



YEAR 3 SUMMARY

January 1, 2007 through December 31, 2007

- Value of donated care \$1,431,996.28
- Number of patients assisted 239
- Number of participating physicians 100
- Number of Office Visits 911 (average of 3.8 per patient)

- Expenses incurred \$146,155.66
- Return on Investment \$9.80 per \$1 of administration (980%return)

MEETING OUR GOALS

1) Increase the number of uninsured residents who receive consistent care

112 patients were carried over from Year 2 to Year 3 and 127 "new" patients were enrolled during 2007, yielding a total of 239 served during 2007. This is an increase of 28.5% (53) from Year 2. During the year, 911 visits were provided at no charge (average of 3.8/patient).

2) Reduce the number of unnecessary ER visits by the vulnerable population

During 2007, DC-CAP patients went to the ER 75 times. Of these ER visits, 48 (64%) were designated as true emergencies while the remaining 27 visits (36%) were for non-emergency complaints. Overall, there was a 22% decrease of all emergency room visits by DC-CAP patients (comparing Year 2 to Year 3). An important point to make is that we had a decrease of 37.7% for non-emergent visits.

3) Improve access to prescription drugs for the uninsured population

234 (98%) of enrolled DC-CAP patients utilized the program's prescription benefit component. Through the program's dual approach, a combined total of \$190,999.91 worth of medications were provided to patients. 103 DC-CAP patients (43%) received 1295 prescriptions (\$30,078.22) through a relationship with a prescription benefit manager (RESTAT). The 2nd part of DC-CAP's Prescription Assistance Program (PAP) helped 82 DC-CAP patients (54%) receive 556 prescriptions (\$160,921.69). An additional 49 (20.5%) patients participated in RESTAT and PAP. Patients shared in \$8,051.43 of the costs of their prescriptions (through co-pays). This shared costs accounted for only 4% of their total prescription costs. DC-CAP patients benefited from prescription help (RESTAT and PAP) on average totaling \$816.24 per patient.

4) Provide an avenue for increased collaboration between social services entities in the Owensboro/Davies County community

This year, DC-CAP recruited 15 new medical providers to donate needed medical care. DC-CAP forged relationships with KCI (durable medical equipment company), Centro Latino, Komfort Kabs, OCTC, Lion's Club, Free Clinic of Owensboro, River Valley Behavioral Health, McAnley Clinic, Boulware Mission, and OASIS Spouse Abuse Shelter.

5) Generate health and demographic data on our target population that has been "lost" in the past

The iREACH system, which DC-CAP uses to manage data on patients and their care, collects a variety of information on patient visits (CPT Codes) and diagnoses (ICD-9 Codes) as well as demographic information that can be used to better serve our target population. DC-CAP program is utilizing the system in its entirety in order to closely track medical, education and other useful data for our community at large.