AHCCCS State Plan Amendments Update

Tribal Consultation January 22, 2014 Phoenix, Arizona

APR-DRG and 25-day Inpatient Limit

- Per state statute, AHCCCS is preparing to implement a new inpatient reimbursement methodology.
- This new methodology will move away from paying on a per diem basis to paying for diagnosis based groups.
- For more information on the APR-DRG methodology please see the AHCCCS website at: http://www.azahcccs.gov/commercial/ProviderBilling/DRGBasedPayments.aspx
- This will not change how AHCCCS reimburses I.H.S. and 638 facilities; the All Inclusive Rate will still be used.
- This will, however, end the 25 day Inpatient limit effective October 1, 2014.

Prevention and Wellness

 This amendment clarifies that the AHCCCS program covers preventive and wellness services: as recommended by the U.S. Preventive Services Task Force in the "A" and "B" lists; Advisory Committee for Immunization Practices recommended vaccines; preventive care and screening for infants, children and adults recommended by HRSA's Bright Futures program; and additional preventive services for women recommended by the Institute of Medicine.

Definition of habilitation benefit

- This amendment clarifies that adults can receive Physical Therapy (PT) for the purpose of rehabilitation with a 15 visit limit.
- This amendment also clarifies that adults can receive PT with a 15 visit limit for the purpose of acquiring or maintaining a skill or function.
- Physical Therapy is already covered under the benefits payments in the 1115 Waiver.
 Once this SPA becomes effective, the per member per month payment amount will be decreased to show that this new benefit has been added.

Coverage for over-the-counter medications

- This amendment was requested by CMS to clarify the AHCCCS benefit of covered overthe-counter medications.
- It does not introduce a new benefit.

Medically Preferred Treatment Options (HB2010)

 HB2010 required AHCCCS to provide services that are medically recognized as a preferred treatment option in accordance with CMS guidelines and are less expensive than other treatment or surgical options.

- The legislation provides AHCCCS with the authority to prescribe which treatments fall into these guidelines and dictate the provider types that will be authorized to perform the specified treatment options.
- The legislation also requires AHCCCS to report on the utilization of services in accordance with this section by January 1, 2016.
- AHCCCS has identified three services that can be offered as part of this program:
 - o Halo to treat cervical fracture instead of surgery;
 - Walking boot to treat fractures or severe ligament injuries instead of a surgical procedure or serial casting; and
 - o Knee orthotics for crutch dependent ambulation instead of a wheelchair.