

The Value and Impact of CrescentCare

The health center provides tremendous value and impact to the communities they serve through **ECONOMIC STIMULUS**, **SAVINGS TO THE SYSTEM**, and **CARE FOR VULNERABLE POPULATIONS**. They have also played a critical role in **PUBLIC HEALTH EMERGENCY RESPONSE** as demonstrated by their **PANDEMIC RESPONSE**, providing testing, vaccination, and care in-person and virtually, bolstering the public health infrastructure in their communities. This report highlights their **2023 savings and contributions**.



ECONOMIC STIMULUS

268	343	611
HEALTH CENTER JOBS	OTHER JOBS	TOTAL JOBS
\$66.3 M	\$53.2 M	\$119.5 M
DIRECT HEALTH CENTER SPENDING	COMMUNITY SPENDING	TOTAL ECONOMIC IMPACT OF CURRENT OPERATIONS
\$2.4 M	\$10.3 M	\$12.7 M
STATE & LOCAL TAX REVENUES	FEDERAL TAX REVENUES	ANNUAL TAX REVENUES



SAVINGS TO THE SYSTEM

24%	\$13.6 M	\$22.6 M
LOWER COSTS FOR HEALTH CENTER MEDICAID PATIENTS	SAVINGS TO MEDICAID	SAVINGS TO THE OVERALL HEALTH SYSTEM



CARE FOR VULNERABLE POPULATIONS

(1.9%)	49,743	8,603	58,346
4-YEAR PATIENT GROWTH	CLINIC VISITS	VIRTUAL VISITS	TOTAL VISITS
12,826			
PATIENTS SERVED			
7.3%	75.2%	60.0%	
CHILDREN & ADOLESCENTS	LOW INCOME	IDENTIFY AS AN ETHNIC OR RACIAL MINORITY	
497	103	762	
AGRICULTURAL WORKERS	VETERANS	HOMELESS	



PANDEMIC RESPONSE

Over a four-year period (2020 through 2024), the health center played a critical role in PUBLIC HEALTH EMERGENCY RESPONSE as demonstrated by the public health role in pandemic response, targeting vulnerable populations and delivering:

TESTING		
15,764	9,389	46.6%
TOTAL IN-PERSON COVID TESTS	AT-HOME SELF-TEST DISTRIBUTION	FOR RACIAL/ETHNIC MINORITIES
VACCINES		
23,226	67.5%	
TOTAL COVID VACCINES	FOR RACIAL/ETHNIC MINORITIES	

SUMMARY OF 2023 ECONOMIC IMPACT AND TAX REVENUE

		Employment (# of FTEs)	Economic Impact	State & Local Tax Revenues	Federal Tax Revenues
Community Impact	Direct	268	\$66,316,494	\$851,834	\$6,528,102
	Indirect	167	\$23,344,414	\$502,761	\$1,690,880
	Induced	176	\$29,817,394	\$1,062,515	\$2,087,564
	Total	611	\$119,478,301	\$2,417,111	\$10,306,547
				\$12,723,657	

REFERENCES AND DATA SOURCES

- Savings to the System: Nocon et al. Health Care Use and Spending for Medicaid Enrollees in Federally Qualified Health Centers Versus Other Primary Care Settings. American Journal of Public Health: November 2016, Vol. 106, No. 11, pp. 1981-1989.
- Economic Stimulus: Economic impact was measured using 2023 IMPLAN Online from IMPLAN Group LLC, IMPLAN System (data and software), 16905 Northcross Dr., Suite 120, Huntersville, NC 28078, www.IMPLAN.com. Learn more at www.caplink.org/how-economic-impact-is-measured.
- “Low Income” refers to those with earnings at or below 200% of federal poverty guidelines.
- Care for Vulnerable Populations: Bureau of Primary Health Care, HRSA, DHHS, 2023 Uniform Data System.
- Full-Time Equivalent (FTE) of 1.0 is equivalent to one full-time employee. In an organization that has a 40-hour work week, an employee who works 20 hours per week (i.e., 50 percent of full time) is reported as “0.5 FTE.” FTE is also based on the number of months the employee works. An employee who works full time for four months out of the year would be reported as “0.33 FTE” (4 months/12 months).
- COVID tests and vaccines data comes from data reported by health centers from the HRSA Health Center COVID-19 Survey (from the first survey conducted on April 3, 2020, through the last survey on September 6, 2024). Learn more at <https://bphc.hrsa.gov/emergency-response/coronavirus-health-center-data>.

ACKNOWLEDGEMENTS

Capital Link is a non-profit organization that has worked with hundreds of health centers and primary care associations for nearly 30 years to plan for sustainability and growth, access capital, improve and optimize operations and financial management, and articulate value. We provide an extensive range of services, customized according to need, with the goal of strengthening health centers—financially and operationally—in a rapidly changing marketplace.

Capital Link maintains a database of over 21,000 health center audited financial statements from 2005 to 2023, incorporating nearly 85% of all health centers nationally in any given year. This proprietary database also includes UDS data from 2005 through 2023, enabling us to provide information and insights tailored to the industry. For more information, visit us at www.caplink.org.