



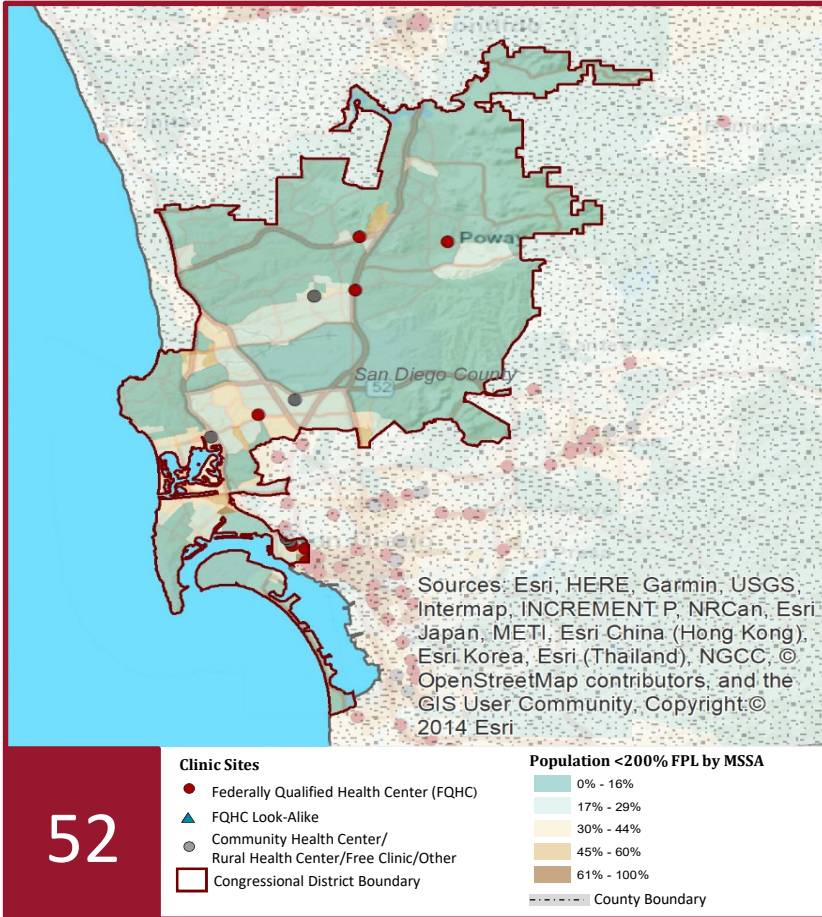
2021 Profile of Community Health Centers Congressional District 52

Representative Scott H. Peters



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	13
Federally Qualified Health Center Sites (FQHC)	9
FQHC Look-Alike Sites	0
Rural Health Center Sites (95-210 RHC)	0

Demographics

Patients	62,893	
Male	20,070	32%
Female	42,823	68%
19 Years & Under	8,503	14%
Encounters	172,196	

Poverty Level

Under 100%	42,089	67%
100 - 138%	5,116	8%
139 - 200%	6,341	10%
201 - 400%	1,776	3%
Over 400%	2,739	4%
Unknown	4,832	8%

Age

Less than 1 Year	380	1%
1 - 4 Years	1,092	2%
5 - 12 Years	2,187	3%
13 - 14 Years	689	1%
15 - 19 Years	4,155	7%
20 - 34 Years	27,890	44%
35 - 44 Years	8,666	14%
45 - 64 Years	13,251	21%
More than 65 Years	4,583	7%

Race

White	32,226	51%
Black	4,257	7%
Native American	295	0%
Asian/Pacific Islander	7,402	12%
More than one Race	1,376	2%
Other/ Unknown	17,337	28%

Ethnicity

Hispanic	15,160	24%
Non-Hispanic	40,424	64%
Unknown	7,309	12%

Language

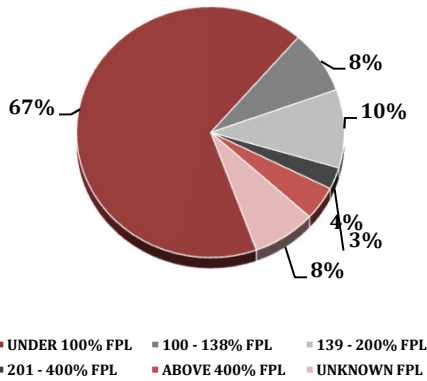
Primary Language Not English	14%
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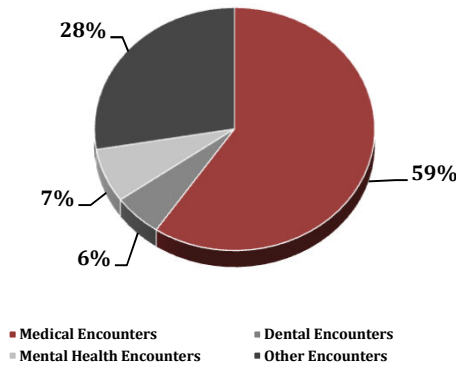
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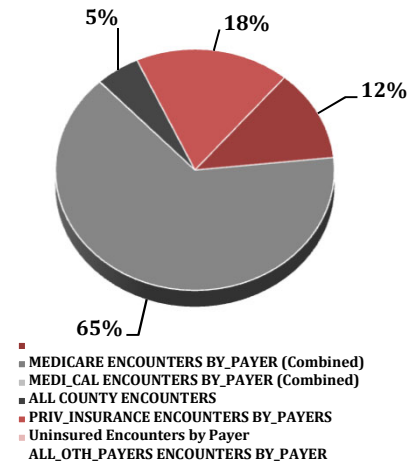
Federal Poverty Level



Services



Payment Source



Services	Provider FTEs	Encounters
Medical*	45.2 58%	134,844 78%
Dental**	6.7 9%	12,881 7%
Mental Health***	16.7 21%	16,309 9%
Other****	8.9 12%	62,893 37%

% of CHCs providing other significant services

Vision Services	0%
Basic Lab Services	69%
Radiology Services	8%
Pharmacy Services	23%
Urgent Care Services	8%
Substance Abuse Services	46%
Women's Health Services	62%

*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	3,431 5%	17,593 10%
Medi-Cal	28,185 45%	92,983 54%
Other Public	4 0%	53 0%
Private Insurance	4,448 7%	7,361 4%
Uninsured Services	25,849 41%	25,796 15%
Covered California	976 2%	2,677 2%
PACE	- 0%	- 0%
Other	- 0%	- 0%
BCCCP**	333 1%	571 0%
CHDP**	1 0%	1 0%
Family PACT**	14,860 24%	25,161 15%

Gross Patient Revenue (charged)
\$53,245,651
 Net Patient Revenue (collected)
\$32,191,703

Other Operating Revenue	
Federal Funds	\$ 5,688,260
State Funds	\$ 37,000
County/Local Funds	\$ 520,471
Private	\$ 3,195,181
Donations/Contributions	\$ 1,088,619
Other	\$ 2,352,863

TOTAL OPERATING REVENUE
\$45,074,097

**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.