

ARIZONA DEPARTMENT  
OF HEALTH SERVICES

# Welcome to today's Tribal Consultation meeting!

While you are waiting TEST YOUR AUDIO.

LISTEN FOR MUSIC.

You were automatically muted upon entry.

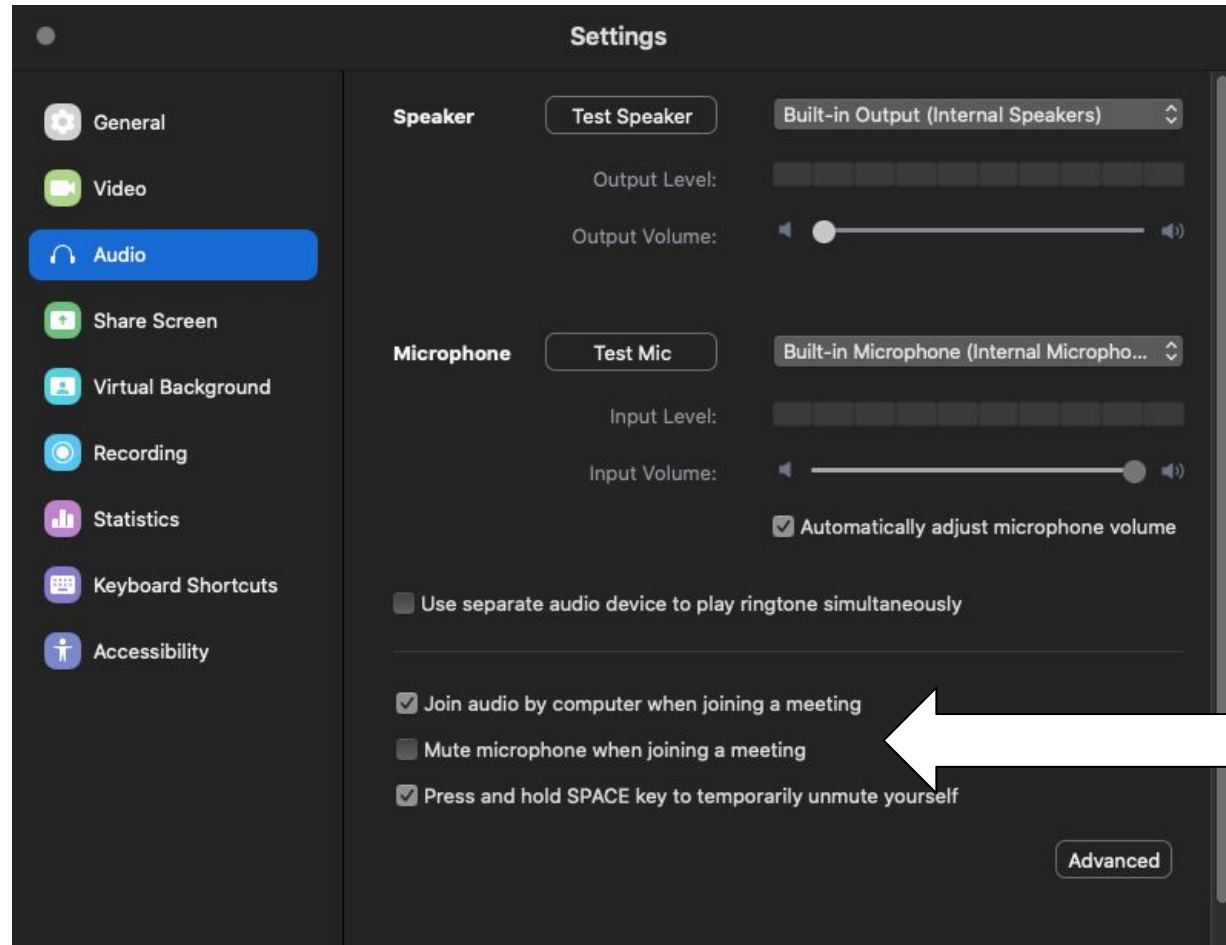
Please only join by phone or computer.

Please use the chat feature for questions or raise your hand.



Thank you.

# Audio Settings



The screenshot shows the Zoom application settings window, specifically the Audio section. On the left is a sidebar with various settings categories: General, Video, Audio (highlighted in blue), Share Screen, Virtual Background, Recording, Statistics, Keyboard Shortcuts, and Accessibility. The main panel is titled 'Settings' and is divided into two sections: 'Speaker' and 'Microphone'. The 'Speaker' section includes a 'Test Speaker' button, a dropdown menu set to 'Built-in Output (Internal Speakers)', an 'Output Level' bar, and an 'Output Volume' slider. The 'Microphone' section includes a 'Test Mic' button, a dropdown menu set to 'Built-in Microphone (Internal Micropho...', an 'Input Level' bar, an 'Input Volume' slider, and a checked checkbox for 'Automatically adjust microphone volume'. Below these sections are several checkboxes: 'Use separate audio device to play ringtone simultaneously' (unchecked), 'Join audio by computer when joining a meeting' (checked), 'Mute microphone when joining a meeting' (unchecked), and 'Press and hold SPACE key to temporarily unmute yourself' (checked). An 'Advanced' button is located at the bottom right. A large white arrow points from the right edge of the image towards the 'Join audio by computer when joining a meeting' checkbox.

