

**UNIVERSITY OF KENTUCKY**

*Kentucky Homeplace*

**Quarterly Report October 1, 2010 – December 31, 2010**



***Kentucky Homeplace***

***2008 National Rural Health Association Program of the Year***

*<http://www.mc.uky.edu/ruralhealth/homeplace.asp>*

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Front page photo: Elk Herd on Lost Mountain, courtesy of photographer John Paul Stidham, Security, UK Center for Excellence in Rural Health, Hazard

# Kentucky Homeplace

My Fellow Kentuckians:

Kentucky Homeplace Family Health Care Advisors work diligently educating clients on chronic disease management and healthier lifestyles. We stress preventative care through timely medical screenings, nutrition, exercise and lifestyle changes. While we can't show the impact of educating and changing behaviors in the summaries, longevity and quality of life will be enhanced through our efforts and presence in communities.

## ***Quarterly Summary***

Here's a summary of services for this quarter, October 1 – December 31, 2010: the number of unduplicated clients served was 4,272; the amount of medications accessed was \$5,206,313; other services values accessed totaled \$793,501; and number of services was 100,491. The top client medical conditions included hypertension, high cholesterol, diabetes, heart disease and mental health.

The entire quarterly report is posted on the UK Center for Excellence in Rural Health's Web page for your review at <http://www.mc.uky.edu/ruralhealth/>. The report is found on the left side of the page; click on Kentucky Homeplace, scroll to the bottom of the page and click on Quarterly Reports and then click on October - December 2010. If you still wish to have a printed copy, please call 1-800-851-7512 or email me at [fjfeltn@uky.edu](mailto:fjfeltn@uky.edu).

Sincerely,

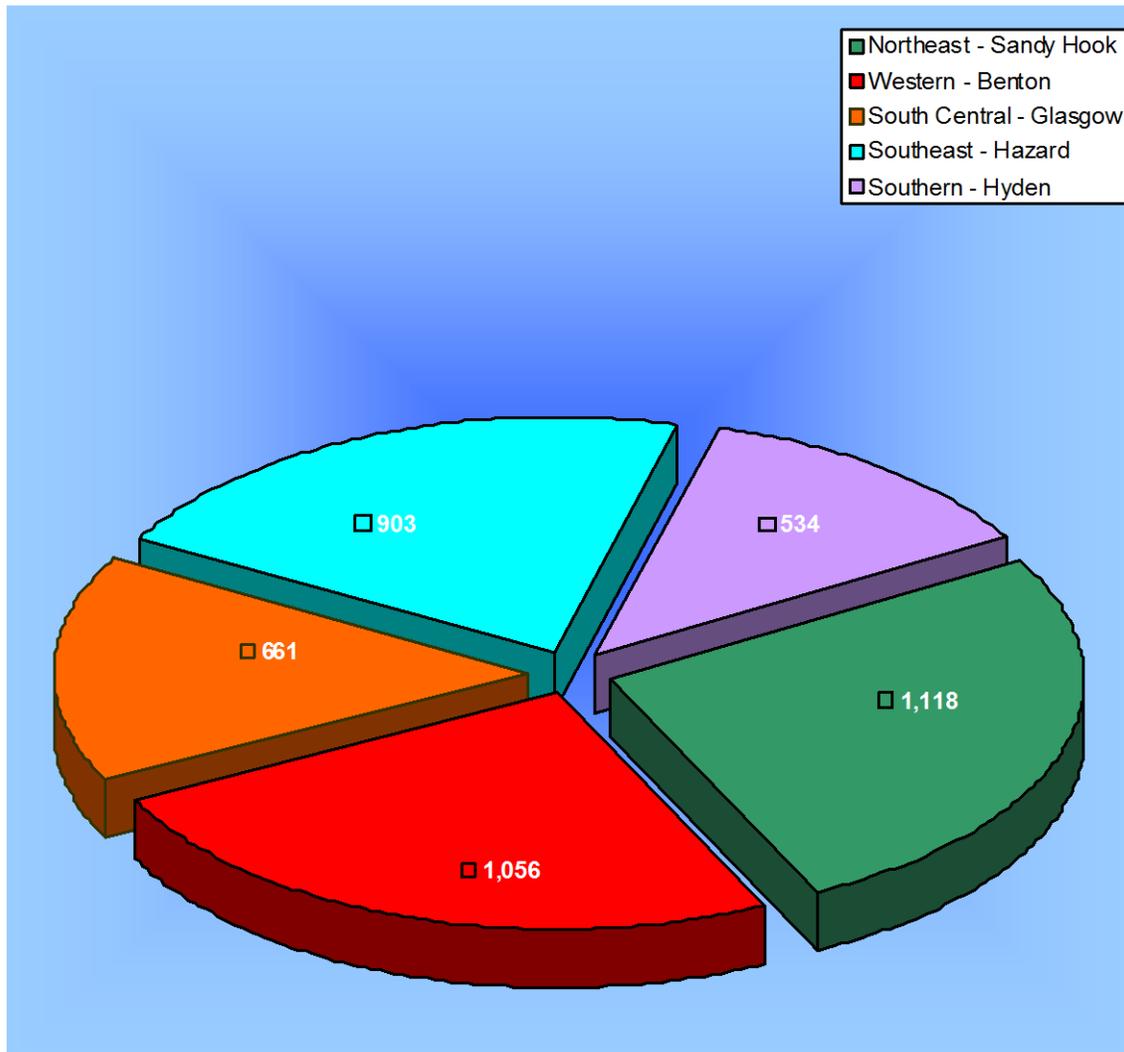


Frances J. Feltner, MSN, RN  
Director, Lay Health Workers Division  
Interim Director, UK Center for Excellence in Rural Health

<b>POVERTY LEVELS OF HOMEPLACE CLIENTS</b>								
<b>OCTOBER – DECEMBER 2010</b>								
Members	100%	101-133%	134-150%	151-200%	201-250%	251-300%	300+%	Total
1	819	274	115	167	55	16	16	1,462
2	703	339	188	376	133	50	25	1,814
3	290	79	19	72	15	4	1	480
4	178	48	17	18	4	3	0	268
5	89	11	4	8	1	0	0	113
6	34	7	3	5	0	0	0	49
7	12	2	0	0	0	0	0	14
8	10	0	0	0	0	0	0	10
9	5	0	0	0	0	0	0	5
11	0	1	0	0	0	0	0	1
15	1	0	0	0	0	0	0	1
<b>Total</b>	<b>2,141</b>	<b>761</b>	<b>346</b>	<b>646</b>	<b>208</b>	<b>73</b>	<b>42</b>	<b>4,217</b>
<b>Percentage</b>	<b>50.77%</b>	<b>18.05%</b>	<b>8.20%</b>	<b>15.32%</b>	<b>4.93%</b>	<b>1.73%</b>	<b>1.00%</b>	<b>100.00%</b>
Source: Data extracted from the Kentucky Homeplace database								
*Total Clients 4,272 - Incomplete income data on 55 clients								

