NCCHCA Annual Primary Care Conference: Moving Health Forward

Financial Resources for Health Center Growth In a Changing Environment

June 4, 2026, at Washington Duke Inn & Golf Club (Durham, NC)

Session Agenda at a Glance

i. Introduction

ii. Resources for Explore

iii. VitalTA funding for 2026-2027

iv. Case Studies:

   a. MedNorth Health Center

   b. Charlotte Community Health Center

v. Q & A

This is a picture of MedNorth's New Building

Your Presenters Today

Alice Pollard MSW, MSPH

VP of Member Services and Operations
NC Community Health Center Association (NCCHCA)

Tim Gallagher, MPH, LFACHE

Head of Growth & Managed Services
NC Community Health Center Association (NCCHCA)

Steven Weingarten

Chief Executive Officer (CEO)
Vital Healthcare Capital (V-Cap)

Aldea Coleman

Director of Partnerships + Advocacy,
Vital Healthcare Capital (V-Cap)

NC Health Center Growth Context

Across NC, many communities would benefit from health center growth projects:

- ✓ Facilities
- ✓ Operating expansion
- ✓ Expanded lines of service

Despite policy uncertainty, NC is ripe for continued health center growth

FQHC Market Penetration	U.S.	N.C.
% of Low Income Served By Health Centers	32.2%	20.8%
% of Total Population Served By Health Centers	9.8%	6.8%

2024 Data (HRSA UDS and KFF)

FQHC Payer Mix	U.S.	N.C.
Medicaid	48.6%	28.8%
Medicare	11.2%	16.5%
Uninsured	18.1%	29.9%
Medicaid – Uninsured Difference	30.5%	-1.1%

2024 Data (HRSA UDS)

Financial Resources for Health Center Growth

Vital Healthcare Capital & NCCHCA

A Collaboration To Increase Financial Resources for Health Center Growth

Scale Subsidy from New Markets Tax Credits (NMTC)

- Develop 3–year NC pipeline (2027 – 2029)
- Goal: $200MM+ investments in NC health center growth
- $35 - $40 MM of grant-like subsidy for health centers

New TA Funding Opportunity Planned

- V-Cap TA grants offered in collaboration with NCCHCA
- TA/Consulting services critical for health center growth projects
- Target consulting support needed for a future expansion to succeed

Opportunities for Philanthropy

- Collaborations for impact can help funders magnify resources
- Leverage of public dollars gives funders greater impact for scarce grant dollars
- Flexibility for local, regional, and state-wide impact

Financial Resources for NC Health Center Growth

Example Projects

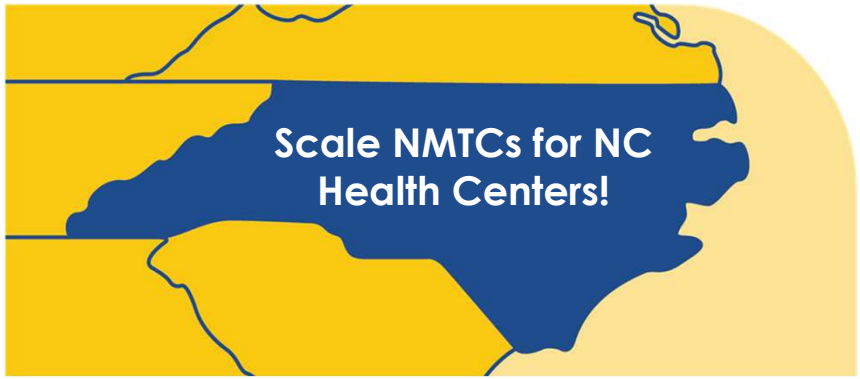
	MedNorth Health Center Their new main building is open!	**Charlotte Community Health Clinic** Operational expansion is in planning!
Project	New HQ health center, expanding capacity & service lines	Double capacity across 4 satellite locations, expand pharmacy, expand mobile units
TA funding	▪ Business planning ▪ Transaction readiness	▪ HR recruitment/retention readiness ▪ Transaction planning
New Market Tax Credits (NMTC)	▪ $30M building project ▪ **$3.9M of grant-like subsidy**	▪ $10 - $12M project ▪ **~$2M of grant-like subsidy**
Philanthropy	▪ Foundation support filled gap, and leveraged subsidy	▪ Foundation engagements: opportunity for funder partners to leverage resources

Intro to New Market Tax Credits (NMTCs)

