UNIVERSITY OF KENTUCKY

Kentucky Homeplace

January 1, 2014 – March 31, 2014

Quarterly Report

5K Race Benefits Kentucky Homeplace



Pictured are Beth Bowling, Mace Baker, Angela McGuire, Fran Feltner, Christina and Jamie Studts and their daughters.

Kentucky Homeplace http://www.kyruralhealth.org/homeplace

TABLE OF CONTENTS

Table of Contents02
Letter from UKCERH Director03
January – March 2014, Poverty Level and Age Distribution04
January – March 2014, Total Clients Served By Region05
January – March 2014, Client Services06
January – March 2014, Top 5 Client Problems By Condition07
January – March 2014, Client Medications Value08
January – March 2014, Client Services Value
Regional Summaries10
Client Encounters

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 smoking or quit any type of tobacco use, education and referrals for cessation classes, support groups and aids are given.

5K Race Benefits Kentucky Homeplace

Angela McGuire, Mace Baker, Beth Bowling and Fran Feltner were among more than 200 runners and walkers who met Sunday, February 23 at University of Kentucky's Coldstream Park next to the Embassy Suites in Lexington to participate in the annual Heart, Sole and Glove 5K Run. The event is a family-friendly race that is open to the community and hosted every February by UK Health & Wellness. A portion of race revenue is donated to a different charity each year. This year it was the Kentucky Homeplace Indigent Fund.

"We are honored that Kentucky Homeplace was chosen as this year's beneficiary. The donation from the Heart, Sole and Glove Run will allow us to provide emergency assistance for basic life sustaining needs such as medicine, clothing, shelter and other essential resources when all other avenues of assistance have been exhausted," said Baker, who is the director of Kentucky Homeplace.

"We also want to thank all of our employees who supported us. Many people were not able to make the trip to participate in person but they were very generous in donating to the event," said Baker.

Quarterly Summary

Here's a summary of services for this quarter, January 1, 2014 – March 31, 2014: the number of unduplicated clients served was 4,222; the number of services was 66,432; the amount of medications accessed was \$4,437,686; other services values (not medications) accessed totaled \$409,101 for a combined total of \$4,846,787. The top client medical conditions included hypertension, high cholesterol, diabetes, mental health, and digestive systems.

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

Sincerely,

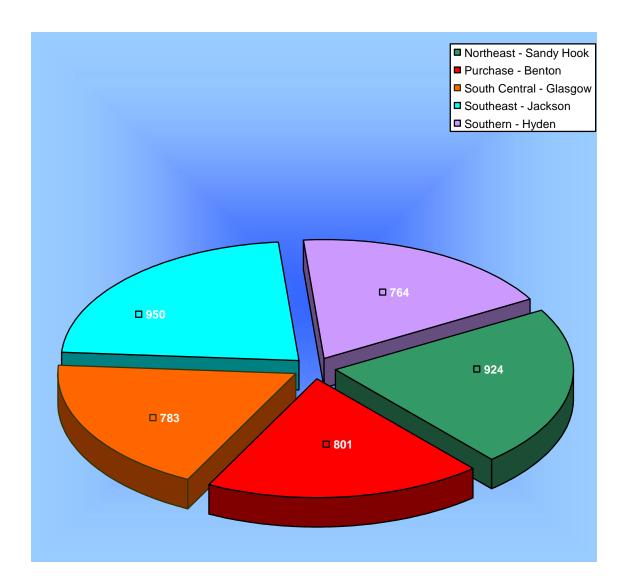
Francis & Filtner

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

AGE DISTRIBUTION OF HOMEPLACE CLIENTS				
January 1, 2014 – March 31, 2014				
CATEGORY	FEMALE	MALE		
AGES 0 TO 4	2	1		
AGES 5 TO 12	6	6		
AGES 13 TO 14	2	3		
AGES 15 TO 19	5	4		
AGES 20 TO 24	42	41		
AGES 25 TO 44	377	250		
AGES 45 TO 64	1,474	958		
AGES 65 TO 74	461	294		
AGES 75 TO 84	143	99		
AGE 85 AND OVER	36	18		
TOTALS	2,549	1,674		
Median Age:	56.4	56.1		
Source: Data extracted from the Kentucky Homeplace database. Total Unduplicated Clients 4,222				

