University Medical Center New Orleans

Community Health Needs Assessment
October 2015





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Introduction —

University Medical Center New Orleans, A 446-bed acute care hospital located in New Orleans, LA, in response to its community commitment, contracted with Tripp Umbach to facilitate a comprehensive Community Health Needs Assessment (CHNA) between March 2015 and October 2015. The CHNA identifies the needs of residents served by University Medical Center New Orleans. As a partnering hospital of a regional collaborative effort to assess community health needs, University Medical Center New Orleans collaborated with 15 hospitals and other community-based organizations in the region during the CHNA process. The following is a list of organizations that participated in the CHNA process in some way:

- Louisiana Office of Public Health
- Humana Louisiana
- Director Medical Student Clerkship
- Louisiana Public Health Institute
- Acadian Ambulance
- Delgado Community College
- Pickering and Cotogno
- Nouveau Marc Residential Retirement Living
- Kenner Council on Aging and Parks and Recreation
- City of Kenner
- Children's Special Health Services
- Methodist Health Foundation
- City of New Orleans
- Catholic Charities
- LSU Health Science Center, Allied Health
- Tulane University School of Medicine
- Jefferson Parish
- NO/AIDS Task Force
- Institute of Women and Ethnic Studies
- PACE Greater New Orleans
- New Wine Fellowship
- Jefferson Business Council
- Arc of St. Charles
- Healthy Start New Orleans
- Chief HIV Division of Infectious Disease
- The McFarland Institute

- Prevention Research Center at Tulane
 University
- Greater New Orleans Foundation
- Susan G. Komen, New Orleans
- Jefferson Parish Commissioner
- Ochsner Health System
- Cancer Association of Greater New Orleans (CAGNO)
- Fifth District Savings and Loan
- Print All
- West Jefferson Civic Coalition
- Boys and Girls Club Westbank
- The Metropolitan Hospital Council of New Orleans (MHCNO)
- Ochsner Medical Center
- Ochsner Baptist Medical Center
- Ochsner Medical Center Kenner
- Ochsner St. Anne General Hospital
- Ochsner Medical Center Westbank
- St. Charles Parish Hospital
- Children's Hospital of New Orleans
- Touro Infirmary
- University Medical Center
- East Jefferson General Hospital
- West Jefferson Medical Center
- Slidell Memorial Hospital
- St. Tammany Parish Hospital

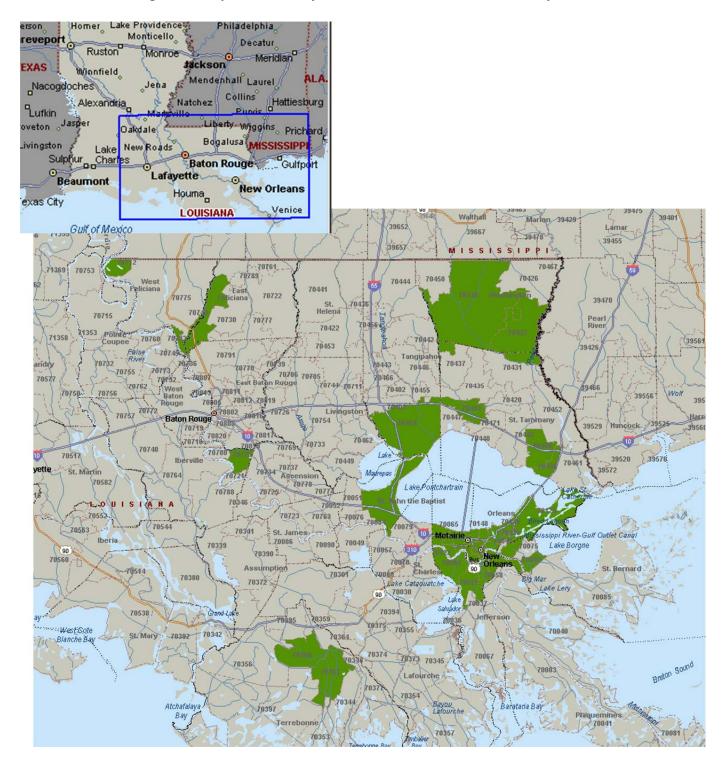
This report fulfills the requirements of the Internal Revenue Code 501(r)(3); a statute established within the Patient Protection and Affordable Care Act (ACA) requiring that non-profit hospitals conduct CHNAs every three years. The CHNA process undertaken by University Medical Center New Orleans, with project management and consultation by Tripp Umbach, included extensive input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of public health issues, data related to vulnerable populations and representatives of vulnerable populations served by the hospital. Tripp Umbach worked closely with leadership from University Medical Center New Orleans and a project oversight committee to accomplish the assessment.

Community Definition

While community can be defined in many ways, for the purposes of this report, the **University Medical Center New Orleans (UMCNO)** community is defined as 45 zip codes that hold a large majority (80%) of the inpatient discharges for the hospital (See Table 1 and Figure 1).

Table 1. University Medical Center New Orleans Study Area Definition – Zip Codes						
City	Zip Code	Parish	City	Zip Code	Parish	
Jackson	70748	East Feliciana Parish	New Orleans	70119	Orleans Parish	
Saint Gabriel	70776	Iberville Parish	New Orleans	70122	Orleans Parish	
Metairie	70001	Jefferson Parish	New Orleans	70124	Orleans Parish	
Metairie	70002	Jefferson Parish	New Orleans	70125	Orleans Parish	
Metairie	70003	Jefferson Parish	New Orleans	70126	Orleans Parish	
Metairie	70005	Jefferson Parish	New Orleans	70127	Orleans Parish	
Metairie	70006	Jefferson Parish	New Orleans	70128	Orleans Parish	
Gretna	70053	Jefferson Parish	New Orleans	70129	Orleans Parish	
Gretna	70056	Jefferson Parish	New Orleans	70130	Orleans Parish	
Harvey	70058	Jefferson Parish	New Orleans	70131	Orleans Parish	
Kenner	70062	Jefferson Parish	Chalmette	70043	St. Bernard Parish	
Kenner	70065	Jefferson Parish	Violet	70092	St. Bernard Parish	
Marrero	70072	Jefferson Parish	LA Place	70068	St. John the Baptist Parish	
Westwego	70094	Jefferson Parish	Covington	70433	St. Tammany Parish	
New Orleans	70121	Jefferson Parish	Slidell	70458	St. Tammany Parish	
New Orleans	70123	Jefferson Parish	Slidell	70460	St. Tammany Parish	
New Orleans	70112	Orleans Parish	Ponchatoula	70454	Tangipahoa Parish	
New Orleans	70113	Orleans Parish	Houma	70360	Terrebonne Parish	
New Orleans	70114	Orleans Parish	Houma	70363	Terrebonne Parish	
New Orleans	70115	Orleans Parish	Bogalusa	70427	Washington Parish	
New Orleans	70116	Orleans Parish	Franklinton	70438	Washington Parish	
New Orleans	70117	Orleans Parish	Angola	70712	West Feliciana Parish	
New Orleans	70118	Orleans Parish				

Figure 1. Map of University Medical Center New Orleans Study Area



Consultant Qualifications

University Medical Center New Orleans contracted with Tripp Umbach, a private healthcare consulting firm headquartered in Pittsburgh, Pennsylvania to complete the CHNA. Tripp Umbach is a recognized national leader in completing CHNAs, having conducted more than 300 CHNAs over the past 25 years; more than 75 of which were completed within the last three years. Today, more than one in five Americans lives in a community where Tripp Umbach has completed a CHNA.

Paul Umbach, founder and president of Tripp Umbach, is among the most experienced community health planners in the United States, having directed projects in every state and internationally. Tripp Umbach has written two national guide books¹ on the topic of community health and has presented at more than 50 state and national community health conferences. The additional Tripp Umbach CHNA team brought more than 30 years of combined experience to the project.

¹ A Guide for Assessing and Improving Health Status Apple Book:

http://www.haponline.org/downloads/HAP_A_Guide_for_Assessing_and_Improving_Health_Status_Apple_Book_1993.pdf

1993.pdf and

Project Mission & Objectives

The mission of the University Medical Center New Orleans CHNA is to understand and plan for the current and future health needs of residents in its community. The goal of the process is to identify the health needs of the communities served by the hospital, while developing a deeper understanding of community needs and identifying community health priorities. Important to the success of the community needs assessment process is meaningful engagement and input from a broad cross-section of community-based organizations, who are partners in the CHNA.

The objective of this assessment is to analyze traditional health-related indicators, as well as social, demographic, economic, and environmental factors and measure these factors with previous needs assessments and state and national trends. Although the consulting team brings experience from similar communities, it is clearly understood that each community is unique. This project was developed and implemented to meet the individual project goals as defined by the project sponsors and included:

- Ensuring that community members, including underrepresented residents and those with a broad-based racial/ethnic/cultural and linguistic background are included in the needs assessment process. In addition, educators, health-related professionals, media representatives, local government, human service organizations, institutes of higher learning, religious institutions and the private sector will be engaged at some level in the process.
 Obtaining information on the health status and socio-economic/environmental factors related to the health of residents in the community.
 Developing accurate comparisons to previous assessments and the state and national baseline of health measures utilizing most current validated data.
 Utilizing data obtained from the assessment to address the identified health needs of the service area.
 Providing recommendations for strategic decision-making, both regionally and locally, to address the identified health needs within the region to use as a benchmark for future assessments.
- Developing a CHNA document as required by the Patient Protection and Affordable Care Act (ACA).

Methodology-

Tripp Umbach facilitated and managed a comprehensive CHNA on behalf of University Medical Center New Orleans — resulting in the identification of community health needs. The assessment process gathered input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge and expertise of public health issues. The needs assessment data collection methodology was comprehensive and there were no gaps in the information collected.

Key data sources in the CHNA included:

- Community Health Assessment Planning: A series of meetings was facilitated by the consultants and the CHNA oversight committee consisting of leadership from University Medical Center New Orleans and other participating hospitals and organizations. This process lasted from March 2015 until August 2015.
- Secondary Data: Tripp Umbach completed comprehensive analysis of health status and socio-economic environmental factors related to the health of residents of the University Medical Center New Orleans community from existing data sources such as state and county public health agencies, the Centers for Disease Control and Prevention, County Health Rankings, Truven Health Analytics, CNI, Healthy People 2020, and other additional data sources. This process lasted from March 2014 until August 2015.
- Interviews with Key Community Stakeholders: Tripp Umbach worked closely with the CHNA oversight committee to identify leaders from organizations that included:

 1) Public health expertise; 2) Professionals with access to community health related data; and 3) Representatives of underserved populations (i.e., seniors, low-income residents, Latino(a) residents, Vietnamese residents, youth, residents with disabilities, and residents that are uninsured). Such persons were interviewed as part of the needs assessment planning process. A total of 36 interviews were completed with key stakeholders in the University Medical Center New Orleans community. A complete list of organizations represented in the stakeholder interviews can be found in the "Key Stakeholder Interviews" section of this report. This process lasted from April 2015 until August 2015.
- Survey of vulnerable populations: Tripp Umbach worked closely with the CHNA oversight committee to ensure that community members, including underrepresented residents, were included in the needs assessment through a survey process. A total of 709 surveys were collected in the University Medical Center New Orleans service area, which provides a +/- 3.66 confidence interval for a 95%

confidence level. Tripp Umbach worked with the oversight committee to design a 32 question health status survey. The survey was offered in English, Spanish, and Vietnamese. The survey was administered by community-based organizations providing services to vulnerable populations in the hospital service area. Community-based organizations were trained to administer the survey using hand-distribution. Surveys were administered onsite and securely mailed to Tripp Umbach for tabulation and analysis. Surveys were analyzed using SPSS software. Geographic regions were developed by the CHNA oversight committee for analysis and comparison purposes:

- ✓ Eastbank Region: the East banks of Jefferson Parish, Orleans Parish, Plaquemines Parish, St. Charles Parish, and St. John Parish.
- ✓ Westbank Region: the West banks of Jefferson Parish, Orleans Parish, Plaquemines Parish, St. Charles Parish, and St. John Parish.
- ✓ Southeast Louisiana (SELA) Region: all parishes included in the study area (Ascension, East Baton Rouge, Iberville, Jefferson, Lafourche, Livingston, Orleans, Plaquemines, St. Bernard, St. Charles, St. John the Baptist, St. Tammany, Terrebonne, and Washington parishes).

Vulnerable populations were identified by the CHNA oversight committee and through stakeholder interviews. Vulnerable populations targeted by the surveys were residents that were: seniors, low-income (including families), uninsured, Latino, chronically ill, had a mental health history, homeless, literacy challenged, limited English speaking, women of child bearing age, diabetic, and residents with special needs. This process lasted from May 2014 until July 2015.

There are several inherent limitations to using a hand-distribution methodology that targeted medically vulnerable and at-risk populations. Often, the demographic characteristics of populations that are considered vulnerable populations are not the same as the demographic characteristics of a general population. For example, vulnerable populations, by nature, may have significantly less income than a general population. For this reason the findings of this survey are not relevant to the general population of the hospital service area. Additionally, hand-distribution is limited by the locations where surveys are administered. In this case Tripp Umbach asked CBOs to self-select into the study and as a result there are several populations that have greater representation in raw data (i.e., low-income, women, etc.). These limitations were unavoidable when surveying low-income residents about health needs in their local communities.

Identification of top community health needs: Top community health needs were identified and prioritized by community leaders during a regional community health needs identification forum held on August 5, and 7, 2015. Consultants presented CHNA findings from analyzing secondary data, key stakeholder interviews, and surveys. Community leaders discussed the data presented, shared their visions and plans for community health improvement in their communities, and identified and prioritized the top community health needs in the University Medical Center New Orleans community.

☐ Final Community Health Needs Assessment Report: A final report was developed that summarizes key findings from the assessment process, including the priorities set by community leaders.

Key Community Health Priorities

Louisiana is a state that has not expanded Medicaid, a key component of health reform that extends Medicaid eligibility to a greater population of residents. Many health needs identified in this assessment relate to the lack of Medicaid expansion and the resulting restricted access to health services. Community leaders reviewed and discussed existing data, in-depth interviews with community stakeholders representing a cross-section of agencies, and survey findings presented by Tripp Umbach in a forum setting that resulted in the identification and prioritization of five community health priorities in the University Medical Center New Orleans community. Community leaders identified the following top community health priorities that are supported by secondary and/or primary data: 1) Access to health services; 2) Behavioral health and substance abuse; 3) Resource awareness and health literacy; 4) Access to healthy options (Westbank communities only); and 5) Behaviors that impact health (Westbank communities only). A summary of the top needs in the University Medical Center New Orleans community follows:

INCREASING ACCESS TO HEALTHCARE

Underlying factors identified by secondary data and primary input from community leaders, community stakeholders, and resident survey respondents:

- 1. Residents need solutions that reduce the financial burden of health care.
- Provider to population ratios that are not adequate enough to meet the need.
- 3. Need for care coordination.
- 4. Limited access to healthcare as a result of transportation issues.

Increasing access to healthcare is identified as the number one community health priority by community leaders. Access to health care is an ongoing health need in rural areas across the U.S. Apart from issues related to insurance status and the Medicaid waiver², access to health care in the hospital service area is limited by provider to population ratios that cause lengthy wait times to secure appointments, location of providers, transportation issues, limited awareness of residents related to the location of health services, as well as preventive practices.

Findings supported by study data:

Residents need solutions that reduce the financial burden of health care:

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² In 2015, there are multiple Medicaid Waivers operating in Louisiana. Residents are qualify for one of the Medicaid Waivers whereby receiving health services from health providers which accept the Medicaid Waiver, and are then eligible for Medicaid reimbursement.

Socio-economic status creates barriers to accessing health care (e.g., lack of health insurance, inability to afford care, transportation challenges, etc.), which typically have a negative impact on the health of residents. Often, there is a high correlation between poor health outcomes, consumption of healthcare resources, and the geographic areas where socio-economic indicators (i.e., income, insurance, employment, education, etc.) are the poorest.

- Poverty is prevalent in the area. An article from the Metropolitan Opportunity Series states, "there still remain a great many very poor neighborhoods in New Orleans. In 2009-13, 38 of the city's 173 census tracts had poverty rates exceeding 40 percent, down only slightly from 41 tracts in 2000 (see maps). Yet the population of those neighborhoods dropped dramatically, from more than 90,000 in 2000 to just over 50,000 in 2009-13... Meanwhile, poverty has also spread well outside the city's borders. While the city's poor population declined between 2000 and 2013, it rose by a nearly equivalent amount in the rest of the metropolitan area. And although the poverty rate in the rest of metro New Orleans has increased (from 13 percent to 16 percent), relatively few poor residents of those areas live in communities of extreme poverty, notwithstanding notable differences by race and ethnicity."³
- Today, the University Medical Center New Orleans study area has an average annual household income of \$62,642, which is below state and national norms (\$64,209 and \$74,165 respectively). Orleans Parish reports the lowest income (\$59,059/year) and the highest number of households earning below \$25,000/year (39%) when compared to the state and the nation (29.5% and 23.5% respectively).
- There are indications in the secondary data that the geographic pockets of poverty align with data showing fewer providers and poor health outcomes in the same areas. For example, residents in zip code areas with higher CNI scores (greater socio-economic barriers to accessing healthcare) tend to experience lower educational attainment, lower household incomes, higher unemployment rates, as well as consistently showing less access to health care due to lack of insurance, lower provider ratios, and consequently poorer health outcomes when compared to other zip code areas with lower CNI scores (fewer socio-economic barriers to accessing healthcare).
- The CNI score for the University Medical Center New Orleans (4.1) is higher than the median for the scale (3.0) indicating more than average socio-economic barriers to accessing health care across the service area. A total of 43 of the 45 zip code areas (95.6%) for the University Medical Center New Orleans Study Area fall above the median score for the scale. The University Medical Center New Orleans service area covers a large area and contains both the highest (5.0) CNI scores (Gretna 70053, New Orleans 70112, 70113, 70114, and 70117), and lower CNI scores in New Orleans 70124 (2.4)

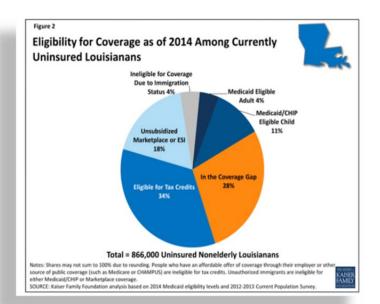
³ Source: Metropolitan Opportunity Series: Concentrated poverty in New Orleans 10 years after Katrina (http://www.brookings.edu/blogs/the-avenue/posts/2015/08/27-concentrated-poverty-new-orleans-katrina-berube-holmes?cid=00900015020149101US0001-0829

- and Covington 70447 (2.8), which presents a diverse set of community health needs across the entire service area. The highest CNI scored areas are where the highest rates of poverty, unemployment, uninsured, and lowest rates of educational attainment are found.
- The data suggest that there is an increase in barriers to accessing healthcare for some of the hospital service area. A closer look at the changes in scores shows there were 24 zip code areas that saw increases in barriers since 2011 and 18 remained unchanged or showed improvement (seven of which were areas with high barriers that remained unchanged at a CNI score of 4.5 or higher). The change in CNI scores may be slightly inflated due to the lack of Medicaid expansion causing higher uninsured rates in the hospital service area than national norms. However, when socio-economic indicators measured by CNI are compared at the zip code level from 2011 to 2015, we see a pattern of increased rates of poor socio-economic measures.
 - ✓ In Eastbank and Westbank communities there is a pattern of increased barriers in areas that previously showed higher CNI scores (greater barriers to accessing healthcare) and less dramatic increases in zip code areas with lower CNI scores (fewer barriers to accessing healthcare). This means that it is becoming increasingly difficult to secure healthcare in areas with lower-socioeconomic status. This is a trend, across the nation, resulting from the consolidation of healthcare resources and the sustainability challenge faced by many health service providers.
 - ✓ It would appear that, aside from Orleans Parish, the most rural areas in the service area show a greater increase in CNI scores from 2011 to 2015: Zip code areas that had lower CNI scores (lower barriers to accessing health care) in 2011 show a much greater increase in barriers than those areas that had higher CNI scores (greater barriers to accessing health care) previously. This means that socio-economic indicators (i.e., income, culture, education, insurance, and housing) are disintegrating at a rapid pace in areas that previously showed better socio-economics and there is little change in areas where socio-economic status was already poor.
- In Eastbank and Westbank communities, single parent homes are likely to be living in poverty with at least one quarter of these homes below the federal poverty rate.

University Medical Center New Orleans:

✓ 40 of the 45 zip code areas (88.9%) served by University Medical Center New Orleans show more than one-third of single parent homes are in poverty. Stakeholders noted that poverty and homelessness appears to have increased in Slidell, LA. This increase is apparent in the increased CNI score for Slidell (70458) from 2.8 to 4.0, an increase of 1.2, indicating significant increases in barriers to accessing healthcare. However, a development process taking place on the outskirts of Slidell (70458), which may be drawing the younger, professional

residents away from 70458 and leaving an aging population with lower-fixed



incomes and residents that cannot afford to relocate.

Louisiana is a state that has chosen not to expand Medicaid, a key component in healthcare reform that extends population that is eligible for Medicaid insurance coverage. Kaiser Family Foundation estimates 32% of that uninsured nonelderly Louisiana residents (866,000 people) remain ineligible for any insurance coverage or tax credits due to the lack of Medicaid expansion. The primary pathway for uninsured residents to gain coverage is the federally administered Marketplace where 34% (approximately 298,000) uninsured Louisianans become

eligible tax credits. Though residents earning between 19% to 100% Federal Poverty Line (FPL) or \$4,476 to \$23, 550/year for a family of four do not qualify for any assistance at all⁴

- While the uninsured rate for the hospital service area (17.4%) is less than the state (19%); there are sixteen zip code areas that have higher rates of uninsured than is average for the state and the nation. They are: thirteen New Orleans zip code areas 70113 (42.0%), 70112 (38.9%), 70117 (31.9%), 70119 (31.1%), 70127 (30.6%), 70126 (29.5%), 70129 (29.1%), 70114 (27.9%), 70125 (25.4%), 70122 (25.2%), 70116 (24.8%), 70118 (23.1%), and 70130 (21.1%); Bogalusa 70427 (21.9%); Gretna 70053 (20.5%); and Franklinton 70438 (20.0%).
- ✓ While the rates of uninsured in Orleans and Jefferson Parishes (both 26.3%) have decreased in the most recent years, they remain higher than state and national rates (25.02% and 20.76% respectively). Latino residents are more likely to be uninsured than their counterparts in Jefferson (39.26% to 15.30% respectively) and Orleans Parishes (38.89% to 17.88% respectively). Additionally, there are racial disparities in the rates of uninsured with the highest rates being consistently among residents of "some other race" in most parishes in the study area. There are also higher rates of uninsured among: Asian residents and Native American and Native Hawaiian/Pacific Islanders in Orleans Parish.
- ✓ During the community planning forums, community leaders discussed residents in areas with high rates of poverty, as well as seniors that are not always able to afford prescription medication (e.g., uninsured, donut insurance coverage, etc.) without some

⁴ Source: Kaiser Family Foundation analysis based on 2014 Medicaid eligibility levels and 2012-2013 Current Population Survey

form of assistance. Leaders and stakeholders indicated that there are very few resources available to subsidize prescription medications. Community leaders and stakeholders addressed the limitations of the Medicaid Waiver, which does not cover hospitalization, prescription medications, or specialty care. As a result, many community-based clinics do not have access to specialty diagnostic services and many treatment options. Additionally, stakeholders discussed the cost of health services in relationship to health insurance, uninsured care, and poor reimbursement rates of health service providers (medical, dental and behavioral). Many providers (e.g., wound care specialist, sleep labs, etc.) are not accepting patients with Medicaid insurance due to the low reimbursement rates and lack of Medicaid expansion placing a strain on health resources to meet the needs of uninsured and underinsured residents.

- ✓ The percent of insured population receiving Medicaid benefits (2009-2013) was highest in Orleans Parish (31.27%) when compared to the state (25.70%) and national (20.21%) rates. If physicians are not accepting new Medicaid patients (as secondary data suggests), it is possible that many patients in the hospital service area are not able to secure primary care using their insurance coverage.
- Uninsured and underinsured residents may also be resisting seeking health services due to the cost of uninsured care, unaffordable copays, and/or high deductibles. This trend was apparent in surveys collected in Eastbank and Westbank communities where more than one-third of respondents reported less than \$29,999 annual household income (61.5% and 51.8%, respectively). A higher percentage of respondents indicated that they could not see a doctor in the last 12 months because of cost (Eastbank 30.5% and Westbank- 27.9%) when compared to the state average (18.9%). Additionally, survey respondents reported not taking medications as prescribed in the last 12 months due to cost (Eastbank 25.3% and Westbank 26.1%). Stakeholders also felt that residents in poverty are less likely to secure health services prior to issues becoming emergent due to a lack of resources (i.e., time, money, transportation, etc.) and a focus on meeting basic needs, leading to a lower prioritization of health and wellness.
- ✓ The results of a survey conducted among Latino(a) residents in New Orleans from 2013 to 2014⁵ showed that nearly one-quarter of respondents stated they had never gone to a doctor for a check-up or care, either in New Orleans or elsewhere. The most common place to receive care was community clinics (38%); followed by the emergency room (24%). When asked what the most pressing health concerns were, respondents indicated: dental care, access to health care, insurance, and nutrition.

⁵ Source: I don't Know Where to Go: Latino Community Health Issues in New Orleans

Note: CBNO and Puentes collected 279 completed surveys. The demographic profile of the surveyed population is working age Latino adults, many of whom immigrated to New Orleans within the past eight to ten years and intend on making New Orleans their home. Nearly every survey respondent speaks Spanish as their first language, with 21% of respondents able to speak English and 13% being able to read English.

Provider to population ratios that are not adequate enough to meet the need:

Community leaders discussed that specialty care is not always available (i.e., palliative care services for Medicaid beneficiaries, pediatric neurosurgery, pediatric cardiology, endocrinology, diagnostics, care coordination, after-hours specialty care, HIV services, prescription assistance, primary care, and community-based supportive services for seniors) There are additional challenges to accessing specialty care for residents that are uninsured, Medicaid recipients, and/or residents that live in communities with the highest rates of poverty.

- Today, the primary care physician ratio in Orleans, Jefferson, and St. Tammany parishes are similar to or better than the state and national rates (143.26, 112.30, 86.66, 57.86 and 78.92 per 100,000 pop. respectively). However, the rates of Federally Qualified Health Centers (FQHC) was highest Orleans Parish (3.78 per 100,000 pop.) when compared to Jefferson and St. Tammany parishes (1.39 and 0.86 per 100,000 pop. respectively).
- Community leaders and stakeholders discussed the uncertainty in the medical industry
 and low reimbursement rates that drive the lack of services for Medicaid recipients and
 uninsured residents. Community leaders felt that there is a general lack of resources to
 meet the needs of residents with complex health needs and co-occurring health issues,
 which are often found among populations with higher poverty rates. The physician
 workforce is aging and many physicians are retiring, leading to a decrease in the number
 of physicians available.
- Stakeholders representing Eastbank and Westbank communities indicated that there
 are not enough primary care providers to meet the demand for health services; and
 those numbers are expected to continue to decline. There were additional regional
 variances in these discussions:

Eastbank Communities:

 Leaders discussed the uncertainty in the medical industry and low reimbursement rates that drive the lack of services for Medicaid populations. Stakeholders described disparate health resources with lower income neighborhoods containing the fewest resources. Reportedly, there is a lack of health resources for Vietnamese and African American women in the New Orleans East communities. One stakeholder indicated that the East area is the most disenfranchised area and has been for decades.

Westbank Communities:

Community leaders representing Westbank communities indicated that there is a need for additional FQHCs and look-a-like clinics on the Westbank. Stakeholders discussed a lack of preventive care in Westbank Communities. Leaders felt that residents are often seeking primary care services in the emergency rooms at local hospitals due to a lack of resources that offer convenient, accessible health services for Medicaid eligible populations.

- Survey respondents echoed a lack of access to services with at least one in 10 survey respondents indicated they did not feel as though they have access to the following: dental services (Eastbank 20.7% and Westbank 17.9%); vision services (Eastbank 19.7% and Westbank 16.1%); cancer screening (Eastbank 9.7% and Westbank 17.9%); services for 60+ (Eastbank 10% and Westbank 12.6%); HIV services (Eastbank 11.5%); medical specialist (Eastbank 11.8% and Westbank 10.9%); primary care (Eastbank 10.2%); pediatric & adolescent health (Eastbank 10.7% and Westbank 14.8%); emergency medical (Eastbank 11.1% and Westbank 11.7%); healthy foods (Eastbank 15.6% and Westbank 6.9%); and employment assistance (Eastbank 16.2% and Westbank 15.9%).
- While not as clear an indication of restricted access to healthcare as provider rates, hospitalizations rates that are higher than expected are usually driven by access issues in the community. The end result is hospitalizations for illnesses that could have been resolved prior to becoming emergency situations. In the University Medical Center New Orleans service area there are higher rates throughout the study area when compared to the state and national rate for four of the 14 PQI measures (i.e., diabetes short-term complication, diabetes long-term complications, perforated appendix and low birth weight). The hospitalization rate for perforated appendix is the highest (402.60) when compared to state (322.43) and national (323.43) norms. The State of Louisiana has higher hospitalization rates when compared to the national trends for many of the PQI measures and the greatest difference in hospitalization rates is between the hospital service area and the national rate for congestive heart failure (381.36and 321.38, respectively). It is important to note that three of the four diabetes measures showed higher hospitalizations in the hospital service area than the state or the nation (or both).

Need for care coordination:

Leaders discussed the need for care coordination for residents. Specifically, leaders discussed the importance of ensuring patients have access to treatment methods prescribed by the physician (i.e., medications, healthy nutrition, etc.) and that providers follow up with patients to improve implementation of treatment recommendations.

During this study, community leaders and stakeholders discussed the lack of care coordination provided for uninsured, underinsured, Medicaid beneficiaries, and senior residents (including seniors that are seeking care in inappropriate settings like the emergency room). Several stakeholders mentioned the benefits of home healthcare and palliative care for care coordination, though Medicaid eligible residents, reportedly, are not often approved for home health services.

Eastbank Communities:

There is limited follow up for Medicaid populations that seek care in the hospital.
Leaders discussed the need for care coordination for residents related to
ensuring patients have access to treatment methods prescribed by the physician
(i.e., medications, healthy nutrition, etc.) and providers following up with
patients to improve implementation of treatment recommendations.

Limited access to healthcare as a result of transportation issues:

Transportation was discussed as a barrier to accessing health services for residents in local communities with the highest poverty rates.

• Stakeholders also acknowledge that the lack of adequate transportation impacts the health of residents in a variety of ways by limiting the access residents have to healthy options like medical providers and grocery stores with healthy foods. The limitations of transportation may restrict the access residents have to employment opportunities, which could be a barrier to insurance and financial stability.

Eastbank and Westbank Communities:

- ✓ One stakeholder identified transportation as one of several reasons expectant mothers are not always consistent with prenatal care. Transportation can take hours, which may be a significant barrier to attending prenatal appointments, particularly if the expectant mother has other children.
- ✓ With the exception of Orleans Parish (18.46%), the general population in the hospital service area shows average or below average rates of households with no motor vehicles when compared to state (8.48%) and national (9.07%) norms. However, survey respondents indicated that their primary form of transportation is some method other than their own car (Eastbank − 40.9%, Westbank − 25.2%).
- At least one in 10 survey respondents (Eastbank 10.3%) indicated that they did believe
 that accessible transportation was "available at all as far as they knew" or "available to
 others but not to them or their family." Residents do not always have access to care
 (including primary/preventive care and dental care) due to a lack of transportation. The
 location of providers becomes a barrier to accessing healthcare due to the limited
 transportation options.

Stakeholders noted that the need for accessible healthcare among medically vulnerable populations (e.g., uninsured, low-income, Medicaid insured, etc.) has an impact on the health status of residents in a variety of ways and often leads to poorer heath out comes. Several of the noted effects are:

- ✓ Lifestyle diseases such as obesity, diabetes, cancer, hypertension, and cardiovascular disease.
- ✓ Higher cost of healthcare that results from hospital readmissions and increased usage of costly emergency medical care.
- Residents delaying medical treatment and/or non-compliant due to the lack of affordable options and limited awareness of what options do exist.
- ✓ Poor outcomes in adult, maternal, and pediatric care due to limited care coordination and lack of patient compliance.
- ✓ Poor health and higher rates of mortality.

Increasing access to healthcare is an issue that carries forward from previous assessments, though some progress has been made by increasing access to community-based health services through the growth of FQHCs, look-a-like clinics, and urgent care clinics. It will be very important to further understand the access issues for populations that may not have ready access to health care; such as, low income, Native American, Vietnamese, and Latino(a) communities in the hospital service area. Primary data collected during this assessment from community leaders and residents offered several recommendations to increase access to healthcare. Some of which included:

- Increase preventive care in Westbank communities: Leaders representing Westbank communities discussed the need to shift the focus of healthcare away from acute episodic care to prevention, noting that preventive care is less costly and a more effective long-term solution to improving health outcomes.
- Offer health and other necessary services in both urban and rural areas where the rate of poverty is high: Leaders from each region Eastbank and Westbank discussed increasing access to health services in communities where the poverty rates are high and transportation may be an issue. Leaders felt that it is possible for communities to sponsor grocery delivery programs to ensure access to healthy nutrition for residents that do not have reliable transportation. Leaders representing Eastbank communities also discussed mobile health services and public-private partnerships to support hospitals where corporate models of healthcare may not be as sustainable, as two models that may be able to increase the availability of health services in underserved areas. Leaders also discussed the provision of medication assistance or a pharmacy for low-income residents that are under/uninsured. Leaders representing Westbank communities recommended that hospitals could offer land for community gardens in the neighborhoods they serve to increase access to healthy produce.
- Increase the collaboration between FQHCs and Hospitals: Leaders representing both
 Eastbank and Westbank regions discussed the need for FQHCs and hospitals to work
 together to refer patients for diagnostic and specialty care in hospitals, and then follow
 up with patients upon discharge with primary care and care coordination in local FQHC

- settings. Leaders believed that there is a need to increase the number of FQHCs in order to reduce the use of the emergency room in communities.
- Increase the access medically vulnerable individuals have to services: Leaders
 discussed the restrictions and barriers that medically vulnerable individuals (e.g.,
 homeless, low-income, residents with a history of behavioral health and/or substance
 abuse, etc.) face when trying to secure shelter services. Leaders recommended a low
 barrier shelter to increase the access homeless residents have to services, including
 health care.

ADDRESSING BEHAVIORAL HEALTH ISSUES INCLUDING SUBSTANCE ABUSE

Underlying factors identified by secondary data and primary input from community leaders, community stakeholders and resident survey respondents:

- 1. There are not enough providers to meet the demand and the spectrum of services available in most areas is not comprehensive enough to treat individual needs.
- 2. Care coordination is needed among behavioral health, substance abuse, and primary care/medical providers.

Community leaders at the community forum identified the need to address behavioral health needs as a top health priority. Community leaders, stakeholders, and survey respondents agree that behavioral health and substance abuse is a top health priority. Discussions focused primarily on the limited number of providers, the need for care coordination, and the fact that individuals with behavioral health and substance abuse needs often have poor health outcomes. According to the New Orleans City Health Department, New Orleans residents carry a heavy burden from mental health, substance abuse, and other behavioral health issues.

Findings supported by study data:

There are not enough providers to meet the demand and the spectrum of services available in most areas is not comprehensive enough to treat individual needs:

- The City of New Orleans Health Department publishes a dashboard of data depicting mental health utilization, which includes residents served by University Medical Center New Orleans. The dash board for July 2015 indicates:
 - o There is an average rate of 21 ER holds (individuals in crisis who have been evaluated and waiting for inpatient beds) each month during the preceding 12 month period. A rate that has increased when compared to previous year data.

- Since June 2015, utilization of outpatient beds have increased overall, indicating that more people are seeking treatment outside of emergency departments⁶
- Data suggests there is a need for behavioral health services

Table 2: County Health Rankings – Mental Health Providers (Count/Ratio) by Parish

Measure of Mental Health Providers*

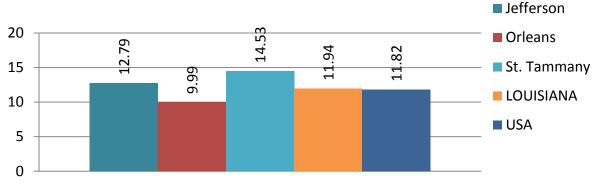
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Mental health providers (count)	5386	618	858
Mental health providers (ratio pop. to provider)	859:1	704:1	441:1

*County Health Ranking 2015

 Jefferson Parish, Orleans Parish, and St. Tammany Parish all show below state rates for behavioral health providers. However, there is no measure of the providers that are accepting under/uninsured and Medicaid eligible behavioral health patients and both primary and secondary data suggests there is a need for additional behavioral health services in the hospital service area.

Figure 3: Mortality - Suicide- Age-Adjusted Death Rate, (Per 100,000 Pop.), 2007-2011



*Source: Community Commons. 06/08/2015

- St. Tammany Parish and Jefferson Parish report some of the highest rates of ageadjusted mortality due to suicide (14.53 and 12.79 per 100,000 pop. respectively) when compared to state and national rates (11.94 and 11.82 per 100,000 pop.). The Healthy People 2020 goal is for mortality due to suicide to be less than or equal to 10.2 per 100,000 population; Orleans Parish already show rates lower than the HP2020 Goal.
- ✓ Approximately one in five (Eastbank 19% and Westbank 22.7%) survey respondents indicated that they have received mental health treatment or medication at some time in their lives.

Eastbank Communities:

⁶ Source: New Orleans Health Department: New Orleans Mental Health Dashboard (July 2015)

- ✓ However, when asked if a variety of services are available to them or their family, more than one in 10 survey respondents from Eastbank communities indicated that mental health services (13.1%) and/or substance abuse services (11.8%) were "not available as far as they know" or "available to others but not to them."
- A majority of stakeholders (75%) identified a health need related to behavioral health and/or substance abuse. Stakeholders discussed the lack of behavioral health and substance abuse resources, in general, and many noted that behavioral health and substance abuse needs are highest in communities with the highest rates of poverty. Stakeholders felt that there is a connection between environmental factors and the prevalence of behavioral health and substance abuse.
- Both, community leaders and stakeholders, discussed the gaps in the available services for adults and children related to behavioral health and substance abuse diagnosis and treatment. There is, reportedly, a resistance among behavioral health providers to accept Medicaid insurance and the cost of uninsured behavioral health services is unaffordable for residents who are Medicaid eligible. Other services that were noted as being inadequate in local communities were school-based screening and treatment of behavioral health issues in youth, early intervention services, inpatient services for adults and youth (including crisis intervention), and outpatient services for adults and

"Katrina has had a major impact on the mental health of residents- the stress, and displacement of residents has had an impact and the response has not been adequate to meet the need." ~

youth. While there are inpatient beds and outpatient counseling services available, stakeholders and community leaders indicated that they are not adequate to meet the demand for behavioral health and substance abuse services. In recent years there has been a decrease in the number of inpatient beds and crisis services have declined. Outpatient services have improved but, often have lengthy waiting lists for diagnostic services as well as ongoing treatment.

• There was also discussion around the need for behavioral health providers that are both culturally competent and reflective of the cultures and languages spoken by residents (i.e., Spanish and Vietnamese dialects) in communities served by

Ocshner Medical Center.

Nearly 50 percent (Eastbank – 47.8%) of survey respondents from Eastbank and communities selected "Drugs and Alcohol" as one of the top five health concerns in their communities. Stakeholders felt that the culture of New Orleans and tourist industry encourages substance abuse and identified tobacco, alcohol and marijuana as the most common substances being abused. Other substances noted were cocaine, heroin, methamphetamines, and prescription pain medications. Stakeholders also felt

that substance abuse is often a way for residents to self-medicate or cope with behavioral health issues including stress and serious mental illness (e.g., bipolar, schizophrenia, etc.).

Care coordination is needed among behavioral health, substance abuse and primary care/medical providers:

Community leaders discussed a fractured behavioral health system where residents are
not seeking and receiving effective ongoing behavioral health and/or substance abuse
treatment. Residents may be seen in the emergency room for crisis behavioral health
and then have little follow up afterward. Community leaders and stakeholders agree
that care coordination is needed among behavioral health providers, substance abuse
providers, and physical health providers.

Stakeholders noted that behavioral health and substance abuse has an impact on the health status of residents in a variety of ways and an often lead to poorer health outcomes. Several of the noted effects of behavioral health and substance abuse are:

- ✓ Incarceration rates among residents with behavioral health and/or substance abuse diagnosis is high.
- ✓ It can be difficult to secure out-of-home placement for a senior who has been committed for psychiatric treatment.
- Residents with a history of behavioral health and substance abuse do not always practice healthy behaviors and may be non-compliant with necessary medical treatments (e.g., HIV treatments, etc.).
- ✓ Babies born to mothers with behavioral health and/or substance abuse issues may not receive adequate prenatal care and/or consistent postpartum care to facilitate healthy child development. Mothers that have a history of substance abuse may not inform their physician due to laws that may lead to the removal of other children in the home.

Behavioral health has remained a top health priority that appears as a theme in each data source included in this assessment. The underlying factors include: care coordination and workforce supply vs. resident demand. Primary data collected during this assessment from community leaders and residents offered several recommendations to address the need for behavioral health and substance abuse. Some of which included:

Integrate behavioral health and primary care: Leaders felt that primary care providers
could begin screening for behavioral health symptoms and discussing these symptoms
and resources with patients in order to decrease the stigma of behavioral health
diagnoses and increase screening rates. Additionally, leaders representing Eastbank

- communities felt that behavioral health services need to be more adequately funded in in order to increase the number of providers and amount of services available.
- Increase the number of inpatient beds and outpatient behavioral health services:

 Leaders discussed the need to increase the amount of inpatient and outpatient services that are available to residents in Eastbank communities. Leaders discussed increasing advocacy efforts regarding policy and funding mechanisms, as well as restructuring how behavioral health services are funded and who can be served.

Develop school-based behavioral health services and screening for youth: Leaders discussed the possibility of schools and other community-based organizations collaborating to develop school-based behavioral health services (e.g., counselors, social workers, etc.) and other community-based clinics using funds available through Medicaid/Bayou Health. Services should be easily accessible to both seniors and youth.

RESOURCE AWARENESS AND HEALTH LITERACY

Underlying factors identified by secondary data and primary input from community leaders, community stakeholders and resident survey respondents:

- 1. A lack of awareness about health resources
 - ✓ System navigation
- 2. Presence of barriers related to literacy, awareness and language
 - ✓ System navigation
 - ✓ Need to increase culturally sensitive clinical care and educational outreach to vulnerable populations

Improving resource awareness and health literacy was identified as a top health priority for the University Medical Center New Orleans service area. While there has been a great deal of development in community-based health services in recent years; there is limited awareness among residents regarding where to secure services and the health provider landscape remains largely disjointed. According to stakeholders and community leaders, efforts to better connect services providers (e.g., the health information exchanges, electronic medical records, etc.) are in the earliest stages of development. Additionally, there are residents with limited English speaking skills making health literacy and system navigation a health concern. There is agreement across data sources in support of improving resource awareness, health literacy of residents and cultural sensitivity of providers in the hospital service area.

Findings supported by study data:

A lack of awareness about health resources:

- Stakeholders discussed a shift in the way health services are provided from the charity care model, where charity care was provided in large charity hospital settings before Katrina to the community-based clinic model providing primary care to residents through a network of FQHCs and community-based clinics. One of the most discussed about barriers to accessing health services in the study area was the awareness residents had regarding what services are available and where they are located. The lack of awareness about service availability could explain why survey respondents indicated that they did not feel a variety of health services were available to them as referenced earlier in the "Need to Improve Access to Healthcare" section of this report. Residents are not securing health services in the proper locations because they are not aware of new clinics and services that may be available to them. The result has reportedly been an over-utilization of the emergency rooms for primary care and behavioral health concerns.
- Community leaders felt that it can be difficult to identify which physicians will accept
 Medicaid. Leaders discussed the difficulty this poses in referrals as well as residents'
 ability to secure community-based primary care services. There were further discussions
 by community leaders and stakeholders about residents that may not always know how
 to utilize insurances once they are insured, and may continue to seek more costly care
 in the emergency room due to the need for health services that are more convenient.
- Stakeholders also indicated that residents are not always practicing prevention (e.g., screenings) due to a lack of awareness about healthy preventive practices. For example, stakeholders pointed to education in charter schools as an issue related to the access youth have to education about reducing the spread of STIs and HIV.

Table 3: Survey Responses – Preferences for Receiving Information about Healthcare

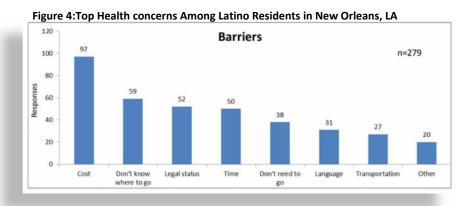
	Eastbank	Westbank
Preferred Method	Respondents (%)	Respondents (%)
Newspaper	21.2%	25.2%
τv	33.4%	30.6%
Internet	29.4%	36.0%
Word of Mouth	62.4%	63.1%
Radio	13.7%	14.4%
Library	2.5%	2.7%
Clinics	21.2%	17.1%
Faith/Religious Organizations	27.1%	16.2%
Call 2-1-1	4.5%	4.5%
Other	6.2%	6.3%

• Residents are often inundated with information and may need to hear a message several times before they comprehend the message and become aware of the importance of implementing healthy behaviors or locating services. Leaders discussed that often information is disseminated too infrequently to be received by residents. One of the greatest challenges in increasing health literacy and resource awareness will be the method many respondents prefer to use when receiving information about health services (i.e., word-of-mouth) most often, in both Eastbank (62.4%) and Westbank (63.1%) communities, limiting the effectiveness of outreach and advertisement efforts using other methods.

Presence of language barriers and literacy related accessing care and understanding care provided:

• Community leaders discussed the need to provide culturally competent services to residents that may be undocumented. Such services would include consideration of linguistic needs and fears/needs related to legal status. Providers do not always offer culturally competent health services in the language of preference for residents that may have limited English speaking skills, which may lead to limited understanding of individual health status and/or treatment directives. The most current zip code level data suggests there are pockets of populations in the hospital service area with limited English speaking skills. CNI data shows higher rates of residents with limited English speaking skills compared to the average rates for the hospital service area (2.5%) and the average rates in the SELA Region (1.6%) in New Orleans (70129), Metairie (70002), Gretna (70053), Kenner (70062), Kenner (70065), Harvey (70058), Metairie (70006), Gretna (70056), Metairie (70005), New Orleans (70119), Metairie (70001), New Orleans (70121), and Metairie (70003) (16.6%, 9.5%, 8.2%, 7.8%, 6.1%, 5.9%, 5.0%, 4.8%, 4.1%, 3.4%, 3.2%, 2.8%, and 2.8%respectively)

The results of a survey conducted among Latino(a) residents in New Orleans from 2013 to 2014⁷ found that when asked what barriers they faced seeking health care: the



most frequently chosen barrier to healthcare is cost (35%), not knowing where to go to receive health care, and concerns regarding legal status was the third largest barrier to care (18.6%). Other barriers noted in survey results included: language, inadequate provision of health-related information, and lack of outreach to Latino residents by healthcare providers.

• Community leaders and stakeholders discussed the limited awareness of residents with the lowest educational attainment in their communities; noting that the capacity to advocate for themselves is greatly reduced as a result. Stakeholders noted that there is a high correlation between lower educational attainment and a lower level of health literacy; indicating that residents are not always being assessed for their level of understanding. Additionally, stakeholders felt that the movement toward electronic medical records, the use of online applications, and internet based systems may leave some residents that do not have access to computers and/or whom may be unfamiliar with computers without access to relevant health information.

Health literacy can impact the level of engagement with health providers at every level; limiting preventive care, emergent care, and ongoing care for chronic health issues, leading to health disparities among vulnerable populations with limited English skills (i.e., Vietnamese and Spanish speaking populations), limited literacy skills, and limited computer literacy.

✓ There are socio-economic and racial disparities apparent in secondary data related to health outcomes (i.e., HIV/AIDS, low birth weight, infant mortality, heart disease, cancer, colon cancer, prostate cancer, stroke, and homicide).

Primary data collected during this assessment from community leaders and residents offered several recommendations to improving resource awareness and health literacy. Some of which include:

⁷ Source: I don't Know Where to Go: Latino Community Health Issues in New Orleans

- Increase access to accurate information about what services are available: Leaders discussed the dissemination of accurate information about what services are available in Eastbank and Westbank communities. Leaders discussed the development of a resource that is accessible through a variety of methods (e.g., electronically, by phone, pamphlets offered in physicians' offices, and other community locations, etc.) to maximize the functionality and accessibility for residents. Leaders representing Westbank communities recommended that hospitals and health providers work with neighborhood associations to disseminate information about available services, as well as, preventive education on an ongoing basis. Leaders also recommended offering an internet-based searchable data warehouse of available resources that would be updated on a regular basis to ensure accuracy of information. Additionally, Leaders discussed promotion of the use of the Health Information Exchange among providers and residents.
- Increase the number of community health workers: Leaders representing Eastbank and Westbank communities recommended an increase in the use of community navigators and community health workers who provide information and guidance to residents related to care coordination and appropriate use of healthcare resources.
- Increase awareness through outreach education with providers and residents alike:

 Community leaders indicated that there is a need to increase the level of education and outreach being provided in the community to health service providers, as well as residents. Leaders felt the providers could benefit from education regarding available services, the use of HIPAA regulations, behavioral health symptoms, elder abuse, and cultural sensitivity. Leaders felt that residents could benefit from additional education and awareness regarding preventive practices, available services, appropriate use of healthcare resources, financial health, and healthy behaviors related to obesity, diabetes, smoking, the risks of HIV, end of life decisions, and behavioral health symptoms, etc. Additionally, leaders recommended that incentives should be provided to organizations and businesses for promoting healthy activities (e.g., exercise, healthy nutrition, etc.) and healthy options (e.g., nutrition, food preparation, physical exercise, etc.).

NEED TO IMPROVE ACCESS TO HEALTHY OPTIONS (WESTBANK COMMUNITIES ONLY)

Underlying factors identified by secondary data and primary input from community leaders, community stakeholders and resident survey respondents:

- 1. Limited access to healthy nutrition
- 2. Lack of safe exercise options

3. Limited access to prevention and education

Community leaders identified access to healthy options as a community health priority. Community leaders and stakeholders understood that health issues in the hospital service area are driven by both personal choices of residents and the amount of access individuals have to healthy options. Leaders focused discussions around the limited access residents have to healthy nutrition, safe exercise opportunities, and the need for education and outreach. There is agreement across data sources in support of increasing access to healthy options in the hospital service area.

Findings supported by study data:

Limited access to healthy nutrition:

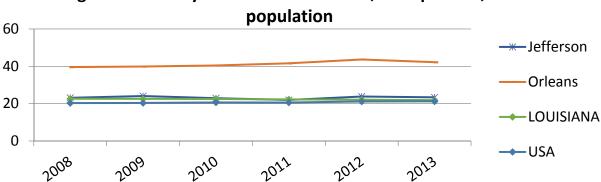


Figure 5: Grocery Store Establishments, Rate per 100,000

*Source: Community Commons. 06/08/2015

 Community leaders and stakeholders discussed food security related to the health of seniors and youth. Grocery stores are not often located in low income neighborhoods creating what is being called a "food desert". Youth and seniors residing in these food deserts may not have ready access to healthy nutrition (e.g., fresh produce) due to the lack of transportation options. Orleans Parish and Jefferson Parish have higher rates of grocery stores (42.17 and 33.35 per 100,000 pop. respectively).

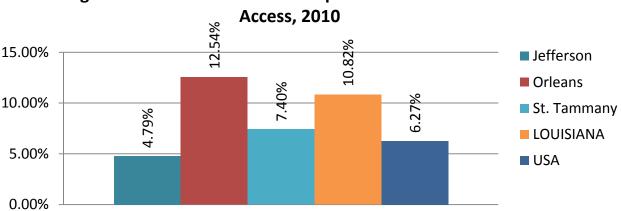


Figure 6: Percent Low Income Population with Low Food

*Source: Community Commons. 06/08/2015

- However, community leaders indicated that there are several grocery stores in Westbank communities that have closed since the last CHNA was completed in this area. A closer look at the data shows that the low-income populations of Orleans Parish experience the highest rate of low food access when compared to the state and the nation (12.54%, 10.82%, and 6.27% respectively).
- While access is an issue related the healthy nutrition, education about health food preparation is also important as community leaders and stakeholders felt that residents are not always aware of how to prepare foods in healthy ways. Traditional diets are steeped in unhealthy preparation methods like fried and fatty foods.

Limited access to prevention and education:

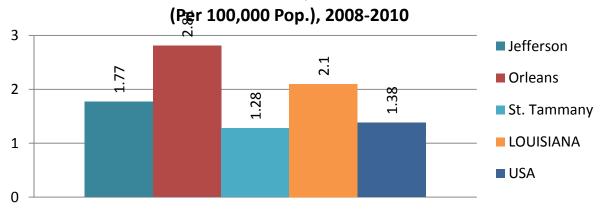
Community leaders discussed the rural nature of the service area coupled with the disconnected nature of residents in relationship to the level of information and instruction about healthy choices that reaches residents in local communities. Leaders and stakeholders believe that many low-income, uninsured/underinsured residents are not always informed about the most effective preventive practices due to being disconnected from primary care.

- Stakeholders felt that a lack of education coupled with low exposure to healthy resources causes residents in poverty to be unaware of healthy options. When residents are aware of healthier choices, they may perceive these options to be out of their reach (e.g., healthy produce and nutrition may not be viewed as consistently attainable) due to a lack of grocery stores, limited transportation, and cost.
- When residents are not seeing a physician on a regular basis and they live in rural areas,
 they may not have access to outlets of information about healthy practices. For
 example, community leaders indicated that there is not enough focus on preventive
 care; largely due to a lack of funding for these types of services. When residents are not
 practicing healthy preventive practices, a community may end up with higher utilization
 of emergency and urgent care resources.

• Stakeholders indicated that there are restrictions on the education offered to youth regarding effective prevention of STIs, like HIV.

Lack of safe exercise options:

Figure 7: Mortality - Pedestrian Accident- Age-Adjusted Death Rate,



*Source: Community Commons. 06/08/2015

Traffic fatalities are highest in Orleans Parish (2.81 per 100,000 pop.) when compared to national norms (1.38 per 100,000 pop.). Though, community leaders believed that there are many opportunities for residents to exercise outdoors (e.g., local parks and walking trails) and indoors at a low cost (e.g., local gym memberships for ten dollars each month). However, residents are not always aware of the options available for healthy activities in Westbank communities. Furthermore, residents cannot always afford gym memberships and exercising outside during the summer months can be dangerous for some populations (e.g., seniors).

Stakeholders discussed the implications of the limited access to healthy options that residents of the hospital service area have as some of the following:

- ✓ Lifestyle diseases such as obesity, diabetes, cancer, hypertension, and cardiovascular disease. Several of these measures are high in the hospital service area.
 - The rates of obesity in the study area and nationally have seen steady rising over the years. All parishes included in the study area show higher rates of obesity (BMI >30.0) than the national norms (27.14%).
 - The average Body Mass Index (BMI) among survey respondents in the Westbank Region (28.79) was higher than national norms and bordered on Obese (BMI>30).

- Survey respondents for Westbank communities self-reported higher rates of diabetes diagnosis (16.2%) than the SELA Region (16.0%), state (10.3%), and national (9.7%) rates.
- ✓ Poor birth outcomes (e.g., low birth weight) and limited access to healthy options.
 - All parishes in the study area and the state report higher rates of low-weight births than the national rate of 8.2%. The Healthy People 2020 goal is for lowweight births to be less than or equal to 7.8%; all of the study area parishes and state report rates higher than this goal.
 - There are more preventable hospitalizations related to low birth weight in the hospital service area (87.15) than is average for the state (86.51) and nation (62.14).

Primary data collected during this assessment from community leaders and residents offered recommendations to improve access to healthy options. Some of which included:

- Proactively address health issues in women that are childbearing age: Leaders
 representing Eastbank Communities recommended that women at risk of poor birth
 outcomes be identified prior to becoming pregnant and be targeted with increased
 access to insurance, outreach, and education regarding the impact their health status
 and behaviors can have on birth outcomes.
- Increase employment opportunities: Leaders representing Eastbank communities discussed the position of hospital providers as major employers in the communities they serve. It is possible to increase the exposure of high school students to medical professions in order to generate an interest in medical training and education. Leaders also discussed job retraining for residents that are unemployed with the capacity to fill roles at local hospitals in order to increase employment.
- Increase collaboration in the community to meet needs: Leaders discussed the need to increase collaboration among hospitals, community-based organizations, and community-based providers. The discussion focused on the need to coordinate services to maximize the impact of what resources are available (e.g., screening, outreach, and free health services) and develop creative solutions to challenging problems. For example, leaders discussed private-public partnerships to support grocery stores in areas where corporate grocers may not be sustainable alone. Leaders representing Westbank communities discussed providing shopping tours and incentives to low income residents to participate in shopping tours. Trained professionals would provide a walking tour through a local grocery store, complete with healthy recipes and food preparation tips, in order to teach residents about the importance and affordability of health nutrition.

Underlying factors identified by secondary data and primary input from community leaders, community stakeholders, and resident survey respondents:

1. Residents do not always make the healthiest choices

Community leaders representing Westbank communities identified behaviors that impact health as a community health priority in Westbank communities. Community leaders and stakeholders understood that health issues in the hospital service area are driven by both personal choices of residents and the amount of access individuals have to healthy options. Leaders focused discussions around the personal choice and behaviors of residents as they relate to health outcomes. There is agreement across data sources in support of improving behaviors that impact health in the hospital service area (e.g., smoking, diet, and exercise).

Findings supported by study data:

Limited access to healthy nutrition:

- Community leaders indicated that residents may not always make the heathiest choices related to smoking, nutrition, and physical activity due to personal preferences, culture and tradition. Three-quarters of the stakeholders interviewed discussed lifestyle choices that impact the health status and subsequent health outcomes for residents. Stakeholders noted that there are factors like smoking, lack of physical exercise, and risky behaviors that are related to the personal choices of residents and influence health outcomes. The topic of personal choice was most often discussed in relationship to obesity, the prevalence of STIs, and respiratory issues.
- All parishes in the study area report higher percentages of the population smoking when compared to the national rate (18.08%). Stakeholders recognized that there are social and environmental determinants of respiratory diseases like chemical run off from factories, pollution, and location along the Mississippi River aka: cancer alley; they discussed the personal choice to continue smoking as an additional factor that facilitates low birth weight, the rates of cancer, and COPD in communities where smoking rates are greatest. Self-reported smoking rates among survey respondents were highest in the Westbank Region (20.6%) than is average for the state (19.3%) or the nation (15.4%).
- Community leaders noted that changing behaviors can be challenging for many residents. This is, reportedly, true about weight loss due to the lag in results. It can take several weeks of exercise before an individual begins to notice the impact of their behavior on overall health. Leaders felt that this dynamic can make it difficult for residents to remain committed to healthier behaviors. At the same time, stakeholders

recognized that there are social determinants that drive the rate of obesity such as food deserts, lack of awareness about healthy food preparation, and the inability to exercise outdoors due to a lack of safety. However, stakeholders also recognized that residents often make personal choices based on preferences for unhealthy foods and limited motivation to exercise. All of the parishes in the study area report higher rates than state (29.8%) and national (22.64%) norms for the percentage of population who do not partake in leisure time physical activity. Similarly, survey respondents in both the SELA and Westbank regions partake in physical activity less often than is average for the nation (no physical activity- 42.7%, 36.4%, and 25.3% respectively).

Primary data collected during this assessment from community leaders and residents offered recommendations to improve access to healthy options. Some of which included:

- Increase the support available to residents striving to make healthy behavior changes:

 Leaders representing Westbank communities discussed the difficulty that residents often experience when changing behaviors to become healthier (e.g., diet, exercise, etc.). Leaders recommended that supportive services be offered where residents are making choices (e.g., the grocery store, places of employment, etc.).
- Provide incentives for healthy behaviors: Leaders discussed the benefits of incentives in changing behaviors as well as the impact of negative reinforcement. Leaders recommended that raising the cost of cigarettes may be effective when combined with reducing the access residents have to cigarettes; providing incentives to smokers to quit; and support services to assist during challenging periods when it is likely residents may revert back to unhealthy behaviors.

Community Health Needs Identification Forum

INTRODUCTION:

The following qualitative data were gathered during a regional community planning forum held on August 5th in New Orleans, LA and August 7th in Harvey, LA. The community planning forums were conducted with community leaders representing the Eastbank region (August 5th) and the Westbank region (August 7th) of the University Medical Center New Orleans primary service area. Community leaders were identified by the community health needs assessment oversight committee for University Medical Center New Orleans. The community forums were conducted by Tripp Umbach consultants and lasted approximately three hours.

At each regional planning forum, Tripp Umbach presented the results from secondary data analysis, community leader interviews, and community surveys, and used these findings to engage community leaders in a group discussion. Community leaders were asked to share their vision for the community they represent, discuss an action plan for health improvement in their community and prioritize their concerns. Breakout groups were formed to pinpoint, identify, and prioritize issues/problems that were most prevalent and widespread in their community. Most importantly, the breakout groups were charged to identify ways to resolve their community's identified problems through innovative solutions in order to bring about a healthier community.

GROUP RECOMMENDATIONS:

The group provided many recommendations to address community health needs and concerns for residents in the University Medical Center New Orleans service area. Below is a brief summary of the recommendations:

Increase awareness through outreach education with providers and residents alike: Community leaders indicated that there is a need to increase the level of education and outreach being provided in the community to health service providers as well as residents. Leaders felt the providers could benefit from education regarding available services and cultural sensitivity. Leaders also felt that residents could benefit from additional education and awareness regarding preventive practices, available services, appropriate use of healthcare resources, financial health, and healthy behaviors related to obesity, diabetes, smoking, etc. Additionally, leaders recommended that incentives should be provided to organizations and businesses for promoting healthy activities (e.g., exercise, healthy nutrition, etc.) and healthy options (e.g., nutrition, food preparation, physical exercise, etc.).

Integrate behavioral health and primary care: Leaders felt that behavioral health services need to be more adequately funded in Eastbank communities in order to increase the number of providers and amount of services available. Additionally, primary care providers could begin screening for behavioral health symptoms and discussing these symptoms and resources with patients in order to decrease the stigma of behavioral health diagnoses and increase screening rates.

Increase the number of inpatient beds and outpatient behavioral health services: Leaders discussed the need to increase the amount of inpatient and outpatient services that are available to residents

in Eastbank communities. Leaders discussed increasing advocacy efforts regarding policy and funding mechanisms as well as restructuring how behavioral health services are funded and who can be served.

Proactively address health issues in women that are childbearing age: Leaders recommended that women at risk of poor birth outcomes be identified prior to becoming pregnant, and target with increase access to insurance, and outreach and education regarding the impact their health status and behaviors can have on birth outcomes.

Increase the support available to residents striving to make healthy behavior changes: Leaders representing Westbank communities discussed the difficulty that residents often experience when changing behaviors to become healthier (e.g., diet, exercise, etc.). Leaders recommended that supportive services be offered where residents are making choices (e.g., the grocery store, places of employment, etc.).