**Settings**

**Speaker** Test Speaker Built-in Output (Internal Speakers)

Output Level: [Progress Bar]

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**Microphone** Test Mic Built-in Microphone (Internal Micropho...)

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Automatically adjust microphone volume

Use separate audio device to play ringtone simultaneously

Join audio by computer when joining a meeting

Mute microphone when joining a meeting

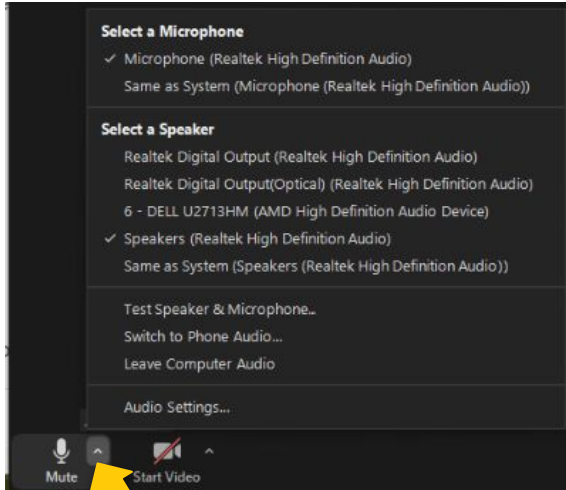
Press and hold SPACE key to temporarily unmute yourself

Advanced

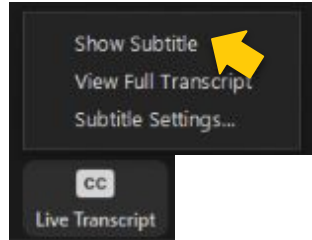
# Zoom Webinar Controls

## Navigating your bar on the bottom...

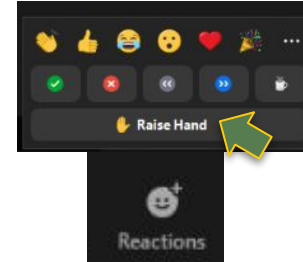
Audio Settings



Turn on Closed Captioning



Raise Hand



Chat



### KEYBOARD SHORTCUTS TO RAISE HAND

**Windows:** Alt+Y to raise or lower your hand

**Mac:** Option+Y to raise or lower your hand

# Tips for successful ZOOM PARTICIPATION



MUTE your mic  
when you're not  
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BACKGROUND  
NOISE watch when  
turning on mic



Limit the  
DISTRACTIONS  
around you



Look at the  
CAMERA  
not your screen



PREPARE & queue  
docs or links that  
you plan to share



Stay FOCUSED by  
not texting or side  
conversations



Use GALLERY  
VIEW to see all  
participants



Use CHAT to ask  
questions or share  
resources

# This Meeting Is Being Recorded

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**Please disconnect from this meeting if you do not agree to these terms.**

# Agenda

Opening Remarks & AHCCCS Updates - Carmen Heredia

Governor's Office Updates - Zaida Dedolph

Tribal Leadership Open Mic

Tribal Member Exploitation & Provider Fraud Response Plan - AHCCCS/ADHS

DFSM Updates - Leslie Short & Ewaryst Jedrasik

Quality Strategy Overview - Georgette Chukwuemeka

Federal Relations Updates - Max Seifer & Shreya Arakere

Tribal Consultation Policy Revisions - Christine Holden

Closing Remarks - Carmen Heredia

# Progress Report

## Recent Activities

- Tribal Relations email address: [TribalRelations@azahcccs.gov](mailto:TribalRelations@azahcccs.gov)
- 10/02 Governor's Office Annual Tribal Consultation Report
- 10/20 Created & shared SME Contact List with key tribal stakeholders
- 12/13 Tribal Relations Coordinator position live
- 12/14 Inaugural Tribal Policy Workgroup
- Presentations:
  - 9/6 IHS Behavioral Health Conference
  - 9/14 Arizona American Indian Integrated Health Care Forum
  - 10/4 6th Annual Hopi Behavioral Health Conference
  - 10/23 ASU Doing Research in Indigenous Communities
  - 10/24 Molina Tribal Health Symposium

