

### Program Overview

#### What is changing with the Arizona Healthcare Cost Containment System (AHCCCS) Program Integrity

AHCCCS is modernizing its program integrity approach through the implementation of an AI-enabled platform that integrates both pre-payment and post-payment review to more effectively prevent, detect, and respond to fraud, waste, and abuse (FWA).

This effort reflects a shift away from traditional “pay and chase” methods where fraud is identified after payment and toward a proactive, prevention-focused model designed to stop improper payments before they occur while continuously improving detection capabilities over time. The system will further strengthen AHCCCS’ ability to conduct prepayment review with greater precision and agility, while reducing administrative burden for providers and AHCCCS staff. It also reflects AHCCCS’ broader commitment to modernizing systems and updating technology to support more efficient, data-informed program integrity operations.

#### Why is AHCCCS making these changes?

AHCCCS is making these updates as part of a broader effort to address Medicaid fraud. The traditional program integrity methods are reactive. This new AI-enabled tool helps prevent money from going to non-compliant providers before the claim is paid. AHCCCS is also leveraging the new system’s robust analytics to better identify emerging trends, adapt to evolving fraud schemes, and focus review efforts where the risk is greatest.

### About the New System

#### What is the new solution AHCCCS is implementing?

AHCCCS is deploying the Alivia 360 Platform, an AI-enabled analytics solution that supports:

- Pre-payment review
- Pre-adjudication identification of potential fraud
- Improved claim editing and advanced analytics.

#### How does the new solution work?

The new solution uses behavior adaptive analytics to go beyond static, code-based, and flag emerging provider patterns that target fraud before payment. All claims will still be reviewed by AHCCCS to maintain a human in the loop and validate the output from the solution.

## Impact on Providers

### What providers will be impacted by this change?

This is limited to registered providers being reimbursed directly by AHCCCS for members not enrolled with a managed care organization. This does not impact any claims processing through a managed care organization.

The initial go live is focused on claims submitted directly to AHCCCS and primarily on non-emergency transportation and behavioral health claims.

### If I only submit claims to managed care organizations, am I impacted?

No.

### Does this change my process?

The impact on providers is minimal as this is an internal system within AHCCCS and is not an external facing system. Providers will continue with current processes to receive claims adjudication data and the processes for submitting claims or medical documentation. Non-emergency transportation providers are encouraged to revisit the approved billing manuals to check for adherence to all AHCCCS requirements for appropriate claims submission.

### How will this affect providers?

An initial go live release is scheduled for June 29, 2026. There is no impact as part of this go-live. A second release is scheduled for July 20, 2026. Following this release, there is minimal impact expected to providers. The pre-pay review system is used internally by AHCCCS and does not introduce any direct interface for providers.

### Will payments be delayed?

Payments will continue to be processed as usual. Providers can help ensure timely payment by submitting complete and accurate claims.

[FFS Billing Manual](#)

## Technology & System

### Will the Alivia 360 Platform replace human decision-making?

No. Claims will still undergo human review. The system uses a human-in-the-loop approach, where expert clinicians and AHCCCS reviewers review findings prior to the final determination.

### Will providers need to use a new system?

No changes will be made to the customer service portal, provider call center, or claims submission process for providers.

### What happens if a claim is flagged?

Flagged claims will undergo manual review before payment is approved or denied.

## Timeline & Preparation

### When will the New Alivia 360 Platform Go-Live?

The Alivia 360 platform is already live for post-payment analytics. AI-assisted prepayment review will go live on June 29, 2026.

### What is the difference between pre-pay and post-pay review?

The new system links both processes, using post-pay findings to strengthen pre-pay decisions.

- **Pre-pay review:** Flags and evaluates claims before payment to prevent improper payments
- **Post-pay review:** Analyzes paid claims to identify trends and recover improper payments

## Support & Resources

### Where can providers get help or more information?

- [AHCCCS Solutions Center](#)
- [Claims Education & Training](#)
- Phone: (602) 417-7670

### Are training resources available?

Beginning August 2026, AHCCCS will launch a provider training program. The program includes knowledge-based assessments to assess comprehension of billing standards, FWA and documentation requirements to determine where additional technical assistance would be helpful. This outcomes-based training program will focus on newly registered providers and will include documented training records that support accountability when errors persist after instruction.