



- Public Health Prevention Home
- Bureau of Health Systems Development Home
- Sliding Fee Schedule Clinics ▶
- Workforce Programs ▶
- Cancer Prevention and Control Programs ▶
- Community Development ▶
- Shortage Designation Program ▶
- Data, Reports & Maps ▶
- Health Disparities Center ▶
- Non-Renal Transplant Medications
- Training Resources
- Newsletters
- Fact Sheets & FAQs
- Contact Us

Bureau of Health Systems Development
 150 N. 18th Avenue, Suite 300
 Phoenix, AZ 85007
 (602) 542-1219
 (602) 542-2011 (fax)

Bureau of Health Systems Development Arizona Healthcare Connection - February 2013



Empowering Providers for a Healthy Arizona
 Volume 2, Issue 1

Table of Contents

- | | |
|--|-------------------------------------|
| Story of Commitment | Community in Need |
| Programs in Profile | Data and Statistics |
| Health Professional Shortage Area Designations | Community Resources |
| Emergency Preparedness | Health and Wellness |
| CMEs & Grant Opportunities At-A-Glance | Upcoming Events |

Want to read this publication offline? You can [print a hard copy of this issue](#). To find previous issues, visit our [newsletter archive](#).

Story of Commitment

Courtesy of National Health Service Corps (NHSC) through Facebook.

Having grown up in small mining towns in Oregon and California, Bessie Burk saw firsthand the devastating effects brought upon a community with limited access to health care. This experience made service an integral part of her upbringing. "Making sure that I gave back to my community was just how I was raised," said Bessie. So it was no surprise to her family when she enrolled at North Arizona University to study nursing, where she could begin forging a career helping people live better, healthier lives.

While getting her master's at North Arizona University, a classmate told Bessie about the National Health Service Corps (NHSC) and the financial benefits it offers. When she graduated, she began working at the Sun Life Family Health Center as an NHSC member, and she was elated to discover that through this program, she could afford to stay in Casa Grande and care for her patients. Having recently completed her NHSC service commitment as a Family Nurse Practitioner, Bessie has no plans of leaving her site anytime soon.

In addition to her love for the community, Bessie and her clinic are desperately needed as hypertension and diabetes runs rampant with over 60 percent of her patients suffering from at least one of those conditions. As the only large provider of primary care medicine in the county, the importance of her work cannot be understated. With 30 to 40 percent of her patient population uninsured due to unemployment or underemployment, and another 30 to 40 percent on state Medicare, Bessie and the Sun Life Family Health Center stand out as the only nonprofit clinic available to help county residents live healthier lives.

Though it is hard work, knowing that she is making a difference in the lives of her patients motivates Bessie every day. "Seeing the progress of my patients is the most rewarding part of my job," said Bessie. "And, educating them is key. People need to know how to make their lives better, and trust me, they will do it! And, they come back feeling better, and they're so excited because they got



Bessie Burk, NHSC Alumni, Family Nurse Practitioner at Sun Life Community Health Centers.

Customer Feedback

their life back.”

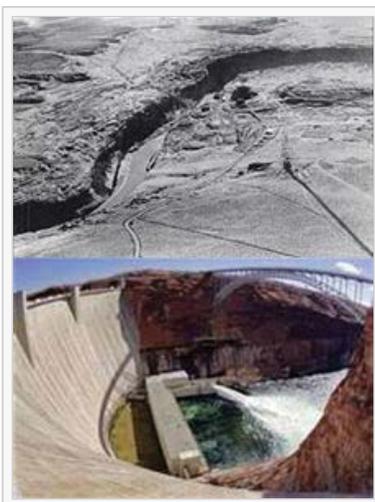
During her time as a Corps member Bessie became a leader, both in her community and in the field of nursing. She volunteers her time and expertise to help the local homeless population get the medical attention they need and offers free CPR classes twice a month for local community members. In addition, she is a member of the American Academy of Nurse Practitioners, serving as the Arizona state representative, and she is currently running for Vice President of the Arizona Nurse Practitioners Association. An avid believer in that change begins with action; she’s known to say, “You can’t make change unless you put your foot forward.”

Bessie enjoys living in Casa Grande, a small rural desert town with about 30,000 at its center. In her free time, Bessie likes to enjoy the local activities such as quilting and desert photography classes, as well going out to the movies and the community pool. She spends time with her husband, a native of Casa Grande, and her family in the area. She encourages young nurses and doctors to consider joining the NHSC. “Look at it as an adventure,” she says. “Discover new parts of the U.S. that you never thought you’d see—you’ll love it. I never knew I would end up in Casa Grande, but I’ll probably be here at Sun Life forever.”

