







- Leadership Message
- Community Impact
- Project Opioid and Gateway
- Homeless Wellness Program **10**
- 12 Hurricane Michael
- Women's Center of Jacksonville 14
- Florida Literacy Coalition and El Sol **16**
- Feeding Tampa Bay

- Miami HEAT and HEAT Academy
- **IMPOWER**
- Community Health Symposium & Sapphire Awards
- Florida Blue Volunteers
- Lift by GuideWell
- Foundation Team and Board of Directors
- Our Mission, Vision and Focus







Leadership MESAFE

top to think for a moment. This year's first-grade students will graduate high school in 2030—when Florida is projected to be home to 26 million residents. At the same time, all of the 5.3 million baby boomers living here will have celebrated their 65th birthday.

Florida is changing rapidly, with disruptions in technology and innovation, along with new approaches to address social determinants of health. Next year, the Florida Blue Foundation will celebrate 20 years of partnership with our state's nonprofit community. We continue with a formula that works for our corporate foundation—striving for authenticity, listening to our communities and respecting diverse approaches.

But we are also evolving rapidly to adapt to the changes in our state and our parent company, GuideWell. If we are to remain a leader in helping people and communities achieve better health, we have to look deeper into the chronic problems that continue to plague our most vulnerable citizens.

We've made progress on this journey over the past two years—you'll read the stories in this report about how we've addressed the opioid and substance abuse crisis, provided support for victims of sexual abuse, and helped the uninsured overcome apprehension and confusion about the health care system. Our grants have helped them to begin rehabilitating their physical, mental and emotional well-being.



Florida Blue Foundation Vice President

A recent study of our Foundation's 2018 impact showed that we are making a difference in the health and well-being of Floridians

received services as a result of Florida Blue's community investments

nonprofit workers

were educated on Mental Health First Aid to help them recognize if a client may need support for a mental health condition

> **2,717** community members in need gained an increased understanding of how to navigate the health care system

4.938 underserved individuals received a dental cleaning and oral cancer screening

networked and learned about critical issues during our annual Community Health Symposium



What's on our horizon? Engagement with our communities around generational poverty, food insecurity, mental health and health care access will continue. We are working to create an even deeper, more meaningful impact in our communities, focused on specific zip codes.

All of this work is possible because of the support of our GuideWell leadership team and our Corporate Social Responsibility team.

Thank you to the Florida Blue Foundation board of directors for your leadership and guidance. Together, we can make Florida the healthiest, most prosperous state in the nation.

7,420 Community Impact people reached with health services total people served through 95% all charitable giving programs 4.5M+of grantee outcomes achieved people served through Build Healthy Strong Communities' grantees 10,700 < 13,046 Floridians reached with mental uninsured individuals served health services or health navigation through 18 multi-year grants \$415,00 donated to activities throughout Florida supporting the fights against cancer, heart disease, Alzheimer's and diabetes increase in number of participants \$370K at the annual Community Health Symposium and Sapphire Awards employee contributions to GuideWell Lift By GuideWell

12,484

hours of VTO to support community work



60,000

hours of Florida Blue volunteer activities

\$3.1 M DONATED TO UNITED WAY





15% increase in employee

contributions to **United Way campaigns**

(that's \$1.57M total from 2,460 employees!)



UNITS OF BLOOD

donated through

enterprise-wide blood drive

(enough to





CARE PACKAGES

sent to active troops through the Treat-A-Troop program

THANKSGIVING MEALS for families

HURRICANE

MICHAEL

1,500 care

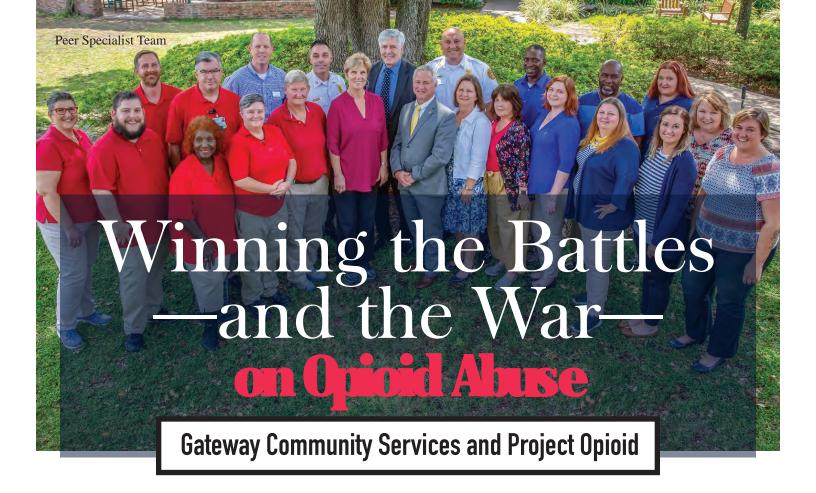
donated to foster children in Northeast Florida

BACKPACKS

filled with school supplies sent to foster children in Tampa, Miami, Seminole and Lee counties

1,342,370 engagements with #MYKINDOFGIVING

for #GI WINGTUESDAY contest



The National Institute on Drug Abuse (www.drugabuse.gov) reports that in 2017, there were more than 70,200 drug overdose deaths in the U.S. That means, when adjusted for age, out of every 100,000 peopleroughly the population of Clearwater or West Palm Beach—21 people (nearly 22) will die from an overdose death. Of those, 14 of those overdoses would have involved opioids.

The Florida Blue Foundation is fighting to help Floridians on both fronts.

"The opioid crisis is the public health crisis of our lifetime," says Andrae Bailey, a well-known advocate in Central Florida and the lead for Project Opioid, a large collective impact initiative aimed at the prevention, education and treatment related to opioid abuse which Florida Blue helped start, fund and lead.

"There has never been anything like it, by the numbers, that we have ever seen in the history of modern America. The number of people addicted, the number of people dying ... the only thing you could possibly compare it to is maybe the HIV crisis two decades ago."

