



City of Lawrence

2021 Application for Special Alcohol Funding

APPLICATION INFORMATION

General Information: The State of Kansas has created an Alcoholic Liquor Fund and Charter Ordinance No. 33 describes how those moneys are to be distributed for the City of Lawrence. Pursuant to K.S.A. 79-41a04, the City shall credit 1/3 of the deposit to the General Fund, 1/3 to the Special Recreation Fund, and 1/3 to the Special Alcohol Fund. The City Commission considers requests for the allocation of 1/3 that goes to the Special Alcohol Fund to help support agencies that provide programming in accordance with Charter Ordinance No. 33 (summarized below).

Expenditures in the Special Alcohol Fund shall be used for programs, services, equipment, personnel, and capital as the governing body determines is in the best interest of the public to address one or more of the following:

- a) Prevention of alcoholism and drug abuse, including but not limited to education, counseling, public information efforts and related activities; or
- b) Alcohol and drug detoxification efforts and related activities; or
- c) Intervention in alcohol and drug abuse or treatment of persons who are alcoholics or drug abusers or are in danger of becoming alcoholics or drug abusers; or
- d) Law enforcement, prosecution, court activities and programs, or portions thereof, related to apprehending, prosecuting, adjudicating or monitoring individuals who are alcoholics or drug abusers or are in danger of becoming alcoholics or drug abusers, including individuals who are or may be charged with violating laws related to alcohol or drug use; or
- e) Education, counseling, public information efforts, and related and associated activities related to preventing drug abuse and alcohol abuse, including but not limited to efforts to encourage healthy youth and family development and related efforts which include as a partial element drug abuse and alcohol abuse education, counseling, or public information efforts; or
- f) Programs, activities, or efforts related to preventing or intervening in drug abuse and alcohol abuse, including programs, activities, or efforts for which drug abuse and alcohol abuse prevention or intervention comprises a partial element of the complete program, activity or effort; or
- g) Any program, activity, or effort, or a portion thereof, that the governing body determines seeks to discourage, prevent, intervene, or address issues related to alcohol or drug abuse.

Applications will be reviewed by the Special Alcohol Funding Advisory Board. Following their review, the Board will make a recommendation for funding to the City Commission. Recommendations will be based on available resources, the need demonstrated through the agency's application, the stated objectives of the agency's program, past performance by the agency in adhering to funding guidelines (as appropriate), and the ability to measure progress toward the programs objectives.

Other Information. Collaboration and/or coordination between agencies is highly recommended and multi-agency proposals to address an identified community need is encouraged. All programs must have goals with measurable outcomes.

Reporting Requirements. All recipients of Special Alcohol Funding will be required to submit an annual report to the City of Lawrence outlining how the funds were used and whether the stated objectives were met by February 15, 2022.

Distribution of Funds. Funds will be distributed in two equal disbursements and in accordance with the Kansas CashBasis Law of 1933, codified as amended at K.S.A. 10-1101 *et seq.* The first distribution is to occur no earlier than April 1 of the grant year and the second distribution is to occur no earlier than October 1 of the grant year.

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: Heartland Community Health Center

Name of Program for Which Funding is Requested Integrated Primary Care and

Primary Contact Information (must be available by phone on December 11, 2020 from 8:30 to 12:30. Contacts are also welcomed to attend the meeting to provide a brief overview of the submitted application)

Contact Name and Title: Rachel Hartford, Executive Administrator

Address: 330 Maine Street, Lawrence

Telephone: (785) 841-7297

Name(s) and Title(s) of person(s) responsible for program supervision and/or financial administration of program.

Name	Title	Responsibilities (Supervision, Financial, etc.)
a. Robyn Coventon	CEO	Oversight
b. Regina Oxford	Controller	Financial
c. Julie Branstrom	Director of Community Programs	Outreach

Please outline the amount of funds being requested for each category in 2021

Category	2021 Requested Amount	% of Total
Prevention	\$ <u>87,000</u>	<u>100</u>
Detoxification	\$ _____	_____
Intervention	\$ _____	_____
Law Enforcement	\$ _____	_____
Education	\$ _____	_____
Other	\$ _____	_____
Total	\$ <u>87,000</u>	<u>100</u>

If your agency received funding from the City in 2020, please fill out the chart below.

