Federally Qualified Health Centers (FQHCs) & Hospital-Licensed Health Centers provide care to residents of Massachusetts. They collectively provide tremendous value and impacts to their communities—from ACCESS to care for vulnerable populations; SAVINGS to the health care system; JOBS and ECONOMIC STIMULUS to local communities; STATE-OF-THE-ART, COMPREHENSIVE, COORDINATED CARE, with a focus on CHRONIC DISEASE MANAGEMENT and QUALITY HEALTH OUTCOMES. Highlights of their 2017 contributions are shown below.

**Massachusetts Health Centers Provide...**

- **JOBS and other positive impacts on the ECONOMY**
  - 18,340 TOTAL JOBS (FTEs)
  - 10,504 HEALTH CENTER JOBS
  - 7,836 OTHER JOBS IN THE COMMUNITY
  - $2,603,787,054 TOTAL ECONOMIC IMPACT of current operations
  - $1,309,819,448 DIRECT HEALTH CENTER SPENDING
  - $1,293,967,606 COMMUNITY SPENDING
  - $408 Million ANNUAL TAX REVENUES
  - $100 Million STATE AND LOCAL TAX REVENUES
  - $308 Million FEDERAL TAX REVENUES

- **SAVINGS to the health system**
  - 24% LOWER COSTS FOR HEALTH CENTER MEDICAID PATIENTS
  - $968 Million SAVINGS TO MEDICAID
  - $2 Billion SAVINGS TO THE OVERALL HEALTH SYSTEM

- **ACCESS to care for vulnerable populations**
  - 1,000,888 PATIENTS SERVED
  - 4,786,779 PATIENT VISITS
  - 235,064 patients are CHILDREN AND ADOLESCENTS
  - 765,824 patients are ADULTS
  - 78% of patients are LOW-INCOME (Below 200% of the Federal Poverty Level)
  - 61% of patients identify as an ETHNIC OR RACIAL MINORITY
**COMPREHENSIVE COORDINATED CARE**

- 655,718 patients received **MEDICAL CARE**
- 177,783 patients received **DENTAL CARE**
- 61,395 patients received **MENTAL HEALTH CARE**
- 81,634 patients received at least one **ENABLING SERVICE** to overcome barriers to care

In addition, patients received non-clinical services to connect them to community resources such as **HOUSING, JOB TRAINING, AND CHILD CARE**

**PREVENTIVE CARE and CHRONIC DISEASE MANAGEMENT**

- 45,358 patients were diagnosed with **ASTHMA**
- 22,627 patients were diagnosed with **CORONARY ARTERY DISEASE**
- 63,348 patients were diagnosed with **DIABETES**
- 123,735 patients were diagnosed with **HYPERTENSION**

**STATE-OF-THE-ART PRACTICE**

- 100% of health centers have installed and currently use an **ELECTRONIC HEALTH RECORD (EHR)**
- 87% of health centers are currently participating in the Centers for Medicare and Medicaid Services (CMS) **EHR INCENTIVE PROGRAM “MEANINGFUL USE”**
- 92% of centers recognized as **PATIENT-CENTERED MEDICAL HOMES**

**QUALITY HEALTH OUTCOMES**

- 81% of health centers met or exceeded at least one **HEALTHY PEOPLE 2020 GOAL FOR CLINICAL PERFORMANCE**
- **87%** of health centers have installed and currently use an **ELECTRONIC HEALTH RECORD (EHR)**

**Economic impact** was measured using 2016 **IMPLAN Online**

For more information, visit us online: [www.caplink.org](http://www.caplink.org)
**Value + Impact of Health Centers**

**Massachusetts League of Community Health Centers**

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**REFERENCES AND DATA SOURCES**

5. Comprehensive Coordinated Care: Bureau of Primary Health Care, HRSA, DHHS, 2017 Uniform Data System.
6. Preventive Care and Chronic Disease Management: Bureau of Primary Health Care, HRSA, DHHS, 2017 Uniform Data System.
8. 2017 League Fact Sheets

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**Summary of 2017 Total Economic Activity**

*Stimulated by Current Operations of*

<table>
<thead>
<tr>
<th>Economic Impact</th>
<th>Employment (# of FTE’s)</th>
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<tbody>
<tr>
<td>Direct</td>
<td>Indirect</td>
</tr>
<tr>
<td>Community Impact</td>
<td></td>
</tr>
<tr>
<td>$1,309,819,448</td>
<td>$ 414,435,996</td>
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<tr>
<td>10,504</td>
<td>2,171</td>
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</table>

Direct # of FTEs (employment) based on HRSA 2017 UDS state level data for FQHCs.

