

**AHCCCS Differential Adjusted Payment (DAP)
CYE 2025 Preliminary Public Notice
Posted January 31, 2024**

Overview and Purpose

The AHCCCS administration is publishing preliminary decisions for Differential Adjusted Payment (DAP) strategies to be implemented in contract year October 1, 2024, through September 30, 2025 (CYE 2025) for select AHCCCS registered Arizona providers that meet agency established performance criteria. **Written comments may be sent to AHCCCSdap@azahcccs.gov and must be received no later than 5:00 p.m. on March 1, 2024.**

The DAP rates are to be implemented to ensure that payments are consistent with efficiency, economy, and quality of care and are sufficient to enlist enough providers so that care and services are available at least to the same extent that they are available to the general population in the geographic area. AHCCCS will implement DAP rates for the following providers:

1. [Hospitals Subject to APR-DRG Reimbursement, excluding Critical Access Hospitals,](#)
2. [Critical Access Hospitals,](#)
3. [Other Hospitals and Inpatient Facilities,](#)
4. [Freestanding Emergency Departments,](#)
5. [Indian Health Services \(IHS\) and 638 Tribally Owned and/or Operated Facilities,](#)
6. [Nursing Facilities,](#)
7. [Behavioral Health Outpatient Clinics and Integrated Clinics,](#)
8. [Physicians, Physician Assistants, and Registered Nurse Practitioners,](#)
9. [Physicians, Physician Assistants, and Registered Nurse Practitioners Specialty Types \(Obstetrics and Gynecology, Pediatrics, Cardiology, and Nephrology\),](#)
10. [Behavioral Health Providers,](#)
11. [Dental Providers,](#)
12. [Home and Community Based Services Providers,](#) and
13. [Crisis Providers](#)

The DAP rates in this notice for CYE 2025 will be effective for dates of service beginning October 1, 2024, through September 30, 2025. All noted providers (based on distinct Provider Types) will have the opportunity to be considered for meeting the criteria described further below. All of these requirements are at the discretion of AHCCCS. If a provider receives a DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specific date or fails to maintain its participation in the milestone activities, the provider will be ineligible to receive a DAP for dates of service from October 1, 2025, through September 30, 2026 (CYE 2026), if a DAP would be available at that time. **If a provider is receiving a DAP in CYE 2025 and cannot meet a milestone and/or cannot maintain its participation in milestone activities, the provider must immediately notify AHCCCS. This notification must be made before the milestone deadline and must state the reason the milestone cannot be met. When applicable, DAP participants are subject to audits, at the discretion of AHCCCS. Within 30 days of AHCCCS being notified of a missed milestone, becoming aware of the provider's failure to maintain participation, and/or determining that the**

provider has failed a DAP audit, AHCCCS will remove the participant's eligibility for the DAP, effective immediately and for the remainder of the year. If a provider receives a DAP increase for the entire CYE 2025 but it is determined subsequently that it did not meet the CYE 2025 milestones or failed to maintain its participation in the milestone activities in CYE 2025, the provider will be ineligible to receive the applicable DAP for CYE 2026, if a DAP is available at that time.

The DAP schedule represents a positive adjustment to the AHCCCS Fee-for-Service (FFS) rates. The purpose of the DAP is to distinguish providers committed to supporting designated actions that improve patients' care experience, improve members' health outcomes, and reduce the cost of care. The fee schedules will be limited to dates of service in CYE 2025.

Unless otherwise specified, AHCCCS managed care organizations (MCOs) will be required to pass through DAP increases to their contracted rates to match the corresponding AHCCCS FFS rate increase percentages. This increase is limited to Title XIX/XXI funding only. DAPs, with respect to the MCOs, are authorized under 42 CFR 438.6(c)(1)(iii), which provides states with the flexibility to implement provider payment initiatives, requires certain payment levels by the MCOs to providers, and provides specific services critical to ensuring timely access to high-quality care. AHCCCS implements DAP as a uniform percentage increase under this authority. The Centers for Medicare and Medicaid Services (CMS) must approve all 438.6(c) payments prior to annual implementation.

Under a given DAP initiative, the DAP increase may be applicable to all claims and encounters paid to a provider or may be limited to claims for a subset of select services. DAP increases are limited to Title XIX/XXI claims and encounters only. The DAP increases do not apply to payments made based on a cost-to-charge ratio. Additionally, DAP increases are applied to claims after all the reimbursement rules are applied, but before the "Lesser Of" logic is determined. **For providers to receive the DAP, the provider must include the value of the additional DAP increase when billing directly to AHCCCS or an MCO for services.** This notice describes how the DAP increase will be applied for each initiative.

Please note that funding for DAP rate increases is subject to the appropriation of State funds and budget constraints. Federal funding for DAP rate increases is contingent upon federal approval. All decisions or considerations included in this notice are therefore subject to the availability of funds and federal approval.

If a facility or a provider qualifies for one or more of the following DAPs, they will be added to a Qualifying Provider list that can be found on the AHCCCS website under Plans/Providers - Other Provider Programs and Initiatives - Differential Adjusted Payment (DAP). If there are any discrepancies or changes they must be submitted to AHCCSDAP@azahcccs.gov prior to the start of CYE 2025. **All AHCCCS IDs must be active by July 1, 2024, to be eligible for the DAP in CYE 2025.**

In relation to the following DAPs, the qualifying Health Information Exchange (HIE) organization is designated as Contexture.

1. Hospitals Subject to APR-DRG Reimbursement (Up to 2.5%)

Hospitals, Provider Type 02, are eligible for a DAP increase on all inpatient and outpatient services under the following criteria:

a. Health Information Exchange Participation (0.75%)

Hospitals that meet the following milestones are eligible to earn a 0.75% DAP.

Cohort 1: Hospitals who participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.

Hospitals must meet the following milestones in maintaining existing connections to the current HIE platform:

- ii. Milestone #2: No later than May 1, 2024, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing one or more HIE services, such as the HIE Portal, standard Admission, Discharge, Transfer (ADT) Alerts, standard Clinical Notifications, or an interface that delivers patient data into the hospital's Electronic Health Record (EHR) system.
- iii. Milestone #3: No later than May 31, 2024, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
- iv. Milestone #4: No later than May 31, 2024, the hospital must electronically submit the following patient identifiable information to the production environment of the HIE organization: ADT information, including data from the hospital emergency department (if applicable); laboratory and radiology information (if applicable); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. If a hospital is in the process of integrating a new EHR system, the hospital must notify the HIE organization and get the implementation timeline approved to continue meeting DAP requirements.

Hospitals must meet the following milestones in establishing new connections to ONE Platform, Contexture's new HIE platform:

- v. Milestone #5: No later than May 1, 2024, hospitals must complete their HIE Integration workbook in its entirety to connect data sender interfaces to ONE Platform.
- vi. Milestone #6: No later than May 1, 2024, the hospital must submit a signed Picture Archiving and Communication System (PACS) Statement of Work (SOW) to participate in sharing images via the HIE.
- vii. Milestone #7: No later than September 1, 2024, hospitals must launch the integration implementation project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The hospital is

- required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
- viii. Milestone #8: No later than December 30, 2024, the hospital must have a connection in place with the HIE and electronically submit the following patient information to the ONE Platform production environment: ADT information, including data from the hospital emergency department (if applicable); laboratory and radiology information (if applicable); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. The hospital is required to engage in interface testing as required by the HIE.
 - ix. Milestone #9: No later than February 28, 2025, the hospital must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
 - 3. Statement of Work (SOW) to send data to ONE Platform
 - x. Milestone #10: No later than May 1, 2025, the hospital must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
 - xi. Milestone #11: No later than July 30, 2025, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform HIE portal.

Cohort 2: Hospitals who have **not** participated in the DAP HIE program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
 - 1. To request a HIE Participation Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than October 1, 2024, the hospital must launch the implementation project to access patient health information via the HIE and complete the HIE portal training prior to access being granted.
- iii. Milestone #3: No later than December 30, 2024, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the HIE Portal.
- iv. Milestone #4: No later than February 28, 2025, the hospital must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal

3. Statement of Work (SOW) to send data to ONE Platform
 - v. Milestone #5: No later than May 1, 2025, the hospital must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
 - vi. Milestone #6: No later than July 30, 2025, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.
 - vii. Milestone #7: No later than August 1, 2025, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
 - viii. Milestone #8: No later than August 1, 2025, the hospital must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The hospital is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
 - ix. Milestone #9: No later than September 30, 2025, the hospital must electronically submit the following patient identifiable information to the production environment of the HIE organization: ADT information, including data from the hospital emergency department if the provider has an emergency department; laboratory and radiology information (if the provider has these services); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. The hospital is required to engage in interface testing as required by the HIE.

For any milestone that includes the electronic submission of patient information into the production environment, the information transferred to the HIE must be actual patient data; the transfer of test data does not fulfill these requirements. All electronic submissions must be received through standard HL7 document architecture. It must include all patient data, including behavioral health data and data covered by 42 CFR Part 2. Data is expected to be live throughout the year, any downtime will be reported.

b. Health Information Exchange: Data Quality Indicators (0.75%)

Hospitals that meet the following milestones are eligible to earn a 0.75% DAP.

Cohort 1: Hospitals who participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI) that the hospital requests to participate in the DAP.

- ii. Milestone #2: Within 30 days of sending data into the test environment but no later than December 1, 2024, the hospital must review the results of up to 217 parameters from the HIE Data Quality Report with the HIE organization, identifying the high-risk (red) and moderate risk (orange) scores for each parameter.
- iii. Milestone #3: Within 60 days of sending data into the test environment, but no later than December 1, 2024, the hospital must achieve an HIE Data Quality Report with 0 high-risk (red) test parameters prior to sending data into the HIE production environment.
- iv. Milestone #4: No later than December 1, 2024, the hospital must submit a written resolution plan to Contexture along with an expected timeline and detailed action plan for resolution to correct the moderate risk (orange) parameters on the HIE Data Quality Report.

