



2/18/25

**Arizona Rural & Public Health
Policy Forum**

Tuesday, February 18, 2025 | 9:30 am - 4:30 pm
Virginia G. Piper Auditorium
600 E. Van Buren Street
Phoenix, AZ



Closing Remarks

Advancing Economic Development: Arizona Health Workforce

Daniel Derksen, MD

Associate Vice President for Rural Health
Workforce Development Initiatives

Director, Arizona Center for Rural Health
Senior Advisor, Area Health Education Centers

dderksen@arizona.edu



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US, AZ Maternal Health: Case Example

Link: https://crh.arizona.edu/sites/default/files/2024-04/240429_AZ_Rural-Maternity-Care.pdf

ARIZONA RURAL MATERNITY CARE



Updated April 24, 2024

Prepared by: Bryna Koch, DrPH | brynak@arizona.edu

Daniel Derksen, MD | dderksen@arizona.edu



BACKGROUND

- ▶ The United States has the highest maternal mortality rate of developed countries¹ defined as maternal death during pregnancy, childbirth or within *42 days after delivery*.

	OECD 38	US	Arizona ²
Maternal Mortality per 100,000 Live Births	10.9	21.1	31.4





No obstetrics: La Paz, Greenlee

Low access: Graham, Cochise

Strategies to address unmet needs:

Expand labor & delivery services: teams with

Ob/Gyn, family physicians, midwives, PA

Align incentives (e.g., Medicaid payment)

Expand training in high need areas using:

Health Professional Shortage Areas (HPSA)

Rural Maternity and Obstetric Management

Strategies (RMOMS): Mariposa

<https://www.hrsa.gov/rural-health/grants/rural-community/rmoms/fy24-cohort>



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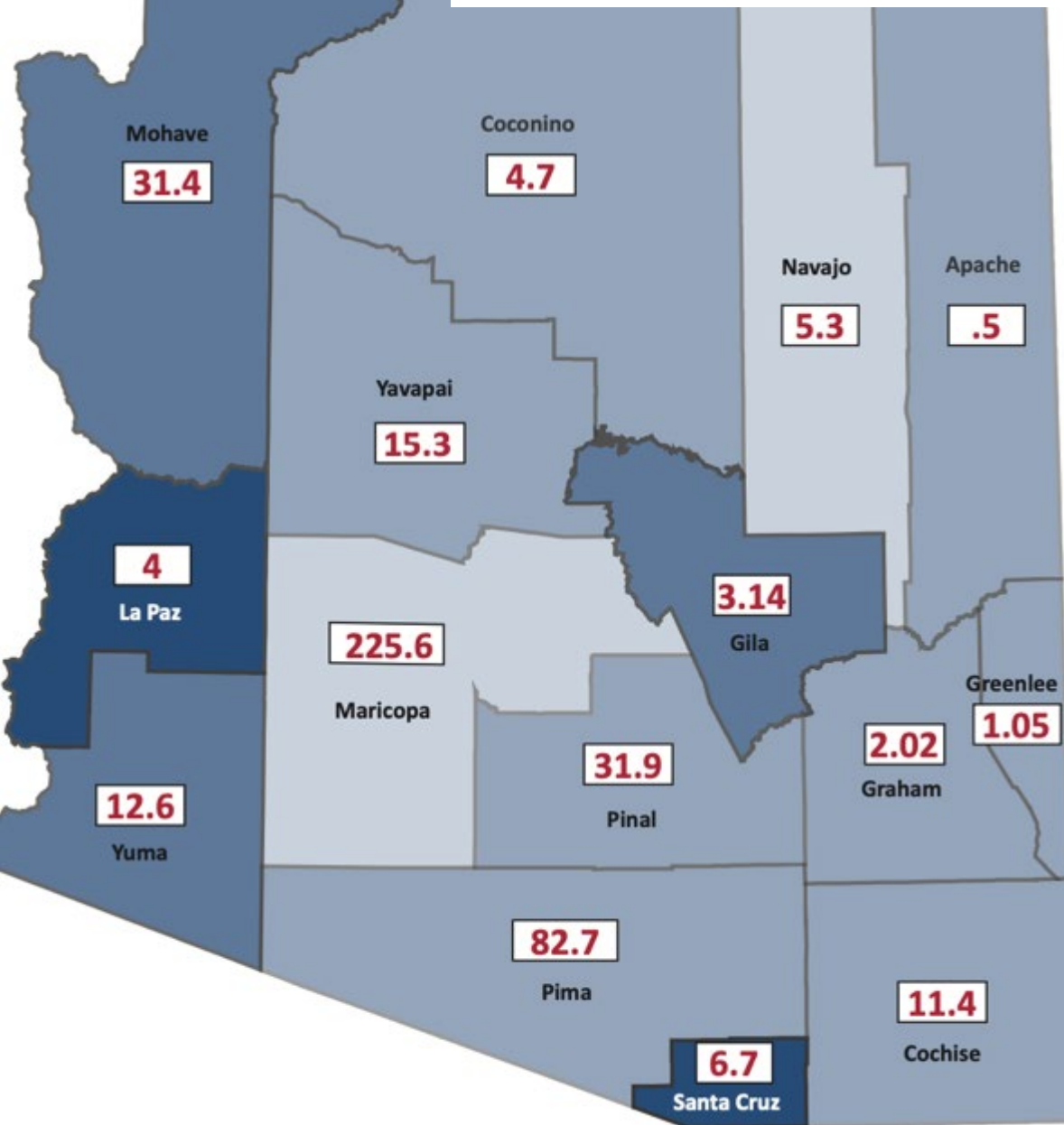
Case Example 2: Arizona lags other states in active, licensed physicians due to rapid population growth

