

***Healthcare Advisory Board***

***FY 06/07  
Annual Report***

**Presented to the  
Board of County Commissioners  
September 2, 2008**

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## I. BACKGROUND

On January 29, 2002, the Board of County Commissioners (BOCC) adopted Resolution 02-05 requiring the Primary Healthcare Implementation Advisory Board (PHIAB) to report annually on the effectiveness of the Primary Healthcare Program for the uninsured and to report its findings and recommendations for programmatic improvements.

The Leon County Primary Healthcare Program (CareNet) is comprised of Bond Community Health Center, Inc. (Bond), Neighborhood Health Services, Inc. (NHS), the We Care Network of the Capital Medical Society Foundation (WeCare), the Leon County Health Department (LCHD), Tallahassee Memorial HealthCare (TMH), Capital Regional Medical Center (CRMC), Florida State University College of Medicine (FSU), Florida A&M University College of Pharmacy and Pharmaceutical Sciences (FAMU) and Tallahassee Community College (TCC). Through Leon County and the Leon County Health Department, the CareNet program received Health Resources and Services Administration (HRSA) Community Access Program (CAP) grants for information systems, marketing services, and other purposes.

On January 10, 2006, the PHIAB recommended that the Board of County Commissioners pursue the development and implementation of a Comprehensive Healthcare Plan for the uninsured and indigent citizens of Leon County. The Board voted to accept PHIAB's report and authorized the County Administrator to hire a consultant to develop a Comprehensive Healthcare Plan for the community. Leon County hired Mercer Government Human Services Consulting (Mercer) in January 2006. Mercer met with the many stakeholders of the County's current primary healthcare program, and over the course of three months, completed their report. The PHIAB met on April 24, 2006 and May 3, 2006 to discuss the Mercer report and deliberate recommendations to forward to the Board for consideration.

At the Board's regularly scheduled meeting on May 23, 2006, the PHIAB submitted recommendations to the Board, which included implementing an Administrative Services Only (ASO) model to deliver care to the uninsured and pursuing a ½ cent sales tax referendum to fund the Comprehensive Healthcare Initiative. At that time, the Board voted to adopt the PHIAB's recommendations and directed staff to prepare an ordinance providing for the imposition of the ½-cent surtax and healthcare plan for providing healthcare services to the indigent and medically poor persons of Leon County, Florida. On November 7, 2006, the ½ cent surtax was voted on in the 2006 Mid-term election, and was defeated.

During the May 10, 2007 PHIAB meeting, the PHIAB discussed their role in the healthcare process in Leon County. After consideration, the members concluded that the PHIAB should play a continuing role in the monitoring of County funds allocated for primary healthcare to assure that public funding was utilized in a cost effective manner.

The PHLAB presented their recommendation during the regular meeting of the Board of County Commissioners held September 11, 2007. The Board voted to follow the PHLAB's recommendation for the PHLAB to monitor the;

- Health status of the Leon County Community and its citizens so as to achieve maximal achievable good health for the community and all citizens; and
- The areas of health care problems or disease states threatening the good health of the community or its citizens and to seek solutions to rectify such problem areas; and
- The need, viability, and cost effectiveness of health care proposals that require County funding.

Additionally, the Board voted to expand the advisory role of the PHLAB and followed the recommendation to change the name of PHLAB to the Healthcare Advisory Board (HAB). Furthermore, the Board voted to adopt a revised Statement of Purpose for the HAB which is included in the HAB bylaws.

#### Statement of Purpose

*"It shall be the duty of the Health Care Advisory Board to monitor the health care status of the Leon County Community and its citizens to achieve maximal achievable good health for the community and all citizens. Identify areas of health care problems, disease states, or access issues threatening the good health of the community and its citizens. Identify potential solutions to rectify those problems areas. Review health care proposals that request county funding or approval and advise the County Commission concerning the need, viability, and cost effectiveness. Review and analyze the effectiveness of Leon County's health care services and programs for indigent and uninsured residents of Leon County and to report to the Board their findings and recommendations, annually, or as necessary."*

The HAB also established the following five priorities or goals for FY 2006-2007;

1. To define the mission of the HAB in response to the revised bylaws and name of the advisory board.
2. Continue to support the funding of the CareNet program through the Primary Healthcare Municipal Service Taxing Unit (MSTU).
3. Continually support both Bond and NHS in their efforts to provide healthcare to the indigent residents of Leon County.
4. Focus attention on several community health indicators such as infant mortality, mental healthcare in the jail, and local breast cancer and prostate cancer rates.
5. Continue to work with Capital Regional Medical Center and Tallahassee Memorial Hospital to reduce the over utilization of the emergency rooms for non-emergency care.

