What are the top healthcare issues in Arizona?

- 1. Affordable Insurance coverage for as many Arizonans as possible
 - Even for people who are covered there is a level of uncertainty regarding that coverage
 whether it be because of policy changes at the federal level, the implementations of
 changes to the Medicaid program, etc. So it is a nuanced issue there are still insurance
 coverage issues but growing uncertainty -including uncontrollable costs and premiums for
 many.
 - Continued and robust viability of the Medicaid program to your list. Between federal
 pressures, state waivers, and a budget cutting legislature, this should be on every top five
 list. Medicare is also at risk.
 - Stakeholders experience this pressure in different ways, and there are competing narratives around the causes and solutions
 - Reimbursement models. You mention Value Based Plans and accountability, but there are
 other issues as well. For example, how do you keep services viable in areas with a
 predominant public payer mix?
- 2. Adequate healthcare workforce
 - a. Explicitly call out mental health workforce issues as well as direct care workers- we are going to see increasing pressure specifically in the direct care worker area at a time when the population needs for the services are only increasing.
- 3. Health disparities inadequate funding and investment around addressing social determinants of health as they drive 50%+ of healthcare cost.
 - a. Housing (can't take care of your health if you have no place to live...)
- 4. Technology and technology/cyber security.
- 5. Market disruption & transformation. Who knows what the industry will look like in 10-15 years. Some of this is due to affordability, but also consumers want convenience.
 - a. The continued shift to value-based care and accountable care. It is certainly a market trend that is driving innovation and should be acknowledged.
- 6. The opioid issue
 - a. Long term behavioral health treatment

Other issues:

- Less direct issue but just as important the ongoing state budget pressures and the challenges in funding education- which is a clear priority for the legislature as it should be - but it will leave little room to fund health care spending unless revenue growth increases.
- Other disruptive players (pharmacy clinics, redirect health, direct primary care, association health plans, etc.)

Viewpoints from:

Jim Hammond – Hertel Report – health insurance consultant Deb Gullett – Assoc. of Medicaid providers
Beth Koehler – consultant (former AHCCCS Deputy Director)
Tara Plese – Association of Community Health Centers
Brett McClain – St. Joseph's Hospital and Medical Center
Debbie Johnston – AZ Hospital and Healthcare Association
Joe Gaudio – United Healthcare

Trend	What is Vitalyst doing?
Affordable Insurance coverage	Funding navigators for KidsCare, Medicaid, Marketplace, SNAP and TANF enrollment outreach; convening Cover AZ; investing in targeted media for insurance promotion; analyses of Medicaid reforms (work requirements, prior quarter coverage, non-emergency medical transportation); Medicaid overview publication; analyses of implications of short-term medical policies; letters to and meetings with Congressional delegates and state officials; media interviews; supporting the Cover Kids Coalition for children's coverage advocacy; numerous presentations across the state
Adequate healthcare workforce	Working on healthcare pipeline efforts with GPEC, Center for the Future of AZ and Phoenix Chamber; Supporting community health worker capacity-building and legislation; supporting expansion of the state loan repayment program; cross-training navigators and CHWs to develop a direct care workforce
Health disparities	Live Well AZ; Work on food policy, housing and transportation; conference and presentations on reducing readmissions by addressing social determinants; influencing hospital community benefit investments, health needs assessments and community health improvement plans;
Technology and technology/cyber security.	Telemedicine report looking at AZ system and what policy changes are needed; pursuing policies that enable telehealth coverage parity; enhancing interoperability of the state health information exchange;
Market disruption & transformation	Report on AZ ACOs; Work with Hertel report on Value based programs; working with HFMA on conference to highlight value-based post-acute strategies; working on the evolution of EMS (e.g., community paramedicine, treat and refer); presentations to various groups about the direction of health care;
The opioid issue – behavioral health	Helping Hushabye Nursery to become the first NAS step down unit in the Southwest; work related to housing instability is also linked to substance abuse; protecting Medicaid coverage