>
<td>White</td>
<td>7.1%</td>
<td>7.1%</td>
</tr>
<tr>
<td>Hispanic / Latino</td>
<td>7.6%</td>
<td>6.7%</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>8.1%</td>
<td>6.4%</td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
<td>7.5%</td>
<td>8.1%</td>
</tr>
<tr>
<td>Asian</td>
<td>8.7%</td>
<td>7.6%</td>
</tr>
<tr>
<td>More than One Race</td>
<td>9.0%</td>
<td>7.8%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>13.8%</td>
<td>12.0%</td>
</tr>
</tbody>
</table>

Sources: (1) 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS. (2) NACHC analysis of CDC WONDER. Data downloaded November 5, 2020.
Enabling Services* are a Defining Characteristic of Health Centers and Help Improve Access to Care and Patient Satisfaction

Health Center Patients Who Used Enabling Services* Had:

- **1.9 more health center visits** in the past year (on average)
- **A 12 percentage-point higher likelihood** of getting a routine checkup
- **A 16 percentage-point higher likelihood** of getting a flu shot
- **An 8 percentage-point higher likelihood** of being satisfied with care

* The Health Resources and Services Administration (HRSA) defines enabling services as, “non-clinical services that do not include direct patient services that enable individuals to access health care and improve health outcomes.” Examples of enabling services include case management, translation/interpretation, transportation, and health education. (HRSA Health Center Program Terms and Definitions, n.d.).

Note: This figure compares health center patients who used enabling services to patients that did not use enabling services.
Health Centers Exceed Medicaid Managed Care Organization (MCO) High Performance Benchmark Scores

**Notes:** 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; Pap tests: share of female patients age 24 – 64 who received Pap test within past three years.

## Health Centers Provide More Preventive Services than Other Primary Care Providers

<table>
<thead>
<tr>
<th>Service</th>
<th>Patient Visits to Other Providers</th>
<th>Health Center Patient Visits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid Patients Receiving New Medication</td>
<td>9%</td>
<td>21%</td>
</tr>
<tr>
<td>for Uncontrolled Hypertension</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asthma Education for Asthmatic Patients</td>
<td>15%</td>
<td>24%</td>
</tr>
<tr>
<td>Tobacco Cessation Education for Smoking Patients</td>
<td>19%</td>
<td>33%</td>
</tr>
<tr>
<td>Health Education</td>
<td>37%</td>
<td>51%</td>
</tr>
<tr>
<td>Immunization for 65 Years &amp; Older</td>
<td>65%</td>
<td>70%</td>
</tr>
<tr>
<td>Pap Smear in the Last 3 Years</td>
<td>81%</td>
<td>85%</td>
</tr>
</tbody>
</table>

HRSA-funded Health Centers Are an Important Source of Care and Reduce Unmet Needs in Primary Care Services, Medical Care 57(12) - p. 996-1001. December 2019.
Figure 3-8

Women at Health Centers are More Likely to Receive **Mammograms** than Their Counterparts Nationally

<table>
<thead>
<tr>
<th></th>
<th>Uninsured</th>
<th>In Poverty*</th>
<th>Hispanic</th>
<th>Black</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>National</strong></td>
<td>30%</td>
<td>52%</td>
<td>61%</td>
<td>70%</td>
</tr>
<tr>
<td><strong>Health Centers</strong></td>
<td>63%</td>
<td>69%</td>
<td>76%</td>
<td>82%</td>
</tr>
</tbody>
</table>

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

**Figure 3-9**

Women at Health Centers are More Likely to Receive **Pap Smears** than Their Counterparts Nationally

<table>
<thead>
<tr>
<th>Category</th>
<th>National</th>
<th>Health Centers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uninsured</td>
<td>57%</td>
<td>76%</td>
</tr>
<tr>
<td>In Poverty*</td>
<td>63%</td>
<td>82%</td>
</tr>
<tr>
<td>Black</td>
<td>75%</td>
<td>89%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>69%</td>
<td>92%</td>
</tr>
</tbody>
</table>

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

Sources:
Includes individuals below 100% FPL or at 100% FPL and below.