[back to top](#)

Community in Need

Contributed by: Elizabeth Latham MSN, FNP-BC, CEO Canyonlands Healthcare; Source: Page, Arizona Community Health Profile, and Coconino County Health Department



It all started with an explosion! The first dynamite blasting in Page, AZ occurred on October 15, 1956 when President Dwight D. Eisenhower pressed a telegraph key in Washington D.C. signaling the beginning of construction on Glen Canyon Dam. It began in 1957 as a housing camp for workers building the Dam. At first, the frontier community consisted of temporary homes and house trailers, with a few streets carved out of the sandy, rocky slopes. It became an incorporated town on March 1, 1975 and is now home to more than 9,000 people.

The City of Page is adjacent to the Navajo Nation, the United States' largest Native American tribe. Their reservation adjacent to Page contains more than 16 million acres (27,000 square miles) and extends into both Utah and New Mexico. The Navajo Nation is home to about 200,000 tribal members. While incorporating many aspects of modern technology, some Navajos retain their traditional lifestyles as farmers and sheep herders.

In 1973, Lake Powell Medical Center (LPMC) was opened and the sole medical facility in Page, Arizona. It has been a **federally designated community health center** since it was established. LPMC was

one of the pioneering centers achieving this recognition under the Federally Qualified Community Health Center (FQHC) movement of the 1960’s (HRSA, 2009). The original grant application was submitted by the sole physician provider in the community. In 2004 the first full time OB/GYN was hired at LPMC to provide specialized women’s health services. Today Canyonlands Healthcare serves over 20,000 individuals in 9 communities throughout Arizona. This includes Lake Powell Medical Center with three full time family practice physicians, two of whom provide OB care and a full time OB/GYN with three full time physician assistants who provide care to a high number of patients who seek walk in care.

Canyonlands utilizes **Healthy People 2020**, a framework of objectives that has assisted many programs in efforts toward promoting health and preventing disease. These objectives reflect major public health concerns in the United States. Individual behaviors, health system issues, as well as physical, social, economic, and environmental factors affect both personal and community health. While Page is doing exceptionally well in meeting many of the Healthy People 2020 objectives, opportunities to improve community health initiatives have been highlighted below:

- 92% of Page’s 6 – 8 year old children have had a tooth decay experience in their primary teeth—well over the 30% goal.
- Almost 94 (per 10,000) of the population are hospitalized for asthma – far beyond the 18 (per 10,000) goal.
- There have been 556 confirmed and probable cases of Chlamydia Trachomatis infections which would far exceed the 6.7% target of the Healthy People objective.



Lake Powell Medical Center



Canyonlands Urgent Care

- Suicides are more than triple the targeted goal.

The residents of far Northern Arizona/Southern Utah have limited access to affordable care. The area remains extremely remote, impoverished, and medically underserved. Beyond Page, the next nearest primary care service providers are located at Inscription House Health Center, an hour away, and in Tuba City or Fredonia, both more than 80 minutes away.

Navajo patients comprise of over 50% of Canyonlands Healthcare patient population. **Indian Health Services (IHS)** reported higher mortality rates among American Indians and Alaskan Natives compared with the general population for most leading causes of mortality: tuberculosis (500% higher), alcoholism (514% higher), diabetes (177% higher), unintentional injuries (140% higher), homicide (92% higher) and suicide (82% higher). Additionally the IHS report states: "Lower life expectancy and the disproportionate disease burden exist perhaps because of inadequate education, disproportionate poverty, discrimination in the delivery of health services, and cultural differences" (Jones, 2006). Canyonlands Healthcare is committed to improving the health of Native American patients through comprehensive, culturally sensitive services.

With Canyonlands Navajo patients, efforts are made to integrate native practices into the care plan whenever possible. Many Navajo's believe certain ailments can be a result of violating taboos. Canyonland practitioners incorporate questions into their assessments to ensure all cultural influences are addressed. Additionally, the use of Native ceremonies can be seen as integral to the healing process. Ceremonies can help restore harmony to the patient, both mentally and emotionally. Canyonlands providers and support staff will incorporate traditional medicine into their care plan to improve outcomes.