The "Opioid Epidemic," as it's now being called, is particularly frightening due to the addictive nature of the drugs involved. Many times, it starts with a legal pain management prescription from a doctor. Although the prescriptions have limited refills and doctors may closely watch their patients, the drugs are so addictive that, in some instances, people are turning to illegal street drugs to soothe their withdrawal, with disastrous results.

"Top down" initiatives, like Project Opioid, aim at leveraging Florida Blue's reach and connections to convene leaders across communities to design a strategy for transformational system-wide change that will help curtail the epidemic.

"The Florida Blue Foundation is the right vehicle to engage, help coordinate and provide oversight for this critical work," says Tony

Jenkins, Market President for the Central Florida Region of Florida Blue.

"Bottom-line, with this crisis wreaking havoc in our communities and in the lives of thousands, the timing was perfect for someone ... or some organization with clout and influence, to step up and convene a group of cross-sector leaders to come together to begin building a plan to save lives. I'm honored and proud that we answered that call—by not only stepping up, but by choosing to take a leadership role in bringing the community together on this topic."

One-on-One Support

At the grassroots level, saving individual lives, are programs like the Recovery Peer Specialist Emergency Connection deployed in emergency rooms in several hospitals in North Florida by Gateway Community Services. The Recovery Peer Specialist, a former addict who has received certified counseling training, meets with overdose survivors in the ER, hours after they've OD'd in an effort to use their own "lived experience" to help inspire addicts to enter treatment programs.

"We are anchored in emergency rooms," explains Rico Bodin, Recovery Connection Program Manager at Gateway Community Services in Jacksonville.

"When a patient is brought in, and the doctor or nurse meets them—whether the patient comes in as an overdose, or a substance use disorder—our Recovery Peer Specialist is able to have that lived-experience conversation."

"They are able to stand bedside them and say: 'You know what? Me, too. This is what I did and this is what I used to do and this is what I'm doing today."

Last year, 528 ER patients had that very conversation with a Recovery Peer Specialist. That these words are coming from recovered addicts makes it easier for the kind of "language of the heart connection" (as Rico calls it) that often tips addicts into action.

The program doesn't offer treatment; it offers a type of "Sherpa" who knows the way to get there. The Recovery Peer Specialist will share their personal experience, and simply talk about recovery and treatment options. They can stay connected to the person for up to 90 days and help them navigate different options for growing their support network through 12-step programs, church recovery groups, or even their families.

Rico's team includes seventeen Recovery Peer Specialists right now. Each one has been in recovery for at least two years, has received certification through the Florida Certification Board's Recovery Peer Specialist training program, and has received special training inside the Emergency Department to work alongside medical professionals. All the Recovery Peer Specialists are employed by Gateway.

Gateway's data shows that the program is not only saving lives, but it saves money by getting addicts into recovery programs and out of the cycle of ER readmissions that usually follow with subsequent overdoses. More than \$133,000 in hospital readmissions were avoided for the patients served by the Recovery Peer Specialists last year.

Even more importantly, overdose deaths in Duval County dropped 40% in 2018 to 311, down from 519 in 2017, and Rico knows the program contributed to that drop. Florida Blue Foundation funding is putting more Recovery Peer Specialists across more hospitals in North Florida, reaching a total of eight facilities in 2019, and all are eager to see similar results that could mean a broader expansion of the program.

"This is something that could easily be taken across the state of Florida," adds Rico. "It's definitely something that's portable and sustainable to be able to help address this opioid epidemic."

"It's really all founded in this conversation of 'lived experience' ... and sharing it with an individual to normalize what addiction is and normalize recovery so it's not something they don't think they'll ever be able to obtain."

One United Support Effort

One group that might be interested in learning more about the success of Gateway's Recovery Peer Specialists program is the collective of leaders assembled by Project Opioid.

> Andrae is leading the initiative, which started from scratch in October 2018. As he puts it, "So in essence, Florida Blue didn't fund Project Opioid—they helped create it."

He refers to the project as a "collective impact model" and is convening top leaders in the Central Florida communityeveryone from politicians, business leaders, hospital execs and physicians to community

organizers, law enforcement, state agencies, social services programs, and faith-based leaders—to serve on a leadership team responsible for creating the first regional strategy on the opioid crisis.

Andrae's argument is that this problem is so big and so unprecedented that winning small battles in the prevention, education, and treatment related to opioid abuse is just not going to be enough to bring an end to the larger war. Systemic change, in some of the biggest organizations in the state, is what it will take.

"We're in the process of using data, analyzing data to understand," explains Andrae. "We want to look at every person who's died in our region over the past five years. Who are they? What was their journey? Where was their origin, if we can find that out, on these drugs? What help did they seek and get? What help did they seek and NOT get? We want to understand the system through the eyes of where it worked, and didn't work, for a person."

Once the Project Opioid leadership team has that baseline, the plan is to look at best practices around the U.S. and create a gap analysis. The last step will be to collaborate to drive change based on what they've learned and push for that system restructure to ensure that it operates to quell this epidemic—and prevent future epidemics from springing up.

"The only success of Project Opioid," says Andrae, "is if in two years, three years, five years, fewer people are addicted to these drugs, and fewer people are dying because we have changed our communities' response. But only leadershiponly a coordinated leadership strategy—is how you do that."

Homeless Wellness Program





66I'll just share this with you. I was homeless here in 2004. I had gotten really sick and was unable to walk. Like really quickly, some sudden onset. I have a rare motor-neuron disease. I'm ambulatory now and I'm fine, but I lost everything."

Tawny Swain Castle's past is not only the basis of a book she authored, called "Detour," it's also the genesis story of the Homeless Empowerment Program's (HEP) Wellness Program, which she designed as a result of her own struggles trying to find the care she needed to put her life back together.

