

## AHCCCS Differential Adjusted Payment (DAP) CYE 2024 Preliminary Public Notice

### Overview and Purpose

The AHCCCS administration is publishing preliminary decisions for Differential Adjusted Payments (DAP) strategies to be implemented in contract year October 1, 2023, through September 30, 2024 (CYE 2024) for select AHCCCS registered Arizona providers that meet agency established performance criteria. **Written comments may be sent to AHCCSDAP@azahcccs.gov and must be received no later than 5:00 p.m. on March 5, 2023.**

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,](#)
13. [Therapeutic Foster Homes,](#)
14. [Multiple Provider Types,](#) and
15. [Crisis Providers](#)

The current DAP rates expire after September 30, 2023, dates of service. The DAP rates in this notice for CYE 2024 will be effective for dates of service beginning October 1, 2023, through September 30, 2024. All noted providers (based on distinct Provider Types) will have the opportunity to be considered for meeting the criteria described further below. 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, 2024, through September 30, 2025 (CYE 2025), if a DAP would be available at that time. **If a provider is receiving a DAP in CYE 2024 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 prior to the milestone deadline and must state the reason the milestone cannot be met.**

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 2024.

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. 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. 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. 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 - Rates and Billing - FFS - Qualifying Providers. If there are any discrepancies or changes they must be submitted to [AHCCCS DAP@azahcccs.gov](mailto:AHCCCS DAP@azahcccs.gov) prior to the start of CYE 2024. In relation to the following DAPs, the qualifying Health Information Exchange (HIE) organization is designated as Contexture.

### Provider Types

#### **1. Hospitals Subject to APR-DRG Reimbursement (Up to 3.0%)**

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

##### a. Health Information Exchange Participation (Up to 1.5%)

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

- i. Milestone #1: No later than April 1, 2023, the hospital must have in place an active participation agreement with the Health Information Exchange (HIE) organization and submit a signed Health Information Exchange Scope of Work (HIE SOW) to the HIE. The HIE 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. By submitting the HIE

SOW, the hospital agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.

1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than May 1, 2023, 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, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the hospital's EHR system.
- iii. Milestone #3: No later than May 1, 2023, 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 1, 2023, the hospital must electronically submit the following actual patient identifiable information to the production environment of the HIE organization: admission, discharge, and transfer information (generally known as 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.
- v. Milestone #5: No later than May 1, 2023, the hospital must have or obtain a unique Object Identifier (OID) created by a registration authority, the hospital, and HL7. The OID is a globally unique International Organization for Standardization identifier for the hospital. Contact the HIE's Quality Improvement Team for instructions and to ensure the hospital is compliant.
- vi. Milestone #6: No later than October 1, 2023, the hospital must complete the initial data quality profile, based on July 2023 data, with the HIE organization.
- vii. Milestone #7: No later than December 1, 2023, the hospital must complete a data quality improvement plan as defined by the HIE organization. If the initial data quality profile results are greater than 90% for each measure, the Quality Improvement Plan is not required.
- viii. Milestone #8: No later than May 1, 2024, the hospital must complete the final data quality profile, based on February 2024 data, with the HIE organization, in alignment with the data quality improvement plan and HIE SOW as agreed to in Milestone #1 and Milestone #7.
- ix. Quality Improvement Performance Criteria: Hospitals that meet each of the following HIE data quality performance criteria will be eligible to receive DAP increases described below in 1.a.x.
  1. Demonstrate a 10% improvement from baseline measurements in the initial data quality profile, to the final data quality profile.
  2. Meet a minimum performance standard of at least 70% based on the final data quality profile.
  3. If performance meets or exceeds an upper threshold of 90% based on the final data quality profile, the hospital meets the criteria, regardless of the percentage improvement from the baseline measurements.

- x. DAP HIE Data Quality Standards CYE 2024 Measure Categories: Hospitals that meet the standards, as defined in Attachment A of this notice, qualify for a DAP increase for select Data Quality Measures for a total of 1.5% if criteria are met for all categories indicating a DAP.
  - 1. Data source and data site information must be submitted on all ADT transactions. (0.5%)
  - 2. Event type must be properly coded on all ADT transactions.
  - 3. Patient class must be properly coded on all appropriate ADT transactions.
  - 4. Patient demographic information must be submitted on all ADT transactions. (0.25%)
  - 5. Race must be submitted on all ADT transactions. (0.25%)
  - 6. Ethnicity must be submitted on all ADT transactions. (0.25%)
  - 7. Discharge diagnosis must be submitted on discharge transactions. (0.25%)
  - 8. Overall completeness of the ADT message.

For any milestone that includes the electronic submission of patient information, 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 and an effort to provide data to the HIE is required for the period in which the data was not received.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a HIE SOW and receives a DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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

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

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a signed Health Information Exchange Scope of Work (HIE SOW) indicating AzHDR participation to the HIE. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the hospital requests to participate in the DAP.
  - 1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  - 1. For hospitals that have participated in DAP HIE requirements in CYE 2023:
    - a. No later than September 30, 2023, initiate use of the AzHDR platform operated by the HIE organization.

- b. After all the onboarding requirements have been met and the provider has access to the platform (Go-Live), the hospital must regularly utilize the AzHDR platform which will be measured by facilitating at least 10 patient document uploads or queries of advance directives per month from the Go-Live date through September 30, 2024. Both uploads entered into the system and queries of the system by the hospital will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.
2. For hospitals that have not participated in DAP HIE requirements in CYE 2023:
  - a. No later than November 1, 2023, complete the AzHDR Participant Agreement, and
  - b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the platform.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, the hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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.

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a signed Health Information Exchange Scope of Work (HIE SOW) and the CommunityCares Access Agreement indicating SDOH participation to the HIE organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the hospital requests to participate in the DAP.
  1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  1. For hospitals that have participated in DAP SDOH requirements in CYE 2023:
    - a. No later than September 30, 2023, initiate use of the CommunityCares referral system operated by the HIE organization.
    - b. No later than May 1, 2024: After all the onboarding requirements have been met and the provider has access to the system and through September 30, 2024, the hospital must regularly utilize the CommunityCares referral system operated by the HIE organization. This will be measured by facilitating at least 10 referrals per month that

resulted from utilizing the social-needs screening tool in CommunityCares. All referrals entered into the system by the hospital will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.

2. For hospitals that have not participated in DAP SDOH requirements in CYE 2023:
  - a. No later than November 1, 2023, complete the CommunityCares Access Agreement and the HIE Participant Agreement, as required, and
  - b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the system.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, the hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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.

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a Letter of Intent (LOI) to AHCCCS to the following email address: [AHCCCSdap@azahcccs.gov](mailto:AHCCCSdap@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 NPI(s), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2023, develop and submit a facility policy that meets AHCCCS/ADHS standards for a NDP.
- iii. Milestone #3: No later than January 1, 2024, begin distribution of Naloxone to individuals at risk of overdose as identified through the facilities' policy.

If a hospital submits a LOI and receives a DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, the hospital will be ineligible to receive this DAP for CYE 2025, if a DAP is available at that time.

**2. Critical Access Hospitals (Up to 10.5%)**

Hospitals designated as a Critical Access Hospital (CAH) by March 15, 2023, are eligible for DAP increases on all inpatient and outpatient services under the following criteria.

a. Health Information Exchange Participation (Up to 8.0%)

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

- i. Milestone #1: No later than April 1, 2023, the hospital must have in place an active participation agreement with the Health Information Exchange (HIE) organization and submit a signed Health Information Exchange Scope of Work (HIE SOW) to the HIE. The HIE 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. By submitting the HIE SOW, the hospital agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.
  1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than May 1, 2023, 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, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the facility's EHR system.
- iii. Milestone #3: No later than May 1, 2023, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE, if required by the external reference lab, to have all outsourced lab test results flow to the HIE organization on their behalf.
- iv. Milestone #4: No later than May 1, 2023, the hospital must electronically submit the following actual patient identifiable information to the production environment of the HIE organization: admission, discharge, and transfer information (generally known as 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.
- v. Milestone #5: No later than May 1, 2023, the hospital must have or obtain a unique Object Identifier (OID) created by a registration authority, the hospital, and HL7. The OID is a globally unique International Organization for Standardization identifier for the hospital. Contact the HIE's Quality Improvement Team for instructions and to ensure you are compliant.
- vi. Milestone #6: No later than October 1, 2023, the hospital must complete the initial data quality profile, based on July 2023 data, with the HIE organization.
- vii. Milestone #7: No later than December 1, 2023, the hospital must complete a data quality improvement plan, as defined by the HIE organization. If the initial data quality profile results are greater than 90% for each measure, the Quality Improvement Plan is not required.
- viii. Milestone #8: No later than May 1, 2024, the hospital must complete the final data quality profile, based on February 2024 data, with the HIE organization, in alignment with the data quality improvement plan and HIE SOW as agreed to in Milestone #1 and Milestone #7.
- ix. Quality Improvement Performance Criteria: Hospitals that meet each of the following HIE data quality performance criteria will be eligible to receive DAP increases described below in 2.a.x.