Canyonlands Healthcare offers special programs designed to improve access to care for those who face financial barriers and need assistance. Canyonlands Healthcare is preparing to celebrate its 40th anniversary in the spring of 2013. The organization is honored to have served rural communities of Northern and Southeastern Arizona for this long. Staff has a strong commitment, and high level of expertise in serving rural, disenfranchised communities. Canyonlands Healthcare is fully committed eliminating barriers that restrict access to care and developing programs and systems that allow for the reduction of the health disparities suffered by those in rural Arizona.

[back to top](#)

Programs in Profile

Contributed by: Ben Palmer, Bureau of Tobacco and Chronic Disease

Bureau of Tobacco and Chronic Disease – Tobacco Cessation

The Arizona Department of Health Services (ADHS) launched a comprehensive statewide tobacco control effort in 1995. Then known as the Tobacco Education and Prevention Program (TEPP), the program sought to educate and prevent the initiation of tobacco among youth and provide cessation services for adult tobacco users.

Managed by the **Bureau of Tobacco and Chronic Disease (BTCD)**, the current statewide tobacco control effort has developed its vision through research of evidence-based studies, online surveys, statewide community forums, and multicultural focus groups. The result is a focus on community-driven practices.

BTCD has expanded in recent years to include chronic disease prevention efforts including diabetes, heart disease and most recently HIV/AIDS prevention. While the bureau's charge has been expanded, a comprehensive statewide tobacco control effort continues to play a vital role in the health and wellness of all Arizonans.

BTCD provides the assistance and resources necessary to reduce the introduction of tobacco use among youth, promote tobacco cessation among youth and adults, eliminate tobacco-related inequalities, prevent and detect the four leading causes of tobacco-related deaths in Arizona and develop effective public guidelines to enact change within our communities.

With nearly 1.2 million tobacco users in Arizona, the need to provide an effective cessation program continues to exist. BTCD continues to partner with the **Arizona Smokers' Helpline (ASHLine)** to provide telephonic based quit coach services for free for all Arizona residents.

ASHLine

Each year the ASHLine helps thousands of Arizonans overcome their tobacco addiction. With an average quit rate of 40 percent, the quit line ranks among the best in the nation. Located in the Mel and Enid Zuckerman College of Public Health at the University of Arizona, the ASHLine has been helping people quit tobacco since 1995. In addition to offering free telephone and Web-based quit services, the ASHLine provides free training and technical assistance to healthcare providers statewide.



The ASHLine referral system, also known as the ASHLine referral development team, is stationed across the state and can provide resources to connect your patients/clients to a quit tobacco program. As a health professional, you can submit online or fax referrals for patients/clients to the ASHLine. Within 24 hours of receiving the referral, the patient/client will receive a call to enroll them in the quit tobacco coaching program. The referral development team can also assist your healthcare organization with incorporating tobacco protocols with your electronic medical records and with assistance in creating comprehensive tobacco free campus policies.

Referring a patient to the ASHLine increases their likelihood of quitting and staying quit. ASHLine coaches support individuals throughout the quitting process, helping them develop a tobacco free lifestyle, as well as offer medication support for those who qualify.

ASK all your patients/clients about tobacco use at every visit. ADVISE all tobacco users to quit. And REFER those who are ready to quit to ASHLine! For more information, visit ASHLine.org or call 1-800-55-66-222 x 208.

How to Quit Spit

1. Set a **Stop Day**.
2. Call 1-800-QUIT-NOW for counseling and free or low-cost medications to help you quit. Or go to ASHLine.org for online support and information.
3. Use **Nicotine Replacement Therapy (NRT)**: To improve your quit effort and decrease withdrawal symptoms, you need NRT. It's even more important if you chew than if you smoke, because chew provides more nicotine than cigarettes do. In addition to NRT, you can use any combination of the items below (please ask your pharmacist about dosing information). NRT (nicotine replacement therapies) including the patch, gum, lozenge and medication is available at no cost to anyone that enrolls in the ASHLine.
4. Use **Bupropion SR (Wellbutrin)**: Start using this prescription a week before your Stop Day and continue for 3 months or more. This will help with irritability and cravings.
5. Use **gum or lozenges**: Nicotine gum (2 mg to 4 mg) or nicotine lozenge (2 to 4 mg) can be used as needed with the patch for additional control of withdrawal symptoms and cravings.
6. Use a **replacement chew product** or chew sugar free gum or sunflower seeds. This helps with the oral aspects of quitting chew.
7. **Consult your dentist** for an oral exam.

