





"Sometimes you just have to take the leap, and build your wings on the way down."- Kobi Yamada

DESOTO COUNTY'S PRESCRIPTION FOR A HEALTHIER COMMUNITY

After months of preparation and delays caused by the havoc of three hurricanes, DeSoto County welcomes with open arms De-Soto Health Resources, Inc. (DHRI) Prescription Assistance Program. The program is an asset to the rural community where 28% of the county's population under the age of 65 is without any form of health insurance coverage. The cost of prescription drugs has risen 9.5% in just one year. For many individuals without prescription insurance coverage it often comes to the tough decision to either put food on the table and keep a roof over the family's heads or going without necessary medications or skipping doses to prolong the medication. Not taking medication as prescribed or going without medication often causes serious adverse health effects, the most serious being death. DeSoto Health Resources mission is to improve the quality of life for all residents of DeSoto County by implementing creative health care solutions in collaboration with interested and committed community partners. The implementation of a prescription assistance program fits nicely with the mission.

The backbone of this program are the volunteers, referred to as Patient Advocates, who donate their time, compassion, and energy into assisting their community neighbors in obtaining free or reduced cost medications through the Pharmaceutical Companies Compassionate Drug Programs. The Patient Advocates meet individually with clients to discuss their eligibility, which is determined by each Pharmaceutical Company. The application process is often times very tedious and complicated as each drug company has a different application with different instructions, and different eligibility criteria making it extremely difficult for individuals to follow, ultimately impeding their ability to obtain free or reduced cost maintenance medications. The Patient Advocates are trained to identify the applications and determine if a client is eligible for the particular pharmaceutical program. If the client is eligible for a particular program the advocate and the client work together in filling out the applications. The Patient Advocates then take the documents to the local physicians to obtain their signatures and the application is then mailed to the companies. The pharmaceutical

company makes the final decision on the client's eligibility and if they are approved the medications are sent to the client's home or to the physician's office. DHRI also has a voucher pro-

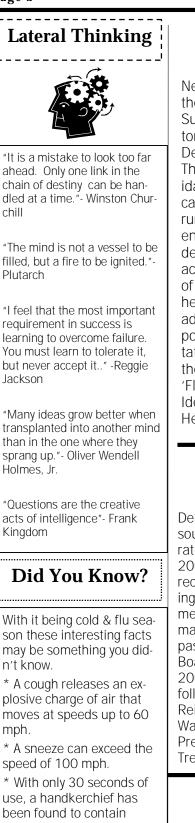
gram for emergent/urgent medications for eligible clients. This program is funded through grants and donations and allows eligible clients to obtain necessary urgent/emergent medication at no cost to them. This is determined on a case-by-case basis and if funds are available at the time of request.

DHRI opened on October 26, 2004. From opening day through January 31.2004, 63 clients were served with 130 client contacts (phone calls, people stopping for program information, or other client assistance). 77 vouchers were issued and 151 applications were filed to the drug company totaling 228 processed prescriptions. 408 total volunteer hours were documented along with 106 total hours of Patient Advocate training prior to the opening of DHRI. The total cost of



vouchers from Oct. 2004 through Jan. 31, 2005 was \$6,573.07. Clients who received their medications through the Pharmaceutical Company ending December, 2004 saved a total of \$17,611.82. The program's clients continues to grow as word has spread throughout the DeSoto community. DHRI currently has ten volunteers and the program is now open five days a week (M-F 9 am-12 p.m.)! If you are interested in making a donation to DHRI or volunteering please contact Jan LoPorto, Program Coordinator for DHRI, at 863-494-1351 or e-mail:

A DeSoto County Health & Social Services Resource Directory is also now available in hard copy or on the Internet at **www.desotohealth.org**



15,000 germs.

* Colds are caused by over 200 different viruses, and they are not the same viruses that cause the flu. <u>www.discovery.com</u>

NETWORK STAFF ATTEND 2004 FLORIDA RURAL HEALTH SUMMIT

Network staff attended the Florida Rural Health Summit held at the Hilton in Altamonte Springs December 6-8, 2004. The mission of the Florida Rural Health is dedicated to strengthening rural communities by ensuring that all residents of Florida have access to a continuum of affordable and quality healthcare services and advocating for public policy initiatives to facilitate those services. The theme this year was 'Flip the Switch to Bright Ideas in Florida's Rural Health.' Frank Pastizzo

opened the conference with an enlivening session filled with music, comedy and poignant story telling with a focus on warming up the workplace. Some of the break out sessions included Chronic Disease Management, Changes in Medicare/Medicaid, EMS & Rural Issues, Pharmacy **Issues and Prescription** Assistance, Rural Health Networks, and Integrating Behavioral Health Services with Primary Care Medicine in Rural areas. There were several exhibitors at the conference and included Ajax, a building corporation, Bacen &

Jordan, P.A., a healthcare law firm, Mamassist, and Tandberg, a global provider of video systems and services. C. David Smith received the Wendall Rollason Award. For more information on the Florida Rural Health Association please visit:

http://www.flrha.org Speaker presentations are also available at this website.



