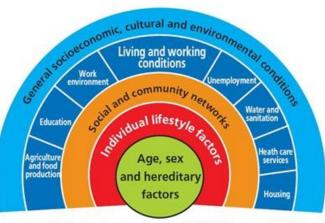


Community + Clinic Partnership

extending reach and driving value

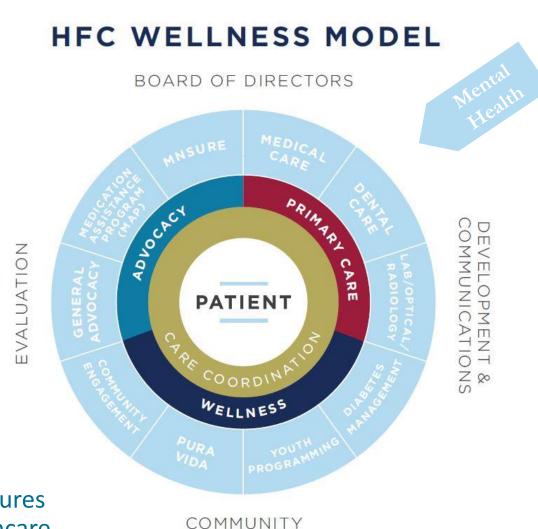






The Determinants of Health (1992) Dahlgren and Whitehead

Since 2002, we've been leading the way in addressing and eliminating health inequities and creating a vision that ensures every person in Rice County feels secure about their healthcare.



Community Engagement and Health

HealthFinders

Organization-Wide Charge, has been foundation to development of programs. A few of the many examples:

- ✓ Latino Teen and Family Equity
- ✓ Dental program
- ✓ Mental health
- ✓ Culture-specific wellness programs



Raise voice of community

BOD: Community
Engagement Committee

Community Engagement staff
(CHW, Advocates, Navigators)

Adapt existing programs

Develop new programs







Certified Health Care Home Certified Essential Community Provider

Improving Health. Improving Lives.

IMPROVED OUTCOMES

Biomarkers, like A1C and systolic blood pressure (SBP), provide evidence that our patients are **getting healthier**.

With our community-driven model of wellness care, diabetic patients who **achieved control** of their diabetes increased by 16%, and those gaining control of their A1C increased by 32%. Patients improving their blood pressure increased by 82%.



Every \$1 invested in HFC is leveraged into \$16.5 of impact.

At <u>each</u> of the two local hospitals HFC prevents at least:

-one unnecessary ER visit per day and

-one inpatient admission per week

Improving Health. Improving Lives.



16x ROI

2021: Owatonna Merger and Expansion

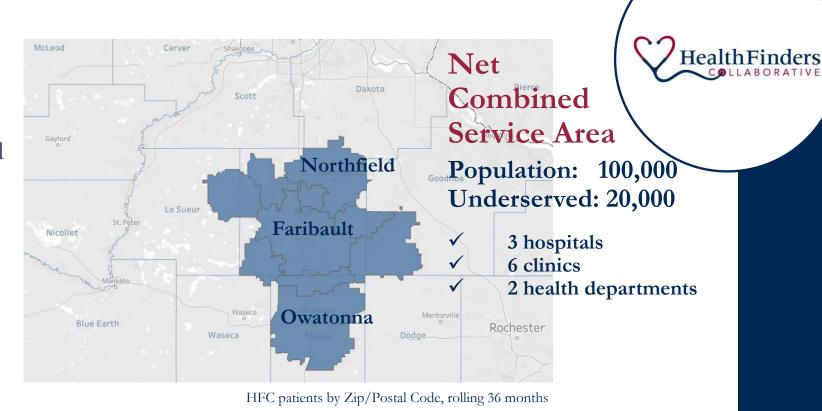
+50% local expansion opportunity to deepen impact across all HFC locations elevate regional profile with key partners

Annual Reach

4,000 patients
10,000 appointments
25,000 individuals reached
150 volunteers and interns
projected

Demographics

60% Latinx Immigrants 15% Somali Refugees 25% Other



SCHA+HFC Partnership Goals

- ✓ Support SCHA members to be healthy by providing holistic support, access to all of HFC services
- ✓ Engage community health workers
- ✓ Study and build a scalable, sustainable, collaborative model
- ✓ Leverage existing partnerships with health systems

 Year 1 Pilot



SCHA+HFC Patients

Eligible Patients

SCHA patients would be identified in the following three groups from the Minnesota Prairie County Alliance patient population communities within Dodge, Steele, and Waseca counties:

- 1) patients seeking care at HFC programs, including community-based wellness programming
- 2) patients referred to HFC through partner health system
- 3) patients referred to HFC through SCHA care coordinators/ navigators



SCHA+HFC Programs

Patient – access to HFC's holistic and culturally-relevant model of health care, including: - medical, dental, mental health, and substance use disorder care

- care coordination, community and at-home based support
- support patients in the continuum of social determinants of health, navigation in connecting with community resources

Community – connection to HFC wellness programs, delivered at community-embedded locations and contexts including:

- chronic disease management programs
- exercise and nutrition programs
- food access and community wellness programs
- group counseling and therapy

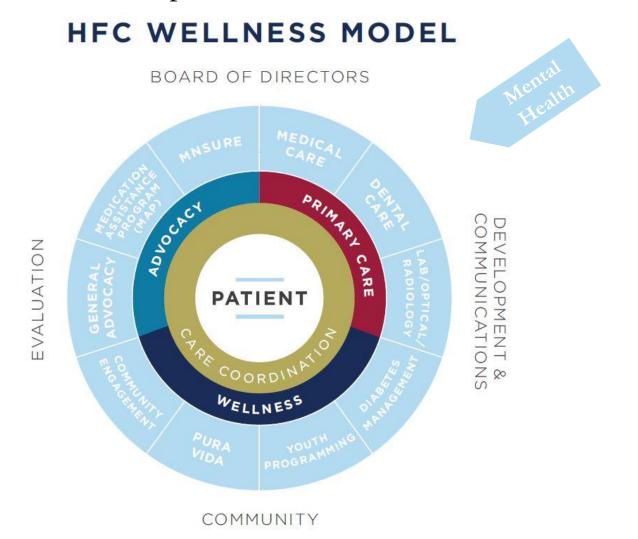
System – support institutions and networks to improve care among this vulnerable population including:

- Intercultural Effectiveness Seminar series to SCHA and health system providers -
- health system summits, engaging leadership across health and human services systems to increase collaboration for the health of the underserved
- Ongoing data and outcomes analysis to support continuous improvement at individual and systems levels



SCHA+HFC Programs

Importantly, all patients, regardless of their entry point into HFC's network have access to the full spectrum and network of HFC care and services.