#### The Primary Healthcare Services Delivery System

The CareNet program is a public/private sector partnership between the Board of County Commissioners and a voluntary coalition of healthcare providers. The CareNet program is designed for the purpose of providing cost effective primary and specialty healthcare services to low-income and uninsured citizens of Leon County.

### CareNet Goals and Objectives

- To provide access to primary and specialty healthcare services in the most cost effective and efficient manner.
- To leverage County, State, Federal and private funds to the highest extent possible
- To establish continuity of primary care relationships and reduce non-emergent hospital emergency room visits by Leon County residents.
- To maintain high regard and respect for individual dignity.

### Primary Care

Both Bond and NHS (hereafter referred to in combination as health centers) provide primary care to uninsured residents of Leon County. Both health centers provide a wide range of primary healthcare services for children and adults. The health centers accept patients by appointment or walk-in and upon referral from hospital emergency departments. Both Bond and NHS provide social workers and case managers for patient follow-up. Both health centers offer extended-hours of operation for medical service delivery and are well situated to public transportation. Relative ease of access is provided with Bond at two locations: 710 West Orange Avenue and 872 West Orange Avenue and NHS at 438 West Brevard Street.

The health center facilities offer on-site laboratory services, on-site care and case management for patients with diabetes and hypertension.

Both Bond and NHS conduct community health screenings for early detection of chronic conditions of asthma, diabetes, and hypertension.

### Specialty Physician Care

Significant to the delivery of healthcare services is the continuum of care and added value of the We Care Network of the Capital Medical Society Foundation. The We Care Network relies upon the availability of physician volunteers. Availability of specialty care is limited by the capacity of various volunteer specialists who donate their services.

### Prescription Services

The Florida A&M University College of Pharmacy and Pharmaceutical Sciences provides prescription drug services at Bond and NHS. Pharmacy services are supported by FAMU, with prescription drug cost being substantially reduced by the participation of the FAMU pharmacy in the federal prescription drug purchasing program. The pharmacy programs also provide FAMU the opportunity to take advantage of the drug manufacturers special low-income and uninsured programs. Additionally, the FAMU pharmacies also provide educational services on appropriate drug usage and disease management counseling.

## II. HISTORICAL FUNDING OF CARENET PROGRAM

The total current funding provided by the Board of County Commissioners to deliver primary healthcare to the uninsured residents of Leon County is \$1.2 million. Initially, the Leon County Board of County Commissioners approved a Municipal Service Taxing Unit (MSTU) of .50 (1/2 cent) maximum millage. In the program's first year, the MSTU's millage rate was .06 mil. This millage rate generated \$458,000 and \$567,000 from the general funds revenue of Leon County, plus \$175,000 in federal Medicaid match monies totaling \$1.2 Million for the program. In FY 2002/2003 the Board of County Commissioners approved the full funding of the CareNet through a .12 MSTU millage rate.

In September 2004, Leon County Board of County Commissioners approved a .22 MSTU for FY 04-05. The .22 MSTU provided health care services through the CareNet and for funding of women's health services at Bond for three years. The Municipal Service Taxing Unit's millage rate was returned to its .12 level by Board of County Commissioner during the FY 2005/2006 budget process.

During the FY06/07 Budget workshops, the Board reduced the Primary Healthcare MSTU from 0.12 mils (generating approximately \$1.7 million) to 0.00 mil., in order to prevent double taxation if the ½ cent sales tax for healthcare was adopted. The funding for the FY 06/07 CareNet contracts was established through use of the Primary Healthcare MSTU fund balance and general revenue.

From 2001 to 2004, Bond and NHS were compensated by the County based upon the cost of personnel, pharmaceuticals, and services. The reimbursement was in 12 equal payments and did not consider the number of clients served. During the FY 03-04 annual report to the Board, the PHLAB recommended that Bond and NHS be compensated on a per-patient visit basis.

