

UNIVERSITY OF KENTUCKY

Kentucky Homeplace

April 1, 2024 – June 30, 2024

Quarterly Report



<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.

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Kentucky Homeplace

My Fellow Kentuckians:

During this quarter Kentucky Homeplace CHWs have worked to help their clients with a variety of needs (please see the quarterly stories at the end of this report). One of the unique things about being a CHW with Kentucky Homeplace is that you never know what you will be helping your client with next. Every client and their situation is unique and the ability to adapt to differing circumstances is paramount for the CHW all the while providing confident and caring services.

At the end of this quarter, we came to the close of the CCR 2109 grant which enabled KHP to grow by employing 10 more CHWs over three years. I would like to thank all of those CHWs for their diligent work in helping those in their communities in need and wish them the best of luck in their future endeavors.

The values below and throughout this report reflect the hard work and dedication of Kentucky Homeplace CHWs.

Quarterly Summary

For the period April 1, 2024 – June 30, 2024, the CHWs provided services for 2,820 clients. CHWs logged 5,790 hours on care coordination activities with a service value of \$126,627. The amount of medication accessed was \$5,143,276 and other service values (not medications) accessed were \$603,250 for a combined total of \$5,746,526.

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

William Mace Baker, RN

Director, Kentucky Homeplace Program



Community Health Worker Spotlight



My name is Linda Colwell, I have been the Leslie County CHW with UK Kentucky Homeplace for two and a half years. As a lifelong resident of Leslie County, my love and concern for the people in my community is deeply rooted. I am a local resident who understands the needs of the people in my area, and I love being able to make a difference.



My name is Tim Marcum, and I have been proudly serving as a Community Health Worker in Jackson and Estill County for the past two years. In my role, I am deeply committed to helping residents of Estill County access the medications they need. This involves coordinating with healthcare providers, pharmacies, and community resources to ensure everyone receives their prescribed treatments promptly and efficiently. The initiative that I am most proud of is the food box program in Jackson County. This program began as a small effort in collaboration with the local library, where we initially delivered food boxes to individuals who were homebound and unable to access food resources. Over time, thanks to the dedication of our team and the support of the community, the program has grown significantly. In addition to the food box program, I also work closely with the library to maintain our community hygiene cabinet. This cabinet is stocked with essential hygiene products, ensuring those in need can access items like soap, shampoo, toothpaste, and other personal care necessities. Through these initiatives and my day-to-day work, I strive to make a meaningful impact on the lives of those in Jackson and Estill County, fostering a healthier, more supportive community for all.

Program Activities

Community Engagement Activities

The following are samples of meetings/events attended this quarter:

Inter-agency meetings

Various advisory council meetings

Diabetic Shoe Clinic/Diabetic Support Groups

Various KYACHW sub-committee meetings

Various presentations to community organizations

KPAP Steering Committee Meetings

Professional Development/CHW training

Kentucky Homeplace Database Training

Kentucky Association of Community Health Workers quarterly meeting

Veteran's Access to Benefits training

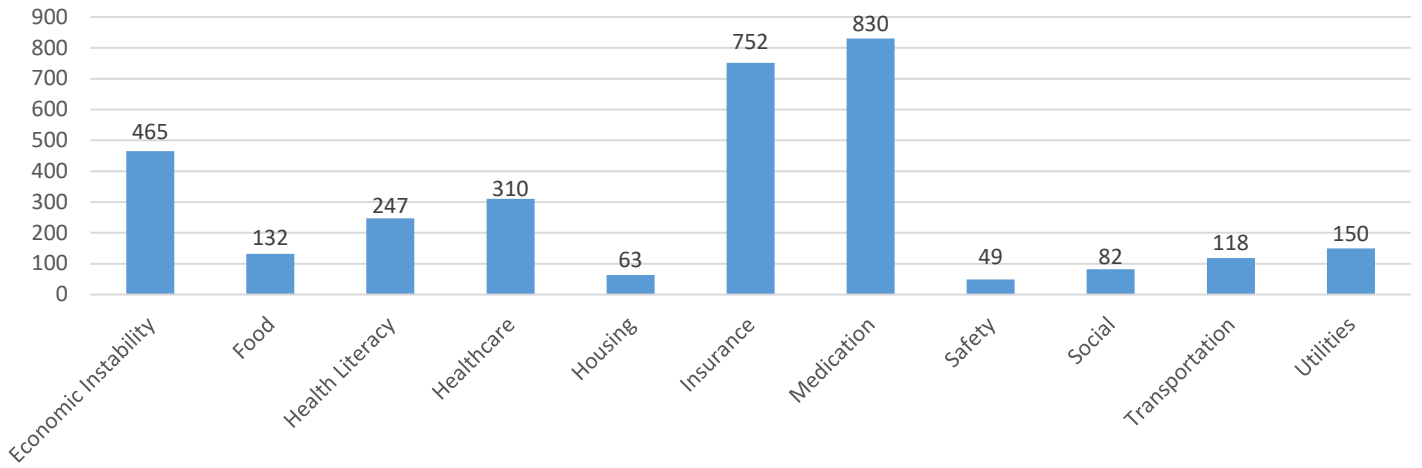
Long-term care 102 training

Other News

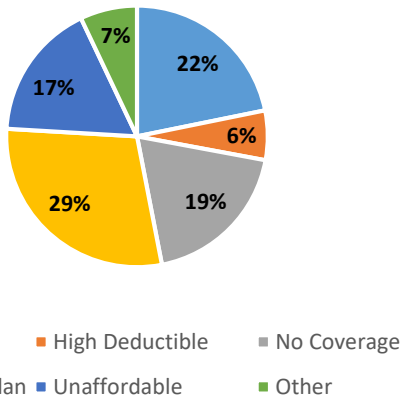
Kentucky Homeplace staff presented "What We Do When the Waters Recede: Community Health Worker Response to Historic Eastern Kentucky Flooding" at the National Rural Health Association Conference.



