

Agency: Commerce, Community and Economic Development**Grants to Named Recipients (AS 37.05.316)****Grant Recipient: Girdwood Health Clinic Inc.****Federal Tax ID: 90-0622646****Project Title:****Project Type: Other**

Girdwood Health Clinic Inc. - Medical Equipment, Records System and Planning

State Funding Requested: \$219,084**House District: Anchorage Areawide (11-27)**

One-Time Need

Brief Project Description:

Purchase critical medical equipment, an improved patient record system integrating Hope and Girdwood's records, and funds for planning continued sustainability of these clinics.

Funding Plan:

Total Project Cost:	\$219,084
Funding Already Secured:	(\$0)
FY2014 State Funding Request:	<u>(\$219,084)</u>
Project Deficit:	\$0

Funding Details:

In 2013, Girdwood Health Clinic, Inc. received an appropriation in the amount of \$400,000. These funds supported the first year of operations for the Girdwood Medical Clinic expansion and establishment of a satellite clinic in Hope, AK. Other Girdwood Clinic revenue for 2013 includes program service revenues (Medicaid, Medicare, private insurance and patient fees), community contributions, private foundations, the 2013 CAPSIS funds and in-kind contributions.

Detailed Project Description and Justification:**INTRODUCTION**

The town of Girdwood is known for the renowned Alyeska Resort which is a vacation destination year round. Last year 600 resort employees - most of whom work in low-paying service positions - lost their employer paid health insurance. Simultaneously and continuing still, residents of Girdwood are increasingly without health care coverage. All of these people turn to Girdwood Health Clinic for their medical care - be it reindeer and buffalo gorings, extracting wayward fishhooks, broken bones from the slopes and all manner of more routine, preventive and urgent care needs for people of all ages.

HISTORY OF LEGISLATIVE REQUESTS

Last year, Girdwood Health Clinic, Inc (GHCI) requested \$537,389 for the Girdwood Health Clinic expansion and the Hope Clinic start-up and \$400,000 was approved. Through the use of these funds the expansion and start-up have occurred, but several proposed activities were delayed due to inadequate funding to complete everything simultaneously.

CURRENT NEEDS

The needs that remain are: (1) the purchase of medical equipment - critical to the provision of high quality, comprehensive health services; (2) an improved patient record system which integrates patient information from both GHCI's sites - to

facilitate report generation on patient demographics, health needs, health outcome measurement -all of which are a great benefit in reviewing and improving quality of care and service;(3) Consulting services to provide staff trainings (public insurance eligibility and enrollment, HIPPA Compliance, ACLS, CPR and BBP) and to develop service agreements for after-hours call, billing and collection services and preparation of the annual UDS reporting. Finally, GHCI needs (4) Consultant services to assist in the creation of a five-year strategic plan (with three community health providers and the communities of Girdwood, Hope, Whittier, Cooper Landing and Moose Pass) to provide cost effective, sustainable health care for the geographic area between Anchorage and Seward, Alaska.

PROJECT JUSTIFICATION - These four activities will improve the health of current Alyeska employees, other employees of other tourism related businesses, permanent and seasonal residents of Girdwood, Indian, Bird, Sunshine and the Hope communities, and the tourists that come our way for enjoyment of family, friends, the winter slopes and summer hiking and fishing. Because these requests are part of Girdwood Health Clinic, Inc.'s foundation, these very same activities will be of benefit to patients that will be seen well beyond this year.

Additionally, the GHCI's expansion process can serve as a model for other small rural health clinics that want to expand the reach of their medical services.

Total request is \$219,084.00.

Project Timeline:

This project will be completed 12 months following the award.

Entity Responsible for the Ongoing Operation and Maintenance of this Project:

Kerry Dorius, Nurse Practitioner

Grant Recipient Contact Information:

Name: Kerry Dorius, NP
 Title: Girdwood Health Clinic Director
 Address: 131 Lindblad Avenue
 Girdwood, AK , Alaska 99587
 Phone Number: (907)783-1355
 Email: girdmed@acsalaska.net

Has this project been through a public review process at the local level and is it a community priority? Yes No

Girdwood Health Clinic, Inc. – Supplemental Documents Table of Contents

Supplemental Narrative (Attachment 1)

Table of Contents	Page 1
Introduction	2 - 6
Project Summary History of Girdwood Health Clinic, Inc. Girdwood Health Clinic, Inc. Today	
Girdwood and Hope	6 - 9
Description Service Area Map	
Area Residents & Their Health Needs	9 - 13
Girdwood & Hope Health Clinics - A Response to Need	13 - 22
Introduction (Continuation of Last Year’s Needs) Detailed Project Description The Value of Local Health Care Community Support Project Outcomes	
Biographical Sketches of the Board & Key Staff	23 - 27
Line-Item Budget (Attachment 2)	28 - 32
Letter of Support (Attachment 3)	33 - 41

INTRODUCTION

Project Summary Girdwood Health Clinic, Inc. (GHCI) is requesting a legislative allocation of \$262,900 for the purchase of major and minor medical equipment, an Application Service Provider (ASP) to update the current electronic medical records (EMR) enabling it to be used for telemedicine. Consultant services to establish service agreements with partnering Community Health Centers; provide staff training; long-term strategic planning with area health providers and community residents; and to complete all HRSA requirements in preparation for a Federally Qualified Health Center (FQHC) application.



Girdwood Health Clinic

The request for these funds builds upon Girdwood's 2013 legislative request which expanded the Girdwood clinic and constructed a small satellite clinic in Hope. The \$400,000 in legislative support increased Girdwood's days of service to six full days per week, Monday through Saturday and placed a provider and supporting staff on-call each Sunday. The new Hope clinic is open from noon to 2 pm on Monday, Wednesday, and Friday and is on-call Monday through Friday from noon to 4 pm. This final appropriation will make on-call service available 24/7 to both Hope and Girdwood through cooperation with a larger CHC such as Anchorage Neighborhood Health Center or Peninsula Health Center in Soldotna.

GHCI (Girdwood) was thrilled to receive the 2013 legislative allocation because receiving health services, within your community and with the same provider, over time, gives individuals and families the best prospects for good health. Girdwood Health Clinic and the Girdwood Clinic before have been providing care to the Turnagain Arm area residents since January 2000. High quality affordable and accessible medical care is also a key component to positive health outcomes. The expansion at the Girdwood Health Clinic and the new Hope Clinic are milestones on the road to improved community health for the Turnagain Arm area.



Angie Motoyama & Kerry Dorius setting up Hope Clinic

Because the legislative allocation was less than the requested funds, a portion of the planned activities for 2013 did not occur. There remains essential work to achieve our goal of providing high quality and comprehensive care and to improve GHCI's

sustainability. This will assure that the Girdwood and Hope Clinics will be around for generations to come; providing critically needed primary and urgent medical services for permanent and seasonal residents of Turnagain Arm; hundreds of service workers at Alyeska Resort and in Girdwood; and for the thousands of tourists that come to Alyeska Resort and Turnagain Arm area as their vacation destination year-round.

Location Girdwood is located 38 miles south of Anchorage. Hope is an 86 mile drive to Anchorage. In both instances the road to this urban hub is congested with tourists' cars, recreational vehicles and 18-wheelers in the summer. During the Alaska winter, the roads are icy, dark and prone to unexpected closures. The Girdwood Health Clinic is situated in the middle of the community. The 2,425 square foot clinic is well known, provides easy access for residents and is immediately adjacent to the village post office and a short walk from the town's only food market. The Clinic is highly visible. GHCI is also on the local shuttle line, which allows low-income people without other forms of transportation to ride to and from their medical appointments. The fare is \$1.00.



The Hope Health Clinic is located in the heart of the village within walking distance of the small grocery/hardware and sundries store and the library. As a satellite of the Girdwood Health Clinic, the Hope site is small but will have most of the equipment and materials necessary to provide residents of the area with access to a broad spectrum of medical care through the innovative use of telemedicine and the scheduling of appointments in Hope with the clinician from Girdwood.

History GHCI's history includes approximately two years of operation as a part of Providence Health Systems (from 1998 through 1999). The clinic closed in November of that year because it was losing money. In January of 2000, Kerry Dorius, a licensed and experienced Nurse Practitioner (NP) who had worked as a provider for Providence Health Systems reopened the Girdwood Clinic as her own business. For the last 14 years, Ms. Dorius has served as the Clinic's Executive Director, Medical Director and its only health practitioner. After just one year of operation under her management, the clinic became financially stable and able to pay her and her employees.



Patient Dan Smith looking happy after Kerry stitches his fingers, cut by a saw. The colorful bandaging is just for fun.