Now Wellness Program Manager at HEP, Tawny has formalized the approach she piloted five years ago into a twopronged wellness program that helps those unfamiliar with

the health care system take better care of themselves-specifically, their chronic conditions like diabetes and heart disease or health issues related to chronic pain.

The program is open to all of HEP's residents—about 400 people a day, of which about 40% are veterans. All are

homeless and many of them are dealing with drug addiction in addition to serious medical issues.

HEP stands out among other shelter options as their facility, an eight-acre campus located in Clearwater, is equipped with

a mix of housing options to support their residents and guests. There are 125 emergency beds to serve immediate needs, as well as transitional housing, permanent supportive housing, and permanent housing to help with rehabilitation efforts. While this gets people off the streets and into safe housing, it's the support services that truly help change lives.

Case managers are assigned from the onset and design a personalized program from HEP's full list of services, which address everything from health and housing to documentation (think Social Security cards and IDs needed to unlock other benefits like Social Security, Medicare and Medicaid) and, ultimately, employment.

The Wellness Program Tawny founded in Pinellas County, which Florida Blue Foundation funding has helped expand, is

critical to not only triaging individual situations that put people's lives at-risk, but also serves to help HEP attain its longterm goal of helping their residents and guests win their lives back. Tawny expects the grant will allow them to help 5,500 people and save \$1.25 million in

emergency room cost diversions.

... the grant will allow them

\$1.25 million in emergency

room cost diversions.

to help 5,500 people and save

"If they're not feeling confident in their ability to manage their health care or their health," Tawny explains, "then, they're not going to be able to sustain independent living."

The Wellness Strategy

6 6 What we know," explains Tawny, "is that folks who have been homeless for any period of time have limited access to health care and limited access to quality health care, for sure. They will come in with eight different chronic conditions and none of them are being treated. They haven't had bloodwork or they've never seen a primary care doctor."

She gives an example. "We had a woman ... she's blind. Not hooked up with any blind services, and she never had a pap smear—nor a mammogram. Just never had health care, and she'd been on the streets in D.C. ... 66 years old."

"If there's nothing else I've learned about this population in almost 20 years," she adds, "it's while the themes of stories might be similar everyone's different. And they need to be triaged as that."

"You figure out what their most important need is, and you figure out how to meet it. And because some of our emergency shelter programs are short-term, like 30 days, we don't have a whole lot of time to get as much done as we can."

HEP's Wellness Program is built to address their guests' varying health needs as efficiently as possible. Group workshops serve multiple residents at the same time, while healthcare navigators work one-onone with residents, helping them get to doctor's appointments and even serving as their advocates once they're there.

The workshop component was born from Tawny's own experience trying to figure out how to get the care she needed as she was struggling with the sudden onset of her illness 15 years ago.

"The beauty of the workshops," says Tawny, "is that most of the stuff that I had to figure out myself—what took me about ten years to learn to kind of rebuild my life-was what I could have learned in a six-week workshop."

Standardized and built on evidencebased research, these six-week workshops teach HEP guests how they can self-manage their chronic pain or chronic conditions by focusing on short- and long-term goals to build confidence and teach problem-solving skills. Tawny hopes participants walk away with an understanding that it's not just the time at the doctor's office that is key to managing their condition, but that they have the ability to play a part as well.

As for the healthcare navigator role: "Well, we kind of dreamed up this navigator position because no one can navigate the health care system very easily."

The intention here is to not only develop a completely personalized wellness plan that helps residents get medical, dental, and vision care, manage meds if they need them, or cope with drug or alcohol abuse but to also be prepared for what they'll experience in the health care system.

Tawny says the healthcare navigator "helps residents bridge that gap between having no experience with this kind of care, and then being put into the health care system and being cared for." A lot of residents "freeze" when they're in the doctor's office, she says. The navigator will step in and encourage them to ask questions or request clarification about diagnoses or instructions that may come loaded with jargon. The result is often not only empowering to the individual patient, but also yields better quality of care.



Expanded Reach and Outcomes

This not only allows the program to of the term.

where folks rotate while they're waiting for Social Security disability, if they're on Pinellas Safe Harbor."

things here at HEP so we can better our

The impact is that former HEP residents through with their care plans and doctors' appointments as they continue on their and better health.

On October 8, 2018, Hurricane Michael made landfall on the Florida Panhandle as a Category 5 storm, causing a total of 49 deaths, more than \$5.5 billion in damage, and altering the lives of thousands of Floridians.

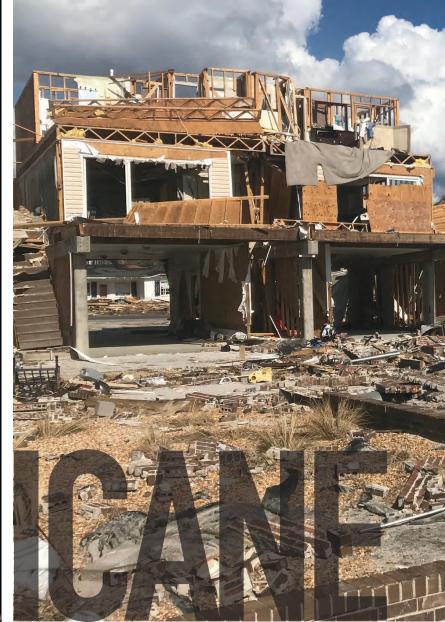
To help ensure that the physical health and emotional well-being of those Floridians was protected, the Florida Blue Foundation provided

\$500,000 to 19 nonprofit agencies

in the Florida Panhandle to provide assistance to the storm's victims.