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**Summary of 2017 Tax Revenue**

<table>
<thead>
<tr>
<th></th>
<th>Federal</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct</td>
<td>Indirect</td>
<td>Induced</td>
</tr>
<tr>
<td>Community Impact</td>
<td></td>
<td></td>
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<tr>
<td>$186,830,882</td>
<td>$39,662,597</td>
<td>$81,058,248</td>
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<td>$36,412,918</td>
<td>$18,283,076</td>
<td>$45,395,456</td>
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</table>

Total Tax Impact $407,643,177

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*Full-Time Equivalent (FTE) of 1.0 means that the person is equivalent to a full-time worker. In an organization that has a 40-hour work week, a person who works 20 hours per week (i.e. 50 percent 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).
HOW ECONOMIC IMPACT IS MEASURED

Using IMPLAN, integrated economic modeling software, this analysis applies the “multiplier effect” to capture the direct, indirect, and induced economic effects of health center business operations and capital project plans. IMPLAN generates multipliers by geographic region and by industry combined with a county/state database. It is widely used by economists, state and city planners, universities and others to estimate the impact of projects and expenditures on the local economy. This analysis was conducted using 2016 IMPLAN Online.

WHAT ARE DIRECT AND COMMUNITY IMPACTS?

Direct impacts result from health center expenditures associated with operations, new facilities, and hiring.

A health center purchases medical devices from a local medical supply store. This purchase is a direct economic impact of the health center’s operations.

Community impacts can be indirect, resulting from purchases of local goods and services, and jobs in other industries.

The medical supply store purchases paper from an office supply store to print receipts and hires a local delivery service to transport the medical devices. These purchases are indirect economic impacts of the health center’s operations.

Community impacts can be induced, resulting from purchases of local goods and services at a household level made by employees of the health center and suppliers.

As local industries grow and household income increases, employees of the health center, medical supply store, office supply store, and delivery service spend their salaries in the community. These purchases are induced economic impacts because they are the result of a ripple effect through the entire community.

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COMMUNITY HEALTH CENTERS INCLUDED IN THIS ANALYSIS

Baystate Medical Center Health Centers
Boston Health Care for the Homeless Program
Bowdoin Street Health Center
Brockton Neighborhood Health Center
Brookside Community Health Center
Cambridge Health Alliance Health Centers
Caring Health Center
Charles River Community Health
Codman Square Health Center
Community Health Center of Cape Cod
Community Health Center of Franklin County
Community Health Connections
Community Health Programs
Community Healthlink
Connecticut River Valley Farmworker Health Program
Dimock Community Health Center
DotHouse Health
Duffy Health Center
East Boston Neighborhood Health Center
Edward M. Kennedy Community Health Center
Family Health Center of Worcester
Fenway Community Health Center
Greater Lawrence Family Health Center
Greater New Bedford Community Health Center
Greater Roslindale Medical and Dental Center
Harbor Health Services, Inc.
Harvard Street Neighborhood Health Center
HealthFirst Family Care Center / Family HealthCare Center at SSTAR
Hilltown Community Health Centers
Holyoke Health Center
Island Health Care
Lowell Community Health Center
Lynn Community Health Center
Manet Community Health Center
Mattapan Community Health Center
MGH Community Health Associates Health Centers
NEW Health
North Shore Community Health
Outer Cape Health Services
South Boston Community Health Center
South Cove Community Health Center
South End Community Health Center
Southern Jamaica Plain Health Center
Springfield Health Services for the Homeless Health Center
Upham’s Corner Health Center
Whittier Street Health Center

This report was developed by Capital Link, a non-profit organization that has worked with hundreds of health centers and Primary Care Associations for over 18 years to plan capital projects, finance growth, and identify ways to improve performance. We provide innovative consulting services and extensive technical assistance with the goal of supporting and expanding community-based health care. For more information, visit us online at www.caplink.org.