DESOTO HEALTH RESOURCES, INC. RECEIVES INCORPORATION & 2004-2005 BOARD ELECTED

DeSoto Health Resources, Inc. was incorporated on August 12, 2004. The Board of Directors was elected during the October 20, 2004 meeting. A motion was made, seconded, and passed appointing DHRI's Board of Directors for 2004-2005. They are as follows: J. Rudy Reinhardt, President; Warren Santander, Vice President; Robert Hiniker, Treasurer; Kelly J. John-

son, Secretary; Karen Blanchette, Sr. Elaine Davia, Brian Martin, Brenda Clifton, Pat Barrera, Dr. Robert Cullom, and Paul Whitlock. The Board is focusing on volunteer recruitment since the program is operated by individuals donating their time and energy to the community. Without the strength of volunteers the program would not be able to operate. Within the last month four new volunteers have joined the DHRI team. DHRI has received over \$50,000 in grants and donations from area agencies and individuals that help support the voucher program and the overall operation of DHRI. Please visit the DHRI website for more information:

www.desotohealth.org

NETWORK SUBMITS RURAL HEALTH OUTREACH GRANT

The Network has submitted a Health Resources & Service Administration (HRSA) Rural Health Outreach Grant in September, 2004. If funded, the grant would create a Health Services Program available to the uninsured and homeless in Highland's County with the goal of expanding into Hardee & DeSoto Counties. There are an estimated 20 awards and they will be announced in early May, 2005.

ing NETWORK STAFF ATTEND 2004

NETWORK RECEIVES CHALLENGE GRANT Award

The Network submitted a homeless assistance Challenge Grant in October, 2004. The Challenge Grant was created in 2001 and funding is provided to assist in implementing services and activities contained within local homeless continuum of care plans. The grant can fund activities that focus on areas such as the coordination of efforts to prevent homelessness; provide outreach to those who become homeless to direct them to services; to provide emergency shelter; ensure the



availability of supportive services to address health, education, and family needs; and to make permanent housing available. The Network's request is to provide health screenings (physical, psycho-social and substance abuse) to homeless individuals in Highlands at the Homeless Shelter downtown Sebring. Bea Walsh, RN and Clinical Ir gration Coordinator at H will be providing needed health services on Friday ternoons beginning Febr 25. It is the goal to prov services several days a to homeless individuals.

County. The Network was awarded \$40,000 to accomplish this goal. The Network has already received \$3,542 in Homeless Grant-in-Aid funding through the Department of Children & Families and will use this funding to begin assessing homeless individuals at the Homeless Shelter in downtown Sebring. Bea Walsh, RN and Clinical Integration Coordinator at HRHN, will be providing needed health services on Friday afternoons beginning February 25. It is the goal to provide services several days a week

RURAL CALENDAR



March 8,: Hardee Homeless Coalition Meeting; Gillespie Ministry Building

March 10: Continuum of Care Meeting, Glades County.

March 11: HRHN Board Workshop, Inn on the Lakes, Sebring 8:30 a.m.-3:30 p.m.

March 16: Highlands Homeless Coalition, Salvation Army, Sebring

March 22: DeSoto Health Resources, Inc. Board Meeting, 10 a.m. 1901 SE Baker St.

PRESIDENT'S FY06 BUDGET PUTTING SQUEEZE ON NATIONAL RURAL HEALTH PROGRAMS

President Bush's FY 06 Budget Proposal is putting a tight squeeze on rural health initiatives throughout the United States. The Bush Administration has cut or zeroed out a number of critical health grant programs including the Rural Health Services Outreach Grants, Network Grants, Delta Networking Grants and the Rural Hospital Flexibility grants. According to the National Rural Health Association (NRHA), a national nonprofit organization that provides leadership on rural health issues, these cuts have two immediate impacts. The first impact being that those communities that have been working on these grant applications will not receive any funding. This funding is a lifeline for rural communities seeking to improve access to care in their communities. Secondly, the cuts will impact more than 300 rural communities that had been expecting funding in 2006. Some program specific points regarding these cuts include:

Rural Health Care Services Outreach Grant Program: The budget request would dramatically reduce funding from \$38 million to \$11 million. The Administration justified its request by noting the Medicare Modernization Act of 2003 investment obviated need for this program.

