



# AHCCCS STRATEGIC PLAN

## STATE FISCAL YEARS 2018-2023

JANUARY 2018

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Douglas A. Ducey, Governor  
Thomas J. Betlach, Director

December 27, 2017

Dear Arizonans:

I am pleased to share with you a copy of the Arizona Health Care Cost Containment System (AHCCCS) Strategic Plan for State Fiscal Years 2018-2022. As AHCCCS looks ahead to 2018, this will be a very important and exciting year for the AHCCCS program.

Nationally, there has been a significant debate around the Medicaid program as part of the Repeal and Replace discussion. From this debate it is clear that Medicaid faces many challenges. As the program has grown, it has consumed a larger portion of Federal and State resources, raising sustainability concerns. The program today serves a broader adult population that must be addressed through new, creative systems of care. The program is incredibly complex and fragmented and requires new approaches and policies to better serve populations like the dual eligible member. Finally, nationwide the Medicaid program faces the continual challenge of rapid leadership turnover. However, it is also important to recognize that as part of this debate the Medicaid program was shown to have incredible value for members, providers and families located in every community in Arizona.

Locally, AHCCCS is in the midst of the single largest procurement in the history of our state. The \$50 billion AHCCCS Complete Care Contract will fundamentally transform the delivery system by integrating behavioral and physical healthcare services for approximately 1.5 million members. This continues the multi-year effort of AHCCCS to incrementally integrate services and will represent the single largest step both in terms of population and dollars integrated.

As a system that serves over 1.9 million Arizonans and spends \$33 million per day, it is critical that AHCCCS pursue a broad array of strategies that are focused on creating a sustainable program. The growth in the AHCCCS program must be manageable and cannot crowd out other policy priorities like education and public safety. The program must be able to address the various challenges highlighted above.

It is within this context that this plan was developed. The plan offers four overarching goals which will guide the overall direction AHCCCS will take in the next five years. These four goals build on previous accomplishments and represent the collaborative efforts of the AHCCCS leadership team:

- Goal 1.** *AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.*
- Goal 2.** *AHCCCS must pursue continuous quality improvement.*
- Goal 3.** *AHCCCS must reduce fragmentation driving towards an integrated sustainable healthcare system.*
- Goal 4.** *AHCCCS must maintain core organizational capacity, infrastructure and workforce planning that effectively serves AHCCCS operations.*

AHCCCS continues to serve as an innovative model for delivering efficient and effective health care to Arizonans in need. AHCCCS recognizes that for over the past two decades the share of General Fund and increased pressure of spending at the federal level results in crowding out other policy priorities. The strategies pursued within this Strategic Plan are critical to developing a program that is sustainable over the long-term.

AHCCCS welcomes the opportunity to continue to be a leader and agent of change in the Arizona healthcare delivery system.

Sincerely,



Thomas J. Betlach  
Director

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## INTRODUCTION

The AHCCCS Strategic Plan for 2018-2023 begins with statements of the AHCCCS vision, mission and core values. This is followed by an overview of the programs and populations served, a review of accomplishments during the past fiscal year, and a description of the strategic goals which drive AHCCCS operations.

The Plan identifies four strategic goals for AHCCCS. These are:

1. AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.
2. AHCCCS must pursue continuous quality improvement
3. AHCCCS must reduce fragmentation driving towards an integrated sustainable healthcare system.
4. AHCCCS must maintain core organizational capacity, infrastructure and workforce planning that effectively serves AHCCCS operations

The Plan then concludes with a summary of Goals, Strategies, and Performance Measures that will serve to focus the efforts and energy of the program over the next few years.

### AHCCCS VISION:

Shaping tomorrow's managed health care from today's experience, quality, and innovation.

