



Welcome to the AHCCCS Community Forum

- You were automatically muted upon entry. Please keep yourself on mute throughout the meeting to limit feedback.
- Please do not put us on hold.
- To unmute your phone you will need to click on the microphone icon.
- Please use the chat feature for questions or raise your hand.

Thank you.



AHCCCS Update

January 26, 2021 Update



Today's Presenters



Alex Demyan
Advocacy Administrator
DCAIR



Susan Kennard
Office of Individual and Family
Affairs (OIFA) Bureau Chief



Steven Leibensperger
Foster Care
Community Liaison



Jamie Green
Healthcare Advocacy
Coordinator



Dana Flannery
Asst. Director Division of
Community Advocacy &
Intergovernmental Relations



David Bridge
Director of Housing
Programs



Amanda Bahe
AHCCCS Tribal Liaison



Alisa Randall
Asst. Director Division of
Grants Administration



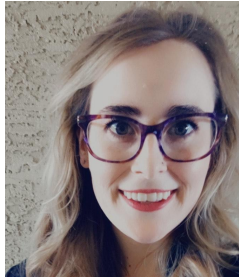
Shreya Arakere
Waiver Manager



Markey Adams
Director Division of Fee for
Service Management

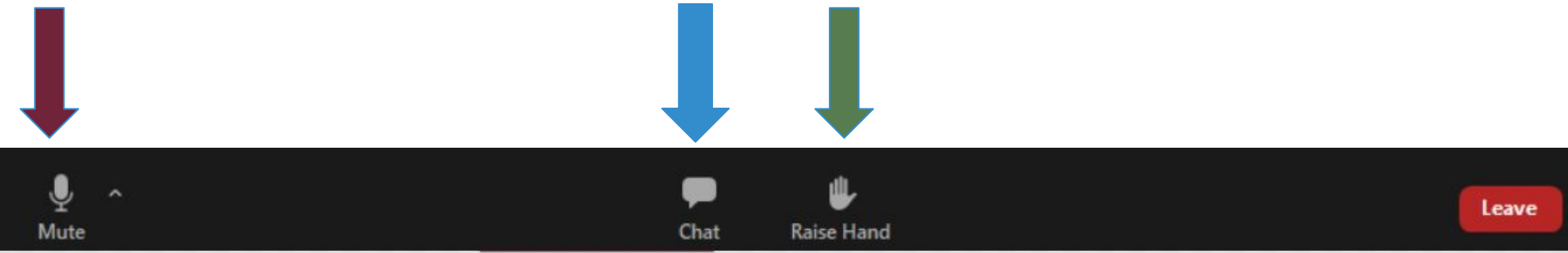


Chaz Longwell
**Recovery & Resiliency
Programs Coordinator**



Jessica Ament
Office of Human Rights
(OHR) Advocate

How to Navigate This Zoom Webinar



- **Windows:** You can also use the **Alt+Y** keyboard shortcut to raise or lower your hand.
- **Mac:** You can also use the **Option+Y** keyboard shortcut to raise or lower your hand.

Topics to cover:

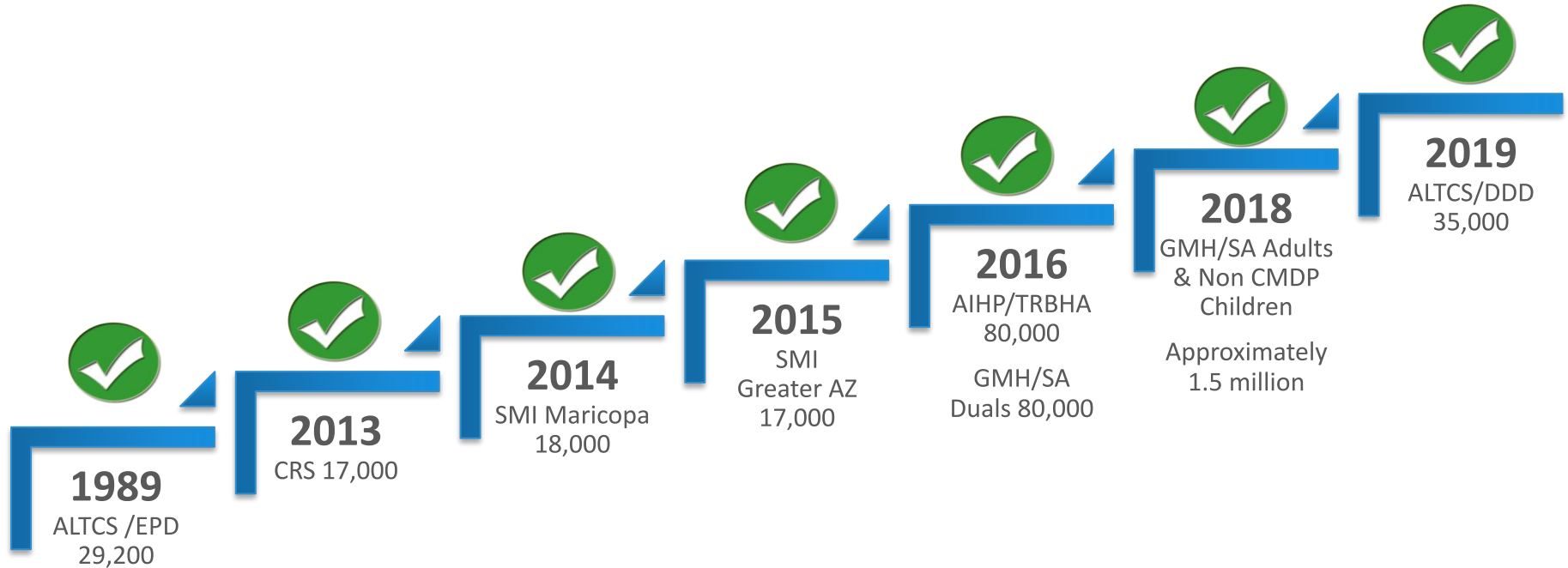
- Integration
- Future of RBHA Services
- DDD - AIHP Update
- Office of Individual and Family Affairs
- Office of Human Rights
- Navigating AHCCCS
- Waiver and State Plan overview
- Whole Person Care Initiative
- AHCCCS COVID-19 response
- Grants
- Abuse and Neglect Task Force update



Recent Integration Efforts



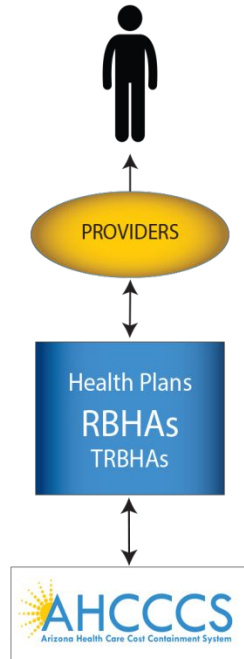
Integration Progress To Date



2018 Integration: AHCCCS Complete Care

- Largest transition to integration in AHCCCS history.
- A HUGE step to integrate healthcare in a single ACC Health Plan that:
 - Includes physical and behavioral healthcare service providers (including CRS – 18k)
 - Manages the provider network for all healthcare services
 - Provides comprehensive managed care for the whole person

Integration at all 3 Levels



Integrated Clinics for medical and behavioral

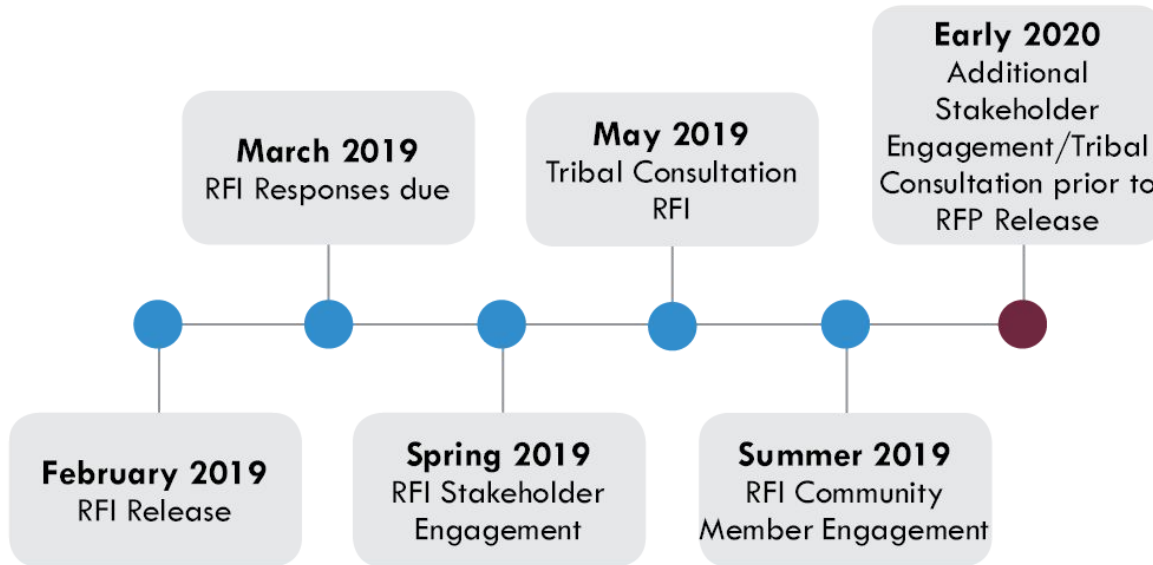
- **Individuals with SMI**
- Oct 2018: ACC/AIHP - 1.5M Children/Adults
- Oct 2019: ALTCS DD (including all SMI)

- 2015: ADHS/BHS joins AHCCCS



RBHA Services Transfer Competitive Contract Expansion (CCE)

Request for Information and Stakeholder Engagement



Find out more on azahcccs.gov



Google Custom Search

Advanced search

HOME | AHCCCS INFO | MEMBERS/APPLICANTS | PLANS/PROVIDERS | AMERICAN INDIANS | RESOURCES | FRAUD PREVENTION | CRISIS?

