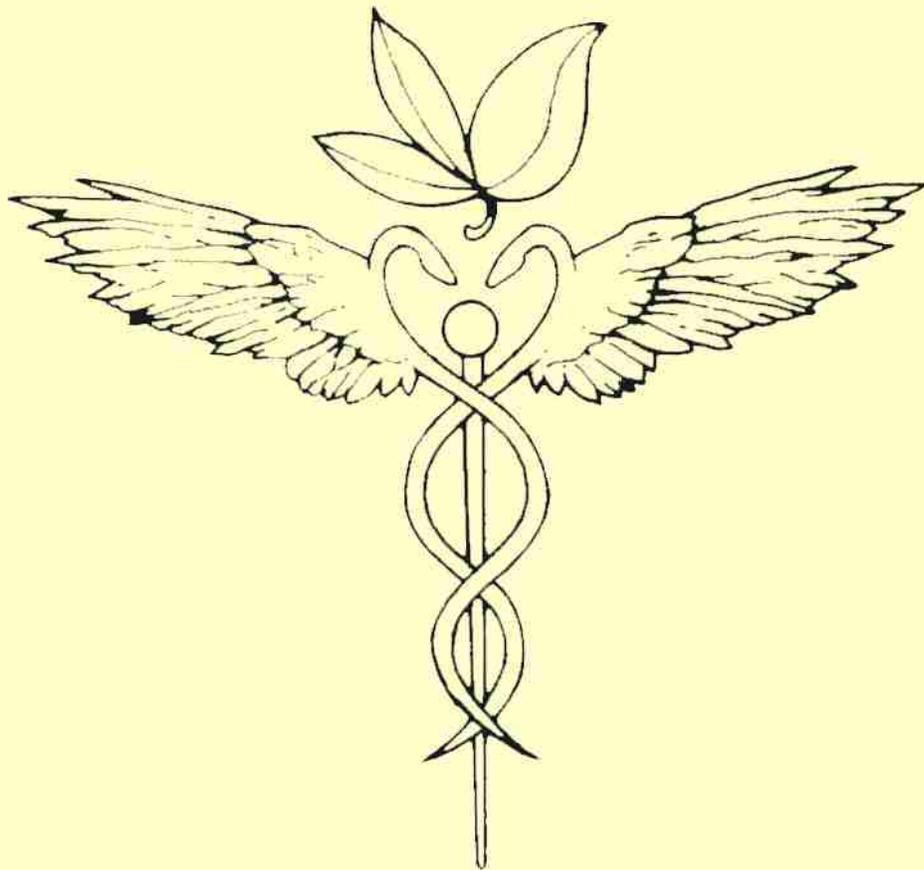


# ITHACA HEALTH ALLIANCE



2009 Annual Report

# 2009 In Review

2009 marks the 12-year anniversary of the Ithaca Health Alliance and the fourth year of operations for the Ithaca Free Clinic. The Ithaca Health Fund remains a notable local program, with people across the country and Canada regularly inquiring about how to start similar projects in their own regions. Educational programming and community outreach have been regularly scheduled throughout the year, receiving high marks from participants and other non-profit onlookers.

Recent challenges have only strengthened the resolve of volunteers and staff working on behalf of the un- and underinsured residents of our region. An unstable economic climate has made successful grant writing a trial, and local donors have sometimes shared their frustrations in maintaining personal giving standards. Despite wider fluctuations than recorded in past years, Ithaca Health Alliance memberships have held at about 700 for the year, with upwards of seven percent in the donated category. By the end of 2009, 48 people had received a donated membership, making all of us within the Alliance community donors.

In 2009, three awards were made that honor all members of the Alliance. 7Song, IFC's director of holistic medicine, received the Anne T. Jones award from the Human Services Coalition for his enthusiastic volunteer work at the Clinic. Bethany Schroeder, President of the Board of Directors, received the Tompkins Charitable Trust Award for Excellence, and also served as a Cornell Civic Leader Fellow. Ms. Schroeder's successful proposal for the fellowship was to develop a volunteer program that could be made available free of charge to all area non-profits.

Supporting the Ithaca Free Clinic (IFC) continues to be our biggest project, requiring the greatest number of fiscal and volunteer resources from the Alliance as a whole. Visits for the year rose to 2420, a total of 329 visits above the 2,091 recorded in 2008. Without considering the hours spent in committee and work-group activities, Clinic volunteers clocked 3,165 hours of volunteer time for the year in an effort to keep the doors open 11 hours each week. Moreover, the dedication of Health Alliance volunteers is remarkable and has been featured prominently in all our grant proposals, donor letters, and public communications.

## Hours Volunteered 2009

### *Board, Committee, and Intern Volunteer Hours*

Board of Directors: 2,032 hours  
Clinic Operations: 230 hours  
Community Relations: 147 hours  
— Education Subcommittee: 65 hours  
Development: 341 hours  
Finance: 96 hours  
— Health Fund assistants: 144 hours  
Student Interns: 112 hours

**Total: 3,165 hours**

### *Free Clinic Volunteer Hours*

MD: 434 hours  
Nurse Practitioner: 32 hours  
RN: 513 hours  
Acupuncturist: 255 hours  
Chiropractor: 148 hours  
Herbalist: 146 hours  
Massage Therapist: 30 hours  
Occupational Therapist: 66 hours  
Physical Therapist: 25 hours  
Registered Dietician: 28 hours  
Reception, Discharge,  
and Data Volunteers: 1,420 hours

**Total: 3,097 hours**

Based on usual and customary reimbursement standards published by Independent Sector, we have calculated the worth of volunteer contributions of time as follows:

\$55,189.95 — Board and committee volunteers  
\$29,690.40 — Administrative IFC volunteers  
\$32,755.35 — Clinical IFC volunteers

These contributions of time equal 81 percent of the Alliance's total expenditures for the year, and 175 percent of payroll costs.