Amount of Funding	Funding Source (i.e. General Fund, Special Alcohol, CDBG, Housing Trust Funds)	Program/Purpose
\$ <u>87,000</u>	<u>Special Alcohol</u>	<u>Integrated Care</u>
\$ _____	_____	_____
\$ _____	_____	_____
\$ _____	_____	_____

Total projected operating budget for your agency in 2021: \$ 7,039,302

SECTION 2. SPECIAL ALCOHOL FUND INFORMATION

- A. How is the proposed program consistent with City Charter Ordinance 33? Please cite specific subsections of City Charter Ordinance 33 and explain how it aligns with your program.

As described in a subsection of City Charter Ordinance 33, Heartland offers *intervention in alcohol and drug abuse and/or provides treatment of persons who are alcoholics or drug abusers or are in danger of becoming alcoholics or drug abusers* as well as offers detection and options for resources.

Heartland Community Health Center requests City of Lawrence funding to screen for and intervene in substance abuse among Heartland established patients and community members seeking care at the community health center.

As a designated Patient-Centered Medical Home, Heartland serves as a welcoming health home for all and offers care that is focused on the needs of the whole person. A main function of being a Patient-Centered Medical Home is to assist and coordinate patient care throughout the health care system while ensuring that patients' preferences, goals, and experiences are successfully communicated to providers or care team. This is important to consider when serving the uninsured or underserved who may encounter limited access to treatment of affordable health care services due to various barriers to care.

By intervening early with patients who are drinking or using other substances, the goal is to make a long-term impact in a patient's decision about continuing to use, and the extent to which they continue to use. We offer patients a non-judgmental, open conversation to help them understand the impact that alcohol or drug use has on their life or health outcomes, so they can make decisions that will benefit them positively. For some patients, this involves meeting on a regular basis while they work to make changes and new decisions about their use, and for other patients, this involves meeting periodically or at every primary care visit, having some conversation about how their use is impacting them. With the increases in patients served and patient visits, Heartland is also experiencing an increase in alcohol and substance use related diagnoses to the effect of a 31% (n=798) increase in alcohol related visits and a 38% increase in substance use related visits (n=1202) from 2018 to 2019. Table 1 illustrates the changes over the previous two years.

Table 1. Heartland AUD & SUD Service Utilization

Measure	2017	2018	2019	% Δ 2017-2018	% Δ 2018-2019	% Δ 2017-2019
AUD Visits	426	607	798	42.49%	31.47%	87.32%
AUD Patients	189	273	326	44.44%	19.41%	72.49%
SUD Visits	668	872	1202	30.54%	37.84%	79.94%
SUD Patients	433	483	555	11.55%	14.91%	28.18%

SECTION 3. STATEMENT OF PROBLEM / NEED TO BE ADDRESSED BY PROGRAM

- A. Provide a brief statement of the problem or need your agency proposes to address with the requested funding. How will your program make an impact to meet the need? The statement should include characteristics of the client population that will be served by this program. If possible, include statistical data to document this need.

The unserved and underserved population of Heartland consists of individuals living at or below 200% of the Federal Poverty Level (14,338 people or 40.5% of the total population of the combined census tract service area). Included in the number of unserved and underserved are 4,501 uninsured and 7,641 people living below 100% of the Federal Poverty Level. In addition, many members of the target population qualify for Medicaid and/or Medicare services (10.1% and 9.2% respectively).

As the sole safety-net provider for our county, we recognize the importance of providing care for all during such a difficult time. Heartland merged with Douglas County Dental Clinic earlier this year. The decision enables both organizations to continue their missions. Heartland and DCDC community patients continue to receive high quality care with fully integrated primary care for all ages, oral health, behavioral health and psychiatry, case management services, physical therapy, food pantry access, insurance eligibility assistance and access to community resources.