State Rank	Metric: Provider Type with Active Licenses per 100,000 pop.	# AZ per 100,000	# US per 100,000
42	Primary Care Physicians (PCP)	80	94
32	Total Physicians (MD/DO)	256	302

Over 15 years (2008-23) Arizona's population grew 1.13% per year (US was 0.47% per year)

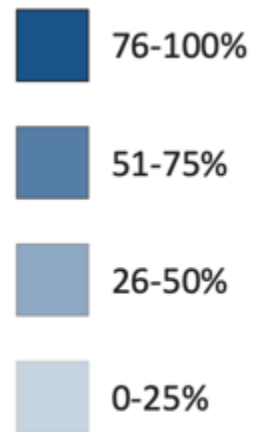
Sources see: <https://crh.arizona.edu/publications/workforce-reports-briefs>

Percent Living in Primary Care Shortage Areas (HPSAs) and Number of Providers Needed to Eliminate Shortage (2023)



Number of providers needed to eliminate the PCP shortage

Percent population living in a HPSA

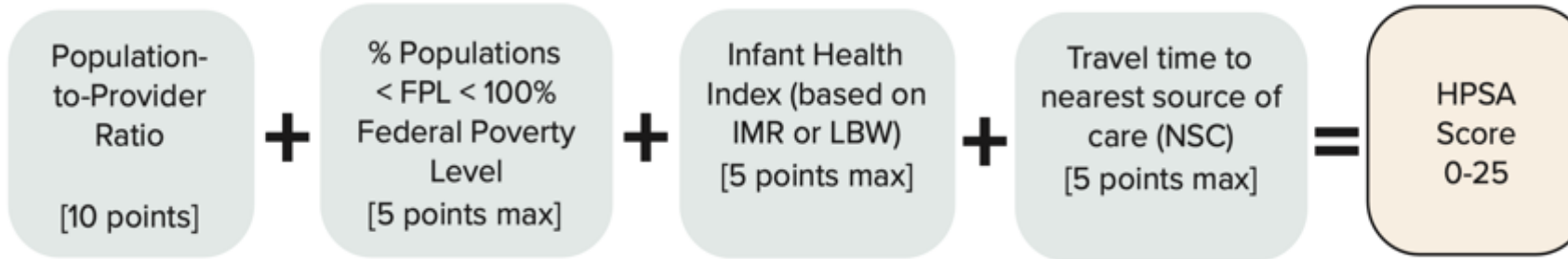


Arizona's Physician shortages are worse in rural and tribal communities



40 Federal Programs Use HPSA Scoring to Allocate Funding

►► Primary Care HPSA Score Formula



2024 Designated Tribal geographic or Population Primary Care HPSAs

TRIBAL NATION (S)	HIGHEST HPSA SCORE	PCPs SHORT
Colorado River Indian	18	1.4
Fort McDowell Yavapai	10	0.2
Gila River Indian Community	20	2.2
Hualapai Tribe	13	0.5
Navajo Nation & Hopi Tribe	11	2.2
Pascua Yaqui Tribe	19	0.9
Salt River Pima-Maricopa	19	1.4
San Carlos Apache Tribe	21	2.0
Tohono O'Odham Nation	17	0.8
White Mountain Apache Tribe	21	4.1

Physician Training (UME + GME) in high needs areas greatly increases retention to practice in rural, tribal and urban underserved communities



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azcentral.