Increase preventive care in Westbank communities: Leaders discussed the need to shift the focus of healthcare away from acute episodic care to prevention, noting that preventive care is less costly and a more effective long-term solution to improving health outcomes in Westbank communities.

Offer health and other necessary services in areas where the rate of poverty is high: Leaders from both Eastbank and Westbank regions discussed increasing access to health services in communities where the poverty rates are high and transportation may be an issue. Leaders felt that it is possible for communities to sponsor grocery delivery programs to ensure access to healthy nutrition for residents that do not have reliable transportation. Leaders representing Eastbank communities also discussed Mobile health services and public-private partnerships to support hospitals where corporate models of healthcare may not be as sustainable were discussed by leaders as two models that may be able to increase the availability of health services in underserved areas. Additionally, leaders discussed the provision of medication assistance or a pharmacy for residents earning a low-income that are under/uninsured. Additionally, leaders representing Westbank communities recommended that hospitals could offer land for community gardens in the neighborhoods they serve to increase access to healthy produce.

Increase employment opportunities: Leaders representing Eastbank communities discussed the position of hospital providers as major employers in the communities they serve. It is possible to increase the exposure of high school students to medical professions in order to generate an interest in medical training and education. Leaders also discussed job retraining for residents that are unemployed with the capacity to fill roles at local hospitals in order to increase employment opportunities for unemployed residents.

Increase access to accurate information about what services are available: Leaders discussed the dissemination of accurate information about what services are available in both Eastbank and Westbank communities. Leaders discussed the development of a resource that is accessible through a variety of methods (e.g., electronically, by phone, pamphlets offered in physicians' offices and other community locations, etc.) to maximize the functionality and accessibility for residents.

Leaders representing Westbank communities recommended that hospitals and health providers work with neighborhood associations to disseminate information about available services, as well as, preventive education on an ongoing basis. Leaders also recommended offering an internet-based searchable data warehouse of available resources that would be updated on a regular basis to ensure accuracy of information. Additionally, Leaders discussed promotion of the use of the Health Information Exchange among providers and residents alike.

Increase the collaboration between FQHCs and Hospitals: Leaders representing both Eastbank and Westbank regions discussed the need for FQHCs and hospitals to work together to refer patients for diagnostic and specialty care in hospitals, and then follow up with patients upon discharge with primary care and care coordination in local FQHC settings. Leaders believed that there is a need to increase the number of FQHCs in order to reduce the use of the emergency room in communities.

Increase the number of community health workers: Leaders recommended an increase in the use of community navigators and community health workers who provide information and guidance to residents related to care coordination and appropriate use of healthcare resources.

Increase collaboration in the community to meet needs: Leaders discussed the need to increase collaboration among hospitals, community based organizations, and community based providers. The discussion focused on the need to coordinate services to maximize the impact of what resources are available (e.g., screening, outreach, and free health services) and develop creative solutions to challenging problems. For example, leaders discussed private-public partnerships to support grocery stores in areas where corporate grocers may not be sustainable alone. Leaders representing Westbank communities discussed providing shopping tours and incentives to low income residents to participate in shopping tours, during which trained professionals would provide a walking tour through a local grocery store complete with healthy recipes and food preparation tips in order to teach residents about the importance and affordability of health nutrition.

Develop school-based behavioral health services and screening for youth: Leaders discussed the possibility of schools and other community based organizations collaborating to develop school-based behavioral health services (e.g., counselors, social workers, etc.) and other community based clinics using funds available through Medicaid/Bayou Health. Services should be easily accessible to seniors and youth alike.

Increase the access medically vulnerable individuals have to services: Leaders discussed the restrictions and barriers that medically vulnerable individuals (e.g., homeless, low-income, residents with a history of behavioral health and/or substance abuse, etc.) face when trying to secure shelter services. Leaders recommended a low barrier shelter to increase the access homeless residents have to services, including health care.

Provide incentives for healthy behaviors: Leaders discussed the benefits of incentives in changing behaviors as well as the impact of negative reinforcement. Leaders recommended that raising the cost of cigarettes may be effective when combined with reducing the access residents have to

cigarettes; providing incentives to smokers to quit and support services to assist during challenging periods when it is likely residents may revert back to unhealthy behaviors.

PROBLEM IDENTIFICATION:

During the community planning forum process, community leaders discussed regional health needs that centered around five themes. These were (in order of priority assigned):

- 1. Access to Health Services
- 2. Behavioral Health and Substance Abuse
- 3. Resource Awareness and Health Literacy
- 4. Access to Healthy Options (Westbank only)
- 5. Behaviors that Impact Health (Westbank only)

The following summary represents the most important topic areas within the community, discussed at the planning retreat, in order of priority. Community leaders believe the following concerns are the most pressing problems and are identified as the most manageable to address and tackle.

ACCESS TO HEALTH SERVICES:

Community leaders identified access to health services as a community health priority. Leaders from both regions focused discussions around Medicaid access issues, number of providers, and care coordination. Leaders representing Eastbank communities focused more on the social determinants of health (e.g., poverty, employment, etc.) and maternal health for women that are childbearing age; whereas leaders representing Westbank communities focused more on cultural competence.

Contributing Factors:

Eastbank Communities

- Residents that qualify for the Medicaid Waiver are not covered in hospitals and do not have prescription assistance, often leaving these residents without access to diagnostic and treatment options.
- Many residents in areas with high rates of poverty as well as seniors are not always able to
 afford prescription medication (e.g., uninsured, donut insurance coverage, etc.) without
 some form of assistance. There are very few resources available to subsidize prescription
 medications.
- There is a general lack of resources to meet the needs of residents with complex health needs and co-occurring health issues, which are often found among populations with higher poverty rates. Specifically, the discussion focused on the discharge process from local hospitals with limited resources for follow up care for the most medically vulnerable.
- Leaders discussed the lack of insurance as a barrier to maternal health prior to pregnancy.
 Women of childbearing age become eligible for Medicaid after they are pregnant, which is too late to improve overall health outcomes for the expecting mother and unborn baby.
 Leaders indicated that high rates of low birth weight births in Eastbank communities may be

- related to the lack of health maintenance prior to pregnancy due to a lack of insurance. Leaders believed that if women were able to manage their health with insurance prior to becoming pregnant, birth outcomes would improve.
- Specialty care is not always available (i.e., Pediatric neurosurgery, pediatric cardiology, endocrinology, trauma unit, diagnostics and treatment). There are additional challenges to accessing specialty care for residents that are uninsured, Medicaid recipients, and residents that live in communities with the highest rates of poverty.
- Transportation was discussed as a barrier to accessing health services for residents in Eastbank communities with the highest poverty rates.
- There is limited follow up for Medicaid populations that seek care in the hospital.
- Leaders discussed the need for care coordination for residents related to ensuring patients have access to treatment methods prescribed by the physician (i.e., medications, healthy nutrition, etc.) and providers following up with patients to improve implementation of treatment recommendations.

Westbank Communities

- There is not enough focus on preventive care; largely due to a lack of funding for these types of services. When residents are not practicing healthy preventive practices a community may end up with higher utilization of emergency and urgent care resources.
- There is a need to increase the number of FQHC clinics serving Westbank communities.
- Leaders felt that residents are often seeking primary care services in the emergency rooms at local hospitals due to a lack of resources that offer convenient, accessible health services to Medicaid recipients and uninsured residents.
- There is a need for cultural competence in health and other services being offered to residents in Westbank communities. Residents that are Latino and Vietnamese may not have access to services that they feel comfortable utilizing due to the services being offered (i.e., cultural sensitivity, multi-lingual interactions, etc.). Residents may not seek health services due to discomfort or a belief that the services will not be relevant to their individual needs.

Both

 There are residents who are not able to afford health insurance due to a lack of employment opportunities.

RESOURCE AWARENESS AND HEALTH LITERACY:

Community leaders discussed resource awareness and health literacy as a top health priority. Community leaders focused their discussions primarily on awareness of the health resources that exists

exist among providers and residents, system navigation issues, language/cultural barriers, the education of vulnerable populations, and language barriers.

Contributing Factors:

Westbank Communities:

- Leaders discussed the limited awareness of residents with the lowest educational attainment in their communities; noting that the capacity to advocate for themselves is greatly reduced as a result.
- Residents are not always aware of where health services are located and what services are available at each location.
- Residents are often inundated with information and may need to hear a message several
 times before they comprehend the message and become aware of the importance of
 implementing healthy behaviors or locating services. Leaders discussed that often
 information is disseminated too infrequently to be received by residents.
- Providers do not always offer culturally competent health services in the language of preference for residents that may have limited English speaking skills, which may lead to limited understanding of individual health status and/or treatment directives.
- Residents do not always know how to utilize insurances once they are insured, and may be seeking more costly care in the emergency room due to the need for health services that are more convenient.

Eastbank Communities:

- Leaders discussed the need to provide culturally competent services to residents that may be undocumented. Such services would include consideration of linguistic needs and fears/needs related to legal status.
- Residents do not always have access to healthy nutrition. When residents have access to
 health foods they are not always aware of how to prepare food in healthy ways. Leaders
 discussed the lack of outreach in areas of poverty providing both access to healthy foods
 and awareness about healthy preparation of foods.
- Leaders felt that there is a general lack of health and wellness promotion in some Eastbank communities related to obesity, diabetes, smoking, etc.
- Leaders discussed that there are many health resources in communities, but residents do
 not always know the location and the type of health services that are available at each
 provider, to meet individual needs.
- Socio-economic status may pose additional challenges to residents navigating available resources. For example, there are specific physicians that accept Medicaid insurance however; many health care professionals do not accept new patients with Medicaid coverage.
- Residents are not always being assessed to determine their level of understanding and health literacy.

BEHAVIORAL HEALTH AND SUBSTANCE ABUSE: (Eastbank only)

Behavioral health and substance abuse services were discussed at the Eastbank community forum. Community leaders focused their discussions primarily on the stigma associated with behavioral health diagnoses, the limited number of providers, and the need for care coordination.

Contributing Factors:

- There is a stigma associated with behavioral health diagnoses, which causes residents to resist seeking diagnosis and treatment.
- There are gaps in the available services for adults and children related to behavioral health and substance abuse diagnosis and treatment. Services that were noted as being inadequate in Eastbank communities were school-based screening and treatment of behavioral health issues in youth, early intervention services, inpatient services for adults and youth, and outpatient services for adults and youth. There was also discussion around the need for behavioral health providers that are both culturally competent and reflective of the cultures and languages spoken by residents in Eastbank communities (i.e., Spanish and Vietnamese dialects).
- Leaders discussed a fractured behavioral health system where residents are not seeking and
 receiving effective ongoing behavioral health and/or substance abuse treatment. Residents
 may be seen in the emergency room for crisis behavioral health and then have little follow
 up afterward. Care coordination is needed among behavioral health providers, substance
 abuse providers, and physical health providers.
- Behavioral health services are not always accessible and/or affordable for youth and seniors due to restricted mobility and limited access to reliable methods of transportation.

ACCESS TO HEALTHY OPTIONS: (Westbank only)

Community leaders identified access to healthy options as a community health priority. Leaders focused discussions around the need to increase awareness; the limited access residents have to healthy nutrition; safe exercise opportunities; and need for education and outreach.

- Residents in Westbank communities do not always have access to grocery stores with healthy food options (e.g., fresh produce) due to grocery stores shutting down is areas where poverty rates are the highest; thus, creating "food deserts".
- Residents are not always aware of how to prepare foods in healthy ways. Traditional diets are steeped in unhealthy preparation methods like fried and fatty foods.
- There are a limited number of farmers markets and community gardens in Westbank communities.

- Leaders felt that there are many opportunities for residents to exercise outdoors (e.g., local parks and walking trails) and indoors at a low cost (e.g., local gym memberships for ten dollars each month). However, residents are not always aware of the options available for healthy activities in Westbank communities.
- Residents cannot always afford gym memberships and exercising outside during the summer months can be dangerous for some populations (e.g., seniors).

BEHAVIORS THAT IMPACT HEALTH: (Westbank only)

The behaviors that impact health were discussed at the community forum as a top health priority. Community leaders focused their discussions primarily on the personal choice and behaviors of residents as they relate to health outcomes.

Contributing Factors:

- Residents may not always make the heathlest choices related to smoking, nutrition, and physical activity due to personal preferences, culture and tradition.
- Residents are not always aware of what is healthy and what is not due to a lack of information.
- Many residents began smoking prior to the availability of knowledge that it is bad for your health. Leaders recognized that it is difficult to quit smoking even when it is negatively impacting the health of residents that smoke.
- Changing behaviors can be challenging for many residents. This is reportedly true about
 weight loss, diet and exercise due to the lag in results. It can take several weeks of exercise
 before an individual begins to notice the impact of their behavior on overall health. Leaders
 felt that this dynamic can make it difficult for residents to remain committed to healthier
 behaviors.

Secondary Data

Tripp Umbach worked collaboratively with the University Medical Center New Orleans CHNA oversight committee to develop a secondary data process focused on three phases: collection, analysis and evaluation. Tripp Umbach obtained information on the demographics, health status and socio-economic and environmental factors related to the health and needs of residents from the multi-community service area of University Medical Center New Orleans. The process developed accurate comparisons to the state baseline of health measures utilizing the most current validated data. In addition to demographic data, specific attention was focused on two key community health index factors: Community Need Index (CNI) and Prevention Quality Indicators Index (PQI). Tripp Umbach provided additional comparisons and trend analysis for CNI data from 2012 to present.

Demographic Data

Tripp Umbach gathered data from Truven Health Analytics, Inc. to assess the demographics of the **University Medical Center New Orleans** Study Area. The University Medical Center New Orleans Study Area is defined to include the 45 zip codes across 11 parishes; for comparison purposes the University Medical Center New Orleans Study Area looks to compare to Jefferson Parish and Orleans Parish (parishes with the largest number of zip codes that make up the study area).

Demographic Profile – Key Findings:

- ✓ The University Medical Center New Orleans Study Area encompasses over 1 million residents.
- ✓ In 2015, the largest parish in the study area is Jefferson Parish with 435,154 residents in 2015.
- ✓ From 2015 to 2020, Orleans Parish is projected to experience the largest percentage change in population with a 9.2% increase (36,307 people).
- ✓ Orleans Parish is the smallest parish in the study area with only 392,762 residents.
- ✓ All of the study area is projected to have population growth in 2020.
- ✓ The gender breakdown for the study area is generally consistent across the parishes and similar to state and national norms.
- ✓ Jefferson Parish (15.4%) reports the largest population of residents aged 65 and older.
- ✓ Jefferson Parish reports the highest White, Non-Hispanic population percentage at 53.6%; this is lower than state (59.1%) and national norms (61.8%).

- ✓ Orleans Parish reports the highest Black, Non-Hispanic population across the study area parishes at 58.7%; University Medical Center New Orleans Study Area reports the second highest percentage at 37.4%.
- ✓ All of the study area parishes report lower rates of Hispanic residents as compared with the country (17.6%). Jefferson Parish reports the highest Hispanic population rate at 14%. Jefferson Parish also reports the highest percentage of Asian or Pacific Islander residents (4.1%) as compared with the other parishes in the study area.
- ✓ Jefferson Parish reports the highest rate of residents with 'Less than a high school' degree (6.7%); this is higher than the state (6.1%) and national (5.9%) rates.
- ✓ Orleans Parish reports the highest rate of residents with a Bachelor's degree or higher with 33.3%; this is higher than state (21.7%) and national (28.9%) norms.
- Orleans Parish reports the lowest average annual household income for the study area at \$59,059.
- ✓ Jefferson Parish reports the highest average annual household income compared to the other parishes in the study area at \$63,672; this is lower than state (\$64,209) and national norms (\$74,165).
- ✓ Orleans Parish reports the highest rates of households that earn less than \$15,000 per year (25.8%); in other words, more than a 1 in every 4 residents of these parishes have household incomes less than \$15,000 per year.

Community Needs Index (CNI)

In 2005 Catholic Healthcare West, in partnership with Thomson Reuters, pioneered the nation's first standardized Community Need Index (CNI).⁸ CNI was applied to quantify the severity of health disparity for every zip code in the study area based on specific barriers to health care access. Because the CNI considers multiple factors that are known to limit health care access, the tool may be more accurate and useful than other existing assessment methods in identifying and addressing the disproportionate unmet health-related needs of neighborhoods or zip code areas.

The CNI score is an average of five different barrier scores that measure various socio-economic indicators of each community using the 2015 source data. The five barriers are listed below along with the individual 2015 statistics that are analyzed for each barrier. These barriers, and the statistics that comprise them, were carefully chosen and tested individually by both Dignity Health and Truven Health:

0

⁸ Truven Health Analytics, Inc. 2015 Community Need Index.

1. Income Barrier

- a. Percentage of households below poverty line, with head of household age 65 or more
- b. Percentage of families with children under 18 below poverty line
- c. Percentage of single female-headed families with children under 18 below poverty line

2. Cultural Barrier

- a. Percentage of population that is minority (including Hispanic ethnicity)
- b. Percentage of population over age 5 that speaks English poorly or not at all

3. Education Barrier

a. Percentage of population over 25 without a high school diploma

4. Insurance Barrier

- a. Percentage of population in the labor force, aged 16 or more, without employment
- b. Percentage of population without health insurance

5. Housing Barrier

a. Percentage of households renting their home

Every populated zip code in the United States is assigned a barrier score of 1,2,3,4, or 5 depending upon the zip code's national rank (quintile). A score of 1 represents the lowest rank nationally for the statistics listed, while a score of 5 indicates the highest rank nationally. For example, zip codes that score a 1 for the Education Barrier contain highly educated populations; zip codes with a score of 5 have a very small percentage of high school graduates.

A total of 43 of the 45 zip code areas (95.6%) for the University Medical Center New Orleans Study Area fall above the median score for the scale (3.0). Being above the median for the scale indicates that these zip code areas have more than average the number of barriers to health care access.

Figure 8. University Medical Center New Orleans Study Area 2015 CNI Map

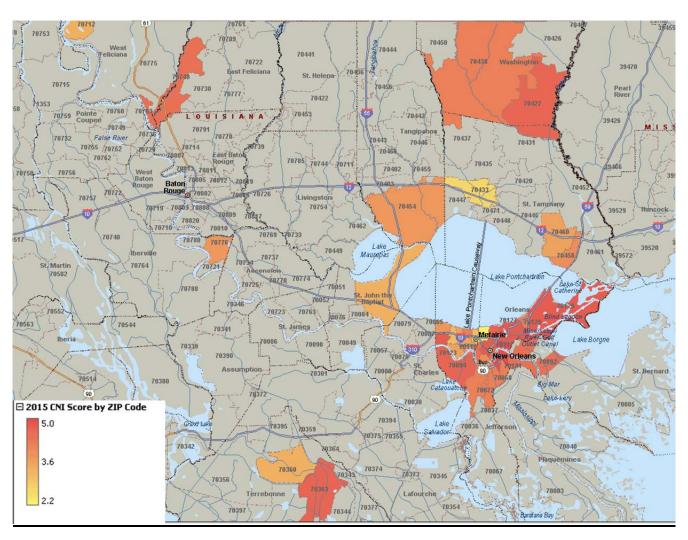


Table 4: University Medical Center New Orleans - 2015 CNI Detailed Data

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Zip	City	2015 CNI Score	Poverty 65+	Poverty Married w/ kids	Poverty Single w/kids	Limited English	Minority	No High School Diploma	Un- employed	Un- insured	Renting
70053	Gretna	5.0	20.7%	39.2%	52.3%	8.2%	55.7%	25.7%	10.9%	20.5%	52.3%
70112	New Orleans	5.0	33.5%	68.2%	77.9%	1.3%	69.5%	20.3%	17.1%	38.9%	88.4%
70113	New Orleans	5.0	36.0%	56.3%	60.9%	1.0%	85.5%	28.8%	23.8%	42.0%	78.3%
70114	New Orleans	5.0	24.4%	39.6%	60.3%	2.2%	82.0%	20.6%	15.3%	27.9%	56.7%
70117	New Orleans	5.0	29.5%	46.8%	63.6%	0.6%	78.5%	22.0%	14.3%	31.9%	50.6%
70062	Kenner	4.8	29.9%	28.3%	49.1%	7.8%	62.6%	23.3%	17.4%	17.7%	48.9%
70116	New Orleans	4.8	19.7%	54.7%	65.9%	1.2%	56.3%	16.5%	14.2%	24.8%	67.3%
70119	New Orleans	4.8	25.4%	48.3%	66.8%	3.4%	70.7%	19.2%	15.4%	31.1%	67.0%
70125	New Orleans	4.8	22.3%	40.4%	54.1%	0.8%	67.2%	14.8%	14.4%	25.4%	55.0%
70126	New Orleans	4.8	11.8%	46.4%	55.3%	1.0%	95.3%	18.4%	16.2%	29.5%	45.5%
70127	New Orleans	4.8	21.7%	44.5%	65.2%	1.2%	97.7%	15.1%	14.5%	30.6%	49.3%
70129	New Orleans	4.8	34.1%	40.7%	67.7%	16.6%	90.0%	32.6%	13.1%	29.1%	34.1%
70094	Westwego	4.6	16.8%	26.5%	44.9%	2.2%	57.5%	25.7%	15.2%	16.3%	31.0%
70122	New Orleans	4.6	15.8%	27.9%	42.4%	0.8%	86.8%	14.1%	14.1%	25.2%	38.3%
70363	Houma	4.6	7.0%	29.2%	48.8%	0.8%	47.1%	32.6%	9.0%	16.3%	28.7%

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Zip	City	2015 CNI Score	Poverty 65+	Poverty Married w/ kids	Poverty Single w/kids	Limited English	Minority	No High School Diploma	Un- employed	Un- insured	Renting
70427	Bogalusa	4.6	17.2%	33.9%	62.1%	0.3%	38.4%	22.9%	20.5%	21.9%	31.7%
70043	Chalmette	4.4	7.4%	22.9%	48.0%	2.4%	36.4%	17.0%	10.8%	17.1%	42.3%
70092	Violet	4.4	11.3%	25.2%	53.5%	0.3%	58.2%	21.5%	16.1%	15.3%	20.9%
70118	New Orleans	4.4	18.6%	25.3%	42.2%	0.9%	45.5%	11.7%	10.5%	23.1%	54.6%
70130	New Orleans	4.4	24.5%	30.6%	71.3%	0.9%	39.2%	11.1%	8.3%	21.1%	68.2%
70131	New Orleans	4.4	11.9%	24.3%	51.3%	1.9%	74.4%	12.9%	10.2%	17.5%	42.1%
70748	Jackson	4.4	17.8%	31.1%	70.3%	0.2%	52.9%	27.8%	8.0%	14.2%	24.1%
70002	Metairie	4.2	10.8%	19.9%	46.0%	9.5%	40.5%	13.0%	7.6%	12.5%	46.2%
70056	Gretna	4.2	12.6%	21.6%	45.3%	4.8%	62.1%	13.4%	7.1%	12.4%	39.9%
70058	Harvey	4.2	16.6%	26.4%	45.4%	5.9%	75.1%	18.8%	7.0%	14.3%	30.6%
70072	Marrero	4.2	18.5%	24.8%	53.3%	2.3%	54.3%	21.5%	6.8%	13.9%	24.4%
70128	New Orleans	4.2	16.3%	30.0%	52.2%	1.8%	97.9%	12.6%	11.9%	23.0%	31.2%
70438	Franklinton	4.2	25.6%	25.8%	48.1%	0.3%	28.6%	20.4%	11.7%	20.0%	20.8%
70115	New Orleans	4.0	14.9%	22.7%	43.7%	1.3%	37.0%	9.6%	10.6%	18.8%	56.3%
70121	New Orleans	4.0	13.7%	24.3%	36.6%	2.8%	37.4%	14.6%	7.7%	12.9%	46.0%
70458	Slidell	4.0	12.9%	22.5%	45.2%	0.7%	25.6%	14.3%	9.2%	10.4%	26.4%
70065	Kenner	3.8	7.2%	14.4%	39.2%	6.1%	50.1%	13.3%	7.2%	9.3%	36.3%
70454	Ponchatoula	3.8	20.6%	13.9%	37.7%	0.3%	20.7%	15.0%	8.9%	16.8%	22.1%
70776	Saint Gabriel	3.8	15.5%	8.4%	41.7%	0.2%	53.1%	27.7%	11.5%	7.7%	20.7%
70001	Metairie	3.6	14.4%	15.3%	30.0%	3.2%	32.2%	12.4%	5.5%	11.8%	50.1%
70006	Metairie	3.6	5.4%	17.0%	37.6%	5.0%	34.9%	13.7%	8.2%	10.4%	34.0%
70123	New Orleans	3.6	8.7%	14.2%	35.9%	1.0%	20.3%	10.5%	4.4%	10.1%	39.4%
70460	Slidell	3.6	11.0%	21.5%	42.1%	1.3%	39.3%	16.0%	9.7%	11.4%	21.4%
70068	LA Place	3.4	13.7%	15.8%	27.5%	1.4%	58.1%	16.1%	9.1%	10.2%	19.3%
70360	Houma	3.4	7.7%	14.1%	40.2%	0.6%	24.9%	14.0%	5.7%	10.0%	29.6%
70712	Angola	3.4	9.7%	18.2%	16.7%	0.5%	1.9%	35.4%	19.3%	9.4%	63.5%
70003	Metairie	3.2	10.7%	13.7%	30.3%	2.8%	29.8%	13.2%	7.6%	11.5%	24.3%
70005	Metairie	3.2	9.4%	6.1%	30.4%	4.1%	16.8%	8.6%	5.9%	10.8%	37.2%
70433	Covington	2.8	8.2%	17.6%	42.6%	0.7%	18.0%	8.5%	7.1%	9.5%	22.4%
70124	New Orleans	2.4	11.2%	4.5%	13.2%	1.4%	16.3%	3.7%	4.0%	10.1%	31.9%

For the study area there are 5 zip code areas with CNI scores of 5.0, indicating significant barriers to health care access. These zip code areas are: 70053 – Gretna, 70112, 70113, 70114, and 70117 – New Orleans.

- Zip code area 70112 in New Orleans reports the highest rates for the study area for: married parents with children living in poverty (68.2%), single parents with children living in poverty (77.9%), and residents renting (88.4%).
- Zip code area 70113 in New Orleans reports the highest rates of residents aged 65 and older living in poverty (36.0%), residents who are unemployed (23.8%), and residents who are uninsured (42.0%) as compared with the other zips in the study area.
- Zip code area 70129, also, in New Orleans, reports the highest rate of residents with limited English proficiency (16.6%).
- Zip code area 70712 in Angola reports the highest rate for the study area for residents without a high school diploma (35.4%).

Interim LSU Hospital

Study Area

• 97.9% of zip code area 70128 in New Orleans identify themselves as a minority; this is the highest for the study area.

On the other end of the spectrum, the lowest CNI score for the study area is 1.8 in 70447 – Madisonville and 70448 – Mandeville.

- Zip code areas 70748 Jackson and 70776 Saint Gabriel report the lowest rates of residents with limited English proficiency at 0.2%.
- Zip code area 70776 Saint Gabriel also reports the lowest rate for uninsured residents at 7.7%.
- Zip code area 70001 Metairie reports the lowest rate of residents aged 65+ living in poverty at 5.4%.
- Zip code area 70068 LA Place reports the lowest rate of residents renting for the study area at only 19.3%.
- Zip code area 70712 Angola reports the lowest minority rate for the study area at only 1.9%.
- Zip code area 70124 New Orleans reports the lowest rates for married residents with children living in poverty (4.5%), single residents with children living in poverty (13.2%), residents with no high school diploma (3.7%), and unemployed residents (4.0%).

Jefferson

Figure 9. Overall CNI Values - University Medical Center New Orleans and Parishes

Orleans

<u>Figure 10. CNI Trending - University Medical Center New Orleans Study Area 2011 - 2015 CNI</u>

Difference Map

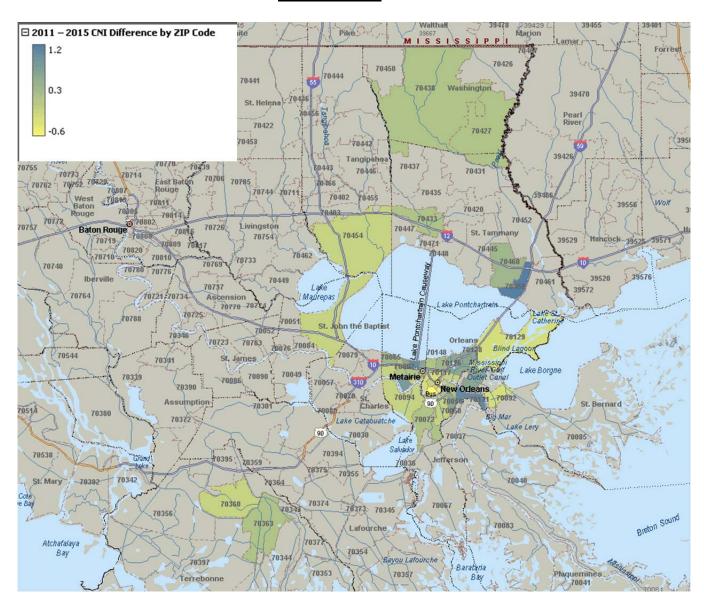


Table 5. CNI Trending - University Medical Center New Orleans – 2011 to 2015 CNI Comparison

Zip	Community Name	Parish	Income Rank	Culture Rank	Education Rank	Insurance Rank	Housing Rank	2015 CNI Score	2011 CNI Score	Diff. 2011 – 2015
70053	Gretna	Jefferson Parish	5	5	5	5	5	5.0	4.8	+ 0.2
70112	New Orleans	Orleans Parish	5	5	5	5	5	5.0	5.0	0.0
70113	New Orleans	Orleans Parish	5	5	5	5	5	5.0	5.0	0.0
70114	New Orleans	Orleans Parish	5	5	5	5	5	5.0	4.8	+ 0.2
70117	New Orleans	Orleans Parish	5	5	5	5	5	5.0	5.0	0.0
70062	Kenner	Jefferson Parish	4	5	5	5	5	4.8	4.8	0.0

Community Health Needs Assessment University Medical Center New Orleans

Tripp Umbach

Zip	Community	Parish	Income	Culture	Education	Insurance	Housing	2015 CNI	2011 CNI	Diff. 2011 –
ZIP	Name	ransn	Rank	Rank	Rank	Rank	Rank	Score	Score	2011 –
70116	New Orleans	Orleans Parish	5	5	4	5	5	4.8	4.8	0.0
70119	New Orleans	Orleans Parish	5	5	4	5	5	4.8	5.0	- 0.2
70125	New Orleans	Orleans Parish	5	5	4	5	5	4.8	4.8	0.0
70126	New Orleans	Orleans Parish	5	5	4	5	5	4.8	4.2	+ 0.6
70127	New Orleans	Orleans Parish	5	5	4	5	5	4.8	4.2	+ 0.6
70129	New Orleans	Orleans Parish	5	5	5	5	4	4.8	5.0	- 0.2
70094	Westwego	Jefferson Parish	4	5	5	5	4	4.6	4.6	0.0
70122	New Orleans	Orleans Parish	4	5	4	5	5	4.6	4.2	+ 0.4
70363	Houma	Terrebonne Parish	4	5	5	5	4	4.6	4.4	+ 0.2
70427	Bogalusa	Washington Parish	5	4	5	5	4	4.6	4.4	+ 0.2
70043	Chalmette	St. Bernard Parish	4	4	4	5	5	4.4	3.8	+ 0.6
70092	Violet	St. Bernard Parish	4	5	5	5	3	4.4	4.6	- 0.2
70118	New Orleans	Orleans Parish	4	5	3	5	5	4.4	4.6	- 0.2
70130	New Orleans	Orleans Parish	5	4	3	5	5	4.4	4.8	- 0.4
70131	New Orleans	Orleans Parish	4	5	3	5	5	4.4	3.4	+ 1.0
70748	Jackson	East Feliciana Parish	5	5	5	4	3	4.4	n/a	n/a
70002	Metairie	Jefferson Parish	4	5	3	4	5	4.2	3.2	+ 1.0
70056	Gretna	Jefferson Parish	4	5	3	4	5	4.2	3.6	+ 0.6
70058	Harvey	Jefferson Parish	4	5	4	4	4	4.2	4.2	0.0
70072	Marrero	Jefferson Parish	4	5	5	4	3	4.2	4.0	+ 0.2
70128	New Orleans	Orleans Parish	4	5	3	5	4	4.2	3.6	+ 0.6
70438	Franklinton	Washington Parish	4	4	5	5	3	4.2	4.0	+ 0.2
70115	New Orleans	Orleans Parish	4	4	2	5	5	4.0	4.6	- 0.6
70121	New Orleans	Jefferson Parish	3	4	4	4	5	4.0	4.0	0.0
70458	Slidell	St. Tammany Parish	4	4	4	4	4	4.0	2.8	+ 1.2
70065	Kenner	Jefferson Parish	3	5	3	3	5	3.8	3.4	+ 0.4
70454	Ponchatoula	Tangipahoa Parish	3	4	4	5	3	3.8	3.8	0.0
70776	Saint Gabriel	Iberville Parish	3	5	5	3	3	3.8	n/a	n/a
70001	Metairie	Jefferson Parish	2	4	3	4	5	3.6	3.4	+ 0.2
70006	Metairie	Jefferson Parish	3	4	3	4	4	3.6	3.0	+ 0.6
70123	New Orleans	Jefferson Parish	3	4	3	3	5	3.6	2.8	+ 0.8
70460	Slidell	St. Tammany Parish	3	4	4	4	3	3.6	3.2	+ 0.4
70068	LA Place	St. John the Baptist Parish	2	5	4	4	2	3.4	3.4	0.0
70360	Houma	Terrebonne Parish	3	4	3	3	4	3.4	3.4	0.0
70712	Angola	West Feliciana Parish	2	1	5	4	5	3.4	n/a	n/a
70003	Metairie	Jefferson Parish	2	4	3	4	3	3.2	3.0	+ 0.2
70005	Metairie	Jefferson Parish	2	3	2	4	5	3.2	2.6	+ 0.6
70433	Covington	St. Tammany Parish	3	3	2	3	3	2.8	2.6	+ 0.2
70124	New Orleans	Orleans Parish	1	3	1	3	4	2.4	2.2	+ 0.2

Across the 45 University Medical Center New Orleans study area zip codes:

- ✓ 24 experienced a rise in their CNI score from 2011 to 2015, indicating a shift to more barriers to health care access (red, positive values)
- ✓ 12 remained the same from 2011 to 2015
- ✓ Six experienced a decline in their CNI score from 2011 to 2015, indicating a shift to fewer barriers to health care access (green, negative values)
- ✓ Three did not have comparable 2011 data (n/a values)

Zip code area 70458 – Slidell experienced the largest rise in CNI score (going from 2.8 to 4.0); while 70115 – New Orleans experienced the largest decline in CNI score (going from 4.6 to 4.0).

Prevention Quality Indicators (PQI) and Pediatric Quality Indicators (PDI)⁹

The Prevention Quality Indicators index (PQI) was developed by the Agency for Healthcare Research and Quality (AHRQ). PQI is similarly referred to as Ambulatory Care Sensitive Hospitalizations. The quality indicator rates are derived from inpatient discharges by zip code using ICD diagnosis and procedure codes. There are 14 quality indicators.

The PQI index identifies potentially avoidable hospitalizations for the benefit of targeting priorities and overall community health. The index measures number of residents living in the hospital service area, which are hospitalized for one of the following reasons (note: this does not indicate that the hospitalization took place at University Medical Center New Orleans). Lower index scores represent fewer admissions for each of the PQIs.

PQI Subgroups:

- 1. Chronic Lung Conditions
 - ✓ PQI 5 Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults (40+) Admission Rate¹⁰
 - ✓ PQI 15 Asthma in Younger Adults Admission Rate¹¹

2. Diabetes

- ✓ PQI 1 Diabetes Short-Term Complications Admission Rate
- ✓ PQI 3 Diabetes Long-Term Complications Admission Rate
- ✓ PQI 14 Uncontrolled Diabetes Admission Rate
- ✓ PQI 16 Lower Extremity Amoutation Rate Among Diabetic Patients

3. Heart Conditions

- ✓ PQI 7 Hypertension Admission Rate
- ✓ PQI 8 Congestive Heart Failure Admission Rate

⁹ PQI and PDI values were calculated including all relevant zip-code values from Louisiana; Mississippi data could not be obtained and was therefore not included.

¹⁰ PQI 5 for past study was COPD in 18+ population; PQI 5 for current study is now restricted to COPD and Asthma in 40+ population

¹¹ PQI 15 for past study was Adult Asthma in 18+ population; PQI 15 for current study is now restricted to Asthma in 18-39 population ("Younger").

✓ PQI 13 Angina Without Procedure Admission Rate

4. Other Conditions

- ✓ PQI 2 Perforated Appendix Admission Rate¹²
- ✓ PQI 9 Low Birth Weight Rate¹³
- ✓ PQI 10 Dehydration Admission Rate
- ✓ PQI 11 Bacterial Pneumonia Admission Rate
- ✓ PQI 12 Urinary Tract Infection Admission Rate

Table 6. Prevention Quality Indicators (PQI) University Medical Center New Orleans/ LA / U.S.A. 2015										
Prevention Quality Indicators (PQI)	University Medical Center New Orleans Study Area 2015 PQI	LA 2015 PQI	U.S.A. 2015 PQI	University Medical Center New Orleans Study Area – LA Diff.	University Medical Center New Orleans Study Area – U.S.A. Diff.					
Chronic Lung Conditions										
COPD or Adult Asthma (PQI5)	465.03	531.03	495.71	- 66.00	- 30.68					
Asthma in Younger Adults (PQI15)	34.60	42.83	46.02	- 8.23	- 11.42					
Diabetes										
Diabetes Short-Term Complications (PQI1)	102.23	98.10	63.86	+ 4.13	+ 38.37					
Diabetes Long-Term Complications (PQI3)	130.18	126.06	105.72	+ 4.12	+ 24.46					
Uncontrolled Diabetes (PQI14)	10.52	15.57	15.72	- 5.05	- 5.20					
Lower Extremity Amputation Among Diabetics (PQI16)	14.86	12.74	16.50	+ 2.12	- 1.64					
Heart Conditions										
Hypertension (PQI7)	40.40	46.06	54.27	- 5.66	- 13.87					
Congestive Heart Failure (PQI8)	381.36	404.11	321.38	- 22.75	+ 59.98					
Angina Without Procedure (PQI13)	7.80	13.74	13.34	- 5.94	- 5.54					
Other Conditions										
Perforated Appendix (PQI2)	423.91	322.43	323.43	+ 101.48	+ 100.48					
Low Birth Weight (PQI9)	97.30	86.51	62.14	+ 10.79	+ 35.16					
Dehydration (PQI10)	83.34	124.53	135.70	- 41.19	- 52.36					
Bacterial Pneumonia (PQI11)	209.44	305.80	248.19	- 96.36	- 38.75					
Urinary Tract Infection (PQI12)	177.31	209.39	167.01	- 32.08	+ 10.30					

Key Findings from 2015 PQI Data:

-

¹² PQI 2 changed from Perforated Appendix in Males 18+ for the past study to Perforated Appendix in Total 18+ population as a rate per 1,000 ICD-9 code admissions for appendicitis. This shift has changed the values for this measure drastically and therefore, Tripp Umbach did not adjust.

¹³ Although not clearly explained by the AHRQ, it would seem that a definition of Newborn population has shifted for PQI 9 because the values are drastically lower in 2014 than in previous years (2011). This has shifted PQI 9 values drastically. Tripp Umbach did not adjust.

- The PQI measures in which the study area reports higher preventable admission rates than the State of Louisiana is for:
 - Diabetes Short-TermComplications
 - ✓ Diabetes Long-Term Complications

- Lower Extremity Amputation
 Among Diabetics
- ✓ Perforated Appendix
- ✓ Low Birth Weight
- When comparing the PQI data to the national rates, the study area reports higher preventable hospital admissions for:
 - Diabetes, Short-TermComplications
 - ✓ Diabetes, Long-Term Complications

- ✓ Congestive Heart Failure
- ✓ Perforated Appendix
- ✓ Low Birth Weight
- ✓ Urinary Tract Infection
- There are a handful of PQI values in which the Study Area as well as a majority of the study area parishes report higher rates than is seen nationally (indicating areas in which there are more preventable hospital admissions than the national norm), these include:
 - Diabetes, Short-Term Complications
 - Diabetes, Long-Term Complications

- ✓ Congestive Heart Failure
- ✓ Perforated Appendix
- ✓ Low Birth Weight
- ✓ Urinary Tract Infection
- There are also a number of PQI measures in which the Study Area and many of the
 parishes in the study area report lower values than the nation (indicating areas in which
 there are fewer preventable hospital admissions than the national norm), these include:
 - ✓ COPD or Adult Asthma
 - ✓ Asthma in Younger Adults
 - ✓ Uncontrolled Diabetes
 - Lower Extremity Amputation among Diabetics

- Hypertension (all of the areas are below the national rate)
- ✓ Angina without Procedure
- ✓ Dehydration
- Bacterial Pneumonia

Pediatric Quality Indicators Overview

The Pediatric Quality Indicators (PDIs) are a set of measures that can be used with hospital inpatient discharge data to provide a perspective on the quality of pediatric healthcare. Specifically, PDIs screen for problems that pediatric patients experience as a result of exposure to the healthcare system and that may be amenable to prevention by changes at the system or provider level.

Development of quality indicators for the pediatric population involves many of the same challenges associated with the development of quality indicators for the adult population. These challenges include the need to carefully define indicators using administrative data, establish validity and reliability, detect bias and design appropriate risk adjustment, and

overcome challenges of implementation and use. However, the special population of children invokes additional, special challenges. Four factors—differential epidemiology of child healthcare relative to adult healthcare, dependency, demographics, and development—can pervade all aspects of children's healthcare; simply applying adult indicators to younger age ranges is insufficient.

This PDIs focus on potentially preventable complications and iatrogenic events for pediatric patients treated in hospitals, and on preventable hospitalizations among pediatric patients.

The PDIs apply to the special characteristics of the pediatric population; screen for problems that pediatric patients experience as a result of exposure to the healthcare system and that may be amenable to prevention by changes at the provider level or area level; and, help to evaluate preventive care for children in an outpatient setting, and most children are rarely hospitalized.

PDI Subgroups:

- ✓ PDI 14 Asthma Admission Rate (per 100,000 population ages 2 17)
- ✓ PDI 15 Diabetes, Short-Term Complications Admission Rate (per 100,000 population ages 6 17)
- ✓ PDI 16 Gastroenteritis Admission Rate (per 100,000 population ages 3 months –
 17 years)
- ✓ PDI 17 Perforated Appendix Admission Rate (per 1,000 admissions ages 1 17)
- ✓ PDI 18 Urinary Tract Infection Admission Rate (per 100,000 population ages 3 months 17 years)

Key Findings from PDI Data:

- Orleans Parish reports the highest rate of preventable hospitalizations due to Asthma for children aged 2 to 17 at 223.44 per 100,000 population; almost double the national rate of 117.37.
- Orleans Parish and the University Medical Center New Orleans Study Area report the highest rates of diabetes, short-term complications for those aged 6 to 17 years old for the study area (42.41 and 41.77 respectively); these rates are higher than the national rate of 23.89.
- Jefferson Parish reports the highest rate of gastroenteritis for the study area at 24.96 per 100,000 population aged 3 months to 17 years; the national rate is 47.28.
- Jefferson Parish reports the highest rate of preventable hospitalizations due to perforated appendix for ages 1 to 17 years old with 431.37 per 100,000 admissions.

• Jefferson Parish is the only parish to report a value higher than the national rate of preventable hospital admissions due to urinary tract infections for those aged 3 months to 17 years with 31.01 per 100,000 population being admitted while the national rate stands at 29.64.

Community Commons Data

Tripp Umbach gathered data from Community Commons related to social and economic factors, physical environment, clinical care, and health behaviors for the parishes of interest for the University Medical Center New Orleans (UMCNO) CHNA.¹⁴ The data is presented in the aforementioned categories below.

Free/Reduced Price Lunch Eligible

 Orleans Parish reports the highest rate of public school students who are eligible for free or reduced lunch eligible but has seen a decline in this rate (81.02%).

Food Insecure Population

- This indicator reports the estimated percentage of the population that experienced food insecurity at some point during the report year. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.
- Orleans Parish reports higher food insecurity rates than the State of Louisiana at 22.33% of the population.

Graduation Rate

- This indicator is relevant because research suggests education is one the strongest predictors of health (Freudenberg & Ruglis, 2007).
- Jefferson Parish reports the lowest overall graduation rate as well as the lowest on-time graduation rate throughout the study area parishes (70.0% overall graduation, 61.5% on-time graduation).
- The Healthy People 2020 Target for on-time graduation is 82.4% all of the study area parishes and the states fall below this goal.

Households with No Motor Vehicle

¹⁴ Community Commons. http://www.communitycommons.org/ Accessed 06/08/2015.

Orleans Parish reports the highest rate of households with no motor vehicle (18.48%).
 Orleans Parish includes the City of New Orleans which has more public transportation options for residents.

Cost Burdened Households

- This indicator reports the percentage of the households where housing costs exceed 30% of total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. The information offers a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels.
- Orleans Parish reports a higher percentage of cost-burdened households as compared with the country at 45.07% and the highest rate for the study area. All of the other parishes in the study area report lower rates of cost-burdened households than the national average (35.47%).

Public Assistance

- This indicator reports the percentage households receiving public assistance income.
 Public assistance income includes general assistance and Temporary Assistance to Needy Families (TANF). Separate payments received for hospital or other medical care (vendor payments) are excluded. This does not include Supplemental Security Income (SSI) or noncash benefits such as Food Stamps.
- All of the study area parishes report lower rates of households receiving public assistance income than the rates seen for the country.
- Orleans Parish reports the highest rate of households receiving public assistance at 1.93%. Jefferson Parish reports the lowest rate of households receiving public assistance at only 1.39%.
- Jefferson Parish reports the highest average amount of public assistance received by households at \$3,323.

SNAP Benefits

Orleans Parish reports the highest rate of households receiving SNAP benefits across the study area at 20.70%.

- The African American / Black population of Orleans and Jefferson parishes report a high rate of receiving SNAP benefits at 31.48% and 27.10% respectively.
- The American Indian / Alaska Native, African-American / Black, and Multiple race populations of the study area see some of the highest rates of receiving SNAP benefits.
 The Non-Hispanic White, Asian, and Hispanic/Latino populations report some of the lowest rates of receiving SNAP benefits for the study area.

Households Receiving SNAP Benefits, Disparity Index

- The Index of Disparity (ID) measures the magnitude of variation in indicator percentages
 across population groups. Specifically, the index of disparity is defined as "the average
 of the absolute differences between rates for specific groups within a population and
 the overall population rate, divided by the rate for the overall population and expressed
 as a percentage".
- All of the study area parishes report "High Disparity" in households receiving SNAP benefits (disparity score over 40).
- Orleans Parish reports the highest SNAP Benefits Disparity Index score for the study area at 45.64 with Jefferson Parish a close second at 41.05.

Medicaid

- Orleans Parish reports the highest rate of Insured Residents Receiving Medicaid at 31.27%; this rate is higher than state (25.70%) and national (20.21%) rates.
- The population under the age of 18 receives the highest rates of Medicaid assistance across all of the study area parishes.
- Orleans Parish reports the highest rate among the study area parishes of residents aged 65 and older receiving Medicaid (24.01%).

Insurance

- Orleans Parish reports the highest rate of uninsured adults for the study area at 26.3%. Jefferson Parish is a close second at 26.2%. These rates are higher than state (25.0%) and national (20.8%) norms.
- Orleans Parish has experienced drastic declines in its rates of uninsured adults going from a high of 32.20% in 2009 to its lowest rate in the most recent data year of 2012 reporting 26.30%.
- Jefferson Parish reports the highest rate of uninsured children across the study area parishes at 5.6%.
- Similar to uninsured adults, Orleans Parish reports a high rate of uninsured children for the study area at 5.0%.
- Both parishes report lower rate of uninsured children as compared with the country (7.5%)
- From 2011 to 2012, all of the study area parishes reported declines in the rates of uninsured children (14 of the 16).
 - ✓ All of the study area parishes and the state fall below the rate for the country (7.54%).

Uninsured Population

- For most of the study area parishes, men are more likely to be uninsured than women.
- Those aged 18 64 are more likely to be uninsured as compared with those under 18 or those 65 and older.
- Residents of Hispanic or Latino ethnicity are more likely to be uninsured than their counterparts.
- 70.3% of the Native Hawaiian or Pacific Islander population in Orleans Parish is uninsured.
- Residents reporting "Some other race", for the majority of the study area parishes, have the highest rates of being uninsured.

Social Support

 Orleans Parish exhibits the highest rate of residents with a lack of social or emotional support at 24.50% of the population; this is higher than state (21.7%) and national (20.68%) norms.

Poverty

- Orleans Parish shows the highest rate of population that is living below the federal poverty level (100% FPL) at 27.34% of the population; this rate is higher than state (19.08%) and national (15.37%) norms.
- Across all of the study area regions, women are more likely than men to be living in poverty.
- 29.53% of female residents of Orleans Parish are living in poverty (the highest rate across the study area).
- In general, the Hispanic/Latino population of the study area is living in poverty at higher rates than their counterparts (Orleans Parish is the exception).
- In Orleans Parish, 26.01% of the Hispanic/Latino population is living below the federal poverty level (the highest for the study area).
- The Native Hawaiian or Pacific Islander populations of Orleans Parish experience some of the highest rates of living in poverty as compared with the other study area parishes/counties (80.89%).
- For populations living below 100% of the federal poverty level, Orleans reported the highest rate (seen above). For populations living below 200% of the federal poverty level, this is consistent; Orleans Parish reports the highest rate at 48.41%.

Children in Poverty

- More than 40% of the children and adolescents (under 18) in Orleans Parish are living in poverty (below 100% FPL).
- Male and female children tend to live in poverty at similar rates in the study area.

- Similar to gender, the ethnicity of a child varies in whether or not it is related to living in poverty or not. For adults, the Hispanic/Latino population is more likely to live in poverty than their counterparts; however, for children, a both parishes in the study area report higher rates of poverty in the Non-Hispanic population.
- Orleans Parish reports the highest rate of Not Hispanic/Latino children living in poverty at 40.71%.
- Within the study area the Native Hawaiian or Pacific Islander population in Orleans Parish reports 100% of their population is living in poverty.
- The Native Hawaiian / Pacific Islander, Native American / Alaska Native populations, and the African-American / Black population sees some of the highest rates of poverty across the study area.
- Similar to children living in poverty below the 100% FPL, Orleans Parish reports the highest rate of children living below 200% of the federal poverty level as well (62.42%).

Teen Birth Rate

- In general, the study area has seen steady declines in the rates of births to teen mothers (aged 15-19).
 - ✓ Orleans Parish reported slight rises in the teen birth rates from the 2005-2011 5-year estimate census to the 2006-2012 5-year estimate census.
- Jefferson Parish reports the highest teen birth rate among Non-Hispanic White girls (28.9 per 1,000 pop.).
- Jefferson Parish reports the highest teen birth rate among Non-Hispanic Black girls (61.5 per 1,000 pop.).
- Jefferson Parish reports the highest teen birth rate among Hispanic/Latino girls (64.4 per 1,000 pop.).

Unemployment Rate

- In 2013, Jefferson Parish reported the lowest unemployment rates for the study area at 6.7%.
- For the most current reported data, Orleans Parish reported the highest unemployment rates at 6.4% (LA = 6.4%, USA = 5.6%).

Violent Crime

 Orleans Parish reports the highest violent crime rate across the study area counties at 789.05 per 100,000 population; this rate is higher than state (532.9) and national (395.5) rates.

Fast Food

• In 2013, Orleans Parish reported the highest rate of fast food restaurants per population at 91.91 per 100,000 pop.; Jefferson Parish follows at 83.23 per pop.; these rates are higher than state (71.56) and national (72.74) norms.

Grocery Stores

• In 2013, Orleans Parish reported the highest rate of grocery stores per population at 42.17 per 100,000 pop.; Jefferson Parish follows at 23.35 per 100,000 pop.; both are higher than state (21.88) and national (21.2) norms.

Recreation and Fitness Facilities

• Both Jefferson and Orleans parishes report a high rate of recreation and fitness facilities at 11.79 and 10.76 per 100,000 pop.; both are higher than state (9.6) and national (9.72) norms.

Housing

- All of the study area parishes have lower rates of HUD-Assisted housing units per 10,000 units.
- Orleans Parish reports the highest rate for the study area at 1,450.06 per 10,000 units.
- Jefferson Parish reports the lowest rate of HUD-Assisted housing units at 482.2 per 10,000 units.
- Housing Unit Age (below) This indicator reports, for a given geographic area, the median year in which all housing units (vacant and occupied) were first constructed.
- Orleans Parish has the highest median housing age at 58 years old.
- Orleans Parish reports the highest rate of overcrowded housing at 6.9%; this is higher than state (3.96%) and national (4.21%) norms.
- Orleans Parish reports the highest rate, for the study area, of housing units with substandard conditions (45.68%). The state rate is 30.09% and the national rate is 36.11%.
- Orleans Parish reports the highest rate of housing units lacking complete plumbing facilities at 0.81% (LA = 0.54%, USA = 0.49%).
- Orleans Parish reports the highest rate of housing units lacking complete kitchen facilities at 10.46% (LA = 4.66%, USA = 3%).
- Orleans Parish reports the highest rate, by far, of housing units lacking telephone facilities at 4.41% (LA = 2.91%, USA = 2.44%).
- Orleans Parish reports the highest rate of vacant housing for the study area at 21.95%; this is higher than state (13.5%) and national (12.45%) norms.

Low Food Access

- The low-income populations of Orleans Parish experiences the highest rates of low food access (12.54%). This rate is higher than the rates seen for the state (10.82%) and nation (6.27%).
- Orleans Parish experiences the highest rate of population with low or no healthy food access; this parish has a disparity index of 12.98 compared to 19.31 for the State of Louisiana and a national rate of 16.59.
- Within the parish of Orleans, the Non-Hispanic Black population experiences the highest rate of low food access (80.1%) followed by the Non-Hispanic Asian population (78.9%), and the Non-Hispanic Other population (78.9%).
- Orleans Parish has the highest rate of SNAP-Authorized retailers for the study area at 106.16 per 100,000 population.
- Jefferson Parish reports the fewest SNAP-Authorized retailers for the study area at only 94.79 per 100,000 population.
- Orleans Parish has the highest rate of WIC-Authorized retailers for the study area at 18.3 per 100,000 population; the national rate being 15.6 per 100,000 pop
- Jefferson Parish reports the fewest WIC-Authorized retailers for the study area with 9.01 per 100,000 population.
- Orleans Parish reports the highest rate of residents using public transportation to commute to work (7.06%); higher than state (1.30%) and national (5.01%) norms. This can be attributed to the urban nature of Orleans Parish including the City of New Orleans.

Primary Care Physicians

- Jefferson Parish reports the highest number of physicians across the study area parishes/counties at 383.
- Orleans Parish report the fewest physicians with 323.
- Orleans Parish has the highest primary care physician (PCP) rate per 100,000 population at 143.26 in 2012.
- Jefferson Parish reports the lowest rate of PCPs per 100,000 population at only 112.3 in 2012.

Dentists

- Jefferson Parish reports the highest number of dentists across the study area parishes at 344.
- Orleans Parish reports the fewest dentists with only 238.
- Jefferson Parish has the highest dentist rate per 100,000 population at 79.12 in 2013.
- The State of Louisiana reports the lowest rate of dentists per 100,000 population for the study area at only 50.61 in 2013.

Mammogram – Medicare Enrollees

- Both Jefferson and Orleans parishes in the study area have seen a decline in the rates of women with Medicare receiving a mammogram.
- Orleans Parish reports the lowest rate for the study area at 59.76%; about half of the female Medicare population in Orleans did not have a mammogram in the past 2 years.

Cancer Screening – Pap Test

- The State of Louisiana reports 78.1% of their populations as having received a Pap Test; this rate is slightly lower than the national rate of 78.48%.
- Jefferson Parish reports the lowest rate for the study area of female residents aged 18 and older receiving a Pap Test at 78.40%.

Cancer Screening – Sigmoidoscopy or Colonoscopy

- 61.34% of the national age-appropriate population (aged 50 and older) receives a sigmoidoscopy or colonoscopy; across the State of Louisiana only 54.5% receive this screening.
- Orleans Parish reports the lowest rate of residents receiving a sigmoidoscopy or colonoscopy at only 55.90%.

HIV/AIDS

- The national rate of the population having never been tested for HIV/AIDS is 62.79%; in Louisiana 56.23% of the population has never been tested.
- Jefferson Parish reports the highest rate of residents having never been tested for HIV/AIDS across the study area at 57.87%.

Pneumonia Vaccine

• Orleans Parish reports the lowest rate of residents having received the pneumonia vaccination at 61.80%.

Diabetes Screening

• The national rate of diabetes screening in 2012 was 84.57% of the diabetic Medicare population. Both of the study area parishes report rates lower than this, with the lowest being 76.8% for Orleans Parish.

High Blood Pressure

- All of the parishes in the study area report lower rates of adult residents with high blood pressure who are not taking their medication than the national average; the national rate being 21.74%.
- Jefferson Parish reports the highest rate of adult residents with high blood pressure not taking their medication for the study area at 20.33%.

Dental Exam

• Orleans Parish reports the highest rates of adults who have not had a dental exam for the study area at 38.46%; the national rate is 30.15%.

Federally Qualified Health Centers (FQHCs)

- Orleans Parish has a very high rate of federally qualified health centers per 100,000 population at 3.78 (more than the national rate of 1.92).
- Jefferson Parish reports the lowest rate of FQHCs per population at 1.39 per 100,000.

Regular Doctor

- Across the country, 22.07% of residents report not having a regular doctor (77.93% have a regular doctor); in Louisiana the rate is 24.09%.
- Orleans Parish reports the highest rate of residents who do not have a regular doctor at 30.06%.

Population Living in an HPSA (Health Professional Shortage Area)

Orleans Parish is a health care professional shortage area (HPSA) designated parish;
 therefore 100% of their populations live in an HPSA designated area.

Leisure Time Physical Activity

- Jefferson Parish reports the highest rate of population with no leisure time activity (30.50%) for the study area; higher than state (29.8%) and national (22.64%) norms.
- All of the parishes of the study area report higher rates than the national norms for population who do not partake in leisure time physical activity.
- Men consistently report lower rates of not partaking in leisure time physical activity than women; this may be a reporting difference or that women do not actually partake in leisure time physical activity as men.
- Jefferson Parish, currently with the highest rate of population not partaking in leisure time physical activity, has seen a somewhat steady rise in this rate since 2011.

Fruit/Vegetable Consumption

• All of the parishes in the study area report higher rates than the national rate (75.6%) for adults not eating enough fruits and vegetables.

Excessive Drinking

• The national rate of adults drinking excessively is 16.94%; Orleans Parish reports higher rates of adults drinking excessively at 19.60%.

Smoking

• Jefferson Parish reports the highest rate of adults smoking cigarettes across the study area with 21.10% of the population smoking.

• Orleans Parish reports the highest rate of adults trying to quit smoking in the past 12 months at 65.06%; this would be a prime population to target smoking cessation programs as they have already expressed interest in trying to stop smoking.

Depression

- The State of Louisiana reports a higher rate of residents with depression (15.66%) than the country (15.45%).
- Orleans Parish reports the highest rate of residents with depression within the study area at 15.08%.

Diagnosed Diabetes

- Orleans Parish reports the highest rate of residents with diagnosed diabetes (11.90%).
- All of the study area parishes as well as the overall state rates for Louisiana are higher than national rates for population being diagnosed with diabetes.
- Men have higher rates of being diagnosed with diabetes than women for the study area.
- 12.40% of the Orleans Parish male population reports being diagnosed with diabetes.
- The rate of diagnosed diabetes cases has seen steady and marked rises from 2004 to 2011 for the study area parishes.
- Looking specifically at the Medicare population, Jefferson Parish reports the highest rate of diagnosed diabetes at 28.33%, followed closely by Orleans Parish at 28.26%; the national rate being 27.03%.

High Cholesterol

- Jefferson Parish report higher rates of residents with high cholesterol than the national average of 38.52%.
- Orleans Parish reports the lowest rate of residents with high cholesterol at 37.29%; this is lower than the state (38.68%) and country (38.52%).
- Looking specifically at the Medicare population, Jefferson Parish reports the highest rate of residents with high cholesterol at 42.33%; the national rate being 44.75%.

Heart Disease

- Jefferson Parish reports the highest rate of residents who have heart disease (5.09%);
 this rate is higher than the national rate of 4.40%.
- Looking specifically at the Medicare population, Jefferson Parish reports the highest rate for the study area of residents with heart disease at 27.91%; the national rate being 28.55%.

High Blood Pressure

- Orleans Parish reports the highest rate of residents who have high blood pressure (37.60%); this rate is higher than the national rate of 28.16%.
- Looking specifically at the Medicare population, Jefferson Parish reports the highest rate of residents with high blood pressure at 58.2%; the national rate being 55.49%.

Overweight and Obese

- Jefferson Parish reports the highest rate of residents who are overweight (37.78%); this rate is slightly higher than the national rate of 35.78%.
- All of the study area parishes report higher rates for obesity than the nation; the national rate is 27.14%.
- There are not significant differences in males and females in terms of obesity; for the study area, some parishes see women having higher rates of obesity, for other parishes, men are more likely to be obese.
- On a national level, men are more likely to be obese than women (27.7% vs. 26.59%).
- The rates of obesity in the study area and nationally have seen steady rises over the years. Both of the study area parishes report a rate of 32.00%; this rate is closest to the U.S. rates for obesity (27.14%).

Asthma

• Orleans Parish reports the highest rate of adults with asthma for the study area at 12.55%; this is higher than the national rate of 13.36%.

Dental Health

• Orleans Parish reports the highest rate of adults with poor dental health for the study area at 17.93%; this is higher than the national rate of 15.65%.

Poor Health

• Jefferson Parish reports the highest rates of poor general health at 20.20%. Both of the study area parishes report higher rates of poor general health than the national rate of 15.74%.

Chlamydia Infection

• Orleans Parish reports a substantially higher rate of chlamydia infection than all of the other study area parishes, state, and country at 1,654.9 per 100,000 population in 2011.

Gonorrhea Infection

 Similar to chlamydia infection, Orleans Parish reports a substantially higher rate of gonorrhea infection than all of the other study area parishes, state, and country at 476.2 per 100,000 population in 2011. The national chlamydia rate is 103.09 per 100,000 population.

HIV/AIDS

- The Non-Hispanic Black population is the population that sees the highest rates of HIV/AIDS.
- Orleans Parish specifically sees the highest rates of HIV/AIDS for the study area; 2,141.97 per 100,000 Non-Hispanic Black population has HIV/AIDS, 1,548.29 per 100,000 Non-Hispanic White, and 1,305.15 per 100,000 Hispanic/Latino population.
- From 2008 to 2010, many of the study area parishes experienced rises or slight declines then larger rises in the HIV/AIDS rates for their parish. Therefore 2010 rates of HIV/AIDS in the MHCNO study area are higher than 2008 rates.

Breast Cancer

- Orleans Parish reports the highest incidence rate of breast cancer for the study area at 131 per 100,000 population; this is higher than the national rate of 122.7 per 100,000 pop.
- The Healthy People 2020 goal is for breast cancer incidence to be less than or equal to 40.9 per 100,000 population; all of the study area parishes and state report rates more than double this goal.
- The African-American / Black population of Orleans Parish reports the highest rate of breast cancer incidence when looking at incidence by race/ethnicity (132.5 per 100,000 pop.).