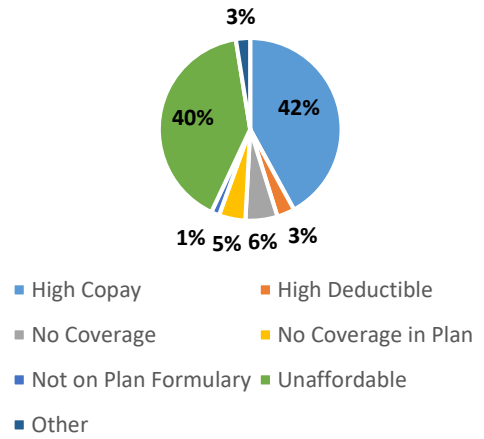
Social Determinants of Health Barriers to Care 04/01/24 - 06/30/24



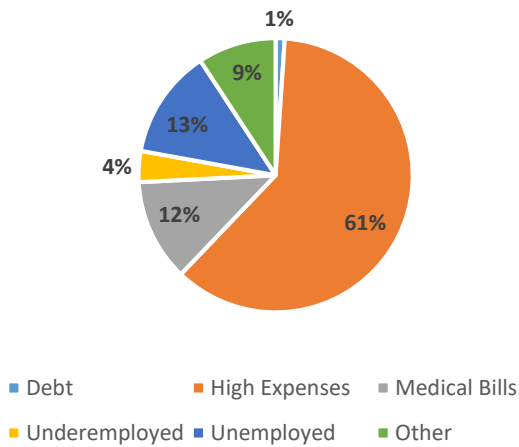
Insurance



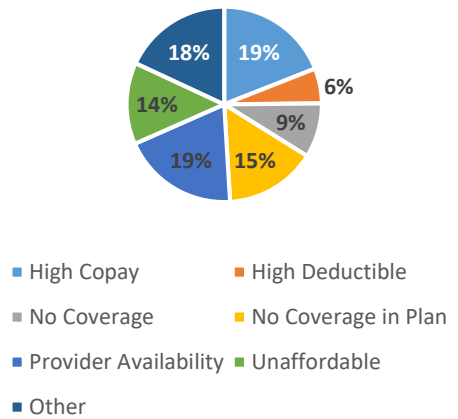
Medication



Economic Instability



Healthcare

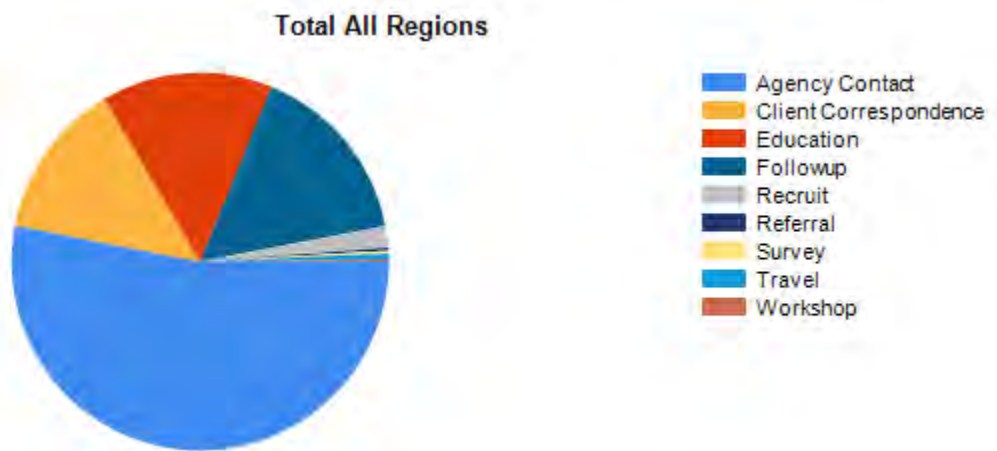


Activity Summary

(Clients visited: 04/01/2024 – 06/30/2024)

Activity	CHW Hours
Agency Contact	3,074.25
Client Correspondence	777.75
Education	851.58
Follow-up	913.85
Recruit	105.58
Referral	15.33
Survey	13.83
Travel	30.00
Workshop	10.00
Grand Total:	5,792.18

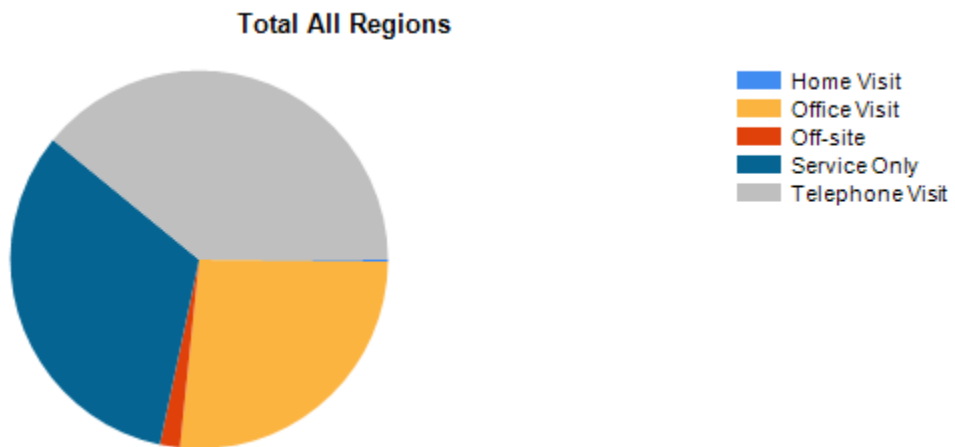
*Total service value for 5,792.18 hours equals \$126,627



Visit Summary

(Clients visited: 04/01/2024 – 06/30/2024)

Visit Type	Client Visits
Home Visit	13
Office Visit	2,088
Off-site	136
Service Only	2,570
Telephone Visit	3,084
Video	0
Grand Total:	7,891

