



# **NAFC MEMBER SURVEY REPORT COVID-19 IMPACT**

**AUGUST 2020**



The National Association of Free and Charitable Clinics conducted a survey of its members to learn more about the impact of COVID-19 on the organizations and their communities.

2 million patients through 6.9 patient visits are seen annually at the 1,400 Free and Charitable Clinics and Pharmacies throughout the U.S.

Free and Charitable Clinics and Pharmacies, a critical part of America's safety-net, are on the frontlines in the U.S. helping their communities respond to the COVID-19 pandemic. As of late July 2020, 47% of NAFC member organizations are located in the current top 10 COVID-19 Hot Spot States.

Since the start of the pandemic, Free and Charitable Clinics and Pharmacies have been adapting their normal business to ensure that their patients and communities are cared for and not left behind. They have been making decisions on how to continue providing needed services while protecting their staff and volunteers, trying to get needed PPE, facing decreasing donations and increasing patient demand.

Free and Charitable Clinics and Charitable Pharmacies utilize a staff/volunteer model to provide health care services. 94% of the workforce is composed of volunteers, which led to a unique challenge during the pandemic as social distancing and stay at home orders were issued.

91% of Free and Charitable Clinics nationwide see patients with chronic diseases like Diabetes and/or Hypertension. They have been working hard to ensure that the treatment and chronic disease management among patients was continued as access to medications, provider visits, health foods and health education classes quickly decreased.

