



# Community Quality Forum

December 15, 2020  
3-5pm



# Welcome to the AHCCCS Community Quality Forum

- ❖ You were automatically muted upon entry. Please keep yourself on mute throughout the meeting to limit feedback.
- ❖ Do not put us on hold.
- ❖ Please use the chat feature for questions.
- ❖ To unmute your phone you will need to click on the microphone icon or press “\*6” on your phone.

# Community Quality Forum

## Goal/Purpose

The AHCCCS Community Quality Forum evaluates physical and behavioral health system performance in alignment with our integrated care model in collaboration and consultation with community stakeholders to drive system improvement efforts.

## Objectives

1. Finalize the development of Statewide physical and behavioral health dashboards;
2. Evaluate dashboard data metrics and provide feedback for performance improvement efforts including performance improvement projects (PIPs); and
3. Evaluate observed community-based trend concerns by leveraging data analytics to drive policy change.

# Community Quality Forum Agenda

- ❖ Purpose and Objectives: Dr. Sara Salek
- ❖ Clinical Dashboard: Will Buckley
- ❖ Quality Strategy Update: Jamie Robin
- ❖ COVID-19 Update
  - Telehealth Policy & Data: Dr. Sara Salek & Will Buckley
  - COVID-19 Vaccine: Dr. Sara Salek
  - ArMA Physician Peer to Peer Program: Juliana Stanley
  - Crisis Data: Alex Herrera
  - Crisis Counseling Program: Jill Rowland



# Clinical Dashboard

Dashboard - <https://azahcccs.gov/Resources/Reports/dashboards.html>

Will Buckley  
Business Intelligence Manager  
AHCCCS Office of Data Analytics Unit  
DHCM - AHCCCS

# Quality Strategy Update

Jamie Robin

Quality Improvement Manager

DHCM - AHCCCS

# Quality Strategy Updates

Under [42 CFR § 438.340](#), the state must review and update its quality strategy as needed, but no less than once every three years. This review must include an evaluation of the effectiveness of the quality strategy conducted within the previous three years. The results of the review must be available on the state's website.

## Timeline

Submitted Updated Quality Strategy to CMS	July, 2018
Received CMS feedback	August, 2020
Update and Submit Quality Strategy to CMS	No Later Than June 30, 2021

# Quality Strategy Updates

Managed Care Regulations ([42 CFR § 438.340](#)) require the Quality Strategy include, a minimum, the following:

- Network Adequacy and Availability of Services Standards
- Continuous Quality Improvement Goals and Objectives
- Description of Quality Metrics, Performance Targets
  - Including identification of those it will publish at least annually on the State's website
- Description of Performance Improvement Projects to be implemented (implemented)
- Arrangements for External Independent Reviews [External Quality Review Organization (EQRO) reviews]
- Description of State's Transition of Care Policy
- State's plan to identify, evaluate, and reduce health disparities
- Use of intermediate sanctions
- Description for how the State will assess performance and quality outcomes achieved
- Mechanisms to comply with additional services for enrollees with special health care needs or who need Long-Term Services and Supports (LTSS)
- Information pertaining to the nonduplication of EQR activities
- Definition of a "Significant Change"

# Quality Strategy Updates

## Updates to be Included based on CMS Feedback Received

- Clearly identify if QS Goals and Objectives address all populations covered by the State's Managed Care program
- Provide or link to findings from a previous QS Evaluation
- Indicate performance targets for included quality metrics
- Identify the specific Performance Improvement Projects plans will implement and/or description of interventions it proposes
- Describe transition of care policy
- Discuss plans to reduce disparities across demographic factors
- Detail Network Adequacy and availability of services standards
- Provide examples of evidence-based clinical practice guidelines it requires plans to use
- Clearly identify that the State posts complete accreditation for all its managed care plans on its website

# Quality Strategy Updates

## Additional Updates to be Included

- Update to reflect State's system delivery model changes
- Describe the State's Performance Measure Transition
- Update VBP Initiative goals, objectives, and overview
- Update AHCCCS Quality Initiatives

# Quality Strategy Updates

## AHCCCS Review and Updates Process\*

- Core Team established to organize update efforts Ongoing
- Provide Executive Management updates through Quality Steering Committee Ongoing
- Assign Quality Strategy Evaluation Subgroup December 2020
- Assign internal review and update activities to associated SMEs December 2020
- Community Quality Forum, State Medicaid Advisory Committee and Tribal Council Presentations December 2020 - February 2021
- Complete One Voice Review of the Documents March 2021
- Upper Management Review and Approvals April 2021
- Executive Management Review and Approvals April 2021
- Public Comment Period May-June 2021
- Post Quality Strategy and Quality Strategy Evaluation on AHCCCS Website June 2021
- Submit Quality Strategy and Quality Strategy Evaluation to CMS June 2021

*\* Timeline generated based on three year review cycle. Proposed timeframe for resubmission provided to CMS; however, it is unclear at this time if CMS will require corrective action or varied timeline from that indicated above. Updates to the timeline will be made if necessary.*



# COVID-19 Updates



# Telehealth Policy & Data Update

Dr. Sara Salek - AHCCCS CMO

Will Buckley - AHCCCS Data Analysis Office Business  
Intelligence Manager

# Telehealth FAQ Updates

[COVID-19 FAQs \(azahcccs.gov\)](https://azahcccs.gov)

**23.** (added 11/23/20) **Question: When are the AHCCCS telehealth policy flexibilities offered during the COVID-19 pandemic, including the use of the temporary telephonic code set, due to expire?**

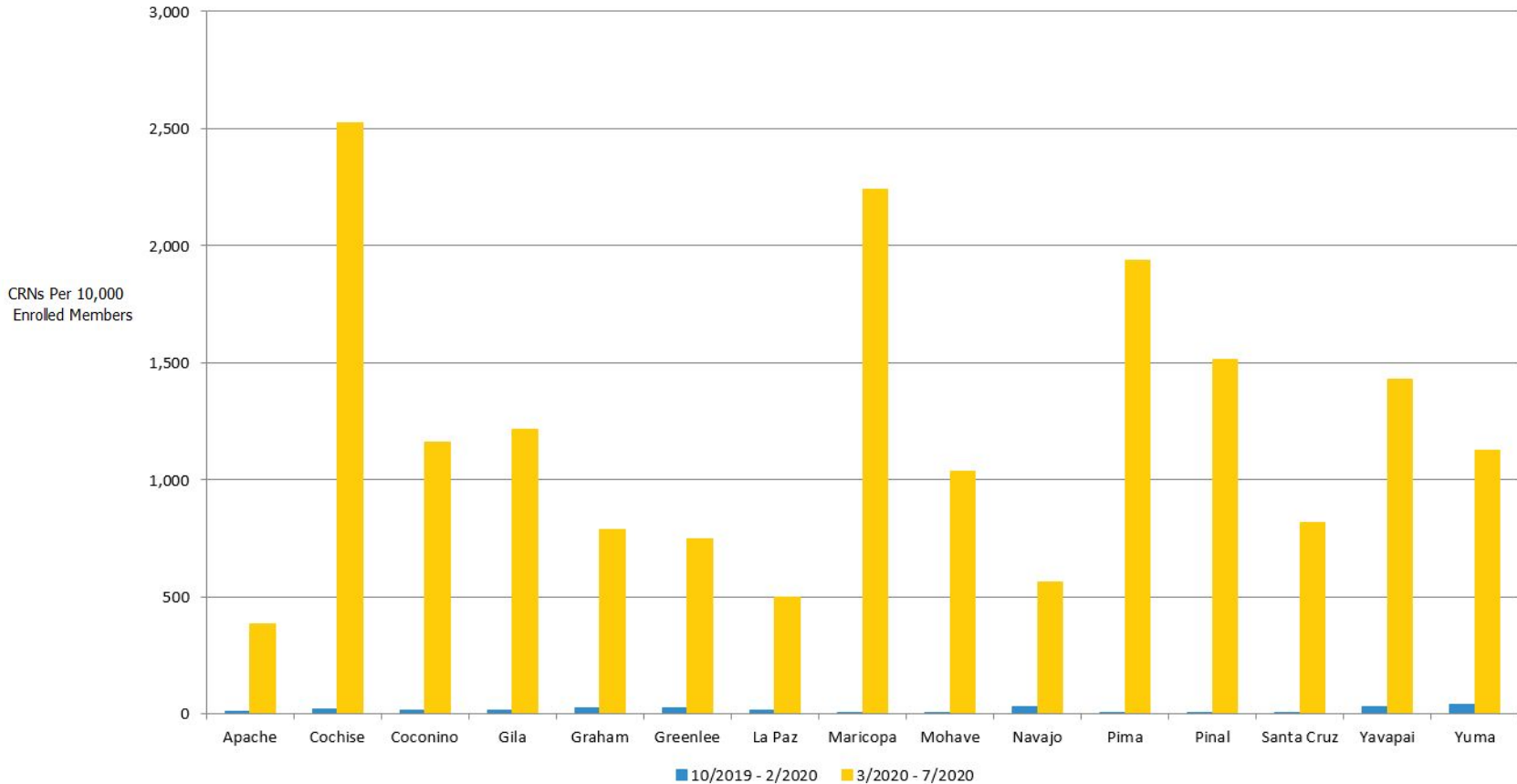
**Answer:** The AHCCCS telehealth COVID-19 policy coverage flexibilities have been extended through 9/30/2021. If the COVID-19 pandemic continues beyond 9/30/21, AHCCCS will re-evaluate this end-date.

**24.** (added 11/23/20) **Question: When does AHCCCS plan to finalize its post-pandemic telehealth policy decisions by?**

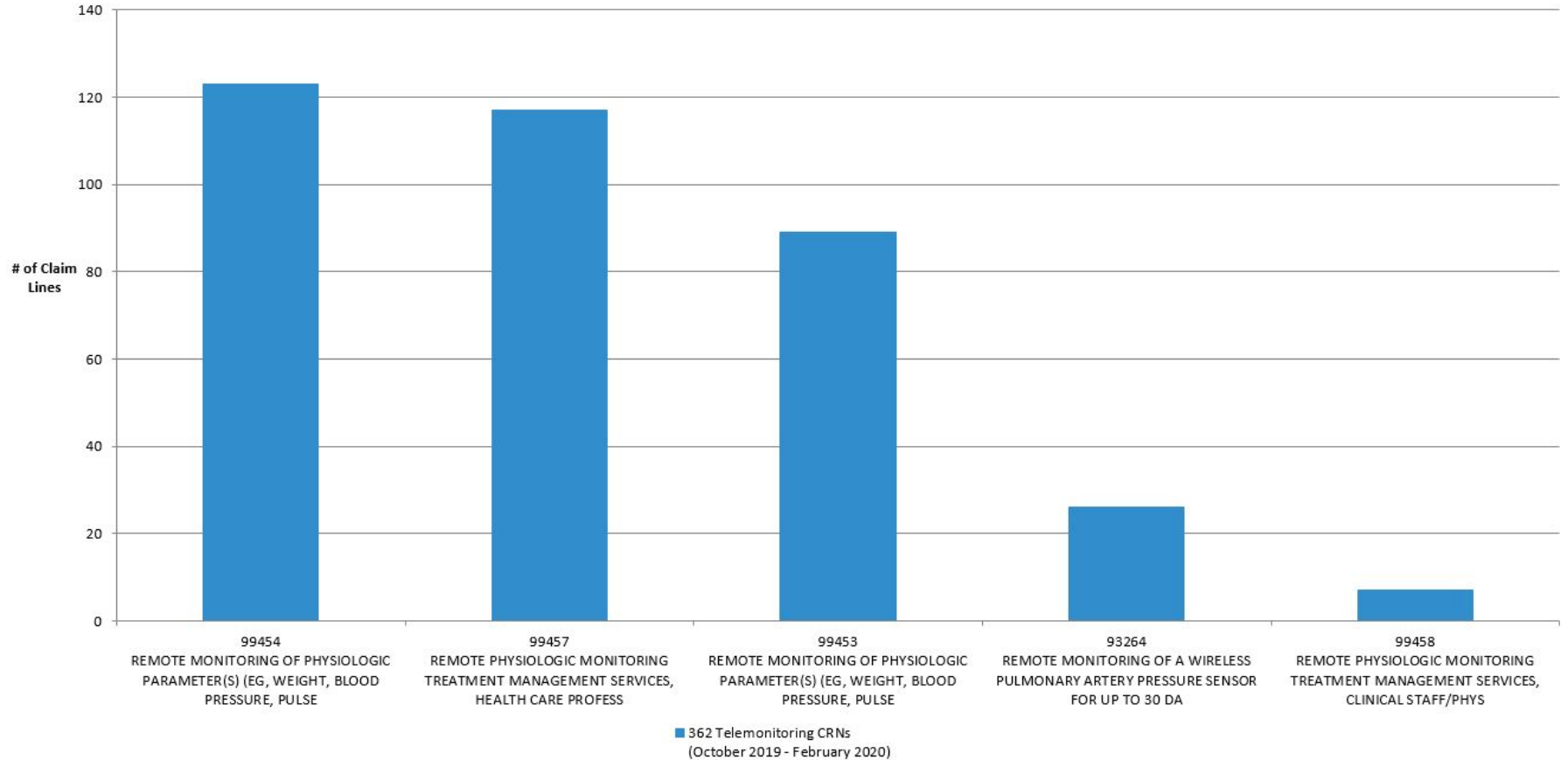
**Answer:** AHCCCS plans to finalize its post-pandemic telehealth policy decisions by 7/1/21.

