



Health Department FY 2026 Approved Budget Community Health Center (Integrated Clinical Services)

**Presented to the
Board of County Commissioners**

**Multnomah County
May 22, 2025**

Located at: www.multco.us/budget

Agenda

- 1 Introduction
- 2 Community Health Center Board
- 3 Health Center Overview
- 4 Budget by Major Investments
- 5 Special Populations Served
- 6 Local and Federal Legislative Issues
- 7 Questions
- 8 Appendix

Community Health Center Board



Community Health Center Board

Volunteer, patient-majority Board provides governance on Health Center services, including budget, care policies, fees, and locations. Their lived experience is their best quality for membership; over half of the Board identifies as a person of color. The Board has been in operation since 1980.

Community Health Center Board Budget Process



Planning
and
Evaluation

Modeling
and
Program
Review

Final
Proposals

October-November:

- Comprehensive All Staff feedback across all sites in October
- Strategic Planning Kick Off
- Early prioritization and review of patient care areas

December - January:

- Staffing models and scenarios analyzed with different proposals

February - April:

- Discussion on impact and expected outcomes across a three year strategic plan
- Final CHCB FY26 Budget Approval

Community Health Center Board FY26 Priorities



\$100.4M in Primary Care Services

- Growth of care teams at all Health Centers, including HIV Health Services Center and Student Health
- Increases access for integrated behavioral health
- Workforce pathways



\$43.1M in Pharmacy Services

- Maintains current access + workforce pathways
- Add new Fernhill location
- Adds staffing to support contract pharmacy opportunities



\$34M in Dental Services

- Maintains current access + workforce pathways
- Maintains School of Community and Oral Health
- Add new Fernhill Location



\$2.4M in technology investments

- Epic Electronic Health Record Transformation
- Barcode scanners for patient safety
- Dental equipment upgrades

Community Health Center Board FY26 Priorities

The community health center budget will continue to provide a stable foundation for health care services during a time of increasing uncertainty for safety-net organizations.

Provides stability and support for the workforce



Maintains and develops additional access to services



Addresses areas of inefficiency and federal uncertainty





The Community Health Center

Our programs and services

Community Health Center - Our Vision



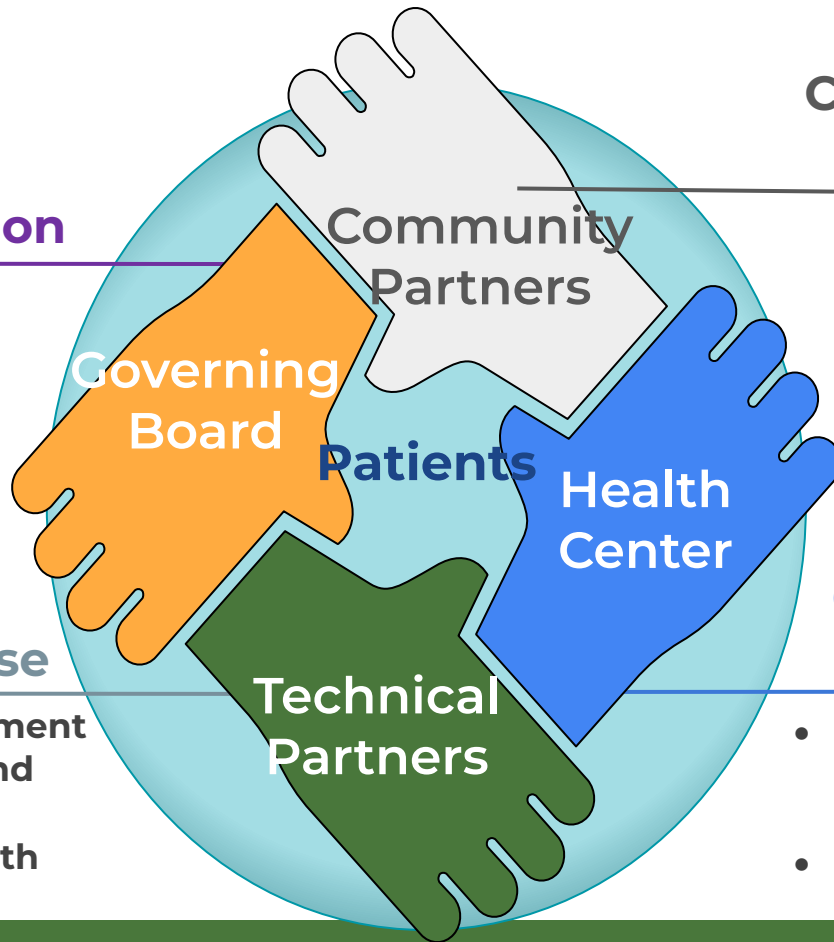
Community drives our approach to care

North Star and Vision

- Governing Board Consumer perspective
- Strategic and Fiscal oversight
- Follows federal HRSA compliance

Technical Expertise

- Training and development with OCHIN, OPCA, and NWRPCA
- National Platforms with NACHC



Collaboration and Commitment

- Evaluate, Collaborate, Improve
- Partnerships to meet local needs for the workforce and patients

Community Health Center

- Comprehensive primary care, dental, and pharmacy services
- Team based care

Our Health Center, by the numbers*

Dispensed over
430,000
prescriptions



Help with over
268,600 calls for
appointments,
transportation,
and coordination



Reaching more than 800
patients by mobile clinic

**Comprehensive
healthcare for nearly
60K individuals**



37,761
Primary Care
Patients

25,764
Dental
Patients

7,018
Student Health
Center Patients



More than 10,300
Behavioral
Health
Encounters

Support for nearly 12K
patients in social
needs coordination
and case
management



Over 24,000
telemedicine
appointments

*CY 2024 data, Jan - Dec 2024

Who We Serve

In 2024, nearly 60K patients trusted us with their care. We help any person, and will not turn away patients due to inability to pay for services.

