

Melanie also asked, what about staffing levels. Is recruitment during the nursing shortage more difficult in Arizona than Colorado and other states where Banner operates clinics and hospitals?

The recruitment issues that we have as a health care system in the United States is fairly similar across all markets, and Banner Health experience is fairly similar to what the entire health care industry is experiencing.

This is directly, we believe, related to the pandemic and the stress that has been placed on our frontline health care workers. They have been absolutely heroic in the response to this pandemic. And yet they are very tired at this time. My opening comments here today were to create a picture of what is happening to us in our health care system and also to ask for assistance.

Right now, the large number of COVID patients that we have in our hospitals is directly related to people being unvaccinated. You can do your part by becoming vaccinated and reducing that COVID load that is being experienced in our health care system. That, in turn, will reduce the stress on our nurses and other care providers.

We have many, many weeks ahead of us as we go into the winter season, and there is ample opportunity for us to bend this curve by becoming vaccinated.

Stephanie Innes at the Arizona Republic asks, do the general age range of the patients currently hospitalized with COVID-19, and are many over the age of 65.

I do have some general statements about that. Let me just refer to my notes to make sure I get that completely accurate. Right now, most of the patients that are in our hospital who are COVID positive are actually between the ages of 20 and 60. So if you reflect back on the previous surges, that is really quite different, where we saw a larger number of COVID positive patients in the hospital be in that 65 plus age group.

We believe that this, of course, is directly related to the vaccination rates of those that are in that age group of 65 plus. Currently, vaccination rates for those that are in the 65 plus are actually quite high, which is why we believe the demographics have now shifted down to a lower age group.

So again, going back to my opening comments, what can we all do to help make sure that we preserve capacity in our health care system to care for both COVID and non-COVID patients, get vaccinated. I believe these statistics clearly show for those that are in that age group of 65 plus what the role of high vaccination rate can do to significantly reduce the risk of getting COVID and needing hospitalization.

Allie Potter with KOLD asks, we have heard hospitals in Arizona are so full that patients have had to receive care in an ambulance or in the waiting room until the room is available. Is Banner seeing this with capacity?

So, as I stated my opening comments we are very full with both COVID and non-COVID patients. At this time, we remain open and a safe place for care. And yet, it is requiring us to, at times, deliver care in ways that are different than our absolute usual and normal. Again, we're asking for all of you to assist us with this. I think the statistics that we've been sharing, especially those today, clearly show that vaccination will reduce the likelihood of you getting sick with COVID and needing to be hospitalized by us. And when we all do that, we preserve the capacity for us to be available and easily available for anybody who has non-COVID needs.

Howie Fisher with Capitol Media Services has a follow up on his earlier question. He'd like you to talk a bit more about any current or future-- excuse me-- any current or future financial issues for Banner facilities because of limits on elective surgeries.

Yeah, I'm sorry I didn't answer that part of the question. Elective surgeries-- first of all, let's start with the term elective surgeries. Elective surgeries are needed, scheduled, surgeries for patients who require care. Absolutely, those are a revenue source for all health care systems. Banner Health is no different than any other health care system.

Our intent, especially as a not for profit organization, providing a lot of care in the states where we operate, is to be available for everybody. The financial impact of not being able to provide elective surgeries does not go into any of our decision-making. All of our decision-making in regards to whether we can or cannot provide elective surgeries to patients who need that is completely related to our capacity to appropriately and safely care for them, as well as the load of the COVID patients that are upon us with the surge.

So while it is financially disadvantageous to not have surgeries be offered, I want to make sure that it's very clear that is not the driving decision maker for us. Our decisions are completely centered on being able to take care of patients in a safe and appropriate way.

We ask everybody who's out there who's unvaccinated to do your part and get vaccinated. Your family, your friends, your neighbors, and your communities are filled with people who need care, including elective surgical procedures. You can help us be available for those patients, for those elective procedures, by getting yourself vaccinated so that we have capacity to care for everybody.

Alan Stein, a reporter with the Epoch Times, asks, how many children's hospitalizations/ICU cases that Banner involve RSV and COVID diagnosis.

Just give me one second to refer to my notes here. At this time, we are unable to release those numbers for individuals who are pediatric who are in our ICU or ventilated due to privacy. Those numbers are too low to release. I can provide just some overall comments in relation to COVID and RSV.

Very similar to what you can see on state dashboard, we are experiencing an uptick in RSV infections in our pediatric population, as well as an uptick in COVID infections in our pediatric population.

Alan has a few additional questions, as well. Does Banner take a serious look at the CDC's VAERS reporting system regarding vaccine deaths and injuries?

Yes. We do look at that and look to the CDC for significant guidance for us, both on vaccination approaches as well as guidance on how to safely guide our entire health care system through the pandemic.

Another question from Alan, how do you test for COVID?

We have a variety of different ways that we test for COVID. Right now, the majority of our tests are done through Sonoraquest laboratories as a PCR test, which is done as a nasal swab.

And then Alan's final question, how many unvaccinated patients have serious comorbidities?

I believe your question is how many unvaccinated patients who have COVID in our hospitals have serious comorbidities. I do not have that data available to me today.

Ryan Fish with KGUN9 asks, with the Delta variant spreading and children back in school, how concerned are you about more children becoming infected and/or hospitalized, specifically children who are too young to receive the COVID vaccine?

We are quite concerned about that. And I have provided some comments in prior week press conferences. Our comments around how to keep those children safe, especially those that are under the age of 12 and therefore age ineligible, includes three major buckets of work that we all can participate in.

First of all, for all of those that are age eligible, you should get vaccinated. That helps reduce the amount of virus that is spreading in our communities, which therefore reduces the likelihood that those that are under the age of 12 and unvaccinated will become ill. Number two, children need to mask while in school. That is a CDC recommendation and Banner Health supports that recommendation.

And lastly, nobody should be going to school, either as an adult worker or as a child who is ill. We know that many individuals can have COVID while they're mildly symptomatic, and that just continues to perpetuate the spread amongst those that are vulnerable.

Liliana Salgado from Univision asked, if you could elaborate on why you're not able to talk about the exact number of COVID or non-COVID patients.

Were we talking about the pediatric question?

She did not specify but I assume that's what she means.

OK, let me go back to some of the comments that I've stated so far in the press conference. Approximately 25% of our entire hospital census is related to COVID. So as a singular diagnosis, 25% of our patients that are hospitalized right now are hospitalized due to COVID.

If the question was in regards to pediatric, that was related to the pediatric patients that are in the ICU or ventilated. Those numbers are too low right now. And when numbers are low, we need to respect the privacy of our patients, and we don't share those broadly.

One other statistic that I did share here today was that of those patients who are currently hospitalized with COVID, approximately 5% of them are pediatric population.

Thanks a lot for your explanation, Dr. Bessel. Emily Carmen with Arizona PBS asks, how many COVID patients are in the ICU and on ventilators.

I do not have those numbers with me today. Those numbers are reported from a Banner Health perspective to our Arizona Department of Health Services and the state of Arizona, as well as to other states where we operate, and we refer you to those dashboards for additional information today.

Brittany Thomasin with 3TV asks, last week you mentioned Banner had 46 pediatric patients hospitalized with COVID and suspected with COVID. Can you tell us if that number is up or down today, or are we able to get the numbers so we can compare.

We can get that number and follow up.