For North Carolina Community Health Capital Projects

About New Market Tax Credits

- U.S. CDFI Fund program
- Made permanent in 2025
- ~$5 Billion of tax credit authority each year creates up to $2 Billion of subsidy
- Facilities or Operating Growth projects in qualifying census tracts
- NC health centers have been under-represented in NMTC funding



Scale NMTCs for NC Health Center Growth

- ☑ Develop 3-year (2027 – 2029) project pipeline
- ☑ Supporting $200MM+ health center investments
- ☑ Create $35 - $40MM of grant-like subsidy
- ☑ State-wide pipeline to:
  - ➲ *Attract resources*
  - ➲ *Pool TA needs*
  - ➲ *Help interested funders scale impact*

VitalTA

Funding for
Community Healthcare Technical Assistance (TA) Needs

V-Cap & NCCHCA are planning a next VitalTA funding opportunity

- What consulting services are critical to your health center's growth & expansion plans?

- Business planning
- Patient Acquisition
- Payer mix optimization
- Planning for clinical specialty lines of service
- Planning for special populations, e.g., Dual Eligibles, Chronic Care Management (CCM)
- Capital project planning
- Recruitment & retention planning

Past Recipients

1. Charlotte Community Health Clinic
2. Triad Adult & Pediatric Medicine
3. MedNorth Health Center
4. Rural Health Group
5. Hot Springs Health Program

Current Timeline

This effort is described as a 'working strategic plan' and is expected to yield a tactical view of the path forward (~18-month horizon)

Expectations should be set that the work effort will complete in April 2022

When	What	Why	How	Who
Executive Committee Meeting 11-23-2021	Discussion on proposed support	Discuss and design the steps for the proposed strategic planning support	Zoom Meeting	Johnsie Davis; Steve Stein; Tracion Flood; Althea Johnson; Chris Shank (NCCHCA); Tim Gallagher (external)
Week of 11/29	Develop a series of survey questions for MedNorth Board members	Set up the strategic planning work	Word document of questions to be loaded into a survey tool	Tim and Chris
Week of 12/6	Load survey questions and distribute link to Board members	Allow them time to respond in advance of the scheduled Board meeting	NCCHCA Survey tool that allows for web-based input to be aggregated and sent to Tim	Tim, Chris, and Josie (NCCHCA)
Dec. 7, 2021	30-minute presentation to full Board	Share the members high level aggregated responses; explain the up coming process	PPT slides with some of the general results	Tim, Althea, and Johnsie
January 2022	Schedule in person Office Hours	Allow Board members to drop-in and have F2F conversations and/or hold Zoom interviews; allow Tim to spend time in the clinic, city, and community	Schedule office hours at a meeting location (local library or Blue Mind Coworking space at 301 Government Center Drive)	Tim, Althea, and MedNorth Board members
Jan. 17th-20th	Visit Wilmington, attend Exec. Co. mtg. in person, and begin on site interviews with Board members	Major themes were uncovered and/or developed by bundling several items Board members spoke to and are passionate about seeing done in the future	Meeting notes, Board interviews, and various other elements of the project's work	Tim, Althea, and MedNorth Board members
Feb. 16th	Attend the weekly staff meeting to hear from staff (via Zoom)	Staff's operational concerns and opportunities for growth were discussed and compared against the earlier survey results	Engaging conversation and reference to the 17 completed staff surveys completed by JCG dated 10-04-2021.	Tim, Althea, and MedNorth staff

July 2021	August 2021	Sept 2021	October 2021	Nov 2021	December 2021	January 2022	February 2022	March 2022	April 2022
NCCHCA Advocacy for MedNorth in the MJ Clinic Discussion	Initial discussion regarding strategic planning assistance	Clarify consultant's role working with NCCHCA	Draft Statement of Work shared for comment	Leadership calls to discuss proposed support		Office Hours, Interviews, and Observations		NOW Draft initial findings	Formal Report Out

