



AHCCCS STRATEGIC PLAN STATE FISCAL YEARS 2017-2022

April 2017

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Douglas A. Ducey, Governor
Thomas J. Betlach, Director

April 4, 2017

Dear Arizonans:

I am pleased to share with you a copy of the Arizona Health Care Cost Containment System (AHCCCS) Strategic Plan for State Fiscal Years 2017-2022. Thanks to the tremendous leadership of Governor Ducey and a majority of the legislature, AHCCCS and our stakeholders have spent the past year moving towards a more integrated system of health care, reopening Kidscare to provide health services to Arizona's working families, and implementing policies to fight back against the opioid epidemic.

On July 1, 2016 AHCCCS formally welcomed 100 staff from the Division of Behavioral Health Services at the Department of Health Services. This merger has elevated and strengthened our focus on behavioral health services for our members. We will look back many years from now and wonder what took us so long to make this move.

In September, AHCCCS received approval for a new 1115 waiver. This waiver both renews existing authorities which allow AHCCCS to maintain its unique and successful managed care model as well as sets up innovative new programs which AHCCCS will utilize to remain one of the most cost effective Medicaid programs in the nation.

As a system that serves over 1.9 million Arizonans and spends \$33 million per day, it is critical that AHCCCS pursue a broad array of strategies that are focused on creating a sustainable program. The growth in the AHCCCS program must be manageable and cannot crowd out other policy priorities like education and public safety.

It is within this context that this plan was developed. The plan offers four overarching goals which will guide the overall direction AHCCCS will take in the next five years. These four goals build on previous accomplishments and represent the collaborative efforts of the AHCCCS leadership team:

- Goal 1.** *AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.*
- Goal 2.** *AHCCCS must pursue continuous quality improvement.*
- Goal 3.** *AHCCCS must reduce fragmentation driving towards an integrated healthcare system.*
- Goal 4.** *AHCCCS must maintain core organizational capacity, infrastructure and workforce planning that effectively serves AHCCCS operations.*

AHCCCS continues to serve as an innovative model for delivering efficient and effective health care to Arizonans in need. AHCCCS welcomes the opportunity to continue to be a leader and agent of change in the Arizona healthcare delivery system.

Sincerely,



Thomas J. Betlach
Director

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INTRODUCTION

The AHCCCS Strategic Plan for 2017-2022 begins with statements of the AHCCCS vision and mission, and a description of the Agency's guiding principles. This is followed by an overview of the programs and populations served, a review of accomplishments during the past fiscal year, and a scan of selected environmental circumstances that impact AHCCCS operations and drive strategic planning.

The Plan identifies four strategic goals for AHCCCS. These are:

1. AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.
2. AHCCCS must pursue continuous quality improvement
3. AHCCCS must reduce fragmentation driving towards an integrated healthcare system.
4. AHCCCS must maintain core organizational capacity and workforce planning that effectively serves AHCCCS operations

The Plan then concludes with a summary of Goals, Strategies, and Performance Measures that will serve to focus the efforts and energy of the program over the next few years.

AHCCCS VISION:

Shaping tomorrow's managed health care...
from today's experience, quality, and
innovation.

