
HEALTH CENTERS & VACCINE EQUITY

MARCH 25, 2021

Minnesota Association of
COMMUNITY HEALTH CENTERS



AGENDA

1. Overview of MNACHC and Community Health Centers
2. Impact of Covid-19 on Health Center patients
3. Vaccine distribution and Health Center response

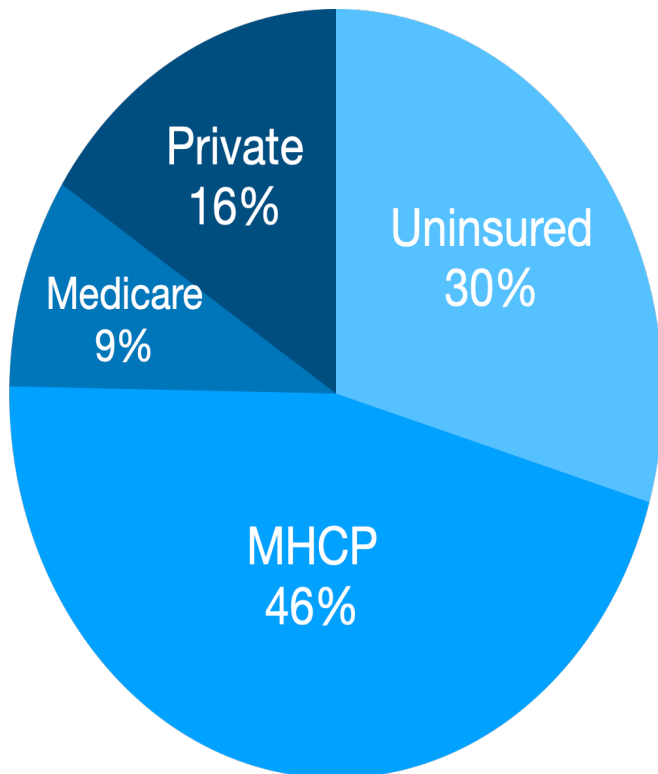
MISSION & HISTORY

- Serve nearly 200,000 low-income Minnesotans on an annual basis (in the US, nearly 30 million served annually)
- 17 organizations delivering care at 83 sites throughout the state of Minnesota (nationally, 1,500 organizations, >10,000 sites)
- Most provide medical, dental and behavioral health services “under one roof”
 - Expanding to vision and chiropractic services
- Directly employ nearly 1,700 FTE and generate \$327 million to state’s GDP
- Rooted in civil rights movement, some health centers entering their sixth decade of existence
- Serve all, regardless of ability to pay
- Governed by patients

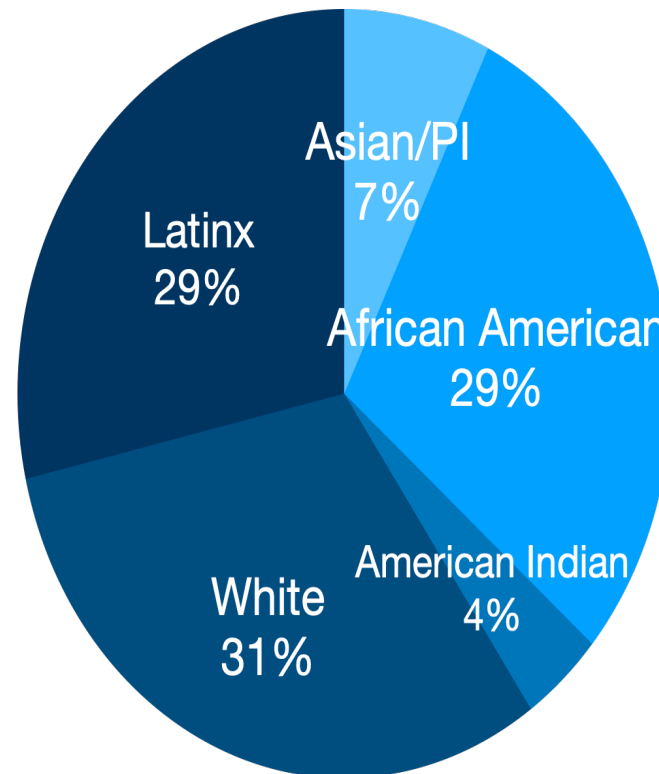


SERVING LOW-INCOME MINNESOTANS – EMPHASIS ON BIPOC

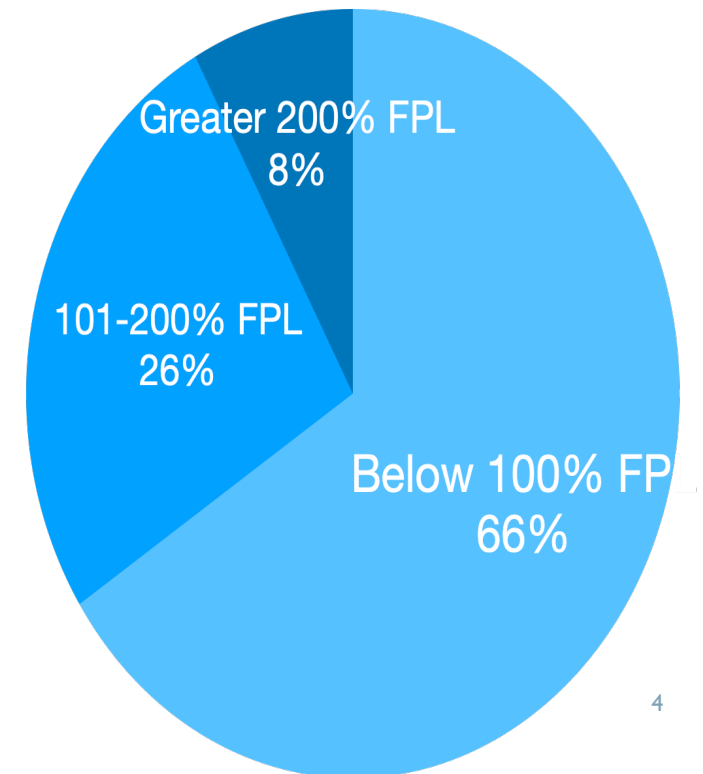
Health Center Patients, By Insurance Status, 2019