Cervical Cancer

- Orleans Parish reports the highest incidence rate of cervical cancer for the study area at 10.3 per 100,000 population; this is higher than the national rate of 7.8 per 100,000 pop.
- The Healthy People 2020 goal is for cervical cancer incidence to be less than or equal to 7.1 per 100,000 population; all of the study area parishes and state report rates higher than this goal.

Colon and Rectum Cancer

- Orleans Parish reports the highest incidence rate of colon and rectum cancer for the study area at 48.6 per 100,000 population; this is higher than the national rate of 43.3 per 100,000 pop.
- The Healthy People 2020 goal is for colon and rectum cancer incidence to be less than or equal to 38.7 per 100,000 population; all of the study area parishes and state report rates higher than this goal.
- The African-American / Black population reports higher rates of colon and rectum cancer incidence as compared with other racial groups for the study area, the states, and nationally.

Lung Cancer

- Jefferson Parish reports the highest incidence rate of lung cancer for the study area at 70 per 100,000 population followed closely by Orleans Parish at 67.8; these values are higher than the national rate of 64.9 per 100,000 pop.
- The African-American / Black population in Orleans Parish reports the highest rate of lung cancer incidence when looking at incidence by race/ethnicity (82.5 per 100,000 pop.).

Prostate Cancer

- Orleans Parish reports the highest incidence rate of prostate cancer for the study area at 166.3 per 100,000 population; this values is higher than the national rate of 142.3 per 100,000 pop.
- The African-American / Black population reports higher rates of prostate cancer incidence as compared with other racial groups for the study area, the state, and nationally.

Low Birth Weight

- Orleans Parish reports the highest rate of low-weight births for the study area at 12.4%.
- All of the study area parishes report higher rates of low-weight births than the national rate of 8.2%.
- The Healthy People 2020 goal is for low –weight births to be less than or equal to 7.8%; all of the study area parishes and state report rates higher than this goal.
- The Non-Hispanic African-American / Black population sees higher rates of low-weight births as compared with other racial groups for the study area, the state, and nationally.
- Orleans Parish reports the highest rate of low-weight births in 2006-2012 (12.4%), but this rate has been steadily declining since 2002-2008.

Mortality - Cancer

- Orleans Parish reports the highest rate of age-adjusted mortality due to cancer for the study area at 201.24 per 100,000 population.
- All of the study area parishes report higher rates of mortality due to cancer than the national rate of 174.08 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to cancer to be less than or equal to 160.6 per 100,000 population; all of the study area parishes and state report rates higher than this goal.
- Across the study area, all of the parishes, state, and nationally; men have higher mortality rates due to cancer than women.

• The Non-Hispanic Black population of Jefferson Parish reports the highest rate of mortality due to cancer for the study area with 239.51 per 100,000 population.

Mortality – Heart Disease

- Orleans Parish reports the highest rate of age-adjusted mortality due to heart disease for the study area at 221.55 per 100,000 population.
- On a national level and for all of the study area parishes, men are more likely to die as a result of heart disease than women.
- The African-American / Black population of Orleans Parish reports the highest rate of death due to heart disease across the study area at 254.83 per 100,000 population.

Mortality – Ischemic Heart Disease

- Jefferson Parish reports the highest rate of age-adjusted mortality due to ischemic heart disease for the study area at 114.87 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to ischemic heart disease to be less than or equal to 103.4 per 100,000 population; Orleans Parish reports rates already lower than this HP2020 Goal.
- On a national level and for all of the study area parishes, men are more likely to die as a result of ischemic heart disease than women.
- Non-Hispanic Black residents of Jefferson Parish report the highest rate of death due to ischemic heart disease for the study area at 129.79 per 100,000 population.

Mortality – Lung Disease

- Jefferson Parish reports the highest rate of mortality due to lung disease for the study area at 35.92 per 100,000 population; this is lower than the national rate of 42.67.
- On a national level and for all of the study area parishes, men are more likely to die as a result of lung disease than women.
- The Non-Hispanic White population of Jefferson Parish reports the highest rate of death as a result of lung disease for the study area at 39.63 per 100,000 population.

Mortality - Stroke

- Orleans Parish reports the highest rate of age-adjusted mortality due to stroke for the study area at 46.26 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to stroke to be less than or equal to 33.8 per 100,000 population; all of the study area parishes report rates higher than this goal.
- On a national level, men are more likely to die as a result of stroke than women (40.51 per 100,000 pop. vs. 39.62); for the study area it is the same.

• The Non-Hispanic Black population of Jefferson Parish reports the highest rate of death as a result of stroke for the study area at 61.97 per 100,000 population.

Mortality – Unintentional Injury

- Jefferson Parish reports the highest rate of age-adjusted mortality due to unintentional injury for the study area at 44.46 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to unintentional injury to be less than or equal to 36.0 per 100,000 population; all of the study area parishes report rates higher than this goal.
- On a national level and across all of the study area parishes, men are more likely to die as a result of unintentional injury than women.
- The Non-Hispanic White population of Jefferson Parish reports the highest rate of mortality due to unintentional injury for the study area at 54.93 per 100,000 population.

Mortality – Motor Vehicle Accident

- Orleans Parish reports the highest rate of deaths due to motor vehicle accidents for the study area at 7.19 per 100,000 population; this is lower than the national rate of 7.55 per 100,000 population.
- Men are more likely to die as a result of a motor vehicle accident than women.
- The Non-Hispanic American-Indian / Alaskan Native population for the country reports the highest rate of death due to motor vehicle accident at 16.08 per 100,000 population.

Mortality – Pedestrian Accident

- Orleans Parish reports the highest rate of age-adjusted mortality due to pedestrian accident for the study area at 2.81 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to pedestrian accident to be less than or equal to 1.3 per 100,000 population; all of the study area parishes and state report rates higher than this HP2020 Goal.

Mortality – Homicide

- Orleans Parish reports the highest rate of age-adjusted mortality due to homicide for the study area at 47.88 per 100,000 population; this rate is much higher than the national rate (5.63) and all of the other study area parishes.
- The Healthy People 2020 goal is for mortality due to homicide to be less than or equal to 5.5 per 100,000 population; all of the study area parishes and state report rates higher than this HP2020 Goal.
- Men are more likely to die as a result of homicide than women.

• The Non-Hispanic Black population of Orleans Parish reports the highest rate of death as a result of homicide across the study area at 73.18 per 100,000 population.

Mortality – Suicide

- Jefferson Parish reports the highest rate of age-adjusted mortality due to suicide for the study area at 12.79 per 100,000 population; this rate is higher than the national rate (11.82) and all of the other study area parishes.
- The Healthy People 2020 goal is for mortality due to suicide to be less than or equal to 10.2 per 100,000 population; Orleans Parish report rates already lower than this HP2020 Goal.
- Men are more likely than women to die as a result of a suicide.
- The Hispanic/Latino population of the U.S. reports the highest rate of suicide at 32.88 per 100,000 population.
- For the study area, the Non-Hispanic White population of Orleans Parish reports the highest rate of suicide at 18.22 per 100,000 population.

Infant Mortality Rate

- Orleans Parish reports the highest rate of infant mortality due for the study area at 8.8 per 1,000 births; this rate is higher than the national rate of 6.52 per 1,000 births.
- The Healthy People 2020 goal is for infant mortality to be less than or equal to 6.0 per 1,000 births; all of the study area parishes and state report rates higher than this HP2020 Goal.
- The Non-Hispanic Black population reports the highest rate of infant mortality for the study area parishes at 10.3 per 1,000 births.

County Health Rankings

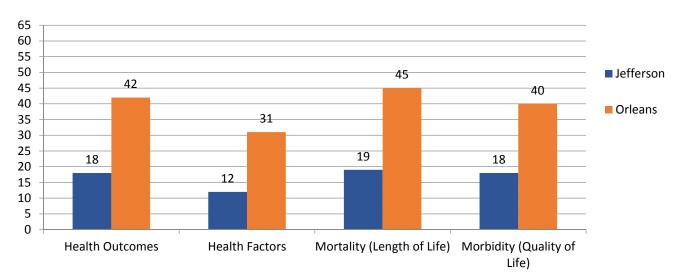
The County Health Rankings were completed as collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. 15

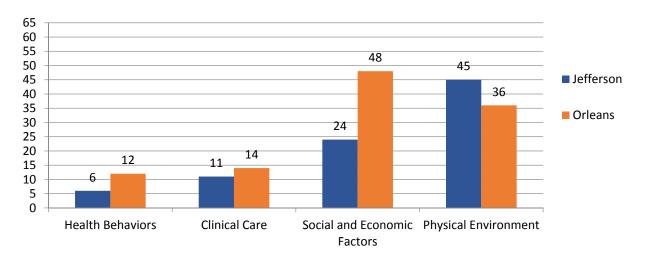
Each parish receives a summary rank for its health outcomes, health factors, and also for the four different types of health factors: health behaviors, clinical care, social and economic factors, and the physical environment. Analyses can also drill down to see specific parish-level data (as well as state benchmarks) for the measures upon which the rankings are based. Parishes in each of the 50 states are ranked according to summaries of more than 30 health

 $^{^{15}}$ 2015 County Health Rankings. Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute

measures. Those having high ranks, e.g. 1 or 2, are considered to be the "healthiest." Parishes are ranked relative to the health of other parishes in the same state on the following summary measures:

- Health Outcomes Rankings are based on an equal weighting of one length of life (mortality) measure and four quality of life (morbidity) measures.
- Health Factors Rankings are based on weighted scores of four types of factors:
 - Health behaviors
 - Clinical care
 - Social and economic
 - Physical environment
- Louisiana has 64 parishes. A score of 1 indicates the "healthiest" parish for the state in a specific measure. A score of 64 for LA indicates the "unhealthiest" parish for the state in a specific measure.





Key Findings from County Health Rankings:

- Comparing Jefferson and Orleans parishes, Orleans Parish reports the highest ranks (unhealthiest parish of the study area) for the majority of the County Health Rankings:
 - A rank of 42 for Health Outcomes
 - A rank of 31 for Health Factors
 - A rank of 45 for Mortality
 - A rank of 40 for Morbidity
 - o A rank of 12 for Health Behaviors
 - A rank of 14 for Clinical Care
 - A rank of 48 for Social and Economic Factors.
- ✓ Jefferson Parish holds the highest rank for the study area for Physical Environment at 45.

Substance Abuse and Mental Health

The Substance Abuse and Mental Health Services Administration (SAMHSA) gathers region specific data from the entire United States in relation to substance use (alcohol and illicit drugs) and mental health.

Every state is parceled into regions defined by SAMHSA. The regions are defined in the 'Substate Estimates from the 2010-2012 National Surveys on Drug Use and Health'. Data is provided at the first defined region (i.e., those that are grouped).

The Substate Regions for Louisiana are defined as such:

- Regions 1 and 10 (Data for Regions 1 and 10 provided separately for this grouping only)
 - o Region 1 Orleans, Plaquemines, St. Bernard
 - o Region 10 Jefferson
- Regions 2 and 9

- Region 2 Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee,
 West Baton Rouge, West Feliciana
- o Region 9 Livingston, St. Helena, St. Tammany, Tangipahoa, Washington

Region 3

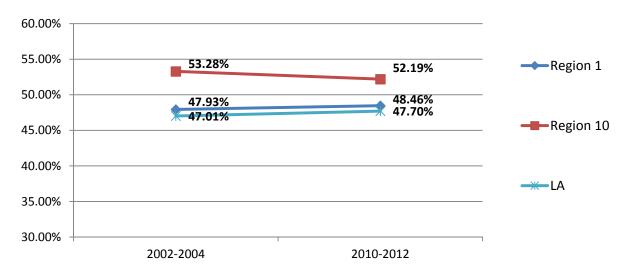
- Region 3 Assumption, Lafourche, St. Charles, St. James, St. John the Baptist, St. Mary, Terrebonne
- Regions 4, 5, and 6
 - o Region 4 Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin, Vermilion
 - o Region 5 Allen, Beauregard, Calcasieu, Cameron, Jefferson Davis
 - Region 6 Avoyelles, Catahoula, Concordia, Grant, La Salle, Rapides, Vernon,
 Winn
- Regions 7 and 8
 - Region 7 Bienville, Bossier, Caddo, Claiborne, De Soto, Natchitoches, Red River,
 Sabine, Webster
 - Region 8 Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison,
 Morehouse, Ouachita, Richland, Tensas, Union, West Carroll

Data concerning alcohol use, illicit drug use, and psychological distress for the various regions of the study area are shown here.

Alcohol Use in the Past Month

• For the Study Area, Region 10 (Jefferson Parish) reports the highest current rate of alcohol use in the past month at 52.19% of the population aged 12 and older. However, this region/parish has seen the largest decline in alcohol use rate from 2002-2004 to 2010-2012.

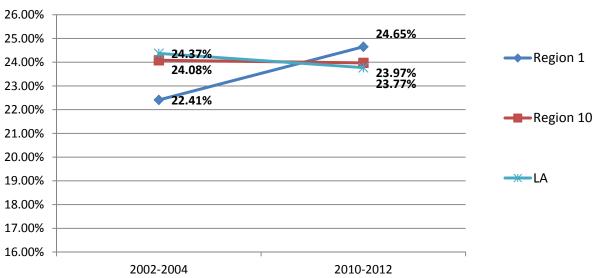
Alcohol Use in the Past Month



Binge Alcohol Use in the Past Month

• Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate for the study area as well as a rise in binge alcohol use from 2002-2004 to 2010-2012.

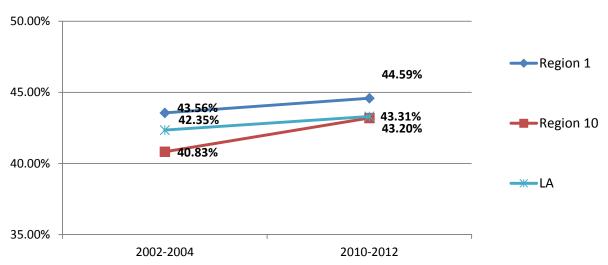
Binge Alcohol Use in the Past Month



Perceptions of Great Risk of Having Five or More Alcoholic Drinks Once or Twice a Week

 Many of the study area regions have shown rises in the perceptions of risk of having five or more drinks once or twice a week from 2002-2004 to 2010-2012.

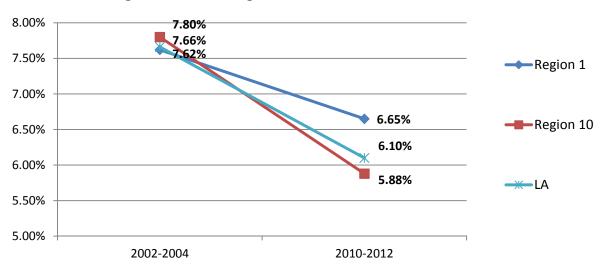
Perceptions of Great Risk of Drinking Five or More Alcoholic Drinks



Needing but Not Receiving Treatment for Alcohol Use in the Past Year

- All of the study area regions have seen declines in the rates of residents needing but not receiving treatment for alcohol use from 2002-2004 to 2010-2012.
- Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate for the study area of residents who needed but did not receive treatment for alcohol use in the past year at 6.65%.

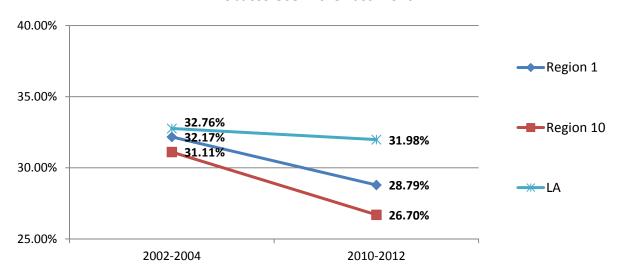
Needing but Not Receiving Treatment for Alcohol Use in the Past Year



Tobacco Use in the Past Month

• Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest current rate of tobacco use in the past month for the study area at 28.79%; this region has, however, seen a decline in the rate from 32.17% in 2002-2004.

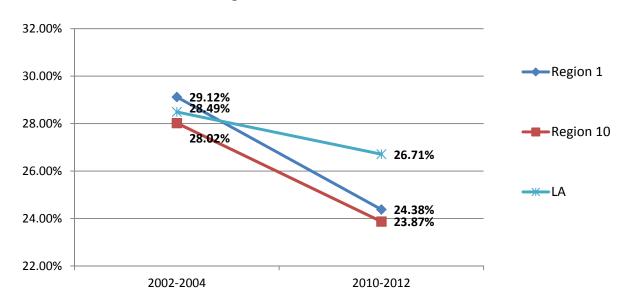
Tobacco Use in the Past Month



Cigarette Use in the Past Month

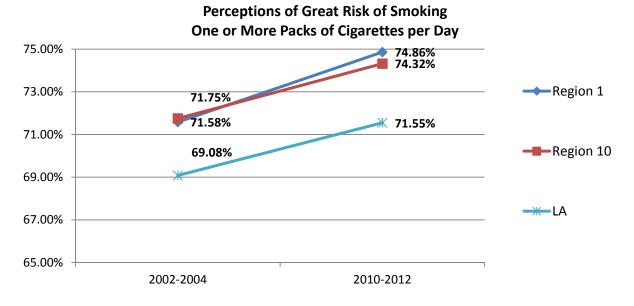
• Cigarette use in the past month is highest for Region 1 in the 2010-2012 analysis; it has seen a decline in rate over the years going from 29.12% to 24.38%.

Cigarette Use in the Past Month



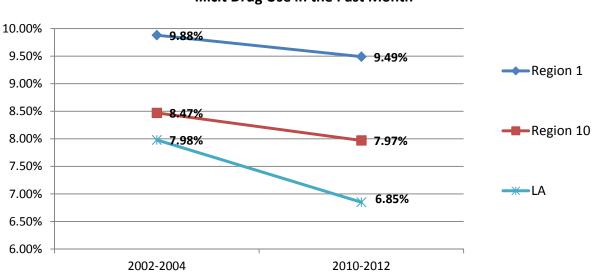
Perceptions of Great Risk of Smoking One or More Packs of Cigarettes per Day

 All of the study area regions report rises in the rate of perceptions of great risk of smoking one or more packs of cigarettes per day.



Illicit Drug Use in the Past Month

- Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate of illicit drug use in the past month with 9.49% of the population aged 12 and older participating in drug use.
- The Louisiana regions of SAMHSA report declines in rates of illicit drug use.

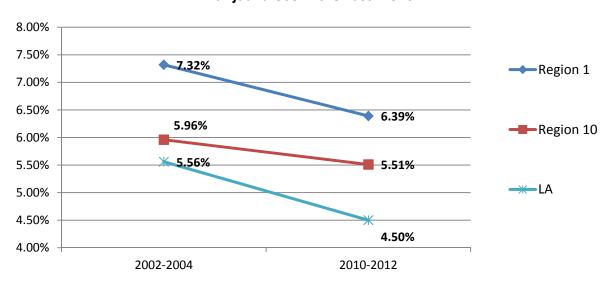


Illicit Drug Use in the Past Month

Marijuana Use in the Past Month

- Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate of marijuana use in the past month with 6.39% of the population aged 12 and older reporting use; this rate has been on the decline since 2002-2004 in which it was 7.32%.
- The Louisiana regions of SAMHSA report declines in rates of marijuana use.

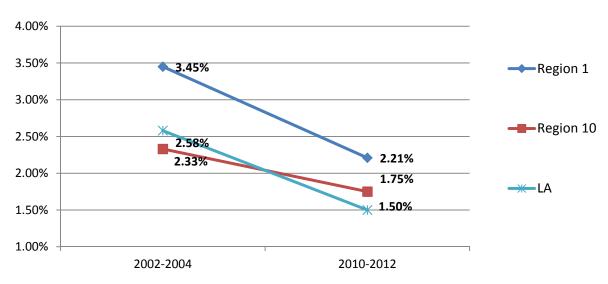
Marijuana Use in the Past Month



Cocaine Use in the Past Year

- Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate of cocaine use in the past month with 2.21 % of the population aged 12 and older reporting use; this rate has been on the decline since 2002-2004 in which it was 3.45%.
- All of the study area regions have seen declines in the rates of cocaine use from 2002-2004 to 2010-2012.

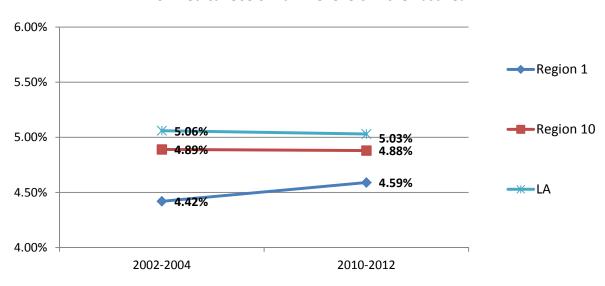




Nonmedical Use of Pain Relievers in the Past Year

• Region 10 reports the highest current rate of nonmedical use of pain relievers in the past year at 4.88% of the population aged 12 and over.

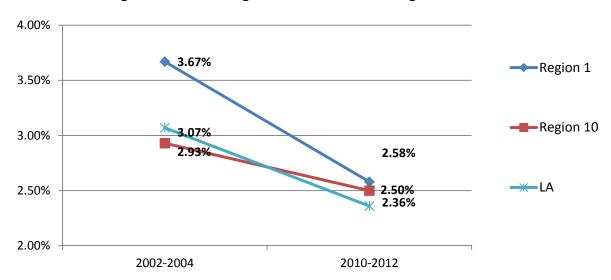
Nonmedical Use of Pain Relievers in the Past Year



Needing but Not Receiving Treatment for Illicit Drug Use in the Past Year

 All of the study area regions report declines in the rates of residents reporting needing but not receiving treatment for illicit drug use in the past year. Region 1 still reports the highest rate for the study area at 2.58% needing but not receiving treatment.

Needing but Not Receiving Treatment for Illicit Drug Use in the Past Year



America's Health Rankings

America's Health Rankings® is the longest-running annual assessment of the nation's health on a state-by-state basis. For the past 25 years, America's Health Rankings® has provided a holistic view of the health of the nation. America's Health Rankings® is the result of a partnership between United Health Foundation, American Public Health Association, and Partnership for Prevention™.

For this study, the Louisiana State report was reviewed. The following were the key findings/rankings for Louisiana:

- Louisiana Ranks:
 - 48th overall in terms of health rankings
 - o 44th for smoking
 - o 45th for diabetes
 - o 45th in obesity
- Louisiana Strengths:
 - o Low incidence of pertussis
 - o High immunization coverage among teens
 - o Small disparity in health status by educational attainment
- Louisiana Challenges:
 - o High incidence of infectious disease
 - High prevalence of low birthweight
 - High rate of preventable hospitalizations
- Louisiana Highlights:
 - o In the past year, children in poverty decreased by 15 percent from 31.0 percent to 26.5 percent of children.
 - o In the past 2 years, physical inactivity decreased by 10 percent from 33.8 percent to 30.3 percent of adults.
 - In the past 20 years, low birthweight increased by 15 percent from 9.4 percent to
 10.8 percent of births. Louisiana ranks 49th for low birthweight infants.
 - In the past 2 years, drug deaths decreased by 25 percent from 17.1 to 12.9 deaths per 100,000 population.
 - Since 1990, infant mortality decreased by 32 percent from 11.8 to 8.2 deaths per
 1,000 live births. Louisiana now ranks 47th in infant mortality among states.

Table 7. America's Health Rankings - Louisiana					
Measure	Rank	Value	Measure	Rank	Value
Air Pollution	26	9.2	Infectious Disease	48	
All Determinants	48	-0.53	Insufficient Sleep	34	37
All Outcomes	44	-0.273	Lack of Health Insurance	39	16.7
Binge Drinking	21	16.3	Low Birthweight	49	10.8
Cancer Deaths	47	217.4	Median Household Income	50	39,622
Cardiovascular Deaths	46	307.5	Obesity	45	33.1
Children in Poverty	44	26.5	Obesity – Youth		13.5
Chlamydia	47	597.9	Occupational Fatalities	47	8.2
Cholesterol Check	26	76.2	Overall	48	-0.803
Colorectal Cancer Screening	39	61.5	Personal Income, Per Capita	29	41,204
Dental Visit, Annual	48	56.1	Pertussis	1	1.6
Dentists	39	49.6	Physical Activity	46	67.8
Diabetes	45	11.6	Physical Inactivity	46	32.2
Disparity in Health Status	16	26.5	Poor Mental Health Days	43	4.2
Drug Deaths	27	12.9	Poor Physical Health Days	38	4.2
Excessive Drinking	22	17.7	Premature Death	45	9625
Fruits	44	1.18	Preterm Birth	49	15.3
Heart Attack	41	5.3	Preventable Hospitalizations	48	80.3
Heart Disease	40	5	Primary Care Physicians	20	123.7
High Blood Pressure	47	39.8	Public Health Funding	27	69.01
High Cholesterol	41	40.7	Salmonella	47	33.7
High Health Status	47	44.4	Smoking	44	23.5
High School Graduation	46	72	Stroke	45	4
Immunization - Adolescents	11	72.6	Suicide	12	12.5
Immunization – Children	31	69.1	Teen Birth Rate	44	43.1
Immunization Dtap	16	87.9	Teeth Extractions	48	9.6
Immunization HPV female	12	42.1	Underemployment Rate	23	12.7
Immunization MCV4	9	87.7	Unemployment Rate, Annual	15	6.2
Income Disparity	48	0.491	Vegetables	49	1.64
Income Disparity Ratio	1	5.68	Violent Crime	44	496.9
Infant Mortality	47	8.2	Youth Smoking		12.1

Key Stakeholder Interviews –

INTRODUCTION:

Tripp Umbach conducted interviews with community leaders on behalf of the University Medical Center New Orleans. Leaders who were targeted for interviews encompassed a wide variety of professional backgrounds including 1) Public health expertise; 2) Professionals with access to community health related data; and 3) Representatives of underserved populations. The interviews offered community leaders an opportunity to provide feedback on the needs of the community, secondary data resources, and other information relevant to the study.

This report represents a section of the overall community health needs assessment project completed by Tripp Umbach.

DATA COLLECTION:

The following qualitative data were gathered during individual interviews with 36 stakeholders in communities served by University Medical Center New Orleans. Each interview was conducted by a Tripp Umbach consultant and lasted approximately 60 minutes. All respondents were asked the same set of questions developed by Tripp Umbach and previously reviewed by a University Medical Center New Orleans CHNA oversight committee. The purpose of these interviews was for stakeholders to identify health issues and concerns affecting residents in the communities served by University Medical Center New Orleans, as well as ways to address those concerns.

There was a diverse representation of community-based organizations and agencies among the 36 stakeholders interviewed. Those organizations represented included:

- Louisiana Office of Public Health
- Humana Louisiana
- Director Medical Student Clerkship
- Louisiana Public Health Institute
- Acadian Ambulance
- Delgado Community College
- Pickering and Cotogno
- Nouveau Marc Residential Retirement Living
- Kenner Council on Aging and Parks and Recreation
- City of Kenner
- Children's Special Health Services
- Methodist Health Foundation

- City of New Orleans
- Catholic Charities
- LSU Health Science Center, Allied Health
- Tulane University School of Medicine
- Jefferson Parish
- NO/AIDS Task Force
- Institute of Women and Ethnic Studies
- PACE Greater New Orleans
- New Wine Fellowship
- Jefferson Business Council
- Arc of St. Charles
- Healthy Start New Orleans
- Chief HIV Division of Infectious Disease

- The McFarland Institute
- Prevention Research Center at Tulane University
- Greater New Orleans Foundation
- Susan G. Komen, New Orleans
- Jefferson Parish Commissioner
- Ochsner Health System

- Cancer Association of Greater New Orleans
 (CAGNO)
- Fifth District Savings and Loan
- Print All
- West Jefferson Civic Coalition
- Boys and Girls Club Westbank

STAKEHOLDER RECOMMENDATIONS:

The stakeholders provided many recommendations to address health issues and concerns for residents living in the communities served by University Medical Center New Orleans. Below is a brief summary of the recommendations:

- Hospitals could facilitate the community conversation among health providers in their service areas regarding collaboration to address common health issues and social determinants of health using the spectrum of care and care coordination to begin to move away from acute care models, increase prevention and education, and reduce prevalence rates improving population health.
- Payers and providers could develop creative financial models that encourage and promote population health (e.g., gain sharing/risk sharing models). Insurance companies and hospitals could begin to incentivize programs to address population health and keep residents healthy.
- Healthcare providers could participate in a universal way in the exchange of health information in order to facilitate collaboration among all providers including FQHCs, Hospitals, and private practices.
- Incentivize healthy choices through employers and health insurance companies.
 Employers could offer monetary incentives and health insurance companies could offer discounted rates for practicing health behaviors. Entities responsible for the cost of unhealthy options show be held accountable (e.g., bars, fast food restaurants, residents making unhealthy choices) through a tax, similar to the tax placed on cigarettes.
- Health and wellness groups could collaborate to provide food trucks with fresh produce and healthy foods at a fair price to neighborhoods that do not have grocery stores.
 These healthy food trucks could be available once or twice a week to increase access to healthy food.
- Increase care coordination and community support for residents, including seniors, to improve treatment compliance, medication management, appropriate use of healthcare resources, and outcomes.
- Hospitals could sponsor areas that encourage healthy activity like exercise stations along jogging paths.

- Increase information dissemination and education of residents regarding healthy options like food preparation, preventive practices, prevention of STIs, etc. To do this hospitals could partner with local schools.
- Disseminate information on an ongoing basis regarding healthy options (e.g., prenatal practices, prevention, healthy nutrition, etc.) and health resources (e.g., location, eligibility, services, etc.).
- The state could develop a strategy to effectively address poverty throughout Louisiana.
 This strategy could include plans to increase access to health insurance by expanding Medicaid, as well as, increase the high-quality early child education and care to disrupt the generational cycle of poverty.
- Maintain critical access hospitals and enhance services provided to residents in rural areas
- Integrate behavioral health services into primary care settings through co-location of behavioral health providers to decrease stigma and increase treatment options for behavioral health. Additional integration could include psychiatric consultation on an as needed basis for primary care providers to treat behavioral health issues that are not severe or persistent.
- Teach youth about prevention and healthy options in school settings in order to ensure accurate and complete information is being provided about important topics like HIV and STI prevention, healthy nutrition and healthy exercise, etc.
- The city could increase foot-traffic of officers in areas where violence and crime are high to reduce the prevalence of violent crime.
- Transportation issues cannot be addressed by hospitals. Instead, transportation could be addressed through collaborations among insurance providers, government entities and entities that specialize in transportation.

PROBLEM IDENTIFICATION:

During the interview process, stakeholders discussed six overall health needs and concerns in their community. The top five health needs in order from most discussed to least discussed were:

- 1. Accessibility of health services
- 2. Social and environmental determinants of health
- 3. Common health concerns
- 4. Behavioral health, including substance abuse
- 5. Personal behaviors that impact health

ACCESSIBILITY OF HEALTH SERVICES:

Every stakeholder interviewed articulated a need to improve the accessibility of health services (medical, dental, behavioral) in all regions. Several stakeholders acknowledged the significant investments that have been made in healthcare, including establishing community based care and building the University Medical Center. The discussion about accessibility of services was related most often to the cost of care, acceptance of insurance, awareness of services available, and the number and location of providers.

Stakeholders discussed a shift in the way health services are provided from the charity care model where charity care was provided in large charity hospital settings before Katrina to the community-based clinic model providing charity care to residents through a network of community based clinics. Most stakeholders felt that the community based clinic model may prove to be more efficient and accessible to residents in Local communities. One of the most discussed about barriers to accessing health services in the study area was the awareness of residents about what services are available and where they are located. Residents are not securing health services in the proper locations because they are not aware of new clinics and services that may be available to them.

The low reimbursement rates for health service providers like hospitals and community based clinics was often the topic of discussion with stakeholders. Stakeholders felt that hospitals are struggling to provide quality health services at the poor reimbursement rates paid by CMS. Low reimbursement rates were often cited as the reason hospitals are struggling to remain viable and continue to offer services to residents. This was particularly the case in areas with higher rates of poverty and rural areas.

Stakeholders discussed the cost of health services in relationship to health insurance, uninsured care, and poor reimbursement rates of health service providers (medical, dental and behavioral). Many providers are not accepting patients with Medicaid insurance due to the low reimbursement rates (e.g., wound care specialist, sleep labs, etc.). This does not include non-profit hospitals. One stakeholder mentioned a trend among primary care providers toward a cash only payment model, which does not accept any form of insurance. Stakeholders discussed the lack of Medicaid expansion placing a strain on health resources to meet the needs of uninsured and underinsured residents. Many residents in the region do not qualify for Medicaid insurance, cannot afford private pay insurance or the cost of uninsured health services. This includes many residents that are employed in the service industry on the local who do not have access to health insurance due to the part-time employment. Additionally, residents employed in service industries may not qualify for Medicare as they age due to limited Social Security payments. Residents that are uninsured often seek health services when an issue becomes an emergency and requires more intense and costly care, which typically yields poorer outcomes than primary and preventive care practices.

Stakeholders discussed the improvements in accessibility as well as the need to continue to increase access to health services in all regions. Many stakeholders are hopeful that the University Medical

Center will increase access to care. While stakeholders recognize that access has improved through the development of urgent care clinics and community based clinics; they also discussed the fragmentation of health services and the gaps in services that are available. According to stakeholders there were several health services that are not readily available in their region, specifically: outpatient Medicaid providers (dental, pediatricians, psychiatrist, etc.), pediatric neurosurgery, Pediatric cardiology, inpatient behavioral health and substance abuse services, outpatient behavioral health and substance abuse services, care coordination, after-hours specialty care (e.g., HIV Clinics), prescription assistance, Primary care (rural areas), gerontology, trauma unit (St. Tammany Parish) community based supportive services for seniors. Stakeholders described disparate health resources with lower income neighborhoods containing the fewest resources. The Medicaid Waiver provides some access to care but does not cover prescription medications or specialty care. As a result, many community based clinics do not have access to specialty diagnostic services. Residents may have an undiagnosed illness that they cannot afford to treat due to the cost of medications. Stakeholders discussed the lack of care coordination provided for uninsured and underinsured residents, including seniors, who are seeking care in inappropriate settings like the emergency room. Several stakeholders mentioned the benefits of home healthcare for care coordination, though Medicaid eligible residents, reportedly, are not often approved for home health services.

Stakeholders discussed the limited access to a full spectrum of health services in rural areas (i.e., specialty care, outpatient Medicaid services, etc.). Stakeholders discussed the importance of critical access hospitals to residents in the most rural areas. While critical access hospitals may not always have a comprehensive list of specialty providers, they offer access to medical care that rural residents would not otherwise have.

Stakeholders noted that the need for accessible healthcare among medically vulnerable populations (e.g., uninsured, low-income, Medicaid insured, etc.) has an impact on the health status of residents in a variety of ways and often leads to poorer heath out comes. Several of the noted effects are:

- Higher cost of healthcare that results from hospital readmissions and increased usage of costly emergency medical care.
- Residents delaying medical treatment and/or non-compliant due to the lack of affordable options and limited awareness of what options do exist.
- Poor outcomes in adult, maternal and pediatric care due to limited care coordination and lack of patient compliance.

SOCIAL AND ENVIRONMENTAL DETERMINANTS OF HEALTH:

More than ninety percent of stakeholders discussed the social and environmental determinants of health in local communities. The most common social and environmental factors discussed by stakeholders were the impact of culture, high rates of violence, lack of education, and poverty on the health of seniors, adults, children, and unborn children.

New Orleans and surrounding areas are famous for the culture, food, and drinking. Stakeholders discussed the impact that culture has on the practices, views and health of residents. Stakeholders noted that the culture of residents is close and supportive, but often centers around food and alcohol

consumption. Traditional diets of residents are reflective of culture and historically are high in fried and fatty foods. Additionally, the tourism industry is focused on the party atmosphere and encourages excessive consumption alcohol and foods that can be unhealthy. Stakeholders noted that changing behavior can be difficult particularly when it is steeped in accepted cultural practices and supported by the economy of tourism. Excessive consumption of alcohol and fried foods can cause lifestyle diseases such as cardiovascular disease, obesity, diabetes and cancer.

One of the most discussed social determinants of health in local communities was the high rates of violence. Stakeholders indicated that the high rates of violence cause trauma in children, adults and seniors. Stakeholders felt that residents experienced a greater level of stress, which leads to stress related health issues, such as, higher rates of anxiety, heart disease, and low birth weight.

Hurricane Katrina facilitated worsened conditions in communities due to the displacement of residents, loss and extensive damage to property. Post-Katrina housing has been overcrowded due to extended family living arrangements due to damaged homes and an overall reduction in healthy safe living conditions. Stakeholders often reminisced about the informal support networks for child care, transportation, etc. that existed in areas where poverty is the highest. According to stakeholders, many residents practiced almost a communal sharing of resources (child care, transportation, food, money, etc.). Many residents had to move from the communities where they lived after Katrina and lost access to these informal networks. While resources in these areas of poverty lessened due to unemployment, death, and loss of personal assets; residents were faced with having to pay for child care, transportation, etc. Katrina has had an impact on resources, mental health and stability of residents and according to stakeholders, the response has not been adequate to allow communities to fully heal and recover. As a result there are still many health needs related to Katrina and Ivan in the region.

The economy was discussed regarding the lack of opportunity many residents have. The primary industry is based in service, which does not offer financial stability or consistent access to employment benefits such as health insurance, retirement, etc. According to stakeholders, many residents live below the federal poverty line. Stakeholders addressed the high rates of poverty and the poor outcomes for residents in poverty. Discussions focused on poverty as an explanation for the high prevalence of substance abuse, low educational attainment, violence, poor health, limited access to health services, etc. Often stakeholders pointed out that the lack of opportunity, limited employment, and low educational attainment found in communities of poverty cause residents to feel apathetic. Stakeholders felt that the lack of education coupled with low exposure to healthy resources causes residents in poverty to be unaware of healthy options. When residents are aware of healthier choices they may perceive these options to be out of their reach e.g., healthy produce and nutrition may not be viewed as consistently attainable due to a lack of grocery stores, limited transportation, and cost.

Food security was discussed by stakeholders related to the health of seniors and youth. Grocery stores are not often located in low income neighborhoods creating what is being called a "food desert". Youth and seniors residing in these food deserts may not have ready access to healthy nutrition due to the lack of transportation options.

Transportation was addressed as a need across all of the Greater New Orleans area. The lack of adequate transportation impacts health in a variety of ways by limiting the access residents have to healthy options like medical providers and grocery stores with healthy produce. Residents are not able

to attend appointment consistently due to a lack of dependable transportation. Often residents in rural areas are not able to get to and from the health services they need. For this reason, stakeholders indicated that rural residents often delay seeking health services until the issue becomes an emergency and potential outcomes are often poor. Additionally, the limitations of transportation may restrict the access residents have to employment opportunities, which could be a barrier to insurance and financial stability. One stakeholder identified transportation as one of several reasons expecting mothers are not always consistent with prenatal care. Transportation can take hours, which may be a significant barrier to attending prenatal appointments, particularly if the expecting mother has other children. The topic of transportation was most often discussed in relationship to residents seeking health care and healthy nutrition in rural areas.

The education in charter schools was addressed as an issue related to the oversight of behavioral health, access youth have to physical exercise throughout the day, and education about reducing the spread of STIs and HIV. Stakeholders felt that youth are not always getting their behavioral health needs met in the school systems due to the lack of formal oversight for behavioral health in the school system. Additionally stakeholders discussed the decline or absence of physical activity in the school system. Stakeholders felt that youth are becoming obese for a variety of reasons, one of which is the limited exercise they may be participating in during school hours.

Stakeholders discussed the level of health literacy among residents. Health literacy is influenced by literacy levels, language barriers and access to and understanding of technology (e.g., computers). Stakeholders noted that there is a high correlation between lower educational attainment and lower level of health literacy. Stakeholders discussed the various languages spoken in regions around Southeast Louisiana and the need to ensure health services are culturally competent and accessible for residents who have limited English speaking skills. The languages most referenced were Asian languages and Latin languages. Additionally, stakeholders felt that the movement toward electronic medical records, the use of online applications, and internet based systems may leave some residents that do not have access to computers and/or whom may be unfamiliar with computers without access to relevant health information.

Stakeholders discussed the implications of social and environmental determinants of health as some of the following:

- Lifestyle diseases such as obesity, diabetes, cancer, hypertension, and cardiovascular disease.
- Higher rates of poor birth outcomes such as low birth weight.
- Increased behavioral health symptoms of trauma e.g., risky behaviors, suicide, anxiety, depression, violence, apathy, etc.
- Poor birth outcomes (e.g., low birth weight) and limited access to healthy options.

COMMON HEALTH CONCERNS:

More than eighty percent of stakeholders discussed specific health concerns of residents. The most common health concerns discussed by stakeholders were obesity, diabetes, heart disease, cancer, and HIV.

1. Obesity – Over one half of stakeholders discussed the prevalence and cause of obesity among residents in local communities. Stakeholders indicated that obesity is an issue among adults as

well as a growing problem among youth. Stakeholders identified social and environmental determinants (e.g., culture, lack of awareness, limited access to healthy nutrition, etc.) as well as personal choice and behaviors within the control of residents (e.g., choices about nutrition, exercise, etc.) as driving the high rates of obesity.

- 2. Diabetes Over one half of stakeholders discussed the prevalence and cause of diabetes as a common health issue among residents. Stakeholders identified social and environmental determinants (e.g., lack of awareness, limited access to primary care, food deserts, etc.) as well as personal choice and behaviors within the control of residents (e.g., choices about nutrition, exercise, etc.) as driving the high rates of diabetes.
- 3. Heart disease More than one third of stakeholders discussed heart disease and cardiovascular complications as a common health concern among residents. Stakeholders identified social and environmental determinants (e.g., lack of awareness, culture, etc.) as well as personal choice and behaviors within the control of residents (e.g., smoking, exercising, etc.) as driving the high rates of heart disease.
- 4. Cancer One-quarter of stakeholders discussed cancer (i.e., breast cancer, pancreatic cancer, ling and skin cancer) as a common health concern among residents. Stakeholders identified social and environmental determinants (e.g., exposure to cancer causing agents in the environment, etc.) as well as personal choice and behaviors within the control of residents (e.g., smoking, excessive alcohol consumption, etc.) as driving the high rates of cancer.
- 5. HIV One-quarter of stakeholders discussed HIV as a common health concern among residents. Stakeholders identified social and environmental determinants (e.g., limited prevention education, etc.) as well as personal choice and behaviors within the control of residents (e.g., treatment non-compliance, risky behaviors, etc.) as driving the high rates of HIV.

The impact of common health issues can be poor health outcomes of a population and greater consumption of health care resources.

NEED FOR BEHAVIORAL HEALTH INCLUDING SUBSTANCE ABUSE SERVICES:

Behavioral health services and issues were discussed separate from medical or dental health services, with approximately seventy-five percent of stakeholders identifying a health need related to behavioral health and/or substance abuse. Stakeholders discussed the lack of behavioral health and substance abuse resources in general and many noted that behavioral health and substance abuse needs are highest in communities with the highest rates of poverty. Stakeholders felt that there is a connection between environmental factors and the prevalence of behavioral health and substance abuse. For example, several stakeholders discussed the traumatization of youth after Katrina and the link to the prevalence of behavioral health experienced by the same youth (now teenagers and young adults) today. Stakeholders felt that the suicide rates are high, particularly among residents with mental illness. Stakeholders stated that suicide rates have increased after Katrina, with many communities seeing record high deaths due to suicide and suicide attempts.

Stakeholders felt that the culture of New Orleans and tourist industry encourages substance abuse and identified alcohol and marijuana as the most common substances being abused. Other substances noted were cocaine, heroin, methamphetamines, and prescription pain medications. Additionally, stakeholders discussed the role that the post-Katrina influx of illegal substances and increased gang

activity plays in the prevalence of substance abuse. Stakeholders also felt that substance abuse is often a way for residents to self-medicate or cope with behavioral health issues including stress and serious mental illness (e.g., bipolar, schizophrenia, etc.).

"Katrina has had a major impact on the mental health of residents- the stress, and displacement of residents has had an impact and the response has not been adequate to meet the need." ~ First Responder

Often communities with higher rates of poverty are also the areas with limited resources available to treat diagnoses related to behavioral health and substance abuse. This is in part due to the low reimbursement rates for behavioral health services. There is reportedly a resistance among behavioral health providers to accept Medicaid insurance and the cost of uninsured behavioral health services is unaffordable for residents who are Medicaid eligible.

Stakeholders noted that there has been a decrease in funding for behavioral health and substance abuse services which has led to limited resources. While there are inpatient beds and outpatient services available, stakeholders indicated that they are not adequate enough to meet the demand for behavioral health and substance abuse services on the local. In recent years there has been a decrease in the number of inpatient beds and outpatient services often have lengthy waiting lists for diagnostic services as well as ongoing treatment. One stakeholder noted that there are few behavioral health services for youth, particularly youth of color.

Stakeholders noted that behavioral health and substance abuse has an impact on the health status of residents in a variety of ways and often leads to poorer heath out comes. Several of the noted effects of behavioral health and substance abuse are:

- Incarceration rates among residents with behavioral health and/or substance abuse diagnosis is high.
- It can be difficult to secure out-of-home placement for a senior who has been committed for psychiatric treatment.
- Residents with a history of behavioral health and substance abuse do not always practice
 healthy behaviors and may be non-compliant with necessary medical treatments (e.g., HIV
 treatments, etc.).
- Babies born to mothers with behavioral health and/or substance abuse issues may not receive
 adequate prenatal care and/or consistent care Postpartum to facilitate healthy child
 development. Mothers that have a history of substance abuse may not inform their physician
 due to laws that may lead to the removal of other children in the home.

PERSONAL BEHAVIORS THAT IMPACT HEALTH:

More than two-thirds of the stakeholders interviewed discussed lifestyle choices that impact the health status and subsequent health outcomes for residents. Stakeholders noted that there are factors like smoking, lack of physical exercise, and risky behaviors that are related to the personal choices of residents and influence health outcomes. The topic of personal choice was most often discussed in relationship to obesity, the prevalence of STIs, and cancer and respiratory issues related to smoking and alcoholism. Note that these are also health concerns stakeholders felt were heavily influenced by social and environmental determinants of health. It is this coupling of social/environmental and personal

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Choice determinants of health that present the greatest challenge to improving lifestyle related diseases like diabetes, obesity, cancer, and STIs

Stakeholders recognized that there are social determinants that drive the rate of obesity such as food deserts, lack of awareness about healthy food preparation and the inability to exercise outdoors due to a lack of safety; however, stakeholders also recognized that residents often make personal choices based on preferences for unhealthy foods and limited motivation to exercise.

At the same time that stakeholders recognized that there are social and environmental determinants of cancer and respiratory diseases like chemical run off from factories and pollution; they discussed the personal choice to continue smoking as an additional factor that facilitates low birth weight, the rates of cancer and COPD in communities where smoking rates are greatest.

While stakeholders understood the impact of social and environmental determinants like youth not learning the practices that reduce the spread of STIs like HIV in school settings; stakeholders also recognized that parents are choosing not to provide education to their children about preventing the spread of STIs and youth are making the decision to practice risky behaviors.

Survey of Vulnerable Populations

Tripp Umbach worked closely with the Community Health Needs Assessment (CHNA) oversight committee to ensure that community members, including under-represented residents, were included in the needs assessment through a survey process.

DATA COLLECTION:

Vulnerable populations were identified by the CHNA oversight committee and through stakeholder interviews. Vulnerable populations targeted by the surveys were: seniors, low-income (including families), uninsured, Latino, chronically ill, had a mental health history, homeless, literacy challenged, limited English speaking, women of child bearing age, diabetic, and residents with special needs.

A total of 709 surveys were collected in the University Medical Center New Orleans service area which provides a +/- 3.66 confidence interval for a 95% confidence level. Tripp Umbach worked with the oversight committee to design a 32 question health status survey. The survey was administered by community based organizations providing services to vulnerable populations in the hospital service area.

- Community based organizations were trained to administer the survey using handdistribution.
- Surveys were administered onsite and securely mailed to Tripp Umbach for tabulation and analysis.
- Surveys were analyzed using SPSS software.

Limitations of Survey Collection:

There are several inherent limitations to using a hand-distribution methodology that targeted medically vulnerable and at-risk populations I survey collection. Often, the demographic characteristics of populations that are considered vulnerable populations are not the same as the demographic characteristics of a general population. For example, vulnerable populations by nature may have significantly less income than a general population. For this reason the findings of this survey are not relevant to the general population of the hospital service area. Additionally, hand-distribution is limited by the locations where surveys are administered. In this case Tripp Umbach asked CBOs to self-select into the study and as a result there are several populations that have greater representation in raw data (i.e., low-income, women, etc.). These limitations were unavoidable when surveying low-income residents about health needs in their local communities.

Demographics:

Survey respondents were asked to provide basic anonymous demographic data.

Table 8: Survey Responses – Self-Reported Age of Respondent

Eastbank					
Age	Age Respondents (%)				
18-24	4.3%				
25-34	15.3%				
35-44	19.9%				
45-54	17.0%				
55-64	23.5%				
65-74	12.0%				
75-84	6.0%				
85+	2.1%				

Westbank		
Age	Respondents (%)	
18-24	7.4%	
25-34	20.4%	
35-44	25.9%	
45-54	19.4%	
55-64	15.7%	
65-74	8.3%	
75-84	1.9%	
85+	7.4%	

- ✓ Of the surveys gathered:
 - Eastbank- 69.5% were female, 30.5% were male
 - Westbank- 67.6% were female, 32.4% were male
- ✓ The majority of the survey respondents reported their race as Black or African American (Eastbank- 77.2% and Westbank- 59.1%), the next largest racial group was White or Caucasian (Eastbank- 9.6% and Westbank- 26.4%), and third largest Asian (Eastbank- 7.8% and Westbank-5.5%).

Table 9: Survey Responses – Self-Reported Annual Income of Respondents

Eastbank			
Income	Respondents (%)		
< \$10k	28.3%		
\$10-19,999	18.9%		
\$20-29,999	14.3%		
\$30-39,999	7.7%		
\$40-49,999	6.4%		
\$50-59,999	3.1%		
\$60-69,999	1.3%		
\$70-79,999	1.3%		
\$80-99,999	2.9%		
\$100-149,999	1.7%		

Westbank			
Income	Respondents (%)		
< \$10k	22.7%		
\$10-19,999	15.5%		
\$20-29,999	13.6%		
\$30-39,999	8.2%		
\$40-49,999	3.6%		
\$50-59,999	6.4%		
\$60-69,999	9.1%		
\$70-79,999	2.7%		
\$80-99,999	1.8%		
\$100-149,999	4.5%		

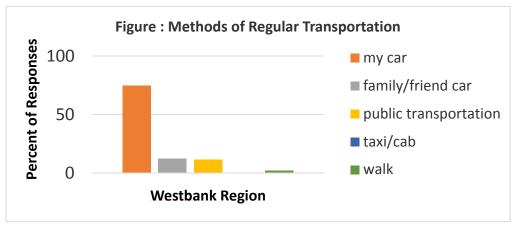
- ✓ The household income level with the most responses was < \$10,000 (Eastbank- 28.3% and Westbank-22.7%) and \$10,000 \$19,999 (Eastbank- 18.9% and Westbank-15.5%)
- ✓ In the Eastbank region (61.5%) and Westbank region (51.8%) of respondents reported less than \$29,999 annual household income.

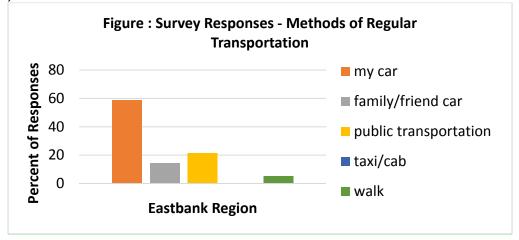
Healthcare Eastbank:

- ✓ The most popular place for residents to seek care is a doctor's office (49.5%), with the free or reduced cost clinics being the second most popular (20.4%), hospital clinics third (10.9%), and ER fourth (10.4%).
- ✓ The most common forms of health insurance carried by respondents was Private/commercial (26.3%), no insurance (22.7%), and Medicaid only (23.0%).
- ✓ The most common reason why individuals indicated that they do not have health insurance is because they can't afford it (61.2%).
- √ 30.5% could not see a doctor in the last 12 because of cost; compared to the state
 (18.9%).
- ✓ Most respondents had been examined by a physician within the last 12 months at least once (70.8%).
- ✓ 25.3% respondents reported not taking medications as prescribed in the last 12 months due to cost.

Healthcare Westbank:

- ✓ The most popular place for residents to seek care is a doctor's office (61.8%), with the free or reduced cost clinics being the second most popular (10.9%), ER (10.0%), and urgent care (8.2%).
- ✓ The most common forms of health insurance carried by respondents was Private/commercial (38.2%), Medicaid only (26.4%), and no insurance (19.1%).
- ✓ The most common reason why individuals indicated that they do not have health insurance is because they can't afford it (73.7%).
- √ 27.9% could not see a doctor in the last 12 because of cost; compared to the state
 (18.9%).
- ✓ Most respondents had been examined by a physician within the last 12 months at least once (71.2%).
- ✓ 26.1% respondents reported not taking medications as prescribed in the last 12 months due to cost.





Many respondents indicated that their primary form of transportation is some method other than their own car.

Table 10: Survey Responses Related to HIV/AIDS Testing Ever Been

Tested for HIV	Eastbank	Westbank	LA	U.S.
Yes	59.9%	65.1%	43.5%	35.2%
No	40.1%	34.9%	56.5%	64.8%

- ✓ The Eastbank region reports a higher rate of HIV testing (59.9%) than the state (43.5%) or the U.S. (35.2%).
- ✓ The Westbank region reports a higher rate of HIV testing (65.1%) than the state (43.5%) or the U.S. (35.2%).

Health Services:

Table 11: Survey Responses – Health Services Received During the Previous 12 Month Period

Test Received	SELA Region	Eastbank Region	Westbank Region
Blood test	52.3%	55.4%	60.4%
Check up	45.8%	45.7%	50.5%
Cholesterol test	31.5%	35.1%	34.2%
Flu shot	31.1%	34.1%	33.3%
Urinalysis	23%	22.6%	23.4%

✓ Respondents from the Eastbank and Westbank region report similar testing rates as those across the SELA Region.

✓ Most respondents did not prefer to receive health services in a language other than English.

Table 12: Survey Responses – Perceptions about Health Service Availability

Eastbank	Available to me	Available to others	Not available	NA*
Dental services	65.0%	12.7%	8.0%	14.3%
Vision services	66.7%	13.7%	6.0%	13.5%
Affordable, safe, and healthy housing	57.5%	15.1%	8.0%	19.4%
Healthy foods	72.9%	11.0%	4.6%	11.4%
Cancer screening	14.2%	5.2%	4.5%	75.9%

^{*}NA = Not applicable

Eastbank

- At least 1 in 10 respondents indicated they did not have access to the following at all or the services is available to others but not them: Services for 60+ (10%), Mental health services (13.1%), Substance abuse services (11.8%), HIV services (11.5%), Medical specialist (11.8%), Accessible transportation (10.3%), Pediatric & adolescent health (10.7%), Employment assistance (16.2%), Primary care (10.2%), Emergency Medical (11.1%).
- ✓ Most respondents indicated that they have access to the following services: safe exercise, women's health, and surgical.

Westbank	Available to me	Available to others	Not available	NA*
Dental services	74.5%	7.5%	10.4%	7.5%
Vision services	74.5%	5.7%	10.4%	9.4%
Affordable, safe, and healthy housing	59.4%	5.0%	9.9%	25.7%
Healthy foods	18.6%	2.0%	4.9%	74.5%
Cancer screening	74.5%	7.5%	10.4%	7.5%

^{*}NA = Not applicable

Westbank

- ✓ At least 1 in 10 respondents indicated they did not have access to the following at all or the services is available to others but not them: Services for 60+ (12.6%), Mental health services (11.6%), Medical specialist (10.9%), Pediatric & adolescent health (14.8%), Employment assistance (15.9%), Primary care (11.7%).
- Most respondents indicated that they have access to the following services: healthy foods, HIV services, substance abuse treatment, safe exercise, surgical, transportation, women's health, and emergency medical.

Table 13: Survey Responses – Preferences for Receiving Information about Healthcare

Preferred Method	Eastbank Respondents (%)	Westbank Respondents (%)
Newspaper	21.2%	25.2%
TV	33.4%	30.6%
Internet	29.4%	36.0%
Word of Mouth	62.4%	63.1%
Radio	13.7%	14.4%
Library	2.5%	2.7%
Clinics	21.2%	17.1%
Faith/Religious Organizations	27.1%	16.2%
Call 2-1-1	4.5%	4.5%
Other	6.2%	6.3%

Respondents reported preferring to receive information by word of mouth most often.

Common Health Issues:

Table14: Survey Responses – Health Issues Respondents Reported Ever Diagnosed with

	SELA	Eastbank	Westbank		
Ever Diagnosed with	Region	Region	Region	LA*	U.S.*
High blood pressure	44.8%	49.6%	34.9%	39.9%	31.4%
High blood cholesterol	30%	32.4%	26.9%		
Heart attack	6.2%	5.6%	8.3%	5.3%	4.3%
Asthma	13.2%	11.3%	20.2%	5.3%	4.3%
Still have asthma	8.8%	8.4%	12.6%		
COPD, emphysema or chronic bronchitis	4.2%	3.1%	4.6%	7.5%	6.5%
Arthritis/rheumatoid, gout, lupus, or fibromyalgia	27.8%	30.5%	26.2%	26.4%	25.3%
Depressive disorder	21.5%	18.4%	30.5%	18.7%	18.7%
Pre-diabetes or borderline diabetes	18.6%	20.4%	18.5%	11.6%	9.7%
Diabetes	16%	18.1%	16.2%	10.3%	9.7%
Skin cancer	2.8%	2.8%	2.9%	5%	6%
Other types of cancer (Breast-20.5%)	4.4%	3.5%	5.8%	6.6%	6.7%
Receiving mental health treatment/medication	21.4%	19%	22.7%		

^{*} Source: CDC

When asked to report health conditions that they had ever been diagnosed with by a health professional, survey respondent from the Eastbank and Westbank regions reported:

✓ Higher diagnosis rates than the SELA region, the state and the nation for high blood pressure (Eastbank- 49.6%, Westbank – 34.9% vs. SELA- 44.8%, LA- 39.9%, and U.S.-

31.4%); high blood cholesterol (Eastbank- 32.4%, Westbank – 26.9% vs. SELA- 30%); heart attack (Eastbank- 5.6%, Westbank – 8.3% vs. SELA- 6.2%, LA- 5.3%, and U.S.- 4.3%) arthritis/rheumatoid, gout, lupus, or fibromyalgia (Eastbank- 30.5%, Westbank – 26.2% vs. SELA- 27.8%, LA- 26.4%, and U.S.- 25.3%); depressive disorder (Eastbank- 18.4%, Westbank – 30.5% vs. SELA- 21.5%, LA- 18.7%, and U.S.- 18.7%); prediabetes/borderline diabetes (Eastbank- 20.4%, Westbank – 18.5% vs. SELA- 18.6%, LA- 11.6%, and U.S.- 9.7%); diabetes (Eastbank- 18.1%, Westbank – 16.2% vs. SELA- 16%, LA- 10.3%, and U.S.- 9.7%).

✓ Approximately 1 in 5 (Eastbank- 19% and Westbank − 22.7%) survey respondents indicated they have received mental health treatment or medication at some point in their lives.

Table 15: Survey Responses – Top Health Concerns Reported

Health Concern	SELA Region	Eastbank Region	Westbank Region
Diabetes	50.8%	58.9%	44.4%
High Blood Pressure	49.9%	57.9%	36.1%
Drugs and Alcohol	47.7%	47.8%	42.6%
Cancer	42.1%	40.8%	35.2%
Heart disease	38.5%	40.6%	38%

✓ When asked to identify five of the top health concerns in their communities; there was a great deal of agreement between the regions. Several of the additional choices that were not as popular were: adolescent health, asthma, family planning / birth control, flood related health concerns (like mold), hepatitis infections, HIV, maternal and child health, pollution (e.g., air quality, garbage), sexually transmitted diseases, stroke, teen pregnancy, tobacco use, violence or injury, other, and don't know.

Lifestyle:

Table 16: Survey Responses – Average Body Mass Index of Survey Respondents

	SELA	Eastbank	Westbank	Avg. Female	Avg. Male	
Weight & BMI	Region	Region	Region	(5'4")*	(5'9")*	
BMI**	29.3	29.27	28.79	26.5	26.6	Ī

^{*} Source: CDC

✓ Respondents in both regions show higher weight and BMI than national and state averages regardless of gender.

Table 17: Survey Responses – Self-Reported Smoking Rates

^{**} Survey Respondents were asked to report their weight and height, from which the BMI calculation was possible.

Smoking	SELA Region	Eastbank Region	Westbank Region	LA*	U.S.*
Everyday	15.5%	11.4%	20.6%	19.3%	15.4%
Some days	8.1%	7.6%	10.3%	6.4%	5.7%
Not at all	74.7%	79.3%	67.3%		

^{*}Behavioral Risk Factor Surveillance System

Self-reported smoking rates among survey respondents are lower in the Eastbank region (11.4%) and highest in the Westbank region (20.6%) than is average for the state (19.3%) or the nation (15.4%).

Table 18: Survey Responses – Self-Reported Physical Activity Rates

Physical Activities	SELA Region	Eastbank Region	Westbank Region	U.S.*
Yes	57.3%	55.6%	63.6%	74.7%
No	42.7%	44.4%	36.4%	25.3%

^{*}Behavioral Risk Factor Surveillance System

Respondents in both the SELA, Eastbank, and Westbank regions report lower rates of physical activity than those reported for the nation.

Conclusions and Recommended Next Steps

The community needs identified through the University Medical Center New Orleans CHNA process are not all related to the provision of traditional medical services provided by medical centers. However, the top needs identified in this assessment do "translate" into a wide variety of health-related issues that may ultimately require hospital services. Each health need identified has an impact on population health outcomes and ultimately the cost of healthcare in the region. For example: unmet behavioral health and substance abuse needs lead to increased use of emergency health services, increased death rates due to suicide, and higher consumption of other human service resources (e.g., the penal system).

University Medical Center New Orleans working closely with community partners, understands that the CHNA document is only a first step in an ongoing process. It is vital that ongoing communication and a strategic process follow the assessment — with a clear focus on addressing health priorities for the most vulnerable residents in the hospital service area.

The hospital service area contains affluent populations and populations with higher socioeconomic needs (e.g., low-income, residents with a behavioral health history, unemployed, uninsured, homeless, seniors, etc.); which presents a unique challenge for hospital leadership when planning to meet the needs of all residents. There is evidence of health needs, particularly related to behavioral health and low income populations. With one of the lowest FQHC ratios and more than one-third of the service area showing higher rates of uninsured residents than the state or the nation, it will be important to continue to strive to address the primary care needs of the under/uninsured residents in Jefferson Parish. Orleans Parish shows the poorest outcomes across many of the indicators included in this study. Ensuring access to health services by increasing care coordination across the service area to the most vulnerable populations in areas of concentrated poverty will have the greatest impact on outcomes. Hospital leadership will need to consider the health disparities that exist among Native American residents, Asian residents, and African American residents throughout the service area. It is important to expand existing partnerships and build additional partnerships with multiple community organizations when developing strategies to address the top identified needs. Implementation strategies will need to consider the higher need areas in the study area and address the multiple barriers to healthcare. It will be necessary to review evidence based practices prior to planning to address any of the needs identified in this assessment due to the complex interaction of the underlying factors at work driving the need in local communities.

