



LOOK-ALIKE HEALTH CENTERS



WHAT IS A LOOK-ALIKE HEALTH CENTER?

OVERVIEW

Health Center Program Look-Alikes, as defined by Section 1905(l)(2)(B) of the Social Security Act, are community-based healthcare providers that adhere to the rigorous requirements of the Health Resources and Services Administration (HRSA) Health Center Program but do not receive federal funding under Section 330 of the Public Health Service Act (referred to as 330-Funding).

Look-Alike Health Centers play a critical role in delivering comprehensive primary and preventive care services to underserved and vulnerable populations.

330-Funded vs. Look-Alike Health Centers

Both 330-Funded Health Centers and Look-Alike Health Centers are eligible for enhanced reimbursement rates from Medicare and Medicaid, also known as the Prospective Payment System (PPS) rate.

Look-Alikes also have access to the 340B Drug Pricing Program, which allows them to purchase prescription medications at reduced prices, thereby making healthcare more affordable for their patients. Unlike 330-funded Health Centers, Look-Alikes do not receive 330-Funding, Federal Tort Claims Act (FTCA) Coverage, and loan guarantees (See Table 1).

KEY FACTS



In 2023, there were 134 Look-Alikes in 35 states. (See Figure 1). As of September 2024, there are 155 Look-Alikes.



In 2023 there are 5,076 total full-time employees¹ which is a 19% increase from 2022.²



In 2023, there are 1,221,896 total patients served which is a 15% increase from 2022.²



In 2023 the total number of clinical visits was 4,161,540¹ which is a 22% increase from 2022.²



Patient Sub-Populations:¹

- Veterans -14,183
- School Based Health Center Patients - 14,181
- Homeless health center patients - 26,319
- Patients at a Health Center Near Public Housing -100,718

¹2023 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.

²2022 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.





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Pathways into the Health Center Program

There are three ways to become a HRSA-supported Health Center:

- 1 New Access Point Funding;
- 2 Look-Alike Designation; or
- 3 Service Area Competition.

Becoming a Look-Alike

To be designated as a Look-Alike, organizations must submit an application to HRSA and go through an Operational Site Visit (OSV) to ensure full compliance with all 18 HRSA Program Requirements with more than 90 elements.

Applying for New Access Point (NAPs)

- **LALs as Part of the 330-Pipeline:** Look-Alike Health Centers are strong candidates for NAP funding when HRSA releases its Notice of Funding Opportunity (NOFO) for NAPs, as they are fully compliant with HRSA program requirements. There is no set schedule for NAP NOFOs, as funding is dependent on appropriation of federal funds.
- **Addressing Unmet Need:** HRSA utilizes the Service Area Needs Assessment Methodology (SANAM) - which is based on multiple data sources - to calculate an Unmet Needs Scores (UNS) for each application. Historically, an area served by a Look-Alike may have a lower UNS because of the presence of the Look-Alike. Each NOFO specifies how HRSA plans to utilize the UNS for the NAP application.
- **Priority Points:** In past NAP funding opportunities, Look-Alikes have been eligible for additional priority points, although the total amount and eligibility criteria may change depending on the NOFO.

Growth in the Absence of NAPs

The total number of patients served by Look-Alike rose 105% between 2019-2023 (from 595,030 to 1,221,896 patients).ⁱ For awardees, the total number of patients served rose by 5% between 2019-2023 (from 29,836,613 to 31,277,341).ⁱⁱ

Financial Sustainability

Look-Alikes do not receive 330-funding, nor do they typically receive HRSA supplemental funding awards (COVID supplemental funds were an exception). As a result, LookAlikes rely more heavily on patient service revenues to fund operations. Look-Alikes are also adept on ensuring their patients have insurance coverage - about 9.6%ⁱⁱⁱ of Look-Alikes patients are uninsured compared to 17.91% for funded health centers.^{iv}

Conclusion

The Look-Alike Program has grown significantly in the absence of New Access Point (NAP) funding opportunities. When NAPs become available, Look-Alikes are strong candidates to receive funding awards because of their strong track record of compliance and high performance.

ⁱ 2023 Uniform Data System, Bureau of Primary Health Care, HRSA, DHHS.

