The Arkansas Center for Health Improvement (ACHI) was established in 1998, creating a much needed intersection between research and policy that addresses Arkansas’s pressing health issues. As the state’s primary health policy center, ACHI serves as a resource for non-partisan, policy-relevant information and has become widely recognized as a trusted advisor and catalyst for change.

**Vision**
To be a trusted health policy leader committed to innovations that improve the health of Arkansans.

**Mission**
To be a catalyst for improving the health of Arkansans through evidence-based research, public issue advocacy and collaborative program development.

**Core Values**
Commitment • Initiative • Trust • Innovation
These are the fundamental principles that guide the Center’s collective and individual decisions, strategies and actions to improve the health of Arkansans. These core values define what ACHI—the organization and its people—stands for throughout time, regardless of changes in ACHI’s internal structure and leadership or changes in the health care landscape.

The Arkansas Center for Health Improvement is an independent, non-partisan health policy center jointly supported by Arkansas Blue Cross and Blue Shield, Arkansas Children’s Hospital, the Arkansas Department of Health, Delta Dental of Arkansas and the University of Arkansas for Medical Sciences.
ACHI was envisioned as an organization dedicated to change—change that leads to improved health for all Arkansans. For more than a decade, ACHI hasn't merely adopted the values of commitment, innovation, trust, and initiative; ACHI staff have lived those values and imbued their work with these principles. I am proud of the changes in Arkansas's health environment to which ACHI has contributed. However, our work is far from finished.

Our nation's and state's health care systems are undergoing unprecedented shifts. ACHI and all those committed to good health must adapt to changing opportunities and challenges. The convergence of rising health care costs and a persistently unhealthy citizenry has pushed the need for system change to the forefront. As the entire nation grapples with this complicated issue, it is truly inspiring to see Arkansas rising to this challenge and succeeding in making changes for our future.

People across the state are now steadfastly working together to transform an unsustainable and fragmented health care system into one that truly meets the needs of Arkansans. As Director of ACHI and Surgeon General for the State, I am honored that ACHI has been entrusted with a leadership position for Arkansas's health policy. While ACHI has delivered many meaningful accomplishments, especially in the areas of tobacco cessation, childhood obesity and vehicular safety, I believe the Health System Improvement Initiative we have now undertaken will result in our most important contribution to the health and productivity of Arkansans.

Arkansas's overall health system improvement effort spans our organization's foci on disease prevention, health promotion, access to care, and health care finance. These policy areas are supported by the Arkansas Health Data Initiative and a strong research component. To better meet the challenges and opportunities before us, ACHI has implemented an internal reorganization to increase the depth of our expertise within each of these core initiatives.

ACHI’s staff is working at the forefront of the movement to improve our health system, facilitating and convening multiple stakeholders across dozens of disciplines, striving to find common ground for the common good. This biennial report details our efforts to translate research and data into evidence-based solutions, build productive collaborations, and help leaders develop innovative policy solutions, all with the support of ACHI’s strong infrastructure.

The work before us is complex, but I know that Arkansans will rise to these new challenges and seize the opportunities that are available to us to make positive change happen. When we are finished, the Arkansas economy will be stronger and every Arkansan, in every part of the state, will have the best possible opportunity for a healthy and productive life.

Joseph W. Thompson, MD, MPH
Director, Arkansas Center for Health Improvement
Arkansas Surgeon General
The purposeful structuring of ACHI as an independent entity with separate administrative and policy decision bodies uniquely positions ACHI to serve as an unbiased convener. ACHI brings together diverse groups of stakeholders to accomplish a common goal in an evidence-based manner while providing for the transparent consideration of varied interests and positions.
Annual support for ACHI is provided by five corporate sponsors: Arkansas Blue Cross and Blue Shield, Arkansas Children’s Hospital, Arkansas Department of Health, Delta Dental of Arkansas and the University of Arkansas for Medical Sciences.

