

## 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>

## Idaho Federally-Supported Health Centers, 2008

Number of Organizations	11
Number of Delivery Sites	70
Total Patients	108,756
Number Migrant/Seasonal Farmworker Patients	10,177
Number Homeless Patients	2,963

	Health Center Population	State Population <sup>3</sup>	US Population <sup>3</sup>
Percent <b>at or Below 100% of Poverty</b>	62%	14%	17%
Percent <b>Under 200% of Poverty</b>	91%	36%	32%
Percent <b>Uninsured</b>	49%	15%	15%
Percent <b>Medicaid</b>	19%	11%	14%
Percent <b>Medicare</b>	9%	13%	12%
Percent <b>Hispanic/Latino</b>	30%	10%	15%
Percent <b>African American</b>	0%	1%	13%
Percent <b>Asian/Pacific Islander</b>	1%	1%	5%
Percent <b>American Indian/Alaska Native</b>	3%	2%	1%
Percent <b>White</b>	58%	95%	80%
Percent <b>Rural</b>	100%	37%	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 Idaho Residents Served by Federally-Supported Health Centers<sup>4</sup>

Percent of <b>Low Income, Uninsured</b> , 2008	37%
Percent of <b>Medicaid Beneficiaries</b> , 2006	8%
Percent of <b>Population at or Below 100% of Poverty</b> , 2008	31%

## Economic Benefits of Federally-Supported Health Centers

Wasted Expenditures on <b>Avoidable Emergency Department Visits</b> , 2006 <sup>5</sup>	\$88,713,842
<b>Economic Benefits Generated</b> for Local Communities, 2006 <sup>6</sup>	\$64,286,155

# Idaho Health Center Fact Sheet, 2008

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	39.5	117,878
NPs/PAs/CNMs	50.7	149,705
Nurses	57.5	32,509
Dentists	20.8	47,388
Dental Hygienists	6.0	5,599
Behavioral Health Specialists <sup>#</sup>	35.7	49,643
Pharmacy	14.5	N/A
Total Enabling Services <sup>†</sup>	47.4	12,803
Other Staff	390.7	N/A
<b>Total</b>	<b>662.7</b>	<b>418,798</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
<i>Medical Conditions</i>		
Hypertension	16,429	8,568
Diabetes mellitus	18,077	6,650
Heart Disease (Selected)	3,179	1,336
Asthma	2,951	1,952
Depression & Other Mood Disorders	23,460	7,623
All Mental Health & Substance Abuse	57,271	N/A
<i>Preventive Services</i>		
Health Supervision Ages 0-11*	14,236	7,952
Selected Immunizations <sup>#</sup>	20,971	16,016
Oral Dental Exams	22,712	18,009
Pap Test	8,657	7,904
Mammogram	1,696	1,651
HIV Test	1,576	1,538

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

## Health Centers Providing Select Services Onsite\*

<i>Professional Services</i>	
General Primary Medical Care	100%
Prenatal Care	70%
Preventive Dental Care	80%
Mental Health Treatment/Counseling	100%
Substance Abuse Treatment & Counseling	70%
Hearing Screening	80%
Vision Screening	90%
Pharmacy	40%
<i>Preventive Services</i>	
Smoking Cessation Program	50%
HIV Testing And Counseling	100%
Glycosylated Hemoglobin Measurement, Diabetes	70%
Blood Pressure Monitoring	100%
Blood Cholesterol Screening	90%
Weight Reduction Program	80%
<i>Enabling Services</i>	
Case Management	70%
Eligibility Assistance	90%
Health Education	100%
Interpretation/Translation Services	90%
Transportation	50%
Out stationed Eligibility Workers	40%

\* "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

<i>Average Cost per Patient</i>	
Medical Costs per Medical Patient*	\$340
Dental Costs per Dental Patient	\$438
Total Cost per Total Patient <sup>#</sup>	\$501
<i>Average Cost per Patient Visit</i>	
Medical Cost per Medical Patient Visit	\$114
Dental Costs per Dental Patient Visit	\$173

\* 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.

<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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