UNIVERSITY OF KENTUCKY

Kentucký Homeplace

January 1 – March 31, 2019 Quarterly Report



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

Funding for the program is a joint collaboration of the Kentucky Cabinet for Health and Family Services and the University of Kentucky and the Center of Excellence in Rural Health.

Photograph taken in Perry County Kentucky courtesy of William Mace Baker

TABLE OF CONTENTS

Letter from Kentucky Homeplace Director	03
Program Activities	04
Social Determinants of Health/Barriers to Care	05
Activity Summary	06
Visit Summary	07
Hospital-ER Summary	08
Age-Gender Summary	09
BMI Summary	10
Insurance Summary	11
Poverty Level Summary	12
Education Level Summary	13
Kentucky Homeplace Staff Photos	14-15
Kentucky Homeplace Regional Map	16
Client Encounters	17
Kentucky Homeplace Contact Info	27



Kentucky Homeplace

My Fellow Kentuckians:

This spring Kentucky Homeplace CHWs have been working with clients on a wide variety of issues assisting them in overcoming numerous barriers. Generally, during the spring months, we see an increase in the number of clients visiting Kentucky Homeplace offices and this is also the case this year when comparing to the previous quarter. All Kentucky Homeplace CHWs attended the 2019 KY HEALTH Refresher Training for Benefind. Work is underway scheduling and recruiting clients into either Chronic Disease Self-Management workshops (CDSMP) or Diabetes Self-Management workshops (DSMP) and Walk with Ease sessions depending upon the needs in their communities. The CHWs are truly doing amazing work in their communities. Please take time to review the client encounters at the end of this report in order to see examples of the true meaning of what a CHW can do to improve the lives of their clients and communities.

Quarterly Summary

For the period January 1, 2019 – March 31, 2019, the CHWs provided services for 1,892 clients. CHWs logged 3,964 hours on care coordination activities with a service value of \$75,316, amount of medication accessed \$2,208,463 and other service values (not medications) accessed were \$992,745 for a combined total of \$3,276,524.

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 Kentucky Homeplace tab, Quarterly Reports and then click on January-March. If you wish to have a printed copy, please call 1-855-859-2374 or email me at mace.baker@uky.edu.

Sincerely,

William Mace Baker, RN

William Mare Baker

Director, Kentucky Homeplace Program



Program Activities

January 1 – March 31, 2019

Community Engagement Activities

- Carole Frazier and Kentucky Homeplace Program (KHP) Director Mace Baker presented KHP at a Kentucky River Area Development District meeting during March.
- Also across the service area, the CHWs attended local interagency meetings, diabetes
 coalition meetings, Unite meetings, provided diabetes shoe clinics and attended the
 Ladies in Red event to help promote heart disease prevention in women. The CHWs
 attended several health fair events in their communities.

Professional Development/CHW training

- All KHP CHWs attended the 2019 KY HEALTH Refresher Training for Benefind Assisters in either Somerset or Harlan, Kentucky.
- Kentucky Homeplace CHW training was conducted in January at the UKCERH with five attendees.
- All CHWs attended a KYACHW meeting in March in Montgomery County and received Trauma Informed Care training.

Webinars (CHW attended)

• The CHWs participated in the "Colorectal Cancer Screening 101: What Community Health Workers Need to Know" webinar and the "Using Limited Resident Prep for Bed Bug Treatment" webinar.

Other News

- Katie Dampier accepted the CHW position in Laurel and Jackson Counties.
- One vacancy exists in Greenup/Boyd Counties and interviews are in process.
- A new office space was secured in Boyd County in the Hillcrest Bruce Hill Mission.

Save the Date:

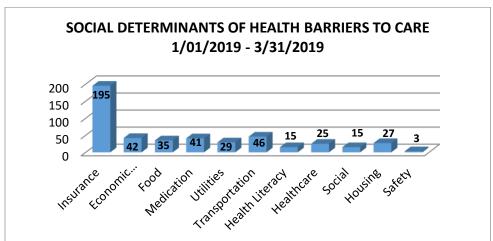
May 16th Kentucky Homeplace 25 Year Anniversary University of Kentucky Center of Excellence in Rural Health 750 Morton Blvd, Hazard, KY

