AHCCCS Prospective Offerors' Technical Interface Meeting

November 8, 2017

Welcome

Lori Petre

Data Analysis and Research Manager

AHCCCS, Division of Health Care Management

Introduction

Intent of this session is to provide all potential Offerors with an overview of:

- The AHCCCS technical environment

- AHCCCS Complete Care Contractor (ACC) Data exchanges, interfaces and related standards

- The IT Systems Readiness Demonstration standards and process component of the RFP and successful Offeror Readiness

Discussion Points

- Technical Environment

- AHCCCS Electronic Data Interchange (EDI)

- Prepaid Medical Management Information System (PMMIS)
  - Recipient/Health Plan Data
    - Eligibility
    - Enrollment
    - Capitation
    - Interfaces

AHCCCS
Arizona Health Care Cost Containment System

Discussion Points (cont.)

- Provider Data
  - Provider Information
  - Provider Affiliation

- Reference Data
  - Recipient Related
  - Encounter Related
  - Codes and Processing Rules
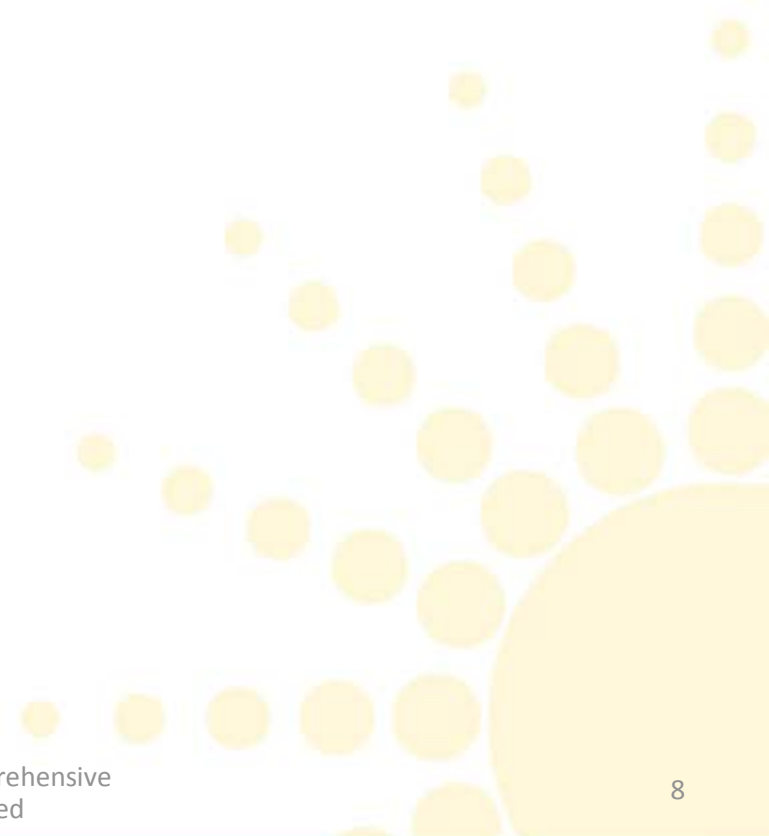
- Encounter Data
  - Encounters
  - Data Validation

AHCCCS
Arizona Health Care Cost Containment System

Reaching across Arizona to provide comprehensive
quality health care for those in need

Discussion Points (cont.)

- o Reinsurance Data
- o Other Data Interfaces
- WEB Interface
- Trading Partner Set-up and Maintenance
  - o EDI
  - o PMMIS
  - o WEB

AHCCCS
Arizona Health Care Cost Containment System

Reaching across Arizona to provide comprehensive
quality health care for those in need

Discussion Points (cont.)

- Testing

- Documentation and Resources

- Data Exchanges and Data Flows

- New - Technical Items

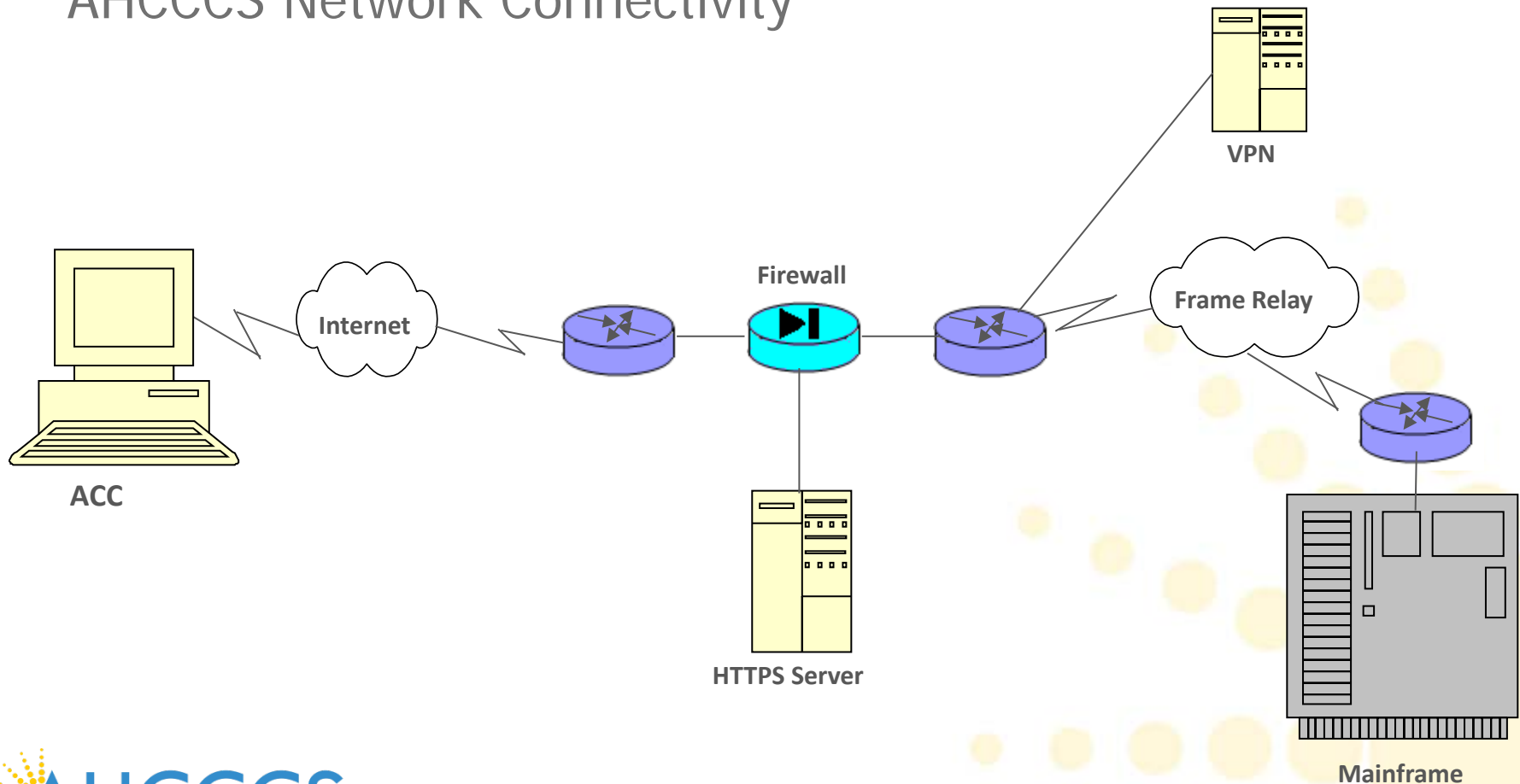- Information Technology (IT) Systems Demonstration

Reaching across Arizona to provide comprehensive quality health care for those in need

AHCCCS
Arizona Health Care Cost Containment System

Technical Environment

- EDI
- PMMIS
- WEB

AHCCCS
Arizona Health Care Cost Containment System

Reaching across Arizona to provide comprehensive
quality health care for those in need

Technical Environment Overview

AHCCCS Network Connectivity

Reaching across Arizona to provide comprehensive quality health care for those in need

Technical Environment (cont.)