95%

Patient incomes are under 200% federal poverty limit

10%

Patients identify as LGBTQIA+

45%

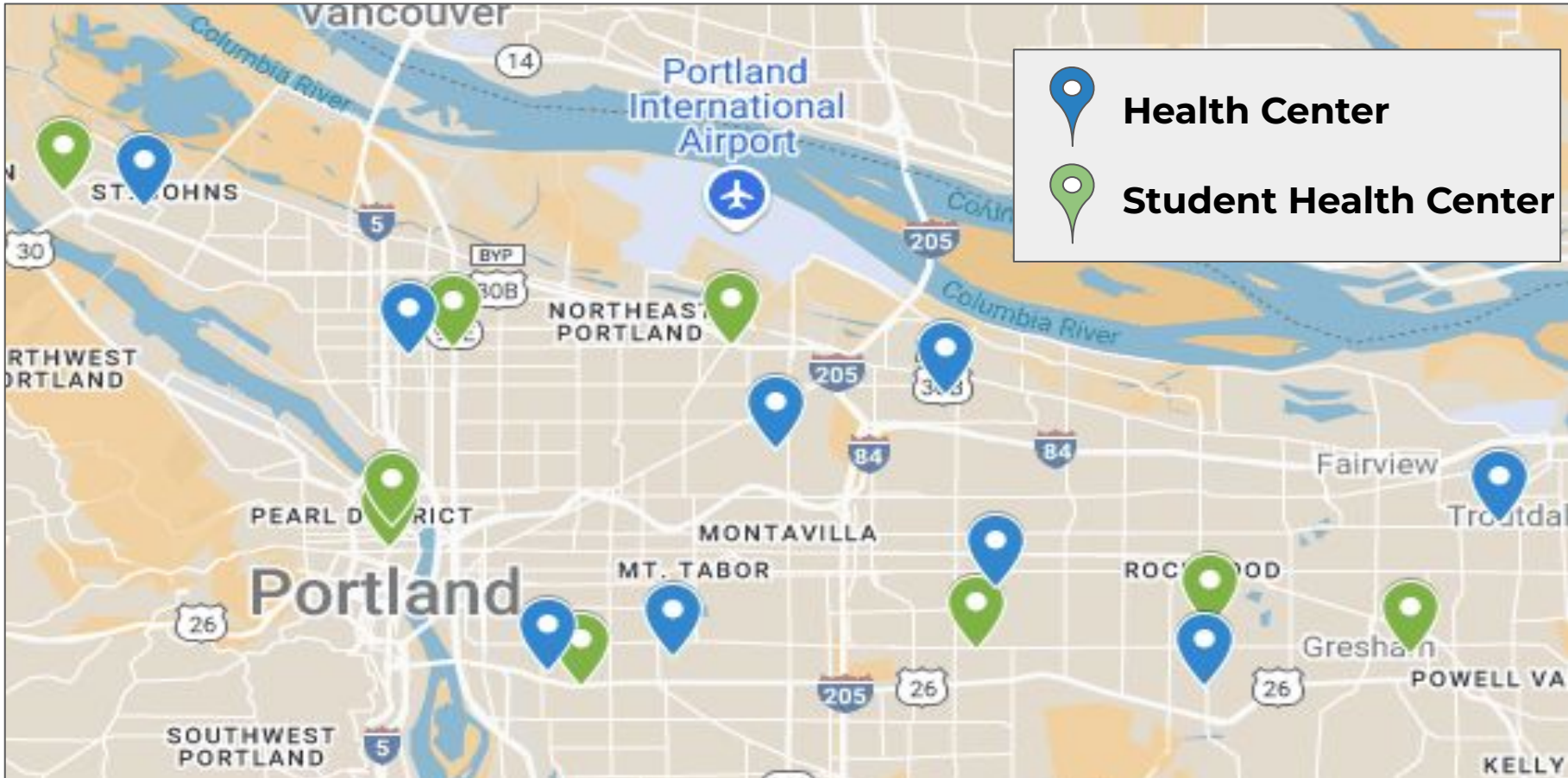
Patients who prefer to speak a non-English language

88%

Patients rely on a public insurance program, such as the Oregon Health Plan



Where We Provide Services



Meet Wheely McHealy, our mobile clinic



Some of our Service Locations

Behavioral Health Resource Center

Impact NW - Dancing Tree

Bybee Lake Hope Center

El Programa Hispano Católico

JOIN

Rose Haven

SnowCap Family Services

Portland Community College - SE
Campus

Dignity Village



FY 2026 Approved Budget

Overview

Comprehensive, high quality healthcare

The FY26 Community Health Center budget ensures we can continue providing high quality healthcare. The Health Center aims to improve access to existing patients while also expanding access to new patients.

1

Continuing our investments into a team-based care and **building the next generation**

2

Assuring the **medical home model** remains strong

3

Reinvesting support back into **the Health Center population**

Developing the next generation of primary care clinicians

Workforce development programs and continued investments are helping the Health Center rebuild and ready new health care professionals to support delivery of services. These investments also increase patient access to care.

Case Study:

New Advanced Practice Practitioners are hired as a “fellow” which allows for advanced learning time. Intentional time spent on provider development has resulted in improved retention rates and support for more patient access.¹

- Year one: 5 fellows with 100% retention rate.
- Year two: 4 fellows with 75% retention rate.
- Year three: 6 fellows (in progress year)

¹ Retention means that a fellow is hired as a permanent primary care provider after fellowship.



Developing the next generation of primary care, dental, and pharmacy teams

As part of our commitment to supporting the long-term investments in services, the Health Center launched multiple training pathways for the Expanded Function Dental Assistant (EFDA), Medical Assistants, and Pharmacy Technician roles. All three programs provide direct financial support for educational training as well as paid didactic hours

Case Studies:

- 9 trainees have engaged in the EFDA pathway program.
 - 5 Trainees will complete their didactic work in Summer 2025, and 2 have fully completed the program.
- 4 pharmacy health assistants are on track to complete the pharmacy technician program training this summer
- 4 medical health assistants are on track to complete the medical assistant program training this summer



Supporting the Medical Home Model

Team-based care depends not only on medical providers, but also seeks to match the patient population with care teams who are experts in medical, social, and cultural needs. This is sometimes referred to as a Medical Home model. Mid County Health Center introduced culturally specific case management, education, and navigator roles in 2024.

Case Study:

In late 2023, clinicians began to identify elevated levels of lead during refugee screening appointments. Teams began to introduce lead prevention education into health visits to address preventable poisonings.

We partnered with the Public Health's Environmental Health Program and Oregon Health Authority to conduct Lead prevention education classes. The Refugee Case Manager and Navigator from our Health Center has led this collaboration, assuring families understand how to reduce risks to their health at home.



Supporting the Medical Home Model

At our Health Center, there are dedicated staffing teams who help provide preventative care screenings and social need screenings to patients, even before stepping foot into a clinic. These roles can help us determine the best options for treating patients quickly, while also increasing the equity in who receives care by removing barriers to health literacy.