1. Demonstrate a 10% improvement from baseline measurements in the initial data quality profile, to the final data quality profile.
  2. Meet a minimum performance standard of at least 70% based on the final data quality profile.
  3. If performance meets or exceeds an upper threshold of 90% based on the final data quality profile the hospital meets the criteria, regardless of the percentage improvement from the baseline measurements.
- x. DAP HIE Data Quality Standards CYE 2024 Measure Categories: Hospitals that meet the standards, as defined in Attachment A of this notice, qualify for a DAP percentage increase for select Data Quality Measures for a total of 8.0% if criteria are met for all categories indicating a DAP.
1. Data source and data site information must be submitted on all ADT transactions. (1.0%)
  2. Event type must be properly coded on all ADT transactions. (1.0%)
  3. Patient class must be properly coded on all appropriate ADT transactions.
  4. Patient demographic information must be submitted on all ADT transactions. (1.0%)
  5. Race must be submitted on all ADT transactions. (2.0%)
  6. Ethnicity must be submitted on all ADT transactions. (2.0%)
  7. Discharge diagnosis must be submitted on discharge transactions. (1.0%)
  8. Overall completeness of the ADT message.

For any milestone that includes the electronic submission of patient information, 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 and 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, any downtime will be reported and an effort to provide data to the HIE is required for the period in which the data was not received.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a HIE SOW and receives a DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, the hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

b. Arizona Health Directives Registry (AzHDR) (1.0%)

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

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a signed Health Information Exchange Scope of Work (HIE SOW) indicating AzHDR participation to the HIE



organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the hospital requests to participate in the DAP.

1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  1. For hospitals that have participated in DAP HIE requirements in CYE 2023:
    - a. No later than September 30, 2023, initiate use of the AzHDR platform operated by the HIE organization.
    - b. After all the onboarding requirements have been met and the provider has access to the platform (Go-Live), the hospital must regularly utilize the AzHDR platform which will be measured by facilitating at least 10 patient document uploads or queries of advance directives per month from the Go-Live date through September 30, 2024. Both uploads entered into the system and queries of the system by the hospital will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.
  2. For hospitals that have not participated in DAP HIE requirements in CYE 2023:
    - a. No later than November 1, 2023, complete the AzHDR Participant Agreement, and
    - b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the platform.

If a hospital has already achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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

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 1.0% DAP.

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a signed Health Information Exchange Scope of Work (HIE SOW) and the CommunityCares Access Agreement indicating SDOH participation to the HIE organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the hospital requests to participate in the DAP.
  1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  1. For hospitals that have participated in DAP SDOH requirements in CYE 2023:

- a. No later than September 30, 2023, initiate use of the CommunityCares referral system operated by the HIE organization.
  - b. No later than May 1, 2024: After all the onboarding requirements have been met and the provider has access to the system, and through September 30, 2024, the hospital must regularly utilize the CommunityCares referral system operated by the HIE organization. This will be measured by facilitating at least 10 referrals per month that resulted from utilizing the social-needs screening tool in CommunityCares. All referrals entered into the system by the hospital will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.
2. For hospitals that have not participated in DAP SDOH requirements in CYE 2023:
- a. No later than November 1, 2023, complete the CommunityCares Access Agreement and the HIE Participant Agreement, as required, and
  - b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the system.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

e. 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.

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a Letter of Intent (LOI) to AHCCCS to the following email address: [AHCCCSdap@azahcccs.gov](mailto:AHCCCSdap@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 NPI(s), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2023, develop and submit a facility policy that meets AHCCCS/ADHS standards for a NDP.
- iii. Milestone #3: No later than January 1, 2024, begin distribution of Naloxone to individuals at risk of overdose as identified through the facilities' policy.

If a hospital submits a LOI and receives a DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, the hospital will be ineligible to receive this DAP for CYE 2025, if a DAP is available at that time.

### 3. Other Hospitals and Inpatient Facilities (Up to 4.5%)

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 DAP increases 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 (Up to 1.5%)

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

- i. Milestone #1: No later than April 1, 2023, the hospital must have in place an active participation agreement with the Health Information Exchange (HIE) organization and submit a signed Health Information Exchange Scope of Work (HIE SOW) to the HIE. The HIE 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. By submitting the HIE SOW, the hospital agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.
  1. For hospitals that have not participated in DAP HIE requirements for CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than May 1, 2023, 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, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the hospital's EHR system.
- iii. Milestone #3: No later than May 1, 2023, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE, if required by the external reference lab, to have all outsourced lab test results flow to the HIE organization on their behalf.
- iv. Milestone #4: No later than May 1, 2023, the hospital must electronically submit the following actual patient identifiable information to the production environment of the HIE organization: admission, discharge, and transfer information (generally known as 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.
- v. Milestone #5: No later than May 1, 2023, the hospital must have or obtain a unique Object Identifier (OID) created by a registration authority, the hospital, and HL7. The OID is a globally unique International Organization for Standardization identifier for the hospital. Contact the HIE's Quality Improvement Team for instructions and to ensure you are compliant.

- vi. Milestone #6: No later than October 1, 2023, the hospital must complete the initial data quality profile, based on July 2023 data, with the HIE organization.
- vii. Milestone #7: No later than December 1, 2023, the hospital must complete a data quality improvement plan, as defined by the HIE organization. If the initial data quality profile results are greater than 90% for each measure, the Quality Improvement Plan is not required.
- viii. Milestone #8: No later than May 1, 2024, the hospital must complete the final data quality profile, based on February 2024 data, with the HIE organization, in alignment with the data quality improvement plan and HIE SOW as agreed to in Milestone #1 and Milestone #7.
- ix. Quality Improvement Performance Criteria: Hospitals that meet each of the following HIE data quality performance criteria will be eligible to receive DAP increases described below in 3.a.x.
  - 1. Demonstrate a 10% improvement from baseline measurements in the initial data quality profile, to the final data quality profile.
  - 2. Meet a minimum performance standard of at least 70% based on the final data quality profile.
  - 3. If performance meets or exceeds an upper threshold of 90% based on the final data quality profile the hospital meets the criteria, regardless of the percentage improvement from the baseline measurements.
- x. DAP HIE Data Quality Standards CYE 2024 Measure Categories: Hospitals that meet the standards, as defined in Attachment A of this notice, qualify for a DAP increase for select Data Quality Measures for a total potential increase of 1.5% if criteria are met for all categories.
  - 1. Data source and data site information must be submitted on all ADT transactions. (0.5%)
  - 2. Event type must be properly coded on all ADT transactions.
  - 3. Patient class must be properly coded on all appropriate ADT transactions.
  - 4. Patient demographic information must be submitted on all ADT transactions. (0.25%)
  - 5. Race must be submitted on all ADT transactions. (0.25%)
  - 6. Ethnicity must be submitted on all ADT transactions. (0.25%)
  - 7. Discharge diagnosis must be submitted on discharge transactions. (0.25%)
  - 8. Overall completeness of the ADT message.

For any milestone that includes the electronic submission of patient information, 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 and an effort to provide data to the HIE is required for the period in which the data was not received.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a HIE SOW and receives a DAP increase for CYE 2024 but fails to achieve one or more of the milestones by

the specified date or fails to maintain its participation in the milestone activities, that hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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

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

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a signed Health Information Exchange Scope of Work (HIE SOW) indicating AzHDR participation to the HIE organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the hospital requests to participate in the DAP.
  1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  1. For hospitals that have participated in DAP HIE requirements in CYE 2023:
    - a. No later than September 30, 2023, initiate use of the AzHDR platform operated by the HIE organization.
    - b. After all the onboarding requirements have been met and the provider has access to the platform (Go-Live), the hospital must regularly utilize the AzHDR platform which will be measured by facilitating at least 10 patient document uploads or queries of advance directives per month from the Go-Live date through September 30, 2024. Both uploads entered into the system and queries of the system by the hospital will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.
  2. For hospitals that have not participated in DAP HIE requirements in CYE 2023:
    - a. No later than November 1, 2023, complete the AzHDR Participant Agreement, and
    - b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the platform.

If a hospital has already achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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.

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a signed Health Information Exchange Scope of Work (HIE SOW) and the CommunityCares Access Agreement indicating SDOH participation to the HIE organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the hospital requests to participate in the DAP.
  1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  1. For hospitals that have participated in DAP SDOH requirements in CYE 2023:
    - b. No later than September 30, 2023, initiate use of the CommunityCares referral system operated by the HIE organization.
    - b. No later than May 1, 2024: After all the onboarding requirements have been met and the provider has access to the system, and through September 30, 2024, the hospital must regularly utilize the CommunityCares referral system operated by the HIE organization. This will be measured by facilitating at least 10 referrals per month that resulted from utilizing the social-needs screening tool in CommunityCares. All referrals entered into the system by the hospital will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.
  2. For hospitals that have not participated in DAP SDOH requirements in CYE 2023:
    - a. No later than November 1, 2023, complete the CommunityCares Access Agreement and the HIE Participant Agreement, as required, and
    - b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the system.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

d. Inpatient Psychiatric Facility Quality Reporting Program (2.0%)

Hospitals that meet the Inpatient Psychiatric Facility Quality Reporting Program (IPFQR) performance measure will qualify for a 2.0% DAP increase. On March 15, 2023, AHCCCS will download the most current data from the QualityNet.org website to identify Medicare's Annual Payment Update (APU) recipients. APU recipients are those facilities that satisfactorily met the requirements for the IPFQR program, which includes multiple clinical quality measures. Facilities identified as APU recipients will qualify for the DAP increase.