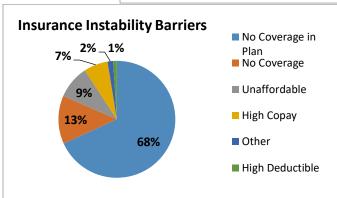


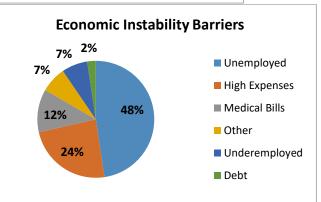


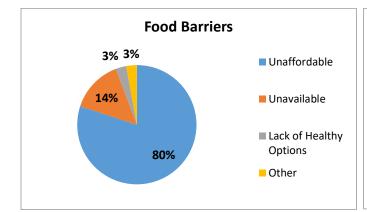


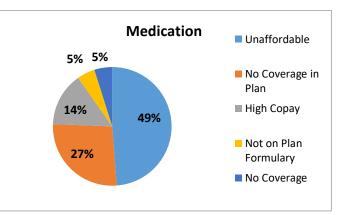


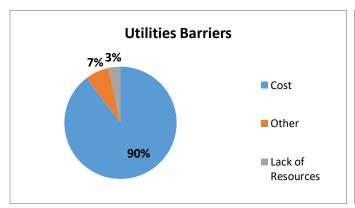


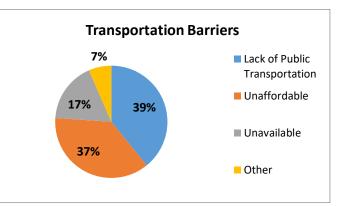










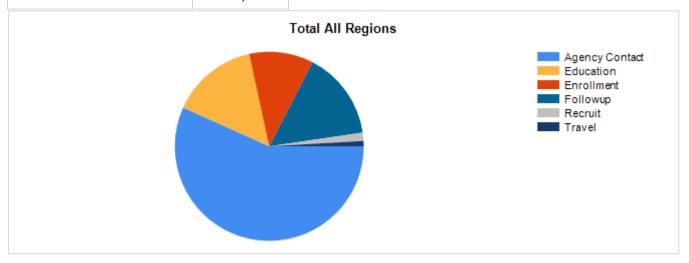




Activity Summary

(Clients visited: 1/01/2019 – 3/31/2019)

Activity	CHW Hours
Agency Contact	2,248.60
Education	589.68
Enrollment	435.25
Followup	598.40
Recruit	56.33
Travel	35.75
G	rand Total: 3,964.02

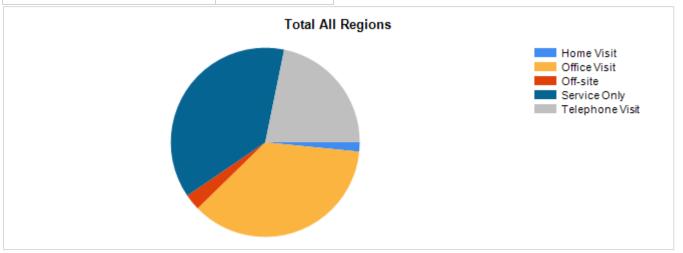


Total service value for 3,964 hours equals \$75,316.



Visit Summary

Visit Type	Client Visits
Home Visit	83
Office Visit	1,911
Off-site	146
Service Only	1,996
Telephone Visit	1,152
G	Grand Total: 5,288

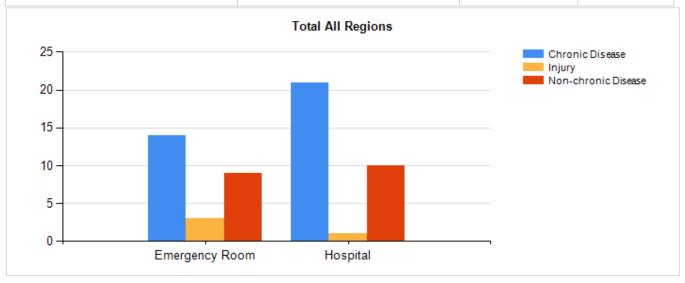


^{*} Service only involves any actions taken on behalf of the client while the client is not present.



Hospital-ER Summary

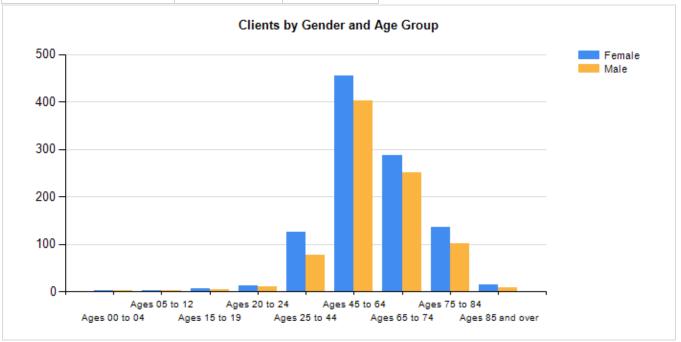
Episode Type	Reason	Episodes	Days Stay
Emergency Room	Chronic Disease	14	0
Hospital	Chronic Disease	21	151
Emergency Room	Injury	3	0
Hospital	Injury	1	0
Emergency Room	Non-chronic Disease	9	0
Hospital	Non-chronic Disease	10	28
Grand Total:		58	179