ⁱⁱ National Awardee UDS Data Five-Year Summary: <https://data.hrsa.gov/tools/data-reporting/program-data/national>

ⁱⁱⁱ HRSA's National Look-Alikes Data, Table 4: Selected Patient Characteristics, Line 7: <https://data.hrsa.gov/tools/data-reporting/program-data/national-lookalikes/table?tableName=4&year=2023>

^{iv} HRSA's National Health Center Program Uniform Data System (UDS) Awardee Data, Table 4: Selected Patient Characteristics, Line 7: <https://data.hrsa.gov/tools/data-reporting/program-data/national/table?tableName=4&year=2023>





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Figure 1: Visual representation of the 134 Look-Alike Health Centers in 35 states.

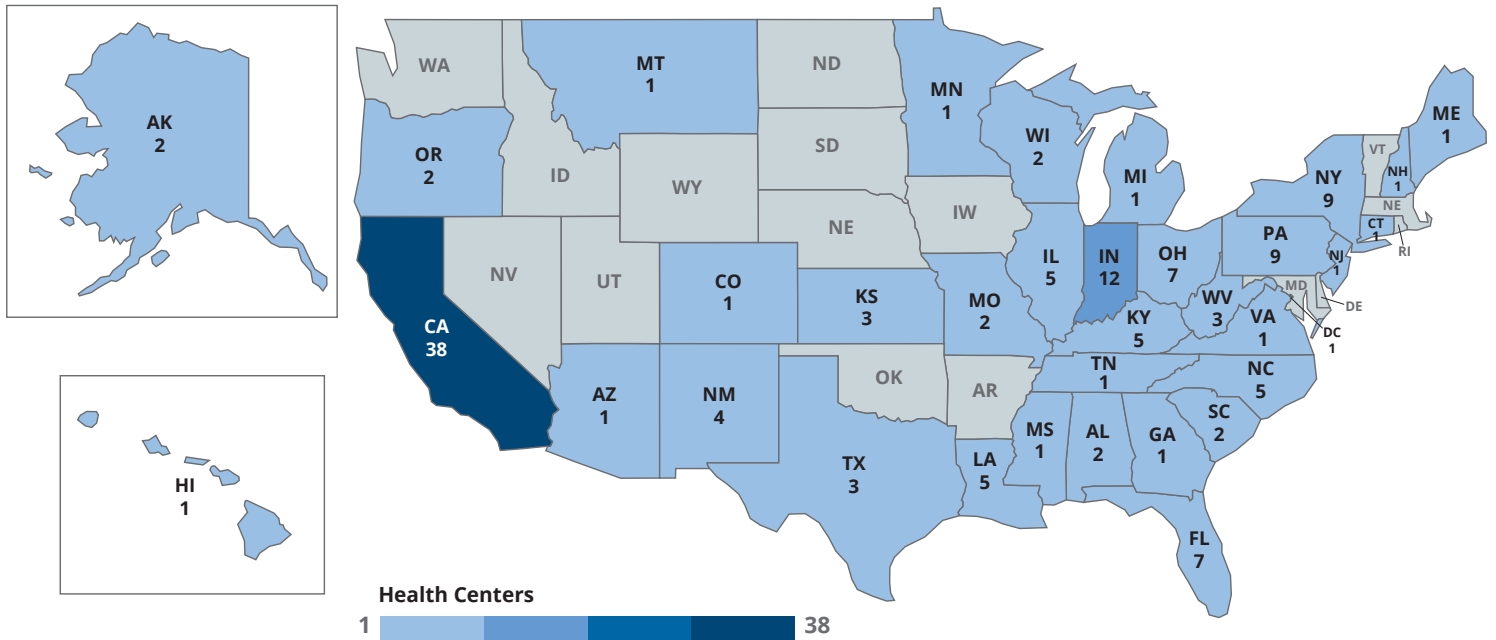


Table 1: Benefits of Health Center Program

Benefits	330-Funded	Look-Alike
FQHC Prospective Payment Systems reimbursement for services provided to Medicaid and Medicare patients	✓	✓
340 Drug Pricing	✓	✓
Vaccines for Children Program	✓	✓
National Health Services Corps providers	✓	✓
HRSA-supported training and technical assistance	✓	✓
HRSA Health Center Program Funding	✓	
Federal loan guarantees for capital improvements	✓	
Federal Tort Claims Act (FTCA) medical malpractice insurance	✓	