## Telehealth Physical Health Services Via Real-Time Audio/Visual and Store/Forward Pre-Pandemic (10/19-2/20) and Start of PHE (3/20-7/20)

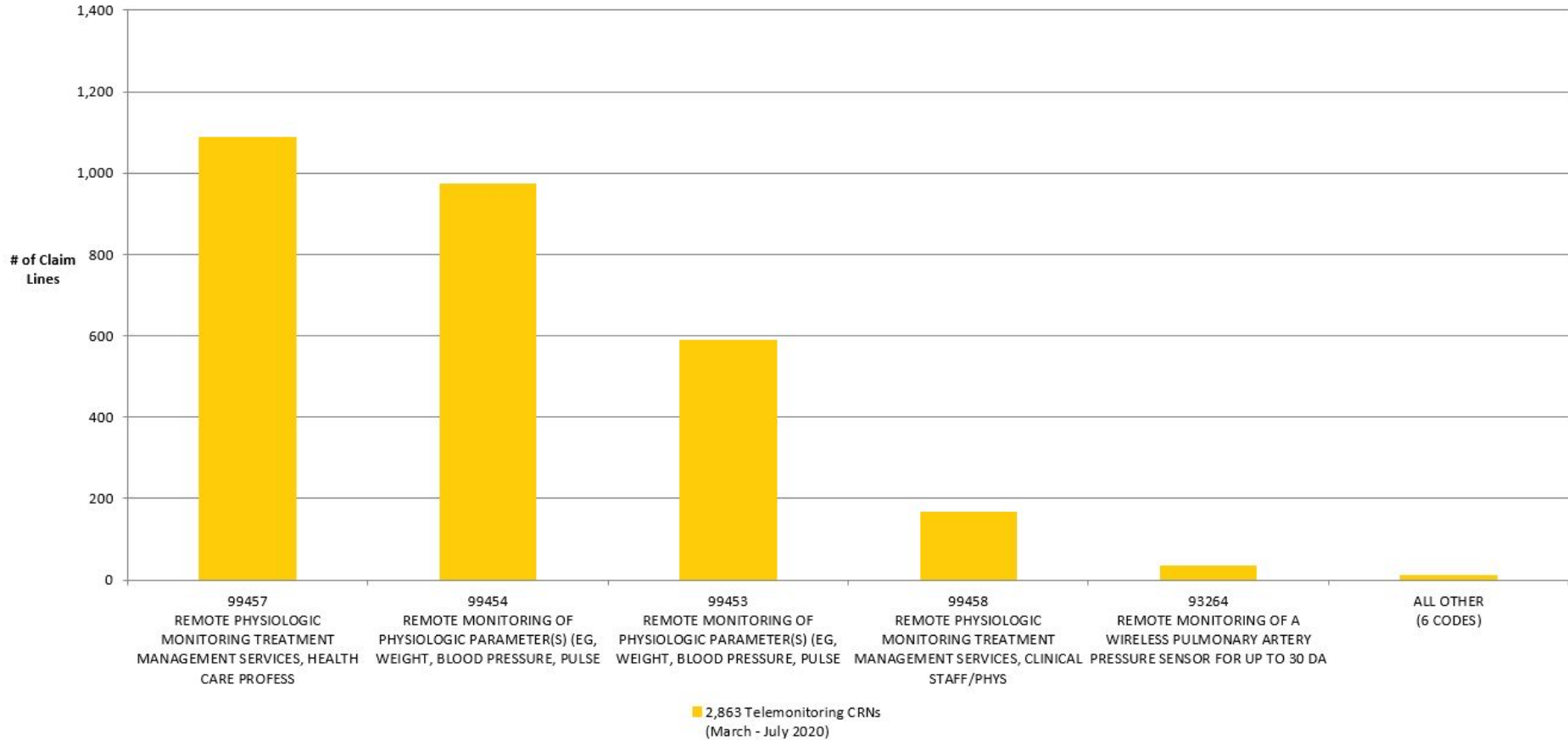
(Number of Claim Lines/Services Rendered, Rate Per 10,000 Enrolled Members, All LOB)



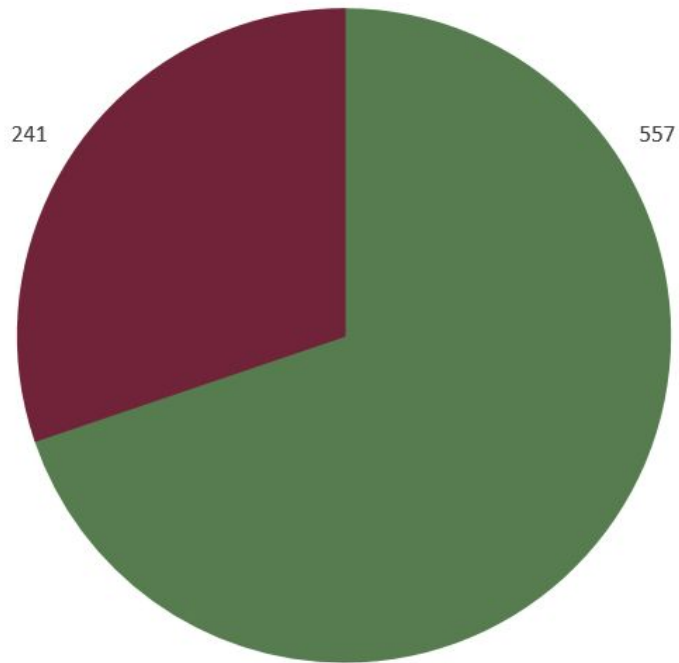
**Telemonitoring Utilization Pre-Pandemic**  
**October 2019 - February 2020**  
**(Number of Claim Lines/Services, All Claims/Encounters, All LOB)**



**Telemonitoring Utilization**  
**March - July 2020**  
 (Number of Claim Lines/Services, All Claims/Encounters, All LOB)



**Teledentistry Utilization by Modality**  
**March - September 2020**  
(Number of Claims, All Claims/Encounters, All LOB)



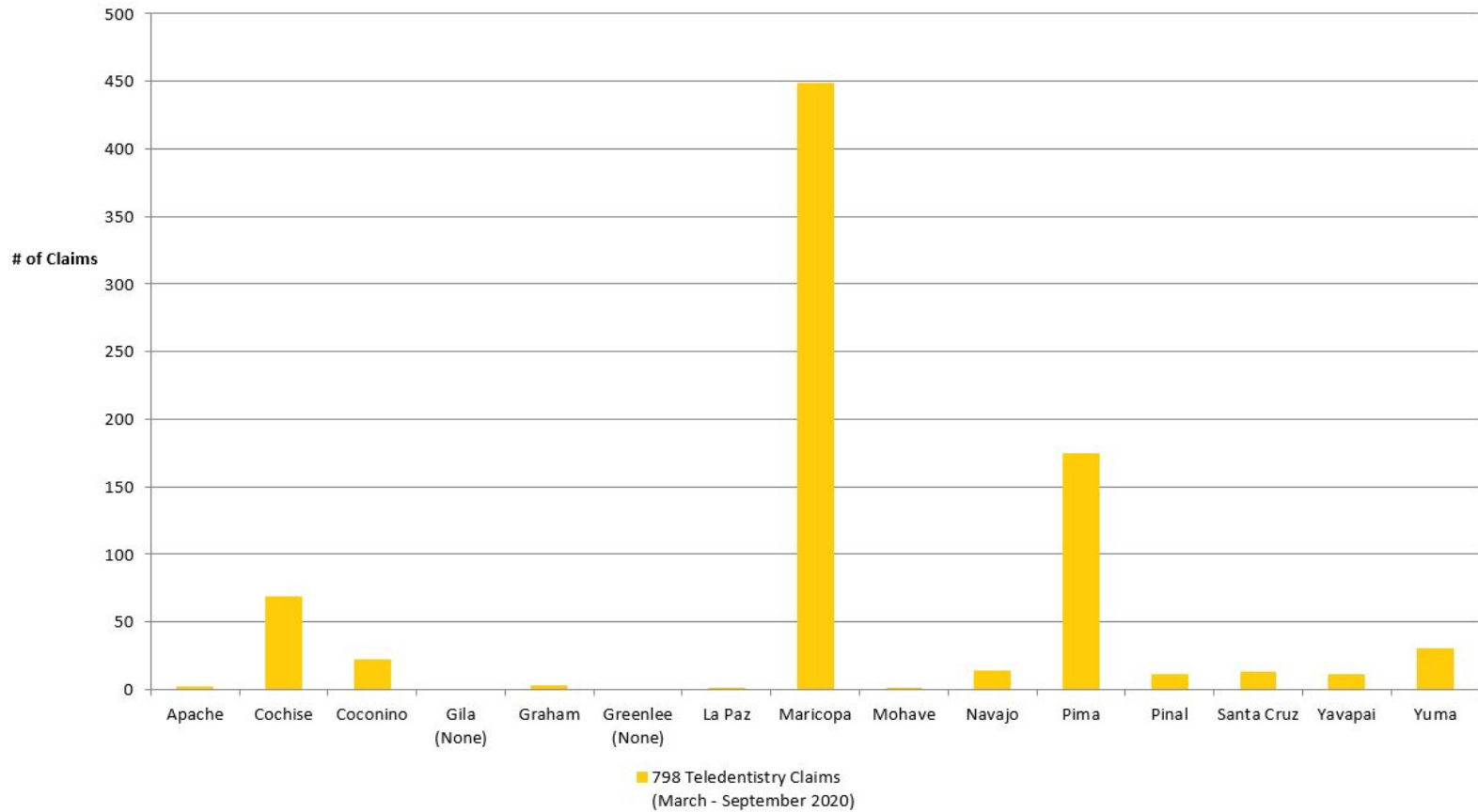
■ Teledentistry - Synchronous (Real-Time A/V)

■ Teledentistry - Asynchronous (Store & Forward)

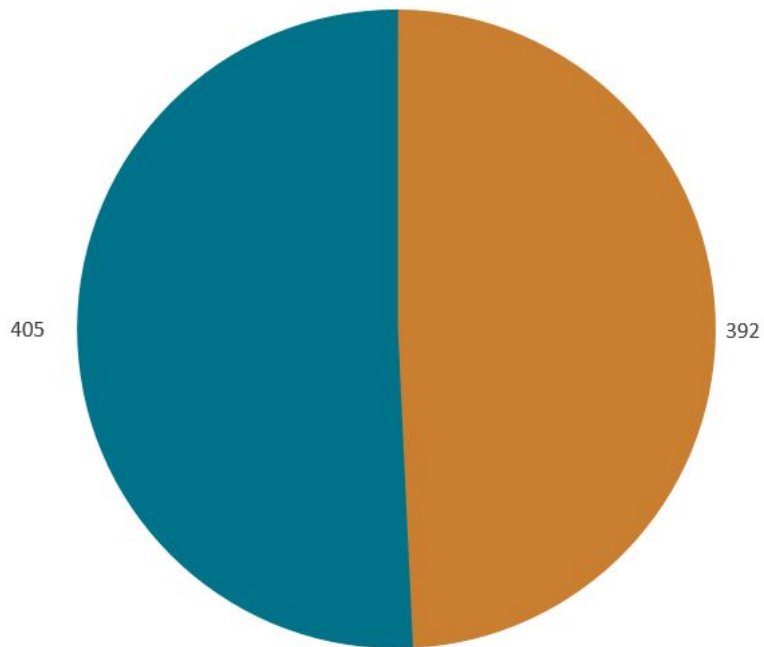
# Teledentistry Real-Time Audio/Visual and Store/Forward

March - September 2020

(Number of Claims, All Claims/Encounters, All LOB)



**Teledentistry Utilization by Provider Type**  
**March - September 2020**  
(Number of Claims, All Claims/Encounters, All LOB)



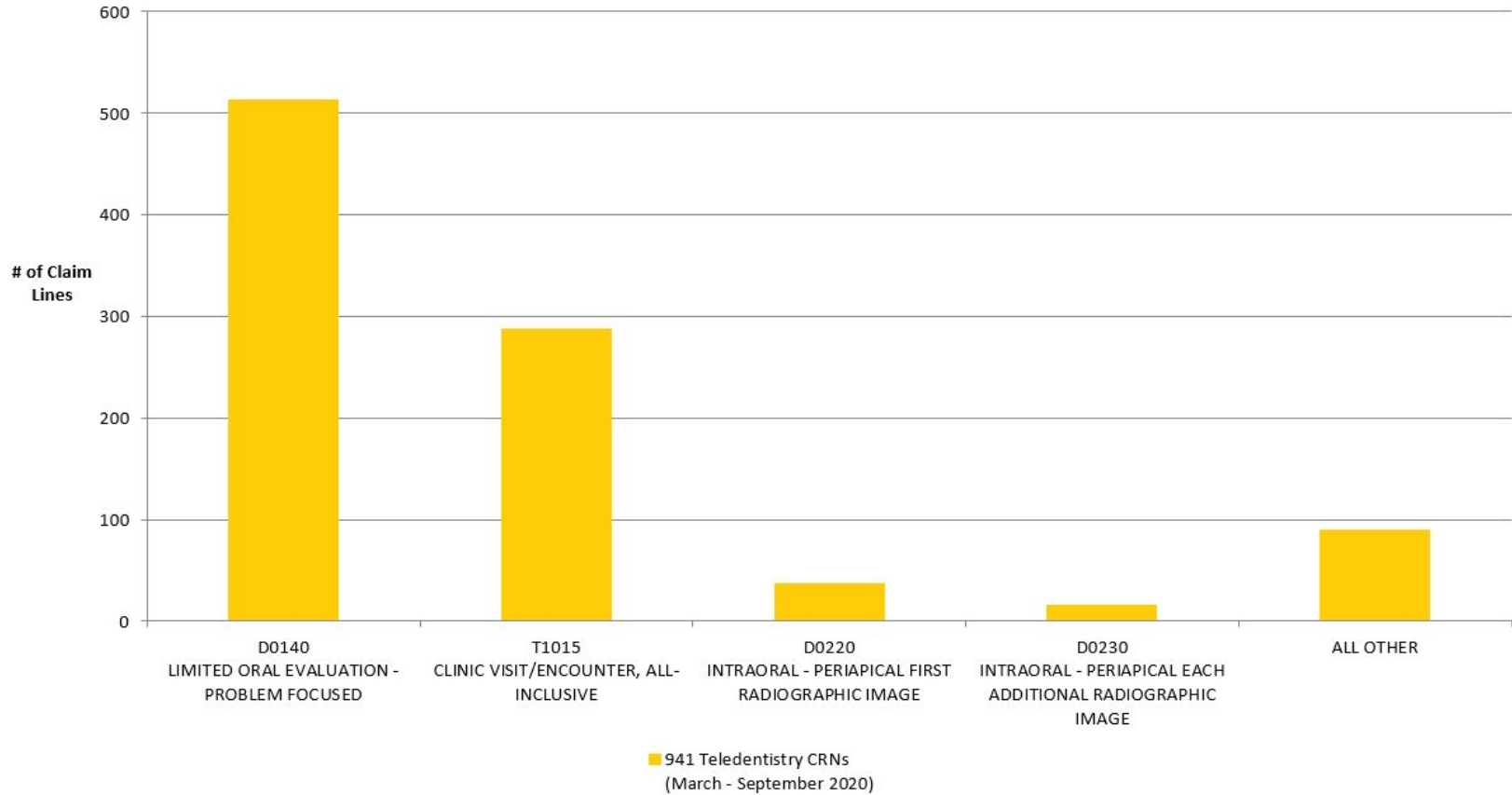
■ Community/Rural Health Center  
(1 Claim)

