



**Arizona Alliance**  
FOR COMMUNITY HEALTH CENTERS

Primary Healthcare for All

# Arizona's Health Centers

Rural & Public Health Policy Forum

February 6, 2024

# Mission:

Advance the vital work of  
Community Health Centers  
to serve the unique needs of  
our communities

# Vision:

Equitable access to high  
quality healthcare for  
everyone



# Arizona's Primary Care Association (PCA)

- Nonprofit member organization
- HRSA-funded as PCA
- Arizona's largest primary care network

- PCA Requirements:
  - Provide CHCs with training & technical assistance (TA)
  - Grow health center program by providing TA to organizations interested in becoming a CHC

- Other Key Activities:
  - Programmatic support
  - Advocacy

# The Community Health Center Movement

Improving Health Equity,  
Changing Lives

Columbia Point  
Health Center

# A History of Impact

“ Of all the forms of inequality, injustice in health is the most shocking and inhuman ... ”  
– Martin Luther King



- Civil rights activists fight to improve the lives of Americans living in deep poverty and without healthcare

1960s



- Funded as a demonstration project under President Johnson's War on Poverty
- First Community Health Centers open in Boston and the Mississippi Delta

1965



- Removed traditional barriers to care
- Opened access in communities without doctors and primary care
- Addressed the roots of chronic and poor health conditions

