

*UNIVERSITY OF KENTUCKY*

*Kentucky Homeplace*

April 1, 2014 – June 30, 2014

Quarterly Report



*Kentucky Homeplace* <http://www.kyruralhealth.org/homeplace>

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Front page photograph of Perry County’s Buckhorn Lake spillway, courtesy of Ronald Jent, Jr.

## *Kentucky Homeplace*

My Fellow Kentuckians:

Kentucky Homeplace emphasizes education for clients on chronic disease management, healthier lifestyles and stressing preventative care. For overall health, Homeplace provides education on healthy eating habits and increasing physical activities. Our diabetic materials include education on the condition, eye care, foot care, diet and physical activity. Other topics for education include information on the condition and appropriate diets for hypertension, cholesterol and heart disease. Clients are also given education on preventative screenings including mammograms, Pap Smears, colon and prostate exams. For clients who want to quit any type of tobacco use, education and referrals for cessation classes, support groups and aids are given.

### *Quarterly Summary*

Here's a summary of services for this quarter, April 1, 2014 – June 30, 2014: the number of unduplicated clients served was **4,475**; the number of services was **71,571**; the amount of medications accessed was **\$2,937,471**; other services values (not medications) accessed totaled **\$455,644** for a combined total of **\$3,391,990**. The top client medical conditions included hypertension, high cholesterol, diabetes, mental health, and digestive systems.

### *Annual Summary*

Our annual summary of services for July 1, 2013 – June 30, 2014 include: total number of unduplicated clients was **7,785**; individual clients are seen on the average of 3-4 times a year. The number of services was **343,748** with services values of **\$2,160,525** (this total includes everything except for prescription medications); and medication values totaled **\$22,218,996**. Total value of dollars accessed on behalf of the Commonwealth's citizens was **\$24,379,521**.

The entire quarterly report is posted on the UK Center of Excellence in Rural Health's web page at <http://kyruralhealth.org/homeplace>. The report is found under the Reports tab, Quarterly Reports and then click on April - June 2014. If you wish to have a printed copy, please call 1-855-859-2374 or email me at [fjfeltn@uky.edu](mailto:fjfeltn@uky.edu).