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

Hospitals that meet or fall below the national average for the pressure ulcers performance measure will qualify for a 2.0% DAP increase. On March 15, 2023, 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.

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

Hospitals that meet or fall below the national average for the pressure ulcers performance measure will qualify for a 2.0% DAP increase. On March 15, 2023, 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.

- i. Milestone #1: No later than April 1, 2023, the facility must submit a Letter of Intent (LOI) to AHCCCS to the following email address: [AHCCCSdap@azahcccs.gov](mailto:AHCCCSdap@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 NPI(s), that the facility requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2023, develop and submit a facility policy that meets AHCCCS/ADHS standards for a NDP.
- iii. Milestone #3: No later than January 1, 2024, begin distribution of Naloxone to individuals at risk of overdose as identified through the facilities' policy.

If a facility submits a LOI and receives a DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, the facility will be ineligible to receive this DAP for CYE 2025, if a DAP is available at that time.

**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, 2023, are eligible for a DAP increase on all services under the following criteria.

a. Health Information Exchange Participation (Up to 1.5%)

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

- i. Milestone #1: No later than April 1, 2023, the hospital must have in place an active participation agreement with the Health Information Exchange (HIE) organization and a signed Health Information Exchange Scope of Work (HIE SOW) to the HIE. The HIE 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. By submitting the HIE SOW, the hospital agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.
  1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than May 1, 2023, 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, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the hospital's EHR system.
- iii. Milestone #3: No later than May 1, 2023, hospitals that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE, if required by the external reference lab, to have all outsourced lab test results flow to the HIE organization on their behalf.
- iv. Milestone #4: No later than May 1, 2023, the hospital must electronically submit the following actual patient identifiable information to the production environment of the HIE organization: admission, discharge, and transfer information (generally known as ADT information), including data from the hospital emergency department if the hospital 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. If the hospital has ambulatory and/or behavioral health practices, then the facility must submit the following actual patient identifiable information to the production environment of the HIE: registration, encounter summary, and data elements specific to individuals with a serious mental illness (SMI) designation, as defined by the HIE organization.
  1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, the deadline for this milestone will be June 30, 2023.
- v. Milestone #5: No later than May 1, 2023, the hospital must have or obtain a unique Object Identifier (OID) created by a registration authority, the hospital, and HL7. The OID is a globally unique International Organization for Standardization identifier for the hospital. Contact the HIE's Quality Improvement Team for instructions and to ensure you are compliant.
- vi. Milestone #6: No later than October 1, 2023, the hospital must complete the initial data quality profile, based on July 2023 data, with the HIE organization.



- vii. Milestone #7: No later than December 1, 2023, the hospital must complete a data quality improvement plan, as defined by the HIE organization. If the initial data quality profile results are greater than 90% for each measure, the Quality Improvement Plan is not required.
- viii. Milestone #8: No later than May 1, 2024, the hospital must complete the final data quality profile, based on February 2024 data, with the HIE organization, in alignment with the data quality improvement plan and HIE SOW as agreed to in Milestone #1 and Milestone #7.
- ix. Quality Improvement Performance Criteria: Hospitals that meet each of the following HIE data quality performance criteria will be eligible to receive DAP increases described below in 5.a.x.
  - 1. Demonstrate a 10% improvement from baseline measurements in the initial data quality profile, to the final data quality profile.
  - 2. Meet a minimum performance standard of at least 70% based on the final data quality profile.
  - 3. If performance meets or exceeds an upper threshold of 90% based on the final data quality profile, the hospital meets the criteria, regardless of the percentage improvement from the baseline measurements.
- x. DAP HIE Data Quality Standards CYE 2024 Measure Categories: Hospitals that meet the standards, as defined in Attachment A of this notice, qualify for a DAP increase for each Data Quality Measure for a total potential increase of 1.5% if criteria are met for all categories.
  - 1. Data source and data site information must be submitted on all ADT transactions. (0.5%)
  - 2. Event type must be properly coded on all ADT transactions.
  - 3. Patient class must be properly coded on all appropriate ADT transactions.
  - 4. Patient demographic information must be submitted on all ADT transactions. (0.25%)
  - 5. Race must be submitted on all ADT transactions. (0.25%)
  - 6. Ethnicity must be submitted on all ADT transactions. (0.25%)
  - 7. Discharge diagnosis must be submitted on discharge transactions. (0.25%)
  - 8. Overall completeness of the ADT message.

For any milestone that includes the electronic submission of patient information, 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 and an effort to provide data to the HIE is required for the period in which the data was not received.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, If a hospital submits a HIE SOW and receives the DAP for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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

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

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a signed Health Information Exchange Scope of Work (HIE SOW) indicating AzHDR participation to the HIE organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the hospital requests to participate in the DAP.
  1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than November 1, 2023, complete the AzHDR Participant Agreement.
- iii. Milestone #3: No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the platform.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a SOW and receives the 0.5% DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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.

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a signed Health Information Exchange Scope of Work (HIE SOW) and the CommunityCares Access Agreement indicating SDOH participation to the HIE organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the hospital requests to participate in the DAP.
  1. For hospitals that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than November 1, 2023, complete the CommunityCares Access Agreement and the HIE Participant Agreement, as required.
- iii. Milestone #3: No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the system.

If a hospital has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the hospital to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a hospital submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones

by the specified date or fails to maintain its participation in the milestone activities, that hospital will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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.

- i. Milestone #1: No later than April 1, 2023, the hospital must submit a Letter of Intent (LOI) to AHCCCS to the following email address: [AHCCCSdap@azahcccs.gov](mailto:AHCCCSdap@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 NPI(s), that the hospital requests to participate in the DAP.
- ii. Milestone #2: No later than November 30, 2023, develop and submit a facility policy that meets AHCCCS/ADHS standards for a NDP.
- iii. Milestone #3: No later than January 1, 2024, begin distribution of Naloxone to individuals at risk of overdose as identified through the facilities' policy.

If a hospital submits a LOI and receives a DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, the hospital will be ineligible to receive this DAP for CYE 2025, if a DAP is available at that time.

## 6. Nursing Facilities (Up to 2.0%)

Nursing facilities (Provider Type 22), are eligible for DAP increases 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.

- i. Milestone #1: No later than April 1, 2023, the facility must have in place an active participation agreement with the Health Information Exchange (HIE) organization and submit a signed Health Information Exchange Scope of Work (HIE SOW) to the HIE. The HIE 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. By submitting the HIE SOW, the facility agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.
  1. For facilities that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than May 1, 2023, 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, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the facility's EHR. System.
- iii. Milestone #3: No later than September 30, 2023, facilities that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE,

- if required by the external reference lab, to have all outsourced lab test results flow to the HIE organization on their behalf.
- iv. Milestone #4: No later than September 30, 2023, the facility must electronically submit the following actual patient identifiable information to the production environment of the HIE organization: admission, discharge, and transfer information (generally known as 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.
  - v. Milestone #5: No later than September 30, 2023, the facility must have or obtain a unique Object Identifier (OID) created by a registration authority, the facility, and HL7. The OID is a globally unique International Organization for Standardization identifier for the facility. Contact the HIE's Quality Improvement Team for instructions and to ensure you are compliant.

For any milestone that includes the electronic submission of patient information, 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, any downtime will be reported and an effort to provide data to the HIE is required for the period in which the data was not received.

If a nursing facility has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the facility to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a facility submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that facility will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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

The AzHDR is in alignment with the 2019 Arizona Senate Bill 1352 (enacted into Laws 2019, Ch. 314) that was passed 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.

- i. Milestone #1: No later than April 1, 2023, the facility must submit a signed Health Information Exchange Scope of Work (HIE SOW) indicating AzHDR participation to the HIE organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the facility requests to participate in the DAP.
  - 1. For facilities that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than November 1, 2023, complete the AzHDR Participant Agreement.

- iii. Milestone #3: No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the platform.

If a nursing facility has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the facility to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a nursing facility submits a SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that nursing facility will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

c. Urinary Tract Infection Performance Measure (1.0%)

Nursing facilities that meet or fall below the statewide average percentage for the Urinary Tract Infection (UTI) performance measure will qualify for a 1.0% DAP increase. On March 15, 2023, 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 16.5%)**

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

In relation to the Health Information Exchange Participation DAP initiative only, a Provider Type IC is defined as an Integrated Clinic if it meets the following criteria:

- The provider must be licensed by the Arizona Department of Health Services (ADHS) as an Outpatient Treatment Center which provides both behavioral health services and physical health services.
- Behavioral health services for the provider must account for at least 40% of total AHCCCS claims and encounters.
  - AHCCCS will utilize claims and encounter data for dates of service from October 1, 2021, through September 30, 2022.
  - Only approved and adjudicated AHCCCS claims and encounters will be utilized in the computations.
  - AHCCCS will compute claims and encounters for behavioral health services as a percentage of total claims and encounters as of April 1, 2023, to determine which providers meet the 40% minimum threshold.
  - AHCCCS will not consider any other data when determining which providers qualify for the DAP increase.