For any milestone that includes the electronic submission of patient information into the production environment, the information transferred to the HIE must be actual patient data; the transfer of test data does not fulfill these requirements. All electronic submissions must be received through standard HL7 document architecture. It must include all patient data, including behavioral health data and data covered by 42 CFR Part 2. Data is expected to be live throughout the year, any downtime will be reported.

c. Social Determinants of Health Closed Loop Referral System (0.5%)

In relation to this DAP initiative only, the Social Determinants of Health Closed (SDOH) Loop Referral System is CommunityCares. Hospitals that meet the following milestones are eligible to earn a 0.5% DAP.

Cohort 1: Hospitals who participated in the DAP SDOH program in CYE 2023 or/and CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have an active CommunityCares Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than September 30, 2024, the hospital must participate in a post-live meeting with their assigned SDOH Advisor to discuss training needs, SDOH Screening and Referral workflows, implementation of the SDOH screening tool, and to define the CYE 2025 in-network screening/referral monthly goal.
- iii. Milestone #3: From October 1, 2024 through September 30, 2025, the hospital must participate in the utilization of CommunityCares by facilitating screenings/referrals. All screening/referrals entered into CommunityCares by the hospital will be counted towards the utilization requirements and tracked monthly. Based on the SDOH CYE 2024 monthly screenings/referrals average, the hospital's goal for CYE 2025 is to improve the submission of the monthly screenings/referrals average by 5%, and no less than a combination of 10 screenings/referrals per month per facility location, whichever is greater. This goal will be defined and discussed in the post-live meeting with the hospital's assigned SDOH Advisor.
- iv. Milestone #4: From October 1, 2024, through September 30, 2025, the hospital must meet with their SDOH Advisor quarterly to review progress on goals. If the goal is not being met,

the SDOH Advisor will assist the hospital in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Cohort 2: Hospitals who have **not** participated in the DAP SDOH program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a CommunityCares Access Agreement and a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
 1. To request a CommunityCares Access Agreement and DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than January 1, 2025, the hospital must have onboarding completed by working with the CommunityCares team to submit all requirements prior to gaining access to the system. The hospital must utilize CommunityCares by facilitating in-network screenings/referrals within CommunityCares per facility location.
- iii. Milestone #3: From October 1, 2024, through September 30, 2025, the hospital must meet with their SDOH Advisor quarterly to set a utilization goal and to review progress. If the goal is not being met, the SDOH Advisor will assist the hospital in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

d. Naloxone Distribution Program (0.5%)

Hospitals with an Emergency Department that meet the following milestones are eligible to earn a 0.5% DAP increase on all inpatient and outpatient services.

Cohort 1: Hospitals with an Emergency Department that participated in the NDP DAP in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a Letter of Intent (LOI) to AHCCCS to the following email address: AHCCCS DAP@azahcccs.gov, indicating that they will participate in the Naloxone Distribution Program (NDP). The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2024, the hospital must develop and submit a current facility policy that ensures hospitals are purchasing Naloxone through standard routine pharmacy ordering.
- iii. Milestone #3: No later than February 28, 2025, the hospital must submit a Naloxone Distribution Program Attestation to AHCCCS to the following email address: AHCCCS DAP@azahcccs.gov.

Cohort 2: Hospitals with an Emergency Department that have **not** participated in the NDP DAP in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a Letter of Intent (LOI) to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov, indicating that they will participate in the Naloxone Distribution Program (NDP). The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2024, the hospital must develop and submit a facility policy that meets AHCCCS/ADHS standards for a NDP.
- iii. Milestone #3: No later than January 1, 2025, the hospital must begin distribution of Naloxone to individuals at risk of overdose as identified through the facilities' policy.
- iv. Milestone #4: No later than February 28, 2025, the hospital must submit a Naloxone Distribution Program Attestation to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov.

2. Critical Access Hospitals (Up to 10.5%)

Hospitals designated as a Critical Access Hospital (CAH), Non-IHS/638 hospitals by March 15, 2024 are eligible for a DAP increase on all inpatient and outpatient services under the following criteria.

a. Health Information Exchange Participation (8.0%)

Hospitals that meet the following milestones are eligible to earn an 8.0% DAP.

Cohort 1: Hospitals who participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.

Hospitals must meet the following milestones in maintaining existing connections to the current HIE platform:

- ii. Milestone #2: No later than May 1, 2024, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing one or more HIE services, such as the HIE Portal, standard Admission, Discharge, Transfer (ADT) Alerts, standard Clinical Notifications, or an interface that delivers patient data into the facility's Electronic Health Record (EHR) system.
- iii. Milestone #3: No later than May 31, 2024, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
- iv. Milestone #4: No later than May 31, 2024, the hospital must electronically submit the following patient identifiable information to the production environment of the HIE organization: ADT information, including data from the hospital emergency department (if

applicable); laboratory and radiology information (if applicable); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. If a hospital is in the process of integrating a new EHR system, the hospital must notify the HIE organization and get the implementation timeline approved to continue meeting DAP requirements.

Hospitals must meet the following milestones in establishing new connections to ONE Platform, Contexture's new HIE platform:

- v. Milestone #5: No later than May 1, 2024, the hospital must complete their HIE Integration workbook in its entirety to connect data sender interfaces to ONE platform.
- vi. Milestone #6: No later than May 1, 2024, the hospital must submit a signed Picture Archiving and Communication System (PACS) Statement of Work (SOW) to participate in sharing images via the HIE.
- vii. Milestone #7: No later than September 1, 2024, the hospital must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The hospital is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
- viii. Milestone #8: No later than December 30, 2024, the hospital must have a connection in place with the HIE and electronically submit the following patient information to the ONE Platform production environment: ADT information, including data from the hospital emergency department (if applicable); laboratory and radiology information (if applicable); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. The hospital is required to engage in interface testing as required by the HIE.
- ix. Milestone #9: No later than February 28, 2025, the hospital must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
 - 3. Statement of Work (SOW) to send data to ONE Platform
- x. Milestone #10: No later than May 1, 2025, the hospital must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
- xi. Milestone #11: No later than July 30, 2025, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

Cohort 2: Hospitals who have **not** participated in the DAP HIE program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
 1. To request a HIE Participation Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than October 1, 2024, the hospital must launch the implementation project to access patient health information via the HIE and complete the HIE portal training prior to access being granted.
- iii. Milestone #3: No later than December 30, 2024, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the HIE Portal.
- iv. Milestone #4: No later than February 28, 2025, the hospital must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 1. HIE Participation Agreement for ONE Platform
 2. Statement of Work (SOW) to access the ONE Platform Portal
 3. Statement of Work (SOW) to send data to ONE Platform
- v. Milestone #5: No later than May 1, 2025, the hospital must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
- vi. Milestone #6: No later than July 30, 2025, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.
- vii. Milestone #7: No later than August 1, 2025, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
- viii. Milestone #8: No later than August 1, 2025, the hospital must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The hospital is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
- ix. Milestone #9: No later than September 30, 2025, the hospital must electronically submit the following patient identifiable information to the production environment of the HIE organization: ADT information, including data from the hospital emergency department if the provider has an emergency department; laboratory and radiology information (if the provider has these services); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. The hospital is required to engage in interface testing as required by the HIE.

For any milestone that includes the electronic submission of patient information into the production environment, the information transferred to the HIE must be actual patient data; the transfer of test data does not fulfill these requirements. All electronic submissions must be received through standard HL7 document architecture. It must include all patient data, including behavioral health data and data covered by 42 C.F.R. Part 2. Data is expected to be live throughout the year, any downtime will be reported.

b. Arizona Health Directives Registry (1.0%)

The AzHDR is in alignment with 2019 Arizona Senate Bill 1352 (enacted into Laws 2019, Ch. 314), giving healthcare providers the ability to have real-time access to patients' advance directives. Hospitals that meet the following milestones are eligible to earn a 1.0% DAP.

Cohort 1: Hospitals who participated in the DAP AzHDR program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization indicating Arizona Health Directives Registry (AzHDR) participation. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: From October 1, 2024 through September 30, 2025, the hospital must participate in the utilization of the AzHDR platform by facilitating at least 5 patient document uploads of advanced directives and 15 searches of advance directives per month per registered AHCCCS ID.

Cohort 2: Hospitals who have **not** participated in the DAP AzHDR program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization indicating Arizona Health Directives Registry (AzHDR) participation. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
 1. To request a HIE Participation Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than November 1, 2024, the hospital must submit the AzHDR Subscription Agreement to the HIE organization.
- iii. Milestone #3: No later than April 1, 2025, the hospital must have onboarding completed by working with AzHDR to submit user information to gain credentials to access AzHDR and complete training.
- iv. Milestone #4: No later than May 1, 2025, the hospital must participate in the utilization of the AzHDR platform by facilitating at least 5 searches/uploads of advance directives per month per AHCCCS ID.

c. Social Determinants of Health Closed Loop Referral System (1.0%)

In relation to this DAP initiative only, the Social Determinants of Health (SDOH) Closed Loop Referral System is CommunityCares. Hospitals that meet the following milestones are eligible to earn a 1.0% DAP.

Cohort 1: Hospitals who participated in the DAP SDOH program in CYE 2023 or/and CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have an active CommunityCares Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than September 30, 2024, the hospital must participate in a post live meeting with their assigned SDOH Advisor to discuss training needs, SDOH Screening and Referral workflows, implementation of the SDOH screening tool, and to define the CYE 2025 in-network screening/referral monthly goal.
- iii. Milestone #3: From October 1, 2024 through September 30, 2025, the hospital must participate in the utilization of CommunityCares by facilitating screenings/referrals. All screening/referrals entered into CommunityCares by the hospital will be counted towards the utilization requirements and tracked monthly. Based on the SDOH CYE 2024 monthly screenings/referrals average, the hospital's goal for CYE 2025 is to improve the submission of the monthly screenings/referrals average by 5%, and no less than a combination of 10 screenings/referrals per month per facility location, whichever is greater. This goal will be defined and discussed in the post-live meeting with the hospital's assigned SDOH Advisor.
- iv. Milestone #4: From October 1, 2024, through September 30, 2025, the hospital must meet with their SDOH Advisor quarterly to review progress on goals. If the goal is not being met, the SDOH Advisor will assist the hospital in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Cohort 2: Hospitals who have **not** participated in the DAP SDOH program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a CommunityCares Access Agreement and a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP, and the total number of patient visits per year.
 1. To request a CommunityCares Access Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than January 1, 2025, the hospital must have onboarding completed by working with the CommunityCares team to submit all requirements prior to gaining access to the system. The hospital must utilize CommunityCares by facilitating in-network screenings and referrals within CommunityCares per facility location.