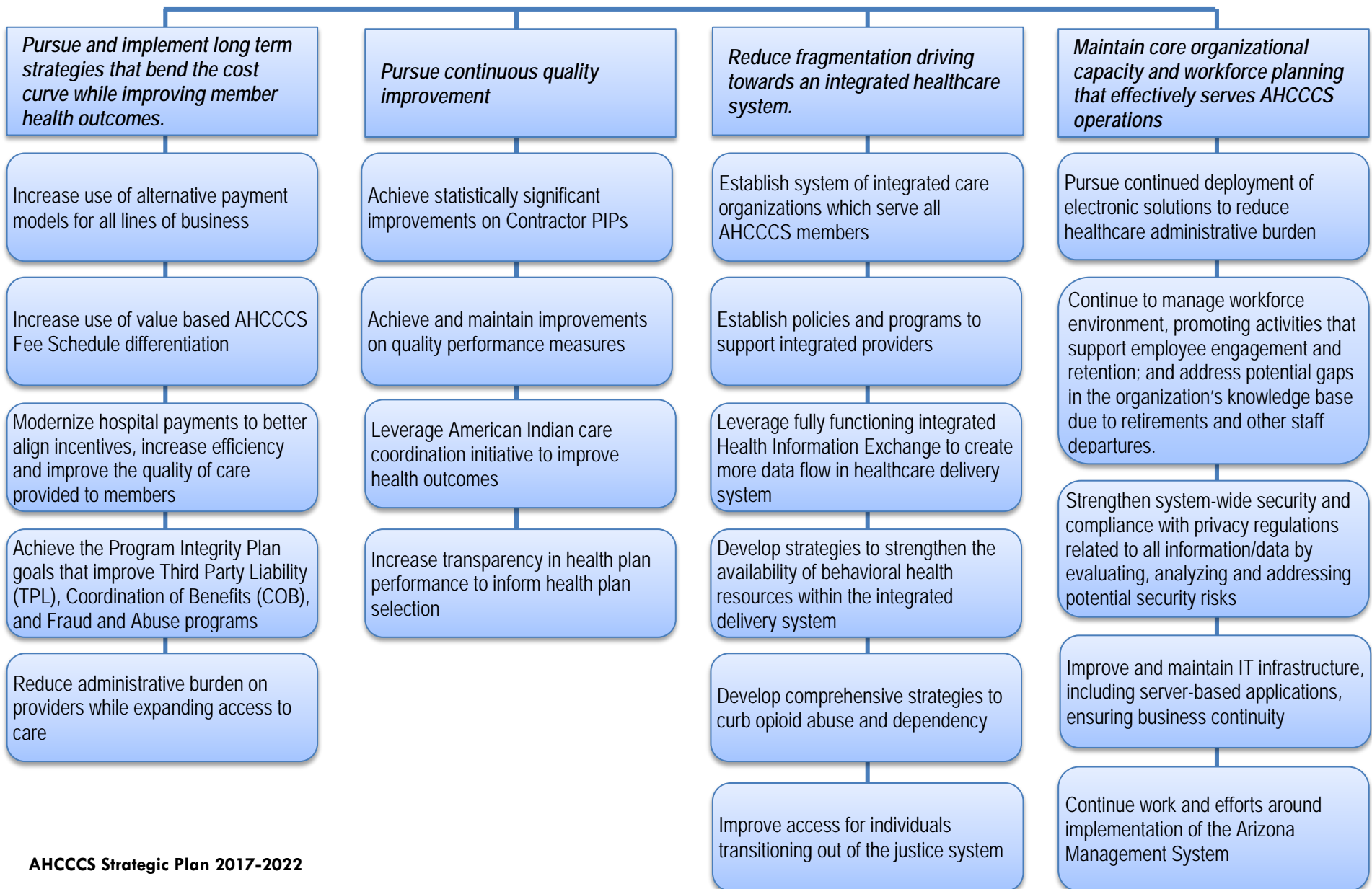
AHCCCS MISSION:

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

GUIDING PRINCIPLES:

- A Strategic Plan is the result of a collaborative process and reflects informed planning efforts by the Executive Management Team.
- AHCCCS continues to pursue multiple long-term strategies already in place that can effectively bend the cost curve including: system alignment and integration, value based purchasing, tribal care coordination, program integrity, health information technology, and continuous quality improvement initiatives.
- Success is only possible through the retention and recruitment of high quality staff.
- Program integrity is an essential component of all operational departments and, when supported by transparency, promotes efficiency and accountability in the management and delivery of services.
- AHCCCS must continue to engage stakeholders regarding strategic opportunities.

Reaching Across Arizona to Provide Comprehensive, Quality Health Care for Those in Need



AHCCCS OVERVIEW

The Arizona Health Care Cost Containment System (AHCCCS), the State's Medicaid Agency, uses federal, state, and county funds to provide health care coverage to the State's acute and long-term care Medicaid populations. Since 1982, when it became the first statewide Medicaid managed care system in the nation, AHCCCS has operated under a federal Research and Demonstration 1115 Waiver authority that allows for the operation of a total managed care model.

AHCCCS makes prospective capitation payments to contracted health plans responsible for the delivery of care to members. The model is a true public-private partnership that seeks to leverage competition and choice. The result is a managed care system that mainstreams recipients, allows them to select their providers, and encourages quality care and preventive services.

As of March 1, 2017, 1.95 million Arizonans were enrolled in AHCCCS.

