AHCCCS Update

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Feb. 6, 2024
AHCCCS Overview
AHCCCS At A Glance

- Largest insurer in AZ, covering more than 2.2 million members
- Covers more than 50% of births in AZ
- Covers 60% of nursing facility days

Federal, state, and county funds used to provide services.

More than 93,000 registered health care providers

12 contracted managed care health plans deliver services

Single State Agency for behavioral health, State Mental Health Authority, & State Opioid Response Authority
AHCCCS System Overview

90% Managed Care Organizations (MCO)  
(as of October 1, 2023)

12 contracts with 9 unique MCOs

<table>
<thead>
<tr>
<th>AHCCCS Complete Care</th>
<th>AHCCCS Complete Care Regional Behavioral Health Agreements (ACC-RBHA)</th>
<th>Arizona Long Term Care System Elderly and Physical Disability (EPD)</th>
<th>ALTCS Developmentally Disabled (DD)</th>
<th>DCS-Comprehensive Health Plan (DCS-CHP)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.8m members</td>
<td>48k members w/ SMI</td>
<td>27k members</td>
<td>42k members</td>
<td>10k members</td>
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<tr>
<td>$11.25 billion</td>
<td>$1.73 billion</td>
<td>$1.97 billion</td>
<td>$3.10 billion</td>
<td>$176 million</td>
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<tr>
<td>Integrated PH &amp; BH services</td>
<td>Integrated PH, BH &amp; LTSS services</td>
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<td>Integrated PH and BH Services</td>
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2 primary programs

<table>
<thead>
<tr>
<th>AIHP</th>
<th>Tribal ALTCS</th>
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</thead>
<tbody>
<tr>
<td>135k members</td>
<td>2.1k members</td>
</tr>
<tr>
<td>$1.7 billion</td>
<td>$160 million</td>
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Integrated PH & BH and LTSS services (ALTCS)
AHCCCS Population: March 2020 - January 2024
State Fiscal Year 2024 Budget

AHCCCS APPROPRIATION AND ENROLLMENT

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Budget</th>
<th>Population</th>
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<tbody>
<tr>
<td>FY18 Actual</td>
<td>$11.5B</td>
<td></td>
</tr>
<tr>
<td>FY19 Actual</td>
<td>$12.1B</td>
<td></td>
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<tr>
<td>FY20 Actual</td>
<td>$12.9B</td>
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<td>FY21 Actual</td>
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<td></td>
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<tr>
<td>FY22 Actual</td>
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<tr>
<td>FY23 Final Appropriation</td>
<td>$23.5B</td>
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<tr>
<td>FY24 Current Appropriation</td>
<td>$20.1B</td>
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On the Horizon

- ID.me required for AHCCCS Online portal
- ALTCS E/PD contracts start 10/1/24
- 1115 Approval Implementation (10/1/2024)
  - Targeted Investments 2.0
  - Housing and Health Opportunities Demonstration (H20)
- CMS Negotiations Continuing
  - Reimbursement for traditional healing services
  - Reimbursement for services 30 days pre-release
  - Former foster youth continuous eligibility
  - Parents as paid caregivers of minor children
  - Expansion of CHIP to 225% FPL
- MES Roadmap
  - Awarded a System Integrator (SI) contract; will begin implementation upon CMS approval
- ARP Program Awards for HCBS providers
  - 1st round awarded $17 million
- Continued roll out of CommunityCares (CLRS)
- Full implementation of CHW services
- Continued support for the Opioid Services Locator tool
- Continued system improvements to combat fraudulent billing and member exploitation
CHW Services
Community Health Worker/ Community Health Representative

A frontline public health worker who is a trusted member of the community to help people:

- Navigate health care system,
- Encourage preventive care,
- Manage chronic illnesses,
- Maintain healthy lifestyles, and
- Assist in culturally and linguistically relevant ways.
Reimbursable Service Codes

• Education and training for patient self-management by a qualified, nonphysician health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each billed in 30 minutes increments.
  o 98960- education and training provided for an individual patient for each 30 minutes of service.
  o 98961- for a group of two to four patients.
  o 98962- or a group of five to eight patients.

• AHCCCS is currently developing guidance to establish per member per month billing limits.
  o If additional services are medically necessary, prior authorization would be required.
Reimbursement Pathways

Phase 1 - Effective April 1, 2023

CHW/CHR obtains certification

CHW/CHR is employed by a currently registered provider.