# Board Report

Relationships make our work possible and remain the centerpiece of every idea we enact. In 2009, many of the collaborative efforts and full partnerships we began working on in years past became more successful. For the first time, the Alliance was granted county funding for the Free Clinic through the auspices of the Human Services Coalition, whose ongoing support and education has also helped Clinic volunteers to make improvements to resources for patient advice and referral. Cayuga Medical Center, an important Health Fund affiliate through the provider-member program, has awarded helpful charitable discounts for medical bills to Alliance members. At the same time, hospital leadership has been alert to finding ways to help the Clinic recruit physicians and other prescribing providers to volunteer. An unexpected partnership developed when the Ivy Clinic of Arnot Ogden Medical Center of Elmira began looking for new space in which to offer its satellite HIV and AIDS case management services. Now the Ivy Clinic is open every Thursday morning at our offices. The receptionists, nurses, and social workers of Arnot Ogden warm up the air for our afternoon group of Free Clinic staff and volunteers. We recognize these and other partners, funders, and donors in the report that follows.



Acupuncture treatments are available at IFC, and through Health Alliance Provider members in our community.

The Board and members of the Finance Committee clarified and standardized accounting and reporting procedures in all aspects of the financial work of the Alliance. Outside auditors have remarked on the transparency of our financial practices and reports.

A primary responsibility for the Board has been to develop strategies for the expansion of the IFC, expected to be completed in the fall of 2010. Directors considered a number of local options and, by the end of the year, had begun to develop guidelines for making the final decision.

In October, 2009, directors, committee chair persons, and staff members attended a facilitated retreat, during which a long-range plan for the Ithaca Health Alliance was explored. Primary goals include IFC expansion, more determined fund raising, and the adoption of an executive-director model of organizational leadership.

The following directors served on the Board in 2009:

Bethany Schroeder, President  
Deirdre Silverman, Vice-President  
Barbara Alden, Treasurer  
Govind Acharya, Secretary  
Bob Hest, Director  
Fran Spadafora Manzella, Director  
Scott McCasland, Director  
Clint Scott, Director

# Ithaca Health Fund

The Ithaca Health Fund continues to be a self-sustaining program, maintained by membership donations and community support. The effects of widespread economic problems throughout 2009 were observed in Health Alliance membership activity during the year. Month-to-month membership enrollments and renewals fluctuated more than ever before, and many Alliance members called or wrote to describe the challenges they faced in coming up with annual donations. Rob Brown, Office Manager for the Alliance as well as the Fund administrator, provided members with moral support and advice about community services in response to many of these calls. In any given month, the number of active members shifted rapidly, although on average the membership roster stayed at just under 700 people.

Applications for the Alliance's completely subsidized membership program were also higher than ever before, and the program was expanded to accommodate more people, thanks to a \$2,000 donation from Gimme! Coffee and individual donations from Health Alliance Board members. Forty-eight low income individuals received free memberships throughout the year, representing about seven percent of the total.

Although overall attrition in Health Alliance membership enrollment for the year was less than feared, the lack of membership growth led the organization to refrain from new additions to the Ithaca Health Fund's grant categories. Annual member donations continue to support the Fund's grants, loans, and administrative expenses. In many respects, the program's durability during a financially challenging time is proof that cooperatively financed health care cost assistance is, in fact, the resilient model we've long believed it to be. Nonetheless, the Health Alliance is committed to finding new ways to reach out to potential members and opportunities to reinvigorate member involvement, both in educating friends and neighbors about the program and in providing feedback about unmet health needs. One new member outreach initiative launched in the fall of 2009 was the creation of a Student Member category, available to adult students enrolled in post-secondary education programs. The \$80 per year donation rate is the same as that offered to businesses and organizations. The Board will review this program after six months and again in one year to gauge its effectiveness.

## Ithaca Health Fund Grant Categories

AR Ambulance Ride	DT Dental Trauma	GX Genito-urinary Exam	PX Periodontal Exam
B2 Burns 2nd Degree	DX Dental Checkup	HX Hearing Exam	RC Root Canal
B3 Burns 3rd Degree	EA Emergency Appendectomy	LD Dental Loan	RI Rabies Inoculation
BB Broken Bone	ER Emergency Room Visit	LE Eye Care Loan	SQ Smoking Quit
CC Complementary Care	ES Emergency Stitches	LP Provider Loan	ST Sterilization
DC Dental Crown	EX Eye Exam	MB Massage Bonus	TC Tincture Coupon
DE Dental Extraction	FT 5/10 Plan	MX Medical Exam	

# Ithaca Health Fund

## Healthcare Grants Program

Because no major changes to Ithaca Health Fund grant categories were implemented in 2009, it is unsurprising that grant activity for the year matched recent years' trends: most grants awarded were for dental procedures, while the biggest grants paid for emergency medical expenses.

Eighty-nine grants and three interest-free loans were issued through the Health Fund this year, totaling \$14,605.81. Thirty-three percent of these grants (\$4,843.61) supported medical expenses for individuals enrolled through the donated membership program for low-income families. None of the interest-free loans made this year have defaulted.

