

UNIVERSITY OF KENTUCKY

Kentucky Homeplace

October 01, 2024 – December 31, 2024

Quarterly Report



Kentucky Homeplace poses with Dr. Frances Feltner at the UK CERH annual Christmas Luncheon.

<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:

For this quarter Kentucky Homeplace CHWs have remained steadfast in their dedication to serve those in their communities. Despite the extremes of the weather in Kentucky our offices have been very busy assisting with a variety of needs.

According to our CHWs in the field recent changes in Medicare for 2025 have led to an increase in client visits. Kentucky Homeplace CHWs are knowledgeable of these changes and were able to help many clients find the right plans for the coming year. CHWs are becoming well-known in their communities for helping people with open enrollment, especially with getting health insurance through KYNECT for Qualified Health Plans or Medicaid. Because of this, more clients are reaching out to Kentucky Homeplace for help during this time of need.

For the period October 1, 2024 – December 31, 2024, the CHWs provided 14,477 services for 2,436 clients. CHWs logged 4,373.83 hours on care coordination activities with a service value of \$104,140.89. The amount of medication accessed was \$6,257,852.57 and other service values (not medications) accessed were \$739,737.72 for a combined total of \$7,101,731.18.

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 October-December. 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



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

Professional Development/CHW training

Mental Health First Aid re-training

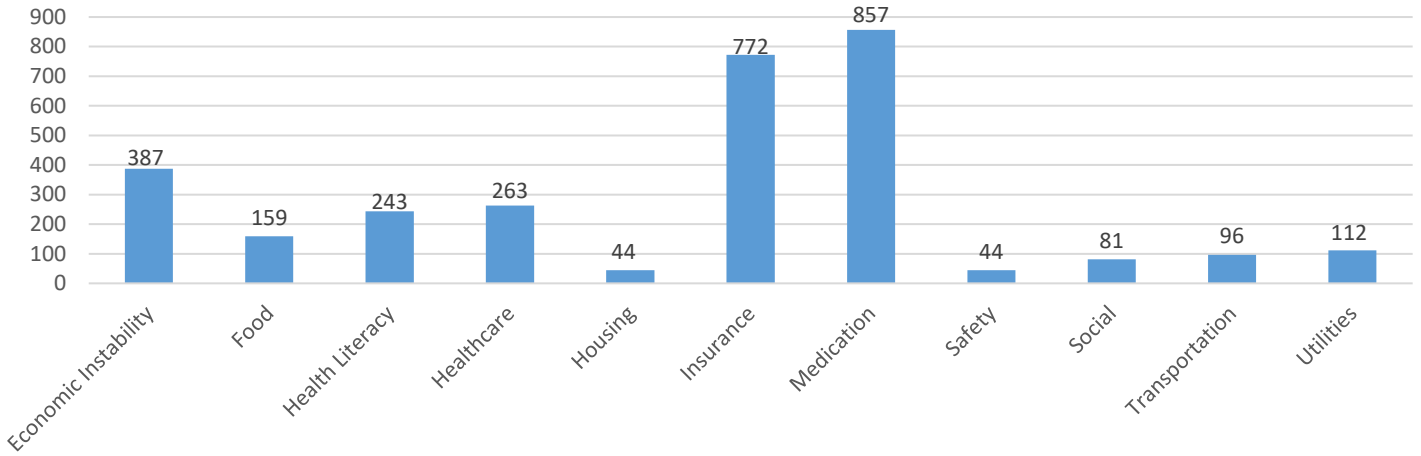
Medicare 2025 Presentation

Other News

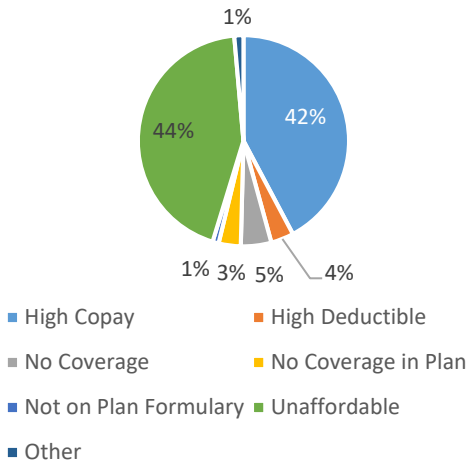
Madison Gilliam has accepted the CHW position in Breathitt/Wolfe Counties



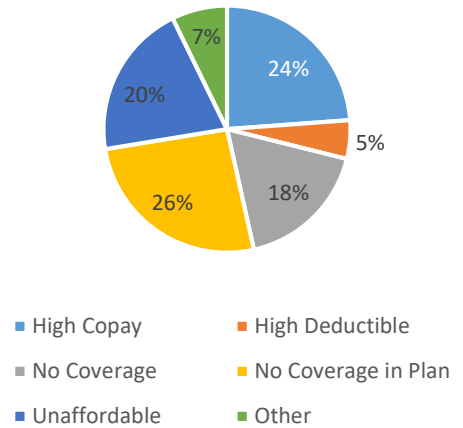
Social Determinants of Health Barriers to Care 10/01/2024 - 12/31/2024



