



HAYWOOD COUNTY
BOARD OF COMMISSIONERS

AGENDA REQUEST

Must be presented to the County Manager's Office
NO LATER THAN 5 P.M. FRIDAY 10 DAYS BEFORE THE MEETING

DATE OF REQUEST: 1/25/16

FROM: Milton Butterworth, Blue Ridge Community Health Services (BRCHS) &
Donda Bennett, Good Samaritan Clinic of Haywood County

MEETING DATE REQUESTED: **2/1/2016**

SUBJECT: GSC joining BRCHS to increase services and sustainability of the Haywood County health care safety net.

REQUEST: Letter of Support from Haywood County

BACKGROUND: BRCHS, GSC, County Leadership, and Haywood Regional have been discussing how to work together to improve the safety net in Haywood County for nearly two years.

IMPLEMENTATION PLAN: ASAP; BRCHS/GSC to provide the County with a draft letter of support. County executes approved letter of support.

FINANCIAL IMPACT STATEMENT:

N/A

SUPPORTING ATTACHMENTS: YES NO HOW MANY? 1

LIST: power point

PowerPoint Presentation: YES NO

PERSON MAKING PRESENTATION AT MEETING: Jennifer Henderson

TITLE: BRCHS CEO

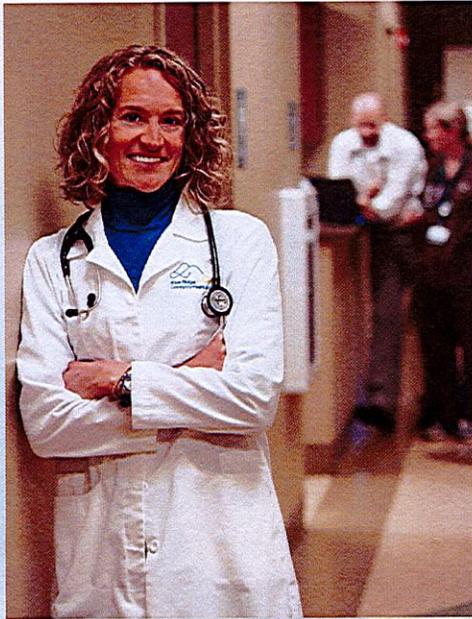
PHONE NUMBER: 828.692.4289.x2509 or x2425 (Milton)

E-MAIL: jhender@brchs.com; mbutter@brchs.com (Milton)

THIS SECTION FOR OFFICE USE ONLY

Received (Date/Time): _____

County Manager / Clerk to the Board Comments: _____



MaryShell Zaffino, MD
Family Medicine, Blue Ridge Health Center

Blue Ridge Community Health Services



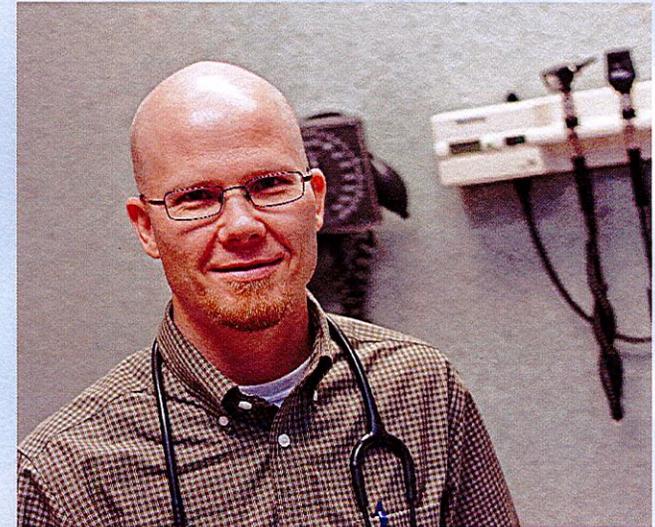
www.BRCHS.com

Federally Qualified Health Centers (FQHC), (aka Health Centers)

Grant program authorized under Section 330 of the Public Health Services Act as amended by the Health Centers Consolidation Act of 1996.

- Community Health Centers (CHC) – Section 330(e)
- Migrant Health Centers (MHC) – Section 330(g)
- Health Care for the Homeless (HCH) – Section 330(h)
- Public Housing Primary Care (PHPC) – Section 330(I)

The “330” grant is offered competitively every three years and reviewed every year.



