

Bi-State Primary Care Association



Photo Credits: Amoskeag Health, Greater Seacoast Community Health, and Harbor Care

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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 330,074 patients at 177 locations ([2023 UDS](#); *location count includes: health centers, dental centers, combined centers, express care sites, school-based sites, and mobile units*). Bi-State's members include federally qualified health centers (FQHCs), community health centers (CHCs), Planned Parenthood health centers, clinics for the uninsured, and area health education centers (AHECs).

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 health care organizations, including FQHCs, RHCs, hospitals, physician practices, and dental 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 7 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.

Workforce & Recruitment

Bi-State's Recruitment Center has sourced 430 candidates interested in practicing in VT and NH over the last year. We helped recruit 38 providers to NH and VT between July 2023 – June 2024 (FY24).

Bi-State Primary Care Association's NH Members

Ammonoosuc Community Health Services, Inc.

COOS, GRAFTON COUNTIES

Edward D. Shanshala II, CEO
(603) 444-8223 · ed.shanshala@achs-inc.org
25 Mt. Eustis Road Littleton, NH 03561
www.ammonoosuc.org

Amoskeag Health

HILLSBOROUGH COUNTY

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

Community Health Access Network

ROCKINGHAM COUNTY

Gary Noseworthy, Executive Director
(603) 292-7721; (603) 691-5901
gnoseworthy@chan-nh.org
14 Manchester Square, Suite 235 Portsmouth, NH 03801
www.chan-nh.org

Coos County Family Health Services

COOS COUNTY

Ken Gordon, CEO
(603) 752-3669 Ext. 4018 · kgordon@ccfhs.org
54 Willow Street Berlin, NH 03570
www.coosfamilyhealth.org

Greater Seacoast Community Health

ROCKINGHAM, STRAFFORD COUNTIES

Dr. Jocelyn Caple, Interim CEO
(603) 516-2550 · JCaple@goodwinch.org
www.GetCommunityHealth.org

Harbor Care

HILLSBOROUGH COUNTY

Henry J. Och, President & CEO
(603) 821-7788 · h.och@harborcarenh.org
45 High Street Nashua, NH 03060
www.harborcarenh.org

Health Care for the Homeless Program

HILLSBOROUGH COUNTY

Anna Thomas, Executive Director, HCH
603-657-2700 · athomas@manchesternh.gov
Rossana Goding, Director, HCH
603-663-8716 · rossana.goding@cmc-nh.org
199 Manchester Street Manchester, NH 03103
www.catholicmedicalcenter.org/Community-Health

HealthFirst Family Care Center

BELKNAP, GRAFTON, MERRIMACK COUNTIES

Ted Bolognani, CEO
(603) 934-1464 Ext. 115 · tbolognani@hffcc.org
841 Central St., Ste 101 Franklin, NH 03235
www.healthfirstfamily.org

Lamprey Health Care

HILLSBOROUGH, ROCKINGHAM COUNTIES

Greg White, CEO
(603) 292-7214 · gwhite@lampreyhealth.org
207 South Main Street Newmarket, NH 03857
www.lampreyhealth.org

Mid-State Health Center

GRAFTON COUNTY

Robert MacLeod, CEO
(603) 238-3525 · rmacleod@midstatehealth.org
101 Boulder Point Drive Plymouth, NH 03264
www.midstatehealth.org

NH Area Health Education Center (NH AHEC)

GRAFTON, ROCKINGHAM COUNTIES

Kristina Fjeld-Sparks, Director
Kristina.E.Fjeld-Sparks@Dartmouth.edu
Geisel School of Medicine at Dartmouth
Remsen Building, Room 323 Hanover, NH 03755
[The New Hampshire Area Health Education Center](http://TheNewHampshireAreaHealthEducationCenter.org)

North Country Health Consortium

GRAFTON COUNTY

Lauren Pearson, Executive Director
(603) 259-4785 · lpearson@nchcnh.org
262 Cottage St., Suite 230 Littleton, NH 03561
www.nchcnh.org

North Star Health (Charlestown Health Center)

SULLIVAN COUNTY

Josh R. Dufresne, CEO
(802) 885-7620 · jdufresne@northstarfqc.org
250 CEDA Road Charlestown, NH 03603
www.northstarfqc.org/charlestown-health-center/

Planned Parenthood of Northern New England

CHESHIRE, HILLBOROUGH, ROCKINGHAM COUNTIES

Nicole Clegg, CEO
(603) 225-2925 · nicole.clegg@ppnne.org
18 Low Avenue Concord, NH 03301
www.plannedparenthood.org/planned-parenthood-northern-new-england

White Mountain Community Health Center

CARROLL COUNTY

Ken "JR" Porter, Executive Director
(603) 447-8900 Ext. 321
jrporter@whitemountainhealth.org
298 White Mountain Highway Conway, NH 03818
www.whitemountainhealth.org

Community Health Centers and Federally Qualified Health Centers: What's the difference?

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 Community Health Center members in NH comprise 10 FQHCs (not including Charlestown Health Center) and Planned Parenthood of Northern New England.**

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. **Bi-State's member, White Mountain Community Health Center, is an FQHC Look-Alike.**

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.

Comprehensive Services

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



Bi-State's Members Serve 1 in 13 Granite Staters

In NH, Bi-State represents 15 member organizations (including Charlestown Health Center) that serve over 102,000 patients at 67 locations. **NH's Community Health Centers provide primary care for 1 in 13 Granite Staters, including 1 in 4 uninsured individuals and 1 in 6 individuals enrolled in Medicaid.**

NH COMMUNITY HEALTH CENTERS:

Federally Qualified Health Centers

- NH's FQHCs encompass 63 sites (including Charlestown Health Center) in 9 counties.
- These FQHCs include White Mountain Community Health Center – an FQHC Look-Alike in Conway, NH.
- 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

- PPNNE has four health center locations in NH: Derry, Keene, Exeter, and Manchester.

NH PROGRAMS & SERVICES:

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



Photo credit: Southern NH AHEC

In 2023, NH FQHCs



- Served 92,418 patients in NH.
- Conducted 369,024 patient visits.
- Offered services in 9 counties, across 63 sites.

In 2023, NH CHCs



- Served 102,303 patients in NH.
- Conducted 383,195 patient visits.
- Offered services in all 10 NH counties, across 67 sites.