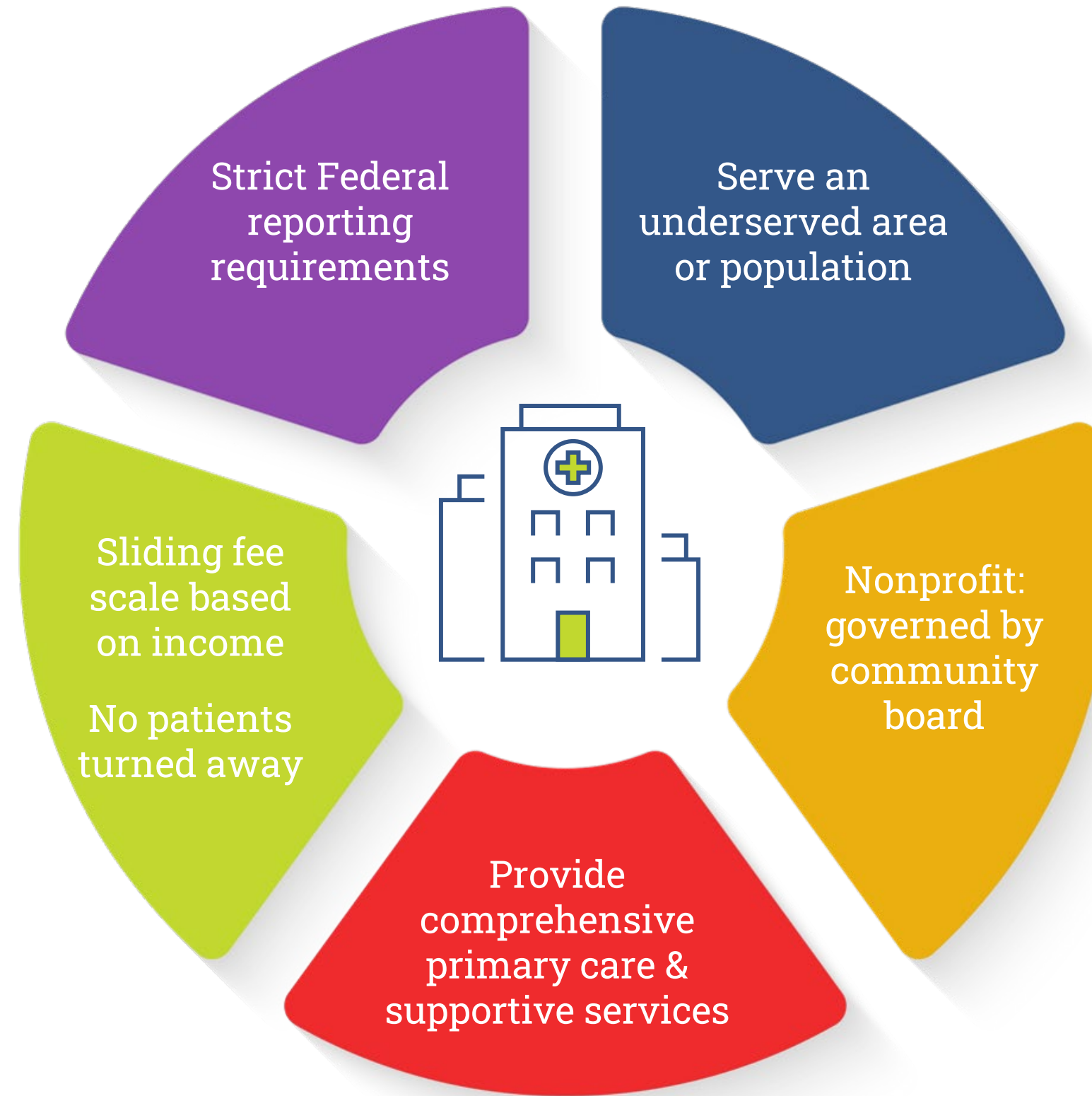
1970s – 2000s



- 1,400 Community Health Centers and Look-alikes across the country
- 14,000 locations
- 30 million patients
- 270,000 full-time employees

