

No Noodles Please!

What does giving up macaroni and cheese have to do with medical care? Just ask 47-year-old Charles Russell of Kearneysville, WV, and he'll tell you that giving up noodles was the most important step he could take to control his diabetes.

"Ever since I was diagnosed with diabetes in 2006, I knew I had to change my lifestyle: get more exercise, eat right, and take medicine, but I never had the will to do it," Russell says.

But that all changed seven years ago when Russell became a patient of the Eastern Panhandle CARE Clinic (EPCC).

"Suddenly I was the center of attention. My medical team and all of the staff focused on me. I began to understand my disease, and I began to find the will to do what I had to do," Russell says.

"I always knew that starches and white bread were bad for me—but now I stopped eating them. In three months at the clinic, my A1c (a measure of blood sugar level, Russell explains, that represents the effect diabetes has on the body) dropped 7 points, and I lost 20 pounds. In fact, I controlled my weight and diet so well that I did not need to take insulin."

Surprisingly enough, Russell explains, his discovery of the clinic was a lucky accident. The former Maryland resident lost his insurance because of a divorce.

"There I was--diagnosed with diabetes and had nowhere to get medical care," Russell says.

After some investigating, Russell moved to West Virginia and was treated at the clinic "at their cost." When he became eligible ("I had no job and no health insurance"), he enrolled in Medicaid.

Now working in warehouse production Russell reflects on the "miracle." I walked in the door with no money, and they gave me top line care and pampering that you'd never find even under regular insurance."

"Unlike my previous experience with medical care, at EPCC they knew how to treat you as an individual, how to develop a relationship with you, and to learn what your needs are."

"They also educated me about my disease," Russell adds, helping me to do better on my own, and prosper, and become a better, more focused person."

"It was," he says, "like going to school again. I had to learn what diet



was good and bad, what starches (like pasta and white bread) would do to my body. I could see that eating the wrong things was like being addicted to drugs."

Russell thinks good communication is key to the experience at EPCC.

"They break down the medical words for you so you can understand," Russell explains.

"In other places, when doctors pronounce a medical word, they say a mouthful. You can't even pronounce the word, let alone know what it means. But at this clinic they explain the details. They teach you to understand what you have to do in a way you can accept."

Russell says he has dreams now. "I dream I will win the lottery and win a couple of million dollars and give it to the clinic so that more people can benefit as I did."

Written by:

Janet Lowenbach, EPCC volunteer

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EPCC Earns National Recognition



The National Committee for Quality Assurance (NCQA) recently announced that the Eastern Panhandle CARE Clinic has received NCQA Patient-Centered Medical Home (PCMH) recognition for using evidence-based, patient-centered processes that focus on highly coordi-

nated care and long-term participatory relationships.

The PCMH is a model of primary care that combines teamwork and information technology to improve care,

Dental Screenings Now Offered at EPCC

Retired dentist Dr. Joe Brookreson recently began volunteering at the Clinic to do dental screening and oral health education for clinic patients.

EPCC received funds through Highmark BC/BS, the Claude Worthington Benedum Foundation, Brentwood Industries and United Way of the Eastern Panhandle this past fiscal year for dental. These grants allowed us to purchase the equipment to do screenings in the clinic, provide preventative education and provide oral

health kits to our patients.

Many of our patients now have Medicaid are able to access dental care. Medicaid is limited to 1-2 extractions in a year for adults. This benefit made it possible for more of EPCC's dental grant funding to be used to send patients to a dentist for a professional cleaning and restorative services. EPCC dental funding had been limited to emergencies in the past. (see photos)

This past year 80 patients were able to receive dental care.



Patient before



Patient after



Pictured: Dr. Brookreson, Richard Shipley (EPCC patient), Alecia Todd

“EPCC has tools, systems and resources to provide its patients with the right care, at the right time.”

National Recognition continued

improve patients' experience of care and reduce costs. Each patients' care is overseen by clinician-led care teams that coordinate treatment across the health care system.

“NCQA Patient-Centered Medical Home Recognition raises the bar in defining high-quality care by emphasizing access, health information technology and coordinated

care focused on patients,” said NCQA President Margaret E. O’Kane. “Recognition shows that the EPCC has tools, systems and resources to provide its patients with the right care, at the right time.”

To earn recognition, which is valid for three years, the Eastern Panhandle CARE Clinic demonstrated the ability to meet the program's key ele-

ments. NCQA standards align with the joint principles of the Patient-Centered Medical Home established with the American College of Physicians, the American Academy of Family Physicians, the American Academy of Pediatrics and the American Osteopathic Association.

State Cuts EPCC Funding

The 2015 WV State Legislative session was very tumultuous for the nine Health Right Clinics who receive funding to help subsidize uncompensated care through the Department of Health and Human Resources (DHHR). The Governor's budget proposed a reduction of 50% of the appro-

priation.