Case Study:

The Oregon Health Authority launched formal standard screening requirements for all patient-centered medical homes in 2025. These screening are intended to help providers understand the social drivers of health.

In the same year, our health center launched an updated symptom screening module, aimed to help non-licensed staff know when to elevate calls to nursing providers.

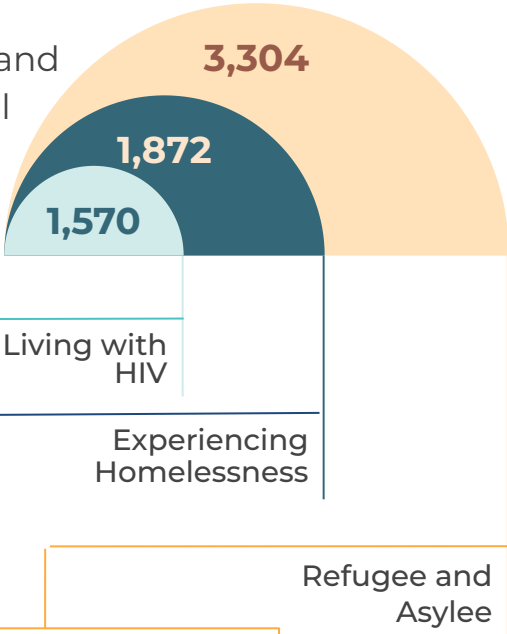
Both types of standard screenings reduce the burden of patients having to advocate for themselves through the use of medical terminology or knowing how to describe types of social resources they may be interested in.

Standard Screening

- 01 Social Drivers of Health (SDOH)
- 02 Screening program for call center agents

Supporting the Health Center Population

Health Center services are designed to reflect the neighborhoods and communities they operate within. Our Health Center serves several federally and locally recognized “special populations”.



- Rapid Start
- Aging with HIV
- Long Acting Injectable antiretroviral therapy (ART)

- Adherence packaging for medication
- Mobile Health, “Wheely McHealy” expansion

- Culturally specific expanded care team personnel
- Lead poisoning prevention education



Budget Goals



Increase access to the primary medical home model, including integrated behavioral health

- Status: Expansion of behavioral health on the mobile van has begun. Further expansion will come with FY26 new hires.
- Strategy: Address the team-based care model staffing ratios, to focus on more primary care and integrated behavioral health support.

Increase access to health center workforce development programs

- Status: Summer 2025 marks an exciting milestone for the Health Center's Grow Your Own programs, as all initiatives launched this year will celebrate staff completions. Strategy: Assure all service areas have a community-eligible training program.

Increase access to affordable medications

- Status: Increase pharmacy access at Fernhill location.
- Strategy: Improve visibility and awareness of the 340B savings available to patients.

“The dental assistant who saw me was very kind. I don't like going to the dentist; I have a lot of anxiety. It's hard for me to deal with that, and she was very kind. She helped me stay calm. ”



Budget Goals



Increase support for wrap-around and navigation services

- Status: SDoH screening began in FY25 with newly hired CHWs supporting transportation, food, utility, and housing insecurities.
- Strategy: Assure more staff roles help support the SDoH screening process and close gaps in referrals

Increase patient and community involvement in health center governance and service decisions

- Status: FY25 Board Governance trainings with the Northwest Regional Primary Care Association and Health Center Board led engagement on the 2025-2028 strategic plan
- Strategy: Introduce additional education, communication and engagement opportunities for both governing board and advisory committees.

“I felt very good about the care of the doctor, the young woman who took my blood, the nurse, and the guys at the pharmacy. They were very attentive and kind.”



Budget Goals



Strategic Capital Planning

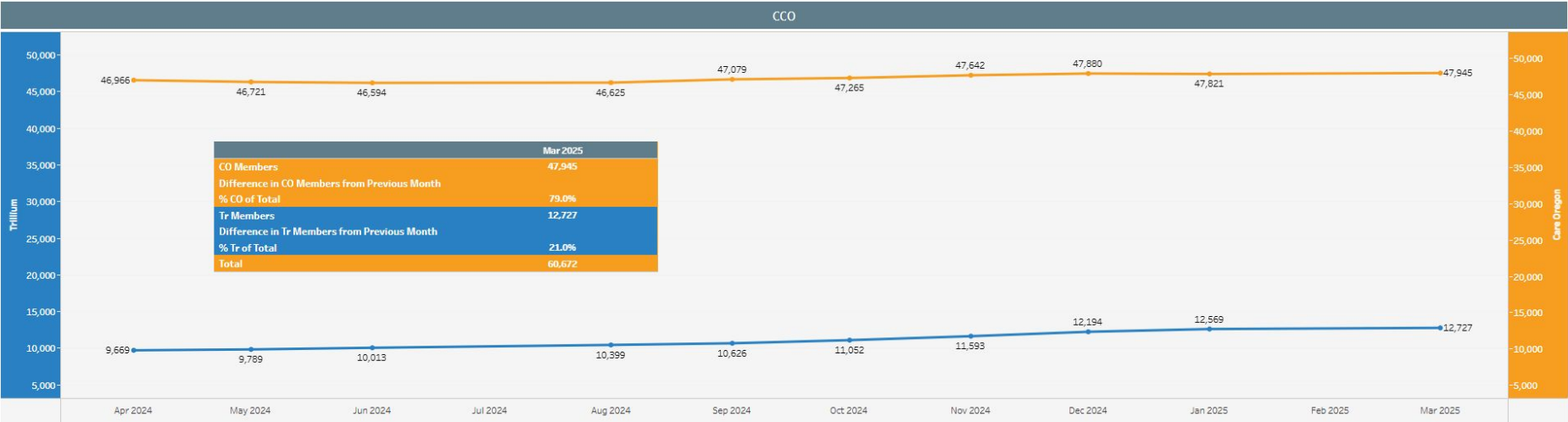
- Status: We continue to see high patient demand and expanding care team needs at the Mid County Health Center. Space at this location is limited, and the Community Health Center Board has prioritized this location for evaluation as part of capital planning
- Strategy: Perform an evaluation of the current and future needs at this location, including an analysis of renovation or construction options.
- This work will happen in collaboration with Department of County Assets

“The speed with which I got the appointment and the attention of the doctor were impressive. She was quick and explained well. She was kind to my child, and despite the fact that my child is young, he allowed himself to be treated by her because of the way she treated him.”