Age Gender Summary

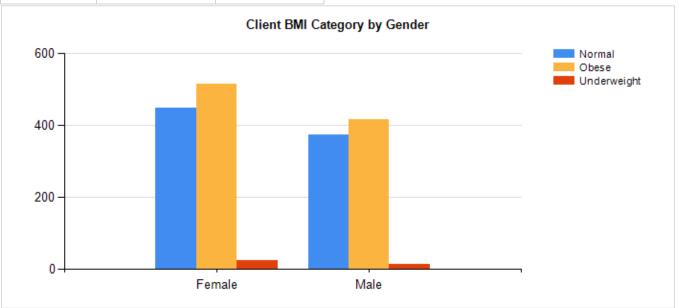
Age Group	Female	Male
Ages 00 to 04	1	1
Ages 05 to 12	1	2
Ages 15 to 19	6	4
Ages 20 to 24	12	11
Ages 25 to 44	125	76
Ages 45 to 64	455	402
Ages 65 to 74	286	251
Ages 75 to 84	136	101
Ages 85 and over	14	8





BMI Category Summary

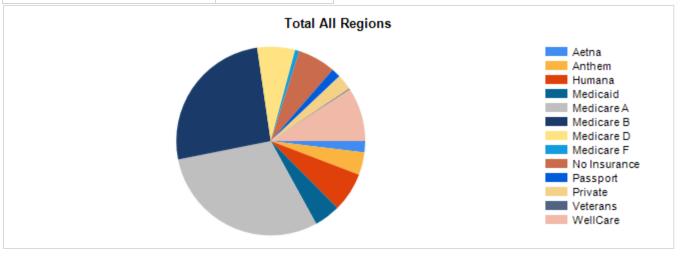
Gender	Bmi Category	Clients
Female	Normal	450
	Obese	515
	Underweight	24
	Total:	989
Male	Normal	374
	Obese	417
	Underweight	13
	Total:	804
	Grand Total:	1,793





Insurance Summary

Insurance Type	Clients
Medicare A	986
Medicare B	853
WellCare	304
Humana	222
Medicare D	214
No Insurance	214
Medicaid	148
Anthem	128
Private	88
Aetna	64
Passport	52
Medicare F	24
Veterans	6





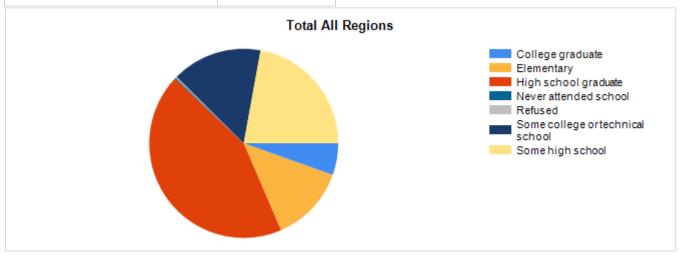
Poverty Level Summary

Clients by Poverty Level Clients by Poverty Level 100% 101-133% 151-200% 251-300% 300Plus%
100% 101-133% 134-150% 151-200% 201-250% 251-300%
251-300%



Education Level Summary

Education Level	Clients
Never attended school	4
Elementary	248
Some high school	419
High school graduate	822
Some college or technical school	292
College graduate	103
Refused	4
Grand Total:	1,892





Kentucky Homeplace Staff

at the

Perry County National Guard Armory



Left to right: Mary Bowling, Carole Fraizer, Kim N. Smith, Samantha Bowman, Barb Justice, Darla Shepherd, Kathy Slusher, Shirley Prater, Elizabeth Smith, Kayla Gilliam, Mace Baker, Janet Kegley, Kathy Hamilton, Kim R. Smith, Courtney Charles, Judy Bailey, Angela McGuire



Free Eye care clinic "All eyes on Appalachia" hosted by UK GO (Global Ophthalmology) and Huffman & Huffman in London, Kentucky in March 2019. Pictured are two Huffman and Huffman staff and Kathy Slusher and Mary Bowling.

Kentucky Homeplace CHW Training. Pictured left to right: Mace Baker, Director of Kentucky Homeplace; Dana Hays, UKCERH; Tara Sturgill, Laurel County Health Department; Katie Dampier, Laurel and Jackson County KHP CHW; Courtney Charles, Estill County CHW; and Janet Kegley, Rural Project Manager.





Kentucky Homeplace



Central Office Mace Baker, Director 750 Morton Blvd., Hazard, KY 41701 855-859-2374





Client Encounters

Actual Situations Encountered by Community Health Workers

January 1, 2019 - March 31, 2019

This quarter has come with many rewards while serving the clients in my area but one client in particular stands out the most. This client came into the office seeking help with medication assistance. Upon completing the interview, I noticed that the client had no prescription coverage and was having her Medicare premium deducted from her very small benefits check each and every month.