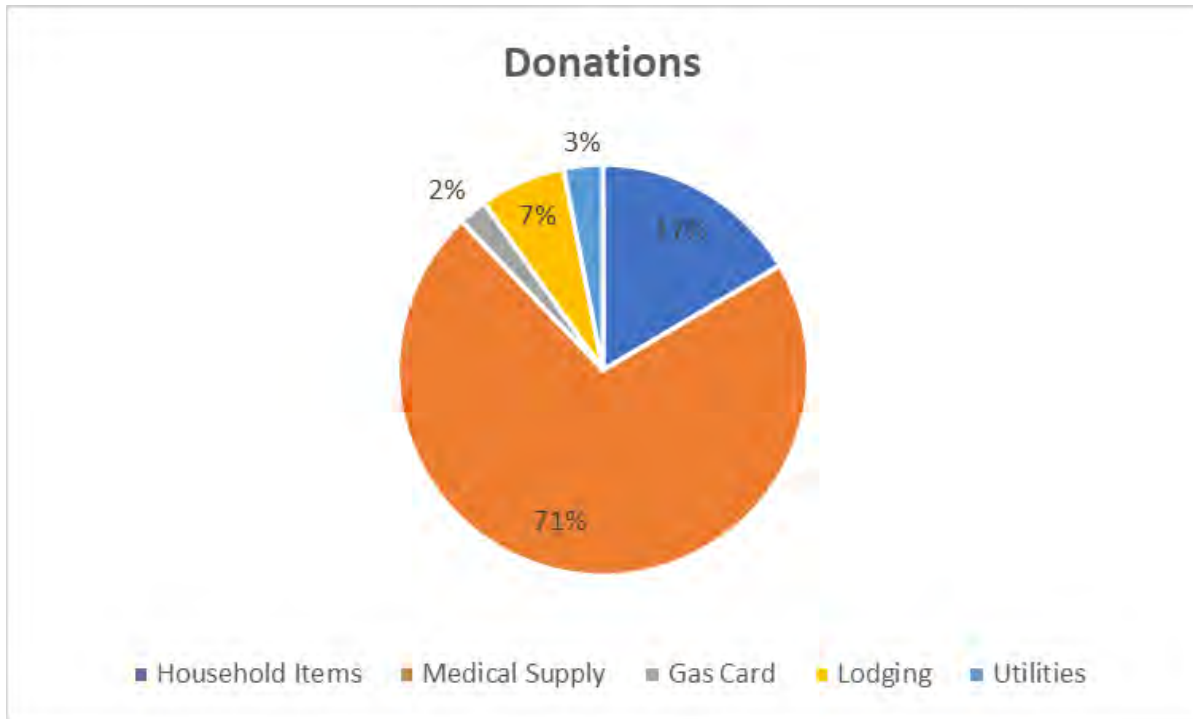


* Service only involves any actions taken on behalf of the client while the client is not present.

Donations

(04/01/2024 – 06/30/2024)

Category	Total
Household Items	\$1,175
Medical Supply	\$5,080
Gas Card	\$160
Lodging	\$480
Utilities	\$221
Grand Total	\$7,116



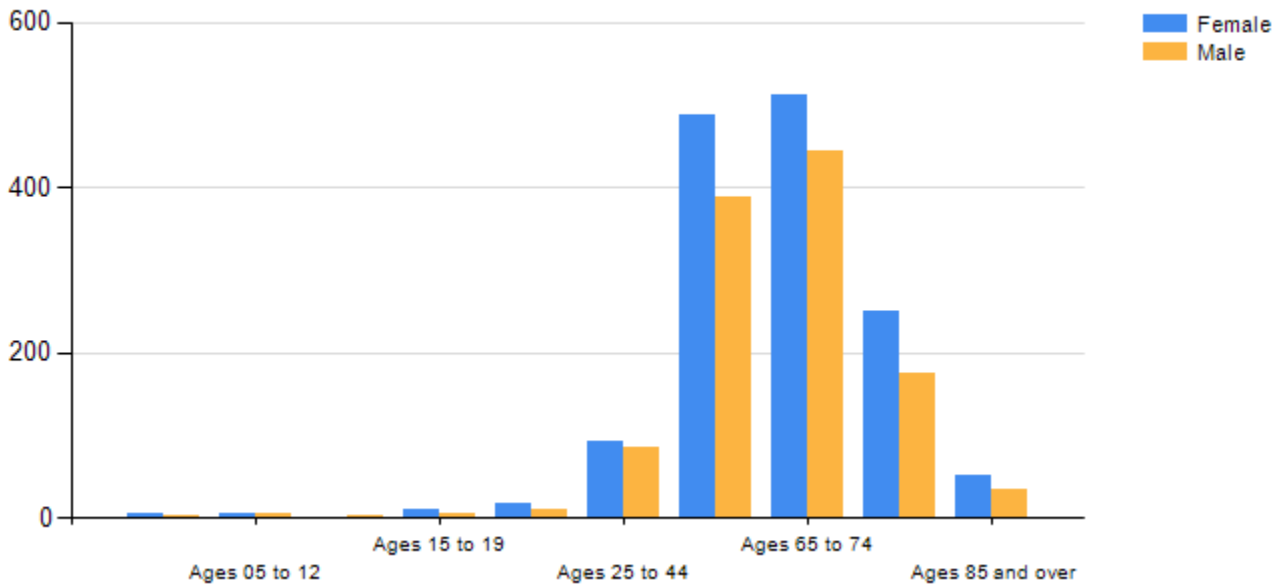
*Kentucky Homeplace received donated medical equipment and supplies for redistribution to clients with a value of \$7,116.

Age Gender Summary

(Clients visited: 04/01/2024 – 06/30/2024)

Age Group	Female	Male
Ages 00 to 04	4	2
Ages 05 to 12	4	4
Ages 13 to 14	0	1
Ages 15 to 19	10	5
Ages 20 to 24	17	10
Ages 25 to 44	91	84
Ages 45 to 64	487	389
Ages 65 to 74	512	444
Ages 75 to 84	249	174
Ages 85 and over	52	34

