

Jackson
HEALTH SYSTEM



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Community Health Needs Assessment Implementation Plan

2015 – 2018



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Executive Summary

Jackson Health System (JHS) engaged the Health Council of South Florida (HCSF) to prepare a Community Health Needs Assessment (CHNA), which was completed in April 2015.

The objectives of the study included:

- Providing baseline measures of key health indicators.
- Developing a comprehensive understanding of healthcare needs and gaps for residents of Miami-Dade County.
- Identifying healthcare priorities and building an implementation plan that will address those priorities.
- Serving as a resource for individuals and agencies to identify community health needs.
- Fulfilling the community health benefit requirements as outlined in Section 5007 of the Patient Protection and Affordable Care Act (PPACA).

To achieve these objectives, the HCSF conducted market research and related activities that encompassed:

- Analyzing demographic and other data sources.
- Conducting online studies with Miami-Dade County residents and community leaders.
- Conducting in-depth personal interviews with JHS executives.
- Analyzing health status indicator databases and clinical information sources.

Further, the CHNA incorporated the HCSF's knowledge of Miami-Dade County's healthcare needs. The HCSF has a history of providing similar health planning services to many organizations. It also has an extensive knowledge of local healthcare providers and related support systems, including social service agencies and community based organizations that provide services to the most vulnerable populations.

Without any surprise, the research confirms the unfunded and those with Medicaid (defined as "uninsured/underinsured") are more likely to use a JHS facility than those with other forms of third-party payer coverage. With JHS' commitment to serving all members of the community, regardless of ability to pay, it is a priority to recognize and address the healthcare concerns of this group.

The HCSF identified five priority areas in the CHNA requiring JHS focus. These priority areas, which reaffirm several of the key findings that impacted the development of the 2012 JHS Strategic Plan, are outlined below and are the basis for focused JHS activities that aim to improve the health status of Miami-Dade County.

- 1) **Availability of Primary Care and Prevention:** The uninsured/underinsured find it difficult to access healthcare services across the board, including primary care. According to the *County Health Rankings & Roadmaps*, there was a shortage of primary care physicians in Miami-Dade County when compared to the 2014 national average.

To address this priority area, JHS will explore the feasibility to:

- Expand the network of community-based primary care physicians.
- Increase primary care service availability through improved productivity of existing resources.
- Increase availability to primary care services by creating walk-in centers.
- Create opportunities for community-based primary care physicians to build their practices.
- Expanding access to care by opening urgent care centers (UCCs).
- Develop and promote the *MyJacksonHealth* system to improve patient access to care and support disease prevention activities.
- Promote disease prevention through community outreach and education initiatives.

- 2) **Access to Care:** The uninsured/underinsured have greater barriers to care than those with third-party payer insurance, with inpatient hospital services and medical specialty services the most difficult to access. This is evidenced by substantial numbers of Medicaid patients leaving Miami-Dade County for these services.

To address this priority area, JHS will investigate opportunities to:

- Shift its currently uninsured adults to a health insurance product through promotional and conversion efforts.
- Shift its currently uninsured children to Medicaid through targeted enrollment efforts.
- Develop strategies to enroll the 65+ year-old population into Medicare.
- Work with the Miami-Dade County Department of Transportation to improve bus transportation access to Jackson West, if necessary.

- 3) **Chronic Disease Management:** Higher concentrations of diabetes, asthma (adult and pediatric) and chronic obstructive pulmonary disease (COPD) are found within lower socio-economic zip codes within the county. Therefore, increased access to care and education on specific disease management was identified as a top priority.

To address this priority area, JHS will explore the feasibility to:

- Devise a population health management plan that will address the needs of patients with chronic illnesses within its primary care and ambulatory care network.

- Continue funding its *Tobacco Free Program*.
- Expand web site content to include and enhance educational content and links to third-party educational resources for patients.
- Identify select educational opportunities within primary care system to educate patients on management of their chronic conditions.

4) **Lack of Delivery System:** Population growth in West Miami-Dade and South Miami-Dade has precipitated a need for emergency and preventative care access points in those areas. Further, residents of other areas such as Miami Lakes and Miami Beach do not have easy access to JHS services.

Many of the activities required to enhance JHS' delivery system are covered in Priority Area 1 (Availability of Primary Care and Prevention). Adding to these initiatives, JHS will investigate opportunities to:

- Improve and build upon collaborations with healthcare-related organizations.
- Improve access to healthcare services offered for Primary Care.