Economic Impact of Community Health Centers

Community Health Centers provide high-quality and cost-efficient health care to 1 in 13 Granite Staters. In addition to generating positive effects for patients and cost savings for payers, CHCs are a boon for the economies in which they operate. For example, NH CHCs directly employ over 1,100 full-time-equivalent employees; purchase medical and office supplies, furniture, and automobiles; and hire contractors. These economic activities within a health center have a ripple effect in the community, stimulating new business and benefiting local companies when health center employees spend wages on goods and services. CHCs can also enhance property values and stimulate real estate development.

CHCs also yield savings to the health care system by helping to keep the population healthy through cost-effective primary care services. Patients in health centers have been found to have 24% lower spending across all services (i.e., primary care, prescription drug spending, inpatient admissions, inpatient care, and emergency room use) than non-health center patients. Health centers provide preventive services – including cancer screenings and tobacco screening and cessation counseling – to help diagnose and manage complex, chronic conditions earlier when they are cheaper, and outcomes are better. The health centers' integrated care model prevents costly emergency department visits and unnecessary hospitalizations.

In 2021, Community Health Centers across New Hampshire were responsible for:

1,072
direct jobs

380
indirect jobs

420
supported jobs in
the region

1,872
NH jobs total

Economic impact was measured using 2021 IMPLAN Online from IMPLAN Group LLC, IMPLAN System (www.IMPLAN.com).

Learn more at www.caplink.org/how-economic-impact-is-measured.

[NACHC report](#): Economic Impact of Community Health Centers in the United States (March 2023)

AmericanProgress.org: The Importance of Community Health Centers

FQHCs serve Granite Staters regardless of insurance status or ability to pay.

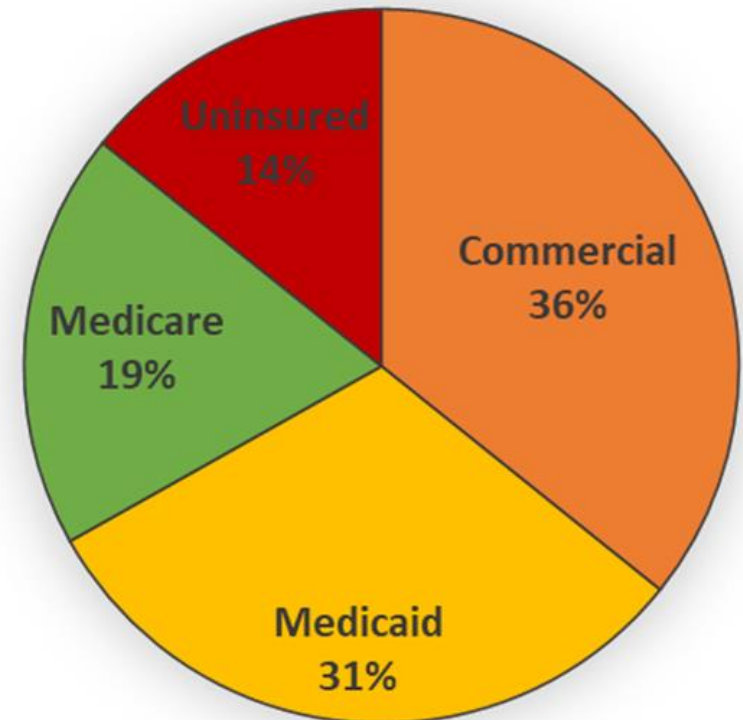
Ten NH FQHCs (not including Charlestown Health Center), including an FQHC Look-Alike, serve as the medical home for 92,418 Granite Staters who made 369,024 visits in 2023, *including approximately 36,000 telehealth visits and 75,000 mental health and substance use disorder visits.*

- Ammonoosuc Community Health Services (FQHC)
- Amoskeag Health (FQHC)
- Coos County Family Health Services (FQHC)
- Greater Seacoast Community Health (FQHC)
- Harbor Care (FQHC)
- Health Care for the Homeless Program (FQHC)
- HealthFirst Family Care Center (FQHC)
- Lamprey Health Care (FQHC)
- Mid-State Health Center (FQHC)
- White Mountain Community Health Center (FQHC LAL)

Three NH FQHCs are designated as Health Care for the Homeless Health Centers:

- Families First Health and Support Center (a Program of Greater Seacoast Community Health)
- Harbor Care
- Health Care for the Homeless Program

FQHC Patients by Payer in 2023



Federal law established the array of services FQHCs must provide, including basic primary care services, family planning services, immunizations, appropriate cancer screenings, pharmaceutical services, mental health services, substance use disorder treatment, translation services, and transportation services. NH's FQHCs care for 1 in 5 uninsured Granite Staters.

FQHCs improve access to integrated primary care services.



Photo credit: Amoskeag Health

FQHCs' ability to address a wide range of primary care issues, while also understanding and responding to community health-related social needs, makes them a crucial part of the nation's health care infrastructure. Over 92,000 Granite Staters rely upon NH's FQHCs for their primary care, pediatric care, oral health care, mental health services, pharmacy services, optometry, substance use disorder treatment, medication assisted treatment, family planning services, supportive services (i.e., nutrition education, translation, care coordination and case management), 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. Three NH FQHCs (Amoskeag Health, Coos County Family Health, and Lamprey Health Care) contract with the State of NH to provide family planning services throughout the state.

NH's FQHCs Serve:



19,542 children

~

~21% of patients are children



2,691 veterans



18,662 older adults

~

~20% of patients are older adults



28,726 Medicaid patients

~

FQHCs serve about 1 in 6 of all NH Medicaid enrollees.



Patients experiencing homelessness:

4,982

~

611 agricultural workers and dependents



13,168 uninsured patients

~

FQHCs serve about 1 in 5 of all uninsured Granite Staters.

FQHCs improve access to oral health in underserved areas.

All NH FQHCs offer dental access. Five 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 2023, NH FQHCs treated over 8,000 Granite Staters on-site, through school-based programs, and at mobile clinics; those patients accessed over 18,500 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. Four NH FQHCs 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.

Numbers reflect [2023 UDS FQHC](#) and FQHC Look-Alike data.

NH FQHC Dental Service Locations



Coos County Family Health Services

[Visit website](#) or call (603) 752-2424.

73 Main Street Berlin, NH 03570

141 Corliss Lane Colebrook, NH 03576



Greater Seacoast Community Health

[Visit website](#) or call (603) 749-2346.

8 Greenleaf Woods Drive Portsmouth, NH 03801

311 Route 108, Somersworth, NH 03878



Harbor Care

[Visit website](#) or call (603) 821-7788.