In pure Alaskan style, when the clinic reopened people received their care in the reception area surrounded by piles of boxes

because the exam rooms had not been completed yet. The Nurse Practitioner would examine the patient and then dig around in boxes to find the right gauze or medicine. That same year, winter avalanches cut-off the road and electrical power to Girdwood for nearly six days. The NP stitched one patients' cut hand by the light of a Coleman lantern and spent the week living in the clinic. In instances like this – and continuing today - despite the number of miles from Anchorage – Girdwood is a frontier clinic. After the initial establishment of the private Girdwood Clinic Inc. the clinic did well and was financially stable until January 2010 when Alyeska Resort - the largest employer in Girdwood - dropped health insurance benefits for its 600 employees; effectively leaving one-third of the community uninsured. Later that year the Resort signed an agreement with a large group practice of medical specialists in Anchorage to send patients injured on the mountain directly to the specialist's Anchorage clinic bypassing the local clinic. The agreement had the potential to decrease the clinic's revenue by 25% at a time when the percentage of local uninsured had radically increased. This dramatically increased the imperative to provide affordable health care.



The beautiful Alyeska Resort

Everyone in town receives care through the GHCI. The community recognizes the clinic as a tremendous community asset. As such, in October of 2010 a group of Girdwood citizens concerned about the future of local health care banded together and formed a Board of Directors with the intention to begin a nonprofit clinic. They asked Kerry Dorius to be their advisor. The goal of this Board was, and continues to be, to maintain the local clinic that would serve everyone in the Girdwood, Bird, Sunrise, Hope and Portage area regardless of their ability to pay. The dedicated and hard-working Board of nine users held three fundraisers in a single year. The Board formed a non-profit corporation (GHCI) with the State of Alaska and began its efforts to gain 501(c) (3) status. The Board of Directors is committed to use of a discount fee schedule, which is based on income and family size. (This discount fee scale is revised annually based on the Federal Poverty Levels.) On December 22nd 2011, GHCI purchased the clinic and immediately instituted the discount fee schedule as a nonprofit clinic.

Current Status In 2012, before expanded hours and the start-up of the Hope Clinic, Girdwood Health Clinic Inc., provided over 1,600 medical visits for the 2,000 residents and visitors of the Turnagain Arm area. This volume of care exceeds the productivity standard of 1,500 patients per year per full-time provider.

On January 7th 2013 Girdwood Health Clinic increased its operations to 6 days per week, Monday through Saturday with on-call services available on Sundays. Hope



The Hope Clinic

clinic's renovation and construction was completed in Early January 2013. An open house for the community was held the 18th through the 20th, of January 2013

The Hope Clinic open house was well attended by the local townspeople. The clinic was set up with basic medical equipment and supplies ready to begin seeing patients. Flu shots were given by the Nurse Practitioner who attended on Sunday. The Hope school children toured the new facility and many children were delighted to have their blood pressures taken and ears examined by Angie Motoyama, the newly hired Hope clinic technician. Appointments were scheduled with the Nurse Practitioner for the first clinical day in Hope Friday February 1st 2013.



Kathy Trautner (GHCI Board Member) & Kids at the Hope Clinic Open House

The Hope Clinic open house was also attended by the Chief EMS officer for Moose Pass and by the President and board members of the Cooper Landing Health Center. The community of Moose Pass and the surrounding areas of Summit Lake, Crown Pointe, and Russian Gap have been working together to find a way to provide health care to their isolated rural residents. With Cooper Landing Health Center at the helm a feasibility study was conducted in 2009 utilizing staff from Peninsula Community Health Services. The report dated October 9, 2012, recommended that Cooper Landing provide services through telemedicine.

Cooper Landing Health Center contacted Girdwood Health Clinic later that month regarding the Hope telemedicine project. Conversations and interest between Girdwood Health Clinic and Cooper Landing Health Center continue. Cooper Landing and Peninsula Community Health Services (PCHS) are also exploring telemedicine services. We hope to be able to share our experience with the new application service provider as a way to do telemedicine with Cooper Landing and Peninsula Health Center and are also interested in their telemedicine developments.

With the help of 2013 State of Alaska appropriation money, the clinic was able to hire the former director of Human Resources at Alyeska Resort who is happy to manage the front desk operations and share her expertise not only in human resources but also with medical insurance benefits. The addition of Melissa Butterfield to the partnership of Kerry Dorius and Jill Veatch gives GHCI a strong team to tackle the tough jobs of accounting and finance; information technology; and the business affairs of running a business as complex as a medical clinic.

With the support and encouragement from the passionate and dedicated Board of Directors of GHCI, Kerry Dorius remains strong in her personal commitment to securing the medical equipment, HIT, develop service agreements and to collect the resources that will enable GHCI to attain FQHC/CHC status. The hard working GHCI board of directors is relentless in conducting fundraisers; and advocating for the health needs of Turnagain Arm. They are in the process of developing partnerships with local social services, churches, civic and community organizations; and collaborating with other health care practitioners and organizations in the region. Together the partnership of a strong clinic management team and a strong board of directors will achieve their goal of providing comprehensive services using health information methods to improve quality of care and to continually move forward in the quest of creating long-term sustainability for the two clinics.

Girdwood and Hope

Girdwood It's easy to hear about a community known for its year-round destination Resort and think that residents of the area are likely to be pretty well-off because they



live in a place that people love to come for the great snow sports in the winter and for hiking and relaxing during the beautiful



summer months. For a selected group of folks this is undoubtedly true. But, the majority of residents and seasonal workers in the area either work directly for the resort in lower paying service positions or for businesses that exist to serve the Resort, its employees and their tourists. It's similar to a fishing town. Some commercial fishing companies

make a lot of money, but the fish processors, packers and cannery workers receive low-pay and work long hours. These relatively unskilled workers will make concessions for the companies they work for knowing there are limited jobs in the area and there are many people who would gladly take their position.

Everyone is welcome at the Girdwood Health Clinic. No one is turned away because of an inability to pay. The GHCI has treated everything from reindeer attacks and buffalo gorings to the more common injuries such as sprains, strains and broken bones from Resort' skiers or snowboarders; extracting wayward fish hooks; and the mundane health needs that require antibiotics; stitching up a little boy's knee (again) after another bike fall; reassuring young mothers that the stuffy nose, flaking scalp, smaller appetite on some days and excessive crying are all perfectly normal things that baby's do. There is nothing to worry about. The Clinic has provided this comfort and care for residents and visitors of Girdwood for the past dozen years. The Girdwood Health Clinic board is passionate about improving the health of both communities through the committed to the long-term sustainment of the Girdwood and Hope Clinics.

Hope Hope is a small village 56 miles away from Girdwood. The community is a close knit one, truly a place where everybody knows everybody. Hope was founded many years ago as a mining camp. The simple wooden cabins were built for people just coming through the area on the way up to gold mining and on their way back. Many of these cabins are still there. Some residents have fortified the walls of these cabins and renovated their interiors so only the worn wooden plank exteriors are reminiscent of the Gold Rush.

Three to four years ago, the owners of the little Hope' grocery store sold it because it wasn't making the money they'd hoped for. That left the villagers without a place to get groceries locally. The resourceful residents temporarily used a system that anyone who drove to Anchorage for groceries or errands would take orders from the other residents and pick it all up on each trip. People took turns. When someone ran out of something, neighbors would share theirs. That's just the way it is in Hope.

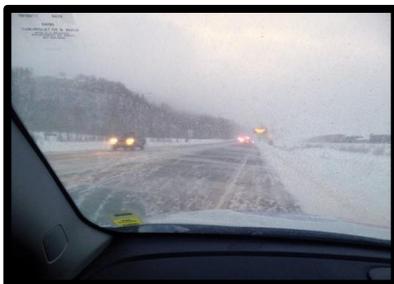


Girdwood Board and Hope Committee

Many of the Hope citizens have been long-time patients at the Girdwood Health Clinic because in 2006 to 2007, Girdwood Clinic owner Kerry Dorius held half day clinics in the teachers' quarters above the library in the original town school house. But those days are gone. The private for profit Girdwood Clinic was unable to sustain the Hope clinic without support back in Girdwood. Hope has only 4 Emergency Trauma Technicians (ETTs). They do the best they can until the higher level Emergency Medical Service (EMS) care can arrive from Cooper Landing.

One of Hope's long-time residents – a 1960's and 70's activist - advocates for the goods and services needed in Hope. Ultimately, she bought the grocery store and is still running it today. She has also been a long-time, enthusiastic supporter of having a local health clinic for Hope residents and others in the surrounding area. It's not practical for people who have colds, flus, cuts or twisted ankles to drive for almost two hours (when the roads are clear) to get to their primary care provider. Because that drive is required when going to Anchorage, some people only go when they have an emergency (by EMS ambulance from Cooper Landing or a LifeFlight helicopter from Anchorage), a scheduled specialist's appointment or a planned hospital stay. People often skip preventive care and provide their own treatment for acute illness and injuries. For example, why drive in when you've got an infection in a cut. They simply soak it in hot water and Epsom salt, perhaps consult with a neighbor or two and then get on with their day. Sometimes this works just fine but at other times the results can be dire.

