

THE MIAMI ACTION PLAN (MAP)
for Access to Health Care

What is the MAP? This document is the product of over three years of research, planning and consensus building by health care consumers, providers, community-based organizations, advocates, educators, business leaders and researchers.

This action plan is meant to serve as the roadmap for improving access to health care for the uninsured and underserved in Miami-Dade County.



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Community Voices Miami, a partnership between Camillus House, the United Way of Miami-Dade and RAND

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Why Miami-Dade County Needs 100% Access to Health Care



One quarter of the people in Miami-Dade County do not have health insurance.

According to the Florida Health Insurance Study of 2000, 450,000 people in Miami-Dade County do not have health insurance. Many people are not eligible for insurance because they are undocumented or because they are working, but their employers either do not offer health insurance or the costs of coverage are prohibitive. Yet most people who are employed earn too much to be eligible for Medicaid or other federal and state insurance programs. In fact, Miami-Dade has a unique problem because it is primarily made up of small businesses, most of which have

less than ten employees. These businesses are much less likely to offer health insurance for their employees. Other people who do not have health insurance may be eligible, but do not apply because they do not understand the process of how to apply, do not believe they are eligible, do not understand the importance of health insurance, and/or fear the stigma attached to having Medicaid. Lack of health insurance also disproportionately affects minority populations. Hispanics, African-Americans and people of other ethnicities are more likely to be uninsured.

Of the 450,000 uninsured in Miami-Dade County, 62% are Hispanic, 25% are Black, 10% are White (non-Hispanic) and 3% are others (including American Indian, Asian and mixed race). And even people who do have some type of health insurance may not access health care services appropriately because they cannot take time off from work, do not have adequate transportation, do not have coverage for oral, mental, pharmaceutical services, and/or fear the unwelcoming treatment in some health care settings.

When people do not have access to health care, they are also less likely to have a medical home, a health care clinic or doctor that they go to for preventative care and follow up. A medical home fosters the relationship of mutual responsibility and trust and provides a place for ongoing treatment. Unfortunately, many people without health insurance use emergency rooms as their only source of health care, waiting until they are very sick to get treatment. This lowers community health outcomes and places more financial burdens on the system. Care provided through emergency rooms and other

urgent-care facilities is often less effective and more costly.

The importance and value of providing access to health care for all is that it benefits everyone in the community. With 100% access, existing health disparities would be reduced and, eventually, eliminated. Monitoring and evaluation of the true costs of healthcare, which are transferred directly or indirectly to each one of us, would be a reality and we would be able to maintain a stable workforce and a healthy population.

Target Populations:

Insured and underinsured, but not accessing care effectively

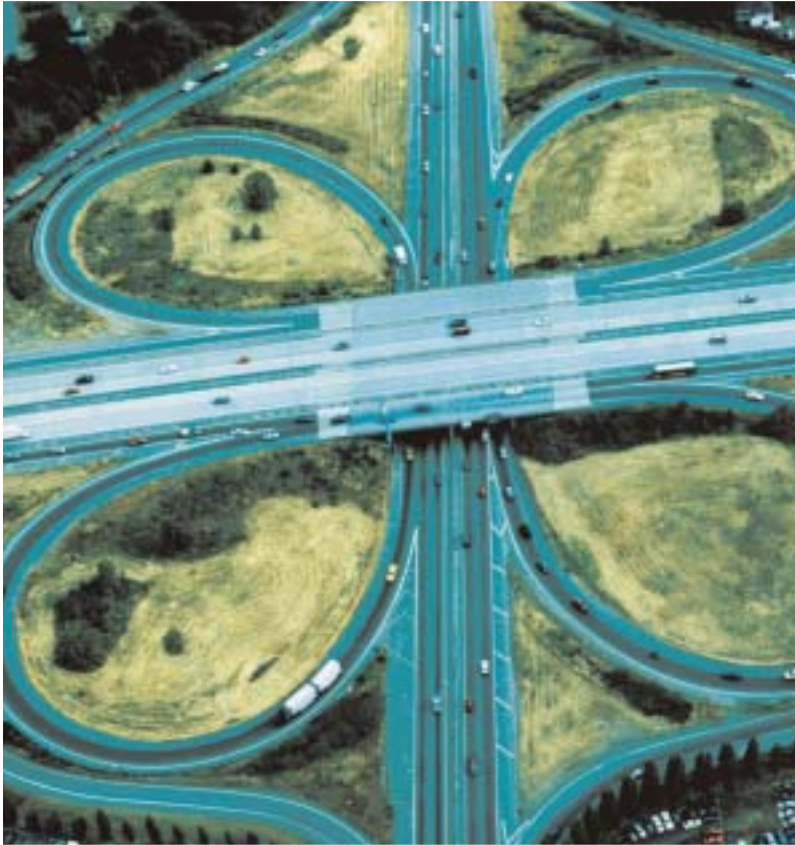
Uninsured, but eligible for state and federal programs

