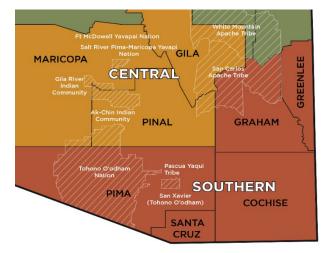


Southern Region Profile



Jurisdictions

The Southern Region includes four Tribal nations and five Arizona counties. There are 20 rural and 3 frontier census-recognized primary care areas (PCAs).¹ These PCAs include multiple medically underserved areas and are geographically isolated from healthcare services. Frontier designations represent the most isolated rural areas.

Tribal Nations:² Pascua Yaqui, San Carlos Apache, San Xavier, Tohono O'odham

Counties:² Pima, Santa Cruz, Cochise, Graham, Greenlee

Rural PCAs:¹ Tanque Verde, Oro Valley, Marana, Picture Rocks, Vail, Tucson West, Flowing Wells, Tucson Estates, Drexel Heights, Valencia West, Green Valley, Sahuarita, Rio Rico, Nogales, Benson, Douglas & Pirtleville, Sierra Vista, Bisbee, Thatcher, Safford

Indian PCAs:¹ Tohono O'odham Nation, Pascua Yaqui Tribe, Ajo, Morenci, Wilcox & Bowie

Frontier PCAs:¹ Ajo, Wilcox & Bowie, Morenci

Population and Vulnerable Demographics

About 1,167,929 people live in the Southern Region.² The population varies seasonally with winter visitors staying 30 days or longer, and migrant/agricultural workers coming into the communities during the winter growing season.

During a disaster, individuals with disabilities and others with access and functional needs may require special assistance from the emergency management system. In the Southern region, there are higher proportions of persons living with disabilities (15.3%) and who are Medicare beneficiaries (21.2%) than the state average.²

Considerations for those who are very old or very young, live in rural settings, have transportation challenges, have limited English proficiency, have low-socioeconomic status, or face challenges accessing health services should be included as well. 38.4% of the population in the Southern region lives below 200% of the federal poverty level; about one in four children under age 12 also live in poverty.² The inmate population is vulnerable due to access to care and congregate living conditions. The Southern Region houses 20.3% of the total prison inmate population of Arizona.

Risk Factors	Southern Region	Arizona
Persons with Disabilities $(\%)^3$	15.3%	13%
AHCCCS (Medicaid) Population ⁴	445,989 (18.9%)	2,355,253

Medicare Beneficiaries (%) ⁵	294,067 (21.2%)	1,384,923
Electricity-Dependent Medicare Beneficiaries (%) ⁵	12,552 (20.1%)	62,243
Medically Uninsured (%) ²	9.0%	10.4%
Population below 200% FPL (%) ²	38.4%	34.5%
Children < age 12 in Poverty (%) ²	27.4%	24.2%
Correctional Facilities (%) ⁶	4 (25%)	16
Correctional Facility Inmate Capacity-prisons only (%) ⁶	6,839 (20.3%)	33,657

Healthcare Utilization

The Southern region has 1 primary care providers for every 317 residents, which is less than the Arizona average of 1 primary care physician for every 386 residents.² Ambulatory care sensitive conditions - care that if delivered properly would not result in hospitalization – relieves the burden on the hospital system. Our communities have lower proportions of ambulatory care sites per resident over 65 years and higher hospital inpatient days per resident than the rest of the state, indicating higher overall utilization throughout the region.²

Utilization	Southern Region	Arizona
Total Primary Care Providers (%) ⁷	3,682 (19.5%)	18,878
Total Ambulatory Care Sites (%) ⁸	31 (14.6%)	212
ACSs/1000 Residents Age <65 ²	51.8	42.1
Total Emergency Room Visits (%) ⁹	413,151 (17.3%)	2,391,489
Total Hospital Beds (%) ¹⁰	3,253 (21%)	15,477
Hospital Inpatient Days/1000 Residents Age <65 ²	599	585
Hospital Beds/1000 Residents ²	2.5	1.8

Regional Healthcare Infrastructure

All fifteen of the general hospitals in the Southern Region are sole providers of short-stay, acute care, inpatient services within their PCA.²

Diverse regional facilities and resources that serve specific populations, including pediatrics, are critical to the whole community response. The Southern Region has 505 specialty beds (all in Pima County), 30 skilled nursing facilities, 3,533 nursing beds, 36 licensed home health agencies, 246 licensed pharmacies, and 32 certified ambulance services.²

Healthcare Infrastructure	Southern Region	Arizona
General Hospitals ²	15 (22.7%)	66
Critical Access Hospitals ⁸	5 (31.2%)	16
Behavioral Health Hospitals ⁸	3 (12.5%)	24
Long-term Care Hospitals ⁸	4 (20%)	20
Specialty beds ²	505 (13.7%)	3,692
ICU bed capacity ¹⁰	299 (18.6%)	1,607
ED bed capacity ¹⁰	500 (21.2%)	2,357
Skilled Nursing Facilities ²	30 (18.9%)	159
Nursing Beds ²	3,533 (21.7%)	16,241
Licensed Home Health Agencies ²	36 (19.1%)	188
Licensed Pharmacies ²	246 (18.7%)	1,319
Certified Ambulance Services ²	32 (29.9%)	107
Air Transport ¹⁰	9 (16.4%)	55