AHCCCS Acute Care

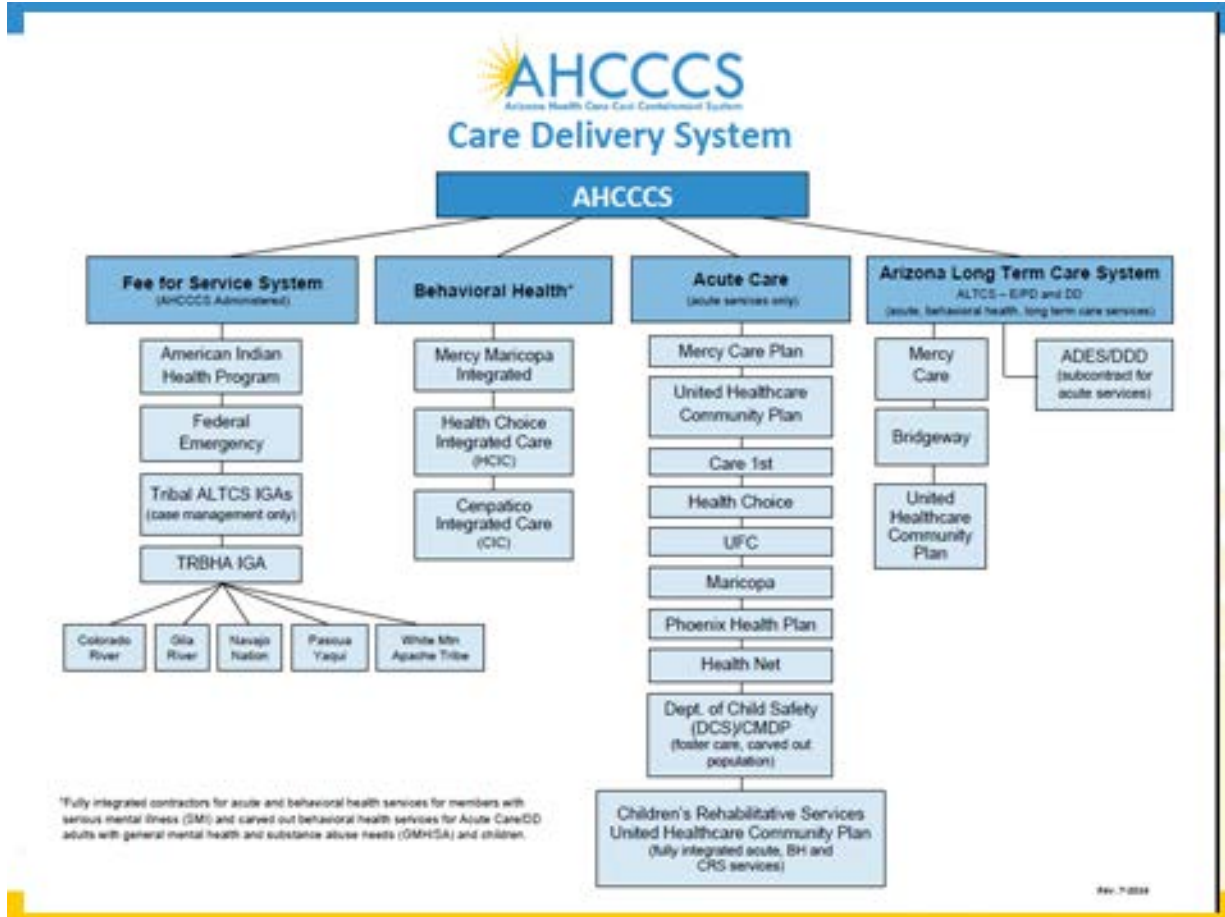
Although most AHCCCS members are required to enroll in contracted health plans, American Indians and Alaska Natives in the Acute Care Program may choose to receive services through either the contracted health plans or the American Indian Health Program, the agency's only fee-for-service program. AHCCCS also administers an emergency services only program for individuals who, except for immigration status, would qualify for full AHCCCS benefits. Acute health care services for children in foster care are provided by the Arizona Department of Child Safety (DCS), Comprehensive Medical and Dental Program (CMDP).

KidsCare

The Children's Health Insurance Program (CHIP), known as KidsCare in Arizona, offers affordable insurance coverage for low income families. Children under age 19 may qualify for the program if their family's income exceeds the limit allowed for Medicaid eligibility, but is below 200% of the Federal Poverty Level (FPL). In 2016, Governor Ducey signed Senate Bill 1457 into law ending the enrollment freeze on the KidsCare program. Children who qualify for this program receive care through AHCCCS contracted health plans.

AHCCCS Behavioral Health

As a result of Governor Ducey's administrative simplification, the Division of Behavioral Health Services was merged with AHCCCS on July 1, 2016. This merger was a positive step towards increasing integration in the health care system and has already resulted in beneficial outcomes and forward thinking policy decisions which factor in whole person health. Most behavioral health services are provided through Regional Behavioral Health Authorities or coordinated through Tribal RBHAs based on geographical service areas. The RBHAs also provide integrated services including acute care services for individuals with Serious Mental Illness.