Tripp Umbach recommends the following actions be taken by the hospital sponsors in close partnership with community organizations over the next five months.

Recommended Action Steps:

- ☐ Widely communicate the results of the CHNA document to University Medical Center New Orleans staff, providers, leadership and boards.
- Review the CHNA findings with a decision making body (e.g., a Board of Directors) for approval.
- ☐ Make the CHNA widely available to community residents, as well as through multiple outlets such as: the hospital website, neighborhood associations, stakeholders, community-based organizations, and employers.
- ☐ Review relevant evidence-based practices that the community has the capacity to implement.
- Develop "Working Groups" to focus on specific strategies to address the top needs identified in the CHNA. The working groups should meet for a period of four to six weeks to review evidence-based practices and develop action plans for each health priority which should include the following:
 - Objectives
 - ✓ Anticipated impact
 - ✓ Target population
 - ✓ Planned action steps
 - ✓ Planned resource commitment
 - ✓ Collaborating organizations
 - Evaluation methods and metrics
 - ✓ Annual progress

APPENDIX A

Community Resource Inventory

UNIVERSITY MEDICAL CENTER NEW ORLEANS

September, 2015

Tripp Umbach completed an inventory of community resources available in the University Medical Center New Orleans service area using resources identified by the MHCNO, internet research and United Way's 211 First Call for Help community resource database. Using the zip codes which define the University Medical Center New Orleans community more than 100 community more than 100 community resources were identified with the capacity to meet the three community health needs identified in the University Medical Center New Orleans CHINA. (Please refer to the Community Health Needs Assessment Report to review the detailed community needs.)

capacity to meet the three community health needs identified in the University Medical Center New Orleans CHNA. (Please refer to the Community Health Needs Assessment Report to review the detailed community needs.) INVENTORY OF COMMUNITY RESOURCES AVAILABLE TO ADDRESS COMMUNITY HEALTH NEEDS IDENTIFIED IN THE UMCNO CHNA Please refer to the Community Health Needs Assessment Report to review the detailed community needs.)																											
Organization/Provider	Counties Served	Contact Information	Zip Code	Column1	Internet Information	Population Served	Services Provided	CCESS TO HEALTHCARE AND MEDICAL SERVICES	mited availability of affordable preventive care	imited availability of medical professionals ostly fees that may be unaffordable for some	esidents ost of health insurance	ransportation availability	oordination of healthcare	ediatric Health Care	EHAVIORAL HEALTH AND SUBSTANCE ABUSE	Aental health	ubstance abuse	ediatric Behavioral health (psychiatry, counseling, tc.)	ESOURCE AWARENESS AND HEALTH LITERACY	imited information dissemination ervices for Latino/Vietnamese residents (including	ranslation services) ollaboration of business, hospitals and communities	imited outreach service provision	CCESS TO HEALTHY OPTIONS	lealthy nutrition	ecreational activities availability	ubiic transportation availabiiity upervision of young people	EHAVIORS THAT IMPACT HEALTH
		726 E. Judge Perez Drive Chalmette, LA 70043			More Information	No restrictions	Provides home healthcare. Greater New Orleans Area Application Center for Medicaid.	*	x	x	x		х	_			- A	- 2	*	х х	5 0	х	*	x	- C		*
	No restrictions	Phone: (504) 272-2373 2200 Veterans Blvd., Suite 115 Kenner, LA 70062	70062	Jefferson	More Information	No restrictions	Provides home healthcare. Children's Choice Waiver. Greater New Orleans Area Application	*	x	x	x		x							x		х	*	x		_	*
A BEAM OF LIGHT	No restrictions	Phone: (504) 466-1550 1 (888) 988-8088 5201 WestBank Expressway Marrero, LA 70072 Phone: (504) 328-1627 (866) 328-1627	70072	Jefferson	More Information	No restrictions	Center for Medicaid. Provides home healthcare and assistance with independent living.	*		х									*	х		х	*	х			*
A COMMUNITY APPROACH TO CARE	No restrictions	4480 General DeGaulle Drive Suite 202 New Orleans, LA 70131 Phone: (504) 393-6511 (877) 393-6510	70131	Orleans	More Information	No restrictions	Provides home healthcare. Greater New Orleans Area Application Center for Medicaid.	*	х	х	х		х						*	x		х	*	х			*
A HOME CARE ALTERNATIVE OF GREATER NEW ORLEANS		137 N. Clark Street Suite U-6 New Orleans, LA 70119 Phone: (504) 373-6527 (866) 821-5429	70119	Orleans	More Information	No restrictions	Provides home healthcare. Greater New Orleans Area Application Center for Medicaid.	*	х	х	х		х						*	х		х	*	х			*
A PIECE OF MIND CARE PROVIDER, INC	No restrictions	116 Oak Lane Suite B Luling, LA 70070 Phone: (985) 785-4451 (888) 900-4451	70070	St. Charles	More Information	No restrictions	Provides home healthcare. South Central Application Center for Medicaid.	*	x	х	х		x						*	х		х	*	х			*
A+ PEOPLE SERVICES	No restrictions	12 A Westbank Expressway Suite 204 Gretna, LA 70053 Phone: (504) 362-4866 (866) 294-5672	70053	Jefferson	More Information	No restrictions	Provides home healthcare. South Central Application Center for Medicaid.	*		х																	
A-1 ABSOLUTE BEST CARE	No restrictions	401 Whitney Avenue, Suite 401 Gretna LA 70056	70053	Jefferson	More Information	No restrictions	Provides home care services, companionship care, fellowship care, and adult day care.	*		х			х						*	х	х	х	*	х			*
A-1 ABSOLUTE BEST CARE	No restrictions	Phone Number: 504 368-0206 534 East Airline Highway La Place LA 70068 Phone Number: 985 651-6003	70068	St. John the Baptist	More Information	No restrictions	Provides home care services, companionship care, fellowship care, and adult day care.	*		х			х						*	x	х	х	*	х			*
A-1 CUSTOMIZED COMPANION CARE	No restrictions	2100 Belle Chase Highway Suite C Gretna, LA 70053 Phone: (504) 259-4628 (888) 321-2375	70053	Jefferson	More Information	No restrictions	Provides home healthcare. South Central Application Center for Medicaid.	*		х	х																
A-1 In Home Companion Care, LLC		2239 First Street Slidell, LA 70458 985.649.4357 1.877.464.4627			More Information	No restrictions	Provides Children's Choice (03), Personal Care Attendant, [MR/DD] (82), Supervised Independent Living (89), and Supported Employment (98).	*		x																	
ACCESS HEALTH LOUISIANA	No restrictions	Albert Cammon Wellness Center 232 Pirate Drive St Rose, LA 70087 (985) 308-6101		St. Charles	http://www.accesshealthla.org/	St. Rose Elementary and Albert Cammon Middle School	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x	x x		х	х	*	x	х	x	*	x			*	х			*
ACCESS HEALTH LOUISIANA	No restrictions	Bonnabel High School 2801 Bruin Drive Kenner, LA 70065		Jefferson	http://www.accesshealthla.org/	Students	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x	x x		х	х	*	x	х	x	*	x			*	х			*
ACCESS HEALTH LOUISIANA	No restrictions	Cohen College Prep 3520 Dryades Street New Orleans, LA 70115 (504) 301-9023		Orleans	http://www.accesshealthla.org/	Students	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x	x x		x	x	*	x	х	x	*	х			*	x			*
ACCESS HEALTH LOUISIANA	No restrictions	Internists - Cardiology and Nephrology Drive Raj and Drive Jay 1057 Paul Maillard Rd, Suite 240 Luling, LA 70070 (985) 785-2045		St. Charles	http://www.accesshealthla.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x	x x		x	x	*	x	х	x	*	х			*	x			*
ACCESS HEALTH LOUISIANA	No restrictions	John Ehret High School 4300 Patriot Street Marrero, LA 70072	70072	Jefferson	http://www.accesshealthla.org/	Students	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x	x x		x	x	*	x	х	х	*	х			*	x			*
ACCESS HEALTH LOUISIANA	No restrictions	Joshua Butler Elementary School 300 Fourth Street Westwego, LA 70094	70094	Jefferson	http://www.accesshealthla.org/	Students	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x	x x		x	x	*	x	х	x	*	x			*	x			*
ACCESS HEALTH LOUISIANA	No restrictions	Paradis Wellness Center 434 South Street Paradis, LA 70080	70080	St. Charles	http://www.accesshealthla.org/	R.J. Vial Elementary School and J.B. Martin Middle School	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	х	x	x x		х	x	*	x	х	х	*	x			*	х			*
ACCESS HEALTH LOUISIANA	No restrictions	Riverdale High School 240 Riverdale Drive Jefferson, LA 70121	70121	Jefferson	http://www.accesshealthla.org/	Students	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x	x x		х	x	*	х	х	х	*	х			*	х			*
ACCESS HEALTH LOUISIANA	No restrictions	South Broad Community Health Center 3300 South Broad St New Orleans, LA 70125 (504) 309-5061		Orleans	http://www.accesshealthla.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	х	х	x x		х	x	*	х	х	x	*	x			*	x			*
ACCESS HEALTH LOUISIANA	No restrictions	Warren Easton Wellness Center 3036 Iberville Street New Orleans, LA 70119 (504) 324-7880	70119	Orleans	http://www.accesshealthla.org/	Students	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x	x x		х	х	*	x	х	x	*	x			*	х			*

Organization/Provider	Counties Served	Contact Information	Zip Code	Column1	Internet Information	Population Served	Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	Limited availability of medical professionals Costly fees that may be unaffordable for some residents	Cost of health insurance	Transportation availability	Coordination of health care	Pediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance abuse	Pediatric Behavioral health (psychiatry, counseling, etc.)	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination	Services for Latino/Vietnamese residents (including translation services)	Collaboration of business, hospitals and communities	Umited Outreach service provision	Healthy nurition	Recreational activities availability	Public transportation availability	Supervision of young people BEHAVIORS THAT IMPACT HEALTH
ACCESS HEALTH LOUISIANA	No restrictions	Belle Chasse Community Health Center 8200 Highway 23	70037	Plaquemines	http://www.bchasse.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric,																				
		Belle Chasse, LA 70037 (504) 398-1100					behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	х	хх	х		х	х	*	х	х	х	*	х			*	* x			*
	No restrictions	Ruth U. Fertel/Tulane Community Health Center 711 N. Broad Street New Orleans, LA 70119 (504) 609-3500	70119	Orleans	http://www.rftchc.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x x	x		x	x	*	x	x	x	*	x			*	ŧ x			*
ACCESS HEALTH LOUISIANA	No restrictions	St. Bernard Community Health Center 8050 W. Judge Perez Dr, Suite 1300 Chalmette, LA 70043 (504) 281-2800	70043	St. Bernard	http://www.stbchc.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x x	x		x	x	*	x	x	x	*	x			*	ŧ x			*
ACCESS HEALTH LOUISIANA	No restrictions	St. Charles Community Health Center 16004 River Road Norco, LA 70079 (985) 725-9330	70079	St. Charles	http://www.stcchc.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x x	x		х	x	*	х	х	х	*	х			*	k x			*
ACCESS HEALTH LOUISIANA	No restrictions	St. Charles Community Health Center 200 W. Esplanade Avenue Sultes 305, 310, 413 Kenner, LA 70065 (504) 712-7800	70065	Jefferson	http://www.stcchc.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x x	x		х	х	*	x	x	х	*	х			*	× x			*
ACCESS HEALTH LOUISIANA	No restrictions	St. Charles Community Health Center 843 Milling Avenue Luling, LA 70070 (985) 785-5800	70070	St. Charles	http://www.stcchc.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	х	x x	x		x	x	*	x	x	x	*	x			*	×			*
	No restrictions	St. Charles Community Health Center 853 Milling Avenue Luling, LA 70070 (985) 785-5800		St. Charles	http://www.stcchc.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x x	х		х	x	*	x	x	x	*	х			*	k x			*
	No restrictions	St. Tammany Community Health Center 1301 N. Florida Street Covington LA 70433 (985) 400-5340				No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x x	х		х	x	*	x	x	x	*	x			*	k x			*
	No restrictions	St. Tammany Community Health Center 501 Robert Blvd Slidell, LA 70458 (985) 607-0400				No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x x	x		x	x	*	x	x	x	*	x			*	k x			*
ACCESS HEALTH LOUISIANA	No restrictions	Washington Community Health Center 2807 S. Columbia Street Bogalusa, LA 70427 (985) 730-7310	70427	Washington	http://www.washchc.org/	No restrictions	Federally qualified health center providing access to WIC, primary, preventive, pediatric, behavioral, dental, substance abuse, and some specialty care regardless of ability to pay.	*	x	x x	х		х	х	*	x	x	x	*	x			*	k x			*
ACCESS PREGNANCY AND REFERRAL CENTERS	No restrictions	921 Aris Avenue, Ste. B Metairie, LA 70005 (504) 832-1503	70065	Jefferson	http://accesspregnancy.com/access- pregnancy-counseling-new-orleans- metairie/	Women	Provides individualized support and referrals for pregnancy-related concerns and application for Medicaid. Professional counseling services are available by referral.	*	x	x x	x				*	x			*	x	x	х :	, ×	×			*
Accessibility Community Living, Inc.		1799 Stumpf Blvd., Bldg. 3 Suite 1 , Gretna, LA 70056 Phone: (504) 361-8807 (866) 363-8807	70056	Jefferson	http://dhh.louisiana.gov/index.cfm/ directory/detail/5349	No restrictions	Provides services and access to resources for people with disabilities.	*	х	x x	х		х		*	х			*	х	х	х :	ĸ				*
CARE	Orleans, Jefferson, Plaquemines, St. Bernard	8000 Crowder Blvd., Suite A New Orleans, LA 70128 Phone: (504) 244-8688 (866) 746-4584	70128	Orleans	http://actionrtci.net/	No restrictions	Provides personal care services and applications for Medicaid.	*	x	x x	х	х							*	x	x	x :	(*	k x		x	*
ADDICTION COUNSELING & EDUCATIONAL RESOURCES (ACER)	No restrictions	2238 First Street Slidell, LA 70458 Phone: (985)690-6622	70458	St. Tammany	http://acercanhelp.com/services-2/	No restrictions	Provides treatment of addictive disorders.								*	х	х		*	х	х	x 2	ĸ				*
EDUCATIONAL RESOURCES (ACER)	No restrictions	2321 North Hullen Street Suite B Metairie, LA 70001 504-941-7580	70001	Jefferson	http://acercanhelp.com/services-2/		Provides treatment of addictive disorders.								*	х	х		*	х	x	х :	ĸ				*
EDUCATIONAL RESOURCES (ACER)	No restrictions	7532 Judge Perez Arabi, LA 70032 504-682-9550	70032	St. Bernard	http://acercanhelp.com/services-2/		Provides treatment of addictive disorders.								*	х	х		*	х	x	x :	ĸ				*
	No restrictions	1615 Canal Street, Ste. A-1 New Orleans, LA 70112 1.866.399.HOPE (4673)	70112	Orleans	http://www.arrno.com/	No restrictions	Provides alcohol and substance abuse treatment.								*	x	x		*	x							*
RESOURCES	No restrictions	4933 Wabash Street Metairie, LA 70001 1.866.399.HOPE (4673)	70001	Jefferson		No restrictions	Provides alcohol and substance abuse treatment.								*	х	х		*	х							*
ADOLESCENT SCHOOL HEALTH PROGRAM		1450 Poydras, Room 2060 New Orleans, LA 70112 Phone: (504) 568-8164	70112	Orleans	http://www.dhh.state.la.us/index.cf m/directory/detail/4938		Provides school based health services.	*	х	хх	х			х					*	х	х	x :	(*	* x	х		x *
	No restrictions	8325 Oak Street New Orleans, LA 70118 Telephone: (504) 522-2337		Orleans			Provides information about resources and referrals for legal, social, health, education, employment, and other related services; assists disabled persons with obtaining benefits.												*	х	x	x :	K				
Advocates for Juvenile & Adults Rights, Inc. (A.J.A.R)	No restrictions	3909 Fourth Street New Orleans, LA 70125 Phone: (504) 309-8613 (888) 309-2527	70125	Orleans	http://www.dhh.state.la.us/index.cf m/directory/detail/3125	No restrictions	Community Based Residential Treatment Facility, Mental Retardation and/or Developmental Disabilities								*	х											*

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Organization/Provider	Counties Served	Contact Information	Zip Code	Column1	Internet information	Population Served	Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	imited availability of affordable preventive care	imited availability of medical professionals oststy fees that may be unaffordable for some	cost of health insurance	ransportation availability	Coordination of healthcare	bediatric Health Care	SEHAVIORAL HEALTH AND SUBSTAINCE ABUSE	Vental health	bubstance abuse bubstance abuse ediatric Behavioral health (psychistry, counseling,	RESOURCE AWARENESS AND HEALTH LITERACY	imite d information dissemination	services for Latino/Vietnamese residents (including granslation services)	collaboration of business, hospitals and communities	imited outreach service provision	ACCESS TO HEALTHY OPTIONS	Jeaktry nutrition	Recreational activities availability	Sublic transportation availability supervision of young people	SEHAVIORS THAT IMPACT HEALTH
AGENDA FOR CHILDREN	No restrictions	1011 North Causeway Blvd, Suite 39 Mandeville, LA 70471 P: (985) 624-2950	70471		www.agendaforchildren.org	Children and families	Supports community programs that promote and support children. Raises awareness for children's issues.		ĺ				Ü			Ì	0, 2	*	х	х	х	х	*	х			*
AGENDA FOR CHILDREN	No restrictions	1340 West Tunnel Blvd, Suite 550 Houma, LA 70360 P: (985) 446-8330	70360	Terrebonne	www.agendaforchildren.org	Children and families	Supports community programs that promote and support children. Raises awareness for children's issues.											*	х	х	х	х	*	х			*
AGENDA FOR CHILDREN	No restrictions	R300 Earhart Blvd, Suite 201 New Orleans, LA 70118 P: (504) 586-8509	70118	Orleans	www.agendaforchildren.org	Children and families	Supports community programs that promote and support children. Raises awareness for children's issues.											*	х	х	х	х	*	х			*
All America Personal Care, Inc.	No restrictions	4232 Williams Blvd. Suite 109 Kenner, LA 70065 Phone: (504) 214-3940 (866) 364-1822	70056	Jefferson	http://www.dhh.state.la.us/index.cf m/directory/detail/3139	No restrictions	Provides home healthcare.	*		х																	
ALPHACARE SUPPORT COORDINATION, LLC	No restrictions	7809 Airline Drive Suite 210 Metairie, LA 70003 Phone: 504-731-3100	70003	Jefferson	http://alphacaresupport.com/5339. html	Individuals with developmental disabilities	Provides community support services for individuals with developmental delays/disabilities	*		хх	х		х	х	*	х	х	*			х	х					*
AMERICAN CANCER SOCIETY NEW ORLEANS OFFICE	No restrictions	2605 River Road New Orleans, LA	70121	Jefferson	www.cancer.org	Cancer patients and their families	and/or HIV. Provides access to information and services for cancer patients and their families.	*	х									*	х		х	х	*				*
AMERICAN HEART ASSOCIATION	No restrictions	504-469-0021 110 Veterans Blvd., Suite 160 Metairie, LA	70005	Jefferson	www.heart.org	No restrictions	Provides information and support relating to diseases of the heart.											*	х	x	х	х					*
ANGEL'S CARE, LLC	No restrictions	504-830-2300 1317 Airline Hwy STE C La Place, LA 70068	70068	St. John the Baptist	http://www.angelcarela.com/Person al-Care-Services.html	No restrictions	Provides support services to individuals with developmental disabilities.	*		хх	х							*	х		x	х	*	х	х	х	*
ANGEL'S CARE, LLC	No restrictions	985-359-2162 7809 Airline Drive, Suite 208 B Metairie, LA 70003	70003	Jefferson	http://www.angelcarela.com/Person al-Care-Services.html	No restrictions	Provides support services to individuals with developmental disabilities.	*		хх	х							*	х		х	х	*	х	х	х	*
ARC OF GREATER NEW ORLEANS	St. Bernard,	Phone: (504) 739-1592 (866) 739-1592 925 S. Labarre Road Metalrie, LA 70001 Phone: 504-837-5140	70001	Jefferson	www.arcgno.org/	Individuals with intellectual disabilities and their families.	Arc provides various services throughout the entire community including Family Services Coordination, Respite, Personal Care, Employment/Habitation and Supported Living Assistance.	*		x	х	x	x	х	*	x	x	*	x	х	х	х	*	х	x	x	*
ARC OF GREATER NEW ORLEANS	St. Bernard, Plaquemines and St Tammany	3700 Jean Lafitte Pkwy. Chalmette, LA 70043			www.arcgno.org/	disabilities and their families.	Arc provides various services throughout the entire community including Family Services Coordination, Respite, Personal Care, Employment/Habitation and Supported Living Assistance.	*				х				х							*			х	
ARC OF GREATER NEW ORLEANS	St. Bernard,	Individual Options 333 Sala Avenue Westwego, LA 70094 504-341-4414	70094	Jefferson	www.arcgno.org/	Adults with intellectual disabilities	Provides support for individuals to take part in volunteer projects and work at other non-profit agencies and/or provides support and supervision in various community and health and fitness activities relevant to each individual's interest.	*				х			*	х		*	x	х	x	x	*		x		*
ARC OF GREATER NEW ORLEANS	St. Bernard,	Individual Options 3406 Hessmer Avenue Metairie, LA 70002 504-267-7741	70002	Jefferson	www.arcgno.org/	Adults with intellectual disabilities	Provides support for individuals to take part in volunteer projects and work at other non-profit agencies and/or provides support and supervision in various community and health and fitness activities relevant to each individual's interest.	*				x			*	х		*	x	х	x	x	*		x		*
ARC OF GREATER NEW ORLEANS	St. Bernard,	Individual Options 5700 Loyola Ave. New Orleans, LA 70115 504-897-0134	70115	Orleans	www.arcgno.org/	Adults with intellectual disabilities	Provides support for individuals to take part in volunteer projects and work at other non-profit agencies and/or provides support and supervision in various community and health and fitness activities relevant to each individual's interest.	*				x			*	х		*	x	x	x	x	*		x		*
ARC OF GREATER NEW ORLEANS	St. Bernard, Plaquemines and St Tammany	106 E. 25th Avenue Covington, LA 70433	70433	St. Tammany	www.arcgno.org/	Individuals with intellectual disabilities and their families.	Arc provides various services throughout the entire community including Family Services Coordination, Respite, Personal Care, Employment/Habitation and Supported Living Assistance.	*		х	х	х	х	х	*	х	х	*	x	х	x	x	*	х	х	х	*
ARC OF GREATER NEW ORLEANS	St. Bernard, Plaquemines and St Tammany	3700 Jean Lafitte Parkway, Suite B Chalmette, LA 70043			www.arcgno.org/	disabilities and their families.	Arc provides various services throughout the entire community including Family Services Coordination, Repite, Personal Care, Employment/Habitation and Supported Living Assistance.	*		x	x	x	x	x	*	x	х	*	x	x	x	x	*	x	x	x	*
Assisi Bridge House	No restrictions	600 Bull Run Road Schriever, LA 70395 Phone: (985) 872-5529	70395	Terrebonne	More Information	No restrictions	Provides substance abuse services.								*		х										
Assurance Care Provider, LLC		2145 Rev. Richard Wilson Drive Kenner, LA 70062 Phone: (504) 472-0068	70062		More Information	No restrictions	Provides substance abuse services.								*		x										
Inc.	No restrictions	1799 Stumpf Blvd., Bldg. 7, Suite 1 Gretna, LA 70056 Phone: (504) 368-4535	70056	Jefferson	http://dhh.louisiana.gov/index.cfm/ directory/detail/5375	No restrictions	Provides support services to individuals with developmental disabilities.	*		хх	х							*	х		х	х	*	х	х	х	*
AUTISIM SOCIETY - GREATER NEW ORLEANS CHAPTER	No restrictions	P.O. Box 26057 New Orleans, LA 70186 Phone: 504-464-5733	70186	Orleans	http://www.asgno.org/	No restrictions	Provides information and referrals, advocacy and support for individuals with Autism Spectrum Disorder (ASD) and their families.	*						х	*	х	х	*	х	х	х	х					*
BAPTIST COMMUNITY MINISTRIES	No restrictions	400 Poydras Street, Suite 2950, New Orleans, LA Info@bcm.org 504-593-2323	70130	Orleans	www.bcm.org	No restrictions	Provides financial support to non profit organizations located in the greater New Orleans area. Is committed to the development of a healthy community offering a wholesome quality of life to its residents and to improving the physical, mental, and spiritual health of the individuals we serve.											*	x		x	x					
BEACON BEHAVIORAL HOSPITAL	L No restrictions	14500 Hayne Blvd Suite 200 New Orleans, LA (504) 210-0460	70128	Orleans	http://beaconbh.com.kntrl2.com/ab out-us	No restrictions	Provides behavioral and mental health care.	*	х	хх	x		х		*	х		*	х	х	х	х					*
		1120-1-110-0400			+	+	1							_	_	_			_	-				-	\rightarrow	\rightarrow	

Marie Mari			Contact Information				Population Served	Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	United availability of medical professionals Costly fees that may be unaffordable for some residents	Cost of health insurance	Transportation availability	Coordination of healthcare	Pediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance abuse	Pediatric Behavioral health (psychiatry, counseling, etc.)	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination Services for Latino Metamace recidents find uding	vervices for Lauroy Vietnamese residents (including translation services)	Collaboration of business, hospitals and communities	Limited outreach service provision	ACCESS TO HEALTHY OPTIONS	Healthy nutrition	Recreational activities availability Public transportation availability	Supervision of young people	BEHAVIORS THAT IMPACT HEALTH
Marie Barrier Barrie	BEACON BEHAVIORAL HOSPITAL	No restrictions		70458	St. Tammany	http://beaconbh.com.kntrl2.com/ab out-us	No restrictions	Provides behavioral and mental health care.	*	х	x x	х		х		*	x			*	х	x	x >	x					*
March Marc	BEACON BEHAVIORAL HOSPITAL	No restrictions	Metairie, LA 70002	70002	Jefferson		No restrictions	Provides behavioral and mental health care.	*	х	хх	x		x		*	x			*	x	x	х >	x					*
March Marc	BEACON BEHAVIORAL HOSPITAL	No restrictions	5789 Highway 311, Suite 2 Houma, LA 70360	70360	Terrebonne		No restrictions	Provides behavioral and mental health care.	*	х	хх	х		х		*	х			*	х	x	х >	x					*
March Marc	BEST CARE PROVIDERS, INC	No restrictions	4443 Copernicus Street	70131	Orleans	http://dhh.louisiana.gov/index.cfm/ directory/detail/5379	No restrictions	Provides support services to individuals with developmental disabilities.	*		хх	х								*	х		х)	х	*	х	x	х	*
TOTAL METALON		No restrictions	417 South Johnson Street	70112	Orleans		No restrictions	Provides substance abuse services.								*		x				-							
Market M	CENTER BHG NEW ORLEANS WESTBANK	No restrictions	Phone: (504) 524-7205 1141 Whitney Avenue Building 4	70056	Jefferson	https://new-orleans-	No restrictions	Provides substance abuse services.								*						_						-	
Miles	BIRDS TRANSPORTATION LLC	Jefferson, Orleans,	P: 504-347-1120 7530 Malvern Drive	70126	Orleans		No restrictions	Provides non-emergency medical transportation.										х				+					_	-	
March Control Contro		Bernard	Phone: (504) 458-8614	70056	lefferson		Targets Vietnamese		*				х									_					4		
March Marc			Gretna, LA 70056 Phone: 504-433-8668				population	population. South Central Application Center for Medicaid.												*	х	X	x >	х					
Control Cont	SOUTHEAST LOUISIANA COUNCIL	Plaquemine, St. John the Baptist, St. Bernard, St. Charles, St.	504-889-0388	70001	Jetterson	www.bsa-seiacouncil.org	Youth	that builds character, trains them in the responsibilities of participating citizenship, and												*	x		x		*	х	х	х	*
Section Sect	BOYS & GIRLS CLUB OF SOUTHEAST LOUISIANA	No restrictions	919 N. Columbia Street Covington, LA 70433	70433	St. Tammany	More Information	Youth	outcomes: academic success, good character and												*	x		x >	x	*	x	x	x	*
75 Decay Date 175 De		No restrictions	NFL-YET New Orleans 1140 S. Broad Street New Orleans, LA 70125	70125	Orleans	More Information	Youth	outcomes: academic success, good character and												*	х		x >	х	*	х	x	х	*
## Part Company Compan		No restrictions	705 Dewey Drive Slidell, LA 70458	70458	St. Tammany	More Information	Youth	outcomes: academic success, good character and												*	х		x >	x	*	x	x	х	*
## 1450 Factor Modern (Association of Control, National Control, N		No restrictions	Westbank Boys & Girls Club 900 Tenth Street Gretna, LA 70053	70053	Jefferson	More Information	Youth	outcomes: academic success, good character and												*	x		x >	x	*	x	x	х	*
CAMPATER NEW OFFICIALS APPROXIMATION OF MATERIAL SIZES APPROXIMATION	Bridge House Corporation	No restrictions	4150 Earhart Blvd. New Orleans, LA 70125	70125	Orleans	More Information	No restrictions	Provides substance abuse services.								*		х											
Application Center for Medicals. Provides policy (1998) Provides		No restrictions	824 Elmwood Park Blvd., Suite 154 New Orleans, LA 70123	70123	Jefferson	http://www.cagno.org/wp/services- offered/	Targets cancer patients and their families	of prescription pain and treatment medications, colostomy bags and comfort items (bedpads, etc.) for cancer patients who cannot afford them.	*		x									*	x		x >	x					*
CATHOLIC CHARTIES APPOINT (BS) 513-4096 From:	CANON HOSPICE	No restrictions	Jefferson, LA 70121	70121	Jefferson	http://www.canonhospice.com/	No restrictions		*	х	хх	х		х						*	х	x	х >	х	*	х	х		*
ARCHODICES OF NEW ORLANS New Orleans, LA 70113 Phone: 504-523-3755 REGISTRATION HOPE CENTER No restrictions			3013 Highway 51, Suite A , La Place, LA 70068 Phone: (985) 653-7575 (800) 630-9883 FaX: (985) 653-4996 Email: Tsalinas@careinc.com		Baptist	bid/56/Default.aspX		transportation, companionship, meal preparation, personal hygiene, medication reminders, social activities and light housekeeping.	*		x		x												*	x	х		*
Metairic, LA 70001	ARCHDIOCESE OF NEW ORLEANS	No restrictions	New Orleans, LA 70113 Phone: 504-523-3755		Orleans	www.ccano.org	No restrictions	immigration, unemployment, domestic violence, education and the needs of the mentally ill, low-	*		x	х		х	х	*	x	х	х	*	х	x	x)	x	*	х	x	х	*
CENTER FOR HOPE CHILDREN AND FAMILY SERVICES CENTER FOR HOPE CHILDREN No restrictions Sidell, A 70158 Phone: [50a] 214-5006 Phone: [50a] 214-5006 CHATAM MEDICAL TRANSTI Plagemenines, 32. Herson, Orleans Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides unbstance abuse and mental health services. No restrictions Provides polation health care. ** X X X X X X X X X X X X X X X X X X	CELEBRATION HOPE CENTER	No restrictions	Metairie, LA 70001	70001	Jefferson		No restrictions	Provides substance abuse services.								*		х											
CENTERON HOPE CHILDREN No restrictions S600 Crowder Blud, Julie 208 70127 Orleans http://centerforhopeservices.com/ No restrictions No restr		No restrictions	106 Smart Place Unit B Slidell, LA 70458	70458	St. Tammany	http://centerforhopeservices.com/	No restrictions									*	х	х	х	*	х		х)	x					
CHEATAM MEDICAL TRANST Afferson, Orleans, 2112 Saulet Place 70058 Afferson 700		No restrictions	5630 Crowder Blvd., Suite 208 New Orleans, LA 70127	70127	Orleans	http://centerforhopeservices.com/	No restrictions									*	х	х	х	*	х		х >	x					
CHILDREN'S HOSPITAL No restrictions Main Campus 70118 Orleans 1ttp://www.chrola.org/ Children Provides pediatric health care. * x x x x x x x x x x x x x x x x x x	CHEATAM MEDICAL TRANSIT	Plaquemines, St.	2112 Saulet Place Harvey, LA 70058	70058	Jefferson		No restrictions	Provides non-emergency medical transportation.	*				х																
CHILDREN'S HOSPITAL No restrictions 4052 Ulloa Street New Orleans, LA 70119 Orleans More Information Children Provides pediatric health care.	CHILDREN'S HOSPITAL		Main Campus 200 Henry Clay Avenue New Orleans, LA 70118	70118	Orleans	http://www.chnola.org/	Children	Provides pediatric health care.	*	х	хх	x		х	х					*	x	x	x)	x	*	х			*
	CHILDREN'S HOSPITAL	No restrictions	4052 Ulloa Street New Orleans, LA 70119	70119	Orleans	More Information	Children	Provides pediatric health care.	*	х	хх	х		х	х					*	х	x	x >	x	*	x			*

Organization/Provider		Contact Information	Zip Code	Column1			Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	Limited availability of medical professionals Costly fees that may be unaffordable for some residents	Cost of health insurance	Transportation availability	Coordination of healthcare	Pediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance abuse Pediatric Behavioral health (psychiatry, courseling, let.)	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination	Services for Latino/Vietnamese residents (including translation services)	Collaboration of business, hospitals and communities	reach	ACCESS TO HEALTHY OPTIONS	Healthy nutrition	Recreational activities availability Public transportation availability	Supervision of young people	BEHAVIORS THAT IMPACT HEALTH
CHILDREN'S HOSPITAL	No restrictions	Autism Center, Rapid Treatment Program, Behavioral Health 935 Calhoun Street New Orleans, LA 70118 Phone: 504-896-7272	70118	Orleans	More Information	Children	Provides pediatric behavioral health care.	*		x x	х		х	х	*	x	x	*	x	х	x	x	*	х			*
CHILDREN'S HOSPITAL	No restrictions	Calhoun Campus 1040 Calhoun Street New Orleans, LA 70118 (504) 896-7200	70118	Orleans	More Information	Children	Provides pediatric health care.	*	x	хх	х		х	х				*	х	х	х	x	*	х			*
CHILDREN'S HOSPITAL MEDICAL PRACTICE CORPORATION (CHMPC)		Children's Hospital After Hours 3040 33rd Street (Located at I-10 and Causeway, next to the Galleria) Metairle, LA 70001 Phone (504) 837-7760	70001				Provides pediatric health care and treatment of minor illnesses and injuries after regular business hours.	*	x	хх	x		x	х				*	х	x	х	x	*	х			*
CHILDREN'S HOSPITAL MEDICAL PRACTICE CORPORATION (CHMPC)		Kids First New Orleans East 14401 Chef Menteur Highway New Orleans, LA 70129 (504) 662-0644					Provides pediatric health care.	*		x x	х												*				*
CHILDREN'S HOSPITAL MEDICAL PRACTICE CORPORATION (CHMPC) CHILDREN'S HOSPITAL MEDICAL		Kids First TigerCare Pediatrics (New Orleans) 1661 Canal Street, Suite 1200 New Orleans, LA 70112 (504) 299-9980	70112	Orleans Jefferson	More Information More Information		Provides primary and preventive pediatric health care.	*	x	хх	х		х	х				*	х			х	*	х			*
PRACTICE CORPORATION (CHMPC) CHILDREN'S HOSPITAL MEDICAL		Kids First Westbank 829 Barataria Blvd. Marrero, LA 70072 (504) 368-7337 Lakeside Pediatrics	70072	Jefferson			Provides primary and preventive pediatric health care. Provides primary and preventive pediatric health	*	х	x x	х		х	х				*	х			х	*	х		_	*
PRACTICE CORPORATION (CHMPC) CHILDREN'S HOSPITAL MEDICAL		4740 S I-10 Service Road Metairie, LA 70001 (504) 883-3703 Metairie Pediatrics	70002	Jefferson			care. Provides primary and preventive pediatric health	*	х	x x	х		х	х				*	х			х	*	х	_	1	*
PRACTICE CORPORATION (CHMPC) CHILDREN'S HOSPITAL MEDICAL	No restrictions	2201 Veteran's Blvd., Suite 300 Metairie, LA 70002 Phone: (504) 833-7374 Napoleon Pediatrics - Metairie	70001	Jefferson	More Information		care. Provides primary and preventive pediatric health	*	х	хх	х		х	х				*	х			х	*	х	_	_	*
PRACTICE CORPORATION (CHMPC) CHILDREN'S HOSPITAL MEDICAL	. No restrictions	3040 33rd Street Metairie, LA 70001 (504) 219-0880 Napoleon Pediatrics - Uptown	70115	Orleans	More Information	Children	care. Provides primary and preventive pediatric health	*	х	хх	х		х	х				*	х			x	*	х	_	4	*
PRACTICE CORPORATION (CHMPC) CHILDREN'S HOSPITAL MEDICAL	. No restrictions	2633 Napoleon Avenue Suite 707 New Orleans, LA 70115 (504) 897-4242 Northlake Pediatrics	70433	St. Tammany	More Information		Provides primary and preventive pediatric health	*	х	хх	х		х	х				*	х			х	*	х	_	\perp	*
PRACTICE CORPORATION (CHMPC) CHILDREN'S HOSPITAL MEDICAL	. No restrictions	728 W 11th Avenue Covington, LA 70433 (985) 893-3395 Ormond Pediatrics	70047	St. Charles	More Information		care. Provides primary and preventive pediatric health	*	х	x x	х		х	х				*	х			^	*	х	+	\perp	*
PRACTICE CORPORATION (CHMPC) CHILDREN'S HOSPITAL MEDICAL PRACTICE CORPORATION	. No restrictions	141 Ormond Center Court Destrehan, LA 70047 (985) 764-7337 Pelican Pediatric Physicians 3100 Kingman Street, Suite 110	70006	Jefferson	More Information	Children	care. Provides primary and preventive pediatric health care.	*	х	хх			х	х				*	х			^	*	х	+	+	*
(CHMPC) CHILDREN'S HOSPITAL MEDICAL PRACTICE CORPORATION	. No restrictions	Metairie, LA 70006 (504) 887-6355 Pelican Pediatric Physicians 501 Rue de Sante	70068	St. John the Baptist	More Information	Children	Provides primary and preventive pediatric health care.	*	х	хх	Х		х	х				*	х			х	*	х	+	+	*
(CHMPC) CHILDREN'S HOSPITAL MEDICAL	. No restrictions	Suite 13 La Place, LA 70068 (985) 652-6359 Physicians of River Ridge	70123		More Information		Provides primary and preventive pediatric health	*	х	хх	х		х	х				*	х			х	*	х	_	\downarrow	*
PRACTICE CORPORATION (CHMPC) Choices of Louisiana, Inc.	No restrictions	9605 Jefferson Highway, Suite E River Ridge, LA 70123 (504) 738-1604 128 Woodland Drive	70068	St. John the	http://www.choicesla.com/services/		care. Provides substance abuse services.	*	х	хх	х		х	х				*	х			x	*	х	4	1	*
		La Place, LA 70068 Phone: (985) 651-3777		Baptist											*		х										
CITY OF NEW ORLEANS	Orleans	Health Care for the Homeless 1300 Perdido Street Room 8E18 New Orleans, LA 70112 Phone: 504-941-3026	70112	Orleans	ms/homeless/		Provides primary health care. Greater New Orleans Area Application Center for Medicaid.	*	х	x x	х							*	х	х	x	х					*
CITY OF NEW ORLEANS	Orleans	Health Care for the Homeless 2222 Simon Bolivar Avenue 2nd Floor New Orleans, LA 70112 (504) 658-2785	70112	Orleans	ms/homeless/		Adult Primary Care, OB, Dental, GNOCHC Provider	*	х	x x	х							*			x	х	*	x			*
CITY OF NEW ORLEANS	Orleans	Healthcare for the Homeless at the VA CRC clinic 1530 Gravier Street New Orleans, LA 70112 Phone: (504)658-2785			http://www.nola.gov/health/programs/homeless/			*	x	x x	х							*			х	x	*	x			*
CITY OF NEW ORLEANS	Orleans	Healthcare for the Homeless Mobile Unit New Orleans, LA 70114	70114	Orleans	http://www.nola.gov/health/progra ms/homeless/		Pediatric Primary Care, Dental	*	х	хх	х			х				*			х	х					*
CITY OF WESTWEGO COMMON GROUND	Jefferson No restrictions	419 Avenue A , Westwego, LA 504-341-3424 Latino Health Outreach	70094	Jefferson Orleans			Multi-use playground facilities with organized sports programs for youth. Contact our Park Director, Brian Plaisance at 340-4440 Adult Primary Care																*		x	4	*
		Mobile Unit, New Orleans, LA 504-377-7281						*	х	х	х		х										*				*

Organization/Provider	Counties Served	Contact Information			Internet information	Population Served	Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	Limited availability of medical professionals Costly fees that may be unaffordable for some residents	Cost of health insurance	Transportation availability	Coordination of he alth care	Pediatric Health Care	BBHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Sub stance abuse	Pediatric Behavioral health (psychiatry, counseling, etc.)	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination	Services for Latino/Vietnamese residents (including translation services)	Collaboration of business, hospitals and communities	Limited outreach service provision	ACCESS TO HEALTHY OPTIONS		Recreational activities availability Public transportation availability	Supervision of young people	BEHAVIORS THAT IMPACT HEALTH
COMMON GROUND HEALTH CLINIC	No restrictions	1400 Teche Street, New Orleans, LA 504-361-9800	70114	Orleans	More Information	No restrictions	Provides adult and pediatric primary and preventive health care, mental health services, and counseling. Also, provides a Latino Clinic. Greater New Orleans Area Application Center for	*		x x	x		х	х	*	x		x	*	x	x	x	х	*	x			*
COMMUNITY CARE HOSPITAL	No restrictions	1421 General Taylor St New Orleans, LA	70115	Orleans	http://www.communitycarehospital. com/	Adults	Medicaid. Provides mental and behavioral health care.								*	х										+	+	
COMMUNITY CHRISTIAN CONCERN	No restrictions	(504) 899-2500 2515 Carey St Sildell, LA 70458 Phone: (985) 646-0357	70458	St. Tammany	http://www.cccslidell.org/contact.ht ml	No restrictions	Provides food pantry, clothing, access to social services, and housing.												*	х		х	х	*	х			*
CLINIC	Plaquemines and St Bernard	Chartres-Ponchartrain Mental Health Clinic 7.79 Eysian Fields New Orleans, LA 70117 50-942-8123/dobescent Services 504-942-8101/Adult Services	70117	Orleans	http://wwwprd.doa.louislana.gov/la services/publicpages/ServiceDetail.cf m?service_id=2466	Adults and children living below Canal Street except for Desire/Florida area	Provides out-patient services to adults and children. Services are provided to individuals who children. Services are provided to individuals who children. Services are provided to individuals with a service a diagnosis of errors mental inless. The Hispanic Clinic provides culturally sensitive mental health care to eligible Hispanic adults who reside in Orleans, Plaquemines and St. Bernard parithes. Greater New Orleans Area Application Center for Medicaid.								*	x		x	*	х	x							*
COMMUNITY MENTAL HEALTH CLINIC	Orleans	Central City Mental Health Clinic 2221 Philip Street New Orleans, LA 70113 (504) 568-6650	70113	Orleans	More Information	No restrictions	Central City Mental Health Clinic provides a wide range of services to address the needs of its patients.								*	х	x											
Community Support Specialists, Inc.	, No restrictions	7921 Bullard Road. Unit 2B New Orleans, LA 70128 Phone: (504) 245-5757 (877) 245-5620	70128	Orleans	http://dhh.louisiana.gov/index.cfm/ directory/detail/5401	No restrictions	Provides home healthcare.	*		х																		
COVENANT HOUSE	No restrictions	611 N. Rampart Street New Orleans, LA 70116 Phone: 504-988-4732	70116	Orleans	http://www.covenanthouseno.org/	Children	Services include case management, health services, counseling, educational services, employment services, and bus tickets. Greater New Orleans Area Application Center for Medicaid.	*	x	x x	х	х	х	х	*	х	х	x	*	x	х	х	x	*	х :	x x	х	*
CRAWFORD TRANSIT SERVICES	Jefferson, Orleans, Plaquemines, St. Bernard	P. O. Box 8040 New Orleans, LA 70182 Phone: (504) 874-7002	70122	Orleans		No restrictions	Provides non-emergency medical transportation.	*				х																
Crossroads Louisiana Inc.	No restrictions	3727 General DeGaulle New Orleans, LA 70114 Phone: (504) 366-1828 (866) 663-9448	70114	Orleans	http://www.crossroadsla.com/	No restrictions	Provides independent living support, social and physical fitness opportunities, access to social services, transportation, and residential programs.	*				x			*	x			*	x	x	x	x	*	x :	x	х	*
DAUGHTERS OF CHARITY HEALTH CENTER	No restrictions	100 Warrington Drive New Orleans, LA 70117 (504) 207-3060 Phone	70117	Orleans	More Information	No restrictions	A federally qualified health center providing primary, preventive, behavioral, pediatric and dental health care.	*	х	х	x		х	х	*	х		х	*	х				*				*
DAUGHTERS OF CHARITY HEALTH CENTER	No restrictions	1030 Lesseps St New Orleans, LA 70117 (504) 941-6041	70117	Orleans	More Information	No restrictions	A federally qualified health center providing primary, preventive, behavioral, pediatric and dental health care. Greater New Orleans Area Application Center for Medicaid.	*	x	x x	x		x	x	*	х		x	*	x				*				*
DAUGHTERS OF CHARITY HEALTH CENTER	No restrictions	111 N Causeway Blvd Metairie, LA 70001 (504) 482-0084	70001	Jefferson	More Information	No restrictions	A federally qualified health center providing primary, preventive, behavioral, pediatric and dental health care. Greater New Orleans Area Application Center for Medicaid.	*	x	x x	х		x	х	*	x		х	*	x				*				*
DAUGHTERS OF CHARITY HEALTH CENTER	No restrictions	3201 S Carrollton Avenue New Orleans, LA 70118 (504) 207-3060		Orleans		No restrictions	A federally qualified health center providing primary, preventive, behavioral, pediatric and dental health care. Greater New Orleans Area Application Center for Medicaid.	*	x	x x	х		х	х	*	х		х	*	x				*				*
DAUGHTERS OF CHARITY HEALTH CENTER	No restrictions	5630 Read Blvd. New Orleans, LA 70127 (504) 248-5357 Phone	70127	Orleans	More Information	No restrictions	A federally qualified health center providing primary, preventive, behavioral, pediatric and dental health care.	*	х	x x	x		х	х	*	х		x	*	х				*				*
DuraCARE Counseling & Consulting Services, LLC	No restrictions	4323 Division Street, Suite 102 METAIRIE, LA 70002 Phone: (504) 327-5753	70002	Jefferson	http://duracarecounseling.com/services/		Provides behavioral health, mental health, and substance abuse services.								*	х	х	x										
EAST JEFFERSON GENERAL HOSPITAL	No restrictions	4200 Houma Blvd Metairie, LA 70006-2996 (504) 454-4000	70006	Jefferson	http://www.eigh.org/	No restrictions	Provides primary, preventive, emergency, mental health and specialty care. Greater New Orleans Area Application Center for Medicaid.	*	x	x x	х		х	х	*	х			*	x	x	x	х	*	x			*
EASTER SEALS LOUISIANA	No restrictions	1010 Common Street, Suite 2000 New Orleans, LA Phone: 504-595-3408	70112	Orleans	http://www.louisiana.easterseals.co m	Individuals with physical and mental disabilities and their caregivers/families	Provides access to services and resources need by those that are physically or mentally disabled. Also provides recreational activities.	*		x	x		x		*	х		x	*	x	х	x	х					
ERNEST J. TASSIN SENIOR CITIZEN CENTER	Jefferson	701 Fourth Street Westwego, LA 70094 (504) 309-6230	70094	Jefferson	More Information	Senior residents of Westwego	Provides recreation, nutrition, and transportation to doctor appointments	*				х												*	x	х		
EXCELTH, INC.	No restrictions	Family Dental Center - Algiers Arthur Monday Multi-Purpose Center 1111 Newton Street Suite 207 New Orleans, LA 70114 (504) 302-9236		Orleans	More Information	No restrictions	Federally qualified health center providing: General Dentistry, exams, x-rays (check ups), cleanings, fluoride treatment, fillings, extractions (tooth removal),crowns, complete and partial dentures and denture repair, relines.	*	x	x x	х		х	х					*	x			х					*
EXCELTH, INC.	No restrictions	Family Dental Center-New Orleans East 9900 Lake Forest Boulevard, Suite F New Orleans, LA 70127 (504) 302-9236	70127	Orleans	More Information	No restrictions	Federally qualified health center providing general dentistry care.	*	x	x x	x		х	х					*	x			х					*

Part																												_	
Part									ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	Umited availability of medical professionals Costly fees that may be unaffordable for some	residents Cost of health insurance	Transportation availability	Coordination of healthcare	Pediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance abuse	Pediatric Behavioral health (psychiatry, counseling, etc.)	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination	Services for Latino/Vietnamese residents (including translation services)	Collaboration of business, hospitals and communities	LIMITED OUT COCK SETVICE PROVISION ACCESS TO HEALTHY OPTIONS	ACESS TO REALTH OF LONG	Recreational activities availability	Public transportation availability	Supervision of young people	BEHAVIORS THAT IMPACT HEALTH
Part	EXCELTH, INC.	No restrictions	4422 General Meyer Avenue,	70114	Orleans	More Information	No restrictions	primary, preventive, behavioral and mental																					
Column			New Orleans, LA 70114 (504) 526-1179					children; care coordination; nutrition counseling; family planning; chronic disease management; medication assistance; social services; and transportation assistance regardless of ability to pay. Greater New Orleans Area Application Center for Medicaid.	*	х	хх	x	х	x			х						1	k 3	k ,	(*
## 1945 1950 1950 1950 1950 1950 1950 1950 195	EXCELTH, INC.	No restrictions	2050 Caton Street	70122	Orleans	More Information	No restrictions	primary, preventive, behavioral and mental																					
March Marc			New Orleans, LA 70122 (504) 620-9868					health, and some specialty care for adults and children; care coordination, nutrition counseling; family planning; chronic disease management; medication assistance; social services; and transportation assistance regardless of ability to pay. Greater New Orleans Area Application Center for Medicaid.	*	x	хх	x	x	х			х						1	,	k ;	(*
Part	EXCELTH, INC.	No restrictions	9900 Lake Forest Boulevard, Suite F	/0127	Orleans	More Information	No restrictions	General Dentistry, exams, x-rays(check ups),																					
PROCESSOR AND								(tooth removal),crowns, complete and partial	*	x	хх	x		x	х					*	х		1	K					*
AND MATERIAL MATERIAL AND ALL	EXCELTH, INC.	No restrictions		70112	Orleans	More Information	No restrictions																						
March Sale			Phone: (504) 444-7071					fee scale used for persons whose household income is between 100% and 200% of Federal Poverty Guidelines. Fees for laboratory tests and	*		x x	x												¥	k				*
March Marc	FAMILIES HELPING FAMILIES OF	Jefferson	201 Evans Road Ruilding 1 Suite 100	70123	Jefferson	www.fhfjefferson.org	Residents of Jefferson Parisi	h Provides individualized services, information,																					
Compress of place Comp			Harahan, LA 70123				families.	independence, productivity and inclusion of												•	Х	х	X 1	K					
TRANS PRINCIPLE OF CHANGE Text Principle Text Princ	FAMILIES HELPING FAMILIES OF SOUTHEAST LOUISIANA, INC.	Plaquemines, St.	New Orleans, LA	70127	Orleans	www.fhfsela.org	Plaquemines and St. Bernard Parishes that are	resources and support to positively enhance the independence, productivity and inclusion of												*	x								
Face Early Engineery (Company Prince Pri		No restrictions		70002	Jefferson		No restrictions	Provides home healthcare. Medicaid application	*	x	x x	×																	
MANY SERVICE OF SERVICES NOT PROTECTION NOT PROTECT		No restrictions	Email: familyhelpers@fhogno.com	70056	Jefferson		No restrictions			-		-																+-	
PARMY SERVICE OF CREATER No. professional part Service Ser	NEW ORLEANS		Gretna, LA 70056 Phone: 504.733-4031					substance abuse, and counseling services for all								*	х	х	х	*			x 2	K					*
NEW CORLESS CANAGE New Confictions New Confidence A 70133 Prover: [504] \$2,500 Confidence A 70131 [17] \$2,000 Confidence	NEW ORLEANS		201 Evans Road, Building 3, Suite 311 Harahan, LA 70123 Phone: 504.733.4031					Provides behavioral health, mental health, substance abuse, and counseling services for all ages.								*	х	х	x	*			x 2	ĸ					*
## X X X X X X X X X X X X X X X X X X	NEW ORLEANS	No restrictions	New Orleans, LA 70119	/0119	Urleans	More Information	No restrictions	substance abuse, and counseling services for all								*	х	х	x	*			x 2	(*
Galvery Recovery Systems No restrictions Read and the control of the c		No restrictions	8352 Lafitte Court Chalmette, LA 70043	70043	St. Bernard	More Information	No restrictions	Provides behavioral health, mental health, substance abuse, and counseling services for all								*	х	х	х	*			х :	ĸ					*
Addit males Addition Additi	GALVEZ DOCTOR'S CLINIC	No restrictions	1407 Piety Street , New Orleans, LA 70117 Phone:	70117	Orleans	http://dhh.louisiana.gov/index.cfm/ directory/detail/4207	No restrictions	Greater New Orleans Area Application Center for	*	х	хх	х																	
Commonweight Comm			4103 LAC Couture Drive Harvey, LA 70058 Phone: (504) 368-9935			http://www.gatewayrecovery.com/		Provides substance abuse services.								*	х	x											
New Orleans, LA 70131 Greenpath International Inc. Greenpath International Inc. Greenpath International Inc. Greenpath International Inc. Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services Orleans. For developmentally disabled individuals. Sol. 3.6.6.600 August CoAst Services August CoAst Serv	FOUNDATION, INC		4298 Elysian Fields Avenue, Suite B , New Orleans, LA 70122 Phone: 5042887818					Medicaid.	*	х	хх	х									_ [\perp	
New Orleans, LA 70113 Phone: [504] 827-9278 AU Whitney Avenue Suite 104, Gretna, LA 70056 Jefferson More Information Provides substance abuse services. Provides substance abuse services. Au X X X X X X X X X X X X X X X X X X	RESOURCE CENTER ON	No restrictions	New Orleans, LA 70131	70131	Orleans	More Information	Persons with disabilites	Provides information on and access to programs for developmentally disabled individuals.								*	х	x	х	*	x								
Phone: [504] 827-9278 Orleans, 401 Whiteny Avenue Subt 2014, Gretna, LA 70056 Orleans, 401 Whiteny Avenue Subt 2014, Gretna, LA 70056 Orleans, 401 Whiteny Avenue Subt 2014, Gretna, LA 70056 Orleans, 401 Whiteny Avenue Subt 2014, Gretna, LA 70056 Orleans, 401 Whiteny Avenue Subt 2014, Gretna, LA 70056 Orleans, 401 Whiteny Avenue Subt 2014, Gretna, LA 70056 Orleans, 401 Whiteny Avenue, Subt 2014 No restrictions ISSUE Subtraction Avenue, Subt 2220 Orleans, 401 Subtraction Avenue, Subt 2220 Orleans No restrictions No restrictions No restrictions No restrictions No restrictions Orleans, 401 Subtraction Avenue, Subt 2220 No restrictions No restrictions No restrictions No restrictions Orleans, 401 Subtraction Avenue, Subtraction	Greenpath International Inc.	No restrictions	New Orleans, LA 70119	70119	Orleans	More Information	No restrictions	Provides substance abuse services.								*		х											
Gulf Such Addiction & Wellness, Ltd D'Assemble.com/ Servicions (No restrictions abuse services) Wellness, Ltd D'Assemble.com/ No restrictions (No restrictions (No restrictions) No restricti	GULF COAST SOCIAL SERVICES	Plaquemines, St.	401 Whitney Avenue Suite 104 , Gretna, LA 70056 504-361-9950	70056	Jefferson	http://www.gctfs.org/about_us.php	Persons with disabilites		*		x x	x	х	x			х			*	x		х :	k *	k	х	ī	х	*
Holistic Educational Rehabilitation Center Rehabilitation Center Rehabilitation Center No restrictions No restrictions Provides substance abuse services. # X More Information	Gulf South Addiction & Wellness, LLC		1539 Jackson Avenue, Suite 220 New Orleans, LA 70130	70130	Orleans	http://gsawllc.com/	No restrictions	Provides substance abuse services.								*		х											
HOPE HOUSE No restrictions 916 St. Andrew Street No Orleans, I.A 917 St. Andrew Street No Orleans, I.A 918 St. Andrew Street No Orl		No restrictions	2100 Belle Chasse Highway Gretna, LA 70053	70053	Jefferson	More Information	No restrictions	Provides substance abuse services.								*		х											
Afferson Addictive Disorders Afferson Disorder	HOPE HOUSE	No restrictions	916 St. Andrew Street New Orleans, LA	70130	Orleans	www.hopehouseneworleans.org	Eligible residents	shelter, bus tokens, clothes. After school youth												*			x	*	k ;	(х	x	x	*
	Jefferson Addictive Disorders Clinic	Jefferson	3616 I-10 Service Road South	70001	Jefferson	More Information	No restrictions									*		х											

Organization/Provider	Counties Served	Contact Information	Zip Code	Column1	Internet Information	Population Served	Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	umited availability of medical professionals Costly fees that may be unaffordable for some residents	Cost of health insurance	Tran sportation a valiability	Coordination of healthcare	Pediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance abuse Pediatric Behavioral health (psychiatry, counseling, rtc.)	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination	Services for Latino/Vietnamese residents (including translation services)	Collaboration of business, hospitals and communities	each serv	ACCESS TO HEALTHY OPTIONS		Recreational activities availability Public transportation availability	Supervision of young people	BEHAVIORS THAT IMPACT HEALTH
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Bridge City Community Center 301 Third Emanuel Street	70094	Jefferson	http://www.jeffparish.net/index.asp x?page=416	Residents of Jefferson Paris	th Centers provide emergency assistance for rent, utilities and medical services. Centers distribute																				
		Bridge City, LA 70094 Telephone: (S04) 349-5464					commodities provided by USDA, FEMA and the Food Box. Citizens can rent the facilities for nominal fees. They also host Recreational, Senior, Youth Development and Civic Association meetings; income tax assistance and cultural activities are also offered. South Central Application Center for Medicaid.											*	x	х	x	x	*	x	x		*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Dorothy B. Watson Community Center 1300 S. Myrtle Street Metairie, LA 70003 Telephone: (504) 736-6480	70003				th Centers provide emergency assistance for rent, utilities and medical services. Center distribute commodities provided by USDA, FEMA and the rood Box. Citazos un rent the facilities for nominal fees. They also host Recreational, Senior, Youth Development and Chirk Association meetings; income tax assistance and cultural activities are also offered. Greater New Orleans Area Application Center for Medicaid.											*	x	х	x	x	*	x	x		*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Gretna Community Center 1700 Morroe Street Gretna, LA 70056 Telephone: (504) 376-2130	70056	Jefferson	<u>x?page=416</u>		th Centers provide emergency assistance for rent, utilities and medical services. Centers distribute commodities provided by USDA, FEMA and the Food Box. Citizens can rent the facilities for nominal fees. They also host Recreational, Senior, Youth Development and Civic Association meetings; income tax assistance and cultural activities are also offered.											*	x	x	x	х	*	x	х		*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Harvey, Community Center 1501 Estalote Street Harvey, LA 70058 Telephone: (504) 227-1221	70058	Jefferson	x?nage~416		th Center provide emergency assistance for rent, utilities and medical services. Center distribute commodities provided by USDA, FEMA and the Food Box. Citizanc an rent the facilities for nominal fees. They also host Recreational, Senior, Youth Development and Chick Association meetings; income tax assistance and cultural activities are also offered. South Central Application Center for Medicald.											*	x	x	x	х	*	x	x		*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Hazel Rhea Hurst Community Center 1121 S. Causevey Bird. 1212 S. Causevey Bird. Jefferson, LA 70121 Telephone: (504) 838-4277	70121	Jefferson	http://www.jeffparish.net/index.asp x?page=416	Residents of Jefferson Paris	th Center provide emergency assistance for rent, utilities and medical services. Center distribute commodities provided by USDA, FEMA and the Food Box. Citaxos an rent the facilities for nominal fees. They also host Recreational, Senior, Youth Development and Chirk Association meetings; income tax assistance and cultural activities are also offered. Greater New Orleans Area Application Center for Medicaid.											*	x	x	x	x	*	x	x		*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	J C Simmons Community Center 4008 U.S. Highway 90 Avondale, LA 70094 Telephone: (504) 349-5414	70094	Jefferson	<u>x?page=416</u>		th Centers provide emergency assistance for rent, utilities and medical services. Centers distribute commodities provided by USDA, FEMA and the Food Box. Citizens can rent the facilities for nominal fees. They also host Recreational, Senior, Youth Development and Civic Association meetings; income tax assistance and cultural activities are also offered.											*	x	x	x	x	*	x	х		*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Marrero Community & Senior Center 1861 Ames Blvd. Marrero, LA 70072 Telephone: (504) 349-5950	70072	Jefferson	http://www.jeffparish.net/index.asp x?page=416	Residents of Jefferson Paris	th Centers provide emergency assistance for rent, utilities and medical services. Centers distribute commodities provided by USDA, FEMA and the Food Box. Citizanc an rent the facilities for nominal fees. They also host Recreational, Senior, Youth Development and Chric Association meetings; income tax assistance and cultural activities are also offered. South Central Application Center for Medicald.											*	x	x	x	x	*	x	x		*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Barataria/Lafitte Head Start Sharlene Adams, Center Supervisor 4977 City Park Road Lafitte, LA 70057 Telephone: (504)689-3384	70067	Jefferson	x?page=417		h The program establishes a supportive learning environment for children, parents, and staff; giving them enhanced awareness, refined skills, and increased understanding of values. Head Start embraces a comprehensive vision of healthcare for children and families.	*	x :	хх	х		x	x				*	х	x	x	х	*	х	x	х	*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Beechgrove Head Start (Vacant), Center Supervisor 721 Tricia Court Westwego, LA 70094 Telephone: (504)437-4852	70094	Jefferson	x?page=417		th The program establishes a supportive learning environment for children, parents, and staff; giving them enhanced awareness, refined skills, and increased understanding of values. Head Start embraces a comprehensive vision of healthcare for children and families.	*	x :	хх	х		х	х				*	х	x	x	х	*	х	х	х	*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Causeway Head Start Lisa Mitchell, Center Supervisor 3420 N. Causeway Blvd. Suite B Metairie, LA 70002 Telephone: (504)838-1000	70002	Jefferson	http://www.jeffparish.net/index.asp x?page=417	ixesidents of Jefferson Paris	h The program establishes a supportive learning environment for children, parents, and staff; giving them enhanced awareness, refined skills, and increased understanding of values. Head Start embraces a comprehensive vision of healthcare for children and families.	*	x	x x	х		х	х				*	х	x	x	x	*	x	х	х	*