- All data exchanged between AHCCCS and the Contractor is done through the Secured File Transfer Protocol (SFTP) server

- Data files are produced on daily, weekly, monthly quarterly, or ad hoc cycles

- Each Contractor has individual secured directory folders for pick-up and drop-off of data files, as well as access to the Shared Info folder - SFTP/VPN Share INFO

Reaching across Arizona to provide comprehensive quality health care for those in need

AHCCCS
Arizona Health Care Cost Containment System

Technical Environment (cont.)

- Contractor individual secured pre-defined folders on the SFTP server are as follows
  - OTHER – Used to exchange non-system files and data with AHCCCS
  - PROD – This folder is used to send and receive production data and contains 4 sub-folders
    - IN – Send non-X12/HIPAA files to AHCCCS in this folder
    - OUT – Receive non-X12/HIPAA files from AHCCCS in this folder
    - EDI-IN - Send X12/HIPAA files to AHCCCS in this folder. Note that these files are swept immediately for processing
    - EDI-OUT - Receive X12/HIPAA files from AHCCCS in this folder

AHCCCS
Arizona Health Care Cost Containment System

Technical Environment (cont.)

o TEST – This folder is used to send and receive test data

- IN – Send non-X12/HIPAA files to AHCCCS in this folder
- OUT – Receive non-X12/HIPAA files from AHCCCS in this folder
- EDI-IN - Send X12/HIPAA files to AHCCCS in this folder. Files are swept immediately for processing
- EDI-OUT - Receive X12/HIPAA files from AHCCCS in this folder

Technical Environment (cont.)

- The Contractor can request access to the folders for the exchange of test and production data

- Forms can be found at:
  https://www.azahcccs.gov/PlansProviders/ISDresources.html
  - o Two Forms are needed
  - o Electronic Data Exchange Request Form – will receive an ID/password to the SFTP server
  - o External User Affirmation Statement – Must be signed by each person requesting access

AHCCCS
Arizona Health Care Cost Containment System

Electronic Data Interchange (EDI)

- Community Manager

- Transaction Insight (TI)

- Validation and Translation

AHCCCS
Arizona Health Care Cost Containment System

Electronic Data Interchange (EDI)– Community Manager

- TIBCO® Foresight Community Manager ® is a secure online self-testing web portal AHCCCS makes available to all Trading Partners for the pre-submission testing of EDI transactions to AHCCCS

- Ensures compliance with X12/HIPAA transaction standards (note not available for NCPDP transactions)

- Includes a comprehensive testing regimen

- Incorporates additional AHCCCS developed guidelines

- Produces real-time results

Electronic Data Interchange (EDI)– Transaction Insight (TI)

- TIBCO® Foresight Transaction Insight® secure web portal

- EDI file Validation, validation performance reporting, and error correction capabilities available to AHCCCS Trading Partners

- Allows for form-based error correction facilities for encounters

- Allows for a search for specific documents from the TI database using a powerful built in search function

- Allows providers to facilitate the web upload attachments for claims supporting documentation

AHCCCS
Arizona Health Care Cost Containment System

Electronic Data Interchange (EDI)– Validation and Translation

- TIBCO® Foresight Instream® transaction validation

- High-speed validation of transactions using standards and custom business rules (guidelines)

- Automatically creates, validates and distributes EDI Acknowledgements (TA1, 277CA, 824 and 999)

- Translator IBM® Websphere Transformation Extender® (WTX)

AHCCCS
Arizona Health Care Cost Containment System

Electronic Data Interchange (EDI) Tools – Resources Links

- Community Manager (requires user account set-up)
  https://tradingpartnertesting.azahcccs.gov

- Transaction Insight (Test) (requires user account set-up)
  https://tiwebtst.statemedicaid.us

- Transaction Insight (Production) (requires user account set-up)
  https://tiwebprd.statemedicaid.us

- Transaction Insight FAQ's
  https://www.azahcccs.gov/PlansProviders/Downloads/Encounters/TransactionInsightFAQs.pdf

AHCCCS
Arizona Health Care Cost Containment System

Prepaid Medical Management Information System (PMMIS)

- AHCCCS operates a mainframe processing system known as PMMIS (Pre-paid Medical Management Information System) to support all core processing

- PMMIS is made up of multiple sub-systems, each with a distinct function

- Sub-systems are interrelated and share common data and many processing rules as well as some data dependencies

Key Subsystems/Interfaces

- Recipient/Health Plan

- Provider

- Reference

- Encounters

- Reinsurance

- Other

AHCCCS
Arizona Health Care Cost Containment System

Reaching across Arizona to provide comprehensive
quality health care for those in need

Recipient/Health Plan

- AHCCCS maintains eligible members in Recipient System

- Members assigned to an ACC Contractor based on enrollment rules, choice or auto assignment algorithm

- Contractors notified daily of new and dis-enrolling members

![AHCCCS logo - Arizona Health Care Cost Containment System]

Recipient/Health Plan (cont.)

- Recipient information used for current and historical identification of:
  - Each person who is or was eligible for medical care under one or more qualifying programs
  - Nature and scope of services for which the person qualifies as defined by eligibility and enrollment characteristics
  - Contractor responsible for delivery of and payment for covered services
  - Funding source for the medical care coverage

Recipient/Health Plan – Eligibility

- Eligibility Sources
  - SSA, HeA+, Other

- Eligibility Sources provide
  - Eligibility Adds/Discontinuances
  - Changes to Demographics (Name, Gender, Date of Birth)
  - Address Changes
  - Contractor Choice
  - Third Party Liability Leads information for Medicaid members

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Enrollment

- Enrollment Choice
  - Eligibility sites provide ACC Contractor availability information to applicants and facilitate the capture of applicant's choice
  - Some eligibility sources will collect and send ACC Contractor choice information (if applicable) to AHCCCS
  - Member may also call the AHCCCS Enrollment Line with choice (if applicable)

Recipient/Health Plan – Enrollment (cont.)

- Contractors receive all enrolled member related adds, changes and dis-enrollments via the daily 834 process https://www.azahcccs.gov/Resources/Downloads/EDIchanges/AZ%20834-820_TI_CG_v1_2.pdf

- Enrollment Dates
  - o Ongoing enrollment is usually effective the date AHCCCS updates the action
  - o Prior period coverage (PPC) enrollment is effective the first of the month of eligibility up to the day before the date AHCCCS updates the action
  - o Exceptions
    - Administrative Actions – can be any day in the past (any daily)
    - System Unavailable at Notification – can be retroactive (month end)

Recipient/Health Plan – Enrollment (cont.)

- Disenrollment Dates
  - For loss of eligibility, disenrollment is the last day of the month
  - For reasons other than loss of eligibility, usually effective the day prior to the update (includes Voluntary Withdrawal, etc.)
  - Exceptions
    - Date of Death (retroactive)
    - Incarceration (can be retroactive)
    - Linking/Duplicate Enrollment (can be retroactive)
    - Administrative (can be retroactive)

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Enrollment (cont.)

- County Moves
  - County to County
    - Move to a county served by current ACC Contractor
      - Disenrollment from current county the day before and enroll with the same ACC Contractor in the new county
    - Move to a county not served by current ACC Contractor
      - Member is assigned to an available ACC Contractor
      - Member receives notification that they may change from the assigned Contractor to another available Contractor in the new county

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Enrollment (cont.)

- Enrollment Rules
  - 90 day re-enrollment
  - Family Continuity
  - Enrollment Choice
  - American Indian on reservation zip code
  - Auto-Assignment

Reaching across Arizona to provide comprehensive quality health care for those in need

Recipient/Health Plan – Enrollment (cont.)

- Annual Enrollment Choice (AEC)

  - Each Eligible Case is assigned an anniversary month
  - AEC phone calls or letters are generated two months in advance of the anniversary date
  - Members With Choice file generated to ACC Contractor – identifies all ACC members who are eligible for AEC
  - If Member Makes Choice, Potential Transition Listing generated to ACC Contractor – identifies all members who will be enrolled into an ACC Contractor and those who will be leaving the relinquishing ACC Contractor

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Enrollment (cont.)

