

## 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 Jersey Federally-Supported Health Centers, 2009

Number of Organizations	20
Number of Delivery Sites	120
Total Patients	413,369
Number Migrant/Seasonal Farmworker Patients	16,416
Number Homeless Patients	21,170

	Health Center Population	State Population <sup>3</sup>	US Population <sup>3</sup>
Percent <b>at or Below 100% of Poverty</b>	75%	14%	20%
Percent <b>Under 200% of Poverty</b>	94%	30%	39%
Percent <b>Uninsured</b>	41%	15%	17%
Percent <b>Medicaid</b>	45%	10%	16%
Percent <b>Medicare</b>	4%	12%	12%
Percent <b>Hispanic/Latino</b>	47%	17%	16%
Percent <b>African American</b>	39%	13%	12%
Percent <b>Asian/Pacific Islander</b>	4%	8%	5%
Percent <b>American Indian/Alaska Native</b>	0%	0%	1%
Percent <b>White</b>	52%	61%	65%
Percent <b>Rural</b> <sup>4</sup>	6%	NSD	16%

Race/Ethnicity may not sum to 100% due to rounding and non-inclusion of two or more races. Race data is inclusive of Hispanic/Latino population. 0% may indicate <0.5%. Rural data from 2009.

## Percent of Vulnerable New Jersey Residents Served by Federally-Supported Health Centers<sup>5</sup>

Percent of <b>Low Income, Uninsured</b> , 2009	22%
Percent of <b>Medicaid Beneficiaries</b> , 2007	15%
Percent of <b>Population at or Below 100% of Poverty</b> , 2009	21%

## Economic Benefits of Federally-Supported Health Centers

<b>Total Economic Benefits Generated</b> for Local Communities 2009 <sup>6</sup>	\$382,432,656
<b>Total Economic Benefits Projected</b> for Local Communities, 2015 <sup>7</sup>	\$1,031,970,932

# New Jersey Health Center Fact Sheet, 2009

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
Physicians	215.5	820,690
NPs/PAs/CNMs	68.7	231,679
Nurses	238.1	49,814
Dentists	67.3	206,018
Dental Hygienists	8.7	11,935
Behavioral Health Specialists <sup>#</sup>	33.3	34,622
Pharmacy	0.1	N/A
Total Enabling Services <sup>†</sup>	199.5	71,362
Other Staff	1378.7	N/A
<b>Total</b>	<b>2209.7</b>	<b>1,456,731</b>

\* Full-time equivalent.

<sup>#</sup> Includes psychiatrists, psychologists, licensed or credentialed behavioral health providers, & other mental health staff.

<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
<b>Medical Conditions</b>		
Hypertension	81,406	36,119
Diabetes mellitus	56,184	18,872
Heart Disease (Selected)	7,441	3,396
Asthma	22,012	13,121
Depression & Other Mood Disorders	17,578	6,640
All Mental Health & Substance Abuse	48,935	N/A
<b>Preventive Services</b>		
Health Supervision Ages 0-11*	140,026	67,478
Selected Immunizations <sup>#</sup>	102,915	60,312
Oral Dental Exams	114,031	76,590
Pap Test	65,985	55,968
Mammogram	4,284	4,063
HIV Test	13,679	12,055

\* Well child visits. <sup>#</sup> Includes DPT, MMR, polio, influenza, hepatitis A & B, Hib, etc.

## Health Centers Providing Select Services Onsite\*

<b>Professional Services</b>	
General Primary Medical Care	100%
Prenatal Care	78%
Preventive Dental Care	72%
Mental Health Treatment/Counseling	89%
Substance Abuse Treatment & Counseling	56%
Hearing Screening	94%
Vision Screening	100%
Pharmacy	6%
<b>Preventive Services</b>	
Smoking Cessation Program	56%
HIV Testing And Counseling	94%
Glycosylated Hemoglobin Measurement, Diabetes	89%
Blood Pressure Monitoring	100%
Blood Cholesterol Screening	67%
Weight Reduction Program	61%
<b>Enabling Services</b>	
Case Management	94%
Eligibility Assistance	100%
Health Education	100%
Interpretation/Translation Services	94%
Transportation	50%
Out stationed Eligibility Workers	78%

\* "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

Average Cost per Patient	Cost
Medical Costs per Medical Patient*	\$429
Dental Costs per Dental Patient	\$309
Total Cost per Total Patient <sup>#</sup>	\$509

Average Cost per Patient Visit	
Medical Cost per Medical Patient Visit <sup>†</sup>	\$143
Dental Costs per Dental Patient Visit	\$137

\*Excludes lab and x-ray

<sup>#</sup> Includes the total cost of all services over total users

<sup>†</sup>Excludes lab, x-ray, and nurse visits

### Sources and Notes

Unless otherwise specified, this fact sheet is based on Bureau of Primary Health Care, HRSA, DHHS, 2009 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.

Three grantees in New Jersey are homeless providers, thereby explaining the proportion of grantees providing on-site prenatal care. For data on members of the New Jersey Primary Care Association, see [www.njpc.org](http://www.njpc.org).

<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 2009. Released June 2010. [www.census.gov/popest/states/](http://www.census.gov/popest/states/).

<sup>4</sup> Kaiser Family Foundation, State Health Facts Online. [www.statehealthfacts.org](http://www.statehealthfacts.org). Urban Institute and Kaiser Commission on Medicaid and the Uninsured estimates based on the Census Bureau's March 2009 and 2010 Current Population Survey (CPS: Annual Social and Economic Supplements).

<sup>5</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). The assumption that the uninsured are low-income is based on the 2009 UDS.

<sup>6</sup> NACHC and Capital Link, *Community Health Centers Lead the Primary Care Revolution*, August 2010, [www.nachc.com/research](http://www.nachc.com/research).

<sup>7</sup> Center for American Progress, *The Importance of Community Health Centers*, August 2009, <http://www.americanprogress.org>.

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

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