Medicare Rural Hospital Flexibility Grant Program: This program focuses on supporting the 1050 Critical Access Hospitals in the country through financial performance analysis, network development, quality improvement and integration of emergency medical services. The Administration recommended zero funding for this program stating that the investment of rural provisions from the MMA would eliminate the need to fund this program.

Rural Network Development & Network Planning Grant Programs: The Outreach Grants focus on actual service delivery while the Network Grants focus on getting rural providers to work together to build better systems of care. The budget request cuts these grants out stating that with the MMA investment there was no need for these programs.

The Delta Initiative: This program provides approximately \$6.8 million to rural communities in the 8 state Delta region, which tend to face some of the starkest challenges in health care in the country.

You may be asking yourself what can I do to push for Rural Health Initiatives. The Network staff recommend you contact your local and national representatives and urge them to continue fighting for rural health care programs. One voice can make a difference. We have listed some websites where you can locate your representative for your area. Let's bring light to the importance of rural health before it's too late!

http://www.myfloridahouse.gov http://www.flsenate.gov http://www.house.gov http://www.senate.gov

Information extracted from <u>www.nhrarural.org</u>

Point-In-Time Study Completed For 6-County Area

The Florida Heartland Rural Consortia for the Homeless (FHRCH) conducted a Homeless Point-In-Time Count during the week of January 24-28. Hendry and Glades Counties surveyed 225 homeless individuals, Hardee reported 31 homeless, DeSoto documented 136, Highlands recorded 607, and Okeechobee County reported 200 for a total of 1,163 homeless individuals surveyed in the 6-County area for the 2005 Point-In-Time Survey.

Heartland Rural Health Network, Inc.

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Visit Us On The Web!

www.hrhn.org



Board of Directors 2004-2005 Warren L. Santander, President Kevin Roberts, Vice-President Nancy Zachary, Secretary David A. Ottati, Treasurer Daniel B. Harshburger, Jr. Director Mary Kay Burns, Director Sandy C. Griffin, Director David Duke, Director Paula Silverman Thagi MD, Director Gaye Williams, Director Edgar Smith, Director Clifton Timmerman, Director Blake Warren, Director David Robbins, Director Robert C. Rhin, Director J. Rudy Reinhardt, Network

The Network Board Meeting took place on January 19, 2005 at Central Florida Health Care, Inc. located in Avon Park, FL. Mr. Warren Santander, President of the Board, welcomed Board members and thanked them for their attendance. He also thanked Gave Williams and Central Florida Health Care for hosting the meeting and providing lunch. The Board welcomed guest speaker, Mr. Michael Holland, Chief Revenue Officer, of Universata. Universata is a company that focuses on electronic medical records exchange for use by hospitals and other health care providers. Universata contracts with providers to assume the responsibility for retrieving a requested medical record, scanning that record and forwarding it electronically to the party requesting the record. The system is HIPPA compliant and there is no charge to the health care provider for this service. Universata bills and collects fees from

requested the information. The service they provide significantly speeds up the process of medical record disclosure and frees up the staff at the hospital or clinic for other productive duties. If staff is required to retrieve, copy or scan



the medical record this job is done by a Universata employee, thus eliminating the need for the provider to hire such a person. Mr. Holland also explained that other benefits are derived from a relationship with Universata including improvements in revenue cycle management, risk management, customer satisfaction and security. He also discussed the company's revenue sharing policies and indicated that the Heartland Rural Health Network could benefit financially through commissions earned through referrals. Rudy

Reinhardt, Executive Director of the Network, reviewed the financial statements and updated the Board on the progress made by DeSoto Health Resources, Inc. (DHRI). Bea Walsh, Clinical Integration Coordinator, presented the year end report from October 26, 2004 (program's start date) through December 31, 2004 (please see article on Page 1 for more details about this report). Updates were also given on current grant activities by the Network. Mr. Reinhardt also informed the group about the Board Workshop scheduled for Friday, March 11, 2005 from 8:30 a.m. until 3:30 p.m. at the Inn on the Lakes in Sebring. The focus of this workshop will be on assuring the financial sustainability of the Network, Paul Davis, a Network consultant, will be facilitating the workshop. The next Board meeting is scheduled for May 18 at Highlands Regional Medical Center in Sebring.

NETWORK BOARD MEETS: WELCOMES GUEST SPEAKER

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