<b>AGE DISTRIBUTION OF HOMEPLACE CLIENTS</b>		
<b>OCTOBER – DECEMBER 2010</b>		
CATEGORY	FEMALE	MALE
UNDER AGE 1	0	1
AGES 1 TO 4	1	1
AGES 5 TO 12	9	7
AGES 13 TO 14	3	2
AGES 15 TO 19	18	9
AGES 20 TO 24	55	39
AGES 25 TO 44	499	293
AGES 45 TO 64	1,487	925
AGES 65 TO 74	340	258
AGES 75 TO 84	158	90
AGE 85 AND OVER	50	22
<b>TOTALS</b>	<b>2,620</b>	<b>1,647</b>
<b>Median Age:</b>	<b>53.8</b>	<b>54.2</b>
Source: Data extracted from the Kentucky Homeplace database		
*Total Clients 4,272; incomplete data on 5 clients		

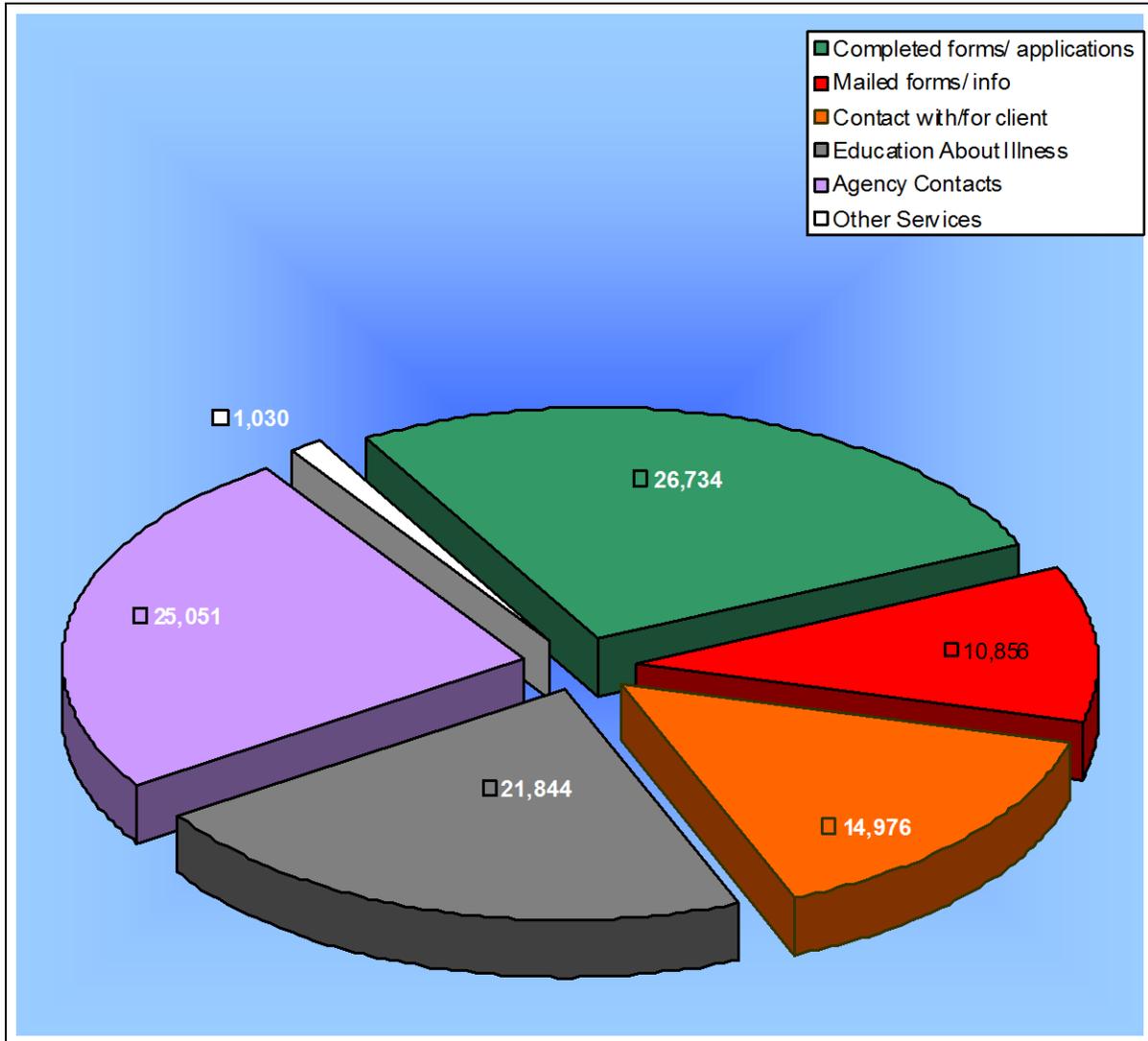
## Total Clients Served By Region October 1, 2010 – December 31, 2010



### **TOTAL UNDUPLICATED CLIENTS FOR QUARTER: 4,272\***

\*This total represents unduplicated clients seen this quarter– in the regional summaries, some clients are seen more than once each quarter or are seen by multiple FHCAs and that duplicated number is reflected in their summaries.

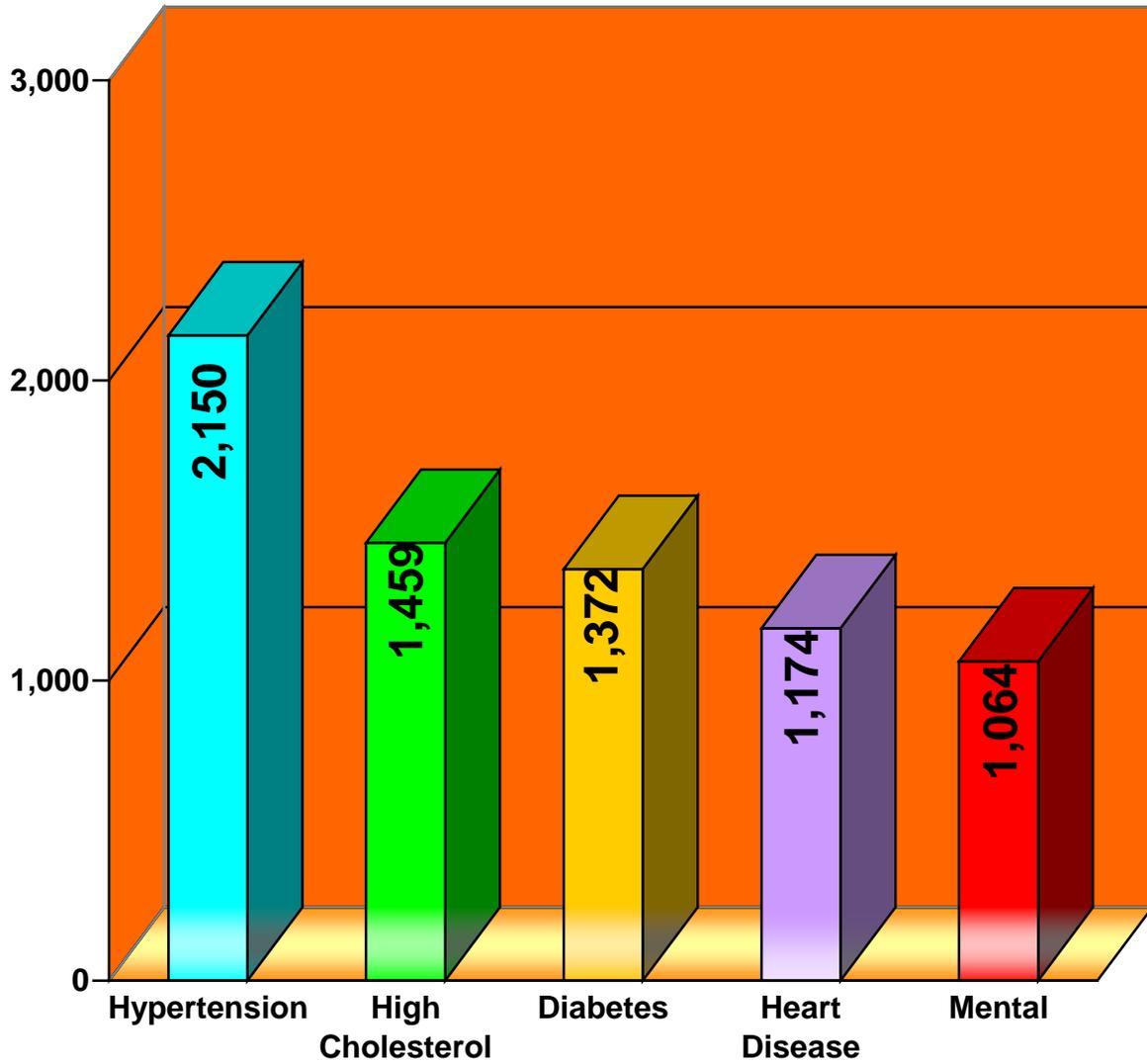
## Client Services October 1, 2010 – December 31, 2010