Health Center Patients, By Race/Ethnicity, 2019

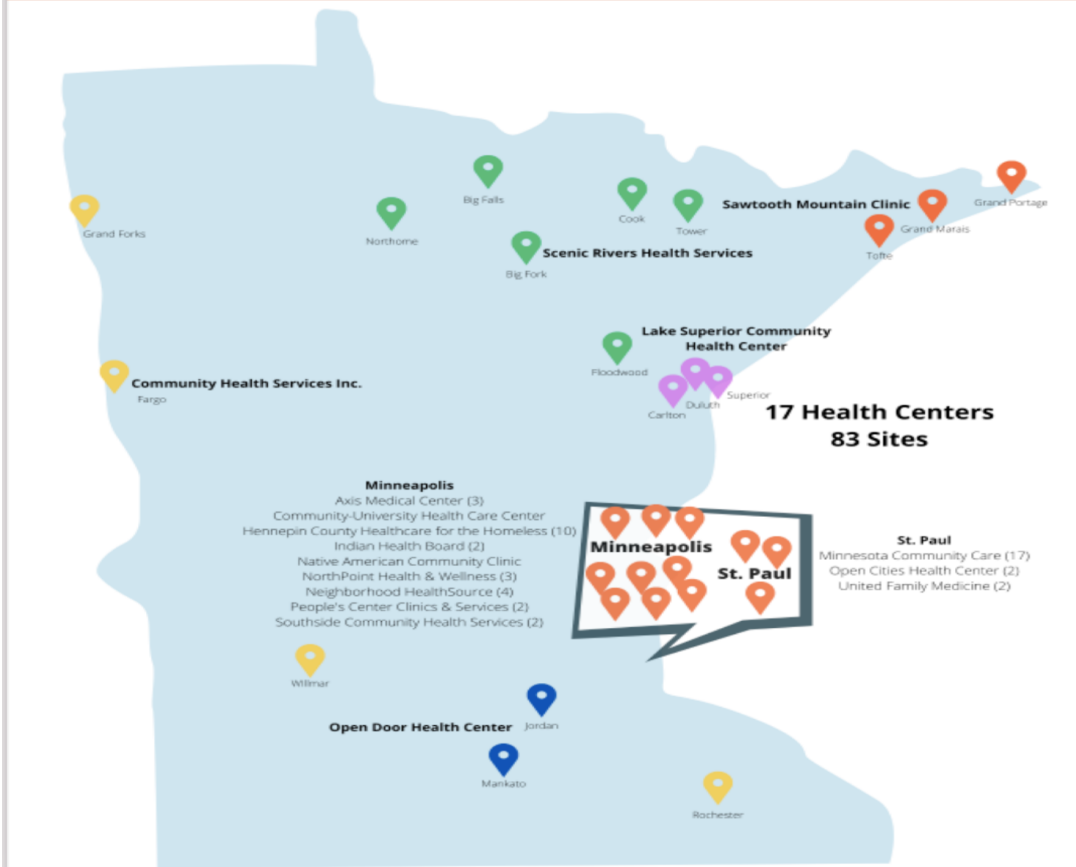


Health Center Patients, By Income, 2019

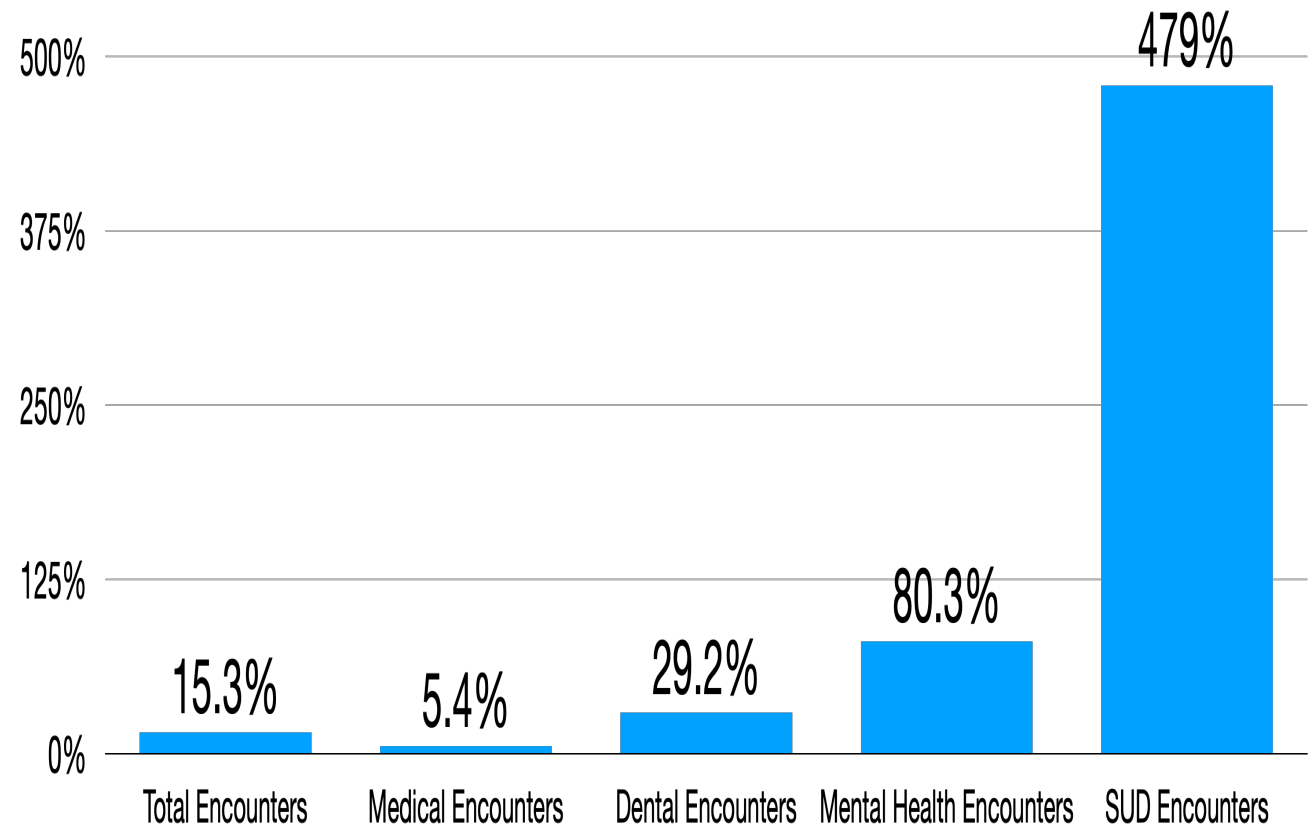


LOCATIONS AND SERVICES

HEALTH CENTERS & SITES



Encounter Growth, by Type, 2009-2019



MNACHC



OUR SERVICES

Quality Improvement

MNACHC supports the clinical quality efforts of Health Centers through data analysis of state quality measures, sharing of best practices, and convening peer-learning opportunities.

Training & Technical Assistance

MNACHC provides training and technical assistance on topics important to members, such as billing and coding, clinical leadership, financial and operational issues, and Board of Directors responsibilities.

Government Relations

MNACHC is a respected advocacy organization on both the state and federal levels. MNACHC works with key state agencies to cultivate a public policy environment that's supportive of our Health Centers.

Workforce

MNACHC assists Health Centers with their workforce recruitment and retention needs.

Partnership Development

MNACHC seeks partners that share the Health Center mission of expanding access to primary care services for low-income Minnesotans.



UNIVERSITY OF MINNESOTA

Community-University Health Care Center

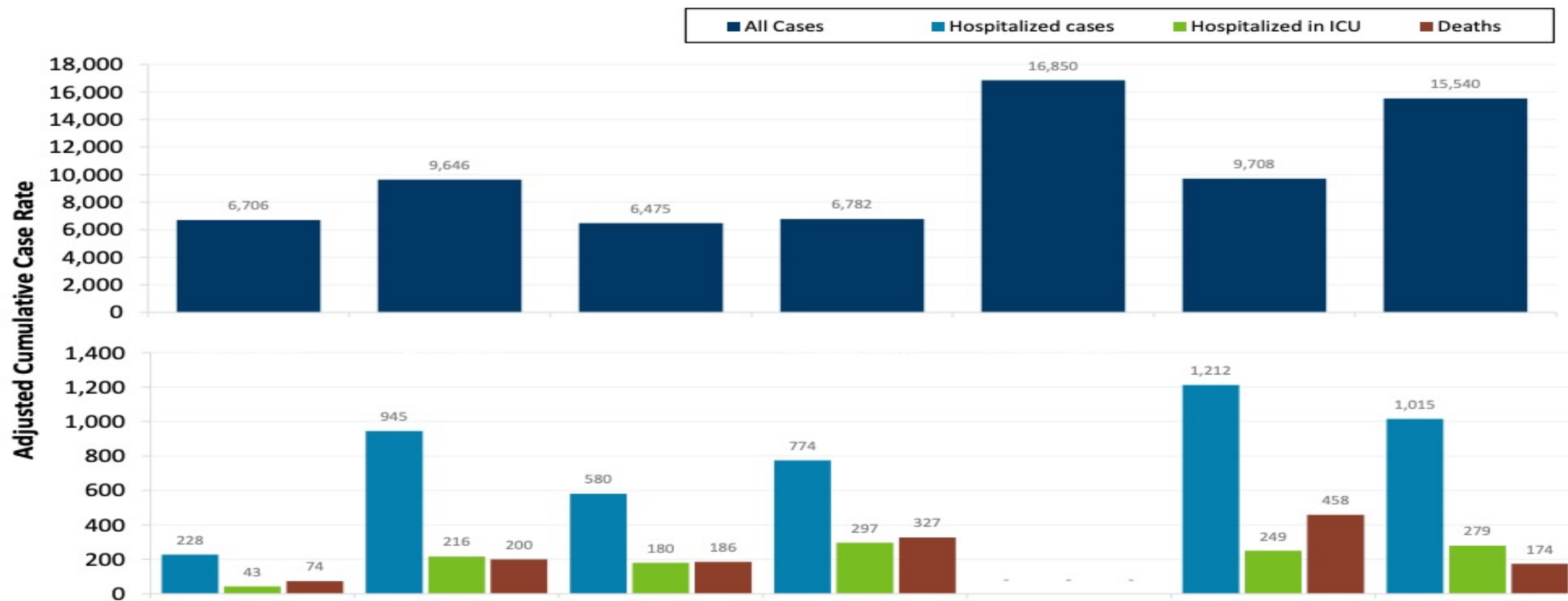




IMPACT OF COVID-19 ON HEALTH CENTER PATIENTS

Age-Adjusted Race & Ethnicity Rates

Age-adjusted rates allow us to compare rates for racial and ethnic groups that have very different age distributions in Minnesota; they essentially allow us to look at what the rates would be if the underlying population age distribution was the same for all races. Rates have been suppressed when total cases are less than 25. Cumulative case rate is the number of cases by race or ethnicity per 100,000 people in Minnesota. Numbers include confirmed and probable cases.