ALTCS

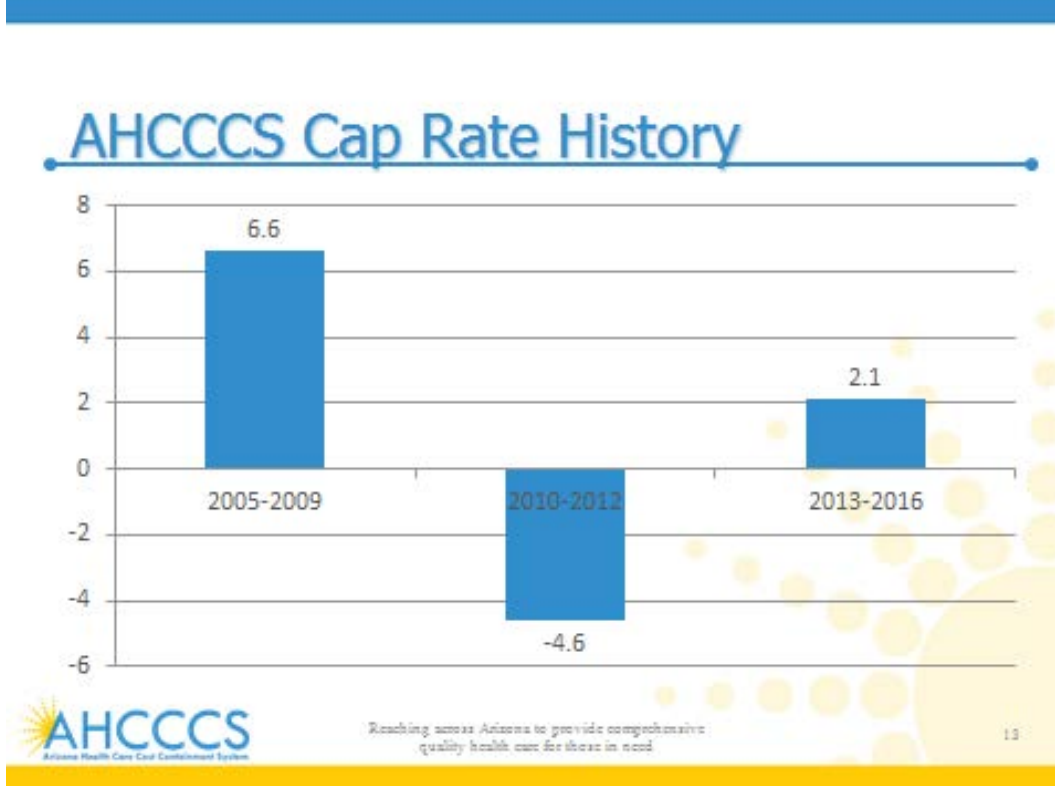
The Arizona Long Term Care System (ALTCS) provides acute care, behavioral health services, long-term care, and case management to individuals who are elderly, physically disabled, or developmentally disabled and meet the criteria for institutionalization. Services for individuals with developmental disabilities in ALTCS are offered through the Arizona Department of Economic Security (ADES), Division of Developmental Disabilities (DDD). Whereas ALTCS members account for less than 4.0% of the AHCCCS population, they account for approximately 21.7% of the costs. The ALTCS program encourages delivery of care in alternative residential settings. As in the Acute Care Program, elderly physically disabled and developmentally disabled members of all ages receive care through contracted plans.

KEY ACCOMPLISHMENTS

- AHCCCS successfully obtained approval for a new 1115 demonstration waiver. Included in the new waiver is the innovative new AHCCCS CARE program which contains the AHCCCS CARE account, Healthy Living Targets, and AHCCCS Works to connect members to employment opportunities. The waiver approval also includes an extension of existing authorities, such as mandatory managed care and use of home and community based services for members with long-term care needs, as well as a new \$1,000 dental benefit for long term care members on ALTCS.
- AHCCCS was ranked number one nationally among state Medicaid programs for its individuals with developmental disabilities program in the 2016 United Cerebral Palsy Report.

- In 2016, AHCCCS successfully completed the merger with the Department of Behavioral Health Services. This merger will allow AHCCCS to implement policies and systems of care that better focus on whole person health, reduced stigma, enhanced service delivery for all members, and stronger member and family engagement.
- AHCCCS has been committed to helping foster families and in 2016 implemented Jacob's Law. Through this implementation AHCCCS has simplified access to needed behavioral health services, improved monitoring systems to ensure timely access to services, and engaged with foster families throughout the process.
- As a culmination of the work done by the ASD Advisory Committee, AHCCCS released a report with recommendations to strengthen the health care system's ability to respond to the needs of members with or at risk for ASD, including those with co-occurring diagnoses.
- AHCCCS released a comprehensive report on Behavioral Health Needs of Children involved with the Department of Child Safety: Psychotropic Prescribing Update. This report analyzed psychotropic prescribing among children in Arizona's foster care system. The report detailed "*the percentage of children in foster care receiving psychotropic medications decreased by 26% from 2008 to 2014, from 20.3% to 14.9% respectively. The percentage of children in foster care receiving antipsychotic medication decreased by 43%, from 10.9% to 6.2%*".
- In July, AHCCCS reopened enrollment for the KidsCare program providing high quality healthcare coverage for children of working families.
- In October 2016, AHCCCS restored podiatry services provided by a licensed podiatrist and provided a \$1,000 dental benefit to members in the ALTCS program.
- AHCCCS continues to expand the external contract for determinations for persons with Serious Mental Illness to all Arizona counties, including several American Indian Tribes, to assure consistency and equity in the determination process.
- Worked with ADC to establish a Justice System Transition program which allows eligible individuals to be enrolled with AHCCCS immediately upon release.
- AHCCCS continues to pursue a long-term strategies to reduce fragmentation in the healthcare delivery system through integration:
- For CYE 2016, AHCCCS experienced a capitation rate increase of 1.7%. As detailed in the graph below this is in-line with the previous four year average of just 2.1%. This is well above the Great Recession period where rates averaged a decrease of (4.6) and much more sustainable than the 2005-2009 period where rates averaged a 6.6% increase.