Health Centers Have Higher Odds of Delivering High-Value Care and Avoiding Low-Value Screenings Compared to Private Practices

**Figure 3-11**

Measures of High-Value Care

- Prescribing Statins in Diabetes
- Prescribing Treatment for Osteoporosis
- Prescribing β-Blockers in CHF*

Measures of Low-Value Care (To Avoid)

- Avoid EKG* Screening at General Medical Exam**
- Avoid Urinalysis at General Medical Exam**
- Avoid CBC* Screening at General Medical Exam**

Health Centers Have **1.4 Greater Odds** to Succeed On This Measure than Private Practices.

Note: Health centers performed better on an additional measure not shown in the figure. Health centers had 41% lower odds of prescribing antibiotics for an upper respiratory infection, a measure of low-value care.

Percent of Health Centers with Patient-Centered Medical Home Recognition, December 2019

Nationally, 76% of health centers have achieved Patient-Centered Medical Home recognition.

Notes: National figure includes all 1,385 health centers in every state, territory, and D.C. Some territories are not shown in the map above. Binned by quantile for states and territories shown. Source: Communication with the Bureau of Primary Health Care, HRSA, DHHS, November–December 2020.
Health Centers are Leaders in Patient-Centered Medical Home (PCMH) Certification and Adoption of PCMH Elements

Figure 3-13

8 Greater Odds of Attaining PCMH Certification.

Health Centers have higher odds of PCMH certification compared to other health care practices.

Patient Centered Medical Home Certification Likelihood by Practice

Federally Qualified Health Centers
Managed care/health maintenance organization
Academic
Hospital/health system
Federal military

Section 4
Cost-Effective Care
Health Centers are Increasingly Participating in New Payment and Delivery System Models

Percent of Health Centers Reporting that Their Organization:

- Could Receive Financial Incentives for High Patient Satisfaction:
  - 2013: 23%
  - 2018: 37%

- Currently Participates in an Accountable Care Organization:
  - 2013: 27%
  - 2018: 39%

- Could Receive Financial Incentives for Achieving Clinical Care Targets:
  - 2013: 51%
  - 2018: 75%

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

Figure 4-2

<table>
<thead>
<tr>
<th>Service</th>
<th>Non-Health Centers</th>
<th>Health Centers</th>
<th>Savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Room</td>
<td>$1,845</td>
<td>$1,430</td>
<td>23%</td>
</tr>
<tr>
<td>Primary Care</td>
<td>$2,047</td>
<td>$1,496</td>
<td>27%</td>
</tr>
<tr>
<td>Inpatient Care</td>
<td>$2,948</td>
<td>$1,964</td>
<td>33%</td>
</tr>
<tr>
<td>Other Outpatient Care</td>
<td>$2,704</td>
<td>$2,324</td>
<td>14%</td>
</tr>
<tr>
<td>Rx Drug Spending</td>
<td>$9,889</td>
<td>$7,518</td>
<td>33%</td>
</tr>
<tr>
<td>Total Spending</td>
<td>$11%</td>
<td></td>
<td>24%</td>
</tr>
</tbody>
</table>

Note: Non-health centers include private physician offices and outpatient clinics.
Other Providers (or "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.

Health Center Medicaid Revenues as a Percent of Total Medicaid Expenditures

Nationally, health center revenues account for 2.2% of Medicaid service expenditures...

...While serving 19% of all Medicaid beneficiaries. (see figure 2-7)

Note: Medicaid expenditures do not include administrative costs, accounting adjustments or U.S. territories. National figure only includes health centers in the 50 states and DC. Sources: NACHC analysis of (1) 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS. (2) Kaiser Family Foundation. Total Medicaid Spending FY 2019. State Health Facts.
Figure 4-5

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

Costs for health center Medicare patients are 10% lower than physician office patients and 30% lower than outpatient clinics.