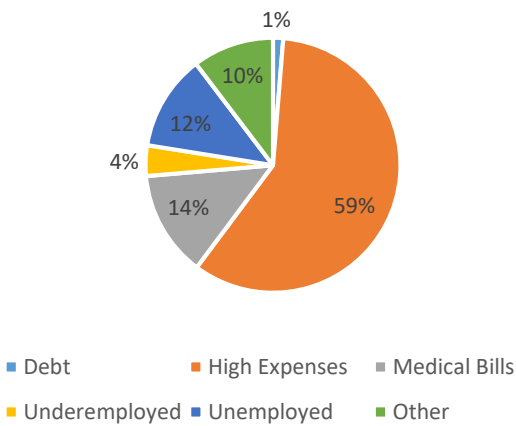
Medication



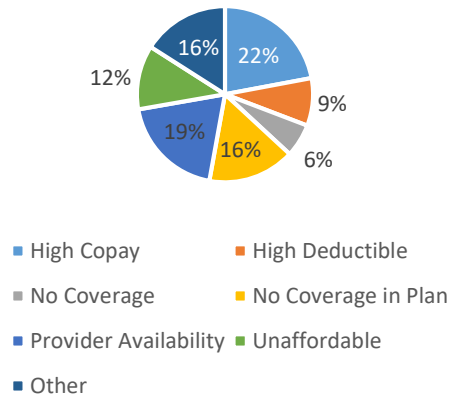
Insurance



Economic Instability



Health Care

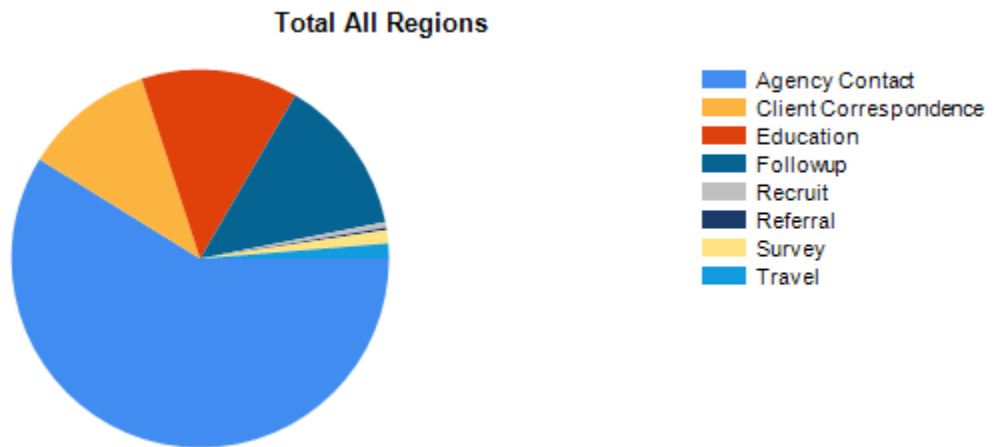


Activity Summary

(Clients visited: October 01, 2024 – December 31, 2024)

Activity	CHW Hours
Agency Contact	2,571.52
Client Correspondence	489.13
Education	587.50
Follow-up	589.60
Recruit	20.83
Referral	9.50
Survey	49.50
Travel	56.11
Grand Total:	4,373.77

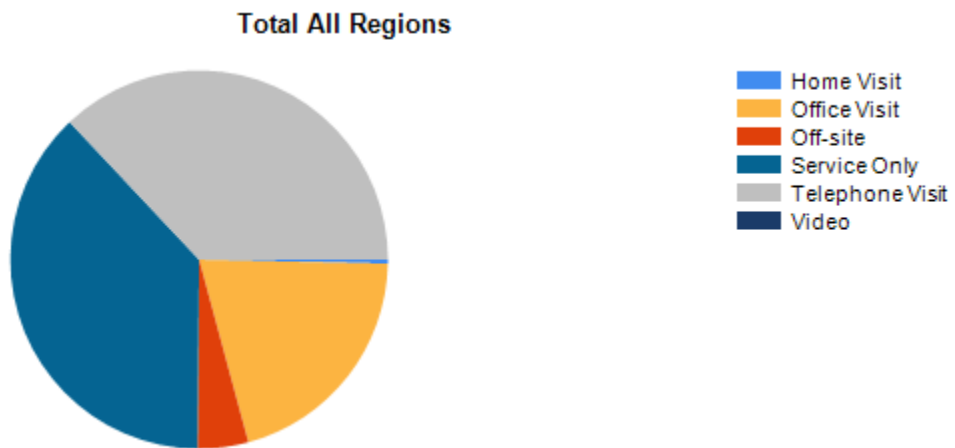
*Total service value for 4,373.77 hours equals \$104,139.46



Visit Summary

(Clients visited: 10/01/2024 - 12/31/2024)

Visit Type	Client Visits
Home Visit	22
Office Visit	1,762
Off-site	87
Service Only	2,169
Telephone Visit	1,962
Grand Total:	6,002