2023

# The CHC Model Today

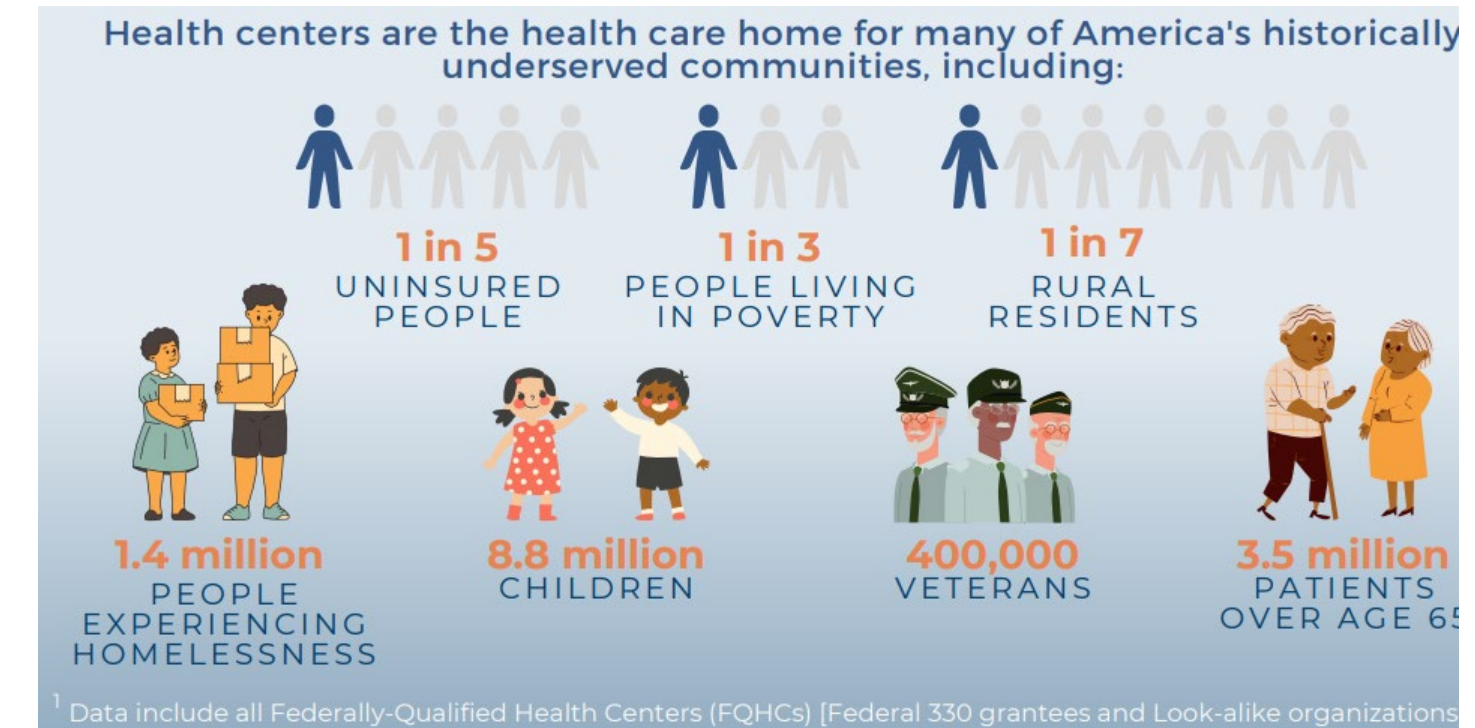


# Health Center Services



# Health Center Program Today

- Over 1,400 Community Health Centers and Look-alikes across the country
- 15,000 locations
- 31.5 million patients
- 285,000 employees (FTE)





