

UNIVERSITY OF KENTUCKY
Kentucky Homeplace

Quarterly Report
July 1, 2012 – September 30, 2012



The Southeast Region and Homeplace administration honored Knott County's CHW Paul Vance's at his retirement luncheon: Standing: Pollyanna Gilbert, Barbara Justice, Margaret Russell, Cassie Smith, Fran Feltner, Ralph Fugate, Julia Keene and Kathy Hamilton; seated: Paul Vance.

Kentucky Homeplace
2008 National Rural Health Association Program of the Year
<http://www.kyruralhealth.org/homeplace>

TABLE OF CONTENTS

Table of Contents	02
Letter from Homeplace Director	03
July - September 2012, Poverty Level and Age Distribution	04
July - September 2012, Total Clients Served By Region	05
July - September 2012, Client Services	06
July - September 2012, Top 5 Client Problems By Condition.....	07
July - September 2012, Client Medications Value.....	08
July - September 2012, Client Services Value	09
Regional Summaries	10
Client Encounters.....	14

Kentucky Homeplace

My Fellow Kentuckians:

The United States Department of Labor, Bureau of Labor Statistics now recognizes and has classified the Community Health Worker title in category 21-1094. The job duties are described as: “community health workers assist individuals and communities to adopt healthy behaviors. Conduct outreach for medical personnel or health organizations to implement programs in the community that promote, maintain, and improve individual and community health. May provide information on available resources, provide social support and informal counseling, advocate for individuals and community health needs, and provide services such as first aid and blood pressure screening. May collect data to help identify community health needs. Excludes "Health Educators" (21-1091).” *Standard Occupational Classification*. United States Department of Labor: Bureau of Vital Statistics, n.d. Web. <<http://www.bls.gov/soc/2010/soc211094.htm>>.

Kentucky Homeplace’s Community Health Workers (CHWs) title is a reflection of a nationwide trend toward recognizing lay community health worker as an integral part of the health care system. The programs’ CHWs are playing a key role in the emerging health infrastructure that is needed to identify and overcome financial barriers, poor health literacy and cultural competency. Homeplace has always stressed preventative care through timely medical screenings, nutrition, exercise and lifestyle changes.

During these past summer months, Homeplace has provided education on healthy eating habits and increasing physical activities. Education given for diabetes included education on the condition, eye care, foot care, diet and physical activity. Other topics for education given were information on the condition and appropriate diets for hypertension, cholesterol and heart disease. Education on preventative screenings included mammograms, Pap Smears, colon and prostate exams. For clients who wanted to quit smoking or quit any type of tobacco use, education and referrals for cessation classes, support groups and aids were given.

Quarterly Summary

Here’s a summary of services for this quarter, July 1, 2012 – September 30, 2012: the number of unduplicated clients served was 4,231; the amount of medications accessed was \$6,724,635; other services values accessed totaled \$627,918; and number of services was 102,582. The top client medical conditions included hypertension, high cholesterol, diabetes, mental health, and heart disease.

The entire quarterly report is posted on the UK Center for Excellence in Rural Health’s web page for your review at <http://kyruralhealth.org/homeplace>. The report is found under the Reports tab, Quarterly Reports and then click on July – September 2012. If you wish to have a printed copy, please call 1-800-851-7512 or email me at fjfeltn@uky.edu.

