November 2020

# THE IMPACT OF INDIANA'S COMMUNITY HEALTH CENTERS



#### **EXECUTIVE SUMMARY**

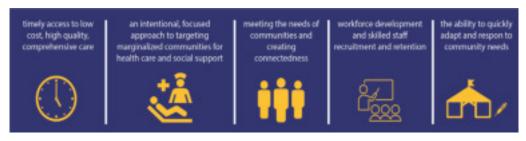
This report summarizes the economic benefits Indiana's Community Health Centers (CHCs) provide the state and their communities. During the past decade, the number of CHCs in Indiana has grown dramatically increasing from 81 sites in 2009 to 286 by the end of 2019. Indiana's CHCs provide high-quality, comprehensive primary health care with a particular focus on serving vulnerable populations. CHCs provide communities access to primary care, behavioral health, chronic disease management, preventive care, as well as other specialty, enabling, and ancillary services such as radiology, laboratory, dental, transportation, translation, and social services.

The increase in the number of CHCs and the value they provide translates to an economic impact of \$994,985,297 for the state. This is an increase of \$800 million, up from \$195 million in 2009. Every dollar spent on CHC operations, supplies, and personnel generates an additional \$.81 for the overall state economy, up from \$.54 in 2009. Additionally, CHCs provide 2,910 direct jobs to employees who support the operation of CHCs and another 3,082 jobs to workers in the larger economy who provide the goods and services purchased by CHCs and through income generated directly or indirectly by the CHCs. The impact on jobs has increased substantially since 2009 by contributing an additional 2,049 direct jobs and another 2,496 indirect jobs to Indiana's economy.

# Total Economic Impact for Indiana \$994,985,297 ANNUALLY \$445,156,508 NON-DIRECT DIRECT



### CHCs provide the following benefits to their communities:





Report prepared by The Center for Health Policy at IU Richard M. Fairbanks School of Public Health.

#### **INTRODUCTION**

During the past decade, the number of Community Health Centers (CHCs) in the state of Indiana has grown dramatically increasing from 81 sites in 2009 to 286 by the end of 2019. To understand the impact of the collective and increasing presence of CHCs throughout the state, the Indiana Primary Health Care Association (IPHCA) contracted with the Indiana University Richard M. Fairbanks School of Public Health's Center for Health Policy (CHP) to examine the return on investments in CHCs in terms of the health benefits provided to their clients as well as the economic benefits to the local communities in which they operate.

#### **BACKGROUND**

Within the US health care system, the main role of CHCs is to provide high-quality primary health care with a particular focus on serving vulnerable populations. CHCs, in particular, provide care to low-income patients and those who are uninsured or under insured. In this role as a health care safety-net provider, CHCs offer

a comprehensive array of healthcare services which include primary care, behavioral health, chronic disease management, preventive care, as well as other specialty, enabling, and ancillary services such as radiology, laboratory, dental, transportation, translation, and social services.

CHCs are a specifically defined type of health care organization. CHCs must offer services to anyone, regardless of their ability to pay; have a sliding fee system; be a nonprofit or public organization; be community-based with a board of directors composed primarily of patients; provide services in areas that are medically underserved or to an underserved population; offer comprehensive primary care services; and have an ongoing quality assurance program. One CHC may operate multiple clinic sites. CHC sites are predominantly located in urban counties with approximately 73.8% (211 out of the 286) in urban counties, 10.8% (31 out of 286) in counties that are primarily rural, and 10.1% (29 out of 286) in counties that have a mix of rural and urban areas. (see Figure 1).

 Table 1. Description of Service-Provision and Administrative Sites

Type of Site	N (%)
Stand-alone site	191 (66.8%)
School-based site	55 (19.2%)
Administrative site w/clinic	16 (5.6%)
Administrative site only	15 (5.2%)
Mobile-van-based site	5 (1.7%)
Correctional-facility-based site	2 (0.7%)
Hospital-based site	1 (0.4%)
Domestic-violence-center-based site	1 (0.4%)

Collectively, these 35 CHCs operate 271 service delivery sites in 50 counties in the state of Indiana. Individual sites may be stand-alone clinics or be co-located within an existing organization such as a school or a correctional facility. Some CHCs operate mobile (van-based) clinics that provide care to persons who may have difficulty reaching a brick-and-mortar site (see Table 1).

CHCs are funded by the Health Resources and Services Administration (HRSA) Bureau

of Primary Health Care through its Health Center program and the state of Indiana through tobacco settlement funds. Among the 271 service delivery sites in the state, 20 have received additional funding from HRSA to provide services to migrant workers, 16 to individuals living in public housing, and 64 to individuals who are homeless. These investments in CHCs generate not only direct economic benefits for the local economies in which they operate (e.g., hiring of staff, materials, physical plant), but also two types

Figure 1. Community Health Center Site Location



of economic spin-off benefits: (1) indirect economic benefits to the businesses that support the operation of the CHCs (e.g., the suppliers of materials, construction firms), and (2) induced economic benefits to the local economy from the increased spending by persons who have received either direct or indirect benefits from the operation of CHCs. The size of these "ripple effects" can sometimes exceed the original direct benefit, particularly when the local economy is depressed or when unemployment is high.

#### **METHODOLOGY**

Survey and administrative data were collected by the CHP and used to estimate the two components of CHC impact: economic and broader community benefit.