Uniting Resources

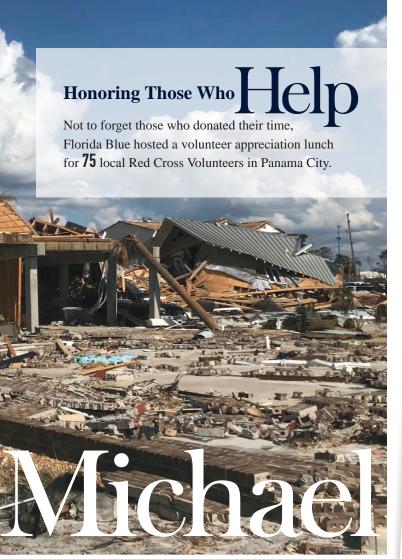
Florida Blue supported more than 19 different nonprofit agencies in their disaster relief efforts immediately following the hurricane. From the American Red Cross to Catholic Charities, the Salvation Army to United Way, the Foundation's support buoyed assistance efforts throughout the Panhandle.





Providing Provisions

Florida Blue employees in Jacksonville and Pensacola assembled **1,500 care packages** that were distributed to families impacted by the hurricane. The care packages included basic necessities and nonperishable food to sustain two adults for seven days.



Making Holiday Celebrations Special

As Panhandle communities began their slow recovery process, Florida Blue helped bring back some sense of normalcy through holiday celebrations, serving 1,800 people Thanksgiving dinner and providing Christmas gifts to more than 2.400 children.

Among the relief efforts in the small town of Lynn Haven, Florida Blue hosted a Hometown Thanksgiving Dinner for the residents at a local park, prompting the town's mayor, Margo Anderson, to grant Florida Blue the key to the city and proclaim June 10 as forever "Florida Blue Day." Mayor Anderson said, "Florida Blue became part of the most important aspect of recovery—you helped people feel normal again."



Serving as a Health Hub

Florida Blu

Florida Blue's Tallahassee Retail Center distributed **500 of the care packages** after the hurricane, and helped members find and receive care in the Panama City/Bay County community. Florida Blue nurses supported the effort with outreach to ensure members received clinical support as needed.



Florida Blue 👨 🗓

- Florida Blue is partnering with this organization to assist with the needs assessment for nine school districts affected by the hurricane, disrupting 58,000 student lives.
- The consortium is qualified and experienced to facilitate this work in an equitable and organized manner to help affected students, teachers and schools in a multi-county area.



Women's Center of Jacksonville



We can't control

environment, but

we can give them

safety within our

the external

On May 19, 2018, the Women's Center of Jacksonville served its first sexual assault survivor from its new, state-of-the-art Sexual Assault Forensic Exam (SAFE) Center.

A year later, 3,641 phone calls have come through the Center's Rape Recovery Hotline and 933 survivors have received advocacy and counseling services that the Center

provides, 24 hours a day, 365 days a year. Additionally, 375 survivors have received sexual assault forensic exams that the Center is certified to provide through the Florida Counsel Against Sexual Violence. It's the only free-standing facility in Duval, Nassau and Baker counties providing these services that is NOT a hospital emergency room.

environment. "The truth is," says Teresa Miles, Executive Director for the Women's Center of Jacksonville, "the emergency room experience, and all that's involved, is not really the place for healing for a sexual assault survivor."

"They've been through the most traumatic event in their life ... and as many of you know, anybody who goes into an emergency room, it's not really conducive to that. It's busy, it's hustle, it's bustle, there's a sheet between you and the person next to you. Our goal is to give them back some of the control that they've lost."

Florida Blue supported renovations to the SAFE Center with a \$100,000 grant to, as Teresa puts it, "help survivors begin the healing process the moment they walk in the door." The upgrades to the space allowed the Center to expand their hotline and counseling programs and redesign their exam rooms to provide survivors with a greater sense of control.

> "We really tried to recognize the fear and the anxiety of what it's like to walk into a center and go through a sexual assault exam," says Teresa. "And many of us who've designed it are survivors of sexual assault ourselves, so we really have that lens. We can't control the external environment, but we can give them safety within our environment."

Teresa adds, however, that while the funding from Florida Blue created this physical haven for victims of sexual abuse, it's meant much more than that.

"The support and funding through Florida Blue allowed us to say out loud that sexual assault is a public health issue."

"We have dealt with it so often, in shadows. 'We can't really talk about rape.' It was, for so many years pushed down and pushed down, and Florida Blue gave us a platform to be able to say, 'You know what? This is a public health issue. We need to be talking about sexual assault in our community.' And to us, the value of that, in and of itself, is huge."



Before demolition, the Center invited survivors and the community to fill their walls with encouraging graffiti and notes of hope to future survivors. Remnants from the walls featuring those words were given to a survivor artist who embedded those fragments into a new piece of artwork.

16 Florida Blue Foundation

Roida literacy Coalition and H Sol Learning About Health While Learning



English



ur focus is to help adult learners, most of whom are new to this country, develop English language, literacy and math skills while gaining real world knowledge to help them make informed health decisions.



Date: October 5, 2017 Room: 5101A **HEALTH LITERACY INITIATIVE**

Florida

In addition to helping organize and bring safety to what was once an ad-hoc system of finding work, El Sol has also served a critical role in bridging the gap to a successful life in the U.S. and the Jupiter community. Their programming addresses every aspect of life in the states, from working and managing finances to community service and, of course, health.

"Through the Florida Literacy Coalition, and the support that Florida Blue Foundation provides them for health literacy programming, El Sol has been able to integrate health education into our English as a Second Language, or ESL, programming," explains El Sol's Executive Director, Suzanne Cordero. "We're killing two birds with one stone."

"The need to learn English is a priority," she continues, "but we're using our ESL classes as a vehicle to provide this other information to them. So, while they're learning English, they're also learning about the importance of nutrition. They're learning how to read a prescription, or about taking vitamins or about what kinds of foods to eat and their names in English."

Every class also weaves in more formal health education about personal health, how the health system works in the U.S., and how it's different from the system in their home countries.

> "In Guatemala, for example," Suzanne explains, "you can go into the pharmacy and you can buy any kind of medication you want without a prescription.

