State Medicaid Advisory Committee (SMAC)
Thursday, April 11, 2019
AHCCCS
GOLD ROOM 3rd Floor
701 E. Jefferson Street
1 p.m. – 3 p.m.

Agenda

I. Welcome
   Director Jami Snyder

II. Introductions of Members
   ALL

III. Approval of January 9, 2019 meeting summary
   ALL

Agency Updates

IV. AHCCCS Updates (1hr)
   Jami Snyder

V. Membership Needs Assessment (10min)
   Committee Members

VI. ALTCS Advisory Council Update (20min)
   Dara Johnson

VII. Call to the public (15min)
     Jami Snyder

VIII. Topic for Future Agenda Items (10min)
      ALL

IX. Adjourn at 3:00 p.m.
    ALL

*2019 SMAC Meetings*

Per SMAC Bylaws, meetings are to be held the 2nd Wednesday of January, April, July and October.
**Unfortunately due to scheduling conflicts the meeting dates have changed**
All meetings will be held from 1 p.m.- 3 p.m. unless otherwise announced at the AHCCCS Administration
701 E. Jefferson, Phoenix, AZ 85034, 3rd Floor in the Gold Room:

January 9, 2019
April 11, 2019
July 11, 2019
October 18, 2019

For more information or assistance, please contact Yisel Sanchez at (602) 364-4577 or yisel.sanchez@azahcccs.gov
# State Medicaid Advisory Committee (SMAC) Meeting Summary

**Wednesday, January 9 2019, AHCCCS, 701 E. Jefferson, Gold Room**  
1:00 p.m. – 3:00 p.m.

## Members in attendance:
- Jami Snyder  
- Tara McCollum Plese  
- David Voepel  
- Amanda Aguirre (phone)  
- Peggy Stemmler (phone)  
- Kim VanPelt  
- Marcus Johnson  

## Members Absent:
- Kathy Waite; Cara Christ; Kevin Earle; Steven Jennings; Vernice Sampson; Frank Scarpati; Daniel Haley

## Staff and public in attendance:
- Yisel Sanchez, HRC Coordinator, AHCCCS  
- Dana Hearn, AHCCCS  
- Becky Gonzalez, ViiV  
- Jeff Smith, HMA  
- Erica Mack, AHCHC  
- Clara Berg, ADHS  
- Shelia Sjolander, ADHS  
- Melissa Higgins, CLS  
- Eddie Sissons, NASW AZ

## AGENDA

### I. Welcome & Introductions  
  Jami Snyder

### II. Introductions of Members  
  All

### III. Approval of October 17, 2018 Meeting Summary/Minutes  
  Unanimous

## AGENCY UPDATES

### IV. SMAC Revised Bylaws  
  All
  - Member review, revisions incorporated into bylaw draft  
  - Committee discussion  
  - Leonard Kirschner makes motion to approve bylaws  
  - Gina Judy seconds motion; committee unanimous approval  
  - Final version will be sent by SMAC Liaison  
  - Committee request member needs assessment to be done by April meeting  
  - SMAC Liaison to send out correspondence for needs assessment  
  - Add needs assessment for new membership potential to next agenda for committee discussing

### V. AHCCCS Updates  
  Jami Snyder
  - AHCCCS Organizational Structure  
  - 2019 Strategic Plan
2019 Legislative Initiatives
Legislation
Other Legislation
On the Horizon
Medicaid Innovation Challenge

VI. SHA Presentation
   Shelia Sjolander
   - State Assessment Background
   - Assessment Framework
   - Arizona Health Improvement Plan 2016
   - 2017/2018 Update
   - Main Data Sources
   - AZ Population Growth
   - Outcomes Across the Lifespan
   - Leading Cause of Death
   - Maternal and Child Health
   - Healthy Adults
   - Tribal Health
   - Healthy Communities
   - Opportunities for Health
   - Healthy Aging