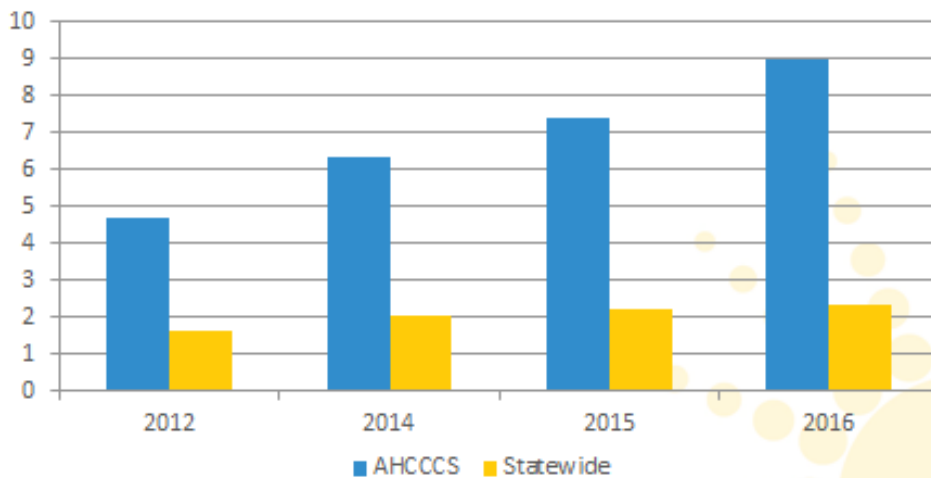
Figure 1. Average Annual Capitation Growth (%)



- Care delivery and payment reform efforts continued to focus on transitioning from paying for the volume of care to the value of care provided. Contracted managed care organizations (MCO's) were required to have an increased percentage of their provider payments in value based arrangements, where payments are related quality outcomes.
- AHCCCS met the vast majority of the Program Integrity goals established in its annual plan. The Agency worked with prosecutors successfully on 39 different cases resulting in 62 convictions - a program record. AHCCCS realized over \$1 Billion as a result of coordination of benefits, third party recoveries, and OIG activities, and began pursuing the ability to leverage private sector expertise on data analyses.
- AHCCCS has registered, validated and paid 3,600 eligible professionals and 75 acute care and critical access hospitals since the EHR program opened in July, 2011 - these payments total over \$666 million. AHCCCS continues to serve on the Health-E Connection Board, the Health Information Network of Arizona (HINAZ) Board, and the Network Leadership Council. This July 2016, AHCCCS became an official participant in the network when the Division of Fee-for-service management began receiving information from the network about its patient population.
- AHCCCS continued to pursue an improved partnership with Tribal stakeholders while continuing to engage in strategies that improve the health system for tribal members. AHCCCS conducted 8 tribal consultation meetings in 2016. AHCCCS also had over 190 American Indians enrolled in active care coordination by the end of calendar year 2016.

- The AHCCCS 2016 employee survey indicated a strong positive feeling among staff. A total of 97% of staff value members of their team; 96% believe in the AHCCCS mission; 90% understand clearly what is expected from them; and 87% are proud to be an AHCCCS employee. In addition, AHCCCS has achieved a world class level of employee engagement with 9 engaged employees for every 1 disengaged employee. This is compared to the statewide average of 2.3 engaged employees for every 1 disengaged employee.

Employee Engagement



STRATEGIC GOALS

The next section highlights the four strategic goals for AHCCCS and the comprehensive multi-year strategies which are being implemented in order to achieve these goals.

1. AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.

One of the biggest challenges facing health care today is that incentives are often not aligned for providers and payers. Even with significant managed care penetration in Arizona Medicaid, many providers were reimbursed through fee-for-service mechanisms that reward volume over value.

Value Based Purchasing is a critical policy strategy for moving to a financially sustainable healthcare delivery system, which rewards high quality care provided at an affordable cost. There are many value based approaches with varying degrees of breadth and depth within Medicaid, Medicare and commercial coverage. Reforms include outcome based care models, risk bearing models, population based payments and episodic payments that can lead to improved health and overall program savings. Many AHCCCS stakeholders are engaged in developing initiatives and arrangements that embrace the key features of alternative payment models. Additionally, AHCCCS plans to begin implementing quality based APR-DRG adjustments to modernize hospital payments and better align incentives and quality care.

AHCCCS remains committed to maximizing the efficiencies within its program as demonstrated by the multi-year contractual requirements for Managed Care contractors. AHCCCS has supported a market based approach that incentivizes payers and providers to establish new value based arrangements that align incentives to improve efficiency and member outcomes. Additionally, AHCCCS has pursued adjustments in the fee-for-service payment schedule to incentivize certain value measures for providers. For example, AHCCCS recently created a program for first responders to provide for treatment and referrals instead of requiring transportation to an emergency room to receive payment. AHCCCS also created a model to incentivize providers to offer integrated care of both physical and behavioral health services.

Finally, as part of the efforts to bend the cost curve and ensure overall fiduciary oversight, AHCCCS continues to dedicate significant agency resources to Program Integrity efforts. The agency develops an annual strategic plan focused entirely on efforts to reduce fraud, waste and abuse along with improving coordination of benefits and other important initiatives.