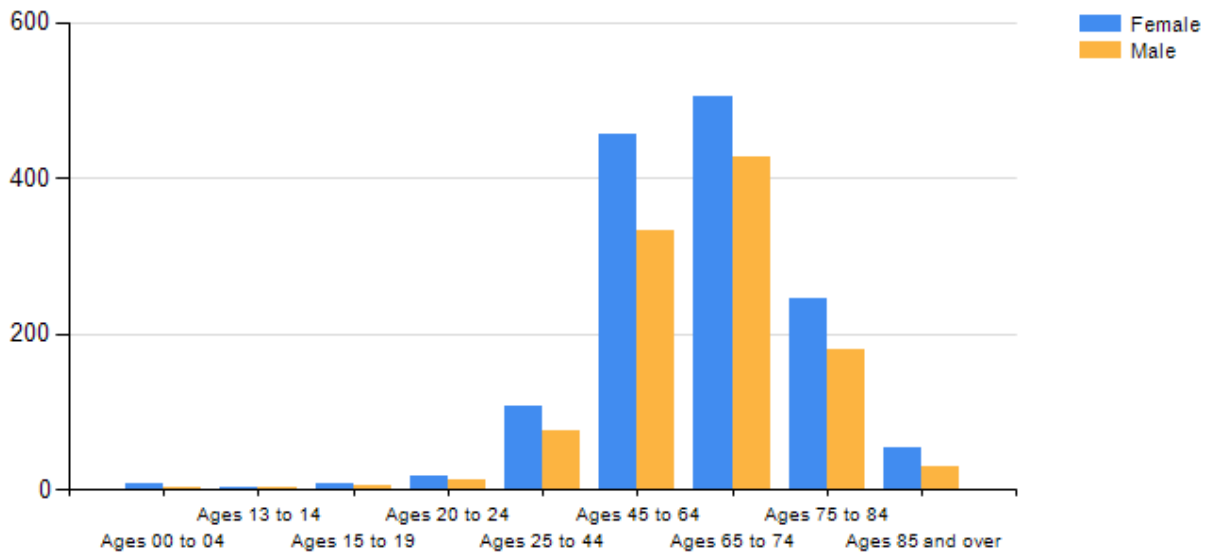
* Service only involves any actions taken on behalf of the client while the client is not present.

Age Gender Summary

(Clients visited: 10/01/2024 - 12/31/2024)

Age Group	Female	Male
Ages 00 to 04	4	4
Ages 13 to 14	3	6
Ages 15 to 19	0	2
Ages 20 to 24	19	4
Ages 25 to 44	67	62
Ages 45 to 64	408	346
Ages 65 to 74	488	448
Ages 75 to 84	233	165
Ages 85 and over	58	33

Clients by Gender and Age Group

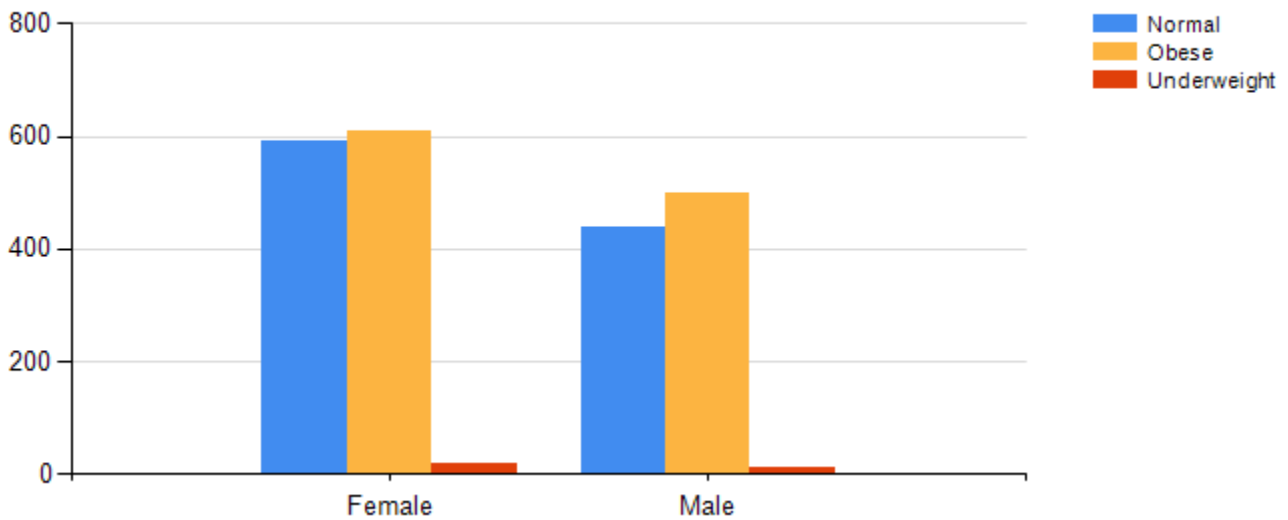


BMI Category Summary

(Clients visited: 10/010024 – 12/31/2024)

Gender	BMI Category	Clients
Female	Normal	559
	Obese	567
	Underweight	23
	Total:	1,143
Male	Normal	455
	Obese	510
	Underweight	8
	Total:	973
Grand Total:		2,116