- iii. Milestone #3: From October 1, 2024, through September 30, 2025, the hospital must meet with their SDOH Advisor quarterly to set a utilization goal and to review progress. If the goal is not being met, the SDOH Advisor will assist hospitals in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

d. Naloxone Distribution Program (0.5%)

Hospitals with an Emergency Department that meet the following milestones are eligible to earn a 0.5% DAP increase on all inpatient and outpatient services.

Cohort 1: Hospitals with an Emergency Department that participated in the NDP DAP in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a Letter of Intent (LOI) to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov, indicating that they will participate in the Naloxone Distribution Program (NDP). The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2024, the hospital must develop and submit a facility policy that ensures hospitals are purchasing Naloxone through standard routine pharmacy ordering.
- iii. Milestone #3: No later than February 28, 2025, the hospital must submit a Naloxone Distribution Program Attestation to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov.

Cohort 2: Hospitals with an Emergency Department that have **not** participated in the NDP DAP in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a Letter of Intent (LOI) to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov, indicating that they will participate in the Naloxone Distribution Program (NDP). The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI) , that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2024, the hospital must develop and submit a facility policy that meets AHCCCS/ADHS standards for a NDP.
- iii. Milestone #3: No later than January 1, 2025, the hospital must begin distribution of Naloxone to individuals at risk of overdose as identified through the facilities' policy.
- iv. Milestone #4: No later than February 28, 2025, the hospital must submit a Naloxone Distribution Program Attestation to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov.

3. Other Hospitals and Inpatient Facilities (Up to 4.0%)

Psychiatric Hospitals, with the exception of public hospitals (Provider Type 71), Secure Residential Treatment Centers (17+ beds) (Provider Type B1), Non-Secure Residential Treatment Centers (17+ beds) (Provider Type

B3), Subacute Facilities (1-16 Beds) (Provider Type B5), Subacute Facilities (17+ beds) (Provider Type B6), Rehabilitation Hospitals (Provider Type C4), and Long Term Acute Care Hospitals (Provider Type C4) are eligible for a DAP increase on all inpatient and outpatient services under the following criteria. For purposes of Section 3 of this Public Notice, other inpatient facilities will be referred to as hospitals.

a. Health Information Exchange Participation (0.75%)

Hospitals that meet the following milestones are eligible to earn a 0.75% DAP.

Cohort 1: Hospitals who participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.

Hospitals must meet the following milestones in maintaining existing connections to the current HIE platform:

- ii. Milestone #2: No later than May 1, 2024, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing one or more HIE services, such as the HIE Portal, standard Admission, Discharge, Transfer (ADT) Alerts, standard Clinical Notifications, or an interface that delivers patient data into the hospital's Electronic Health Record (EHR) system.
- iii. Milestone #3: No later than May 31, 2024, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
- iv. Milestone #4: No later than May 31, 2024, the hospital must electronically submit the following patient identifiable information to the production environment of the HIE organization: ADT information, including data from the hospital emergency department (if applicable), laboratory, and radiology information (if applicable), transcription, medication information, immunization data, and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. If a hospital is in the process of integrating a new EHR system, the hospital must notify the HIE organization and get the implementation timeline approved to continue meeting DAP requirements.

Hospitals must meet the following milestones in establishing new connections to the ONE Platform, Contexture's new HIE platform:

- v. Milestone #5: No later than May 1, 2024, hospitals must complete their HIE Integration workbook in its entirety to connect data sender interfaces to the ONE platform.

- vi. Milestone #6: No later than May 1, 2024, the hospital must submit a signed Picture Archiving and Communication System (PACS) Statement of Work (SOW) to participate in sharing images via the HIE.
- vii. Milestone #7: No later than September 1, 2024, the hospital must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The hospital is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
- viii. Milestone #8: No later than December 30, 2024, the hospital must have a connection in place with the HIE and electronically submit the following patient information to the ONE Platform production environment: ADT information, including data from the hospital emergency department (if applicable); laboratory and radiology information (if applicable); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. The hospital is required to engage in interface testing as required by the HIE.
- ix. Milestone #9: No later than February 28, 2025, the hospital must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
 - 3. Statement of Work (SOW) to send data to ONE Platform
- x. Milestone #10: No later than May 1, 2025, the hospital must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
- xi. Milestone #11: No later than July 30, 2025, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

Cohort 2: Hospitals who have **not** participated in the DAP HIE program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
 - 1. To request a HIE Participation Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than October 1, 2024, the hospital must launch the implementation project to access patient health information via the HIE and complete the HIE portal training prior to access being granted.

- iii. Milestone #3: No later than December 30, 2024, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the HIE Portal.
- iv. Milestone #4: No later than February 28, 2025, the hospital must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
 - 3. Statement of Work (SOW) to send data to ONE Platform
- v. Milestone #5: No later than May 1, 2025, the hospital must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
- vi. Milestone #6: No later than July 30, 2025, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.
- vii. Milestone #7: No later than August 1, 2025, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
- viii. Milestone #8: No later than August 1, 2025, the hospital must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The hospital is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
- ix. Milestone #9: No later than September 30, 2025, the hospital must electronically submit the following patient identifiable information to the production environment of the HIE organization: ADT information, including data from the hospital emergency department (if applicable); laboratory and radiology information (if applicable); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. The hospital is required to engage in interface testing as required by the HIE.

For any milestone that includes the electronic submission of patient information into the production environment, the information transferred to the HIE must be actual patient data; the transfer of test data does not fulfill these requirements. All electronic submissions must be received through standard HL7 document architecture. It must include all patient data, including behavioral health data and data covered by 42 CFR Part 2. Data is expected to be live throughout the year and downtime will be reported.

b. Health Information Exchange: Data Quality Indicators (0.75%)

Hospitals that meet the following milestones are eligible to earn a 0.75% DAP.

Cohort 1: Hospitals who participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI).
- ii. Milestone #2: Within 30 days of sending data into the test environment but no later than December 1, 2024, the hospital must review the results of up to 217 parameters from the HIE Data Quality Report with the HIE organization, identifying the high-risk (red) and moderate risk (orange) scores for each parameter.
- iii. Milestone #3: Within 60 days of sending data into the test environment, but no later than December 1, 2024, the hospital must achieve an HIE Data Quality Report with 0 high risk (red) test parameters prior to sending data into the HIE production environment.
- iv. Milestone #4: No later than December 1, 2024, the hospital must submit a written resolution plan to Contexture along with an expected timeline and detailed action plan for resolution to correct the moderate risk (orange) parameters on the HIE Data Quality Report.

c. Social Determinants of Health Closed Loop Referral System (0.5%)

In relation to this DAP initiative only, the Social Determinants of Health (SDOH) Closed Loop Referral System is CommunityCares. Hospitals that meet the following milestones are eligible to earn a 0.5% DAP.

Cohort 1: Hospitals who participated in the DAP SDOH program in CYE 2023 or/and CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have an active CommunityCares Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than September 30, 2024, the hospital must participate in a post live meeting with their assigned SDOH Advisor to discuss training needs, SDOH Screening and Referral workflows, implementation of the SDOH screening tool, and to define the CYE 2025 in-network screening/referral monthly goal.
- iii. Milestone #3: From October 1, 2024 through September 30, 2025, the hospital must participate in the utilization of CommunityCares by facilitating screenings/referrals. All screenings/referrals entered into CommunityCares by the hospital will be counted towards the utilization requirements and tracked monthly. Based on the SDOH CYE 2024 monthly screenings/referrals average, the hospital's goal for CYE 2025 is to improve the submission of the monthly screenings/referrals average by 5%, and no less than a combination of 10 screenings/referrals per month per facility location, whichever is greater.
- iv. Milestone #4: From October 1, 2024, through September 30, 2025, the hospital must meet with their SDOH Advisor quarterly to review progress on goals. If the goal is not being met, the SDOH Advisor will assist the hospital in completing a written document that identifies

barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Cohort 2: Hospitals who have **not** participated in the DAP SDOH program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a CommunityCares Access Agreement and a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP, and the total number of patient visits per year.
 1. To request a CommunityCares Access Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than January 1, 2025, the hospital must have onboarding completed by working with the CommunityCares team to submit all requirements prior to gaining access to the system. The hospital must utilize CommunityCares by facilitating in-network screenings and referrals within CommunityCares per facility location.
- iii. Milestone #3: From October 1, 2024, through September 30, 2025, the hospital must meet with their SDOH Advisor quarterly to set a utilization goal and to review progress. If the goal is not being met, the SDOH Advisor will assist the hospital in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

d. Long-Term Care Hospital Pressure Ulcers Performance Measure (2.0%)

Hospitals that meet or fall below the national average for the pressure ulcer performance measure will qualify for a 2.0% DAP increase. On March 15, 2024, AHCCCS will download the most current data from the Medicare Provider Data Catalog website for the rate of changes in skin integrity post-acute care: Pressure Ulcer/Injury. Facility results will be compared to the national average results for the measure. Hospitals that meet or fall below the national average percentage will qualify for the DAP increase.

e. Inpatient Rehabilitation Pressure Ulcers Performance Measure (2.0%)

Hospitals that meet or fall below the national average for the pressure ulcer performance measure will qualify for a 2.0% DAP increase. On March 15, 2024, AHCCCS will download the most current data from the Medicare Provider Data Catalog website for the rate of changes in skin integrity post-acute care: Pressure Ulcer/Injury. Facility results will be compared to the national average results for the measure. Hospitals that meet or fall below the national average percentage will qualify for the DAP increase.

4. Freestanding Emergency Departments (5.0%)

Freestanding Emergency Departments (Provider Type ED) are eligible for a DAP increase on all inpatient and outpatient services under the following criteria.

a. Naloxone Distribution Program (5.0%)

Freestanding Emergency Departments that meet the following milestones are eligible to earn a 5.0% DAP.

