State Medicaid Advisory Committee (SMAC)

Wednesday October 9, 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 July 11, 2019 meeting summary | ALL |

Agency Updates

| IV. New Member Approvals | Committee Members |
| V. Community Reinvestment panel | James Stover
Joe Gaudino
Shawn Nau |
| VI. Valle Del Sol (BH in schools) | Carmen Heredia |
| VII. AHCCCS Updates | Jami Snyder |
| VIII. Call to the public | Public |
| IX. Adjourn at 3:00 p.m. | ALL |

*2020 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 8, 2020
April 8, 2020
July 8, 2020
October 21, 2020

For more information or assistance, please contact Fredreaka Graham at (602) 417-4496 fredreaka.graham@azahcccs.gov
July 11, 2019 Summary
State Medicaid Advisory Committee (SMAC) Meeting Summary
Wednesday, July 11, 2019, AHCCCS, 701 E. Jefferson, Gold Room
1:00 p.m. – 3:00 p.m.

Members in attendance:
Jami Snyder
Tara McCollum Plesse
Kevin Earle
David Voepel
Amanda Aguirre –via phone

Peggy Stemmler
Kim VanPelt
Marcus Johnson- via phone
Leonard Kirschner
Steven Jennings
Vernice Sampson
Gina Judy
Joyce Millard Hoie- via phone

Members Absent: Kathy Waite; Cara Christ; Frank Scarpati; Daniel Haley
Greg Ensell; Phil Pangrazio

Staff and public in attendance:
Yisel Sanchez, SMAC Liaison AHCCCS
Dana Hearn, AHCCCS
Megan Woods- AHCCCS
Stephanie Innes- Arizona Republic
Micaela Mercado-ASU
Victoria Iwinski- Chicanos Por La Causa
Bob Chuinard- Optum
Barb Fanning- SLBHC
Chris Vineyard- Care 1st

Becky Gonzales- Viiv Healthcare
Marc Arnold- Liva Nova
Shannon Groppenbacher- JNJ
Jennifer Carosetta- HSAA
Melissa Higgens- Community Legal Service
Rachel Reinhardt- AHCCCS Member
Brandi Lease- GSPA
Kristen Jaden- ViiV
Matt Jewett- Mountain Park
Siman Q.- CAA

AGENDA

I. Welcome & Introductions Jami Snyder

II. Introductions of Members All

III. Approval of April 11, 2019 Meeting Summary/Minutes Unanimous

AGENCY UPDATES

IV. SMAC Membership Needs Assessment All
   - Discussion on needs assessment completed by committee
   - Review SMAC Committee composition
   - Peggy asked to be identified as public member under composition
   - Committee asks for status on Frank Scarpati since retired
   - Jami to reach out to DES regarding new Directors participation on committee
   - Kim Van Pelt will send in recommendation on predecessor
   - Peggy suggests someone with content knowledge on kids
   - Committee would like to revisit mission
   - Committee suggest members with housing and payee knowledge
   - Committee sub group to review nominations
   - Sub group- Leonard Kirschner, Peggy Stemmler, David Voepel
   - Sub group will review nominations and present to the committee
   - Vacancies to be filled in October 2019
V. Arizona Dental Association

The State of Arizona’s Oral Health

- Comprehensive preventative and restorative services for children under the age of 21
- ALTCS- Coverage dropped in 2006, restored in 2016, $1000.00 annual coverage limit, sedation and anesthesia included under the cap
- Adult emergency benefit eliminated in 2010
  - Treat and release visit increased by 29% from 2009-2011
  - Costs increased by 69%
  - Patient admissions increased by 37%
  - Costs increased by 40%
  - Many patients
  - RX for pain and infections
- Adult emergency dental benefit effective 10.17
  - Limited to patients with a dental emergency
  - No preventative services
  - Emergency diagnostic exam and x-ray
  - Resin restorations due to recent tooth fracture
  - Prefab crowns
  - RCT and cast crowns
  - Extractions
  - Annual limit of $1000
- 2015 Oral Health status- Children K-3rd
- Dental Care use among children in 2006-2016
- Dental Care use across the United States
- Prevalence of ECC by race
- IHS data
- Indian Health Service date April 2019
- Policy
  - Establish oral health surveillance plan
  - Use data to educate
  - Increase fluoridation
  - Advocate for more coverage
- Care
  - Adequate diverse and culturally competent workforce
  - Incorporate oral health into overall health and well being
  - Inter-professional education
- Community
  - Maintain statewide network of leaders and champions
  - Support evidence based prevention and early detection
  - Consistent and Uniform Messaging
- Financing
  - Financing oral health as a component of overall health
  - Fund additional coverage and expand prevention programs
- Adult Coverage: Dental profession responds
  - Supported by America’s Dentist care foundation
  - Arizona’s Mission of Mercy (8 years)
  - Veteran’s Standown
  - AZMOM North
Range of Services
- 24 cleaning chairs
- 38 restorative chairs
- 24 extraction chairs
- 4 root canal chairs
- Same day crowns
- PEDO
- Flippers
- Dentures