Rising patient assignments

Membership growth and assignment with Coordinated Care Organizations (CCO) remains strong - both CCOs in the metro region are seeing high patient retention

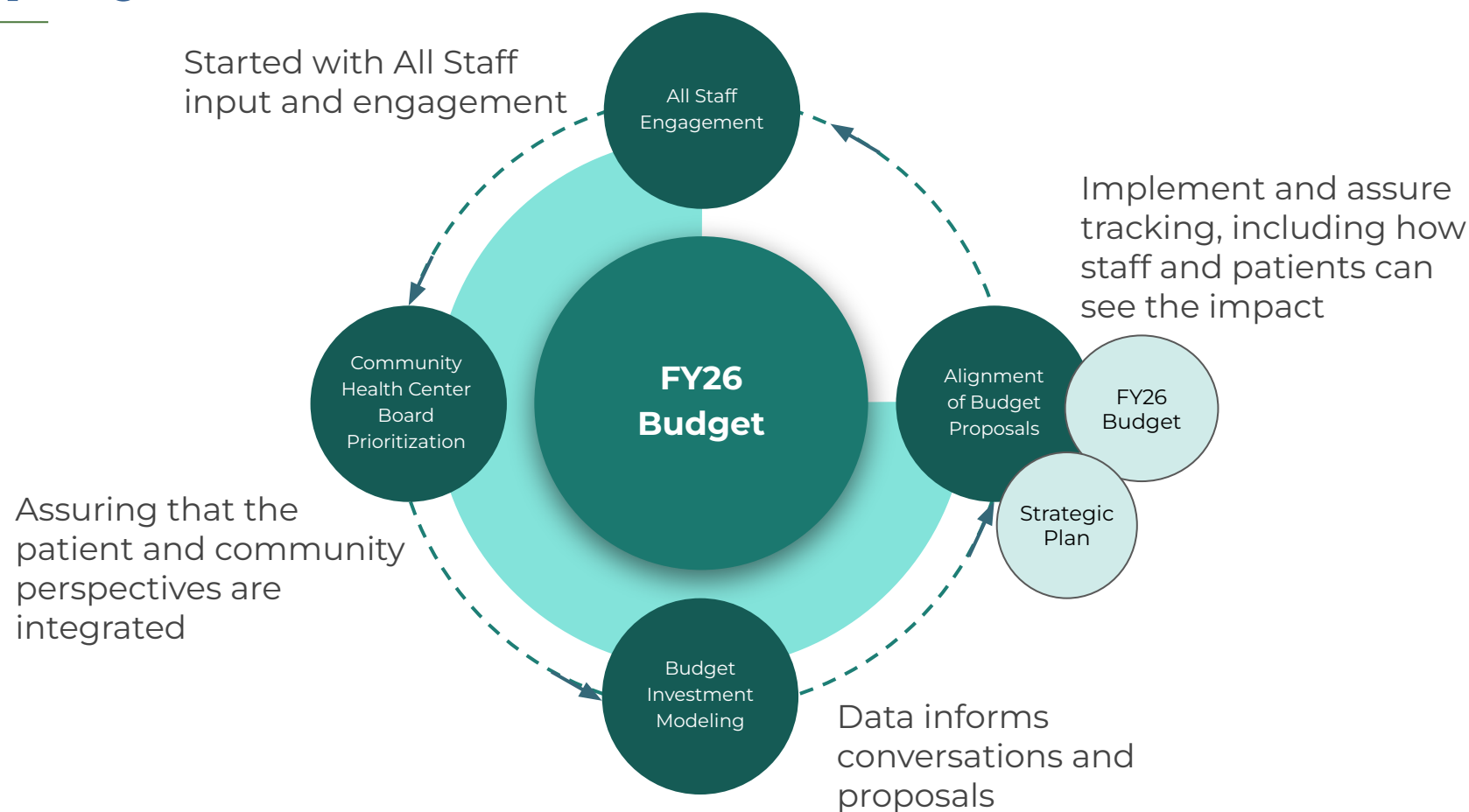


Our budget approach addresses population health needs and compliance obligations

- Oregon Health Plan and Medicaid evolution means we have to continuously build programs for the changing payor landscape and payment models
 - Value Based Care
 - Quality metrics
 - Total Cost of Care
- Right care, at the right time



Equity Process and Review



Integrated Clinical Services: Budget by the Numbers

\$216.8 Million

FY 2026 Approved Operating Budget

8.0%
\$16.1 Million

Increase from
FY 2025 Adopted Operating Budget

723.53
FTE



30.87
Increase
from
FY 2025
Adopted

\$300.4
Million
Total Budget

(includes cash transfers,
contingencies, and
unappropriated
balance)

Total Budget vs. Operating Budget

\$216.8 M **Operating Budget*** (focus of subsequent slides)

