

2025 ANNUAL REPORT



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Executive summary



As we reflect on 2025, I am proud of the progress we've made together to fulfill our purpose of bringing together diverse voices to advance health and healthcare in Arizona. This year, AzHHA amplified its collective voice on critical policy and regulatory issues, secured important wins in state and federal advocacy, and advanced initiatives that improve care and support our healthcare workforce. From shaping legislation that protects patient access to care to driving conversations on innovation and emergency preparedness, our work demonstrates the power of collaboration.

None of these achievements would be possible without you—our members. Your engagement in advocacy efforts, participation in constituency and peer groups, and commitment to advancing health in Arizona inspire everything we do.

Thank you for your trust and partnership. Together, we are focused on protecting access to care to build a stronger, more resilient healthcare system for the patients and communities that we all serve.

In health,

A handwritten signature in black ink that reads "Ann-Marie".

Ann-Marie Alameddin
President and CEO
AzHHA

OUR PURPOSE

The Arizona Hospital and Healthcare Association: Bringing together diverse voices to advance health and healthcare in Arizona.

AzHHA 2025 Board of Directors

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Board Chair

President and CEO
Onvida Health



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Aurora Behavioral Health System



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President and CEO
Valleywise Health



Vicki Began, R.N., M.N.
Board Director

CEO
San Carlos Apache
Healthcare Corporation

In October 2025, the Board of Directors approved
two new healthcare executives to serve on its board
and confirmed its roster for 2026.

Scan the QR code to learn more.



Hospital and Healthcare MEMBERS

Hospital

Acute Care

- Community Health Systems (CHS)
 - » Northwest Medical Center
 - » Northwest Medical Center Houghton
 - » Northwest Medical Center Sahuarita
 - » Oro Valley Hospital
 - » Western Arizona Regional Medical Center
- Kingman Regional Medical Center
- Lifepoint Health
 - » Canyon Vista Medical Center
 - » Havasu Regional Medical Center
 - » Valley View Medical Center
- Mayo Clinic Hospital
- Onvida Health
- Summit Healthcare
- TMC Health
 - » TMC Rincon
 - » Tucson Medical Center
- Valleywise Health

Behavioral Health

- Acadia Healthcare
 - » Agave Ridge Behavioral Hospital
 - » Oasis Behavioral Health Hospital
 - » Sierra Tucson
 - » Sonora Behavioral Health Hospital
- Aurora Behavioral Health
 - » Aurora Behavioral Health System
 - Glendale Campus
 - » Aurora Behavioral Health System
 - Tempe Campus
- Avenir Behavioral Health Center at Surprise
- College Medical Center Phoenix
- Haven Behavioral Hospital of Phoenix
- Lifepoint Health
 - » Copper Springs East
 - » Copper Springs Hospital
 - » El Dorado Springs Behavioral Health
- Phoenix Medical Psychiatric Hospital
- Polaris Health
- The Guidance Center
- Universal Health Services, Inc.
 - » Palo Verde Behavioral Health

- » Quail Run Behavioral Health
- » Valley Hospital
- » Via Linda Behavioral Hospital

Critical Access

- Cobre Valley Regional Medical Center
- Copper Queen Community Hospital
- La Paz Regional Hospital
- Little Colorado Medical Center
- Mt. Graham Regional Medical Center
- TMC Health
 - » Benson Hospital
 - » Northern Cochise Community Hospital
- White Mountain Regional Medical Center
- Wickenburg Community Hospital

Federal

- Chinle Comprehensive Health Care Facility
- Gila River Health Care
 - » Hu Hu Kam Memorial Hospital
- Hopi Health Care Center
- Kayenta Service Unit
 - » Kayenta Alternative Rural Hospital
- Phoenix Area Indian Health Services
 - » Phoenix Indian Medical Center
- Sage Memorial Hospital – Navajo Health Foundation
- San Carlos Apache Healthcare Corporation
- Tsehootsooi Medical Center (Ft. Defiance)
- Tuba City Regional Healthcare Corporation
- VA Medical Center

- » Northern Arizona VA Health Care System
- » Phoenix VA Health Care System
- » Southern Arizona VA Health Care System
- Winslow Indian Health Care Center
 - » Dilkon Medical Center

Post-Acute Care

- ClearSky Rehabilitation Hospital of Avondale
- Encompass Health Corporation
 - » Encompass Health Rehabilitation Hospital of the East Valley

- » Encompass Health Rehabilitation Hospital of Scottsdale
- » Encompass Health Rehabilitation Hospital of Northwest Tucson
- » Encompass Health Rehabilitation Institute of Tucson
- » Encompass Health Valley of the Sun Rehabilitation Hospital
- » Yuma Rehabilitation Hospital

