

## **MAKING A DIFFERENCE**

THE FEDERALLY QUALIFIED HEALTH CENTERS IN FRESNO COUNTY





## SERVICES PROVIDED BY FRESNO COUNTY'S FEDERALLY QUALIFIED HEALTH CENTERS

*General Primary Medical Care*

*Laboratory*

*X-Ray Procedures*

*Diagnostic Tests/Screenings*

*Emergency Medical Services*

*Urgent Medical Care*

*24-Hour Coverage*

*Family Planning*

*HIV Testing and Counseling*

*Immunizations*

*Following Hospitalized Patients*

*Gynecological Care*

*Prenatal Care*

*Antepartum Fetal Assessment*

*Ultrasound*

*Labor and Delivery Professional Care*

*Postpartum Care*

*Dental Care*

*Comprehensive Mental Health Treatment/Counseling*

*Developmental Screening*

*Comprehensive Substance Abuse Treatment/Counseling Services*

*Hearing Screening*

*Nutrition Services Other Than WIC*

*Pharmacy - Licensed Pharmacy Staffed by Registered Pharmacist*

*Pharmacy - Provider Dispensing*

*Vision Screening*

*Optometry*

### **Central Valley Health Network**

1107 Ninth Street, Suite 810  
Sacramento, CA 95814  
(916) 552-2846  
(916) 444-2424 fax  
email: [cvhn@cvhncclinics.org](mailto:cvhn@cvhncclinics.org)  
[www.cvhncclinics.org](http://www.cvhncclinics.org)

### **Sequoia Community Health Centers**

(Administrative Office)  
1945 N. Fine Avenue, Suite 116  
Fresno, CA 93727-1528  
(559) 457-5800  
[www.sequoiacommunity.org](http://www.sequoiacommunity.org)

### **Valley Health Team**

(Administrative Office)  
21890 Colorado  
P.O. Box 737  
San Joaquin, CA 93660  
(559) 693-2462  
(website under development)

### **United Health Centers**

(Administrative Office)  
650 Zediker Avenue  
Parlier, CA 93648  
(559) 646-6618  
[www.unitedhealthcenters.org](http://www.unitedhealthcenters.org)



## TABLE OF CONTENTS

Introduction	2
Health Conditions in Fresno County	3
What Are Some of the Causes of Poor Health in Fresno County?	4
Who Are Fresno County's Federally Qualified Health Centers (FQHCs)?	5
Location Map of Fresno County's Federally Qualified Health Centers	6
How Do Fresno County's FQHCs Serve the County Health System?	8
Where Do Lower Income Fresno County Residents Get Care?	9
Farmworkers and Prenatal Care	10
Economic Impact of Fresno County's FQHCs on the County's Economy	11
Conclusion	12



## INTRODUCTION

*Fresno County faces enormous health challenges* - a high rate of uninsured residents, fewer doctors per capita than the rest of the state, and an overburdened health care system.

One of the major success stories in easing some of the health care crisis has been the county's federally qualified health centers (FQHCs) - Sequoia Community Health Centers, United Health Centers of the San Joaquin Valley, and Valley Health Team.<sup>1</sup>

Starting as small, neighborhood clinics over thirty years ago these non profit organizations now have 22 clinic sites that provided over 313,000 essential preventive and primary care visits to 10% of Fresno County's residents in 2006, generated \$147 million in economic activity annually and created nearly 850 jobs locally.

This report reviews data on the FQHCs' patients, medical services, impacts on the health care safety net,

and economic impact in Fresno County. These data paint a picture of a clinic system that provides a high volume of cost effective care to the county's most needy residents in the rural and urban areas. The residents that rely on these clinics include farmworkers, the uninsured, the poor, Medi-Cal recipients, pregnant women, homeless persons, and public housing residents- residents often shunned by the private, for-profit sector. In addition to providing necessary care to thousands of residents, the FQHCs also bring millions of dollars of federal and state funds into the local economy that stimulate economic activity and employment.

While FQHCs continue to receive strong support from federal and state policymakers, they are strained to meet the increasing demands from the underserved populations for medical and dental services. With the increasing ranks of the uninsured, a faltering economy and state budget pressures, the FQHCs will require continued support and expanded resources to meet the community's health needs.

*"...these non profit organizations ... generated \$147 million in economic activity annually and created nearly 850 jobs locally."*

<sup>1</sup> Federally Qualified Health Centers are non-profit, consumer-directed health care corporations that provide comprehensive primary and preventive health care services and either (1) receive grants under the U.S. Public Health Service Act (i.e., Community Health Centers, Migrant Health Programs, Health Care for the Homeless Programs, Health Care in Public Housing Programs, Indian Tribal Health Centers, Urban Indian Centers) or (2) do not receive federal PHSA grants, but meet the standards for funding. For a full discussion of the different types of community clinics in California, see Saviano, E., and Powers, M., California's Safety-Net Clinics: A Primer, November 2005, <http://www.chcf.org/documents/chronicdisease/SafetyNetClinicPrimer.pdf>.



