

The Value and Impact of California's District 39



Four California's District 39 health center members provide tremendous value and impact to the communities they serve through **CARE FOR VULNERABLE POPULATIONS, SAVINGS TO THE SYSTEM, ECONOMIC STIMULUS, STATE-OF-THE-ART PRACTICES, and INTEGRATED CARE** with a focus on **MANAGING CHRONIC CONDITIONS, PREVENTATIVE CARE, and QUALITY HEALTH OUTCOMES**. They have also played a critical role in **PANDEMIC RESPONSE**, providing testing, vaccination, and care in-person and virtually, bolstering the public health infrastructure in their communities.

This report highlights their **2021 savings and contributions**, as well as pandemic response data through **December 30, 2022**.



Economic Stimulus



1,072
Total Jobs
641 Health Center Jobs
431 Other Jobs



\$169 M
Total Economic Impact of current operations
\$88 M
Community Spending
\$81 M
Direct Health Center Spending



\$25 M
Annual Tax Revenues
\$6 M
State & Local Tax Revenues
\$19 M
Federal Tax Revenues



Savings to the System

22%

Lower Costs for Health Center Medicaid Patients



\$99 M

Savings To Medicaid



\$132 M

Savings to the Overall Health System



Pandemic Response

FQHCs play a critical public health role in pandemic response, targeting vulnerable populations and delivering:

TESTING



22,417
Total In-Person Covid Tests



7,063
At-Home Self-Test Distribution



20%
For Racial/Ethnic Minorities

VACCINES



21,903
Total Covid Vaccines



21%
For Racial/Ethnic Minorities



Care for Vulnerable Patients



240,400
Total Visits

6% 4-Year Patient Growth



185,292
Clinic Visits



55,108
Virtual Visits



67,932
Patients Served



7%
Children & Adolescents



28%
Low Income



23%
Identify As An Ethnic Or Racial Minority



1,343
Agricultural Workers



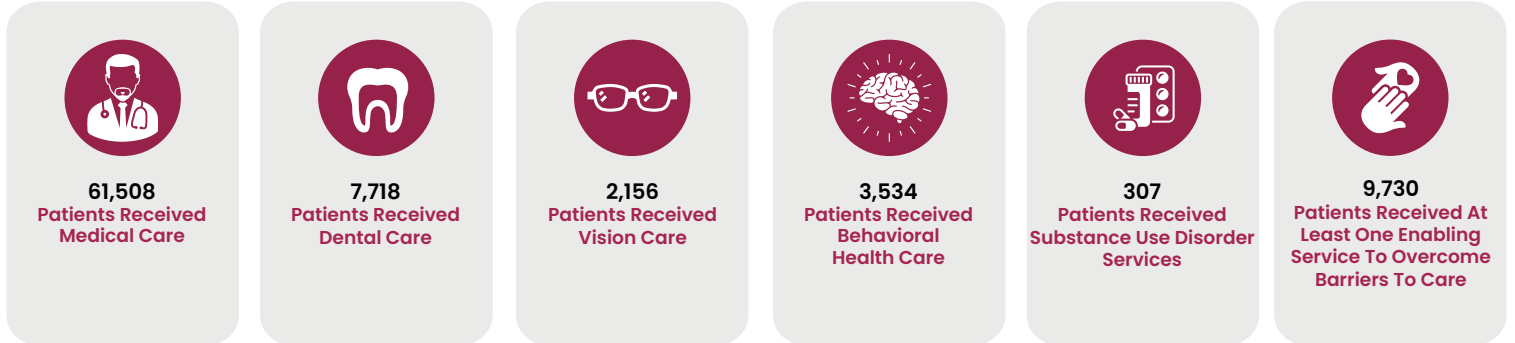
325
Veterans



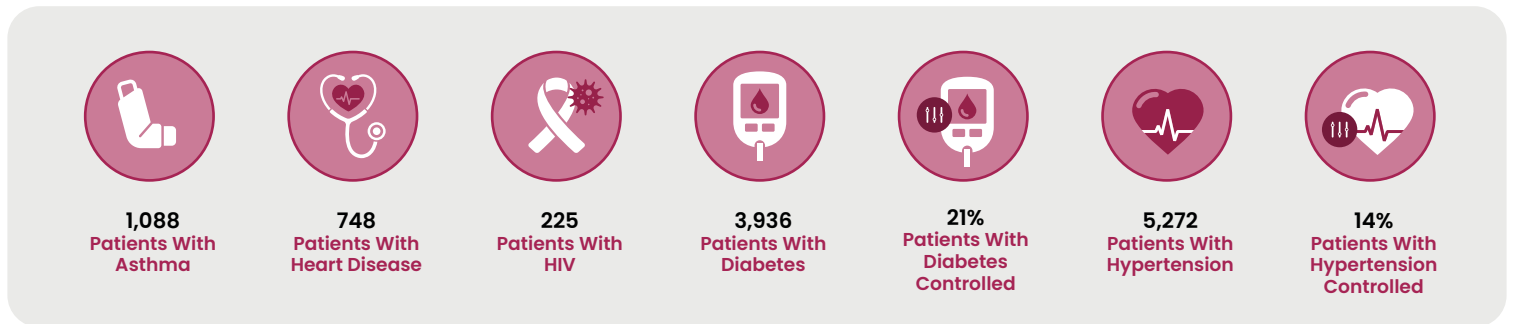
3,575
Homeless



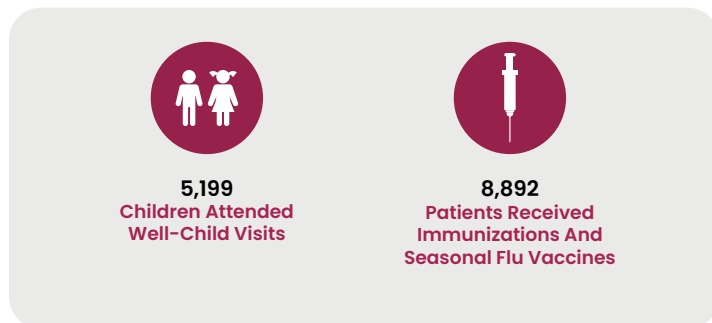
Integrated Care



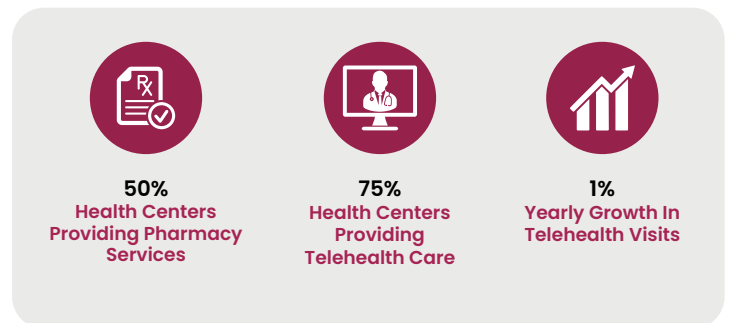
Managing Chronic Conditions



Preventive Care



State-of-the-Art Practices



Summary of 2021 Economic Impact and Tax Revenue

		Employment (# of FTEs)	Economic Impact	State & Local Tax Revenues	Federal Tax Revenues
Community Impact	Direct	641	\$80,565,099	\$2,773,885	\$12,376,376
	Indirect	147	\$28,339,578	\$904,175	\$2,343,129
	Induced	284	\$59,249,023	\$2,586,530	\$4,175,443
	Total	1,072	\$168,153,700	\$6,264,589	\$18,894,948
				\$25,159,537	



References and Data Sources

- Savings to the System: Nocon et al. Health Care Use and Spending for Medicaid Enrollees in Federally Qualified Health Centers Versus Other Primary Care Settings. American Journal of Public Health: November 2016, Vol. 106, No. 11, pp. 1981-1989.
- Economic Stimulus: Economic impact was measured using 2021 IMPLAN Online from IMPLAN Group LLC, IMPLAN System (data and software), 16905 Northcross Dr., Suite 120, Huntersville, NC 28078, www.IMPLAN.com. Learn more at www.capl原因ink.org/how-economic-impact-is-measured.
- "Low Income" refers to those with earnings at or below 200% of federal poverty guidelines.
- Care for Vulnerable Populations: Bureau of Primary Health Care, HRSA, DHHS, 2021 Uniform Data System.
- Full-Time Equivalent (FTE) of 1.0 is equivalent to one full-time employee. In an organization that has a 40-hour work week, an employee who works 20 hours per week (i.e., 50 percent of full time) is reported as "0.5 FTE." FTE is also based on the number of months the employee works. An employee who works full time for four months out of the year would be reported as "0.33 FTE" (4 months/12 months).
- COVID tests and vaccines data comes from data reported by health centers from the HRSA Health Center COVID-19 Survey. Learn more at <https://bphc.hrsa.gov/emergency-response/coronavirus-health-center-data>.

Acknowledgments

This report was created by Capital Link and funded by **California's District 39** for its members.

Capital Link is a non-profit organization that has worked with hundreds of health centers and primary care associations for over 25 years to plan for sustainability and growth, access capital, improve and optimize operations and financial management, and articulate value. We provide an extensive range of services, customized according to need, with the goal of strengthening health centers—financially and operationally—in a rapidly changing marketplace.

Capital Link maintains a database of over 16,000 health center audited financial statements from 2005 to 2021, incorporating nearly 85% of all health centers nationally in any given year. This proprietary database also includes UDS data from 2005 through 2021, enabling us to provide information and insights tailored to the industry.

For more information, visit us at www.capl原因ink.org.  CAPITAL LINK

Health Centers Included in This Analysis

1. Borrego Health
2. Community Health Systems, Inc.
3. Planned Parenthood of the Pacific Southwest
4. TrueCare