

TRIBAL CONSULTATION ANNUAL REPORT
July 1, 2021 – June 30, 2022

Agency Overview

The Arizona Health Care Cost Containment System (AHCCCS) is the State of Arizona’s Medicaid program, a federal health care program jointly funded by the federal and state governments for individuals and families who qualify based on income level. AHCCCS is built on a system of competition and choice, and generally operates under an integrated managed care model, through a Research and Demonstration 1115 Waiver. AHCCCS-contracted managed care health plans, also known as Arizona Complete Care plans, coordinate and pay for physical and behavioral health care services for AHCCCS-enrolled members throughout the state. AHCCCS recognizes the unique government-to-government relationship of Tribal Nations and federal and state governments, and shares the common goal of decreasing health disparities and maximizing access to critical health services for American Indian and Alaska Natives. The agency also recognizes that federal and state laws and regulations will be implemented as they apply to tribes and tribal facilities receiving payments for services provided under the AHCCCS program.

Tribal Consultation Activities

In state fiscal year 2022, the agency engaged in the following outreach and consultation activities with tribal nations and their leaders, tribal members and representatives, Indian Health Service (IHS) facilities, P.L 93-638 tribally-operated health facilities, and Urban Indian Health Program facilities. This report is reflective of activities conducted by the Office of the Director (OOD), the Division of Community Advocacy and Intergovernmental Relations (DCAIR), the Division of Fee-for-Service Management (DFSM), the Division of Grants Administration (DGA), the Division of Health Care Management (DHCM), and the Division of Member and Provider Services (DMPS) as outlined by the AHCCCS Tribal Consultation Policy.

GOAL	OBJECTIVE	ACTIVITY and PERFORMANCE MEASURES
Establish communication channels with the elected leader of each Tribal Nation in Arizona and the appointed leadership for health services for each tribe.	<ol style="list-style-type: none"> 1. Host tribal consultation meetings in accordance with the consultation calendar and communicate information to tribal leadership. 2. Provide adequate information via meeting materials and announcements to tribes and their leadership prior to each meeting. 	<p>AHCCCS Quarterly Tribal Consultations: 4 Held on August 12, 2021, November 4, 2021, February 10, 2022, and May 12, 2022. All AHCCCS Tribal Consultation sessions were held virtually via Zoom due to COVID-19 distancing measures. All information and notices were posted to the AHCCCS Tribal Consultation website and notices were sent to tribal and IHS/638-tribally-operated program/Urban Indian Program (ITU) leaders via email.</p> <p>AHCCCS Special Quarterly Tribal Consultations: 3 Virtual ad hoc sessions were held via Zoom on: July 13, 2021 (topic: COVID-19 Agency Response and Emergency Triage, Treat, and Transport Model); September 28, 2021 (topic: 988 Program Implementation); January 31, 2022 (topic: FY23 Differential Adjusted Payment).</p>
Set timely consultation with Arizona Tribal Nations.	<ol style="list-style-type: none"> 1. Develop a calendar of Tribal Consultation meetings for the calendar year 2021-2022. 	<p>Development of a formal consultation meeting calendar occurred and was distributed to tribal leaders, members, and stakeholders via the AHCCCS Tribal Relations email list. Ad Hoc Special Tribal Consultation meetings were scheduled and communicated as deemed necessary.</p> <p>All AHCCCS Tribal Consultation meeting dates and materials are regularly posted to the AHCCCS Tribal Relations website.</p>