Tobacco companies also don't tell you that in addition to nicotine, spit tobacco contains 28 chemicals known to cause cancer and other health problems. Here are just a few:

- Formaldehyde (in embalming fluid)
- Arsenic (in rat poison)
- Polonium (in nuclear waste)
- Cadmium (in car batteries)
- Cyanide (a deadly gas)
- Lead (a nerve poison)

Chewing tobacco is not sexy, sporty, or macho. It's deadly.

[back to top](#)

Data and Statistics

Contributed by: Tracy Lenartz

National Health Service Corps HPSA Score Freeze

The **National Health Service Corps (NHSC)** implemented a **Health Professional Shortage Area (HPSA)** score freeze on June 1, 2012. Any HPSA scores and designations updated since then have not been reflected in the NHSC system and were not used for the 2012 Loan Repayment Award Cycle. **NHSC refreshed and re-froze their system with HPSA scores on January 1, 2013.** All HPSA designations and scores current as of that date will be used for the 2013 NHSC Loan Repayment Award Cycle.

Medicare Physician Bonus and the Medicare Surgical Bonus Programs

The Centers for Medicare and Medicaid Services (CMS) provides 10 percent bonus payments to primary care physician services and major surgical services provided in geographic Health Professional Shortage Areas (HPSA). Note these do not include low-income population designations, only geographic designations. CMS annually publishes a list of zip codes from which bonuses are automatically generated. CMS has recently posted corrected 2013 HPSA zip code lists, replacing incorrect versions posted earlier in December. Automatic bonus payments are issued only for services in zip codes that are entirely within a geographic HPSA. Zip codes that are partially within a geographic HPSA will not be on the list; however, services in those areas are still eligible for the bonus payment if a modifier is used. Find more [information about the bonus programs](#).



This will make quitting easier than the last time you tried. And remember, your life—and your face—is worth it.

For more information on Health Professional Shortage designations with regard to the bonus programs, contact Tracy Lenartz at 602-542-1772 or at tracy.lenartz@azdhs.gov.

[back to top](#)

Health Professional Shortage Area Designations

The following Arizona areas have been designated by the U.S Department of Health and Human Services (DHHS), Health Resources and Services Administration (HRSA) as Health Professional Shortage Areas (HRSAs) during the past quarter:

- [Health Professional Shortage Area Designations](#) 

[back to top](#)

Community Resources

The Empower Program Turns 3 Years Old

January marks the beginning of the third year of the nationally recognized **Empower Program**. This collaboration between the Arizona Department of Health Services (ADHS) Public Health Prevention division and Childcare Licensing has helped to increase healthy eating and active living, along with helping to provide smoke-free environments, in licensed early care and education centers and homes for children throughout Arizona.

The Empower Program began as an initiative to encourage childcare providers to meet certain prevention best practices in exchange for discounted licensing fees. This voluntary program provides resources and tools for the facilities to meet the **10 Standards to Empower Children to Lead Healthy Lives**.  As the program enters the third year, the standards have been revised and providers will be receiving additional tools in the Empower Pack to meet these standards. Some of the new standards now also address sun-safety, oral health, and breastfeeding.

The development and success of the Empower program provides an example of how collaboration, creative thinking and reliance on evidence based practices can set the stage for a healthier new generation, even during times of great economic challenge. Children in childcare settings benefit from environments that provide good nutrition, physical activity and a smoke free environment. By addressing these issues during childhood, we set children on a path to life-long health. Childcare providers can easily incorporate physical activity, tobacco prevention and good nutrition into their curriculum. Incentivizing-proven prevention practices gives providers a compelling reason to try new methods while providing an offset to the rising costs for childcare.

Strong Families AZ

The **Strong Families AZ website** has been launched! Strong Families is a collaboration of state agencies and community partners committed to providing high quality home visiting throughout the state while building a system composed of professional development, outreach to special populations, a continuum of services and continuous quality improvement. The site will assist families to locate services and help providers learn about training and other professional resources. For more information about home visiting, contact [Jessica Blanco](#) or [Meloney Baty](#).

[back to top](#)

Emergency Preparedness

Contributed by: Antonio Hernandez, Partner Integration Chief, ADHS Bureau of Public Health Emergency Preparedness

Public Health Emergency Preparedness in Arizona involves the support and coordination of local, State, and Federal partners. You never know when a disaster or public health emergency may occur. The Arizona Department of Health Services, Bureau of Public Health Emergency Preparedness is seeking health professionals to [register online](#) and help build a cadre of volunteers willing to help during a major state disaster or emergency.