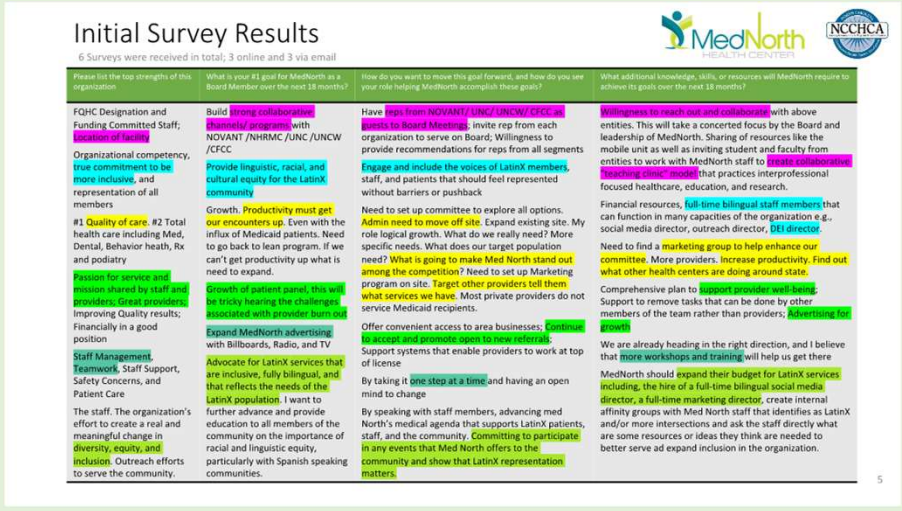
This is actual collateral from TA services provided to MedNorth, funded by V-Cap, through NCCHCA consultants.

Board Feedback Identified Growth Opportunities

December 2021 Pre-Site Visit Survey

Potential MedNorth Survey Questions –

1. Please list several of the top strengths of this organization.
2. What is your number one goal for MedNorth as a Board member over the next 18 months?
3. How do you want to move this forward and how do you see your role in helping MedNorth accomplish these goals?
4. What additional knowledge, skills, or resources will MedNorth require to achieve its goals over the next 18 months?