### 2009 Health Fund Grants

4 AR \$1,982.00	2 ES \$562.00
1 B2 \$ 56.80	1 EX \$ 30.00
10 BB \$4,222.29	2 FT \$100.00
2 CP \$ 600.00	1 GX \$ 25.00
6 DC \$1,200.00	3 LD \$994.00
7 DE \$ 690.00	3 MX \$ 66.82
30 DX \$1,100.00	3 RC \$600.00
14 ER \$2,376.90	

Administrative volunteers assist with grant requests, reception & discharge at IFC, and other tasks.



Thirty-three grant requests through the Health Fund were declined in 2009; the majority of these were for health services not included in the current Fund grant menu.

Student interns who volunteer with the Ithaca Health Fund project have undertaken a multi-year analysis of grants made and denied through the Fund to assist the Finance Committee in long-term planning for the project. This includes an evaluation of all categories of grants for care denied, because these categories are not included in our grants menu.

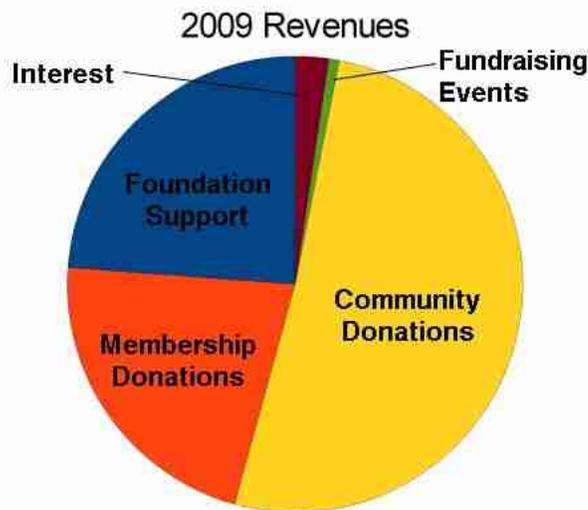
## Community Grants Program

The Ithaca Health Fund issued two Community Grants in 2009. A grant of \$250 was made to the Tompkins County Public Library Foundation to support additional complementary/alternative health resources at the library. The second Community Grant, \$200 to Bridges for Youth and Families, helped to pay for personal hygiene products for runaway youth.

# Financial Report

Throughout the year, the Finance Committee conducted monthly evaluations of the Ithaca Health Alliance's 2009 budget, year-to-date cash flow, and fundraising targets. Meticulous oversight and contingency preparedness were dominant themes, considering that the same economic trends that contributed to new and increased demands for the Alliance's charitable services also created a more challenging fundraising climate. IHA staff kept regular operating expenses at or below budgeted levels. Previous years' budgets were created with expenses compartmentalized by program and overhead; in 2009, more realistic assessment of program costs and whole agency projections helped streamline both accounting and oversight practices.

## 2009 Financial Overview

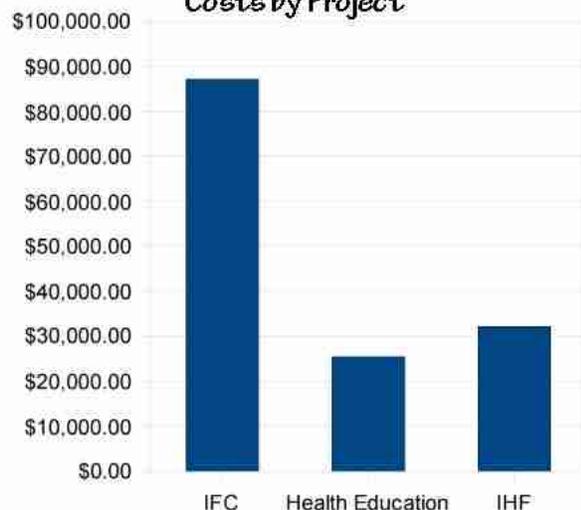


Thanks in large part to support from community members, 2009 was very close to a break-even year for the Alliance. Our neighbors came forward in greater numbers to donate to our programs, even as the recession put financial pressure on everyone. By year's end, individual contributions fulfilled the Health Alliance's fundraising targets for private donations and competitive grant revenue combined—a welcome development, since foundations were less responsive than desired.

Three expense categories exceeded budget levels in 2009: conference meals, printing/copying, and clinical supplies. The National Association of Free Clinics annual conference was held on the West Coast, requiring greater travel costs than 2008's Rhode Island location. To keep costs down, the Ithaca Health Alliance sent one instead of two delegates this year. Even so, more expensive travel costs created a small deficit in this part of the budget. Higher than projected printing costs

came as a result of newly developed outreach materials for members of the Board of Directors that were wholly offset by in-kind donations by Board members. Clinical supply costs were driven up by two categories not adequately included in budget projections. The acquisition of tetanus vaccine and tuberculosis (PPD) test supplies greatly enhanced employment physical services at the IFC and were partially covered by a 2008 grant from the Legacy Foundation. The cost of providing herbal medicines to Free Clinic patients was overlooked in annual budget projections. One new category of expense not included in yearly projections was direct support for prescription medications for Clinic patients unable to afford the cost of medications. Fortunately, these costs were completely offset by earmarked donations made through the Ithaca Alternative Gift Fair.

2009 Ithaca Health Alliance  
Costs by Project



See Appendices for full financial data.