# Arizona's Health Centers



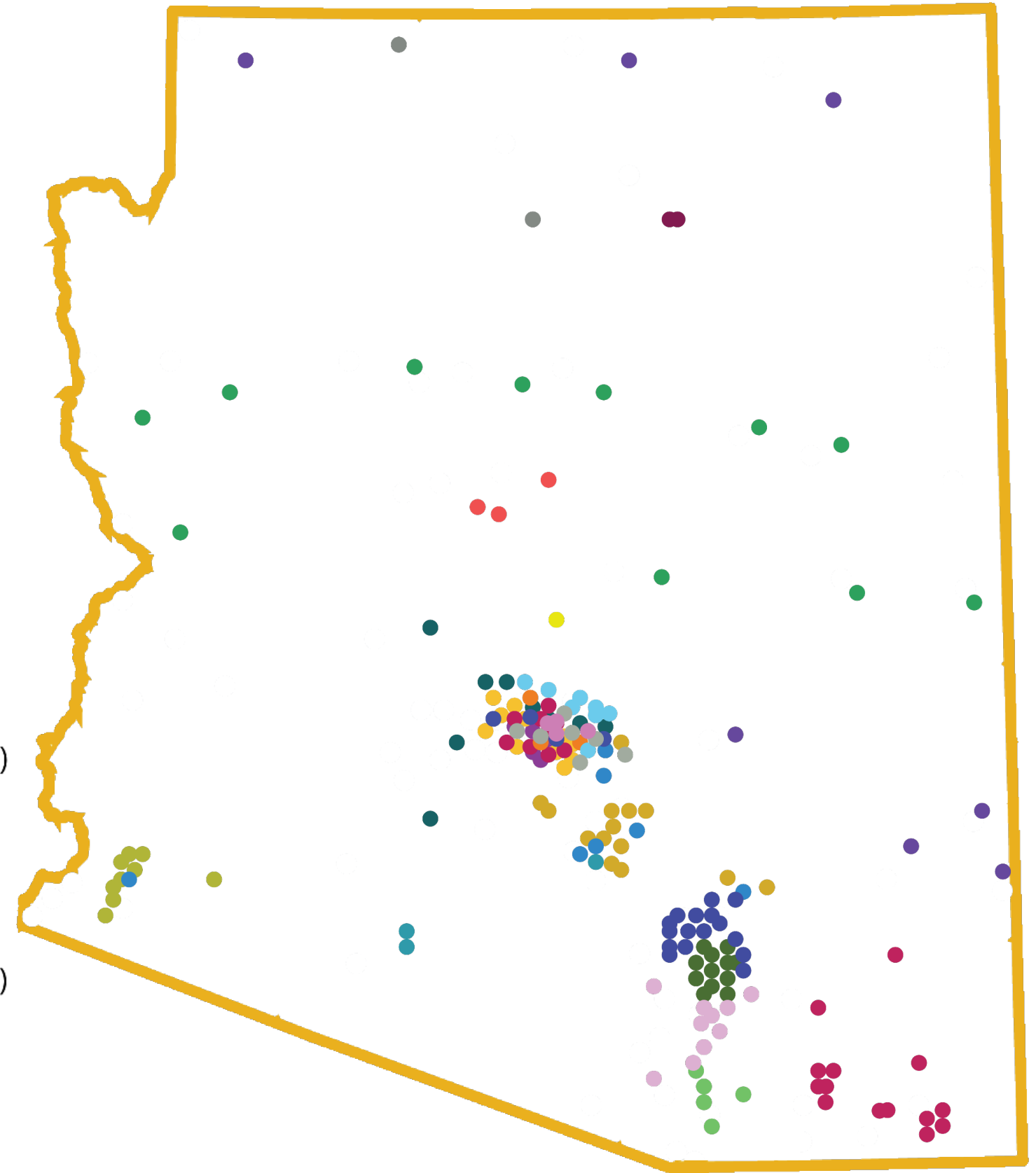
# State Access Overview

24 Health Center Program Grantees/LALs with 200+ delivery sites across Arizona

- Adelante Healthcare (10\*)
- Black Canyon Community Health Center (1)
- Canyonlands Healthcare (10\*)
- Chiricahua Community Health Centers (22\*)
- Circle the City (5\*)
- Community Health Centers of Yavapai (3)
- Creek Valley Health Center (1)
- Desert Senita Community Health Center (3)
- El Rio Health (14)
- Horizon Health and Wellness (7)
- Mariposa Community Health Center (6)
- MHC Healthcare (16)
- Mountain Park Health Center (11)
- NATIVE HEALTH (3)

- Neighborhood Outreach Access to Health (6)
- North Country HealthCare (16\*)
- Sun Life Health (15\*)
- Sunset Health (9\*)
- Terros Health (5\*)
- Tuba City Regional Health Care Corporation (2\*)
- United Community Health Center (13\*)
- Valle del Sol (9\*)
- Valleywise Health (12\*)
- Wesley Community & Health Centers (5\*)

\*Count includes mobile clinic(s)





