# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letter from CEOs</td>
<td>1</td>
</tr>
<tr>
<td>Executive Summary</td>
<td>2</td>
</tr>
<tr>
<td>Community Health Needs Assessment</td>
<td>3</td>
</tr>
<tr>
<td>Strategic Health Priorities</td>
<td>3</td>
</tr>
<tr>
<td>Our Patients</td>
<td>4</td>
</tr>
<tr>
<td>Methodology</td>
<td>7</td>
</tr>
<tr>
<td>Focus Group Insights</td>
<td>9</td>
</tr>
<tr>
<td>Health Priorities</td>
<td>10</td>
</tr>
<tr>
<td>Existing Community Resources</td>
<td>16</td>
</tr>
<tr>
<td>Community Benefit and Next Steps</td>
<td>18</td>
</tr>
<tr>
<td>Appendix</td>
<td>19</td>
</tr>
</tbody>
</table>
Dear Miami-Dade County Residents:

Baptist Health South Florida is dedicated to a mission of generosity, compassion and commitment to clinical and service excellence. We strive to improve the health and well-being of individuals and promote the sanctity and preservation of life in the communities we serve.

At the heart of our mission is the commitment to caring for our community. As a result, we recently conducted a community health needs assessment to survey the needs of the individuals who reside in our service area. During this process, we received input from a diverse group of community stakeholders who were able to provide insight on the various needs affecting the health of our service area. Ultimately, our aim is to strengthen the bond between the community and our hospitals, leading to a greater community engagement, buy-in and a shared sense of ownership for their health.

Baptist Hospital of Miami, Doctors Hospital, South Miami Hospital and West Kendall Baptist Hospital make up Baptist Health's four urban hospitals in the Miami-Dade County. Our hospitals' populations tend to overlap, and grouping our “Urban Four” allows us to gain a comprehensive understanding of our community’s needs. As a faith-based, not-for-profit institution, Baptist Health is focused on providing high-quality, compassionate care to all our patients, including the poor and uninsured.

This report will serve as a valuable tool for decision makers and community leaders by providing the information needed to improve program planning, set policy and educate and advocate toward a healthier Miami-Dade. We invite you to review the report and supplemental implementation plan and welcome any feedback or additional resources. Please email the manager of Community Benefit, Christine D. Wilson, ChristineDW@BaptistHealth.net.

Sincerely,

Patricia Rosello  
Chief Executive Officer  
Baptist Hospital of Miami

Nelson Lazo  
Chief Executive Officer  
Doctors Hospital

William Duquette  
Chief Executive Officer  
South Miami Hospital

Javier Hernandez-Lichtl  
Chief Executive Officer  
West Kendall Baptist Hospital
### Executive Summary FY 2018:

#### Baptist Hospital at a Glance:

- Licensed beds: 728
- Inpatient admissions: 30,533
- Patient days: 184,893
- Surgeries*: 14,716
- Number of employees: 4,615
- Emergency Center visits: 115,108
- Outpatient visits: 556,019

Payer mix*: 41% Medicare, 15% Medicaid

#### Doctors Hospital at a Glance:

- Licensed beds: 281
- Inpatient admissions: 5,634
- Patient days: 24,705
- Surgeries*: 5,789
- Number of employees: 917
- Emergency Center visits: 21,171
- Outpatient visits: 64,197

Payer mix*: 65% Medicare, 4% Medicaid

#### South Miami Hospital at a Glance:

- Licensed beds: 436
- Inpatient admissions: 15,256
- Patient days: 74,279
- Surgeries*: 8,492
- Number of employees: 2,097
- Emergency Center visits: 42,825
- Outpatient visits: 275,370

Payer mix*: 31% Medicare, 21% Medicaid

#### West Kendall Baptist Hospital at a Glance:

- Licensed beds: 133
- Inpatient admissions: 8,006
- Patient days: 31,537
- Surgeries*: 4,431
- Number of employees: 1,068
- Emergency Center visits: 61,149
- Outpatient visits: 91,836

Payer mix*: 65% Medicare, 4% Medicaid

*Includes inpatient and outpatient surgeries

**Medicare/Medicaid percentages based on gross revenue and do not include Medicare-managed or Medicaid-managed payers.
Community Health Needs Assessment

A community health needs assessment (CHNA) involves a systematic engagement of patients and community members to prioritize the community’s health needs and develop an implementation plan to address them. This process provides hospitals the opportunity to effectively coordinate hospital community benefits and make a positive impact on the health of the overall community. Ultimately, our aim is to strengthen the bond between the community and our hospitals, leading to greater community engagement, buy-in and a shared sense of ownership. As an organization, Baptist Health South Florida is committed to serving the South Florida community. By conducting a CHNA, we are able to gain a comprehensive understanding of the health issues the communities are facing and allocate resources to address them, making patient and community engagement a central part of our process. In the end, it is the mission of Baptist Health to make a positive impact in the communities our hospitals serve.

Baptist Health recently conducted a CHNA in the Greater Miami community, which is home to Baptist Hospital, Doctors Hospital, South Miami Hospital and West Kendall Baptist Hospital — all situated within six miles of one another. Because the close proximity allows easy accessibility to the services at all four hospitals, this report will combine the services areas of all four hospitals into one all-inclusive service area designated as Baptist Health’s Urban Four hospitals. This comprehensive report was compiled using various resources and data sources including local, state and national statistics from the Department of Health, U.S. Census Bureau and the Centers for Disease Control and Prevention, along with inpatient admissions and in-depth internal and external focus groups.