An Administrative Committee, composed of the chief administrators from each sponsoring organization, serves as a governing body distinct from ACHI’s Health Policy Board. The Administrative Committee provides performance review and establishes compensation for ACHI’s Director, oversight of ACHI’s financial performance and approval of ACHI’s annual budget. The Administrative Committee has formally delegated ACHI policy decisions to the ACHI Health Policy Board.

“Arkansas Blue Cross and Blue Shield is proud of its partnership with ACHI for improving the health of all Arkansans. Our current partnership in the Arkansas Payment Improvement Initiative is a model of how public and private entities can work together toward solutions that transform the health delivery system in Arkansas to ensure a healthy future.”
Mark White, CEO, Arkansas Blue Cross and Blue Shield

“Delta Dental of Arkansas shares ACHI’s commitment to improve the health and well-being of Arkansans. ACHI is unparalleled as a leader in health policy development and advocacy, and serves as an effective catalyst for positive change. Delta Dental is dedicated to helping ACHI achieve and implement this change through our ongoing support of its vital mission.”
Ed Choate, President & CEO, Delta Dental of Arkansas

“The Arkansas Center for Health Improvement works to improve population health by translating research findings into meaningful policy solutions. Through educational initiatives and partnerships, ACHI has been instrumental in helping communities and the state identify and achieve health goals.”
Dan Rahn, MD, Chancellor, University of Arkansas for Medical Sciences

“Arkansas Children’s Hospital continues to work closely with ACHI to improve the health status of Arkansas children. Our collaborations and financial support of ACHI are a key aspect of our work to make the lives of our children better. Our Natural Wonders collaboration, of which ACHI is a founding member, continues to work in many areas to help parents provide for a healthy future for our children.

In the past year we have seen:

• A significant decrease in the rate of vehicle crashes involving teen driver groups—a key result of the Graduated Driver’s License Legislation. Fatalities involving teen drivers were reduced by 59 percent from 2008 to 2010. This translates into an estimated 32 lives saved.

• Expansion of the Seal The State Program to bring dental sealants to elementary schools in areas underserved by dental professionals to help prevent tooth decay in children.

• Adoption of a statewide injury prevention plan to help implement the new Arkansas Trauma System.

Additionally, groups such as the Governor’s Roundtable on Health Care exemplify the contributions ACHI continues to make to health and health care in Arkansas. All of us at ACH are pleased to partner with ACHI and look forward to greater opportunities to partner in the future.”
Jonathan Bates, MD, President and CEO, Arkansas Children’s Hospital

“The Arkansas Center for Health Improvement is the state’s premier health policy organization and provides critical data and policy leadership to improve the health of Arkansans as an independent, non-partisan health policy center.”
Paul Halverson, DrPH, FACHE, State Health Director, Arkansas Department of Health
ACHI’s Health Policy Board is an independent, self-perpetuating group of 21 members who bring diverse perspectives and interests on health. The Health Policy Board identifies and establishes strategic priorities, sets policy recommendations to benefit the citizens of the state and provides guidance to ACHI staff in advancing their recommendations. This allows ACHI to serve as an independent voice articulating the needs of Arkansans. For an overview of the Board’s health policy positions, visit our website at achi.net.

Jerry Adams  
President/CEO  
Arkansas Research Alliance

Sharon Allen (2008–2011) (not pictured)  
Former President/COO-Retired  
Arkansas Blue Cross and Blue Shield

Cory Anderson (2010–2011) (not pictured)  
Vice President  
Winthrop Rockefeller Foundation

Joseph Bates, MD  
Deputy State Public Health Officer &  
Chief Science Officer  
Arkansas Department of Health

Larnell Davis  
Executive Director  
Jefferson Comprehensive Care System

Anthony Fletcher, MD (2012 Chair)  
Cardiologist  
Cardiology and Medicine Clinic

Joe Fox, MBA  
President  
Community Bakery, Inc.