POVERTY LEVELS OF HOMEPLACE CLIENTS								
January 1, 2014 – March 31, 2014								
	100%	101- 133%	134- 150%	151- 200%	201- 250%	251- 300%	300+%	Total
CLIENTS	2,476	718	324	517	127	47	13	4,222
TOTALS	58.65%	17.01%	7.67%	12.25%	3.01%	1.11%	0.31%	100.00%
Source: Data extracted from the Kentucky Homeplace database								

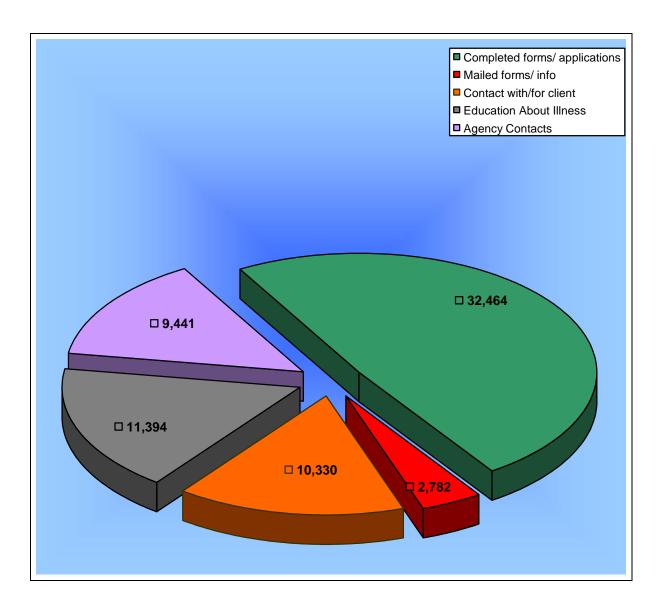
Total Clients Served By Region January 1, 2014 – March 31, 2014



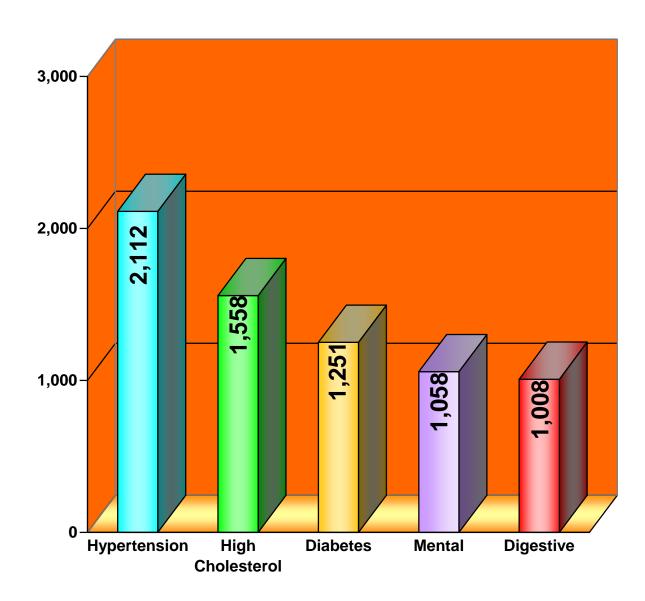
TOTAL UNDUPLICATED CLIENTS FOR QUARTER: 4,222*

*This total represents <u>unduplicated</u> 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 January 1, 2014 – March 31, 2014