CHW/CHR delivers a covered service within their scope of practice.

Registered provider submits a claim for the covered service provided by the CHW/CHR.

Phase 2 - Anticipated effective date: February, 2024

CHW/CHR obtains certification

CHW/CHR is employed by a CHW/CHR organization.

CHW/CHR delivers a covered service within their scope of practice.

CHW organization submits a claim for the covered service provided by the CHW/CHR.

Medicaid Claim Reimbursement

CHW/CHR organization will enroll with AHCCCS through the AHCCCS provider enrollment process.
AHCCCS Next Steps

● Finalization of a CHW Policy 310-W
  ○ While this policy is in development, use the AHCCCS CHW FAQs as a point of reference.
  ○ Policy open for public comment here: https://ahcccs.commentinput.com/comment/search

● Development of a CHW Provider Type for Community Based Organizations (CBO)
  ○ Early 2024 release date
Member Exploitation and Fraudulent Billing
The Fraud Schemes

- Recruiting vulnerable tribal members into unlicensed, unregistered facilities
- Enrolling non-AI/AN members in the American Indian Health Plan
- Providing incentives (housing, food, money, alcohol, drugs)
- Billing fraudulently
- Shuffling members between companies
- Paying recruiters “per person”
- Billing for members who aren’t present (ghost billing)
- Billing for services that aren’t provided
- Overlapping use of codes, double billing
- Shell companies
- Multiple types of fraudulent providers
System Improvements to Stop Fraudulent Billing and Protect Members

- External Forensic Audit,
- Right-sizing reimbursement rates for abused codes,
- Additional documentation requirements,
- Requiring a prepayment review when abused codes exceed limits,
- Applying a high-risk screening to three provider types,
- 6-month provider enrollment moratorium on BH Outpatient Clinics, Integrated Clinics, NEMT, CSAs, and BHRFs,
- Require written confirmation by IHS/638 facilities to switch from MCO to AIHP, and
- Enhancing Tribal relations.
Protecting AHCCCS Members

Report Suspicious Activity and Provider Fraud

- Email: AHCCCSFraud@azahcccs.gov
- Online: www.azahcccs.gov/Fraud/ReportFraud/onlineform.aspx
- Phone: 602-417-4045 or 888-ITS-NOT-OK (888-487-6686)

Support for Affected Individuals and Families

- Call 2-1-1 (press 7)
Workforce Development
Addressing Workforce Needs Together

AHCCCS innovates to address workforce needs & improve patient outcomes.

And we need YOU!
A Few AHCCCS ARP Initiatives

**THE AMERICAN RESCUE PLAN ACT OF 2021**

- Program Award for HCBS Services Opens April 17
- Parent University Training Programs
- Attracting and Retaining the Workforce with Provider Incentive Payments
- Health Information Exchange DAP for Assisted Living and BH Outpatient
- Electronic Visit Verification
AZHealthcareCareers.org

Goal: Develop a healthcare talent pipeline and build a larger health care workforce

- Healthcare career planning and skills mapping platform
- Connects students and job seekers to health care employment, education and training opportunities.
- Developed with Pipeline AZ
- 2024 - 1% DAP for creating agency profile
Scholarships for Health Care Degrees and Certificates

Educational Scholarships

- **HB 2691 (BH Program Expansion)**
  - BH program scholarships at Maricopa Community Colleges and Northland Pioneer College
  - Scholarships available in BH Science
  - Two- and four-year degrees as well as non-degreed certificates

- **Career Education & Training (CET – Part 1)**
  - All Community College Districts
  - HCBS related Healthcare Degrees and Certificates
  - Post completion work requirement
Scholarships to Build the Healthcare Workforce

Maricopa Community College AHCCCS Scholarships
40+ eligible degree and certificate programs

Northland Pioneer College

Eastern Arizona College

Mohave Community College

Coconino Community College
Scholarships to Build the Health Care Workforce

Arizona Community College Districts with many workforce degrees and certificates

- Addictions/Substance Abuse
- Advanced Behavioral Health
- Allied Health
- Behavioral Health
- Community Healthcare
- Long-term Care
- Physical Therapist
- Psychology
- Nursing
- Social Work
- Speech Language Pathology