Ernest Health

- » Mountain Valley Regional Rehabilitation Hospital
- » Rehabilitation Hospital of Northern Arizona

Lifepoint Health

- » Dignity Health East Valley Rehabilitation Hospital – Chandler
- » Dignity Health East Valley Rehabilitation Hospital – Gilbert

Select Medical Corporation

- » HonorHealth Rehabilitation Hospital
- » Select Specialty Hospital – Phoenix
- » Select Specialty Hospital – Phoenix Downtown
- » Select Specialty Hospital – Tucson East
- » Select Specialty Hospital – Tucson Northwest

Vista Specialty Hospital of Tucson, LLC

Specialty

- The CORE Institute Specialty Hospital

Healthcare

- Arizona Center for Rural Health, University of Arizona
- Calvary Healing Center (UHS)
- Community Bridges
- Donor Network of Arizona
- Fountain Hills ER and Medical Center
- Hospice of the Valley
- Jacob's Hope
- Legacy Foundation of Southeast Arizona
- PHI Air Medical, LLC
- Ryan House
- The Neighborhood Christian Clinic



2025

policy and advocacy priorities and accomplishments

AzHHA's strategy for the 2025 legislative session was shaped by a focused set of priorities developed through a collaborative process involving our Public Policy Committee and Board of Directors. Together, these groups helped identify and craft a policy agenda based on the urgent needs of Arizona hospitals and the communities they serve.

Our legislative priorities were not created in isolation; they reflected both the changing challenges in healthcare delivery and the real-time feedback from our member hospitals. This approach ensured that AzHHA was not only proactive in setting the agenda but also responsive to the quickly evolving political and healthcare environment.

From strengthening hospital financing and preserving rural health infrastructure to advancing critical reforms in interfacility transportation and health plan accountability, our advocacy focused on protecting patient access, enhancing care delivery and ensuring the financial sustainability of Arizona's hospital system.

What follows is a summary of the top accomplishments and priority issues AzHHA advanced throughout the session, each reflecting our commitment to strategic engagement, strong partnerships and results-driven advocacy.

HEALTHII advocacy

The Centers for Medicare and Medicaid Services' (CMS) delay in renewing HEALTHII payments caused significant operational challenges statewide for hospitals. AzHHA stepped in and sent letters to Arizona's Congressional Delegation highlighting the gravity of the situation impacting hospital operators. In these letters, we strongly encouraged our delegation to support the swift approval of these crucial payments.

To help combine our collective voice, AzHHA created a template letter for member hospitals to use that showed the impact of the delay in payment to that specific hospital.

As a result of our combined efforts, the delayed \$2.3B in net HEALTHII payments were finally released for Federal Fiscal Year (FFY) 2025. Additionally, FFY 2026 net HEALTHII payments will increase to \$2.9B.

Showing our community impact

As we work to educate our legislators and the public, we've been working with our member hospitals to help tell the story. It's important to provide concrete examples of what we're doing to build better health and healthcare in our communities. Through these efforts, we've worked to secure local broadcast, print and online coverage showcasing the amazing work of our members.

Health insurance accountability

One advocacy priority remains consistent among AzHHA member hospitals: ensuring that health insurers operate fairly, transparently and are prompt in their payment practices. This is crucial for the financial stability and operational viability of all types of hospitals, including urban and rural facilities, large systems and small independents, safety-net providers and specialty institutions. Health insurers play a key role in determining how and when hospitals are compensated, what services are covered and how patients access care. When health insurers delay, deny or underpay claims, hospitals are left to navigate complex appeals processes, absorb financial losses and manage disruptions in patient care. These challenges are particularly severe for smaller and rural hospitals, but they impact the entire healthcare system, compromising access, straining resources and undermining access to care. Ensuring vital oversight and accountability of health insurers is essential for supporting a fair, efficient and sustainable healthcare system for all Arizonans.

This year, AzHHA revived its comprehensive health insurance accountability legislation from previous sessions but took a new strategic approach, dividing it into two separate bills. [HB2130](#) and [SB1291](#) became the pathway for advancing the most important parts of last year's omnibus bill [HB2035](#). This change in strategy opened up new opportunities for success and led us to a crucial decision: to focus on two key changes in health plan operations and oversight that would have the greatest impact on hospitals and other healthcare providers. As a result, we shifted our attention to the passage of SB1291, health insurers; provider credentialing; claims and [HB2175](#), prior authorization; claims to create a mechanism to regulate the use of artificial intelligence in prior authorizations and claims denials based on medical necessity. Let's take a closer look at each of these.



SB1291

**Thank you for
your sponsorship**
Senator Angius

Improves provider credentialing by reducing processing time and limiting delays in application approvals.