Sincerely,

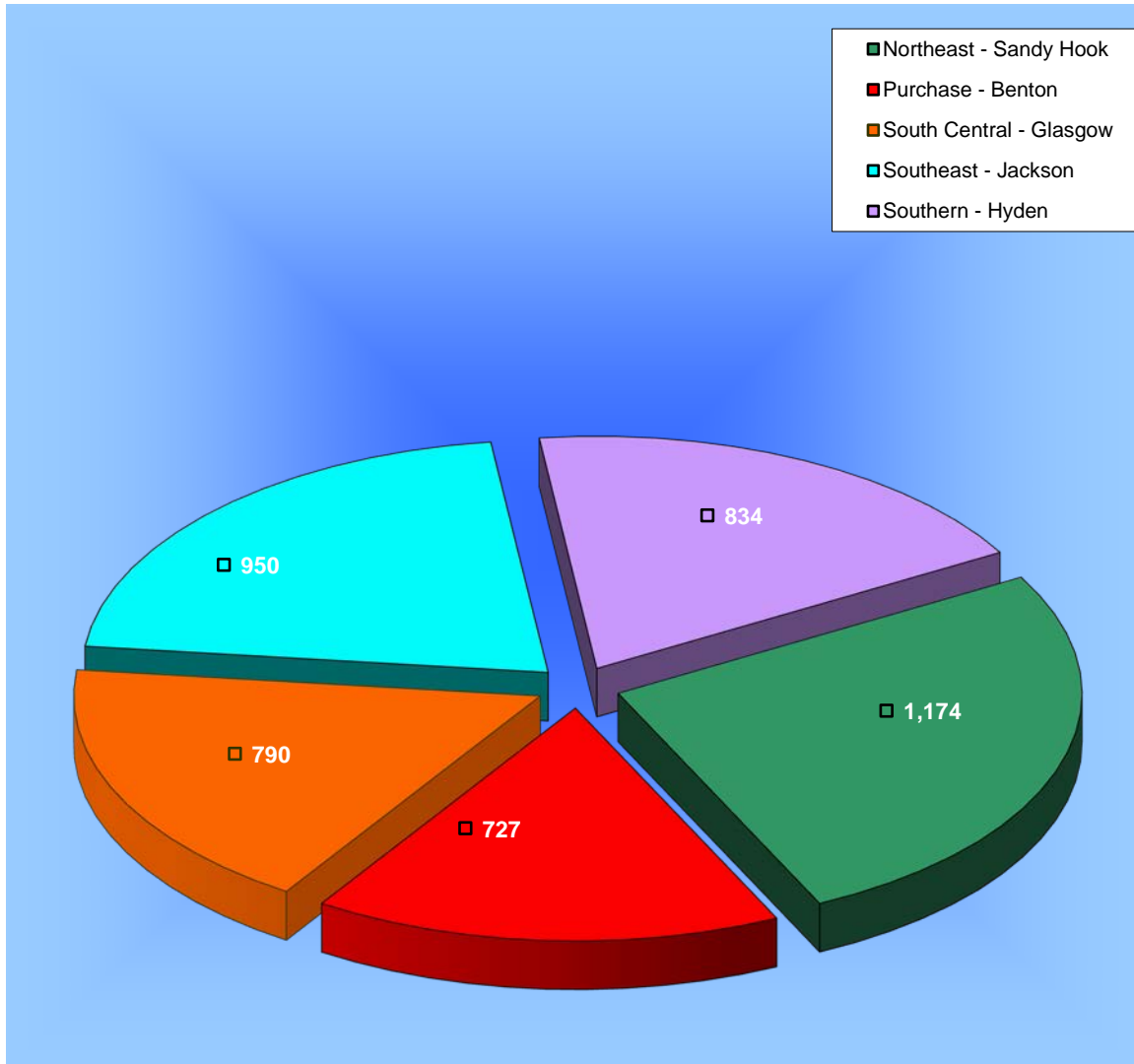


Fran Feltner, DNP, RN, MSN  
Director, UK Center of Excellence in Rural Health

<b>AGE DISTRIBUTION OF HOMEPLACE CLIENTS</b>		
<b>April 1, 2014 – June 30, 2014</b>		
<b>CATEGORY</b>	<b>FEMALE</b>	<b>MALE</b>
AGES 0 TO 4	2	1
AGES 5 TO 12	4	6
AGES 13 TO 14	2	1
AGES 15 TO 19	5	5
AGES 20 TO 24	44	33
AGES 25 TO 44	392	281
AGES 45 TO 64	1,584	1,044
AGES 65 TO 74	481	287
AGES 75 TO 84	158	90
AGE 85 AND OVER	40	15
TOTALS	2,712	1,763
<b>Median Age:</b>	56.5	55.6
Source: Data extracted from the Kentucky Homeplace database. Total Unduplicated Clients <b>4,475</b>		

<b>POVERTY LEVELS OF HOMEPLACE CLIENTS</b>								
<b>April 1, 2014 – June 30, 2014</b>								
	100%	101-133%	134-150%	151-200%	201-250%	251-300%	300+%	Total
CLIENTS	2,620	755	325	574	138	44	19	<b>4,475</b>
TOTALS	58.55%	16.87%	7.26%	12.83%	3.08%	0.98%	0.42%	100.00%
Source: Data extracted from the Kentucky Homeplace database. Total Unduplicated Clients <b>4,475</b>								

## Total Clients Served By Region April 1, 2014 – June 30, 2014

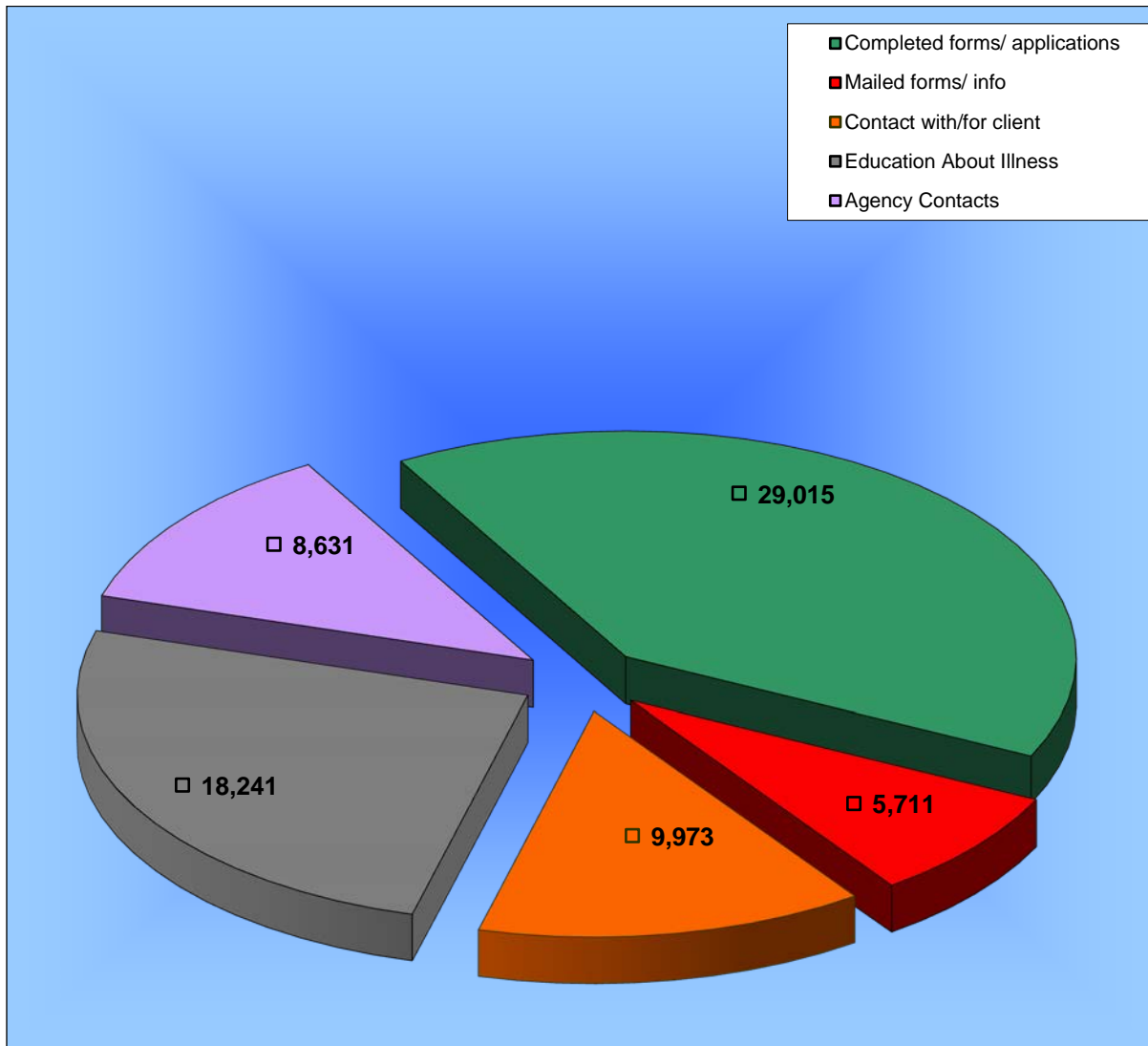


**TOTAL UNDUPLICATED CLIENTS FOR QUARTER: 4,475\***

\*This total represents unduplicated clients seen this quarter. Some clients may be seen more than once a quarter or by more than one community health worker a quarter.