Medicare Spending is Lower in Areas Where Health Centers Serve More Low-Income Residents

- **Low Health Center Penetration Area**
  - Total Cost Per Medicare Beneficiary: $9,542

- **All Areas**
  - Total Cost Per Medicare Beneficiary: $9,222

- **High Health Center Penetration Area**
  - Total Cost Per Medicare Beneficiary: $8,616

**Areas with high health center penetration have 10% ($926) lower Medicare spending per beneficiary.**

Note: High health center penetration corresponds to a 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%.

Figure 4-7

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

<table>
<thead>
<tr>
<th></th>
<th>Other Providers</th>
<th>Health Centers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Emergency Dept.</strong></td>
<td>$106</td>
<td>$179</td>
</tr>
<tr>
<td><strong>Prescription Drugs</strong></td>
<td>$320</td>
<td>$163</td>
</tr>
<tr>
<td><strong>Ambulatory Care</strong></td>
<td>$697</td>
<td>$418</td>
</tr>
<tr>
<td><strong>Total Spending</strong></td>
<td>$1,751</td>
<td>$1,133</td>
</tr>
</tbody>
</table>

*69% Higher Spending

49% Lower Spending

40% Lower Spending

Health Centers Save $1,263 (or 24%) Per Patient Per Year

Total Health Expenditures Per Patient Per Year

Non-Health Center Users: $5,306
Health Center Users: $4,043

Section 5
Health Center Services and Staffing
Figure 5-1

Growth in Health Center Clinical Staff, 2009 – 2019

In Full-Time Equivalent

<table>
<thead>
<tr>
<th>Medical Staff</th>
<th>2009</th>
<th>2019</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physicians</td>
<td>9,125</td>
<td>14,083</td>
<td>54%</td>
</tr>
<tr>
<td>Behavioral Health Staff</td>
<td>4,510</td>
<td>15,679</td>
<td>248%</td>
</tr>
<tr>
<td>NPs, PAs, CNMs</td>
<td>5,758</td>
<td>14,591</td>
<td>153%</td>
</tr>
<tr>
<td>Nurses</td>
<td>10,626</td>
<td>19,273</td>
<td>81%</td>
</tr>
<tr>
<td>Dental Staff</td>
<td>8,474</td>
<td>19,698</td>
<td>132%</td>
</tr>
</tbody>
</table>

Notes: NP, PA, CNM stand for Nurse Practitioners, Physician Assistants, Certified Nurse Midwives, respectively. Behavioral health staff includes mental health and substance abuse staff.
Source: 2009 & 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS
Figure 5-2

Health Center Care Team Staff Provide a Broad Array of Services

Total Care Team: 163,922 Full-Time Equivalent (FTE)

- Medical Services: 54%
- Enabling Services & Other Programs: 19%
- Dental Services: 12%
- Behavioral Health: 10%
- Vision Services: 0.6%
- Other Professional Services: 1.2%
- Pharmacy Services: 4%

Note: Percentages may not add to 100% due to rounding.
Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Health Centers Test Hundreds of Thousands of Patients for COVID-19 Each Week in 2020

Each week, 194,900 health center patients were tested and 25,300 tested positive.*

*Percentages are based on an average of weekly data collected between April 3 and February 25, 2020; response rate varied from 56% to 72%. Note: Survey data are preliminary and do not reflect all health centers. Some duplication of patients and staff tested from week to week may occur. For more information, please visit https://bphc.hrsa.gov or contact research@nachc.org.
Source: Bureau of Primary Health Care, Health Resources and Services Administration, Health Center COVID-19 Survey.
Health Centers Rapidly Expanded Their Ability to Test Patients for COVID-19

Note: Data is from survey collected between April 3 and November 6 2020, response rate varied from 68% - 72%. For more information, please visit https://bphc.hrsa.gov or contact research@nachc.org.

