

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;¹ and
- are **cost effective**, reducing costly emergency, hospital, and specialty care, and **saving the health care system \$24 billion a year nationally**.²

Maryland Federally-Supported Health Centers, 2008

Number of Organizations	16
Number of Delivery Sites	126
Total Patients	238,998
Number Migrant/Seasonal Farmworker Patients	1,428
Number Homeless Patients	13,744

	Health Center Population	State Population ³	US Population ³
Percent at or Below 100% of Poverty	56%	15%	17%
Percent Under 200% of Poverty	82%	29%	32%
Percent Uninsured	27%	13%	15%
Percent Medicaid	38%	10%	14%
Percent Medicare	9%	11%	12%
Percent Hispanic/Latino	11%	7%	15%
Percent African American	48%	29%	13%
Percent Asian/Pacific Islander	2%	5%	5%
Percent American Indian/Alaska Native	1%	0%	1%
Percent White	38%	63%	80%
Percent Rural	39%	4%	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 Maryland Residents Served by Federally-Supported Health Centers⁴

Percent of Low Income, Uninsured , 2008	14%
Percent of Medicaid Beneficiaries , 2006	10%
Percent of Population at or Below 100% of Poverty , 2008	16%

Economic Benefits of Federally-Supported Health Centers

Wasted Expenditures on Avoidable Emergency Department Visits , 2006 ⁵	\$320,407,972
Economic Benefits Generated for Local Communities, 2006 ⁶	\$201,502,347

Maryland 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	145.1	580,788
NPs/PAs/CNMs	62.7	149,895
Nurses	135.6	67,073
Dentists	20.0	49,129
Dental Hygienists	3.9	9,842
Behavioral Health Specialists [#]	55.3	49,413
Pharmacy	23.4	N/A
Total Enabling Services [†]	179.8	101,891
Other Staff	1,142.3	N/A
Total	1,768.1	1,047,513

* Full-time equivalent.

[#] Includes psychiatrists, psychologists, and licensed or credentialed behavioral health providers.

[†] 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	56,390	27,135
Diabetes mellitus	41,060	13,860
Heart Disease (Selected)	5,949	3,262
Asthma	12,981	7,753
Depression & Other Mood Disorders	29,923	7,312
All Mental Health & Substance Abuse	93,893	N/A
<i>Preventive Services</i>		
Health Supervision Ages 0-11*	69,199	40,367
Selected Immunizations [#]	75,910	52,567
Oral Dental Exams	25,554	20,333
Pap Test	32,489	30,757
Mammogram	2,461	2,388
HIV Test	13,303	11,179

* Well child visits. [#] Includes DPT, MMR, polio, influenza, hepatitis A & B, HiB, etc.

Health Centers Providing Select Services Onsite*

<i>Professional Services</i>	
General Primary Medical Care	93%
Prenatal Care	53%
Preventive Dental Care	67%
Mental Health Treatment/Counseling	87%
Substance Abuse Treatment & Counseling	60%
Hearing Screening	87%
Vision Screening	93%
Pharmacy	27%
<i>Preventive Services</i>	
Smoking Cessation Program	67%
HIV Testing And Counseling	87%
Glycosylated Hemoglobin Measurement, Diabetes	60%
Blood Pressure Monitoring	93%
Blood Cholesterol Screening	67%
Weight Reduction Program	67%
<i>Enabling Services</i>	
Case Management	87%
Eligibility Assistance	87%
Health Education	93%
Interpretation/Translation Services	80%
Transportation	53%
Out stationed Eligibility Workers	33%

* "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*	\$480
Dental Costs per Dental Patient	\$294
Total Cost per Total Patient [#]	\$733
<i>Average Cost per Patient Visit</i>	
Medical Cost per Medical Patient Visit	\$133
Dental Costs per Dental Patient Visit	\$140

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

[#] 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.

¹ See Summaries of Literature on Health Centers, Quality of Care, www.nachc.com/research.

² 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.

³ Kaiser Family Foundation, State Health Facts Online, 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/.

⁴ 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.

⁵ 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.

⁶ NACHC, Robert Graham Center, and Capital Link, *Access Granted*, August 2007, www.nachc.com/research.

For more information, email research@nachc.com or visit www.massleague.org.

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