

# Welcome to AHCCCS Hot Topics

**While you are waiting TEST YOUR AUDIO.  
LISTEN FOR MUSIC.**

**You were automatically muted upon entry.**

**Please only join by phone or computer.**

**Please use the chat feature for questions or  
raise your hand.**

**Thank you.**



# National 24-Hour Crisis Hotlines

## Phone

- 988 Suicide & Crisis Lifeline: **988**
- National Substance Use and Disorder Issues Referral and Treatment Hotline: **1-800-662-HELP (4357)**

## Text

- Send a Text to **988**
- Text the word "HOME" to **741741**

## Chat

- **988 Lifeline Chat**

## Videophone

- Select **Deaf/HoH** on the 988 Lifeline web page to connect with a 988 Lifeline counselor



# Statewide Arizona Crisis Hotline



**Call: 1-844-534-HOPE (4673) or**

**Text: 4HOPE (44673)**

**Chat: [Solaris Crisis Response Network](#)**

# Arizona Crisis Hotlines by County

## Local Suicide and Crisis Hotlines by County Phone

Maricopa, Pinal, Gila Counties served by Mercy Care: **1-800-631-1314** or **602-222-9444**

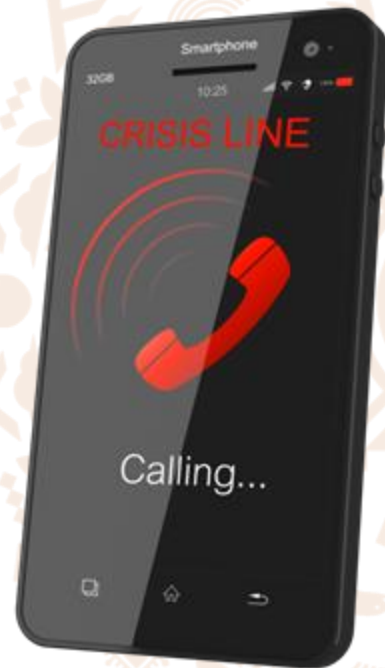
Cochise, Graham, Greenlee, La Paz, Pima, Santa Cruz and Yuma Counties served by Arizona Complete Health: **1-866-495-6735**

Apache, Coconino, Mohave, Navajo and Yavapai Counties served by Care1st: **1-877-756-4090**

Gila River and Ak-Chin Indian Communities: **1-800-259-3449**

## Especially for Teens

Teen Lifeline phone or text: **602-248-TEEN (8336)**



# How to access the crisis line in your area

## Statewide:

Call: 1-844-534-HOPE (4673), Text: 4HOPE (44673) or  
Chat: [Solaris Crisis Response Network](#)

## North GSA

- Counties: Coconino, Mohave, Navajo, Yavapai:  
Health Choice Arizona: 1-877-756-4090

## Central GSA

- Maricopa County, Pinal, Gila: Mercy Care 1-800-631-1314

## South GSA

- Counties: Apache, Cochise, Graham, Greenlee, La Paz County, Pima, Santa Cruz, Yuma:  
Arizona Complete Health - Complete Care Plan 1-866-495-6735

## Tribal

- Ak-Chin Indian Indian Community:  
1-800-259-3449
- Gila River Indian Community:  
1-800-259-3449
- Salt River Pima Maricopa Indian Community:  
480-850-9230
- Tohono O'odham Nation:  
1-844-423-8759

# OARLine

A screenshot of the OARLine website banner. The top navigation bar is blue with white text for 'HOME', 'PATIENT', 'PROVIDER', and 'ABOUT'. The main banner features a woman on the right talking on a mobile phone. On the left, the text reads: 'Need Help With Opioids? We Are Always Here. Free, confidential hotline: 1-888-688-4222'. The OARLine logo is in the top left corner.