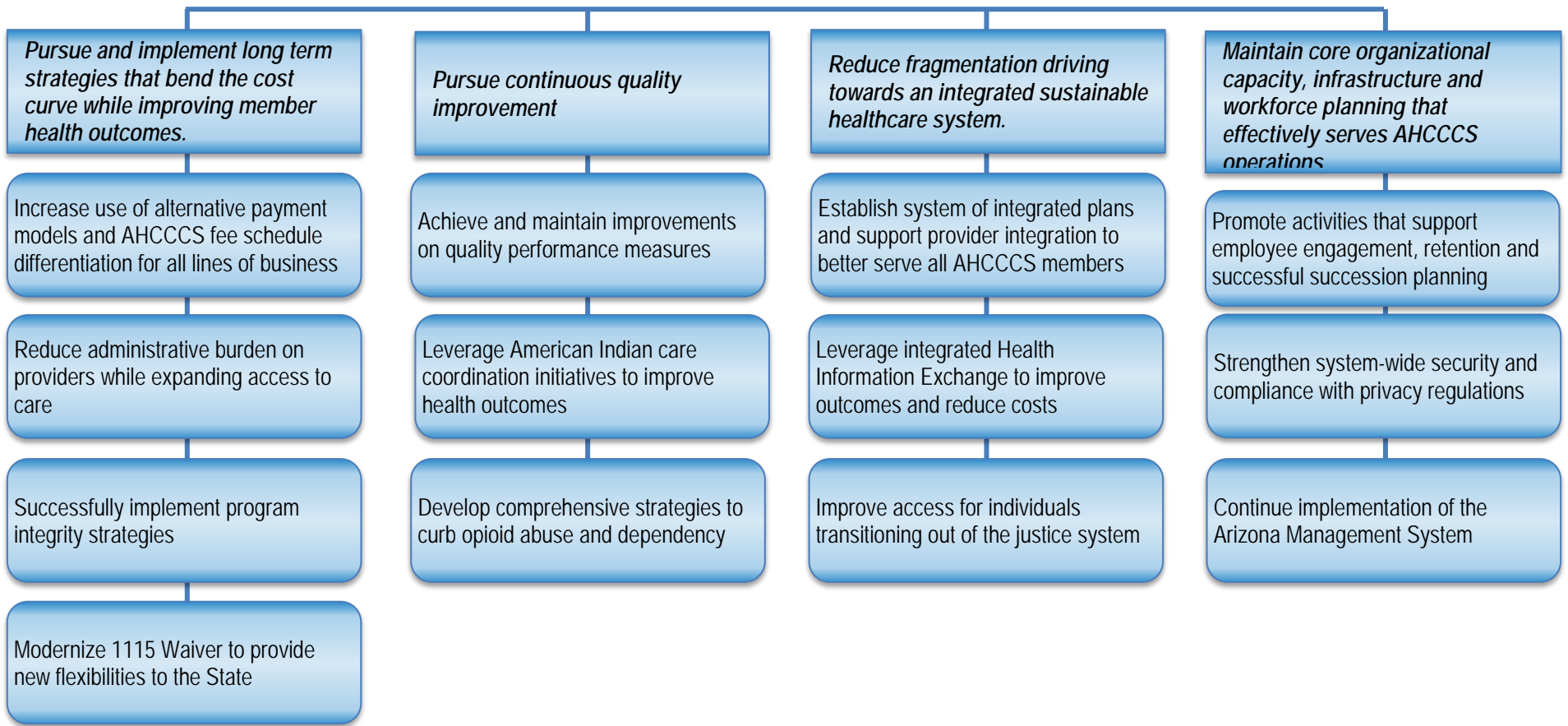
### AHCCCS MISSION:

Reaching across Arizona to provide comprehensive, quality health care for those in need.

### Core Values

1. **Passion:** Good health is a fundamental need of everyone. This belief drives us, inspires and energizes our work.
2. **Community:** Health care is fundamentally local. We consult with, are culturally sensitive to and respond to the unique needs of each community we serve.
3. **Quality:** Quality begins as a personal commitment to continual and rigorous improvement, self-examination, and change based on proper data and quality improvement practices.
4. **Respect:** Each person with whom we interact deserves our respect. We value ideas for change, and we learn from others
5. **Accountability:** We are personally responsible for our actions and understand the trust our government has placed on us. We plan and forecast as accurately as possible. Solid performance standards measure the integrity of our work. We tell the truth and keep our promises.
6. **Innovation:** We embrace change, but accept that not all innovation works as planned. We learn from experience.
7. **Teamwork:** Our mission requires good communication among interdependent areas inside and outside the agency. Internally, we team up within and across divisions. Externally, we partner with different customers as appropriate.
8. **Leadership:** We lead primarily in two ways: by setting the standards by which other programs can be judged and by developing and nurturing our own future leaders.

**Reaching Across Arizona to Provide Comprehensive, Quality Health Care for Those in Need**



## AHCCCS OVERVIEW

The Arizona Health Care Cost Containment System (AHCCCS), the State’s Medicaid Agency, uses federal, state, and county funds to provide health care coverage to the State’s acute and long-term care Medicaid populations. Since 1982, when it became the first statewide Medicaid managed care system in the nation, AHCCCS has operated under a federal Research and Demonstration 1115 Waiver authority that allows for the operation of a total managed care model.

