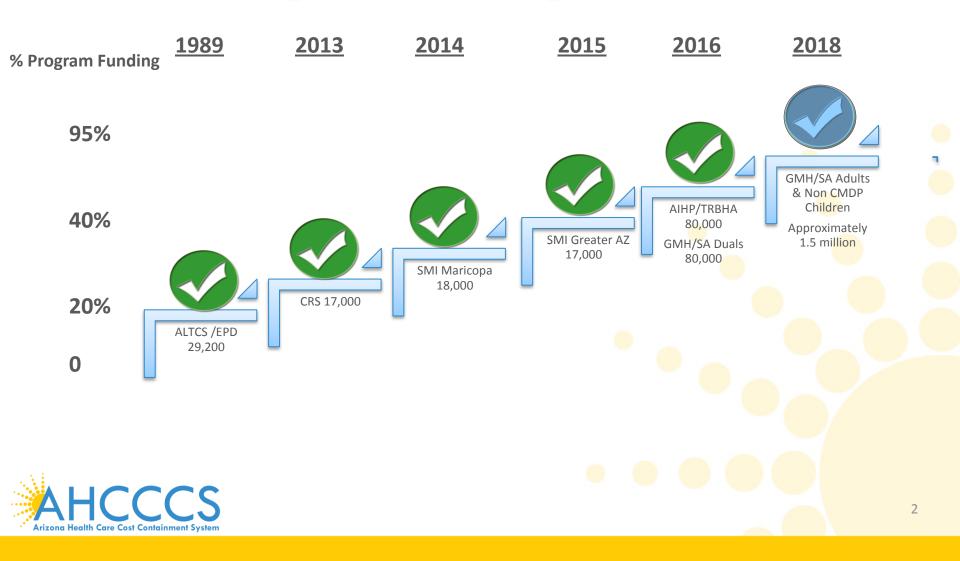
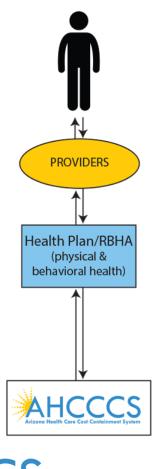


AHCCCS Update

MCO Integration Progress To Date



Integration at all 3 Levels



Arizona Health Care Cost Containment System



- Licensure changes
- Provider payment incentives
- Targeted Investment \$300M

• ALTCS – EPD

- Individuals with SMI
- Non-SMI Dual Eligible Members
- AIHP Integration for Tribal Members
- Children's Rehabilitative Services (one plan)
- Oct 2018 ACC/AIHP 1.5M Children/Adults
- ALTCS DD 2019/2020 Foster Children 2020
- Administrative Simplification ADHS/BHS joins AHCCCS Administration
- Grant/Housing Funding into Medicaid System

Post 10-1 Issues

- 1. COE-COT-Crisis
- Claims Payment to BH providers and ICs- paid pended – denied
- 3. Ongoing Network Development
- 4. Transportation NEMT