Uninsured and not eligible for state and federal programs



61% of people who are employed in Miami-Dade County do not have health insurance.

The Road to 100% Access to Health Care



In 1998, the W.K. Kellogg Foundation launched Community Voices: Health Care for the Underserved, a five-year, nationwide initiative devoted to improving access to health care for the uninsured and underserved across the country. Thirteen “learning labs,” including Camillus House in Miami, developed proposals unique to their communities. Community Voices Miami partnered with RAND, a nonprofit institution that helps improve policy and decision-making through research and analysis, to provide technical assistance and evaluation for the project. A second, local partner, United

Way of Miami-Dade, spearheaded community engagement efforts across the county. Community Voices Miami has engaged many stakeholders in our Miami-Dade community to determine the barriers to health care and to develop recommendations to eliminate those barriers and improve the present health care delivery system.

In 1999, Community Voices Miami convened a Multi-Agency Consortium made up of health care providers, community-based organizations, advocates, educators, business leaders and researchers who

Over 100 organizations and individuals have paved the way to increase access to health care.



recognized the need to improve access to health care. Members first worked to gather and analyze existing research. They also commissioned two separate reports. The first, "Hospital Care for the Uninsured in Miami-Dade County: Hospital Finance and Patient Travel Patterns," prepared by RAND, analyzes the flow of indigent care funds in Miami-Dade County as well as the travel patterns of the uninsured. The second, "Community Dialogues about Health and Health Care," prepared by the United Way of Miami-Dade, is based on community dialogues

conducted in nineteen "at-risk" neighborhoods. Over seven hundred people shared their personal stories about accessing health care and gave their recommendations for improving the system. Some common access problems included: high co-pays and encounter fees; high insurance premiums; lost wages due to missed work; excessive billing after care was received; past-due bills; lack of transportation; lack of neighborhood-based services; excessive documentation for intake; preexisting conditions limiting insurance availability; and an overall difficulty understanding how to

navigate the health care system. The Multi-Agency Consortium used the information from these reports as well as data that had already been generated from other initiatives to develop comprehensive recommendations to address each and every barrier to health care.

These recommendations became the Miami Action Plan (MAP) for Access to Health Care. Community Voices Miami then took the MAP back to the community to ensure it was comprehensive and to procure additional support. While it is evident

that there is no single, expedient fix-all for the health care system, the ideal system defined in this action plan will provide the framework through which policy and system change can be implemented and evaluated. Though there might not be the resources to complete each action step immediately, the MAP provides a roadmap that will guide Miami-Dade County to becoming the healthiest community it can be.