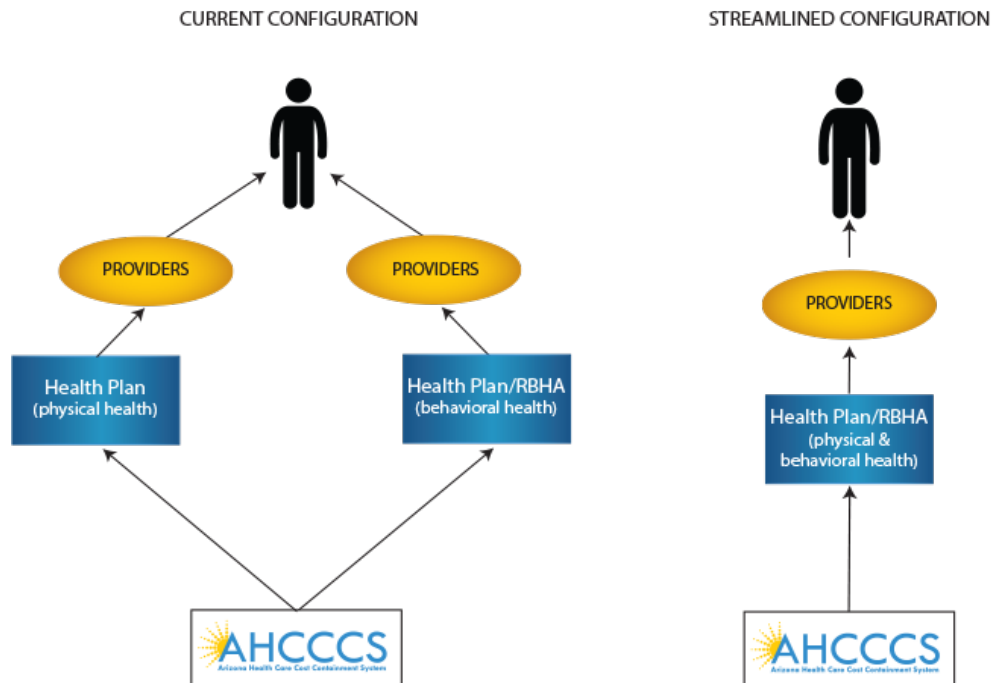
AHCCCS makes prospective capitation payments to contracted health plans responsible for the delivery of care to members. The model is a true public-private partnership that seeks to leverage competition and choice. The result is a managed care system that mainstreams recipients, allows them to select their providers, and encourages quality care and preventive services.

As of November 1, 2017, over 1.9 million Arizonans were enrolled in AHCCCS.

### AHCCCS Complete Care

On October 1, 2018 AHCCCS will implement new Managed Care Contracts that will be fully integrated products that offer both behavioral and physical healthcare services for the majority of the AHCCCS population. This integrated model will better meet the needs of AHCCCS members by establishing a single accountable plan that is responsible for partnering with providers to address the whole healthcare need of AHCCCS members.

Recent studies have documented that a small percentage of the Medicaid population makes up a significant portion of the overall cost of the Medicaid population. In the majority of instances the most complex Medicaid members have both physical and behavioral healthcare needs. Modernizing the AHCCCS delivery system to better serve members is one of the overarching multi-year strategies that AHCCCS has pursued. October 1, 2018 will mark an important milestone in this ongoing integration journey.



### ***Regional Behavioral Health Authority (RBHA) Functions***

Even with the establishment of the AHCCCS Complete Care Contracts on October 1, 2018 there will continue to remain important RBHA functions that are the responsibilities of AHCCCS Managed Care Organizations. These functions include:

1. Providing integrated services for Individuals with Serious Mental Illness.
2. Development and support of a regional crisis system.
3. For the near term, providing behavioral health services for children that are served by the Department of Child Safety.
4. Allocation of non-title XIX funding including Substance Abuse and Mental Health Services Administration (SAMHSA) grants and other sources of funding.

### ***ALTCS***

The Arizona Long Term Care System (ALTCS) provides acute care, behavioral health services, long-term care, and case management to individuals who are elderly, have physical disabilities or developmental disabilities and meet the criteria for institutionalization. Services for individuals with developmental disabilities in ALTCS are offered through the Arizona Department of Economic Security (ADES), Division of Developmental Disabilities (DDD). Whereas ALTCS members account for less than 4.0% of the AHCCCS population, they account for approximately 21.7% of the costs. The ALTCS program encourages delivery of care in alternative residential settings and has one of the highest home and community placement rates in the United States.