Arizona will never solve its doctor shortage if we don't fix this.

*Opinion: Arizona is expanding its medical schools to train much-needed doctors.
But it could still lose those students to other states.*

Brittney Kaufmann, opinion contributor | February 14, 2024 | Arizona Central

Major Rate Limiting Factor for Arizona's Physician Workforce:
Too few Graduate Medical Education (GME) Residency Slots

AZ ranks #14 pop., yet #37 in GME FTEs (28.5 per 100,000 pop)
AZ needs to add 1,100 GME FTEs for its pop (to get to 43.1)
By 2034, AZ will need 2,000 GME FTEs based on pop. growth
Of those, 400 should be rural, tribal, border primary care GME

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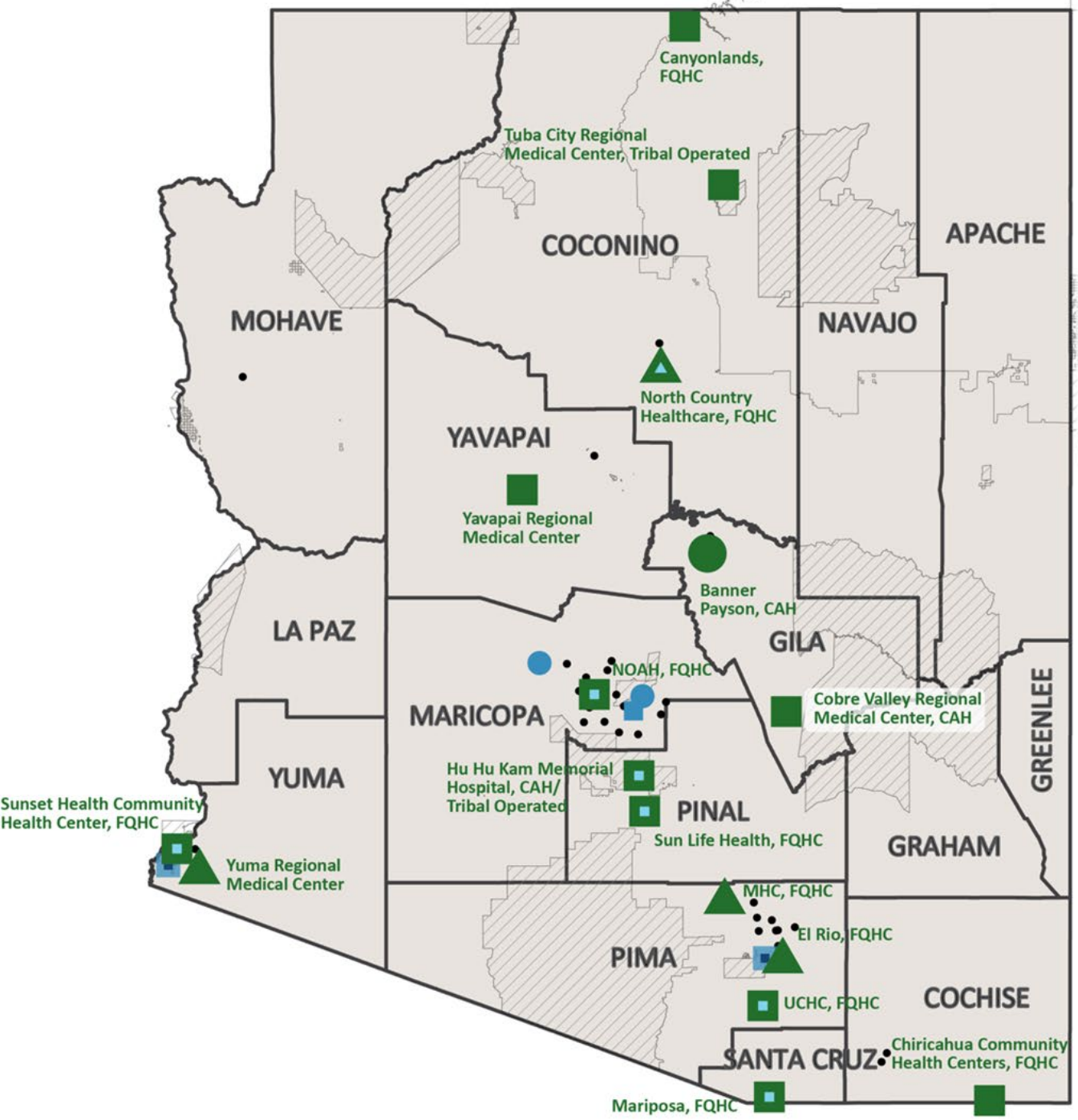
Gov. Hobbs signed SB1727 May 11, 2023

AzAHEC system to establish primary care (PC) residency (GME) programs with rural and critical access hospitals, community health centers, rural health clinics, tribal health facilities.