By registering with the Arizona Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP) you are helping to increase public health resiliency in your area. Registering does not obligate you serve during an emergency and you may decline a call to service at any time. Many of our state's health professionals are eager and willing to volunteer their services during a time of crisis. Hospitals, clinics, temporary shelters and emergency managers are dependent upon volunteer health professionals to help with disaster response and recovery activities. However, advance registration allows for secure credential verification, state emergency planning, coordinated alerting/notification and effective resource mobilization.

By registering with ESAR-VHP, health volunteer information is secured for official use only consistent with all federal, state, and local laws governing security and confidentiality. Just-in-time training, logistical support, legal protections, and deployment instructions are available to registered volunteers as they are integrated into the State's emergency response and recovery system. Registering in advance of an emergency helps build local cadres of resources to better facilitate public health preparedness planning, strengthen community resiliency and coordinate a more effective response.

Please take a moment to learn more about ESAR-VHP and [register today](#).

Emergency Preparedness from Navajo County

Contributed by: Dan Hines, Emergency Management Director

Navajo County Emergency Management would like the citizens of Navajo County as well as the rest of the state to consider putting together a preparedness kit. This kit would contain several items that are needed during and sometimes after an emergency. Most often during a crises we forget little things like can openers to open the canned food we set aside or remembering to store enough water for the household pets as well as the humans. Additionally the following items can be very useful: hand crank or battery operated radio, flashlights, (don't forget the correct size batteries), medications, bleach for sanitary needs, water, blankets, clothing, games/puzzles/books to pass the time and of course food items. Kits need to be "refreshed" periodically and it is recommended that twice a year you check the expiration dates on canned goods and replace old water with fresh. A good day to set your reminder is the Daylight Savings change dates in the fall and spring. FEMA offers a comprehensive list of items to put in kits, family plans and useful tips and information on various types of disaster preparedness.

Pima County has a New Emergency Operations Center

Contributed by: Mike Hine, Interim Emergency Management Director



You never know when an emergency is going to happen. That's the nature of sudden, unforeseen crises that demand an immediate response. The Pima County region will be more prepared to protect lives, property and the environment once the new Emergency Operations Center became operational in early November.

Modeled after the National Emergency Operations Center, the facility will allow for far stronger logistics and coordination when multiple agencies respond to a situation that is likely to become a major event. Important data and information can be displayed all around the room, instead of having just one wall for intelligence matters. Different information can also be posted on different walls, allowing for better collaboration by different sectors.

The facility can accommodate more participants, allowing for stronger coordination. It also has space available for caucus opportunities so that policy makers and other support personnel can be briefed without interrupting others at work. The existing operations center in the basement of the County Administration building will remain intact until tests ascertain the new center is fully operational.

"One of the chief findings after 9/11 was a lapse in communication," said Jeff Guthrie, operations manager with the Pima County Office of Emergency Management & Homeland Security. "That shortcoming contributed to some of the loss of life experienced among the first responders, and that is an area we have worked hard to address."

In tandem with the emergency operations center, Pima County's new communications hub, at 3434 E. 22nd Street, will provide 95 percent coverage throughout Pima County, with participation from 20 fire departments and 11 law enforcement agencies.

"Pima County is committed to ensuring that response plans are consistent and organized throughout the region," Guthrie said. "It would be great if we were never called into action, but if we are, residents can rest assured that we will work closely with all jurisdictions within Pima County to coordinate our efforts and provide an efficient response."

Pima County voters approved \$92 million in bond funds in 2004 for the emergency operations center, as well as for an emergency communications system.

For more specific information, visit the [Just in Case Arizona website](#).

Be Prepared. It's as Easy as 1-2-3.

<p>1 Prepare a Plan</p>	<p>2 Make a Kit</p>	<p>3 Be Informed</p>
<p>Learn about the basic decisions you and your family should be prepared to make in case of an emergency.</p> <ul style="list-style-type: none"> • Prepare a Plan 	<p>Get tips on how to create a survival kit for any situation.</p> <ul style="list-style-type: none"> • Make a Kit 	<p>Find out how to keep an eye on your emergency situation and adapt to changing circumstances.</p> <ul style="list-style-type: none"> • Natural Disasters

- Having a Family Plan
- Deciding to Stay or Go
- Pet Preparedness Plan
- Special Item Needs
- Utility Breakdown Plan
- School Plan
- Employer Preparedness
- In a Moving Vehicle
- High Rise Building Plan

- Portable Kit
- Water & Food
- First Aid Kit
- Clean Air
- Special Needs
- Warmth
- Financial Security
- Pet Items
- Supply Checklist

- Attacks & Accidents
- Biological & Chemical

Visit <http://www.azein.gov> to access real time updates during natural or human caused emergencies and disasters.