Stephanie Gardner, PharmD, EdD  
Professor and Dean  
College of Pharmacy  
University of Arkansas for Medical Sciences

Ray Hanley  
President and CEO  
Arkansas Foundation for Medical Care

Susan Hanrahan, PhD (2011 Chair)  
Dean, Nursing and Health Professions  
Arkansas State University

Don Hollingsworth, JD  
Former Senior Associate-Retired  
Arkansas Center for Health Improvement

Kurt Knickrehm, MBA (not pictured)  
Vice President  
Rebsamen Insurance

Ray Kordsmeier  
Owner  
Kordsmeier Furniture

Andrew Kumpuris, MD  
Cardiologist  
Heart Clinic-Arkansas

Robert McGinnis  
Former State Representative, District 97

Ray Montgomery  
President and CEO  
White County Medical Center

Len Nichols, PhD (not pictured)  
Director  
Center for Health Policy Research and Ethics  
George Mason University

Eduardo Ochoa, MD  
Medical Director, Latino Clinic  
Arkansas Children’s Hospital

James Raczynski, PhD (ex-officio)  
Professor and Dean  
Fay W. Boozman College of Public Health  
University of Arkansas for Medical Sciences

Mary Beth Ringgold (not pictured)  
President  
Cajun’s Wharf, Capers, and Copper Grill
Herb Sanderson
Associate State Director for Advocacy
AARP

Robert Shoptaw
Former CEO-Retired
Arkansas Blue Cross and Blue Shield

G. Richard Smith, MD (not pictured)
Marie Wilson Howells Professor and Chair,
Department of Psychiatry
Director, Psychiatric Research Institute
University of Arkansas for Medical Sciences

Charles Stewart (2010–2011) (not pictured)
Executive Director
Heifer International

Joseph Thompson, MD, MPH (ex-officio)
Director, Arkansas Center for Health Improvement
Surgeon General, State of Arkansas

Ken Tillman (2003–2011) (not pictured)
Rural Health Coordinator
Arkansas Farm Bureau

Susan Ward-Jones, MD
CEO
East Arkansas Family Health Center, Inc.
2011 General Session

Oral health is a vital aspect of the overall health of Arkansans. ACHI has long been a proponent of fluoridated community drinking water and dental sealants for children—a combination with the potential to prevent virtually all tooth decay. During the 88th General Assembly, three acts were passed to improve oral health and access to oral health services in Arkansas.

- Act 197 requires municipalities with 5,000 or more citizens to maintain fluoride content in drinking water as established by the Arkansas Department of Health (ADH).

- Act 90 allows physicians and nurses who have completed training through ADH to apply fluoride varnish to children's teeth.

- Act 89 creates a collaborative care permit program to allow dental hygienists to perform certain procedures without the direct supervision of a dentist.

Building upon past successes to reduce health threats associated with tobacco use and exposure to second-hand smoke, the following legislation was passed during the 2011 session:

- Act 868 authorizes courts to order minors who are found to be in violation of any statute and are also found to be in possession of tobacco to perform up to three hours of community service and enroll in a tobacco education program.

- Act 811 raises the age of children to 14 years for the offense of smoking in motor vehicles when children of a certain age are passengers.
Total available funding for the biennial period spanning fiscal years 2011 through 2012 (July 2010–June 2012) was $13,283,359. Included were annual sponsor contributions totaling $1,900,000 from Arkansas Blue Cross and Blue Shield, Arkansas Children’s Hospital, Arkansas Department of Health, Delta Dental of Arkansas and the University of Arkansas for Medical Sciences. This core funding provides an underpinning that has allowed ACHI to develop its initiatives and position itself to take on meaningful projects funded through grants, contracts and special projects.

Grants, contracts and special projects for the biennial period ending June 30, 2012 totaled $11,383,359 including $6,447,256 in funding for the Robert Wood Johnson Foundation Center to Prevent Childhood Obesity, housed at ACHI through November 2011.
## Grants
- Arkansas Department of Health—Body Mass Index Analysis
  Implementation of AR Act 1220 of 2003 Childhood Obesity
- Arkansas Department of Health—CDC
  Adult Immunization, Employer Awareness
- Robert Wood Johnson Foundation—Epidemiology
  Defining and Classifying Diseases and Risks Linked to Childhood Obesity
- University of Arkansas Fayetteville—Health Data Initiative
  Interventions for Obesity Prevention Targeting Young Children in at Risk Environments: An Integrated Approach
- Blue and You Foundation of Arkansas—Health Workforce Strategic Planning
  Primary and Specialty Care Survey