5) **Trauma, Emergency and Urgent Care Services:** With significant population growth in South Miami-Dade, the need for a trauma center at Jackson South Community Hospital is an important priority for both Miami-Dade and Monroe Counties. Additional emergency room services are needed in West Miami-Dade County. Further, urgent care services are necessary to improve access for JHS patients in select portions of the county.

To address these priority issues, JHS will consider the need to:

- Continue pursuing a Level II Trauma Center at Jackson South Community Hospital.
- Open a free-standing emergency room at its Jackson West location as part of its Miracle-Building Bond Program.
- Improve the operations and throughput of the emergency rooms at all hospital locations.
- Open eight to twelve urgent care centers as part of the Miracle-Building Bond Program.

Priority Healthcare Needs and Implementation Plans

Priority Area 1: Availability of Primary Care and Prevention

A. Key activities address the following health indicators:

- Indicator 1: Adults with a usual source of healthcare
- Indicator 2: Percentage of adults who had a medical checkup in the past year
- Indicator 3: Primary care physicians ratio

B. Key Activities:

1. **JHS will expand its network of community-based primary care physicians:** Miami-Dade County faces a shortage of primary care physicians. The national benchmark is 1,051 patients to 1 PCP and the primary care ratio in Miami-Dade County is 1,275 to 1. The shortage is an issue requiring coordination across a variety of healthcare institutions such as hospitals, medical schools and medical group practices. JHS could address this issue by:
 - Conducting a demand analysis to better understand the need for additional primary care physicians within its network of primary care centers.
 - Recruiting and hiring more general and family practitioners, as well as internal medicine physicians. These physicians will work within JHS' medical group practice, Jackson Medical Group, (JMG) and new urgent care centers planned for development. JMG provides healthcare services throughout the community and serves patients at the system's three hospitals – Jackson Memorial Hospital, Jackson South Community Hospital and Jackson North Medical Center.
 - Expanding its network of community-based physicians, including specialists. The opening of Jackson West will allow community-based primary care physicians to establish a practice in a growing part of the county, which could benefit from access to co-located specialist physicians, diagnostic imaging, and ancillary services.
2. **JHS will examine opportunities to increase primary care service availability through improved productivity of existing resources:** The JHS ambulatory and primary care centers generate over 175,000 patient visits annually. JHS will review the current productivity of these sites of care to determine improvement opportunities. Increasing patient throughput could shorten the time to an appointment and lead to improved access to primary care services.
3. **JHS will evaluate increasing availability to primary care services by creating walk-in centers:** At select primary care sites, JHS will establish walk-in centers with expanded hours of operation. The number and locations of the walk-in centers will be based on a thorough needs assessment.
4. **JHS will open new urgent care centers (UCCs):** To expand primary care service availability, JHS will open eight to twelve UCCs, as promised to Miami-Dade County taxpayers as part of the Miracle-Building Bond Program. The UCCs are anticipated to operate in twelve hour shifts, offering

convenience to patients unable to fit into traditional physician office schedules, or for those without a designated primary care provider.

5. **JHS will develop and promote the *MyJacksonHealth* system to improve patient access to care and support disease prevention activities:** *MyJacksonHealth* is an online patient portal providing patient access to medical records, care summaries, last visit clinical information and patient education materials. Further, patients will have the capability of getting details about their treatment or diagnoses, and prepare questions for their next appointment. *MyJacksonHealth* makes it easier for patients to stay compliant with their care.

6. **JHS will consider promoting disease prevention through community outreach and education initiatives:** Even with all the aforementioned elements that will make primary care more accessible in the community, educating the public to the importance of primary care is crucial to successfully driving patients to their primary care providers. Therefore, JHS will consider:
 - Sponsoring health fairs throughout Miami-Dade County, which will provide adult health screenings in a safe, fun environment for families. Some of the testing provided could include glucose testing, cholesterol, blood pressure, Body Mass Index measurements, and HIV testing. The health fairs would promote the importance of obtaining regular medical checkups.