Sincerely,

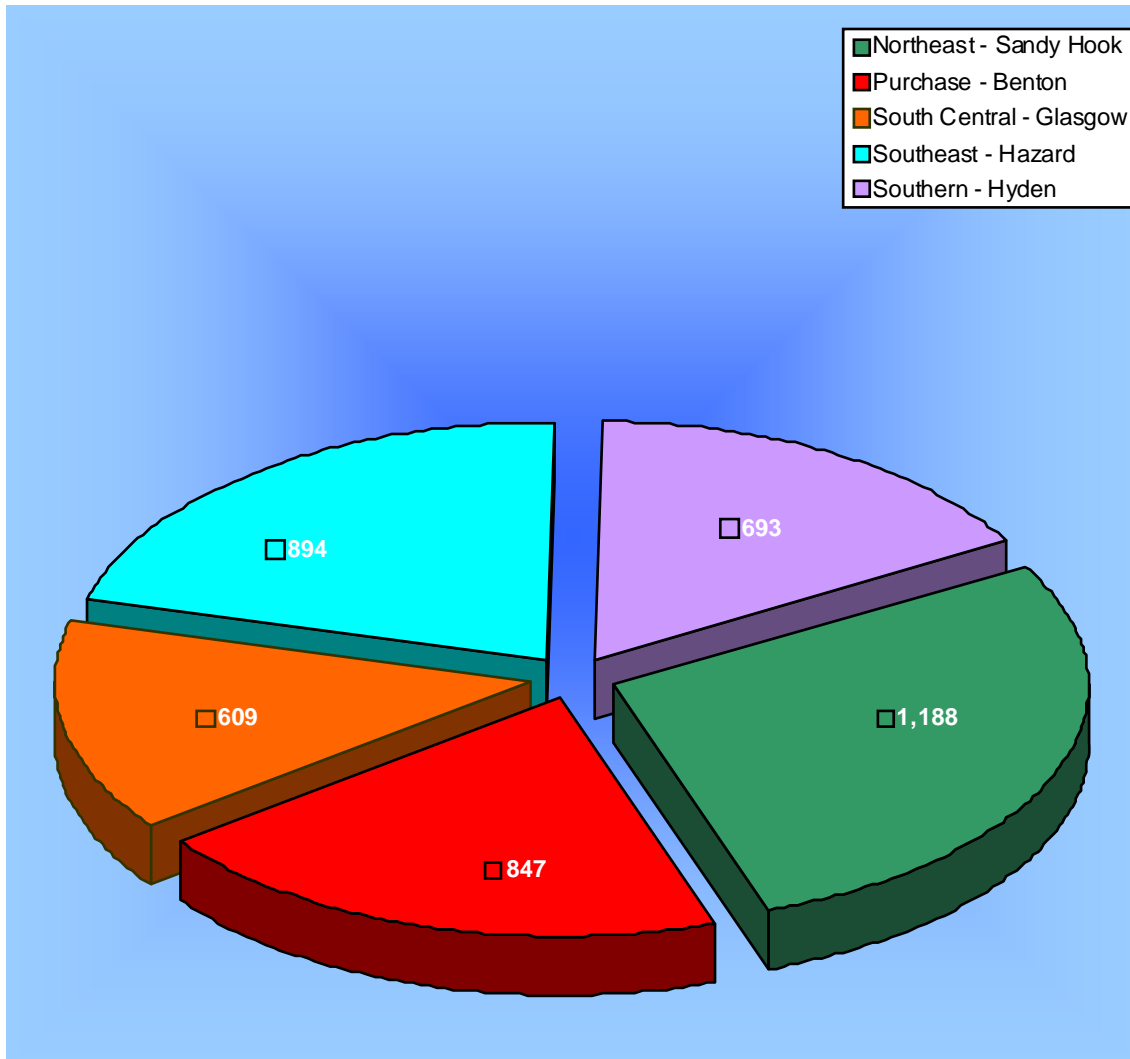


Fran Feltner, DNP
Director, Lay Health Workers Division
Director, UK Center for Excellence in Rural Health

AGE DISTRIBUTION OF HOMEPLACE CLIENTS		
JULY 1, 2012 – SEPTEMBER 30, 2012		
CATEGORY	FEMALE	MALE
AGES 0 TO 4	5	4
AGES 5 TO 12	7	11
AGES 13 TO 14	0	2
AGES 15 TO 19	25	17
AGES 20 TO 24	59	33
AGES 25 TO 44	483	331
AGES 45 TO 64	1,536	957
AGES 65 TO 74	299	217
AGES 75 TO 84	131	76
AGE 85 AND OVER	27	11
TOTALS	2,572	1,660
Median Age:	53.2	53
Source: Data extracted from the Kentucky Homeplace database. Total Clients Data 4,231		

POVERTY LEVELS OF HOMEPLACE CLIENTS								
JULY 1, 2012 – SEPTEMBER 30, 2012								
	100%	101-133%	134-150%	151-200%	201-250%	251-300%	300+%	Total
CLIENTS	2,433	752	309	538	141	34	24	4,231
TOTALS	57.50%	17.77%	7.30%	12.72%	3.33%	.80%	.57%	100%
Source: Data extracted from the Kentucky Homeplace database								