# 2022 UDS- Statewide Impact



817,026

Patients Served



3,503,011

Patient Visits



8,578

Staff FTE

## Gender

61% Female 39% Male

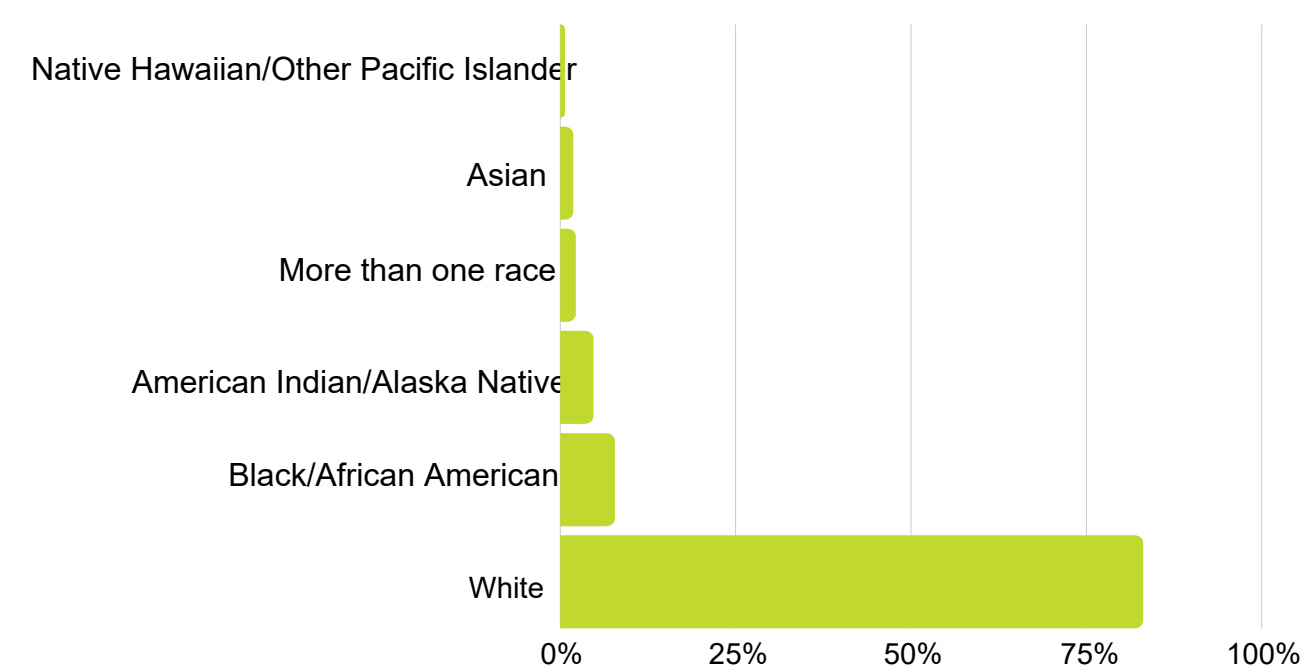