X. Call to the Public
   Jami Snyder

XI. Adjourn at 3:07 p.m.
   All
Committee Member Needs Assessment
<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
<th>Position</th>
<th>Areas of Expertise</th>
<th>Yrs of Service</th>
<th>REQUIRED COMMITTEE COMPOSITION</th>
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<tbody>
<tr>
<td>Kim Van Pelt</td>
<td>First Things First</td>
<td>Chief Regional Officer</td>
<td>Health Policy&lt;br&gt;Public Health&lt;br&gt;Social Determinants of Health&lt;br&gt;Early Childhood health&lt;br&gt;Education and Philanthropy</td>
<td>11 years as of 7/2018</td>
<td>AHCCCS Director&lt;br&gt;AHCCCS Director&lt;br&gt;ADHS Director&lt;br&gt;DES Director&lt;br&gt;8 Health Care Providers or Professionals with direct interest in AHCCCS Programs&lt;br&gt;9 Public Members, (Medicaid recipient, Consumer advocate, tribal community rep., educational community rep, etc.)</td>
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<tr>
<td>Greg Ensell</td>
<td>AZHHA</td>
<td>VP Government Relations</td>
<td>State Government Relations&lt;br&gt;Communications&lt;br&gt;Health Policy&lt;br&gt;State Budget&lt;br&gt;Federal Government Relations</td>
<td>13 years as of 2/2019</td>
<td>-</td>
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<tr>
<td>Leonard Kirschner</td>
<td>AZ Perinatal Trust</td>
<td>Board of Trustee</td>
<td>Obstetrical Care&lt;br&gt;High Risk Pregnancies&lt;br&gt;Medicare, Medicaid, Social Security&lt;br&gt;Critical Access Hospital&lt;br&gt;VA Hospital</td>
<td>8 years as of 4/2018</td>
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<tr>
<td>Peggy Stemmier</td>
<td>Frame Shift Group</td>
<td>Pediatrician and Consultant</td>
<td>Primary care pediatric practice&lt;br&gt;Practice-based quality improvement&lt;br&gt;Health care/Public health systems improvement&lt;br&gt;National Improvement Partnership Network Leadership team – so can bring perspective on how work in the above areas is functioning in other states. Strategic learning</td>
<td>7 years as of 4/2018</td>
<td>-</td>
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<tr>
<td>Amada Aguirre</td>
<td>Regional Center for Border Health</td>
<td>President CEO</td>
<td>35 plus years working in rural and medically underserved communities addressing barriers to access to care. Experience in public health and health promotion (working with high risk populations in the prevention of chronic disease) Healthcare administrator for 20 years managing rural health clinics. Experienced in implementation of fully integrated primary care and behavioral health services. Last year implemented a transitional living program in response to the President’s and Governor’s call on AZ’s opioid crisis. Legislative affairs and healthcare policy experience. Served 4 years in the AZ State House and 4 Years the State Senate.</td>
<td>7 years as of 4/2018</td>
<td>-</td>
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<tr>
<td>Name</td>
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<td>Position</td>
<td>Areas of Expertise</td>
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<tr>
<td>Cont'd Amanda Aguirre</td>
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<td>Experience in community college administration, in 2005 established a post-secondary institute, the RCBH College of Health Careers (Vocational Technical School) accredited nationally by the Bureau of Health Education Schools, AZ Board of Post-Secondary and the US Department of Education Title IV. The sole mission of the College of Health Careers is to increase the pipeline of health professionals in rural communities and promote job creation, placement and retention throughout Western Arizona and to increase job training and skill development among populations living in disadvantage and underserved communities including Indian Reservations. Other partner organizations include PEPP, Arizona@Work, JTED, Arizona Department of Veterans and other organizations such as, AWC and Mohave Community College, U of A, NAU and ASU.</td>
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<tr>
<td>David Vopel</td>
<td>AZHCA</td>
<td>CEO</td>
<td>Aging demographics Long term care public policy Partnership with managed care organizations Political fundraising Association management</td>
<td>11 months</td>
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<tr>
<td>Daniel Haley</td>
<td>Hope Inc.</td>
<td>CEO</td>
<td>A person living with mental and substance abuse disorder Case Management Arizona Homeless Criminal Justice System boundary spanner Specialty Court knowledge</td>
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AHCCCS Update
AHCCCS Update

State Medicaid Advisory Committee
April 11, 2019
Organizational Structure

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

Arizona Governor
Douglas A. Ducey

DIRECTOR
Jami Snyder

DEPUTY DIRECTOR
Business Operations
Kristen Challacombe

Business & Finance
Jeff Tagen
Member Services
Joni Shipman
Information Services
Dan Lippert
Project Manager
Renee Crenshaw