■ Dentist  
(392 Claims)

■ Federally Qualified Health Center (FQHC)  
(405 Claims)

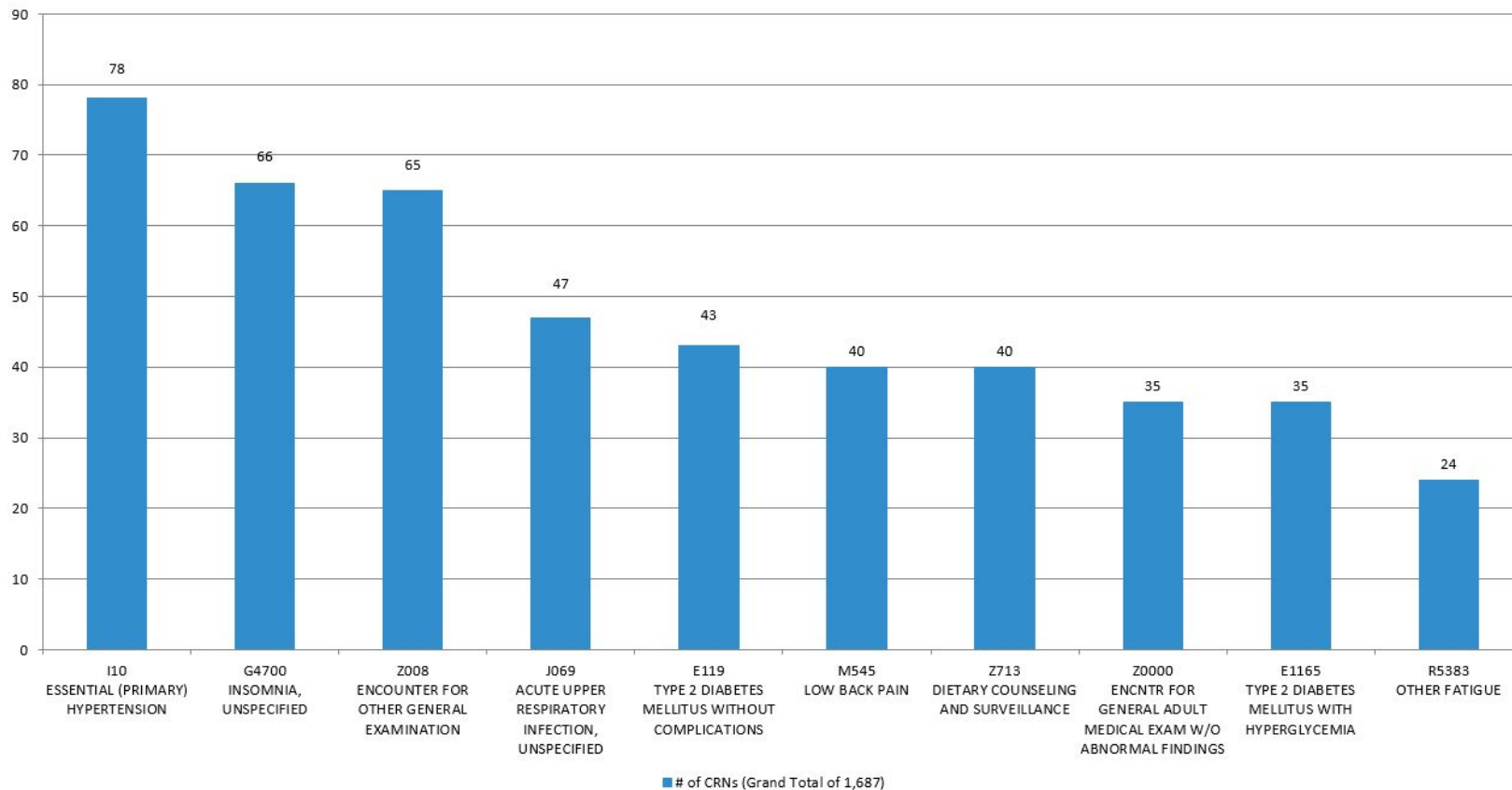


**Most Common Teledentistry Services**  
**March - September 2020**  
**(Number of Claim Lines/Services, All Claims/Encounters, All LOB)**

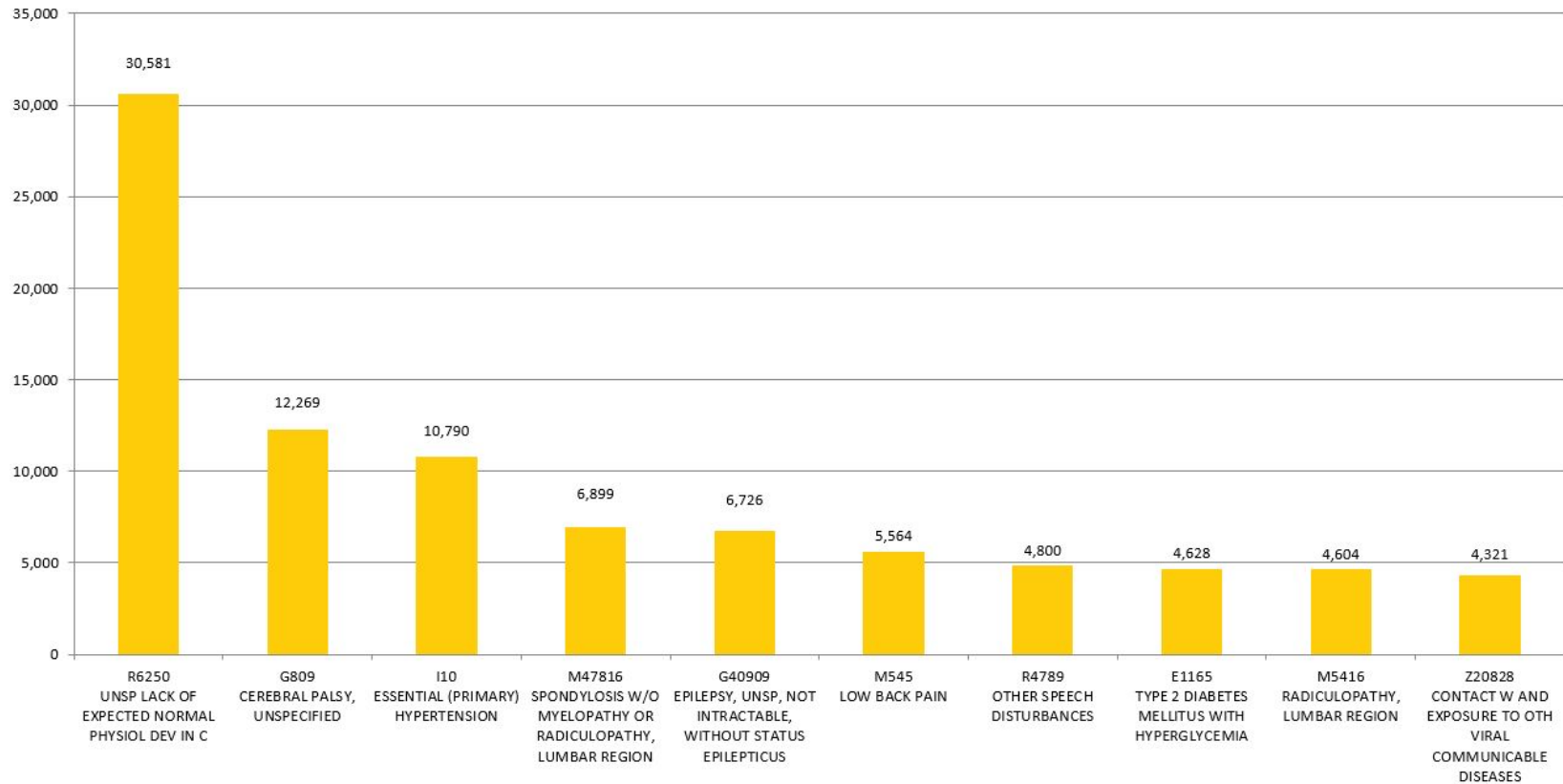


## Most Common Physical Health Primary Diagnoses Treated Via Real-Time Audio/Visual Pre-Pandemic

(Number of Claim Lines, October 2019 - February 2020, PH Indicator = Y, All LOB)



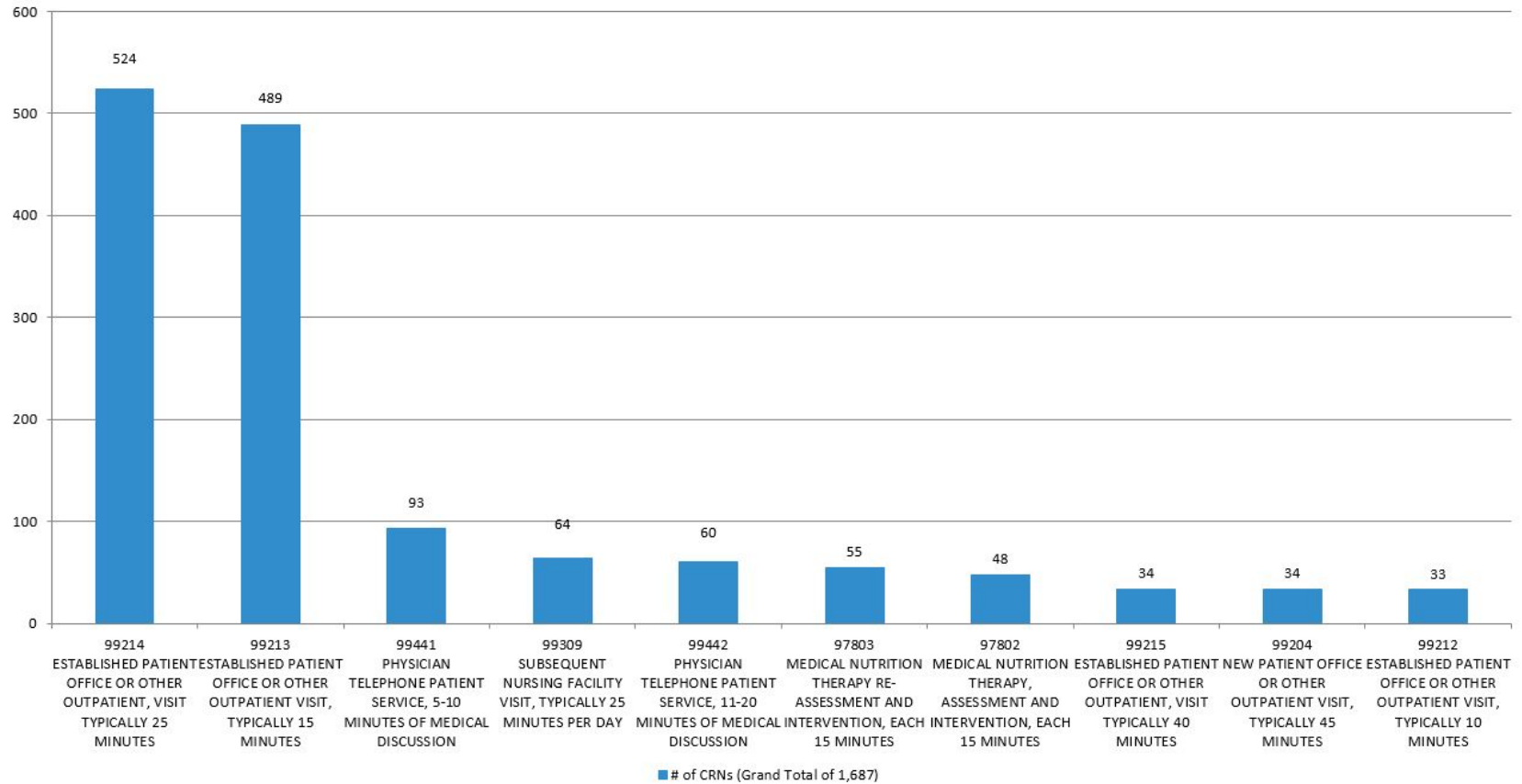
**Most Common Physical Health Primary Diagnoses Treated Via Real-Time Audio/Visual  
March - July 2020  
(Number of Claim Lines, PH Indicator = Y, All LOB)**



■ # of CRNs (Grand Total of 369,457)

