AHCCCS
Arizona Health Care Cost Containment System

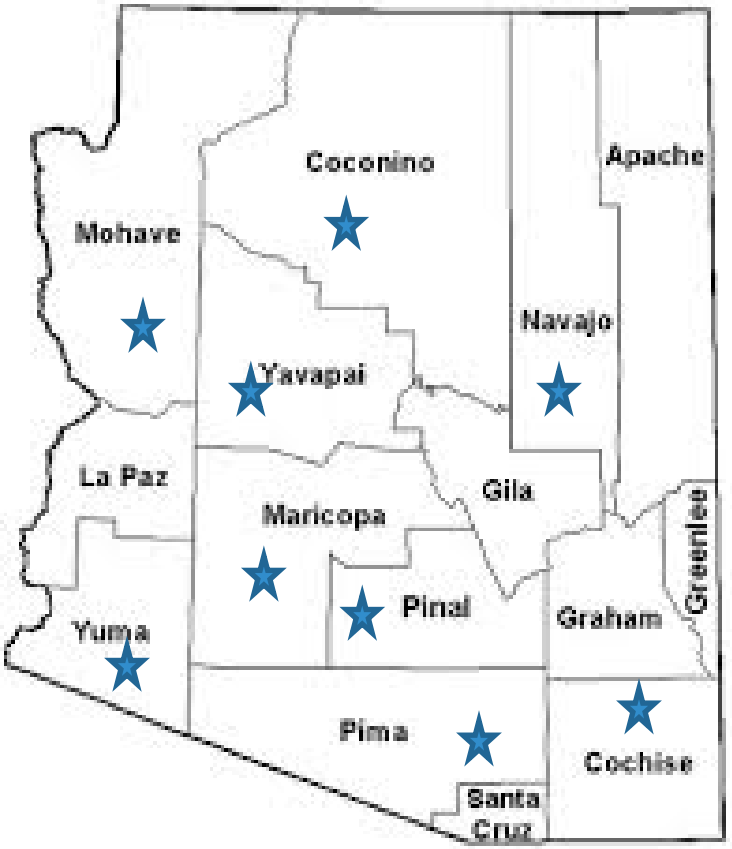
Justice System Initiative Update

Michal Rudnick

Enrollment Suspense and Inpatient Hospitalization

- Enrollment Suspense Agreements
  - This process allows for Medicaid enrolled people going into incarceration to have Medicaid suspended during detainment and reinstated upon release
- Collaboration with jails/prisons to pay for inpatient hospitalization
  - This process allows AHCCCS to pay for inpatient hospital stays for incarcerated individuals released to an inpatient hospital for at least 24 hours.