Clients by Gender and Age Group

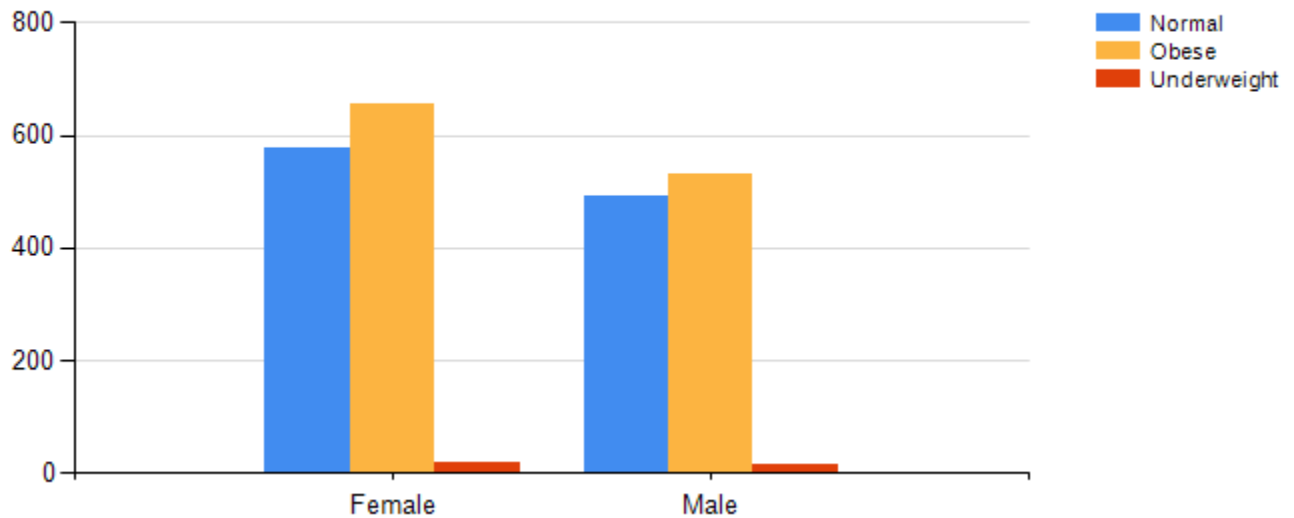


BMI Category Summary

(Clients visited: 04/01/2024 – 06/30/2024)

Gender	BMI Category	Clients
Female	Normal	577
	Obese	654
	Underweight	20
	Total:	1,251
Male	Normal	493
	Obese	532
	Underweight	16
	Total:	1,041
	Grand Total:	2,292

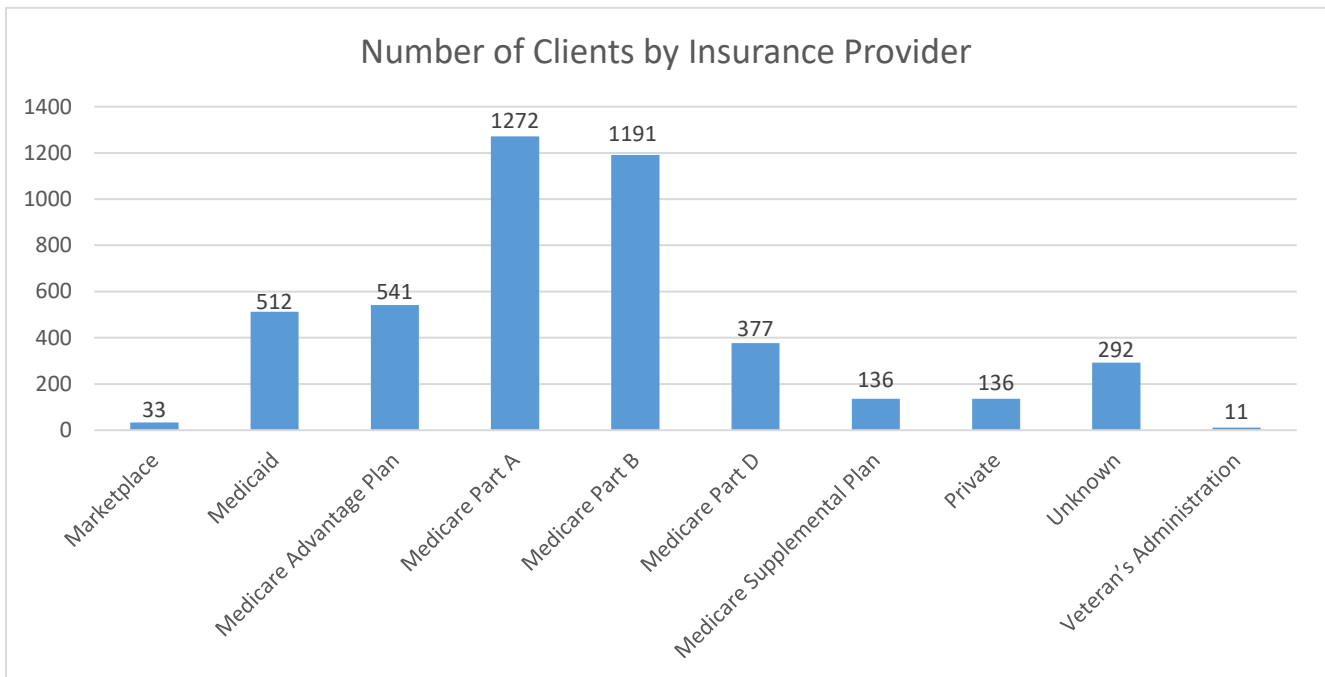
Client BMI Category by Gender



Insurance Summary

(Clients visited: 04/01/2024 – 06/30/2024)

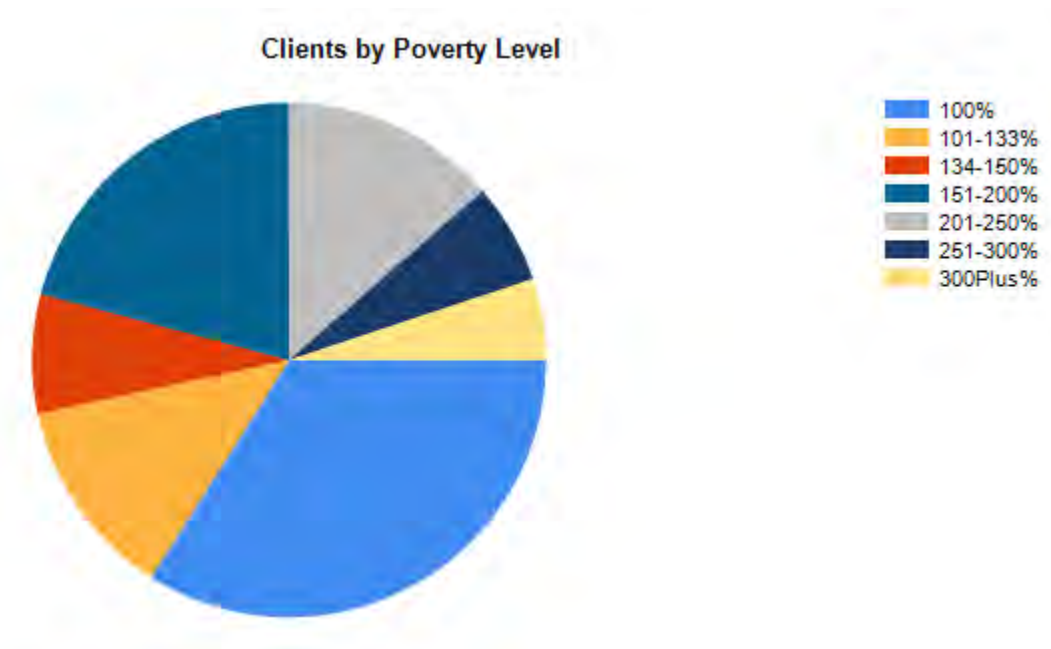
Plan Provider	Clients
Marketplace	33
Medicaid	512
Medicare Advantage Plan	536
Medicare Part A	1,272
Medicare Part B	1,191
Medicare Part D	377
Medicare Supplemental Plan	136
Private	136
Unknown	429
Veteran's Administration	14