Total Clients Served By Region July 1, 2012 – September 30, 2012

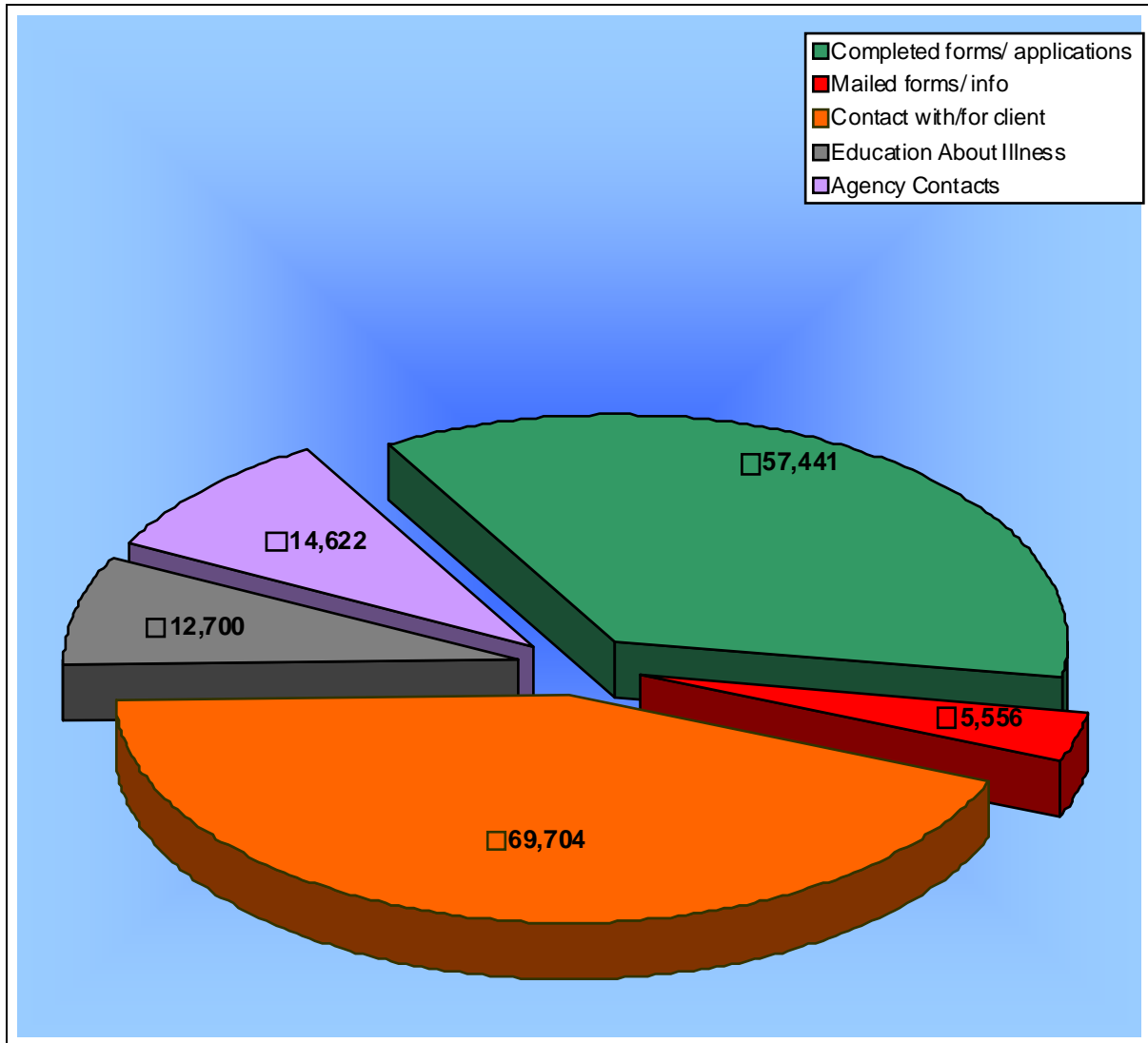


TOTAL UNDUPLICATED CLIENTS FOR QUARTER: 4,231*

*This total represents unduplicated clients seen this quarter. Some clients may be seen more than once a quarter.

