The Value and Impact of the

South Dakota Health Center Program

Four South Dakota 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

877	556	1,433	
HEALTH CENTER	OTHER	TOTAL	
JOBS	JOBS	JOBS	
\$121.1 M	\$91.8 M	\$212.9 M	
DIRECT HEALTH CENTER SPENDING	COMMUNITY SPENDING	TOTAL ECONOMIC IMPACT OF CURRENT OPERATIONS	
\$2.4 M	\$19.0 M	\$21.4 M	
STATE & LOCAL TAX	FEDERAL TAX	ANNUAL TAX	
REVENUES	REVENUES	REVENUES	



SAVINGS TO THE SYSTEM

24%	\$59.4 M	\$185.0 M
LOWER COSTS FOR HEALTH	SAVINGS TO	SAVINGS TO THE OVERALL
CENTER MEDICAID	MEDICAID	HEALTH SYSTEM
PATIENTS		



CARE FOR VULNERABLE POPULATIONS

54.8%	353,643	9,977	363,620
4-YEAR	CLINIC	VIRTUAL	TOTAL
PATIENT GROWTH	VISITS	VISITS	VISITS

124,541					
PATIENTS SERVED					
28.3% 61.0% 25.9%					
CHILDREN & ADOLESCENTS LOW INCOME		IDENTIFY AS AN ETHNIC OR RACIAL MINORITY			
721	3,447	2,615			
AGRICULTURAL WORKERS	VETERANS	HOMELESS			



South Dakota Health Center Program



INTEGRATED CARE

112,128	15,768	72
PATIENTS RECEIVED MEDICAL CARE	PATIENTS RECEIVED DENTAL CARE	PATIENTS RECEIVED VISION CARE
3,727	88	1,123
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

4,737	6,945 245	
PATIENTS WITH	PATIENTS WITH	PATIENTS WITH
ASTHMA	HEART DISEASE	HIV

10,723	78.7%	24,330	69.4%
PATIENTS WITH	PATIENTS WITH	PATIENTS WITH	PATIENTS WITH
DIABETES	DIABETES	HYPERTENSION	HYPERTENSION
	CONTROLLED		CONTROLLED



PREVENTATIVE CARE

13,844	27,604
CHILDREN ATTENDED	PATIENTS RECEIVED IMMUNIZATIONS AND
WELL-CHILD VISITS	SEASONAL FLU VACCINES



STATE-OF-THE-ART PRACTICES

75.0%	100.0%	100%
HEALTH CENTERS	HEALTH CENTERS	HEALTH CENTERS HAVE
PROVIDING	PROVIDING TELEHEALTH	INSTALLED AND
PHARMACY SERVICES	CARE	CURRENTLY USE AN
		ELECTRONIC HEALTH
		RECORD (EHR)



South Dakota Health Center Program

SUMMARY OF 2023 ECONOMIC IMPACT AND TAX REVENUE

		Employment (# of FTEs)	Economic Impact	State & Local Tax Revenues	Federal Tax Revenues
	Direct	877	\$121,080,749	\$687,887	\$12,198,505
Community	Indirect	275	\$42,547,077	\$536,798	\$3,207,442
Impact	Induced	281	\$49,272,452	\$1,127,724	\$3,668,708
	Total	1,433	\$212,900,278	\$2,352,409	\$19,074,655
			\$21,42	7,064	

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.

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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.

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