The PHLAB members believed that the per-visit method of compensation was a more equitable basis of compensation as it enables the healthcare centers to be paid on the basis of patient volume.

In FY 2005/2006, two changes were made in the structure of the primary healthcare contracts: pharmaceutical services were segregated from the contracts with the health centers, redirecting the funding to the FAMU School of Pharmacy; and, the method of funding was changed from payment for operating expenses to reimbursement on a per-patient visit basis. Initially the compensation rate was \$75 per-patient (2005/2006) and was increased to \$80 per-patient the following fiscal year. The current compensation rate has remained at \$80 per-patient visit for the 2007/2008 Contracts.

**Bond Community Health Center, Inc.**

The CareNet program funding to Bond is in the form of allocations for medical personnel. Bond has a Registered Nurse/Licensed Practical Nurse, and one to two medical support personnel as needed. CareNet Expenditures, by health center, for the past three fiscal years is as follows:

**Table # 1 Bond Primary Healthcare Funding FY 04/05 to 06/07**

<b>Fiscal Year</b>	<b>FY 2004/2005</b>	<b>FY 2005/2006</b>	<b>FY 2006/2007</b>
BOCC Contract Amount	\$468,980	\$329,380	\$329,380
LCHD Contract Amount	\$191,250	\$191,250	\$191,250
<b>Total PHP Funding</b>	<b>\$660,230</b>	<b>\$520,630</b>	<b>\$520,630</b>

**Table # 2 Bond Patient Volume FY 04/05 to 06/07**

	<b>FY 2004/2005</b>	<b>FY 2005/2006</b>	<b>FY 2006/2007</b>
Leon Co. Primary Care Encounters	5,111	5,565	6,545
Leon Co. Health Dept. Encounters	2,550	2,550	1,912
<b>Total Primary Encounters</b>	<b>7,661</b>	<b>8,115</b>	<b>8,457</b>
Overall Cost per Encounter	\$86	\$64	\$61
Agency Wide Cost per Encounter	\$142	\$144	\$151

Over the past three years, there has been a steady increase in Bond's primary healthcare encounters. Bond provided 7,661 encounters in FY 04/05 and 8,457 in FY 06/07. During FY 04/05 Bond received \$468,980 in allocations from the Board for primary healthcare encounters and prescription services. During the two subsequent years of funding Bond received \$329,380 in county funding. Due to the increase in the number of encounters and the decrease in direct funding Bond has been able to lower the cost per encounter over the past three fiscal years from \$86.18 to \$61.56 per encounter. The lower funding level was due to the addition of the FAMU pharmacy into the CareNet program. Both Bond and NHS originally were provided funding for primary healthcare encounters and prescription assistance that passed through the health centers to FAMU for prescription services. Additionally, a portion of the funding that is allocated to Bond is passed through to ACHA which allows Bond to leverage state and federal funding for primary care encounters during expanded hours of service. With those leveraged resources for expanded hours Bond is able to provide more encounters for the funding that they receive. Due to the increased cost of medical services, the HAB is recommending that both health centers be reimbursed on a per encounter basis at a rate of \$120 per encounter in future years.

**Neighborhood Health Services, Inc.**

For Fiscal 06-07, NHS, elected to receive compensation on the per-encounter basis. However, at the end of the FY 06/07 year NHS approached the HAB for a lump sum payment of \$161,500. The funding was remaining in the primary healthcare funding allocated for NHS. After reviewing the NHS request the HAB made the formal recommendation that NHS be granted the remaining allocated NHS balance in the primary healthcare fund to the Board of County Commissioners. The Board approved the first contract amendment to the NHS contract along with the lump sum payment based on the HAB's recommendation during the regular Board meeting held on September 11, 2007.

Table # 3 NHS Primary Healthcare Funding FY 04/05 to 06/07

<b>Neighborhood Health Services</b>	<b>FY 2004/2005</b>	<b>FY 2005/2006</b>	<b>FY 2006/2007</b>
BOCC Contract Amount	\$494,780	\$ 355,000	\$ 355,000
LCHD Contract Amount	\$191,250	\$191,250	\$191,250
<b>Total PHP Funding</b>	<b>\$660,230</b>	<b>\$520,630</b>	<b>\$520,630</b>

NHS has received similar funding as Bond in order to provide primary healthcare to indigent residents. The decrease in funding from FY 04/05 to FY 05/06 was due to the FAMU pharmacy becoming a direct partner in the CareNet program. To facilitate the prescription services provided by FAMU to the CareNet program, the Board decided to directly fund the FAMU pharmacy program in lieu of providing funding for prescription services to the Health Centers as pass through as done in FY 04/05 and prior years.

