

# Bi-State Primary Care Association



# 2024

## New Hampshire Primary Care Sourcebook

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## What is a Primary Care Association?

Each of the 50 states (or in Bi-State's case, a pair of states) has one nonprofit primary care association (PCA) to serve as the voice for community health centers.

## Who We Are

Bi-State Primary Care Association was established in 1986 to serve VT and NH. Bi-State is a nonprofit, 501(c)(3) charitable organization. Today, Bi-State represents 26 member organizations across both states that provide comprehensive primary care services to over 314,000 patients at 169 locations. Bi-State members include federally qualified health centers (FQHCs), community health centers (CHCs), area health education centers (AHECs), clinics for the uninsured, and Planned Parenthood.

## What We Do

Bi-State works with federal, state, and regional health policy organizations, foundations, and payers to develop strategies, policies, and programs that provide and support community-based primary health care services in medically underserved areas. Bi-State's nonprofit Recruitment Center provides workforce assistance and candidate referrals to FQHCs, RHCs, and private and hospital-sponsored physician practices throughout VT and NH. The Recruitment Center focuses on recruiting and retaining primary care providers including physicians, dentists, nurse practitioners, and physician assistants.

### Bi-State's Mission

Advance access to comprehensive primary care services for all, with special emphasis on those most in need in Vermont and New Hampshire.

### Bi-State's Vision

Healthy individuals, families, and communities with equitable and quality health care for all.

## Community health centers ensure everyone has access to primary health care

CHCs provide comprehensive primary care to everyone, regardless of ability to pay. Nationally, CHCs serve 1 in 3 people living in poverty, 1 in 5 uninsured persons, and 1 in 5 rural residents. They provide affordable care. The community health system saves, on average, 24% per Medicaid patient. The National Association of Community Health Centers finds that, overall, CHCs save the health care system \$24 billion annually by increasing access to comprehensive, high-quality, preventive and primary care. In response to COVID-19, our health centers provided vaccinations, testing services, and telehealth services to keep everyone safe, while also retaining in-person access where needed, including for dental emergencies, throughout the public health emergency.

## Workforce & Recruitment

Bi-State's Recruitment Center has sourced 497 candidates interested in practicing in VT and NH over the last year. We helped recruit 30 providers to NH and VT between July 2022 – June 2023 (FY23).



# Bi-State Primary Care Association's New Hampshire Members

## **Ammonoosuc Community Health Services, Inc. (FQHC)**

Edward D. Shanshala II, CEO  
(603) 444-8223 • [ed.shanshala@achs-inc.org](mailto:ed.shanshala@achs-inc.org)  
25 Mt. Eustis Road Littleton, NH 03561  
[www.ammonoosuc.org](http://www.ammonoosuc.org)

## **Amoskeag Health (FQHC)**

Kris McCracken, President/CEO  
(603) 935-5210; (603) 935-5229  
[kmccracken@amoskeaghealth.org](mailto:kmccracken@amoskeaghealth.org)  
145 Hollis Street Manchester, NH 03101  
[www.amoskeaghealth.org](http://www.amoskeaghealth.org)

## **Community Health Access Network**

Gary Noseworthy, Executive Director  
(603) 292-7721; (603) 691-5901  
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14 Manchester Square, Suite 235 Portsmouth, NH 03801  
[www.chan-nh.org](http://www.chan-nh.org)

## **Coos County Family Health Services (FQHC)**

Ken Gordon, CEO  
(603) 752-3669 Ext. 4018 • [kgordon@ccfhs.org](mailto:kgordon@ccfhs.org)  
54 Willow Street Berlin, NH 03570  
[www.coosfamilyhealth.org](http://www.coosfamilyhealth.org)

## **Greater Seacoast Community Health (FQHC)**

Jim Avrett, CEO  
(603) 516-2550 • [javrett@goodwinch.org](mailto:javrett@goodwinch.org)  
[www.GetCommunityHealth.org](http://www.GetCommunityHealth.org)

- **Families First Health and Support Center (FQHC)**  
8 Greenleaf Woods Drive Portsmouth, NH 03801
- **Goodwin Community Health (FQHC)**  
311 Route 108 Somersworth, NH 03878
- **Lilac City Pediatrics**  
80 Farmington Road Rochester, NH 03867

## **Harbor Care (FQHC)**

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[www.harborcarenh.org](http://www.harborcarenh.org)

## **Health Care for the Homeless Program (FQHC)**

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199 Manchester Street Manchester, NH 03103  
[www.catholicmedicalcenter.org/Community-Health](http://www.catholicmedicalcenter.org/Community-Health)

## **HealthFirst Family Care Center (FQHC)**

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841 Central St., Ste 101 Franklin, NH 03235  
[www.healthfirstfamily.org](http://www.healthfirstfamily.org)

## **Lamprey Health Care (FQHC)**

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[www.lampreyhealth.org](http://www.lampreyhealth.org)

## **Mid-State Health Center (FQHC)**

Robert MacLeod, CEO  
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101 Boulder Point Drive Plymouth, NH 03264  
[www.midstatehealth.org](http://www.midstatehealth.org)

## **NH Area Health Education Center**

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Geisel School of Medicine at Dartmouth  
Remsen Building, Room 323 Hanover, NH 03755  
[The New Hampshire Area Health Education Center \(AHEC\) :: The Dartmouth Institute](http://TheNewHampshireAreaHealthEducationCenter(AHEC)::TheDartmouthInstitute)

## **North Country Health Consortium**

Lauren Pearson, Executive Director  
(603) 259-4785 • [lpearson@nchcnh.org](mailto:lpearson@nchcnh.org)  
262 Cottage St., Suite 230 Littleton, NH 03561  
[www.nchcnh.org](http://www.nchcnh.org)

## **North Star Health (FQHC)**

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250 CEDA Road Charlestown, NH 03603  
[www.northstarfghc.org/charlestown-health-center/](http://www.northstarfghc.org/charlestown-health-center/)

## **Planned Parenthood of Northern New England (Health Center)**

Nicole Clegg, Acting CEO • [nicole.clegg@ppnne.org](mailto:nicole.clegg@ppnne.org)  
NH Grassroots & Public Affairs: (603) 225-2925  
18 Low Avenue Concord, NH 03301  
[www.plannedparenthood.org/planned-parenthood-northern-new-england](http://www.plannedparenthood.org/planned-parenthood-northern-new-england)

## **White Mountain Community Health Center (FQHC LOOK-ALIKE)**

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298 White Mountain Highway Conway, NH 03818  
[www.whitemountainhealth.org](http://www.whitemountainhealth.org)

# Community-Based Primary Care

**Comprehensive Services:** Primary and preventive medical, dental, oral health, reproductive health, behavioral health, substance use disorder treatment, and enabling services.

**Enabling services:** Non-clinical services designed to increase access to health care and improve health outcomes. Examples include translation and interpretation, help accessing transportation, and assistance navigating financial issues.

## Community health centers

Community health centers provide comprehensive and enabling services in medically underserved regions. CHCs offer services to all residents in their service areas, determining charges based upon the resident's ability to pay. Every CHC is unique, tailoring programs and services to the needs of their communities. Collaborations with community partners allow CHCs to go above and beyond in delivering high quality of primary care. In many communities, CHCs are the *only* comprehensive, patient-centered medical home open to all patients without restrictions, especially underinsured and Medicaid patients. Bi-State's CHC members in NH comprise 10 FQHCs and Planned Parenthood of Northern New England. **About 1 in 5 uninsured Granite Staters and 1 in 5 Granite Staters enrolled in Medicaid receives care at a NH CHC.**

## Federally qualified health centers

Federally qualified health centers are non-profit, community-based health care organizations that provide comprehensive and enabling services in medically underserved areas throughout the country. FQHCs are supported by the federal government through a competitive grant process to provide health care services to the un- and underinsured in rural and urban areas. FQHCs are governed by a board of directors, of whom a majority of the members receive care at the FQHCs. FQHCs accept patients regardless of ability to pay, offer a sliding fee scale to persons with incomes below 200% of the federal poverty level, and they work with their communities to address a range of barriers to health.

Federally qualified health center look-alikes (FQHC LALs) are community health centers that meet the requirements to be FQHCs (including having a patient-majority board), but do not receive grant funding from HRSA. They provide services in medically underserved areas, provide care on a sliding fee scale, and operate under a governing board that includes patients.

### In 2022, 11 CHCs:

- Served 100,351 patients in NH.
- Conducted 408,347 patient visits.
- Offered services in every NH county, across 87 sites.

### In 2022, 10 FQHCs

- Served 91,367 patients in NH.
- Conducted 397,004 patient visits.
- Offered services in 9 counties, across 82 sites.

# Snapshot of Bi-State's NH Members

## NH community health centers include:

- **Federally qualified health centers**
  - NH's 10 FQHCs encompass 82 sites in 9 counties.
  - These FQHCs include White Mountain Community Health Center, which is an FQHC look-alike.
  - FQHC sites include health center operations at dental clinics, pediatric centers, schools, recovery community organizations, community mental health centers, childcare centers, soup kitchens, churches, mobile unit sites, and more.
- **Planned Parenthood of Northern New England: 4 locations**



## NH programs & services include:

- Community Health Access Network (CHAN)
- NH Area Health Education Center Program (NH AHEC)
- North Country Health Consortium (NCHC)

Numbers reflect [2022 NH UDS data](#), 2023 self-reported data in BSPCA member surveys, and [NH statewide data](#) from Kaiser Family Foundation.  
Photo credits: Greater Seacoast Community Health (top), White Mountain Community Health Center.

## Community health centers are economic engines within their communities



An October 2022 analysis of 2021 data shows that NH's CHCs are directly responsible for 1,072 jobs, indirectly responsible for an additional 380 jobs (e.g., jobs of suppliers, contractors, etc.), and support another 420 jobs in the region (i.e., these jobs are induced when employees spend wages on goods and services) ...*for a total of 1,872 NH jobs!*

Economic impact was measured using 2021 IMPLAN Online from IMPLAN Group LLC, IMPLAN System (data and software), [www.IMPLAN.com](http://www.IMPLAN.com).<sup>6</sup>  
Learn more at [www.caplink.org/how-economicimpact-is-measured](http://www.caplink.org/how-economicimpact-is-measured)

## Our members serve Granite Staters in every corner of the state.

Our goal is for geography to never be a barrier to accessing comprehensive, quality services in New Hampshire. Our members operate in 93 sites across the state, in every county. Our members also look for creative ways to extend their coverage, such as mobile clinics, school visits, and expanding use of telehealth connections. **Our members had more than 408,000 visits in 2022.**