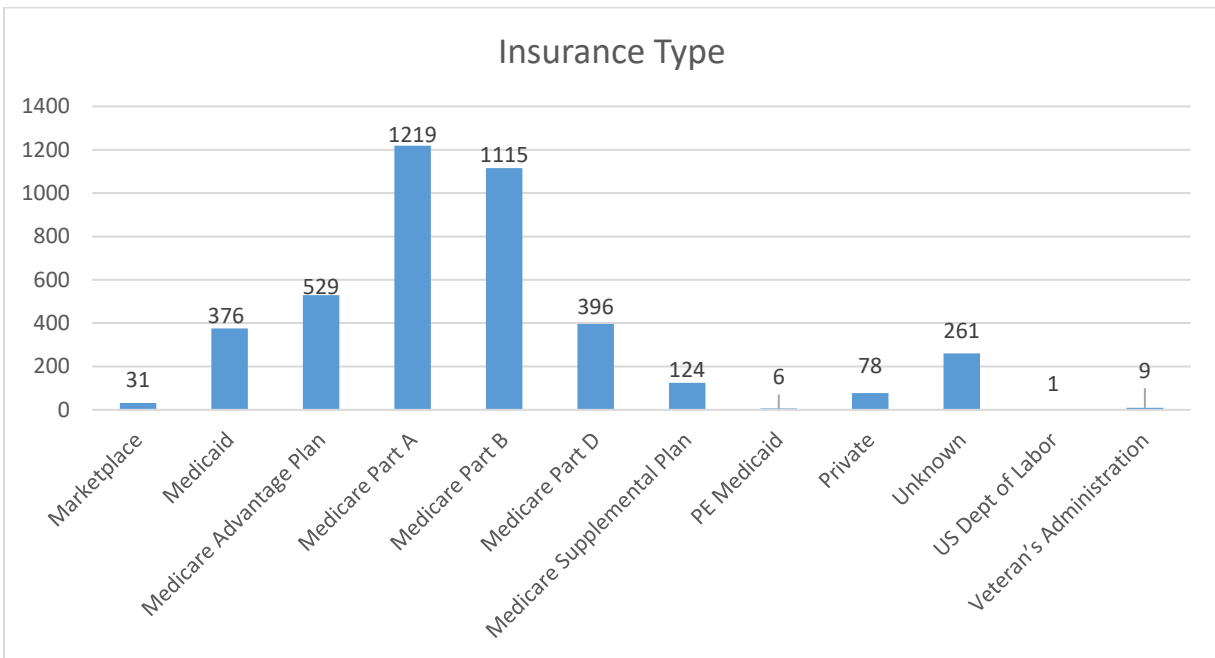
Client BMI Category by Gender



Insurance Summary

(Clients visited: 10/01/2024 – 12/31/2024)

Provider	Clients
Marketplace	31
Medicaid	376
Medicare Advantage Plan	529
Medicare Part A	1,219
Medicare Part B	1,115
Medicare Part D	396
Medicare Supplemental Plan	124
PE Medicaid	6
Private	78
Unknown	261
US Dept of Labor	1
Veteran's Administration	9

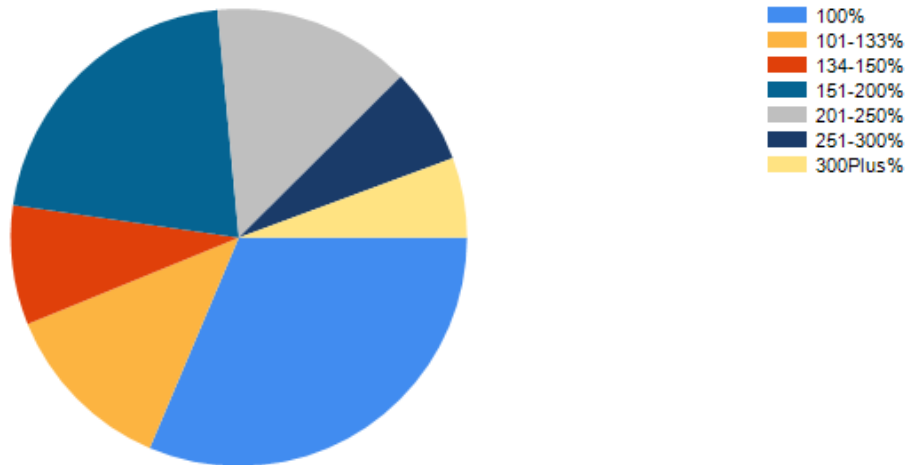


Poverty Level Summary

(Clients visited: 10/01/2024 – 12/31/2024)

	100%	101-133%	134-150%	151-200%	201-250%	251-300%	300Plus%	Total
Clients	653	336	189	511	338	177	150	2,354

