

## What are Community Health Centers?

Community, Migrant, and Homeless Health Centers are **non-profit, community-directed providers** that remove common barriers to care by serving communities who otherwise confront financial, geographic, language, cultural and other barriers. Also known as Federally-Qualified Health Centers (FQHCs), they:

- are **located in high-need areas** identified as having elevated poverty, higher than average infant mortality, and where few physicians practice;
- are **open to all residents**, regardless of insurance status or ability to pay;
- **tailor services** to fit the special needs and priorities of their communities, and provide services in a linguistically and culturally appropriate manner;
- provide **comprehensive primary and other health care services**, including services that help their patients access care, such as transportation, translation, and case management;
- **provide high quality care**, reducing health disparities and improving patient outcomes;<sup>1</sup> and
- are **cost effective**, reducing costly emergency, hospital, and specialty care, and **saving the health care system \$24 billion a year nationally.**<sup>2</sup>

## Alaska Federally-Supported Health Centers, 2008

Number of Organizations	26
Number of Delivery Sites	174
Total Patients	81,109
Number Migrant/Seasonal Farmworker Patients	210
Number Homeless Patients	1,284

	Health Center Population	State Population <sup>3</sup>	US Population <sup>3</sup>
Percent <b>at or Below 100% of Poverty</b>	48%	12%	17%
Percent <b>Under 200% of Poverty</b>	79%	27%	32%
Percent <b>Uninsured</b>	40%	19%	15%
Percent <b>Medicaid</b>	22%	12%	14%
Percent <b>Medicare</b>	8%	7%	12%
Percent <b>Hispanic/Latino</b>	4%	6%	15%
Percent <b>African American</b>	3%	4%	13%
Percent <b>Asian/Pacific Islander</b>	6%	5%	5%
Percent <b>American Indian/Alaska Native</b>	36%	15%	1%
Percent <b>White</b>	41%	71%	80%
Percent <b>Rural</b>	77%	31%	16%

Race/Ethnicity may not sum to 100% due to rounding and non-inclusion of two or more races. 0% may indicate <0.5%. Rural data from 2007.

## Percent of Vulnerable Alaska Residents Served by Federally-Supported Health Centers<sup>4</sup>

Percent of <b>Low Income, Uninsured</b> , 2008	50%
Percent of <b>Medicaid Beneficiaries</b> , 2006	14%
Percent of <b>Population at or Below 100% of Poverty</b> , 2008	50%

## Economic Benefits of Federally-Supported Health Centers

Wasted Expenditures on <b>Avoidable Emergency Department Visits</b> , 2006 <sup>5</sup>	\$32,732,965
<b>Economic Benefits Generated</b> for Local Communities, 2006 <sup>6</sup>	\$144,528,348

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Data for federally-funded health centers only and may therefore underreport the true volume of care. See note below.

## Health Center Staff and Related Patient Visits

	FTE*	Patient Visits
Primary Care Physicians	30.1	75,368
NPs/PAs/CNMs	75.9	115,468
Nurses	31.2	3,851
Dentists	16.5	38,778
Dental Hygienists	6.9	7,044
Behavioral Health Specialists <sup>#</sup>	45.3	10,439
Pharmacy	17.6	N/A
Total Enabling Services <sup>†</sup>	57.1	11,661
Other Staff	697.0	N/A
<b>Total</b>	<b>977.5</b>	<b>369,398</b>

\* Full-time equivalent.

<sup>#</sup> Includes psychiatrists, psychologists, and licensed or credentialed behavioral health providers.

<sup>†</sup> Includes outreach workers, health educators, case managers, translators, transportation, eligibility assistance workers, and child care workers. Not all staff have related patient visits.