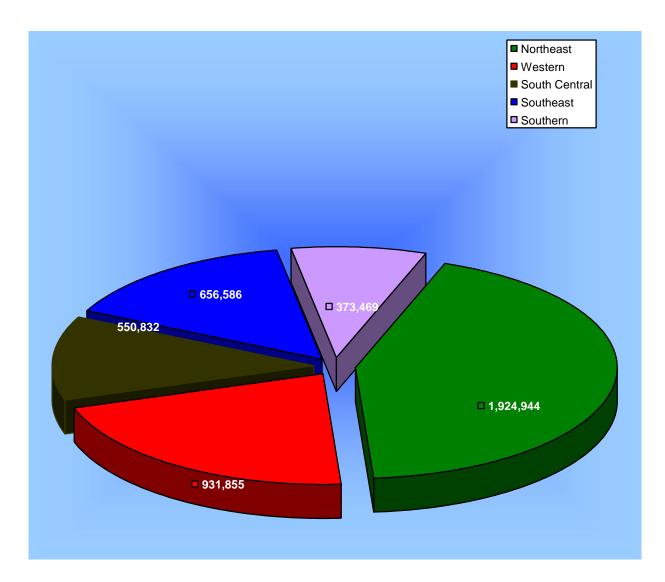


TOTAL SERVICES FOR THE QUARTER: 66,411



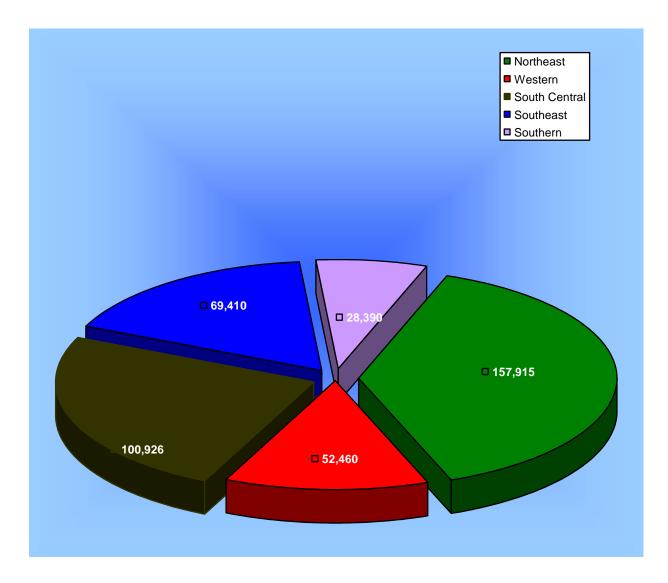
Top Five Client Problems By Condition January 1, 2014 – March 31, 2014

Client Medications Value January 1, 2014 – March 31, 2014



TOTAL MEDICATION VALUE: \$4,437,686

Client Services Value January 1, 2014 – March 31, 2014



TOTAL SERVICES VALUE: \$409,101 *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 924 clients. A total of 20,163 services were provided to these clients, with service values of \$157,915; and \$1,924,944 of free medication provided in this service area.

Judy Bailey, Angela McGuire and Beth Smith attended the Collaborative Colon Cancer Awareness Events, along with other agencies in the Northeast Region. Janet Kegley, Coordinator, and Community Health Worker, Shirley Prater, attended the Remote Area Medical (RAM) AfterCare at Morehead State University. The region completed the Kentucky Health Benefit Exchange "Kynector" Training Program. They also attended the UK Center of Rural Health's staff meeting via I-TV at the Magoffin County Health Department.

Judy Bailey attended a Cooper Clayton class at the Magoffin County Health Department. She had several clients that enrolled for the class and was there to help get them started. Judy is a member of the Magoffin County Diabetes Support Group.

Lana Bailey attended the monthly Greenup County interagency meetings. Lana is a member of the Greenup County Diabetic Coalition and the Greenup County Diabetic Support Group. She attends both coalitions' meetings.

Angela McGuire attended the interagency meetings in both Lawrence and Martin counties. Angela held a Diabetic Shoe Clinic Community Day and then did a follow-up meeting for distributing the shoes. Angela is a member of the Health Action Team (HAT). She is also a member of the Lawrence County Diabetic Support Group. Angela participated in the UK Heart, Glove and Soul 5K Walk/Run in Lexington and a meeting with WellPoint. Angela attended a Red Cross Training/Meeting with the UK Extension office to become a Red Cross Volunteer.

Shirley Prater is a member of the Diabetes Coalition. Shirley presented Kentucky Homeplace to the Elliott County Senior Citizens. Beth Smith is a member of the Carter County Wellness Coalition.

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 great quarter. Our CHW's assisted 950 clients, provided 13,394 services with a service value of \$69,410, and accessed medications valued at \$656,586.

Our CHW's were busy not only with their usual responsibilities but they also worked on getting their certification for the new Kentucky Health Benefit Exchange (KYNECT) healthcare system. With this certification, CHW's will soon be able to actually sign clients up for healthcare benefits. In addition, to this new training and daily client workload, our CHW's attended their local inter-agency resource meetings, represented Kentucky Homeplace at local Diabetic and Cancer coalition meetings, commodity food handouts, as well as attended the monthly SE region staff meetings held at the UKCERH building in Hazard.