### ***KidsCare***

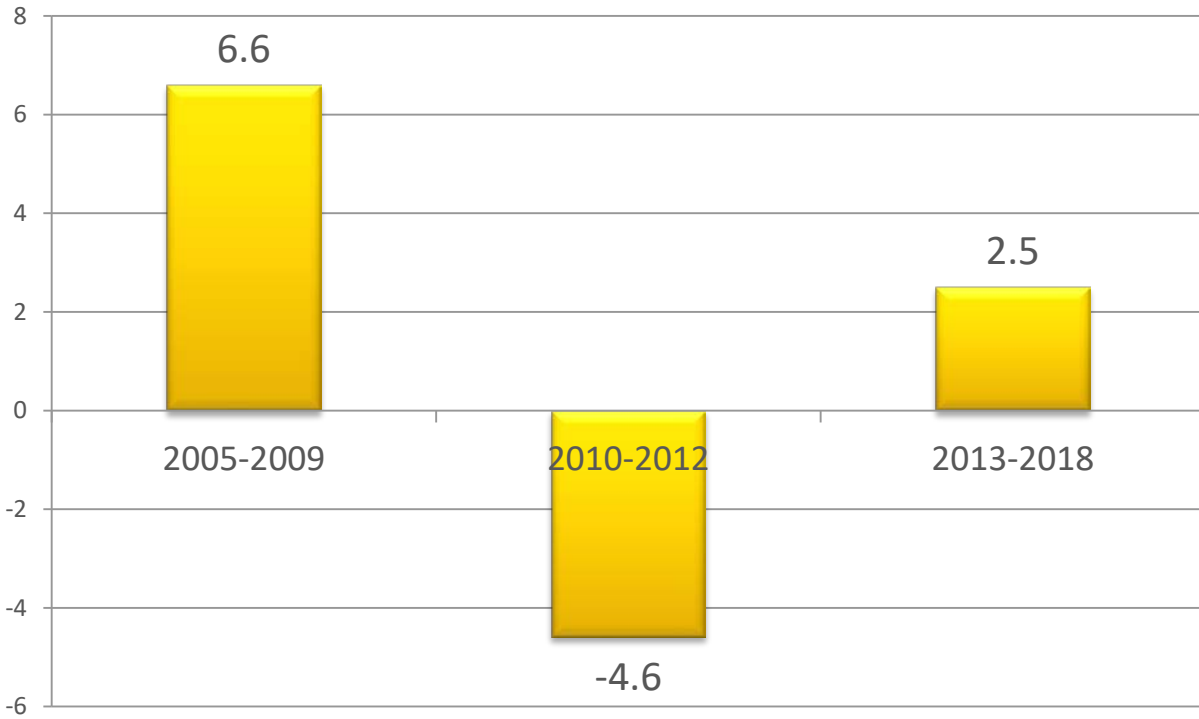
While not delineated as part of the delivery system below, the AHCCCS program is responsible for KidsCare. The Children's Health Insurance Program (CHIP), known as KidsCare in Arizona, offers affordable insurance coverage for low income families. Children under age 19 may qualify for the program if their family's income exceeds the limit allowed for Medicaid eligibility, but is below 200% of the Federal Poverty Level (FPL). In 2016, Governor Ducey signed Senate Bill 1457 into law ending the enrollment freeze on the KidsCare program. Proposed Congressional action will likely result in reduced federal funding for the program starting in Federal Fiscal Year 2020. Under current state law if the federal match drops below 100% AHCCCS must institute a freeze in KidsCare. If the Arizona legislature is interested in a different policy approach that will need to be addressed in the spring of 2019 as part of the FY 2020 budget.



