

## 1115 Demonstration Waiver

Performance Measures Evaluation Survey Results

## Background

- 2012 Demonstration Waiver approved by CMS to provide payments to IHS and 638 health facilities for uncompensated care costs for reduction of AHCCCS services for Medicaid eligible individuals and individuals whose income is at or below 100% FPL.
- IHS and 638 Facilities selected one of 2 payment structures:
  - Option 1-Encounter Based Approach
  - Option 2-Historical Data Approach
- Waiver ended December 31, 2013.
- In 2013 a 1-year extension submitted and approved by CMS. Extension will end December 31, 2014.



## 2012-2013 Waiver Payments

2012-2013 Payments to IHS and 638 facilities:

Option 1: \$115,852,075.00Option 2: \$49,840,744.01



### 2014 Payments To-Date

#### • 2014 Extension Payments June report:

#### •Option 2: \$5,402,798.10



#### CMS Performance Measures Evaluation Design

The draft design shall discuss the outcome measures that must be used in evaluating the impact of the demonstration during the period of approval. It shall discuss the data sources and sampling methodology for assessing these outcomes



## **CMS Evaluation Requirements**

- "Arizona must conduct an independent evaluation of the uncompensated payments to IHS and 638 facilities. The evaluation must be submitted to CMS by June 30, 2014 and test the following specific hypotheses related to the uncompensated care payments.
  - What is the effect on service utilization as a result of the uncompensated care payments broken down by type of service as well as the population served?
  - Are the affected facilities able to maintain and/or increase their current staffing levels?"



## Survey Results

- IHS Area Facilities:
  - **Tucson:** Four (4) of four (4) facilities responded.
  - **Phoenix:** Nine (9) of Eleven (11) facilities responded.
  - Navajo: Two (2) of Sixteen (16) facilities responded.
- <u>638 Facilities</u>: Eight (8) of Fifteen (15) facilities responded (15 facilities receive 2014 Waiver Expansion Payments).
- Total Submissions: 22



- Q#1: What percentage of your overall budget do Medicaid payments represent?
  - Average Percentage = 43.14%
- Q#2: Have these supplemental payments allowed you to either maintain or increase your staffing (e.g., were you able to keep podiatrists on staff or increase number of PCP's or Nurse Practitioners)?
  - 16 facilities were able to maintain or increase staff
  - 6 facilities stated no impact to staffing



- Q#3: What service reductions were you prepared to make at your facility due to recent AHCCCS benefit reductions?
  - 4-Facilities were prepared to reduce Podiatry services
  - 4-Facilities were prepared to reduce Emergency Dental services
  - 2-Facilities were prepared to reduce Diabetes clinics
  - 2-Facilities were prepared to reduce DME, Orthotics, Prosthetics
  - 1-Facility was prepared to reduce Direct Care Service
  - 1-Facility was prepared to reduce Transportation Services
  - 1-Facility was prepared to decrease amount of department expenses
  - 1-Clinic closure
  - 6-Facilities stated no reductions considered



- Q#4: How have these supplemental payments allowed you to either maintain or increase your service levels or types (e.g., are you able to continue to offer adult dental services or podiatry)?
  - 21-Facilities were able to maintain service levels or types.
  - 2-Facilites were able to increase service levels or types.



• Q#5: Have you been able to maintain or expand your hours of operation at your facility as a result of these supplemental payments? If yes, please explain.

20-Facilites were able to maintain hours of operation

2-Facilities was able to increase hours of operation



## **CMS Evaluation Report**

 A draft CMS Performance Measures Evaluation report will be distributed to the AHCCCS Tribal Relations listserv requesting feedback.



### Letters of Support

• Send letters of support to:

Wakina Scott, PhD Division of State Demonstrations and Waivers Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-01-16 Baltimore, MD 21244

(A sample letter will be provided)



## **Questions?**





## Thank You