45 High Street, Nashua, NH 03060



Mid-State Health Center

[Visit website](#) or call (603) 744-6200.

100 Robie Road Bristol, NH 03222

202 Cottage Street Littleton, NH 03561



White Mountain Community Health Center

[Visit website](#) or call (603) 447-8900.

298 White Mountain Highway Conway, NH 03818



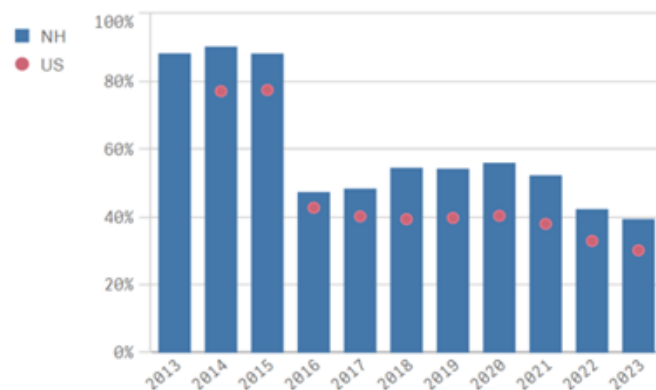
Photo credit: Greater Seacoast Community Health

NH's FQHCs exceeded national FQHC averages for many clinical quality measures in 2023.

FQHCs are committed to improving patient experience and health outcomes. In 2023, NH's FQHCs surpassed the national FQHC averages for quality patient outcomes including high blood pressure and diabetes control, kids' immunizations, and lifesaving screenings for breast, cervical, and colorectal cancers.

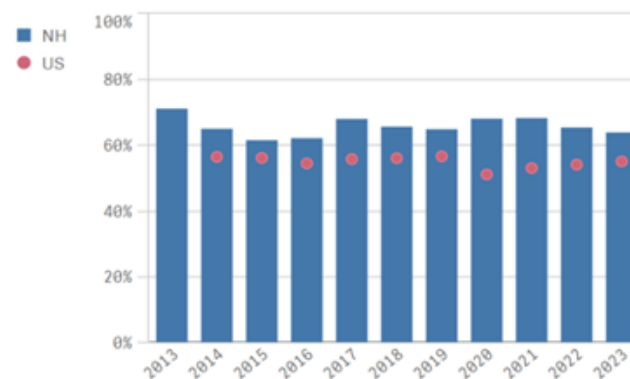
Children's Immunization Rate

IN 2023: **US: 30%**; **NH: 39%**



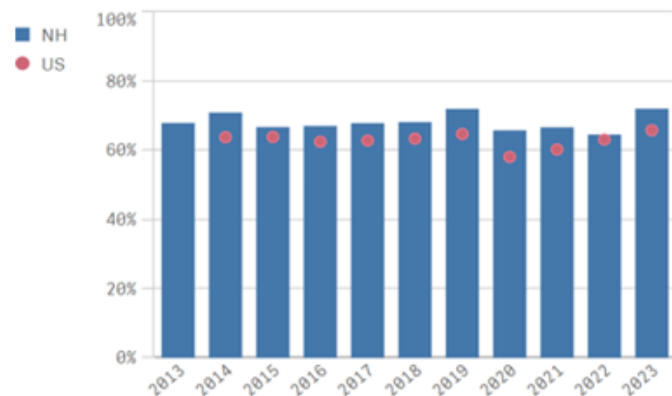
Cervical Cancer Screening Rate

IN 2022: **US: 55%**; **NH: 64%**



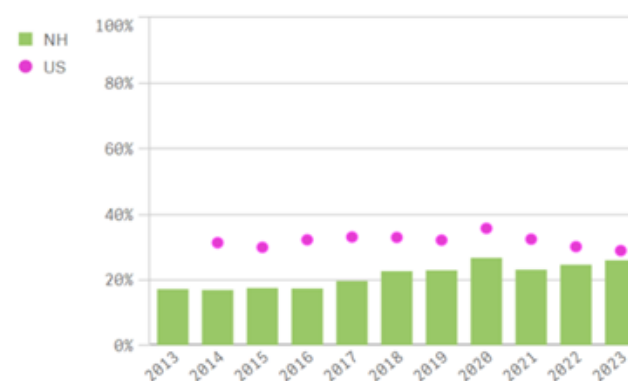
Hypertension Control Rate

IN 2023: **US: 66%**; **NH: 72%**



Diabetes Control Rate (Lower = Better)

IN 2023: **US: 29%**; **NH: 26%**



Health Centers strive to improve cancer screening rates

A story of cancer screening success:

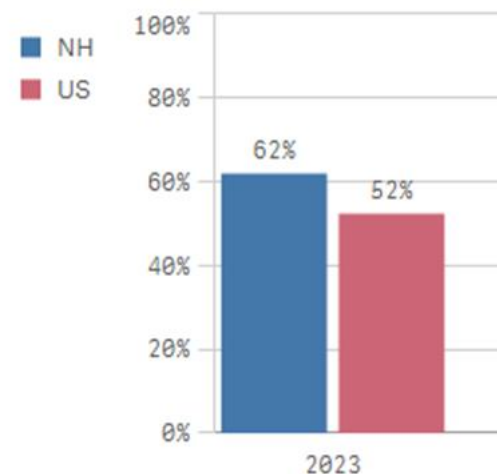
New Hampshire's Ammonoosuc Community Health Services (ACHS) has garnered national recognition for its exemplary cancer screening rates, placing it among the best in the country for Federally Qualified Health Centers (FQHCs). Its strategies are so effective that the Federal administration's Cancer Moonshot project sent representatives to ACHS to observe and learn from its model of care.

The key to ACHS's success lies in a proactive and data-driven approach spearheaded by its Continuous Health Improvement (CHI) team. This team meets monthly to review population-level quality data, ensuring cancer screenings remain a priority. ACHS's use of Electronic Health Records (EHR) is particularly advanced, allowing the team to run detailed reports identifying patients overdue for screenings. This enables ACHS to follow up with personalized outreach via phone or mail, encouraging patients to schedule needed screenings, such as mammograms and colonoscopies.