**MAKING A DIFFERENCE**  
THE FEDERALLY QUALIFIED  
HEALTH CENTERS IN FRESNO COUNTY

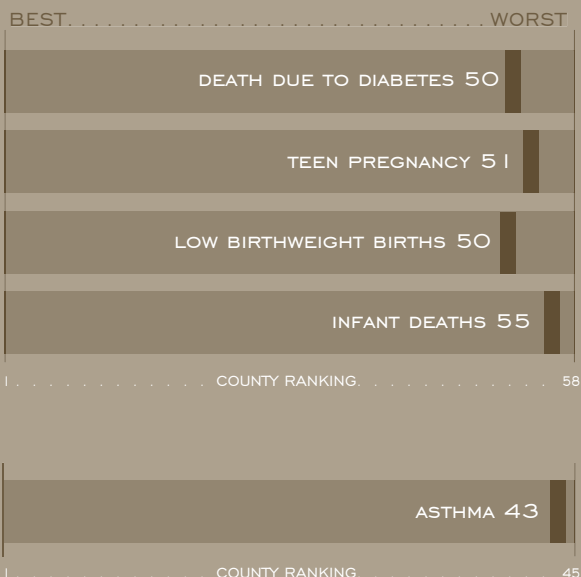
## HEALTH CONDITIONS IN FRESNO COUNTY

It has been well documented that *Fresno County is an area of immense need*, with fewer health resources than the rest of the State. It is a region of great diversity with both urban and rural populations, many immigrants with limited English proficiency, and a low income population that is higher than the state average. Although Fresno County's \$4 billion agricultural industry is the largest in the United States, it also means that the county is susceptible to the vagaries of adverse weather, worker shortages, and international competition.

The 2007 County Health Status Profiles and the CSU Fresno report, "Health in the Heartland: The Crisis Continues" (2004) provide insights into the health status of Fresno County. Fresno County has the distinction of being among the worst in the state. Of 58 counties in California, Fresno County ranks near the bottom with one of the highest rates for:

- deaths due to diabetes (#50)
- teen pregnancy (#51)
- low birthweight births (#50)
- infant deaths (#55).
- asthma (#43 of 45)

### HEALTH INDICATORS RANKED BY COUNTY







## WHAT ARE SOME OF THE CAUSES OF POOR HEALTH IN FRESNO COUNTY?

### HIGH POVERTY

The October 2005 Brookings Institution report, “Katrina’s Window: Confronting Concentrated Poverty Across America,” found that Fresno had the highest rate of concentrated poverty in the nation with more than 43% of the population living in extreme poverty neighborhoods. The high rate (29%) of children living in poverty in Fresno County places it at the bottom of the State according to the Department of Health Services, ranking 57 of 58 California counties. The median household income in Fresno County (\$42,732) is 34% below the State average.

### LACK OF HEALTH INSURANCE

Fresno County has higher rates of uninsured residents than the State average. One in three (33.5%) non-elderly Fresno County adults (117,000) had no health insurance all or part of the year, according to the 2005 California Health Interview Survey, compared to one in four (25.8%) statewide. There were an additional 47,000 children, or 16.6%, who were uninsured all or part of the year. This compares to 10.2% statewide.

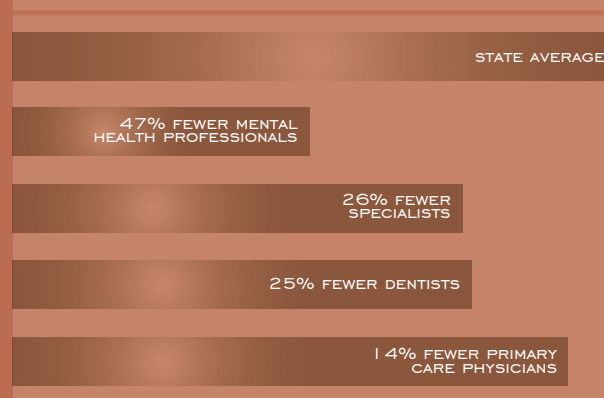
### POPULATION DIVERSITY

Fresno County is exceptionally diverse in its ethnic mix, languages spoken, and the rural/urban character of its population. The Census Bureau’s 2006 American Community Survey shows that in Fresno County 21% of residents are foreign born, 48% are Latino (more than three times the national average), and 9% are Asian (double the national average, with a large concentration of Southeast Asian refugees). Forty-two percent speak a language other than English at home; more than double the national average. In 2000, the Census reported that 30% of Fresno County residents lived outside urbanized areas.

