

AHCCCS Update Tribal Consultation

July 26, 2018

AHCCCS Update

- ACC Update
- AIMH Update
- Waiver Update
- SMI Determination Vendor
- Other Issues



AHCCCS Complete Care (ACC)

who?

where?

What, Who and When?

what?



when?

Tribal Members

- Retain choice of ACC plan or fee for service (AIHP)
- AI members enrolled in AIHP/FFS can seek services from any AHCCCS registered provider at anytime if the provider accepts FFS; services are **not limited** to IHS/638 providers for AIHP enrolled members
- AI members enrolled in a managed care plan <u>can</u> access services from an IHS/638 facility at anytime; services are <u>not</u> <u>limited</u> to providers outside of IHS/638 facilities
- ACC does not impact
 - 1. ALTCS members
 - 2. Individuals with SMI



Who Is Affected and When? Starting on October 1, 2018!

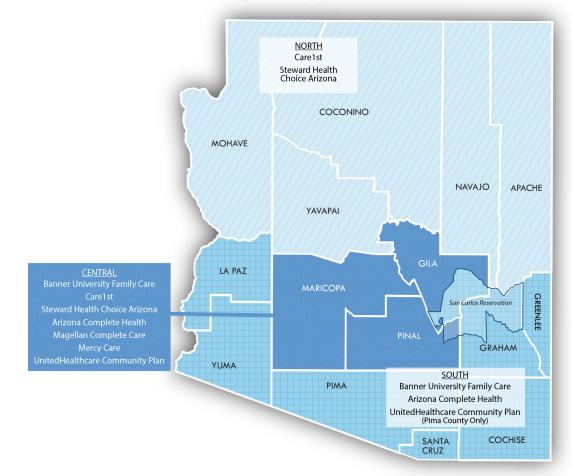
- Affects most adults and children on AHCCCS through integration and choice
- Members enrolled in Children's Rehabilitative Services (CRS)

It does not affect:

- Members on ALTCS (EPD and DES/DD);
- Adult members with a serious mental illness (SMI); and
- Most CMDP



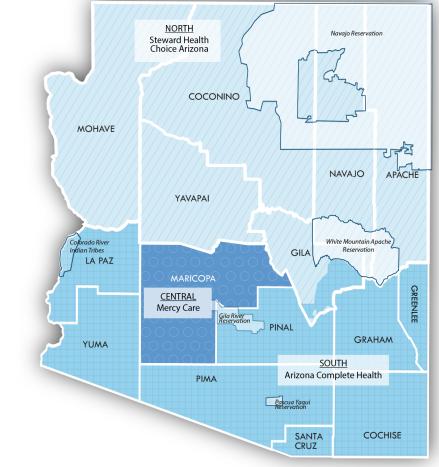
ACC Plan Geographic Service Areas





Note: Zip codes 85542, 85192, 85550 representing San Carlos Tribal area are included in the South GSA.

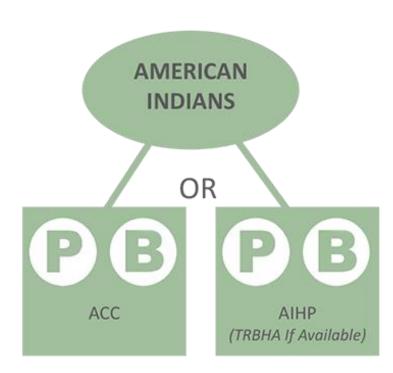
RBHA/TRBHA and Crisis Services

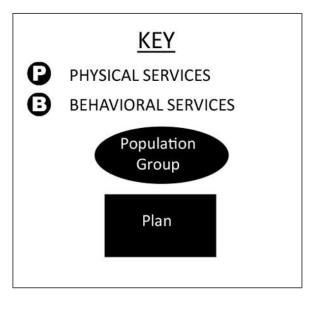


AHCCCS Arizona Health Care Cost Containment System

Note: Zip codes 85542, 85192, 85550 representing San Carlos Tribal area are included in the South GSA. The Crisis system responsibilities will remain with the RBHA (in their respective GSA areas)