Organization/Provider		Contact Information				Population Served	Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	Limited availability of medical professionals Costly fees that may be unaffordable for some	resonns Cost of health insurance	Transportation availability	Coordination of he alth care	Pediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance abuse Pediatric Behavioral health (psychiatry, counseling,	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination	Services for Latino/Vietnamese residents (including translation services)	Collaboration of business, hospitals and communities	Limited outreach service provision	ACCESS TO HEALTHY OPTIONS	Healthy nutrition	Recreational activities availability Public transportation availability	Supervision of young people	BEHAVIORS THAT IMPACT HEALTH
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Clay Street Head Start (Washington Elementary School) Linda Morris, Center Supervisor 606 Clay Street Kenner, LA 70062 Telenhone: (504)736-8770	70062	Jefferson	http://www.jeffparish.net/index.asp x?page=417	Residents of Jefferson Parisi	h The program establishes a supportive learning environment for children, parents, and staff; glving them enhanced awareness, refined skills, and increased understanding of values. Head Start embraces a comprehensive vision of healthcare for children and families.	*	x	x x	х		х	х				*	х	x	х	x	*	x	x	x	*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Grand Isle Head Start (Grand Isle Public School) Sharlene Adams, Center Supervisor 149 Ludwig Lane Grand Isle, LA 70358 Telephone: (504)689-3384	70358	Jefferson	x?page=417		h The program establishes a supportive learning environment for children, parents, and staff; giving them enhanced awareness, refined skills, and increased understanding of values. Head Start embraces a comprehensive vision of healthcare for children and families.	*	x	x x	х		x	x				*	x	x	x	x	*	x	x	x	*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Jutland Head Start Chanel Davis, Center Supervisor 1821 Jutland Drive Harvey, LA 70058 Telephone: (504)349-5500	70058	Jefferson	x?page=417		h The program establishes a supportive learning environment for children, parents, and staff; glving them enhanced awareness, refined skills, and increased understanding of values. Head Start embraces a comprehensive vision of healthcare for children and families.	*	x	x x	x		х	х				*	х	x	х	x	*	x	x	х	*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Kenner Head Start Linda Morris, Center Supervisor 200 Decatur Street Kenner, LA 70062 Telephone: (504)736-8770	70062	Jefferson	x?page=417		h The program establishes a supportive learning environment for children, parents, and staff; glving them enhanced awareness, refined skills, and increased understanding of values. Head Start embraces a comprehensive vision of healthcare for children and families.	*	x	x x	х		x	x				*	x	x	x	x	*	x	x	x	*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Lapalco Head Start Antoinette Davis, Center Supervisor 2001 Lincolnshire Drive Marrero, LA 70072 Telephone: (504)349-5185	70072	Jefferson	x?page=417		h The program establishes a supportive learning environment for children, parents, and staff; glving them enhanced awareness, refined skills, and increased understanding of values. Head Start embraces a comprehensive vision of healthcare for children and families.	*	x	x x	x		x	x				*	x	x	x	x	*	x	x	x	*
JEFFERSON COMMUNITY ACTION PROGRAMS (JEFFCAP)	Jefferson	Terrytown-Gretna Head Start Gloria McKenzie, Center Supervisor 2315 Park Place Gretna, LA 70056 Telephone: (504)392-9890	70056	Jefferson	http://www.jeffparish.net/index.asp x?page=417	Residents of Jefferson Parisi	h The program establishes a supportive learning environment for children, parents, and staff; glving them enhanced awareness, refined skills, and increased understanding of values. Head Start embraces a comprehensive vision of healthcare for children and families.	*	x	x x	x		x	x				*	x	x	x	x	*	x	x	x	*
JEFFERSON COMMUNITY HEALTH CARE CENTERS	No restrictions	11312 Jefferson Highway Riwer Ridge, LA 70123 (504) 463-3002	70123	Jefferson		No restrictions	Federally qualified health center providing primary, preventive, behavioral and dental health care for adults and children. Greater New Orleans Area Application Center for Medicaid.	*	x	x x	x		x	x	*	x	x	*	х			х	*	x			*
JEFFERSON COMMUNITY HEALTH CARE CENTERS	No restrictions	1855 Ames Boulevard Marrero, LA 70072 (504) 371-8958	70072	Jefferson	More Information	No restrictions	Federally qualified health center providing primary, preventive, behavioral and dental health care for adults and children.	*	x	x x	х		х	х	*	х	х	*	х			х	*	х			*
JEFFERSON COMMUNITY HEALTH CARE CENTERS	No restrictions	3932 U.S. Highway 90 Avondale, LA 70094 504.436.2223	70094	Jefferson	More Information	No restrictions	Federally qualified health center providing primary, preventive, behavioral and dental health care for adults and children. South Central Application Center for Medicald.	*	x	x x	х		x	x	*	x	x	*	x			x	*	x			*
JEFFERSON COMMUNITY HEALTH CARE CENTERS	No restrictions	5140 Church Street Lafitte, LA 70067 504:349.6525	70067	Jefferson	More Information	No restrictions	Federally qualified health center providing primary, preventive, behavioral and dental health care for adults and children.	*	x	хх	х		х	х	*	х	х	*	х			х	*	x			*
JEFFERSON COUNCIL ON AGING, INC.	Jefferson	6620 Riverside Dr. Ste 107 Metairie LA 70003 Phone: (504) 888-5880	70003	Jefferson	http://www.jcoa.net/about	Seniors of Jefferson Parish	Provides programs for seniors including access to social services, wellness, transportation, nutrition, recreation, physical activity and social	*	x	x x	x	х	x		*	x	x	*	x	х	x	x	*	x	x x		*
JEFFERSON PARISH HUMAN SERVICES AUTHORITY	Jefferson	3616 S. I-10 Service Road Metairie, LA 70001 504-838-5257 Adults 504-838-5002 Child/Adolescents	70001	Jefferson	More Information	Residents of Jefferson Parisi	opportunities. h Jefferson Parish Human Services Authority (JPHSA) is the public service provider for mental health, addictive disorders, and developmental disabilities services in Jefferson parish.	*	x	x x	x		х	х	*	x	x x	*	х		х	x	*	x			*
JEFFERSON PARISH HUMAN SERVICES AUTHORITY	Jefferson	5001 West Bank Expway, Marrero, LA 70072 504-349-8708 Adults 504-349-8755 Child/Adolescents	70072	Jefferson	More Information		h A federally qualified health center providing mental health and substance abuse services for adults and children.	*	х	x x	х		х	х	*	х	х х	*	х		x	x	*	х			*
JEFFERSON PARISH LIBRARY	Jefferson	1000 West Esplanade Ave. Metairie, LA 70005 (504) 838-4375	70005	Jefferson	http://www.jplibrary.net/		h Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	x	х	х	*			х	*
JEFFERSON PARISH LIBRARY	Jefferson	102 Willow Dr. Gretna, LA 70053 (504) 364-2716	70053	Jefferson	http://www.jplibrary.net/		h Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	x	x	х	*			x	*
JEFFERSON PARISH LIBRARY	Jefferson	125 Acadia Dr. Waggaman, LA 70094 (504) 736-8475	70094	Jefferson	http://www.jplibrary.net/		h Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	х	x	х	*			x	*
JEFFERSON PARISH LIBRARY	Jefferson	143 Ludwig Lane Grand Isle, LA 70358 (985) 787-3450	70358	Jefferson	http://www.jplibrary.net/		h Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	x	x	х	*			x	*
JEFFERSON PARISH LIBRARY	Jefferson	219 Soniat Ave. Harahan, LA 70123 (504) 736-8745	70123	Jefferson	http://www.jplibrary.net/		 Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness. 											*	х	x	x	х	*			x	*
JEFFERSON PARISH LIBRARY	Jefferson	2350 Metairie Rd. Metairie, LA 70001 (504) 838-4353	70001	Jefferson	http://www.iplibrary.net/		 Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness. 											*	х	х	x	х	*			x	*
JEFFERSON PARISH LIBRARY	Jefferson	2751 Manhattan Blvd. Harvey, LA 70058 (504) 364-2660	70058	Jefferson	http://www.jplibrary.net/		h Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	х	x	х	*			х	*
JEFFERSON PARISH LIBRARY	Jefferson	4036 Jefferson Hwy. Jefferson, LA 70121 (504) 838-4350	70121	Jefferson	http://www.iplibrary.net/	Residents of Jefferson Parisi	h Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	x	x	х	*			x	*

Organization/Provider	Counties Served	Contact Information	Zip Code	Column1	Internet Information	Population Served	Services Provided	CCESS TO HEALTHCARE AND MEDICAL SERVICES	imited availability of affordable preventive care	inned availability of medical professionals Sostly fees that may be unaffordable for some exidents	ost of health insurance	ransportation availability	cordination of healthcare	ediatric Health Care	EHAMORAL HEALTH AND SUBSTANCE ABUSE	Aental health	ubstance abuse ediatric Behavioral he atth (psychiatry, counseling,	tc.) EESOURCE AWARENESS AND HEALTH LITERACY	imited information dissemination	ervices for Latino/Vietnamese residents (including ranslation services)	ollaboration of business, hospitals and communities	imited outre ach service provision	CCESS TO HEALTHY OPTIONS	kealthy nutrition	ecreational activities availability Ublic transportation availability	upervision of young people	EHAVIORS THAT IMPACT HEALTH
JEFFERSON PARISH LIBRARY	Jefferson	4747 West Napoleon Ave. Metairie, LA 70001					Provides educational programing for all ages, community activities, meeting rooms, internet			205	٥	_	٥	e.		2	- S	*	x	X	х	x	*	-	~ ~	X	*
JEFFERSON PARISH LIBRARY	Jefferson	(504) 838-1190 4917 City Park Drive Lafitte, LA 70067	70067	Jefferson	http://www.jplibrary.net/	Residents of Jefferson Parish	access, and health awareness. Provides educational programing for all ages, community activities, meeting rooms, internet											*	х	х	х	х	*			х	*
JEFFERSON PARISH LIBRARY	Jefferson	(504) 689-5097 5550 Belle Terre Rd. Marrero, LA 70072	70072	Jefferson	http://www.jplibrary.net/	Residents of Jefferson Parish	access, and health awareness. Provides educational programing for all ages, community activities, meeting rooms, internet											*	x	х	х	x	*			x	*
JEFFERSON PARISH LIBRARY	Jefferson	(504) 349-5910 630 West Esplanade Ave. Kenner, LA 70065	70065	Jefferson	http://www.jplibrary.net/	Residents of Jefferson Parish	access, and health awareness. Provides educational programing for all ages, community activities, meeting rooms, internet											*	x	х	x	х	*			x	
JEFFERSON PARISH LIBRARY	Jefferson	(504) 736-8730 635 Fourth St.	70094	Jefferson	http://www.jplibrary.net/	Residents of Jefferson Parish	access, and health awareness. Provides educational programing for all ages,											*					*				
JEFFERSON PARISH LIBRARY	Jefferson	Westwego, LA 70094 (504) 349-5912 6646 Riverside Drive	70003	Jefferson	http://www.jplibrary.net/	Residents of Jefferson Parish	community activities, meeting rooms, internet access, and health awareness. Provides educational programing for all ages,											*	х		х	x	*			х	
JEFFERSON PARISH LIBRARY	Jefferson	Metairie, LA 70003 (504) 838-1193 680 Heritage Ave.	70056	Jefferson	http://www.jplibrary.net/	Residents of Jefferson Parish	community activities, meeting rooms, internet access, and health awareness. Provides educational programing for all ages,											*	X	X	х	х			+	х	
JEFFERSON PARISH LIBRARY	Jefferson	Terrytown, LA 70056 (504) 364-2717 E-branch	70123	Jefferson	http://www.jplibrary.net/		community activities, meeting rooms, internet access, and health awareness. Provides virtual access to information, health												х		х	х	*			х	
	Jefferson	128 Sauve Road, River Ridge, LA 70123 736-6455 501 Manhattan Blvd	70058	Jefferson			research, online news and events, and free internet access. Provides youth education, nutrition, opportunities											*	X	х	х	X					*
SCHOOL SYSTEM		Harvey, LA 70058 Phone: 504-349-7600					for physical activity, health education, health assessments, health screenings, and English as a second language program and translation services.	*	x	« x	х		x	х				*	x	x	x	x	*	x	x	х	*
JEFFERSON TRANSIT	Jefferson	21 Westbank Exp Gretna LA 70053 Phone: (504) 364-3450	70053	Jefferson	http://www.jeffersontransit.org/def ault.php	Jefferson Parish	Provides public transportation and special paratransit services.	*				х											*		х	:	
Kindred Hospital New Orleans	No restrictions	3601 Coliseum St New Orleans, LA 70115 Phone: (504) 899-1555	70115	Orleans	http://www.kindredhospitalnola.co m/our-services/	No restrictions	Provides specialty health care.	*	х	ς .			х					*	х	х	х	х	*	х	х		*
KINGSLEY HOUSE, INC.	Orleans	Tioto Constance St. New Orleans LA 70130 Phone: (504) 523-6221	70130	Orleans	http://www.kingsleyhouse.org/	Seniors and disabled in Orleans Parish	Provides day care for senior citizens and medically fragile adults 18 and over; daily after school educational enrichment, psychosoidal skills building, creative arts and recreational activities for youth between the ages of 5 to 17; education programs for children; counseling; transportation; social opportunities; and access to social services.								*	x	K	*	x	х	х	x	*	x	x	х	*
LAKEVIEW REGIONAL MEDICAL CENTER	No restrictions	95 Judge Tanner Blvd Covington, LA 70433 (985) 867-3800	70433	St. Tammany	http://lakeviewregional.com/service s/index.dot	No restrictions	Provides acute, emergency, behavioral, women's, pediatric, and specialty health care and health education. North Shore Area Application Center for Medicaid.	*	x	« x	x		x	x	*	х	х	*	x	х	x	x	*	x			*
LEONA TATE FOUNDATION FOR CHANGE, INC	No restrictions	P.O. Box: 872337 New Orleans, LA 70187 Phone: 504-681-7763	70187	Orleans	http://www.ltfcinc.org/	Targets inner city students of New Orleans	Provides opportunities and resources for students of New Orleans inner city schools and access to social services. Greater New Orleans Area Application Center for Medicaid.											*	x	x	х	x	*	х	x	х	*
LOUISIANA DEPARTMENT OF HEALTH & HOSPITALS	No restrictions	628 N. 4th Street Baton Rouge, LA 70802 PHONE: 225.342.9500	70802	East Baton Rouge	http://new.dhh.louisiana.gov/	No restrictions	Provides information on and access to health care.	*	x >	κ x	x	x	х	x	*	x	x x	*	х	х	х	x	*	х	x x	x	*
LOUISIANA DEPARTMENT OF HEALTH & HOSPITALS	No restrictions	628 N. 4th Street Baton Rouge, LA 70802 PHONE: 225.342.9500	70802	East Baton Rouge	http://new.dhh.louisiana.gov/index.c fm/page/262	No restrictions	Online database of Medicaid application sites in Louisiana.	*	x >	(x	х	х	х	х	*	x	x x	*	х	х	х	x	*	х	х х	: x	*
MAGNOLIA COMMUNITY SERVICES	No restrictions	JOC Central Avenue Jefferson, LA 70121 Phone: (504) 731-1371 (866) 266-1612	70121	Jefferson	nola.org/programs/	Adults with intellectual and other developmental disabilities.	We offer supports and services in nineteen group homes, supported community living, a vocational/day habilitation program, and supported employment.								*	х							*	x	х		*
MARCH OF DIMES - METRO NEW ORLEANS DIVISION	No restrictions	3000 26th Street, Suite 100, Metairie, LA (504) 836-2087	70002	Jefferson	http://www.marchofdimes.com/loui siana/	Pregnant women and newborns	Provide support to pregnant women to ensure best outcome for both mother and baby.	*	x >	« х	х			х				*	х	х	x	x	*	х			*
MERCY FAMILY CENTER	No restrictions	110 Veterans Memorial Blvd., Suite 425 Metairie, LA 70005 (504) 838-8283	70005	Jefferson	More Information	No restrictions	Provides outpatient counseling, psychiatry, educational services and school based mental health services to children, youth, and adults. Greater New Orleans Area Application Center for Medicaid.	*	,	x x	x			х	*	x	x	*	x								*
MERCY FAMILY CENTER	No restrictions	1437 W. Causeway Approach Mandeville, LA 70471					Provides academic support to children and adolescents.								*	х	х	*	х			х	*	х		х	*
MERCY FAMILY CENTER	No restrictions	1445 W. Causeway Approach Mandeville, LA 70471	70471	St. Tammany	More Information	No restrictions	Provides outpatient counseling, psychiatry, educational services and school based mental health services to children, youth, and adults. Greater New Orleans Area Application Center for Medicaid.	*	,	x x	х			х	*	x	х	*	x								*
MERCY FAMILY CENTER	No restrictions	3221 Behrman Place Suite 105 New Orleans, LA 70114	70114	Orleans	More information	No restrictions	Provides outpatient counseling, psychiatry, educational services and school based mental health services to children, youth, and adults. Greater New Orleans Area Application Center for Medicaid.	*)	x x	х			х	*	x	x	*	x								*
SERVICES DISTRICT	Orleans, Plaquemines and St. Bernard	1010 Common Street, Fifth Floor New Orleans, LA 70112 Phone: 504.599.0245	70112	Orleans	More Information	Residents of Orleans, Plaquemines and St. Bernard Parishes	Provides primary health care, addictive disorder, developmental disability and mental health services for adults and children.	*	,	х х	х		х	х	*	х	х	*	х		х	х	*	x		х	*
MMO BEHAVIORAL HEALTH	No restrictions	201 Greenbriar Boulevard	70433		http://www.mmoinc.com/services	Adults	Provides behavioral and mental health care.			_										_						_	*

																										_	
								CESS TO HEALTHCARE AND MEDICAL SERVICES	mited availability of affordable preventive care	nited availability of medical professionals stly fees that may be unaffordable for some stlaents.	st of health insurance	nsportation availability	ordination of healthcare	diatric Health Care	HAVIORAL HEALTH AND SUBSTANCE ABUSE	ental health	bstance abuse distric Behavioral health (psychiatry, counseling,	SOURCE AWARENESS AND HEALTH LITERACY	nited information dissemination	rvices for Latino/Vietnamese residents (including nslation services)	llaboration of business, hospitals and communities	nited outreach service provision	CESS TO HEALTHY OPTIONS	althy nutrition	creational activities availability blic transportation availability	pervision of young people	HAVIORS THAT IMPACT HEALTH
		Contact Information 201 Greenbrier Boulevard			Internet Information http://www.mmoinc.com/services	Population Served Adults	Services Provided Provides behavioral and mental health care.	ð	- 5	588	8	<u> </u>	8	a a		Š	2 2 2	2	5	Se	8	5	Ş.	ž	<u>2</u> 2	<u>s</u>	- 8
SYSTEM		Covington, LA 70433 Ph: 985.249.7780													*	х		*	х	х	х	Х	*	х			*
MMO BEHAVIORAL HEALTH SYSTEM	No restrictions	4429 Shores Drive Metairie, LA 70006 Ph: 504.267.6028	70006	Jefferson	http://www.mmoinc.com/services	Adults	Provides behavioral and mental health care.								*	х		*	х	х	x	х	*	х			*
NEIGHBORHOODS PARTNERSHIP NETWORK	No restrictions	4902 Canal Street, Rm. 301, New Orleans, LA Info@npnnola.com 504-940-2207	70119	Orleans	www.npnnola.com	No restrictions	Facilitate neighborhood collaboration, increase access to government and information, and strengthen the voices of individuals and communities across New Orleans											*	x		x						
NEW ORLEANS AIDS TASK FORCE	No restrictions	2601 Tulane Avenue, Suite 500 New Orleans, LA 70119 Phone: 5048212601	70119	Orleans	http://noaldstaskforce.org/	Individuals with HIV	Provides case management, mental and behavioral health, advocacy, medication assistance, bousing assistance and coordination, HIV medical clinic, meal delivery, food pantry, and applications for Medicaid.	*	x	x x	х		x		*	x		*	x	x	x	x	*	x			*
NEW ORLEANS CHILDRENS HEALTH PROJECT	Orleans	Esperanza Charter School 4701 South Carrollton Ave. New Orleans, LA 70119	70119	Orleans	http://www.nochp.org/services/heal th-services	Children	Provides primary, preventive, and mental health care, asthma & allergy services, weight management & education, and health education.	*	х	x x	х		x	х	*	х	х	*	х	х	х	х	*	х			*
NEW ORLEANS CHILDRENS HEALTH PROJECT	Orleans	Hispanic Resource Center 4312 Florida Ave. Kenner, LA 70065	70065	Jefferson	http://www.nochp.org/services/heal th-services	Children	Provides primary, preventive, and mental health care, asthma & allergy services, weight management & education, and health education.	*	х	x x	х		x	х	*	х	х	*	х	х	х	х	*	х			*
NEW ORLEANS CHILDRENS HEALTH PROJECT	Orleans	Sarah T Reed High School 5316 Michoud Blvd. New Orleans, LA 70129	70129	Orleans	http://www.nochp.org/services/heal th-services	Children	Provides primary, preventive, and mental health care, asthma & allergy services, weight management & education, and health education.	*	х	x x	х		х	х	*	х	х	*	х	х	х	x	*	х			*
NEW ORLEANS CHILDRENS HEALTH PROJECT	Orleans	St. Luke's Medical Center 4201 Woodland Dr. Suite 200 Algiers, LA 70131	70131	Orleans	http://www.nochp.org/services/heal th-services	Children	Provides primary, preventive, and mental health care, asthma & allergy services, weight management & education, and health education.	*	х	x x	х		x	х	*	х	х	*	x	х	x	x	*	х			*
NEW ORLEANS COUNCIL ON AGING	Orleans	2475 Canal St # 400 New Orleans, LA 70119 (504) 821-4121	70119	Orleans	http://nocoa.org/main/index.php	Seniors	Provides programs for seniors including access to social services, wellness, transportation, nutrition, recreation, physical activity and social opportunities.	*	х	x x	х	х	x		*	х	х	*	x	х	x	x	*	х	x x		*
NEW ORLEANS EAST LOUISIANA (NOELA) COMMUNITY HEALTH CENTER	No restrictions	13085 Chef Menteur Hwy, New Orleans, LA 70129 Phone: (504) 255.8665 Adults Phone:(504) 309-8390 Pediatrics	70129	Orleans	https://sites.google.com/site/noelac ommunityhltctr/	No restrictions	Provides adult and pediatric primary and preventive health care, mental health services, and counseling.	*	х	x x	х		x	х	*	х	х	*	х	x	x	x					*
NEW ORLEANS PUBLIC LIBRARY	Orleans	1401 S. Carrollton Avenue New Orleans, LA 70118 (504) 596-2630	70118	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	х	x	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	1611 Caffin Avenue New Orleans, LA 70117 (504) 596-2695	70117	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	х	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	219 Loyola Ave New Orleans, LA 70112 504-596-2560	70112	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	х	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	2405 Jackson Ave. New Orleans, LA 70113	70113	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet											*	х	х	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	(504) 596-3110 3001 Gentilly BMd. New Orleans, LA 70122 (504) 596-3100	70122	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	access, and health awareness. Provides educational programing for all ages, community activities, meeting rooms, internet											*	х	х	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	(504) 596-3100 3014 Hollday Drive New Orleans, LA 70131 (504) 596-2641	70131	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	access, and health awareness. Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	х	х	х	*	\top		х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	(504) 596-2641 3700 Orleans Ave. New Orleans, LA 70119 (504) 596-2654	70119	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	access, and nealth awareness. Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	x	х	х	*	\top		х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	4300 S Broad St New Orleans, LA 70125 (504) 596-2660	70125	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	х	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	5120 St. Charles Avenue New Orleans, LA 70115 (504) 596-2625	70115	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	х	х	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	S641 Read Blvd. New Orleans, LA 70127 (504) 596-0200	70127	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	x	х	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	(504) 596-2638	70124	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	x	х	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	725 Pelican Avenue New Orleans, LA 70114 (504) 596-3113	70114	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	x	x	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	913 Alvas Street New Orleans, LA 70117 (504) 596-2667	70117	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	x	х	х	х	*			х	*
NEW ORLEANS PUBLIC LIBRARY	Orleans	913 Napoleon Avenue New Orleans, LA 70115 (504) 596-2628	70115	Orleans	http://www.neworleanspubliclibrary .org/	Residents of Orleans Parish	Provides educational programing for all ages, community activities, meeting rooms, internet access, and health awareness.											*	x	х	х	х	*			х	*
NORTHLAKE BEHAVIORAL HEALTH SYSTEM	No restrictions	23515 Highway 190 Mandeville, LA 70448 Phone: (985) 626-6300	70448	St. Tammany	http://www.northlakebehavioralheal th.com/services.htm	Adults and adolescents	Provides mental and behavioral health care and substance abuse services. North Shore Area Application Center for Medicaid.								*	х	х х	*	х	x	х	х					

Organization/Provider	Counties Served	Contact Information	Zip Code	Column1	Internet information	Population Served	Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Imited availability of affordable preventive care imited availability of medical professionals	Costly fees that may be unaffordable for some esidents Cost of health insurance	ransportation availability	coordination of healthcare	ediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Vental health	substance abuse	ediatric Behavioral health (psychiatry, counseling, stc.)	RESOURCE AWARENESS AND HEALTH LITERACY	Imited information dissemination services for Latino Vietnamese residents (including	ransiation services) Collaboration of business, hospitals and communities	imited outreach service provision	ACCESS TO HEALTHY OPTIONS	lealthy nutrition	Recreational activities availability ublic transportation availability	supervision of young people	ЗЕНАVIORS ТНАТ ІМРАСТ НЕАІТН
OCHSNER HEALTH SYSTEM		Leonard J. Chabert Medical Center 1978 Industrial Blvd. Houma, LA 70363 Phone: 985-873-2200			More Information	No restrictions	Provides primary, preventive, specialty, and emergency health care services.	*	хх	x x	х	х	х	*	х	х	х	*	x x	х	х	*	х	x x	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Lieselotte Tansey Breast Center at Ochsner 1319 Jefferson Highway New Orleans, LA 70121 Phone: 504-842-6406	70121	Jefferson	More Information	No restrictions	Provides health care services for detection and treatment of breast disease.	*	x x	x x	х	х	x	*	х	х	х	*	x x	х	х	*	х	x x	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Baptist - A Campus of Ochsner Medical Cente 2700 Napoleon Avenue New Orleans, LA 70115 Phone: 504-899-9311	er 70115	Orleans	More Information	No restrictions	Provides primary, preventive, specialty, and emergency health care.	*	хх	x x	x	x	x	*	х	x	х	*	x x	х	x	*	х	x x	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Baptist Women's Pavilion 2700 Napoleon Avenue New Orleans, LA 70115	70115	Orleans	More Information	Women	Provides women's health care.	*	x x	x x	х	х	х	*	х	х	х	*	x x	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Center for Primary Care and Wellness 1401 Jefferson Highway New Orleans, LA 70121	70121	Jefferson	More Information	No restrictions	Provides primary, preventive and specialty health care.	*	x x	x x	х	х	х	*	x	x	х	*	х	x	х	*	x	х х	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: 504-842-4747 Ochsner Family Doctor Clinic - Mathews 111 Acadia Drive Raceland, LA 70394	70394	Lafourche	More Information	No restrictions	Provides primary and preventive health care.	*	x x	x x	х	х	х	*	х	х	х	*	х х	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - Algiers 3401 Behrman Pl. Algiers, LA 70114	70114	Orleans	More Information	No restrictions	Provides primary, preventive and pediatric health care.	*	x x	x x	х	х	х	*	х	x	х	*	x x	х	х	*	х	х х	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: 504-371-9323 Ochsner Health Center - Baptist McFarland Medical Plaza 4429 Clara Street New Orleans, LA 70115	70115	Orleans	More Information	No restrictions	Provides Neurology, Pain Management and OB/GYN health care.	*	x x	х х	x	х	х	*	х	x	x	*	x x	x	х	*	х	х х	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - Baptist Napoleon Medical Plaza 2820 Napoleon Avenue	70115	Orleans	More Information	No restrictions	Provides primary, preventive and specialty health care.	*	хх	x x	x	х	х	*	х	x	х	*	x x	х	х	*	х	x x	х	*
OCHSNER HEALTH SYSTEM	No restrictions	New Orleans, LA 70115 Ochsner Health Center - Belle Chasse 7772 Highway 23 Belle Chasse, LA 70037 Phone: 504-371-9370	70037	Plaquemines	More Information	No restrictions	Provides primary and preventive health care.	*	x x	x x	x	х	х	*	х	х	x	*	х	x	x	*	х	х х	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - Covington 1000 Ochsner Blvd. Covington, LA 70433 Phone: 985-875-2828	70433	St. Tammany	More Information	No restrictions	Provides specialty health care.	*	x x	x x	х	х	х	*	x	х	х	*	х	х	х	*	х	х х	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - Destrehan Family Health 159 Longview Drive Destrehan, LA 70047 Phone: 985-764-7669	70047	St. Charles	More Information	No restrictions	Provides primary and preventive health care.	*	x x	x x	х	х	х	*	x	х	х	*	х	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - Driftwood 2120 Driftwood Blvd. Kenner, LA 70065 Phone: 504-443-9500	70065	Jefferson	More Information	No restrictions	Provides primary, preventive, and specialty care. Also, provides nutrition education and information.	*	x x	x x	х	х	х	*	x	х	х	*	х	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - Elmwood 1221 S. Clearview Pkwy. Harahan, LA 70121	70121	Jefferson	More Information	No restrictions	Provides primary, preventive and specialty health care.	*	x x	x x	х	х	х	*	х	х	х	*	х	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - Gretna 441 Wall Blvd. Gretna, LA 70056 Phone: 504-371-6550	70056	Jefferson	More Information	No restrictions	Provides primary and preventive health care.	*	x x	x x	x	х	х	*	x	x	х	*	x x	x	x	*	х	x x	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - Kenner 200 W. Esplanade Avenue Kenner, LA 70065 Phone: 504-464-8506	70065	Jefferson	More Information	No restrictions	Provides primary, preventive and specialty health care.	*	x x	x x	х	х	x	*	х	х	x	*	x x	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - La Place Medical 735 W. 5th Street La Place, LA 70068	70068	St. John the Baptist	More Information	No restrictions	Provides primary and preventive health care.	*	x x	x x	х	х	х	*	х	х	x	*	x x	x	x	*	х	x x	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: 985-652-9504 Ochsner Health Center - Lakeview 101 W. Robert E Lee Blvd., Suite 201 New Orleans, LA 70124	70124	Orleans	More Information	No restrictions	Provides primary, preventive, specialty, psychiatric, and mental health care.	*	x x	x x	х	х	x	*	х	х	x	*	x x	х	х	*	х	x x	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: 504-846-9646 Ochsner Health Center - Lapalco 4225 Lapalco Blvd. Marrero, LA 70072	70072	Jefferson	More Information	No restrictions	Provides primary, preventive, specialty, pediatric, pediatric specialty and urgent health care.	*	x x	x x	x	х	х	*	х	х	х	*	х х	x	x	*	х	х х	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: 504-371-9355 Ochsner Health Center - Luling 1057 Paul Maillard Rd. Luling, LA 70070	70070	St. Charles	More Information	No restrictions	Provides primary, preventive, and specialty care.	*	x x	x x	х	х	х	*	x	х	х	*	x x	х	x	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: 985-785-3740 Ochsner Health Center - Metairie 2005 Veterans Memorial Blvd. Metairie, LA 70002	70002	Jefferson	More Information	No restrictions	Provides primary, preventive, specialty and urgent health care. Also, provides nutrition education and information.	*	x x	x x	x	x	х	*	х	х	х	*	x x	х	x	*	х	x x	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: (504) 836-9820 Ochsner Health Center - Mid-City 411 N Carrollton Avenue, Suite 4 New Orleans, LA 70119 Phone: 504-842-7400	70119	Orleans	More Information	No restrictions	Provides primary and preventive health care.	*	x x	x x	x	x	x	*	х	x	х	*	x x	х	x	*	х	x x	х	*

Organization/Provider	Counties Served	Contact Information	Zip Code	Column1	Internet Information	Population Served	Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care Limited availability of medical professionals	Costly fees that may be unaffordable for some residents	COSt Of Registring and an Co	Transportation availability	Coordination of healthcare	Pediatric He aith Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance ab use	Pediatric Behavioral health (psychiatry, counseling, etc.)	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination Services for Latino V/ Jetnamese residents (including	ransiation services, Collaboration of business, hospitals and communities	Limited outreach service provision	ACCESS TO HEALTHY OP TIONS	Healthy nutrition	Recreational activities availability Public transportation availability	Supervision of young people	BEHAVIORS THAT IMPACT HEALTH
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - Pearl River 64629 LA 41 Pearl River LA 70452	70452	St. Tammany	More Information	No restrictions	Provides primary and preventive health care.	*	x x	х	(х	х	*	х		х	*	х х	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: 985-639-3777 Ochsner Health Center - Raceland 106 Cypress Street Raceland, LA 70394	70394	Lafourche	More Information	No restrictions	Provides primary, preventive and specialty health care.	*	x x	x x	(x	x	x	*	x	x	х	*	x x	х	х	*	х	x x	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: 985-537-2273 Ochsner Health Center – River Parishes 502 Rue de Santé La Place, LA 70068	70068	St. John the Baptist	More Information	No restrictions	Provides primary, preventive, specialty, emergency health care.	*	x x	x x	(х	x	х	*	х	х	х	*	x x	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Phone: 985-652-3500 Ochsner Health Center - Slidell 2750 E. Gause Blvd. Slidell, LA 70461 Phone: 985-639-3777	70461	St. Tammany	More Information	No restrictions	Provides primary, preventive, pediatric, pediatric specialty, specialty, and urgent health care.	*	x x	x x	(x	x	*	x		x	*	x x	x	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Prone: 985-639-3777 Ochsner Health Center - Uptown 3423 St. Charles Avenue New Orleans, LA 70115 Phone: 504-842-7400	70115	Orleans	More Information	Women	Provides women's health care.	*	x x	x x	(x	х	х	*	x	х	х	*	х х	x	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center - West Bank 120 Meadowcrest Street Gretna, LA 70056 Phone: 504-371-9355	70056	Jefferson	More Information	No restrictions	Provides primary, preventive, specialty, psychiatric and mental health care.	*	x x	x x	(х	х	х	*	х	х	х	*	x x	x	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center For Children - Covington 101 E. Judge Tanner Blvd., Suite 302 Covington, LA 70433 Phone: 985-809-5800	70433	St. Tammany	More Information	Children	Provides pediatric health care.	*	x x	x x	(х	х	х	*	х	х	х	*	x x	x	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center For Children - Destrehan 1970 Ormond Blvd. Destrehan, LA 70047 Phone: 985-764-6036	70047	St. Charles	More Information	Children	Provides pediatric health care.	*	x x	x x	(х	х	х	*	х	х	х	*	x x	x	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center For Children - Metairle 4901 Veterans Memorial Blvd. Metairle, LA 70006 Phone: 504-887-1133	70006	Jefferson	More Information	Children	Provides pediatric health care.	*	хх	x x	(x	х	х	*	x	х	x	*	x x	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center For Children - New Orleans 1315 Jefferson Highway New Orleans, LA 70121 Phone: 504-842-3900	70121	Jefferson	More Information	Children	Provides specialty pediatric care.	*	x x	x >	(х	х	x	*	х	x	х	*	x x	x	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Health Center For Children - Slidell 2370 E. Gause Blvd. Slidell, LA 70461 Phone: 985-639-3755	70461	St. Tammany	More Information	Children	Provides pediatric health care.	*	x x	x x	c		x	х	*	х		х	*	x x	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Hospital For Children 1514 Jefferson Highway New Orleans, LA 70121 Phone: 1-866-OCHSNER	70121	Jefferson	More Information	Children	Provides primary, preventive, specialty and emergency health care for children.	*	x x	x x	c	х	x	x	*	х	x	х	*	x x	x	x	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Kenner Medical Office Building - Ochsner Health Clinics 200 West Esplanade Avenue Kenner, LA 70065 Phone: 504-443-9500	70065	Jefferson	More Information	No restrictions	Provides preventive and specialty health care.	*	хх	x x	c	x	x	х	*	x	x	х	*	x x	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Medical Center - Kenner 180 W. Esplanade Avenue Kenner, LA 70065 Phone: 504-443-9500	70065	Jefferson	More Information	No restrictions	Provides primary, preventive, specialty, and emergency health care.	*	x x	x x	(x	х	х	*	x	х	x	*	x x	x	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Medical Center - North Shore 100 Medical Center Drive Sildell, LA 70461 Phone: 985-649-7070	70461	St. Tammany	More Information	No restrictions	Provides primary, preventive, pediatric, pediatric specialty, specialty, and emergency health care services.	*	хх	x x	(х	х	*	x		x	*	x x	х	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Medical Center - West Bank Campus 2500 Belle Chasse Highway Gretna, LA 70056 Phone: 504-392-3131	70056	Jefferson	More Information	No restrictions	Provides primary, preventive, behavioral, mental, specialty, and emergency health care.	*	x x	x >	(x	х	x	*	x	x	x	*	x x	x	x	*	х	х х	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Medical Center 1514 Jefferson Highway New Orleans, LA 70121 Phone: 1-866-OCHSNER	70121	Jefferson	More Information	No restrictions	Provides primary, preventive, specialty, and emergency health care. Greater New Orleans Area Application Center for Medicaid.	*	x x	x >	(x	х	x	*	x	x	x	*	x x	x	x	*	х	х х	x	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Medical Complex – River Parishes 500 Rue de Santé La Place, LA 70068 Phone: 985-652-7000		St. John the Baptist	More Information	No restrictions	Provides primary, preventive, specialty, and emergency health care.	*	x x	x >	(х	х	x	*	х	х	x	*	x x	x	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Orthopedic Health Center - Slidell 104 Medical Center Drive Slidell, LA 70461 Phone: 988-646-5550	70461	St. Tammany	More Information	No restrictions	Provides adult and pediatric orthopedic health care.	*	x x	x >	(x	х	*	x		x	*	x x	x	х	*	х	х х	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Specialty Health Center - Raceland 141 Twin Oaks Raceland, LA 70394 Phone: 985-537-2666	70394	Lafourche	More Information	No restrictions	Provides primary, preventive, specialty, and pediatric specialty health care.	*	x x	x x	(х	х	х	*	x	х	x	*	х	x	х	*	х	x x	х	*
OCHSNER HEALTH SYSTEM	No restrictions	Ochsner Specialty Health Center One - Slidell 1850 Gause Blvd. East Slidell, LA 70461 Phone: 985-639-3777	70461	St. Tammany	More Information	No restrictions	Provides specialty health care and psychiatric and mental health services.	*	x x	x >	(x	x	*	х		х	*	x x	x	х	*	х	х х	х	*

					Internet Information More Information	Population Served No restrictions	Services Provided Provides specially health care.	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	Limited availability of medical professionals Costly fees that may be unaffordable for some	Cost of health insurance	Transportation availability	Coordination of healthcare	Pediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance abuse	Pediatric Behavioral health (psychiatry, counseling, etc.)	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination	Services for Latino /Vietnamese residents (including translation services)	Collaboration of business, hospitals and communities	Limited outreach service provision	ACCESS TO HEALTHY OPTIONS	Healthy nutrition	Recreational activities availability Public transportation availability	Supervision of young people	BEHAVIORS THAT IMPACT HEALTH
		105 Medical Center Drive, Northshore Two Bldg., Suite 202 & 205 Sildell, LA 70461 Phone: 985-639-3777	70-01	J. Turning	THE HIGH HOUSE	NO TESTICATIONS	Torrect specially realist care.	*	x	x x	x		х	x	*	х		х	*	х	x	x	x	*	x	х	c x	*
	No restrictions	Ochsner St. Anne Hospital 4608 Highway 1 Raceland, LA 70394 Phone: 985-537-6841	70394	Lafourche	More Information	No restrictions	Provides primary, preventive, specialty, and emergency health care.	*	x	x x	х	x	x	x	*	х	х	x	*	х	x	x	x	*	x	x x	c x	*
OCHSNER HEALTH SYSTEM		Ochsner Women's Health Center – Slidell 105 Medical Center Drive, Northshore Two Bldg., Suite 303 Slidell, LA 70461 Phone: 985-639-3777	70461	St. Tammany	More Information	Women	Provides women's health care.	*	x	x x	х		х	х	*	x		x	*	x	x	x	х	*	x	x x	c x	*
OCHSNER HEALTH SYSTEM		Prionie: 935-93-3/7/ Ochsner Women's Health Center - Covington 101 E. Judge Tanner Blvd., Suite 301 Covington, LA 70433 Phone: 985-809-5850	70433	St. Tammany	More Information	Women	Provides women's health care.	*	x	хх	х	х	х	х	*	х	х	х	*	x	х	х	x	*	х	х х	c x	*
		Ochsner Women's Health Center - Raceland 104 Acadia Park Drive Raceland, LA 70394 Phone: 985-537-3211		Lafourche	More Information	No restrictions	Provides women's health care.	*	x	x x	х	х	х	х	*	х	х	х	*	х	х	x	x	*	х	х	c x	*
	No restrictions No restrictions	Optical Shop - Ochsner Health Center - Covington 1000 Ochsner Blvd. Covington, LA 70433 Phone: 985-875-2740 Pediatric Subspecialty Clinic			More Information	No restrictions	Provides ophthalmic and optometric care to adults and children. Provides specialty pediatric care.	*	х	x x	х	х	х	х	*	х	х	х	*	х	х	х	x	*	х	х х	c x	*
		Pediatric Subspecially Clinic 71211 Highway 21 Covington, LA 70433 Phone: 985-898-7400 Pharmacy & Wellness - Covington				Children No restrictions	Provides specialty pediatric care. Provides prescription medication services and	*	x	x x	х	х	х	х	*	х	х	х	*	х	х	х	х	*	х	х х	(x	*
	No restrictions	1000 Ochsner Blvd. Covington, LA 70433 St. Charles Parish Hospital				No restrictions	health education. Provides primary, preventive, specialty,	*	х	хх	х	х	х	х	*	х	х	х	*	x	х	х	х	*	х	х х	(X	*
		1057 Paul Maillard Rd. Luling, LA 70070 Phone: 985-785-6242 St. Tammany Parish Hospital			More Information	No restrictions	psychiatric and mental, and emergency health care. Also provides nutrition education and information. Provides primary, preventive, specialty, and	*	х	x x	х	х	х	х	*	х	х	х	*	х	х	x	x	*	х	x x	(x	*
		1202 S. Tyler Street Covington, LA 70433 Phone: 985-898-4000 The Gayle and Tom Benson Cancer Center	70121	Jefferson		No restrictions	emergency health care. Provides health care services for detection and	*	x	хх	х	х	x	х	*	х	х	х	*	x	х	x	x	*	х	х х	(x	*
	No restrictions	1514 Jefferson Highway New Orleans, LA 70121 Phone: 1-866-OCHSNER 1125 North Tonti	70119	Orleans	http://www.ohlinc.org/reach-	No restrictions	treatment of cancer. Provides behavioral health care and substance	*	x	хх	х	x	x	х	*	х	х	х	*	х	х	х	х	*	х	х	(x	*
(онц)		New Orleans, LA 70119 Ph: (504) 821-9211			<u>us.html</u>		abuse services for adults and adolescents. Also operates a community medical clinic that provides primary and preventive health care and nutrition education. Also, a Greater New Orleans Area Application Center for Medicaid.	*	x	x x	х		х	х	*	х	х	х	*	х		x	х	*	х			*
4	No restrictions Orleans	8326 Main Street, Building #3 Houma, Louisiana 70363-4871 Phone: (985) 868-2620 4201 N. Rampart St.	70363	Terrebonne	http://optionsforindependence.com/	No restrictions Seniors and disabled of	Provides behavioral health, mental health, and substance abuse services. Provides quality of life services for seniors								*	х	х	х								\perp	_	*
ORLEANS PLAQUEMINES MEDICAL CENTER		New Orleans LA 70117 Phone: 5049416056				Greater New Orleans	including: transportation, nutrition, and independent living assistance.	*				x							*	x	х	х	х	*	х	х		*
		27136 Highway 23 Port Sulphur, LA 70083 504-564-3344	70083	Plaquemines	<u>m</u>		Provides primary, specialty, acute, and specialty health care. Operates mobile medical clinic. South Central Application Center for Medicaid.	*	х	хх	х		x						*	х		x	х	*	х			*
CENTER		3330 Canal St New Orleans, LA 70119-6246 Phone: (504) 827-2701		Orleans		No restrictions	Provides mental healthcare. Greater New Orleans Area Application Center for Medicaid.	*	х	x x	х				*	х												*
REGIONAL TRANSIT AUTHORITY OF ORLEANS & JEFFERSON		2817 Canal Street New Orleans LA 70119-6301 Phone: 504-827-8302		Orleans		Orleans Parish, Kenner (Jefferson Parish)	Provides public transportation and special paratransit services.	*				х												*		х		
ALTERNATIVES, INC.		151 Almedia Rd, Suite 6 St. Rose, LA 70087 Office (985) 465-5322 5416 Veterans Memorial Boulevard	70087	St. Charles		No restrictions	Provides personal care. Application Center for Medicaid. Provides personal care. Application Center for	*	х	хх	x			х					*	х			х	*		\perp	х	*
ALTERNATIVES, INC.		Suite 315 Metairie, LA 70003 Office (504) 779-4740					Medicaid.	*	х	x x	х			х					*	х	Ш		x	*			х	*
ALTERNATIVES, INC.		8301 W. Judge Perez Drive, Suite 209 A Chalmette, LA 70043 (504) 682-5991 Phone			http://rcainc.net/services.htm	No restrictions	Provides personal care. Application Center for Medicaid.	*	х	хх	x			x					*	x			х	*			x	*
RESOURCES FOR HUMAN DEVELOPMENT		JPHSA Pathways Phase II 1901 West Bank Expressway Suite 550 Harvey, LA 70058 Phone: 504-376-2524	70058	Jefferson	http://www.rhd.org/Program.aspx? pid=111	Jefferson Parish	Pathways-Phase II is a supervised independent living program for adults with a severe and persistent mental illness or a co-occurring disorder with mental illness as primary. The program provides 10 beds (men and women) for lefferson Parish residents. RHD administers. Pathways on behalf of the Jefferson Parish Human Services Authority.								*	x	x		*	x	x	x	x					

Organization/Provider	Fountier Second	Contact Information	Zin Code	Column	Internet Information	Population Served	Services Provided	CCESS TO HEALTHCARE AND MEDICAL SERVICES	mited availability of affordable preventive care	inited availability of medical professionals iostly fees that may be unaffordable for some sidents	ox of health insurance	ansportation availability	oordination of healthcare	s diatric Health Care	EHAVIORAL HEALTH AND SUBSTANCE ABUSE	lental health	de dance abuse of atric Behavioral health (psychiatry, courseling,	:c.) SSOURCE AWARENESS AND HEALTH LITERACY	mited information dissemination	ervices for Latino/Wetnamese residents (including anslation services)	ollaboration of business, hospitals and communities	mited outreach service provision	CCESS TO HEALTHY OPTIONS	ealthy nutrition	ecreational activities availability bit transportation availability	nug beo	EHAMORS THAT IMPACT HEALTH
RESOURCES FOR HUMAN DEVELOPMENT	Jefferson	Project Reach 2121 Ridgelake Avenue Suite 206B Metairie, LA 70001	70001	Jefferson			Provides support case management, van transportation, bus tokens, community education and awareness, clothing, water, snacks, and blankets and housing referrals to homeless	*	- 5	5 X 8	. X	x	x	- ĕ	<u> </u>	Σ	<u> </u>	*	x	x	x	x	*	x	x	3	<u> </u>
RESOURCES FOR HUMAN DEVELOPMENT	No restrictions	Phone: 504-832-5123 Metropolitan Crisis Reponse Team (MCRT) 3303 Tulane Avenue Suite 6 & 7 New Orleans, LA 70119 Phone: 504-826-2675	70119	Orleans	http://www.rhd.org/Program.aspx? pid=16	No restrictions	Individuals in Jefferson Parish. Telephone and face-to-face triage, assessment, and intervention for persons experiencing mental health or substance abuse crises. 24/7 clinical staff used to prevent unnecessary mental health hospitalizations and instead link consumers to community based services that better address their needs.	*					x		*	x	x	*	х	x	x	x					
RESOURCES FOR HUMAN DEVELOPMENT	No restrictions	New Hope NOLA 3303 Tulane Avenue, Sultes 6 & 7 New Orleans, LA 70119 Phone: 504-826-5206	70119	Orleans	http://www.rhd.org/Program.aspx? pid=193	No restrictions	Provides a short-term crisis stabilization program that operates in a home-like environment where clients are offered a safe, supportive place to regain skills and reduce symptoms of their psychiatric lilenses. 24/7 clinical staff with on-call psychiatric lilenses. 24/7 clinical staff with on-call psychiatrist and nurse.								*	x		*	х	x	x	x					
RESOURCES FOR HUMAN DEVELOPMENT	No restrictions	Metropolitan ACT P.O. Box 85082 New Orleans, LA 70185 Phone: 504-821-7085	70185	Orleans	http://www.rhd.org/Program.aspx? pid=223	No restrictions	A multidisciplinary, recovery oriented team, which provides in home treatment to individual diagnosed with a serious mental litiles. ACT is designed for individuals who are not able to have their needs met in traditional outpatient settings. The ACT Team includes Psychiatrists, Nurses, Mental Health Professional, Addiction Counselors, Vocational Specialists and Peer Specialists.	*		x x	х		x		*	x	x	*	х	x	x	x					
RESOURCES FOR HUMAN DEVELOPMENT	No restrictions	RIC/LA/SAFE Focused Outreach Case Management Program 1901 West Bank Expressway Sulfu 550 Harvey, LA 70058 Phone: 504-376-2524	70058	Jefferson	http://www.rhd.ore/Program.asus2 pid=2253	Women	RHD's Focused Outreach Case Management Program empowers and supports women who are involved with the criminal justice system and popartment of Children and Family Services as a result of their struggles with substance abuse. The overall aim of services is to promote and support individual recovery utilizing a comprehensive, empowerment, and strengths- based approach. The program supports treatment rather than incarceration and keeping families together and children out of state custody. The Focused Outreach Case Management Program includes LA-SAFE and Racch-in CARE services.								*	x	x	*	x	x	x	х					
RESOURCES FOR HUMAN DEVELOPMENT	Jefferson	JPHSA Pathways Phase I 1901 West Bank Expressway Sulte 550 Harvey, LA 70058 Phone: 504-376-2524	70058	Jefferson	http://www.rhd.org/Program.aspx? pid=4	Jefferson Parish	Phase I provides permanent supportive housing for homeless, mentally ill and/or chemically dependent individuals. The program's capacity is 16 (unaccompanied men and women) for Jefferson Parish residents. RHD administers Pathways on behalf of the Jefferson Parish Human Services Authority.								*	х	х	*	х	x	x	x					
RESOURCES FOR HUMAN DEVELOPMENT	No restrictions	Family House Louislana 112 Holimes Blvd., Bidg. B, Apt. 1 Terrytown, Lt. 70056 Phone: (504) 367-7600	70056	Jefferson	http://www.rhd.org/Program.aspx? pid=48	women with children	Family House is a residential substance abuse treatment program for pregnant women and women with children. While at Family House, women receive individual therapy, individual parenting, and groups that include: substance abuse education, parenting education, trauma, feelings process, life skills and much more.								*	x	x	*	х	x	x	x					
RESOURCES FOR HUMAN DEVELOPMENT	Jefferson, Orleans	Assertive Community Treatment Team 2 1901 West Bank Expressway Suite 550 Harvey, LA 70508 Phone: 504-247-9120	70058	Jefferson	http://www.rhd.org/Program.aspx2 aid=2.	Consumers in Jefferson Parish and the Greater New Orleans area	The ACT Program provides community based services to individuals with severe and persistent mental illness. Their mental illness may also be accompanied by a substance abuse disorder and/or a developmental disability. ACT is an evidenced based, recovery oriented service delivery model that provides a holistic, multiducipliansy approach of consumer care. ACT support services are not time bound. The primary goals of the program are to lessen or eliminate the debilitating symptoms of mental illness seath consumer experiences, minimize op reliminate the debilitating symptoms of mental illness seath consumer experiences, minimize op the houses and to exhance quality of life and functional.								*	x	х	*	x	x	x	x					
RESOURCES FOR HUMAN DEVELOPMENT	Jefferson, Orleans	1901 West Bank Expressway Suite 550 Harvey, LA 70058 Phone: 504-247-9120	70058	Jefferson	http://www.rhd.org/Program.aspx? pid=8	Adult residents of Jefferson Parish and Greater New Orleans	Provides community based services to individuals with severe and persistent mental illness.								*	x	х	*	х	х	x	x					

Organization/Provider RESOLUCES FOR HUMAN DEVELOPMENT.		d Contact Information Assertive Community Treatment Team 1 1991 West Bank Expressive			Internet Information http://www.rhd.ors/Program.aspx2 old=8		Services Provided The ACT Program provides community based we services to individuals with severe and persistent.	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	Limited availability of medical professionals Costly fees that may be unaffordable for some residents	Cost of health insurance	Transportation availability	Coordination of healthcare	Pediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance abuse	Pediatric Behavioral health (psychiatry, counseling, etc.)	RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination Services for I stino Mietramese residents (including	, <u></u>	Collaboration of business, hospitals and communities Limited outreach service provision	ACCESS TO HEALTHY OPTIONS	Healthy nutrition	Recreational activities availability	Public transportation availability Supervision of young people	BEHAVIORS THAT IMPACT HEALTH
		Suite 55 6 Harvey, LA 70058 Phone: 504-247-9120				Orleans area	mental liness. Their mental liness may also be accompaned by a substance abuse disorder and/or a developmental disability. ACT is an evidenced based, recovery oriented service delivery model that provides a holistic, multiducipliaria yaproach of consumer care. ACT support services are not time bound. The primary the debilitating upyrintons of mental liness each consumer experiences, minimize or prevent recurrent acute peoples of the lillers and to enhance quality of life and functioning.								*	x	x		*	x	х :	x x					
RESOURCES FOR HUMAN DEVELOPMENT	Jefferson	JPHSA Mobile Crisis Services P.O. Box 850082 New Orleans, LA 70185 Phone: 504-832-5123	70185	Orleans	http://www.rhd.org/Program.aspx? pid=84	No restrictions	Mobile Crisis Service provides 24-hour crisis intervention for Jefferson Parish, Louislana. The interventions are made over the phone or in person and are provided by crisis workers and psychiatrists. RHD administers Mobile Crisis Services on behalf of the Jefferson Parish Human Services Authority.								*	x	х	x	*	x	x :	x x					
RESOURCES FOR HUMAN DEVELOPMENT	No restrictions	Womanspace Louisiana 2407 Baronne Street New Orleans, LA 70113 Phone: 504-895-6600	70113	Orleans	http://www.rhd.org/Program.aspx? pid=95		A safe haven for women who are experiencing homelessness, mental liness, and/or substance abuse. The 15-bed emergency shelter provides a nurturing environment for these women as they stabilize before moving to treatment or transitional housing.	*					x		*	x	x		*	x	x :	x x	*	x			*
RESOURCES FOR HUMAN DEVELOPMENT	No restrictions	151 Meadowcrest Street, Suite C Gretna , LA 70056 Phone: (504) 361-9573	70056	Jefferson	More Information	Adults in the Greater New Orleans area	Provides substance abuse services.								*		x										
RESPONSIABILITY HOUSE	No restrictions	1799 Stumpf Blvd., Bldg. 7, Ste. 4 Terrytown, LA 70056 Phone: (504) 367-4426	70056	Jefferson	http://www.responsibilityhouse.org/ contact_us0.aspx	No restrictions	Provides substance abuse services.								*		х										
River Oaks Hospital	No restrictions	1525 River Oaks Rd W New Orleans, LA 70123-2199 (504) 734-1740	70123	Jefferson	http://www.riveroakshospital.com/	No restrictions	Provides mental healthcare.	*		x					*	х		х									
RIVERSIDE MEDICAL CENTI	No restrictions	Pediatric/Internal Medicine Clinic 1900 Main St Franklinton, LA (985) 839-4431	70438	Washington	http://www.rmchospital.com/	No restrictions	Provides primary, preventive, emergency, mental health and specialty care.	*	х	хх	х		x	x	*	х		х	*	x	х :	x x					*
SEASIDE HEALTH CARE	No restrictions	229 Bellemeade Blvd. Gretna, LA 70056 (504) 391-2440	70056	Jefferson	http://www.seasidehc.com/seaside- behavioral-center-locations/	Adults	Partial hospitalization and intensive outpatient programs for patients 18 and older.								*	х	х										
SEASIDE HEALTH CARE	No restrictions	350 North Causeway Blvd. Mandeville, LA 70448 (985) 674-7694	70448	St. Tammany	http://www.seasidehc.com/seaside- behavioral-center-locations/	Adults	Partial hospitalization and intensive outpatient programs for patients 18 and older.								*	х	х										
SEASIDE HEALTH CARE	No restrictions	4200 Houma Blvd, 4th floor Metairie, LA 70006	70006	Jefferson	http://www.seasidehc.com/seaside- behavioral-center-locations/	Adults	Inpatient program offering adult psychiatric services for patients 30 and older.								*	х	х										
SEASIDE HEALTH CARE	No restrictions	(504) 503-4900 4201 Woodland Drive New Orleans, LA 70131	70131	Orleans	http://www.seasidehc.com/seaside- behavioral-center-locations/	Adults	Inpatient program offering adult and geriatric psychiatric services for patients 30 and older.								*	х	х										
SEASIDE HEALTH CARE	No restrictions	(504) 393-4223 8060 Crowder Blvd. Suite A New Orleans, LA 70127	70127	Orleans	http://www.seasidehc.com/seaside- behavioral-center-locations/	Adults	Partial hospitalization and intensive outpatient programs for patients 18 and older.								*	х	х									+	
ST. THOMAS COMMUNITY HEALTH CENTER	No restrictions	(504) 324-7892 1020 Saint Andrew Street New Orleans, LA	70130	Orleans	www.stthomaschc.org	No restrictions	Provides primary, preventive, behavioral, pediatric and women's health care.	*	х	хх	х		х	х	*	х		х	*	х	х :	х х	*	х			*
ST. THOMAS COMMUNITY HEALTH CENTER		504-529-5558 Columbia Parc Health Center 3943 St. Bernard Ave. New Orleans, LA 70122 504.529.5558	70130	Orleans	www.stthomaschc.org	No restrictions	Provides primary, preventive, behavioral, pediatric and women's health care.	*	x	x x	х		х	х	*	х		х	*	х	х :	x x	*	х			*
ST. THOMAS COMMUNITY HEALTH CENTER		Donald T. Erwin Center 1936 Magazine St. New Orleans, LA 70130 504.529.5558	70130	Orleans	www.stthomaschc.org	No restrictions	Provides primary, preventive, behavioral, pediatric and women's health care.	*	x	x x	х		х	х	*	х		x	*	x	х :	х	*	x			*
ST. THOMAS COMMUNITY HEALTH CENTER	No restrictions	St. Thomas at Mahalia Jackson 2405 Jackson Avenue Building B, Suite 222 New Orleans, LA 70130 504-359-6807	70130	Orleans	www.stthomaschc.org	No restrictions	Provides primary, preventive, behavioral, pediatric and women's health care.	*	x	x x	x		x	x	*	x		x	*	х	x :	x x	*	х			*
STRIVE INCORPORATED	No restrictions	1139 Napoleon Avenue New Orleans, LA 70115 Phone: (504) 895-2557	70115	Orleans	More Information	Individuals with mental retardation and/or developmental disabilities	Provides adult day care, employment opportunities, residential facilities, supervised independent living, assessment, and recreation services.	*		х					*	х			*		:	х	*	х	x		*
TECHE ACTION CLINIC	No restrictions	1014 West Tunnel Blvd. Houma, LA 70360 Ph: (985) 851-1717	70360			No restrictions	Provides primary, preventive, behavioral, and women's health care, health education, nutrition education, and access to WIC and Medicaid.	*	x	x x	х	х	х	х	*	х		x	*	x	х :	х	*	x			*
TECHE ACTION CLINIC	No restrictions	159 East Third Street Edgard, LA 70049 Ph: (985) 497-8726	70049	St. John the Baptist	http://www.tabhealth.org/services	No restrictions	Provides primary, preventive, behavioral, and women's health care, health education, nutrition education, and access to WIC and Medicaid.	*	x	x x	х	х	x	х	*	х		х	*	x	х :	x x	*	х			*