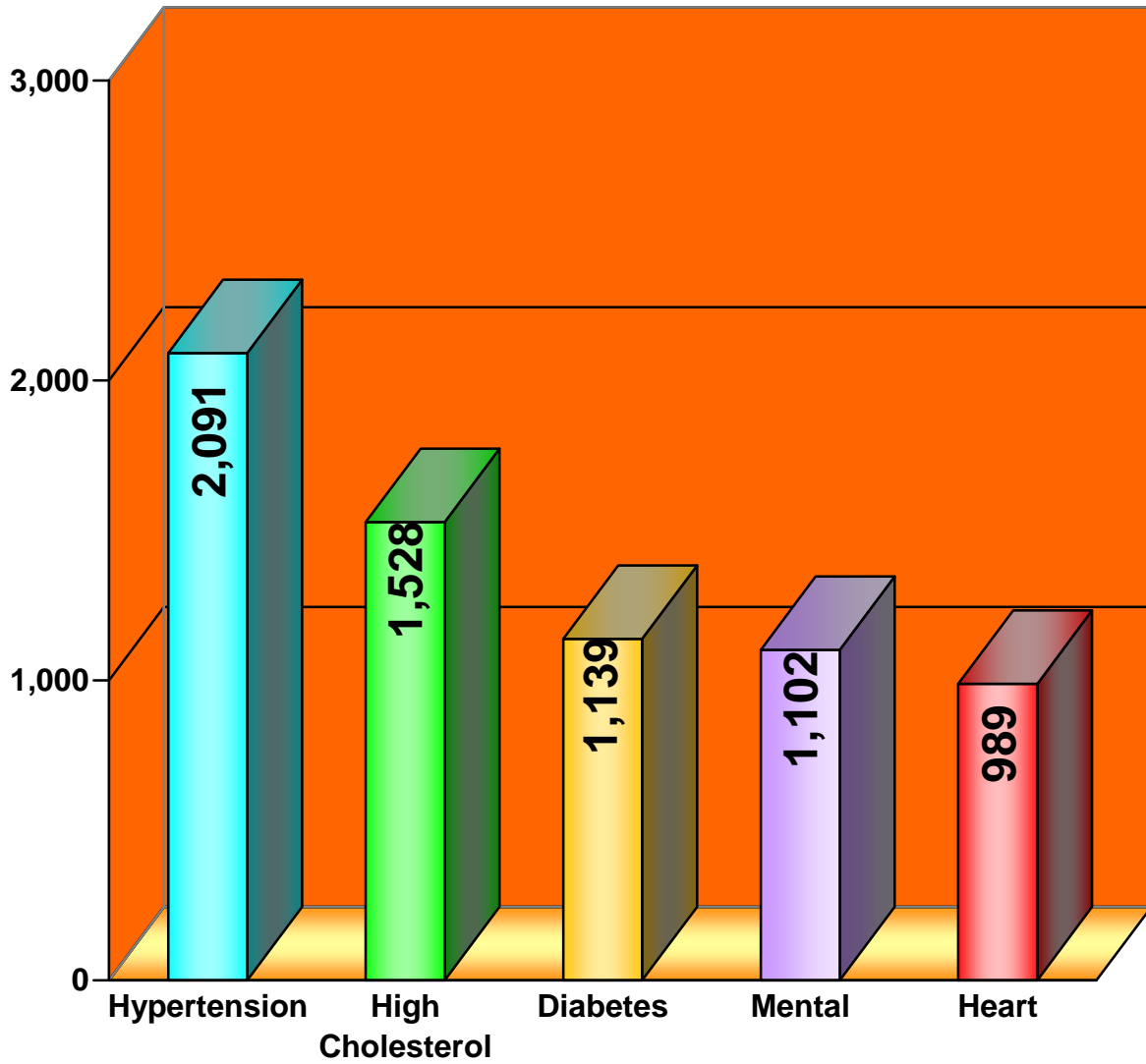
Client Services

July 1, 2012 – September 30, 2012

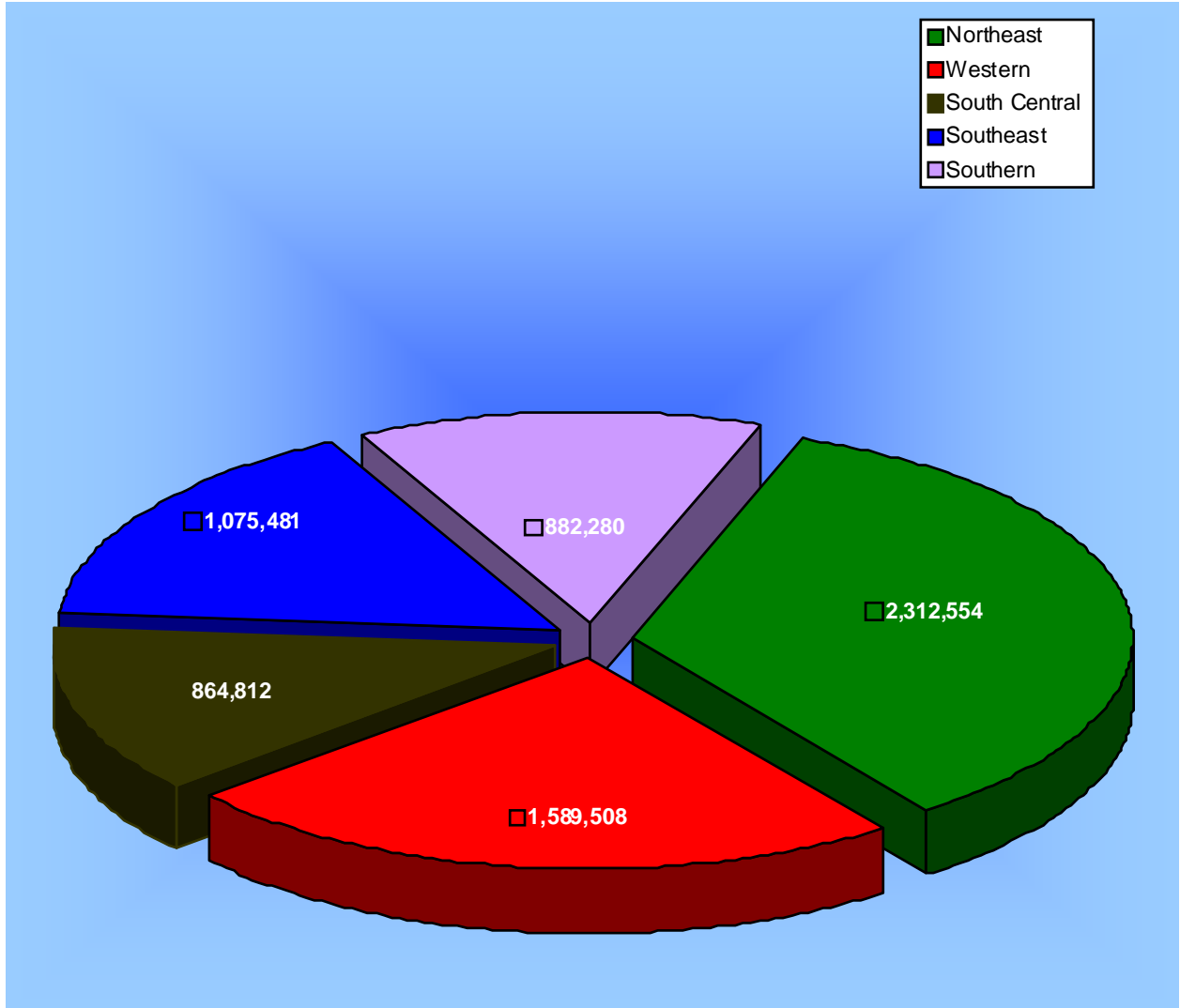


TOTAL FOR THE QUARTER:102,582

Top Five Client Problems By Condition July 1, 2012 – September 30, 2012

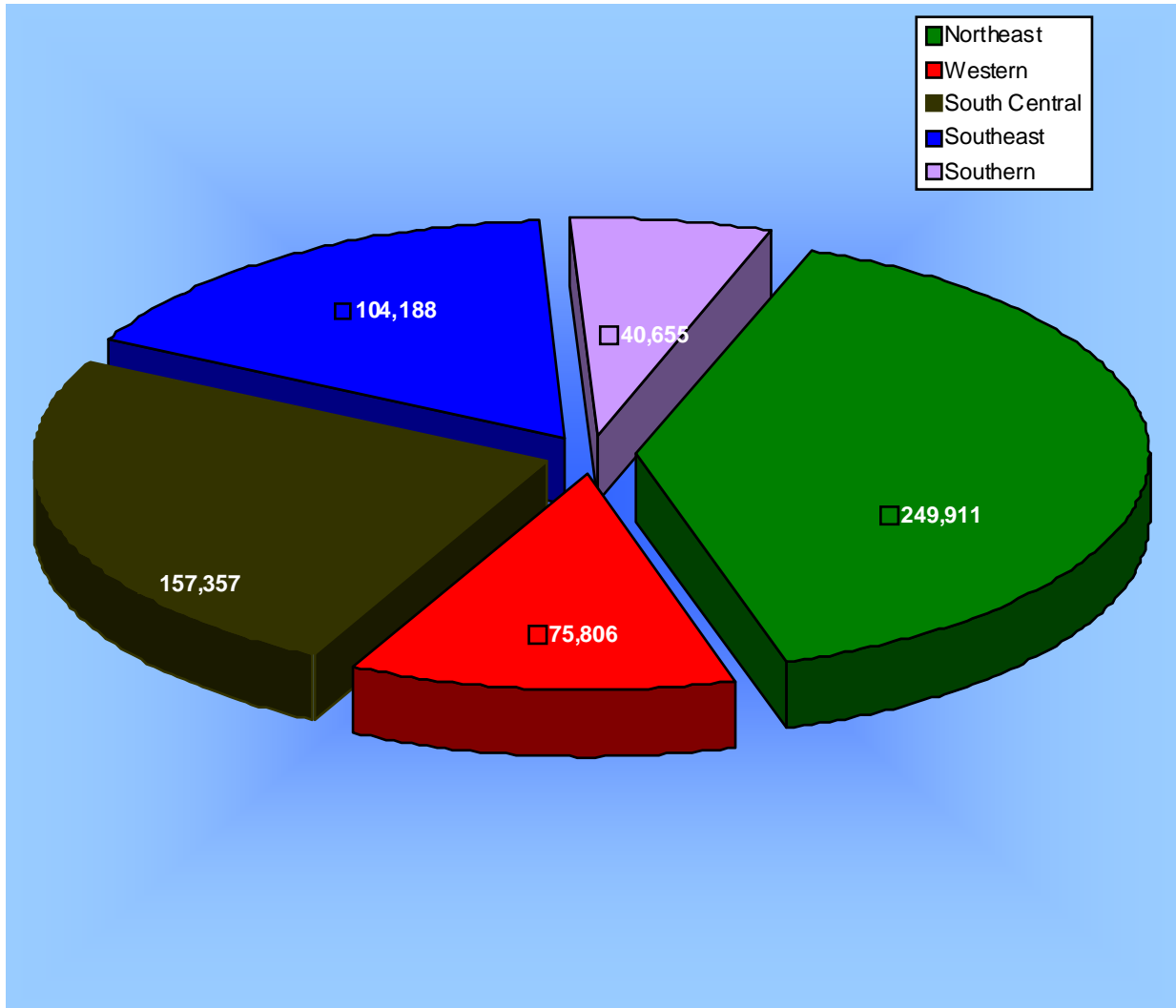


**Client Medications Value
July 1, 2012 – September 30, 2012**



TOTAL MEDICATION VALUE: \$6,724,635

Client Services Value July 1, 2012 – September 30, 2012



TOTAL SERVICES VALUE: \$627,918*

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

REGIONAL SUMMARIES

Northeast Region

Janet Kegley

Lana Bailey

Angela McGuire

Elizabeth Smith

Shirley Prater

Judy Bailey

Regional Coordinator

CHW (Greenup)

CHW (Lawrence, Martin)

CHW (Carter)

CHW (Elliott, Morgan)

CHW (Johnson, Magoffin)

This quarter, the Northeast Region's Community Health Workers (CHWs) served 1,188 clients. A total of 34,892 services were provided to these clients, with service values of \$249,911. In addition, \$2,312,554 worth of medication was accessed on their behalf.

The Northeast Region attended a meeting in Greenup County to begin the process of setting up a weekend for Remote Area Medical (RAM) to come to the northeast region in 2013. The group also attended the *Community Change for Community Health* forum at Morehead State University.