- Allied Health
- Assisted-Living Caregiver
- Behavioral Health Tech
- Basic Behavioral Health Sciences
- Certified Nursing Assistant
- Community Health Worker
- CPR and First Aide
- Direct Care Worker
- Home Health Aid
- Licensed Practical Nurses
- Patient Care Technician
- Social Services: Basic Social Services
Initial In-Service and Ongoing In-Service Programs

In-Service Training

Career Education & Training (con’t.)
- Colleges providing curriculum and program development assistance
- Focus on job/service-specific training
- Both BH and LTC jobs
- Working with stakeholder groups, college staff will:
  - Assess priority jobs
  - Determine competencies (core and applied)
  - Develop initial and ongoing in-service training program content
  - Content will be open source & available to all
HCBS Workforce Training with ATD

Workforce Development Training

- Contract with Association for Talent Development
- Two complementary “tracks”
  - Training and Facilitation Certificate
  - Integrated Talent Management
- Launched Jan. 2024
- Register at azahcccs.gov/AHCCCS/Initiatives/ARPA/HCBSCourses.html
Workforce Database/Decision Support System & and Evaluation Plan for WFD Initiatives

- **Workforce Data / Decision Support System**
  - Collect, model, report & recommend current and future workforce policy initiatives
  - 5 fundamentals of WFD
    - Workforce Demographics
    - Workforce Capacity
    - Worker Capability and Commitment
    - Workplace Connectivity & Culture
  - Status – Contracted with Myers & Stauffer

- **Evaluation Plan for WFD Initiatives**
  - Determining the ROI of implementing – or not implementing - WFD initiatives
Directed Payments

- Over **$500M** in provider directed payments in each of CYE 22, 23, and 24.
- **80%** to direct care staff (temporary increases in salary, wages, and/or stipends, including employee related expense costs)
- **20%** for costs associated with enhancing, expanding, and/or strengthening HCBS services such as recruitment of direct care workers.
Nursing Workforce Programs

$25M for Student Nurse Clinical Rotation & Licensed Nurse Training Program
  - Provides funding for additional clinical rotation slots for student nurses.

$2M for Licensed RN Transition to Practice Pilot Program
  - Funds hospitals to establish/expand training for new nurses.
Graduate Medical Education (GME) funds distributed to hospitals that provide training & education (internships, residencies and fellowships)

- Established in 1997
- Annual GME funding = $357,621,200
Opioid Services Locator
Opioid Use Disorder Services Locator

opioidservicelocator.azahcccs.gov/
AHCCCS Provider Requirement

**Opioid Use Disorder Real-Time Service Availability Locator:** The Real-Time Service Availability Locator is a service locator built to assist the public and others in locating real-time information about the availability of opioid use disorder services throughout the State.

Opioid Treatment Programs (OTPs), Office-Based Opioid Treatment (OBOTs), and Opioid Residential Treatment Program providers shall report the following data elements for initial reporting and update as frequently as the data field value changes.

1. **Agency and location specific information:**
   a. Agency name,
   b. Address,
   c. Phone,
   d. Website,
   e. Hours of operation,
   f. Logo,
   g. Counties served, and
   h. Contracted health plans.

2. **Populations served:**
   a. Gender, and
   b. Age.

3. **Services provided:**
   a. Residential,
   b. Methadone maintenance,
   c. Buprenorphine maintenance,
   d. Naltrexone maintenance,
   e. Peer support, and
   f. Psychosocial.

4. **Capacity (as applicable to provider type):**
   a. Available beds,
   b. Methadone maintenance,
   c. Buprenorphine maintenance, and
   d. Naltrexone maintenance.
Housing and Health Opportunities Program

Coming Oct. 2024
AHCCCS administers approximately $29 million per year to provide rent subsidies for almost 2,500 AHCCCS members with an SMI designation, and for a small number of high need individuals in need of behavioral health and/or substance use treatment.
AHCCCS administers the State SMI Housing Trust Fund (SMI HTF) of approximately $2 million per year, to expand housing capacity for persons with an SMI designation.