This client was struggling on a daily basis to take care of her medical needs because of her inability to cover the high cost of medications, labs, and doctor visits. She was already approved for other benefits from the state such as snap but just thought she didn't qualify for other services because she was never told about them. It was costing her more than what she received each month from Social Security benefits and she was borrowing money from her family to cover the cost of her monthly medications. This hardship was affecting her overall health and the ability to cover her basic daily needs.

I began assisting the client by applying her for extra help with the cost of her medications. If approved the client would be able to have medication coverage with no premiums, deductibles and would be able to pick her medications up at the pharmacy for a very small copay. After completing this process, I moved on to assist the client with getting her Medicare B premiums paid for each month and having the remainder 20% that Medicare does not cover picked up by Medicaid.

This client was approved for each thing that we applied her for and she had actually qualified for these very services for over 4 years but was never told about them. She was so releaved to be approved for Medicare Savings and to have extra help covering the cost of her medications that she just cried and said that she wished that she would have known about Kentucky Homeplace years ago so that she wouldn't have struggle as long as she did.

This story started last summer; I got a call from a former KHP client. The ceiling in her mobile home fell, literally fell. It was made of sawdust and glue and over the years with moisture from gas heat and several leaks it just collapsed, leaving of course a mess, and 2X2's and a metal roof exposed to the living room, kitchen and a bedroom. What a mess, I told the client to dust off and pack up everything she wanted to keep and then let me know I would get volunteers to come help her move. In the meantime, I found the elderly couple an apartment near town. She was thrilled, it was rent she could afford and it would be a great place for them, close to town, family, doctors and grocery store. Problem solved. The elderly gentleman came to town to look at the apartment, and after he was told he could bring his little dog he seemed to be okay with the move. Nope. Moving day came and he told his wife he wasn't moving, he couldn't leave his childhood home. I contacted a Christian work group that was working in the area and they said they would go see if there was anything they could do, they were afraid this job required more skill than they had. Indeed the man in charge went to see the home and called me. He said that

the house was in way worse shape than he thought and there was no way they would be able to fix all that needed to be fixed just to make it safe. The elderly couple stayed there in the home, family helped to patch up the ceiling the best they could. All winter they stayed there until the electric breaker box melted, literally melted. A family member called me and said that this time they had no choice they had to move. Again I was able to find an apartment, on the ground floor with access to the yard from the apartment, the little dog was welcome and the wife loved the new apartment, they had never had anything as nice as this, moving day came, you got it, he said Nope, not moving. They ran an electric extension cord from the barn to the house so they would have lights. Today the same family member came in to the office, all the belongings are loaded in a trailer and have no other choice but to move. I made one call, the apartment was still available, some minor paperwork needed to be completed and they could move in. Praying for good weather today, the couple are moving into their new home.

Neighbors have already been to visit, even before they got unloaded. The elderly gentleman is going to the local flea market with his new neighbor tomorrow. Seems like things are going to be ok!

♣ During my 15 years with Kentucky Homeplace I have received many phone calls. Phone calls for medicines, calls for glasses, dentures, cloths and food. The call I received last week was an encouraging call, one of hope, gratitude and encouragement.

Diabetes or (my sugar problem) as this very nice older man called it was his problem. After suffering from heart disease and developing diabetes his wife did everything she could to learn more to help her husband. But even with all the carb counting and exercise his A1C just wouldn't go down. I found out that he was not taking the medications he really needed to take due to the very high cost. The medications he needed where not covered by his Medicare Part D plan.

I was able to help access these medications from PAP for my client.

Three months latter this client calls to let me know his new A1C numbers, he had gone from an A1C of 14 to an A1C of 7 and his Triglyceride numbers where back to a normal level. My client said he just knew that by taking the right medicines he would be able to get his A1C even lower by his next visit. He said that by being able to get the medicines and education needed for his diabetes, he would be able to enjoy living many more years.

A husband and wife came in my office needing help, I told them I would make them an appointment as I was with a client and busy the rest of the day. When I asked him what he needed he said all I need is a cane mine is broken. I told him I had a cane in my storage room and I could give that to him and he could come back later. So before I did that I asked him is there is anything else he needed before the appointment he said I'm a veteran and we are homeless. I immediately asked if he could wait until I was done or come back and he said he could come back. I told him to be back at 1:00 pm. That gave me enough time to have take care of the current client and get things in order for him.



He and his wife came back on time and I enrolled the husband in the program due to the fact he is the veteran so maybe that would get them of the street. I made a few calls and no luck then I called VOA and told her he did not have his DD214 on him but he does have a letter from the VA stating that if he needed anything to use this letter. She said send him over and she would do what she could. By working with several different agencies, I was able to keep the veteran and his wife in a hotel for one night and off the street for the weekend due to bad weather forecast coming our way. They had been living in a tent out in the woods on the out skirts of town and they only had 10 lb. sleeping bags. I gave them each KHP wool emergency blanks in case we did not get any help.