Home / AHCCCS Info / This Page

▼ About Us

▲ Initiatives

Home

AHCCCS Complete Care 

Building an Integrated Health Care System 

Integrated Delivery

Behavioral Health

Medicare & Medicaid (Duals)

Children's Rehabilitative Services

Justice Initiative

Targeted Investments

Payment Modernization 

Using Technology to Improve Patient Care 

Behavioral Health

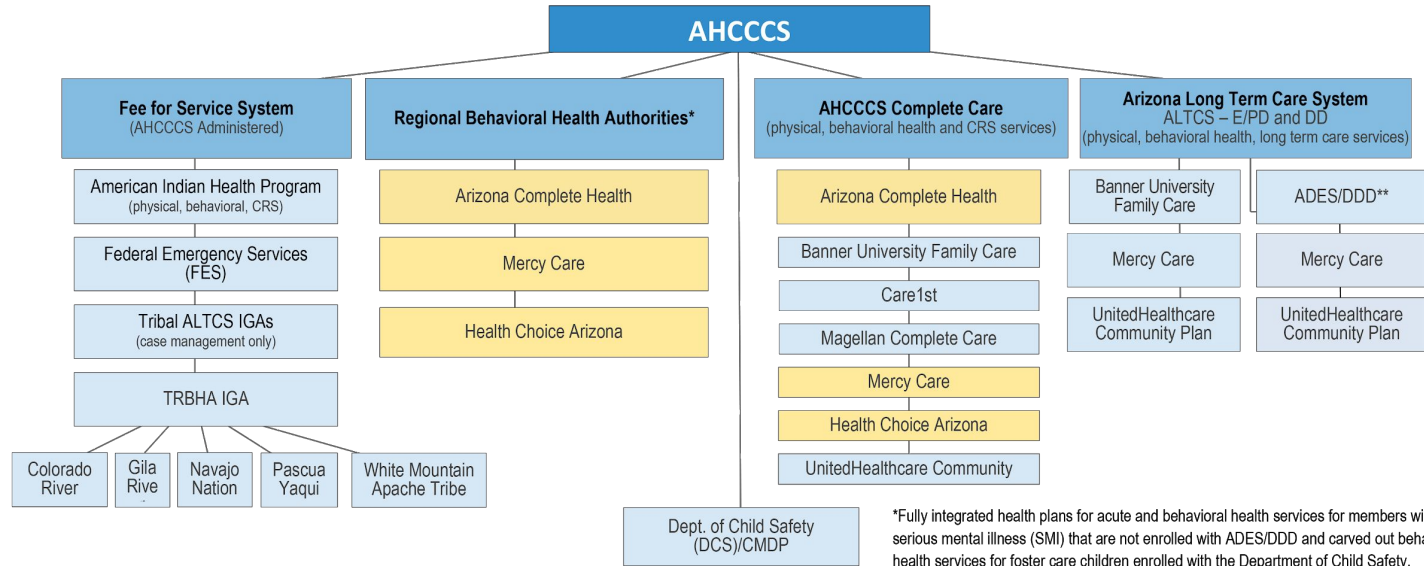
The Future of Regional Behavioral Health Authority (RBHA) Service Delivery

Although a significant portion of the [behavioral health service delivery](#) for adults and children has been moved to the AHCCCS Complete Care (ACC) plans, the RBHAs (that are all also contracted with AHCCCS for ACC services) continue to play a critical role providing the following services:

- Integrated physical and behavioral health services for members determined to have Serious Mental Illness (SMI). Enrollment in each geographic service area (GSA) as of April 1st for Title XIX and XXI covered members determined to have SMI:
 - North GSA - 5,745
 - Central GSA - 22,338
 - South GSA - 13,428
- Behavioral health services for members in the custody of the Department of Child Safety and enrolled in the Department of Child Safety/Comprehensive Medical and Dental Program (DCS/CMDP): April 1st enrollment – 12,859.
- Behavioral health services for Arizona Long Term Care System (ALTCs) members enrolled with the Department of Economic Security/Division of Developmental Disabilities (DES/DDD): April 1st enrollment – 33,556.
- Crisis Services including telephone, community-based mobile, and facility-based stabilization (including observation not to exceed 24 hours), and
- SAMHSA Grants and Other Non-TXIX/XXI funded services including housing.

Planned Changes to RBHA Service Delivery

AHCCCS Care Delivery System



*Fully integrated health plans for acute and behavioral health services for members with serious mental illness (SMI) that are not enrolled with ADES/DDD and carved out behavioral health services for foster care children enrolled with the Department of Child Safety.

**ADES/DDD subcontractors to provide physical health, behavioral health, and limited LTSS services including: nursing facility, emergency alert, and rehabilitative physical health therapy for members age 21 and over. ADES/DDD to provide all other LTSS as well as a fee-for-service AHP program for American Indian members.

Current status with RBHA services

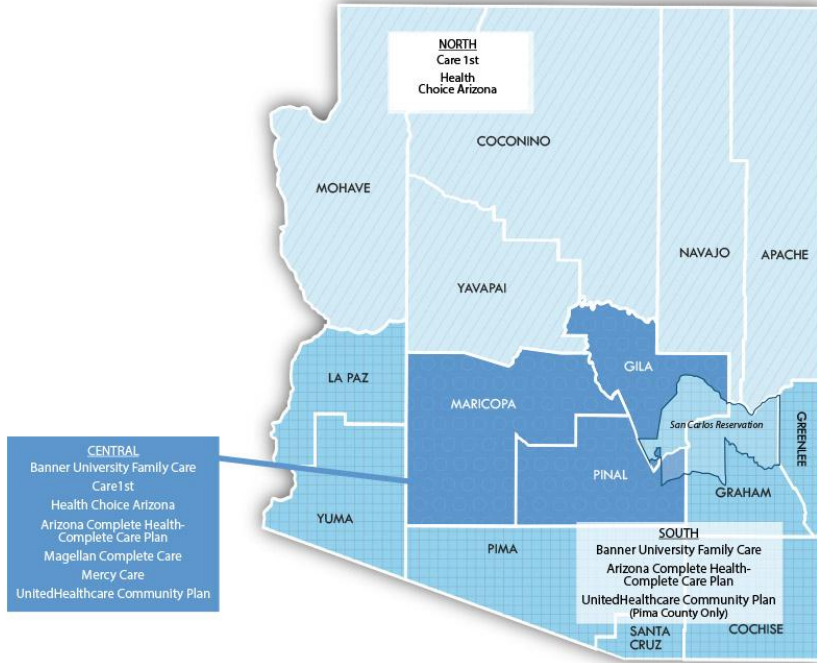
Regional Behavioral Health Authorities (RBHAs) currently continue to provide and serve:

- Foster children enrolled in CMDP
- Individuals determined to have a serious mental illness (SMI)
 - Northern GSA TXIX Enrollment 6,072
 - Central GSA TXIX Enrollment 24,911
 - South GSA TXIX Enrollment 13,902
- Crisis services, grant funded, and state-only funded services

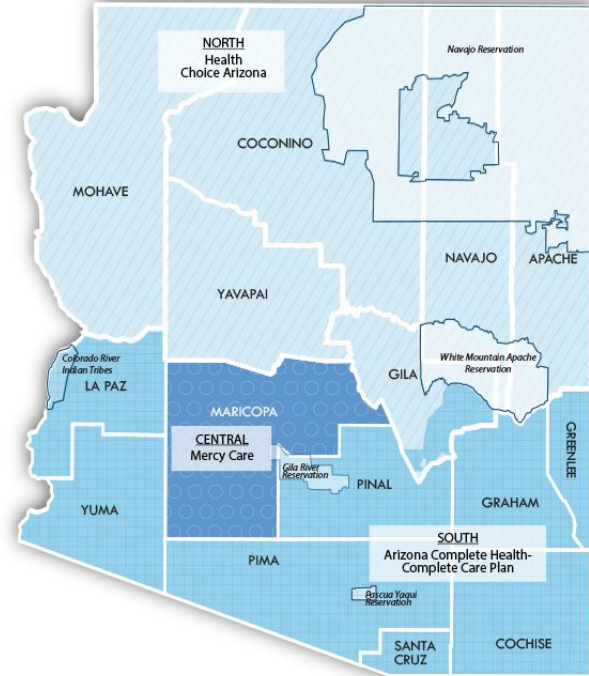
*Enrollment numbers updated 10/2020

Geographic Service Areas

AHCCCS Complete Care (ACC) Services Map



RBHA/TRBHA and Crisis Services Map



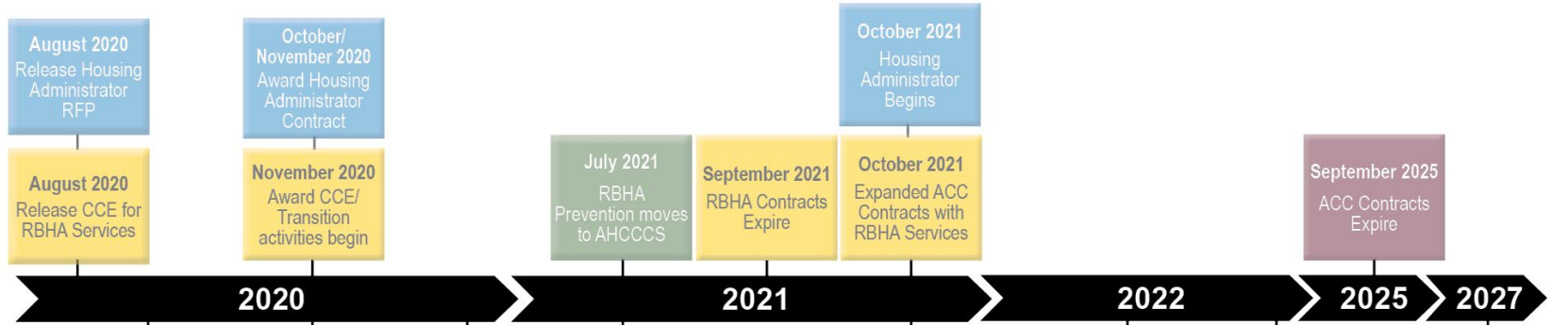
Note: Zip codes 85542, 85192, 85550 representing San Carlos Tribal area are included in the South GSA.



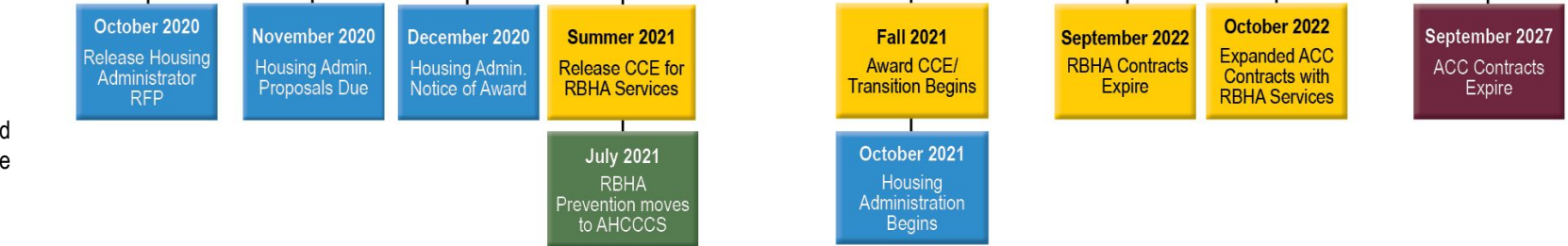
Major Decisions to Date

Revised RBHA CCE Timeline

Previous
Timeline



Updated
Timeline



ACC Contracts Expire

RBHA

Housing

Prevention

Major Decisions

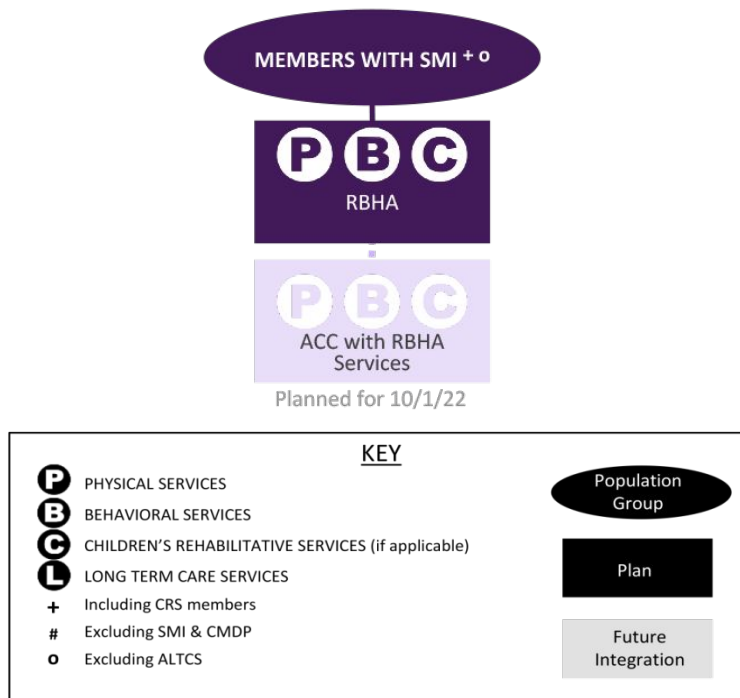
1. Mercy Care extended so all RBHA services will be transitioned at same time - Oct 2022
2. We will be limiting our RFP (or transfer of services) to the current ACC plans in each area - known contractors already with providers and members.