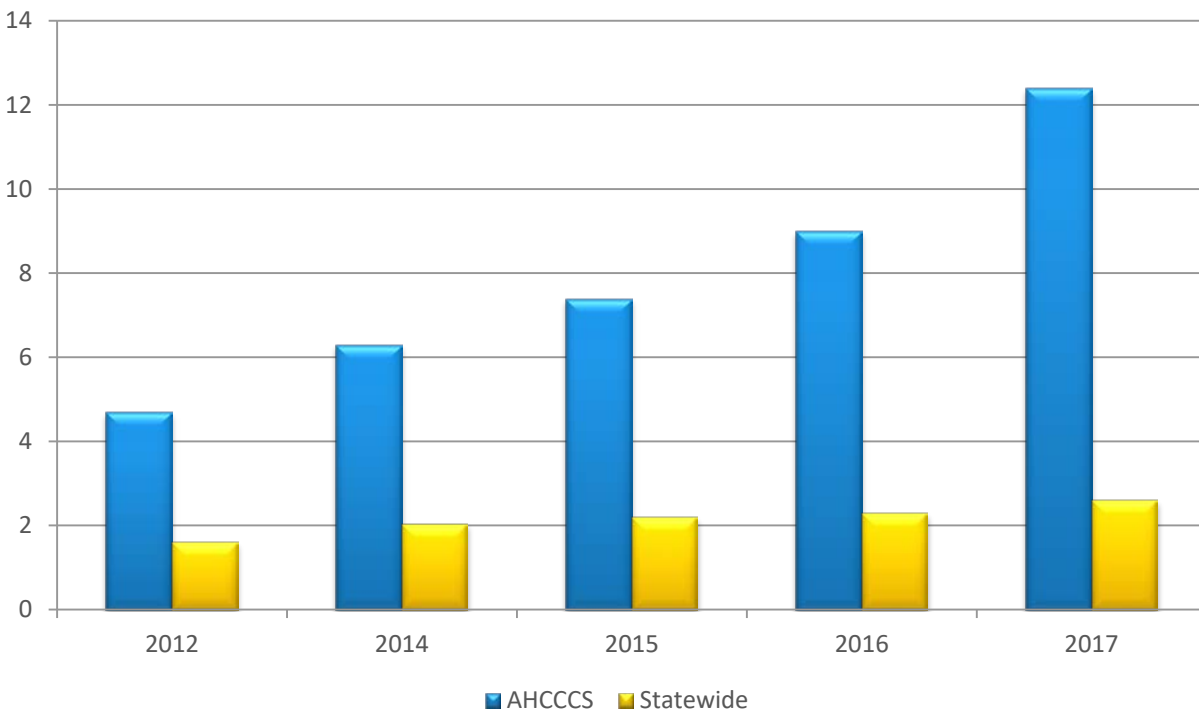
## KEY ACCOMPLISHMENTS

- AHCCCS successfully defended in court the current statutory structure of the Hospital Assessment funding.
- AHCCCS successfully awarded the ALTCS RFP and transitioned over 9,000 members on October 1, 2017.
- The ALTCS program began implementing a new eligibility system in November of 2017.
- The Office of Human Rights eliminated the waitlist for special assistance services and currently provides assistance to the largest number of individuals ever. The Office of Human Rights has 2,504 individuals identified as Special Assistance and provides direct advocacy via assignment to 702 members.
- AHCCCS implemented a new Assessment Policy and streamlined demographic reporting to reduce provider and member administrative burdens.
- AHCCCS received approval from CMS to begin the American Indian Medical Home program and has begun the process of implementation
- AHCCCS received approval for a \$300 million Targeted Investments program, helping facilitate integration at approximately 500 provider sites across the state
- AHCCCS established new VBP Strategies for NFs and providers who utilize E-prescriptions
- AHCCCS completed a rebase of the APR-DRG methodology, better aligning inpatient reimbursement with current data.
- The AHCCCS Leadership Academy was established, providing an opportunity for 30 staff to broaden perspectives of the Agency's mission, explore key issues within health care, better understand the health care delivery system, and build personal networks.
- AHCCCS expanded access to Hepatitis C medication while lowering the overall drug costs.
- AHCCCS implemented several strategies to combat the opioid epidemic including implementing 7 day opioid naïve fills.
- Cross-agency collaboration between AHCCCS, DOC and County justice partners resulted in over six thousand incarcerated individuals becoming eligible for AHCCCS prior to release.
- The number of HIE providers increased from 250 to 350.
- AHCCCS increased the funding for physicians who are affiliated with graduate medical education by \$40 million.
- AHCCCS implemented a new reimbursement methodology for Free-Standing Emergency Departments
- AHCCCS Office of the Inspector General completed a review by CMS and the results were very positive.
- AHCCCS transitioned approximately 130,000 acute members as part of the closure of Phoenix Health Plan and Maricopa Health Plan.
- AHCCCS began registering Board Certified Behavior Analyst (BCBA) providers.
- AHCCCS held 4 quarterly Tribal Consultations which saw the largest turnout in AHCCCS history.
- AHCCCS completed an RFI, held public meetings and released the largest procurement in the history of Arizona for AHCCCS Complete Care.
- AHCCCS participated in the Repeal and Replace discussions and published timely analysis of proposed legislation.
- For Contract Year Ending 2018, the overall weighted average capitation rate increase was 2.9% which continues the overall trend for capitation rate growth of below 3% for the program.
- AHCCCS continued to have overall employee engagement scores that far exceeded the statewide average.

## AHCCCS Cap Rate History



## Employee Engagement



## STRATEGIC GOALS

The next section highlights the four strategic goals for AHCCCS and the comprehensive multi-year strategies which are being implemented in order to achieve these goals.

### ***1. AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.***

One of the biggest challenges facing health care today is that incentives are often not aligned for providers and payers. Even with significant managed care penetration in Arizona Medicaid, many providers were reimbursed through fee-for-service mechanisms that reward volume over value.

Value based purchasing is a critical policy strategy for moving to a financially sustainable healthcare delivery system, which rewards high quality care provided at an affordable cost. There are many value based approaches with varying degrees of breadth and depth within Medicaid, Medicare and commercial coverage. Reforms include outcome based care models, risk bearing models, population based payments and episodic payments that can lead to improved health and overall program savings. Many AHCCCS stakeholders are engaged in developing initiatives and arrangements that embrace the key features of alternative payment models.

AHCCCS remains committed to maximizing the efficiencies within its program as demonstrated by the multi-year contractual requirements for Managed Care contractors. AHCCCS has supported a public-private collaborative market based approach that incentivizes payers and providers to establish new value based arrangements that align incentives to improve efficiency and member outcomes.

Additionally, AHCCCS has pursued adjustments in the fee-for-service payment schedule to incentivize certain value measures for providers. For example, this past year AHCCCS added an adjustment that rewards physicians for their use of e-prescribing technology.

Finally, as part of the efforts to bend the cost curve and ensure overall fiduciary oversight, AHCCCS continues to dedicate significant agency resources to program integrity efforts. The agency develops an annual strategic plan focused entirely on efforts to reduce fraud, waste and abuse along with improving coordination of benefits and other important initiatives.

### ***2. AHCCCS must pursue continuous quality improvement.***

AHCCCS has built its quality structure over time by continual review of applicable national standards and regional trends, collaboration with partners, and its own experiences. The Quality Strategy includes both the Medicaid and CHIP programs and encompasses all AHCCCS contractors. It also incorporates measures to improve the Agency's internal processes involving enrollee information, monitoring, and evaluation.