I called the next morning because the veteran said there was a program that VOA said could help him get home. I was going to follow up on it – that is when she told me that the plan had fallen through and there was no program, so I started calling all my sources and raised the funds for the family's bus fare home to the West Coast. The couple was so happy to know they were going home he was ready to throw away all of the camping things to never use again. He said he was only homeless due to a family member offered to help him and then did not hold up to his end of the deal, and did not have the funds to make it back home. He did not know that there was programs or people out there that would help people that are down and out with nowhere to turn. He said he was given a list of business names that helped the homeless and nobody would even talk to him and the minute he said homeless and needed help KHP never said no, only let me see what can be done. The wife asked for a piece of paper. Then she made a card and it said - Thank you for trying and achieving the best you can for us. She and her husband said goodbye and caught their ride to catch their bus home.

🖶 I had one of the sweetest women referred to me by a friend, which word of mouth seems to be my # 1 tool for a busy office! This client was one day away from losing her insurance, which was Medicaid. Due to her being able to draw off her husband's benefits the income bumped her over the edge for help and insurance. The current situation when she came in and I enrolled her as a client at Kentucky Homplace left me with a short time span before she ran out of her medicine. She had three specific medications that she desperately needed help with due to high cost. One in particular was \$430.00 for a month's supply. There was no way she could pay that price even with the income increase. That is not counting the other three medications she needed help with or the other medication that are cheaper prices that she could purchase. My goal was try to access the three medications as quickly as possible at a free or reduced cost. Within nine days of seeing her, I was able to get the most expensive medication accessed through a one-year pharmacy card every 30 days for her completely free! Then I also accessed the other two completely free as well! In addition, my Diabetic Shoe Certified Pedorthist, was able to access her a free pair of Diabetic Shoes for 2019 due to the extreme need for them. This client only has one pair of shoes that work with her foot brace that she has to wear. The client stated the other places she had tried could not do anything to help her get a pair at all. We found a way! Kentucky Homeplace was used mightily for the services that we help provide to this sweet little client! She was incredibly thankful to have someone help on her behalf when the situation seemed impossible. "She described it as the Lord made a way for her!"



- 🖶 Home visits just happen to be our specialty at Kentucky Homeplace and they always leave a void in your heart for so many people in the shut-in places that most never hear about. Recently I went on a home visit for a client in need for a simple eye exam. When I arrived at their home and did my normal, routine paperwork with questions of all sorts. I realized he was a diabetic. Ideally, from recent experience working for an eye doctor a Diabetic patient should be receiving a Diabetic Eye Exam every year. In this case, my client stated no one had ever mentioned to him about needing a diabetic eye exam, which is a little scary considering it was noticeably visible that he had one eye that seemed to be very strained. This client is paralyzed from the waist down and has a hard time really doing anything especially getting out and going to the doctor. After figuring out an eye doctor that would best suit his needs according to scheduling with transportation and being handicap accessible, I was able to set up an appointment time. He and his wife were so thankful that I had made time in a busy day to come to a home visit and see about his needs. He is a veteran and proudly served our country. Currently, with the situation and his decline in health, he is not able to travel to the VA hospital. It is really a heart-breaking situation. I'm thankful to be able to help him access his diabetic eye exam and a free pair of glasses and also any future needs that he may have.
- A client from my Diabetes Self-Management workshop (DSMP) stopped by my office to check in and say he was doing better and that he had been sick nothing to do with his diabetes. When you have these classes a lot of times the clients like to stop in from time to time to give updates or they may need to be told that they need to keep up with their goals or weekly plans so they don't get lost in the kitchen with little the Debbie's...

This client informed me that he has kicked little Debbie out of his house and told her that she could not stay with him. I had to laugh – I told him he could still eat – then he stopped me and said, "No, before I took the class I thought I knew everything but I learned a lot I've lost 10 lbs. and my A1C is down from 9.1 to 8." He said he knew that was not much but for him that was a lot and his doctor was happy with him. He said his knees do not hurt and he has more energy. Back to that weight loss, he said look at this remember my bibs being so tight look I can move them around they are loose... He just chuckled. He told me next month he will be going for his A1C and he is hoping it is going to be better than last time, but he is also afraid because he has been sick and the medication the doctor gives a person sometimes will mess it up. He said, "That's not fair. I've worked so hard." I told him I could tell he has been trying, he had better coloring in his complexion and his attitude and everything was upbeat.

He said his finger stick at home are getting better and that he is not having to take insulin as he used to so he going to talk to his doctor about that also. He feels he should not be taking as much as he does since his readings are getting better. I told him that it would be a good thing to wait and talk to his doctor and not to adjust it himself. This client said he would recommend this class to any and every diabetic, he learned a lot.