# Progress Report

## Recent Activities (continued)

- Meetings/Events
  - 8/31 Gila River Indian Community
  - 9/26 Native American Connections - Patina Mountain Preserve
  - 10/19 Tonto Apache Nation
  - 10/27 ITCA Tribal Leaders Meeting (re: AIHP Tribal Verification)
  - 11/01 Traditional Healing Workgroup
  - 11/02 GOTR State Agency Tribal Liaison Meeting



# Progress Report

## Ongoing/Upcoming Initiatives

- Feedback and Input
  - Tribal Member Exploitation & Provider Fraud Response Plan
  - AIHP Tribal Verification
  - Tribal consultation policy
- Meetings/Events
  - 12/19 Navajo Nation 1:1 & Operation Rainbow Bridge Summit
  - TBD San Carlos Apache Tribe 1:1



# Quarterly Tribal Consultation Meeting

December 18, 2023



# AHCCCS CEO Updates

## Carmen Heredia

# Discussion

# Governor's Office Updates

Zaida Dedolph

*GO Health Policy Advisor*

# Discussion

# Tribal Leadership Open Mic

# Open Mic: Intent & Guidelines

Strengthen collaboration and ensure tribal leadership has a dedicated space to convey their perspectives and concerns.

## General Guidelines:

- The Tribal Leadership Open Mic will be a standing agenda item, providing regular opportunities for engagement.
- Tribal leaders and delegates have priority, and participation is at the discretion of tribal leadership and partners.
- After tribal leaders, the floor is open to Tribal health directors, TRBHA leadership, IHS leadership, UIO leadership, and MCO Tribal Teams.
- Agency's Listening Role: The agency will primarily listen and gather insights during this session.



# Open Floor



ARIZONA DEPARTMENT  
OF HEALTH SERVICES

# **Member Exploitation and Provider Fraud Response Plan**

Alex Demyan, AHCCCS Assistant Director

Marcus Johnson, AHCCCS Deputy Director

Tom Salow, ADHS Assistant Director of Public Health Licensing

Sheila Sjolander, ADHS Deputy Director of Public Health Services

# Background

- Tribal leaders requested that AHCCCS and ADHS compile a “comprehensive plan” describing what the two agencies have done and plan to do to address the ongoing fraud, waste, abuse and member exploitation scheme.
- This DRAFT plan was developed to include actions within the Agencies’ scopes, and includes actions recommended by tribal partners and internal staff.

# Purpose of Today's Presentation

- Unveil the DRAFT response plan document
- Provide a high-level overview of the plan's content, structure and flow
- Open a 60-day public comment period for feedback
  - Feedback can be sent to [tribalrelations@azahcccs.gov](mailto:tribalrelations@azahcccs.gov)
- Discuss any initial feedback and/or questions about the response plan
- To review the draft plan, please click [here](#).

# Response Plan Overview

# Introduction

- **Problem Statement:** Describes ongoing fraud, waste, and abuse in behavioral health billing, highlighting the threat to Arizona's health system and Medicaid program.
- **Actions Taken:** Provides an overview of actions taken, including provider suspensions and identification of fraudulent billing trends.
- **Collaboration:** Emphasizes collaboration with state and federal partners, indicating a multi-pronged approach.

# Background

- **Fraud Scheme Overview:** Details a widespread fraud scheme involving recruitment of vulnerable tribal AHCCCS members into unlicensed facilities.
- **Exploitation Tactics:** Describes incentives for members and bad actors, involving promises of housing, treatment, money, and exploitation of AHCCCS member ID numbers for fraudulent billing.
- **Investigation Complexity:** Highlights the complexity of the scheme, involving ghost billing, targeting the American Indian Health Program (AIHP), and trafficking of individuals.

# Comprehensive Approach: Overview

- **Multifaceted Solution:** Identifies a multifaceted solution addressing humanitarian and administrative aspects.
- **Detailed Timeline:** Outlines a detailed timeline with actions taken and planned activities involving billing changes, licensing, audits, member protections, and policy changes.
- **Partnerships:** Emphasizes collaboration with external entities, including the Governor's Office, tribal partnerships, the Attorney General's Office, law enforcement, and other stakeholders.



# Examples of Agency Actions Taken

AHCCCS and ADHS have implemented and plan to implement close to fifty individual actions to address the ongoing FWA scheme. Examples include:

- AHCCCS: Set billing thresholds and changed rates for service codes that were being exploited,
- ADHS: Prioritized and increased inspection activities,
- AHCCCS: Established the 211-press-7 incident command center for impacted members,
- ADHS: Increased enforcement actions against bad actors, and
- AHCCCS: Implemented a moratoria on enrolling new providers.

# Evaluation of Efforts

- **Monitoring and Evaluation:** Highlights ongoing evaluation through claims data monitoring, financial reporting, and provider enrollment trends.
- **Impact Assessment:** Emphasizes monitoring the real-world impacts of implemented solutions on members, tribes, and communities.
- **Prosecution Efforts:** Expresses commitment to monitoring and participating in the prosecution of perpetrators.