Andrew Morris, MD
Family Medicine, Hendersonville Family Health Center



Sheila Burnette, Paralegal
"Money wasn't the issue with Blue Ridge; my health was."

What makes Health Centers different from other health providers or doctor offices?

- **Located in or serve a high need community** (designated Medically Underserved Area or Population).
- **Governed by a community board** composed of a majority (51% or more) of health center patients who represent the population served.
- **Provide comprehensive primary health care** services as well as supportive services (education, interpreting and transportation, etc.) that promote access to health care.
- **Provide services available to all** with fees adjusted based on ability to pay.
- **Meet other performance and accountability requirements** regarding administrative, clinical, and financial operations.

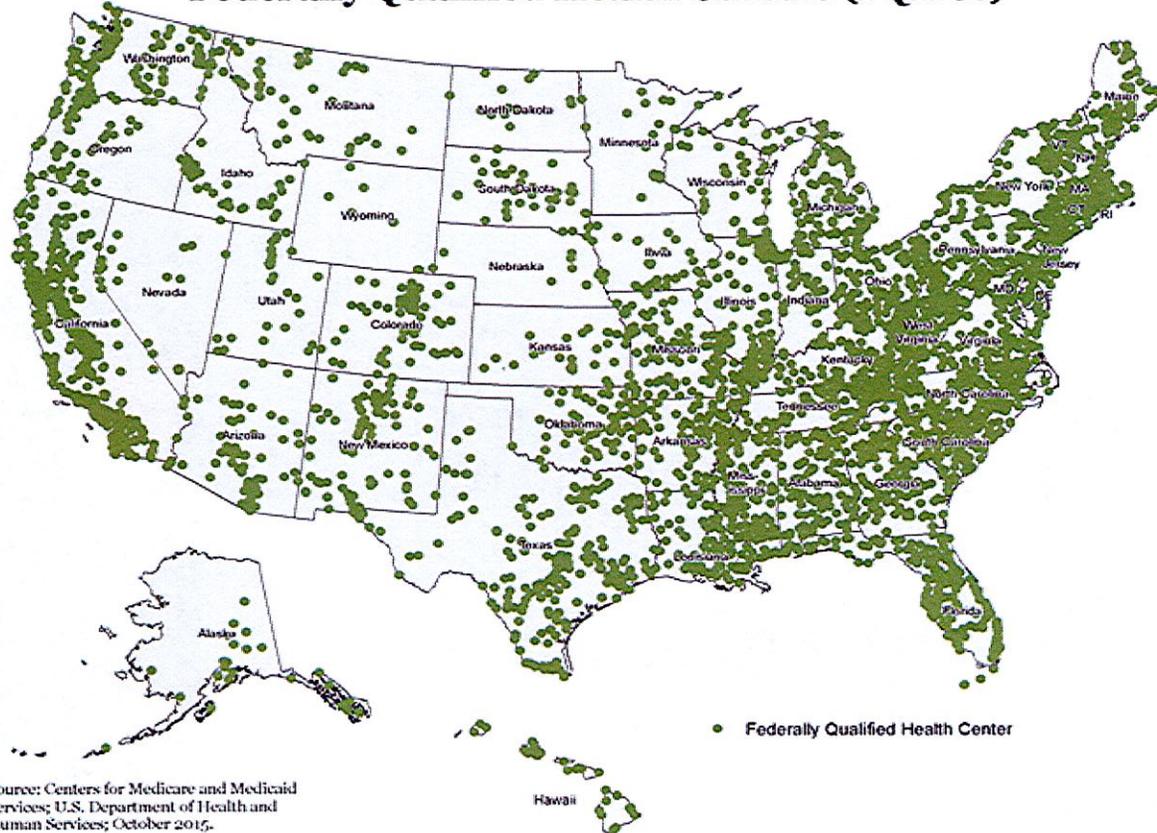


Services

- Comprehensive primary care
- Diagnostic laboratory & radiology services
- Preventive services
- Prenatal, Intrapartum and perinatal services
- Cancer and other disease screening
- Well child services
- Immunizations
- Family planning services
- Preventive dental services
- Mental health services; Psychiatry
- Urgent Care; Minor injuries
- Pharmacy
- Nutrition
- 24/7 access to care
- Eligibility workers
- Case management services
- Interpreting
- Outreach & health education
- Transportation