Reducing credentialing delays:

[SB1291](#) [health insurers](#); [provider credentialing](#); [claims](#)

Provider credentialing delays continue to be a significant concern for Arizona hospitals, particularly as they strive to recruit and rebuild their provider workforce. Many AzHHA members have experienced delays of over 180 days in credentialing a provider with a commercial plan, far surpassing the original 100-day timeline.

SB1291 directly addresses this issue by reducing the health insurer's credentialing timeframe to 60 calendar days and requires the applicant's information be loaded into the billing system within 30 days after the health insurer receives a complete credentialing application. It also improves transparency and efficiency by requiring commercial plans to:

- Acknowledge receipt of a provider credentialing application within seven calendar days.
- Identify any missing information at that time.
- Limit requests for additional information to no more than three, after which the application must be withdrawn.

Recognizing the significant financial burden hospitals face during delays in provider credentialing, under SB1291, commercial health insurers must reimburse providers for services rendered, starting from the date a complete application is submitted, through to the execution of a full contract.

★ Hospitals and healthcare providers must choose to participate in retroactive reimbursement and follow the specific processes established by each health insurer.

★ AzHHA is pleased to have created an opportunity for hospitals and other healthcare providers to alleviate the financial burden of onboarding new providers while waiting for the completion of credentialing.

Protecting patients from algorithm-driven denials:

HB2175 prior authorization; claims

AI is rapidly transforming healthcare, offering new approaches to enhance patient outcomes and streamline operations. However, as its use increases, so do concerns, especially about how health insurers are utilizing AI in claims and prior authorization decisions.

HB2175 directly tackles these issues by prohibiting health insurers from using AI or other automation to deny claims or prior authorizations based on medical necessity. Instead, the bill requires a licensed medical director to personally review each case and base their decision on clinical judgment derived from their training and expertise before denying care.

This is a crucial safeguard to ensure that decisions impacting patient care remain in the control of qualified professionals, rather than being made by algorithms.

AzHHA will continue to prioritize AI oversight in payer practices as a core part of both proactive and defensive advocacy efforts. While AI holds great promise for enhancing healthcare, hospitals must remain engaged and vigilant to ensure technology is applied ethically and always serves the best interests of patients.



HB2175

Your commitment is truly valued Rep. Willoughby!

Decisively passed in House Commerce on Feb. 4.

Pushing for transparency in denial practices:

HB2130 claims; prior authorization; denials; contact

The goal of HB2130 was to tackle another health insurer issue: the lack of transparency and communication between the insurer and the provider when a claim or prior authorization is denied. This year, AzHHA expanded its approach to include both denials for claims and prior authorization. HB2130 required health plans to provide an individual or department with a contact and a specific explanation for each denial.

The bill gained early support in the House, where it passed the Health and Human Services Committee unanimously with a 12-0 vote, followed by another unanimous approval on the House floor with a 60-0 vote during third reading. Unfortunately, the momentum stopped in the Senate.

Instead of being assigned to the Senate Health and Human Services Committee, where it belonged, HB2130 was redirected to the Senate Regulatory Affairs and Government Efficiency Committee. There, the committee chair declined to put the bill on the agenda and hold a hearing on it, effectively killing the bill.

The demand for transparency in denial practices affects every hospital, provider and patient, and we will not let it go unaddressed. While HB2130 did not make it to the Governor's desk this year, the battle is far from finished. We are committed to revisiting this issue next session and are already planning early discussions with stakeholders to find a way forward.



HB2130

Thank you for your leadership Rep. Selena Bliss

Unanimously passed in House Health and Human Services Committee on Feb. 3.

Maternal health

Arizona is facing a critical maternal health crisis that endangers the lives of mothers and infants statewide. Alarmingly, maternal mortality rates are on the rise, particularly affecting Black and Indigenous women who bear the brunt of this crisis. According to the Arizona Maternal Mortality Review Committee, a staggering 80% of maternal deaths could be prevented, often due to issues like cardiovascular conditions, hemorrhage, infection and substance misuse. In rural areas, the situation is even more dire, with over half of the counties lacking a practicing OB-GYN and many regions classified as maternity care deserts.



The challenge is compounded by untreated behavioral health issues, including perinatal mental health disorders and substance use, which exacerbate maternal care complexities. Low-income women across Arizona face significant barriers to accessing consistent, high-quality care due to gaps in insurance coverage and provider availability. While Arizona has made strides by extending postpartum Medicaid coverage to 12 months, access to midwives, doulas and healthcare providers remains limited.