## Most Common Physical Health-Related Procedures Via Real-Time Audio/Visual Pre-Pandemic

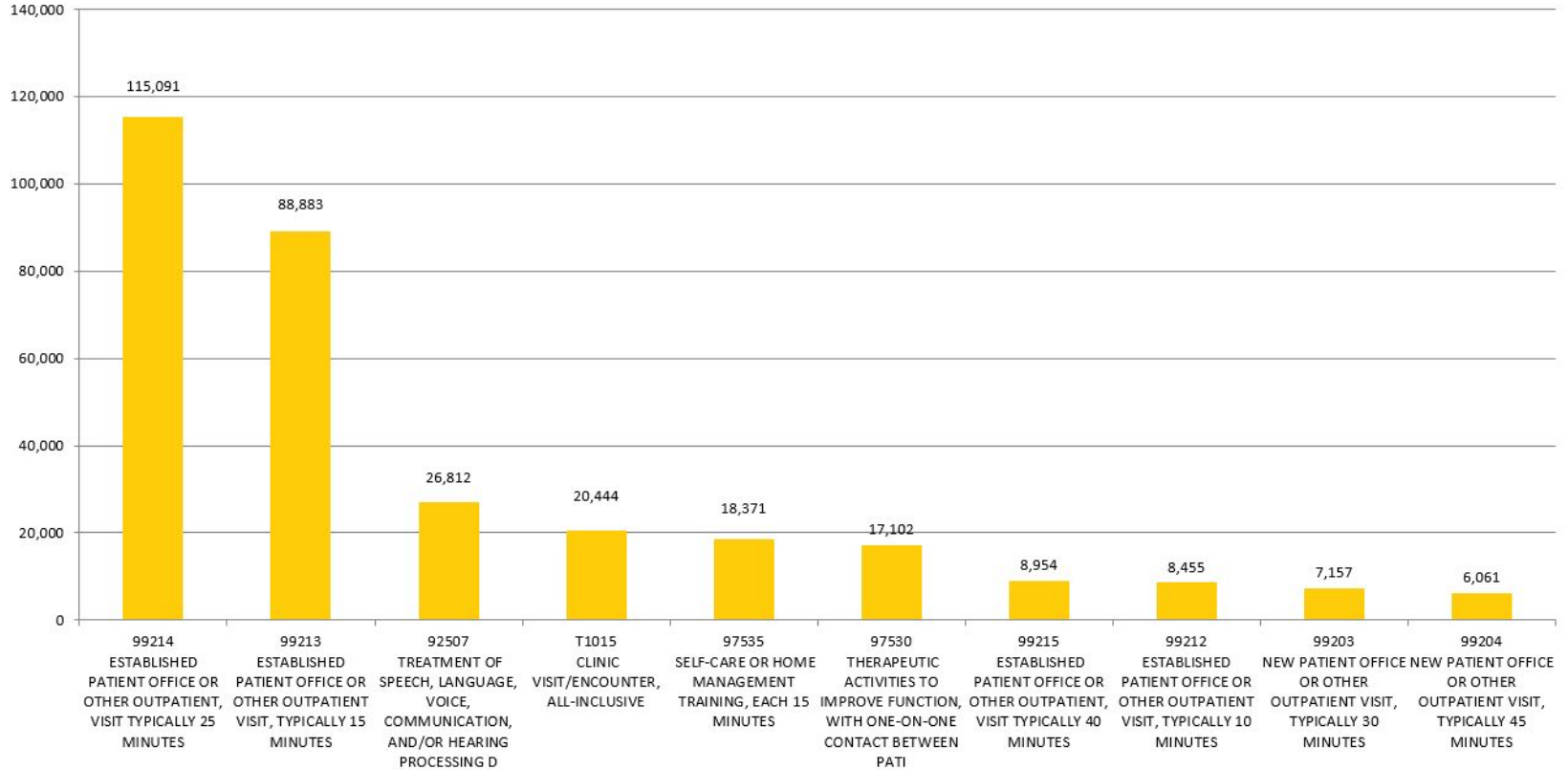
(Number of Claim Lines, October 2019 - February 2020, PH Indicator = Y, All LOB)



# Most Common Physical Health-Related Procedures Via Real-Time Audio/Visual

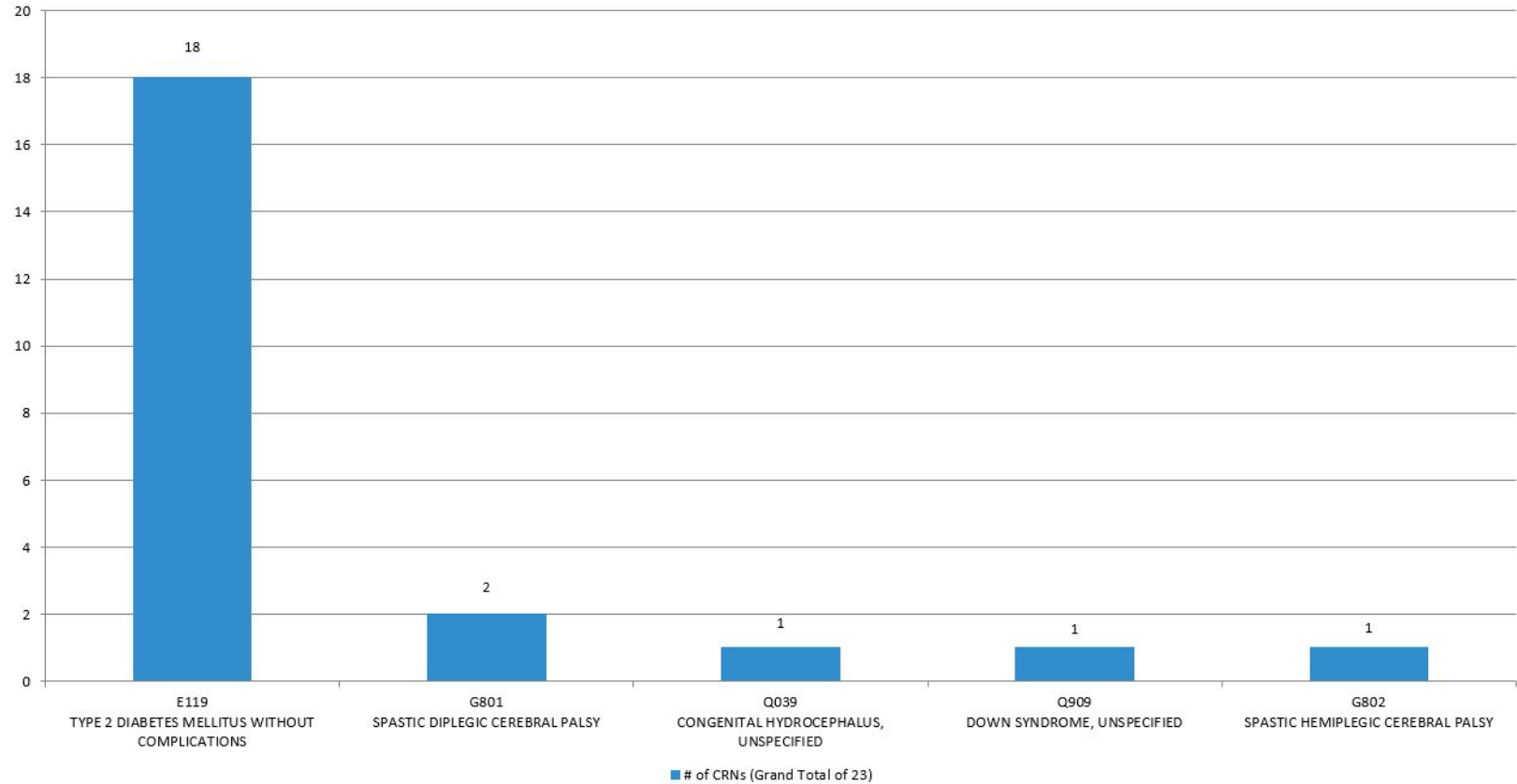
March - July 2020

(Number of Claim Lines, PH Indicator = Y, All LOB)

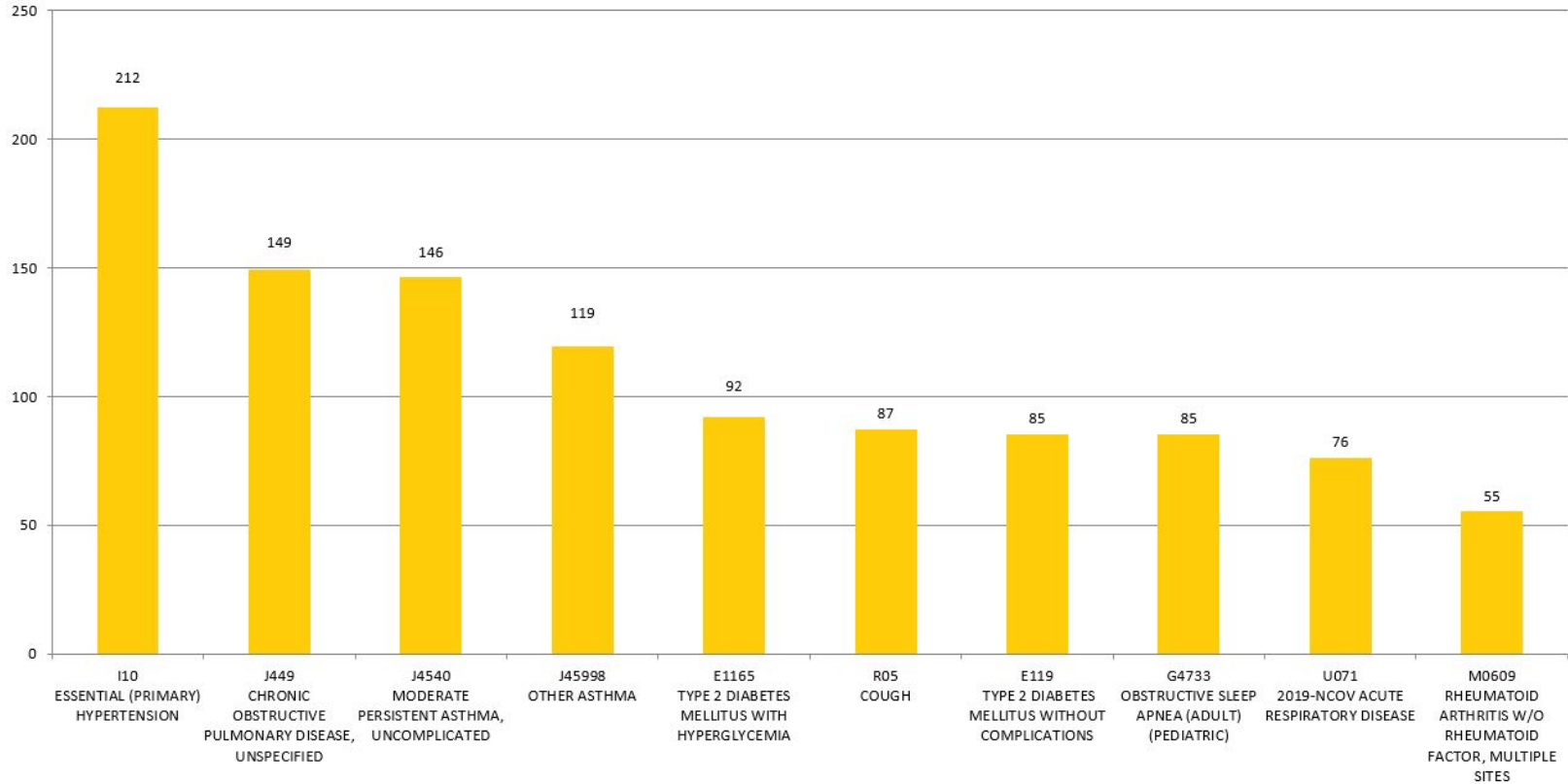


■ # of CRNs (Grand Total of 369,457)

**Most Common Physical Health Primary Diagnoses Treated Via Store & Forward  
Pre-Pandemic**  
(Number of Claim Lines, October 2019 - February 2020, PH Indicator = Y, All LOB)

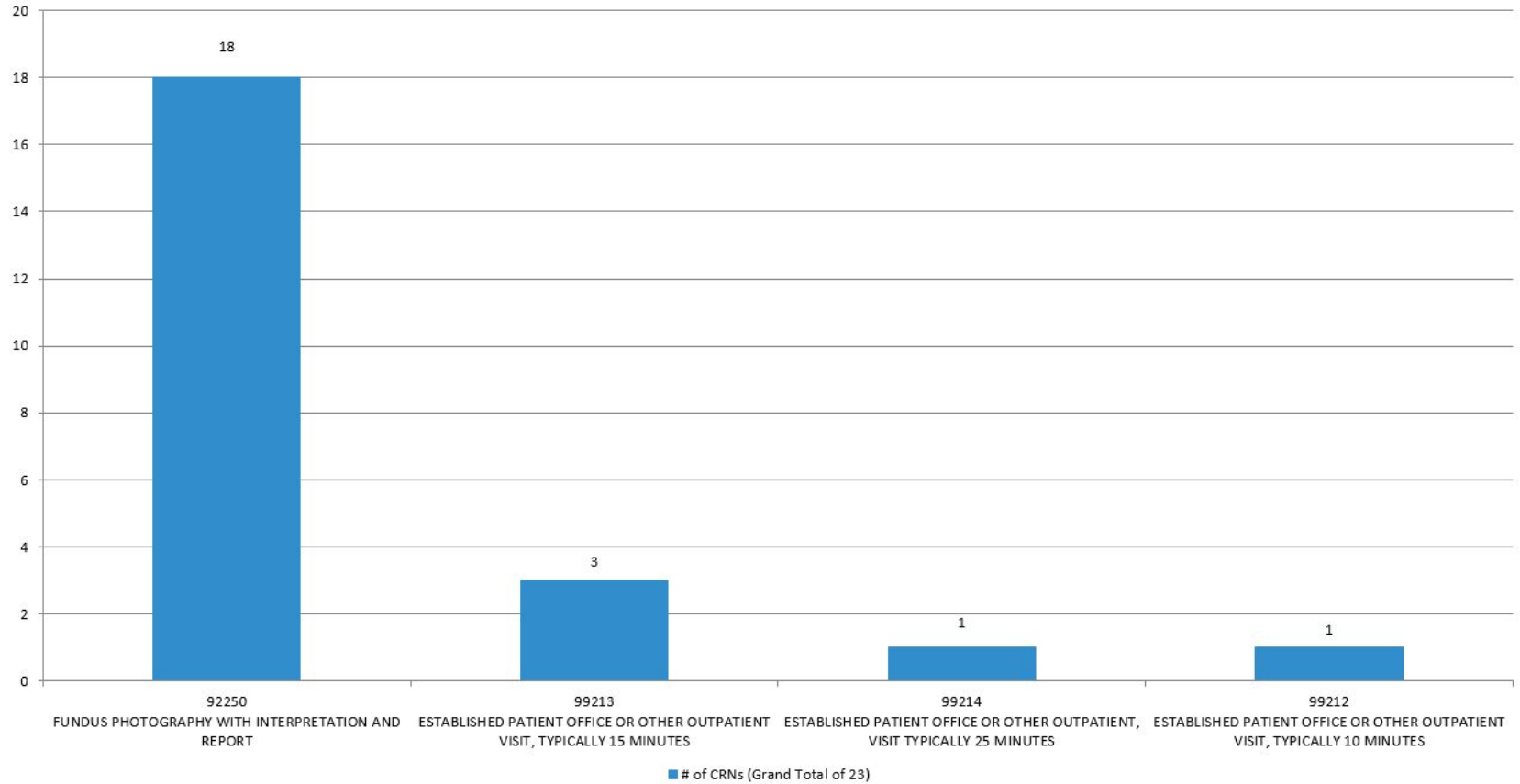


**Most Common Physical Health Primary Diagnoses Treated Via Store & Forward  
March - July 2020  
(Number of Claim Lines, PH Indicator = Y, All LOB)**



