

CHANGING THE PARADIGM HANDOUT

8/20/2025

The Problem: Inappropriate ER Utilization 🏥

Historically, many individuals, in particular the uninsured, have used hospital emergency rooms (ERs) for non-urgent primary care needs. This practice is problematic because it:

- **Overburdens** ER staff and resources, which are meant for life-threatening emergencies.
 - **Increases healthcare costs** for both patients and the system, as ER visits are more expensive than regular doctor's office visits.
 - **Increases a hospital's uncompensated care** as many of the uninsured are able to afford the high price of emergency room services.
 - Can lead to **longer wait times** for all patients, including those with critical conditions.
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The Solution: Public-Private Partnerships and the PCMH Model 🤝

To address this issue, a strategy was developed that leverages **public-private partnerships**. This involves collaboration between government agencies (public sector) and private healthcare organizations, non-profits, and businesses (private sector).

A central component of this strategy is the promotion of the **patient-centered medical home (PCMH)** model. A PCMH is a team-based approach to healthcare led by a personal physician who provides continuous and coordinated care throughout a patient's life. The goal is to maximize health outcomes. Key features of a PCMH include:

- **Personalized Care:** Each patient has a dedicated primary care provider.
 - **Coordinated Care:** The medical home coordinates all aspects of a patient's care, including specialty referrals, hospital admissions, and follow-up.
 - **Accessibility:** Patients have enhanced access to their healthcare team through various means, such as extended hours and telehealth.
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Return on Investment

The city's investment of \$1.5 million in these programs has led to remarkable savings of up to \$157.5 million for taxpayers, representing a **\$105 return for every dollar invested**. This is achieved by reducing the utilization of hospital emergency rooms, by the uninsured, for relatively minor conditions that can be treated by a primary care physician. The data shows that 76% of uninsured individuals served are kept out of local ERs for these non-urgent issues.

-Key Collaborations

- **JaxCareConnect** acts as the "front door," helping uninsured neighbors navigate the healthcare system. It connects them to primary care providers and other resources, addressing the Social Determinants of Health such as a lack of transportation, food insecurity, language barriers, health care literacy, employment resources and health insurance sign-ups. In addition to securing primary care within the Duval Safety Net Collaborative (six safety net primary care clinics plus a specialty physician volunteer network managed by WeCareJax), JaxCareConnect has also been successful in securing pathways to care outside the safety net (Medicaid, Affordable Care Act, UF Health city contract program) for 28% of its clients, exceeding an initial goal of 20%.
- **Healthlink JAX**, a partnership with the city and other organizations, offers free, 24/7 telehealth access to a provider for uninsured Duval County residents. This service provides on-demand virtual visits and connects patients with local clinics and community resources, further reducing the need for non-emergency ER visits.
- Duval Safety Net Collaborative partners **Sulzbacher, AGAPE, MASS Clinic, Community Health Outreach, Mission House, Volunteers in Medicine, and WeCareJax**, also play a crucial role by providing medical case management, assistance with insurance applications, and support for patients with complex conditions such as cancer. When public options are not available, this means securing charity care from a hospital partner like Baptist MD Anderson, Ascension St. Vincents, and Mayo Clinic; last year hospitals and physician volunteers donated \$23 Million in specialty care to patients in the safety net.

Broader Community Impact

Beyond direct healthcare savings, these initiatives have a ripple effect on the community. By reducing medical debt—which accounts for two-thirds of all bankruptcies—they help prevent homelessness, crime, and foreclosures. The programs stabilize families and individuals, ensuring they can go to work and school, which is vital for the local workforce. The city's continued investment in this work has been recognized and is seen as a key component of the City Council's Strategic Plan and was specifically cited in the report of the Council's own **Critical Quality of Life Issues** special committee.