CEO MESSAGE

TURNING THE PAGE

With COVID vaccines in place and available to all, ACHS has settled into the pandemic for the long haul. As a healthcare organization, with an emphasis on preventative care, it became important that we switch from crisis mode back to our traditional healthcare practice - knowing we’d never truly go back to where we once were. We ended our daily COVID incident command group in favor of our traditional team meetings where we re-focused on the resiliency and quality of our integrated primary care model. This proved the key to a successful year for our healthcare team and our nearly 10,000 patients.

First and foremost we ensured staff and patients were as protected as they could be. Following the guidance of the Centers for Disease Control (CDC) and the NH Department of Health, we put in place vaccine mandates for employees. By the Fall of 2021, all of ACHS’s 110+ employees were fully compliant enabling us to keep our doors open and our sites as safe as possible for patients.

We also recognized how important it was for staff to regain regular structure. They needed a break from the continuous stress and to be shown appreciation for their service. Fortunately, ACHS received COVID-19 provider relief funding from the US Health Resources & Services Administration (HRSA) as well as a grant from Direct Relief to help assist with healthcare-related expenses and lost revenues attributed to the pandemic. We used these funds toward operations and additional pay and paid time off for employees. After reviewing area service data, and noting an increase in Urgent Care centers in our area, we put a temporary hold on Saturday hours. This provided additional respite for providers, with little impact on patient care.

ACHS stood up Resilient American Community (RAC) hubs in Whitefield and Warren funded by the CDC, FCC, and HRSA enabling us to distribute free masks and COVID test kits through local libraries throughout the year. Onward and upward.

EDWARD SHANSHALA  CEO ACHS
At ACHS, we continued to see large numbers of COVID-19 and respiratory-related patients but also began to catch up on wellness visits patients had put off during the pandemic. Nationwide, preventative care visits, vaccines, and screenings had plummeted 20-60%. We aimed to help our patients get back on track.

What better way than to renew our commitment and recertification as a Patient-Centered Medical Home (PCMH).

PCMH is a model of care that puts patients at the forefront. Rather than a sole health care relationship, it relies on a TEAM of health professionals that work together to build a strong relationship with patients. PCMHs build better relationships between patients and their clinical care teams by providing all care needs under one umbrella. Research shows that this model improves care quality and the patient experience, and increases staff satisfaction—while reducing healthcare costs.

Practices that earn PCMH recognition from the National Committee for Quality Assurance (NCQA) have made a commitment to continuous quality improvement and a patient-centered approach to care.

Getting to PCMH certification takes time and energy. Fortunately, we have a team dedicated to making that happen. Led by Chief Operations Officer, Teresa Brooks, this group works diligently to ensure ACHS complies with NCQA standards. ACHS recognizes the efforts of Lisa Bujno, Lisa Mackenzie, Jordan Phinney, Melissa Hodge, Maureen Murphy-Malo, Justin Jones as well as the entire ACHS team for helping us once again achieve this national quality recognition.
FINANCIAL STATEMENT

The numbers at a glance - a look at our financial activities throughout 2021-2022

REVENUE SOURCES

ACHS total revenue for FY2022 was $12,273,627. The majority of the funds come from patients and insurance carriers, including Medicare and Medicaid. Pharmacy revenue accounts for nearly 9%, a considerable drop from last year’s 15%. This is due to the continued decrease in funding from the Federal 340B Drug Pricing program, which is under scrutiny by drug and pharmaceutical companies.

PROGRAM INVESTMENTS

The majority of ACHS program investments come from Primary Care. Pharmacy investments are shrinking as the 340B drug pricing program wanes.

OPERATING EXPENSES

Nearly 70% of ACHS operating expenses are from employee wages and benefits. Information Technology (IT) is the second highest, but is still just 7%.
Primary Care accounts for the majority of our services. To help accommodate this need, we welcomed three new faces to the ACHS family of providers.

Dr. Sandra Molteni, an Army vet who speaks three languages, brings her affection for rural health to ACHS-Woodsville. She’ll assume much of the patient panel of Dr. Patty Pratt who retired in 2021. Stephanie Olivares, APRN joins the ACHS-Littleton site. Her enthusiasm for pediatrics and adolescent care will be a welcome addition. Katrina Colby, APRN joined the ACHS-Whitefield team. She specializes in Family Practice and chronic care issues such as Diabetes, Hypertension, and COPD.
One area of service that struggled to get back on track after Covid was the ACHS-Dental program.

