



## TI 2.0 Program Milestones

April 2, 2024 Information Session Topics:

- Culturally and Linguistically Appropriate Services Standards (CLAS)
- Health Equity

# Hosts

## AHCCCS

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# Format - Open Q&A

- All lines are open upon entry- you will be muted
- This meeting will be recorded
  - Summary notes will be made available on the TI website in a few weeks
- Questions will be First-Come, First-Served
  - Verbal questions will be prioritized for verbal response- raise hand to queue
  - Chat questions will be addressed via chat or verbally

# Milestone Review

Culturally and Linguistically Appropriate Services Standards (CLAS)



# Example: Adult Primary Care

*Today's discussion applies to all TI 2.0 areas of concentration*



## Announcements

Stakeholders can stay informed on the latest TI 2.0 announcements by [signing up for the TI newsletter](#). Check the TI website often to see the latest news about the program.

### TI 2.0

**TI 2.0 APPLICATIONS:** TI 2.0 applications were due at 5 p.m. (MST/AZ Time) October 20, 2023. The application period is closed. Providers that submitted an application in Year 1 are able to apply for an additional area of concentration in Year 2. Please contact the TI team if you are interested in this opportunity. This opportunity will not be available in Years 3, 4, or 5.

**TI 2.0 MILESTONES:** All TI 2.0 participating organizations will need to complete Year 2 and Year 3 milestones to earn incentive payment. Each milestone will count towards a percentage of payment. Payment weighting per milestone will be available on the TI Website by the end of April. Contact the AHCCCS TI team at [targetedinvestments@azahcccs.gov](mailto:targetedinvestments@azahcccs.gov) for milestone questions.

Year 2 & Year 3 TI 2.0 Milestones by Area of Concentration:

- Adult Primary Care
- Pediatric Primary Care
- Adult Behavioral Health
- Pediatric Behavioral Health
- Justice

**NEW TO TI 2.0?** Review the TI 2.0 Welcome Packet and get acquainted with TI program requirements and resources. Contact the TI team with questions at [targetedinvestments@azahcccs.gov](mailto:targetedinvestments@azahcccs.gov).

**YEAR 1 PAYMENT:** Eligible TI 2.0 participants can expect Year 1 payment in Fall 2024. Participants can help expedite this process by ensuring AHCCCS Provider Enrollment (APEP), ADHS licensure (when applicable) and the NPPES Registry have matching information for participating clinics. Discrepancies must be resolved prior to payment calculation.

**SAVE THE DATE:** Block off your calendar for two Quality Improvement Collaborative (QICs) sessions this program year hosted by the Targeted Investments Program Quality Improvement Collaborative (TIPQIC). Participation in QICs is required for a portion of the TI incentive payment. More information will be provided via email in March. Sign up and registration links will be available on

**2 Implement the [National Culturally and Linguistically Appropriate Services \(CLAS\) Standards](#), developed by the U.S. Department of Health and Human Services Office of Minority Health. Implementation shall include:**

1. Completing an organizational evaluation of current practices and identifying a plan for implementing CLAS Standards that are not yet in place.
2. Building and supporting a culturally and linguistically diverse practice team.
3. Offering language assistance services to individuals who have limited English proficiency and/or other communication needs informed by the identified language needs of attributed members.
4. Designing, implementing and improving programs that provide culturally appropriate services that meet the needs of the attributed members.

Milestone Measurement Program Year 2 (October 1, 2023 – September 30, 2024)	Milestone Measurement Program Year 3 (October 1, 2024 – September 30, 2025)
By September 30, 2024:	By September 30, 2025:
<p>A. Upload the completed <a href="#">National CLAS Standards implementation checklist</a> and a plan for implementing CLAS Standards that are not yet in place.</p> <p>B. Build and support a culturally and linguistically diverse practice team by either:</p> <ol style="list-style-type: none"> <li>a. Uploading documents related to achieving NCOA HE 1.A and HE 1.B</li> </ol> <p style="text-align: center;">OR</p> <ol style="list-style-type: none"> <li>b. Attesting the practice has implemented National CLAS Standards 2-4.</li> </ol>	<p>C. Promote access to and availability of language services by either:</p> <ol style="list-style-type: none"> <li>1) Uploading documents related to achieving NCOA HE 3.A, 3.B, 3.C and 3.D</li> </ol> <p style="text-align: center;">OR</p> <ol style="list-style-type: none"> <li>2) Attesting the practice has implemented National CLAS Standards 5-8.</li> </ol> <p>D. Provide culturally appropriate services by either:</p> <ol style="list-style-type: none"> <li>1) Uploading documents related to achieving NCOA HE 5.A (Factors 1-5), 5.B and 6.D (Factors 2, 4 and 6).</li> </ol> <p style="text-align: center;">OR</p> <ol style="list-style-type: none"> <li>2) Attesting the practice has implemented National CLAS Standards 9, 10, 12 and 13.</li> </ol>