# Client Services

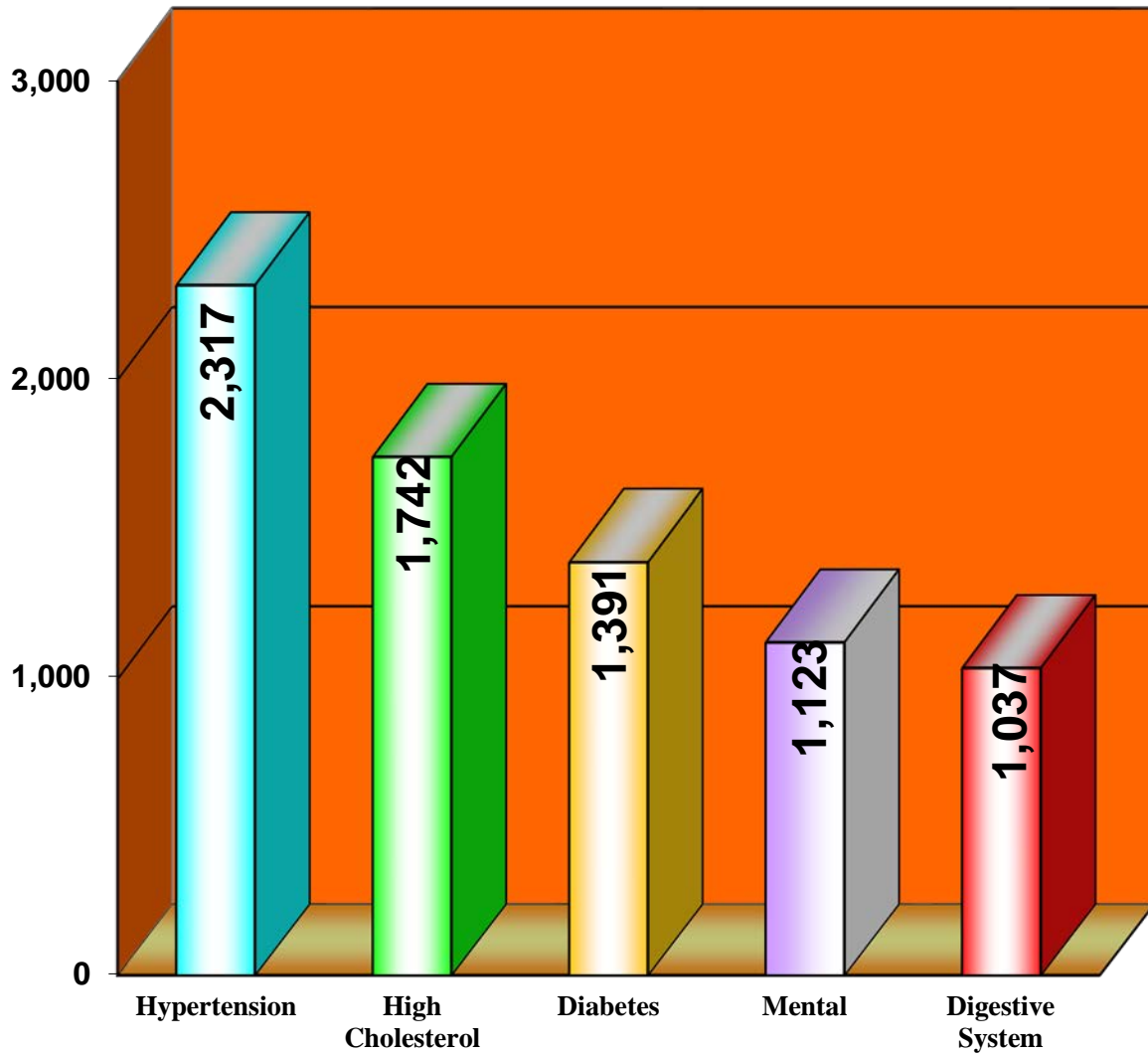
April 1, 2014 – June 30, 2014



**TOTAL SERVICES FOR THE QUARTER: 71,571**

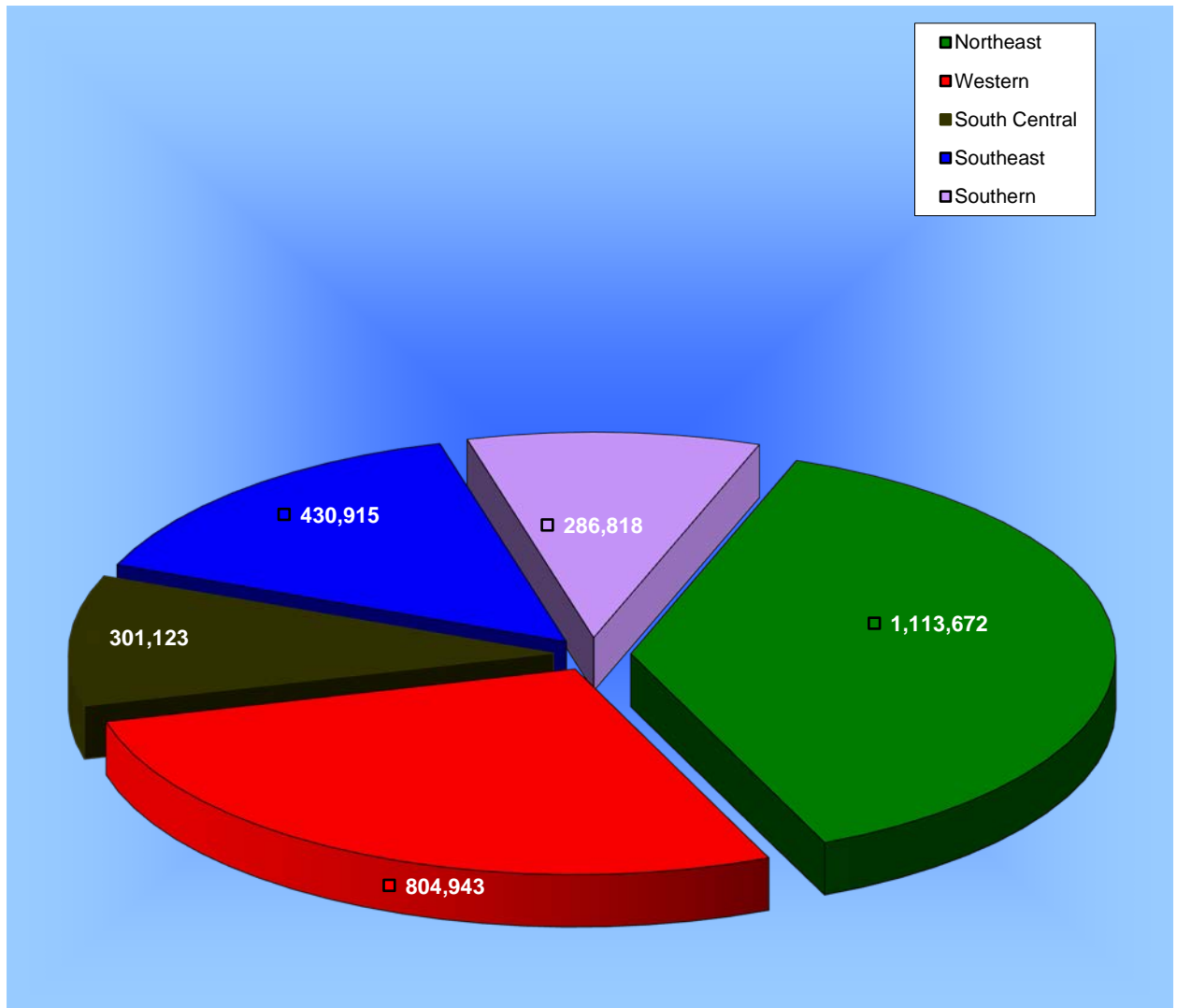
