

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

Vermont Federally-Supported Health Centers, 2008

Number of Organizations	7
Number of Delivery Sites	46
Total Patients	82,704
Number Migrant/Seasonal Farmworker Patients	66
Number Homeless Patients	1,327

	Health Center Population	State Population ³	US Population ³
Percent at or Below 100% of Poverty	27%	13%	17%
Percent Under 200% of Poverty	58%	32%	32%
Percent Uninsured	12%	10%	15%
Percent Medicaid	27%	19%	14%
Percent Medicare	17%	14%	12%
Percent Hispanic/Latino	1%	1%	15%
Percent African American	2%	1%	13%
Percent Asian/Pacific Islander	1%	1%	5%
Percent American Indian/Alaska Native	1%	0%	1%
Percent White	73%	96%	80%
Percent Rural	100%	69%	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 Vermont Residents Served by Federally-Supported Health Centers⁴

Percent of Low Income, Uninsured , 2008	28%
Percent of Medicaid Beneficiaries , 2006	9%
Percent of Population at or Below 100% of Poverty , 2008	29%

Economic Benefits of Federally-Supported Health Centers

Wasted Expenditures on Avoidable Emergency Department Visits , 2006 ⁵	\$38,015,757
Economic Benefits Generated for Local Communities, 2006 ⁶	\$34,069,199

Vermont 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	45.3	162,056
NPs/PAs/CNMs	35.6	102,361
Nurses	89.6	19,759
Dentists	10.9	24,583
Dental Hygienists	12.8	18,317
Behavioral Health Specialists [#]	18.0	16,898
Pharmacy	4.1	N/A
Total Enabling Services [†]	14.0	10,816
Other Staff	273.9	N/A
Total	504.1	357,916

* 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	14,972	8,913
Diabetes mellitus	12,048	4,958
Heart Disease (Selected)	10,012	2,289
Asthma	2,536	1,874
Depression & Other Mood Disorders	13,800	5,121
All Mental Health & Substance Abuse	34,749	N/A
<i>Preventive Services</i>		
Health Supervision Ages 0-11*	7,069	4,771
Selected Immunizations [#]	26,019	20,848
Oral Dental Exams	17,498	13,794
Pap Test	5,754	5,249
Mammogram	1	1
HIV Test	740	694

* 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	67%
Preventive Dental Care	83%
Mental Health Treatment/Counseling	100%
Substance Abuse Treatment & Counseling	83%
Hearing Screening	83%
Vision Screening	67%
Pharmacy	33%
<i>Preventive Services</i>	
Smoking Cessation Program	50%
HIV Testing And Counseling	50%
Glycosylated Hemoglobin Measurement, Diabetes	83%
Blood Pressure Monitoring	100%
Blood Cholesterol Screening	83%
Weight Reduction Program	83%
<i>Enabling Services</i>	
Case Management	100%
Eligibility Assistance	100%
Health Education	100%
Interpretation/Translation Services	100%
Transportation	67%
Out stationed Eligibility Workers	0%

* "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*	\$448
Dental Costs per Dental Patient	\$457
Total Cost per Total Patient [#]	\$572
<i>Average Cost per Patient Visit</i>	
Medical Cost per Medical Patient Visit	\$116
Dental Costs per Dental Patient Visit	\$179

* 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.

Data reflected on this fact sheet are from the UDS information available at the time this fact sheet was compiled. Slight variations may occur from other sources. For more information, please see www.bistatepca.org.

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.bistatepca.org.

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