

Division: Integrated Clinical Services

Program Characteristics:

Program Description

This program offer funds the Patient Access Center (PAC), which is the point of entry for new and established patient scheduling. PAC provides appointments and referrals in collaboration with Multnomah County and other community organizations, ensuring consistent patient information and tracking. PAC also provides information for the Multnomah County Health Department’s (MCHD) medical, dental, and social services as well as key community service partners. PAC’s Language Services program is the central coordinator for thousands of patient interpretation requests and translations each year for multiple programs and services. Language Services provides interpretation in over 80 languages including sign language for all Multnomah County Community Health Center services, as well as for established patients who receive specialty care in the community. The team provides comprehensive coordination of written translation for clinical and non-clinical programs and services. This critical service ensures that patients can successfully move through the Health Center’s Refugee and Screening Program. It ensures that patients with limited English proficiency receive culturally competent interpretation throughout all of the MCHD programs.

In our primary care clinics, the referral program connects patients with specialty services. Referral coordinators work with insurance companies to find the right specialists for each patient’s needs. The referrals team manages communication between primary care medical providers and specialists to keep the process moving smoothly. Each year, this team successfully handles more than 55,000 referrals. The Health Engagement and Assessment Team (HEAT) is committed to enhancing meaningful interactions within county healthcare systems. Their focus is particularly on newly enrolled clients and the screening of social determinants of health.

Equity Statement

The Multnomah County Community Health Center’s vision is to ensure all people in our community receive reliable, inclusive, and high-quality healthcare. We do this with a workforce that reflects the diversity of our communities and by reducing the financial, administrative, language, and social barriers that contribute to health inequities. Our core values emphasize providing care that is tailored to each individual’s needs and centered on equity and measurable health outcomes.

Revenue/Expense Detail

	2026 General Fund	2026 Other Funds	2027 General Fund	2027 Other Funds
Personnel	\$0	\$7,359,950	\$0	\$8,145,201
Contractual Services	\$0	\$510,000	\$0	\$201,054
Materials & Supplies	\$0	\$169,465	\$0	\$159,583
Internal Services	\$0	\$1,865,655	\$0	\$1,968,751
Total GF/non-GF	\$0	\$9,905,070	\$0	\$10,474,589
Total Expenses:	\$9,905,070		\$10,474,589	
Program FTE	0.00	56.80	0.00	59.80
Program Revenues				
Intergovernmental	\$0	\$906,600	\$0	\$906,600
Other / Miscellaneous	\$0	\$2,440,000	\$0	\$1,877,700
Beginning Working Capital	\$0	\$569,548	\$0	\$569,548
Service Charges	\$0	\$5,988,922	\$0	\$7,120,741
Total Revenue	\$0	\$9,905,070	\$0	\$10,474,589

Performance Measures

Performance Measure	FY25 Actual	FY26 Estimate	FY27 Target
Average telephone abandonment rate (goal: at or below 15%)	20%	18%	15%
Average of primary care referrals actioned following receipt (new performance measure)	-	94%	98%