

## 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>

## New York Federally-Supported Health Centers, 2008

Number of Organizations	50
Number of Delivery Sites	508
Total Patients	1,283,511
Number Migrant/Seasonal Farmworker Patients	15,151
Number Homeless Patients	92,203

	Health Center Population	State Population <sup>3</sup>	US Population <sup>3</sup>
Percent <b>at or Below 100% of Poverty</b>	69%	20%	17%
Percent <b>Under 200% of Poverty</b>	86%	38%	32%
Percent <b>Uninsured</b>	28%	14%	15%
Percent <b>Medicaid</b>	41%	19%	14%
Percent <b>Medicare</b>	7%	12%	12%
Percent <b>Hispanic/Latino</b>	30%	17%	15%
Percent <b>African American</b>	30%	17%	13%
Percent <b>Asian/Pacific Islander</b>	4%	7%	5%
Percent <b>American Indian/Alaska Native</b>	0%	1%	1%
Percent <b>White</b>	28%	73%	80%
Percent <b>Rural</b>	12%	9%	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 New York Residents Served by Federally-Supported Health Centers<sup>4</sup>

Percent of <b>Low Income, Uninsured</b> , 2008	23%
Percent of <b>Medicaid Beneficiaries</b> , 2006	10%
Percent of <b>Population at or Below 100% of Poverty</b> , 2008	23%

## Economic Benefits of Federally-Supported Health Centers

Wasted Expenditures on <b>Avoidable Emergency Department Visits</b> , 2006 <sup>5</sup>	\$1,126,031,176
<b>Economic Benefits Generated</b> for Local Communities, 2006 <sup>6</sup>	\$1,143,732,348

# New York 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	794.7	2,924,103
NPs/PAs/CNMs	393.3	1,000,602
Nurses	849.5	217,508
Dentists	219.1	506,525
Dental Hygienists	66.0	119,585
Behavioral Health Specialists <sup>#</sup>	287.3	281,393
Pharmacy	6.7	N/A
Total Enabling Services <sup>†</sup>	930.3	435,840
Other Staff	5,286.6	N/A
<b>Total</b>	<b>8,833.3</b>	<b>5,917,325</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	262,826	108,539
Diabetes mellitus	220,650	66,313
Heart Disease (Selected)	41,058	18,100
Asthma	103,754	60,850
Depression & Other Mood Disorders	163,243	40,584
All Mental Health & Substance Abuse	511,862	N/A
<i>Preventive Services</i>		
Health Supervision Ages 0-11*	359,578	206,174
Selected Immunizations <sup>#</sup>	391,106	280,175
Oral Dental Exams	219,132	169,689
Pap Test	140,347	123,600
Mammogram	26,824	25,265
HIV Test	87,619	77,995

\* 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	78%
Preventive Dental Care	92%
Mental Health Treatment/Counseling	94%
Substance Abuse Treatment & Counseling	51%
Hearing Screening	90%
Vision Screening	98%
Pharmacy	16%
<i>Preventive Services</i>	
Smoking Cessation Program	67%
HIV Testing And Counseling	96%
Glycosylated Hemoglobin Measurement, Diabetes	88%
Blood Pressure Monitoring	100%
Blood Cholesterol Screening	96%
Weight Reduction Program	90%
<i>Enabling Services</i>	
Case Management	98%
Eligibility Assistance	96%
Health Education	98%
Interpretation/Translation Services	94%
Transportation	69%
Out stationed Eligibility Workers	39%

\* "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*	\$487
Dental Costs per Dental Patient	\$357
Total Cost per Total Patient <sup>#</sup>	\$675
<i>Average Cost per Patient Visit</i>	
Medical Cost per Medical Patient Visit	\$139
Dental Costs per Dental Patient Visit	\$142

\* 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).

For more information, email [research@nachc.com](mailto:research@nachc.com) or visit [www.chcanys.org](http://www.chcanys.org).

This publication was supported by Grant/Cooperative Agreement Number U30CS16089 from the Health Resources and Services Administration, Bureau of Primary Health Care (HRSA/BPHC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of HRSA/BPHC.