To meaningfully improve maternal health outcomes in Arizona, we must implement a comprehensive statewide strategy and enhance data-sharing across healthcare systems. To develop this strategy, AzHHA collaborated with Rep. Willoughby, the Governor's Office and other stakeholders to create HB2332 postpartum depression; education materials, a legislative initiative aimed at closing these systemic gaps and ensuring high-quality maternal healthcare for all women in our state. [HB2332](#) requires the Arizona Department of Health Services (ADHS) to gather educational materials on maternal mental health and postpartum depression from expert organizations.

The materials must:

- be developed by maternal health experts;
- include information on symptoms, coping strategies, treatment options and resources for postpartum depression.





If no existing materials are available, ADHS will create new resources based on guidelines, studies and expert recommendations. These materials will be shared on the ADHS website, and physical copies will be provided upon request. Additionally, the legislation mandates that healthcare institutions offer these materials to new parents upon discharge and requires healthcare providers to distribute them to any woman who learns she is pregnant or exhibits signs of a maternal mental health disorder.

Lastly, HB2332 establishes the formation of an Advisory Committee by ADHS to recommend services for maternal health in rural areas. The director will appoint members to this committee, which will include representatives from hospitals, physicians, certified nurse midwives, doulas who work in rural maternity care and one health insurance professional. The Advisory Committee will propose ways to improve access to maternal health services and postpartum depression screenings. They are required to submit a report to key government officials by Dec. 31, 2026.

Strengthening Arizona's healthcare workforce

Healthcare workforce development remains a top priority for us. Our policy team remains focused on strategies that enhance retention, support recruitment and establish sustainable pipelines for the future.

This year, [HB2173](#), mental health inquiry; prohibition took an essential step toward removing unnecessary barriers for healthcare professionals in Arizona. The bill eliminates questions about prior mental health treatment on licensing board applications, a move aimed at reducing stigma for those entering the healthcare field and increasing access to care. Although some boards, such as the Arizona Medical Board, have already implemented this change, HB2173 ensures that all healthcare licensing boards adopt a uniform approach.

The legislation still allows questions about current treatment, but by removing outdated questions about past care, it eliminates a barrier that might have kept qualified people from pursuing healthcare careers. The bill received unanimous support in both chambers and was signed into law by the Governor.

We remain dedicated to advancing policies that strengthen Arizona's healthcare workforce. Whether by leading legislation or supporting partner efforts, we will continue to promote initiatives that improve access to care and build a strong, resilient workforce for the future.

Scan the QR code to download the AzHHA 2025 Legislative Report.



State budget highlights

In the last few hours before the June 30 deadline, Governor Hobbs signed a final budget. It included **several key wins** for AzHHA members:



Funding the Critical Access Hospital (CAH) Supplemental Pool

The budget continues \$4.3 million of state general funds as a one-time increase to the CAH Supplemental Pool. Despite AzHHA's tireless advocacy efforts to secure permanent funding for the CAH Supplemental Pool, this line item is subject to a yearly renewal process. We will continue to educate lawmakers and the Governor's Office on the importance of permanently increasing the CAH Supplemental Pool.



Ending the hospital assessment diversion

AzHHA lobbied the Governor and the Legislature to honor their commitment to end the \$100 million diversion from the Hospital Assessment Fund after fiscal year 2025-2026.

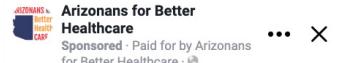


Supporting maternal mental health

Maternal health is a policy priority for AzHHA, the Governor and Rep. Willoughby. This shared commitment to improving maternal health in our state culminated in the passage of HB2332. The budget included a one-time \$100,000 general fund appropriation for a third-party facilitator for the OBGYN Desert and Maternal Health Study Committee.

We're thankful to the Governor and the Legislature for prioritizing these vital investments in Arizona's hospital and healthcare infrastructure, and we appreciate the Governor and the Legislature for honoring their agreement to limit the diversion of \$100 million of the hospital assessment to two years. We will closely monitor future budgets to ensure that the promise is kept.

Arizonans for Better Healthcare



GOAL: protect access to care and preserve Medicaid

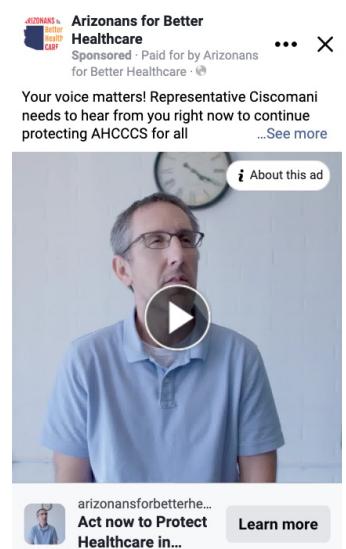
To further elevate our message and call for action in 2025, we activated AzHHA's subsidiary, Arizonans for Better Healthcare, to lead a coalition of healthcare associations across the state. Our work included market research to determine messages that would resonate with voters, activation of advocates to "tell Congress to protect AHCCCS in Arizona" and production of targeted digital ads, encouraging hospitals to amplify them across social media.