# Community Relations

2009 was the first full year of employment for our Outreach Coordinator, Betsye Caughey. Soon after the beginning of the year, we all said good-bye to Maria Corwin, who had been chair of Community Relations through much of 2008 and had worked on several important projects in service of the Alliance and Free Clinic. Soon, Betsye and other Committee members were able to welcome Deirdre Silverman, also the Alliance's Vice-president of the Board, as the new chair of Community Relations. Under Deirdre's direction, Community Relations has continued to develop new networks on the one hand and, on the other, to reconnect with organizations in order to create new working relationships in the region.

## Volunteers and Projects

Early in 2009, a grant from the Friends of the Library Outreach Committee enabled the Community Relations Committee to purchase 32 new books for the Alliance's lending library housed in our offices. These books include a selection of medical books for our visitors and volunteer health providers to enjoy during Clinic hours. The books reflect the integrative nature of services in our organization, with subjects ranging from primary health care, nutrition, and yoga, including resources that relate to the services the Ithaca Free Clinic offers, such as a 2009 Physicians' Desk Reference (PDR) for our medical staff and a PDR Nurse's Drug Handbook.

Throughout the year, we had a steady flow of volunteers interested in working with Community Relations. Several interns from Cornell and Ithaca College joined us on multiple projects that broadened their understanding of health care and our own organization's outreach. The Free Clinic Initiative, a student organization at Cornell, procured grant funds from the Community Partnership Board on behalf of the Alliance to produce a DVD with Hark Productions. This DVD is meant to increase awareness about the Ithaca Health Alliance projects for prospective members, donors, and grantors. Additionally, we began working with a student group, Megaphone, from Ithaca College to produce another DVD detailing the history and programming of the Ithaca Health Alliance. Other collaborative student efforts include fundraising events with Cornell Health International and the various following individual volunteer projects:

-  Creation and implementation of a donor database
-  A transportation survey of the Free Clinic patients
-  Recruitment of new member providers
-  Business outreach
-  Volunteer trainings
-  Developing tabling materials
-  Material distribution maps
-  Cleaning and organizational projects at the Free Clinic

"I am about \$25 over the asset limit to get Medicaid, and this clinic is a godsend and you are very helpful to me and I would like to thank you. You are always busy but you still find the time to talk to me with respect and understanding."

# Community Relations

Community Relations continued its individual donor campaigns, sending out two letters in 2009. We worked with several volunteers in efforts to streamline and organize our methods. We were fortunate to have a positive response, despite the difficult economy. At the end of the year, we began to make plans to expand our donor system to continually reach out to local, regional, and national donor communities.

## Fundraising

Toward the end of the year, Community Relations began to focus on obtaining funding for an expansion of the Free Clinic. We were awarded a much appreciated \$10,000 from the United Way Youth and Philanthropy grant program, to support this effort in 2010. We also tabled at the Ithaca Alternative Gift Fair again, which continues to be a fun day for the volunteers who represent the many area non-profit organizations that participate. The Fair helps to highlight some of the special needs associated with the Alliance's work, such as the need for donated memberships and subsidies for supplies at the Free Clinic. In addition, the Alliance was the beneficiary of a donation from the Cayuga Lake Triathlon club and \$10,000 from the Grassroots Festival of Music and Dance. All of this support greatly contributes to our community efforts, for which we are thankful.

## Events

2009 was a busy year for events. We attended or tabled at events each month, including:

- Health and Wellness Fairs at local schools and malls
- Celebrate Wellness (Kickoff to Earth Day)
- Cornell and Ithaca College Volunteer/Social Justice events
- Ithaca Festival
- Tabling of informational events at the invitation of other organizations
- Loaves and Fishes
- Apple Harvest Festival
- TC Workers' Center Labor Day picnic
- Enfield Harvest Festival

Other collaborative efforts included participation in planning the Health and Wellness track for Sustainable Tompkins' Bioneers conference in October. One of our main objectives was to raise awareness about integrative medicine and bring together panelists to discuss how allopathic and complementary practices can work together. Another focus area was a regional perspective about policy related to health care.

One of the most exciting things that we implemented in 2009 was our series of educational forums. Our forums centered on a particular topic of health care, were free and open to the public, and included childcare and a meal. Topics included Depression, Allergies, and Health Care Policy and Reform. We plan on continuing to conduct our forums throughout 2010, as part of our educational outreach to the community.

# Community Relations

## Ads and the Newsletter

The Ithaca Health Alliance continued to advertise with Positive News, but we also extended our advertising campaign to include ads for the Ithaca Free Clinic and the Ithaca Health Fund inside of TCAT buses, where many of our potential patients and members may see them. In addition, we began to advertise on the radio in an attempt to recruit both general and business members. Finally, in an effort to stay current and expand awareness of our services, Ithaca Health Alliance also started a Facebook page.

The Education Subcommittee continued to publish and distribute the free quarterly newsletter. The newsletter remains accessible on-line through our website, in addition to being mailed to Alliance members without email addresses. It can also be found in several community hubs within Tompkins County, including coffee shops, bookstores, credit unions, and other places.

## Our 2009 Volunteers of the Quarter



Namar Al-Ganas is a graduate student at the Sloan Program in Health Administration at Cornell University, who volunteered for the Health Alliance from September, 2008 through Summer 2009. Namar worked closely with our Office Manager to evaluate medical bills and prepare grant recommendations for the Ithaca Health Fund, and he initiated an analysis of Health Fund grant awards for the Finance Committee. Namar is a delight to work with: he works well with everyone he meets at the Clinic, picks up fine details of medical billing and assistance programs easily, is never afraid to ask questions, and is very reliable. He is well-informed about the culture of health care in our country and regularly shared his insights on the subject with his co-workers.