Here, they have to understand that you can't do that. You can't decide you need an antibiotic because you have an earache and go into Walgreens and buy it. You have to have a prescription. You have to go to a doctor. You have to have an evaluation. So, part of it is understanding the logistics of it."

The other part is overcoming long-held cultural beliefs about health care, including limited knowledge about preventative medicine and real fears about going to the doctor.

"This is where the funding's actually really doing its job," says Suzanne. "It means that a mother of four, who is sitting in an ESL class at night, is not only learning how to speak English, but also what to do if one of her kids is sick ... and to not be afraid of the doctor ... and how to read a prescription ... and which foods are more healthy than others to prepare for her family and where she can get those."

According to Suzanne, this approach, which combines English language education with health education, is making a real impact because students are taking home what they're learning in class.

"They're learning English so they can go out and get a job and earn more money, yet they're also learning how to better take care of themselves and how to navigate the health care system in this country. It's more than just, 'Let's make sure you're getting to a doctor.' It's impacting the health of families everyday lives in their homes."

Feeding Food is a way we get there, but health is the outcome. ampa Bay

Feeding Tampa Bay is on the frontlines of the food insecurity crisis that is not only growing in Florida, but all across the United States. We sat down with Thomas Mantz, president and CEO of Feeding Tampa Bay, and a Florida Blue grantee, for a fullserving of Q&A around this rising issue and how it's impacting families, children, and (maybe surprisingly) seniors in increasing numbers.

FB: First and foremost, what does being "food insecure" mean?

TM: As we think about it, there are three conditions that you think about with food insecurity ... what we'd call the bio-cultural dimensions of food insecurity. First, is food physically available? Do you have a grocery store in your area? Can you get to it? Do you have a car? If you're a senior, can you get there? Next is economic access. So, can you afford food? And the third is biological utilization. Can you get food that allows you to grow physically, emotionally, spiritually, and otherwise? If any one of those three is not present, someone is considered food insecure.

FB: There's such complexity at the root of this problem. How do organizations like yours tackle fixing it?

TM: We have two outcomes that we want: health and capability. When we think about health, we think about access to nutritious food, and the outcomes of access to nutritious food. We connect folks with those resources. We have school pantries where, literally, there are pantries on campuses of elementary schools, high schools, and colleges here in Tampa Bay. We asked Florida Blue for an unusual request—transportation. Each of the two trucks they funded allowed us to get food into the community in different places in different ways. We have a senior delivery program. We use those trucks for mobile pantries. We'll go into a community, open up the truck and bring out pallets and pallets of food and ask the community to come in and just grab what they need. To answer your question more generically, availability is about breaking down the barriers to access. How do we get food to where people are?

The second thing we want is capability. And capability is really about closing the economic gap for folks between what they have and what they are obligated to support. We're providing maybe a couple of hundred dollars a month to a family in food value, but we also connect folks with SNAP, or WIC, or CHIP, which are all support programs. We might connect people to a job opportunity, or to a medical provider, or to someone who can help with financial management. And so, what we try and do is make sure we create economic capability for them. The final piece would be to get folks out of the "food line."

FB: What do most people get wrong about food insecurity? What don't they understand?

TM: That food insecurity is a health care matter; it's not a character matter. Far too often, we get involved in a conversation about what choices people are making, and should they be making different ones? Lack of access to food is a health care issue; it's not a morality issue.

Even in the food relief system space I'm in, I don't think we've understood that it was a health care crisis until the last three to four years. For the past 50 years, folks have said, "This is a community crisis and we need to respond to this." So, communities have gotten together—typically outside of government or the health care industry—and said "we need to do this" and that's how it was largely built.

Now, we've all started to say, on some level, "Well, wait a minute. What are we doing here? What are the outcomes that we want? And how do we start to attack this problem at its core?" As food relief organizations, we can simply



continue to deal with the symptoms, or we can work our way back upstream to the cause.

FB: How does this show up in our communities? It's a ripple effect, right? What other problems does food insecurity cause?

TM: There are many common outcomes from lack of access to food for children, and none of them are good. We know that the life-course perspective of that child is fundamentally altered as a result of not having access to healthy food. They will not see the same opportunities that other folks see because they will not have had the underlying capabilities that come with access to a healthy meal.

Very often in the senior population, you will see seniors who are choosing between food and medicine. And typically, they choose half of each, which really renders both ineffective.

We've done studies in the past ... We have people who have sold possessions for food. We have mothers who watered down baby formula in order to make it go farther. We did a study of high school kids here in the Tampa Bay area, where we found kids who were stealing food or stealing money for food. Not socially acceptable ways of acquiring food. It's not just, "I don't have a meal today," it's that ongoing challenge of access.

One of the things that starts to happen to food insecure families is that a lack of food starts to make it through the family. You live in a familial situation or community situation where legacy, recipes, behaviors, and food awareness and education were passed down through the

family, which is how many people learn. It's very hard for a mother or father or grandmother to teach a child to cook, if they don't have the foods to do that. So, you also start to see the breakdown of certain familial and community bonds and once that starts to change, you find a greater degree of disconnection.

FB: Part of the Florida Blue Foundation's grant has gone to support increasing access to healthy food for Feeding Tampa Bay. So, in addition to the vehicles, there are new spaces in your facility that will be coming and other new programs as well. What else will be new "on the menu?"

TM: We're working on building systems and programs that directly attack the underlying issue, which is, how do we create health? We're having conversations right now with a hospital chain here in Florida, in our service territory, where our goal will be to have all of the physicians in the hospital ask a two-question screen created by the USDA for food insecurity. We're going to try to get all the doctors in their system to ask that two-question screening of their patients. And if they answer positively, we're going to create a pathway to get food relief. We're also doing a farmers' market with Florida Blue to increase access to healthy food by three percent in a defined area of a zip code. We really want to see if we can raise the capability for accessing healthy foods in that area and the health outcomes as a result.

We know that the outcome of access to healthy food is a healthy person. Food is a way we get there, but health is the outcome.