**Need Help With Opioids?  
We Are Always Here.**

Free, confidential hotline:  
1-888-688-4222

[www.azdhs.gov/oarline](http://www.azdhs.gov/oarline)

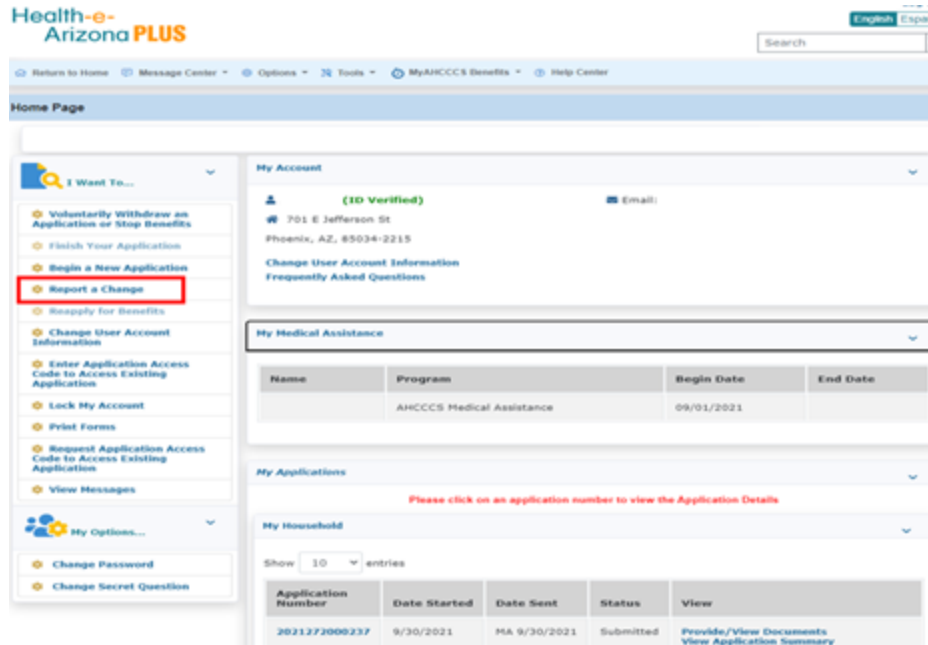
**Email:**

[AzOarline@gmail.com](mailto:AzOarline@gmail.com)



# Members: Make Sure Your Contact Info Is Current In Health-e-Arizona PLUS

Need to report a change?



The screenshot shows the Health-e-Arizona PLUS website interface. The left sidebar contains a list of options under 'I Want To...'. The option 'Report a Change' is highlighted with a red box. Other options include 'Voluntarily Withdraw an Application or Stop Benefits', 'Finish Your Application', 'Begin a New Application', 'Reapply for Benefits', 'Change User Account Information', 'Enter Application Access Code to Access Existing Application', 'Lock My Account', 'Print Forms', 'Request Application Access Code to Access Existing Application', 'View Messages', 'My Options...', 'Change Password', and 'Change Secret Question'. The main content area shows 'My Account' information, including a verified ID, address (701 E Jefferson St, Phoenix, AZ, 85034-2215), and links to 'Change User Account Information' and 'Frequently Asked Questions'. Below this is a table for 'My Medical Assistance' with columns for Name, Program, Begin Date, and End Date. The table shows one entry: AHCCCS Medical Assistance, beginning on 09/01/2021. There is also a section for 'My Applications' with a table showing application details.

| Name | Program                   | Begin Date | End Date |
|------|---------------------------|------------|----------|
|      | AHCCCS Medical Assistance | 09/01/2021 |          |