Source: Bureau of Primary Health Care, Health Resources and Services Administration, Health Center COVID-19 Survey.
Figure 5-5
Health Center Medical Services Staff, 2019
Total Medical Team: 86,401 Full-Time Equivalent

* Total Care Team is shown in Figure 5-2.
Notes: NP/PA/CNM stands for Nurse Practitioners, Physician Assistants, and Certified Nurse Midwives. Other Medical Personnel include, but are not limited to, medical assistants, nurses’ aides, laboratory personnel and X-Ray personnel. Percentages may not add to 100% due to rounding.
Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5-6
Health Centers are Hiring Non-Physician Providers at Higher Rates than Physicians

As of 2018, health centers employed more NP/PA/CNMs than physicians.

Notes: NP, PA, and CNM stand for Nurse Practitioner, Physician Assistant, and Certified Nurse Midwife, respectively. Source: 2009 - 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5-7

Health Center Enabling Services & Other Programs Staff, 2019

Total: 29,872 Full-Time Equivalent

- Case Managers: 34%
- Eligibility Assistance Workers: 15%
- Patient/Community Education Specialists: 9%
- Outreach Workers: 9%
- Community Health Workers: 5%
- Other Programs/Services: 19%
- Other Enabling Services: 2%
- Transportation Staff: 3%
- Interpretation Staff: 4%

* Total Care Team is shown in Figure 5-2.
Note: Percentages may not add to 100% due to rounding.
Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Nationally, 83% of health centers provide case management onsite.

Notes: National figure includes all 1,385 health centers in every state, territory, and D.C. Some territories are not shown in the map above. Binned by quartile for states and territories shown. Based on the number of health centers employing more than 0 full-time equivalent case management staff.

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5-9
Health Center Dental Staff, 2019
Total: 19,698 Full-Time Equivalent

- Dentists: 27%
- Dental Hygienists: 14%
- Dental Assistants, Aides, Techs, Other: 58%
- Share of Total Care Team: 12%

* Total Care Team is shown in Figure 5-2.
Note: Percentages may not add to 100% due to rounding.
Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Nationally, 81% of health centers provide dental services onsite.

Notes: National figure includes all 1,385 health centers in every state, territory, and D.C. Some territories are not shown in the map above. Binned by quartile for states and territories shown. Based on the number of health centers employing more than 0 full-time equivalent dental staff. Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5-11
Health Center Behavioral Health Staff, 2019
Total: 15,679 Full-Time Equivalent

- Licensed Clinical Social Workers: 31%
- Psychiatrists: 6%
- Licensed Clinical Psychologists: 6%
- Substance Use Disorder Services: 14%
- Other Mental Health Staff: 19%
- Other Licensed Mental Health Providers: 26%

Share of Total Care Team*

* Total Care Team is shown in Figure 5-2.
Note: Percentages may not add to 100% due to rounding.
Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Nationally, 97% of health centers provide behavioral health services onsite.

Notes: National figure includes all 1,385 health centers in every state, territory, and D.C. Some territories are not shown in the map above. Behavioral Health includes mental health and substance abuse services. Percentages offering services onsite calculated by including all health centers with more than 0 full-time equivalents for each service.

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Health centers have responded to an increasing need for Substance Use Disorder (SUD) treatment and therapy by building their capacity and integrating care.

Health centers have tripled their behavioral health staff over the past 10 years.

Health center providers performed evidence-based screening, intervention, and referral procedure (SBIRT) for more than 1.3 million patients in 2019.

There are 7,100 health center physicians, certified nurse practitioners, and physician assistants with authorization to provide medication-assisted treatment for opioid addiction.

Nearly 143,000 patients received medication-assisted treatment for opioid use disorder in 2019.