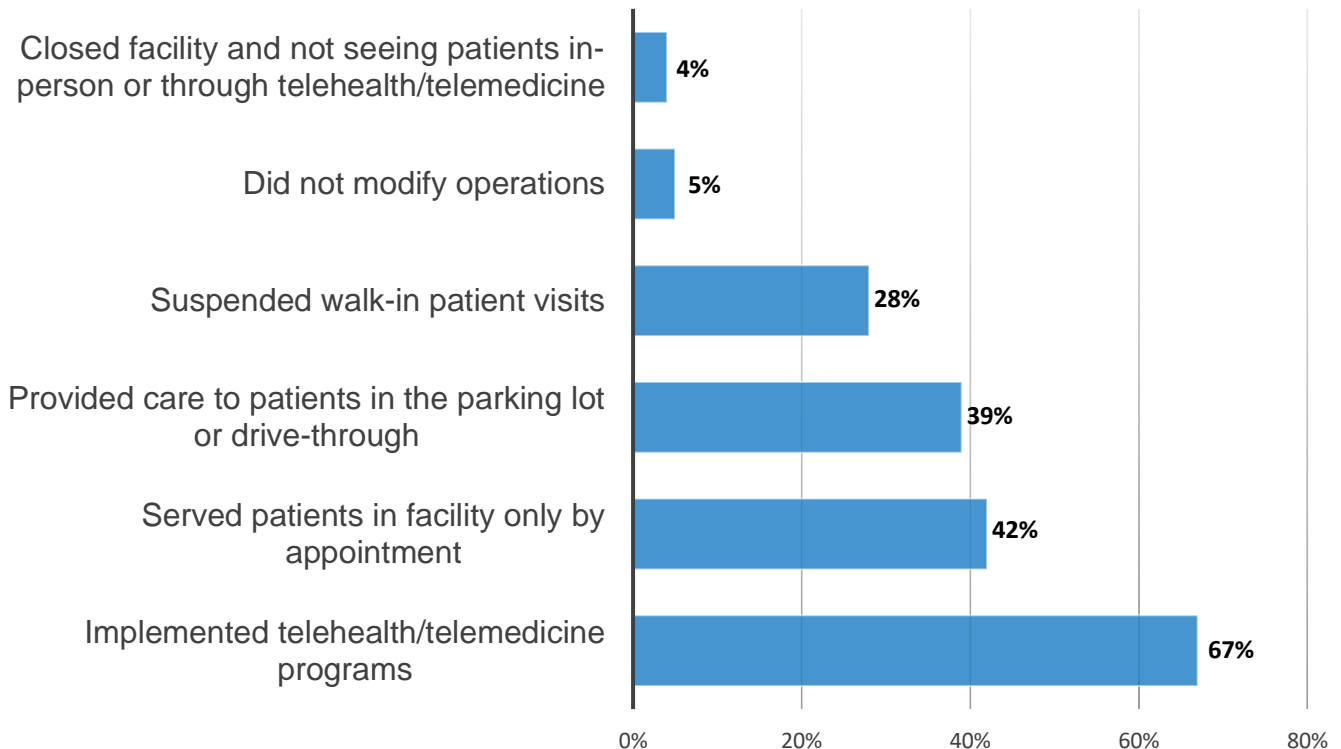


## COVID-19 ORGANIZATIONAL IMPACT

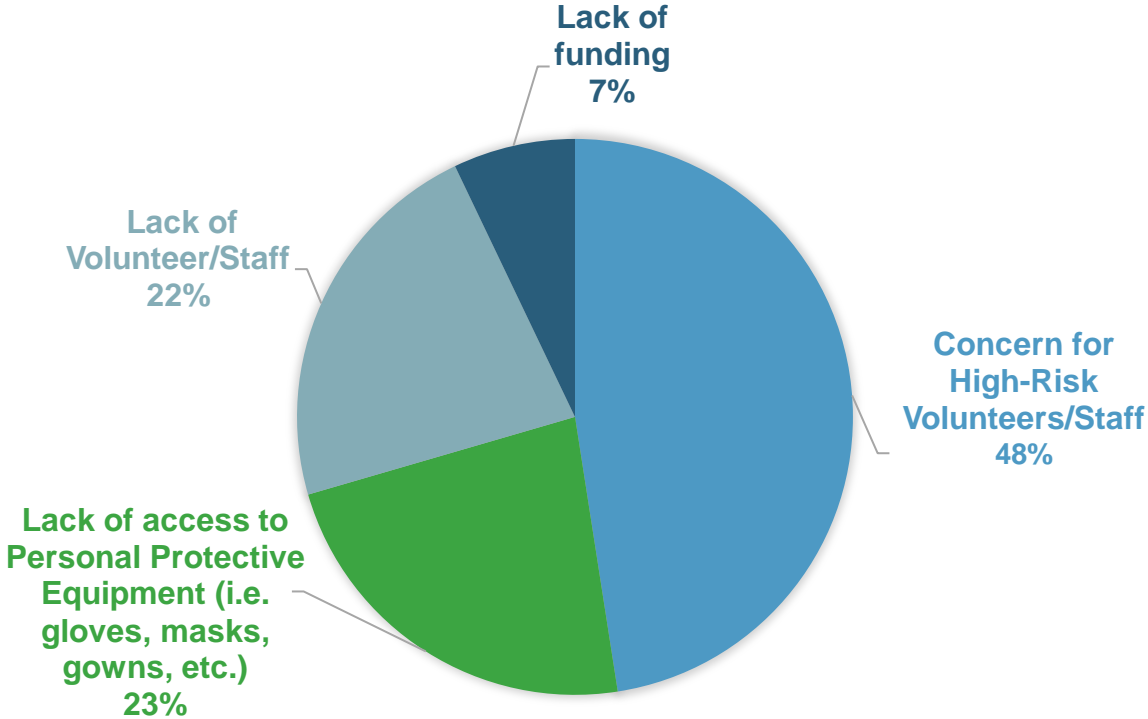
Free and Charitable Clinics and Pharmacies have been adapting their normal business since the start of the COVID-19 pandemic to ensure that their patients and communities are cared for and not left behind while dealing with concerns over volunteer safety (many volunteers are retired and in high-risk categories), and lack of needed Personal Protective Equipment (PPE).

The following questions illustrate how and why Free and Charitable Clinics and Pharmacies have been adapting due to the pandemic...