Poverty Level Summary

(Clients visited: 04/01/2024 – 06/30/2024)

	100%	101-133%	134-150%	151-200%	201-250%	251-300%	300Plus%	Total
Clients	875	325	193	536	350	163	131	2,573



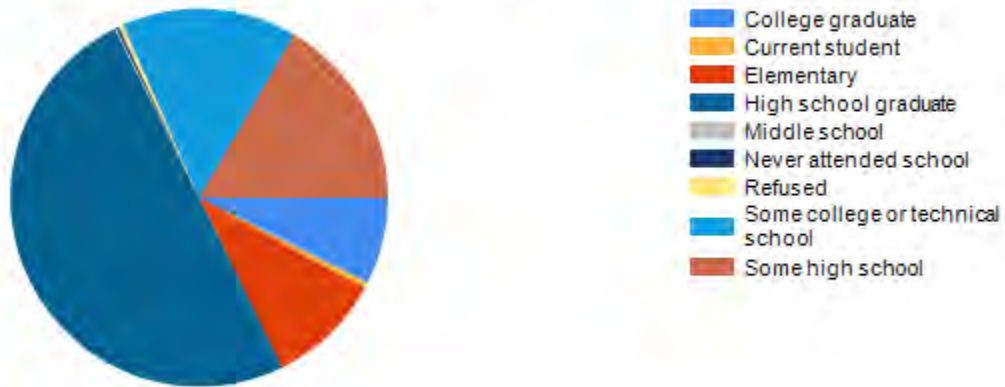
*Grand total is unduplicated clients

Education Level Summary

(Clients visited: 04/01/2024 – 06/30/2024)

Education Level	Clients
Never attended school	7
Elementary	253
Some high school	426
High school graduate	1,283
Some college or technical school	387
College Graduate	192
Refused	10
Current student	12
Middle school	3
Grand Total:	2,573

Total All Regions



*Grand total is unduplicated clients

Kentucky Homeplace CHWs



Josh Adams, Michaela Amburgey, and Carole Frazier, CCHW- Perry County, attend the KRADD Senior Games.



Mace Baker and Michaela Amburgey pose with graduates of the Kentucky Homeplace Foundational Community Health Worker Training held in June.



Carole Frazier, CCHW- Perry County, presents at the National Rural Health Association Conference.



Amanda Goolman, CCHW- Bath & Menifee Counties, provides outreach and education to participants at a health fair in Bath County.

Kentucky Homeplace

32 County Service Area



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



Client Encounters-Actual Situations Encountered by Community Health Workers

Actual Client Encounters

A recent encounter with a client that stands out to me the most this quarter is that of an elderly lady who lives alone. This lady came in to see me because she was struggling, and her friend recommended that she stop in to see if I could help her. Instantly, upon reviewing her monthly benefits statement I noticed two things that didn't look right, one being that she was only receiving \$557.00 per month, and that she was paying \$68.70 out of that to cover the cost of her Medicare B premium, monthly. This left her with only \$488.00 per month to live on.

Right away, my heart went out to her because I knew that she could have been receiving more per month if only she would have known or if someone had only told her for years. Her resources were less than \$2000.00 which would qualify her for the minimum benefit of \$943.00 monthly. I referred her to a government agency that assisted her with receiving this benefit and more. Then, I assisted this client with applying for and being approved to receive assistance with no longer having to pay \$68.70 per month for her Medicare B premium. I also helped her get access to secondary Medicaid which will save her each time she goes to the hospital or medical clinic. Finally, we signed her up for an Advantage plan that is for those with Medicare and Medicaid to receive free monthly benefits for food, utilities, or gas.

I am truly thankful that this lady walked into my office and that I was able to help and guide her to a better life because of a program like Kentucky Homeplace.

My office sits on Main Street in my community so many times I have clients that just walk-in to small talk, update me on how things are going in their lives or on occasion have me check their weight or blood pressure. However, one morning this quarter was a little different. I was working with a client when I had a knock at the door and upon seeing my client standing outside, I realized that this time he might be needing something other than a blood pressure check. He appeared to be winded and gray in color.

I asked him how he was and said he felt like he had lots of indigestion and pressure in his chest but asked if I could check his blood pressure. The first reading was 209/116 so he asked me what he should do, and I recommended that we call an ambulance, but the client refused ambulance transport, so I contacted his wife. The client went to his primary care provider, where he was sent by ambulance to a local hospital and then airlifted to a large hospital where it was confirmed that he had a heart attack and needed multiple stints. My client stayed several days in the hospital but has recently stopped in to let me check his blood pressure and we are both surprised by his normal readings of 118/78. Since then, I have been able to provide my client with a free blood pressure monitor and a BP log sheet that he shares his readings with his provider.

A social worker from our local oncology center referred a client to me needing incontinence supplies, specifically pullups. He was recently diagnosed with anal cancer and his insurance would only cover diapers. This gentleman

stated he was ashamed to wear diapers and they hang down so low that it was obvious that he was wearing diapers and didn't want to wear them in public. After enrolling the client and providing him with a month's supply of pullups, I was also able to provide him with wipes, gloves, and I was able to get him assistance with his electric bill with community action, and provide him with healthy eating education. I set him up with meals on wheels but he discontinued their service because he didn't want to eat a meal in front of his wife and they wouldn't provide her one too. Therefore, I was able to set up with food box delivery from a local church twice a month. For the last few months when the client came into my office, This client has come in for the last several months picking up incontinence supplies and we are not working on getting him Ensure. This client trusts me so much that when he comes to get help with his electricity with community action, he will only sit in my office while they work up his paperwork.