## Top Five Client Problems By Condition

April 1, 2014 – June 30, 2014





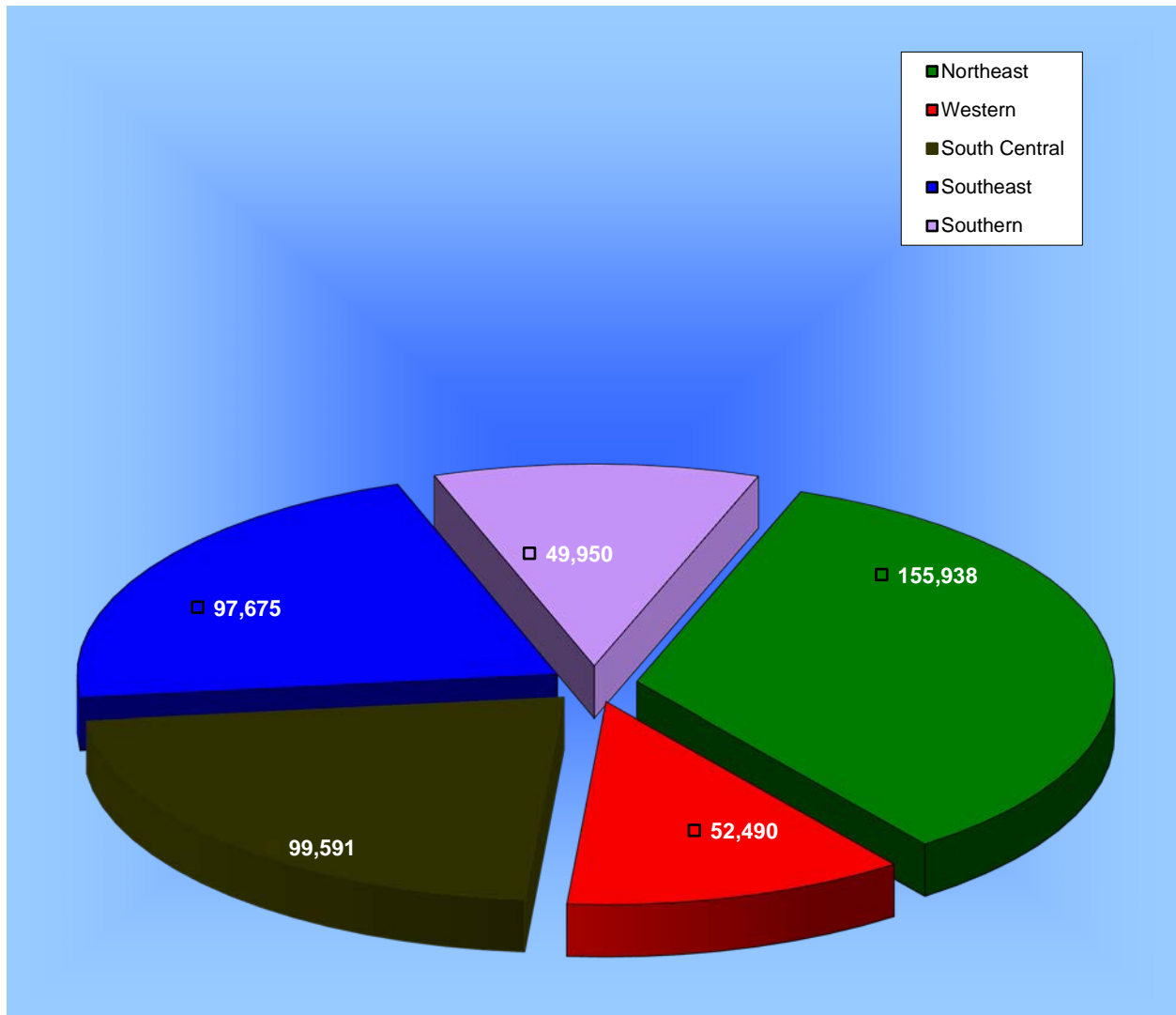
## Client Medications Value April 1, 2014 – June 30, 2014



