



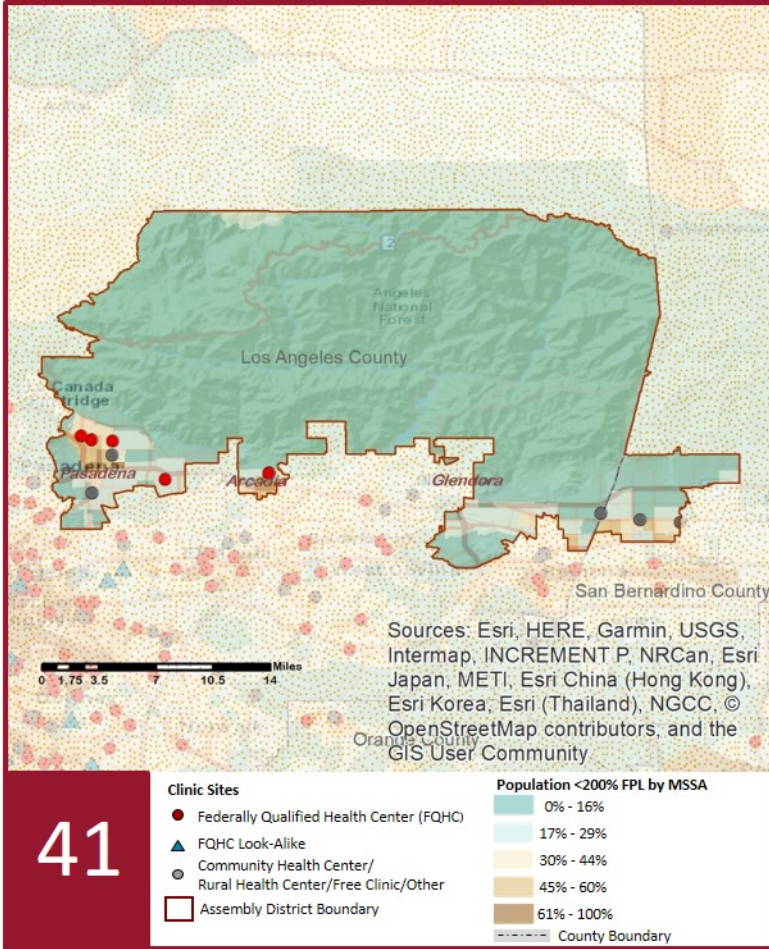
# 2021 Profile of Community Health Centers Assembly District 41

Assemblymember Chris Holden



## The Clinics

Community Health Centers (CHCs) are nonprofit health care practices located in low income and medically underserved areas. CHCs share a common mission to serve everyone who walks through their doors, regardless of their ability to pay. The term CHC include Federally Qualified Health Centers (FQHC), FQHC Look-Alikes, Migrant Health Centers, Rural and Frontier Health Centers, and Free Clinics. CHCs are an essential segment of the safety net. In many California Counties, they provide a significant proportion of comprehensive primary care services to those who are publicly subsidized or uninsured.



### Clinic Types

Total Number of CHCs	12
Federally Qualified Health Center Sites (FQHC)	7
FQHC Look-Alike Sites	0
Rural Health Center Sites (95-210 RHC)	5

### Demographics

Patients	55,119	
Male	15,922	29%
Female	39,197	71%
19 Years & Under	18,067	33%
Encounters	120,417	

### Poverty Level

Under 100%	23,663	43%
100 - 138%	4,467	8%
139 - 200%	2,571	5%
201 - 400%	938	2%
Over 400%	650	1%
Unknown	22,830	41%

### Age

Less than 1 Year	624	1%
1 - 4 Years	2,482	5%
5 - 12 Years	5,807	11%
13 - 14 Years	2,015	4%
15 - 19 Years	7,139	13%
20 - 34 Years	21,612	39%
35 - 44 Years	5,773	10%
45 - 64 Years	8,047	15%
More than 65 Years	1,620	3%

### Race

White	24,256	44%
Black	5,341	10%
Native American	921	2%
Asian/Pacific Islander	3,323	6%
More than one Race	4,795	9%
Other/ Unknown	16,483	30%