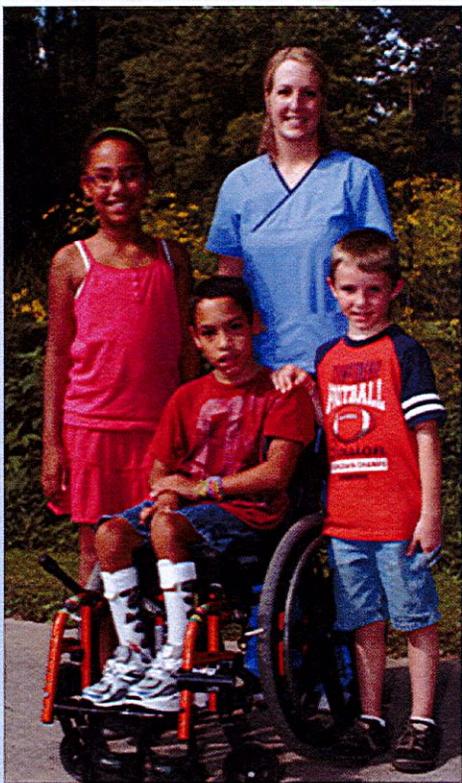
Federally Qualified Health Centers (FQHCs)



Source: Centers for Medicare and Medicaid Services; U.S. Department of Health and Human Services; October 2015.

Note: Alaska and Hawaii not shown to scale

**Largest “network” of primary care providers in the nation—
22+ million individuals receive care in a CHC-- over 84 million patient visits**



Amber Austin

"I feel that I have a doctor in my corner helping me help Trey reach his full potential."

Our Mission

To provide quality healthcare that is *accessible* and *affordable* for all.

Providers/Program

Primary Medical Care

- Family Practice physicians
- Pediatric physician
- Advanced practice providers (NP/PA)
- Family medicine residents (Teaching Health Center)

Dentistry

- Dentists
- Dental Hygienists

Behavioral Health Services

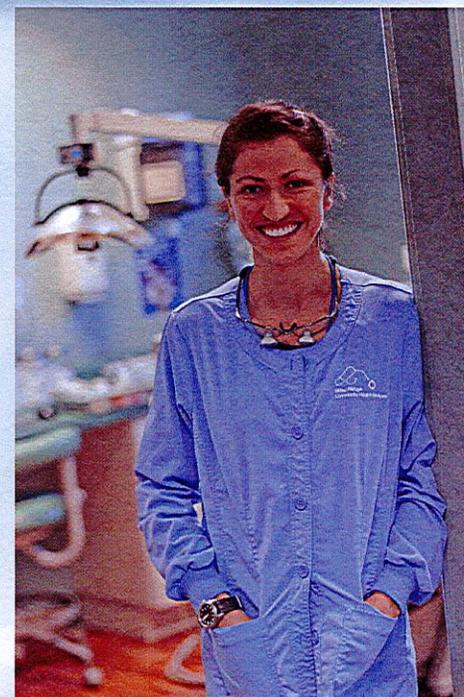
- Psychiatrists; Psych NP
- Counselors (LCSW, LPC, LCAS)

School Health Program – 4 schools with several others “linked”