## Contracts
- Arkansas Department of Human Services—Safety Net Waiver Evaluation (ARHealthNetworks)
- Arkansas Department of Human Services—Joint Policy Analyst
- Arkansas Department of Human Services—Medicaid Match Payment System Improvement Initiative
- Arkansas Department of Human Services—Medical Services
  Comprehensive School Wellness Center Evaluation
- Arkansas Department of Health—Surgeon General
  Tobacco cessation as a health plan benefit
- Arkansas State Employee Benefits Division—Health Risk Assessment
- Arkansas Tobacco Settlement Commission—Child Wellness Intervention Project
  Evaluation, review and technical assistance
- Arkansas Department of Education—Coordinated School Health Program evaluation
- The Cancer Challenge
  Funding evaluation
- Arkansas Office of Health Information Technology
  Health Information Exchange
- Arkansas Insurance Department
  Health Benefits Exchange policy analyses
- Princeton University and Children's Hospital Boston
  Maternal Weight Gain During Pregnancy and Child BMI Evaluation

## Special Projects
- Robert Wood Johnson Foundation Center to Prevent Childhood Obesity
  Health Data Initiative
Paula Card-Higginson, BA, ELS  
Founding Senior Associate  
(not pictured)

Camille Carter  
Administrative Specialist

Jana Casteel, MHSA  
Fiscal Officer

James Cotton  
Management Information Systems Specialist

Phil Deloney  
Director of Operations

Sheila Dodson, MA, BA  
Research Assistant  
Health Data Initiative (not pictured)

Sarah Frith, MA  
Prevention Specialist  
Disease Prevention Health Promotion

Carole Garner, MPH, RD, LD  
Prevention Specialist  
Disease Prevention Health Promotion

Rhonda Hill, MPH  
Director  
Health Care Finance

Jennifer Holder  
Research Assistant  
Access to Care

Courtney Jones, MPH  
Research Assistant  
Disease Prevention Health Promotion

Michelle Justus, MS, RD, LD  
Director  
Disease Prevention Health Promotion

Arlo Kahn, MD  
Senior Policy Advisor

Chaitanya Katterapalli, MS  
Senior Computer Specialist  
Health Data Initiative (not pictured)
ACHI extends a special thanks to the following former employees for their service.

Kristy Anderson, MPP  
Senior Federal Policy Analyst  
RWJF Center to Prevent Childhood Obesity

Debbie Bertelin  
Executive Assistant

David Boling, JD  
Senior Policy and Legal Analyst

Karen Cox Wooten-Wood  
Executive Assistant

Kevin Dedner, MPH  
Team Lead, State & Local Policy,  
RWJF Center to Prevent Childhood Obesity

George (Ed) Fryer, PhD  
Associate Director  
Health Data Initiative

Tionna Jenkins, MPH  
Research Associate  
RWJF Center to Prevent Childhood Obesity

Jennifer Pagan  
Research Assistant

Kimara Randolph, PHR, CHAA  
Meeting and Event Manager

Amy Rossi, LCSW  
Associate Director  
Community Relations

Shirley Vanderslice, CPC  
Executive Assistant
New Leadership Structure

ACHI has undergone a significant internal restructuring to embrace and better support changing external opportunities. Included is the establishment of a new leadership team designed to strengthen our depth of expertise within our primary initiatives.

Joseph W. Thompson, MD, MPH
Director and Arkansas Surgeon General

Dr. Thompson is ACHI’s guiding force responsible for establishing Center priorities and direction.

Mary Leath
Chief Operational Officer

Working in partnership with Dr. Thompson, Mary Leath oversees day-to-day operations and directs the management of all ACHI Projects.

Rhonda Hill, MPH
Director, Health Care Finance

Rhonda Hill oversees ACHI’s participation in statewide efforts to improve Arkansas’s health payment system.