Cohort 1: Freestanding Emergency Departments that participated in the NDP DAP in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the facility must submit a Letter of Intent (LOI) to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov, indicating that they will participate in the Naloxone Distribution Program (NDP). The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) NPI(s), that the facility requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2024, the facility must develop and submit a facility policy that ensures facilities are purchasing Naloxone through standard routine pharmacy ordering.
- iii. Milestone #3: No later than February 28, 2025, the facility must submit a Naloxone Distribution Program Attestation to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov.

Cohort 2: Freestanding Emergency Departments that have **not** participated in the NDP DAP in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the facility must submit a Letter of Intent (LOI) to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov, indicating that they will participate in the Naloxone Distribution Program (NDP). The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the facility requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2024, the facility must develop and submit a facility policy that meets AHCCCS/ADHS standards for a NDP.
- iii. Milestone #3: No later than January 1, 2025, the facility must begin distribution of Naloxone to individuals at risk of overdose as identified through the facility's policy
- iv. Milestone #4: No later than February 28, 2025, the facility must submit a Naloxone Distribution Program Attestation to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov.

5. IHS and 638 Tribally Owned and/or Operated Facilities (up to 3.0%)

Indian Health Service and/or Tribally owned and/or operated hospitals (Provider Type 02), by March 15, 2024, are eligible for a DAP increase on all services under the following criteria.

a. Health Information Exchange Participation (1.5%)

Hospitals that meet the following milestones are eligible to earn a 1.5% DAP.

Cohort 1: Hospitals who participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.

Hospitals must meet the following milestones in maintaining existing connections to the current HIE platform:

- ii. Milestone #2: No later than May 1, 2024, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing one or more HIE services, such as the HIE Portal, standard Admission, Discharge, Transfer (ADT) Alerts, standard Clinical Notifications, or an interface that delivers patient data into the hospital's Electronic Health Record (EHR) system.
- iii. Milestone #3: No later than May 31, 2024, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
- iv. Milestone #4: No later than May 31, 2024, the hospital must electronically submit the following patient identifiable information to the production environment of the HIE organization: ADT information, including data from the hospital emergency department (if applicable); laboratory and radiology information (if applicable); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. If the hospital has ambulatory and/or behavioral health practices, then the facility must submit the following patient identifiable information to the production environment of the HIE: registration, encounter summary, and data elements defined by the HIE specific to individuals with a serious mental illness.
 1. If a hospital is in the process of integrating a new EHR system, the hospital must notify the HIE organization and get the implementation timeline approved to continue meeting DAP requirements.

Hospitals must meet the following milestones in establishing new connections to ONE Platform, Contexture's new HIE platform:

- v. Milestone #5: No later than May 1, 2024, the hospital must complete their HIE Integration workbook in its entirety to connect data sender interfaces to the ONE Platform.
- vi. Milestone #6: No later than September 1, 2024, the hospital must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The hospital is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
- vii. Milestone #7: No later than December 30, 2024, the hospital must have a connection in place with the HIE and electronically submit the following patient information to the ONE Platform production environment: ADT information, including data from the hospital

- emergency department (if applicable); laboratory and radiology information (if applicable); transcription; medication information; immunization data; and discharge summaries that include, at a minimum, discharge orders, discharge instructions, active medications, new prescriptions, active problem lists (diagnosis), treatments and procedures conducted during the stay, active allergies, and discharge destination. If the hospital has ambulatory and/or behavioral health practices, then the facility must submit the following patient identifiable information to the production environment of the HIE: registration, encounter summary, and data elements defined by the HIE specific to individuals with a serious mental illness.
- viii. Milestone #8: No later than February 28, 2025, the hospital must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
 - 3. Statement of Work (SOW) to send data to ONE Platform
 - ix. Milestone #9: No later than May 1, 2025, the hospital must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
 - x. Milestone #10: No later than July 30, 2025, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

Cohort 2: Hospitals who have **not** participated in the DAP HIE program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
 - 1. To request a HIE Participation Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than October 1, 2024, the hospital must launch the implementation project to access patient health information via the HIE and complete the HIE portal training prior to access being granted.
- iii. Milestone #3: No later than December 30, 2024, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the HIE Portal.
- iv. Milestone #4: No later than February 28, 2025, the hospital must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
- v. Milestone #5: No later than May 1, 2025, the hospital must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.

- vi. Milestone #6: No later than July 30, 2025, the hospital must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

For any milestone that includes the electronic submission of patient information in the production environment, the information transferred to the HIE must be actual patient data; the transfer of test data does not fulfill these requirements. All electronic submissions must be received through standard HL7 document architecture. It must include all patient data, including behavioral health data and data covered by 42 CFR Part 2. Data is expected to be live throughout the year. any downtime will be reported.

b. Arizona Health Directives Registry (AzHDR) (0.5%)

The AzHDR is in alignment with 2019 Arizona Senate Bill 1352 (enacted into Laws 2019, Ch. 314) giving healthcare providers the ability to have real-time access to patients' advance directives. Hospitals that meet the following milestones are eligible to earn a 0.5% DAP.

Cohort 1: Hospitals who participated in the DAP AzHDR program in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization indicating Arizona Health Directives Registry (AzHDR) participation. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: From October 1, 2024 through September 30, 2025, the hospital must participate in the utilization of the AzHDR platform by facilitating at least 5 patient document uploads of advanced directives and 15 searches of advance directives per month per registered AHCCCS ID.

Cohort 2: Hospitals who have **not** participated in the DAP AzHDR program CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) the HIE organization indicating Arizona Health Directives Registry (AzHDR) participation. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
 - 1. To request a HIE Participation Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than November 1, 2024, the hospital must complete the AzHDR Subscription Agreement
- iii. Milestone #3: No later than April 1, 2025, the hospital must have onboarding completed by working with AzHDR to submit user information to gain credentials to access AzHDR and complete training.

- iv. Milestone #4: No later than May 1, 2025, the hospital must participate in the utilization of the AzHDR platform by facilitating at least 5 searches/uploads of advance directives per month per registered AHCCCS ID.

c. Social Determinants of Health Closed Loop Referral System (0.5%)

In relation to this DAP initiative only, the Social Determinants of Health Closed Loop Referral System is CommunityCares. Hospitals that meet the following milestones are eligible to earn a 0.5% DAP.

Cohort 1: Hospitals who participated in the DAP SDOH program in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must have an active CommunityCares Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than September 30, 2024, the hospital must participate in a post live meeting with their assigned SDOH Advisor to discuss training needs, SDOH Screening and Referral workflows, implementation of the SDOH screening tool, and to define the CYE 2025 in-network screening/referral monthly goal.
- iii. Milestone #3: From October 1, 2024 through September 30, 2025, the hospital must participate in the utilization of CommunityCares by facilitating screenings/referrals. All screenings/referrals entered into CommunityCares by the hospital will be counted towards the utilization requirements and tracked monthly. Based on the SDOH CYE 2024 monthly screenings/ referrals average, the hospital's goal for CYE 2025 is to improve the submission of the monthly screenings/referrals average by 5%, and no less than a combination of 10 screenings/referrals per month per facility location, whichever is greater. This goal will be defined and discussed in the post-live meeting with the hospital's assigned SDOH Advisor.
- iv. Milestone #4: From October 1, 2024, through September 30, 2025, the hospital must meet with their SDOH Advisor quarterly to review progress on goals. If the goal is not being met, the SDOH Advisor will assist the hospital in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Cohort 2: Hospitals who have **not** participated in the DAP SDOH program in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a CommunityCares Access Agreement and a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP, and the total number of patient visits per year.
 - 1. To request a CommunityCares Access Agreement and a DAP SOW, email DAP@contexture.org.

- ii. Milestone #2: No later than January 1, 2025, the hospital must have onboarding completed by working with the CommunityCares team to submit all requirements prior to gaining access to the system. The hospital must utilize CommunityCares by facilitating in-network screenings and referrals within CommunityCares per facility location.
- iii. Milestone #3: From October 1, 2024, through September 30, 2025, the hospital must meet with their SDOH Advisor quarterly to set a utilization goal and to review progress. If the goal is not being met, the SDOH Advisor will assist the hospital in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

d. Naloxone Distribution Program (0.5%)

Hospitals with an Emergency Department that meet the following milestones are eligible to earn a 0.5% DAP increase on all inpatient and outpatient services.

Cohort 1: Hospitals with an Emergency Department that participated in the NDP DAP in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a Letter of Intent (LOI) to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov, indicating that they will participate in the Naloxone Distribution Program (NDP). The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2024, the hospital must develop and submit a facility policy that ensures hospitals are purchasing Naloxone through standard routine pharmacy ordering.
- iii. Milestone #3: No later than February 28, 2025, the hospital must submit a Naloxone Distribution Program Attestation to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov.

Cohort 2: Hospitals with an Emergency Department that have **not** participated in the NDP DAP in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the hospital must submit a Letter of Intent (LOI) to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov, indicating that they will participate in the Naloxone Distribution Program (NDP). The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2024, the hospital must develop and submit a facility policy that meets AHCCCS/ADHS standards for a NDP.
- iii. Milestone #3: No later than January 1, 2025, the hospital must begin distribution of Naloxone to individuals at risk of overdose as identified through the facilities' policy.
- iv. Milestone #4: No later than February 28, 2025, the hospital must submit a Naloxone Distribution Program Attestation to AHCCCS to the following email address: AHCCSDAP@azahcccs.gov.

6. Nursing Facilities (Up to 2.0%)

Nursing facilities (Provider Type 22), are eligible for a DAP increase under the following criteria.

a. Health Information Exchange Participation (0.5%)

Nursing facilities that meet the following milestones are eligible to earn a 0.5% DAP.

Cohort 1: Facilities that participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the facility must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the facility requests to participate in the DAP.

