COMMUNITY FACT SHEET
Mountain States Health Alliance
Johnson City, TN

Program Overview
Mountain States Health Alliance (MSHA) is a locally owned and operated not-for-profit, healthcare system serving a 29 county, four state region with 13 hospitals and a fully integrated alliance of specialty and primary health care providers. MSHA has received the Excellence Award twice from the Tennessee Center for Performance Excellence.

The Northeast Tennessee Dispensary of Hope (NETDOH) is a community collaborative led by MSHA designed to meet the pharmaceutical needs of individuals without adequate health insurance or the financial means to afford medication. Among its patient population, NETDOH currently provides medication therapy to approximately 60 patients with diabetes monthly. Opened in 2009, NETDOH operates in collaboration with the Johnson City Downtown Clinic (JCDC), a federally qualified health center. The patients are receiving care coordination through AMPA and primary care through JCDC.

Program Partners
Mountain States Health Alliance is the largest health care system in northeast Tennessee and southwest Virginia, bringing care to a medically underserved population. The Dispensary of Hope is the pharmacy provider for the medically underserved population of Washington Co. TN. Its mission is to identify and respond to the health care needs of individuals and communities in the surrounding region and to assist them in attaining their highest possible level of health. MSHA partners with Johnson City Downtown Clinic, ETSU College of Pharmacy, Good Samaritan, Dr. Dana Grist (an ophthalmologist), and Appalachian Mountain Project Access through Project IMPACT: Diabetes.

Community Champion: Joy Waddell, PharmD

Patient Profile
MSHA serves patients who live in Washington County, TN, do not have prescription drug coverage, and earn 200% below the federal poverty guidelines (on a household basis). Around 20 to 30% of patients are classified as homeless. Some patients come to the site having not taken any medications for two years due to their health and financial circumstances. Patients struggle with reliable transportation, adherence, and lack of understanding of their disease states.

The primary source of patient referrals is via the local safety net clinics, the public health department, the public housing authority, and anyone discharged from a Washington County, TN hospital or Emergency Department who qualifies for short-term assistance.

Pharmacists’ Role on the Collaborative Care Team
Clinic providers refer patients directly to the Project IMPACT program. The Dispensary of Hope then obtains the patient’s lab work from his or her provider. On the initial visit, the patient meets with the pharmacist, sometimes in conjunction with a translator from the clinic as necessary for Spanish-speaking Hispanic population. Sessions last from 30 minutes to two hours, and the pharmacist conducts medication therapy management and educates the patient about diabetes, lifestyle choices, and self-management, and medications, and answers any questions the patient may have. The pharmacist stresses adherence as well as disease knowledge. Issues such as proper meal planning, daily foot checks and regular exercise are emphasized. For some patients, the clinic schedules a monthly session that coincides with their medication
refills to ensure continuity of care. Through Project IMPACT, the pharmacist also ensures that patients are provided a comprehensive eye exam by a local ophthalmologist, at no cost to them. Staff and members of the healthcare team at the NETDOH and Johnson City Downtown Clinic communicate openly to ensure that providers are aware of progress and challenges of patients.

Relevant Statistics – Community Level

- In 2010, Tennessee ranked as having the 3rd highest age-adjusted prevalence of diabetes among adults in the U.S. (estimated at 10.6%)
- The percentage of Tennessee adults with diabetes almost doubled between 1996 and 2005, from 5.0% to 9.1%
- In 2011, diabetes was the 7th leading cause of death in the state of Tennessee with a death rate of 27.1 per 100,000 individuals

Diabetes Epidemic at the National Level

Impact of Diabetes

- 25.8 million people, which is 8.3% of the U.S. population, have diabetes
  - 18.8 million people have been diagnosed with diabetes
  - 7 million people are undiagnosed
- 1.9 million people aged 20 years and older are newly diagnosed with diabetes each year
- The prevalence of diabetes in the United States increased by 128% from 1988 to 2008
- If present trends continue, 1 in 3 adults in America will have diabetes in 2050
- 79 million adults have pre-diabetes, which increases their risk of developing Type 2 diabetes later in life
- Diabetes is a major cause of heart disease and stroke
- Diabetes is the leading cause of kidney failure, non-traumatic lower-limb amputations, and new cases of blindness among adults in the United States
- Diabetes contributes to the death of 231,404 Americans each year

Cost of Diabetes

- Total cost of diagnosed diabetes in the United States = $245 billion per year
  - Direct medical costs = $176 billion per year
  - Indirect costs (e.g., disability, reduced productivity) = $69 billion per year
- Health care costs for a person with diabetes are 2.3 times higher than a person without diabetes
- 1 out of every 10 health care dollars is spent treating diabetes and its complications

References