■ # of CRNs (Grand Total of 4,109)

**Most Common Physical Health-Related Procedures Via Store & Forward  
Pre-Pandemic  
(Number of Claim Lines, October 2019 - February 2020, PH Indicator = Y, All LOB)**

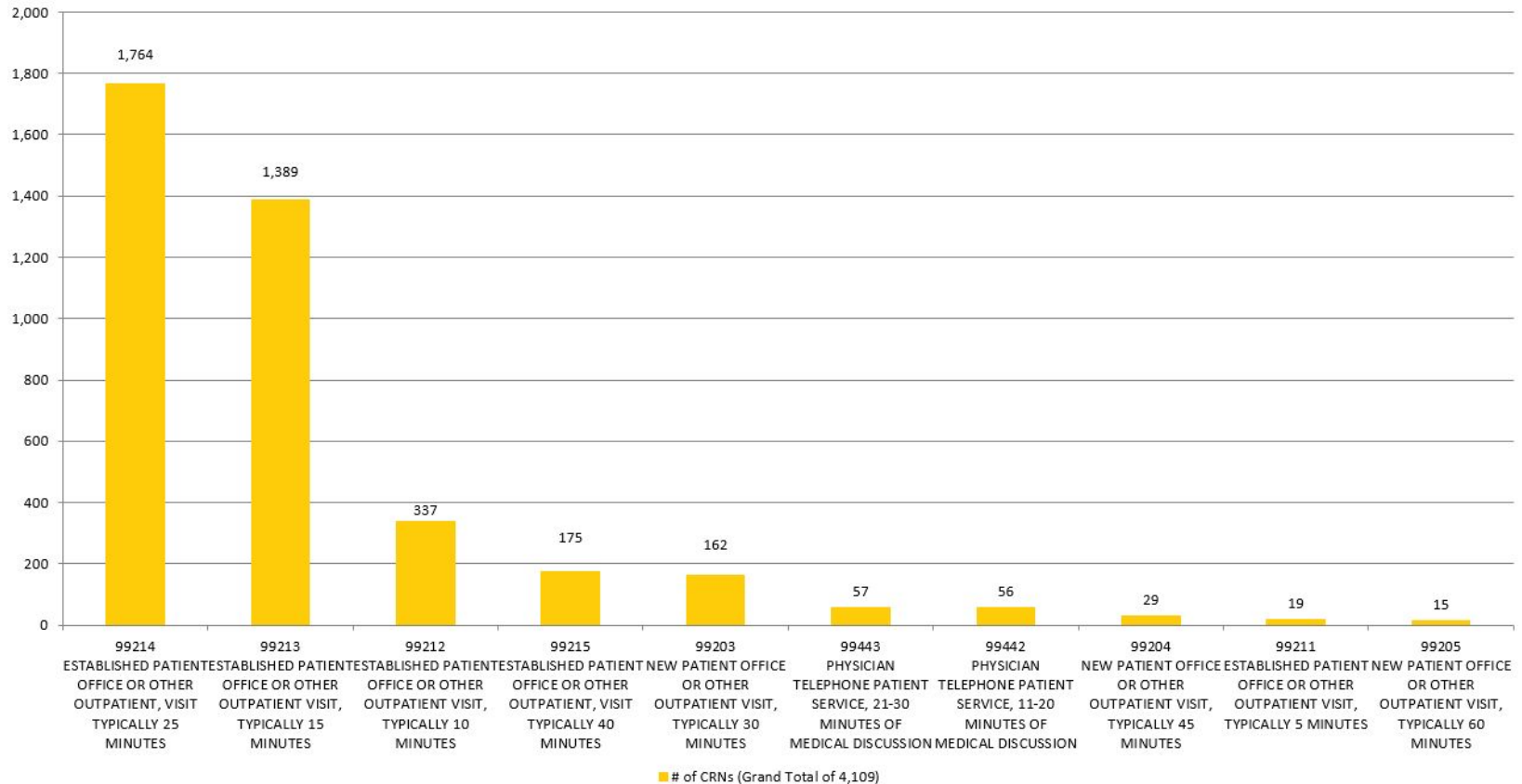




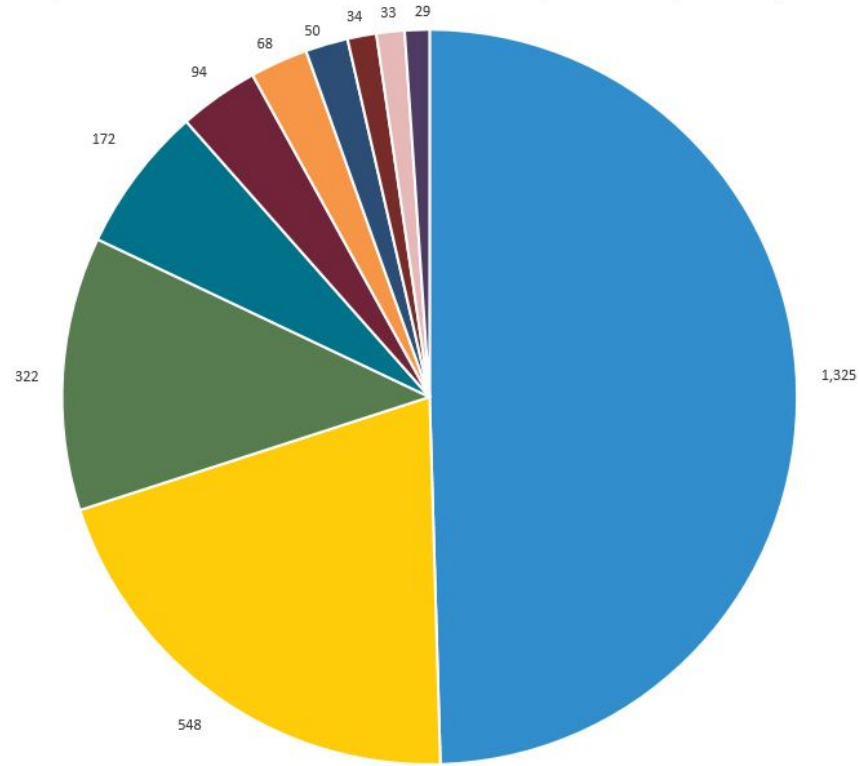
# Most Common Physical Health-Related Procedures Via Store & Forward

March - July 2020

(Number of Claim Lines, PH Indicator = Y, All LOB)



Store & Forward Utilization by Physician Specialty  
 March - July 2020  
 (Number of Claim Lines, PH Indicator = Y, Physicians Only, All LOB)



■ PCP SPECIALTY RATES

■ INTERNAL MEDICINE

■ FAMILY PRACTICE

■ PULMONARY DISEASES

■ RHEUMATOLOGIST

■ GENERAL PRACTICE

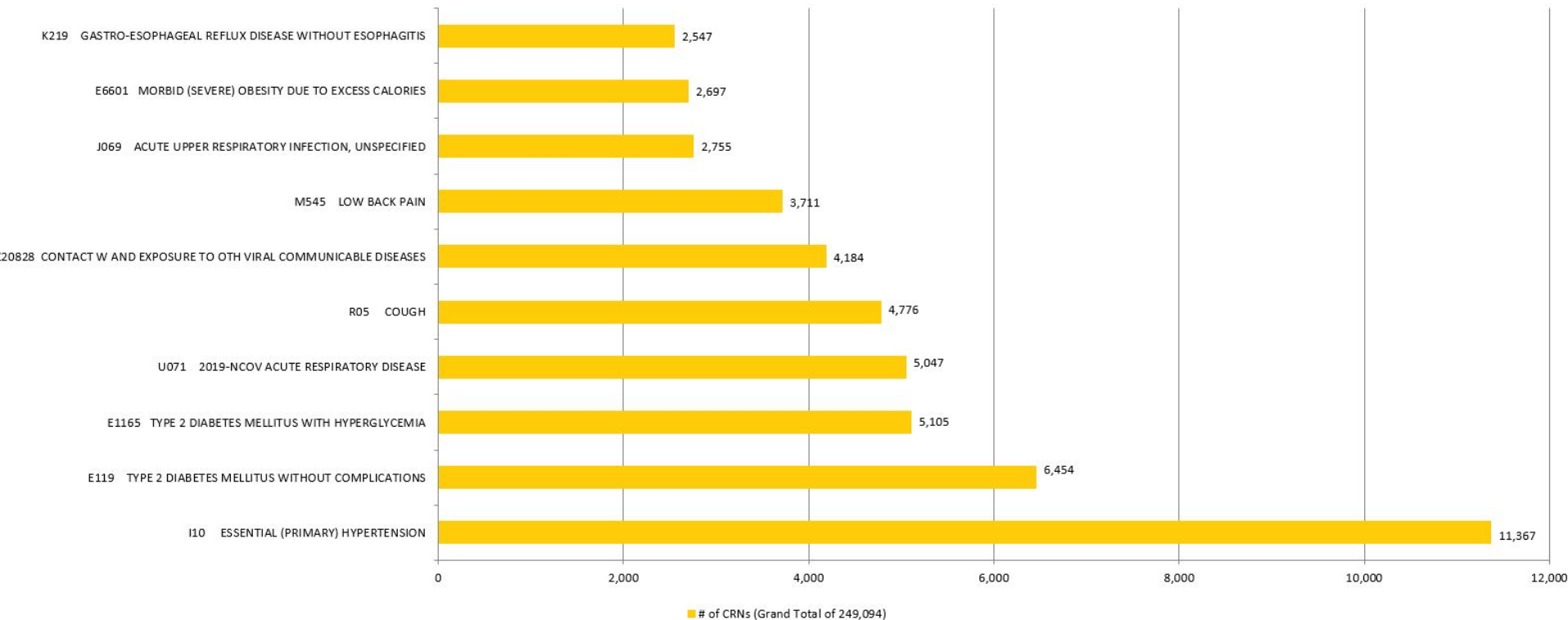
■ NEUROLOGIST

■ OBSTETRICIAN AND GYNECOLOGIST

■ PEDIATRICIAN

■ INFECTIOUS DISEASES

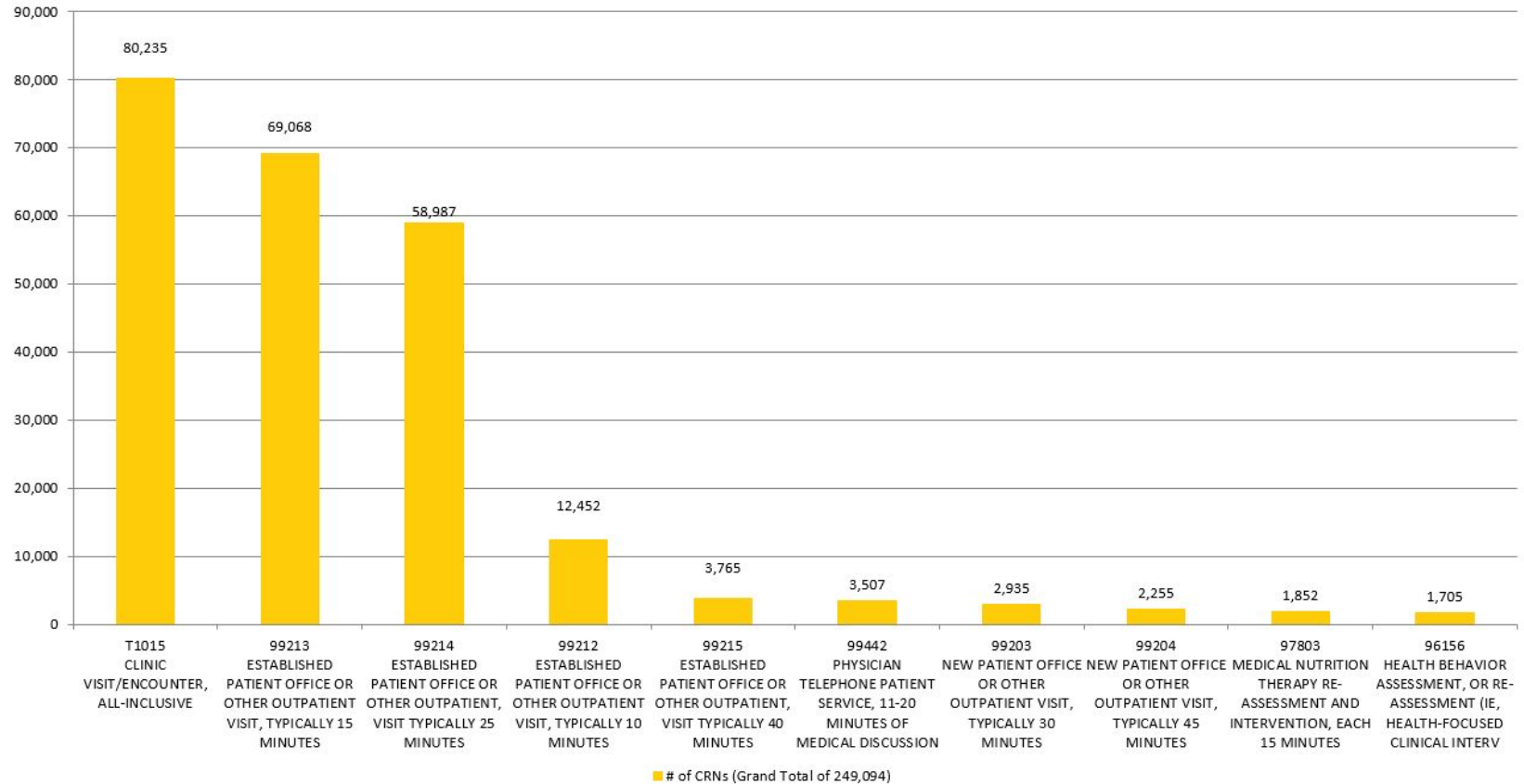
**Most Common Physical Health Primary Diagnoses Treated Via Telephonic-Temporary  
March - July 2020  
(Number of Claim Lines, PH Indicator = Y, All LOB)**