### During the COVID-19 Pandemic, NAFC Member Organizations:



**If you modified your operations during COVID-19, please indicate the reason(s) you did so:**



**Did your organization furlough or lay off employees due to COVID-19?**

- Yes – 16%
- No – 80%
- Other (example - all volunteers) – 4%

## DELIVERY MODEL – PATIENT CARE

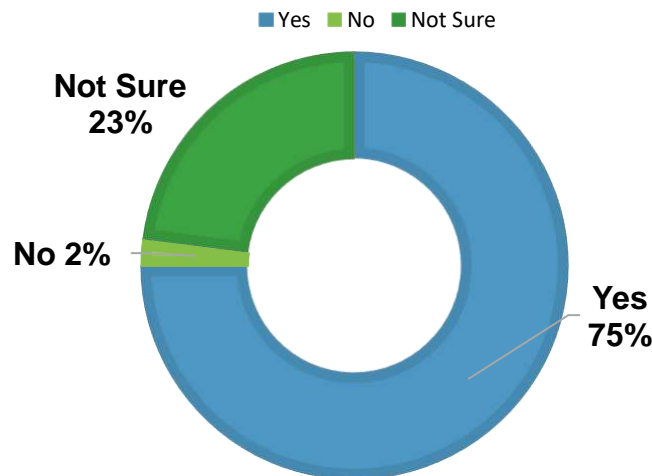
Free and Charitable Clinics have pivoted during this crisis and adapted their normal business protocols. They have been providing patients with needed medications and food – sometimes creating drive-throughs, curbside pickups and even making home deliveries, developing telehealth programs to keep connected while social distancing and to help address transportation issues, conducting COVID-19 education, screening and testing, and much more.

The following questions illustrate how Free and Charitable Clinics and Pharmacies have been adapting due to the pandemic...

### **If you implemented telehealth/telemedicine, what service are you using?**

- Doxy.me 27%, Zoom 23%, UpDox 17%, Telephone 15%, CareMessage 7%, Capstone 2%, Does not apply 19%, Other 18%

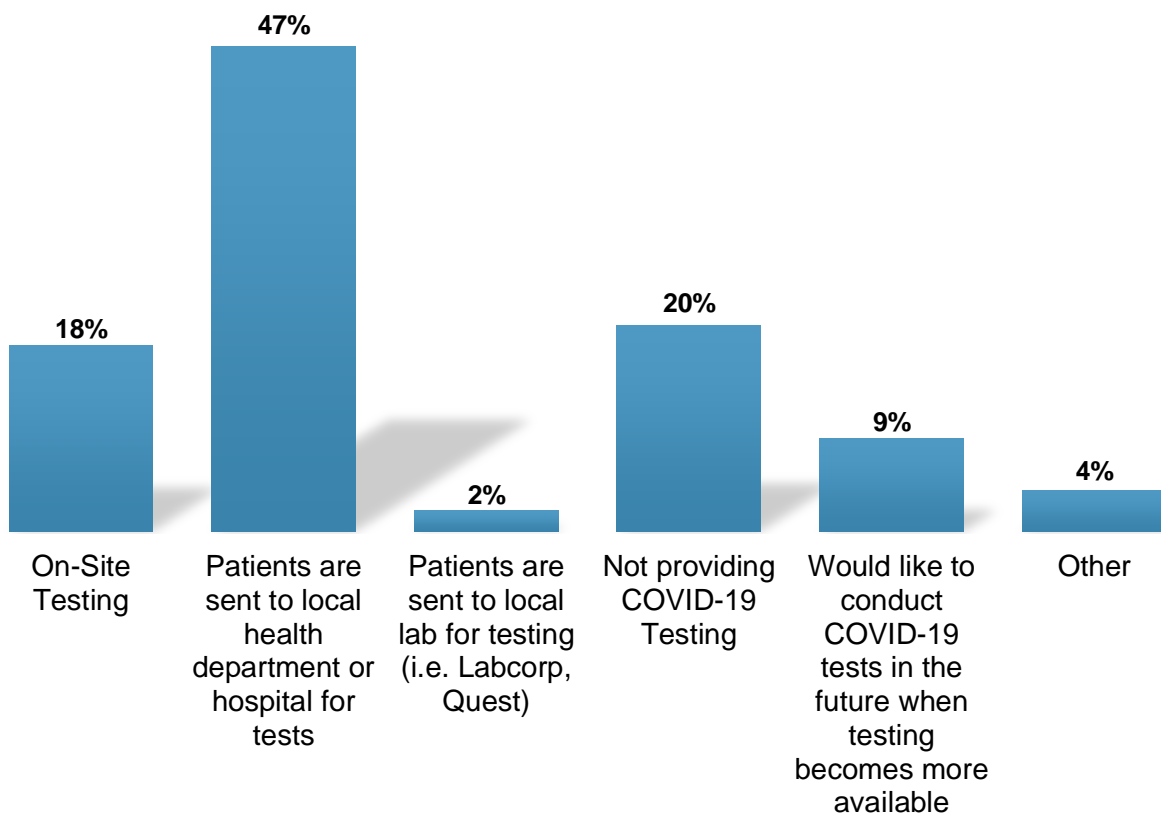
### **If you implemented telehealth/telemedicine during COVID-19, will you continue to offer telehealth/telemedicine to your patients once a vaccine becomes available?**