To supplement the quantitative data presented, the Urban Four hospital staffs, executive leadership, and community stakeholders participated in focus groups to provide perspective on the overall health concerns of the community.

The quantitative and qualitative data collected were used to shape the following five health priorities facing the Greater Miami community:

1. Behavioral Health
2. Access to Care
3. Availability of Primary Care and Prevention
4. Chronic Disease Management
5. Healthy Lifestyles and Wellness

Having identified these priorities, community and internal stakeholders of the Urban Four hospitals will develop an implementation plan to address the needs. The strategies, interventions and partnerships identified and developed will be incorporated into the final implementation plan, which will be implemented and evaluated on an ongoing basis, both, internally and externally.
Our Patients

Who are they? Where do they live?

According to the U.S. Census Bureau, the 2018 population estimate for Miami-Dade County was 2,761,581. The estimated population for the Urban Four hospitals’ service area is 1,223,422.

The Urban Four hospitals’ designated service area consists of 33 ZIP codes in Miami-Dade County:

- Coral Gables/Coconut Grove/South Miami: 33133, 33134, 33143, 33145, 33146
- Cutler Ridge/Cutler Bay/Perrine: 33157, 33177, 33189, 33190
- Doral: 33126, 33172, 33178
- Downtown Miami/Brickell: 33125, 33129, 33131, 33132, 33135
- Goulds: 33170
- Miami Springs: 33166
- Kendall/West Kendall: 33173, 33175, 33176, 33183, 33185, 33186, 33193, 33196
- Key Biscayne: 33149
- Palmetto Bay/Pinecrest: 33156, 33158
- West Miami/Westchester: 33144, 33155, 33165

The service area population can be broken down into 88.9 percent White, 6.5 percent Black or African American, and 2 percent Asian. This area in Miami-Dade County is 76.7 percent Hispanic or Latino. The median household income for the service area is $60,853, compared to Miami-Dade’s median household income of $46,338. Approximately 37.8 percent of individuals in the service area are below 200 percent of the poverty level.
Urban Four Service Area by Race
ACS 2017

White: 89%
Asian: 2%
Black or African American: 7%
Other: 2%

Urban Four Service Area by Ethnicity
ACS 2017

Non-Hispanic or Latino: 23%
Hispanic or Latino: 77%

Urban Four Service Area by Sex
ACS 2017

Female: 52%
Male: 48%

Urban Four Service Area by Age
ACS 2017

Under 5 years old: 5%
5-14 years old: 11%
15-24 years old: 12%
25-49 years old: 36%
50-64 years old: 20%
65 years old +: 16%

Data Source: U.S. Census Bureau, American Community Survey 2017
Where they go for healthcare

There are 25 hospitals that serve Miami-Dade County. In the Urban Four service area, there are currently 11 hospitals and two freestanding emergency departments (ED), with many other EDs set to open in the coming years. These provide a variety of options for the community to seek urgent care, including virtual options, as with the introduction of various telehealth platforms, such as Baptist Health’s Care On Demand©.

As demand for prevention continues to grow, so does the demand for primary care services. Currently there are 80 providers per 100,000 individuals Miami-Dade County. This is significantly lower than the 131 and 160 providers per 100,000 individuals in Florida and the U.S., respectively. Additionally, millions of Americans are affected by behavioral health conditions each year. According to the Department of Labor’s Bureau of Labor Statistics, in 2017 there were more than 577,000 behavioral health professionals practicing in the U.S., whose main focus is the treatment (and/or diagnosis) of a behavioral health or substance abuse concern. In Florida, there were 108.9 behavioral health professionals per 100,000 population and 94.7 in Miami-Dade County. The County only has one licensed in-patient behavioral health facility.

A significant number of people in the Urban Four service area are uninsured or underinsured. The National Association of Community Health centers is a national network that help increase access to crucial primary care by reducing barriers of cost, lack of insurance and other social determinants of health. These organizations offer a wide array of primary and preventive care services that help reduce mortality and health disparities. The Florida Association of Free and Charitable Clinics is a not-for-profit organization headquartered in Miami. These clinics provide healthcare services at little or no charge to low-income, uninsured and underserved individuals. Florida has more than 100 free and charitable clinics and networks. In Miami, Baptist Health helps support the work and mission of Caring for Miami, Good News Care Center, Open Door Health Center, South Miami Children’s Clinic, St. John Bosco and Good Samaritan Health Center through financial support and/or access to ancillary services.
Methodology

In order to ensure broad community input, Baptist Health utilized the existing CHNA Steering Committee for input to organize the Urban Four CHNA approach. This committee is composed of 22 representatives from across the system, including vice president of Baptist Outpatient Services, corporate vice president of Finance, director of Community Health, manager of Strategic Planning, director of Health Services and Research Outcomes, director of Marketing, manager of Community Benefit, and entity representatives from all nine Baptist Health hospitals.

The ultimate goal and core mission of Baptist Health is to keep our communities healthy. This report and the CHNA process help to frame and pinpoint our patients’ health needs with the ultimate goal of improving quality of life for those in Baptist Health’s served communities.