♣ I had a lady to come see me for assistance with getting her medications. She had been out of her medications for a while and was not receiving much income. After enrolling her, I looked



more in depth at her income and checked to see if she would qualify for Medicaid. I asked if she had ever applied for Medicaid and she said she did not think she would be qualified to get it. I called to check if she had ever been enrolled and sure enough, she hadn't. I started a new application and got her approved for Medicaid that day. She chose her MCO and after a few days, she was able to receive her medications from her pharmacy. Sometimes our clients do not know that are eligible for certain programs and it is up to us to run their eligibility for these programs.

- I had a client to come to me for assistance with dental extractions. He had insurance that most places would not accept and came to Kentucky Homeplace for help. He had several teeth that were hurting and two were infected. I was able to get him an appointment with a clinic in my community to get him dental assistance. My client is on a fixed income and only receiving Workman's Compensation as income and it was very low income. After getting all his teeth pulled, he was left with no teeth and no money to pay for dentures. I found a resource that was able to help him pay for over half of his dentures and he was only left to pay 150.00. It took a few months to save up for the 150.00 but he was grateful for the resource paying the other part. He said, "if they are helpful enough to help me, I will do what I can to come up with the other part, and I am grateful to do so."
- ↓ I assist many people in my community, and all with different needs. I have people needing assistance with clothes, house-hold items, dentures, glasses, hearing aids, medications, housing, on and on. My greatest passion is serving others and making sure their needs are met. I had a gentleman to come see me that had many needs. He had been in jail and was released back into the community to live in the sober living units with nothing but what was on his back. After making him a client I was able to get him Medicaid so that he could get his medications. Through the help of other Community Health Workers, I was also able to get him some clothing to wear. I called upon a few places and was able to find him a pillow, blanket and sheets for his bed. I also assisted him on creating a job resume and obtain job applications so that he could become an active and productive citizen again. Sometimes folks are not sure where to start back after being out of the community for so long. I am just thankful I am in a position where I can help him so that he can help himself and learn how to live again.
- I was contacted by a clinic to help a patient that did not have any health insurance. I met with the patient at the clinic and soon learned her and her husband (whom was with her at the time) did not have any health insurance. After beginning my interview assessment I found that both were young (early twenties) and really did not have a support system here in our area. Both told me they recently completed a local federally funded comprehensive program that provides essential academic and career skills training and prepares students for success. Unfortunately, I do not think they understood where to go for help after they finished the program and until they gained employment and got on their feet. This is where I came in and was able to assist them with Medicaid and SNAP benefits.
- I hosted a diabetic shoe clinic in our area and was able to help quite a few clients. One client really stood out to me during this clinic. During this clinic, a middle-aged male went through a



foot exam and was fitted for diabetic boots. He mentioned someone had gave him the boots he had and they were a couple sizes too big, but they were all he had to work in. Unfortunately, his feet were in very bad shape from having to wear boots that were too big even though he mentioned wearing two or three pair of socks with them. I am very happy to say we were able to get him the correct size diabetic boot and my client was extremely grateful.

- Lient came into my office for assistance with deductions of several hundred dollars coming from his monthly benefit. Upon accessing his needs I found out he has short term memory loss, which hindered him with understanding why he was receiving these deductions. Living on a fixed income made it very difficult for him to pay his monthly expenses. Upon making a few phone calls to his local bank, Medicare and Medicaid, I was able to help him understand what was happening. I explained he was eligible for low-income subsidy and Medicare savings and wrote all documentation needed down for him to apply. He returned to my office with the information needed. I applied him for Medicare savings and low-income subsidy where he was approved. He was so happy to know he would get his premiums refunded as I made sure everything was provided to DCBS and Medicare in a timely manner.
- Lots of times people think that Kentucky Homeplace only services elderly, and ill, members of the community and sometimes it is far and few between that we see a young or even middle age person, who is generally healthy, looking for assistance, that is the case with my county anyway. I recently met a young man, in his early thirties, single, no children. His life consisted of going to work every day for long shifts and coming home to rest or work on his home and start the day over again. He had a great job and never imagined that he would ever be laid off work. Another struggle that many of our service communities face is lack of work or loss of employment that leads to poverty. This young man came to my office not really knowing how I could help if I could at all. He told me his story in hopes that if anything was possible for him I would be able to help.

His job as a laborer financially supported him; he had worked there for many years and planned to retire from there. His salary was enough for him to pay for his home in full and allowed him to recently purchase a new vehicle. After the third month passed, his supervisor advised him that he would not be coming back to work and that his former employer would be going out of business permanently. Not only was he struggling financially and living off the last bit of his savings but he found out that his former employer had been in a financial crisis for quite some time and that he too was struggling to even get unemployment wages. The 5th month of being unemployed was approaching and he was still without income. His vehicle had been picked up by the bank and he was near the end of the groceries. He hitch hiked all the way to my office and stood at my door while he anxiously awaited my return from lunch break.