<p>Allow for consultation with tribes in the development of new policy or a change in policy with substantial tribal implications, including State Plan Amendments (SPA) and Waiver proposals that will be submitted to the Centers for Medicare and Medicaid Services (CMS).</p>	<ol style="list-style-type: none"> 1. Open each State Plan Amendment to public comment and written testimony for at least 45 days prior to submission. 2. Open each Waiver proposal to public comment and written testimony for at least 45 days prior to submission. 3. Send updated policy comment notifications to tribal leaders, members, and stakeholders on an ongoing basis. 	<p>State Plan Amendments Presented for Tribal Consultation: 44</p> <p>AHCCCS Waiver Proposals and/or Amendment Presentations for Tribal Consultation and Public Comment: 19</p> <p>The agency presented AHCCCS Waiver proposals, including renewals and amendments, and authorities sought under each, at AHCCCS Tribal Consultation sessions with tribes and ITUs, at CMS ITU Trainings, during AHCCCS Community Forums, and by request to the Arizona Advisory Council Indian Health Care.</p> <p>AHCCCS Medical Policy Manual (AMPM) and AHCCCS Contractor Operations Manual (ACOM) Policy distributions: 34</p> <p>The Tribal Relations Liaison and the AHCCCS policy team (housed in DHCM) distributed requests to the AHCCCS Tribal Relations email list for review and comment on policies found in the AMPM and ACOM.</p>
<p>Coordinate within the Agency to ensure consistent application of the Tribal Consultation Policy.</p>	<ol style="list-style-type: none"> 1. Provide AHCCCS Tribal Consultation Primer and Overview to AHCCCS Staff. 2. AHCCCS divisions present relevant programmatic information for Tribal Consultation. 	<p>The agency Tribal Liaison provides an overview of the history and importance of Tribal Consultation for all AHCCCS initiatives to internal managers. Ahead of each Tribal Consultation meeting, AHCCCS division leaders coordinate with the AHCCCS Tribal Liaison to ensure appropriate bi-directional discussions regarding programmatic and policy changes are entered into with tribes and/or ITUs. Additionally, the agency unrolled a new Tribal Relations sharepoint site, which houses recorded training presentations that employees may utilize to supplement their knowledge on tribal relations.</p> <p>Presentations and training modules available to internal staff include: <i>AHCCCS Tribal Relations Overview; Tribal Consultation Policy and Process; and, History and Background on Federal Indian Law and Policy.</i></p>
<p>Provide opportunity on an ongoing basis for tribes to request tribal consultation on a specific topic or issue affecting one or more tribe(s).</p>	<ol style="list-style-type: none"> 1. Government-to-Government meetings held with tribal leaders and/or their delegated officials as requested. 	<p>The agency held or participated in 8 government-to-government meetings with Tribal Elected and/or Executive Leadership outside of Tribal Consultation meetings by request for specific topics and various issues raised relating but not limited to: TRBHA Intergovernmental Agreements, including IGA listening sessions, crisis response and protocols on tribal lands, Interagency collaborative meetings with DDD, and ITCA Advisory Meetings..</p>

<p>Work with representatives from Tribal Nations, IHS facilities, Tribally-operated 638 Health Facilities, and Urban Indian Health Programs to increase their knowledge and understanding of AHCCCS programs and policies.</p>	<ol style="list-style-type: none"> 1. Meet with IHS Area leadership on a regular basis. 2. Provide continuous tribal outreach, education, technical assistance or training to resolve issues. 	<p>Quarterly IHS Area Director and Chief Medical Officer Meetings: 4 Held virtually via Zoom on August 20, 2021, November 12, 2021, February 10, 2022, and May 18, 2022. Attended by Area Directors, Chief Medical Officers, and/or their delegated staff from IHS Navajo Area Office, IHS Phoenix Area Office, and IHS Tucson Area Office.</p> <p>AHCCCS Director Meetings with the Arizona Advisory Council on Indian Health Care (AACIHC): 7 Director Snyder, or other representatives from the Office of the Director, regularly meets with the AACIHC leadership to discuss AHCCCS policy and/or programmatic changes. AACIHC leadership provides advisement and/or recommendations to AHCCCS on behalf of their council when necessary. Meetings were held on August 23, 2021, September 27, 2021, November 9, 2021, January 18, 2022, March 8, 2022, May 5, 2022, and June 20, 2022.</p> <p>Tribal Relations Presentations and Meetings with Tribal and Non-Tribal Stakeholders: 21 AHCCCS Complete Care Tribal Relations and Service Delivery Meetings (4); Arizona Advisory Council on Indian Health Care (6); State-Tribal Liaison Roundtable (2); CMS ITU Trainings (2); US Department of Health and Human Services Region IX Tribal Consultation; AHCCCS Overview/Trainings with tribal partners (6).</p> <p>DGA Meetings with IHS/Tribal 638 Health Facilities: 9 In October 2021, DGA hosted a Tribal Needs Assessment Webinar specific to the State Opioid Response II Grant. This webinar led to continual and routine meetings with the Pascua Yaqui and Gila River Tribal Regional Behavioral Health Authorities (TRBHAs) through July 2022. The 9-8-8 Implementation for the state is housed within DGA and the team attended routine AHCCCS Tribal Consultation sessions to apprise tribal leaders of the national and statewide implementation.</p> <p>DFSM Meetings with IHS/Tribal 638 Health Facilities: 16 IHS/Tribal 638 Quarterly Forums (4 held in fiscal year); Quarterly Tribal Regional Behavioral Health Authority (TRBHA) Meetings (4 held in fiscal year); Tribal ALTCS Quarterly Meetings (4 held in fiscal year); IHS/638 Quarterly Pharmacy Workgroup Meetings (4 held in fiscal year).</p>
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Agency Highlights