## Patient Visits and Patients by Selected Primary Diagnoses and Services

	Patient Visits	Patients
<b>Medical Conditions</b>		
Hypertension	13,292	5,901
Diabetes mellitus	9,556	3,710
Heart Disease (Selected)	3,668	1,570
Asthma	3,069	1,810
Depression & Other Mood Disorders	6,623	3,112
All Mental Health & Substance Abuse	20,520	N/A
<b>Preventive Services</b>		
Health Supervision Ages 0-11*	7,880	5,028
Selected Immunizations <sup>#</sup>	13,534	10,676
Oral Dental Exams	17,063	15,229
Pap Test	6,639	6,206
Mammogram	2,043	1,965
HIV Test	2,180	2,080

\* Well child visits. <sup>#</sup> Includes DPT, MMR, polio, influenza, hepatitis A & B, HiB, etc.

## Health Centers Providing Select Services Onsite\*

<b>Professional Services</b>	
General Primary Medical Care	100%
Prenatal Care	92%
Preventive Dental Care	69%
Mental Health Treatment/Counseling	92%
Substance Abuse Treatment & Counseling	81%
Hearing Screening	69%
Vision Screening	100%
Pharmacy	27%
<b>Preventive Services</b>	
Smoking Cessation Program	81%
HIV Testing And Counseling	92%
Glycosylated Hemoglobin Measurement, Diabetes	88%
Blood Pressure Monitoring	100%
Blood Cholesterol Screening	100%
Weight Reduction Program	77%
<b>Enabling Services</b>	
Case Management	88%
Eligibility Assistance	88%
Health Education	96%
Interpretation/Translation Services	85%
Transportation	58%
Out stationed Eligibility Workers	8%

\* "Onsite" includes services rendered by employees, contracted providers, volunteers and others who render services in the health center's name. Health centers may also provide services through formal referral arrangements. Data based on 2007 UDS.

## Health Center Costs of Care

<b>Average Cost per Patient</b>	
Medical Costs per Medical Patient*	\$825
Dental Costs per Dental Patient	\$477
Total Cost per Total Patient <sup>#</sup>	\$1,343
<b>Average Cost per Patient Visit</b>	
Medical Cost per Medical Patient Visit	\$298
Dental Costs per Dental Patient Visit	\$228

\* Excludes lab and x-ray as in previous years.

<sup>#</sup> Includes the total cost of all services over total users.

### Sources and Notes

Unless otherwise specified, this fact sheet is based on Bureau of Primary Health Care, HRSA, DHHS, 2008 Uniform Data System (UDS). It includes data from Federally-Qualified Health Centers (FQHCs) that receive federal health center grants and are therefore required to report administrative, clinical and other information. Data do not account for a category of FQHCs that does not receive these funds, known as FQHC Look-Alikes. There are approximately 100 FQHC Look-Alikes across the United States. Consequently, data reflected in this fact sheet may underreport the true volume of care delivered by health centers.

Numbers provided in this document may vary from other sources. For additional information on federally-funded service delivery sites in Alaska, including satellite sites, please visit [www.alaskapca.org](http://www.alaskapca.org).

<sup>1</sup> See Summaries of Literature on Health Centers, Quality of Care, [www.nachc.com/research](http://www.nachc.com/research).

<sup>2</sup> GWU, *Using Primary Care to Bend the Curve: Estimating the Impact of a Health Center Expansion on Health Care Costs*, September 2009, [www.gwhealthpolicy.org](http://www.gwhealthpolicy.org).

<sup>3</sup> Kaiser Family Foundation, State Health Facts Online, [www.statehealthfacts.org](http://www.statehealthfacts.org). U.S. Census Bureau, Table 4: Annual Estimates of the Population by Race Alone and Hispanic or Latino Origin for the United States and States: July 2008. Released May 2009. [www.census.gov/popest/states/](http://www.census.gov/popest/states/).

<sup>4</sup> Compares health center UDS data to state population data, respectively. State population data come from Kaiser Family Foundation, State Health Facts Online. [www.statehealthfacts.kff.org](http://www.statehealthfacts.kff.org).

<sup>5</sup> NACHC and Association of Community Affiliated Plans, *The Impact of Health Centers and Community-Affiliated Health Plans on Emergency Department Use*, April 2007, [www.nachc.com/research](http://www.nachc.com/research).

<sup>6</sup> NACHC, Robert Graham Center, and Capital Link, *Access Granted*, August 2007, [www.nachc.com/research](http://www.nachc.com/research).

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