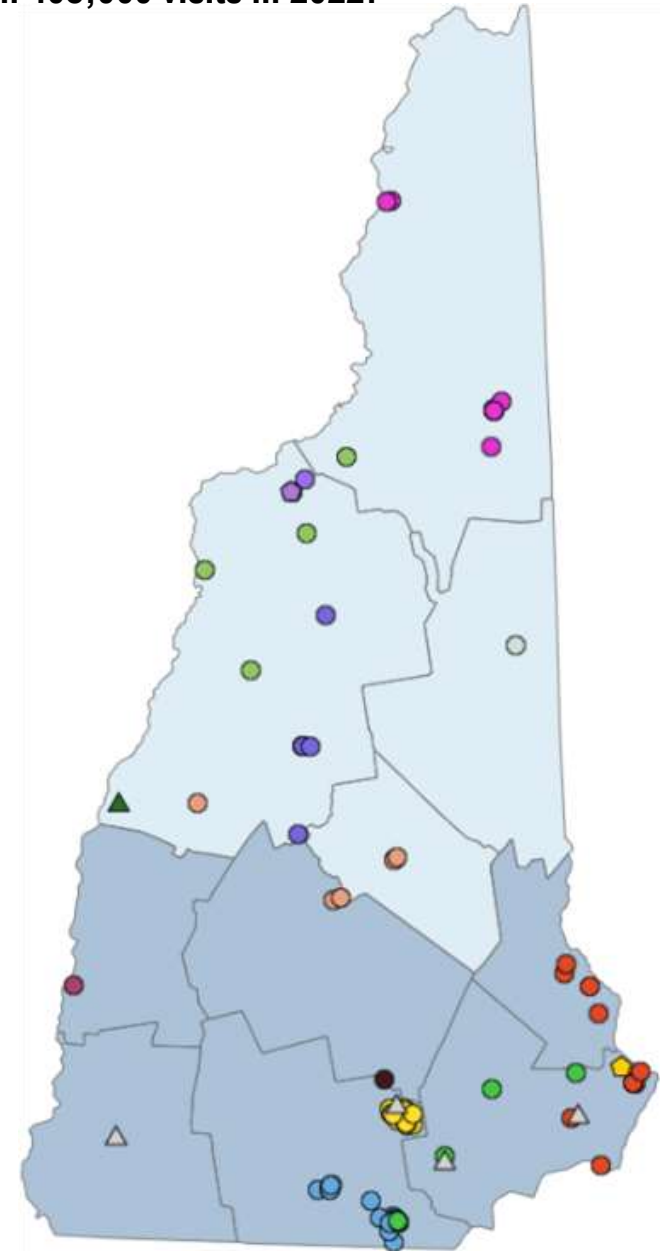
- Ammonoosuc Community Health Services, Inc. (FQHC)
  - Amoskeag Health (FQHC)
  - Coos County Family Health Services (FQHC)
  - Greater Seacoast Community Health (FQHC)
  - Harbor Care (FQHC)
  - Health Care for the Homeless Program of Manchester (FQHC)
  - HealthFirst Family Care Center (FQHC)
  - Lamprey Health Care (FQHC)
  - Mid-State Health Center (FQHC)
  - North Star Health (FQHC)\*
  - White Mountain Community Health Center (FQHC LAL)
- 
- ▲ Planned Parenthood of Northern New England (CHC)
  - ▲ Vermont Free and Referral Clinics\*
- 
- ◆ Community Health Access Network
  - ◆ North Country Health Consortium

Area Health Education Center (AHEC) Regions Shaded by County

- Northern New Hampshire
- Southern New Hampshire

\* North Star Health is headquartered in Springfield, VT with a location in Charlestown, NH

\* A VFRC member, Good Neighbor Health Clinic, is headquartered in White River Junction, VT with a location in Lebanon, NH

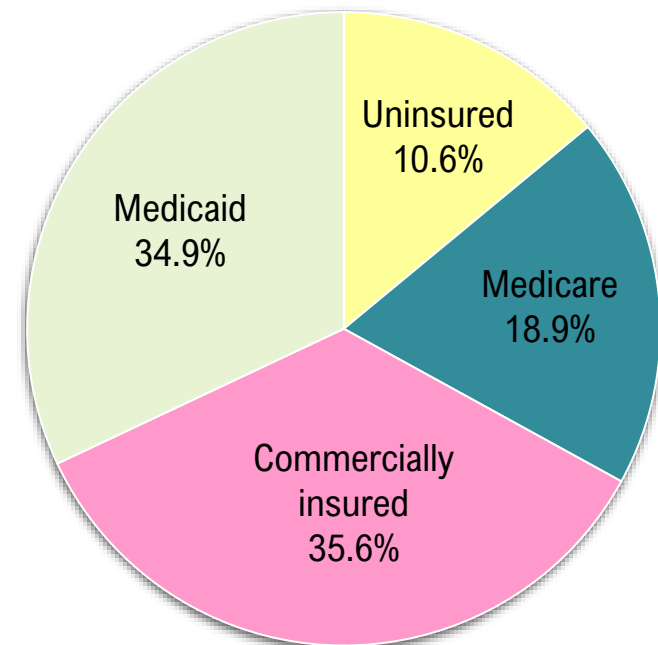


# NH's FQHCs serve 91,367 Granite Staters.

## FQHCs are a subset of community health centers

- Ten NH FQHCs, including an FQHC Look-Alike, serve as the medical home for over 91,000 Granite Staters who made approximately 397,000 visits in 2022, **including over 56,000 telehealth visits and 77,000 mental health and substance use disorder visits.**
- Three FQHCs in NH are designated as Health Care for the Homeless Health Centers:
  - Families First Health and Support Center
  - Harbor Care
  - Health Care for the Homeless Program of Manchester
- Federal law established the array of services FQHCs must provide, including basic primary care services, voluntary family planning services, immunizations against vaccine-preventable diseases, appropriate cancer screenings, pharmaceutical services, mental health services, substance use disorder treatment, translation services, and transportation services.

FQHC Payer Mix



Numbers reflect [2022 NH UDS data](#) and 2023 self-reported data in BSPCA member surveys.

Data for North Star Health's NH FQHC site (Charlestown Health Center) is attributed to Bi-State's VT membership and is not included in our NH reporting.



# FQHCs improve access to integrated primary care services



Over 91,000 Granite Staters rely upon NH's FQHCs for their primary care, oral health care, mental health services, pharmacy services, optometry, substance use disorder treatment, medication assisted treatment, reproductive health care services, pediatric care, and much more. **FQHCs are often the only primary care provider in their area**, filling a void for primary care across every county in the Granite State.

FQHCs are committed to improving patient experience and health outcomes. *Data from 2022 shows that **NH's FQHCs surpassed the national FQHC averages in quality patient outcomes*** including: high blood pressure and diabetes control, body mass index (BMI) screening, kids' immunizations, tobacco use cessation, depression screenings, and lifesaving screenings for breast, cervical, and colorectal cancers. (See page 12).

## NH's FQHCs Serve:



~20,000 children

~

~22% of patients are children



2,562 veterans



19% of patients are older adults



FQHCs serve 17% of all NH Medicaid enrollees.

~

35% of an FQHC's payer mix is Medicaid.



Patients experiencing homelessness: 4,996



9,668 uninsured patients

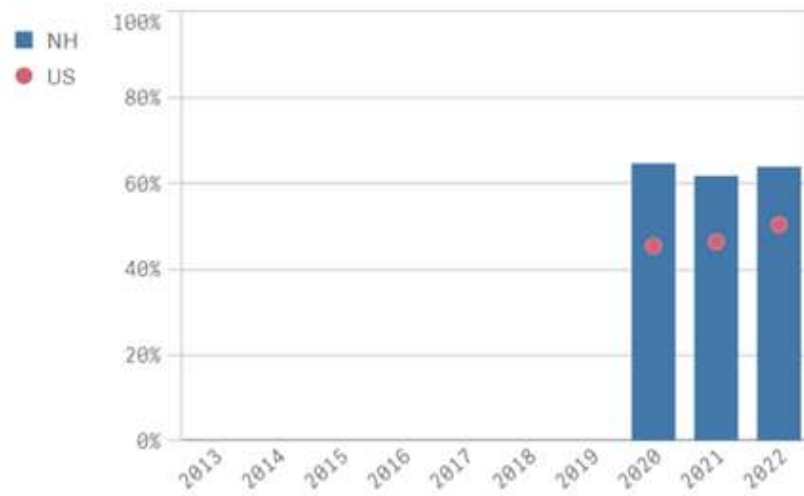
~

594 migrant/seasonal agricultural workers and dependents

# NH's FQHCs exceeded national FQHC averages for many clinical quality measures in 2022.

## Breast Cancer Screening

IN 2022: **US: 50%**; **NH: 64%**



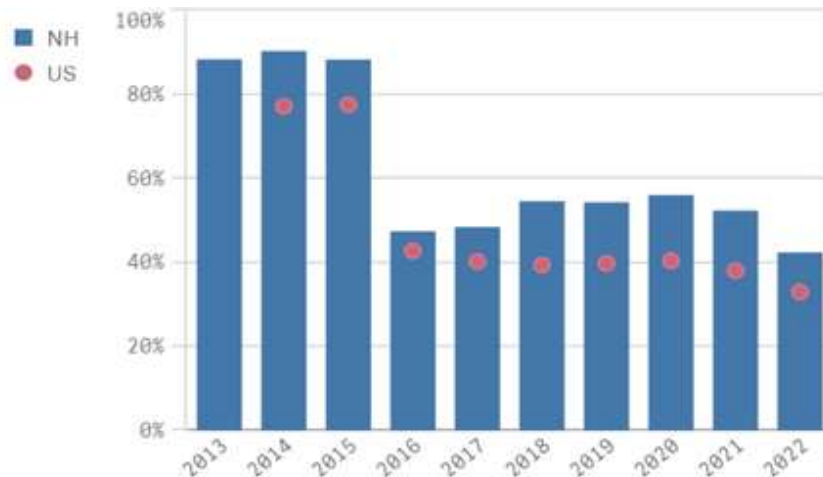
## Cervical Cancer Screening Rate

IN 2022: **US: 54%**; **NH: 65%**



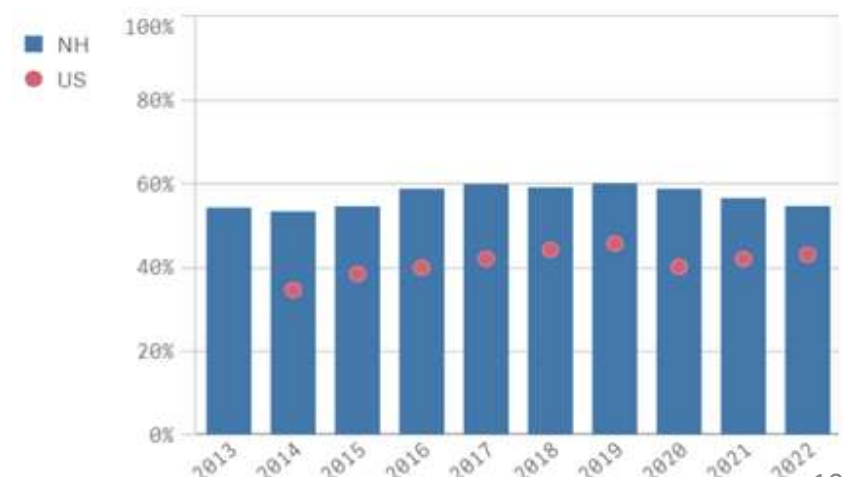
## Children's Immunization Rate

IN 2022: **US: 33%**; **NH: 42%**



## Colorectal Cancer Screening Rate

IN 2022: **US: 43%**; **NH: 55%**



# FQHCs are public health leaders in their communities.

## COVID-19 Response/Public Health Role

NH FQHCs played a crucial role in our state's COVID-19 response. Leveraging federal resources, NH FQHCs ran testing sites and supplied 14,785 at-home test kits to patients, staff and community members. They were also community leaders in COVID-19 vaccination – vaccinating 5,872 Granite Staters, hosting clinics, providing outreach at schools and in the community, and answering patient questions.



