Northern Arizona Healthcare

2022 COMMUNITY HEALTH NEEDS ASSESSMENT – FINAL IMPLEMENTATION STRATEGIES

The Patient Protection and Affordable Care Act (ACA) added requirements which nonprofit hospitals must satisfy in order to maintain their tax-exempt status under Section 501(c)(3) of the Internal Revenue Service Code. One such requirement added by the ACA, Section 501(r) of the Code, requires nonprofit hospitals to conduct a Community Health Needs Assessment (CHNA) at least every three years and adopt certain strategies to address identified health needs of the community, including public health experts, as well as residents, representatives or leaders of low-income, minority, and medically underserved populations.

In accordance with IRS regulations, Northern Arizona Healthcare (NAH) has completed the CHNA for the two facilities due for the three-year period ending June 2022 for Flagstaff Medical Center (FMC) and Verde Valley Medical Center (VVMC).

IRS regulations require that the CHNA should identify significant health needs within the community (particularly for the underserved populations), identify resources that exist within the community, assess current gaps in meeting health needs, and prepare an Implementation Plan. The regulations also require for each of the significant health needs identified, the facility will prepare implementation strategies to address needs or articulate why the need is not being addressed. As part of the implementation strategies, the regulations also require that hospitals include in the Implementation Plan the anticipated outcomes and how hospitals plan to measure the impact of the strategies. There is no standard for measurement or criteria for determining impact, nor is it imperative for the hospitals to solve for all of the identified needs or gaps in care. Regardless, many of the identified needs align with Northern Arizona Healthcare initiatives and, in addition, Northern Arizona Healthcare works with various community organizations to address needs where possible.

The CHNA Report and Implementation Strategies must be:

- Approved by an authorized organizational governing body
- Published on each facility's website upon approval by the Board; and,
- Be readily available to the community by the end of the taxable year in which the CHNA analysis was to be completed

While this is a facility-level requirement, it was organized and overseen at the system level similar to our 2019, 2016 and 2013 approaches, to ensure a consistent, standardized approach that leverages resources related to both the process and implementation strategies. CEO-designated, facility-level champions have reviewed and approved the reports. We identified three priorities in 2022, which were consistent with our findings in 2019: Access to Care, Chronic Disease, and Behavioral Health & Substance Use. It is important to note that the areas identified align with our organizational strategies and our mission of "Improving Health, Healing People". We concentrated our efforts in 2022, in order to have a bigger impact on these three areas and to leverage efforts already underway. The following pages contain the system-wide Implementation Plan's strategies approved by the NAH Board of Directors.

NORTHERN ARIZONA HEALTHCARE IMPLEMENTATION STRATEGIES

As mentioned above, Northern Arizona Healthcare (in partnership with our two facilities who had a CHNA Report due in 2022 and their community partners) identified three significant health needs to focus on for the upcoming three years, listed below:

- Access to Care
- Chronic Disease (Cardiovascular Disease/Cancer/Neurosciences)
- Behavioral Health & Substance Use

To address these significant health needs, Northern Arizona Healthcare developed a system-wide Implementation Plan strategy, where various tactics apply to one or more markets served by our organization. The strategies, tactics and anticipated outcomes are listed below, as are the regions within Northern Arizona Healthcare's system where the tactics will be implemented.

If you have any questions regarding the strategies and tactics you can reach out to PublicRelations@nahealth.com

	Flagstaff	Verde Valley	Outlying/Rural
SIGNIFICANT HEALTH NEED: ACCESS TO CARE			
Strategy #1: Increase access points and capacity for primary care services.			
Anticipated Outcome: Improved geographic coverage for primary care and non-emergent services in order to reduce unnecessary utilization of costly ED services.			
Tactic 1: Increase Primary Care Provider (PCP) and Advanced Practice Provider (APP) clinical personnel through recruitment	X	X	
Tactic 2: Enhance Care Management services	X	X	
Tactic 3: Increase staffing for call center	X	X	
Tactic 4: Expand adoption of remote patient monitoring	X	X	
Strategy #2: Increase access to outpatient clinic and ambulatory care settings.			
Anticipated Outcome: Improved access to and utilization of lower cost ambulatory settings for outpatient care.			
Tactic 1: Provide Urgent and/or Immediate Care Access	X	X	
Tactic 2: Evaluate expansion of specialty provider recruitment		X	
Strategy #3: Develop a Virtual Care Platform			
Anticipated Outcome: Improve access and ease of receiving healthcare services.			
Tactic 1: Provide Specialist coverage for outlying areas			X
Tactic 2: Create opportunity for patients to self-schedule visits	X	X	X
Tactic 3: Participate on the State Broadband Action Plan Team	X	X	X
Tactic 4: Collaborate with outlying health care organizations to enhance rural virtual care opportunities for patients			X

	Flagstaff	Verde Valley	Outlying/Rural
SIGNIFICANT HEALTH NEED: CHRONIC DISEASE (CARDIOVASCULAR DISEASE / CANCER / NEUROSCIENCES)			
Strategy #1: Enhance Neurosciences Services.			
Anticipated Outcome: Improved geographic coverage for neurology care.			
Tactic 1: Recruit new neurologists	X	X	
Tactic 2: Provide neurology access across NAH System	X	X	
Tactic 3: Develop rural expansion			X
Strategy #2: Support cardiovascular programs designed to keep patients out of the hospital.			
Anticipated Outcome: Improved access to and utilization of lower cost ambulatory settings for outpatient care.			
Tactic 1: Continue Heart Failure Clinic (patient management and clinical consensus group)	X		
Tactic 2: Continue INR Clinic in collaboration with NAH Pharmacy	X	X	
Tactic 3: Establish TAVR Surgical Intervention Clinic for patients with limited options with their aortic valve	X		
Tactic 4: Expand Remote Patient Monitoring and Remote Therapeutic Monitoring	X	X	
Strategy #3: Oncology Development & Recruitment			
Anticipated Outcome: Improve access to oncology services in northern Arizona			
Tactic 1: Begin comprehensive medical oncology program	X		
Tactic 2: Expand radiation oncology services	X		
Tactic 3: Continue incremental Oncology provider recruitment	X	X	
Tactic 4: Expand programs for Breast, Head/Neck and Lung Cancers	X		

	Flagstaff	Verde Valley	Outlying/Rural
SIGNIFICANT HEALTH NEED: BEHAVIORAL HEALTH & SUBSTANCE USE			
Strategy #1: Provide services to increase awareness and access to address general Mental and Behavioral Health needs.			
Anticipated Outcome: Improved identification of patient with psychiatric needs and improved connection to resources for patients.			
Tactic 1: Partner with community outpatient BH providers to provide coordinated care post inpatient discharge	X	X	
Tactic 2: Encourage community members to get initial screenings for depression and substance use.	X	X	X
Tactic 3: Support collaboration with local providers to fill gaps and enhance outpatient services to prevent acute episodes	X	X	
Strategy #2: Increase outpatient behavioral health offerings.			
Anticipated Outcome: Improved access to outpatient BH care.			
Tactic 1: Restart Transcranial Magnetic Stimulation (TMS) treatment for outpatient depression patients	X		
Tactic 2: Open outpatient psychiatry clinic	X		
Tactic 3: Evaluate expansion of DUI/Drug Court treatment program services for substance use	X	X	