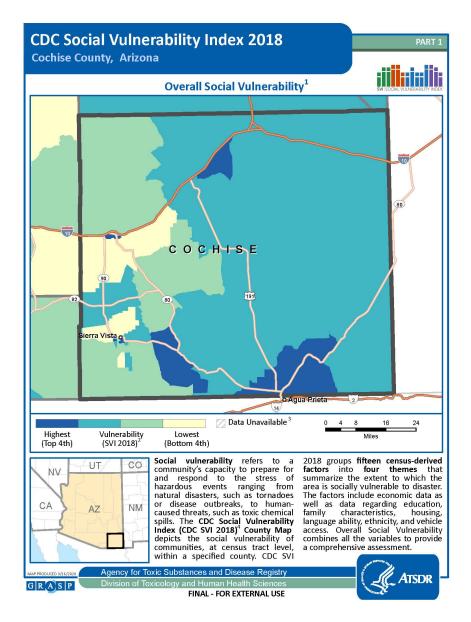
County Hazard Identification Summary

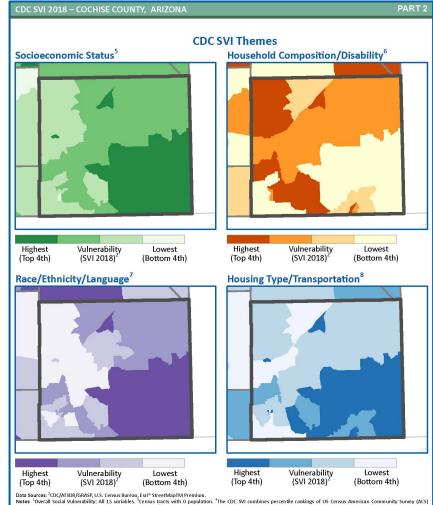
County Multi-Jurisdictional Hazard Mitigation Plans are administered once every five years to identify the greatest risk of loss to people and critical facilities. Hazards were identified through a Threats and Hazard Identification Risk Assessment (THIRA). Experiential knowledge of the planning team, considerations of relative risk, historic context, potential for mitigation, alignment with state plans, and duplication of effects for each hazard influenced each County's process.

Cochise County	Graham County	Greenlee County	Pima County	Santa Cruz County
(2017) ¹¹	(2018)	(2021) ¹²	(2017) ¹³	(2018) ¹⁴
 Building Collapse/ Mine Subsidence Drought Earthquake Fissure Flood/Flash Flood Severe Wind Wildfire 	 Dam Failure Drought Fissure Flood/Flash Flood Severe Wind Wildfire 	 Drought Flooding/ Flash Flooding Levee Failure Wildfire 	 Drought Earthquake Extreme Cold Extreme Heat Flood Landslide Severe Wind Wildfire 	 Dam Failure Drought Flooding/Flash Flooding HazMat Incidents Wildfire

Southern Region Hazard Lists (Referenced from County Multi-Jurisdictional Hazard Mitigation Plans):