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.

- i. Milestone #1: No later than April 1, 2023, the clinic must have in place an active participation agreement with the Health Information Exchange (HIE) organization and submit a signed Health Information Exchange Scope of Work (HIE SOW) to the HIE. The HIE 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. By submitting the HIE SOW, the clinic agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.
  1. For clinics that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than May 1, 2023, 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, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the clinic's EHR system. If it is the clinic's first year in the DAP HIE initiative, then it must meet this milestone no later than January 1, 2024.
- iii. Milestone #3: No later than May 1, 2023, clinics that utilize external reference labs for any lab result processing must submit necessary provider authorization forms to the HIE, if required by the external reference lab, to have all outsourced lab test results flow to the HIE organization on their behalf.
- iv. Milestone #4: No later than May 1, 2023, the clinic must electronically submit actual patient identifiable information to the production environment of the HIE organization, including encounter information and an encounter summary as well as data elements specific to individuals with a serious mental illness (SMI) designation, as defined by the HIE organization. If a clinic is in the process of integrating a new Practice Management and/or electronic health record (EHR) system, or if it is the clinic's first year in the DAP HIE initiative, then it must meet this milestone no later than June 30, 2023.
- v. Milestone #5: No later than May 1, 2023, the clinic must have or obtain a unique Object Identifier (OID) created by a registration authority, the clinic, and HL7. The OID is a globally unique International Organization for Standardization identifier for the clinic. Contact the HIE's Quality Improvement Team for instructions and to ensure you are compliant.
- vi. Milestone #6: No later than October 1, 2023, the clinic must complete the initial data quality profile, based on July 2023 data, with the HIE organization.
- vii. Milestone #7: No later than December 1, 2023, the clinic must complete a data quality improvement plan, as defined by the HIE organization. If the initial data quality profile results are greater than 90% for each measure, the Quality Improvement Plan is not required.
- viii. Milestone #8: No later than May 1, 2024, the clinic must complete the final data quality profile, based on February 2024 data, with the HIE organization, in alignment with the data quality improvement plan and HIE SOW as agreed to in Milestone #1 and Milestone #7.
- ix. Quality Improvement Performance Criteria: Clinics that meet each of the following HIE data quality performance criteria will be eligible to receive DAP increases described below in 7.a.x.

1. Demonstrate a 10% improvement from baseline measurements in the initial data quality profile, to the final data quality profile.
  2. Meet a minimum performance standard of at least 70% based on the final data quality profile.
  3. If performance meets or exceeds an upper threshold of 90% based on the final data quality profile, the clinic meets the criteria, regardless of the percentage improvement from the baseline measurements.
- x. DAP HIE Data Quality Standards CYE 2024 Measure Categories: Clinics that meet the standards, as defined in Attachment A of this notice, qualify for a DAP percentage increase on all outpatient services delivered for select Data Quality Measures, for a total of 1.0% if criteria are met for all categories.
1. Data source and data site information must be submitted on all transactions. (0.25%)
  2. Event type must be properly coded on all transactions.
  3. Patient demographics information must be submitted on all transactions. (0.25%)
  4. Race must be submitted on all transactions. (0.25%)
  5. Ethnicity must be submitted on all transactions. (0.25%)
  6. Diagnosis must be submitted on all transactions.
  7. Overall completeness of the message.

For any milestone that includes the electronic submission of patient information, 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 down time will be reported and an effort to provide data to the HIE is required for the period in which the data was not received.

If a clinic has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the clinic to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a clinic submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that clinic will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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

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

- i. Milestone #1: No later than April 1, 2023, the clinic must submit a signed Health Information Exchange Scope of Work (HIE SOW) and the CommunityCares Access Agreement indicating SDOH participation to the HIE organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the clinic requests to participate in the DAP.

1. For clinics that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  1. For clinics that have participated in DAP SDOH requirements in CYE 2023:
    - a. No later than September 30, 2023, initiate use of the CommunityCares referral system operated by the HIE organization.
    - b. No later than May 1, 2024: After all the onboarding requirements have been met and the provider has access to the system, and through September 30, 2024, the clinic must regularly utilize the CommunityCares referral system operated by the HIE organization. This will be measured by facilitating at least 10 referrals per month that resulted from utilizing the PRAPARE social-needs screening tool in CommunityCares. All referrals entered into the system by the clinic will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.
  2. For clinics that have not participated in DAP SDOH requirements in CYE 2023:
    - a. No later than November 1, 2023, complete the CommunityCares Access Agreement and the HIE Participant Agreement, as required, and
    - b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the system.

If a clinic has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the clinic to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a clinic submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that clinic will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

c. Partnerships with Schools to Provide Behavioral Health Services (1.0%)

A clinic that meets the criteria for partnering with schools to provide behavioral health services will qualify for a 1.0% DAP.

- i. Milestone #1: By April 30, 2023, a clinic must submit an LOI to AHCCCS, to the following email address: [AHCCCSdap@azahcccs.gov](mailto:AHCCCSdap@azahcccs.gov), indicating that they agree to the following criteria for partnering with schools to provide behavioral health services. The LOI must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the clinic requests to participate in the DAP.
- ii. Milestone #2: By June 30, 2024, a clinic must have accepted at least 10 referrals from a school that led to subsequent service provision for the student.
- iii. Milestone #3: By June 30, 2024, a clinic must have provided services on a school campus, or to a student referred for services by a school, as identified by the use of the CTDS number on the claim.



If a clinic submits a LOI and receives the DAP increase for CYE 2024 but fails to achieve both of the milestones by the specified date or fails to maintain its participation in the milestone activities, that clinic will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

d. Autism Centers of Excellence (3.0%)

A clinic that meets the criteria to be considered an Autism Center of Excellence (COE) will qualify for a 3.0% DAP. An Autism COE is defined as a provider that has been identified as such by any AHCCCS MCO in the “Value Based Providers/Centers of Excellence” attachment to its “Provider Network Development and Management Plan,” submitted by November 15, 2022. Providers that have been identified as an Autism COE in this manner will qualify for the DAP.

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

A clinic that meets the criteria for 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 in order to provide behavioral health services to members located in the Grand Canyon. The signed MOA or MOU must be in place by April 1, 2023, and submitted to AHCCCS by email to: [AHCCCSdap@azahcccs.gov](mailto:AHCCCSdap@azahcccs.gov).

On April 15, 2023, AHCCCS will review such documents as have been submitted by each provider in order to determine providers that meet this requirement and will qualify for this DAP increase.

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

Clinics that bill for behavioral health 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.

- i. Milestone # 1: By April 30, 2023, providers must submit an LOI to AHCCCS, to the following email address, [AHCCCSdap@azahcccs.gov](mailto:AHCCCSdap@azahcccs.gov), indicating that they agree to complete integration or maintain integration with the ASAM CONTINUUM with their EHR system. The LOI must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the clinic requests to participate in the DAP.
- ii. Milestone #2: By April 30, 2024, the EHR vendor must submit a letter to AHCCCS stating the integration has been completed. The letter must include a project contact for the clinic, the EHR vendor, and a contact for the EHR.

If a clinic submits an LOI and receives the DAP increase for CYE 2024, but fails to integrate or maintain integration by April 30, 2024, that provider will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

- g. Continuous Behavioral Health Services to American Indian Health Program (AIHP) Members Designated with a Serious Mental Illness (SMI) Who Transitioned from RBHA Enrollment (7.0%)

Clinics that provide continuous behavioral health services to AIHP members designated with an SMI, who transitioned from enrollment with a Regional Behavioral Health Authority (RBHA) to integrated enrollment in the American Indian Health Program (AIHP) on October 1, 2022, will be eligible for a 7.0% DAP on all Fee-For-Service claims. AHCCCS reviewed claims for FFY 2022 on December 29, 2022 and will again review claims on September 1, 2023 for claims with dates of service between December 1, 2022 and July 1, 2023 to identify eligible providers. Clinics that were providing services in FFY 2022, to AIHP-RBHA members designated with a SMI and that continue to provide services to these members with a SMI from December 1, 2022 through July 1, 2023 will be eligible for this DAP.

**8. Physicians, Physician Assistants, and Registered Nurse Practitioners (Up to 3.5%)**

Physicians, Physician Assistants, and Registered Nurse Practitioners (Provider Types 08, 18, 19, and 31) are eligible for DAP increases 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 Closed Loop Referral System is CommunityCares. Providers that meet the following milestones are eligible to earn a 0.5% DAP.

- i. Milestone #1: No later than April 1, 2023, the provider must submit a Health Information Exchange Scope of Work (HIE SOW) and the CommunityCares Access Agreement indicating SDOH participation to the HIE organization. The HIE SOW must contain each qualifying rendering provider, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the facility requests to participate in the DAP.
  - 1. For providers that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  - 1. For providers that have participated in DAP SDOH requirements in CYE 2023:
    - a. No later than September 30, 2023, initiate use of the CommunityCares referral system operated by the HIE organization.
    - b. No later than May 1, 2024, after all the onboarding requirements have been met and the provider has access to the platform, and through September 30, 2024, the provider must regularly utilize the CommunityCares referral system operated by the HIE organization. This will be measured by facilitating at least 10 referrals per month that resulted from utilizing the social-needs screening tool in CommunityCares. All referrals entered into the system by the clinic will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.
  - 2. For providers that have not participated in DAP SDOH requirements in CYE 2023:
    - a. No later than November 1, 2023, complete the CommunityCares Access Agreement and the HIE Participant Agreement, as required, and

- b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the system.