# Most Common Physical Health-Related Procedures Via Telephonic-Temporary

March - July 2020

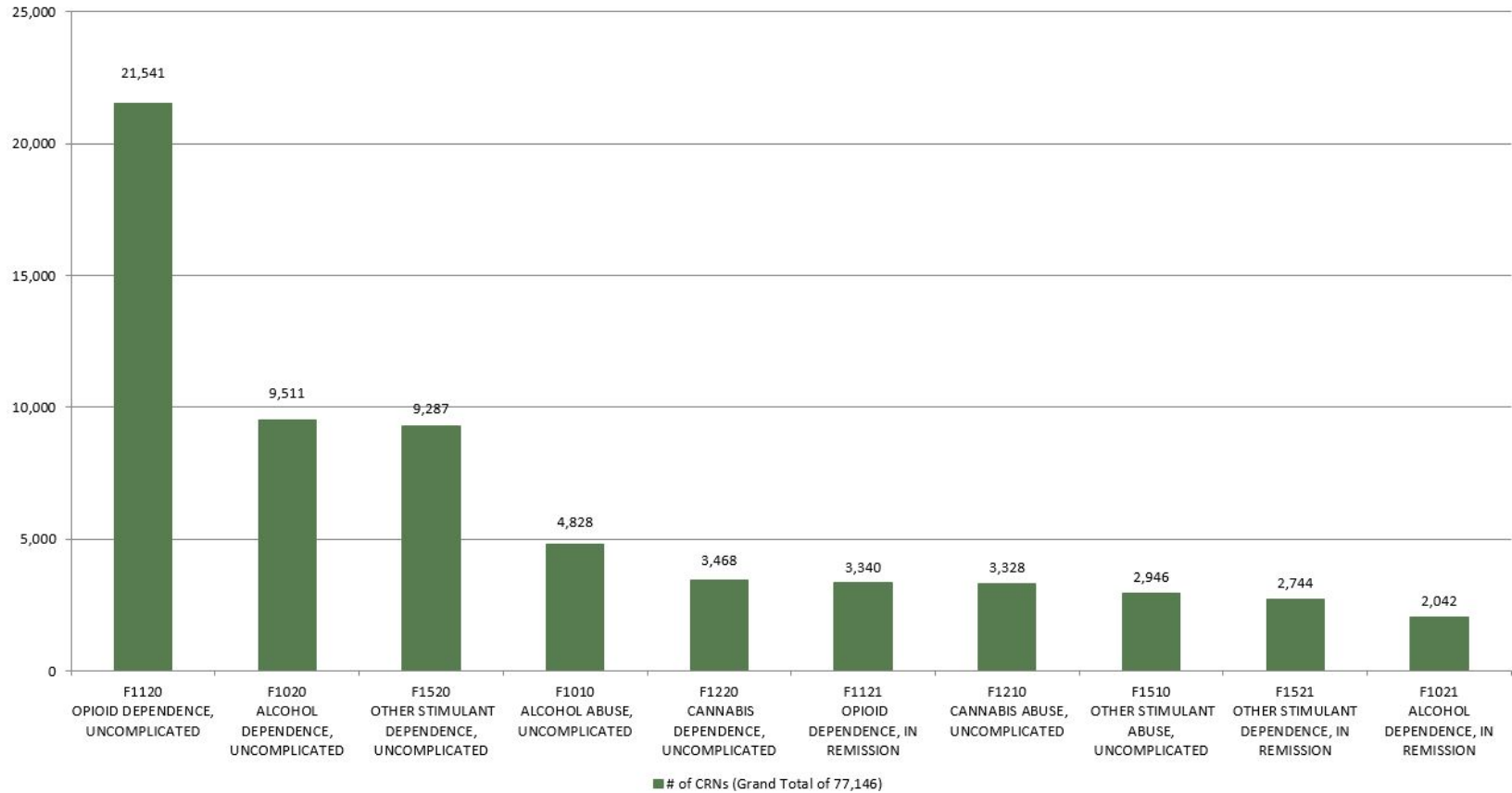
(Number of Claim Lines, PH Indicator = Y, All LOB)



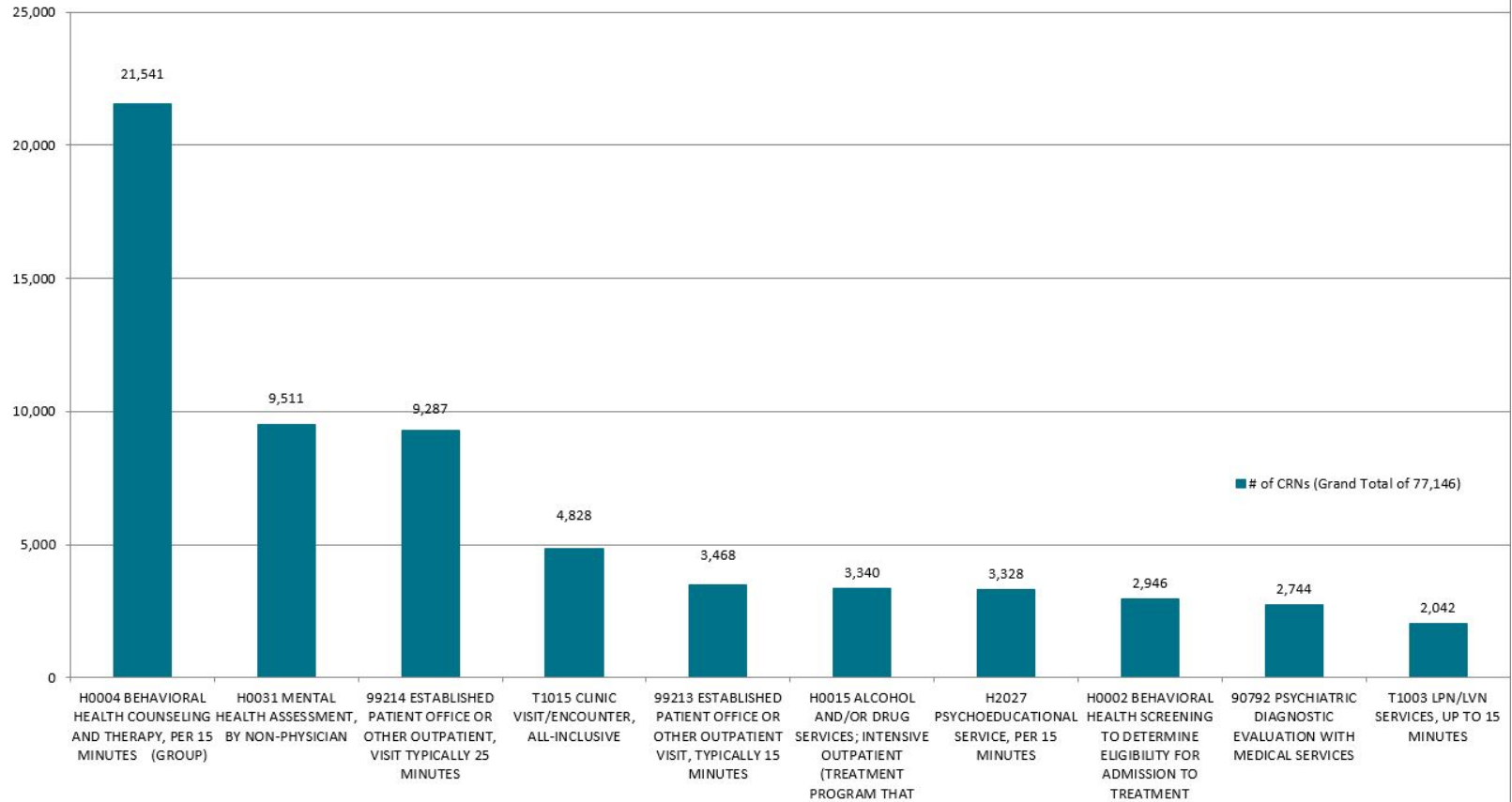
# Most Common Substance Use Primary Diagnoses Treated Via Telephonic-Temporary

March - July 2020

(Number of Claim Lines, SUD Indicator = Y, All LOB)



**Most Common Substance Use-Related Procedures Via Telephonic-Temporary  
March - July 2020  
(Number of Claim Lines, SUD Indicator = Y, All LOB)**



# COVID-19 Vaccine Update

Dr. Sara Salek

Chief Medical Officer

AHCCCS

# COVID-19 Vaccine FAQs [COVID-19 FAQs \(azahcccs.gov\)](https://www.azahcccs.gov)

**Question: Once the COVID-19 vaccine becomes available, will AHCCCS suspend in-network requirements in order for qualified AHCCCS registered providers who are not contracted with an MCO to be reimbursed for administering the vaccine to AHCCCS enrolled members?**

**Answer:** Yes, AHCCCS will require that all MCOs suspend network requirements and reimburse for the COVID-19 vaccine administered by all qualified providers.

**Question: How can AHCCCS-registered providers sign up to become a COVID-19 vaccinator?**

**Answer:** Providers can register with the Arizona Department of Health Services (ADHS) Arizona Immunization Program Office (AIPO) to become COVID-19 vaccinators using this [Provider Onboarding tool](#) developed in the REDCap system. The tool will enable ADHS to: 1) verify providers have the training, cold storage, and record keeping requirements in place to successfully administer COVID-19 vaccine; 2) have providers sign the required Centers for Disease Control and Prevention (CDC) agreements; and 3) deliver the vaccine to the provider once it is available.

**Question: Will the Arizona Department of Health Services (ADHS) COVID-19 vaccine onboarded providers receive the COVID-19 vaccine free of charge?**

**Answer:** Yes. At this time, the COVID-19 vaccines have been purchased by the federal government and thus will be available free of charge to ADHS-onboarded providers.

**Question: How are AHCCCS-registered providers reimbursed for COVID-19 vaccine administration?**

**Answer:** AHCCCS-registered providers who have been onboarded through the Arizona Department of Health Services (ADHS) for COVID-19 vaccine will be reimbursed for the applicable Current Procedural Terminology (CPT) administration code provided to eligible AHCCCS members. Because the vaccine is made available to COVID-19 onboarded providers free of charge, providers must not bill for the vaccine itself.

**Question: What are the AHCCCS fee-for-service reimbursement rates for the COVID-19 vaccine administration?**

**Answer:** AHCCCS has adopted the Medicare payment rates for COVID-19 vaccine administration. The AHCCCS fee-for-service rate for COVID-19 vaccine administration is \$28.39 to administer single-dose vaccines. For a COVID-19 vaccine requiring a series of two or more doses, the initial dose(s) administration payment rate is \$16.94 and \$28.39 for the administration of the final dose in the series.



# COVID-19 Vaccine: ADHS and CDC Resources

## ADHS Resources

- [The Vaccine and Antiviral Advisory Committee \(VAPAC\) December 3rd recommendations](#)
  - VAPAC meeting [minutes](#) and [slides](#)
- [Dr. Christ's media briefing](#) on Arizona's vaccine distribution plan

## CDC Resources

[What Clinicians Need to Know About the Pfizer-BioNTech COVID-19 Vaccine](#)

# Physician Peer Support Program Virtual Doctors' Lounge

Juliana Stanley  
Director, Membership and Practice Support  
Arizona Medical Association (ArMa)



**ARMA**  
ARIZONA MEDICAL  
ASSOCIATION



*VIRTUAL*  
**DOCTORS'**  
**LOUNGE**

powered by  

## PHYSICIAN PEER SUPPORT PROGRAM

JULIANA STANLEY

DIRECTOR, MEMBERSHIP AND PRACTICE SUPPORT

# Physician Need for Support

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- Daily strain
- Added emotional stress due to COVID-19 pandemic
- Financial hardship
- High degree of emotional burnout
- Increasing occurrence of
  - Substance abuse
  - Depression
  - Suicide



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ASSOCIATION

# COVID-19 Added Stressors

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- PPE – shortage, costs
- Fatigue
- Isolation
- Altered standards of care, ethical challenges
- Fear of getting the virus or infecting friends/family members
- Financial concerns
- Witnessing the death of patients
- Uncertainty



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ARIZONA MEDICAL  
ASSOCIATION

# Adverse Effects of Stress/Burnout

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- Lower quality care
- Medical errors
- Longer patient recovery times
- Lower patient satisfaction
- Negative impact on personal/family life



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# Distressed Physicians

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- Physicians often avoid seeking professional mental health assistance
- 44% of physicians experience symptoms of burnout
- 28% of medical residents suffer from depression
- 10-12% of physicians have a substance use disorder
- Approximately 400 American physicians commit suicide each year – more than double the rate of the general population



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# Physician, heal thyself.

