

## Variation in Local Health Department Primary Care Services as a Function of Health Center Availability

The following is a synopsis of “Community-Wide Cardiovascular Disease Prevention Programs and Health Outcomes in a Rural County, 1970-2010,” published online in January 2015 in *The Journal of the American Medical Association*.



### What is already known on this topic?

Many people rely on healthcare safety net providers to access primary care services, but the public health community's view of the role of local health departments in providing access to primary care services is evolving.

Generally, local health departments and federally qualified health centers (FQHCs) have different functions. Local health departments perform traditional public health activities such as disease surveillance and prevention, regulation and oversight of environmental health risks, and direct care. Federally qualified health centers (FQHCs) serve as a safety net provider of primary care to underserved populations, regardless of their ability to pay. In general, local health departments seem to provide primary care only in counties where people cannot get primary care services elsewhere. However, two previous studies have found no association between the presence of FQHCs in a county and the degree to which the local health departments provides primary care.

### What is added by this article?

The authors analyzed data from three sources in order to understand the effect of FQHCs on the degree to which

local health departments are delivering primary care and preventive services. Specifically, the authors analyzed 2107 local health departments' provision of screening for heart disease, diabetes, and hypertension and the local health departments' provision of comprehensive primary care. The 2010 National Association of County & City Health Officials Profile of Local Health Departments, the 2010 Uniform Data System, and the 2011 Area Resource File were the sources of the data.

The authors found that the availability of FQHCs has little relation to the provision of heart disease and diabetes screening services by local health departments. Local health departments in counties with an FQHC have 32% lower odds of providing hypertension screening.

The authors also looked at an alternate model to examine whether the number of FQHC delivery sites per capita has an effect on local health departments' provision of care. Using this model they found that each additional FQHC delivery site decreased the odds of local health departments providing primary care or screening for heart disease, diabetes, or hypertension.

---

## What are the implications of these findings?

This study provides evidence that the availability of an FQHC in the same county as a local health department partially explains the variation in local health departments' provision of primary care services. Local health departments may be able to focus on more traditional public health activities in counties where local health departments and FQHCs co-exist. That's because the Affordable Care Act (ACA) may allow FQHCs to increase their capacity by providing them with more funding. Local health departments in counties without FQHCs may find that ensuring access to care is challenging; this may lead them to provide primary care services themselves. The increased demand for preventive health services due to the ACA may overwhelm the capacity of FQHCs and local health

departments and ensuring access to care may become a larger challenge.

There are several limitations of this study. The use of cross-sectional data does not allow the authors to make causal claims about the relationship between FQHCs and primary care and preventive services at local health departments. Also, the analysis was conducted at the county level and both FQHCs and local health departments serve more than one county. The study does not control for FQHC service area.

Findings are important to address a lack of access to primary care services. Public health interventions designed to make a difference in access to primary care should consider that it is important for FQHCs and local health departments to work collaboratively to ensure access to primary care.

---

## Resources

Centers for Medicare and Medicaid Services  
Federally Qualified Health Centers  
<http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/fqhcfactsheet.pdf>

Centers for Disease Control and Prevention  
Medicaid Service Delivery: Federally Qualified Health Centers  
<http://www.cdc.gov/phlp/docs/brief-fqhc.pdf>

Centers for Disease Control and Prevention  
Heart Disease Facts  
<http://www.cdc.gov/heartdisease/facts.htm>

## Citation

Wright, B, Nice, AJ. Variation in local health department primary care services as a function of health center availability. *J Public Health Manag Pract.* 2015; 21(1):E1-9.

*The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.*