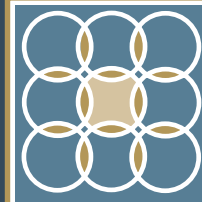


CONNECTING THE DOTS TO THE CARE YOU DESERVE



OPEN DOOR HEALTH SERVICES
2014 ANNUAL REPORT

MOBILE UNIT LAUNCHED



OPENDOOR
HEALTH SERVICES

2014 was a great year for Open Door Health Services. We believe this past year was about making connections between the patient, family, and community. Our passion is bringing affordable health care to you. We look forward to continuing to grow these connections.

-TONI ESTEP
CHIEF EXECUTIVE OFFICER

Open Door is going places – literally! ODHS' mobile unit was officially launched on August 13, 2014 and is fully equipped to provide services such as medical, behavioral health, dental, health insurance assistance enrollments, educational programming, and more. The mobile unit saw 326 patients from the day it opened until December 31, 2014.

The mobile unit can be found at different locations throughout the week. It currently serves nine Muncie Community Schools and two county schools. Each school was chosen based on its location within the community and the percentage of lower-income children currently served by that school.

The mobile unit works with schools to help with general medical needs and special programs, such as Shots for Tots. The Shots for Tots program delivered approximately 900 vaccines during the fall of 2014 alone. It is also available for children who are ill while they are in school but their parents or guardians are unable to pick them up from school to take them to the doctor. By having the mobile unit on site and a pre-complete release filled out by the parent/guardian, the school nurse can send the child to the mobile unit to have the child receive the medical attention he or she needs right away.

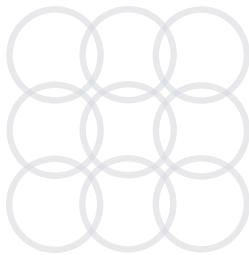
It's not only children who benefit from the mobile unit, however. Members of the community are welcome to stop by if you see the mobile unit and need medical care. This is one of the reasons that ODHS chose to be in the Gaston community at West-Del Community Schools on Fridays. This community has the least access to medical services of any community in Delaware County. By having the mobile unit on-site once a week, ODHS is able to provide a consistent and easily accessible form of medical care to the community.

Another great benefit of the mobile unit is that it can go anywhere. It has already been a part of community events, including school physical fairs and registrations. The versatility of the mobile unit has already proven to be a great success for Open Door and a benefit for ODHS patients and the community that has not been available in the past.

The Shots for Tots program delivered 900 vaccines during the fall of 2014 alone.

Members of the community are welcome to stop by.





2014 IN REVIEW

OPEN DOOR IS
EFFECTIVELY REMOVING
BARRIERS TO CARE.

PATIENT-CENTERED MEDICAL HOME



Open Door Health Services was recognized as a level two patient-centered medical home (PCMH) by the National Committee for Quality Assurance (NCQA) on August 1, 2014, making ODHS one of the first practices in Delaware County to be recognized by the national organization for using systematic, patient-centered, and coordinated care management processes. A PCMH is a innovative care model that replaces the reactive, episodic care often practiced in the current medical system with a proactive, coordinated care model designed to improve the patients' health and moderate long-term health care costs.

To qualify for PCMH status, ODHS was required to show proof that they provide and maintain a high level of patient engagement and outreach, effectively removing barriers to care. NCQA conducted a rigorous review of ODHS' policies and procedures, reviewing evidence of same-day appointment availability, extended office hours, returning patient phone calls in a timely manner both during and after office hours, supporting patients in the self-management of their chronic diseases, utilizing an ongoing quality improvement process, and more.

NCQA recognizes three levels of Patient-Centered Medical Homes. Open Door Health Services was already working hard on obtaining level three recognition when their level two recognition was announced and look forward to announcing a level three recognition in 2015.



Open Door provided medical, dental, behavioral health and support services to patients throughout East Central Indiana.



