

# **Epi Data Brief**

New York City Department of Health and Mental Hygiene

October 2013, No. 34

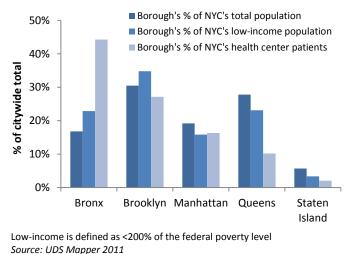
# Federally Funded Health Centers in New York City

The federal government provides grants to certain ambulatory care facilities under Section 330 of the Public Health Services Act. These grants are awarded after a competitive application process and awardees are referred to variously as Section 330 grantees, federally funded health centers, federally qualified health centers community health centers or health centers.<sup>a</sup> They are community-based, public or private, non-profit health centers that provide comprehensive primary care services to medically underserved areas or populations. These centers cannot refuse patients on the basis of insurance status or ability to pay. The 2010 health care reform legislation known as the Affordable Care Act provides for additional funding of \$11 billion over five years to community health centers nationwide and as health care reform is implemented community health centers will continue to be an important part of the health care safety net. This Data Brief presents recent data on federally funded health centers in New York City (NYC).

# Health center patients citywide and by borough

- As of August 2013, there were 34 health center grantees in NYC operating more than 300 sites.<sup>1</sup> Of these more than 300 sites, about 100 provide primary care services to the general public. The others serve special populations (e.g., homeless), are at special locations (e.g., schools) or provide limited services (e.g., dental only). Of sites serving the general public, the Bronx has the most sites (37) and Staten Island the fewest (2).
- In 2011, health centers served 800,000 New Yorkers citywide – 10% penetration<sup>b</sup> of the NYC population, ranging from 25% in the Bronx to 4% in both Queens and Staten Island.<sup>4</sup> Health center penetration of NYC's low-income<sup>c,d</sup> population was 26% but this too varied by borough. The Bronx had the highest health center penetration of low-income population by borough (48%) and Queens the lowest (12%).

### Percent of New York City population, lowincome population, and health center patient population by borough, 2011



Notes

<sup>a</sup> For more information about Section 330 and federally funded health centers, see <u>bphc.hrsa.gov</u> or the <u>Data Tables</u> for this report. <sup>b</sup> Health center penetration is the ratio of an area's total number of health center patients to the area's population or subpopulation as specified.

<sup>c</sup> Health center penetration of a low-income<sup>d</sup> population is the maximum proportion of the low-income population who may be health center patients (i.e., if every health center patient is low-income). In actuality, not every health center patient is low-income; for example, in 2011, of NYC health center patients whose income was known, 87% were low-income. The concept of health center penetration of a low-income population is used to indicate potential unmet need in an area. Note that persons who are not served by a federally funded health center (even if low-income or uninsured) are not necessarily without health care.

<sup>d</sup> Low-income is defined as <200% of the federal poverty level. Higher-income is defined as ≥400% of the federal poverty level. <sup>e</sup> The United Hospital Fund classifies New York City into 42 neighborhoods, comprised of contiguous zip codes, several of which were combined to create the 34 neighborhoods used in this report.

#### Authored by: Maryellen Tria

Acknowledgements: Susan Resnick, Cari Olson, Kinjia Hinterland, Praveen Pannala, Tanya Shah, Louise Cohen (Public Health Solutions), Beverly Grossman (CHCANYS), James Welsh (CHCANYS)



### **Health center services**

- Federally funded health centers must provide comprehensive primary care services either directly or by referral.
- On average, NYC community health centers directly provided medical services to 90% of their patients, dental services to 20% of their patients, mental health services to 8% of their patients, and substance abuse treatment to less than 1% of their patients.<sup>3</sup>

### Insurance status of health center patients

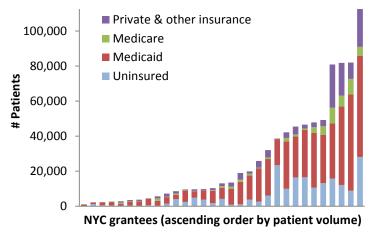
- Community health centers predominantly serve patients who have Medicaid (or other need-based public insurance) or who are uninsured. In NYC, 53% of health center patients had Medicaid and 23% were uninsured.<sup>2</sup> Statewide, 51% of health center patients had Medicaid and 25% were uninsured, while nationwide 42% of health center patients had Medicaid and 36% were uninsured.
- Although half of NYC health center patients had Medicaid, the proportion of publicly insured patients varied by grantee, ranging from 29% to 80%.<sup>3</sup>
- The proportion of uninsured patients also varied by grantee, ranging from 1% to 61%.

