

Welcome to today's Tribal Consultation meeting!

While you are waiting TEST YOUR AUDIO. LISTEN FOR MUSIC.

You were automatically muted upon entry.

Please only join by phone or computer.



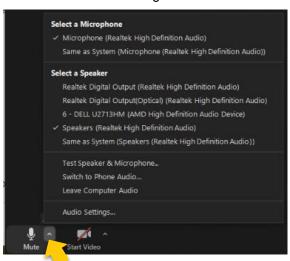
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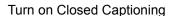


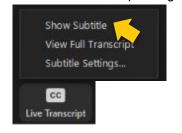
Zoom Webinar Controls

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Audio Settings







Raise Hand



Chat



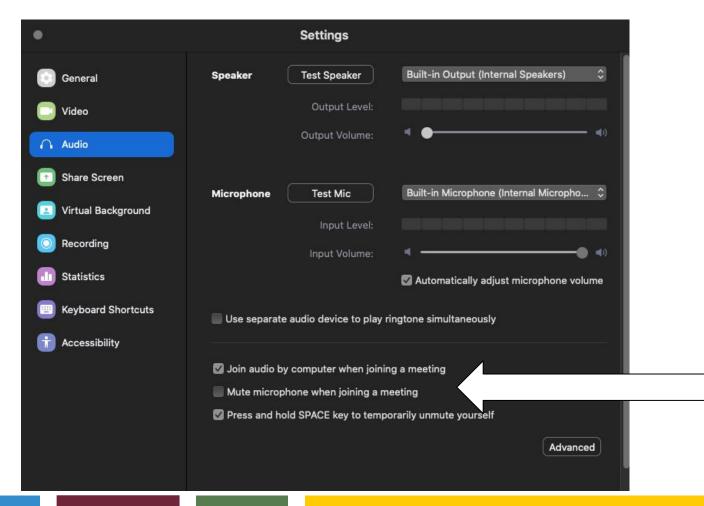
KEYBOARD SHORTCUTS TO RAISE HAND

Windows: Alt+Y to raise or lower your hand

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Audio Settings





Tips for successful ZOOM PARTICIPATION





















MUTE your mic when you're not speaking





PREPARE & queue docs or links that you plan to share

BACKGROUND
NOISE watch when
turning on mic





Stay FOCUSed by not texting or side conversations

Limit the
DISTRACTIONS
around you





Use GALLERY
VIEW to see all
participants

Look at the CAMERA not your screen





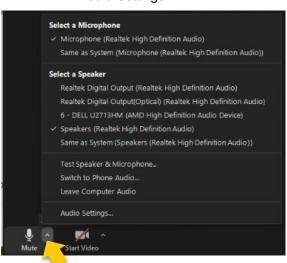
Use CHAT to ask questions or share resources



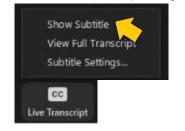
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Chat



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This Meeting Is Being Recorded

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Agenda

Opening Prayer & Welcome - Dr. John Molina

Opening Remarks & AHCCCS Director Updates - Carmen Heredia

OIG Updates - Vanessa Templeman

AACIHC Overview & Updates - Kim Russell

ADHS Overview & Updates - Gerilene Haskon & Cindy Graham

Scope of the Problem: The Tribal Perspective - Open Floor

DFSM Management Strategies - Markay Adams & Melina Solomon

American Indian Health Program Enrollment - Julie Swenson

OPEN DISCUSSION

Closing Remarks - Carmen Heredia

Next Steps, Announcements & Adjournment





Special Tribal Consultation Meeting

April 04, 2023



Opening Prayer & Welcome



Dr. John Molina
Health Service Director
NATIVE HEALTH



AHCCCS Director Updates



Carmen Heredia

AHCCCS Director



- Our Commitment
 - Our Approach
 - Collaboration



Open Discussion



Office of Inspector General Updates

Vanessa Templeman

AHCCCS Inspector General



Credible Allegation of Fraud

- Why are Credible Allegations of Fraud preliminary?
 - Reliable indicia of fraud
- If a company has multiple IDs, does a CAF apply to them all?
 - No, CAFs are provider Id specific
- How are providers notified?
 - Via certified mail
- Can a CAF be reversed?
 - Good Cause
 - Evidentiary Support
 - Criminal Matter



Credible Allegation of Fraud

Federal Fiscal Year	Number of Credible Allegation of Fraud Payment Suspensions instituted
FFY23 (10/1/22-current)	38
FFY22 (10/1/21-9/30/22)	19
FFY21	32
FFY20	11
FFY19	0
FFY18	0



Credible Allegation of Fraud

A Credible Allegation of Fraud is a <u>preliminary</u> action OIG is required to take to stop payments to providers who are suspected of <u>potentially</u> fraudulent activities.