The Northeast Region and Fran Feltner, Director of the Center of Excellence for Rural Health, Willie Bates, Information Technology Manager, Elmer Whitler, Deputy Director/Research Technology and Kelly Riley, Administrative Services Assistant, attended the ribbon cutting ceremony at the Isonville School for the walking track that had been completed. Elliott County now has two new walking tracks and both are shaped in the outline of the state of Kentucky. These tracks will enable those that did not have a place to walk safely, to have access to a place to exercise. The tracks will be a benefit for adults and children.

Each CHW has attended the Interagency meetings in their counties. Lana Bailey assists the Greenup County Health Department with the Diabetes Coalition and the Greenup County Support Group. Angela McGuire is a member of the Lawrence County Diabetes Support Group and the Diabetes Coalition. Angela is a member of the Lawrence County Health Advisory Team and attended the Martin County Interagency meeting.

Shirley Prater helped with the UK/ARH Back to School Bash at the Morgan County ARH Hospital. She also assisted with the Elliott County back to school Redi-Fest. Beth Smith is a member of the Carter County Wellness Coalition at the UK Extension office. She assisted the extension office in doing two grocery store tours, where Homeplace clients and other participants, were taken through the store and taught how to read food labels and given education on diabetes prevention and control.

Southeast Region

Ralph Fugate

Paul Vance

Julia Keene

Barbara Justice

Pollyanna Shouse

Kathy Hamilton

Cassie Smith

Regional Coordinator

CHW (Knott)

CHW (Breathitt)

CHW (Pike)

CHW (Wolfe, Powell)

CHW (Floyd)

CHW (Lotts Creek Program)

This quarter our CHWs served 901 clients. A total of 15,736 services were provided to these clients, with service values of \$104,188. In addition, \$1,075,481 worth of medication was accessed on their behalf.

We would like to recognize and express our appreciation to Paul Vance, Knott County CHW, for his years of service to his community and to Kentucky Homeplace. Paul retired in August 2012; he had been with Homeplace since May 2003. The Southeast Region, along with Margaret Russell and Fran Feltner, recognized Paul at a luncheon and presented him with a rocking chair, a knife, and a weekly list of activities so that he could stay on track in his retirement. Thank you again, Paul, and we wish you all the best.

The Southeast Region welcomed new CHW Cassie Smith, who will be working with the Lotts Creek Program. Her office will be located in the Cordia School in Knott County. This is a new addition to the Homeplace service area.

This quarter, CHW's attended their individual local interagency meetings, as well as meetings on Diabetic Coalitions, emergency planning, and long-term recovery, where assistance is geared toward housing repair for the winter, due to tornado and hail damage.

Our CHW's served on Red Cross Team committees, assisted in Senior Citizens commodity day, and attended Elder Maltreatment and Cancer Coalition forums. Regional Coordinator, Ralph Fugate, attended the Ky Rural Association Health Conference in Bowling Green; the *Community Change for Community Health* forum in Manchester; the annual Kentucky Appalachian Rural Rehabilitation Network (KARRN) conference in Richmond; and the Breathitt County Health Council Forum, which emphasizes the health of Breathitt County children.

Southern Region

Helen Collett

Michelle Ledford

Brenda Harris

Linda Thacker

Shirley Madrey

Paul Frederick

Regional Coordinator

CHW (Clay)

CHW (Bell)

CHW (Lee, Owsley)

CHW (Harlan)

CHW (Knox)

This quarter our CHWs served 693 clients. A total of 14,203 services were provided to these clients, with service values of \$40,655. Medication value accessed totaled \$882,280 in this service area.

Michelle Ledford attended the *Communities for Change Health Forum*, Cardiopulmonary resuscitation (CPR) training and a Social Security meeting. Linda Thacker attended the Lee County Head Start Open House, Diabetes Coalition meeting, Beattyville Housing Board meeting, Early Childcare and Education Council meeting, CPR training and Social Security meeting.

Paul Frederick attended two Knox County Health Coalition meetings, Knox County Interagency meeting, CPR training and a meeting with the Social Security office. Brenda Harris attended “Just about Family Day Care,” CPR training, the Lighthouse Medical Clinic Open House, the Bell and Whitley counties Interagency meetings, Bell County Extension Farm Field Day and a Social Security meeting. Shirley Madrey attended the CPR training, a Benefit Fair in Harlan County, and met with the Social Security office.

Helen Collett, Regional Coordinator, attended two Kentucky Appalachian Rural Rehabilitation Network (KARRN) teleconferences and the KARRN Annual Conference in Richmond. She participated in a conference call with Markey Lung Cancer group; attended CPR training; met with Social Security office; attended the *Community Change for Community Health* forum in Manchester; and, the Benefit Fair in Harlan County.

South Central Region

Beth Wells
Janice Compton
Sharon Cherry
Lisa Lack
Tammy Glass
Vacant

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

This quarter our CHWs served 635 clients. A total of 15,736 services were provided to these clients, with service values of \$157,358 and \$864,812 of free medication provided in this service area.