# Guided Discussion

# Seeking Tribal Stakeholder Feedback

- What are your initial thoughts or perceptions about the response plan?
- What does the plan do well?
- What are components of the plan that are missing?
- How do you foresee the proposed changes impacting tribal members and communities positively or negatively?
- Are there specific actions or initiatives that you believe should be prioritized as the agencies move forward with this plan?
- How can the state agencies best support tribal communities in the ongoing efforts to combat fraud, waste, and abuse?

# Open Discussion

An orange ceramic mug is the central focus, sitting on a light-colored, reflective surface. The words "Break Time" are written in a white, casual script on the side of the mug, with a white horizontal line underneath. In the background, a laptop is open, and a smartphone lies flat on the desk. A small green plant in an orange pot is also visible, though out of focus.

Break  
Time

We will resume at  
10:45 am

# Division of Fee For Service Management (DFSM) Updates

Leslie Short, DFSM Deputy Assistant Director

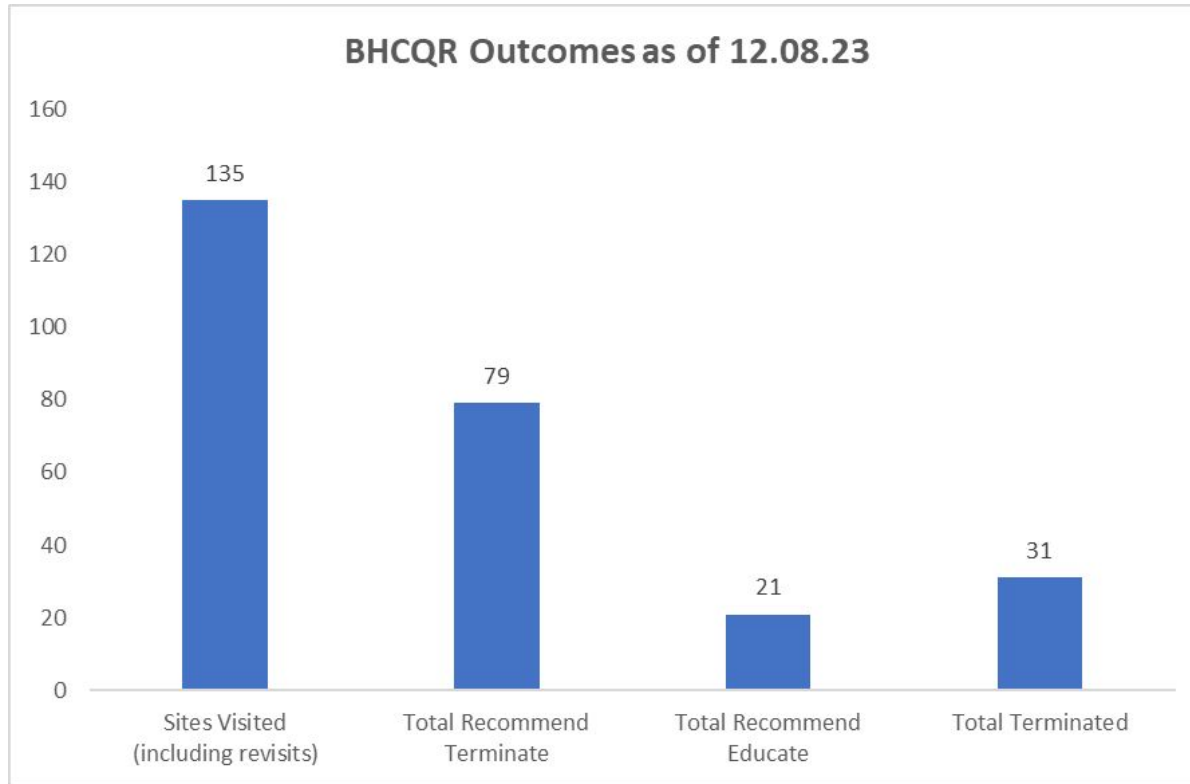
# DFSM Updates

Transforming the Fee-for-Service Program into a quality of care-focused program

- Increase proactive quality assurance on-site visits to FFS providers
- Increase Medical Management team to review provider documentation, utilization management functions, and assist with on-site visits
- Enhanced collaboration with Office of Data Analytics to ensure data driven strategies



# DFSM Behavioral Health Clinical Quality Reviews



# Proposal of Paper Claim Elimination

- AHCCCS is exploring the feasibility of eliminating paper claim submissions for all AHCCCS-registered providers.
  - Alignment with broader strategy to prevent FWA
  - Proposal would require all registered providers to submit claims electronically
  - Claims would be submitted using the AHCCCS Online Provider Portal or the Transaction Insight Portal
  - Proposed timeline mid-2024