CDC Social Vulnerability Index (SVI) County Maps¹⁶

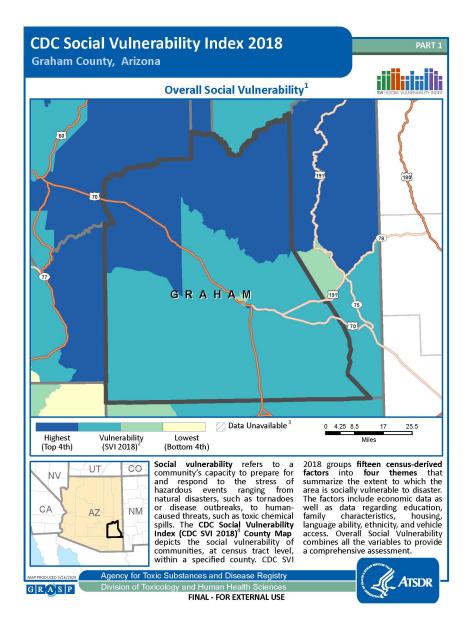


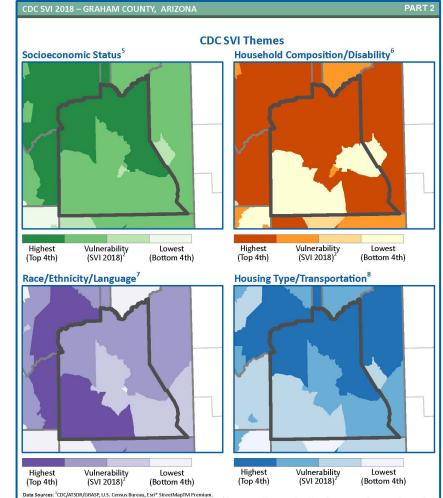


Notes ¹Oyerall Social Vulnerability: All 15 variables, ¹Census tracts with 0 population. ⁴The CDC SVI combines percentile rankings of US Census American Community Survey (ACS) 2012-2015 variables, for the state, at the census tract level. ⁵Socioeconomic Status: Poverty, Unemployed, Per Capita Income, No High School Diploma. ⁴Household Composition/ Disability: Aged 5 and Over, Aged 17 and Younge, Single-parent Household, Aged 5 and over with a Disability. ⁴Rece/Ethnicity/Language: Minority, English Language Ability. ⁴Housing Type/Iransportation: Multi-unit, Mobile Homes, Crowding, No Vehicle, Group Quarters. Projection: Arizon Custom Albers Cual Area Conic (EH).

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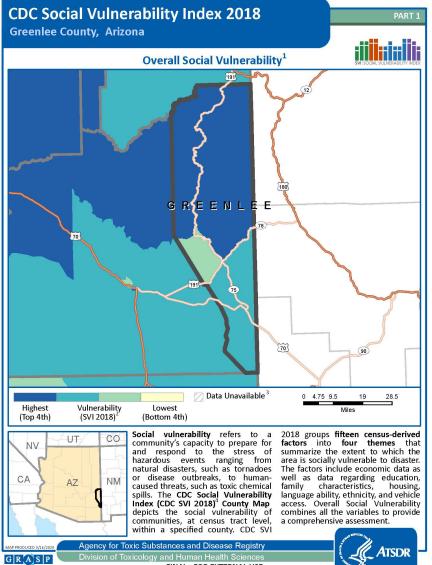




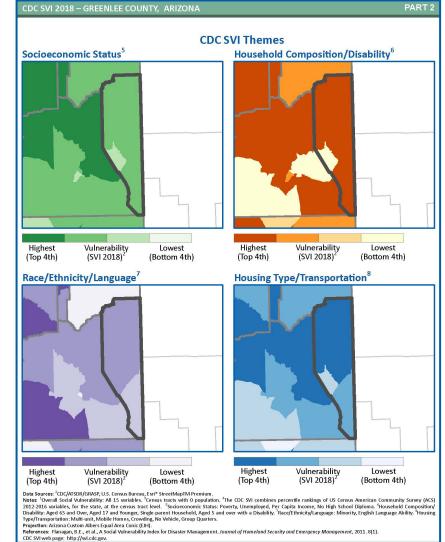
were avarues: Louyna sudyunsky LD., Lemst Burdau, Edf StreetMapTM Premium. Notes 'Overall Social Valoreability: All 15 variables. 'Census tracts with 0 population. ¹The CDC SVI combines percentile rankings of US Census American Community Survey (ACS) 2012-2016 variables, for the state, at the census tract level. ¹Socioeconomic Status: Poverty, Unemployed, Per Capita Income, Ne High School Opioma. ¹Household Composition/ Disability: Aged 55 and Over, Aged 17 and Younges, Single-parent Household, Aged 5 and over with a Disability. ²Race/Ethnicity/Language: Minority, English Language Ability. ¹Household, Comp Quarters.

Projection: Arizona Custom Abbers Equal Area Conic (EH). References: Flanagan, B.E., et al., A Social Vulnerability Index for Disaster Management. Journal of Homeland Security and Emergency Management, 2011. 8(1). CDC SVI web page: http://sic.degov.

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Resources

Resources

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ACS	Ambulatory Care Site
AHCCCS	Arizona Health Care Cost Containment System
CDC	Centers for Disease Control and Prevention
HHS emPOWER map	Over 2.5 million Medicare beneficiaries rely on electricity-dependent medical equipment, such ventilators, to live independently in their home: Severe weather and other emergencies, especi those with long power outages, can be life- threatening for these individuals.
	The HHS emPOWER Map is updated monthly a displays the total number of at-risk electricity- dependent Medicare beneficiaries in a geograp area, down to the ZIP Code.
	The HHS emPOWER Map gives every public health official, emergency manager, hospital, fin responder, electric company, and community member the power to discover the electricity- dependent Medicare population in their state, territory, county, and ZIP Code. When combine with real-time severe weather and hazard map communities can easily anticipate and plan for needs of this population during an emergency.
FPL	Federal Poverty Level
PCA	Primary Care Area: A Primary Care Area is a geographic area in which most residents seek primary health services from the same place(s) The PCA is meant to depict the "primary care service seeking patterns" of the residents.
Specialty Beds	The number of hospital beds located at "Specia hospitals, such as emergency or surgical hospit
SVI	Social Vulnerability Index Social vulnerability refers to the potential nega effects on communities caused by external stresses on human health. Such stresses includ natural or human-caused disasters, or disease outbreaks. Reducing social vulnerability can decrease both human suffering and economic

CDC Social Vulnerability Index (CDC SVI) uses 15 U.S. census variables to help local officials identify communities that may need support before, during, or after disasters.