- OIG will cc TRBHAs on all Credible Allegation of Fraud notices starting 4/4/2023
- OIG reviewing potential publication of providers who are under a CAF on AHCCCS website.

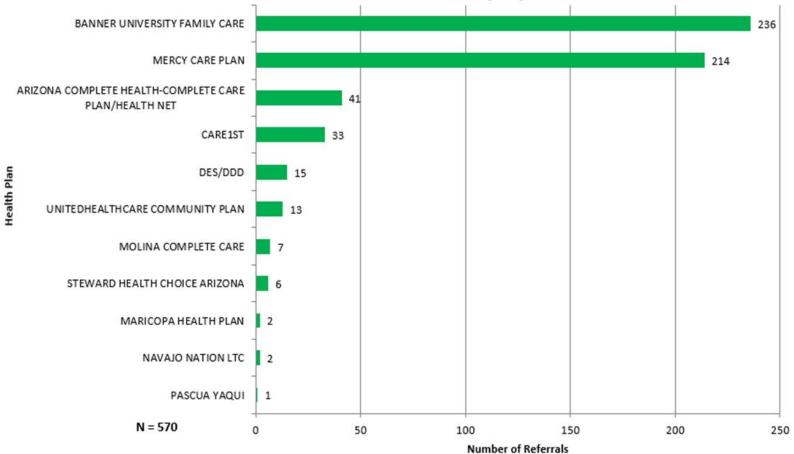


Referrals

- Is a member name needed in order to submit a referral?
 - No, OIG investigates matters related to members and providers. Cross over identification is not needed in order to refer any suspected fraud, waste and abuse.
- Can referrals be made anonymously?
 - Yes. OIG currently receives several anonymous referrals.
- Does OIG verify receipt of referrals and provide updates?
 - OIG will verify referral receipt
 - OIG does not provide case updates



SFY23 Health Plan Referrals as of 2/28/2023





Coordination and Information Sharing

- OIG Compliance Officers Networking Group (CONG)
 - Quarterly meetings designed to discuss a variety of compliance items, hear information from OIG directly, and various speakers who operate in the FWA arenas.
- NAMPI: National Association of Medicaid Program Integrity
 - o NAMPI encompasses all 50 states and territories
 - o Their primary task focuses on instances of fraud and abuse in the Medicaid Medical Assistance Program
 - o Conference is in Phoenix this year.



Other OIG Actions

- Terminating providers
 - In conjunction with ADHS information sharing
- Cease and Desist
 - Inappropriate advertising
 - Recruiting
- Site Visits should our case necessitate such actions



Ways to Report Suspected FWA

- Email: <u>AHCCCSFraud@azahcccs.gov</u>
- Online:
 https://www.azahcccs.gov/Fraud/ReportFraud/onlineform.a
- Phone: 602.417.4045 or 888-ITS-NOT-OK (888.487.6686)



Open Discussion



Arizona Advisory Council on Indian Health Care (AACIHC)



AACIHC Overview & Updates



Kim Russell *AACIHC Director*



AACIHC Overview

- ARIZONA ADVISORY
 COUNCIL ON INDIAN
 HEALTH CARE
- State agency created in 1990
- The mission of the AACIHC is to advocate for increasing access to high quality health care programs for all American Indians in Arizona.
- The AACIHC strives to be the premier resource for Tribes and Urban Indians in Arizona on American Indian health care.
- Governor appointed and state appointed members
- Provide legislative and administrative advocacy on Indian health policies



AZ MMIWG Study Committee

- Created in 2019 via HB 2570
- Purpose: to explore and analyze the gaps in data to begin addressing the horrific ongoing violence committed against Native women and girls in Arizona.





Study Committee Purpose

- The purpose of the Study Committee:
 - Conduct a comprehensive study to determine how this state can reduce and end violence against indigenous women and girls in this state.
 - Establish methods for tracking and collecting data on violence against indigenous women and girls, including data on missing and murdered indigenous women and girls.
 - Review policies and practices that impact violence against indigenous women and girls, such as child welfare policies and practices.



