Twelve Utah 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**.

FCONO	STIMULUS
ECUNU	STIPIULUS

1,380	1,332	2,712
HEALTH CENTER	OTHER	TOTAL
JOBS	JOBS	JOBS
\$225.6 M	\$234.1 M	\$459.7 M
DIRECT HEALTH CENTER	COMMUNITY	TOTAL ECONOMIC IMPACT
SPENDING	SPENDING	OF CURRENT OPERATIONS
\$10.0 M	\$41.3 M	\$51.3 M
STATE & LOCAL TAX	FEDERAL TAX	ANNUAL TAX
REVENUES	REVENUES	REVENUES

	SAVINGS TO THE SYSTEM		
•	24%	\$67.8 M	\$208.5 M
	LOWER COSTS FOR HEALTH CENTER MEDICAID PATIENTS	SAVINGS TO MEDICAID	SAVINGS TO THE OVERALL HEALTH SYSTEM

	CARE FOR VULNERABLE POPULATIONS			
0.0	0.8%	493,734	11,041	504,775
	4-YEAR	CLINIC	VIRTUAL	TOTAL
	PATIENT GROWTH	VISITS	VISITS	VISITS

139,977				
PATIENTS SERVED				
24.7% 86.9% 69.4				
CHILDREN & ADOLESCENTS	LOW INCOME	IDENTIFY AS AN ETHNIC OR RACIAL MINORITY		
6,884	1,217	7,742		
AGRICULTURAL WORKERS	VETERANS	HOMELESS		



The Value and Impact of the Utah Health Center Program

INTEGRATED CARE				
122,534	25,788	5,998		
PATIENTS RECEIVED	PATIENTS RECEIVED	PATIENTS RECEIVED		
MEDICAL CARE	DENTAL CARE	VISION CARE		
11,807	1,415	11,291		
PATIENTS RECEIVED	PATIENTS RECEIVED	PATIENTS RECEIVED		
BEHAVIORAL HEALTH CARE	SUBSTANCE USE DISORDER	AT LEAST ONE ENABLING		
	SERVICES	SERVICE TO OVERCOME		
		BARRIERS TO CARE		

	MANAGING CHR	ONIC CONDIT	IONS	
4,785	3	,571	107	
PATIENTS WITH ASTHMA		NTS WITH DISEASE	PATIENTS WITH HIV	
16,617	69.2%	20,766	66.6%	
PATIENTS WITH DIABETES	PATIENTS WITH DIABETES CONTROLLED	PATIENTS W HYPERTENS		

5	PREVENTATIVE CARE				
	14,159	39,323			
	CHILDREN ATTENDED	PATIENTS RECEIVED IMMUNIZATIONS AND			
	WELL-CHILD VISITS	SEASONAL FLU VACCINES			

STATE-OF-THE-ART PRACTICES					
83.3% 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)			



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				\$51,31	4,145
	Total	2,712	\$459,706,379	\$10,018,600	\$41,295,545
Community Impact	Induced	644	\$124,382,148	\$3,996,488	\$9,201,214
	Indirect	688	\$109,728,003	\$2,340,904	\$8,732,636
	Direct	1,380	\$225,596,228	\$3,681,207	\$23,361,695
		Employment (# of FTEs)	Economic Impact	State & Local Tax Revenues	Federal Tax Revenues

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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