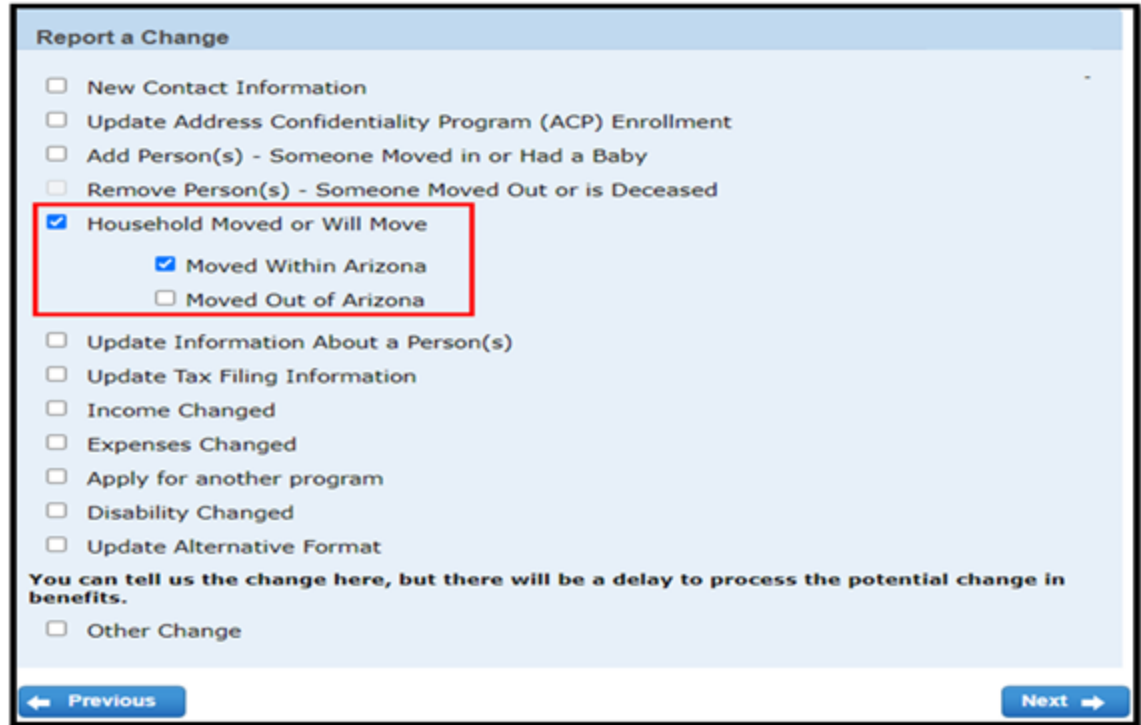
| Application Number | Date Started | Date Sent    | Status    | View   |
|--------------------|--------------|--------------|-----------|--|
| 2021272000237      | 9/30/2021    | MA 9/30/2021 | Submitted | Provide/View Documents<br>View Application Summary |



Log in or create an account today at  
[www.healthearizonaplus.gov](http://www.healthearizonaplus.gov)

# Health-e-Arizona PLUS Address Changes

Address changes can be reported online using Health-e-Arizona PLUS.



**Report a Change**

- ☐ New Contact Information
- ☐ Update Address Confidentiality Program (ACP) Enrollment
- ☐ Add Person(s) - Someone Moved in or Had a Baby
- ☐ Remove Person(s) - Someone Moved Out or is Deceased
- ☒ **Household Moved or Will Move**
  - ☒ Moved Within Arizona
  - ☐ Moved Out of Arizona
- ☐ Update Information About a Person(s)
- ☐ Update Tax Filing Information
- ☐ Income Changed
- ☐ Expenses Changed
- ☐ Apply for another program
- ☐ Disability Changed
- ☐ Update Alternative Format

**You can tell us the change here, but there will be a delay to process the potential change in benefits.**

- ☐ Other Change

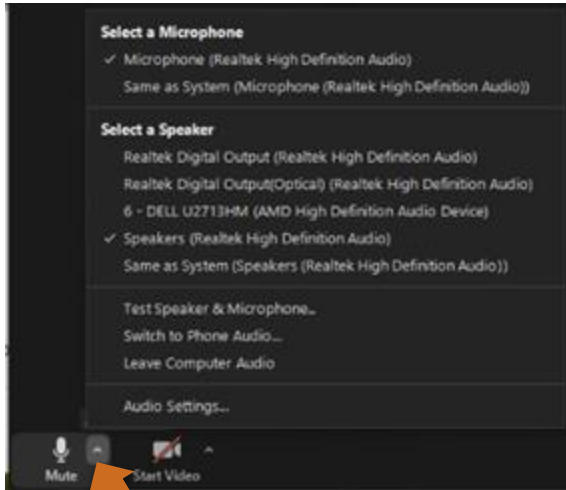
[< Previous](#) [Next >](#)



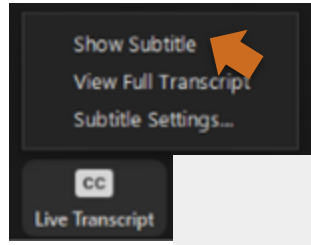
# Zoom Webinar Controls

Navigating your bar on the bottom...