Southern Region	
Helen Collett	Regional Coordinator
Michelle Ledford	CHW (Clay)
Brenda Harris	CHW (Bell)
Samantha Bowman	CHW (Lee, Owsley)
Kristy Smallwood	CHW (Harlan)
Paul Frederick	CHW (Knox)

This quarter our family health care advisors served 764 clients. A total of 6,409 services were provided to these clients, with service values of \$28,390, and \$373,469 worth of free medication provided in this service area.

The Southern Region welcomed Samantha Bowman to our group this quarter. Samantha will be providing services to clients in Lee and Owsley counties. Samantha was selected for this position after the retirement of Linda Thacker.

Various interagency meetings were attended to learn about resources available to better serve our communities. All staff attended the Center of Excellence in Rural Health regional staff meeting in Hazard.

Paul Frederick attended a Knox County Healthcare coalition meeting and the Knox County Interagency meeting at Union College. Paul also met with two area Kynectors to learn about KYNECT, the Kentucky Health Benefit Exchange insurance program.

Brenda Harris attended the Middlesboro Appalachian Regional Healthcare lunch for the Heart Health meeting. Brenda also attended the Lighthouse Mission community meeting.

South Central Region	
Beth Wells	Regional Coordinator
Janice Compton	CHW (Monroe, Metcalfe)
Sharon Cherry	CHW (Edmonson, Hart)
Lisa Lack	CHW (Logan, Butler)
Tammy Glass	CHW (Barren, Warren)
Kim Collins	CHW (Allen, Simpson)

This quarter our CHWs served 783 clients. A total of 10,901 services were provided to these clients, with service values of \$100,926; and \$550,832 of free medication was provided in this service area.

The South Central Region attended a training session provided by the UK Center of Excellence in Rural Health regarding the KYNECT-Kentucky Health Care Connection (affordable health insurance enrollment). We also received training regarding the University's new online employee evaluation system. Janice Compton, Beth Wells and Lisa Lack participated in health fairs in Monroe and Logan counties. 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	Regional Coordinator
Donna Hooper	CHW (Fulton, Hickman and Carlisle)
Mary Beth Rohrer	CHW (Graves)
Tessa Vail	CHW (Marshall, Livingston)
Carla Gray	CHW (Calloway)
Rhonda Wadsworth	CHW (Lyon, Caldwell)

During this quarter the Western Region provided 15,544 services with service values of \$52,460; and medication values of \$931,855 to 801 clients.

With all of our I-Do 2 visits completed, the Western Region is excited to see the results from the study. It was greatly appreciated by all our clients that participated and they reported that they really learned a lot for the study.

In their individual areas, the Western Region's CHWs represented Kentucky Homeplace at meetings with the following agencies: Family Achievement Child Excellence Center (FACE), inter-agency meetings, Family Resource Centers meetings, Baptist Health, Angels on Assignment, Diabetic Support Groups, PrimeCare, Feed the Children meetings, Senior Citizen Health Fairs, many area food bank distributions, clothing giveaways, and the Marshall County Agency for Substance Abuse Policy Board (ASAP).

As a Region the CHW's took part in the KYNECT training and test; they are eagerly waiting to start the enrollment process with clients. The region also attended the UK Center for Excellence in Rural Health Staff Meeting via I-TV.

Client Encounters

Actual situations encountered by Community Health Workers January 1, 2014 – March 31, 2014

During the past quarter I have worked with clients to determine if they have the Kynect insurance. I found out that many of them are having to pay for the insurance and can't afford the premiums; and the ones that received Medicaid through the Kynect Insurance are having problems getting brand name medicines.

I have worked with the clients to explain brand name medicines usually have to be preauthorized by the doctor with the insurance company. Some of the doctors will change the medicines to keep from having to do the pre-authorization. Several of the clients said that Kynect only covers the doctor visit and will not cover their medicines.

It has been a difficult couple of months finding out that clients have been so confused by the process. There are too many different ways the insurance companies have to process the claims and the doctors, clients and family can't get the proper process for them. I have still been working with clients to get their medicines, glasses, hearing aids, and equipment. The Patient Assistance Programs are working with our clients but are making them get denial letters from Medicaid and Extra Help with Medicare.