AHCCCS establishes performance measures based on the CMS Core Measure sets and the National Committee for Quality Assurance (NCQA) HEDIS measures, as well as measures unique to Arizona's Medicaid program. AHCCCS establishes minimum performance standards and goals for each performance measure that are based on national standards, such as the NCQA National Medicaid means, whenever possible. AHCCCS utilizes the Consumer

Assessment of Healthcare Providers and Systems (CAHPS). It is a survey tool created by the Agency for Healthcare Research and Quality (AHRQ) to support and promote the assessment of members' experiences with health care.

AHCCCS Contractors are expected to conduct Performance Improvement Projects (PIPs) in clinical care and non-clinical areas that are anticipated to have a favorable impact on health outcomes and member satisfaction. The health and safety of AHCCCS members receiving covered services remains a focus for the Agency. AHCCCS utilizes a multi-agency and Contractor approach in implementing oversight health and safety requirements.

AHCCCS remains committed to the health and safety of our American Indian members. Case management services are provided as an administrative service through managed care organizations. Many American Indian members receive care through the American Indian Health Program on a fee for service basis rather than through a Managed Care Organization. In order to close this gap and improve health outcomes, AHCCCS is establishing the American Indian Medical Home program to provide care coordination services to members of this population.

AHCCCS has also dedicated significant agency resources to address the ongoing opioid epidemic that has occurred in the United States. In collaboration with the Governor and the Department of Health Services, AHCCCS has pursued a number of strategies to leverage limited grant funding and the Medicaid delivery system to expand capacity to services while at the same time establishing protocols to limit the number of prescriptions to opioid naïve members.

Finally, AHCCCS believes it is important for members to have complete information regarding quality of care when making a decision on which Managed Care Organization to enroll in. It is therefore a priority of AHCCCS to increase the transparency of health plan performance. AHCCCS is actively working to improve and update the health plan scorecard to provide this vital information to members in an easily digestible manner.

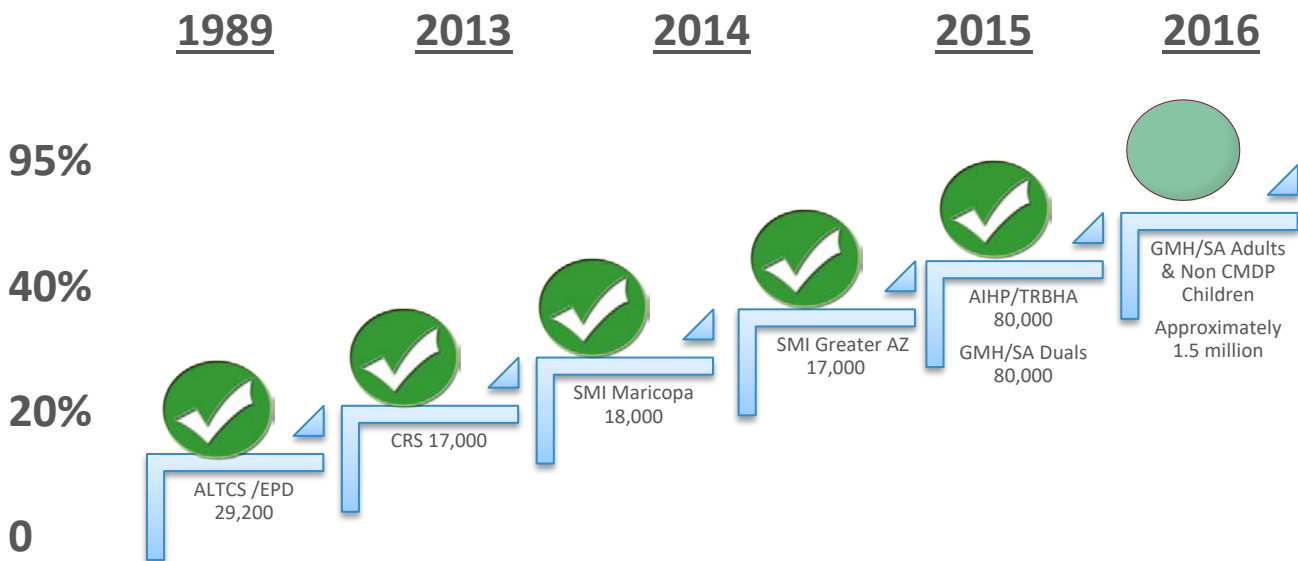
### ***3. AHCCCS must reduce fragmentation driving towards an integrated sustainable healthcare system.***

The definition of a system is “an assemblage or combination of things or parts forming a complex or unitary whole”. Unfortunately, health care delivery has become increasingly fragmented, leading to coordination and communication challenges for patients and clinicians. Ultimately, this fragmentation degrades the quality of health care due to disrupted relationships, poor coordination of care, and communication within and across provider groups. In an effort to address this issue, the structure of the Medicaid delivery system in Arizona is transforming to support an integrated care delivery model with better alignment of incentives that seek to efficiently and effectively improve health outcomes.