2. AHCCCS must pursue continuous quality improvement.

AHCCCS has built its quality structure over time by continual review of applicable national standards and regional trends, collaboration with partners, and its own experiences. The Quality Strategy includes both the Medicaid and CHIP programs and encompasses all AHCCCS contractors. It also incorporates measures to improve the Agency's internal processes involving enrollee information, monitoring, and evaluation.

AHCCCS establishes performance measures based on the CMS Core Measure sets and the National Committee for Quality Assurance (NCQA) HEDIS measures, as well as measures unique to Arizona's Medicaid program. AHCCCS establishes minimum performance standards and goals for each performance measure that are based on national standards, such as the NCQA National Medicaid means, whenever possible. AHCCCS utilizes the Consumer

Assessment of Healthcare Providers and Systems (CAHPS). It is a survey tool created by the Agency for Healthcare Research and Quality (AHRQ) to support and promote the assessment of members' experiences with health care.

AHCCCS Contractors are expected to conduct Performance Improvement Projects (PIPs) in clinical care and non-clinical areas that are anticipated to have a favorable impact on health outcomes and member satisfaction. The health and safety of AHCCCS members receiving covered services remains a focus for the Agency. AHCCCS utilizes a multi-Agency and Contractor approach in implementing oversight health and safety requirements.

AHCCCS remains committed to the health and safety of our American Indian members. Case management services are provided as an administrative service through managed care organizations. Many American Indian members receive care through the American Indian Health Program on a Fee For Service basis rather than through a Managed Care Organization. In order to close this gap and improve health outcomes, AHCCCS is establishing the American Indian Medical Home program to provide care coordination services to members of this population.

Finally, AHCCCS believes it is important for members to have complete information regarding quality of care when making a decision on which Managed Care Organization to enroll in. It is therefore a priority of AHCCCS to increase the transparency of health plan performance. AHCCCS will be working on improving and updating the Health Plan scorecard to provide this vital information to members in an easily digestible manner.

3. AHCCCS must reduce fragmentation driving towards an integrated healthcare system.

The definition of a system is “an assemblage or combination of things or parts forming a complex or unitary whole”. Unfortunately, health care delivery has become increasingly fragmented, leading to coordination and communication challenges for patients and clinicians. Ultimately, this fragmentation degrades the quality of health care due to disrupted relationships, poor coordination of care, and communication within and across provider groups. In an effort to address this issue, the structure of AHCCCS is transforming towards integrated care delivery systems with better alignment of incentives that seeks to efficiently improve health outcomes.

AHCCCS has been engaged in a multi-year effort to reduce fragmentation at the provider, payer and policy level for AHCCCS members. Starting in 2013, AHCCCS has successfully integrated services for a number of populations. System design matters and AHCCCS has worked with a variety of important stakeholders to develop new delivery systems that are focused on whole person health integrating both physical and behavioral health services. These integration efforts include:

1. Children's Rehabilitative Services – Previously 17,000 children with complex medical needs were served by three different payers. These included an acute plan, RBHA and CRS plan. These members are now served by a single Integrated Contractor.
2. Individuals with Serious Mental Illness – In 2014 and 2015, almost 40,000 individuals with Serious Mental Illness went from potentially up to 4 different payers involved in covering select services to a single organization that was responsible for all services for that member.
3. General Mental Health and Substance Abuse services for dual eligible members – In 2015, AHCCCS integrated services for 80,000 dual eligible members.

4. American Indian members – In 2016, as a result of the DBHS merger, AHCCCS was able to streamline the requirements for TRBHA organizations creating an opportunity to integrate services and work more closely with Tribes on the delivery and coordination of services.
5. Dual Eligible members – AHCCCS continues to pursue strategies to better align services for members that are enrolled in both Medicare and Medicaid. In 2016, AHCCCS had approximately 48% of the population aligned which is the highest percentage ever.
6. AHCCCS/DBHS merger – In 2016, AHCCCS completed a merger with the Department of Health Services Division of Behavioral Health. This merger brings behavioral health and physical health together at the policy level that will ensure behavioral health and physical health policies and system requirements are established with a focus on whole person health.

Looking ahead the work around transformation through integration and reducing fragmentation will continue. AHCCCS will be pursuing strategies to reduce fragmentation at the contractor and provider level of the healthcare delivery system. At the contractor level, AHCCCS plans to offer an integrated contract for ALL AHCCCS members by 2019. AHCCCS will also focus on increasing the number of integrated providers in the system and plans to increase the number of integrated clinics available to members by 50%. Furthermore, AHCCCS has already invested significant capital in integrating health information across providers. As a result of this forward strong community support, Arizona now has a fully functioning Health Information Exchange. AHCCCS will now focus on leveraging this system to increase information flow across delivery systems.

With the merger of DBHS with AHCCCS, strengthening access to behavioral health services for AHCCCS members will remain a top priority. Children involved with the foster care system have unique health care needs often characterized by significant risk of experiencing behavioral health conditions. AHCCCS will be implementing numerous strategies to ensure these children receive the high quality behavioral health care they need. This year also saw the conclusion of the AHCCCS Autism Spectrum Disorder (ASD) Advisory Committee. This group brought together a broad range of stakeholders to address and provide recommendations to strengthen services for the treatment of ASD. AHCCCS is committed to implementing these recommendations and strengthening the provision of behavioral services to members with ASD.