The CHNA Steering Committee met on a monthly basis to discuss specific health priorities for the system and to create a strategy for the CHNA and Implementation Plan process. The next phase was to collect information, research and data from hospital, local and state agencies, and national resources. This information was consolidated and packaged for use during four hospital internal focus groups and one larger external stakeholder focus group.

The groups were made up of various levels of hospital leaders, staff, residents, patients, consumers, community leaders and community partners. A community profile, along with chronic disease, communicable disease and health behavior data, was presented for the service area, county, state and nation. The groups participated in an open dialogue forum at which they discussed topics such as:

- Baptist Health’s strengths and opportunities to improve health outcomes in the Urban Four service area.
- Strategies to create the greatest impact on health indicators.
- Potential challenges/barriers to improving health outcomes.
- Partnership opportunities to positively impact health indicators.

Using an analytical ranking tool, focus group members and online survey participants submitted their top five health priorities.

Common Health Status Indicators Discussed in Focus Groups:

- Access to care.
- Availability of primary and preventive care.
- Barriers to accessing care.
- Cancer prevention and treatment.
- Chronic disease management.
- Communicable diseases (STD and HIV).
- Dental and oral healthcare.
- Eider care and geriatrics.
- Healthy lifestyles: wellness, exercise and nutrition education.
- Heart disease.
- Maternal and child health.
- Behavioral health.
- Neurosciences.
- Respiratory and pulmonary disease.
- Socioeconomic challenges.
- Substance abuse treatment.
These individual rankings were tabulated.

Urban Four Hospital (See Appendix B: Multi-attribute Utility Analysis Ranking Tool):

<table>
<thead>
<tr>
<th>Top Priorities</th>
<th>Baptist Hospital of Miami (Internal)</th>
<th>Doctors Hospital (Internal)</th>
<th>South Miami Hospital (Internal)</th>
<th>West Kendall Baptist Hospital (Internal)</th>
<th>Community Stakeholder</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Availability of Primary Care &amp; Prevention</td>
<td>Behavioral Health</td>
<td>Behavioral Health</td>
<td>Behavioral Health</td>
<td>Behavioral Health</td>
</tr>
<tr>
<td>2</td>
<td>Access to Care</td>
<td>Elder Care/Geriatrics</td>
<td>Availability of Primary Care &amp; Prevention</td>
<td>Access to Care</td>
<td>Access to Care</td>
</tr>
<tr>
<td>3</td>
<td>Healthy Lifestyles &amp; Wellness</td>
<td>Availability of Primary Care &amp; Prevention</td>
<td>Dental Care/Oral Health</td>
<td>Socioeconomic Challenges</td>
<td>Socioeconomic Challenges</td>
</tr>
<tr>
<td>4</td>
<td>Behavioral Health</td>
<td>Chronic Disease Management</td>
<td>Access to Care</td>
<td>Availability of Primary Care &amp; Prevention</td>
<td>Healthy Lifestyles &amp; Wellness</td>
</tr>
<tr>
<td>5</td>
<td>Heart Disease</td>
<td>Access to Care</td>
<td>Healthy Lifestyles &amp; Wellness</td>
<td>Chronic Disease Management</td>
<td>Availability of Primary Care &amp; Prevention</td>
</tr>
</tbody>
</table>

Final Priorities:

1. Behavioral Health
2. Access to Care
3. Availability of Primary Care and Prevention
4. Chronic Disease Management
5. Health Lifestyles and Wellness
Focus Group Insights

The internal and external focus groups identified five priority areas that will be defined and expanded upon in the “Healthcare Priorities” section of this report. The current section is meant to highlight the common themes and insights provided by the focus group members.

Similar themes where discussed among the five focus groups, where the most serious health issues facing our community were thought to be behavioral health, access to care, and prevention and management of chronic diseases.

Stigma associated with behavioral health is a social problem that affects how people interact with, provide opportunities for and help support a person with mental illness. Stigma also frames how people express their own emotional problems or psychological distress and whether they disclose these symptoms and seek care. This can lead to social exclusion or discrimination, lack of education, low socioeconomic status can ultimately lead to a disproportionate distribution of resources and restrictions to access to resources. Those experiencing mental disorders and other associated disorders are not the only ones in need of behavior.

Health Insurance Coverage

According to eHealth data, the average individual health insurance premium price has almost tripled since 2008. In 2017, approximately a quarter of adults ages 19 through 64 living in the service area were uninsured, and concerns about healthcare affordability are rising. Focus group participants were alarmed at the number of individuals 19-64 who were not insured and that Florida and Miami-Dade County are below the national average of insured individuals. Groups emphasized uncertainty in the current and future healthcare policies as one of the greatest challenges. Medicaid expansion was not passed in Florida but is being proposed for the ballot. State and national political standings on policies to reduce healthcare and insurance costs are mixed. Other external challenges brought forth by the focus groups included opposition to change, the “not my problem” mentality, and the stigma related to diseases in specific cultural communities.

