What Makes a Community Health Center Unique?

Quality Care. For Your Family. In Your Community.

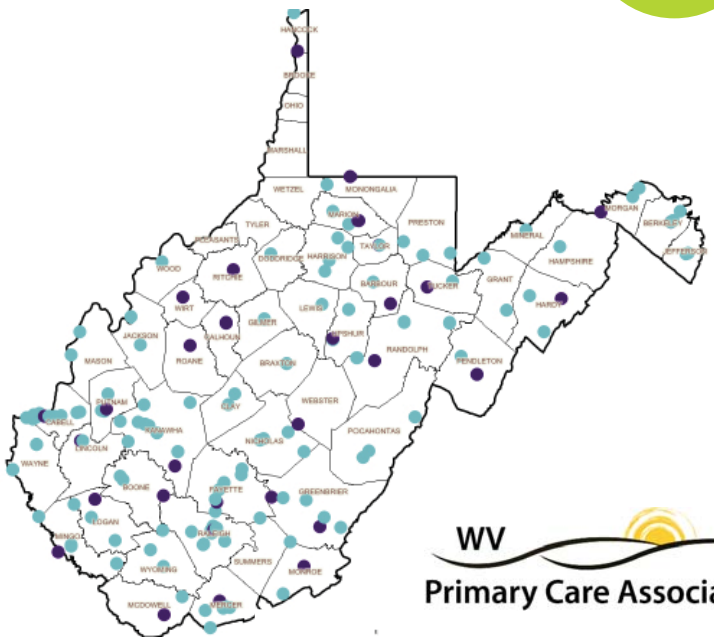
Community Health Centers (aka federally qualified health centers/FQHCs) are community-based and patient-directed organizations that provide access to comprehensive, integrated primary care to everyone – adults, children, homeless, uninsured, Medicaid, Medicare or private insurance. Community Health Centers receive a bundled payment from Medicare and Medicaid to assure that the services identified below are provided to their patients.

To qualify for the federal designation as a Community Health Center (CHC), the organization must meet the following standards:

- Deliver high quality, culturally competent, comprehensive primary care (either on site or through arrangement) including preventive health services, dental, mental health and substance abuse, and pharmacy
- Provide supportive services including health education, translation, transportation, social support services
- Operate under the direction of a patient-majority non-profit governing board
- Provide services regardless of ability to pay and charge for services on a sliding fee scale
- Maintain an ongoing quality improvement program and report clinical and financial data to HRSA
- Participate in a rigorous federal on site review to ensure the maintenance of 21 core program requirements for finance, management, governance and clinical quality

West Virginia's 31 Community Health Center organizations serve nearly 1 in 4 of the state's citizens, in more than 300 locations across the state.

86% of CHC patients are under 200% poverty



WV Primary Care Association

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