# ROPA

## (Referring, Ordering, Prescribing and Attending Providers)

- Per 42 CFR 455.410 of the Affordable Care Act, the State Medicaid Agency must require all ordering or referring physicians, or other professionals providing services to be enrolled as participating providers.
- This means that referring, ordering, prescribing and attending (ROPA) providers must be AHCCCS-registered providers to ensure payment of items or/or services
  - Implementation for FFS only, and will start with rendering, ordering and attending providers
- AHCCCS has extended the ROPA registration deadline to 7/1/2024
- A ROPA Excepted Providers List and FAQs may be reviewed here:  
<https://www.azahcccs.gov/PlansProviders/NewProviders/ROPA.html>

# Pharmacy ROPA

Since pharmacists may act as the prescribers for immunizations administered in the pharmacy, AHCCCS created a flexibility that will allow AHCCCS to capture the required data in the system for claims payment, without requiring pharmacists to enroll a participating providers.

- Initial lists with the needed data were collected from IHS/638 pharmacies and were included in the ROPA Excepted Providers List.
- To update or be added to the excepted list, pharmacists, residents, and interns must submit the following information to: [ROPAXceptions@azahcccs.gov](mailto:ROPAXceptions@azahcccs.gov)
  - NPI
  - Provider Name
  - INDication of whether the NPI is associated with a resident, intern, or pharmacist, and
  - The beginning date associated with the associations.

# Discussion

- What concerns do you have regarding the consideration to eliminate paper claims?
- What barriers would your facility face if paper claims were eliminated?
- What would a feasible time frame be for eliminating paper claims?
- Are there additional considerations AHCCCS needs to be mindful of?

# Discussion

- What challenges are you facing, or do anticipate, with the implementation of ROPA?
- What technical assistance would be helpful for the implementation of ROPA?
- Are there additional considerations AHCCCS needs to be mindful of for the ROPA implementation?



# State Plan Amendment (SPA) Updates

Maxwell Seifer, AHCCCS State Plan Manager

# Overview of State Plan/ State Plan Amendments (SPAs)

- Each state has a Medicaid state plan that describes how the state will administer its Medicaid program.
- States must follow broad federal rules in order to receive federal matching funds, but have flexibility to design their own version of Medicaid within the federal statute's basic framework.
- In order to alter a State Plan, states must submit State Plan Amendments (SPAs), and receive approval from CMS.



# Upcoming SPAs

- **Medicaid Children's Continuous Eligibility**

This SPA establishes 12-months of Medicaid continuous eligibility for children. It is a requirement of Section 5112 of the Consolidated Appropriations Act (2023).

- **CHIP Vaccine Coverage**

This SPA confirms that Arizona provides coverage and payment of vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) and their administration without cost sharing to members.

# Upcoming SPAs

- **Medicaid and Chip Core Set Reporting**

This SPA attests to Arizona's compliance with federal requirements for mandatory Medicaid and CHIP Core Set Reporting that were established in Final Rule 88 FR 60278.

## Recently Approved SPAs

- **Rapid Whole Genome Sequencing (RWGS)**  
Establishes a payment methodology for RWGS. RWGS is used to evaluate critically ill infants up to one year of age who are admitted for inpatient hospital services and meet medical criteria.

## Tribal Feedback on Upcoming SPAs

- What questions do you have about the upcoming SPAs?
- What impact will the upcoming SPAs have on AHCCCS members in your community?
- What impact will this SPA have on AHCCCS enrolled providers in your community?
- What other concerns or suggestions should AHCCCS consider with this SPA?

# Public Comments

All SPAs are posted for Public Notice at the following website:

<https://www.azahcccs.gov/AHCCCS/PublicNotices/#SPAs>

Public Comments or Written Testimony may be submitted to AHCCCS via:

**Email:** [publicinput@azahcccs.gov](mailto:publicinput@azahcccs.gov)

## Postal Mail

AHCCCS

Attn: Division of Community Advocacy and Intergovernmental  
Relations

801 E. Jefferson St., MD 4200 Phoenix, AZ 85034

# Open Discussion



# 1115 Waiver Updates

Shreya Arakere, AHCCCS Federal Waiver & Evaluation  
Administrator

# Section 1115 of the Social Security Act

- Allows states flexibility to design Demonstration projects that promote the objectives of the Medicaid program,
- Demonstration projects are typically approved for a five-year period and can be renewed every five years, and
- Must be budget neutral, meaning that federal spending under the waiver cannot exceed what it would have been in absence of the waiver,
- Must undergo extension evaluations with an independent evaluator.