Lindsay France has been a volunteer with the Ithaca Health Alliance since fall of 2008. She sits on the Community Relations Committee and is a professional graphic designer. Lindsay has made significant contributions to designing and coordinating the Health Alliance's print media. Her enthusiasm and reliability have made her an invaluable asset to the Alliance. Lindsay is one of three full-time photographers for Cornell University, where she provides high-quality visuals to the University's communication and marketing efforts.



Heather Stone started volunteering with the Health Alliance's Development Committee soon after she moved to Ithaca in the fall of 2008. Since that time, she has frequently taken the lead on grant proposal drafts and edits as a part of the Committee's fundraising efforts. So far, Heather has had her hand in 10 different funding proposals, which have brought in \$17,734, and counting! Her writing talents, not to mention her great ideas about funding strategies and how team members can work together, are a wonderful asset. Her fellow committee members have come forward to say what a pleasure she is to work with, too. Heather's not usually one to put herself forward, so it's our turn to do so. Way to go, and thank you, Heather Stone!



# Development

Due to economic stresses and the recession affecting both foundations' grant programs and the populations the Ithaca Health Alliance serves, the Development Committee focused on a coordinated plan for seeking funds throughout 2009. Monthly committee meetings provided opportunities for members to discuss organizational objectives developed at the Board level, fundraising strategies, and ongoing searches for new potential partners. In the time between meetings, small task teams sharing authorship and editing responsibilities developed specific projects. Proposals were developed for individual funders, while other task teams focused on base narratives that described the organization's overall goals and specific expansion plans. These narratives provided ready resources for reporting and solicitation opportunities.

In addition to fundraising projects, a service learning partnership with a grant writing course at Ithaca College provided an opportunity for four students to learn about the Health Alliance and to develop a grant proposal for planned expansion of the Ithaca Free Clinic.

## Grant Funding Efforts

Foundation support for the charitable activities of the Ithaca Health Alliance continued to be made possible by the generous fiscal sponsorship of Social Ventures, Inc. The Health Alliance thanks the staff and Board of Social Ventures while the Alliance's tax exemption remains under review at the Internal Revenue Service.

Three grants awarded in late 2008 provided immediate program support in 2009. An anonymous foundation provided funding for staff time and educational materials as part of the Health Alliance's education and community outreach programs. A grant from the Sunshine Lady Foundation through United Way's Youth and Philanthropy program permitted purchase of administrative supplies essential to all areas of operations. A grant from the Legacy Foundation made it possible for the Ithaca Free Clinic to administer tetanus vaccinations, and tuberculosis testing for patients seeking services through the IFC's employment physicals program.

Although Development members wrote a number of new proposals to national foundations interested in health and education, local funders remained the most committed to supporting Health Alliance programs. Thanks to a combination of four local funders, the Alliance was able to continue covering the costs of medical malpractice insurance for retired physicians working at the IFC and to expand this coverage for new volunteers recruited in 2009. These grants from the Social Service League of Ithaca, Howland Foundation, the Satya P. Mohanty and Chandra Talpade Mohanty Fund of the Community Foundation of Tompkins County, and students at Cornell Human Ecology's "Learning through Giving" course sponsored by the Sunshine Lady Foundation were essential to keeping pace with increases in demand for services at the IFC.

# Development

## Community Support

As a unique grassroots health program, the Health Alliance has always relied upon community support for funds, ideas, and the volunteerism that drives the organization's work. This was certainly true in 2009. Large and small contributions from individual community members constituted the bulk of financial support, reflecting an inspiring effort by our neighbors to ensure that safety net programs like the Alliance's sustained the growth necessary for the community in times of adversity. As in previous years, many members contributed additional donations to Alliance projects above their regular membership renewals.

Various community partners sponsored fundraisers to benefit the Health Alliance. The Free Clinic Initiative student organization at Cornell University hosted a benefit concert for the IFC. An Alliance member partnered with other dance hobbyists to host a Dance for Health to benefit the Ithaca Health Fund. Ithaca SufferJets and Rasa Spa co-sponsored a fundraiser, sharing proceeds with the Alliance.

Area faith groups were also generous. We thank the United Church of Christ for a donation in honor of Dr. Catherine Taylor, the Missioners Committee of the First Presbyterian Church, and the Church of the Epiphany for contributions to our community health work.

Above and beyond the support from community organizations, cumulative gifts from anonymous individual donors made up more than half of all donations this year.

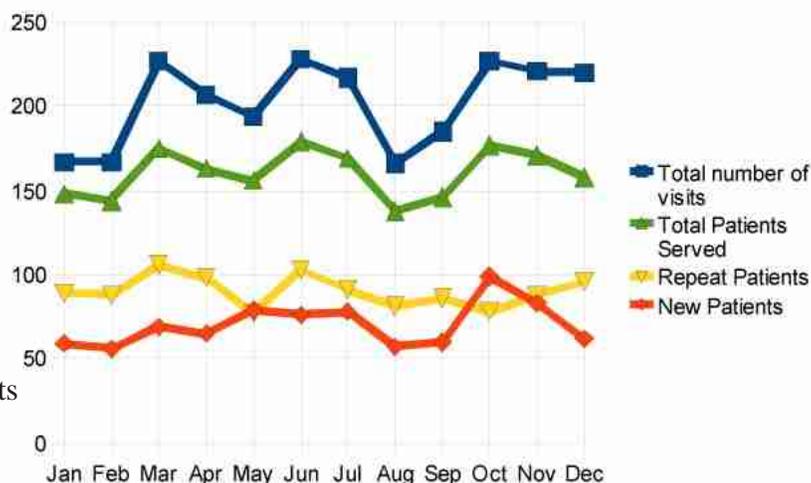
Admirers of our late medical director, Dr. Louis Munchmeyer, also continued to donate to the Ithaca Free Clinic in his memory. The Board dedicated these funds to a reserve that will be used in 2010 to develop a larger facility for the IFC, as was Dr. Munchmeyer's wish.