**TOTAL MEDICATION VALUE: \$2,937,471**



## Client Services Value April 1, 2014 – June 30, 2014



**TOTAL SERVICES VALUE: \$455,644**

\*Services Value represents any services and supplies other than medications.

## REGIONAL SUMMARIES

### Northeast Region

**Janet Kegley**

**Lana Bailey**

**Angela McGuire**

**Elizabeth Smith**

**Shirley Prater**

**Judy Bailey**

**Regional Coordinator**

**CHW (Greenup)**

**CHW (Lawrence, Martin)**

**CHW (Carter)**

**CHW (Elliott, Morgan)**

**CHW (Johnson, Magoffin)**

This quarter our CHWs served 1,174 clients. A total of 19,933 services were provided to these clients, with service values of \$155,938; and \$1,113,672 of free medication provided in this service area.

The Northeast Region has been busy this quarter. They attended “Healthy Homes for Community Health Workers” and completed the Kentucky’s Health Benefit Exchange “kynector Training Program.” A representative from Anthem gave a short presentation of the services that they offered. The region hosted the Greenup County Interagency Meeting at the Greenup County Health Department in May. They attended the Morgan County Interagency Meeting and the Veteran’s Expo in Ashland.

Judy Bailey attended the Young Professionals of East Kentucky (YPEK) Forum: The State of Healthcare in Eastern KY (Pikeville). Judy attends Diabetes Education meetings each month with the Magoffin County Health Department. She assisted the Health Access Nurturing Development Services (HANDS) Program with their annual baby shower. Judy is a member of the Health Care for Homeless Advisory Committee.

Lana Bailey is a member of the Greenup County Diabetic Coalition and the Greenup County Diabetes Support Group. She attends these meetings each month. Lana participated in the Greenup County Relay for Life with the health department. Lana completed the final phase of the Improving Diabetes Outcomes (IDO) Phase II follow-up for the Diabetes Control Group.

Angela McGuire attends the monthly meetings with the Health Advisory Team (Health Advisory Team), and the Diabetes Support Group. She attends the Louisa Missions meetings and she attended the YPEK Forum: The State of Healthcare in Eastern KY (Pikeville). Angela presented the Homeplace program at the “Build Your Next Baby Fest” in Louisa along with other local agencies. She attended the yearly Lawrence County Health Expo and the Field and Farm Day with the extension office.

Shirley Prater completed the final phase of the IDO Phase II follow-up for the Diabetes Control Group. Shirley assisted the Elliott County extension office with “Fun in the Golden Years” and the, “Spring into Health Fair.” Shirley presented the Kentucky Homeplace program to the seniors citizens group of Elliott County.

Beth Smith completed her last IDO Phase II this quarter. Beth, along with Coordinator Janet Kegley, began a Diabetes Support Group for the Carter County clients and their families. The

first meeting was held in June along with the Carter County Extension office. The meeting was a success. Beth also attended a diabetes self-management education class at King Daughter's Medical Center.

### **Southeast Region**

**Ralph Fugate**  
**Beverly Blackburn**  
**Julia Keene**  
**Barbara Justice**  
**Pollyanna Shouse**  
**Kathy Hamilton**

**Regional Coordinator**  
**CHW (Knott)**  
**CHW (Breathitt)**  
**CHW (Pike)**  
**CHW (Wolfe, Powell)**  
**CHW (Floyd)**

The Southeast Region had another excellent quarter. Our CHW's provided 12,095 services to 950 clients, with a service value of \$97,675, and medication value of \$430,915.

Not only were the CHW's busy with their usual daily responsibilities, but they also attended community action and coalition meetings, held diabetic shoe events, served on food bank committees, and also served with the commodity distribution program. In addition, each CHW held a final follow-up IDO nurse visit in each of their individual counties.

### **Southern Region**

**Helen Collett**  
**Michelle Ledford**  
**Brenda Harris**  
**Samantha Bowman**  
**Kristy Smallwood**  
**Paul Frederick**

**Regional Coordinator**  
**CHW (Clay)**  
**CHW (Bell)**  
**CHW (Lee, Owsley)**  
**CHW (Harlan)**  
**CHW (Knox)**

This quarter our family health care advisors served 834 clients. A total of 13,182 services were provided to these clients, with service values of \$49,950, and \$286,818 worth of free medication provided in this service area.

This quarter all CHW's within the Southern Region completed trainings required to meet Kentucky Health Benefit Exchange training requirements to become kynectors. This training will hopefully allow us to serve clients better in the future.

The Southern Region completed the IDO II study this quarter and are excited to see the results of our effort.

Various interagency meetings were attended to learn about resources available to better serve our communities. Paul Frederick attended a Knox County Interagency meeting. Brenda Harris attended the Middlesboro Appalachian Regional Healthcare Lunch and Learn meeting, and the Bell County Extension office 100 Year Celebration Open House.

Michelle Ledford and Helen Collett attended a meeting with Dr. Roberto Cardarelli, to learn about a new research project involving lung cancer patients called Terminate Lung Cancer. Several Homeplace counties will be involved with this new project.