Timeline:

March 2025:	Public opinion polling completed in Congressional Districts 2 and 6.
April 2025:	Strategic engagement begins with Rep. Ciscomani's office.
May 20-22, 2025:	Grassroots and stakeholder mobilization campaign launched; digital ads, texting and patch-through campaigns activated.
June 15-July 3, 2025:	Congressional engagement expanding across GOP delegation; digital and radio campaign against the Senate proposal.

Results: mobilization in action

- ▶ **VoterVoice campaign – emails and letters:** 4,393 across eight of the nine Arizona Congressional districts
- ▶ **Patch-through calls (to Rep. Ciscomani):** 11,048 contacts dialed with 2,378 patch throughs – a 21.5% rate
- ▶ **Social media/YouTube/Streaming ads campaign:** Six ads targeting GOP districts (6, 2, 1, 5, 9, 8); over 800,000 video views of ten seconds or longer; more than 170,000 engagements and clicks
- ▶ **English and Spanish radio ad campaign:** 225 spots aired; 510,000 estimated impressions; 150,000 unique listeners



Amplifying our collective voice

Another important strategy to ensure that we take a stand on behalf of our members is through our work with advocacy letters to Congress, the State Legislature and health plans, and combining our collective voice through comment letters on state and federal regulatory issues, as well as signing on to amicus briefs.



Advocacy letters

To Congress:

- Urged Congressman Ciscomani to support extending the Affordable Care Act's enhanced premium tax credits beyond 2025. [\(September 2025\)](#)
- Appealed to the Arizona delegation to address CMS's delay in renewing HEALTHII payments. [\(March 2025\)](#)
- Asked the Arizona delegation to oppose proposals that would lower the federal medical assistance percentage below 80% or restrict provider assessments. [\(April 2025\)](#)

To the State Legislature:

- Urged the State Legislature to reconsider requiring AHCCCS to seek legislative approval for routine work with CMS. [\(April 2025\)](#)
- Asked the State Legislature to uphold the agreement to eliminate the provider assessment sweep fund for the state match for behavioral health services in state FY 2027-2028. [\(June 2025\)](#)
- Urged the State Legislature to reject clozapine mandates in emergency departments. [\(February 2025\)](#)

AzHHA also signed on to several amicus briefs:

- Supported the enforcement of state Affidavit/Certificate of Merit laws to protect against frivolous malpractice lawsuits in *Berk v. Choy* (U.S. argued Oct. 6, 2025).
- Defended hospitals in six federal court and regulatory proceedings against drug manufacturers' push to replace up-front 340B discounts and rebate models:
 - ▶ *Novartis Pharm. Corp. v. Kennedy* (D.C. Cir. Aug. 8, 2025).
 - ▶ *Novartis Pharm. Corp. v. Kennedy* (D.D.C. March 24, 2025).
 - ▶ *Bristol Myers Squibb Co. v. Kennedy* (D.D.C. March 24, 2025).
 - ▶ *Eli Lilly & Co. v. Kennedy* (D.D.C. March 24, 2025).
 - ▶ *Eli Lilly & Co v. Kennedy* (D.D.C. March 24, 2025).
 - ▶ *Sanofi-Aventis U.S. LLC v. U.S. Dep't of Health & Human Servs.* (D.D.C. March 24, 2025).
- *Johnson & Johnson Health Care Sys., Inc. v. Kennedy* (D.D.C. March 10, 2025).
- Urged the Arizona Supreme Court to grant immunity to healthcare providers from civil liability during the COVID-19 public health emergency in *Roebuck v. Mayo Clinic* (Ariz. Sept. 12, 2025).

State regulatory letters

To the Arizona Health Care Cost Containment System (AHCCCS):

- Expressed concerns on Arizona's Pre-Admission and Screening Resident Review Program self-service portal. (November 2024)
- Provided feedback on the proposed Contract Year Ending 2026 differential adjusted payments. (February 2025)
- Expressed concerns about proposed Medicaid work requirements, lifetime benefit limits and emergency department cost-sharing. (March 2025)
- Submitted feedback on HEALTHII payments (March 2025) and provided input on HEALTHII quality metrics. (May 2025)
- Urged AHCCCS to retain payment parity for behavioral health telehealth services. (June 2025)
- Raised concerns regarding AHCCCS' ambiguous language and conflicting timelines for the incident, accident and death reporting policy. (October 2025)

To the Arizona Department of Health Services (ADHS):

- Required clarification and revisions to ADHS' health care institution/memory care rules. (January 2025)
- Expressed concerns over shifting the licensing costs to providers. (September 2025)

To the Arizona Department of Insurance and Financial Institutions (DIFI):

- Urged DIFI to revise the definition of "contracted" in R20-6-1902 to include Letters of Agreement. (August 2025)

AzHHA continues to communicate with health plans regarding:

- Downcoding policies, which financially harm hospitals and create unnecessary administrative burden.
- Medicare Advantage policies that directly conflict with CMS regulations and financially harm hospitals.