- Open Enrollment
  - Special Process when needed – New ACC Contractor, ACC Contractor Termination
  - Generate letter to member with current ACC Contractor and choice material
  - Member makes choice to change (optional)
  - Potential Transition Listing generated to ACC Contractor – identifies all members who will be enrolled into gaining ACC Contractor and those who will be leaving the relinquishing ACC Contractor

Recipient/Health Plan – Capitation

- Contractors receive daily capitation payments/ recoupments and related notifications via daily 820 file https://www.azahcccs.gov/Resources/Downloads/EDIchanges/AZ%20834-820_TI_CG_v1_2.pdf

- Capitation paid based upon ACC Contractor, GSA, Contract Type, Rate Code

- Capitation calculated on a per member basis

- Capitation paid by taking PMPM rate ÷ days in the month × days of enrollment through end of month

- Recoupments subtracted from Contractors' daily payments

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Capitation (cont.)

- Recoupments calculated on a per member basis

- Recoupment calculated by taking PMPM rate ÷ days in the month × days of disenrollment through end of month

- Mass Adjustments
  - Ability to change capitation payment for a population (Risk Group)
  - Impacts historical payments
  - Contractors receive notification via the 820
  - No enrollment activity impact
  - Only reflect changes in payment due to changes in payment rate

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Capitation (cont.)

- Manual Payments
  - Error in record prevents enrollment/disenrollment action from appearing on daily 834 file
  - Manual capitation correction on an individual record
  - When manual payments are made or no capitation is involved – manual notification to ACC Contractor

Recipient/Health Plan - Interfaces

- Online eligibility and enrollment updates to PMMIS occur between 6:00am and 6:00pm daily (except during month end processing)

- In the event a member needs services and the ACC Contractor has not yet received the daily 834 files, enrollment for the member can be verified using one of the automated verification processes

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Interfaces (cont.)

- Automated Verification Processes
  - Allow Contractors and providers to obtain eligibility, enrollment, TPL and Medicare coverage information for members for a single date of service or a date range
  - Automated processes available include – WEB and 270/271
  - Web Based Verifications
    - Internet based
    - Available 24/7
    - No cost
    - Requires advanced registration
    - Ability to print information
    - Requires input of AHCCCS ID, SSN, or Key Demographics
    - Real time inquiry

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Interfaces (cont.)

- 270/271 Verifications
  - EDI based
  - Available 24/7
  - No cost
  - Requires advanced registration
  - Ability to print/download information
  - Requires input of AHCCCS ID, SSN, or Key Demographics
  - Single or Batch Request
    https://www.azahcccs.gov/Resources/Downloads/EDIchanges/AZ270_271TI_CGv0-3_20160923.pdf

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Interfaces (cont.)

- Daily Batch Processing Cycle
  - Starts at 6:00pm every day
  - 834 files available to Contractor no later than 7:00am daily
    - Email notification if files will be delayed
    - Based on Constant Contact at https://visitor.r20.constantcontact.com/manage/optin?v=001YVFzdwcJnTCjxhymZCzqm9rGeGhOIGK_c68j79SkAuymNF8Z8wgww-9elFoFBWx3wTuzeaSCSGJq_c4h7M6GoBKoL9j_ryvwwyFKBqC6CQ8%3D
  - Enrollment activity includes
    - Enrollments
    - Retroactive enrollment blocks
    - Disenrollments
    - Disenrollment blocks
    - Demographic changes

Reaching across Arizona to provide comprehensive quality health care for those in need

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Interfaces (cont.)

- Sample 834 Calendar

1	2	3	4	5	6	7
Daily Roster (AZD834-XXXXXX-180930.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181001.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181002.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181003.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181004.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181005.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181006.txt) available at 7:00 am.
8	**9**	**10**	**11**	**12**	**13**	**14**
Daily Roster (AZD834-XXXXXX-181007.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181008.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181010.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181010.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181011.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181012.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181013.txt) available at 7:00 am.

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Interfaces (cont.)

- "Last Daily" Processing Cycle
  - Three days before the 1st of the next month (i.e. 9/28/2017; 10/29/2017; 11/28/2017) starting at 12:00pm
  - Monthly processing cycle available https://www.azahcccs.gov/PlansProviders/ISDresources.html
  - Activity includes
    - Enrollments
    - Retroactive enrollment blocks
    - Dis-enrollments
    - Demographic changes
    - Rate code changes

Recipient/Health Plan – Interfaces (cont.)

- Monthly Processing Cycle
  - Occurs immediately after "Last Daily" cycle
  - Month enrollment notification – full file of all members enrolled with Contractor as of the 1st of the upcoming month
  - Basis for prospective capitation payments
  - File used to validate Contractor data – discrepancies in Contractor data to be reported to DHCM
  - Management Reports

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Interfaces (cont.)

- "Next Daily" Processing Cycle
  - Starts at or after completion of Monthly Cycle
  - Output files available to Contractors by 7:00am daily
  - Includes all enrollment activity since last daily – Enrollments; Retroactive enrollment blocks; Dis-enrollments (will recoup prospective capitation already paid); Disenrollment blocks; Demographic changes
  - Two files, must be processed after "Last Daily" and Monthly enrollment notifications

Recipient/Health Plan – Interfaces (cont.)

- Sample Month End 834 Calendar

11-28	11-29	11-30	12-1
Daily Roster (AZD834-XXXXXX-181127.txt) available at 7:00 am. Month-End processing begins at 12:00 pm	Last Daily Roster (AZD834-XXXXXX-181128.txt) available at 11:00am. Monthly Roster (AZM834-XXXXXX-181201.txt) available at 11:59 pm.	Daily Roster (AZD834-XXXXXX-181129.txt) available at 7:00 am.	Daily Roster (AZD834-XXXXXX-181130.txt) available at 7:00 am.

AHCCCS
Arizona Health Care Cost Containment System

Recipient/Health Plan – Interfaces (cont.)

- Newborn Notifications
  - The birth of newborns can be reported using the web via AHCCCS Online
  - Contractor must have an AHCCCS Online sign on to be able to use this functionality

  https://azweb.statemedicaid.us/

Provider

- AHCCCS requires that all providers, be registered with AHCCCS and performs validation/editing of this information on reported encounters

- AHCCCS maintains registration files for all providers eligible for participation in the AHCCCS program and communicates this information to Contractors on a weekly basis

Provider

- AHCCCS produces two provider files for use by Contractors: the Provider Profile and the Provider File

- Files can be found in the SFTP/VPN ShareINFO folder

- Files produced weekly on Wednesday and available to Contractors on Thursday

- Files includes, but not limited to
  - Demographic data
  - Provider enrollment status
  - Categories of Service
  - Provider specific rate schedules

AHCCCS
Arizona Health Care Cost Containment System

Provider (cont.)

- o Licenses and certifications
- o Specialties
- o Medicare information
- o Restrictions
- o Address Information
- o Provider Type Profiles

- Full listing of available data elements and file layouts in AHCCCS Encounter Manual and Technical Interface Guide http://www.azahcccs.gov/commercial/Downloads/Encounters/EncounterManual/Chapter5.pdf   or https://www.azahcccs.gov/Resources/Contractor/Manuals/TIG/

AHCCCS
Arizona Health Care Cost Containment System

Provider Affiliation

- The Provider Affiliation Transmission (PAT) is an integral part of the monitoring process in DHCM to ensure that Contractors' provider networks are adequate and meet the minimum contractual requirements to deliver medically necessary services to members

- This information is also used for reporting to CMS, the legislature and other entities

- These requirements are presented in the AHCCCS Provider Affiliation Transmission User Manual https://www.azahcccs.gov/Resources/Downloads/OperationsReporting/PATManual.pdf

AHCCCS
Arizona Health Care Cost Containment System

Provider Affiliation (cont.)