Age adjusted race/ethnicity	White, non-Hispanic	Black, non-Hispanic	Asian, non-Hispanic	American Indian/Alaskan Native, NH	Native Hawaiian/Pacific Islander, NH	Multiple Races, non-Hispanic	Hispanic
All Cases	6,706	9,646	6,475	6,782	16,850	9,708	15,540
Hospitalizations	228	945	580	774	-	1,212	1,015
ICU Hospitalizations	43	216	180	297	-	249	279
Deaths	74	200	186	327	-	458	174

Figure 1

Social Determinants of Health

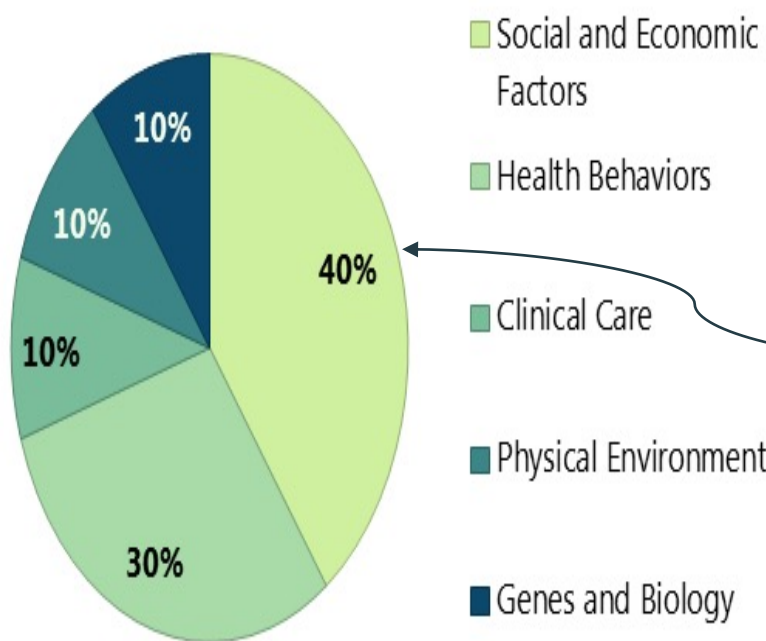
Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social Integration	Health Coverage
Income	Transportation	Language	Access to Healthy Options	Support Systems	Provider Availability
Expenses	Safety	Early Childhood Education		Community Engagement	Provide Linguistic and Cultural Competency
Debt	Parks	Vocational Training		Discrimination	
Medical Bills	Playgrounds	Higher Education		Stress	Quality of Care
Support	Walkability				
	Zip Code/ Geography				

Health Outcomes

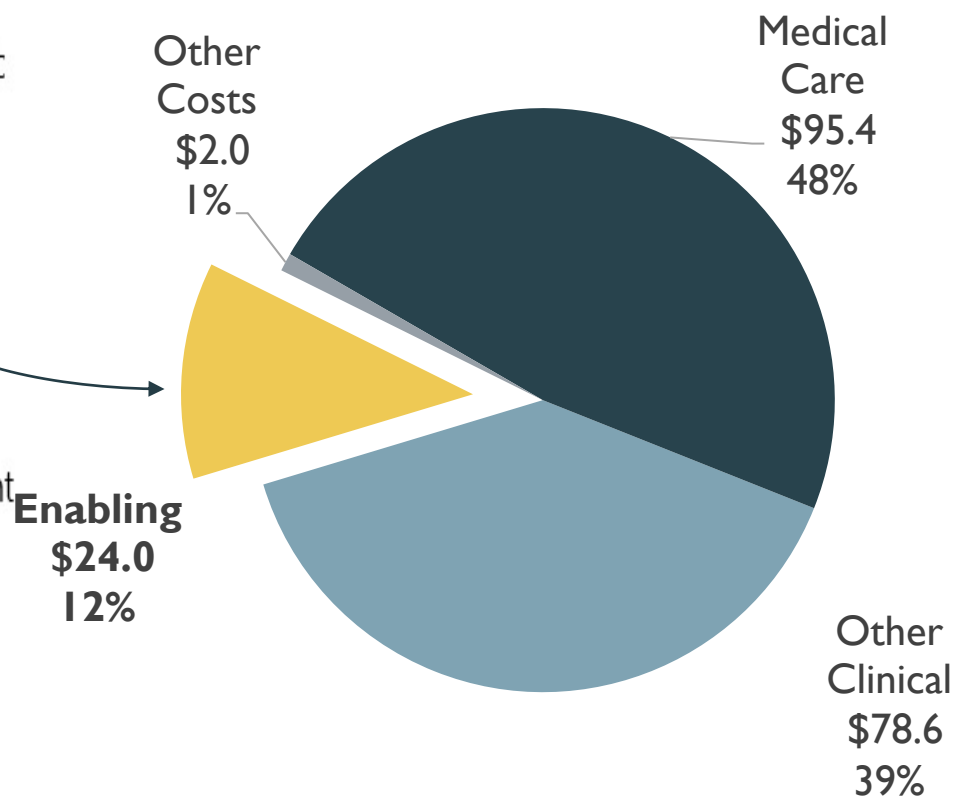
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

HOW DO HEALTH CENTERS ADDRESS SDOH?

Factors Influencing Health and Well-Being



MN CHC Costs, 2019 (\$s in millions)

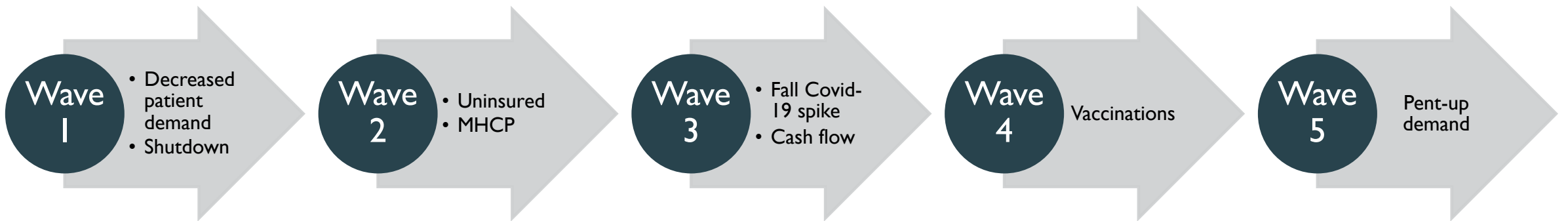


Serve all – Regardless of ability to pay, race/ethnicity, sexual orientation

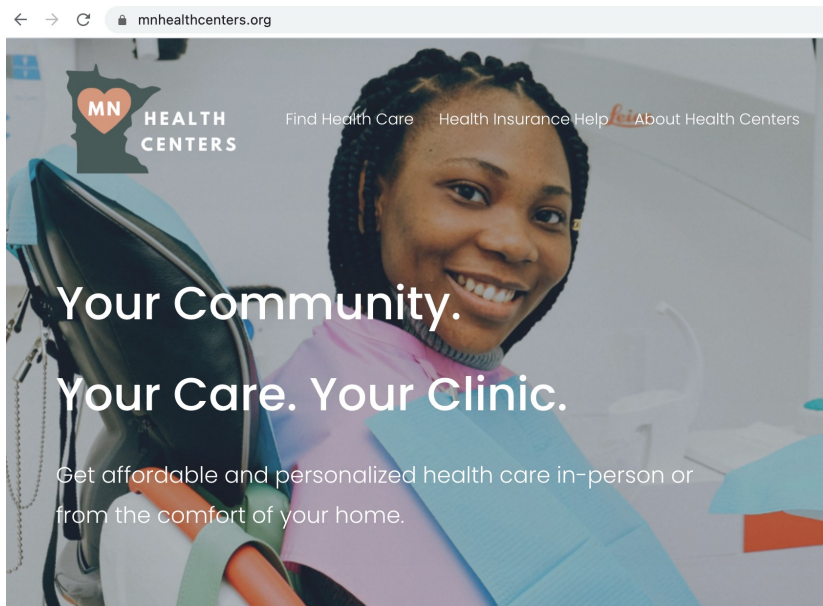
Convenience – Variety of Health Care services “under one roof”