Current Opportunities

Model Community+Clinic Partnership

Access to Care for Entire Community

- ✓ Chronic care
- ✓ Dental Access
- ✓ Patient Advocacy and Care Coordination

Reducing Health Disparities

- ✓HFC can support local priorities and patients by extending reach to hard-to-reach communities, engage communities with community health workers, SDoH
- ✓ Engage in the Intercultural Effectiveness Seminar



Health System Partnership Highlights



- ✓ Over 500 visits for more than 70 pre/post natal patients "transformational impact" on our patients and team Dr. Kristina Rauenhorst Mayo Clinic Health System
- ✓ Social Determinants close connections with Allina Health, over 80% of successful referrals system-wide happened by HFC in Faribault
- ✓ Mental/Chemical Health Program Expansion
- ✓ School-based care, over 1/3 of appointments happen outside of clinic
- ✓ Expansion to Steele County and partnership with Center Clinic



Potential Outcomes

As the program and population are established, potential indicators include:

- . HbA1c levels
- Blood pressure
- . ED usage
- . Connection to dental care
- . Social determinants-related case resolution
- Pre/Post Natal care and positive birth outcomes





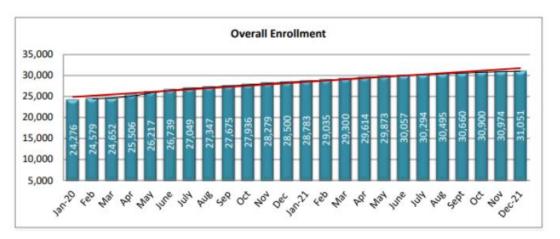
Rural Stakeholders

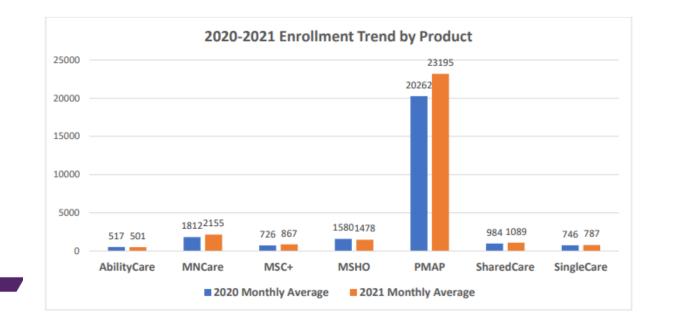
2021 In Review



South Country Overall

- Membership growth continues overall
- New Logo
- New office location









Compliance Team

- Annual delegation audits 99-100% compliant for 15 of our delegates including our 3 primary delegates.
- Four (4) targeted internal audits
- Ongoing Program Integrity work
 - Investigation into 97 instances of suspected fraud, waste or abuse
 - \$12,124.47 in overpayment recoveries collected





Compliance Team- Grievance & Appeals

- 50 non quality of care grievances with top grievance around non emergency medical transportation
- 11 quality of care grievances with top grievance around dental services.
- 4 quality of service grievances with all cases non emergency medical transportation
- Approximately 40% decrease in pharmacy Medicaid appeals





Operations- Member Services Team

- Average of 2,863 calls per month.
- 16.8% increase over 2020
- 79.9% of calls were answered in less than 30 seconds.
- 3.0% of calls were abandoned





Operations- Member Services Team

- New 2021 a post call survey to evaluate the callers experience with our Member Services team.
 - Did the Member Services Specialist treat you with respect and dignity? 98% said yes.
 - Did the Member Services Specialist listen to your needs? 99% said yes

Member service have been great everytine I have contact at them Health loverage has been fantastic.



Provider Network-Access and Availability to Care

12,700+

Licensed Physicians -Nearly 1/2 are Primary Care Practitioners

Nearly 3,500

BH and SUD Practitioners

61

SUD Inpatient Facilities

162

SUD Outpatient Facilities

31

SUD- Opioid Treatment Facilities/Medication-Assisted Treatment

90+

Community & Referral Tertiary Hospitals

450+

Primary Care Clinics

41

Hospice Locations

48

Skilled Nursing Facilities

125+

Home Health Care Agencies

149

Personal Care Assistance Providers

300+

DME Specialty equipment providers

61

NEMT & Special Transportation Providers National pharmacy network w/ 40+ pharmacies in our service area & 600+ others throughout MN

State-wide dental network w/ 1,200+ locations & 1,300+ dental practitioners





Provider Network-Access and Availability to Care

- 100% of Primary Care Providers surveyed say they can get members in for regular and routine care within 45 days of the request
- 80% of Primary Care Providers surveyed say they can get members into Urgent Care within 24 hours of the request
- 51% of Behavioral Health Care Providers say they can get a member an initial visit for routine care within 10 business days of the request
- 83% of Behavior Health Care Providers say they can get a member a follow up for routine care within 30 days





Provider Network- Credentialing & Organizational Assessment

- Credentialed 1,292 new to the network
- Recredentialed 856 providers to continue in the network
- Delegated credentialing agencies completed 5,827 newly credentialed and recredentialed providers.
- 94 organizational providers were assessed with resulted in 183 facilities.





Community Engagement- Model of Care

- Slight decrease in SeniorCare Complete members annual health assessments completed timely
- Increase in AbilityCare members annual health assessment completed timely
- Increase in care plans being completed timely.