- Submitted quarterly

- Includes information about each individual provider within the Contractor's network and must represent the Contractor's entire provider network

- Contractor is responsible for submitting true and valid information

- Certain fields of the PAT are not systematically edited prior to acceptance

- Each PAT must have an error rate of less than 5.0% for the fields that are edited prior to acceptance

AHCCCS
Arizona Health Care Cost Containment System

Provider Affiliation (cont.)

- Reports
  - Transmission Validation
    - Provides information about the status of PAT
    - If all conditions met, transmission passes and accepted for loading
    - If transmission fails, transmission is rejected and returned to Contractor for correction and resubmission
  - PAT Comparison - Exception by Provider
    - Provides a list of all exception errors that occurred during PAT load process
    - Sorted by Provider ID

AHCCCS
Arizona Health Care Cost Containment System

Provider Affiliation (cont.)

- Aids the Contractor in error correction
- All exception errors must be corrected prior to next submission
- PAT Comparison - Exception by Field
  - Provides a list of all exception errors that occurred during the PAT load process
  - Sorted by field in error
  - Aids the Contractor in error correction
  - All exception errors must be corrected prior to next submission

Provider Affiliation (cont.)

- PAT Comparison - Detail Report
  - Provides a complete list of all PAT loaded
  - Sorted by Provider ID
- Summary Totals Report
  - Provides summarized information about the providers listed on the PAT

AHCCCS
Arizona Health Care Cost Containment System

Reference

- AHCCCS produces a number of files containing information pertaining to recipient, encounters, codes and processing rules intended to assist Contractors with successful and accurate data exchanges with AHCCCS

- Contractors should use this data where appropriate on a timely basis to facilitate timely and accurate processing; failure to do so may result in encounter pends and denials

Reference (cont.) - Recipient Related Reference Files

- One reference file for Contractor use
  - Master Carrier ID file
    - Complete file of TPL Carrier ID numbers
    - Produced every Friday
    - Layout and additional information may be found in the Technical Interface Guide http://www.azahcccs.gov/commercial/ContractorResources/manuals/TIG.aspx
    - Used when reporting TPL Leads information to AHCCCS

AHCCCS
Arizona Health Care Cost Containment System

Reference (cont.) - Encounter Related Reference Files

- At the beginning and middle of the month, AHCCCS produces Encounter processing information extracts

- These files include AHCCCS PMMIS information related to:
  - Encounter internal field values for each form type
  - Encounter internal field relationship information for each error code
  - All current encounter error codes and descriptions

- Layouts and additional information may be found in the AHCCCS Encounter Manual
  http://www.azahcccs.gov/commercial/ContractorResources/encounters/EncounterManual.aspx

AHCCCS
Arizona Health Care Cost Containment System

Reference (cont.) - Codes and Processing Rules Reference Tables

- AHCCCS maintains code related tables utilized for AHCCCS FFS claims processing and validation/editing of submitted encounters

- At the beginning and middle of the month, AHCCCS produces multiple code and processing rule related reference files that are made available to all Contractors via the SFTP server

Reference (cont.) - Codes and Processing Rules Reference Tables

- These files include AHCCCS PMMIS data related to the following, for example:
  - Coverage status of Codes (HCPCS/CPT, ICD10, etc.)
  - Age, Gender and Frequency limitations
  - Appropriate Modifiers
  - AHCCCS Fee Schedule Amounts
  - Processing rules (such as Payment Status Code B values)

Reference (cont.) - Codes and Processing Rules Reference Tables

- Layouts and additional information may be found in the AHCCCS Encounter Manual and the Technical Interface Guide
http://www.azahcccs.gov/commercial/Contractor Resources/encounters/EncounterManual.aspx
https://www.azahcccs.gov/Resources/Contractor/Manuals/TIG/

Encounters

- An Encounter is a record (claim) of a medically related service rendered by a registered AHCCCS provider to an AHCCCS member enrolled with a Contractor, which has been adjudicated by the Contractor

  - Includes sub-capitated services and fee-for-service payments
  - Submitted electronically by Contractor to AHCCCS
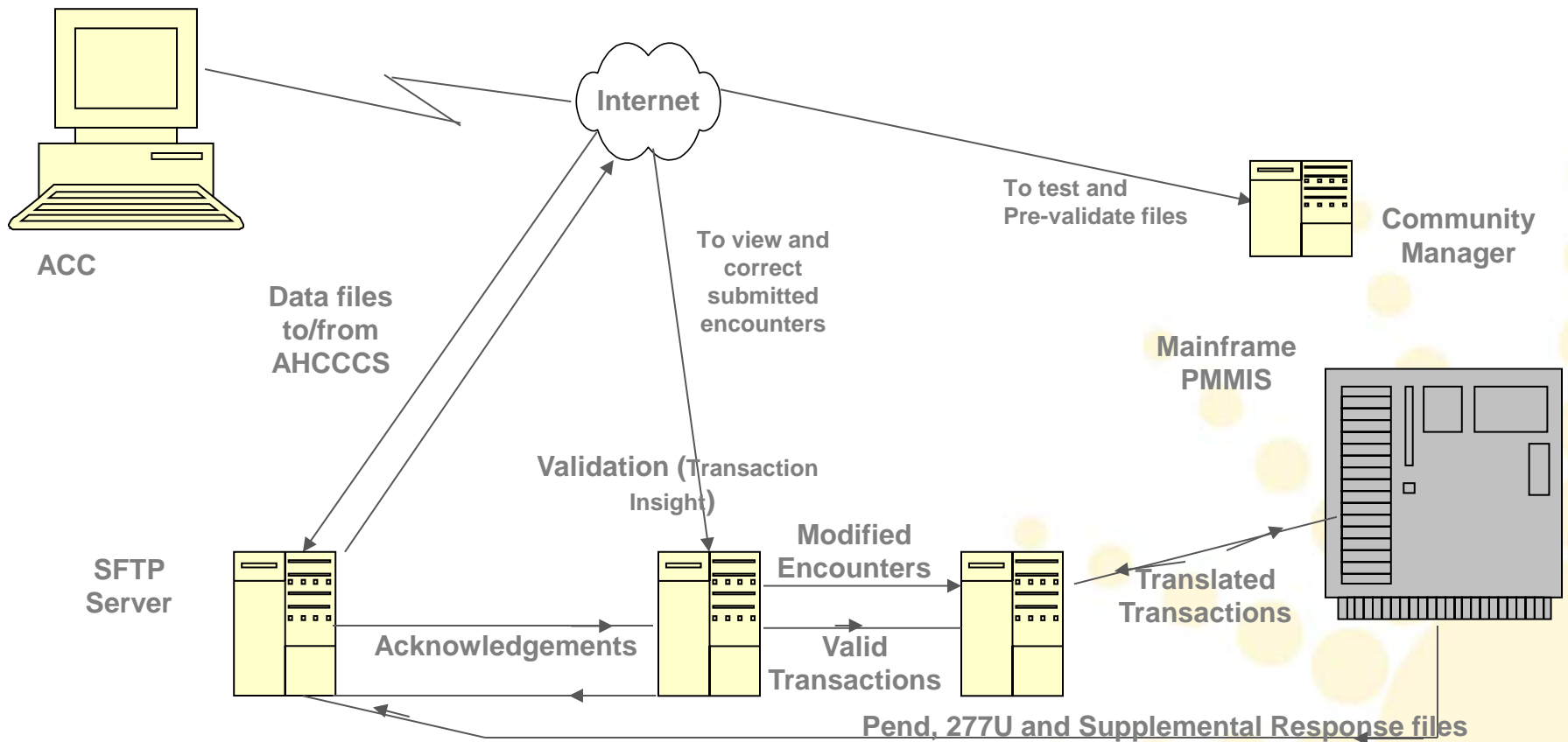 - Includes paid, zero payments and certain denied/disallowed services

Encounters – General Principles

- Guidelines and formats for submitting individual encounters generally follow health insurance industry standards used by commercial insurance companies, Medicare, AHCCCS FFS

- Some requirements are specific to the AHCCCS program

- To avoid pending or denial of encounters, Contractors must ensure that encounters are consistent with both the general principles and those requirements specific to AHCCCS, including but not limited to:

  o A service must be completed, and the provider's claim or encounter finalized by the Contractor, before an encounter is submitted to AHCCCS

Encounters – General Principles (cont.)