Prior to the pandemic, our oral health program had experienced a three-year deficit. This was due in part to the patient-payor mix which weighed heavily on sliding-fee, non-insured patients. A lack of adult Medicare Dental benefits and no NH Medicaid Adult dental benefits (an NH Bill to this effect just passed in January 2022 expanding benefits) also complicated this mix. When you combined these challenges with forced closures and lack of staffing due to COVID, it made it impossible to continue to keep the dental center open. We closed temporarily in 2021, while we recruited and restructured.

As the pandemic marched on, recruitment efforts, fell flat. We reached out to the dental schools - the University of New England & A.T. Still - to gauge interest in perhaps utilizing the ACHS dental building for dental students. There was just no interest. Faced with a continued lack of funding we had no choice but to permanently close the ACHS Oral and Dental Health center.

Prior to 2015 and the opening of ACHS dental, we provided integrated dental care through a dental voucher program. The vouchers could be used by ACHS patients at participating dentists in our service area. As we move forward, we will provide a similar option for qualifying patients. The new Dental Assistance Program will provide patients who qualify up to $1,500 per year for urgent dental needs. ACHS will provide payment to participating dentists in the area. This is a similar program to our current Vision program.

It was an extremely difficult decision to close our dental center. We will continue to advocate at the state and federal levels to improve dental services for those who need them most.

"There is a real lack of understanding of public health dentistry. This isn’t about crowns and implants. This is about basic care for those who need it most.”

ED SHANSHALA, CEO

ACHS DENTAL / ORAL HEALTH SERVICES EXPERIENCED A THREE YEAR AVERAGE DEFICIT OF

$205,089
$101,391 IN FY 2018
$302,272 IN FY 2019
$211,605 IN FY 2020

DENTAL SERVICES

ACHS-DENTAL CENTER
It is estimated that Americans’ reported rates of depression and anxiety at least six times higher than pre-pandemic levels. ACHS continues to see increases in requests for Behavioral Health services - especially for those under 18.

Fortunately, with COVID restrictions lifting, we were able to again see children in their schools. Our K-12 Behavioral Health program currently serves several school systems in our area, meeting kids who need counseling in an environment they feel comfortable in.

Among our most beloved behavioral health counselors for kids, was Brenda Fortier-Dube, LICSW. Over the last several years, she has been the trusted counselor in the Lisbon school system. In June 2021, she announced her retirement. We hosted a Lego-themed party to celebrate her exceptional dedication to our youngest ACHS patients. The FY2022-23 budget includes funding for two additional K-12 counselors.
In April of 2022, we hosted the US Health Health Resources and Services Administration (HRSA) for an operational site visit.

Traditionally site visits are conducted on location at Federally Qualified Health Centers (FQHC) and look-alikes to support effective oversight and compliance with the statutory and regulatory requirements of the federal Health Center Program. This year, for the first time ever, it was held virtually.

The HRSA auditors look at all areas of the organization including finances, board governance, operations, communications, patient programs, care, and quality. We used teleconference and handheld video for virtual walk-throughs and demonstrations.

This year’s visit also included a special

**STATUS UPDATE**

COVID-19 discussion for the healthcare center to provide an opportunity to share with HRSA how COVID-19 impacted our health center.

After the extensive audit, a score indicates the overall clinical quality measure (CQM) performance among all health centers.

ACHS scored a 93, the silver tier, identifying us as among the top 11-20% of FQHCs in the nation. We also received the HT award for advancing quality and the COVID-19 Public Health Champion award as we were the first FQHC in NH to stand up COVID19 vaccine clinics and antivirals.
Among the initiatives and programs we participated in during 2021 was the Resilient American Communities (RAC) program. The (RAC) is a civil society-driven public-private consortium that supports communities in their efforts to prevent and manage the risks of COVID. Efforts are particularly focused on increasing social equity and RAC works with and provides support for community partners, empowering local leaders and community members to enact change in their communities. As a RAC community partner, we’ll be able to improve our connections to the community.

In April, ACHS received official recognition as a Healthy People 2030 Champion for our commitment and dedication to advancing our nation’s Healthy People 2030’s goals. Launched by the Office of Disease Prevention and Health Promotion (ODPHP) in 1979, the Healthy People initiative sets objectives to improve health and well-being nationwide. Healthy People 2030 is the fifth iteration of the initiative, which requires a demonstrated understanding of, and experience with disease prevention, health promotion, social determinants of health, health disparities, and health equity.

One program that demonstrates ACHS’ commitment to these goals was this year’s initiative to increase fall risk assessments of seniors by 10%. Getting seniors screened could help reduce falls. As of this report, we were well on our way beating this goal.
ACHS WARREN TEAM IN RED
D. BUDENSEE SKIS IN TO WORK
WEARING RED TO SUPPORT HEART HEALTH

MELISSA & JESSICA AT VACCINE CLINIC

HANNAH FROM ACHS-FRANCONIA
KILT IT!