DEPUTY DIRECTOR
Health Plan Operations
Shellie Silver

Health Care Management
Finance, Rate Development and Data
Vacant
Healthcare Management
Clinical & Operations
Virginia Runnels
Fee for Service Management
Markay Adams
Chief Legislative Liaison
Kyle Sawyer
Project Manager
George Jacobson

CHIEF MEDICAL OFFICER
Dr. Sara Salek

Administrative Legal Services
Matthew Devlin
Community Advocacy and Intergovernmental Relations
Dana Heam
Human Resources & Development
Sky Mills
Continuous Improvement
Gloria Diaz
Project Managers
Michal Rudnick
Lene Mayer

Office of Inspector General
Sharon Ormsby

Reaching across Arizona to provide comprehensive quality health care for those in need
Maricopa County SMI Integration Evaluation
Arizona’s Medicaid Integration Goals

- Reduce Fragmentation of Care
- Effectively Manage Utilization
- Improve Access to Care
- Improve Member Experience & Health Outcomes

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

- Special Terms and Conditions (STCs) of Arizona’s 1115 Waiver required an independent evaluation of the SMI integration effort
- AHCCCS contracted with Mercer to conduct the independent evaluation
- Final Evaluation Report was submitted to CMS in November 2018
Methodology: Performance Measures

The difference between pre- and post-integration outcomes were evaluated using a variety of performance measures related to

- Primary care & preventive service utilization
- Emergency room utilization
- Inpatient hospital utilization & readmissions
- Member experience with care
Methodology: SMI Evaluation

Timeframe

Pre-Integration Baseline
October 1, 2012 – March 31, 2014

Post-Integration
Period 1
April 1, 2014 – March 31, 2015

Post-Integration
Period 2
April 1, 2015 – March 31, 2016

Post-integration
Period 3
April 1, 2016 – March 31, 2017

Reaching across Arizona to provide comprehensive quality health care for those in need
SMI Integration Evaluation Findings

All measures of ambulatory care, preventive care, and chronic disease management demonstrated improvement

- Adult access to preventive/ambulatory health services: **2%**
- Comprehensive Diabetes Care - HbA1c: **4%**
- Medication management for people with Asthma (75% compliance): **35%**
SMI Integration Evaluation Findings

All indicators of patient experience improved, with 5 of the 11 measures exhibiting double digit increases

- Rating of Health Plan: **16%**
- Rating of All Health Care: **12%**
- Rating of Personal Doctor: **10%**
- Shared Decision Making: **61%**
- Coordination of Care: **14%**

Reaching across Arizona to provide comprehensive quality health care for those in need
SMI Integration Evaluation Findings

Of the 8 hospital-related measures:

- 5 measures showed improvement
  - Emergency Department Utilization rate **declined by 10%**
  - Readmission rate **declined by 13%**
  - 30-day post hospitalization for mental illness follow up rate **increased by 10%**
  - Admissions for short term complications for diabetes **decreased by 6%**
  - Admissions for COPD/Asthma **decreased by 25%**
SMI Integration Evaluation Findings

Of the 8 hospital-related measures:
  - 3 measures showed a performance decline
    - Inpatient utilization rate increased by over 100%
    - Rate of admissions for asthma in younger adults increased by 12%
    - Congestive heart failure admission rate increased by 14%
AHCCCS Works & Retroactive Coverage

Reaching across Arizona to provide comprehensive quality health care for those in need
National Landscape: Community Engagement Waivers
National Landscape: Community Engagement Waivers
AHCCCS Works Requirements

- No sooner than **January 1, 2020**, able-bodied adults* 19-49 who do not qualify for an exemption must, for at least 80 hours per month:
  - Be employed (including self-employment);
  - Actively seek employment;
  - Attend school (less than full time);
  - Participate in other employment readiness activities, i.e., job skills training, life skills training & health education; or
  - Engage in Community Service.

* Adults = SSA Group VIII expansion population, a.k.a, Adult group
Who is Exempt

- Members of federally recognized tribes
- Former Arizona foster youth up to age 26
- Members determined to have a serious mental illness (SMI)
- Members with a disability recognized under federal law and individuals receiving long term disability benefits
- Individuals who are homeless
- Individuals who receive assistance through SNAP, Cash Assistance or Unemployment Insurance or who participate in another AHCCCS-approved work program
- Pregnant women up to the 60th day post-pregnancy
- Members who are medically frail
- Caregivers who are responsible for the care of an individual with a disability
- Members who are in active treatment for a substance use disorder
- Members who have an acute medical condition
- Survivors of domestic violence
- Full-time high school, college, or trade school students
- Designated caretakers of a child under age 18
A Year in the Life of a New AHCCCS Works Member

In this example, January represents the first month any new AHCCCS member is required to comply with the requirements.