Another characteristic of both of these areas is the challenges presented by weather. Last year, the village Of Hope used generator power for two months after a heavy snowfall knocked down a power line to the small town. An electrical repairman sent to fix the line fell into a deep ravine and laid there for one and a half hours until an EMS unit could come from Moose Pass 50 miles away to rescue him.



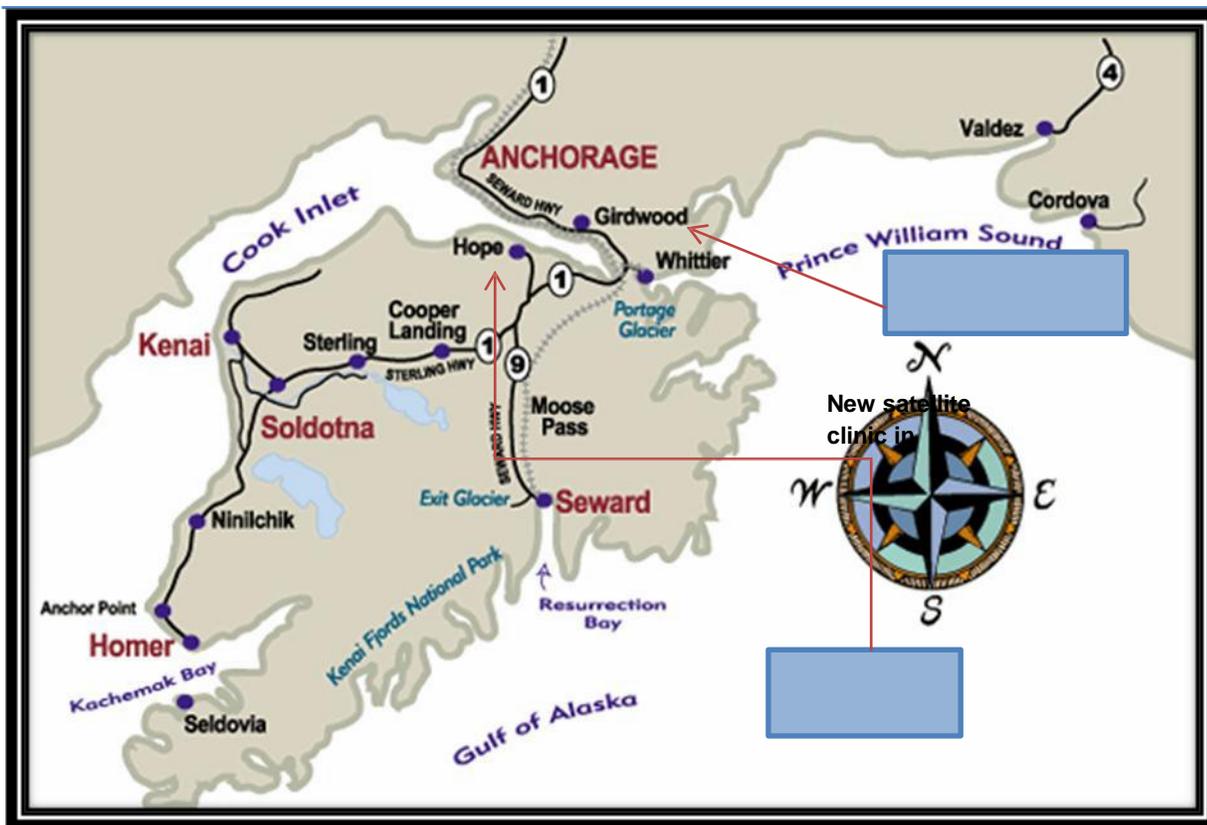
Dangerous winter roads between Girdwood and Anchorage



When avalanches or motor vehicle accidents close the highway, Girdwood Health Clinic is the only medical facility between Anchorage and Seward. Road closers typically last 4 to 6 hours whenever there is a fatality on the highway. This occurred four times in 2011. There was also a year when the highway between Anchorage and the Kenai Peninsula was closed by avalanches north and south of Girdwood for almost six days. There is no alternative route

to Anchorage much to the surprise of stranded visitors.

SERVICE AREA MAP



Distance between Girdwood & Hope, Optimal Travel Time = 56.25 miles, 1 hour 6 minutes.
 Distance between Girdwood & Anchorage, Optimal Travel Time = 37.65 miles, 43 minutes.
 Distance between Hope & Anchorage, Optimal Travel Time = 85.78 miles, 1 hour 39 minutes.

AREA RESIDENTS & THEIR HEALTH NEEDS

Description of Residents The service area for the organization includes Girdwood and the small communities of Indian, Bird, Portage, Sunshine and Hope and individuals and families that live outside these places along the Seward Highway.

Permanent residents of the area - including resort employees - and the average number of tourists a year total roughly 2,500. Seasonal residents with vacation homes are not included in this count even though their homes make up 58% of Girdwood's "unoccupied" housing. This highlights the dominance of the Alyeska Resort on the Girdwood community. The characteristics of people living in the Girdwood, Indian, Bird, Portage, Sunshine and Hope are substantially different than people living in Anchorage or living throughout the State of Alaska. Turnagain Arm residents (the collective title for these particular towns and villages) are demographically more rural in nature. This is demonstrated by several statistics available through the U.S. Census Bureau website:

- There are far fewer children than in communities across the State - 35% less;
- There are fewer elderly than other locations across Alaska – 27% more; and
- There are 23% more adults between the ages of 20 and 64 in the Turnagain Arm area compared to the state-wide population.
- The locations served by the GHCI, like many rural locations, are far less racially diverse than urban areas and total Alaska residents. Specifically, in the Clinic area, 3% of the population is people of racial and Alaska respectively. Linked to racial distribution, 15% of the Girdwood and surrounding area' residents speak a language other than English at home. The difference is that Girdwood residents almost always have a working knowledge of English and so interpreters are not necessary.
- One of the most divergent characteristics of these three geographic areas is educational attainment. In GHCI's communities, the rate of people who complete high school is approximately 18% lower than Anchorage or the State, while interestingly, the percent of people with bachelor's degrees or higher is only slightly lower than Anchorage. It is plausible that the higher rate of college graduates in the local area reflects migration to Girdwood to take advantage of the year-round Alyeska Resort. It is, after all, the State's largest resort and it has the most challenging ski runs in winter and is a natural wonder in the summer.

- The median incomes of residents in Girdwood and Hope are strikingly lower than those living in Anchorage and Alaska, with target area communities having a median income at \$59,000, compared with \$72,000 in Anchorage and \$67,000 state-wide. 9.2% of the Turnagain Arm residents live in poverty. Strongly connected with incomes is the rate of individuals/families without health insurance. The lower an individuals' income, the less likely s/he is to have health coverage.
- The populations' age distribution shines a light on what the health needs are likely to be, the volume of care needed, income information for the community hints at the types of program revenue that is likely to be received. For example, the high rate of adults ages 20 to 64, would suggest there will be injuries to treat, contraception to provide, women's health exams, referrals for prenatal care/labor and delivery, cancer screening, depression and chronic illness management.
- The overwhelmingly Caucasian and English speaking population infers that the Clinic does not require the same type of linguistic and cultural means that are essential when serving an extremely diverse population with dozens of languages and dialects. This clinic does not have to take extra measures to assure that the clinic interior reflects its diverse population or that employees reflect the patient population. There is a fairly substantial Filipino population that works as housekeepers at Alyeska Resort Hotel, although they remain a small portion of the overall community. The Filipino population uses the clinic frequently due to their high rates of diabetes and hypertension.

The population of Hope has a high rate of elderly patients receiving Medicare (17%), which suggests that on the whole, the income generated from the population will be significantly lower than if the population either had the personal resources to pay full fee or if the population had private insurance.

Description of Residents Health Needs - NOTE: *It is easy to get small area demographics for these communities through the U.S. Census Bureau report "preparer." Getting health statistics on this small area basis, however, is not. This is because the counts of any specific condition or lack thereof are statistically too small to be reliable and extreme caution would need to be taken in making assumptions from those figures. For this reason, health information for the Anchorage Municipality is reflected below.*¹

In all, a community that leans towards low-paying resort jobs and other service industries, fewer uninsured people (Girdwood) and a village full of retired individuals who have been under-utilizers of health care (Hope) requires that the Girdwood and Hope Health Clinics have the financial wear-with-all to collectively sustain them while serving a population with intensive needs.

