

North Carolina Rural Health Centers

2023 Profile (Data from State Fiscal Year 2023 and current as of 6/30/2023)

Grant Facts

\$2.9M

Grant funding appropriated from the General Assembly

96,965

Patients served

12,944

Uninsured patients served

17,788

Medically vulnerable patient encounters for Medicaid, Medicare, underinsured, and uninsured

\$32.27

Average annual contribution by ORH per patient

Performance Measures



75%

Patients with well controlled diabetes, as evidenced by A1c levels <= 9



68%

Patients with well controlled hypertension, as evidenced by blood pressure levels <= 140/90



64%

Patients screened for obesity through Body Mass Index (BMI) testing



64%

Patients screened for tobacco cessation and treatment

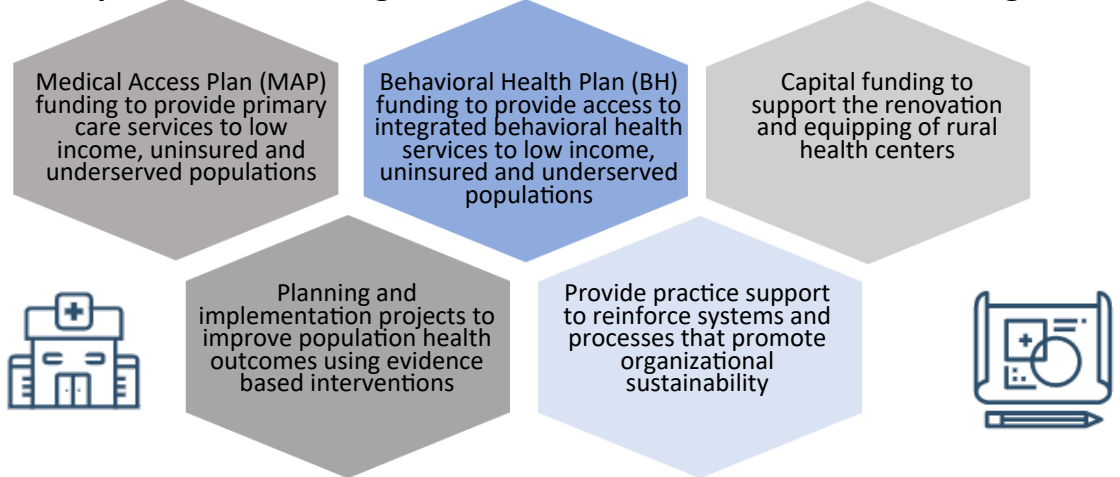
Overview and Importance

Since 1973, North Carolina's community owned State Designated Rural Health Centers have provided quality primary medical services in underserved rural communities, in addition to piloting new behavioral health programs with grantees. By supporting these centers, the overall health of residents can be improved, and costly emergency department visits can be avoided. Our 18 centers serve as medical homes for vulnerable populations, including uninsured, underinsured, Medicaid and Medicare patients and saw 96,965 patients this year, of these 12,944 were uninsured. Without support from ORH, many patients would lose local access to quality primary healthcare.

Highlights

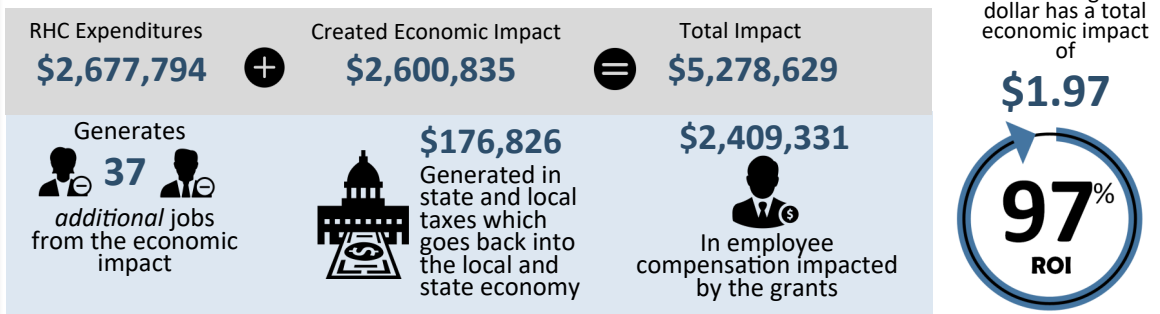
In 2023, State Designated Rural Health Centers served an additional 3,693 patients (+4%). And witnessed an increase of 5,054 (+40%) medically vulnerable patient encounters. There were improvements across the board for all of the program's quality performance measures witnessing percentage point increases for patients with Body Mass Index Screening (+14%), Tobacco Cessation and Treatment (+2%), Well Controlled Diabetes (+5%) and Well Controlled Hypertension (+8%).