**"Prevention is key.
Don't wait until we are
already sick to give us care.
We want to stay healthy."**

Community Voices Miami's proposed system of health care will improve individual and community health outcomes by developing a seamless health care system with appropriate, convenient, quality services for people in Miami-Dade County by:

01. Allowing for movement of consumers through the system with planned pathways by facilitating appointment scheduling, referrals and service delivery for all levels of care

02. Maximizing techniques to enroll eligible consumers in existing insurance programs, including those federally, state and locally funded, and involving local businesses in developing coverage mechanisms

03. Developing mechanisms for evaluation, quality improvement and accountability

04. Encouraging preventive care and health maintenance

05. Providing appropriate, culturally competent health care in appropriate, community-based settings

06. Remaining cost-effective for all stakeholders in the community

07. Remaining flexible to accommodate changing population and community needs, such as extended hours of operation, access to oral health, mental health and substance abuse services and transportation



How to use the MAP. Community Voices Miami developed four distinct goals with specific objectives, indicators and action steps. The indicators will be used to monitor and evaluate success. The key actions are the actual work needed to accomplish the objectives. Different lead entities and supporting agencies have committed to sharing their expertise and guiding the process for each key action. These lead entities will continue to report on progress and issues as they arise. This process must be adaptable to adjust to the changing environment.

Guiding Principles

01. Examine multiple solutions to improve access to health care
02. Expand existing programs
03. Focus on expanding primary care and reducing emergency room use
04. Ensure geographic accessibility and cultural competence
05. Identify barriers or perceived barriers to health care
06. Improve collaboration among providers
07. Engage all stakeholders in the process and the solution
08. Examine ways to share costs between levels of government



LUMBERJACK
TRUCK INSURANCE SERVICES

TRAINING, EDUCATION
AND OUTREACH

COVERAGE
FOR ALL

POLICY PLANNING
AND SUSTAINABILITY

ALL ACCESS ROAD

The Goals



01.

Coverage for All

To create and sustain coverage strategies sufficient to give all people in Miami-Dade County access to appropriate, convenient, quality health care services.

02.

Eliminate Non-Insurance Barriers

To remove barriers other than insurance coverage that prohibit people who are uninsured and underserved from accessing health care services.

03.

Training, Education and Outreach

To enable both traditional and nontraditional providers to link people with a full range of services while giving consumers the navigation tools to advocate for their health care needs.

04.

Policy Planning and Sustainability

To assure continuous quality of the health care system through policy planning and sustainability.

Coverage for All

To create and sustain coverage strategies sufficient to give all people in Miami-Dade County access to appropriate, convenient, quality health care services.

“When you have insurance, you can see a doctor when needed. Everyone would like it for free, but we know we have to pay something.”

COMMUNITY DIALOGUE
LITTLE HAITI



Objectives

OBJECTIVE 01.

Increase proportion of people with health insurance

Indicators

- 1.1** Increased number of uninsured people who are newly enrolled in a federal or state insurance plan
- 1.2** Increased number of low-income workers who are newly insured through employment-based health care insurance
- 1.3** Increased percentage of uninsured people who are enrolled in a public benefit health plan, e.g., TrustCare
- 1.4** Expanded benefits in federal, state and local health insurance programs, e.g., increased coverage of pharmaceuticals, behavioral health services and oral health care services

OBJECTIVE 02.

Identify and secure sustainable funding sources sufficient to finance new and existing coverage mechanisms

Indicators

- 2.1** Maintained/increased draw down of federal dollars to match state and local dollars
- 2.2** Completed research to identify possible sources

Key Actions Coverage for All (Continued)