[back to top](#)

Health and Wellness

Contributed by Julie Garcia, Chronic Disease Program Manager and Health Ambassador for ADHS

As another year concludes and a new one is almost to begin, some of us may already be thinking about making health-related changes for the New Year. Some might contemplate adding or changing their physical activity levels; some might want to begin to eat healthier and others may want to get adequate amounts of sleep. Nutrition, physical activity, and sleep all have a significant impact on our physical health and, depending on our habits, can ultimately affect our overall wellness.



For individuals to receive health benefits from **physical activity** it is recommended that adults implement at least 150 minutes per week of moderate levels of activity into their lives. Broken into small segments (30 minutes a day or 10 minutes three time a day), 150 minutes is not a difficult task. Brisk walking, stair-climbing, light jogging, casual strolling on a bike are all examples of moderate types of physical activity. If small changes are made to one's schedule and priorities slightly altered, the recommendations can be applied quite easily.

Eating healthy hyperlink to:

<http://www.whfoods.com/foodstoc.php> can sometimes be a bit confusing. With so many resources indicating they are the "solution"

to healthy eating it can be difficult to find credible information. Amidst the confusion, it is always recommended that we do the following:

- Eat fruits and vegetables at every meal;
- Eat whole grains whenever possible;
- Limit sugar-sweetened beverages; and
- Eat mostly lean proteins.

By keeping nutrition simple and following these four simple suggestions, eating healthier may be simpler than you think.



There are many **health benefits to getting enough sleep**. If we are not getting the recommended 7-9 hours of sleep, we may have trouble incorporating physical activity into our day due to our energy levels. We may also find that our stress levels increase and affect our consumption of high-fat foods. Not getting our recommended hours of sleep may also affect other dimensions of wellness such as our social wellness, emotional wellness, financial wellness, occupational wellness and possibly our intellectual wellness. According to WebMD.com, "Reducing sleep by as little as one and a half hours for just one night reduces daytime alertness by about one-third."

Some suggestions to get a good night's sleep are to:

1. Avoid watching TV, eating, and discussing emotional issues in bed.
2. Minimize noise, light, and temperature extremes during sleep with ear plugs, window blinds, or an electric blanket or air conditioner.
3. Avoid naps, but if you do nap, make it no more than about 25 minutes about eight hours after you awake.
4. Caffeine is a stimulant and is present in coffee (100-200 mg), soda (50-75 mg), tea (50-75 mg), and various over-the-counter medications. Caffeine should be discontinued at least four to six hours before bedtime.
5. A light snack may be sleep-inducing, but a heavy meal too close to bedtime interferes with sleep.



As you contemplate possible changes in your life to enhance your physical health, there are some simple concepts to keep in mind. It is a good idea to track your current levels of your potential change so you have a baseline. For example, if your goal is to incorporate 150 minutes of moderate physical activity into your week, track what your current levels are and make adjustments

accordingly. Also, think long term (at least six months out). It's easy to get dispirited if you don't see results quickly. Try to remember that the pursuit of health and wellness is a marathon with each day getting you closer and closer to your goal. Lastly, don't get discouraged if you fall off the wagon. Remember you can always get back on.

[back to top](#)

CMEs & Grant Opportunities At-A-Glance

A lot of Web searching has been done for you! We identified grant opportunities, as well as Continuing Medical Education (CME) prospects and listed the class name, dates, what type of class (webinar, seminar, online, etc.), and other information so that you can see what is available to you at a glance. Links will take you right to the course descriptions and the registration site.

- [CMEs](#)
- [Grant Opportunities](#)

[back to top](#)

Upcoming Events

Observe Through With Chew Week

February 17 – 23, 2013

Try quitting on The Great American Spit Out, the Thursday of TWC Week. Save your face. Be through with chew.

www.throughwithchew.com



Kick Butts Day

March 20, 2013

[back to top](#)

Any documents contained on this Web site that are translations from original text written in English are unofficial and not binding on this state or a political subdivision of this state. To learn about how ADHS collects information about website users, please review our [Website Privacy Policy](#).
Los documentos que son traducciones al Español y que se encuentran en esta página Web no tienen validez oficial ni legal en este Estado o en alguna entidad política del mismo.

[Like](#) © 2009 - 2015 Arizona Department of Health Services | [Contact Us](#)



This page last updated December 1, 2015