Expand primary care GME in rural and health professional shortage areas (HPSAs): 9 sites have were awarded up to \$300,000 over 3 years for new programs



Graduate Medical Education Program Locations in Arizona



GME in Progress

- Family Medicine
- ▣ Family Medicine with AHEC Support
- Internal Medicine
- ▲ Psychiatry
- ▴ Psychiatry with AHEC Support

Accredited in 2024

- Family Medicine
- ▣ Family Medicine with AHEC Support
- Internal Medicine

Accredited through 2023

-



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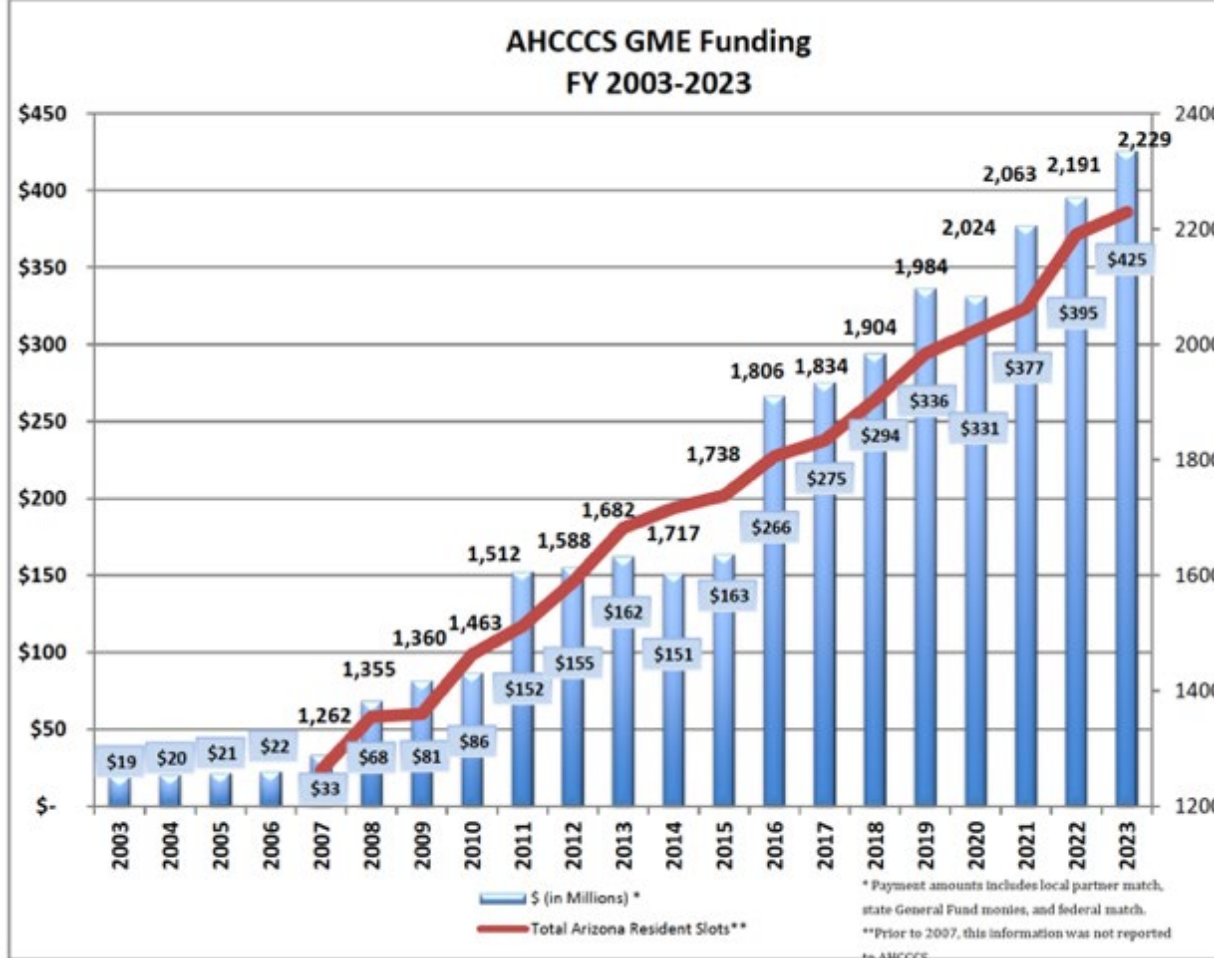
State of Arizona
Senate
Fifty-seventh Legislature
First Regular Session
2025

