

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

Ohio Federally-Supported Health Centers, 2008

Number of Organizations	27
Number of Delivery Sites	149
Total Patients	379,535
Number Migrant/Seasonal Farmworker Patients	3,225
Number Homeless Patients	22,450

	Health Center Population	State Population ³	US Population ³
Percent at or Below 100% of Poverty	72%	17%	17%
Percent Under 200% of Poverty	93%	35%	32%
Percent Uninsured	36%	12%	15%
Percent Medicaid	36%	12%	14%
Percent Medicare	8%	13%	12%
Percent Hispanic/Latino	5%	3%	15%
Percent African American	32%	12%	13%
Percent Asian/Pacific Islander	1%	2%	5%
Percent American Indian/Alaska Native	0%	0%	1%
Percent White	54%	85%	80%
Percent Rural	41%	23%	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 Ohio Residents Served by Federally-Supported Health Centers⁴

Percent of Low Income, Uninsured , 2008	15%
Percent of Medicaid Beneficiaries , 2006	5%
Percent of Population at or Below 100% of Poverty , 2008	14%

Economic Benefits of Federally-Supported Health Centers

Wasted Expenditures on Avoidable Emergency Department Visits , 2006 ⁵	\$932,659,694
Economic Benefits Generated for Local Communities, 2006 ⁶	\$232,736,644

Ohio 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	191.1	808,111
NPs/PAs/CNMs	71.5	210,348
Nurses	237.5	56,894
Dentists	41.1	133,269
Dental Hygienists	19.2	30,826
Behavioral Health Specialists [#]	29.3	30,896
Pharmacy	34.3	N/A
Total Enabling Services [†]	133.0	69,441
Other Staff	1,169.4	N/A
Total	1,926.4	1,361,492

* 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	102,359	47,225
Diabetes mellitus	73,300	26,796
Heart Disease (Selected)	15,670	6,699
Asthma	18,780	12,741
Depression & Other Mood Disorders	25,225	12,081
All Mental Health & Substance Abuse	77,203	N/A
<i>Preventive Services</i>		
Health Supervision Ages 0-11*	78,347	51,393
Selected Immunizations [#]	114,102	84,940
Oral Dental Exams	73,260	59,799
Pap Test	34,566	31,396
Mammogram	3,103	3,031
HIV Test	12,436	11,872

* 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	100%
Prenatal Care	77%
Preventive Dental Care	81%
Mental Health Treatment/Counseling	77%
Substance Abuse Treatment & Counseling	46%
Hearing Screening	88%
Vision Screening	96%
Pharmacy	42%
<i>Preventive Services</i>	
Smoking Cessation Program	50%
HIV Testing And Counseling	77%
Glycosylated Hemoglobin Measurement, Diabetes	92%
Blood Pressure Monitoring	96%
Blood Cholesterol Screening	77%
Weight Reduction Program	62%
<i>Enabling Services</i>	
Case Management	92%
Eligibility Assistance	100%
Health Education	100%
Interpretation/Translation Services	92%
Transportation	58%
Out stationed Eligibility Workers	12%

* "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*	\$342
Dental Costs per Dental Patient	\$295
Total Cost per Total Patient [#]	\$456
<i>Average Cost per Patient Visit</i>	
Medical Cost per Medical Patient Visit	\$113
Dental Costs per Dental Patient Visit	\$137

* 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.ohiochc.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.