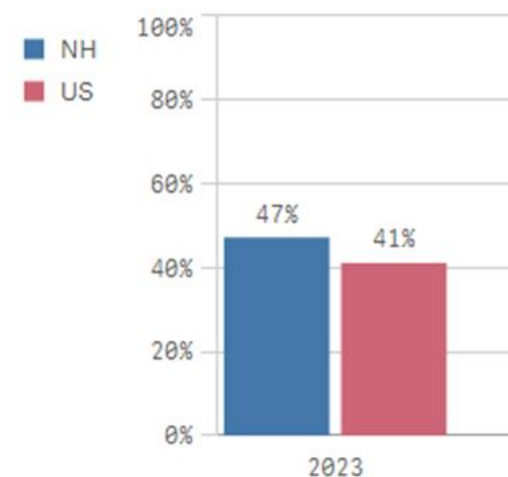
ACHS's EHR system is also integrated with recall mechanisms, so if a preventive service is ordered but not completed, the team ensures patients are reminded to follow through. During each patient visit, age- and sex-appropriate screening reminders automatically populate in the EHR, making it easier for providers to address these critical health services on the spot.

These efforts reflect ACHS's dedication to early detection and prevention, making it a model for others across the country.

Breast Cancer Screening Rate



Colorectal Cancer Screening Rate



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 67 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 New Hampshire members had more than 383,195 visits in 2023.

- 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

2025 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 community health centers provide to the Granite State. We accomplish our goals by partnering with the State, health care providers, non-profit advocacy organizations, and business leaders.

New Hampshire's primary care system 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 2025 New Hampshire 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 New Hampshire.

2025 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 at-risk populations;
- ❖ Advance policy changes that promote optimal health for all Granite Staters;
- ❖ Support public health policies that protect and foster affordable access to immunizations to keep individuals and our communities safe from vaccine-preventable diseases;
- ❖ Engage in statewide efforts to lower health care costs and improve health insurance affordability;
- ❖ Increase investments in health care workforce development and recruitment;
- ❖ Seek development of an uncompensated care fund to support safety-net providers;
- ❖ Increase investments in the State's Medicaid program and promote the permanence of the Granite Advantage Health Care Program (Medicaid Expansion);
- ❖ Continue policy efforts to enact state-level protections for health centers' 340B savings that allow low-income Granite Staters to access affordable, life-saving medications;
- ❖ Continue ongoing collaboration with the State and enhance State support for integrated primary and preventive care and reproductive health care services; and
- ❖ Support expansion of telehealth and reimbursement parity for services provided via telehealth.

Long-Term Solution: Uncompensated Care Fund



NH relies on small nonprofit organizations such as the community health center network to provide health care services to vulnerable populations and in rural areas. Our health centers are experiencing an increase in the number of uninsured patients and the number of patients who must rely on a sliding fee discount to access care. The creation of a State Uncompensated Care Fund for safety-net health care organizations, such as community health centers, would mitigate some of the unreimbursed costs associated with providing care for uninsured individuals. Eleven states, including Maine and Massachusetts, have implemented an uncompensated care fund.

Increased Investments in NH's Medicaid Program



As the health care home for 1 in 6 Medicaid beneficiaries, NH's community health centers share an enduring partnership with the State Medicaid program. This program not only provides essential health insurance for tens of thousands of health center patients, but it also plays a critical role in the financial stability of health centers, accounting for 19% of their revenue. In past legislative sessions, Bi-State and our partners successfully advocated for systemic rate increases for Medicaid providers and long-term reauthorization of the Granite Advantage Health Care Program (Medicaid Expansion). We will continue to focus our efforts on protecting access to health insurance through Medicaid Expansion and implementing rate increases for the Medicaid program each budget cycle.



Expanding NH's Health Care Workforce

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 the state and health care organizations address systemic workforce challenges. Since its inception, the Coalition's policy and legislative proposals have been supported by more than 50 organizations. As a result of our Coalition's work, the last state budget included \$300 million in Medicaid rate increases for all providers except hospitals; we will soon have certified community health workers eligible to receive Medicaid reimbursement for their services; nursing professionals can access an additional \$300,000 in State Loan Repayment Program funding; and LNAs can now become certified in medication administration after one year of practice rather than two.

During the 2025 legislation session, our efforts will focus on increasing Medicaid rates and investing in the Public-Private Health Care Workforce Recruitment and Retention Hub. This model will allow the State to leverage its investments with those of for-profit organizations and rely on the expertise of health care leaders across the Granite State to accomplish long-established goals.

Bi-State's 2025 Workforce Goals include:

- Investment in the Public-Private Health Care Workforce Recruitment and Retention Hub
- Investment in the NH AHECs to increase the number of entry-level clinical staff and career ladder trainings
- Expansion of the Student Loan Repayment Program to benefit non-clinical staff at eligible health care organizations
- Investment in NH Needs Caregivers
- Investment in the Family Medicine Residency Program at a Teaching Health Center (Coos County Family Health Services' Teaching Health Center Program)
- Support for Nursing Preceptors to mentor and train new nurses
- Support for DHHS personnel needs to minimize contract management requirements of the State
- 3% across-the-board Medicaid rate increase for all providers and targeted Medicaid rate increases

Bi-State's Recruitment Center

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, 2023 and June 30, 2024, the Recruitment Center identified 430 clinicians considering practice in Vermont or New Hampshire within the next two years. We successfully placed a family medicine physician, 2 internal medicine physicians, 2 OBGYNs, 5 physician specialists, 21 dentists, 3 family nurse practitioners, 3 physician assistants, and 1 social worker.

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 150 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.



Bi-State's New Hampshire Member Profiles



Ammonoosuc Community Health Services, Inc.

Edward D Shanshala II, MSHSA, MSED
Executive Director/Chief Executive Officer
603-444-2464 • www.ammonoosuc.org

Five locations:

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



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-eight percent of our patients have household incomes at or below 200% of the federal poverty level ([\\$30,120 for a household of one](#)).

Insurance Status (2023):

4% were uninsured.
16% were covered by Medicaid.
36% were covered by Medicare.
44% were covered by private insurance.

ADULTS AND CHILDREN SERVED (2023)

Total Patients: 8,268; Medical Patients: 8,082
Mental Health Patients: 914
Patients with Hypertension: 42%
Patients with Diabetes: 12%
Total Visits (includes all services): 24,948
Mental Health Visits: 6,725 (27%)
475 Veterans Served (6%)

A GROWING DEMAND FOR SERVICES (2019-2024)

25% increase in mental health patients

[View 2023 UDS data.](#)

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: 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
2024: Notable recognition earned the HRSA National Quality Leader (NQL) Cancer Screening badge, Health Center Quality Leader Badge, Advancing HIT for Quality Badge and the Addressing Social Risk Factors Badge

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
ProHealth, 2 Wall Street, Manchester, NH

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: Approx. 76% of Amoskeag Health patients are known to be at 200% of the Federal poverty level or below ([\\$30,120 for a household of one](#)).