+

\$16.7 M **Contingency (All Funds)**

+

\$0 M **Internal Cash Transfers**

+

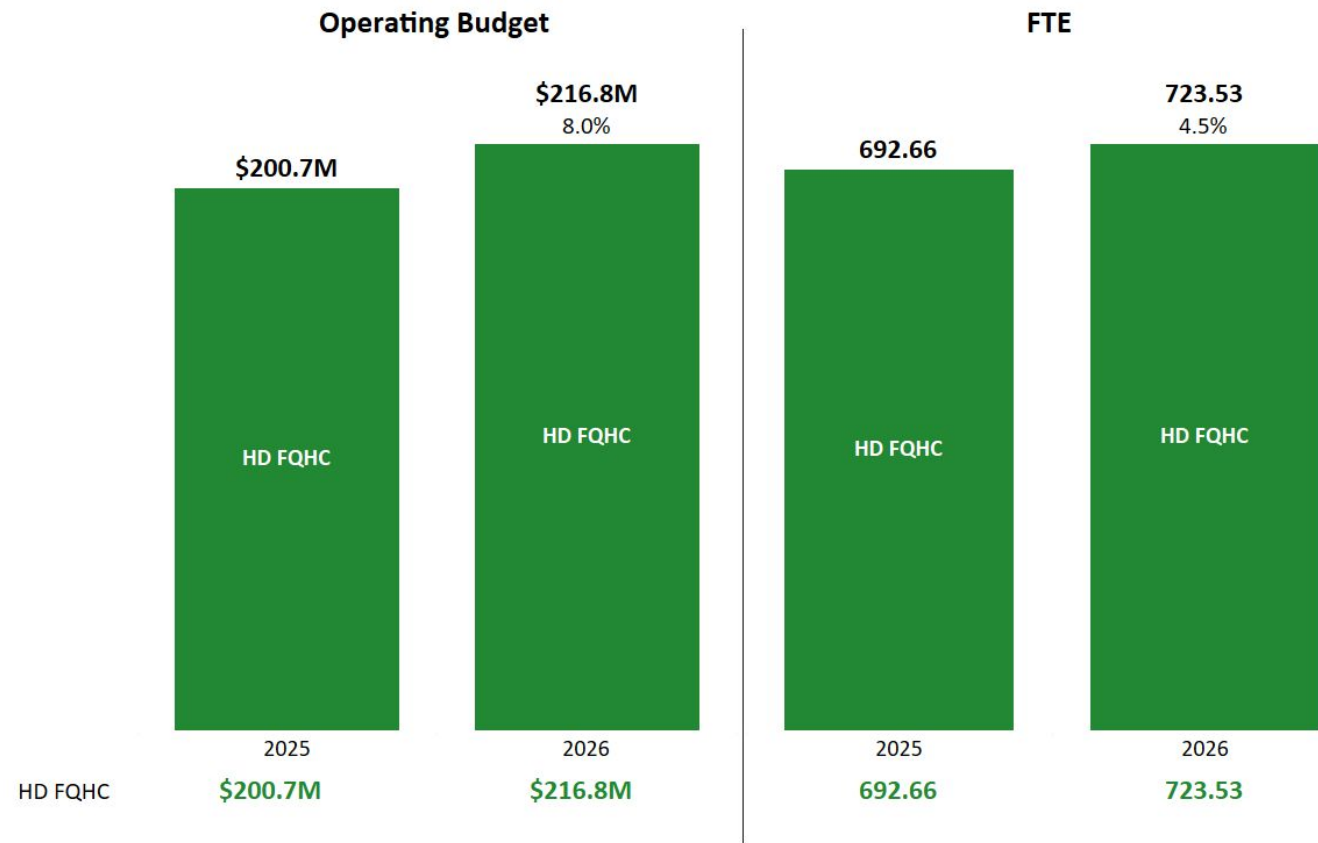
\$66.9 M **Reserves (Unappropriated Cash Balance)**