JANUARY
AHCCCS sends an AHCCCS Works orientation packet. Her 3-month grace period begins February 1.

FEBRUARY
Jane learns about the AHCCCS Works requirements and explores opportunities to engage in her community. In April, she receives a reminder notice that she must participate in at least 80 hours of community engagement activities per month beginning in May.

MARCH

APRIL

JUNE
By June 10, Jane reports the 80 hours of community engagement activities she completed in May. She also completes 80 hours of community engagement activities in June.

✓ May participation
✓ June reporting
✓ June participation

AUGUST
Because Jane failed to comply in July, AHCCCS sends her a notice on August 11 that her AHCCCS coverage will be suspended for two months beginning September 1.

✓ July reporting
✗ July participation

JULY
Jane reports her June hours by July 10, but does not complete 80 hours of community engagement activities in July. If Jane has good cause for not complying in July, she can tell AHCCCS anytime next month.

OCTOBER
Jane’s coverage is suspended for two months. In October, AHCCCS reminds Jane that her enrollment in AHCCCS will be automatically reinstated on November 1.

NOVEMBER
Jane’s AHCCCS coverage is automatically reinstated as of November 1. She completes 80 hours of community engagement activities in November, and must report them by December 10.

✓ November participation
✓ November reporting

DECEMBER
By December 10, Jane reports November’s hours and completes 80 hours of community engagement activities in December.

✓ November reporting
✓ December participation

✓ December participation
Next Steps: AHCCCS Works

- **February 18, 2019**
  Waiver Acceptance Letter and Technical Corrections

- **July 17, 2019**
  Waiver Evaluation Design Plan

- **June 17, 2019**
  Implementation Plan

- **August 16, 2019**
  Monitoring Protocol

- **No sooner than January 1, 2020**
  AHCCCS Works program begins

Reaching across Arizona to provide comprehensive quality health care for those in need
Waiver of Retroactive Coverage

• CMS has approved Arizona’s waiver request to limits retroactive coverage to the month application for all AHCCCS members except for children under the age of 19 and women who are pregnant (including post-partum) once they become eligible.

• The waiver of Prior Quarter Coverage is effective July 1, 2019.
Leveraging Medicaid to Address Social Determinants of Health
Current AHCCCS Requirements

- Criminal Justice In-Reach
- Employment
- Housing
- Community Re-Investment
- Provider opportunities
  - Use of Z Codes
  - Targeted Investments
Criminal Justice Reach-In

• In October 2016, AHCCCS began requiring MCOs to “reach-in” to provide care coordination to individuals exiting incarceration.

• Since its inception, more than 5,000 high health risk individuals have been contacted pre-release to coordinate care & see a doctor within 7 days of their release.
Employment

- Staffing
  - Designated employment/vocational administrator
  - Dedicated employment staff
  - Dedicated employment staff at the subcontractor level
- Training competencies
- 7% mandated increase in referrals to RSA/VR (RBHA)
- Increase in mutually contracted AHCCCS/RSA providers
- Utilization tracking of employment support services
- Documentation of member demographics re: employment status and daily activities (DUG/DUGless)
- Subcontractor employment-related trainings
AHCCCS funds approximately $30 million in housing subsidies per year.

AHCCCS provides $2 million in acquisition/rehab dollars per year.

All funds are non-federal/state dollars.

Housing programs are administered through partnership with RBHAs and TRBHAs.

If AHCCCS were a public housing authority, it would be the 3rd largest program in the state.
Social Determinate Diagnosis Codes

• Encouraging providers to routinely screen for and document the presence of social determinants (guidance disseminated to providers on 4/1/18)
• Pulling data to determine the level of adoption and use, by diagnosis, to assess the success of the strategy and identify any additional outreach needed
• Identifying a resource to assist providers with adoption and appropriate use of SDOH codes
• More information, including a list of SDOH Z-codes, can be found at https://www.azahcccs.gov/PlansProviders/Downloads/Demographics/UseOfSocialDeterminantsOfHealthCodesForMemberOutcomes.pdf
Targeted Investments Program

• Incentive payments for SDOH screening and appropriate intervention & referral - Primary Care & Behavioral Health providers