- If a Contractor makes a post payment revision to a provider's claim after it has been encountered to AHCCCS, the Contractor must submit a replacement or void encounter (whichever is appropriate) to AHCCCS

- Medicare and other third-party payment or indication of denial must be accounted for prior to submitting the encounter, and Medicare and third-party payment amounts must be included in the appropriate fields on the submitted encounter

Encounters – Data Flow

ACC

Internet

To test and
Pre-validate files

Community
Manager

Data files
to/from
AHCCCS

To view and
correct
submitted
encounters

Mainframe
PMMIS

Validation (Transaction
Insight)

Modified
Encounters

SFTP
Server

Translated
Transactions

Acknowledgements

Valid
Transactions

Pend, 277U and Supplemental Response files

AHCCCS
Arizona Health Care Cost Containment System

Encounters – Submission Standards

- Encounter files must be submitted to the AHCCCS SFTP server in appropriate HIPAA X12 and NCPDP compliant formats (as defined in the AHCCCS Encounter Manual, related transaction Companion Guides and TR3 Documents) and include HIPAA compliant data such as National Provider Identifiers (NPI) and code sets
  - HIPAA 837P (Professional), 837I (Institutional) and 837D (Dental)
  - NCPDP PAH (Post Adjudicated History) (Pharmacy)
- Each encounter file must pass validation including assessment of appropriate file structures, validity of code sets, and financial balancing

Encounters – Submission Standards (cont.)

- Each file must contain a required BBA related data attestation statement as outlined in the AHCCCS Encounter Manual and related transaction Companion Guides

- Each file will undergo, and must pass, translation and syntax checks prior to loading into PMMIS

- AHCCCS defines the receipt date for encounters as the date the encounter is received on the AHCCCS SFTP server

AHCCCS
Arizona Health Care Cost Containment System

Encounters - Processing

- Encounter cycles run twice monthly:
  - One full cycle – including the recycle of all encounters currently pended in the AHCCCS system (files are due by COB the first Thursday of the month)
  - One limited cycle (files are due by COB the third Thursday of the month) this cycle does not include the recycle of pends or Reinsurance processing
  - Contractors can, and are encouraged to, submit encounters throughout the month for processing in one or both cycles

AHCCCS
Arizona Health Care Cost Containment System

Encounters – Processing (cont.)

- Encounter data is loaded daily to the mainframe "staging area" where the encounter is held until loaded for full processing

- A copy of the encounter in its received form is maintained for historical reference in the mainframe staging area

- Processing includes extensive claims-type edits

- Applicable results are produced and communicated to Contractors after each cycle

AHCCCS
Arizona Health Care Cost Containment System

Encounters – Processing (cont.)

- Detailed information related to encounter processing can be found in the AHCCCS Encounter Manual, the Encounter Keys newsletter (published quarterly on the AHCCCS Website), applicable EDI Companion Guides and on the AHCCCS Encounters Webpage: https://www.azahcccs.gov/PlansProviders/HealthPlans/encounters.html

Encounters - Resources

- AHCCCS Encounter Unit staff are available via phone or email Monday through Friday during regular business hours to assist Contractors with submission of encounters as well as the resolution of encounter pends and denials

- Each Contractor is assigned a main point of contact within the Encounter Unit

- AHCCCS maintains several email addresses to assist Contractors with Encounter related questions:
    - For Encounter general, pend, denial or adjudication related questions AHCCCSEncounters@azahcccs.gov
    - For Encounter validation and/or translation related questions AHCCCSTIEncounters@azahcccs.gov

AHCCCS
Arizona Health Care Cost Containment System

Encounters – Resources (cont.)

- Contractors may also request Encounter specific training, as needed, by contacting their AHCCCS Encounter Unit assigned representative or the AHCCCS Encounter Unit Manager

- Contractors are required to participate in regularly scheduled 1:1 meetings with Encounter Unit staff, as well as periodically scheduled AHCCCS Technical Consortiums and Technical Workgroups

AHCCCS
Arizona Health Care Cost Containment System

Data Validation

- CMS requires that AHCCCS collect complete, accurate and timely encounter data from Contractors

- AHCCCS Data Validation studies evaluate the completeness, accuracy and timeliness of the collected encounter data on at least an annual basis

- Detailed information related to Data Validation may be found on the AHCCCS webpage at: https://www.azahcccs.gov/PlansProviders/Downloads/Encounters/EncounterValidationTechnicalDocument.pdf

AHCCCS
Arizona Health Care Cost Containment System

Reinsurance

- Reinsurance is a risk-sharing program provided by AHCCCS to Contractors for the reimbursement of certain service costs incurred by a member or eligible person

AHCCCS
Arizona Health Care Cost Containment System

Reinsurance – Processing

- Reinsurance cycles run once monthly:
  - Reinsurance Case Creation and Association cycles run immediately following the completion of the first (full) encounter cycle
  - Reinsurance Payment cycle runs after the first Wednesday of each month
  - A Reinsurance cycle is not run after the second monthly encounter cycle
  - Detailed information on reinsurance processing can be found in the AHCCCS Reinsurance Processing Manual, in the Reinsurance Hot News newsletter and on the AHCCCS reinsurance Webpage http://www.azahcccs.gov/commercial/ContractorResources/reinsurance/reinsurance.aspx

AHCCCS
Arizona Health Care Cost Containment System

Reinsurance – Processing (cont.)

- The Reinsurance (RI) system generates the following monthly reports:
  - Reinsurance Case Initiation
  - Reinsurance Reconciliation
  - Reinsurance Case Summary
  - Reinsurance Remittance Advice

- Contractors are required to notify AHCCCS of any third party coverage identified in a Reinsurance case

AHCCCS
Arizona Health Care Cost Containment System

Reinsurance – Processing (cont.)

- Regular Reinsurance
  - Provided to partially reimburse ACCs for the cost of care for members who meet the criteria and requirements for Reinsurance
  - Members are identified through submitted encounters for covered services in excess of Contract Year deductibles
  - Not all AHCCCS covered services are covered under Reinsurance

Reinsurance – Processing (cont.)

- Catastrophic Reinsurance
  - Provided to partially reimburse Contractors for the cost of care for members who meet the criteria and requirements for Catastrophic Reinsurance
  - Contractor is responsible for identifying members and submitting written notification to the DHCM, Medical Management Unit
    - Supporting medical documentation must accompany request
    - Details are included in the Reinsurance Processing Policy Manual

Reinsurance – Processing (cont.)

- Transplant Reinsurance
  - Provided to partially reimburse Contractors for the cost of care for members who meet the criteria and requirements for Transplant Reinsurance
  - Covers members eligible to received AHCCCS covered solid organ or tissue transplants
  - Contractor is responsible for identifying members and submitting written notification to the DHCM, Medical Management Unit

AHCCCS
Arizona Health Care Cost Containment System

Reinsurance – Processing (cont.)

- Reinsurance Changes
    - o AHCCCS is contracting with Public Consulting Group (PCG) to analyze and rebase the Transplant contracts for an effective date of 10/1/18
    - o Effective 10/1/18 PPC will be covered for Reinsurance
    - o Deductible increased to $50,000 (subject to change to $35,000)
    - o All reinsurance case types (excluding transplants) – stop loss increased to $1 million

AHCCCS
Arizona Health Care Cost Containment System

Other Interfaces

- AHCCCS will provide a Successful Offeror (including an Incumbent Offeror new to a GSA) with three years of historical encounter data for members enrolled with the Offeror as of December 1, 2018

- AHCCCS will manage an ongoing monthly data exchange of encounter and claims data to ACC Contractors in order to eliminate limited, remaining "blind spots" for services provided to a member shared by multiple programs
  - Contractors should use this information to develop short- and long-term strategies to improve care coordination

Other Interfaces (cont.)