Outpatient Insurance Status

7% covered by Medicare; 45% covered by Medicaid, 27% uninsured; and 21% covered by private insurance.

Languages Spoken

40% (6,430 patients) do not use English as their primary language. The predominant non-English languages are Spanish, Portuguese, Arabic, Nepali, Swahili, and French.

Number of Adult and Children Served in 2023:

Total Patients: 16,227
Total Visits: 65,353

Increase in Demand for Services (2019-2023)

1.75% Increase in Patients Served

[View 2023 UDS data.](#)

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: \$25,695,305; Employees: 197 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 Management

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

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
- HealthFirst 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-five percent of our patients have household incomes below 200% of the federal poverty level ([\\$30,120 for a household of one](#)).

Insurance Status (2023):

15% (1,957) were uninsured.
18% (2,394) were covered by Medicaid.
31% (3,994) were covered by Medicare.
36% (4,647) were covered by private insurance.

NUMBERS OF CHILDREN AND ADULTS SERVED

Total Patients: 12,502; Total Visits: 47,841
Serving 883 Veterans
Patients with Hypertension: 38%
Patients with Diabetes: 12%

[View 2023 UDS data.](#)

FINANCIAL INFORMATION

Sliding Fee Discounts (2023): \$209,324.20
Employees: 115 FTEs

Coos County Family Health Services

www.coosfamilyhealth.org · Ken Gordon, Chief Executive Officer

NH Locations:

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 Under Construction
6 First Street Colebrook, NH 03576 · 603-237-4262
73 Main Street Berlin, NH 03570 · 603-752-2424
141 Corliss Lane, Colebrook NH 03576 · 603-237-9195
167 Main Street, Suite 2 Gorham, NH 03581 · 603-466-3500

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: 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
2024: Launch of HealthCare Express. Excited to announce that construction has begun on our new dental clinic in Berlin.

A GROWING DEMAND FOR SERVICES (2019-2023):

43% increase in Substance Use Disorder patients
78% 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
- Acupuncture

Goodwin
Community Health

Families First

Lilac City
Pediatrics



Greater Seacoast Community Health

Dr. Jocelyn Caple, Interim CEO

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](#)
Dover, Exeter, Portsmouth, Rochester
- [Somersworth Student Health Center](#)
Somersworth High School

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 (2023)

- Insurance status: 40% Medicaid; 38% private; 14% uninsured; 8% Medicare
- Residence: 26% Rochester; 15% Dover; 11% Somersworth; 9% Portsmouth; 33% other New Hampshire; 9% Maine
- Patients experiencing homelessness: 681
- Veterans: 317

Budget and Staffing (2023)

- Agency Operating Budget: \$22.4 million
- Employees: 182 FTEs

People Served (2023)

- Total Patients Served: 13,315
 - Medical: 10,449 patients, 35,949 visits
 - Dental: 2,272 patients, 4,911 visits
 - Mental Health: 1,244 patients, 7,980 visits
 - Substance Use: 328 patients, 1,170 visits
- Served in Home Visits, Parenting Classes, Family Programs: 1,100 people, 6,150 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.
- **1980:** 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 centers add medication-assisted treatment and other SUD-recovery services.
- **2018:** The health centers merge under the legal name Greater Seacoast Community Health.
- **2020:** Began hosting resident physicians; first community health center in NH to do so.
- **2024:** Opened first school-based health clinic in NH to offer both primary and behavioral health care.

SERVICES

PRIMARY & PRENATAL CARE

- Primary care for adults
- Pediatric care, with early-childhood mental health and development specialist
- Prenatal care
- Breast and cervical cancer screenings

DENTAL CARE

- On-site hygiene, treatment and urgent care

BEHAVIORAL HEALTH & 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

OUTREACH

- Mobile health care for people experiencing homelessness and others barriers
- School-based oral health education, screening, cleaning, sealants
- School-based primary and behavioral health care (Somersworth middle/high schools)

... AND MORE

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

About Us: Harbor Care Health and Wellness Center (HCHWC) is the Federally Qualified Health Center of Harbor Care. 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 2,653 unique patients through 21,803 visits annually with primary care, dental, pharmacy, mental health, HIV/AIDS, and substance use services.

Socioeconomic Status: Of the patients we serve, 56% are homeless, and 78% are below 200% of the federal poverty level ([\\$30,120 for a household of one](#)). Of our total visits, 32% were for mental health or substance use disorder treatment.

Insurance Status (2023): Of the patients we serve, 17% are uninsured, 12% are covered by Medicare, 22% are covered by private insurance, and 49% are covered by Medicaid.

Financial Information (2023):
 Full-Time Equivalent: 74.2 FTEs
 Total Uncompensated Care: \$1.2 million

Numbers of Patients Served (2023):
 Unique Patients: 2,653
 Total Visits: 21,803
 Dental Visits: 605
 Mental Health Visits: 1,056
 Substance Use Visits: 484

Highlights in 2024/2025:

Harbor Care Health and Wellness Center (HCHWC) is a nationally accredited Patient-Centered Medical Home and the only health center in New Hampshire recognized by the National Committee for Quality Assurance with Distinction in Behavioral Health Integration.

HCHWC delivers integrated social and healthcare services to Greater Nashua's most vulnerable residents through in-person and virtual care at clinics, in partnership with local schools, and in community settings. To ensure accessibility, the Health Center offers a sliding-fee scale, making healthcare affordable for all.

The center engages bilingual community health workers to promote awareness about COVID-19 vaccines, flu shots, primary care, pediatric and women's health services, and chronic condition management. HCHWC's community services team also helps uninsured individuals enroll in Medicaid, Medicare, and other insurance programs.

HCHWC collaborates with other Harbor Care programs to provide comprehensive, patient-centered care. Its services empower individuals through supportive housing, veteran services, primary care, dental care, mental health treatment, substance use recovery, HIV/AIDS services, and Nashua's only not-for-profit pharmacy.



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
- Medication-Assisted Treatment (MAT) including withdrawal management services
- Substance use disorder outpatient services including Intensive Outpatient Program (IOP) and High Intensity Outpatient Program (HIOP)
- 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 · 603-657-2700
Rossana Goding, Director, HCH
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 (2023)

Total Patients: 1,238
Medical Visits a year per Medical Patient: 3.10
Total Visits: 3,835 (includes medical, mental health, oral health, substance use disorder treatment, & enabling service visits)
% Racial and/or Ethnic Minority Patients: 39%
% Best Served in Language Other than English: 21%
% Substance Use Disorder Patients: 17%
Patients Served Who Are Homeless: 96%

Socioeconomic Status (2023)

Ninety-six percent of patients have incomes below 200% of the Federal Poverty Level ([\\$30,120 for a household of one](#)).