Study Committee Purpose (con't)

- Review prosecutorial trends and practices relating to crimes of gender violence against indigenous people.
- Gather data on violence against indigenous women and girls in this state.
- Determine the number of missing and murdered indigenous women and girls in this state.
- Identify barriers to providing more state resources in tracking violence against indigenous women and girls and reducing the incidences of violence.



Study Committee Purpose (con't)

- Propose measures to ensure access to culturally appropriate victim services for indigenous women and girls who have been victims of violence.
- Propose legislation to address issues identified by the study committee.
- Submit a report regarding the study committee's activities and recommendations for administrative or legislative action



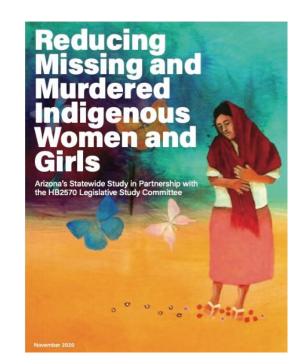
AZ MMIWG Study Committee

- Multiple Open Meetings were conducted on various tribal reservations throughout Arizona
 - 5 total meetings in 2019 & 2020
 - Gathered information from multiple presentations and testimony from tribal members
- Field study performed by LeCroy & Milligan Associates Inc. and Honwungsi Consulting Services, LLC
- Interviews were conducted with law enforcement representatives, survivors and family members of those who went missing



AZ MMIWG Study Committee (con't)

- The aim of the report is to tell a data-driven story about what is known so far about MMIWG in Arizona and offers best practices to reduce MMIWG.
- Collaboration with the ASU School of Criminology and Criminal Justice and Honwungsi Consulting Services, LLC
 - Report located here:
 https://academyforjustice.asu.edu/proje
 ct/reducing-missing-and-murdered-indig
 enous-women-and-girls/





AZ MMIP Study Committee

- Reconvened in 2022 with an expanded scope to include all MMIPersons including men, boys, Two-Spirit and LGBTQ.
- Open Meetings were conducted in 5 tribal communities





Key Areas

- 1. Legislative
- 2. Administrative
- 3. Arizona Victim Compensation Program
- 4. Victim Services
- 5. Data Improvement
- 6. Resource Allocation
- 7. Training and Education
- 8. Collaborative
- 9. Law Enforcement





Reports & Recommendations

- 1st report resulted in 78 recommendation
 - https://www.azleg.gov/iminute/house/54leg/2r/103020Study CommitteeMissingMurderedIndigenousWomenGirlsFinalRepo rt.pdf
- 2nd report resulted in 84 recommendations
 - https://www.azleg.gov/iminute/house/55leg/2r/121522House
 AhocMissingMurderedIndigenousPeoples.pdf



Arizona Policy

- Missing Children's Statute no longer a waiting period to report a child missing
- Increased Protective Orders from 1 year to 2 year
- Created a Tribal Area Health Education Center to focus on training more Sexual Assault Nurse Examiners
- Included reimbursement of Traditional funerals through the AZ Victim's Compensation Fund
- \$2M set aside for the Attorney General's Office
- Funding for Domestic Violence Programs



Arizona Policy

- Funding for Tribal Housing Programs
- Increase monthly stipend for kinship care
- Increased funding for school social workers, counselors, and psychologists
- Federal:
 - Worked with AZ Congressional Delegation to Reauthorize
 Violence Against Women's Act and find specific funding for MMIWG
 - Committee Members sat on the Not Invisible Act Commission



AZ MMIP Task Force





Task Force Duties

- Collaborate with state, federal and tribal agencies to address the recommendations of the Missing and Murdered Indigenous Peoples Study Committee, which aim to reduce and end violence against Indigenous People in Arizona;
- Consult with tribal governments on the scope and the nature of the issues associated with missing and murdered Indigenous People and gather data on the prevalence and contextual characteristics of violence against Indigenous People;



Task Force Duties (con't)

- Work with law enforcement and tribal governments to continue to track and collect data on violence against Indigenous People, including data on missing and murdered Indigenous People;
- Review policies and practices that impact violence against Indigenous People, such as child welfare policies and practices;
- Evaluate prosecutorial trends and practices relating to crimes of gender violence against Indigenous People;



Task Force Duties (con't)