If a provider has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the provider to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a provider submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that provider will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

b. Electronic Prescriptions (1.0%)

A provider that has written at least 80 prescriptions for AHCCCS members and has written at least 85% of its total AHCCCS prescriptions as Electronic Prescriptions (E-Prescriptions) will qualify for a 1.0% DAP on all services billed on the CMS Form 1500. E-Prescription statistics will be identified by the AHCCCS provider ID for the prescribing provider and computed by AHCCCS based on the following factors:

- i. Only approved and adjudicated AHCCCS claims and encounters for July 1, 2022, through December 31, 2022, dispense dates will be utilized in the computations.
- ii. AHCCCS will compute claims and encounters for this purpose as of March 15, 2023, to determine which providers meet the minimum threshold.
- iii. AHCCCS will not consider any other data when determining which providers qualify for the DAP increase.
- iv. E-Prescriptions include those prescriptions generated through a computer-to-computer electronic data interchange protocol, following a national industry standard and identified by Origin Code 3.
- v. Refills of original prescriptions whereby the original prescriptions meet the definition of E-Prescriptions shall not be counted as E-Prescriptions.

The DAP will apply to claims where the rendering provider ID on the claim is the same as the prescribing provider ID that was identified and found to meet the criteria described above.

c. Six-Week Postpartum Visits (1.0%)

An obstetrician or gynecologist that meets the criteria for the provision of six-week postpartum visits will qualify for a 1.0% DAP. A provider qualifies if they have delivered and discretely billed for six-week postpartum visit services for at least 25% of the members for whom it delivered in the CYE 2022 period. AHCCCS will review claims and encounters for the period of October 1, 2021, through September 30, 2022, to determine eligibility for the DAP in CYE 2024. Only approved and adjudicated AHCCCS claims and encounters as of March 15, 2023, 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.

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

Providers that bill for behavioral health 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.

- i. Milestone # 1: By April 30, 2023, providers must submit an LOI to AHCCCS indicating that they agree to complete integration or maintain integration with the ASAM CONTINUUM with their EHR system to the following email address: [AHCCCSdap@azahcccs.gov](mailto:AHCCCSdap@azahcccs.gov). The LOI must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the provider requests to participate in the DAP.
- ii. Milestone #2: By April 30, 2024, the EHR vendor must submit a letter to AHCCCS stating the integration has been completed. The letter must include a project contact for the facility, the EHR vendor, and a contact for the EHR.

If a provider submits an LOI and receives the DAP for CYE 2024, but fails to integrate or maintain integration by April 30, 2024, that provider will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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 2024.

**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 DAP increases on all services billed on a CMS 1500 Form.

a. Health Information Exchange Participation (1.0%)

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

- i. Milestone #1: No later than April 1, 2023, the provider must have in place an active participation agreement with the Health Information Exchange (HIE) organization and submit a signed Health Information Exchange Scope of Work (HIE SOW) to the HIE. The HIE SOW must contain each qualifying rendering provider, including AHCCCS ID(s) and corresponding National Provider Identifier(s) (NPI), that the facility requests to participate in the DAP. By submitting the HIE SOW, the provider agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.
  1. For providers that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).

- ii. Milestone #2: No later than May 1, 2023, 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, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the provider's EHR system.
  - 1. If it is the provider's first year in the DAP HIE initiative, then the provider must meet this milestone no later than January 1, 2024.

If a provider has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the provider to maintain their participation in those milestone activities for the period April 1, 2023, through September 30, 2024.

If a provider submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that provider will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

## **10. Behavioral Health Providers (1.0%)**

Community Service Agencies (CSA), Independent Substance Abuse Counselors (A4), Behavioral Health Therapeutic Homes, and Rural Substance Abuse Transitional Agencies (Provider Types A3, A4, A5, and A6) are eligible for DAP increases 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 Closed Loop Referral System is CommunityCares. Providers that meet the following milestones are eligible to earn a 1.0% DAP.

- i. Milestone #1: No later than April 1, 2023, the provider must submit a signed Health Information Exchange Scope of Work (HIE SOW) and the CommunityCares Access Agreement indicating SDOH participation to the HIE organization. The HIE 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.
  - 1. For providers that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  - 1. For providers that have participated in DAP SDOH requirements in CYE 2023:
    - a. No later than September 30, 2023, initiate use of the CommunityCares referral system operated by the HIE organization.
    - b. No later than May 1, 2024: After all the onboarding requirements have been met and the provider has access to the platform, and through September 30, 2024, the provider must regularly utilize the CommunityCares referral system operated by the HIE organization. This will be measured by facilitating at least 10 referrals per month that resulted from utilizing the social-needs screening tool in CommunityCares. All referrals entered into the system by the provider

will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.

2. For providers that have not participated in DAP SDOH requirements in CYE 2023:
  - a. No later than November 1, 2023, complete the CommunityCares Access Agreement and the HIE Participant Agreement, as required, and
  - b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the system.

If a facility has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the facility to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a provider submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that provider will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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 2024.

## **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 2021 (October 1, 2020, through September 30, 2021) to CYE 2022 (October 1, 2021, through September 30, 2022) 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, 2023, 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 2.0% or more of its services occurred for dates of service on a weekend for the period October 1, 2021, through September 30, 2022. Only approved and

adjudicated AHCCCS claims and encounters as of March 15, 2023, 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 C. Providers that increased the amount of bundled services by 5.0% will qualify for this DAP. AHCCCS will review claims and encounters for the period of July 1, 2021, through December 31, 2021, and again from July 1, 2022, through December 31, 2022, and if there is a 5.0% 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, 2023 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

Home and Community Based Services (HCBS) providers are eligible for DAP increases under the following criteria. The DAP increase will be applicable 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. Electronic Visit Verification (EVV) Soft Claim Edit Compliance (0.5%)

In relation to the EVV DAP only, HCBS providers are eligible to receive only one of the EVV DAPs. If the provider qualifies for both DAPs, AHCCCS will award the DAP with the higher percentage increase.

HCBS providers that participate in the EVV system will qualify for a DAP increase of 0.5% if the provider has at least 85% of processed visits with dates of service from September 1, 2022, to November 30, 2022. A visit is considered “processed” when the visit has passed claims validation. The claim must have been either an auto-verified visit at the time of service delivery or the provider must have been able to reconcile missing or incomplete visits in accordance with the audit documentation guidelines prior to claims submission.

The DAP increase will be applicable to the specified services as outlined in Attachment D.

b. Electronic Visit Verification (EVV) Hard Claim Edit Compliance (2.0%)

In relation to the EVV DAPs only, HCBS providers are eligible to receive only one of the EVV DAPs. If the provider qualifies for both DAPs, AHCCCS will award the DAP with the higher percentage increase.

Beginning January 1, 2023 all claims must pass EVV validation before being paid. HCBS providers that participate in EVV will qualify for a DAP increase of 2.0% if the provider has at least 85% of claims submitted with dates of service from January 1, 2023, to March 30, 2023 pass claims validation on the first claim submission. A visit is considered “processed” when the visit has passed claims validation. The claim must have been either an auto-verified visit at the time of service delivery or the provider must have been able to reconcile missing or incomplete visits in accordance with the audit documentation guidelines prior to the submission of the first claim.

The DAP increase will be applicable to the specified services as outlined in Attachment D.

c. 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.

- i. Milestone #1: No later than April 1, 2023, the provider must have in place an active participation agreement with the Health Information Exchange (HIE) organization and submit a signed Health Information Exchange Scope of Work (HIE SOW) to the HIE. The HIE 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. By submitting the HIE SOW, the provider agrees to achieve the following milestones by the specified dates or maintain its participation in the milestone activities if they have already been achieved.
  1. For providers that have not participated in DAP HIE requirements for CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2: No later than May 1, 2023, 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, ADT Alerts, Clinical Notifications, or an interface that delivers patient data into the provider’s EHR system. If it is the provider’s first year in the DAP HIE initiative, then the provider must meet this milestone no later than January 1, 2024.

If the provider has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the provider to maintain its participation in those milestone activities for the period April 1, 2023, through September 30, 2024. Additionally, if the provider submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that provider will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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

The DAP increase will be applicable to the specified services as outlined in Attachment D-2. In relation to this DAP initiative only, the Social Determinants of Health Closed Loop Referral System is CommunityCares. Providers that meet the following milestones are eligible to earn a 2.0% DAP.