Healthy Communities

Start with Kids

Mami HAT and HAT Academy

6 Alongside all the wealth that exists in Miami, not many people speak of the poverty that exists in Miami and South Florida," explains Ralph Leon, Senior Director of Community Affairs at the Miami HEAT. "There's a tremendous responsibility for the private sector to step up and help. So, we're extremely proud to be able to walk alongside Florida Blue and Carnival in that endeavor."

The "endeavor" that Ralph references in this instance is one of the flagship programs of the Miami HEAT's corporate social responsibility efforts, the HEAT Academy. This free after-school program encourages the academic success of about 350 third-, fourth-, and fifth-graders from elementary schools in Miami's most economically disadvantaged inner-city neighborhoods: Overtown, Little Haiti and Little Havana.

The goal is to help them develop the skills they need to compete academically with peers across Florida by focusing on developing the reading, writing, and math skills that are tied to the Florida Standards Assessment (FSA) exam. The program also provides a safe place after school to keep kids out of trouble and in the company of positive role models from the Miami HEAT Business Operations staff.

While the HEAT Academy regularly boasts outcomes that show students outperforming their same-school peers on the FSA exam and attending school more regularly, one of the truly unique aspects of the program is how it bridges to other Miami HEAT programming (like the HEAT's School-to-Work program developed in partnership with Big Brothers Big Sisters of Miami) to follow many of the same students as they transition to middle school and high school. This commitment to supporting students across their academic journey offers a different model for the way the private sector can impact public education, and even caught the attention of Secretary of Education Arne Duncan in 2013, who invited Miami Heat staffers to the White House to talk about how similar efforts could be extended across other urban districts around the United States.

The Florida Blue Foundation sat down with Ralph Leon to talk more about the HEAT Academy, the NBA team's commitment to corporate social responsibility, and the nearly two-decades-old partnership that exists between Florida Blue and the Miami HEAT.





FB: Why is the HEAT Academy so important to the way the Miami **HEAT hopes to "show up" as an** impactful member of the community it belongs to?

RL: We wanted to create something that's sustainable. I think it's easy for different corporations or sports teams to sometimes do "one-off" events and just move on from there. In order to make profound change, and have a profound impact on people's lives and in communities, we felt we needed to create something that's going to be sustainable and have deep roots and meaning. That's one thing that we've found with the HEAT Academy; we wanted to make that commitment in terms of education because education is the key to a successful, productive society.

FB: The HEAT Academy works with students at three inner city schools: Paul Laurence Dunbar K-8 Center in Overtown, Jesse J. McCrary, Jr. Elementary in Little Haiti, and Riverside **Elementary in Little Havana. Why these** students?

We want to invest in those young people who don't have the same advantages that perhaps those in other communities and other families may have. We wanted to focus on them—and shine a spotlight on them—and give them the reinforcement that the Miami HEAT was behind them. And it wasn't just going to be lip service. We've backed this up with the help of Florida Blue, Carnival and our own investment. The commitment is close to over \$250,000 annually.

FB: The Miami HEAT, the Carnival Corporation and Florida Blue—these are three powerhouse organizations here in Florida. How has the partnership across all three company's Foundations helped extend the impact of the **HEAT Academy?**

RL: In the community affairs world, we're always looking for partners that have that same commitment, that same mission and drive to impact our community in a positive way and touch the lives of individuals. We wouldn't be able to do it on our own. When you talk about the Carnival Foundation, you could go back decades and see their commitment and how philanthropic they are to the various needs of this community. And then you have Florida Blue, who, I will say, is probably our biggest social responsibility supporter and sponsor. I've been here for 20 years and it's probably close to that since Florida Blue has been a partner of ours. They, too, "put their money where their mouth is" to help benefit this community in more ways than one. When you have partners like these that are committed to affecting real change—that's when real change can happen.

FB: Having similar goals is also important, and we're very excited to team up with the Miami HEAT around some new projects related to creating awareness about mental health. Why has this issue become so important to the Miami HEAT?

Just a couple of weeks ago-and I'm extremely proud of this-the NBA actually mandated that each NBA team have a mental health professional on retainer for their players and coaches. This is setting the bar in a way that is so progressive when it comes to mental health and mental wellness, and it's going to empower people to be able to speak about their own issues.

The last couple of years, we've been really trying to get the message across about the importance of destigmatizing discussions over mental health and mental well-being. Athletes are oftentimes viewed as these powerful figures—they're seen as a symbol of strength and whatnot. And, when you have a Miami HEAT player like Justise Winslow, who, a few months ago, talked about how he went through a dark period of anxiety and depression when he was injured. To see his vulnerabilities and how he recovered, provides an example to anyone who may be going through something. That it's okay ... to talk about it and be able to find the help you need. I'm really excited for this next chapter with Florida Blue and being able to shine a spotlight on that kind of courage.

FB: Absolutely. We see no limit to the way our partnership can make a difference in the health and well-being of the people of Florida. Thanks!

MPOWRHOW Telehealth Can Expand Mental Health Care

Seven years ago, IMPOWER launched its telehealth services in an effort to fix what President and CEO Anna Baznik could only describe as a very practical (and scary) need: "Well, we couldn't find a psychiatrist to save a life."

A nonprofit mental health and child well-being organization, IMPOWER offers services that facilitate adoption and foster care placements, as well as provide support and treatment programs for adolescents suffering from drug or alcohol addiction. They maintain two residential facilities, and also work with state and county governments to manage Seminole County's Juvenile Drug Court, which offers delinquent minors a rehabilitative course as an alternative to the traditional judicial system.

Mental health services are the common tie that binds all of IMPOWER's services and their patient population—at-risk children and adolescents suffering from drug addiction or kids requiring support as they make their way through adoption proceedings or the state's foster care system—are not the kind of people anyone would want to keep waiting when it comes to receiving psychiatric support.