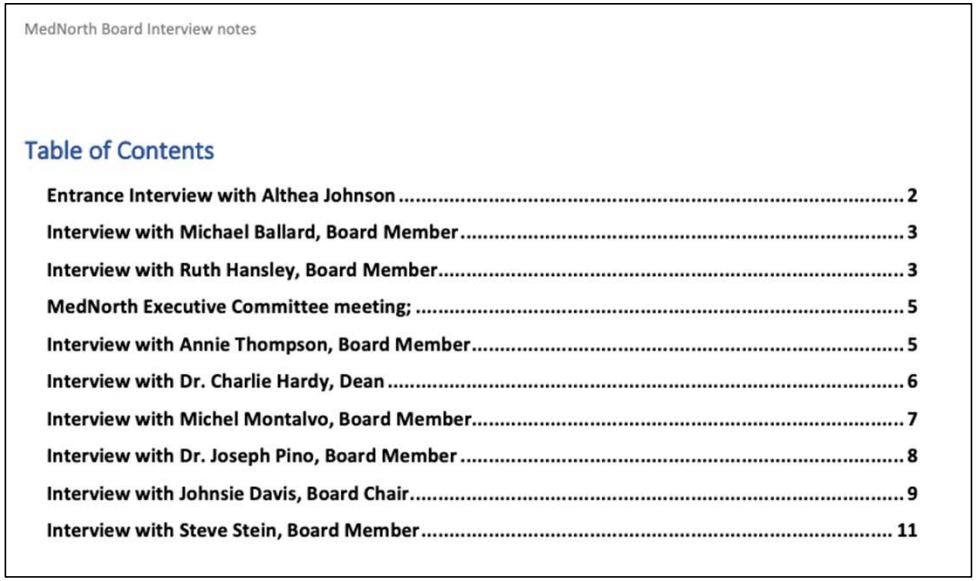
Initial Survey Results

6 Surveys were received in total; 3 online and 3 via email

Please list the top strengths of this organization	What is your #1 goal for MedNorth as a Board Member over the next 18 months?	How do you want to move this goal forward, and how do you see your role helping MedNorth accomplish these goals?	What additional knowledge, skills, or resources will MedNorth require to achieve its goals over the next 18 months?
FQHC Designation and Funding Committed Staff; Location of facility Organizational competency, true commitment to be more inclusive, and representation of all members #1 Quality of care. #2 Total health care including Med, Dental, Behavior heath, Rx and podiatry Passion for service and mission shared by staff and providers; Great providers; Improving Quality results; Financially in a good position Staff Management, Teamwork, Staff Support, Safety Concerns, and Patient Care The staff. The organization's effort to create a real and meaningful change in diversity, equity, and inclusion. Outreach efforts to serve the community.	Build strong collaborative channels/ programs with NOVANT /NHRMC /UNC /UNCW /CFCC Provide linguistic, racial, and cultural equity for the LatinX community Growth. Productivity must get our encounters up. Even with the influx of Medicaid patients. Need to go back to lean program. If we can't get productivity up what is need to expand. Growth of patient panel, this will be tricky hearing the challenges associated with provider burn out Expand MedNorth advertising with Billboards, Radio, and TV Advocate for LatinX services that are inclusive, fully bilingual, and that reflects the needs of the LatinX population. I want to further advance and provide education to all members of the community on the importance of racial and linguistic equity, particularly with Spanish speaking communities.	Have reps from NOVANT/ UNC/ UNCW/ CFCC as guests to Board Meetings; invite rep from each organization to serve on Board; Willingness to provide recommendations for reps from all segments Engage and include the voices of LatinX members, staff, and patients that should feel represented without barriers or pushback Need to set up committee to explore all options. Admin need to move off site. Expand existing site. My role logical growth. What do we really need? More specific needs. What does our target population need? What is going to make Med North stand out among the competition? Need to set up Marketing program on site. Target other providers tell them what services we have. Most private providers do not service Medicaid recipients. Offer convenient access to area businesses; Continue to accept and promote open to new referrals; Support systems that enable providers to work at top of license By taking it one step at a time and having an open mind to change By speaking with staff members, advancing med North's medical agenda that supports LatinX patients, staff, and the community. Committing to participate in any events that Med North offers to the community and show that LatinX representation matters.	Willingness to reach out and collaborate with above entities. This will take a concerted focus by the Board and leadership of MedNorth. Sharing of resources like the mobile unit as well as inviting student and faculty from entities to work with MedNorth staff to Create collaborative "Teaching Clinic" model that practices interprofessional focused healthcare, education, and research. Financial resources, full-time bilingual staff members that can function in many capacities of the organization e.g., social media director, outreach director, DEI director. Need to find a marketing group to help enhance our committee. More providers. Increase productivity. Find out what other health centers are doing around state. Comprehensive plan to support provider well-being. Support to remove tasks that can be done by other members of the team rather than providers; Advertising for growth We are already heading in the right direction, and I believe that more workshops and training will help us get there MedNorth should expand their budget for LatinX services including, the hire of a full-time bilingual social media director, a full-time marketing director, create internal affinity groups with Med North staff that identifies as LatinX and/or more intersections and ask the staff directly what are some resources or ideas they think are needed to better serve ad expand inclusion in the organization.

5

In person conversations offered at MedNorth or Board member office locations January 8th, 9th, and 10th



MedNorth Board Interview notes

Table of Contents

12 pages of notes, context, and reference materials gathered

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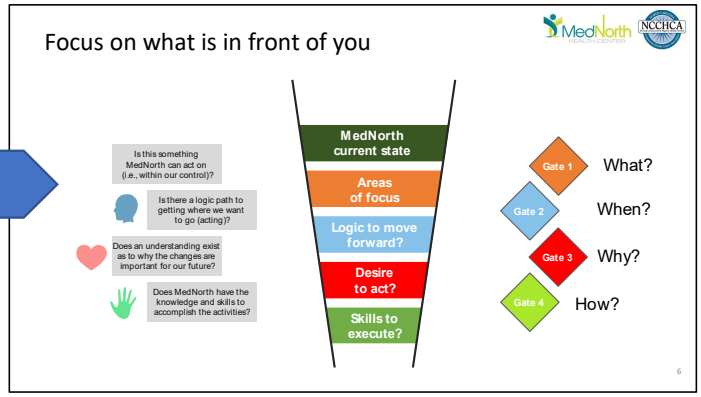
Drafting Your Initial Findings

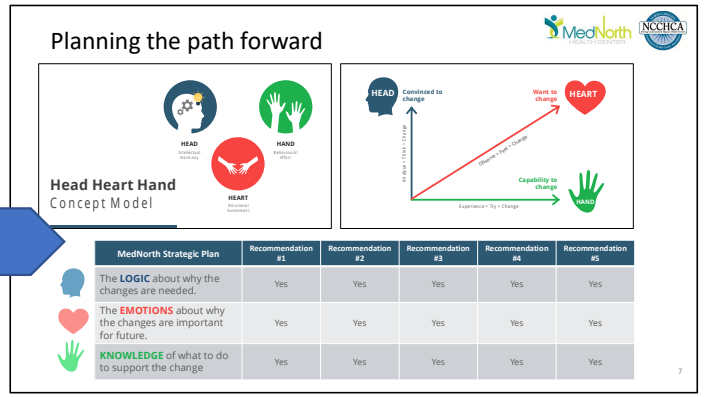
What people said vs. what I could gather?

a.