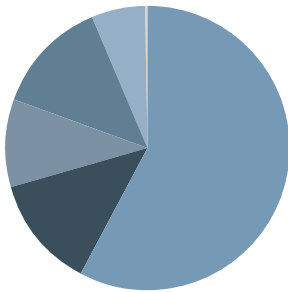
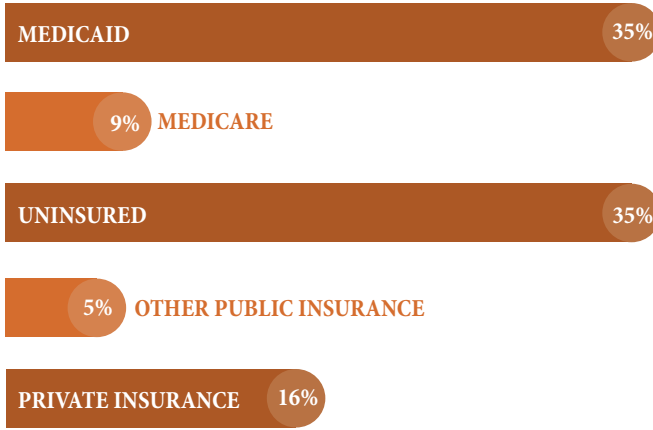
35%
Patients Uninsured



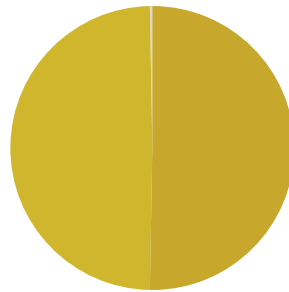
57%
At/Below Poverty



PAYER SOURCE



EXPENSES	
Employee salaries:	58%
Employee benefits:	13%
Services and supplies:	10%
Operating costs:	13%
Depreciation:	6%
Interest on debt:	<1%
Total Expenses	\$10,289,494



REVENUE	
Patient charges:	51%
Grants:	49%
Other Sources:	<1%
Total Funds:	\$9,519,621

SHARED MEDICAL APPOINTMENTS

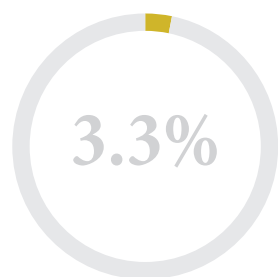
Shared medical appointments (SMAs) might sound like a scary thing – not many people think sharing the most intimate details about your health with a group of strangers would be very fun – but it turns out in the right environment, they can be extremely rewarding and beneficial for both patients and staff. That's exactly what Open Door found when they started providing shared medical appointments for diabetic patients through a grant with CVS and the National Association for Community Health Centers. Though the grant was first awarded in 2012, the final report was not submitted until 2014 and the results in the final report were astounding.

In a diabetic shared medical appointment, a group of 7-10 diabetic patients come together for a two-hour appointment rather than the 30-minute diabetic management appointment that is typically scheduled. The support staff takes vital signs and performs diabetic foot checks as they would during a conventional appointment, along with asking each patient if they have an issue that they would like to speak to the provider about in a confidential environment. If the patient does have a need for this, there is an exam room located nearby. The provider then comes in to provide the diabetic medical exam, which is done in the same room unless a patient has something that needs to be looked at in a sensitive area, in which case they will move to the private room discussed earlier.

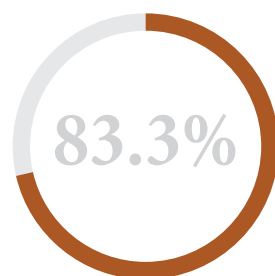
All lab work has been done prior to the visit and recorded for all the patients to see. All of SMAs are currently done by Open Door's Chief Medical Officer, Dorothy Boersma, who is pre-diabetic, so she posts her numbers for patients to see and compare to as well. This has promoted accountability among the group and has been met with much approval by the SMA participants.

The most important part of the SMA is the education component, which occurs after the exam. This is facilitated by a member of the support team, generally the health educator, but sometimes the dentist or another health care provider. Topics discussed include things like shopping smart and within a budget, how to monitor your blood sugars at home, exercise programs that can be done without joining a gym or purchasing expensive equipment, and the importance of diabetic eye exams. The amount of education that can be provided during the SMA compared to a traditional one-on-one appointment is exponentially higher.

An added bonus that wasn't necessarily anticipated was the support networks that were built among the patients during the SMA visits. Patients participating in the SMAs have built such strong friendships that



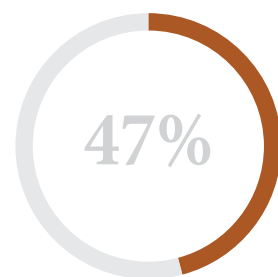
By the end of the grant period, only 3.3% of participants had A1c levels above 9, compared to 43.2% organization wide.