Federal regulatory letters

To Centers for Medicare and Medicaid Services (CMS):

- In June 2025, wrote three different letters to provide feedback on the inadequate rate increases for the Fiscal Year (FY) 2026 inpatient prospective payment system (PPS), FY 2026 inpatient rehabilitation facility PPS and the FY 2026 long term care hospital PPS, respectively, and shared other concerns.
- Urged CMS to revise its proposed rule on provider taxes. (July 2025)
- Offered input on the Calendar Year 2026 outpatient PPS. (September 2025)

To other federal agencies:

- Addressed concerns to the Department of Health and Human Services, Office of Management and Budget and CMS on burdensome healthcare regulation that detracts from patient care and increases cost. (May 2025)
- Expressed concerns to the Health Resources and Services Administration on the impact to hospitals for proposed 340B Rebate Model Pilot Program and its legality, and recommending safeguards to protect covered entities and patients. (August 2025)



AzHHA Membership Perks

2025 Arizona Hospital Leadership Conference

Each year, the AzHHA Foundation hosts our annual premier event, the Arizona Hospital Leadership Conference. This year's event, held Oct. 29-31 in Tucson, Ariz., was centered around advocacy in action as it brought more than 270 healthcare leaders together to reflect on the current state of the industry and 'lead forward' to support Arizona's healthcare ecosystem.

As parent of the AzHHA Foundation, AzHHA maintains a purpose of bringing together diverse voices to advance health

and healthcare in Arizona. This event is designed to support a vibrant healthcare delivery system, including a robust network of acute care, critical access, specialty, behavioral health and post-acute care hospitals, with learning and networking opportunities that build a more knowledgeable and intersected healthcare community.

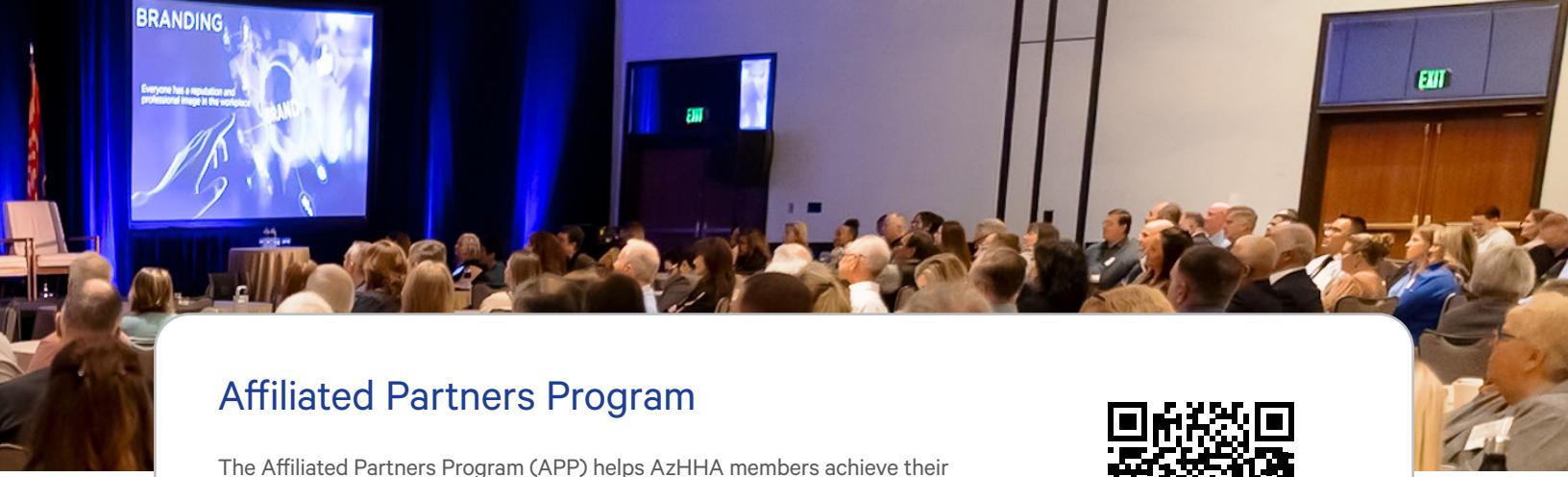
Healthcare Leadership Academy

In March 2025, the AzHHA Foundation, in partnership with Creighton University's College of Professional and Continuing Education, brought together its second cohort of the Healthcare Leadership Academy (HLA). Offered to AzHHA member hospitals, the primary goal of the HLA is to cultivate leadership in the hospital environment such that tomorrow's C-suite is prepared to provide vision, articulate and live organization purpose, and promote operational and clinical innovation.