To really learn about his situation and what I could do I had to get to know him. He told me that his dream job was actually to become a truck driver and go over the road with some friends. He did not know where to begin and his eyesight was not great but he did not have vision insurance with his previously employer. He was also uninsured, with no transportation, no



SNAP benefits, no way to pay for CDL training to get this dream job and worse it was cold and he was running out of wood for his heating stove. We had to act fast because it would take him a long time to get back home and multiple trips to town were too hard right now.

I called our local community action agency regarding job assistance to start, who said that he would qualify for their free CDL training but he would need a physical and eye exam. We applied through Kentucky Vision Project for an eye exam and glasses and contacted a local clinic who agreed to do the physical free considering his circumstances. We signed him up for job assistance services knowing that we had the first obstacles already resolved. While I worked with the action agency to get a plan together on education and job placement, I referred him to DCBS who assisted in getting his food stamp application complete, we were even able to get him Medicaid where coverage would start immediately. Transportation was not provided to training all the way in London so together myself and the action agency members were able to reach out to other students who were willing to give him transportation as they were going in the same direction. Before letting him head back out for the day we walked over to the heating assistance program, completed an application for him to get assistance with heating, and was able to obtain 250.00 towards wood for his primary heat source. We discovered that he also had an electric bill with a disconnect, we were able to apply for and receive 175.00 through the Power heating assistance program. I spent 5 hours with this client that day but it was one of the most rewarding because he came to my office with no hope, just looking for advice, and together while reaching out to community resources we were able to get his life back on track. He had suffered for nearly 5 months and within 5 hours, everything had changed because of a Community Health Worker.

- ➡ I had a woman call and needed a home visit for some help. She had lost her extra help with Medicare part D. She had cancer and was not able to pay for her medications. She was not able to communicate well over the phone. After making several phone calls to her Medicare provider, I was able to get her part D reinstated. Then I was able to address some other needs she had and help her.
- I had a single mother come to my office one day... her children had lost their medical coverage and it was too expensive to add her children to the medical plan provided through her work. After reviewing her income, I was able to determine that the children should qualify for the KCHIP program. We completed the application and I requested a back date on the coverage to cover the month that they had not been covered.
- → One day one of the local agencies sent a man to see me. He was confused by a letter that he had received from DCBS- he had gone to them in person to apply for Medicare savings program, but he was unable to get in to see anyone after he had received his letter. I was able to help explain the letter and show him that he had been approved for the Medicare savings program (he was under the impression that he had been denied). After he had completed the Homeplace health screening I found out that, he had been almost 10 years without an eye exam- so I was able to link him to a free eye exam and free glasses.



- ♣ One of my most memorable client stories from this quarter is from an elderly lady who came in for help. She came in to see if she qualified for hearing aids. Even sitting in my office, she could barely hear me talking to her. I went over her income and she qualified for hearing aids. I got an appointment set up with an agency that helps with hearing aids. She went to the appointment and after she came back we sent the necessary paper work in to the agency. She was approved. She came back in with the biggest smile on her face and said, "Thank you so much. My life has changed."
- ♣ My client is a lady who needed help getting insulin. She is on insulin injections. After reviewing her income information, I was able to access the type of insulin she takes through two of the pharmaceutical companies that work with who help people who have income and insurance barriers and get the insulins in KWIK pens that she needs for an entire year. I worked with her primary doctor's office and we now have her picking up her monthly insulin there. She has since brought some of her other medicine's that she needs help with, and we are in the process of getting her help with those as well. She was very appreciative and grateful for the help she is receiving.
- This quarter I have had the pleasure to help a young lady that was a victim of domestic violence of many years. After many years of violence, she was left with having to have her teeth removed. She came to Ky Homeplace to get help with getting a new smile to help her heal from all the tragedy. I was able to get her connected with a program that assists with domestic violence victims and obtained her dentures for free. Although it is a long process, she is hopeful to be able to move on and get a job.
- I also had an older gentleman referred to me by a doctor after he had discussed with the nurse that he had contacted a program in Florida to get his medicine cheaper than what he could get them from his Medicare Part D. The nurse told him about KY Homeplace and he came in after he had mailed the forms to Florida and paid the initial fees. The program had told him that he could cancel at any time and get most of his money back, but after we completed the paperwork for the medicine he called to cancel and they would not refund any money. Even though he was upset about not getting a refund he is happy to know that he will not have to pay them anymore money for the same services that we can provide free of charge.
- I had a very nice man come into my office, asking for help with getting his medications. He could not afford to get his medications at the cash prices he was currently paying. After exploring all of the options we decided to call Medicare to apply for the Low Income Subsidy. After patiently waiting, he was finally approved and we were able to enroll him into a suitable prescription plan to perfectly meet his needs. In the few visits to my office, he had expressed his need for dentures in one of our conversations. When I told him we had a program available to help with dentures, you could see the joy in his face. He needed dentures because he ended up in the ER one day and the nurse had mistakenly thrown his dentures away. So we scheduled him an appointment and he was so happy. A couple weeks later, I got a call from him. He said,



"Courtney, I've ate a steak every day since I got my dentures, Thank you so, so much! You have no idea how much I have missed eating steak. Thanks to you I finally can eat what I want." He was just so happy he could finally eat what he wanted because he finally had dentures again. He also said his new insurance was covering his medications and that he was able to get them all filled at the same time now!