NHS receives a higher amount of direct funding from the Board because they do not have the ability to leverage state and federal funding as they are not a Federally Qualified Healthcare Center (FQHC) and are not able to bill for Medicaid.

Table # 4 Neighborhood Health Services Patient Volume FY 04/05 to 06/07

	<b>FY 2004/2005</b>	<b>FY 2005/2006</b>	<b>FY 2006/2007</b>
Leon Co. Primary Care Encounters	7,291	4,340	3,145
Leon Co. Health Dept. Encounters	2,550	2,550	1,912
<b>Total Primary Encounters</b>	<b>9,841</b>	<b>6,890</b>	<b>5,056</b>
Overall Cost per Encounter	\$67	\$75	\$103
Agency Wide Cost per Encounter	\$78	\$114	\$139

NHS reports a significant decrease in encounters over the past three fiscal years. In FY 04/05 NHS reported 7,291 encounters paid for with primary healthcare funding from the Board. In FY 06/07 NHS reported 3,145 encounters which represented a 46% decrease in the number of encounters over the three year period of time. The decrease in the primary healthcare encounters performed by NHS paired with their direct funding led NHS to experience a 35% increase in the cost per encounter.

Additionally, NHS reports that their overall agency cost per encounter has increased from \$77.95 per encounter for FY 04/05 to \$139.41 in FY 06/07. This represents a 45% increase in operating cost on the per encounter basis for NHS with regards to the provision of primary healthcare encounters.

**We Care Network**

The CareNet program funding to the We Care Network is in the form of allocations for personnel. We Care has a Project Coordinator, Case Manager, and a Case Management Aide. We Care also receives funding for operating and capital outlay expenses. We Care expenditures for FY 04/05 to 06/07 were as follows:

**Table # 5 We Care Funding FY 04/05 to 06/07**

<b>Staffing</b>	<b>FY 2004/2005</b>	<b>FY 2005/2006</b>	<b>FY 2006/2007</b>
<b>Contract Amount</b>	<b>\$90,043</b>	<b>\$ 90,043</b>	<b>\$90,043</b>

The We Care program reports that they are currently experiencing some capacity limits with regard to the following services; Gynecology, Neurology, Endocrinology, and Gastroenterology. In some of their cases We Care reports that the number of their referrals received never reaches the capacity of available volunteer commitments.

Overall, the We Care program has provided a total of 3,236 case management services over the past three fiscal years with the cumulative value of \$6,148,228. We Care has experienced an overall increase in the number of clients served in all three categories; Referred by CareNet Partners, New Unduplicated Cases and Short Term Case Management provided.

**Table # 6 We Care Patient Volume FY 04/05 to 06/07**

	<b>FY 04/05</b>	<b>FY 05/06</b>	<b>FY 06/07</b>
<b>Referred by CareNet Partners</b>	<b>507</b>	<b>592</b>	<b>551</b>
<b>New Unduplicated Cases</b>	<b>183</b>	<b>267</b>	<b>225</b>
<b>Short Term Case Management</b>	<b>159</b>	<b>130</b>	<b>195</b>
<b>Total Referrals</b>	<b>821</b>	<b>1,248</b>	<b>1,167</b>

Table# 7 We Care Value of Services FY 04/05 to 06/07

	<b>FY 2004/2005</b>	<b>FY 2005/2006</b>	<b>FY 2006/2007</b>
Hospitals	\$1,402,326	\$1,652,797	\$1,238,304
Physicians	\$551,398	\$637,709	\$505,843
Labs	\$59,157	\$49,575	\$51,117
<b>Total</b>	<b>\$2,012,882</b>	<b>\$2,340,082</b>	<b>\$1,795,264</b>

**Florida A&M University College of Pharmacy**

On June 9, 2005, the PHLAB approved the unification of pharmacy services for the CareNet under the auspices of FAMU College of Pharmacy. The unification of the pharmacy services enhanced the primary healthcare programs' efficiency by permitting the development of a community-wide formula for use by Health Center and hospital healthcare providers of the uninsured. The unification of pharmacy services also allowed for the same level of pharmaceutical services regardless of primary care provider, including the clients of the Primary Healthcare Program.