In Lawrence, most college students and young adults are not experiencing addiction but may be engaging in risky substance use. In 2019, Heartland recorded a 19% increase in alcohol disorder diagnosis in new patients and a 15% increase substance use disorder in new patients as reflected in Table 1 above. The Lawrence-Douglas County Health Department found that in 2017, almost 1 in 4 adults in Douglas County engage in binge drinking. Further, 7.7% of adults are consider heavy drinkers. According to the 2017 Community Health Assessment, drug overdoses have surpassed motor vehicle crashes and falls as the leading cause of unintentional injury death. By catching this and intervening in risky substance use early, we're eliminating a lot of harm done and money spent trying to reverse harm. By intervening early, we hope to avoid the life-altering damage of addiction and abuse.

- B. Please describe what demographic disparities exist, and how the program is designed to increase equity. Who would benefit from or be burdened by this program?

Although Douglas County ranks as the seventh healthiest county in Kansas, many health disparities remain for patients experiencing poverty or inclusion barriers. A clear barrier to care identified in the 2017 Lawrence-Douglas County Community Health Assessment is health insurance or coverage. Approximately 9.8% of residents are uninsured and at least 41% of those residents would fall in the Medicaid gap. Further, roughly "11% of adults state that not being able to see a doctor is because of cost." As a federally-qualified community health center, Heartland offers eligibility assistance and a generous sliding scale fee (SFS) for both insured and uninsured patients so that finances do not have to remain a barrier. Each year we evaluate through patient surveys if the SFS is considered nominal from the perspective of the patient and reduces barriers to care. Eligibility assistance services are also available as a community service to non-Heartland patients.

In Heartland's mapped service area, including zip codes 66044 and 66046, there are more than 20,300 low-income residents going unserved by a community health center like Heartland. While some of these individuals may be served by other local providers, the enormous need of affordable health care remains in Lawrence-Douglas County. Currently, Heartland is providing care for more than 10,000 unique individuals and prepares to see a dramatic increase in patients served in 2021.

SECTION 4. DESCRIPTION OF PROGRAM

- A. Provide a brief description of the program services and activities using an evidence-based model. The description should describe as specifically as possible the interaction that will take place between the provider and the user of the service.

Integrated Care

Patients who establish care with Heartland are briefly screened for substance abuse and then screened at least annually thereafter. Any patient who screens positive for possible substance use disorder is given a more in-depth screening using the Alcohol Use Disorder Test (AUDIT) or Drug Abuse Screen Test (DAST), followed by a categorization into low, moderate and high-risk groups before being referred to a Behavioral Health Consultant (BHC) at Heartland. The BHC then determines if the individual could benefit from a brief intervention that could be administered by a BHC or if more intensive treatment is needed with a partnering agency. If more intensive treatment is needed, the BHC either refers the patient to an intake at DCCCA, a drug and alcohol treatment facility located in Douglas County, for outpatient or inpatient treatment, or refers the patient to other outpatient or inpatient treatment, generally through Heartland RADAC or Professional Treatment Services.

The type of approach used at Heartland is SBIRT (Screening, Brief Intervention, and Referral to Treatment). SBIRT is an evidence-based practice designed to identify, reduce, and prevent problematic use, abuse, and dependence on alcohol and illicit drugs (SAMHSA). It incorporates screening of all patients (primary care and behavioral health services screen patients) and brief interventions into routine practice instead of being performed only when a substance abuse problem has already been identified. The result allows patients to access help earlier, which leads to less time and fewer resources taken to aid in behavior correction or recovery and to ultimately prevent full relapse into an unmanaged substance use disorder. Studies show that intervention participants reduce their alcohol consumption an average of 13 percent to 34 percent. In addition, an analysis concluded that brief interventions may reduce mortality rates among problem drinkers by an estimated 23 to 26 percent (NIAAA Alcohol Alert, Number 66, July 2005).