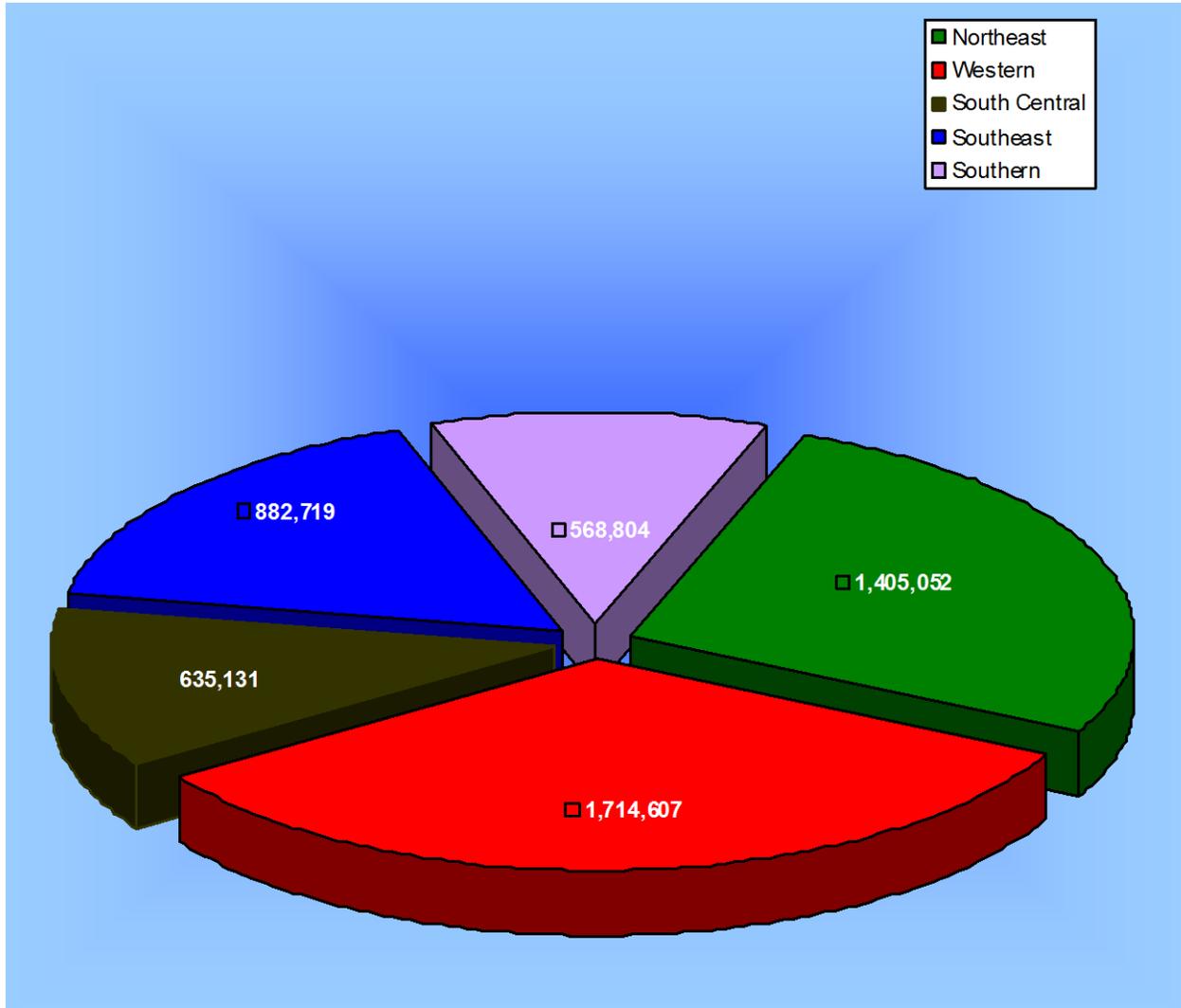
**TOTAL FOR THE QUARTER: 100,491**

There were 176 home visits made this quarter; this number is included with the client contact numbers shown above.