Workforce – reflecting community, CHWs, culturally sensitive

COVID-19 WAVES



MNHEALTHCENTERS.ORG

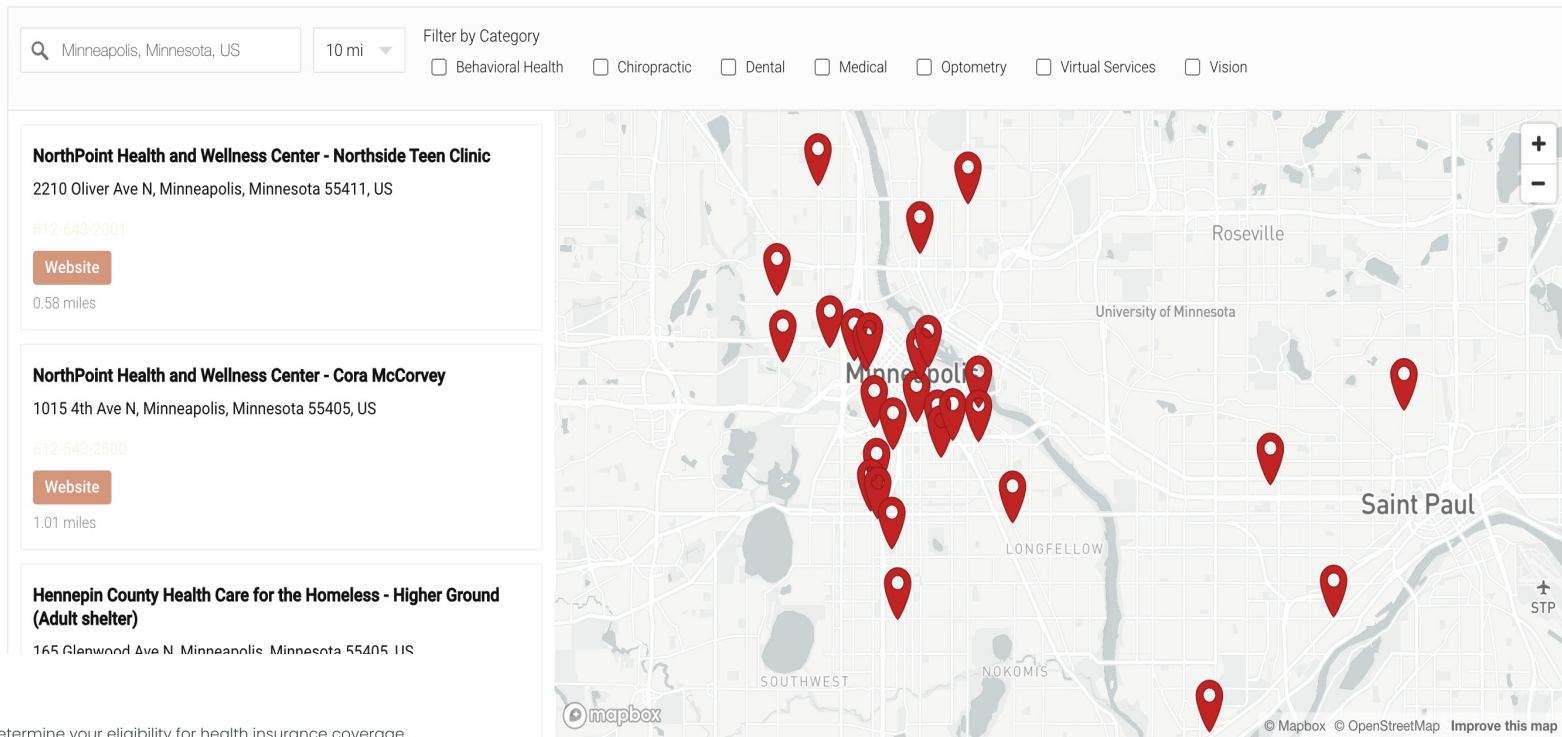


Visit MNsure.org to determine your eligibility for health insurance coverage.

When you visit MNsure.org, you have to first [create an account](#) and then you can begin the process to see what insurance you may be eligible for.

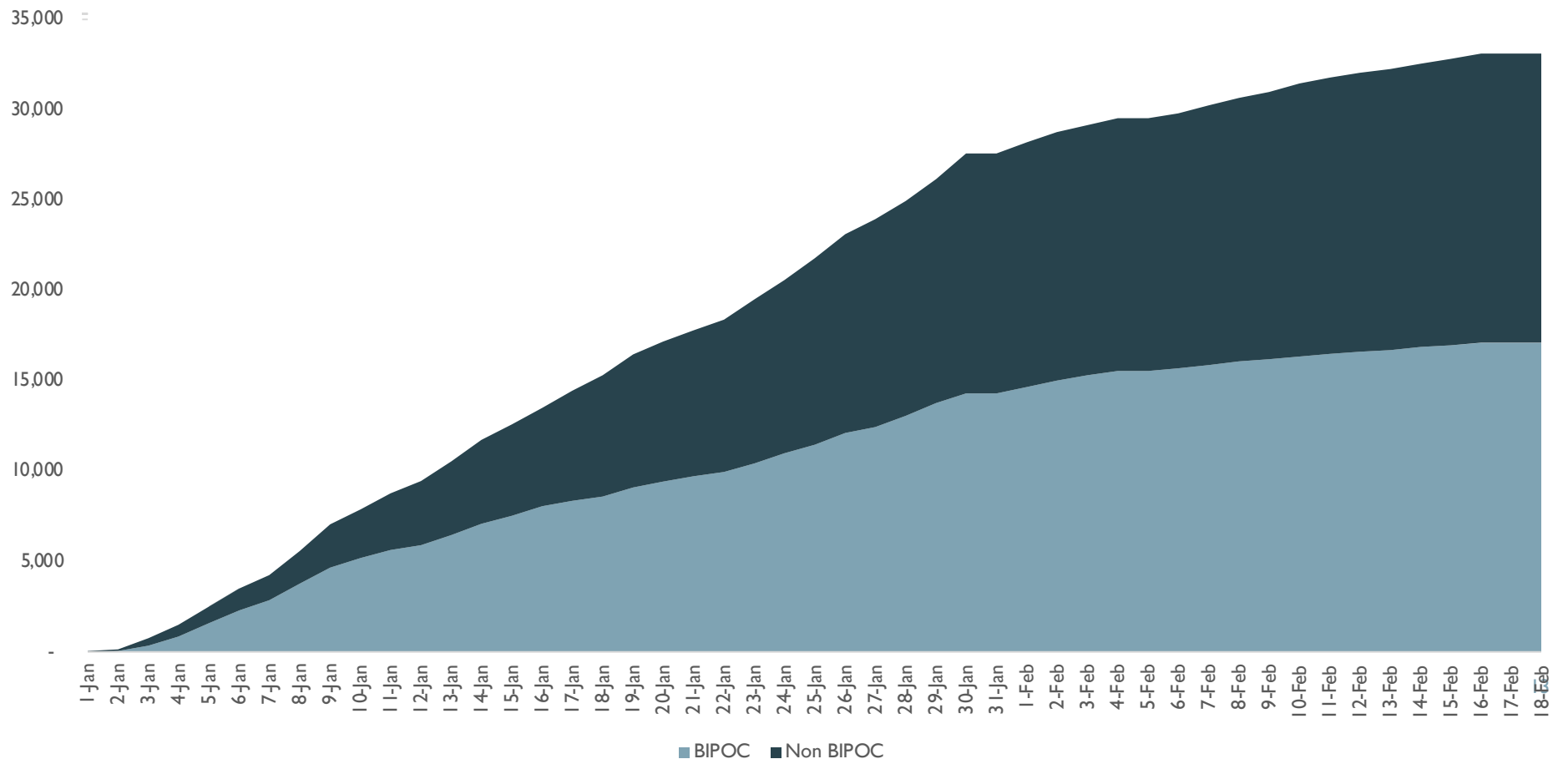
WANT SOME HELP? If you need assistance navigating the website, **all health centers have "MNsure Navigators" on site who can walk you through the process.** Call your health center and let them know you need help with health insurance enrollment.

Additionally, MNsure has a [network of expert assisters](#) who can help you apply and enroll.