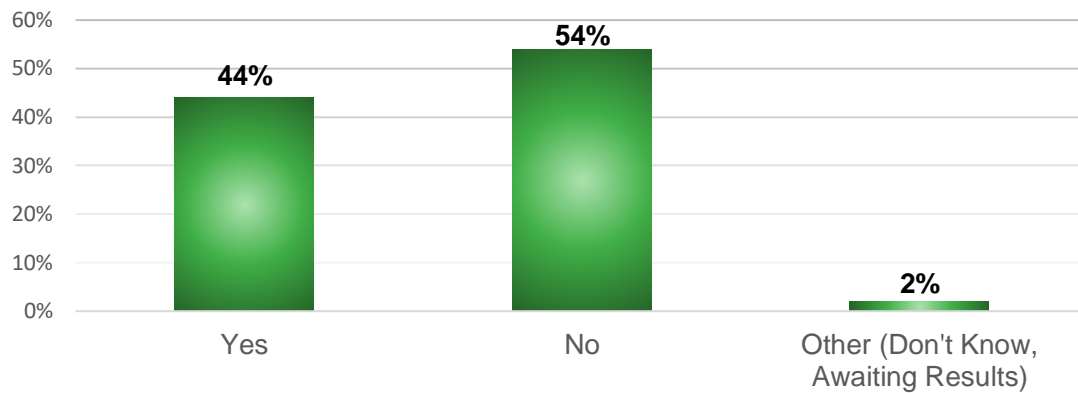
**If your organization was a walk-in clinic prior to COVID-19, will you return to a walk-in model?**

- Yes – 58%, No – 15%, Not Sure – 27%

**How are you providing access to testing for COVID-19?**



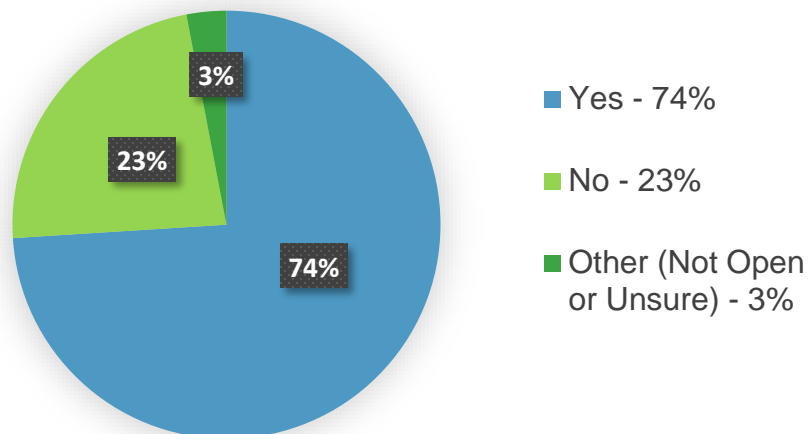
### Have any of your clinic patients, staff, and/or volunteers tested positive for COVID-19?



### Have you had an influx of patients present with COVID-19 symptoms at your clinic/facility?

- Yes – 17%, No – 77%, Other – 6%
- *Some noted that they screen for COVID-19 symptoms ahead of time and if they are not doing testing, the patients are referred to the local hospital or health department*

### Now that there are more people unemployed, has your organization seen an increase in patients that are inquiring about care?