#### **Economic Impact Assessment**

The economic impact of CHC expenditures was assessed using IMPLAN<sup>1</sup>, an input-output software program that tracks for the backward and forward economic impact of CHCs in the local economy. Specifically, the IMPLAN program estimates the effect of the operational expenditures made by CHCs on economic activity, employment, and tax revenues elsewhere in the local economy (i.e. the ripple effect). The expenditure data used in these estimates was provided by the CHCs through a web-based survey, which identified total annual expenditures in four main categories: purchases. capital, construction, and total compensation. Beginning in May of 2020, the INPHCA contacted the 35 CHC overseeing organizations across the state to provide the link to the webbased survey. Each CHC organization was asked to provide the four types of expenditures for each of their individual sites. Between May and

the end of September 2020, CHC overseeing organizations were contacted on four occasions to request their participation in the assessment. Data collection for this component closed on September 30, 2020. The CHP received financial data from 31 of the 35 CHC overseeing organizations, representing a total of 215 of the 286 CHC sites in Indiana (75.2%).



#### **Qualitative Assessment of CHC Impact**

IPHCA also sent an invitation to CHC leaders asking for individuals interested in taking part in a qualitative interview with the CHP team to learn about the other ways that CHCs are contributing to the state and their local communities. Five individuals expressed interest and participated in an interview via Zoom. All interviews took place in September 2020. The five participants represented CHCs serving different counties and both rural and urban locations. Interviews lasted approximately 45 minutes on average.

#### **ECONOMIC IMPACT**

The first column in **Table 2** shows the impact of investments in CHCs on employment. CHCs supported 2,910.38 employees directly (i.e.,

<sup>&</sup>lt;sup>1</sup>IMPLAN Group, LLC. IMPLAN 2020. Huntsville, NC. IMPLAN.com

these are workers who provided CHC services to clients). In addition, the operation of the CHCs required the labor of 1.080.38 employees

of other organizations and businesses. Finally, the incomes generated by both the direct and indirect spending by CHCs created downstream employment for an additional 2,001.62 workers. Thus, for every worker directly employed by a CHC, 1.06 additional workers were employed either through the indirect support of CHC operations or by the induced economic activity from these operations. This

yields an employment social accounting matrix (SAM) multiplier of 2.06 (one direct hire and the additional 1.06 spin-off hires).

The results in columns 2, 3, and 4 represent the effects on labor income, gross domestic product, and the value of total output generated,

respectively. All dollar amounts have been inflation adjusted to 2020 values. The interpretation follows a similar pattern. For instance, for every dollar of labor income earned by an employee of a CHC, an additional \$0.45 is earned by either workers who support the operation of CHCs or by workers in the larger economy who then provide the goods and services purchased with the extra income generated directly or

indirectly by the CHCs. This results in a SAM multiplier of 1.45. The SAM multipliers for gross domestic product and total output are slightly



**Table 2. Economic Indicators by Impact** 

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	2,910.38	\$341,385,172.27	\$393,408,093.70	\$549,828,788.18
Indirect	1,080.38	\$57,541,628.12	\$85,095,690.96	\$159,910,801.81
Induced	2,001.62	\$95,843,620.31	\$162,975,724.83	\$285,245,707.83
Total Impact	5,992.38	\$494,770,420.71	\$641,479,509.49	\$994,985,297.82
Multiplier	2.06	1.45	1.63	1.81

Notes: The employment column estimates the economic output per workers directly involved in CHCs. This includes labor from CHC operations and CHC-specific construction. The labor income reflects a combination of employee compensation and proprietor income. The gross domestic product column is comprised of labor income, taxes on production and imports, and other property income. The last column is referred to as output and reflects the total value of the goods and services including labor income, taxes on production and imports, other property income, and the cost of all purchases including everything from clinical supplies to electricity. The rows specify which type of economic impact is estimated. A direct impact is those dollars spent on operations and the construction of CHCs in Indiana. The indirect impact encompasses those dollars realized by the supply chain and business to business spending. The third row, induced impact, represents household spending for everyone who is working in both the direct and indirect businesses. All results have been inflation adjusted to 2020 dollars.

Table 3. Tax results

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$2,194,092.31	\$7,558,153.39	\$9,752,245.70	\$65,267,618.19	\$75,019,863.90
Indirect	\$2,112,293.53	\$3,935,658.12	\$6,047,951.65	\$10,917,944.50	\$16,965,896.15
Induced	\$5,758,308.23	\$10,144,430.96	\$15,902,739.19	\$19,123,954.36	\$35,026,693.55
Total Impact	\$10,064,694.06	\$21,638,242.47	\$31,702,936.53	\$95,309,517.06	\$127,012,453.60
Multiplier	4.59	2.86	3.25	1.46	1.69

Notes: The county column estimates county taxes paid directly by CHCs and includes city and/or township taxes as well as taxes paid to cover police and fire departments and school districts. The state column estimates state taxes paid directly by CHCs. The federal column estimates federal taxes paid directly by CHCs. The total column estimates the total amount of taxes directly paid by CHCs across all levels. The rows specify which type of tax-related impact is estimated. A direct impact are those taxes paid directly by CHCs in Indiana. The indirect impact reflects taxes paid by activity in the supply chain and related to business-to-business spending. The induced impact represents taxes paid by everyone who is working in both the direct and indirect businesses. All results have been inflation adjusted to 2020 dollars.

higher, being 1.63 and 1.81, respectively. Thus, every dollar of output from CHCs generates an additional 81 cents in the state economy. In sum, the total economic impact of CHCs in the state of Indiana in 2018 was almost a billion dollars (\$994,985,297.82).