Source: 2010 & 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Health Centers Have Responded to an Increasing Need for Substance Use Disorder (SUD) Treatment and Therapy by Seeing More Patients

Health centers have experienced a more than six-fold increase in patients seeking treatment for opioids and other SUDs.

**Patients for SUD Services 2010 vs. 2019**
- 2010: 1,232.3K, 110.0K
- 2019: 637K, 73.1K

**Visits for SUD Services 2010 vs. 2019**
- Tobacco Cessation: 2010: 157.5K, 2019: 2,356.5K
- Other SUD (Including Opioids): 2010: 700.8K, 2019: 3,010.2K
- Alcohol Dependence: 2010: 310.9K, 2019: 1,249.6K

K = Thousands
Source: 2010 & 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Nationally, 26% of health centers provide vision services onsite.

Notes: National figure includes all 1,385 health centers in every state, territory, and D.C. Some territories are not shown in the map above. Binned by quartile for states and territories shown. Based on the number of health centers employing more than 0 full-time equivalent vision staff. Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5-16

Percent of Health Centers Offering Pharmacy* Services Onsite, 2019

Nationally, 48% of health center provide pharmacy services onsite.

* Pharmacy services only include staff employed by health centers and do not include contract pharmacies operating in health center sites.

Notes: Figures do not include contract pharmacies operating in health centers. Based on the number of health centers employing more than 0 full-time equivalent pharmacy staff. National figure includes all 1,385 health centers in every state, territory, and D.C. Some territories are not shown in the map above. Binned by quartile for states and territories shown.

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Nationally, 45% of health centers offer four or more services in addition to medical care.

*Pharmacy services only include staff employed by health centers and do not include contract pharmacies operating in health center sites.

Notes: National figure includes all 1,385 health centers in every state, territory, and D.C. Some territories are not shown in the map above. Based on the number of health centers employing more than 0 full-time equivalent staff in each service type.

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Nationally, 43% of health centers use telehealth.

Notes: National figure includes all 1,385 health centers in every state, territory, and D.C. Some territories are not shown in the map above. Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Figure 5-19

Health Centers are Using Telehealth to Expand Access to Needed Services

Number of Health Centers Offering Selected Telehealth Services by Urban/Rural Status, 2019

- Behavioral Health: 226 Urban, 232 Rural (458 total)
- Primary Care*: 89 Urban, 104 Rural (193 total)
- Health Consultation and Education**: 87 Urban, 82 Rural (169 total)
- Manage Chronic Conditions: 51 Urban, 60 Rural (111 total)
- Dermatology: 25 Urban, 36 Rural (61 total)
- Oral Health: 19 Urban, 16 Rural, 35 total
- Disaster Management: 5 Urban, 6 Rural, 10 total
- Other: 53 Urban, 36 Rural, 89 total
- 2 or More Services: 168 Urban, 170 Rural (338 total)

Nationally, 592 (43%) of health centers use telehealth for a variety of services.

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.

*Primary care includes radiology
**Health Consultation and Education includes consumer health education, provider-to-provider consultation, nutrition and dietary consultation
Health Centers are Adopting Innovative Telehealth Services
At Higher Rates than Other Primary Care Providers

Providers Using Telehealth for:

- Consulting with Other Providers
  - Primary Care Physicians: 8%
  - Health Centers: 26%
- Interacting with Patients
  - Primary Care Physicians: 13%
  - Health Centers: 23%

Telehealth Modalities Used:

- Remote Patient Monitoring
  - Primary Care Physicians: 7%
  - Health Centers: 2%
- Store and Forward
  - Primary Care Physicians: 7%
  - Health Centers: 9%
- Video-Conferencing
  - Primary Care Physicians: 10%
  - Health Centers: 38%

Note: Percentages for health centers base on all health centers, including those that do or do not use telehealth in 2018.
Figure 5-21

Percent of Health Centers Using Telehealth for Interacting with Patients, 2019

(Note: Percentages include only health centers utilizing telehealth)

Nationally, 60% of health centers utilizing telehealth used it to interact with patients.