Through this program, AzHHA members have the opportunity to advance the skillset of mid-level managers through coursework that addresses many aspects of hospital operations, including project management, finance, human resources and healthcare policy. The HLA provides a unique opportunity for participants to learn alongside other

up-and-coming leaders in the state in a small classroom environment. The third cohort will start in March 2026, with applications released in November 2025.

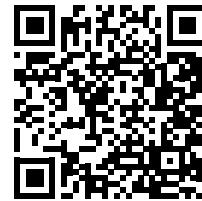




Affiliated Partners Program

The Affiliated Partners Program (APP) helps AzHHA members achieve their missions and improve the health of people and communities across the state by providing meaningful, innovative and affordable business solutions that meet the needs identified by the program's board of directors.

APP's focus areas include workforce, financial stability, quality and innovation. The program currently has eight partners. This year's newest affiliated partner, Duffy Group, revolutionizes professional recruitment with a special pricing package for AzHHA members.



Scan the QR code for more information about the program, including discounted services for AzHHA members.

Member Portal launched

In October 2025, AzHHA launched a Member Portal through our new GrowthZone platform. The portal provides a unique opportunity to engage, inform and empower members while giving them access to resources and benefits just for members.

The portal includes:

- An engaging platform for member-to-member networking.
- Access to a member directory.
- The ability to easily explore and register for AzHHA events and webinars.
- A resource library with links, documents and other resources – all in one place.

◀ The 2025 cohort of the Healthcare Leadership Academy.

Staying in the know

One of the many benefits of membership, AzHHA offers hospital-specific DataGen reports to help increase the understanding of the financial impact of proposed changes and annual updates. These reports are delivered to members each month.

In 2025, AzHHA offered free-to-members education events, webinars and resources:

- AzHHA Human Resources Roundtable (twice per year)
- White paper on community need assessments, 28 years later
- Tips for searching for healthcare talent in a competitive market
- White paper on understanding and optimizing your hospital's physician base
- Leveraging price transparency data for strategic payer conversations webinar
- AHCCCS and ADHS updates webinar
- Medicare Advantage education member toolkit

Care Improvement

AzHHA's Care Improvement team leads healthcare collaboratives to work with hospitals to solve our top challenges, namely improving the nursing workforce and maternal health in Arizona.

Nursing workforce

The Arizona Transition to Practice Program was designed to enhance nurse retention, competency and leadership across Arizona hospitals through three main program offerings:

- 1. New Graduate Registered Nurses:** The goal is to support and develop new nurses, provide evidence-based professional development, accelerate the novice nurse to a competent nurse more rapidly, and address resilience and emergency preparedness.
- 2. New to Specialty Nurses (new in 2025):** The objective is to provide nurses transitioning to specialty areas with evidence-based content to help them become competent more rapidly and offer opportunities for professional growth with an added benefit of specialty certification preparation.
- 3. Nurse Leadership (new in 2025):** The program aims to standardize nurse leadership training for nurse leaders and managers to improve workforce stability and foster greater cross-functional collaboration.



Program highlights:

New Graduate Registered Nurses:

Six cohorts launched

155 participants

- The program has increased retention from 40% (before the program started) to 80%.

Preceptors trained: **192**

Mentors assigned: **27**

Participating facilities: **20**

Other program numbers:

New to Specialty nurses: 104 trained
(OR, MedSurg, ED and ICU)

- Some critical access and rural hospitals have reported that training in these specialties would not have been feasible without grant funding.

Nurse leadership: 68 nurses engaged

- These participants have reported significant growth in burnout prevention, change management, regulatory readiness and leadership transitions.

Professional development: More than **\$28,000** spent

Stipends: **\$270,000** awarded

Scholarships: Approximately **\$110,000** awarded

Arizona Alliance for Innovation on Maternal Health (AIM) Collaborative

AzHHA helps hospitals in our state implement maternal evidence-based practices and safety bundles. Guided by a team of experts, our goal is to end preventable maternal death and severe maternal morbidity.

We have engaged all 42 birthing hospitals in the state of Arizona in AIM programs and initiatives.

Highlights from 2025:

AIM bundles:

- **Hypertension:** As a result of prior years' work, the decision was made to sunset the formal data submission requirement for treatment of hypertension.

The state exceeded the goal of 80% of people with hypertension treated within one hour and sustained those results over one year.