Opportunities to Improve Health

Community stakeholders presented various means for Baptist Health to improve health and quality of life in the community. Both internal and external focus groups emphasized expanding active community engagement through increasing relationships and partnerships with Miami-Dade County schools to educate parents and students on healthy lifestyles and wellness. Other opportunities mentioned included partnering with churches, synagogues and other faith-based organizations, along with community organizations and businesses; hosting more classes and engaging residents in their own communities, such as in nearby parks or community centers; and engaging the community through green and sustainable efforts, such as community gardens, to enhance the community’s connection to health.
Healthcare Priorities

Priority 1: Behavioral Health

Behavioral health is an important part of overall health and well-being. Behavioral health includes emotional, psychological and social well-being. It affects how one thinks, feels and acts. It also helps determine how to handle stress, relate to others and make healthy choices. Behavioral health is important at every stage of life, from childhood and adolescence through adulthood. Mental and physical health are equally important components of overall health. Mental illness, especially depression, increases the risk for many types of physical health problems, particularly long-lasting conditions such as stroke, type 2 diabetes and heart disease. Data from the Healthcare Cost and Utilization Project shows that at U.S. hospitals, 12.8 percent of mental disorder discharges and 9.9 percent of substance use-related discharges are readmitted for the same type of diagnosis within 30 days.

It is important to understand that mental illnesses are among the most common health conditions affecting people in the U.S. In 2017, there were an estimated 46.6 million adults – about one in five Americans – with a mental illness. This number represents 18.9 percent of all U.S. adults. Suicide, which is often associated with symptoms of mental illness, is the 12th-leading cause of death in Miami-Dade County and the 10th-leading cause of death in the U.S. and Florida. In 2017, suicide was the second-leading cause of death among people ages 10-34. In 2017, the total rate of behavioral/mental health professionals per 100,000 population was 94.7, compared to 108.9 in Florida. Mood disorders, including major depression, dysthymic disorder, and bipolar disorder, are the third-most common cause of hospitalization in the U.S. for both youths and adults ages 18 to 44. Lastly, $193.2 billion in annual lost earnings can be attributed to serious mental illness costs, in the United States.

Unfortunately, the majority of people with mental disorders and substance abuse issues do not pursue or receive services. The elimination of the stigma associated with mental disorders may encourage more individuals to seek needed behavioral healthcare. Behavioral health is directly linked to physical health; a person’s mental state can impact him/her physiologically or alter behavior that could put that person’s health and safety at risk.

- Anxiety Disorders
  Anxiety disorders are the most common behavioral health concern in the United States. Everyone can experience anxiety to some extent, but it is when feelings overwhelm or prevent individuals from everyday activities that an anxiety disorder may be the cause. An estimated 40 million adults in the U.S. (18 percent) have an anxiety disorder. Meanwhile, approximately 8 percent of children and teenagers experience an anxiety disorder. Most people develop symptoms before age 21.

  There are many different kinds of anxiety disorders, with varying symptoms. Some of the most common are generalized anxiety disorder, social anxiety disorder, panic disorder and phobias. The causes are believed to stem from genetics and environmental factors, such as a traumatic event or abuse.

  Source: National Alliance on Mental Illness; 2017; Florida CHARTS

- Depression
  The exact cause of depression is unknown. It may be caused by a variety of different factors, including genetic, biological, environmental and psychological. It is estimated that one in 10 adults suffers from some type of mood disorder, with the most common conditions being depression and bipolar disorder. Individuals with these conditions can lead normal, productive lives if properly diagnosed and treated. If left untreated, this illness can affect quality of life and present with various comorbidities such as diabetes and heart disease.

  In general, at some time in their life, one out of every six U.S. adults is affected by depression. Depression takes different forms and can be mild or severe. In 2017, the number of age-adjusted hospitalizations for mood and depressive disorders per 100,000 individuals was 479.6 in Miami-Dade County, compared to 492.2 in Florida.

  Source: CDC: Mental health; Florida CHARTS
**Substance Abuse**

Substance abuse disorders often occur in conjunction with mental illnesses, with one condition being a contributing or exacerbating factor for the other. Excessive alcohol use can pose both immediate health risks — such as traffic injuries, falls, drownings, burns, unintentional firearm injuries and alcohol poisoning — and long-term health risks, such as liver disease, certain types of cancer and neurological, cardiovascular and psychiatric problems. Excessive alcohol use has also been linked to battery, domestic violence, child abuse, risky sexual behaviors and miscarriage and stillbirth among pregnant women. In 2016, Miami-Dade County reported that 18.3 percent of adults who engaged in heavy or binge drinking, compared to 17.5 percent in Florida. The unintentional injury age-adjusted death rate for the state was 56.03 per 100,000 people and 30.59 per 100,000 for the county.

- 3.9 percent of Monroe middle schoolers and 12.1 percent of Miami-Dade County high schoolers reported binge drinking (statewide averages were 3.2 percent for middle schoolers and 10.9 percent for high schoolers); and
- 7.3 percent of Monroe middle schoolers and 26.2 percent of Miami-Dade County high schoolers had used alcohol in the past 30 days (statewide averages were 8.3 percent for middle schoolers and 25.5 percent for high schoolers).

Source: Florida CHARTS

**Suicide**

In 2016, suicide was the 10th-leading cause of death overall in the U.S., claiming the lives of nearly 45,000 people. From 1999 to 2016, Florida has seen an increase in suicide by 10.6 percent. In Miami-Dade County, suicide is the 12th-leading cause of death, with a rate of 7.9 per 100,000 of the population. Several factors can contribute to suicide; research shows that there is a strong link between suicide and depression. A diagnosis of depression elevates a person’s risk for suicide. In 2017, the total deaths to suicide represent a total of 52,695 years of potential life lost before age 65.