- Recommend measures to ensure access to culturally appropriate victim services for Indigenous People who have been victims of violence;
- Gather information to understand the lived experiences among Indigenous People surrounding missing and murdered Indigenous People in an effort to ensure that policy recommendations are culturally accurate;



Task Force Duties (con't)

- Examine the practices of licensed and unlicensed public and private rehabilitation and sober living homes and propose recommendations;
- Work with the Attorney General's Office and relevant entities to formulate effective programs and identify sustainable funding sources.
- Task Order can be found here:
 - https://azgovernor.gov/sites/default/files/2023.03.07_eo_202
 3-08.pdf



AZ Legislative Update

SB 1663- residential treatment; sober living; transportation

- Summary: A Behavioral Health Residential Facility and Sober Living Home shall inquire both written and verbal consent to whether the client receiving services would like to be transported back to the client's residence after discharge. The client's consent must be documented on a form created by the Department of Health Services signed by the client and retained into the client's medical record.
- Status: Bill failed to advance



AZ Legislative Update (con't)

SB 1661- behavioral health treatment facilities; notification

- Summary: Requires a client's family or next of kin to be notified that the client has been admitted into a behavioral health residential facility and must be documented in the client's medical record that contact was made. The client must be sober or referred by an approved tribal healthcare program in order to be taken to a behavioral health residential facility. Penalties against the facilities for not complying are included.
- Status: Bill failed to advance



Thank you!

Kim.Russell@aacihc.az.gov 602-542-5725



Question & Answer



Arizona Department of Health Services (ADHS)



Arizona Department of Health Services Overview & Updates



Gerilene Haskon

ADHS Tribal Liaison



Cindy Graham

ADHS Deputy Bureau Chief



ADHS Licensing

April 4, 2023
Presenting To

Tribal Consultation | Phoenix, AZ

Gerilene Haskon| ADHS Tribal Liaison
Cindy Graham| ADHS Deputy Bureau Chief,
Bureau of Residential Facilities Licensing



ADHS Public Health Divisions

Preparedness	Prevention	Licensing
Preparing for Public Health Threats & Emergencies	Promoting Health through Programs & Policy	Protecting and Regulating Health & Child Care Services
 Emergency Preparedness EMS & Trauma System Epidemiology & Disease Control Public Health Statistics State Lab 	 Health Systems Development Women's & Children's Health Nutrition & Physical Activity Tobacco & Chronic Disease 	 Regulate Facilities & Individuals Register & Maintain Vital Records Regulate Radioactive Materials & Radiation Equipment

Licensing Protects Health & Safety Through:



Public Health Licensing

Centralized Services

- Bureau of Child Care Facilities Licensing
- Bureau of Marijuana Licensing
- Bureau of Radiation Control
- Bureau of Special Licensing
- Bureau of Vital Records

Health Care Institutions

- Bureau of Long Term Care Licensing
- Bureau of Medical Facilities
 Licensing
- Bureau of Residential Facilities
 Licensing

Sober Living Homes vs. Behavioral Health Residential Facilities

Sober Living Homes

(Bureau of Special Licensing)

- A.R.S. §36-2061(3) defines a sober living home as:
 - "...any premises, place or building that provides alcohol-free or drug-free housing and that:
 - a)Promotes independent living and life skills development.
 - b)May provide activities that are directed primarily toward recovery from substance use disorders.
 - c)Provides a supervised setting to a group of unrelated individuals who are recovering from substance use disorders.
 - d)Does not provide any medical or clinical services or medication administration on-site, except for verification of abstinence."

Behavioral Health Residential Facilities

(Bureau of Residential Facilities Licensing)

- A.A.C. R9-10-101(36) defines a behavioral health residential facility as:
 - "... a health care institution that provides treatment to an individual experiencing a behavioral health issue that:
 - Limits the individual's ability to be independent, or
 - Causes the individual to require treatment to maintain or enhance independence."