AHCCCS collaborates with local housing authorities, tax credit programs, and the HUD Continuum of Care (HUD CoC) to provide PSH capacity for an additional 1,500 members.
AHCCCS Housing & Health Opportunities (H2O) Demonstration Goals

- Increase positive health and wellbeing outcomes for target populations
- Reduce the cost of care for individuals successfully housed
- Reduce homelessness and maintain housing stability
AHCCCS H2O
Demonstration Strategies

**Strategy 1:** Strengthening Homeless Outreach and Service Engagement

**Strategy 2:** Securing Housing Funding for Members Who are Homeless or At-Risk of Homelessness

**Strategy 3:** Enhancing Medicaid Wraparound Services and Supports
Strategy 1: Strengthening Homeless Outreach & Service Engagement

➔ 1.1 Offer Outreach and Engagement Services
➔ 1.2 Enhance Screening and Discharge Coordination
➔ 1.3 Enhance and Support Data Collection
Strategy 2: Securing Housing Funding for Members Who are Homeless or At-Risk of Homelessness

➔ 2.1 Community Reintegration & Immediate Post Homeless Housing Services
➔ 2.2 Community Transitional Services
➔ 2.3 Eviction Prevention Services
Strategy 3: Enhancing Medicaid Wraparound Services and Supports

➔ 3.1 Home Modification Services

➔ 3.2 Pre-Tenancy and Tenancy Supportive Services
Waiver Implementation - H20

AHCCCS receives approval of the 1115 demonstration waiver

Develop rates, claiming protocols, provider types, policy, and contract language

Implement H20 Ongoing monitoring/reporting each quarter to CMS

AHCCCS and CMS develop an implementation plan

Educate and provide TA to members, providers and MCOs for go-live

As of today

**Deliverables are ongoing throughout the entire demonstration period.**
Targeted Investments 2.0
Targeted Investments 2.0

• $250 million authorized by CMS in October, 2022 as a part of 1115 waiver.

• Five year project providing resources to PCP and BH outpatient providers to support
  o Effective coordination with health care providers and community partners, and
  o Identify and reduce inequitable health outcomes of their patient population.

• Incentive payments based on meeting process-based milestones and performance measure targets.
Targeted Investments Programs

Initial Program

• 10/2016 - 9/2022
• 6 Years, $350 m.
• Reduce fragmentation of Behavioral Health (BH) and primary care (PCP)
• Increase provider integration, coordination
• Improve health outcomes for members with complex conditions

Renewal Program

• 10/2022 - 9/2027
• 5 Years, $250 m.
• Identify and address health inequities
• Implement Culturally and Linguistically Appropriate Service (CLAS) standards
• Identify and address health related social needs (HRSN)
• Project-specific initiatives
TI 2.0 New Initiatives

Health Equity - Address health inequities of patient population

Culturally Appropriate Services - CLAS standards

Health Related Social Needs

- Screening
- Coordination - CLRS
- Evaluation - needs analysis

PCP

- Postpartum Depression Screening
- Dental Varnish (Peds Only)

Justice

- Tobacco Cessation
- Early Reach-In
TI 2.0 News and Updates

Visit the Targeted Investments webpage:
www.azahcccs.gov/TargetedInvestments

Sign up for the Targeted Investments Newsletter:
Subscribe to TI News

Email the Targeted Investments Team Inbox:
Targeted.Investments@AZAHCCCS.gov
Crisis System
Behavioral Health Crisis System

• Crisis services are intensive time-limited services (24/72 hrs) intended to stabilize or prevent a potentially dangerous condition episode, or behavior.

• Services are available to all individuals (children & adults) in Arizona, irrespective of AHCCCS eligibility.
Crisis Services: Intensive time-limited services (24/72 hours) intended to stabilize or prevent a potentially dangerous condition.

Services are **available to all individuals** (adults and children) in Arizona, irrespective of AHCCCS eligibility.

Crisis Services are administered by the RBHAs in their GSAs (North, Central, South).
Crisis Services

Other services:

• Non-emergent transportation to crisis facilities,
• Crisis wrap-around services/referrals and follow-up,
• Notification of crisis engagement to assigned health plan/ensure coordination of care,
• Provide community information/education,
• Court Ordered Evaluation screening (as applicable),
• Peer-run warmlines,
• Collaborate with community partners (fire, police, emergency medical services, EDs, health plans, and providers of public health and safety services),
• Utilize peers/family support services, and
• Community/stakeholder training (Crisis Intervention Team (CIT), Mental Health First Aid).
Arizona’s Crisis Care Continuum

- Person in Crisis
- 911
- Crisis Line
- Mobile Crisis Team
- Crisis Facility

Decreased involvement of Law Enforcements and Jails, reduced utilization of Emergency Rooms and Inpatient Units.
Questions?