Compared to the 2009 economic impact study, CHCs have added another 27 cents on every dollar of direct spending of CHCs in state economic ripple effects for a total 81 cents on every dollar (inflation adjusted to 2020 dollars). The tax table represents the impact CHC taxes have on the broader economy. The county tax multiplier is \$4.59 which indicates that for every dollar of county tax paid by CHCs an additional \$3.59 in county taxes is generated within the state. The state specific taxes multiplier is \$2.86, indicating that for every dollar of state tax that is paid by CHCs an additional \$1.86 in state taxes are generated. Combined, county and state taxes result in an additional \$2.25 in

tax revenue for Indiana. Lastly, the federal tax multiplier is \$1.46 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.46 of federal tax.



The analyses presented do not specifically account for the non-profit status of CHCs.
Although sales tax and property tax are affected

by the non-profit status of CHCs, non-profit organizations pay federal labor taxes and their employees pay income tax. Because the majority of CHC expenditures are spent on payroll, the effect of not accounting for nonprofit status in these tax estimates is likely

small relative to other effects. Further, the current analysis is similar to that which was conducted in the previous 2009 assessment, allowing for comparison of the economic impacts of CHCs over time.

#### **PERCEIVED VALUE OF CHCs**

**Participants** contended that the impact of CHCs extends beyond the dollars generated in their communities and

the state. They provided examples of specific initiatives that bring value to their communities as well as descriptions of the benefit CHCs provide to patients and to other organizations. Participants identified five types of benefits that CHCs provide their communities:

- 1. timely access to low cost, high quality, comprehensive care:
- 2. an intentional, focused approach to targeting marginalized communities for health care and social support;
- 3. meeting the needs of communities and creating connectedness:
- 4. workforce development and skilled staff recruitment and retention: and
- 5. the ability to quickly adapt and respond to community needs.

#### 1. Timely access to low cost, high quality, comprehensive care:

 By providing timely appointments (including open access/same day scheduling for established patients), CHCs

> help community members avoid the use of emergency departments for preventive care. This helps to keep health care costs down and supports hospitals in maintaining speed of service in that setting.

· CHCs have established themselves as the safety-net for the community and for hospitals.

Additionally, through partnerships with

hospitals, CHCs provide continuity of care to individuals who are discharged from hospitals but who do not have an established primary care provider. Another emergency department follow-up program meets a similar need.

- CHCs provide cost savings for communities overall. In particular, CHCs have supported hospitals in divesting nonfinancially-productive primary care clinics and shifting the responsibility for those services to the CHCs.
- Many CHCs provide comprehensive care in one location making it convenient for patients to access multiple essential

"We really feel like our niche is safety

net care. So, we really look for those

opportunities in the community to pick

up the vulnerable and marginalized

populations. We've got a couple of

different programs that we feel like really

get at the heart of that. One of those

programs is an emergency department

follow up program. If folks are seen in the

emergency department and they don't have somewhere to follow up, we will see

them. An example would be if I had a

primary care provider and I got stitches in

the emergency department today [and]

my primary care provider couldn't get me

in, I could come to [the CHC] for

follow-up."

health care services. This patient-focused approach may include primary care, behavioral health, OB/GYN services, pharmacy, and community health workers support.

- CHCs have focused on educating providers so that they understand costs of specific services and prescriptions to patients so that they can better meet patient needs and recommend services and medications that patients can afford.
- One CHC incentivizes a focus on quality among all staff by establishing employee bonuses that are determined by quality metrics and patient satisfaction.

# 2. An intentional, focused approach to targeting marginalized communities for health care and social support:

- CHCs target vulnerable populations including undocumented immigrants and individuals who are homeless. More specifically, CHCs often offer extended weekday and weekend hours to address barriers to care for community members with less flexible work hours. Some CHCs also offer open access (walk-in) appointments to provide flexibility to individuals with access barriers and offer staff-resourced essential personal health items for individuals in need.
- Participants reported multiple CHCs intentionally encourage the development of cultural competencies among their staff. This creates an environment where patients can feel respected and treated with dignity. In such an environment, patients feel comfortable interacting with staff and clinicians about their personal and health care needs.

# 3. Meeting the needs of communities and creating connectedness:

"[The CHC clinic] is for everyone that has some barrier to care. Whether that is the financials, not having insurance, or just being able [to get there]...I will tell you there are no other doctors' offices open till 8:00 o'clock at night in [our area]..."

- By being local and establishing trust within communities, CHCs enhance a sense of community and support connectedness and relationship building.
- CHCs often employ navigators who provide warm handoffs for patients to connect with Medicaid/Medicare/Children's Health Insurance Program (CHIP) offices; job placement programs/adult learning centers; Women, Infants, and Children (WIC) program offices; and food pantries.
- Some CHCs support the provision of healthy activities for all youth in their communities by reducing barriers to sports activities and providing sports physicals for free at local schools.

"Community Health Centers often go where the grass is browner and make it greener."

 CHCs often establish partnerships that strategically work to improve communities.
 For example, one CHC partnered with a stand-alone pharmacy to open a location in an underserved community, providing access to essential health services (i.e., prescriptions) and to groceries in an area that was previously deemed a food desert. One respondent stated,

- "...We can truly help people from birth to death connecting to insurance options and typically, we find that when they come in for insurance, it always ends up being something else too they need access to other resources. So, we have become the resource experts in the community, even for people who are not our patients."
- CHCs have co-located near food pantries, WIC offices, and adult learning centers to encourage patient access to essential programs.