Beth Wells attended a Regional Coordinators meeting in Hazard and the UNITE *Change this Generation* forum in Bowling Green. She also attended a Policy Training and Records Retention training provided by the UK Center for Excellence in Rural Health. Beth and Tammy Glass participated in the Town Hall meeting sponsored by T. J. Samson Hospital regarding future changes in healthcare and met with the Education Department staff at the hospital to establish a referral process. Our staff members continue to be involved in several community coalitions and initiatives to improve our communities. Sharon Cherry attended the Hart County Healthy Heart meeting and the Edmonson County Community Assessment meeting, Janice Compton continues to attend the Diabetes Coalitions and Vision meetings in Monroe County, and Tammy Glass attended the Networking Neighbors meeting.

Western Region

Sherry Morris

Donna Hooper

Mary Beth Rohrer

Tessa Vail

Carla Gray

Rhonda Wadsworth

Regional Coordinator

CHW (Fulton, Hickman and Carlisle)

CHW (Graves)

CHW (Marshall, Livingston)

CHW (Calloway)

CHW (Lyon, Caldwell)

This quarter the Western Region served 845 clients. A total of 23,484 services were provided to these clients, with service values of \$75,806 and \$1,589,508 of free medication provided in this service area.

The Western Region attended the *Community Change for Community Health* forum that was held in Paducah. In their individual counties, CHW's represented Kentucky Homeplace at meetings with the following agencies: Breast Cancer Coalitions; Head Start; Family Achievement Child Excellence Center (FACE); Interagency meetings; Family Resource Centers; Diabetic Support Groups; Trover Clinic; PrimeCare; Colon Cancer Awareness; Feed the Children Meetings; food distributions; clothing giveaways; Leadership Marshall County, and also presented the Kentucky Homeplace programs to Senior Citizens centers, and the Marshall County Community Health Assessment.

Client Encounters
Actual situations encountered by
Family Health Care Advisors
July 1, 2012 – September 30, 2012

One of my clients recently got a Medicare Part D plan to pay for her medications. This client had been getting her medications with the help of Kentucky Homeplace since 2004. Many times she would tell me that she didn't know what she would do without our program. This client has had asthma for most of her adult life and her medications were very expensive. She came into my office for a visit recently and once again stated how Kentucky Homeplace was literally a life saver for her over the years when she did not have any resources to pay for her medication. Many clients come and go, but some will always make me proud to be a part of Kentucky Homeplace.

The first time I met this client, I knew he was special. He was in need of so many different services and had not seen a doctor in over 15 years. He was frail and looked malnourished. I made arrangements for him to see a doctor that would not charge him for his visit. I sorted through various programs to get lab work and screening tests done for him. After suffering months from stomach pain, my client received a diagnosis of cancer. I called several churches to get money for the trip to Lexington for surgery. I contacted an agency that transports people for medical appointments and set up the travel date. My client had extensive surgery a few days later. I now access nutritional drinks from pharmaceutical companies to help him build back his strength. It took several agencies working together for my client to have a chance at a better quality of life.

My clients were a married couple who had to take early retirement due to health issues. Before they became eligible for Medicare, they were getting all their medications through Kentucky Homeplace. Now, they are on Medicare with Medicare Part D. Between the two of them, they take over thirty medications daily. Both are diabetics, and one is insulin dependent. They depended on our office during the time when they had no insurance. Even with Medicare D, we are still able to assist them with 16 of their medicines. They are both very grateful that they still qualify to get this assistance. Being able to help clients like this couple gives you a great feeling of giving back to your community.

I had a new diabetic client who came in needing assistance in getting insulin. She is currently in the doughnut hole with Medicare D. She was also preparing to have her second hip replacement the following week. She was overwhelmed with both her physical problems and having to deal with her insurance situation. I have been working diligently to obtain the insulin, but it is still a work in progress.

My client was a single mother with three small children. She receives almost no child support and had been laid off from her job. Her unemployment check was less than \$300 a month. She had many medical issues and couldn't afford her medications. She had applied for Medicaid and had been denied. She was referred to Homeplace by her doctor.

After going over her medications, we were able to access them, free of charge, through the pharmaceutical programs. She had thought that she was going to have to do without her

medications that she had to have, in order to provide for her children. She was so grateful for this assistance and for Homeplace.

A client came in needing help with accessing eye drops. He was on a fixed income and was unable to continue to purchase the drops. I looked up the medication and it was covered under a prescription assistance program. The medication had cost over \$300 a month and he had been letting his bills remain unpaid so that he could buy the drops. Now, he can start to catch up on his bills.

I had a home visit with a gentleman who thought he was ineligible for assistance because of his retirement income. While his income was over the limits for some things, he did qualify for medication assistance through the pharmaceutical companies. This assistance is going to make such a difference in his life. He will now be able to take care of his chronic conditions and live a healthier lifestyle.

I had an appointment with a couple that needed help with the husband's medication. When they came for the appointment, I had to go out and do most of the interview from his car. He had a hard time getting in and out of his vehicle, due to having severe back pain. He told me that he had been sleeping sitting up because it was too hard for him to set back up, after lying down. His wife had sleep apnea and she had been sleeping setting up on the couch so she could breath. Neither one of them had any insurance, so he was unable to get a hospital bed.