- i. Milestone #1: No later than April 1, 2023, the clinic must submit a signed Health Information Exchange Scope of Work (HIE SOW) and the CommunityCares Access Agreement indicating SDOH participation to the HIE organization. The HIE SOW must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the provider requests to participate in the DAP.
  1. For providers that have not participated in DAP HIE requirements in CYE 2023, send an email requesting an HIE SOW to [DAP@contexture.org](mailto:DAP@contexture.org).
- ii. Milestone #2:
  1. For providers that have participated in DAP SDOH requirements in CYE 2023:
    - a. No later than September 30, 2023, initiate use of the CommunityCares referral system operated by the HIE organization.
    - b. No later than May 1, 2024: After all the onboarding requirements have been met and the provider has access to the system, and through September 30, 2024, the provider must regularly utilize the CommunityCares referral system operated by the HIE organization. This will be measured by facilitating at least 10 referrals per month that resulted from utilizing the social-needs screening tool in CommunityCares. All referrals entered into the system by the provider will be counted toward volume requirements, tracked monthly, and reported as a final deliverable by June 1, 2024.
  2. For providers that have not participated in DAP SDOH requirements in CYE 2023:
    - a. No later than November 1, 2023, complete SDOH Closed-Loop System Agreement and HIE Participant Agreement, as required, and
    - b. No later than April 1, 2024, have onboarding completed by working with the HIE to submit all HIE requirements prior to gaining access to the system.

If a provider has achieved one or more of the CYE 2024 milestones as of April 1, 2023, the HIE SOW must include a commitment by the provider to maintain its participation in those milestone activities for the period of April 1, 2023, through September 30, 2024. Additionally, if a provider submits a HIE SOW and receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, that clinic will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

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 2024.

### **13. Therapeutic Foster Homes (Up to 20.0%)**

Therapeutic Foster Home providers (Provider Type A5) are eligible for DAP increases under the following criteria.

a. New Therapeutic Foster Homes (10.0%)

Newly licensed Therapeutic Foster Homes will qualify for a DAP increase of 10.0% on codes S5140 and S5145 if the provider has an AHCCCS registration date between April 1, 2022, and March 31, 2023.

b. Therapeutic Foster Home Continuous Therapeutic Foster Care Services (10.0%)

Therapeutic Foster Homes will qualify for a 10.0% DAP increase on codes S5140 and S5145, as identified by the AHCCCS provider ID based on the following factors:

- i. A member was provided at least 60 days of continuous services between October 1, 2021, and December 31, 2022.
- ii. Only approved and adjudicated AHCCCS claims and encounters will be utilized in the computations.
- iii. AHCCCS will compute claims and encounters for this purpose as of March 15, 2023, to determine which providers meet the minimum threshold.
- iii. AHCCCS will not consider any other data when determining which providers qualify for the DAP increase.

AHCCCS MCOs may pay the DAP to a contracting entity who subcontracts with a qualifying Therapeutic Foster Home; they shall then require the payment to be further distributed by the subcontractor and received by the Therapeutic Foster Home or the AHCCCS MCO may pay the DAP directly to the qualifying Therapeutic Foster Home.

AHCCCS' MCOs and subcontractors 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 2024.

#### 14. Multiple Provider Types

The Provider Types included in Attachment E are eligible for DAP increases under the following criteria.

a. Provider Workforce Goal and Data Reporting (1.0%)

Providers that participated in the CYE 2023 Provider Workforce Development Plan (P-WFDP) Under Part 'B' or did not participate in the CYE 2023 P-FWDP DAP, and meet the following milestones are eligible to earn 1.0% DAP increase on all services billed on CMS 1500 Form.

- i. Milestone #1: No later than March 15, 2023, submit a Provider Workforce Goal Setting and Data Reporting Compliance Attestation to the following email address: [WFD@azahcccs.gov](mailto:WFD@azahcccs.gov). The attestation 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:

1. For providers that have participated in the CYE 2023 P-WFDP under Part ‘B’:
  - a. By April 30, 2023, a P-WFDP will be submitted. The P-WFDP must satisfy the requirements of both the CYE 2023 P-WFDP DAP and the MCO’s requirements regarding the development and submission of Provider Workforce Development Plans.
2. For providers that did not participate in the CYE 2023 P-WFDP DAP attest that:
  - a. By April 30, 2024 they will have developed a Workforce Development Plan for the agency and that it will satisfy the following requirements:
    1. The MCO’s contract requirements regarding the development and submission of Provider Workforce Development Plans and;
    2. The Provider’s Workforce Development Plans must specify three types of goals the provider intends to achieve during the time period beginning January 1, 2023 and ending December 31, 2023. The three required goals are for improving or maintaining workforce; *Retention*, *Turnover*, and *Time to Fill* difficult to hire staff positions.
    3. The strategies the provider intends to use to improve or maintain workforce; *Retention*, *Turnover*, and *Time to Fill* difficult to hire staff positions.
- iii. Milestone #3: No later than April 30, 2024, the provider will submit the following benchmark metrics using the formulas found on the AZ Association of Health Plans website (<https://azahp.org/azahp/awdfc/az-healthcare-workforce-goals-and-metrics-assessment/> under Data Collection) to calculate the provider’s workforce for the time period beginning January 1, 2023, and ending December 31, 2023:
  - i. Average Retention Rate (e.g., 50%)
  - ii. Average Turnover Rate (e.g., 60%)
  - iii. Time to Fill the most difficult positions (e.g., RNs 28 days, DCWs 12 days, etc.).
  - iv. Submit the workforce; *Retention*, *Turnover*, and *Time to Fill* goals the provider intended to achieve during the time period beginning January 1, 2023, and ending December 31, 2023:

Providers can determine the eligibility of their agency to participate in the CYE 2024 Provider Workforce Goal and Data Reporting\_DAP by checking the CYE 2023 P-WFD Qualifying Provider list.

- Providers that participated in the CYE 2023 P-WFDP under Part B will see a notation next to the agency’s name stating: “Not Submitted - Part B”.
- Providers that did not participate in the CYE 2023 P-WFDP DAP will not see the name of their agency listed.
- Providers participating in the CYE 2023 P-WFDP DAP under Part “A” DO NOT qualify for this DAP.

The [CYE 2024 Provider Workforce Goal and Data Reporting](#) Attestation template can be found on the AHCCCS website at the following location:

<https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/qualifyingproviders.html>

b. Employment Staff Training (2.0%)

Habilitation providers (Provider Type 39), Behavioral Health Outpatient Clinics (Provider Type 77), Community Service Agencies (Provider Type A3), and Integrated Clinics (Provider Type IC) that meet the following milestones are eligible to earn a 2.0% DAP increase on codes T2019, H2025, H2026, and H2027.

- i. Milestone #1: No later than April 1, 2023, submit an Employment Staff Training Attestation to the following email address: [AHCCCSDAP@azahcccs.gov](mailto:AHCCCSDAP@azahcccs.gov). The attestation must contain each facility, including AHCCCS ID(s) and corresponding NPI(s), that the provider requests to participate in the DAP.
- ii. Milestone #2: No later than December 31, 2023, employment provider staff must complete an ACRE approved (Association of Community Rehabilitation Educators) training provided by a single, third-party entity and must be, at a minimum, 40 hours in duration.
  1. For providers that participated in Employment Staff Training requirements for CYE 2023:
    - a. In order to continue receiving this DAP, the provider must submit a roster of staff who have completed the training, with the staff names and dates of completion, along with the copy(ies) of the “Certificate of Achievement” by April 30, 2023.
  2. For providers that have not participated in Employment Staff Training requirements in CYE 2023:
    - a. The provider must submit to AHCCCS, no later than December 31, 2023, a roster of staff who have completed the training, with the staff names and dates of completion, along with the copy(ies) of the “Certificate of Achievement”.

The Employment Staff Training Attestation can be found on the AHCCCS website at the following location: <https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/qualifyingproviders.html>

If a provider submits the attestation and receives the DAP increase for CYE 2024, but does not train its staff by December 31, 2023, that provider will be ineligible to receive this DAP for CYE 2025 if a DAP is available at that time.

c. Pipeline AZ (1.0%)

The Provider Types included in Attachment E that meet the following milestones are eligible to earn a 1.0% DAP increase on all services.

- i. Milestone #1: No later than April 1, 2023, the provider must be registered with Pipeline AZ at: <https://pipelineaz.com/page/DAP>.
- ii. Milestone #2: No later than August 30, 2023, the provider must have developed the company page by completing the Company Details, Overview, Culture, Perk, and Benefits sections.

- iii. Milestone #3: No later than January 31, 2024, the provider must post relevant current open roles with 50% of the posts being entry-level roles to the provider's Pipeline AZ page.
- iv. Milestone #4: Between February 1, 2024, and August 31, 2024, the provider must maintain at least 10 employment interactions per month. Employment interactions may consist of, viewing matched candidate profiles, messaging candidates within the platform, documenting hires, and/or renewing or editing existing job posts. All interactions will be counted toward volume requirements, tracked monthly, and reported to AHCCCS.

If the provider receives the DAP increase for CYE 2024 but fails to achieve one or more of the milestones by the specified date or fails to maintain its participation in the milestone activities, the provider will be ineligible to receive the HIE DAP for CYE 2025, if a DAP is available at that time.