Major Decisions

- Allow for one ACC plan to provide expanded RBHA services in each Geographic Service Area.
- ACC Plan with expanded services will be called an ACC-RBHA. An ACC Plan with a Regional Behavioral Health “Agreement”.

Members with SMI determination starting October 1, 2022



Major Decisions

- Through Competitive Contract Expansion (CCE) one ACC Plan in each GSA to provide:
 - Integrated service to individuals with SMI,
 - Non-TXIX/XXI State and grant funded services
 - Crisis services
- AHCCCS will retain and administer portion of grant funds that currently goes to RBHAs for **prevention** services

Administration of Primary Prevention Services

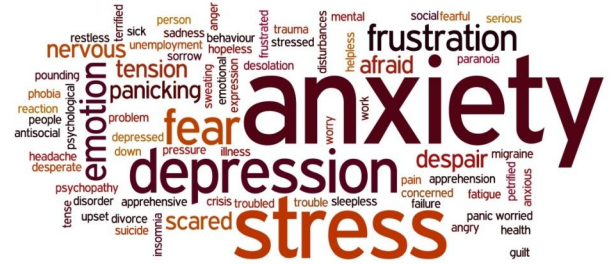
- AHCCCS conducted focus groups to gather information that will inform AHCCCS' administration of these dollars
- Preliminary Feedback
 - Approximately 130 attendees total
 - Targeted training needs identified
 - Recent events regarding racial and social justice has had an impact on the field and within the communities being served
 - Would like more regular communication with AHCCCS/DGA
 - Increase in funds available for training, credentialing, and community based prevention

Major Decisions - Opt Out

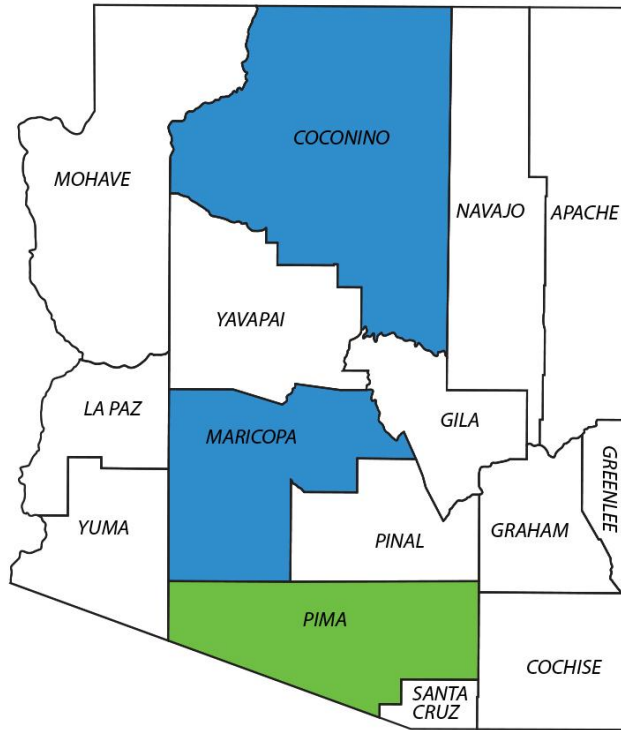
- Individuals with an SMI can continue to “opt out” of receiving physical health services from the ACC-RBHA.
- Member will be transferred to a different ACC Plan in the same GSA in order to provide physical health services;
- Members ***must meet one or more of the conditions*** outlined in the AHCCCS 1115 Waiver and our [policy](#).

Major Decisions - Crisis Services

- ACC-RBHA in each GSA to be responsible for providing crisis services to all individuals within their awarded GSA.
 - mobile crisis teams
 - crisis stabilization services
- ACC-RBHAs will be required to collaborate to contract with a **single, statewide crisis phone vendor** responsible for implementing an easy to use, 24/7 crisis phone number and crisis response system including mobile team dispatch.

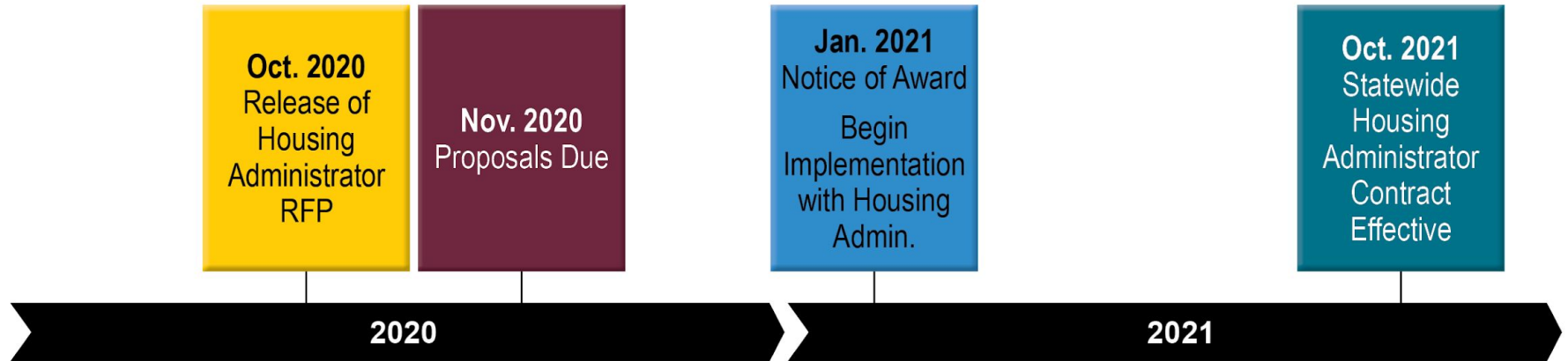


Court Ordered Evaluations



-  Counties highlighted in blue have an IGA for pre-petition screening and evaluation services
-  Counties highlighted in green have an IGA for pre-petition screening services only
-  Counties highlighted in white have the responsibility for the Court Ordered Evaluation (COE) as pursuant to A.R.S. 36-545 et. seq

Housing Administrator Timeline



Major Decisions - Housing Administrator

- Key responsibilities of the Housing Administrator will include, but not be limited to, acceptance of referrals from all AHCCCS programs, waitlist oversight, housing quality inspections, legal compliance, verification of eligibility documentation, member briefings, subsidy payments, renewals and required housing reporting.
- Review and award of SMI Housing Trust Fund monies for capital projects for members determined SMI will remain with AHCCCS as will oversight and distribution of housing funds to the TRBHAs.
- AHCCCS may employ a phased in approach for implementation of the Housing Administrator.

Major Decisions - Tribal Regional Behavioral Health Authority

As noted in a previous posting, a successful AHCCCS Complete Care Offeror that is awarded an expanded Contract under this Competitive Contract Expansion (CCE) will be referred to as an **AHCCCS Complete Care Plan with a Regional Behavioral Health Agreement (ACC-RBHA)**.

Although the meaning of the acronym “RBHA” is changing, the acronym “TRBHA” **will remain unchanged** and continue to be the abbreviation for Tribal Regional Behavioral Health Authority.

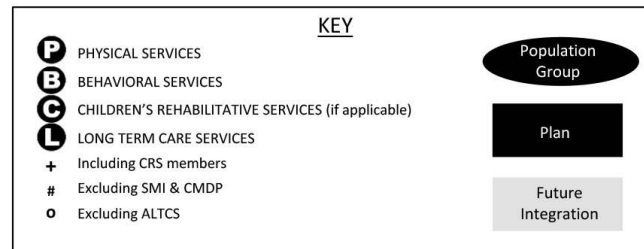
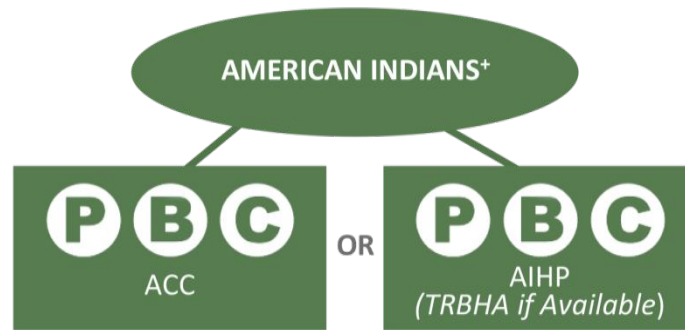
AHCCCS Members who are American Indian/Alaska Native (AI/AN)

- Received feedback and input from tribal stakeholders at Tribal Forums and Tribal Consultation meetings on the following:
 - Should AI/AN members with SMI continue to have choice of enrollment with portions of their services delivered through managed care, AIHP and TRBHAs?
 - Should choices and service delivery be consistent with ACC choice for members not determined to be SMI, allowing integrated options?