### LACK OF MEDICAL INFRASTRUCTURE

Fresno County faces enormous provider shortages. Per capita, Fresno County has 47% fewer mental health professionals, 25% fewer dentists, 14% fewer primary care physicians, and 26% fewer specialists than the State average (“Health in the Heartland: The Crisis Continues” 2004). In some rural areas there are no providers.

#### PERCENTAGE OF PROVIDERS BASED ON STATE AVERAGE



Fresno County also has no public hospital and the County provides few direct health services. In 1996, the County Board of Supervisors closed the County hospital and contracted with a community hospital for indigent care. Although this contract provides for medical care for the poorest of Fresno County residents meeting the County’s income criteria, it does not cover all uninsured populations, nor are services available throughout the county. In addition, the lack of a public hospital means that Fresno County loses opportunities for federal and state grants and subsidies that are directed to public hospitals, thus exacerbating the underfunding of health care.



**MAKING A DIFFERENCE**  
THE FEDERALLY QUALIFIED  
HEALTH CENTERS IN FRESNO COUNTY



## WHO ARE FRESNO COUNTY'S FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs)?

From humble beginnings as small neighborhood clinics over thirty years ago, *the community health centers in Fresno County have grown to be major providers of health care to county residents providing over 300,000 medical and dental visits a year.* The three independent organizations in Fresno County - Valley Health Team, United Health Centers of the San Joaquin Valley and Sequoia Community Health Centers - are unified by a mission to provide quality care to all persons regardless of their ability to pay.

FQHCs are “open door” clinics, accepting Medi-Cal, Medicare, and private insurance. They have sliding fees for the uninsured and do not turn away any patients due to their inability to pay. These centers have been designated “federally qualified health centers” (FQHC) by the Bureau

of Primary Health Care and receive federal support to provide care to the medically underserved. The federal grants allow the FQHCs to see patients otherwise unable to pay for care, yet the amounts do not cover the clinics’ costs. Each year, the FQHC’s routinely provide more uncompensated care than that for which their grants provide.

The centers are nonprofit corporations that are professionally staffed and community governed. The Board of Directors of each clinic is composed of a majority of patients, as well as other community leaders, who together act as fiduciaries to establish policies and oversee the financial health of the clinics. Professional managers and medical staff ensure that the highest quality care is provided cost efficiently.

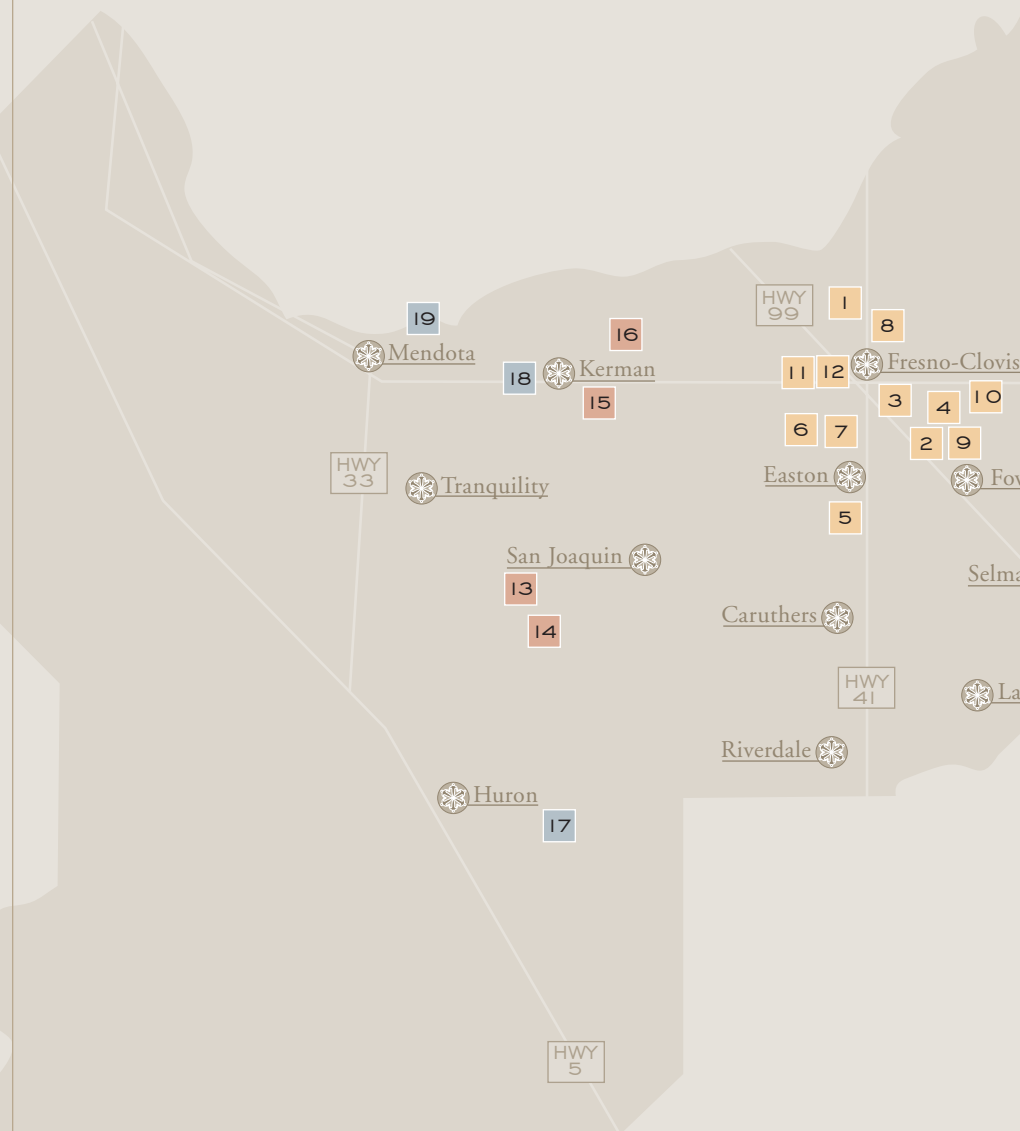
*“FQHCs are “open door” clinics that accept Medi-Cal, Medicare and private insurance, and offer an affordable sliding fee schedule for the uninsured.”*