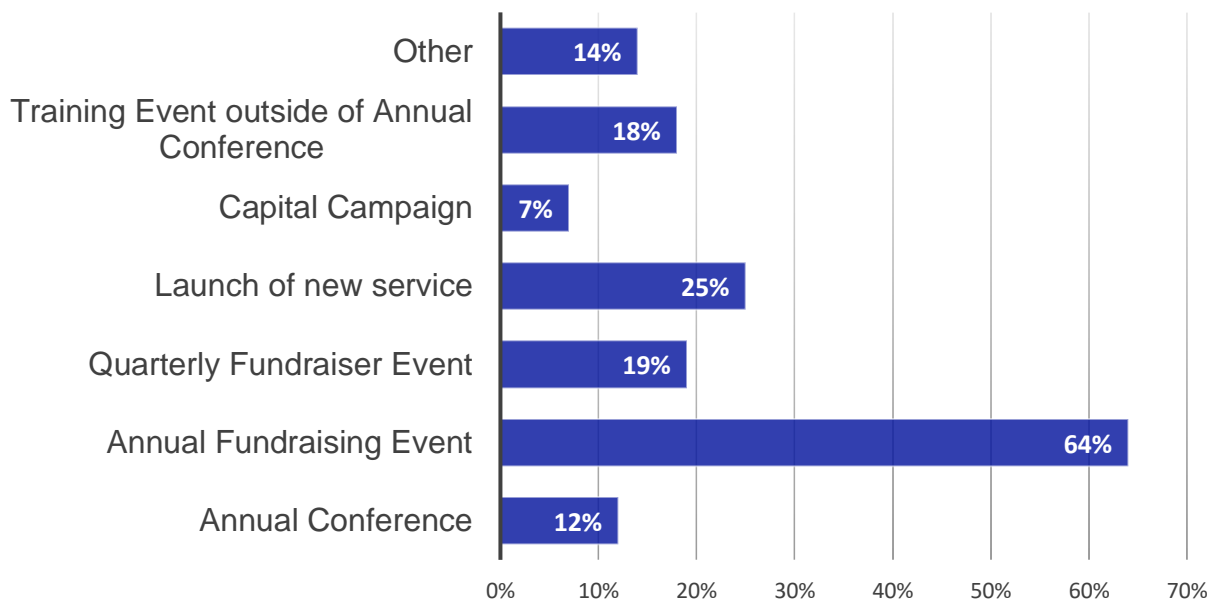
# FUNDRAISING, LOANS & REIMBURSEMENT

Free and Charitable Clinics and Pharmacies provide services to their communities with little to no Federal support and rely on donations, volunteers, grants and partnerships.

Due to the coronavirus pandemic, these community organizations have had to cancel fundraising efforts and face decreasing donations. Even though some are seeing an increase in donations, they are also facing an increase in expenditures. Clinics have been dealing with unforeseen expenses for increased amounts of personal protective equipment for their staff, upgrading technology to provide telehealth services, increased supply needs to patients including food, medication and more.