Sober Living Homes	Behavioral Health Residential Facilities
 No medical or clinical services provided Not covered by insurance, AHCCCS, Medicare/Medicaid, etc. Addresses are confidential 	 Health Care Institution Behavioral health services must be provided on-site, which may include treatment for a mental disorder, personality disorder, substance abuse, or a significant psychological or behavioral response to an identifiable stressor(s). Typically covered by insurance, AHCCCS, Medicare/Medicaid, etc. Addresses are not confidential

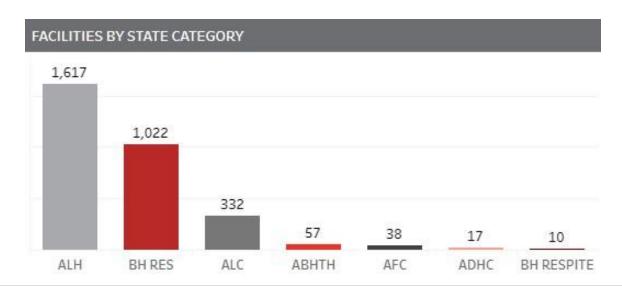
Who does not need a license

There are exemptions under A.R.S. § 36-402 which lists circumstances in which a health care institution license or sober living home license is not required

The most common exemption we see is "Boarding Homes." They do not purport to be a business (i.e. care home/sober living home/etc.) and they do not provide any type of services. Group of people living together without a house manager.

Residential Health Care Institutions

(Total = 3,093)





Bureau of Residential Facilities Statistics

Since November 1, 2022:

- 1,188 inspections conducted
- 3,476 deficiencies cited
- 496 complaints investigated
- 12% of inspections were deficiency-free
- More than 400 Enforcement Actions taken



Licensing Tools for the Public

Online Complaint Forms

www.AZDHS.gov



Online Complaint Forms





Licensing Services Online Complaint Forms

Croup Hon	Special Licensing
Disabilities	
Marijuana Laser Tech	
Medical Ra	adiologic Technologists
Midwives	
Soher Livir	ng Homes







Complaints

- ADHS investigates allegations within our jurisdiction
 - Statute or rule violations including unlicensed care
- Investigations involve:
 - Inspection, interviews, document review, etc.
 - Evidence is required to substantiate allegations
- Substantiated allegations may result in:
 - Statements of Deficiencies
 - Enforcement Action (revocation, suspension, civil penalties, cease & desist order, etc.)

www.AZCareCheck.com

Allows the public to:

- Find a licensed provider in their area
- Verify licensing information
- View cited deficiencies
- View plans of correction
- View enforcement actions





Questions?

AZDHS.gov/Licensing
Main Licensing Line: 602.364.2536

Scope of the Problem: The Tribal Perspective

Open Floor





Division of Fee For Service Management Strategies



Markay Adams

AHCCCS Assistant Director



Melina Solomon

AHCCCS Clinical Administrator



DFSM Updates

- Worked to expand our Quality Management footprint in coordination with other divisions from AHCCCS
- Continue to actively coordinate with OIG and OGC
- Please continue to Report Suspicious Activity: https://www.azahcccs.gov/shared/News/GeneralNews/ReportsuspiciousActivity.html
- Ongoing collaboration with other divisions and verification of member services (phone surveys)
- Reviewing codes, including intensive outpatient



Behavioral Health Strategies

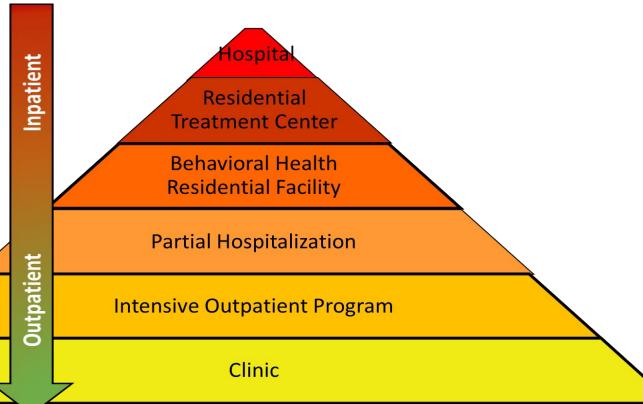


Behavioral Health Treatment Continuum





Behavioral Health Care Levels





Quality & Utilization Goals

Quality

Ensuring:

- Adherence to strong treatment plan
- Consistent delivery of quality treatment services
- Treatment delivered by qualified staff

Appropriate Utilization

Ensuring:

- Appropriate referral sources
- Purposeful approach between residential treatment and housing
- Member need matches treatment services
- Appropriate benefits are being applied