## NH FQHCs address a growing demand for integrated care, including mental health and SUD treatment.



NH FQHCs meet the growing demand for delivering crucial preventive and primary care health services to hard-to-reach communities. Utilization of certain preventive services by health center patients has increased (2019-2021):

- Mental health visits rose by 10%.
- Substance use disorder treatment visits rose by 11%, and the number of patients accessing substance use disorder treatment at our health centers rose by 82%.
- The number of patients accessing enabling services (i.e., translation, transportation, and enrollment assistance) rose by 22%.

# FQHCs strive to improve diabetes control

FQHCs in New Hampshire and Vermont have exceeded national FQHC averages regarding diabetes control and obtaining timely A1C reading targets through a variety of techniques to help their patients manage their diabetes. *(Note: For this measure, a lower rate is better.)*

## Development of protocols to identify diabetes before it starts

Several FQHCs created protocols to identify, document, and treat patients whose blood sugar levels indicated they may have pre-diabetes. With proper identification and treatment of pre-diabetes, patients have a better chance of avoiding a full-blown diagnosis of diabetes, which can be more difficult to manage.

## Development of protocols to manage diabetes

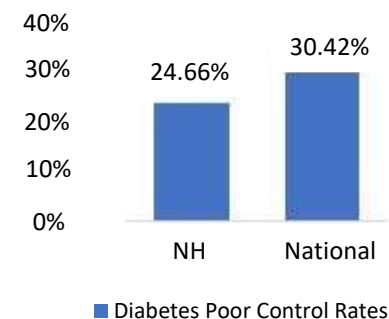
Recommendations, medications, and technology for the treatment and management of diabetes often changes and evolves. Several FQHCs created protocols based on current evidence regarding the treatment and management of diabetes, ensuring their practices and providers had a clear, evidence-based workflow to follow.

## Expanding the use of Continuous Glucose Monitors (CGMs)

Our health centers are exploring and implementing expanded use of CGMs, which can significantly help patients manage their diabetes and reduce their blood sugar levels, leading to better health outcomes.



Diabetes Poor Control  
(lower rates are better)





# FQHCs improve access to oral health in rural and underserved areas.



All NH FQHCs offer dental access; 5 NH FQHCs deliver dental care onsite.

Many FQHCs are the only providers in their geographic areas that deliver much-needed primary and oral health care. In 2022, NH FQHCs treated ~8,500 Granite Staters on-site, through school-based programs and at mobile clinics; those patients accessed ~17,000 oral health visits.

FQHCs deliver integrated comprehensive care inclusive of a wide range of dental services: emergency services, oral cancer screenings, X-rays, preventive care, sealants, restorative services, endodontics, oral surgery, school-based dental care and education, and more.

NH FQHCs participate in the Medicaid Adult Dental Benefit ([NH Smiles](#)) program.

Four NH FQHCs (Coos County Family Health, Greater Seacoast Community Health, Harbor Care, and Mid-State Health Center) participate in [Harvard School of Dental Medicine's Rural Dental Residency programs](#) to grow NH's oral health workforce and expand dental access in rural and underserved areas.

## NH FQHC Dental Service Locations

### Coos County Family Health Services ([website](#))

- 73 Main Street Berlin, NH 03570
- 141 Corliss Lane Colebrook, NH 03576

### Greater Seacoast Community Health ([website](#))

- 8 Greenleaf Woods Drive Portsmouth, NH 03801
- 311 Route 108, Somersworth, NH 03878

### Harbor Care ([website](#))

- 45 High Street, Nashua, NH 03060

### Mid-State Health Center ([website](#))

- 100 Robie Road Bristol, NH 03222
- 101 Boulder Point Drive Plymouth, NH 03264
- 202 Cottage Street Littleton, NH 03561
- At select schools within the Newfound Area School District

### White Mountain Community Health Center ([website](#))

- 298 White Mountain Highway Conway, NH 03818



# FQHCs improve food access in their communities.

NH has significant numbers of residents living with food insufficiency: 44% of adults and over half of children live in households that reported having insufficient food.\* This is due in part to increased cost of groceries and a rollback of pandemic-era support programs. For example, when the temporary boost to SNAP benefits ended nationwide in March 2023, NH experienced a 10% spike in the number of families reporting they struggle to put food on the table.



NH FQHCs are in a unique position to address food insecurity and other health-related social needs. Our health centers use screening tools to identify community members in need of extra food resources. As part of the whole-person model of delivering care, FQHCs have multidisciplinary teams, which include care coordinators, community health workers, dietitians, diabetes educators, and other staff, who coordinate food assistance and provide health education resources to help patients manage their chronic conditions and lead healthier lives. These services are generally not reimbursed.

## NH FQHC Food Access Highlights:

- Ammonoosuc Community Health Services offers cooking videos and nutritious recipes to help patients manage chronic conditions.
- Amoskeag Health has food pantries at two sites to provide emergency groceries to patients in need.
- Coos County Family Health supports the Women, Infant and Children (WIC) program, provides fresh food from a community garden plot in Colebrook, and participates in efforts to establish a Food Co-Op in the Berlin-Gorham area.
- Greater Seacoast has a WIC department on-site that provides free healthy food and breastfeeding and nutrition information.
- Harbor Care hosts a free Thanksgiving Community Dinner for anyone in need of a hot meal.
- Health Care for the Homeless Program of Manchester assists patients to apply for the SNAP program.
- HealthFirst has an Enabling Services Supervisor and two Community Resource Specialists onsite to assist patients struggling with food insecurity.
- Lamprey Health Care offers care at the Nashua Soup Kitchen & Shelter.
- Mid-State Health Center launched “Feed the Need” to provide community members with a “go bag” of healthy foods, recipes, and nutrition education.
- North Star Health has Registered Dietitians that offer free nutrition counseling and classes.
- White Mountain Community Health Center has a care coordination team that assists patients with obtaining healthy foods and recently added Spanish-speaking staff.

\* [NH Hunger Solutions data dashboards](#) show the level of food insufficiency reported as of September 2023.

# 2024 New Hampshire Public Policy Principles

Bi-State Primary Care Association is committed to the health of individuals, families, and communities with equitable and quality health care for all. We work to advance access to comprehensive primary care services, with a special emphasis on those in need, regardless of insurance status or ability to pay. Comprehensive primary care includes preventive care, behavioral health, substance use disorder treatment, reproductive health care, pharmacy services, and oral health services. Bi-State strives to educate policymakers, non-profit leaders, and the business community on the value CHCs provide to the Granite State. We accomplish our goals by partnering with the State, health care providers, non-profit advocacy organizations, and business leaders.

The ability of our health care system to respond to public health events is dependent on a strong public health foundation, a powerful health care workforce, adequate Medicaid reimbursement rates, a robust safety-net provider system, and Granite Staters working together to protect our friends and neighbors from preventable diseases. Bi-State's 2024 NH Public Policy Principles and Priorities – consistent with the State Health Assessment/State Health Improvement Plan – reflect that stabilizing our public health and safety-net system while increasing access to integrated health care services is critical for a healthy and successful Granite State.

## 2024 New Hampshire Public Policy Priorities

- Support school-based, local, and statewide policies designed to keep Granite Staters free of preventable disease, with a focus on the disproportionate impact to racial and ethnic minority groups and at-risk populations;
- Create a sustainable, statewide reimbursement methodology that truly supports the integration of primary care and behavioral health such that residents can live their best, most healthy lives (see the [joint statement](#) by the New Hampshire Community Behavioral Health Association and Bi-State Primary Care Association);
- Increase investments in health care workforce development and recruitment;
- Support the permanence of the Granite Advantage Health Care Program as a reliable source of health insurance for Granite Staters;
- Support policies that ensure the success of the 340B Drug Pricing Program to help community health centers and other safety-net providers provide more comprehensive services to their patients;
- Promote and support affordable access to the full range of comprehensive reproductive health care, including essential family planning services and abortion care;
- Increase state support for integrated primary and preventive care and reproductive health care services;
- Support access to telehealth and reimbursement parity for services provided via telehealth; and
- Support policy changes that eliminate racial injustice, poverty, and discrimination to ensure inclusiveness, diversity, and health equity for all.

# Medicaid Expansion

## The Coalition

Our state's Medicaid providers have struggled in recent years because reimbursement has not kept pace with the increasing costs of providing care, exacerbated by the COVID-19 pandemic. To address these systemic challenges, Bi-State and NH CHCs participated in a coalition of 80+ health care providers, non-profit organizations, and business leaders that successfully advocated for historic investments in NH's Medicaid Program. Our health centers serve as the medical home for 33,741, or about 1 in 5, NH Medicaid enrollees.



On June 20, 2023, Governor Sununu signed the state budget into law, which included long-term reauthorization of Medicaid Expansion.

## The Legislation

In June 2023, the legislature passed a historic two-year state budget that contained \$134 million in system-wide Medicaid rate increases (excluding the federal match) for Medicaid providers, including community health centers.

The MedEx Coalition's efforts also resulted in the 7-year extension of the Granite Advantage Health Care, which was set to expire in December 2023. Since its inception in 2014, the program has helped nearly 220,000 Granite Staters access life-saving health care services. Our coalition will continue to advance legislation to support the permanent reauthorization of Medicaid Expansion.



# Workforce and NH Public Policy



Bi-State works with policymakers, state officials, and partner organizations to develop strategic and effective approaches to supporting the current workforce and strengthening our workforce pipeline. To further this work, Bi-State helped form the NH Health Care Workforce Coalition in 2018 to help Bi-State's members and other health care organizations address the workforce challenges facing the Granite State. Since its inception, the Coalition's policy and legislative proposals have been supported by more than 50 organizations located throughout NH. In addition to numerous policy changes and appropriations in prior sessions, in 2023, our Coalition successfully advocated for a \$134 million investment in NH's Medicaid program, which will help support our health care workforce through higher reimbursement rates.

The pressures from workforce shortages in our health care industry have been growing for years and extend across both clinical and non-clinical positions. Even where health centers can fill vacant positions, they often experience high turnover, which requires extensive time and resources for training and onboarding the new staff, further contributing to burnout for existing staff and putting strain on the practice. This situation is unsustainable and puts the health and lives of Granite Staters at risk. In 2024, we will work to secure funding to grow our own health care workforce through targeted investments in established Granite State programs.

## Bi-State's 2024 Workforce Goals include:

- Investment in the NH AHECs to increase the number of entry-level clinical staff and career ladder trainings
- Expansion of the student loan repayment opportunities to benefit non-clinical staff at eligible health care organizations
- Investment in an existing national marketing campaign to ensure NH's competitiveness in a crowded field
- Support for nursing preceptors to mentor and train new nurses
- Investment in the Family Medicine Residency Program at a Teaching Health Center (Coos County Family Health Services' Teaching Health Center Program)
- Voluntary certification and reimbursement of Community Health Workers

# Bi-State's Recruitment Center

[BiStateRecruitmentCenter.org](https://BiStateRecruitmentCenter.org)

## Recruitment Center Accomplishments

Our recruitment team identifies physicians, APRNs, physician assistants, dentists, and mental health and substance use disorder treatment providers who will thrive in our rural communities.

Between July 1, 2022 and June 30, 2023, the Recruitment Center identified 497 clinicians considering practice in Vermont or New Hampshire within the next two years. We successfully placed 12 primary care physicians, 1 physician specialist, 5 dentists, 6 APRNs, 3 physician assistants, 1 social worker, and 2 mental health counselors.