HEALTH CENTER COVID-19 TESTING

FQHC Cummulative Covid-19 Tests, Total and BIPOC



Over 35,000 low-income Minnesotans have been tested at a Health Center

Roughly 50% of tests are from the BIPOC communities

COVID-19 POSITIVITY RATES

4/20-Current

Overall 15.6%

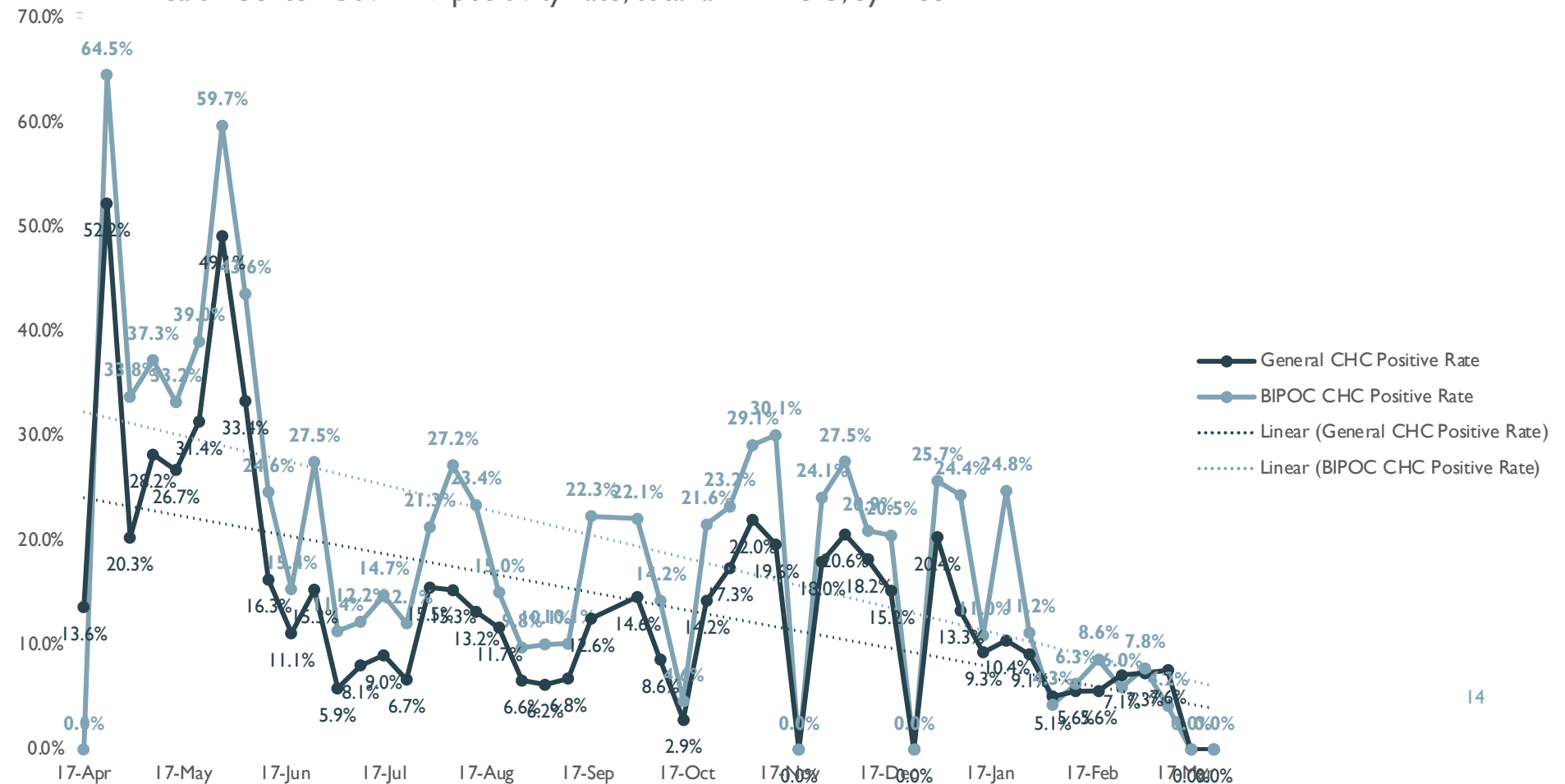
BIPOC 23.7%

March 12, 2021 Data

Overall 7.6%

BIPOC 4.2%

Health Center Covid-19 positivity rate, total and BIPOC, by Week



COVID-19 VACCINE

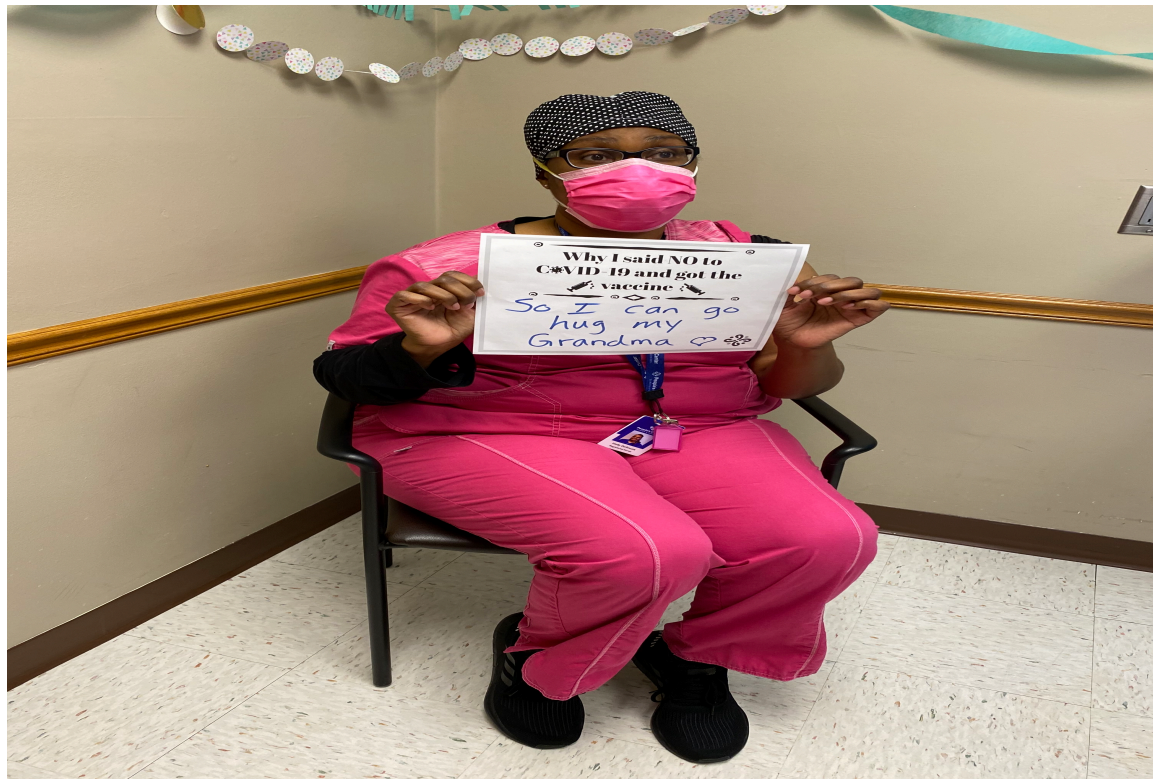


Photo courtesy of People's Center Clinic & Services



FQHC VACCINES

Minnesota Association of
COMMUNITY HEALTH CENTERS



DEPARTMENT
OF HEALTH



Office of Governor Tim Walz &
Lt. Governor Peggy Flanagan

FOR IMMEDIATE RELEASE:

March 5, 2021

Contact: Teddy Tschann

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651-402-8841

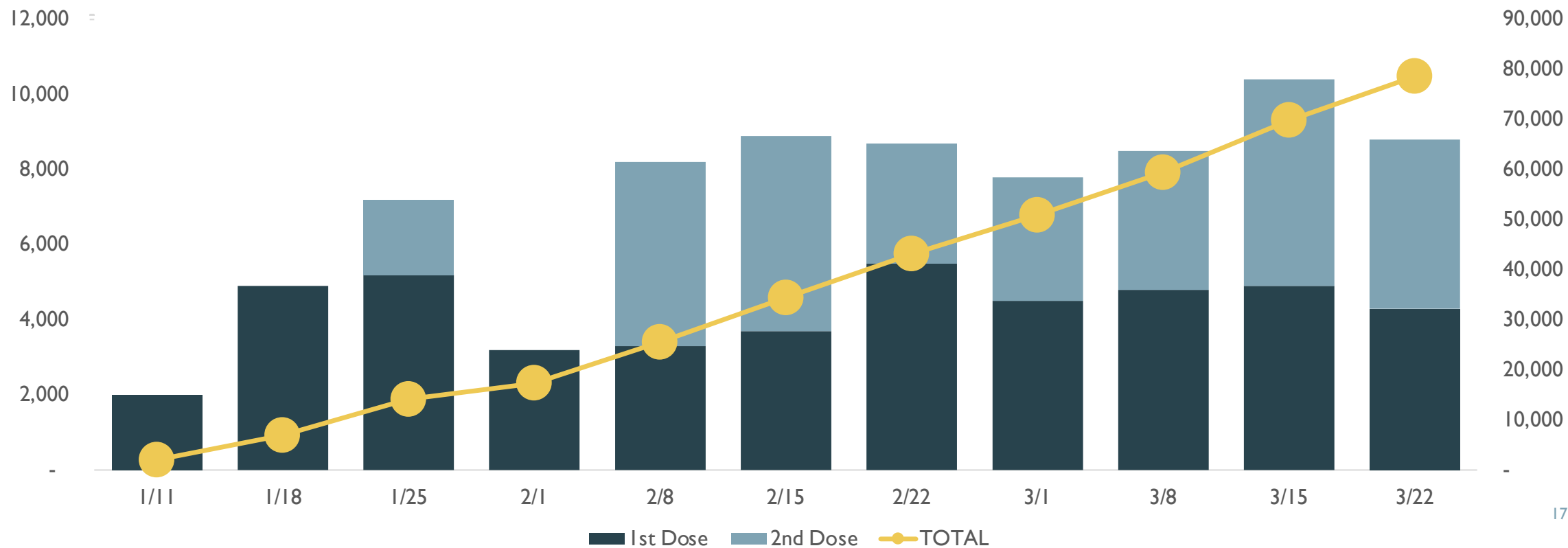
Walz, Flanagan Announce Groundbreaking Partnership Between State
of Minnesota, Health Care Systems on Race and Ethnicity Data
Collection

Minnesota's FQHCs are vaccinating community members from Black, Indigenous and Communities of Color, at significantly higher rates than other sites.

The state is working with FQHCs to now pilot initiatives to vaccinate their patients age 50 years and over who have underlying health conditions, as well as a family member who brings a relative 50 years and over in for a shot.