KEY ACTION 01.	KEY ACTION 02.	KEY ACTION 03.
<p>Explore feasibility of expanding health coverage or developing an insurance model for working individuals without health insurance</p> <ul style="list-style-type: none"> a. Involve the employer community in finding feasible and sustainable health insurance for employees b. Research possible financing mechanisms to help alleviate employers' burden c. Provide information and linkages to employers about coverage options to enable them to compare costs, coverage, and benefits d. Research incentives for employers who allow time off work when employees need to access primary care <p>Lead entities: <i>Community Voices Miami/ Camillus House</i></p>	<p>Advocate for changes in eligibility requirements for public programs</p> <ul style="list-style-type: none"> a. Increase Medicaid and KidCare to 200% of the federal poverty level for parents of minor children b. Expand Medicaid and KidCare to include unqualified immigrants c. Expand Medicaid eligibility to adults who are not parents d. Expand Medicaid lock-in from 6 months to 12 months e. Allow Medicare buy-in for early retirees f. Expand home care coverage in Medicaid/Medicare g. Expand Insurance Continuation Programs h. Monitor state and federal legislation and advocate for appropriate changes <p>Lead entities: <i>Children's Service Council, Human Services Coalition</i></p>	<p>Increase capacity of traditional and non-traditional providers to screen for eligibility and help the uninsured to apply for federal, state and local insurance products</p> <ul style="list-style-type: none"> a. Train community-based organizations to screen for eligibility b. Streamline screening process for Medicaid, KidCare and TrustCare c. Develop a uniform screening tool for insurance options d. Outpost enrollment workers closer to uninsured <p>Lead entities: <i>Department of Children and Families, Human Services Coalition, Jackson Health System/Public Health Trust</i></p>

Key Actions Coverage for All (Continued)

KEY ACTION 04.	KEY ACTION 05.	KEY ACTION 06.
<p>Develop new, innovative ways to cover remaining uninsured</p> <ul style="list-style-type: none"> a. Provide every uninsured individual with a medical home b. Promote amnesty programs to allow ineligible immigrants to access federal and state programs c. Stay abreast of innovative programs around the country <p>Lead entities: <i>Community Voices Miami/Camillus House, Jackson Health System/Public Health Trust</i></p>	<p>Develop and advocate for strategies that increase access to prescription drugs for uninsured and underserved</p> <ul style="list-style-type: none"> a. Partner with pharmaceutical companies to develop creative solutions b. Enroll people in prescription assistance programs offered by pharmaceutical companies c. Expand Medicaid/Medicare/KidCare pharmacy coverage <p>Lead entities: <i>Williams and Stern Associates, PhRMA</i></p>	<p>Include mental health and substance abuse services in insurance and coverage models</p> <ul style="list-style-type: none"> a. Advocate for expansion of mental health services in Medicaid/Medicare/KidCare coverage b. Advocate for expansion of substance abuse services in Medicaid/Medicare/KidCare coverage c. Advocate for no disparity between mental and physical health insurance coverage <p>Lead entities: <i>Citrus Health Network, Jackson Health System/Public Health Trust, Partners in Crisis, Community Voices Miami/Camillus House</i></p>

Eliminate Non-Insurance Barriers

To remove barriers other than insurance coverage that prohibit people who are uninsured and underserved from accessing health care services.

“It’s not that there aren’t places to go for these [health] services, but they’re outside our community and people either don’t know how to get there or won’t go on their own.”

COMMUNITY DIALOGUE
COCONUT GROVE



Objectives

OBJECTIVE 01.

Improve geographic access to a more culturally competent system with attention to customer service, hours of operation, and transportation

Indicators

- 1.1 Expanded hours and locations for primary care clinics and other providers, where necessary
- 1.2 Expanded school-based clinic services to include preventive, mental health, oral health care services
- 1.3 Increased number of cultural competency trainings at health care settings
- 1.4 Increased number of customer service trainings at health care settings
- 1.5 Increased capacity for health education and promotion programs to provide links to community resources
- 1.6 Improved transportation to centers
- 1.7 Increased customer satisfaction

OBJECTIVE 02.

Create a coordinated system that facilitates appointment scheduling, referrals and follow-up for all levels of care

Indicators

- 2.1 Decreased waiting times for appointments
- 2.2 Decreased waiting time for transferred medical records
- 2.3 Created a sustainable system

Objectives Eliminate Non-Insurance Barriers (Continued)

OBJECTIVE 03.