## Primary Care is Delivered by a Team

Bi-State's Recruitment Center combines local outreach with national strategic marketing campaigns to recruit clinicians in primary care, oral health, mental health, and substance use disorder treatment. We increasingly see practices struggling to maintain and recruit qualified members across the continuum of care, including nurses, medical assistants, and dental assistants. The Recruitment Center supports practices in their efforts to recruit and retain the full primary care team.

**Since its inception in 1994, the Recruitment Center has helped more than 100 employers recruit qualified employees across Vermont and New Hampshire.**

## Strategic Workforce Initiatives

Workforce development and planning for community health centers is more important than ever before to ensure that community needs are met.

Bi-State's Recruitment Center oversees two projects with community health centers:

- Developing comprehensive recruitment and retention plans; and
- Expanding health profession education and training programs within their practices.

## Contact Information

For more information, contact Stephanie Pagliuca, Senior Director of Workforce Development and Recruitment, [spagliuca@bistatepca.org](mailto:spagliuca@bistatepca.org).



# Bi-State's New Hampshire Member Profiles

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## Ammonoosuc Community Health Services, Inc.

Edward D Shanshala II, MSHSA, MEd  
Executive Director/Chief Executive Officer  
603-444-2464 • [www.ammonoosuc.org](http://www.ammonoosuc.org)

## Five locations:

25 Mt. Eustis Rd. Littleton  
333 Route 25, Main St. Warren  
79 Swiftwater Rd. Woodsville  
14 King Square, Whitefield  
1095 Profile Rd, Suite B. Franconia



## ABOUT OUR CLIENTS

**Where They Live:** ACHS patients come from 26 communities in Grafton and Coos Counties, as well as neighboring towns in Vermont - a service area of approximately 33,000. Fifty-four percent of our patients have household incomes at or below 200% of the federal poverty level ([\\$29,160 for a household of one](#)).

## Insurance Status (2022):

4% were uninsured.  
18% were covered by Medicaid.  
36% were covered by Medicare.  
42% were covered by private insurance.

## ADULTS AND CHILDREN SERVED (2022)

Total Patients: 8,490  
Medical Patients: 8,133  
Mental Health Patients: 884  
Patients with Hypertension: 45%  
Patients with Diabetes: 13%  
Total Visits (includes all services): 31,242  
Mental Health Visits: 6,386 (20%)  
SUD visits/year per SUD patient: 3.6  
485 Veterans Served (6%)

## A GROWING DEMAND FOR SERVICES (2019-2022)

21% increase in mental health patients

## HIGHLIGHTS IN ACHS HISTORY

1975: Established to provide family planning, WIC, prenatal, and child health care in northern NH  
1994: Designated as an FQHC  
1996: Implemented an electronic health records system  
1998: Added health center site in Whitefield, NH  
2002: Added health center site in Franconia, NH  
2007: Woodsville Expanded Medical Capacity grant and implementation, added health center site  
2008: Recognized as top 26 of 1,086 FQHC for chronic disease outcomes  
2009: Designated as Patient Centered Medical Home  
2016: In partnership with area optometrists, offers an affordable Vision Program  
2018: Recognized in the top 2 FQHC of 1,400 for colorectal cancer screening  
2021: HRSA grant recipient for COVID19 Vaccine Testing, Treatment and Administration. First FQHC in NH to stand up COVID-19 vaccine clinics for patients and the public. With the Medical Reserve Corp, implemented mobile vaccine clinics  
2022: Joined our fourth CMS Accountable Care Organization; recognized as Healthy People 2030 Champion by HHS; stood up Resilient American Community (RAC) hubs in Whitefield and Warren, in part funded by the CDC, FCC, and HRSA; distributed masks and COVID test kits through local libraries

## ACHS SERVICES

- Integrated Primary Medical Care
- Prenatal Care
- Women's Health: Birth Control, STD Checks, Pap/Pelvic Exams, Long-Term Contraceptives
- Behavioral Health: Counseling, Drug and Alcohol Treatment, Medication-Assisted Treatment for Substance Use
- Dental Assistance Program
- Chronic Disease Management
- Prescription Drug Program
- Cancer Screening
- Patient Navigation
- Vision Services
- Support Programs
- Breast and Cervical Cancer Screenings
- HIV/STD Counseling and Testing





### Kris McCracken, President/CEO

145 Hollis Street, Manchester, NH 03101  
184 Tarrytown Road, Manchester, NH  
1245 Elm Street, Manchester, NH  
88 McGregor Street, Manchester, NH  
ProHealth, 1555 Elm Street, Manchester, NH  
[www.amoskeaghealth.org](http://www.amoskeaghealth.org) • 603-626-9500

### About Our Patients

**Where They Live:** 90% in Manchester and neighboring towns; 10% are from other counties.

**Socioeconomic Status:** Eighty-nine percent of Amoskeag Health patients are known to be at 200% of the Federal poverty level or below (\$29,160 for a household of one).

### Outpatient Insurance Status

6% covered by Medicare; 52% covered by Medicaid, 20% uninsured; and 22% covered by private insurance.

### Languages Spoken

**41% (6,598 patients) do not use English as their primary language.** The predominant non-English languages are Spanish, Nepali, Arabic, Portuguese, French, and Swahili.



### Number of Adult and Children Served in 2022:

Total Patients: 15,944  
Total Visits: 78,378

### Increase in Demand for Services (2019-2022)

9% Increase in Patients Served



### Highlights in Amoskeag Health History:

- 1981:** Dr. Selma Deitch establishes Child Health Services (CHS) for family-oriented primary health care accessible to everyone.
- 1993:** Manchester Community Health Center (MCHC) opens as a joint endeavor of Elliot Hospital and Catholic Medical Center.
- 1999:** CHS achieves Joint Commission on the Accreditation of Healthcare Organizations and Primary Care Effectiveness Review accreditation.
- 2004:** Citizens Bank and WMUR name MCHC the 'Community Champion in Healthcare'
- 2013:** MCHC adds a second location at Tarrytown Rd.
- 2014:** MCHC and CHS combine operations.
- 2015:** MCHC assumes management of the West Side Neighborhood Health Center, created by CMC and Dartmouth Hitchcock in 2008
- 2018:** MCHC opens first FQHC-based Optometry Clinic in NH for eye health and vision services.
- 2019:** MCHC, CHS, West Side Neighborhood Health Center, and Tarrytown are brought together under one name: **Amoskeag Health.**
- 2019:** ProHealth opens as a co-located physical and mental health services center with the Mental Health Center of Greater Manchester.
- 2020:** Amoskeag Health remains open during the COVID-19 pandemic, adjusting locations of care and implementing telehealth technology.
- 2021:** Amoskeag Health administers COVID-19 vaccine to vulnerable and BIPOC communities.
- 2022:** Amoskeag Health opens the state's first school-based health center.
- 2023:** Amoskeag Health upgrades Electronic Medical Record system to include patient portal in English and Spanish.

### Financial Information

Annual Budget: \$25,112,363; Employees: 185 FTEs

## AMOSKEAG HEALTH SERVICES

### Primary Medical Care

Health care for adults and children of all ages, regardless of insurance status

### Prenatal Care

Care through conception to childbirth; collaboration with Bedford Commons OB/GYN for high-risk patients

### Specialty Care

Podiatry services, state-wide special medical program for complex medical needs, care coordination, and developmental screenings

### Chronic Disease Care

Diabetic eye care, chronic disease self-management courses, and high blood pressure program

### Behavioral Health Services

Mental health therapy, substance use disorder (SUD) counseling, perinatal SUD care, and medication assisted therapy

### Optometry Care

Vision care for all ages, including routine eye care for diabetic patients and free glasses for qualifying children

### Preventive Care

Lifestyle change programs, nutritional counseling, breastfeeding education, family planning, and screening for breast, cervical, and colorectal cancers

### Social Services and Support

Case management, transportation, language interpretation, WIC enrollment, adolescent services, medical/legal partnership, ACERT collaboration with Manchester Police Dept, early childhood LAUNCH program, community health workers, referrals to support services, school-based behavioral consultants, and school-based health center



## Community Health Access Network (CHAN)

Gary Noseworthy, Executive Director

14 Manchester Square, Suite 235

Portsmouth, NH 03801

603-691-5901 • [www.chan-nh.org](http://www.chan-nh.org)

### ABOUT US

CHAN is the only Health Center Controlled Network (HCCN) in NH. CHAN has developed and supports an integrated clinical and administrative system infrastructure that affords innovative opportunities for its Federally Qualified Health Center (FQHC) members, which include 3 Healthcare for the Homeless programs. CHAN's endeavors, particularly in the Health Information Technology arena, enable the provision of enriched patient experiences and quality care.

### OUR NEW HAMPSHIRE FULL & AFFILIATE FQHC MEMBERS

- Amoskeag Health
- Ammonoosuc Community Health Services
- Coos County Family Health Services
- Greater Seacoast Community Health
- Harbor Care
- Health Care for the Homeless Program, Catholic Medical Center
- Health First Family Care Center
- Lamprey Health Care, Inc.
- Mid-State Health Center

### HIGHLIGHTS IN CHAN HISTORY

**1995:** Five community health care centers with a collective history of over 75 years of experience in providing primary care services to the uninsured, underinsured, and Medicaid populations formed an Integrated Services Network (ISN), called CHAN.

**1996:** A NH Health Care Transition Fund Grant helped to expand the HCCN and develop shared services.

**1997:** Two additional community health centers joined the network, and CHAN was awarded our first Bureau of Primary Health Care grant.

**2008:** CHAN was awarded the HIMSS Nicholas E. Davies award for improving health care through the use of HIT.

**2010:** CHAN expanded across state lines and welcomed a health center from Texas into the network.

**2016:** CHAN began hosting the IT infrastructure for a VT health center.

2020: CHAN expanded data visualization capabilities & welcomed our tenth member.

**2021:** CHAN integrated the EHR with patient engagement and remote patient monitoring tools and welcomed 3 new affiliate members.

**2022:** CHAN led an RPF process representing 10 health centers to select a new EHR, identified a vendor of choice, and negotiated a contract and expanded the scope of support for chronic disease funding for our members.

### CHAN SERVICES

#### ❖ Electronic Health Record

Electronic health record system that enables clinicians and staff to document patient visits, streamline clinical workflow and securely exchange data; a patient portal and integration with patient engagement and telehealth systems

#### ❖ Practice Management

Patient scheduling, registration and revenue cycle management provides all the tools to manage the specific needs of community health centers and boost efficiency

#### ❖ Data Warehouse

Updated daily with clinical, operational and financial data. Supporting quality management & measurement, operational and financial reports, analysis; member-generated ad hoc reports and data visualization tools.

#### ❖ Clinical Standards

Supporting clinical operations and providing support for chronic disease management and prevention.

#### ❖ IT Services

Systems maintenance, security, upgrades, disaster recovery, electronic reports and custom data entry screens/forms development. Data submissions to regulatory agencies & payers

#### ❖ Quality Improvement

Technical assistance, training and audits



## WHO WE PROVIDE CARE FOR

**Where They Live:** Patients come from nearly all communities within Coos County and neighboring towns in Maine, and Vermont which are federally-designated Medically Underserved Population (MUP) areas and both Medical and Dental Health Professional Shortage Areas (HPSAs).

**Socioeconomic Status:** Fifty-six percent of our patients have household incomes below 200% of the federal poverty level ([\\$29,160 for a household of one](#)).

## Insurance Status (2022):

8% (1,007) were uninsured.  
25% (3,090) were covered by Medicaid.  
31% (3,859) were covered by Medicare.  
36% (4,535) were covered by private insurance.