## 4. Workforce development and skill staff recruitment and retention:

- CHCs serve as training sites for clinicians in residency and seeking practical work experience. These training opportunities including nurse practitioners, physicians, and psychiatrists. School-based CHCs have also provided training in their dental clinics for students who are studying to become dental hygienists. These programs support workforce development in general and serve as strategic recruitment to underserved areas.
- CHCs work to provide and retain their highly trained, valuable staff members through comprehensive benefits and programs to make staff feel appreciated and valued.

# 5. Quickly adapt and respond to community needs:

- During the response to COVID-19, CHCs have quickly initiated the provision of COVID-19 testing for businesses and organizations in crisis, helping them to stay open and continue generating revenue and income for their workers.
- With a patient-centered focus, if the wait for an appointment exceeds more than a week for new patients, CHCs respond to patient need by adapting and adding staff.

"...in the middle of the HIV emergency response, we kind of determined that we were going to have to do something more permanent. We were doing just some kind of pop-up behavioral health triage and really saw the need for a more robust, comprehensive healthcare response, integrated healthcare response even beyond what we were doing in August. We started doing these pop-up triage things in like April, May and then by August had opened up a standalone site that was co-located with the Health Department."

Participants noted two particular challenges that their CHCs are working to address. These include improving the community's understanding that CHCs provide health care to all members of the community, not only the underserved and vulnerable populations. It was also noted that members of the community are often confused by the role of a nurse practitioner and are unaware that they have similar privileges to a doctor. Lastly, CHCs voiced a challenge in recruiting staff, particularly in rural communities, that speak Spanish.

#### **CONCLUSIONS**

Indiana's CHCs provide substantial value to the state in the form of economic stimulus. employment, and access to high quality health care. In particular, that state experienced an additional \$995 million in economic impacts as a result of CHCs in 2018. Compared to the previous 2009 economic impact study, CHCs have added another 27 cents on every dollar of direct spending of CHCs in state economic ripple effects for a total 81 cents on every dollar (inflation adjusted to 2020 dollars). Communities served by CHCs also benefited by additional tax revenue as a result of CHCs. In particular, 10.1 million county tax dollars were generated by CHCs along with 21.6 million state tax dollars for a combined Indiana tax benefit from of \$31.7 million.

The impact of CHCs extends beyond the dollars generated in their communities. CHC communities also benefit from the community building and coordination provided by CHCs. Further, CHCs foster training and recruitment opportunities for the growing health care workforce. CHCs are supporting their communities in managing chronic health conditions and working alongside partners in addressing social determinants of health care. The provision of timely access to low cost, high quality, comprehensive care focused on marginalized communities and vulnerable populations is crucial for Indiana. The COVID-19 pandemic has also highlighted the valuable role CHCs serve in responding to public health emergencies through their ability to quickly adapt and respond to community needs including targeted testing at local businesses.



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#### **APPENDIX**

A series of secondary analyses illustrate the economic impact of CHCs within their respective public health regions (**see Figure 2**).

Figure 2. Indiana Public Health District and County Map



#### Region 1. Lake, Porter, LaPorte, Newton, and Jasper Counties

Table 4. Region 1 Economic Indicators by Impact

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	763.84	\$70,637,339.41	\$84,236,115.37	\$140,488,455.64
Indirect	249.77	\$10,887,128.84	\$16,651,408.72	\$34,070,676.55
Induced	370.13	\$15,977,504.88	\$27,626,996.89	\$50,357,638.24
Total Impact	1,383.74	\$97,501,973.14	\$128,916,770.42	\$224,916,770.42
Multiplier	1.81	1.38	1.53	1.60

The first column in **Table 4** shows the impact of investments in CHCs on employment within Region 1. CHCs supported 763.84 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 1 required the labor of 249.77 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 370.13 workers. Overall, for every worker directly employed by a CHC in Region 1, 0.81 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 1.81 (one direct hire and the additional 0.81 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 1 is 1.38. For every dollar of labor income earned by an employee of a CHC in Region 1, an additional \$0.38 is earned by either workers who support the operation of CHCs in Region 1 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.53 and 1.60 respectively. Overall for every dollar of output from CHCs an additional 60 cents was generated in the economy in Region 1. The total economic impact of CHCs in Region 1 in 2018 was nearly one quarter of a billion dollars (\$224,916,770.42).

Table 5. Region 1 Tax results

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$424,844.10	\$1,643,579.72	\$2,068,423.82	\$13,632,321.25	\$15,700,745.07
Indirect	\$588,294.11	\$888,502.25	\$1,476,796.36	\$2,150,275.90	\$3,627,072.26
Induced	\$1,193,583.65	\$1,705,996.25	\$2,899,579.90	\$3,281,468.68	\$6,181,048.58
Total Impact	\$2,206,721.87	\$4,238,078.22	\$6,444,800.08	\$19,064,065.83	\$25,508,865.92
Multiplier	5.19	2.58	3.12	1.40	1.62

The tax table represents the impact CHC taxes have on the broader economy of Region 1. The county tax multiplier is \$5.19 which indicates that for every dollar of county tax paid by CHCs an additional \$4.19 in county taxes is generated within the region. The state specific taxes multiplier is \$2.58, indicating that for every dollar of state tax that is paid by CHCs an additional \$1.58 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$2.12 in tax revenue for Indiana. Lastly, the federal tax multiplier is \$1.40 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.40 of federal tax from Region 1.