## Top Five Client Problems By Condition October 1, 2010 – December 31, 2010

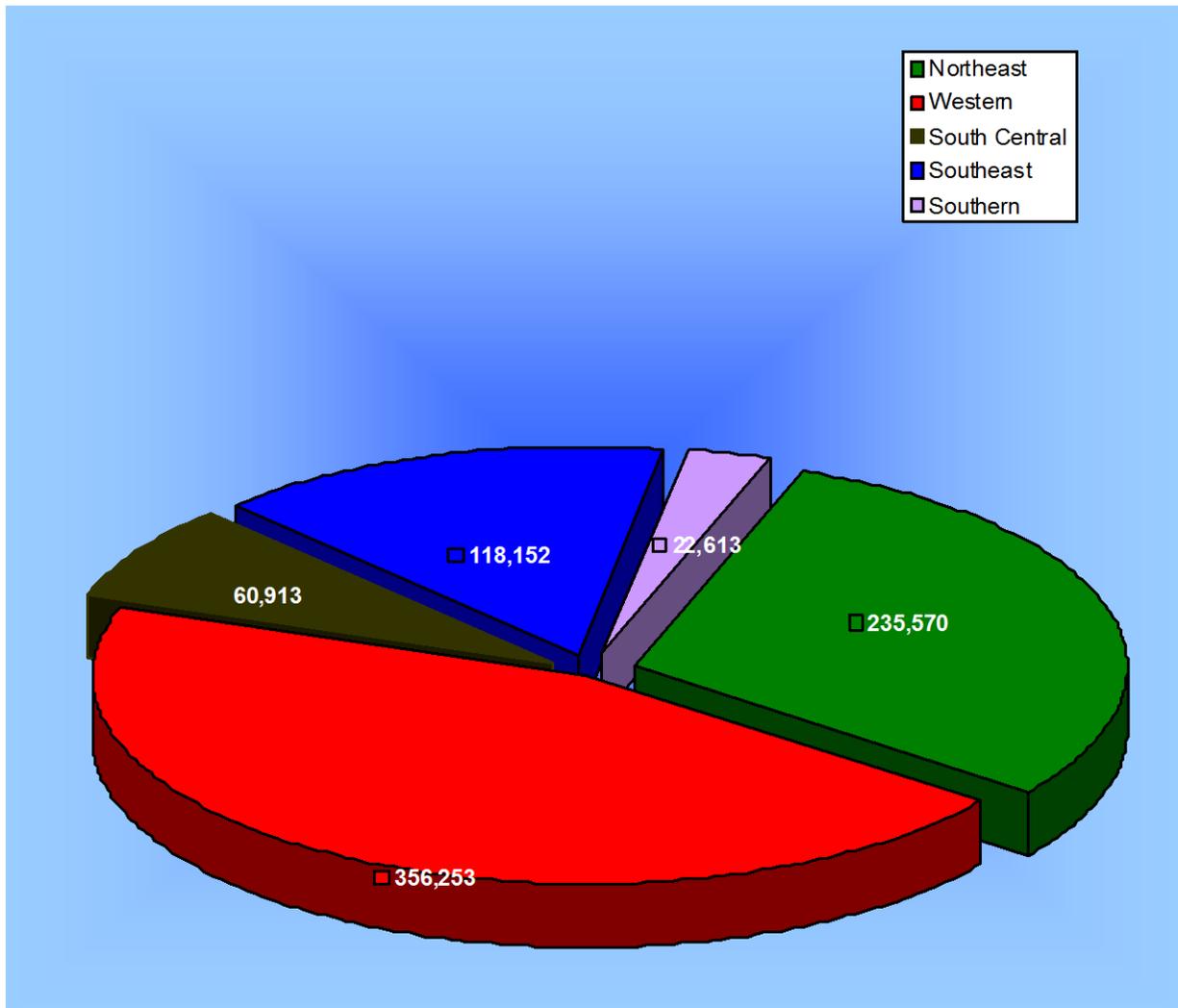


## Client Medications Value October 1, 2010 – December 31, 2010



**TOTAL MEDICATION VALUE: \$5,206,313**

## Client Services Value October 1, 2010 – December 31, 2010



**TOTAL SERVICES VALUE: \$793,501\***

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

## REGIONAL SUMMARIES

### Northeast Region

**Janet Kegley**

**Lana Bailey**

**Lela Adkins**

**Angela McGuire**

**Elizabeth Smith**

**Shirley Prater**

**Judy Bailey**

**TBA**

**Regional Coordinator**

**FHCA (Greenup)**

**FHCA (Bath, Rowan)**

**FHCA (Lawrence, Martin)**

**FHCA (Carter)**

**FHCA (Elliott, Morgan)**

**FHCA (Johnson, Magoffin)**

**FHCA (Menifee, Montgomery)\***

\*Lela Adkins currently covers these counties

This quarter our Family Health Care Advisors served 1,121 clients. A total of 28,409 services were provided to these clients, with service values of \$235,570. In addition, \$1,405,052 worth of medication was accessed on their behalf. The quarter was busy for everyone in the Northeast Region. With the decline in the economy, we have seen an increase in the number of clients for each county.

The Northeast Region attended the Medicare Fraud training on how to assist our clients if they should have a problem in this area. Lana Bailey, Greenup County FHCA, works with the Greenup/Boyd Free Clinic each week to provide Homeplace services for those that come into the clinic for treatment. Lela Adkins, FHCA for Rowan, Bath, Menifee and Montgomery counties started seeing patients from the Bath County New Hope Clinic this quarter. Lela attended the Rowan County Health Fest and the Gateway Policy Council Meeting in Morehead.

Beth Smith, Carter County FHCA, travels to Olive Hill to meet clients that are unable to drive the long distance to Grayson. Judy Bailey, Johnson and Magoffin counties FHCA, worked with the Salvation Army to assist families with food, clothing and toys at Christmas time. Judy also works with the free clinic at the Magoffin County Health Department each month.

Shirley Prater, Elliott and Morgan counties FHCA, attended a presentation with the Elliott County Health Department on the dangers of bedbugs and also attended the Gateway Policy Council Meeting in Morehead. Each FHCA attends the Interagency Meetings in their home county.

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### Southeast Region

**Ralph Fugate**

**Paul Vance**

**Julia Keene**

**Barbara Justice**

**Pollyanna Gilbert**

**Kathy Hamilton**

**Regional Coordinator**

**FHCA (Knott)**

**FHCA (Breathitt)**

**FHCA (Pike)**

**FHCA (Wolfe, Powell)**

**FHCA (Floyd)**

This quarter our Family Health Care Advisors served 905 clients. A total of 16,244 services were provided to these clients, with service values of \$118,152. In addition, \$882,719 worth of

medication was accessed on their behalf. FHCAs held Community Health Day events in Breathitt and Wolfe counties. Diabetic Health Day was held in Breathitt, Wolfe, Floyd, and Pike counties. FHCAs attend interagency and community action meetings in their counties. Kathy Hamilton started meeting with the Floyd County Health Department clients on the second and last Wednesdays of the month to assist them with their needs.

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**Southern Region**

<b>Helen Collett</b>	<b>Regional Coordinator</b>
<b>Michelle Ledford</b>	<b>FHCA (Clay, Jackson)</b>
<b>Brenda Harris</b>	<b>FHCA (Bell)</b>
<b>Linda Thacker</b>	<b>FHCA (Lee, Owsley)</b>
<b>Shirley Madrey</b>	<b>FHCA (Harlan)</b>
<b>Paul Frederick</b>	<b>FHCA (Knox)</b>
<b>Marcy Carson</b>	<b>FHCA (Laurel)</b>

This quarter our family health care advisors served 541 clients. A total of 8,852 services were provided to these clients, with service values of \$22,613. Medication value accessed totaled \$568,804 in this service area.

We welcomed two new FHCAs in the Southern Region: Marcy Carson, Laurel County FHCA, joined us in October; and, Brenda Harris, Bell County FHCA, joined the program in December. We are pleased to have them aboard.

The FHCAs attended interagency meetings in their communities. In December, Regional Coordinator, Helen K. Collett, helped with the Wildcat Warmth clothing distribution in Hazard.