- On a monthly basis, AHCCCS provides each Contractor with an encounter data extract (commonly referred to as the "Magic" file) that Contractors must use to compare financial data in the AHCCCS encounter database with the Contractor's claims data

- The file is replaced each month and contains the past 36 months of encounter financial data submitted to AHCCCS

- The file is to be used by the Contractor to verify what has or has not been submitted to AHCCCS in order to ensure no gaps in Encounter data

AHCCCS
Arizona Health Care Cost Containment System

Other Interfaces (cont.)

- AHCCCS Alternative Payment Model Initiative Interfaces
  - Registration process to establish Structured Payment Entities
  - Process and layout for submission of Structured Payment Files
  - Definition of where Contractors can submit the Structured Payment information on 837 Encounters
  - Process and layout for submission of a Post Adjudicated or Post Submitted File of Structured Payment information for all Encounter form types

AHCCCS
Arizona Health Care Cost Containment System

Trading Partner Set-up and Maintenance

AHCCCS allows and maintains Trading Partner relationships with Contractors which allow for the exchange of data through access to the EDI, SFTP, PMMIS and the AHCCCS WEB portals, etc.

Trading Partner Set-up and Maintenance - EDI

- Contractor completes EDI Data Exchange Agreements

- AHCCCS assigns a Trading Partner ID to the Contractor

- Contractor is provided with access to Community Manager, Transaction Insight (Test and Production),

- Contractor completes initial testing with Community Manager and subsequently successfully completes testing with TI via actual data exchanges

- Once all testing is completed, Contractor is approved for production exchanges

Trading Partner Set-up and Maintenance – EDI (cont.)

- Forms and instructions may be obtained in the AHCCCS Encounter Manual on the AHCCCS webpage: https://www.azahcccs.gov/PlansProviders/Downloads/Encounters/Manual/Chapter2.pdf or https://www.azahcccs.gov/PlansProviders/ISDresources.html

Trading Partner Set-up and Maintenance - SFTP

- Contractor completes SFTP Access Agreements

- Contractor is individually assigned Secured Folder on the SFTP Server for the submission and receipt of data to and from AHCCCS

AHCCCS
Arizona Health Care Cost Containment System

Trading Partner Set-up and Maintenance - SFTP

- Forms and instructions related to SFTP access may be obtained on the AHCCCS webpage - https://www.azahcccs.gov/PlansProviders/ISDresources.html

Trading Partner Set-up and Maintenance - PMMIS

- Before a Contractor may submit encounter data (production and/or test), AHCCCS requires the completion of a Encounter Submission Notification and Transmission Submitter Number (TSN) Application (for one or more Transmission Numbers)

- Contractor may also optionally request direct security access to PMMIS (production and/or test) for purposes of encounter pend and denial research and as appropriate, the performance of encounter allowed pend overrides, and online voids

Trading Partner Set-up and Maintenance – PMMIS (cont.)

- Upon award New Contractors will be assigned an AHCCCS ACC Contractor ID

- Key information needed to establish this ID will need to be submitted to AHCCCS ASAP to facilitate establishment of this ID

AHCCCS
Arizona Health Care Cost Containment System

Trading Partner Set-up and Maintenance – PMMIS (cont.)

- Forms and instructions related to the request and provision of a TSN may be obtained in the AHCCCS Encounter Manual on the AHCCCS webpage: https://www.azahcccs.gov/PlansProviders/Downloads/Encounters/Manual/Chapter2.pdf

- Forms and instructions related to PMMIS access may be obtained on the AHCCCS webpage: https://www.azahcccs.gov/PlansProviders/ISDresources.html

Trading Partner Set-up and Maintenance - WEB

- To obtain access to AHCCCS Online in order to perform functions via the web, Contractor must

  - Complete the Provider Registration form (NOTE - Most of this form will be blank - Please make sure the addresses are filled in and the form is signed); the Provider Participation Agreement; the Disclosure of Ownership form and include a current W-9

  - Once the forms are completed, please submit either by email or fax to AHCCCS Provider Registration

  - Forms can be found at webpage: https://www.azahcccs.gov/PlansProviders/CurrentProviders/packet.html

AHCCCS
Arizona Health Care Cost Containment System

Testing

- Testing must be completed prior to: Implementation of a new ACC Contractor; change in software vendor or major system upgrade; change by AHCCCS resulting in an impact to any data exchange

- AHCCCS maintains a test environment that is available for use by all Contractors to submit and receive test data

- For certain types of changes to policy, payment methodologies, etc., testing may be prescribed and mandated for all Contractors

AHCCCS
Arizona Health Care Cost Containment System

Testing (cont.)

- AHCCCS makes available, and encourages the use of, an EDI validation tool "Community Manager" for all Contractors as appropriate

- Prior to beginning any testing for a new Contractor, the Contractor must have provided all necessary documents (Trading Partner Set-up) to AHCCCS

- Once the necessary documents are received and processed, AHCCCS will schedule an initial training session for the Contractor during which the testing process as well as other key information will be reviewed

AHCCCS
Arizona Health Care Cost Containment System

Documentation and Resources

AHCCCS has developed and maintains a large variety of manuals, guides and other resources intended to support Contractor data exchange with AHCCCS

Documentation and Resources (cont.)

- EDI Resources: https://www.azahcccs.gov/Resources/EDI/EDItechnicalworkgroups.html

- Encounter Technical Documents (including Data Validation): https://www.azahcccs.gov/PlansProviders/HealthPlans/encountermanual.html

- Reinsurance Technical Documents: https://www.azahcccs.gov/PlansProviders/HealthPlans/Reinsurance/

AHCCCS
Arizona Health Care Cost Containment System

Documentation and Resources (cont.)

- Technical Interface Guide (TIG) - The TIG is a repository for all data exchanges and file layouts sent to and from AHCCCS: https://www.azahcccs.gov/Resources/Contractor/Manuals/TIG/

- AHCCCS Enrollment Rate Codes and Values: https://www.azahcccs.gov/PlansProviders/Downloads/EnrollRateCodes2015.pdf

- AHCCCS Fee-For-Service Provider Manual: https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/providermanual.html

AHCCCS
Arizona Health Care Cost Containment System

Documentation and Resources (cont.)

- Encounter Keys Newsletter – https://www.azahcccs.gov/PlansProviders/HealthPlans/encounterkeysnewsletter.html

- AHCCCS maintains specific email addresses as well as topic specific webpages to assist Contractors with the receipt and submission of AHCCCS data:
  - For Encounter pend, denial or adjudication related inquiries AHCCCSEncounters@azahcccs.gov
  - For Encounter validation and/or translation related inquiries AHCCCSTIEncounters@azahcccs.gov
  - For EDI related inquiries http://www.azahcccs.gov/commercial/EDIresources/EDIresources.aspx

