OB-GYN SERVICES AT FEDERALLY QUALIFIED HEALTH CENTERS

By: Nicole Dube, Principal Analyst

ISSUE
Can federally qualified health centers (FQHCs) provide obstetrics and gynecology (OB-GYN) services?

PROVISION OF OB-GYN SERVICES BY FQHCS
FQHCs are authorized to provide OB-GYN services. By law, FQHCs are community-based, nonprofit or public organizations that receive grants under Section 330 of the Public Health Services Act. To receive federal funding, they must provide required primary health care services, including OB-GYN services, to individuals with limited or no access to other health care, such as (1) the uninsured, (2) residents of rural and underserved areas, and (3) Medicare and Medicaid beneficiaries.

Under federal law, “required primary health services,” includes, besides OB-GYN services:

1. basic health services related to family and internal medicine and pediatrics, that are provided by physicians, physician assistants, nurse practitioners, and nurse midwives;

2. preventive health services, including prenatal and perinatal services; appropriate cancer screenings; voluntary family planning services; screenings for blood lead levels, communicable diseases, and cholesterol; immunizations; pediatric eye, ear, and dental screenings; preventive dental services; and well child visits;

3. pharmaceutical services, if appropriate;

4. diagnostic laboratory and radiologic services; and

5. emergency medical services.
If a patient requires a specialty OB-GYN service, such as a surgical procedure, the FQHC must then refer the patient to the appropriate specialty provider (42 USC §§ 254b (a) and (b)).

ND:cmg