The foundation of the SBIRT process is the Behavioral Health Consultant (BHC). The role of the BHC at Heartland is to offer brief, immediate support to Heartland primary care providers and patients in areas such as mental and behavioral health needs often identified initially through warm-handoffs from primary care services. Interventions of BHCs often include coping with chronic illnesses, substance use disorders, mental health counseling, co-occurring mental health and substance use issues, weight loss, medication compliance, barriers to care (psychosocial or physical) or lifestyle change. At Heartland, care teams are integrated in a primary care setting to ensure that a multidisciplinary approach is available for all patients. This multidisciplinary approach includes mental and behavioral care, comprehensive primary care service, oral health, and physical therapy and wrap-around assistance services. It also ensures that regardless of the avenue a patient uses to access services at Heartland, they can have care through all available health and wrap around services if desired or needed.

With a strong commitment to integration, Heartland now staffs 1.0 FTE BHC, 2.6 FTE LSCSW, .3 FTE APRN, .2 FTE Psychiatrist and 1.0 FTE Psychiatric Nurse Case Manager. Understanding that the Behavioral Health Consultant working alongside a primary care provider is a substantial resource and service to patients, Heartland is committed to seeking the funds to maintain these positions and enhance its services. Therefore, Heartland requests City of Lawrence funding to support the portion of salary and benefits of one of its Behavioral Health Consultants and primary care provider.

Outputs:

- B. How many unduplicated clients will be served? 15,000
- C. Please list any other output goals (i.e. # presentations delivered, # medications provided, etc.)

Heartland Community Health Center will have 15,000 unique patients in the 2021.

Outcomes:

- D. Please provide two to three specific program SMART objectives for 2021. Examples include, “75% of clients receiving job training will retain their job one year after being hired,” “increased fundraising efforts will result in a 15% increase in donations in 2021,” **Applicants will be expected to report their progress toward meeting these objectives in an annual report to the City.**
 - i. For patients who are indicated at a high risk for substance use, 75% will have a documented referral in their EMR for additional follow-up for mental health and/or substance use disorder treatment. Further, monthly check-ins will be established to address processes related to warm handoffs to BHCs, internal referrals for behavioral health services, and external referrals to SUD treatment facilities, such as DCCCA or Heartland RADAC.
 - ii. Heartland Community Health Center will record a 30% increase in completed referral to treatment for alcohol or substance use. (Meaning Heartland will track these referrals in our electronic medical record (EMR) to follow up with the receiving organization about the referral status and remind the patient of follow-up through a phone call and/or letter).
- E. Please describe the priority population you are working with.

The mission of Heartland Community Health Center is to welcome all who need care. Heartland exists to provide quality and compassionate care to all people in Lawrence and surrounding areas – focused on integrated, patient-centered care for all. Through the delivery of our mission, healthcare access and healthcare equity don’t depend on income level or insurance status. Uninsured individuals who have incomes that fall at or below 200% of the Federal Poverty Level qualify for reduced fee care and patients pay for services on a sliding fee scale according to their household income and household size. The recent merger of Heartland and Douglas County Dental Clinic enhances our combined missions to serve those that need care.

In 2019, Heartland served 7,342 patients with 29,370 visits. 26% of Heartland patients were children ages 0-18, 69% were adults under the age of 65, and 5% were elderly. 42% of the patients were uninsured, 35% had publicly funded insurance, and 27% had private insurance. 46% of Heartland patients are 100% of poverty or below.

In 2020, Heartland has served 9,112 patients as of the end of October and expects to serve 10,000 by the end of the year. As the sole safety-net provider for our county, we recognize the importance of providing care for all during such a difficult time. At the onset of our local outbreak, Heartland was one of the first health care providers to modify operations and launch exterior screening, curbside triage (CTT), and COVID-19 testing to keep the community safe. Since then, Heartland has seen an increase in new patients, with an average of 18 patients a day, many of whom are

uninsured. Further, Heartland has assumed responsibility for all emergency dental patients and has provided 762 emergency dental visits so far this year.

- F. What other agencies in the community are providing similar types of services, and how do you coordinate services?