Members who are American Indians





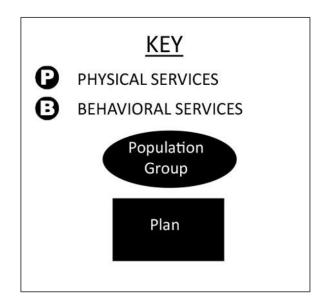


Members who are American Indians with SMI determination

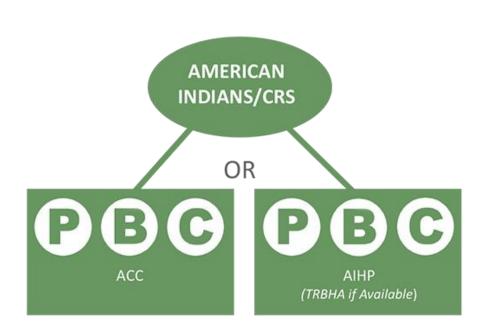
AMERICAN INDIANS/SMI OR OR BHA AIHP or ACC RBHA

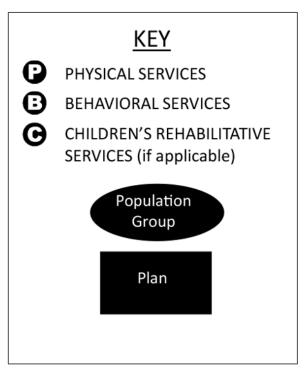
*No change to behavioral health care options. New ACC plans may provide additional acute care options.





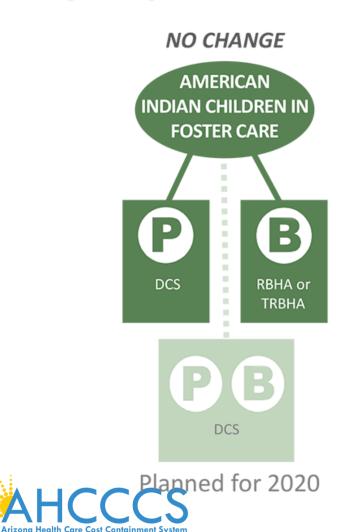
Members who are American Indians with CRS conditions

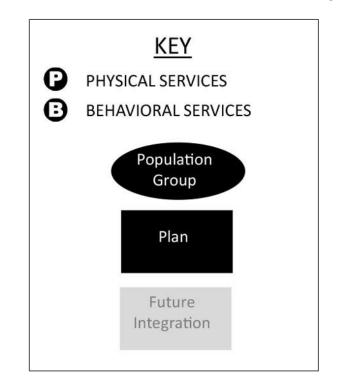






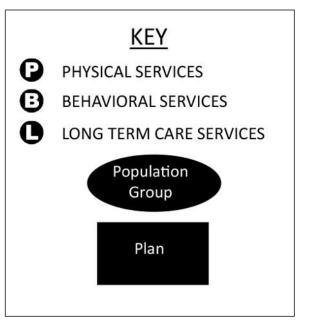
Members who are American Indian Children in (State) Foster Care





Members who are American Indians with a Developmental Disability

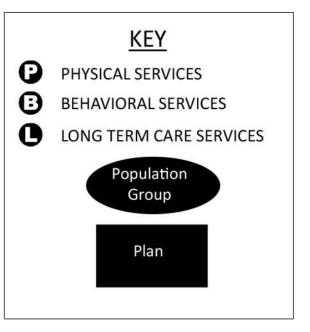
NO CHANGE AMERICAN INDIANS/DD (including SMI) Ρ B **RBHA** or DES DES TRBHA subcontractor





Members who are American Indians in Tribal ALTCS (Elderly/physical disability program)







CRS Members

- CRS members will have choice of ACC Plan
- CRS members will continue to be identified and designated by AHCCCS.
- 10-1-18 CRS members in DDD program will have CRS services transitioned to DDD United contract
 seamless
- Contract requires ACC plans to continue to have MSIC in network