## NUMBERS OF CHILDREN AND ADULTS SERVED (2022)

Total Patients: 12,491; Total Visits: 46,707  
Serving 904 Veterans  
Patients with Hypertension: 32%  
Patients with Diabetes: 14%

## FINANCIAL INFORMATION

Sliding Fee Discounts (2022): \$271,038  
Employees: 129.6 FTEs

## Coos County Family Health Services

[www.coosfamilyhealth.org](http://www.coosfamilyhealth.org) • Ken Gordon, Chief Executive Officer

## NH Locations:

### Medical:

133 Pleasant Street Berlin, NH 03570 • 603-752-2040  
2 Broadway Street, Gorham, NH 0358 • 603-466-2741  
59 Page Hill Road Berlin, NH 03570 • 603-752-2900  
54 Willow Street Berlin, NH 03570 • 603-752-3669  
Express Care Coming early 2024 to Gorham, NH

### Dental:

73 Main Street Berlin, NH 03570 • 603-752-2424  
141 Corliss Lane, Colebrook NH 03576 • 603-237-9195

## HIGHLIGHTS IN CCFHS HISTORY

1974: Started as a Title X Family Planning Agency.  
1980: Merged with Family Health Programs to provide prenatal and infant care and added WIC and RESPONSE.  
1993: Designated as a Federally Qualified Health Center.  
2004: Expanded to sites in Berlin and Gorham, adding 10,000 patients.  
2016: Coos County Family Dental Clinic established.  
2018: Medication Assisted Treatment program began.  
2020: CCFHS becomes an accredited Diabetes Self-Management Education and Support Provider Organization.  
2021: Offered Covid-19 testing, vaccine clinics, and patient care; established an accredited Diabetes Self-Management & Education Program; and expanded our services to survivors of domestic violence & sexual assault in Northern Grafton county.  
2022: Established a fourth primary care clinic in Colebrook. In partnership with the Upper Connecticut Valley Hospital, established a medical transportation services for Colebrook area residents. Began work to establish a Teaching Health Center Family Residency Program.  
2023: Established a 2nd Dental Clinic located in Colebrook; Completed a 3400 sq ft expansion of our Pleasant Street clinic in Berlin

## A GROWING DEMAND FOR SERVICES (2019-2022):

4% increase in dental patients; 68% increase in Substance Use Disorder patients; 77% increase in mental health patients



## COOS COUNTY FAMILY HEALTH SERVICES:

- Primary Medical Care/Family Medicine
- Prenatal Care & Obstetrics: In Partnership with Androscoggin Valley Hospital
- Family Planning: Reproductive Health Services
- Breast & Cervical Cancer Screenings
- HIV Testing & Counseling
- Diabetes Education & Support
- Chronic Disease Management
- Behavioral Health Services
- Substance Misuse Treatment
- Reduced-Cost Prescription Drugs
- Women, Infant and Children (WIC) Nutrition/Health Services
- Dental/Oral Health Services
- Health Promotion and Education
- On-site Laboratory Services
- Medical Social Work
- Podiatry
- Telehealth Services
- Medical Appointment Offered 7 Days per Week
- RESPONSE: Advocacy and counseling program for survivors of domestic violence and sexual assault, shelter for battered women and their children, and transitional housing





## Greater Seacoast Community Health

Jim Avrett, CEO • [GetCommunityHealth.org](http://GetCommunityHealth.org)

**Mission:** To deliver innovative, compassionate, integrated health services and support that are accessible to all in our community, regardless of ability to pay.

### Health Center Locations

- [Families First Health & Support Center](#)  
8 Greenleaf Woods Drive, Portsmouth
- [Goodwin Community Health](#)  
311 Route 108, Somersworth
- [Mobile Health Clinics](#)  
Rochester, Dover, Milton, Portsmouth, Exeter

### Program Partner Locations

- [Strafford County Public Health Network](#)  
311 Route 108, Somersworth
- [Women, Infants, and Children Nutrition Program](#) 311 Route 108, Somersworth

### About Our Patients (2022)

- Insurance status: 46% Medicaid; 38% private; 9% uninsured; 8% Medicare
- Residence: 26% Rochester; 14% Dover; 10% Somersworth; 8% Portsmouth; 33% other New Hampshire; 9% Maine
- Patients experiencing homelessness: 652
- Veterans: 312

### Budget and Staffing (2022)

- Agency Operating Budget: \$23 million
- Employees: 198.90 FTEs

### People Served (2022)

- Total Patients Served: 14,061
  - Medical: 12,662 patients, 44,994 visits
  - Medical Visits per Medical Patient: 3.37
  - Dental: 2,717 patients, 5,557 visits
  - Mental Health: 1,415 patients, 9,908 visits
  - Substance Use: 291 patients, 1,372 visits
- Home Visits, Parenting Classes, Family Programs: 700 parents and children, 4,000 visits

### Highlights in Greater Seacoast History

- **1969:** Prenatal clinic founded by Avis Goodwin in Dover; became Goodwin Community Health
- **1984:** Portsmouth Prenatal Clinic founded; became Families First Health & Support Center
- **1980s:** Home visiting, parent education and family programs added at Families First
- **1990s:** Both health centers add primary care and become Federally Qualified Health Centers
- **2000s:** Both health centers add dental care and behavioral health services. Families First adds mobile health clinics.
- **2010s:** Both health centers add medication-assisted treatment and other SUD recovery services
- **2018:** The health centers merge under the legal name Greater Seacoast Community Health
- **2020:** Greater Seacoast becomes the first community health center to host a resident physician program

## GREATER SEACOAST COMMUNITY HEALTH SERVICES

### PRIMARY & PRENATAL CARE

- Primary care for adults
- Pediatric care
- Prenatal care
- Mobile health care for people experiencing homelessness and others with low incomes
- Child-development screenings
- Breast and cervical cancer screenings
- Chronic-illness education and support

### DENTAL CARE

- On-site hygiene, treatment and urgent care
- School-based education, screening, cleaning, sealants

### BEHAVIORAL HEALTH AND RECOVERY SERVICES

- Behavioral health counseling
- Psychiatric services
- Substance Use Disorder counseling
- Medication-assisted SUD treatment

### PARENT & FAMILY PROGRAMS

- Parenting classes and groups,
- Playgroups and family programs
- Individual support for families under stress
- Support for grandparents and other relatives raising children

### ... AND MORE

- Social work services and care coordination
- Insurance and benefits enrollment
- Prescription assistance
- In-house pharmacy and
- 340B drug discount program
- On-site lab services





## Henry J. Och, President and CEO

45 High Street Nashua, NH 03060

615 Amherst Street Nashua, NH 03063

77 Northeastern Boulevard, Nashua, NH 03062

Mobile Health Van, Hillsborough County

603-882-3616

[www.harborcarenh.org](http://www.harborcarenh.org)

**About Us:** Harbor Care Health and Wellness Center (HCHWC) is the Federally Qualified Health Center of Harbor Care. *Harbor Care is also the state's only HUD-designated EnVision Center.* We have built success through innovation, collaboration, and an unwavering commitment to our most vulnerable community members.

**As one of only three health providers in NH designated as a Health Care for the Homeless Health Center,** HCHWC serves over 2,600 unique patients through 22,000+ visits annually with primary care, dental, pharmacy, MAT, mental health, and substance use services.

**Socioeconomic Status:** Of the patients we serve, 67% are homeless, and 74% are below 200% of the federal poverty level ([\\$29,160 for a household of one](#)). Of our total visits, 87% were for mental health or substance use disorder treatment.

### Insurance Status (2022):

Of the patients we serve, 14% are uninsured, 14% are covered by Medicare, 20% are covered by private insurance, and 52% are covered by Medicaid.

### Financial Information (2022):

Full-Time Equivalents: 74.90 FTEs

Total Uncompensated Care: \$6,930,594

### Numbers of Patients Served (2022):

Unique Patients: 2,681

Total Visits: 22,429

Dental Visits: 1,592

Mental Health & Substance Use Visits: 15,150

### Highlights in 2022/2023:

Harbor Care is a nationally accredited Patient-Centered Medical Home and the only New Hampshire health center with Distinction in Behavioral Health Integration from the National Committee for Quality Assurance.

Providing integrated patient-centered social and health care services to Greater Nashua's most vulnerable community members, Harbor Care Health and Wellness Center (HCHWC), leverages in-person and virtual health care services at our clinics throughout Nashua, in two local school districts, within community settings and our patient's homes.

In 2022 HCHWC provided mental health services in the Nashua and Milford School Districts, outreached through bilingual community health workers to raise awareness about COVID vaccines, assisted uninsured persons to enroll with Medicaid or Medicare, as well as provided supportive employment services.

HCHWC integrates with all other Harbor Care programs to deliver seamless patient-centered care. Working as one, the programs of Harbor Care provide the tools people need to improve their lives. Our mix of high-quality integrated services includes the most essential: supportive housing, primary and preventative medicine, mental health care, substance use treatment, veteran services, home care, and HIV/AIDS services.

\*The State of Homelessness in NH, An Examination of Homelessness, Related Economic and Demographic Factors, and Changes at the State and County Levels, 2017 – NH Coalition to End Homelessness



## HARBOR CARE SERVICES

- Housing (permanent supportive, transitional, veteran, HIV+, and licensed community residences)
- Primary and acute medical care, including same day visits
- Behavioral health care, including mental health medication management, mental health counseling
- Dental care for all ages
- Veteran services
- In-home health care
- Medication-Assisted Treatment (MAT) including withdrawal management services
- Substance use disorder outpatient services including Intensive Outpatient Program (IOP) and Partial Hospital Program (PHP)
- Residential substance use disorder treatment for adults and families
- In-house Pharmacy: 340B Low-Cost Prescription Program
- HIV/AIDS Services
- Case management
- Supportive Employment Services
- Patient navigation and insurance enrollment
- Sliding fee scale, payment plans and discounted services
- 24x7x365 after-hours coverage

# Health Care for the Homeless (HCH)

A Program of the Manchester Health Department  
based at Catholic Medical Center



**Anna Thomas**, Executive Director, HCH  
[athomas@manchesternh.gov](mailto:athomas@manchesternh.gov) • 603-657-2700  
**Rossana Goding**, Director, HCH  
[rossana.goding@cmc-nh.org](mailto:rossana.goding@cmc-nh.org) • 603-663-8716  
**Visit HCH Website**

## About Our Patients

**Who They Are:** Men, women, teens, and children in the City of Manchester, NH, who do not have a regular or adequate place to call home

**Where They Live:** Individuals and families live in transitional housing, temporary shelters, or “couch surf,” doubled up with other families, friends, or acquaintances. Some sleep in places not intended for human habitation, such as in cars, abandoned buildings, and in tents along the river or in the woods.

## Adults and Children Served (2022)

Total Patients: 1,288  
Medical Visits a year per Medical Patient: 3.54  
Total Visits: 7,142 (includes medical, mental health, oral health, substance use disorder treatment, & enabling service visits)  
% Racial and/or Ethnic Minority Patients: 33%  
% Best Served in Language Other than English: 23%  
% Substance Use Disorder Patients: 17%  
Patients Served Who Are Homeless: 100%

## Socioeconomic Status (2022)

Eighty-nine percent of patients have incomes below 200% of the Federal Poverty Level (\$29,160 for a household of one).



## Insurance Status (2022)

6% have private insurance 17% are uninsured; 18% are covered by Medicare; and 59% are covered by Medicaid.