COVID 19 VACCINE

MDH Vaccines for FQHCs, By Week & Cumulative





Provider Goals

Summary

Who's Getting Vaccinated

Race/Ethnicity

Distribution

Vaccines Administered

Provider Goals

Reset filter

3-day goal: 90%

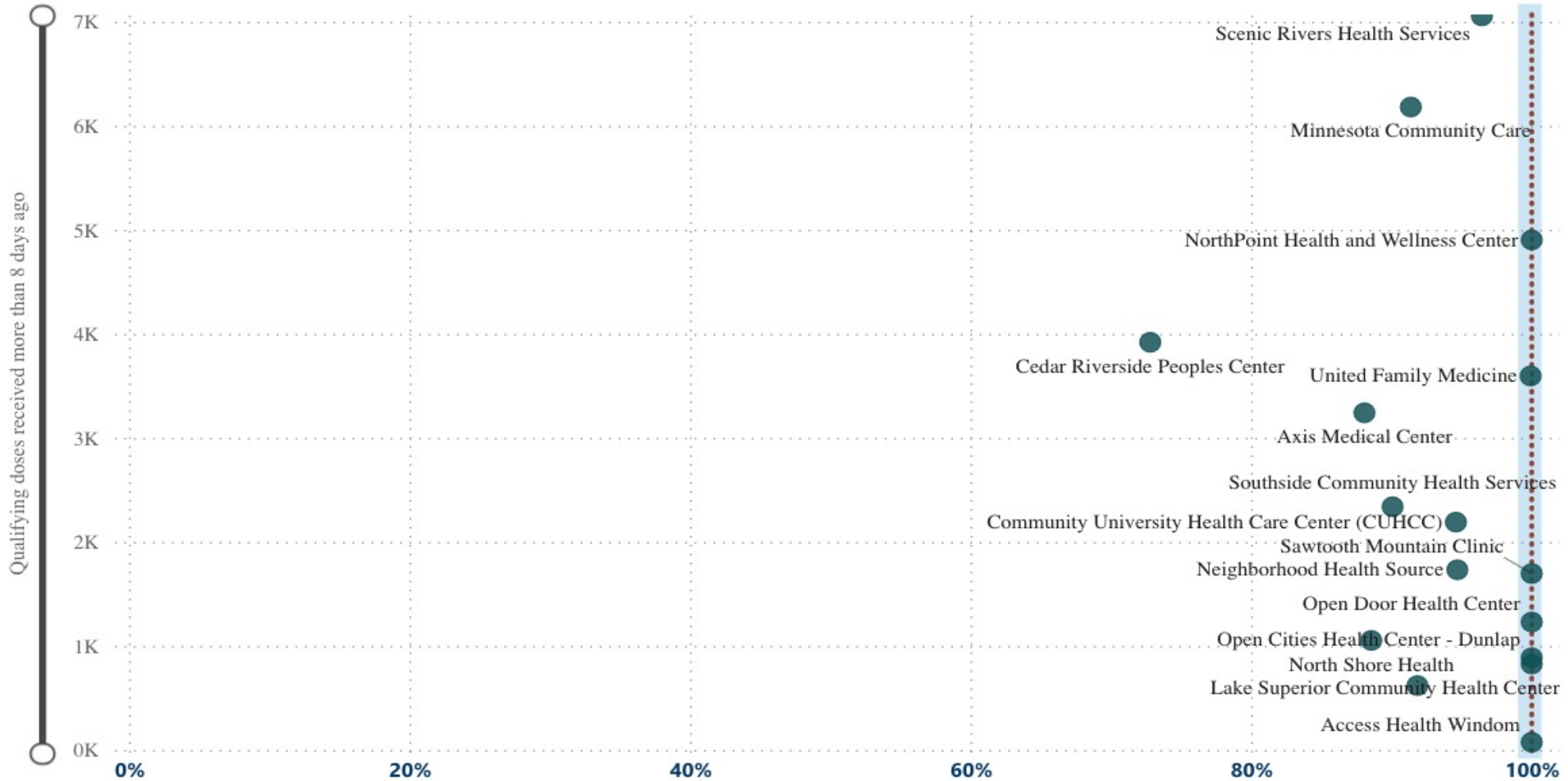
7-day goal: 100%

Percentage of doses administered by providers (7-day average)

Federally Qualified Health Centers

Target: 100%

Move the slider below to zoom



Federally Qualified Health Centers, which are particularly well positioned to help the state provide equitable vaccine access, are subject to the 7-day goal but not the 3-day goal.

Providers:

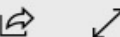
- Health Care Systems
- Pharmacies
- Federally Qualified Health Centers
- Local Hospitals, Health Care Provid...
- Local Public Health
- State of Minnesota
- Tribal

User Tips:

Select a group above to see providers receiving vaccines based on 3- and 7-day reporting goals. Select the plus sign to see additional providers within the group.

Skilled nursing facility and/or assisted living facility vaccinators have scheduling needs that sometimes pose challenges to meeting the stated vaccination timing goals.

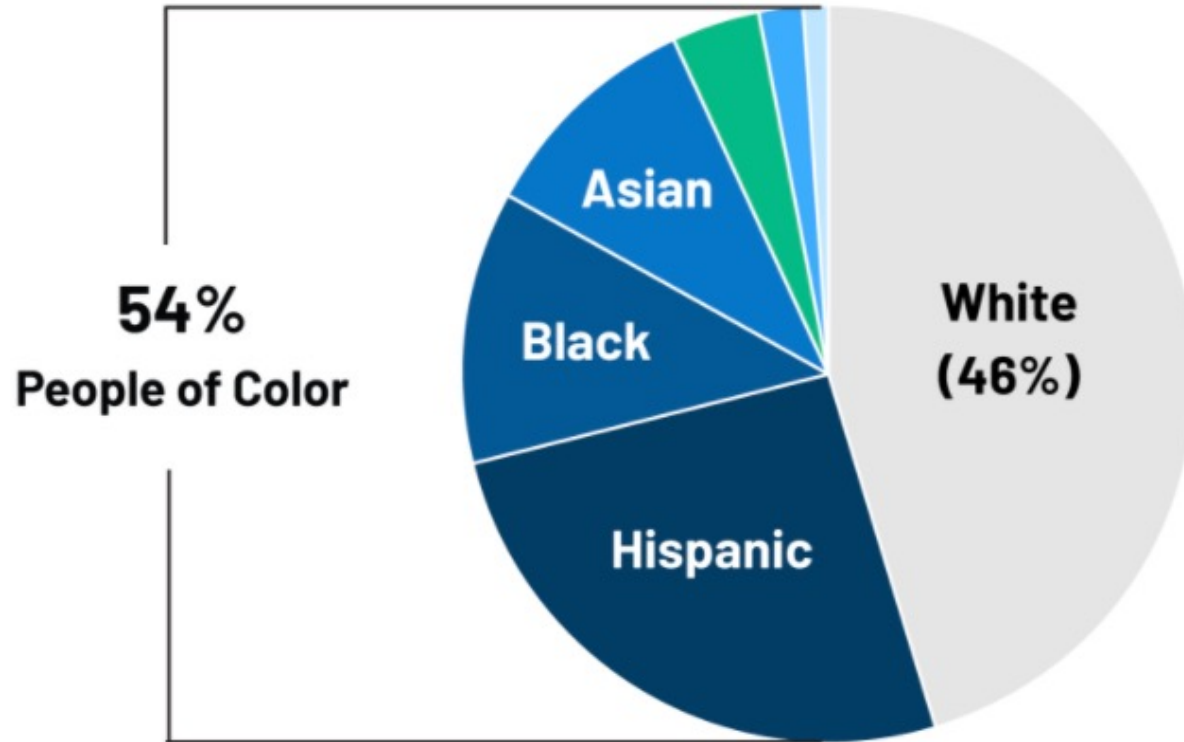
Data reported as of: 3/17/2021



Majority of People Who Received First COVID-19 Vaccine Dose From Community Health Centers Were People of Color

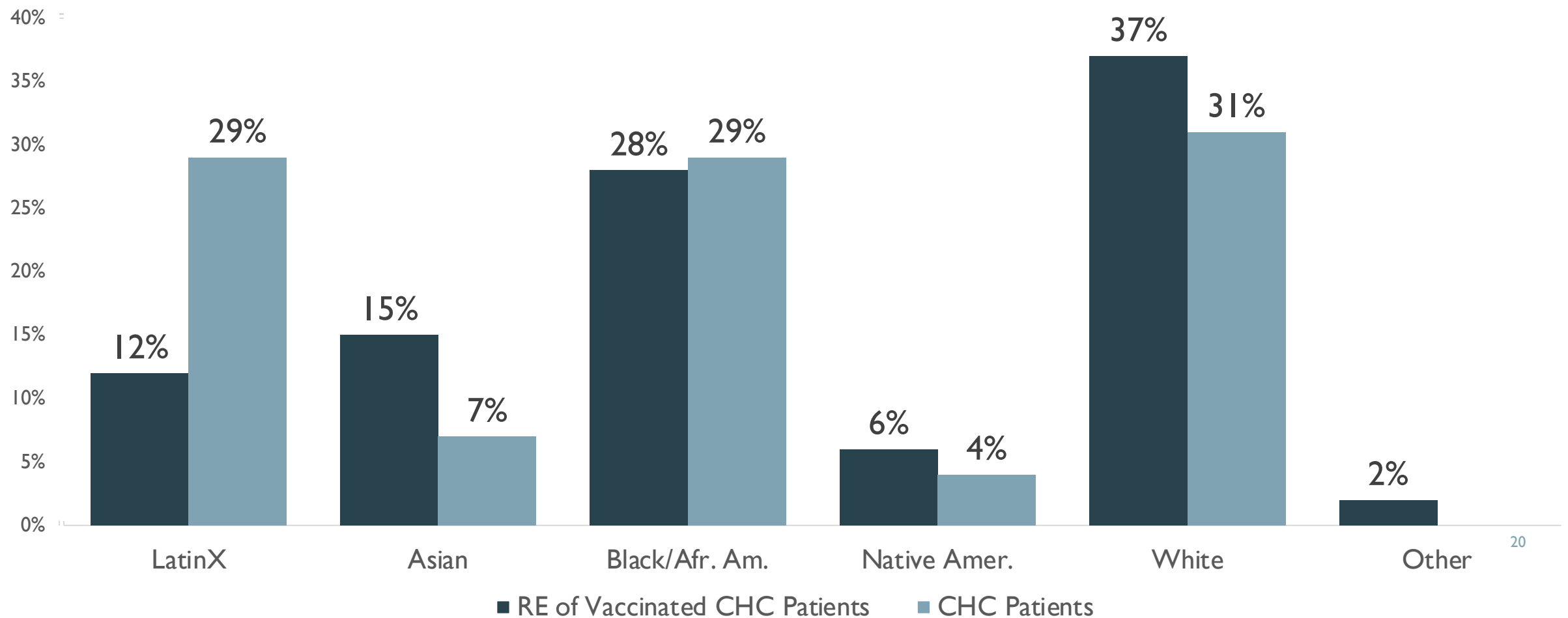
Share of Health Center Patients Receiving the 1st Dose of the COVID-19 Vaccine