Priority Area 2: Access to Care

A. Key activities address the following health indicators:

- Indicator 4: Adults with health insurance
- Indicator 5: Children with health insurance
- Indicator 6: Medicare enrollment rate, age 65 and older
- Indicator 7: Median monthly Medicaid enrollment

B. Key Activities:

1. **JHS will research opportunities to enroll uninsured adults in health insurance plans through educational and promotional efforts.** As of 2014, the Patient Protection and Affordability Care Act (PPACA) require most Americans to sign up for health insurance. In Florida, there is an insurance exchange for people to fulfill this obligation. Further, many Miami-Dade County Zip Codes have very high enrollment rates for exchange insurance products. JHS will seek to:
 - Promote the benefits of signing up for an insurance product primarily through JHS' website, the "Health Insurance Marketplace."¹
 - Aggressively pursue ways to convert uninsured patients turning 65 into Medicare recipients.
 - Convert Medicaid eligible patients to Medicaid.

2. **JHS will identify opportunities to shift its currently uninsured children to Medicaid through targeted enrollment efforts.** "Medicaid eligibility in Florida is determined by Florida's Department of Children and Families or the Social Security Administration for recipients of supplemental security income (SSI).

¹ <http://www.jacksonhealth.org/patients-health-insurance-marketplace.asp>

To be eligible, the individual must be a child, the parent or caretaker of a child, pregnant, elderly, blind, or disabled, and meet income requirements.”² The Patient Protection and Affordable Care Act made changes to Medicaid Eligibility that took effect January 1, 2014. “Now, Medicaid eligibility is based on IRS rules for determining household and income.”³

JHS will continue to aggressively enroll qualified individuals, adult and children, into Medicaid. Patients can currently access financial assistance at numerous locations. In the future, JHS will likely add a financial assistance office at its Jackson West site.

JHS Financial Assistance Locations (May 2015)

Location	Address
Jackson Memorial Hospital	1611 N.W. 12th Avenue, Miami
Dr. Rafael A. Peñalver Clinic	971 N.W. 2nd Street, Miami
Jackson South Community Hospital	8950 S.W. 152nd Street, Suite 104, Miami
Jefferson Reaves, Sr. Health Center	1009 N.W. 5th Avenue, Miami
North Dade Health Center	16555 N.W. 25th Avenue, Miami Gardens
Rosie Lee Wesley Health Center	6601 S.W. 62nd Avenue, South Miami
160 Nw 170th St, North Miami Beach	160 N.W. 170th St, North Miami Beach

3. **JHS will develop strategies to enroll the 65+ population into Medicare.** JHS has patients approaching 65 years of age that are potentially Medicare eligible within its primary care and ambulatory care system. Many of these patients are currently without insurance.
- JHS will investigate opportunities to work with managed care companies to convert these patients to Medicare upon turning 65 years of age.
 - As stated in Activity 2 within this section, JHS will maintain locations, and add future locations, where financial assistance and education is available.

Priority Area 3: Chronic Disease Management

A. Key activities address the following health indicators:

- Indicator 8: Diabetes
- Indicator 9: Adult Asthma
- Indicator 10: Hospitalizations due to COPD
- Indicator 11: Pediatric Asthma

B. Key Activities:

1. **JHS will evaluate devising a population health management plan to address the needs of patients with chronic diseases within its primary care and ambulatory care network.** Many patients with chronic illnesses have more than one single condition. Obesity is also a leading cause of many chronic diseases, such as Type 2 diabetes, coronary heart disease, high blood pressure and cholesterol, sleep

² <http://statelaws.findlaw.com/florida-law/florida-medicaid-eligibility-requirements.html>

³ Ibid

apnea and respiratory problems. In the United States, more than one third of adults are obese. This figure is much higher for Miami-Dade County. According to the CDC, sixty seven percent of the adults in the county are obese or overweight. Consequently, this activity encompasses:

- Studying the prevalence and related healthcare resource consumption of JHS patients with chronic diseases.
 - Forming a multidisciplinary team of physicians, administrators, and analysts to review available data and best practices to develop a plan to improve the health status of these patients. The plan may include such activities as establishing specialized clinics for chronic disease management in collaboration with the University of Miami Miller School of Medicine physicians. For example, JHS will investigate the efficacy of initiating a team of physicians and nutritionists for a clinic focusing on patients with diabetes. The goal of this clinic will be to help patients better manage their diabetes and related conditions, keeping them healthy and out of the emergency room and hospital.
 - Identifying select educational opportunities within the primary care system to educate patients on management of their chronic conditions. The underserved population of patients with chronic diseases will benefit from increased availability of more primary care physicians and JHS access points as previously indicated. Primary care is critical to managing the multiple needs of patients with chronic diseases. Primary Care physicians throughout JHS will have the opportunity to teach patients with chronic diseases better approaches to staying healthy.
2. **JHS will continue funding its Tobacco Free Program.** According to the CDC, those who smoke are at greater risk for several chronic diseases, such as coronary heart disease, stroke, and COPD. Exposure to secondhand smoke is also linked to serious disease, including more frequent and severe asthma attacks in children. To reduce chronic disease development, or ameliorate their adverse impact on a patient’s healthcare status and related costs of care, JHS’ *Tobacco Free Program* will help individuals quit smoking. The *Tobacco Free Program* is open to patients, employees and visitors. The evidence-based program offers both Quit Smoking Now individual and group classes during the day and evening. Some participants may be eligible to receive free non-prescription Nicotine Replacement Therapy (e.g., patches) for a six week course of treatment.