Supporting Choice for AHCCCS Members who are AI/AN (Not SMI)

- Integrated choices for the Non-SMI population (includes CRS):
 - An ACC Plan
 - AIHP
 - AIHP and TRBHA

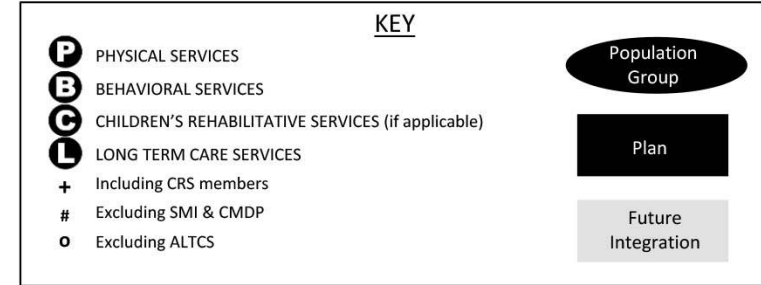
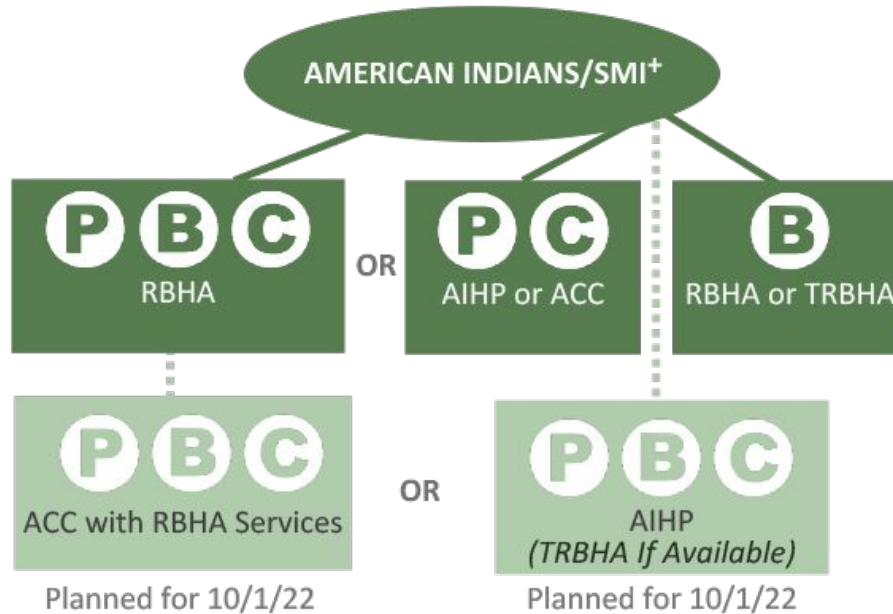
*Note: AIAN members can still access services from an IHS or 638 facility at anytime regardless of enrollment



Major Decision - Consistent Options for AI/AN AHCCCS members with SMI

- Integrated choices:
 - AIHP OR AIHP and TRBHA
 - An ACC-RBHA Plan for all services
- Members enrolled in AIHP for physical health services and a RBHA for behavioral health services will transfer to AIHP on October 1, 2022.
- AIAN members can still access services from an IHS or 638 facility at anytime regardless of enrollment and can change between AIHP and managed care as they do today.

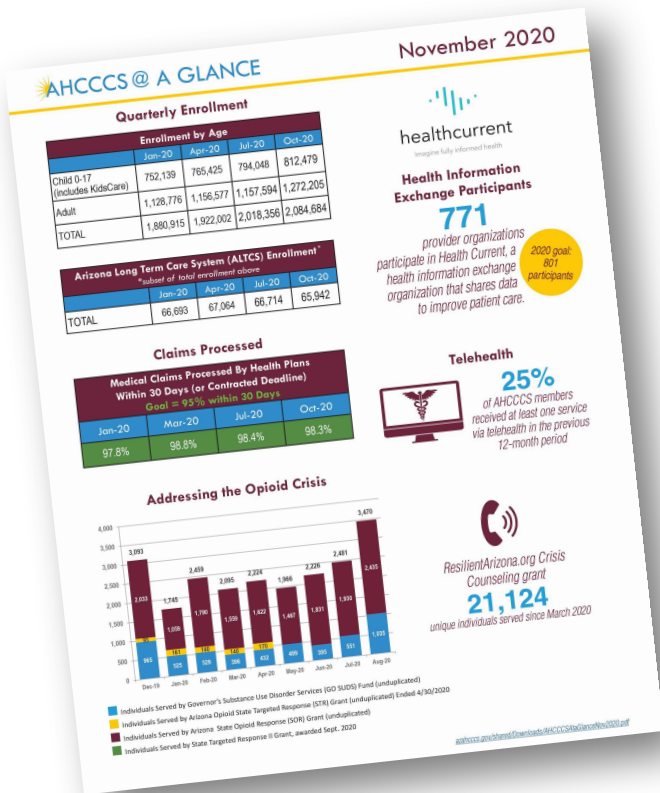
AI/AN AHCCCS members with SMI determination – October 2022



A blue-tinted background image featuring a silhouette of a person standing with their arms raised in a 'V' shape, symbolizing victory or triumph. The person is positioned in the center-right of the frame. The background shows a bright blue sky with a few birds in flight and a field of tall grass at the bottom. The overall mood is positive and empowering.

Be your own advocate with resources...

AHCCCS at a Glance



azahcccs.gov/shared/Downloads/AHCCCSAtaGlanceNov2020.pdf

Office of Human Rights (OHR)

OHR provides help free of charge to individuals determined to have a Serious Mental Illness (SMI) in the public behavioral health system in Arizona.

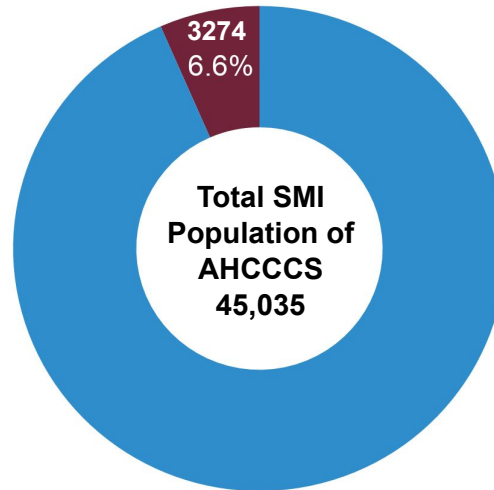
Mission Statement: Providing advocacy to individuals determined to have a Serious Mental Illness (SMI) to help them understand, protect and exercise their rights, facilitate self-advocacy through education and obtain access to behavioral health services in the public behavioral health system in Arizona.

Call us at: 602-364-4585

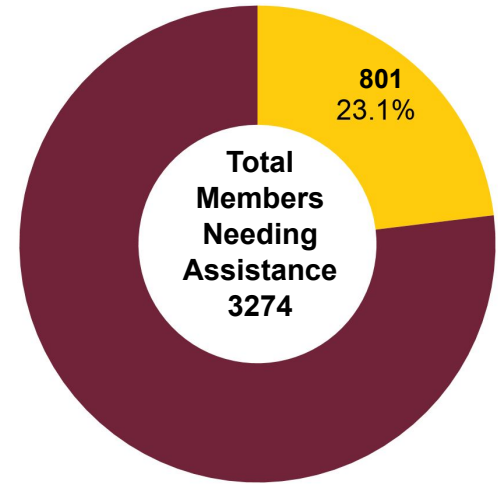
[azahcccs.gov/AHCCCS/HealthcareAdvocacy/ohr.html](https://www.azahcccs.gov/AHCCCS/HealthcareAdvocacy/ohr.html)

Please visit the OHR webpage for other resources: <https://www.azahcccs.gov/AHCCCS/HealthcareAdvocacy/ohr.html>

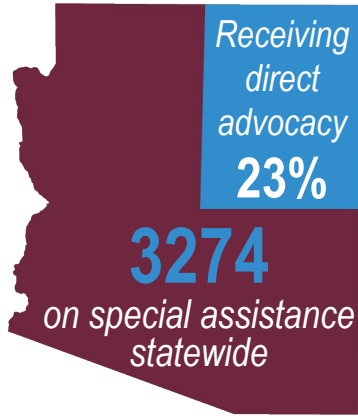
SMI Members Needing Special Assistance



Members Needing Special Assistance Being Served by OHR



Office of Human Rights 2020 Mid Year Highlights



OHR participated in . . .

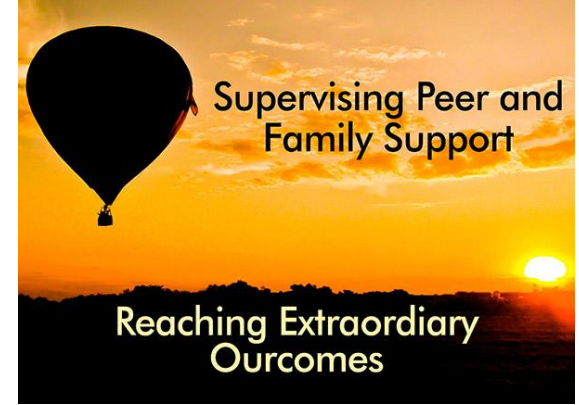
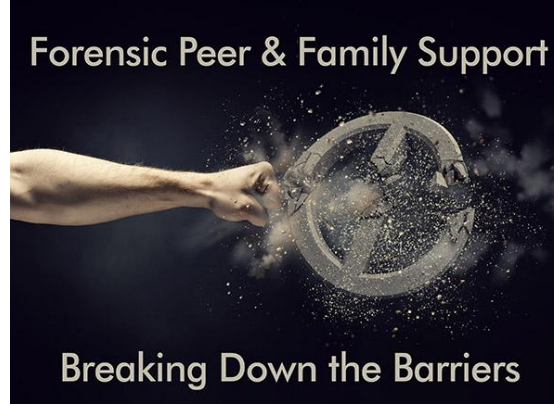


OHR was able to assist . . .



Feedback for OIFA and Future ACC/RBHA

- AHCCCS, RBHAs and ACC Plans are required to have an Individual and Family Affairs (OIFA) Administrator and unit including a member liaison for adults and children. Send feedback to OIFA@azahcccs.gov



Empower yourself... ONE-PAGERS

Currently 44 One-Pagers covering many topics to assist members and family members, in an easy to read and understand format.



Your Health Care
Rights



Navigation Tools



Foster Care,
Kinship and
Adoptive Families



Peer-Run & Family-Run
Organizations



Formal
Complaints
(Grievances)

Office of Individual and Family Affairs



44 one-pagers
posted online

Data as of 1/1/2021

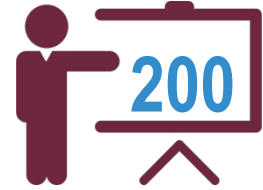
SUBSCRIBE 



2,449

*weekly newsletter
subscribers.*

completed
**OIFA 2.0 &
Strategic Plan**



*trainers and students
trained by the peer and
family career academy*



9700+

*engagement interactions
with community members*





Question regarding SMI Specific Responsibilities

- What should AHCCCS consider to maintain focus on the needs of individuals with an SMI as the responsibilities are blended within one plan?

Questions?