### **South Central Region**

**Beth Wells**  
**Janice Compton**  
**Sharon Cherry**  
**Tammy Glass**  
**Kim Collins**  
**Vacant**

**Regional Coordinator**  
**CHW (Monroe, Metcalfe)**  
**CHW (Edmonson, Hart)**  
**CHW (Barren, Warren)**  
**CHW (Allen, Simpson)**  
**CHW (Logan, Butler)**

The South Central Region staff has completed all mandatory continued education trainings required by the university including Health Insurance Portability Accountability Act (HIPAA) yearly updates. Susan Brown with the Barren River District Health Department provided staff with updated information regarding the Kentucky Colon Cancer Screening Program during the June staff meeting. Our staff members continue to be involved in several community coalitions and initiatives to improve our communities such as local Vision and Networking Neighbors meetings while also continually providing outreach with local physicians and agencies.

### **Western Region**

**Sherry Morris**  
**Donna Hooper**  
**Mary Beth Rohrer**  
**Tessa Vail**  
**Carla Gray**  
**Rhonda Wadsworth**

**Regional Coordinator**  
**CHW (Fulton, Hickman and Carlisle)**  
**CHW (Graves)**  
**CHW (Marshall, Livingston)**  
**CHW (Calloway)**  
**CHW (Lyon, Caldwell)**

This quarter, the Western Region provided 14,098 services valued at \$52,490 and \$804,943 of free medication to 727 clients.

With all of our IDO II visits completed, the Western Region is excited to see the results from the study. It was deeply received by all our clients that participated and they reported that they really learned a lot from the study.

In their individual areas, CHW's represented Kentucky Homeplace at meetings or involvement with the following agencies; Feed the Children, Marshall County Agency for Substance Abuse Policy Board (ASAP), Angels on Assignment, Good Samaritan Clinic, Livingston County Helping Hands Fund Raiser and Yard Sale, Good Samaritan Food Bank, various Interagency Meetings, Caldwell County Hospital Health Fair as well as Department Community Based Services (DCBS) offices.

The Western Region completed the UK web based employee mandatory trainings, enrolled as kynectors and added to the KYNECT website. The CHS have been active in our communities and re-introducing ourselves to healthcare providers and agencies to make them aware that Kentucky Homeplace is still here and available to serve clients with more than just medications.

## **Client Encounters**

Actual situations encountered by Community Health Workers

April 1, 2014 – June 30, 2014

I received a phone call from a former client that was in need of assistance. The client was in a very bad car accident last year that left him paralyzed from the waist down. At that time, I assisted him in using the insurance benefits he qualified for to get the services he needed. The insurance benefits had now expired; with the soaring costs of medical supplies, it hadn't lasted very long.

He was now in desperate need of a new wheelchair. The axel on his chair had broken and this is his only way of being mobile. I contacted the Kentucky Appalachian Rural Rehabilitation Network (KARRN) and told them what my client needed. They told me that they thought they would be able to help him. The KARRN office called to let me know that the client and a family member met with the physical therapy students and staff members at the storage facility in Paintsville to look at a new chair. They were able to fit him with a power wheelchair, a manual wheelchair and shower bars for his home.

I wasn't sure who was the most excited, the client or me! It is an awesome feeling to be able to help someone in need.

---

This quarter I had a client that had been making payments on a car, but could not pick it up until he received eyeglasses and got his driver's license renewed. He came to my office on one of the hottest days this year. He had ridden a bicycle up two mountains and across five miles of road to complete his New Eyes for the Needy application.

Several weeks later, I called him to pick up his eyeglass voucher. He just could not express how much the new eyeglasses meant to him and his family. He had to have new glasses to get his driver's license in order to get a job to support his family. He called me, about a month later, and told me he had been able to get the job. He was so grateful for the program.

---

Being a Community Health Worker, I meet people in all stages of their lives. This quarter a young woman walked in my office. She looked at me with tears in her eyes, and said "I don't know if you can help me, but they are going to take my children away from me if I don't find a place to live."

I asked her to take a seat and tell me what had happened. She explained to me that she has a lot of problems. She has some legal issues and she has to work 40 hours a week at community service until she can find a job. Unless a private company or individual personally knows that person, it is very hard to get a job when you have a record. Corporations do background checks and that usually ends the hiring process. She told me she and her three children were living in a camper and someone had reported her to social services about the living conditions.

I told her I would make some calls and see what I could find. I did find a place and a member of the young lady's family helped her with the first month's rent. She applied for the Kentucky Transitional Assistance Program (KTAP) and the county judge is letting her work at the courthouse. I called the local Catholic Church and they donated clothing, two beds for the kids

and some other household items. I now see this lady almost every day and she is doing well and has custody of her children.

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A male client was referred to my office from a physician. The client was employed and had applied for Kentucky Health Benefit Exchange Program (kynect), but could not afford the insurance premium. Neither he nor his wife had insurance coverage.

The couple shared with me the struggles they faced trying to pay for his medication. To save money, they disconnected their television, internet, landline telephone and had one cell phone. The husband was taking medication for high blood pressure and high cholesterol. Even though he was employed, he still qualified for the Prescription Assistance Program and was able to receive his medication at no cost.

While completing the initial interview with the client, I noticed he was wearing glasses. When I asked how long it had been since he had new glasses he replied he thought it was 2008. I told him about several eyeglass programs and we completed the application for Kentucky Vision Program. The client was approved the end of June for new eyeglasses.

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I have been working with clients that have Medicaid. Now that they have the Affordable Care Act in place, several clients have called and said the insurance companies will not approve some of their medications. Medicaid now doesn't want to pay for insulin and breathing medicines. I have worked on getting the medicines preauthorized, but they have still refused to cover several medications for clients that have always been able to get the medicines on their Medicaid Card.