## SEQUOIA COMMUNITY HEALTH CENTERS

- 1 **BULLARD AND FRESNO HEALTH CENTER**  
6011 N. Fresno Street, Suite 115  
Fresno, CA 93710
- 2 **DIVISADERO HEALTH CENTER**  
2021 Divisadero Street  
Fresno, CA 93701
- 3 **DIVISADERO WOMEN'S HEALTH CENTER**  
145 Clark Street  
Fresno, CA 93701
- 4 **DIVISADERO HEALTH CARE FOR THE HOMELESS**  
2029 Divisadero Street  
Fresno, CA 93701
- 5 **EASTON HEALTH CENTER**  
5784 S. Elm Avenue  
Fresno, CA 93706
- 6 **ELM HEALTH CENTER**  
2790 S. Elm Avenue  
Fresno, CA 93706
- 7 **ELM CHILDREN'S CENTER**  
2798 S. Elm Avenue  
Fresno, CA 93706
- 8 **GARLAND HEALTH CENTER**  
3727 N. First Street, Suite 106  
Fresno, CA 93726
- 9 **ORANGE & BUTLER HEALTH CENTER**  
1350 S. Orange Avenue  
Fresno, CA 93702
- 10 **REGIONAL MEDICAL CENTER**  
2505 Divisadero Street  
Fresno, CA 93721
- 11 **WEST FRESNO HEALTH CENTER**  
302 Fresno Street, Suite 102  
Fresno, CA 93706
- 12 **WEST FRESNO DENTAL CENTER**  
302 Fresno Street, Suite 204  
Fresno, CA 93706