### Percent of health center patients provided directly with specified service, United States, New York State, New York City, 2011

	Medical	Dental	Mental Health	Substance Abuse Treatment
US	86%	20%	5%	1%
NYS	87%	21%	6%	1%
NYC	90%	20%	8%	<1%
Range for NYC centers	65% - 100%	0% - 64%	0% - 57%	0% - 52%

Sources: HRSA Health Center Grantee UDS Reports 2011, HRSA Individual Health Center Data 2011

# Patients by type of health insurance by grantee, New York City, 2011



Private & other insurance includes employer-sponsored insurance, individually purchased insurance, insurance purchased for public employees, etc. *Source: HRSA Individual Health Center Data 2011* 

#### **Data Sources**

<sup>1</sup> HRSA Health Center Site Directory: The Health Resources and Services Administration (HRSA) maintains a directory of all health center sites in the United States. For more information, visit <u>http://datawarehouse.hrsa.gov/sitesdetail.aspx</u>. Accessed Aug. 1, 2013.
<sup>2</sup> HRSA Health Center Grantee UDS Reports: HRSA's Bureau of Primary Health Care provides national and state reports summarizing 2011 calendar year operational and administrative data submitted by health centers via the Uniform Data System (UDS). For details, visit <u>http://bphc.hrsa.gov/healthcenterdatastatistics/index.html</u>. The Community Health Care Association of New York State (CHCANYS) provided aggregate NYC health center data derived from 2011 UDS data.

<sup>3</sup> HRSA Individual Health Center Data: HRSA's Bureau of Primary Health Care reports selected UDS data at the grantee (not site) level. For details, visit <u>http://bphc.hrsa.gov/uds/view.aspx?q=rlg&year=2011</u>. Accessed Aug. 21, 2013.

<sup>4</sup> **UDS Mapper**: The UDS Mapper is a publicly accessible, online resource with 2011 data on health center use nationwide by zip code. For details, visit <u>http://udsmapper.org</u>. Accessed June 6, 2013.

<sup>5</sup> **Community Health Survey**: The NYC Community Health Survey is a telephone health survey of approximately 9,000 adults aged 18 and older, conducted annually by the Health Department. 2011 data are presented in this brief. For more information, visit <u>nyc.gov/health/survey</u>.

### **MORE** New York City Health Data and Publications

For complete tables of data presented in this Brief, visit <a href="https://www.nyc.gov/html/doh/downloads/pdf/datatable34.pdf">nyc.gov/html/doh/downloads/pdf/datatable34.pdf</a>

Visit EpiQuery – the Health Department's online, interactive health data system at nyc.gov/health/EpiQuery

### Data & Statistics at nyc.gov/health/data

## Uninsured and low-income New Yorkers and community health centers

- In 2011, both uninsured adults and adults in low-income households were more likely than insured adults and adults in higher-income<sup>d</sup> households, respectively, to report not having a regular care provider or not getting needed care.<sup>5</sup> As federally funded health centers must accept patients regardless of insurance status or ability to pay, health centers can provide access to health care for the underserved.
- Health center grantees must serve high-need populations or underserved areas but health center sites are not
  necessarily located in areas with high proportions of uninsured adults or low-income residents. Many patients
  use community health center sites outside their neighborhood.<sup>e</sup>
- Health center penetration<sup>b</sup> varies across NYC neighborhoods. Some NYC neighborhoods have high proportions of uninsured adults or low-income population yet have *low* health center penetration.<sup>4</sup>

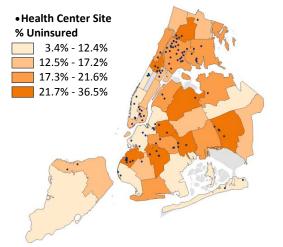
Area characteristics and federally funded health center penetration, New York City and selected neighborhoods, 2011

	% low- income	Health center penetration of low-income population	Health center penetration of total population
Citywide	38%	26%	10%
West Queens	40%	9%	4%
East New York/New Lots (Brooklyn)	52%	16%	8%
Sunset Park (Brooklyn)	55%	52%	29%
Williamsburg/Bushwick (Brooklyn)	59%	20%	12%
The South Bronx	66%	60%	40%

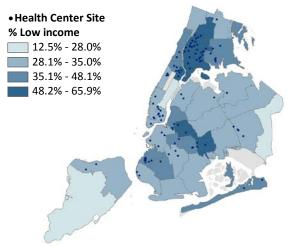
The United Hospital Fund classifies NYC into 42 neighborhoods, comprised of contiguous zip codes, several of which were combined to create 34 neighborhoods; selected neighborhoods are listed above.

Health center penetration is the ratio of an area's total number of health center patients to the area's population or subpopulation as specified. *Source: UDS Mapper 2011* 

### Health center sites providing primary care services to the general public (2013) and % uninsured adults by New York City neighborhood (2011)



### Health center sites providing primary care services to the general public (2013) and % low-income residents by New York City neighborhood (2011)



The United Hospital Fund classifies NYC into 42 neighborhoods, comprised of contiguous zip codes, several of which were combined to create the 34 neighborhoods represented above.

Low-income is defined as <200% of the federal poverty level.

Health center sites providing primary care services to the general public excludes sites serving special populations (e.g., homeless), at special locations (e.g., schools, adult homes) or providing limited services (e.g., dental or mental health but no medical care).

Sources: HRSA Health Center Site Directory 2013, Community Health Survey 2011 (% uninsured adult), UDS Mapper 2011 (% low-income residents)