Region 2. St. Joseph, Elkhart, Starke, Marshall, Kosciusko, Pulaski, Fulton Counties

**Table 6. Region 2 Economic Indicators by Impact** 

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	277.63	\$26,995,450.44	\$31,323,733.95	\$48,251,500.30
Indirect	96.85	\$5,408,955.91	\$7,791,561.74	\$14,642,832.64
Induced	147.82	\$6,784,032.08	\$11,319,239.56	\$20,125,873.21
Total Impact	522.30	\$39,188,438.43	\$50,434,535.24	\$83,020,206.15
Multiplier	1.88	1.45	1.61	1.73

The first column in **Table 6** shows the impact of investments in CHCs on employment within Region 2. CHCs supported 277.63 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 2 required the labor of 96.85 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 147.82 workers. Overall, for every worker directly employed by a CHC in Region 2, 0.88 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 1.88 (one direct hire and the additional 0.88 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 1 is 1.45. For every dollar of labor income earned by an employee of a CHC in Region 2, an additional \$0.45 is earned by either workers who support the operation of CHCs in Region 2 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.61 and 1.73 respectively. Overall for every dollar of output from CHCs an additional 73 cents was generated in the economy in Region 2. The total economic impact of CHCs in Region 2 in 2018 was just over 80 million dollars (\$83,020,206.15).

**Table 7. Region 2 Tax Results** 

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$241,716.61	\$596,557.09	\$838,273.70	\$4,902,015.67	\$5,740,289.37
Indirect	\$180,981.06	\$326,519.72	\$507,500.78	\$993,756.56	\$1,501,257.35
Induced	\$430,243.39	\$723,755.14	\$1,153,998.53	\$1,305,439.35	\$2,464,437.88
Total Impact	\$857,941.06	\$1,646,831.95	\$2,499,773.01	\$7,201,211.59	\$9,705,984.60
Multiplier	3.55	2.76	2.98	1.47	1.69

The tax table represents the impact CHC taxes have on the broader economy of Region 2. The county tax multiplier is \$3.55 which indicates that for every dollar of county tax paid by CHCs an additional \$2.55 in county taxes is generated within Region 2. The state specific taxes multiplier is \$2.76, indicating that for every dollar of state tax that is paid by CHCs an additional \$1.76 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$1.98 in tax revenue for Indiana. Lastly, the federal tax multiplier is \$1.47 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.47 of federal tax from Region 2.

Region 3. LaGrange, Steuben, Noble, DeKalb, Whitley, Allen, Miami, Wabash, Huntington, Wells, Adams Counties

**Table 8. Region 3 Economic Indicators by Impact** 

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	104.67	\$12,766,163.29	\$14,746,660.38	\$20,993,828.74
Indirect	37.03	\$1,668,188.79	\$2,707,008.55	\$5,654,680.98
Induced	94.62	\$4,176,353.77	\$7,315,169.90	\$13,408.874.92
Total Impact	236.31	\$18,610,705.85	\$24,768,838.83	\$40,057,384.64
Multiplier	2.26	1.46	1.68	1.91

The first column in **Table 8** shows the impact of investments in CHCs on employment within Region 3. CHCs supported 104.67 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 3 required the labor of 37.03 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 94.62 workers. Overall, for every worker directly employed by a CHC in Region 3, 1.26 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 2.26 (one direct hire and the additional 1.26 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 3 is 1.46. For every dollar of labor income earned by an employee of a CHC in Region 3, an additional \$0.46 is earned by either workers who support the operation of CHCs in Region 3 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.68 and 1.91 respectively. Overall for every dollar of output from CHCs an additional 91 cents was generated in the economy in Region 3. The total economic impact of CHCs in Region 3 in 2018 was over 40 millon dollars (\$40,057,384.64).

**Table 9. Region 3 Tax Results** 

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$92,359.93	\$293,529.51	\$385,889.44	\$2,481,625.78	\$2,867,515.23
Indirect	\$77,884.28	\$157,608.06	\$235,492.34	\$340.026.88	\$575,519.21
Induced	\$175,419.172	\$499,045.34	\$674,464.512	\$870,676.26	\$1,623,334.50
Total Impact	\$423,857.11	\$950,182.91	\$1,374,040.02	\$3,692,328.92	\$5,066.368.95
Multiplier	4.59	3.24	3.56	1.49	1.77

The tax table represents the impact CHC taxes have on the broader economy of Region 3. The county tax multiplier is \$4.59 which indicates that for every dollar of county tax paid by CHCs an additional \$3.59 in county taxes is generated within Region 3. The state specific taxes multiplier is \$3.24, indicating that for every dollar of state tax that is paid by CHCs an additional \$2.24 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$2.56 in tax revenue for Indiana. Lastly, the federal tax multiplier is \$1.49 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.49 of federal tax from Region 3.

Region 4. Benton, White, Cass, Carroll, Fountain, Tippecanoe, Montgomery, Clinton Counties

**Table 10. Region 4 Economic Indicators by Impact** 

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	159.72	\$15,223,403.66	\$17,827,426.35	\$29,002,028.96
Indirect	46.62	\$1,717,413.71	\$2,685,814.12	\$5,658,342.77
Induced	80.72	\$3,169,552.87	\$6,089.816.38	\$10,903,685.69
Total Impact	287.06	\$20,110,370.24	\$26,603,056.86	\$45,564,057.41
Multiplier	1.80	1.32	1.49	1.57

The first column in **Table 10** shows the impact of investments in CHCs on employment within Region 4. CHCs supported 159.72 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 4 required the labor of 46.62 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 80.72 workers. Overall, for every worker directly employed by a CHC in Region 1, 0.80 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 1.80 (one direct hire and the additional 0.80 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 4 is 1.32. For every dollar of labor income earned by an employee of a CHC in Region 4, an additional \$0.32 is earned by either workers who support the operation of CHCs in Region 4 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.49 and 1.57 respectively. Overall for every dollar of output from CHCs an additional 57 cents was generated in the economy in Region 4. The total economic impact of CHCs in Region 4 in 2018 were over 45 million dollars (\$45,564,057.41).