SB 1623

Introduced by
Senators Werner, Angius, Carroll, Gowan, Shope

Senator Werner, Chair Senate HHS Committee

A. In addition to any other appropriations made in fiscal year 2025-2026, the sum of \$10,000,000 from the state general fund and \$18,768,700 in expenditure authority are appropriated in fiscal year 2025-2026 to the Arizona health care cost containment system administration for graduate medical education programs to address this state's shortage of physicians.



AZ Medicaid GME

2,229 AZ GME FTEs 2023

AZ Rank #5 Medicaid GME

No Cap on Medicaid GME Slots:
 However, non-federal Match Required to Draw Federal Medicaid GME dollars – usually paid for by residency program – not the State of Arizona

AZ Federal Medical Assistance Percentage (FMAP) for 2025 is 64.34%, a \$1.80 multiplier: that means for every dollar the GME program puts in matched with \$1.80 federal dollars

Accessed 2/13/25 at: https://www.azahcccs.gov/shared/Downloads/Reporting/2024/AHCCCS_FY2023_GME_Report.pdf





Best Practices: Training, Recruitment, Retention

Teaching Health Centers: 75% GME grads remain in primary care, >50% practice in HPSA (2022 HRSA funding \$155M)

AZ: GME start up + AHCCCS (Medicaid GME) support for PCP residency programs in CAHs, RHCs, FQHCs, Tribal sites

Expand Medicare GME slots with Rural Referral Center designation

Tax credit for health providers practicing in HPSAs + precepting requirement (ex: Colorado)



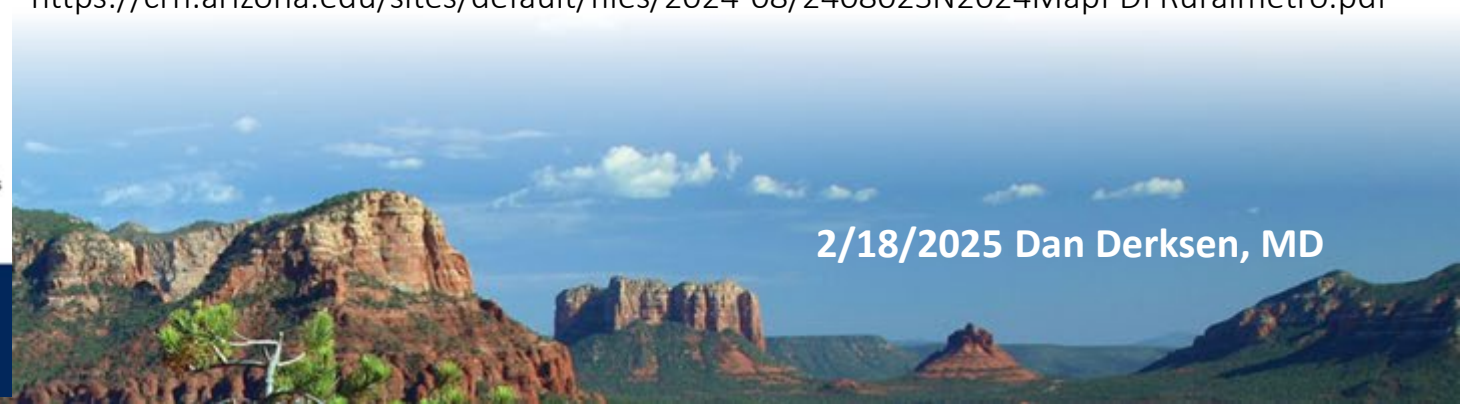
- 📍 Critical Access Hospital (CAH)
- 📍 Critical Access + IHS Hospital
- 📍 CAH + Tribal Operated (PL 638)
- 📍 Indian Health Services (IHS)
- 📍 Urban Indian Health Centers
- 📍 Federally Qualified Health Centers in rural areas
- 📍 CAH Affiliated Rural Health Clinics
- 📍 Independent RHCs
- 📍 Tribal Operated (PL 638)
- N Apache County Special Healthcare District