DDD-AIHP Update

Markay Adams, DFSM Assistant Director

Future Integration

- DES and AHCCCS are contemplating future integration efforts and overall improved system delivery for DD-AIHP members
- Tribal Consultations: Department of Economic Security- June 25, 2020 and AHCCCS- Tribal Consultation on July 7, 2020 and July 31, 2020
- Goal: Improve care coordination and increase system transparency for members and providers

Guide to Acronyms

BH	Behavioral Health
CRS	Children's Rehabilitative Services
DDD-AIHP	DDD-American Indian Health Plan
DDD	Division of Developmental Disabilities
DFSM	Division of Fee-for-Service Management
LTSS	Long Term Care Services and Supports
PH	Physical Health
TRBHA	Tribal Regional Behavioral Health Authorities
SMI	Serious Mentally Ill

AHCCCS Division of Fee for Service Management & DES Division of Developmental Disabilities

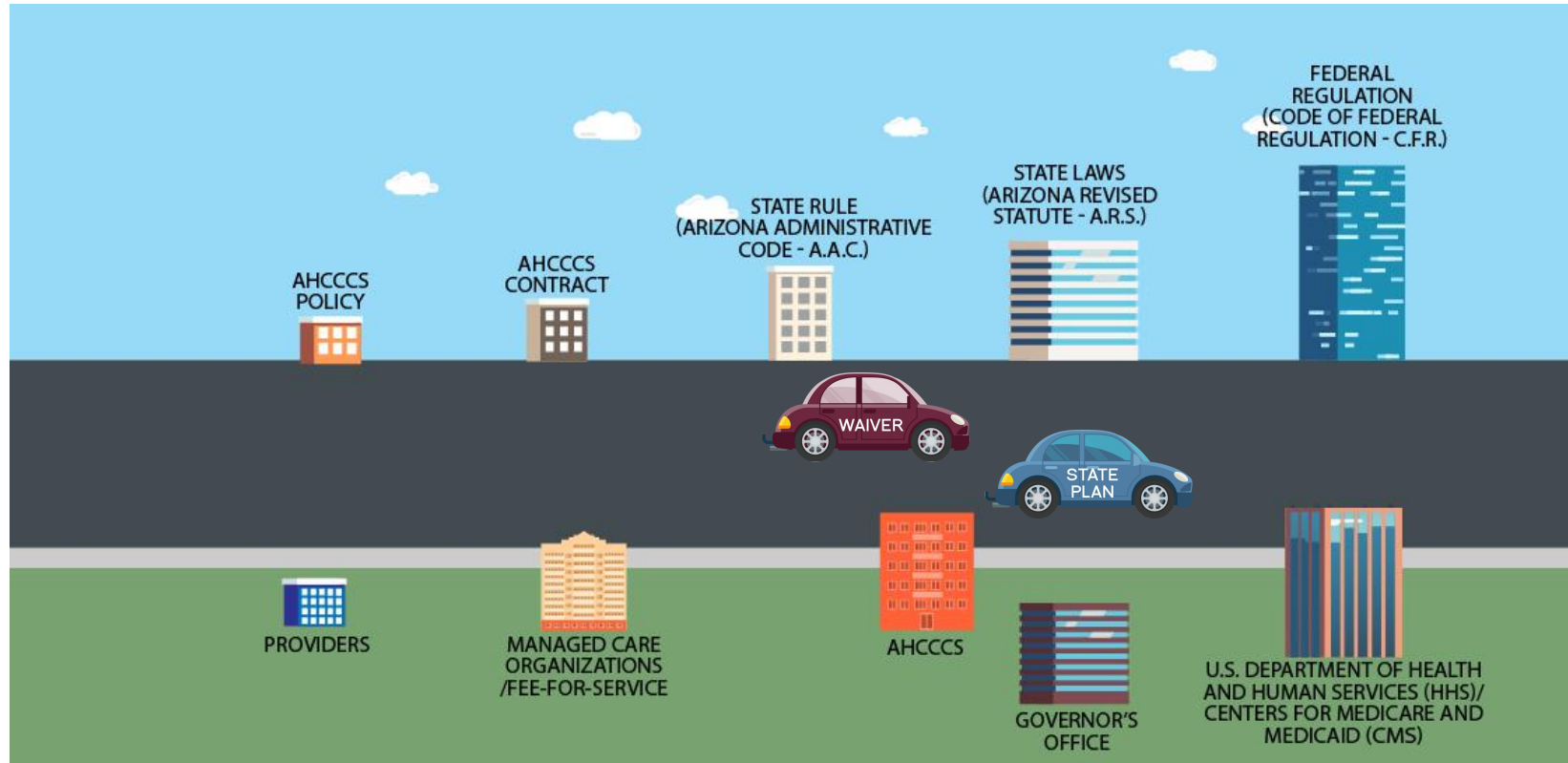
Current Health Plan Enrollment/Assignments	Proposed Division of Developmental Disabilities Options for American Indians/Alaska Natives	
Health Plan (United or Mercy Care)= PH +BH (CRS/SMI), DDD= LTSS	Member choice will remain	Approx. 1,780 members
Health Plan (United or Mercy Care)= PH (CRS), TRBHA= BH (SMI), DDD= LTSS	Member choice will remain	Approx. 212 members
DDD-AIHP= PH (CRS) TRBHA= BH (SMI) DDD= LTSS	Member choice will remain *AHCCCS DFSM would become responsible for PH claims/care management, no sooner than 10/1/21 (including SMI) *DDD = LTSS	Approx. 313 members
DDD-AIHP= PH +BH (CRS/SMI), DDD= LTSS	Member choice will remain *AHCCCS DFSM would become responsible for PH and BH claims/care management, no sooner than 10/1/21 (including SMI) *DDD = LTSS	Approx. 209 members



1115 Waiver & State Plan “Vehicles”



Making Health Care Change



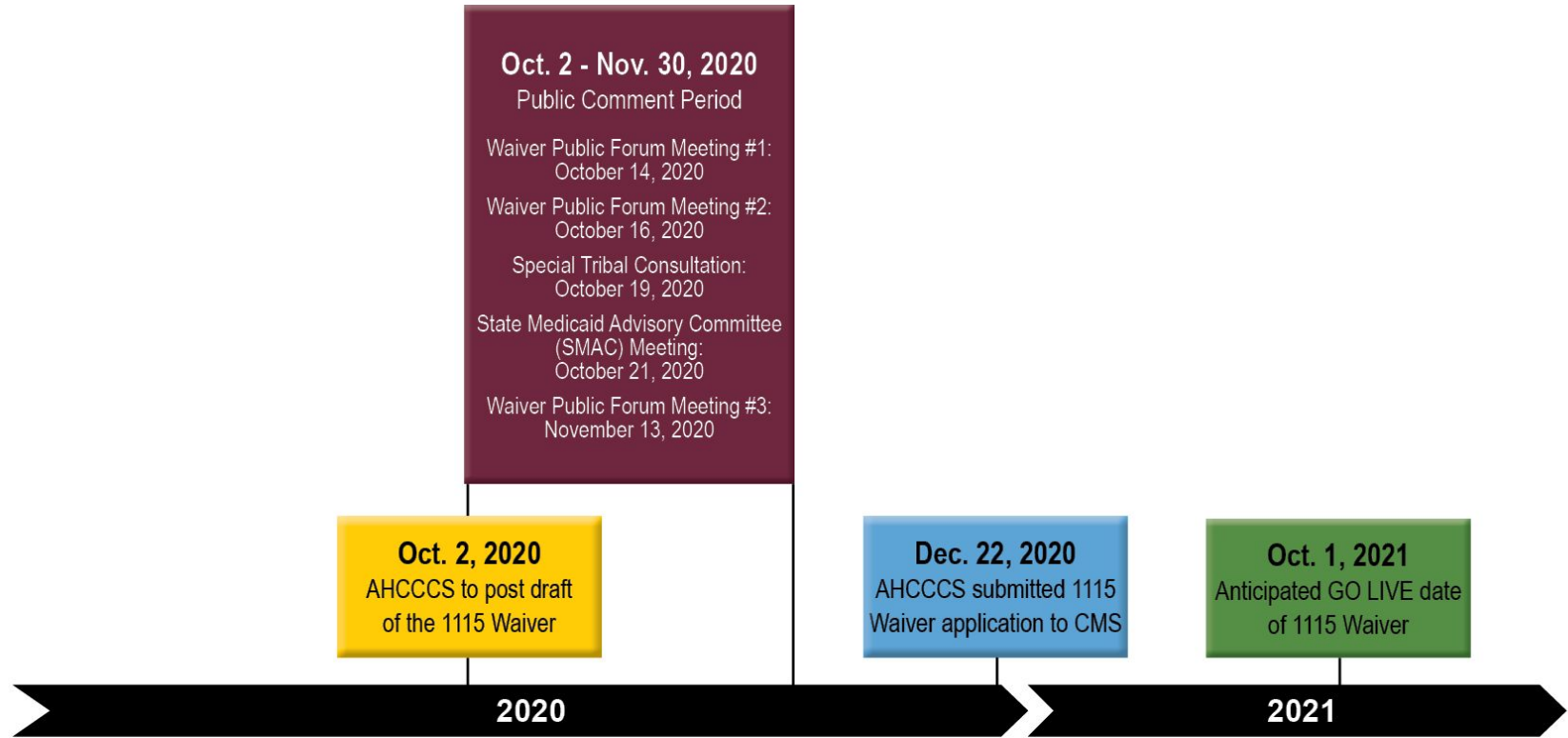
1115 Waiver & State Plan Overview

- States have flexibility in designing the their Medicaid program, and they can change aspects of their program at any time
- However, states must apply for and receive approval from the Centers for Medicare and Medicaid Services (CMS) before making changes to the program
- Two ways a state can go about changing their program:
 - A State Plan Amendment (SPA)
 - A Waiver

State Plan vs. 1115 Waiver

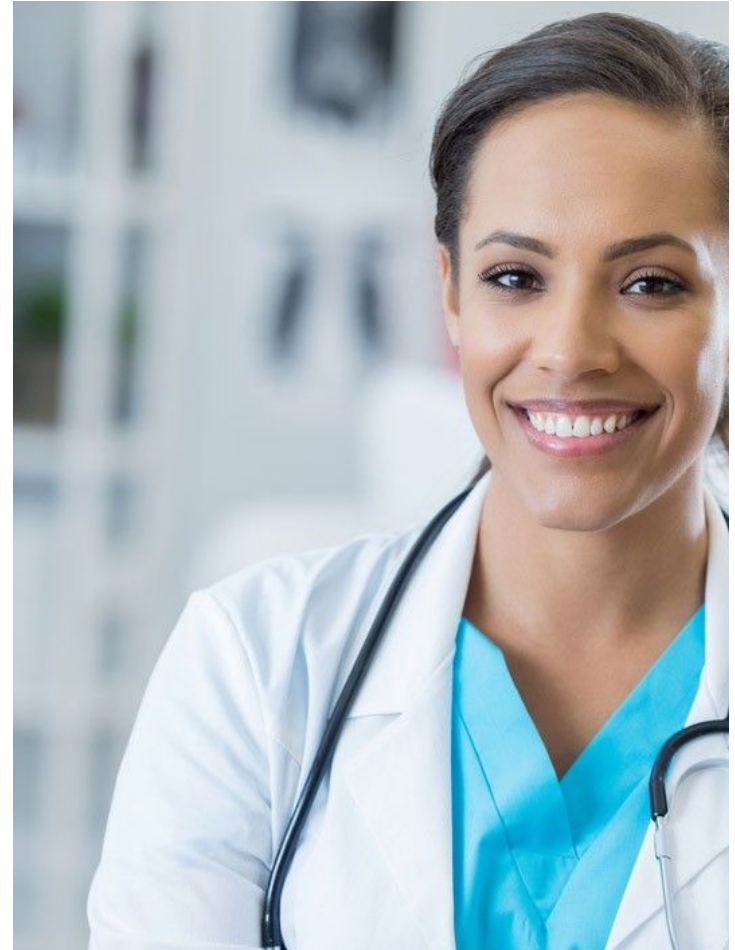
	State Plan Amendment	1115 Waiver
Submission to CMS	Proposed changes to Medicaid State Plan. Changes must comply with federal Medicaid requirements.	Formal request to have certain federal Medicaid requirements waived
What States Can Request	Can address any aspect of Medicaid program administration--e.g. eligibility, benefits, services, provider payments, etc.	Seek changes that cannot be implemented through state plan amendments.
Budget Requirements	No cost or budget requirements	Budget neutral for the federal government
Approval Process	90 day clock that can be suspended if CMS request information from state.	Approval process includes robust public notice process and extensive negotiations with CMS.
Duration of Approval	Permanent	Time limited. Must be renewed every 5-years.