What solutions were offered, and which ones do I see being successful?

b.



The results yielded five recommendations that have SMART goals

c.

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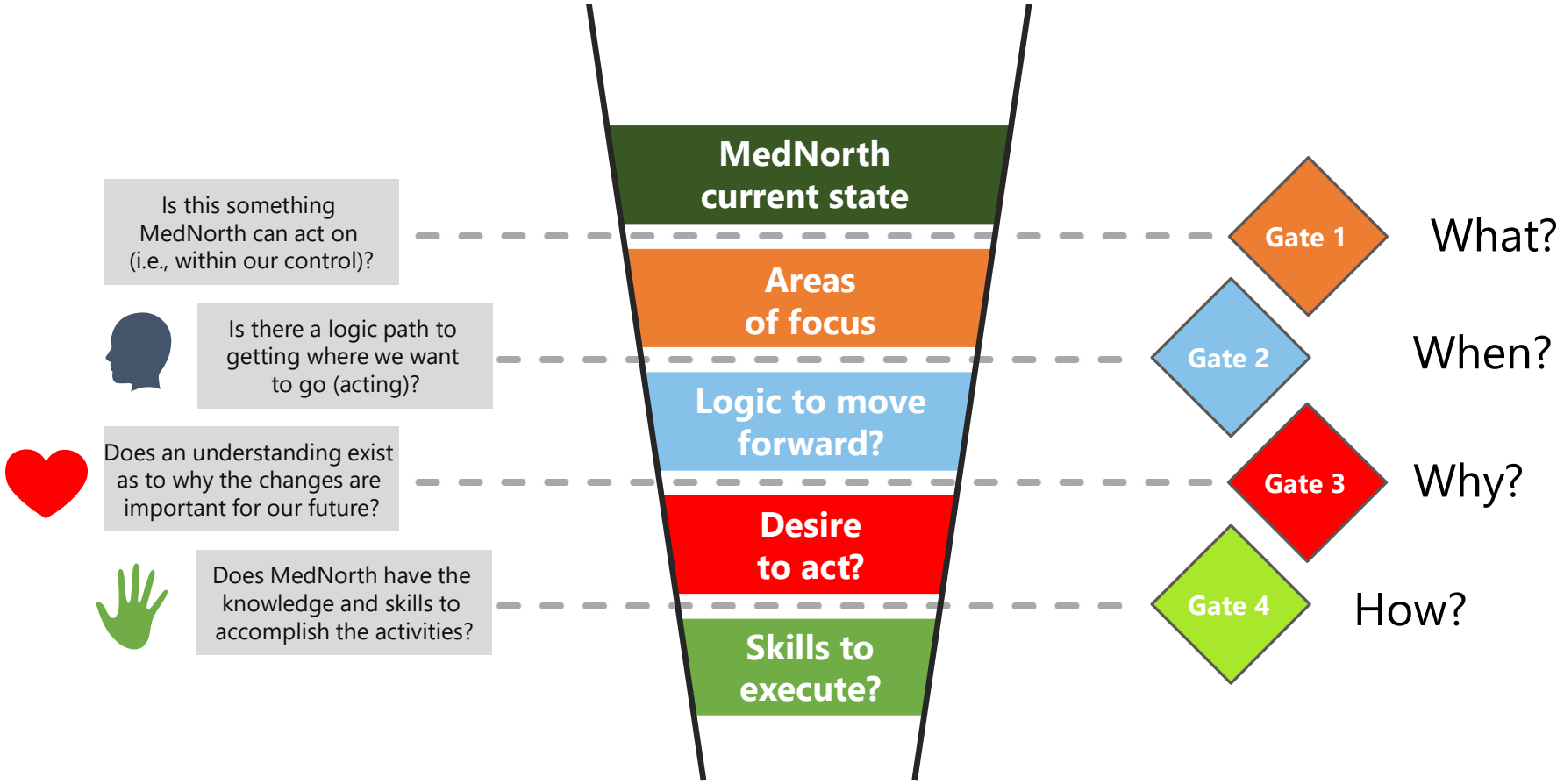
Focus on what is in front of you