Source: American Foundation for Suicide Prevention, CDC, Florida CHARTS, Suicide Awareness Voices of Education

**Priority 2: Access to Care**

Research data from the American College of Physicians, Institute of Medicine and other organizations have documented the link between health insurance and health status. This data established that lack of health insurance creates financial barriers to receiving medical care, which subsequently leads to adverse health outcomes. Although health insurance coverage alone does not guarantee positive health outcomes, it does increase access to preventive services, which can directly maintain or improve various aspects of health.

This access to preventive services is also linked to earlier detection of disease, medication adherence, emotional well-being and chronic disease management. Health insurance coverage also allows individuals the peace of mind of knowing that when they gets sick, they can afford to seek treatment.

In 2015, Florida ranked 45th in the country for its percentage of insured residents, which significantly exceeds the national average.

**Adults Without Health Insurance**

In 2017, approximately 24.2 percent of adults ages 19 through 64 living in the service area were uninsured. This rate surpassed that of Florida’s 19.1 percent and the national rate of 12.3 percent.

Source: US Census Bureau, American Community Survey, 2013-2017

**Children Without Health Insurance**

In 2017, 7.4 percent of service area children, had no health insurance, compared with 7.3 percent of children in the state and 5 percent in the nation.

Source: US Census Bureau, American Community Survey, 2013-2017
Medicaid Enrollment

In 2017, only 62.2 percent of physicians reported accepting new Medicaid patients in Florida. According to the February 2019 Medicaid and CHIP Report, 65,567,683 individuals enrolled in Medicaid in the United States. For Miami-Dade, the Medicaid enrollment for the same time period was 3,948,127 residents. Florida is one of the 19 states not expanding Medicaid.

Source: Medicaid.gov: February 2019 Medicaid & CHIP Enrollment Data Highlights; Florida Department of Health: Florida Charts

Underinsured

People who are "underinsured" have high deductibles and high out-of-pocket expenses relative to their income. The Affordable Care Act has expanded of people who are to attain healthcare coverage. While healthcare costs continue to rise, employers are rolling out higher deductible plans. Some 40 percent of adults with private insurance reported a deductible of $3,000 or more, which they had difficulty paying. According to the Commonwealth Fund report, higher deductibles are associated with higher medical debt. In 2016, 45 percent of working-age adults who were underinsured went without needed healthcare due to cost.

Source: The Commonwealth Fund: Underinsured rate increased sharply in 2016; more than two of five marketplace enrollees and a quarter of people with employer health insurance plans are now underinsured.

Priority 3: Availability for Primary Care and Prevention

According to the Association of American Medical Colleges, the U.S. will face a shortage of between 42,600 and 121,300 physicians by 2030. The estimated shortage of primary care physicians will be between 14,800 and 49,300. The report stressed that the primary factors driving demand for more physicians is population growth and an increase in the number of aging Americans. By 2030, the U.S. population is estimated to grow by 11 percent, with the population of those over 65 estimated to increase by 50 percent. In addition, approximately one-third of all active physicians will be older than 65 in the next decade, increasing the shortage of physicians due to retirement.

Americans use preventive health services at about half the recommended rate. Despite the benefits of these services, too many people go without required preventative care, often because of financial barriers. Even families with insurance may be deterred by the copayments and deductibles for getting cancer screenings, immunizations for their children and themselves, or well-baby checkups that they need to keep their families healthy.

Health problems are a major drain on the economy, resulting in 69 million workers reporting missed days due to illness each year. This loss of productivity reduces economic output by $260 billion each year. Preventing disease is key to improving America’s health and keeping rising health costs under control. When we invest in prevention, the benefits are broadly shared. Children grow up in communities, homes and families that nurture their healthy development, and adults are productive and healthy, both inside and outside the workplace.

Source: Association of American Medical Colleges, 2018.

Primary Care Providers

In 2016, only 63.8 percent of adults had a personal doctor. In 2017, County Health Rankings reported that Miami-Dade had 80 primary care physicians for every 100,000 individuals, compared to Florida’s rate of 131 providers per 100,000 individuals. The rate for Miami-Dade is half of the national rate of 160 providers per 100,000 individuals. The rate of non-physician primary care providers for Miami-Dade is 85 per 100,000 individuals, which is comparable to both state and national rates. The rate of dentists in Miami-Dade for 2018 was 62 providers per 100,000 individuals, also comparable to state and national rates.

Source: County Health Rankings, 2017; Florida Department of Health, 2017, American Dental Association, 2018; CDC National Center for Health Statistics

Annual Medical Checkups

In 2016, 77.2 percent of adults in Miami-Dade reported having a medical checkup in the past year, compared to 76.5 percent statewide. Over 97.5 percent of adults 65 and older had an annual checkup, compared to 70.7 percent of adults ages 18 to 44. The percentage of adults that had an annual checkup was 85.4 percent for non-Hispanic Whites, 83.1 percent for non-Hispanic Blacks, and 74 percent for Hispanics.

Source: Florida Department of Health: Florida Charts, 2016
Priority 4: Chronic Disease Management

In America, six in 10 individuals live with at least one chronic disease, such as heart disease, cancer, stroke or diabetes. These and other chronic diseases are the leading causes of death and disability in the U.S., Florida and Miami-Dade County.

