AHCCCS Complete Care
Coming October 1, 2018
Today’s Presentation

• AHCCCS Complete Care
  o What is AHCCCS Complete Care?
  o Who is affected?
  o When is it effective?

• New ACC Health Plans
  o Who are the new and exiting ACC Health Plans?
This presentation and more is available at:

www.azahcccs.gov/ACC
Frequently Asked Questions

Q: Will covered services change?
A: Members will still have access to the same array of covered services with ACC Plans (and other plans as noted) as they do under a single statewide health plan.

Q: Will CRS members have to change health plans?
A: Currently most members with CRS conditions are enrolled with a single statewide health plan for all or a portion of their services. Effective October 1, 2018, CRS members receiving fully integrated services from the current AHCCCS Statewide CRS health plan (United Health Care Community Plan) will be enrolled with and have choice of AHCCCS Complete Care (ACC) plans for all services including CRS, other non-CRS physical health services, and all covered behavioral health services. The ACC plan will be responsible for providing all medically necessary covered services for persons with CRS qualifying conditions.
AHCCCS Complete Care (ACC)

What, Who and When?

Reaching across Arizona to provide comprehensive quality health care for those in need
The Benefits of Integration

1. One Plan
2. One Payer
3. One Provider Network
4. Easier to Navigate
5. Streamline care coordination to get better outcomes
6. Improve a person’s whole health
Vision - Integration at all 3 Levels

CURRENT DELIVERY SYSTEM

PROVIDERS

Health Plan (physical health)

AHCCCS

PROVIDERS

Health Plan/RBHA (behavioral health)

AHCCCS COMPLETE CARE (ACC) DELIVERY SYSTEM

PROVIDERS

ACC Health Plans

AHCCCS

Reaching across Arizona to provide comprehensive quality health care for those in need
Who Is Affected and When?

- Affects most adults and children on AHCCCS
- Members enrolled in Children’s Rehabilitative Services (CRS)

It does not affect:
- Members on ALTCS (EPD and DES/DD)
- Adult members with a serious mental illness (SMI)
- Most Comprehensive Medical Dental Plan (CMDP)

Starts on October 1, 2018!
AHCCCS Complete Care Health Plans (ACC Plans)

Who and Where?

Reaching across Arizona to provide comprehensive quality health care for those in need
ACC Plan Geographic Service Areas

Note: Zip codes 85542, 85192, 85550 representing San Carlos Tribal area are included in the South GSA.
## AHCCCS Complete Care (ACC) Plans as of Oct. 1, 2018

<table>
<thead>
<tr>
<th>Central GSA</th>
<th>South GSA</th>
<th>North GSA</th>
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</thead>
<tbody>
<tr>
<td>Banner University Family Care</td>
<td>Banner University Family Care</td>
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<tr>
<td>Care1st</td>
<td>Care1st</td>
<td>Steward Health Choice Arizona</td>
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<td>Steward Health Choice Arizona</td>
<td>Arizona Complete Health</td>
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<tr>
<td>Arizona Complete Health</td>
<td>Magellan Complete Care</td>
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<tr>
<td>Mercy Care</td>
<td>UnitedHealthcare Community Plan</td>
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(Arizona Complete Health for Steward Health Choice Arizona)
Current Care Delivery System

AHCCCS

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

Behavioral Health*
- Mercy Maricopa Integrated
- Health Choice Integrated Care (HCIC)
- Cenpatico Integrated Care (CIC)

Acute Care (acute services only)
- Mercy Care Plan
- United Healthcare Community Plan
- Care 1st
- Health Choice
- UFC
- Health Net
- Dept. of Child Safety (DCS)/CMDP (foster care, carved out population)
  - Children’s Rehabilitative Services
    - United Healthcare Community Plan
      - (fully integrated acute, BH and CRS services)

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

*Fully integrated contractors for acute and behavioral health services for members with serious mental illness (SMI) and carved out behavioral health services for Acute Care/DD adults with general mental health and substance abuse needs (GMH/SA) and children.
Care Delivery System as of Oct. 1, 2018

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 Mountain 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)

*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.
What’s Next?

Reaching across Arizona to provide comprehensive quality health care for those in need
<table>
<thead>
<tr>
<th>GSA</th>
<th>RBHA (current)</th>
<th>RBHA Affiliated ACC</th>
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Children’s Rehabilitative Services (CRS) Changes

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

• CRS members will have choice of ACC Plan
• Members currently enrolled with CRS will receive all physical health and behavioral health services from an ACC Plan.
• CRS members will continue to be identified and designated by AHCCCS.
American Indian Health Program (AIHP) Changes
Changes for American Indian Health Program (AIHP)

• AIHP will:
  o Pay for and manage care for physical and behavioral health services
  o Pay for and manage care for CRS services
  o RBHA will only continue to serve American Indian members with SMI
  o Manage care with TRBHAs when available and member enrolled
Supporting Choice for American Indian Members

- Integrated choices for the Non-SMI populations will be available within:
  - AIHP or AIHP and TRBHA; or
  - An ACC Plan
  - AI members can still access services from an IHS/638 facility at anytime regardless of enrollment
Choice for American Indian Populations

• Tribal members will continue same frequency of choice options
• Enrollment options continue
• American Indian members can still choose to change enrollment between AIHP or the AHCCCS Complete Care (ACC) Plan at any time. However, a member can still only change from one ACC Plan to another once a year.
• As stated in the PPA, with respect to Fee-For-Service eligible persons, the Provider agrees to bill and accept payment in accordance with the terms of this Agreement, state and federal rules and regulations, and all pertinent documents incorporated by reference.

• All AHCCCS registered providers, do not require a separate contract with AIHP.
Policy changes and updates related to Integration are reflected in the following manuals:

- AHCCCS Medical Policy Manual (AMPM)

- AHCCCS FFS Provider Billing Manual
  - [https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/providermanual.html](https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/providermanual.html)

- AHCCCS IHS/Tribal Provider Billing Manual
Other things to be aware of...
The Crisis system responsibilities will remain with the RBHA (in their respective GSA areas).
Continuity of Care – Plan Provider Transitions

- For transitioning members, ACC Plans must:
  - Allow members receiving BH treatment continued access to specific providers as listed in treatment plan (if agreed by provider) for duration of treatment or 6 months; whichever occurs first
  - Allow members with CRS qualifying conditions in active course of treatment on plan (if agreed by provider) for duration of treatment or 6 months; whichever occurs first
Questions?
Thank you!