In 2015, 401 people in Arizona – more than 1 a day – died from prescription opioid overdoses. It is a priority of AHCCCS to put an end to this epidemic and curb the abuse of prescription opioids. In order to achieve these goals, AHCCCS will be developing and implementing a strategic plan to curb opioid abuse and reduce dependency.

Finally, AHCCCS will be implementing strategies to improve access for individuals transitioning out of the justice system. AHCCCS does not provide health care services for those who are incarcerated. Upon their release, many of these men, women, and children become eligible for AHCCCS. AHCCCS has partnered with the Arizona Department of Corrections and private sector partners to ease this transition. Once enrolled in AHCCCS, these members can receive quality health care in an efficient manner reducing unnecessary emergency department visits and the likelihood for recidivism.

4. AHCCCS must maintain core organizational capacity and workforce planning that effectively serves AHCCCS operations

If the agency is going to be successful in pursuing these important delivery system transformations then there are a number of other important infrastructure capabilities that must be addressed over the next several years.

Workforce

In order for AHCCCS to achieve the established operational and strategic objectives, the organization must have a dedicated, professional staff that is committed to the mission. Based on the most recent state survey AHCCCS had 9 staff engaged for every staff member not engaged. This compares to the state government rate of 2.2 to 1. A few other important metrics include the fact that 97% of the AHCCCS staff believe in the mission, 97% respect and value team members, and 94% understand what is expected.

However, there are challenges to sustaining the high level performance of the AHCCCS workforce. AHCCCS continues to operate with approximately twenty five percent less staff than prior to the start of the Great Recession. Turnover rates are, on the average, in the 16% range, while approximately 15% of the current AHCCCS workforce is eligible to retire

AHCCCS is pursuing several strategies to address these challenges.

1. Increasing AHCCCS' presence in the employment marketplace for purposes of enhancing our ability to attract the most qualified applicants;
2. Identifying and implementing relevant compensation strategies;
3. Maintaining an environment conducive to staff engagement;
4. Expanding innovative, low-cost professional development opportunities for existing employees;
5. Retaining critical staff;
6. Workforce and succession planning in order to ensure continuity of services and avoid leaving a significant gap in the Agency's knowledge base; and
7. Continuing to provide flexibility.

Approximately 22% of the AHCCCS workforce is Virtual Office with an even higher percentage on some variation of a flexible work schedule. This type of flexibility has proven essential to retention and assisting employees with striking a work-life balance.

Systems

System resources will continue to be a challenge and maintaining the appropriate infrastructure to manage and analyze the millions of records generated by the AHCCCS system requires appropriate investment. Over the next 3 years AHCCCS will be looking to improve quality management, provider registration, and eligibility systems.

Security

The AHCCCS Information Systems Division (ISD) must be ever vigilant regarding the security posture of the systems and important information contained within these systems. Proactive mitigation of security risks strengthens the ability to safeguard and protect Personally Identifiable Information (PII) and Protected Health Information (PHI) data entrusted to the

Agency by our more than 1.9 million members. In addition to the AHCCCS mainframe system (PMMIS), ISD will continue to keep non-mainframe systems and applications running consistently and efficiently. This includes server based applications, network infrastructure, the data warehouse, and digital communication.

Leveraging Data Analytics

The availability of reliable and valid information and the capacity to make that information actionable is critical to the decision-making process. Data-driven decision-making is the best way for true reform to occur in the healthcare system. However, determining the most effective way to utilize data, and having the time and resources to effectively review or explore data can produce challenges. As a result, there is an increased value and emphasis being placed on data analytics. The Office of Business Intelligence (OBI) is responsible for the AHCCCS Data Warehouse, which provides the Agency with information that is easily accessible and reliable. The information allows the organization to gain greater insight into its operations. AHCCCS will work with internal and external data analytics experts to develop the organization's capacity as a whole to turn solid information into effective actions.

Arizona Management System

Governor Ducey has deployed a professional, results-driven management system to transform the way agencies think and do business. AHCCCS has fully embraced this system and is committed to tracking and improving performance every day. All across the agency huddle boards have sprouted up and AHCCCS employees and management are continually monitoring performance and holding themselves accountable for results. The agency will continue to gather data and work toward delivering results for the people of Arizona.

STRATEGIC GOALS, STRATEGIES, & PERFORMANCE MEASURES

GOAL 1.

AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.

