

**Jackson**  
HEALTH SYSTEM



*Miracles made daily.*

# Community Health Needs Assessment Implementation Plan

*2018 – 2021*



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# Executive Summary

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Jackson Health System (JHS) engaged the Health Council of South Florida (HCSF) to prepare a Community Health Needs Assessment (CHNA), which was completed in August 2018.

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.

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 are outlined within this implementation plan and are:

1. Availability of Primary Care and Prevention
2. Access to Care
3. Chronic Disease Management
4. Maternal and Child Health
5. Healthy Lifestyles: Exercise and Nutrition

# Priority Healthcare Needs and Implementation Plans

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## Priority Area 1: Availability of Primary Care and Prevention

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Access to primary care and prevention remains one of the areas the uninsured/underinsured find most difficult. 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.

### A. Priority area indicators of healthcare needs:

- **Indicator 1:** Adults with a usual source of healthcare- defined as people who had one or more people they thought of as their personal doctor or primary healthcare provider, Miami-Dade ranks in the bottom 25<sup>th</sup> percentile when compared to other counties in Florida. The goal, as determined by Healthy People 2020, is 83.9%; Miami-Dade is currently at 62.6% and Florida is at 76.6%.
- **Indicator 2:** Primary care physician ratio- defined as number of primary care physicians to 100,000 population, Miami-Dade ranks in the top 50<sup>th</sup> percentile when compared to other counties in Florida. Miami-Dade's primary provider rate is 81 per 100,000, compared to Florida's rate of 72 per 100,000.
- **Indicator 3:** Non-physician primary care provider rate- defined as the number of healthcare providers who are not physicians, including nurse practitioners, physician assistants and clinical nurse specialists, per 100,000 population, Miami-Dade ranks in the top 50<sup>th</sup> percentile when compared to other counties in Florida. Miami-Dade's non-physician rate is 71 per 100,000, compared to Florida's rate of 74 per 100,000

### B. Key activities to address indicators:

Jackson Health System's goal is to provide greater availability and more opportunities for Miami-Dade residents to access primary and preventive healthcare to better the overall wellbeing and population health of the community. The majority of Miami-Dade County is a designated Primary Care Health Professional Shortage area by the US Department of Health and Human Services meaning that there are too few healthcare providers servicing the area. JHS hopes to address this issue by:

1. **JHS will expand primary care locations to regions throughout Miami-Dade County:** 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 continue expanding access to care by opening urgent care centers (UCCs):** To expand primary care service availability, JHS will continue to open at least five UCCs in partnership with the University of Miami, as promised to Miami-Dade County taxpayers as part of the Miracle-Building Bond Program. The UCCs operate in twelve hour shifts from 8 AM to 8 PM, offering convenience to patients unable to fit into traditional physician office schedules, or for those without a designated primary care provider.
- At select urgent care centers, JHS will begin establishing primary care offices where patients can make appointments to see a PCP. The primary care offices will also allow for walk-in patients. Additionally, JHS will be expanding its primary care network by opening new primary care locations across the county.
- 3. Establish multispecialty sites in selected regions in Miami-Dade County:** JHS recognizes that it is important to have multispecialty located throughout the county. For this reason, Jackson has undertaken a plan to place providers closer to patients and the population specialty physicians serve.
- Jackson West campus, which will be a medical campus comprised of medical offices, an ambulatory surgical center, diagnostic and treatment platform and emergency department, will be opening in Doral by 2020. Many specialties will be offered at this location.
  - A multispecialty physician office network plan is underway with hopes of bolstering Jackson specialists' presence in various parts of the county.

## Priority Area 2: Access to Care

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The *County Health Rankings and Roadmap* study also found that uninsured/underinsured continue to face greater barriers to care than those with third party insurance.

### A. Priority area indicators of healthcare needs:

- **Indicator 4:** Adults with health insurance - defined as the percentage of the population between the ages of 18 and 64 that have some kind of health coverage, Miami-Dade ranks in the bottom 25<sup>th</sup> percentile when compared to other counties in the United States. Miami-Dade is currently at 75.5% and people living in other counties in the US are at 86.9%.
- **Indicator 5:** Children with health insurance - defined as the percentage of the population between the ages of 0 and 17 that have some kind of health coverage, Miami-Dade ranks in the between the bottom 25<sup>th</sup> and 50<sup>th</sup> percentile when compared to other counties in the US. Miami-Dade is currently at 92.7% and people living in other counties in the US are at 95.2%.
- **Indicator 6:** Median monthly Medicaid enrollment - defined as the median monthly number of people enrolled in Medicaid per 100,000 population, Miami-Dade ranks in the bottom 25<sup>th</sup> percentile when compared to other counties in Florida. Miami-Dade's median monthly enrollment is 27,221 per 100,000 people and statewide in Florida the rate is 19,938 per 100,000 people.