I received a referral for a client who was recently released from a 2-month hospital stay who recently had bilateral knee amputations due to diabetes, has no transportation, his vision is so poor, that he can barely see to keep up with appointments with doctors, currently has no income and waiting on disability approval, no food stamps, and relies on neighbors and a few family members to help prepare food and pay bills. After reaching out to the client, he knew he had an upcoming appointment with his doctor but wasn't for sure when or how he was going to get there. I called his PCP, set up transportation for him with our local transportation provider, which is paid for with his Medicaid. I wrote on my calendar a day before his appointment to give him a reminder call. I was able to set him up with meals on wheels for daily meals and I have been working with his PCP to get home health services. We are also working on getting SNAP benefits and possible waiver services through DCBS. The client advised that he only has an electric bill and no rent so as soon as Community Action gets more funding on July 16, he is scheduled to get help with his bill. No immediate disconnect at this time. This client will require continued assistance with helping keep up with medical appointments and transportation. He is needing eye surgery before we can apply to get him some new glasses.

I had a referral from a local hospital for someone that needed assistance. This person could not speak due to having cancer. I enrolled him in our program and accessed a loaner iPad with special apps to assist him with speaking from our local KAT's network. In the meantime, I applied to get him an iPad that he could keep through a special program. He received the new one and texted me that he had received it and needed to turn the loaner back in. When he came into the office, his health had improved, he has started to gain weight again and to drive his car. He is very grateful for the new iPad, this one is loaded with even more programs that he can use. Prior to getting the loaner iPad, he depended on a small tablet that he had to write everything out that he wanted to say. His biggest concern was that people couldn't read it, now he doesn't have to worry about that.

My client was a referral from the small clinic here in town for medication. She currently has a Medicare Advantage plan but it wouldn't cover the medication needed to control her diabetes. We accessed the patient

assistance program for the medication and she was approved. Her diabetes is now being controlled by this new medication.

I answered a phone call and on the other end was a scared and worried young woman. Her mother was in the hospital with a rare blood disease. The medication she needs is very expensive and her mother is on limited income as she just recently became a widow. I scheduled her mother to come into Kentucky Homeplace when she was released from the hospital for an interview and, to assess her needs. I ask her to bring all her income documents and insurance cards.

Upon assessing her needs I realized when looking at her income she was eligible for Medicare savings and extra help, which covers her Medicare premiums and would give her assistance with co-pays of medications. We gathered all documents including bank statements, Life insurance, and property value. I then contacted the Department of Community Base Services and applied her for Medicare Savings and Social Security for Extra Help with medication. She was eligible and approved for both.

Once approved her case was backdated for three months as she was eligible since becoming a widow. She received all her Medicare premiums for the past three months and ongoing. This added one hundred seventy-four dollars a month back in her monthly budget. The extra help will cover the high co-pay for her medications.

The lady was relieved to have the extra income each month, but the help with the medication brought tears to her and her daughter. She did not know how she would pay for the medication. Now her worries and burdens are lifted and she can afford all her medications.

A gentleman came to Kentucky Homeplace for assistance with medication for his chronic Kidney disease. Due to the gentleman's illness, he is no longer able to work and his household depends only on disability social security income. In today's world, his family is struggling with the everyday cost of living expenses. He has to have this medication to live a normal life.

The co-pay for this medication is over one thousand dollars with his insurance. I looked for a prescription assistance program to help with the cost of the medication. There was a program; but with certain eligibility requirements. The eligibility is determined by income and out-of-pocket expenses with insurance. We gathered all documents and Dr.'s signature and applied. He was approved for the medication.

I immediately called to let him know he would receive the medication for one year free of charge. I could hear the relief in his voice. He continued to thank Kentucky Homeplace for assisting him with applying for the medication. He stated, "I would not be receiving this medication if not for Kentucky Homeplace and your assistance!" I can't live without this medication and you have saved my life and the well-being of my family.

A client came into my office needing assistance with diabetes medications. We completed her applications and send them accordingly. Later that month she comes back to let me know she had received the medications we had requested. The client informed me that the hospital pharmacy is helping her with her new heart medication. She also tells me that she wasn't approved for the medication, but she could buy it at their pharmacy at a cost of 80.00 per month on a program they had. I asked her if she cared if I called the pharmaceutical company that the hospital said she wasn't approved for and find out why. After calling the pharmaceutical company I found out that all we had to do was send in an out-of-pocket expense. My client went to her pharmacy brought back the printout and I faxed it to the pharmaceutical company and my client was approved right then over the phone. Sometimes taking the extra step makes all the difference. Now my client can use that 80.00 for food or household bills.

Ozempic is the hottest drug on the market right now for weight loss, but also a miracle worker for my diabetic clients. Being able to help access this medication for my clients have helped them to lower their A1c numbers. I have a client that was able to lower his A1c by 3 numbers in just four months. I have worked with this client to get involved with diabetic support groups. He is now living a healthier life.

A recent client's wife called and told me he had not been doing well. He has had several surgeries and hospital stays within the past couple of years due to cancer and a back injury. He has become almost completely home-bound, other than being transported by ambulance to appointments, and it has become hard to do because of his small doorways. He needed a ramp, and the ambulance service mentioned adding door access leading straight into his bedroom would make transporting him much easier. I submitted an application to a resource in one of my counties that I use for handicap ramps, and it was approved within a few days. Once it was approved, I spoke to them, and they agreed to put a new door to the client's bedroom from the outside in addition to the ramp. This addition to the client's home has had a major impact on his life and made getting healthcare safer and more accessible.

I had a young mother to call my office who had not lived in the county for very long. She didn't know anyone in the area to ask for help, and she had seen my flyer hanging in the post office and thought she would call to see if I knew where she could get some assistance with her electricity bill. It had already been disconnected, so one of the usual resources I would refer clients to couldn't help due to that reason. I called and left messages for churches and a local organization that has donated to my clients with needs before. They contacted me back that day and called the electric company to find out how much had to be paid to get it turned back on. They paid to get the client's electricity turned back on. This all happened within a couple of hours of her calling me for the first time. She said she now knows that she can call my office and I will be there to help find what she needs in the future.