Chiropractic visits in 2009 made up almost ten percent of all visits at IFC.



# Ithaca Free Clinic

The IFC completed its fourth year of operations in 2009, breaking its prior year's records for use for the third consecutive year. In all respects, 2009 was a year of growth, with more involvement from volunteers, more services provided, and more new patients than ever before. As the IFC enters its fifth year of operations, we are actively exploring ways to accommodate this growth and prepare for the Free Clinic's future. Our Clinic Coordinator, Sadie Hays, has now been with us for just under two years and she will continue to support the development of programs and the improvements we all envision.



## Clinic Services

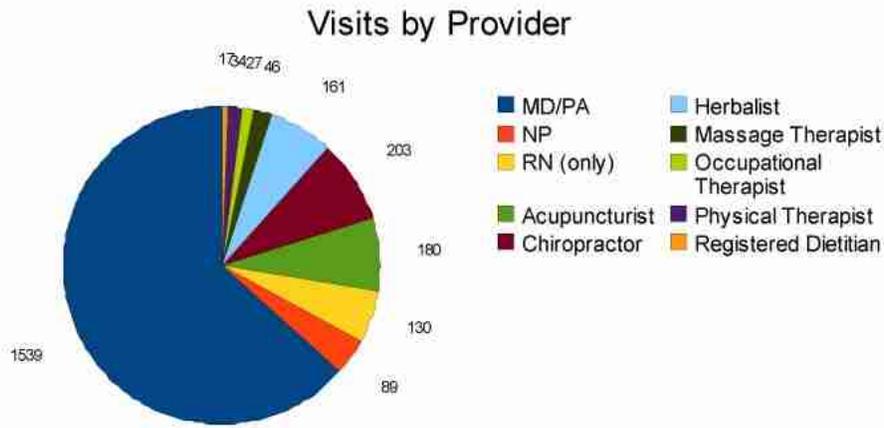
Although we did not increase our hours, we did increase the number of visits by 16 percent over 2008. Open between 8 and 11 hours a week, in 2009 the IFC had seven months where visits numbered above 200, compared to two such months in 2008. This resulted in a record-breaking 2426 visits to medical providers. On average, new patients made up 44 percent of visitors, while 56 percent of visitors had received care from us at least once before.

Herbal medicines are formulated for individual patients' needs.



Services used has remained consistent, with primary medical care (visits to the physician, nurse practitioner, and nurse) comprising 72.5 percent of visits to the Free Clinic. Holistic medicine (acupuncture, chiropractic, herbal medicine, and massage) accounted for 24.3 percent of visits, and occupational therapy, physical therapy, and nutritional counseling made up the remaining 3.2 percent. Based on Medicare and minimal reimbursement rates, the value of these services is approximately \$142,532.

# Ithaca Free Clinic



Physician visits numbered 1,539, a 54-visit increase over last year's figure of 1,485. Due to space and time constraints, the Free Clinic repeatedly encountered the upper limit of our capacity, although by adding additional providers in rooms equipped for holistic services, we have been able to accommodate nearly 100 more patient visits in these modalities. When asked during a discharge survey, patients responded that 320 of these visits would have been to the Emergency Room of the local hospital if the Ithaca Free Clinic had not been a community resource. We believe this represents a minimum savings of \$128,000 to the patients and the hospital. Perhaps more telling, however, is that 56 percent of respondents said they would have done nothing at all had the Clinic been unavailable, pointing to the potential of higher costs to their health and to the community.

"I wanted to thank you for your help recently in getting college physicals for our triplets. Since we recently moved here, our health insurance is not effective until August, but we had to meet college deadlines. You were a real answer to a prayer for us. Everyone we encountered at your clinic was friendly and respectful. We are so grateful!"



Pre-employment physicals, offered once a month, were in high demand in 2009.

# Ithaca Free Clinic

## Patient Demographics

Using a customized patient database developed with a grant from Cornell Human Ecology's Learning through Giving course, the IFC now collects information and maintains visit records in order to better understand those we serve. We know that Clinic visitors have been primarily adults who reside in Tompkins County, but now we can more precisely identify other factors.

In 2009, the Ithaca Free Clinic served 1,239 patients, 69 percent of whom were first-time visitors. To recap the two previous years, 2007 brought 805 new patients, and in 2008 we had 769 new patients; this year's figure of 849 new patients exceeds any single-year number from the past three years (2006-2008) of operation.

We request that new patients provide us with demographic information regarding their race and income when they register, and had a 76 percent response rate overall. The Ithaca Free Clinic uses HUD's Household Adjusted Median Family Income for Tompkins County as a measure of income. Of those who responded, 49.5 percent are considered to be of Very Low Income, under \$14,000 for an individual, while 30.6 percent are of Low Income status. From these figures, we understand that over 80 percent of new Ithaca Free Clinic patients live in financially at-risk households.