**Table 11. Region 4 Tax Results** 

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$118,422.20	\$348,644.33	\$467,066.53	\$2,855,487.61	\$3,322,554.14
Indirect	\$94,928.84	\$151,374.94	\$246,303.78	\$334,747.20	\$581,050.98
Induced	\$270,253.70	\$412,161.01	\$682,414.71	\$651,728.16	\$1,334,142.88
Total Impact	\$483,604.74	\$912,180.28	\$1,395,785.02	\$3,841,962.97	\$5,237,748.00
Multiplier	4.08	2.62	2.99	1.35	1.58

The tax table represents the impact CHC taxes have on the broader economy of Region 4. The county tax multiplier is \$4.08 which indicates that for every dollar of county tax paid by CHCs an additional \$3.08 in county taxes is generated within Region 4. The state specific taxes multiplier is \$2.62, indicating that for every dollar of state tax that is paid by CHCs an additional \$1.62 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$1.99 in tax revenue for Region 4. Lastly, the federal tax multiplier is \$1.35 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.35 of federal tax from Region 4.

Region 5. Boone, Hamilton, Hendricks, Marion, Hancock, Morgan, Johnson, Shelby Counties

**Table 12. Region 5 Economic Indicators by Impact** 

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	574.60	\$95,031,444.51	\$107,956,548.46	\$127,597,899.69
Indirect	354.87	\$26,129,831.98	\$37,785,686.89	\$63,317,462.25
Induced	705.41	\$42,006,741.22	\$67,968,593.01	\$112,254,574.14
Total Impact	1,634.88	\$163,168,017.72	\$213,710,828.36	\$303,169,936.09
Multiplier	2.85	1.72	1.98	2.38

The first column in **Table 12** shows the impact of investments in CHCs on employment within Region 5. CHCs supported 574.60 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 5 required the labor of 354.87 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 705.41 workers. Overall, for every worker directly employed by a CHC in Region 1, 1.85 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 2.85 (one direct hire and the additional 1.85 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 5 is 1.72. For every dollar of labor income earned by an employee of a CHC in Region 5, an additional \$0.72 is earned by either workers who support the operation of CHCs in Region 5 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.98 and 2.38 respectively. Overall for every dollar of output from CHCs an additional 1.38 cents was generated in the economy in Region 5. The total economic impact of CHCs in Region 5 in 2018 was over 300 million dollars (\$303,169,936.09).

**Table 13. Region 5 Tax Results** 

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$643,216.68	\$2,001,829.25	\$2,645,045.93	\$17,898,564.47	\$20,543,610.41
Indirect	\$663,283.01	\$1,456,631.90	\$2,119,914.91	\$4,756,725.27	\$6,876,640.18
Induced	\$1,874,745.84	\$3,768,902.91	\$5,643,648.75	\$8,029,293.60	\$13,672,942.35
Total Impact	\$3,181,245.53	\$7,227,364.07	\$10,408,609.60	\$30,684,583.34	\$41,093,192.94
Multiplier	4.95	3.61	3.94	1.71	2.00

The tax table represents the impact CHC taxes have on the broader economy of Region 5. The county tax multiplier is \$4.95 which indicates that for every dollar of county tax paid by CHCs an additional \$3.95 in county taxes is generated within Region 5. The state specific taxes multiplier is \$3.61, indicating that for every dollar of state tax that is paid by CHCs an additional \$2.61 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$2.94 in tax revenue for Region 5. Lastly, the federal tax multiplier is \$1.71 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.71 of federal tax from Region 5.

Region 6. Howard, Grant, Blackford, Jay, Tipton, Madison, Delaware, Randolph, Henry, Wayne, Rush, Fayette, Union Counties

Table 14. Region 6 Economic Indicators by Impact

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	637.71	\$74,897,321.35	\$85,154,545.42	\$113,353,825.41
Indirect	174.69	\$6,760,373.58	\$9,808,528.83	\$20,600,951.72
Induced	369.77	\$14,562,899.75	\$25,944,747.54	\$47,458,348.16
Total Impact	1,182.17	\$96,220,594.68	\$120,907,821.78	\$181,413,125.29
Multiplier	1.85	1.28	1.42	1.60

The first column in **Table 14** shows the impact of investments in CHCs on employment within Region 6. CHCs supported 637.71 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 6 required the labor of 174.69 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 369.77 workers. Overall, for every worker directly employed by a CHC in Region 6, 0.85 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 1.85 (one direct hire and the additional 0.85 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 6 is 1.28. For every dollar of labor income earned by an employee of a CHC in Region 6, an additional \$0.28 is earned by either workers who support the operation of CHCs in Region 6 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.42 and 1.60 respectively. Overall for every dollar of output from CHCs an additional 60 cents was generated in the economy in Region 6. The total economic impact of CHCs in Region 6 in 2018 was over 181 million dollars (\$181,413,125.29).