A client called my office needing help getting new glasses, but had no transportation so I scheduled a home visit. During the enrollment process, my client shared that he has had an eye nerve problem since childhood, and he had recently been referred to an ophthalmologist at the University of Kentucky, where he had an eye exam and a prescription written for eyeglasses.

I then learned that my client had been laid off work because of this vision problem, and his bills were piling up. An application was filled out and processed for an eyeglass voucher with New Eyes for the Needy. This client now has new eyeglasses and should be able to return to work soon.

I have a client that I have been working with to get her breathing medicines for her Chronic Obstructive Pulmonary Disease (COPD). She has recently received insurance, but still needs help acquiring some of her medicines for her COPD. I was able to get her medicine through the patient assistance programs from the pharmaceutical companies. Now she does not have to worry about the extra cost of her medicines. Many of my clients have received insurance, but still need help with medicine.

For 15 years I have written stories about clients I have been able to assist with medications, because they had no insurance coverage. This quarter it has been different. Clients that have never had insurance are now covered by the Affordable Care Act. I had a person come to my office that has insurance, but his co-pay on his medications was extremely high. I contacted the companies and, because of his income, he qualified for assistance. He will get free medications despite the fact that he works and has insurance. I was able to saves him \$1700 a month, which is more than his income.

I had a female diabetic client who had been referred to Homeplace from the local Eye Care Center. She came in for an office appointment and I completed the Initial Assessment. I learned that she hadn't had her glasses changed in over ten years. I helped her fill out an application for Kentucky Vision and she was able to receive glasses. It made me feel so good knowing that I was able to make her life better with the new glasses.

I had a client call and request assistance with their medications. I inquired if they had applied for any assistance with the new KYNECT program. The client said they had tried to apply online, but had not gotten enrolled. I reviewed their eligibility and found they were supposed to be receiving Medicaid.

I had them come to the office with their current income documentation. I called a local KYNECTOR and they were able to run the client's information in the KYNECT system and found that they are enrolled in a Medicaid program and had been since March 01, 2014; and their medical coverage had backed up till January 1, 2014 to cover whatever medical charges they had pending.

The client was unaware that they had coverage and was out of insulin and needed medications immediately. I had the client's pharmacy to contact their Medicaid provider for the member's identification number to process their prescriptions. The client said they would not have known about having insurance without my help.

This quarter I had a client referred to me by a physician. The client suffered a heart attack and was without insurance. Now, he needed help with paying for his heart medications. I researched and found out that while he qualified for help with most of his medication, through the Prescription Assistance Programs, he still had medications that he could not afford. I told him about KNECT and informed him he qualified for the program and referred him to the local KYNECTOR. He later called to thank me for the help and says he now has insurance to cover his medication and doctor visits both.

This quarter I had a man come in that needed help with his medication. Neither he, nor his wife had insurance. I told him about KYNECT and helped them navigate through the individual KYNECT website, since they did not have computer access. They both qualified for Medicaid and their doctor visits, medications and many other medical needs will now be free to them.

The frigid temperatures this winter have put a tremendous financial strain on the people in our communities. The search for assistance with this need for our clients has been endless. I have worked with the heating assistance program, churches and even local politicians to help find replacement heat sources after some of my client's electrical service was cut off.

One of my clients, who is now in remission from colon cancer, called during the coldest time and had not had any heat in two days. Knowing that the temperature was to reach the -5 degrees, it was my mission to find him a kerosene heater. I was able to get him a donated heater to use until his electricity was turned back on and also enough kerosene to last him a week.

A lady called my office inquiring about hearing aids for her elderly brother. He had lost one hearing aid and the other had broken. I told her what information I needed from her brother to begin the process for hearing aids. We completed an application for hearing aids, and made his appointment for the audiologist. One day my client came in the office by himself and asked if I remembered him; I told him yes, he gave me an enormous smile and said "Thank you so much for helping me with my hearing aids. I can hear everything you're saying now and don't need my sister to hear and talk for me anymore!"