Licensed Dietitians

Discount Pharmacy Programs

Community Outreach & Health Education



Danielle Rowland, DDS
Brevard Health Center



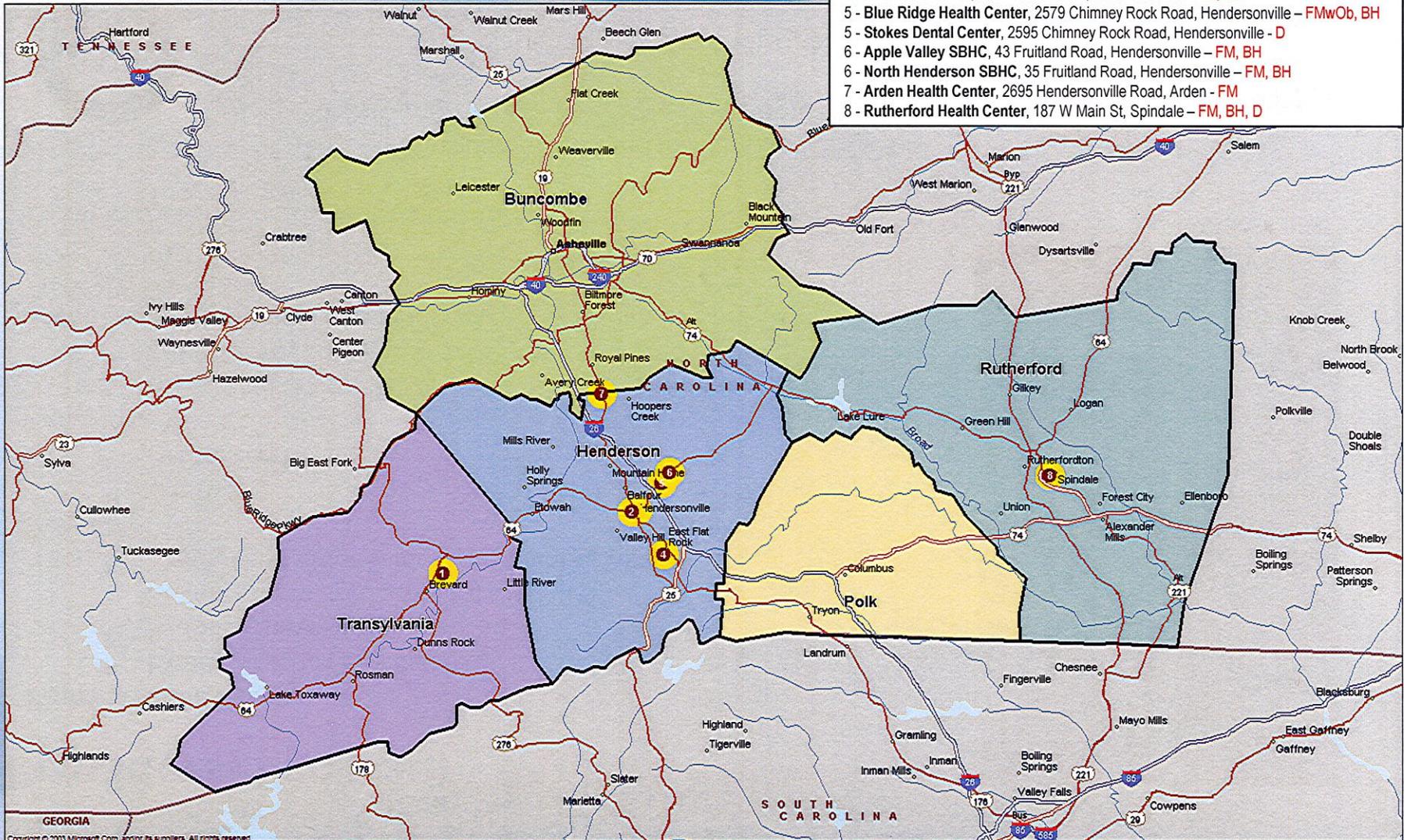
- Joint Commission Accredited for Patient Safety and Quality **-and-** Primary Care Medical Home (PCMH)
- Recognized by National Committee for Quality Assurance (NCQA) as a Level III Patient Centered Medical Home (PCMH)