Arizona's 1115 Waiver Renewal



1115 Demonstration Waiver Renewal

- **Initiatives to Be Continued**
 - Managed care
 - Home and community based services
 - Targeted Investments Program
 - AHCCCS Works
 - Waiver of prior quarter coverage for certain populations



1115 Demonstration Waiver Renewal



- **New Initiatives**

- Verbal consent in lieu of written signature for up to 30 days for care and treatment documentation for ALTCS members
- Reimbursement for traditional healing services (renewed request)
- Reimbursement for adult dental services eligible for 100% federal financial participation provided by IHS and Tribal 638 facilities
 - Exceeding the \$1,000 emergency dental limit for adult members and the \$1,000 dental limit for individuals age 21 or older enrolled in the ALTCS program

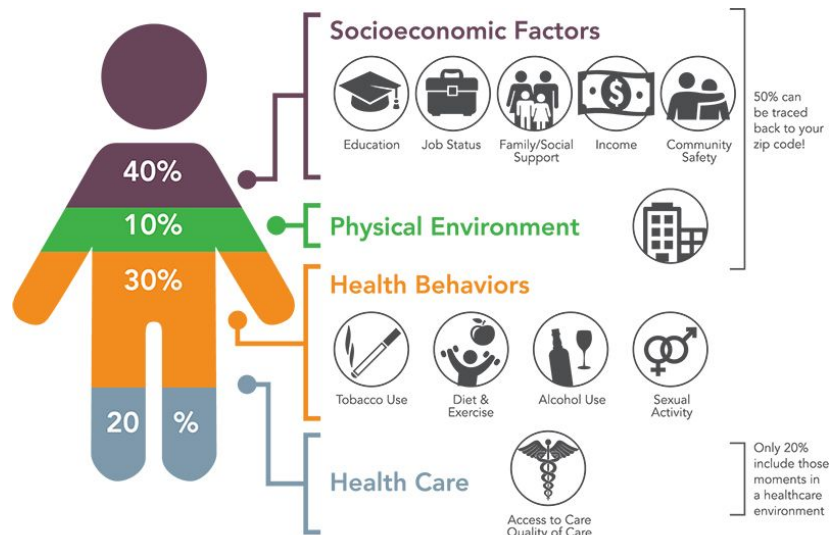
1115 Demonstration Waiver Renewal

- The federal public comment period is open through Feb. 3, 2021.
- AHCCCS will meet with CMS through 2021 to finalize the 2021-2026 1115 Waiver.

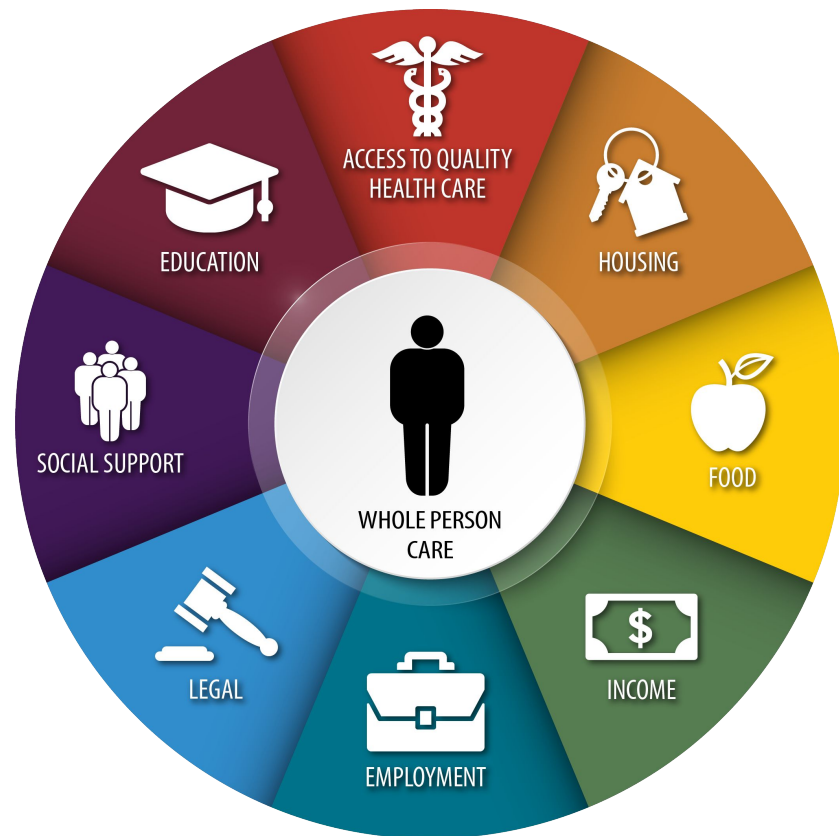


AHCCCS

Whole Person Care Initiative



Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)



AHCCCS Whole Person Care Initiative (WPCI)

- Launched in November 2019
- Next step after integrated care
- Building off of existing programming and services to further address social risk factors of health including:
 - housing, employment, criminal justice, transportation, and social isolation
- Includes a collaborative partnership with Arizona's Health Information Exchange (HIE), Health Current, for technology that will facilitate screening for social risk factors and referral to community resources

WPCI Feedback

- What should AHCCCS consider as we think through the Whole Person Care Initiative?

AHCCCS Whole Person Care Initiative (WPCI)

[Update Me on Whole Person Care](#)

There is growing national attention on the impact social factors can have on a person's health and well-being. It is believed that a person's socio-economic status, behaviors, and physical environment contribute more to health outcomes than access to health care. AHCCCS understands these complex issues and has historically worked to provide housing, employment, criminal justice, non-emergency transportation as well as home and community-based services interventions to our members, which facilitates the appropriate utilization of Medicaid services, while also utilizing a broad range of funding sources for services that are not available under the Arizona Medicaid program.

AHCCCS announces the Whole Person Care Initiative to augment our options to address social risk factors. We welcome our community's continued partnership as we strive to improve the health of Arizonans. Additional programmatic details will be released over the next several months. If you would like to sign up for email notifications when new information please click the link above.

News

Resources

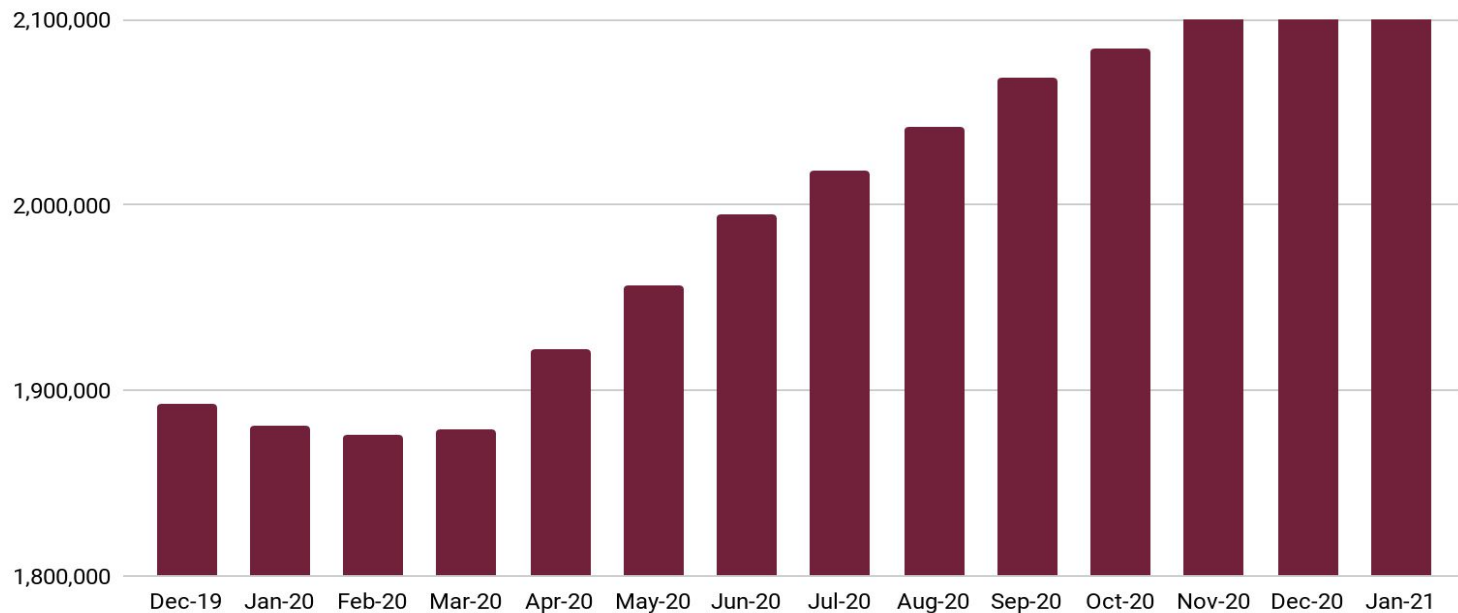
Send Feedback to AHCCCS on the Whole Person Care Initiative



Arizona AHCCCS COVID-19 RESPONSE

COVID-19 Response Effort

AHCCCS Enrollment: December 2019 - January 2021



Where do I find the latest information about COVID-19?

- AHCCCS updates the FAQ document daily to reflect the latest guidance for providers, members and plans.
- Please find guidance at: <https://azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.html>
- These are in English and Spanish.



COVID-19 Information

AHCCCS is responding to an outbreak of respiratory illness, called COVID-19, caused by a novel (new) coronavirus. Health officials urge good hand washing hygiene, covering coughs, and staying home if you are sick.

On March 11, Governor Doug Ducey issued a [Declaration of Emergency](#)  and an [Executive Order](#)  regarding the COVID-19 outbreak in Arizona, and subsequent [Executive Orders](#)  with further administrative actions.