Clients by Poverty Level



*Grand total is unduplicated clients

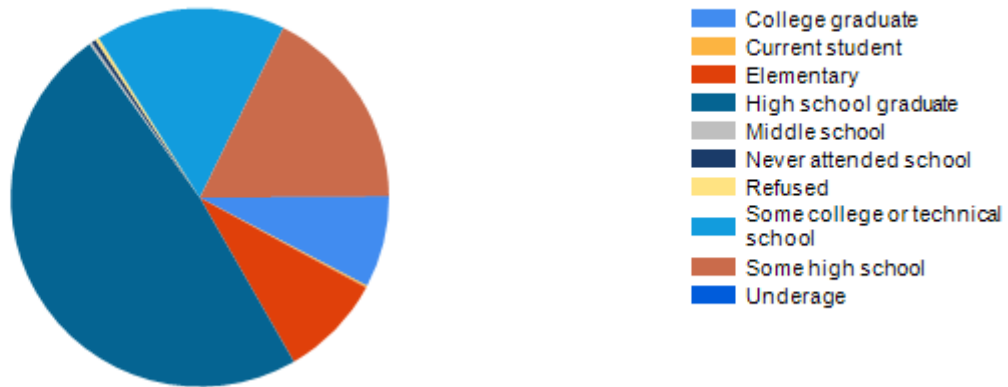


Education Level Summary

(Clients visited: 10/01/2024 - 12/31/2024)

Education Level	Clients
Never attended school	8
Elementary	214
Some high school	408
High school graduate	1,168
Some college or technical school	352
College Graduate	186
Refused	7
Current student	2
Middle school	9
Grand Total:	2,354

Total All Regions



*Grand total is unduplicated clients



Kentucky Homeplace CHWs



Tim Marcum, CCHW, Estill & Jackson counties, prepares a food drive for clients in Jackson County.



Josh Adams, UK CERH, Michaela Amburgey, Kentucky Homeplace & Whitney Allen, UHC, win first place in poster presentations during Kentucky Rural Health Association's Annual Conference.



Darla Shepherd, CCHW, Harlan County, wins the 2024 Excellence in Customer Service award from the Harlan County Chamber of Commerce.



Kentucky Homeplace CHWs and Dr. Frances Feltner celebrate at the UK CERH Annual Christmas Luncheon.

Kentucky Homeplace

26 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

This quarter, I got a referral for an already KHP client that had not been in need for a while. Referral said the client had been without heat in her apartment for over a year, told them after her appointment to send her to my office so I could update her all information. Client came in, was in pain with her legs and let me know she needed a rollator, the one she had was broken and she needed it to support her, when walking, so I sent a request for one to the CARAT Project, Keisha replied back and let me know that there is a waiting list and that she would add my name. I then spoke with a client about her heating issues, she let me know that she had put in several requests and still nothing has been done. So, I got all the information to contact someone and let her know I will get her a heater until it can be fixed. I emailed head of housing , and got a reply back within 2 business days, he let me know that they didn't have a work request for her, but that he would look into it, I followed up with client and let her know what was said and that I would be going to get her a heater and dropping it off, she let me know she'll be at the clinic and I could just bring it down to her, so after going out and getting a heater, I went into the clinic and gave her the heater. Two weeks later a client called and let me know that they were there to fix her heat, I told her I was glad about the severe weather coming in, she also wanted to know if I wanted the heater back and I told her to keep it. She told me that she appreciates all I have done for her.

I received a referral from a clinic and this one was for an 18-year-old, who had aged out of foster care. His referral was full of needs. He is a senior in high school and was out on his own, needing housing, clothes, and a cell phone. I called the number on the referral, and it belonged to one of his teachers, she had taken him on was trying to get him help. I scheduled the appointment, and he was right on time, very polite young man, I went over the referral needs with him and he gave me the story of how he became homeless. After looking over everything and getting him enroll with KHP, I started to call any resources, to see if we could find him some help. I reached out to a local agency about clothing vouchers, and they had just run out of money. I felt like I was hitting a brick wall, especially with housing, but one thing that was right at my fingertips was a cell phone, that I was able to give to him and he was so happy to get it. I spent the next week on housing and got told that it would be several months before they would have anything available. So, I called a client to follow up and let him know, he said Hey it is okay, I got housing yesterday, and I really thank you for helping me.

A client came into the office in tears. They had lost Medicaid and Medicare wouldn't pay for all of the client's medications. I worked with the client and assisted the client with the top two highest co-pays. Then we went through 4 different pharmacies and the client received the rest of the client's meds for less than \$20.00 a month. The client was also referred to the LIHEAP Office where they received assistance with the electric bill.

A client was struggling to be independent in their home. They struggled with getting up to their home and needed a better set of steps to go onto the porch. I was able to work with a local organization. They built a set of steps with railings, added a rail to get into the client's bathtub, adjusted the carpeting in the front room, and added a few rails in the home. The client can move around the home and is able to leave as needed.

I am working with a male that is 65 years old, that lost his wife in the past year. He was having problems coping with being alone because he was the caregiver for his wife. He had quit work when his wife needed to be taken to dialysis three times a week. She had become his world and now with her loss, he doesn't know what to do with his time.

I have been helping him with getting his insulin and other medicines for the past year. He called to find out who he needed to talk to about getting back into the workforce. He would like to find something to do now that his wife is gone to get back in the community to be active, He needs to find something to do that keeps him busy and to have purpose in life again.

I gave him a couple of telephone numbers to check how much he could work, which would not affect his current income.

He said he didn't know what he would have done without Kentucky Homeplace and knows to call his CCHW when he needs information.