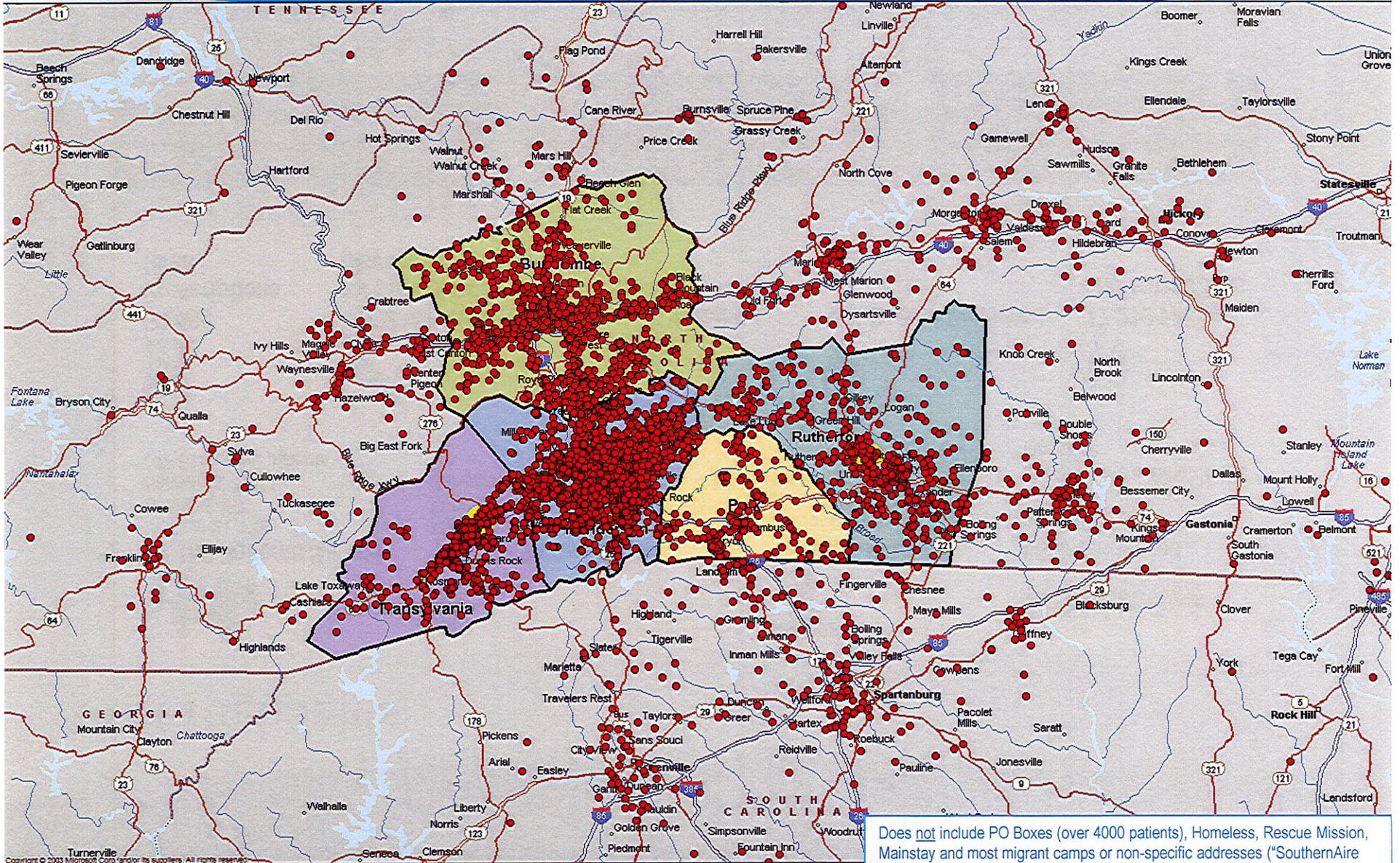




BRCHS Locations & Primary Services:

- 1 - Brevard Health Center, 89 Hospital Drive, Brevard – FM, D, BH
- 2 - Hendersonville Family Health Center, 709 N. Justice, Hendersonville – FMwOb, BH
- 3 - Bruce Drysdale SBHC, 834 N Main Street, Hendersonville – FM, BH
- 3 - Mainstay Domestic Violence Center, Hendersonville - BH
- 4 - Hilldale SBHC, 504 Preston Lane, East Flat Rock – FM, BH
- 5 - Blue Ridge Health Center, 2579 Chimney Rock Road, Hendersonville – FMwOb, BH
- 5 - Stokes Dental Center, 2595 Chimney Rock Road, Hendersonville - D
- 6 - Apple Valley SBHC, 43 Fruitland Road, Hendersonville – FM, BH
- 6 - North Henderson SBHC, 35 Fruitland Road, Hendersonville – FM, BH
- 7 - Arden Health Center, 2695 Hendersonville Road, Arden - FM
- 8 - Rutherford Health Center, 187 W Main St, Spindale – FM, BH, D





Does not include PO Boxes (over 4000 patients), Homeless, Rescue Mission, Mainstay and most migrant camps or non-specific addresses ("SouthernAire Motel #3") cannot be mapped.