Community Engagement-Quality

- 93 unique members utilized the BeActive program
- In partnership with our local public health agencies 138 car seats and safety education was provided
- 249 members participated in a local Community Education and/ or Early Childhood classes
- 254 Be Rewarded voucher were distributed with dental being the most





Community Engagement-Quality

- Successful HEDIS season and submission
- Planned for new Quality program for 2022
- Notification of SeniorCare Complete 2022 Rating of 5 stars out of 5 stars

SeniorCare Complete Star Rating Performance				
Level	2020 Rating (CY2018)	2021 Rating (CY2019)	2022 Rating (CY2020)	National Average
Medicare Part C	4	4	4.5	
Medicare Part D	5	5	5	3.5
Overall Summary	4.5	4.5	5	4.0





Health Equity

- Sibley County partners to understand any structural racism, social inequities, and/or health disadvantages and to improve Latinx members overall health outcomes focusing on disparities through a variety of interventions.
- Mora Area Youth Recreation Association to improve access to social and recreational activity for youth
- Website translation button





Population Health

- Met goal for 15 new members to join the Ex Program
- Met goal to increase BeActive memberships by 35 members had 39 members sign up
- 93 members contacted who have elevated blood pressures
- Mental Health Outpatient- rose to levels above nearly all of 2020 with telehealth access





Health Services- Utilization Management

- Received over 3,800 inpatient notifications in 2021
 - 13% for Behavioral Health/Mental Health* concerns
 - 10% stays designated for Obstetrics
- County Care Coordinators and Connectors conducted follow-up on over 2,000 of those hospitalizations
- Complex Case Managers and Behavioral Health
 Professionals conducted follow-up on the remainder





Health Services- Utilization Management

- The UM team entered over 4,600 authorizations in 2021, with the nurses reviewing over 3,100 of those
- Top services requested throughout the year were consistently: Durable Medical Equipment, Assisted Transportation, and Medical Pharmacy
- For authorizations that are reviewed, the approval rating was: 94%
- Utilization Management also received positive feedback from providers on the attentiveness of our provider contact center





Operations- Pharmacy Utilization

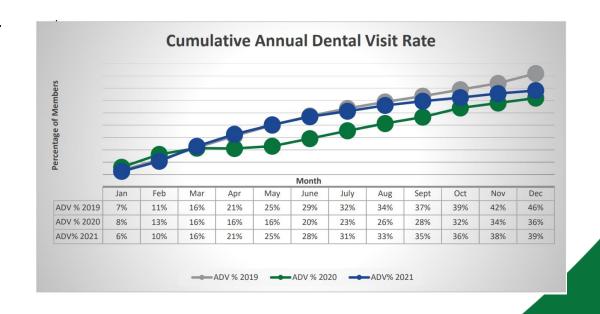
- 32.76% of Medicaid members utilize the pharmacy benefit
 - Average cost per utilizing member \$281.31
- 86.10% of Medicare members utilize the pharmacy benefit
 - Average cost per utilizing member \$520.76
- PerformRx completed 9102 Medicaid Prior Authorizations
- PerformRx completed 970 Medicare Prior Authorizations





Operations- Dental Utilization

- Dental visits climbed up in 2021
- Delta Dental of Minnesota completed 720 service reviews
- Dental Care Coordination team helped with 1,874 requests or inquiries







Health Services: Complex Case Management

- A total of 2,435 reviews/ all PMAP/MNCare hospitalizations were completed by the Complex Case Managers for consideration into the program
- Over 750 referrals were completed for the Complex Case Management program
- The Complex Case Management team also follows up on members with high-risk pregnancies and in 2021 they reached out to almost 300 members to offer case management.

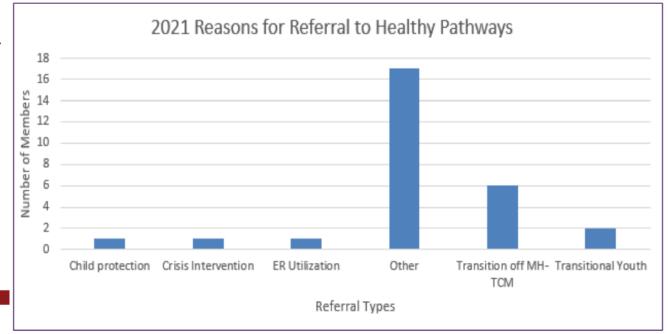


Health Services- Behavioral Health

- Behavioral Health Professionals (BHPs)
 recorded over 600 encounters outlining how
 they assisted members.
- 211 calls to opioid naïve members
- Behavioral Health Subcommittee-Healthy Pathways served 82 members







Health Services: Behavioral Health- Healthy Transitions

- Behavioral Health Professionals (BHPs) placed 814 calls with 254 unique members for Healthy Transitions.
- 1047 county specific resource mailers were sent to all members age 17-21 years old
- In 2021, we implemented a new secure texting platform that allowed the BHP to text with members. There were over 600 messages that were sent.





Questions?







Quality Updates 5/2022

Performance Improvement Projects (PIP) Chronic Care Improvement Project (CCIP)

Focus Studies



A Healthy Start for Mothers and Children PIP 2021-2023

- Prenatal Care
 - Pregnancy Care Reward
- Postpartum Care
- Infant Well Care Reward
 - Child well visits 6 or more visits by 15 months





Be Buckled™ Free Car Seat Program



- Free Breast Pump Program
- 24-hour Nurse Advice
- Pregnancy and Childbirth Classes





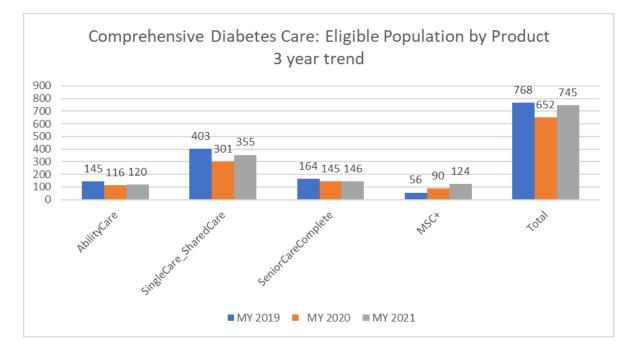






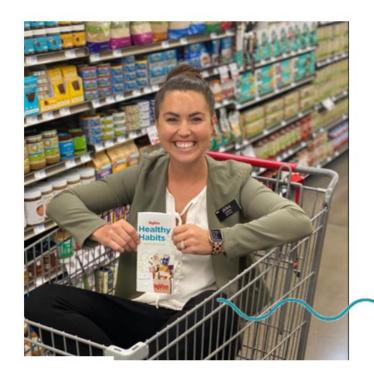
Comprehensive Diabetes PIP 2021-2023

- SNBC AbilityCare: Dual-eligible enrollees ages 18 to 64 who have both their Medicaid and Medicare benefits administered by South Country
- SNBC SingleCare-SharedCare: Enrollees ages 18 to 64 who are not eligible for Medicare and have Medicaid benefits administered by South Country
- MSC+: Enrollees aged 65 and over who have Medicaid benefits administered by South Country and may have Medicare benefits administered by another health plan.
- SeniorCare Complete: Dual-eligible enrollees ages sixtyfive and up who have both their Medicaid and Medicare benefits administered by South Country.