My clients are a couple who are struggling to make ends meet. The wife's medication is not covered by her workmen's compensation insurance, and she does not qualify for Medicaid. She has migraine headaches, Gastroesophageal Reflux Disease (GERD), hypertension, high cholesterol, asthma, and other respiratory problems and depression. Some of her medications are on the \$4.00 plan at Wal-Mart, which her local pharmacy is matching. I completed applications for several of her other medications and they have been submitted to the pharmaceutical companies for their approval.

I have a client that I have been working with that doesn't read well. He has several different health issues making him unable to work and had been laid off from his job. I have been working with him, helping him complete his paperwork for his retirement and also his paperwork for Supplemental Security Income (SSI).

I've been working with a client helping get her medicines for the past couple years. She worked five days a week at a small store and had no insurance. When she came in this past summer, she said she was getting married and was going to try and go back to school. We talked and she told me she had carpal tunnel in both hands, plus neck and back injury from heavy lifting at the store.

I suggested she call a state program that assists individuals with this problem for people that had no insurance. She didn't want to call but I encouraged her to contact them. I followed up with her again in December and she still hadn't called the agency. When she finally contacted them, they told her that they would pay for her classes, and also an audio wizard mouse that will do the typing for her. In addition, they are paying her co-pays for the specialists and helping her in many ways. She is now very grateful she made the call. She said she had no idea Kentucky Homeplace could refer her to this kind of help. She has already received over \$2,500 in benefits and is so very thankful for the assistance.

Over the holiday season, a local church was offering extra food baskets for some of my clients. I had thought long and hard about this year's recipients. One client kept coming to mind; he was a disabled middle-aged man that was married and had two young children. I have done several home visits with him in the past and had seen that there was true need in the home. There wasn't enough furniture in the home for everyone to sit down together for a meal.

I phoned my client and asked if it would be okay to bring a food basket to him. He said that would be great and thanked me for thinking of him for the basket. I took the food basket to the client's home and as we were unloading the car, the client stops mid-way and hesitates. I asked if he was okay. He said "Yes, I just need to tell you something." He started to tear up and I stopped him and said "Don't do this. The basket is from a local church and I was just glad that we were able to get it to you." He said "No it's not that. After you called me this morning, my wife asked who it was and I told her you called and what you were doing." She looked at me and started bawling, too. He asked her what was wrong and she replied that she had been praying all day and the day before, asking God that her family could just have a good meal at Christmas.

My heart just melted. I couldn't get out of that driveway fast enough before the tears came flowing down. Now that, my friends, is as good as it gets. To help someone in need, who has a true need, knowing there is nothing they can do back to repay you other than their thanks and love. Kentucky Homeplace does such a variety of services for their clients and so much goes unmentioned. I just had to share this story while it was on my heart.

My story this quarter is about an almost 85-year-old lady. A few months ago I had helped her get hearing aids. She had driven herself to the doctor's office to get her hearing evaluation. Later, I received a phone call from her saying she had received a bill for the hearing evaluation that had been sent to her previous address. The hospital had turned it over to collections for payment. My client had two types of insurances at the time of service, so she shouldn't have been charged anything. I advised her to call the finance department. When she called, they told her to call the collection agency. When she called the collection agency, they told her all they could do was offer a reduced amount if she was willing to pay that day to close her account.

She then called me back and asked if I would look into it for her. I told her I would and then I called the finance department and they pulled up her account. The gentleman in finance said, "This shouldn't have been sent anywhere, she has two insurances." To make a long story short, he put her account in good standing and billed her second insurance. I called my client back to inform her and she was very grateful. She said, "I knew you could get something done honey, thank you so much." And, by the way, she loves her hearing aids.

A mother and her son came into my office for assistance. The son was turning 18 and getting ready to lose his Medicaid. His parents could not afford to pay for his medicine, since they were on a fixed income. His mother was in tears because she said her son really needed to be on his medication and a month's supply was \$2,100.

I told them what documentation they needed to bring in so that we could apply for his medications through the patient assistance programs. They came back later that afternoon and had everything we needed to get him enrolled. He had a prescription for one of his medications and I was able to enroll him that day and gave him a coupon to take to his pharmacy to pick up a 30-day supply. Since his appointment with me, his mother called to let me know that he had gotten approved for a medical card the next month. I am thankful that I was able to assist him at a time when he would have been without his medications.