=

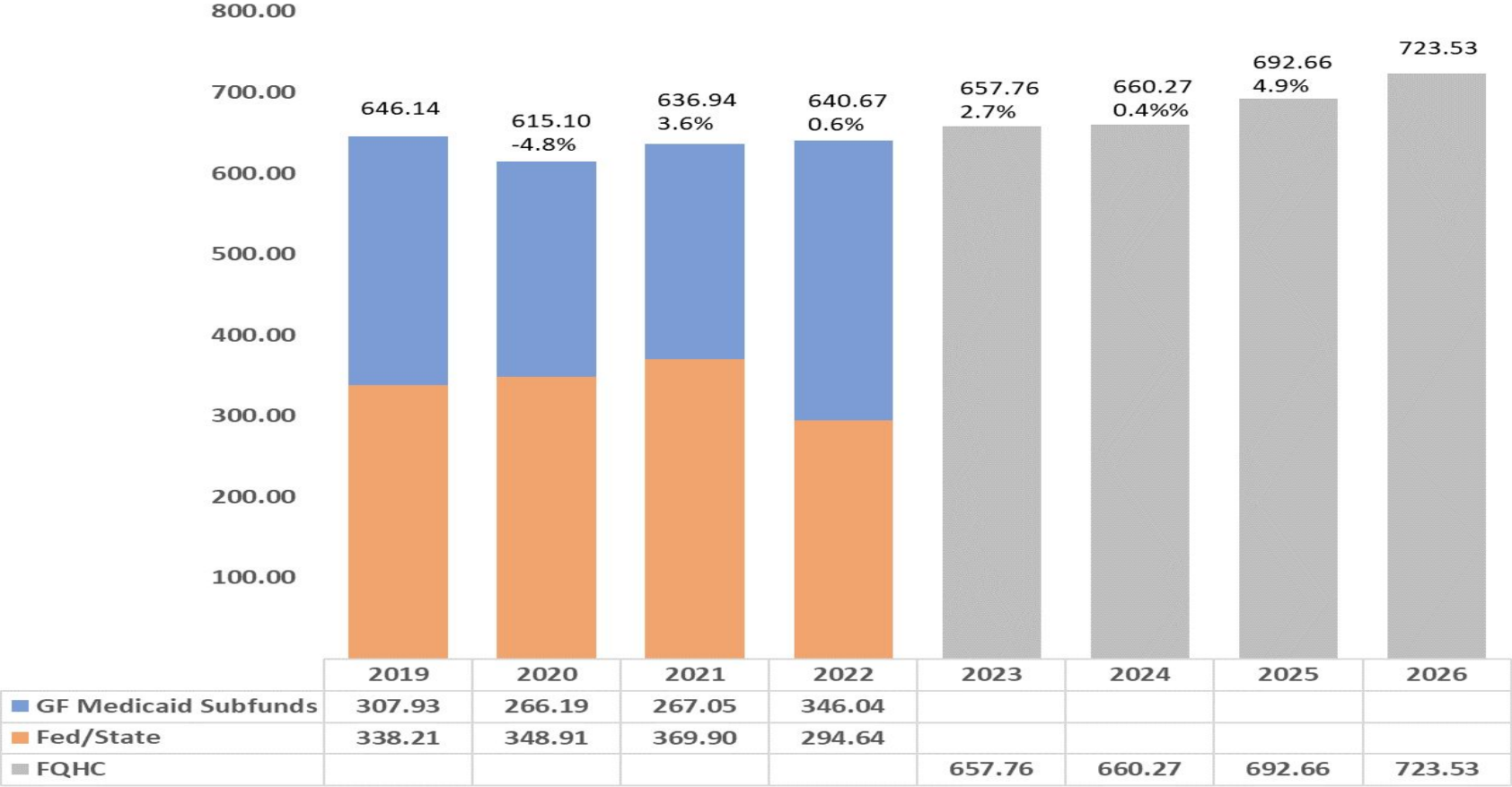
\$300.4 M **Total FQHC Budget**

**Avoids some double-counting; provides a clearer picture of what departments expect to spend in a year.*

Integrated Clinical Services: Operating Budget & FTE

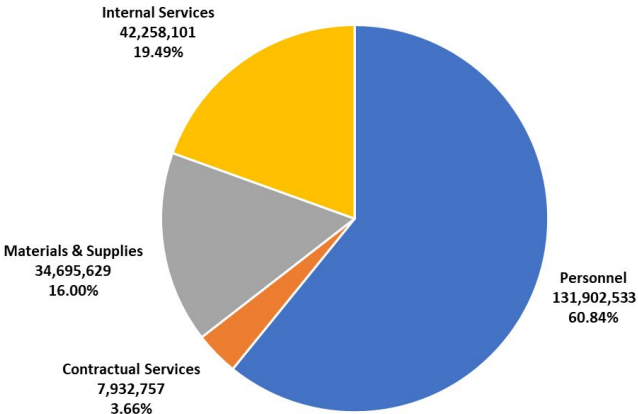


FTE Trend FY 2019-2026



Operating Budget by Category - \$216,789,020

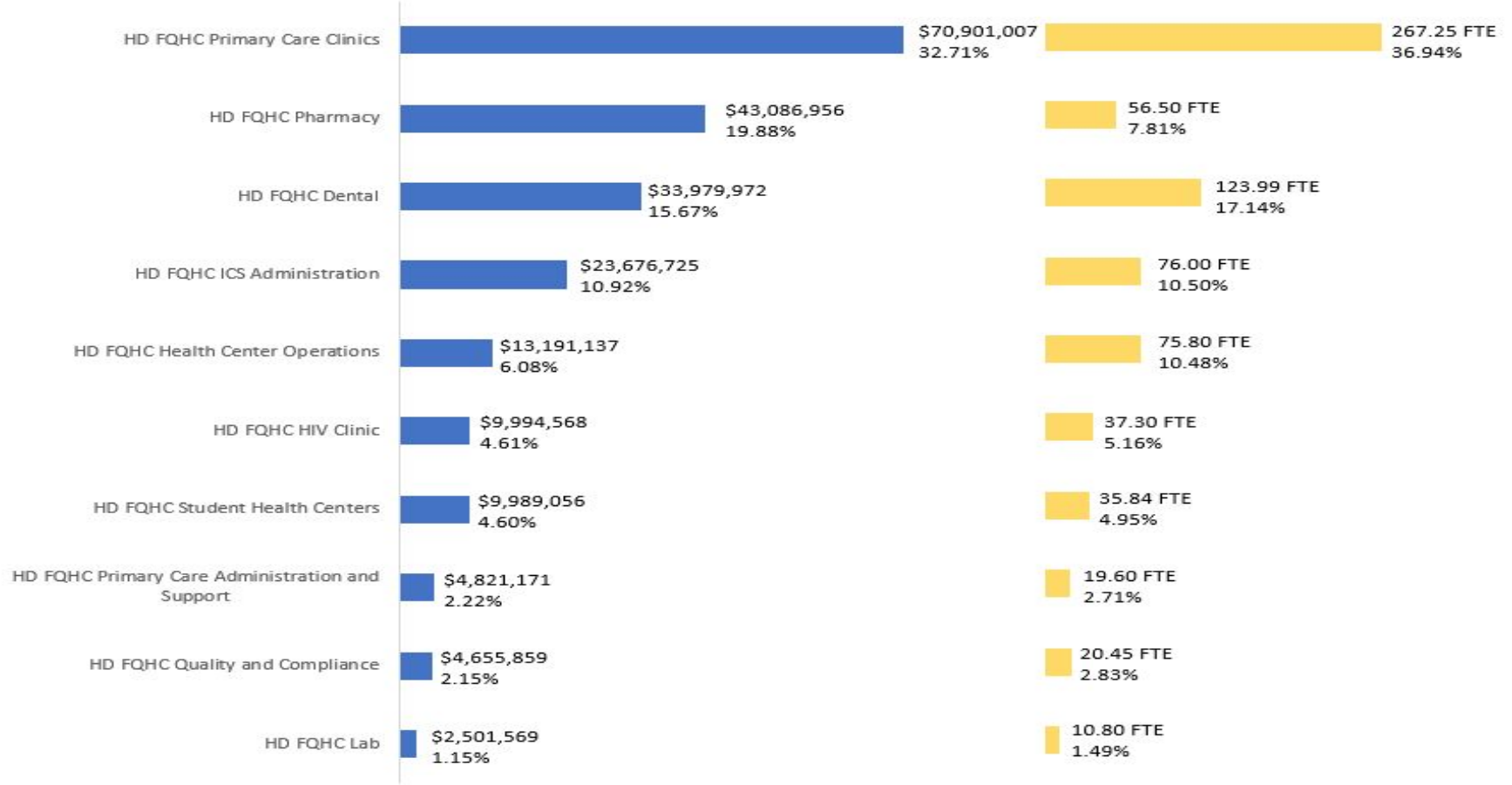
FY2026 Proposed Expenditures & Percent of Total



FY2026 Proposed Expenditures & Annual Percent Change

	FY19 Adopted	FY20 Adopted	FY21 Adopted	FY22 Adopted	FY23 Adopted	FY24 Adopted	FY25 Adopted	FY26 Proposed
Personnel	76,047,844	83,177,245	89,348,025	90,953,264	106,322,509	112,662,593	123,587,171	131,902,533
		9.37%	7.42%	1.80%	16.90%	5.96%	9.70%	6.73%
Contractual Services	2,359,677	3,165,094	3,265,489	15,792,431	3,518,134	3,376,112	5,476,514	7,932,757
		34.13%	3.17%	383.62%	-77.72%	-4.04%	62.21%	44.85%
Materials & Supplies	14,553,570	18,232,824	19,999,107	24,438,910	25,949,574	27,391,400	30,973,035	34,695,629
		25.28%	9.69%	22.20%	6.18%	5.56%	13.08%	12.02%
Internal Services	22,579,603	24,845,959	25,891,473	28,471,223	30,296,513	33,421,698	40,644,393	42,258,101
		10.04%	4.21%	9.96%	6.41%	10.32%	21.61%	3.97%
Capital Outlay	570,000	700,000	300,000	350,000	350,000	10,000		
		22.81%	-57.14%	16.67%	0.00%	-97.14%	-100.00%	

Operating Budget by Program \$216,789,020 & 723.53 FTE)





Legislative Areas of Interest

Oregon Legislature - Session Updates

Some State legislative concepts may impact Health Center operations in FY26, pending final amendments and passage. We do not anticipate requiring budget amendments or additional financial investments to comply with these areas.