## Age

27% Under 18  
60% 18 to 64  
13% 65 and older

## Ethnicity

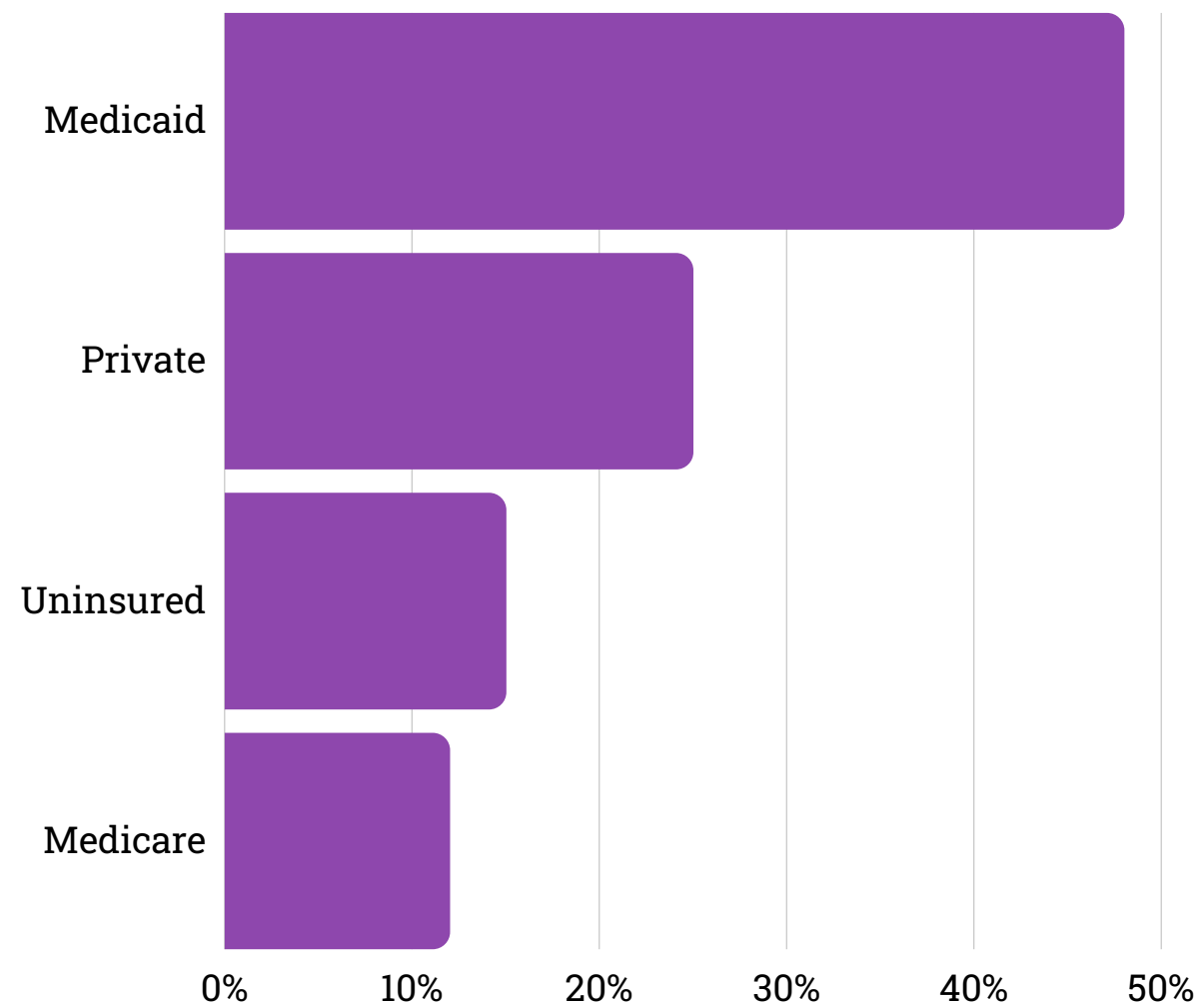
51% Hispanic/Latino 49% Non-Hispanic/Latino