Increase proportion of uninsured and underinsured consumers with access to behavioral health services

Indicators

- 3.1 Decreased number of consumers who report difficulty accessing behavioral health services
- 3.2 Developed behavioral health care programs, which are connected to the coordinated system of care
- 3.3 Increased number of psychiatrists, psychologists and other mental health professionals willing to accept uninsured, underinsured or Medicaid/Medicare patients

OBJECTIVE 04.

Increase proportion of uninsured or underinsured consumers with access to oral health services

Indicators

- 4.1 Decreased number of consumers who report difficulty accessing oral health care services
- 4.2 Decreased waiting times for oral health care services
- 4.3 Increased number of dentists providing oral health services to uninsured, underinsured, and Medicaid populations
- 4.4 Increased number of school-based clinics with oral health services
- 4.5 Improved linkages between urgent/emergency care settings and oral health care providers

Key Actions Eliminate Non-Insurance Barriers (Continued)

KEY ACTION 01.	KEY ACTION 02.	KEY ACTION 03.
<p>Engage the community in a facilitated dialogue about the need for improved access to primary/preventive services, including mental health, substance abuse and oral health services</p> <ul style="list-style-type: none"> a. Public education campaign b. Community Dialogues c. Mental Health Forum d. Substance Abuse Forum e. Oral Health Forum f. Further research <p>Lead entities: <i>Alliance for Human Services, Human Services Coalition</i></p>	<p>Organize and coordinate behavioral health providers to determine needs and define strategies to increase access to mental health and substance abuse services</p> <ul style="list-style-type: none"> a. Mental health b. Substance abuse <p>Lead entities: <i>Citrus Health Network, Partners in Crisis, Health Choice Network, South Florida Providers Coalition, Community Voices Miami/Camillus House</i></p>	<p>Raise awareness within the oral health profession about the need for care to the uninsured and underserved, and expand the number of dentists who will see uninsured and underserved patients through incentives that decrease paperwork and increase reimbursement</p> <ul style="list-style-type: none"> a. Advocate for higher reimbursement from Medicaid b. Determine how to better coordinate system so dentists can more easily provide care to uninsured and underserved c. Create new mechanisms to fund and streamline access for providers and patients <p>Lead entities: <i>Miami-Dade Department of Health, Health Choice Network, Community Voices Miami/Camillus House</i></p>

Key Actions Eliminate Non-Insurance Barriers (Continued)

KEY ACTION 04.	KEY ACTION 06.	KEY ACTION 07.
<p>Continue community assessment to determine needs of consumers and implement the changes</p> <p>a. Expand feedback programs for uninsured consumers</p> <p>Lead entities: <i>Alliance for Human Services</i></p>	<p>Improve disease management services</p> <p>a. Link uninsured consumers with medical homes</p> <p>b. Decrease waiting times for primary care services and specialty referrals</p> <p>c. Follow-up for consumers with chronic health problems</p> <p>Lead entities: <i>Health Choice Network, Jackson Health System/Public Health Trust</i></p>	<p>Increase emphasis on school-based health programs</p> <p>a. Expand services at school-based clinics</p> <p>b. Implement school nurse programs in all Miami-Dade County schools</p> <p>c. Train nurses to screen children for eligibility for insurance programs</p> <p>d. Advocate for state and federal legislation to provide grants to create statewide, technical assistance networks for school-based health programs</p> <p>Lead entities: <i>Dade County Public Schools Division of Full Service Schools, University of Miami School of Nursing, Miami-Dade County Department of Health, Children's Service Council</i></p>
<p>KEY ACTION 05.</p> <p>Create a cost-effective, coordinated system for appointment scheduling, referrals and service delivery for all levels of care</p> <p>a. Research best practices and models around the country</p> <p>b. Examine all possible funding sources</p> <p>Lead entities: <i>Health Choice Network, Jackson Health System/Public Health Trust</i></p>		

Key Actions Eliminate Non-Insurance Barriers (Continued)