Chronic illnesses (high cholesterol, hypertension, heart disease, non-gestational diabetes, depression, obesity and asthma) are the most prevalent cause of illness and contributor to the primary causes of death in the Alaska Municipality. Behavioral Risk Community Health Center conducted two pilot projects which were completed in the summers of 2011 and 2012. In the final study dated October 9th 2012, the Behavioral Risk Factor Surveillance (at the municipality level) shines a spotlight on the incidence of illness, the prevalence of high risk behaviors and the absence of critical preventive care.

- 87% of respondents drink alcohol;
- 9% indicate that they binge drink (five or more drinks in one night for a man and three or more drinks for a women);
- 3% self-identify as chronic drinkers;
- 39% reported being over-weight and another 30% indicate that they are obese, (100 pounds or more over their recommended weight given their height and age);
- 36% have high cholesterol;
- 2% have had a stroke;
- 7% have non-gestational diabetes;
- Only 39% of the people with diabetes have had basic diabetes services in the past year (two blood sugar readings, a foot care and a retinal eye exam);
- 10% have asthma;
- 3% have heart disease and another 3% have had a heart attack;
- 32% currently smoke, 3% chew tobacco and another 28% used to smoke;
- 25% have high blood pressure (This is an Alaska-wide rate, but it is heavily influenced by the rates for Anchorage, its most populous city.)
- 13% have frequent mental health distress;
- 17% have clinically diagnosed depression;

¹ These data were derived from the “Behavioral Risk Factor Surveillance Survey” (BRFS) three year summary (2007-2009) and the Alaska Health Data Book: 2007, Selected Health Measures, Section II, developed by the Alaska Department of Health.

For those who have had a Personal Health Questionnaire (PHQ) for depression, 70% do not have identified depression, 8% have mild depression, and 22% have moderate to severe depression. This means that in the Anchorage Municipality alone, there are more than 64,000 people suffering with moderate to severe depression. Each of these conditions can become extremely debilitating. However with appropriate diet, exercise, stress reduction, medications and clinician care, these conditions can be improved. Those who are able to be proactive and follow these healthy habits, reduce their risks significantly.

Healthy lifestyles have a tremendous positive impact on improving and maintaining good health. The sister to having a healthy lifestyle is receiving appropriate preventive health services. Consider this:

- 40% of those 50+ have not had a sigmoidoscopy or colonoscopy;
- 4% of adult women (18+) have not had a PAP test during the last three years;
- 26% of adults have not had routine dental care;
- 20% of adults have not had any leisure exercise in the past 30 days;
- 12% of women age 40+ have not had a mammogram within the past three years;
- 39% of the participants report that they have either never received dental care or have not had any teeth cleanings in more than a year. (Health Data Book);
- 20% of the third graders participating in the annual Smiles Survey had caries (cavities) that have not been treated; and
- 52% of these third graders had not received sealants to protect their teeth.
- 83% of adults 50+ have not had a blood stool test within the past two years;

The rate of people that delay preventive care or who do not receive it at all, is troubling. The screenings are generally simple and they don't usually take long. Getting these services reassures patients that everything looks good, or can direct their provider to take immediate action - arranging other tests or setting up a treatment plans. Unfortunately, even treatments that have proven highly successful are less effective during later states of the illness, making screenings all the more important.

That is why meaningful access to high quality affordable and local primary care services is so important. Without it, ironically and painfully, the very population that has the greatest health care needs (the low-income uninsured) is also the population that has the greatest difficulty in getting health care.

PROJECT DESCRIPTION –A RESPONSE TO NEED

Introduction – Building on the success of our 2013 expansion program funded by a special Legislative allocation, this request supports medical equipment and health information technology. There are also requests for consulting costs for strategic planning and assistance with development of contracts with the nearby Community Health Centers in Anchorage and Soldotna and consulting costs to finish all necessary programs such as an Emergency Preparedness Plan and Quality Assurance Program to complete HRSA requirements for FQHC applications. Girdwood Health Clinic achievement of Federally Qualified Health Center (FQHC) status will increase the long-term financial sustainability of the both the Hope and Girdwood Clinics.

Over the past year GHCI has made progress towards the objectives that were outlined in the 2013 request. We have increased staffing from 2.00 FTEs to 5.00 FTEs through the addition of a part-time Physician Assistant, a full-time and part-time Administrative Assistant and a part-time Medical Assistant for the Hope Clinic. We anticipate that the Physician Assistant will be able to increase their hours as growth continues. Those hours will be paid for through the increased program income generated by the higher productivity from increased staffing. Through the increase in staffing GHCI expanded hours at the Girdwood Clinic by eight hours a week and added six hours of clinic services weekly in Hope. We have begun on-call emergency care on Sundays at the Girdwood Health Clinic via the on-call Nurse Practitioner/Physician Assistant. We have increased administrative services by 16 hours per week.

The lower level of funding (over our initial request) made it untenable to establish a 24/7 consulting nurse triage system; increase the number of special clinics provided by the Nurse Practitioner; and to purchase generators for both sites. We were able to add an automated external defibrillator for Hope. We did not purchase the AFHCAN carts and other equipment that would improve our care capabilities in our rural locations and did not prepare a FQHC/Community Health Center application.

Project Description Overview - We respectfully request \$262,900 to support a (1) digital x-ray, (2) an ASP platform and EMR compatible digital diagnostic equipment for the Girdwood and Hope clinics;(3) to purchase and install a high grade generator at the Girdwood Clinic, (4) to hire a consultant to develop purchase of service contracts, and (5) to hire a consultant to help in the development of a five-year strategic plan, (6) hire consultant to assist with completion of all federal HRSA requirements in preparation to write the FQHC application for GHCI.

The Details –

1) Purchase, Installation & Training of Digital X-Ray

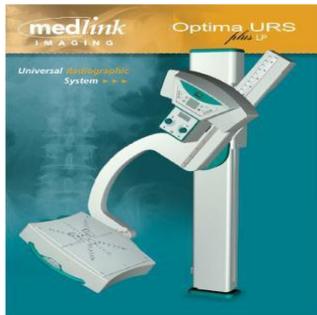
In this project, GHCI wishes to upgrade its x-ray capabilities but will continue to have readings conducted by outside radiologist reading services. The Digital X-ray will improve patient care and outcomes by sending the films to radiologists and specialists in Anchorage for reading while the patient is still in the clinic. This enables the correct treatment to begin immediately, rather than waiting a day or two for the reading, which delays care for the patient. This digital X-ray also uses less radiation, which is also beneficial to the patient.



In addition to vastly improving timely quality care for patients, the digital x-ray is needed because the current x-ray is over 30 years old and beginning to fail. Finding parts for this vintage machine is becoming increasingly difficult. Girdwood Clinic provides over \$20,000.00 of X-ray services per year.

The purchase of digital X-ray will prevent GHCI from needing an X-ray processor and the hazardous chemicals in the clinic. It will also save the cost of maintenance, chemicals and film of \$4,000.00 yearly. Digital X-ray will save the courier costs to take the files to Anchorage for reading (\$8,000 per year), and images will be saved on a hard drive rather than stored in a file cabinet which reduces the footprint of the clinic.

X-ray/Installation/Training cost: \$120,000



2) Implementation of store forward telemedicine using Application Service Provider (ASP), which builds on GHCI's existing electronic medical record and the purchase of compatible diagnostic Health Information Technology (HIT) equipment.

The Application Service Provider (ASP) connects the Electronic Medical Record (EMR) and encrypts the data for privacy. The ASP then sends the EMR through a high speed

internet connection to a secure data bank located on a server at a distant location. When EMR health record is needed it can be accessed from its server location and pulled to the location where it is needed through the secure internet connection.

For example, the clinical technician sees a sick child in Hope. She takes a set of vital signs with her digital vital signs equipment. She also takes a digital photo of the sick child's ear drums with a digital otoscope. She connects her digital equipment and uploads the vital signs and otoscope digital photo data into the child's Electronic Medical Record (EMR). She then sends this record through the internet to the ASP database on a distant server. She next contacts the NP in Girdwood and gives a report over the phone and tells the NP to retrieve the medical record from the ASP database. The NP reviews the EMR data and photos on her computer in Girdwood, calls the Hope clinical technician back and tells her that the child has one infected ear drum and should proceed to the clinic for further treatment. The advantage of the digital photo saved into the record is that the next clinic provider that sees that child can view the digital image and determine if the child is improving or not. If the child's vital signs and digital otoscope photos are negative, the clinician in Hope will follow up with the mother and child at a time determined by the NP or PA in Girdwood.

The initial set up cost is based on \$1,195 per medical provider. Current GHCI has 1.50 FTE providers (a full-time Nurse Practitioner and a part-time Physician Assistant), bringing the set-up cost to \$1,793.

- For a small monthly fee, GHCI can upload encrypted medical records from both Girdwood and Hope through the ASP to a large offsite server bank; this is the data "cloud". Both Girdwood and Hope sites will be able to access this database and share these patient records.
- The Electronic Medical Records will include the encounter notes generated for each patient visit along with medical records and reports provided by other health care organizations such as lab and X-Ray reports. All records and data will all be encrypted and stored between the 2 sites by the ASP (application service provider).