# Status of Submitted Amendments

## **KidsCare Expansion**

- Submitted to CMS November 15, 2023.
- Proposes to raise the Children's Health Insurance Program (CHIP) eligibility thresholds from 200% of the federal poverty level (FPL) to 225% FPL.
- Public comment open through Dec. 27, 2023

## **Parents as Paid Caregivers (PPCG)**

- Proposal submitted to CMS September 27, 2023.
- Continues COVID PPCG flexibility with new family support service
- Negotiations underway with CMS

# Status of Submitted Amendments

## Former Foster Youth Automatic Renewal (YATI)

- Submitted to CMS March, 2023
- Currently undergoing negotiations with CMS

## Traditional Healing

- Negotiations re-initiated with CMS July 2023.
- TH workgroup helped in answering a variety of CMS questions on services, providers, eligibility, and more.
- Now awaiting additional guidance from CMS on next steps.

# Status of Upcoming Amendments

## Pre-Release Services

- Offers a set of pre-release services to incarcerated individuals a certain number of days prior to release.
- Originally included within the H2O proposal, AHCCCS is now obtaining updated data to further contemplate changes to proposal included services and timeframe of inreach.
- In final stages of completing a Concept Paper detailing the updated the proposal.

# Status of Other Waiver Activities

## Housing and Health Opportunities (H2O)

- Implementation work has continued for targeted go live date of October 1, 2024.
- Submission of several CMS deliverables including H2O Protocol, Implementation Plan, and more available on web.

## Waiver Evaluation

- Activities underway with Independent Evaluator, HSAG.
- Evaluation Design for all Waiver Programs due to CMS January 31, 2024.

# Public Comments

Public comments or written testimony may be submitted to AHCCCS via:

[waiverpublicinput@azahcccs.gov](mailto:waiverpublicinput@azahcccs.gov)

AHCCCS, c/o Division of Community Advocacy and  
Intergovernmental Relations,  
801 E. Jefferson Street, MD 4200  
Phoenix, AZ 85034

# Open Discussion

# Division of Health Care Services (DHCS)

Georgette Chukwuemeka

*AHCCCS Strategic Performance Administrator*

# Quality Strategy Overview 2023-2024



# Quality Strategy: Definition and Requirements

Under Managed Care Regulations ([42 CFR § 438.340](#)):

- Each state contracting with Managed Care Organizations (MCOs) is required to develop and implement a written quality strategy for the purposes of describing, evaluating, and improving the quality of health care services provided by the MCO entities.
- States are required to:
  - Review and update its quality strategy as needed, but no less than once every three years,
  - Include an evaluation of the effectiveness of the quality strategy conducted within the previous three years, and
  - Post the results of the review on the state's website.

# Quality Strategy: Elements

Per Managed Care Regulations ([42 CFR § 438.340](#)), the Quality Strategy must contain several elements, including but not limited to:

- Network adequacy and availability of services standards
- Continuous quality improvement goals and objectives
- Description of quality metrics and performance targets, including those the State will publish at least annually on its website
- Description of performance improvement projects to be implemented
- State's plan to identify, evaluate, and reduce health disparities
- Mechanisms to comply with additional services for enrollees with special health care needs or who need Long-Term Services and Supports (LTSS)

# Quality Strategy: Current State

**Current State:** The State's Quality Strategy and Quality Strategy Evaluation were last published and submitted to CMS on July 1, 2021.

- The Quality Strategy Evaluation is intended as a companion document to the Quality Strategy and is meant to inform the Quality Strategy updates through the evaluation of the effectiveness of the Quality Strategy conducted within the previous three years.
- The July 2021 Quality Strategy and Quality Strategy Evaluation documents are available on the [AHCCCS Quality Strategy](#) webpage.

# Quality Strategy: Current Goals and Objectives

**Current Goals and Objectives:** The current Quality Strategy has four goals, each with several associated objectives. Please see the Appendix for details on the objectives.

- Quality Strategy Goal 1: Improve the member's experience of care, including quality and satisfaction.
- Quality Strategy Goal 2: Improve the health of AHCCCS populations.
- Quality Strategy Goal 3: Reduce the growth in healthcare costs and lower costs per person.
- Quality Strategy Goal 4: Enhance data system and performance measure reporting capabilities.

# Quality Strategy: Next Steps

**Next Steps:** The next Quality Strategy and Quality Strategy Evaluation submissions are due to CMS no later than July 1, 2024.

- AHCCCS is in the process of updating both documents through collaboration with subject matter experts across the agency's divisions.
- AHCCCS is seeking input from members and other stakeholders in developing the Quality Strategy prior to finalizing it for CMS submission.
  - Please share any feedback on the current Quality Strategy, including feedback on the goals and objectives.

# Quality Strategy: Feedback Request

## For Discussion:

- Are the current Quality Strategy goals and objectives valuable to your tribal community?
  - Are there any changes or additions to the goals and objectives that should be considered?
- What quality-specific focus areas would your tribal community recommend be highlighted in the Quality Strategy?