Michelle Justus, MS, RD, LD
Director, Disease Prevention Health Promotion

Michelle Justus is responsible for planning and implementing ACHI’s efforts in obesity prevention and oversees the Center’s contract work related to obesity, tobacco and immunizations.

Suzanne McCarthy, MS, MPH
Director, Government Relations Founding Senior Associate

Serving as ACHI’s liaison with key stakeholders and policymakers, Suzanne McCarthy helps guide and communicate the Center’s health policy resources.

Kenley Money, MA, MFA
Director, Health Data Initiative

Kenley Money is responsible for all aspects of ACHI’s analytical data warehouse and creation of an all payer claims database used to inform ACHI’s policy work.

Heather Rouse, PhD
Director, Health Policy Research

Dr. Rouse directs ACHI research and analytic projects including grants and contracts to provide an evidence base for developing ACHI policy recommendations.

J. Craig Wilson, JD, MPA
Director, Access to Care

Craig Wilson leads policy and advocacy efforts to achieve ACHI’s policy goals and provides analysis of laws and policies that impact health and health care in Arkansas.
Senior Leadership Advisors

Paula Card-Higginson, BA, ELS
Founding Senior Associate and former Chief Operations Officer

Arlo Kahn, MD
Senior Policy Advisor

Dan Reimer, MPH
Senior Associate and former Deputy Director, RWJF Center to Prevent Childhood Obesity

Kevin Ryan, JD, MA
Senior Advisor for Law and Legal Policy
Operating within a process framework that includes analyzing data to inform solutions and convening stakeholders and policymakers across multiple disciplines to reach consensus, ACHI has been a catalyst for the implementation of policies and practices designed to improve health in Arkansas. Notably, ACHI was instrumental in successful efforts to reduce harmful exposure to second-hand smoke, launching a statewide trauma system initiative, improving vehicular safety, and efforts to combat childhood obesity.

The direction and priority of our work is compelled by two things—the known health challenges facing Arkansans and opportunities for change to improve health. Health challenges faced by the citizens of our state and the causes of those challenges are the bases for ACHI’s primary initiatives—disease prevention health promotion, access to care, and health care finance—and the health data and analytic infrastructure that supports those initiatives. Opportunities for change to improve health often come as a result of external influences both locally and nationally.

Over the years, ACHI has fine-tuned the ability to nimbly adjust priorities to embrace opportunities arising from the shifting health policy landscape.

This ability was keenly demonstrated with the closing of the Robert Wood Johnson Foundation Center to Prevent Childhood Obesity housed at ACHI and the simultaneous implementation of the state’s Health System Improvement Initiative led by Dr. Thompson as Arkansas Surgeon General and staffed by ACHI.
Launched and operated under ACHI’s leadership in partnership with PolicyLink (Oakland, CA) from January 2009 through November 2011, the Robert Wood Johnson Foundation Center to Prevent Childhood Obesity (RWJF Center) was part of a multi-faceted initiative undertaken nationally by the Robert Wood Johnson Foundation to reverse the childhood obesity epidemic by 2015.

The Center’s strategy focused on policy and environmental change as a key component of the movement to reverse the childhood obesity epidemic. The Center’s mission included a specific focus on decreasing disparities in childhood obesity among communities of color, impoverished areas, and regions disproportionately affected by obesity.

The leadership of the RWJF Center worked through direct education, dialogue and engagement with many national, federal agency, and presidential administration partners to achieve substantial national policy changes for the childhood obesity prevention movement, including:

• Formation of the President’s Task Force on Obesity (February 2010)
• Direct and indirect support through federal agencies in the development of the “President’s Task Force Action Plan: Solving the Problem of Childhood Obesity Within a Generation” (May 2010)
• Support for various components of First Lady Michelle Obama’s Let’s Move! initiative including developmental guidance, recruitment from the RWJF field network, and increased awareness of participatory opportunities
• Dissemination of information and mobilization of support toward passage of the Healthy, Hunger-Free Kids Act