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



Insurance Status (2023)

9% have private insurance; 19% are uninsured; 21% are covered by Medicare; and 51% 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.



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



HealthFirst Family Care Center

Ted Bolognani, Chief Executive Officer

Locations:

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

Satellite locations:

- 17 Church Street, Laconia, NH
- Isaiah Café, 100 New Salem Street, Laconia, NH
- Archways, 175 Central Street, Franklin, NH

www.healthfirstfamily.org

HIGHLIGHTS IN HEALTHFIRST HISTORY

- 1995: Established with funding from the NH DHHS
- 1997: Received designation as an FQHC 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 increased access to patients for urgent issues by 100%.
- 2022: HealthFirst expanded its school-based counseling services by 100%, serving 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 at the Mascoma Community Health Center in Canaan, NH.
- 2024: The Laconia health center completed an extensive interior renovation and exterior façade upgrade, making patient access safer and more efficient and modernizing the exam rooms and lobby.

2024 Specific Highlights

- HealthFirst’s Community Resource Specialists (CRS) are onsite at each location and specialize in connecting patients with regional resources, including housing support, insurance, transportation, food insecurity, and more.
- The BH Team added another full-time BH Clinician in the 23-24 school year who doubles as the school-based coordinator role. HF now works in 5 school districts (22 schools) and serves over 110 students annually.
- To expand services, HF supports a robust behavioral health internship program that serves students from graduate-level programs. In the 23-24 fiscal year, HF supported 4 interns, with 5 more slated for the 24-25 school year.



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 ([\\$30,120 for a household of one](#)).

Insurance Status (2023)

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: 7,497; Total Visits: 20,329
- Medical Visits a year per Medical Patient: 2.71
- Patients with Hypertension: 39%;
- Patients with Diabetes: 18%
- Patients Best Served in Language Other Than English: 5%

Financial Information

- Agency Budget: \$12,860,074; Employees: 98 FTEs
- Total Uncompensated Care: \$498,130
- Sliding Fee Discounts: \$127,544;
- Uninsured Clients Served: 387

A Growing Demand for Services (2019-2023)

- 48% increase in Total Patients Served
- 251% increase in SUD Patients Served

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
- Community Resource Specialists at all Sites 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
- Psychiatric Nurse Practitioner
- School-Based Behavioral Health Counseling for K-12 Students



Lamprey Health Care



Greg White, Chief Executive Officer
Sue Durkin, 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 & Shelter:
603-889-7770 2 Quincy Street,
Nashua, NH 03060

Healthy Together: 603-434-1577 10
Tsienneto Road, Derry, NH 03038
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: 75% of Lamprey Health Care patients with known income are at or below 200% of the Federal poverty level ([\\$30,120 for a household of one](#)).

Insurance Status: In 2023, aggregating figures from all three centers showed 19% were uninsured; 24% were covered by Medicaid; 14% were covered by Medicare; and 43% had private insurance. However, in the Nashua Center, 29% of patients are uninsured.

NUMBERS SERVED (2023)

Total Patients: 15,801; Patient Visits: 51,853

FINANCIAL INFORMATION (2023)

Agency Revenue: \$22.2 million; Employees: 195
FTEs: 157



HIGHLIGHTS IN LAMPREY HEALTH CARE HISTORY

- 2024: Nurse Practitioner Fellowship Program received accreditation.
- 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 1,563 patients
- **Prenatal Care:** Includes care management for 307 patients
- **Certified Diabetes Educator:** Diabetes education and treatment for 1568 patients
- **Asthma Care Management:** Asthma education and treatment for approximately 386 patients
- **Breast & Cervical Cancer Program:** Enrolled 355 women age 50+
- **Medication Assisted Treatment Program:** Provided care and resources to patients struggling with opioid use and alcohol use disorder.
- **Care Management:** 992 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 People without Stable Housing:** Provided health & care management services to 505 patients
- **Health Care for Veterans:** Provided health & care management services to 610 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

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

Chiropractic and Advance Healing: 101 Boulder Point Dr., STE 2 Plymouth, NH 03264 • 603-536-5533

Diagnostic and Care Center: 28 Main Street, Plymouth, NH 03264 • 603-536-8585

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

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

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

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 ([\\$30,120 for a household of one](#)).

Insurance Status: 6% were uninsured; 18% were covered by Medicaid; 30% were covered by Medicare; and 46% had private insurance.

Number of Adults and Children Served (2023)

Total Patients: 12,674; Total Visits: 47,650

FINANCIAL INFORMATION (2023)

Agency Revenue: \$13.3 million

Employees: 173 FTEs; 199 individuals

Full-Time Employees: 155



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

2024: Opened Diagnostic Imaging and Same-Day Care Center in Downtown Plymouth; added Chiropractic Care and Advanced Healing to services

A GROWING DEMAND FOR SERVICES (2019-2023)

7.5% increase Total Patients Served

41% increase in Dental Patients Served

58% 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 Treatment (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
- 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, MRI, and CT Scan)
- Chiropractic Care
- Visiting Specialty Services Available including Orthopedics; Podiatry; ENT; Sports Medicine
- Free Breast and Cervical Cancer Program
- Free Colon Cancer Screening Navigation





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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



North Country Health Consortium (NCHC)
 Lauren Pearson, Executive Director
NCHCNH.org
 262 Cottage Street, Suite 230 Littleton, NH 03560
 603-259-3700

At North Country Health Consortium, our mission is to improve the health and well-being of Northern Grafton and Coos County communities through collaborative initiatives. As a nonprofit based in Littleton, we focus on systemic health solutions rather than providing direct care. By partnering with schools, healthcare providers, law enforcement, and other key organizations, we develop programs that educate, empower, and drive positive change in community health. Our goal is to build stronger, healthier communities across the North Country through innovative, collaborative approaches.