ACHS-WOODSVILLE IN GREEN
FOR ST. PATRICK’S DAY

ACHS-WARREN SHOWS
THEIR SPIRIT

ACHS-WOODSVILLE TEAM GOES GREEN

ACHS-LITTLETON WELCOMES SPRING
In addition to improved pay, led by a complete compensation analysis and enhanced benefits, we began the Gratitude Project in March. What started out as a month dedicated to thanks for staff and patients, became a peer lead movement that will last beyond this year.

In 2022, we said thanks with donuts and lunch, t-shirts, snacks, and turkeys. In June, we hosted our strategic planning day at Reklis to help brainstorm ideas on keeping staff happy long-term as well as to improve the ACHS mission and our team’s experience at work.
In September of each year, we celebrate the tenure of our employees reaching 5, 10, 15, 20, or 25-year milestones by hosting a fabulous lunch to thank everyone for their service. In 2021, we brought along the Reklis food truck. Each day of the week, we traveled to a new site along with members of our senior leadership team and board of directors. High-fives, thanks, and sincere appreciation were heard throughout the day and served as a fun reminder that connection and appreciation should last year-round.
EACH YEAR WE CELEBRATE OUR EMPLOYEES WITH SERVICE AWARDS

TOP, LEFT TO RIGHT: JESSICA THIBODEAU, APRN, STEPHEN NOYES, LICSW, LISA BIELE
MIDDLE ROW: KATHY BOSWELL, BRANDY CHURCH, LISA BUJNO, APRN
BOTTOM ROW: CYNTHIA KELLER, JILL KIMBALL, JUDITH SANT, LICSW

TENURE & THANKS
In December of 2021, we bid a fond farewell to Dr. Patti Pratt, who served as our treasured Internal Medicine physician at our ACHS-Woodsville location since 2013. An attending physician at Cottage hospital and the Glencliff Home, Dr. Pratt served the surrounding communities for 34 years. Patients and peers sent cards to wish Patty well as she down-sized her practice to part-time at a location closer to her Vermont home.

Long-time ACHS employee Linda Shulda retired this year. Linda started as a support staff with Dr. Charles Wolcott in Franconia when his practice merged with ACHS in 2002. Over the years, Linda has served in a variety of roles related to Patient access services and welcomed everyone with a warm smile.

We also said goodbye and thank you to long-standing board members, Doug and Betsy Harman, and Lynn Davis. We thank them all for their years of dedicated service.

"I moved back home from Woodsville to Winter Haven, Florida. We wish we had a Dr. here as good as Dr. Pratt."
“Supporting the health care of my neighbors makes us all stronger”

D.M. LITTLETON, NH

ACHS DONORS

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ACHS Mission

To provide a network of comprehensive Primary Health Care and Support Services to individuals and families throughout the communities we serve. In support of this mission, ACHS provides evidence-based, outcome-specific, systemic care that is: patient-centered, prevention-focused, accessible, and affordable for all.

FY 2021-2022

ACHS Board of Directors
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Jeffrey Jones, Treasurer • Robert Tortorice, Secretary
Lynn Davis • Betsy Harman, APRN • Doug Harman • Shannon McGrath
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Edward Shanshala, CEO • Tammy Talotta, CFO • Teresa Brooks, COO
Jill Kimball, Community Relations Director
Dr. Sarah Young-Xu, Chief Medical Director • Lisa Bujno, Assistant Medical Director,
Michael Reilly, HR Director • Lili Cargill, Director Integrated Behavioral Health
Dr. Melissa Buddensee, Chief Quality Officer

Services Provided
Primary Preventive Medical Care • Family Practice • Prenatal Care through Geriatrics
Prenatal Care • Childbirth Education • Newborn Care • Family Planning • Birth Control
STD and HIV Testing & Counseling
Breast & Cervical Cancer Screening Program • Behavioral Healthcare • Counseling
Dental Assistance Plan • Financial Services • Sliding Fee Scale for eligible patients
Nutrition & Vision services

2022 ACH Statistics

- Number of unduplicated Clients Served: Medical – 8,132, Behavioral Health – 894, Enabling – 39, Vision – 142
- Number of Visits: Medical – 24,648, Behavioral Health – 6,422, Enabling – 39, Vision – 142
- Client/Payor Mix: Medicaid 18.03%, Medicare – 35.71%, Uninsured – 3.87%, Insured – 42.39%
- Value of free medications provided to our patients: $336,186 – Total, Medical – $138,617, Dental - $448, Behavioral Health - $36,847 Pharmacy - $160,274

16 | ANNUAL REPORT 2022