An added benefit for the offsite server bank is that it is protection against loss of critical patient records in the event of a natural or man-made disaster. This is also a part of GHCI's Emergency Preparedness Plan.

Because of this new ASP technology, the AFCHAN carts included in last year's request will not be needed to connect the two clinical sites. GHCI will connect the digital components of the carts directly to our computers send the encrypted data generated to the data base at the remote server bank and share the information with the opposite via internet. This system of telemedicine is called store forward technology. This technology

is much less expensive than using live telemedicine for encounters. In addition, the digital components for the two sites connected through the internet EMR will cost \$46,000.00 saving of \$2,000.00 on the cost of just one telemedicine cart.

ITEM	CALCULATION	TOTAL COST
Digital ECG, H.S. Midmark	2 each @\$5,849	\$11,698
Digital Vial Signs Monitor	2 each @ \$2,812	\$5,624
Digital Spirometer, H.S.	2 each @ \$4,680	\$9,360
Staff training on Amazing Chart EMR program	2 sessions @ \$3,000	\$6,000
Stethoscope, RNK TR USB	2 each @ \$1,539	\$3,078
Tech Instalation (both sites)	2 sites @ \$1,500	\$3,000
Canon Video Camera, VtC	1 each @ \$1,404	\$1,404
Equipment Cart	2 each @ \$572	\$1,144
Digital Still Camera, Canon	2 each @ \$428	\$856
Digital Otoscope Refurbishing	1 time repair	\$500
Digital Equipment Interface	2 each @ \$160	\$320
	TOTAL	\$42,984

Digital Equipment & Supplies Needed to Implement telemedicine using ASP and EMR, Total Cost: \$42,984

3) Purchase & Installation of High Grade Generator

A high grade generator will prevent any disruption of medical care at the Girdwood Clinic in the event of a power outage. The generator is expensive but will keep the clinic operational. (There is an average of five power outages in Alaska each year that last one and a half hours or more.)



Girdwood power outages have required emergency surgical procedures to be completed by lantern light. Hope has a generator through its lease arrangements. The generators are also a part of GHCI’s Emergency Preparedness Plan.

Generator/Installation cost: \$20,000

4) Consulting Services to Set up Contracts with Nearby Community Health Centers for Services that are Cost Prohibitive for GHCI.

The consultant will write policies and procedures and set-up contacts to provide up financial service and staff training for GHCI staff. Anchorage Neighborhood Health Center (ANHC) and Peninsula Health Center are the 2 closest health centers to Girdwood and Hope. Setting up contracts for needed staff education and services with either of these experienced larger CHC will be more economical than trying to provide the same quality of services locally. Additionally it will be a source of revenue for the larger CHC. Most importantly it will foster a culture of cooperation, not competition, between these important providers of health care in this rural area. The ultimate benefactors will be the patients of all the involved centers including the in Anchorage, Girdwood, Hope and the Kenai Peninsula.

The needed contracts include:

- A. An after-hours call contract will assure that patients are able to get health care support and advice during hours when the clinics are closed. This provides patients with greater access to care and peace of mind just knowing that the service is available when needed.
- B. A billing and collection contract will save administrative time which had been used for billing, and will utilize the expertise of these area CHCs, who have had years of experience with these services, have detailed knowledge of public and private insurances and billing patient fees. These CHCs also have the capacity to provide these services in high volumes and within a timely manner.
- C. A contractual agreement for preparation of the Uniform Data System Report (UDS) - required annually by the Federal Bureau of Primary Health Care - saves an enormous amount of time preparing numerous detailed Tables regarding patient demographics, insurance coverage, clinical measures, the intricacies of revenue received during the past year and the minutia of the past years' organizational expenses. The accurate completion of this report is imperative because federal Health Resource Service Administration/Bureau of Primary Health Care makes some funding decisions based on information included in the report, such as the rate of patients who are uninsured and paying on the sliding fee scale.
- D. Contract with larger CHC's to provide staff training regarding financial screening, eligibility for public insurances and how to assist patients in enrolling in coverage for which they qualify. This will maximize revenue for GHCI's financial viability and will enable patients to have greater access to care, whether they receive it through the Girdwood and Hope clinics or elsewhere if they wish to travel for that care. (People

with any type of insurance are more likely to receive care than people without insurance or an inability to pay for their services.)

The consultant will also be instrumental in setting up and implementing a quality assurance program for the Girdwood Health Clinic. This program will ensure good patient care and satisfaction with services. Importantly this quality assurance plan will be integrated into the Electronic Medical Record.

Staff will receive training on HIPPA and develop a network of capable professionals in the larger CHC's who are able to assist GCHI to maintain compliance with all aspects of HIPPA.

ACLS (Advanced Cardiac Life Support), CPR and BBP (blood borne pathogens) and other staff training needs will be provided through contract with larger CHC's assuring that staff have mastery on these critical emergency services and that this skill is documented. These services are also part of the Emergency Preparedness Plan and Bureau of Primary Health Care clinical requirement.

GHCI has been fortunate to have the assistance of both Stan Steadman the previous executive director of Peninsula Health Center and also Joan Fisher the previous executive director and project manager of Anchorage Neighborhood Health Center. Joan Fisher assisted us with our recent Rasmuson Tier 1 request for funds for lab equipment. Although Joan is currently working as the executive director for Brother Francis Shelter in Anchorage she has indicated that she is interested in helping us with the necessary contracts and a five year strategic plan. Stan has been instrumental in helping us with planning and HRSA contacts.

Consultant Cost for Developing Service Agreement and Staff Training 100 hours @ \$85.00 per hour = \$8,500

5) Consulting Services to Assist in the Creation of a Long-Term (5 Year) Strategic Plan.

GHCI's current partnerships with other health organizations and the efforts outlined in this proposal create a foundation from which a five-year strategic plan will be developed with the assistance of a consultant. All health care organization between Anchorage and Seward will be invited to participation in this plan. Specifically the health centers include Anchorage Neighborhood Health Center, Peninsula Community Health Services in Soldotna and the Seward Health Center and residents of the Girdwood, Hope Whittier, Cooper Landing and Moose Pass communities. This Strategic Plan will be established through two summits that will include representatives from each participating health organizations and communities.

The first summit will concentrate on acquiring information on needs and the final summit will determine the best options for strategic planning based on the information generated by the first summit. The coordinated Strategic Plan will utilize the expertise of each organization and community, will maximize the use of available services within the collective, will establish a clear method of information sharing on patients serviced within the area covered in the strategic plan and will provide high quality, comprehensive, cost- effective and sustainable health care for the rural areas between Anchorage and Seward.

Services for development of a five-year strategic plan – 120 hours at \$85 per hour - \$10,200.

6) Consultant Services to assist GHCI staff to review and complete all HRSA requirements before beginning the work on FQHC application.

Complete policy and procedures for all financial, operations, clinical, human resources, and other activities of GHCI including contractual arrangements with outside community health centers and other business partners. Development of a emergency preparedness plan in cooperation with other state and local entities such as the EMS system, schools, DOT, MOA, Kenai Peninsula and State of Alaska. Development and implementation of Quality Assurance program and any other programs or identified HRSA requirements necessary before we are able to begin FQHC application.

A consultant is also needed to assist with the development of policy and procedures to insure the effectiveness of the governing board, including the responsibilities of committees (e.g. Executive, Finance, Quality Improvement/Assurance, Risk Management, Personnel, Planning. This consultant will also assist with plans and procedures for ongoing board training, orientation of new members, and board self evaluation and performance measures.

Services for review of HRSA compliance requirements to become a Federal Qualified Health Center: \$8,500

The Value of Local Health Care - From a strictly economic point of view, the Girdwood and Hope Health Clinics' value would be in the difference between its assets and liabilities on a given date. This is the tangible value of the clinic.

On a broader level, however, there are intangibles too: Such as:

- A long history within the community;
- The evolution of a community-based group of individuals who enthusiastically joined together to become the GHCI Board of Directors
- The appreciation of the entire community for the care that is provided;
- The expression of commitment to the health of the Girdwood community and its neighboring community in Hope;
- Accessible care regardless of ability to pay;
- A history of resourcefulness and frugality;
- Patients that include four generations of family members;
- Assurance that consulting nurse services are available at all hours when the clinics are closed – any day, any time;
- Healthy babies, preschoolers, school age kids, adolescents, adults and seniors.
- A culture of working on goals until they are achieved in full.

If these could be placed on a ledger somehow, the worth of these clinics is well above any assets less liabilities.