- **Heart Disease and Stroke**
  Heart disease is the leading cause of death in the U.S., and, combined with stroke and other cardiovascular diseases, contributes to nearly $330 billion in healthcare expenses annually. Heart disease affects 92.1 million lives and accounts for one in seven deaths. The leading risk factors for heart disease and stroke are:
  - High blood pressure
  - High cholesterol
  - Cigarette smoking
  - Diabetes
  - Unhealthy diet and physical inactivity
  - Overweight and obesity

  In 2017, the age-adjusted death rate for heart disease and heart attack in Miami-Dade County was 148.4 and 29.9, respectively, and in Florida, 148.5 and 23.6.

  Source: Healthy People 2020; CDC: Heart Disease and Stroke; American Heart Association: Heart Disease and Stroke Statistics 2018 at a Glance

- **Cancer**
  Cancer is the second-leading cause of death in the United States, exceeded only by heart disease. In 2015, the latest year for which incidence data are available, 1,633,390 new cases of cancer were reported, and 595,919 people died of cancer in the United States. For every 100,000 people, 438 new cancer cases were reported and 159 died of cancer. One of every four deaths in the United States is due to cancer. In Florida, 449 new cancer cases were reported per 100,000 people. In Miami-Dade County, there were 60,982 new cases in 2011-2015. For every 100,000 people, 397 cancer cases were reported.

  In Florida for 2016, the top three cancers by numbers of new cases were:

<table>
<thead>
<tr>
<th>Florida</th>
<th>Miami-Dade County</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Female Breast</td>
<td>121.8</td>
</tr>
<tr>
<td>2. Prostate</td>
<td>91.9</td>
</tr>
<tr>
<td>3. Lung</td>
<td>57.5</td>
</tr>
</tbody>
</table>

  In Florida for 2017, the top 3 cancers by numbers of cancer deaths are:

<table>
<thead>
<tr>
<th>Florida</th>
<th>Miami-Dade County</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Female Breast</td>
<td>37.0</td>
</tr>
<tr>
<td>2. Prostate</td>
<td>17.3</td>
</tr>
<tr>
<td>3. Lung</td>
<td>37.0</td>
</tr>
</tbody>
</table>

  Source: Florida DOH; CDC; Florida CHARTS

- **Breast Cancer**
  Breast cancer is a disease in which the cells in the breast grow out of control. Breast cancer is one of the most common cancers afflicting all women in the U.S., regardless of race or ethnicity. A malignant tumor can invade surrounding tissues or spread to other areas of the body. Breast cancer is predominantly a disease among women. Mammography is the single most effective method of early detection, since it can identify cancer several years before physical symptoms develop. Florida has seen a gradual decline in women having yearly mammograms from 2007 to 2016. In 2016, 60.8 percent of Florida women age 40 and older received a mammogram in the previous year; Miami-Dade County reported 63.6 percent. It is not known exactly what causes breast cancer, but it is known that risk factors are linked to disease, including some factors individuals cannot control. Risk factors for breast cancer include gender, family and genetic factors, age, alcohol intake and maintaining a healthy weight.

  Source: Florida DOH; CDC: Breast Cancer; Florida CHARTS
Prostate Cancer
All men are at risk for prostate cancer. Out of every 100 American men, about 13 will get prostate cancer during their lifetime, and two or three will die. The most common risk factor is age; the older a man is, the greater his chance of getting prostate cancer. The risk increases for African-American men and those with a family history of the disease. In the U.S., the age-adjusted incidence rate in 2016 was 101.8 per 100,000, compared to 91.9 in Florida and 99.1 in Miami-Dade County.

Screening for prostate cancer begins with a blood test called a prostate specific antigen (PSA) test. This test measures the level of PSA in the blood. PSA is a substance made by the prostate. The levels of PSA in the blood can be higher in men who have prostate cancer. The PSA level may also be elevated in other conditions that affect the prostate. In 2016, 49.4 percent of men age 50 and older received a PSA test in the previous two years, compared to 54.9 percent of those in Florida.

Source: CDC: Prostate Cancer; National Cancer Institute: Cancer Statistics; Florida CHARTS

Chronic Obstructive Pulmonary Disease (COPD)
In the U.S., nearly 16 million people suffer from COPD, a group of diseases – including emphysema and chronic bronchitis – that cause airflow blockage and breathing-related problems. In Miami-Dade County, the age-adjusted hospitalization rate due COPD is 17.6 per 10,000 population age 18 and older, compared to 21.1 in Florida.

Source: Florida Agency for Health Care Administration 2015-2017

Diabetes
Diabetes is a chronic health condition that affects how a person's body breaks down food and turns it into energy. People with diabetes are more likely to develop other chronic diseases, such as vision loss and kidney disease. About 90 percent of diabetics have type 2 diabetes, which often can be prevented or delayed through healthy lifestyle changes. In the U.S., 30.3 million people have diabetes and 84.1 million adults have prediabetes. The annual cost attributable to diabetes in Florida in 2013 was estimated at more than $26 million, and a total of 6,947 years of life lost due to the disease.

Source: CDC: Diabetes State Burden Tool Kit

Priority 5: Healthy Lifestyles and Wellness
A combination of lifestyle-related behaviors, such as refraining from smoking, drinking alcohol in moderation, eating healthy, regular exercise and maintaining an optimal weight, is associated with a reduction in mortality by 66 percent. The risk of developing a major noncommunicable disease, the leading cause of death in the world, is decisively affected by lifestyle choices. Smoking, physical inactivity, unhealthy diet, obesity and other lifestyle behaviors are associated with the development of cancer, heart disease, stroke, diabetes and other conditions. The U.S. is one of the wealthiest countries in the world, yet America ranks 31st in the world for life expectancy at birth.