RWJF Center staff also engaged in the field to promote policy change across a variety of different communities, mobilized state actions to support healthier communities, educated policy makers at all levels of government, and provided technical support technical assistance and communications support to help communities achieve goals. As a result, the RWJF Center catalyzed broad commitments to combating childhood obesity among stakeholders in Arkansas and across the nation who will continue to work toward the common goal of reversal of the epidemic.
Since its inception, ACHI has been focused on the health and health care challenges facing our state. Our body of work includes convening the Arkansas Health Insurance Roundtable and later the Governor’s Roundtable on Health Care—both brought together individuals from diverse backgrounds to create a participant-driven, independent platform for sharing ideas and formulating solution-oriented policies to advance health care financing and access options for Arkansans. Recommendations advanced by these groups have not only led to significant policy changes but also contributed to ACHI’s vast understanding of the strengths and weaknesses of our existing health system.

As a result, ACHI was well-equipped to analyze the various provisions of the Patient Protection and Affordable Care Act for their impact on Arkansans. Through this process it became clear that while the Act provides several opportunities that will benefit the state, there is a great need for Arkansans to thoughtfully plan for the future of our health care system beyond implementation of the law.

Demand for change is driven by the increasing needs of an aging population and a population battling devastating rates of chronic disease, escalating health care costs, a large proportion of uninsured, a critical lack of coordination within our existing system, a Medicaid program with unsustainable costs, and a maldistributed health care workforce.

Recognizing the complexity of such an undertaking, ACHI began by developing a patient-centered vision for rebuilding our health system to better meet the needs of Arkansans. This vision has been ACHI’s guide as staff engaged with the many state agencies and stakeholders working toward solutions to interrelated health system challenges. A video depicting our vision for Arkansas’s future health system is available on our website at achi.net.
Directed by Governor Beebe and led by ACHI Director and Arkansas Surgeon General, Dr. Joe Thompson, an overall health system improvement initiative was established to:

- ensure that our health workforce is trained to efficiently use health technology and that patient-centered medical care is available when and where it is needed,
- restructure the health payment system to incentivize quality outcomes through greater patient support and coordination of care across the system,
- accelerate use of technology to improve the accuracy of medical records and avoid expensive and unnecessary duplication of services, and
- reduce the number of Arkansans without health insurance through development of a health insurance exchange to assist Arkansans in securing suitable coverage.
**Workforce Strategic Plan**

Arkansas does not have an adequate health care workforce in many areas of the state. Thoughtful planning now provides an opportunity not only to ensure adequate future access to health care across the state, but to also create a system of care that is less costly, more efficient and capable of dramatically improving the health and productivity of Arkansans. The strategic planning process engaged stakeholders and experts from across the state in the development of a comprehensive plan to serve as a roadmap for addressing the critical shortage and maldistribution of health care services in our state. This effort is staffed by ACHI and led by Dr. Daniel Rahn, Chancellor, University of Arkansas for Medical Sciences, along with Dr. Paul Halverson, State Health Director, Arkansas Department of Health. The full report is available on our website at achi.net.

**Payment System Improvement**

Public and private health care payers in Arkansas are undertaking a new patient-centered payment strategy led by the Arkansas Department of Human Services to align financial incentives with quality outcomes. This strategy is designed to ensure that health care is affordable for individuals, businesses and the state, and is financially sustainable over the long-term. By making it easier for medical, behavioral and community health professionals to work together more efficiently, costs will be better managed and patients will be better served. Better care coordination is key to ensuring patients receive all the services necessary to prevent costly illnesses and avoid unnecessary hospital visits. For more information, see paymentinitiative.org.
Health Information Technology

Using federal American Recovery and Reinvestment Act funds, Arkansas through the Arkansas Foundation for Medical Care, has recruited clinicians across the state to adopt electronic health records and convert their practices from a paper-based system to one that uses technology to assure high-quality care and increased cost efficiency.