The community stands behind Girdwood Health Clinic - The residents of Girdwood are very supportive of this expansion. In fact, GHCI received 300 letters in support of the Clinic's HRSA planning grant (discussed above) to bring more health care services to more area residents. On March 14th of 2012 over 100 Girdwood and Hope residents attended the community meeting where the plan for the expansion of the Girdwood Clinic and creation of the Hope satellite was unveiled.

Along with their written support, patients and community members have nothing but praise for the work done at the Girdwood Health Clinic.

Following GHCI's diagnosis of a very rare and dangerous condition that no other physician had identified; arrangements were made for no cost brain surgery in Seattle. With the help of a concerned endocrinologist in Anchorage, successful treatment was received by Mike Jackson (29) who later said:

“It is hard to express how grateful I am to Kerry. I now have a better chance to live long enough to achieve my personal goals.... If it hadn't been for her persistence, I would not have gotten further tests and treatment. I would be sitting on a ticking time bomb that ten years from now could've killed me.”

The GHCI has a well-earned reputation in the community. It is demonstrated by the number of service club' recognition awards given to the Clinic and staff over the years.

There are many, many other stories that recount what the Girdwood Health Clinic has meant to individuals and families in the community - far too many to retell. In all of the stories, however there is a repeated theme, that the Clinic is an absolute necessity and that the staff is extremely dedicated, knowledgeable, highly skilled, experienced and a compassionate.

The written and spoken support of the community and the testimony to the Clinics' diagnostic prowess are extremely meaningful measures of the value of the Girdwood Health Clinic and the certain value of the Hope Clinic which will follow (if this proposal is granted). But in these economically difficult times – and for good reason – there must be a measurable demonstration of the project's value. And, here they are:

PROJECT OUTCOMES

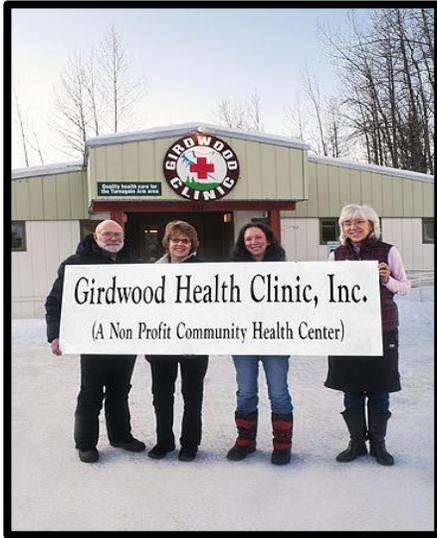


Amanda Hawes brings Max to the clinic for burn on hand

1. Having digital equipment improves providing timely care by allowing Clinician in Girdwood to see photos and data on patients presenting in Hope at the time they are seen in Hope. Store forward telemedicine encounters will be tallied by Hope Clinic.
2. Having digital X-ray will improve patient outcomes by allowing specialists to view their X-rays while the patient is still in the clinic. Reading times will become part of the patients EMR.
3. ASP and EMR training will allow GHCI to share medical records between both clinics by January 2014.

4. Consultant will assist GHCI to complete 5 year strategic plan by the December 2014.
5. Consultant will enable completion of all contracts and requirements by June 30, 2014, prior to beginning application for FQHC.

BOARD OF DIRECTORS BIOGRAPHICAL SKETCHES



Mary Jo Thill, President

Mary Jo is a 21 year resident of Girdwood. She has held numerous employment positions including working as Administrative Assistant in the Office of the Governor, Alaska Department of Labor and Legislative Affairs Agency; has served as Legislative Aide to Senators Frank Fergusson, Willie Hensley and John Birkley. Mary Jo has also been a business owner and Executive Producer for Gaff Rigged Productions, a national award winning documentary film and video production company. Gaff Rigged Productions also performed legislative consulting and advocacy services for a range of Alaskan clients. Mary Jo is an active community volunteer participating with many groups and events and is a patient of GHCI. (Expertise – Legislative Affairs)

Terry Sherwood, Vice President

Terry has been a full-time resident of Girdwood for 10 years and previous to that a part-time resident for 15 years. She is a retired Anchorage School District teacher, and taught her last 5 years teaching grades 5/6 in Girdwood. Terry currently works for Alyeska Ski Club as the race and program administrator. In this position, she works with the 500 members and their families in the various Alyeska Ski Club programs and does the book keeping for GVSEF, their nonprofit 501(c) (3) foundation. Terry brings many years of BOD, fund-raising and grant writing experience to the board. She currently chairs the Girdwood Chapel Pastor Parish Committee and is a member of their Steering Committee. Girdwood Health Clinic is her primary health care provider. (Expertise – Education, nonprofits and the ski community)

Amanda Snitzer, RN, Secretary

Amanda graduated from the University of Alaska, Anchorage in 2005 with a nursing degree. Her initial post-graduate position was with Providence Health System. Subsequently she became the Girdwood School Nurse (2007). As the school nurse she intimately understands the importance of local, accessible healthcare for the population, and especially the children. Amanda is married and has one daughter. She has been a resident and user of the Girdwood Health Clinic for eight years. Amanda believes that a universally accessible clinic in Girdwood is essential to quality of life, safety and health of the population. (Expertise – Pediatric Medicine)

Steve Bartholomew, Treasurer

Steve has been an employee of Alyeska Resort, the largest employer in Girdwood, since 1985. Steve currently manages the ski, snowboard and bike shops. Steve is married with one daughter and has been a resident of Girdwood for the past 24 years. Steve and his family use the Girdwood Health Clinic. Steve is a volunteer Fire Fighter and medic working with the Girdwood Valley Fire Department. He holds the position of Fire Prevention Officer. Steve was recently voted "Fire Fighter of the Year" by his peers.

(Expertise – Emergency Medicine)

Eugene Bjornstad, Director (past treasurer)

Eugene has lived in Girdwood for 16 years. He was the General Manager of Chugach Electric Association for 20 years, until his retirement in 2001. Prior to working for the Electric Association Gene served in the United States Air Force with duties that included engineering, aerial transport, high altitude reconnaissance and combat operations. Gene is past president of the Girdwood Rotary Club, Anchorage Hillside Rotary, Alaska Airman's Association and past treasurer for Chapter 42 Experimental Aircraft Association.

(Expertise –Business)

Dorinda Carner, Director (Hope)

Dorinda was born and raised in Northern Indiana and moved to Hope, Alaska, May of 2011. Dorinda currently is property manager for Hope's Hideaway Lodge in Hope, Alaska. Dorinda is married to her high school sweetheart and between the two, they have 6 children. She started her career in Retail Management and was responsible for training all new associates in her district as well as being a Pharmacy Technician. Later she continued on to a new career and was an Office Manager for a Food Safety and Sanitation Co in Indiana for over 13 years. Dorinda's passion has always been helping and supporting the homeless. She started cooking dinner with church members and feeding the homeless and was later asked to mentor homeless women, which she did until she moved to Alaska. She is passionate about helping all people in her community and helping them reach their goals.

(Expertise – Business and Community Relations)

Michelle Cospers, Director

Michelle has lived in Girdwood and worked in the lift operations department at Alyeska Resort for 10 years. As someone who uses the clinic as the primary health care provider for her family, Michelle became involved with the Girdwood Health Clinic board to support the continuation of health services in the Turnagain Arm area. She hopes to use photography and social networking skills to promote GHCI. Michelle enjoys skiing with her husband and six year old son. (Expertise –Networking)

Clinton "Bud" Dow, Director (past president)

Bud retired from the Los Angeles City Schools after 40+ years as a secondary school teacher and volleyball coach – teaching primarily Chemistry, Biology, Physical Education, and also serving ten years as Athletic Director. He moved to Girdwood in 2006. He has been an active volunteer member of the National Ski Patrol [NSP] since 1967, presently as an Outdoor Emergency Care instructor, instructor trainer in toboggan handling, and as the CPR coordinator for the South Central Alaska Region of the NSP. Bud is also a volunteer member of the Alyeska Ski Patrol. In addition, he has been a volunteer First Aid and CPR instructor and instructor trainer with the American Red Cross since 1961. For the last several years, he has been active in seasonal medical/rescue training for the “back-country” and general rangers, and law enforcement rangers of the National Park Service in Alaska. He is a GHCI patient. (Expertise – Emergency Medicine)

Karl F. Erickson, RN, EMT, Director

Karl has lived in Girdwood since 1999. He is on the Board of Directors of the Kenai Mountains-Turnagain Arm Corridor Communities Association. He is an RN, as well as an EMT Instructor. He works full-time at the Girdwood Fire Department as a Health & Safety Officer, Treasurer, Trainer (EMS & Fire), & Lt. and with Fairweather LLC as a remote-site Medic & Occupational Health Provider. Karl uses the Girdwood Health Clinic as his primary healthcare provider. (Expertise Medicine)