Limited Access to Healthy Foods
An individual has a better chance of maintaining a healthy weight if he/she has access to supermarkets and grocers that offer affordable fresh fruits, vegetables, meats, dairy products and whole-grain foods, and restaurants that serve healthier dishes made from fresh ingredients.

For individuals living in low-income communities, healthy food can be out of reach. Many fast food restaurants have taken the nationwide concern with obesity rates to heart and have introduced healthier choices to the public. Many of the communities that lack healthy food retailers are also oversaturated with fast-food restaurants, liquor stores and other sources of inexpensive, processed food with little to no nutritional value. For decades, community activists have organized around the lack of access to healthy foods as an economic, health and social justice issue. In Miami-Dade County in 2016, 60.9 percent of the population was living within a half-mile of a fast-food restaurant, compared to 33.9 percent in Florida. Additionally, individuals are at a disadvantage when seeking healthy food sources, as only 15.9 percent of Miami-Dade County residents live within a half-mile of a healthy food source, compared to 30.9 percent in Florida. Evidence supports that residing in a food desert is correlated with a high prevalence of overweight, obesity and premature death.

Source: Florida CHARTS
Obesity
Overweight and obesity are key factors in the development of a variety of chronic illnesses. According to the Florida Department of Health, in 2016, a total of 64 percent of Miami-Dade County residents were either overweight (38.7 percent) or obese (25.3 percent), and 63.2 percent of Florida residents were either overweight (35.8 percent) or obese (27.4 percent). Good nutrition and routine physical exercise are important to maintaining a healthy weight.
Source: Florida CHARTS

Tobacco Use
Tobacco use is the leading cause of preventable disease and death in the U.S. According to the Centers for Disease Control and Prevention (CDC), cigarette smoking causes more than 480,000 deaths (one in five of all deaths) in the U.S. annually. Smoking causes cancer, heart disease, stroke, lung diseases, diabetes and chronic obstructive pulmonary disease, which includes emphysema and chronic bronchitis. Smoking also increases risk for tuberculosis, certain eye diseases and problems of the immune system, including rheumatoid arthritis. The CDC reports that cigarette smoking costs the U.S. more than $300 billion each year in total including nearly $170 billion in direct medical costs and an additional $156 billion in lost productivity.

E-cigarettes are still fairly new, so we know little about their potential long-term health effects. But what we do know, e-cigarettes are not safe for youths, young adults, pregnant women or adults who are not currently smokers. However, they have shown to potentially benefit current smokers as a cigarette substitute. This does not mean e-cigarettes are safe. Scientists are still learning, more research will need to be done to determine the impact, and as the number of users continues to grow.
Source: CDC: Smoking and Tobacco Use

Physical Activity
Exercise not only helps people live longer — it helps them live better. In addition to making the heart and muscles stronger and fending off a host of diseases, exercise can also improve a person’s mental and emotional functioning and even bolster their productivity and close relationships. Individuals who are physically active tend to live longer and have a lower risk of developing chronic diseases such as heart disease, stroke, type 2 diabetes, depression and some cancers. Physical activity can also help with weight control. According to the CDC, about one in five adults in the U.S. meets the 2008 Physical Activity Guidelines. In Florida, 34.6 percent of adults meet moderate physical activity recommendations, compared to 29.2 percent in Miami-Dade County. The Healthy People 2020 goal is to increase the proportion of adults who engage in aerobic physical activity for at least 150 minutes per week from the 2008 baseline of 43.5 percent to 47.9 percent.

In Miami-Dade County, 72.1 percent of individuals live within half a mile of a park, which can influence their level of physical activity. For example, inaccessible or nonexistent sidewalks and bicycle/walking paths contribute to sedentary habits. These habits lead to poor health outcomes such as obesity, cardiovascular disease, diabetes and some types of cancer.
Source: CDC: Physical Activity; Florida Charts; County Health Rankings

Sleep
Sleep is an important part of a healthy lifestyle. The American Academy of Sleep Medicine and the Sleep Research Society recommend that adults ages 18-60 sleep at least seven hours a night to promote optimal health and well-being. Sleep plays a key role in maintaining proper growth and repair of the body, as well as key cognitive functions like learning, memory, emotional resilience, problem solving, decision making and emotional control. A lack of sleep can have serious negative effects on health. Ongoing sleep deficiency has been linked to chronic health conditions, including heart disease, kidney disease, high blood pressure and stroke, as well as behavioral health issues such as depression and anxiety, risky behavior and even suicide. More than a third of American adults are not getting enough sleep on a regular basis, according to a new study in the CDC Morbidity and Mortality Weekly Report. In Florida, 34.8 percent of adults report getting fewer than seven hours of sleep on average, while 33 percent of individuals in Miami-Dade County report insufficient sleep.
Source: CDC Morbidity and Mortality Weekly Report; County Health Rankings
Existing Community Resources

The following programs and organizations are community resources that address the priority areas identified in the Baptist Health Homestead Hospital Community Health Needs Assessment.