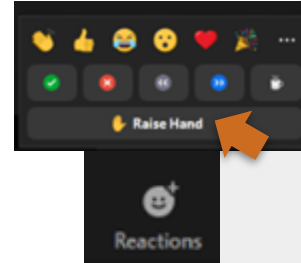
Audio Settings



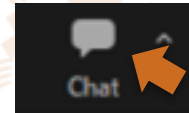
Turn on Closed Captioning



Raise Hand



Chat



## KEYBOARD SHORTCUTS TO RAISE HAND

**Windows:** Alt+Y to raise or lower your hand

**Mac:** Option+Y to raise or lower your hand

# Webinar Tips



**Mute your mic when you aren't speaking.**



**Limit background noise and distractions.**



**Use chat feature (or Q&A when available) to ask questions or share resources.**

# This Meeting Is Being Recorded

The recording shall be the sole property of AHCCCS and participation in this meeting indicates your waiver of any and all rights of publicity and privacy.

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# **ARIZONA**

## **HEALTH CARE COST CONTAINMENT SYSTEM**

### **AHCCCS Hot Topics Arizona's 2026 Olmstead Plan**

December 15, 2025



# Welcome & Introductions

# Today's Agenda

- Welcome & Introductions
- Review & Discuss Completed Objectives & Proposed Modifications to Objectives
- Streamlining the Olmstead Plan, Olmstead Website, & Cadence
- Open Discussion for Identifying Gaps, Asking Questions & Providing Comments
- Summary & Next Steps

# Summary of *Olmstead v. L.C.*

- The *Olmstead* case began with two women, Lois Curtis (L.C) and Elaine Wilson who both had diagnoses of intellectual disabilities and mental health conditions.
  - They were voluntarily admitted to a psychiatric unit in the State-run Georgia Regional Hospital
- Following their medical treatment, mental health professionals confirmed they were ready to be discharged and could move to a community-based program.
- However, both remained confined in the institution for several years after their treatment concluded.
- Both filed suit under the Americans with Disabilities Act (ADA) for release from the hospital, resulting in *Olmstead v. L.C.*



# Summary of Olmstead v. L.C.

- The ruling required states to provide community-based services for individuals with disabilities who would otherwise be entitled to institutional services when:
  - The state's treatment professionals determine that such placement is appropriate
  - The individual is in agreement with the decision
  - The placement can be recommended, taking into account the resources available to the state and the needs of others who are receiving State-supported disabilities services
- The Court did not require states to develop a plan, but Arizona chose to.
- Populations that benefit from the Olmstead Plan are individuals who may be at risk of institutionalization, including individuals with behavioral health needs and members of the ALTCS program, including Tribal ALTCS programs.



# Arizona's Olmstead Plan Areas of Focus

- **Strategy #1:** Increase Permanent Supportive Housing (PSH) for Members to Successfully Reside in the Community
- **Strategy #2:** Increase Reach-in Discharge Planning for Hospital Settings
- **Strategy #3:** Improve Reach-in Discharge Planning for the Justice System
- **Strategy #4:** Explore Expansion of Home and Community-Based Services (HCBS) for Aging Individuals with Serious Mental Illness (SMI) Determinations
- **Strategy #5:** Implement Workforce Development Initiatives
- **Strategy #6:** Maintain a High-Quality Network to Ensure Members are Served in the Most Effective and Least Restrictive Manner
- **Strategy #7:** Enhance Person-centered Planning
- **Strategy #8:** Utilize Aggregated Population Data

# Strategy 1 - Increase Permanent Supportive Housing (PSH) for Members to Successfully Reside in the Community

## Completed Objectives

- **Objective 1B:** Modify the AHCCCS Contractor Operations Manual (ACOM) Housing policy ([ACOM 448](#)) to clearly outline how Medicaid services may be used to help members obtain and maintain housing.
- **Objective 1C:** Establish baseline data on current utilization of existing housing support and wrap-around services to determine how services are being utilized to meet members' housing needs and to strategize opportunities for improvement.
- **Objective 2B:** Use covered Medicaid housing support services and partner with housing providers (e.g., Public Housing Authorities, 811 Project Rental Assistance, etc.) to expand permanent, community-based housing options.
- **Objectives 3A, 3B, & 3C:** Increase speed with which appropriate housing options can be identified and provided.

# Strategy 1 - Increase Permanent Supportive Housing (PSH) for Members to Successfully Reside in the Community

## Changes to Objectives

### Objective 1A:

- AHCCCS will continue refining Medical Policy Manual Policy 570 to clearly define provider responsibilities for case management.
- Ongoing monitoring will ensure the revised policy is implemented effectively and that all deliverables are met.

