



ADVOCATES FOR
COMMUNITY
HEALTH

CHC INVEST: 30 by 30
***Campaign for a historic investment in our nation's safety net with
\$30 billion for health centers by 2030***

Federally qualified health centers (FQHCs) work tirelessly to meet the evolving needs of their patients. With the right investment, FQHCs can fulfill their mission as hyper-local health care hubs—treating the full range of patients' needs, supporting community transformation, and achieving true health equity. Over the next seven years, we urge policymakers to scale investment in health center funding, including infrastructure, workforce, and innovation, to reach a total of \$30 billion by the year 2030.

Funding for Federally Qualified Health Center Operations

By Fiscal Year 2030, we recommend \$17 billion in annual funding for FQHCs, with 20% through annual appropriations and 80% through increased allocations for the Community Health Center Fund.

Federal FQHC funding is designed to ensure a comprehensive medical home for all patients. However, the cost of caring for patients, as well as the total number of patients, is expected to continue to increase dramatically in the coming years, to an estimated 40 million by 2030. With a 12.7% annual increase from the 2023 baseline (\$9B) for a seven-year period, we can reach \$17B in health center investments. This amount would account for the development and expansion of flexible alternative payment mechanisms, population health management costs specific to the communities FQHCs serve, as well as overall inflation. \$17B would also allow FQHC spending per patient to average \$425/year, which allows FQHCs to better address the comprehensive health care needs of each patient. In addition, to maintain stability, we recommend that health center funding is not subject to sequestration.

Funding for Federally Qualified Health Center Capital Investment

By Fiscal Year 2030, we recommend an annual appropriation of \$5.5 billion for health center capital improvement.

For health centers to continue to serve increasing numbers of patients at the highest level of quality care, they must be able to access capital to address their physical infrastructure needs. According to [Capital Link](#), based on current and projected construction-related costs and capital investment trends, health centers will need to invest approximately \$17.5 billion in property, plant, and equipment. We propose a down payment on this total, increasing annual funding by \$571M every year from 2023 to 2030, ultimately reaching a sustained level of \$5.5 billion. With this funding, Congress will enable

health centers to work from a solid foundation, positioning these hyper-local healthcare hubs to sustainably provide comprehensive care to 40 million patients in underserved communities by the year 2030. From this investment, we recommend allocating funds sufficient to establish 200 new sites of care.

Funding for Federally Qualified Health Center Workforce

By Fiscal Year 2030, we recommend an annual appropriation of \$6.5 billion for workforce.

To continue to grow, innovate, and transform care, health centers must continually reinvest in staff development, retention, and recruitment. FQHCs and their patients rely on culturally and linguistically competent providers and support staff, and retention of such employees requires competitive salaries. Between FY 2023 and 2030, we recommend annual increases to reach a sustained annual investment of \$6.5B in 2030, which would include:

- \$3B total for National Health Service Corps. The increase of \$2B from the recommended \$1B in 2023 would allow for an additional 25,000 providers with an average of \$80,000 in support per provider, or a 20% increase in providers over seven years.
- \$500 million total for Nurse Corps + \$500 million total for health professional pathway programs including the Health Careers Opportunity Program, Scholarships for Disadvantaged Students, and Area Health Education Centers
- \$2.5B total for Teaching Health Centers, with dedicated funding for new programs for the first three years. We anticipate this investment would result in 5,434 additional residents being trained by 2030¹.

Finally, we recommend that FQHC funding support the existing workforce to ensure salaries remain competitive and staff can flourish in a culture of continuous learning.

Funding for Federally Qualified Health Center Innovation

By Fiscal Year 2030, we recommend \$1 billion in innovation-related funding for FQHCs, which can allow them to meet the needs of their communities more fully.

As the COVID-19 pandemic proved, FQHCs are often the most important connective tissue in a community – whether they are connecting people to vital care, protecting them from disease, or addressing urgent social needs. Rather than recreating programs that exist outside these health care hubs, we recommend Congress reinvest in health centers' ability to serve their communities and provide strong, sustainable health outcomes. Congress can do this by funding health center innovations; programs such as care transformation hubs, through which FQHCs set up closed-loop social needs referral networks, or emergency preparedness operations that support local health departments in disaster situations. Health centers are innovating each and every day to maximize their effectiveness and support to their patients and communities. This investment can harness these innovations for greatest impact and scalability across not just the health center network, but the health care system as a whole.

¹ This estimate is based on the fact that, at a current funding level of \$125M/year, the THCGME program graduates an average of 286 residents annually, and we anticipate the program to increase approximately \$339M every year for seven years to reach \$2.5B in 2030.