 BI- Annual Mailing to these members, On importance of Diabetic care and checking A1C levels.









Hy-Vee and South Country Health Alliance are partnering to bring you a Free Virtual Event.

Click here to Take the Tour NOW!



New 2022 CCIP

- Breast and Colorectal Cancer
 Screening
- Ended CCIP to improve the number of members with diabetes getting in for an eye exam.



If you are over 50, you should have a mammogram, even if you are in good health. Talk with your doctor about your risk for breast cancer.

Getting a colorectal cancer screening is an important part of your ongoing health care.

Screening tests can find precancerous polyps, so that they can be removed before they turn into cancer. Screening tests can also find colorectal cancer early.



CCIP Interventions

- Provider Network News
- Care Coordinator education
- Bi-annual mailing
- Member education in member newsletter
- Facebook education in March for Colorectal Cancer Awareness
 Month and October for Breast Cancer Awareness Month



New 2022 Focus Studies

- Chlamydia Prevention Screening
 - Provider Network News
 - Facebook
 - Mailing around Birthday
 - Bi-annual mailing



- Cervical Cancer Prevention Screening
 - Provider Network News
 - Facebook
 - New voucher
 - Educational mailing
 - Co-sponsored webinar



Health Promotion Vouchers

- Dental Voucher \$25
 - Member enrolled in abilityCare, SharedCare, SingleCare, SeniorCare Complete or MSC+
- Prenatal Care Voucher \$25
- Post- Partum Care Voucher \$25
- Young Adult Well- Care Voucher
- Infant Well-Care visit Voucher \$50
 - At least 6 visits by age of 15 months
- Mammogram Voucher \$25
- Colorectal Cancer Voucher \$25
 - Members ages 50-75 & on AbilityCare & SeniorCare Complete
- Cervical Cancer Voucher \$25
 - Members ages 21-64



Questions?



2021 CAHPS Survey Results



Description

Consumer Assessment of Healthcare Providers and Systems (CAHPS) is an annual survey coordinated by DHS and is designed to rate how well health plans are meeting their member needs. The survey is mailed to a random selection of members every year to collect feedback about the services received.



$^{ m L}$ Rated # ${f 1}$ among MN Health Plans

Families and Children

- Rating of Specialist Seen Most Often
- Getting Care Quickly
- Customer Service
- Coordination of Care

MinnesotaCare

Rating of Specialist Seen Most Often

MSC+

- Rating of All Health Care
- Rating of Specialist Seen Most Often
- Getting Care Quickly
- Customer Service
- Coordination of Care

SNBC

- Rating of Specialist Seen Most Often
- Customer Service



Rated # 2 among MN Health Plans

Families and Children

Rating of Health Plan

MinnesotaCare

- Rating of All Health Care
- Rating of Personal Doctor
- Getting Needed Care
- Getting Care Quickly
- How Well Doctors Communicate
- Customer Service

MSC+

- Rating of Health Plan
- Getting Needed Care
- How Well Doctors Communicate

SNBC

Getting Needed Care



Rated At or Above the State Average

Families and Children

- Rating of Health Plan
- Rating of Personal Doctor
- Rating of Specialist Seen Most Often
- Getting Care Quickly
- Customer Service
- Coordination of Care

MinnesotaCare

- · Rating of All Health Care
- Rating of Specialist Seen Most Often
- Getting Needed Care
- Getting Care Quickly
- How Well Doctors Communicate
- Customer Service

MSC+

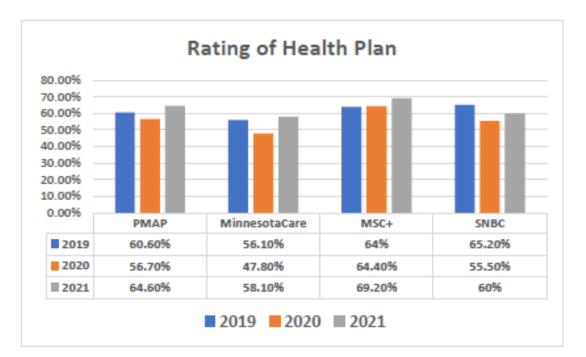
- Rating of Health Plan
- · Rating of All Health Care
- Rating of Specialist Seen Most Often
- Getting Needed Care
- Getting Care Quickly
- How Well Doctors Communicate
- Customer Service
- Coordination of Care

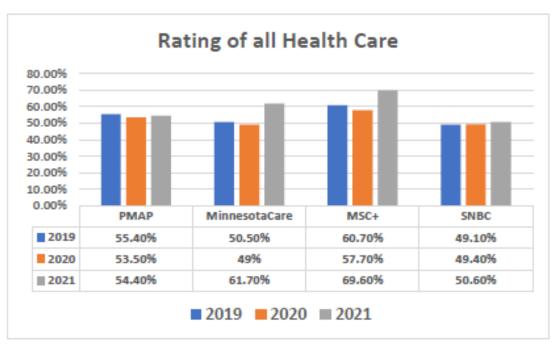
SNBC

- Rating of Specialist Seen Most Often
- Getting Needed Care
- Getting Care Quickly
- How Well Doctors Communicate
- Customer Service