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**Western Region**

<b>Sherry Morris</b>	<b>Regional Coordinator</b>
<b>Donna Hooper</b>	<b>FHCA (Fulton, Hickman and Carlisle)</b>
<b>Angelic Carpenter</b>	<b>FHCA (McCracken, Ballard)</b>
<b>Mary Beth Rohrer</b>	<b>FHCA (Graves)</b>
<b>Tessa Vail</b>	<b>FHCA (Marshall, Livingston)</b>
<b>Carla Gray</b>	<b>FHCA (Calloway)</b>
<b>Rhonda Wadsworth</b>	<b>FHCA (Lyon, Caldwell)</b>
<b>Jerrell Rich</b>	<b>FHCA (Webster, Union and Crittenden)</b>
<b>Jacqueline Anderson</b>	<b>FHCA (Christian, Trigg)</b>

The Western Region provided 32,022 services to 1,077 clients. They accessed \$1,714,607 in medications and \$356,253 in other services. FHCAs represented Kentucky Homeplace at a wide variety of events in their communities. We attended interagency meetings, Domestic Violence and Child Abuse Coalition meetings, Relay for Life events, and Breast Cancer Coalition meetings. FHCAs also worked with Head Start Organizations, Family Resource Centers, and presented at Diabetes Education classes and area Health Fairs. During this quarter, the Western Region worked hard to educate our clients on the importance of having regular mammograms and helped those in need find access to the screening. We worked to provide education to our clients on diabetes and also flu vaccinations.

We would like to welcome the newest member of the Western Region, Miss Ivie Hope Vail, to our Homeplace family. Ivie is the daughter of Tessa (Marshall and Livingston FHCA) and Andy Vail.

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**South Central Region**

**Beth Wells**  
**Janice Compton**  
**Sharon Cherry**  
**Lisa Lack**  
**Jeanene Williams**  
**TBH**

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

This quarter our FHCAs served 731 clients. A total of 14,984 services were provided to these clients, with service values of \$60,913 and \$635,131 of free medication provided in this service area.

Janice Compton participated in a health fair sponsored by the Monroe County Diabetes Coalition in November at the Monroe County Wellness Center. There were several booths with Diabetes information. Free A1C tests were provided and a 16-year-old who suffers from diabetes served as guest speaker; approximately 65 people participated in the event. Gina Reid with the Barren County Health Department provided the South Central staff with a review of health department services and an update regarding changes to the women's health programs to allow us to better meet our mission of preventative care referrals for our clients.

**Client Encounters**  
**Actual situations encountered by**  
**Family Health Care Advisors October - December 2010**

An elderly couple walked into my office to ask if our program could help them. I could tell they had little or no expectations of getting help with their medications. They had been to several agencies in the area and had been told that they made too much money for assistance. We did a quick tally of their household expenses and found that just normal utilities took over half of their monthly income.

After speaking to them, I realized that they didn't have any food in the house and had been doing without most of their medications. I asked them about going to the area food bank, but they said that their income was \$20 over the limit for assistance there. I called another food bank and explained the couple's situation and they agreed to provide them with groceries.

They qualified for assistance with their medications and now receive all of them, except one, through Patient Assistance Programs. The couple stops by or calls on a regular basis to tell me how much they appreciate Homeplace and that we have no idea how much better their lives are now, with our help.

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I had a 56-year-old gentleman come to my office for assistance with his medications. He has filed for his disability and the only income the family has is the wife's wages of \$1,530 per month. They couldn't afford to pay for his medications. I enrolled him in the patient assistance programs for his medications, which would have cost him \$2,500 a month.

While doing his initial enrollment and assessment, I learned he has many health problems, including Type I diabetes, heart disease, neuropathy, and high cholesterol. He could not seem to get his diabetes under control. He's 6' 3" and weighs 406 lbs. and his A1C is 12. He said his mother died from diabetes and heart problems. I knew about a diabetic learning session in his county and asked him if he would be interested in attending. He agreed to attend, and I called to get him registered for the class. I gave him educational information on A1C, the power to Control Diabetes, and Living with Stress and Diabetes, and guidelines for good and bad cholesterol.

I found out he didn't have a diabetic glucometer to keep a close check on his blood sugar. I contacted a local agency who agreed to purchase it for him. He told me he was having problems with his eyes and had not had new glasses for more than five years. I called the local Lions Club and they agreed to pay for the exam and new eyeglasses. I then called and scheduled him an appointment with the optometrist for the exam and glasses.

Several weeks later, I received a call from my client who said he had received his glasses and some of his medications. He was so appreciative for all my help. He also had started attending the Diabetes Learning Sessions and said they had been very helpful and had motivated him so much. He said he's learned how to start exercising in different ways, without having to walk and being in pain. He said he's thankful for Kentucky Homeplace and all my hard work.

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This quarter I have had many clients that didn't have a family doctor or a medical home. I have worked with a local physician to get them medical care. I had a client that didn't know that she was diabetic until she was diagnosed during an office visit. I was able to assist her with getting her medications and working with her doctor, she got her diabetes under control. She called to update me on her condition and couldn't say enough about our program and how we had helped her. She said that she had lost her job because of absences due to her illness. After getting her diabetes under control, she is now working and providing better for her family.

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I received a call from an employee from the local nursing home and rehabilitation facility who asked if I would be able to assist a resident with hearing aids. I told her about the Hear Now Program and that I would need to get information from the patient to be able to get the paperwork started.

I made a visit to the client and did the enrollment. The staff provided me with proof of income and I explained that the client would need a hearing screening. They told me that the client is a quadriplegic and must remain flat on his back because of nerve and spine damage. After discovering this information, I came back to the office and called a Hearing and Speech Center in a larger city and spoke with their representative. I asked if there would be a problem bringing the client there on a stretcher in an ambulance. The representative explained that the screening is done in a sound proof booth and that they would have to improvise but would gladly do so for the client. I called the nursing home and their representative said she was going to ask the Board of Directors at the center to pay for the screening because the client couldn't afford it. The Board agreed to pay for the \$90 screening and to pay \$125 for each of the hearing aids. The screening has now been completed and the hearing aides have been ordered.

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A current client came into the office to update their enrollment for the following year. As we finished completing his paperwork, he told me that he had brought along a friend who also needed Homeplace's help.

I started her interview and enrollment. While doing her medical screening, she said that she was a diabetic but hadn't taken her medication in almost a year because she couldn't afford it. When I asked what her medications she took, she couldn't tell me what they were. I then called her doctor to see if they could fax me a list of her medication. They informed me that she had not been seen in nearly a year and that she would have to see the doctor before any paperwork could be signed.

She didn't have any insurance or money to pay for a doctor's visit. I called a local free clinic that takes care of people that have no medical insurance. The receptionist at the free clinic made an appointment for her on their next open day.

She came back to my office on the day of her doctor's appointment. We applied for a program where she was able to get her medication the same day at a pharmacy at no cost to her. Before leaving my office she said that the clinic had told her that if it wasn't for me, she wouldn't have gotten an appointment for several months.