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- **Physician (noun):** A person skilled in the art of healing
- Before physicians can adequately treat others, they must first heal themselves. In other words, you first need to fill your cup before you can fill the cup of others.
- But, how?



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# Barriers to Seeking Help

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- Concerns
  - Confidentiality
  - Quality of service
  - Perceived risk to career
  - Impact of treatment on:
    - Professional medical licensure
    - Privileges



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# Barriers to Seeking Help

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- Stigma of mental health conditions
- Internalization of distress
- Most comfortable speaking with other physicians



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# ENJOY BEING A PHYSICIAN AGAIN

Peer-to-peer support for Arizona physicians

In the Virtual Doctors' Lounge, Share your concerns with someone who understands the daily strain you're under and the added pressures of being a physician during a pandemic. Doc to Doc.

Visit [www.MDLounge.com](http://www.MDLounge.com) or call 646-809-0957



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**DOCTORS'  
LOUNGE**

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ARIZONA MEDICAL ASSOCIATION

# PHYSICIAN PEER SUPPORT

- Free to all Arizona licensed physicians and residents, in partnership with ADHS and AHCCCS
- Confidential
- Informal
- Individual



## *VIRTUAL* **DOCTORS' LOUNGE**

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ARIZONA MEDICAL  
ASSOCIATION

# Doc-to-Doc – Connecting Peers

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Supports peak performance for individual physicians

- Virtual/Remote
- Free from perceived stigma
- Relief from emotional exhaustion
- Reduce levels of self-reported burnout
- Reduce barriers to care



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# Corporate Counseling Associates, Inc.

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- Corporate Counseling Associates (CCA) developed the Virtual Doctor's Lounge in collaboration with ArMA.
- 35 years' experience
  - Mental Health in the Workplace
  - Employee Assistance Program (EAP)
  - Crisis Response
  - Work-Life
  - Learning & Development
  - Diversity, Equity and Inclusion
  - Leadership & Management Development



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# Peer Coach Training

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Comprehensive training of “peer coaches” includes:

- Parameters and limitations of the program
- Basic engagement, healthy coping techniques, supportive coaching techniques
- Self-care and boundaries
- Managing high risk concerns; accessing immediate support from the CCA team
- Available supportive and professional resources



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# Arizona Resources

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- Connection to Arizona resources as needed for financial counseling, legal consultation, human resources assistance and more.



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# Program Launch

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- 18 volunteer coaches
- Peer-to-peer connection began October, 2020
- Partners have shared broadly



- Arizona Medical Board



## Supported by

Thanks to the  
Arizona Department  
of Health Services  
and

Arizona Health Care  
Cost Containment  
System

for providing grant  
funding for this  
valuable program.



ARIZONA DEPARTMENT  
OF HEALTH SERVICES



# Contact

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If you have questions or would like to visit the Virtual Doctor's Lounge, please contact:

[www.MDLounge.com](http://www.MDLounge.com)  
[mdlounge@ccainc.com](mailto:mdlounge@ccainc.com)  
(646) 809-0957

Juliana Stanley  
ArMA Director of Membership and Practice Support  
[jstanley@azmed.org](mailto:jstanley@azmed.org)  
(602) 347-6919



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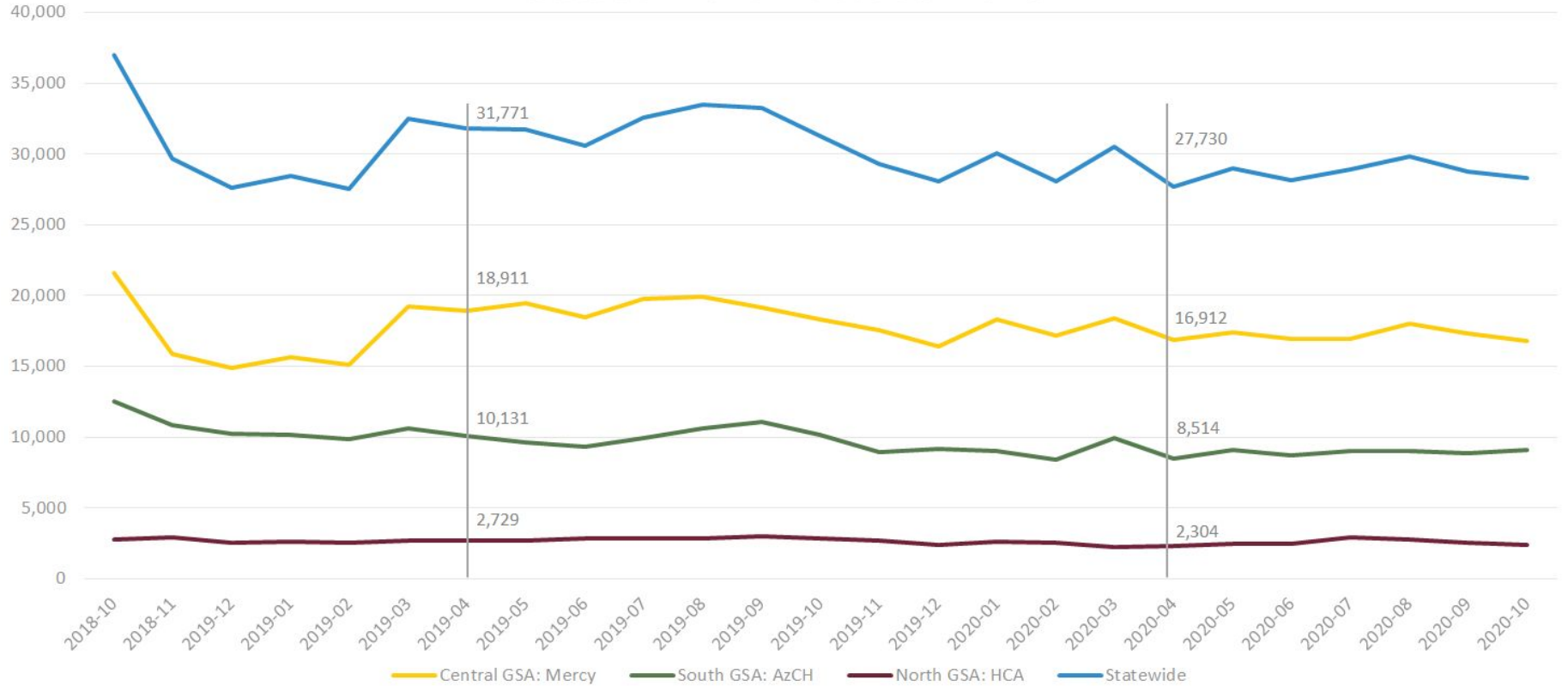
# Crisis System Update

Alex Herrera

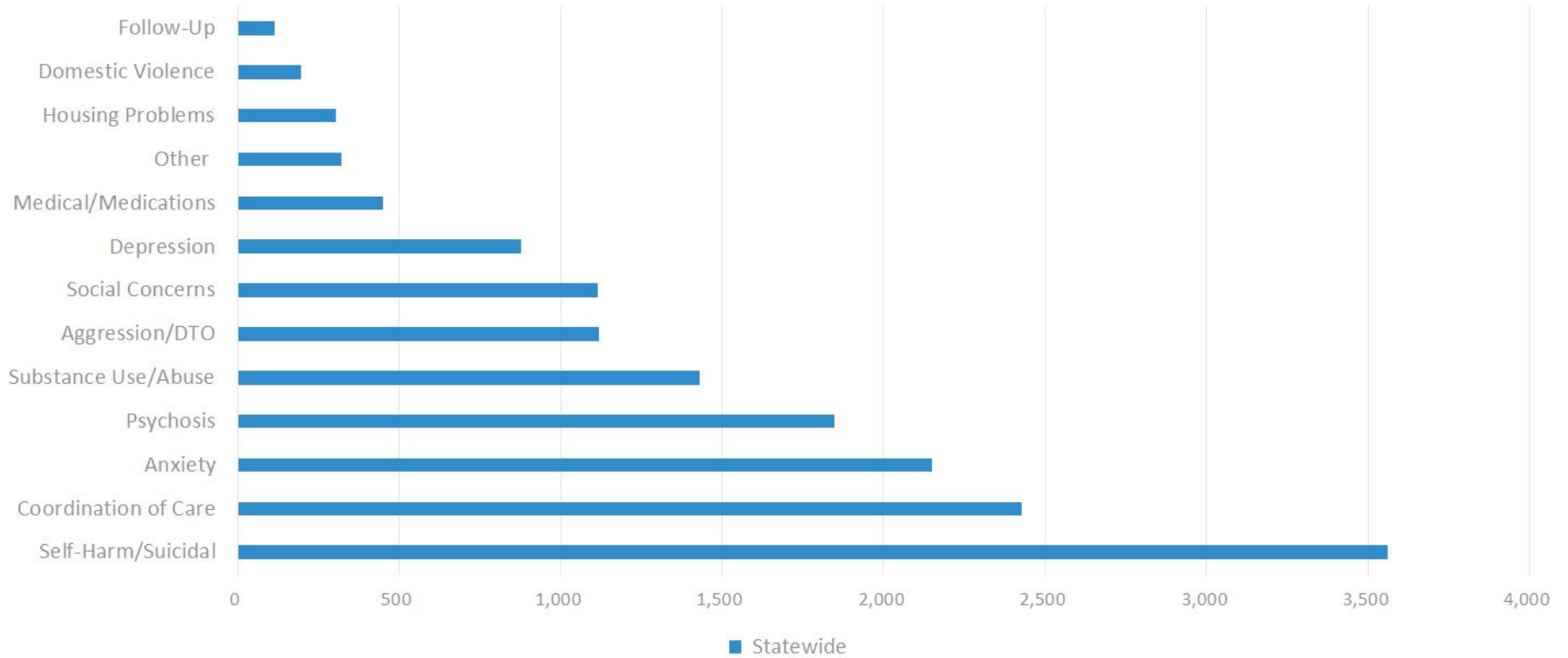
Crisis Administrator / BH Project Manager  
DHCM