The solution back then was to either transport the patient to Orlando, or have a psychiatrist from Orlando drive out toward the Coast (Brevard County stretches up from Cocoa Beach to Titusville and down past Melbourne). Either way, the cost for the drive was significant, logistical planning added stress for everyone involved, and, most importantly, delayed care significantly heightened the risk of potentially disastrous outcomes.

Anna established IMPOWER's telehealth program in 2013 to take matters into her own hands—making her organization one of the first in Florida (if not the very first) to use the technology to expand their ability to deliver mental health care.

"Our roots are actually in the behavioral health world," she explains. "We were one of the first entities that went into homes and into schools to provide mental health services. We still do that to a degree, but we've grown greatly since 1994. We now do mental health services, community services and psychiatric services in all outpatient settings using telehealth for those three areas statewide. We have closed all our physical offices and are pretty much a virtual organization."

With so much experience using what is still widely regarded as an "emerging" technology, Anna and IMPOWER have learned some valuable lessons about the power of telehealth over the past seven years. As many states, including Florida, continue to look at reimbursement and coverage models for this new way of delivering care, IMPOWER's experience has found the following:



Lesson 1—Telehealth Makes it Easier for **People to Get Care**

"Our no-show rate for our psychiatric clinic was about sixty percent; we are now down to about twelve percent."

Anna attributes a myriad of reasons to that significant drop but, part of it, she believes, is convenience. "A lot of our clients will go out on their lunch break, will go out to their car on their smart device and will have a session with their therapist or their psychiatrist." For IMPOWER, because they deal with minors, there are often other stakeholders and caregivers involved in the visit. "So, mom can be in one place, guardian online at another place, foster parent at another place, general practitioner—they're all in the same session but in different places."

There's also a comfort factor for the patient, which for a young adult or adolescent, especially, can provide a sense of control. "It's on their grounds," says Anna, "whether it's on their cell phone where they feel more comfortable, or in their bedroom where it might be private. There's a comfort of being in your own safe place."

Lesson 2—Outcomes Via Telehealth are the Same or Better, BUT with Fewer Drugs

As IMPOWER refined its ability to deliver psychiatric services using a telehealth platform in lieu of office visits, one of the challenges Anna and her team needed to overcome was being able to prescribe controlled substances via a "screen" rather than an in-person meeting.

While a lot of the drugs prescribed in psychiatric practice are controlled substances, Anna explains, most are nonnarcotic. Still, the Florida Board of Medicine, in order to uphold regulations passed in attempt to curb the opioid epidemic, required IMPOWER to complete an outcome study in order to get a waiver.

What did they find out? "Well, our practitioners actually prescribe 10 percent fewer drugs via telehealth," says Anna. "We think that it's because people are staying consistent with their appointments, consistent with their medication when needed."

Other outcome studies, including a retroactive study conducted by University of North Florida (UNF), found same or better outcomes when looking at the impact of IMPOWER's traditional face-toface mental health services versus those delivered via the new virtual platform. "They found the same thing," says Anna about the UNF study, "Same or better outcomes. Same high client satisfaction."

Lesson 3—With the Oncoming Physician Shortage, Telehealth is The Future

When Anna initially turned to telehealth in 2013, it was to solve an "access to care" problem for her patient population. There weren't enough psychiatrists available in Brevard County. And now? "Well, we have a waiting list of practitioners wanting to work with us. The provider can be anywhere in the state ... their patient can be anywhere in the state ... and they can work out of their home office."

Having a "virtual office" from which to meet patients is not only a "nice to have" for these psychiatrists—it's an absolute must if Floridians are going to be able to access the mental health services they need in the future.

There's already a shortage, and as Anna rattles through some statistics, it becomes clear how scarce care will quickly become ... especially when she notes that the average age of a psychiatrist in the U.S. is 55 years old.

With retirement looming for many of these doctors, Anna says pointedly, "You're just not going to get treatment in your traditional model."

Telehealth, she says, is just "another kind of methodology."

"It's really not a service," she explains. "My father would be 106 years old if he were alive today. When he or my grandfather were sick and needed a doctor, the doctor came to their home on a horse. Now, the doctor is coming back to our home, but they're coming in on a smart device and we're not doing our services any differently than if you were physically standing in front of us."



This year, the Florida Blue Foundation recognized IMPOWER's Telehealth (Virtual) Mental Health Services as its Sapphire Award Honoree in the Program Category—the highest honor in that category and one of only four honorees across all categories at this year's celebration.

Community Health Symposium Sapphire Awards

SAPPHIRE

Each year, the Florida Blue Foundation Community Health Symposium and Sapphire Awards brings together the people and organizations making a difference in the health and well-being of the people of Florida.

A two-day event, the program begins with the Community Health Symposium, a professional development program for nonprofit leaders that shares best-in-class thinking and strategy for community health improvement.

The highlight of the event is the Sapphire Awards ceremony, which recognizes people and organizations who have demonstrated excellence and innovation helping impact the health of Florida's at-risk people and communities.

Since its inception in 2005, the Foundation has honored 24 individuals and 74 programs/organizations, and invested well over \$4.5M in grants to the Sapphire honorees.

INDIVIDUAL Category

HONOREE

Alonzo H. Mourning, Jr.