AHCCCS has been engaged in a multi-year effort to reduce fragmentation at the provider, payer and policy level for AHCCCS members. Starting in 2013, AHCCCS successfully integrated services for a number of populations. AHCCCS recognizes that system design matters and has worked with a variety of important stakeholders to develop new delivery systems that are focused on whole person health integrating both physical and behavioral health services. These integration efforts include:

1. Children's Rehabilitative Services – Previously 17,000 children with complex medical needs were served by three different payers. These included an acute plan, RBHA and CRS plan. These members are now served by a single Integrated Contractor.

2. Individuals with Serious Mental Illness – In 2014 and 2015, almost 40,000 individuals with Serious Mental Illness went from potentially up to 4 different payers involved in covering select services to a single organization that was responsible for all services for that member.
3. General Mental Health and Substance Abuse services for dual eligible members – In 2015, AHCCCS integrated services for 80,000 dual eligible members.
4. American Indian members –In 2016, as a result of the DBHS merger, AHCCCS was able to streamline the requirements for TRBHA organizations creating an opportunity to integrate services and work more closely with Tribes on the delivery and coordination of services.
5. Dual Eligible members – AHCCCS continues to pursue strategies to better align services for members that are enrolled in both Medicare and Medicaid. In 2016, AHCCCS had approximately 48% of the population aligned which is the highest percentage ever.
6. AHCCCS/DBHS merger – In 2016, AHCCCS completed a merger with the Department of Health Services, Division of Behavioral Health Services. This merger brought behavioral health and physical health together at the policy level and ensured behavioral health and physical health policies and system requirements are established with a focus on whole person health.



Looking ahead the work around transformation through integration and reducing fragmentation will continue. AHCCCS is pursuing strategies to reduce fragmentation as part of the October 1, 2108 AHCCCS Complete Care product implementation. At the contractor level, AHCCCS plans to offer an integrated contract for all AHCCCS members by 2020. AHCCCS will also focus on increasing the number of integrated providers in the system and plans to increase the number of

integrated clinics available to members by 50%. Furthermore, AHCCCS has already invested significant capital in integrating health information across providers. As a result of this strong community support, Arizona now has a fully functioning Health Information Exchange. AHCCCS will now focus on leveraging this system to increase information flow across delivery systems.

Finally, AHCCCS will continue implementing strategies to improve access for individuals transitioning out of the justice system. AHCCCS does not provide health care services for those who are incarcerated. Upon their release, many of these men, women, and children become eligible for AHCCCS. AHCCCS has partnered with the Arizona Department of Corrections, county justice programs and private sector partners to ease this transition. Once enrolled in AHCCCS, these members can receive quality health care in an efficient manner reducing unnecessary emergency department visits and the likelihood for recidivism.

#### ***4. AHCCCS must maintain core organizational capacity and workforce planning that effectively serves AHCCCS operations***

If the agency is going to be successful in pursuing these important delivery system transformations, there are a number of other important infrastructure capabilities that must be addressed over the next several years.

##### *Workforce*

In order for AHCCCS to achieve the established operational and strategic objectives, the organization must have a dedicated, professional staff that is committed to the mission. Based on the most recent state survey AHCCCS had 12.4 staff engaged for every staff member not engaged. This compares to the state government rate of 2.2 to 1.

A few other important metrics include:

1. 97.7% - I respect and value the members of my team and their contributions.
2. 97.3% - I believe in the AHCCCS mission.
3. 94.0% - I recognize fellow employees for work well done.

However, there are challenges to sustaining the high level performance of the AHCCCS workforce. AHCCCS continues to operate with approximately 25% less staff than prior to the start of the Great Recession. Turnover rates are, on the average 15% while approximately 15% of the current AHCCCS workforce is eligible to retire.

AHCCCS is pursuing several strategies to address these challenges.

1. Increasing AHCCCS' presence in the employment marketplace for purposes of enhancing our ability to attract the most qualified applicants;
2. Identifying and implementing relevant compensation strategies;
3. Maintaining an environment conducive to staff engagement;
4. Expanding innovative, low-cost professional development opportunities for existing employees;
5. Retaining critical staff;
6. Workforce and succession planning in order to ensure continuity of services and avoid leaving a significant gap in the Agency's knowledge base; and
7. Continuing to provide flexibility.

Approximately 23% of the AHCCCS workforce is Virtual Office with an even higher percentage on some variation of a flexible work schedule. This type of flexibility has proven essential to retention and assisting employees with striking a work-life balance.

### *Systems*

System resources will continue to be a challenge and maintaining the appropriate infrastructure to manage and analyze the millions of records generated by the AHCCCS system requires appropriate investment. Over the next 3 years AHCCCS will be looking to enhance its quality management, provider registration, and eligibility systems.