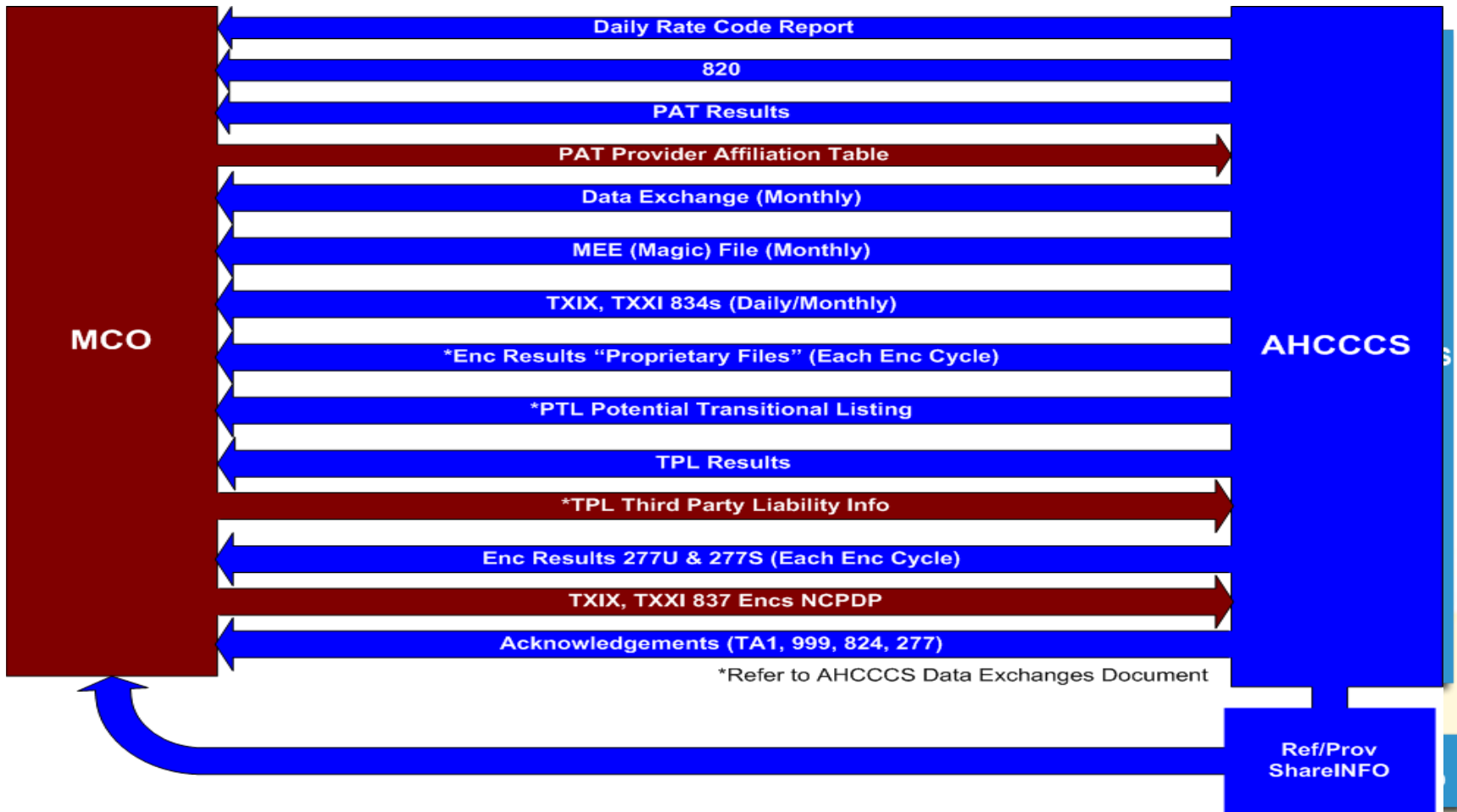AHCCCS
Arizona Health Care Cost Containment System

Documentation and Resources (cont.)

- Please note that this is just a partial list of available documentation and resources and Contractors should refer to the Bidders' Library and/or the AHCCCS website for all available items

AHCCCS
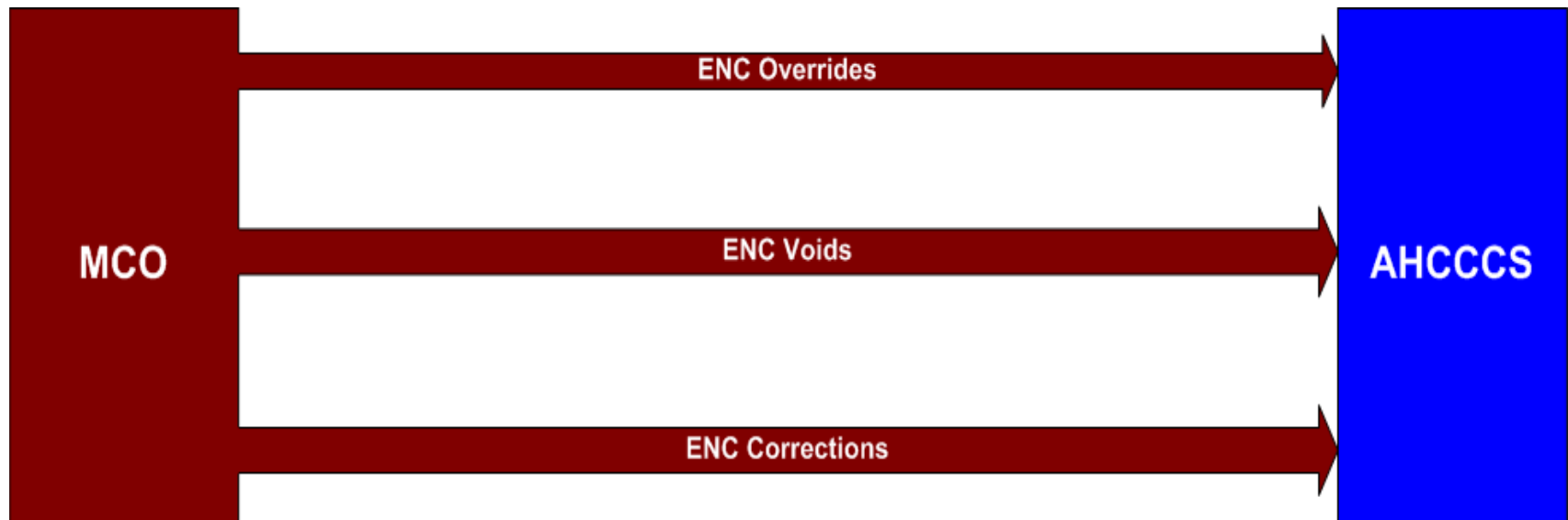Arizona Health Care Cost Containment System

Data Exchanges and Data Flows

- AHCCCS exchanges a large number of EDI and non-EDI files with Contractors on a routine basis, examples listed below

- New Contractors will receive a full listing of all exchanges include applicable naming and SFTP folder placements
  - AZD820-XXXXXX-YYMMDD.TXT
  - AZD834-XXXXXX-YYMMDD.TXT
  - AZM834-XXXXXX-YYMMDD.TXT
  - AZU277-XXXXXX-YYMMDD.TXT
  - HPXXXXXX_CLMMDDYY.ZIP
  - HPXXXXXX_RC_EC91D949MMDDYY.ZIP
  - (in all cases XXXXXX equals the assigned Contractor ID)

AHCCCS
Arizona Health Care Cost Containment System

Contractor Data Flow – ISD Interfaces

MCO

AHCCCS

- Daily Rate Code Report
- 820
- PAT Results
- PAT Provider Affiliation Table
- Data Exchange (Monthly)
- MEE (Magic) File (Monthly)
- TXIX, TXXI 834s (Daily/Monthly)
- *Enc Results "Proprietary Files" (Each Enc Cycle)
- *PTL Potential Transitional Listing
- TPL Results
- *TPL Third Party Liability Info
- Enc Results 277U & 277S (Each Enc Cycle)
- TXIX, TXXI 837 Encs NCPDP
- Acknowledgements (TA1, 999, 824, 277)

*Refer to AHCCCS Data Exchanges Document

Ref/Prov ShareINFO

AHCCCS
Arizona Health Care Cost Containment System

Data Flow – Non ISD Interfaces

New – Technical Items

- HIPAA Transaction Version 7030
  - Currently in public comment period with CMS
  - Mandated implementation date TBD

- Encounter Timeliness Standards and Enforcement
  - Historical standard required enforcement of timeliness of encounter submissions within 240 days of the end date of service, or date of eligibility posting if later
  - Timeliness standard will be revised effective 10/1/2018 to within 210 days of the end date of service, or date of eligibility posting if later

AHCCCS
Arizona Health Care Cost Containment System

New – Technical Items (cont.)