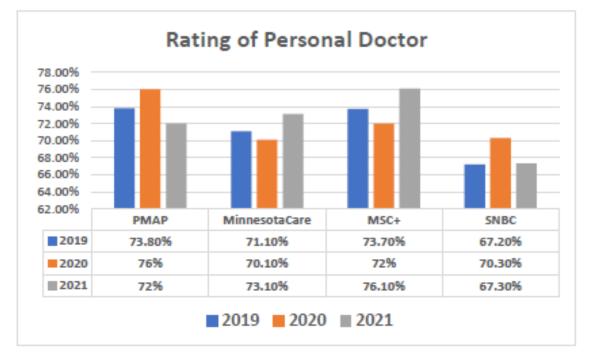


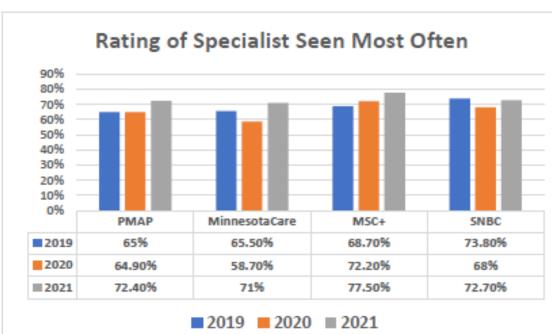




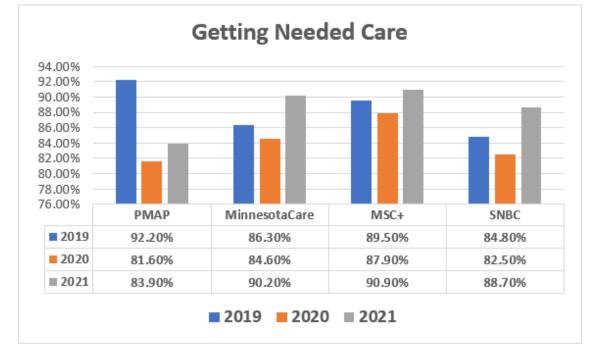


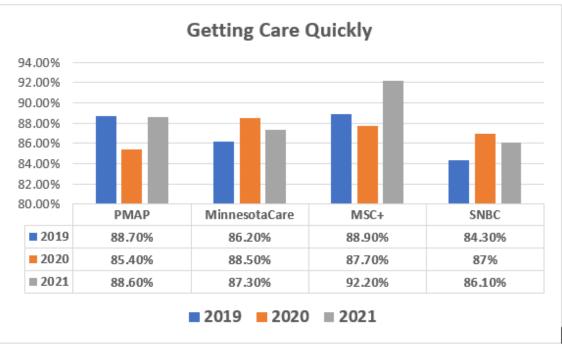




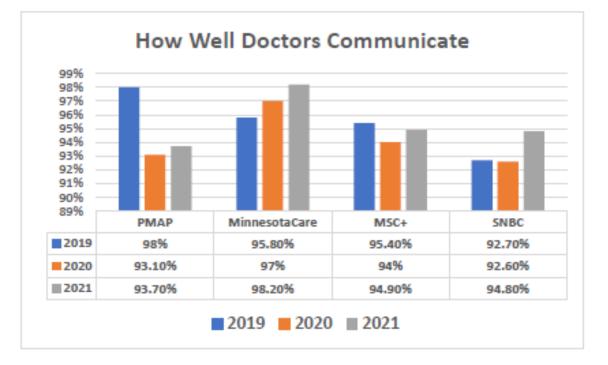


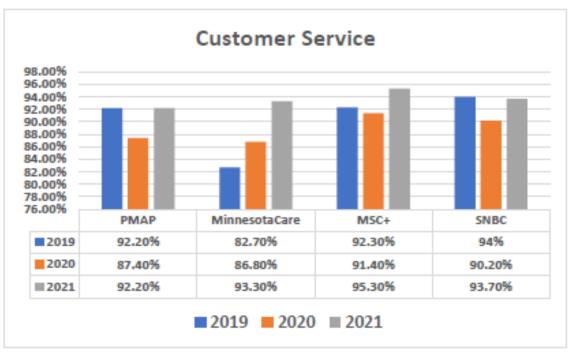


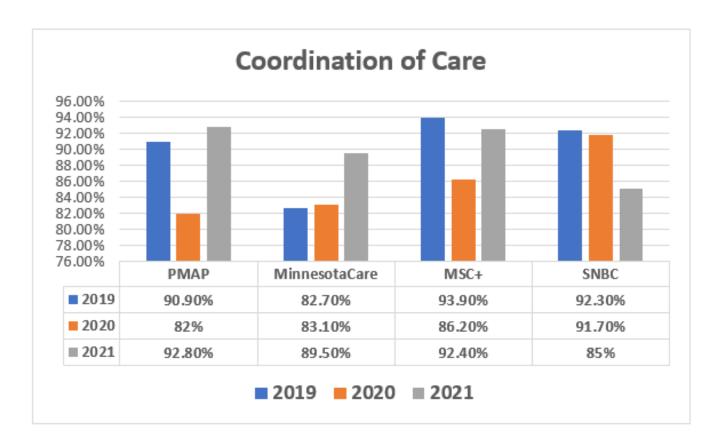














2021 Health Outcome Survey (HOS) Results



This survey is administered on an annual basis to a random sampling of eligible South Country members at the beginning and the end of a two-year period.

The survey is designed to assess a health plan's ability to maintain or improve the physical and mental health status of its members over this designated time period.



The following tables below represent the distribution of SeniorCare Complete & AbilityCare members and how they self-rated their general health, physical heath, and mental health compared to a year ago.



SeniorCare Complete

Performance Measures	Cohort 20 Response Rates			
Self-Rated Health Status	SeniorCard	e Complete	National	l Average
	Baseline	Follow-Up	Baseline	Follow-Up
	N (%)	N (%)	N (%)	N (%)
General Health Excellent to Good Fair or Poor	97 (54.2%)	98 (54.4%)	58,246 (77.5%)	56,178 (75.1%)
	82 (45.8%)	82 (45.6%)	16,868 (22.5%)	18,653 (24.9%)

Performance Measures	Cohort 20 Response Rates			
Self-Rated Health Status	SeniorCare Baseline N (%)	e Complete Follow-Up N (%)	National Baseline N (%)	Average Follow-Up N (%)
Comparative Health - Physical Much Better / About the Same Slightly Worse / Much Worse	104(58.4%) 74 (41.6%)	90 (54.2%) 76 (45.8%)	57,466 (77.4%) 16,792 (22.6%)	53,837 (73.2%) 19,680 (26.8%)
Comparative Health - Mental Much Better / About the Same Slightly Worse / Much Worse	148 (85.1%) 26 14.9%)	123(74.1%) 43 (25.9%)	65,996 (90.0%) 7,324 (10.0%)	61,224 (84.0%) 11,653 (16.0%)