Table 15. Region 6 Tax Results

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$373,220.73	\$1,673,236.35	\$2,046,457.08	\$14,848,275.29	\$16,894,732.36
Indirect	\$283,910.10	\$538,818.14	\$822,728.24	\$1,362,992.78	\$2,185,721.03
Induced	\$1,068,742.48	\$1,867,650.03	\$2,936,392.51	\$3,091,213.84	\$6,027,606.35
Total Impact	\$1,725,873.31	\$4,079,704.52	\$5,805,577.83	\$19,302,481.91	\$25,108,059.74
Multiplier	4.62	2.44	2.84	1.30	1.49

The tax table represents the impact CHC taxes have on the broader economy of Region 6. The county tax multiplier is \$4.62 which indicates that for every dollar of county tax paid by CHCs an additional \$3.62 in county taxes is generated within Region 6. The state specific taxes multiplier is \$2.44, indicating that for every dollar of state tax that is paid by CHCs an additional \$1.44 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$1.84 in tax revenue for Indiana. Lastly, the federal tax multiplier is \$1.30 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.30 of federal tax from Region 6.

#### Region 7. Vermillion, Parke, Putnam, Vigo, Clay, Owen, Sullivan, Greene Counties

**Table 16. Region 7 Economic Indicators by Impact** 

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	194.23	\$19,491,337.55	\$22,222,956.45	\$31,473,250.16
Indirect	55.81	\$2,096,787.24	\$3,336,080.40	\$7,061,489.21
Induced	98.64	\$3,589,911.97	\$6,605,707.18	\$12,320,245.71
Total Impact	348.68	\$25,178,036.76	\$32,164,744.04	\$50,854,985.08
Multiplier	1.80	1.29	1.45	1.62

The first column in **Table 16** shows the impact of investments in CHCs on employment within Region 7. CHCs supported 194.23 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 7 required the labor of 55.81 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 98.64 workers. Overall, for every worker directly employed by a CHC in Region 7, 0.80 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 1.80 (one direct hire and the additional 0.80 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 7 is 1.29. For every dollar of labor income earned by an employee of a CHC in Region 7, an additional \$0.29 is earned by either workers who support the operation of CHCs in Region 7 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.45 and 1.62 respectively. Overall for every dollar of output from CHCs an additional 62 cents was generated in the economy in Region 7. The total economic impact of CHCs in Region 7 in 2018 was nearly 51 million dollars (\$50,854,985.08).

**Table 17. Region 7 Tax Results** 

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$148,325.59	\$452,484.97	\$600,810.56	\$3,755,367.00	\$4,356,177.56
Indirect	\$110,717.18	\$198.853.33	\$110,916.363	\$425,940.43	\$735,510.94
Induced	\$280,336.00	\$483,273.07	\$763,609.07	\$762,946.86	\$1,526,555.92
Total Impact	\$539,348.76	\$1,134,611.37	\$1,673,960.13	\$4,944,254.29	\$6,618,244.42
Multiplier	3.63	2.51	2.79	1.32	1.52

The tax table represents the impact CHC taxes have on the broader economy of Region 7. The county tax multiplier is \$3.63 which indicates that for every dollar of county tax paid by CHCs an additional \$2.63 in county taxes is generated within the region. The state specific taxes multiplier is \$2.51, indicating that for every dollar of state tax that is paid by CHCs an additional \$1.51 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$1.79 in tax revenue for Region 7. Lastly, the federal tax multiplier is \$1.52 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.52 of federal tax from Region 7.

Region 8. Monroe, Brown, Bartholomew, Lawrence, Jackson, Orange, Washington Counties

**Table 18. Region 8 Economic Indicators and Impact** 

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	62.81	\$9,453,637.01	\$10,604,479.29	\$12,084.613.40
Indirect	20.13	\$880,115.13	\$1,413,749.01	\$2,939,207.72
Induced	48.82	\$1,944,499.43	\$3,703,317.38	\$6,729,544.43
Total Impact	131.76	\$12,278,251.57	\$15,721,545.68	\$21,753,365.56
Multiplier	2.10	1.30	1.48	1.80

The first column in **Table 18** shows the impact of investments in CHCs on employment within Region 8. CHCs supported 62.81 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 8 required the labor of 20.13 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 48.82 workers. Overall, for every worker directly employed by a CHC in Region 8, 1.10 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 2.10 (one direct hire and the additional 1.10 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 8 is 1.30. For every dollar of labor income earned by an employee of a CHC in Region 8, an additional \$0.30 is earned by either workers who support the operation of CHCs in Region 8 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.48 and 1.80 respectively. Overall for every dollar of output from CHCs an additional 80 cents was generated in the economy in Region 8. The total economic impact of CHCs in Region 8 in 2018 was nearly 22 million dollars (\$21,753,365.56).

**Table 19. Region 8 Tax results** 

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$56,067.21	\$186,738.45	\$242,805.66	\$1,736,063.18	\$1,978,868.83
Indirect	\$39,971.13	\$74,834.98	\$114,806.11	\$169,717.74	\$284,523.85
Induced	\$148,075.87	\$261,993.20	\$410,069.07	\$396,034.67	\$806,103.74
Total Impact	\$244,114.20	\$523,566.63	\$767,680.83	\$2,301,815.59	\$3,069,496.42
Multiplier	4.35	2.80	3.16	1.33	1.55

The tax table represents the impact CHC taxes have on the broader economy of Region 8. The county tax multiplier is \$4.35 which indicates that for every dollar of county tax paid by CHCs an additional \$3.35 in county taxes is generated within Region 8. The state specific taxes multiplier is \$2.80, indicating that for every dollar of state tax that is paid by CHCs an additional \$1.80 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$2.16 in tax revenue for Region 8. Lastly, the federal tax multiplier is \$1.33 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.33 of federal tax from Region 8.

