

ARIZONA HOUSE OF REPRESENTATIVES  
Fifty-first Legislature – Second Regular Session

**COMMITTEE ON HEALTH**

Minutes of Meeting  
Wednesday, February 12, 2014  
House Hearing Room 4 -- 10:00 a.m.

Chairman Carter called the meeting to order at 10:14 a.m. and attendance was noted by the secretary.

**Members Present**

Mrs. Brophy McGee  
Mrs. Gonzales  
Mr. Lovas

Mr. Meyer  
Ms. Steele  
Ms. Townsend

Mr. Boyer, Vice-Chairman  
Mrs. Carter, Chairman

**Members Absent**

None

**Committee Action**

None

Chairman Carter welcomed Members of the Arizona Physical Association to the Capitol.

**PRESENTATIONS**

**Routine Dental Care Saves Lives and Money**

Kevin Earle, Executive Director, Arizona Dental Association, stated that the Association is an affiliate of the National American Dental Association and represents about 70 percent of the dentists in Arizona. He spoke about a new organization, the Adult Benefit Coalition for Dental Care (ABCD), and the work it is doing to care for the most vulnerable citizens. He referred to a handout with information on the Arizona Health Care Cost Containment System (AHCCCS) and Arizona Long Term Care Services (ALTCS) on dental funding which has been cut (Attachment 1), an information sheet on the rise of emergency room visits for dental care after the cuts (Attachment 2), and individual stories (Attachment 3). Mr. Earle introduced a patient in the audience and spoke about the Central Arizona Dental Society which organized a December charitable dental event, the largest in Arizona. There were 100-chair dental clinics, 266 dentists, and 1,200 community volunteers. They treated 2,020 patients in two days with the price valued at over \$4.2 million.

Dr. Maureen Romer, Director, Center for Advanced Oral Health, Arizona School of Dentistry in Oral Health, spoke about oral health, specifically for people with developmental disabilities (DD) and residents in nursing homes, who have a higher than national average of dental disease due to the lack of access to care. She stated that it is a public health issue and sometimes they do not have the means to communicate; if the problem is not seen, it does not mean it does not exist. She advocated eradication by maintenance and prevention.

Mr. Philip Pangrazio, President and Chief Executive Officer, Arizona Bridge to Independent Living, stated that they are one of 500 centers for independent living nationwide established by the Rehabilitation Act of 1973. He reiterated the dental problems caused by the funding cuts in 2009, the severity of the issue, and in conjunction with the ABCD Coalition, requested the restoration of benefits.

Mr. Larry Clausen, Executive Director, Arizona Developmental Disabilities Planning Council, stated the Council consists of 23 members, who are appointed by the Governor. The Developmental Disabilities Assistance and Bill of Rights Act of 2000 established a Council in all states and territories of the U.S. He explained that the goal is to support people with development disabilities, severe and intellectual, and to help them achieve independence. Mr. Clausen shared information on a study the Council performed, *2011 Report: Oral Healthcare for Adults with Developmental Disabilities in Arizona* (Attachment 4). He spoke about employment opportunities, competitiveness, unmet dental needs problems, and oral conditions that are common in adults with DD (Attachment 5).

Mr. Paul Friedlan, Owner and Licensed Administrator, SunWest Choice and Rehab Care Center, stated his credentials and asked for the consideration of the restoration of the ALTCS adult benefits. He said that many of the 15,900 nursing home residents in Arizona suffer from chronic oral health issues and the inability to eat due to oral health issues. He shared an example of the lack of oral health care with the Committee (Attachment 6).

Discussion and questions ensued as to the coverage of dental care, ALTCS, and medical coverage in conjunction with dental for the DD adults and elderly.

Chairman Carter thanked the presenters.