## **B. Key activities to address indicators:**

Having health insurance does not mean that access to healthcare is readily available. Jackson's mission since it opened its doors almost 100 years ago has always been "to build the health of the community by providing a single, high standard of quality care for the residents of Miami-Dade County." This includes providing care to anyone regardless of their ability to pay. Although the Affordable Care Act required all Americans to enroll in insurance coverage, Miami-Dade ranks poorly in the percentage of adults and children with health insurance. JHS hopes to address this issue by:

### **1. Implement capital building campaign to improve access to outpatient programs and services through upgrade and expansion of JHS facilities.**

- All Jackson facilities are slated for upgrades of patient rooms
- All emergency rooms will be upgraded and some of the busier departments will add capacity.
- The capital building campaign also includes the expansion of urgent care centers throughout the county and added free-standing emergency department in Doral.

### **2. JHS will expand contractual relationships with all payers to ensure access to JHS continuum of care.**

- JHS will continue to have ongoing discussions with all managed care providers to ensure as many plans are accepted as possible.
- Evaluate and access alternative payment models as they arise.

### **3. JHS will develop strategies to enroll the 65+ year-old population into Medicare:** With an aging population in Miami-Dade County, 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 part of Jackson’s Medicare strategy, culture and age specific hospitality measures will be explored to make the 65+ population as comfortable as possible.

4. **JHS will provide education on the Jackson Prime program to residents without access to health insurance.** JHS will continue to aggressively enroll qualified individuals, adult and children, into Medicaid or programs they may qualify for, such as Jackson Prime. Jackson Prime is a program to identify and improve access to underserved and uninsured populations by creating a patient centered medical home model for patients that assists in managing and coordinating all aspects of the patient’s care. 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 (2017)**

<b>Location</b>	<b>Address</b>
Jackson Memorial Hospital	1611 N.W. 12th Avenue, Miami
Jackson South Community Hospital	8950 S.W. 152nd Street, Suite 146, 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

### **Priority Area 3: Chronic Disease Management**

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Higher concentrations of diabetes, asthma (adult and pediatric) and heart failure found within lower socio-economic zip codes within the county, increased access to care and education on specific disease management have been identified as a top priority.

#### **A. Priority area indicators of healthcare needs:**

- **Indicator 7:** Diabetes - defined as the number of adults per 10,000 people self-reporting a diagnosis of diabetes, Miami-Dade ranks between the bottom 25<sup>th</sup> and 50<sup>th</sup> percentile when compared to the state of Florida. The countywide age-adjusted rate of hospitalizations for diabetes is 24.2 per 10,000 residents over the age of 18, whereas Florida’s value is 24.5 per 10,000. However, for Miami-Dade County residents aged 45 years and older, the age-adjusted hospitalization rate is much higher than the state average.
- **Indicator 8:** Adult asthma - defined as the rate of hospitalization due to adult asthma per 10,000 residents, Miami-Dade ranks in the between the bottom 25<sup>th</sup> and 50<sup>th</sup> percentile when compared to the state of Florida. Miami-Dade has a hospitalization rate of 12.9 per 10,000 residents due to adult asthma, with adults ages 45 and older experiencing a drastically higher rate.
- **Indicator 9:** Hospitalizations due to heart failure – defined as the number of hospitalizations due to heart failure per 10,000 residents, Miami-Dade ranks in the bottom 25<sup>th</sup> percentile

when compared to the state of Florida. Miami-Dade has a hospitalization rate of 43.0 per 10,000 residents due to heart failure, with adults ages 65 and older experiencing a drastically higher rate. Florida's average hospitalization rate is 36.2 per 10,000 residents.

- **Indicator 10:** Pediatric asthma- defined as the rate of hospitalization due to pediatric asthma per 10,000 residents, Miami-Dade ranks in the between the bottom 25<sup>th</sup> and 50<sup>th</sup> percentile when compared to the state of Florida. Miami-Dade has a hospitalization rate of 12.7 per 10,000 residents under the age of 18 due to pediatric asthma, with children ages 0-9 experiencing a drastically higher rate.

## **B. Key activities to address indicators:**

Chronic disease and conditions, which include heart disease, stroke, cancer, diabetes, obesity and arthritis, are among the most common, costly and preventable health problems. By preventing and managing chronic conditions, the general health of the population can be improved, resulting in lower preventable hospital visits and lower healthcare costs. JHS hopes to address this issue by:

### **1. JHS will expand chronic disease programs to address diagnosis specific health indicators**

- Jackson has partnered with Care Angel, an automated "virtual caregiving assistant", to manage certain patients with chronic diseases upon discharge. Capabilities include medication reminders and provider access for patients.
- Pilot programs for chronic disease states, such as diabetes, will continue to be examined and implemented as seen fit.