Facilities must meet the following milestones in maintaining existing connections to the current HIE platform:

- ii. Milestone #2: No later than May 1, 2024, the facility must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing one or more HIE services, such as the HIE Portal, standard Admission, Discharge, Transfer (ADT) Alerts, standard Clinical Notifications, or an interface that delivers patient data into the facility's Electronic Health Record (EHR) system.
- iii. Milestone #3: No later than May 31, 2024, facilities that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
- iv. Milestone #4: No later than May 31, 2024, the facility must electronically submit the following patient identifiable information to the production environment of the HIE organization: ADT information from within the nursing facility; continuity of care documents reflecting a summary of care within the nursing facility including (if applicable): laboratory and radiology information; medication information; immunization data; active problem lists (diagnosis); social history; treatments and procedures conducted during the stay; advance directives; active allergies; and basic patient demographic data including assigned provider, emergency contact and payer. If a facility is in the process of integrating a new EHR system, the facility must notify the HIE organization and get the implementation timeline approved to continue meeting DAP requirements.

Facilities must meet the following milestones in establishing new connections to the ONE Platform, Contexture's new HIE platform:

- v. Milestone #5: No later than May 1, 2024, the facility must complete their HIE Integration workbook in its entirety to connect data sender interfaces to the ONE platform.
- vi. Milestone #6: No later than September 1, 2024, the facility must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically

- submit test patient information to the ONE Platform test environment. The facility is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
- vii. Milestone #7: No later than December 30, 2024, the facility must have a connection in place with the HIE and electronically submit the following patient information to the ONE Platform production environment: ADT information from within the nursing facility; continuity of care documents reflecting a summary of care within the nursing facility including (if applicable): laboratory and radiology information; medication information; immunization data; active problem lists (diagnosis); social history; treatments and procedures conducted during the stay; advance directives; active allergies; and basic patient demographic data including assigned provider, emergency contact and payer. The facility is required to engage in interface testing as required by the HIE.
 - viii. Milestone #8: No later than February 28, 2025, the facility must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
 - 3. Statement of Work (SOW) to send data to ONE Platform
 - ix. Milestone #9: No later than May 1, 2025, the facility must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
 - x. Milestone #10: No later than July 30, 2025, the facility must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

Cohort 2: Facilities that have **not** participated in the DAP HIE program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the facility must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the facility requests to participate in the DAP.
 - 1. To request a HIE Participation Agreement and a DAP SOW and email DAP@contexture.org.
- ii. Milestone #2: No later than October 1, 2024, the facility must launch the implementation project to access patient health information via the HIE and complete the HIE portal training prior to access being granted.
- iii. Milestone #3: No later than December 30, 2024, the facility must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the HIE Portal.
- iv. Milestone #4: No later than February 28, 2025, the facility must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform

2. Statement of Work (SOW) to access the ONE Platform Portal
 3. Statement of Work (SOW) to send data to ONE Platform
- v. Milestone #5: No later than May 1, 2025, the facility must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
 - vi. Milestone #6: No later than July 30, 2025, the facility must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.
 - vii. Milestone #7: No later than August 1, 2025, facilities that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
 - viii. Milestone #8: No later than August 1, 2025, the facility must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The hospital is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
 - ix. Milestone #9: No later than September 30, 2025, the facility must electronically submit the following patient identifiable information to the production environment of the HIE organization: ADT information from within the nursing facility; continuity of care documents reflecting a summary of care within the nursing facility including (if applicable): laboratory and radiology information; medication information; immunization data; active problem lists (diagnosis); social history; treatments and procedures conducted during the stay; advance directives; active allergies; and basic patient demographic data including assigned provider, emergency contact and payer. The facility is required to engage in interface testing as required by the HIE.

For any milestone that includes the electronic submission of patient information in the production environment, the information transferred to the HIE must be actual patient data; the transfer of test data does not fulfill these requirements. All electronic submissions must be received through standard HL7 or CCD document architecture. It must include all patient data, including behavioral health data and data covered by 42 C.F.R. Part 2. Data is expected to be live throughout the year and any downtime will be reported.

b. Arizona Health Directives Registry (AzHDR) (0.5%)

The AzHDR is in alignment with 2019 Arizona Senate Bill 1352 (enacted into Laws 2019, Ch. 314) giving healthcare providers the ability to have real-time access to patient's advance directives. Nursing facilities that meet the following milestones are eligible to earn a 0.5% DAP.

Cohort 1: Facilities who participated in the DAP AzHDR program in CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the facility must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization indicating Arizona

Health Directives Registry (AzHDR) participation. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the facility requests to participate in the DAP.

- ii. Milestone #2: From October 1, 2024 through September 30, 2025, the facility must participate in the utilization of the AzHDR platform by facilitating at least 5 patient document uploads of advanced directives and 15 searches of advance directives per month per registered AHCCCS ID.

Cohort 2: Facilities who have **not** participated in the DAP AzHDR program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the facility must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization indicating Arizona Health Directives Registry (AzHDR) participation. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the facility requests to participate in the DAP.
 - 1. To request a HIE Participation Agreement and a DAP SOW email DAP@contexture.org.
- ii. Milestone #2: No later than November 1, 2024, the facility must complete the AzHDR Subscription Agreement.
- iii. Milestone #3: No later than April 1, 2025, the facility must have onboarding completed by working with AzHDR to submit user information to gain credentials to access AzHDR and complete training.
- iv. Milestone #4: No later than May 1, 2025, the facility must participate in the utilization of the AzHDR platform by facilitating at least 5 searches/uploads of advance directives per month per AHCCCS ID.

If a nursing facility has already achieved one or more of the CYE 2025 milestones as of April 1, 2024, the DAP SOW must include a commitment by the nursing facility to maintain its participation in those milestone activities for the period of April 1, 2024, through September 30, 2025.

c. Pressure Ulcer Performance Measure (1.0%)

Nursing facilities that meet or fall below the statewide average percentage for the Pressure Ulcer performance measure will qualify for a 1.0% DAP increase. On March 15, 2024, AHCCCS will download the most current data from the Medicare Provider Data Catalog website. Facility results will be compared to the Arizona average results for the measure. Facilities with percentages less than or equal to the statewide average score will qualify for the DAP increase.

7. Behavioral Health Outpatient Clinics and Integrated Clinics (Up to 8.5%)

Behavioral Health Outpatient Clinics (Provider Type 77) and Integrated Clinics (Provider Type IC), are eligible for a DAP increase on all services billed on a CMS 1500 Form under the following criteria.

a. Health Information Exchange Participation (1.0%)

Clinics that meet the following milestones and performance criteria are eligible to earn up to a 1.0% DAP.

Cohort 1: Clinics who participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the clinic must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each provider, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the clinic requests to participate in the DAP.

Clinics must meet the following milestones in maintaining existing connections to the current HIE platform:

- ii. Milestone #2: No later than May 1, 2024, the clinic must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing one or more HIE services, such as the HIE Portal, standard Admission, Discharge, Transfer (ADT) Alerts, standard Clinical Notifications, or an interface that delivers patient data into the clinic's Electronic Health Record (EHR) system.
- iii. Milestone #3: No later than May 31, 2024, clinics that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
- iv. Milestone #4: No later than May 31, 2024, the clinic must electronically submit patient identifiable information to the production environment of the HIE organization, including encounter information and an encounter summary as well as data elements defined by the HIE organization, specific to individuals with a serious mental illness. If a clinic is in the process of integrating a new EHR system, the clinic must notify the HIE organization and get the implementation timeline approved to continue meeting DAP requirements.

Clinics must meet the following milestones in establishing new connections to the ONE Platform, Contexture's new HIE platform:

- v. Milestone #5: No later than May 1, 2024, the clinics must complete their HIE Integration workbook in its entirety to connect data sender interfaces to the ONE platform.
- vi. Milestone #6: No later than September 1, 2024, the clinic must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The clinic is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
- vii. Milestone #7: No later than December 30, 2024, the clinic must have a connection in place with the HIE and electronically submit the following patient information to the ONE Platform production environment: including encounter information and an encounter summary as

- well as data elements defined by the HIE organization, specific to individuals with a serious mental illness. The clinic is required to engage in interface testing as required by the HIE.
- viii. Milestone #8: No later than February 28, 2025, the clinic must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
 - 3. Statement of Work (SOW) to send data to ONE Platform
 - ix. Milestone #9: No later than May 1, 2025, the clinic must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
 - x. Milestone #10: No later than July 30, 2025, the clinic must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

Cohort 2: Clinics who have **not** participated in the DAP HIE program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the clinic must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the clinic requests to participate in the DAP.
 - 1. To request a HIE Participation Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than October 1, 2024, the clinic must launch the implementation project to access patient health information via the HIE and complete the HIE portal training prior to access being granted.
- iii. Milestone #3: No later than December 30, 2024, the clinic must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the HIE Portal.
- iv. Milestone #4: No later than February 28, 2025, the clinic must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
 - 3. Statement of Work (SOW) to send data to ONE Platform
- v. Milestone #5: No later than May 1, 2025, the clinic must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
- vi. Milestone #6: No later than July 30, 2025, the clinic must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.
- vii. Milestone #7: No later than August 1, 2025, the clinic that utilizes external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE

- organization, if required by the external reference lab, to have all outsourced lab test results flow to the HIE on their behalf.
- viii. Milestone #8: No later than August 1, 2025, the clinic must launch the integration implementations project, have a VPN connection in place with the HIE, and electronically submit test patient information to the ONE Platform test environment. The hospital is required to engage in interface testing as required by the HIE and focus on improving data integrity in the test environment.
 - ix. Milestone #9: No later than September 30, 2025, the clinic must electronically submit the following patient identifiable information to the production environment of the HIE organization: including encounter information and an encounter summary as well as data elements defined by the HIE organization, specific to individuals with a serious mental illness. The clinic is required to engage in interface testing as required by the HIE.

For any milestone that includes the electronic submission of patient information into the production environment, the information transferred to the HIE must be actual patient data; the transfer of test data does not fulfill these requirements. All electronic submissions must be received through standard HL7 or CCD document architecture. It must include all patient data, including behavioral health data and data covered by 42 CFR Part 2. Data is expected to be live throughout the year, any downtime will be reported.

b. Social Determinants of Health Closed Loop Referral System (1.0%)

In relation to this DAP initiative only, the Social Determinants of Health (SDOH) Closed Loop Referral System is CommunityCares. Clinics that meet the following milestones are eligible to earn a 1.0% DAP.