## LOCATIONS OF HEALTH CENTERS IN FRESNO COUNTY

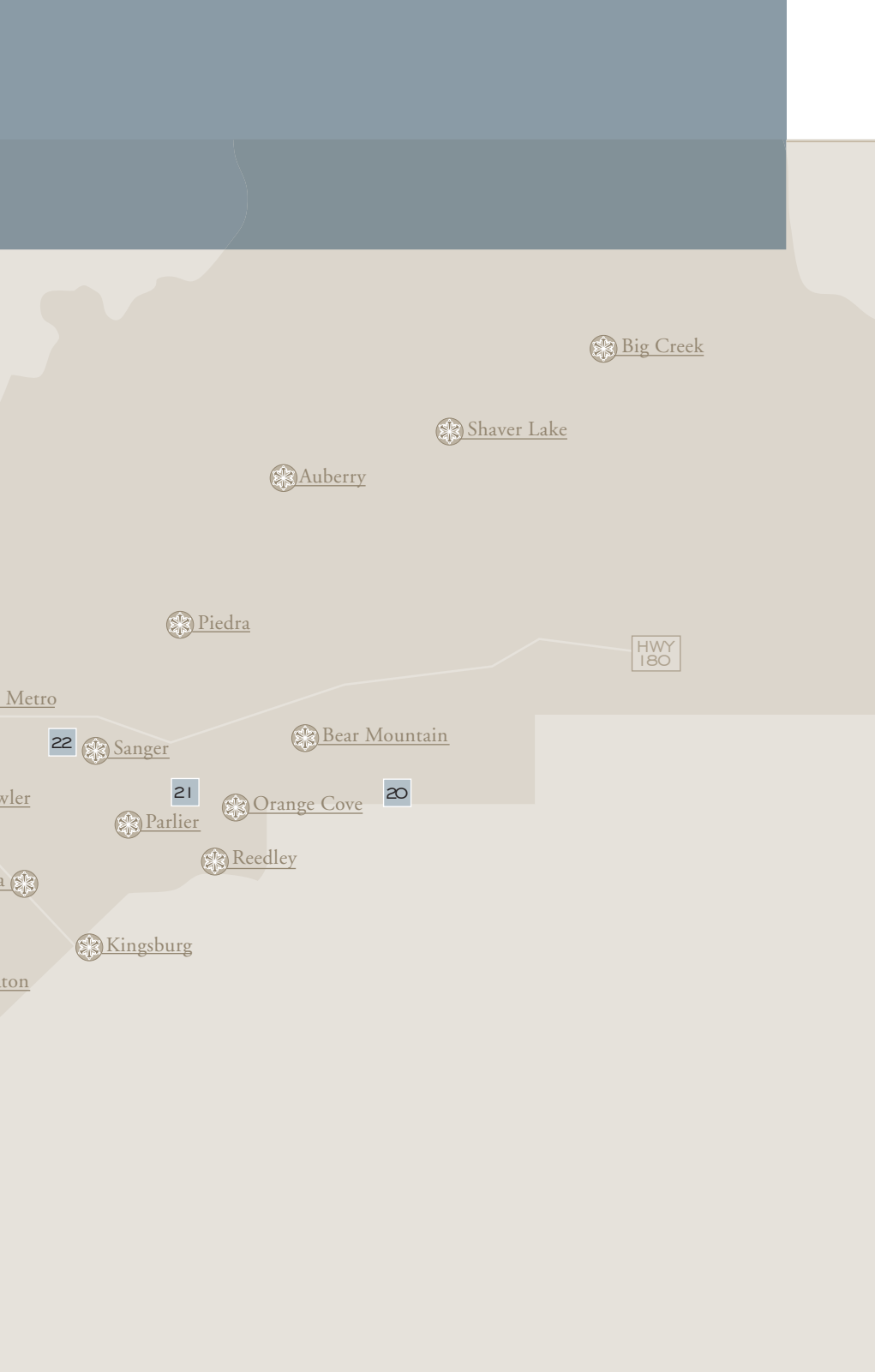


## SERVICES PROVIDED BY FRESNO COUNTY'S FEDERALLY QUALIFIED HEALTH CENTERS

General Primary Medical Care  
Laboratory  
X-Ray Procedures  
Diagnostic Tests/Screenings  
Emergency Medical Services  
Urgent Medical Care  
24-Hour Coverage  
Family Planning

HIV Testing and Counseling  
Immunizations  
Following Hospitalized Patients  
Gynecological Care  
Prenatal Care  
Antepartum Fetal Assessment  
Ultrasound  
Labor and Delivery Professional Care





## VALLEY HEALTH TEAM

**SAN JOAQUIN HEALTH CENTER** 13  
21890 Colorado Avenue  
San Joaquin, CA 93660

**VALLEY SMILES** 14  
21890 Colorado Avenue  
San Joaquin, CA 93660

**KERMAN HEALTH CENTER** 15  
171 S. Madera Avenue  
Kerman, CA 93630

**VALLEY OPTOMETRIC CENTER** 16  
449 S. Madera Avenue  
Kerman, CA 93630

## UNITED HEALTH CENTERS

**HURON HEALTH CENTER** 17  
16928 Eleventh Street  
Huron, CA 93234

**KERMAN HEALTH CENTER** 18  
517 S. Madera Avenue  
Kerman, CA 93630

**MENDOTA HEALTH CENTER** 19  
121 Barboza Street  
Mendota, CA 93640

**ORANGE COVE HEALTH CENTER** 20  
445 Eleventh Street  
Orange Cove, CA 93646

**PARLIER HEALTH CENTER** 21  
650 Zediker Avenue  
Parlier, CA 93648

**SANGER HEALTH CENTER** 22  
2502 E. Jensen Avenue  
Sanger, CA 93657

Postpartum Care  
Dental Care  
Comprehensive Mental Health  
Treatment/Counseling  
Developmental Screening  
Comprehensive Substance Abuse  
Treatment/Counseling Services  
Hearing Screening

Nutrition Services Other Than WIC  
Pharmacy - Licensed Pharmacy  
Staffed by Registered Pharmacist  
Pharmacy - Provider Dispensing  
Vision Screening  
Optometry



## HOW DO FRESNO COUNTY'S FQHCs SERVE THE COUNTY HEALTH SYSTEM?

*Fresno County is fortunate to have three FQHCs.*

Together they staff 22 clinic sites throughout the county, from Kerman to Orange Cove, with seven of those clinics located within the City of Fresno. Together these clinics provide an array of 29 services ranging from primary and prenatal care to laboratory, pharmacy, vision, and dental services. In 2006, there were over 313,000 medical and dental visits to Fresno County's FQHCs.