- **Hemorrhage:** We have met and sustained three of our four goals for the last several quarters and are 6% away from meeting the fourth goal.

- **Two new bundles:** This year, we introduced the Perinatal Mental Health Conditions and Care for Pregnant and Postpartum People with Substance Use Disorder bundles.

Emergency training:

The Arizona AIM Collaborative launched a new initiative bringing advanced obstetric emergency training to emergency departments in rural and tribal communities.

- **Eight** hospital locations
- **\$60,000** worth of simulation training
- More than \$1,000 worth of **OB Simulation toolkits** and badge buddies (a handy reference card staff often clip to their ID badge) to these facilities



Other care improvement initiatives from 2025 included:

Quality and patient safety:

AzHHA, in collaboration with the Arizona Rural Hospital Flexibility Program was able to provide a Certified Professional in Healthcare Quality (CPHQ) course content to AzHHA members at no cost (a \$600 value) to 39 unique facilities and 75 participants.

Quality Awards:

The AzHHA Quality Awards celebrate and recognize Arizona's leaders committed to advancing healthcare through exceptional quality performance, community engagement and a culture of continuous improvement; 39 quality awards posters were submitted from 13 member facilities of all sizes across Arizona.

Thoughtful Life Conversations and POLST:

AzHHA continues to serve as the state lead for POLST and staff serve on the National POLST Collaborative Board. POLST is a set of portable medical orders that helps people get the medical treatments they want and avoid medical treatments they do not want when they are seriously ill or frail.

AzCHER: Arizona Coalition for Healthcare Emergency Response

The Arizona Coalition for Healthcare Emergency Response (AzCHER) is a membership organization comprised of hospitals and healthcare organizations, public health, EMS, emergency management and other entities whose purpose is to build resilience in the healthcare delivery system so that it is prepared to respond to large-scale emergencies or disasters.

AzCHER has more than 1,037 facilities in the coalition, and the coalition conducts trainings and exercises around top vulnerabilities and across its four regions.



Highlights from 2025:

Response: Real world events

Baxter IV fluids shortage: Following Hurricane Helene, the nation's IV fluids supply was compromised for months. AzCHER hosted situational awareness meetings to keep hospitals informed with updates from Baxter and key governmental agencies.

Greer fire: Despite being evacuated from her own home for over a week, Shawna Murphy, northern/western region manager, continued to assist members throughout this event.

Oak Ridge fire: AzCHER helped locate N95 masks, privacy screens, filters and air scrubbers with members stepping up to help provide these supplies.

Globe flooding: When severe flooding impacted the Globe and Miami communities, Jamie Beauvais, central region manager, maintained direct communication with Cobre Valley Regional Medical Center and county partners to assess impacts, verify status and coordinate response efforts.

Water contamination evacuation: AzCHER coordinated a meeting and response with all involved agencies when a facility on the Navajo Nation requested help evacuating due to a water contamination.



Assess needs

Released the 2024-25 Community Hazard Vulnerability Assessment/Resource Gap Analysis Summary Report which equips AzCHER with the information needed to strengthen our healthcare emergency response capabilities. The assessment identified the following statewide top five healthcare hazards:



Extreme Heat



Monsoon Weather



Staffing Shortage



Supply Chain Failure



Network Failure

Plan to address

Members identified the following gaps:

- Training that can be delivered in small, manageable increments and integrated into daily workflows.
- The need for short, focused exercises or drills that reinforce preparedness without disrupting operations.

Exercise plans

Medical Response
Surge Exercise
(April 2025)

Readiness
Tabletop Exercise
(May 2025)

Mass Casualty
Incident Training
(May 2025)

Train to plans

AzCHER delivered comprehensive training to more than 800 healthcare professionals through live sessions, including:

- Hospital Emergency Response Team (HERT)
- Emergency Management Basics
- Incident Command Basics
- Hospital Incident Command System (HICS)/ National Incident Command System (NICS)
- Homeland Security Exercise and Evaluation Program (HSEEP)

AzCHER also hosted its Fifth Annual Emergency Preparedness Conference on June 11, 2025, with the theme of “Empowering Action: Integrating Readiness, Response and Recovery” focused on strengthening healthcare resilience across Arizona.



Every day elected officials' decisions affect the health of Arizona's people, patients and communities.

Donate to the AzHHA PAC to support candidates who align with our purpose and promote initiatives beneficial to healthcare in Arizona.



**AZHHA
PAC**



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BY THE NUMBERS

AzHHA programs remain self-funded, funded completely through grants, not member dues.

MEMBERSHIP DUES

\$2,857,000

40%

GRANTS

\$3,539,000

49%

OTHER

\$769,000

11%

TOTAL

\$7,165,000



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