**Objective 2B:** Recent federal changes have significantly impacted state strategies to expand housing resources for AHCCCS members. HUD's rescinded NOFO, which proposed major reductions in PSH funding (over \$30M), is now in litigation, and AHCCCS is monitoring the outcome to guide future planning.

# Strategy 2 - Increase Reach-in Discharge Planning for Hospital Settings

## Completed Objectives

- **Objective 1B:** Evaluate the use of the *Level of Care Utilization System* (LOCUS) standardized assessment tool by the Provider network to connect members to the most appropriate and least restrictive services and level of care across all MCOs.
- **Objective 2:** Monitor use of CommunityCares for providers that are participating in the CYE 2024-2025 CLRS Differential Adjusted Payment (DAP) Program and referring members to community resources.

## Changes to Objectives

- Objective 1A completed for broad provider utilization. Therefore, *Child and Adolescent Level of Care Utilization System* (CALOCUS) to monitor number of assessments completed for youth.
- Objective 2.2 was completed, so a new metric will be added to report the number of hospitals onboarded and using the Statewide Closed-Loop Referral System, to screen and refer members to services for Health-Related Social Needs (HRSN).

# Strategy 3 - Improve Reach-in Discharge Planning for the Justice System

## Completed Objectives

- **Objective 5:** Explore the use of CommunityCares, the statewide Closed-Loop Referral System (CLRS), in the justice system to increase member access to community resources addressing health-related social needs.

## Changes to Objectives

- **Objective 1:** AHCCCS is outreaching all county carceral settings without existing data sharing agreements. The prioritization related to population density has been removed as this is a statewide priority.

# Strategy 3 - Improve Reach-in Discharge Planning for the Justice System

## Changes to Objectives (Continued)

- **Objective 4B:** AHCCCS will analyze utilization trends for ED services, Crisis Utilization, inpatient admissions, recidivism, and housing insecurity for members released from incarceration. Improve data collection and establish baseline metrics to track progress. **Objectives 4C and 4D** will be captured in this objective's data and performance targets.
- **Objective 4E:** Revised to capture members with an SMI designation experiencing a form of housing insecurity or homelessness after release.
- **Objective 5:** Revised to prioritize CAA and reentry carceral setting evaluation and preparation for implementation that will allow for pre-release services.

# Strategy 4 - Explore Expansion of Home and Community-Based Services (HCBS) for Aging Individuals with Serious Mental Illness (SMI) Designations

## Objectives

- **Objectives 1A, 1B, & 1C:** Explore options to provide medically necessary HCBS to the aging SMI population who do not meet institutional level of care criteria to become eligible for the Arizona Long Term Care System (ALTCS).
  - We continue to educate ourselves on what other states are doing
  - We provide education and technical insights for any proposed legislation by stakeholders
  - The direction we receive from our leadership or the legislature will prioritize what data is used to inform decision making

## Strategy 5 - Implement Workforce Development (WFD) Initiatives

### Completed Objectives

- **Objectives 1A, 1B, & 1C:** Improve hiring and retention of Direct Care Workers (DCWs) and behavioral health technician (BHT)/behavioral health paraprofessional (BHPP) staff.
- **Objective 2:** Personnel, employed by ACC, ACC-RBHA, CHP, DES/DDD, and ALTCS- EPD providers, who are responsible for ensuring that members transition from one system to the other (e.g., ACC-RBHA to ALTCS) will be both knowledgeable and skilled in referring, planning, and linking members to the appropriate systems and assuring the transition is a successful and satisfying experience for both the members and their families.



# Strategy 5 - Implement Workforce Development (WFD) Initiatives

## New Objectives

Increase the effective use of Workforce Development and Management tools and initiatives (developed during the American Rescue Plan Act)

- MCO data from providers and Electronic Visit Verification data to address workforce challenges and inform workforce planning
- Build upon the growing number of high school career and technical education programs to help address direct care worker needs
- Build upon the community college relationships & programs, specifically around behavioral health certificate programs to address workforce demands
- Expand use of the AZ HealthCare Career Hub – Pipeline Connects amongst providers
- Use the AZ Healthcare Workforce Action Network to develop and mobilize resources to address workforce challenges.