### **Growing the Physician Pipeline: The Future of Arizona's Health Care Workforce**

Kim VanPelt, Director, State Health Policy and Advocacy, St. Luke's Health Initiatives, stated that they are a public foundation that focuses on Arizona healthcare policy issues and grant makers that invest in improving the health of Arizonans. She spoke of a publication being produced looking at graduate medical education (GME) in Arizona residencies, a summary that will be out in a few months on the need and areas of residencies, and a study next year of the demand for healthcare workforce in the future. She said that Arizona produces a lot of medical students but has a shortage of doctors, especially in the primary care area, because they go to other states due to a lack of residencies available in Arizona. Ms. VanPelt stated that more information about funding and policy outline options for increasing the number of residencies in the state can be found on their website at [www.slhi.org](http://www.slhi.org).

Dr. Howard Shulman, Associate Dean for Postdoctoral Education, Northwestern University, stated that Arizona lacks enough physicians to take care of the growing population and presented some statistics:

- Arizona ranks 33<sup>rd</sup> in the U.S. in total number of active physicians.
- Arizona ranks 41<sup>st</sup> in primary care physicians.
- Arizona ranks 35<sup>th</sup> for number of residencies per population.
- The number of residencies in 2000 was 2.1 and in 2010 was 2.3, a small increase compared to population growth.
- The average number of residencies in the U.S. is 3.6.
- Arizona is ranked 35<sup>th</sup> for number of residencies per population.
- Arizona had 1,055 residencies in 2000 and 1,453 in 2010.

Dr. Howard spoke about Arizona's residency problems, shared some solutions and stated the importance of GME funding and the unequal distribution of federal funding.

Dr. Michael Grossman, Associate Dean, Graduate Medical Education, Professor of Medicine, University of Arizona College of Medicine, Phoenix, explained that in 1997, funding for GME came from the AHCCCS program which was about \$20 to \$25 million per year. Medicare gave \$2 for every dollar Medicaid gave, equaling a \$75 million a year budget until the financial crisis hit, bringing the budget to zero. He highlighted the Rural Health Initiative which started in 1995 in Tucson and has 47 physicians in practice around the state. He spoke about scholarships, development of a research-based academic medical center, and studies on GME needs both nationally and in Arizona.

Pat Walz, President and CEO, Yuma Regional Medical Center, spoke about the physician shortage in rural areas and the newly-established Yuma GME residency program for primary care.

Dr. Edward Paul, Director of Medical Education, Yuma Regional Medical Center, stated he is still a practicing family physician as well as the Director and expounded on the Yuma GME residency program, the cost, the care, the goals and how it involves the community.

Gretchen Martinez, Executive Director, Arizona Chamber Foundation, thanked the Committee for hearing the many challenges and opportunities that Arizona faces in terms of GME and why this is a business issue, not just a healthcare issue. She stated that GME is an economic development opportunity for Arizona, not only for growing a physician's pipeline but for the accessibility of doctors for business expansion and retention. She added that it is hard to ask manufacturers and businesses to move to Arizona if there is not an adequate supply of doctors to fulfill healthcare needs and noted a study that practicing physicians contribute \$18 billion in economic output and supports 70,000 jobs. Ms. Martinez addressed a few concerns in education and retaining doctors:

- The population is growing and aging.
- With the Affordable Care Act (ACA), more people are eligible for healthcare coverage, creating more demand.
- With the obesity epidemic, come other related diseases such as diabetes and heart problems.
- Medical school is expensive.

- Hospitals are not supported or incentivized for hospital GME or other programs.

Chairman Carter thanked the presenters and the Chamber for taking the lead on these issues and spoke about healthcare in Arizona as an economic engine. She addressed the statement, “there is more money for GME than there was in the years before” and added that putting money into an old system does not work, nor does it put more “boots on the battleground”; it does not increase the physician pipeline. Arizona is facing a shortage and needs to attract and retain the best physicians.

Without objection, the meeting adjourned at 11:53 a.m.

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Tracey Gardner, Committee Secretary  
April 10, 2014

(Original minutes, attachments and audio on file in the Office of the Chief Clerk; video archives available at <http://www.azleg.gov>).