Priority Area 4: Lack of Delivery System

A. Key activities address the following health indicators:

- Indicator 12: Adults with usual source of healthcare
- Indicator 13: Percentage of adults who had a medical checkup in past year
- Indicator 14: Percentage of adults who had difficulty/delay in obtaining healthcare services

B. Key Activities:

Many of the activities required to enhance JHS’ delivery system are already provided in Priority Area 1, Availability of Primary Care and Prevention. Adding to these initiatives, the following activities will address the specific delivery system indicators provided in the Community Health Needs Assessment developed by the HCSF.

1. **JHS intends to improve and build upon collaborations with healthcare-related organizations.** This includes supporting select organizations that provide healthcare services to the uninsured/underfunded population. This support is contingent upon retaining low income pool (LIP) funding. LIP funding is federal, state and local government money provided to care for the uninsured/underinsured. The federal contribution is roughly 60% and state and local funding is roughly 40%.
 - JHS will continue funding Community Health of South Florida, Inc. (CHI), and look for collaborative opportunities with this organization to improve the healthcare status of Miami-Dade County residents. CHI provides affordable and quality primary and behavioral healthcare services. With ten primary care centers and 42 school-based programs, CHI is in a great position to provide adults and children with a usual source of healthcare and medical checkups.
 - JHS will also continue to seek new sources of funding to support mission driven objectives through community partnerships, grants and the Jackson Foundation.
2. **To assist adults and children with gaining better access to healthcare services, JHS will improve access to ambulatory care centers and primary care clinics.** In collaboration with the University of Miami’s Miller School of Medicine, JHS will work to provide patients better opportunities to obtain the right level of care, at the right time, and in the most appropriate and cost effective setting. This may require creating new clinics, adding physicians, and changing resource allocations.

Priority Area 5: Trauma, Emergency and Urgent Care Services

A. Key activities address the following health indicators:

- None were specifically addressed in the HCSF’s CHNA report.

B. Key Activities:

1. **Level II Trauma Center at Jackson South Community Hospital.** While an initial application to the Florida Department of Health for a Level II trauma center at Jackson South Community Hospital was denied, JHS will continue pursuing this program. The area surrounding Jackson South Community Hospital has seen major growth in recent years, and a trauma center at this location would also service patients from Monroe County as well.
2. **Developing a free-standing emergency room at its Jackson West location as part of its Miracle-Building Bond Program.** JHS acquired a 27-acre parcel of land in Doral west of the Palmetto Expressway and north of Northwest 25th Street. Plans for the site include a free-standing emergency room for adults and children, as well as a children’s ambulatory center for specialized pediatric care. Other healthcare services may also get developed on this site. The free-standing emergency room is necessary because of the lack of nearby emergency services and heavy traffic patterns that prevent quick access to related services at other facilities when needed.
3. **JHS will work to improve the operations and throughput of the emergency rooms at all of its hospital locations.** JHS will undertake efforts to improve waiting times and patient throughput at all of its hospital emergency rooms. Additionally, it is important to shift patients currently using the JHS emergency rooms for their primary care needs to less expensive and more appropriate sites of care, which is why JHS will open walk in centers at some of its primary care center locations. The walk in centers will have expanded hours to increase access opportunities.

4. JHS will open eight to twelve urgent care centers as part of its Miracle-Building Bond Program.

Jackson will execute on its commitment to Miami-Dade County by opening eight to twelve urgent care centers (UCCs). The goal of UCC expansion is to increase access points for patients requiring both urgent and primary care services. The reason this is important is that many individuals find that access to care is not available at the time that they need it. Physician offices are typically only open during normal business hours of “nine to five.” For many families, particularly those of lower socio-economic status, these times are not convenient. The JHS UCCs will be open in convenient 12-hour shifts.