I have talked with several clients that have received the new Medicaid Insurance. They have had different concerns with the insurance not paying for different things they need. Several said they only had hospital and doctor coverage. They stated it would not cover their medicines at all and some it will cover everything they need. The insurance is so individualized it has been difficult for them to determine what insurance company to choose for their medical needs.

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The quarterly story I am reporting is in reference to a young male client. This client is employed part-time, while trying to further his education. When he came into my office, he was wearing eyeglasses held together by tape. His only complaint was that they kept falling off his face while trying to work. During our initial interview, I became aware of his lack of medical coverage; he didn't even have a family doctor. I asked him if he had ever applied for the Medicaid or insurance through kynect.

I completed the paperwork and faxed it on to the agency that would process it for him and enable him to get an eye exam and new pair of eyeglasses. We also got started on filling out the application for kynect. My client was approved for Medicaid! I am now waiting for him to come back in to choose the insurance company he wants to use. Being able to help access these programs and serve this young man was a blessing.

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A 65-year-old female has been a client of Homeplace for the past two years. She is a diabetic and we have been getting her medications through the patient assistant programs of the drug companies. She was receiving Supplemental Security Income (SSI) without Medicaid or Medicare until last month when she turned 65. When it was time for her medications to be reordered, I called her and she said she now has Medicare Part A, B and Part D prescription plan.



She said money was tight now; her income is \$500+ a month. We starting talking and I asked questions regarding her coverage. An insurance salesperson sold her Part D, when she is eligible for a Qualified Medicare Beneficiary (QMB) program card. I went to work on her application and she received her QMB card. She received her whole amount of SSI back. I recently talked with her again; she is so appreciative and can't believe it doesn't cost her anything to have the insurance.

---

I had done a home visit with a woman in September. She had a brain tumor as a child and this had affected her sight. She needed new eyeglasses and she could not afford to purchase them. After seeing her, I completed an application for a pair of eyeglasses. Several months passed and we hadn't heard anything about her voucher so I started calling to see if there was a problem. There was no response from the organization that was supposed to grant vouchers, so I started faxing letters and copy of application. Six and half months passed and we still hadn't received the voucher.

I finally reached the organization who issues the voucher and they said that the voucher had been returned to them. For this one pair of glasses, I made one home visit, 17 phone calls and five faxes. Needless to say all parties were frustrated. After I received the voucher via fax, I called my client again to let her know I was mailing her voucher and her prescription for her eyeglasses. She thanked me and hung up. A few moments later she called back. I asked if something was wrong, she said no, that she just wanted to really thank me for helping her. No one else had given her the time of day to listen to her struggles. We were the only organization that had tried to do anything and she wanted me to know just how grateful she was. I asked her to call me when she finally got her eyeglasses so we would know for sure that she had been taken care of. I am grateful myself that we were able to help this young lady.

---

My client needed help in getting a new prosthetic leg. The client was a young man that had lost his lower leg in an accident. He was given his disability, but somehow things got messed up through the years. He came to me because he thought he didn't have any insurance. His prosthetic was broken and he was having a difficult time using it. Upon evaluations of his insurance, he had Medicare B which covers prosthetics. I called the company that had made his current prosthetic and scheduled him an appointment for a fitting. They said he had to have a referral from a primary care physician, so we scheduled him in to see his former primary care physician to get the referral.

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The local pharmacy gave a customer my contact information and told her that she might be able to get help in getting her medication at a lower cost or possibly free of charge. This lady lives in a senior citizens assisted living facility. She had moved there so she would not have to worry about rent and utilities along with other things that would be too expensive if she lived in a private home.

Her bill at the pharmacy was getting to a point where she was not able to pay for her medications, so the pharmacy referred her to Homeplace in hopes that we could assist her in lowering the cost of her medications.

She called me to find out about how our program worked and when she told me where she lived, I knew that transportation was a problem for people that lived in this facility. She told me that she would have a hard time getting into the office, so I asked her if she would like for me to do a home visit. She was so happy that I could do a home visit, because of her transportation problems and because she didn't have company very often.

I set up an appointment and told her everything she would need for me to be able to assist her with her medication. I called her the morning of our appointment and asked if we were still meeting that day. She replied, "Oh yes, and I have everything to get things started.

While going through the interviewing process, my client said that she had two different insurances. She wanted to know since she had two different insurances why did she have to pay so much for her medicine? I told her I was no insurance expert but that I would check things out for her when I returned to my office.

I contacted both insurance companies and found that she was correct: she did have two insurance policies. It ended up that she had to make a decision which insurance she wanted to keep. She called me a few days later and said that she had talked it over with her son and had decided which policy to drop. The one she had chosen covered all her medicines for free if she got the generic brand. She would only have to pay \$26 every three months for her two name brand prescriptions. This was a savings of over \$77 every three months! What would have cost my client \$454 now only cost her \$78 a year, saving her \$376.

She is so happy that her pharmacist cared enough to refer her to Kentucky Homeplace, but more thankful for Kentucky Homeplace that took the time to help her take care of this problem. My client said she didn't know how she could have done this without the help from Homeplace.

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A Human Resource worker from a local factory called me to see if I could help an employee get his child's medication. The insurance at the factory had a huge deductible. The father came in to enroll his preteen child who has gastrointestinal disease. The child's father said he was paying \$100 a week for his medication. I filled out an application and he was approved for a year of free medication.

---

A 36-year-old male was referred to me by a lawyer to assist him with getting insurance. He has no social security card or birth certificate; and he cannot sign up for KYNECT until he gets these documents. While waiting for him to receive these, I am helping him get three medications free of charge through the Patient Assistant Programs.