# Crisis Call Volume

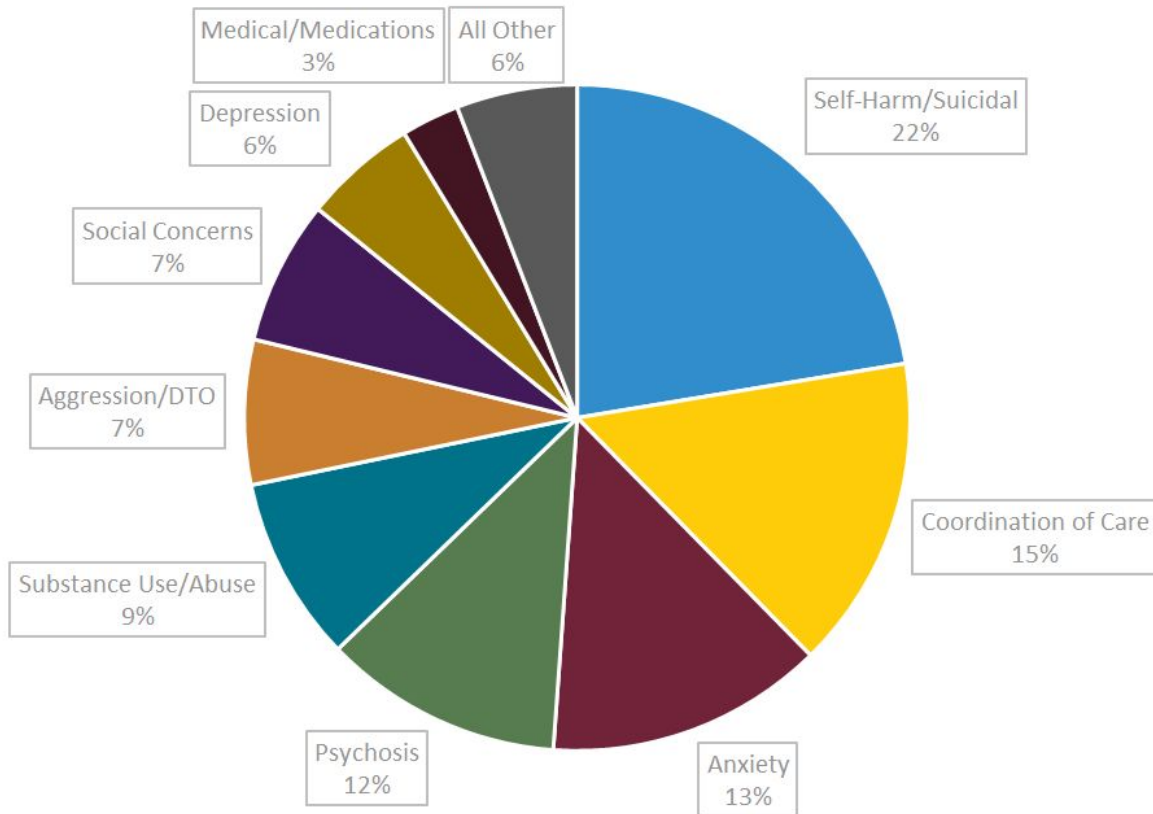
## October 2018 - October 2020



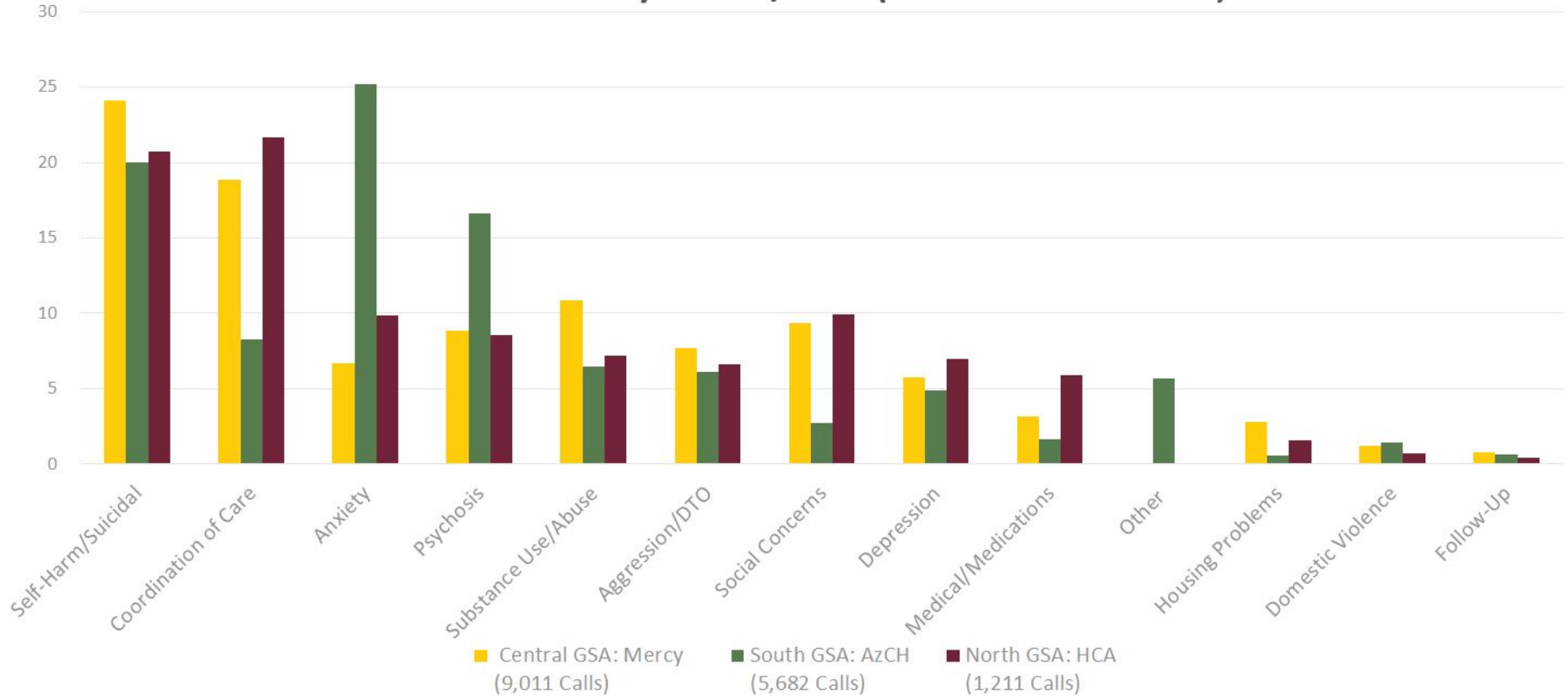
# Crisis Call Center - Top Reasons for Calls October 2020 Statewide



# Crisis Call Center - Top Reasons for Calls October 2020 Statewide



# Crisis Call Center - Top Reasons for Calls October 2020 By RBHA/GSA (Rate Per 100 Calls)



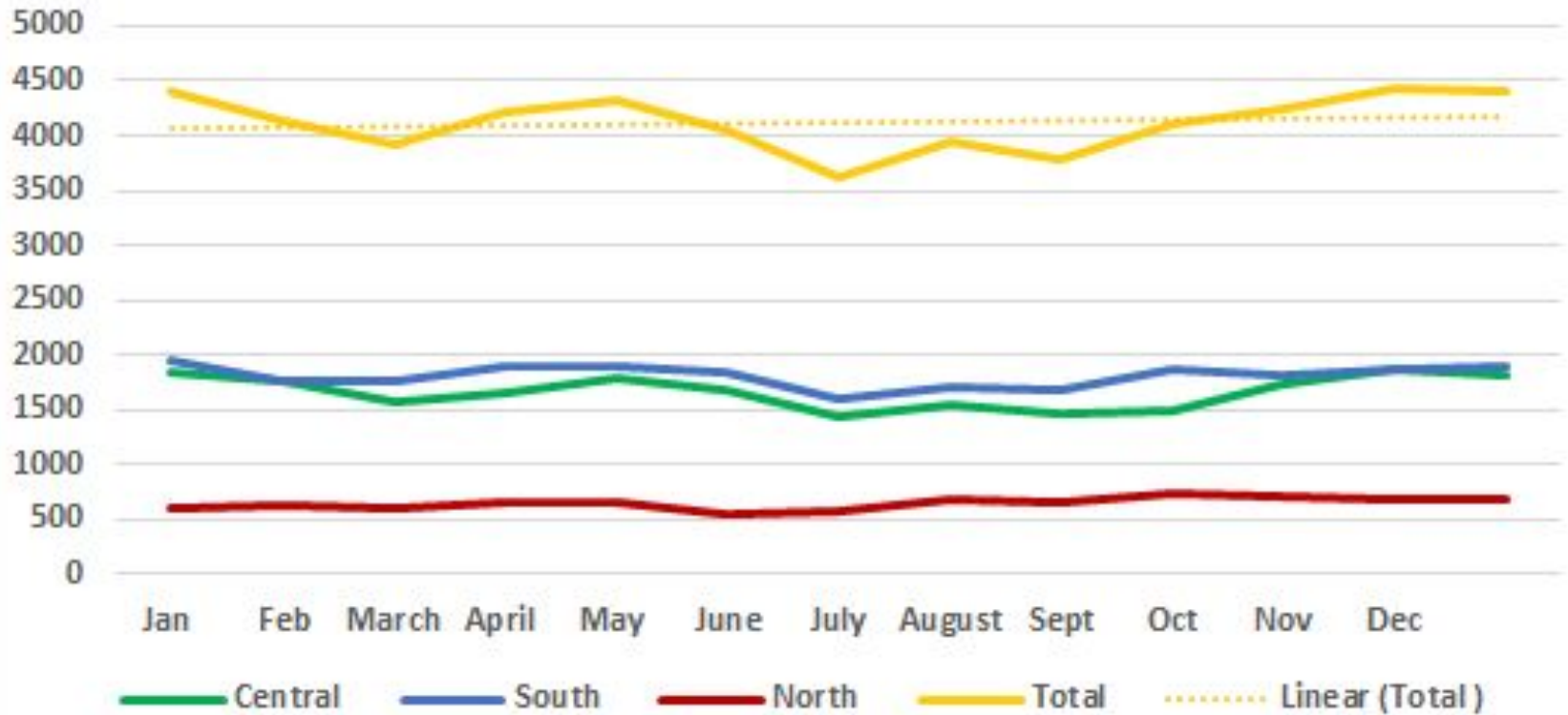


## Total Crisis Mobile Team Dispatches by Year



	Jan	Feb	March	April	May	June	July	August	Sept	Oct	Nov	Dec
2019	4194	4007	4445	4290	4104	3706	3828	4371	4431	4393	4146	3915
2020	4205	4338	4052	3612	3934	3787	4107	4251	4428	4418		

## Crisis Mobile Teams by GSA 2020



# Crisis Counseling Program

Jill Rowland  
Chief Clinical Officer  
AHCCCS

# Crisis Counseling Program Grants

- The mission of the FEMA and SAMHSA Immediate Services Program /Crisis Counseling Program Grant (ISP/CCP) and the Regular Services Program/Crisis Counseling Program Grant (RSP/CCP) is to assist individuals and communities in recovering from the challenging effects of natural and human-caused disasters through the provision of community-based disaster relief/outreach and educational service to include:
  - Individual Supports
  - Group Supports
  - Brief Educational Supportive Contacts
  - Public Education Meetings
  - Assessment, Referral and Resource Linkage
  - Community Networking and Support
  - Media and Public Service Announcements
- AHCCCS received the CCP/ISP Grant Award approval in June 2020 with consequent grant extensions over the summer and received the RSP/CCP Grant Award approval in August 2020; the total amount of funding is just over \$3,200,000 and extends funding to June 2021:
  - Crisis Response Network (CRN) serves as the Contractor to implement and oversee the program and partners with multiple agencies to provide services: Crisis Preparation and Recovery, EMPACT, Family Involvement Center, The Guidance Center, La Frontera and RI International
  - Additional information is on the Resilient Arizona website at [resilientarizona.org](http://resilientarizona.org)

# Crisis Counseling Program Grant

- New Initiatives: Response to COVID-19 Public Health Emergency:
  - Focused PSA's/Public Messaging Collaboration
    - Fentanyl Overdoses and Suicide Prevention
    - Tribal and Rural Communities
  - Navajo Nation collaborative with Arizona, New Mexico and Utah (AHCCCS and CRN/Resilient Arizona)

# RESILIENT *Arizona*

## CRISIS COUNSELING PROGRAM



CALL 2-1-1 TO CONNECT WITH A CRISIS COUNSELING PROVIDER.

### CENTRAL ARIZONA



EMFACT - Suicide Prevention Center  
 Phone: 480-756-4455  
 Hours of operation: 24/7  
 Email: [EMFACT@lafro.org](mailto:EMFACT@lafro.org)

Crisis Preparation and Recovery  
 Phone: 480-477-8882  
 Hours of operation: 7 AM - 4 PM  
 Email: [CRISIS@lafro.org](mailto:CRISIS@lafro.org)



RI International  
 Phone: 602-699-0212  
 Hours of operation: 9 AM - 8 PM

Family Involvement Center  
 Phone: 602-288-0955  
 Hours of operation: 8:30 AM - 5:30 PM  
 Email: [FOCUS@familyinvolvementcenter.org](mailto:FOCUS@familyinvolvementcenter.org)



### NORTHERN ARIZONA



The Guidance Center  
 Phone: 520-714-6245  
 Hours of operation: 24/7

RI International  
 Phone: 602-699-0212  
 Hours of operation: 9 AM - 8 PM



Family Involvement Center  
 Phone: 602-288-0955  
 Hours of operation: 8:30 AM - 5:30 PM  
 Email: [FOCUS@familyinvolvementcenter.org](mailto:FOCUS@familyinvolvementcenter.org)

### SOUTHERN ARIZONA



La Frontera Center  
 Phone: 520-389-9505  
 Hours of operation: 9 AM - 7 PM  
 Email: [CS@lafro.org](mailto:CS@lafro.org)

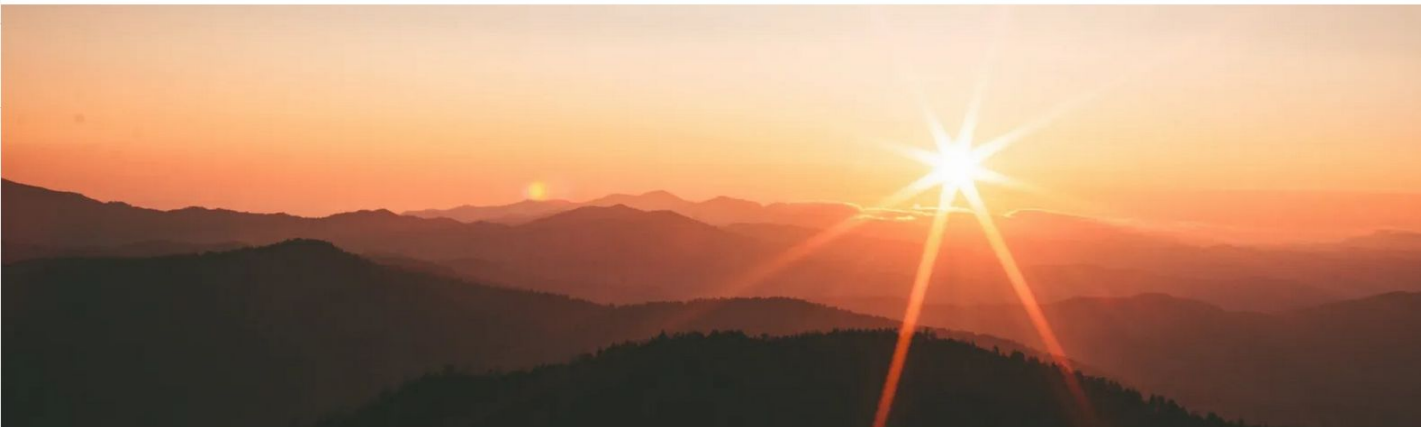
RI International  
 Phone: 602-699-0212  
 Hours of operation: 9 AM - 8 PM



Family Involvement Center  
 Phone: 602-288-0955  
 Hours of operation: 8:30 AM - 5:30 PM  
 Email: [FOCUS@familyinvolvementcenter.org](mailto:FOCUS@familyinvolvementcenter.org)

Call 2-1-1 to connect with an Arizona Crisis Counseling Provider.

HOME ABOUT PROVIDERS COVID-19 ESPAÑOL MEDIA



#### What we do

Resilient Arizona Crisis Counseling Program is a federally funded program that helps people and communities recover from the effects of disasters and/or pandemics through short-



#### Free and confidential

Our services are 100% free and confidential.



#### Providers

Resilient Arizona providers are located throughout Arizona and specialize in short-term counseling and emotional support. Dial 2-1-1 to connect with a provider today.



Visit [www.resilientarizona.org](http://www.resilientarizona.org)



# RESILIENT *Arizona*

## CRISIS COUNSELING PROGRAM

Primary Service	Number Served ISP	Number Served RSP	TOTAL
Unique Referrals	1,759	1,336	3,095
Individual Crisis Counseling	571	404	975
Group Counseling/Public Education	557	697	1,254
Brief Educational/Supportive Contact	1,414	819	2,233
Total Unique Interactions	2,542	1,920	4,462

# RESILIENT *Arizona*

## CRISIS COUNSELING PROGRAM

Other Contacts/Materials Distributed	
Hotline/helpline/lifeline contact	534
Telephone contact	1,620
E-mail contact	4,404
Community networking and coalition building	1,481
Material handed to people	6,341
Material mailed to people	2,282
Material left in public places	7,746
Mass media	254
Social networking messages	1,535
<b>Total</b>	<b>26,197</b>



# Meeting Recap and Next Steps

Dr. Sara Salek

CMO

AHCCCS

Thank You.

2021 Meetings:

March 16th, July 15th, November 18th