Purpose of State Designated Rural Health Center Grant Funding:



Return On Investment and Economic Impact

Source: IMPLAN



\*Economic impact is estimated to be much greater because improved health outcomes can lead to fewer missed work days, reduced health care costs, and reduced premature morbidity and mortality. Some expenses such as out of state purchases, overhead, and rollover payments are not captured for ROI and economic impact.





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Technical Assistance

219 Activities for
110 Organizations/Individuals
Provided by ORH Staff

Disseminate Rural Health Information

90 Activities

Site Development Assistance

47 Activities

Community Development/ Assistance

30 Activities

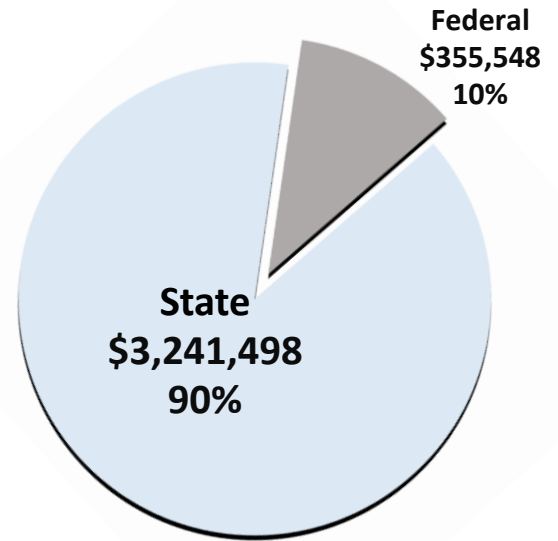
Clinic/Staff Assistance

34 Activities

Other Activities

18 Activities

Total Program Funding



Program Reach

18

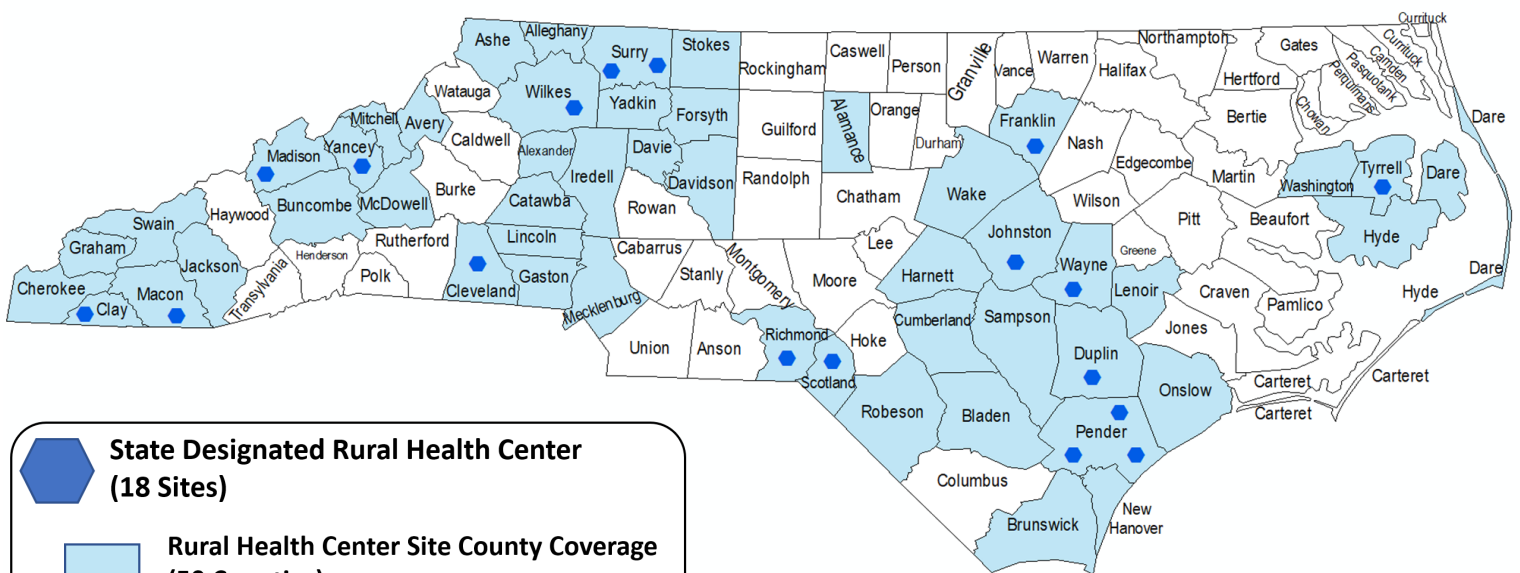
Sites Funded

50

Total Counties Covered

34

Rural Counties Covered



Legend for map: State Designated Rural Health Center (18 Sites) and Rural Health Center Site County Coverage (50 Counties)

If you have further questions, please contact: Dorothea Brock, Operations Manager
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