

## Health Center Program Terminology Tip Sheet

For NCA Publications

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Most National Cooperative Agreement (NCA) recipients develop publications and other resource materials referencing health centers, Health Center Program grantees, Federally Qualified Health Centers (FQHCs), and/or FQHC Look-Alikes. This tip sheet is designed to promote accuracy and consistency across NCA-supported publications in the use of these terms.

**The terms Health Center Program Grantee, FQHC Look-Alike, FQHC, health center, and community health center are not interchangeable.** Each term has a specific meaning in relation to the Health Center Program:

### Health Center Program Grantee

- Health Center Program grantees are organizations that receive grants under the Health Center Program as authorized under section 330 of the Public Health Service Act, as amended. They are also sometimes referred to as “federally-funded health centers” or “HRSA-funded health centers.”
- The Bureau of Primary Health Care (BPHC), within the Health Resources and Services Administration (HRSA), administers the Health Center Program and provides on-going oversight of both Health Center Program grantees and FQHC Look-Alikes (described below).
- The majority of Health Center Program grantees are funded to serve a general underserved community or population; however, some grantees receive funding to specifically target one of three statutorily recognized special populations: migrant and seasonal farmworkers and their families; persons experiencing homelessness; and/or residents of public housing. Many Health Center Program grantees receive funding to serve a combination of underserved populations.
- A Health Center Program grantee may operate a single site or multiple sites within a defined service area.

### FQHC Look-Alike (FQHC LA)

- FQHC Look-Alikes are health centers that have been certified by the Centers for Medicare and Medicaid Services (CMS), based on recommendations provided by HRSA/BPHC, as meeting all Health Center Program requirements. FQHC LAs do not receive funding under the Health Center Program.
- Similar to Health Center Program grantees, most FQHC LAs serve a general community, but some do receive designations to target migrant and seasonal farmworkers and their families, persons experiencing homelessness, and/or residents of public housing.
- A single FQHC LA may operate a single site or multiple sites within a defined service area.

### Community Health Center (CHC)

- The term “Community Health Center” is not defined in the section 330 statute, and there is no universal agreement on its meaning. It is commonly used to refer to the subset of Health Center Program grantees that receive funding to target a general underserved community or population (as opposed to targeted funding to serve one of the statutorily

defined special populations: migrant/seasonal farmworkers and their families, persons experiencing homelessness, and/or residents of public housing). This term may also include FQHC LAs that target a general underserved community/population.

- Using “CHC” to refer to all Health Center Program grantees and FQHC LAs is not technically accurate because it does not include those grantees and LAs that focus exclusively on one or more special populations.

#### Federally-Qualified Health Center (FQHC)

- The term FQHC is defined in the Medicare and Medicaid statutes (Titles XVIII and XIX of the Social Security Act, respectively). It is used by CMS to indicate that an organization/entity is approved to be reimbursed under Medicare and Medicaid using specific methodologies (laid out in statute) for FQHCs.
- CMS considers each permanent and seasonal site operated by a Health Center Program grantee or FQHC LA to be a separate FQHC. Thus a single Health Center Program grantee or FQHC Look-Alike may consist of multiple FQHCs.
- There are three types of entities that are eligible to apply to CMS to be reimbursed under the FQHC payment methodologies:
  - Individual permanent and seasonal sites of Health Center Program grantees;
  - Individual permanent and seasonal sites of FQHC Look-Alikes; and
  - Outpatient health clinics associated with tribal or Urban Indian Health Organizations (UIHOs). HRSA does not administer or oversee the operation of these organizations.
- Simply being a Health Center Program grantee or FQHC Look-Alike does not automatically make a site an FQHC. Each site must also go through an extensive enrollment process with Medicare and its state Medicaid agency to be approved as an FQHC.

#### Health Center

- Health center is a non-specific term that does not specifically indicate whether an entity is a Health Center Program grantee, an FQHC Look-Alike, or an FQHC.

**If you are seeking a general term to refer to all Health Center Program grantees (including those who target only special populations),** BPHC recommends using the term “Health Center Program grantees” early in the document with clarifying language on the use of the term within the document. If there is interest in emphasizing the community-based nature of health centers, the document can begin by using the term “Community Health Centers and other Health Center Program grantees” early on. In both cases, this terminology can be shortened to “grantees” later in the document, provided that an explanation such as the following is included:

“In this document, unless otherwise noted, the term “grantees” is used to refer to organizations that receive grants under the Health Center Program as authorized under section 330 of the Public Health Service Act, as amended. It does not refer to FQHC Look-Alikes or clinics that are sponsored by tribal or Urban Indian Health Organizations, except for those that receive Health Center Program grants.”

**If you are seeking a general term to refer to all Health Center Program grantees (including those who target only special populations) and FQHC Look-Alikes**, BPHC recommends using the term “health center” with clarifying language on the use of the term within the document. If there is interest in emphasizing the community-based nature of health centers, the document can begin by using the term “Community Health Centers and other FQHCs.” In both cases, this terminology can be shortened to “health centers” later in the document, provided that an explanation such as the following is included:

“In this document, unless otherwise noted, the term “health center” is used to refer to organizations that receive grants under the Health Center Program as authorized under section 330 of the Public Health Service Act, as amended (referred to as “grantees”) and FQHC Look-Alike organizations, which meet all the Health Center Program requirements but do not receive Health Center Program grants. It does not refer to FQHCs that are sponsored by tribal or Urban Indian Health Organizations, except for those that receive Health Center Program grants.”

**Improper use of these terms leads to confusion about which entities are or are not included in specific activities or programs.** Examples of recent misstatements include:

- “The Health Center Program Requirements apply to all CHCs.” This is misleading, as it does not clarify that the requirements also apply to all Health Center Program grantees and FQHC LAs that target special populations.
- “FTCA provides coverage to FQHCs....” This is incorrect, as only Health Center Program grantees are eligible to be deemed under the Federal Torts Claim Act (FTCA). It does not cover FQHC Look-Alikes or clinics administered by Urban Indian Health Organizations that are not Health Center Program grantees.