### **2. JHS will devise a population health management plan that will address the needs of patients with chronic illnesses within its primary care and ambulatory care network.**

- JHS will continue to study the patient demographics and segment the population into disease states and fill in gaps where patient care is needed.
- Upon identification of the need, JHS will examine the root cause to determine the best medical intervention to serve patients.

### **3. Expand web site content to include and enhance educational content and links to third-party educational resources for patients.**

- The JHS website is continuously enhanced to ensure it meets the needs of patients and link to appropriate resources, as necessary.

### **4. Identify select educational opportunities within primary care system to educate patients on management of their chronic conditions.**

- Primary care providers will provide education to patients during visits. This education includes but is not limited to not only providing results but also explaining what the results mean and how it impacts the patient's overall quality of life



## Priority Area 4: Maternal and Child Health

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Leadership interviews revealed a need for greater access to obstetric, gynecological, and pediatric care in the primary care setting, prior to needing hospital services, in order to ensure proper pre/postnatal care.

### A. Priority area indicators of healthcare needs:

- **Indicator 11:** Mother who received early prenatal care- defined as the percentage of pregnant mothers that begin prenatal care within the first trimester of their pregnancy, Miami-Dade ranks in the top 50<sup>th</sup> percentile when compared to the state of Florida and the country. Miami-Dade has 86.0% of mothers receiving prenatal care, compared to 79.3% in Florida and 76.7% in the United States. However, this is a decrease from previous years.
- **Indicator 12:** Low birth weight- defined as the percentage of newborns that weighed less than 2,500 grams, Miami-Dade ranks in the top 50<sup>th</sup> percentile when compared to the state of Florida. Miami-Dade has 8.4% of newborns born with low birth weight, compared to Florida at 8.6% and the United States at 8.0%. The Healthy People 2020 goal is 7.8%.
- **Indicator 13:** Infant mortality- defined as the death of an infant within their first year of life, as a rate per 1,000 live births, Miami-Dade ranked in the top 50<sup>th</sup> percentile when compared Florida's rate. Miami-Dade has 4.8 deaths per 1,000 live births, which is slightly less than Florida, with a rate of 6.2 deaths per 1,000 live births. Healthy People 2020's target is 6.0 infant deaths per 1,000 live births, and Miami-Dade is meeting that goal.

### B. Key activities to address indicators:

According to Healthy People 2020, improving the well-being of mothers, infants, and children is an important public health goal for the United States. Their well-being determines the health of the next generation and can help predict future public health challenges for families, communities, and the health care system. Some of the activities Jackson Health System will engage in to improve Maternal and Child Health are as follows:

#### 1. JHS will expand OB and Maternal Fetal Medicine to all Jackson campuses

- JHS will place MFM providers at all three of its hospital locations to provide geographic access throughout the County.
- JHS will streamline the processes for ultrasounds and MFM appointments with the ambulatory care center and primary care centers with MFM offices.

#### 2. JHS will provide education on the Holtz Children's Hospital's comprehensive network of pediatric services.

- JHS will continue to provide pre-natal education to expectant mothers along with other education for parents.
- JHS and UM pediatricians and pediatric specialist will work collaboratively to treat patients as they are treated

## Priority Area 5: Healthy Lifestyles: Exercise and Nutrition

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With a significant burden of chronic disease, incorporating a population health based scope, particularly in the primary care setting, can help prevent many of the hospitalizations from chronic disease complications. Jackson Health System leadership recognize its continued need to promote healthy living through a population health focused environment to its patients at every encounter, whether that be in a urgent care or ambulatory care setting or in one of its hospitals.

