1. Key FQHC Characteristics

- Began in 1960s
- 19 million served
- Medically underserved population/areas
  - Community/Migrant Health Centers
  - Homeless
  - Public Housing
  - School-based, School-linked Health Centers
- Comprehensive primary care
- Sliding fee scale
- Strict reporting requirements
- Federal Tort Claims Act (liability coverage)
- 340B prescription drug discount prices
- Enhanced Medicaid and Medicare payments
- Patient majority board
2. Proportion of Health Centers Meeting Select Medical Homes Criteria

- **Quality of care report**: 100%
- **Patient involvement in governance**: 100%
- **Care management**: 92%
- **Enabling services**: 91%
- **24-hour coverage**: 86%
- **Behavioral health**: 77%
- **Dental health**: 74%
- **Pharmacy services**: 74%
- **Disease registry**: 86%
- **Electronic medical records**: 13%

Source: Health center data from 2007 UDS, HRSA and the 2006 HIT survey conducted by Harvard University, George Washington University, and the National Association of Community Health Centers.

Note: All health centers are required to be governed by patient majority board to ensure quality care meets the needs of the community. Additionally, starting in 2008, all health centers must provide quality of care data to HRSA in their annual UDS report.

- <150% FPL: 85%
- 150-200% FPL: 7%
- >200% FPL: 8%

Total = 17.1 million

SOURCE: 2008 UDS data, HRSA.
4. Reaching Vulnerable Populations

• 1 in 6 low-income persons
• 1 in 5 low-income women
• 1 in 5 racial/ethnic minority
• 1 in 8 low-income births
• 1 in 11 low-income elderly

Source: CDC/NCHS, 2006 National Ambulatory Medical Care Survey by Esther Hing and David A. Woodwell, Differences in physician visits at community health centers and physician offices: United States, 2008
6. Projected Impact of $2 Billion in ARRA Funding on Number of Total Patients Served (in millions)

Source: 2009-2011 projections based data from UDS, HRSA, Capital Link projections and HRSA estimates on number of new patients supported by IDS (2.1 million new patients) and NAP (750,000 new patients)
7. Median State-Level Economic Impacts, by State Unemployment Rate

Source: Economic impact of ARRA estimates from Capital Link. Unemployment rates from December 2009, BLS.
8. Funding Levels

- **Health Center Fund**: $11 billion (FY 2011 - FY 2015) of which $9.5 billion is for expanded operations
  - FY 2011: $1.0 billion
  - FY 2012: $1.2 billion
  - FY 2013: $1.5 billion
  - FY 2014: $2.2 billion
  - FY 2015: $3.6 billion

- **National Health Service Corps**: $1.5 billion (FY 2011 - FY 2015)
  - FY 2011: $290 million
  - FY 2012: $295 million
  - FY 2013: $300 million
  - FY 2014: $305 million
  - FY 2015: $310 million

No. Patients (m):

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<td>(5.3)</td>
<td>(6.0)</td>
<td>(7.7)</td>
<td>(9.6)</td>
<td>(14.1)</td>
<td>(20-22)</td>
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10. Estimated Impact on Patient Mix

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<tr>
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<tr>
<td>Total</td>
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<td>100%</td>
<td>36.3m</td>
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11. Reform Impact Estimates

• Health Centers Program permanently authorized and investment guaranteed for five years
• Increase case load from 34 to 44 million in 2015.
• Reduces proportion of uninsured health center patients from 38 to 22% in 2019.
• $11 billion in health center funding translates to $181-$315 billion in savings over next decade

12. Opportunities and Challenges

- Health centers uniquely and effectively target vulnerable populations
- Builds on prior investments
- Health centers will be an even more critical source of care for remaining uninsured
- Surge in (newly insured) patient volume and new array of health issues
- Safety net capacity must expand post-reform
- Success of health reform depends on access appropriate health insurance arrangement
13. MA Health centers still critical source of care for uninsured

% of Uninsured Who Are Patients at Health Centers

2006: 22%
2007: 36%

Source: GW analysis of Uniform Data System and Census data
14. Medically Underserved Population, by Insurance Status

N=96.2 million

Insured: 69.6 million, 72%

Uninsured: 26.6 million, 28%


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<tbody>
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<td>Private</td>
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<tr>
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<td>6%</td>
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NOTE: 1985 Other revenue includes Private Insurance revenue
14. Questions

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- Site references: gwhealthpolicy.org