Provider shortages and inability to recruit medical and dental providers have plagued the San Joaquin Valley. Through their national and state networks and recruiting strategies, FQHCs have been able to put a dent in the problem, attracting additional primary care physicians and dentists to serve low income persons. In 2006, Fresno County's FQHCs had 42 full-time equivalent (FTE)

primary care physicians on their staffs, eight FTE dentists, one optometrist, and 17 FTE nurse practitioners and physician assistants. Combined, the FQHCs had 605 FTE staff members.

With their emphasis on preventive and primary care, the FQHCs provide early interventions at a point when treatment is more effective and less expensive. By providing access to medical care to low income persons and the uninsured throughout the county, the FQHCs reduce the burden on the county's emergency rooms for routine care. By effectively managing chronic diseases such as asthma, diabetes, and cardiovascular diseases in an outpatient setting, the FQHCs reduce the number of unnecessary hospitalizations. These interventions not only lower the cost of care, but they also improve health outcomes.



**MAKING A DIFFERENCE**  
THE FEDERALLY QUALIFIED  
HEALTH CENTERS IN FRESNO COUNTY



## WHERE DO LOWER INCOME FRESNO COUNTY RESIDENTS GET CARE?

*In 2006, Fresno County's FQHCs provided 313,543 visits to more than 90,000 residents*, nearly 10% of the county population. In contrast, Community Medical Centers (CMC), the other major community care resource for low-income persons in Fresno County, provided 102,278 visits for 34,786 non-surgical patients in their outpatient clinics in the fiscal year ending August 2007. CMC visits represent approximately one-third the number of visits annually provided countywide by the FQHCs.

Because of their extensive network in the county's rural and poor areas and their acceptance of all patients, the FQHCs are widely used by lower income patients. Eighty percent of FQHC patients had incomes below the federal poverty level (\$20,000 annual income for a family of four in 2006). In fact, nearly half (44%) of all poor persons in the county who had a medical visit in the past year went to an FQHC.

FQHCs also have bilingual and bicultural staff that are culturally and linguistically competent. Nearly all patients (92%) using Fresno County's FQHCs were "non-white,"

primarily Latino. Over one in five (22%) non-white Fresno County residents who had a doctor visit in the past year went to an FQHC.

Nearly seven of ten (68%) patients were best served in a language other than English. Of persons in non-English speaking households who had a doctor visit in the past year, 18% went to an FQHC.

Over one-third of FQHC patients had no health insurance and were "self-pay" patients. A large portion of uninsured Fresno County residents rely on FQHCs for health care. Forty percent of Fresno County's uninsured population with a medical visit in the past year went to an FQHC.

While many private providers shun Medi-Cal - the federal/state health program for eligible low income residents - the FQHCs welcome these patients. Nearly half of FQHC patients were on Medi-Cal. These patients represent 25% of Fresno County Medi-Cal recipients with a medical visit in the past year.

*"FQHCs are widely used by lower income patients. ... nearly half (44%) of all poor persons in the county who had a medical visit in the past year went to an FQHC."*



## FARMWORKERS AND PRENATAL CARE

### FARMWORKERS

*Fresno County is the most productive agricultural county in the United States*, generating over \$4 billion in agricultural production. Agriculture employs more than 60,000 persons according to the California Employment Development Department.

*“The lack of health coverage has been a major barrier to care...”*

Nearly 70% of farmworkers lack any form of health insurance; only 11% receive employer based health insurance and 7% receive government supplied health coverage, according to the California Agricultural Workers Health Survey (CAWHS). The lack of health coverage has been a major barrier to care, with just under half (48.4%) of the male subjects in the CAWHS study reporting a doctor or clinic visit in the prior two years. One outcome from lack of care is poor farmworker health status including elevated blood pressure, high serum cholesterol, and paradoxically, obesity.

In 2006, Fresno County’s FQHCs provided services to over 50,000 migrant and seasonal farmworkers and their families. This means that nearly half (44%) of the estimated 114,000 persons in farmworker families in Fresno County received services at a local FQHC.

### PRENATAL CARE

As noted above, Fresno County faces severe challenges in birth outcomes - low birthweight and infant mortality. Early access to prenatal care is one of the most effective ways to ensure healthy births. FQHCs in Fresno County provided prenatal care to 2,989 women in 2006, nearly one in five mothers giving birth in Fresno County. Eighty percent of these women received prenatal care beginning in the first trimester of pregnancy.