AbilityCare

Performance Measures	Cohort 20 Response Rates		
Self-Rated Health Status	AbilityCare		
Self-Nateu Health Status	Baseline	Follow-Up	
General Health			
Excellent to Good	73.4%	65.3%	
Fair or Poor	26.6%	34.8%	
Comparative Health - Physical			
Much Better / About the Same	79.5%	79.9%	
Slightly Worse / Much Worse	20.5%	20%	
Comparative Health - Mental Much Better / About the Same Slightly Worse / Much Worse	87.9% 12.2%	82.5% 17.3%	



Ongoing work around HOS

- Continue to share HOS outcomes with stakeholders and care coordination teams
- Educate about consistent messaging around the intent of HOS
- Grow our membership in both SeniorCare Complete and AbilityCare to improve sample size of the survey and reduce repetitvely surveying the same members.



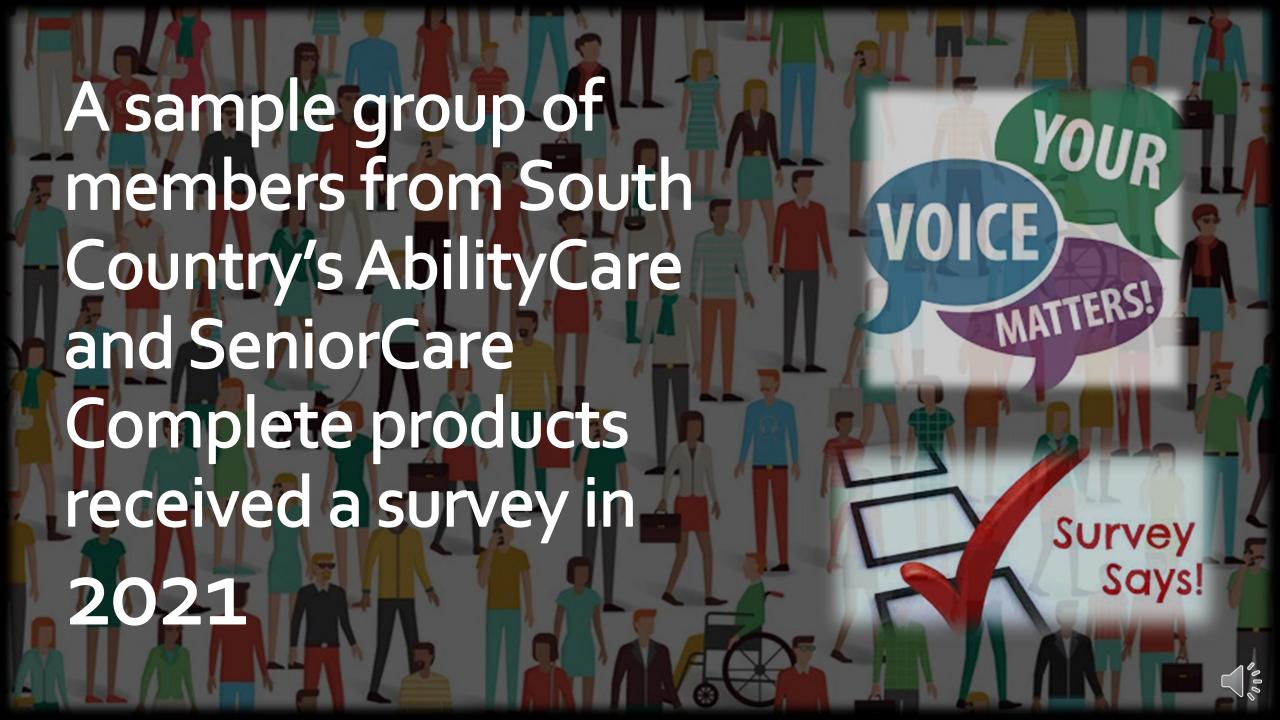


Questions?

2021 South Country Member Satisfaction Survey







Product Response Rates

Medicare Care Coordination Satisfaction Survey Member Response Rates

	2019		2020		2021	
Product	Returned/Sent	Response Rate	Returned/Sent	Response Rate	Returned/Sent	Response Rate
SeniorCare Complete MN Senior Health Options-MSHO: Dual Integrated	140 / 317	44%	142/308	46%	136 / 305	45%
AbilityCare Special Needs Basic Care-SNBC: Dual Integrated	62 / 232	27%	65 / 220	30%	74 / 219	34%
Medicare Overall Response Rate	202 / 549	37%	207 / 528	39%	140 / 210	40%

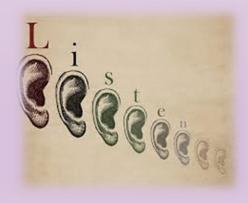




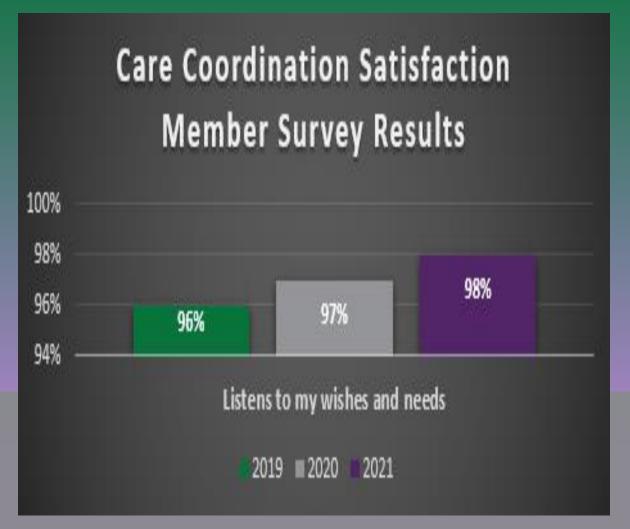
My Care Coordinator

	Care Coordination Satisfaction Survey Results			
	SeniorCare Complete	AbilityCare	Overall	
Treats me with respect and dignity	128 / 129 99%	72 / 73 99%	200 / 202 99%	
Listens to my wishes and needs	126 / 130 97%	72 / 73 99%	198 / 203 98%	