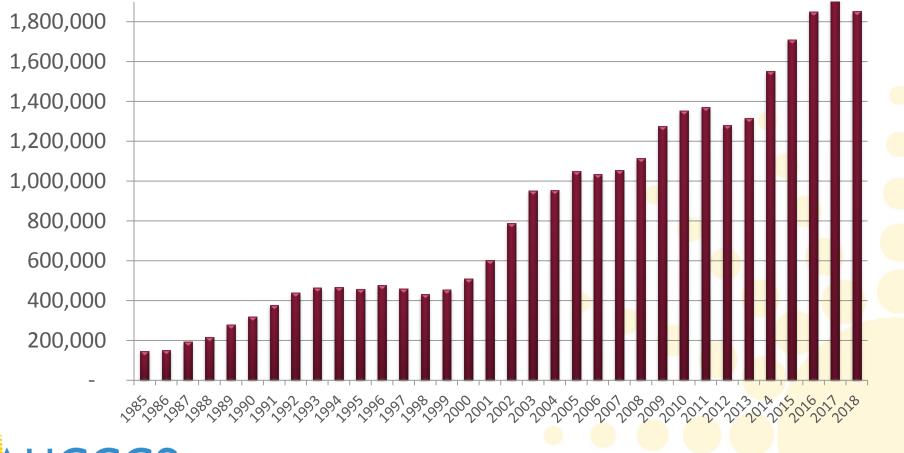
Budget Update



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

5

AHCCCS Population as of July 1, 1985 – 2018



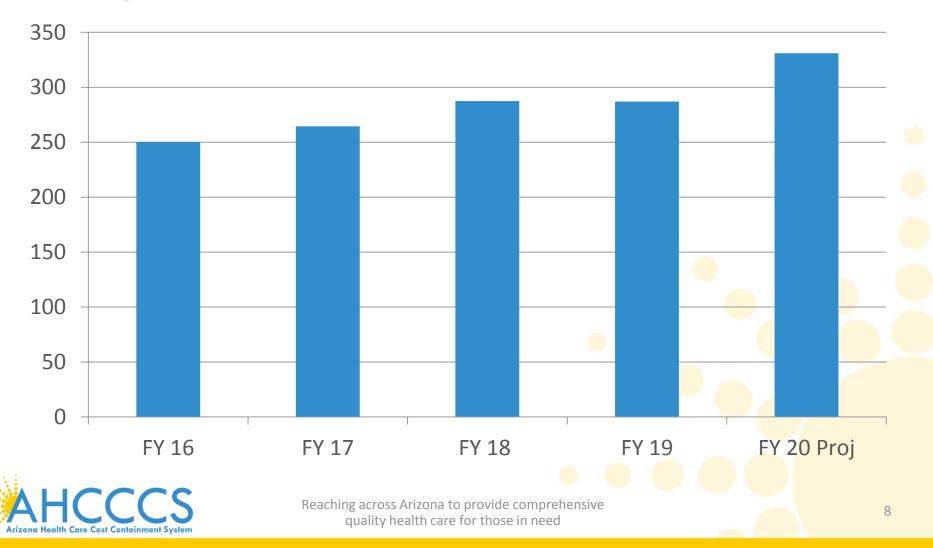


FY 20 Request

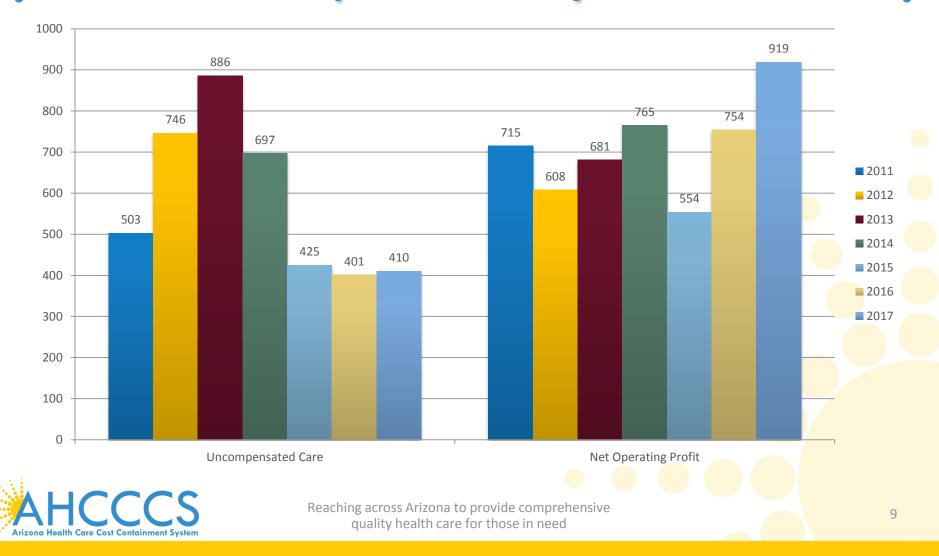
- Population and cost growth \$58
- Population down 15 out of last 22 months
- KidsCare \$8 m
- MCHIP \$12 m
- No Health Insurer Fee (\$18) m
- Transfer BH Funding DD (\$31) m
- Total Increase = \$29



Hospital Assessments



Hospital uncompensated care and profitability

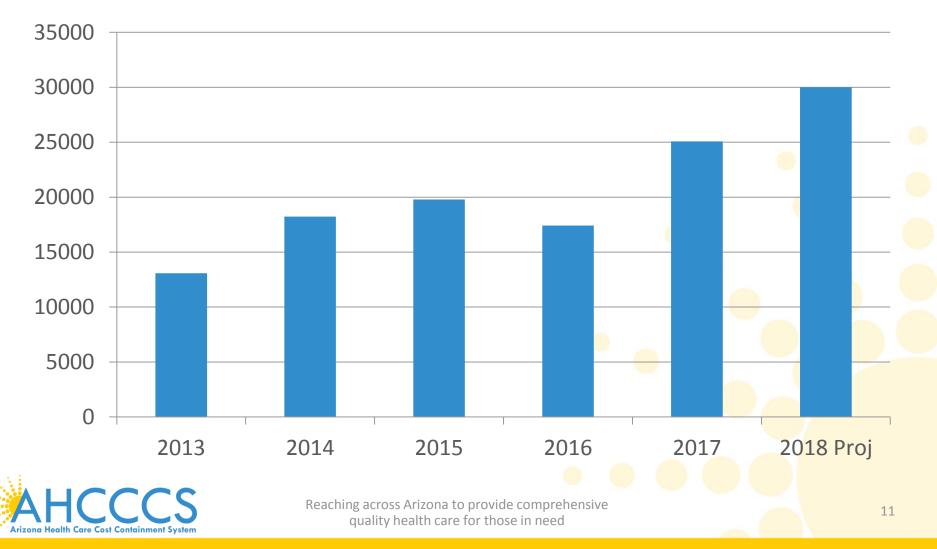


Other Issues

- PBM
- Any willing provider
- Provider Rates HCBS and other rates impacted by minimum wage/economy