Counties with Enrollment Suspense



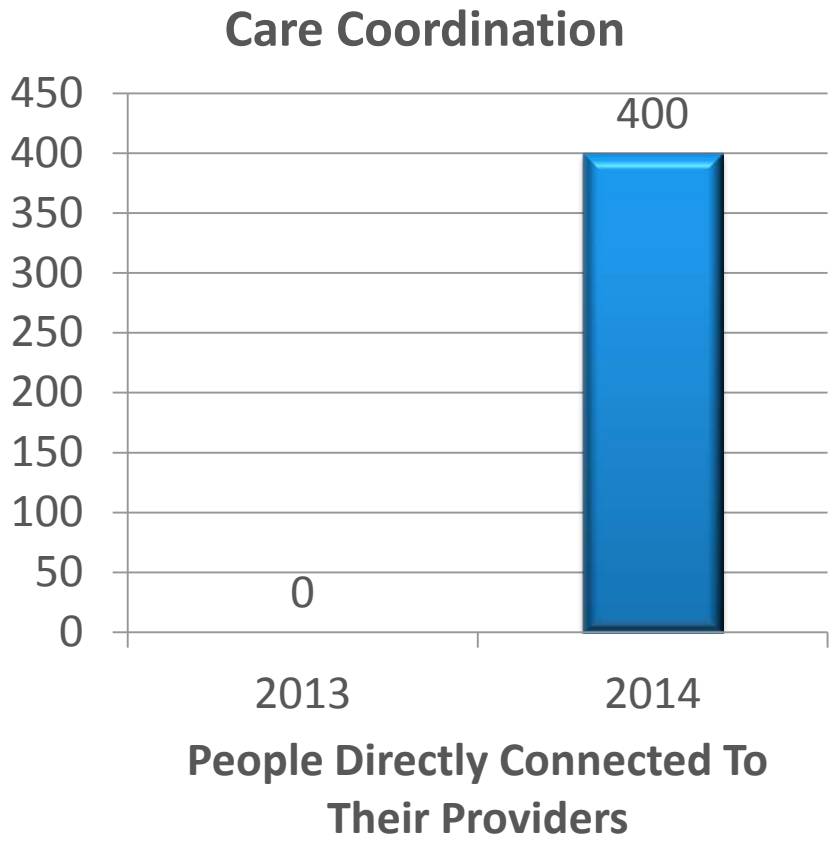
Where we were pre/post restoration

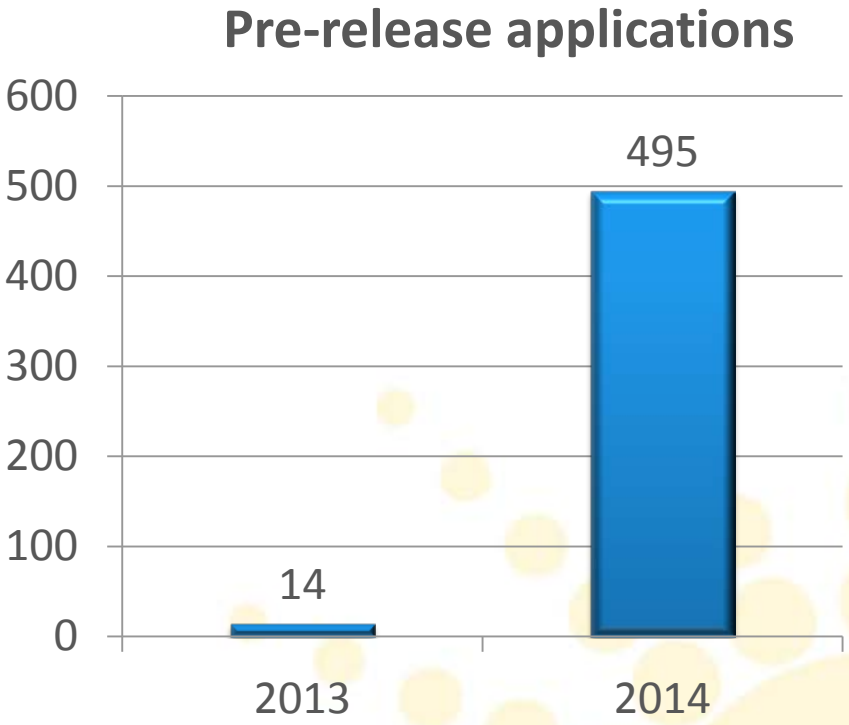
- January 1, 2014 Medicaid Restoration in AZ
- Enrollment Suspense Agreements
  - SFY15 Total Capitation Cost Avoided = $26,066,071.00
- Collaboration with jails/prisons to pay for inpatient hospitalization
  - Between 7/2014 and 6/2015, a total of $10,311,590.69 paid claims
  - Leveraging federal funds for permissible inpatient services lowers costs to Arizona taxpayers

Additional improvements

- Enrollment suspense – In 2014 -Executed IGA with Department of Corrections for people with less than 12 months incarceration
- Pre-release applications – In 2014 - Established policy and procedures to accept applications from Maricopa and Pima Counties
- In 2014 - Began process for providing medical assessments for people in need of long term care upon release from jails and prison
- In 2014 – Began connecting people transitioning out of jails and prison to the health plan

Where we were pre/post restoration





Other efforts

- October 2014 ruling requiring ADOC to provide better health services to people including those with serious mental illness, pregnant, diabetic
- Phoenix Police Department Implemented reforms in October, 2014 to send crisis intervention officers on mental health calls
- Phoenix Police Department is providing mental health first aid training for many police officers

All these things ultimately translate into:

- Improved health outcomes
- Reduction in recidivism
- Breaking of cycles in families/communities
- Reduced cost to taxpayers
- Reduction in use of jails/prison for housing mentally ill
- Reduction of unnecessary ER use
- Safety for communities

Next Steps for Justice Transitions

- Integration of behavioral and physical health in Maricopa and 10/1/15 integration for Greater AZ furthers the ability to successfully transition people suffering from a serious mental illness to care
- Through collaboration with DOC and Jails, American Indians with high need/high costs will be identified when transitioning out of jail/DOC
- Enrollment/suspense helps Yavapai heroin efforts, Pima county efforts, Adult probation efforts

Next Steps for Justice Transitions

- State Innovation Medicaid Grant will help to solidify a plan to further efforts (data sharing, to improve care coordination and rules around behavioral health data)
- HEAplus enhancements to accept greater number of Medicaid applications
- 7/1/16 Administrative Simplification and continuity of data sharing

Positive Feedback

From Jacqueline Miller, ADOC Release Planner for past 10 years:

I would like to inform you that our processes with the ALTCS division are FANTASTIC.

Mark Schaffer and the whole ALTCS team who assist with the most critical needs inmates have done and exceptional job. They have gone above and beyond, especially the medical assessment team from Tucson. We recently had three very critical releases in March, all three of which were referred to ALTCS and the teamwork involved to coordinate these cases was amazing. Due to the diligent work completed by the ALTCS division, three critical needs offenders were able to successfully release to skilled nursing placements, with ALTCS in place! These are the first three in the history of releases that this has happened.

Positive Feedback

The ALTCS division is to be truly commended on their dedication and willingness to ensure those most critical inmates receive the medical services so desperately needed upon release.

Without this coordination these offenders would have most likely been taken to a local emergency room upon release. This would have been costly to all those involved. The pre-release coordination of ALTCS allows us to work with a team to ensure continuity of care and prevent costly hospitalizations. The ALTCS division was very easy to work with and all the staff involved were not only professional but friendly as well. I look forward to working with them in the future.

Thank You.