KEY ACTION 08.	KEY ACTION 10.	KEY ACTION 11.
<p>Improve cultural competency at health care settings</p> <p>a. Implement cultural competency training in medical schools, nursing schools, and dental schools</p> <p>b. Implement or expand cultural competency trainings in hospitals, primary care clinics, and community-based organizations</p> <p>Lead entities: <i>Alliance for Human Services, Human Services Coalition</i></p>	<p>Build linkages between primary care centers, diagnostic centers, specialty care and hospitals</p> <p>a. Expand shared information system</p> <p>i. <i>Timely transfer of medical records-transfer and/or sharing of records</i></p> <p>ii. <i>Follow government regulations with respect to consumer confidentiality</i></p> <p>iii. <i>On-line referral access/Web site data sharing</i></p> <p>iv. <i>Patient tracking</i></p>	<p>Expand transportation to providers</p> <p>a. Expand transportation capacity at clinics and health care settings</p> <p>b. Expand county's transportation system</p> <p>c. Research other funding options</p> <p>d. Advocate for legislation to expand transportation funding</p> <p>Lead entities: <i>PACT, Alliance for Aging</i></p>
<p>KEY ACTION 09.</p> <p>Improve customer service at health care settings</p> <p>a. Implement or expand customer service trainings in hospitals, primary care clinics, and community-based organizations</p> <p>Lead entities: <i>Alliance for Human Services, Health Choice Network</i></p>	<p>b. Minimize duplication of services</p> <p>c. Streamline intake and referral processes to ensure continuum of care</p> <p>d. Provide appropriate health care in appropriate, community-based settings</p> <p>Lead entities: <i>Health Choice Network, Jackson Health System/Public Health Trust</i></p>	

Training, Education and Outreach

To enable both traditional and nontraditional providers to link people with a full range of services while giving consumers the navigation tools to advocate for their health care needs.

“ If we enable neighborhoods to provide the services that are lacking, I believe we would have more prevention, safer and healthier communities.”

COMMUNITY DIALOGUE
NORTH BEACH



Objectives

OBJECTIVE 01.

Improve capacity of health care providers to link consumers to all community resources that impact health

Indicators

- 1.1 Created and utilized a community-wide information and referral system for health and human services
- 1.2 Increased percentage of health care providers including volunteers, para professionals and professionals trained to use the referral system

OBJECTIVE 02.

Improve capacity of community-based organizations to link consumers to resources

Indicators

- 2.1 Increased participation in the health care system from community-based organizations, e.g., faith-based organizations, businesses, schools
- 2.2 Implemented trainings for community-based organizations regarding how to help link consumers with health care services
- 2.3 Implemented training for community-based organizations around general public health issues

Objectives Training, Education and Outreach (Continued)

OBJECTIVE 03.

Improve understanding of when and how to utilize emergency services, versus primary and urgent care services

Indicators

- 3.1 Decreased percentage of people who use the emergency room with non-emergent needs

OBJECTIVE 04.

Increase understanding of how to navigate the health care system

Indicators

- 4.1 Decreased percentage of uninsured who express confusion of how to properly access the health care system
- 4.2 Increased number of health care providers and community-based organizations able to explain to clients how to navigate the system
- 4.3 Created and disseminated navigation tools to the community
- 4.4 Implemented media campaign to educate the community on how to properly access the health care system

Key Actions Training, Education and Outreach (Continued)

KEY ACTION 01.	KEY ACTION 02.	KEY ACTION 03.
<p>Expand efforts to include non-traditional organizations, such as neighborhood groups, faith-based organizations, businesses and schools, in increasing access to health care</p> <p>a. Outreach to non-traditional organizations to explain the importance of getting involved to increase access to health care</p> <p>Lead entities: <i>Alliance for Human Services, Dade County Public Schools, Health Choice Network</i></p>	<p>Develop a community-wide information and referral mechanism for health and human services accessible by traditional and non-traditional providers</p> <p>a. 211 line b. Resource guides</p> <p>Lead entities: <i>Human Services Coalition, Alliance for Human Services</i></p>	<p>Educate uninsured and underserved consumers around public health issues, such as proper use of the emergency room, and preventive health care</p> <p>a. Public service announcements b. Train traditional and non-traditional organizations to better educate the people they serve about appropriate access to health care</p> <p>Lead entities: <i>Alliance for Human Services, Health Choice Network, Jackson Health System/Public Health Trust</i></p>

Policy Planning and Sustainability

To assure continuous quality of the health care system through policy planning and sustainability.