Lifeline Calls

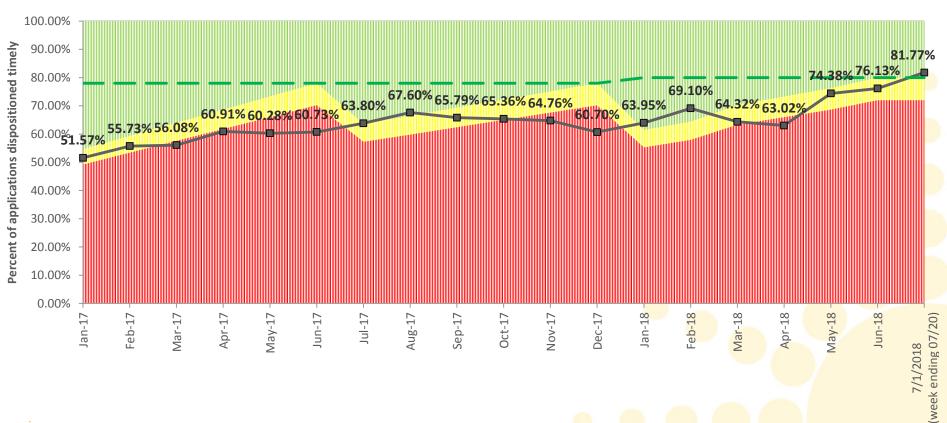




AHCCCS Arizona Health Care Cost Containment System

AMS Success! ALTCS Applications

Percent of ALTCS Applications Dispositioned in 45 Calendar Days or Less





Month of Disposition

Reducing Provider Burden

- Leverage Hawaii partnership for new Provider Registration System – 2019
- Demographic User streamline reporting for BH
- Evaluating some of the CMS proposals
- VBP streamlining



Member Burden Reduction

- Renewal Processing
 - Arizona is one of 7 states that currently process at least 75% of its Medicaid renewals automatically through the system with no action required by a State worker
 - 2016 75% Renewed Automatically
 - 2017 76% Renewed Automatically
- Arizona is one of 12 states where:
 - Consumers can start/stop an application and return later to complete
 - Consumers can scan and upload documents
 - Online portal available for application assistors
 - Can be used for seniors and individuals with disabilities
 - Can be used for at least one non-health program (such as SNAP or TANF)





Arizona Commonwealth Study Results

Commonwealth Study Summary

- Arizona overall went from 34 in last study to 29
- Improved on 15 measures
- Down in 3
- 12 no change
- Bottom quartile 12 measures
- Top quartile 7



Commonwealth Study Summary

Access ranked 42

- Bottom quartile
- Uninsured children
- Adults without usual source of care

Avoidable hospital use - 17

- None in bottom quartile
- Healthy lives 17
- Bottom quartile
- Suicide alcohol and drug use deaths



Commonwealth Study Summary

Prevention 39th – Bottom quartile

- Adults without all recommended vaccines
- Children without medical home
- Children who did not receive needed mental Health care
- Hospital patients did not receive patient centered care
- Home health patients without improved mobility
- Mentally ill adults who did not receive treatment

Disparity 13 – bottom quartile

- Uninsured children
- Adults without usual source of care
- Avoidable ED use duals FFS data



Top 10 Trends/Strategies

- 1. Role of Managed care will only continue to grow and for more complex populations including strategies for duals
- 2. The Feds and states will enhance efforts around quality measures/transparency for both states and plans
- 3. States continue to look more and more at the important role of BH services social determinants of health and integration of those services
- More states will expand coverage some through work requirements policies – VA – Utah – Idaho – KS – some will expand Medicaid into portions of marketplace
- 5. States will continue to pursue flexibility Work requirements/community engagements



Top 10 Continued

Arizona Health Care Cost Containment System

6. VBP is still a priority and very much a work in progress

7. Leadership turnover has been a challenge and with large gubernatorial election cycle will be even more pronounced near term

8. Overall current economic growth has resulted in slowing enrollment growth – that said states are not ready for the next recession

9. During the next economic downturn states/providers/ other policy priorities are going to pursue Pharma changes

10. States have an important role to play in supporting HIE and other data aggregation