Pharmacy Protections: HB3409, HB 2385/SB533

- Prohibits requiring modifiers on 340B medications if entities use a neutral clearinghouse (results in small increase in data administration for a large improvement of 340B protections).
- Removes restrictions on 340B Contract pharmacies, improving patient access

Funding for Safety Net Health Programs: HB2729, SB597, HB3169, and HB2216

- New grant programs to support dental sealant and oral health activities
- Increases and improves reimbursement for community health workers
- Increases base grants for school based health centers and more funding for mental health services

**Legislative information current as of April 30, 2025*

Federal policy changes may reshape Health Center service requirements

Major federal policy changes may also impact how the Health Center provides comprehensive primary care, dental, and pharmacy services.

Federal Organizational Changes

HRSA Restructured under the Administration for a Healthy America (AHA)

Elimination of multiple divisions of clinical expertise

Regional Offices and Technical Assistance Significantly Reduced

Federal Policy Changes

Major changes to Medicaid eligibility proposed

Multiple Policies awaiting Resolution in Court:
(1) Potential changes to how federal funds can support specific patient populations and
(2) the types of care which federal funding can support

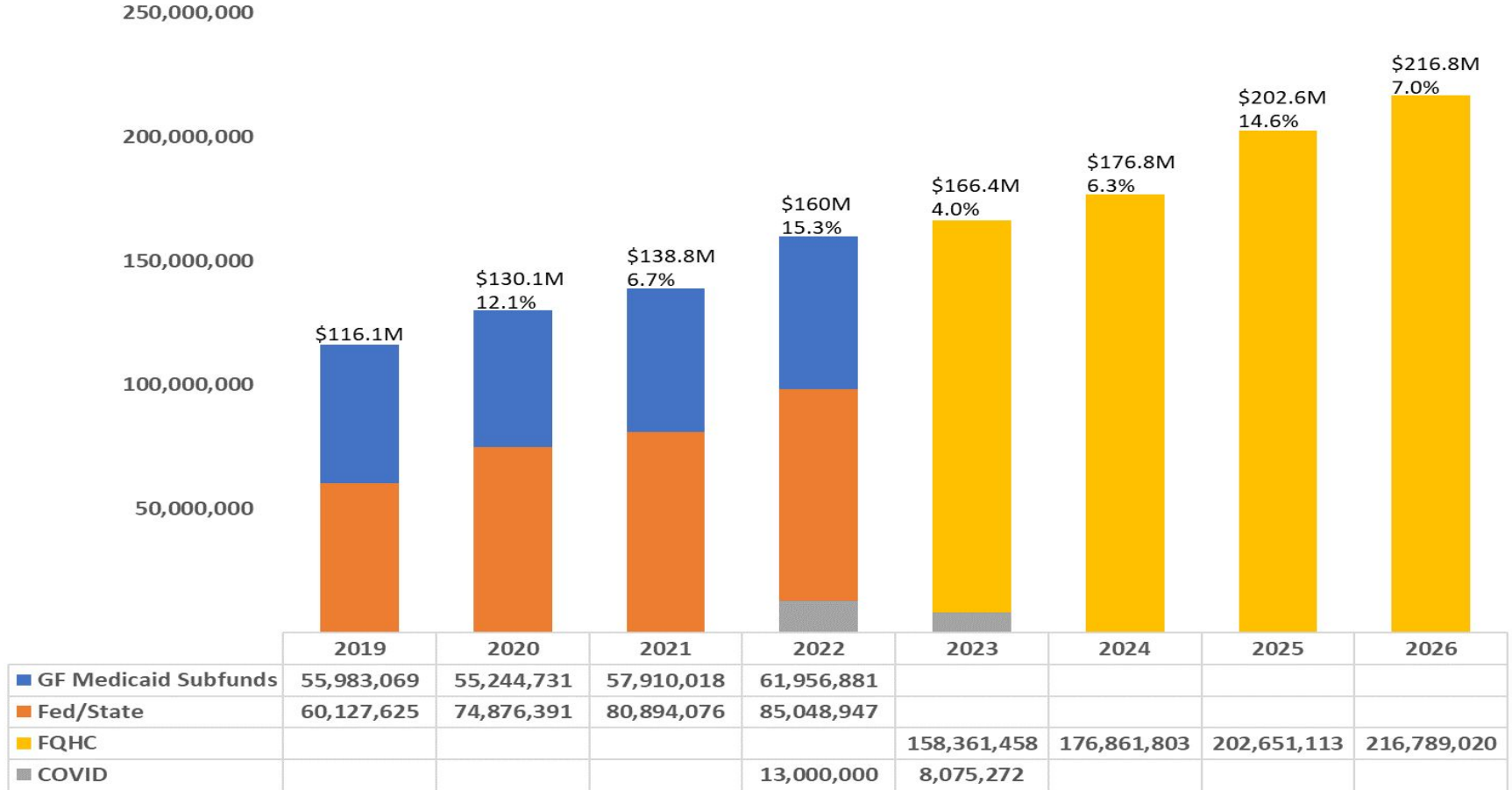


Questions



Appendix

Significant FQHC Integrated Clinical Services Operating Funds FY 2019-2026



Equity process and reviews

- FY26 budget investments centered on all staff feedback
 - Investments into direct services, expanding patient outreach, and investments into workforce.
- Managers and clinic teams review forecasted patient populations and changes in regional needs
 - What changes have we experienced this year? What else could change?
 - Are there new State or Federal requirements?
- Managers proposed FTE and service line changes, which were modeled for patient access and cost.
- Recommendations brought to the CHCB as part of budget proposals and approval
 - Patients are the majority of board members.

Program Offers in Detail

Health Center Area	FY26 Budget	Program Offers	Notes
Primary Care & Lab	\$83.24m	40012A, 40016, 40019, 40020, 40022, 40023, 40026, 40027*, 40029, 40032	Includes all eight locations plus lab services.
Mobile & Allied Health	\$11.03m	40102, 40027*	Allied health includes community health workers and integrated behavioral health. Mobile health partners with 11 community organizations.
Student Health	\$9.98m	40024	Includes all nine locations
Dental	\$33.98m	40017	Includes all eight locations
Pharmacy	\$43.09m	40031	Includes all eight locations
Administration, Finance, & Quality	\$35.06m	40103, 40036, 40033, 40030, 40016	Includes insurance eligibility, patient access center, quality assurance, patient board governance, leadership and finance staff
Contingency and Reserve	\$84.04m	40034B	Health Center financial reserves

*40027 represents cost centers from both Mobile Health and SEHC Primary Care, but the proposed budgets have not been duplicated in this table