Core Component 2 Specifications	
System Collaboration Opportunities	Entities are responsible for implementing CLAS standards specific to the patient population they are responsible for. Practices are responsible for their attributed members, Plans are responsible for their enrollees, and AHCCCS is responsible for all members. Although Plans and AHCCCS have the largest responsibility, experience in this work, and resources to efficiently correspond with all members, providers are best equipped to collect patient and provider attributes. Communicating to the member that there is an adequate network of diverse and culturally competent providers increases their comfortability in seeking services.
Additional Resources	<a href="#">AZ CLAS Supplemental Toolkit (ADHS)</a>
Methodology	Provider attribution is consistent with the methodology used for performance measures (currently TI 1.0 Y6 methodologies). Generally: PCP participants are responsible for members seen for primary care services and patients empaneled-to but not seen by the practice when the patient does not seek PCP services from another outpatient facility, BH participants are responsible for members seen by the organization for outpatient services (excluding crisis response and SMI evaluations as identified through claims) in the past 24 months, and Justice participants are responsible for members referred to the clinic from a justice partner or health plan in the previous 24 months. AHCCCS and ASU welcome feedback to improve these attribution methodologies in a standardized format with available data (e.g., "we'll send you a list of members" satisfies neither criteria). AHCCCS requires Health Plans to reconcile PCP assignment with the member's claims history by October, 2024 (and quarterly thereafter).
Examples	<p>Practices can meet this milestone in many ways, but should roughly approximate the level of effort described in the following example.</p> <p><b>Example:</b> an organization identifies through analyses of its patient population that its American Indian populations have lower rates of diabetes control compared to the population average. The organization interviews patients and local community organizations and identifies that American Indians experience challenges going to their providers' office and, once they arrive, they do not feel that providers consider their preferences. The organization requires cultural competence training for all practice staff to better understand the patients' concerns and preferences before developing a treatment plan. The organization also partners with local American Indian organizations to hold regular pop-up clinics in the community where patients can go to receive education, routine screening, and treatment for diabetes.</p>

# Year 2 Requirements

- Applies to All Areas of Concentration: Adult PCP, Adult BH, Peds PCP, Peds BH, and Justice
  - By **September 30, 2024** be ready to upload:
    - Completed CLAS Standards Checklist
    - Organization's written plan for implementing CLAS Standards
    - Choose from one of two options- Document how your organization is building a team that is culturally and linguistically diverse:
      1. Document how your practice will implement National CLAS Standards 2, 3, and 4.
- OR**
2. **NCQA Accreditation Path Only:** Upload documents for NCQA HE 1.A and HE 1.B
- **Remember!** Keep all documentation for 7 years in case of post-pay audit

# CLAS Standards Checklist

**Requirement:** Complete the National CLAS Standards Checklist and Action Worksheet

## Action Items:

1. [Download PDF](#)
2. Completed the checklist and questionnaire
3. Save responses
4. Upload to AHCCCS Online TI 2.0 Application Portal during Year 2 Application period

An Implementation Checklist for the National CLAS Standards  
with a CLAS Action Worksheet and CLAS Testimonials



### Table of Contents

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## Your CLAS Action Worksheet

Review the practices you checked as "planning to implement." We suggest choosing three practices that your organization or department will focus on implementing next. Write these three practices down, along with timeframes for their implementation.

How will you help your organization implement these National CLAS Standards? Write down a few concrete action steps. Consider your objectives, challenges, and staff and resources that can support you.

# National CLAS Standards 2-4 (Non NCQA Accreditation Path)

*Requirement: Build and support a culturally and linguistically diverse practice team*

## Action Items:

1. Go to [National CLAS Standards website](#)
2. Review standards 2, 3, and 4
3. Document how your organization will implement standards
4. Attest that this task was completed in the Year 2 AHCCCS Online TI 2.0 Application Portal
5. No documents will be uploaded for this task but keep all related policies in case of post-pay audit

HHS.gov U.S. Department of Health & Human Services Explore HHS

THINK CULTURAL HEALTH

About Us National CLAS Standards Education Resources Contact

CLAS > CLAS Standards

NATIONAL CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES STANDARDS

The National CLAS Standards are intended to advance health equity, improve quality, and help eliminate health care disparities by establishing a blueprint for health and health care organizations to:

Principal Standard

1. Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

**Governance, Leadership and Workforce**

2. Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.
3. Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.
4. Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.

National CLAS Standards

CLAS STANDARDS  
National CLAS Standards  
(PDF - 48 KB)

FOR MORE INFORMATION  
National CLAS Standards  
Implementation Checklist (English)  
(PDF - 7077 KB)

**Note:** Organizations pursuing NCQA accreditation must complete NCQA HE 1.A and HE 1.B and upload documentation to the portal

Questions?

# Milestone Review

## Health Equity

Questions?

# #5: Identify and Address Health Inequities

5

**Identify health inequities and health-related social needs (HRSNs) prevalent within the population attributed to the practice and implement plans to reduce identified inequities. Identification and implementation shall include:**

- 1. Collecting member-reported demographic data (i.e., race/ethnicity, primary language, disability status, geography of member's residence, sex assigned at birth, gender identity, and sexual orientation) using statewide data standards where specified by AHCCCS<sup>3</sup>, documenting the data in the practice EHR and developing policies for updating data and maintaining data. Practices cannot delegate these activities to a partner organization.**
- 2. At least annually stratifying AHCCCS TI 2.0 quality incentive measures using clinical data, member-reported demographic data and/or HRSN data in the practice EHR to identify health inequities using the practice EHR, Community Cares and/or other tools.**
- 3. Developing and implementing a community-informed health equity plan to reduce at least one identified inequity at least annually. The practice supplements data from its EHR, as outlined above, with other sources, including but not limited to: stratified HEDIS measure performance provided by ASU; CommunityCares data; Health Information Exchange data; and state, regional and/or national data for benchmarking purposes.**

# #5: Identify and Address Health Inequities

## Year 2 Milestones

### By May 31, 2024:

- Complete an [analysis using a template provided by the state](#) to assess current health equity related practices and identify opportunities for further progress, which may include insights for the state to offer technical assistance.
- **NCQA HE Only:** Submit update on their formal gap analysis (provided after commitment deadline 4/5/2024)

### By September 30, 2024:

- Collect, document, and maintain member-reported demographic data by:
  - Documenting practice policies pertaining to collect, document, and maintain member-reported demographic data
- Document organization's procedures for stratifying quality incentive measures using EHR data by:
  - Demonstrating practice policies to assess quality measure data, stratified by member-reported demographic data and HRSN

# #5.A) AHCCCS Survey

## Due 5/31/2024

- Complete linked Google Form or email completed survey to [TargetedInvestments@azahcccs.gov](mailto:TargetedInvestments@azahcccs.gov) by 5/31/2024
- Collect answers from agency SMEs before submitting- **survey does not save**
- ~1 hour for knowledgeable SME to complete- **do not wait until last minute!**

# #5.A) AHCCCS Survey

## Due 5/31/2024

### Generally, conceptual questions:

- What are providers doing now related to health equity?
  - Get staff thinking about the initiative
  - Identify current activities- may be less work than you think!
- What are health plans and ACO/CINs (if any) supporting this work?
- How can health plans and ACO/CINs (if any) support this work?
- How can providers support health plans and ACO/CINs (if any) in this work?

# #5.C) Collect Member-Reported Demographic Data Due 9/30/2024

Demonstrate practice policies pertaining to collect, document, and maintain member-reported demographic data

- Must match AHCCCS guidance
  - [OMB standards released 3/29/2024](#)
  - AHCCCS guidance pending
- Consider:
  - Intake Forms
  - How/when EHRs are updated
  - How/when data received from external sources

# #5.D) Document Organization's Procedures for Stratifying Quality Measures using EHR Data Due 9/30/2024

Demonstrate practice policies to assess quality measure data, stratified by member-reported demographic data and HRSN

- EHR technical ability will drive success
  - Best practice: In-house or centralized SMEs
  - AHCCCS and ASU TIPQIC to provide assistance
- Document processes only- do not need to implement until Y3
- Consider:
  - Joining race/ethnicity data to well-gap reports
  - Generating in-house performance measure reports

# Takeaways

# Key Dates

- **Document Validation (Milestones Rubric)**
  - Available in April 2024
- **TI Year 2 Application and Attestation**
  - Available in Fall 2024 via [AHCCCS Online TI 2.0 Application Portal](#)
- **TI 2.0 Year 1 Payment**
  - December 2024
- **Virtual QIC Sessions**
  - May 9, 2024 from 11:30 AM to 1:00 PM ([Register](#))
  - August 8, 2024 from 11:30 AM to 1:00 PM ([Register](#))

# Resources

## Year 2 & Year 3 TI 2.0 Milestones by Area of Concentration:

- [Adult Primary Care](#)
- [Pediatric Primary Care](#)
- [Adult Behavioral Health](#)
- [Pediatric Behavioral Health](#)
- [Justice](#)

## TI 2.0 Welcome Packet

- Overview of TI program
- Annual requirements
- Payment methodology
- Checklist of Year 2 action items

## National CLAS Standards & Checklist

- Standards: <https://thinkculturalhealth.hhs.gov/clas/standards>
- Checklist: <https://thinkculturalhealth.hhs.gov/assets/pdfs/AnImplementationChecklistfortheNationalCLASStandards.pdf>

## Year 2 TI 2.0 Milestones

### Deadlines for Core Components and Corresponding Elements

Core Component	Area of Concentration (AOC)	Year 2 Deadlines (Oct. 2023 - Sept. 2024)
Participate in the Targeted Investment Program Quality Improvement Collaborative(QIC) offered by the Arizona State University	All	<ul style="list-style-type: none"> <li>• Complete Elements A - C by Sept. 30</li> <li>• Attend QIC Sessions: Feb. 5 (TI Kick off), May 9, Aug. 8</li> </ul>
Culturally and Linguistically Appropriate Services Standards (CLAS)	All	<ul style="list-style-type: none"> <li>• Complete Elements A-B by Sept. 30</li> </ul>
Implement a process for screening for health-related social needs (HRSN) and connecting members seen to CBOs to address individual social needs	All	<ul style="list-style-type: none"> <li>• Complete Elements A-D by Sept. 30</li> </ul>
CommunityCares	All	<ul style="list-style-type: none"> <li>• Complete Elements A-D by Sept. 30</li> </ul>
Identify Health Inequities and Health-related social needs(HRSNs) prevalent within the population attributed to the practice and implement plans to reduce inequities	All	<ul style="list-style-type: none"> <li>• Complete Elements A-B by May 30</li> <li>• Complete Elements C-D by Sept. 30</li> </ul>
Postpartum Depression Screening- PMH Certifications	Adult BH	<ul style="list-style-type: none"> <li>• Complete Elements A-F by Sept. 30</li> </ul>
Postpartum Depression Screening- Screening New Caregivers at Well Visit and Referrals	Adult PCP	<ul style="list-style-type: none"> <li>• Complete Elements A-E by Sept. 30</li> </ul>
Postpartum Depression Screening- Screening New Caregivers at EPSDT Visit and Referrals	Peds PCP	<ul style="list-style-type: none"> <li>• Complete Elements A-C by Sept. 30</li> </ul>
Onsite Dental Varnish	Peds PCP	<ul style="list-style-type: none"> <li>• Complete Elements A-D by Sept. 30</li> </ul>
Early Reach-In	Justice	<ul style="list-style-type: none"> <li>• Complete Elements A-B by Sept. 30</li> </ul>
Tobacco Cessation	Justice	<ul style="list-style-type: none"> <li>• Complete Elements A-B by Sept. 30</li> </ul>

Questions?

Thank You.

[targetedinvestments@azahcccs.gov](mailto:targetedinvestments@azahcccs.gov)