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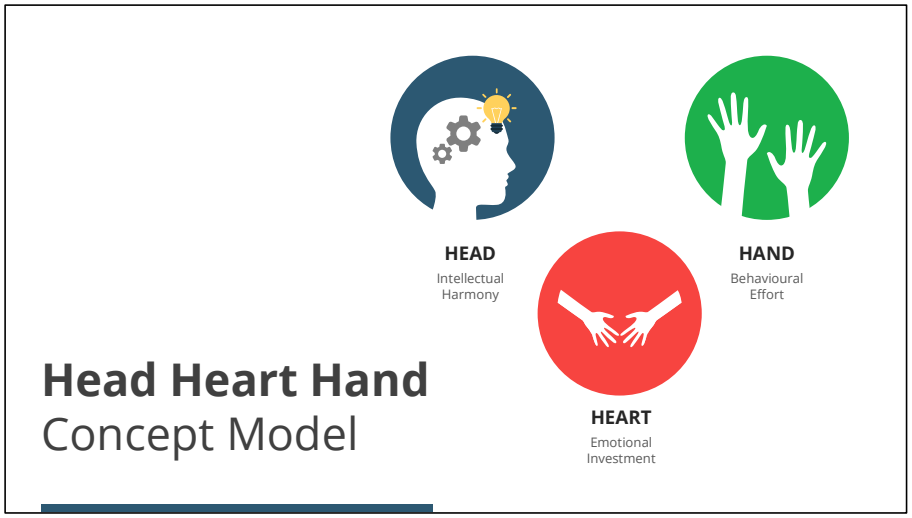
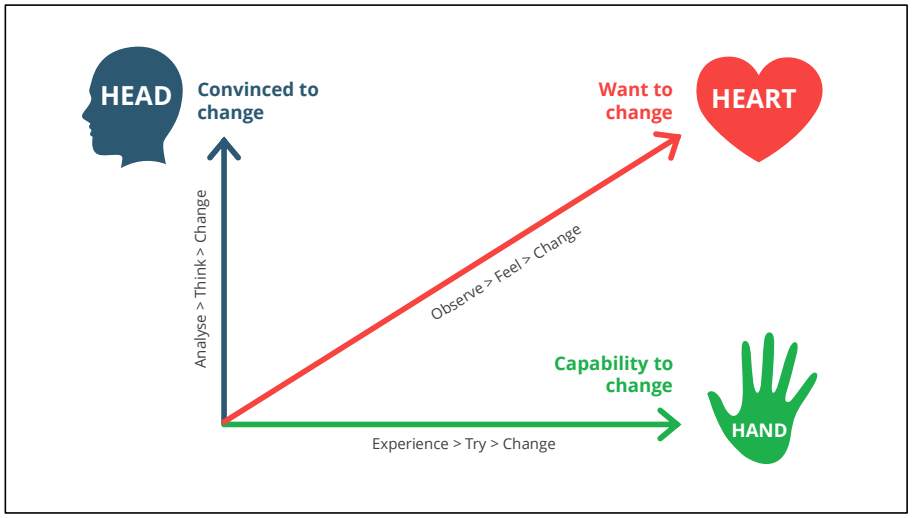
Planning the path forward





MedNorth Strategic Plan	Recommendation #1	Recommendation #2	Recommendation #3	Recommendation #4	Recommendation #5
The **LOGIC** about why the changes are needed.	Yes	Yes	Yes	Yes	Yes
The **EMOTIONS** about why the changes are important for future.	Yes	Yes	Yes	Yes	Yes
KNOWLEDGE of what to do to support the change	Yes	Yes	Yes	Yes	Yes

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Recommendation #1

Draft

Growth Plan

S	**SPECIFIC** What is your goal?	**My goal is:** to expand our services to additional well-deserving populations because it is the right thing to do, missional, and protective of our business model.
M	**MEASURABLE** How will you keep track of your progress?	**I will track my progress by:** understanding where unmet demand for services exist/originates and how best to meet those demands through outreach/marketing/new locations
A	**ATTAINABLE** How will you achieve your goal? Make a plan!	**I will achieve this goal by doing the following:** analyze service data, cross-business opportunities between medical and dental, and required space needs to support growth
R	**RELEVANT** How will this goal help you?	**This goal helps me because:** MedNorth is uncertain what its best future business model will/should look like in terms of maximizing its single site vs. adding locations/mobile units
T	**TIMELY** When will you achieve this goal?	**I will complete this goal by (date):** Data analysis will begin in earnest as soon as an outside resource is identified with the results being fed to the Building Committee.