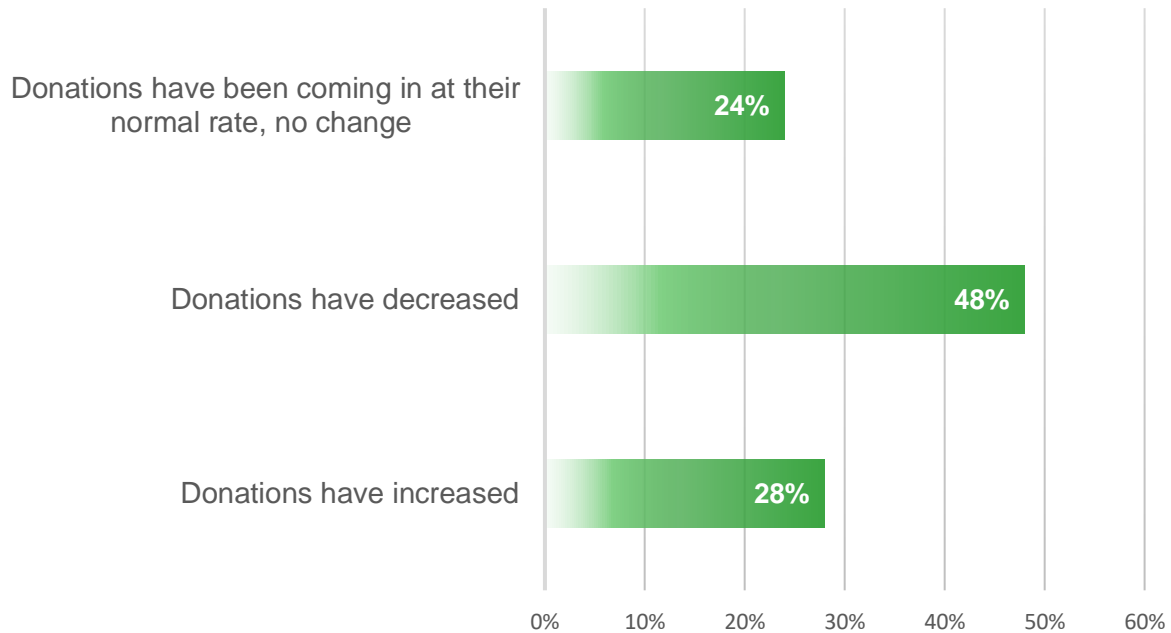
The following questions highlight the financial issues that NAFC members are facing...

## Due to COVID-19, our organization cancelled:





## Have donations to your organization changed?



*Some respondents noted that while donations are coming in, unexpected and unplanned expenditures due to COVID-19 have also significantly increased.*

## Are you fundraising right now? (through social media, physical mail, etc.)

- Yes – 71%, No – 29%

## LOANS AND REIMBURSEMENT

### Has your organization applied for a small business loan (PPP)?

- Yes – 56%
- No – 39%
- Not yet, but may in the future – 5%

**If you answered yes, how much did your organization receive?**

- Ranges from \$3,000 to \$1 million
- Average amount received: \$105,000
- Total received is \$12.9 million
- *In comparison, according to the National Association of Community Health Centers, federally funded health centers received \$2.5 billion in PPP loans, amounting to an average loan of \$2 million per center.*

**Has your organization applied for reimbursement for COVID-19 testing and treatment for the uninsured patient from the Federal Government? (<https://www.hrsa.gov/coviduninsuredclaim>)**

- Yes – 1%
- No – 87%
- Not yet, but may in the future – 12%

**If you answered yes, how much in reimbursement funding did your organization receive?**

- \$200, \$500, 2 waiting for reimbursement

**Has your organization applied for the Federal Communication Commission (FCC) telehealth grant program? (<https://www.fcc.gov/covid-19-telehealth-program>)**