1. Behavioral Health

Banyan Health Systems
Integrates primary and behavioral health care and provides all people with accessible, quality and compassionate care in order to live their best life.
https://www.BanyanHealth.org/

NAMI
Provides education, support and advocacy for individuals living with mental health challenges and their families.
https://www.NAMI.org

South Florida Behavioral Health Network
Committed to improving the lives of people with mental disorders and addiction problems.
https://sfbhn.org/

The Agape Network
Restores individuals and families to psychological, social, physical and spiritual health.
https://www.theagapenetwork.org/

2. Access to Care

Caring for Miami
The organization’s Project Smile program provides, through collaborative partnerships, access to free dental services to uninsured, low-income families in Miami-Dade County.
https://caringformiami.org/About/Programs/Project-Smile-Miami/

Good News Care Center
Provides free medical services to uninsured, low-income people regardless of race, occupation, national origin or immigrant’s status.
Phone: 305-246-2844

Open Door Health Center
A primary healthcare center dedicated to serving the uninsured poor of South Dade at no cost to them.

St. John Bosco Clinic
Provides access to healthcare to uninsured and underserved children and adults in Miami-Dade County.
https://www.StJohnBoscoClinicMiami.org

3. Availability of Primary Care and Prevention

Baptist Health Primary Care — Baptist Health Medical Group
4. Chronic Disease Management

Baptist Health — Diabetes Prevention Program — Full accreditation by CDC
https://BaptistHealth.net/En/Health-Services/Community-Wellness/Pages/Default.aspx

Tobacco Free Program
http://TobaccoFreeFlorida.com/County/MiamiDade

5. Healthy Lifestyles and Wellness

Baptist Health Community Health programming and free exercise classes
https://BaptistHealth.net/En/Health-Services/Community-Wellness/Pages/Default.aspx
Community Benefits and Next Steps

Community benefits are programs or activities that provide treatment or promote health and wellness as a response to identified community needs and meet at least one of the following objectives: 1) improve access to healthcare services, 2) enhance population health, 3) advance increased general knowledge, and 4) relieve or reduce the burden on government to improve health. At the heart of Baptist Health’s mission is the commitment to caring for the less fortunate or uninsured. Baptist Health is a faith-based organization dedicated to providing high-quality, cost-effective, compassionate healthcare services to all. Baptist Health provided $339 million in total charity care and uncompensated services at cost in fiscal year 2018. Following the development of this report and identification of health need priorities, Baptist Health and the Urban Four hospitals will identify the actions necessary to address the prioritized needs in its service area. As required by the IRS, the implementation plan will also address any needs that will not be met.

In order to collect community feedback on the Community Health Needs Assessment and Implementation Plan reports, a feedback tool will be available on the Baptist Health web page. At the time this report was written, no comments had been received.
**Appendix A — Primary Indicators Prioritization Exercise**

Stakeholders were asked to pretend they were consulting a committee about how to allocate its community benefit contribution of $250,000, considering the health indicator list provided. The instructions were:

- You must make contributions that address the top five leading health indicators for your community.
- You must select at most five health indicators but can select less, if you so choose.
- You must allocate all of your money.
- Once you’ve completed the activity, indicate the individual dollar amounts or percentage of funding next to the health indicator.

<table>
<thead>
<tr>
<th>Leading Health Indicator</th>
<th>Contribution</th>
<th>% of funding (Internal)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Availability of Primary Care and Prevention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barriers to Accessing Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cancer Prevention and Treatment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chronic Disease Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communicable Diseases — STD/HIV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental Care/Oral Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elder Care/Geriatrics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Healthy Lifestyles and Wellness — Exercise &amp; Nutrition Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart Disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal and Child Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behavioral Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neurosciences</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respiratory/Pulmonary Disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Socioeconomic Challenges</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Substance Abuse Treatment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix B — Community Health Needs Assessment Steering Committee Members

Lissette Egues, vice president, Baptist Outpatient Services
Janette Sanchez, vice president, Finance
Joanne Aquilina, vice president, Finance, Bethesda Hospital
Lisa Kronhaus, assistant vice president, Marketing & Public Relations, Bethesda Hospital
Michelle Mejia, assistant vice president, Health Promotion and Strategic Partnerships, West Kendall Baptist Hospital
Nancy Huertas-Savino, assistant vice president, Nursing, Baptist Hospital of Miami
Theodore Feldman, M.D., cardiologist, Baptist Health Medical Group
Rooney Brodie, director, Community Health and Wellness, Baptist Outpatient Services
James Cordell, director, Support Services, Mariners Hospital
Mia P. Corradino, manager, Community Development, South Miami Hospital
Don Parris, director, Health Outcomes and Research
Doug Horwitz, corporate director, Strategic Planning
Elizabeth Wenger, director, Brand Management, Marketing and Communications
Elsa Figueredo, director, Special Programs and Community Relations, Doctors Hospital
Karen Vassell, director, Community Relations, West Kendall Baptist Hospital
Margaret Sotham, director, Community Relations, Homestead Hospital
Vanessa Rodríguez Ramos, manager, Community Health Program
Brian Williams, manager, Strategic Planning
Christine D. Wilson, manager, Community Benefit
Peg Hairston, manager, Special Programs & Community Relations, Miami Cancer Institute
William Arguelles, supervisor, Clinical Research
Andres von Wachter, senior strategic planning analyst
Jacqueline Nordstrom, community relations and event specialist, Doctors Hospital
Liliet Perttierra, MPHc, Florida International University masters in public health intern