A few weeks prior to his visit, we had received a donation of a brand-new hospital bed and an almost new lift-chair. I asked him if he could possibly come into my office to finish our interview and to do the forms for his medication. He came in and I walked him to where the chair was and asked him to sit down in it. I then told him that it was a lift-chair, and that he could have it if it would help his situation. I then told him about the bed and that have it, too, so that he would be able to get out of the bed by himself. Both he and his wife just looked at me as if they didn't believe what they were hearing and then they started crying. They had someone come and get the items the same day. I was also able to get almost all of his medications free through the pharmaceutical assistance programs.

It is funny how things work out for our clients. The hospital bed and chair were donated by a very kind man that lived in Ohio who had been so generous that he even delivered it to the Homeplace office here in Kentucky.

I have been serving a client, who had an organ transplant for almost three years. Homeplace had been assisting him with accessing his medications until he was eligible for Medicare D. Now, the client has entered the Medicare gap (donut hole) and is responsible for 100% of his medication costs, which exceeds \$3,000 a month. He must take the anti-rejection drugs that are necessary for his survival. He said he would not be able to access the medications on his own. He has been in and out of the hospital for the past month, unable to afford even his daily needs. We have been able to mediate with the insurance companies on his behalf to access the medications for them.

I received a call from the son of a 76-year-old man who needed assistance with getting hearing aids for his father. I did a home visit and filled out an application for the Hear Now Program.

He qualified for assistance and is getting two hearing aids. After his application was approved, I called the hearing center to make him an appointment.

A young man who had recently moved to Kentucky went to see a local physician for asthma and allergy problems. While he was there, the doctor discovered what appeared to be an indirect hernia and referred him to a surgeon for an evaluation.

The doctor referred him to me to see if Homeplace could help with finding him assistance for his medications and also in seeing if we could help with any assistance for the surgeon's fees. I was able to help with the inhalers and I was able to find a surgeon who would see him for a free consultation. After the consultation, the surgeon agreed to do the surgery for free. The client will also be eligible to apply for financial assistance for the hospital bill.

The daughter of a client called me about her 59-year-old mother, who was ill. She said that they could not afford to purchase some of the medication that she was required to take. She said that Social Services had told her to contact Kentucky Homeplace. She has applied for disability but has not received it yet.

I did a home visit with her mother. She is bedridden, very weak and had to use oxygen. The client was diagnosed with COPD and cirrhosis of the liver; she had just been released from hospital a few days prior to my visit. The hospital had sent the client home with only a seven day supply of medication with her. I completed applications for one medication that is \$1,600 a month and another that is \$1,000 a month. Her daughter had been buying her mother's medications but she could not afford the new ones. The assistance from the pharmaceutical companies will make a major difference in this family's lives.

I have a client that I assisted last year that returned to my office this year, for assistance with a different matter. In the course of speaking with her, she told me that she was still seeing the Advanced Registered Nurse Practitioner (ARNP) I had referred her to and that she was the one that diagnosed her with rare disorder (to protect client identity, name of disorder has been omitted). She had been to several other doctors and clinics with no correct diagnosis; she was continuing to have pain on a daily basis. When the client described her symptoms to the ARNP, she was able to correctly diagnosis her. The ARNP prescribed a medication that has offered relief to my client for the first time in years. Her diagnosis has also helped close family members, with the same symptoms, to be diagnosed at last.

In further conversation with my client, I also discovered she had a total hysterectomy in June of this year. She informed me that our local health department had found cancer cells when I referred her for her Pap smear test last year. They referred her to the Women's Clinic for further testing and discovered she needed a total hysterectomy. She had this done at a local hospital with the entire balance, excluding doctor's fees, being written off through the Disproportionate Share Hospital Program (DSH) program. Today, I completed an application for help with eyeglasses so she can continue her education.

A 67-year-old diabetic woman came into my office with many health problems that needed expensive medications. She only had Medicare A and B, which doesn't cover prescriptions. I

worked with her to get her medications free. I also helped her get a glucometer and strips. As she was leaving my office with tears in her eyes, she told me now she will be able to afford a supplement plan for her insurance.

I had a client come in this quarter that had been homeless for over a year. His aunt and uncle took him into their home and were helping him get back on his feet. They had also helped him see a doctor and since he could not afford his medicine, the doctor sent him to Kentucky Homeplace. I was able to help him get his medicine through the pharmaceutical companies and also help him get eyeglasses. Now he is ready to get a job and start taking care of himself.

The story I have to share is about a child who failed a routine sports physical performed at the school. The doctor had found something unusual about his heart rate. His mom came to me, really worried about what the physical revealed. They had no insurance and had just been turned down for Medicaid coverage. I referred her to a local clinic that had a sliding fee scale and also to a program that could help her with his medications. The mother thanked me several times before she left, and said I had lifted a world of weight off of her shoulders.

This quarter I had an appointment with a gentleman that needed help with eyeglasses. He had Medicaid that covered his exam but he had no funds to obtain his glasses. When he arrived for his appointment, I noticed he took his glasses off and had to get real close to the paper to sign his forms. I asked him if I could look at his glasses and he said I could. After examining them, I noticed the lens were very scratched and the frames were broken. He said he had glued them together the best he could, but they would hardly stay on his face. I completed the New Eyes for the Needy application and mailed everything in for him. Hopefully, he will soon receive his voucher so that he can have new eyeglasses.