• Incentive payments for establishing relationships with community-based resources - Primary Care & Behavioral Health providers

• Incentive payments for identifying SDOHs that impact the member’s ability to transition from the hospital, including documentation in the EHR - Hospitals
**Targeted Investments: Justice Clinic Sites**

- 13 integrated health sites:
  - Co-located with probation/parole
  - Forensic Peer and Family supports on site
  - Medication Assisted Treatment on site
  - Housing placement offered on site
  - Connection to community resources on site
  - Meeting members where they are
1. 1773 W St. Mary’s Rd., Suite 102, Tucson, AZ 85745
2. 410 S. Maiden Ln., Yuma, AZ 85364
3. 801 S. 16th St. Phoenix, AZ 85034
4. 460 N. Mesa Drive #211, Mesa, AZ 85210
5. 3864 N. 27th Ave., Phoenix, AZ 85017
6. 2445 W. Indianola Ave., Phoenix, AZ 85015
7. 2215 Hualapai Mountain Rd., Suite H & I, Kingman, AZ 86401
8. 452 W. Finnie Flat Rd., Camp Verde, AZ 86322
9. 651 W. Mingus Ave., Cottonwood, AZ 86326
10. 1111 S. Stapley Dr., Mesa, AZ
11. 6153 W. Olive Ave., Glendale, AZ 85302
12. 1923 N. Trekell Rd., Casa Grande, AZ 85122
13. 950 E. Van Buren St., Avondale, AZ 85323
Access to Services

AHCCCS Strategic Plan includes a measure to:

- Increase access to a Medicaid service from 43% to 50% for members within 90 days of their release from incarceration

Percentage of people between 9/1/17-12/31/17 who were released from incarceration and received at least 1 AHCCCS service.

48% STRATEGIC GOAL 50%

20.9% were emergency department visits
Legislative Update

• Budget will dominate the rest of session
• Key legislation
  o SB 1336- SMI Housing Trust Fund Flexibility
  o SB 1244 – DCW Assisted Living Caregiver Reciprocity
  o SB 1134/ HB 2513 – CHIP Appropriation
  o SB 1211- Intermediate Care Facility Licensure
  o SB 1246- CMDP Integration
Questions

Reaching across Arizona to provide comprehensive quality health care for those in need
ALTCS Presentation
ALTCS Advisory Council est. 2014

• Lessons learned from the development and implementation of Agency with Choice
• Stakeholder engagement in program monitoring and oversight
• Identification and development of new priorities and innovations
• Stakeholder communication
## Membership Representation

<table>
<thead>
<tr>
<th>Members and Family Members</th>
<th>Contractors</th>
<th>Government Partners</th>
<th>Providers</th>
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<tbody>
<tr>
<td>7 Members</td>
<td>Banner</td>
<td>DES/Division of Aging and Adult Services</td>
<td>Arcadia Home Care</td>
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<td>5 Family Members</td>
<td>DDD</td>
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<td>AZ Autism United</td>
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<td>SEAGO – Area Agency on Aging</td>
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Member Roles and Responsibilities

- Participate in quarterly meetings (2 hours) either in person or via phone
- Provide input based upon your personal experience, expertise and perspective
  - Service delivery innovations
  - System changes (design, policy, forms, etc.)
  - System monitoring and oversight
  - Communication with stakeholders
- Identifying ways the Council can engage in program monitoring and oversight
- Identifying opportunities to improve the ALTCS program
- Identify future agenda items
Council Member Support

- New Member Orientation
  - History of the ALTCS Program and Managed Care
  - Program guiding principles
  - Overview of current major initiatives
  - Overview of Olmstead
  - Member roles and responsibilities

- Materials sent prior to meeting for review
- Pre-Meeting to discuss meeting agenda and materials
- Opportunities to participate in person and via webinar
Past and Future Meeting Topics

- Past Topics
  - EPD Contract 10/01/17
  - Provider Accessibility and Selection
  - AHCCCS Quality Strategy
  - New Community Intervener Service
  - Quality of Care Concerns
  - Peer Supports – LTC
  - Integrated Health Care

- Current Topics
  - HCBS Rules
  - Electronic Visit Verification
  - Person Centered Planning
  - Telehealth/Telemedicine
  - Special Assistance for Members Determined SMI
Reaching across Arizona to provide comprehensive quality health care for those in need