Specific Transitions for American Indian Populations

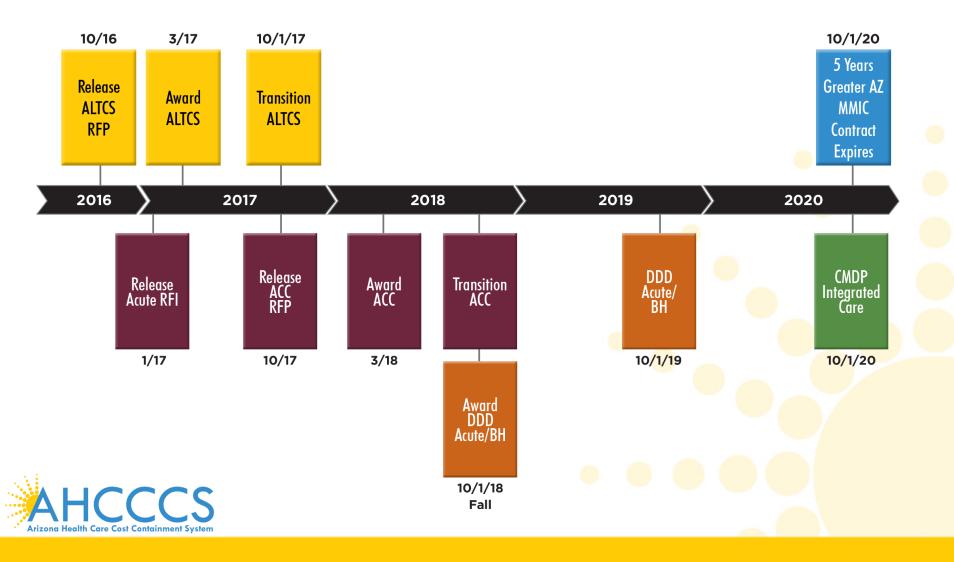
Current Health Plan	Enrollment on 10/1/2018	
Enrollment/Assignment	Member Movement	
CRS (acute and CRS services), TRBHA	ACC Plan	Approx. 367
AIHP, CRS (CRS services only) and TRBHA	AIHP and TRBHA	Approx. 673
AIHP, CRS and RBHA	AIHP	Approx. 272
AIHP and TRBHA	AIHP and TRBHA – No Change	
AIHP and RBHA	AIHP	Approx. 41,597
Acute Plan and TRBHA	ACC Plan	Approx. 12,288
Acute Plan and RBHA	ACC Plan	Approx. 37,000
CMDP and TRBHA	CMDP and TRBHA- No Change	
DDD and TRBHA	DDD and TRBHA-No Change	

AHCCCS Complete Care Timeline

What Happens Next?



AHCCCS Contract Timeline



Waiver Updates



AHCCCS Works

- AHCCCS Works submitted Dec. 2017
- Waiver included exemption for all American Indian members (approx. 44,000 members)
- Legislature enacted HB 2228 passed legislature annual waiver – applicability – exempt tribal members
- CMS issued guidance stating they would not approve exemption for tribal members
- Kentucky works waiver currently on hold after court ruling – CMS has open for 30 day public comment
- AHCCCS still discussing issue with CMS



SMI Determination Contract





SMI Eligibility Determination

 Individuals (aged 17.5+) who have a severe behavioral health disorder may be referred to an AHCCCS designated contractor to evaluate an individual's eligibility for SMI services.



SMI Eligibility Contractor

- In 2013, Crisis Response Network (CRN) became the SMI Eligibility Contractor in GSA-6 (Central); expanded Statewide in 2015.
- TRBHAs/Tribal ALTCS may utilize the SMI Eligibility Contractor to render SMI Determinations.



