### **OIFA 2020 Year In Review**



### Community Engagement



**9792** community members and stakeholders engaged this year. OIFA averaged 816 engagements per month, which exceeded the 750 per month goal.



### Empowerment Tools

**1 0** 1-page tools created in 2020; exceeding the annual goal of 6/year. A total of 33 1-pagers are now available on the <u>OIFA website</u>, most also in Spanish.

#### AHCCCS Community Forums

Total Participants: 1221

#### attended the community forums this year.

These forums covered various topics, such as: RBHA CCE, major decisions, crisis services, statewide housing administrator, court ordered evaluations, TRBHAs, 1115 Waiver & State Plan updates, etc.

### OIFA Advisory Council

Average Participants:

#### per monthly council meeting.

Includes community members, OIFAs at health plans, Peer and Family Run Organization CEOs, SU Providers, veterans liaisons, advocacy organizations, and others.

### Jacob's Law Training

# Total Participants: **393**

#### individuals who attended the Jacob's Law Training presented by AHCCCS OIFA.

Average of 26 participants over 15 events. The training address the rights and protections provided to foster/kinship/ adoptive parents and children covered under AZ House Bill 2442 (2016).

# Friday Newsletter Subscribers

### 389 New Subscribers / 2449 Total Subscribers

Interest in the OIFA Newsletter increased by 389 subscribers (15.8%), reaching almost 2500 subscribers at the end of the year.



# 24% Open Rate / 22% Click Rate

The weekly OIFA Friday newsletter had an open rate of 24% (6% higher than industry average). The click-through rate was 22% (14% higher than industry average).





#### Members with a Serious Mental Illness (SMI) Charged Copays for Prescriptions

**Issue:** Reports from the SMI community identified that some members were charged copays for behavioral health prescriptions when they should not have been. OIFA worked closely with the Pharmacy department at AHCCCS to address this concern.

**<u>Resolution</u>**: Currently amending the Medicare Cost Sharing (MCS) policy to ensure utilization management cannot be applied towards the payment, and that pharmacies only need to be AHCCCS-registered providers. AHCCCS is working with health plans to ensure members are reimbursed. OIFA developed a one-page handout to educate the community. Find it on the <u>OIFA Public Web Page</u>.

#### Peer Support Services and Family Support Services Under-Utilized in General Mental Health (GMH) Communities

**Issue:** Community notified OIFA in early 2020 that utilization of Peer Support Services (H0038) and Family Support Services (S5110) was low following the implementation of AHCCCS Complete Care (ACC) which occured in Fiscal Year 2019, and that there was a gap in services specifically for the General Mental Health/Substance Use (GMHSU) population.

**<u>Resolution</u>**: After much work and several different evaluations of data, OIFA collaborated with the AHCCCS Office of Data Analytics (ODA). The results of the data evaluation were that, in contrast to the community's claims, there was an increase/no service change in Peer/Family Support services for the GMHSU population following the implementation of ACC. Additional opportunities were realized from data mining, and OIFA will collaborate with ODA in the future.

#### **Peer & Family Committee Representation**

**Issue:** Health Plan contracts require participation of at least two peer and family members on all committees, except those where confidentiality is a concern. These requirements (for Governance Committees and Member Advisory Councils) where not being met.

**Resolution:** After discussions with Health Plan OIFAs, AHCCCS changed contract language (effective 10/1/2020). This would allow the health plans to still include peer and family members on those committees, without penalization (since the Health Plans cannot mandate that a member attend the meetings). Health plan OIFAs also proposed collaborating on a joint Statewide Member Advisory Council (MAC). Proposals were received and reviewed, but several challenges prevented the creation of this joint Statewide MAC. Ultimately, forward progress was not being made, and Letters of Concern were sent to Arizona Complete Health (ACC/RBHA), Banner University Care (ACC), Care1st, and UnitedHealthcare (LTC). Responses were received by the health plans, stating committees were being launched in early 2021.



# Peer and Family Career Academy (PFCA) 6 Webinars / 372 Attendees

In response to the COVID pandemic, the PFCA created a series of six webinars in April to train on issues regarding outreach, services, and support for people in a virtual connection. While marketed to Peer and Family Support, the webinars were open to all and attracted people from all professions in behavioral health.



### Successes

### **Utilization of Google Drive**

To support DCAIR's utilization of the Google Suite, OIFA proposed and coordinated with staff in DCAIR and Information Services Division (ISD) to utilize a Shared Google Drive for the division.

By consolidating storage space and organizing division documents, DCAIR was able to continue serving our stakeholders without interruption, as well as continuing on the path of AMS leadership within the agency.

# **One-Pager Request Form**

A Google form was created to capture important information for the development of one-page tools. This helped to streamline the request process and reduce the development timeframe.

The form is in two versions: <u>Google Forms</u> and <u>Google Sheets</u>.

# **OIFA Feedback Form**

In an effort to assist members in easily submitting issues experienced in the behavioral health system, OIFA developed an online issue tracker called the <u>OIFA Feedback Form</u>. OIFA uses this to quickly address members needs and track systemic issues. This displays OIFA's commitment to AMS standards such as customer service and innovation.