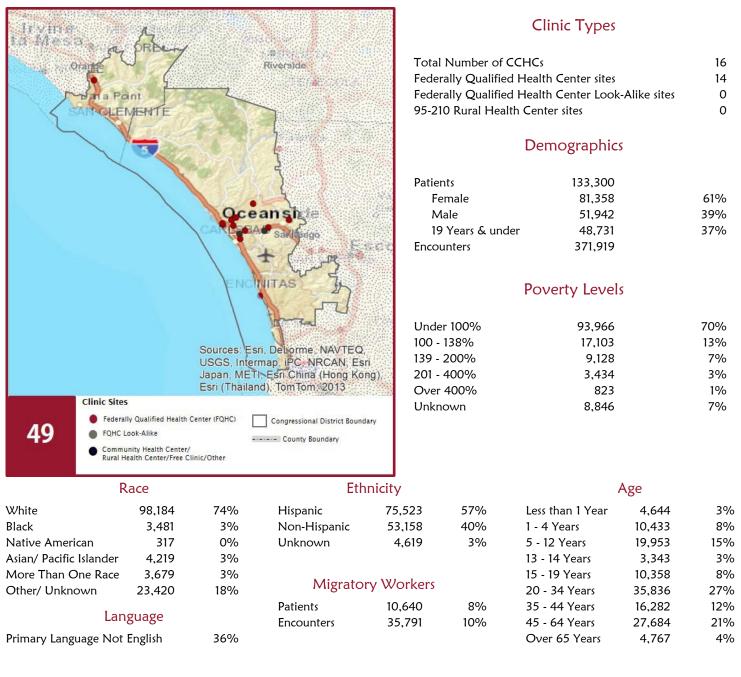
CALIFORNIA COMMUNITY CLINICS AND HEALTH CENTERS

2017 Congressional District 49 Representative Darrell Issa



The Clinics

Community Clinics and Health Centers (CCHCs) are nonprofit health care practices located in low income and medically underserved areas. CCHCs share a common mission to serve everyone who walks through their doors, regardless of their ability to pay. The term CCHC include Federally Qualified Health Centers (FQHC), FQHC Look-Alikes, Migrant Health Centers, Rural and Frontier Health Centers, and Free Clinics. CCHCs 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.

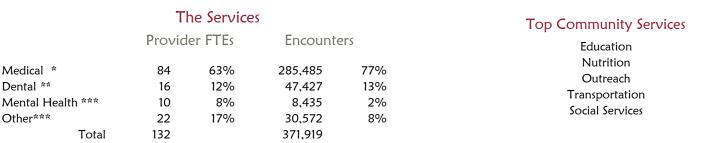


california health advocates

(916) 503-9130 healthplusadvocates.org 1231 | Street, Suite 400, Sacramento, CA 95814

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*Physicians, physician assistants, family nurse practioners, certified nurse midwives, visiting nurses. **Dentists and Registered Dental Hygienists ***Psychiatrists, clinical psychologists, and licensed clinical social workers. ****Other providers billable to Medi-Cal

Revenue and Utilization by Payment Source

Program	Patients ^ ^		Encounters		Revenue	
Medicare	3,789	3%	13,350	4%	Gross Patient Revenue	\$73,250,541
Medi-Cal	79,467	60%	262,125	70%	Net Patient Revenue	\$56,806,515
All County ^ ^ ^	0	0%	219	0%	Other Operating F	Revenue
Private Insurance Covered California PACE Uninsured Services ^ ^ ^ ^ ^	5,666 2,011 0 42,285 82	4% 2% 0% 32% 0%	12,550 5,072 0 51,394 264	3% 1% 0% 14% 0%	Federal State County/Local Private	\$12,023,404 \$795,149 \$2,444,089 \$2,443,014
BCCCP^ ^	4,091	3%	4,563	1%	Donations/Contributions	\$2,162,577
CHDP^ ^	2,221	2%	2,144	1%	Other	\$2,967,338
Family PACT^ ^	12,608	9%	20,238	5%	Total	\$22,835,571

^ Patient counts for Episodic programs (BCCP, CHDP, Family PACT) are duplicated. BCCCP = Breast and Cervical Cancer Control Program; CHDP = Child Health and Disability Prevention Program; Family PACT = Family Planning Access Care and Treatment program.

^ ^ County Indigent/CMSP/MISP, LA County Public/Private Parternship, and Other County Programs. ^ ^ ^ Free and Self-Pay/ Sliding Fee Programs.

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.

All information compiled by Jeanita Harris, Sr. Data Analyst, CPCA. Numbers are based on 2015 OSHPD data.



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ADVANCING THE MISSION OF COMMUNITY HEALTH CENTERS