SMI Eligibility Contract Award

- CRN's current award expires 12/31/18.
- SMI Eligibility RFP issued by AHCCCS March 15, 2018.
- SMI Eligibility Contract <u>awarded to</u> <u>incumbent Contractor, CRN = no changes</u>:

Initial Term of Contract: January 1, 2019 - September 30, 2021

Potential Two (2) One-Year Options to Extend: Year Three: October 1, 2021 to September 30, 2022 Year Four: October 1, 2022 to September 30, 2023



Tribes and CRN

- TRBHAs/Tribal ALTCS continue to have the option to use CRN to render SMI Determinations
- The following Tribes have utilized CRN to render SMI Determinations:
 - Gila River
 - Navajo Nation
 - White Mountain Apache



CRN Contact Information

Tara Bingdazzo, Sr. Director

P: 602-845-3583 E: Tara.Bingdazzo@crisisnetwork.org

Katrell Redhouse, Tribal Liaison

P: 480-486-5412 Katrell.redhouse@crisisnetwork.org

Website: www.CrisisNetwork.org





American Indian Medical Home (AIMH)

American Indian Medical Home

- AHCCCS State Plan Amendment (SPA) for the AIMH Program was approved by Centers for Medicare and Medicaid Services (CMS) June2017
- Aims to help address health disparities between American Indians and other populations in Arizona by enhancing case management and care coordination
- Program for American Indians/Alaskan Natives (AI/AN) members enrolled in the American Indian Health Program (AIHP)



AIMH Provider Requirements

- Be an IHS or Tribal 638 facility
- Enter into an AIMH IGA
- Primary Care Case Management (PCCM) accreditation
 - National Committee for Quality Assurance (NCQA) or another appropriate accreditation body, OR
 - National IHS Improving Patient Care (IPC) program annual attestation
- Provide 24 hour telephonic access to the care team
- Dependent on selected tier level, provide diabetes education and/or participate in the State Health Information Exchange (HIE)



AIMH Service Tier Levels



- PCCM services
- 24 hour telephonic access to the care team PMPM \$13.87

Second Tier Level AIMH

- Tier 1 Plus Diabetes Education

PMPM \$15.96

Third Tier Level AIMH

- Tier 1 Plus Participates in State HIE

PMPM \$ 21.71

Fourth Tier Level AIMH

- Tier 2 plus Participates in State HIE

PMPM \$23.81



AIMH Member Requirements

- Title XIX only; not for KidsCare (AZ's Children's Health Insurance Program)
- AIHP enrolled members only
- Tribal ALTCS not included
- Participation is voluntary
- Member may discontinue at any time
- Member may switch AIMHs at any time
- Facility must keep signed AIMH form on file



AIMH Payments

- Chinle and PIMC are level 2 AIMH
- Chinle has 2,116 members enrolled
- Chinle monthly payment \$33,771
- Chinle annual payment based on that membership is \$405,000



AIMH Web Page & AIMH email

- IHS/638 Providers can send questions to <u>AIMH@azahcccs.gov</u>
- Review AIMH information at
 <u>https://www.azahcccs.gov/AmericanIndians/AmericanIndianMedicalHome/</u>
- State Plan Amendment (SPA)
 <u>https://www.azahcccs.gov/Resources/StatePlans/StatePlanAmendments.html</u>



FFS Ambulance Rates

- Inter Tribal Association of Arizona expressed concerns regarding ambulance reimbursement
- Jan. 2018 meeting with AHCCCS, DHS, ITAA, Tribal leaders and Tribal EMS providers
- ITAA adopted resolution on June 22, 2018 to support proposal put forward by state to provide payment parity for Tribal EMS providers
- More details in SPA update –



Dental Health Aide

- HB 2235 Formally recognizes and establishes scope of practice for Dental Health Aide Therapists (DHAT).
- Limits DHATs to practice settings or locations, including mobile units, that are operated or served by FQHCs/FQHC look-alikes, community health centers, a nonprofit dental practice or organization that provides dental care to low-income and underserved individuals.
- I.H.S/638 and Urbans are exempt from state licensure requirements
- January 1, 2019 Targeted Implementation



NEMT Update

- Reconvened tribal workgroup to look at a variety of issues.
- One of those issues evolving/shifting market being driven by Lyft and Uber
- Also continue to work with Tribal programs on supporting local requirements
- Continue to update policies