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Nationally, 56% of health centers utilizing telehealth used it to consult with other providers.

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Behavioral health includes services for mental health and substance use disorder; Enabling services include case management and education specialist services; Other services include vision, dental, and other professional services.

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.
Section 6

Challenges in Meeting Demand for Care
Figure 6-1

Payments from Third Party Payers are Less than Cost

Note: Health centers are non-profits, and thus charges are a proxy for costs.
Source: 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Billions.

*Includes Continuing Resolutions and Health Extender Legislation; Health center mandatory funding for FY20 was not the result of a full reauthorization of the Community Health Center Fund (CHCF), but was covered by a collection of short-term extensions of the previous authorization of the CHCF which occurred in 2018 and initially expired on September 30, 2019.

Source: Federal appropriations are for consolidated health centers under PHSA Section 330. Federally-funded health centers only.
Health Center Operating Margins Are Less than Hospital Operating Margins

Note: Operating margin data for hospitals after 2016 are unavailable.
Calculated by taking the difference between 2019 health center total cost per patient (all patients) and 2019 health center funding per uninsured patient, then multiplying by the number of health center uninsured patients in 2019.

Source: 2008 - 2019 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.
Health Centers Experience Difficulty Recruiting Many Clinical Staff

Percent of Health Centers Reporting a Vacancy for Specific Clinical Positions

- Any Clinical Vacancy: 95%
- Family Physician: 69%
- Nurse Practitioner: 50%
- Medical Assistant: 48%
- Registered Nurse: 41%
- Licensed Clinical Social Worker: 38%
- Dentist: 37%
- Licensed Practical Nurse / Licensed Vocational Nurse: 31%
- Internist: 23%
- Pediatrician: 19%
- Psychiatrist: 18%
- Physician Assistant: 16%
- Other Licensed Mental Health and/or Substance Abuse Staff: 16%
- Dental Hygienist: 16%
- OB / GYN: 13%
- Psychologist: 9%
- Non-Licensed Mental Health and/or Substance Abuse Staff: 8%
- Pharmacist: 7%
- Vision Services Staff: 6%
- Certified Nurse Midwife: 6%

Figure 6-6
Health Centers Have Unique Challenges Recruiting and Retaining Staff
Percent of Health Centers Reporting Specific Challenges for Recruitment and Retention

Health Centers Face Barriers to Offering Telehealth Services

Percent of Health Centers that Do Not Use Telehealth Reporting Specific Barriers, 2019

Urban (491 Out of 800 Not Using Telehealth)

- Lack of Funding for Equipment: 32%
- Lack of Training for Telehealth: 22%
- Policy Barriers*: 20%
- Not Needed: 15%
- Have Not Considered Telehealth: 9%
- Inadequate Broadband/Telecommunication Service**: 8%
- Other: 39%
- 2 or More Reasons: 33%

Rural (302 Out of 585 Not Using Telehealth)

- Lack of Funding for Equipment: 25%
- Lack of Training for Telehealth: 24%
- Policy Barriers*: 24%
- Not Needed: 13%
- Have Not Considered Telehealth: 10%
- Inadequate Broadband/Telecommunication Service**: 19%
- Other: 33%
- 2 or More Reasons: 31%

Source: 2019 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.

*Policy barriers include lack of or limited reimbursement; credentialing, licensing, or privileging; or privacy and security.

**Inadequate broadband/telecommunication service includes cost of service or lack of infrastructure.
As of 2013, 62 million people experience inadequate or no access to primary care because of shortages of physicians in their communities.

As of 2021, 97% of health centers had plans to initiate capital projects within the next several years. These plans represent more than 2,000 capital projects. These planned projects are estimated to cost $17.5 billion, resulting in 38.5 million patients by 2025.

However, almost half of health centers report they are uncertain they can secure funding for these planned projects.