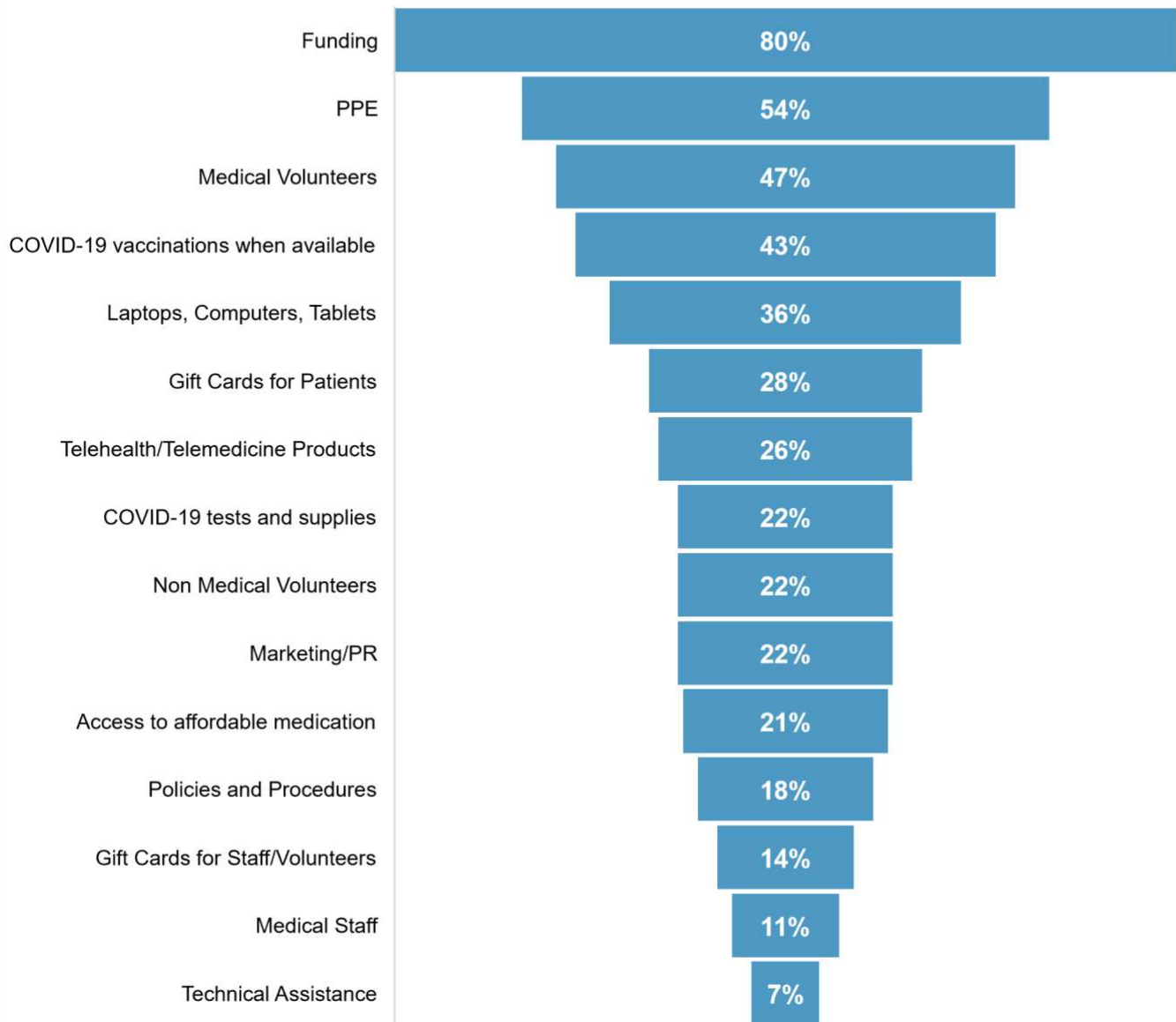
- Yes – 6%
- No – 75%
- Not yet, but may in the future – 19%

**If you answered yes how much in FCC grant funding did your organization receive?**

- \$10k, \$32k, \$314k, the remaining either \$0 or still waiting for a response

# RESOURCES NEEDED

## Current Top Organization Needs



## NAFC RESPONSE EFFORTS

The NAFC has helped Free and Charitable Clinics and Pharmacies across the country deal with the COVID-19 pandemic in a variety of ways, including providing access to:

- funding
- donated products including Personal Protective Equipment (PPE), medical supplies and medications
- discounted services like telehealth and telemedicine programs
- information and resources to assist clinics with developing and implementing coronavirus protocols

To date, over \$16 million in requests has come to the NAFC through applications from Free and Charitable Clinics and Pharmacies across the country related to COVID-19 response efforts and the continuity of crucial health care services for their medically underserved patients.

The NAFC currently distributed \$4.3+ million in funds through grant programs with Direct Relief, the Center for Disaster Philanthropy, CVS Health and the CVS Health Foundation, as well as with the help of individual donations and foundation support. The NAFC continues to raise funds to meet the needs of and to support the important work of its Free and Charitable Clinic and Pharmacy members.

The NAFC has also been working with CVS Health to partner with several NAFC member clinics to launch onsite rapid COVID-19 testing. All of the CVS Health community-based testing sites can accommodate walk-up testing, so access to a vehicle is not required. Appointments are made by phone, so a lack of internet access is not a barrier and there is no cost for the test. By eliminating these barriers, CVS Health and our clinics are able to provide testing access to those who are at highest risk for COVID-19 and poor outcomes.

*\*Data in this report is compiled from an online survey of 387 NAFC Member respondents, administered late May – July 2020.*