---

I scheduled a home visit with a client after receiving a referral from her physician for assistance with medication. The client was receiving disability due to arthritis, and she had a heart attack several months ago. She has Medicare Part D, but her co-pays for all medications are \$600 a month. Along with her other living expenses, she was having a hard time financially.

We went over her medications and I told her that we could try to get her medications through an assistance program and I completed an application for her. Her applications are still pending, because when the application was first submitted, she was not eligible not assistance. The

company has since reopened her application to review it again. Hopefully, she will be eligible soon for this benefit.

---

A client called the office and was very displeased with her insurance. She explained that it had paid for her medication(s) a few times, but is not going to anymore. She did not know what she was going to do until she spoke with someone that told her about Homeplace. In the conversation during her appointment, she had not realized that her insurance would pay for a health check and various other services entitled to her. With this new knowledge, she is better pleased with her insurance and happy she can continue to get her medications!

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I received a call from a new client who was prescribed a new medication for mini-strokes. Her physician referred her to my office because the medication was very expensive, and she had no way to purchase it. The medication was denied by her Medicare Part D and her Medicaid plan. Her physician had written letters stating that this was the best medication to help her.

I contacted the pharmacy company for this medication and explained the situation and submitted a new application along with the denial documentation. The pharmacy company approved the medication and shipped the first 90-day supply. My client was overwhelmed with joy, and was very appreciative for the help she received from Kentucky Homeplace.

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This month I got to experience my first "donut hole" client. He was a former military man and has traveled to many exotic places during his tenure aboard ship. He suffers from Chronic Obstructive Pulmonary Disease (COPD) and atrial fibrillation. The medicines are very expensive and put him into the donut hole faster than in previous years. He jokingly remarked that he'd be fine taking aspirin if it was going to cost him that much. You can tell this man enjoys life and rarely takes matters seriously. It was an enjoyable experience getting to know him.

I enrolled him with Homeplace and contacted Bristol Meyers Squibb and Merck through Kentucky Prescription Assistance Program (KPAP). We filled out his applications and he took them to have his physician to get them signed. Hopefully, he will get the assistance he needs and won't have to just take aspirin!

---

I had a 73-year-old client that contacted my office for assistance with hearing aids. They had tried to get hearing aids off and on for the past eight years. They could not afford them and did not have the extra money for even the exam. After the intake interview with the client, I contacted an audiologist company and found out that if the doctor examines the client and finds that hearing aids were medically necessary; that Medicare would pay for their hearing evaluation. I contacted the doctor's office for the client and had them write out a statement for the client's necessity for the hearing aids.

The client was examined and Hear Now approved them for two hearing aids. He paid \$250 (\$125 each) for hearing aids that would have cost him \$4,000 if he hadn't gotten the assistance. The client has been in dire need for years. The lack of hearing caused a lot of problems in communicating with their family and doing business in the community. They were very thankful for all the assistance that was given through Kentucky Homeplace.

---

This quarter I met and assisted many clients, but one client in particular stands out to me. She seemed to be one of those clients that could have been lost in the system had she not been referred to Kentucky Homeplace. My client had purchased a cancer policy many years ago, but during a time of financial hardship after the death of her spouse, she cancelled that policy. Months later, she found a mass on her neck and went to her family physician. She was then told that she had cancer.

My client receives \$678 widow pension a month, which makes her eligible for Medicaid through the Affordable Care Act. However, because she becomes eligible for Medicare in July, she would no longer receive Medicaid. My client was devastated when she realized that \$105 would be deducted from her small pension each month, along with her being responsible for the 20% that Medicare doesn't cover for hospitals and doctors' visits. Knowing that my client is getting ready to undergo cancer treatment, and potentially incurring extremely high medical bills, I knew that we had to figure out something.

I was aware of the Qualified Medicare Beneficiary (QMB) assistances that my client was eligible for, but because she owned a small piece of property there was a possibility that she would not receive any assistance through the state. She felt that she had been turn down by every agency that she had went to in order to find someone to help her and help her find answers. My client and I worked on this issue for many weeks. I worked with the Property Valuation Administrator to get a print out of land value, Kynect, and Social Security. I went to the Department of Community Based Services multiple times before finally getting my client approved for QMB coverage which will provide payment of Medicare Part A and Part B premiums, and payment of Medicare coinsurance and deductibles (hospital and physicians). I also assisted my client in receiving extra help through Social Security for help covering the cost of her Medicare Part D prescription plan.

---

This quarter I had a former client that I had helped a few years ago return to my office. She was not seeking services for herself (she had signed up for and received Medicaid thru KYNECT); but for her boyfriend that just moved from a neighboring state.

He had no income, no health care nor prescription coverage, so I asked him if he would be interested in signing up through KYNECT to see if he too would be eligible for Medicaid. We completed the enrollment process with him and found out that he was eligible for Medicaid and now be able to receive his medications and health care at no charge. This was my first actual KYNECT enrollment, so I was anxious to get in to the system and actually see how the enrollment process really worked.

---

In many cases, having insurance does not mean that our clients have affordable health care. This quarter I received a call from a doctor's office referring a client that has insurance. The client did have prescription coverage, but was unable to afford the \$200 a month co-pays. After looking over the medication list, I was able to reduce the co-pays by \$160. The client was so relieved; they could now afford to take their medication instead of having to do without part of it.

---

I was able to help a gentleman this quarter who is a newly diagnosed diabetic. He was referred to Kentucky Homeplace by his physician. This gentleman was at a loss, he knew nothing about diabetes, had no meter, no insulin and no way to get them immediately. After enrolling him as a

client, we started to work. A local clinic was able to give him a meter and enough testing supplies for a month, a foundation program agreed to pay for his insulin while we got the patient assistance program started. I reviewed the Homeplace diabetic material with him; giving him copies to take home as reference, as well as helping him to get an appointment with a dietician at the Health Department.