The participation in drug manufacturer's bulk drug replacement programs was also gained with the inclusion of the FAMU College of Pharmacy in the CareNet program. Currently, all of the service locations are electronically linked for access to the RX30 program for electronic filing of Patient Assistance Applications by all providers.

Table #8 FAMU Pharmacy Contract Amount

	<b>FY 2004/2005</b>	<b>FY 2005/2006</b>	<b>FY 2006/2007</b>
Pharmacy Services	N/A	\$285,766	\$355,000

In FY05/06, FAMU entered into the Primary Healthcare Program and received \$285,766 from the Board (Table #8). During that year the two FAMU pharmacies filled 48,655 prescriptions with an approximate retail value of \$3,700,362. In order to address the demand experienced in the preceding year FAMU was allocated \$355,000 in FY 06/07. The FAMU pharmacy program filled 36,314 prescriptions at a value of \$3,201,656 in FY 06/07.

As depicted in Table #9, FAMU pharmacy experienced a decrease of 12,341 prescriptions filled under the Primary Healthcare Program in FY 06/07. According to Pharmacy personnel, this decrease can be attributed to FAMU pharmacy "competing" with national retailers such as Wal-Mart, Walgreen's, CVS and Target who have also begun to offer lower cost prescription services to their customers. With the increased number of retailers and locations offering \$5 and \$10 generic prescription services, Leon County residents are now able to purchase medicine at these various retailers located around the county and no longer only have the FAMU pharmacy as the sole source for heavily discounted prescription services.

**Table # 9 Value of FAMU Prescription Services**

Facility	Prescription Services	Prescriptions Filled	Value
FY 2005/2006	\$285,766	48,655	\$3,700,361
FY 2006/2007	\$355,000	36,314	\$3,201,656

**Leon County Health Department (LCHD) and CareNet (LCPHP)**

The purpose of CareNet program is to meet the unanswered healthcare needs of qualified Leon County citizens. Both Health Center facilities also participate in the some of the state and federal programs. With the CareNet established to supplement the federal and state existing programs, a need to identify patients as Leon County Health Department (LCHD) and/or CareNet (LCHCP) clients was created. A means of identifying patients as LCHD or LCHCP was developed by creating a database of each participant in the state and federal programs. Health center facilities have the capability of identifying LCHD patients. Mandatory monthly reporting is required of health center facilities and, contains the following details to ensure that patients are not duplicated by receiving treatment from multiple programs for the same encounter:

- A comprehensive list of all clients registered for the period with a unique patient identifier and program start date.
- The number of total patients seen for the period and total number of patient encounters.
- The number of LCHD & LCPHP patients seen and number of patient encounters.
- The total amount of sliding scale fee revenues collected with the number of patients charged.

The database of existing patients has been created and is providing health centers with the capability to determine if the patient is a LCHD and/or LCPHP. Further, the monthly reports are verified and audited for accuracy under agreement with the Leon County Health Department. The Health Center's monthly reports are verified by CareNet staff. The Health Centers information system development activities have been funded by grants from the federal Health Resources and Services Administration (HRSA).

**Program Accountability**

To ensure success of the program and provide a necessary level of accountability the following elements are included in each of the contracts. These provisions include:

- No funds for staffing will be provided until such time as the staff member has been hired and present on duty station.
- All invoicing and reporting must be completed prior to the disbursement of funds.
- LCHD and LCPHP patient reports, total patients served, encounters and sliding fee revenue must be reported.
- Termination clause if funds not appropriately expended.
- Restriction of county funding to verified Leon County residents only

### III. UNCOMPENSATED HOSPITAL CARE

Capital Regional Medical Center (CRMC) and Tallahassee Memorial Healthcare (TMH) provide inpatient care for referrals from the We Care Network. Historically, the inpatient hospital services have been provided without charge.