## HCH History

**1980s:** Manchester Health Department is awarded a federal grant to provide homeless healthcare services. MHD contracts with Catholic Medical Center to implement program operations. Clinic opens at New Horizons Shelter.

**1990s:** Program expands to include clinic hours at Families in Transition with medical team and substance use disorder support in place.

**2000s:** Team expands to include support staff, a psychiatric prescriber, behavioral health counselors, and a health educator.

**2010s:** HCH is designated an FQHC. An increase in the number of patients served and enhanced grant and third-party revenues support and the doubling of HCH staff. A third integrated primary care clinic is opened.

**2020s:** Medication Assisted Treatment, Telehealth, Phlebotomy, and Street Medicine services are added and expanded. Community partnerships are enhanced in response to the opioid epidemic and the COVID pandemic. All people experiencing homelessness in the City of Manchester are welcome to our practices. No one is turned away due to an inability to pay.



**Adult Emergency Shelter  
Practice/Families in  
Transition**  
199 Manchester Street  
Manchester, NH 03103  
603-663-8718



**Manchester Mobile  
Health Care**  
Manchester, NH 03103  
603-663-8718



**Wilson Street Integrated Health  
Practice**  
293 Wilson Street, Suite 102  
Manchester, NH 03103  
603-665-7450

## HEALTH CARE FOR THE HOMELESS SERVICES:

- Primary Medical Care, Medical Case Management, Chronic Disease Management
- Integrated Behavioral Health Services, Counseling and Medication-Assisted Treatment for Substance Use Disorders
- Easily Accessible Clinics, Outreach, and Street Medicine
- Testing and Treatment for STD/HIV
- Health Screenings and Phlebotomy
- Prescription Medication Assistance
- Telehealth
- Transportation Coordination
- Referrals to Specialty Care
- Social Work/Case Management





### ABOUT OUR CLIENTS

**Where They Live:** Our clients come from 23 rural townships within the Twin Rivers and Lakes Region of New Hampshire (Belknap, Carroll, Merrimack and Grafton counties), a population of approximately 81,000 people.

### Socio-Economic Status

Eighty-one percent of HealthFirst clients are at 200% of the federal poverty level or below (\$29,160 for a household of one).

### Insurance Status (2022)

5% were uninsured; 25% were covered by Medicare; 29% were covered by private insurance; and 41% were covered by Medicaid.

### Children & Adults Served

Total Patients: 6,166; Total Visits: 27,002  
Medical Visits a year per Medical Patient: 3.42  
Patients with Hypertension: 43%;  
Patients with Diabetes: 17%  
Patients Best Served in Language Other Than English: 7%

### Financial Information

Agency Budget: \$11,505,000; Employees: 64.55 FTEs  
Total Uncompensated Care: \$496,900  
Sliding Fee Discounts: \$130,776;  
Uninsured Clients Served: 319

### A Growing Demand for Services (2019-2022)

22% increase in Total Patients Served  
274% increase in Substance Use Disorder Patients Served

### HealthFirst Family Care Center

Russell G. Keene, Chief Executive Officer

### Four NH locations:

841 Central Street, Franklin, NH • 603-934-1464  
22 Strafford Street #1, Laconia, NH • 603-366-1070  
17 Church Street, Laconia, NH - 603-366-1070  
18 Roberts Road, Canaan, NH – 603-523-4343

**(opening November 1, 2023)**

[www.healthfirstfamily.org](http://www.healthfirstfamily.org)

### HIGHLIGHTS IN HEALTHFIRST HISTORY

1995: Established with funding from the NH DHHS  
1997: Received designation as a Federally Qualified Health Center Look-Alike  
2002: Designated as a Federally Qualified Health Center  
2006: Opened second primary care site in Laconia  
2012: Integrated behavioral health within primary care  
2019: MAT program offered  
2020: MAT program expanded into Tilton  
2021: Same-Day Appointments provided an increase in access to patients for urgent issues by 100%.  
2022: HealthFirst expanded its school-based counseling services by 100% and now serves four school districts. Behavioral health counselors meet the K-12 school age population on-site to allow for seamless, accessible, destigmatized care.  
2023: Received HRSA approval to operate a third FQHC site in Canaan, NH at the Mascoma Community Health Center.

### 2023 Specific Highlights

- HealthFirst has an Enabling Services Supervisor and two Community Resource Specialists (CRS) onsite to assist patients struggling with social determinants of health. The CRS specialize in connecting patients with regional resources which may include housing supports, insurance, transportation, food insecurity, and more.
- HealthFirst hired Michael Watto, DO as its new Chief Medical Officer.
- The BH Team hired one FTE for school-based treatment, in addition to another PT clinician who attends the schools one half day a week. In the 22-23 school year, over 90 students were served across four school districts. This will grow considerably in the 23-24 school year with the addition of another full-time BH Specialist.



### HEALTHFIRST FAMILY CARE CENTER SERVICES

- Primary Health Care for Men, Women, and Children of All Ages, Regardless of Ability to Pay or Insurance Status
- Women's Health Care Including, but not Limited to, Free Breast and Cervical Cancer Screenings for Eligible Women
- Disease Management and Education on Managing Chronic Diseases such as Diabetes, Asthma, and Hypertension
- Same Day Appointments
- HealthFirst Participates in the Federal Health Disparities Collaborative for Diabetes
- Patient Advocates Available to Assist Clients with Accessing Health Insurance and Medicaid
- Health and Wellness Promotion and Education
- Screenings and Treatments for Chronic Illnesses  
Minor Procedures
- Nutrition Counseling
- Behavioral Health Services Integrated in Primary Care, Substance Misuse Counseling and Addiction Treatment
- Medication Assisted Treatment (MAT)
- Hepatitis C Treatment
- COVID-19 Testing & Vaccinations



**Greg White, Chief Executive Officer**

## **NH Locations:**

**Newmarket Center:** 603-659-3106

207 South Main Street Newmarket, NH

**Raymond Center:** 603-895-3351

128 State Route 27 Raymond, NH

**Nashua Center:** 603-883-1626

22 Prospect Street Nashua, NH

**InteGreat Health:** 603-402-1501

7 Prospect Street, Nashua, NH

**Nashua Soup Kitchen:** 603-889-7770

2 Quincy Street, Nashua, NH 03060

**Center for Life Management:** 603-434-1577

10 Tsienneto Road, Derry, NH 03038

[www.lampreyhealth.org](http://www.lampreyhealth.org)

## **ABOUT OUR PATIENTS**

**Where They Live:** Our patients come from over 40 communities within Rockingham, Hillsborough and parts of Strafford Counties.

**Socioeconomic Status:** Eighty-one percent of Lamprey Health Care patients are at or below 200% of the Federal poverty level ([\\$27,180 for a household of one](#)).

**Insurance Status:** In 2022, aggregating figures from all three centers showed 12% were uninsured; 31% were covered by Medicaid; 16% were covered by Medicare; and 41% had private insurance. However, in the Nashua Center, 28% of patients are uninsured.

## **NUMBERS SERVED (2022)**

Total Patients: 15,719; Patient Visits: 64,669

## **FINANCIAL INFORMATION (2022)**

Agency Revenue: \$21.3 million; Employees: 210 FTEs: 154



## **HIGHLIGHTS IN LAMPREY HEALTH CARE HISTORY**

2023: Added Nashua Soup Kitchen & Shelter Care; replaced

Electronic Medical Record system

2022: Expansion of Mobile Health Program to five weekly locations

2021: Launched Mobile Health Unit

2020: Launched Healthy Together at Center for Life Management in Derry; implemented a Hepatitis C clinic; distributed food during the pandemic shutdown; Diabetes Self-Management Education and Support accreditation; established care at the Nashua Soup Kitchen & Shelter.

2018: Launched InteGreat Health Program

2017: Launched Nurse Practitioner Fellowship Program

2015: Integrated Behavioral Health Services

2015: Added Seacoast Public Health Network

2013: Recognized as NCQA Patient Centered Medical Home

2011: Expansion of the Nashua Center

2005: Expansion of the Newmarket Center

2000: Implemented an Electronic Medical Records (EMR) system; Third Center established in Nashua

1996: Expansion of the Raymond Center

1981: Second Center established in Raymond

1973: First Center established in Newmarket

1972: Created Transportation Program to improve access to health & community services for Seniors & Individuals with disabilities.

1971: Founded by a group of citizens to bring medical, health and supportive services to communities in Rockingham & Strafford Counties.

## **Lamprey Health Care Services**

- **Primary Medical Care:** For adults and children of all ages, regardless of ability to pay
- **Mental Health & Substance Use Disorder Treatment:** Provided services to 1,360 patients
- **Prenatal Care:** Includes care management for 345 patients
- **Certified Diabetes Educator:** Diabetes education and treatment for 1,604 patients
- **Asthma Care Management:** Asthma education and treatment for approximately 528 patients
- **Breast & Cervical Cancer Program:** Enrolled 483 women age 50+
- **Medication Assisted Treatment Program:** Provided care and resources to patients struggling with opioid use and alcohol use disorder.
- **Care Management:** 1,018 patient visits
- **Interpretation:** Interpretation services provided for patients non-English speaking
- **Telehealth:** Implemented Telehealth during the COVID-19 pandemic.
- **Early Childhood Literacy:** Provided books to pediatric patients ages 6 months – 5 years to promote early literacy & a lifetime love of books
- **Health Care for Homeless:** Provided health & care management services to 758 patients without stable housing
- **Health Care for Veterans:** Provided health & care management services to 415 Veterans





# MID-STATE HEALTH CENTER

## Mid-State Health Center

Dr. Robert MacLeod, Chief Executive Officer

## LOCATIONS:

**Mid-State Health Center Plymouth:** 101 Boulder Point Dr., STE 1 Plymouth, NH 03264 • 603-536-4000

**Mid-State Health Center Bristol:** 100 Robie Road Bristol, NH 03222 • 603-744-6200

**RISE Recovery Services:** 28 Main Street, Plymouth, NH 03264 • 603-217-6300

**Mid-State Health Center Lincoln:** 6 South Mountain Drive, Lincoln, NH 03251 • 603-536-4000

**Physical and Occupational Therapy and Aquatics:** 101 Boulder Point Dr., STE 3 Plymouth, NH 03264 • 603-536-4000 x5500

**Little Antlers Learning Center:** 742 Tenney Mountain Highway, Plymouth, NH 03264 • 603-536-3898

**Mid-State Health Center Littleton (DENTAL ONLY):** 202 Cottage Street, Littleton, NH 03561 • 603-626-9000

[www.midstatehealth.org](http://www.midstatehealth.org)

## ABOUT OUR CLIENTS

**Where They Live:** Patients come from 19 geographically isolated, rural communities within Grafton, Belknap and Merrimack Counties. All of the towns are designated as Medically-Underserved Populations.

**Socioeconomic Status:** Forty percent of our service area residents are 200% of the Federal Poverty Level or below ([\\$29,160 for a household of one](#)).

### Insurance Status:

6% were uninsured; 18% were covered by Medicaid; 28% were covered by Medicare; and 48% had private insurance.