The Office of Health Information Technology (OHIT) is responsible for coordinating this and other health information technology activities throughout the state. Included is development of the State Health Alliance for Records Exchange (SHARE), a mechanism to support the secure electronic exchange of medical records between hospitals, providers and pharmacists, thereby potentially reducing medical errors, duplicate tests and costs. This vital sharing of information will provide peace of mind for patients who want secure access to their medical information and to providers who need complete medical records for coordinated treatment of patients. For more information, visit ohit.arkansas.gov.

Expanding Health Insurance Coverage

As part of the federal Patient Protection and Affordable Care Act, the Arkansas Department of Insurance is leading planning for a trusted, easy-to-use marketplace where individuals, families and small businesses can quickly compare affordable, high-quality health insurance coverage plans and enroll in a plan that best meets their needs. With increased health coverage across the state, we can expect improved health outcomes, decreased uncompensated care and decreased health-related financial risk for individuals and small businesses. Visit hbe.arkansas.gov for more information.
ACHI’s transformation of data into information for decision making is a central component of the Center’s health policy and program development.

The Arkansas Health Data Initiative (HDI) integrates data sets from a variety of state and national sources providing a unique ability to synthesize key pieces of information previously held separately. These analyses provide a comprehensive picture of health and identify the best opportunities for improvement and efficiency.

The HDI’s integration of information provides peripheral vision to programs typically operating in silos and amplifies the ability of each partner involved to identify common resources and potential new partners and expertise. In addition, the HDI allows Arkansas to recruit state-of-the-art researchers to work with us to find answers to pressing health concerns.

All Payer Claims Database

To provide an analytical infrastructure to support an Arkansas health system shift to patient-centered care, the scope of the HDI is being expanded to create an all payer claims database. This will allow for better evaluation of the use of the health care system across the state and identify opportunities to improve quality of care and build efficiencies to reduce costs.

Arkansas is one of just a few states with access to Medicare data that can be linked to existing information. Along with other private and public claims data, it provides a robust picture of health care coverage and usage in Arkansas.

HDI Advisory Committee

ACHI established the Arkansas Health Data Initiative Advisory Committee in the fall of 2011 to provide governance of ACHI’s data assets for policy support.

The goals of the committee are to:
• Provide awareness of the HDI and its potential as a policy resource
• Generate policy-relevant discussion and analysis
• Assist in facilitating access to data supporting policy
• Review input to ensure product(s) support relevant policy
• Supply guidance for integration of data sources

All ACHI HDI data providers are invited to have one representative participate in the HDI Advisory Committee. Representatives from the following agencies are now members:

• Arkansas Department of Education
• Arkansas Department of Health
• Arkansas Department of Human Services
• Arkansas Employee Benefits Division
• Arkansas State Police
• Arkansas Workers’ Compensation Commission
• Centers for Medicare & Medicaid Services
• Delta Dental of Arkansas

Private sector members will be invited to join as their organization’s data are added to the HDI.
According to the Arkansas Department of Health, more than half of Arkansas's adult population is living with at least one chronic disease including heart disease, diabetes, asthma, hypertension and cancer. Chronic disease represents an estimated annual cost to Arkansas’s economy of $17 billion in treatment expenditures and lost productivity. This number can be greatly reduced by addressing the upstream causes of chronic disease — primarily tobacco use, poor diet and lack of physical activity.

Because problems with weight often begin in childhood, ACHI has committed significant efforts to define and plan solutions to combat the obesity epidemic plaguing Arkansas’s youth. The health of Arkansas children and the prevention of childhood obesity continue to be a focus of many of ACHI’s collaborative projects and partnerships.

**Tobacco Prevention and Cessation**

Many of the most serious illnesses faced by Arkansans are related to tobacco use. Reducing use of tobacco continues to be an important aspect of ACHI’s Disease Prevention Health Promotion initiative. The Center has undertaken a project with the Arkansas Department of Health (ADH) to help ensure that health insurance benefit packages offered in Arkansas include coverage for evidence-based cessation programs and medications for employees.