In answer to questions of race and ethnicity, 81 percent of responding patients stated they were White, 6 percent reported being Black/ African American, while 5 percent of patients claim Asian descent. Four percent of respondents answered "other," and another 3.6 percent indicated that they were of Hispanic ethnicity. According to a statistical analysis of Free Clinic visits compared against census information for the area, "The percentages of patients of a variety of races treated at the Clinic did not significantly differ from the total population percentages of Tompkins County."<sup>1</sup>

Although the Clinic imposes no residence restrictions, most patients live in Tompkins County. In 2009, IFC provided care to 1022 Tompkins county residents, accounting for 82.5 percent of our patient population, and representing an estimated 10 percent of the county's uninsured. Of those from Tompkins, 72.4 percent are from Ithaca, while an additional 15 percent are residents of the surrounding towns of Danby, Newfield, and Ulysses (each with 5-6 percent, respectively). Although the majority of patients are from the immediate area, 14.4 percent of patients (178) reside in other counties, primarily Tioga (45 patients) and Seneca (31 patients). The IFC is one of only two free clinics in the Southern Tier, and the only free clinic in New York that provides complementary and alternative medical care at no cost.

While the IFC has previously reported that the majority of patients are between the ages of 18 and 50, in 2009 we developed a more precise breakdown of age range. Over one-third (36.6 percent) of patients seen in 2009 were between the ages of 18 and 29, a figure that illustrates the predicament of young people in the U.S. who are in transition from their parents' homes or insurance, from college, from job to job, or working in entry-level positions that rarely offer employee insurance plans. No other age group comes close to this figure; in fact, the next two age ranges combined (30-39 and 40-49 years old) comprise 37.2 percent of our patient population. Additionally, New York State Medicaid programs for children are widely accessible and have eligibility thresholds that allow children to be enrolled for free or at a reasonable monthly rate. Therefore, just 55 of our 1239 patients reported being 17 or younger.

## Conditions and Treatments

The Ithaca Free Clinic provides basic conventional medical services for acute and long-term illness, as well as holistic medical services for a wide variety of concerns. Most patients (21 percent) who visit the Clinic have a musculo-skeletal complaint or diagnosis as their chief concern. Pain, either episodic or chronic, and usually of the back or joints, has historically been one of the most common reasons for a visit to the Free Clinic, and in 2009 maintained its first place position ahead of other disorders. Following pain, respiratory conditions (12.8 percent), mental health (9.1 percent), and circulatory conditions (5.9 percent) ranked as the next three most prevalent categories of disease. Sinusitis, upper respiratory infections, common cold and, in October, influenza, were the most common respiratory diagnoses, while depression and anxiety were the two primary mental health concerns. Hypertension ranked as one of the five most common diagnoses and, at the end of the year, ranked as the third most common diagnosis after back pain and joint pain.



A majority of IFC patients are women.

This year, the IFC provided 124 physicals for employment or educational purposes. Although a simple procedure, these physicals are potentially expensive for those paying out of pocket and therefore of immense value to the uninsured of Tompkins County who seek employment, educational, or volunteer opportunities. During these physicals, the IFC also provided 50 tuberculosis tests at no charge.

In 2009, Clinic providers made over 122 documented referrals, 33 of which were to other physicians in the community. Because referrals to a physician outside the Free Clinic can be costly to patients, we have bolstered our efforts to expand the network of co-operating providers outside the Clinic who see our patients at reduced or no cost. Nearly a dozen providers in fields such as dentistry, neurology, podiatry, ENT, and audiology – all of whom practice in Ithaca – have agreed to accept a specific number of Free Clinic patients each month.

Prescribing practices at the Ithaca Free Clinic underwent a major change in 2009. Although the matter of prescribing narcotic medications had been discussed before the IFC opened, and in every year since, this year volunteer physicians and the Clinic Operations Committee considered the policies of the majority of Free Clinics in the U.S., closely re-evaluating the risks and benefits of prescribing narcotics. Concerned for the safety of patients, staff, and Clinic volunteers, the Ithaca Free Clinic adopted a No-Narcotics Policy effective July 31, 2009. Volunteers and patients alike have noted the benefits from reduced on-site drug-seeking behavior.

# Ithaca Health Alliance Ithaca Free Clinic

The Free Clinic does not maintain a pharmacy for patients, but administrative and clinical volunteers nonetheless do their best to provide patients with a variety of resources for free or low-cost medications. Most patients use the more affordable generic versions of their long-term medications, and only a handful of patients at the Free Clinic use Prescription Access Programs, offered through the pharmaceutical companies, for brand-name medications. When a patient requires medicine to address an acute ailment, the physician or discharge clerk advises whether it's available through Urgent Rx, a local program sponsored by the Human Services Coalition with support from the United Way. This program provides 14 days of certain medications for free to the uninsured, or to those who have no prescription drug coverage. The Ithaca Free Clinic issued vouchers for 243 prescriptions, and patients filled 217 prescriptions at a value of \$4,092. In 2009, medications filled by Urgent Rx represented 15 percent of all prescriptions written at the Free Clinic. Many first-time users of Urgent Rx express surprise at the service, leading one to say, "I filled my prescription for free — it was so simple and they were so nice! I thought, what if this was the way it was for everybody?"



Health Alliance interns work closely with volunteers and staff.

