

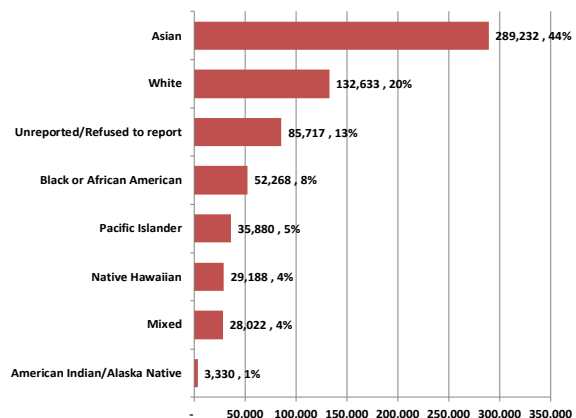
An Analysis of AAPCHO Member Health Centers: UDS 2018

Since 1987, the Association of Asian Pacific Community Health Organizations (AAPCHO), a national, not-for-profit organization has represented health centers that provide quality, comprehensive health services that are financially affordable, linguistically accessible and culturally appropriate for Asian Americans (AAs), Native Hawaiians, and Pacific Islanders (NHPs). AAPCHO's community-based organizations promote advocacy, collaboration, and leadership that improve the health status and access for medically underserved AAs and NHPs. AAPCHO member health centers provide services that are uniquely appropriate to their patient populations, including:

- Culturally and linguistically appropriate health care services
- Comprehensive primary medical care including internal medicine, prenatal care, pediatric, nutrition, nursing, pharmaceuticals, optometry, and dentistry
- Assessment of Social Determinant of Health (SDH) and Enabling Services (ES)
- Services in over 15 languages and dialects including Cantonese, Hawaiian, Ilocano, Korean, Mandarin, Samoan, Tagalog and Vietnamese

AAPCHO MEMBER DEMOGRAPHICS

In 2018, AAPCHO served over 650,000 patients at 28 Federally Qualified Health Centers (FQHCs). AA and NHP patients accounted for 62% of those served, with some AAPCHO FQHCs serving as high as 100% of AAs and NHPs.



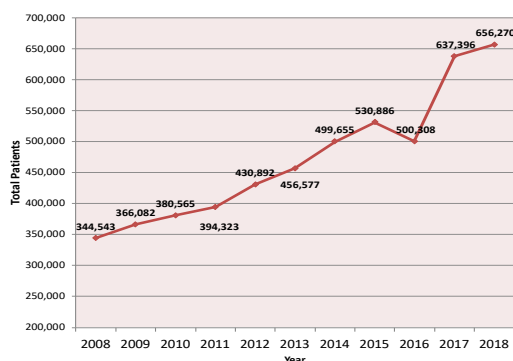
*AAPCHO has 19% Latino patients (% known for ethnicity)

AAPCHO FQHCS, 2018

AAPCHO's membership includes FQHCs and other community health organizations. This fact sheet examines only FQHCs who report data to the Bureau of Primary Health Care Uniform Data Systems (UDS). AAPCHO currently serves 28 FQHCs.

TOTAL AAPCHO PATIENTS, 2008 - 2018

The total number of patients served increased 97% between 2008 and 2018. AAPCHO's average number of patients per site increased 13% in the same period.



TERMINOLOGY

ASIAN

Refers to people having origins in any of the original peoples of the Far East, Southeast Asia, and Indian subcontinent.

PACIFIC ISLANDER

Refers to people having origins in any of the original peoples of Guam, Samoa, or other Pacific Islands.

NATIVE HAWAIIANS

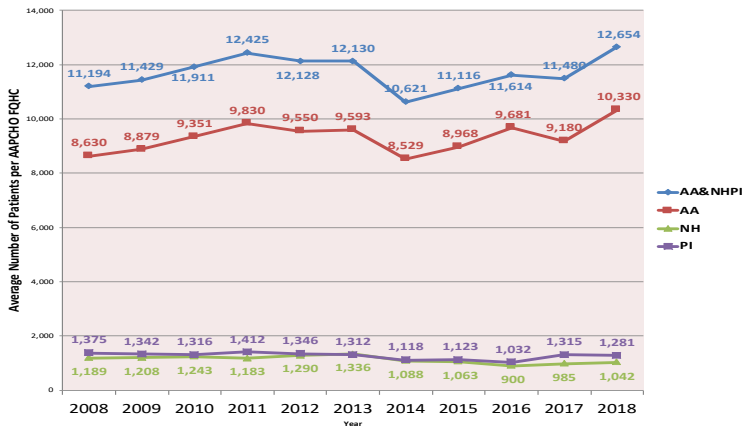
Refers to people with native origins in the original peoples of Hawaii.

MORE INFORMATION

For more information, please contact research@aapcho.org.