### *Security*

The AHCCCS Information Systems Division (ISD) must be ever vigilant regarding the security posture of the systems and important information contained within these systems. Proactive mitigation of security risks strengthens the ability to safeguard and protect Personally Identifiable Information (PII) and Protected Health Information (PHI) data entrusted to the Agency by our more than 1.9 million members. In addition to the AHCCCS mainframe system (PMMIS), ISD will continue to keep non-mainframe systems and applications running consistently and efficiently. This includes server based applications, network infrastructure, the data warehouse, and digital communication.

### *Leveraging Data Analytics*

The availability of reliable and valid information and the capacity to make that information actionable is critical to the decision-making process. Data-driven decision-making is the best way for true reform to occur in the healthcare system. However, determining the most effective way to utilize data, and having the time and resources to effectively review or explore data can produce challenges. As a result, there is an increased value and emphasis being placed on data analytics. The Office of Business Intelligence (OBI) is responsible for the AHCCCS Data Warehouse, which provides the Agency with information that is easily accessible and reliable. The information allows the organization to gain greater insight into its operations. AHCCCS will work with internal and external data analytics experts to develop the organization's capacity as a whole to turn solid information into effective actions.

### *Arizona Management System*

Governor Ducey has deployed a professional, results-driven management system to transform the way agencies think and do business. AHCCCS has fully embraced this system and is committed to tracking and improving performance every day. Across the agency AHCCCS employees now meet regularly around huddle boards where staff can monitor performance and hold themselves accountable for results. The agency will continue to gather data and work toward delivering results for the people of Arizona.

## STRATEGIC GOALS, STRATEGIES, & PERFORMANCE MEASURES

### **GOAL 1.**

**AHCCCS must pursue and implement long term strategies that bend the cost curve while improving member health outcomes.**

#### STRATEGY 1.1

Increase use of alternative payment models and AHCCCS fee schedule differentiation for all lines of business

##### PERFORMANCE MEASURE 1.1.1

47% of Health Plan spend in alternative payment models by 10/1/18

##### PERFORMANCE MEASURE 1.1.2

Payment on value available for 50% of FFS spend exclusive of IHS/638 reimbursement

#### STRATEGY 1.2

Reduce administrative burden on providers while expanding access to care

##### PERFORMANCE MEASURE 1.2.1

Implement three ICD strategies in 2018 to reduce administrative burden on providers

#### STRATEGY 1.3

Successfully implement Program Integrity strategies

##### PERFORMANCE MEASURE 1.3.1

Percent of overall strategies implemented

#### STRATEGY 1.4

Modernize 1115 Waiver to provide new flexibilities to State

##### PERFORMANCE MEASURE 1.4.1

Implement IMD Substance Use Disorder Waiver by 4/1/18

### **GOAL 2.**

**AHCCCS must pursue continuous quality improvement**

#### STRATEGY 2.1

Achieve and maintain improvements on quality performance measures

##### PERFORMANCE MEASURE 2.1.1

Percent of measures which exceed the NCQA mean

#### STRATEGY 2.2

Leverage American Indian care coordination initiative to improve health outcomes

##### PERFORMANCE MEASURE 2.2.1

Number of facilities achieving medical home status



STRATEGY 2.3

Develop comprehensive strategies to curb opioid abuse and dependency

PERFORMANCE MEASURE 2.3.1

Overall number of prescribed opioids

**GOAL 3.**

**AHCCCS must reduce fragmentation driving towards an integrated sustainable healthcare system**

STRATEGY 3.1

Establish system of integrated plans and support provider integration to better serve all AHCCCS members

PERFORMANCE MEASURE 3.1.1

Implement AHCCCS Complete Care Contracts for 10-1-18

PERFORMANCE MEASURE 3.1.2

Increase dual members aligned

PERFORMANCE MEASURE 3.1.3

Retain 95% of TI participants and make year 2 payments by Jan 2019

STRATEGY 3.2

Leverage integrated Health Information Exchange to improve outcomes and reduce costs

PERFORMANCE MEASURE 3.2.1

Number of provider organizations participating in the HIE

STRATEGY 3.3

Improve access for individuals transitioning out of the justice system

PERFORMANCE MEASURE 3.3.1

Establish 2 clinics inside probation and parole offices by 10/1/18

PERFORMANCE MEASURE 3.3.2

Increase percentage of eligible individuals who receive AHCCCS enrollment within 72 hours of release

**GOAL 4.**

**AHCCCS must maintain core organizational capacity, infrastructure and workforce planning that effectively serves AHCCCS operations**

STRATEGY 4.1

Promote activities that support employee engagement and retention

PERFORMANCE MEASURE 4.1.1

AHCCCS Overall Employee Engagement Score

**STRATEGY 4.2**

Strengthen system-wide security and compliance with privacy regulations

**PERFORMANCE MEASURE 4.2.1**

ADOA evaluation score – maintain 700 ranking

**STRATEGY 4.3**

Continue implementation of the Arizona Management System

**PERFORMANCE MEASURE 4.3.1**

Improved employee recognition around importance of AMS