I have an elderly male client that refers to "the girls" in the office as his "health care advisors". He comes to us for assistance with everything he needs. When he goes to the doctor, he comes to the office to tell one or both of us what the doctor said. If he has a form that needs to be filled out, he comes to me. We keep his medications refilled. He comes to every training session we have. He gets his diabetic shoes with us every year. He got us to help him get a Free Style Libre and he comes to us every two weeks so we can change his sensor. I assist him in paying his bills. He is so grateful for us being there. He tells everyone how wonderful we are and what kinds of things this agency has done for him. I started working at new office location and had my first diabetic shoe pick up day. I sat in the room with a medical equipment organization while the clients tried on and picked up their shoes. I was able to sit down with each of them and get to know them and explain the many services available at Kentucky Homeplace. There were two diabetic couples picking up shoes that were not taking some of

their important diabetic medicines like Ozempic, Jardiance, Xarelto, etc. I was able to get the applications printed for them to take to their doctor. They brought the forms back from the doctors, and I sent in the applications, and all four clients were approved and can now get and take all their medications.

In October I enrolled a new client she had heard about Kentucky Homeplace helping people with medications. She kept going to her provider and felt like it was a vicious cycle of sad news with her health declining and numbers getting worse. Her A1C being around a 10 and glucose running in the three hundred. When I enrolled her as a client, she explained her story and history and I had simply suggested to her to see a different Provider to see if it helped improve her health outcome. Our system is designed to spend time with the clients and honestly help get to the root problem of the scenario. She said the provider always seemed to be in such a hurry, they kept scribing medications when part of the problem was my client did not have any drug coverage. The past 5 years that has been the problem. You can give a patient medication all day long but if they cannot afford it, their health outcomes will never improve. Especially if they do not understand their chronic disease. She had not had blood work in over a year. The client had never been referred for a Diabetic Eye Exam or had her yearly foot examination. The list just kept getting longer and longer of things she was overdue or unaware of. After setting up the referral for her new provider visit, she came back to see me and was amazed! She had been to what had felt like a real doctor's visit with a provider that took the time to listen, care and make helpful suggestions on how she could improve her health without taking insulin. The provider had ordered bloodwork, did an annual Diabetic foot exam, and scheduled to see her back in 3 months. From that encounter, I made her a referral for her 1st Diabetic eye exam and explained to her that I could help with glasses. Then I added her to my Diabetic shoe day so I could help her access her 1st pair of Diabetic shoes. Kentucky Homeplace also helped assist with a medication for Diabetes that she received for free! She was excited to finally feel like things were turning around! It is amazing when we see healthy outcomes profoundly change the mindset of a client from the mental and physical aspects! We enrolled her as a Kentucky Homeplace client, educated her to help her understand her chronic disease. Got her established with an Optometry clinic so she can have healthy eyes. Her vision was terrible! We helped her get a free pair of glasses and are awaiting a free pair of Diabetic shoes and receive her medication for free. I am anxiously awaiting her January visit and expecting bloodwork to be much better than everything else. She was so thankful for Kentucky Homeplace. I have seen it repeatedly; health outcomes improve for our clients when they come through our Kentucky Homeplace offices. We are making a difference one client at a time.

This quarter I was able to assist a client with getting a much-needed shower transfer bench. She has a few different health conditions that limit her mobility and flexibility, so she was having a challenging time getting into and out of her shower. She was so pleased to get the shower transfer bench, she said it gave her back some of her independence.

Although there are multiple services we can offer our clients, the biggest service my clients utilize through our program is the medication assistance program. We help them access their medications for free and most times, they can put more food on the table. We hear every day, just how much this program impacts their lives. They can breathe easier because they are not worried about the financial burden their medication costs put on them.

During open enrollment, a lady came into the office very confused by their prescription drug plan, they had spoken with someone on the phone and had got confused and ended up switching her part D plan. I went over her med list with her and compared the plan that she had been enrolled into the plan that she had left (what it would look like for her in 2025) along with the other plans that were being offered for 2025 and helped explain the key differences (Monthly Premium, Co-payments, and in-network pharmacy). After going over all of this, she decided that the plan she had been signed up for was a good fit for her, and she felt more comfortable with the change after she could see the comparisons side by side.

I had a lady with no insurance come in for help with glasses- I worked with a community partner to get her a free eye exam and then used another program to help get her a pair of glasses for \$10.00. It was also Open Enrollment for Marketplace plans, so we did the enrollment, and she qualified for an APTC, then we compared the plans that were available in her area and made sure that her preferred doctors were in the network.

This past quarter I was able to assist a client whose spouse recently passed away. Losing that second income made things tight within the household and my client needed incontinence supplies. Thankfully, I was able to locate incontinence supplies a few times due to partnerships with local agencies who had donations. My client is always so thankful for our program.

During this past quarter I was able to help a client complete a medication application renewal. This Client has several medications for Diabetes and without Kentucky Homeplace to help my client

navigate the Prescription assistance program process, My Client would go without medications due to excessive cost.

I recently had a family member of my now Client contact me. My client was enrolling in a waiver program that has a waitlist. My client needed inconvenient supplies and was unable to afford them. I completed enrollment over the phone and a family member came to pick up supplies the same day My Client was enrolled. It was a huge relief for her, and her family.