Cohort 1: Clinics who participated in the DAP SDOH program in CYE 2023 or/and CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the clinic must have an active CommunityCares Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the clinic requests to participate in the DAP.
- ii. Milestone #2: No later than September 30, 2024, the clinic must participate in a post live meeting with their assigned SDOH Advisor to discuss training needs, SDOH Screening and Referral workflows, implementation of the SDOH screening tool, and to define the CYE 2025 in-network screening/referral monthly goal.
- iii. Milestone #3: From October 1, 2024 through September 30, 2025, the clinic must participate in the utilization of CommunityCares by facilitating screenings/referrals. All screening/referrals entered into CommunityCares by the clinic will be counted towards the utilization requirements and tracked monthly. Based on the SDOH CYE 2024 monthly screenings/referral average, the clinic's goal for CYE 2025 is to improve the submission of the monthly screenings/referrals average by 5%, and no less than a combination of 10 screenings/referrals per month per facility location, whichever is greater. The goal will be defined and discussed in the post-live meeting with the clinic's assigned SDOH Advisor.

Milestone #4: From October 1, 2024, through September 30, 2025, the clinic must meet with their SDOH Advisor quarterly to review progress on goals. If the goal is not being met, the SDOH Advisor will assist the clinic in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Cohort 2: Clinics who have **not** participated in the DAP SDOH program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the clinic must submit a CommunityCares Access Agreement and a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI) that the clinic requests to participate in the DAP, and the total number of patient visits per year.
 1. To request a CommunityCares Access Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than January 1, 2025, the clinic must have onboarding completed by working with the CommunityCares team to submit all requirements prior to gaining access to the system. The clinic must utilize CommunityCares by facilitating in-network screenings and referrals within CommunityCares per facility location.
- iii. Milestone #3: From October 1, 2024 through September 30, 2025, the clinic must meet with their SDOH Advisor quarterly to set a utilization goal and to review progress. If the goal is not being met, the SDOH Advisor will assist the clinic in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan). If a clinic has achieved one or more of the CYE 2025 milestones as of April 1, 2024, the DAP SOW must include a commitment by the clinic to maintain its participation in those milestone activities for the period of April 1, 2024, through September 30, 2025.

c. Provision of Services to Members in a Difficult to Access Location (3.0%)

A clinic that meets the criteria for the provision of services to members in a difficult to access location that cannot be accessed by ground transportation due to the nature and extent of the surrounding Grand Canyon terrain will qualify for a 3.0% DAP on all claims. Provision of services is defined as a provider that has a MOA or MOU with a tribal government to access tribal territory to provide behavioral health services to members located in the Grand Canyon. The signed MOA or MOU must be in place by April 1, 2024, and submitted to AHCCCS by email to: AHCCCS DAP@azahcccs.gov.

On April 15, 2024, AHCCCS will review such documents as have been submitted by each provider to determine providers that meet this requirement and will qualify for this DAP increase.

d. American Society of Addiction Medicine CONTINUUM Software Integration (0.5%)

Clinics that bill for behavioral health assessments utilizing the American Society of Addiction Medicine (ASAM) CONTINUUM for Substance Use Disorder (SUD) assessments will be eligible for a

0.5% DAP by integrating or maintaining integration of the ASAM CONTINUUM in their Electronic Health Record (EHR) system.

Cohort 1: Clinics who have integrated into the ASAM CONTINUUM software and participated in the ASAM CONTINUUM DAP requirements in CYE 2024.

- i. Milestone #1: By April 1, 2024, the provider must submit an LOI and receipts for ASAM CONTINUUM subscription costs to AHCCCS, to the following email address, AHCCSDAP@azahcccs.gov, indicating that they agree to maintain integration with the ASAM CONTINUUM with their EHR system and will utilize the ASAM CONTINUUM assessment for SUD assessments. The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the clinic requests to participate in the DAP. It must also include a project contact for the clinic, the EHR vendor name, and a contact for the EHR.
- ii. Milestone #2: From October 1, 2024 through August 31, 2025, the provider must participate in the utilization of ASAM CONTINUUM assessment by facilitating at least 90% of all SUD assessments. Only completed SUD assessments utilizing the ASAM CONTINUUM and U9 modifier will count toward the clinic's total.

Cohort 2: Clinics who have **not** participated in the ASAM CONTINUUM DAP requirements in CYE2024.

- i. Milestone #1: No later than April 1, 2024, the provider must submit an LOI to AHCCCS, to the following email address, AHCCSDAP@azahcccs.gov, indicating that they agree to complete integration with the ASAM CONTINUUM with their EHR system and will utilize the ASAM CONTINUUM assessment for all SUD assessments. The LOI must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the clinic requests to participate in the DAP. It must also include a project contact for the clinic, the EHR vendor name, and a contact for the EHR.
- ii. Milestone #2: No later than October 1, 2024, the provider must submit receipts to AHCCCS indicating EHR integration and ASAM CONTINUUM subscription costs to the following email address, AHCCSDAP@azahcccs.gov.
- iii. Milestone #3: From October 1, 2024 through August 31, 2025, the provider must participate in the utilization of ASAM CONTINUUM assessment by facilitating at least 80% of all SUD assessments. Only completed SUD assessments utilizing the ASAM CONTINUUM and U9 modifier will count toward the clinic's total.

8. Physicians, Physician Assistants, and Registered Nurse Practitioners (Up to 1.5%)

Physicians, Physician Assistants, and Registered Nurse Practitioners (Provider Types 08, 18, 19, and 31) are eligible for a DAP increase on all services billed on CMS 1500 Form under the following criteria.

a. Social Determinants of Health Closed Loop Referral System (1.0%)

In relation to this DAP initiative only, the Social Determinants of Health (SDOH) Closed Loop Referral System is CommunityCares. Providers that meet the following milestones are eligible to earn a 1.0% DAP.

Cohort 1: Providers who participated in the DAP SDOH program in CYE 2023 or/and CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the provider must have an active CommunityCares Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP.
- ii. Milestone #2: No later than September 30, 2024, the provider must participate in a post live meeting with their assigned SDOH Advisor to discuss training needs, SDOH Screening and Referral workflows, implementation of the SDOH screening tool, and to define the CYE 2025 in-network screening/referral monthly goal.
- iii. Milestone #3: From October 1, 2024 through September 30, 2025, the provider must participate in the utilization of CommunityCares by facilitating screenings/referrals. All screening/referrals entered into CommunityCares by the provider will be counted towards the utilization requirements and tracked monthly. Based on the SDOH CYE 2024 monthly screenings/referrals average, the provider's goal for CYE 2025 is to improve the submission of the monthly screenings/referrals average by 5%, and no less than a combination of 10 screenings/referrals per month per facility location, whichever is greater. The goal will be defined and discussed in the post-live meeting with the provider's assigned SDOH Advisor.
- iv. Milestone #4: From October 1, 2024, through September 30, 2025, the provider must meet with their SDOH Advisor quarterly to review progress on goals. If the goal is not being met, the SDOH Advisor will assist the provider in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Cohort 2: Providers who have **not** participated in the DAP SDOH program in DAP CYE 2023 or 2024.

- i. Milestone #1: No later than April 1, 2024, the provider must submit a CommunityCares Access Agreement and a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP, and the total number of patient visits per year.
 1. To request a CommunityCares Access Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than January 1, 2025, the provider must have onboarding completed by working with the CommunityCares team to submit all requirements prior to gaining access to the system. The provider must utilize CommunityCares by facilitating in-network screenings and referrals within CommunityCares per facility location.
- iii. Milestone #3: From October 1, 2024, through September 30, 2025, the provider must meet with their SDOH Advisor quarterly to set a utilization goal and to review progress. If the goal

is not being met, the SDOH Advisor will assist the provider in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Due to operational issues related to contracting arrangements with entities rather than individual practitioners, AHCCCS' MCOs may pay the DAP in a manner other than on an individual claim basis but the DAP must be paid on at least a quarterly basis. In the event an expected quarterly payment to an entity is less than \$25, the MCOs will be permitted to delay payment to the entity until the earlier occurs: payments due of at least \$25 or final quarterly payment for CYE 2025.

d. American Society of Addiction Medicine (ASAM) CONTINUUM Software Integration (0.5%)

Providers that bill for behavioral health assessments utilizing the American Society of Addiction Medicine (ASAM) CONTINUUM for Substance Use Disorder (SUD) assessments will be eligible for a 0.5% DAP by integrating or maintaining integration of the ASAM CONTINUUM in their Electronic Health Record (EHR) system.

Cohort 1: Providers who have integrated into the ASAM CONTINUUM software and participated in the ASAM CONTINUUM DAP requirements in CYE 2024.

- i. Milestone #1: By April 1, 2024, the provider must submit an LOI and receipts for ASAM CONTINUUM subscription costs to AHCCCS, to the following email address, AHCCSDAP@azahcccs.gov, indicating that they agree to maintain integration with the ASAM CONTINUUM with their EHR system and will utilize the ASAM CONTINUUM assessment for SUD assessments. The LOI must contain each provider, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that requests to participate in the DAP. It must also include a project contact for the clinic, the EHR vendor name, and a contact for the EHR.
- ii. Milestone #2: From October 1, 2024 through August 31, 2025, the provider must participate in the utilization of ASAM CONTINUUM assessment by facilitating at least 90% of all SUD assessments. Only completed SUD assessments utilizing the ASAM CONTINUUM and U9 modifier will count toward the provider's total.

Cohort 2: Providers who have **not** participated in the ASAM CONTINUUM DAP requirements in CYE 2024

- i. Milestone #1: No later than April 1, 2024, the provider must submit an LOI to AHCCCS, to the following email address, AHCCSDAP@azahcccs.gov, indicating that they agree to complete integration with the ASAM CONTINUUM with their EHR system and will utilize the ASAM CONTINUUM assessment for all SUD assessments. The LOI must contain each provider, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that requests to participate in the DAP. It must also include a project contact for the clinic, the EHR vendor name, and a contact for the EHR.