The approved budget gained back some of the line item allocation and ended up with a 32.3% total cut. The DHHR changed its formula for how the dollars will be allocated to the nine agencies. The EPCC will receive a 49% funding cut.

This represents a \$169,000 funding loss for our 2016 FY budget.

EPCC does not expect to reduce any services to our patients or community, and in the short term, will utilize cash reserves to continue operations as is.

PCMH - How has it improved patient care at EPCC?

Patient Centered Medical Home (PCMH) is a way to approach medicine that takes a proactive look at patient care, reduces cost on the healthcare system and helps individualize care for patients. For example: medical providers are taught to focus screenings on health issues that statistically are a problem nationwide; high blood pressure, heart failure, COPD, high cholesterol and diabetes. While we do not dismiss these screenings, PCMH requires practices run popu-lation reports to see the most common diseases or diagnoses in a practice and develop plans to address the most common things seen in that clinic. The reports for the Eastern Panhandle CARE Clinic (EPCC) found high rates of tobacco use, depression, high blood pressure and diabetes. More interestingly, these were found at

much higher rates in young adults than the national average. The EPCC set forth to develop quality measures to address these issues. While some screenings are not required by practice standards/guidelines for all patients, the EPCC has identified screenings needed for their specific population to reduce risk factors and prevent diseases that are commonly found in the clinic’s population.

PCMH also requires patients be identified by level of risk for poor outcomes in health. The EPCC developed an extensive assessment process that includes risk factors such as recent ER visit or hospital admission, newly diagnosed chronic disease, language or literacy barriers, complicated medication

regimen, terminal illness, uncontrolled mental health issues and many more items. A protocol has been developed to determine what level of risk, how frequently to repeat the assessment and team roles and referrals for resources to reduce this risk level. When patients are identified at a higher risk level, more frequent follow up and assessment is required. There may be outside specialists or community resources required or internal referrals to Patient Care Coordinators, Health Educators, and Social Workers. This will reduce the potential for poor outcomes, improve patient quality of life, and reduce cost for healthcare by taking a proactive approach to managing disease.

Lisa Carper - Donor to Volunteer



“For always and forever I have believed the Eastern Panhandle CARE Clinic is one of our shining community miracles. From the very early days of the “Free Clinic” my heart and pocket book have been open to supporting the clinic’s work. In a ringside seat now as a volunteer I have seen the clinic in action, serving the most medically needy and socially challenged individuals in the Eastern Panhandle.

The leadership has shown diligence and care well beyond the norm. The facility treats its patients, staff and volunteers with dignity and provides top of the line primary care for a very

complex population. Through the years I have supported the clinic with donations because I believe in the work and the need for this organization in the community. I believe, because I have witnessed the results. Now, as a volunteer my belief has been reinforced and I am thrilled to be a small part of this miracle.

Please join me in supporting the EPCC!”

Lisa Carper, MS, LSW, AADC

*Lisa volunteers along with Barbara June Appelgren and George Kidwiler to provide professional counseling services for EPCC patients.

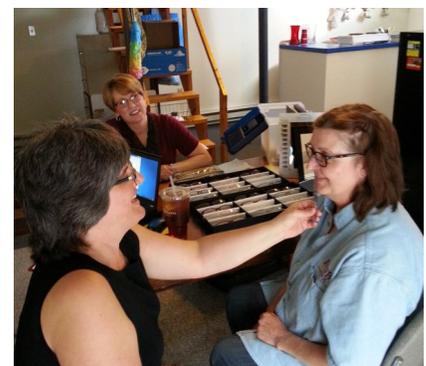
EPCC Facilitates Vision Clinic

When the WV Eye Institute called this Spring to ask the EPCC about hosting another eye clinic for our patients, Michele Goldman, Executive Director, quickly contacted the Horseman’s Benevolent and Protective Association. The EPCC had hosted such a clinic for patients in October 2014 and knew that most patients would not be due for their annual eye exams.

Knowing how difficult it is for the groomers, hot walkers, and etc. who work at the back-

stretch of the racetrack to get away from their jobs, this presented a wonderful opportunity to provide free, complete eye exams. For a small copay of \$10-\$30 these workers were also able to get glasses.

The EPCC provided volunteers to help the day of the eye clinic where 67 individuals received services and 37 were provided with new glasses. Four were referred for additional care for glaucoma, 3 for macular degeneration and 2 for diabetic retinopathy.





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***Providing quality, compassionate,
healthcare to the low-income in the
Eastern Panhandle.***

The EPCC is frequently asked whether we accept donations of goods. Following is a wish list of frequently used supplies that would be greatly appreciated:

- 13 and 30 gallon trash bags
- Paper towels
- Lysol brand disinfectant wipes
- Copy paper
- Post it notes
- Ball point pens
- White out pens
- Kleenex
- Dry erase markers
- Yellow highlighters
- Sandwich size baggies (ziploc top)
- Lunch size brown paper bags
- Dish soap

For our patients:

- Healthy snacks
- Alcohol wipes