Organization/Provider	Counties Served	Contact Information	Zip Code	Column1	Internet Information	Population Served	Services Provided	ACCESS TO HEALTHCARE AND MEDICAL SERVICES	Limited availability of affordable preventive care	Limited availability of medical professionals Costly fees that may be unaffordable for some	Cost of health insurance	Transportation availability	Coordination of health care	Pediatric Health Care	BEHAVIORAL HEALTH AND SUBSTANCE ABUSE	Mental health	Substance abuse Pediatric Behavioral health (psychiatry, counseling,	etc.) RESOURCE AWARENESS AND HEALTH LITERACY	Limited information dissemination	Services for Latino/Vietnamese residents (including translation services)	Collaboration of business, hospitals and communities	Limited outreach service provision	ACCESS TO HEALTHY OPTIONS	Healthy nutrition	Recreational activities availability Public transportation availability	Supervision of young people	ВЕНАVIORS THAT IMPACT НЕАLTН
TECHE ACTION CLINIC	No restrictions	1709 Ridgefield Rd. Thibodaux, LA 70301	70301	Lafourche	http://www.tabhealth.org/services	No restrictions	Provides primary, preventive, behavioral, and women's health care, health education, nutrition	*	x	хх	х	х	х	х	*	х	x	*	x	x	х	x	*	х			*
TECHE ACTION CLINIC	No restrictions	Ph: (985) 446-7341 189 Mozart Drive Houma, LA 70363 Ph: (985) 868-3700	70363	Terrebonne	http://www.tabhealth.org/services	No restrictions	education, and access to WIC and Medicaid. Provides primary, preventive, behavioral, and women's health care, health education, nutrition education, and access to WIC and Medicaid.	*	х	x x	х	х	x	х	*	x	х	*	х	х		х	*	х			*
TECHE ACTION CLINIC	No restrictions	471 Central Avenue Reserve, LA 70084 Ph: (985) 479-1315	70084	St. John the Baptist	http://www.tabhealth.org/services	No restrictions	Provides primary, preventive, behavioral, and women's health care, health education, nutrition education, and access to WIC and Medicaid.	*	х	хх	х	х	х	х	*	х	х	*	х	х	х	х	*	x			*
TERREBONNE GENERAL MEDICAL CENTER		8166 Main Street Houma, LA 70360	70360	Terrebonne	http://www.tgmc.com/contact/	No restrictions	Provides primary, preventive, specialty, and women's health care. South Central Application	*	х	хх	х		x	х				*	x	х	х	x	*	х			*
THE EXTRA MILE, SOUTHEAST LOUISIANA, INC	No restrictions	Phone: 9858735292 3616 S I-10 Service Road W. Metairie, LA 70001	70001	Jefferson	http://www.temsela.org/contact_us. html	No restrictions	Center for Medicaid. Provides access to community, social, and assistance services to disadvantaged individuals.											*	х	x	х	х					
THE EXTRA MILE, SOUTHEAST LOUISIANA, INC	No restrictions	Phone: 504.349.8748 JPHSA Clinic 5001 Westbank Expressway Marrero, LA 70072 Phone: 504.349.8748	70072	Jefferson	http://www.temsela.org/contact_us. html	No restrictions	Provides access to community, social, and assistance services to disadvantaged individuals.											*	х	х	х	x					
THE SAMARITAN CENTER, INC.	No restrictions	402 Girod St. Mandeville, Louisiana 70448 tel:9856264457	70448	St. Tammany	http://samcen.org/index.html	No restrictions	Provides food pantry, clothing, emergency financial assistance, transportation assistance, and information on social services.											*	x		x	x	*	х			
THIBODAUX REGIONAL MEDICAL CENTER	No restrictions	CO2 N. Acadia Road Thibodaux, LA 70301 Phone: 9854934772	70301	Lafourche	http://www.thibodaux.com/Centers- and-Services.aspx	No restrictions	Provides primary, preventive, specialty, behavioral, pediatric, and women's health care and health education services. South Central Application Center for Medicaid.	*	х	хх	х		х	х	*	х	х	*	х	х	х	х	*	x			*
		P. O. Box 200 170 Ludwig Lane Grand Isle LA 70358	70358	Jefferson	http://www.townofgrandisle.com/community/	Elderly, disabled, needy	Provides transportation, information on community services, and recreation and social	*				х											*	:	х х		
TOWNSEND	Terrebonne No restrictions	Phone: (985) 787-3196 19411 Helenberg Road Suite 101 Covington, LA 70433	70433	St. Tammany	http://townsendla.com/	No restrictions	opportunities. Provides substance abuse services.								*		х										
TOWNSEND	No restrictions	Phone: (985)893-2522 1340 W. Tunnel Blvd. Ste 310 Houma, LA 70360	70360	Terrebonne	http://townsendla.com/locations/ho uma-la/	No restrictions	Provides substance abuse services.								*		х										
TRIUMPH OF SPECIAL PEOPLE	No restrictions	985-746-3946 650 Poydras Street, Suite 2708 New Orleans, LA 70130 Phone: (504) 568-0026 (866) 208-7780	70130	Orleans	More Information	Individuals with developmental disabilities	Provides personal care attendant, supported independent living, housing location, and financial assistance with social activities and transportation.	*		х					*	х		*	х		х		*	х :	х		*
TULANE UNIVERSITY SCHOOL OF MEDICINE	No restrictions	Behavioral Health Clinic – Metairie 4641 Fairfield St., Suite F Metairie, LA 70006 (504) 988-7250	70006	Jefferson	http://tulane.edu/som/departments /psychiatry/patientCare/behavioral- health-clinic.cfm	Adults	Provides adult mental health psychotherapy and medication management.								*	х		*	х	х	х	х					
TULANE UNIVERSITY SCHOOL OF MEDICINE		Tulane Center for Women's Health 4720 South I-10 Service Road, Suite 300 Metairie, LA 70001 504-988-8070	70001	Jefferson	http://tulane.edu/som/patients/inde x.cfm	Women	Provides women's health care.	*	х	x x	х		х					*	х	х	х	х	*	х			*
TULANE UNIVERSITY SCHOOL OF MEDICINE	No restrictions	Tulane Hospital for Children 1415 Tulane Avenue New Orleans, LA 70112 504-988-5800	70112	Orleans	http://tulane.edu/som/patients/inde x.cfm	Children	Provides primary, preventive, specialty, and emergency pediatric health care. Greater New Orleans Area Application Center for Medicaid.	*	x	x x	x		x	x				*	x	х	х	x	*	х			*
TULANE UNIVERSITY SCHOOL OF MEDICINE		Tulane Medical Center 1415 Tulane Avenue New Orleans, LA (504) 988-5263	70112	Orleans	http://tulane.edu/som/patients/inde x.cfm	No restrictions	Provides primary, preventive, specialty, and emergency health care. Greater New Orleans Area Application Center for Medicaid.	*	х	хх	х		х	х				*	х	х	х	x	*	х			*
TULANE UNIVERSITY SCHOOL OF MEDICINE	No restrictions	Tulane Multispecialty Clinic at University Square 200 Broadway, Suite 230 New Orleans, LA 70118 504-988-9000	70118	Orleans	http://tulane.edu/som/patients/inde x.cfm	No restrictions	Provides family and community medicine and pediatrics. Greater New Orleans Area Application Center for Medicaid.	*	х	хх	х		х	х				*	х	х	х	х	*	х			*
TULANE UNIVERSITY SCHOOL OF MEDICINE		Tulane-Lakeside Hospital 4700 South I-10 Service Road West Metairie, LA 70001 504-780-8282	70001	Jefferson	http://tulane.edu/som/patients/inde x.cfm		Provides specialty health care. Greater New Orleans Area Application Center for Medicaid.	*	х	хх	х		х					*	х	х	х	х	*	х			*
TULANE UNIVERSITY SCHOOL OF MEDICINE		Center for Autism and Related Disorders 131 S. Robertson St. New Orleans, LA 70112 Phone: (504) 988-3533	70112	Orleans	http://tulane.edu/som/TCARD/contact-us.cfm		Provides diagnostic services, therapies, parent education and support.								*	х	х	*	x	х	х	x					
TULANE UNIVERSITY SCHOOL OF MEDICINE		Drop-In Center @ Covenant House 611 N. Rampart Street New Orleans, LA 70116	70116	Orleans	www.tulane.edu/~dropin	Homeless youth	Provides primary healthcare and substance abuse, mental health, case management and outreach services. Greater New Orleans Area Application Center for Medicaid.	*	x	x x	х		x	х	*	x	x x	*	х	x	x	х	*	x			*
UNITED CEREBRAL PALSEY OF GREATER NEW ORLEANS	Orleans, Jefferson, Avondale, St. Bernard	1000 Leonidas Street New Orleans LA 70118 Phone: (504) 865-0003	70118	Orleans	http://ucpgno.org/	Persons with disabilites	Provides a dental clinic and non-emergency transportation.	*	х	x x	х	x		х				*	х	x	x	х	*	х :	х		*
UNIVERSITY MEDICAL CENTER NEW ORLEANS		2000 Canal Street New Orleans, LA 70112 Phone: 504-702-3000	70112	Orleans	http://www.umcno.org/	No restrictions	Provides primary, preventive, specialty, pediatric, women's, and emergency health care.	*	х	хх	х		х	х				*	х	x	x	х	*	х			*
Volunteers of America of GNO	No restrictions	4152 Canal Street New Orleans, LA 70119 (504)482-2130	70119	Orleans	www.voagno.org	No restrictions	Provides programs for disadvantaged individuals and access to social services and other community based organizations.	*	х	хх	х	х		х	*	х	х х	*	х	x	х	х	*	х			*
WEST JEFFERSON MEDICAL CENTER		1111 Medical Center Blvd. Suite S-850 Marrero, LA 70072 Phone: 504.347.5511	70072	Jefferson	More Information	No restrictions	Provides adult and pediatric primary and preventive care. South Central Application Center for Medicaid.	*	х	x x	х		x	х				*	х		x	x	*	х			*

Organization/Provider	Counties Served	Contact Information	Zip Code	Column1	Internet Information	Population Served	Services Provided	CCESS TO HEALTHCARE AND MEDICAL SERVICES	mited availability of affordable preventive care mited availability of medical professionals	ostly fees that may be unaffordable for some ssidents ost of health insurance	ransportation availability	oordination of healthcare	ediatric Health Care	EHAVIORAL HEALTH AND SUBSTANCE ABUSE	lental health	ub stance abuse	ediatric Behavioral health (psychiatry, counseling, tc.)	ESOURCE AWARENESS AND HEALTH LITERACY	mited information dissemination ervices for Latino/Metnamese residents (including	ollaboration of business, hospitals and communities	imited outreach service provision	CCESS TO HEALTHY OPTIONS	e althy nutrition	ecreational activities availability ublic transportation availability	upervision of young people	EHAVIORS THAT IMPACT HEALTH
WEST JEFFERSON MEDICAL CENTER	No restrictions	Grand Isle Multiplex 3101 Louisiana Highway 1	70358	Jefferson	More Information	No restrictions	Provides adult and pediatric primary and preventive care.	*	x x	x x	_	х	х			<u> </u>		*	x	x	x	*	x	~ ~	- 5	*
		Grand Isle, LA, 70358							^ ^	^ ^		^	^						^	^	^		^			
WEST JEFFERSON MEDICAL CENTER	No restrictions	Lapalco Clinic 3909 Lapalco Blvd. Suite 100 Harvey, LA 70058 504.349.6900	70058	Jefferson	More Information	No restrictions	Provides adult and pediatric primary and preventive care.	*	x x	x x		x	x					*	x	x	x	*	x			*
WEST JEFFERSON MEDICAL CENTER	No restrictions	Manhattan Clinic 2845 Manhattan Blvd. Harvey, LA 70058 504.349.6930	70058	Jefferson	More Information	No restrictions	Provides adult and pediatric primary and preventive care.	*	x x	x x		х	x					*	х	x	х	*	х			*
WEST JEFFERSON MEDICAL CENTER	No restrictions	Oakwood Clinic 175 Hector Avenue Gretna, LA 70056 504.349.6925	70056	Jefferson	More Information	No restrictions	Provides adult and pediatric primary and preventive care.	*	x x	x x		x	x					*	x	x	x	*	x			*
Westwego Ernest J. Tassin Senior Center	Jefferson	701 4th Street Westwego LA 70094 Phone: 504-328-3664	70094	Jefferson	http://www.cityofwestwego.com/co ntent/senior-center	Seniors and disabled residents of Westwego area	Provides non-emergency medical transportation.	*			х							*	х х	х	х	*	х	х х		*
YMCA	No restrictions	15577 Highway 15 Davant, LA 70040 504-279-5270	70040	Plaquemines	More Information	Youth	The YMCA provides programs for all ages to promote wellness and physical fitness.											*	х	х	х	*	х	х	х	*
YMCA	No restrictions	278 Civic Dr Port Sulphur, LA 70083 504-564-0911	70083	Plaquemines	More Information	Youth	The YMCA provides programs for all ages to promote wellness and physical fitness.											*	х	х	х	*	х	х	х	*
YMCA	No restrictions	36342 Highway 11 Buras, LA 70041 504-564-0591	70041	Plaquemines	More Information	Youth	The YMCA provides programs for all ages to promote wellness and physical fitness.											*	х	х	х	*	х	х	х	*
YMCA	No restrictions	304-304-0391 6691 Riverside Drive Metairie, LA 504-888-9622	70003	Jefferson	More Information	Youth	The YMCA provides programs for all ages to promote wellness and physical fitness.											*	х	х	х	*	х	х	х	*
YMCA	No restrictions	71256 Francis Road Covington, LA 70433 985-893-9622	70433	St. Tammany	More Information	Youth	The YMCA provides programs for all ages to promote wellness and physical fitness.											*	х	х	х	*	х	х	х	*
YMCA	No restrictions	8101 Belle Chasse Highway Belle Chasse, LA 70037 Phone: 504-392-9622	70037	Plaquemines	More Information	Youth	The YMCA provides programs for all ages to promote wellness and physical fitness.											*	х	х	х	*	х	х	х	*
YOUTH SERVICE BUREAU	No restrictions	150 Cleveland Avenue Slidell, LA 70438 Client Services: 985-643-5746	70438		http://www.ysbworks.com/contact. php	Youth	Provides substance abuse services.							*	х	х	х									
YOUTH SERVICE BUREAU	No restrictions	314 & 316 Austin Street Bogalusa, LA 70427 Client Services: 985-735-1687	70427		http://www.ysbworks.com/contact. php	Youth	Provides substance abuse services.							*	х	х	x									
YOUTH SERVICE BUREAU	No restrictions	430 North New Hampshire Covington, LA 70433 Phone: (985)893-2570	70433	St. Tammany	http://www.ysbworks.com/contact. php	Youth	Provides substance abuse services.							*	х	х	x									
YOUTH SERVICE BUREAU	No restrictions	911 Washington Street Franklinton, LA 70438 Office: 985-839-4090	70438		http://www.ysbworks.com/contact. php	Youth	Provides substance abuse services.							*	х	x	x									

APPENDIX B

Secondary Data Profile

UNIVERSITY MEDICAL CENTER NEW ORLEANS August, 2015

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<u>University Medical Center New Orleans Study Area Definition</u>
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University Medical Center New Orleans Study Area Definition

While community can be defined in many ways, for the purposes of this report, the **University Medical Center New Orleans** community is defined as 45 zip codes — including 11 parishes that hold a large majority (80%) of the inpatient discharges for the hospital (See Table 1 and Figure 1).

Table	1. Universi	ty Medical Center Nev	v Orleans Study Aı	ea Definitio	n – Zip Codes
City	Zip Code	Parish	City	Zip Code	Parish
Jackson	70748	East Feliciana Parish	New Orleans	70119	Orleans Parish
Saint Gabriel	70776	Iberville Parish	New Orleans	70122	Orleans Parish
Metairie	70001	Jefferson Parish	New Orleans	70124	Orleans Parish
Metairie	70002	Jefferson Parish	New Orleans	70125	Orleans Parish
Metairie	70003	Jefferson Parish	New Orleans	70126	Orleans Parish
Metairie	70005	Jefferson Parish	New Orleans	70127	Orleans Parish
Metairie	70006	Jefferson Parish	New Orleans	70128	Orleans Parish
Gretna	70053	Jefferson Parish	New Orleans	70129	Orleans Parish
Gretna	70056	Jefferson Parish	New Orleans	70130	Orleans Parish
Harvey	70058	Jefferson Parish	New Orleans	70131	Orleans Parish
Kenner	70062	Jefferson Parish	Chalmette	70043	St. Bernard Parish
Kenner	70065	Jefferson Parish	Violet	70092	St. Bernard Parish
Marrero	70072	Jefferson Parish	LA Place	70068	St. John the Baptist Parish
Westwego	70094	Jefferson Parish	Covington	70433	St. Tammany Parish
New Orleans	70121	Jefferson Parish	Slidell	70458	St. Tammany Parish
New Orleans	70123	Jefferson Parish	Slidell	70460	St. Tammany Parish
New Orleans	70112	Orleans Parish	Ponchatoula	70454	Tangipahoa Parish
New Orleans	70113	Orleans Parish	Houma	70360	Terrebonne Parish
New Orleans	70114	Orleans Parish	Houma	70363	Terrebonne Parish
New Orleans	70115	Orleans Parish	Bogalusa	70427	Washington Parish
New Orleans	70116	Orleans Parish	Franklinton	70438	Washington Parish
New Orleans	70117	Orleans Parish	Angola	70712	West Feliciana Parish
New Orleans	70118	Orleans Parish			

Homer Lake Providence Philadelphia Monticello reveport Decatur Ruston Meridian Jackson EXAS Monfield Mendenhall Laurel Jena Nacogdoches Hattiesburg Alexandria Lufkin oveton Jasper ivingston New Roads Baton Rouge Lafayette Beaumont New Orleans Houma exas City LOUISIANA Venice Marion 39429 Gulf of Mexico 39652 39478 39455 39657 MISSISSIPPI 70761_ 70789 70426 78458 70441 70722 39470 St. Helená 70422 70760 70 70442 70453 39426 0443 70437 70446 70755 70744 70711 70762 70402 70455 39466 70757 70772 70452 Baton Rouge 70803 St. Tammany 39529 70820 70517 39578 St. Martin 70764 Lake Pontchartrain n the Baptist sippi River-Gulf Outlet Canal 70339 Lake Borgne 70390 70301 70380 Lake Cataquatche 70372 70394 70538 West Sote 70355 70040 70342 70392 70374 70373 70345 Briston Sound 70083 Lafourche

Figure 1. Map of University Medical Center New Orleans Study Area

Demographic Data

Tripp Umbach gathered data from Truven Health Analytics, Inc. to assess the demographics of the **University Medical Center New Orleans** Study Area. The University Medical Center New Orleans Study Area is defined to include the 45 zip codes across 11 parishes; for comparison purposes the University Medical Center New Orleans Study Area looks to compare to Jefferson Parish and Orleans Parish (parishes with the largest number of zip codes that make up the study area).

Information pertaining to population change, gender, age, race, ethnicity, education level, housing, income, and poverty data are presented below.

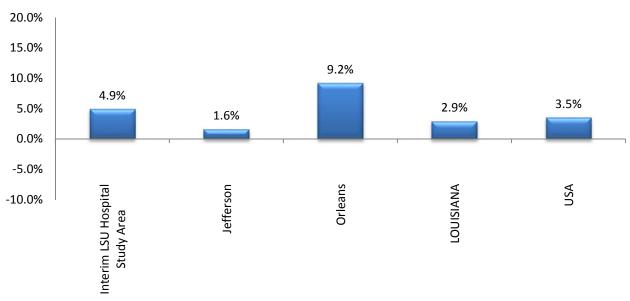
Population Change

- The University Medical Center New Orleans Study Area encompasses over 1 million residents.
- In 2015, the largest parish in the study area is Jefferson Parish with 435,154 residents in 2015.
- From 2015 to 2020, Orleans Parish is projected to experience the largest percentage change in population with a 9.2% increase (36,307 people).
- Orleans Parish is the smallest parish in the study area with only 392,762 residents.
- All of the study area is projected to have population growth in 2020.

Table 2. Population Size and Change Projections 2015, 2020

	University Medical Center New Orleans Study Area	Jefferson Parish	Orleans Parish	Louisiana	USA
2015 Total Population	1,111,212	435,154	392,762	4,662,874	319,459,991
2020 Projected Population	1,165,284	441,911	429,069	4,800,027	330,689,265
# Change	54,072	6,757	36,307	137,153	11,229,374
% Change	4.9%	1.6%	9.2%	2.9%	3.5%

Chart 1. Population Change 2015 - 2020



Gender

• The gender breakdown for the study area is generally consistent across the parishes and similar to state and national norms.

Chart 2. Gender (2015)



<u>Age</u>

• Jefferson Parish (15.4%) reports the largest population of residents aged 65 and older.

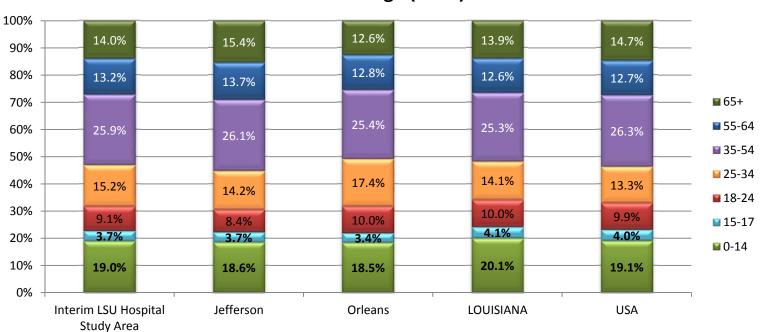
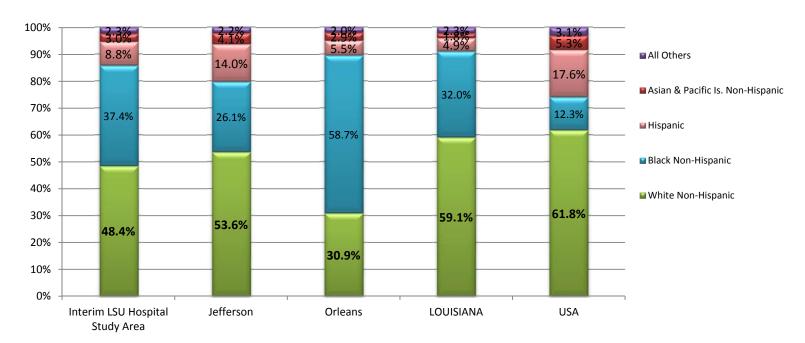


Chart 3. Age (2015)

Race

- Jefferson Parish reports the highest White, Non-Hispanic population percentage at 53.6%; this is lower than state (59.1%) and national norms (61.8%).
- Orleans Parish reports the highest Black, Non-Hispanic population across the study area parishes at 58.7%; University Medical Center New Orleans Study Area reports the second highest percentage at 37.4%.
- All of the study area parishes report lower rates of Hispanic residents as compared with the country (17.6%). Jefferson Parish reports the highest Hispanic population rate at 14%. Jefferson Parish also reports the highest percentage of Asian or Pacific Islander residents (4.1%) as compared with the other parishes in the study area.

Chart 4. Race (2015)



Education Level

- Jefferson Parish reports the highest rate of residents with 'Less than a high school' degree (6.7%); this is higher than the state (6.1%) and national (5.9%) rates.
- Orleans Parish reports the highest rate of residents with a Bachelor's degree or higher with 33.3%; this is higher than state (21.7%) and national (28.9%) norms.

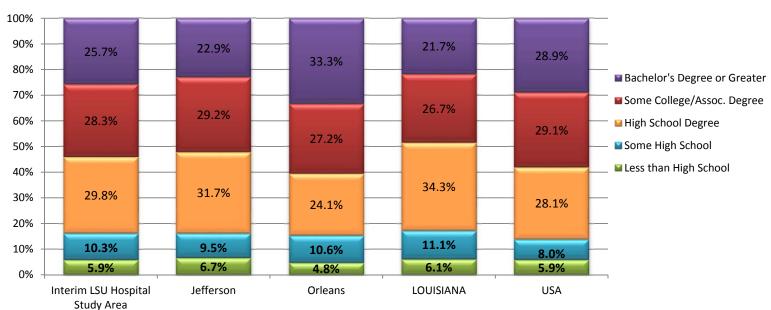


Chart 5. Education Level (2015)

Income

- Orleans Parish reports the lowest average annual household income for the study area at \$59,059.
- Jefferson Parish reports the highest average annual household income compared to the other parishes in the study area at \$63,672; this is lower than state (\$64,209) and national norms (\$74,165).
- Orleans Parish reports the highest rates of households that earn less than \$15,000 per year (25.8%); in other words, more than a 1 in every 4 residents of these parishes have household incomes less than \$15,000 per year.

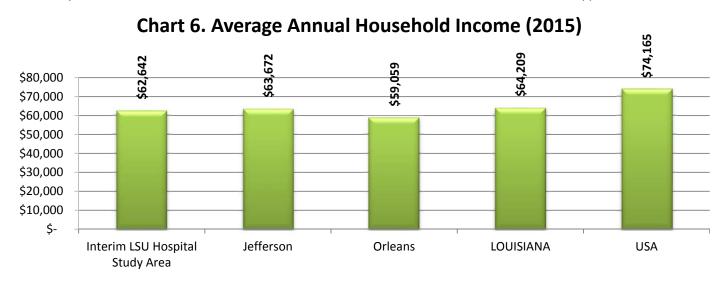
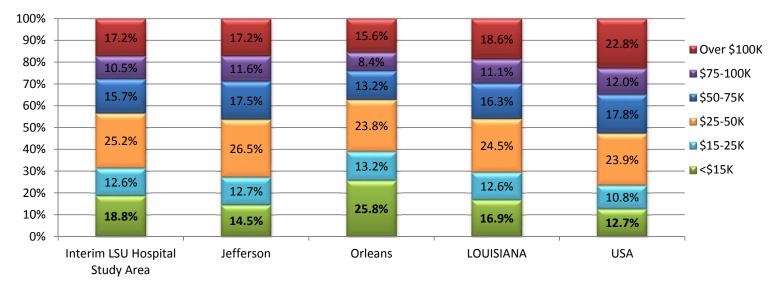


Chart 7. Annual Household Income Detail (2015)



Community Needs Index (CNI)

In 2005 Catholic Healthcare West, in partnership with Thomson Reuters, pioneered the nation's first standardized Community Need Index (CNI).¹⁶ CNI was applied to quantify the severity of health disparity for every zip code in the study area based on specific barriers to health care access. Because the CNI considers multiple factors that are known to limit health care access, the tool may be more accurate and useful than other existing assessment methods in

¹⁶ Truven Health Analytics, Inc. 2015 Community Need Index.

identifying and addressing the disproportionate unmet health-related needs of neighborhoods or zip code areas.

The CNI score is an average of five different barrier scores that measure various socio-economic indicators of each community using the 2015 source data. The five barriers are listed below along with the individual 2015 statistics that are analyzed for each barrier. These barriers, and the statistics that comprise them, were carefully chosen and tested individually by both Dignity Health and Truven Health:

6. Income Barrier

- a. Percentage of households below poverty line, with head of household age 65 or more
- b. Percentage of families with children under 18 below poverty line
- c. Percentage of single female-headed families with children under 18 below poverty line

7. Cultural Barrier

- a. Percentage of population that is minority (including Hispanic ethnicity)
- b. Percentage of population over age 5 that speaks English poorly or not at all

8. Education Barrier

a. Percentage of population over 25 without a high school diploma

9. Insurance Barrier

- a. Percentage of population in the labor force, aged 16 or more, without employment
- b. Percentage of population without health insurance

10. Housing Barrier

a. Percentage of households renting their home

Every populated zip code in the United States is assigned a barrier score of 1,2,3,4, or 5 depending upon the zip code's national rank (quintile). A score of 1 represents the lowest rank nationally for the statistics listed, while a score of 5 indicates the highest rank nationally. For example, zip codes that score a 1 for the Education Barrier contain highly educated populations; zip codes with a score of 5 have a very small percentage of high school graduates.

Table 3. Complete Zip Code CNI List – 2011 to 2015 Comparison

Zip	Community Name	Parish	Income Rank	Culture Rank	Education Rank	Insurance Rank	Housing Rank	2015 CNI Score	2011 CNI Score	Diff. 2011 – 2015
70053	Gretna	Jefferson Parish	5	5	5	5	5	5.0	4.8	+ 0.2
70112	New Orleans	Orleans Parish	5	5	5	5	5	5.0	5.0	0.0
70113	New Orleans	Orleans Parish	5	5	5	5	5	5.0	5.0	0.0
70114	New Orleans	Orleans Parish	5	5	5	5	5	5.0	4.8	+ 0.2
70117	New Orleans	Orleans Parish	5	5	5	5	5	5.0	5.0	0.0
70062	Kenner	Jefferson Parish	4	5	5	5	5	4.8	4.8	0.0
70116	New Orleans	Orleans Parish	5	5	4	5	5	4.8	4.8	0.0

	Community	/ Health Needs Assessment								
	University I	Medical Center New Orleans						Tripp Umb	ach	
70119	New Orleans	Orleans Parish	5	5	4	5	5	4.8	5.0	- 0.2
70125	New Orleans	Orleans Parish	5	5	4	5	5	4.8	4.8	0.0
70126	New Orleans	Orleans Parish	5	5	4	5	5	4.8	4.2	+ 0.6
70127	New Orleans	Orleans Parish	5	5	4	5	5	4.8	4.2	+ 0.6
70129	New Orleans	Orleans Parish	5	5	5	5	4	4.8	5.0	- 0.2
70094	Westwego	Jefferson Parish	4	5	5	5	4	4.6	4.6	0.0
70122	New Orleans	Orleans Parish	4	5	4	5	5	4.6	4.2	+ 0.4
70363	Houma	Terrebonne Parish	4	5	5	5	4	4.6	4.4	+ 0.2
70427	Bogalusa	Washington Parish	5	4	5	5	4	4.6	4.4	+ 0.2
70043	Chalmette	St. Bernard Parish	4	4	4	5	5	4.4	3.8	+ 0.6
70092	Violet	St. Bernard Parish	4	5	5	5	3	4.4	4.6	- 0.2
70118	New Orleans	Orleans Parish	4	5	3	5	5	4.4	4.6	- 0.2
70130	New Orleans	Orleans Parish	5	4	3	5	5	4.4	4.8	- 0.4
70131	New Orleans	Orleans Parish	4	5	3	5	5	4.4	3.4	+ 1.0
70748	Jackson	East Feliciana Parish	5	5	5	4	3	4.4	n/a	n/a
70002	Metairie	Jefferson Parish	4	5	3	4	5	4.2	3.2	+ 1.0
70056	Gretna	Jefferson Parish	4	5	3	4	5	4.2	3.6	+ 0.6
70058	Harvey	Jefferson Parish	4	5	4	4	4	4.2	4.2	0.0
70072	Marrero	Jefferson Parish	4	5	5	4	3	4.2	4.0	+ 0.2
70128	New Orleans	Orleans Parish	4	5	3	5	4	4.2	3.6	+ 0.6
70438	Franklinton	Washington Parish	4	4	5	5	3	4.2	4.0	+ 0.2
70115	New Orleans	Orleans Parish	4	4	2	5	5	4.0	4.6	- 0.6
70121	New Orleans	Jefferson Parish	3	4	4	4	5	4.0	4.0	0.0
70458	Slidell	St. Tammany Parish	4	4	4	4	4	4.0	2.8	+ 1.2
70065	Kenner	Jefferson Parish	3	5	3	3	5	3.8	3.4	+ 0.4
70454	Ponchatoula	Tangipahoa Parish	3	4	4	5	3	3.8	3.8	0.0
70776	Saint Gabriel	Iberville Parish	3	5	5	3	3	3.8	n/a	n/a
70001	Metairie	Jefferson Parish	2	4	3	4	5	3.6	3.4	+ 0.2
70006	Metairie	Jefferson Parish	3	4	3	4	4	3.6	3.0	+ 0.6
70123	New Orleans	Jefferson Parish	3	4	3	3	5	3.6	2.8	+ 0.8
70460	Slidell	St. Tammany Parish	3	4	4	4	3	3.6	3.2	+ 0.4
70068	LA Place	St. John the Baptist Parish	2	5	4	4	2	3.4	3.4	0.0
70360	Houma	Terrebonne Parish	3	4	3	3	4	3.4	3.4	0.0
70712	Angola	West Feliciana Parish	2	1	5	4	5	3.4	n/a	n/a
70003	Metairie	Jefferson Parish	2	4	3	4	3	3.2	3.0	+ 0.2
70005	Metairie	Jefferson Parish	2	3	2	4	5	3.2	2.6	+ 0.6
70433	Covington	St. Tammany Parish	3	3	2	3	3	2.8	2.6	+ 0.2

A total of 43 of the 45 zip code areas (95.6%) for the University Medical Center New Orleans Study Area fall above the median score for the scale (3.0). Being above the median for the scale indicates that these zip code areas have more than average the number of barriers to health care access.

2.4

2.2

+ 0.2

70124

New Orleans

Orleans Parish

Figure 2. University Medical Center New Orleans Study Area 2015 CNI Map



Across the 45 University Medical Center New Orleans study area zip codes:

- ✓ 24 experienced a rise in their CNI score from 2011 to 2015, indicating a shift to more barriers to health care access (red, positive values)
- √ 12 remained the same from 2011 to 2015
- ✓ Six experienced a decline in their CNI score from 2011 to 2015, indicating a shift to fewer barriers to health care access (green, negative values)
- ✓ Three did not have comparable 2011 data (n/a values)

Zip code area 70458 – Slidell experienced the largest rise in CNI score (going from 2.8 to 4.0); while 70115 – New Orleans experienced the largest decline in CNI score (going from 4.6 to 4.0).

Figure 3. University Medical Center New Orleans Study Area 2011 - 2015 CNI Difference Map



The available data behind the rankings illustrates the supporting data for each CNI ranking.

Table 4. University Medical Center New Orleans- 2015 CNI Detailed Data

Zip	City	2015 CNI Score	Poverty 65+	Poverty Married w/ kids	Poverty Single w/kids	Limited English	Minority	No High School Diploma	Un- employed	Un- insured	Renting
70053	Gretna	5.0	20.7%	39.2%	52.3%	8.2%	55.7%	25.7%	10.9%	20.5%	52.3%
70112	New Orleans	5.0	33.5%	68.2%	77.9%	1.3%	69.5%	20.3%	17.1%	38.9%	88.4%
70113	New Orleans	5.0	36.0%	56.3%	60.9%	1.0%	85.5%	28.8%	23.8%	42.0%	78.3%
70114	New Orleans	5.0	24.4%	39.6%	60.3%	2.2%	82.0%	20.6%	15.3%	27.9%	56.7%
70117	New Orleans	5.0	29.5%	46.8%	63.6%	0.6%	78.5%	22.0%	14.3%	31.9%	50.6%
70062	Kenner	4.8	29.9%	28.3%	49.1%	7.8%	62.6%	23.3%	17.4%	17.7%	48.9%
70116	New Orleans	4.8	19.7%	54.7%	65.9%	1.2%	56.3%	16.5%	14.2%	24.8%	67.3%
70119	New Orleans	4.8	25.4%	48.3%	66.8%	3.4%	70.7%	19.2%	15.4%	31.1%	67.0%
70125	New Orleans	4.8	22.3%	40.4%	54.1%	0.8%	67.2%	14.8%	14.4%	25.4%	55.0%
70126	New Orleans	4.8	11.8%	46.4%	55.3%	1.0%	95.3%	18.4%	16.2%	29.5%	45.5%
70127	New Orleans	4.8	21.7%	44.5%	65.2%	1.2%	97.7%	15.1%	14.5%	30.6%	49.3%
70129	New Orleans	4.8	34.1%	40.7%	67.7%	16.6%	90.0%	32.6%	13.1%	29.1%	34.1%
70094	Westwego	4.6	16.8%	26.5%	44.9%	2.2%	57.5%	25.7%	15.2%	16.3%	31.0%
70122	New Orleans	4.6	15.8%	27.9%	42.4%	0.8%	86.8%	14.1%	14.1%	25.2%	38.3%
70363	Houma	4.6	7.0%	29.2%	48.8%	0.8%	47.1%	32.6%	9.0%	16.3%	28.7%
70427	Bogalusa	4.6	17.2%	33.9%	62.1%	0.3%	38.4%	22.9%	20.5%	21.9%	31.7%
70043	Chalmette	4.4	7.4%	22.9%	48.0%	2.4%	36.4%	17.0%	10.8%	17.1%	42.3%
70092	Violet	4.4	11.3%	25.2%	53.5%	0.3%	58.2%	21.5%	16.1%	15.3%	20.9%
70118	New Orleans	4.4	18.6%	25.3%	42.2%	0.9%	45.5%	11.7%	10.5%	23.1%	54.6%
70130	New Orleans	4.4	24.5%	30.6%	71.3%	0.9%	39.2%	11.1%	8.3%	21.1%	68.2%
70131	New Orleans	4.4	11.9%	24.3%	51.3%	1.9%	74.4%	12.9%	10.2%	17.5%	42.1%
70748	Jackson	4.4	17.8%	31.1%	70.3%	0.2%	52.9%	27.8%	8.0%	14.2%	24.1%

	Community Hea	lth Needs	Assessment								
	University Medic	cal Center	New Orlean	ıs					Tripp U	Imbach	
70002	Metairie	4.2	10.8%	19.9%	46.0%	9.5%	40.5%	13.0%	7.6%	12.5%	46.2%
70056	Gretna	4.2	12.6%	21.6%	45.3%	4.8%	62.1%	13.4%	7.1%	12.4%	39.9%
70058	Harvey	4.2	16.6%	26.4%	45.4%	5.9%	75.1%	18.8%	7.0%	14.3%	30.6%
70072	Marrero	4.2	18.5%	24.8%	53.3%	2.3%	54.3%	21.5%	6.8%	13.9%	24.4%
70128	New Orleans	4.2	16.3%	30.0%	52.2%	1.8%	97.9%	12.6%	11.9%	23.0%	31.2%
70438	Franklinton	4.2	25.6%	25.8%	48.1%	0.3%	28.6%	20.4%	11.7%	20.0%	20.8%
70115	New Orleans	4.0	14.9%	22.7%	43.7%	1.3%	37.0%	9.6%	10.6%	18.8%	56.3%
70121	New Orleans	4.0	13.7%	24.3%	36.6%	2.8%	37.4%	14.6%	7.7%	12.9%	46.0%
70458	Slidell	4.0	12.9%	22.5%	45.2%	0.7%	25.6%	14.3%	9.2%	10.4%	26.4%
70065	Kenner	3.8	7.2%	14.4%	39.2%	6.1%	50.1%	13.3%	7.2%	9.3%	36.3%
70454	Ponchatoula	3.8	20.6%	13.9%	37.7%	0.3%	20.7%	15.0%	8.9%	16.8%	22.1%
70776	Saint Gabriel	3.8	15.5%	8.4%	41.7%	0.2%	53.1%	27.7%	11.5%	7.7%	20.7%
70001	Metairie	3.6	14.4%	15.3%	30.0%	3.2%	32.2%	12.4%	5.5%	11.8%	50.1%
70006	Metairie	3.6	5.4%	17.0%	37.6%	5.0%	34.9%	13.7%	8.2%	10.4%	34.0%
70123	New Orleans	3.6	8.7%	14.2%	35.9%	1.0%	20.3%	10.5%	4.4%	10.1%	39.4%
70460	Slidell	3.6	11.0%	21.5%	42.1%	1.3%	39.3%	16.0%	9.7%	11.4%	21.4%
70068	LA Place	3.4	13.7%	15.8%	27.5%	1.4%	58.1%	16.1%	9.1%	10.2%	19.3%
70360	Houma	3.4	7.7%	14.1%	40.2%	0.6%	24.9%	14.0%	5.7%	10.0%	29.6%
70712	Angola	3.4	9.7%	18.2%	16.7%	0.5%	1.9%	35.4%	19.3%	9.4%	63.5%
70003	Metairie	3.2	10.7%	13.7%	30.3%	2.8%	29.8%	13.2%	7.6%	11.5%	24.3%
70005	Metairie	3.2	9.4%	6.1%	30.4%	4.1%	16.8%	8.6%	5.9%	10.8%	37.2%
70433	Covington	2.8	8.2%	17.6%	42.6%	0.7%	18.0%	8.5%	7.1%	9.5%	22.4%
70124	New Orleans	2.4	11.2%	4.5%	13.2%	1.4%	16.3%	3.7%	4.0%	10.1%	31.9%

For the study area there are 5 zip code areas with CNI scores of 5.0, indicating significant barriers to health care access. These zip code areas are: 70053 – Gretna, 70112, 70113, 70114, and 70117 – New Orleans.

- Zip code area 70112 in New Orleans reports the highest rates for the study area for: married parents with children living in poverty (68.2%), single parents with children living in poverty (77.9%), and residents renting (88.4%).
- Zip code area 70113 in New Orleans reports the highest rates of residents aged 65 and older living in poverty (36.0%), residents who are unemployed (23.8%), and residents who are uninsured (42.0%) as compared with the other zips in the study area.
- Zip code area 70129, also, in New Orleans, reports the highest rate of residents with limited English proficiency (16.6%).
- Zip code area 70712 in Angola reports the highest rate for the study area for residents without a high school diploma (35.4%).
- 97.9% of zip code area 70128 in New Orleans identify themselves as a minority; this is the highest for the study area.

On the other end of the spectrum, the lowest CNI score for the study area is 1.8 in 70447 – Madisonville and 70448 – Mandeville.

• Zip code areas 70748 – Jackson and 70776 – Saint Gabriel report the lowest rates of residents with limited English proficiency at 0.2%.

- Zip code area 70776 Saint Gabriel also reports the lowest rate for uninsured residents at 7.7%.
- Zip code area 70001 Metairie reports the lowest rate of residents aged 65+ living in poverty at 5.4%.
- Zip code area 70068 LA Place reports the lowest rate of residents renting for the study area at only 19.3%.
- Zip code area 70712 Angola reports the lowest minority rate for the study area at only 1.9%.
- Zip code area 70124 New Orleans reports the lowest rates for married residents with children living in poverty (4.5%), single residents with children living in poverty (13.2%), residents with no high school diploma (3.7%), and unemployed residents (4.0%).

5
4.1
4.0

Interim LSU Hospital
Study Area

Chart 8. Overall CNI Values - University Medical Center New Orleans and Parishes

Prevention Quality Indicators (PQI) and Pediatric Quality Indicators (PDI)¹⁷

Prevention Quality Indicators (PQI)

The Prevention Quality Indicators index (PQI) was developed by the Agency for Healthcare Research and Quality (AHRQ). PQI is similarly referred to as Ambulatory Care Sensitive Hospitalizations. The quality indicator rates are derived from inpatient discharges by zip code using ICD diagnosis and procedure codes. There are 14 quality indicators.

¹⁷ PQI and PDI values were calculated including all relevant zip-code values from Louisiana; Mississippi data could not be obtained and was therefore not included.

The PQI index identifies potentially avoidable hospitalizations for the benefit of targeting priorities and overall community health. Lower index scores represent fewer admissions for each of the PQIs.

PQI Subgroups:

5. Chronic Lung Conditions

- ✓ PQI 5 Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults (40+) Admission Rate¹⁸
- ✓ PQI 15 Asthma in Younger Adults Admission Rate¹⁹

6. Diabetes

- ✓ PQI 1 Diabetes Short-Term Complications Admission Rate
- ✓ PQI 3 Diabetes Long-Term Complications Admission Rate
- ✓ PQI 14 Uncontrolled Diabetes Admission Rate
- ✓ PQI 16 Lower Extremity Amputation Rate Among Diabetic Patients

7. Heart Conditions

- ✓ PQI 7 Hypertension Admission Rate
- ✓ PQI 8 Congestive Heart Failure Admission Rate
- ✓ PQI 13 Angina Without Procedure Admission Rate

8. Other Conditions

✓ PQI 2 Perforated Appendix Admission Rate²⁰

✓ PQI 9 Low Birth Weight Rate²¹

✓ PQI 10 Dehydration Admission Rate

✓ PQI 11 Bacterial Pneumonia Admission Rate

 18 PQI 5 for past study was COPD in 18+ population; PQI 5 for current study is now restricted to COPD and Asthma in 40+ population

¹⁹ PQI 15 for past study was Adult Asthma in 18+ population; PQI 15 for current study is now restricted to Asthma in 18-39 population ("Younger").

²⁰ PQI 2 changed from Perforated Appendix in Males 18+ for the past study to Perforated Appendix in Total 18+ population as a rate per 1,000 ICD-9 code admissions for appendicitis. This shift has changed the values for this measure drastically and therefore, Tripp Umbach did not adjust.

²¹ Although not clearly explained by the AHRQ, it would seem that a definition of Newborn population has shifted for PQI 9 because the values are drastically lower in 2014 than in previous years (2011). This has shifted PQI 9 values drastically. Tripp Umbach did not adjust.

✓ PQI 12 Urinary Tract Infection Admission Rate

Table 5. Prevention Quality Indicators (Po	QI) University M	ledical Cente	r New Orlear	ns/ LA / U.S.A. 2	015
Prevention Quality Indicators (PQI)	University Medical Center New Orleans Study Area 2015 PQI	LA 2015 PQI	U.S.A. 2015 PQI	University Medical Center New Orleans Study Area – LA Diff.	University Medical Center New Orleans Study Area – U.S.A. Diff.
Chronic Lung Conditions					
COPD or Adult Asthma (PQI5)	465.03	531.03	495.71	- 66.00	- 30.68
Asthma in Younger Adults (PQI15)	34.60	42.83	46.02	- 8.23	- 11.42
Diabetes					
Diabetes Short-Term Complications (PQI1)	102.23	98.10	63.86	+ 4.13	+ 38.37
Diabetes Long-Term Complications (PQI3)	130.18	126.06	105.72	+ 4.12	+ 24.46
Uncontrolled Diabetes (PQI14)	10.52	15.57	15.72	- 5.05	- 5.20
Lower Extremity Amputation Among Diabetics (PQI16)	14.86	12.74	16.50	+ 2.12	- 1.64
Heart Conditions					
Hypertension (PQI7)	40.40	46.06	54.27	- 5.66	- 13.87
Congestive Heart Failure (PQI8)	381.36	404.11	321.38	- 22.75	+ 59.98
Angina Without Procedure (PQI13)	7.80	13.74	13.34	- 5.94	- 5.54
Other Conditions					
Perforated Appendix (PQI2)	423.91	322.43	323.43	+ 101.48	+ 100.48
Low Birth Weight (PQI9)	97.30	86.51	62.14	+ 10.79	+ 35.16
Dehydration (PQI10)	83.34	124.53	135.70	- 41.19	- 52.36
Bacterial Pneumonia (PQI11)	209.44	305.80	248.19	- 96.36	- 38.75
Urinary Tract Infection (PQI12)	177.31	209.39	167.01	- 32.08	+ 10.30

Key Findings from 2015 PQI Data:

- The PQI measures in which the study area reports higher preventable admission rates than the State of Louisiana is for:
 - Diabetes Short-Term Complications
 - Diabetes Long-TermComplications

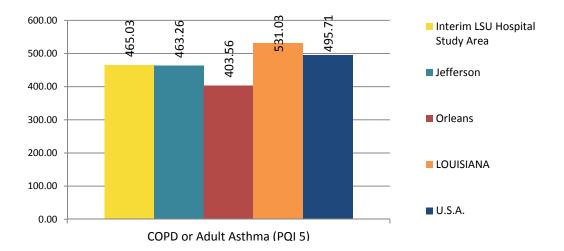
- Lower Extremity Amputation
 Among Diabetics
- ✓ Perforated Appendix
- ✓ Low Birth Weight
- When comparing the PQI data to the national rates, the study area reports higher preventable hospital admissions for:

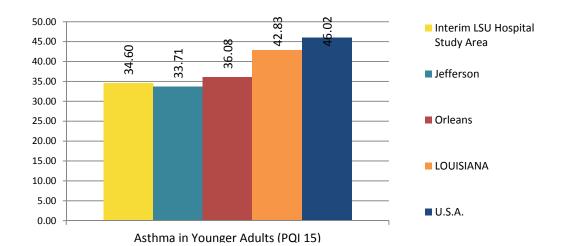
- Diabetes, Short-Term Complications
- Diabetes, Long-Term Complications

- ✓ Congestive Heart Failure
- ✓ Perforated Appendix
- ✓ Low Birth Weight
- ✓ Urinary Tract Infection
- There are a handful of PQI values in which the Study Area as well as a majority of the study area parishes report higher rates than is seen nationally (indicating areas in which there are more preventable hospital admissions than the national norm), these include:
 - Diabetes, Short-Term Complications
 - Diabetes, Long-Term
 Complications

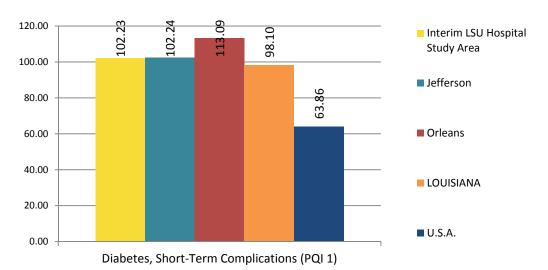
- ✓ Congestive Heart Failure
- ✓ Perforated Appendix
- ✓ Low Birth Weight
- ✓ Urinary Tract Infection
- There are also a number of PQI measures in which the Study Area and many of the parishes in the study area report lower values than the nation (indicating areas in which there are fewer preventable hospital admissions than the national norm), these include:
 - ✓ COPD or Adult Asthma
 - ✓ Asthma in Younger Adults
 - ✓ Uncontrolled Diabetes
 - Lower Extremity Amputation among Diabetics
 - Hypertension (all of the areas are below the national rate)
 - ✓ Angina without Procedure
 - Dehydration
 - ✓ Bacterial Pneumonia

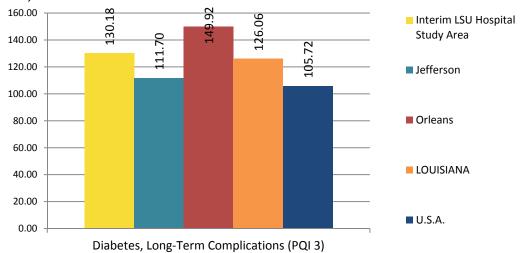
Chronic Lung Conditions:

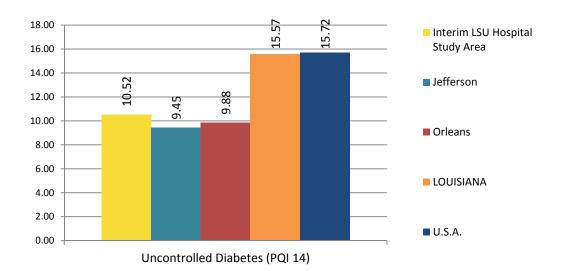


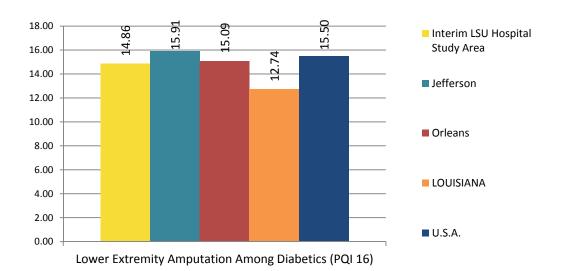


Diabetes:

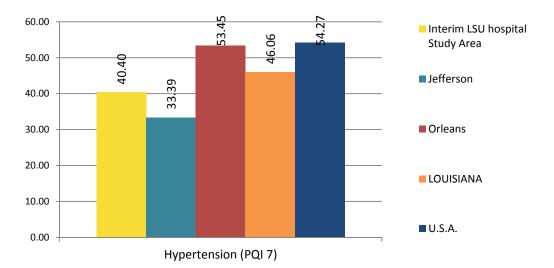


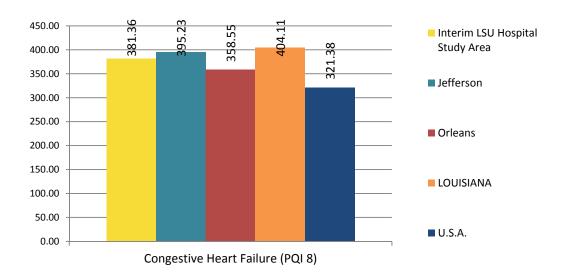


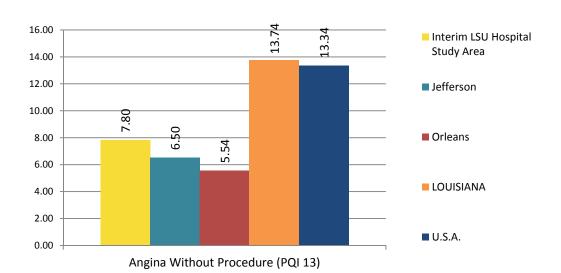




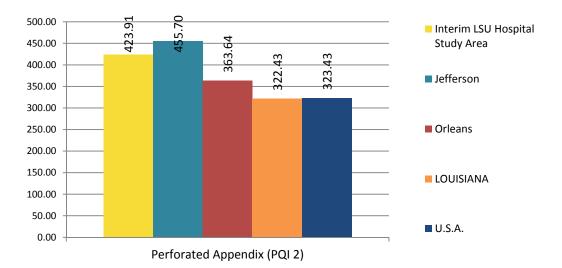
Heart Conditions:

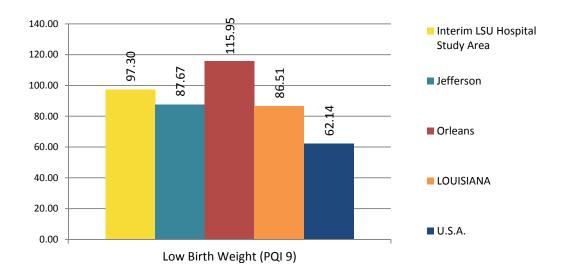


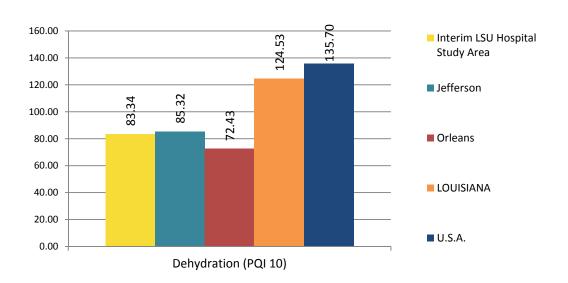


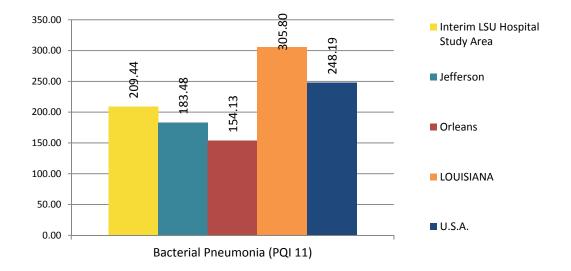


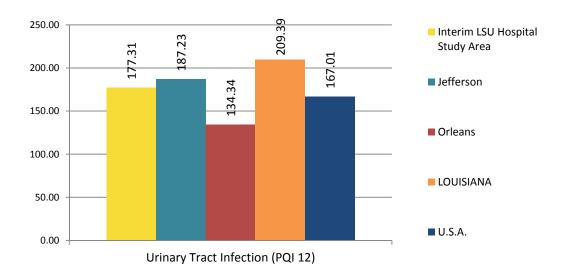
Other Conditions:











Pediatric Quality Indicators Overview

The Pediatric Quality Indicators (PDIs) are a set of measures that can be used with hospital inpatient discharge data to provide a perspective on the quality of pediatric healthcare. Specifically, PDIs screen for problems that pediatric patients experience as a result of exposure to the healthcare system and that may be amenable to prevention by changes at the system or provider level.

Development of quality indicators for the pediatric population involves many of the same challenges associated with the development of quality indicators for the adult population. These challenges include the need to carefully define indicators using administrative data, establish validity and reliability, detect bias and design appropriate risk adjustment, and overcome challenges of implementation and use. However, the special population of children

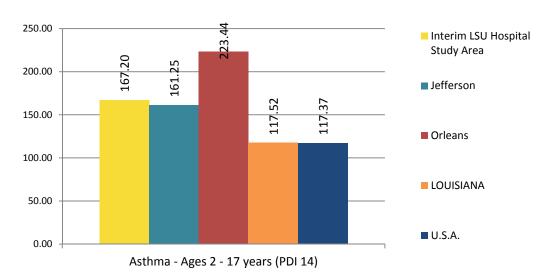
invokes additional, special challenges. Four factors—differential epidemiology of child healthcare relative to adult healthcare, dependency, demographics, and development—can pervade all aspects of children's healthcare; simply applying adult indicators to younger age ranges is insufficient.

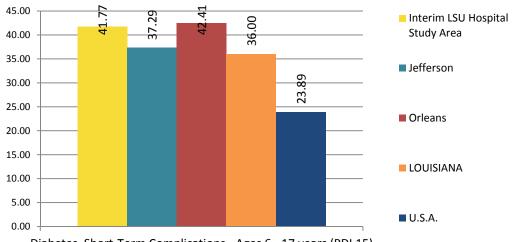
This PDIs focus on potentially preventable complications and iatrogenic events for pediatric patients treated in hospitals, and on preventable hospitalizations among pediatric patients.

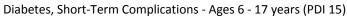
The PDIs apply to the special characteristics of the pediatric population; screen for problems that pediatric patients experience as a result of exposure to the healthcare system and that may be amenable to prevention by changes at the provider level or area level; and, help to evaluate preventive care for children in an outpatient setting, and most children are rarely hospitalized.

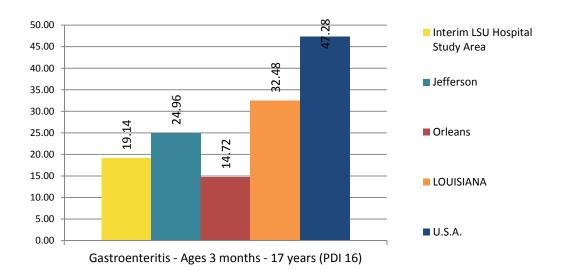
PDI Subgroups:

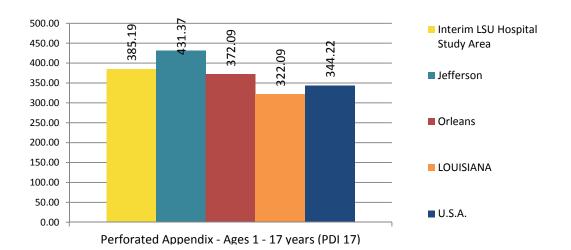
- ✓ PDI 14 Asthma Admission Rate (per 100,000 population ages 2 17)
- ✓ PDI 15 Diabetes, Short-Term Complications Admission Rate (per 100,000 population ages 6 17)
- ✓ PDI 16 Gastroenteritis Admission Rate (per 100,000 population ages 3 months –
 17 years)
- ✓ PDI 17 Perforated Appendix Admission Rate (per 1,000 admissions ages 1 17)
- ✓ PDI 18 Urinary Tract Infection Admission Rate (per 100,000 population ages 3 months 17 years)

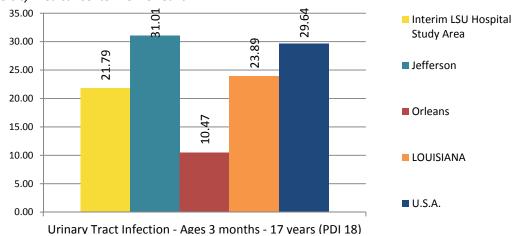












Key Findings from PDI Data:

- Orleans Parish reports the highest rate of preventable hospitalizations due to Asthma for children aged 2 to 17 at 223.44 per 100,000 population; almost double the national rate of 117.37.
- Orleans Parish and the University Medical Center New Orleans Study Area report the highest rates of diabetes, short-term complications for those aged 6 to 17 years old for the study area (42.41 and 41.77 respectively); these rates are higher than the national rate of 23.89.
- Jefferson Parish reports the highest rate of gastroenteritis for the study area at 24.96 per 100,000 population aged 3 months to 17 years; the national rate is 47.28.
- Jefferson Parish reports the highest rate of preventable hospitalizations due to perforated appendix for ages 1 to 17 years old with 431.37 per 100,000 admissions.
- Jefferson Parish is the only parish to report a value higher than the national rate of preventable hospital admissions due to urinary tract infections for those aged 3 months to 17 years with 31.01 per 100,000 population being admitted while the national rate stands at 29.64.

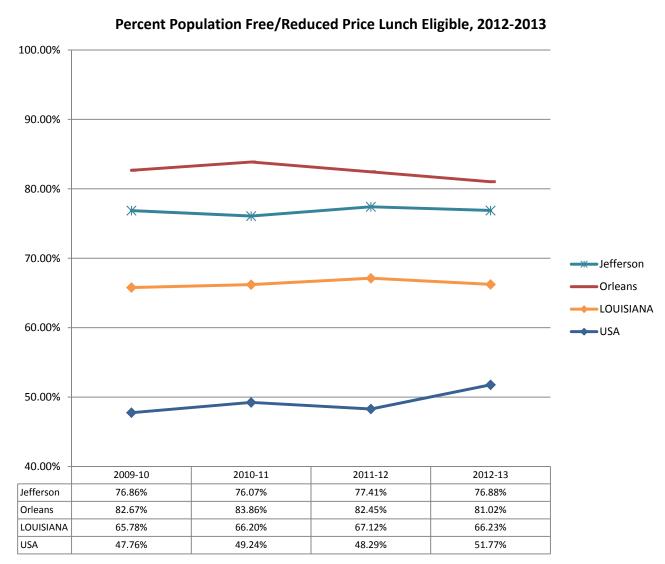
Community Commons Data

Tripp Umbach gathered data from Community Commons related to social and economic factors, physical environment, clinical care, and health behaviors for the parishes of interest for the University Medical Center New Orleans CHNA.²² The data is presented in the aforementioned categories below.

Social and Economic Factors

Free/Reduced Price Lunch Eligible

• Orleans Parish reports the highest rate of public school students who are eligible for free or reduced lunch eligible but has seen a decline in this rate (81.02%).

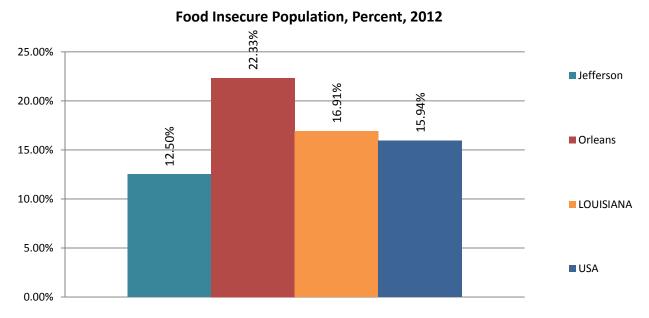


²² Community Commons. http://www.communitycommons.org/ Accessed 06/08/2015.

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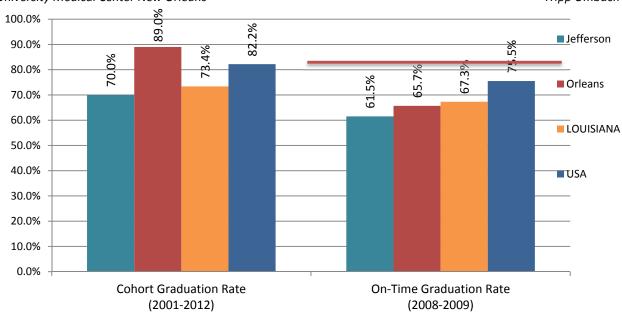
Food Insecure Population

- This indicator reports the estimated percentage of the population that experienced food insecurity at some point during the report year. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.
- Orleans Parish reports higher food insecurity rates than the State of Louisiana at 22.33% of the population.



Graduation Rate

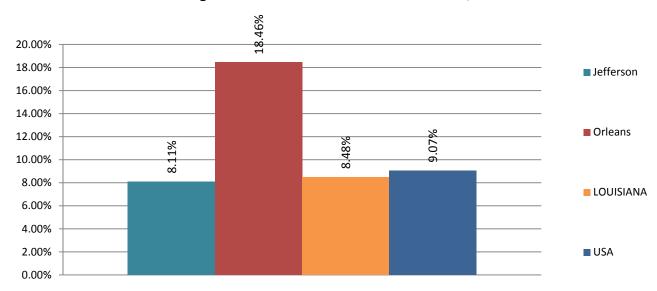
- This indicator is relevant because research suggests education is one the strongest predictors of health (Freudenberg & Ruglis, 2007).
- Jefferson Parish reports the lowest overall graduation rate as well as the lowest on-time graduation rate throughout the study area parishes (70.0% overall graduation, 61.5% on-time graduation).
- The Healthy People 2020 Target for on-time graduation is 82.4% all of the study area parishes and the states fall below this goal.



Households with No Motor Vehicle

Orleans Parish reports the highest rate of households with no motor vehicle (18.48%).
 Orleans Parish includes the City of New Orleans which has more public transportation options for residents.

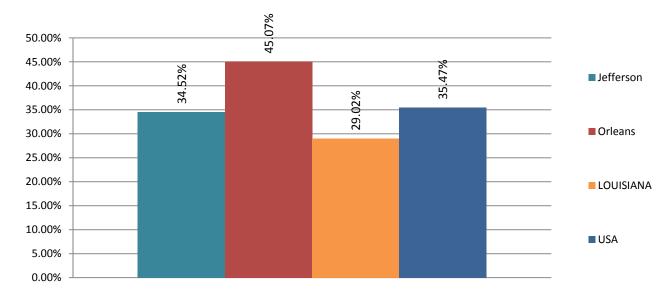




Cost Burdened Households

- This indicator reports the percentage of the households where housing costs exceed 30% of total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. The information offers a measure of housing affordability and excessive shelter costs. The data also serve to aid in the development of housing programs to meet the needs of people at different economic levels.
- Orleans Parish reports a higher percentage of cost-burdened households as compared
 with the country at 45.07% and the highest rate for the study area. All of the other
 parishes in the study area report lower rates of cost-burdened households than the
 national average (35.47%).