- 1997** | Four organizations form the North Country Health Information Network to provide affordable internet connectivity. This collaborative platform evolves into the North Country Health Consortium (NCHC).
- 2001** | Regional Public Health Networks established.
Northern NH Area Health Education Center (NNHAHEC) founded.
- 2005** | The Molar Express mobile dental clinic begins operations.
- 2007** | The North Country Substance Misuse Prevention Network is founded.
- 2010** | NNHAHEC launches Live, Learn, Play in Northern NH, a program to attract medical professionals to the region.
- 2014** | The Way2Wellness project begins; it will go on to introduce NCHC's first Community Health Workers (CHWs).
- 2015** | The Substance Misuse Prevention Network coordinates responses to the opioid crisis, collaborating with coalitions, schools, and law enforcement on community programming.
- 2019** | AskPETRA launches to connect individuals with Substance Use Disorder (SUD) to resources.
- 2020** | The NNH Public Health Network leads regional COVID-19 response and vaccination efforts.
- 2022** | NCHC begins operating the Northern NH Mobile Clinic Van to provide mobile health services across the region.
- 2024** | In partnership with local healthcare providers, NCHC works as part of the RMOMS initiative, employing CHWs cross-trained as doulas.

Program Areas at NCHC

Community Health Worker (CHW) Programs

NCHC offers robust Community Health Worker (CHW) programs designed to connect underserved populations to essential health education, disease prevention, and social support services. With 9 dedicated CHWs, our team includes 3 Doulas providing pregnancy care, 3 AskPETRA Recovery Coaches offering substance use support, and 3 Ways2Wellness CHWs focused on chronic disease management for adults and seniors. These CHWs play a critical role in building trust, closing care gaps, and improving health outcomes across the North Country.

North Country Public Health Network

The North Country Public Health Network (NCPHN) is one of 13 Regional Public Health Networks in New Hampshire, working in partnership with NH Department of Health and Human Services. NCPHN focuses on enhancing public health infrastructure and services in the North Country by collaborating with medical, behavioral, and social care providers, first responders, and community members. Services include public health emergency preparedness, substance misuse prevention, Continuum of Care initiatives, and disease prevention efforts. NCPHN's mission is to protect and improve the health of all North Country residents.

Substance Misuse Prevention Network

The North Country Regional Prevention Network, part of the North Country Public Health Network, collaborates with schools and local organizations to prevent youth substance misuse and reduce the impacts of alcoholism and drug addiction. Working alongside 12 other state prevention networks, the North Country team implements proven strategies to improve school climates and mentor students. Guided by the Public Health Advisory Council (PHAC), the network's mission focuses on addressing substance misuse locally while aligning with state-level initiatives to combat the broader consequences of addiction.

Northern NH Area Health Education Center

The Northern New Hampshire Area Health Education Center (NNH AHEC), a program of North Country Health Consortium since 1999, supports health and human service organizations and educational institutions in Coos, Carroll, Grafton, and Belknap counties. NNH AHEC offers continuing education, health careers development resources, and medical database access. It also provides community-based support for health profession students and initiatives to improve healthcare quality. As one of two federally designated AHEC centers in NH, NNH AHEC focuses on rural workforce development in collaboration with The Dartmouth Institute.



Charlestown Health Center

North Star Health Charlestown Health Center

250 Ceda Road Charlestown, NH 03603
603-826-5711

www.northstarfhc.org/charlestown-health-center



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 43,969, is rural and the second least populated county in the state.

- 2017-2021 median household income: \$70,788
- Per capita income in past 12 months: \$39,087
- Percent of persons in poverty: 9.9%
- Percent of persons without health insurance, under age 65: 7%
- Percent of persons with a disability, under age 65: 11.3%
- Veterans: 3,141

Source:

www.census.gov/quickfacts/sullivancountynewhampshire

NUMBER OF PATIENTS SERVED

Total Patients Served in 2023:
5,712

Total Patient Visits in 2023:
16,990

GENERAL INFORMATION

Employees: 20

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, 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 St., Manchester, NH 03104 · 603-669-7321

www.ppnne.org

ABOUT OUR NH PATIENTS in FY24:

Total NH patients served: 9,885

Total NH visits: 14,171

Where They Live: Patients accessing our care in-person live close to Derry, Exeter, Keene, or Manchester, NH or live near our White River Jct., VT and St. Johnsbury, VT health centers.

Patients accessing our care remotely through Telehealth live across ME, NH, and VT.

Socioeconomic Status: 60% of our patients are living at or below 200% of the Federal Poverty Level ([\\$30,120 for a household of one](#)).

Insurance Status:

- 30% Self Pay
- 48% Commercial Insurance
- 21% Government (includes Medicaid, Medicare, NH Healthy Families, and NH Family Medical Assistance Program)
- <1% Other

FINANCIAL INFORMATION

Agency Budget: \$31.7M (supports ME, NH, & VT)

Employees agency-wide: 200

Free or discounted care in NH: Over \$1.9 million

HIGHLIGHTS IN PPNE 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 NH (Keene), Health Options (Manchester), Southern Coastal Family Planning, and Rockingham County Family Planning

2020-2022: 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 to expand access.

2022-2023: Expanded access to abortion by offering medication abortion via telehealth and in-person at an additional health centers – Derry, NH & St. Johnsbury, VT.

2024: PPNNE sees a 10% increase in patient visits, expands medication abortion to more sites, and adds vasectomy service to Manchester site.

NUMBER OF TOTAL PATIENTS SERVED ACROSS ME, NH AND VT IN FY24:

Medical care users: 32,965 patients

Medical care visits: 47,011

68,246 STI screenings

7,245 pregnancy tests

2,240 breast exams

\$4.6 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, Portland and Manchester 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.



Whole Person. Whole Family. Whole Valley.

White Mountain Community Health Center

Kenneth "JR" Porter, Executive Director
298 White Mountain Highway, Conway, NH 03818
603-447-8900 • 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: Seventy-seven percent of White Mountain Community Health Center patients are at or below 200% of the federal poverty level ([\\$30,120 for a household of one](#)).

Insurance Status (2023)

8% were covered by Medicare.
14% were uninsured.
38% had private insurance.
40% were covered by Medicaid.

FINANCIAL INFORMATION (2023)

Budget: \$2,174,793; Employees: 22.74 FTEs
Charity care provided (2024): \$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 (2023)

Health Care Users: 2,243; Patient Care Visits: 9,356
Dental patients: 594 (26% of patients)
Patients Served with Hypertension: 28%

HIGHLIGHTS IN WMCHC HISTORY

1968: The Children & Youth Project opens to offer pediatric care to low-income families

1988: The Family Health Centre opens to offer birth control, prenatal care, and other sexual & reproductive health care

2001: The two organizations merge to form White Mountain Community Health Center, adding primary care for all ages.