*“In 2006,...FQHCs in Fresno County provided prenatal care to...nearly one in five mothers giving birth”*



**MAKING A DIFFERENCE**  
THE FEDERALLY QUALIFIED  
HEALTH CENTERS IN FRESNO COUNTY



## ECONOMIC IMPACT OF FRESNO COUNTY'S FQHCs ON THE COUNTY'S ECONOMY

In addition to providing necessary care to patients, *federally qualified health centers are economic drivers in their communities*. They bring in federal and state grants that otherwise would not be available locally, receive higher Medi-Cal reimbursements from the federal government than non-FQHC providers, and they contribute greatly to the local economy and employment.

### FEDERAL AND STATE GRANTS

As FQHCs the clinics receive special grants from the federal and state governments to care for the medically underserved. In 2006 these grants exceeded \$9 million in funds that would not have come into the county in the absence of FQHCs. These grants assist in offsetting some, but not all, of the costs of serving the uninsured and low income populations. Every year the FQHCs spend much more on uncompensated care than they receive in federal grant funding. According to federal reports, the Fresno County FQHCs spent \$174 on uncompensated care for every \$100 they received in federal grant funds in 2006. Statewide, FQHCs spent \$140 for every \$100 in federal grant revenue.

### ENHANCED MEDI-CAL REIMBURSEMENTS FROM STATE AND FEDERAL SOURCES

The FQHCs generated \$22,422,896 in revenue from Medi-Cal in 2006. Due to their FQHC status, the clinics are reimbursed for Medi-Cal services under a special methodology. Rather than being subject to the limited reimbursements provided to other Medi-Cal providers, FQHCs receive a predetermined fixed rate using the formulas prescribed by the federal prospective payment system (PPS). These rates are adjusted annually based upon the Medicare Economic Index (MEI). FQHC reimbursements compare very favorably to the average Medi-Cal fee-for-service reimbursement of \$33.97 for a physician outpatient visit.

The difference between the usual Medi-Cal reimbursements (either managed care or fee-for-service) and the PPS rate is

reimbursed by the federal and state governments, and paid only to FQHCs and rural health clinics<sup>2</sup>.

*In 2006, these additional reimbursements for Fresno County's FQHC's reached nearly \$7 million.*

### ECONOMIC AND EMPLOYMENT ENGINES

Not only do the health centers have a direct impact on the local economy through their budgets (mostly from sources outside the local economy), but they have indirect effects on the economy through their purchases of goods and services from other local businesses. Furthermore, health centers (like all businesses) have induced economic effects which represent the response by all local industries caused by the expenditure of new household income generated by the direct and indirect effects. For example, FQHCs have a large payroll, pay rent, contract for services, and purchase supplies. Each one of the recipients of those funds spends those funds on additional business expenses such as payroll, or personal expenses such as consumer goods and services.

Economic modeling has developed "multipliers" by which the indirect, induced, and "value-added" effects of economic spending can be measured. Special analyses prepared for Fresno County's FQHCs by Capital Link, Inc estimated that **the combined \$47.9 million budgets of Fresno County's FQHCs had a total estimated impact of \$147 million on the local economy.**<sup>3</sup> Similarly the impact on employment was the generation of approximately 847.5 full-time equivalent jobs (481.7 full-time equivalents employed directly by the health centers, and 365.8 additional jobs generated in the local economy).

<sup>2</sup> Prepared by Capital Link, Inc with MIG, Inc. IMPLAN Software Pro version 2.0.1025 and 2006 structural matrices with the 2006 Fresno County, California multiplier(s) and FY06 financial information provided by the FQHC's. For more information on the methodology, see National Association of Community Health Centers, Access Granted: The Primary Care Payoff, August 2007, [www.nachc.com](http://www.nachc.com) <<http://www.nachc.com>>.





## CONCLUSION

Fresno County's federally qualified health centers continue to serve to tether the county's health delivery system safety net, providing services to those that cannot access care in the mainstream medical system. The history of the FQHCs as efficient, "open door" providers of primary and preventive care makes them the provider of choice for one in ten county residents. The FQHCs bring in millions of additional state and federal dollars that would otherwise not be available to the local economy. These funds are then multiplied as they are spent in Fresno County for salaries, local services, and consumer goods.

Although there is federal and state support for the FQHCs, the demand for health care by Fresno County's residents continues to outstrip the available resources to provide care. The viability of the safety net and the FQHCs will require expanded support not only from traditional sources of funding, but additional funding streams to sustain them.