**Coordinated School Health (CSH)**

ACHI staff has developed a strong partnership with the Arkansas CSH program. This includes providing an ongoing evaluation of implemented activities to help identify those with the greatest impact on student health, test scores, behavior and attendance. Since delivering a benchmark evaluation report ACHI has continued to work toward improving the evaluation model and providing evaluation training to participating school staff.

**Joint Use Agreement (JUA) Grant Program**

ACHI was not only instrumental in establishing funding for this program through the increased tobacco excise tax, but also has actively participated with the JUA workgroup and in the grant review process. ACHI coordinated two media events to help expand program participation. Events were held in Springdale and in Cabot, and included Arkansas Education Commissioner, Dr. Tom Kimbrell, mayors, school superintendents, teachers, students and parents.

**Child Wellness Intervention Project (CWIP)**

This Arkansas Tobacco Settlement Commission project represents another area of active partnership for ACHI staff. In addition to planning and facilitating component training for grantees, ACHI participates in grant application training and grant review and helped organize a grantee awards ceremony at the Arkansas State Capitol.

Other work includes creation of a new web-based data collection system and training for system users along with development of a comprehensive evaluation process. Evaluation will measure the program’s effectiveness in reducing obesity through increased active physical education and integrate data from a variety of sources to provide reports and program guidance.

**Body Mass Index (BMI) Assessments**

ACHI staff continues to work closely with the Arkansas Department of Education (ADE) and ADH to facilitate BMI data collection, conduct analyses and deliver reports. This includes assisting with training and maintaining the web-based data entry system managed by ACHI.
Child Care Adult Immunization Project

Children are required to be up-to-date with routine immunizations to attend licensed child care centers. Child care workers, however, do not have to be current with their adult immunizations. As a result, children are being exposed to vaccine-preventable diseases like influenza and pertussis (whooping cough). Often adults are unaware of the immunizations they need, lack access to health care services, or are not offered immunizations when seeking health care. Due to the need to increase immunization coverage among adults in Arkansas, ACHI has partnered with the Arkansas Department of Health and the Arkansas Department of Human Services to promote influenza and TDaP (tetanus, diphtheria, and pertussis) immunizations among child care workers. Work includes educating child care center directors and staff about the importance of adult immunizations, developing policies addressing staff immunizations, and collaborating with the Arkansas Pharmacists Association to send pharmacists to provide these immunizations for staff at the centers.

Arkansas Coalition for Obesity Prevention—Growing Healthy Communities (GHC)

The Arkansas Coalition for Obesity Prevention (ArCOP) received funding from the Blue & You Foundation for a Healthier Arkansas and the Arkansas Department of Health that added development of 13 new Growing Healthy Communities for a statewide total of 22.

Community leadership participated in ArCOP facilitated emersion trainings to learn how to develop and implement policy and environmental changes that promote healthy lifestyles and decrease obesity. ACHI staff participated in the planning and execution of these trainings and selection of appropriate resource materials to support community action.
One of the most important issues facing the state is the opportunity to improve our health care system to better meet the needs of Arkansans. Momentum has been gained during the past two years as a result of progress made in several interrelated areas including health information technology, payment system improvement, workforce strategic planning, and expanding health insurance coverage.

ACHI will continue to serve as a catalyst for moving this crucial work forward, addressing the specific needs of our state, convening stakeholders important to the process, and helping to inform decisions policymakers will face.

In addition, ACHI will carry on its leadership role in state efforts to reduce obesity and has developed a strategic plan for this activity that builds upon the “Growing Healthy Communities” concept initiated through our work with the Arkansas Coalition for Obesity Prevention (ArCOP). We have developed strong partnerships with the several state agencies including the Department of Education, Department of Health and the Department of Human Services and will use these partnerships toward a common goal of improving opportunities for physical activity and healthy eating in Arkansas’s public schools and communities across the state.

Thanks to the generous core support of our annual sponsors—Arkansas Blue Cross and Blue Shield, Arkansas Children’s Hospital, the Arkansas Department of Health, Delta Dental of Arkansas and the University of Arkansas for Medical Sciences—ACHI stands ready to embrace the many challenges and unprecedented opportunities ahead.