AZMOM 2018
- By income 72% of patients are under $36,000 in family income
- Volunteers
  - 278 dentist
  - 429 dental assistants
  - 192 hygienists
  - 14 x-ray techs
  - 45 lab techs
  - 5 pharmacists
  - 14 registered nurses
  - 5 nurse practitioners
  - 3 physician assistants
  - 2 medical doctors
  - 308 students
  - 24 translators
  - 491 general volunteers

Patients and Value of Care 2018
- $1,929,803.23 in free dental care
- 1810 patients treated
- $162,000 in free medical screening services
- $259,629 in free vision screenings and glasses

Takeaways
- Charity is not a system of care
- $1000 cap
- $200,000 annual cost
- Volunteer burn out

NEXT EVENT- December 6-7 2020, Veterans Coliseum, State Fair Grounds

VI. ASD Advisory Committee Clinical Initiative Update Megan Woods
- History
  - 30 stakeholders appointed in April 2015
  - Five work groups created
    - Early Identification and Diagnosis
    - Evidence-based treatment
    - Reducing system complexity
    - Increasing network capacity
    - Adults with Autism Spectrum Disorder
  - Recommendation report delivered in February 2016
- Committee meets quarterly
  - Meeting include updates, presentations, discussions on system changes, policies and emerging issues
  - Additional work groups
Coordination of Benefits
ASD and Crisis Response
Evidence Based Treatment

- AHCCCS finalizing policy specific to Applied Behavior Analysis
  - Public comment end of July 2019

Questions
- Demographics?
- Report available online?

VII. AHCCCS Updates

Jami Snyder

- AHCCCS Strategic Plan
  - Pursue and implement long term strategies
    - Percent of health plan spend in alternative payment models
    - Percent of Medicaid enrolled students receiving BH service on campus
    - Number of enrollees housed through the healthcare and housing program
  - Reduce fragmentation
    - Retention rate amongst TI participants
    - Number of provider organizations participating in HEI
    - Percentage in prerelease inmates
    - Percentage of CMDP enrollees
  - Pursue continuous quality improvement
    - Number of performance measures, among 5 measures
    - Number of facilities achieving medical home status
    - Percent of opioids prescribed

- Maintain core organizational capacity, infrastructure and workforce planning
  - Employee engagement
  - Number of Staff that complete mental health awareness training

- Integration Update
  - AHCCCS Timeline
  - DES/DDD Integration 10/1/2019
    - DDD awarded 2 statewide subcontracts
    - Integrated plans go into effect 10/1/2019
    - United Healthcare Community Plan and Mercy Care Plan
    - Members have choice
    - Stakeholder communication
    - Ensuring smooth transition

- AHCCCS Works and Retroactive Coverage Update
  - AHCCCS Works requirements
    - No sooner than 1/1/2020
    - Able-bodied adults 19-40 that don’t qualify for an exemption
    - Must for at least 80 hours a month
      - Be employed
      - Actively seeking employment
      - Attend school
      - Participate in employment readiness activities
      - Engage in community service
Who is exempt?
AHCCCS Works geographic phase in recommendations
AHCCCS Works next steps
Waiver of retroactive coverage
Review of 2019 Legislative session
AHCCCS supported bills
  - SB1336
  - SB1244
  - SB1134/HB2513
  - SB1211
  - SB1246
Other bills and budget
Recent upcoming developments
Rideshare/equine transport
Telehealth
Differential adjusted payments CYE20

VIII. Call to the Public

Jami Snyder
- RFP on Hospital assessment and FMAP drop for expansion population?
  Working closely with Hospital association - no hospital in system would be a loser. There are individual hospitals but the system as a whole is still not losing.
- Do you reach out to the public for recommendations or suggestions? Dana to get more information from the member.
- Define exempted populations - To the degree possible we are using data we have and walk through policy considerations
- Exemption list - clients are on but still the majority want employment resources? AHCCCS will continue to provide employment services and education around options for employment and supportive services and community availability
- Clarification on AHCCCS Works - How is this being delivered? Policy group working through the details.
- Will the implementation/evaluation plan be available once they’re approved? Will be posted once approved.