I had a client referred to me from the clinic next door to my office. The caseworker came to the appointment with the client. The client has fallen on hard times and didn't know that there was any help for her. She was feeling very discouraged and unsure of what to do. She had low self-esteem from needing dental work and would not smile, because she was embarrassed for anyone to see her teeth. I was able to get her an appointment to have a dentist do an initial exam and see what needed to be done. As I was doing the interview with her I also found out that she had not seen an eye doctor in many years. So we called and got her an appointment with an eye doctor and were able to get her some glasses. I spoke with her sometime after and she sounded upbeat and happy to have her new look. She has a new smile and can see a bright future.

This quarter I had a client come in from the recovery center and needed help with glasses. He stated that he had lost his glasses at the place he was staying in as he was homeless and sleeping on a friend's couch. I was able to help him apply for glasses. He stated that he was on track to start fresh when he got out of recovery and discussed that he needed housing. I discussed with him that he could come back and we would look at the options.

One day a nurse at the Health Department brought in a lady to my office. Her PCP had told her to go to the Health Department for help with getting a colon cancer screening, (because she had a screening three years ago and it had come back with pre-cancerous cells, so she was due for another screening). The Health Department didn't have any resources for colon cancer screenings at this time. The client technically didn't have insurance, but is paying \$300 for an "Impact Health Plan" which claims to be a limited medical insurance plan- but it hardly covers her going to her primary care doctor and has zero coverage for labs, screenings, or tests. I made a call to Kentucky Cancer Link to verify that they had funds available to assist. I completed the KY Cancer link referral form and faxed it in. On the next day, I got a call from my client who was very excited to let me know that they were going to pay 100% of her colonoscopy, and she assured me that she would be in to see me during open enrollment so that she can get set up with actual insurance.

I had a client come in one day in search of insurance. She moved to Kentucky a few years ago and had never updated her insurance when she moved. She had already recently been turned down for Medicaid and another KYNECTOR in the area had already turned her away because she wouldn't be eligible for a marketplace plan until open enrollment in the fall. She is a diabetic and had wanted help with insurance because she was out of insulin, before moving to Kentucky she had stockpiled on her insulin. By the time she came to see me, she had run out and had not had an A1C check or any visit with a doctor in over two years. Her place of employment does not provide any insurance coverage. So I got her set up at a sliding-scale clinic the visit will be \$75 and it covers not

only seeing the doctor but any lab work or tests done that day in the office. After she has been seen by a doctor and knows her A1C we can work to get her medication assistance.

I have been able to help clients with Medicare Part D who have been in the Gap (Donut Hole) and have to pay more than 100.00 for their medicines. It helps them get their Insulin and high-cost medicines. Seeing their faces when KY Homeplace can make a difference in their lives is so rewarding. I have been helping with glasses, medicines, dentures, diabetic shoes, etc. Most clients can't believe our program can make a difference for them, they are so grateful.

I have had several clients needing to discuss their medicines and said they couldn't afford to pay \$400.00 or more for one medicine with all the other bills they have. I was about to assist them in getting their medicine from BI Cares at no cost and they said they didn't know what they would have done without Kentucky Homeplace. I feel good about being able to make a difference for my clients and helping them be able to get the medicines they need.

I received a phone call from a friend that has been a great help as a resource for the USDA housing repair loans and grants. She was calling to refer a flood survivor to me for help with the application process. He was struggling to make sense of everything and the first step was to get all required documentation to submit with his application. He was with her in the office, so I told her to tell him to come to my office and bring what I needed from him to get enrolled with KHP. A few hours later, he arrived and had all paperwork that I requested. After doing the initial interview and speaking with him, I realized he also needed help with a monthly food box and a resource for low-cost dental services. He told me that his first priority was to get the application submitted and processed. I let him know that his driver's license had expired and needed to be renewed, but that all his other information was up to date. He's going to schedule an appointment to get his license updated and then call back to schedule appointment with me, this will be an ongoing process, will keep everyone updated.

This quarter, I received a call from a local clinic, they had a patient that needed help with a food box, her electricity had been off for over 15 hours and the food she had wasn't any good and had to be thrown out. I was able to go in the clinic and enroll the patient with KHP and then I called and got her an emergency large food box.

This quarter I have assisted clients with 32 pairs of diabetic shoes over two diabetic shoe days. Several of those clients were so pleased with their new shoes they wore them out of the clinic. One client came for diabetic

shoes and left with shoes, depends, and chuck pads. Often we find needs that they do not come asking for but while speaking with them we find that we can help with much more than they realize.

I have assisted two clients with getting window air units, one of those clients did not have any form of cooling in his home at all. He also has his elderly mother living with him and has stated that the air unit will be a big help to him and her during the summer months.

I am also working with a client trying to find him proper housing, we have been able to get him needed medical supplies including a walker and diabetic shoes. We have started looking into applications for housing and have been able to provide him with food boxes during this time.

This quarter I had a client come in from the recovery center and needed help with glasses. He stated that he had lost his glasses at the place he was staying in as he was homeless and sleeping on a friend's couch. I was able to help him apply for glasses. He stated that he was on track to start fresh when he got out of recovery and discussed that he needed housing. I discussed with him that he can come back and we would look at the options.

I can see the increase in clients this year for Diabetic Shoes. It makes me very happy to see that more and more people are hearing about what I do for my clients and the community. I have also noticed that some of the providers who usually don't refer individuals to me for assistance are now doing so. I feel that they are now trusting in the process and the things that I am able to assist the community with.

I have noticed over the two years that I have been with Kentucky Homeplace, that the different doctors' offices have become more comfortable with me as a person and trusting that I help every patient they refer to me to the best of my ability. I've also noticed that some of the referrals that I have been receiving are from Offices that never usually send me individuals that need my assistance. I like seeing the growth of Kentucky Homeplace in my little community.

I'm a Community Health Worker in Eastern Kentucky, and I used the Kentucky Prescription Assistance Program to help an Amish woman get her Jardiance medication. With this program, we applied and got approval in just three days.

As a community health worker, I assisted with a major event at the local library where we distributed food boxes valued at \$9,360 to 78 families. We began by loading up cars with the food boxes for families to pick up. Additionally, we made deliveries to ensure that families who couldn't come in person still received assistance. It was a concerted effort to ensure everyone in need got the support they required.