A lady came to me for assistance with her Social Security benefits, as her birthday was approaching, and she was about to become eligible for benefits. She currently receives a small disability check due to an accident, but her income was not enough to cover her monthly living expenses without additional assistance. We contacted the Social Security Administration (SSA) to inquire about her eligibility and whether she could receive benefits from her previous spouse, or if she could continue receiving benefits based on her own work history. The SSA requested certified copies of her marriage license and divorce decree for verification. This request upset her, as the divorce had taken place out of state, and she did not know how to get the documents or afford the certified copies. I reassured her that we would get the documents, but it would take some time, as they would have to be mailed. She recalled the county where the divorce had been filed, so we began reaching out to different offices to locate the right one. After several calls, we finally connected with the right office. The lady there, upon hearing her situation, was understanding and waived any fees for the certified copies. A week later, the lady returned to my office with the certified documents in hand. We then called the SSA again to continue the process of applying for her benefits. The Social Security representative confirmed that she was indeed entitled to benefits based on her ex-husband's record, and the amount was significantly higher than what she was currently receiving. I assisted her in mailing the documents to her local SSA office, and once received, the SSA representative confirmed that her increased benefits would begin the month following her birthday. It is moments like this that make my job as a CCHW rewarding. Knowing that her financial situation is better by helping her access the benefits she was entitled to, providing her with the means to pay for utilities, food, and medications. It is rewarding to see the positive impact on the lives of individuals in our community.

My client has a family of 4 children, herself, and her spouse. Her husband had recently become disabled and had to leave his job. He withdrew his retirement to be able to pay off bills so they could survive until his disability got started. She reported the withdrawal and all necessary documents as told by the DCBS office. They lost their Medicaid. I worked on their case with another caseworker over the phone and provided additional documentation. Their case was approved and backdated to cover the past 4 months and is ongoing.

My client came into the office needing hearing aids in September. I scheduled her an appointment for a hearing clinic that works well with insurance. Her appointment was on November 20th. The client called this morning to tell me that she picked up her hearing aids yesterday and loves them. She was very appreciative of me sending her there. She said the doctor told her they have three grades of hearing aids, good, better, best. She chose an upgrade to the “better” ones, her out-of-pocket cost was \$250 which was not out of pocket due to her extra benefits on her insurance that covers dental, vision, and hearing.

I had someone call needing help with dental. She had heard about Kentucky Homeplace from a friend I had helped before. She had a tooth bothering her for a long time and recently started having a bad toothache. This client had been putting off getting it extracted due to having no dental insurance and not being able to afford to get the extraction. I was able to call and get her scheduled for the free sedation dental clinic the following week. The client got a full dental exam, x-rays, cleaning, and extraction, all for free. She is going back to another dental clinic day to get more dental work done in the future.

I received a call from a client who needed repairs on her porch. She is an amputee due to diabetes. She expressed concern about how hazardous her porch was and how she had recently fallen. It has become a risk of injury not only to her but for anyone coming to visit her, including home health. I told her I would start looking for resources to help her get her porch repaired or replaced. I called an organization outside of Lexington that does not typically help people in that area. However, after explaining the client’s situation, they agreed to take it before the board for a vote. A few days later they called me back, and she had been approved for \$6000, which would be enough for a smaller porch and a handicap ramp. This client was thrilled to have this issue resolved solved.

I had someone call needing help with dental. She had heard about Kentucky Homeplace from a friend I had helped before. She had a tooth bothering her for a long time and recently started having a bad toothache. This client had been putting off getting it extracted due to having no dental insurance and not being able to afford to get the extraction. I was able to call and get her scheduled for the free sedation dental clinic the following week. The client got a full dental exam, x-rays, cleaning, and extraction, all for free. She’s going back to another dental clinic day to get more dental work done in the future.

As Community Health Workers, we wear many hats. Every day is not the same! We have many people in our communities who have a wide variety of problems they need help with. Learning how to navigate to help people and have continued education to help them resolve the issues they may be having is extremely rewarding! I am very thankful for the work that we do!

I have now established a connection with a person that every month they bring me 12-15 packs of bladder control pads, and chucks. It is wonderful to make the connection to have a steady resource of supplies to help me, help our community.

This month, I had an 84-year-old client come in needing assistance with a hospital bill that she had received that was over \$1800 from a local hospital. Her husband has been extremely ill the last couple of years, and she is constantly getting hospital bills in the mail. They are both on a fixed income, so she said she has been paying \$15 per month on this bill, and she had a couple other hospital bills that she also pays \$15-20 per month on. I went online and printed off a financial assistance application for this hospital and advised the client of everything I needed to apply for financial assistance through the hospital. She brought in proof of income, bank statements, and everything I requested within a couple days. I completed the application for her, she signed it, and I faxed it in. A week later, I called and checked the status, and the application had been approved for 100% financial assistance, and the client's balance for this bill was now \$0. She has now brought in 2 other hospital bills to try and assist with, and after checking online, they both offer financial assistance as well. Both bills are over \$500 each, and we are waiting to process now. I also helped this client and her husband get assistance from the community action agency, and they received \$167 paid on the electric bill. She had never help from community action before and didn't know that assistance was available.