On March 17, 2020, AHCCCS [submitted a request](#) to the Centers for Medicare and Medicaid Services (CMS) to waive certain Medicaid and KidsCare requirements in order to ensure ongoing access to care over the course of the COVID-19 outbreak. As of March 23, AHCCCS has received federal approval to implement programmatic changes to help ensure access to health care for vulnerable Arizonans.

To address Medicaid-related questions from providers and contractors about COVID-19, AHCCCS has developed a list of Frequently Asked Questions Regarding Coronavirus Disease 2019 (COVID-19), updated regularly as more information becomes available.

COVID-19 FAQs

Learn how to protect yourself and stop the spread of COVID-19. Visit azdhs.gov/COVID19  and cdc.gov/COVID19 .

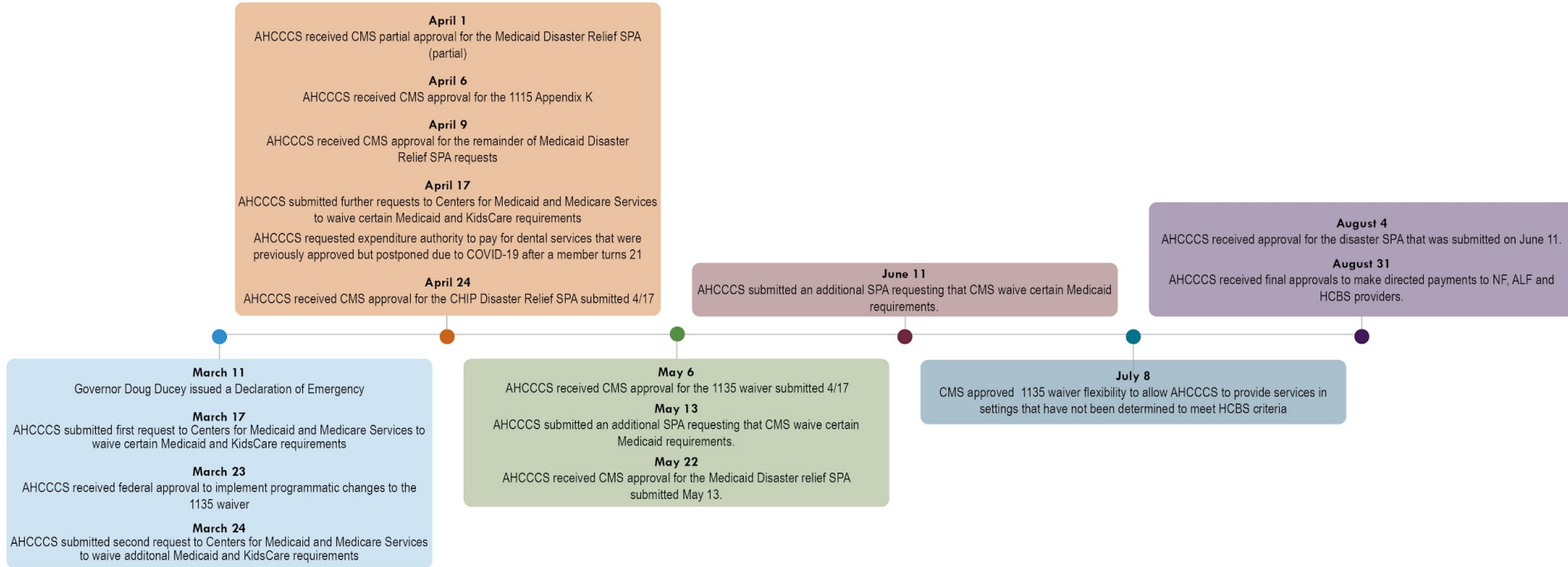
If you are an AHCCCS member who is experiencing flu-like symptoms, please call the 24-hour Nurse Line for your health plan (listed below):

24-Hour Nurse Line Numbers by Health Plan

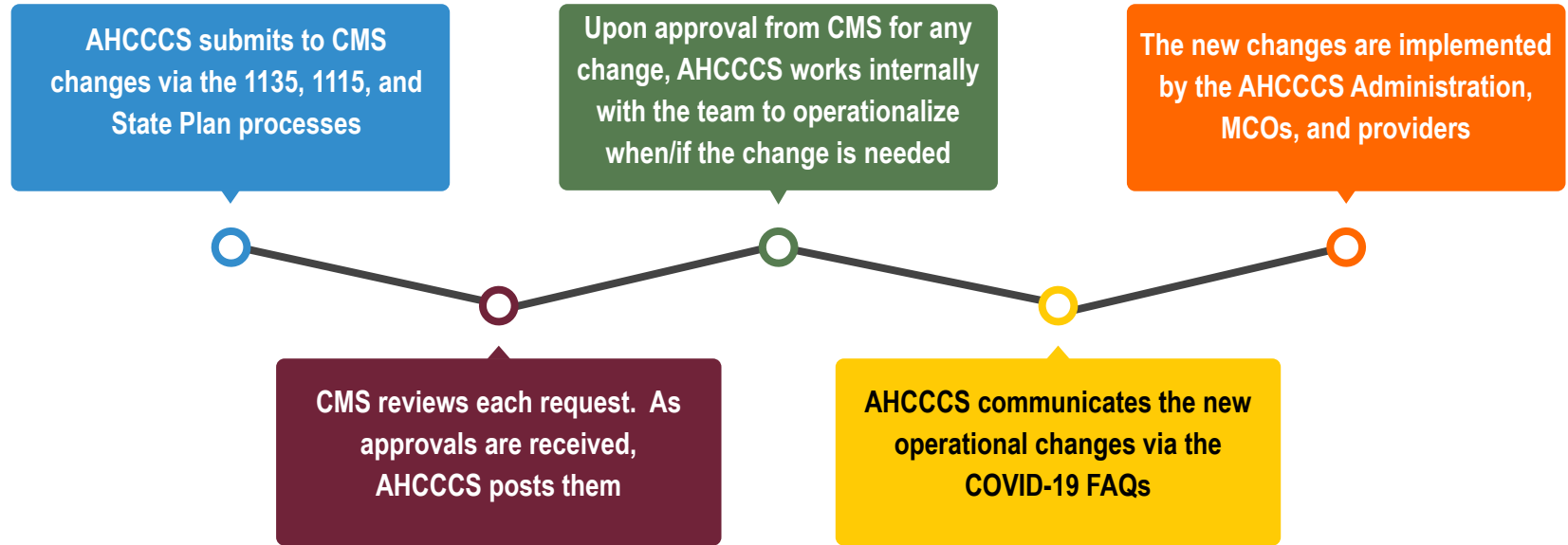
Health Plan

Nurse Line Number

COVID-19 Timeline - Obtaining Flexibilities



How does the state pursue flexibilities to address COVID-19?





ENHANCED BY Google



Advanced search

HOME

AHCCCS INFO

MEMBERS/APPLICANTS

PLANS/PROVIDERS

AMERICAN INDIANS

RESOURCES

FRAUD PREVENTION

CRISIS?

Home / Resources / Waiver / Pending Waivers / This Page

▼ Oversight of Health Plans

▲ Governmental Oversight

Federal and State Requirements

Legislative Sessions

Waiver



PCH SNCP Technical Amendment

COVID-19 Federal Emergency
Authorities Request

IMD Waiver Amendment

SB 1092 Legislative Directive
Waiver Proposal

American Indian Initiatives

Mental Health Parity

County Acute Care Contributions

Grants

Hospital Finance & Utilization
Information

Health Plan Report Card

COVID-19 Federal Emergency Authorities Request

On March 17 and March 24, 2020, the Arizona Health Care Cost Containment System (AHCCCS) submitted requests to the Administrator for the Centers for Medicare and Medicaid Services (CMS) to waive certain Medicaid and KidsCare requirements to enable the State to combat the continued spread of 2019 novel coronavirus (COVID-19). AHCCCS is seeking a broad range of emergency authorities to:

- Strengthen the provider workforce and remove barriers to care for AHCCCS members
- Enhance Medicaid services and supports for vulnerable members for the duration of the emergency period
- Remove cost sharing and other administrative requirements to support continued access to services

Arizona's request to CMS is posted below:

- Letter To CMS Administrator on COVID-19 Flexibilities (submitted March 17, 2020)
- Summary of Additional COVID-19 Flexibility Requests (submitted March 24, 2020)
- Summary of Additional COVID-19 Flexibility Requests (submitted April 17, 2020)

Status of AHCCCS Emergency Authority Requests (updated Aug. 6, 2020)

CMS approved components of Arizona's request under the 1135 Waiver, Appendix K and State Plan:

- CMS 1135 Waiver Approval Letter for COVID-19 Flexibilities (received March 23, 2020)
- CMS Medicaid Disaster Relief State Plan Amendment (SPA) Approval (received April 1, 2020)
- CMS 1115 Waiver Appendix K Approval Letter (received April 6, 2020)
- CMS 1115 Waiver Approved Appendix K Document (received April 6, 2020)
- CMS Medicaid Disaster Relief State Plan Amendment (SPA) Approval, #2 (received April 9, 2020)
- CMS CHIP Disaster Relief State Plan Amendment (SPA) Approval (received April 24, 2020)
- CMS 1135 Waiver Approval Letter for COVID-19 Flexibilities (received May 6, 2020)
- CMS Medicaid Disaster Relief State Plan Amendment (SPA) Amendment #3 (received May 22, 2020)
- CMS 1135 Waiver Approval Letter for COVID-19 Flexibilities (received July 9, 2020)

The allowances from CMS grant broad authority to Arizona to tailor changes to best serve its citizens. AHCCCS will make decisions about how and when these changes will be implemented.

AHCCCS will pursue the extension of some of the flexibilities granted (updated 7/21/2020) during the public health emergency.

Key Flexibilities Offered During the Public Health Emergency

- Streamline provider enrollment
- Amend prior and continued authorization processes
- Provide continuous eligibility
- Waive premiums and copays
- Coverage for COVID testing
- Electronic method for services (telehealth and telephonic)

**For a complete list see the [table](#) on the AHCCCS website



Arizona AHCCCS COVID-19 RESPONSE

Staying Connected with Stakeholders

- Arizona Council of Human Service Providers - every two weeks
- Tribal Consultation - every two weeks
- MCO meeting - weekly
- Smaller MCO Provider Viability Meeting - weekly
- State Medicaid Advisory Committee - monthly
- OIFA Advisory Council - monthly
- Telehealth Webinars - as needed
- Behavioral Health Taskforce - weekly
- Homeless Strategies - weekly
- MCO CMOs - weekly
- ADHS - Modelling Workgroup - weekly

2020 Year In Review - COVID-19 PHE Response

- Obtained permission to pursue more than **46 programmatic flexibilities** from the Centers for Medicare and Medicaid Services. Key flexibilities implemented include:
 - Expanding the program's telehealth benefit to allow for a broader range of services to be provided electronically.
 - Expediting the provider enrollment process.
 - Reimbursing parents for care offered to their minor children and allowing spouses offering paid care to be paid beyond the standard 40 hours per week limit.
 - Reimbursing for services offered by hospitals and clinics owned or operated by the Indian Health Service, tribes or tribal organizations with a 638 agreement in Alternate Care Sites (ACS) during the public health emergency.