This quarter I was able to serve a client who was unable to afford his incontinence supplies. He has multiple health issues and he is not physically able to move like he used to. His wife, who has her own set of health challenges, has been his primary caretaker and it was taking a toll on them, trying to decide if they would be able to afford food, medication and incontinence supplies for the month. I was able to relieve some of the burden from them both mentally and financially by providing incontinence supplies donated to Kentucky Homeplace. This client has begun physical therapy in his home twice per week and is finally gaining some of his mobility back.

Recently I had a client stop by for assistance with getting glasses. Unfortunately, his glasses provided through his insurance were broken and so he has been without glasses for months not knowing what to do. This client is on a fixed income so he could not afford to purchase another pair. Due to the programs and resources here at Kentucky Homeplace, I was able to order him a new pair of glasses and give him a hard case to carry them in. He was very happy and thankful to be able to see again.

This past quarter one of my clients received a bathroom modification through a grant program, While we were working with a charitable company and submitted her application over a year ago, she was able to get approved and have her bathroom modification completed by the end of April, This bathroom modification allows my client to be able to live more independently by being able to access her shower more easily with her current mobility issues. This project was valued at \$ 4,899.00.

This past quarter I received a call from a frantic client with legal issues, she had no idea where to turn, so she called Kentucky Homeplace. I was able to connect her to legal aid and she was able to get some relief knowing she had been pointed in the right direction. Although the process is still ongoing I believe they will be able to help with her legal issues.

A person came into the office due to not being able to afford insurance or medication. During the enrollment process, it was determined that the client's BP was too high. We discussed what was going to happen if the BP remained that high. We completed the enrollment and the client stated he had been off his BP Meds for about 4

months. I retook the BP and it was even higher. I convinced him to go to immediate care due to the client refusing to go to the ER. I made the client an appointment with a PCP that is federally funded and will see the client with very little cost. The client is now on BP meds with almost a normal BP. The client is on schedule to see their PCP every three months.

A client came into the office to discuss vision. It was discovered through the enrollment process that the client could not hear. The client was referred to a hearing provider. I walked with the client through the hearing assessment due to the client being nervous and unable to communicate clearly with others. The client was eligible for hearing aids and received the hearing aids. The client can now hear and communicate with others. They are active and engaged in daily activities and can actively participate in their healthcare.

I had a client who needed help getting his car fixed so he could go to work. He has a pregnant wife and five children in the home. He was really needing a hand up to keep get his car fixed – there were some programs that could help but he did not qualify for any of them. We could not get the money as fast as he needed but it worked out that he got the money and he called and asked that I cancel the help because he got the problem fixed. So, he has a job and doing good. He is off public aid for Snap and supporting his family. This client was proud and he tried hard to find a job, keep it, and support his wife and children off the system. He wanted so much to be able to do that. But before he could get on his feet this client had a heart attack and lost his job and he was not able to buy food for them. He called and said he hated to ask if there was a program or food pantry that I could help him out with until the Snap benefits came in. I told him let me make some phone calls and see what we can find.

I called a church pantry I work with, and she said she would fix him right up. I called him back and told him that he could send someone in the next morning, if possible, to pick up the food boxes. He said he could come in and pick it up. The food pantry made him up enough for a month. She even put in extra food for the children – cookies, peanut butter and jelly for snacks. She also put in extra things that most do not help with shampoo, toothpaste, bath soap and other extras. He was a happy client to have gotten the help he needed.

I received a referral for hearing aids, I checked the KHP database to see if the referral was a client and they were, I called a contact that I work with to check and see if there was any funding for hearing aids.

The person did a quick application on the phone and after receiving all the information she approved her that day for hearing aids. I called the client and told her we needed to set her up for her hearing test. We called and got her appointment, and she went for her hearing test the very next week. She will receive the hearing aid in 2 weeks. She was so happy.

I had a client I enrolled making some major life changes while trying to decide what insurance to pick up after his initial Medicare A & B. He needed clarification on determining if a Med Supp or Advantage would be his best option, then if he needed a separate drug coverage. After enrolling him, we realized he had tons of medical issues and was dealing with multiple chronic diseases. His main concern was getting a plan that accepted his coverage out of state. He sees a specialist who has treated him at the Cleveland Clinic for a long time with treatment concerning his "MS" Multiple Sclerosis.

The client informed me this medication was lifesaving and life-giving concerning his MS so that became the # 1 concern. This medication for a 30 qty is over \$10,000. I decided I needed a professional opinion and called upon them with insurance questions that were out of my expertise. We made a phone call and explained, the situation of the client's history the back story of what was going on, and the urgency concerning the entire situation. This client's spouse was leaving a job and transitioning to a state job with a decrease in pay and adding the client to her insurance wasn't an option. I knew we could get him signed up on a plan due to a Change of life approval. After a home visit and many, many phone calls concerning if the plan he would choose was in network with the out-of-state provider and all the other what-ifs.

I was able to help him with the medication through one of our Kentucky Homeplace programs that we offer, he just received his meds for free shipped to his door a couple of weeks ago! He was able to get an Advantage Plan completely for free that covered dental, vision, and his out-of-state PPO. His spouse was able to relocate from a stressful work environment that she had dealt with for years just so my client could stay on her insurance plan because of his MS. We covered every single base for the client and fought a huge battle of all the unseen scary issues that the family was facing. Thanks to my insurance connection making several home visits with my client I was able to make the final last one to ensure that it was the way to go! We agreed to make the change even though it looked hopeless concerning what they were going through before I came on the scene. He now has coverage after Medicare A & B, it's free! He gets his meds shipped to his home in a 90qty for free, so that was a huge burden lifted. He is forever grateful that Kentucky Homeplace was able to make a life-changing transition a little smoother and the burden a little easier to carry.

Client Satisfaction Surveys

Judy Bailey

“Judy was very helpful in getting my glasses and my diabetes medication. Thank you!”

Barbara Justice

“Barb is a very polite, pleasant, and knowledgeable Community Health Worker and always helps me with all my needs.”

Shirley Prater

“She was on top of everything. Thanks to all who were involved!”

Amanda Goolman

“Amanda is always there when I need her and she is very helpful.”

Samantha Bowman

“She is always helpful and cheerful and smiling. Between her mom and her, we have the best.”

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