---

The number of people who don't realize that there is help for prescription drug coverage is overwhelming. This quarter I saw a 45-year-old man and his wife. He was suffering from Stage 4 Renal Cell Carcinoma. The tears in his wife's eyes told their own story of heartache and despair. He had a Medicaid card at the beginning of his treatment, but after being deemed disabled, he had lost his prescription and medical coverage. He would have to wait two years before receiving his Medicare benefits and that was something he couldn't wait for in his condition. The cost of the medications that he had to have had taken all his savings. Family members were doing all they could to help, but in this financially difficult time, it was very hard to take money from them. He told me that he had always worked and made a good living and didn't realize how fortunate he had been to have good insurance.

As I looked at his long list of medications, several being very expensive, I knew that these would cost close to \$2000 a month. I could see how it wouldn't take long for lifetime savings to disappear. I started researching pharmaceutical programs hoping to find assistance for this young man and his family. Fortunately, there were programs to help with the medications. I explained to him that he could also get assistance with his past medical bills by applying for a spend-down card. These wonderful people felt relief and hope when we finished.

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A seventy-year-old man walks shyly through my office door seeking assistance for eyeglasses and a job. He said that one of the local agencies had referred him to Kentucky Homeplace. He was very embarrassed and asked if he could tell me why he is in such need. He had discovered that his home had been sold for nonpayment of taxes and he would have to move out by the first of the year. He either had to pay \$10,000 or lose his farm that had been in the family for over 80 years. He had had three open heart surgeries during the past 10 years and had many family problems.

I was able to get him eyeglasses through a program very quickly and later a job through the 55 years or older recruitment funded by stimulus money. He is on several waiting lists of low income and public housing apartments and one should be available before January. I also enrolled him for food stamps, and for Low Income Heating Assistance Program (LIHEAP).

He said he had never had to ask for help before and wasn't expecting to receive any help. He didn't know that so much was available and was grateful for what I had done for him.

---

This tale is a little different from my other stories. I have a client that has just touched my heart like none other. She is from a simple family but always has been polite and appreciative of everything she has ever had. She currently takes care of three households; her own home, her parents' home and her aunt's home – they are all elderly, sick and unable to handle their affairs.

Her husband worked at a local grocery store for 33 years before the store closed. He had no retirement fund with them and was receiving unemployment, which was their only income. I referred him to a program that helps with furthering your education and he qualified for the program. He started taking plumbing technology classes at the local community technical college. He had hopes of opening his own family business with his two of his sons. At the end of the second semester, he had a massive heart attack and had to quit school. Because he was no

longer able to work, his unemployment benefits stopped. This left the family with zero income and eligible for only food stamps.

There are several organizations in the community that help people in need around the holidays, especially those with minor children or senior citizens. Other needy families don't have a lot of resources. I am a member of an organization of women helping the community. We pick up trash along certain parts of town, donate money to other organizations to help with beautification of the town, assist with fairs and festivals that come in the area, give scholarships to graduates and buy special gifts for children in need at Christmas. I asked this group to help this family at Thanksgiving. They agreed to purchase a full course meal from a local deli so the family could have a good dinner. We notified the family of the gift and details about picking up the food.

After the holiday, I saw this family at the grocery store and she almost knocked me over in excitement. She hugged me and expressed thanks for the food and talked about how wonderful it had been to have the dinner. They had thought that their Thanksgiving meal was going to consist of sweet potatoes that she had received from the food bank, but instead they received this gift.

Then she said, most of all, she loved me. I am just a Family Healthcare Advisor, I thought to myself; but she saw me as her friend. Her husband said he was so surprised at the amount of food they received. He thought they would get enough for one meal, but there were so many leftover's that they ate on it for several days.

That was one of the most wonderful feelings I have had, but it's not just me, it was Kentucky Homeplace. Without this program, so many people would be struggling much more than they are now, even for food. Times are tough in our community, and I am so grateful to be a part of Kentucky Homeplace; the experience has been so rewarding.

---

I had an elderly gentleman come into my office on a scheduled visit. This man is legally blind and had to be led by his wife. They, like many others that live on a fixed income, cannot afford any insurance for their medications. They did not qualify for the low income subsidy through social security, because their income was just above the qualifying limit.

They had previously sought help with the patient assistance programs at another facility. I started going through the client's medications and asking what he had been receiving through the program. He had only been getting help with two of his medications. He had been paying for the others and some didn't have a generic formula available, so he had paid the full price. I found three additional medications that were available on programs. I told my client that he would now be receiving the other three as well. He said he had never been told the others were available. On leaving my office, he extended his hand and said "From now on, I am coming to you; have a very Merry Christmas."

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A client in his early 30's had not worked for the last year and it was obvious that he was in great need of dental work. I told him about the Remote Area Medical (RAM) program where he could get help with his teeth. I gave him the directions to the RAM site and instructions on what time to be there. I asked him to give me a call later and just let me know if he attended RAM.

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After RAM was over, he called me back with his report. The dentist at RAM had told him that his teeth were so bad that they were poisoning his system; and, that he had so much infection that he could have died within a short time. They had pulled all of his teeth that day. I made him an appointment to come in to my office so that we could start the process of obtaining his dentures. He was so thankful to me and Homeplace.

---

An 84-year-old female called me in November needing help finding a new Medicare D coverage plan. Her current provider had notified her that they would no longer be carrying her coverage. I did a home visit and enrolled her in the program. Then I called Medicare and got the names of companies that had policies that would cover her current medications. Working with her, we found one that has no monthly payment and her co-payments would cost less. She was so relieved.

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I received a referral for a client that had just lost his job and health insurance. He was unable to afford the payments that would be necessary to maintain his insurance through COBRA. The family income now consisted of his wife's disability check of \$596 a month. He had many medical problems, including heart disease, diabetes, a thyroid condition and hypertension.

He said that his doctor hadn't given him dietary information for his conditions. I gave him educational handouts and they were a big help to him. Later on, I sent him information on the upcoming Diabetes Self-Management classes for the upcoming year. I completed applications for several medications and for his diabetic supplies. During his home visit, I was able to help his spouse complete an application for the low-income subsidy through the Social Security Administration and completed pharmaceutical applications for several of her medications as well.

---

I have a client that I referred to a community health center where they have a sliding fee scale where services are based on income. She had recently moved to this area, had no insurance and didn't have a medical home. Prior to moving here, she was told she needed to have some tests run on her heart. During her visit to the center, they ran tests and did lab work and found several problems. She was referred for medical services in Louisville, where they discovered additional problems. She will soon have surgery on her shoulder; and following that surgery, will have open heart surgery.

---

I had an 83-year-old female that had Medicare Part D but was in the coverage gap. She needed help with one of her medications but the drug company wouldn't help because she had Part D. I called the Department for Community Based Services and was able to help her get the Qualified Medicare Beneficiary Program (QMB) and food stamps. Even though I couldn't help her get her medication, I was able to help in other ways to make things easier for my client.