# Quality Strategy: Key Dates

Activity	Dates*
AHCCCS internal review and updates	Ongoing
Stakeholder Presentations	October - December 2023
AHCCCS Executive Management review and approvals	April 2024
Public Comment	May - June 2024
Post Quality Strategy and Quality Strategy Evaluation on AHCCCS website	No later than July 1, 2024
Submit Quality Strategy and Quality Strategy Evaluation to CMS	No later than July 1, 2024

\* Timeline generated based on three year review cycle and is subject to change.

# Quality Strategy: Feedback Opportunities

AHCCCS requests feedback on its Quality Strategy via the following opportunities:

- Stakeholder presentations: ALTCS Advisory Committee, AHCCCS and MCO Chief Medical Officers' Meeting, QM/MM/MCH EPSDT Quarterly Contractor Meeting, State Medicaid Advisory Committee; AHCCCS Quarterly Tribal Consultation.
  - Please submit feedback or questions to [Georgette.Chukwuemeka@azahcccs.gov](mailto:Georgette.Chukwuemeka@azahcccs.gov).
- Public comment period: AHCCCS will notify stakeholders once the Quality Strategy is posted online for review and feedback.



# Appendix

# Current Quality Strategy Goal 1 and Objectives

## Quality Strategy Goal 1: Improve the member's experience of care, including quality and satisfaction.

- Enrich the member experience through an integrated approach to service delivery,
- Improve information retrieval and reporting capability by establishing new and upgrading existing information technologies, thereby increasing responsiveness and productivity,
- Enhance current performance measures, PIPs, and best practice activities by creating a comprehensive quality of care assessment and improvement plan across AHCCCS programs, and
- Drive the improvement of member-centered outcomes using nationally recognized protocols, standards of care, and benchmarks, as well as the practice of collaborating with MCOs to reward providers based on clinical best practices and outcomes (as funding allows).

# Current Quality Strategy Goal 2 and Objectives

## Quality Strategy Goal 2: Improve the health of AHCCCS populations.

- Increase member access to integrated care that meets the member's individual needs within their local community,
- Support innovative reimbursement models, such as Alternative Payment Models (APMs), while promoting increased quality of care and services, and
- Build upon prevention and health maintenance efforts through targeted medical management:
  - Emphasizing disease and chronic care management,
  - Improving functionality in activities of daily living,
  - Planning patient care for special needs populations,
  - Identifying and sharing best practices, and
  - Expanding provider development of COE.

# Current Quality Strategy Goal 3 and Objectives

## **Quality Strategy Goal 3: Reduce the growth in healthcare costs and lower costs per person.**

- Increase analytical capacity to make more informed clinical and policy making decisions, and
- Develop collaborative strategies and initiatives with state agencies and other external partners, such as:
  - Strategic partnerships to improve access to healthcare services and affordable health care coverage,
  - Partnerships with sister government agencies, MCOs, and providers to educate Arizonans on health issues,
  - Effective medical management for at-risk and vulnerable populations, and
  - Building capacity in rural and underserved areas to address both professional and paraprofessional shortages.

# Current Quality Strategy Goal 4 and Objectives

## **Quality Strategy Goal 4: Enhance data system and performance measure reporting capabilities.**

- Evaluate current data system infrastructure,
- Identify system and process limitations impacting performance measure reporting and analysis,
- Leverage various data sources to produce comprehensive reliable data,
  - Collaborate with external stakeholders to facilitate access to supplemental data sources, and
  - Explore means for collecting and reporting performance measure data utilizing EHR methodologies, and
- Drive continuous delivery system performance through advanced data analytics and disparity analyses.

# National Core Indicators - Aging and Disabilities (NCI-AD™) Member Surveys

# NCI-AD Member Surveys

## National Core Indicators - Aging and Disabilities (NCI-AD™) Member Surveys

- Background: AHCCCS is in the process of implementing the NCI-AD Survey for the ALTCS-EPD population as part of its initiatives through the American Rescue Plan Act of 2021.
  - Survey focus: member satisfaction and experience with long term care services
  - Anticipated timeline for survey administration: January - June 2024
  - Members may be contacted by the AHCCCS survey administration vendor Vital Research to request participation in the survey.
- Please see separate slide deck\* for additional information on the NCI-AD surveys.

\*Slides adopted from the October 2023 AHCCCS Quarterly Contractor Case Management meeting, provided by survey directors from ADvancing States and HSRI (Human Services Research Institute).

# Open Discussion



# Tribal Consultation Policy Revisions

Christine Holden, AHCCCS Tribal Liaison

Alex Demyan, DCAIR Assistant Director

# Background

- Policy Effective Date: 08/12/2008
- Policy Revisions: 10/21/2014, 06/08/2010
- Tribal Stakeholder Feedback Received:
  - Structure
  - Communication and Notification
  - Inclusivity and Representation
  - Access to Information
  - Meaningful Engagement
  - Policy Impact and Implications
  - Follow-Up and Accountability
  - Capacity Building

# Purpose of Today's Presentation

- Tribal stakeholders have requested that AHCCCS implement changes to its tribal consultation process to improve transparency, communication, accountability, and
- This DRAFT plan was developed to include actions within the Agencies' scopes, and includes actions recommended by tribal partners and internal staff.