- Change to the GSA structure for the ACC Program for October 1, 2018 to include the GSAs defined below (current RBHA GSA structure will remain unchanged)
  - North GSA -Mohave/Coconino/Apache/Navajo/Yavapai
  - South GSA - Cochise/Graham/Greenlee/LaPaz/Pima/Santa Cruz/Yuma (including zip codes 85542, 85192, and 85550)
  - Central GSA - Maricopa/Gila/Pinal (excluding zip codes 85542, 85192, and 85550)

AHCCCS
Arizona Health Care Cost Containment System

New – Technical Items (cont.)

- Additional specialty rate fee schedules for providers and services such as MSICs

- Expanded population indicators (Formerly CRS, SED, NAS, etc.) to be developed and communicated to Contractors

- Multiple line Encounter submissions:
  - New standards will require Contractors to submit all lines of a claim as a single encounter, thereby matching the structure of the claim to its resulting encounter
  - Final requirement timeline under development

New – Technical Items (cont.)

AHCCCS Complete Care ID Structures

- A single legal entity and brand shall be established by October 1, 2018, if the Offeror awarded the ACC Contract is an affiliated organization of the RBHA in the same GSA

- The single legal entity shall be extended to other GSAs

- To support this, AHCCCS looking at ACC Contractor ID structures comprised of a single ID for the ACC Contractor with use of contact types to designate population benefit coverage under that single ID

AHCCCS
Arizona Health Care Cost Containment System

New – Technical Items (cont.)

- When a member is receiving grant or state funded services as a Non-TXIX/XXI member and subsequently is found eligible for TXIX/XXI, the member's Title-XIX behavioral health assignment will remain with the RBHA for any Prior Period Coverage (PPC) timeframe

  o The member will be enrolled with the ACC Contractor for physical health services only for this PPC timeframe, then will be enrolled for both physical and behavioral health with the ACC Contractor prospectively

New – Technical Items (cont.)

- Members with a CRS designation, who have also been determined to have a Serious Mental Illness, will be enrolled in the RBHA for provision of both physical (acute and CRS-related) and behavioral health services

AHCCCS
Arizona Health Care Cost Containment System

Information Technology (IT) Systems Demonstration

- AHCCCS intends to incorporate an Information Technology (IT) demonstration, in May or June 2018, as part of readiness review where Successful Offerors will be required to participate in the IT demonstration utilizing mock data running through PMMIS

- The IT demonstration will take 5 to 6 weeks to complete and will encompass a minimum of 45 day-cycle in order to incorporate a full month of PMMIS activity

- IT demonstration will be scored solely for the purpose of use in the auto-assignment algorithm effective October 1, 2018

AHCCCS
Arizona Health Care Cost Containment System

Information Technology (IT) Systems Demonstration (cont.)

- Additional information will be posted and/or shared with all Successful Offerors regarding the final calendar, formal Q&A processes, etc., no later than April 2018

- This demonstration will include the exchange of actual test files between AHCCCS and ACC Contractors as outlined in the Provisions as outlined in the following slides

AHCCCS
Arizona Health Care Cost Containment System

Information Technology (IT) Systems Demonstration (cont.)

- Provisions of the Demonstration:
  - o All data provided to the Successful Offeror either for response or processing will be "mock" data created by AHCCCS
  - o All Successful Offerors will receive the same "mock" data files and scenarios however, they will be specific to each Successful Offeror
  - o Mock scenarios will be designed to require the Successful Offeror to utilize an automated system for most exchanges

Information Technology (IT) Systems Demonstration (cont.)

o Formats and content for "processing summaries" from Successful Offerors to AHCCCS will be provided by AHCCCS if applicable to a data exchange, and should not be altered in any way by the Successful Offeror

o Initial Monthly and ongoing Daily 834 enrollment files will not exceed 50 records per iteration

o AHCCCS will establish a formal pre-IT Demonstration question and answer process approximately one week prior to the commencement of the IT Demonstration

o All questions and responses will be made available to all Successful Offerors

Information Technology (IT) Systems Demonstration (cont.)

o Initial and subsequent claims scenarios will not exceed 50 records per iteration and will include member information, provider information and reference data supplied by AHCCCS as components of this exercise

o Encounter submissions will be based upon claims adjudicated by the Successful Offeror as part of the claims scenarios exercises

AHCCCS
Arizona Health Care Cost Containment System

Information Technology (IT) Systems Demonstration (cont.)

o Eligibility and claims status inquires will not exceed 5 records per iteration and will be based upon member data supplied by AHCCCS as components of this exercise

o Provided file data and scenarios will be simple and represent the most common situations for that type of exchange

o A high-level overview of this process will be provided during the Technical Interface Meeting

AHCCCS
Arizona Health Care Cost Containment System

Information Technology (IT) Systems Demonstration (cont.)

o Data exchanges from AHCCCS to the Successful Offeror will be available as early as 6:00 p.m. Arizona time the day prior to, but no later than, 7:00 a.m. Arizona time on the dates noted on the calendar

o Data exchanges from the Successful Offeror to AHCCCS must be delivered no later than 5:30 p.m. Arizona time on the dates noted on the calendar, and should be accompanied by an email to the AHCCCS IT Demonstration email address

AHCCCS
Arizona Health Care Cost Containment System

Information Technology (IT) Systems Demonstration (cont.)

- o AHCCCS will validate all data exchanges provided to ensure the accuracy of the data as well as the expected results

- o This exercise is intended to be iterative and many exchanges directly impact or build upon prior exchanges

    - AHCCCS intends to evaluate each Successful Offeror's "processing summaries", responses, and inbound exchanges to provide the expected results of each exchange no later than 6:00 p.m. Arizona time as outlined on the calendar

    - AHCCCS will provide this information to allow the Successful Offeror to make necessary corrections prior to the next related exchange

Information Technology (IT) Systems Demonstration (cont.)

o Individual secure SFTP testing folders will be created for each Successful Offeror to pick up data files and scenarios from AHCCCS and for the submission of "processing summaries" and responses to AHCCCS

o Successful Offerors will be expected to provider 2-4 individuals as key contacts for AHCCCS to SFTP testing folders

AHCCCS
Arizona Health Care Cost Containment System

Information Technology (IT) Systems Demonstration (cont.)

- o All scenarios will include, and will require the Successful Offeror to utilize, member information, provider information and reference data supplied to the Successful Offeror by AHCCCS

  - Contracted rates, discounts and penalties should not be applied

  - Only the AHCCCS Fee Schedule provided in the Reference File extract should be used

- o No data exchanges or question/answer windows are scheduled or expected for weekends or holidays

Reaching across Arizona to provide comprehensive quality health care for those in need

AHCCCS
Arizona Health Care Cost Containment System

Information Technology (IT) Systems Demonstration (cont.)

o AHCCCS will establish a formal question and answer process during each of the days specified on the calendar

o Questions received between 8:00 a.m. Arizona time and 12:00 p.m. Arizona time will be answered, if appropriate, no later than 3:30 p.m. Arizona time the same day

o All questions and responses will be made available to all Successful Offerors

Information Technology (IT) Systems Demonstration (cont.)

o Claims scenarios will be for Professional, Institutional and Dental formats only and will not include NCPDP Pharmacy formats

- New ACC Contractors' NCPDP testing will be required unrelated to the IT Systems Demonstration at a later date

o In order to provide the required "Processing Summaries" responses, certain responses will require more than one entry

- A standard thirty spaces will be provided for each response, however not all responses will require completion of all 30 spaces

AHCCCS
Arizona Health Care Cost Containment System

Information Technology (IT) Systems Demonstration (cont.)

- All claims scenarios should assume that appropriate Prior Authorizations were obtained and that necessary documentation was supplied

AHCCCS
Arizona Health Care Cost Containment System

Questions?

AHCCCS
Arizona Health Care Cost Containment System

Reaching across Arizona to provide comprehensive quality health care for those in need

Closing Remarks

Reaching across Arizona to provide comprehensive quality health care for those in need

AHCCCS
Arizona Health Care Cost Containment System

Thank You.

AHCCCS
Arizona Health Care Cost Containment System