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## KENTUCKY HOMEPLACE SITE INFORMATION

ADMINISTRATION	PERSONNEL	TITLE	TELEPHONE	ADDRESS
Kentucky Homeplace 750 Morton Blvd Hazard, KY 41701 606-439-3557, Ext 83654 1-800-851-7512 Fax: 606-435-0427	Fran Feltner, M.S.N., R.N. <a href="mailto:fffeltn@uky.edu">fffeltn@uky.edu</a>	Director of Lay Health Workers Division	606-439-3557, Ext. 83654	Kentucky Homeplace 750 Morton Blvd Hazard, KY 41701
	Margaret Russell <a href="mailto:marussel@email.uky.edu">marussel@email.uky.edu</a>	Administrative Coordinator II	606-439-3557, Ext. 83656	Kentucky Homeplace 750 Morton Blvd Hazard, KY 41701
	Jodi Conley <a href="mailto:jodi.conley@uky.edu">jodi.conley@uky.edu</a>	Staff Support Associate	606-439-3557, Ext. 83515	Kentucky Homeplace 750 Morton Blvd Hazard, KY 41701

SOUTHEAST REGION	FHCA	COUNTY	TELEPHONE	ADDRESS
Ralph Fugate Regional Coordinator 750 Morton Blvd Hazard, KY 41701  606-439-3557, Ext 83684 800-851-7512 Fax: 606-436-0638 <a href="mailto:rfu222@uky.edu">rfu222@uky.edu</a>	Contact: Ralph Fugate Regional Coordinator <a href="mailto:rfu222@uky.edu">rfu222@uky.edu</a>	Letcher Perry	606-439-3557, Ext 83684 800-851-7512 Fax: 606-436-0638	Kentucky Homeplace 750 Morton Blvd Hazard, KY 41701
	Paul Vance <a href="mailto:pvanc2@uky.edu">pvanc2@uky.edu</a>	Knott	606-785-9884 Fax: 606-785-0270	Kentucky Homeplace 59 Cowtown Rd Hindman, KY 41822
	Julia Keene <a href="mailto:jkeen0@uky.edu">jkeen0@uky.edu</a>	Breathitt	606-666-7106 Fax: 606-666-5984	Kentucky Homeplace 1137 Main Street Jackson, KY 41339
	Barb Justice <a href="mailto:bajust0@uky.edu">bajust0@uky.edu</a>	Pike	606-433-0327 fax: 606-433-0440	Kentucky Homeplace P.O. Box 2243 Pikeville, KY 41502 478 Town Mtn Road Pikeville, KY 41501
	Kathy Hamilton <a href="mailto:kha225@uky.edu">kha225@uky.edu</a>	Floyd	606-377-6463 Fax: 606-377-7862	Kentucky Homeplace McDowell ARH Hospital 9879 Rt. 122 PO Box 237 McDowell, KY 41647
	Pollyanna Gilbert <a href="mailto:pshoul1@uky.edu">pshoul1@uky.edu</a>	Wolfe	606-668-7900 Fax: 606-668-3539 877-213-7165	Kentucky Homeplace Wolfe County Courthouse 10 Court Street PO Box 236 Campton, KY 41301
	Pollyanna Gilbert <a href="mailto:pshoul@uky.edu">pshoul@uky.edu</a>	Powell	606-663-8000 Fax: 606-663-8001 877-213-7165	Kentucky Homeplace 68 East Elkins Street Stanton, KY 41301

<b>SOUTHERN REGION</b>	<b>FHCA</b>	<b>COUNTY</b>	<b>TELEPHONE</b>	<b>ADDRESS</b>
Helen Collett Regional Coordinator 22728 Hwy 421 Suite 107 Hyden, KY 41749  606-672-2827 1-888-220-3783 Fax: 606-672-2741 <a href="mailto:collett@uky.edu">collett@uky.edu</a>	Contact: Helen Collett Regional Coordinator <a href="mailto:collett@uky.edu">collett@uky.edu</a>	Leslie Estill	606-672-2827 1-888-220-3783 Fax: 606-672-2741	Kentucky Homeplace 22728 Hwy 421 Suite 107 Hyden, KY 41749
	Michelle Ledford <a href="mailto:kmladf2@uky.edu">kmladf2@uky.edu</a>	Clay Jackson	606-599-1039 Fax: 606-598-4315	Kentucky Homeplace 105 Main Street Manchester, KY 40962
	Brenda Harris <a href="mailto:bjharr2@uky.edu">bjharr2@uky.edu</a>	Bell	606-337-6886 Fax: 606-337-7183	Kentucky Homeplace Total Care 121 Virginia Ave Pineville, KY 40977
	Linda Thacker <a href="mailto:linda.thacker@uky.edu">linda.thacker@uky.edu</a>	Lee	606-464-2156 1-877-847-9821 Fax: 606-464-9420	Kentucky Homeplace 1970 Old Highway 11 PO Box 1540 Beattyville, KY 41311
	Linda Thacker <a href="mailto:linda.thacker@uky.edu">linda.thacker@uky.edu</a>	Owsley	606-593-6023 Fax: 606-593-6087	Kentucky Homeplace 200 Mulberry Street Booneville, KY 41314
	Shirley Madrey <a href="mailto:smadr2@uky.edu">smadr2@uky.edu</a>	Harlan	606-574-0239 Fax: 606-574-9268	Kentucky Homeplace 313 Central Street Harlan, KY 40831
	Paul Frederick <a href="mailto:pfred2@uky.edu">pfred2@uky.edu</a>	Knox	606-277- 0018 Fax: 606-277-0078	Kentucky Homeplace 315 Hospital Drive Suite #1 Barbourville, KY 40906
	Marcy Carson <a href="mailto:marcy.carson@uky.edu">marcy.carson@uky.edu</a>	Laurel	606-878-1950 Fax: 606-878-1598	Kentucky Homeplace 188 Dog Patch Trading Ctr London, KY 40741

<b>SOUTH CENTRAL REGION</b>	<b>FHCA</b>	<b>COUNTY</b>	<b>TELEPHONE</b>	<b>ADDRESS</b>
Beth Wells Regional Coordinator 119 Park Ave. Glasgow, KY 42141  270-659-2893 1-800-890-6368 Fax: 270-659-0456 <a href="mailto:bwell2@uky.edu">bwell2@uky.edu</a>	Sharon Cherry <a href="mailto:scher2@uky.edu">scher2@uky.edu</a>	Edmonson Hart	270-597-2246 1-800-507-2132 Fax:270-597-2317	Kentucky Homeplace Edmonson Health Dept 221 Mammoth Cave Rd Brownsville, KY 42210
	TBH	Allen Simpson	270-237-3168 Fax: 270-237-3179 1-877-661-6956	Kentucky Homeplace 1421 Old Gallatin Rd Scottsville, KY 42164
	Stacy Wiley <a href="mailto:stacy.wiley1@uky.edu">stacy.wiley1@uky.edu</a>	Barren Warren	270-659-2053 Fax: 270-659-0046 1-877-284-1271	Kentucky Homeplace 119 Park Ave Glasgow, KY 42141
	Janice Compton <a href="mailto:jcomp2@uky.edu">jcomp2@uky.edu</a>	Monroe Metcalf	270-487-9354 Fax: 270-487-1357 1-877-284-1272	Kentucky Homeplace 512 West 4th Street PO Box 1088 Tompkinsville, KY 42167
	Lisa Lack <a href="mailto:lisa.lack@uky.edu">lisa.lack@uky.edu</a>	Logan	270-726-8350 Fax: 270-726-8027	Kentucky Homeplace Logan Health Dept 151 South Franklin Russellville, KY 42276
	Lisa Lack <a href="mailto:lisa.lack@uky.edu">lisa.lack@uky.edu</a>	Butler	270-526-6267 Fax: 270-526-4512	Kentucky Homeplace Ashley Plaza, Suite D9 811 Main Street Morgantown, KY 42261