## **15. 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 Clinic (Provider Type IC), that are contracted to provide crisis services. 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 Scope of Work (SOW) to the HIE by December 31, 2022. Crisis providers that have submitted the SOW and 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, 2023, the provider must have in place an active participation agreement with the HIE organization and submit an HIE SOW 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.
- ii. Milestone #2: No later than April 30, 2023, the provider shall work with the HIE organization and their EHR vendor to attend a vendor discovery call and 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.
- iii. Milestone #3: No later than November 30, 2023, 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 meets the required Crisis Bed Registry specifications, which is defined by the HIE organization and outlined in Attachment A.
- iv. Milestone #4: No later than March 31, 2024, 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
2/3/2023	Preliminary Public Notice
2/9/2023	Tribal Consultation
3/5/2023	Public Notice Comments Due
3/27/2023	Final Public Notice
Early June 2023	Post Notice of Proposed Rulemaking (NPRM)
Mid-July 2023	NPRM Public Comments Due
7/1/2023	Requests for Approval Due to CMS
8/15/2023	MCO Capitation Rates Due to CMS (including funding for DAPs)
9/15/2023	Qualifying Provider List Posted to AHCCCS Website

### Other Future Considerations:

AHCCCS will consider implementing other DAP initiatives in CYE 2025. The following items are areas of interest for future consideration.

1. Health Information Exchange Initiatives
  - a. Anticipates CYE 2025 DAP criteria for multiple provider types to include expansion of participation in CommunityCares operated by the HIE.
  - b. Anticipates CYE 2025 DAP criteria for multiple provider types to include expansion of participation in AzHDR operated by the HIE.
  - c. Anticipates CYE 2025 DAP criteria for multiple provider types to include expansion of participation in the HIE.
  - d. Anticipates in CYE 2025 DAP criteria for Nursing facilities to include the development of a data quality improvement plan, as defined and in collaboration with the HIE.
  - e. Beginning in CYE 2025, data quality will begin to require the data quality measures to be measured against standard value sets and will be referred to as 'qualitative measure reporting'.
  - f. Anticipates in CYE 2025 criteria for multiple provider types could include criteria directed at continuing the development and execution of a data quality improvement effort, to include all data segments required on every transaction sent to the HIE.
2. Nursing Facilities
  - a. Percentage of long-stay residents who received an antipsychotic medication.
3. Multiple Provider Types
  - a. Training standard for Peer Support Recovery Supervision.

**Attachment A**

CYE 2024 DAP HIE Data Quality Standards

The HIE will be measuring 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](http://www.contexture.org/DAPspecs). Please be sure to review all HIE requirements.

**Types (02, CAH, 71, B1, B3, B5, B6, C4)**

All electronic submissions must be received through standard HL7. The following standards are required.

Measures	Standard	Measure Inclusions	Notes
<b>Measure 1:</b> Data source and data site information must be submitted on all ADT transactions.	HL7	MSH.4.1	Participant Mnemonic <a href="#">HL7_MSH 4.1</a>
		PV1.3.4	Locations mapped value, i.e. locations long name description must be sent <a href="#">HL7_PV1.3.4_Facility</a>
<b>Measure 2:</b> Event type must be properly coded on all ADT transactions.	HL7	MSH.9.1	<a href="#">HL7_MSH 9.1 Message Types</a> (List)
		MSH.9.2	<a href="#">HL7_MSH 9.2 Event Type</a> (List)
<b>Measure 3:</b> Patient class must be properly coded on all appropriate ADT transactions.	HL7	PV1.2	<a href="#">HL7_PV1.2 Patient Class</a> (List)
<b>Measure 4:</b> Patient demographic information must be submitted on all ADT transactions.	HL7	PID 3.1	<a href="#">HL7_PID 3.1 Id</a>
		PID 5.1	<a href="#">HL7_PID 5_Patient Name</a> – see PID 5.1 Family Name
		PID 5.2	<a href="#">HL7_PID 5_Patient Name</a> – see PID 5.2 Given Name
		PID 7.1	<a href="#">HL7_PID 7 Date/Time of Birth</a>
		PID 8.1	<a href="#">HL7_PID 8.1 Administrative Sex/Identifier</a>
		PID 11.1	<a href="#">HL7_PID 11 Patient Address</a> – see PID 11.1 Street Address
		PID 11.3	<a href="#">HL7_PID 11_Patient Address</a> – see PID 11.3 City

		PID 11.4	<a href="#">HL7 PID 11 Patient Address</a> – see PID 11.4 State or Province
		PID 11.5	<a href="#">HL7 PID 11 Patient Address</a> – see PID 11.5 Zip or Postal Code
		PID 15.1	<a href="#">ISO-639</a> language code set values, will be required in CYE 2025 <a href="#">HL7 PID 15 Primary Language</a> – see PID 15.1 Identifier & PID 15.2 Text
		PID 15.2	
<b>Measure 5: Race</b>	HL7	PID 10.1	CDC code set values will be required in CYE 2025  CYE 2024 Minimum Requirement: <a href="#">HL7/CDCREC RaceValue&amp;Description</a>  Expanded Code Set: <a href="#">CDC Race&amp;Ethnicity Code Set v1.2</a>  <a href="#">HL7 PID 10 Race</a> – see PID 10.1 Identifier & PID 10.2 Text
		PID 10.2	
<b>Measure 6: Ethnicity</b>	HL7	PID 22.1	CDC code set values will be required in CYE 2025  CYE 2024 Minimum Requirement: <a href="#">HL7 Ethnic Group</a> <a href="#">CDC Ethnic Group</a>  Expanded Code Set: <a href="#">CDC Race&amp;Ethnicity Code Set v1.2</a>  <a href="#">HL7 PID 22 Ethnic Group</a> – see PID 22.1 Identifier & PID 22.2 Text
		PID 22.2	
<b>Measure 7: Discharge Diagnosis</b> <i>Initial quality measure will only include diagnosis upon discharge A03</i>	HL7	DG1.2.1	Standard I10 code set values will be required in CYE 2025 <a href="#">HL7 DG1.2 Diagnosis Coding Method</a>
		DG 1.3.1	<a href="#">HL7 DG1.3 Diagnosis Code</a> – see DG1.3.1 Identifier, DG1.3.2 Text, DG1.3.3 Name of Coding System
		DG1.3.2	
		DG1.3.3	
		DG1.5.1	<a href="#">HL7 DG1.5 Diagnosis Date/Time</a>
		DG1.6.1	HL7 senders must send: A – Admitting or



			<p>W – Working or F – Final</p> <p><a href="#">HL7 DG1.6 Diagnosis Types</a></p> <p><a href="#">HL7 DG1.6.1 Identifier</a> – refer to diagnosis types</p>
<b>Measure 8:</b> Overall Completeness	HL7	Includes all the measure inclusions within this table	

**Type: Integrated Clinics (Type IC), Behavioral Outpatient Clinics (77), & Nursing Facilities (22)**

All electronic submissions from facilities & clinics must be received through one chosen standard, either HL7 or CCD document architecture. The following standards are required.

Measures	Standard	HL7	CCD XPath	Note
<b>Measure 1:</b> Data source and data site information on all transactions.	HL7 or CCD	MSH.4.1	N/A	Participant Mnemonic <a href="#">HL7_MSH 4.1</a>
		PV1.3.4	component/structuredBody/component/section/entry/encounter/participant/participantRole/playingEntity/name	Locations mapped value, i.e. locations long name description must be sent <a href="#">HL7 PV1.3.4 Facility</a>
<b>Measure 2:</b> Event type must be properly coded on all transactions.	HL7 or CCD	MSH.9.1	N/A	<a href="#">HL7_MSH 9.1 Message Types</a> (List)
		MSH.9.2	N/A	<a href="#">HL7_MSH 9.2 Event Type</a> (List)
<b>Measure 3:</b> Patient demographic information must be submitted on all transactions.	HL7 or CCD	PID 3.1	recordTarget/patientRole/id/\$.extension	<a href="#">HL7_PID 3.1 Id</a>
		PID 5.1	recordTarget/patientRole/patient/name/family	<a href="#">HL7_PID 5 Patient Name</a> – see PID 5.1 Family Name
		PID 5.2	recordTarget/patientRole/patient/name/given	<a href="#">HL7_PID 5 Patient Name</a> – see PID 5.2 Given Name
		PID 7.1	recordTarget/patientRole/patient/birthTime/\$.value	<a href="#">HL7_PID 7 Date/Time of Birth</a>
		PID 8.1	recordTarget/patientRole/patient/administrativeGenderCode/\$.code	<a href="#">HL7_PID 8.1 Administrative Sex/Identifier</a>
		PID 11.1	recordTarget/patientRole/address/streetAddressLine	<a href="#">HL7_PID 11 Patient Address</a> – see PID 11.1 Street Address
		PID 11.3	recordTarget/patientRole/address/city	<a href="#">HL7_PID 11 Patient Address</a> – see PID 11.3 City
		PID 11.4	recordTarget/patientRole/address/state	<a href="#">HL7_PID 11 Patient Address</a> – see PID 11.4 State or Province