By the end of the grant period, 83.3% of grant participants had completed a dilated eye exam within the past year, compared to 30.9% organization wide.



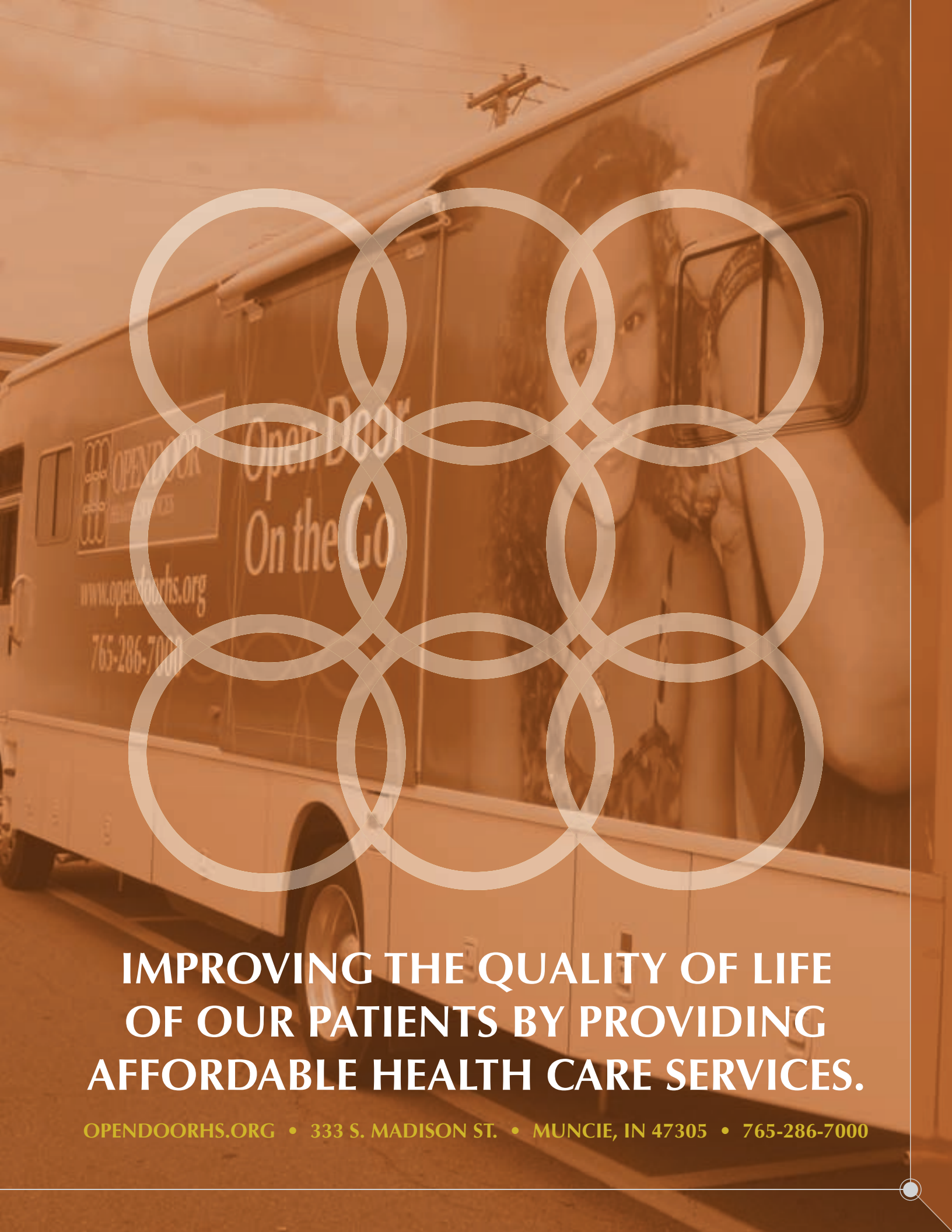
By the end of the grant period, 100% of grant participants had had a diabetic foot check in the last year, compared to 37.2% organization wide.



47% improved their hemoglobin A1c level during the grant period.

OPEN DOOR IN 2014





**IMPROVING THE QUALITY OF LIFE
OF OUR PATIENTS BY PROVIDING
AFFORDABLE HEALTH CARE SERVICES.**

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