2014 Highlights



27,152 Patients Served

Medical 21,138
Dental 6,457
Behavioral 3,911
*42,815 active patients



104,760 Patient Visits

Medical 57,731 (per patient = 2.73)
Dental 13,996 (per patient = 2.16)
Behavioral 16,327 (per patient = 4.17)



Cost per patient

Annual Total \$480.00
Medical \$287.72
Dental \$331.74
Behavioral Health \$589.59



56% Uninsured

23% Medicaid
12% Private Insurance
8% Medicare & Other Public Insurance



58,484
Prescriptions
filled



4,632 vaccines given
for preventable
diseases.



570 Veterans
Served



171 Babies Delivered

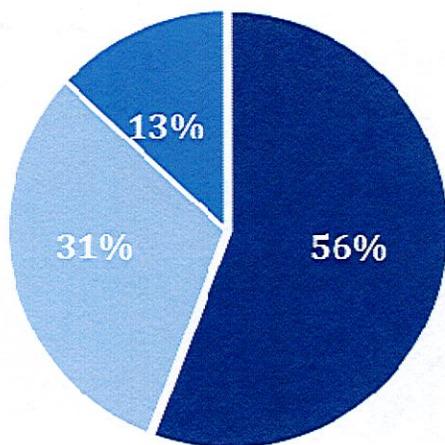


17,219 Fillings
and extractions

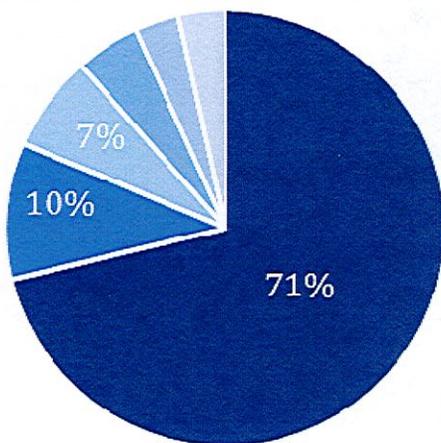
2,000+ children were provided
services in school based health
centers

For the cost of one ER visit,
BR can provide ten patient
visits.