# Ithaca Health Alliance

## Appendix 1 - 2009 Budget & Income

<b>Income</b>	<b>Budget</b>	<b>2009 Actual</b>
Anonymous Foundation	\$18,750.00	\$18,750.00
Youth and Philanthropy	\$5,000.00	\$5,000.00
Malpractice Liability Grants	\$24,000.00	\$10,100.00
Additional Grant Revenue	\$46,085.00	\$-
Membership Donations	\$30,000.00	\$31,072.50
Community Donations	\$30,000.00	\$66,375.07
Dr. Lou Munchmeyer Memorial Donations		\$1,025.00
Reclass Dr. Munchmeyer Reserve		\$(4,320.00)
In-Kind Contributions	\$1,196.90	
Winter Mailing Contributions	\$6,000.00	\$7,546.80
Spring Mailing Contributions		\$875.00
Interest Income	\$2,500.00	\$1,624.07
CFTC Investment Change		\$1,738.26
Community Fundraising Events	\$6,000.00	\$1,050.00
<b>Total Income</b>	<b>\$168,335.00</b>	<b>\$142,033.60</b>

“My husband and I joined the Ithaca Health Alliance years ago because we thought it was a great idea, even though we never expected to use any of your services. This year, both of us lost our jobs and our insurance coverage. Your staff were so helpful while we tried to figure out what we were going to do for health care. Two months later, I had to go to the hospital after an accident: the Health Fund helped us deal with the seven bills we got from that one visit! Then my husband got the flu, and got treated at the Free Clinic. We’re so glad we’ve got the Alliance! Thank you.”

# Ithaca Health Alliance

## Appendix 2 - 2009 Budget & Expense

<b>Expenses</b>	<b>Budget</b>	<b>2009 Actual</b>
Health Fund Member Grants	\$20,000.00	\$14,627.14
Health Fund Revolving Loans (year end balances due)		\$259.00
Health Fund Community Grants	\$2,400.00	\$450.00
Sponsored Events	\$3,200.00	\$2,706.97
Professional fees-legal	\$7,000.00	\$3,417.69
Professional fees-accounting	\$1,000.00	\$950.00
Professional fees-CFTC		\$434.48
Newsletter Costs-consulting	\$900.00	\$648.00
Newsletter Costs-printing	\$650.00	\$558.26
Newsletter Costs-postage	\$210.00	\$130.00
Wages	\$57,587.45	\$60,300.24
Benefits/payroll taxes	\$7,117.55	\$5,661.89
Payroll fees	\$600.00	\$636.45
Workman's Comp	\$680.00	\$542.64
Cleaning Contractor	\$1,000.00	\$682.75
Staff Development	\$1,000.00	\$117.00
Refreshments-IFC	\$250.00	\$99.09
Conferences-travel	\$1,000.00	\$315.98
Conferences-lodging	\$500.00	\$577.69
Conferences-meals	\$100.00	\$252.33
Conference-registration	\$500.00	\$225.00
Facilities rent	\$16,880.00	\$16,406.28
Facilities utilities	\$3,300.00	\$1,828.85
Facilities telephone	\$1,461.00	\$1,413.64
Facilities internet	\$912.00	\$803.55
Facilities physical repairs	\$300.00	\$224.92
Insurance Dir. And Officers	\$1,612.00	\$1,612.00
Insurance Prop/Liab	\$300.00	\$275.47
Insurance Fidelity Bond	\$135.00	\$135.00
Insurance Malpractice	\$24,000.00	\$12,355.11
Operations office suppl.	\$4,500.00	\$4,419.26
Operations copying	\$1,250.00	\$3,575.00
Operations postage	\$1,590.00	\$767.10
Operations advertising	\$3,500.00	\$1,139.20
Operations RX support		\$549.00
Operations Clin. Supply	\$1,900.00	\$4,297.04
Operations equip.Cal	\$500.00	\$461.70
Organization Memberships	\$500.00	\$458.00
CFTC Investment Charges		\$197.57
Bank Charges & merchant svcs		\$486.91
<b>Total Expense</b>	<b>\$168,335.00</b>	<b>\$144,998.20</b>
	<b>Year-end total loss</b>	<b>\$(2,964.60)</b>

# Conclusion

## Preview of 2010

Despite challenges related to the economy as well as day-to-day logistics, 2009 was an excellent year for the Ithaca Health Alliance and its several projects. We expect that 2010 will provide familiar and new organizational tests, calling on our shared creativity and cooperation.

In 2010, we will double our space in a new location, a goal that will require short-term muscle power and long-term fund raising abilities. In order to deliver care safely and efficiently, we estimate that the IFC needs about twice as much space as it now leases; the Alliance, its staff, and its Board and Committee members therefore appreciate the need for raising more funds toward rent and the services associated with a larger suite of offices. This plan is consistent with the report issued at the end of 2008 and will come as no surprise to our members and supporters.

Similarly, as noted last year, the Board of Directors believes that circumstances call for a new leadership model common to non-profits with complex programs requiring constant oversight and a high degree of specialized expertise. As a result, the Board has committed to hiring an Executive Director in the summer of 2010. An Executive Director will secure the supports of project management related to the expansion of the IFC, additional local fund raising and grant proposal development, and supervision for all staff- and volunteer-oriented projects undertaken in the next several years of the Ithaca Health Alliance's growth.

Intimately connected with our ability to raise funds is that this is the fifth year of the Alliance's application for federal tax-exempt status. The Board has made progress in receipt of a final determination from the IRS, one which we hope will benefit the many community members who rely on the good work of the IFC and the services available through the Fund and our Outreach programs. In the meantime, we continue to cultivate and improve on the crucial relationships necessary to our work. We look forward to hearing from Ithaca Health Alliance members, visitors to the IFC, and representatives of the community at large whose ideas nurture our vision and mission of health care for all.

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