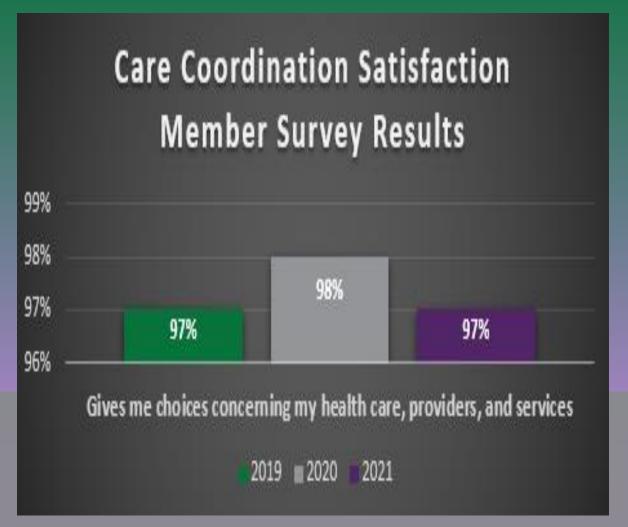


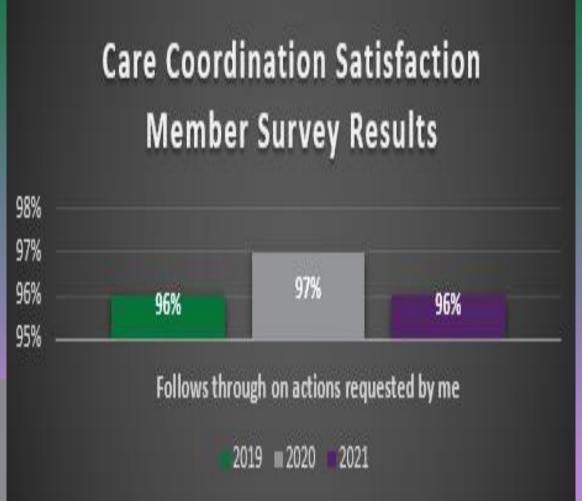


My Care Coordinator



	Care Coordination Satisfaction Survey Results			
	SeniorCare Complete	AbilityCare	Overall	
Gives me choices concerning my health care, providers, and services	122 / 127 96%	72 / 73 99%	194 / 200 97%	
Follows through on actions requested by me	122 / 127 96%	70 / 72 97%	192 / 199 96%	





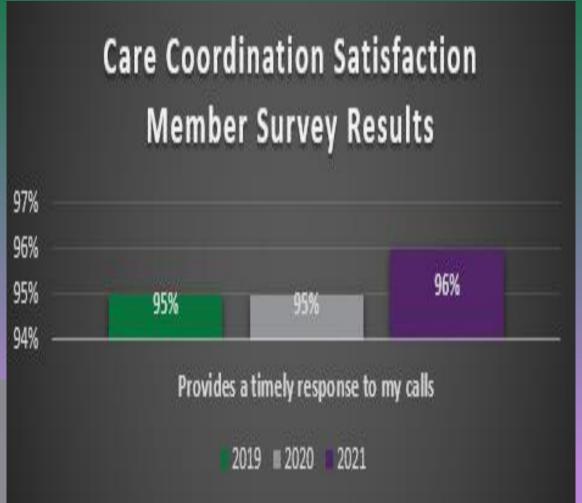


My Care Coordinator

	Care Coordination Satisfaction Survey Results				
	SeniorCare Complete	AbilityCare	Overall		
Answers my questions	122 / 127	72 / 73	194 / 200		
	96%	99%	97%		
Provides a timely response to my calls	122 / 126	68 / 71	190 / 197		
	97%	96%	96%		









My Care Coordinator

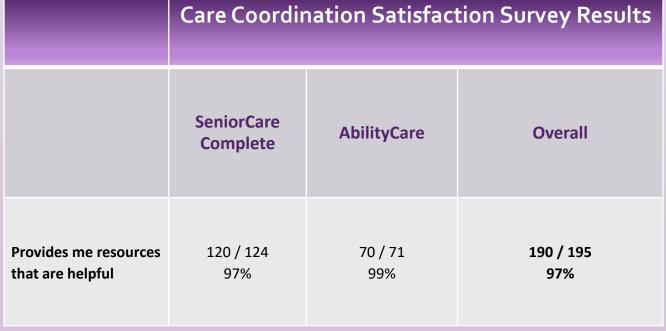


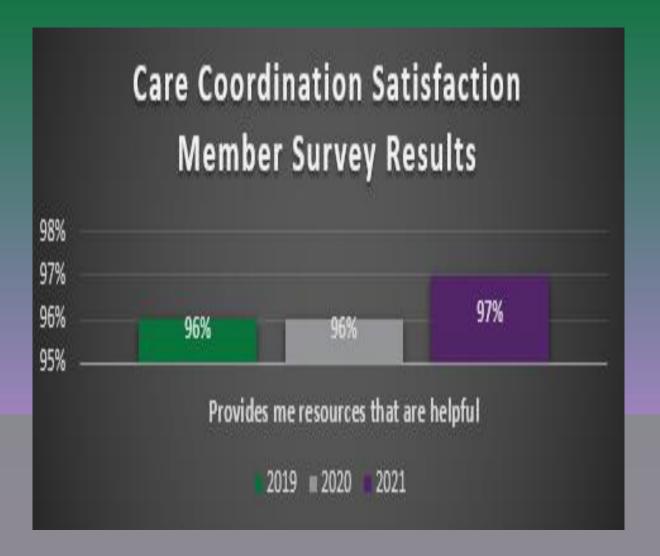














Frequency of Contact

	How often do you talk or see your Care Coordinator?						
	Weekly	Monthly	Every Other Month	Every Three Months			
SeniorCare Complete	6 / 128 5%	20 / 128 14%	18 / 128 18%	36 / 128 30%			
AbilityCare	1 / 72 6%	11 / 72 17%	14 / 72 17%	19 / 72 26%			
Overall	7 / 200 4%	31 / 200 16%	32 / 200 16%	55 / 200 28%	128 / 200 63%		



In 2020 contact at least every three months or more frequently for SeniorCare Complete-67% and AbilityCare-66%.