### Number of Adults and Children Served (2022)

Total Patients: 12,425; Total Visits: 47,650

## FINANCIAL INFORMATION (2022)

Agency Revenue: \$13.3 million

Employees: 164.05 FTEs; 188 individuals

Full-Time Employees: 173



## HIGHLIGHTS IN MID-STATE HISTORY

**1998:** Established as a separate, nonprofit corporation

**2005:** Changed name to Mid-State Health Center; Designated a Federally Qualified Health Center Look-Alike

**2013:** Designated as a funded Federally-Qualified Health Center

**2014:** Built a new health center facility in Bristol, NH

**2015:** Added oral health preventive and restorative services

**2016:** Expanded services to include Medication Assisted Treatment

**2018:** On-site Pharmacy partnership with Genoa Health

**2019:** Behavioral Health Workforce Education & Training Program collaboration with Plymouth State University; Feed the Need Initiative launched to address food insecurity

**2020:** Onsite visiting specialist program; Intensive Outpatient Treatment Program for Substance Use Disorder added; Opened RISE Recovery Program located at Whole Village Family Center

**2020:** Onsite diagnostic Imaging; Telehealth - Remote Visits

**2020:** Psychiatry added to its services via telehealth

**2021:** Childcare center expanded to provide high-quality childcare to the community; COVID-19 vaccine and testing available; Purchased new facility in Plymouth

**2022:** Added PTOT services; expanded primary health care to Lincoln, NH; and expanded access to specialist through Visiting Specialist Program

**2023:** Expanded Dental to Littleton, NH; expanded Behavioral Health to Lincoln; Onboarded Pediatrician

## A GROWING DEMAND FOR SERVICES (2019-2022)

5% increase Total Patients Served

33% increase in Dental Patients Served

128% increase in Substance Use Disorder Patients Served

## MID-STATE HEALTH CENTER SERVICES

- Primary Medical Care: Chronic Disease Education, Care Management and Supports for Illnesses Such as Asthma, Diabetes, and Hypertension
- Pediatric and Family Medicine Services
- Same-Day Program: Open to Walk-Ins
- 24-Hour Clinical On-Call Service for Registered Patients
- Behavioral/Mental Health Counseling
- Telepsychiatry Services
- Physical and Occupational Therapy Services; Aquatic Therapy
- Substance Use Disorder (RISE Recovery) Supports including Outpatient Medication Assisted Treatment and Intensive Outpatient Treatment
- Dental Services including Exams, Cleanings, Fillings, Crowns, Bridges, Extractions, Periodontal Evaluations, Dental Appliances, and Standby Hours for Emergencies: 1,490 dental patients
- On-site Laboratories
- Prescription Services
- Infusion Services
- Marketplace Education and Outreach
- Language Interpretation Services
- Nutrition Consults and Education
- School-Based Oral Health Outreach Program
- Transportation Services
- Food Security Program – Feed the Need Initiative
- On-site Diagnostic Imaging (digital x-ray, ultrasound)
- Visiting Specialty Services Available including Orthopedics; Podiatry; ENT; Sports Medicine
- Breast and Cervical Cancer Program



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Website:  
[www.tdi.dartmouth.edu/education/professional-education/new-hampshire-area-health-education-center-ahec](http://www.tdi.dartmouth.edu/education/professional-education/new-hampshire-area-health-education-center-ahec)

## ABOUT US

The New Hampshire Area Health Education Center (NH AHEC) focuses on the health workforce in New Hampshire. As an active member of a national network of programs, the AHECs provide educational support to current and future members of the health workforce while collaborating with community organizations to improve population health. The NH AHEC operates as a partnership between Geisel School of Medicine at Dartmouth and Regional centers in Littleton and Raymond to serve the entire state.

The structure of AHEC in NH is one program office and two center offices:

**Program office:** Geisel School of Medicine at Dartmouth (Hanover, NH)

**Center office:** Northern NH AHEC at North Country Health Consortium (Littleton, NH)

**Center office:** Southern NH AHEC at Lamprey Health Care (Raymond, NH)

In addition to the statewide AHEC network, AHECs are part of an active National AHEC Organization, representing over 85% of the counties in the United States.

## MISSION

NH AHEC strives to improve care and access to care, particularly in rural and underserved areas by enhancing the health and public health workforce in New Hampshire.

## HIGHLIGHTS IN NH AHEC HISTORY

The national AHEC program began in 1972 to help prepare primary care physicians for community practice at a time when most training occurred in the hospital setting. Its establishment coincided with the establishment of community health centers and the National Health Service Corps - supporting education, clinical care and workforce. NH AHEC began in 1997.

## NH AHEC SERVICES

- Developing and leading health workforce initiatives and opportunities
- Building and supporting the health 'pipeline/pathway'
- Connecting students to health careers
- Promoting health career awareness and recruitment for young people, including activities such as health career day and residential programs
- Improving care and access to care
- Offering COVID-19-related workforce trainings and services
- Facilitating community placements for health professions students
- Providing interprofessional training opportunities for health professions students from multiple disciplines
- Administering New Hampshire AHEC Health Equity Scholars Program
- Sponsoring wellness activities
- Providing continuing education to health and public health providers
- Supporting workforce diversity initiatives



NCHCNH.org

We are a private, public health non-profit and rural health network, created in 1997 as a vehicle for addressing common issues through collaboration.

Together with other organizations throughout the region, we provide, coordinate, or facilitate:

- Solving common problems and facilitating regional solutions
- Creating and facilitating services and programs to improve population health status
- Providing health professional training, continuing education, and management services to encourage sustainability of the healthcare and workforce infrastructure
- Increasing capacity for local public health essential services
- Increasing access to healthcare and other resources for underserved and uninsured residents of Northern NH

Leading innovative collaboration to improve the health status of northern New Hampshire.



Lauren Pearson, Executive Director  
262 Cottage St., Suite 230  
Littleton, NH, 03561  
(603)259-3700





## ABOUT OUR PATIENTS

**Where they live:** Patients served reside in Charlestown, surrounding communities in Sullivan County, and portions of Cheshire County, as well as adjacent Vermont communities.

**Socio-economic Status:** Sullivan County, with a population of 43,958, is rural and the second least populated county in the state.

- 2017-2021 median household income: \$64,587
- Per capita income in past 12 months: \$35,238
- Percent of persons in poverty: 9.1%
- Percent of persons without health insurance, under age 65: 7%
- Percent of persons with a disability, under age 65: 11%

Source:

[www.census.gov/quickfacts/sullivancountynewhampshire](http://www.census.gov/quickfacts/sullivancountynewhampshire)

## NUMBER OF PATIENTS SERVED

Total Patients Served in 2022:  
5,331  
Total Patient Visits in 2022:  
17,894

## GENERAL INFORMATION

Employees: 250  
*New facility opened in July 2017.*

## HIGHLIGHTS IN CHARLESTOWN HEALTH CENTER HISTORY

Charlestown Health Center is part of North Star Health, a newly independent, not-for-profit Federally Qualified Health Center.

## CHARLESTOWN HEALTH CENTER SERVICES

- Integrated Primary Medical Care
- Walk-in Access 7 days a week
- Preventive Health Screenings
- Chronic Disease Management and Diabetes Education
- Support programs for Breast and Cervical Cancer screenings
- Nutrition Counseling
- Smoking Cessation Counseling
- Discount Pharmaceuticals
- Behavioral Health and Substance Use Disorder Counseling
- On-site Lab and X-ray services
- North Star Dental and Vision Care Access





Nicole Clegg, Interim CEO

### Health Centers in New Hampshire:

Derry: 4 Birch Street Derry, NH 03038 • 603-434-1354

Exeter: 108 High Street Exeter, NH 03833 • 603-772-9315

Keene: 8 Middle Street Keene, NH 03431 • 603-352-6898

Manchester: 24 Pennacook Street, Manchester, NH 03104 • 603-669-7321

[www.ppnne.org](http://www.ppnne.org)

### ABOUT OUR NH PATIENTS in 2022:

Total NH patients served: 8,984

Total NH visits: 11,343

*Where They Live:* Patients accessing our care in-person at one of our health centers live close to Derry, Exeter, Keene, or Manchester. Patients accessing our care remotely through Telehealth can live anywhere within ME, NH, or VT.

*Socioeconomic Status:* 58% of our patients are living at or below 200% of the Federal Poverty Level ([\\$29,160 for a household of one](#)).

### Insurance Status:

- 26% Self Pay
- 48% Private Insurance
- 22% Government (includes Medicaid, Medicare, NH Healthy Families and others)
- 4% NH Family Medical Assistance Program
- Less than 1% Access Plan

### FINANCIAL INFORMATION

Agency Budget: \$31 million

Employees agency-wide: 200

Free or discounted care in NH: \$1.6 million

### HIGHLIGHTS IN PPNNE HISTORY

1965: Planned Parenthood of Vermont (PPV) formed

1966: Planned Parenthood Association of the Upper Valley (PPAUV) formed

1984: PPV/PPAUV merged to form PPNNE

1986: PPNNE merged with Family Planning Services of Southwestern New Hampshire (Keene), Health Options (Manchester), Southern Coastal Family Planning, and Rockingham County Family Planning

2015: PPNNE Celebrates 50 years

2020: PPNNE adapts to a new COVID landscape with innovative care, like telehealth and at-home STI testing kits.

2021: Laid the groundwork for direct-to-patient medication abortion in order to expand access.

2022/2023: Expanded access to abortion by offering medication abortion via telehealth and in-person at an additional health center - St. Johnsbury, VT.

### NUMBER OF TOTAL PATIENTS SERVED

#### ACROSS ME, NH AND VT IN 2022:

Medical care users: 31,723 patients

Medical care visits: 42,520

32,036 STI screenings

5,799 pregnancy tests

1,605 breast exams

\$3.9 million in discounted and free health care provided

## PLANNED PARENTHOOD SERVICES

### Reproductive and Sexual Health Care

Birth control (by mail or in-person); emergency contraception; gender affirming hormone therapy; pregnancy testing and a discussion of options, STI/HIV testing and treatment; and vasectomies (currently in Burlington, VT only)

### Limited Primary Care

Although PPNNE cannot serve as a patient's primary care physician, we can provide: immunizations for the Flu, Tdap, HPV, and Hepatitis A & B; cervical, breast, colorectal and testicular cancer screenings; Pap tests; high blood pressure, thyroid, cholesterol, and diabetes screenings; and well person visits;

### Health Care Education

Peer sexuality education for high school students and community-based sexuality education

***Most services are available  
remotely via Telehealth.***



## White Mountain Community Health Center

Kenneth "JR" Porter, Executive Director  
298 White Mountain Highway, Conway, NH 03818  
603-447-8900 • [www.whitemountainhealth.org](http://www.whitemountainhealth.org)

### ABOUT OUR CLIENTS

**Where They Live:** Patients come from nine rural New Hampshire communities in northern Carroll County, as well as from neighboring Maine towns.

**Socioeconomic Status:** Eighty percent of White Mountain Community Health Center patients are at or below 200% of the federal poverty level ([\\$29,160 for a household of one](#)).

### Insurance Status (2022)

7% were covered by Medicare.  
13% were uninsured.  
36% were covered by Medicaid.  
44% had private insurance.

### FINANCIAL INFORMATION (2022)

Budget: \$2,174,793; Employees: 19.80 FTEs  
Charity care provided (2023): \$73,658



**Mission:** White Mountain Community Health Center provides the community with affordable access to high-quality, compassionate, individualized healthcare and support services needed to achieve wellness.