IX. Agenda Items - Not discussed

X. Adjourn at 3:18 p.m. All
New Member Approvals
Community Reinvestment Panel
Valle Del Sol
VALLE DEL SOL'S
INTEGRATED
SCHOOL BASED SERVICES

CAITLIN GIZLER, M.A.S., LMFT, BHP
DIRECTOR OF INTEGRATED SCHOOL BASED SERVICES
Valle del Sol inspires positive change by investing in human services to strengthen families with tools and skills for self-sufficiency and by building the next generation of leaders.
VDS INTEGRATED SCHOOL BASED SERVICES

- Value & Commitment to Creating Trust and Systemic Change
- 3 Levels of Partnership Available to Each School
- Access to All of Valle's Integrated Healthcare Services
- Hands-On Experience with Classroom Management
- Professional Development & Direct Support on Campus

VDS INTEGRATED SCHOOL BASED SERVICES

Hands-On Experience with Classroom Management

Value & Commitment to Creating Trust and Systemic Change

3 Levels of Partnership Available to Each School

Access to All of Valle's Integrated Healthcare Services

Professional Development & Direct Support on Campus
VDS ON CAMPUS SUPPORT

“Parents are not as intimidated by mental health services out of their child’s school and comfortable receiving services or intakes at the school.”

– Fabiola Marquez, School Psychologist,
  Clarendon Elementary School

• Navigating Healthcare & Resources
• Trust and Relationship Building with Staff and Families
• Clinical Screenings & Assessments
• Clinical Observations in the Classroom
• 1:1 Coaching for Students
• Parenting Support Workshops
• Individual and Family Therapy
• Therapy Groups and Skills Groups
• CFT’s Connecting Families and Teachers Back Together
• De-Escalation Support for Students and Staff
• Professional Development for Teachers
• Intensive Groups During School Breaks
• Warm Hand Offs to Office Based Providers
• Higher Show Rates for Medical & BH Appts
CO-CREATING SYSTEMIC CHANGE ON CAMPUS

Supporting Teachers & Families with accessible workshops and professional development
CONQUERING BARRIERS AND CELEBRATING SUCCESSES

In the school, staff can quickly identify families that need extra support and then with a swift response from Valle Del Sol, we are able to address concerns from an academic and social emotional standpoint effectively – Fabiola Marquez, School Psychologist, Clarendon Elementary School

- Navigating space & schedules
- Supporting children with a variety of insurance coverage, (or lack thereof)
- Engaging families who may not be as present
- Providing support in crisis events
- Establishing consistent communication
THANK YOU!

Any Questions Regarding Valle's School Based Services:
Contact Caitlin Gizler, MAS, LMFT
Director of Integrated School Based Services
CaitlinG@valledelsol.com
602-258-6797
AHCCCS Update
AHCCCS Strategic Plan

Reducing fragmentation driving towards an integrated sustainable healthcare system

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

Reduce fragmentation driving towards an integrated sustainable healthcare system

Pursue continuous quality improvement

Maintain core organizational capacity, infrastructure and workforce planning that effectively serves AHCCCS operations

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

Reaching across Arizona to provide comprehensive quality health care for those in need
Integration at All Three Levels

AHCCCS COMPLETE CARE (ACC) DELIVERY SYSTEM

PROVIDERS

Health Plans
RBHAs
TRBHAa
(integrated physical and behavioral health)

AHCCCS
Arizona Health Care Cost Containment System

Reaching across Arizona to provide comprehensive quality health care for those in need
Agency/Policy Initiatives

- Continuum of Care workgroup
- Addition of Chief Clinical Officer for Behavioral Health
- COE/COT, Crisis, Credentialing workgroups
- Transition of covered BH Services Guide to AMPM
- Behavioral health fee schedule updates
Payer Initiatives
Key Integration Milestones

