

**TABLE 1**  
**Overview of Key Health Care Safety-Net Provider Programs**

Program	Program purpose and mission	FY21 federal appropriation	Populations served	Medicaid's role in program support	Program performance and role in serving Medicaid beneficiaries
<b>Community Health Centers (CHCs)</b>	The program provides comprehensive primary health care to medically underserved urban and rural communities and populations that experience deep poverty, elevated health risks, and a shortage of primary health care.	\$5.7 billion <sup>1</sup>	In 2020, 1,375 CHCs served 28.6 million patients in over 13,500 locations. <sup>2</sup> Ninety percent have family incomes twice below the federal poverty level and 70 percent have incomes below poverty. <sup>3</sup> Patients are disproportionately people of color (67%). <sup>4</sup>	In 2020, Medicaid insured 46% of CHC patients and accounted for 40% of CHC operating revenue. <sup>5</sup> Medicaid's special "federally qualified health center (FQHC) coverage and payment rules help ensure that payments approximate the cost of care in order to protect grant funding for care of uninsured patients and services.	In 2020, CHCs served approximately 1 in 6 Medicaid beneficiaries nationwide. <sup>6</sup> Research has documented the effectiveness, quality, <sup>7</sup> and cost effectiveness of CHC care. <sup>8</sup>
<b>Ryan White Comprehensive AIDS Resources Emergency (CARE) Act Program</b>	This is the only health care program focused exclusively on people living with HIV/AIDS. It aims to furnish and ensure the delivery of health care and prescription drug assistance. <sup>9</sup>	\$2.42 billion <sup>10</sup>	CARE Act grantees serve over half of all people diagnosed with HIV. <sup>11</sup> CARE Act clients are disproportionately people of color (nearly 75%) <sup>12</sup> and poor (61% have incomes below 100% poverty). <sup>13</sup>	In 2019, Medicaid accounted for 30% of all federal spending on HIV care <sup>14</sup> and insured nearly 40% of CARE Act clinical care patients. <sup>15</sup>	In 2019, CARE Act grantees served over 400,000 Medicaid beneficiaries living with HIV/AIDS. <sup>16</sup> Compared to other providers, CARE Act grantees achieve higher rates of viral suppression. <sup>17</sup>
<b>Title X Family Planning Program</b>	The program provides comprehensive family planning and related preventive services. It is the only federal health care program focused exclusively on family planning and related care.	\$286.5 million <sup>18</sup>	In 2019, Title X served over 3.1 million people, furnishing 4.7 million visits at 3,825 service sites. <sup>19</sup> Clients are disproportionately poor (two-thirds have incomes below 100% poverty), are people of color (two-thirds of clients), and have limited English proficiency (15%). <sup>20</sup>	In 2019, Medicaid and CHIP insured about 38% of all Title X clients and accounted for 36% of Title X operating revenue. <sup>21</sup>	Title X providers consistently offer a wider range of contraceptive choice and uptake and are more effective than other providers in reducing unintended pregnancy rates. <sup>22</sup> Title X/Medicaid collaboration has been shown to strengthen performance. <sup>23</sup> In many communities Title X providers offer the only source of confidential, comprehensive family planning and preventive services. <sup>24</sup>
<b>Title V Maternal and Child Health Block Grant</b>	The block grant aims to improve access to quality maternal and child health services as well as services for children with special health care needs. It is directed especially at low-income populations and those with limited access to health care. <sup>25</sup>	\$554 million <sup>26</sup> †	In FY19, approximately 12 million individuals received direct or enabling services, while approximately 60 million were served in total, including Title V-supported public health services. <sup>27</sup> ‡ Children with special health care needs accounted for 67% of program expenditures. <sup>28</sup>	In 2019, Title V-funded health care entities received 37 percent of their revenue from Medicaid and other health insurers. <sup>29</sup> † Medicaid accounted for 43% percent of all births in 2018; <sup>30</sup> over 1 in 2 children are insured through Medicaid or CHIP. <sup>31</sup>	In 2019, providers funded by Title V served about 4 million Medicaid beneficiaries. <sup>32</sup> ‡ These providers play a critical role in serving pregnant women, infants, and children with special health care needs.

**TABLE 1**  
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Program	Program purpose and mission	FY21 federal appropriation	Populations served	Medicaid’s role in program support	Program performance and role in serving Medicaid beneficiaries
<b>Community Mental Health Services Block Grant</b>	The program supports the provision of comprehensive community-based mental health services for adults with serious mental illness and children with serious emotional disturbances. <sup>33</sup>	\$758 million <sup>34</sup>	In 2020, 8 million people were served through state mental health agencies, <sup>35</sup> approximately 40% of whom were people of color. <sup>36</sup>	State mental health authority reports show that Medicaid insures as many as 95% of people receiving care through community mental health services programs. <sup>37</sup>	State mental health authorities served an estimated 1 in 11 Medicaid beneficiaries receiving mental health services in 2019. <sup>38</sup>
<b>Substance Abuse Block Grant</b>	The program develops and supports substance abuse treatment and prevention services. Key focus groups include pregnant women, women with dependent children, and intravenous (IV) drug users. The program accounts for 29% of public funds that states spend on substance use disorder prevention and treatment annually. <sup>39</sup>	\$1.9 billion <sup>40</sup>	In 2020, 1.5 million people were in treatment and 14.2 million received prevention services. <sup>41</sup> Pregnant women, women with dependent children, and IV drug users represent key priority groups.	Medicaid accounts for 40% of annual funding received by substance use treatment and prevention programs. <sup>42</sup>	In 2019, 1.59 million Medicaid beneficiaries ages 12 and older (3.5% of beneficiaries) received substance use disorders treatment. <sup>37</sup> In 2012, prior to the Affordable Care Act expansion, Medicaid beneficiaries accounted for nearly 26 percent of all people admitted for substance use treatment. <sup>43</sup>