#### Tallahassee Memorial Hospital

According to the Agency for Health Care Administration (AHCA), during FY 06/07, Tallahassee Memorial Hospital experienced a total of \$63,082,178 in the provisions of charity care for which they were not compensated (Table #10 below). This represents an 18% increase over FY05/06. Over the past three years, TMH has experienced a loss of almost \$110 million dollars in Bad Debt. Additionally, TMH has provided \$62 million dollars worth of charity care during the same period of time. ACHA reports that TMH has experienced \$172 million loss in uncompensated care over the past three fiscal years.

*Table # 10 TMH Bad Debt and Charity Care for FY 04/05 to 06/07*

Tallahassee Memorial Hospital	FY 2004/2005	FY 2005/2006	FY 2006/2007	3-Year Total
Bad Debts	\$32,369,476	\$33,434,528	\$43,858,189	\$109,662,193
Charity Services	\$19,375,703	\$21,670,961	\$22,035,514	\$63,082,178
<b>Total Uncompensated Care</b>	<b>\$51,745,179</b>	<b>\$55,105,489</b>	<b>\$65,893,703</b>	<b>\$172,744,371</b>

#### Capital Regional Medical Center

As shown in Table #11, Capital Regional Medical Center provided \$4,572,246 in uncompensated care for FY06/07. This represents a decrease of approximately 22% when compared to FY05/06. Over the past three year, CRMC has experienced a loss of roughly \$51 million in Bad Debt. According to ACHA, CRMC has provided approximately \$13 million dollars worth in charity care during the same period of time. The overall loss experienced by CRMC in uncompensated care of the past three years has been \$64 million.

*Table # 11 CRMC Bad Debt and Charity Care for FY 04/05 to 06/07*

Capital Regional Medical Center	FY 2004/2005	FY 2005/2006	FY 2006/2007	3-Year Total
Bad Debts	\$19,896,067	\$13,479,645	\$17,794,571	\$51,170,283
Charity Services	\$2,701,864	\$5,598,764	\$4,572,246	\$12,872,874
<b>Total Uncompensated Care</b>	<b>\$22,597,931</b>	<b>\$19,078,409</b>	<b>\$22,366,817</b>	<b>\$64,043,157</b>

The total uncompensated care provided by the hospitals in Leon County for FY 2006/2007 was \$88,260,520. Due to the current healthcare system, uncompensated care directly increases the cost of health care for the insured citizens. The amount of uncompensated care provided in the local area increases healthcare cost for the residents and employers in Leon County.

Table #12 depicts the last three fiscal years of the total uncompensated care experienced by both of the hospitals located in Leon County. ACHA defines Total Uncompensated Care as the total of both the expense of Bad Debt and the value assigned to Charity Care provided by the Hospitals.

*Table # 12 Uncompensated Care for TMH and CRMC 04/05 to 06/07*

	FY 2004/2005	FY 2005/2006	FY 2006/2007
Total Bad Debt	\$52,265,543	\$46,914,173	\$61,652,760
Total Charity Services	\$22,077,567	\$27,269,725	\$26,607,760
<b>Total Uncompensated Care</b>	<b>\$74,343,110</b>	<b>\$74,183,898</b>	<b>\$88,260,520</b>

#### IV. OVERUTILIZATION OF EMERGENCY ROOMS

The emergency departments of both Tallahassee Memorial Hospital and Capital Regional Medical Center continued to experience an overall high demand for emergency services.

*Table #13 Non-Emergency ER Visits by County of Residence*

Facility	FY 04/05			FY 05/06			FY 06/07			3-Year Total ER Visits
	TMH ER Visits	CRMC ER Visits	TOTAL ER Visits	TMH ER Visits	CRMC ER Visits	TOTAL ER Visits	TMH ER Visits	CRMC ER Visits	TOTAL ER Visits	
Leon	16,590	17,635	34,225	14,319	22,957	37,276	11,619	23,468	35,087	106,588
Neighboring Counties	6,884	7,038	13,922	6,811	7,389	14,200	5,578	7,553	13,131	41,253
Southern Georgia	271	1,177	1,448	257	1,724	1,981	207	1,763	1,970	5,399
Other/Unknown	2,644	314	2,958	2,225	212	2,437	1,764	217	1,981	7,376
<b>Total</b>	<b>26,389</b>	<b>26,164</b>	<b>52,553</b>	<b>23,612</b>	<b>32,282</b>	<b>55,894</b>	<b>19,168</b>	<b>33,001</b>	<b>52,169</b>	<b>160,616</b>

As depicted in Table #13, in FY06/07, 35,087 Leon County residents received non-emergency care services at both TMH and CRMC. That equates to an overall 5% decrease when compared to FY05/06. Although both hospitals have seen a slight decrease when comparing the previous year, there was a slight increase over FY04/05. The overall average percentage increase in County residents receiving non-emergency care from both hospitals from FY04/05 to FY06/07 is 4%. Additionally, 35% of Non-emergency Hospital Emergency Department Visits at TMH are from outside Leon County while 32.6% of Non-emergency Hospital Emergency Department Visits at CRMC are from outside Leon County.