2020 Year In Review - COVID-19 PHE Response

- Offered provider financial relief:
 - Made over **\$59 million in additional payments** to nursing facilities, assisted living facilities, home and community based service providers and critical access hospitals.
 - **Advanced or accelerated more than \$90 million in funding** to hospitals, primary care providers, behavioral health outpatient providers, and justice clinic providers who participate in the agency's Targeted Investments Program and hospitals participating in the graduate medical education program.



Grants Update

Emergency Grant to Address Mental and Substance Abuse Disorders During COVID-19



- Awarded \$2 million to support efforts throughout Arizona
- Working with RBHAs and TRBHAs to implement specific grant requirements in their network and/or service areas
- Areas of focus:
 - Recovery housing for those who cannot return home or to alternative care levels due to COVID-19 symptoms
 - Counseling and support groups for healthcare workers
 - Increased engagement for Substance Use needs
 - PPE for service providers within the grant scope

COVID-19 Emergency Response for Suicide Prevention Grant



For any questions, please reach out to albert.swanson@azahcccs.gov

- AHCCCS awarded \$800,000
- Funding period: 7/31/2020-11/30/2021
- To be implemented in Pima County
- Project pairs suicide prevention services with domestic violence services, including emergency housing. AHCCCS is working with Arizona Complete Health, Community Bridges, CODAC, and EMERGE Domestic Violence Center on this grant.
- AHCCCS added a full time project director, Albert Swanson, for this work who joined suicide prevention team in the Office of the Director.
- Other recipients in Arizona include: EMPACT and the Pasqua Yaqui Tribe.

Crisis Counseling Program (CCP) & Immediate Services Program (ISP)

- The mission of the FEMA-SAMHSA CCP/ISP Grant is to assist individuals and communities in recovering from the challenging effects of natural and human-caused disasters through the provision of community-based outreach and psychoeducational service
- Short term disaster relief services offered both (telephonic and virtual services)
 - Individual Counseling
 - Group Counseling
 - Brief Educational Supportive Contacts
 - Public Education Meetings and Public Service Announcements
 - Assessment, Referral and Resource Linkage
 - Community Networking and Support
- AHCCCS Partnered with the Crisis Response Network to serve as the Contractor to implement/oversee the program. CRN partnered with multiple agencies to provide services: Crisis Preparation and Recovery, EMPACT, Family Involvement Center, The Guidance Center, La Frontera and RI International
- AHCCCS was awarded the Grant on 6.3.2020; CRN created Resilient Arizona Crisis Counseling Program and the program was launched on 6.22.2020
 - [Resilientarizona.org](https://resilientarizona.org) and call 2-1-1 to talk to a crisis counselor

CCP & RSP (Regular Services Program)

- The mission of the FEMA-SAMHSA CCP RSP is to continue the implementation and services launched in the ISP CCP Grant
- The RSP Application was submitted on June 29, 2020
- The funding will provide for 9 more months of funding from the Award date-ISP funding is through July 29th, 2020
- Receiving the RSP Grant award will allow the continuation of crisis counseling services, the continuation of the 2-1-1 line and public services announcements and education

RESILIENT *Arizona*

CRISIS COUNSELING PROGRAM

Free crisis counseling available

COVID-RELATED STRESS?

Call 2-1-1



For questions reach out to Jill Rowland -
jill.rowland@azahcccs.gov



Call 2-1-1 to connect with an Arizona Crisis Counseling Provider.



RESILIENT *Arizona*
CRISIS COUNSELING PROGRAM

HOME

ABOUT

PROVIDERS

COVID-19

ESPAÑOL

MEDIA

PATH Grant



Project for Assistance in Transition from Homelessness

- Awards have been made and are broken out by county coverage
 - Catholic Charities: Coconino, Mohave and Yavapai County
 - Community Bridges Inc.: Maricopa County
 - La Frontera: Pima County
 - Good Neighbor Alliance: Cochise County

Opioid Grant - SOR

Funding Period: 9/30/20 - 9/29/22 (2 years)

Amount: \$31,606,462 per year

Status: Award Granted

Area Served: All Regions

Population of Focus: individuals with active opioid use; individuals with Opioid Use Disorder (OUD); individuals at risk for opioid overdose; individuals with stimulant use disorder; individuals in recovery; and youth, parents, community members and health consumers unaware of the potential risks of opioid/stimulant misuse and abuse



State Pilot Grant Program for Treatment for Pregnant and Postpartum Women (PPW)

Funding Period: 8/31/2020-8/30/2023

Amount: \$900,000 per year

Status: Award Granted

Area Served: Pima/Pinal Counties

Population of Focus: pregnant and postpartum women (PPW) with Opioid Use Disorder (OUD), their substance exposed newborns and their family members in Pima County and Pinal County to facilitate the availability of family-based and recovery support services





Abuse and Neglect Task Force Updates

Abuse and Neglect Task Force Update

- Convened by the Governor's Executive Order to ensure the health and safety of Arizona's most vulnerable citizens.
- Met monthly from March- September 2019.
- [Abuse and Neglect Prevention Task Force Report](#) - approximately 30 recommendations
- Posted **Minimum Subcontract Provisions** in August, effective 10/1/20 for AHCCCS Providers:
 - ADULT PROTECTIVE SERVICES (APS) REGISTRY CHECK
 - ABUSE, NEGLECT, AND EXPLOITATION PREVENTION
 - CORPORATE GOVERNANCE FOR PROVIDERS
- AHCCCS and our contractors will continue to develop and enforce policies and processes to implement, oversee and monitor the operation of these provisions.



Looking back at 2020

2020 - Year in Review

- Successfully transitioned more than **60 percent of AHCCCS employees to a virtual work environment**, allowing the agency to consolidate two main campus buildings into one.
- Supported the work of the Governor's Abuse and Neglect Prevention Task Force through the Oct. 1, 2020 implementation of **minimum subcontract provisions** aimed at preventing abuse, neglect, and exploitation.
- Launched the **AHCCCS Provider Enrollment Portal (APEP)**, allowing providers to enroll with AHCCCS electronically any time of day.
- Implemented an **Electronic Visit Verification system** to verify member receipt of critical in-home services.
- Improved the **timely processing of Medicaid applications** to 94 percent for non-ALTCS applications and to 91 percent for ALTCS applications.

2020 - Year in Review

- **Increased influenza vaccine rates by 10 percent** to incentivize provider administration of the vaccine and partnered with health plans to offer managed care members a \$10 gift card for receiving a flu shot.
- Added **more than 3,000 members to American Indian Medical Homes**, improving care coordination for members served in IHS and 638 facilities.
- Created a **Health Equity Committee** to examine and understand health disparities that exist within the program and to develop strategies to ensure health equity for all AHCCCS members.
- Partnered with policy makers and hospitals to develop a new assessment, **increasing payments to eligible hospitals by \$800 million annually**.
- Increased rates by an estimated **\$380 million for dental providers and practitioners**.
- Secured more than **\$37 million in grant funding** to address the opioid epidemic, expand the state's suicide prevention work, and meet emergent needs related to the COVID-19 pandemic.

On the Horizon

- Roll out of Electronic Visit Verification
- Implementation of closed-loop referral system
- Release of RFP and award of competitive contract expansion contracts
- Implementation of integrated care product for children in the foster care system on 4/1/21
- Renewal of 1115 waiver on or before 10/1/21



Resources

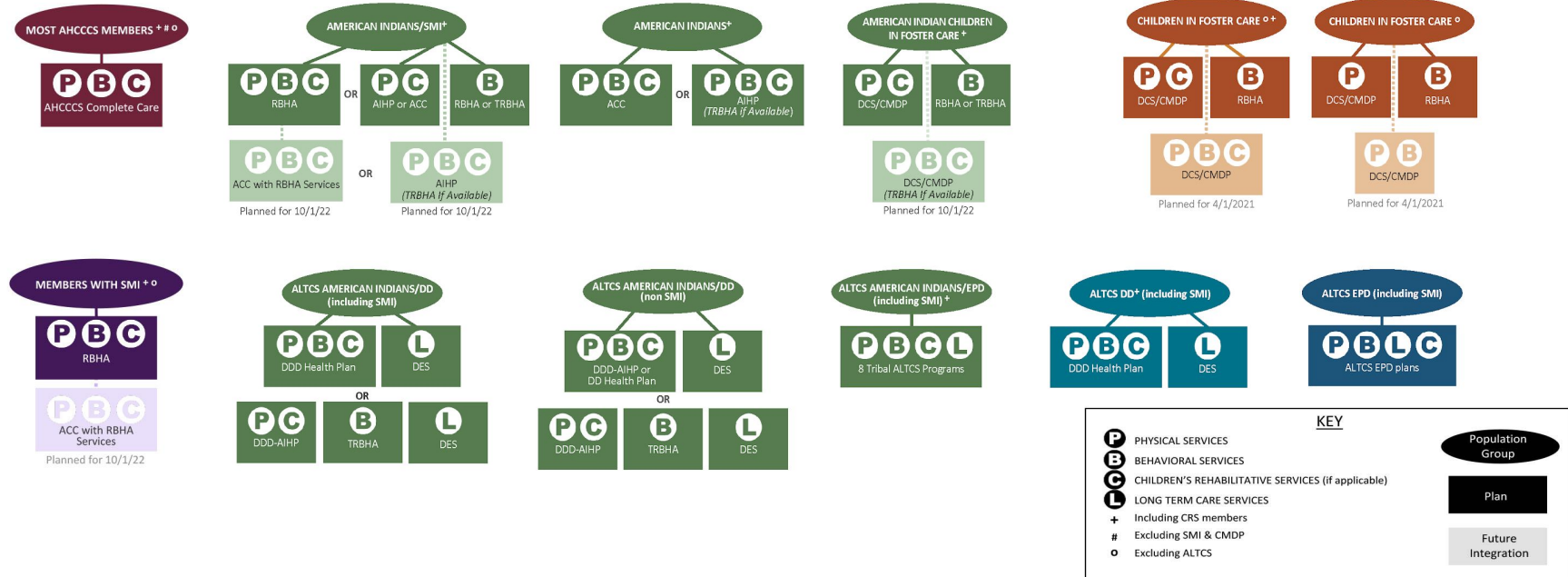
AHCCCS COVID-19

- AHCCCS COVID-19 Information:
<https://azahcccs.gov/AHCCCS/AboutUs/covid19.html>
- AHCCCS FAQs Regarding COVID-19:
<https://azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.html>
- AHCCCS Federal Authorities Request:
<https://www.azahcccs.gov/Resources/Federal/PendingWaivers/1135.html>
- Resilient Arizona: <https://resilientarizona.org/>

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](#)

AHCCCS Complete Care 2020-2022 Delivery System Integration



Thank You.



Please take the survey.

Surveys help us better
tailor meetings to
your needs.