- ii. Milestone #2: No later than October 1, 2024, the provider must submit receipts to AHCCCS indicating EHR integration and ASAM CONTINUUM subscription costs to the following email address, AHCCSDAP@azahcccs.gov.
- iii. Milestone #3: From October 1, 2024 through August 31, 2025, the provider must participate in the utilization of ASAM CONTINUUM assessment by facilitating at least 80% of all SUD assessments. Only completed SUD assessments utilizing the ASAM CONTINUUM and U9 modifier will count toward the provider's total.

Due to operational issues related to contracting arrangements with entities rather than individual practitioners, AHCCCS' MCOs may pay the DAP in a manner other than on an individual claim basis but the DAP must be paid on at least a quarterly basis. In the event an expected quarterly payment to an entity is less than \$25, the MCOs will be permitted to delay payment to the entity until the earlier occurs: payments due of at least \$25 or final quarterly payment for CYE 2025.

9. Physicians, Physician Assistants, and Registered Nurse Practitioners Specialty Types (Obstetrics and Gynecology, Pediatrics, Cardiology, and Nephrology) (1.0%)

Physicians, Physician Assistants, and Registered Nurse Practitioners (Provider Types 08, 18, 19, and 31) specialty types of obstetrics and gynecology, pediatrics, cardiology, and nephrology are eligible for a DAP increase on all services billed on a CMS 1500 Form under the following criteria.

a. Health Information Exchange Participation (1.0%)

Providers that meet the following milestones are eligible to earn a 1.0% DAP.

Cohort 1: Providers who participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the provider must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each qualifying rendering provider, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP.
- ii. Milestone #2: No later than May 1, 2024, the provider must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing one or more HIE services, such as the HIE Portal, standard Admission, Discharge, Transfer (ADT) Alerts, standard Clinical Notifications, or an interface that delivers patient data into the provider's Electronic Health Record (EHR) system.
- iii. Milestone #3: No later than February 28, 2025, the provider must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal

- iv. Milestone #4: No later than May 1, 2025, the provider must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
- v. Milestone #5: No later than July 30, 2025, the provider must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

Cohort 2: Providers who have **not** participated in the DAP HIE program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the provider must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each qualifying rendering provider, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP.
 - 1. To request a HIE Participation Agreement and a DAP SOW, send an email to DAP@contexture.org
- ii. Milestone #2: No later than October 1, 2024, the provider must launch the implementation project to access patient health information via the HIE and complete the HIE portal training prior to access being granted.
- iii. Milestone #3: No later than December 30, 2024, the provider must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the HIE Portal.
- iv. Milestone #4: No later than February 28, 2025, the provider must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
- v. Milestone #5: No later than May 1, 2025, the provider must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
- vi. Milestone #6: No later than July 30, 2025, the provider must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

Due to operational issues related to contracting arrangements with entities rather than individual practitioners, AHCCCS' MCOs may pay the DAP in a manner other than on an individual claim basis but the DAP must be paid on at least a quarterly basis. In the event an expected quarterly payment to an entity is less than \$25, the MCOs will be permitted to delay payment to the entity until the earlier occurs: payments due of at least \$25 or final quarterly payment for CYE 2025.

10. Behavioral Health Providers (1.0%)

Community Service Agencies (A3), Independent Substance Abuse Counselors (A4), Behavioral Health Therapeutic Homes (A5), and Rural Substance Abuse Transitional Agencies (A6) are eligible for a DAP

increase on all services billed on CMS 1500 Form under the following criteria.

a. Social Determinants of Health Closed Loop Referral System (1.0%)

In relation to this DAP initiative only, the Social Determinants of Health (SDOH) Closed Loop Referral System is CommunityCares. Providers that meet the following milestones are eligible to earn a 1.0% DAP.

Cohort 1: Providers who participated in the DAP SDOH program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the provider must have an active CommunityCares Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP.
- ii. Milestone #2: No later than September 30, 2024, the provider must participate in a post-live meeting with their assigned SDOH Advisor to discuss training needs, SDOH Screening and Referral workflows, implementation of the SDOH screening tool, and to define the CYE 2025 in-network screening/referral monthly goal.
- iii. Milestone #3: From October 1, 2024 through September 30, 2025, the provider must participate in the utilization of CommunityCares by facilitating screenings/referrals. All screenings/referrals entered into CommunityCares by the provider will be counted towards the utilization requirements and tracked monthly. Based on the SDOH CYE 2024 monthly screenings/referrals average, the provider's goal for CYE 2025 is to improve the submission of the monthly screenings/referrals average by 5%, and no less than a combination of 10 screenings/referrals per month per facility location, whichever is greater. This goal will be defined and discussed in the post-live meeting with the provider's assigned SDOH Advisor.
- iv. Milestone #4: From October 1, 2024, through September 30, 2025, the provider must meet with their SDOH Advisor quarterly to review progress on goals. If the goal is not being met, the SDOH Advisor will assist the provider in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Cohort 2: Providers who have **not** participated in the DAP SDOH program in DAP CYE 2023 or 2024.

- i. Milestone #1: No later than April 1, 2024, the provider must submit a CommunityCares Access Agreement and a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP, and the total number of patient visits per year.
 1. To request a CommunityCares Access Agreement and a DAP SOW, email DAP@contexture.org.

- ii. Milestone #2: No later than January 1, 2025, the provider must have onboarding completed by working with the CommunityCares team to submit all requirements prior to gaining access to the system. The provider must utilize CommunityCares by facilitating in-network screenings and referrals within CommunityCares per facility location.
- iii. Milestone #3: From October 1, 2024, through September 30, 2025, the provider must meet with their SDOH Advisor quarterly to set a utilization goal and to review progress. If the goal is not being met, the SDOH Advisor will assist the provider in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

11. Dental Providers (Up to 3.0%)

Dental Providers (Provider Types 07 and 54) are eligible for a DAP increase on all services billed on an ADA Dental Claim Form.

a. Dental Sealants for Children Performance Measure (1.0%)

A provider that meets the criteria for the dental sealants for children performance measure will qualify for a 1.0% DAP. Providers that increased the number of AHCCCS child members from 5 to 15 years of age to whom they provided dental sealants from CYE 2022 (October 1, 2021, through September 30, 2022) to CYE 2023 (October 1, 2022, through September 30, 2023) are considered to meet this measure. AHCCCS will review only approved and adjudicated claims and encounter data in order to compute a count of the number of AHCCCS members who are children aged 5 through 15 years who received a dental sealant for each time period. Only approved and adjudicated AHCCCS claims and encounters as of March 15, 2024, will be utilized in determining providers that meet these criteria. AHCCCS will not consider any other data when determining which providers qualify for the DAP increase.

b. Provision of Dental Services on Weekends (1.0%)

A provider that meets the criteria for the provision of dental services on weekends will qualify for a 1.0% DAP. A provider qualifies if 2.5% or more of its services occurred for dates of service on a weekend for the period October 1, 2022, through September 30, 2023. Only approved and adjudicated AHCCCS claims and encounters as of March 15, 2024, will be utilized in determining providers that meet these criteria. AHCCCS will not consider any other data when determining which providers qualify for the DAP increase.

c. Bundled Services (1.0%)

A provider that meets the criteria of billing bundled services will qualify for a 1.0% DAP. A bundled service is defined as concurrently billing for an exam and cleaning and then adding on a third service of either fluoride or sealants, utilizing the codes referenced in Attachment A. Providers that increased the amount of bundled services by 5.5% will qualify for this DAP. AHCCCS will review claims and encounters for the period of July 1, 2022, through December 31, 2022, and again from July 1, 2023, through December 31, 2023, and if there is a 5.5% increase in bundled services the

provider will be eligible for the DAP increase. Only approved and adjudicated AHCCCS claims and encounters as of March 15, 2024, will be utilized in determining providers that meet these criteria. AHCCCS will not consider any other data when determining which providers qualify for the DAP increase.

12. Home and Community Based Services Providers (Up to 3.0%)

Home and Community Based Services (HCBS) providers are eligible for a DAP increase under the following criteria. The DAP increase will apply to the specified services described below when provided either on a FFS basis or by all AHCCCS contractors, for all lines of business, including the Arizona Long Term Care System (ALTCS).

a. Health Information Exchange Participation (1.0%)

Assisted Living (AL) Centers (Provider Type 49), and Home Health Agencies (Provider Type 23) that meet the following milestones are eligible to earn a 1.0% DAP.

Cohort 1: Providers who participated in the DAP HIE program in CYE 2023 and/or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the provider must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each provider location, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP.
- ii. Milestone #2: No later than May 1, 2024, the provider must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing one or more HIE services, such as the HIE Portal, standard Admission, Discharge, Transfer (ADT) Alerts, standard Clinical Notifications, or an interface that delivers patient data into the provider's Electronic Health Record (EHR) system. Milestone #3: No later than February 28, 2025, the provider must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 1. HIE Participation Agreement for ONE Platform
 2. Statement of Work (SOW) to access the ONE Platform Portal
- iii. Milestone #3: No later than May 1, 2025, the provider must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
- iv. Milestone #4: No later than July 30, 2025, the provider must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

Cohort 2: Providers who have **not** participated in the DAP HIE program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the provider must have in place an active Health Information Exchange (HIE) Participation Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each qualifying rendering provider, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP.
 - 1. To request a HIE Participation Agreement and a DAP SOW, email DAP@contexture.org
- ii. Milestone #2: No later than October 1, 2024, the provider must launch the implementation project to access patient health information via the HIE and complete the HIE portal training prior to access being granted.
- iii. Milestone #3: No later than December 30, 2024, the provider must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the HIE Portal.
- iv. Milestone #4: No later than February 28, 2025, the provider must have in place the following new agreements with the HIE organization as a result of the affiliation of Health Current and Colorado Regional Health Information Organization (CORHIO).
 - 1. HIE Participation Agreement for ONE Platform
 - 2. Statement of Work (SOW) to access the ONE Platform Portal
- v. Milestone #5: No later than May 1, 2025, the provider must launch the implementation project to access patient health information via the HIE and complete the ONE Platform portal training prior to access being granted.
- vi. Milestone #6: No later than July 30, 2025, the provider must have actively accessed, and continue to access on an ongoing basis, patient health information via the HIE organization, utilizing the ONE Platform portal.

b. Social Determinants of Health Closed Loop Referral System (2.0%)

Attendant Care Agencies (Provider Type 40), Fiscal Intermediaries (Provider Type F1), Habilitation Providers (Provider Type 39), Home Health Agencies (Provider Type 23), Non-Medicare Certified Home Health Agencies (Provider Type 95), and Private Nurses (Provider Type 46) that meet the following milestones are eligible for a 2.0% DAP on all services.