2005: Children's dental services are added

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

2018: Designated an FQHC Look-Alike

2021: Comprehensive care coordination team established

2022: Expanded behavioral health services

2023: Brought on staff fluent in Spanish to serve growing local population of patients best served in Spanish.

2024: Added gender-affirming hormone therapy for adults.

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 dental; adult hygiene, x-rays and fillings
- **Sexual & Reproductive Health:** Confidential services for teens and adults
- **Behavioral Health Services:** Mental health counseling and psychiatric services
- **Substance Use Disorder Treatment**
- **Dietician Counseling**
- **Care Coordination:** Resource connection, case management, and other patient support for complex medical situations and social drivers of health
- **Private Assistance Funds:** Private funds to help reduce other barriers to care, such as transportation, medications, and diabetes supplies.



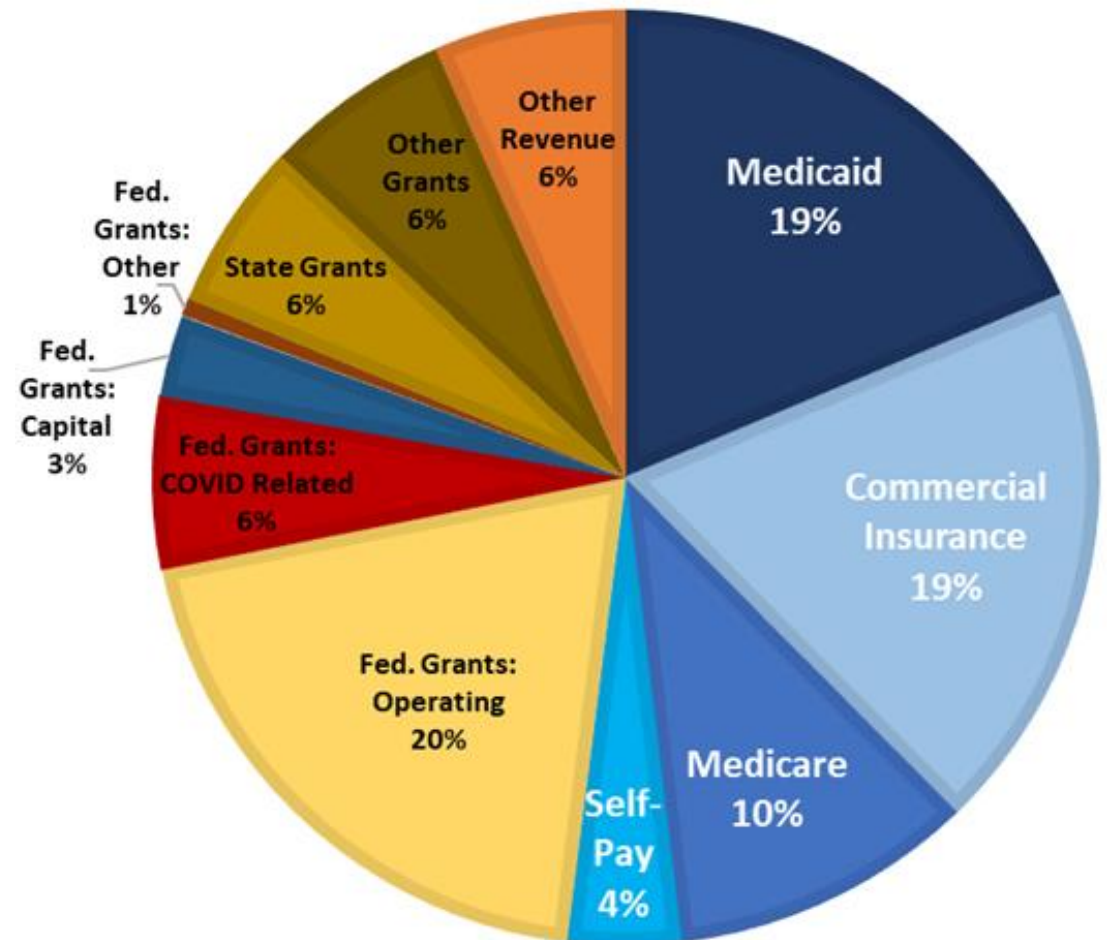
Member Resources

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 (2023)



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.

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 2024, is \$30,120 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 \$11 million in health care services in 2023.

HHS Federal Poverty Level Guidelines for 2024

Federal Poverty Level Guidelines for 2024 in 48 Contiguous States (includes New Hampshire)

Household/ Family Size	135%	138%	150%	175%	180%	185%	200%
1	20,331.00	20,782.80	22,590.00	26,355.00	27,108.00	27,861.00	30,120.00
2	27,594.00	28,207.20	30,660.00	35,770.00	36,792.00	37,814.00	40,880.00
3	34,857.00	35,631.60	38,730.00	45,185.00	46,476.00	47,767.00	51,640.00
4	42,120.00	43,056.00	46,800.00	54,600.00	56,160.00	57,720.00	62,400.00
5	49,383.00	50,480.40	54,870.00	64,015.00	65,844.00	67,673.00	73,160.00
6	56,646.00	57,904.80	62,940.00	73,430.00	75,528.00	77,626.00	83,920.00
7	63,909.00	65,329.20	71,010.00	82,845.00	85,212.00	87,579.00	94,680.00
8	71,172.00	72,753.60	79,080.00	92,260.00	94,896.00	97,532.00	105,440.00
9	78,435.00	80,178.00	87,150.00	101,675.00	104,580.00	107,485.00	116,200.00
10	85,698.00	87,602.40	95,220.00	111,090.00	114,264.00	117,438.00	126,960.00
11	92,961.00	95,026.80	103,290.00	120,505.00	123,948.00	127,391.00	137,720.00
12	100,224.00	102,451.20	111,360.00	129,920.00	133,632.00	137,344.00	148,480.00
13	107,487.00	109,875.60	119,430.00	139,335.00	143,316.00	147,297.00	159,240.00
14	114,750.00	117,300.00	127,500.00	148,750.00	153,000.00	157,250.00	170,000.00

FQHC Patients by Income

Poverty level is based on U.S. Department of Health and Human Services (HHS) 2024 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 \$30,120 for a household of one). Over 40% of NH FQHC patients are at or below 100% of the FPL (or \$15,060 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

www.facebook.com/BiStatePrimaryCareAssociation



Information and data in the print version of the NH Sourcebook is updated as of January 2025.

For an online version of the New Hampshire Sourcebook and other resources, please visit

<https://bistatepca.org/public-policy/>.