STRATEGY 1.1

Increase use of alternative payment models for all lines of business

PERFORMANCE MEASURE 1.1.1

47% of Health Plan spend in alternative payment models by 10/1/18

STRATEGY 1.2

Increase use of value based AHCCCS Fee Schedule differentiation

PERFORMANCE MEASURE 1.2.1

Value based differentiations available for 50% of FFS spend exclusive of IHS/638 reimbursement

STRATEGY 1.3

Modernize hospital payments to better align incentives, increase efficiency and improve the quality of care provided to members

PERFORMANCE MEASURE 1.3.1

Begin and implement quality based APR-DRG adjustments by 10/1/18

STRATEGY 1.4

Achieve the [Program Integrity Plan](#) goals that improve Third Party Liability (TPL), Coordination of Benefits (COB), and Fraud and Abuse programs

PERFORMANCE MEASURE 1.4.1

Percent of Program Integrity goals met

STRATEGY 1.5

Reduce administrative burden on providers while expanding access to care

PERFORMANCE MEASURE 1.5.1

Implement three strategies in 2017 to reduce administrative burden on providers

GOAL 2.

AHCCCS must pursue continuous quality improvement

STRATEGY 2.1

Achieve statistically significant improvements on Contractor PIPs

PERFORMANCE MEASURE 2.1.1

Percent of AHCCCS Contractors that complete AHCCCS-mandated PIPs (improve and sustain performance) or demonstrate statistically significant improvement on re-measurements

STRATEGY 2.2

Achieve and maintain improvements on quality performance measures

PERFORMANCE MEASURE 2.2.1

Percent of measures which exceed the NCQA mean

PERFORMANCE MEASURE 2.2.2

Improve quality measurement infrastructure and systems by 10/1/18

STRATEGY 2.3

Leverage American Indian care coordination initiative to improve health outcomes

PERFORMANCE MEASURE 2.3.1

Number of facilities achieving medical home status

PERFORMANCE MEASURE 2.3.2

Number of members in active care coordination

STRATEGY 2.4

Increase transparency in health plan performance to inform health plan selection

PERFORMANCE MEASURE 2.4.1

Update and improve Health Plan Scorecard by 10/1/17

GOAL 3.

AHCCCS must reduce fragmentation driving towards an integrated healthcare system

STRATEGY 3.1

Establish system of integrated care organizations which serve all AHCCCS members

PERFORMANCE MEASURE 3.1.1

Offer integrated contract for all AHCCCS members by 2019

PERFORMANCE MEASURE 3.1.2

Increase dual members aligned

STRATEGY 3.2

Establish policies and programs to support integrated providers

PERFORMANCE MEASURE 3.2.1

Increase the number of AHCCCS registered integrated clinics by 50% by 10/1/2018

STRATEGY 3.3

Leverage fully functioning integrated Health Information Exchange to create more data flow in healthcare delivery system

PERFORMANCE MEASURE 3.3.1

Number of providers registered in the HIE

PERFORMANCE MEASURE 3.3.2

Total Number of Data Users

STRATEGY 3.4

Develop strategies to strengthen the availability of behavioral health resources within the integrated delivery system

PERFORMANCE MEASURE 3.4.1

Percentage of children in foster care receiving at least one service per month for their first six months in foster care

PERFORMANCE MEASURE 3.4.2

Percentage of individuals with an ASD diagnosis on a claim in the last year who received a behavioral health service during the quarter

STRATEGY 3.5

Develop comprehensive strategies to curb opioid abuse and dependency

PERFORMANCE MEASURE 3.5.1

Quantity of opioids dispensed

STRATEGY 3.6

Improve access for individuals transitioning out of the justice system

PERFORMANCE MEASURE 3.6.1

Establish 2 clinics inside probation and parole offices by 10/1/18

PERFORMANCE MEASURE 3.6.2

Percent of AHCCCS eligible individuals enrolled upon release

GOAL 4.

AHCCCS must maintain core organizational capacity and workforce planning that effectively serves AHCCCS operations

STRATEGY 4.1

Pursue continued deployment of electronic solutions to reduce healthcare administrative burden

PERFORMANCE MEASURE 4.1.1

Percent of members submitting on-line applications

PERFORMANCE MEASURE 4.1.2

Online provider application and renewal process created by 1/1/19

PERFORMANCE MEASURE 4.1.3

AHCCCS will develop the ability to accept provider appeals online by 2020

STRATEGY 4.2

Continue to manage workforce environment, promoting activities that support employee engagement and retention; and address potential gaps in the organization's knowledge base due to retirements and other staff departures.

PERFORMANCE MEASURE 4.2.1

Rate of employee turnover within the first year of employment

PERFORMANCE MEASURE 4.2.2

AHCCCS Overall Employee Engagement Score

STRATEGY 4.3

Strengthen system-wide security and compliance with privacy regulations related to all information/data by evaluating, analyzing and addressing potential security risks

PERFORMANCE MEASURE 4.3.1

Percent of documented findings that have been remediated

PERFORMANCE MEASURE 4.3.2

Percent of documented findings that have been remediated by MCOs

STRATEGY 4.4

Improve and maintain IT infrastructure, including server-based applications, ensuring business continuity

PERFORMANCE MEASURE 4.4.1

Network system availability

PERFORMANCE MEASURE 4.4.2

HEA Plus availability

STRATEGY 4.5

Continue work and efforts around implementation of the Arizona Management System

PERFORMANCE MEASURE 4.5.1

Number of process improvements implemented that show favorable results