## Race

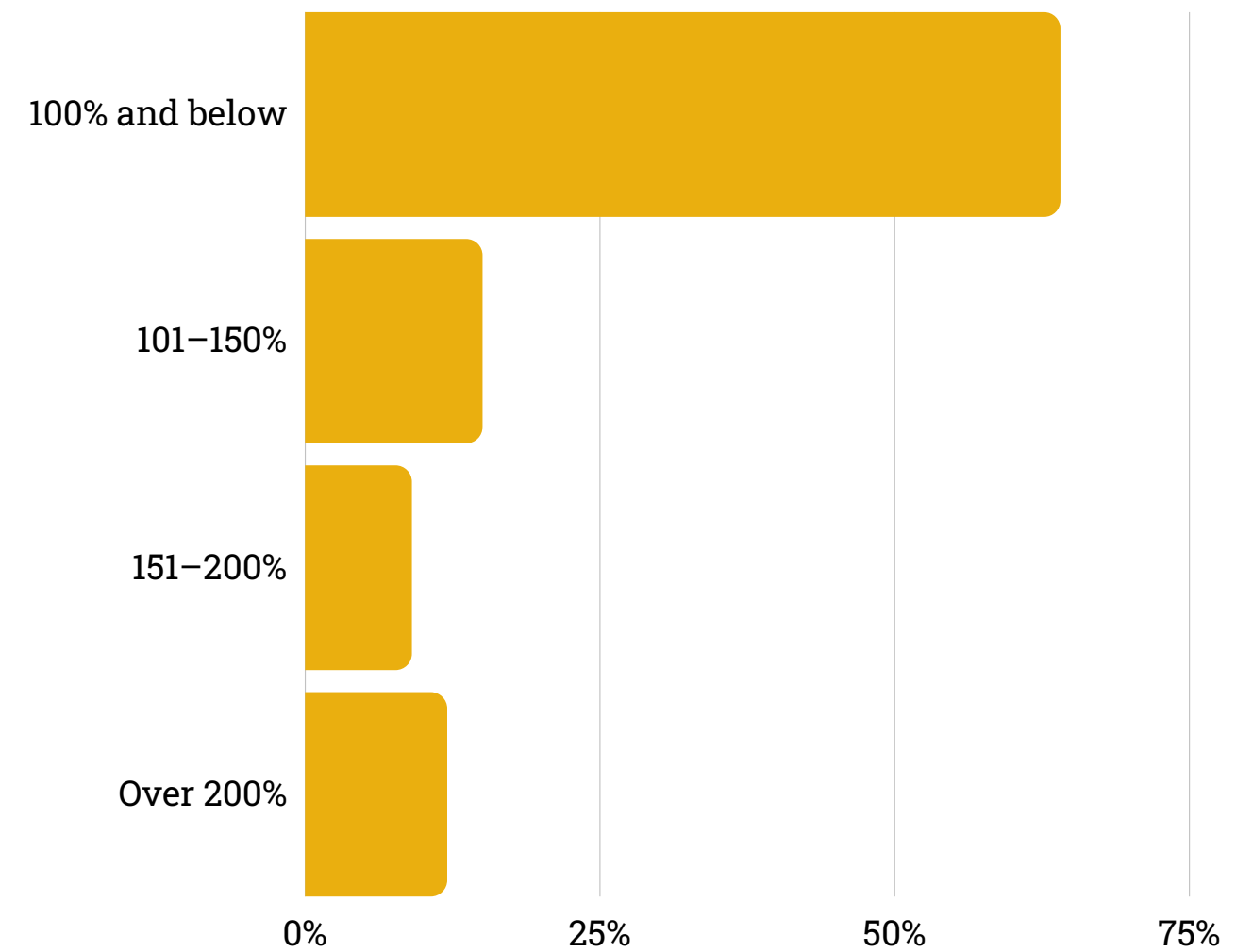


# 2022 UDS- Statewide Impact

## Payer Mix



## Federal Poverty Level





# 2022 UDS- Statewide Impact

## Special Populations



194,424

Patients  
Best Served in  
Languages Other  
than English



237,769

Individuals in or  
adjacent to  
Public Housing



33,690

Individuals  
Experiencing  
Homelessness



24,161

Gender and Sexual  
Minorities



14,042

Veterans




10,795

Agricultural Workers  
or Dependents

# Key Partnerships





# AACHC Bill: Graduate Medical Education

# HB2520: Community Health Centers; Graduate Education (Pena, LD23)

- HB2392 (2021)
- Required AHCCCS to reimburse CHCs & RHCs for primary care GME programs

- CMS denied approval of the GME SPA in 2023

- HB2520 makes changes:
  - Eliminates reference to “GME Program”
  - Instead reimburses for “GME direct and indirect services”



# AACHC Bill: 340B Drugs Distribution



# What is the 340B Program?

340B Program	Covered Entities	Purpose of the Program	340B Providers	340B Program
<ul style="list-style-type: none"><li>• Created by Congress 30+ years ago</li><li>• Required pharmaceutical manufacturers to provide 340B drugs at a discounted rate</li></ul>	<ul style="list-style-type: none"><li>• Must care for a significant number of uninsured and low-income patients</li></ul>	<ul style="list-style-type: none"><li>• Intended to stretch limited federal resources</li><li>• Make drugs &amp; services affordable for those in need</li></ul>	<ul style="list-style-type: none"><li>• Provide free and low-cost drugs to patients</li><li>• Reinvest in patient services</li></ul>	<ul style="list-style-type: none"><li>• Helps to make medications affordable</li><li>• Improves health outcomes</li><li>• Lowers costs</li></ul>

# Current 340B Challenge

- **Restrictions**

- Pharmaceutical manufacturers imposing restrictions on 340B
- Some manufacturers restricting to one contract pharmacy per CHC (if any)

- **Impacts**

- Places undue burdens on patients
- Makes drugs unaffordable and unattainable
- Directly impacts safety net provider funding

- **Solution**

- SB1251: 340B Drugs; Covered Entities; Distribution

# SB1251: 340B Drugs; Covered Entities; Distribution (Shope, LD16)

## Provisions

- Requires pharmaceutical manufacturers to distribute 340B drugs to contract pharmacies in Arizona

## Enforcement

- Board of Pharmacy
- Unlawful practice enforced by Attorney General

## Conditions

- Prohibits requiring claims or utilization data as a condition of distribution

## Results

- Makes drugs affordable and available for Arizonans
- Distributes 340B drugs near where Arizonans live and work

Thank you!