1989
- ALTCMS /EPD 29,200

2013
- CRS 17,000

2014
- SMI Maricopa 18,000

2015
- SMI Greater AZ 17,000

2016
- AIHP/TRBHA 80,000
- GMH/SA Duals 80,000

2018
- GMH/SA Adults & Non CMDP Children
  Approximately 1.5 million

Reaching across Arizona to provide comprehensive quality health care for those in need
Payer Initiatives
Current Care Delivery System

AHCCCS

Fee for Service System
(AHCCCS Administered)
- American Indian Health Program
  (physical, behavioral, CRS)
- Federal Emergency Services (FES)
- Tribal ALTCS IGAs
  (case management only)
- TRBHA IGA
  - Colorado River
  - Gila River
  - Navajo Nation
  - Pascua Yaqui
  - White Mtn Apache Tribe

Regional Behavioral Health Authorities*
- Arizona Complete Health
  (Currently CIC)
- Mercy Care
  (Currently MMIC)
- Steward Health Choice Arizona
  (Currently HCIC)

AHCCCS Complete Care
(physical, behavioral health and CRS services)
- Arizona Complete Health
- Banner University Family Care
- Care1st
- Magellan Complete Care
- Mercy Care
- Steward Health Choice Arizona
- UnitedHealthcare Community Plan

Arizona Long Term Care System
ALTCS – E/PD and DD
(physical, behavioral health, long term care services)
- Banner University Family Care
- Mercy Care
- UnitedHealthcare Community Plan
- ADES/DDD
  (subcontract for acute services)

Dept. of Child Safety
(DCS)/CMDP

*Fully integrated health plans for acute and behavioral health services for members with serious mental illness (SMI) and carved out behavioral health services for foster care children and members enrolled with DES/DD.
Payer Initiatives
Integration Timeline

Reaching across Arizona to provide comprehensive quality health care for those in need.
Provider Initiatives
Targeted Investments Program

• Year 2 Incentive Payments made in May/June 2019: $66.5 million
• Most Challenging Milestone: SDOH community connections
• Year 3 (10/1/18 – 9/30/19)
  o Focused on implementation of systems and protocols established in Year 2
• Years 4 & 5 (10/1/19 – 9/30/21)
  o Incentive funding tied to performance on identified metrics
Provider Initiatives
Targeted Investments Program

- Pediatric PCP
  - Well-child visits in the first 15 months of life
  - Well child visits in third, fourth, fifth and sixth years of life
  - Adolescent well-care visits

- Pediatric BH
  - Pediatric follow-up after hosp. for mental illness ages 6-17 (7 - Day)
  - Pediatric follow-up after hosp. for mental illness ages 6-17 (30 - Day)
  - Metabolic monitoring for children and adolescents on antipsychotics

Reaching across Arizona to provide comprehensive quality health care for those in need
Provider Initiatives
Targeted Investments Program

• Adult PCP & BH
  o Follow up after hospitalization for Mental Illness: 18 and older (7 - Day)
  o Follow up after hospitalization for Mental Illness: 18 and older (30 - Day)
  o Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using antipsychotic medications
Provider Initiatives
Targeted Investments Program

• Justice
  o Initiation of Alcohol and Other Drug Abuse or Dependence Treatment (14 - Day)
  o Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (34 - Day)
  o Follow up after hospitalization for Mental Illness: 18 and older (7 - Day)
  o Follow up after hospitalization for Mental Illness: 18 and older (30 - Day)
  o Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using antipsychotic medications
Provider Initiatives
Targeted Investments Program

- Hospital
  - Follow up after hospitalization for Mental Illness: 18 and older (7 - Day)
  - Follow up after hospitalization for Mental Illness: 18 and older (30 - Day)
Recent Developments

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

• Implementation of integrated care model for individuals served by ADES/DDD
• SB 1535 – Outpatient Treatment Program engagement and oversight
• Healthcare and Housing (H2) project
• Continued effort to increase access to behavioral health services on school campuses
Recent Developments

• Formation of Division of Grants Management (centralizing grant administration within AHCCCS)
• Recruitment of new Medical Director and Chief Clinical Officer for Behavioral Health
• Research and planning in anticipation of 1115 waiver renewal (10/1/21)
Questions