*"FQHCs (are)... the provider of choice  
for one in ten county residents."*

## METHODOLOGY

The data used in this report are primarily derived from the federal Bureau of Primary Health Care's Uniform Data System (UDS) reports from 2006, the Office of Statewide Health Planning and Development (OSHPD), the 2005 California Health Interview Survey, and the U.S. Census Bureau. Additional data were obtained from the National Association of Community Health Centers, CSU Fresno's "Health in the Heartland: The Crisis Continues" (2004), and the California Agricultural Workers Health Survey. The economic impact analyses were performed by Capital Link, Inc. with MIG, Inc. IMPLAN Software Pro version 2.0.1025 and 2006 structural matrices with the 2006 Fresno County, California multiplier(s).

Diringer & Associates is a Central California-based health policy research and consulting firm established in 2001. Joel Diringer, JD, MPH is the author of a number of reports on access to care and the safety net including Health in the Heartland: The Crisis Continues -- A report on Health Status and Access to Care in the San Joaquin Valley (2004), Paradox in Paradise: Hidden Health Inequities on California's Central Coast (2006) and Putting Teeth in Health Care Reform (2007).



**MAKING A DIFFERENCE**  
THE FEDERALLY QUALIFIED  
HEALTH CENTERS IN FRESNO COUNTY



## QUICK FACTS

### *In 2007, Fresno County's FQHCs:*

- Provided health care services to 92,278 persons, nearly 10% of Fresno County's population
  - 79% of FQHC patients were at or below the federal poverty level (FPL: \$20,650 annual income for a family of four)
- 45% of all poor Fresno County residents who had a medical visit went to an FQHC
  - 92% of patients were under 200% of the federal poverty level
- 27% of all Fresno County lower income persons (under 200% FPL) with a medical visit went to an FQHC
  - 93% of FQHC patients were "non-white"
  - 70% were best served in a language other than English
  - Over one-third of FQHC patients were uninsured
- 38% of Fresno County's uninsured population with a medical visit went to an FQHC
  - One-half of FQHC patients were on Medi-Cal
- 26% of Fresno County Medi-Cal recipients with a medical visit went to an FQHC
- Provided services to over 50,000 migrant and seasonal farmworkers
  - 46% of the estimated 114,000 farmworkers in Fresno County used an FQHC
- Provided services to 3,889 prenatal patients
  - Nearly one in four mothers giving birth in Fresno County received prenatal services at an FQHC
- Provided 331,871 medical, dental, and optometric visits to patients
- Employed 42 full time equivalent physicians, 19 nurse practitioners and physician assistants, ten dentists, and one optometrist
- Employed a total of 669 full-time equivalent employees
- Provided medical and dental services from 23 locations throughout the county with nearly 30 different services
- Had total incomes of \$50.4 million
  - Received nearly \$26 million in federal and state Medi-Cal payments
  - Received \$7 million in additional Medi-Cal payments from federal government
  - Received an additional \$11.8 million in federal and state grants to provide patient care
  - Received \$3.6 million from self-pay patients

*"One of the major success stories in easing some of the health care crisis has been the county's Federally Qualified Health Centers..."*



## SERVICES PROVIDED BY FRESNO COUNTY'S FEDERALLY QUALIFIED HEALTH CENTERS

*General Primary Medical Care*

*Ultrasound*

*Laboratory*

*Labor and Delivery Professional Care*

*X-Ray Procedures*

*Postpartum Care*

*Diagnostic Tests/Screenings*

*Dental Care*

*Emergency Medical Services*

*Comprehensive Mental Health Treatment/Counseling*

*Urgent Medical Care*

*Developmental Screening*

*24-Hour Coverage*

*Comprehensive Substance Abuse Treatment/Counseling Services*

*Family Planning*

*Hearing Screening*

*HIV Testing and Counseling*

*Nutrition Services Other Than WIC*

*Immunizations*

*Pharmacy - Licensed Pharmacy Staffed by Registered Pharmacist*

*Following Hospitalized Patients*

*Pharmacy - Provider Dispensing*

*Gynecological Care*

*Vision Screening*

*Prenatal Care*

*Optometry*

*Antepartum Fetal Assessment*



(Administrative Office)  
1945 N. Fine Avenue, Suite 116  
Fresno, CA 93727-1528  
(559) 457-5800  
[www.sequoiacommunity.org](http://www.sequoiacommunity.org)



(Administrative Office)  
650 Zediker Avenue  
Parlier, CA 93648  
(559) 646-6618  
[www.unitedhealthcenters.org](http://www.unitedhealthcenters.org)

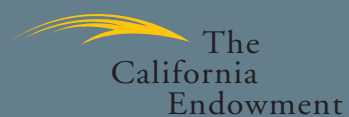


**VALLEY HEALTH TEAM, INC.**  
*Serving the San Joaquin Valley Since 1973*

(Administrative Office)  
21890 Colorado  
P.O. Box 737  
San Joaquin, CA 93660  
(559) 693-2462  
(website under development)



This report was funded in part by grants from:



Prepared with the assistance of:

