AHCCCS Complete Care

Reaching across Arizona to provide comprehensive quality health care for those in need
ACC Transition

18 days and counting

Duals Passive Enrollment

AHCCCS Communication

1. Success depends on shared commitment that those that we serve remain at the center of all decision making

2. We have done a lot of planning but challenges will invariably surface – may need to resolve some issues after the fact

3. Number of member protections in place during transition

Reaching across Arizona to provide comprehensive quality health care for those in need
Strategic Plan & Budget Update

Reaching across Arizona to provide comprehensive quality health care for those in need
# AHCCCS Strategic Plan

<table>
<thead>
<tr>
<th>Goals</th>
<th>Goal Performance Indicator(s)</th>
<th>Objectives FY 2019</th>
</tr>
</thead>
</table>
| 1: AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes. | Percentage of Health Plan spend in alternative payment models  
Number of regulatory flexibilities approved  
Number of members receiving a Medicaid behavioral health service in schools | a) 47% of Health Plan spend in alternative payment models  
b) 3 regulatory flexibilities approved  
c) Increase the number of members receiving a Medicaid behavioral health service in a school by 10% |
| 2: AHCCCS must pursue continuous quality improvement | Percent of measures which exceed the National Committee for Quality Assurance (NCQA) mean  
Number of facilities achieving medical home status  
Overall number of prescribed opioids | a) 50% of measures exceed the NCQA mean  
b) 8 facilities achieve medical home status  
c) 13% reduction in overall number of opioids prescribed |
| 3: AHCCCS must reduce fragmentation driving towards an integrated sustainable healthcare system | Percent of AHCCCS enrollees served in a fully integrated health plan  
Percent of Targeted Investment (TI) participants retained  
Number of provider organizations participating in the Health Information Exchange (HIE)  
Percent of members who receive at least one BH service per month during their first six months of CMDP enrollment  
Percent of pre-release inmates who receive a service within 3 months of release from incarceration | a) 98% of AHCCCS enrollees served in a fully integrated health plan by October 1, 2018  
b) Retain 95% of TI participants  
c) Increase number of provider organizations participating in the HIE to 580  
d) Increase percent of members who receive at least one service per month during their first six months of CMDP enrollment from 76% to 80%  
e) Increase percent of pre-release inmates who receive a service within 3 months of release from 43% to 50% |
| 4: AHCCCS must maintain core organizational capacity, infrastructure and workforce planning that effectively serves AHCCCS operations | AHCCCS Overall Employee Engagement Score  
ADOA system security evaluation score | a) Increase engagement score to 9  
b) Increase ranking on the ADOA system security evaluation score to 725 |

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

**SFY20 Budget Request**

**Historical AHCCCS GF Requests**

(in Millions)

- Fall Revision
- September Submission

<table>
<thead>
<tr>
<th>SFY 15</th>
<th>SFY 16</th>
<th>SFY 17*</th>
<th>SFY 18</th>
<th>SFY 19</th>
<th>SFY 20</th>
</tr>
</thead>
<tbody>
<tr>
<td>$36.80</td>
<td>$(2.50)</td>
<td>$153.20</td>
<td>$82.40</td>
<td>$96.70</td>
<td>$28.80</td>
</tr>
<tr>
<td>$(1.90)</td>
<td>$(24.10)</td>
<td>$71.80</td>
<td>$37.90</td>
<td>$108.00</td>
<td></td>
</tr>
</tbody>
</table>

*Does not include $517M BHS Base Mod
SFY20 Budget Request

• Hospital Assessment
  o Increase of $21.5M over FY19 due to reduction in FMAP from 93% to 90% on 1/1/20

• KidsCare
  o $7.9M GF due to reduction in FMAP from 100% to 90.14% on 10/1/19

• Capitation Rates
  o Projecting overall weighted capitation increase of 2.5%

• Other Considerations
  o Comp adjustments, Asset Verification System, Provider Management System upgrade, Electronic Visit Verification
Pending Waiver Requests

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

- AHCCCS submitted a request to CMS to implement AHCCCS Works on 12/19/17
- Requirement applies to able-bodied adults 19-49 who do not qualify for an exemption
- Must be employed or actively seeking employment, attending school or participating in an employment support and development activity for at least 80 hours per month
- Operational workgroups defining policy parameters and system requirements in preparation for waiver approval
- Four states’ waivers approved to date: Kentucky, Indiana, Arkansas, New Hampshire
- Negotiations with CMS ongoing
Prior Quarter Coverage

• Currently, Arizona covers enrollees three months prior to the month of application if the enrollee would have been eligible at any point during those months.

• Amendment submitted on April 6, 2018 proposes to limit retroactive coverage to the month of application, consistent with AHCCCS policy prior to 2014.

• CMS requiring exemptions for pregnant women, women 60 days or less postpartum and children under age 19.

• Anticipate approval this month.
National Landscape

Reaching across Arizona to provide comprehensive quality health care for those in need
Median Medicaid Director Tenure: Comparisons to Past Years

Reaching across Arizona to provide comprehensive quality health care for those in need
Strategic Priorities Reported by Directors in FY 2017 for Coming Year

1. Reaching across Arizona to provide comprehensive quality health care for those in need
What waivers are Medicaid agencies pursuing now?

![Bar chart showing the number of states pursuing various Medicaid waivers:]
- Waiver of IMD (for SUD): 26 states
- New conditions for eligibility (e.g., work requirements, drug testing): 18 states
- Waiver of IMD (for mental health): 12 states
- Changes in Medicaid drug coverage: 7 states
- Alternative payment models for FQHCs: 6 states
- New cost-sharing arrangements: 5 states
- Coverage expansion for childless adults: 4 states
- Time limits on coverage: 4 states
- Allowing Medicaid buy-ins: 3 states
- Assuming Medicare spending for duals: 2 states

Reaching across Arizona to provide comprehensive quality health care for those in need
NAMD Regulatory Priorities

1. Managed Care Requirements – QRS – contracts
2. MH and SUD – IMD flexibility and CBO scoring
3. HCBS – EWV and HCBS heightened scrutiny
4. Prescription drugs – strengthen Medicaid negotiation authority
5. SPA Waiver and APD Reviews and Timeliness
6. Duals – continued support of alignment efforts
7. Delivery System and Payment Reform – resource to assist states on federal authority

Reaching across Arizona to provide comprehensive quality health care for those in need
AHCCCS Efforts to Address the Opioid Epidemic
Opioid State Targeted Response (STR)

- **Funding Period:** 5/1/17 to 4/30/19 (2 Years)
- **Amount:** $12 million per year
- **Submitted:** 2/17/17
- **Status:** Award Granted
- **Area served:** All Regions
- **Population of focus:** At minimum; individuals with an OUD living in rural and underserved urban areas; individuals with OUD being released from correctional settings; pregnant and parenting women with OUDs; young adults ages 18-25 years; and older adults ages 55 years and older.
Arizona opened five 24/7 Centers of Excellence for Opioid Treatment on Demand during year one. The COE is an Opioid Treatment Program in a designated "hotspot" that expanded its hours to be open for intakes around the clock and warm handoff navigation care post intake.

Arizona has also opened two Medication Units in rural Arizona.
Opioid STR Carryover

- Carryover unobligated funds in the amount of $6,863,983 from year 1 into year 2
- Submitted 7/31/2018
- **Carryover Initiatives**
  - Prescriber training reflecting opioid legislation
  - Community-based education and awareness through coalitions
  - Increasing accessibility of MAT (Med Units, COE support, Project ECHO for PPW)
  - Expansion and implementation of recovery supports – Oxford House Model for Pregnant and Post-Partum women and their children.

Reaching across Arizona to provide comprehensive quality health care for those in need
Total Number of Persons Served (Unduplicated Count), Arizona Opioid State Targeted Response (STR) Grant Year One

Number of Persons Served for Opioid Use Disorder Treatment Services: 4,362
Number of Persons Served for Opioid Use Disorder Recovery Support Services: 3,379

6,143 TOTAL PERSONS SERVED (UNDUPLICATED COUNT)
Total Number of Persons Served (Unduplicated Count), Arizona Opioid State Targeted Response (STR) Grant Year Two, May 1, 2018 – July 31, 2018

Number of Persons Served for Opioid Use Disorder Treatment Services: 3,082

Number of Persons Served for Opioid Use Disorder Recovery Support Services: 2,084

Total Persons Served (Unduplicated Count): 4,364
State Opioid Response (SOR)

- **Funding Period:** 9/30/18 – 9/29/20 (2 years)
- **Amount:** $19,975,519 per year
- **Submitted:** 8/13/18
- **Status:** Pending Award (Formulary Grant)
- **Area served:** All Regions *Funding will go through T/RBHAS; additional projects will go to RFP*
- **Population of Focus:** Individuals re-entering the community from correctional settings; individuals in rural and isolated areas; individuals experiencing homelessness; tribal populations; veterans, military service members and military families; pregnant women and parents with OUD; and individuals who have experienced trauma, toxic stress or adverse childhood experiences (ACEs).
SOR Program Activities

1. Sustaining and Enhancing Naloxone Distribution;
2. Increasing Localized Community Opioid Prevention Efforts;
3. Expanding Trauma-Informed Care Prevention, Treatment and Recovery Efforts;
4. Expanding Navigation and Access to MAT through 24/7 access points (Medication Units, New OTPs and extending operating hours for OTPs);
5. Expanding access to recovery support services (i.e. housing, peer supports, job assistance and supportive recovery programming) and
6. Increasing public access to real-time prevention, treatment and recovery resources “no-wrong door”
Substance Use Disorder Services Fund

$10 m funding to be used for direct services

1. Increase outreach and identification of under and uninsured individuals with OUD
2. Increase navigation to OUD treatment
3. Increase utilization of OUD treatment services
Number of Individuals Served, Governor’s Substance Use Disorder Services (GO SUDS) Fund, February 1, 2018 – June 31, 2018

2,800
TOTAL PERSONS SERVED
Top 5 Services, GO SUDS Fund, February 1, 2018 – June 31, 2018

<table>
<thead>
<tr>
<th>Service</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Services</td>
<td>2,637</td>
</tr>
<tr>
<td>Methadone</td>
<td>1,844</td>
</tr>
<tr>
<td>Treatment Services</td>
<td>1,015</td>
</tr>
<tr>
<td>Case Management Services</td>
<td>708</td>
</tr>
<tr>
<td>Support Services</td>
<td>222</td>
</tr>
</tbody>
</table>

Reaching across Arizona to provide comprehensive quality health care for those in need
Behavioral Health Services in Schools

Reaching across Arizona to provide comprehensive quality health care for those in need
Strategies in CYE19

• $3M legislative appropriation
• $10.4M in cap rates in CYE19 to enhance access to BH services on campus
  o Required implementation plan and quarterly deliverable, documenting efforts to offer behavioral health services on campus
• $1M for targeted training in schools through interagency services agreement with ADE
• Exploring opportunities to enhance Medicaid School-Based Claiming (MSBC) program
Questions

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