The Value and Impact of the

Kansas Health Center Program

Twenty One Kansas Health Center Program participants 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.

This report highlights their 2023 savings and contributions.



ECONOMIC STIMULUS

2,840	1,753	4,593	
HEALTH CENTER	OTHER	TOTAL	
JOBS	JOBS	JOBS	
\$359.7 M	\$296.8 M	\$656.5 M	
DIRECT HEALTH CENTER	COMMUNITY	TOTAL ECONOMIC IMPACT	
SPENDING	SPENDING	OF CURRENT OPERATIONS	
\$15.1 M	\$60.8 M	\$75.9 M	
STATE & LOCAL TAX	FEDERAL TAX	ANNUAL TAX	
REVENUES	REVENUES	REVENUES	



SAVINGS TO THE SYSTEM

24%	\$239.5 M	\$513.0 M
LOWER COSTS FOR HEALTH	SAVINGS TO	SAVINGS TO THE OVERALL
CENTER MEDICAID	MEDICAID	HEALTH SYSTEM
PATIENTS		



CARE FOR VULNERABLE POPULATIONS

24.3%	1,046,265	36,692	1,082,957
4-YEAR	CLINIC	VIRTUAL	TOTAL
PATIENT GROWTH	VISITS	VISITS	VISITS

317,609			
PATIENTS SERVED			
33.8%	40.4%		
CHILDREN & ADOLESCENTS	LOWINCOME	IDENTIFY AS AN ETHNIC OR RACIAL MINORITY	
4,289	5,272	4,827	
AGRICULTURAL WORKERS	VETERANS	HOMELESS	



Kansas Health Center Program



INTEGRATED CARE

255,636	82,311	11,992
PATIENTS RECEIVED MEDICAL CARE	PATIENTS RECEIVED PATIENTS RECE DENTAL CARE VISION CAR	
29,479	1,627	8,507
PATIENTS RECEIVED BEHAVIORAL HEALTH CARE	PATIENTS RECEIVED SUBSTANCE USE DISORDER SERVICES	PATIENTS RECEIVED AT LEAST ONE ENABLING SERVICE TO OVERCOME BARRIERS TO CARE



MANAGING CHRONIC CONDITIONS

13,162	12,266	326
PATIENTS WITH	PATIENTS WITH	PATIENTS WITH
ASTHMA	HEART DISEASE	HIV

29,551	67.6%	56,887	68.7%
PATIENTS WITH	PATIENTS WITH	PATIENTS WITH	PATIENTS WITH
DIABETES	DIABETES	HYPERTENSION	HYPERTENSION
	CONTROLLED		CONTROLLED



PREVENTATIVE CARE

35,419	64,780
CHILDREN ATTENDED	PATIENTS RECEIVED IMMUNIZATIONS AND
WELL-CHILD VISITS	SEASONAL FLU VACCINES



STATE-OF-THE-ART PRACTICES

57.1%	85.7%	100%
HEALTH CENTERS	HEALTH CENTERS	HEALTH CENTERS HAVE
PROVIDING	PROVIDING TELEHEALTH	INSTALLED AND
PHARMACY SERVICES	CARE	CURRENTLY USE AN
		ELECTRONIC HEALTH
		RECORD (EHR)



Kansas Health Center Program

SUMMARY OF 2023 ECONOMIC IMPACT AND TAX REVENUE

		Employment (# of FTEs)	Economic Impact	State & Local Tax Revenues	Federal Tax Revenues
	Direct	2,840	\$359,737,748	\$5,810,330	\$37,464,527
Community	Indirect	908	\$141,833,607	\$3,352,703	\$11,815,132
Impact	Induced	845	\$154,963,493	\$5,922,291	\$11,562,760
	Total	4,593	\$656,534,848	\$15,085,324	\$60,842,420
		\$75,92	27,744		

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 2023 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.caplink.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, 2023 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).
- Integrated Care refers to comprehensive primary health care (e.g., primary medical, oral, mental, substance use disorder, vision, enabling services).
- The Health Center Program includes Federally Qualified Health Centers (FQHCs) receiving Section 330 funding and Look-Alikes.

ACKNOWLEDGEMENTS

This report was created by Capital Link and funded by the **National Association of Community Health Centers** (NACHC).

Capital Link is a non-profit organization that has worked with hundreds of health centers and primary care associations for nearly 30 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 21,000 health center audited financial statements from 2005 to 2023, incorporating more than 73% of all health centers nationally in any given year. This proprietary database also includes UDS data from 2005 through 2023, enabling us to provide information and insights tailored to the industry.

For more information, visit us at www.caplink.org.

