

**Q: What is the American Indian Medical Home (AIMH)?**

A: The AHCCCS American Indian Medical Home Program (AIMH) supports Primary Care Case Management (PCCM), diabetes education, care coordination, and promotes participation in the state Health Information Exchange (HIE), for American Indian/Alaska Native (AI/AN) members enrolled in the Fee-For-Service (FFS) American Indian Health Program (AIHP). Beginning October 1, 2017, AHCCCS registered IHS/638 facilities who meet registration criteria to participate as an AIMH will become eligible for per member per month payments, based on the level of AIMH services the facility provides to empaneled members.

**Q: How do I implement a Medical Home Model for our IHS/638 Facility?**

A: Facilities may submit their AIMH applications to become a medical home on October 1, 2017. Stakeholder meetings will be scheduled beginning in July 2017 to discuss the application and implementation process of the American Indian Medical Home. The schedule of meetings can be found on the AIMH web page @ <https://www.azahcccs.gov/AmericanIndians/AmericanIndianMedicalHome/> Send any inquiries to [AIMH@azahcccs.gov](mailto:AIMH@azahcccs.gov)

**Q: What does PCCM mean?**

A: PCCM is Primary Care Case Management, which can provide case management services, diabetes education, care coordination, and participation in the state Health Information Exchange, for AHCCCS AI/AN members who are enrolled in AIHP. AIMH PCCMs will be charged with addressing health disparities between American Indians and other populations in Arizona, specifically by enhancing case management and care coordination.

**Q: What are the PCCM requirements?**

A: In order to qualify as an AIMH PCCM and be eligible to receive per member per month (PMPM) payments for empaneled members, providers must demonstrate annually that they have met the criteria described in the AIMH PCCM IGA.

An AIMH which qualifies for the first level of the AIMH program will have achieved either:

Patient Centered Medical Home recognition through NCQA, Accreditation Association for Ambulatory Health Care, The Joint Commission PCMH Accreditation Program, or other appropriate accreditation body; OR

Annual attestation from IHS IPC that the site has completed the following in the past year:

- a. Submitted the SNMHI Patient-Centered Medical Home Assessment (PCMH-A) to IHS IPC;
- b. Submitted monthly data on the IPC Core Measures to the IPC Data Portal; AND
- c. Submitted narrative summaries on IPCMH improvement projects to IHS IPC quarterly.

**Q: What are the American Indian Medical Home levels of service through the PCCM?**

- A: The AIMH PCCM will offer four levels of AIMH and corresponding PMPM payment based on the level of services offered. The levels of case management described in PCCM contract language are:
- 1) American Indian Medical Home: This first level of AIMH would provide primary care case management services as well as 24 hour telephonic access to the care team.
  - 2) American Indian Medical Home, with diabetes education: The second level of AIMH would provide all of the services described in the first level as well as diabetes education. This level will require an AIMH to have a diabetes education accreditation through a recognized accreditation agency. The state will not prescribe to AIMH entities what must be included in these educational programs.
  - 3) American Indian Medical Home, and participates in the state Health Information Exchange: The third level of AIMH includes all the services described in the first level as well as participation in the state Health Information Exchange.
  - 4) American Indian Medical Home, with diabetes education, and participates in the state Health Information Exchange: The fourth level of AIMH will provide all services described in the first three levels.

**Q:** Will there be a list of empaneled members?

**A:** Each facility will receive a monthly 820 file with their facility's roster.

**Q:** Can facilities create their own assignment forms?

**A:** The member assignment forms will be provided on the AIMH website.

**Q:** Is it possible for a member to be assigned to 2 medical homes at once?

**A:** No, the system will not allow 2 medical homes at the same time. The system will recognize the latest date that a member signed up at a facility.

**Q:** Does the 4.6% annual increase apply to all service levels?

**A:** Yes, the annual increase will apply to all service levels

**Q:** When will the website be completed?

**A:** Additional information including the application packet for providers will be available by August 1<sup>st</sup>, 2017. The list of facilities will be added as providers are approved.

**Q:** Do diabetic education services have to be provided a specific number of times to members to qualify for the additional diabetes PMPM?

**A:** No, the additional diabetes education PMPM is paid to the facility for having the service of diabetes education available to members.

**Q:** Are there particular qualifications or staffing levels required for CM services or the 24 hour call line?

**A:** AHCCCS will not prescribe how the AIMH will deliver a particular service, as long as the required services are being appropriately rendered. The AIMH should describe how their facility will meet the requirements with their application packet.

**Q:** Is there a PCCM model available for those facilities that do not have a PCCM?

**A:** Some facilities have utilized the IHS IPC model, which is available on the IHS website @ <https://www.ihs.gov/ipc/>

**Q:** How does a facility sign up to participate in the HIE?

**A:** Information on the state HIE program can be found on the HIE website @ <https://healthcurrent.org/enter/>

**Q:** Can a facility receive PCMH recognition from a national body OR an attestation from IHS IPC program in order to qualify?

**A:** Yes, one or the other would suffice. AHCCCS doesn't require both.