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Recommendation #2

Building Committee

Draft

S	**SPECIFIC** What is your goal?	**My goal is:** determining the best use of our existing space, the space planning needs of the future model, and what services (how much) are located where.
M	**MEASURABLE** How will you keep track of your progress?	**I will track my progress by:** the ability to execute a growth strategy dependent on the better use of MedNorth's building for residency programs and being a learning health center
A	**ATTAINABLE** How will you achieve your goal? Make a plan!	**I will achieve this goal by doing the following:** identify members and charter a Building Committee to make recommendations on the future use of the MedNorth site.
R	**RELEVANT** How will this goal help you?	**This goal helps me because:** determining what services stay in the building and/or are enhanced via modifications/new construction must be tied to our growth strategy/sustainable
T	**TIMELY** When will you achieve this goal?	**I will complete this goal by (date):** members of the Building Committee will be identified/nominated by May 31st with monthly meetings to begin in June.

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Case Studies will be presented by their respective leadership

MedNorth HEALTH CENTER

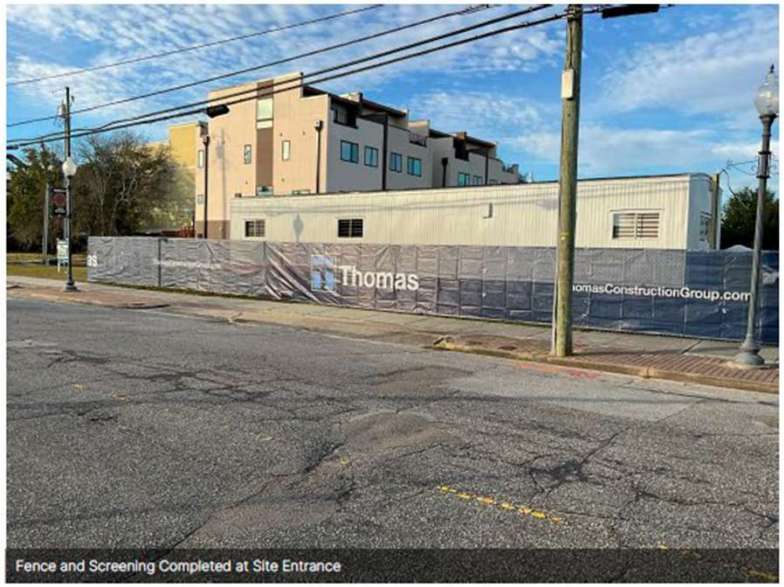
Althea Johnson
CEO
MedNorth

CHARLOTTE COMMUNITY HEALTH CLINIC

Carolyn Allison
CEO
Charlotte Community Health Center

MedNorth Health Center – Newly Opened!

- Beautiful new 30,000 sq. ft. health center
- Doubles capacity to 12,000 patients
- NMTC Transaction:
  - $23MM project
  - $3.9MM grant-like subsidy
- TA funded: business plan, and transaction readiness.
- Philanthropy: grant dollars to leverage the NMTC subsidy.