“We need to encourage greater collaboration between the health care system, community organizations and policy makers...to effect health care policy changes that are responsive to community concerns.”

COMMUNITY DIALOGUES
ABOUT HEALTH AND HEALTH CARE



Objectives

OBJECTIVE 01.

Convene and empower an independent body to continuously monitor and evaluate the health care system for the uninsured and underserved in Miami-Dade County to determine if the policies and actions to increase access to health care are sufficient, effective, and efficient. The body will also be empowered to report results and recommendations to the County Commission, other funding and/or planning boards, health care providers and the community in order to implement necessary policy changes that are responsive to the community's needs

Indicators

- 1.1 Independent body is established
- 1.2 The health care system for the uninsured and underserved is consistently monitored and evaluated and the results and recommendations are reported to the County Commission and other funding or planning boards
- 1.3 Appropriate health policy changes are adopted to make the system accountable and responsive to community needs
- 1.4 Monitoring and evaluation reports that include feedback and suggestions for improvement are systematically presented to health care providers who work with uninsured and underserved patients

OBJECTIVE 02.

Monitor local, state, and federal policies that impact health, and advocate for appropriate recommendations

Indicators

- 2.1 Policy targets are shared with legislative session every year
- 2.2 Appropriate health policies are adopted

OBJECTIVE 03.

Collect and disseminate best practices for accessing health care services to providers and the public

Indicators

- 3.1 New technologies and research are consistently evaluated and disseminated to providers and the public

Key Actions Policy Planning and Sustainability (Continued)

KEY ACTION 01.

The independent body will be empowered to continuously monitor and evaluate the health care system for the uninsured and underinsured in Miami-Dade County, to determine if policies and actions to increase access to health care are sufficient, effective, and efficient. The results and recommendations will be reported to the County Commission, other funding and planning bodies, health care providers, and the community to implement new policies and programs where necessary

- a. Determine benchmarks to evaluate quality assurance and cost-effectiveness
- b. Continuously monitor and evaluate all organizations funded with public dollars working to increase access to health care for the uninsured and underserved to ensure that the programs are efficient, effective, and responsive to consumer needs

- c. Monitor and evaluate where county funds for health care are spent and guide future expenditure based on determined needs of the community
- d. Continuously evaluate the linkages between the primary care clinics and the hospitals to determine if they are as seamless as possible
- e. Consult with community stakeholders to gauge progress of policy development and implementation

Lead entities: *Community Voices Miami/Camillus House*

KEY ACTION 02.

Research sustainable funding mechanisms to improve safety nets

Lead entities: *Health Choice Network, Community Voices Miami/Camillus House*

KEY ACTION 03.

Monitor and advocate for federal and state policy changes to increase access to health care

Lead entities: *Human Services Coalition, Health Choice Network*

KEY ACTION 04.

Consistently collect and disseminate new research to providers and the public

Lead entities: *Community Voices Miami/Camillus House*



ACCESS RD

Community Dialogue Partners

We wish to acknowledge the contribution of more than 700 people who participated in the community engagement process through community dialogues, surveys and key informant interviews. Without their voices, this report would not have been possible.