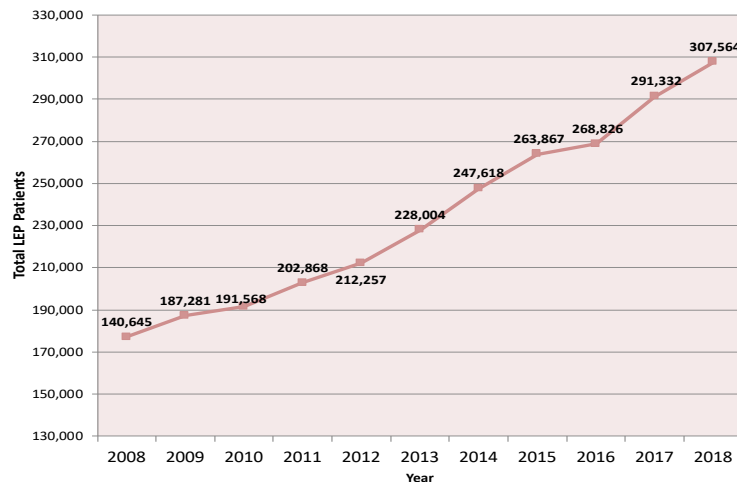
AVERAGE AAPCHO AA AND NHPI PATIENTS, 2008 - 2018

The average number of AA and NHPI patients served at each FQHC has mostly been consistent between 2008 and 2018, with some serving as high as 98% AAs, 53% NHs or 100% PIs.



LIMITED ENGLISH PROFICIENT (LEP) PATIENTS, 2008 - 2018

In 2018, 47% of AAPCHO member FQHC patients were best served in a language other than English. For some AAPCHO members, LEP patients represented up to 99% of their patient populations. The number of LEP patients served increased 74% between 2008 and 2018.



MANY FACE SDH BARRIERS

AAPCHO's FQHC members are located across the country in 12 states and one freely associated state. They serve a unique subset of our nation's population who face many Social Determinant of Health barriers. Out of the 656,270 total patients served in 2018:

- 67% were racial/ethnic minorities, including 289,232 (51%) Asians, 29,188 (5%) Native Hawaiians, and 35,800 (6%) other Pacific Islanders*
- 47% were patients best served in a language other than English (307,564)
- 89% were patients with incomes at or below 200% Federal Poverty Level (466,359)
- 16% were uninsured patients (102,817)
- 55% were patients with Medicaid (359,748)
- Some FQHCs served as high as 24% homeless patients

* Percentages are out of known race

HOW AAPCHO CENTERS COMPARE NATIONALLY

Compared to the average health center, AAPCHO FQHCs serve a significantly higher proportion of:

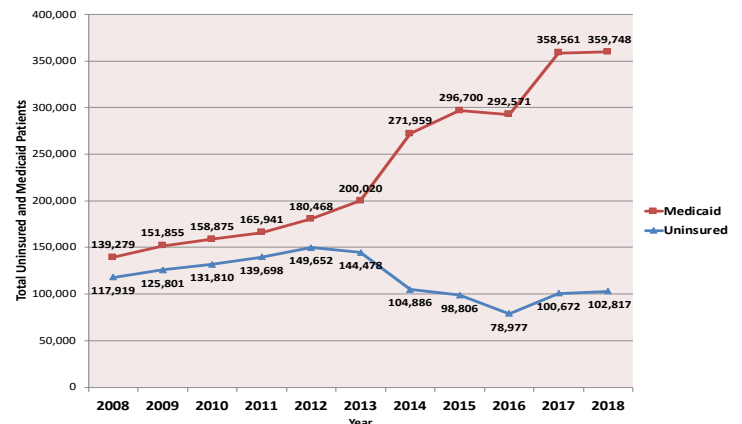
- Patients best served in a language other than English (47% vs. 24%)
- Patients with Medicaid (55% vs. 48%)
- Geriatric patients (12% vs. 9%)
- Patients with HbA1c<=9 (74% vs. 67%)
- Patients with completed cervical cancer screening (65% vs. 56%)

AAPCHO FQHCs also provide almost three times the national average number of enabling service encounters (15,125 vs. 5,385) that facilitate access to care and accounts for their high quality care. At the same time, AAPCHO FQHCs provide 212 more enabling services encounters (500 vs. 288) and 122 more enabling services patients per FTE (237 vs. 115) than the



PATIENT INSURANCE STATUS: UNINSURED AND MEDICAID, 2008 - 2018

The number of uninsured AAPCHO member FQHC patients decreased by almost 13% from 2008 to 2018. During the same time period, patients on Medicaid increased 158% from 2008 to 2018, likely due to ACA implementation. In 2018, 16% of AAPCHO member FQHC patients were uninsured and 55% were on Medicaid. For some AAPCHO members, uninsured patients represented up to 81% of their patient populations, and 61% of AAPCHO members had at least 50% of their patient population on Medicaid.



national average.

Identifying effective interventions to treat chronic conditions has been particularly difficult because of the complex and multi-layer SDH barriers faced by the population served at health centers. Therefore the application of effective [SDH assessment tools](#) to understand and prioritize [ES interventions](#) are especially important in the health center setting.

DISAGGREGATED DATA

AAPCHO health center members strongly advocate for and collect disaggregated AA and NHPI data. Unfortunately this data is not provided in the UDS, and thus is not included in this report.