Value based care program areas of focus

- **ToC Medical:** ↓readmissions/ED utilization
 - **ToC BH:** ↓ readmissions
 - **Case Managers :** High touch care for high utilizers
 - **Health Navigators & Group Visits:** Culturally appropriate, navigational specific support
 - **Care Pathways:** Team based care
 - **Community Health Workers:** Culturally appropriate, social needs specific support
-
- **Preventative Care:** Early identification of conditions that increase risk/utilization/cost
 - **Clinical QI work:** Ongoing process improvement to ensure high quality care and reduce risk, meet incentive targets



- **Heat Team:** Outreach
 - **Access Optimization:** Access dashboard, analyzing utilization
 - **Convenient Care:** ↓ ED/UC utilization
 - **↑MA Ratio:** ↑ Engagement
 - **Heat Team:** Outreach and engagement of assigned and unseen
 - **Access Optimization:** ↓ no shows, care when clients need it
 - **Workforce Development:** ↑staffing, ↑access
-
- **Coding for Complexity:** Accurately capture client complexity to justify ↑ reimbursement
 - **SAM Dashboards:** Integrate payor and clinical data to capture cost drivers



Appendix: Main Health Center Locations

Southeast Health Center

3653 SE 34th Ave
Portland, Oregon



Service Area	# of Patients	Additional Programs
Primary Care	3,871	Central pharmacy packing location for Student Health Rx
Dental	3,786	
Pharmacy Rx Dispensed	29,840	

Year Built: 1966
Total Square Footage: 21,645 ft²
Building Tier 1: New or Stable
Condition
Generator: No
District Location: District 1

- Building Investment History:
- The building underwent major repairs in 2021 due to a failing structural beam and exterior siding.
 - Additional improvement work was completed to upgrade the front desk and waiting room areas for patients.

Health Services Center

619 NW 6th Ave, 3rd Floor
Portland, Oregon



Year Built: 2018
Total Square Footage: 9,729 ft²
Building Tier 1: New or stable condition
Generator: Yes
District Location: District 1

Service Area	# of Patients	Additional Programs
Primary Care	1,293	Care for HIV+ Populations
Dental	N/A	N/A
Pharmacy Rx Dispensed	42,274	Care for HIV+ Populations

- Building Investment History:
- The HSC Clinic received upgraded clinic exam room repairs to include a negative air pressure room in 2023.
 - The Pharmacy space is undergoing renovations to expand consultation space on the first floor.

Mid County Health Center

12710 SE Division St
Portland, Oregon

B430 - MidCounty Health Clinic



Service Area	# of Patients	Additional Programs
Primary Care	9,806	Care for Refugee and Asylee patient populations
Dental	4,044	
Pharmacy Rx Dispensed	64,064	

Year Built: 1990
Total Square Footage: 20,247 ft²
Building Tier 1: New or Stable
Condition
Generator: Yes
District Location: District 3

- Building Investment History:
- Current renovation to flooring in primary care and dental areas
 - Anticipated for prioritization in early CHCB Strategic Planning discussions for building replacement and program investments

Rockwood Health Center

2020 SE 182nd
Portland, Oregon



Service Area	# of Patients	Additional Programs
Primary Care	3,773	Group Visits for Diabetes
Dental	3,581	
Pharmacy Rx Dispensed	33,344	Community pharmacist training

Year Built: 1975
Total Square Footage: 14,562 ft²
Building Tier 1: New or Stable Condition
Generator: To be installed
District Location: District 4

Building Investment History:

- Rockwood is the recipient of a Congressional Delegation Fund (Earmark) with construction planned for 2026 to complete major repairs to roof, HVAC, and electrical systems

East County Health Center

600 NE 8th St
Gresham, Oregon



Service Area	# of Patients	Additional Programs
Primary Care	8,941	Co located with other County Human Services Programs in Building
Dental	6,366	
Pharmacy Rx Dispensed	53,186	

Year Built: 2001
Total Square Footage: 26,528 ft²
Building Tier 1: New or Stable condition
Generator: Yes
District Location: District 4

- Building Investment History:
- Renovation of the existing Pharmacy, Dental Reception and Sterilization spaces for improved workflow in 2016
 - Investments into conference room audio and sound systems for improved meeting use completed in 2022

Mobile Health / Wheely McHealy

Multiple
Locations



Service Area	# of Patients	Additional Programs
Primary Care	537	Behavioral Health, Dental, and limited pharmacy dispensing - rotates between locations
Dental	143	
Pharmacy Rx Dispensed	N/A	

Year Built: 2023
Total Square Footage: 38' Long
Building Tier Explanation: N/A
Generator: Yes
District Location: Multiple

- Building Investment History:
- Mobile clinic was purchased and designed out of our COVID19 response to provide primary care and dental services
 - Partners: Behavioral Health Resource Center, Bybee Lakes, Programa Hispanico, The Welcome Center, Impact NW, JOIN, and Rose Haven

North Portland Health Center

9000 N Lombard St
Portland, Oregon



Service Area	# of Patients	Additional Programs
Primary Care	3,977	Acupuncture
Dental	3,346	
Pharmacy Rx Dispensed	30,170	

Year Built: 2002
Total Square Footage: 19,623 ft²
Building Tier 1: New or Stable
Condition
Generator: Yes
District Location: District 2

- Building Investment History:
- Full clinic renovation completed in 2017 expanding primary care and pharmacy capacity
 - Dental services were added in 2019
 - A new roof is anticipated at this location in the next few years

Northeast Health Center

5329 NE MLK Jr BLVD
Portland, Oregon



Service Area	# of Patients	Additional Programs
Primary Care	3,805	Co located with other County Human Services Programs in Building
Dental	3,346	
Pharmacy Rx Dispensed	40,829	

Year Built: 1951
Total Square Footage: 17,232 ft²
Building Tier 2: Moderate needs and condition
Generator: Yes
District Location: District 2

- Building Investment History:
- Multnomah County conducted a redevelopment analysis in 2022 for possible redevelopment
 - Clinic spaces regularly require repairs, including elevator systems
 - Added ADA check in station in 2024

Fernhill Health Center

5530 NE 42nd Ave
Portland, Oregon



Year Built: 2025
Total Square Footage: 9,704 ft²
Building Tier 1: New or stable condition
Generator: Yes
District Location: District 2

Service Area	# of Patients	Additional Programs
Primary Care	Opens May 2025	Shared workforce development programs with Portland Community College and De La Salle
Dental		
Pharmacy Rx Dispensed		

- Building Investment History:
- Designed for all three service lines to expand capacity when moving to La Clinica
 - Anticipated workforce training and support location