Region 9. Decatur, Franklin, Jennings, Ripley, Dearborn, Scott, Jefferson, Ohio, Switzerland, Clark, Floyd, Harrison Counties

**Table 20. Region 9 Economic Indicators and Impact** 

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	47.76	\$4,302,549.68	\$5,063,222.81	\$8,432,999.46
Indirect	16.31	\$709,222.96	\$1,027,974.18	\$2,159,765.03
Induced	22.37	\$881,788.27	\$1,618,965.09	\$2,964,660.41
Total Impact	86.43	\$5,893,560.91	\$7,710,162.08	\$13,557,424.90
Multiplier	1.81	1.37	1.52	1.61

The first column in **Table 20** shows the impact of investments in CHCs on employment within Region 9. CHCs supported 47.76 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 9 required the labor of 16.31 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 22.37 workers. Overall, for every worker directly employed by a CHC in Region 9, 0.81 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 1.81 (one direct hire and the additional 0.81 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 9 is 1.37. For every dollar of labor income earned by an employee of a CHC in Region 9, an additional \$0.37 is earned by either workers who support the operation of CHCs in Region 9 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.52 and 1.61 respectively. Overall for every dollar of output from CHCs an additional 61 cents was generated in the economy in Region 9. The total economic impact of CHCs in Region 9 in 2018 was over 13 million dollars (\$13,557,424.90).

Table 21. Region 9 Tax results

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$26,990.97	\$96,142.85	\$123,133.82	\$809,807.84	\$932,941.65
Indirect	\$28,481.19	\$56,928.88	\$85,410.07	\$137,298.34	\$222,708.41
Induced	\$62,713.44	\$118,139.85	\$180,853.29	\$181,713.02	\$362.566.30
Total Impact	\$118,185.58	\$271,211.58	\$389,397.16	\$1,128,819.20	\$1,518,216.36
Multiplier	4.38	2.82	3.16	1.39	1.63

The tax table represents the impact CHC taxes have on the broader economy of Region 9. The county tax multiplier is \$4.38 which indicates that for every dollar of county tax paid by CHCs an additional \$3.38 in county taxes is generated within Region 9. The state specific taxes multiplier is \$2.82, indicating that for every dollar of state tax that is paid by CHCs an additional \$1.82 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$2.16 in tax revenue for Region 9. Lastly, the federal tax multiplier is \$1.39 which indicates that every \$1.00 of federal tax paid by CHCs results in an additional \$0.39 of federal tax from Region 9.

Region 10. Knox, Daviess, Martin, Gibson, Pike, Dubois, Crawford, Posey, Vanderburgh, Warrick, Spencer, Perry Counties

**Table 22. Region 10 Economic Indicators by Impact** 

Type of Impact	Employment	Labor Income	Gross Domestic Product	Total Output
Direct	87.42	\$12,586,525.36	\$14,272,405.22	\$18,150,386.41
Indirect	28.29	\$1,283,609.99	\$1,887,878.52	\$3,805,392.95
Induced	63.32	\$2,750,336.07	\$4,783,171.39	\$8,722,262.91
Total Impact	179.04	\$16,620,471.43	\$20,943,455.63	\$30,678,042.28
Multiplier	2.05	1.32	1.47	1.69

The first column in **Table 22** shows the impact of investments in CHCs on employment within Region 10. CHCs supported 87.42 employees directly (i.e., workers who provided CHC services to clients). The operation of the CHCs in Region 10 required the labor of 28.29 employees associated with other organizations and businesses. The income generated by both the direct and indirect spending by CHCs created downstream employment for an additional 63.32 workers. Overall, for every worker directly employed by a CHC in Region 10, 1.05 additional workers were employed through the indirect support of CHC operations or by the induced economic activity from these operations. This results in an employment social accounting matrix (SAM) multiplier of 2.05 (one direct hire and the additional 1.05 spin-off hires). The remaining columns represent the effects on labor income, gross domestic product, and the value of total output generated respectively.

The SAM multiplier for labor income in Region 10 is 1.32. For every dollar of labor income earned by an employee of a CHC in Region 10, an additional \$0.32 is earned by either workers who support the operation of CHCs in Region 10 or by workers in the regional economy who then provide the goods and services purchased with the extra income generated directly or indirectly by the CHCs. The SAM multipliers for gross domestic product and total output are 1.47 and 1.69 respectively. Overall for every dollar of output from CHCs an additional 69 cents was generated in the economy in Region 10. The total economic impact of CHCs in Region 10 in 2018 was nearly 31 million dollars (\$30,678,042.28).

**Table 23. Region 10 Tax results** 

Type of Impact	County	State	Indiana Tax All Levels Total	Federal	Total
Direct	\$68,928.30	\$265,410.87	\$334,339.17	\$2,348,090.10	\$2,682,429.27
Indirect	\$43,842.63	\$85,585.93	\$129,428.56	\$246,463.39	\$375,891.95
Induced	\$171,000.97	\$303,514.15	\$474,515.12	\$553,439.92	\$1,027,955.04
Total Impact	\$283,771.91	\$654,510.95	\$938,282.86	\$3,147,993.41	\$4,086,276.26
Multiplier	4.12	2.47	2.81	1.34	1.52

The tax table represents the impact CHC taxes have on the broader economy of Region 1. The county tax multiplier is \$4.12 which indicates that for every dollar of county tax paid by CHCs an additional \$3.12 in county taxes is generated within the region. The state specific taxes multiplier is \$2.47, indicating that for every dollar of state tax that is paid by CHCs an additional \$1.47 in state taxes are generated regionally. Combined, county and state taxes result in an additional \$1.81 in tax revenue for Region 10. Lastly, the federal tax multiplier is \$1.34 which indicates that ever \$1.00 of federal tax paid by CHCs results in an additional \$0.34 of federal tax from Region 10.