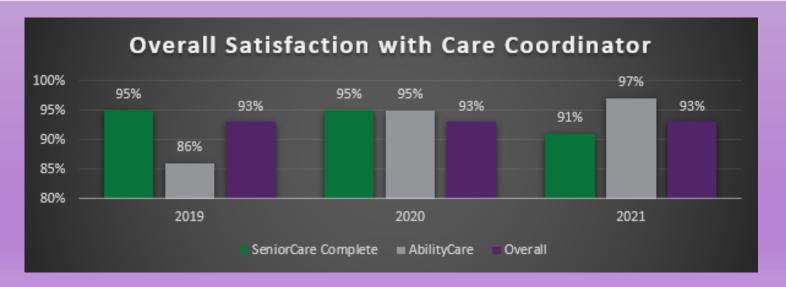
In 2021 contact at least every three months or more frequently for SeniorCare Complete-63% and AbilityCare-63%.

Decreasing percentage trend may likely be due to another year of COVID-19 and County Care Coordination Teams being tasked with Vaccination Clinics and other roles.



Overall Satisfaction with Care Coordinator

	Overall Satisfaction with South Country					
Response	SeniorCare Complete	AbilityCare	Overall			
Very Satisfied	87 / 131	53 / 73	140 / 204			
	66%	78%	69%			
Satisfied	32 / 131	18 / 73	50 / 204			
	24%	25%	25%			





Overall Satisfaction with South Country

	Overall Satisfaction with South Country					
Response	SeniorCare Complete	AbilityCare	Overall			
Excellent	54 / 132	41 / 74	95 / 206			
	41%	55%	46%			
Very Good	49 / 132	24 / 74	73 / 206			
	37%	32%	35%			



82% percent of members responded that that their overall satisfaction with South Country was "Excellent" or "Very Good"





Preventative Services

Does your Care Coordinator recommend preventive services?

Response	SeniorCare Complete	AbilityCare	Overall
Yes	112 / 126	64 / 74	176 / 200
	89%	86%	88%
No	14 / 126	10 / 74	24 / 200
	11%	14%	12%



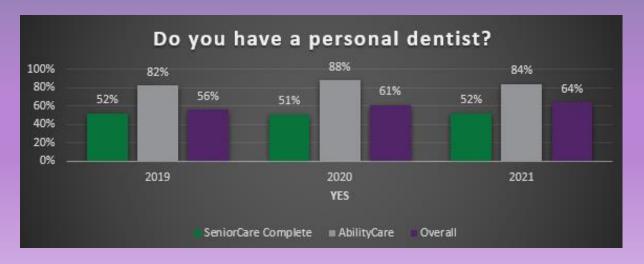


Dental Health

Do you have a personal dentist?							
Response	SeniorCare Complete	AbilityCare	Overall				
Yes	67 / 128	62 / 74	129 / 202				
	52%	84%	64%				
No	61 / 128	12 / 74	73 / 202				
	48%	16%	36%				

In the past year, Did your Care Coordinator talk to you about seeing a dentist?

Response	SeniorCare Complete	AbilityCare	Overall
Yes	65 / 124	48 / 73	113 / 197
	52%	66%	57%
No	59 / 124	25 / 73	84 / 197
	78%	34%	43%





Social Determinants of Health (SDOH)



Overall SeniorCare Complete & AbilityCare Members

	Hardly Ever		Some of the Time		Often	
How often do you feel that you lack companionship?	106 / 201	53%	73 / 201	36%	22 / 201	11%
How often do you feel left out?	126 / 201	63%	50 / 201	25%	25 / 201	12%
How often do you feel isolated from others?	132 / 199	66%	44 / 199	22%	23 / 199	12%
Are you worried that in the next two months you may not have stable housing?	174 / 198	88%	20 / 198	10%	4 / 198	2%
In the past year, have you or your family members had difficulty getting food?	182 / 198	92%	12 / 198	6%	4 / 198	2%
In the past year, have you or your family members had difficulty getting utilities paid?	186 / 198	94%	11 / 198	6%	1 / 198	1%
In the past year, have you or your family members had difficulty getting clothing?	182 / 195	93%	9 / 195	5%	4 / 195	2%



SeniorCare Complete

	Hardly Ever		Some of the Time		Often	
How often do you feel that you lack companionship?	69 / 127	54%	44 / 127	35%	14 / 127	11%
How often do you feel left out?	80 / 127	63%	35 / 127	28%	12 / 127	9%
How often do you feel isolated from others?	86 / 126	68%	30 / 126	24%	10 / 126	8%





Senior Care Complete Cont..





	Hardly Ever		Some of the Time		Often	
Are you worried that in the next two months you may not have stable housing?	108 / 124	87%	14 / 124	11%	2 / 124	2%
In the past year, have you or your family members had difficulty getting food?	114 / 124	92%	7 / 124	6%	3 / 124	2%

Senior Care Complete Cont..

	Hardly Ever		Some of the Time		Often	
In the past year, have you or your family members had difficulty getting utilities paid?	117 / 124	94%	7 / 124	6%	0 / 124	0%
In the past year, have you or your family members had difficulty getting clothing?	115 / 122	94%	6 / 122	5%	1 / 122	1%





AbilityCare







	Hardly Ever		Some of the Time		Often	
How often do you feel that you lack companionship?	37 / 74	50%	29 / 74	39%	8 / 74	11%
How often do you feel left out?	46 / 74	62%	15 / 74	20%	13 / 74	18%
How often do you feel isolated from others?	46 / 73	63%	14 / 73	19%	13 / 73	18%



AbilityCare Cont..

	Hardly Ever		Some of the Time		Often	
Are you worried that in the next two months you may not have stable housing?	66 / 74	89%	6 / 74	8%	2 / 74	3%
In the past year, have you or your family members had difficulty getting food?	68 / 74	92%	5 / 74	7%	1/74	1%





AbilityCare Cont..





	Hardly Ever		Some of the Time		Often	
In the past year, have you or your family members had difficulty getting utilities paid?	69 / 74	93%	4 / 74	5%	1 / 74	1%
In the past year, have you or your family members had difficulty getting clothing?	67 / 73	92%	3 / 73	4%	3 / 73	4%

South Country HEALTH ALLIANCE

~ThankYou~

