

Program #40031 - FQHC-Pharmacy

FY 2026 Proposed

Department: Health Department Program Contact: Michele Koder

Program Offer Type: Operating Program Offer Stage: Proposed

Related Programs:

Program Characteristics:

Program Description

The Health Center welcomes all county persons, regardless of insurance status, ability to pay, or documentation status. Our health center prioritizes culturally and linguistically appropriate care, supporting patients in a way that works for them. Over 60% of our patients identify as people of color, and more than 38% require interpretation with 59% of our patients indicating they are best served in a language other than English. This includes more than 100 different languages. 84% of our patients have Medicaid, 3% have no insurance, and 95% of our clients live below 200% of the Federal Poverty Level (FPL). All programs within the Health Center are committed to improving health outcomes, reducing health disparities and ensuring affordable, quality access to healthcare.

Health Center pharmacies serve nearly 7,000 clients per month. Medications are primarily purchased through the 340B drug pricing program (a US federal government program created in 1992 that requires drug manufacturers to provide outpatient drugs to eligible covered entities at significantly reduced prices). Different contracts are used to provide a limited supply of medications for individuals who are released from County Corrections, Expedited Partner Therapy, and naloxone to community partners and first responders. The pharmacies tailor services to each individual and provide voice enabled prescription labels, dual language labels, customized adherence packaging, and limited mail order services.

Revenue generated by the pharmacies is used to provide discounted medications for underinsured and uninsured clients no client is denied medication due to inability to pay. Revenue is also used to support other services within ICS, including but not limited to, medication disposal services and services provided by the HIV Health Services Center.

The Clinical Pharmacy program currently consists of 11 clinical pharmacists who are embedded in primary care clinics and the HIV Health Services Center. Clinical pharmacists offer essential services that go beyond dispensing medication: they assist clients and providers with medication management and adherence support, conduct medication reconciliation upon hospital discharge, and independently manage chronic conditions such as diabetes and hypertension.

Performance Measures								
Measure Type	Performance Measure	FY24 Actual	FY25 Budgeted	FY25 Estimate	FY26 Target			
Output	Prescription Volume number	415,215	410,000	430,000	450,000			
Outcome	Average Prescription Cost	\$36	\$37	\$37	\$36			
Outcome	Capture Rate	56%	58%	56%	60%			
Quality	Adherence Support	1,947	2,100	2,000	2,100			

Performance Measures Descriptions

- 1. Prescription Volume (prescriptions filled) reflects the number of prescriptions filled during the fiscal year.
- 2. Average Prescription Cost reflects the costs associated with filling a prescription minus the actual cost of the medication.
- 3. Capture Rate is the percentage of prescriptions filled by primary care providers that are filled at County pharmacies.
- 4. Adherence Support refers to the number of clients enrolled in appointment-based refills and medication synchronization services or who receive specialized packaging to assist in the proper use of medications.

Legal / Contractual Obligation

Various grants require the provision of pharmacy services. State mandated public health services are provided. Pharmacy services are a requirement of the Bureau of Primary Care 330 grant and those services and revenue must be in compliance with Health Resources and Services Administration (HRSA) Community Health Center Program operational and fiscal requirements. In addition, pharmacies must comply with all 340B Drug Pricing Program, Oregon Board of Pharmacy and Drug Enforcement Administration (DEA) regulations and are accredited by The Joint Commission.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2025	2025	2026	2026
Personnel	\$0	\$14,065,528	\$0	\$12,222,722
Contractual Services	\$0	\$643,450	\$0	\$178,924
Materials & Supplies	\$0	\$24,289,154	\$0	\$27,114,970
Internal Services	\$0	\$4,764,305	\$0	\$3,570,340
Total GF/non-GF	\$0	\$43,762,437	\$0	\$43,086,956
Program Total: \$43,762,437		\$43,086,956		
Program FTE	0.00	62.73	0.00	56.50

Program Revenues							
Service Charges	\$0	\$43,762,437	\$0	\$43,086,956			
Total Revenue	\$0	\$43,762,437	\$0	\$43,086,956			

Explanation of Revenues

This program generates \$1,916,525 in indirect revenues.

Pharmacy is funded exclusively through prescription fees (third party reimbursements) and patient fees.

Federal \$ 42,790,359

- Intergovermental (FFS Medicaid/Medicare)

\$ 296.597

- Patient Fees/Charges for services (Self-Pay, Health Center Fees)

Significant Program Changes

Last Year this program was: FY 2025: 40031 FQHC-Pharmacv

A post-graduate clinical pharmacy residency program beginning in FY 2026 is designed to increase access to and enhance clinical pharmacy services. A clinical pharmacist was added at Mid County to maintain FTE for direct patient care when an existing clinical pharmacist transitions to the residency program director/ manager role. A 1.00 FTE program specialist was added to oversee the contract pharmacy program. Pharmaceutical expenses and revenue generated by the program were moved from the Pharmacy to the HIV Health Services Center resulting in an increased usage of beginning working capital and revenue service charges. Pharmacy contractual services decreased due to a decreased use of agency staff. FTE decreased due to having moved clinical pharmacists to the health center program offers where services are being provided. Materials and services increased due to new expenses such as pharmaceuticals for the new Fernhill location.