Robin Ingram, Director

Robin has lived in Girdwood full time for 8 years. She has studied nursing at UAA. She is also on the board of the Glacier Valley Ski Education Foundation. She has 3 children still living at home and relies heavily on the Girdwood clinic for everything from stitches and broken bones to sports physicals. She is a homemaker at present and donated a lot of her time doing fundraisers for the Alyeska Ski Club and she looks forward to using her experience in that arena to help the Clinic. (Expertise - Fundraising, nonprofit & the ski community)

Rochelle Morris, Director (Hope)

Rochelle is a long time resident of Alaska. She moved to Hope, Alaska in 2005. She graduated from Alaska Pacific University with two Master Degrees, Masters of Art in Teaching, and a Masters in Business Administration. She earned her PhD in International finance and Business at the Russian Academy of Science. She has taught finance, accounting and related business courses at UAA, APU, Far Eastern University and University of Maryland. She has worked as the Finance Director of Homer, Alaska, Coca Cola of Russia and Eastern Aleutian Tribes which manages the health clinics in the Aleutian Chain as well as Whittier. She is a published author. She has traveled and worked in many countries around the world. She speaks Russian fluently. She is currently the owner and manager of Alaska Dacha in Hope, Alaska. (Expertise – Business)

Peter "Pat" Preis, Director

Pat is a 38 year resident of Girdwood. He worked in remote site air transportation and logistics for seven years. Following that Pat worked in materials management and purchasing both at remote sites and in Anchorage. He retired from the Purchasing Department of the Anchorage School District (ASD) in 2007. Since retirement Pat has enjoyed volunteering in the Girdwood kindergarten classroom and coaching indoor and outdoor youth soccer. Pat is currently a member of the ASD Capital Improvement Advisory Committee and is a volunteer on the Alyeska Snow Classic committee of the Four Valleys Community School. (Expertise – Business)

Kathy Trautner, RN, Director

Kathy was raised in Fairbanks, but moved to Girdwood 31 years ago and uses the Girdwood Health Clinic. After working as a Registered Nurse at Providence Hospital for nearly 30 years, Kathy retired in 2006. During her tenure at Providence Kathy was involved with patient and staff education. Kathy was a nursing supervisor for 10 years and continues to be involved in nursing, volunteering at Alaska Health Fairs. She is also active in the International Association of Lions and is the current president of the local "Turnagain Arm Lions Club." Kathy also volunteers at annual fundraisers for many Girdwood non-profit organizations. (Expertise-Health Education & Fundraising)

KEY PERSONNEL BIOGRAPHICAL SKETCHES

Kerry Dorius, RN, ANP, FNP, MSN, Executive Director, and Medical Director, Girdwood Health Clinic.

Kerry is the long time clinician for the communities of Girdwood and Hope. She has been providing care in Girdwood since June 24th of 1998. She has been developing a plan and working on creating a non-profit clinic for Turnagain Arm area since 2004. She is very knowledgeable regarding HRSA requirements for non- profit FQHC's.

Kerry earned her Bachelor's Degree in Science in Nursing, cum laude from the University of Alaska, Anchorage and received her Masters of Science Nursing Specialty, Family Nurse Practitioner from the same University. Kerry has served as Manager and Nurse Practitioner for the Providence Girdwood Medical clinic from June 1998 to November 1999. In 2000 Kerry established the Girdwood Clinic as a private practice, serving as an Advanced Nurse Practitioner. She has spearheaded the effort to get GHCI 501(c) (3) status under the direction of the Board and with the help the strong team that she leads; Kerry will manage and coordinate all Legislative Allocation funding. Kerry is and has been certified as a Family Nurse Practitioner, Advanced

Cardiac Life Support Instructor, Pediatric Advanced Life Support Instructor, Certified Critical Care Registered Nurse, Flight Escort (Alaska State certification). Kerry has participated in a number of different community services, has given professional presentations and has received many Service and Honor awards.

Jill Veatch, Chief Operations Officer

Jill, with over 30 years in accounting, administration and business, serves a vital role at the Girdwood Health Clinic responsible for directing, administering, and coordinating the day-to-day operations in accordance with the policies, goals and objectives established by the Executive Director and the Board of Directors. Jill is the project manager for the 2013 State Grant awarded to the GHCI and is responsible for maintaining a record of all financial transactions associated with the grant activities and reporting requirements. Jill has participated in a number of different community fundraisers including the Alaska Visitors Industry Charity Walk that has supported several Girdwood nonprofits since its inception in 2000.

Allergy, Asthma and Immunology Center of Alaska, L.L.C.

January 30, 2013

RE: State of Alaska appropriation to create a sustainable nonprofit clinic eligible for federal funding

To Whom It May Concern:

On behalf of the Girdwood community I support a state appropriation in order to continue the work that the Girdwood Health Clinic, Inc. has begun.

In 2012 the State of Alaska legislature awarded the Girdwood Health Clinic \$400,000 to begin working towards becoming a sustainable nonprofit clinic eligible for federal funding. With this money the clinic has expanded hours to 6 days per week with on call staff available on Sunday. They have located and remodeled a site for a satellite telemedicine clinic in Hope. They have hired and trained a clinical technician for the Hope site. They have submitted an application to the Rasmuson Foundation for lab equipment to improve patient care and improve the revenue stream for the clinic. They have partnered with The Foraker Group to complete a business plan and they have joined together with Little Bears Playhouse and the Recreation Center Committee to begin planning for a new joint facility.

Girdwood is a small tight-knit community of eighteen hundred people located about forty miles south of Anchorage. Located in the heart of four beautiful valleys, the Girdwood Health Clinic serves the people of Indian, Bird, Portage and Hope as well. Forty miles might not seem like a very great distance from the hospitals and urgent care centers of Anchorage but with the sudden severe weather that can happen in Alaska, forty miles can suddenly become as challenging as four hundred miles. In addition to the severe weather, the highway system is very limiting. There is only one highway between Anchorage and Seward (the next closest medical center approximately 125 miles south of Anchorage). If there is an avalanche or natural disaster that closes the highway, the community is completely dependent on the Girdwood Health Clinic for medical care.

Girdwood is home to a world class ski resort that brings significant tourism into the area. Most of those tourists arrive by motor coach or train and have no independent transportation while they are in Girdwood. Our four season resort is staffed largely with seasonal transient workers. Most of the transient workers from the resort have no health care benefits. And although earning minimum wages, because they are employed most of these workers do not qualify for public assistance. A nonprofit health center is absolutely essential in order to serve the uninsured and low income people in Girdwood and the surrounding smaller communities. Many of these people simply go without health care. Between financial restrictions and lack of transportation to Anchorage they have no other choice.

As a physician, friend and fulltime resident of Girdwood, I have known Kerry Dorius for many years. The Clinic Director, Kerry has been the primary care provider at the Girdwood Health Clinic for as long as I can remember and has been available day and night for the community. Her level of expertise is unsurpassed. People know her and trust her with their care. Kerry has done a remarkable job caring for our community but this time she needs our help. Please award this appropriation to the Girdwood Health Clinic, Inc. so that they can begin the process of becoming a sustainable local health care center. Our community desperately needs this.

Sincerely,



Jeffrey G. Demain, MD, FAAAAI, FAAP
Director, Allergy, Asthma & Immunology Center of Alaska
Clinical Associate Professor, University of Washington

JGD/emd



File Code: 1500

Date: February 1, 2013

Girdwood Health Clinic, Inc.
131 Lindbald Avenue
PO Box 1130
Girdwood, AK 99587

The U.S. Forest Service is writing in support of your efforts to provide sustainable health care options for Girdwood and the surrounding communities. Professional health care is important not only for our staff members at the Glacier Ranger District, but also for the hundreds of thousands of annual visitors to the Chugach National Forest. The clinic already provides outstanding personal care and we appreciate the efforts you are making to upgrade your medical technology, expand your hours of operation and increase services in our Forest communities.

Our staff members and their families have utilized the services at Girdwood Clinic since its inception. As a major employer in our area, over thirty Forest Service families depend upon local health care service. Our needs have ranged from treating routine family illnesses to providing critical first care after workplace accidents. Each one of these families has their own personal story about the quality of care that has been provided—from the professional early detection of serious illnesses to compassionate first aide. Truly, availability of health care is cited as an important consideration in recruiting and retaining professionals at our ranger district.

Our seasonal employees approximately double this year round workforce and they also depend on this care. Unfortunately, we are unable to offer health care insurance to many of these seasonal employees. An opportunity to organize a health care structure to address the needs of those who lack health care insurance could reach these employees, and many other seasonal workers in our community.