In relation to this DAP initiative only, the Social Determinants of Health (SDOH) Closed Loop Referral System is CommunityCares.

Cohort 1: Providers who participated in the DAP SDOH program in CYE 2023 or/and CYE 2024

- i. Milestone #1: No later than April 1, 2024, the provider must have an active CommunityCares Agreement and submit a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP.
- ii. Milestone #2: No later than September 30, 2024, the provider must participate in a post live meeting with their assigned SDOH Advisor to discuss training needs, SDOH Screening and

Referral workflows, implementation of the SDOH screening tool, and to define the CYE 2025 in-network screening/referral monthly goal.

- iii. Milestone #3: From October 1, 2024 through September 30, 2025, the provider must participate in the utilization of CommunityCares by facilitating screenings/referrals. All screening/referrals entered into CommunityCares by the provider will be counted towards the utilization requirements and tracked monthly. Based on the SDOH CYE 2024 monthly screenings/referrals average, the provider's goal for CYE 2025 is to improve the submission of the monthly screenings/referrals average by 5%, and no less than a combination of 10 screenings/referrals per month per facility location, whichever is greater. This goal will be defined and discussed in the post-live meeting with the provider's assigned SDOH Advisor. Milestone #4: From October 1, 2024, through September 30, 2025, the provider must meet with their SDOH Advisor quarterly to review progress on goals. If the goal is not being met, the SDOH Advisor will assist the provider in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Cohort 2: Providers who have **not** participated in the DAP SDOH program in CYE 2023 or CYE 2024.

- i. Milestone #1: No later than April 1, 2024, the provider must submit a CommunityCares Access Agreement and a signed Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the provider requests to participate in the DAP, and the total number of patient visits per year.
 - 1. To request a CommunityCares Access Agreement and a DAP SOW, email DAP@contexture.org.
- ii. Milestone #2: No later than January 1, 2025, the provider must have onboarding completed by working with the CommunityCares team to submit all requirements prior to gaining access to the system. The provider must utilize CommunityCares by facilitating in-network screenings and referrals within CommunityCares per facility location.
- iii. Milestone #3: From October 1, 2024, through September 30, 2025, the provider must meet with their SDOH Advisor quarterly to set a utilization goal and to review progress. If the goal is not being met, the SDOH Advisor will assist the provider in completing a written document that identifies barriers to achieving goals and outlines steps to overcome these barriers (improvement plan).

Due to operational issues related to contracting arrangements with entities rather than individual practitioners, AHCCCS' MCOs may pay the DAP in a manner other than on an individual claim basis but the DAP must be paid on at least a quarterly basis. In the event an expected quarterly payment to an entity is less than \$25, the MCOs will be permitted to delay payment to the entity until the earlier occurs: payments due of at least \$25 or final quarterly payment for CYE 2025.

13. Crisis Providers (3.0%)

Subacute Facilities 1-16 Beds (Provider Type B5), Subacute Facilities 17+ beds (Provider Type B6), Crisis Services Providers (Provider Type B7), Psychiatric Hospitals, with the exception of public hospitals (Provider Type 71), Behavioral Health Outpatient Clinics (Provider Type 77), and Integrated Clinics (Provider Type IC), that are contracted to provide crisis services are eligible for a DAP increase under the following criteria. For the purposes of this DAP, a crisis provider is defined as an AHCCCS registered provider that is participating in the Bed Registry Project.

a. Crisis Bed Registry (3.0%)

In order to qualify, the provider must have submitted an executed Crisis Bed Registry Statement of Work (SOW) to the HIE by December 31, 2022. Crisis providers who meet the following milestones are eligible for a 3.0% DAP increase on all services under the following criteria:

- i. Milestone #1: No later than April 1, 2024, the crisis provider must have in place an active Crisis Bed Registry Statement of Work, Health Information Exchange (HIE) Participation Agreement with the HIE organization and submit a Differential Adjusted Payment Statement of Work (DAP SOW) to the HIE organization indicating Crisis Bed Registry participation, in which it agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved. The participant list attached to the DAP SOW must contain each facility, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI).
- ii. Milestone #2: From April 1, 2024, through September 30, 2024, the crisis provider must continue sending stabilization and inpatient capacity data via HL7 interface if implemented, or via batch file process if HL7 interface is not yet implemented, as specified during onboarding requirements to the HIE production environment. All downtime must be resolved in a timely manner. Crisis providers that have not yet implemented an HL7 interface will continue engagement via a written plan with the HIE organization, to transition from a batch file process to an HL7 interface while continuing to send Crisis Bed Registry batch files to the HIE.

For participants sending batch files:

- iii. Milestone #3: No later than October 1, 2024, the provider will work with the HIE organization and their EHR vendor to attend a vendor discovery call. The provider and EHR vendor must complete the Crisis Bed Registry Attestation which agrees to send HL7 and customized data to the HIE organization and the provider agrees to any EHR vendor fees for vendor customization.
- iv. Milestone #4: No later than March 1, 2025, the provider will work with the HIE organization and their EHR vendor to have their EHR customize HL7 data and send test messages to the HIE that meet the required Crisis Bed Registry specifications, which is defined by the HIE organizations
- v. Milestone #5: No later than September 1, 2025, the provider must electronically submit Crisis Bed Registry HL7 messages to the production environment of the HIE organization.

Timeline

The following table is a summary of key activities in the DAP strategies decision-making and communication processes, including intended dates.

Date	Activity
1/31/2024	Preliminary Public Notice
2/22/2024	Tribal Consultation
3/1/2024	Public Notice Comments Due
3/16/2024	Final Public Notice
Spring 2024	DAP Steering Committee Meets
Early June 2024	Post Notice of Proposed Rulemaking (NPRM)
Mid-July 2024	NPRM Public Comments Due
7/1/2024	Requests for Approval Due to CMS
8/15/2024	MCO Capitation Rates Due to CMS (including funding for DAPs)
9/15/2024	Qualifying Provider List Posted to AHCCCS Website

Attachment A: Dental Services

Service	Service Codes	Description
Periodic Oral Evaluation	D0120	Exam
Oral Evaluation for a patient under 3 years of age	D0145	Exam
Comprehensive Oral Evaluation	D0150	Exam
Prophylaxis- Adult	D1110	Cleaning
Prophylaxis- Child	D1120	Cleaning
Fluoride Varnish	D1206	Fluoride
Topical Fluoride Varnish	D1208	Fluoride
Sealant	D1351	Sealant
Sealant Repair	D1353	Sealant
Periodontal Scaling and Root Planing (per quadrant or partial quadrant)	D4341	Cleaning
Periodontal Scaling and Root Planing (one to three teeth per quadrant)	D4342	Cleaning
Full Mouth Debridement	D4355	Cleaning
Periodontal Maintenance	D4910	Cleaning

Attachment B: Health Information Exchange Definitions

The HIE will be requiring data quality standards, minimum performance standards and upper thresholds, and will continue to monitor the usage of the HIE during the DAP period to ensure continuous quality data and usage of the HIE is maintained. Additional definitions and requirements for the HIE DAP can be found at www.contexture.org/DAPspecs.

Health Information Exchange Portal: The electronic health information exchange portal is a secure web-based portal that allows providers to access and securely share a patient's medical history and clinical results. The HIE portal gives a complete view of each patient including laboratory results, radiology results, admission, discharge, and transfer information (ADTs), Medication, allergies, and problems. The portal enhances patient care, streamlines coordination of care, and increases reimbursements.

Health Information Exchange Data Sender: A data sender has successfully set up an inbound data feed to the production environment of Contexture's Health Information Exchange Portal and securely sends patient information to be accessed by other healthcare organizations and professionals.

Health Information Organization - Health Data Quality Indicators: Health Information Exchange (HIE) participants will have real-time, high-quality, actionable information with ONE Platform's focus on data quality and reporting functionality. To support health data quality, Contexture's implementation of the HIE Data Quality Report will indicate data senders opportunities to improve data prior to ingestion in the Contexture production environment.

CommunityCares Program: The CommunityCares program is Contexture's Social Determinants of Health Closed-Loop Referral System. The program partners with UniteUs to offer a screening tool to identify social needs and provides community partners to send referrals within the platform. Within the CommunityCares platform a referral can be made, and tracked, and the referral loop closed after completion.

Arizona Health Directives Registry: The Arizona HealthDirectives Registry (AzHDR) is a platform that supports secure uploading, identity verification, real-time access, and management of patient Advance Care Plans. The registry allows healthcare providers the ability to upload patients' advance directives to ensure wishes registered are wishes honored.

Attachment C: HIE Strategy by Provider Type

HIE Strategy by Provider Type Updated January 2023					
Provider Types	CYE 21	CYE 22	CYE 23	CYE 24	CYE 25
Hospitals	Data Quality	Data Quality	Data Quality	ONE Platform	ONE Platform
IHS/638 Facilities	Milestones	Data Prep	Data Quality	ONE Platform	ONE Platform
Integrated Clinics (ICs)	Data Access	Data Prep	Data Quality	ONE Platform	ONE Platform
BH OP Clinics	Data Access	Milestones	Data Prep	ONE Platform	ONE Platform
Nursing Facilities		Milestones	Data Access	ONE Platform	ONE Platform
HCBS Providers (PT 49, PT 23)			Data Access	Data Access	ONE Platform
Physicians, PAs, etc.			Data Access	Data Access	ONE Platform

ONE Platform	Integrations to Contexture's new HIE platform.
Milestones	Transmit ADT information or CCD data to qualifying HIE.
Data Access	Access the HIE data via HIE Services.
Data Prep	Data quality profile reports and a data quality improvement plan in preparation for Data Quality
Data Quality	Measurement of data quality and completing a data quality improvement plan.