### Adults and Children Served (2022)

Health Care Users: 2,102  
Patient Care Visits: 7,546  
Dental patients: 515 (25% of patients)  
Patients Served with Hypertension: 34%

### HIGHLIGHTS IN WMCHC HISTORY

2001: White Mountain Community Health Center is established (Children's Health Center, established in 1968, and Family Health Center, established in 1981, merge)

2005: Began offering dental hygiene services

2017: Medication-assisted treatment for substance use disorder and adult dental services added

2018: Designated an FQHC Look-Alike

2021: Comprehensive care coordination team established

**2022:** Expanded behavioral health services with additional mental health counselor with alcohol and substance use treatment expertise, and psych NP

**2023:** Added Spanish-speaking staff to serve growing local population of patients best served in Spanish.

### CHANGING WITH THE COMMUNITY NEEDS

White Mountain Community Health Center screens all patients for social determinants of health, including substance abuse and depression. Patients who are identified as having higher risk factors or specific needs are referred for treatment and/or supported by the care coordination team, which includes an RN, a social worker, and a community health worker.

## WHITE MOUNTAIN COMMUNITY HEALTH CENTER SERVICES

- Primary and Pediatric Care
- Dental Services: Children's full-service program and adult hygiene, x-rays, and fillings
- Sexual & Reproductive Health: Confidential services for teens and adults
- HIV/STD Testing
- Dietician Counseling
- Social Services and Care Coordination: Assistance with obtaining fuel, food, or housing assistance, care coordination and case management, with social workers and a community health worker on staff.
- Behavioral Health Services: Mental health counseling and psychiatric nurse practitioner
- Substance Use Disorder Treatment: Medication-assisted treatment with integrated social work
- Private Assistance Funds: To help reduce other barriers to care, such as diabetes supplies and transportation



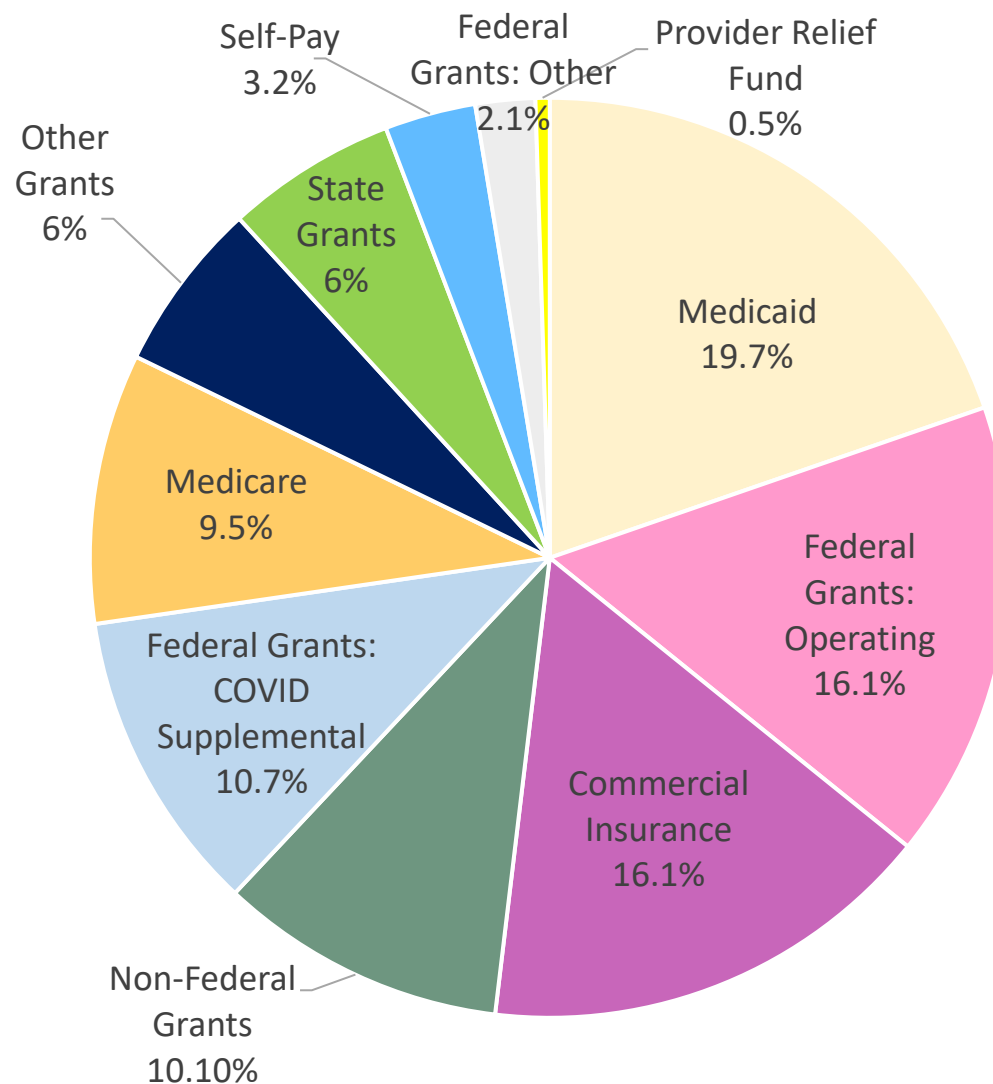
# Member Resources

# FQHC Funding

NH's FQHCs rely on patient revenue and grants to provide the wide array of health care and social services to their communities.

- ❖ Federal FQHC grants are awarded based upon a very competitive national application process.
- ❖ When FQHCs are awarded federal funds, they must meet strict program, performance, and accountability standards. Nearly 100 regulations are connected to FQHC status.
- ❖ Federal FQHC appropriations are not transferable to any other entity.
- ❖ Medicare and Medicaid FQHC reimbursement is a prospective payment.
- ❖ FQHCs bill commercial insurers just like any other primary care practice.
- ❖ No payer reimburses FQHCs for the full cost of providing integrated, comprehensive services.

## FQHC Sources of Revenue (2022)





# FQHC Federal Requirements

Federally qualified health centers (FQHCs) are health care practices that have a mission to provide high quality, comprehensive primary care and preventive services regardless of their patients' ability to pay or insurance coverage. FQHCs must successfully compete at a national level for FQHC designation and funding. Additionally, they must be located in federally-designated medically underserved areas and/or serve federally-designated medically underserved populations. FQHCs submit extensive financial and clinical quality data to their federal regulators annually, the Health Resources and Services Administration (HRSA), in a submission called UDS. HRSA regulators audit each FQHC with a multi-day site visit every three years.

Per Federal Regulations, FQHCs must comply with nearly 100 requirements. In summary, they must:

- Provide all required primary, preventive, enabling health services (either directly or through established referrals).
- Ensure a majority of board members for each health center are patients of the health center. The board, as a whole, must represent the individuals being served by the health center in terms of demographic factors such as race, ethnicity, and sex.
- Provide services at times and locations that assure accessibility and meet the needs of the population to be served.
- Have a system in place to determine eligibility for patient discounts adjusted on the basis of the patient's ability to pay. No patient will be denied services based on inability to pay.
- Maintain a core staff as necessary to carry out all required primary, preventive, enabling, and additional health services. Staff must be appropriately credentialed and licensed.
- Document the needs of their target populations.
- Provide professional coverage during hours when the health center is closed.
- Ensure their physicians have admitting privileges at one or more referral hospitals to ensure continuity of care. Health centers must firmly establish arrangements for hospitalization, discharge planning, and patient tracking.
- Have an ongoing Quality Improvement/Quality Assurance program.
- Exercise appropriate oversight and authority over all contracted services.
- Make efforts to establish and maintain collaborative relationships with other health care providers.
- Maintain accounting and internal control systems to safeguard assets and maintain financial stability.
- Have systems in place to maximize collections and reimbursement for costs in providing health services.
- Develop annual budgets that reflect the cost of operations, expenses, and revenues necessary to accomplish the service delivery plans.
- Have systems which accurately collect and organize data for reporting and which support management decision-making.
- Ensure governing boards maintain appropriate authority to oversee operations.
- Ensure bylaws and/or policies are in place that prohibit conflict of interest by board members, employees, consultants, and those who furnish goods or services to the health center.

Source: Summary of Health Center Program Compliance Manual Requirements. (August 2018) from Bureau of Primary Health Care, Health Resources and Services Administration,  
<https://bphc.hrsa.gov/programrequirements/index.html>

# FQHC Sliding Fee Scale

FQHCs must provide the patients in their service area access to services regardless of their ability to pay and must develop a schedule of fees or payments, called a sliding fee scale, for the services they provide. This is to ensure that the cost for services not covered by insurance are discounted based on the patient's ability to pay, ***for those with incomes below 200% of the Federal Poverty Level (FPL), which in 2023, is \$29,160 for a household of one.***

Ability to pay is determined by a patient's annual income and household size according to the most recent U.S. Department of Health & Human Services (HHS) Federal Poverty Guidelines. See [NHSC Sliding Fee Discount Schedule Information Package](#).

NH FQHCs discounted over \$13 million in 2022.

## HHS Federal Poverty Level Guidelines for 2023

Federal Poverty Level Guidelines for 2023 in 48 Contiguous States  
(includes New Hampshire)

Household/ Family Size	25%	50%	75%	100%	150%	200%
1	\$3,645	\$7,290	\$10,935	\$14,580	\$21,870	\$29,160
2	\$4,930	\$9,860	\$14,790	\$19,720	\$29,580	\$39,440
3	\$6,215	\$12,430	\$18,645	\$24,860	\$37,290	\$49,720
4	\$7,500	\$15,000	\$22,500	\$30,000	\$45,000	\$60,000
5	\$8,785	\$17,570	\$26,355	\$35,140	\$52,710	\$70,280
6	\$10,070	\$20,140	\$30,210	\$40,280	\$60,420	\$80,560
7	\$11,355	\$22,710	\$34,065	\$45,420	\$68,130	\$90,840
8	\$12,640	\$25,280	\$37,920	\$50,560	\$75,840	\$101,120

## FQHC Patients by Income

Poverty level is based on U.S. Department of Health and Human Services (HHS) 2023 Federal Poverty [Guidelines](#). See [chart](#) showing different multitudes of the FPL.

***Statewide, 70% of NH FQHC patients are at or below 200% of the FPL*** (or \$29,160 for a household of one). Over 40% of NH FQHC patients are at or below 100% of the FPL (or \$14,580 for a household of one).

FQHCs provide a sliding fee scale, payment plans, and discounted services to ensure no one is turned away.

# Legislative Resources



[NH General Court website](#)

[Find your NH Rep](#)

[Find your NH Senator](#)



[Watch House Committee hearings on YouTube](#)

[Watch Senate Committee hearings on YouTube](#)



[Upload remote testimony to the House](#)

[Register for or against Senate bills](#)



[View House remote testimony submissions](#)



[View Bi-State's NH public policy testimony](#)



[Who are my health center's legislators?](#)



# Acknowledgements

Special thanks to our New Hampshire Bi-State Members for providing high quality health care in their communities and valuable data for the Primary Care Sourcebook.

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Bi-State Primary Care Association, 525 Clinton Street Bow, New Hampshire 03304

[www.bistatepca.org](http://www.bistatepca.org)

[www.facebook.com/BiStatePrimaryCareAssociation](https://www.facebook.com/BiStatePrimaryCareAssociation)

[www.twitter.com/bistatepca](https://www.twitter.com/bistatepca)



Information and data in the print version of the NH Sourcebook is updated as of January 2024.  
For an online version of the New Hampshire Sourcebook and other resources, please visit [www.bistatepca.org](http://www.bistatepca.org),  
and click on the “New Hampshire Public Policy” tab.