### Ethnicity

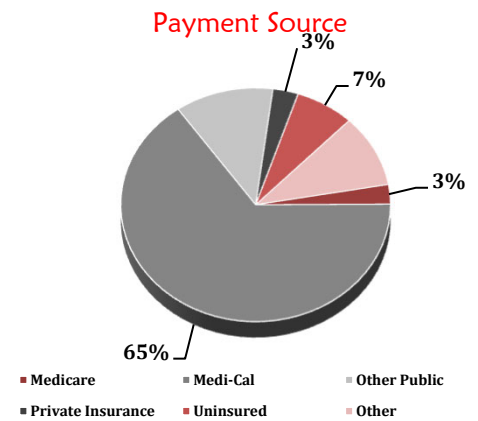
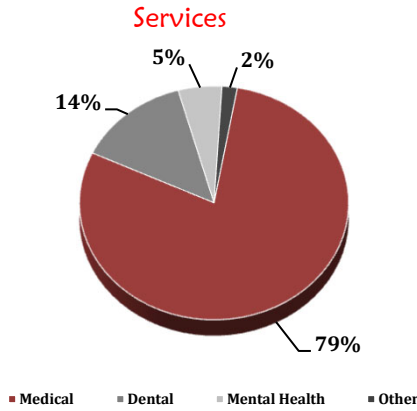
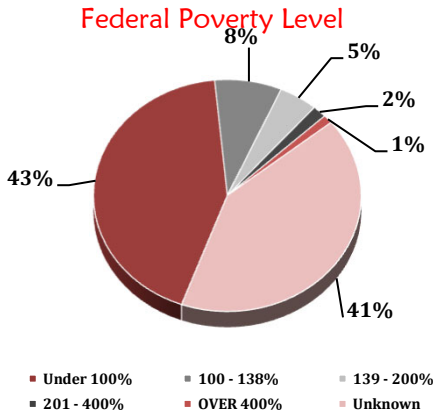
Hispanic	33,262	60%
Non-Hispanic	18,354	33%
Unknown	3,503	6%

### Language

Primary Language Not English	28%
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Services	Provider FTEs	Encounters
Medical*	55.4 88%	95,408 79%
Dental**	4.8 8%	16,483 14%
Mental Health***	3.1 5%	6,316 5%
Other****	- 0%	2,210 2%

### % of CHCs providing other significant services

Vision Services	8%
Basic Lab Services	17%
Radiology Services	0%
Pharmacy Services	8%
Urgent Care Services	0%
Substance Abuse Services	50%
Women's Health Services	25%

\*Physicians; Physician Assistants; Family Nurse Practitioners; Certified Nurse Midwives and Visiting Nurses.  
 \*\*\*Psychiatrists; Clinical Psychologists; Licensed Clinical Social Workers.  
 \*\*\*\*Other providers billable to Medi-Cal.

### Revenue and Utilization by Payment Source

Program	Patients**	Encounters
Medicare	888 2%	2,657 2%
Medi-Cal	23,321 42%	64,510 54%
Other Public	3,228 6%	11,664 10%
Private Insurance	1,362 2%	3,012 3%
Uninsured Services	16,407 30%	7,003 6%
Covered California	11 0%	31 0%
PACE	- 0%	- 0%
Other	9,902 18%	9,902 8%
BCCCP**	- 0%	- 0%
CHDP**	63 0%	182 0%
Family PACT**	12,190 22%	21,456 18%

### Gross Patient Revenue (charged)

\$57,902,301

### Net Patient Revenue (collected)

\$25,094,617

### Other Operating Revenue

Federal Funds	\$ 4,950,398
State Funds	\$ -
County/Local Funds	\$ -
Private	\$ 1,731,135
Donations/Contributions	\$ 2,515,749
Other	\$ 3,600,065

### TOTAL OPERATING REVENUE

\$37,891,964

\*\*Patient counts for Episodic programs (BCCCP, CHDP, Family PACT and Other Episodic Programs) are duplicated. Episodic Programs include Breast Cancer Programs such as the Breast Cancer Early Detection Program (BCCCP) and the Breast and Cervical Cancer Control Program (BCCCP); CHDP = Child Health and Disability Prevention Program; Family PACT = Family Planning Access Care and Treatment Program and other payers covered by a grant.

Because of their philosophy and by necessity, CCHCs have been vigilant about controlling the cost of care, and the untoward effects of deferred or neglected care, by promoting a broad range of preventive health services specifically targeted to the particular needs of their communities and patient populations. The Federal Office of Management and Budget has found the Health Center Program to be one of the ten most effective federal programs and the most effective program under the federal Health and Human Services Agency. Despite enormous challenges, CCHCs have persisted in their mission to serve their local communities.

Profile created by Jeanita Harris, Sr. Data Analyst, CPCA. Data is based on 2019 OSHPD AUR.