Fence and Screening Completed at Site Entrance

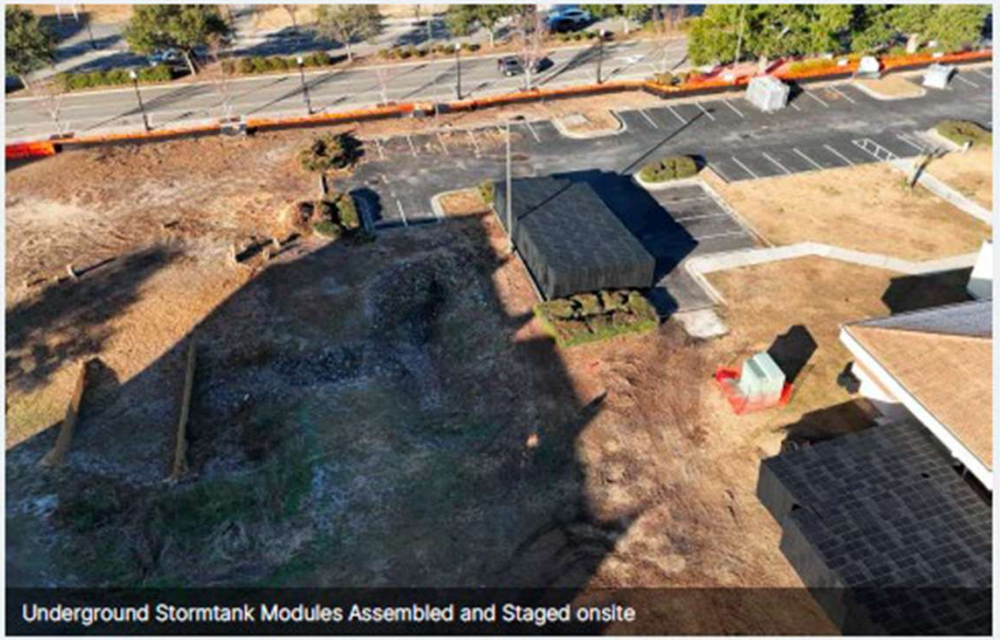

Tree Removal


Excavation for Stormtank Ongoing

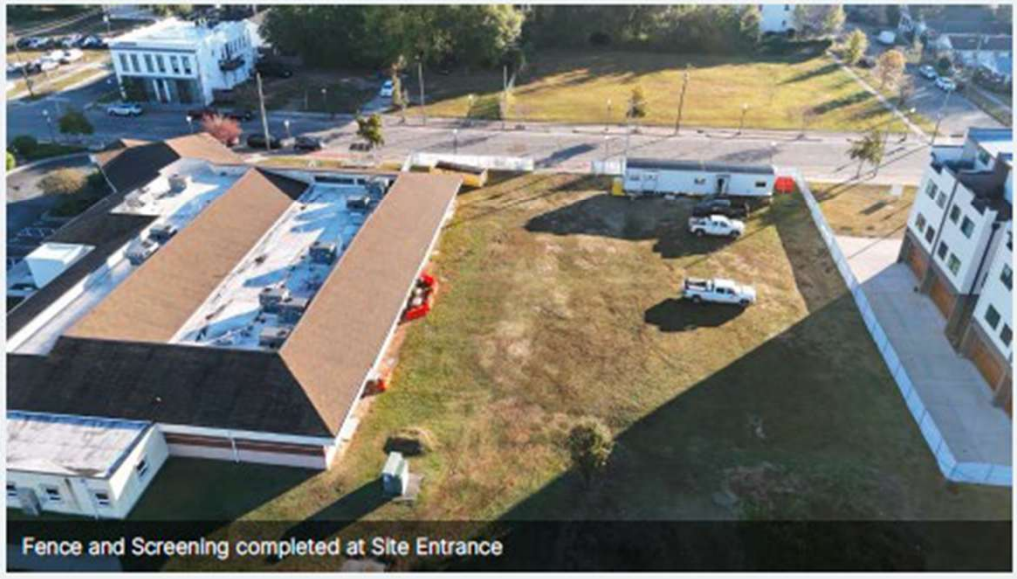

Excavation for Sto


Tree Removal Completed and Construction Barriers ongoing


Stockpiled Spoils for Removal



Underground Stormtank Modules Assembled and Staged onsite



Fence and Screening completed at Site Entrance

Fence and Screening completed at Site Entrance

Charlotte CHC Operational Expansion

(In planning)

1. Double capacity
   At 4 Satellite clinics,
   + mobile units, and pharmacy

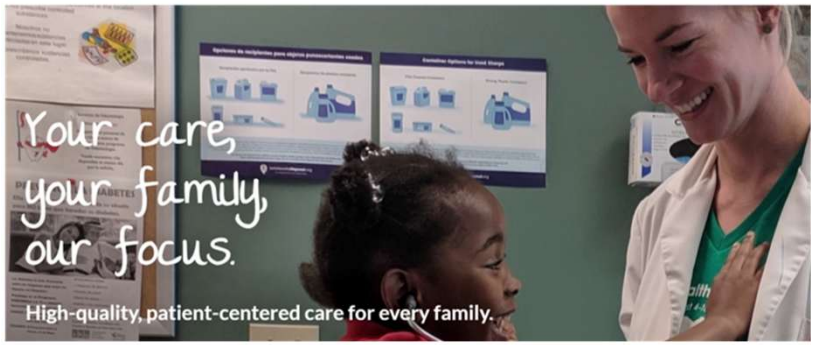
2. TA Funded:
   - HR recruitment/retention readiness for operational expansion
   - Transaction planning

3. NMTC transaction:
   - Growth working capital
   - Investment in $10-$12 MM of expanded operations
   - ~ $2MM of grant-like subsidy for growth

4. Philanthropy:

   Opportunity to leverage grant support, scale impact

Expanding high-quality, patient-centered care for every family



CHARLOTTE COMMUNITY HEALTH CLINIC

Follow up directly with the speakers around both your questions and potential growth opportunities

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Thanks for joining us.

We're glad you're here—let's keep moving health forward.