Earlier this month, I had a referral from a local case manager for a single mother who is recovering and needed assistance with Christmas for her children this year. She has been cleaning for 8 months and is working, but it takes everything she has to pay all the bills. After hearing her story, I emailed the local mayor of our county who helps with a certain number of families this time of year. My family was chosen, and my client was able to take her three children to the mayor's house to pick out gifts. While there, they were also fed a dinner, and they had toys and games set up for the children to play with. The client called me to thank me for helping her with Christmas this year. She said her children had so much fun at the event, she had a tough time getting them to leave!

This quarter has been extremely busy with open enrollment for health coverage. However, one client stands out the most because he came into the office after going to the hospital for cancer treatment but was informed that he had no health coverage. This client had recently been approved for Social Security benefits and was under the impression that he automatically received health coverage based on his disability determination. However, he quickly learned that was not the case. I assisted my client with quickly figuring out the issue and was able to request dire need case approval for his health coverage to be backdated to the first of the month and then ongoing. My client is now able to resume his cancer treatment without any delay due to insurance issues. Recently a new client came to the office for help reviewing her health coverage options for the upcoming year and upon reviewing her financial benefit statement I quickly realized that she qualified for several benefits that she was not currently receiving. I worked quickly to help her apply for these benefits that would help to ease the financial burden that she was currently facing since the passing of her spouse several years ago. The client did not know she qualified for almost \$200.00 extra per month and returned to her along with zero co-pays, deductibles, and premiums for all hospital and medical services. I assisted this client with applying for and getting approved for all these benefits within a short amount of time and she is incredibly grateful for the assistance that she has received through Kentucky Homeplace.

Helping a Family in Need for Christmas as a Community Health Worker, the best part of my job is helping those in need. This quarter, I assisted a client who needed help getting Christmas gifts for her kids. I connected with an anonymous donor I met at the library who wanted to help. After meeting with the donor to pick up the gifts, I delivered them to the client's home. The client was so grateful, and it felt amazing to know her kids will have a happy Christmas. This is just one example of how we can make a difference by working together with others in the community.

As a Community Health Worker, one of my jobs is helping families who need food. This quarter, I signed up two clients for the library's Christmas Dinner Program, which gives holiday meals to families in need. It feels good to help people who are struggling, especially during the holidays. Knowing these families will have a nice Christmas meal makes me proud of the work I do. It's great to see programs like this make a real difference in our community

This quarter, five Thanksgiving food boxes were given out to families in need, complete with hams and all the sides for them to make Thanksgiving dinner. There were also several food boxes that went out this quarter prior to the holiday food boxes.

I have started the reenrollment and renewal of medications for clients for 2025. During this process we are finding new things clients need including glasses and those that will qualify are being put on the shoe list for next year.

This quarter has been busy as it usually is the end of the year. One client came for medication assistance and left with their medication applications being processed along with glasses, food box and on the list for diabetic shoes.

Another family that was seen at the clinic was having medical issues, but it was related to them not having enough to eat and being dehydrated, I was called to come down to meet with them while they were in office and I was able to provide a food box same day and give them ensure supplements also. This family later received a Thanksgiving box, I will continue to work with them to help fill the gap in food assistance.

The first story is about a client referred to by her primary care. She is 70 years old, raising 4 grandchildren, had no insurance, and despite working at the nursing home, was experiencing food insecurities and financial stress. She was unable to take off work to come see me, so I went to the nursing home during her lunch break and enrolled her. The client needed reading glasses but was unable to afford them. I had several new pairs of reading glasses that had been donated to my office, so the client looked through them and chose a pair. The client was unable to take her medications that she needed because they were thousands of dollars a month. I applied to the client for Low Income Subsidy, and she chose a Medicare plan that covered all her medications. I got the client signed up for commodities through the local senior citizens center and got her 2 food boxes to hold her over until she was approved. I was also able to get the client into a Grandparent program through the local senior center that gives Grandparents raising grandchildren financial support monthly.

The second is a client who had just been moved from the nursing home in another state, to an apartment by herself. The client had no transportation or help with homemaking services. The client had not had her laundry or cleaning done in over a month, and she was unable to

prepare her own meals. I applied to the client for Mom's meals and Homemaking assistance, but they said she would be on a 2-3 month waiting list. I went to the client's home and enrolled her. I was able to get the client a food box and take it to her house while I waited to hear back from her Mom's Meals. I talked to the local senior citizens center, and they were going to get her meals and homemaking services within 2 weeks. The client now gets frozen meals delivered to her home weekly, as well as a nurse who comes out and does homemaking services, cooks, and runs her errands as needed.

I was preparing a Diabetic Shoe Day and there was a un housed lady that was wandering around outside my office every day. She had ragged shoes on and she walked all day long. She started talking to me and told me she was a diabetic and her feet hurt. I found out she had been sleeping on the sidewalk. I asked her who her doctor was and gave her forms to get filled out for some diabetic shoes. She came to Diabetic Shoe Day with her signed forms and insurance cards. She chose some boots to wear for the winter. She came back on delivery day and got her boots.

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