Directly support 200+ jobs;
generate a total payroll over
\$7 million



- Patient Revenue
- Health Center Grant
- Donations & Other Grants

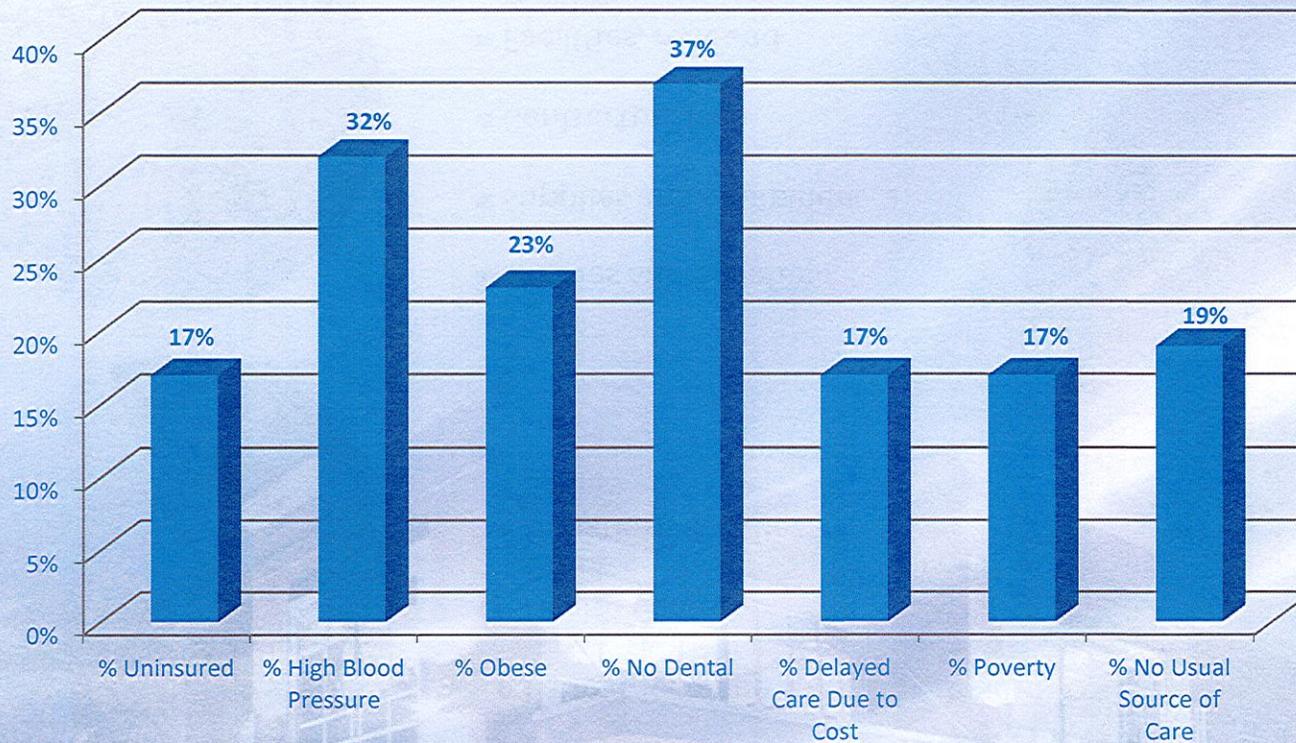


- Salaries and benefits
- Supplies and equipment
- Contractual fees
- Facilities, rent and repairs
- Other expenses



Celestine
Dental Patient

The Need in Haywood County



Uniform Data System
US Census Data
American Community Survey
CDC Behavioral Risk Factor Surveillance System





Timeline

- Summer 2014 - Conversations began with several community partners (Good Samaritan/Mountaintop Healthcare, Health Department, Haywood Regional, etc.) about working together to expand care in Haywood County.
- Re-energized community conversations in early February 2015 and Mountaintop Healthcare Letter of Intent signed September 2015.
- Last week, Haywood Regional committed support to the project which supports a sustainable, long term strategy.
- BRCHS will assume operational responsibility for Mountaintop Healthcare. Currently in collaborative discussions with Good Samaritan about “wrap-around” support services.



Haywood Health Center planned opening May 1, 2016!

- Family Medicine will be offered immediately.
- Behavioral Health and Nutrition will be added as soon as possible.
- Discount medications will be offered at area pharmacies.
- A new, comprehensive patient-centered medical home for Haywood County residents!





Blue Ridge
Community Health Services

Questions?



www.BRCHS.com

BOARD OF COMMISSIONERS

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COUNTY MANAGER
IRA DOVE

COUNTY ATTORNEY
LEON M. KILLIAN, III

February 1, 2016

Jennifer Henderson
Blue Ridge Community Health Services
P. O. Box 5151
Hendersonville, NC 28793

Dear Ms. Henderson,

I am pleased to write in support of access to medical and behavioral health care for low-income men, women and children in our area.

As a representative of local government, I am keenly aware of the needs of those who would otherwise not have access to care. Our community faces a shortage of primary care providers serving the low-income population. The lack of such providers is associated with higher mortality rates and health care disparities. Increased access to these services in Haywood County will result in improved health outcomes and decreased costs for county residents, as well as the county's safety net providers.

Like many communities across the state, our area has seen the effects of the economic downturn. With increases in unemployment, low-wage jobs, and uninsured residents, the need for affordable high quality services has never been greater. BRCHS experience opening new health centers in the region will ensure access to our most vulnerable residents and build upon the investment that our community has made in recent years to provide integrated medical and behavioral health care.

I recognize the cost for providing care for the uninsured continues to increase and strain the overall healthcare system in our community and that BRCHS will help reduce this strain by serving as a high quality, cost effective alternative to the emergency room by offering a medical home for underserved patients.

I believe the expansion of uninsured and under insured services into Haywood County will positively impact the health and wellbeing of Haywood County individuals and families. I support BRCHS application to add a community health center location to increase access for the underserved of Haywood County.

Sincerely,

Mark Swanger, Chairman
Haywood County Board of County Commissioners