<b>NORTHEAST REGION</b>	<b>FHCA</b>	<b>COUNTY</b>	<b>TELEPHONE</b>	<b>ADDRESS</b>
Janet Kegley Regional Coordinator Senior Citizens Center Main Street PO Box 67 Sandy Hook, KY 41171  606-738-4729 1-888-223-2910 Fax: 606-738-6315 <a href="mailto:jkegl2@uky.edu">jkegl2@uky.edu</a>	Bailey, Lana  <a href="mailto:lbail3@email.uky.edu">lbail3@email.uky.edu</a>	Greenup	606-473-6496 Fax: 606-473-1039	Kentucky Homeplace Greenup Co. Health Dept US Highway 23 PO Box 916 Greenup, KY 41144
	Lela Hickman Adkins  <a href="mailto:lnhi222@uky.edu">lnhi222@uky.edu</a>	Bath Menifee Montgomery	606-674-2728 Fax: 606-674-2729 1-877-660-3750	Kentucky Homeplace 44 Miller Drive Box 6 Owingsville, KY 40360
	Lela Hickman Adkins  <a href="mailto:lnhi222@uky.edu">lnhi222@uky.edu</a>	Rowan	606-783-8997 Fax: 606-783-5063	Kentucky Homeplace SCR Building 316 East 2 <sup>nd</sup> Street, Suite 202 PO Box 605 Morehead, KY 40351
	Angela McGuire  <a href="mailto:amc224@email.uky.edu">amc224@email.uky.edu</a>	Lawrence Martin	606-638-1079 Fax: 606-638-4941 1-877-213-7161	Kentucky Homeplace 108 Bulldog Lane, Rm. 161 Louisa, KY 41230
	Beth Smith  <a href="mailto:easmith123@uky.edu">easmith123@uky.edu</a>	Carter	Phone: 606-474-2742 Fax: 606-474-2592	Kentucky Homeplace 101 Fraley Miller Plaza, Suite B PO Box 546 Grayson, KY 41143
	Shirley Prater  <a href="mailto:sdpr223@ukyu.edu">sdpr223@ukyu.edu</a>	Elliott	606-738-5927 Fax: 606-738-6078	Kentucky Homeplace Senior Citizens Center Main Street PO Box 67 Sandy Hook, KY 41171
	Shirley Prater  <a href="mailto:sdpr223@uky.edu">sdpr223@uky.edu</a>	Morgan	606-743-4005 Ex: 312 Fax: 606-743-4002	Kentucky Homeplace 151 University Drive West Liberty, KY 41472
	Contact: Janet Kegley Regional Coordinator  <a href="mailto:jkegl2@uky.edu">jkegl2@uky.edu</a>	Boyd	606-738-4729 1-888-223-2910 Fax: 606-738-6315	Kentucky Homeplace Senior Citizens Center Main Street PO Box 67 Sandy Hook, KY 41171
	Judy Bailey  <a href="mailto:jbail2@uky.edu">jbail2@uky.edu</a>	Johnson	606-789-4232 Fax: 606-789-3937	Kentucky Homeplace Johnson County Recreation /Community Center 232 Preston Street Paintsville, KY 41240
Judy Bailey  <a href="mailto:jbail2@uky.edu">jbail2@uky.edu</a>	Magoffin	606-349-8842 Fax: 606-349-8841	Kentucky Homeplace Magoffin Co. Health Dept 132 East Mountain Pkwy P.O. Box 1569 Salyersville, KY 41465	

<b>WESTERN REGION</b>	<b>FHCA</b>	<b>COUNTY</b>	<b>TELEPHONE</b>	<b>ADDRESS</b>
Sherry Morris Regional Coordinator Marshall Co Courthouse 1101 Main Street P.O. Box 378 Benton, KY 42025  270-527-4350 1-800-862-0603 Fax: 270-527-4352  <a href="mailto:smorr5@uky.edu">smorr5@uky.edu</a>	Donna Hooper  <a href="mailto:dkhoop2@email.uky.edu">dkhoop2@email.uky.edu</a>	Fulton Hickman Carlisle	270-472-3674 Fax: 270-472-1917 1-877-213-7162	Kentucky Homeplace 350 Browder Street Fulton, KY 42041 PO Box 1198 Fulton, KY 42041
	Angelic Carpenter  <a href="mailto:astor2@uky.edu">astor2@uky.edu</a>	McCracken	270-443-9576 Fax: 270-442-0839	Kentucky Homeplace 1526 Park Ave Paducah, KY 42003
	Angelic Carpenter  <a href="mailto:astor2@uky.edu">astor2@uky.edu</a>	Ballard	270-335-3358 Fax: 270-335-3382 1-877-213-7164	Kentucky Homeplace Ballard County Courthouse P.O. Box 318 132 North 4 <sup>th</sup> Street Wickliffe, KY 42087
	Mary Beth Rohrer  <a href="mailto:mbrohr2@uky.edu">mbrohr2@uky.edu</a>	Graves	270-251-0153 Fax: 270-247-7865	Kentucky Homeplace Annie Gardner Foundation 620 South 6 <sup>th</sup> Street PO Box 575 Mayfield, KY 42066
	Tessa Vail  <a href="mailto:teturn2@uky.edu">teturn2@uky.edu</a>	Marshall	270-527-4351 Fax: 270-527-4352 1-877-847-9822	Kentucky Homeplace P.O. Box 378 1101 Main Street Benton, KY 42025
	Tessa Vail  <a href="mailto:teturn2@uky.edu">teturn2@uky.edu</a>	Livingston	1-877-847-9822	Kentucky Homeplace 509 Mill Street Smithland, KY 42081
	Carla Gray  <a href="mailto:cgray0@uky.edu">cgray0@uky.edu</a>	Calloway	270-767-9829	Kentucky Homeplace 602 Memory Lane Murray, KY 42071
	Jacqueline Anderson  <a href="mailto:jacqueline.anderson@uky.edu">jacqueline.anderson@uky.edu</a>	Christian Trigg	270-887-4311 Fax: 270-887-0621	Kentucky Homeplace Jennie Stuart Medical Ctr 320 West 18 <sup>th</sup> Street Hopkinsville, KY 42240
	Rhonda Wadsworth  <a href="mailto:rwadsworth08@uky.edu">rwadsworth08@uky.edu</a>	Lyon Caldwell	270-365-2415 Fax 270-365-5316	Kentucky Homeplace Trover Clinic 605 S. Jefferson Street Princeton, KY 42445
	Contact: Sherry Morris Regional Coordinator  <a href="mailto:smorr5@uky.edu">smorr5@uky.edu</a>	Webster Union Crittenden	270-527-4350 1-800-862-0603 Fax: 270-527-4352	Kentucky Homeplace Marshall Co Courthouse 1101 Main Street P.O. Box 378 Benton, KY 42025