# Objectives of the Revision

- Enhance Tribal Engagement
- Improve Transparency
- Promote Inclusivity
- Strengthen Government-to-Government Relationships
- Facilitate Timely Consultation
- Ensure Cultural Competence
- Enhance Documentation and Reporting
- Foster Continuous Improvement
- Build Capacity for Tribal Participation
- Compliance with Legal Standards
- Create a Feedback Loop

# Tribal Consultation Improvements

- Structural Changes
- Expansion of Content
- Incorporation of Guiding Principles
- Emphasis on Communication Methods
- Inclusion of Consultation Flow Chart

# Communications & Outreach

- Communication Methods
- Advance Notice
- Feedback Mechanisms
- Response Protocols
- Reporting and Documentation
- Inclusive Outreach
- Roles & Responsibilities
- Continuous Improvement

# Next Steps

- Documentation and Analysis
- Revision Process
- Consultation Follow-Up
- Timeline for Implementation
- Continuous Engagement

# Questions for Consideration

## Feedback:

- Are there specific aspects of the current consultation policy that require further clarification or consideration?
- Do you have suggestions for specific language or provisions that could be added or modified?
- Are there any channels or formats that would facilitate more effective feedback?

## Long-Term Engagement:

- What are your expectations for ongoing engagement beyond the initial consultation on policy revisions?
- How can the agency maintain an open and continuous dialogue with tribal stakeholders?

## Potential Challenges:

- Are there external factors or considerations that the agency may not have accounted for?



# Open Discussion

# Closing Remarks

# Announcements

# 2024 Quarterly TC Proposed Schedule



Feel free to reach out to us at [tribalrelations@azahcccs.gov](mailto:tribalrelations@azahcccs.gov) if you have any potential scheduling conflicts that could impact the participation of a significant number of tribal stakeholders on the proposed dates and times.

# 2024 Tribal Policy Workgroup Proposed Schedule



**Time: 8:30 AM - 10:00 AM**

Feel free to reach out to us at [tribalrelations@azahcccs.gov](mailto:tribalrelations@azahcccs.gov) if you have any potential scheduling conflicts that could impact the participation of a significant number of tribal stakeholders on the proposed dates and times.

# Follow & Support AHCCCS on Social Media

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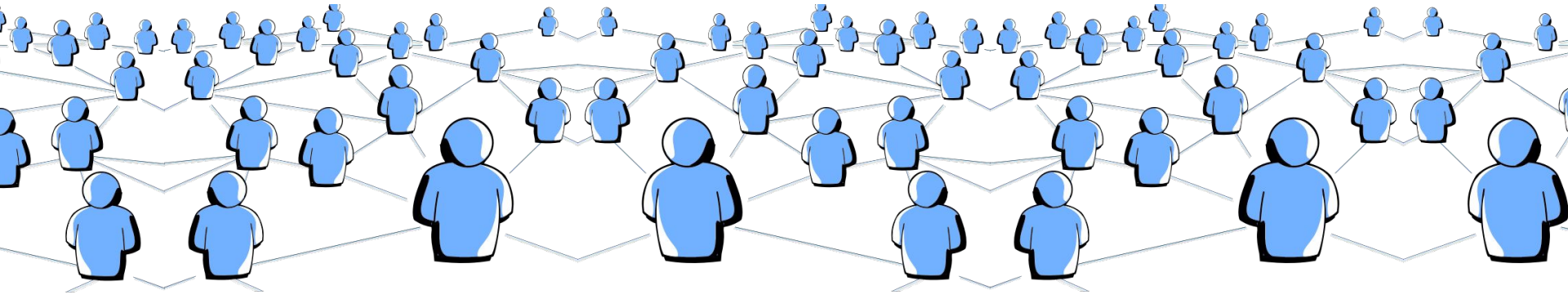
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[AHCCCSgov](https://www.youtube.com/channel/AHCCCSgov)



# Learn about AHCCCS' Medicaid Program on YouTube!



Watch our Playlist:

[Meet Arizona's Innovative Medicaid Program](#)

# Other Resources - Quick Links

- AHCCCS [Waiver](#)
- AHCCCS [State Plan](#)
- AHCCCS [Grants](#)
- AHCCCS [Whole Person Care Initiative \(WPCI\)](#)
- AHCCCS [Office of Human Rights](#)
- AHCCCS [Office of Individual and Family Affairs](#)
- [Future RBHA Competitive Contract Expansion](#)



Thank You.

Have a great day!