		PID 11.5	recordTarget/patientRole/address/postalCode	<a href="#">HL7 PID 11 Patient Address</a> – see PID 11.5 Zip or Postal Code
		PID 15.1	recordTarget/patientRole/patient/languageCommunication/languageCode/\$.code	<a href="#">ISO-639</a> language code set values will be required in CYE 2025  <a href="#">HL7 PID 15 Primary Language</a> – see PID 15.1 Identifier & PID 15.2 Text
		PID 15.2	N/A	
<b>Measure 4: Race</b>	HL7 or CCD	PID 10.1	recordTarget/patientRole/patient/raceCode/\$.code	CDC code set values will be required in CYE 2025 CYE 2024 Minimum Requirement: <a href="#">HL7/CDCREC_RaceValue&amp;Description</a>  Expanded Code Set: <a href="#">CDC Race&amp;Ethnicity Code Set v1.2</a>  <a href="#">HL7 PID 10 Race</a> – see PID 10.1 Identifier & PID 10.2 Text
		PID 10.2	recordTarget/patientRole/patient/raceCode/\$.displayName	
<b>Measure 5: Ethnicity</b>	HL7 or CCD	PID 22.1	recordTarget/patientRole/patient/ethnicGroupCode/\$.code	CDC code set values will be required in CYE 2025  CYE 2024 Minimum Requirement: <a href="#">HL7 Ethnic Group</a> <a href="#">CDC Ethnic Group</a>  Expanded Code Set: <a href="#">CDC Race&amp;Ethnicity Code Set v1.2</a>  <a href="#">HL7 PID 22 Ethnic Group</a> – see PID 22.1 Identifier & PID 22.2 Text
		PID 22.2	recordTarget/patientRole/patient/ethnicGroupCode/\$.displayName	
<b>Measure 6: Diagnosis</b>  <i>Initial Quality Measure will only include diagnosis upon discharge A03</i>	HL7 or CCD	DG1.2.1	structuredBody/component/section/entry/encounter/entryRelationship/act/entryRelationship/observation/value/\$.codeSystemName	Standard I10 code set values will be required in CYE 2025
		DG1.3.1	component/structuredBody/component/section/entry/encounter/entryRelation	<a href="#">HL7 DG1.3 Diagnosis Code</a> – see DG1.3.1 Identifier, DG1.3.2 Text, DG1.3.3 Name of Coding System

			ship/act/entryRelationship/observation/value/\$.code	
		DG1.3.2	component/structuredBody/component/section/entry/encounter/entryRelationship/act/entryRelationship/observation/value/\$.displayName	
		DG1.3.3	structuredBody/component/section/entry/encounter/entryRelationship/act/entryRelationship/observation/value/\$.codeSystemName	
		DG1.5.1	/ClinicalDocument/component/structuredBody/component/section/entry/encounter/entryRelationship/act/entryRelationship/observation/effectiveTime/low@value	<a href="#">HL7_DG1.5_Diagnosis Date/Time</a>
		DG1.6.1		<p>HL7 senders must send:            A – Admitting or            W – Working or            F – Final</p> <p><a href="#">HL7_DG1.6_Diagnosis Types</a></p> <p><a href="#">HL7_DG1.6.1_Identifier</a> – refer to diagnosis types</p>
<b>Measure 7: Overall Completeness</b>	HL7 or CCD	Includes all the measure inclusions within this table		

**Attachment B - Example DAP HIE Data Quality Standard**

Example – Hospital A:

Hospital A receives an Initial Data Quality Profile with measurements for ADT data submitted in July 2023. Based on Hospital A’s initial measurements, the following table shows what measurements Hospital A must achieve on the Final Data Quality Profile that is based on February 2024 data.

Measure	Initial Data Quality Profile Measurement	Measurement Target (10% Improvement or Minimum/Threshold Achievement)	Notes
1 - Data Source & Site	60%	70%	Must achieve a 17% improvement to meet the 70% minimum standard.
2 - Event Type	75%	82.5%	10% improvement.
3 - Patient Class	95%	95%	No improvement needed - must maintain performance above 90% upper threshold.
4 - Patient Demographics	88%	90%	Must meet 90% upper threshold, full 10% improvement not required.
5 – Race	55%	70%	Must achieve 28% improvement to meet the 70% minimum standard.
6 – Ethnicity	55%	70%	Must achieve 28% improvement to meet the 70% minimum standard.
7 – Diagnosis	89%	90%	Must meet 90% upper threshold, not full 10% improvement
8 – Overall Completeness	77%	84.7%	10% improvement.

**Attachment B-2 - Example DAP HIE Quality Performance Criteria**

Example – Integrated Clinic A

Integrated Clinic A receives an Initial Data Quality Profile with measurements for data submitted in July 2021. Based on clinic A’s initial measurements, the following table shows what measurements Clinic A must achieve on the Final Data Quality Profile that is based on March 2022 data.

Measure	Initial Data Quality Profile Measurement	Measurement Target (10% Improvement or Minimum Threshold Achievement)	Notes
1 - Data Source & Site	60%	70%	Must achieve a 17% improvement to meet the 70% minimum standard.
2 – Patient demographics	75%	82.5%	10% improvement.
3 – Race	95%	95%	No improvement needed - must maintain performance above 90% upper threshold.
4 – Ethnicity	95%	95%	No improvement needed - must maintain performance above 90% upper threshold.
5 – Language preference	95%	95%	No improvement needed - must maintain performance above 90% upper threshold.
6 - Overall Completeness	77%	84.7%	10% improvement.

**Attachment C- Dental Services**

<b>Service</b>	<b>Service Codes</b>	<b>Description</b>
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 D - HCBS EVV Compliance**

The HCBS EVV Compliance DAPs are applicable to the following POS, Provider Types, and service codes only when used in combination with each other. A qualifying service must be provided by a qualifying Provider Type with a qualifying POS in order to qualify for the DAP.

Place of Service Description	POS Code
Home	12
Assisted Living Facility	13
Other	99

Provider Description	Provider Type
Attendant Care Agency	PT 40
Behavioral Health Outpatient Clinic	PT 77
Community Service Agency	PT A3
Fiscal Intermediary	PT F1
Habilitation Provider	PT 39
Home Health Agency	PT 23
Integrated Clinic	PT IC
Non-Medicare Certified Home Health Agency	PT 95
Private Nurse	PT 46

Service	Service Codes
Attendant Care	S5125
Companion Care	S5135 and S5136
Habilitation	T2017
Home Health (aide, therapy, nursing services)	Nursing (G0299, G0300, S9123, and S9124) Home Health Aide (T1021) Therapies Physical Therapy (G0151 and S9131) Occupational Therapy (G0152 and S9129) Respiratory Therapy (S5181) Speech Therapy (G0153 and S9128)
Homemaker	S5130
Personal Care	T1019
Respite	S5150 and S5151



**Attachment D-2 - HCBS SDOH DAP**

The HCBS SDOH DAP is applicable to the following Provider Types and service codes only when used in combination with each other. A qualifying service must be provided by a qualifying Provider Type in order to qualify for the DAP.

<b>Provider Description</b>	<b>Provider Type</b>
Attendant Care Agency	PT 40
Fiscal Intermediary	PT F1
Habilitation Provider	PT 39
Home Health Agency	PT 23
Non-Medicare Certified Home Health Agency	PT 95
Private Nurse	PT 46

<b>Service</b>	<b>Service Codes</b>
Attendant Care	S5125
Companion Care	S5135 and S5136
Habilitation	T2017
Home Health (aide, therapy, nursing services)	Nursing (G0299, G0300, S9123, and S9124) Home Health Aide (T1021) Therapies Physical Therapy (G0151 and S9131) Occupational Therapy (G0152 and S9129) Respiratory Therapy (S5181) Speech Therapy (G0153 and S9128)
Homemaker	S5130
Personal Care	T1019
Respite	S5150 and S5151
Skills Training	H2014

**Attachment E -Provider Workforce DAP and Pipeline AZ DAP**

The Provider Workforce DAP and Pipeline AZ DAP are applicable to the following Provider Types.

<b>Provider Description</b>	<b>Provider Type</b>
Adult Day Health	PT 27
Assisted Living Home	PT 36
Attendant Care	PT 40
Behavioral Health Outpatient Clinic	PT 77
Community Service Agency	PT A3
EPD HCBS	PT 81
Habilitation Provider	PT 39
Home Health Agency	PT 23
Integrated Clinic	PT IC
Non-Medicare Certified Home Health Agency	PT 95
Rural Substance Abuse Transitional Agency	PT B5
Subacute Facility	PT A6

### Attachment F - HIE Strategy by Provider Type

HIE Strategy by Provider Type Updated 1/6/2023									
Provider Types	CYE 17	CYE 18	CYE 19	CYE 20	CYE 21	CYE 22	CYE 23	CYE 24	CYE 25
Hospitals	Agreement	Agreement	Milestones	Data Prep	Data Quality	Data Quality	Data Quality	Data Quality	Data Quality
IHS/638 Facilities					Milestones	Data Prep	Data Quality	Data Quality	Data Quality
Integrated Clinics (ICs)			Milestones	Milestones	Data Access	Data Prep	Data Quality	Data Quality	Data Quality
BH OP Clinics					Data Access	Milestones	Data Prep	Data Quality	Data Quality
Nursing Facilities						Milestones	Data Access	Data Prep	Data Quality
HCBS Providers (PT 49, PT 23)							Data Access	Data Access	Data Access
Physicians, PAs, etc.							Data Access	Data Access	Milestones
Agreement	Execute participation agreement with qualifying HIE.								
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.								