‡ State matches are not yet known for FY21. Every \$4 of federal funding is intended to be matched by at least \$3 of state funds. However, state matches have been down significantly since the pandemic started. The Title V budget has dropped from \$3.1B in state matches in 2019 to \$1.2B in states matches in 2020.<sup>44</sup>

† Insurance reimbursement figures just from Medicaid were unavailable. Insurance reimbursement has been down significantly since the pandemic started, dropping from \$2.6B in 2019 (37% of expenditures) to \$400M in 2020 (17% of expenditures).<sup>45</sup>

¥ This figure is calculated from 2019 Title V state-level reports.

1 \$1.7 billion from Base Discretionary Appropriation; \$4 billion from the Community Health Center Fund.

2 <https://data.hrsa.gov/tools/data-reporting/program-data/national>

3 <https://data.hrsa.gov/tools/data-reporting/program-data/national/table?tableName=Full&year=2020>

4 <https://www.nachc.org/wp-content/uploads/2020/01/Chartbook-2020-Final.pdf>

5 <https://publichealth.gwu.edu/sites/default/files/GG%20IB%20%2366%20Final%20October%202021.pdf>

6 *Id* at 1.

7 <https://www.commonwealthfund.org/publications/issue-briefs/2019/aug/changes-at-community-health-centers-how-patients-are-benefiting>

8 [http://nachc.org/wp-content/uploads/2016/06/HC\\_Cost\\_Effectiveness\\_06.16.pdf](http://nachc.org/wp-content/uploads/2016/06/HC_Cost_Effectiveness_06.16.pdf)

9 <http://publications.partbadap-2020.nastad.org/>

10 <https://hab.hrsa.gov/program-grants-management/ryan-white-hiv-aids-program-funding>

11 <https://hab.hrsa.gov/sites/default/files/hab/Publications/factsheets/population-factsheet-overview.pdf>

12 <https://hab.hrsa.gov/sites/default/files/hab/Publications/factsheets/population-factsheet-overview.pdf>

13 <http://publications.partbadap-2020.nastad.org/>

14 <https://www.kff.org/hiv-aids/fact-sheet/medicaid-and-hiv/>

15 <https://hab.hrsa.gov/sites/default/files/hab/data/datareports/RWHAP-annual-client-level-data-report-2019.pdf>, <https://hab.hrsa.gov/sites/default/files/hab/data/datareports/2018-hrsa-adr-data-report.pdf>

**TABLE 1**  
**Overview of Key Health Care Safety-Net Provider Programs (continued)**

16 [https://www.kff.org/hivaid/fact-sheet/the-ryan-white-hivaid-program-the-basics/#:~:text=Most%20clients%20\(80%25\)%20have,and%20other%20sources%20\(12%25\)](https://www.kff.org/hivaid/fact-sheet/the-ryan-white-hivaid-program-the-basics/#:~:text=Most%20clients%20(80%25)%20have,and%20other%20sources%20(12%25))

17 <https://www.kff.org/hivaid/fact-sheet/the-ryan-white-hivaid-program-the-basics/>

18 [https://www.nationalfamilyplanning.org/title-x\\_budget-appropriations](https://www.nationalfamilyplanning.org/title-x_budget-appropriations)

19 <https://opa.hhs.gov/sites/default/files/2020-09/title-x-fpar-2019-national-summary.pdf>

20 <https://opa.hhs.gov/sites/default/files/2020-09/title-x-fpar-2019-national-summary.pdf>

21 <https://opa.hhs.gov/sites/default/files/2020-09/title-x-fpar-2019-national-summary.pdf>

22 <https://www.guttmacher.org/gpr/2017/01/why-we-cannot-afford-undercut-title-x-national-family-planning-program>

23 <https://www.guttmacher.org/gpr/2007/05/stronger-together-medicaid-title-x-bring-different-strengths-family-planning-effort>

24 [https://www.nationalfamilyplanning.org/title-x\\_title-x-key-facts](https://www.nationalfamilyplanning.org/title-x_title-x-key-facts)

25 <https://mchb.hrsa.gov/maternal-child-health-initiatives/title-v-maternal-and-child-health-services-block-grant-program>