AZ Rural Health Safety Net Includes:

- 17 Critical Access Hospitals (CAHs)
- 55 Rural Health Clinics (RHCs), 32 CAH-affiliated
- 26 Health Centers operate 175 FQHC Sites
- 16 Indian Health Service hospitals, clinics
- 28 Tribal-operated (P.L. 638) hospitals, clinics
- Plus Rural Hospitals, Private Practices

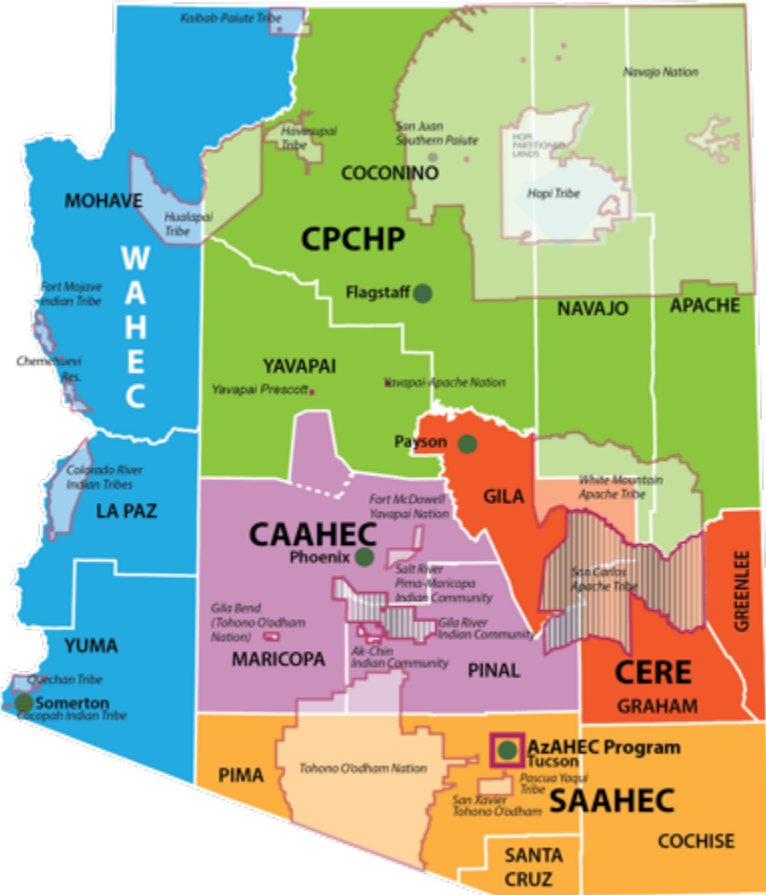
<https://crh.arizona.edu/sites/default/files/2024-08/240802SN2024MapPDFRuralmetro.pdf>

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Leverage Existing AzAHEC Infrastructure

Arizona AHEC Regions and Tribal Nations in Arizona



- Tribal Nations
- Arizona Area Health Education Center Program (AzAHEC) Tucson
- American Indian Health Area Health Education Center (AIH-AHEC)
- Southern Arizona Area Health Education Center (SAAHEC)
- Central Arizona Area Health Education Center (CAAHEC)
- Center for Excellence in Rural Education (CERE)
- Colorado Plateau Center for Health Professions (CPCHP)
- Western Arizona Area Health Education Center (WAAHEC)



In 2024 AzAHEC provided
4,028
Community-Based
Experiential Health
Professions Training Rotations

<https://azahec.arizona.edu/>

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Daniel Derksen, MD, is the University of Arizona Health Sciences Associate Vice President for Rural Health Workforce Development Initiatives. He is a Professor in the Zuckerman College of Public Health with joint appointments in the Colleges of Medicine and Nursing. He directs the Arizona Center for Rural Health (AzCRH) and PI of the state and federally designated and funded State Office of Rural Health. His current activities include informing legislative, regulatory and program policy to improve access to health care and health insurance coverage; developing, implementing and evaluating community based experiential health professions training sites; and working to assure a well-trained and distributed health workforce to meet the health needs of all Arizonans.

Contact: dderksen@arizona.edu



Additional AzCRH Health Workforce Data Resources: <https://crh.arizona.edu/> under the publications tab.

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