DFSM Strategies

Equitable Reimbursement

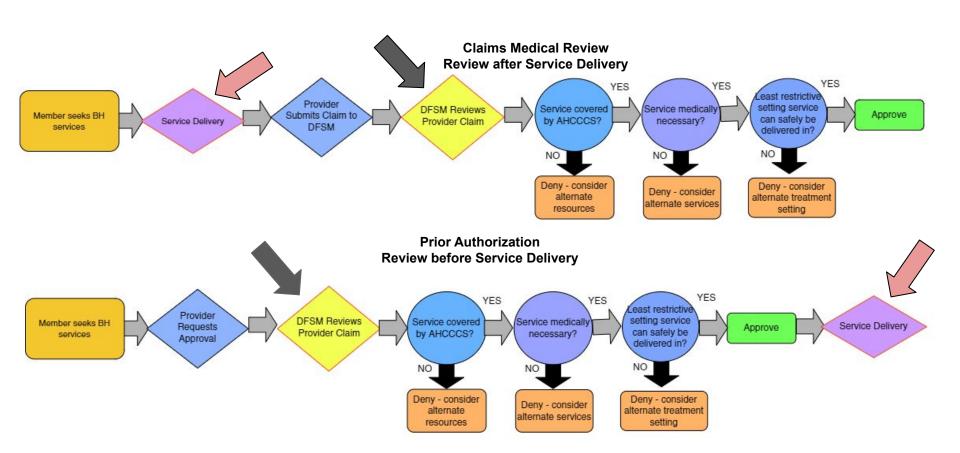
Rate setting

Pre-payment Review

- Prior Authorization (before service delivery)
- Claims Medical Review (after service delivery)









Open Discussion



American Indian Health Program Enrollment



Julie Swenson

AHCCCS Senior Policy Advisor



Current Enrollment Policy

An American Indian customer may change from an available health plan to American Indian Health Program (AIHP) or from AIHP to an available health plan at any time.

There is no proof required to make these changes, and the change can be requested using any standard modality, including by phone and online.



Policy Background and Basis

- No Medicaid enrollment requirement for proof of eligibility for IHS services;
- Medicaid "Simplicity of administration" rules;
- Certain non-Indian individuals are eligible for IHS services;
- Past issues of eligible individuals experiencing barriers or delays in accessing services through IHS;
- AHCCCS DMPS priority on the needs of individual customers.



Goals, Objectives and Next Steps

Identifying strategies to address program integrity concerns:

- Participants
- Process
- Timing

Assessing impact to AHCCCS customers:

- Participants
- Process
- Timing



Open Discussion



General Discussion



Announcements



Next AHCCCS Tribal Consultation:

May 11, 2023 at 1 p.m.

Please check the <u>AHCCCS Tribal Consultation</u> webpage for meeting information.

*Please send any agenda recommendations to Christine.Holden@azahcccs.gov by April 28, 2023.



Upcoming Tribal Feedback Session

AMPM 200 - Behavioral Health Practice Tools
April 19, 2023 at 9 a.m.
Feedback session will be held virtually



Follow & Support AHCCCS on Social Media









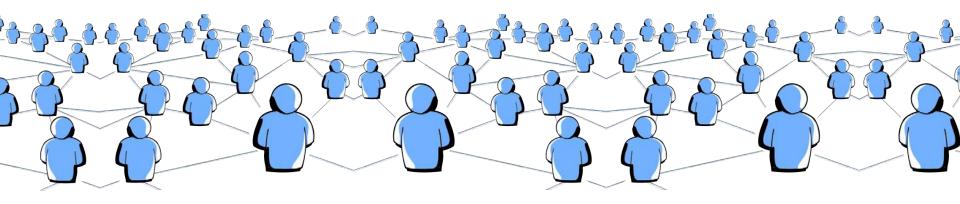
Handle: @AHCCCSgov

Handle: @AHCCCSgov

Handle: @AHCCCSGov

Handle: @AHCCCS

Channel: **AHCCCSgov**





Learn about AHCCCS' Medicaid Program on YouTube!









Watch our Playlist:

Meet Arizona's Innovative Medicaid Program



Other Resources - Quick Links

- AHCCCS <u>Waiver</u>
- AHCCCS <u>State Plan</u>
- AHCCCS Grants
- AHCCCS Whole Person Care Initiative (WPCI)
- AHCCCS <u>Office of Human Rights</u>
- AHCCCS <u>Office of Individual and Family Affairs</u>
- Future RBHA Competitive Contract Expansion



Thank You.

Have a great day!

