

## **Federally Qualified Health Centers as described by Missouri Primary Care Association ([www.mo-pca.org](http://www.mo-pca.org))**

### **Description of Federally-Funded Health Centers**

Today there are more than 900 Federally Qualified Health Centers (FQHCs) providing health care to more than 10 million patients through a nationwide network of 2,500 centers or delivery sites. They include Community Health Centers, Migrant Health Centers, Homeless health Center, and Urban Indian and Tribal Health Centers, which meet Federal standards, related to quality, cost and oversight.

Government figures show that there are approximately 44 million people in the U.S. who live in areas defined as medically underserved. Residents of these areas suffer higher instances of illness and infant mortality. They are poorer and more elderly, and they lack access to adequate health care because there are no doctors, nurses or other health professionals to serve them. Health Center patients are men, women, and children from all walks of life who have fallen through society's safety net. Approximately 40% of the centers and patients served are in urban areas, while 60% are in rural areas or smaller communities.

Health Center Programs were created and sustained by Congress to meet the health care needs of underserved communities and high-risk patients. Their focus is on primary care, prevention, education, and case management. Patients are billed on a sliding fee scale so that income or insurance status are not barriers to care. Federal grants are available to centers to help cover the cost of serving the uninsured. Location, hours of operation, staff, and programs are tailored to the special needs of the community.

These standards are in addition to any state or local licensure requirements and are unique in the health industry. While they may appear overly stringent, these standards are useful in establishing acceptable practice norms, accounting to Congress and the U.S. taxpayer. In fact, Health Center standards are among the highest in the industry. Health Centers are tested models of community-based care. They are partnerships of people, government, and communities working together to improve the health status in the community.

### **Qualified How?**

- Centers are located in medical shortage areas or are serving people defined as medically underserved.
- Centers must provide or arrange for comprehensive primary and preventative care including physicians, nurses, lab, x-ray, pharmacy, dental, mental health, health and nutrition, education, periodic scheduling and other such services to ensure access.
- Physicians are board Certified or eligible
- Centers must have a formal relationship with one or more hospitals including admitting privileges, and must provide 24-hour patient access to services.
- Centers are required to submit comprehensive health plans for their geographic area detailing services, demonstrating need and demand, and showing the impact of their intervention.
- Centers are subject to required, Periodic Primary Care Effectiveness Reviews, which audit compliance with administrative requirements and medical/dental procedures.
- Agency-wide audits are required and submitted annually to the federal government