Opa Locka

Opa-Locka Elementary School
Front Porch Initiative
Youth Co-Op
Christ Crusaders
Peaceful Missionary Baptist Church
Miami Centennial Children's Project

North Miami

Gratigny Elementary School
St. James Catholic Church
Haitian American Nurses Association
Haitian American Youth of Tomorrow
Haitian Organization of Women

Overtown; Little Haiti; Wynwood

Lindsey Hopkins Technical Education Center
Notre Dame D'Haiti Catholic Church
Haitian Organization of Women
Borinquen Community Health Center

Little Havana/East Little Havana

Abriendo Puertas
Little Havana Activities and Nutrition Center
Dr. Raphael A. Peñalver Clinic
San Juan Bosco Catholic Church
East Little Havana Family Council
Youth Co-Op

Miami Shores

Catholic Charities Services for the Elderly

Coconut Grove

St. Alban's Child Enrichment Center
Family and Youth Intervention Center
Coconut Grove Partners for Community Advancement
Helen B. Bentley Family Health Center
Coconut Grove Local Development Corp.

South Miami

St. Alban's Child Enrichment Center
Rosa Lee Wesley Health Center

Kendall

Baptist Hospital
St. Timothy's Catholic Church
Catholic Charities
Boys and Girls Club of Miami, Inc.
Girl Scout Council of Tropical Florida, Inc.

Homestead/Florida City

Laura Saunders Elementary School
Florida City/Homestead Neighborhood Center
Family Resource Center of South Florida
South Dade Haitian United Methodist Mission
Haitian Organization of Women

South Dade

Office of Commissioner Dennis C. Moss
Community Health of South Dade, Inc. (CHI)
Richmond-Perrine Optimist Club, Inc.
Greater Goulds Optimist Club

Sweetwater

Office of the Mayor of Sweetwater
Paul Bell Middle School
Families-R-Us Health Center

Hiialeah; Medley

Youth Co-Op (Hiialeah)
Youth Co-Op Charter School
Hispanic Coalition
Children's Psychiatric Center

Leaders & Partners

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Academy for Better Communities

Agency for Health Care Administration

Alliance for Aging

Alliance for Human Services

American Med-Card

Archdiocese of Miami

Area Health Education Center

Ayuda, Inc.

Baptist Health Systems

Bayview Community Mental Health Center

Biz Link

Borinquen Community Health Center

Camillus Health Concern

Children's Home Society of Florida

Children's Services Council

Citrus Health Network, Inc.

Community Committee for Developmental Handicaps

Community Health of South Dade, Inc. (CHI)

Dade Community Foundation

Department of Insurance, Miami Service Office

Donated Dental Services

Douglas Gardens Community Mental Health

East Coast District Dental Society

Economic Opportunity Family Health Center

Florida City/Homestead Neighborhood Center

Florida Department of Children & Families

Florida Nurses Association District 5

Greater Bethel A.M.E. Church

Greater Miami Chamber of Commerce

Health Choice Network

Health Council of South Florida

Health Foundation of South Florida

Health Policy Authority

Helen B. Bentley Family Health Center

Homestead Hospital

Human Services Coalition

Jackson Health Systems/Public Health Trust

Jewish Family Services

Little Havana Activities & Nutrition Centers

Lock Towns Community Mental Health Center

Lutheran Services Florida, Inc.

Miami Beach Community Health Center

Miami Behavioral Community Mental Health

Miami Children's Hospital

Miami-Dade Community Council

Miami-Dade County Department of Health

Miami-Dade County Homeless Trust

Miami-Dade County League of Cities

Miami-Dade County Medical Association

Miami-Dade County Public Schools

Miami-Dade County Dept. of Human Services

Miami-Dade Healthy Start Coalition

Miami-Dade Housing Agency

Miami Heart Research Institute

New Horizons Community Mental Health Center

New Shiloh Missionary Baptist Church

Parent to Parent

South Florida Hospital & Health Care Assoc.

Strategic Partners Consulting

Switchboard of Miami

The Village

Trinity Cathedral

United Cerebral Policy

University of Miami Department of Pediatrics

University of Miami Mailman Center

University of Miami School of Medicine

University of Miami School of Nursing

Y.W.C.A. of Greater Miami

THE MIAMI ACTION PLAN (MAP)
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