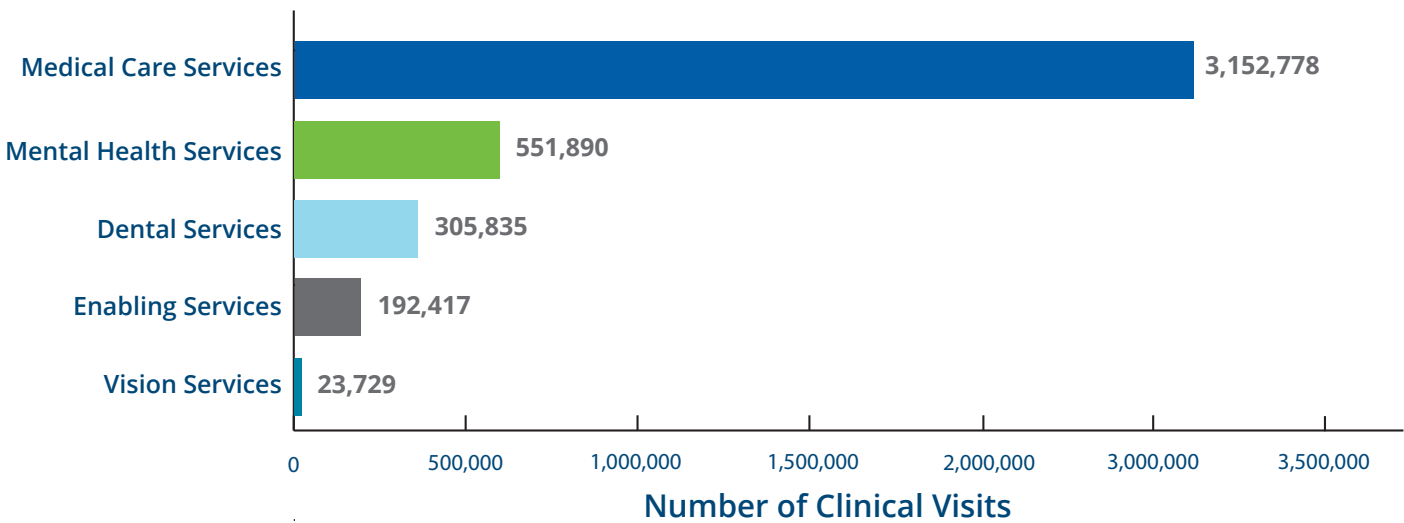


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In 2023, there was a total of 4.2 million clinical visits at Look-Alike Health Centers. Three out of four clinic visits were for medical services, whereas one in ten was for mental health services and around 1 in 20 for enabling services.

Figure 2: Clinical Visits in Look-Alike Health Centers



In 2023, compared with 330-funded health centers, Look-Alikes have a lower percentage of uninsured patients (5% vs.14%). In contrast, Look-Alikes have a higher percentage of privately insured patients (28% vs. 21%), Medicare patients (19% vs. 15%).

Figure 3: Look-Alike Patient Service Revenue

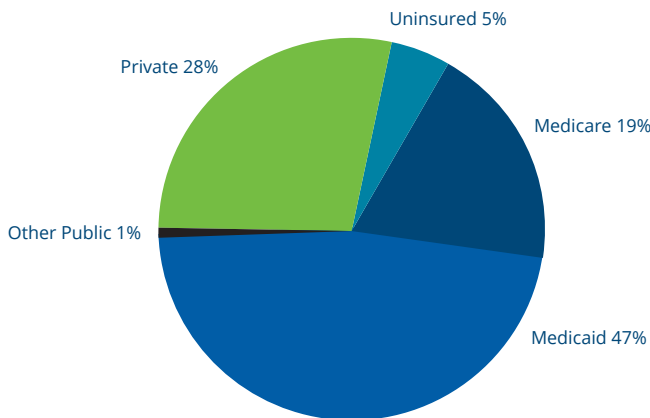
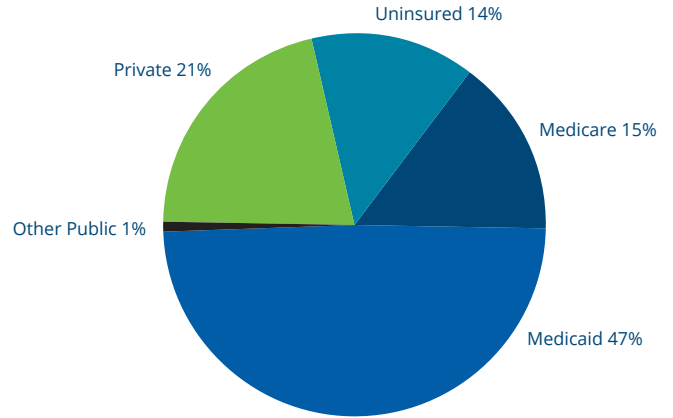


Figure 4: 330-Funded Patient Service Revenue



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