

City of Lawrence
Social Service Agency
Bi-annual Report
2013

Reports on activity should be submitted electronically to Casey Toomay, Budget Manger at ctoomay@lawrenceks.org. Reports on activities from January to June are due on July 15th. Cumulative reports on activities from January through December are due on February 15th.

Agency Name: Health Care Access, Inc.

Reporting period: **January - June** (deadline July 15) **January - December** (deadline February 15)

1. Give a brief narrative of the activities that were funded with City funds over the reporting period checked above.

The mission of the Health Care Access Clinic is “to facilitate access and provide health care services for Douglas County residents with limited financial means who are not covered by private or government insurance programs.” The clinic’s top diagnoses include hypertension and diabetes, both chronic conditions that require intensive follow up and usually ongoing treatment. The Clinic asks \$10 per appointment, but does not turn away anyone based on ability to pay. For the period January 1 to June 30, 2013, Health Care Access has served over 4,289 patient visits on-site. This reflects a 16% decrease in number of visits in the same time period for 2012, due to transitions in staffing and our focus on meeting new quality standards. We spent significantly more time with many of those patients to set tangible goals for their overall health outcomes. As we grow more efficient at this process we will again increase the number of on-site visits our two FTE nurse practitioners and volunteer providers do. Our target service population is 14,000 people in Douglas County who cannot afford services at other clinics that have sliding fee scales and payment-up-front requirements; therefore we do not compete with private providers, many of whom also volunteer for our program.

Other activities include making formal application to the National Committee for Quality Assurance to be recognized as a Patient Centered Medical Home (PCMH). Recognition demonstrates the Clinic meets quality standards in delivery of care and comprehensive access to complimentary services. We are the first primary care clinic in Douglas County to apply for this rigorous program. Additionally, we added a contract mental health counselor from DCCCA, Inc. 15 hours per week to provide more clinical therapy sessions for patients who were not previously being served in the community. This supplements our full time social worker and part time patient navigator who respond to patients in crisis in the clinic, provide short-term counseling and/or connect patients to other services in the community. Administrative offices are now co-located with a partner agency, DCAP, to garner efficiencies in general expenses and rent and to further meet patients’ needs. Further collaborations in the first half of the year include a stepped up Medical-Legal Partnership with Kansas Legal Services and KU School of Law and a partnership with Douglas County Visiting Nurses to provide our patients with home health care free of charge.

2. Provide specific detail (and supportive documents, if needed) to demonstrate progress made toward your goals/objectives.

- By 12/2013, patient enrollment will increase 10% over the 2012 clinic census.

In 2012, the clinic averaged 239 unique patients a month and served 2,879 unique patients for the year. In the first six months of 2013 we are averaging 464 unique patients a month and projecting 5,568 unique patients for the year, which would constitute an over 90% increase in patients served. This fact demonstrates our commitment to providing comprehensive care at each visit so patients do not have to return as often. This is part of patient centered care. Instead, we are meeting the need in the community of more unique patients who would have nowhere else to go for care.

- Health Care Access Clinic will be accredited as a Patient Centered Medical Home by 06/2013.

The application for PCMH recognition was submitted by the last week of June, 2013. The application was the culmination of more than two years of dedicated work by one employee with the input, cooperation and active participation of all key clinic staff. The final push for the application began in January 2013. We are proud of the materials we submitted and are confident of receiving recognition at a level 2 by late summer or early fall.

- By 12/2013, 60% of patients with hypertension will have a blood pressure reading <140/90.

As of July 15, 2013, 59% of patients with hypertension have a blood pressure reading of less than (<) 140/90. Clinic staff implemented additional steps in February 2013 to help improve blood pressure readings for our hypertension patients including the following:

- 1) Nurses provide all hypertension patients a list of Douglas County free blood pressure monitoring locations at each relevant visit and circle the location with the most convenient access to the patient
- 2) The EMR provided blood pressure log will be attached to every hypertension patient's clinical summary at each relevant visit
- 3) The EMR provided low-sodium diet information will be attached to every hypertension patient's clinical summary at each relevant visit
- 4) If a hypertension patient is in the clinic and blood pressure is elevated, they will be scheduled to come back the following week to see the nurse for quick recheck and recording of blood pressure

We believe these additional efforts are having an effect and these results will become more evident in the 3rd and 4th quarters of 2013

- By 12/2013, 75% of patients with types I and II diabetes mellitus shall have an HgA1C of 9% or less.

As of July 15, 2013, 77% of patients with types I and II diabetes mellitus have an HgA1C of 9% or less.

3. How have you impacted the citizens of Lawrence?

We continue to be the only provider in Douglas County that serves exclusively uninsured patients with access to no other medical home (Watkins, Veteran's Administration, Indian Health Services, etc.). We provide care regardless of the patient's ability to pay a \$10 visit charge. We are the medical home for around 3,000 patients, 95% of whom live in Lawrence. As the Affordable Care Act moves towards full implementation in 2014, Kansas will not offer expanded Medicaid coverage. Thus, the uninsured, low-income population of the County, around 14,000 people, will remain uninsured unless they purchase insurance on the new health care exchange. Since we serve people at or below 185% of poverty and people living at or below 100% of poverty will not be eligible for *any* subsidy or expanded Medicaid, we will continue to be the provider of choice for thousands. The impact we have on the citizens is in improved health and wellness for our patients and in decreased Emergency Department demand at Lawrence Memorial Hospital. We divert uninsured patients from using the ED and provide earlier, less expensive and more preventative treatment as a result. This should result in a patient population that is healthier, that can be more productive in the work force and stay off disability roles.

4. What barriers, if any, have you encountered?

There were no barriers.

5. Review the line-item budget you provided in your application. How much of your allocation has been spent?

We have spent 100% of the first half of the allocation received from the City, as expected.