Percentage of Cost Burdened Households (Over 30% of Income), 2009-2013



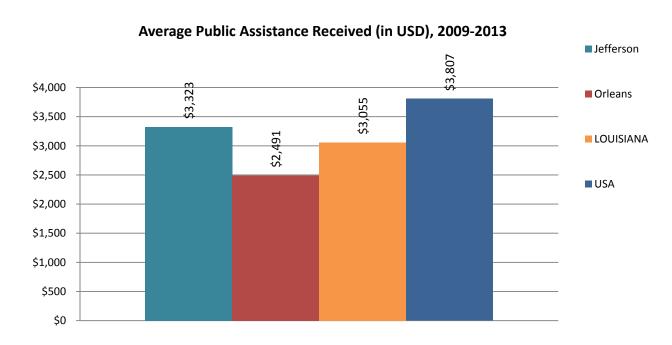
Public Assistance

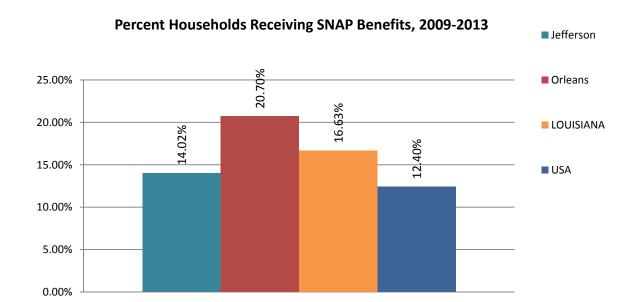
- This indicator reports the percentage households receiving public assistance income.
 Public assistance income includes general assistance and Temporary Assistance to Needy Families (TANF). Separate payments received for hospital or other medical care (vendor payments) are excluded. This does not include Supplemental Security Income (SSI) or noncash benefits such as Food Stamps.
- All of the study area parishes report lower rates of households receiving public assistance income than the rates seen for the country.
- Orleans Parish reports the highest rate of households receiving public assistance at 1.93%. Jefferson Parish reports the lowest rate of households receiving public assistance at only 1.39%.

0.00%

University Medical Center New Orleans Tripp Umbach Percent Households with Public Assistance Income, 2009-2013 ■ Jefferson 2.82% 3.00% Orleans 2.50% 1.93% **LOUISIANA** 2.00% 1.47% USA 1.50% 1.00% 0.50%

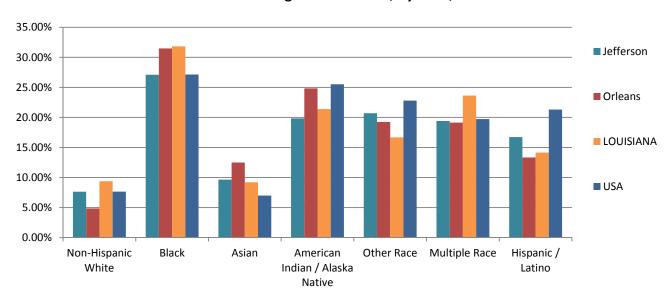
• Jefferson Parish reports the highest average amount of public assistance received by households at \$3,323.





- Orleans Parish reports the highest rate of households receiving SNAP benefits across the study area at 20.70%.
- The African American / Black population of Orleans and Jefferson parishes report a high rate of receiving SNAP benefits at 31.48% and 27.10% respectively.
- The American Indian / Alaska Native, African-American / Black, and Multiple race populations of the study area see some of the highest rates of receiving SNAP benefits.
 The Non-Hispanic White, Asian, and Hispanic/Latino populations report some of the lowest rates of receiving SNAP benefits for the study area.

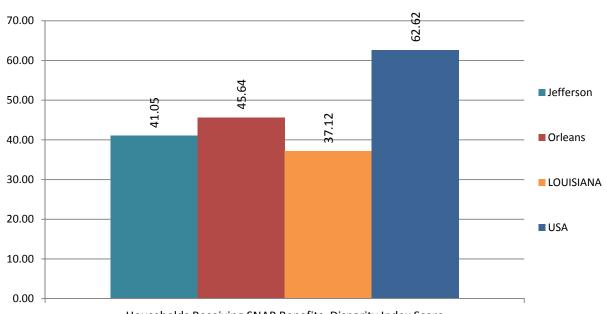
Percent Households Receiving SNAP Benefits, by Race, 2009-2013



Households Receiving SNAP Benefits, Disparity Index

- The Index of Disparity (ID) measures the magnitude of variation in indicator percentages across population groups. Specifically, the index of disparity is defined as "the average of the absolute differences between rates for specific groups within a population and the overall population rate, divided by the rate for the overall population and expressed as a percentage".
- All of the study area parishes report "High Disparity" in households receiving SNAP benefits (disparity score over 40).
- Orleans Parish reports the highest SNAP Benefits Disparity Index score for the study area at 45.64 with Jefferson Parish a close second at 41.05.

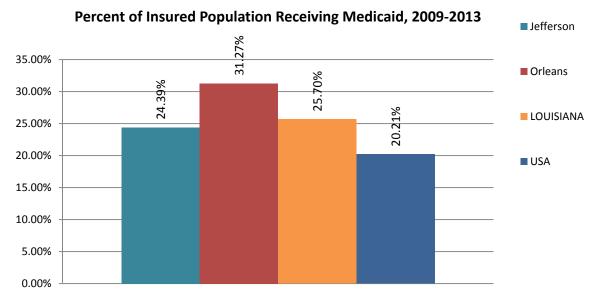
Households Receiving SNAP Benefits, Disparity Index Score 2009-2013



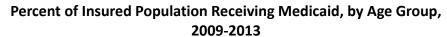
Households Receiving SNAP Benefits, Disparity Index Score (0 = No Disparity; 1 - 40 = Some Disparity; Over 40 = High Disparity)

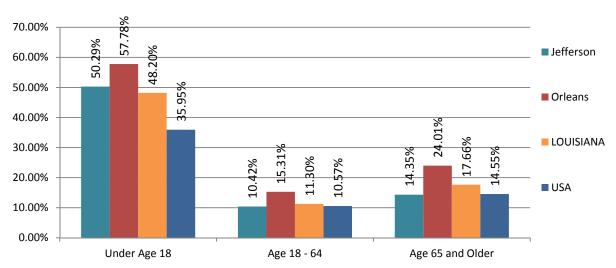
Medicaid

• Orleans Parish reports the highest rate of Insured Residents Receiving Medicaid at 31.27%; this rate is higher than state (25.70%) and national (20.21%) rates.



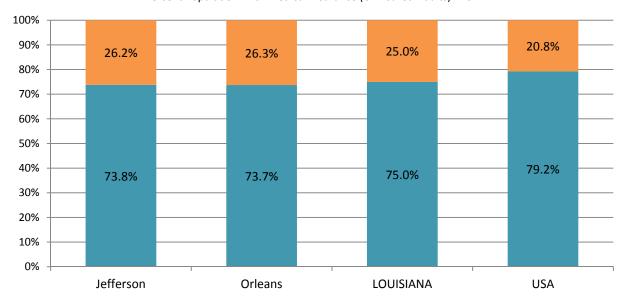
- The population under the age of 18 receives the highest rates of Medicaid assistance across all of the study area parishes.
- Orleans Parish reports the highest rate among the study area parishes of residents aged
 65 and older receiving Medicaid (24.01%).





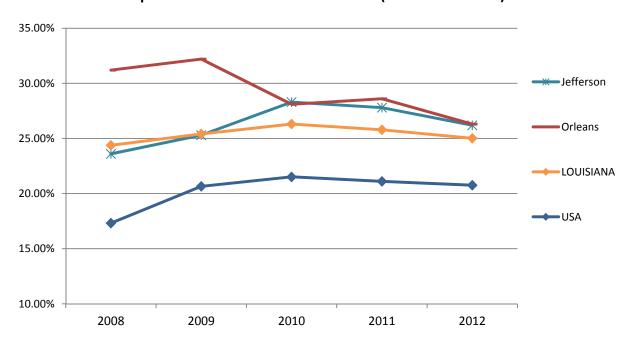
Insurance

- Orleans Parish reports the highest rate of uninsured adults for the study area at 26.3%. Jefferson Parish is a close second at 26.2%. These rates are higher than state (25.0%) and national (20.8%) norms.
 - Percent Population Without Medical Insurance (Uninsured Adults) 2012
 - Percent Population With Medical Insurance (Uninsured Adults) 2012

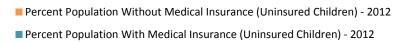


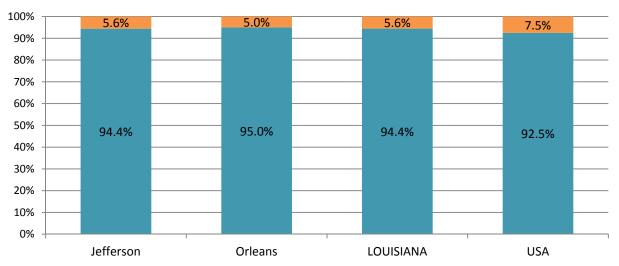
 Orleans Parish has experienced drastic declines in its rates of uninsured adults going from a high of 32.20% in 2009 to its lowest rate in the most recent data year of 2012 reporting 26.30%.

Percent Population without Medical Insurance (Uninsured Adults)



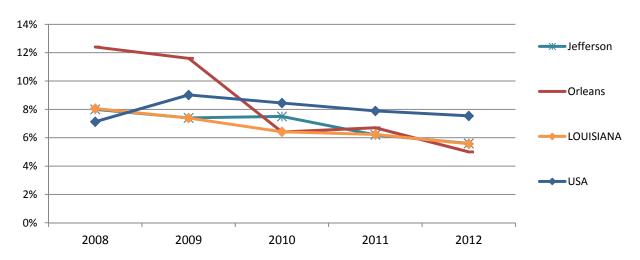
- Jefferson Parish reports the highest rate of uninsured children across the study area parishes at 5.6%.
- Similar to uninsured adults, Orleans Parish reports a high rate of uninsured children for the study area at 5.0%.
- Both parishes report lower rate of uninsured children as compared with the country (7.5%)





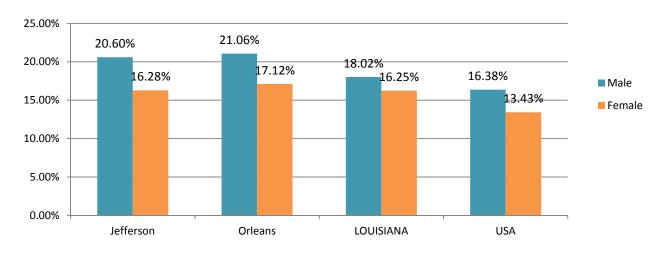
- From 2011 to 2012, all of the study area parishes reported declines in the rates of uninsured children (14 of the 16).
 - ✓ All of the study area parishes and the state fall below the rate for the country (7.54%).

Percent Population without Medical Insurance (Uninsured Children), 2012



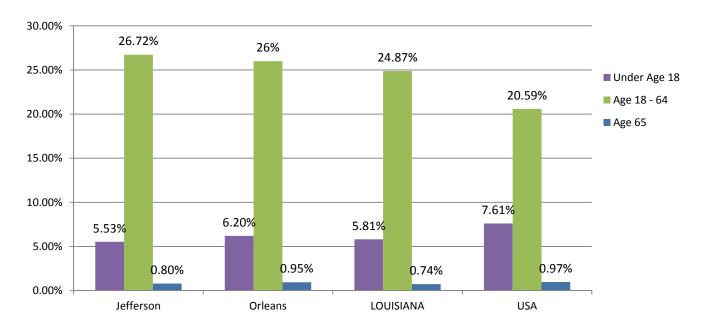
• For most of the study area parishes, men are more likely to be uninsured than women.

Uninsured - Gender, 2009-2013



 Those aged 18 – 64 are more likely to be uninsured as compared with those under 18 or those 65 and older.

Uninsured - Age, 2009-2013



10.00%

5.00%

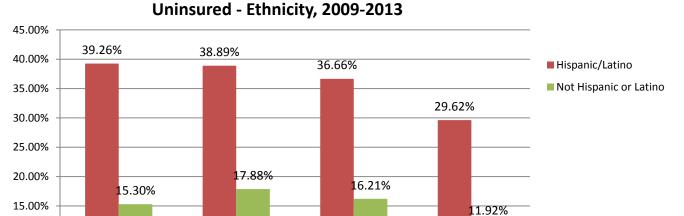
0.00%

Jefferson

Orleans

Jefferson

 Residents of Hispanic or Latino ethnicity are more likely to be uninsured than their counterparts.



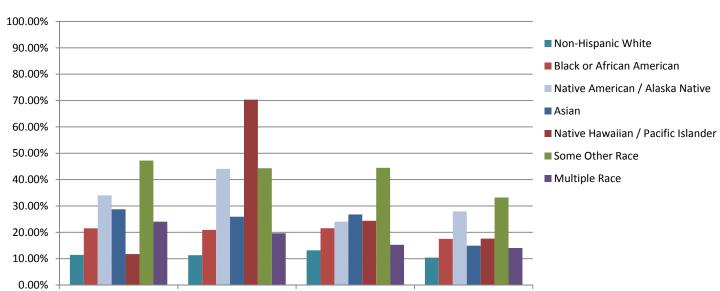
• 70.3% of the Native Hawaiian or Pacific Islander population in Orleans Parish is uninsured.

LOUISIANA

USA

Orleans

• Residents reporting "Some other race", for the majority of the study area parishes, have the highest rates of being uninsured.



LOUISIANA

USA

Uninsured - Race, 2009-2013

Social Support

• Orleans Parish exhibits the highest rate of residents with a lack of social or emotional support at 24.50% of the population; this is higher than state (21.7%) and national (20.68%) norms.

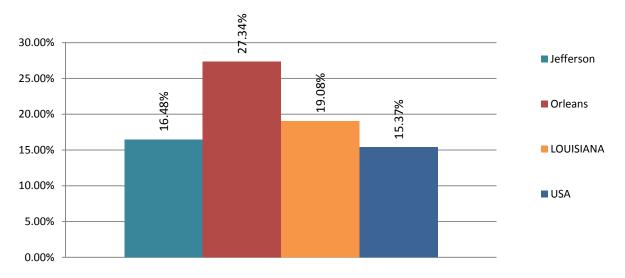
Lack of Social or Emotional Support (Age-Adjusted Percentage),

Poverty

18.00%

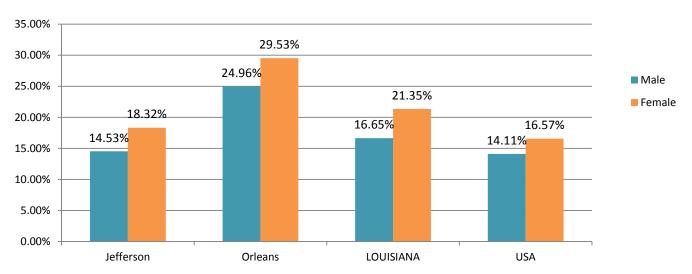
• Orleans Parish shows the highest rate of population that is living below the federal poverty level (100% FPL) at 27.34% of the population; this rate is higher than state (19.08%) and national (15.37%) norms.





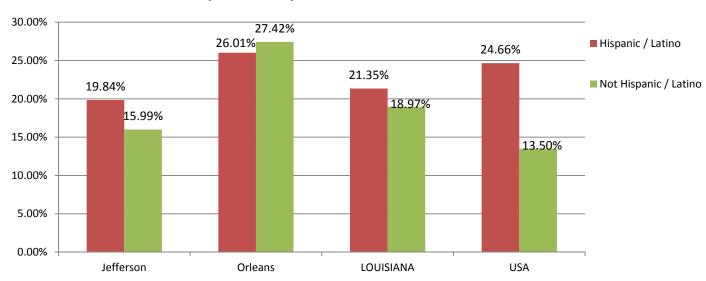
 Across all of the study area regions, women are more likely than men to be living in poverty. • 29.53% of female residents of Orleans Parish are living in poverty (the highest rate across the study area).



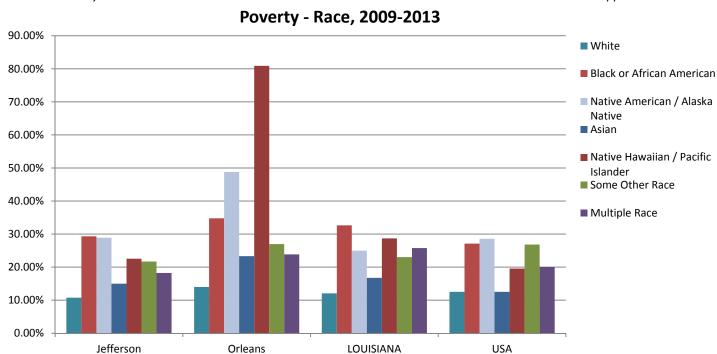


- In general, the Hispanic/Latino population of the study area is living in poverty at higher rates than their counterparts (Orleans Parish is the exception).
- In Orleans Parish, 26.01% of the Hispanic/Latino population is living below the federal poverty level (the highest for the study area).

Poverty - Ethnicity, 2009-2013

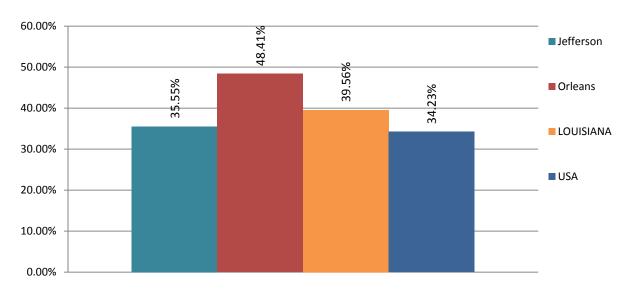


• The Native Hawaiian or Pacific Islander populations of Orleans Parish experience some of the highest rates of living in poverty as compared with the other study area parishes/counties (80.89%).



• For populations living below 100% of the federal poverty level, Orleans reported the highest rate (seen above). For populations living below 200% of the federal poverty level, this is consistent; Orleans Parish reports the highest rate at 48.41%.

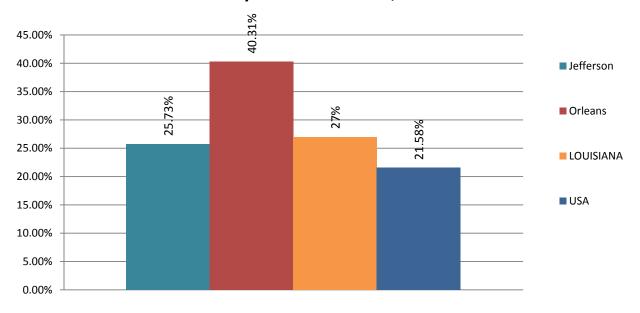
Percent Population with Income at or Below 200% FPL, 2009-2013



Children in Poverty

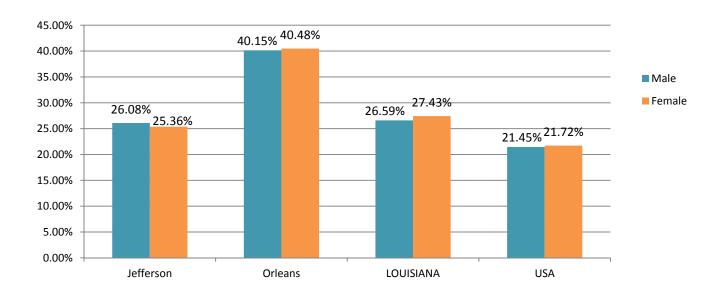
• More than 40% of the children and adolescents (under 18) in Orleans Parish are living in poverty (below 100% FPL).

Children in Poverty - Below 100% FPL, 2009-2013



• Male and female children tend to live in poverty at similar rates in the study area.

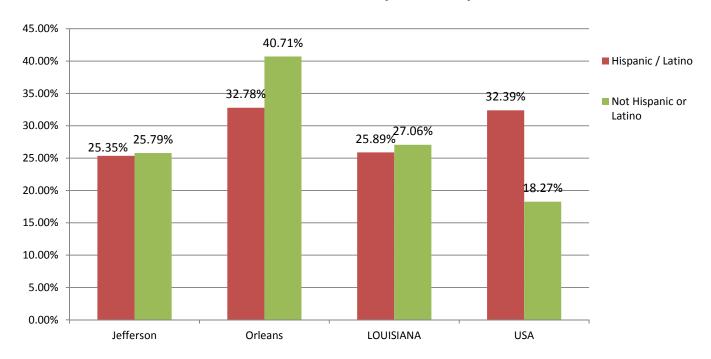
Children in Poverty - Gender, 2009-2013



• Similar to gender, the ethnicity of a child varies in whether or not it is related to living in poverty or not. For adults, the Hispanic/Latino population is more likely to live in

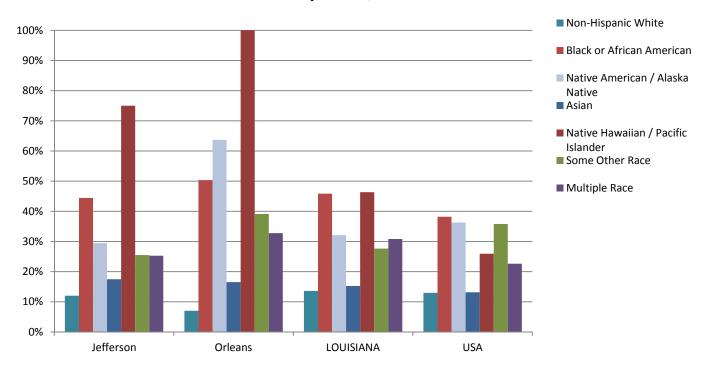
- poverty than their counterparts; however, for children, a both parishes in the study area report higher rates of poverty in the Non-Hispanic population.
- Orleans Parish reports the highest rate of Not Hispanic/Latino children living in poverty at 40.71%.

Children in Poverty - Ethnicity, 2009-2013



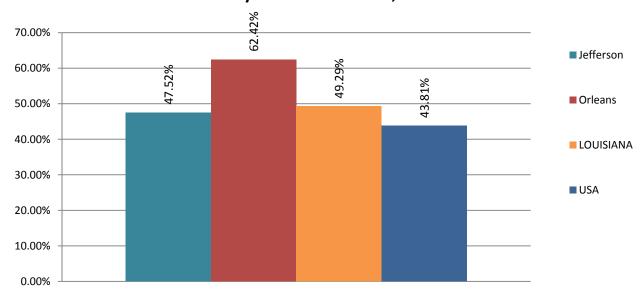
- Within the study area the Native Hawaiian or Pacific Islander population in Orleans
 Parish reports 100% of their population is living in poverty.
- The Native Hawaiian / Pacific Islander, Native American / Alaska Native populations, and the African-American / Black population sees some of the highest rates of poverty across the study area.

Children in Poverty - Race, 2009-2013



• Similar to children living in poverty below the 100% FPL, Orleans Parish reports the highest rate of children living below 200% of the federal poverty level as well (62.42%).

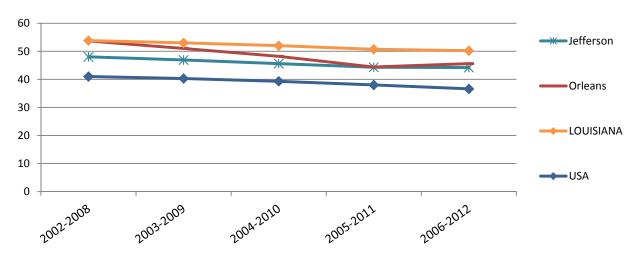




Teen Birth Rate

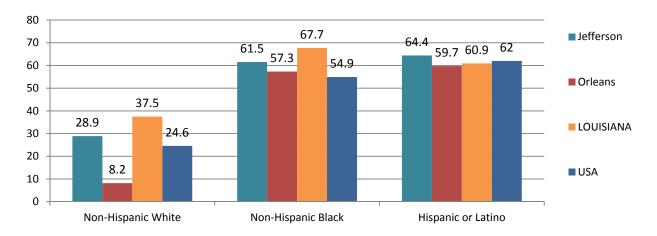
- In general, the study area has seen steady declines in the rates of births to teen mothers (aged 15-19).
 - ✓ Orleans Parish reported slight rises in the teen birth rates from the 2005-2011 5-year estimate census to the 2006-2012 5-year estimate census.

Teen Birth Rate (Age 15-19, per 1,000 population)



- Jefferson Parish reports the highest teen birth rate among Non-Hispanic White girls (28.9 per 1,000 pop.).
- Jefferson Parish reports the highest teen birth rate among Non-Hispanic Black girls (61.5 per 1,000 pop.).
- Jefferson Parish reports the highest teen birth rate among Hispanic/Latino girls (64.4 per 1,000 pop.).

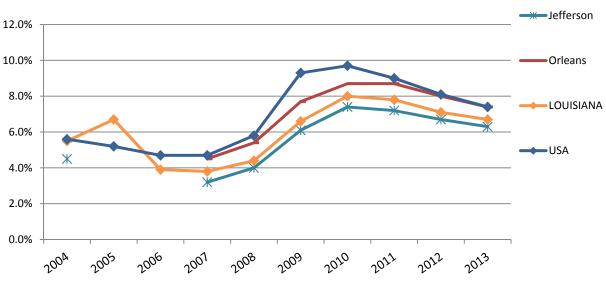
Teen Birth Rate (Age 15-19, per 1,000 population) - By Race/Ethnicity, 2006-2012



Unemployment Rate

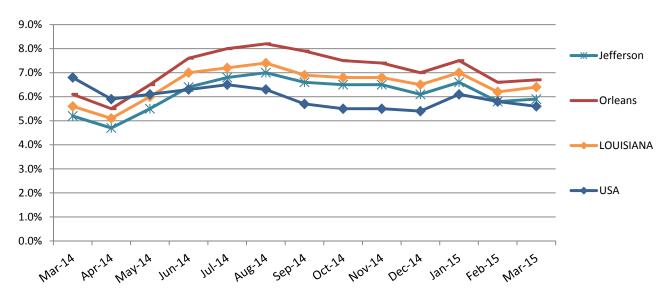
• In 2013, Jefferson Parish reported the lowest unemployment rates for the study area at 6.7%.





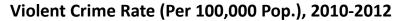
• For the most current reported data, Orleans Parish reported the highest unemployment rates at 6.4% (LA = 6.4%, USA = 5.6%).

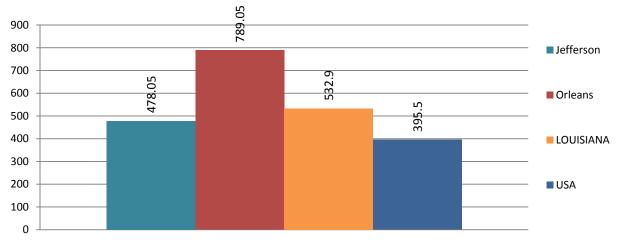
Unemployment Rate by Month



Violent Crime

• Orleans Parish reports the highest violent crime rate across the study area counties at 789.05 per 100,000 population; this rate is higher than state (532.9) and national (395.5) rates.



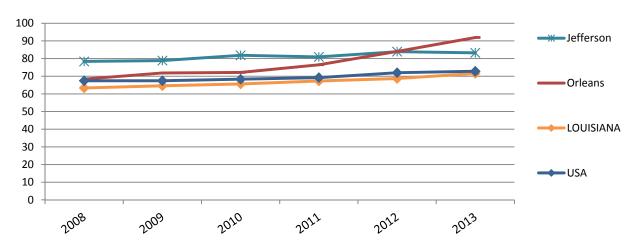


Physical Environment

Fast Food

• In 2013, Orleans Parish reported the highest rate of fast food restaurants per population at 91.91 per 100,000 pop.; Jefferson Parish follows at 83.23 per pop.; these rates are higher than state (71.56) and national (72.74) norms.

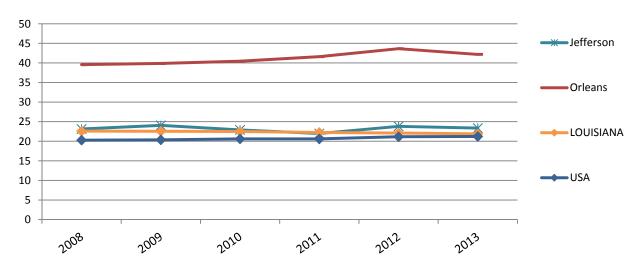
Fast Food Establishments, Rate per 100,000 population



Grocery Stores

• In 2013, Orleans Parish reported the highest rate of grocery stores per population at 42.17 per 100,000 pop.; Jefferson Parish follows at 23.35 per 100,000 pop.; both are higher than state (21.88) and national (21.2) norms.

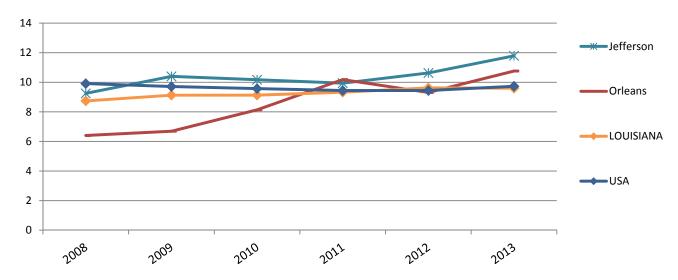
Grocery Store Establishments, Rate per 100,000 population



Recreation and Fitness Facilities

 Both Jefferson and Orleans parishes report a high rate of recreation and fitness facilities at 11.79 and 10.76 per 100,000 pop.; both are higher than state (9.6) and national (9.72) norms.

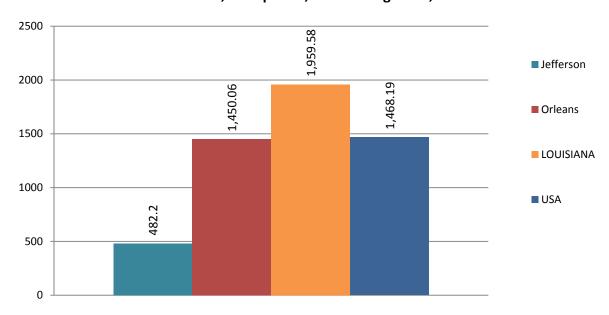
Recreation and Fitness Facility Access, Establishment Rate per 100,000 population



Housing

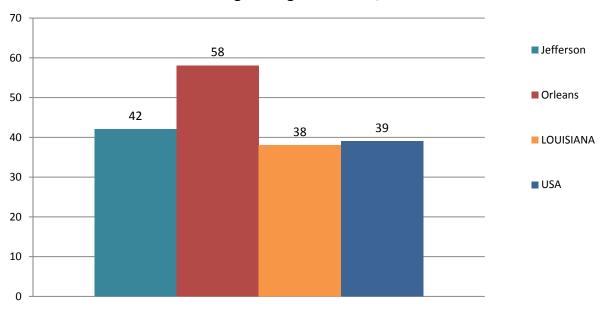
- All of the study area parishes have lower rates of HUD-Assisted housing units per 10,000 units.
- Orleans Parish reports the highest rate for the study area at 1,450.06 per 10,000 units.
- Jefferson Parish reports the lowest rate of HUD-Assisted housing units at 482.2 per 10,000 units.

HUD-Assisted Units, Rate per 10,000 Housing Units, 2013



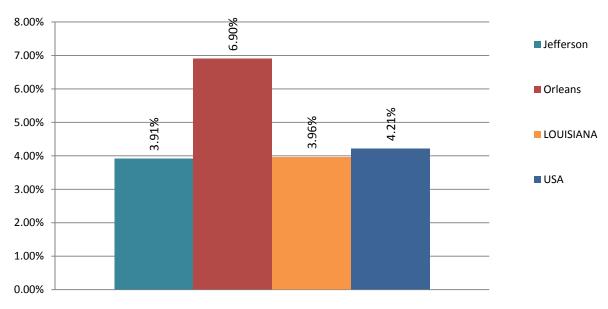
- Housing Unit Age (below) This indicator reports, for a given geographic area, the median year in which all housing units (vacant and occupied) were first constructed.
- Orleans Parish has the highest median housing age at 58 years old.

Housing Unit Age - Years Old, 2013



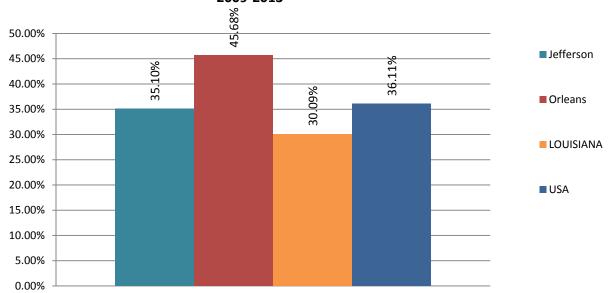
• Orleans Parish reports the highest rate of overcrowded housing at 6.9%; this is higher than state (3.96%) and national (4.21%) norms.



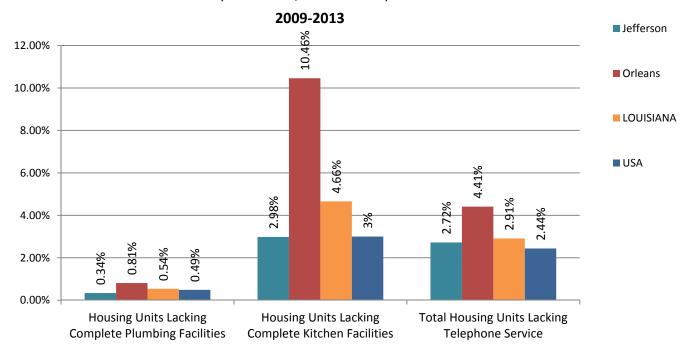


• Orleans Parish reports the highest rate, for the study area, of housing units with substandard conditions (45.68%). The state rate is 30.09% and the national rate is 36.11%.

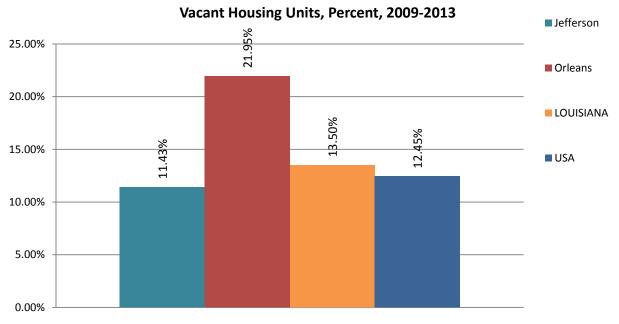
Percent Occupied Housing Units with One or More Substandard Conditions 2009-2013



- Orleans Parish reports the highest rate of housing units lacking complete plumbing facilities at 0.81% (LA = 0.54%, USA = 0.49%).
- Orleans Parish reports the highest rate of housing units lacking complete kitchen facilities at 10.46% (LA = 4.66%, USA = 3%).
- Orleans Parish reports the highest rate, by far, of housing units lacking telephone facilities at 4.41% (LA = 2.91%, USA = 2.44%).

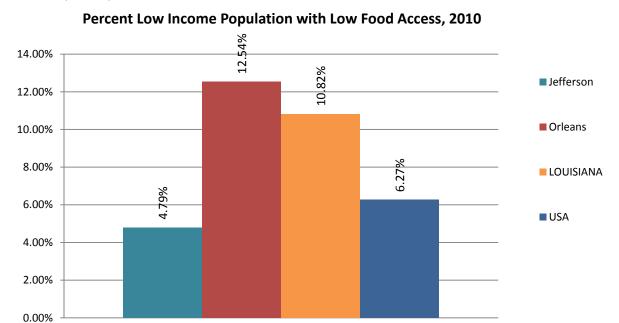


• Orleans Parish reports the highest rate of vacant housing for the study area at 21.95%; this is higher than state (13.5%) and national (12.45%) norms.



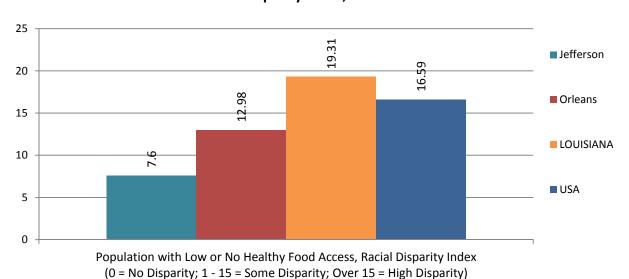
Low Food Access

• The low-income populations of Orleans Parish experiences the highest rates of low food access (12.54%). This rate is higher than the rates seen for the state (10.82%) and nation (6.27%).



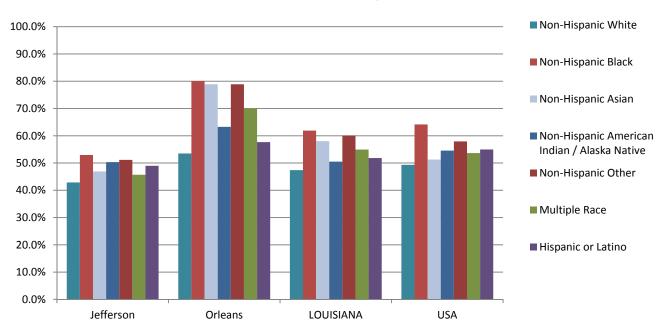
• Orleans Parish experiences the highest rate of population with low or no healthy food access; this parish has a disparity index of 12.98 compared to 19.31 for the State of Louisiana and a national rate of 16.59.

Population with Low or No Healthy Food Access, Racial Disparity Index, 2010

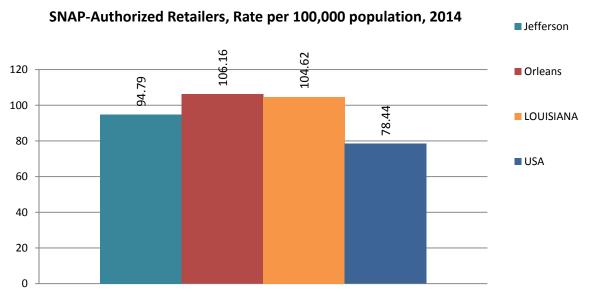


• Within the parish of Orleans, the Non-Hispanic Black population experiences the highest rate of low food access (80.1%) followed by the Non-Hispanic Asian population (78.9%), and the Non-Hispanic Other population (78.9%).

Low Food Access - Race, 2010

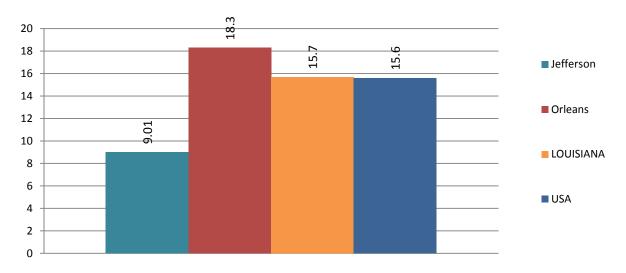


- Orleans Parish has the highest rate of SNAP-Authorized retailers for the study area at 106.16 per 100,000 population.
- Jefferson Parish reports the fewest SNAP-Authorized retailers for the study area at only 94.79 per 100,000 population.

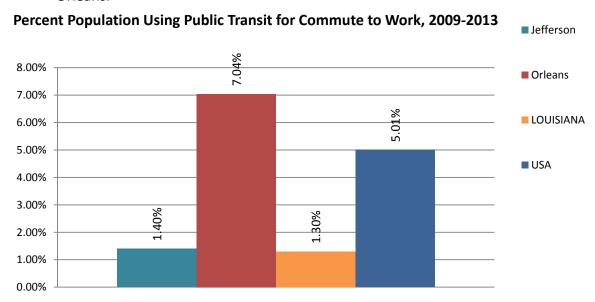


 Orleans Parish has the highest rate of WIC-Authorized retailers for the study area at 18.3 per 100,000 population; the national rate being 15.6 per 100,000 pop • Jefferson Parish reports the fewest WIC-Authorized retailers for the study area with 9.01 per 100,000 population.





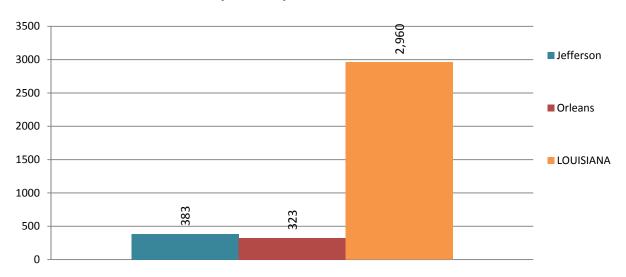
 Orleans Parish reports the highest rate of residents using public transportation to commute to work (7.06%); higher than state (1.30%) and national (5.01%) norms. This can be attributed to the urban nature of Orleans Parish including the City of New Orleans.



Primary Care Physicians

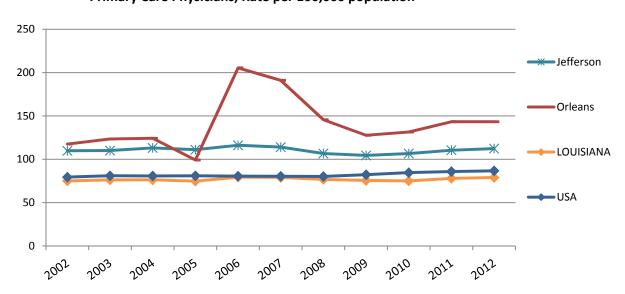
- Jefferson Parish reports the highest number of physicians across the study area parishes/counties at 383.
- Orleans Parish report the fewest physicians with 323.

Primary Care Physicians, 2012



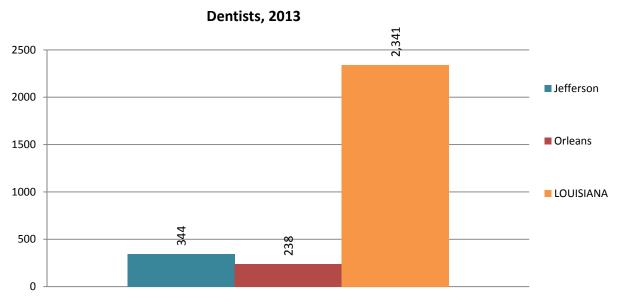
- Orleans Parish has the highest primary care physician (PCP) rate per 100,000 population at 143.26 in 2012.
- Jefferson Parish reports the lowest rate of PCPs per 100,000 population at only 112.3 in 2012.

Primary Care Physicians, Rate per 100,000 population



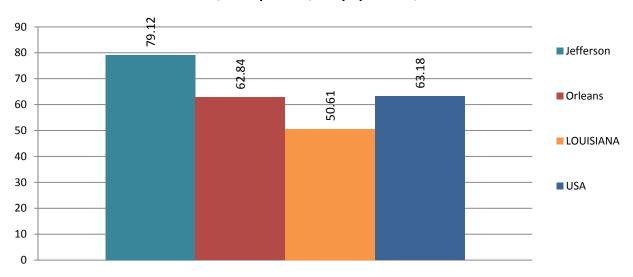
Dentists

- Jefferson Parish reports the highest number of dentists across the study area parishes at 344.
- Orleans Parish reports the fewest dentists with only 238.



- Jefferson Parish has the highest dentist rate per 100,000 population at 79.12 in 2013.
- The State of Louisiana reports the lowest rate of dentists per 100,000 population for the study area at only 50.61 in 2013.

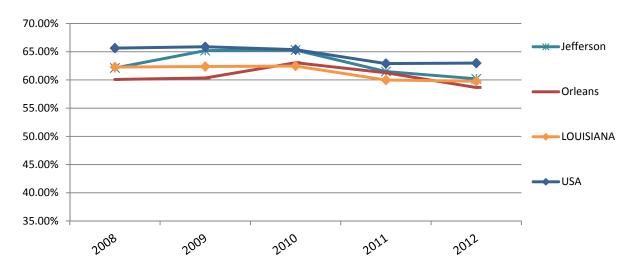
Dentists, Rate per 100,000 population, 2013



<u> Mammogram – Medicare Enrollees</u>

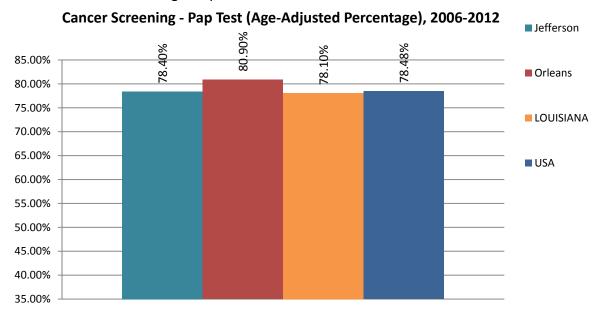
- Both Jefferson and Orleans parishes in the study area have seen a decline in the rates of women with Medicare receiving a mammogram.
- Orleans Parish reports the lowest rate for the study area at 59.76%; about half of the female Medicare population in Orleans did not have a mammogram in the past 2 years.

Female Medicare Enrollees with Mammogram in Past 2 years



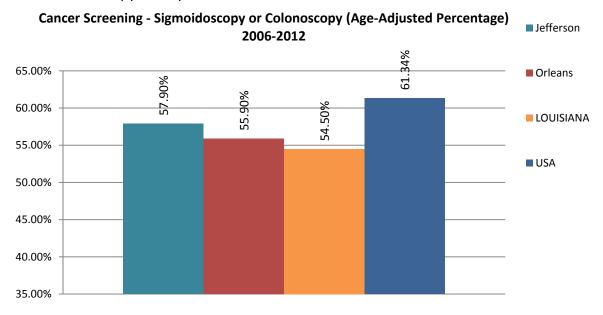
Cancer Screening - Pap Test

- The State of Louisiana reports 78.1% of their populations as having received a Pap Test;
 this rate is slightly lower than the national rate of 78.48%.
- Jefferson Parish reports the lowest rate for the study area of female residents aged 18 and older receiving a Pap Test at 78.40%.



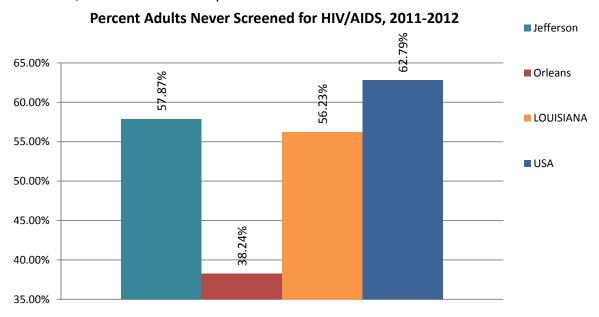
Cancer Screening - Sigmoidoscopy or Colonoscopy

- 61.34% of the national age-appropriate population (aged 50 and older) receives a sigmoidoscopy or colonoscopy; across the State of Louisiana only 54.5% receive this screening.
- Orleans Parish reports the lowest rate of residents receiving a sigmoidoscopy or colonoscopy at only 55.90%.



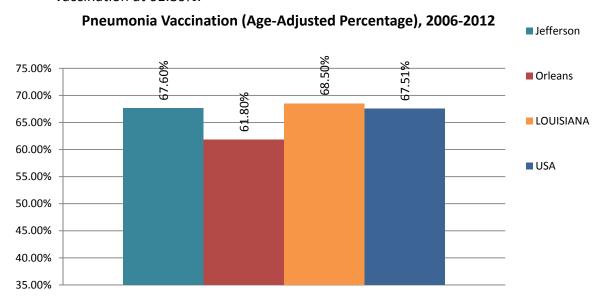
HIV/AIDS

- The national rate of the population having never been tested for HIV/AIDS is 62.79%; in Louisiana 56.23% of the population has never been tested.
- Jefferson Parish reports the highest rate of residents having never been tested for HIV/AIDS across the study area at 57.87%.



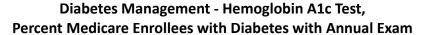
Pneumonia Vaccine

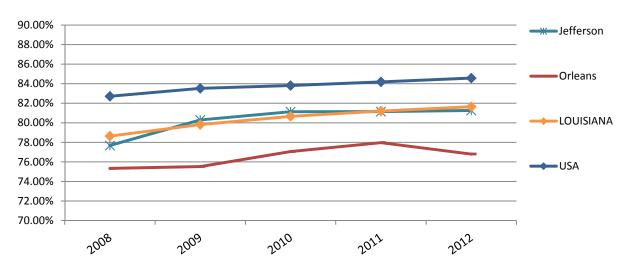
• Orleans Parish reports the lowest rate of residents having received the pneumonia vaccination at 61.80%.



Diabetes Screening

 The national rate of diabetes screening in 2012 was 84.57% of the diabetic Medicare population. Both of the study area parishes report rates lower than this, with the lowest being 76.8% for Orleans Parish.





High Blood Pressure

- All of the parishes in the study area report lower rates of adult residents with high blood pressure who are not taking their medication than the national average; the national rate being 21.74%.
- Jefferson Parish reports the highest rate of adult residents with high blood pressure not taking their medication for the study area at 20.33%.

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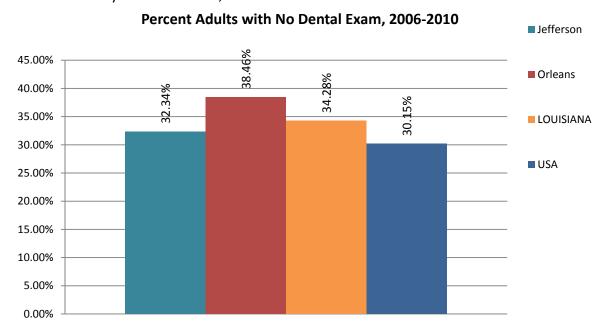
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High Blood Pressure, Percent Adults Not Taking Medication, 2006-2010

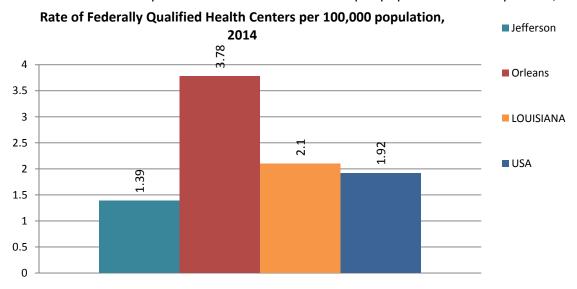
Dental Exam

• Orleans Parish reports the highest rates of adults who have not had a dental exam for the study area at 38.46%; the national rate is 30.15%.



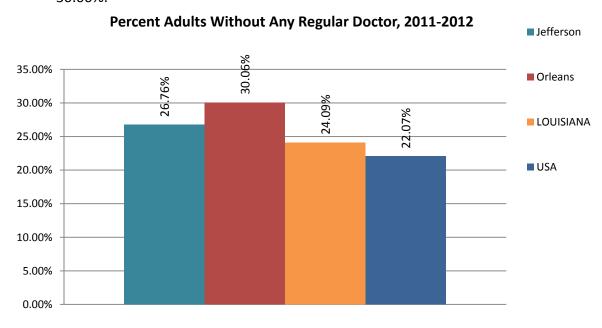
Federally Qualified Health Centers (FQHCs)

- Orleans Parish has a very high rate of federally qualified health centers per 100,000 population at 3.78 (more than the national rate of 1.92).
- Jefferson Parish reports the lowest rate of FQHCs per population at 1.39 per 100,000.



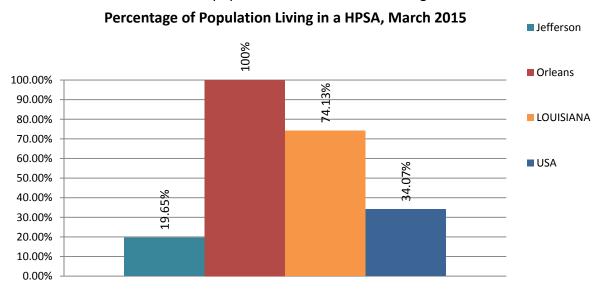
Regular Doctor

- Across the country, 22.07% of residents report not having a regular doctor (77.93% have a regular doctor); in Louisiana the rate is 24.09%.
- Orleans Parish reports the highest rate of residents who do not have a regular doctor at 30.06%.



Population Living in an HPSA (Health Professional Shortage Area)

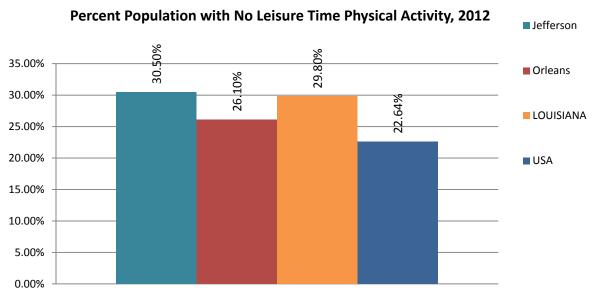
• Orleans Parish is a health care professional shortage area (HPSA) designated parish; therefore 100% of their populations live in an HPSA designated area.



Health Behaviors

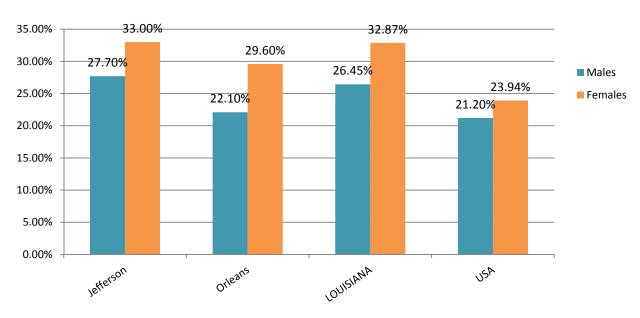
Leisure Time Physical Activity

- Jefferson Parish reports the highest rate of population with no leisure time activity (30.50%) for the study area; higher than state (29.8%) and national (22.64%) norms.
- All of the parishes of the study area report higher rates than the national norms for population who do not partake in leisure time physical activity.

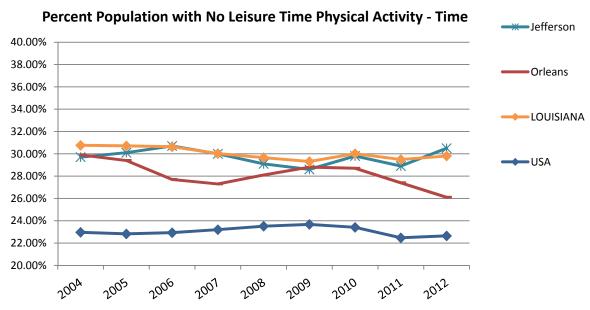


 Men consistently report lower rates of not partaking in leisure time physical activity than women; this may be a reporting difference or that women do not actually partake in leisure time physical activity as men.

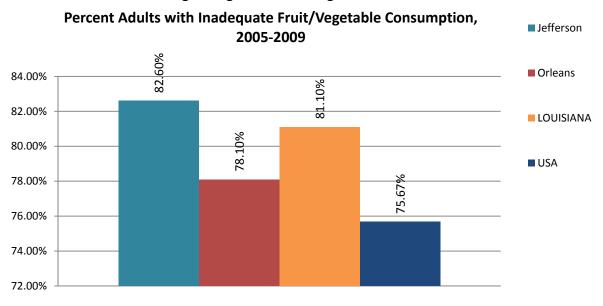




• Jefferson Parish, currently with the highest rate of population not partaking in leisure time physical activity, has seen a somewhat steady rise in this rate since 2011.

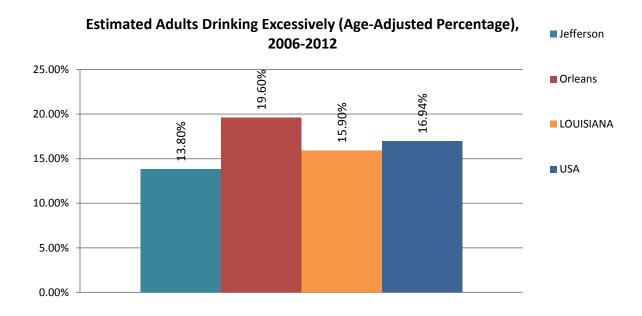


• All of the parishes in the study area report higher rates than the national rate (75.6%) for adults not eating enough fruits and vegetables.

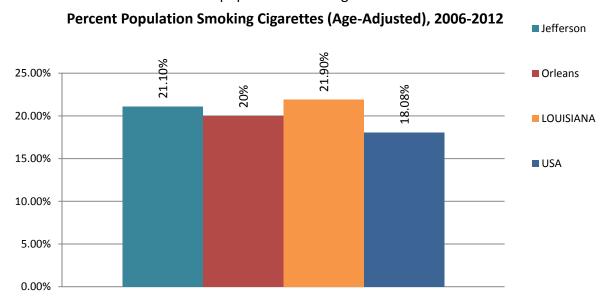


Excessive Drinking

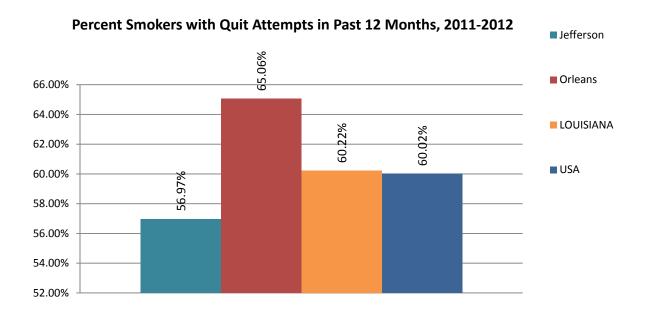
 The national rate of adults drinking excessively is 16.94%; Orleans Parish reports higher rates of adults drinking excessively at 19.60%.



• Jefferson Parish reports the highest rate of adults smoking cigarettes across the study area with 21.10% of the population smoking.

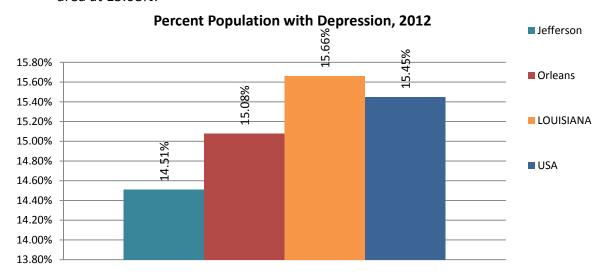


Orleans Parish reports the highest rate of adults trying to quit smoking in the past 12 months at 65.06%; this would be a prime population to target smoking cessation programs as they have already expressed interest in trying to stop smoking.



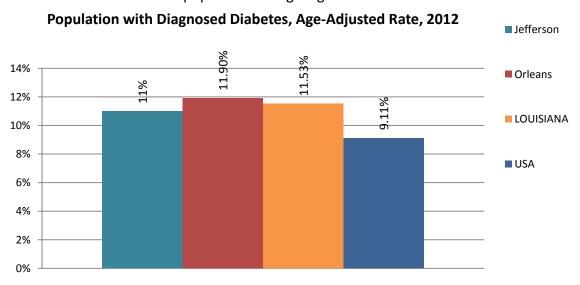
Depression

- The State of Louisiana reports a higher rate of residents with depression (15.66%) than the country (15.45%).
- Orleans Parish reports the highest rate of residents with depression within the study area at 15.08%.



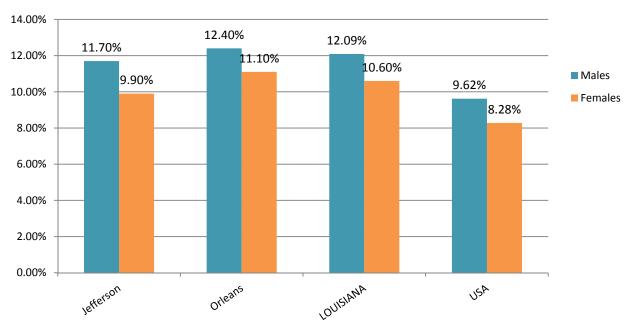
Diagnosed Diabetes

- Orleans Parish reports the highest rate of residents with diagnosed diabetes (11.90%).
- All of the study area parishes as well as the overall state rates for Louisiana are higher than national rates for population being diagnosed with diabetes.



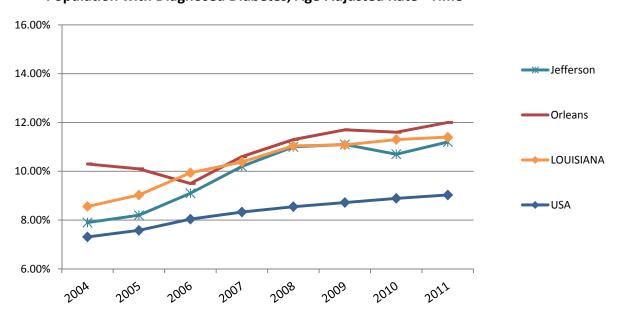
- Men have higher rates of being diagnosed with diabetes than women for the study area.
- 12.40% of the Orleans Parish male population reports being diagnosed with diabetes.



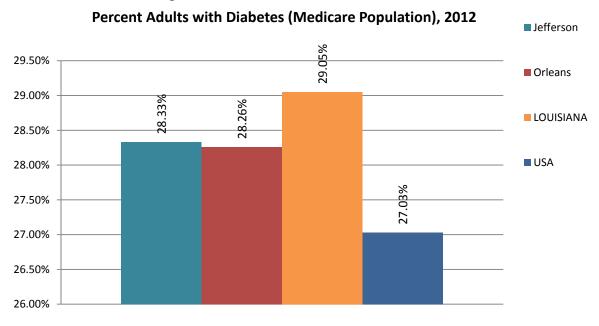


 The rate of diagnosed diabetes cases has seen steady and marked rises from 2004 to 2011 for the study area parishes.

Population with Diagnosed Diabetes, Age-Adjusted Rate - Time

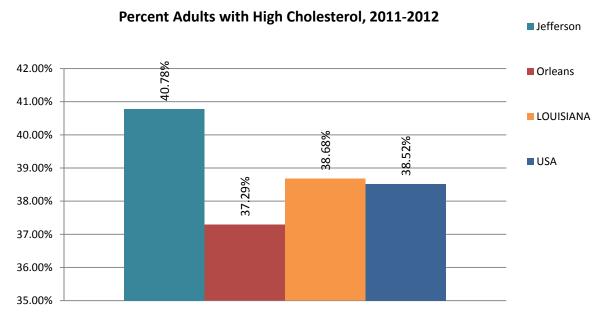


• Looking specifically at the Medicare population, Jefferson Parish reports the highest rate of diagnosed diabetes at 28.33%, followed closely by Orleans Parish at 28.26%; the national rate being 27.03%.

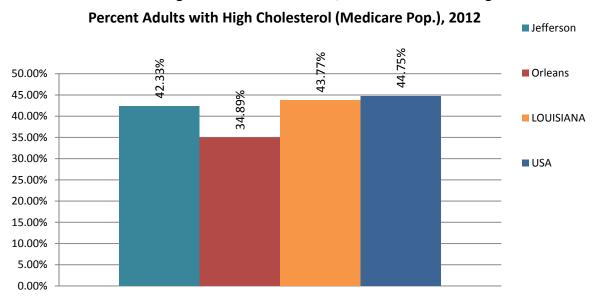


High Cholesterol

- Jefferson Parish report higher rates of residents with high cholesterol than the national average of 38.52%.
- Orleans Parish reports the lowest rate of residents with high cholesterol at 37.29%; this is lower than the state (38.68%) and country (38.52%).

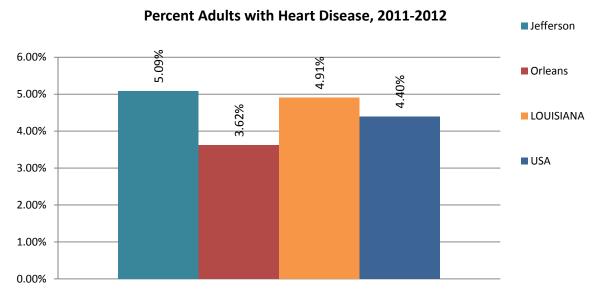


• Looking specifically at the Medicare population, Jefferson Parish reports the highest rate of residents with high cholesterol at 42.33%; the national rate being 44.75%.