26 <https://mchb.tvisdata.hrsa.gov/Financial/FundingBySource>

27 <https://mchb.tvisdata.hrsa.gov/Home/StateApplicationOrAnnualReport>

28 <https://mchb.tvisdata.hrsa.gov/uploadedfiles/TvisWebReports/Documents/NationalSnapshot.pdf>

29 <https://mchb.tvisdata.hrsa.gov/uploadedfiles/TvisWebReports/Documents/NationalSnapshot.pdf>

30 <https://www.macpac.gov/wp-content/uploads/2020/01/Medicaid%E2%80%99s-Role-in-Financing-Maternity-Care.pdf>

31 Number of children on Medicaid or CHIP: <https://www.hhs.gov/about/news/2021/06/21/new-medicaid-and-chip-enrollment-snapshot-shows-almost-10-million-americans-enrolled.html>; Number of children in the US: <https://datacenter.kidscount.org/data/tables/99-total-population-by-child-and-adult-populations#detailed/1/any/false/574,1729,37871,870,573,869,36,868,867/39,40,41/416,417>

32 <https://mchb.tvisdata.hrsa.gov/Home/StateApplicationOrAnnualReport>

33 <https://www.samhsa.gov/grants/block-grants/mhbg>

34 <https://www.samhsa.gov/sites/default/files/samhsa-fy-2022-bib.pdf>

35 <https://www.samhsa.gov/data/sites/default/files/reports/rpt35281/Washington.pdf>

36 <https://www.samhsa.gov/data/sites/default/files/reports/rpt35281/Washington.pdf>

37 <https://www.samhsa.gov/data/sites/default/files/reports/rpt35281/Washington.pdf>

38 Calculation derived from 2020 SAMHSA Uniform Reporting System and Medicaid Enrollment Snapshot: <https://www.samhsa.gov/data/report/2020-uniform-reporting-system-urs-output-tables>; <https://www.medicaid.gov/medicaid/national-medicaid-chip-program-information/downloads/june-medicaid-chip-enrollment-trend-snapshot.pdf>

39 [https://www.samhsa.gov/sites/default/files/sabg\\_fact\\_sheet\\_rev.pdf](https://www.samhsa.gov/sites/default/files/sabg_fact_sheet_rev.pdf)

40 <https://www.samhsa.gov/sites/default/files/samhsa-fy-2022-bib.pdf>

41 <https://bgas.samhsa.gov/Module/BGAS/Page/Reports.aspx>

42 *Id* at 33.

43 [https://www.samhsa.gov/data/sites/default/files/report\\_2080/ShortReport-2080.html](https://www.samhsa.gov/data/sites/default/files/report_2080/ShortReport-2080.html)

44 <https://mchb.tvisdata.hrsa.gov/Financial/FundingBySource>

45 *Id* at 35.

**TABLE 2**  
**Share of Federally Qualified Health Center (FQHC) Payments Received as Supplemental Payments, by State and by Services**  
**Furnished in Current Year and Prior Years (2020)**

State	FQHC supplemental payments as a percentage of total Medicaid revenue received (2020)	Share of supplemental FQHC payments that reflect payment for services furnished in prior years
Indiana	56%	21%
Washington	50%	4%
New Jersey	47%	48%
Wisconsin	47%	27%
Virginia	45%	38%
Michigan	42%	21%
Tennessee	41%	25%
Puerto Rico	40%	23%
Florida	37%	27%
California	37%	10%
Kentucky	36%	11%
Rhode Island	36%	15%
Oregon	36%	41%
New York	31%	10%
Nevada	30%	11%
Arkansas	28%	91%
Ohio	25%	21%
District of Columbia	22%	22%
North Carolina	20%	85%
Missouri	15%	46%
Iowa	12%	52%
Arizona	12%	43%
North Dakota	10%	30%
Montana	10%	87%
Vermont	9%	93%
Hawaii	9%	63%
Idaho	7%	100%
Pennsylvania	5%	91%
South Carolina	4%	68%
Utah	3%	12%
Illinois	3%	0%
Maryland	2%	100%
West Virginia	2%	70%
Nebraska	2%	4%
Minnesota	2%	16%
Maine	1%	100%
Colorado	1%	55%

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**Share of Federally Qualified Health Center (FQHC) Payments Received as Supplemental Payments, by State and by Services**  
**Furnished in Current Year and Prior Years (2020) (continued)**

State	FQHC supplemental payments as a percentage of total Medicaid revenue received (2020)	Share of supplemental FQHC payments that reflect payment for services furnished in prior years
Alabama	1%	0%
Texas	0.4%	66%
Louisiana	0.3%	0%
Connecticut	0.3%	100%
New Hampshire	0.1%	100%
Oklahoma	0.1%	0%
Massachusetts	0.1%	100%
Georgia	0.04%	0%
New Mexico	0.04%	0%
Alaska	0%	—
Delaware	0%	—
Kansas	0%	—
Mississippi	0%	—
South Dakota	0%	—
Wyoming	0%	—
<b>Total United States</b>	<b>27%</b>	<b>17%</b>

Data: George Washington University analysis of 2020 Uniform Data System data.