**V. CARENET FY06/07 STATISTICS**

During FY06/07, CareNet provided primary and specialty care for 10,857 Leon County citizens. These patients represent an attainment of two hundred and forty (240%) of the targeted number (4,500) of patients established at the inception of the program. Bond's number of patients provided service has increased by 980 patients while their per patient cost has decreased by \$8.86 per patient. However, the number of patients seen at NHS has decreased by 1,195 patients while their cost per patient has increased by \$31.10. We Care's number of patients provided service has decreased by 81, while the per patient cost has increased by \$5.01.

*Table # 14 2-Year CareNet Comparison*

Facility	FY 05/06 Contract	FY 06/07 Contract	Inc/Dec	FY 05/06 Patients	FY 06/07 Patients	Inc/Dec	FY 05/06 Cost Per Patient	FY 06/07 Cost Per Patient	Inc/Dec
Bond	\$329,380	\$329,380	0	5,565	6,545	980	\$59.19	\$50.33	\$ 8.86
NHS	\$355,000	\$355,000	0	4,340	3,145	(1,195)	\$81.78	\$112.88	\$ 31.10
WE Care	\$90,043	\$90,043	0	1,248	1,167	(81)	\$72.15	\$77.16	\$ 5.01
FAMU Pharmacy	\$285,766	\$355,000	69,234	N/A	N/A		N/A	N/A	N/A
<b>Total</b>	<b>\$1,060,189</b>	<b>\$1,129,423</b>	<b>\$69,234</b>	<b>11,153</b>	<b>10,857</b>	<b>(296)</b>	<b>\$213</b>	<b>\$240</b>	<b>\$27</b>

**Leveraged Resources**

The CareNet program is committed to leveraging resources to the fullest extent possible. In that endeavor, the CareNet program has benefited significantly from in-kind and volunteer contributions. The total contributions to the CareNet program were in FY 05/06 were more than \$3.6 million which allowed for 11,153 encounters to be made possible with more than 48,000 prescriptions filled. In FY 06/07 10,857 encounters were made possible by \$2.5 million in resources leveraged with 36,000 prescriptions filled.

*Table # 15 Leveraged Resources for FY 05/06 and 06/07*

Donor	FY 05/06	FY 06/07
Florida A&M University, Florida State University College of Medicine, Administrative & Medical Svcs	\$800,120	\$343,117
Capital Medical Society, CRMC, and TMH	\$2,340,083	\$1,795,264
Quest Diagnostics, Inc	\$530,938	\$442,525
<b>Total</b>	<b>\$3,671,141</b>	<b>\$2,580,906</b>

**Community Benefit**

All citizens of Leon County pay for healthcare services for low-income and uninsured citizens through direct and indirect expenses. At times these expenses are evident in higher hospital and insurance costs. At other times the expenses are evident in higher costs of social programs. The table below demonstrates the more evident value of the CareNet. Values presented are net of cost and represent savings or avoided expense.

*Table # 16 Community Benefit of CareNet program for FY 2006/2007*

<b>Function</b>	<b>Description</b>	<b>Value</b>
Value of Volunteered Services and In-Kind Contributions	WeCare Network, TMH and CRMC	\$2,580,906
Prescriptions Filled	36,314	\$3,201,656 (FAMU)
Total Community Benefit to County		\$5,782,562
Total CareNet Expense		\$1,129,423

In FY 06/07 the Leon County Community realized over a 5:1 return on the investment made by the Board of County Commissioners in the CareNet Primary Healthcare Program. By partnering with multiple organizations within the community by leveraging volunteers and in kind contributions, over 10,000 healthcare encounters were provided and more the 36,000 prescriptions filled to low income Leon County residents.