In addition to our permanent and seasonal staff, the surrounding Chugach National Forest draws hundreds of thousands of annual visitors to our communities. For example, the Begich Boggs Visitor Center in Portage Valley sees 250,000 visitors during the summer. An equal number visit our trails, cabins, campgrounds and other recreation facilities. Fortunately, for those visiting the forest and who have immediate care needs, the Girdwood Clinic is available. We truly hope that health care services continue to be available-- for these visitors, our employees and our community.

Sincerely,

TIM CHARNON
Glacier District Ranger



To whom it may concern,

My name is Phillip Ingersoll and I am the Captain of Moose Pass Fire Co. I believe that the Hope Clinic is important to the community of Hope for many reasons and here are a few of those reasons the distance from Hope to Anchorage is approximately 100 miles and there are a lot of people in Hope that do not drive and have no access to health care anywhere else other than Hope. There are a number of people in Hope that are COPD they need oxygen or a nebulizer treatment that does not mean that they need to be hospitalized but they do however need basic care and the clinic can provide that level of care. The nearest BLS ambulance is Cooper Landing Ambulance or Moose Pass Fire Co. and in good weather we are 30 minutes away in bad weather we are 45 minutes away and Life Med is at least 45 minutes out do to spool up time and flight time and if the weather is real bad then Life Med might not be able to fly at all. Hope clinic has a direct line to a doctor in Anchorage and can receive assistance over the phone. There is also a growth basis here as well with the clinic in place there is better potential to bring in a younger generation because there is a medical facility to deal with minor childhood injuries whereas before if a child needed medical attention it meant a trip to Anchorage or Seward or even Soldotna. So in conclusion we at Moose Pass Fire Co. believe this clinic to be a valuable and needed resource in the community of Hope. If you have any questions or need any more information please feel free to call me at (907) 288-6216 or you can call my cell at (907) 362-5007 thank you for your time and assistance with this matter.

Captain Phillip Ingersoll

A handwritten signature in black ink, appearing to read "Phillip Ingersoll", with a long horizontal flourish extending to the right.

February 1, 2013

To Whom It May Concern:

I am writing this letter to express my hope that the tele-medical cart be funded for those accessories required by the Hope Clinic.

The Clinic cannot function as desired or achieve its primary mission without this equipment. It is imperative for the ongoing success of the Clinic. Without saying, the Hope Clinic will be a vital and needed part of our community.

Best regards,



Scott Sherritt

Hope Volunteer Fire Department
Hope EMS

Phone: 782-3436



**P.O. Box 1102
Girdwood, Alaska
99587**

Executive Committee

Larry Cash, Cochair
Diana Stone Livingston, Cochair
Hank Hosford, Secretary
Carl Propes, Treasurer

Gary Bucy
Randall Call
Larry Daniels
Bryan Epley
Jessica Graham
Bob Gross
Di Hiibner
Lana Johnson
Lynn Johnson
Philip Livingston
Sarah Faulkner-Mattingley
David McVeigh
Dave Parish
Sherron Perry
John Rense
Dave Stratton
Ethan Tyler

Jim Barnett, Honorary Member
Per Bjorn-Roli, Honorary Member
Chris von Imhof, Honorary Member

February 1, 2013

To Whom It May Concern:

A recent vote of the board of directors of Girdwood 2020 confirmed the board's continued support for the Girdwood Health Clinic, Inc. and that organization's efforts to insure access to health care for all in the Girdwood area.

Please consider providing all financial support possible for the Girdwood Health Clinic, Inc.

Thank you.

Diana Stone Livingston
Cochair





February 1, 2013

Dear State of Alaska Legislature:

On behalf of the Alaska Wildlife Conservation Center (AWCC), I support the Girdwood Health Clinic, Inc., a nonprofit community health center.

Board of Directors:

Bruce Bustamante
President

Lana Johnson
Vice-President

Toni Walker
Secretary / Treasurer

Dennis Brandon

Jason Graham

Chris von Imhof

AWCC is located at Mile 79 Seward Hwy, about 10 miles south of Girdwood. On numerous occasions, we have sent employees and visitors, in need of medical attention, to the Girdwood Clinic. From a laceration incurred by an office employee to a traumatic bison goring of an AWCC Board Member and volunteer, we were lucky the Girdwood Clinic was there.

Even though employees have the right to take time off when accidents occur, many of our employees would not take the time to drive to Anchorage for help. With our animal care supplies, I have had employees request other AWCC staff to put in stitches, or clean out wounds to save them the trip to Anchorage. We always call the Girdwood Clinic first and with Kerry's dedication to making herself available to help at any time, our staff has received the proper care they needed. With the convenience of the Girdwood Clinic, they are able to receive medical care and return to work.

Staff:

Mike Miller
Executive Director

Tom Yeager
Director of Operations

Kelly Miller
Director of Education

Ethan Tyler
Sales & Marketing

Steve Mendive
Projects & Development

Linda Chichester
Retail Manager

AWCC receives over 200,000 visitors annually. Occasionally, a visitor will feel ill or injure themselves while at AWCC. Many times they are part of a tour group and do not have personal transportation available. What are their options for medical care? An expensive trip in an ambulance that would also take an emergency vehicle away from their service area? Or cope with the illness until medical care is more convenient. I have seen an elderly visitor on a tour bus with chronic diarrhea that had gone on for days. He was extremely pale and had grown so weak he couldn't walk any longer. He did not want to inconvenience the 45 other passengers on the bus so he endured his pain and compromised his own health. The Girdwood Clinic provides care for ill out of town visitors such as these.

I urge you to support the Girdwood Health Clinic, Inc. to begin the process of becoming a sustainable local health care center.

Sincerely,

Mike Miller
AWCC Founder/Executive Director
(907)301-7942 cell



*Edelweiss
Enterprises, LLC.*

From: Chris Von Imhof <cvonimhof@aol.com>
Bcc: cvonimhof@aol.com
Date: Sat, Feb 2, 2013 11:55 am

Chris H. von Imhof

P.O. Box 416 Girdwood, Alaska 99587
Tel: 907-783-2949 Cell: 907-229-4912 cvonimhof@aol.com

Dear Alaskan Legislators,

First I like to extend my sincere Thank you for all the hard work you have in front of you especially with the annual budget.

I also like to express my Thank you for all the support you have given to our community of Girdwood and the Girdwood Health Clinic. Inc. For more than 10 years it has provided us with good medical care, even though financially it was a real challenge to do so, especially for the many residents that did not have adequate health insurance. We are fortunate to have this Medical Clinic here in Girdwood and the current operator Ms. Kerry Dorius Has done an excellent job with limited resources.

Now that GHCI is a non profit organization it has made lot's of progress in medical care for Girdwood and added a satellite telemedicine clinic in Hope. GHCI has increased their operating schedule and was able to serve many more residents in the Turnagain Arm community. Thank you for the 2012 SOA grant that made this possible. Attached is a letter with some of the accomplishments and progress.

However GHCI needs additional equipment to provide good and efficient medical treatment. Please note the list of equipment that would really make a difference in being able to provide adequate medical care for our community.

I would greatly appreciate your continued financial support and thank you in advance.

Sincerely,

Chris von Imhof
Chris von Imhof
THANK YOU.

(Longterm Girdwood resident and former General Manager of Alyeska Resort).



4951 Business Park Boulevard Anchorage, AK 99503

ANHC.ORG 743-7326

January 31, 2013

To Whom It May Concern:

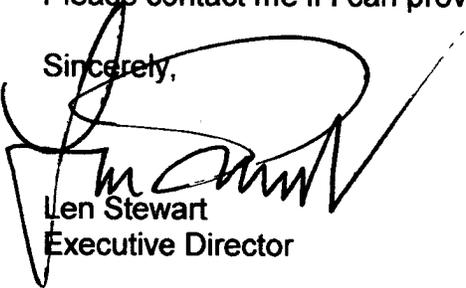
The Anchorage Neighborhood Health Center (ANHC) would like to take this opportunity to support the efforts of the Girdwood Health Clinic (GHC) to organize as a nonprofit healthcare organization and to serve a population with particular access issues, including a lack of insurance coverage, distance, isolation, and other barriers to care.

Girdwood is quite a distance from the nearest available clinic. ANHC, in Anchorage, is 38 miles north of Girdwood. Soldotna, on the Kenai Peninsula is 110 miles southwest, while Seward is 90 miles south. The Seward highway which connects all these communities is subject to road closures from avalanches and accidents which strand residents either in Girdwood, with no access to care, or in Anchorage or further south on the Peninsula with no way to return home.

ANHC has worked with GHC since 2005 to improve health care access to the rural communities south of Anchorage, including Girdwood. More recently, as GHC has accelerated its plans, we have discussed how we might serve to serve as a referral for dental care through our dental clinic, as well help guide referrals to other specialty services in Anchorage for GHC patients. We are also currently assisting GHC with training, policies, and procedures for nonprofit clinic operations.

Please contact me if I can provide additional information on this.

Sincerely,



Len Stewart
Executive Director