- **White (46%)**
- **Hispanic (26%)**
- **Black (12%)**
- **Asian (10%)**
- **More Than 1 Race (4%)**
- **AIAN (2%)**
- **NHOPI (1%)**



NOTE: Based on known race/ethnicity. AIAN = American Indian/Alaska Native; NHOPI = Native Hawaiian/Other Pacific Islander. White and Black race categories include only non-Hispanic individuals; Asian, AIAN, NHOPI, and more than 1 race category include both Hispanic and non-Hispanic individuals. Figure is based on cumulative data starting with the week ending January 8, 2021, excluding data for the week ending January 22, 2021, which is not available. Latest data are for the week ending February 26, 2021. SOURCE: Health Center COVID-19 Survey, HRSA.

MN CHC VACCINATIONS BY RACE/ETHNICITY (WEEK OF 3/15)



HHS/HRSA VACCINE PROGRAM

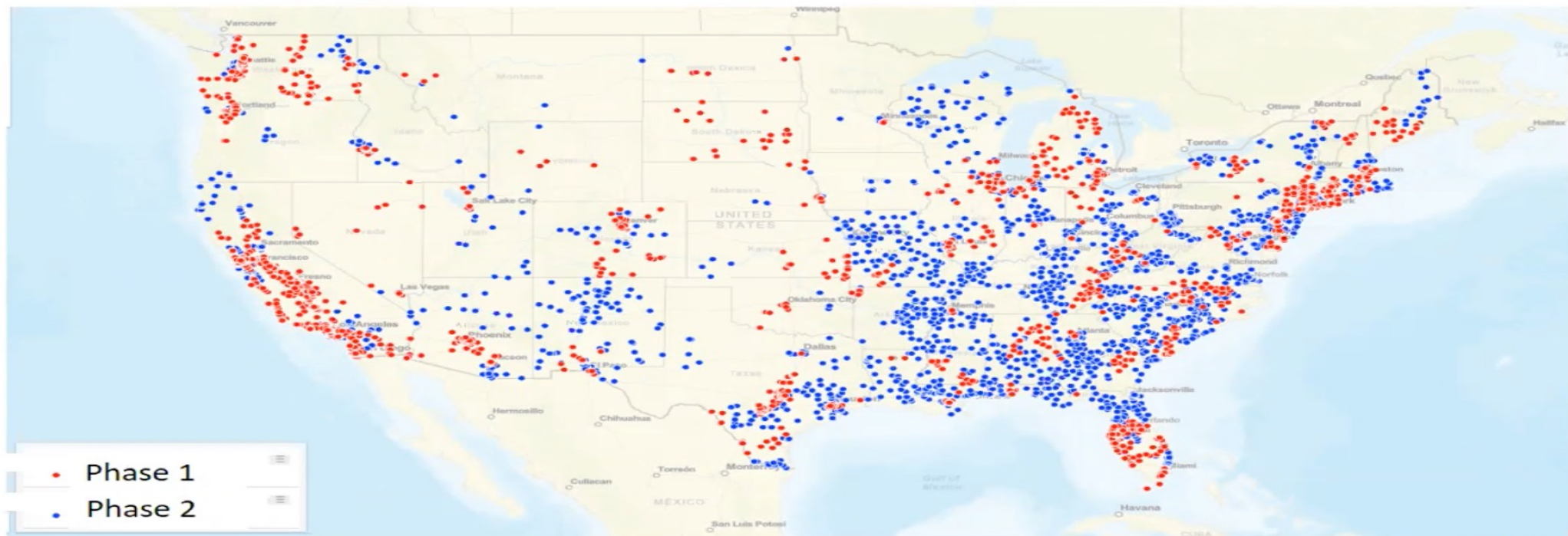


We've been sending vaccines to hundreds of community health centers all across America located in underserved areas. And we've been deploying and we will deploy more mobile vehicles and pop-up clinics to meet you where you live so those who are least able to get the vaccine are able to get it.

- President Biden, 3/11/2021

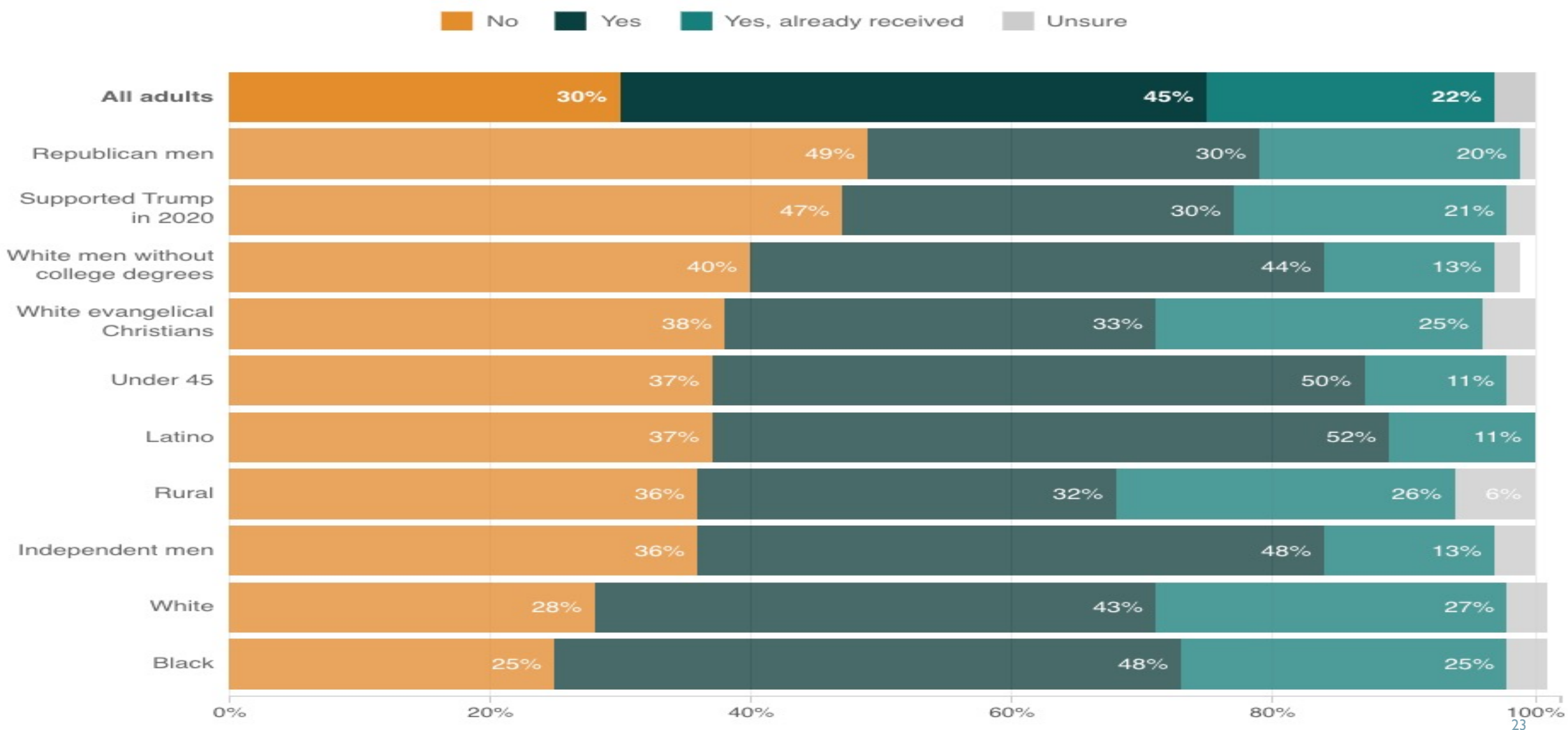
950 OF THE NATION'S 1,400 CHCS

Health Center COVID-19 Vaccine Program Invited Health Centers Sites



Source: Health Center COVID-19 Vaccine Program

If a vaccine for the coronavirus is made available to you, will you choose to be vaccinated?