## Strategy 6 - Maintain a High-Quality Network to Ensure Members are Served in the Most Effective and Least Restrictive Manner

### Completed Objectives

- **Objectives 3A, 3B, 3C, & 3D:** Increase provider network capability for serving members with co-occurring developmental disabilities and behavioral health needs and children/adolescents with behavioral health needs.

### Changes to Objectives

- Strategy 6 Objective 2 will be impacted by CMS Appointment Standards changing effective 10/1/2026. More information will be shared as policies are developed.

# Strategy 7 - Enhance Person-Centered Planning

## Continuing Objective

- **Objective 1:** Implement performance measurements and targets for Arizona Long Term Care System (ALTCS) Managed Care Organizations' (MCOs), including Tribal ALTCS Programs, case management chart audits for more frequent performance monitoring and to ensure MCO compliance with the federally mandated Person-Centered Service Plan (PCSP) process and requirements.

# Strategy 7 - Enhance Person-Centered Planning

## Changes to Objectives

- **Objective 2: Increase the utilization of Supplemental Security Income/Social Security Disability Insurance Outreach, Access, and Recovery (SOAR) services provided to eligible members.**
  - Remove Objective 2 from the plan.
  - Cuts to SAMHSA have affected SOAR, as the SOAR Technical Assistance Center closed on 8/18/2025. This is where folks received the online training to become SOAR-certified to be able to submit SOAR applications with members.

# Strategy 8 - Utilize Aggregated Population Data to Improve Member Care

## Objectives

- **Objective 1A & 1B:** Provide and publicly post systemic level reports of member utilization data of services on the continuum of home/community-based, residential, and institutional services to inform Olmstead Planning.
- **Changes to Objectives**
  - No changes to objectives
  - A data request has been drafted
  - Next step is to meet with the data analytics team to finalize and development timeline for reporting

# Proposals for Streamlining

- Proposal to move the historical information in the plan to the Olmstead website to make the plan more manageable
  - We will maintain an introduction section on the plan, but move ~10 pages of historical information to the [AHCCCS Olmstead website](#)
- Proposal to change cadence in updating the plan from every 3 months to every 6 months because:
  - Several objectives do not have data available every 3 months
  - All other states with an Olmstead Plan only update their plan annually



# Open Discussion

Are there any gaps?

All questions and  
comments are welcome.

# Today's Summary

- We discussed moving the introductory sections from the plan to the website to make the plan more manageable
- We proposed a new cadence for updating the plan to align with the cadence of other states
- We reviewed the completed objectives on the plan
- We discussed the proposed changes for the 2026 plan



# Next Steps

- Based on today's meeting we will be updating the Olmstead website and the 2026 Olmstead Plan with the improvements discussed
- AHCCCS will update the plan every 6 months
- AHCCCS will hold a public forum for feedback whenever there will be proposed substantive changes to the plan
- AHCCCS will continue to hold a public forum at least annually
- AHCCCS will continue making progress on the strategies and objectives outlined on the plan

For more information on Arizona's Olmstead Plan,  
links, resources, or to sign up for email updates, please  
visit:

[az.ahcccs.gov/Olmstead](https://az.ahcccs.gov/Olmstead)

Feedback on the plan is always welcome and can be  
emailed to: [Olmstead@azahcccs.gov](mailto:Olmstead@azahcccs.gov)



# Thank you for joining us today



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**AHCCCS Highlights Accomplishments, Changes in 2023**

CONTACT: info@azhcccs.gov  
FOR IMMEDIATE RELEASE  
January 10, 2024

PHOENIX – One year ago, Cabinet Executive Officer Carmen Meredía took the helm of the Arizona Health Care Cost Containment System (AHCCCS), Arizona's Medicaid agency, and guided the agency through an extraordinary year of accomplishments and change.

"In 2023, AHCCCS faced challenges head-on, made significant progress, and achieved remarkable milestones because of our employees' unwavering dedication to the members we serve," Meredía said. "Our accomplishments stand as a testament to our adaptability, innovation, and unyielding resolve in the face of turbulent times."

Some of those successes and operational enhancements are highlighted below; see the full list in the 2023 Year in Review document.