Heartland partners with local service agencies, DCCCA, Inc. and Bert Nash to serve and assist those who experience substance abuse and addiction. Among other organizations like Alcoholics Anonymous and various recovery houses, DCCCA champions the work that helps people recover from addiction in Lawrence. Heartland Community Health Center has established a strong collaborative partnership with DCCCA and Bert Nash to ensure that duplication of services does not occur by screening every patient who establishes care at Heartland and then refers them appropriately to follow-up or specialty care in the community. The investment allows Heartland the ability to reach some of the most marginalized or most vulnerable individuals in the community and provide access regardless of income or insurance status.

Heartland is an active health care leader on the local Behavioral Health Leadership Council. This Council is committed to improving access to behavioral and mental health services across our community. The proposed program is not a new experiment, rather on-going collaborative work. It is a proven, evidence-based strategy to decrease the incidence of substance abuse and ER admissions related to substance abuse. It is a strategy that Heartland has maintained and developed for more than six years in the community.

SECTION 5. PROGRAM BUDGET INFORMATION

- A. Provide a detailed budget for the proposed program using the form below (you may attach a supporting document).

Category	Requested Amount	Applicant Amount	Total Amount	Explanation
Personnel	87,000	67,708	154,708	Salary BHC and Primary Care
Fees & Services				
Estimates/Bids				
Travel				
Marketing				
Cost of Materials				
Operating Expenses				
Other				
Grand Total	87,000	67,708	154,708	

- B. Provide a list of all anticipated sources of funding for the proposed program in 2021. The total proposed program budget and total proposed program revenue should match.

Revenue Source	Anticipated Amount	Explanation/Status of Funding Request
City of Lawrence (Special Alcohol Funding)	87,000	Salary and Benefits for PC and BHC
City of Lawrence (Other Sources)*		
Douglas County		
United Way		

Other (please describe)		
Other (please describe)	67,000	Program revenue, balance of salary and fringe
Grand Total		

*Other sources could include General Funding, Housing Trust Funds, Transient Guest Tax Funds, CDBG, etc.

- C. What percent of the requested program costs are being requested from the City (include both Special Alcohol and Other)? 56%
- D. Will these funds be used to leverage other funds? If so, how?

Heartland has already secured significant state and federal funds that are not program specific and do not require a local match. City funding for this program allows other resources to pay for additional infrastructural and administrative costs. Additionally, when Heartland first obtained significant federal funding in 2012, regulations created expectations that Heartland would leverage its federal funding to obtain more local resources. By being able to pay for a portion of a nurse practitioner and a behavioral health consultant, Heartland can bill for encounters and generate revenue to help cover costs. Although program income doesn't cover all costs, it does create an ROI on the city's funding.

SECTION 6. SUPPLEMENTAL INFORMATION

Please attach your agency's most recent IRS Form 990, most recent financial audit, and most recent annual report if completed for your agency's board.

- A. If your agency has never filed an IRS Form 990, please select the check box.
- B. If your agency has never completed a financial audit, please select the check box.
- C. If your agency has never completed an annual report, please select the check box.

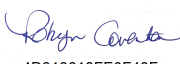
Based on the attached IRS Form 990, please answer the following questions:

- A. What is the total number of volunteers (estimate if necessary)? This is part I line 6 of the IRS Form 990.
25 _____
- B. What are your agency's total liabilities? This is part I line 21 of the IRS from 990. \$ 716,755.00 _____
- C. What are your agency's total assets? This is part I line 20 of the IRS Form 990. \$ 1,747,392.00 _____
- D. What are your agency's total net assets or fund balances? This is part X line 33 of the IRS Form 990.
\$ 1,030,637.00 _____
- E. What are your agency's permanently restricted net assets? This is part X line 29 of the IRS Form 990.
\$ 0 _____
- F. What is your agency's land, building, or equipment fund? This is part X line 10c of the IRS Form 990.
\$ 791,989.00 _____
- G. What are your agency's total expenses? This is part I line 18 of the IRS Form 990. \$ 7,331,479.00 _____

The signatures below attest that the information in this application is accurate and that, unless otherwise explicitly described in this application, no other source of City or community funding will be used to support the programming for which Special Alcohol Funds are being requested.

Robyn Coventon

Agency Representative (PRINT)

DocuSigned by:

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Signature

11/19/2020

Date