Under the guidance of Director Snyder, AHCCCS took a proactive approach to stakeholder relations to ensure public participation in agency initiatives and response during the COVID-19 Public Health Emergency. AHCCCS Tribal Relations has worked to ensure that outreach and engagement strategies are inclusive of and accessible by Tribal Nations, tribal leadership, community members, and stakeholders as we continue to hold consultation sessions and other tribal-specific meetings via a virtual platform. Targeted and strategic agency efforts have resulted in the highlighted outcomes below.

- Division of Community Advocacy and Intergovernmental Relations:
 - Routine Tribal Consultation sessions during SFY22. AHCCCS moved from a monthly meeting format back to a quarterly meeting format at the request of tribes as they transitioned their COVID-19 Response teams to a less heightened coverage. During the fiscal year, the agency held 7 Tribal Consultation sessions to apprise tribal leaders, ITU leadership, and the public, including AHCCCS members, of upcoming programmatic and

policy changes. The agency Tribal Liaison has worked to ensure that meetings were held virtually and were accessible for attendees with the option to join either via web or phone, and ensuring that meeting materials were made available ahead of each meeting for tribal and ITU leadership review.

- In SFY21, the AHCCCS Federal Relations team, housed within DCAIR, played a crucial role in assisting the agency to seek a broad range of emergency authorities under an 1135 waiver, 1115 waiver, Appendix K and State Plan Amendments to respond swiftly to the public health emergency. Many of these flexibilities, which helped to strengthen the provider workforce, remove barriers to care for AHCCCS members, and enhance Medicaid services and supports for vulnerable members, were maintained throughout SFY22 and. The team diligently considered all tribal-specific feedback received from Tribal Consultation sessions and other community forums to ensure that feedback and requests were included in the appropriate waiver requests and/or extensions throughout the year.

Challenges Encountered

AHCCCS understands that a large cross section of the tribal community are served by the AHCCCS health care delivery system and the agency has worked to overcome challenges presented to tribal communities by the COVID-19 Public Health Emergency. Some examples of specific challenges experienced, and solutions provided, include:

- Due to infrastructural issues related to lack of reliable internet and telecommunications service identified by tribal leaders, AHCCCS continues to work nation-to-nation regarding best practices for communications.
 - The agency provides ongoing updates to the AHCCCS COVID-19 [Frequently Asked Questions](#). Many questions and topics included that are specific to the tribal health care delivery system come directly from communications with tribal and I/T/U leadership.
 - AHCCCS makes frequent updates to the AHCCCS Tribal Relations and Tribal Consultation webpage to ensure that the most appropriate information is available for tribal and I/T/U leadership to review in the event they are unable to attend Tribal Consultation sessions. The agency tribal liaison also provides tribal and I/T/U leaders options to receive AHCCCS Tribal Consultation information ahead of each session, and options for teleconference as needed.
- The DFSM teams hold quarterly meetings with the TRBHAs. The ongoing COVID -19 Public Health Emergency continues to prevent some in-person collaboration that occurred before the pandemic, though all parties have worked around these barriers effectively.
- A primary challenge that the agency continues to navigate is competing priorities from our tribal partners. Oftentimes, tribal staff play numerous key roles and their responsibilities are often difficult to navigate on the same schedule as the state. AHCCCS acknowledges this potential barrier and continues to be flexible in our partnership with tribes and I/T/Us across the state.

AHCCCS Tribal Consultation Policy Revision

Pursuant to A.R.S. 41-2051 Section C, the AHCCCS Tribal Consultation Policy was developed and implemented. This policy ensures that the AHCCCS administration provides reasonable notice and opportunity for consultation with tribes prior to implementing policy changes that are likely to have a direct effect on tribes and tribal members. This policy was last amended on November 5, 2019 and last taken to Tribal Consultation on August 11, 2022. A copy of the current AHCCCS Tribal Consultation Policy can be found at www.azahcccs.gov/AmericanIndians/Downloads/consultations/AHCCCS Tribal Consultation Policy.pdf.

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