- ♣ I have been working with clients that have Medicaid. Clients have now been able to get eye exams but cannot afford to get the glasses. I have been working with several clients on getting their glasses. During the time of the interview, I have determined they are having problems getting some of their medicines. I was able to assist with some of their needs and help with getting the medicines the insurance would not pay for.
- I have been working with clients with Diabetes on the getting Diabetic Shoes and supplies. I have been doing Diabetic Programs to help with getting Eye Glasses and education on Improving Diabetic Outcomes. Clients have been excited about learning more about ways to improve their health and have been willing to keep a record to report back in the future.
- I had a nurse from a nearby doctor's office bring in a young woman that had just started coming to them. She had not been to a doctor in several years and had several medical issues going on that they were trying to address. However, her main concern was to get her children back. She had lost them several months prior. She needed housing and had to find a job quick. I took her as a walk in, enrolled her that day, and began calling apartments, they faxed over applications for low-income housing and we filled them out that same day. She did not have a resume, so I called and got her an appointment for the adult education center. She went to her appointment and they helped her build and print her resume. She then came back in to me and we signed her up for an online account to upload her resume and apply for jobs. She has since contacted me, has had some calls for interviews, is awaiting the move in date for her apartment, and is many steps closer to getting her kids back in her care because of KY homeplace.
- My most memorable client would have been a lady that was battling Multiple Sclerosis. She had been diagnosed with it several years ago, but had no coverage for the medication that the doctor had recently prescribed her. She came to me for help with the medication cost, but at the time, we did not have a prescription assistance program that covered that medication. So I searched and reached out to person after person to try and find an answer or help for her.

After just a few short minutes of speaking with her at the office, I had created a strong bond and relationship with her. It really is amazing how much you can find out about someone's life within in very few minutes. She had a son around 21 that was battling with autism, and an older son around 30 that was battling with drug addiction.

My biggest thing I was shocked with was that you would have never known this beautiful lady was going through what she was. She was poised, respectful, mannered, and had a smile on her face. Throughout the entire visit, she never complained about taking care of her two sons or other responsibilities she had. She kept apologizing repeatedly about asking for help, but stated



she did not know where else to go to, that Kentucky Homeplace was a last resort for hope. I was able to find a foundation called MS Foundation that did emergency assistance for her medication and grants that come available at the time. I was able to help enroll her in a free trial until she could receive a decision from the MS Foundation. She did receive a decision on the MS Foundation and was enrolled for 12 months. She was so relieved to have found an answer for help.

- Previously I saw a woman in drug addiction recovery. She was a middle-aged woman that had been a drug user for the past 10 years. Because of this, she had to have all of her teeth removed. She wanted to talk to me about possibly getting dentures. I explained to her that we had a Dentist in Eastern Kentucky that if you come through Ky Homeplace he will give you a discount for a whole set of dentures and I told her the amount they would cost. When I told her of this amount, she said ok then what do I have to pay after that? I told her that was it. He will do impressions then make the dentures and you will go back to pick them up and make sure they fit. She started crying on me. She said that of all things that reflected in her life from the drugs, the no teeth had been the hardest. She felt less worthless, ugly and thought people looked at her in disgust. Through the sobbing cries, she said this will make such a difference in her life. She had already saved enough money up for these and she was truly grateful for this discount. She had checked with several other places and they all where at least double what we could obtain.
- A young lady called for information about help with medications, but specifically insulin. She has to take multiple insulins to control her diabetes. The health insurance that she had just purchased had a high deductible on the medications and she could not afford to purchase her needed meds. I explained to her that the majority of the pharmaceutical programs would not help if you have insurance but she asked if I would make her an appointment to come in anyways and I did. When she arrived, she told me that after she got off the phone with me, she called and cancelled her insurance, which made her now where she should be eligible for the patient assistance programs. She said at least with Homeplace, she has a chance to get her medications whereas keeping the insurance she could not afford to get them. I was able to access seven medications for her, including three different types of insulin, an inhaler, and additional medications.
- I had a lady come to my office for insurance. Her Medicaid was ending due to her husband's new job employment. She was a type 1 diabetic, required an insulin pump and insulin. She was worried about how she would pay for her pump and her insulin too. We sat down and called the company who manufactures the insulin pump, told them her situation and was able to get her insulin pump set up on small monthly payments so she would not be required to come up with all the money at once. I was also able to get her insulin free through the drug company until she was able to afford her husband's insurance.



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