[Read more...](#)

**1.4 Million Arizonans Have Maintained Medicaid Coverage Since Renewals Began Last April**

CONTACT: info@azhcccs.gov  
FOR IMMEDIATE RELEASE  
January 10, 2024

PHOENIX – Since the Arizona Health Care Cost Containment System (AHCCCS) returned to the regular Medicaid renewal process last April, 1.4 million Arizonans have maintained coverage and 18% or 657,753 have been discontinued.

## [AHCCCS News and Updates](#)

[azahcccs.gov/shared/news.html](https://azahcccs.gov/shared/news.html)

**AHCCCS Tribal Relations** [Subscribe to AHCCCS Tribal Relations Updates](#)

The mission of the Arizona Health Care Cost Containment System (AHCCCS) is to provide comprehensive, quality care to those in need. AHCCCS and Tribal Nations in the State of Arizona share the common goal of decreasing health disparities and maximizing access to critical health services.

**Tribal Consultation**

AHCCCS is committed to engaging in open, continuous, and meaningful consultation on a government-to-government basis. The AHCCCS Tribal Consultation Policy, which is pending technical changes and Tribal Consultation guides the agency's work and interaction with the Tribal Nations of Arizona.

Learn more about Tribal Consultation at AHCCCS.

**Tribal Relations at AHCCCS**

The Tribal Liaison serves as a point of contact for information and issues concerning health care policies that affect American Indian AHCCCS members. The role of the Tribal Liaison is to work across sectors to help improve the quality and accessibility of health care for American Indian AHCCCS members.

At AHCCCS, the Tribal Liaison is housed in the Division of Community Advocacy and Intergovernmental Relations and serves as the link between AHCCCS staff and the 22 Tribes in Arizona, three Indian Health Service (IHS) areas, urban Indian health programs, and tribal community members and stakeholders.

Christine Holden currently serves as the AHCCCS Tribal Liaison and she can be contacted at christine.holden@azhcccs.gov or at triballiaison@azhcccs.gov.

## [Tribal Relations Updates](#)

[azahcccs.gov/AmericanIndians/  
TribalRelations/](https://azahcccs.gov/AmericanIndians/TribalRelations/)

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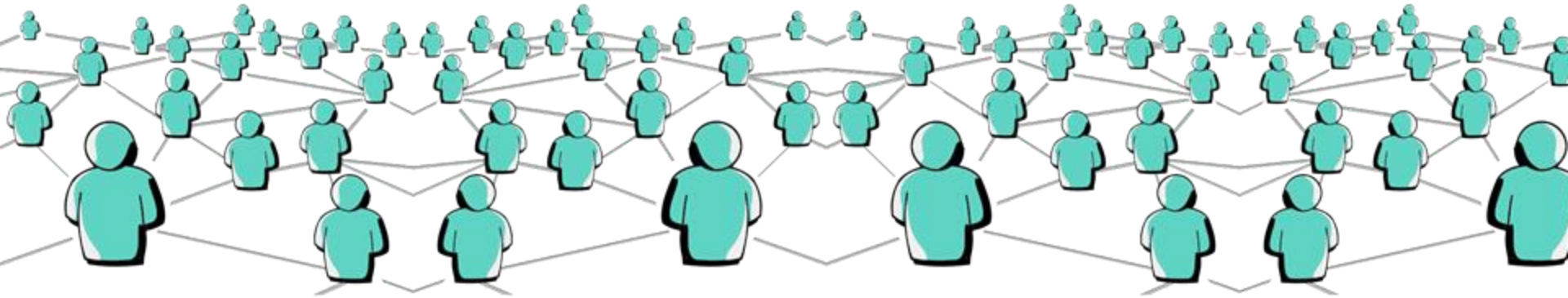
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[@AHCCCS](https://www.linkedin.com/company/AHCCCS)

[AHCCCSgov](https://www.youtube.com/AHCCCSgov)



# Learn about AHCCCS' Medicaid Program on YouTube!



Watch our Playlist:

[Meet Arizona's Innovative Medicaid Program](#)

# Other Resources - Quick Links

- AHCCCS [Waiver](#)
- AHCCCS [State Plan](#)
- AHCCCS [Grants](#)
- AHCCCS [Whole Person Care Initiative \(WPCI\)](#)
- AHCCCS [Office of Human Rights](#)
- AHCCCS [Office of Individual and Family Affairs](#)



*Please take the survey  
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