### A. Key activities address the following health indicators:

- **Indicator 14:** Adults and teens who are overweight or obese- defined as the percentage high school students with a body mass index (BMI) greater than or equal to the 85<sup>th</sup> percentile (overweight) or greater than the 95<sup>th</sup> percentile and the percentage of adults age 18 and older with a BMI of 25.0-29.9 (overweight) and greater than or equal to 30.0 (obese), Miami-Dade is in the 50<sup>th</sup> percentile. Miami-Dade's adult overnight or obese percentage is 63.6%, which is higher than Florida's rate of 62.8%, as is Miami-Dade's high school overweight or obese rate of 27.9% compared to Florida's 26.8%
- **Indicator 15:** Food insecurity rate- defined as the percentage of the population with limited or uncertain availability of nutritionally adequate foods or uncertain ability to acquire these foods in socially acceptable ways, Miami dad ranks in the top 50<sup>th</sup> percentile compared to Florida and the United States. Miami-Dade food insecurity rate for residents for some point during the year is 9.0% and Florida's rate is 15.1%. Miami-Dade's rate has decreased nearly 50% since 2011.
- **Indicator 16:** Child food insecurity rate- defined as the percentage of children under the age of 18 that experience food insecurity at some point during the year, Miami-Dade ranks in the top 50<sup>th</sup> percentile compared to Florida. Miami-Dade has a rate of 20.6% of children, lower than Florida's value of 22.7%, but higher than the United States' rate of 19.3% Since 2011, Miami-Dade's rate had decreased by nearly 25%.
- **Indicator 17:** Adults who are sedentary- defined as the percentage of adults who self-report not participating in any leisure time activities, Miami-Dade ranked between to 25<sup>th</sup> and 50<sup>th</sup> percentile when compared to Florida and the US. Miami-Dade reported 32.7% of adults who have a sedentary lifestyle and Florida reported 27.7%. Healthy Population 2020 has a target of 32.6%.
- **Indicator 18:** Teens who engage in regular physical activity: high school students- defined as the percentage of high school teens who engage in regular physical activity for a total of at least 60 minutes per day on five or more of the seven preceding days, Miami-Dade ranks between the 25<sup>th</sup> and 50<sup>th</sup> percentile compared to Florida and the US. Miami-Dade has a percentage of 36.1% of teens reporting being physically active, while Florida reports 41.9% and the US reports 48.6%. Overall, Miami-Dad has increased its percentage since 2005.

### B. Key activities to address indicators:

JHS remains focused on health outcomes and the management of patients to improve their quality of life. To address this priority area, JHS will explore the feasibility to:

**1. JHS will provide community based disease prevention education.**

- JHS will continue to participate in health fairs and other community events to provide awareness and education.
- JHS providers will continue to participate in educational series depending on the need and disease state.

**2. JHS will develop health and wellness program for employees and employer based programs for Miami-Dade County.**

- JHS will continue to enhance the employee work life balance by creating specialized programs to encourage employee wellness
- JHS has partnered with MDLive to provide Virtual Visits. Virtual Visits provides remote access to board-certified doctors. It can be used to treat minor illnesses and injuries, including but not limited to cold/flu, cough, earaches, fever, nausea/indigestion, pink eye, rash, respiratory problems, and sore throats.

**3. JHS will develop education and wellness through all primary care providers.**

- Jackson providers will provide education to patients during visits. Results will not only be discussed but what they mean to the patient and their quality of life.

## **Other Pertinent Priority Areas: Psychiatry/Substance Abuse Treatment**

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Conversations during the Executive Leadership Focus Groups indicate that behavioral health and substance abuse are a growing concern among hospital executives and medical professionals in Jackson Health System and in Miami-Dade County. While, according to our methodology for determining priority areas, Psychiatry/Substance Abuse Treatment was not chosen one of the top five (5) priorities, this particular area warrants inclusion and data analysis.

**A. Key activities address the following health indicators:**

- **Indicator 19:** Frequent mental distress- defined as the percentage of adults who stated that their mental health, including stress, depression, and emotional problems, was not good for 14 or more of the past 30 days, Miami-Dade ranked in the bottom 25<sup>th</sup> percentile compared to Florida and the US. Miami-Dade's percentage is 13.3% for adults, which is higher than Florida's percentage of 10.0% and the US's of 11.0%. This is also an increase from the previous percentage of 12.9% in 2014.
- **Indicator 20:** Age-adjusted death rate due to suicide- defined as the age-adjusted rate per 100,000 deaths from suicide, Miami-Dade ranked in the top 50<sup>th</sup> percentile compared to Florida and the US. The age-adjusted suicide rate in Miami-Dade is 8.9 suicide deaths per

100,000 residents, which is lower than the Florida's rate of 14.6 deaths and the US's 13.3 deaths.

- **Indicator 21:** Age-adjusted hospitalization rate due to alcohol abuse- defined as the rate of hospitalizations due to alcohol abuse per 10,000 residents, Miami-Dade ranked at the 50<sup>th</sup> percentile compares to Florida and the US. The age-adjusted rate in Miami-Dade for alcohol abuse hospitalization is 12.9 per 10,000 residents and Florida's rate was slightly higher at 15.8 per 10,000 residents.

## **B. Key Activities:**

Behavioral health and substance abuse is a growing concern among health professionals, politicians, and community members. With the rise of cyber bullying, increased awareness of mental/behavioral health issues including suicide, and the opioid epidemic throughout the United States, it is important to understand the data surrounding these important health areas. JHS hopes to address this issue by

### **1. JHS will Expand Behavioral Health Programs**

- JHS will explore the feasibility of expanding program to meet the dynamic needs of the community.

### **2. JHS will partner with and align with community based providers, the University of Miami and other academic providers.**

- JHS will bring awareness of prevention and substance abuse by aligning with community based providers, the University of Miami and other academic partners.
- JHS will align the needs and support for emergency services with community demand.
- JHS will partner with behavioral health providers to meet the needs of outpatient and inpatient clinical behavioral services.