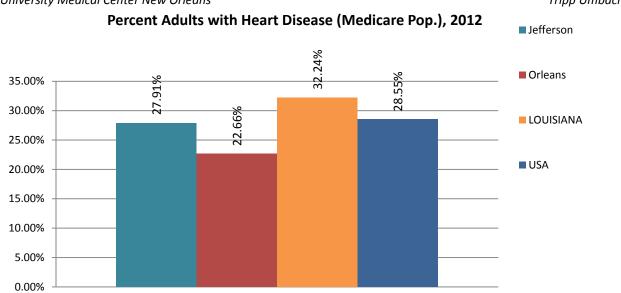


Heart Disease

Jefferson Parish reports the highest rate of residents who have heart disease (5.09%); this rate is higher than the national rate of 4.40%.

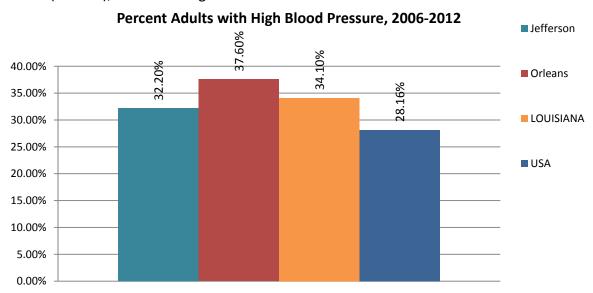


 Looking specifically at the Medicare population, Jefferson Parish reports the highest rate for the study area of residents with heart disease at 27.91%; the national rate being 28.55%.

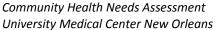


High Blood Pressure

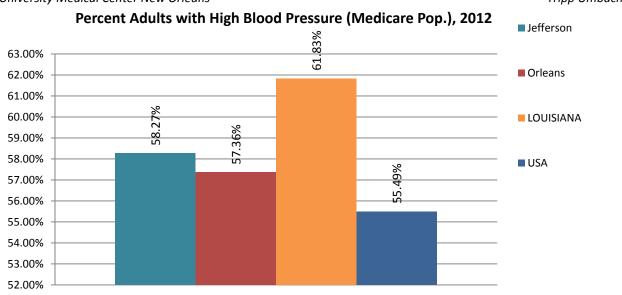
• Orleans Parish reports the highest rate of residents who have high blood pressure (37.60%); this rate is higher than the national rate of 28.16%.



• Looking specifically at the Medicare population, Jefferson Parish reports the highest rate of residents with high blood pressure at 58.2%; the national rate being 55.49%.

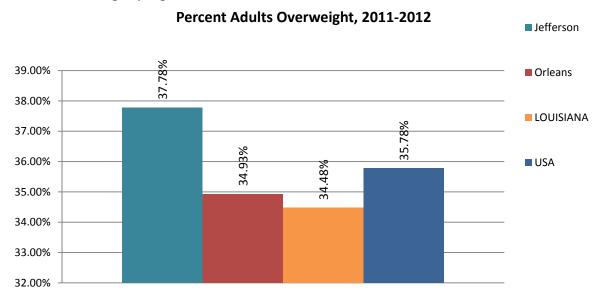






Overweight and Obese

• Jefferson Parish reports the highest rate of residents who are overweight (37.78%); this rate is slightly higher than the national rate of 35.78%.



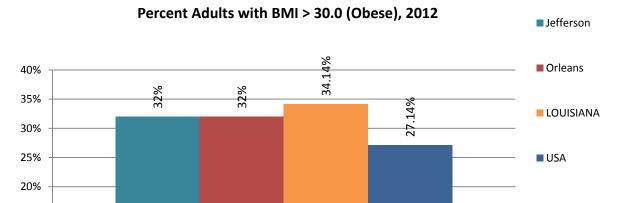
• All of the study area parishes report higher rates for obesity than the nation; the national rate is 27.14%.

15%

10%

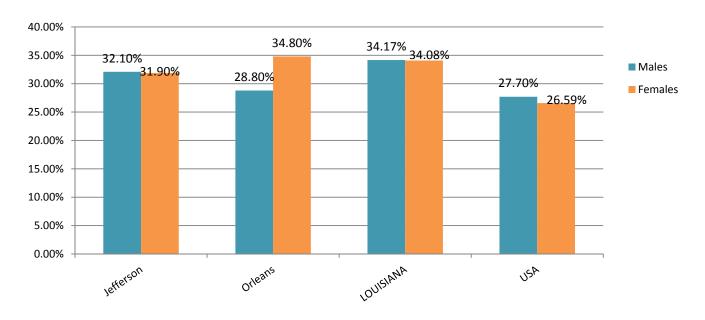
5%

0%

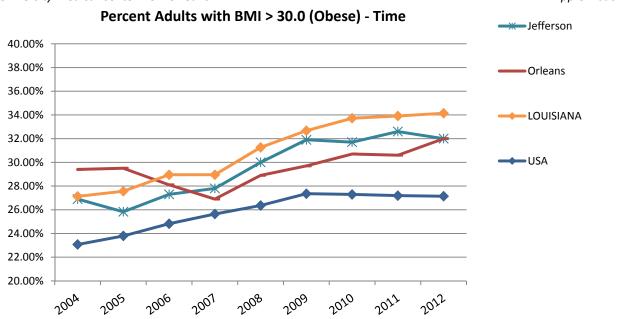


- There are not significant differences in males and females in terms of obesity; for the study area, some parishes see women having higher rates of obesity, for other parishes, men are more likely to be obese.
- On a national level, men are more likely to be obese than women (27.7% vs. 26.59%).

Percent Adults with BMI > 30.0 (Obese) - Gender, 2012

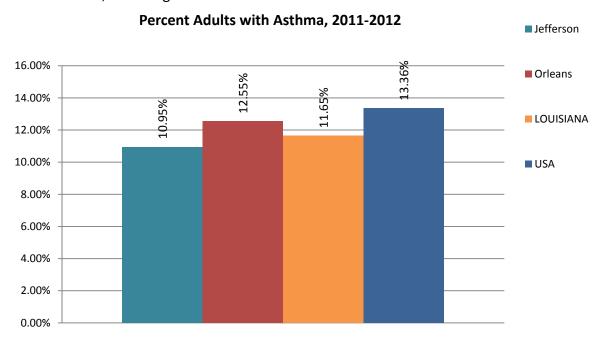


• The rates of obesity in the study area and nationally have seen steady rises over the years. Both of the study area parishes report a rate of 32.00%; this rate is closest to the U.S. rates for obesity (27.14%).



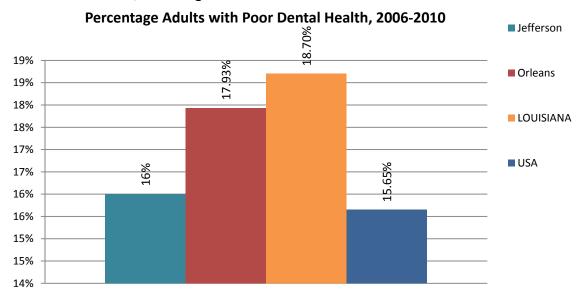
Asthma

• Orleans Parish reports the highest rate of adults with asthma for the study area at 12.55%; this is higher than the national rate of 13.36%.



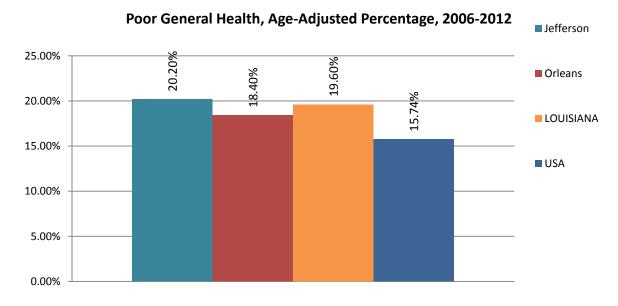
Dental Health

• Orleans Parish reports the highest rate of adults with poor dental health for the study area at 17.93%; this is higher than the national rate of 15.65%.



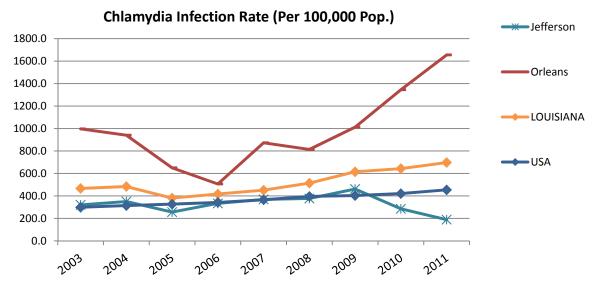
Poor Health

• Jefferson Parish reports the highest rates of poor general health at 20.20%. Both of the study area parishes report higher rates of poor general health than the national rate of 15.74%.



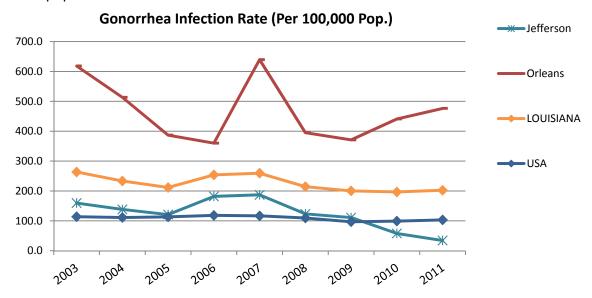
Chlamydia Infection

• Orleans Parish reports a substantially higher rate of chlamydia infection than all of the other study area parishes, state, and country at 1,654.9 per 100,000 population in 2011.



Gonorrhea Infection

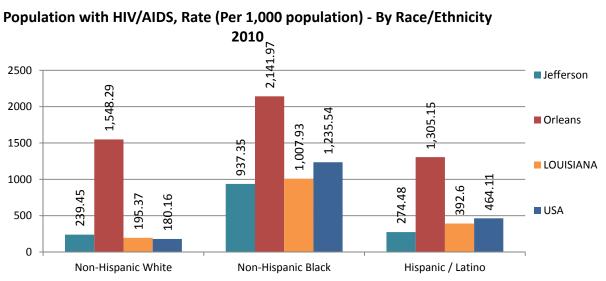
 Similar to chlamydia infection, Orleans Parish reports a substantially higher rate of gonorrhea infection than all of the other study area parishes, state, and country at 476.2 per 100,000 population in 2011. The national chlamydia rate is 103.09 per 100,000 population.



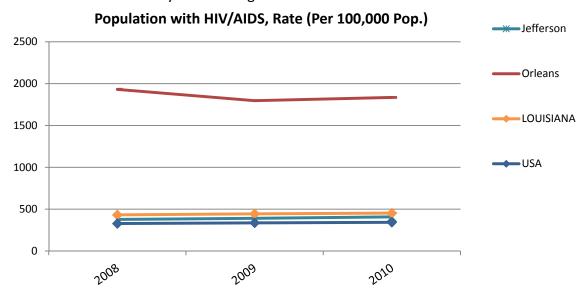
HIV/AIDS

- The Non-Hispanic Black population is the population that sees the highest rates of HIV/AIDS.
- Orleans Parish specifically sees the highest rates of HIV/AIDS for the study area; 2,141.97 per 100,000 Non-Hispanic Black population has HIV/AIDS, 1,548.29 per 100,000 Non-Hispanic White, and 1,305.15 per 100,000 Hispanic/Latino population.

Population with HIV/AIDS, Rate (Per 1,000 population) - By Race/Ethnicity

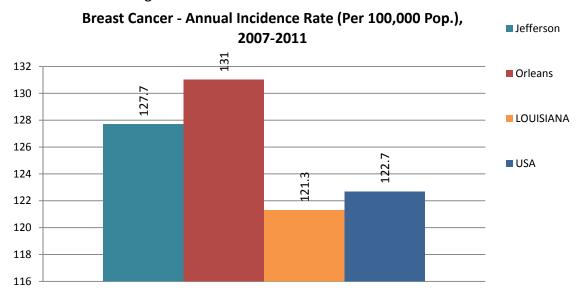


From 2008 to 2010, many of the study area parishes experienced rises or slight declines then larger rises in the HIV/AIDS rates for their parish. Therefore 2010 rates of HIV/AIDS in the MHCNO study area are higher than 2008 rates.

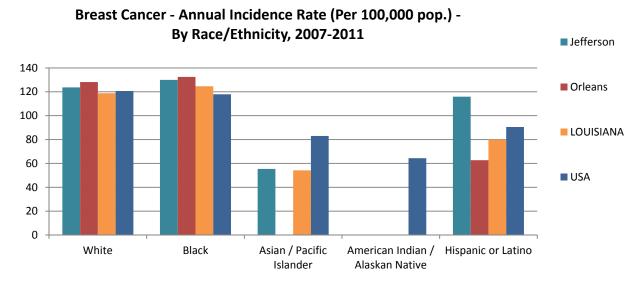


Breast Cancer

- Orleans Parish reports the highest incidence rate of breast cancer for the study area at 131 per 100,000 population; this is higher than the national rate of 122.7 per 100,000 pop.
- The Healthy People 2020 goal is for breast cancer incidence to be less than or equal to 40.9 per 100,000 population; all of the study area parishes and state report rates more than double this goal.

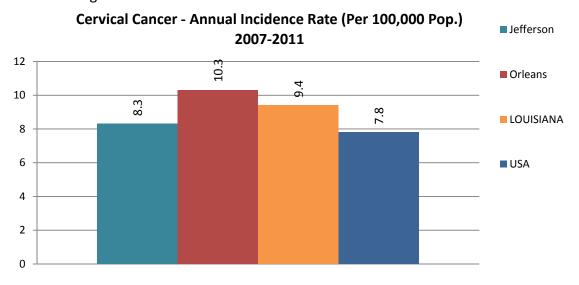


 The African-American / Black population of Orleans Parish reports the highest rate of breast cancer incidence when looking at incidence by race/ethnicity (132.5 per 100,000 pop.).



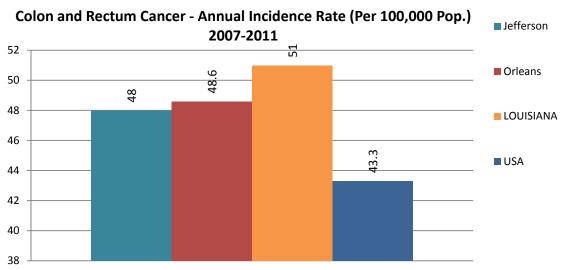
Cervical Cancer

- Orleans Parish reports the highest incidence rate of cervical cancer for the study area at 10.3 per 100,000 population; this is higher than the national rate of 7.8 per 100,000 pop.
- The Healthy People 2020 goal is for cervical cancer incidence to be less than or equal to 7.1 per 100,000 population; all of the study area parishes and state report rates higher than this goal.



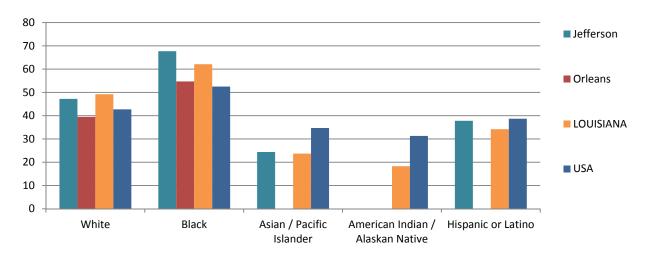
Colon and Rectum Cancer

- Orleans Parish reports the highest incidence rate of colon and rectum cancer for the study area at 48.6 per 100,000 population; this is higher than the national rate of 43.3 per 100,000 pop.
- The Healthy People 2020 goal is for colon and rectum cancer incidence to be less than or equal to 38.7 per 100,000 population; all of the study area parishes and state report rates higher than this goal.



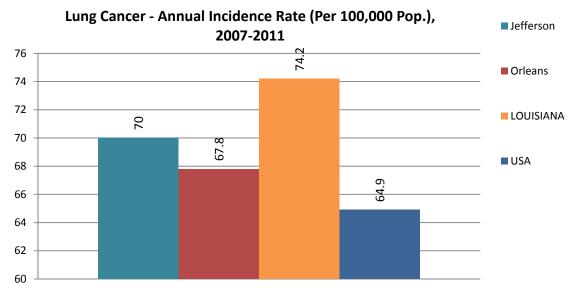
• The African-American / Black population reports higher rates of colon and rectum cancer incidence as compared with other racial groups for the study area, the states, and nationally.

Colon and Rectum Cancer - Annual Incidence Rate (Per 100,000 pop.) -By Race/Ethnicity, 2007-2011



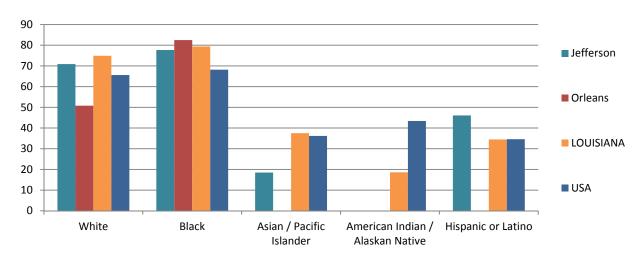
Lung Cancer

• Jefferson Parish reports the highest incidence rate of lung cancer for the study area at 70 per 100,000 population followed closely by Orleans Parish at 67.8; these values are higher than the national rate of 64.9 per 100,000 pop.



 The African-American / Black population in Orleans Parish reports the highest rate of lung cancer incidence when looking at incidence by race/ethnicity (82.5 per 100,000 pop.).

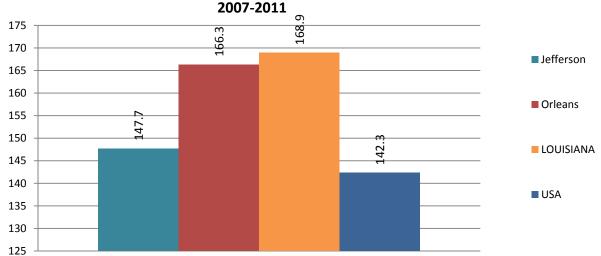
Lung Cancer - Annual Incidence Rate (Per 100,000 pop.) -By Race/Ethnicity, 2007-2011



Prostate Cancer

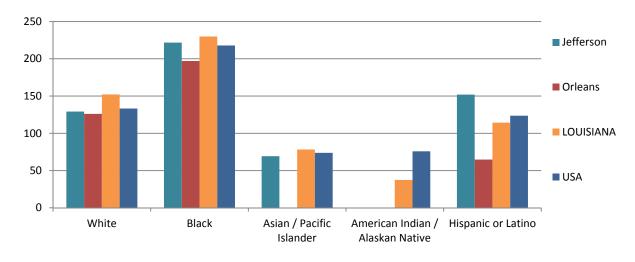
 Orleans Parish reports the highest incidence rate of prostate cancer for the study area at 166.3 per 100,000 population; this values is higher than the national rate of 142.3 per 100,000 pop.

Prostate Cancer - Annual Incidence Rate (Per 100,000 Pop.)



• The African-American / Black population reports higher rates of prostate cancer incidence as compared with other racial groups for the study area, the state, and nationally.

Prostate Cancer - Annual Incidence Rate (Per 100,000 pop.) - By Race/Ethnicity, 2007-2011

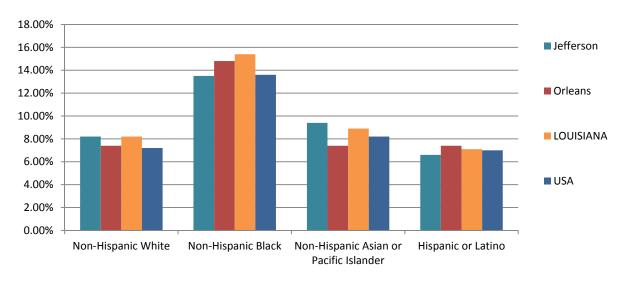


Low Birth Weight

- Orleans Parish reports the highest rate of low-weight births for the study area at 12.4%.
- All of the study area parishes report higher rates of low-weight births than the national rate of 8.2%.
- The Healthy People 2020 goal is for low –weight births to be less than or equal to 7.8%;
 all of the study area parishes and state report rates higher than this goal.

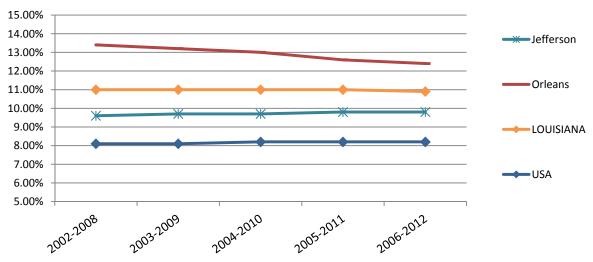
• The Non-Hispanic African-American / Black population sees higher rates of low-weight births as compared with other racial groups for the study area, the state, and nationally.

Low Birth Weight, Percent of Total - By Race/Ethnicity, 2006-2012



• Orleans Parish reports the highest rate of low-weight births in 2006-2012 (12.4%), but this rate has been steadily declining since 2002-2008.

Low Birth Weight, Percent of Total - By Year

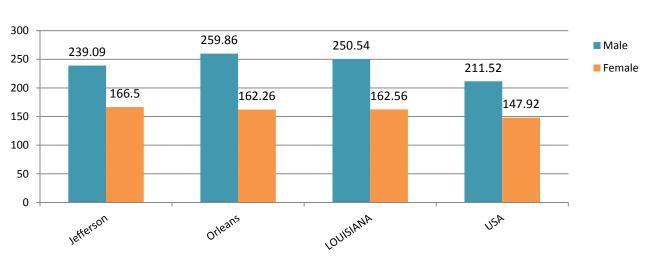


- Orleans Parish reports the highest rate of age-adjusted mortality due to cancer for the study area at 201.24 per 100,000 population.
- All of the study area parishes report higher rates of mortality due to cancer than the national rate of 174.08 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to cancer to be less than or equal to 160.6 per 100,000 population; all of the study area parishes and state report rates higher than this goal.

2007-2011 24 201. Jefferson 198. 205 195. 200 195 Orleans 190 185 LOUISIANA 180 175 USA 170 165 160

Mortality - Cancer - Age-Adjusted Death Rate, (Per 100,000 Pop.),

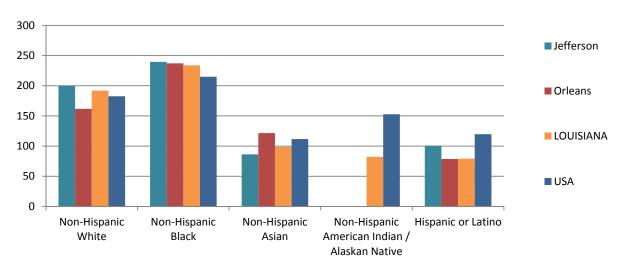
Across the study area, all of the parishes, state, and nationally; men have higher mortality rates due to cancer than women.



Mortality - Cancer - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Gender, 2007-2011

The Non-Hispanic Black population of Jefferson Parish reports the highest rate of mortality due to cancer for the study area with 239.51 per 100,000 population.

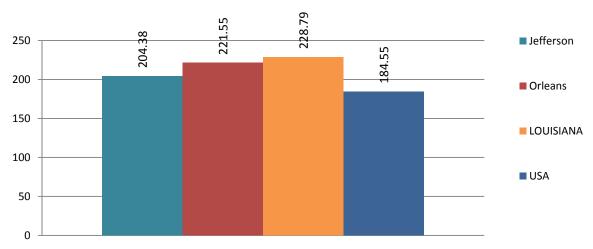
Mortality - Cancer - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Race/Ethnicity, 2007-2011



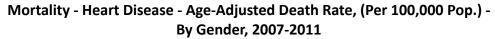
Mortality – Heart Disease

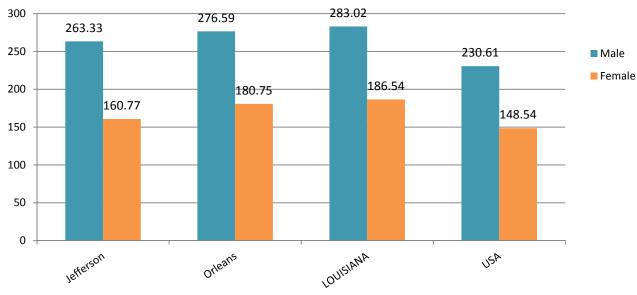
• Orleans Parish reports the highest rate of age-adjusted mortality due to heart disease for the study area at 221.55 per 100,000 population.

Mortality - Heart Disease - Age-Adjusted Death Rate, (Per 100,000 Pop.) 2007-2011



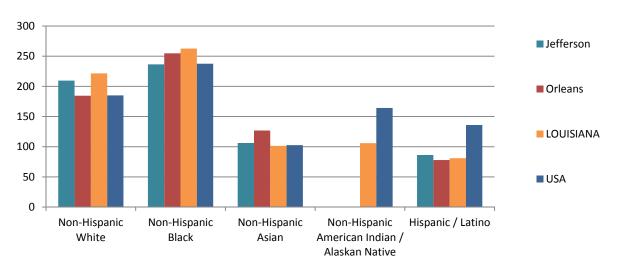
• On a national level and for all of the study area parishes, men are more likely to die as a result of heart disease than women.





• The African-American / Black population of Orleans Parish reports the highest rate of death due to heart disease across the study area at 254.83 per 100,000 population.

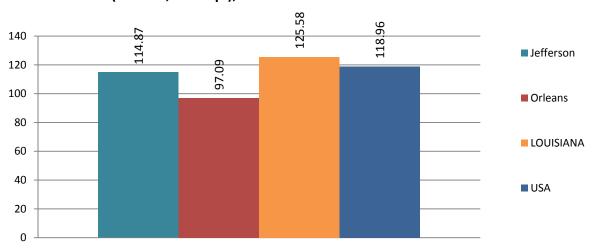
Mortality - Heart Disease - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Race/Ethnicity, 2007-2011



Mortality – Ischemic Heart Disease

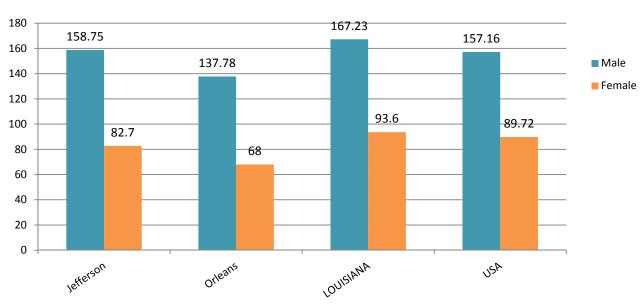
- Jefferson Parish reports the highest rate of age-adjusted mortality due to ischemic heart disease for the study area at 114.87 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to ischemic heart disease to be less than or equal to 103.4 per 100,000 population; Orleans Parish reports rates already lower than this HP2020 Goal.

Mortality - Ischemic Heart Disease - Age-Adjusted Death Rate, (Per 100,000 Pop.), 2007-2011



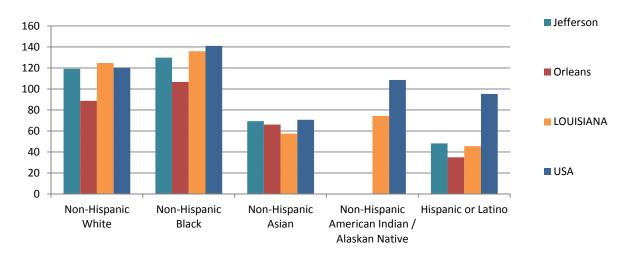
 On a national level and for all of the study area parishes, men are more likely to die as a result of ischemic heart disease than women.

Mortality - Ischemic Heart Disease - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Gender, 2007-2011



• Non-Hispanic Black residents of Jefferson Parish report the highest rate of death due to ischemic heart disease for the study area at 129.79 per 100,000 population.

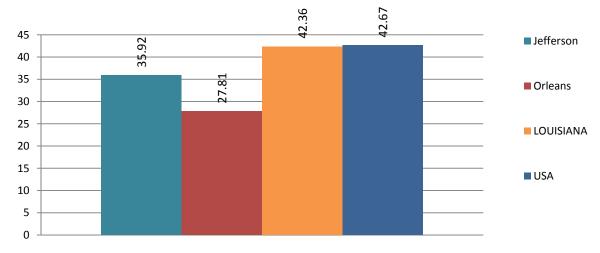
Mortality - Ischemic Heart Disease - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Race/Ethnicity, 2007-2011



Mortality – Lung Disease

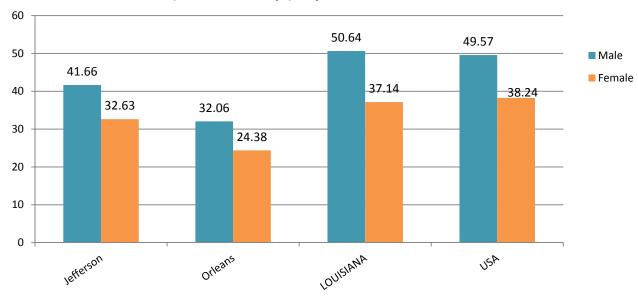
 Jefferson Parish reports the highest rate of mortality due to lung disease for the study area at 35.92 per 100,000 population; this is lower than the national rate of 42.67.

Mortality - Lung Disease - Age-Adjusted Death Rate, (Per 100,000 Pop.), 2007-2011



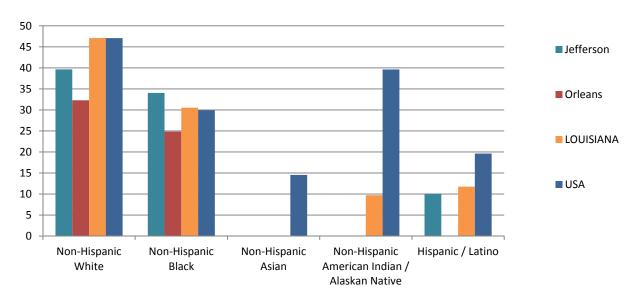
 On a national level and for all of the study area parishes, men are more likely to die as a result of lung disease than women.

Mortality - Lung Disease - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Gender, 2007-2011



 The Non-Hispanic White population of Jefferson Parish reports the highest rate of death as a result of lung disease for the study area at 39.63 per 100,000 population.

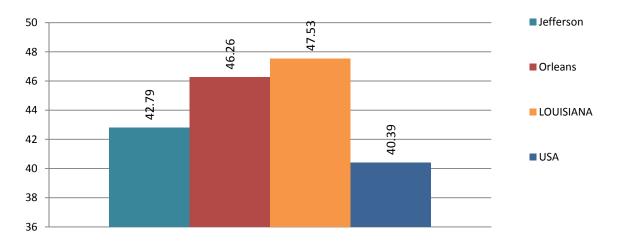
Mortality - Lung Disease - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Race/Ethnicity, 2007-2011



Mortality – Stroke

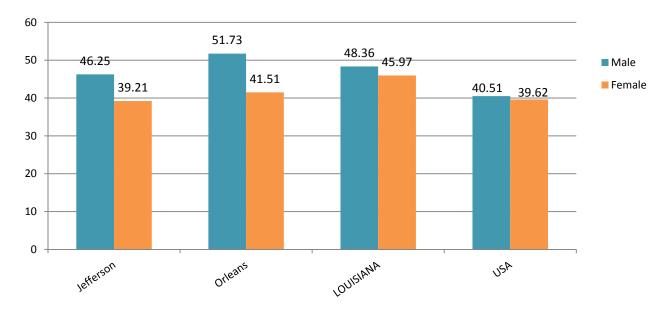
- Orleans Parish reports the highest rate of age-adjusted mortality due to stroke for the study area at 46.26 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to stroke to be less than or equal to 33.8 per 100,000 population; all of the study area parishes report rates higher than this goal.

Mortality - Stroke - Age-Adjusted Death Rate, (Per 100,000 Pop.), 2007-2011



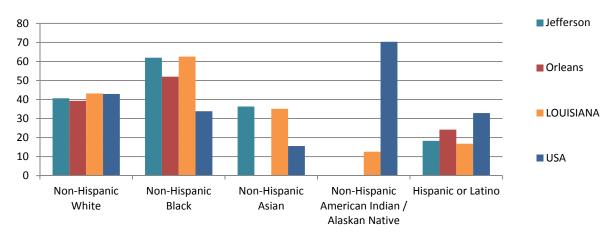
• On a national level, men are more likely to die as a result of stroke than women (40.51 per 100,000 pop. vs. 39.62); for the study area it is the same.

Mortality - Stroke - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Gender, 2007-2011



• The Non-Hispanic Black population of Jefferson Parish reports the highest rate of death as a result of stroke for the study area at 61.97 per 100,000 population.

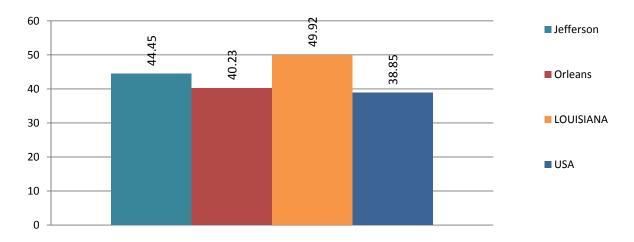
Mortality - Stroke - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Race/Ethnicity, 2007-2011



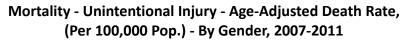
Mortality – Unintentional Injury

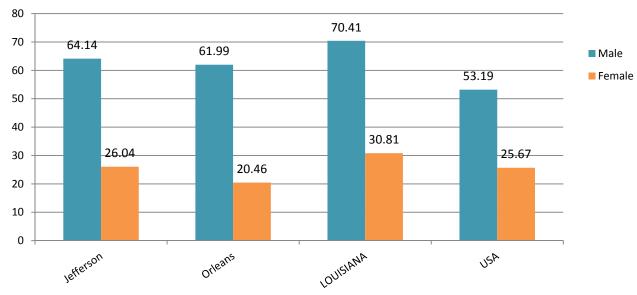
- Jefferson Parish reports the highest rate of age-adjusted mortality due to unintentional injury for the study area at 44.46 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to unintentional injury to be less than or equal to 36.0 per 100,000 population; all of the study area parishes report rates higher than this goal.

Mortality - Unintentional Injury - Age-Adjusted Death Rate, (Per 100,000 Pop.), 2007-2011



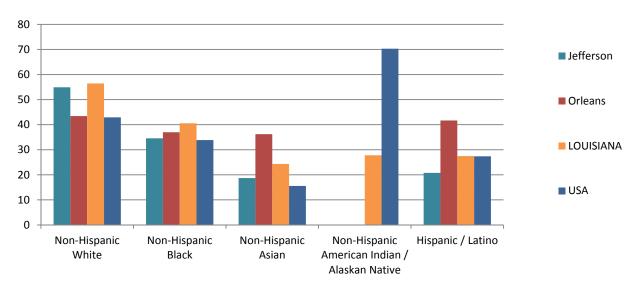
• On a national level and across all of the study area parishes, men are more likely to die as a result of unintentional injury than women.





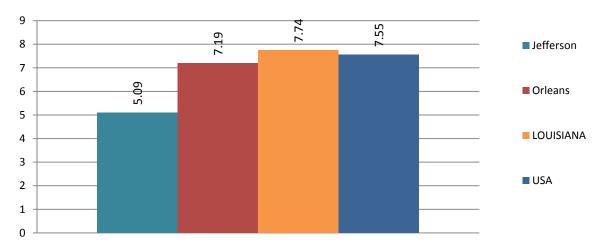
• The Non-Hispanic White population of Jefferson Parish reports the highest rate of mortality due to unintentional injury for the study area at 54.93 per 100,000 population.

Mortality - Unintentional Injury - Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Race/Ethnicity, 2007-2011



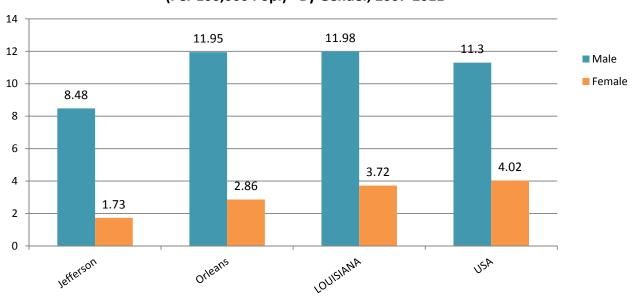
 Orleans Parish reports the highest rate of deaths due to motor vehicle accidents for the study area at 7.19 per 100,000 population; this is lower than the national rate of 7.55 per 100,000 population.

Mortality - Motor Vehicle Accident- Age-Adjusted Death Rate, (Per 100,000 Pop.), 2007-2011



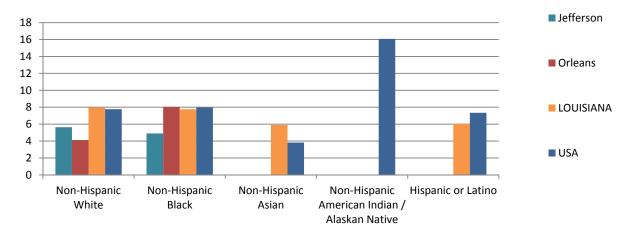
• Men are more likely to die as a result of a motor vehicle accident than women.

Mortality - Motor Vehicle Accident- Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Gender, 2007-2011



• The Non-Hispanic American-Indian / Alaskan Native population for the country reports the highest rate of death due to motor vehicle accident at 16.08 per 100,000 population.

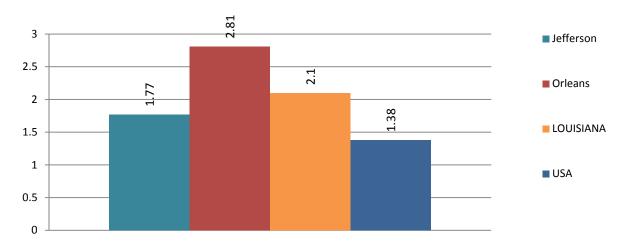
Mortality - Motor Vehicle Accident- Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Race/Ethnicity



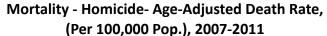
Mortality – Pedestrian Accident

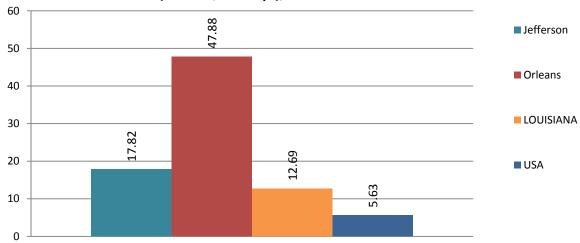
- Orleans Parish reports the highest rate of age-adjusted mortality due to pedestrian accident for the study area at 2.81 per 100,000 population.
- The Healthy People 2020 goal is for mortality due to pedestrian accident to be less than or equal to 1.3 per 100,000 population; all of the study area parishes and state report rates higher than this HP2020 Goal.

Mortality - Pedestrian Accident- Age-Adjusted Death Rate, (Per 100,000 Pop.), 2008-2010



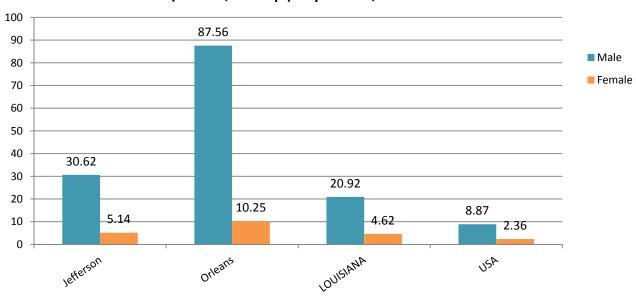
- Orleans Parish reports the highest rate of age-adjusted mortality due to homicide for the study area at 47.88 per 100,000 population; this rate is much higher than the national rate (5.63) and all of the other study area parishes.
- The Healthy People 2020 goal is for mortality due to homicide to be less than or equal to 5.5 per 100,000 population; all of the study area parishes and state report rates higher than this HP2020 Goal.





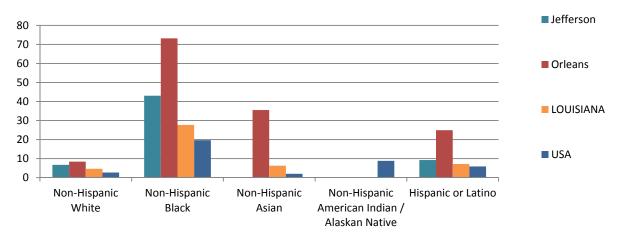
Men are more likely to die as a result of homicide than women.

Mortality - Homicide- Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Gender, 2007-2011



 The Non-Hispanic Black population of Orleans Parish reports the highest rate of death as a result of homicide across the study area at 73.18 per 100,000 population.

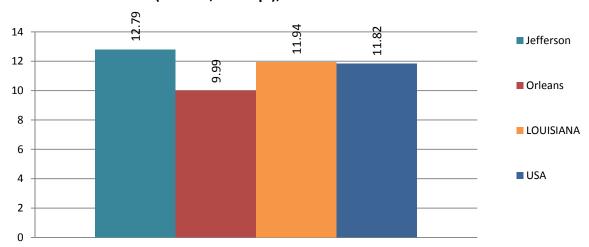
Mortality - Homicide- Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Race/Ethnicity, 2007-2011



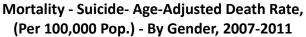
Mortality - Suicide

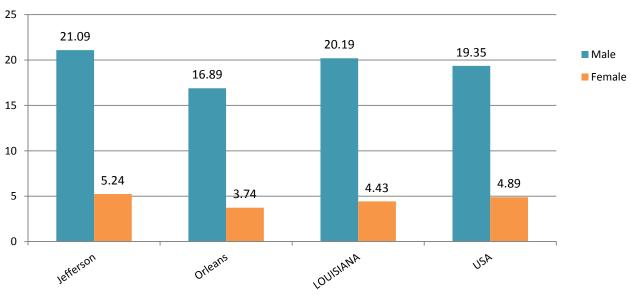
- Jefferson Parish reports the highest rate of age-adjusted mortality due to suicide for the study area at 12.79 per 100,000 population; this rate is higher than the national rate (11.82) and all of the other study area parishes.
- The Healthy People 2020 goal is for mortality due to suicide to be less than or equal to 10.2 per 100,000 population; Orleans Parish report rates already lower than this HP2020 Goal.

Mortality - Suicide- Age-Adjusted Death Rate, (Per 100,000 Pop.), 2007-2011



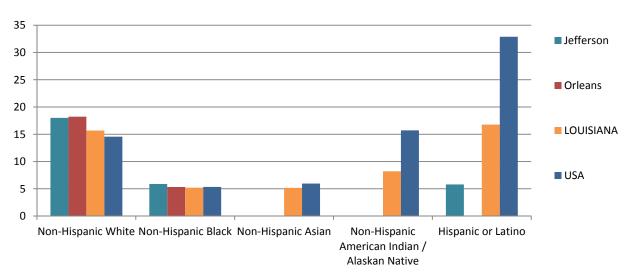
Men are more likely than women to die as a result of a suicide.





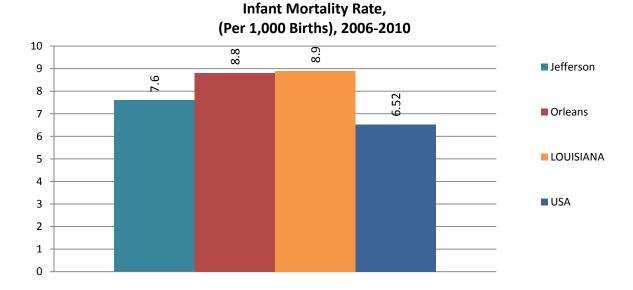
- The Hispanic/Latino population of the U.S. reports the highest rate of suicide at 32.88 per 100,000 population.
- For the study area, the Non-Hispanic White population of Orleans Parish reports the highest rate of suicide at 18.22 per 100,000 population.

Mortality - Suicide- Age-Adjusted Death Rate, (Per 100,000 Pop.) - By Race/Ethnicity, 2007-2011



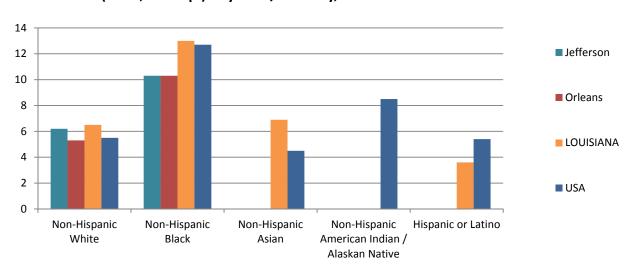
Infant Mortality Rate

- Orleans Parish reports the highest rate of infant mortality due for the study area at 8.8 per 1,000 births; this rate is higher than the national rate of 6.52 per 1,000 births.
- The Healthy People 2020 goal is for infant mortality to be less than or equal to 6.0 per 1,000 births; all of the study area parishes and state report rates higher than this HP2020 Goal.



• The Non-Hispanic Black population reports the highest rate of infant mortality for the study area parishes at 10.3 per 1,000 births.

Infant Mortality Rate, (Per 1,000 Pop.) - By Race/Ethnicity, 2006-2010

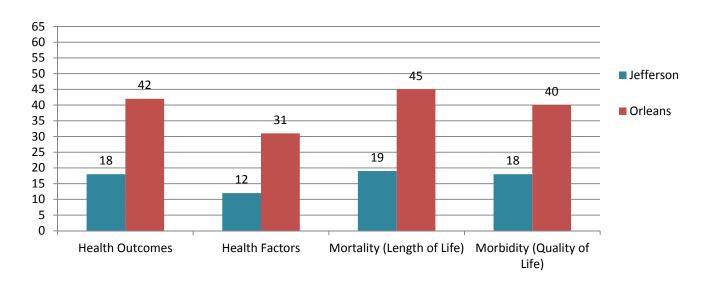


County Health Rankings

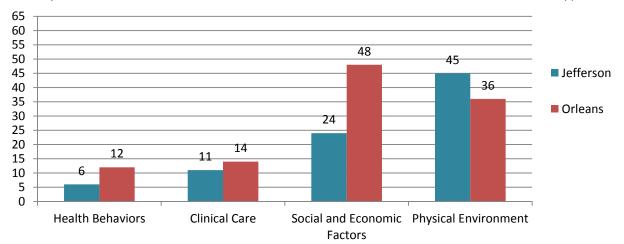
The County Health Rankings were completed as a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.²³

Each parish/county receives a summary rank for its health outcomes, health factors, and also for the four different types of health factors: health behaviors, clinical care, social and economic factors, and the physical environment. Analyses can also drill down to see specific parish/county-level data (as well as state benchmarks) for the measures upon which the rankings are based. Parishes/Counties in each of the 50 states are ranked according to summaries of more than 30 health measures. Those having high ranks, e.g. 1 or 2, are considered to be the "healthiest." Parishes/Counties are ranked relative to the health of other parishes/counties in the same state on the following summary measures:

- Health Outcomes Rankings are based on an equal weighting of one length of life (mortality) measure and four quality of life (morbidity) measures.
- Health Factors Rankings are based on weighted scores of four types of factors:
 - Health behaviors
 - Clinical care
 - Social and economic
 - Physical environment
- Louisiana has 64 parishes. A score of 1 indicates the "healthiest" parish for the state in a specific measure. A score of 64 indicates the "unhealthiest" parish for the state in a specific measure.



²³ 2015 County Health Rankings. Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute



Key Findings from County Health Rankings:

- ✓ Comparing Jefferson and Orleans parishes, Orleans Parish reports the highest ranks (unhealthiest parish of the study area) for the majority of the County Health Rankings:
 - o A rank of 42 for Health Outcomes
 - o A rank of 31 for Health Factors
 - o A rank of 45 for Mortality
 - o A rank of 40 for Morbidity
 - A rank of 12 for Health Behaviors
 - o A rank of 14 for Clinical Care
 - o A rank of 48 for Social and Economic Factors.
- ✓ Jefferson Parish holds the highest rank for the study area for Physical Environment at 45.

Substance Abuse and Mental Health

The Substance Abuse and Mental Health Services Administration (SAMHSA) gathers region specific data from the entire United States in relation to substance use (alcohol and illicit drugs) and mental health.

Every state is parceled into regions defined by SAMHSA. The regions are defined in the 'Substate Estimates from the 2010-2012 National Surveys on Drug Use and Health'. Data is provided at the first defined region (i.e., those that are grouped).

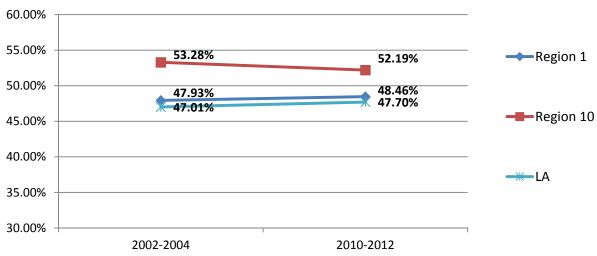
The Substate Regions for Louisiana are defined as such:

- Regions 1 and 10 (Data for Regions 1 and 10 provided separately for this grouping only)
 - o Region 1 Orleans, Plaquemines, St. Bernard
 - o Region 10 Jefferson
- Regions 2 and 9
 - Region 2 Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee,
 West Baton Rouge, West Feliciana
 - o Region 9 Livingston, St. Helena, St. Tammany, Tangipahoa, Washington
- Region 3
 - Region 3 Assumption, Lafourche, St. Charles, St. James, St. John the Baptist, St. Mary, Terrebonne
- Regions 4, 5, and 6
 - Region 4 Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin, Vermilion
 - o Region 5 Allen, Beauregard, Calcasieu, Cameron, Jefferson Davis
 - Region 6 Avoyelles, Catahoula, Concordia, Grant, La Salle, Rapides, Vernon,
 Winn
- Regions 7 and 8
 - Region 7 Bienville, Bossier, Caddo, Claiborne, De Soto, Natchitoches, Red River,
 Sabine, Webster
 - Region 8 Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison,
 Morehouse, Ouachita, Richland, Tensas, Union, West Carroll

Data concerning alcohol use, illicit drug use, and psychological distress for the various regions of the study area are shown here.

• For the Study Area, Region 10 (Jefferson Parish) reports the highest current rate of alcohol use in the past month at 52.19% of the population aged 12 and older. However, this region/parish has seen the largest decline in alcohol use rate from 2002-2004 to 2010-2012.

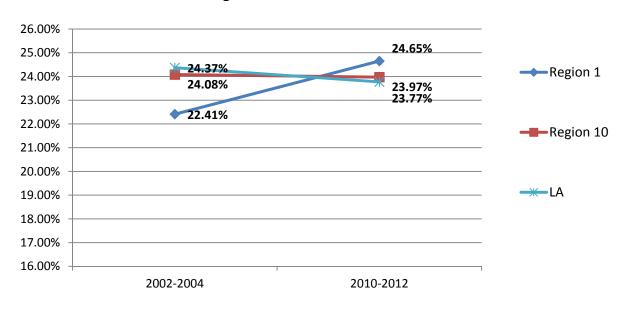
Alcohol Use in the Past Month



Binge Alcohol Use in the Past Month

• Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate for the study area as well as a rise in binge alcohol use from 2002-2004 to 2010-2012.

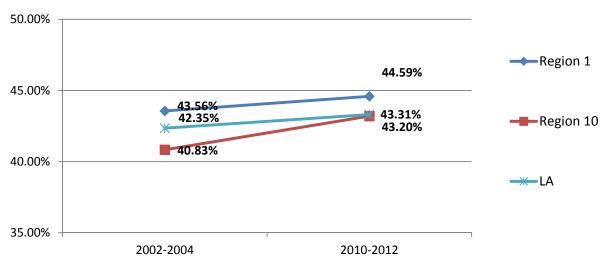
Binge Alcohol Use in the Past Month



Perceptions of Great Risk of Having Five or More Alcoholic Drinks Once or Twice a Week

• Many of the study area regions have shown rises in the perceptions of risk of having five or more drinks once or twice a week from 2002-2004 to 2010-2012.

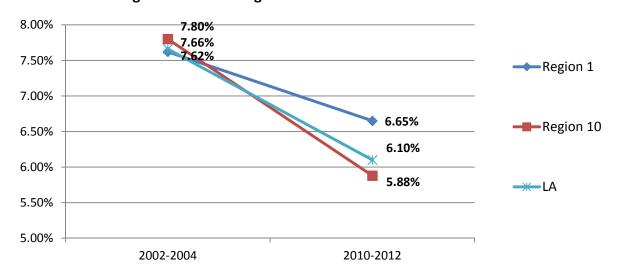
Perceptions of Great Risk of Drinking Five or More Alcoholic Drinks



Needing but Not Receiving Treatment for Alcohol Use in the Past Year

- All of the study area regions have seen declines in the rates of residents needing but not receiving treatment for alcohol use from 2002-2004 to 2010-2012.
- Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate for the study area of residents who needed but did not receive treatment for alcohol use in the past year at 6.65%.

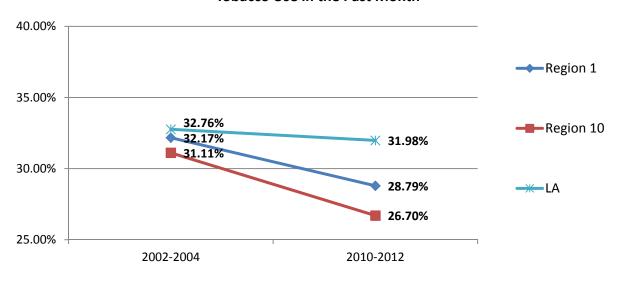
Needing but Not Receiving Treatment for Alcohol Use in the Past Year



Tobacco Use in the Past Month

• Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest current rate of tobacco use in the past month for the study area at 28.79%; this region has, however, seen a decline in the rate from 32.17% in 2002-2004.

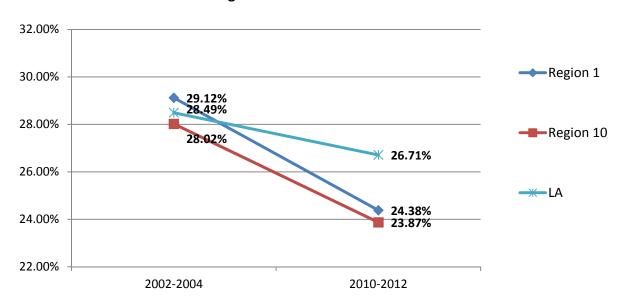
Tobacco Use in the Past Month



Cigarette Use in the Past Month

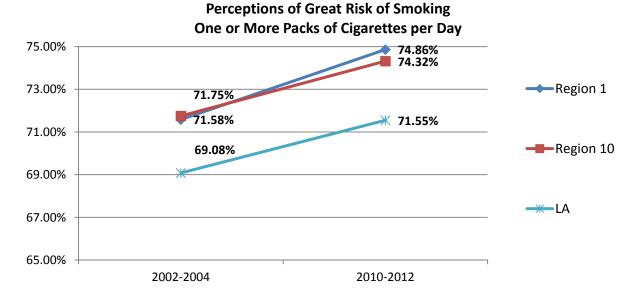
• Cigarette use in the past month is highest for Region 1 in the 2010-2012 analysis; it has seen a decline in rate over the years going from 29.12% to 24.38%.

Cigarette Use in the Past Month



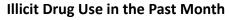
Perceptions of Great Risk of Smoking One or More Packs of Cigarettes per Day

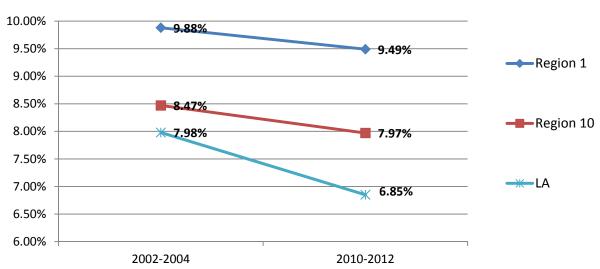
 All of the study area regions report rises in the rate of perceptions of great risk of smoking one or more packs of cigarettes per day.



Illicit Drug Use in the Past Month

- Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate of illicit drug use in the past month with 9.49% of the population aged 12 and older participating in drug use.
- The Louisiana regions of SAMHSA report declines in rates of illicit drug use.

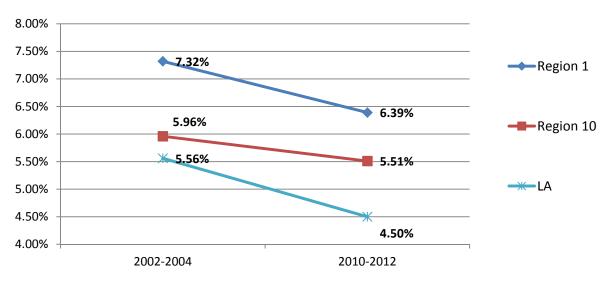




Marijuana Use in the Past Month

- Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate of marijuana use in the past month with 6.39% of the population aged 12 and older reporting use; this rate has been on the decline since 2002-2004 in which it was 7.32%.
- The Louisiana regions of SAMHSA report declines in rates of marijuana use.

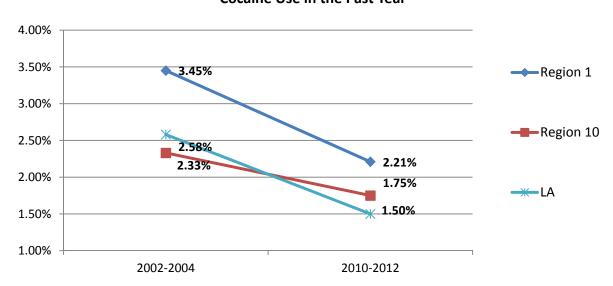
Marijuana Use in the Past Month



Cocaine Use in the Past Year

- Region 1 (Orleans, Plaquemines, St. Bernard parishes) reports the highest rate of cocaine use in the past month with 2.21 % of the population aged 12 and older reporting use; this rate has been on the decline since 2002-2004 in which it was 3.45%.
- All of the study area regions have seen declines in the rates of cocaine use from 2002-2004 to 2010-2012.

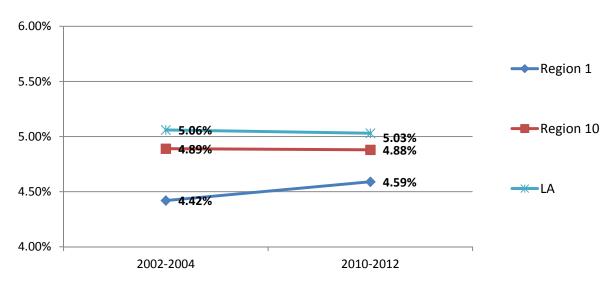
Cocaine Use in the Past Year



Nonmedical Use of Pain Relievers in the Past Year

 Region 10 reports the highest current rate of nonmedical use of pain relievers in the past year at 4.88% of the population aged 12 and over.

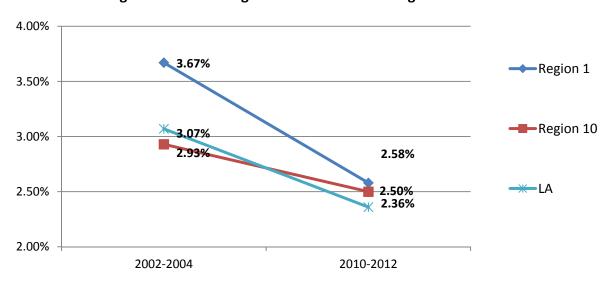
Nonmedical Use of Pain Relievers in the Past Year



Needing but Not Receiving Treatment for Illicit Drug Use in the Past Year

 All of the study area regions report declines in the rates of residents reporting needing but not receiving treatment for illicit drug use in the past year. Region 1 still reports the highest rate for the study area at 2.58% needing but not receiving treatment.

Needing but Not Receiving Treatment for Illicit Drug Use in the Past Year



America's Health Rankings

America's Health Rankings® is the longest-running annual assessment of the nation's health on a state-by-state basis. For the past 25 years, America's Health Rankings® has provided a holistic view of the health of the nation. America's Health Rankings® is the result of a partnership between United Health Foundation, American Public Health Association, and Partnership for Prevention™.

For this study, the Louisiana State report was reviewed. The following were the key findings/rankings for Louisiana:

- Louisiana Ranks:
 - 48th overall in terms of health rankings
 - o 44th for smoking
 - o 45th for diabetes
 - o 45th in obesity
- Louisiana Strengths:
 - o Low incidence of pertussis
 - o High immunization coverage among teens
 - Small disparity in health status by educational attainment
- Louisiana Challenges:
 - High incidence of infectious disease
 - High prevalence of low birthweight
 - High rate of preventable hospitalizations
- Louisiana Highlights:
 - In the past year, children in poverty decreased by 15 percent from 31.0 percent to 26.5 percent of children.
 - In the past 2 years, physical inactivity decreased by 10 percent from 33.8 percent to 30.3 percent of adults.
 - o In the past 20 years, low birthweight increased by 15 percent from 9.4 percent to 10.8 percent of births. Louisiana ranks 49th for low birthweight infants.
 - o In the past 2 years, drug deaths decreased by 25 percent from 17.1 to 12.9 deaths per 100,000 population.
 - Since 1990, infant mortality decreased by 32 percent from 11.8 to 8.2 deaths per
 1,000 live births. Louisiana now ranks 47th in infant mortality among states.

Table 6. America's Health Rankings - Louisiana					
Measure	Rank	Value	Measure	Rank	Value
Air Pollution	26	9.2	Infectious Disease	48	
All Determinants	48	-0.53	Insufficient Sleep	34	37
All Outcomes	44	-0.273	Lack of Health Insurance	39	16.7
Binge Drinking	21	16.3	Low Birthweight	49	10.8
Cancer Deaths	47	217.4	Median Household Income	50	39,622
Cardiovascular Deaths	46	307.5	Obesity	45	33.1
Children in Poverty	44	26.5	Obesity – Youth		13.5
Chlamydia	47	597.9	Occupational Fatalities	47	8.2
Cholesterol Check	26	76.2	Overall	48	-0.803
Colorectal Cancer Screening	39	61.5	Personal Income, Per Capita	29	41,204
Dental Visit, Annual	48	56.1	Pertussis	1	1.6
Dentists	39	49.6	Physical Activity	46	67.8
Diabetes	45	11.6	Physical Inactivity	46	32.2
Disparity in Health Status	16	26.5	Poor Mental Health Days	43	4.2
Drug Deaths	27	12.9	Poor Physical Health Days	38	4.2
Excessive Drinking	22	17.7	Premature Death	45	9625
Fruits	44	1.18	Preterm Birth	49	15.3
Heart Attack	41	5.3	Preventable Hospitalizations	48	80.3
Heart Disease	40	5	Primary Care Physicians	20	123.7
High Blood Pressure	47	39.8	Public Health Funding	27	69.01
High Cholesterol	41	40.7	Salmonella	47	33.7
High Health Status	47	44.4	Smoking	44	23.5
High School Graduation	46	72	Stroke	45	4
Immunization - Adolescents	11	72.6	Suicide	12	12.5
Immunization – Children	31	69.1	Teen Birth Rate	44	43.1
Immunization Dtap	16	87.9	Teeth Extractions	48	9.6
Immunization HPV female	12	42.1	Underemployment Rate	23	12.7
Immunization MCV4	9	87.7	Unemployment Rate, Annual	15	6.2
Income Disparity	48	0.491	Vegetables	49	1.64
Income Disparity Ratio	1	5.68	Violent Crime	44	496.9
Infant Mortality	47	8.2	Youth Smoking		12.1

Figure 4. Louisiana Health Rankings Bubble Chart