Founder, Mourning Family Foundation Miami, Miami-Dade County

HONOREE

Angie Romagosa

President/CEO, The Christian **Sharing Center**

Longwood, Seminole County

FINALIST

Alberto M. Carvalho

Superintendent of Schools, Miami-Dade County Public Schools

Miami, Miami-Dade County

PROGRAM Category

HONOREE

Telehealth (Virtual) Mental Health

Services

IMPOWER

Longwood, Seminole County

FINALIST

Early Childhood Court

The Florida Center for Early Childhood Sarasota, Sarasota County

FINALIST

Limbitless Solutions

University of Central Florida Foundation Orlando, Orange County

ORGANIZATION Category

HONOREE

I.M. Sulzbacher Center for the Homeless

Jacksonville, Duval County

FINALIST

Miami Beach Community Health Center

Miami, Miami-Dade County

FINALIST

The Sundari Foundation

Miami, Miami-Dade County

FINALIST

Pine Castle

Jacksonville, Duval County



SAPPHIRE AWARDS REVIEW TEAM

Henrie M. Treadwell, PhD, Professor, Department of Community Health and Preventive Medicine, and Founding Director, Community Voices, Morehouse School of Medicine; Atlanta, Georgia

LaRon E. Nelson, PhD, RN, FNP, FNAP, Associate Dean for Global Health & Equity, Independence Foundation Professor, Associate Professor of Nursing, Yale University; New Haven, Connecticut

Ken Peach, Executive Director, Health Council of East Central Florida; Winter Park, Florida

Terry J. Rhodes, DMin, Director of Research, Evaluation and Systems, The Ounce of Prevention Fund of Florida; Tallahassee, Florida

SAPPHIRE AWARDS SELECTION COMMITTEE

David Collis, Foundation President, AdventHealth; Orlando, Florida

Nancy Sisson Hardt, MD, Professor Emerita, University of Florida College of Medicine; Gainesville, Florida

Curtis Holloman, MA, MBA, Philanthropic Consultant; St. Petersburg, Florida

Margaret D. Larkins-Pettigrew, MD, MEd, MPPM, FACOG, Assistant Professor and Director, Global Health/OBGYN, MacDonald Women's Hospital, Case Western University School of Medicine; Cleveland, Ohio

Penny Ralston, PhD, Professor, Dean Emeritus and Director, Center on Better Health and Life for Underserved Populations, Florida State University; Tallahassee, Florida

Anthony C. Speights, MD, Assistant Professor, Family Medicine and Rural Health, and Director of Rural Medical Education, College of Medicine, Florida State University; Tallahassee, Florida

Florida Blue Colonida Blue Col

Florida Blue provides employees with opportunities to give back to the community and help advance the company's mission of helping people and communities achieve better health.

Through an array of year-long volunteer opportunities, company-wide drives to collect toys, food, and school supplies for the underprivileged, and fundraising partnerships with national organizations like United Way, Florida Blue Volunteers contribute to helping improve the lives of the people of Florida.





Community support begins with taking care of people who are part of our everyday lives; the people with whom we live, work, and play.

Lift by GuideWell is GuideWell's employeeto-employee assistance program, which provides one-time hardship grants to help employees weather the financial strain brought about by tragic, unexpected events or natural disasters.



1,700

employees contributed a total of

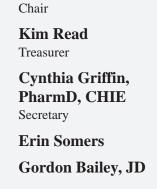
\$371,U

to Lift—far beyond the intended goal of \$250,000. The funds were turned into 180 grants and given to employees in need of a small financial boost to get through the sudden death of an immediate family member, the unexpected job loss of a spouse, or other adverse events that might cause undue financial burden. The grants, which do not have to be repaid, help ensure that the basic "life needs" of employees going through tough times are met, thanks to the generosity and kindness of their colleagues.

Foundation **Board of Directors**







Camille Harrison







In Memoriam

2018 was a sad year for our Florida Blue team, as we lost two valued members: Gary Healy, the Foundation's Treasurer, passed away in June, and Kerri Masley, CSR Director, lost her battle to cancer in October. We will never forget them and their contributions to our community.

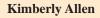




Our Corporate Social

Responsibility

Team



CSR Evaluation & Research Manager

Tim Cromwell, CPA

Director, Finance and Operations

Heidi Curtis

CSR Senior Manager

Cathryn DeCecco

CSR Regional Manager, Central Florida

CSR Regional Manager, North Florida

Jay Farley

Executive Assistant

Ryan Graff

Senior Program Manager

Sharon Hackney

Senior Program Manager

Michelle Hamilton

CSR Regional Manager, West Florida

Lyn Jagers

Administrative Assistant

Racquel Lee-Sin

Grant Administrator

Deirdre M. MacCarthy

Assistant Secretary to the Foundation Board

Lisa Mathews

Specialist, Finance and Operations

Velma Monteiro-Tribble

Director, Grants and Programs

Debbie Moore

CSR Employee Programs Manager

Martha de la Pena Rojas

CSR Regional Manager, South Florida

Susan Towler

Vice President, Florida Blue Foundation; and Executive Director, Florida Blue Corporate Social Responsibility

Susan F. Wildes

Senior Program Manager



Guiding Principles Values

RESPECT INTEGRITY IMAGINATION COURAGE EXCELLENCE



A leading innovator enabling healthy communities

Mission

Help people and communities achieve better health

FOCUS areas

Advance Innovation and Promote Solutions in the Health Care System

- Focus on innovative ideas and programs, and best practice models for new health solutions serving underserved populations
 - Focus on access to affordable, nontraditional health service delivery support for "aging in place" program

Build Healthy, Strong

Focus on local grants to meet local community needs in the areas of

- Health and Human Services
- Education/Literacy, especially birth through age 5
- Community Development, and Arts and Culture

Improve Consumer Health

Focus on healthy lifestyles to promote better health in communities

 Competitive grant programs for family wellness in multicultural populations using already demonstrated, sound, evidence-based materials.



ommunity Health Symposium and Sapphire Awards

The Symposium provides professional development opportunities and workshops on a variety of health and health-related topics for professionals and staff.

The purpose of the Sapphire Awards is to recognize excellence and innovation among organizations, programs and individuals that have made a significant and positive impact on community health and health-related outcomes for Florida's at-risk people and communities.

Improve Quality and Safety of Patient Care

Focus on developing health professional programs with focus on workforce shortages and expertise to serve special populations (seniors, disabled, etc.)

Focus on exploring opportunities for caregiver education and support for "aging in place" program Continue to co-lead Florida Action Coalition



Foundation

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