Source: NPR/PBS NewsHour/Marist poll of 1,227 U.S. adults conducted between March 3 and March 8. The margin of error for the overall sample is 3.4 percentage points. Totals may not add up to 100% because of rounding.

Credit: Thomas Wilburn/NPR

PROMOTING VACCINE CONFIDENCE

LIABILITIES

- **Historical Trauma** – Tuskegee syphilis study and other historical trauma for BIPOC communities
- **Trust of vaccine** – Speed that the vaccine was developed, clinical trials for BIPOC communities
- Anti-establishment/government populations –
- **Confusing eligibility guidance**

ASSETS

- **TRUST!**
- Workforce that reflects patients served
- Reaching respected community leaders
- Role of Community Health Workers
- Selective media outreach
- Community Based Organizations

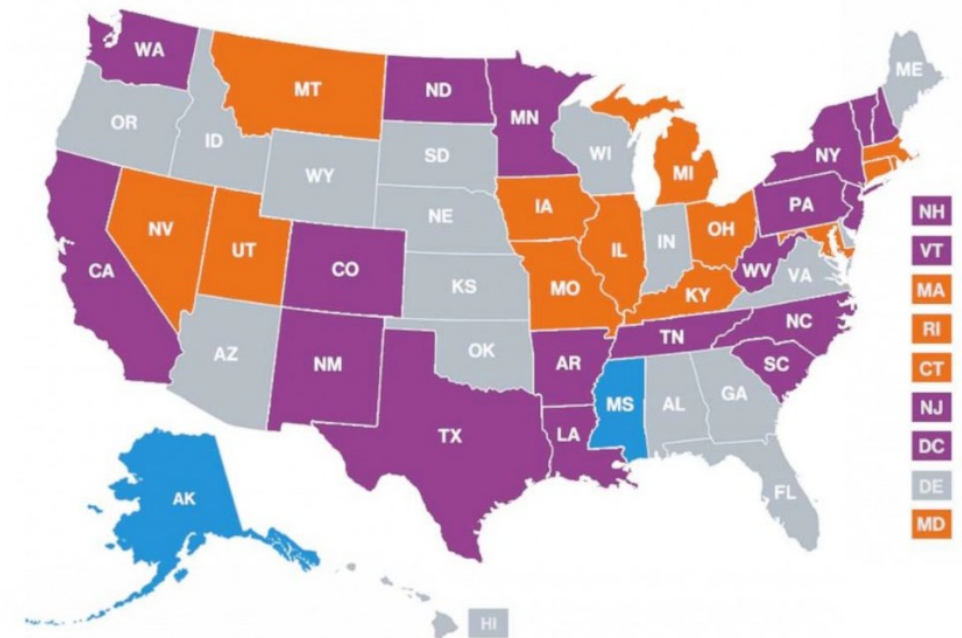
THE LAST MILE...



- Funding to support administration of vaccine – 30% of patients are uninsured
- Funding to support community-based partnerships
- Loosening of guidance to an age-based system

States Fully Open for Vaccination

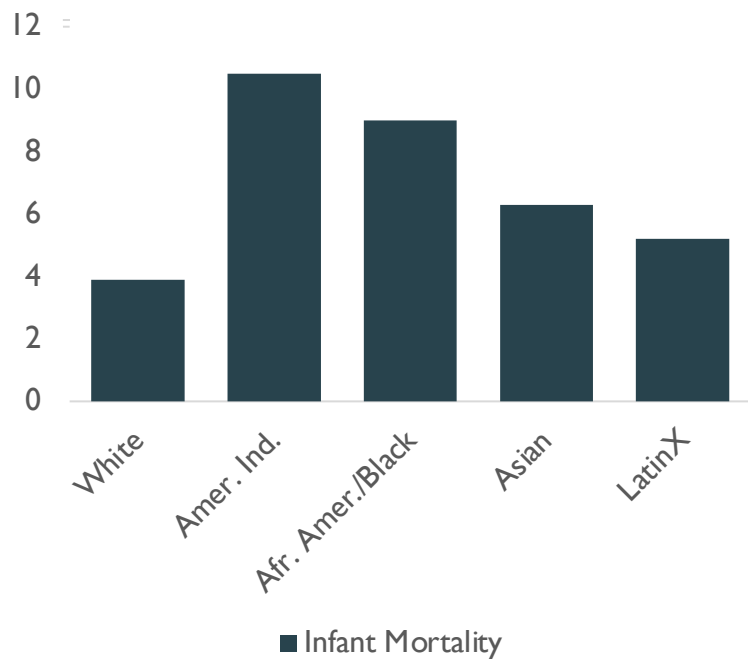
- Expanded vaccine eligibility to anyone 16+
- Open vaccinations to anyone 16+ soon
- Open for those 16+ with high-risk medical condition



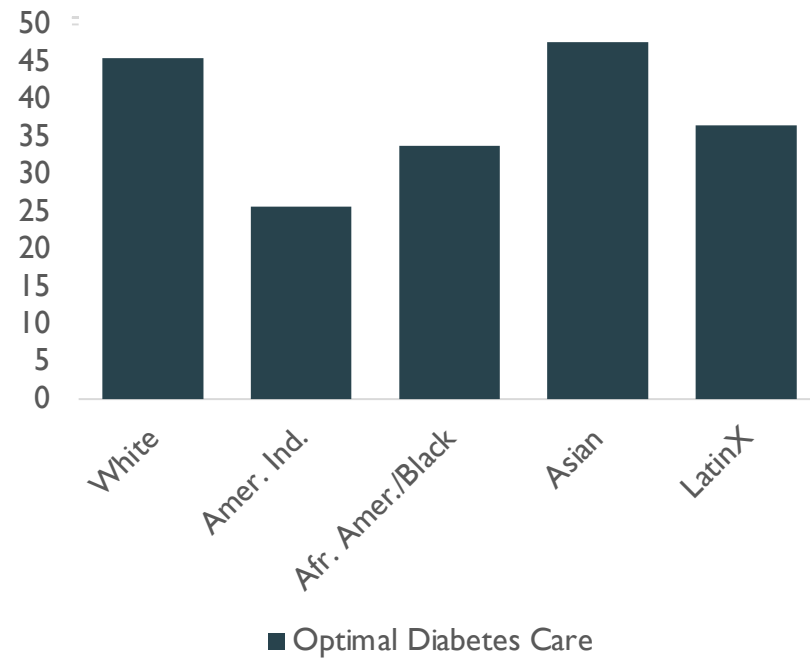
Source: as of 3/19/21

REMEMBER ME?

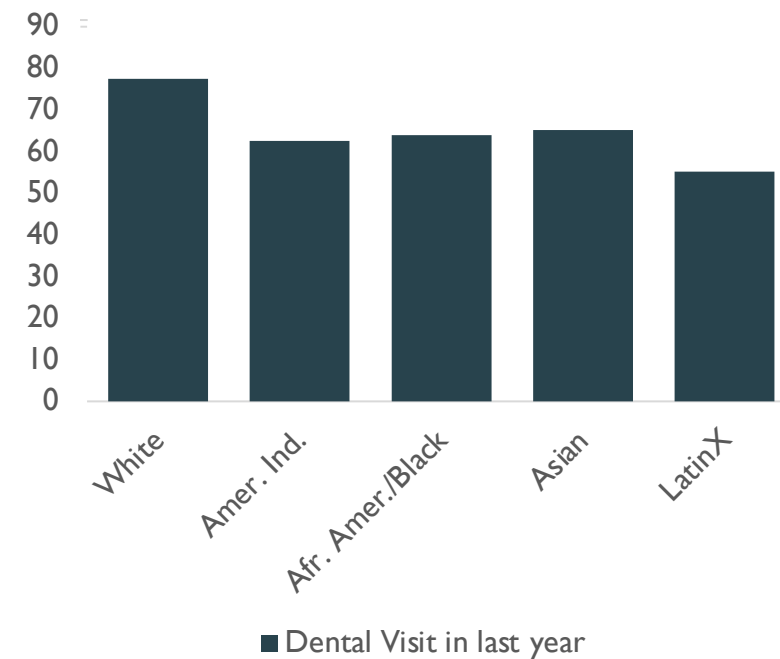
Infant Mortality



Optimal Diabetes Care



Dental Visits, Last Year



TAKEAWAYS

- The Covid-19 pandemic has laid bare (again!) the health care disparities that exist in our country and state
- Community Health Centers are uniquely positioned to reach disenfranchised populations - based on 50+ years of “meeting our patients where they are at” and addressing the social drivers of health
- Vaccine hesitancy is pronounced in BIPOC and rural populations
- Telemedicine has kept the Health Center – patient relationship in tact – (Audio Only Visits are Important)

ROLES for MNSure –

Learning from messaging to focus populations, promoting no-cost vaccinations, and pro-actively anticipating “pent-up” demand and cost increases.